

EMHA Access to Care survey findings in UK



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 (238 from UK)



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

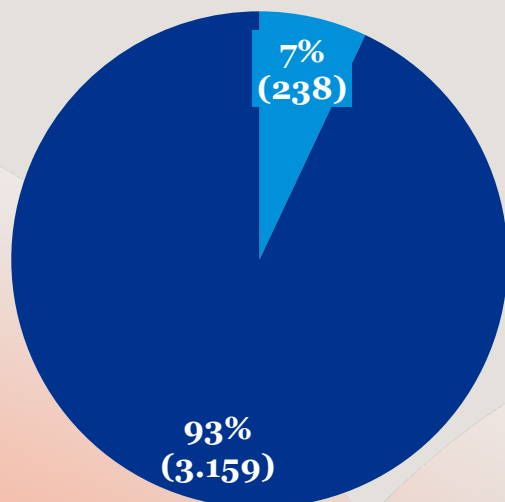
Since the launch of the survey in March, we have reached a total number of 3,397 answers (238 from UK).



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

Sociodemographic data

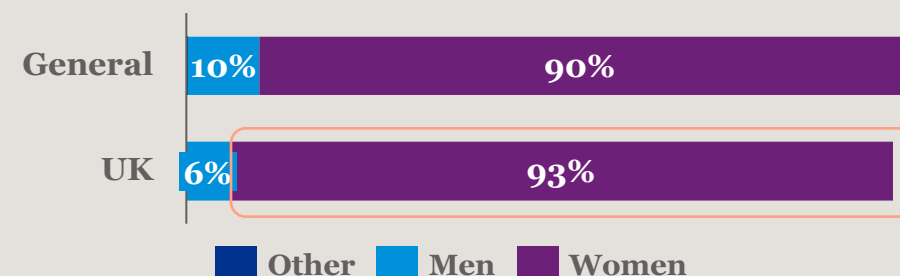
- At June 14th 2021, **3397 answered surveys** have been obtained by migraine patients from **41 different countries** (question 1.1).
- 7% of the responses corresponded to British migraine patients.**



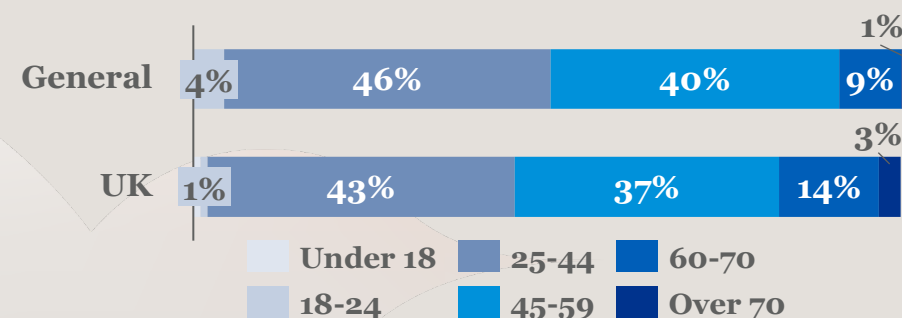
■ UK ■ Other countries



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 (238 in UK); sample size for question 1.3: 3354 respondents (238 in UK).

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

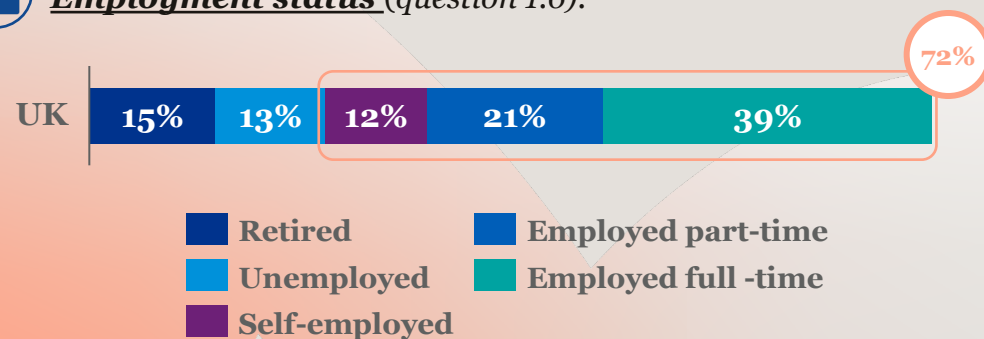
Sociodemographic data



Area of residence (question 1.4).



