

# EMHA Access to Care survey findings in Ireland



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## “Access to Care III” survey consisted on 39 items distributed in 4 dimensions and reached 3,397 total answers (237 from Ireland)



### Survey content

The “Access to Care III” survey consists on 39 items distributed in 4 dimensions:

- **SECTION I: ABOUT YOURSELF:** 7 items to obtain socio-demographic data.
- **SECTION II: ABOUT YOUR MIGRAINE:** 6 items focused on patient’s migraine.
- **SECTION III: ABOUT YOUR ACCESS TO CARE:**
  - Access to healthcare professionals: 10 items
  - Access to treatments: 11 items
  - Impact on patient’s life: 3 items
- **SECTION IV: SOURCES OF INFORMATION:** 2 items focused on identifying the main sources of information used by patients for general disease information and migraine treatment.



### Languages

Survey was launched in 12 languages: Brazilian, Czech, English, Finnish, French, German, Greek, Italian, Latvian, Norwegian, Portuguese and Spanish.



### Time on life

Survey was available for migraine patients all along 12 weeks (from March to June 14th).



### Response rate

The average response rate has remained homogeneous and considerable high all along the survey (around 65% of respondents)



### Launch

Survey was launched on March 24th in 10 languages. Latvian and Brazilian were launched later, on April 8th and April 27th, respectively.



### Total answers

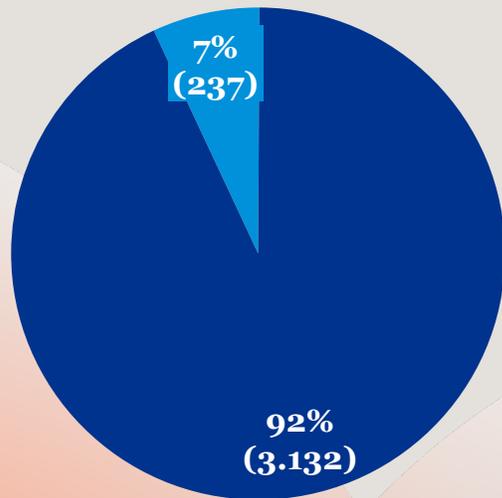
Since the launch of the survey in March, we have reached a total number of 3,397 answers (237 from Ireland).



Data used for the analysis in Ireland (7% of total responses) evidences that vast majority of respondents are women between 25 and 59 years old..

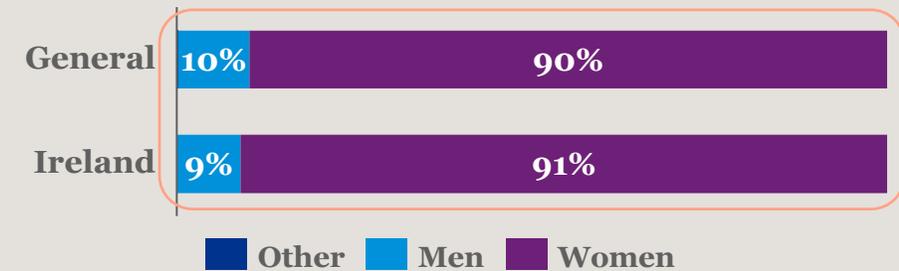
## Sociodemographic data

- At June 14<sup>th</sup> 2021, **3397 answered surveys** have been obtained by migraine patients from **41 different countries** (question 1.1).
- **7% of the responses corresponded to Irish migraine patients.**

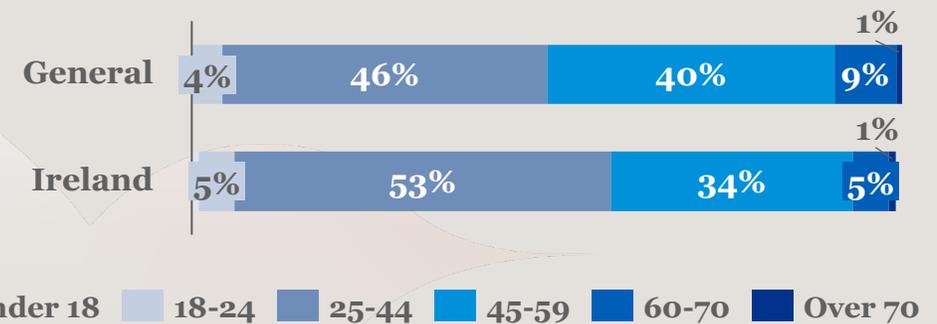


■ Ireland ■ Other countries

### ♀ Split by gender (question 1.2).



### 🧠 Range of ages (question 1.3).



\*Sample size for question 1.1: 3370 respondents; sample size for question 1.2: 3354 respondents (236 in Ireland); sample size for question 1.3: 3354 respondents (237 in Ireland).

