

Economic Analysis for Adding Newborn Screening for Arginase-1 deficiency

Washington State Board of Health

September 8, 2023



Background

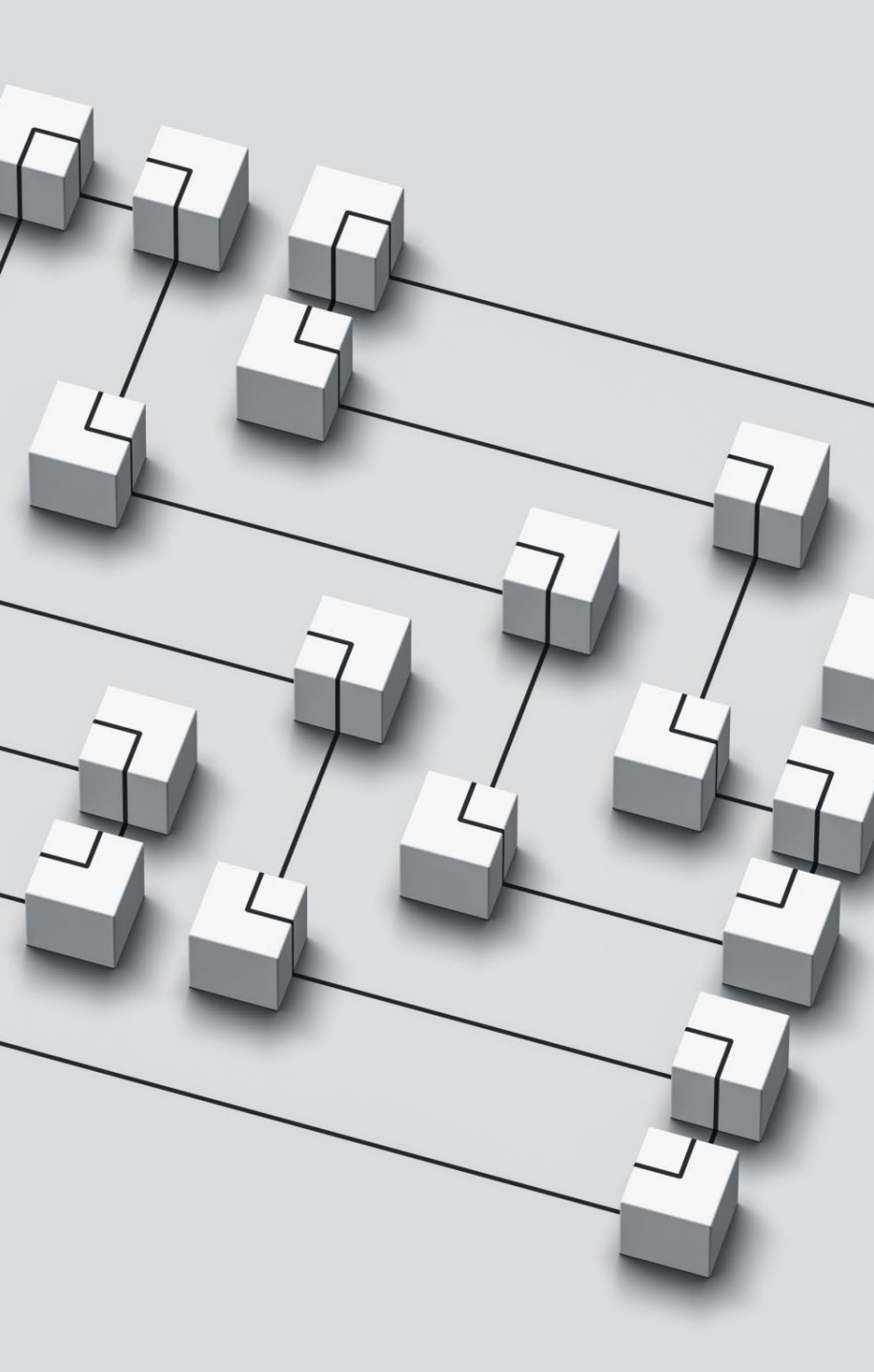
- The Board creates a technical advisory committee (TAC), which then reviews available information and research to evaluate a candidate condition and compare to a set of criteria established by the Board
- **Criterion #5:**
 - **Cost-benefit/Cost-effectiveness:** The outcomes outweigh the costs of screening
 - All outcomes, both positive and negative, need to be considered for analysis

