# Do we really know the economic burden of multimorbidity?: A view from an indirect cost perspective

Jayeshkumar Patel, Nazneen Shaikh, Rowida Mohamed School of Pharmacy, West Virginia University



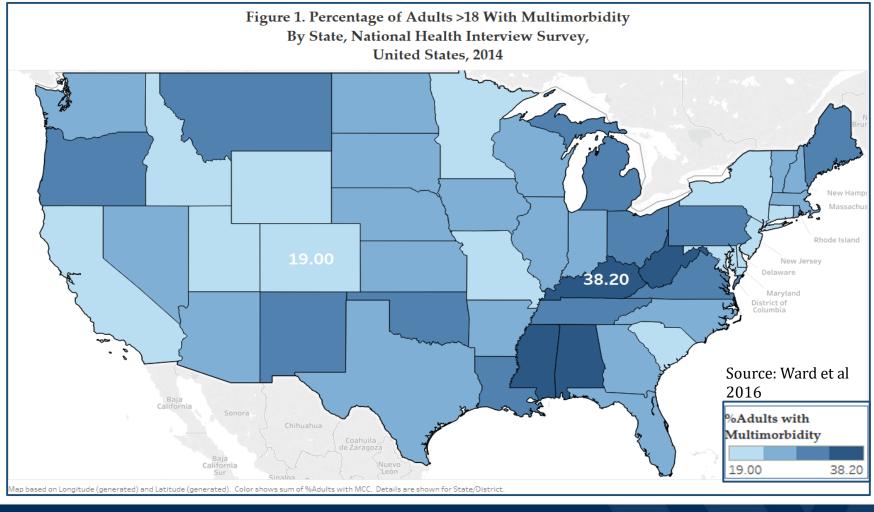
# Background



### Multimorbidity

- Multimorbidity = "co-occurrence of >2 chronic conditions within one person, where one is not necessarily central than the others"
- Care management challenging
  - Substantial costs (66% of total health care spending in the US)
  - Requires to move beyond the traditional focus of care
- Leads to
  - Poorer health outcomes
  - Worsened functional status and quality of life
  - Limitations in employment, and reduced income

### Prevalence of Multimorbidity



- 25% of US adults in 2014
- Expected to grow to 81 million by 2020



### **Indirect Costs**

- Indirect costs = "individuals' loss of production of goods and services due to their disease"
- Four potential sources:
  - Absenteeism- voluntary or involuntary absence from work
  - <u>Presenteeism</u>- reduced productivity despite being at work
  - <u>Disability-</u> lost productivity due to disability
  - Premature mortality- present value of future earnings lost due to mortality
- Lost productivity of caregivers- important but often overlooked

### Multimorbidity and Indirect Costs

- Majority of the multimorbid conditions affect working age population
- Important to health services researchers
  - Magnitude of the disease/condition
  - Justify intervention programs
  - Research fund allocation (NIH, the Congress, NIA, NINR, NHLBI, VA, NCI)
  - Inform decision making and health policy
- A systematic review by Wang et al (2018) no studies estimated indirect costs
- Indirect costs- immense value for cost-of-illness studies from a societal perspective

### Hypotheses

- 1) The indirect costs associated with multimorbidity are unexplored
- 2) Studies underestimate indirect costs associated with multimorbidity

### Methods



### Exclusion Criteria (A priori)

- Focused on an index disease and comorbidities
- Did not include a population with multimorbidity
- Did not evaluate indirect costs associated with multimorbidity
- Non-US studies

### Data Sources- HSRProj Excel Database

- Downloaded HSRProj Database Excel file
- Imported file in Python
- Title, Abstract, Keywordlist, and MeSHwordlist fields searched
- Accuracy checked manually using conditional formatting and custom sort in Excel and online database search

	Keywords	MeSH Terms
Multimorbidity	multimorbidity, multi-morbidity,	comorbidity
	comorbidity, co-morbidity, multiple	
	chronic	
	conditions/illnesses/diseases,	
	multiple long-term/long term	
Lost	absenteeism, sick leave*, sickness	absenteeism,
Productivity	absen*, illness day*, absence day*,	employment,
	productivity loss*, work abilit*, work	premature mortality
	disabilit*, early retirement*,	
	premature mortal*, workplace*,	
	labor*, occupation*, job*	
Costs/	spending, cost-of-illness, cost of	forecasting, health
Expenditures	illness, indirect	expenditures, costs
	cost/burden/expenditure, cost/s	and cost analysis,
		cost of illness

### **Additional Data Sources**

- To identify a gap in the published literature:
  - Systematic search of three other online databases with the help of a librarian at WVU HSC
    - o PubMed
    - o Ovid Medline
    - Web of Science
- Studies combined and duplicates removed using a reference management software (confirmed using another software)
- Titles and abstracts screened by two independent reviewers
- Full-text articles retrieved, if necessary

