

EMHA Access to Care survey findings in Ireland



Elena Ruiz de la Torre

Executive Director European Migraine and Headache Alliance (EMHA)



“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.



Launch

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



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)



Total answers

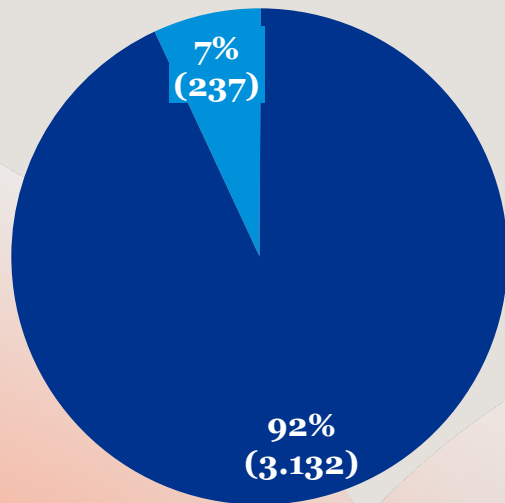
Since the launch of the survey in March, we have reached a total number of 3,397 answers (237 from Ireland).



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

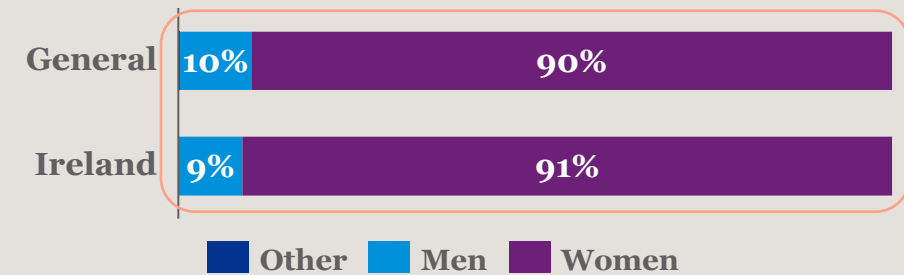
- At June 14th 2021, **3397 answered surveys** have been obtained by migraine patients from **41 different countries** (question 1.1).
- 7% of the responses corresponded to Irish migraine patients.**



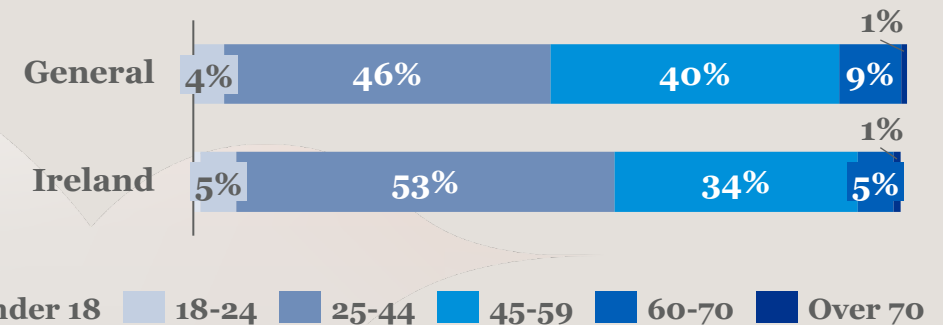
Ireland Other countries



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).



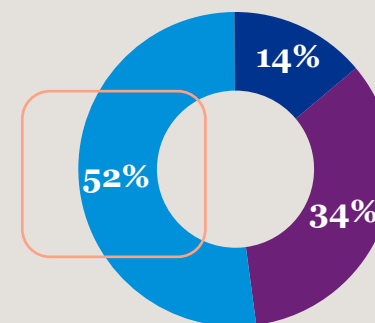
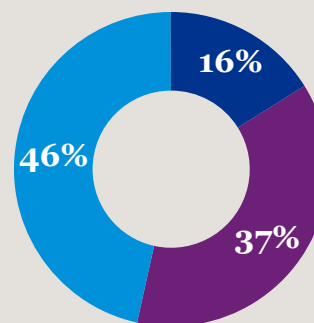
Employment status (question 1.6).