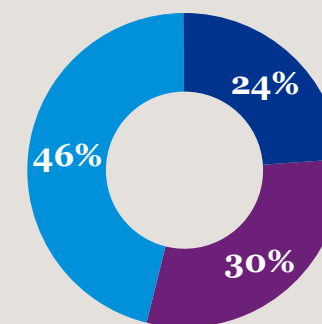
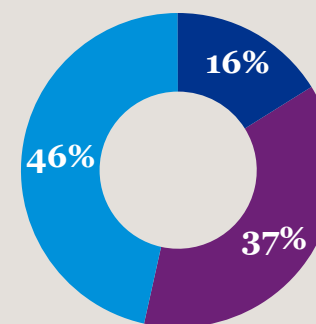
Employment status (question 1.6).



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

General

UK

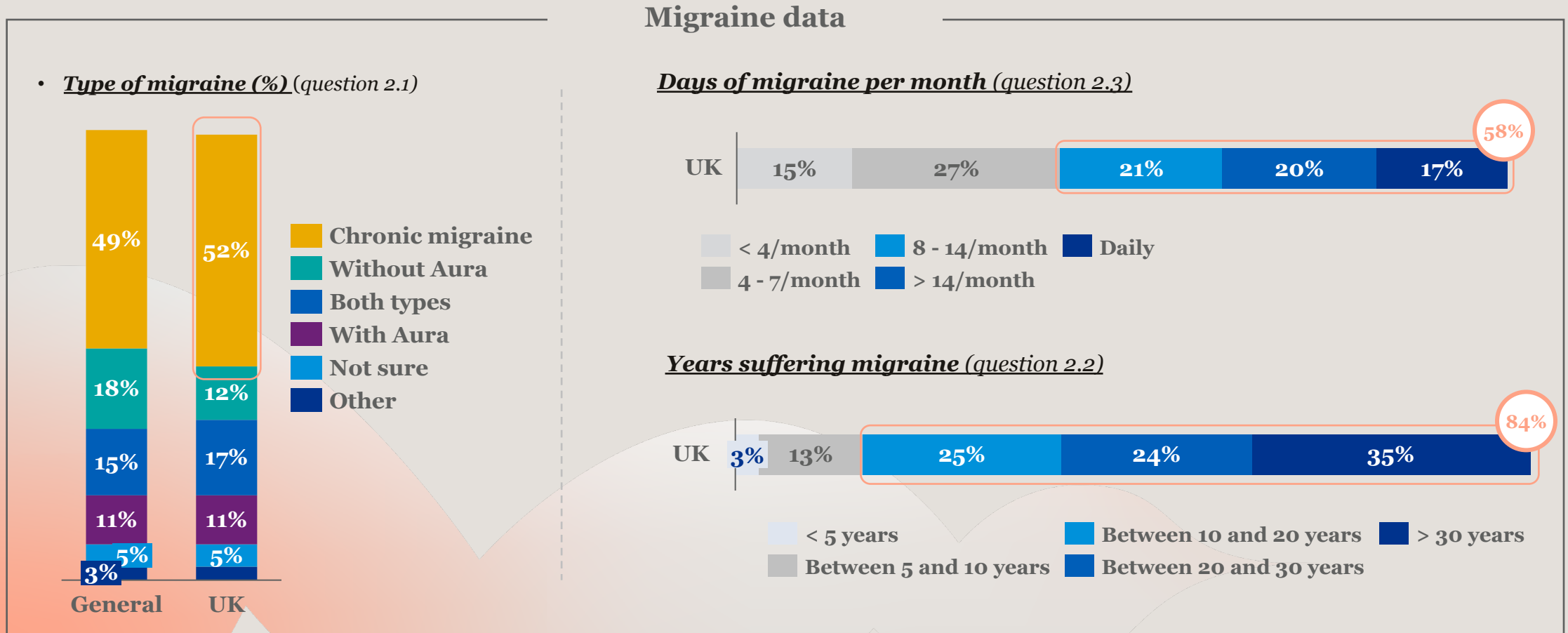


■ < 40K €/year ■ > 40K €/year ■ I prefer not to say

*Sample size for question 1.4: 3363 respondents (238 in UK); sample size for question 1.6: 3266 respondents (236 in UK); sample size for question 1.5: 3338 respondents (235 in UK).



