

CARENITY WEBINAR:

WHAT IS THE IMPACT OF COVID-19 ON CHRONIC PATIENTS?

Carecity Survey - April 2020
Week 1 to Week 4

30 JUNE 2020

Agenda

Webinar Agenda	TIMING
<ul style="list-style-type: none">About Carenity – Michael ChekrounStudy Context and Objectives – Christie RochaMethodology – Christie RochaRespondent Profiles – Christie RochaAnalysis of Results – Christie RochaSummary of Key Findings – Christie RochaQ & A – Michael Chekroun, Tiphaine Levy-Heidmann, Christie Rocha	<ul style="list-style-type: none">5'5'5'5'20'5'15'



About
Carenity



Study Context
&
Objectives



Methodology



Respondent
Profiles



Analysis of
Results



Summary of
Key Findings



Q&A

Speaker Bios



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- *Edhec & London School of Economics*
- **2000-2002: Strategy consultant – Gemini Consulting**
- **2013-2014: Strategy consultant – Kea & Partners**
- **2010-2015: Manager, Corporate Finance, Life Sciences – Ernst & Young**
- **2011: Founded Carenity**



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- *ENSAE ParisTech & HEC Paris*
- **2017: Strategy Consultant – PMP Conseil**
- **2018: Data Scientist – Altice USA**
- **2019: Data Scientist – Carenity**




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- *University of California, San Diego & University of San Francisco, Psychology*
- **2007-2009: Solutions Architect – Patni Life Sciences**
- **2010-2017: Portfolio Director – PAREXEL**
- **2018-2019: Business development – IQVIA**
- **2020: Business Development – Carenity**

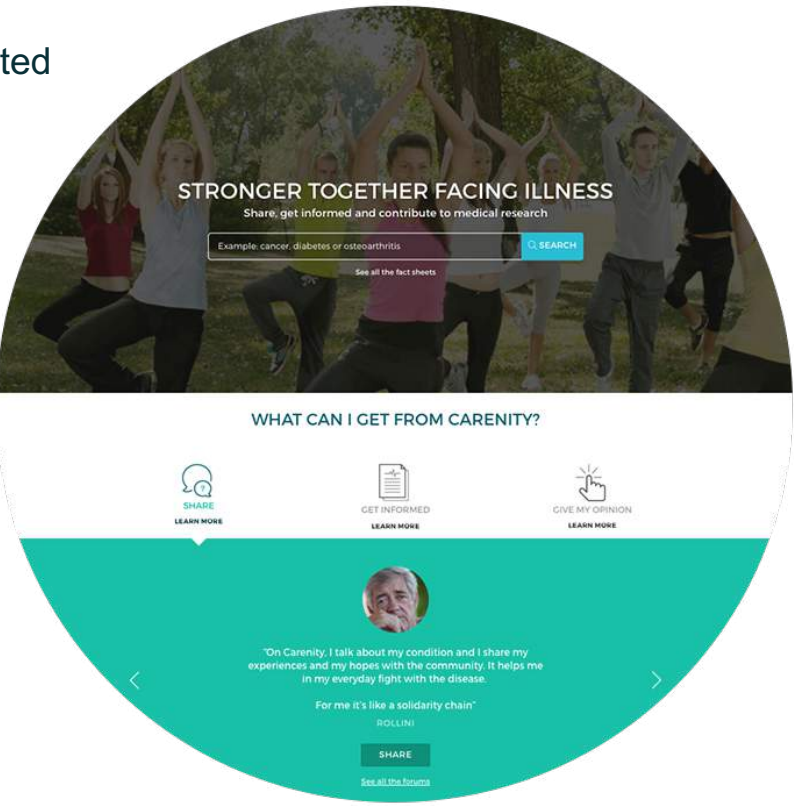
Carenity is a leading digital social platform supporting 400k patients and caregivers in Europe & North America


 Company incorporated in **2011**


 **2** offices worldwide (Paris and Boston)


 **35** passionate full-time employees

 **100+** paying life science customers



 **5** languages supported for Europe and North America

 **400,000+** members (patients and caregivers)

 **1,200+** chronic diseases and other health ailments

 **500+** patient insights projects and publications

Our Mission: Engage online patient communities to uncover real-world insights and advance medical research

A social & information platform for patients



Empower Patients



Solutions



A real-world data platform For the Life Science industry



Guide Healthcare Industry

Carenity brings value to its customers at every stage of a drug’s life cycle

	CLINICAL	ACCESS	COMMERCIAL
Scope	<ul style="list-style-type: none">• New product development• Clinical Trial Strategy	<ul style="list-style-type: none">• New product launch• Market Access strategy	<ul style="list-style-type: none">• Drug monitoring in real-life• Customer strategy
Customer Benefits	<ul style="list-style-type: none">• R&D savings with faster patient enrolment & higher retention• Improved target product profiling• End users involved in the design of future drugs	<ul style="list-style-type: none">• Faster time to market (marketing authorizations)• Stronger Pricing & Reimbursement dossiers• Publications with increased visibility in medical congresses and journals	<ul style="list-style-type: none">• Market differentiation• Safety and compliance data• Better interaction with medical community and patient associations• Identify and develop patient-centric solutions

