

Observatory on the impact of the COVID-19 pandemic on the access to treatments

2020-2021

Study performed by IQVIA with the non conditioning support of
Farmindustria

Premise and objectives of the study

The pandemic had important effects on the initiation of treatments and access to treatments, with significant consequences on the clinical outcomes

The sanitary emergency that hit the country is having a significant impact on the healthcare system. The complexity of the pandemic and the issues related to the management of infected people challenged the healthcare system with the saturation of hospitals and intensive care, the need of defining procedures and paths dedicated to Covid-19 patients and the home management of patients. Moreover, the pandemic produced a minor access to treatments for other diseases like oncological, cardiological and respiratory ones. In fact, along with the concerns related to the management of infected patients, the extended lockdown had important effects also on the access to visits and treatments of non-Covid patients producing significant consequences for patients' health and healthcare system organization (hospital-territory integration, remote patient management).

In this context IQVIA with the non conditioning contribution of Farindustria realized a study, to be updated every three months, through an ad-hoc observatory to monitor the impact of the pandemic on the access to diagnosis and treatments and its evolution in the following months. The study is based on the analysis of Real World Data gathered from a sample of 900 general practitioners and a panel of 450 onco-hematologists representative of the reference universes.

In this document the data related to the january-october 2020 period in comparison with the same period in 2019 are presented. The study will follow for the entire 2021 with quarterly updates.

Main findings

The contraction of the entire pharmaceutical sector (-3% MAT 09/2020) - for the first time in recent years – unveils the limitations of access to treatments both in the hospital and in the pharmacy.

In the first ten months of 2020 it has been detected a significant decrease in the access to diagnosis and treatments in the main therapeutic areas compared to the same period of the previous year.

DATA SOURCE

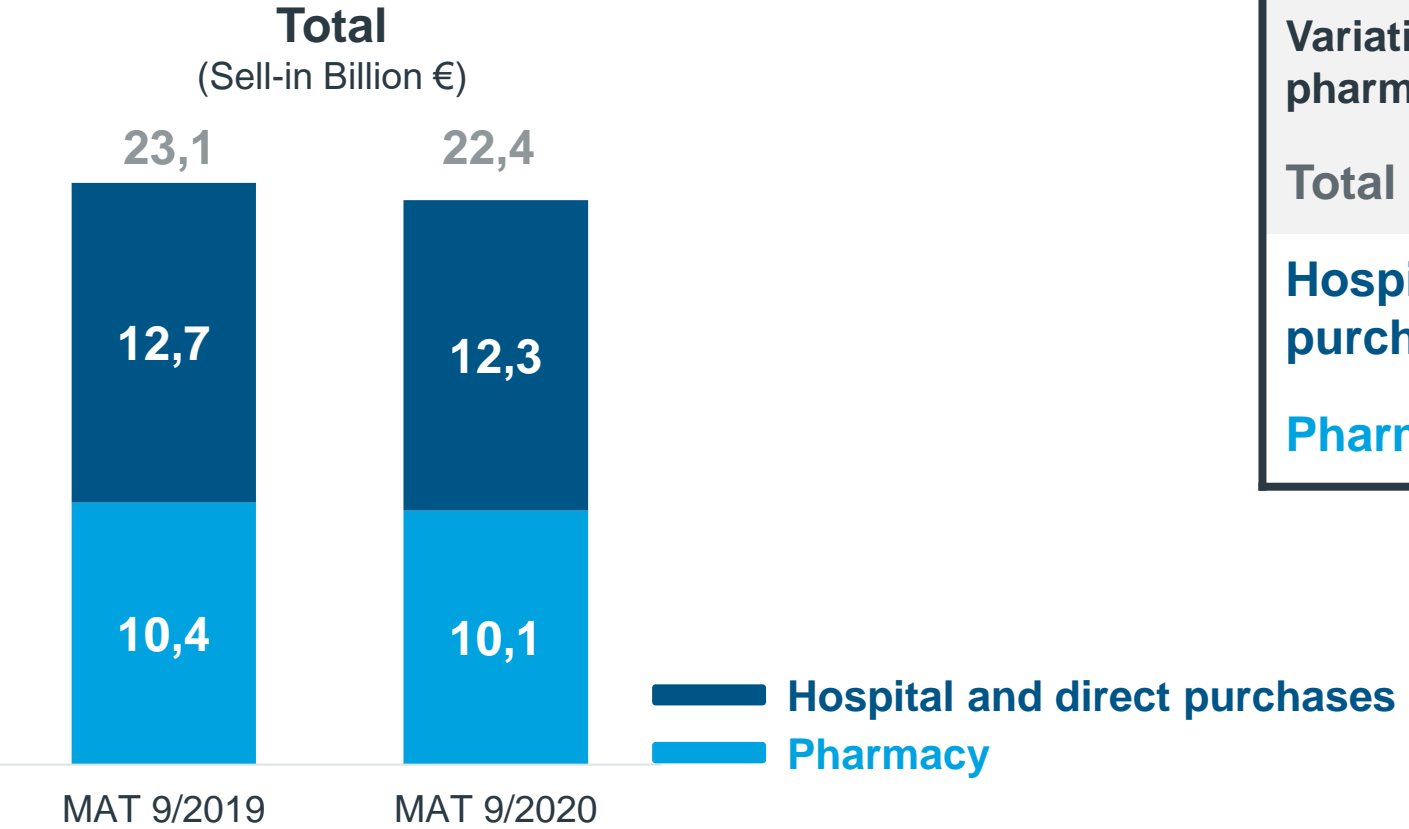
***IQVIA LPD (Longitudinal Patient Database)** Records collected from the patient management software – Panel of 900 GPs*

***Oncology Dynamics:** collection of patients data forms - Panel of 450 onco-hematologists*

- In the **main respiratory and cardio-metabolic pathologies** it has been identified a significant contraction of the new diagnosis (-521.000 equal to a reduction of 12%), new treatments initiations (-277.000, -10%), specialistic visits (-1,5 million, - 30%) and requests of exams (-2.415.000, - 22%).
- In the **respiratory** area (COPD/asthma) it is observed a significant drop in new diagnosis (COPD: -62.000; Asthma: -158.000), new treatments (-46.000, -124.000), referral to specialists (-123.000, -129.000) and spirometry requests (-108.000, -127.000). The underlined drop during the first lockdown is present also in the following period. In the **cardiovascular area** (atrial fibrillation/hearth failure) it is detected a significant contraction in new diagnosis (atrial fibrillation -18.000, hearth failure -44.000), new treatments (-4.000, -29.000), referrals to cardiologist (-81.000, -248.000) and requests of ECG (-64.000, -180.000). The slight improvement after the lockdown did not balance the losses.
- Also, in the **oncological** area there is a significant contraction of access to diagnosis and treatments. In the first lockdown period 18.000 postponed diagnosis are estimated. The partial recovery in the summer months did not balance the drop: overall in october there are 30.000 cancer diagnosis less than the ones made in the same period of the previous year. In particular, in the first 10 months there is a reduction of the screening requests for breast (-7%), lung (-10%) and colon (-10%) cancer. In addition, it is noted a contraction of new diagnosis for cancer (-11%), treatments initiations (-14%), surgeries (-17%) and hospitalization (-14%). After the initial interruption of screening and follow up visits, due to the closure of many departments and ambulatories, it has been observed a partial recovery during summer months, but it did not offset the contraction of diagnosis and treatments. Subsequently - in parallel to the second pandemic wave – it has been detected a new reduction in the accesses.

The contraction of the pharmaceutical sector (-3%) shows the limitation of access to treatments both in hospital and pharmacy

Evolution of the pharmaceutical during MAT 9/2020



Variation of the pharmaceutical by channel	Values (Sell-in Billion €)
Total	- 3,0%
Hospital and direct purchases	- 2,9%
Pharmacy	- 3,1%

Values are expressed considering the weighted average price for the hospital channel and direct purchases (included the DPC channel), ex-factory for pharmacy channel - Class A, A with note, Class C and Class H are taken into account
 Source: IQVIA National Integrated Database September 2020
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The first Covid-19 wave significantly affected the number of new diagnosis and treatments, in addition to the requests of specialistic visits and exams

Dato Real World Data from GP – FOCUS: COPD, ASTHMA, ATRIAL FIBRILLATION, HEARTH FAILURE, HYPERTENSION, DIABETES

-521.000
[-12%]

-277.000
[-10%]

-1.498.000
[-30%]

-2.415.000
[-22%]

**NEW
DIAGNOSIS**

**NEW
TREATMENTS**

**REFERRALS TO
SPECIALISTS**

TESTS/EXAMS

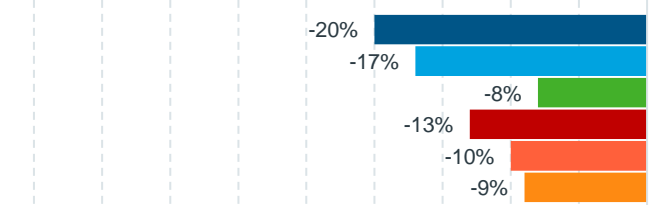
Δ january-october 2020 vs 2019 YoY



In the first 10 months of the year, there was an important contraction of new diagnosis, treatments and referrals to specialists among chronic pathologies

Analysis of activities january-october 19/20 (YoY – % values.)

