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LAT SOFTWARE ATTRIBUTED NET SAVINGS ON COSTS OF ALCOHOL ADDICTS' HOSPITAL CARE

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**Aims:** Alcohol dependence is a complex psychiatric disorder and causes considerable costs throughout Europe. Lesch Alcoholism Typology (LAT) is regarded one of the most widely used clinical typologies of alcohol addiction and abuse. The aim of the study was to find out if the introduction of the LAT in general clinical practice leads to better clinical outcome and reduced costs.

**Methods:** This retrospective matched-pairs case-control study was conducted at the Regional Addiction Center of the University Clinic in Serbia. Patients were matched in couples according to sex, age and ICD-10 diagnosis. All patients fulfilled the diagnosis of alcohol dependence according to ICD-10 and DSM-IV-TR. The study involved 250 patients i.e. 125 pairs (non-LAT treated case joined to its LAT-treated counterpart), during the period of four years.

**Results:** Mean number of hospital admission was  $0.94 \pm 1.27 / 0.92 \pm 0.74$  (LAT/non-LAT). Mean total duration of hospital admissions was  $12.49 \pm 14.77 / 10.80 \pm 11.52$  (LAT/non-LAT). Total direct medical costs of non-LAT addicts' care were 4,835,084.23 RSD, while after initiation of LAT the same costs were significantly reduced - 3,425,016.93 RSD. Mean cost/patient was significantly lower after initiation of LAT based treatment ( $27,400.14 \pm 31,437.65$  (CI 95% - 21,888.98-32,911.30) vs.  $38,680.67 \pm 40,582.80$  (CI 95% - 31,566.33-45,795.02) RSD) ( $p=0.007$ ). Mean cost of single hospital admission among non-LAT treatment group was  $285.45 \pm 311.82$  (CI 95% 232.79-342.11) € and among LAT  $165.77 \pm 135.01$  (CI 95% 142.10-189.43) € ( $p=0.008$ ). LAT software induced net savings amounted to € 112.8 per patient.

**Conclusions:** The implementation of the LAT software, due to more precise diagnostic assessment and sub-type specific pharmacotherapy and psychotherapy, lead to a total € 112.8 net savings on general medical care costs.