

IMPACT ON PATIENTS: EMHA Access to Care survey findings in Norway and Finland

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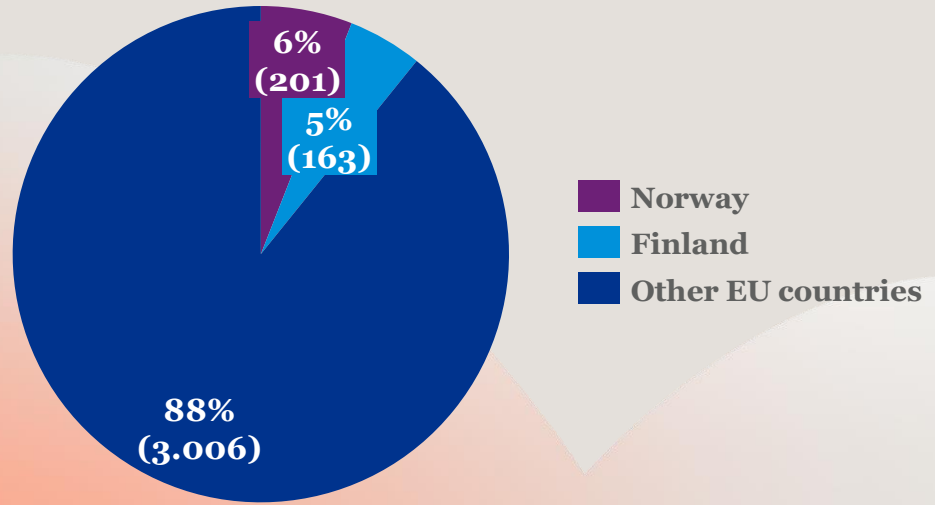
EMHA's 2021 work is supported by Novartis, AbbVie, Eli Lilly,
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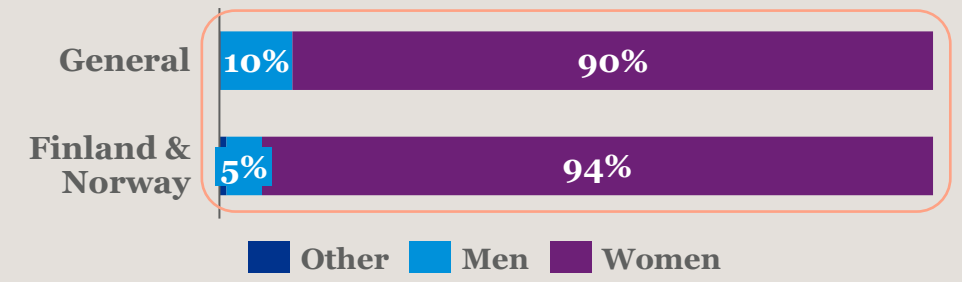
Data used for the analysis in Finland and Norway (11% of total responses) evidences that vast majority of respondents are women between 25 and 59 years old..

Sociodemographic data

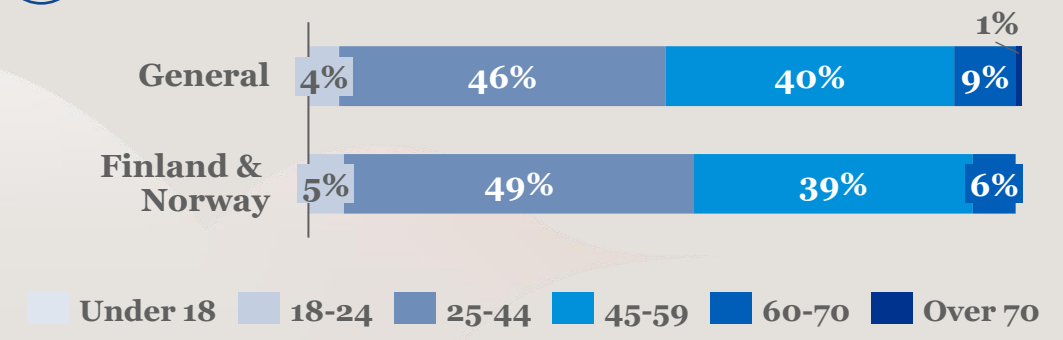
- At June 14th 2021, **3397 answered surveys** have been obtained by migraine patients from **41 different countries** (question 1.1).
- **11% of the responses correspond to Northern countries: 6% Norway and 5% Finland.**



♀ Split by gender (question 1.2).



🧠 Range of ages (question 1.3).