Criterion #5

- Important considerations for economic analysis:
 - The prevalence of the condition among newborns
 - The positive and negative predictive values of the screening and diagnostic tests
 - Variability of clinical presentation by those who have the condition
 - The impact of ambiguous results: for example, the impact on families and caregivers
 - Adverse effects of screening

Arginase-1 deficiency (ARG1-D)

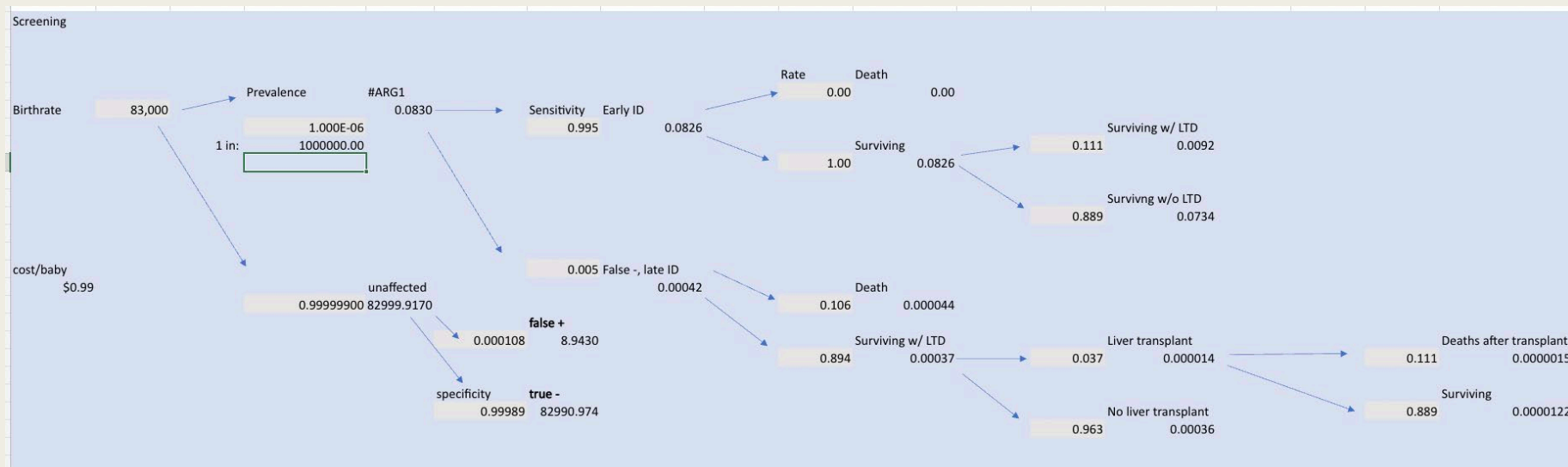
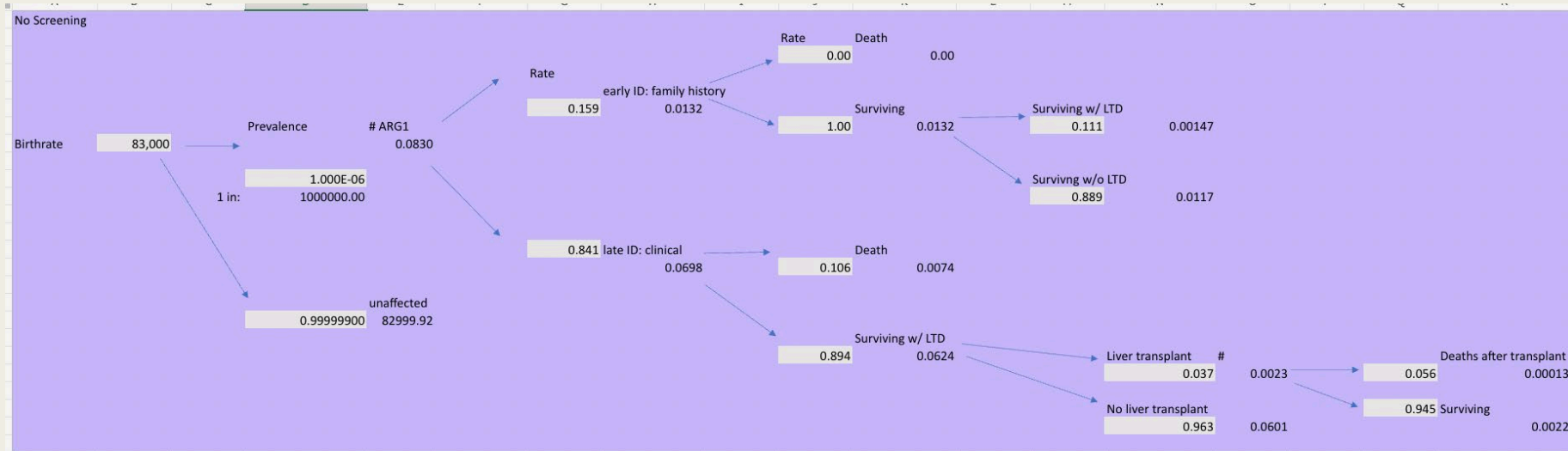
- Rare, inherited disorder - part of the urea cycle
- Arginase enzyme is lacking
 - Usually assists with the removal of nitrogen
 - Results in the formation of arginine and ammonia
- Leads to disability
 - Intellectual and developmental delay
 - Spasticity of the lower limbs
 - Seizures
 - Severe hyperammonemia can result in liver transplantation
- Symptoms do not appear until 1-3 years old
- 34 states current screen for ARG1-D in their newborn screening panels



