

Costs Spike for 2nd- and 3rd-Line ARVs and Late Treatment

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The cost to treat HIV-positive people with second- and third-line antiretrovirals (ARVs) jumps by a respective 24 and 41 percent compared with first-line therapies, reports the National AIDS Treatment Advocacy Project (NATAP). Treatment for those who enter treatment with CD4s below 100 is also nearly twice as expensive as for those beginning treatment with CD4s above 350.

Reporting their findings at the 53rd ICAAC Interscience Conference on Antimicrobial Agents and Chemotherapy in Denver, researchers analyzed data from two cohorts selected from the MarketScan Commercial Claims and Encounters Database, which covered a span from 2007 to 2011, and from the MarketScan Lab Database, including data from 2007 to 2010. The first group followed 9,931 participants as they progressed from first- to third-line therapy. The second group included 486 participants on ARVs who provided data on CD4 counts, for a total of 1,503 tests.

After adjusting for such factors as an AIDS diagnosis, sex, age, region of the country and type of health insurance, the researchers found that the average cost per year to treat people with HIV (including all care, not just the cost of medications) amounted to \$28,861 for those taking first-line therapy, \$35,805 for second-line and \$40,804 for third-line.

After adjusting for the same variables, the researchers found that the average cost to treat someone who began treatment with more than 350 CD4 cells was \$2,526 per month. For those who began treatment with between 100 and 350 CD4s, the monthly cost was \$2,378, and if CD4s were less than 100 the price jumped 92 percent, to \$4,860.

To read the NATAP story, [click here](#).