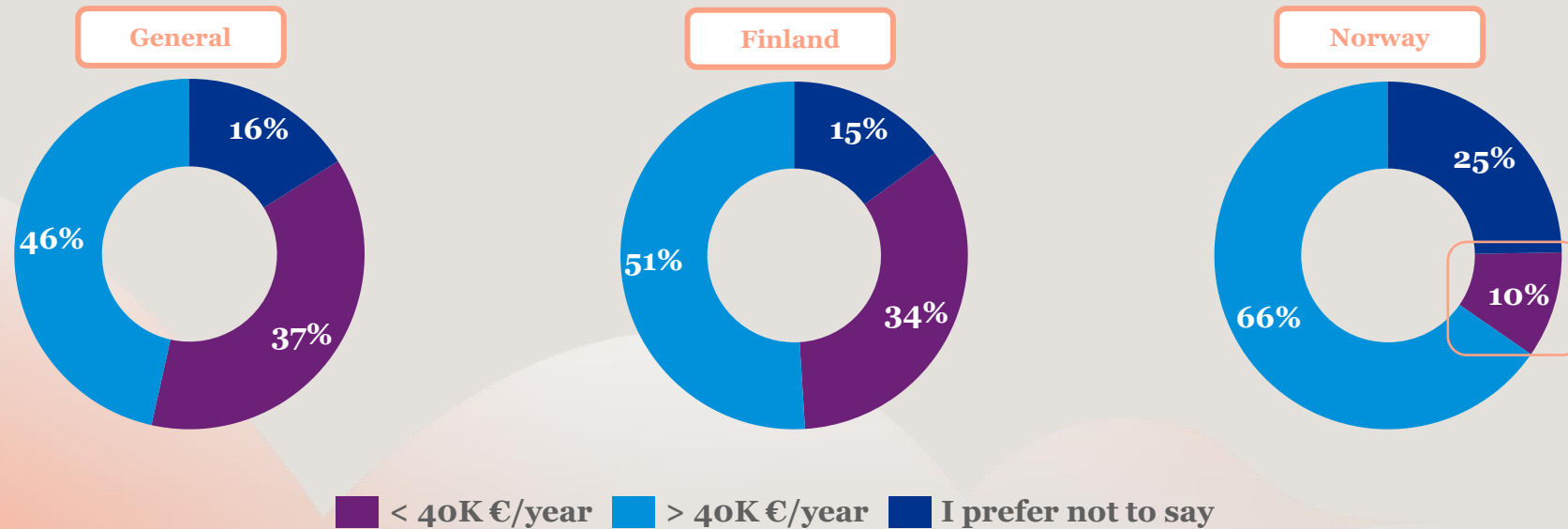


*Sample size for question 1.1: 3370 respondents; sample size for question 1.2: 3354 respondents (364 in Finland and Norway); sample size for question 1.3: 3354 respondents (364 in Finland and Norway).