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

General

Ireland

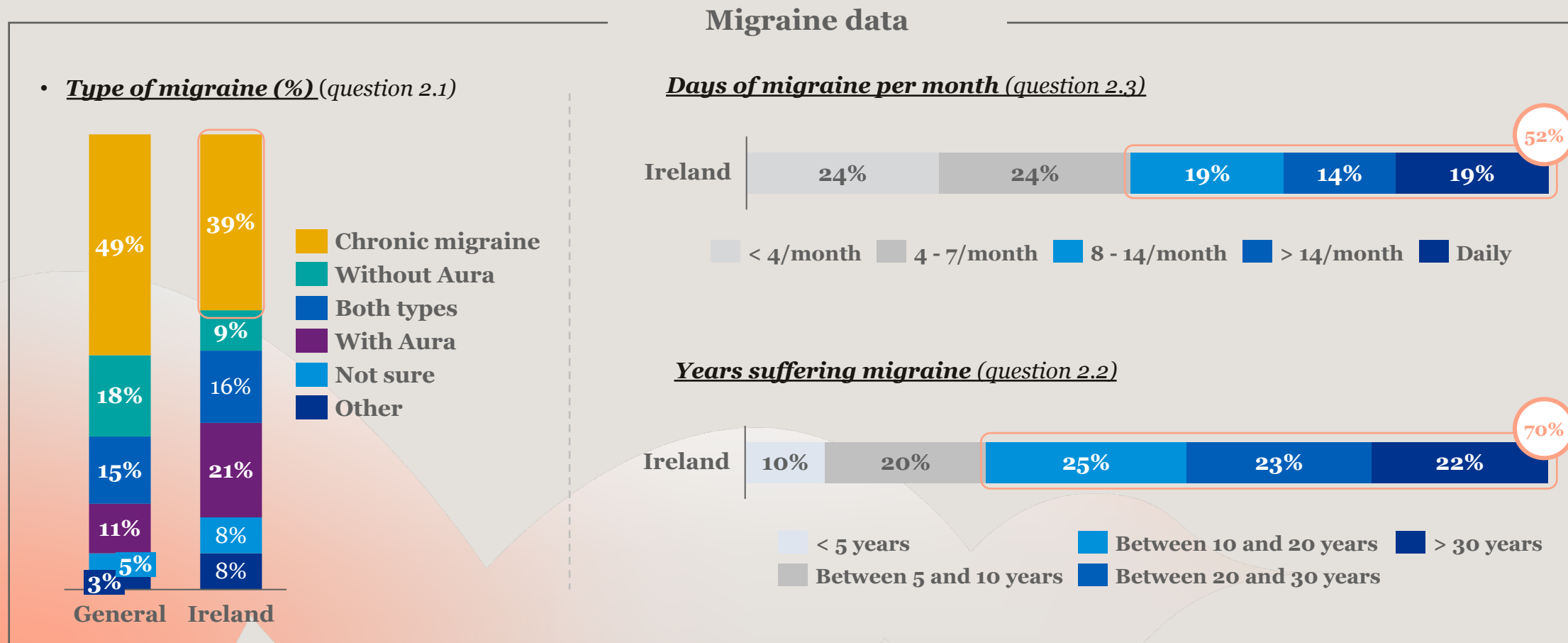


■ < 40K €/year ■ > 40K €/year ■ I prefer not to say

*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



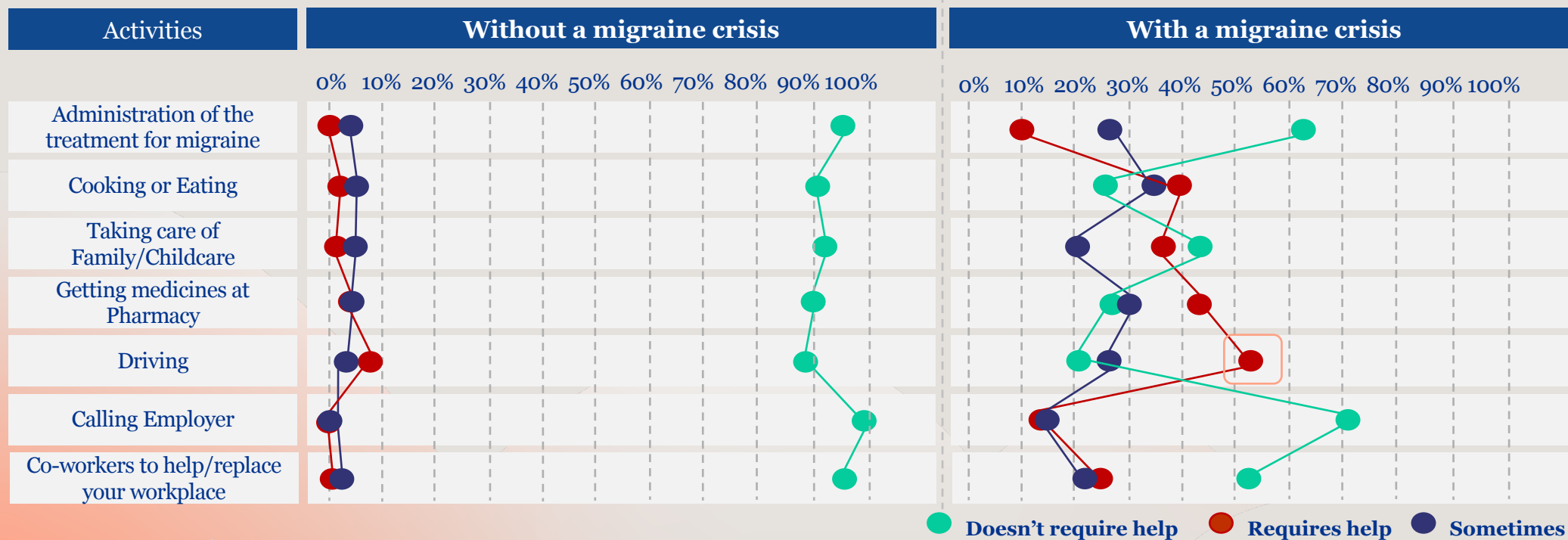
*Sample size for question 2.1: 2831 respondents (224 in Ireland); sample size