

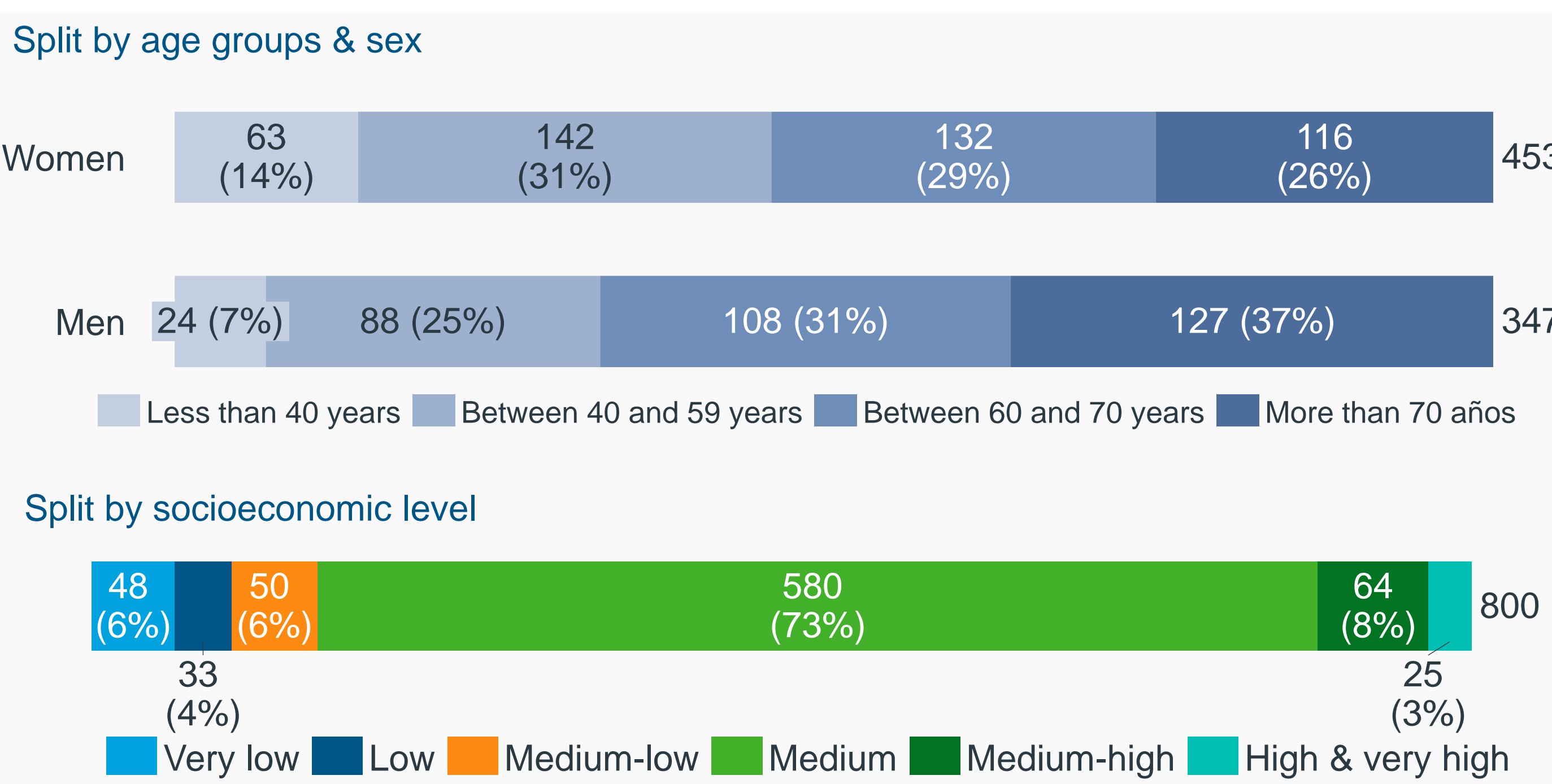
OBJECTIVES

- To understand how chronic patients interact with the healthcare system in Spain and their proficiency using digital tools.

