

Ovarian CA screening potentially costeffective in the U.S.

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"These results are limited by uncertainty around the effect of screening on ovarian cancer mortality beyond the 11 years of [the] United Kingdom Collaborative Trial of Ovarian Cancer Screening," the authors write.

One author disclosed <u>financial ties</u> to the pharmaceutical industry.

More information: Abstract/Full Text

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(HealthDay)—Multimodal screening (MMS) for ovarian cancer is potentially cost-effective in the United States, according to a study published online Dec. 7 in *JAMA Oncology*.

In an effort to estimate the cost-effectiveness of MMS for <u>ovarian cancer</u> in the United States, Haley A. Moss, M.D., from Duke University in Durham, N.C., and colleagues constructed a Markov simulation model to compare MMS beginning at age 50 years with no <u>screening</u>.

The researchers found that MMS is both more expensive and more effective in reducing ovarian cancer mortality over a lifetime, compared to no screening. MMS of women starting at age 50 years is cost-effective 70 percent of the time when decision makers are willing to pay \$150,000 per quality-adjusted life-year, after accounting for uncertainty in the underlying parameters. There was a 15 percent reduction in mortality with screening, with an incremental cost-effectiveness ratio ranging from \$106,187 to \$155,256.



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