**Cost-effectiveness Analysis of Routine Screening Using Massively Parallel Sequencing for Maturity-Onset Diabetes of the Young in a Paediatric Diabetes Cohort: Reduced Health System Costs and Improved Patient Quality of Life**

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The prevalence of pathogenic/likely pathogenic maturity-onset diabetes of the young (MODY) variants were recently determined in an Australian paediatric diabetes cohort, using massively parallel sequencing (MPS).

This study used the data to estimate cost-effectiveness of using MPS for MODY in all pediatric diabetes cases compared with standard practice, in which sequencing is limited only to individuals with specific clinical features.

It was found that $1,016,000 AUD was saved per 1000 patients using routine MPS screening, rather than standard care screening. These findings provide evidence that routine MPS screening for MODY in the paediatric population with diabetes could reduce health system costs and improve patient quality of life.