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Cost-effectiveness analysis of abrocitinib compared with other systemic treatments for severe atopic dermatitis in Spain

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Table S1 Annualized rate of adverse events

Adverse event	Recurrence	Abrocitinib 200 mg	Dupilumab 300 mg	Tralokinumab 300mg	Baricitinib 2 mg	Baricitinib 4 mg	Upadacitinib 15mg	Upadacitinib 30mg
Acne	Each cycle	20.1%	0.0%	0.0%	3.0%	11.3%	14.7%	39.5%
Conjunctivitis	Each cycle	4.3%	13.6%	0.0%	0.0%	0.0%	0.0%	0.0%
Atopic dermatitis	Each cycle	4.3%	18.2%	8.3%	0.0%	0.0%	14.7%	27.8%
Headache	Tx initiation only	20.1%	4.5%	16.0%	0.0%	0.0%	21.5%	27.8%
Injection site reaction	Tx initiation only	0.0%	14.5%	8.3%	0.0%	0.0%	0.0%	0.0%
Nasopharyngitis	Each cycle	20.1%	22.7%	0.0%	31.6%	41.8%	27.8%	21.5%
Nausea	Tx initiation only	31.8%	0.0%	0.0%	0.0%	0.0%	7.6%	21.5%
Oral herpes	Each cycle	2.9%	3.6%	0.0%	11.5%	11.3%	0.0%	0.0%
Sinusitis	Each cycle	0.0%	1.8%	0.0%	0.0%	0.0%	0.0%	0.0%
Upper respiratory tract infection	Each cycle	12.4%	10.0%	23.2%	22.0%	8.5%	33.9%	33.9%
Urinary tract infection	Each cycle	9.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Folliculitis	Each cycle	5.7%	1.8%	0.0%	11.5%	16.6%	0.0%	0.0%

References	Assumptions	Bieber, 2021[24]	Blauvelt, 2017 [35]	Wollenberg, 2019 [36]	Reich, 2020 [37]	Reich, 2020 [37]	Guttman- Yassky, 2020 [38]	Guttman- Yassky, 2020 [38]
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Tx: treatment

Table S2 Distribution and parameters employed in the probabilistic sensitivity analysis

Input	Distribution	Comparator	Parameters
Response at 16 weeks	Beta	Abrocitinib 200 mg	α : 11 β : 4
		Dupilumab 300 mg	α : 17 β : 10
		Tralokinumab 300 mg	α : 22 β : 23
		Baricitinib 2 mg	α : 26 β : 36
		Baricitinib 4 mg	α : 23 β : 26
		Upadacitinib 15 mg	α : 14 β : 7
		Upadacitinib 30 mg	α : 8 β : 2
Response at 52 weeks	Beta	Abrocitinib 200 mg	α : 41 β : 2
		Dupilumab 300 mg	α : 42 β : 9
		Tralokinumab 300 mg	α : 42 β : 9
		Baricitinib 2 mg	α : 7 β : 1
		Baricitinib 4 mg	α : 3 β : 0
		Upadacitinib 15 mg	α : 21 β : 6
		Upadacitinib 30 mg	α : 10 β : 1
Annual loss of response	Beta	Abrocitinib 200 mg	α : 41 β : 506
		Dupilumab 300 mg	α : 33 β : 101
		Tralokinumab 300 mg	α : 33 β : 101
		Baricitinib 2 mg	α : 34 β : 108
		Baricitinib 4 mg	α : 39 β : 313
		Upadacitinib 15 mg	α : 31 β : 75
		Upadacitinib 30 mg	α : 38 β : 217
Discontinuation rates (0-52 Weeks)	Beta	All comparators	α = 41,31; β = 557,37
Discontinuation rates, post-initiation period (+52 Weeks)	Beta	All comparators	α = 24; β = 357
Medical resource utilization: responders	Gamma	All comparators	
Hospitalization			α = 0.1837; β = 1.6333
Emergency room			α = 0.1111; β = 5.4000
Primary care			α = 1.1857; β = 8.2653
Medical resource utilization: non-responders	Gamma	All comparators	
Hospitalization			α = 0.2066; β = 2.4200
Emergency room			α = 0.1759; β = 7.3923
Primary care			α = 0.8279; β = 25.6080
Medical resource: cost per visit	Gamma	All comparators	
Hospitalization			α = 100; β = 30.5993
Emergency room			α = 100; β = 2.6838
Primary care			α = 100; β = 0.4160
Medical resource utilization: annual cost	Gamma	All comparators	
Responders			α = 44.4444; β = 3.8968
Non-Responders			α = 44.4444; β = 94.3535