A detailed list of key words and MeSH terms used to search each database is provided at the end of this presentation

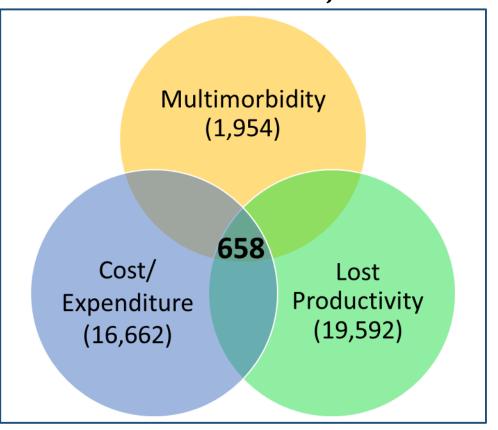
### Results



### Research Gap in HSRProj Database

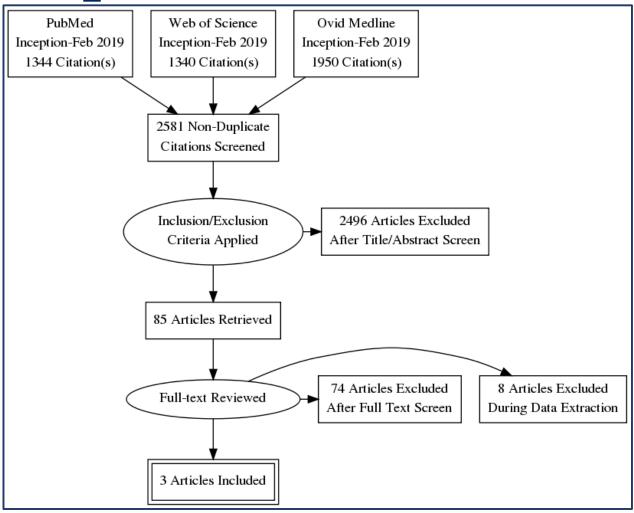
- HSRProj Excel Database
- 658 projects identified
- None of the identified projects evaluated indirect costs associated with multimorbidity
- Reasons for exclusion of studies
  - Did not include multimorbid population (n=271)
  - Did not evaluate indirect costs associated with multimorbidity (n= 387)

Figure 2. Search Terms and Number of Identified Studies in Downloaded HSRProj Excel Database



### Research Gap in Published Literature

Figure 3. Study Selection Flow Chart from Additional Data Sources



### Research Gap in Published Literature

Identified Studies from Published Literature					
Study	Method Used to Measure Indirect Costs	Health Conditions Studied			
Patrick et al 2007	Absenteeism	Obesity with 2 or more of the following conditions: hyperlipidemia, hypertension, and diabetes			
Guy et al 2017	Absenteeism, Lost Productivity Due to Disability	Cancer with any other physical or mental chronic health condition			
Druss 2000	Absenteeism, Lost Productivity Due to Disability	Depression with any other physical or mental chronic health condition			

- Indirect costs associated with presenteeism, premature mortality, caregiver burden- not evaluated
- Indirect costs of most common multimorbid conditions not assessed:
  - physical (hypertension, high cholesterol, and diabetes)
  - mental (depression and anxiety)
  - Physical and mental (arthritis, osteoporosis, depression, anxiety)

# Significance of the Research Gap



# What is the Real Economic Burden of Multimorbidity?

- Knowledge of indirect costs along with direct costs is required
  - o Identify the magnitude of the problem
  - Optimal allocation of resources
- · Healthcare providers, policy makers, patients, and payers can benefit
  - Justify collaborative care
  - o Improve preventive and treatment efforts
  - Reduce future direct and indirect costs
- Employees and employers
  - Wellness programs
- Government
  - o Efforts to improve labor force participation and tax revenue

## Proposed Solutions



### **Potential Solutions**

- Identify indirect costs associated with the most common clusters of physical and/or mental health conditions
  - Compare indirect costs of concordant and discordant multimorbid conditions
- Use publicly available datasets like Medical Expenditure Panel Survey and National Health Interview Survey
- Create data linkages between existing registries, insurance claims, medical records, and surveys to estimate indirect costs
- Evaluate caregiver burden as part of indirect economic burden assessment
- Adopt the established definition of multimorbidity for uniformity in findings (WHO, AMS)

### Acknowledgements

- Dr. Usha Sambamoorthi (Advisor, Professor, WVU HSC)
- Ms. Anna Crawford (Associate University Librarian, WVU HSC)