for question 2.3: 2831 respondents (224 in Ireland); sample size for question 2.2: 2832 respondents (224 in Ireland).



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

Migraine data

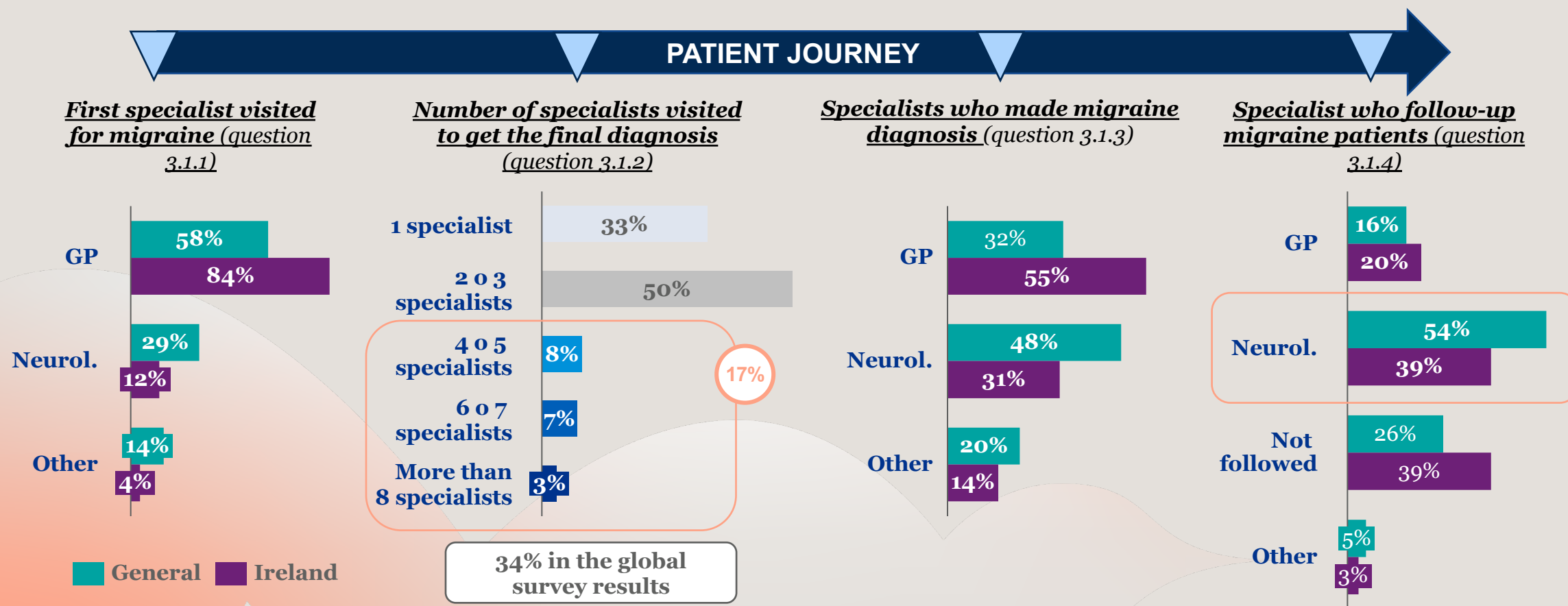
Help needed with migraine attack and without migraine attack, Ireland results (question 2.4 and question 2.5)