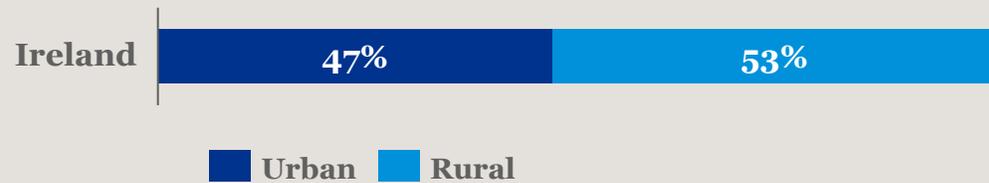


.. from both rural and urban areas of residence, actively working and with a little higher family annual income in comparison to the rest of EU countries

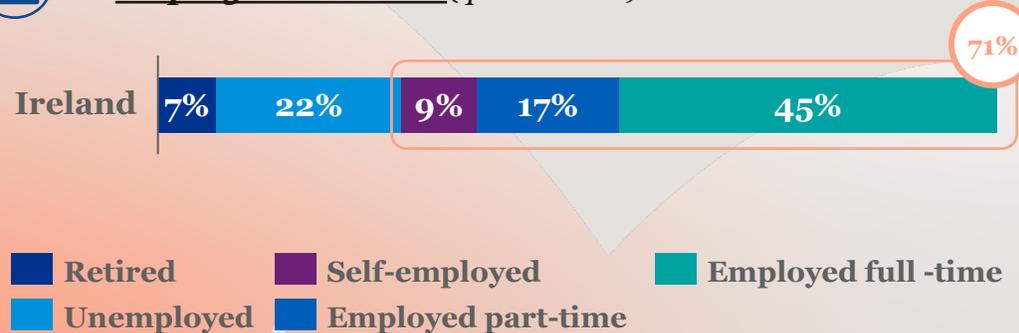
## Sociodemographic data



**Area of residence** (question 1.4).



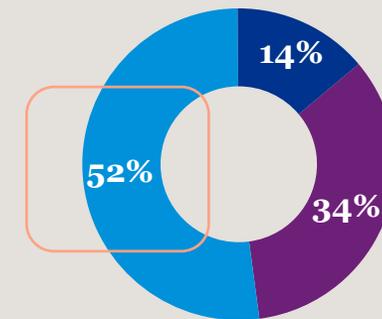
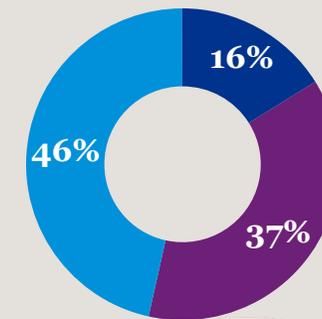
**Employment status** (question 1.6).



