

# Observatory on the impact of the COVID-19 pandemic on the access to healthcare

Data period: 2019-2020

March 2021

Study performed by IQVIA with Farmindustria's non conditioning support

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### Premise and objectives of the study

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

The sanitary emergency that hit the country is having a significative impact on the healthcare system. The complexity of the pandemic and the issues related to the management of infected people challenged the healthcare system causing the saturation of both hospitals and intensive care units. Therefore, it created the need for new procedures and paths dedicated to both severe Covid-19 patients treated in hospital and less-severe patients in home care. Moreover, the pandemic produced a decrease in the access to treatments in all the areas, from oncology to respiratory and cardio-metabolic chronic diseases.

Along with the concerns related to the management of infected patients, the extended lockdown periods had important effects also on the access to visits and treatments of non-Covid patients producing significant consequences for patients' health and the organization of the healthcare system (hospital-territory integration, remote patient management).

The analysis of the IQVIA data allows to deepen the knowledge of the following topics:

- What are the main chronic diseases affected by Covid-19?
- What has been the reduction in new diagnoses and new treatments over the months?
- What has been the impact on requests for specialist visits and requests for exams?
- Was there a difference between the impact of the first and second wave of Covid-19?

In this context, IQVIA realized a study aimed at monitoring the impact of the pandemic on access to diagnoses and treatments and its evolution in the months to come. The study was realized by an ad-hoc observatory and with the non conditioning contribution of Farmindustria, and it will be updated every three months. The analysis is based on *Real World Data* evidences gathered from a sample of 900 general practitioners and a panel of 450 onco-hematologists representative of the reference universes.

In this document data refer to the 12 months from January to December 2020 which are compared to the same period of 2019. The study will continue for the entire 2021 with quarterly updates.

When it comes for primary care area, the results of this study highlight the indirect impact of Covid on territorial medicine, which is a fair proxy of the impact on outpatient activity volumes.

### **Main findings**

The contraction of the entire pharmaceutical sector recorded in 2020 (-3,6% MAT 12/2020) unveils the limitations to access to treatments both in the hospitals and in the pharmacies

In 2020, access to diagnoses and treatments in the main therapeutic areas witnessed a significant contraction compared to 2019

#### DATA SOURCES

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

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

**IQVIA National Integrated Database** December 2020

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- In 2020, the main respiratory and cardio-metabolic pathologies witnessed a significant contraction of the new diagnoses (-613.000 equal to a reduction of 13%), treatment initiations (-350.000, -10%), specialist visits (-2,2M, -31%) and requests for exams (-2,9M, -23%).
- In the respiratory area (COPD/asthma) there was a significant drop in new diagnoses (COPD: -84.000; Asthma: -195.000), new treatments (-65.000, -159.000), referral to specialists (-154.000, -158.000) and spirometry requests (-136.000, -157.000). The two waves of Covid-19 had a similar impact and 2020 data remains far from 2019, even there was a minor impact during the summer months. In the cardiovascular area (atrial fibrillation/heart failure/hypertension) data show a huge contraction in new diagnoses (AF -47.000, HF -19.000, hypertension -211.000), new treatments (-29.000, -3.000, -69.000), referrals to cardiologist (-301.000, -99.000, -1,1M) and requests for ECG (-214.000, -78.000, -1,3M). The two Covid-19 waves had the greatest impact on referrals to the cardiologist and requests for ECGs, generating a strong annual reduction, while there has been a partial recovery in the second half of the year of new diagnoses and new treatments.
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**Diabetes area** also recorded a drop in the number of new diagnoses (-58.000), new treatments (-24.000), referrals to diabetologists (-400.000) and request for exams (-1,1M). The two Covid-19 waves impacted mostly referrals to the diabetologist and blood glucose tests, while there was a partial recovery in the second half of the year on new diagnoses and new treatments.

