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Summary

A TRIAL-BASED ECONOMIC EVALUATION OF SMARTPHONE-BASED SELF-GUIDED HYPNOTHERAPY FOR THE TREATMENT OF IRRITABLE BOWEL SYNDROME: RESULTS FROM A MULTICENTRE THREE-ARMED RANDOMISED CONTROLLED TRIAL

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Small Intestine & Nutrition | Primary Care | Colorectal

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Smartphone-based self-guided hypnotherapy for IBS is potentially cost-effective from a healthcare perspective but not from a societal perspective due to productivity-loss outliers in this 230-patient randomised trial.

KEY POINTS

- Both hypnotherapy interventions dominated online psychoeducation, yielding higher QALYs at lower overall costs.
- Smartphone-based hypnotherapy incurred lower direct healthcare costs than in-person therapist-delivered hypnotherapy (mean difference -€261, 95% CI -€891 to €369), but indirect costs were lower in the therapist-delivered group (€2597, 95% CI -€3643 to €8837).
- From a healthcare perspective, smartphone-based hypnotherapy was less costly in 81% of simulations and had a 65% probability of cost-effectiveness when accepting €20,000 per QALY lost.
- From a societal perspective, smartphone-based hypnotherapy was more costly in 81% of simulations with minimal QALY differences, largely due to outliers in productivity-related losses.
- The analysis included 230 IBS patients (Rome IV, aged 16-75 years, mean age 38.2±13.8 years, 70.4% female) randomised to smartphone-based self-guided hypnotherapy (N=75), in-person therapist-delivered hypnotherapy (N=77), or online psychoeducation (N=78), with data collected up to six months post-treatment.

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