Our industry and institutional partners

Patient Insights Benefits

Benefits of patient insights

- Disease understanding
- Patient's unmet needs
- New product assessment
- Patient profile segmentation
- Patient journey / care pathway mapping
- Drug / treatment experience / treatment adherence
- Side effects management
- Sources of information found by patients
- Assessment of patient solutions

Get the actual opinion of patients to build your business needs in an ongoing and scalable way



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Q&A

Study Context and Objectives

Context


Question: Will chronic patients be the collateral victims of the COVID-19 pandemic?

Insufficient access to care for chronic patients

Real-time measure of COVID-19 impact on access to care

Results are from across Europe and the United States

Objectives

 Track the impact of COVID-19 on chronic patients regarding their access to physicians and treatment.

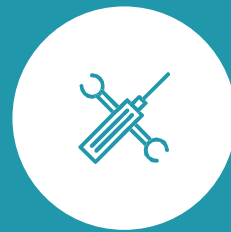
 Understand the sources of information on COVID-19 for chronic patients and their needs for specific information and support.



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Survey:







- Online survey on the Carenity platform
- Invitations and reminders sent via email
- Questionnaire designed by Carenity with the support of medical experts

Duration of fieldwork:

- March 19th, 2020 to April 19th, 2020 (30 days)

Target and inclusion criteria:

- Adults living in France, the UK, Germany, Italy, Spain or the US
- Members of the Carenity platforms

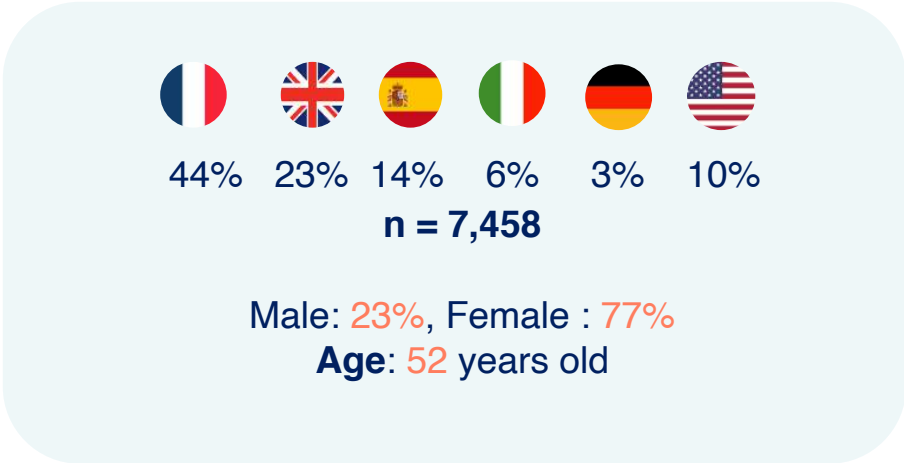
	Global						
All respondents	n = 7,458	n = 3,311	n = 1,699	n = 1,049	n = 431	n = 210	n = 758
Patients	n = 6,780	n = 3,081	n = 1,481	n = 946	n = 380	n = 198	n = 694
Other respondents	n = 678	n = 230	n = 218	n = 103	n = 51	n = 12	n = 64

Methodology

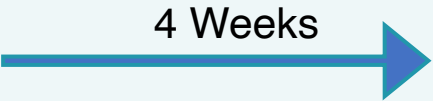
Key Topics of the questionnaire

- Respondent’s profile
- Impact on medical consultation
- Impact on treatment intake
- Impact on stress and isolation
- Main concerns about the outbreak
- Sources of information
- Satisfaction with information and needs

Summary of Patient Population



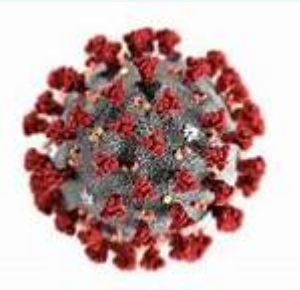
Timeline



Chronic Illness



Pandemic Coronavirus (COVID-19)