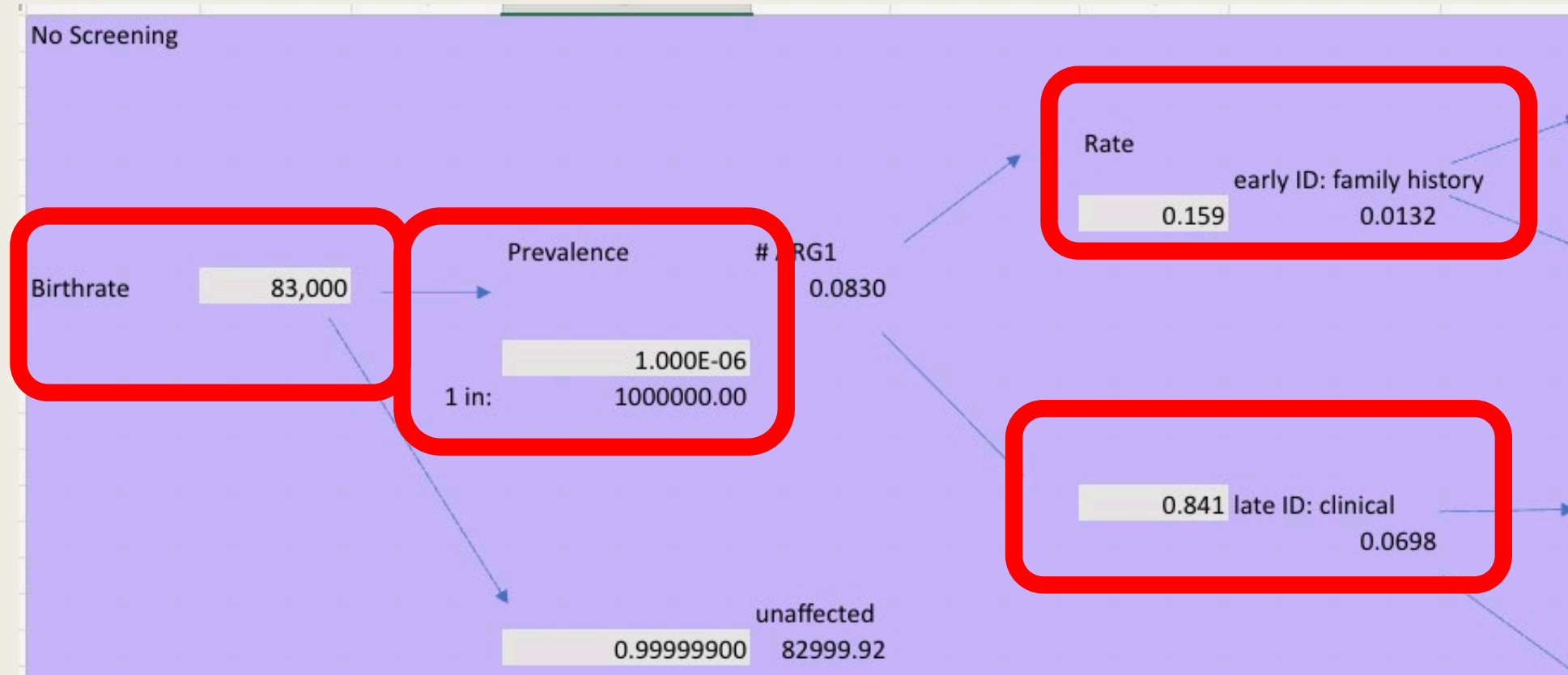
Overview of Benefit-Cost Analysis

- Decision tree construction: comparison of the current, No Screening Model and a new, Screening Model
- Data:
 - Existing, published literature
 - States that currently screen for ARG1-D
 - Expert, clinical opinion
- Sensitivity Analysis: comparing to higher and lower parameters to challenge the model

