## Economic evaluation of olmesartan/amlodipine fixed-dose combination (FDC) for hypertension treatment in China.

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- Clinical data were obtained from network meta-analysis, which included five health states of hypertensive patients aged between 35-84 years at baseline and free of cardiovascular disease.
- The model projected quality-adjusted life years (QALYs) gained, total costs per patient in a 20-year time horizon, and incremental cost-effectiveness ratios.
- Compared to olmesartan and amlodipine-free combinations, amlodipine, and valsartan/amlodipine FDC, treatment with olmesartan/amlodipine FDC led to fewer CVD events and deaths.
- Compared with amlodipine alone, the incremental cost-effectiveness ratios were below the WHO recommended cost-effectiveness threshold, indicating the olmesartan/amlodipine FDC was a cost-effective option for hypertensive patients.

Olmesartan/amlodipine FDC confers better health outcomes and costs less compared with olmesartan and amlodipine-free combination therapies and valsartan/amlodipine FDC.