Patient level data in CZ: Practical applications

NZIP 2024

11th December 2024

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Agenda

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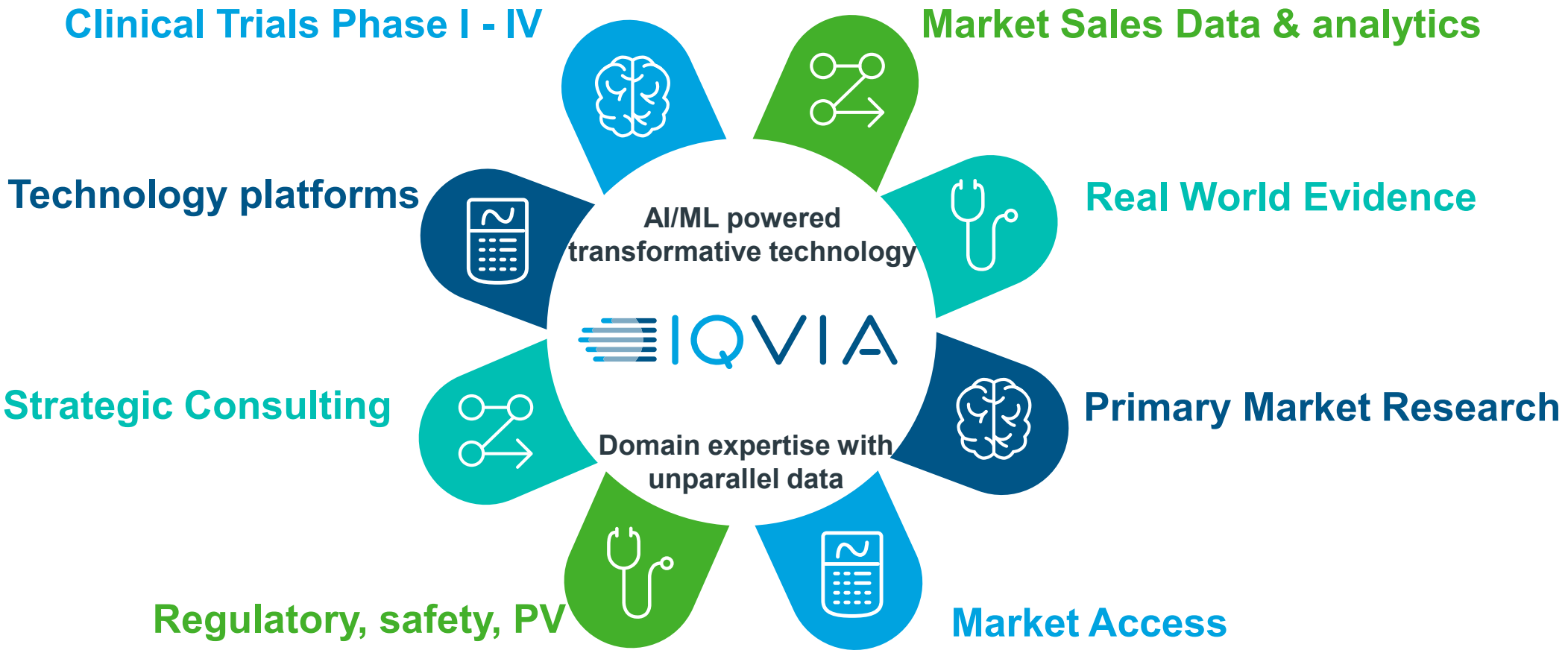
03 | Future is coming?

01

Background

IQVIA has 92,000 experts in 100+ markets worldwide, offers broad range of services across all the entire healthcare eco-system



