

**Medline@Citation****Cost savings of patients with a MACIS score lower than 6 when radioactive iodine is not given.****Pace-Asciak PZ, Payne RJ, Eski SJ, Walfish P, Damani M, Freeman JL**

Archives of otolaryngology--head & neck surgery

200709

133(9):870-3

Language: eng

Country: United States

Department of Otolaryngology, Mount Sinai Hospital, 600 University Avenue, Toronto, Ontario, Canada. ppaceasc@hotmail.com

OBJECTIVE: To assess the cost savings if the current policy of treating patients with a MACIS (metastases, age, completeness of resection, invasion, and size) score lower than 6 using radioactive iodine (RAI) was changed to reflect the findings of recent studies. **DESIGN:** Retrospective medical record review. **SETTING:** Mount Sinai Hospital, Toronto, Ontario. **PATIENTS:** Between January 1, 2002, and July 1, 2005, 199 consecutive patients with a MACIS score lower than 6 who received RAI treatment after total thyroidectomy. **MAIN OUTCOME MEASURES:** Patient demographics were analyzed. Costs for the dose of RAI, hospital stay, and health insurance claims were included in the calculations. **RESULTS:** For 199 consecutive patients, the cost for sodium iodide 131 treatment totaled Can\$161 588, and the required 2-day stay in isolation totaled Can\$764 558. The overall cost to the health care system was Can\$934 106, which translates into approximately Can\$4694 per patient. **CONCLUSIONS:** By following the recommendations of recent evidence-based studies and by ceasing to treat patients with a MACIS score lower than 6 after total thyroidectomy using RAI, cost savings can be accrued for health care systems involved in the treatment of thyroid cancer. Alternate strategies, such as treating patients who need RAI therapy on an outpatient basis and reducing the dose of RAI, can lower costs as well.

PMID: 17875852

Adenocarcinoma, Follicular, Adenocarcinoma, Papillary, Adolescent, Adult, Aged, Combined Modality Therapy, Cost Savings, Evidence-Based Medicine, Female, Hospital Costs, Humans, Iodine Radioisotopes, Length of Stay, Male, Middle Aged, National Health Programs, Neoplasm Invasiveness, Ontario, Radiotherapy, Adjuvant, Retrospective Studies, Severity of Illness Index, Thyroid Neoplasms, Thyroidectomy