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

The substantial restrictions in diagnosis and access to diabetes mellitus have been identified in the Visegrád (V4) states as measured in the GAP score, with a clear difference between them. The difference between the highest and the lowest scoring country is 40 points. The main reasons for the downgrading are the limited access to registered drugs due to the lack of reimbursement or the high reimbursement restrictions, and the low proportion of patients treated with drugs authorised since 2010, especially in Poland.

Tiit

#

POPULATION BURDEN

DALY* - RATE PER 100K



*disability adjusted life-years

TARGET POPULATION

DIABETES PREVALENCE



Estimated diabetes prevalence (GBD).

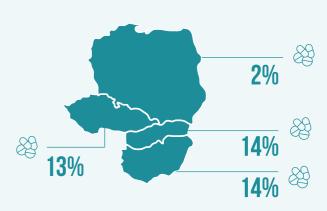
DRUG ACCESS

NUMBER OF PATIENTS TREATED
WITH DRUGS REGISTERED IN 2011-2022



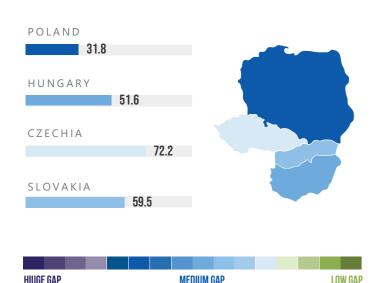
. N.

POPULATION TREATED* (%)



*percentage of patients treated with drugs registered in 2011-2022

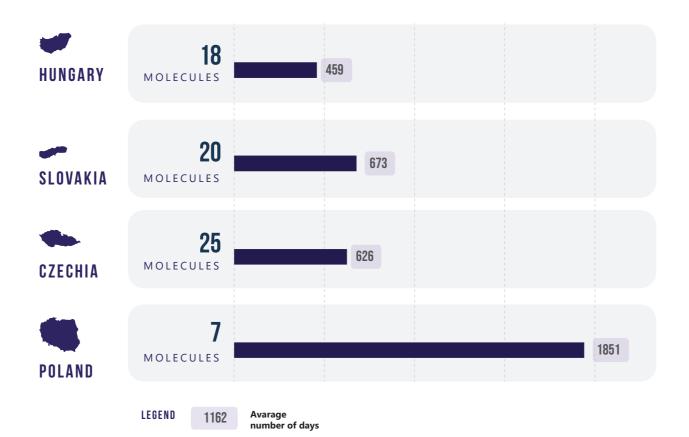
CROSS-COUNTRY



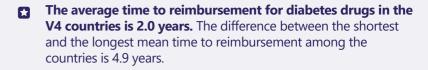
COMPLIANCE WITH GUIDELINES

Positive recommendations for 27 diabetes mellitus drugs were found in the clinical practice guidelines and there is a huge inequality between the countries as the treatment compliance with guidelines is only 22% in Poland (severe limitations in access) and 60-80% in the remaining states (moderate to low limitations to access).

FROM REGISTRATION TO REIMBURSEMENT



MAIN ISSUES



- The uptake of drugs authorised since 2010 is low, below 15%.
- DALY (disability adjusted life years) burden in the V4 countries, apart from Slovakia, is clearly higher than the European Union average. An increasing trend of DALY burden was observed in 1995-2019 in V4 countries, which is in line with the observations for the EU.



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).