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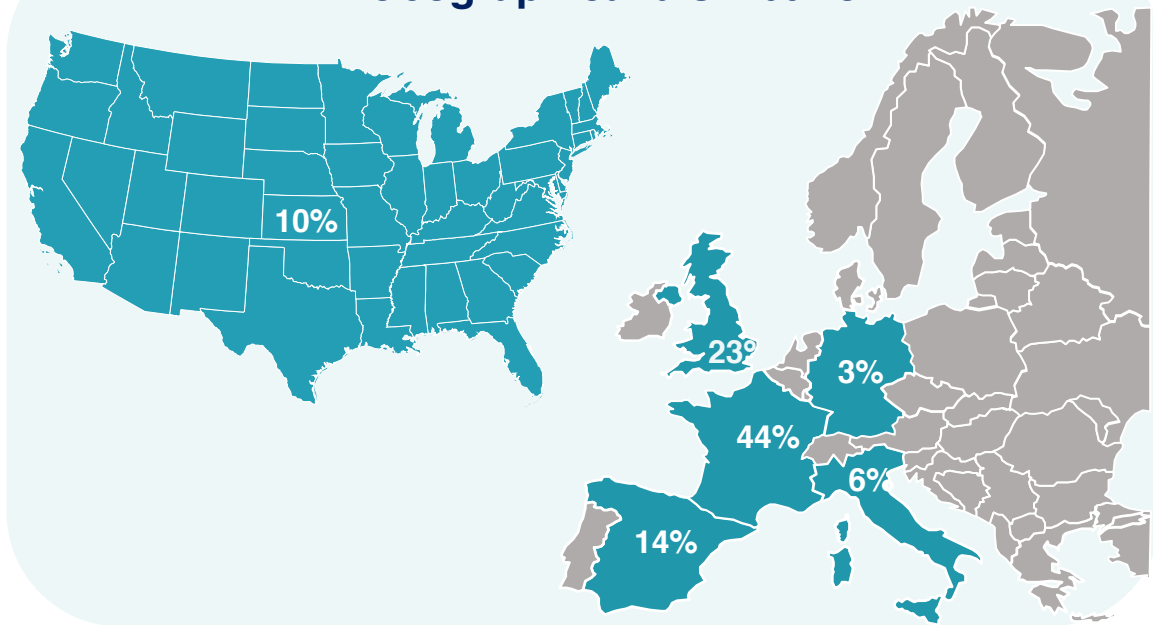
Q&A

