

COMPARATIVE EFFECTIVENESS

RESEARCH



OUR SOLUTION

The MarketScan Claims databases offer the largest convenience sample available in proprietary databases with over 170 million unique patients since 1995.

Improving quality and outcomes with comparative effectiveness research

Comparative effectiveness research has great potential for improving healthcare quality and patient outcomes.

Determining which treatments work best in real-world settings requires hard evidence to inform choices. The Truven Health AnalyticsSM MarketScan[®] Research Databases can support the rigorous evaluations necessary for comparative effectiveness research.

Comprehensive Data to Support Comparative Effectiveness Studies

Comparative effectiveness research is a thorough assessment of the impact of different options that are available for treating a particular medical condition, given the unique characteristics of a specific patient population. With meaningful measures of the costs of care and treatment outcomes, MarketScan Research Databases provide actionable information for important formative decisions. The family of databases contains individual-level healthcare and dental claims, lab test results, health risk assessments, absence, short-term

disability, workers' compensation, and hospital discharge information from large employers, managed care organizations, hospitals, and Medicare and Medicaid programs.

Retrospective Analyses of Outcomes

MarketScan databases allow longitudinal, patient-level analyses of health and economic outcomes. Using the data, researchers can evaluate particular procedures, courses of therapy, disease states, patient populations, and settings of care, including:

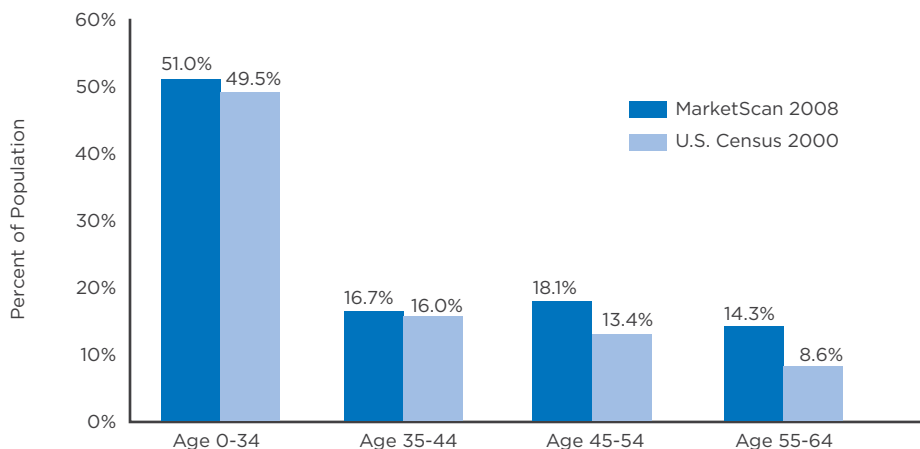
- Effectiveness of various procedures
- Treatment responses in specific patient populations
- Cost effectiveness of drugs and other treatment regimens
- Effectiveness of brand versus generic drugs
- Impact of disease management programs
- Treatment effectiveness by provider type

Specific Patient Population Studies

The most recent MarketScan data year features information on more than 43 million covered lives. As the largest convenience sample available

in proprietary U.S. claims databases, MarketScan data can support studies of treatment effectiveness within specific age groups, particularly children and those under age 65 (Figure 1).

Figure 1: Age Comparison



Evaluation of Treatment Effectiveness Over Time

MarketScan databases feature exceptional longitudinal integrity over multiple years. Data provide detailed patient-level information across the continuum of care including physician office visits, hospitalizations, prescriptions, and carve-out care. Claims databases can be linked to health and productivity, health risk assessment, lab results, dental, and hospital drug information. Integration of these data sources allows researchers to study the impact of various factors on treatment effectiveness over time. On behalf of the Assistant Secretary for Planning and Evaluation (ASPE), Truven Health is creating Web-based tools to facilitate comparative effectiveness research using multiple databases, including MarketScan data.

Featured Peer-Reviewed Publications

For over 20 years, health researchers have relied on MarketScan data to support rigorous academic studies. More than 275 articles featuring MarketScan data have been published since 2000. Our researchers have a reputation for analytical work that meets the highest academic and professional standards. The selected publications below highlight recently published comparative effectiveness studies. Truven Health authors are in bold.

Amin AN, Lin J, **Johnson BH**, **Schulman KL**. Clinical and economic outcomes with appropriate or partial prophylaxis. *Thrombosis Research* 2009; Nov 18; [Epub ahead of print].

Amin AN, Lin J, **Lenhart G**, **Schulman KL**. Clinical and economic outcomes in patients at risk of venous thromboembolism receiving appropriate enoxaparin or unfractionated heparin prophylaxis. *Thrombosis and Haemostasis* 2009; 102(2): 321–6.

