

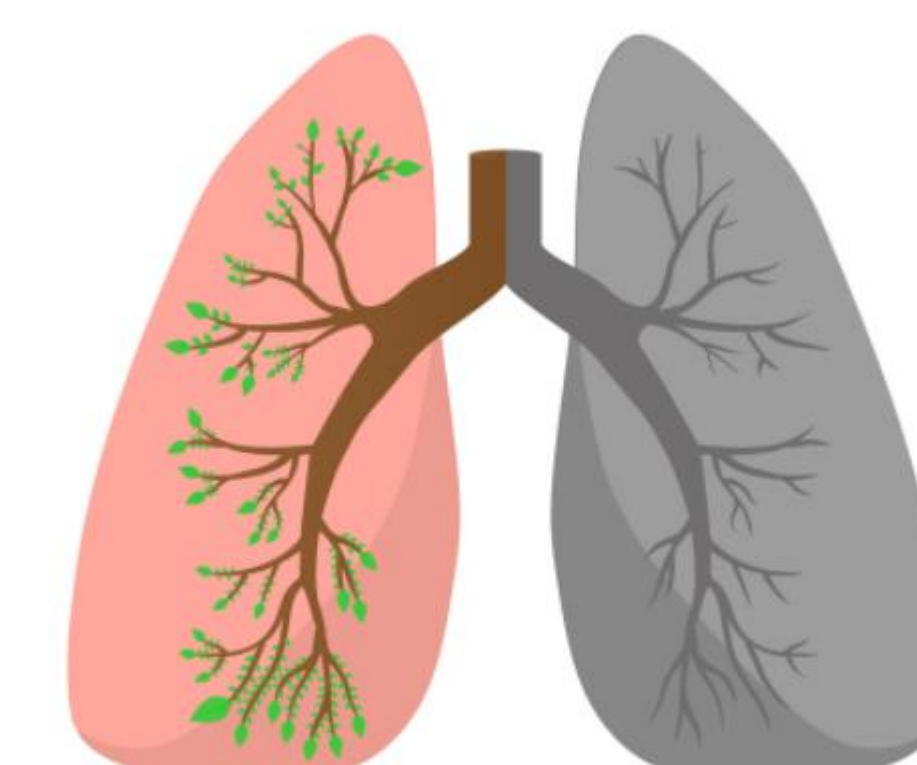
Trends in medicine utilization and its expenditure for treating lung cancer in Catalonia

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Background

From 2014 to 2021, **25 pharmacological treatments** for lung cancer, corresponding to **12 different molecules (innovative medicines)**, received a positive price and reimbursement decision in the Spanish NHS. These **innovative medicines** comprises **immunotherapy, targeted and antiangiogenic therapies**. The **clinical uptake and budgetary impact** of innovative medicines is of outmost importance from the **Catalan Health Service perspective**, as the regional responsible for resource allocation, budget planning, and policy development in Catalonia.

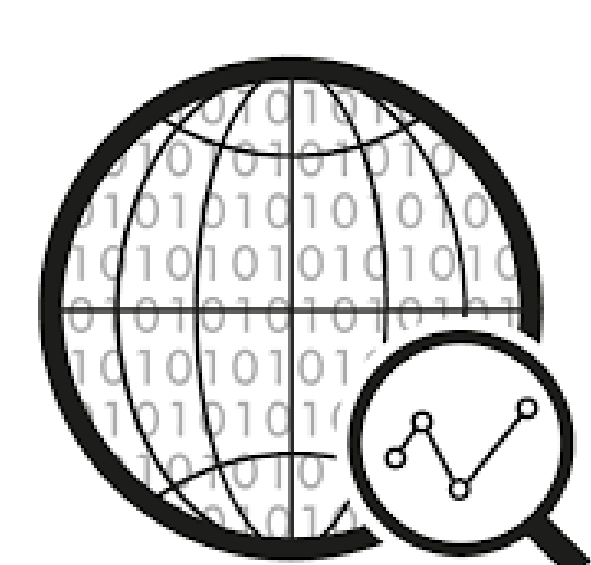


Objective

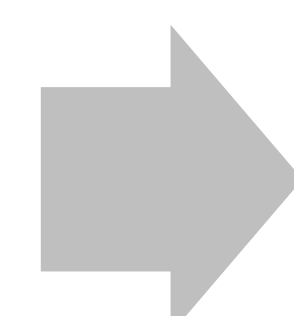
To describe trends in medicine utilization for treating lung cancer and its expenditure in the Catalan Health Service