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



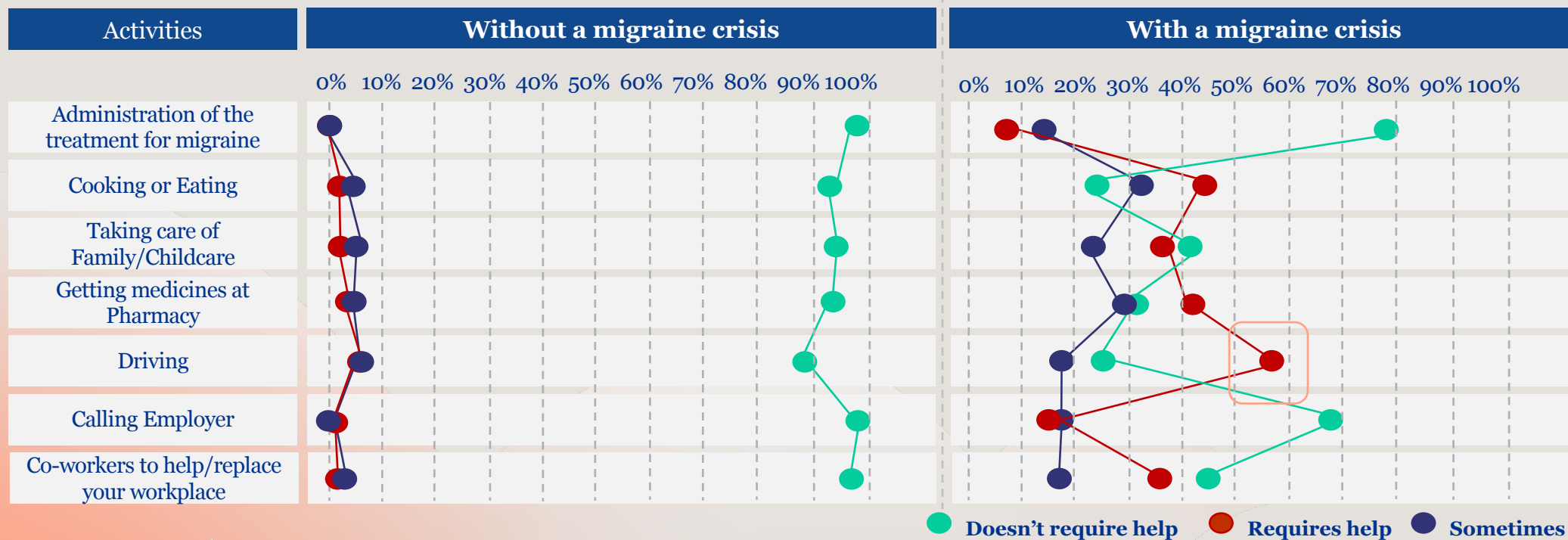
*Sample size for question 2.1: 2831 respondents (215 in UK); sample size for question 2.3: 2831 respondents (215 in UK); sample size for question 2.2: 2832 respondents (215 in UK).



When patients suffer an attack, migraine is a disabling disease affecting daily activities (driving is the activity where patients require more support)

