

HPR163: Underinvestment in Pharmaceutical Care and Unmet Pharmaceutical Needs Among Older European Adults

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Introduction

- As the aging population continues to grow, it becomes increasingly imperative to ensure access to essential healthcare for older adults to safeguard their well-being. While many European health systems have made strides towards achieving universal health coverage, numerous countries grapple with substantial access barriers [1].
- The availability of public health resources assumes a pivotal role in molding the healthcare system's performance [2]. Insufficient investment in public health systems places significant strain on their capacity to fulfill fundamental healthcare requirements, ultimately impeding their effectiveness.

Objective

- The objective of this study was to evaluate the impact of public health expenditure on unmet pharmaceutical needs among older European adults

Methods

- We utilized data from a sample of 42,780 individuals aged 50 years and above, representing 26 countries that participated in wave 8 (2019/2020) of the Survey on Health, Ageing, and Retirement in Europe.
- Multiple probit regression analyses were used to estimate the independent effect of public health expenditure on the probability of unmet pharmaceutical needs

Results

- The percentage of individuals who used a drug (for any disease) at least once a week in the preceding year witnessed a substantial increase in almost all countries between 2004 and 2020, as depicted in Fig. 1. In 2020, the countries with the highest usage rates were Czechia (82.2%), Belgium (81.9%), and Hungary (80.5%), while Denmark (66.4%), Netherlands (65.1%), and Switzerland (62.2%) reported the lowest rates of usage.
- Between 2004 and 2020, there was an increase in the prevalence of unmet pharmaceutical needs in the majority of countries (Fig. 2). In 2020, Romania had the highest prevalence at 11.6%, followed by Greece at 2.9% and Poland at 2.2%. In contrast, the lowest rates were found in Spain (0.5%), Luxembourg (0.3%), and Sweden (0.2%).
- When it comes to the most substantial discrepancies between the prevalence of unmet pharmaceutical needs in the poorest and richest quartiles, Romania was at the forefront, followed by Estonia and Czechia, as illustrated in Figure 3. Sweden, Switzerland, and Greece, on the other hand, had the least notable disparities.
- An increase in public pharmaceutical expenditure has a notable effect on reducing the probability of encountering unmet pharmaceutical needs (Fig. 4).
- The average marginal effect displayed variations across European countries, with higher rates noted in nations characterized by both high unmet pharmaceutical needs and low levels of public pharmaceutical expenditure.

Conclusions

- Unmet pharmaceutical needs among older adults in Europe are a significant concern, and these needs have also experienced a notable increase over time.
- To address this issue, it is crucial to make substantial and sustained investments in public health through increased public health expenditure. Such investments would have a positive impact on access to pharmaceutical care, and consequently, on the well-being of older adults.

Results

Figure 1. Changes in the share (%) of individuals with taking a drug (for any disease) at least weekly per country

