Abstract

Title:
THE COST AND VALUE OF A HUNTINGTON’S DISEASE MULTIDISCIPLINARY TEAM MEETING

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Background:

Huntington’s disease (HD) is a complex neurodegenerative condition that calls for a multifaceted approach to patient care. Multidisciplinary team (MDT) meetings are one tool by which the expertise of multiple professionals can be focused into the care of a patient, combining the knowledge and expertise required to deliver the best management plan.

Aims:

To estimate the time and monetary costs of a HD MDT meeting held after a specialist HD clinic, and its value to patient care.

Methods:

This study was authorized by the department’s Audit Lead, as stipulated by the UCLH/UCL NHS Trust, London, UK. Data were prospectively retrieved from HD MDT meetings at the National Hospital for Neurology and Neurosurgery from February to June 2016.

To ascertain cost, at each meeting, staff members registered their name, position and time spent to prepare the meeting. All patients attending the HD Multidisciplinary Specialist Clinic were included in this study; the time spent to discuss each patient was recorded, as was age, gender and diagnostic stage. To evaluate the value, the number and type of changes to management plans, performed as a result of the MDT discussion, were recorded.

The cost per unit of time -- estimated based on midlevel salary for each of the healthcare professionals involved -- was multiplied by the time each staff member spent preparing and attending the meeting. The annual cost was computed by means of the average cost per patient, the frequency of the meetings (26 per year) and the average number of patients discussed per meeting.

Results:

Six meetings, comprising 92 patients (mean age 52 years; 58% males; 15% pre-manifest, 52% early HD, 22% moderate HD, 11% advanced HD) were analyzed. Each meeting had a median duration of 41.33 minutes, a median of 14.5 patients, and a mean total cost of 451 GBP. Each patient was discussed for an average of 2:34 minutes, costing 30 GBP, and no difference was found between gender, age or stage. The estimated annual cost of this MDT meeting was £11474 GBP. More than 40% of draft management plans experienced a change as a result of the MDT discussion, a cost of £12 per change of plan.

Conclusions:

Our study demonstrates that HD MDT meetings bring significant value to the management plan of patients at a modest cost. Still, further multicentre outcome-focused studies are needed to ascertain cost-effectiveness.

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