### References

Ward BW, Black LI. State and Regional Prevalence of Diagnosed Multiple Chronic Conditions Among Adults Aged ≥18 Years — United States, 2014. MMWR Morb Mortal Wkly Rep. 2016;65(29):735-738. doi:10.15585/mmwr.mm6529a3

Whiteford HA, Degenhardt L, Rehm JJ, et al. Global burden of disease attributable to mental and substance use disorders: findings from the Global Burden of Disease Study 2010. *Lancet*. 2013;382(2985213r, l0s, 0053266):1575-1586. doi:10.1016/S0140-6736(13)61611-6

Tackling the burden of chronic diseases in the USA. *Lancet (London, England)*. 2009;373(9659):185. doi:10.1016/S0140-6736(09)60048-9

Liljas B. How to Calculate Indirect Costs in Economic Evaluations. *Pharmacoeconomics*. 1998;13(1):1-7. doi:10.2165/00019053-199813010-00001

Hemp P. Presenteeism: at work--but out of it. *Harv Bus Rev*. 2004;82(10):49-58, 155. http://www.ncbi.nlm.nih.gov/pubmed/15559575. Accessed April 19, 2019.

Jacobs P, Fassbender K. The measurement of indirect costs in the health economics evaluation literature. A review. *Int J Technol Assess Health Care*. 1998;14(4):799-808. http://www.ncbi.nlm.nih.gov/pubmed/9885468. Accessed April 18, 2019.

Boyd CM, Fortin M. Future of multimorbidity research: How should understanding of multimorbidity inform health system design? Public Health Rev. 0112.



### References

Goodman RA, Parekh AK, Koh HK. Toward a more cogent approach to the challenges of multimorbidity. *Ann Fam Med*. 2012;10(2):100-101. doi:10.1370/afm.1391

The Academy of Medical Sciences. *Multimorbidity: A Priority for Global Health Research*. London; 2018. https://acmedsci.ac.uk/policy/policy-projects/multimorbidity. Accessed April 19, 2019.

Wang L, Si L, Cocker F, Palmer AJ, Sanderson K. A Systematic Review of Cost-of-Illness Studies of Multimorbidity. *Appl Health Econ Health Policy*. 2018;16(1):15-29. doi:10.1007/s40258-017-0346-6

Barile JP. Patterns of Chronic Conditions and Their Associations With Behaviors and Quality of Life, 2010. Prev Chronic Dis. 2015;12. doi:10.5888/PCD12.150179

HSRProj (Health Services Research Projects in Progress). National Institutes of Health: US National Library of Medicine. <a href="https://www.cf.nlm.nih.gov/hsr-project/home-proj.cfm">https://www.cf.nlm.nih.gov/hsr-project/home-proj.cfm</a>

Tableau Public: Free Data Visualization Software. <a href="https://public.tableau.com/en-us/s/">https://public.tableau.com/en-us/s/</a>

Python Software Foundation. Python Language Reference, version 3.7. Available at <a href="https://www.anaconda.com/distribution/">https://www.anaconda.com/distribution/</a>

Microsoft Excel for Office 365. Available at: <a href="https://products.office.com/en-us/excel">https://products.office.com/en-us/excel</a>

PRISMA Flow Diagram Generator. Available at <a href="http://prisma.thetacollaborative.ca/">http://prisma.thetacollaborative.ca/</a>



# Thank you!



### List of Abbreviations

**US: United States** 

NIH: National Institutes of Health

NIA: National Institute on Aging

NINR: National Institute of Nursing Research

NHLBI: National Heart, Lung, and Blood Institute

VA: US Department of Veterans Affairs

**NCI**: National Cancer Institute

MeSH: Medical Subject Heading

WVU: West Virginia University

**HSC:** Health Sciences Center

WHO: The World Health Organization

AMS: The Academy of Medical Sciences



### **Appendix- Search Strategy**

Online HSRProj Database					
(((multimorbidity) OR (multi-morbidity) OR (comorbidity[MeSH]) OR (co-morbidity) OR ((multiple) AND (chronic OR long-term OR "long term") AND (illness* OR disease* OR condition*)))	AND	(("Sick Leave"[Mesh]) OR (Sick Leave*) OR (Sickness Absen*) OR (Sick Absen*) OR (Sick Day*) OR (Work Absen*) OR (Work Leave*) OR (Illness Day*) OR (Illness absen*) OR ("Absenteeism"[Mesh]) OR (Absenteeism) OR (Absence Day*)  OR (Absent Day*) OR (Presenteeism) OR (Work Productivit*) OR (Productivity Loss*) OR (Work Abilit*) OR (Work Disabilit*) OR (Disability Pension*) OR (Early Retirement*) OR ("Mortality, Premature"[Mesh]) OR (Premature Mortal*) OR (Premature Death*) OR ("Employment"[Mesh]) OR (Employment*) OR (Employee*) OR (Workloss*) OR (Workplace*) OR (Workday*) OR (Worker*) OR (Labour*) OR (Labor*) OR (Occupation*) OR (Job*))	AND	((forecasting[MeSH]) OR (health expenditures[MeSH]) OR (spending) OR (costs and cost analysis[MeSH]) OR (cost-of-illness) OR (cost of illness) OR (indirect cost) OR (indirect burden) OR (absenteeism[MeSH] OR (Cost OR Costs OR Economic* OR Indirect Expenditure* OR Indirect Expense* OR "Cost of Illness"[Mesh] OR "Costs and Cost Analysis"[Mesh]))	