**Range of family annual income per country** (question 1.5 and 1.1.).

General

Ireland

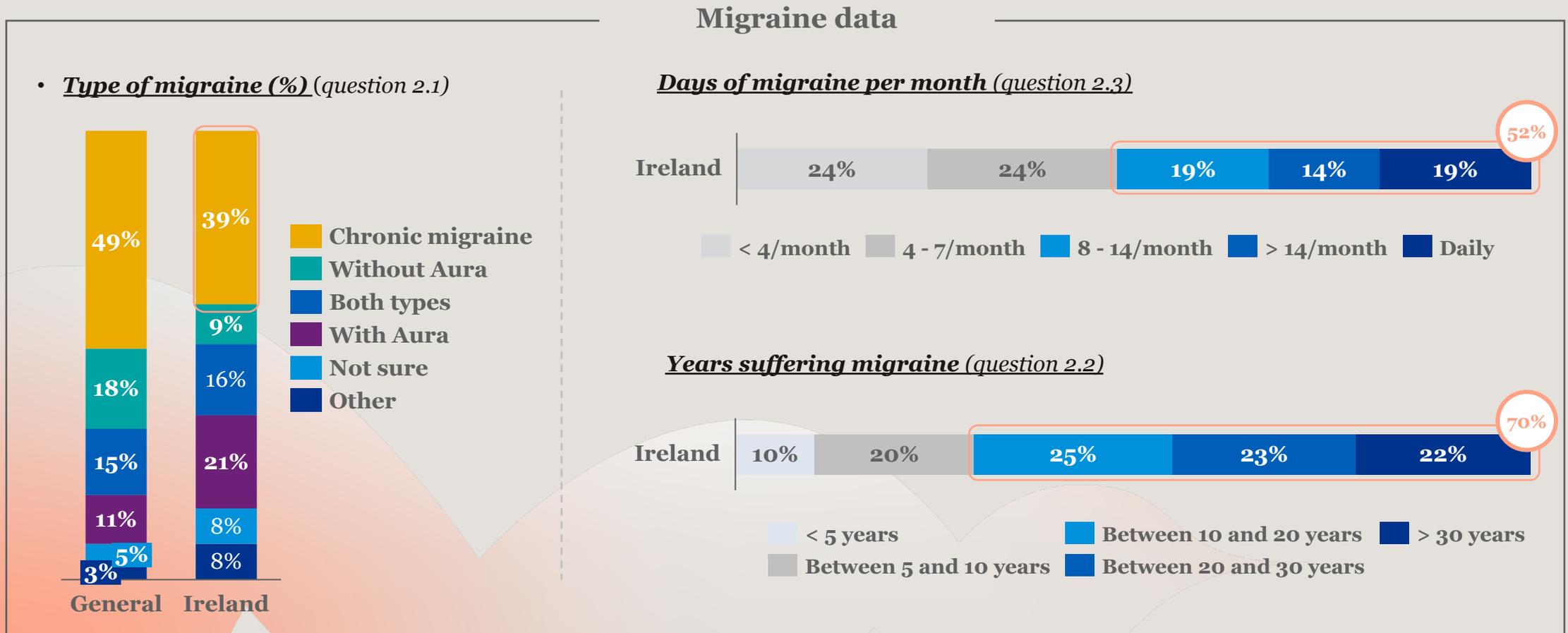


Legend for Income: ■ < 40K €/year ■ > 40K €/year ■ I prefer not to say

\*Sample size for question 1.4: 3363 respondents (236 in Ireland); sample size for question 1.6: 3266 respondents (236 in Ireland); sample size for question 1.5: 3338 respondents (236 in Ireland).



# Main indicators related to type of migraine evidence that respondents are, in average, patients suffering from mild-severe migraine for many years



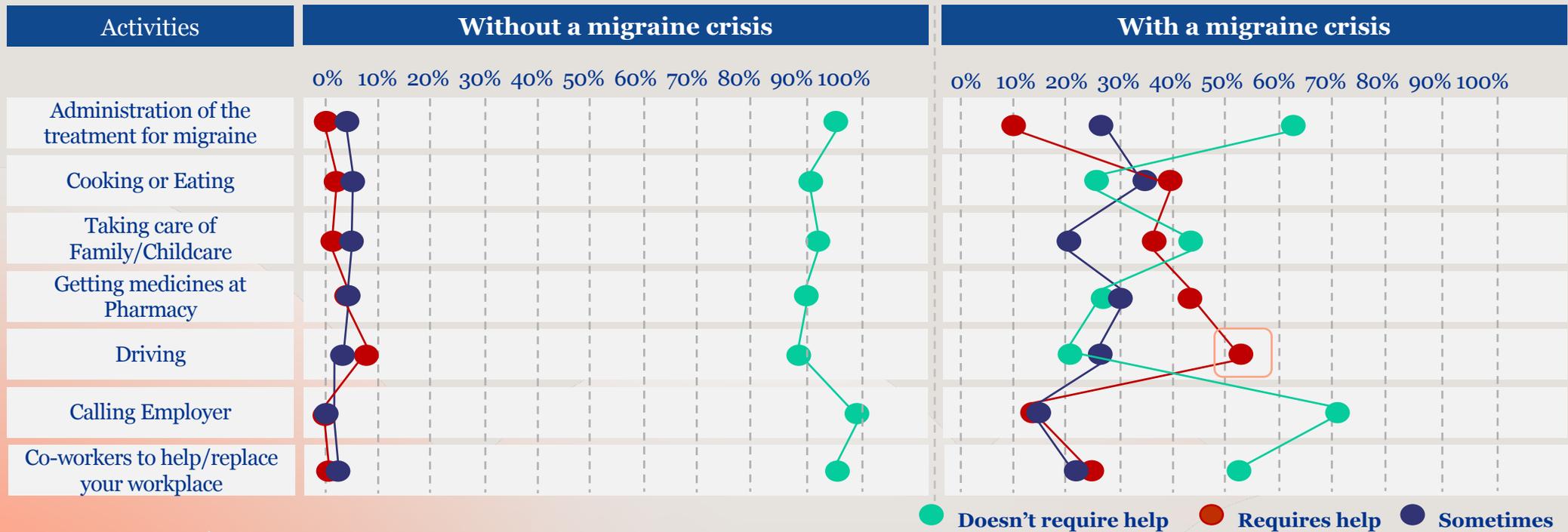
\*Sample size for question 2.1: 2831 respondents (224 in Ireland); sample size for question 2.3: 2831 respondents (224 in Ireland); sample size for question 2.2: 2832 respondents (224 in Ireland).