METHODS

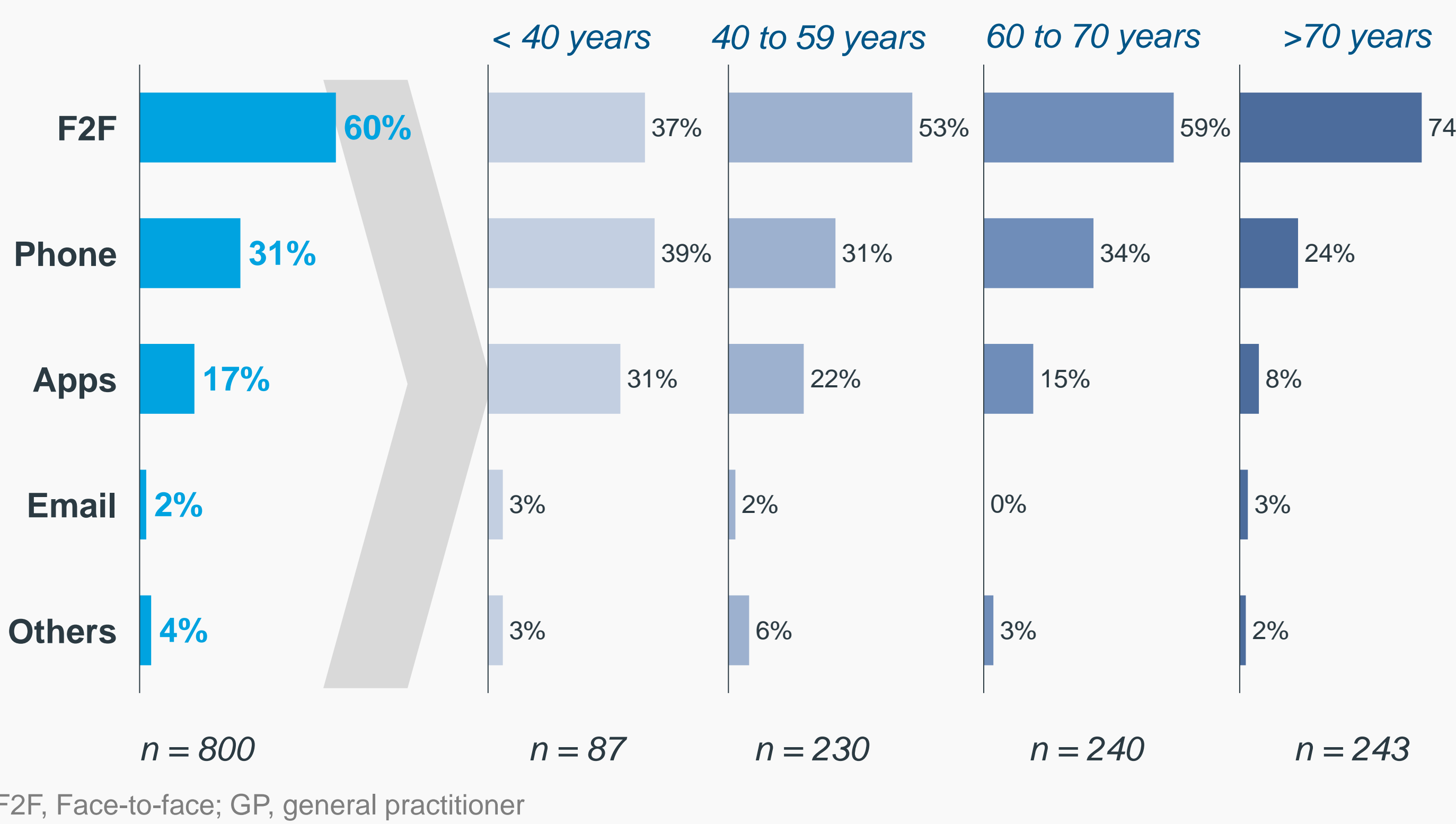
- A survey was conducted on 800 chronic patients in September 2023, using an IQVIA panel of 400 pharmacies spread across Spain. The survey was administered via computer-assisted web interviewing by healthcare professionals dispensing the medication. The sample was composed of patients with the following groups of chronic conditions: diabetes (n=200), COPD and asthma (n=200), risk of thrombosis (n=200), and transplant-related conditions (n=200). Results were stratified by respondent's sex, age and socioeconomic level.

Figure 1. Survey sample



- Most (62.8%) reported general practitioners as their usual point-of-contact, followed by other specialists (30.6%), pharmacists (4.5%), and nurses (2.1%).
- Despite the available digital tools, 60% of the surveyed individuals scheduled their doctor appointments in-person. Fewer than 1 in 5 people scheduled their appointments through a mobile app (17.0%), a percentage that varied between 31.0% in those aged <40 and 8% in those aged >70 years. (Fig 2.)