Migraine data

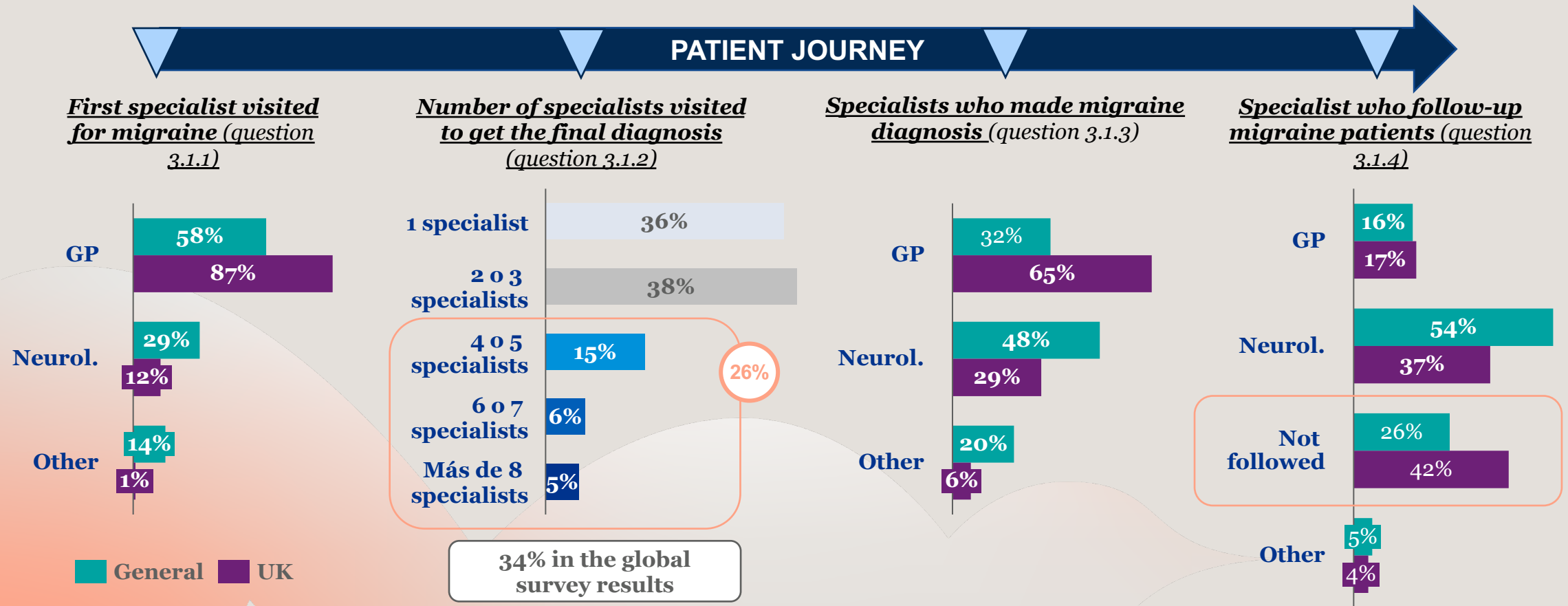
Help needed with migraine attack and without migraine attack, UK results (question 2.4 and question 2.5)



*Sample size for question 2.4: 214 respondents in UK; sample size for question 2.5: 214 respondents in UK.



GP's weight is important, as well as the most common specialist diagnosing migraine patients after 2 or more specialist visits



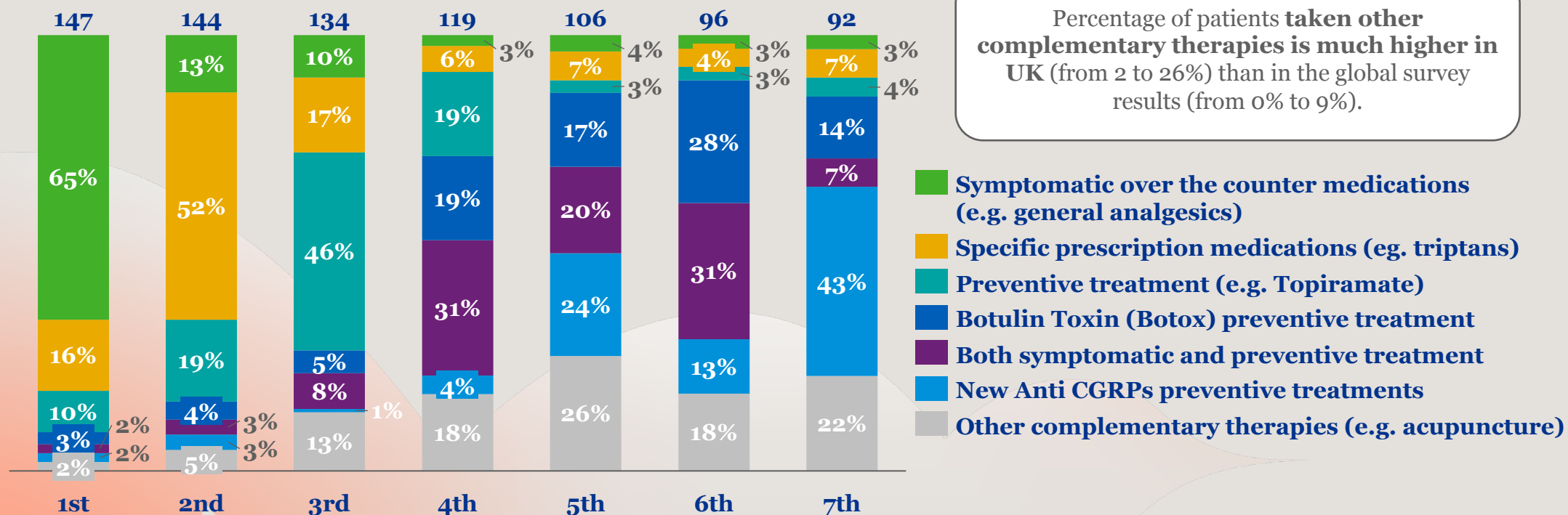
*Sample size for question 3.1.1: 151 respondents; sample size for question 3.1.2: 150 respondents; sample size for question 3.1.3: 150 respondents; sample size for question 3.1.4: 149 respondents.