# When patients suffer an attack, migraine is a disabling disease affecting daily activities such as driving

## Migraine data

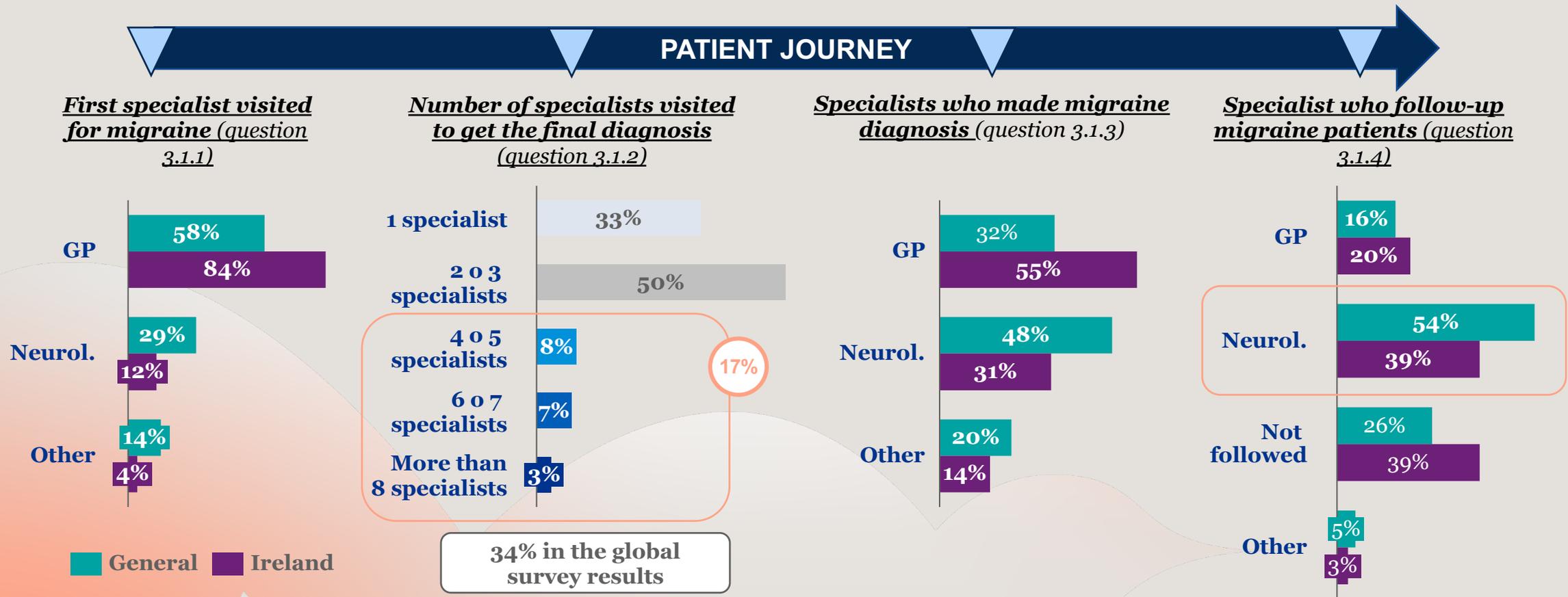
***Help needed with migraine attack and without migraine attack, Ireland results (question 2.4 and question 2.5)***



\*Sample size for question 2.4: 224 respondents in Ireland; sample size for question 2.5: 223 respondents in Ireland.