-45% -40% -35% -30% -25% -20% -15% -10% -5% 0%



New diagnosis

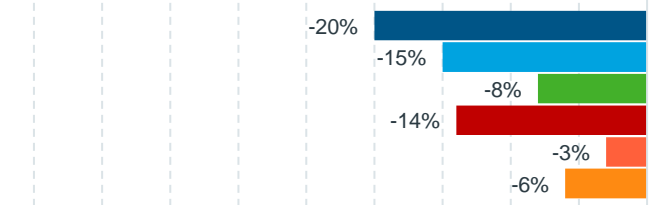
Total deviation

-521.000
[-12%]



Notes

- In all the therapeutic areas analyzed it is registered a **reduction in new diagnosis between 8-20%** with respect to the same period in 2019 (-12% on average)
- **COPD and Asthma** are the most affected pathologies with **-20%** e **-17%** of performed diagnosis, followed by **Atrial Fibrillation (-13%)**, **hearth failure (-10%)**, **hypertension (-9%)** and **diabetes (-8%)**

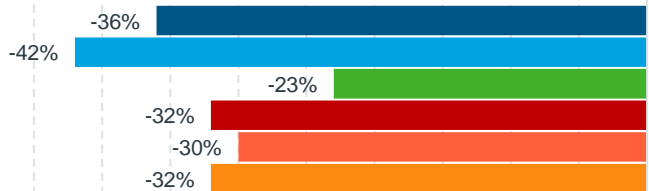


New treatments

-277.000
[-10%]



- **New treatments** are reduced on average by **-10% Oct YTD** with respect to 2019
- **COPD and Asthma** remain the most impacted (**-20%** e **-15%**), followed by **FA (-14%)**; **diabetes (-8%)**, while **hypertension (-6%)** and **hearth failure (-3%)** are the less affected

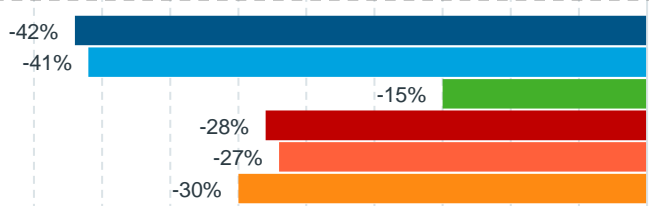


Referral to specialist

-1.498.000
[-30%]



- **The referrals to specialists** have experienced a strong drop in all the therapeutic areas: **-30% on average**
- The **respiratory pathologies** are the most hit with a **collapse greater than 35%**; then the **cardiological ones** with a **reduction greater than 30%**; the **diabetes area** is the least affected (**-23%**)



Exams requests

-2.415.000
[-22%]



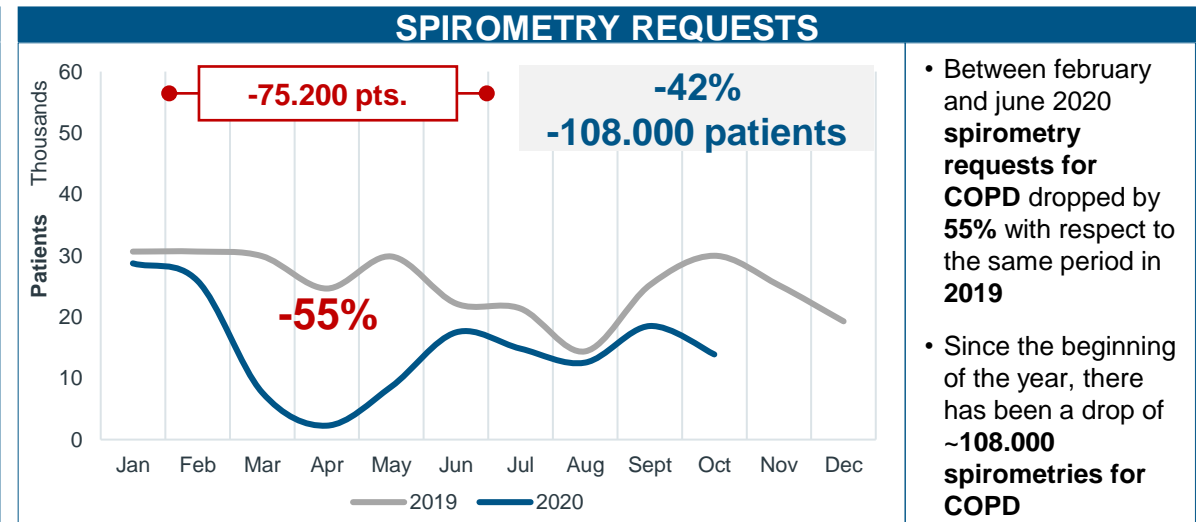
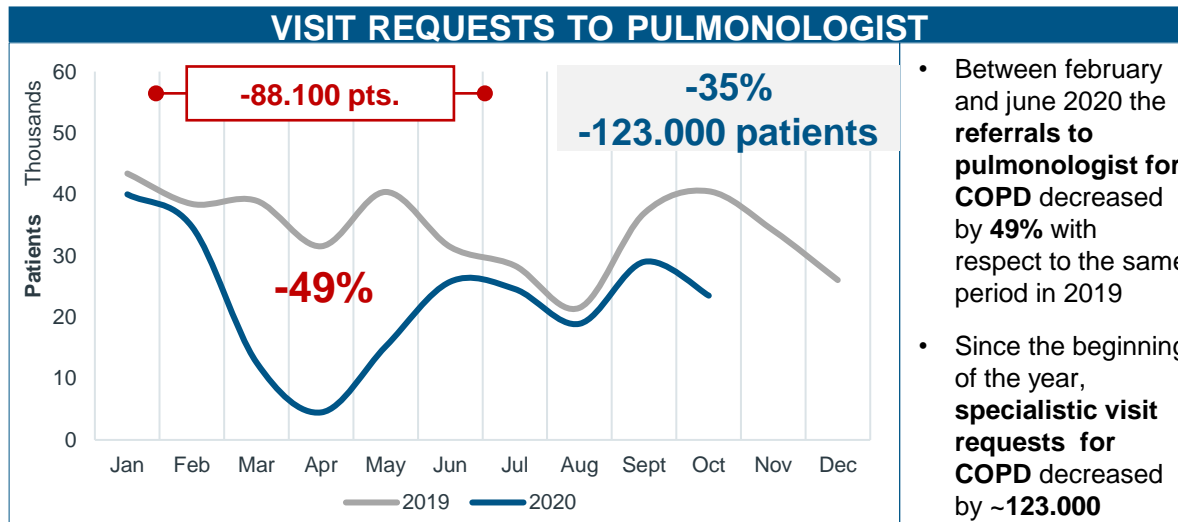
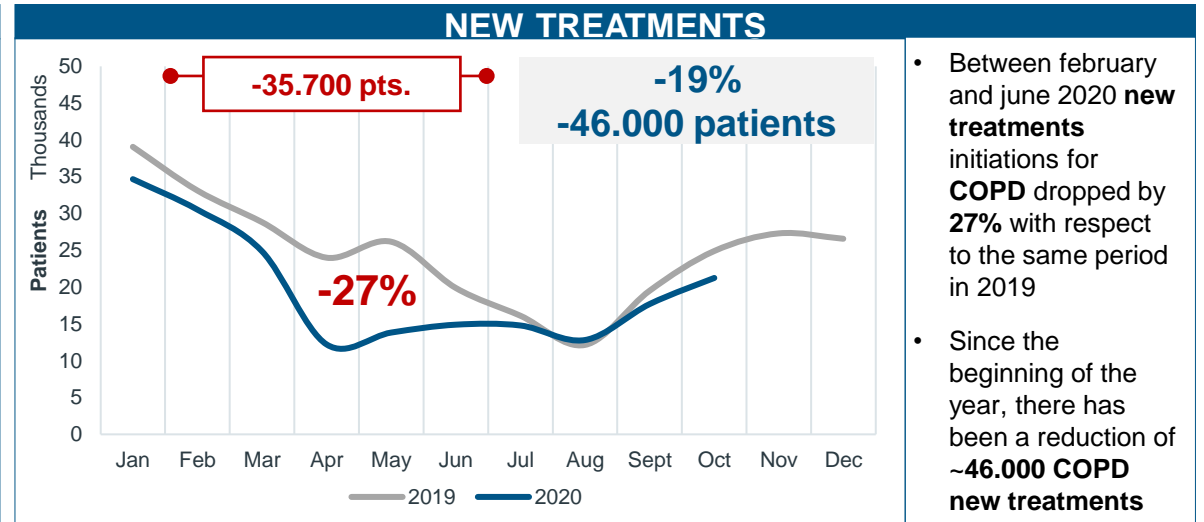
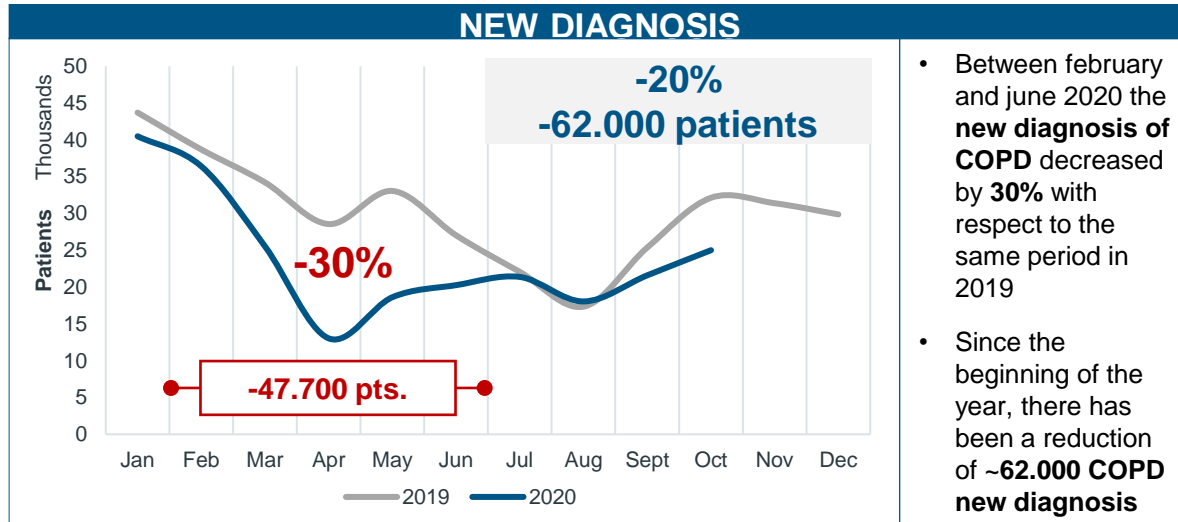
- **The requests of specialistic exams** suffered an average impact of **-22%** in relation to the previous year (spirometry, glycemia and ECG)
- Also in this case, the **respiratory pathologies** are the most affected (**-41%**), then the **cardiological ones** (around **-28%**); **diabetes** is the least impacted (**-15%**)

■ COPD
 ■ Asthma
 ■ Diabetes
■ Atrial fibrillation
 ■ Hearth failure
 ■ Hypertension

The impact of the deaths due to COVID-19, that affected the population object of the study in the period considered, on the estimation of the contraction of specialistic visits and exams requests results minimal (the range is between -2,09% and -4,61%) according to the different therapeutic areas and it does not modify substantially the estimation made.