AE management costs	Gamma	All comparators	$\alpha = 44.4444; \beta = 1.6803$
ophthalmology visit dermatology visit			$\alpha = 44.4444; \beta = 1.8869$
Baseline utility			$\alpha = 8.9937; \beta = 5.6154$
Utility weight, treatment responders	Beta	All comparators	$\alpha = 2.1919; \beta = 0.3067$
Utility weight, treatment non-responders			$\alpha = 4.7801; \beta = 1.3665$
Population norms (EQ-5D-3L):			
age 18-24	Beta	All comparators	$\alpha = 0.8180; \beta = 0.0150$
age 25-34			$\alpha = 1.5250; \beta = 0.0391$
age 35-44			$\alpha = 4.1510; \beta = 0.2231$
age 45-54			$\alpha = 6.7770; \beta = 0.5654$
age 55-74			$\alpha = 9.5040; \beta = 1.1031$
age +75			$\alpha = 21.1190; \beta = 5.9220$

AE: adverse event; EQ-5D-3L: EuroQoL 5-Dimension 3-Level

Table S3 Alternative scenarios with variations in discontinuation rates

Annual discontinuation probability	Abrocitinib 200mg	Dupilumab 300 mg	Tralokinumab 300 mg	Baricitinib 2 mg	Baricitinib 4 mg	Upadacitinib 15 mg	Upadacitinib 30 mg
Scenario 1							
16-52 weeks	6.9%	16.9%	16.9%	16.9%	16.9%	16.9%	16.9%
52 weeks +	16.3%	6.3%	16.3%	16.3%	16.3%	16.3%	16.3%
Scenario 2							
16-52 weeks	6.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%
52 weeks +	4.3%	6.3%	4.3%	4.3%	4.3%	4.3%	4.3%
Scenario 3							
16-52 weeks	6.9%	8.9%	8.9%	6.9%	6.9%	6.9%	6.9%
52 weeks +	8.3%	6.3%	6.3%	8.3%	8.3%	8.3%	8.3%
Scenario 4							
16-52 weeks	6.9%	4.9%	4.9%	6.9%	6.9%	6.9%	6.9%
52 weeks +	4.3%	6.3%	6.3%	4.3%	4.3%	4.3%	4.3%

*Discontinuation scenarios: 1. Maintaining the values of abrocitinib for 16-52 weeks (6.9%) and dupilumab for +52 weeks (6.3%) and increasing the other values by 10%; 2. Maintaining the values of abrocitinib for 16-52 weeks (6.9%) and dupilumab for +52 weeks (6.3%) and decreasing the other values by 2%; 3. Using the same values for the same drug type, and increasing the others by 2%; 4. Using the same values for the same drug type, and decreasing the others by 2%.

Table S4 5-year time horizon PSA results

Results	Abrocitinib 200 mg vs					
	Dupilumab 300 mg	Tralokinumab 300 mg	Baricitinib 2 mg	Baricitinib 4 mg	Upadacitinib 15 mg	Upadacitinib 30 mg
Dominant	87.9%	88.8%	83.0%	66.8%	81.8%	49.5%
Cost-effective	0.3%	0.5%	5.7%	13.9%	2.3%	0.0%
Not cost-effective	0.0%	0.0%	0.5%	6.6%	1.1%	0.0%
Less costly, less effective	11.8%	10.7%	10.1%	7.9%	9.9%	50.5%
Dominated	0.0%	0.0%	0.7%	4.8%	4.9%	0.0%

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Conflicts of interest

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