*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



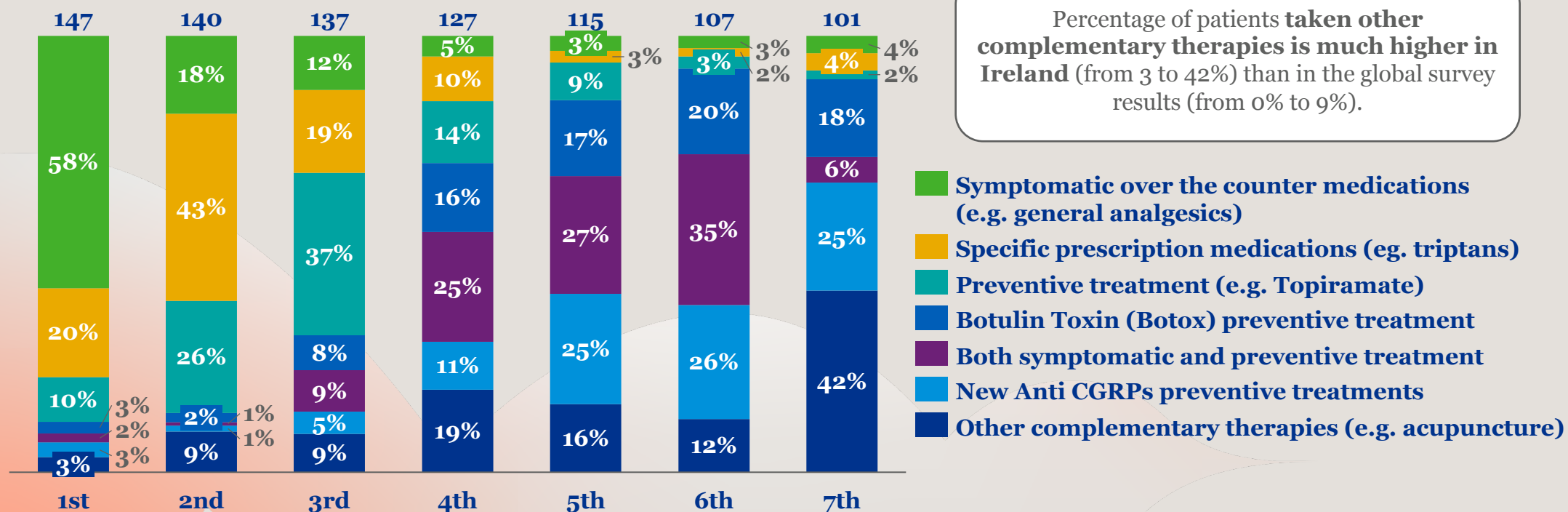
*Sample size for question 3.1.1: 159 respondents in Ireland; sample size for question 3.1.2: 159 respondents in Ireland; sample size for question 3.1.3: 159 respondents in Ireland; sample size for question 3.1.4: 158 respondents in Ireland.