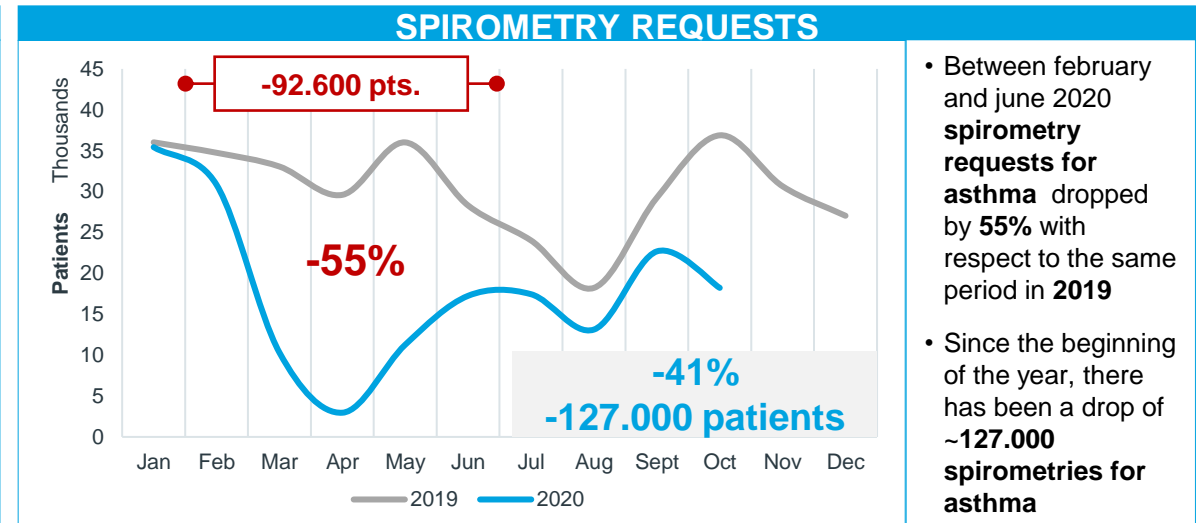
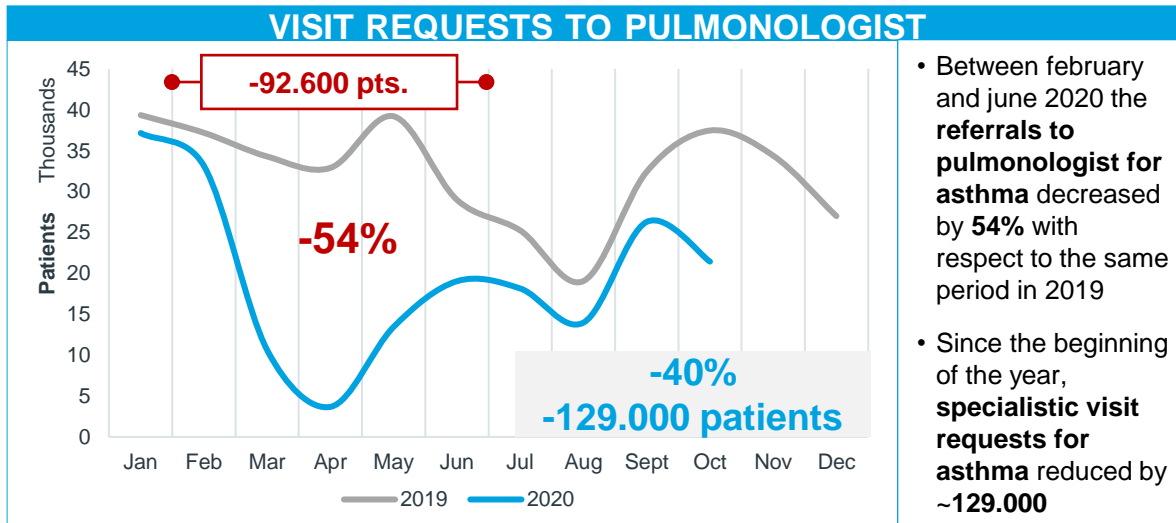
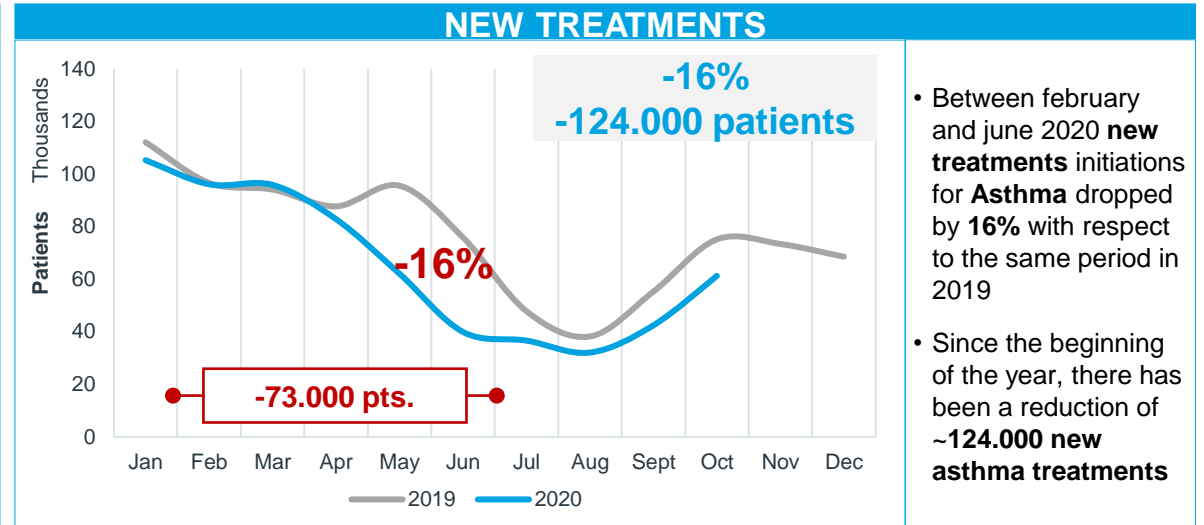
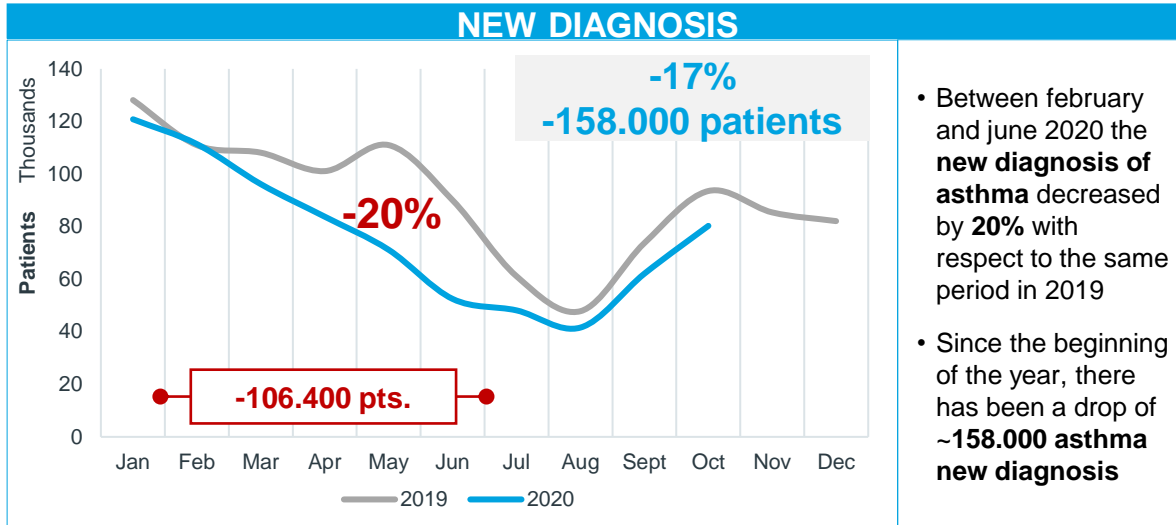
In the COPD area it is detected a significant drop of new diagnosis (-20%), new treatments (-19%), referral to specialists (-35%) and spirometry requests (-42%). The drop underlined after the first lockdown worsened during the year