# GP's weight is important mainly in the 1st visit and in the diagnosis, while the majority of patients are either not followed or followed by a neurologist



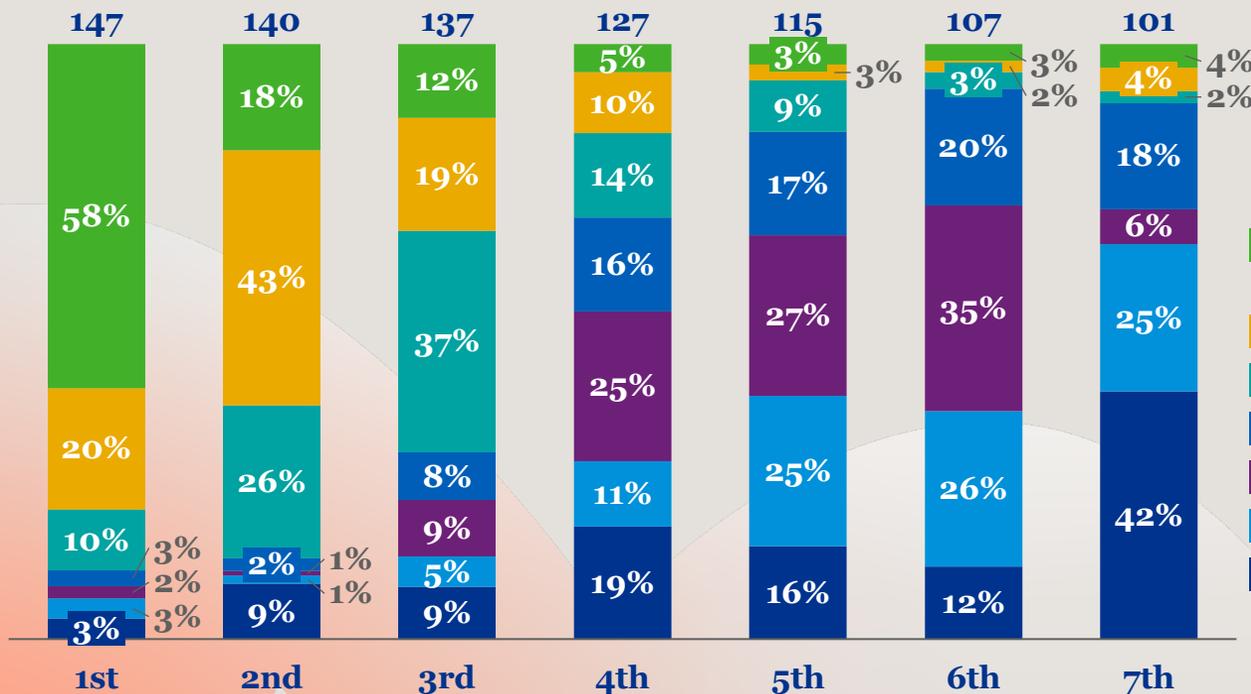
\*Sample size for question 3.1.1: 159 respondents in Ireland; sample size for question 3.1.2: 159 respondents in Ireland; sample size for question 3.1.3: 159 respondents in Ireland; sample size for question 3.1.4: 158 respondents in Ireland.



Based on interviewees input, general analgesics are the first treatment received since migraine diagnosis and new anti-CGRPs are the last ones

Access to treatment data

***Treatments taken since diagnosis in Ireland*** (question 3.2.2 b).



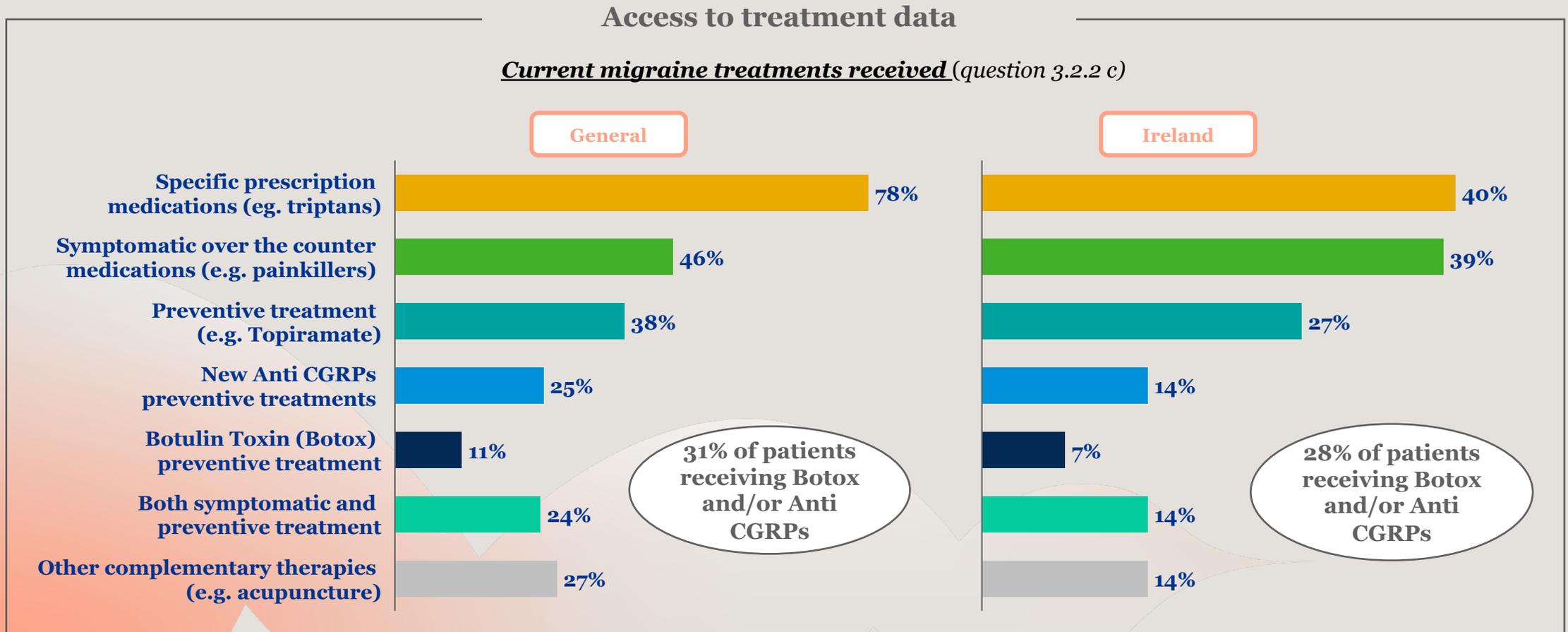
Percentage of patients **taken other complementary therapies is much higher in Ireland** (from 3 to 42%) than in the global survey results (from 0% to 9%).

