Estimating Direct and Indirect Costs of Premenstrual Syndrome.

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OBJECTIVE:: To quantify the economic impact of premenstrual syndrome (PMS) on the employer. METHODS:: Data were collected from 374 women aged 18-45 with regular menses. Direct costs were quantified using administrative claims of these patients and the Medicare Fee Schedule. Indirect costs were quantified by both self-reported days of work missed and lost productivity at work. Regression analyses were used to develop a model to project PMS-related direct and indirect costs. RESULTS:: A total of 29.6% (n = 111) of the participants were diagnosed with PMS. A PMS diagnosis was associated with an average annual increase of $59 in direct costs (P < 0.026) and $4333 in indirect costs per patient (P < 0.0001) compared with patients without PMS. CONCLUSIONS:: A PMS diagnosis correlated with a modest increase in direct medical costs and a large increase in indirect costs.

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