COPD: comparison january-october 2020 vs 2019



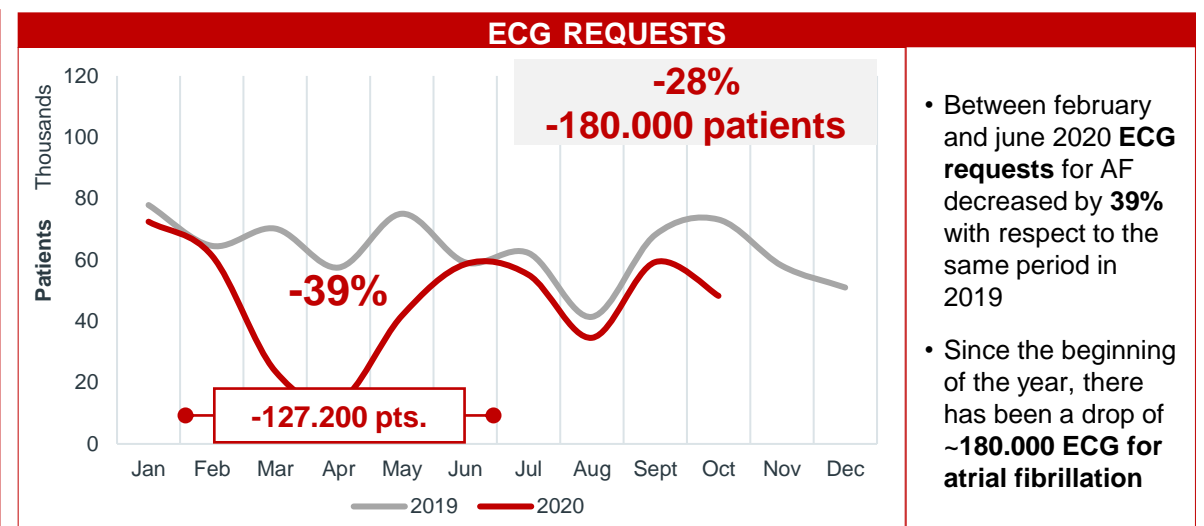
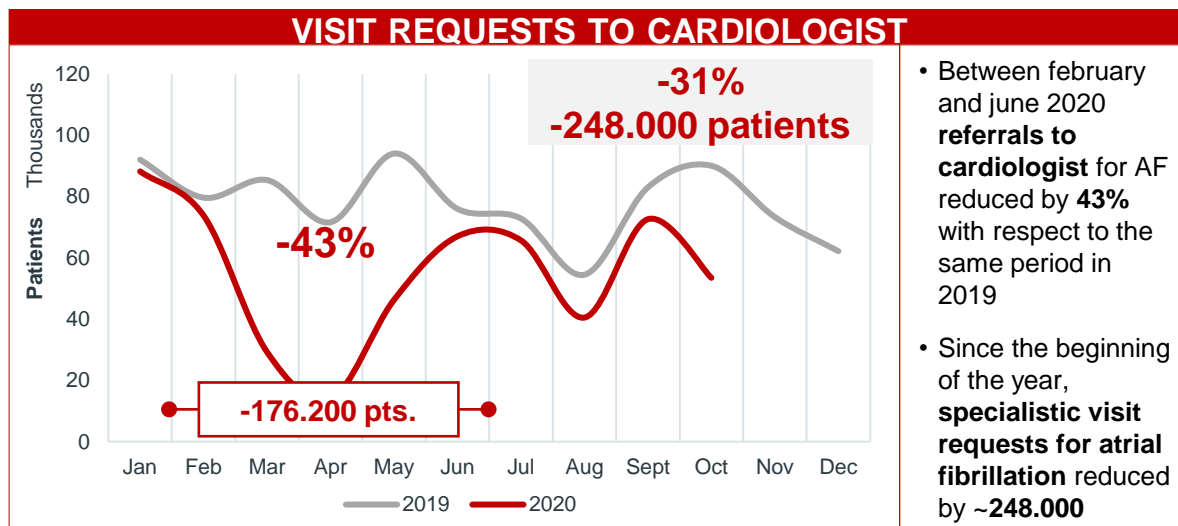
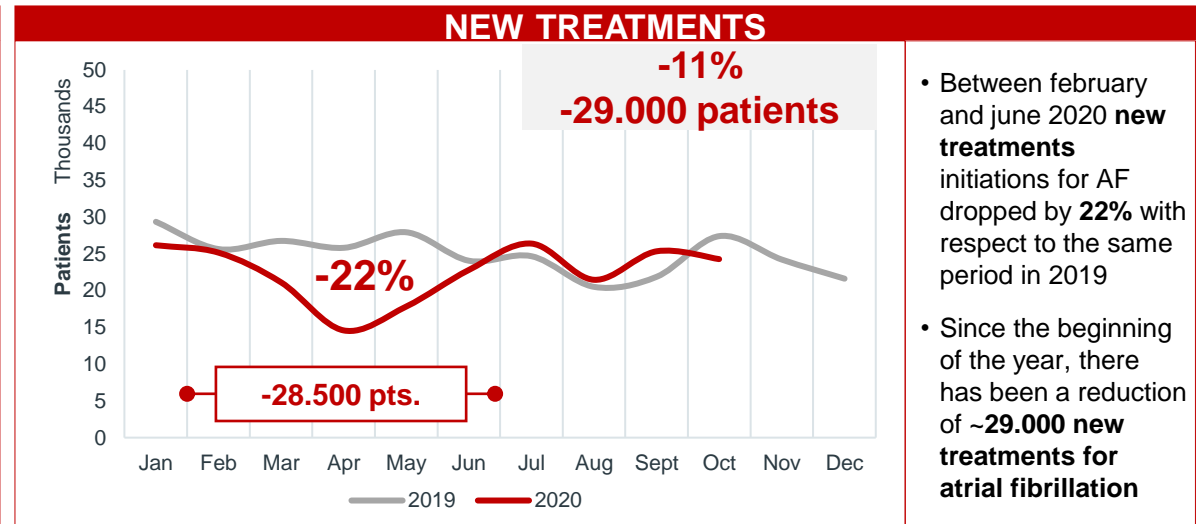
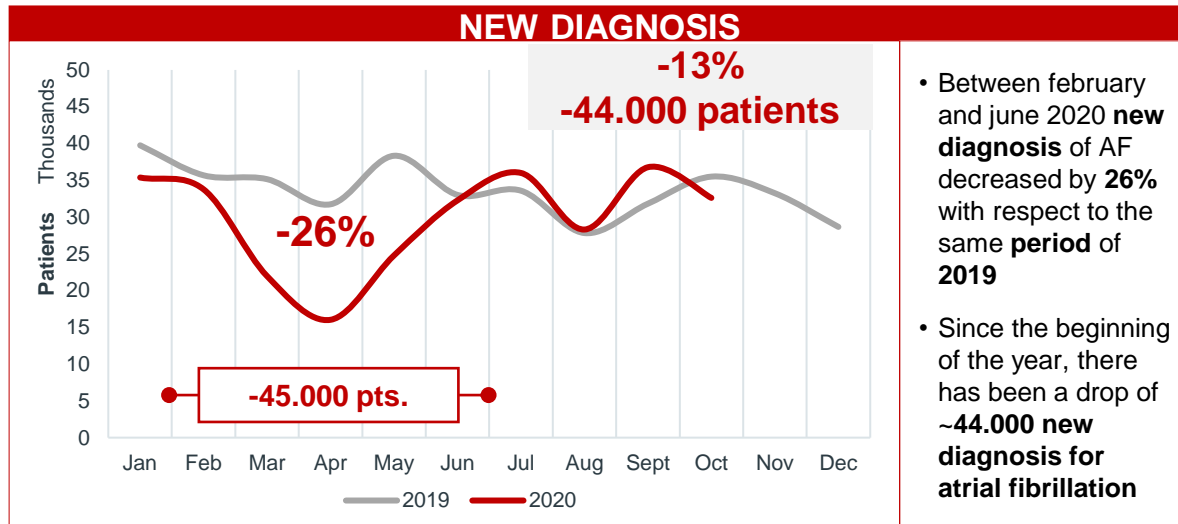
Also, in the asthma area it is observed a significant contraction of new diagnosis (-17%), new treatments (-16%), referrals to specialist (-40%) and spirometry requests (-41%). The drop underlined after the first lockdown became even worse during the year