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

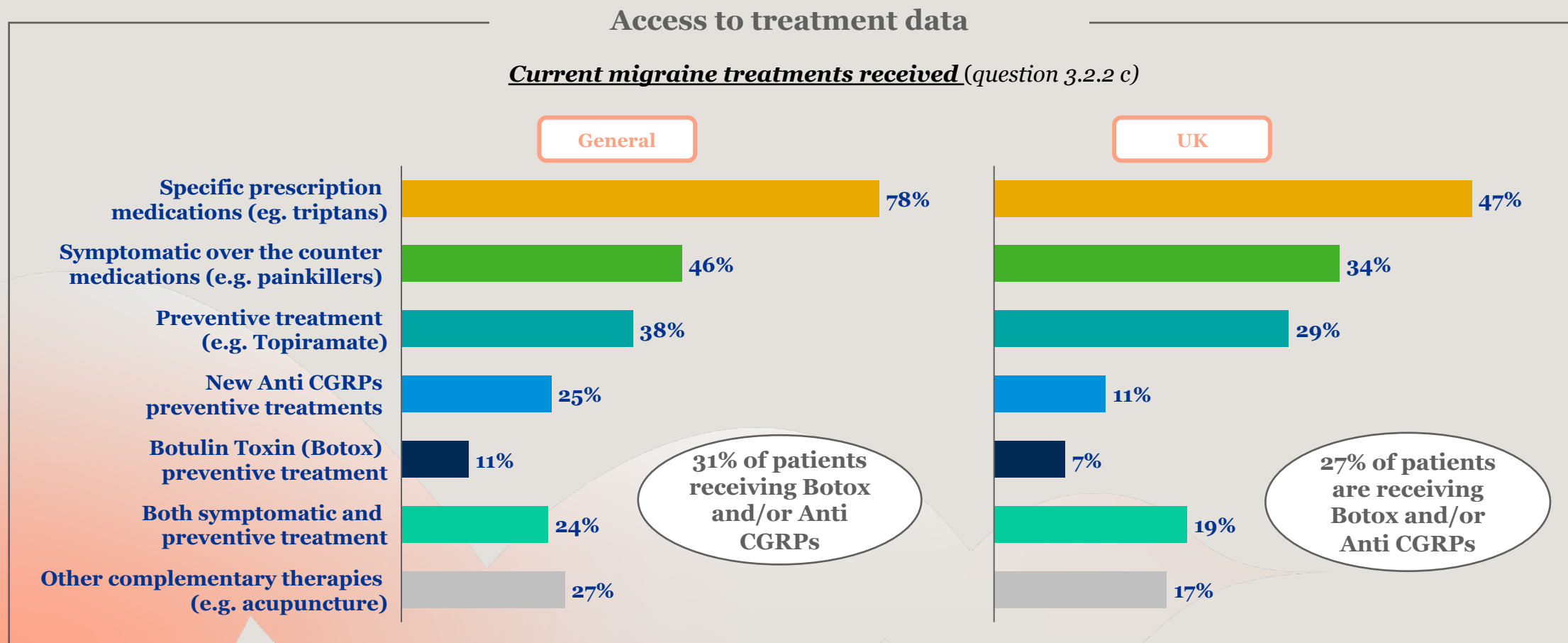
Treatments taken since diagnosis in UK (question 3.2.2 b).



