

THE IMPACT OF COVID-19 ON POPULATION-LEVEL DRUG UTILISATION OF ALENDRONATE IN FIVE EUROPEAN COUNTRIES: AN INTERRUPTED TIME SERIES ANALYSIS

Authors: Eng Hooi Tan¹, Danielle Robinson¹, Annika Jödicke¹, Mees Mosseveld², Katrine Bødkergaard³, Carlen Reyes⁴, Ettore Marconi⁶, Francesco Lapi⁶, Jonas Reinold⁵, Katia Verhamme², Lars Pedersen³, Marcel de Wilde², Marc Far Ruiz⁴, María Aragón⁴, Angela Grelaud⁷, Regis Lassalle⁷, Fabio Riefolo⁸, Natasha Yefimenko⁸, Daniel Prieto-Alhambra^{1,2}, Maria T Sanchez-Santos¹

Affiliations: ¹Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, University of Oxford, Oxford, UK, ²Department of Medical Informatics, Erasmus University Medical Centre, Rotterdam, The Netherlands, ³Department of Clinical Epidemiology, Aarhus University Hospital, Aarhus, Denmark, ⁴Fundació Institut Universitari per a la recerca a l'Atenció Primària de Salut Jordi Gol i Gurina (IDIAPJGol), Barcelona, Spain, ⁵Department of Clinical Epidemiology, Leibniz Institute for Prevention Research and Epidemiology – BIPS, Bremen, Germany, ⁶Health Search, Italian College of General Practitioners and Primary Care, Florence, Italy, ⁷Univ. Bordeaux, INSERM CIC-P1401, Bordeaux PharmacoEpi, Bordeaux, France, ⁸Teamit Institute, Partnerships, Barcelona Health Hub, Barcelona, Spain

COIs: This project was funded by UCB Pharma and Amgen Inc. All other conflicts of individual authors are outside the remit of this work

Contact: cheryl.tan@ndorms.ox.ac.uk

Objective

To quantify the impact of the COVID-19 lockdown on the prescription of new users of alendronate [ALN] in five European countries and six independent databases.

Results

- In Jan 2018, IR of new ALN use (per 10,000 PM) ranged from 1.9 to 3.3, across databases (Figure 1).
- Pre-lockdown, IR of new ALN use was stable in all databases.
- During lockdown, significant monthly reduction of IR, ranging from 0.3 to 0.5 compared to the pre-lockdown period.
- After lifting of restrictions, IR increased at a monthly rate of 0.3 to 0.6 relative to the lockdown period.
- In older age groups, sharper decrease in the IR during the lockdown, particularly in patients >60 years, with a greater reduction in older age groups (ranging from 0.4 to 2.2) (results not shown).
- After the lifting of restrictions, in older age groups, the increasing slope in IR post-COVID-19 restrictions was smaller than the decreasing slope in IR during lockdown.

Methods

Design: Multinational real world cohort study

Setting: 6 independent databases in 5 European countries:

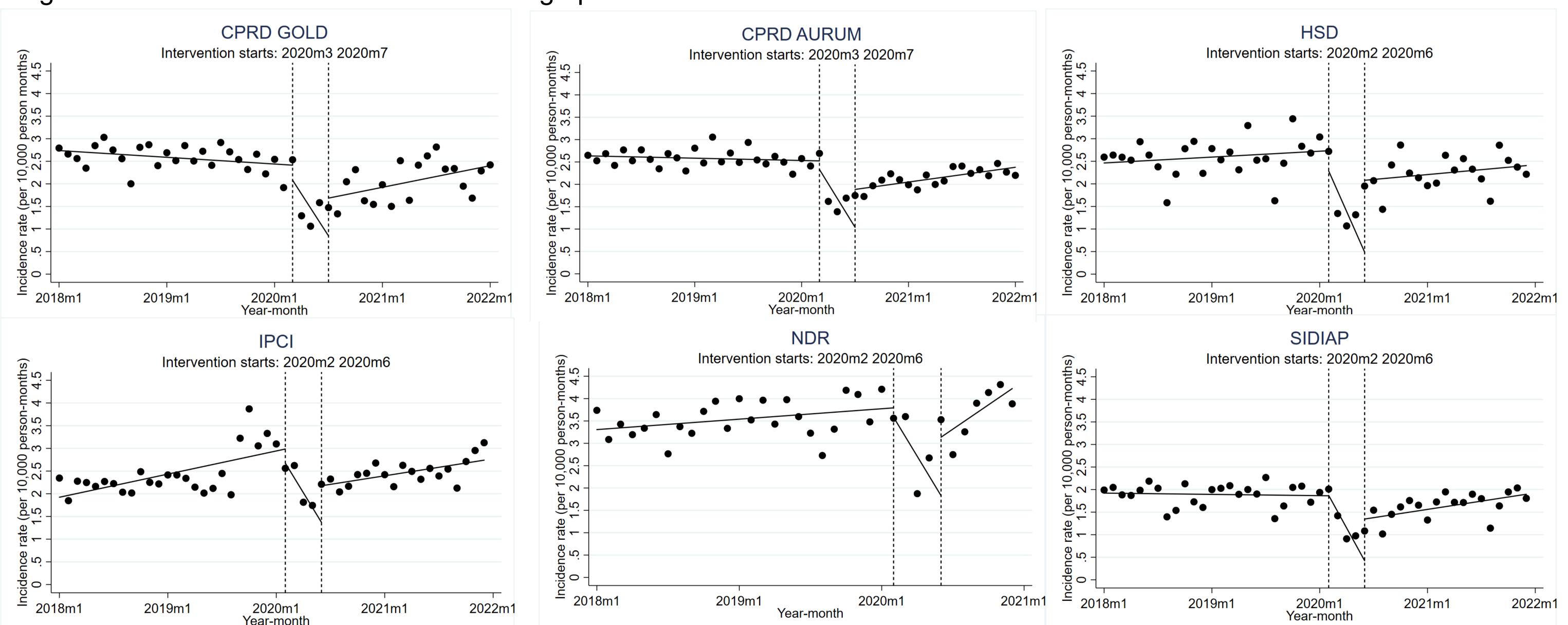
- 1. CPRD (Clinical Practice Research Datalink) GOLD and AURUM, UK
- 2. HSD (Health Search Database), IT
- 3. IPCI (Integrated Primary Care Information Project), NL
- 4. NDR (National Danish Registries), DK
- 5. SIDIAP (Sistema d'Informació per al Desenvolupament de la Investigació en Atenció Primària), ES

Participants: Patients aged ≥ 18 years and registered for ≥ 1 year Dates: 01 Jan 2018 to 31 Dec 2021 (31 Dec 2020 for NDR)

Statistical analysis:

- 1. Monthly incidence rates (IR) = $\frac{No.of\ new\ ALN\ users\ in\ a\ calendar\ month}{Person-months\ of\ patients\ in\ the\ database,}$ who were not users of ALN in the year before the last day of the prior month
- 2. Interrupted time series analysis: Changes in IR before (Jan 2018 Feb 2020), during (Mar May 2020), and after the first lockdown restrictions (Jun 2020 Dec 2020/2021)

Figure 1. Incidence rate of alendronate usage per calendar month for each database



Conclusions

- Following the COVID-19 pandemic lockdown in Europe, initiation of ALN therapy declined in the immediate months.
 - Older patients had lower recovery of ALN treatment initiation compared to the decrease during the lockdown.

