Sociodemographic Profile

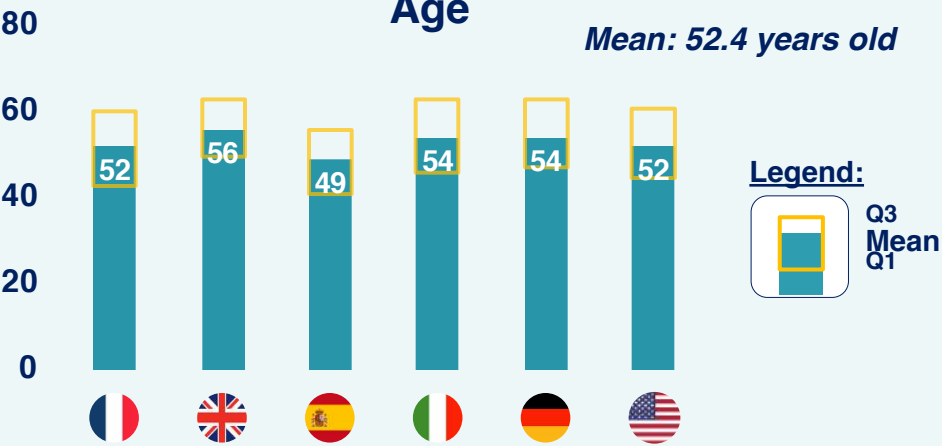
Gender



Geographical distribution



Age

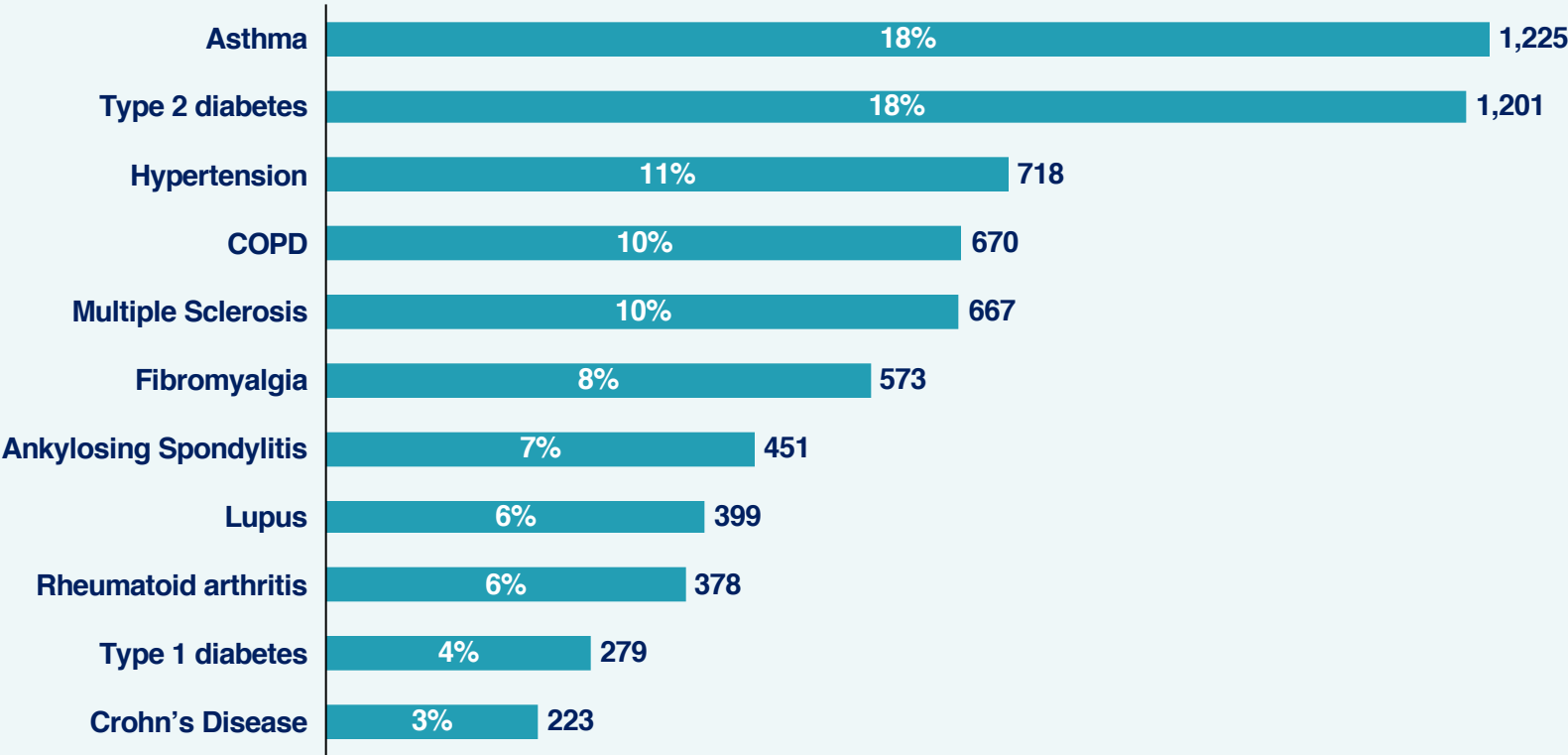


51% were professionally impacted
(short-time working, homeworking, sick leave, paid or unpaid leave...)

Base: 7,458 respondents

Respondents' Chronic Illnesses

Most frequent chronic conditions



Number of chronic conditions per patient



Base: 6,780 respondents with a chronic condition



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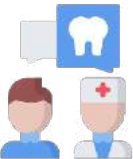


Summary of
Key Findings

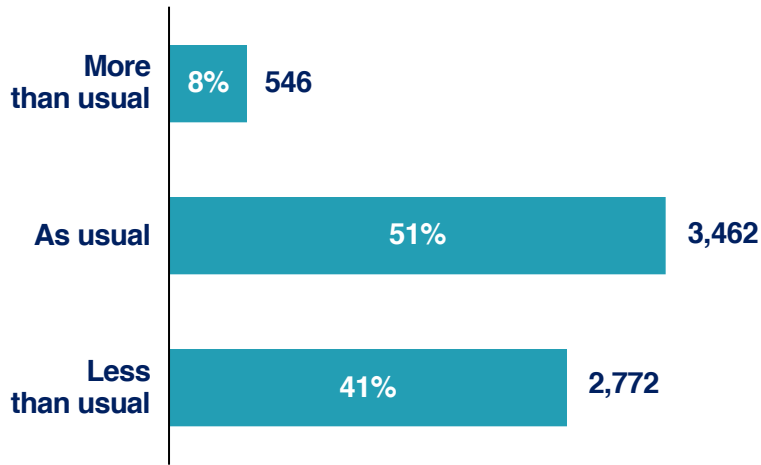


Q&A

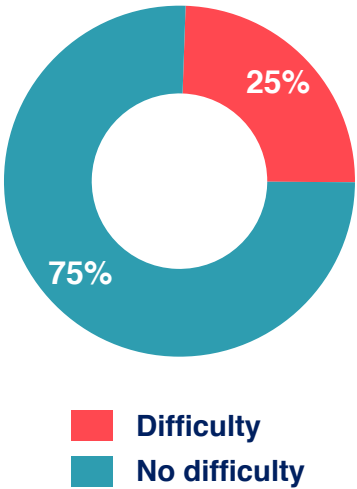
Impact on Medical Consultation in the first 4 weeks of the Pandemic