*Sample size for question 3.2.2 b: 146 respondents in UK.



When assessing current treatment, we observe that triptans are widely used, and innovation (Botox and /or Anti-CGRPs) reaches 27% of patients in UK



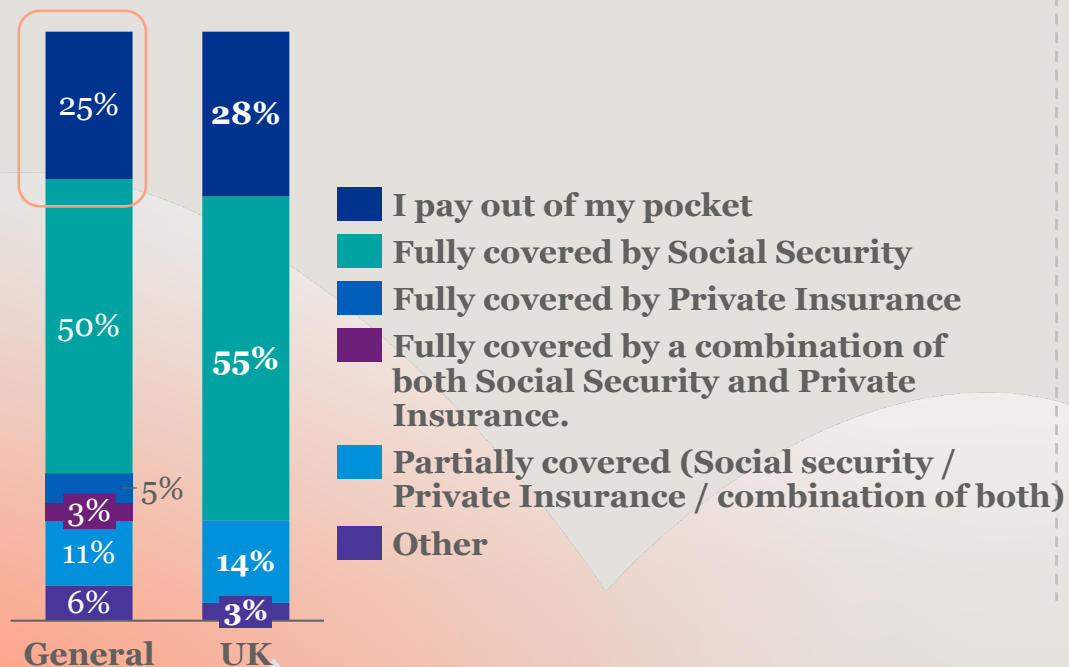
*Sample size for question 3.2.2 c: 2228 respondents in the global survey and 111 respondents in UK.



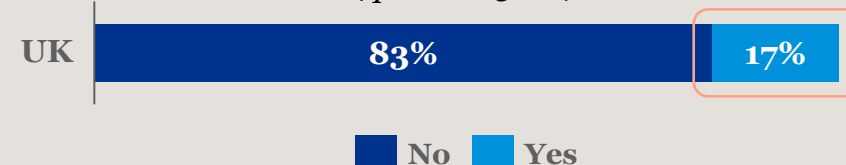
Although 34% patients reported to have impact on their finances due to migraine treatment costs, just 17% asked for a treatment change

Access to treatment data

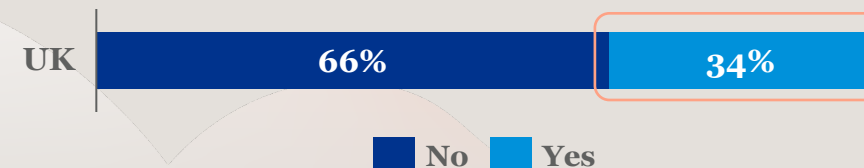
Who pays for your Anti-CGRP treatment (question 3.2.3 a).



