# **Economic Costs of Fetal Alcohol Syndrome**

by

Henrick Harwood
The Lewin Group, Fairfax, Virginia

**Thanks to Chuck Lupton of NGIT** 



## Overview

- FAS costs US \$5.4 billion in 2003
- An FAS birth carries lifetime health costs of \$860,000
   (\$300,000 today!) although can be as high as \$4.2 million
- Plausible to assume that FAS reduces "discounted"
   lifetime productivity \$200,000; lost wages & subsidies
- Even "expensive" FAS prevention may be "cost effective": up to \$850,000 per child



### **Methods**

- Project prior estimates by Lewin Group (1998)
  - Cost to the US of FAS in a year
- Review of literature by C. Lupton of NGIT
- Update and extend analyses published in 1986
  - > Cost of a "child born with FAS"
- Address cost effectiveness, quality adjusted life years, and willingness to pay

# **Different Types of Economic Studies**

- Cost of illness
- Cost effectiveness
- Cost benefits



# **Concepts Behind Cost of Illness**

 Assess overall burden on the economy in use and loss of resources per year

- Consequences (epidemiology)
  - > Primary and comorbid health, social/justice system
- Causality (epidemiology)
  - > Attribution factors
- Costs (economics)
  - > Approach to valuation



# **Components of Economic Costs**

- Direct Costs (actual use of goods and services)
  - > Health system
  - Social system (not transfers)
  - Justice System
- Indirect Costs (foregone potential productivity)
  - Mortality
  - Morbidity
  - Disability
  - Incarceration/crime career



## Valuation of Indirect Disease Burden

- Deaths
- Morbidity: sickness; lost days; impaired days
- Human capital
  - Current market value of productivity
  - Present discounted value lost future productivity
- Willingness to pay (up to \$6 million/life)
- Quality adjusted life years QALY (\$50-100,000)
- Disability adjusted life years DALY
- Years of potential life lost YPLL



# **Major Direct Cost Components**

- Estimate # needing care, cost of care, ages
- 2 per 1000 overall; different for services

- Neonatal intensive care
- Audiological defects
- Cleft palate
- Neurotube
- Special education services
- Residential care



## **Economic Cost of FAS 1998 and 2003**

#### • In 1998

> Direct: \$2.9 billion

> Indirect: \$1.25 billion

> Total: \$4.15 billion

#### • In 2003

> Direct: \$3.9 billion (6.1% annual increase)

➤ Indirect: 1.50 billion (4% annual increase)

> Total: \$5.4 billion



## **Lifetime Costs**

- Direct costs
  - > Average \$860,000
  - > Maximum \$4.2 million
  - ➤ Discounted Lifetime (3 percent)
    - Average: \$300,000
    - Maximum: \$1,500,000



### **Indirect Costs**

- Value of lost potential productivity
- Human capital approach (PHS Guidelines)
- Age/gender adjusted valuation: up to \$60,000/yr
- in 2003 expected > \$2.5 million at birth
  - > Discounted \$986,000
- Mental disability/retardation due to FAS related to 20.5% reduction
- \$202,000 lifetime discounted loss per child



# **New Areas for Study**

- Prevalence
  - > ARBD Alcohol-Related Birth Defects
  - > ARND Alcohol-Related Neurodevelopmental Disorder
  - > Mental health: attention deficits; depression; autism
  - > Criminal justice involvement



# **Are FAS Interventions Worth Supporting?**

- IOM and NIAAA: very little strong research
- Can't rigorously evaluate particular preventions
- However, can look at potential benefit from successful prevention (Harwood and Napolitano, 1986)
- What will benefits/savings be if save 1 child?



## **Cost Effectiveness**

 Standard allows comparison across all of health (PHS Taskforce; Gold et al., 1996)

 Compares medical interventions on the basis of cost to save a quality adjusted life year (QALY)

Medical interventions costing < \$50,000/QALY</li>
 are "generally" considered "cost effective"



# **Quality of Life Preference Scores**

- Perfect health: 1.0
- Moderate disability: .50
- Death/vegetative state: 0.0
- Gen. pop. 35-39: .86
- Gen. pop. > 75 years: .71
- Congest. heart failure: .20
- Legal blindness: .48
- Profound deafness: .59

- Depression : .31
- Schizophrenia .31-.61
- Children with developmental disability
  - > Severe: .40
  - > Moderate: .60
  - > Mild .80
- Reading disability: .77



# Impact of FAS on Quality of Life

- Conservative estimate: FAS reduces QALY by 17% or 11 years
- Potential savings from preventing 1 case of FAS:
  - > \$550,000 in value of QALY
  - > \$300,000 in medical costs
- If an intervention cost less than \$850,000 per FAS case prevented it would be considered "generally cost effective"



## Summary

- FAS costs US \$5.4 billion in 2003
- An FAS birth carries lifetime health costs of \$860,000 (\$300,000 today) although can be as high as \$4.2 million
- Costs may be low: ARBD, ARND, criminal justice
- Plausible to assume that FAS reduces "discounted" lifetime productivity \$200,000
- Even "expensive" FAS prevention may be "cost effective": up to \$850,000 per child



# COI Often Called "Gee Whiz" Numbers

- More readily grasped than a large variety of diverse impact estimates: a single number
- These numbers can be "large"
  - > Attention commanding
  - > Can be compared to other budgets & problems
- Suggest something SHOULD be done
- Do not tell us WHAT should be done
  - > Prevention versus treatment or other strategies