Barr CE, **Schulman K**, Iacuzio D, Bradley JS. Effect of oseltamivir on the risk of pneumonia and use of healthcare services in children with clinically diagnosed influenza. *Current Medical Research and Opinion* 2007 Mar; 23(3): 523-31.

Brixner DI, **Lenhart G**, Young DC, Samuelson WM. The effect of fixed combination of fluticasone and salmeterol on asthma drug utilization, asthma drug cost, and episodes of asthma exacerbations. *Current Medical Research and Opinion* 2007; 23(11): 2887–95.

Chu E, **Schulman KL**, Zelt S, **Song X**. Costs associated with complications are lower with capecitabine than with 5-fluorouracil in patients with colorectal cancer. *Cancer* 2009; 115(7): 1412-23.

Citrome L, Reist C, **Palmer L**, **Montejano LB**, **Lenhart G**, Cuffel B, Harnett J, Sanders KN. Impact of real-world ziprasidone dosing on treatment discontinuation rates in patients with schizophrenia or bipolar disorder. *Schizophrenia Research* 2009; 115(2–3): 115–20.

Cohen LJ, Allen JC Jr. Estimating the potential savings with vagus nerve stimulation for treatment-resistant depression: a payer perspective. *Current Medical Research and Opinion* 2008 Aug; 24(8): 2203-17. [Cohen Department of Psychiatry, School of Social Work, University of Wisconsin-Madison].

Encinosa WE, Hellinger FJ. The impact of medical errors on ninety-day costs and outcomes: An examination of surgical patients. *Health Services Research* 2008; 43(6): 2067–85.

Krupski TL, Foley KA, Baser O, **Long S**, Macarios D, Litwin MS. Healthcare cost associated with prostate cancer, androgen deprivation therapy and bone complications. *Journal of Urology* 2007 Oct; 78 (4 Pt 1): 1423-8.

Loftus EV Jr, Delgado DJ, Friedman HS, Sandborn WJ. Colectomy and the incidence of postsurgical complications among ulcerative colitis patients with private health insurance in the United States. *American Journal of Gastroenterology* 2008 Jul; 103(7): 1737-45.

Mark TL, **Gibson T**, McGuigan K. The effects of antihypertensive step-therapy protocols on pharmaceutical and medical utilization and expenditures. *American Journal of Managed Care* 2009 Feb; 15(2): 123-31.

Mucha L, Shaohung S, Cuffel B, McRae T, **Mark TL**, Del Valle M. Comparison of cholinesterase inhibitor utilization patterns and associated healthcare costs in Alzheimer's disease. *Journal of Managed Care Pharmacy* 2008 Jun; 14(5): 451-61.

Rugo HS, Kohles J, **Schulman KL**. Cost comparison of capecitabine in patients with breast cancer. *American Journal of Clinical Oncology* 2010; January 4; [Epub ahead of print].

Song X, Long SR, Marder WD, Sullivan SD, Kallich J. The impact of methodological approach on cost findings in comparison of epoetin alfa with darbepoetin alfa. *Annals of Pharmacotherapy* 2009; 43(7): 1203–10.

Wang MT, Skrepnek GH, Armstrong E, Sherrill DL, Harris RB, Tsai CL, Malone DC. Use of salmeterol with and without concurrent use of inhaled corticosteroids and the risk of asthma-related hospitalization among patients with asthma. *Current Medical Research and Opinion* 2008; 24(3): 859–67.

Wish JB, Nassar GM, **Schulman K**, del Aguila M, Provenzano R. Postdialysis outcomes associated with consistent anemia treatment in predialysis patients with chronic kidney disease. *Clinical Nephrology* 2008; 69(4): 251–9.

FOR MORE INFORMATION

To learn how our research and information solutions can support your comparative effectiveness analyses, please contact us at **+1 866 301 5419** or **research@truvenhealth.com**.



ABOUT TRUVEN HEALTH ANALYTICS

Truven Health Analytics delivers unbiased information, analytic tools, benchmarks, and services to the healthcare industry. Hospitals, government agencies, employers, health plans, clinicians, pharmaceutical, and medical device companies have relied on us for more than 30 years. We combine our deep clinical, financial, and healthcare management expertise with innovative technology platforms and information assets to make healthcare better by collaborating with our customers to uncover and realize opportunities for improving quality, efficiency, and outcomes. With more than 2,000 employees globally, we have major offices in Ann Arbor, Mich.; Chicago; and Denver. Advantage Suite, Micromedex, ActionOI, MarketScan, and 100 Top Hospitals are registered trademarks or trademarks of Truven Health Analytics.

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