DISEASE LANDSCAPE PROSTATE CANCER I IN V4 IS HIGH - IT'S TIME TO ACT

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THE GAP IN ACCESS TO THERAPIES

Moderate limitations in the access to prostate cancer diagnosis and treatment were found in the Visegrád (V4) countries. The results for the combined GAP indicator vary across the analysed countries, with the scores differing by about 23 points. The variance in GAP scores is driven mainly by novel drugs, resulting in different percentage of patients from target population

POPULATION BURDEN

DALY* - RATE PER 100K



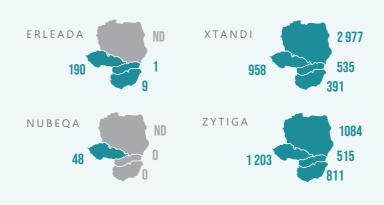
TARGET POPULATION

SELECTED NOVEL DRUGS

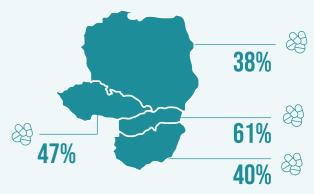


DRUG ACCESS

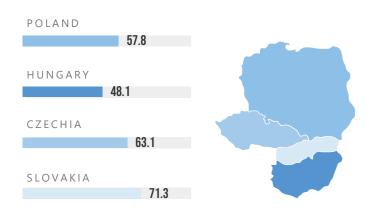
NUMBER OF PATIENTS TREATED (2021)



POPULATION TREATED (%)



CROSS-COUNTRY





Of the 9 drugs recommended by the clinical practice

guidelines, about 60% are available in the V4 group.

(33 percentage points), indicating a wide variation in

access to the latest authorized drugs in these countries.

COMPLIANCE WITH GUIDELINES

The spread of results for this KPI is large

FROM REGISTRATION TO REIMBURSEMENT



reimbursement

MAIN ISSUES

- The average time to reimbursement for prostate cancer drugs in the V4 countries is almost 2.9 years. The difference between the shortest and the longest mean time to reimbursement among the countries is 2.1 years.
- The proportion of patients in the target population treated with the selected novel drugs in V4 countries is moderate about 40% of potentially eligible patients in V4are treated with these options, with a substantial spread the indicator values of about 22%.
- All V4 states have a significant population burden in prostate cancer. The burden measured by DALYs (disability adjusted life-years) in these countries is however lower than the EU average.



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).



DATA FROM 2021