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

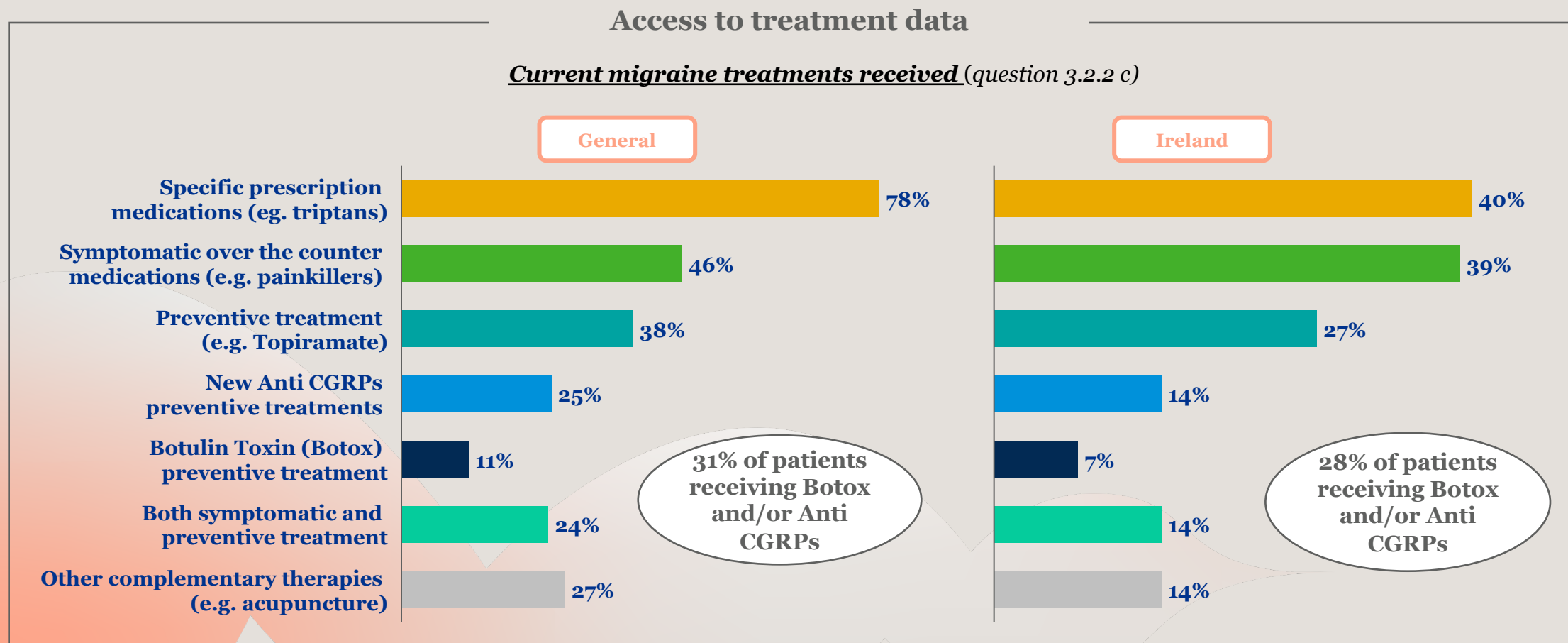
Treatments taken since diagnosis in Ireland (question 3.2.2 b).



*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



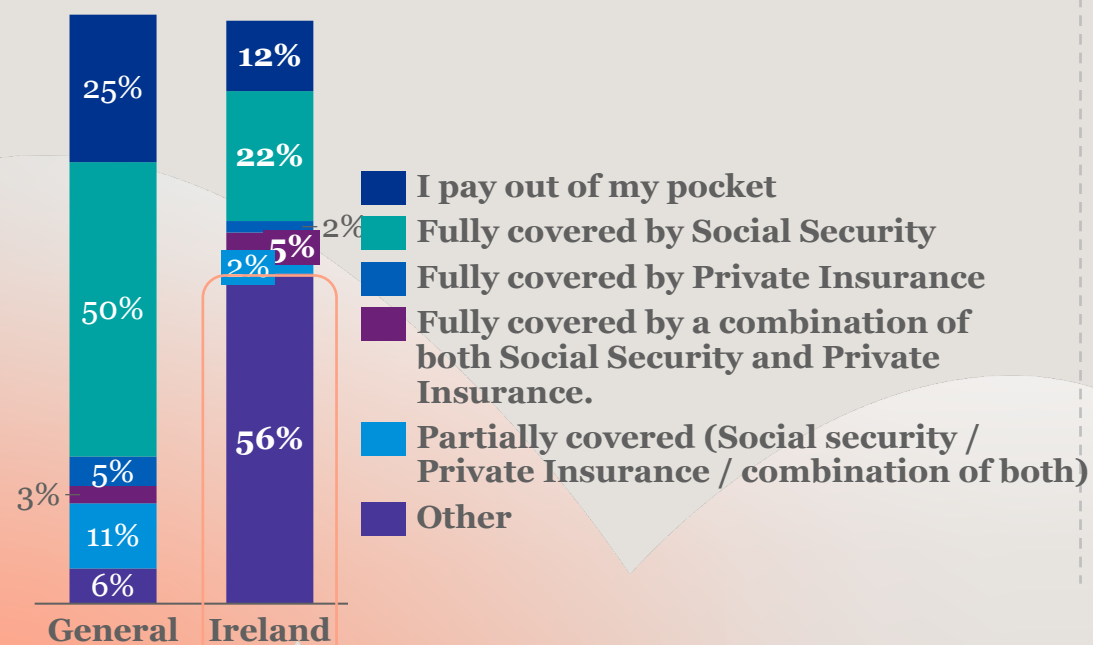
*Sample size for question 3.2.2 c: 2228 respondents in the global survey and 143 respondents in Ireland.