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

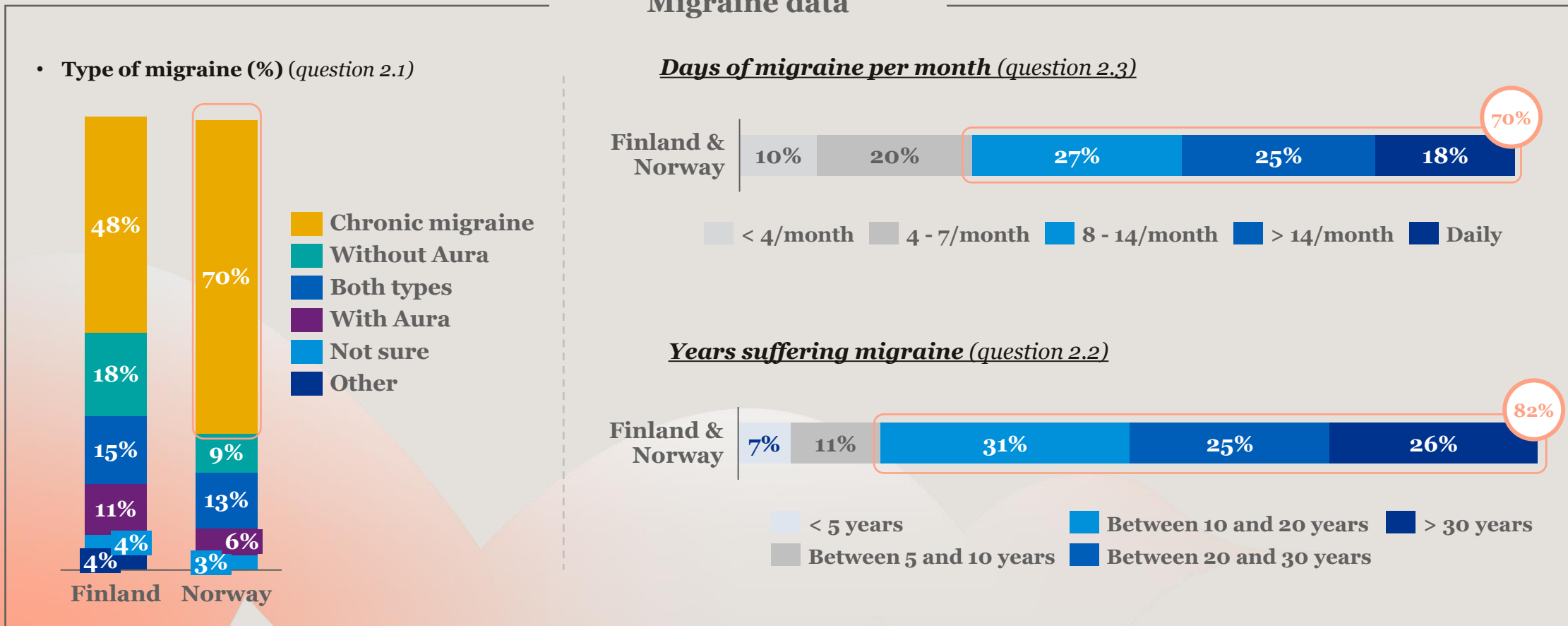
Sociodemographic data

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



*Sample size for question 1.5: 3338 respondents (163 in Finland and 201 in Norway).

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

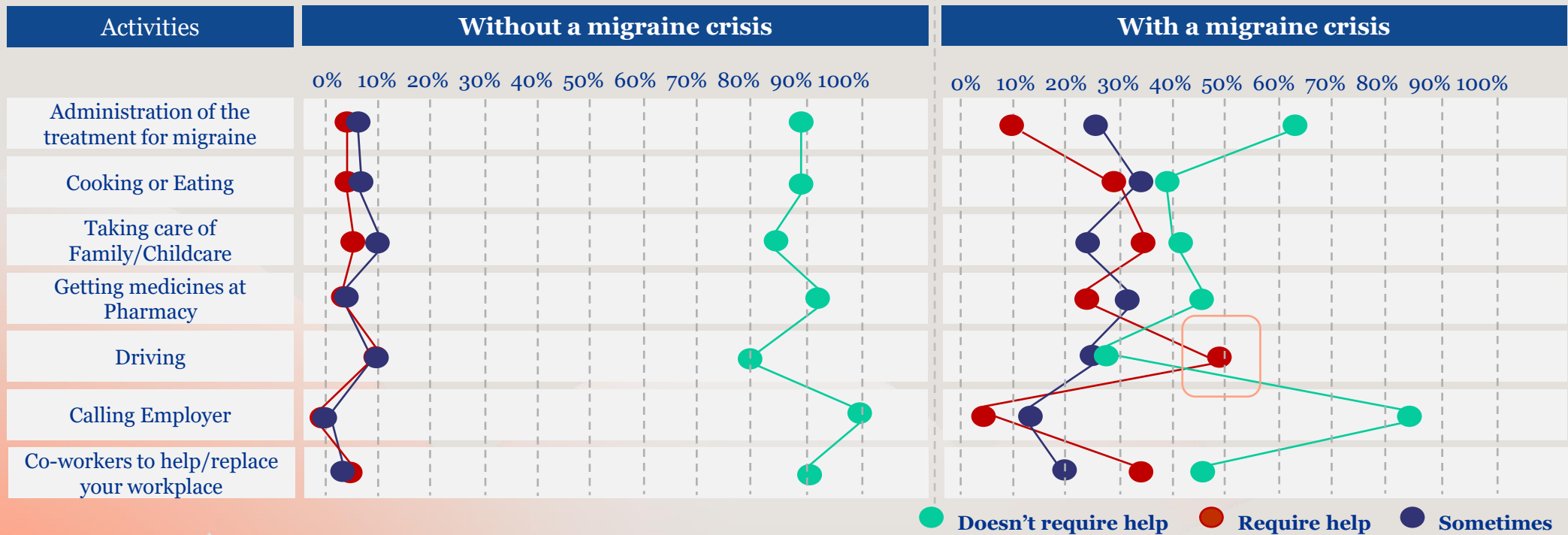


*Sample size for question 2.1: 2831 respondents (304 in Finland and Norway); sample size for question 2.3: 2831 respondents (304 in Finland and Norway); sample size for question 2.2: 2832 respondents (304 in Finland and Norway).