Method

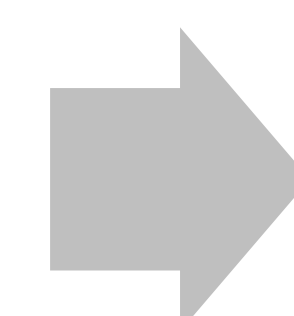
Retrospective descriptive analysis of medicine use for lung cancer patients in Catalonia from, 2014 to 2021



Patients diagnosed with **lung cancer** (ICD-10-C34)



Patients **treated with systemic medicines** and the **expenditure** of their use → **health care registries data**



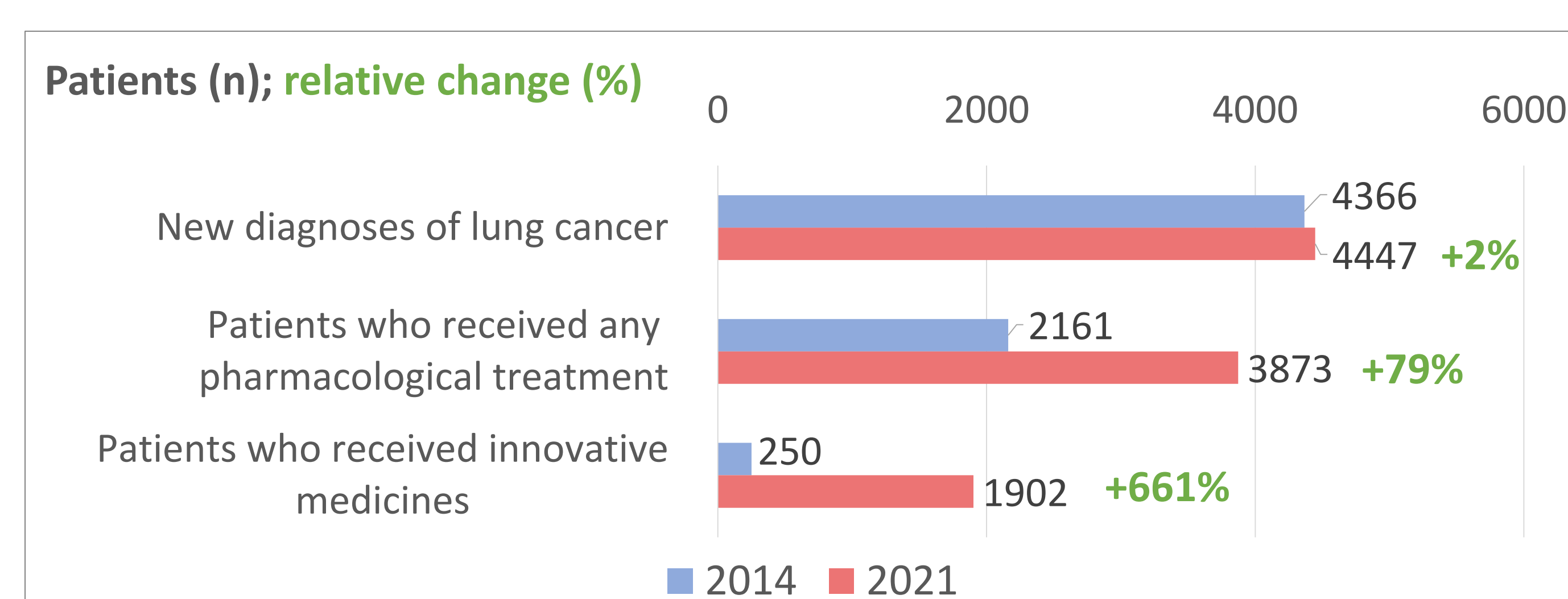
Treatments use by **therapeutic groups:**