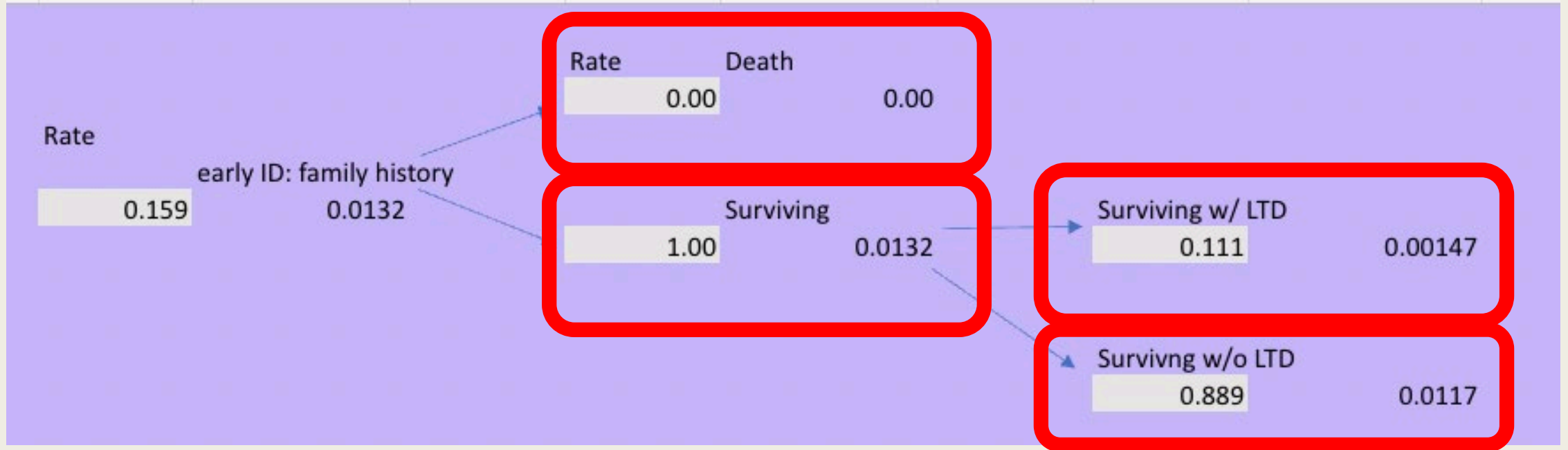
Decision Tree Model



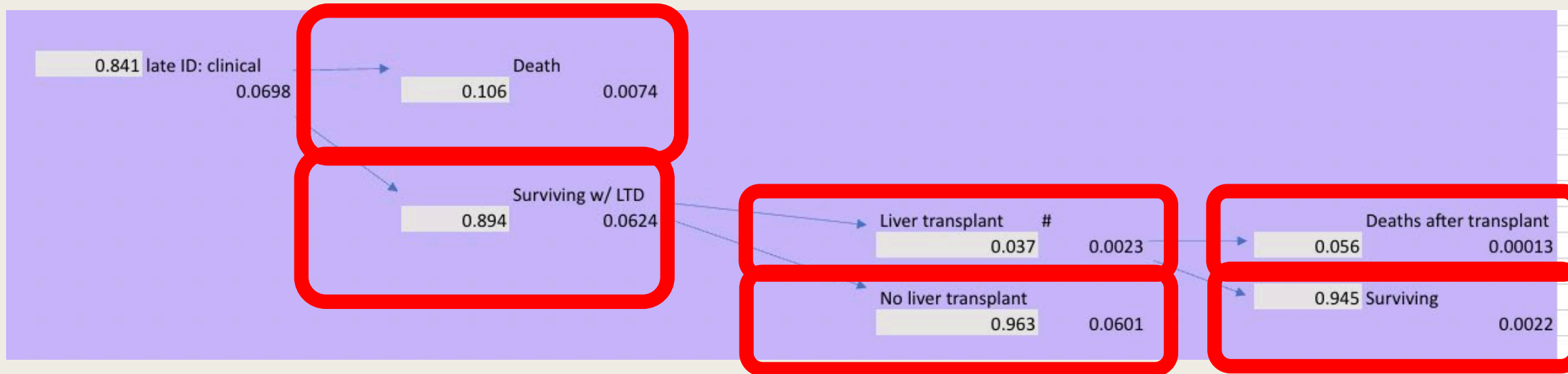
No Screening Model



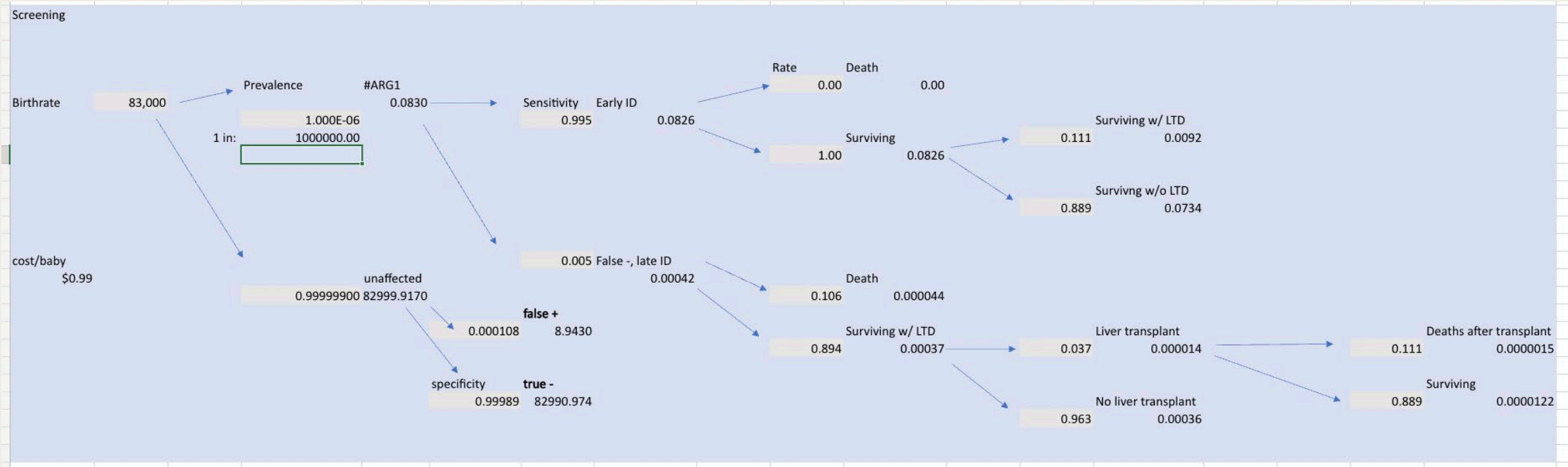
No Screening Model



No Screening Model



Newborn Screening Model



