

Patients' views on public support mechanisms in coeliac disease in Hungary

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PCR125



OBJECTIVES

In Hungary, public support for patients with diagnosed coeliac disease (CD) is primarily provided through a monthly tax allowance. This study aimed to explore patients' views on alternative public support mechanisms and the factors influencing them.



RESULTS

Subsidisation of gluten-free foods was the most commonly preferred option (first choice: 45.5%), followed by free provision of gluten-free foods (21.5%) and tax allowance (18.9%), while cash benefits and reimbursement of medicines or dietary supplements were consistently ranked lowest (Table 2). Patients reporting excellent general health status were more likely to select cash-based or other non-food supports, whereas among patients with non-excellent health, food-based options remained the most common first choice (p=0.035). A higher proportion of household spending on gluten-free foods relative to income was associated with an increased likelihood of selecting food-based support options (p=0.044) (Table 3). The first-choice support mechanism was not associated with patients' sociodemographic characteristics (e.g. age, gender, education), clinical characteristics (e.g. symptoms, comorbidities), or the receipt of tax allowance.



METHODS

An online cross-sectional survey was conducted among 312 adult CD patients on gluten-free diet in Hungary (18-80 years) (Table 1). Respondents ranked six public support mechanisms: subsidisation of gluten-free foods, free provision of gluten-free foods, tax allowance, cash benefits, reimbursement of medicines and dietary supplements, and other support options. The relative frequency of each support mechanism chosen as first, second, and subsequent options were computed for each category. Associations between first-choice selections (among the 6 ranked options) and socio-demographic characteristics, gluten-free food expenditure, tax allowance, and comorbidities were explored using chi-square tests.

Table 1
Patient's demographics and clinical characteristics

	N	%
	312	
Gender		
Women	219	70.19%
Man	93	29.81%
Age groups		
18-24	59	18.91%
25-34	98	31.41%
35-44	73	23.40%
45-54	68	21.79%
55+	14	4.49%
Comorbidities (number)		
0	33	10.58%
1	74	23.72%
2-3	101	32.37%
4+	104	33.33%
Symptoms		
No symptoms	90	28.85%
At least one symptom	222	71.15%

Table 3

Determinants of first-choice preferences for public support mechanisms

Predictor	Category	N	%	p-value
Gender	Male	93	29.8	0.061
	Female	219	70.2	
Employment	Employed	230	73.7	0.59
	Student/unemployed	82	26.3	
Health status	Poor/fair	75	24.0	0.035
	Good	141	45.2	
	Very good	96	30.8	
% of household income spent on GF foods	1-10%	107	34.3	0.044
	11-40%	162	51.9	
	41+%	43	13.8	

Table 2

Patient preferences ranked across support mechanisms

Preferences	1		2		3		4		5		6		Sum of ranks	Rank number
	n	%	n	%	n	%	n	%	n	%	n	%		
subsidised GF foods	142	45.5%	93	29.8%	57	18.3%	15	4.8%	4	1.3%	1	0.3%	1599	1
tax allowance	59	18.9%	94	30.1%	82	26.3%	51	16.3%	24	7.7%	2	0.6%	1355	2
free GF foods	67	21.5%	52	16.7%	39	12.5%	65	20.8%	76	24.4%	13	4.2%	1178	3
cash benefit	11	3.5%	1	0.3%	3	1.0%	6	1.9%	11	3.5%	280	89.7%	403	4
drugs/supplements	5	1.6%	41	13.1%	70	22.4%	97	31.1%	94	30.1%	5	1.6%	999	5
other	11	3.5%	1	0.3%	3	1.0%	6	1.9%	11	3.5%	286	91.7%	409	6



CONCLUSION

Hungarian patients with CD most frequently selected support mechanisms that directly reduce the personal cost of gluten-free foods, with subsidisation and free provision as the first-choice options. These findings highlight important patterns in patient priorities and can assist in shaping more patient-oriented public support policies for CD.



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