Asthma: comparison january-october 2020 vs 2019



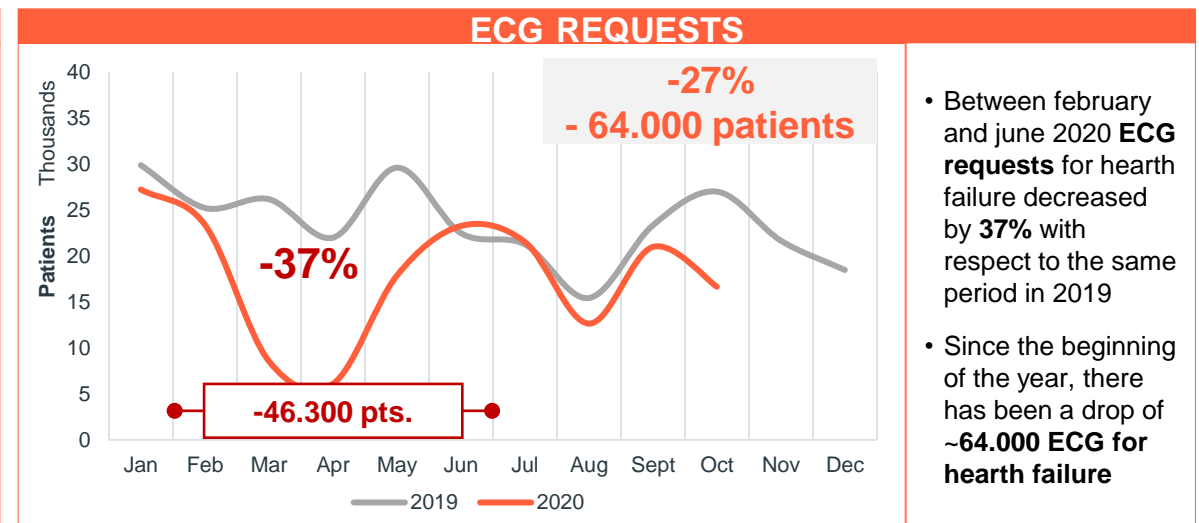
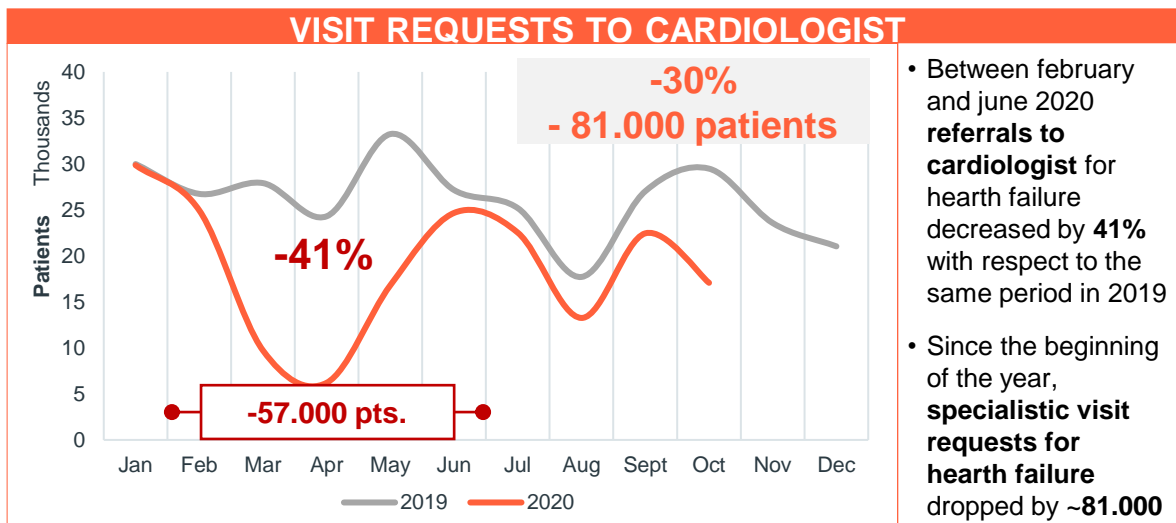
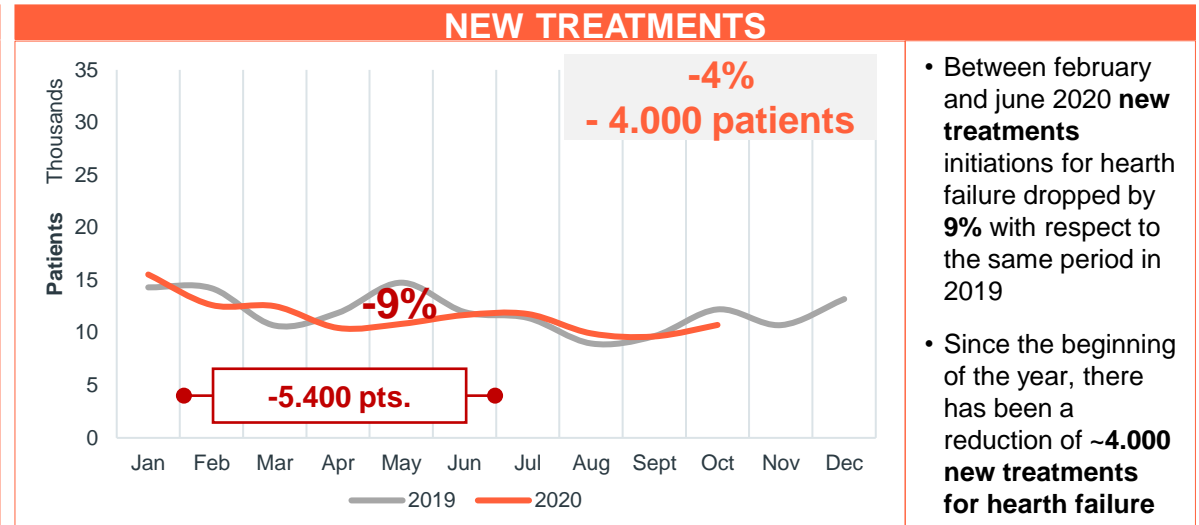
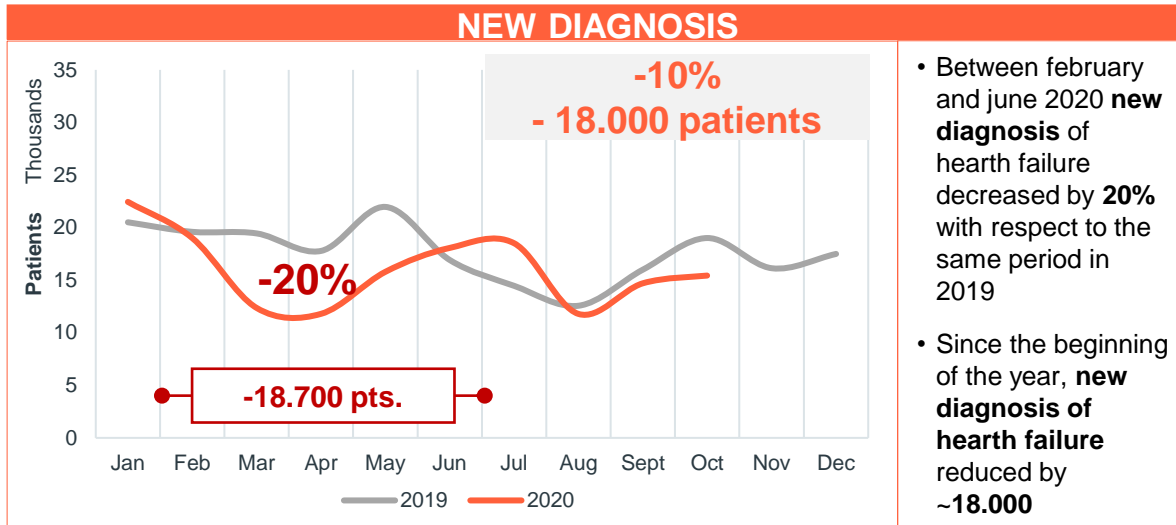
In atrial fibrillation area there has been a significant contraction of new diagnosis (-13%), new treatments (-11%), referrals to specialist (-31%) and ECG requests (-28%) starting from the beginning of the year. The slight recovery after the lockdown did not balance the losses

Atrial fibrillation: comparison january-october 2020 vs 2019



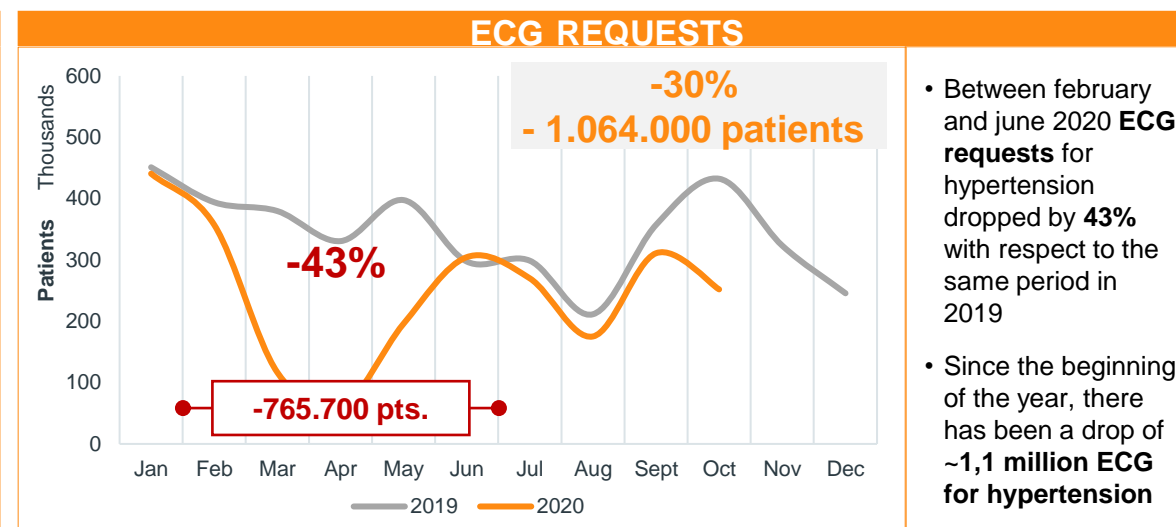
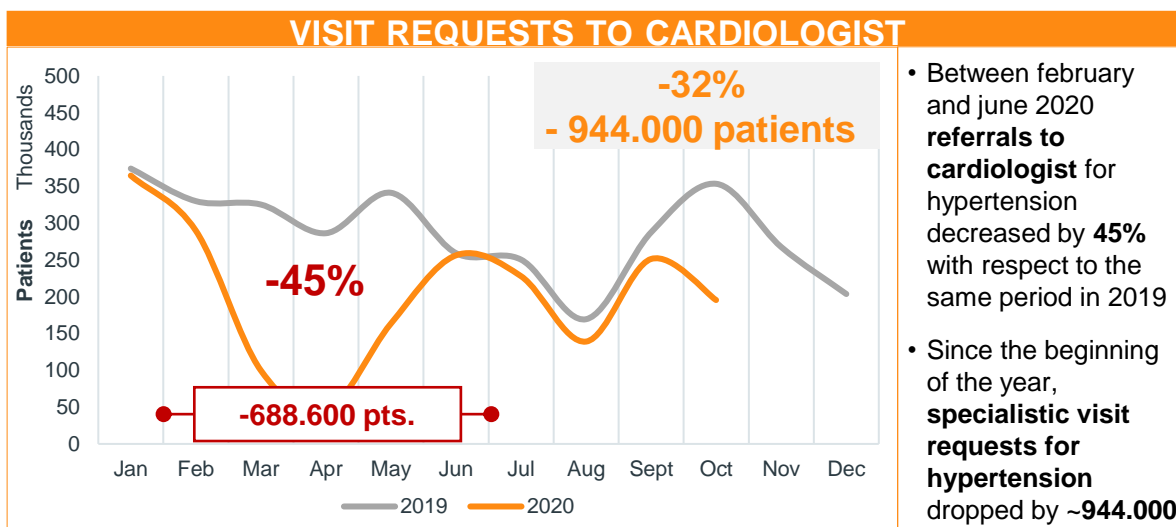
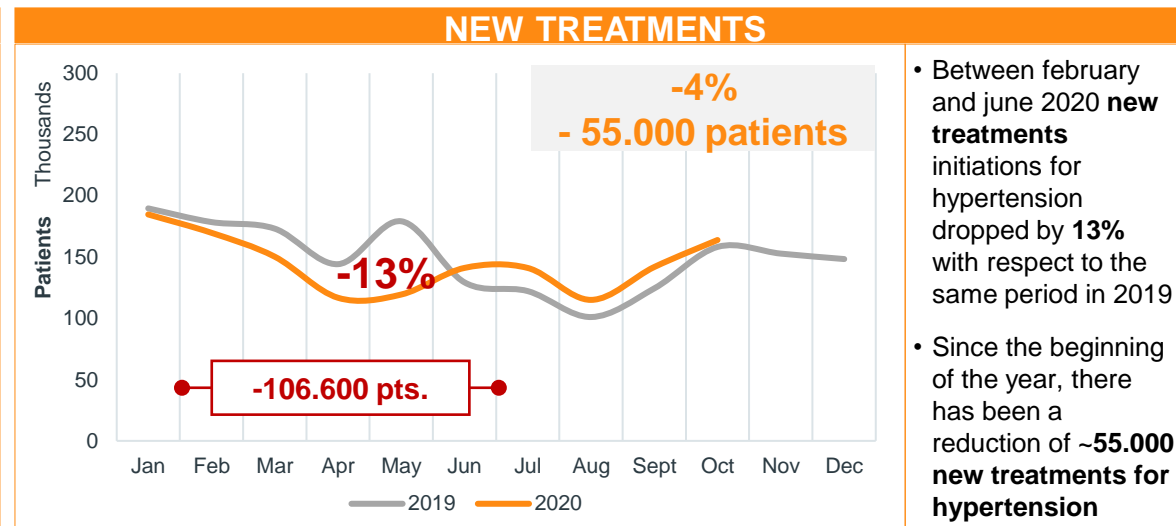
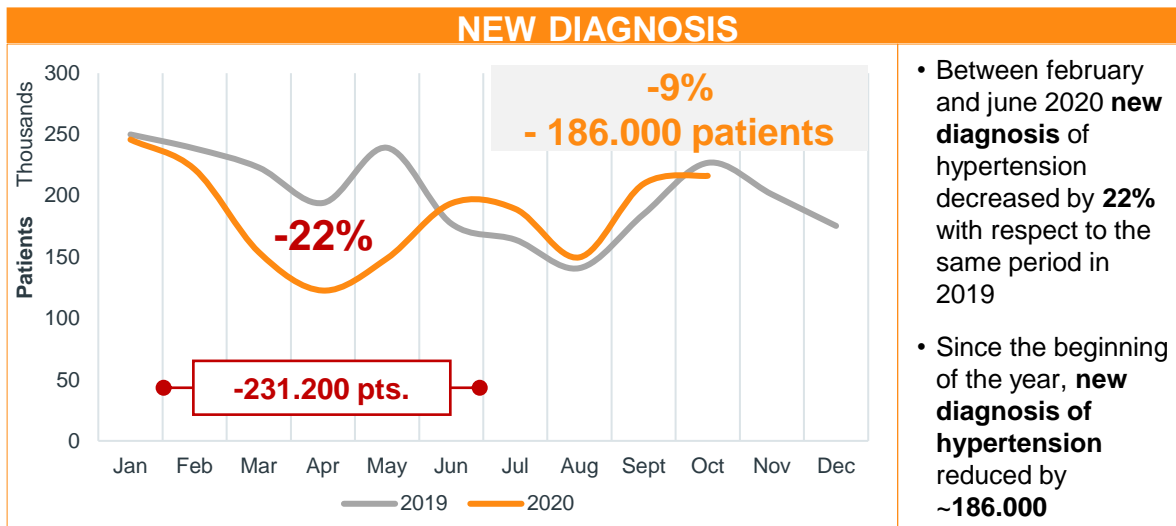
Also, the health failure witnessed a drop during the lockdown, followed by a partial recovery that does not offset the losses: there is a reduction of new diagnosis (-10%), new treatments (-4%), referrals to specialist(-30%) and ECG requests (-27%)

