

Survey of Current and Future Avastin Usage: Emphasis on Economics

Gregory R. Blaha, MD, PhD (Peabody, MA), Tom C. Hsu, MD (Peabody, MA), Paul L. Lee, MD, JD (Durham, NC), Brendan E. McCarthy, MD (Peabody, MA), Jeffrey L. Marx, MD (Peabody, MA)*

PURPOSE

To assess current and expected future usage patterns of Avastin (bevacizumab, Genentech) among retinal physicians with emphasis on economic factors.

METHODS

Surveys were mailed in January 2006 to all 1,245 retinal physicians in the United States as listed on the ASRS web site.

RESULTS

Of the 297 surveys returned, 88% of respondents use Avastin with an average of 5.4 injections per week. Avastin is widely used regardless of practice type, location, or physician age, except for a 64% usage rate in physicians over 66 years of age. On average, Avastin is injected every 6 weeks, although many physicians reinject based on clinical and OCT findings. 80% of physicians charge the patient for the Avastin with amounts ranging from \$10 to \$800 (some including exam and injection). 72% of physicians plan to continue to use Avastin after Lucentis (ranibizumab, Genentech) is FDA approved, however the expected usage of Avastin climbs from 25% if Lucentis is \$500 per dose to 66% if the cost is \$4,000. Additional factors which increase expected usage are if Avastin is shown to be safe and effective, if it needs to be injected less frequently than Lucentis, if the patient does not have insurance, or for off-label uses such as Diabetes or CRVO.

CONCLUSION

Avastin is currently widely used in the United States by retinal specialists. The pricing of Lucentis, when available, changes the expected usage of Avastin from 25% to 65%, despite insurance covering most of the cost. Although not studied in randomized clinical trials, Avastin usage is expected to continue after Lucentis becomes available for a variety of reasons.

* Financial interest disclosed