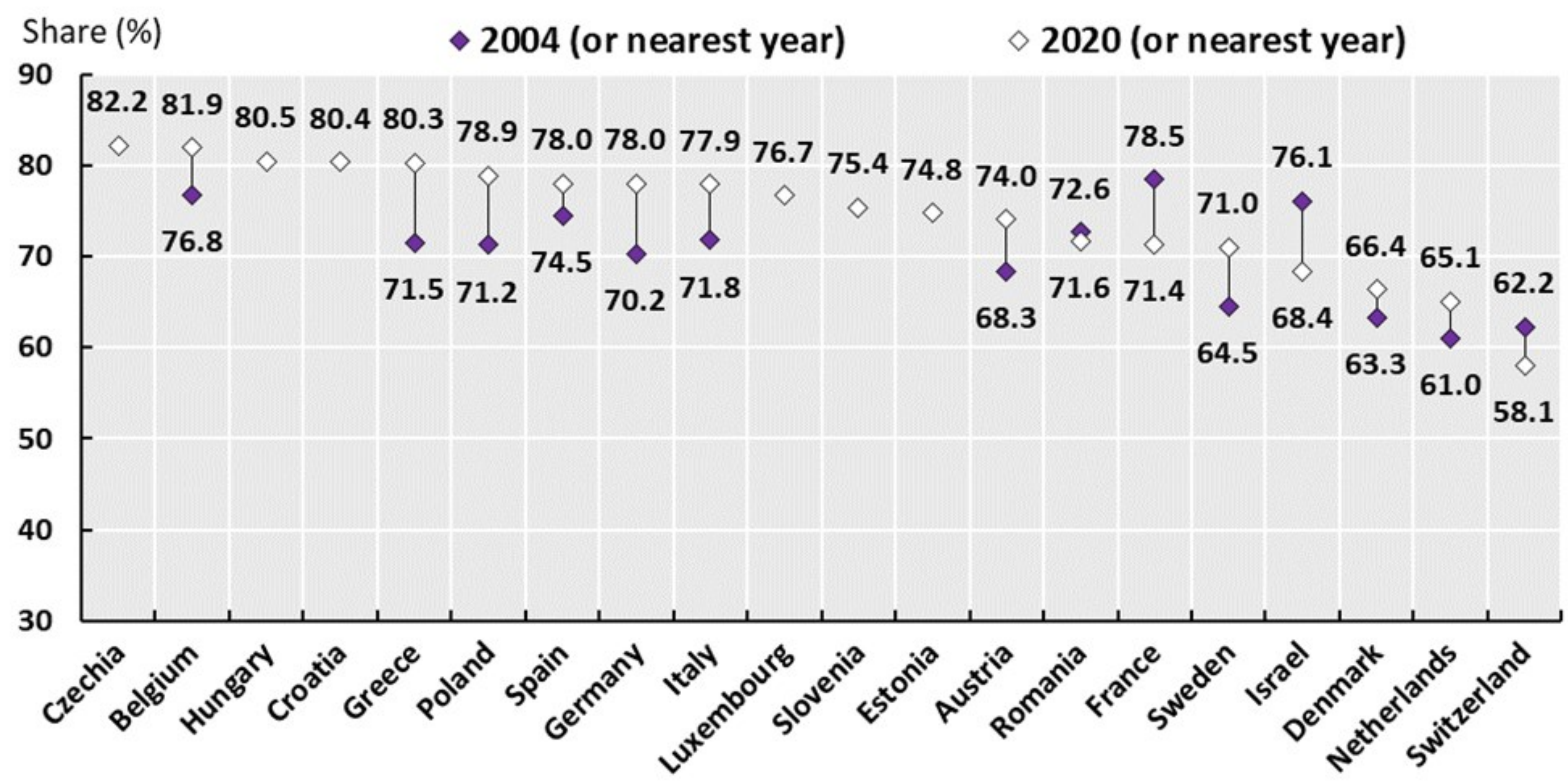


Figure 2. Changes in the prevalence (%) of unmet pharmaceutical needs per country