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

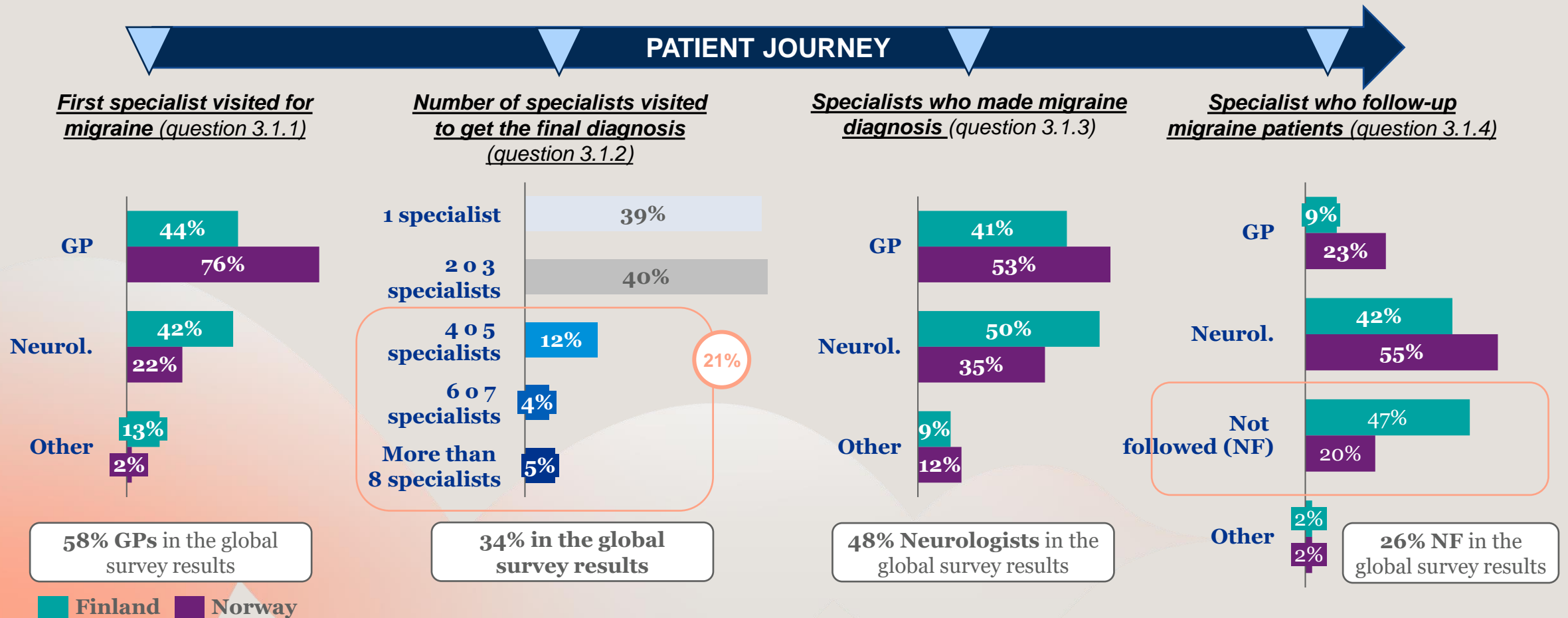
Migraine data

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



*Sample size for question 2.4: 304 respondents in Finland and Norway; sample size for question 2.5: 304 respondents in Finland and Norway.

There are differences in the patient journey between Finland and Norway, mainly in the 1st specialist visited and in the number of patients not followed for migraine