Figure 2. Tools used to schedule an appointment with the GP (multiple choice)



CONCLUSION

Nearly 1 in 2 chronic patients used alternatives to face-to-face interactions for scheduling some of their GP appointments. An inverse relationship between income level and medicine consumption was noted.

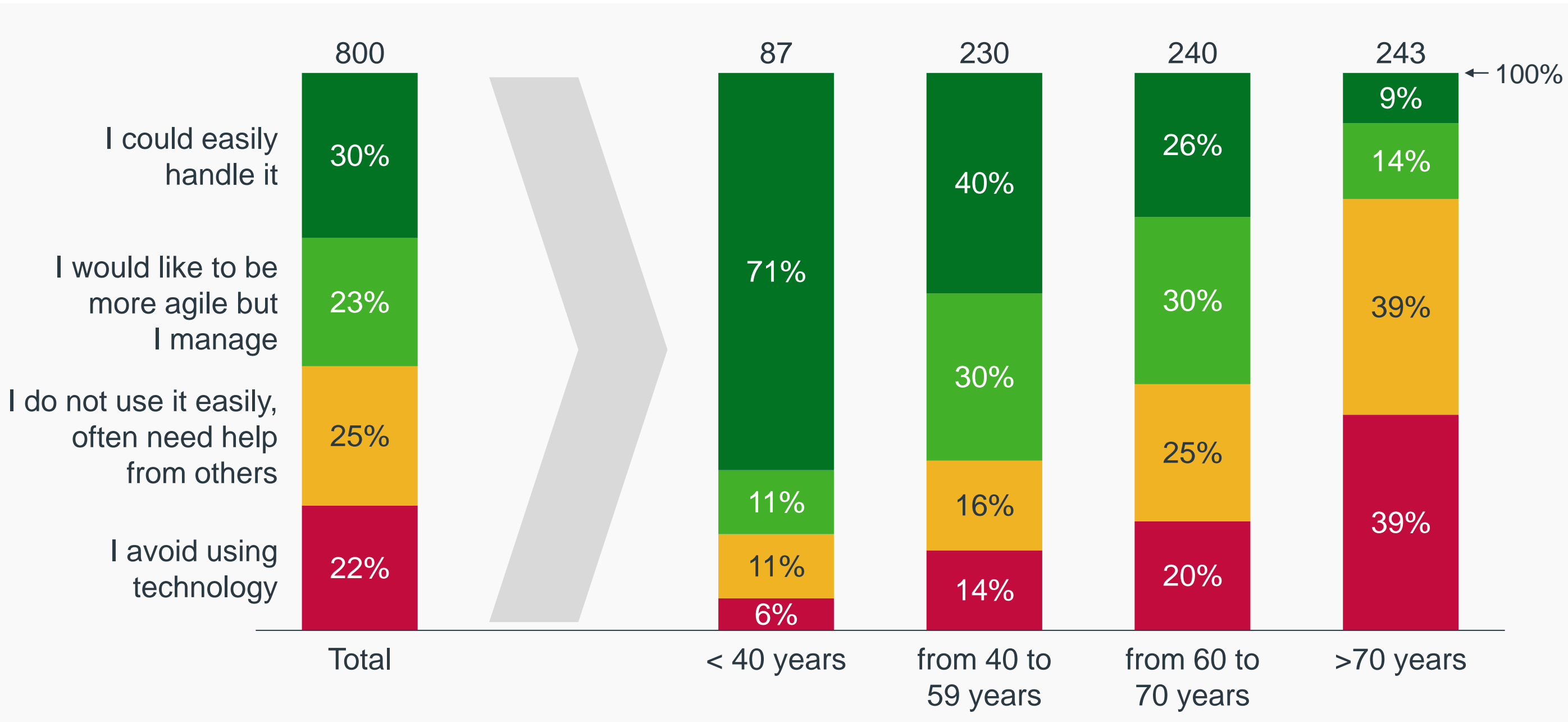
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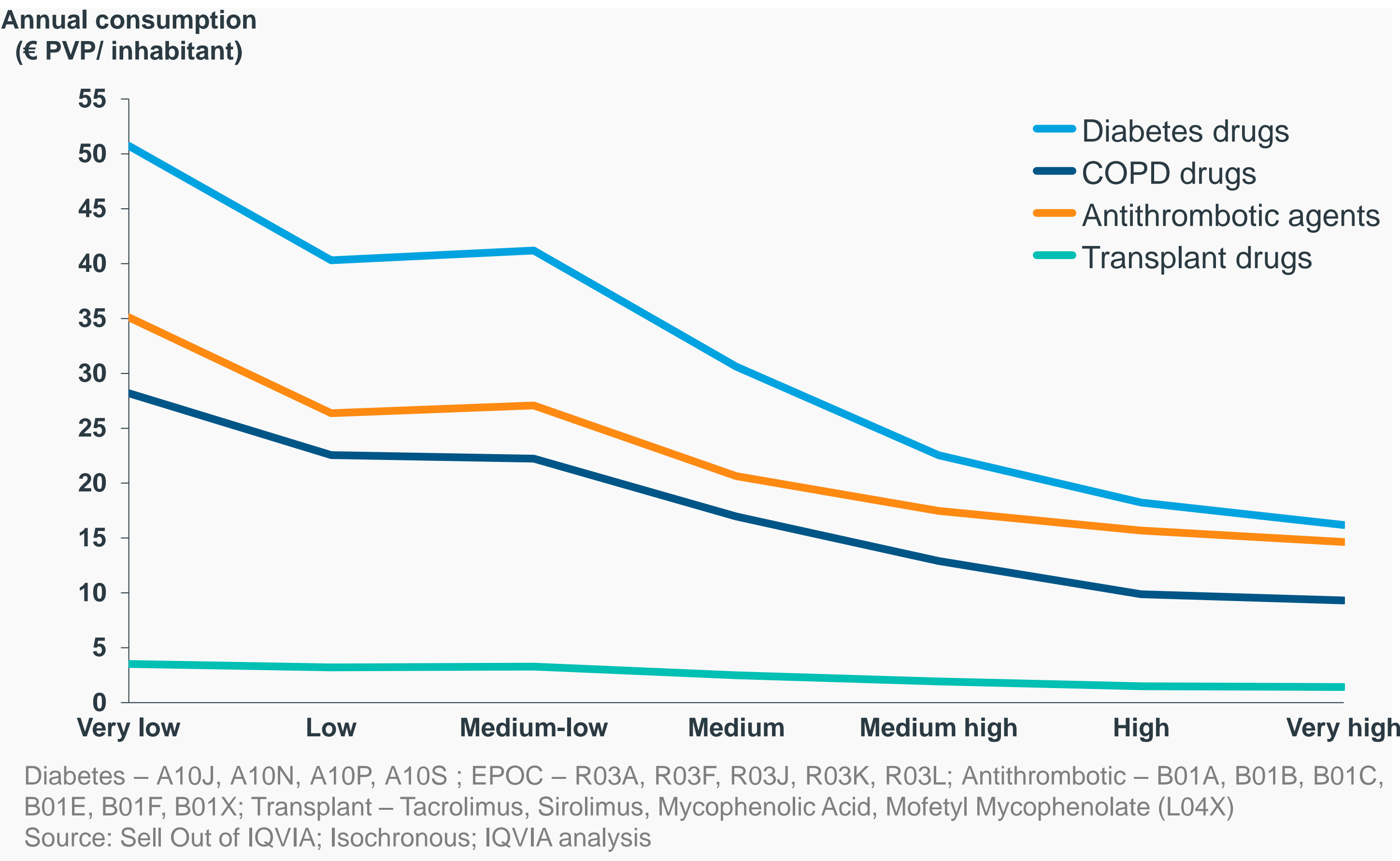
- Regarding digital proficiency, 29.6% stated they could handle technology very well (varying from 9.1% in the oldest and 71.3% in the youngest groups), 23.0% could handle it but would like to be more agile, 25.0% reported difficulties using technology and frequently requiring support from others, and 22.4% avoided using technology whenever possible (Fig.3).

Figure 3. How chronic patients manage with videocalls and apps



- A negative relationship appears to exist between income level and per capita medicine consumption across the four chronic conditions examined. (Fig. 4)

Figure 4 Socioeconomic level – Diabetes, COPD, antithrombotic y drug consumption for transplants (€ / inhabitants)



- Although annual drug consumption decreases across all four pathologies and age groups for higher socioeconomic levels, it is consistently higher in older age groups. (Fig. 5)

Figure 5 Socioeconomic level – Diabetes, COPD, antithrombotic y drug consumption for transplants (€ / inhabitants) for >50 and >65 age groups