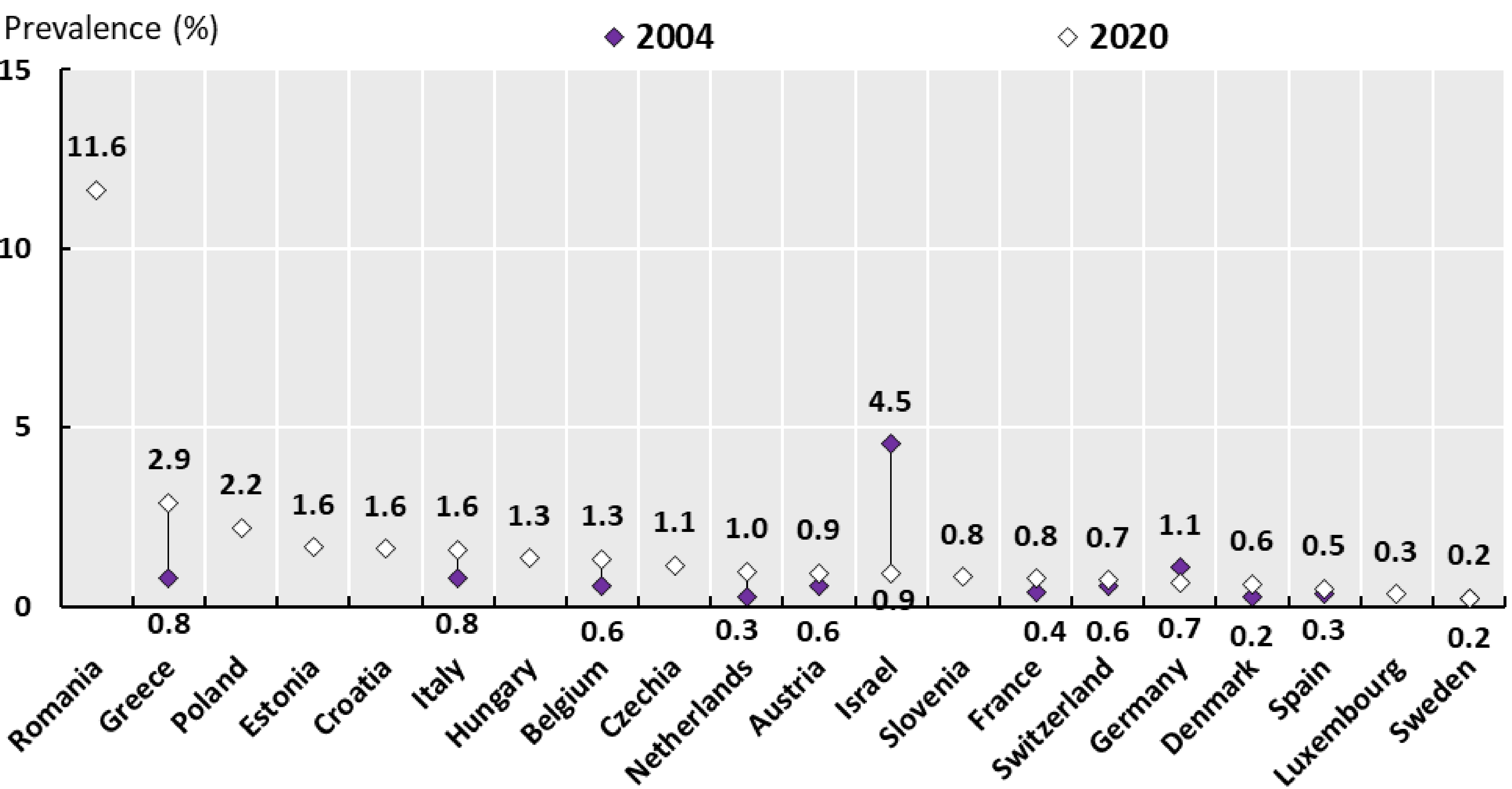


Figure 3. Income-related inequalities in the prevalence (%) of unmet pharmaceutical needs by country (2020) (%)