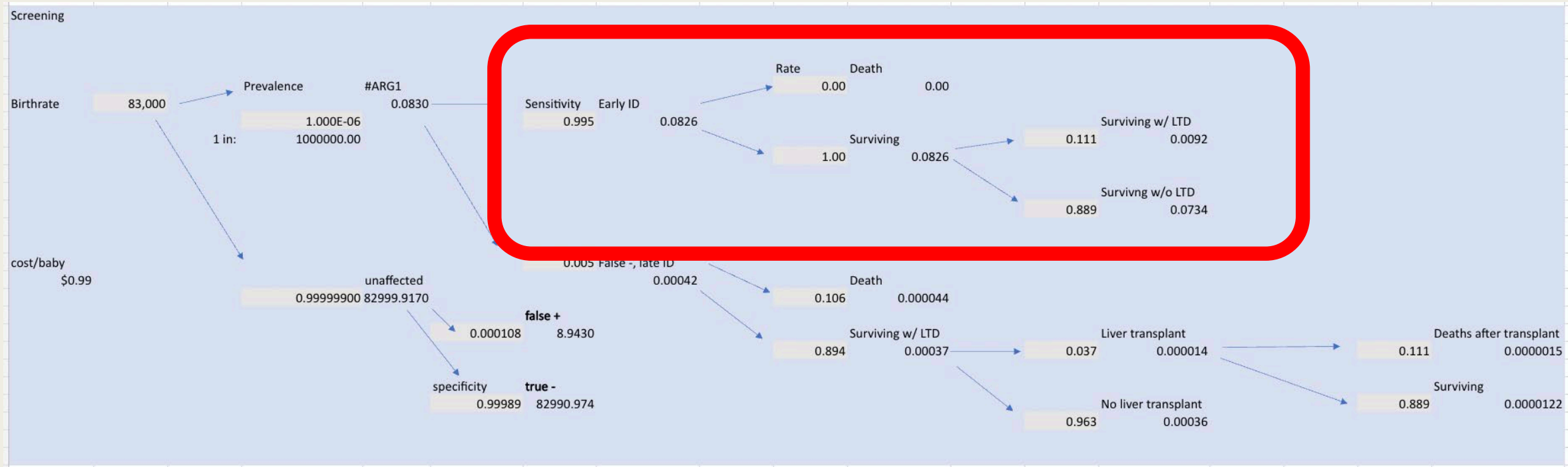
Newborn Screening Model

unaffected
0.999999900 82999.9170

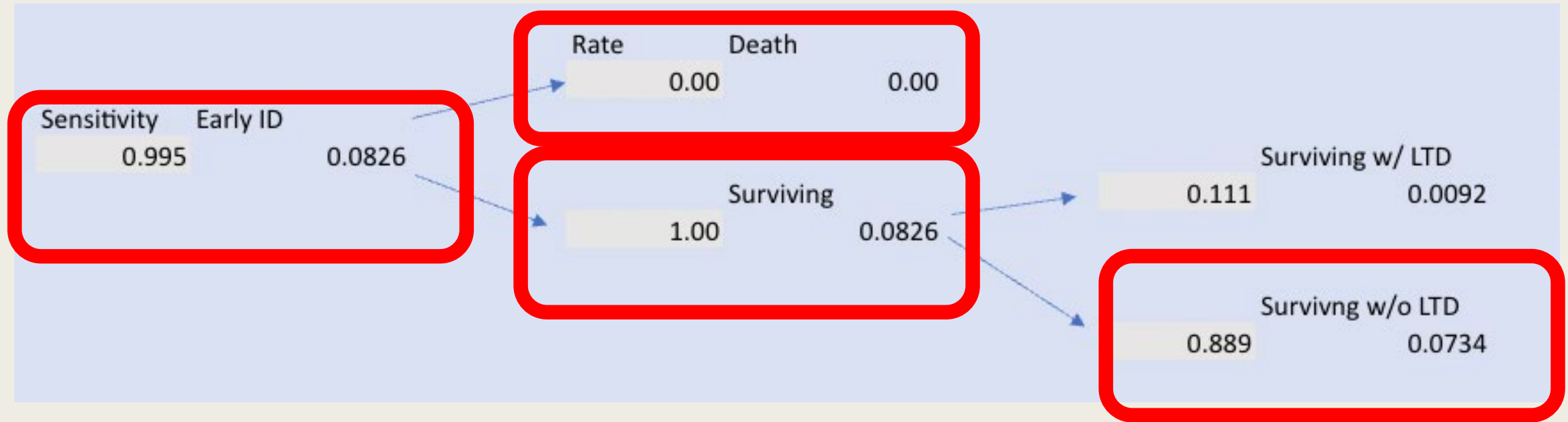
false +
0.000108 8.9430

specificity true -
0.99989 82990.974

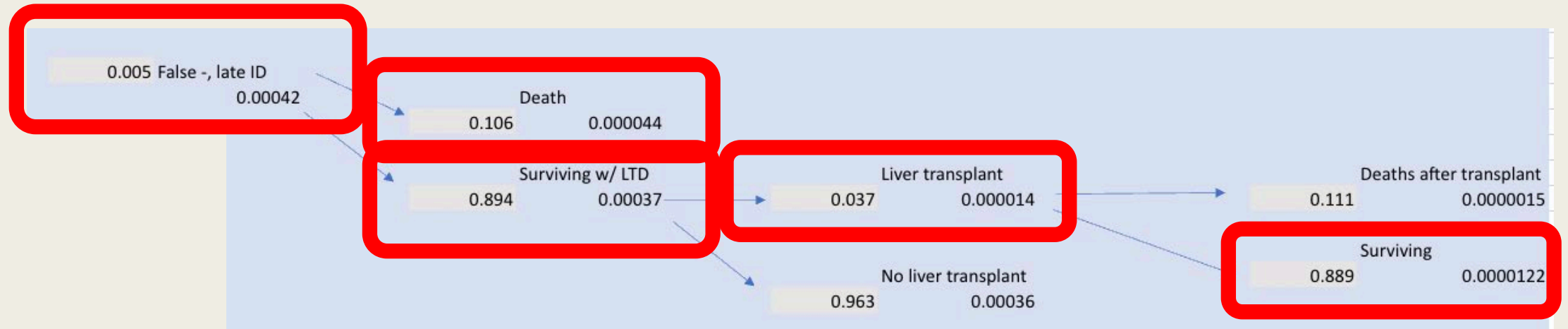
Newborn Screening Model



Newborn Screening Model



Newborn Screening Model



No Screening vs. Screening

No Screening	Deaths	0.0075
	Surviving w/LTD	0.0637
	Surviving w/o LTD	0.0117
	Early tx costs	\$19,853.16
	Late tx costs	\$114,264.14
	Total costs	\$134,117.30

Screening	Deaths	0.0000456
	Surviving w/LTD	0.0095
	Surviving w/o LTD	0.0734
	Early tx costs	\$124,167.36
	Late tx costs	\$679.41
	Total costs	\$124,846.77

Estimated Treatment Costs

Early tx cost per baby (10 Years)