Value Outcomes an IQVIA business

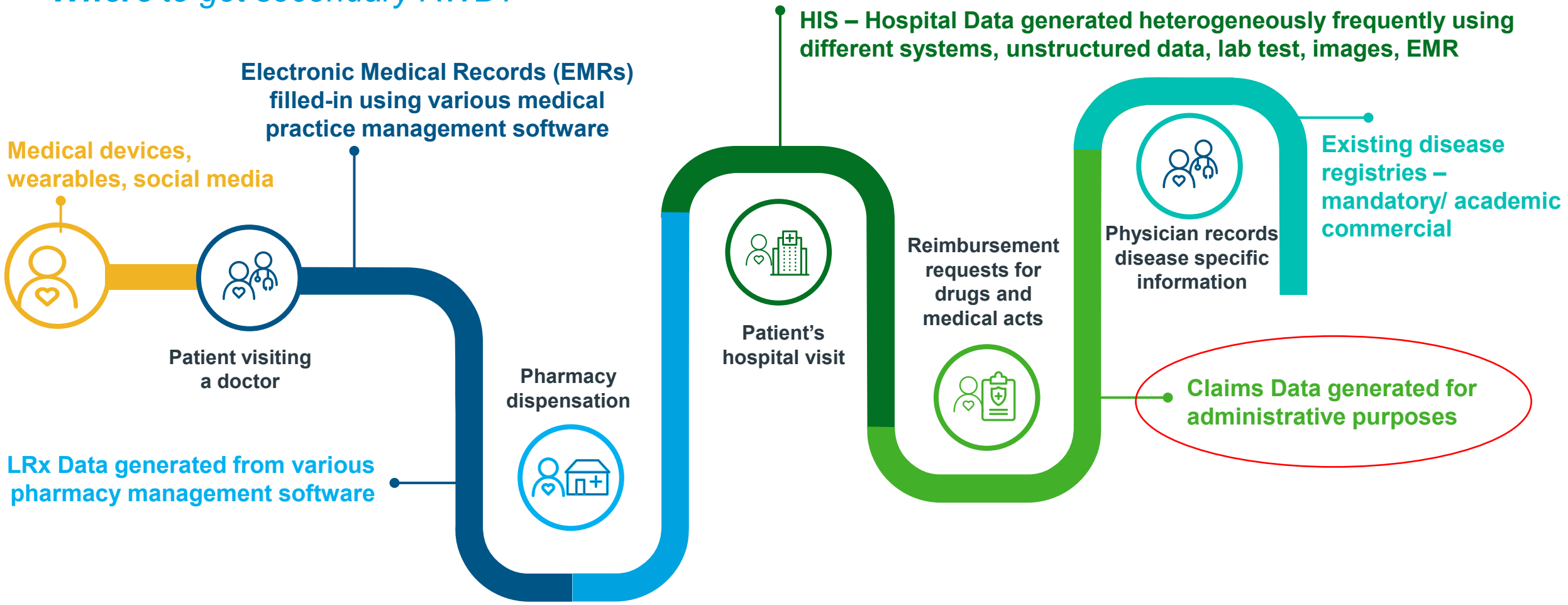
Happy to welcome new colleagues from Cogvio & Value Outcomes to the local CZ IQVIA team

COGVIO an IQVIA business

Source: IQVIA

There are multiple data sources of secondary longitudinal patient level data

Where to get secondary RWD?