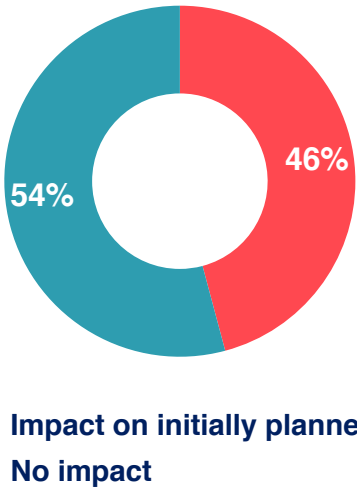
Frequency of Consultation



Difficulty in finding an available doctor



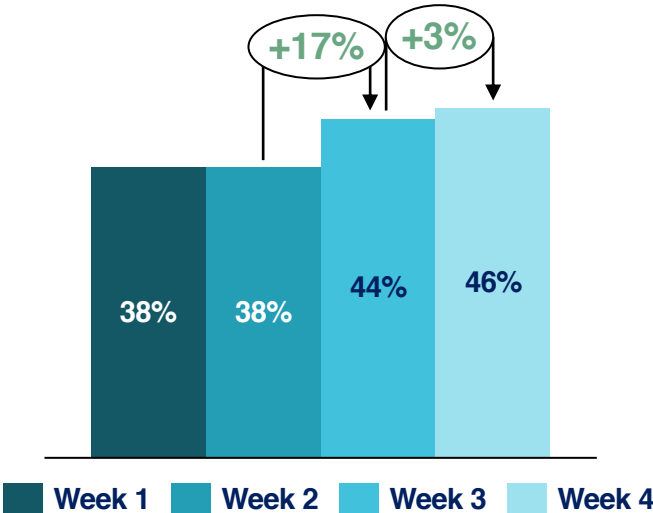
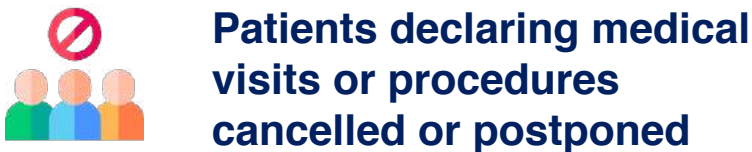
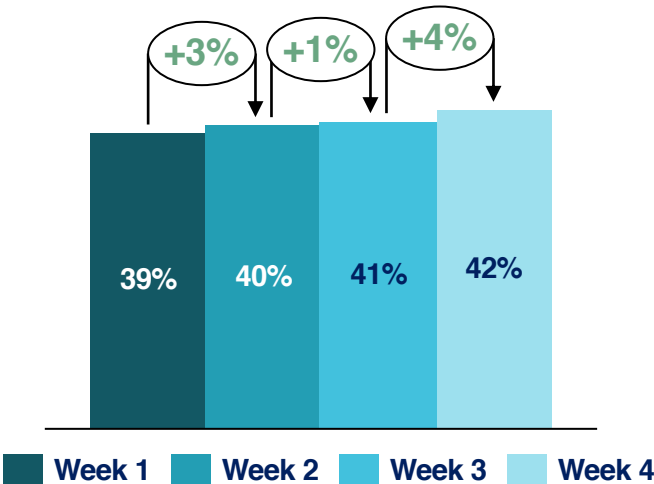
Medical visits or surgeries canceled or postponed



3% of respondents have been tested for COVID-19.

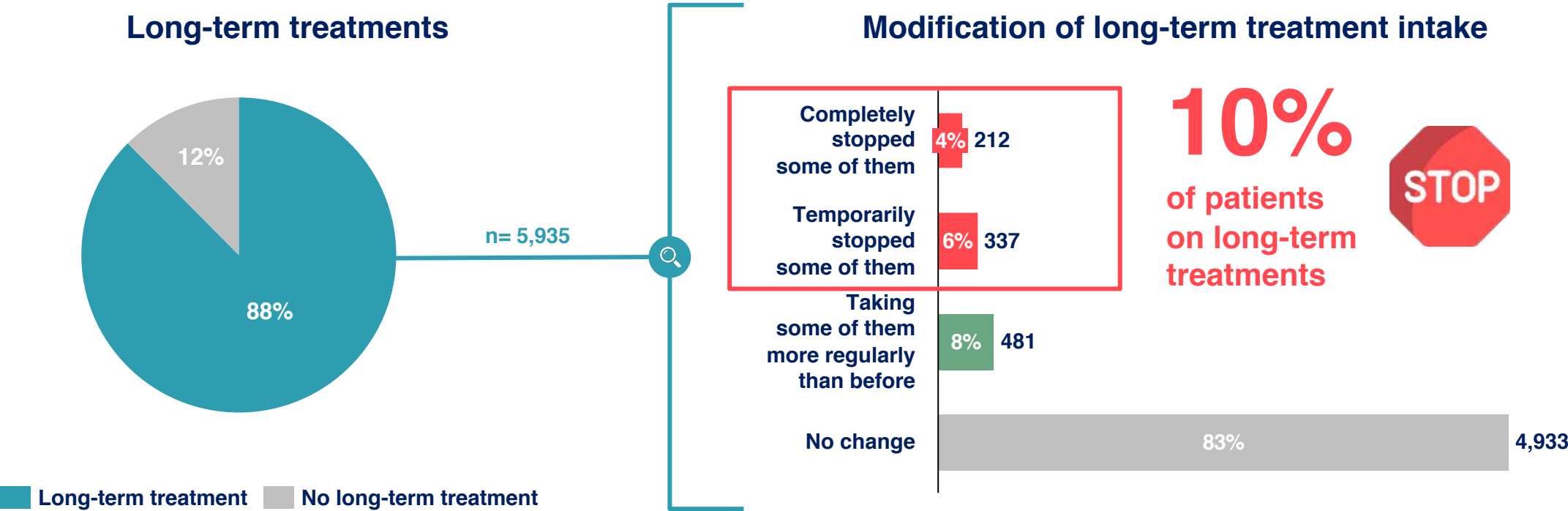
Base: 6,780 respondents with a chronic condition

