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### BACKGROUND

- The Medication Assistance Fund (MAF) provides financial assistance to eligible patients at public healthcare institutions (PHIs)
- On 1 October 2018, empagliflozin was included on the MAF as a second-line therapy for managing type 2 diabetes mellitus (T2DM)

### **AIM**

To assess the effect of MAF listing on empagliflozin utilisation





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### **METHODS**

- Interrupted time series analysis
- Aggregated drug dispensing data in PHIs from January 2017 to December 2020
- Segmented regression models to assess level change (LC) and trend change (TC) in utilisation volume by WHO defined daily doses (DDDs), before and after subsidy implementation
- Autocorrelation was tested and corrected
- Performed subgroup analyses by patients' subsidy status (subsidised and private) and care setting (hospitals and polyclinics) as well as sensitivity analyses using volume per T2DM patient as the outcome measure



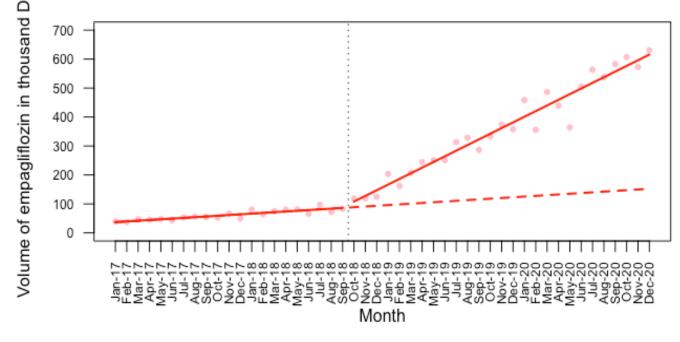


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### **RESULTS**

 Overall utilisation trend (in thousand DDDs per month) increased from 2.5 to 19.5 after subsidy, with a significant TC of 17.1 (95% CI 15.7,18.4)

<u>Figure 1.</u> Monthly trend of overall empagliflozin utilisation from Jan 2017 to Dec 2020, with 1 Oct 2018 as point of intervention





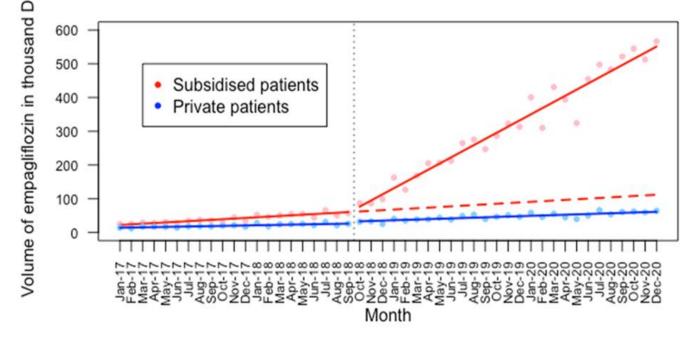


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### **RESULTS**

- Overall utilisation trend (in thousand DDDs per month) increased from 2.5 to 19.5 after subsidy, with a significant TC of 17.1 (95% CI 15.7,18.4)
- Significant TC was observed in subsidised patients [16.3 (95% CI 15.1,17.6)], but not in private patients [0.5 (95% CI -0.04,1.0)]
- Proportion of empagliflozin utilisation in subsidised patients grew from 70% to 90% after subsidy listing

<u>Figure 2.</u> Monthly trend of empagliflozin utilisation in subsidised and private patients from Jan 2017 to Dec 2020, with 1 Oct 2018 as point of intervention







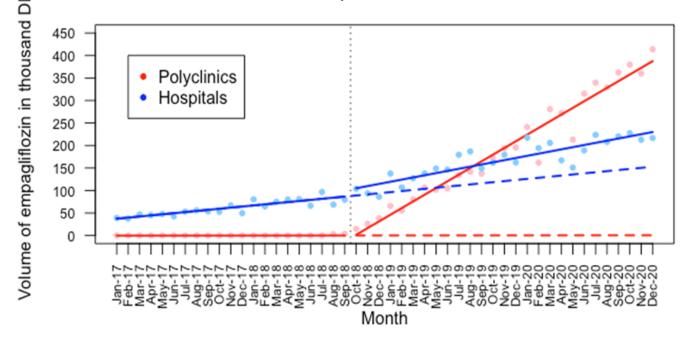
series analysis

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<u>Figure 3.</u> Monthly trend of empagliflozin utilisation in polyclinics and hospitals from Jan 2017 to Dec 2020, with 1 Oct 2018 as point of intervention



- Significant TC was observed in both polyclinics [14.8 (95% CI 10.9,18.7)] and hospitals [2.3 (95% CI 0.7, 4.0)]
- Proportion of empagliflozin utilisation in polyclinics increased from 0.2% to 63% after subsidy listing
- No significant LC was observed in all the models and similar results were found using volume per T2DM patient in the sensitivity analyses

