The clinical effectiveness and cost-effectiveness of screening programmes for amblyopia and strabismus in children up to the ages of 4-5 years: a systematic review and economic evaluation

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Record Status
This is a bibliographic record of a published health technology assessment from a member of INAHTA. No evaluation of the quality of this assessment has been made for the HTA database.

Citation

Authors' objectives
The aim of this study was to estimate the cost-effectiveness of screening for amblyopia and strabismus in children up to the ages of 4–5 years by developing a decision-analytic model that incorporates and assesses all of the above criteria. At the outset it was recognised that there was likely to be significant uncertainty in key areas of the model, and an objective of the study was to identify the major areas of uncertainty and so inform future research priorities in this disease area.

Authors' conclusions
The cost-effectiveness results from the amblyopia screening and lifetime models show that the cost-effectiveness of screening for amblyopia is dependent on the long-term utility effects of unilateral vision loss. There is limited evidence on any such effect, although our subjective interpretation of the available literature is that the utility effects are likely to be minimal. Any utility study investigating such effects would need to be careful to avoid introducing bias. The reference case model did not represent potential treatment-related utility effects, primarily due to an increased probability of treated children being bullied at school. The evidence indicates that this may be a problem, and additional sensitivity analyses show that small utility decrements from bullying would improve the cost-effectiveness of early screening significantly.

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