\$1,503,509.80

Late tx cost per baby (10 Years)

\$1,637,128.67

Shifts: Benefits vs. Costs

Benefits		
Deaths averted		0.00750
LTD averted		0.0542
Value of LTD averted		\$81,259.71
Value of a life		\$11,600,000.00
Value of lives saved		\$86,981.13
Less tx costs		\$9,270.54
Total benefits		\$177,511.38

Costs

Costs	costs of screening	\$82,008.19
	costs of false +	\$5,255.13
	Total costs	\$87,263.32

Cost per baby: **\$0.99**

Includes startup lab costs,
laboratory staffing and
supplies

Costs

Costs	costs of screening	\$82,008.19
	costs of false +	\$5,255.13
	Total costs	\$87,263.32

Plasma test for arginine levels (AA)

	high	low	average
	\$499.00	\$202.00	\$350.50
	\$200.00	\$100.00	\$150.00
			\$250.25 Avg cost

DNA seq	\$990.00	\$710.00	\$850.00
Single gene for ARG1			\$1,000.00
			\$925.00 Avg cost

Total diagnostic costs (avg of both tests) **\$587.63**

Shift: Benefits vs. Costs

Benefits	Deaths averted	0.00750
	LTD averted	0.0542
	Value of LTD averted	\$81,259.71
	Value of a life	\$11,600,000.00
	Value of lives saved	\$86,981.13
	Less by costs	\$9,270.54
Total benefits		\$177,511.38

Costs	costs of screening	\$82,008.19
	costs of false +	\$5,255.13
	Total costs	\$87,263.32

benefit/cost ratio	2.03
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Net benefit	\$90,248.06
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Sensitivity Analysis

Parameter	base
Birthrate	83,000
birth prevalence - 1 in:	1000000
% w/ ARG1-D family hx	0.159090909
sensitivity	99.50%
specificity	99.99%
treatment cost, late ID	\$1,637,129
value of a life	\$11,600,000.00
cost of NBS	\$0.99
cost of false +	\$587.63

Sensitivity Analysis

			B/C ratio		
	B/C ratio swing		2.03		B/C ratio swing
Parameter		low/conservative estimate	base	high/liberal estimate	
birth prevalence - 1 in:	1.87	108800	1000000	54065.67	37.62
sensitivity	1.99	97.50%	99.50%	100%	2.05
specificity	0.99	99.80%	99.99%	100%	2.16
treatment cost, late ID	1.38	\$818,564.33	\$1,637,129	\$3,274,257.33	3.34
value of a life	1.86	\$9,600,000.00	\$11,600,000.00	\$13,600,000.00	2.21
cost of NBS	3.83	\$0.50	\$0.99	\$1.48	1.39
cost of false +	2.1	\$293.81	\$587.63	\$5,876.25	1.32

Sensitivity Analysis

			B/C ratio		
	B/C ratio swing		2.03		B/C ratio swing
Parameter		low/conservative estimate	base	high/liberal estimate	
Birthrate	2.03	62250	83,000	103750	2.03
birth prevalence - 1 in:	1.87	108800	1000000	54065.67	37.62
% w/ ARG1-D family hx	2.42	0	0.159090909	0.33	1.62
sensitivity	1.99	97.50%	99.50%	100%	2.05
specificity	0.00	00.00%	00.00%	100%	2.16
treatment cost, late ID	1.38	\$818,564.33	\$1,637,129	\$3,274,257.33	3.34
value of a life	1.00	\$9,000,000.00	\$11,000,000.00	\$13,000,000.00	2.21
cost of NBS	3.83	\$0.50	\$0.99	\$1.48	1.39
cost of false +	2.1	\$293.81	\$587.63	\$5,876.25	1.32

Criterion #5

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Final Notes

Current data suggests no false negatives



Treatment costs can vary



Babies asymptomatic until toddlerhood
– candidate for newborn screening



Acknowledgements

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- Greg Bonn, MT (ASCP), Colorado State Public Health and Environment Laboratory
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- WA State Newborn Screening Program