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)



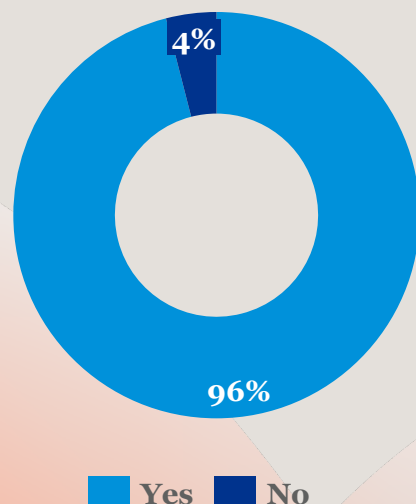
*Sample size for question 3.2.3 a: 430 respondents in general and 29 respondents in UK; Sample size for question 3.2.2 a in UK: 145 respondents; Sample size for question 3.3.3 in UK: 141.



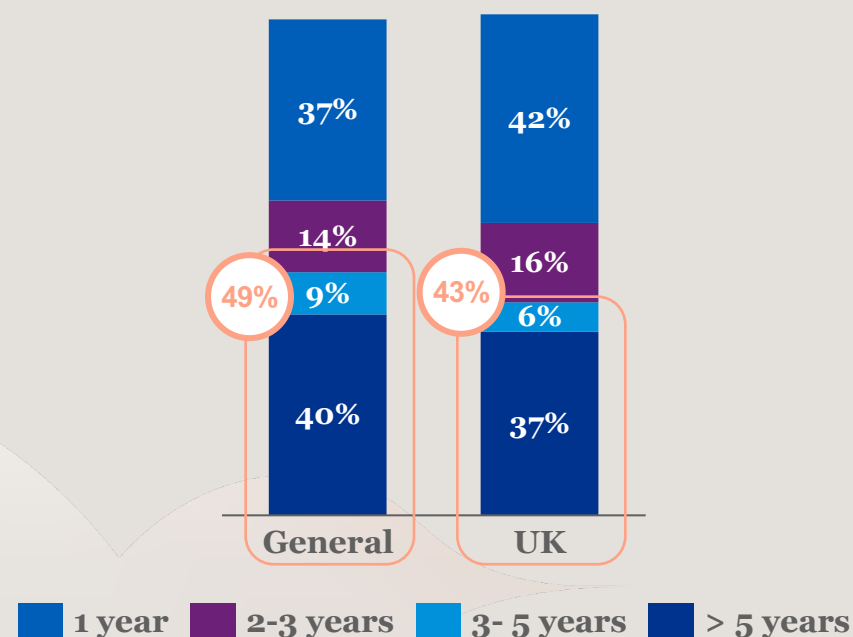
Almost 97% of patients are treated, but time since diagnosis to treatment evidence difficulties to access to migraine treatments

Access to treatment data

Migraine patients treated in UK (question 3.2.1).



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



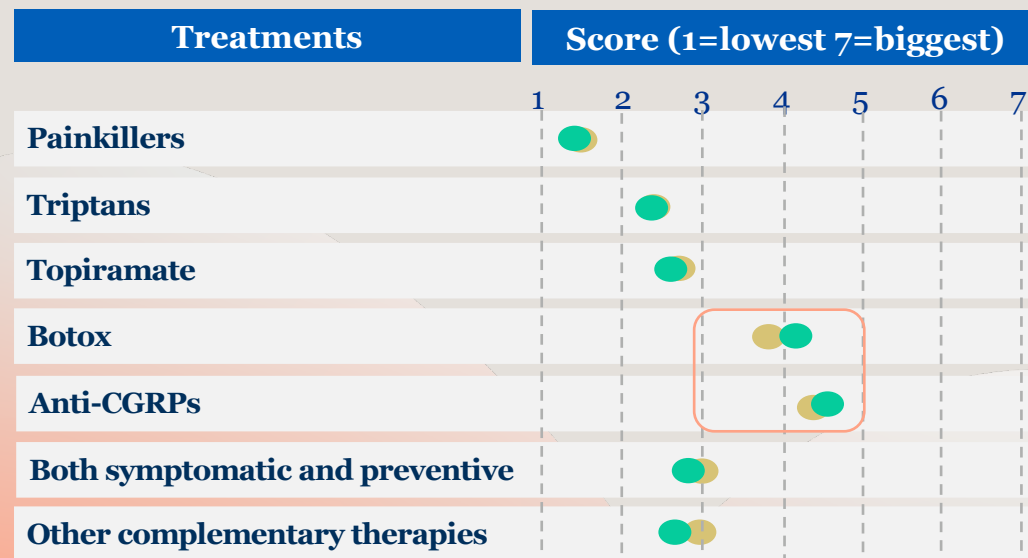
*Sample size for question 3.2.1 in UK: 151 respondents; sample size for question 3.2.2 a: 1,951 patients (141 in UK).