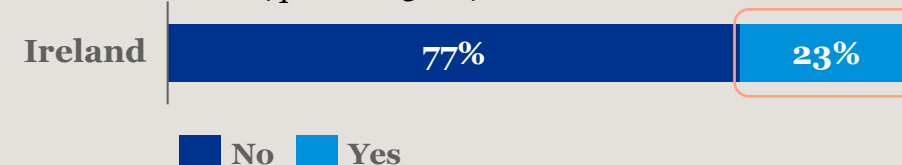
In Ireland Anti-CGRP are normally financed through compassionate use or managed access programs, however, treatment still impacts patients finances

Access to treatment data

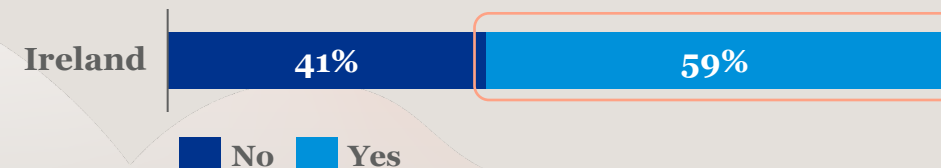
Who pays for your Anti-CGRP treatment (question 3.2.3 a).



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)



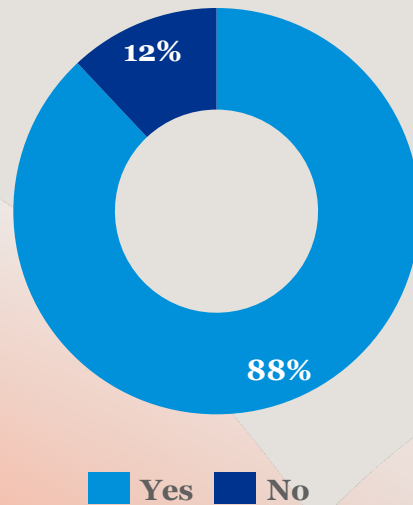
*Sample size for question 3.2.3 a: 430 respondents in general and 41 respondents in Ireland; Sample size for question 3.2.2 a in Ireland: 142 respondents; Sample size for question 3.3.3 in Ireland: 142 respondents.



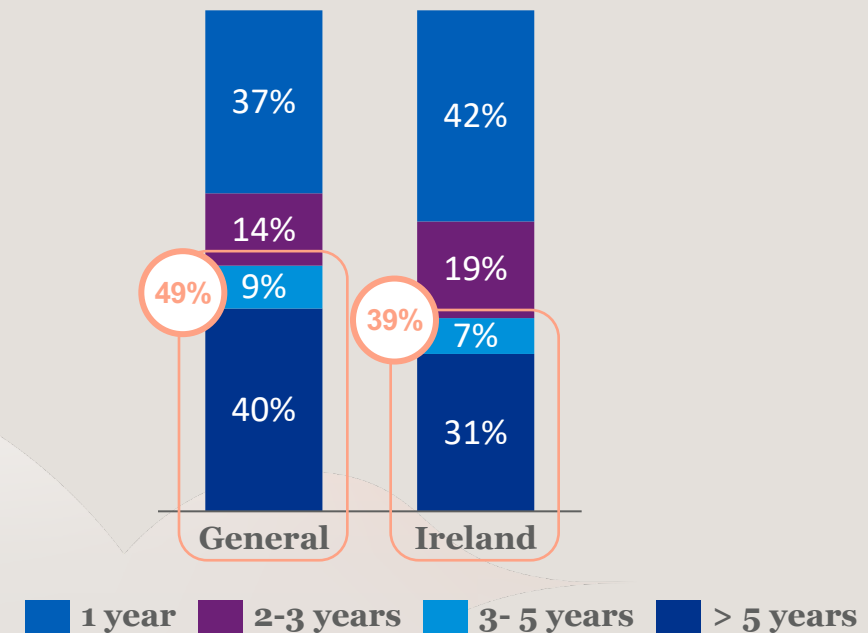
Although 88% of patients are treated and time since diagnosis to treatment is better than in EU, it evidences room for improvement to access to treatments