- Symptomatic over the counter medications (e.g. general analgesics)
- Specific prescription medications (eg. triptans)
- Preventive treatment (e.g. Topiramate)
- Botulin Toxin (Botox) preventive treatment
- Both symptomatic and preventive treatment
- New Anti CGRPs preventive treatments
- Other complementary therapies (e.g. acupuncture)

\*Sample size for question 3.2.2 b: 149 respondents in Ireland.



About current treatment, we observe that triptans and painkillers are widely used, while innovation (Botox and/or Anti-CGRPs) reaches 28% of patients in Ireland



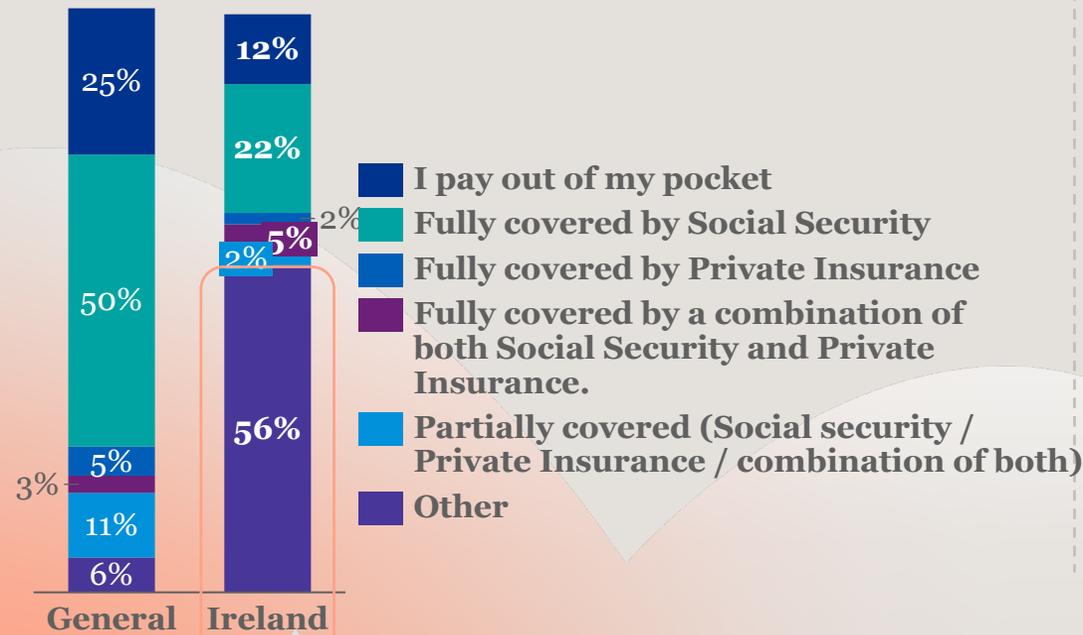
\*Sample size for question 3.2.2 c: 2228 respondents in the global survey and 143 respondents in Ireland.



