IN A MEDICAL CENTER IN TAIWAN, a model-based economic analysis, A1 strategy was the most cost-effective option in the acute ischemic stroke patients. Based on the results of this study, A1 strategy had more advantages of economic effects. A1 group had a faster recovery time (10 months) than A2 group (18 months). The A1 group had a lower cost of 89.1 thousand yuan, while A2 group had a cost of 208.9 thousand yuan, thus, A1 group had a lower cost and was more cost-effective. In conclusion, A1 strategy was the most cost-effective option in Acute Ischemic Stroke patients in Taiwan.

OBJECTIVES: The aim of this study is to compare the cost-effectiveness of the A1, A2, and B groups. The A1 group was treated with Butylphthalide sodium chloride injection, A2 group was treated with Butylphthalide sodium chloride capsule, and the control group was treated with placebo. The primary outcome measure was the health state of the patients at the steady state. The secondary outcome measure was the cost-effectiveness ratio at the steady state. The cost was calculated in Taiwan dollars.

METHODS: A total of 100 patients were randomly assigned to the A1, A2, and B groups. The patients were followed up for 1 year, and the health state of the patients was evaluated at the steady state. The costs were calculated in Taiwan dollars.

RESULTS: The health state of the A1 group was 89.1 thousand yuan, the A2 group was 208.9 thousand yuan, and the B group was 245.2 thousand yuan. The cost-effectiveness ratio of the A1 group was 89.1 thousand yuan per health state, while the A2 group was 208.9 thousand yuan per health state, and the B group was 245.2 thousand yuan per health state.

CONCLUSIONS: A1 strategy was the most cost-effective option in the acute ischemic stroke patients in Taiwan.