### **Appendix- Search Strategy**

PubMed PubMed					
(((multimorbidity[Title/Abstract]) OR (multimorbidity[Title/Abstract]) OR (comorbidity[MeSH]) OR	(("Sick Leave" [Mesh]) OR (Sick Leave* [Title/Abstract]) OR (Sick Absen* [Title/Abstract]) OR (Sick Day* [Title/Abstract]) OR (Work Absen* [Title/Abstract]) OR (Work Leave* [Title/Abstract]) OR (Illness Day* [Title/Abstract]) OR (Illness absen* [Title/Abstract]) OR ("Absenteeism" [Mesh]) OR (Absenteeism [Title/Abstract]) OR (Absenteeism [Title/Abstract]) OR (Presenteeism [Title/Abstract]) OR (Work Productivit* [Title/Abstract]) OR (Productivity Loss* [Title/Abstract]) OR (Work Abilit* [Title/Abstract]) OR (Work Disabilit* [Title/Abstract]) OR (Disability Pension* [Title/Abstract]) OR (Early Retirement* [Title/Abstract]) OR ("Mortality, Premature" [Mesh]) OR (Premature Mortal* [Title/Abstract]) OR (Premature Death* [Title/Abstract]) OR ("Employment" [Mesh]) OR (Employment* [Title/Abstract]) OR (Workplace* [Title/Abstract]) OR (Workday* [Title/Abstract]) OR (Worker* [Title/Abstract]) OR (Labour* [Title/Abstract]) OR (Labor* [Title/Abstract]) OR (Occupation* [Title/Abstract]) OR (Job* [Title/Abstract]) OR	expenditures[MeSH]) OR (nealth expenditures[MeSH]) OR (spending[Title/Abstract]) OR (costs and cost analysis[MeSH]) OR (cost-of-illness[Title/Abstract]) OR (cost of illness[Title/Abstract]) OR (indirect cost[Title/Abstract]) OR (indirect burden[Title/Abstract])  AND OR (absenteeism[MeSH] OR (Cost[Title/Abstract] OR Costs[Title/Abstract] OR Economic*[Title/Abstract] OR			

### **Appendix- Search Strategy**

#### Web of Science (Using Search Terms as Topics)/ Ovid Medline (Using multi-field search)

("multimorbidity" OR
"multi-morbidity" OR
"comorbidity" OR "comorbidity" OR
("multiple" AND
("chronic" OR "longterm" OR "long term")
AND ("illness\*" OR
"disease\*" OR
"condition\*")))

AND

("Sick Leave" OR "Sick Leave\*" OR "Sickness Absen\*" OR "Sick Absen\*" OR "Sick Day\*" OR "Work Absen\*" OR "Work Leave\*" OR "Illness Day\*" OR "Illness absen\*" OR "Absenteeism" OR "Absenteeism" OR "Absenteeism" OR "Absence Day\*" OR "Absent Day\*" OR "Presenteeism" OR "Work Productivit\*" OR "Productivity Loss\*" OR "Work Abilit\*" OR "Work Disabilit\*" OR "Disability Pension\*" OR "Early Retirement\*" OR "Premature Mortal\*" OR "Premature Death\*" OR "Employment" OR "Employment" OR "Employee\*" OR "Workloss\*" OR "Workplace\*" OR "Workday\*" OR "Worker\*" OR "Labour\*" OR "Labor\*" OR "Occupation\*" OR "Job\*")

**AND** 

("forecasting" OR "health expenditures" OR "spending" OR "costs and cost analysis" OR "cost-of-illness" OR "cost of illness" OR "indirect cost" OR "indirect burden" OR "absenteeism" OR "Cost" OR "Costs" OR "Economic\*" OR "Indirect Expenditure\*" OR "Indirect Expenditure\*" OR "Indirect Expense\*" OR "Cost of Illness" OR "Costs and Cost Analysis")