- a) chemotherapy,
- b) targeted therapy,
- c) immunotherapy,
- d) antiangiogenic therapies

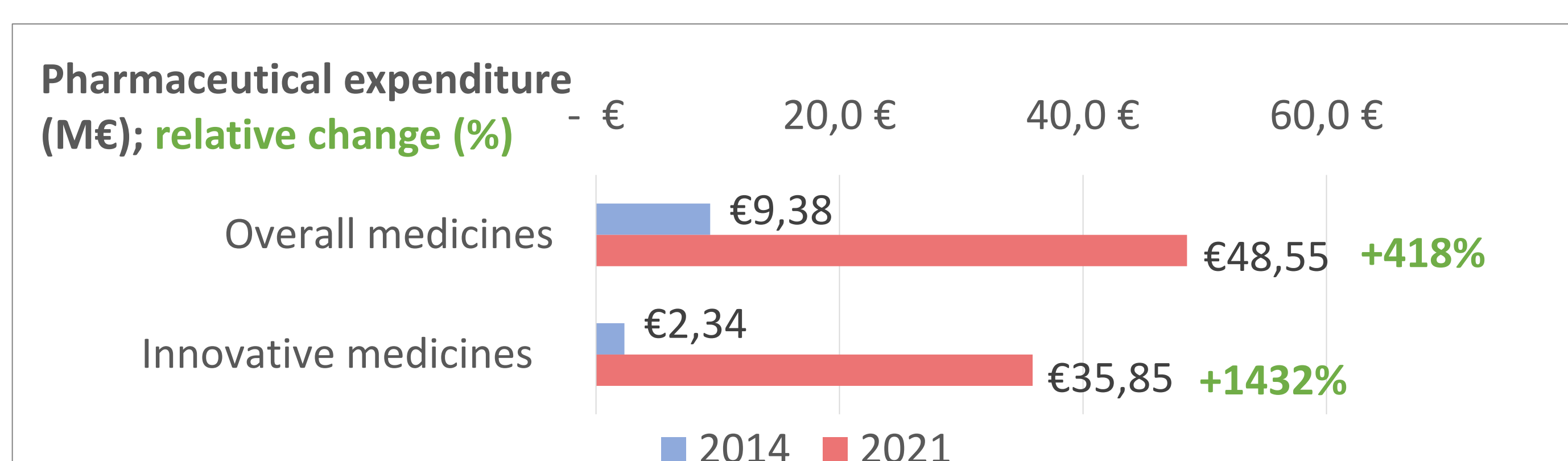
innovative medicines

Results

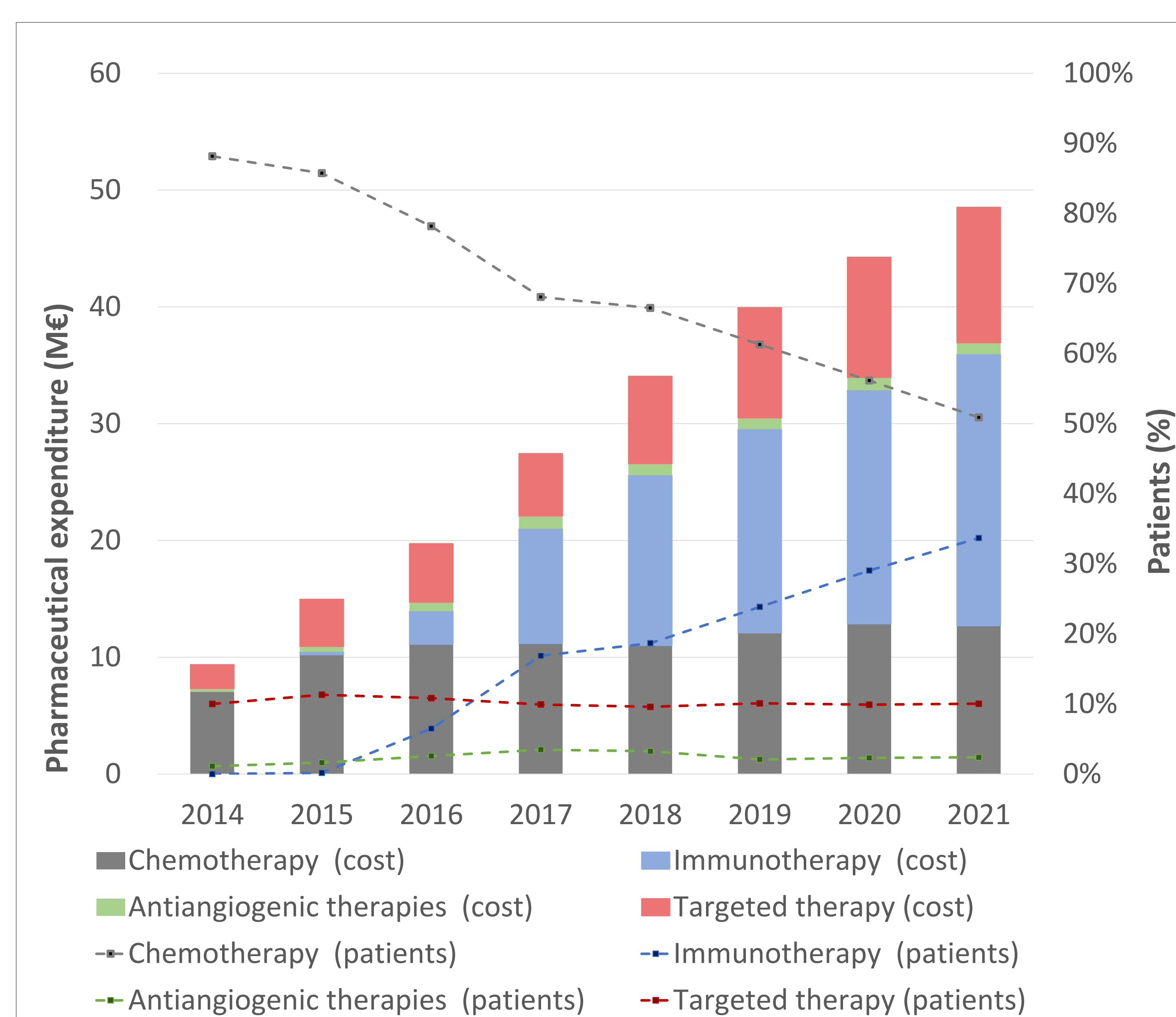
The number of **patients** who received any **pharmacological treatment** increased from 2014 (n=2,161) to 2021 (n=3,873), although **new diagnoses** remained stable (n=4,366 in 2014 and n=4,447 in 2021).



The **pharmaceutical expenditure** increased up to **418%** by 2021 for **overall medicines** and **1432%** for **innovative medicines**



The percentage of **patients** who received **immunotherapy** represented to nearly **35% of the total patients** treated with any systemic medicine in 2021, with an **expenditure** of **€23.3 million (48% of the total pharmaceutical spending for lung cancer)**.



Conclusions

The **increase of numerous reimbursed innovative medicines**, mainly due to the inclusion of immunotherapy, has resulted in the **extensive use and greater spending** on lung cancer treatments in Catalonia. In the coming years, an increase in pharmaceutical spending is expected to escalate with the approval of **new pharmacological** treatments, inclusion of regimens with **multiple** innovative, but **expensive medicines** and **longer duration** of treatment.

Longer follow-up time is needed to **measure the impact** of innovative medicines on **clinical outcomes**.

References

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Generalitat de Catalunya. Departament de Salut. Registres i catàlegs. <https://catsalut.gencat.cat/ca/proveidors-professionals/registres-catalogs/>