Health failure: comparison january-october 2020 vs 2019



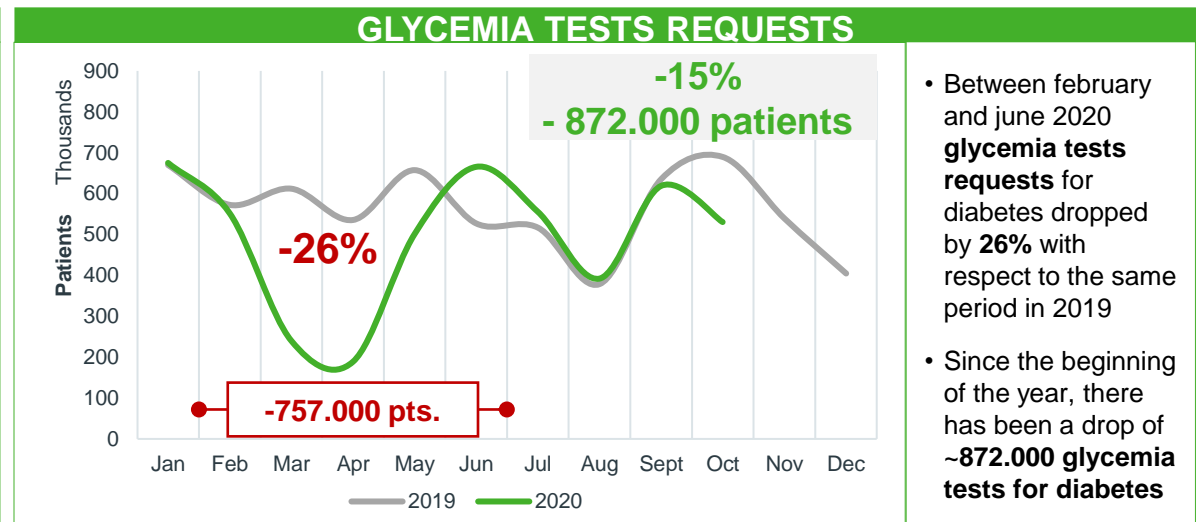
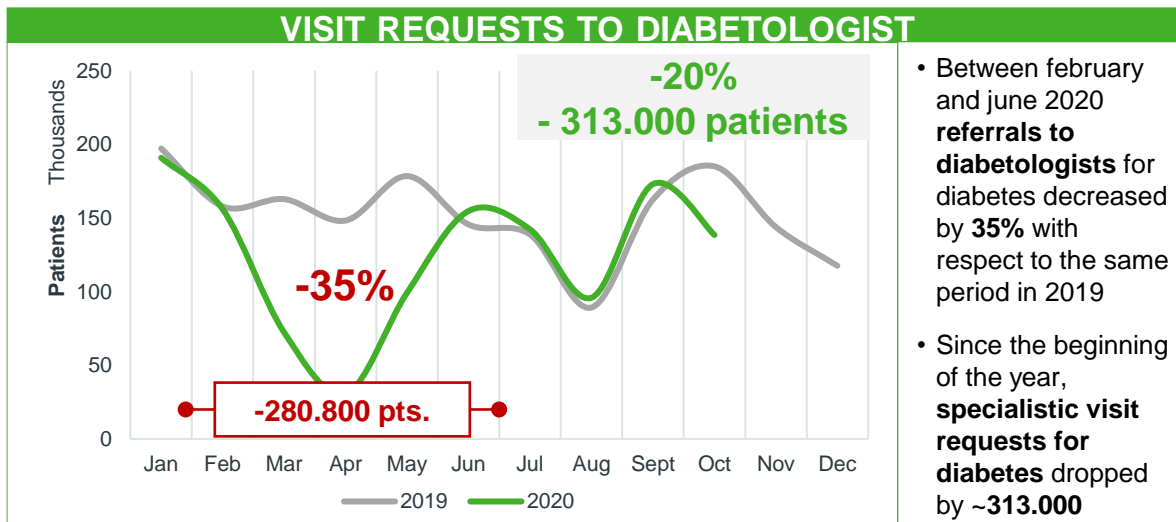
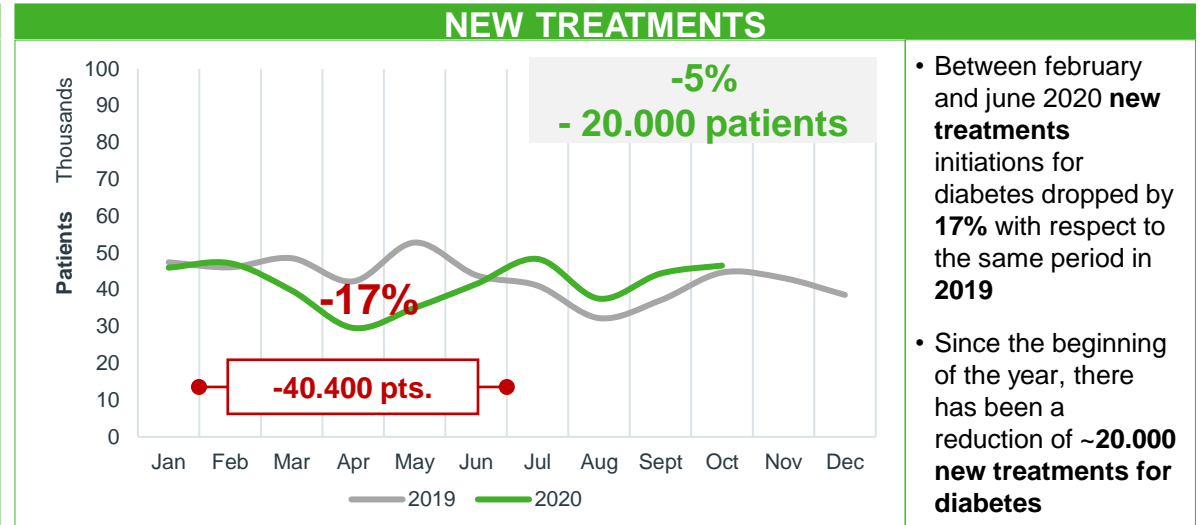
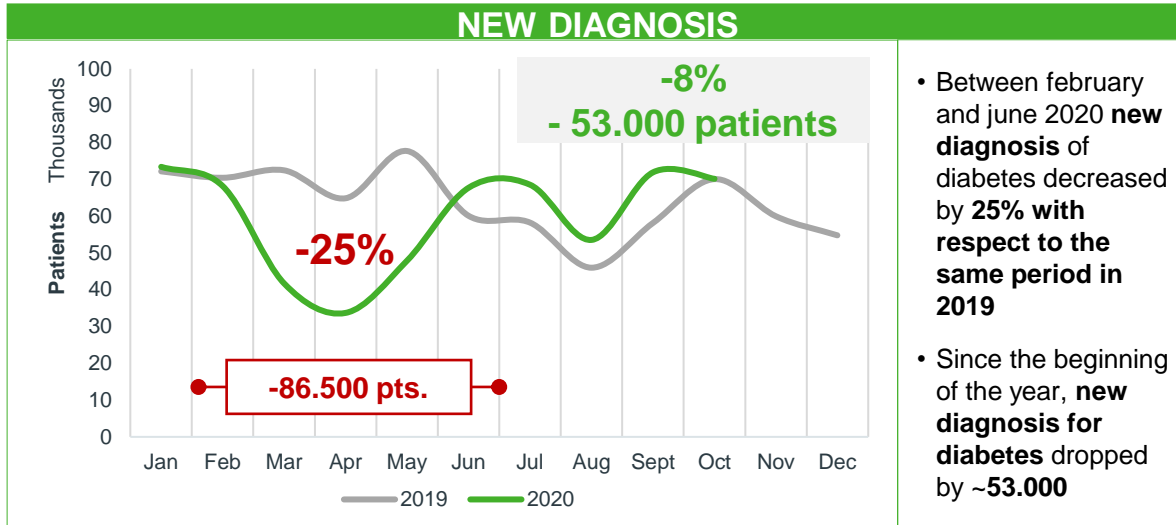
Hypertension had a significant fall during the lockdown, followed by a subsequent partial recovery: in october it is observed a contraction in new diagnosis (-9%), new treatments (-4%), referrals to specialist (-32%) and ECG requests (-30%)