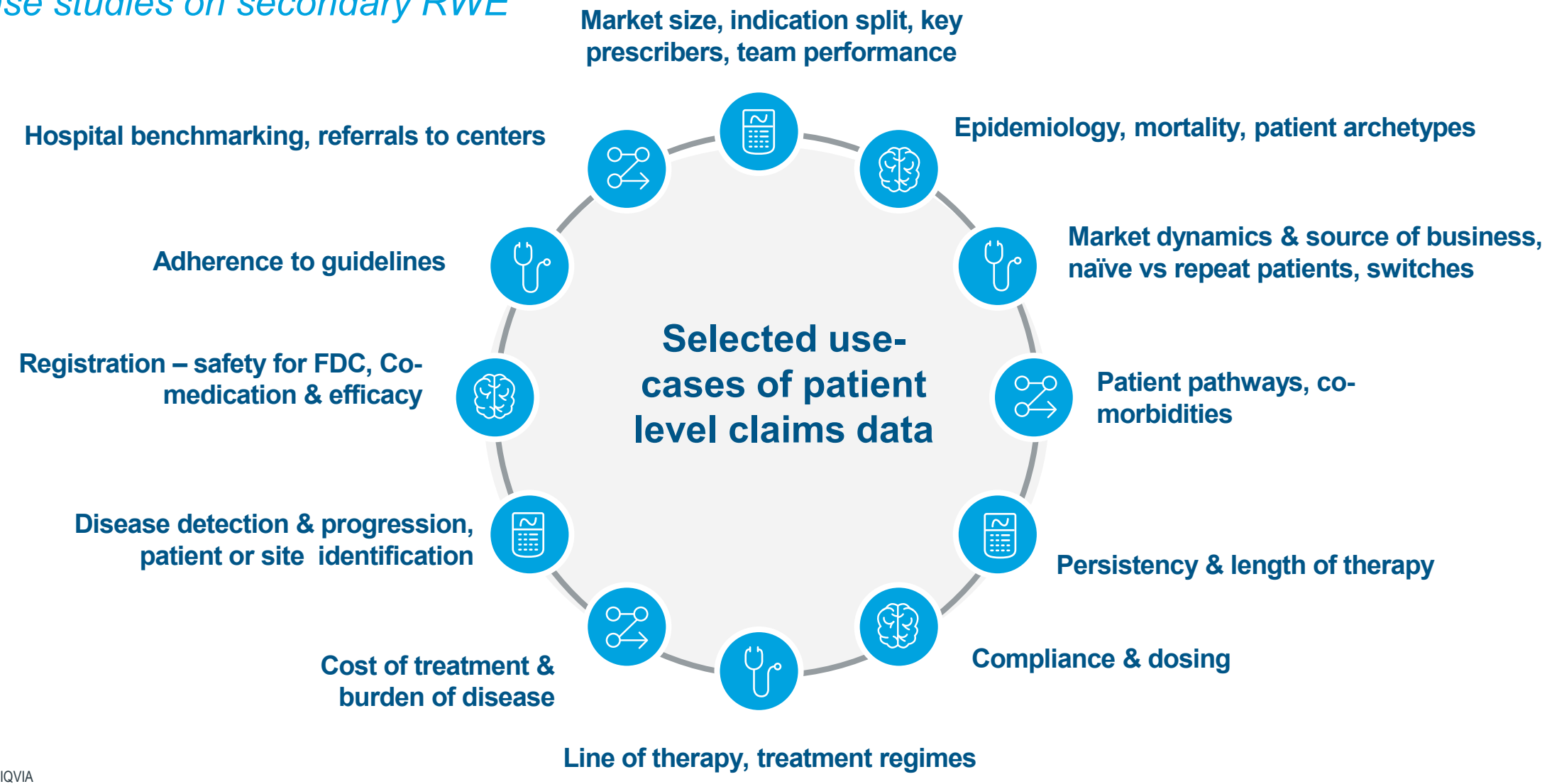


Data is primarily generated for administrative purposes but now increasingly also for analytical use.

Source: IQVIA, LRx: longitudinal prescription | HIS:Hospital Information System

Secondary RWD from payers (claims) has many use cases and is increasingly valued by various stakeholders in healthcare

Case studies on secondary RWE



Source: IQVIA

02

Case studies

Client requested information on the number of asthma patients, segmented by disease severity and treatment regimens