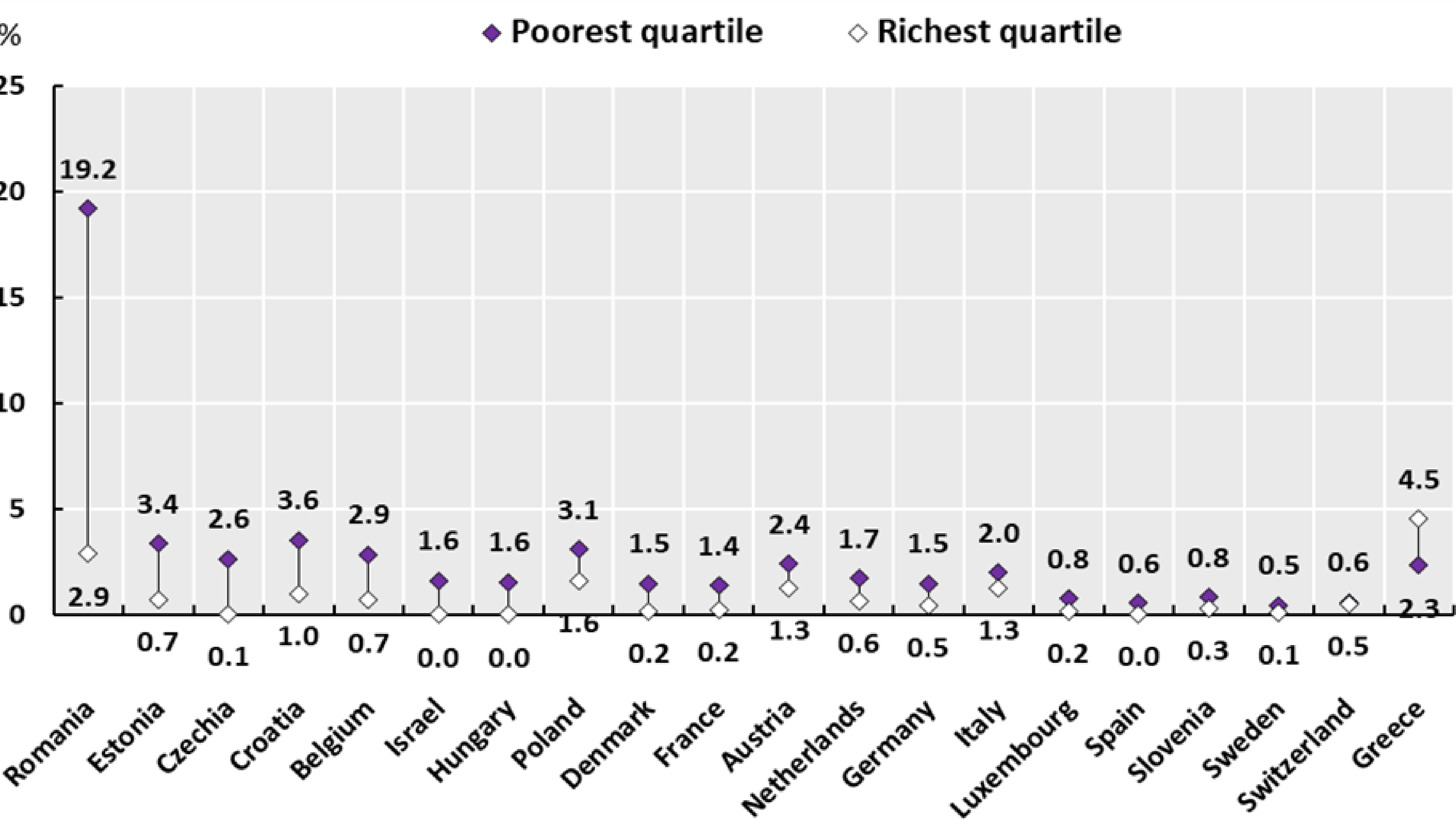
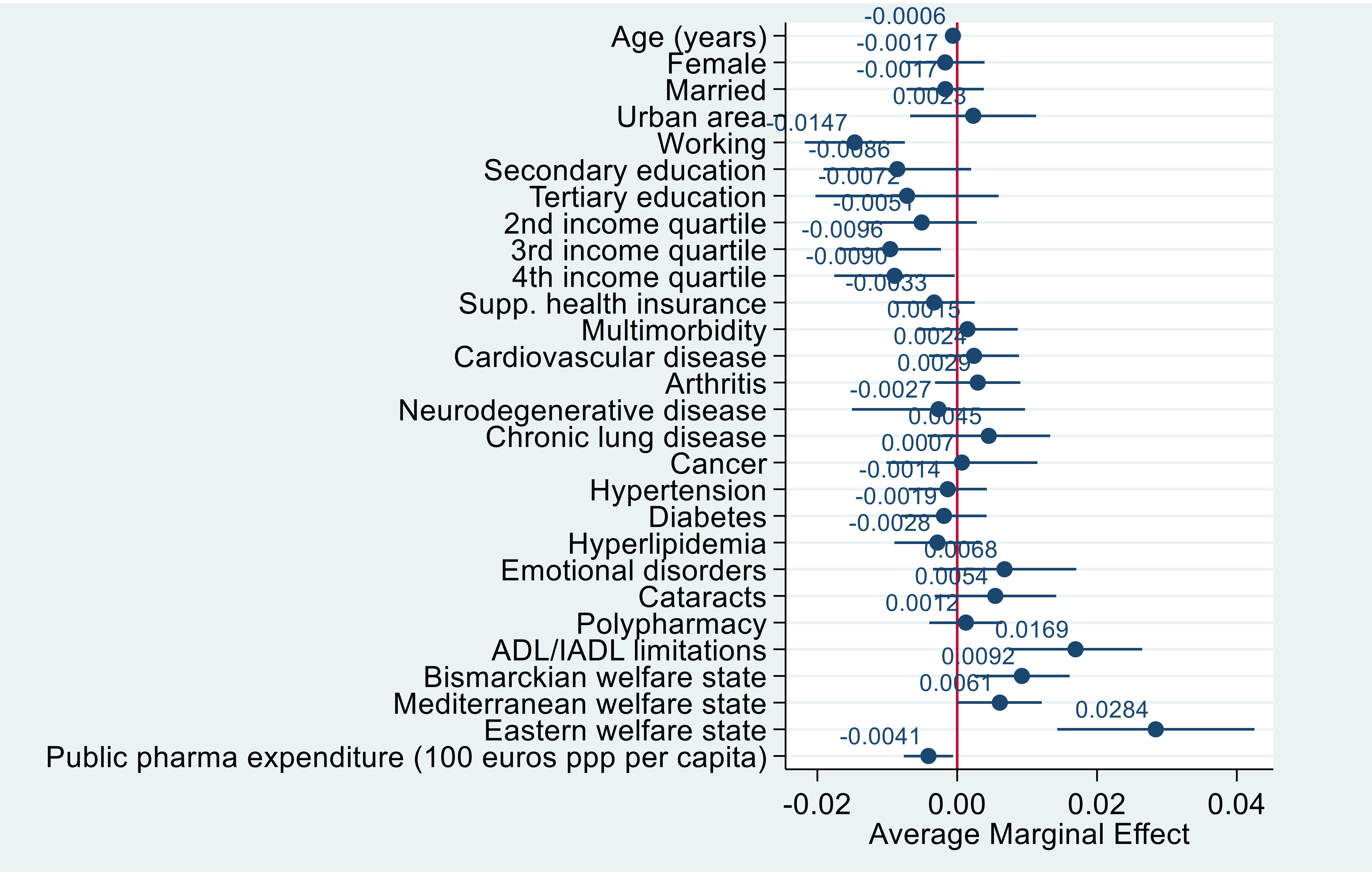


Figure 4. Average marginal effects of independent predictors of the probability of unmet pharmaceutical needs following probit model estimation



References

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[2] Onofrei M, Vatamanu A-F, Vintilă G, Cigu E. Government Health Expenditure and Public Health Outcomes: A Comparative Study among EU Developing Countries. International Journal of Environ-