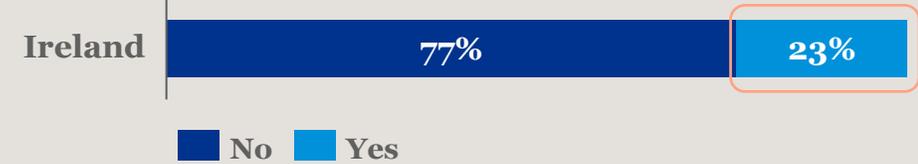
# In Ireland Anti-CGRP are normally financed through compassionate use or managed access programs, however, treatment still impacts patients finances

## Access to treatment data

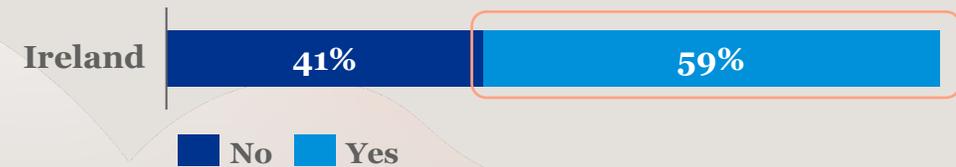
**Who pays for your Anti-CGRP treatment**  
(question 3.2.3 a).



**Ask for a change of the treatment due to its cost**  
(question 3.2.2)



**Impact of cost of treatment on finances**  
(question 3.3.3)



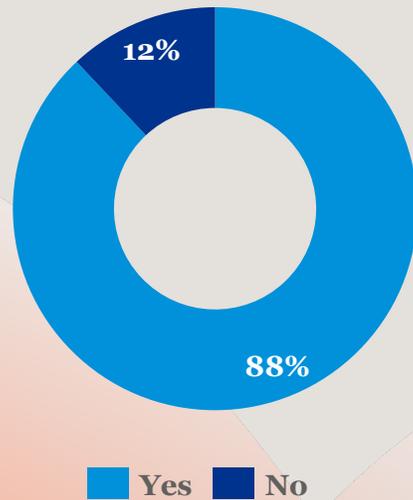
\*Sample size for question 3.2.3 a: 430 respondents in general and 41 respondents in Ireland; Sample size for question 3.2.2 a in Ireland: 142 respondents; Sample size for question 3.3.3 in Ireland: 142 respondents.



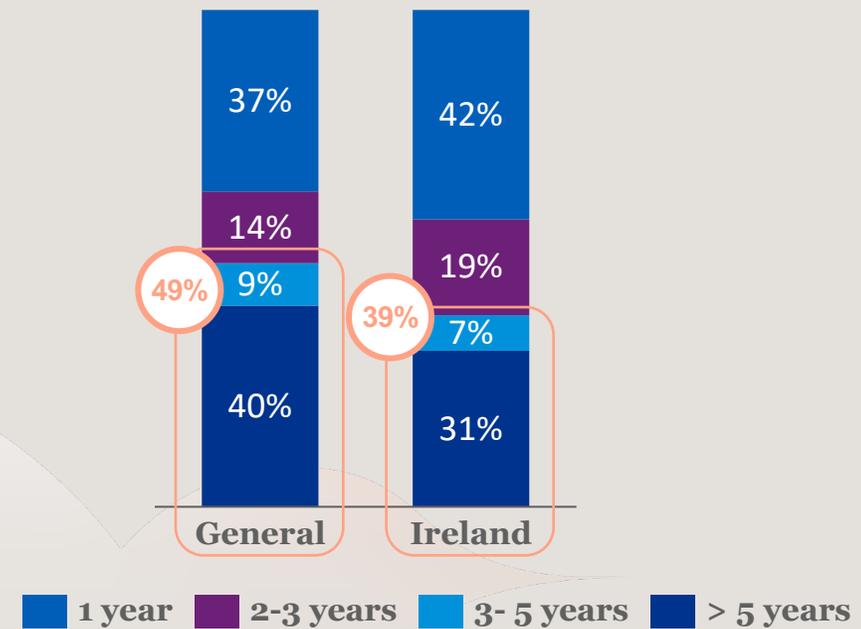
Although 88% of patients are treated and time since diagnosis to treatment is better than in EU, it evidences room for improvement to access to treatments

Access to treatment data

**Migraine patients treated in Ireland** (question 3.2.1).



**Years since diagnosis to receive migraine treatment** (question 3.2.2 a)



\*Sample size for question 3.2.1 in Ireland: 159 respondents; sample size for question 3.2.2 a: 1,951 patients (140 in Ireland).