Impact on Medical Consultation in the first 4 weeks of the Pandemic



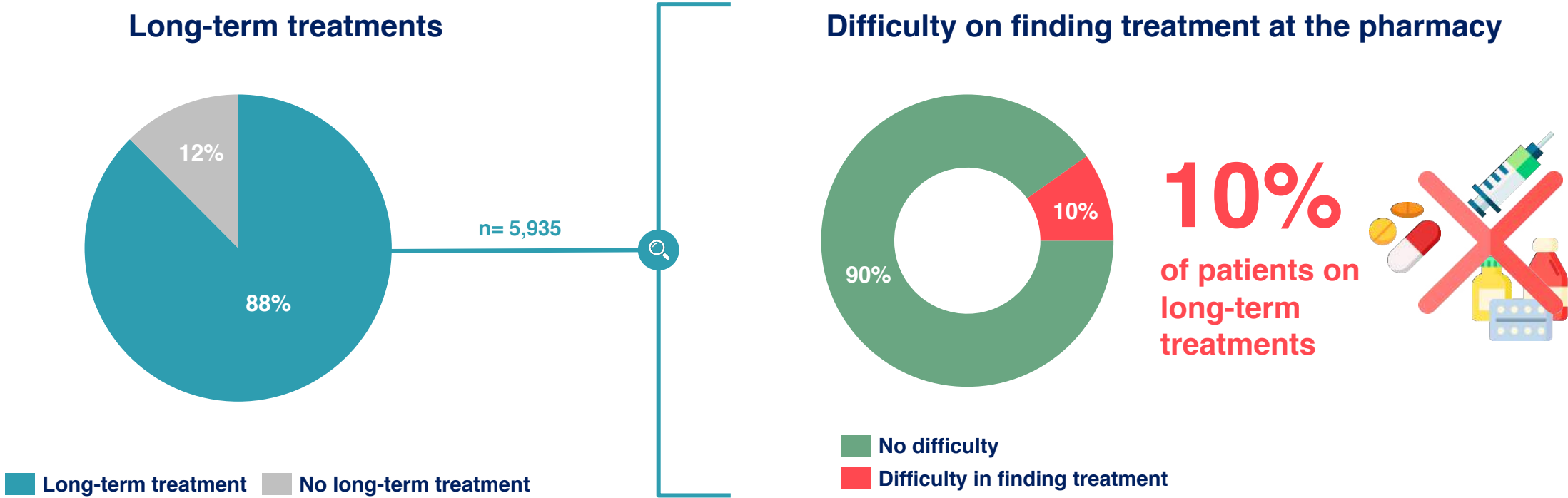
Base: 6,780 respondents with a chronic condition