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)



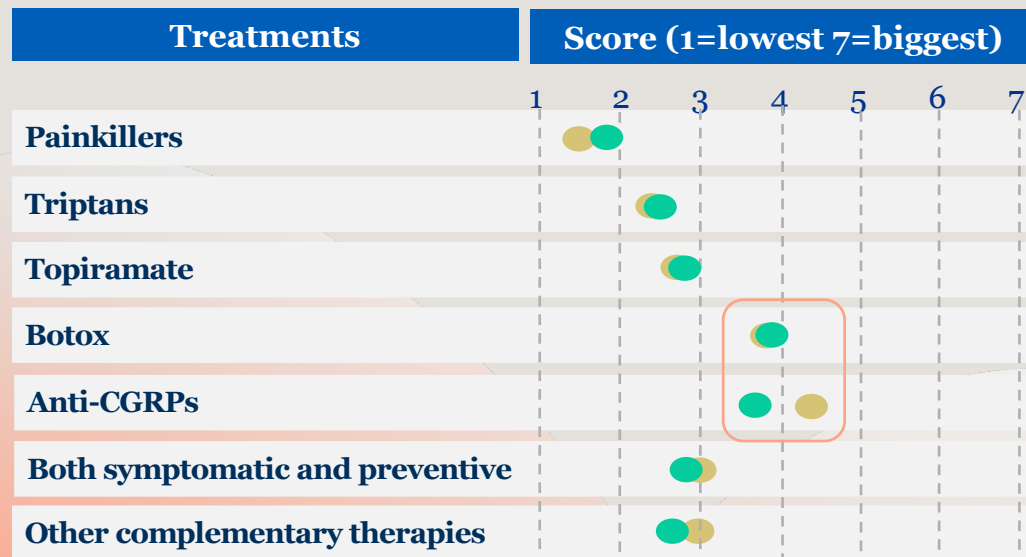
*Sample size for question 3.2.1 in Ireland: 159 respondents; sample size for question 3.2.2 a: 1,951 patients (140 in Ireland).



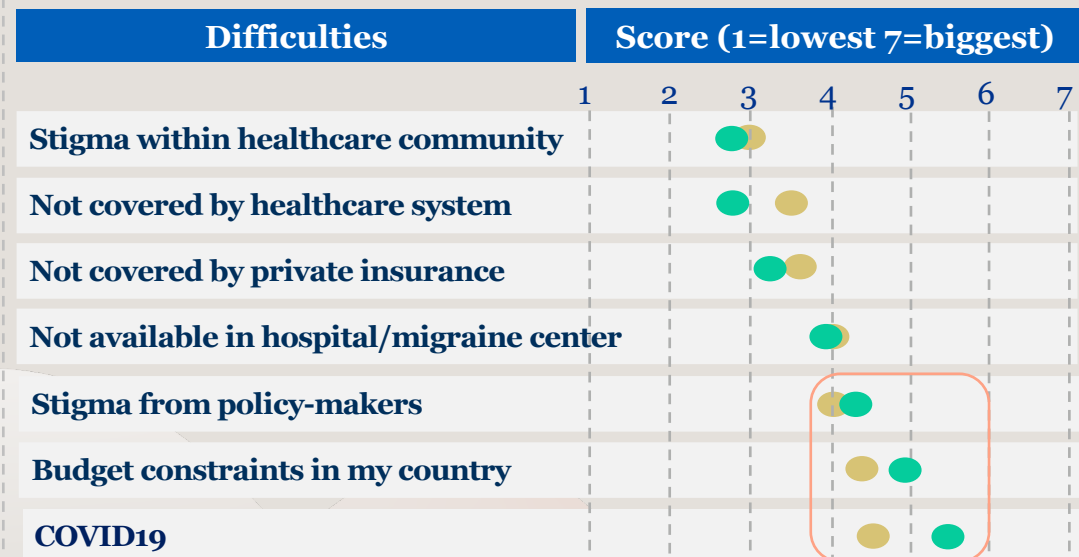
Anti-CGRPs & Botox are reported as the most difficult treatment to obtain, and main difficulties are that are due to country budget constraints and COVID19

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