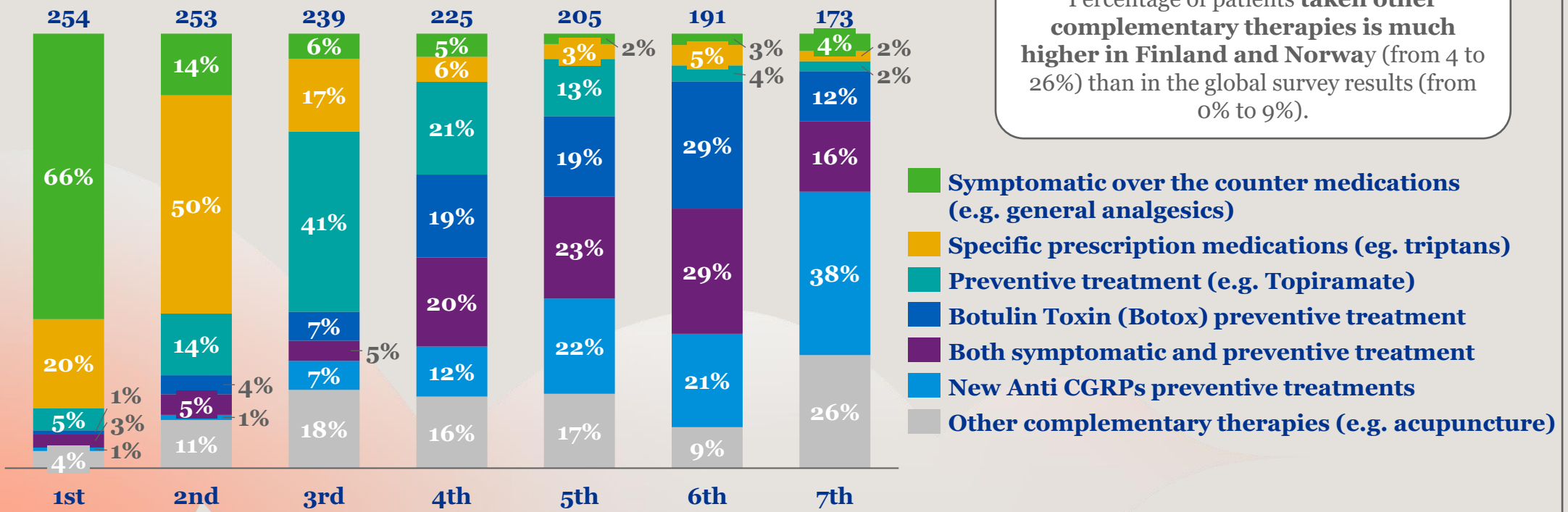
*Sample size for question 3.1.1: 263 respondents; sample size for question 3.1.2: 260 respondents; sample size for question 3.1.3: 262 respondents; sample size for question 3.1.4: 260 respondents.

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

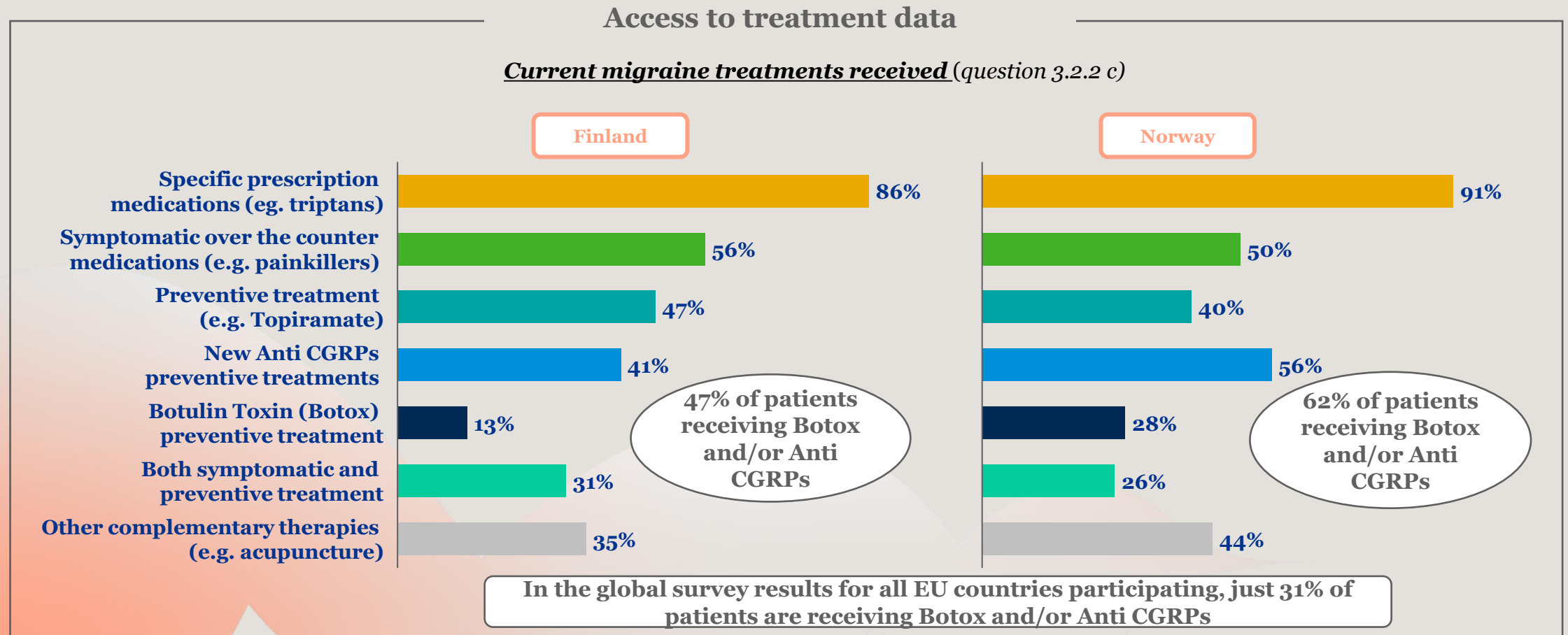
Treatments taken since diagnosis in Finland and Norway (question 3.2.2 b).

