Patients VALUE SUSTAINABILITY

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What is VALUE?

VALUE of medicines
• Works for my condition
• Is available for me
• Accessible despite my income level
• Can be managed in my daily life
• Enables the goals I want to achieve
• I know how to use
• Is safe
• I can (will) adhere to/improves my adherence
• Can be taken in a way that suits me

MY MEDICINE WORKS FOR MY PARTICULAR CONDITION AND ITS BENEFIT and SAFETY BALANCE FITS MY GOALS that I have discussed and agreed with my doc.
STARTING POINT: **VALUE** OF A MEDICINE IS INDIVIDUAL VALUABILITY FOR THE SYSTEM + SOCIETY + PATIENTS SHOULD BE AGREED AMONG STAKEHOLDERS AND BE TRANSPARENT

**CONs**
- The days of continued economic growth and increased public spending are gone - SUSTAINABILITY
- Cost containment in health services: pricing and reimbursement of medicines
- Prevention focus: behave well and you will be well

**PROs**
- Effective healthcare system saves money, is patient-centred & integrates prevention
  - Access to care equals less cost in the future
- Patients as active in prevention and care
- New technologies in health as part of sustainable healthcare
SUSTAINABILITY
ACCESS TO APPROPRIATE CARE +
PREVENTION + PARTICIPATION =
SUSTAINABLE HEALTHCARE SYSTEM

Sustainable healthcare does not
exacerbate health inequalities,
but reduces them

PATIENTS GOALS

• To be cured
• To be saved
• To be able to do x, y, z
• To be able to continue to do x, y, z
• To be able to grow up
• To be able to grow old
• To be able live as close to norm life as possible
PATIENT RIGHTS & RESPONSIBILITIES: ASTHMA & ADHERENCE

HEY YA!
Health Literacy, Young Patients with Asthma and Adherence to Treatment: EFA Report and European Recommendations

• Plenty of studies on adherence BUT asking parents/doctors/carers NEVER adolescents
• 200 young people with asthma, 12-17 years old, 4 countries
• Direct interview without parents
• Evidence based
• Scientific lead, Prof Helmut Brandt, Maastricht University
• First published in an event at the EP 28 April, scientific publications follow, European Health Forum Gastein

RECOMMENDATIONS to support adherence and health literacy of young people

HEureka! Adherence Score per Country

Adherence Score calculated with questions A21a) - A21d

<table>
<thead>
<tr>
<th>Country</th>
<th>Adherence Score</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Germany</td>
<td>Mean Score 17.9</td>
<td>17</td>
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<tr>
<td>France</td>
<td>Mean Score 16.5</td>
<td>15</td>
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<tr>
<td>Spain</td>
<td>Mean Score 15.8</td>
<td>11</td>
</tr>
<tr>
<td>UK</td>
<td>Mean Score 15.3</td>
<td>17</td>
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</table>
Six key impactful factors:
- Forgetfulness
- Rebellion
- Good days
- Support
- Carelessness
- Ignorance
I think I know what happens if I don’t take my asthma medicine.

I know how to take my medication.

I stop taking my asthma medicine when I feel better.

My friends understand my asthma problems.

I don’t mind telling others about my asthma.
Health Literacy showed a weak, but significant correlation with attitude (which is the strongest driver of adherence).

Correlation between Health Literacy and other Touch Points:
- not significant
- Weak (r<0.3) but significant

Total impact on Adherence (ring): 100% R²=0.46

**European Health Policy Recommendations to drive Adherence**

- Promoting **multidisciplinary care coordination** to better support adolescents and to identify those at risk
- Developing **health information technologies** specifically addressed to young patients and with them to stimulate self-management, medication tracking and immediate healthcare feedback
- **Empowering young patients** through shared decision-making and tailored health literacy materials to enable adolescents to take responsibility about their own health and asthma medication
- **Conducting additional research** to picture the long-term consequences associated with poor adherence in adolescence and to curve down asthma
- Recommendations and actions should be integrated into
  - EU initiatives and policies on chronic diseases
  - EU Member States health coordination and sustainability plans
VALUE PROPOSITION OF “VALUE ADDED MEDICINES”

• Potential for more (& better) options for “old medicines” → improving adherence

• Potential to fill in some of the holes in the current market

• Potential for improved access within a Europe of inequalities → limiting shortages

• New approach to personalising medicine, customisation of healthcare

• Aim to include stakeholders’ perspective: patients, politicians, providers, insurers, healthcare professionals

THANK YOU!

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