1. Patient population

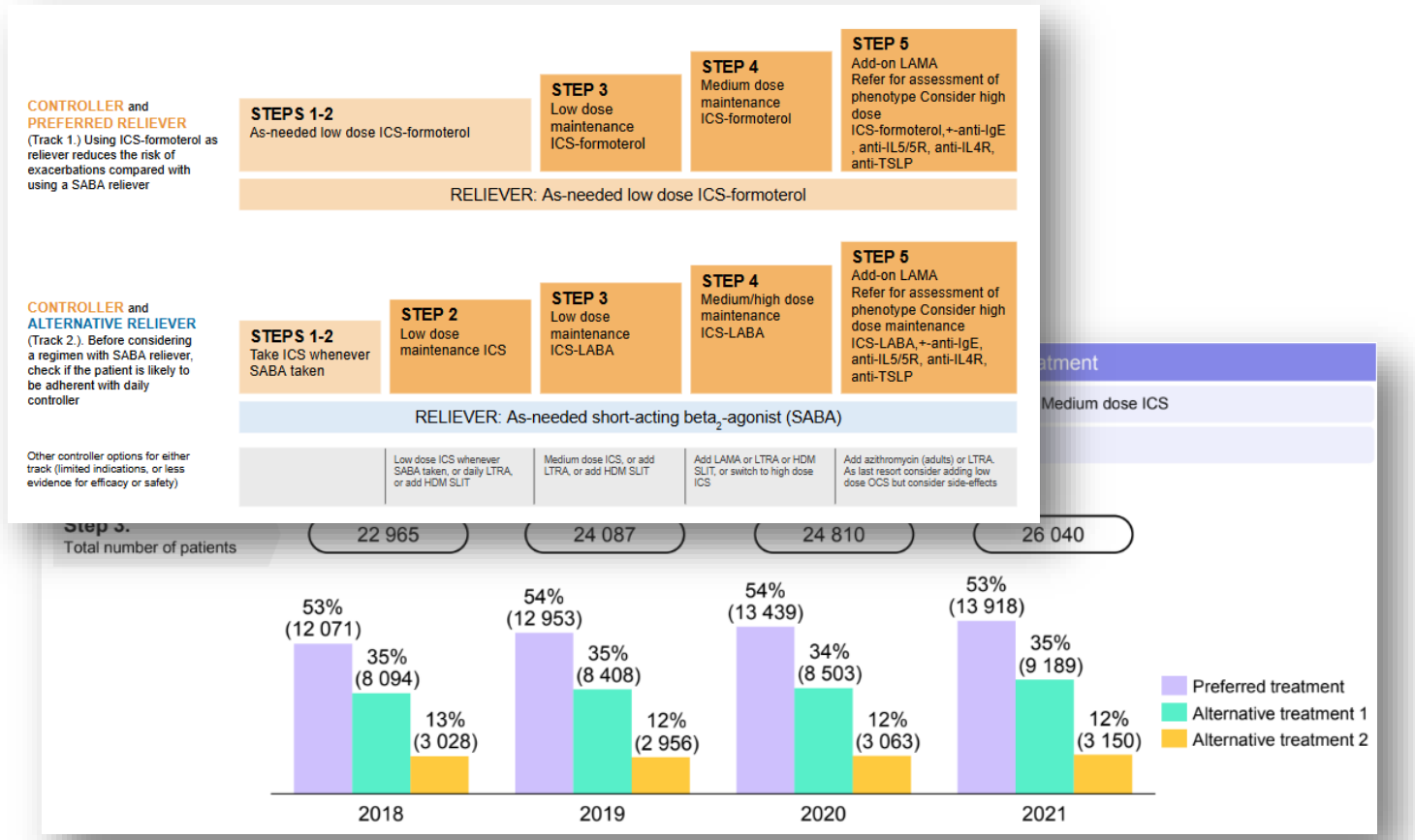
Situation

- The client requested IQVIA to analyze patient data to determine the size of asthma population in the Czech Republic as well as the breakdown by disease severity
- The client needed to understand detailed patterns of pharmacotherapy used in their treatment

Solution

- Despite having no clinical outcomes data, we were able to estimate the number of patients by asthma severity using administrative payer data. This was achieved by applying GINA treatment guidelines to categorize patients based on their pharmacotherapy patterns

Illustrative visualization – patient count



Source: IQVIA

Client wanted to better understand the behavior of naïve patients together with treatment length and potential concentration