Hypertension: comparison january-october 2020 vs 2019



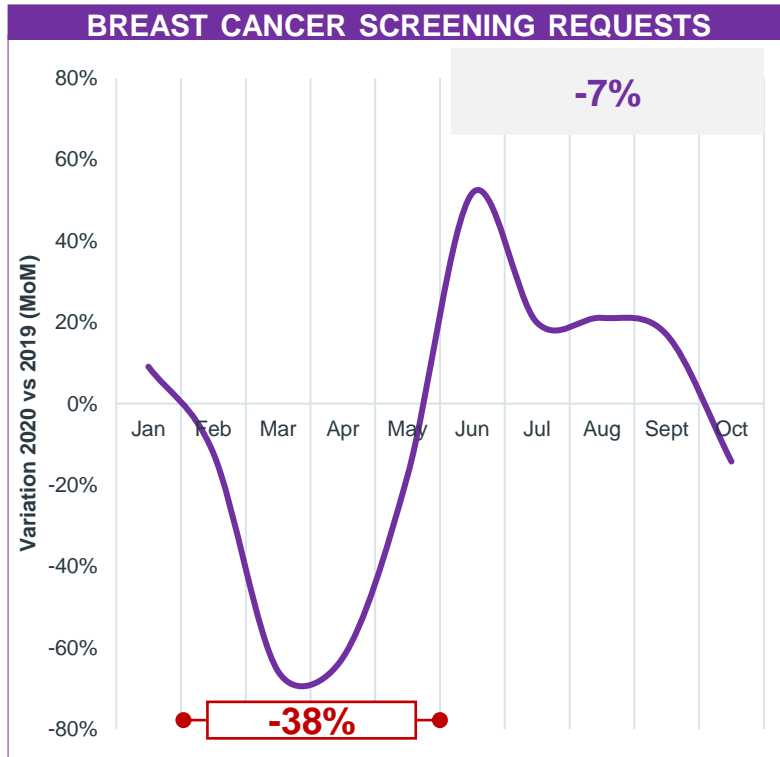
Diabetes had an important drop during the lockdown, which has not been recovered yet : since the beginning of 2020 there is a contraction in new diagnosis (-8%), new treatments (-5%), referrals to specialist (-20%) and glycemia tests (-15%)

Diabetes: comparison january-october 2020 vs 2019

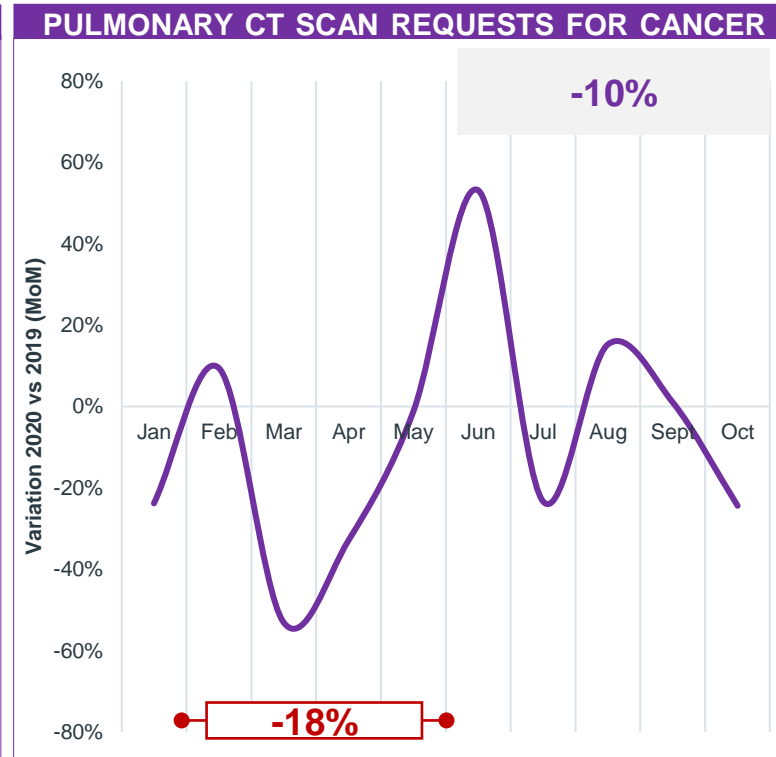


From early 2020 in the oncological area the screening requests for breast, lung and colon decreased by 7-10%, despite the partial recovery in summer months of the screening

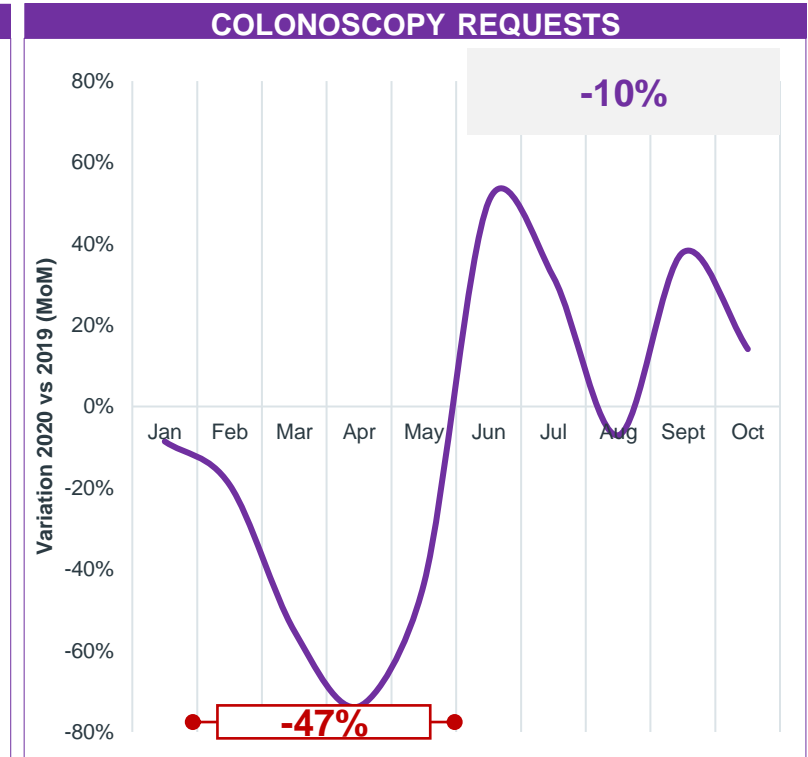
Oncological screening: comparison january-october 2020 vs 2019



- Between **february and may 2020**, the requests of mammography screening to identify breast cancer decreased by **38%** with respect to the same period in 2019
- The greatest reduction is recorded between **march and april 2020**, (-64%)
- **Between june and september** it is observed an increase of **27%** vs 2019, that is quite substantial in **june (+52%)**
- **In october** there is another drop of **14%** vs 2019



- Between **february and may 2020**, the requests of CT scan to identify lung cancer decreased by **18%** with respect to the same period in 2019
- The greatest reduction is recorded between **march and april 2020**, (-43%)
- **Between june and september** it is observed an increase of **9%** vs 2019, that is quite substantial in **june (+53%)**
- **In october** there is another drop of **25%** vs 2019

