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Experience with Measuring the Economic and Public Health Value of OTC: Examples from the EU and US

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Health systems under pressure

SustainabilityLimited financial resources

-Total global health expenditures are expected to rise annually by more than 5%

The global economic growth is expected to be significantly below 5%.



Health systems under pressure

Sustainability
Limited financial resources
Ageing population

-The global population aged 60 vears and above has tripled over the last 50 years. The share of those aged 80 years and above are expected to increase from 4% in 2010 to almost 10% in 2050 -Average life expectancy is expected to reach 73.7 years by 2017 -On average across OECD countries, the size of the working-age population as a share of the total population is expected to shrink by about 9 percentage points, from 67% in 2010 to 58% by 2050



Health systems under pressure

Sustainability
Limited financial resources
Ageing population
Health inequalities
Health services coverage
Uneven distribution of health professionals

According to the European
Commission, there will be a shortage of 230,000 physicians across the continent in the near future



As a result, health systems are challenged for defining...





Self-medication at the heart of health policies

- In this context, concrete steps should be taken forThe empowerment of citizens. EU:Active and healthy aging program
- The promotion of the self-care. EU:New Study to be finalized in 2015
- •An integrated network and coordinated provision of primary health care services by health professionals
- The exploitation of opportunities given by self care technology to improve health literacy
- Reimbursement schemes and incentives for rewarding responsible self-care practices and innovation



The Economic and Social Value of Self-Medication

An AESGP study analysed the economic impact from a shift of 5% of prescribed products to self-medication, on the basis that:

- A substitution effect exists between prescribed medications and self-medication.
- •Around 15% of all prescriptions are related to the treatment of minor illnesses.



The Economic and Social Value of Self-Medication

Aspects of the shift to self-medication with potential economic impact that are covered by the study:

Visit to a medical professional and costs relating to prescription medicines (reimbursement, co-payment schemes)
Doctor visit- and travel-related time savings
Productivity gains (early self-treatment, decreased absence from work)



The Economic and Social Value of Self-Medication

	Austria	France	Germany	Italy	Portugal	Spain	United Kingdom	Total of 7	Other 18 EU Member States	European Union of 25 Member States
Population (millions)	8.1	61.2	82.3	58.0	10.3	41.8	60.1	321.9	135.7	457.7
Annual savings for public funds (euro millions)	137.9	1 458.0	2 454.3	1 472.5	59.7	817.7	623.5	7 023.6	2 961.2	9 984.8
Perhead of population (€)	16.96	23.81	29.83	25.38	5.78	19.54	10.37	21.82	21.82	21.82
Annual savings for national economy (euro millions)	92.4	1 024.2	1 197.5	942.2	89.9	389.5	758.8	4 494.5	1 894.9	6 389.4
Perhead of population (\in)	11.36	16.73	14.55	16.24	8.70	9.31	12.62	13.96	13.96	13.96
Total annual savings (euro millions)	230.3	2 482.2	3 651.8	2 414.7	149.6	1 207.2	1 382.3	11 518.1	4 856.2	16 374.3
Perhead of population (\in)	28.32	40.54	44.38	41.61	14.48	28.85	23.00	35.78	35.78	35.78

Annual savings exceeding 16 billion EUR in the European Union



Minor ailments in the United Kingdom

- Analysis based on a longitudinal patient information database (IMS Disease analyser)
- •4 million patients' records collected daily
- (de-identified)

 Based on the diagnosis and treatment, possible to examine and identify cases that could have been addressed with self-care



Minor ailments in the United Kingdom

 Treatment of minor ailments within primary care in the National Health Service (NHS):

 57million consultations or 20% of total general practitioners (GP) workload

out of these:

51.4 million consultations or 18% of total GP workload addressed minor ailments only at a cost of GBP 1,8 bn

80% of the costs: GPs time

Every GP found to be dealing with a minor ailment for over an hour a day on average.



Cost savings in the Netherlands

Study estimating the cost-saving impact of self-care using both the substitution methodology of the AESGP study and the retrospective analysis of the PAGB study.

Based on the AESGP substitution methodology:
 Annual savings of approximately EUR 680 million compared to a total EUR 5bn for GP care
 Potential savings of EUR 41 per capita

Using an approach similar to the UK study •(with a GP survey instead of disease analyser): •GPs consider 29% of consultations unnecessary •Cost estimate of minor ailment by GPs: EUR 57 per capita



Cost savings in Spain

Simulation of shifting 5% of medicines currently prescribed for minor illnesses to self-medication

■National Health Service (NHS) savings due to reduction in doctor visits: €531 million

■Transfer from NHS expenditure to patients' out-of pocket costs: €304 million

Savings in doctors' time: €354 million
Savings in patients' time: €221.5 million

Total NHS savings: €1 205 million (2.0% of the NHS budget)
Productivity gains: €1 259 million (0.12% of GDP)



Savings in the United States

Major study supported by CHPA: Non-prescription medicines found to create \$ 102 billion in annual savings relative to alternatives (doctor visits, diagnostic tests, and prescribed medication).

For every dollar spent on a non-prescription medicine the U.S. healthcare system saves \$ 6-7

Non-prescription medicines provide symptomatic relief for an estimated 60 million people who would otherwise not seek treatment if these medicines were not available without a prescription.



More savings through switches

Simvastatin for the prevention of coronary heart disease

Triptans for the treatment of migraine

Azithromycine for the treatment of chlamydia

Tamsulosin for the treatment of functional symptoms of benign prostatic hyperplasia (BPH)

Orlistat for obesity treatment



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