2. Length of therapy

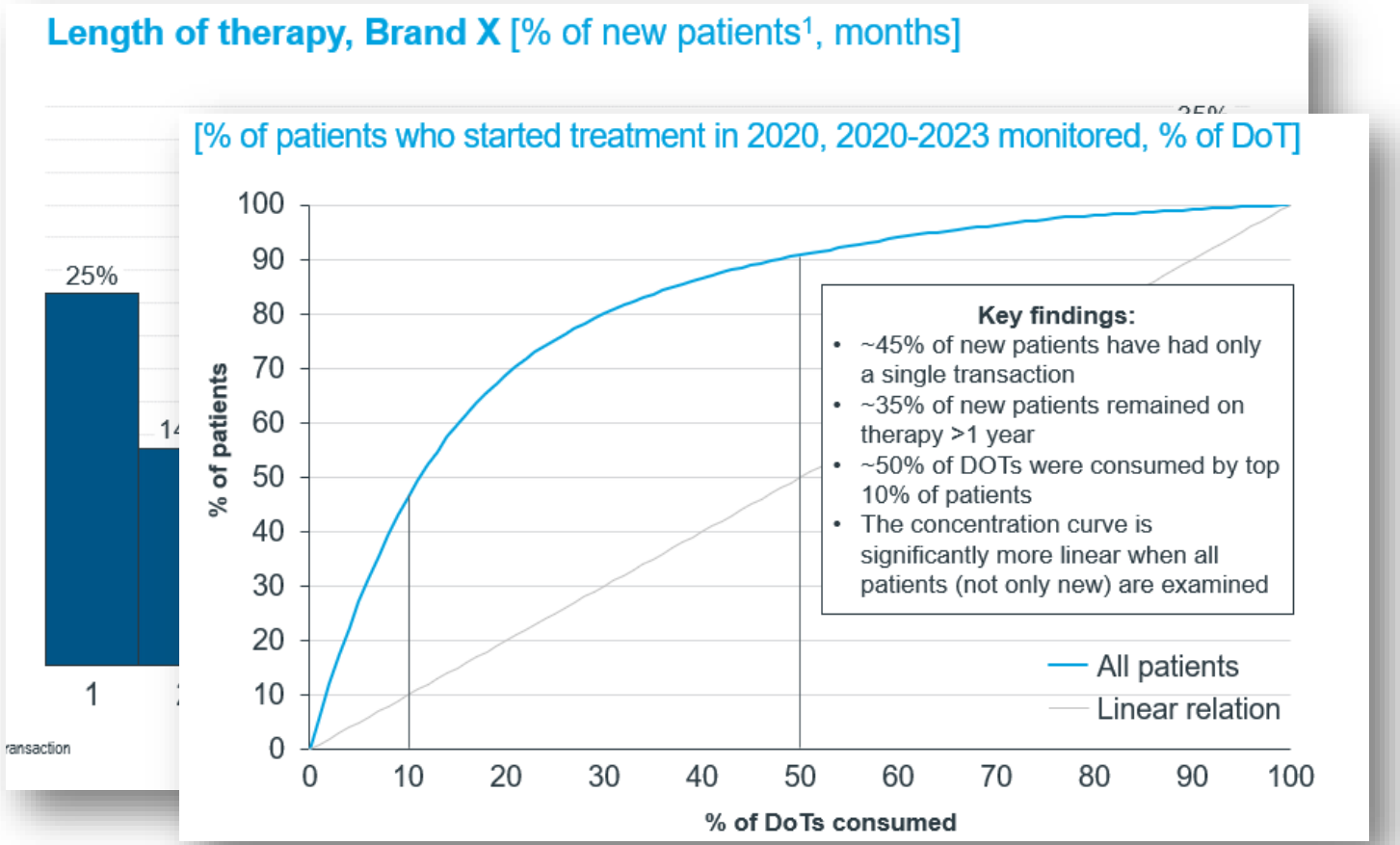
Situation

- The client requested us to analyze patient data to determine average treatment duration and to understand size of the most relevant patient cohort
- The client aimed to investigate these scenarios across different patient cohort (e.g., age groups, indications) and competition

Solution

- Using patient level claims data, we have analyzed treatment length, persistence and explored various concentration curves (for given brands and the same “new-to-brand” starting period)

Illustrative visualization – patient concentration



Source: IQVIA

Client was launching a product in a new TA – advanced persistency curves were requested to see market dynamics

