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Testing and restrictions are cost-effective COVID-19 measures

Testing strategies and early implementation of multiple restriction measures appear to cost effective in preventing the spread of COVID-19 infections, according to findings of a systematic review published in *Value in Health*.

PubMed, Embase and Web of Science databases were searched for health economic evaluations published up until March 2021 which reported the costs and outcomes of COVID-19 policy measures.

The 23 studies (18 cost-effectiveness analyses and five cost-benefit analyses) which met the inclusion criteria were heterogeneous with regard to methodology used, model used, strategies assessed, health outcomes assessed, perspective, and study context such as country or target population. While 12 studies focussed on prevention or containment of COVID-19 infections, others focussed on detection, protection or treatment. Eight studies used a healthcare payer perspective and five used a societal perspective, and reported time horizons ranged from 43 days to a lifetime.

Strategies found to be cost effective included testing, social distancing, quarantine or isolation, use of personal protective equipment, and hygiene measures. The optimal combination of strategies was dependent on the reproduction number of the COVID-19 infection; with a rising reproduction number, the most cost-efficient strategies were extensive testing and early implementation of a multiple restriction measures.

"Including a societal perspective in future evaluations is key because this pandemic has an indirect impact on the onset and treatment of other conditions and on our global economy," commented the authors. "Stepwise and timely extending the testing strategy and implementing multiple restriction measures seem most cost-effective to mitigate rising SARS-CoV-2 spread," they concluded.

Vandepitte S, et al. Cost-Effectiveness of Coronavirus Disease 2019 Policy Measures: A Systematic Review Value in Health : 30 Sep 2021. Available from: URL: https://doi.org/10.1016/j.jval.2021.05.013

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