**Objective**

To compare the cost of capecitabine-based therapy with other standard chemotherapy regimens in breast cancer in a real-world treatment setting.

**Methods**

Female patients with breast cancer were identified from the Thomson Healthcare MarketScan® Commercial Claims and Outcomes Database and the Medicare Supplemental and Coordination of Benefits Database (Thomson Healthcare, Ann Arbor, MI). These databases contain claims from over 25 million people insured through 50 large US employers.

- **The MarketScan database** captures inpatient, outpatient, and pharmacy-dispensed drug claims, and reflects real-world treatment patterns and expenditures.
- **These databases** contain claims from over 25 million people insured through 50 large US employers.

**Regimen cohorts** included in this analysis were:

- Capecitabine (n = 499)
- Other non-taxane anthracycline-containing regimens (n = 3058)
- Anthracycline + taxane (n = 614)
- Other regimens (n = 4661)

**Study sample**

- A total of 5333 female patients with breast cancer met the study inclusion criteria.
- Study-eligible patients contributed 8257 chemotherapy treatment episodes to the analysis.

**Results**

- The databases capture inpatient, outpatient, and pharmacy-dispensed drug claims, and thus reflect real-world treatment patterns and expenditures.
- The databases compare the cost of capecitabine-based therapy with other standard chemotherapy regimens in breast cancer in a real-world treatment setting.

**Complication rates**

- **Table 1:** Patient Characteristics (N = 5333)
- **Table 3:** Unadjusted Complication Rates Per Treatment Episode (n = 8257)

**Figure 1:** Unadjusted Treatment-Related Expenditures

**Figure 2:** Unadjusted Cost for Capcitabine and Anthracycline-related Expenditures

**Figure 3:** Unadjusted Cost for Capcitabine and Anthracycline-related Expenditures

**Table 1:** Patient Characteristics (N = 5333)

<table>
<thead>
<tr>
<th>Insurance</th>
<th>No. (%): Total (n = 5333)</th>
<th>Male (n = 2065)</th>
<th>Female (n = 3268)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>370 (81.3)</td>
<td>146 (71.0)</td>
<td>224 (70.8)</td>
</tr>
<tr>
<td>Rural</td>
<td>82 (18.7)</td>
<td>65 (31.3)</td>
<td>17 (5.6)</td>
</tr>
<tr>
<td>Medicare</td>
<td>127 (27.9)</td>
<td>50 (23.0)</td>
<td>77 (23.5)</td>
</tr>
<tr>
<td>Commercial</td>
<td>391 (85.2)</td>
<td>170 (82.9)</td>
<td>221 (68.1)</td>
</tr>
<tr>
<td>Medicaid</td>
<td>14 (3.0)</td>
<td>9 (4.2)</td>
<td>5 (1.5)</td>
</tr>
<tr>
<td>Other</td>
<td>96 (21.5)</td>
<td>41 (19.4)</td>
<td>55 (16.8)</td>
</tr>
</tbody>
</table>

**Table 3:** Unadjusted Complication Rates Per Treatment Episode (n = 8257)

<table>
<thead>
<tr>
<th>Complication</th>
<th>All Capcitabine*</th>
<th>Anthracycline + Taxane*</th>
<th>Other</th>
<th>Other Regimes *</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any complication</td>
<td>15.6%</td>
<td>17.4%</td>
<td>12.9%</td>
<td>14.9%</td>
</tr>
<tr>
<td>Nausea and vomiting</td>
<td>9.3%</td>
<td>10.3%</td>
<td>7.9%</td>
<td>10.2%</td>
</tr>
<tr>
<td>Neutropenia</td>
<td>7.9%</td>
<td>9.2%</td>
<td>7.1%</td>
<td>10.0%</td>
</tr>
<tr>
<td>Infection</td>
<td>3.2%</td>
<td>3.3%</td>
<td>2.8%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Fever</td>
<td>1.7%</td>
<td>2.3%</td>
<td>1.7%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Anemia</td>
<td>0.5%</td>
<td>0.8%</td>
<td>0.6%</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

**Table 2:** Unadjusted Total and Complication-Related Expenditures

- Mean monthly expenditures during treatment for complications that occurred in >5% of episodes in any cohort are presented in Table 2.
- The major drivers of complication-related costs were neutropenia, anemia, infection, and nausea.
- Nausea and vomiting were more common in patients receiving anthracycline and taxane-based therapies than in patients receiving capecitabine regimens.
- Mean monthly expenditures during treatment for complications that occurred in >5% of episodes in any cohort are presented in Table 2.
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**Cost Comparison of Capcitabine in the Treatment of Patients With Breast Cancer: An Analysis From a Claims Database**

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