3. Persistence

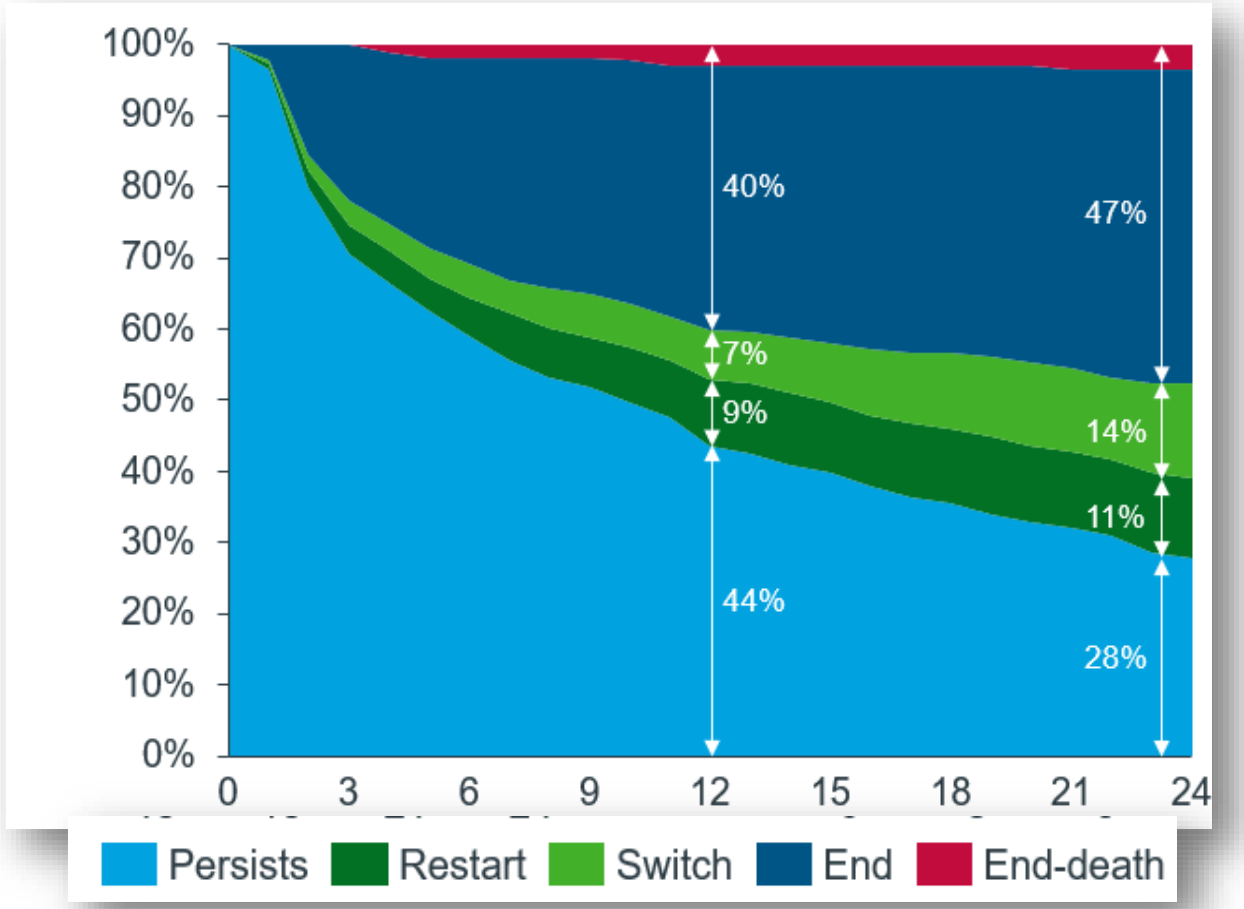
Situation

- Client wanted to understand the market dynamics as well as competitor product usage
- With multiple indications, new launches and upcoming LoEs the market was very dynamic
- Several molecules on the market with varying dosing schemes

Solution

- Using patient level claims data, for given indication and patient cohorts, we have analyzed e.g. persistency
- Differences in KPIs across products were apparent
- When not persistent, patients switch, restart or end treatment

Illustrative visualization – patient loss reason



LoE: loss of exclusivity

Source: IQVIA

Client wanted to map patient journey prior to diagnosis of interest in order to identify potential bottlenecks of access to treatment

