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NHSEED - - Economic Study or Review

## Cost-effectiveness of carrier screening for cystic fibrosis in Australia.

**Code:**  
NHSEED-22012024479

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### Study design (if review, criteria of inclusion for studies)

A decision tree was constructed estimating costs and outcomes from screening.

### Interventions

Carrier screening for CF

### Outcome measures

Effectiveness was expressed in terms of CF births averted. Costs were collected using a health service perspective. All costs and outcomes were discounted at 5% per annum.

### Main results

Screening reduced the annual incidence of CF births from 34 to 14/100,000 births (an aggregate number of CF births of 100.9 and 41.9 respectively). In initial pregnancies, costs in the screening arm (A\$16.6 million/100,000 births) exceed those in the non-screening arm (A\$13.4 million/100,000 births). The incremental cost per CF birth in initial pregnancies is therefore approximately A\$150,000. However, this was reversed for subsequent pregnancies, in that the pre-collected information reduces the incidence of CF in subsequent pregnancies at low additional costs. When aggregated, the results suggest screening is likely to be cost-saving.

### Authors' conclusions

The introduction of national carrier screening for cystic fibrosis should be considered, as it is likely to reduce CF incidence at an acceptable (potentially negative) cost.

<http://onlinelibrary.wiley.com/doi/10.1111/1365-2214.12044>

### See also

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### Keywords

Genetic Predisposition to Disease; Genetic Testing; Heterozygote; non pharmacological intervention - diagn; non pharmacological intervention - psycho-soc-edu-org; screening; Truth Disclosure; carrier status; diagnostic procedures; non pharmacological intervention - genetic& reprod;