Impact on Treatment Intake



Base: 6,780 respondents with a chronic condition

Impact on Treatment Access

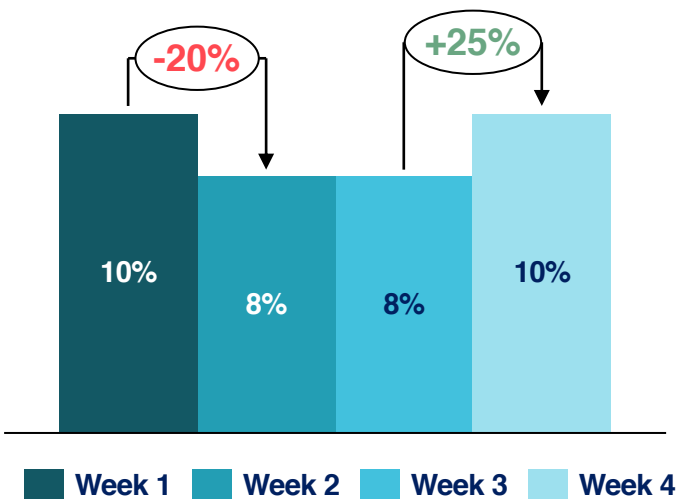


Base: 6,780 respondents with a chronic condition

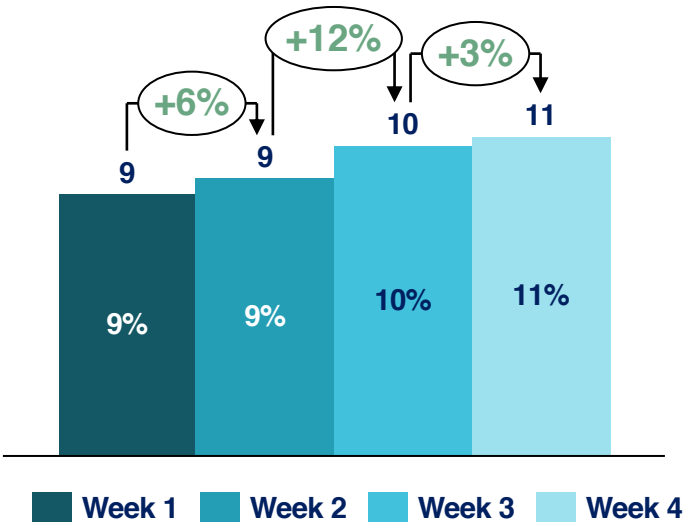
Impact on Treatment



Patients reporting a discontinuation of their long-term treatment

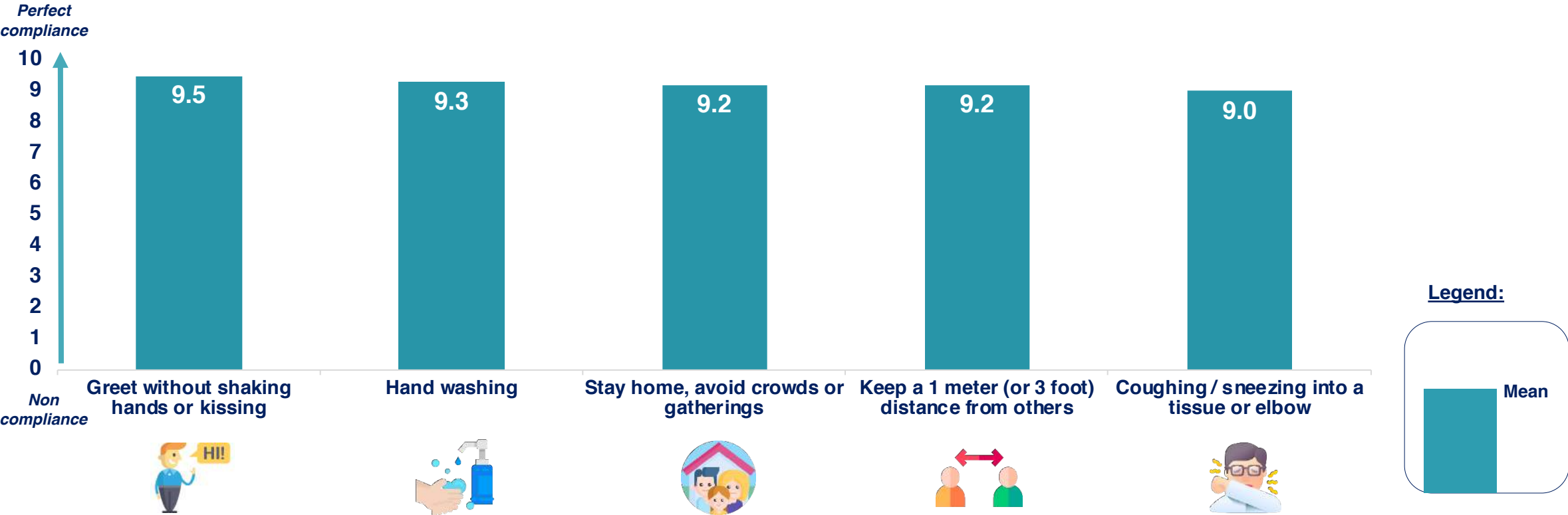