4. Patient journey prior to diagnosis

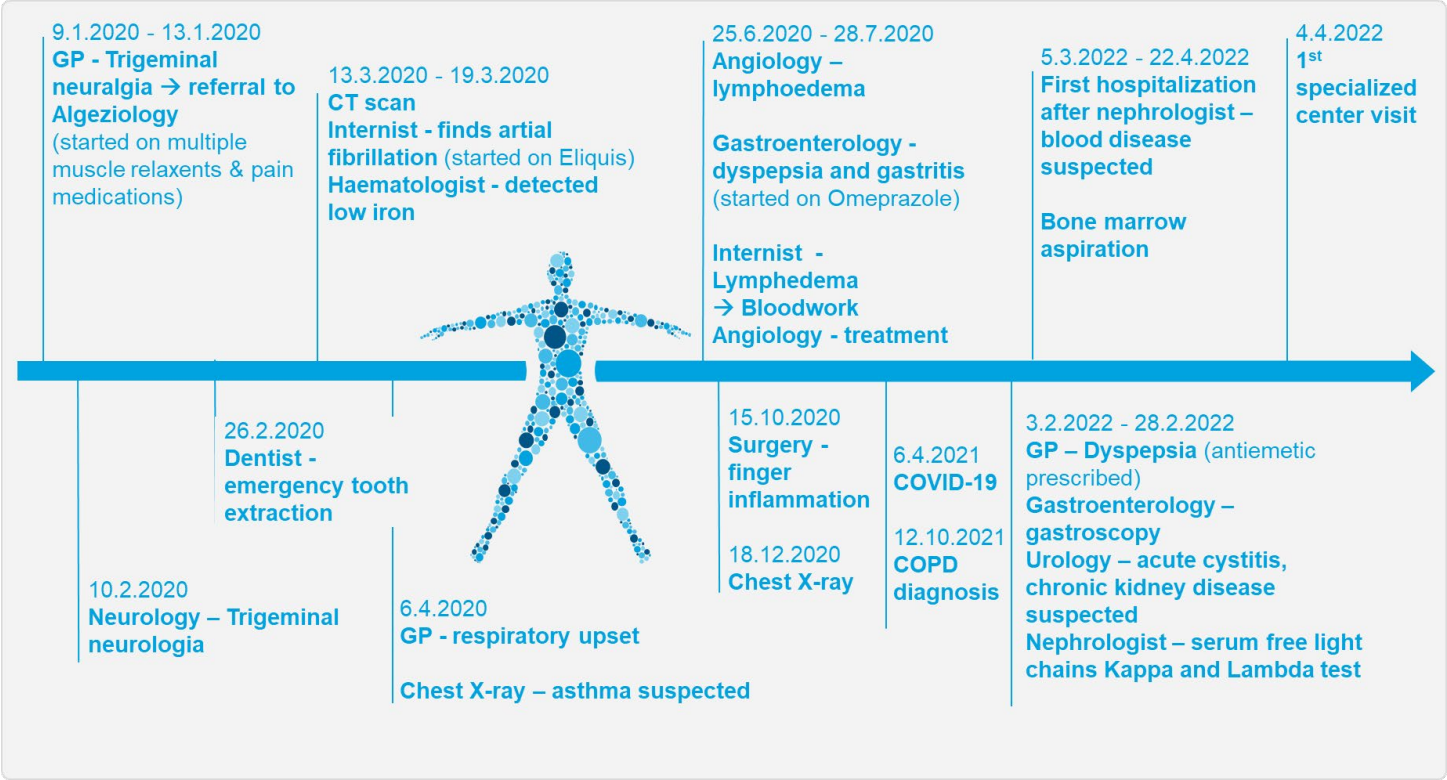
Situation

- Client hypothesized that less patients are being diagnosed with diagnosis of interest in CZ than can be assumed based on global prevalence data
- Client therefore asked IQVIA to map patient journey prior to diagnosis of interest and identify potential bottlenecks in the patient journey in CZ

Solution

- Using patient level claims data, IQVIA analyzed patient journeys with diagnosis of interest up to 2 year before
- Temporal patterns in other diagnoses, medication, specialties visited and tests and procedures done were used to create map of patient journey incl. share of drop offs

Illustrative visualization – individual patient journey



Source: IQVIA

Client wanted to register a new Cardiology FDC in Europe – IQVIA has provided RWE data on current co-prescription dynamics

5. Co-prescription data for drug registration

Situation

- Client wanted to register a new Fix-Dose-Molecule (FDC) combination within EU
- Based on the EMA safety requirements, client needs to bring RWE data from various counties on the number of patients that already are on the 2 existing mono-components

Solution

- IQVIA has collected secondary RWE data across EE countries, designedd a joint methodology, statistical plan and provided results in excel dashboard as well as a PDF report acceptable by national drug authorities

Illustrative visualization – co-prescription

	Patient count (projected)		
	MAT 06/2022	MAT 06/2023	MAT 06/2024
Molecule A (mono)	14,229	14,343	16,853
Molecule B (mono)	107,646	126,807	136,698
Molecule A (any)	21,020	25,098	26,052
Molecule B (any)	114,437	137,562	145,897
Molecule A + Molecule B (co-prescription)	6,791	10,755	9,199

Source: IQVIA

03

Future is coming!

