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Abstract Title: Multiple Sclerosis in Australia: National Estimates of Prevalence and Health Economic Impact for 2024

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Background

Multiple sclerosis (MS) imposes a substantive economic burden on individuals and society.

Objectives/Aims

Commissioned by MS Australia, this report uses 2024 data to quantify the contemporary health economic impact of MS in Australia and compares findings with earlier published reports based on 2010, 2017 and 2021 data. It comprised seven chapters covering prevalence, costs of illness, health-related quality of life (HRQoL), employment outcomes, and National Disability Insurance Scheme (NDIS) utilisation.

Methods

Data were primarily sourced from MS Australia's research platform, the Australian MS Longitudinal Study (AMSLS). Specialised methodologies were applied in each chapter. Prevalence was estimated using administrative disease-modifying therapy (DMT) dispensing data. Costs of illness were estimated from a societal perspective and incorporated multiple data sources including cost diaries, administrative records, and survey responses, with results presented in 2024 Australian dollars. HRQoL was assessed as health state utility (HSU: *0 = Death and 1 = Full Health*) using the EQ-5D-5L instrument with four psychosocial bolt-on items. Employment outcomes and NDIS utilisation were evaluated with detailed AMSLS survey data.

Results

In 2024, an estimated 37,756 people were living with MS (PLwMS) in Australia, up 77.4% since 2010. Total societal costs exceeded A$3 billion, with recent growth attributable to increased prevalence. Mean cost per person/year was A$79,581, reflecting a 6.7% inflation-adjusted reduction since 2017. Across disability severities, this cost increased from A$42,688 (no disability) to A$135,780 (severe disability: ~220% higher). Major cost contributors in 2024 included DMTs (A$546 million) and employment-related productivity losses (A$846 million); 56.0% of AMSLS participants indicated that they were not participating in the labour force (either employed or actively seeking work). Mean HSU

among PLwMS was 0.60, substantially below the Australian population norm (0.80) and declining to 0.47 for those with severe disability. Lastly, the average initial NDIS plan value was A$62,178, increasing to A$75,504 following reassessment.

Conclusion

This report provided a robust and contemporary evidence base regarding the increased prevalence and health economic burdens of MS in Australia. This evidence will both inform policy and support advocates in promoting resource allocations toward initiatives involving MS prevention, management, and research.

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