Percentage of patients taken other complementary therapies is much higher in Finland and Norway (from 4 to 26%) than in the global survey results (from 0% to 9%).



*Sample size for question 3.2.2 b: 260 respondents in Finland and Norway.

When assessing current treatment, we observe that triptans are widely used, but also Anti-CGRPs comparing with the global EU results obtained

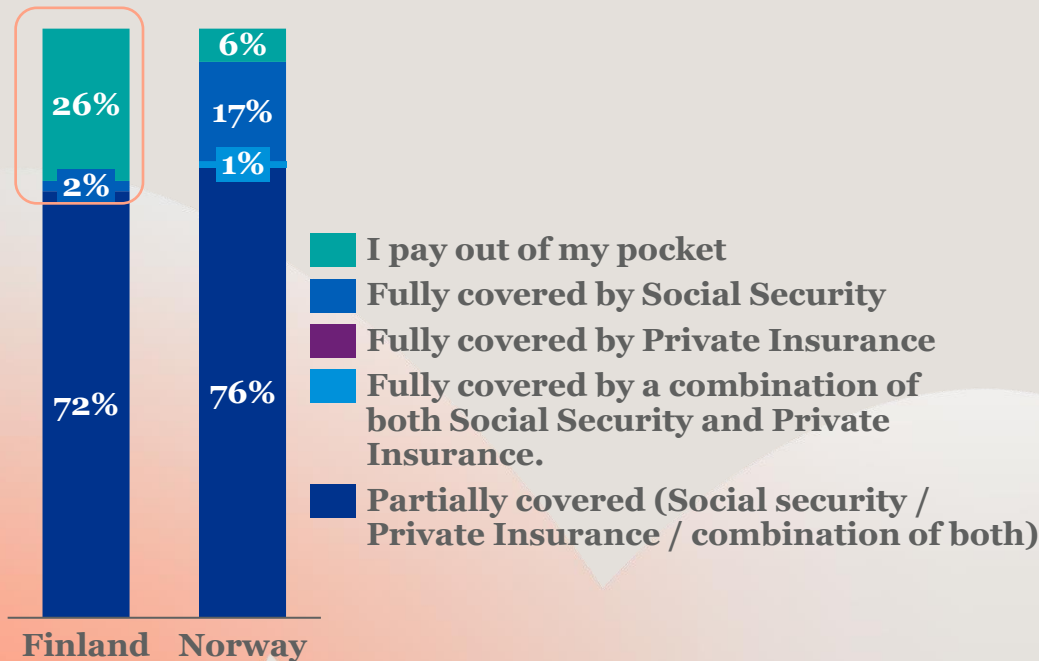


*Sample size for question 3.2.2 c: 110 respondents in Finland and 149 respondents in Norway.

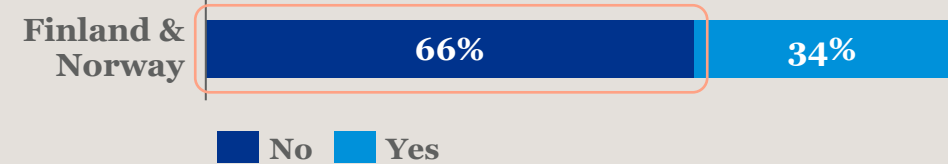
Although two-thirds patients reported to have impact on their finances due to treatment costs, just one-third asked for a treatment change

Access to treatment data

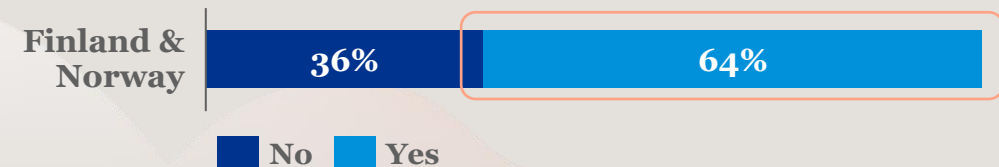
Who pays for your Anti-CGRP treatment
(question 3.2.3 a).