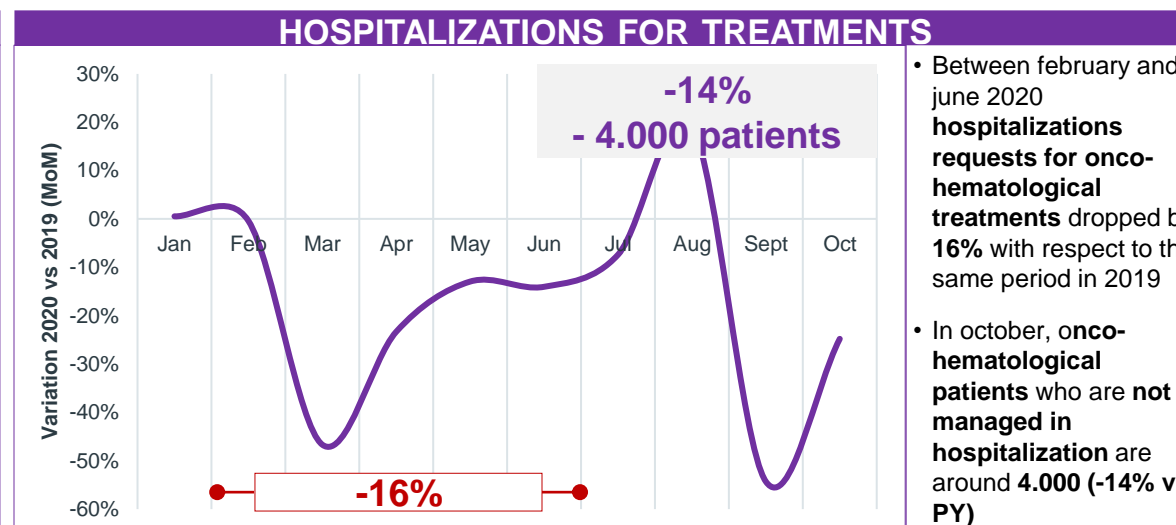
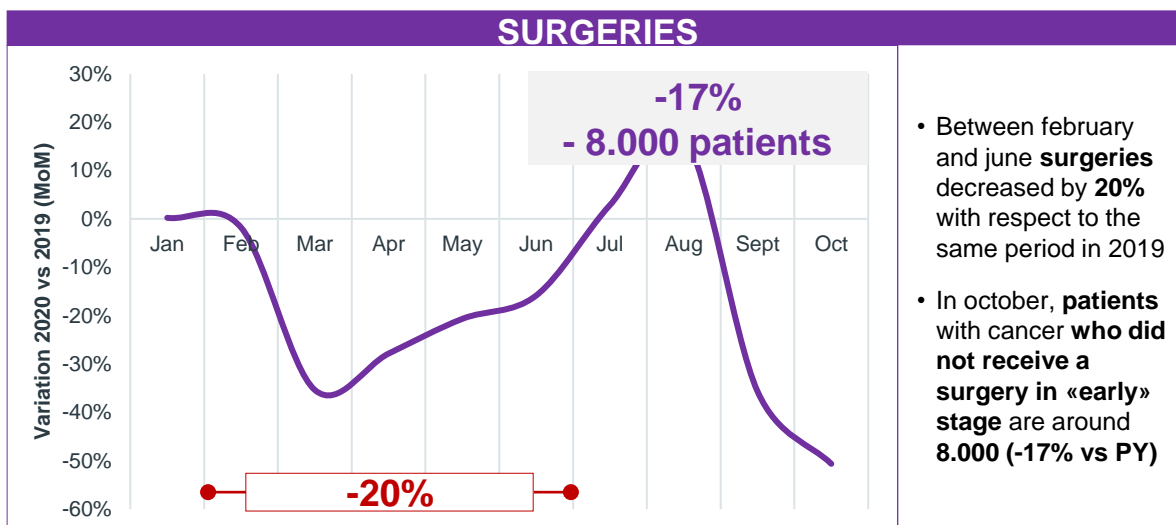
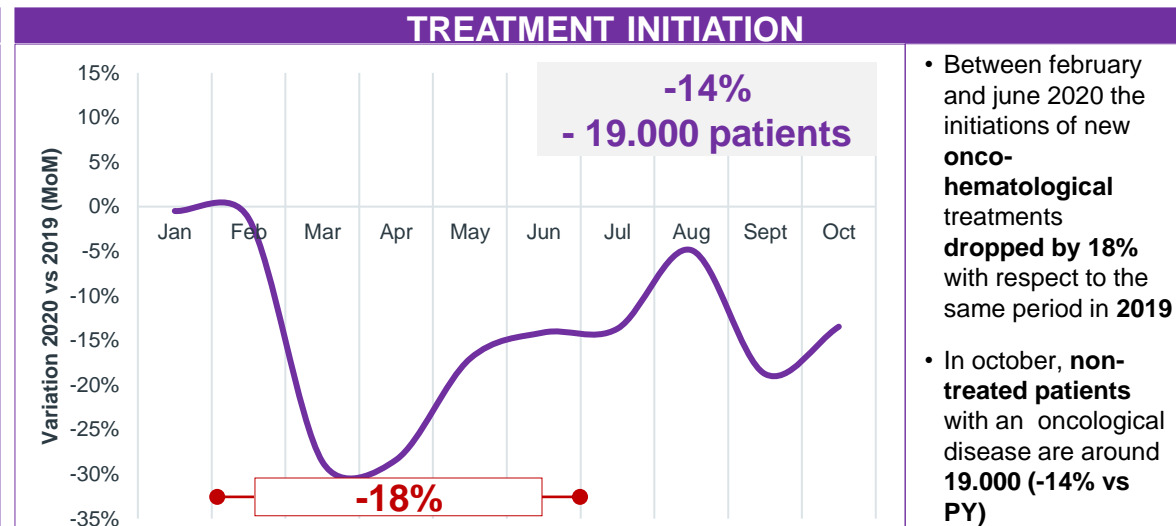
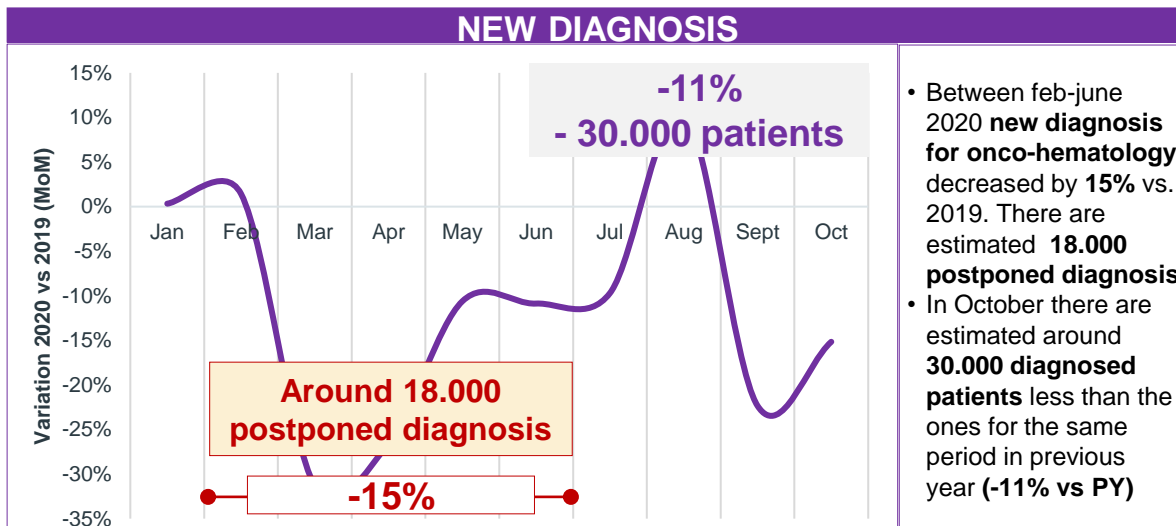


- Between **february and may 2020**, the requests of colonoscopy to identify colon cancer decreased by **47%** with respect to the same period in 2019
- The greatest reduction is recorded between **march and april 2020**, (-65%)
- **Starting from june**, there is an increase of **26%** vs 2019; the increase is more substantial in **june (+51%)**, that was followed by ups and down

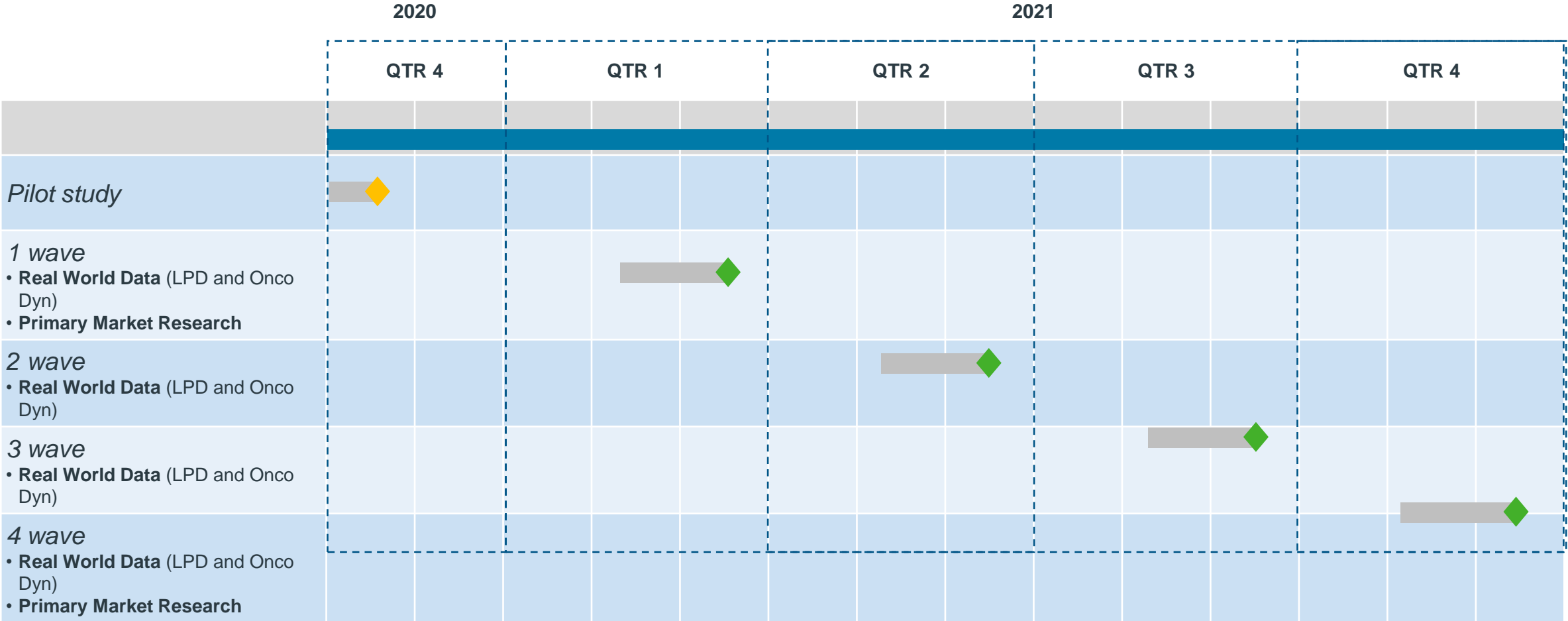


New diagnosis for cancer, treatment initiations, surgeries and hospitalizations dropped by 11-17% with respect to the previous year. The partial recovery in summer months did not offset the losses. They are estimated around 18.000 postponed diagnosis and 30.000 new diagnosis «lost»

Onco-hematology: diagnosis, treatments, hospitalizations, surgeries: comparison january-october 2020 vs 2019



In order to monitor the impact of Covid it is foreseen a quarterly monitoring of real world data for 2021, integrated by a semestral survey and with further analysis and ad-hoc insights



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