

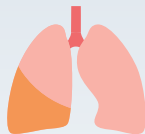
What Are the Clinical and Economic Implications of Treatment Pathways for Rapidly Recurrent Malignant Pleural Effusion?

STUDY DESIGN

Retrospective cohort study using the Surveillance, Epidemiology, and End Results Medicare database from 2011 to 2015 to evaluate outcomes and cost in those with rapidly recurrent malignant pleural effusions (MPEs)

Rapid recurrence defined as a second pleural procedure within 14 days of first thoracentesis

RESULTS



Among 3,090 patients with MPE
 • **Only 37.7% received definitive pleural procedure**

Definitive treatment results in fewer mean subsequent pleural procedures over a patient's lifetime



Thoracoscopy, 0.22
 Indwelling pleural catheter, 0.31
 Chest tube, 0.82
 Thoracentesis, 1.74



Average total costs after second pleural procedure to death vs thoracentesis:

| | | |
|-----------------------------|-----------|---|
| | | Indwelling pleural catheter (\$37,443, $P < .0001$) |
| | | ↓ |
| Thoracentesis (\$47,711) | vs | Chest tube (\$40,627, $P = .004$) |
| | | ----- |
| | | ≈ Thoracoscopy (\$45,386, $P = .5$) |

In this study, early definitive treatment was associated with fewer subsequent procedures and lower costs in patients with rapidly recurrent MPE.