• Oncology area also experienced a contraction in the access to diagnoses and treatments. The partial recovery achieved during the summer did not compensate the drop caused by the two Covid-19 waves: overall in 2020 there were 30.000 cancer diagnoses less than the ones made in 2019. In 2020 we observed a relevant reduction of screening requests for breast cancer (-9%), lung cancer (-9%) and colon cancer (-14%). In addition, new diagnoses for cancer dropped (-11%), as well as treatment initiations (-13%), surgeries (-18%) and hospitalizations (-16%). After the initial halt to screening and follow up visits due to the closure of many departments and ambulatories at the beginning of the year, there was partial recovery during the summer, which id not offset the contraction of diagnoses and treatments. The new contraction caused by the second pandemic wave contributed to increase the annual contraction with respect to 2019.



# The contraction witnessed by the pharmaceutical sector (-3,6%) shows the limitation of access to treatments both in hospitals and pharmacies

Evolution of the pharmaceutical sector



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 December 2020 © IQVIA 2021. All rights reserved.

# In 2020, Covid-19 had a relevant impact on the number of new diagnoses and treatments, in addition to the requests of specialist visits and exams

Real World Data from GPs – FOCUS: COPD, ASTHMA, ATRIAL FIBRILLATION, HEART FAILURE, HYPERTENSION, DIABETES

-613.000	-350.000	-2.230.000	-2.860.000
[-13%]	[-10%]	[-31%]	[-23%]
NEW DIAGNOSES	NEW TREATMENTS	REFERRALS TO SPECIALISTS	REQUEST FOR TESTS/EXAMS

### ${\it \Delta}$ January-December 2020 vs 2019 annual variation



PRIMARY CARE AREA

# In 2020, chronic respiratory and cardio-metabolic pathologies witnessed an important contraction of exams requests, referrals to specialists, new diagnoses and treatments; respiratory area is the most affected, while diabetes was less impacted





### COPD

In the COPD area there were no significant variations in the impact of the two Covid-19 waves, which caused a significant drop of new diagnoses (-25%), new treatments (-23%), referral to specialists (-38%) and spirometry requests (-46%) with respect to 2019

COPD: comparison January-December 2020 vs 2019



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### Covid-19 had a similar effect in both waves even in Asthma area, which witnessed a significant annual contraction in new diagnoses (-19%), new treatments (-18%), referrals to specialists (-42%) and spirometry requests (-45%) with respect to 2019

Asthma: comparison January-December 2020 vs 2019



#### \$ ATRIAL FIBRILLATION

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In AF area the two Covid-19 waves had a similar impact on referrals to cardiologists and ECG requests, increasing the annual contraction (-33% and -29%); new diagnoses and treatments were better managed during the second wave thus mitigating the annual gap (-13%, -11%)

Atrial fibrillation: comparison January-December 2020 vs 2019



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### 🕅 HEART FAILURE

# Even in heart failure area Covid-19 had a similar effect in both waves, causing an annual contraction that was more contained for new diagnoses (-10%) and new treatments (-2%) and more significant for referrals to cardiologists (-32%) and ECG requests (-28%)

Heart failure: comparison January-December 2020 vs 2019



### W HYPERTENSION

### In the hypertension area the two waves had a similar effect on referrals to cardiologist and ECG requests, increasing the annual contraction (-33% and -31%); new diagnoses and treatments were better managed mitigating the annual gap (-10% and -4%)

Hypertension: comparison January-December 2020 vs 2019



### **G** DIABETES

### In the diabetes area the reduction of diabetologists visits and exams requests has been similar and caused a greater annual drop (-22% and -15%) of new diagnoses and treatments, which recovery after the first wave mitigated the annual impact (-9% and -5%)

Diabetes: comparison January-December 2020 vs 2019



### ONCOLOGICAL SCREENING

### In the oncological area the impact of the second wave has been lower for mammography and colonoscopy mitigating the annual reduction (-9% and -14%), but greater for CT scan despite the increase in December (+70%) that contributed to reduce the annual variation (-9%)

Oncological screening: comparison January-December 2020 vs 2019



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### **CONCO-HEMATOLOGY**

### The impact of the second wave has been lower than the first one for new diagnoses and treatments mitigating the annual reduction (-11% and -13%), but greater for surgeries and hospitalizations causing higher annual drop (-18% and -16%)

Onco-hematology - diagnosis, treatments, hospitalizations, surgeries: comparison January-December 2020 vs 2019



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## The present report contains updated data with December 2020; the next wave will be released in June 2021 and it will include updated data with March 2021



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