36th European

Cardiology Conference 2021

conferenceseries.com

November 01-02,2021

WEBINAR

J Clin Exp Cardiolog 2021, Volume 12

Economic Burden of Cardiovascular Diseases Before and After the Iran's Health Transformation Plan: Evidence from a Referral Hospital Located in the North-West of Iran.

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Background: Different countries have set different policies to control and decrease the costs of Cardiovascular Diseases(CVDs). Iran aiming reducing the economic burden of different disease by a recent reform from named as health transformation plan(HTP). This study aimed to examine economic burden of CVDs before and after of HTP,

Methods: This cross-sectional study was conducted on 600 patients with CVDs, who were randomly selected from a specialized cardiovascular hospital in the north-west of Iran. Direct and indirect costs of CVDs were calculated using cost of illness and human capital approaches. Data were collected using a researcher-made checklist obtained from several sources including structured interviews, the Statistical Center of Iran, Iran's Ministry of Cooperatives, Labor, and Social Welfare, central bank of the Iran, and the data of global burden of disease obtained from the Institute for Health Metrics and Evaluation to estimate direct and mortality costs. All costs were calculated in Iranian Rials(IRR).

Findings: Total costs of CVDs were about 5571 and 6700 billion IRR before and after the HTP, respectively. More than 62% of the total costs of CVDs accounted for premature death before (64.89%) and after (62.01%) the HTP. The total hospitalization costs of CVDs was significantly increased after the HTP (p=0.038). In both times, surgical services and visiting had the highest and lowest share of hospitalization costs, respectively. The OOP expenditure decreased significantly and reached from 54.2% to 36.7%. All hospitalization costs, except patients' OOP expenditure, were significantly increased after the HTP about 1.3 times. Direct non-medical costs reached from 2.4 to 3.3 billion before and after the HTP, respectively.

Conclusion: The economic burden of CVDs after the HTP increased in the north-west of Iran due to the increase of all direct and indirect costs, except the OOP expenditure. Non-allocation of defined resources, which coincided with the international and national political and economic challenges in Iran, led to unsustainable resources of the HTP. So, no results of this study can be attributed solely to the HTP. Therefore, studies that are more detailed should be carried out on the reasons for the significant increase in CVDs costs in the region.

Keywords: Cardiovascular Disease, Economic Burden, Health Transformation Plan, Health System Reform, Referral Hospital.