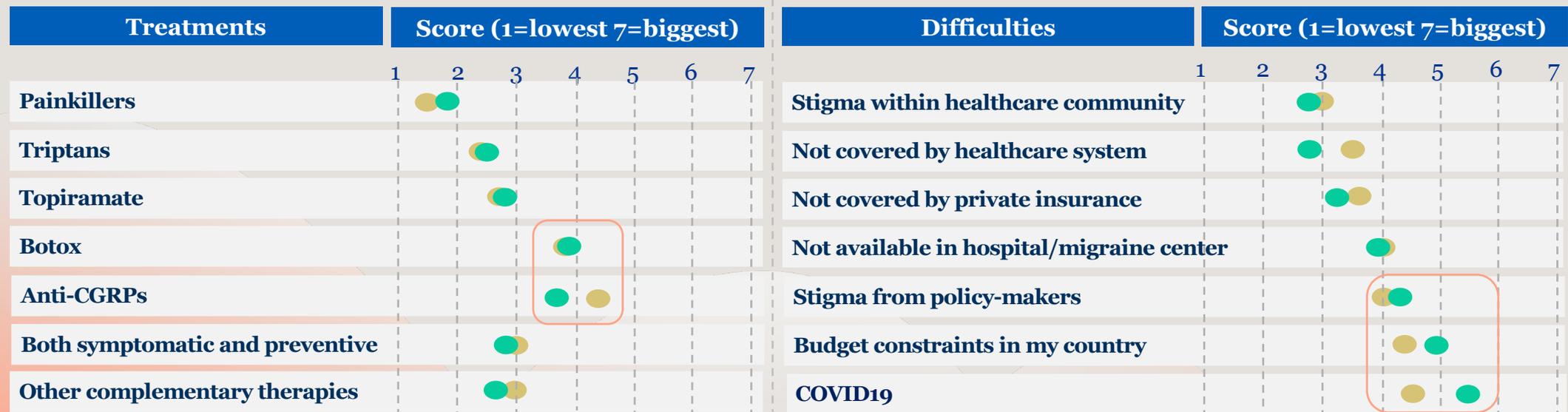


# Anti-CGRPs & Botox are reported as the most difficult treatment to obtain, and main difficulties are that are due to country budget constraints and COVID19

## Access to treatment data

**Difficulties to get access to each migraine treatment**  
(question 3.2.5)

**Difficulties to get access to specific migraine treatments**  
(question 3.2.4)



● Global survey results ● Ireland

\*Sample size for question 3.2.5: 141 respondents in Ireland; sample size for question 3.2.4: 140 respondents in Ireland.



## Summary of the “Access to Care III” survey results for Ireland

### Main conclusions

- 1** Majority of respondents are **women between 25 and 59 years** old, actively working and with **higher family incomes** in comparison to the total survey results (52% reported family annual incomes over 40K€ vs. 46% in the general analysis).
- 2** 39% of respondents reported to suffer **chronic migraine in Ireland**. Main indicators related to the type of migraine evidence that respondents are, in average, **patients suffering from mild-severe migraine** (53% with more than 8 days of migraine/month) **for many years** (70% respondents suffer migraine for more than 10 years).
- 3** Patients reported that migraine affects their daily activities when suffering attacks, being **driving the more critical**.
- 4** **First visited specialist is the G.P in Ireland** (84%). The main specialist who made **the diagnosis is also the GP** (55%), while the majority of patients are **either not followed or followed by a neurologist** (39% for both). It is worth noting that only 17% of patients still have to visit more than 4 specialists **to get the final diagnosis** (vs. 34% in the global analysis).
- 5** **Although 88% of patients are treated** and time since diagnosis to treatment is better than in EU, **it evidences room for improvement to access to treatments** (39% needed more than 3 years since diagnosis in Ireland and 49% in global results).
- 6** Since diagnosis, the **first treatments received are general analgesics followed by triptans**. The last prescribed are Anti CGRPs and other complementary therapies. Currently, the main treatments used in Ireland are triptans (40%), and the least used Botox (7%).
- 7** Moreover, **polymedication is highly frequent** and multiple drug combinations have been reported, being specific prescription mediations (e.g. triptans) together with painkillers the main received. However, innovative treatments such as **Botox and anti-CGRPs reach only 28% of patients in Ireland** (vs. 31% in the global analysis).
- 8** **Although innovative treatment reach an important percentage of patients, Botox and Anti-CGRPs had been identified as the most difficulties treatments to get access** in Germany and the main reasons for this difficulties reported had been: budget constraints in the country, the COVID19 situation and stigma between policy-makers.

Thank you