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)

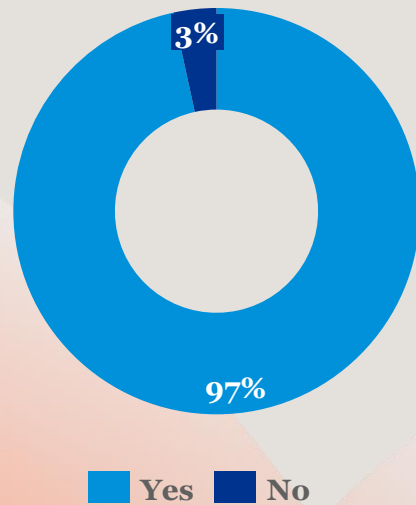


*Sample size for question 3.2.3 a in Finland: 58 respondents and Norway: 89 respondents; Sample size for question 3.2.2 a in Finland: 107 respondents and Norway: 149 respondents; Sample size for question 3.3.3 in Finland: 108 respondents and Norway: 149 respondents.

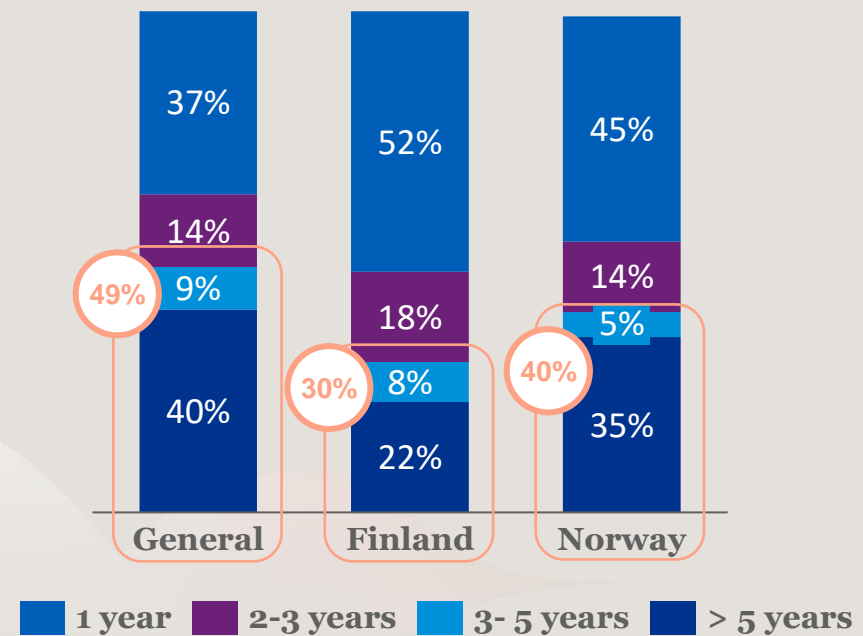
Although almost 100% of patients are treated, time since diagnosis to treatment evidence difficulties to access to migraine treatments especially in Norway

Access to treatment data

Migraine patients treated in Finland and Norway
(question 3.2.1).



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



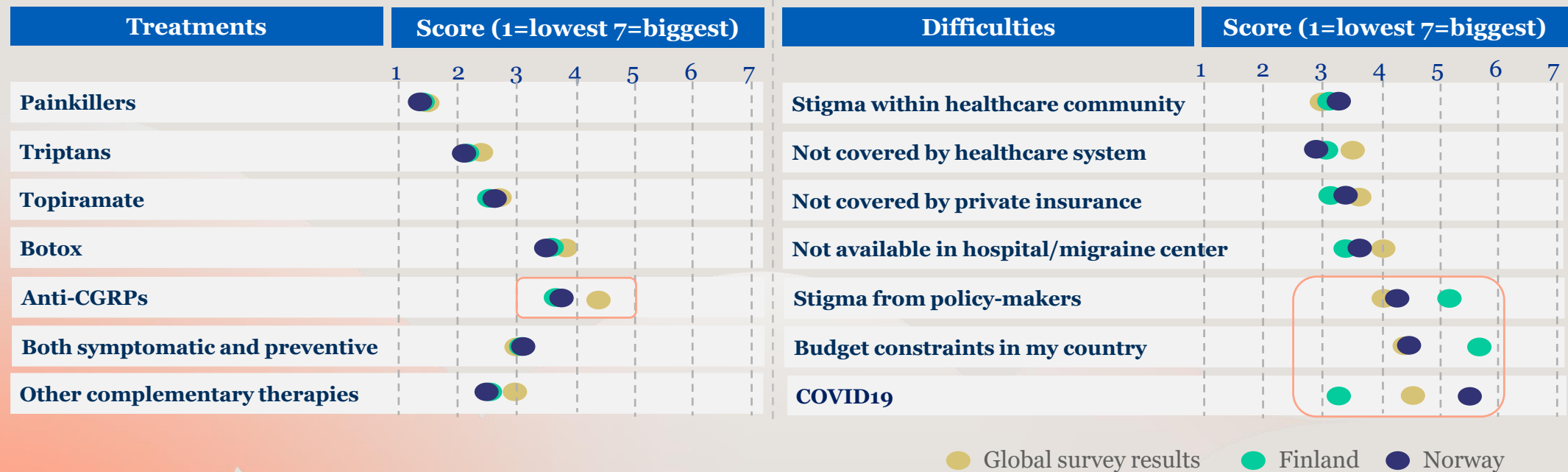
*Sample size for question 3.2.1 in Finland and Norway: 263 respondents; sample size for question 3.2.2 a: 1,951 patients (106 in Finland and 148 in Norway).