Real World Evidence future is coming!

Source: IQVIA, MS co-pilot AI generated

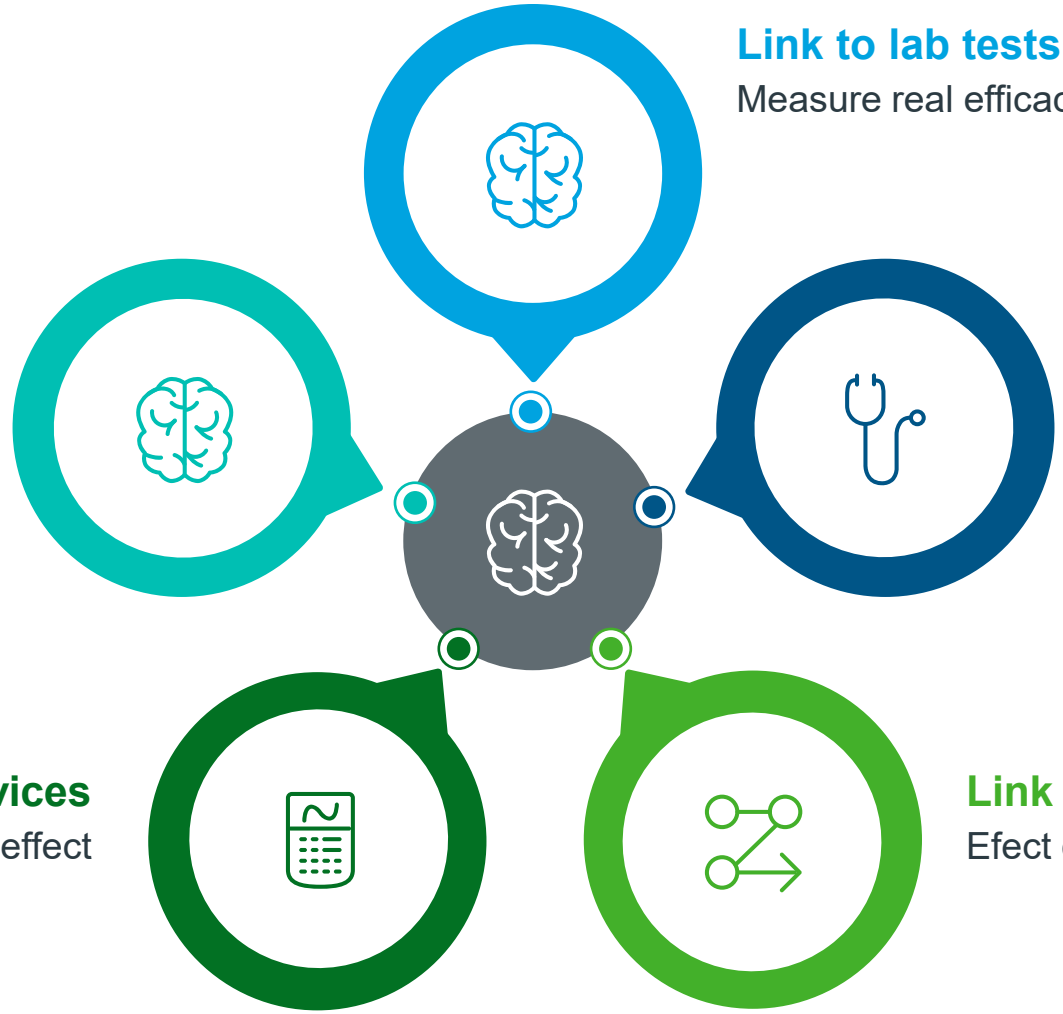
NRHZS with over 300 variables present of the richest RWE dataset in Europe

387 lecba

What else could be there?

Link to lab tests
Measure real efficacy of products

Link to other registries in NZIS
Cardio, injuries, dia registry...



Link to physician and hospital EMR
Qualitative insights

Link to patient wearables, devices
Real time effect

Link to social welfare
Efect on burden of diasease

Source: IQVIA

Thank you for your attention.

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