

Minimum cost effective difference

Minimum cost effective difference (MCED) serves as the smallest improvement in an outcome instrument that is associated with a cost-effective response to surgery. With the use of cost-effective anchor of < \$50 000/quality-adjusted life year (QALY), MCED after transforaminal lumbar interbody fusion was 4 points for visual analog scale for low back pain, 3 points for visual analog scale for leg pain, 22 points for Oswestry Disability Index, and 0.31 QALYs for EuroQol 5D ¹⁾

¹⁾

Parker SL, McGirt MJ. Determination of the minimum improvement in pain, disability, and health state associated with cost-effectiveness: introduction of the concept of minimum cost-effective difference. Neurosurgery. 2015 Mar;76 Suppl 1:S64-70. doi: 10.1227/01.neu.0000462079.96571.dc. PubMed PMID: 25692370.

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