Anti-CGRPs & Botox are reported as the most difficult treatment to obtain, and main difficulties, specially in Finland, are budget constrains & policy makers' stigma

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)



*Sample size for question 3.2.5: 235 respondents in Finland and Norway; sample size for question 3.2.4: 209 respondents in Finland and Norway.

Summary of the “Access to Care III” survey results for Finland and Norway (I)

Main conclusions

- 1 Majority of respondents are **women between 25 and 59 years** old, actively working and with **higher family incomes especially in Norway** in comparison to the total survey results (10% reported family annual incomes below 40K€ vs. 44% in the general analysis).
- 2 Almost 50% of respondents reported suffer **chronic migraine in Finland and 70% in Norway**. Main indicators related to the type of migraine evidence that respondents are, in average, **patients suffering from severe migraine** (70% with more than 8 days of migraine/month) **for many years** (82% 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 Norway (76%) and G.P and Neurologist in Finland (44% and 42% respectively)**. The main specialist who made **the diagnosis and the current follow up are both Neurologist and G.P.** (50% and 41% in Finland and 35% and 53% in Norway). It is worth noting that **almost 50% of respondents are not being followed by any HCP in Finland**.
- 5 Although almost 100% of patients are treated, **time since diagnosis to treatment evidences difficulties to access to migraine treatments** even though results are better than for the rest of EU countries (30% needed more than 3 years since diagnosis in Finland, 40% in Norway 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 (86% in Finland and 91% in Norway), and the least used Botox (13% in Finland and 28% in Norway).
- 7 It is worth noting that in both Northern countries **Finland and Norway there are better access to Botox and Anti CGRPs than in the rest of EU countries** (47% of patients receive Botox and/or Anti CGRPs in Finland and 62% in Norway, vs. 31% in the general results). Nonetheless, **polymedication is highly frequent** and multiple drug combinations have been reported, being specific prescription mediations (e.g. triptans) together with Anti CGRPs and/or painkillers, topiramate the main received.

Summary of the “Access to Care III” survey results for Finland and Norway (II)

Main conclusions

Main differences from the global survey results

- Sociodemographic:
 - More percentage of women in Northern countries (94% vs. 90%)
 - More employed patients (79% vs. 74)
 - More annual family income (>40K/year: 66% Norway, 51% Finland and 46% global)
- Migraine:
 - More severe patients in Northern countries (>8migraine attacks/month: 70% vs. 57%)
- Access to care:
 - Less specialists visits to get final diagnostic (>4 visits: 21% vs. 34%)
- Access to treatment:
 - Better access to botox and anti-CGRPs (47% in Finland and 62% in Norway vs. 31% global)
 - Less years since diagnostic to treatment (>3years: 30% Finland and 40% Norway vs. 49% global)

Main differences between Finland and Norway

- Sociodemographic:
 - More annual family income in Norway (>40K/year: 66% Norway vs. 51% Finland)
- Migraine:
 - More chronic patients in Norway (70% vs. 48%)
- Access to care:
 - In Norway neurologist are more accessible for migraine (first visit with neurologist 76% vs. 44% in Finland)
 - In Finland there are more patients not followed by any HCP (47% vs. 20%)
- Access to treatment:
 - In Finland, difficulties to get access to specific migraine treatments seems to be more severe in terms of stigma from policy-makers and budget constrains.

Thank you