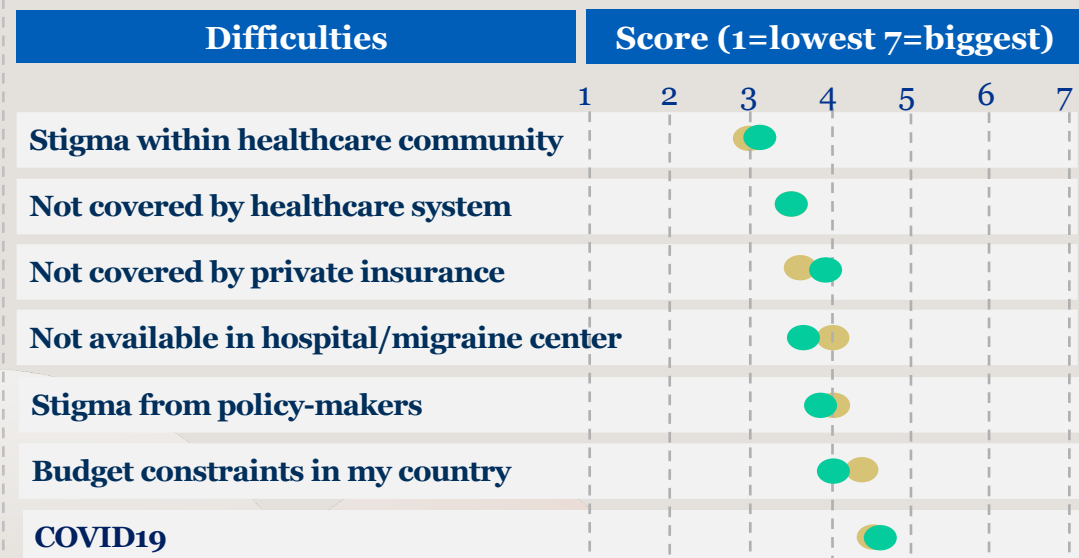
Anti-CGRPs & Botox are reported as the most difficult treatment to obtain, and some main difficulties are COVID-19 and budget constraints

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 ● UK

*Sample size for question 3.2.5: 134 respondents in UK; sample size for question 3.2.4: 121 respondents in UK.



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

Main conclusions

- 1 Majority of respondents are **women between 25 and 59 years** old, actively working and with **higher family incomes** compared to the total survey results (30% reported family annual incomes below 40K€ vs. 37% in the general analysis).
- 2 52% of respondents reported suffer **chronic migraine in UK**. Main indicators related to the type of migraine evidence that respondents are, in average, **patients suffering from severe migraine** (58% with more than 8 days of migraine/month) **for many years** (84% 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 UK** (87%). The main specialist who made **the diagnosis is also the GP and the current follow up is Neurologist** (65% and 37% respectively). It is worth noting that **most of respondents (42%) are not being followed by any HCP in UK**.
- 5 Although almost 100% of patients are treated, **time since diagnosis to treatment evidences difficulties to access to migraine treatments** (43% needed more than 3 years since diagnosis in UK and 49% in global results).
- 6 Since diagnosis, the **first treatments received are general analgesics followed by triptans**. The **last prescribed are Anti CGRPs**. Currently, the main treatments used are triptans (47% in UK), and the least used Botox (7% in UK).
- 7 Moreover, **polymedication is highly frequent** and multiple drug combinations have been reported, being specific prescription mediations (e.g. triptans) together with painkillers and/or topiramate the main received.
- 8 Finally, **Botox and Anti-CGRPs have been identified as the most difficulties treatments to get access** in UK and the main reasons for this difficulties reported had been: COVID-19 and product not covered by private insurance or healthcare system.

Thank you