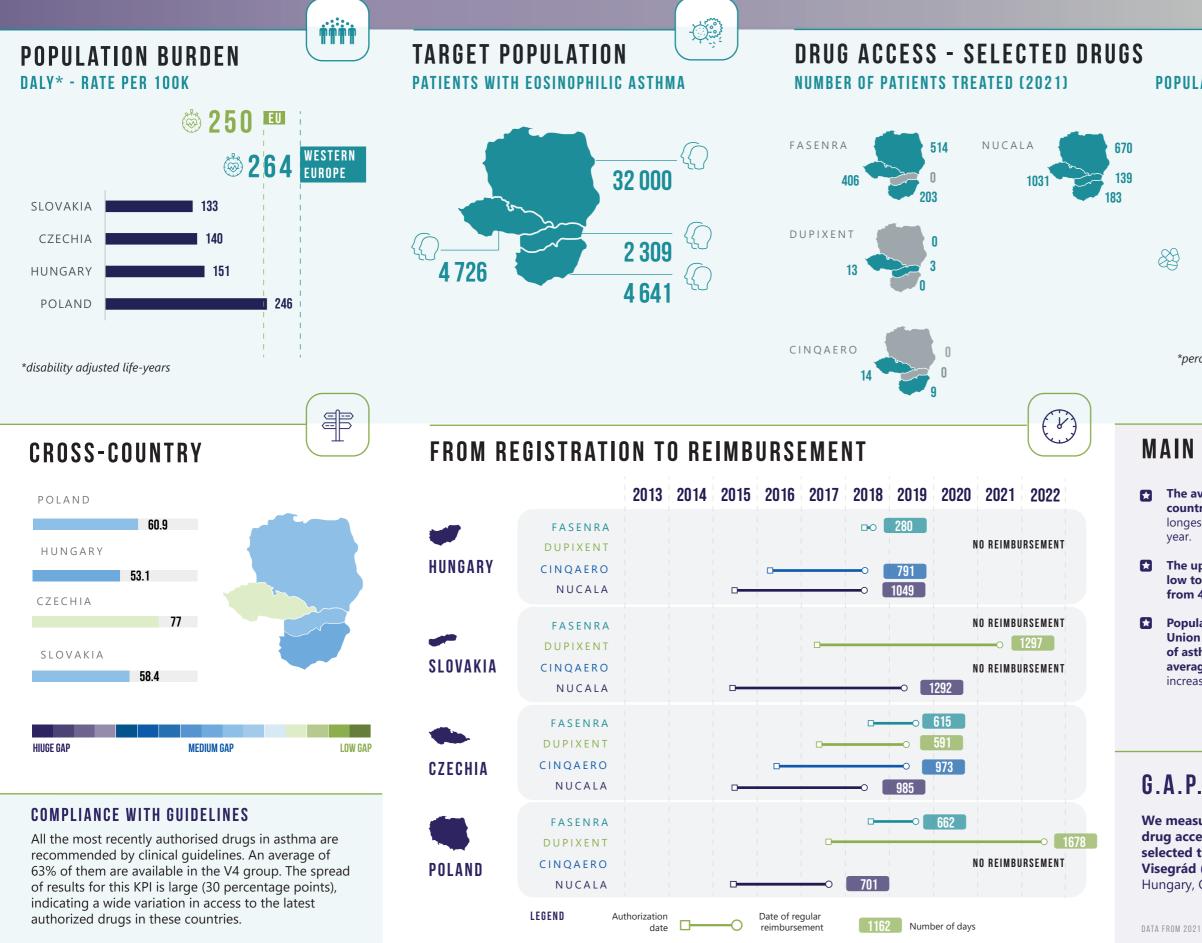


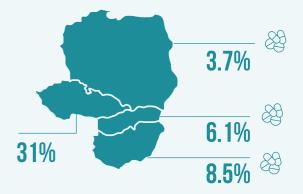
THE GAP IN ACCESS TO THERAPIES IN V4 IS HIGH - IT'S TIME TO ACT

Moderate restrictions in access to asthma treatment and diagnosis have been identified in the Visegrád (V4) countries as measured in the GAP score. Results vary substantially from country to country and the difference between the highest and the lowest scoring country is about 24 points. The main reason for the relatively unfavorable assessment is limited access to the registered drugs due to the lack of reimbursement or its restrictions and very low share of patients with eosinophilic asthma treated with the newest biological drugs.





POPULATION TREATED* - SELECTED DRUGS (%)



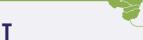
*percentage of the population of patients with eosinophilic asthma

MAIN ISSUES

The average time to reimbursement for asthma drugs in the V4 countries is 2.0 years. The difference between the shortest and the longest mean time to reimbursement among the countries is 2.5

The uptake of newest biological drugs in a target population is low to very low in all states - it is 31% Czechia and it ranges from 4% to 9% in the other V4 countries.

Population burden in V4 states is much lower than the European Union average. The only exception is Poland, where the burden of asthma measured in DALYs is in line with the European average. Over the past few years, there has been a trend of a slight increase in DALY values for asthma in the V4 countries.



G.A.P. PROJECT

We measured the gap in innovative drug access and diagnostics in selected therapeutic areas in the Visegrád (V4) countries (Poland, Hungary, Czechia and Slovakia).



