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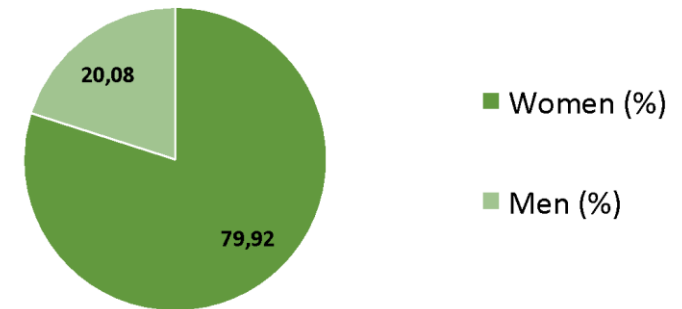
INTRODUCTION AND OBJECTIVES

Rosacea is a chronic inflammatory skin disease that affects quality of life and involves a variable clinical spectrum. Its prevalence oscillates between 2-10% and affects predominantly women in their 30s. Given its chronicity, it represents a high outlay for patients, who must invest in expensive topical and systemic treatments that Colombia's health system does not cover. Our objective was to estimate the costs of rosacea's treatment per month and in the third month of treatment in a dermatology center in Bogotá, Colombia.

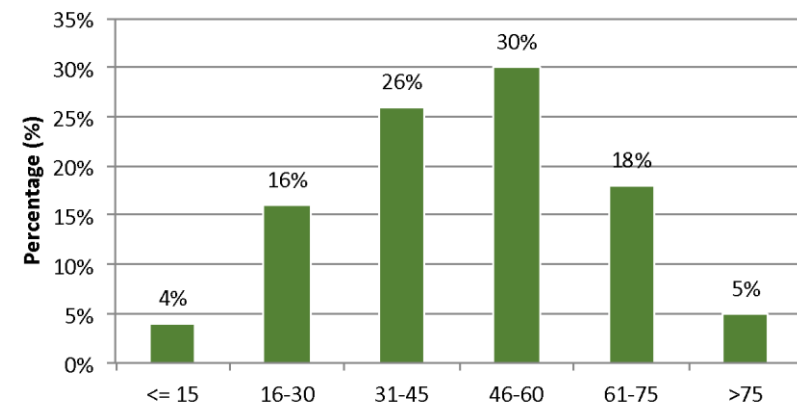
MATERIALS AND METHODS

We characterized the population and prospectively described the rosacea's treatment costs of patients diagnosed with rosacea in a dermatological center (Funinderma) between July of 2017 and August of 2020. Treatments and costs were registered, and a partial economic evaluation was made using basic descriptive statistics analysis for cost items (medicines, consultations, co-pays, labs).

Distribution by sex (n=812)

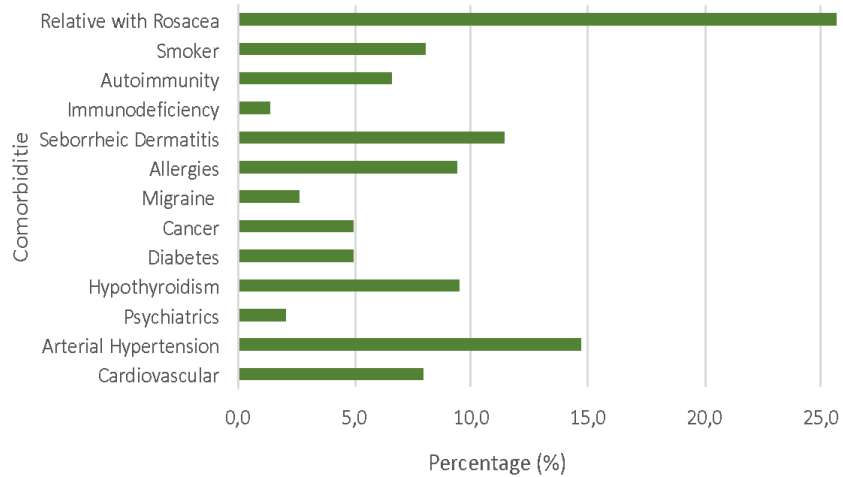


Distribution by age group

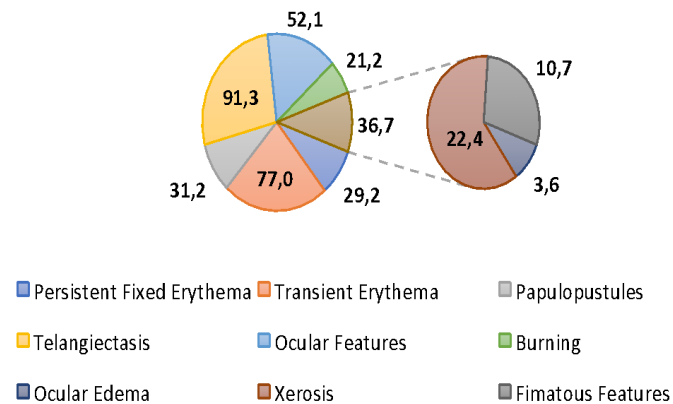


RESULTS

Comorbidities distribution



Frecuency of phenotype manifestations



Cost headings	N	1 Month	3 Months
		Mean (Lower - Higher)	Mean (Lower - Higher)
Medication	812	\$34,02 (\$18,60 - \$47,00)	\$89,30 (\$52,88 - \$111,63)
Medical Appointments	133	\$44,76 (\$44,76 - \$44,76)	\$44,76 (\$44,76 - \$44,76)
Copayment	674	\$0,84 (\$0,84 - \$0,84)	\$0,84 (\$0,84 - \$0,84)
Laboratory Tests	812	\$16,79 (\$16,79 - \$16,79)	\$0,00 (\$0,00 - \$0,00)
Total		\$96,41 (\$80,99 - \$109,39)	\$134,91 (\$98,48 - \$157,23)

CONCLUSIONS

Rosacea treatment represented an important economic burden for the health system and families. Total median costs accounted for 36.1% of the Colombian legal minimum wage in a period of one month.

REFERENCES

1. Yamasaki K, Gallo RL. The molecular pathology of rosacea. *J Dermatol Sci.* 2009;55(2):77–81.
2. Woo YR, Lim JH, Cho DH, Park HJ. Rosacea: Molecular mechanisms and management of a chronic cutaneous inflammatory condition. *Int J Mol Sci.* 2016;17(9):1–23.
3. Oussedik E, Bourcier M, Tan J. Psychosocial Burden and Other Impacts of Rosacea on Patients' Quality of Life. *Dermatol Clin [Internet].* 2018;36(2):103–13. Available from: <https://doi.org/10.1016/j.det.2017.11.005>
4. Azulay RD, Cañizares O, Padilla HC, Sobral C, Soto LD, Prieto JG, et al. Actualización y recomendaciones para el diagnóstico y tratamiento de la rosácea en Latinoamérica. *Med Cutánea.* 2016;44(1).
5. Barona MI, Orozco B, Motta A, Meléndez E, Rojas RF, Pabón JG, et al. Rosácea: actualización. *Piel.* 2015;30(8):485–502.