Patients declaring difficulties in finding their treatment at the pharmacy



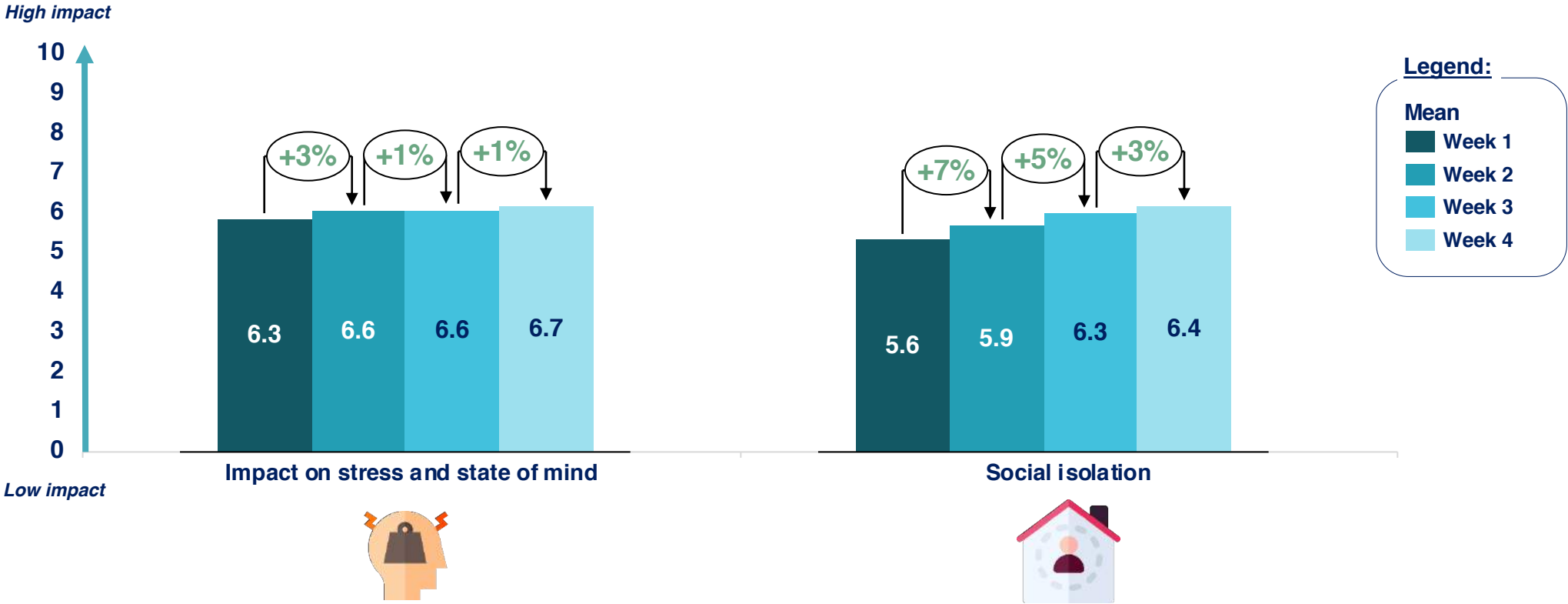
Base: 6,780 respondents with a chronic condition

Following of Health Authority Recommendations



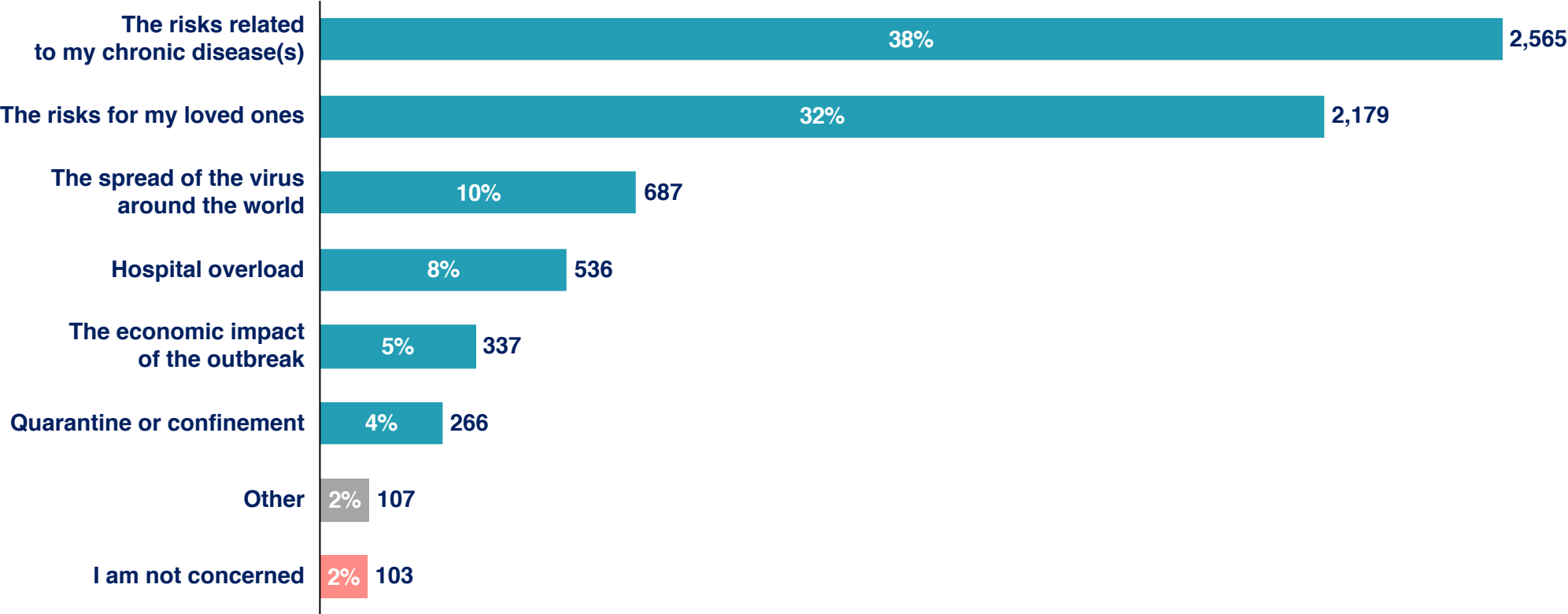
Base: 7,458 respondents

Social and Psychological Impact Since the Start of the Outbreak



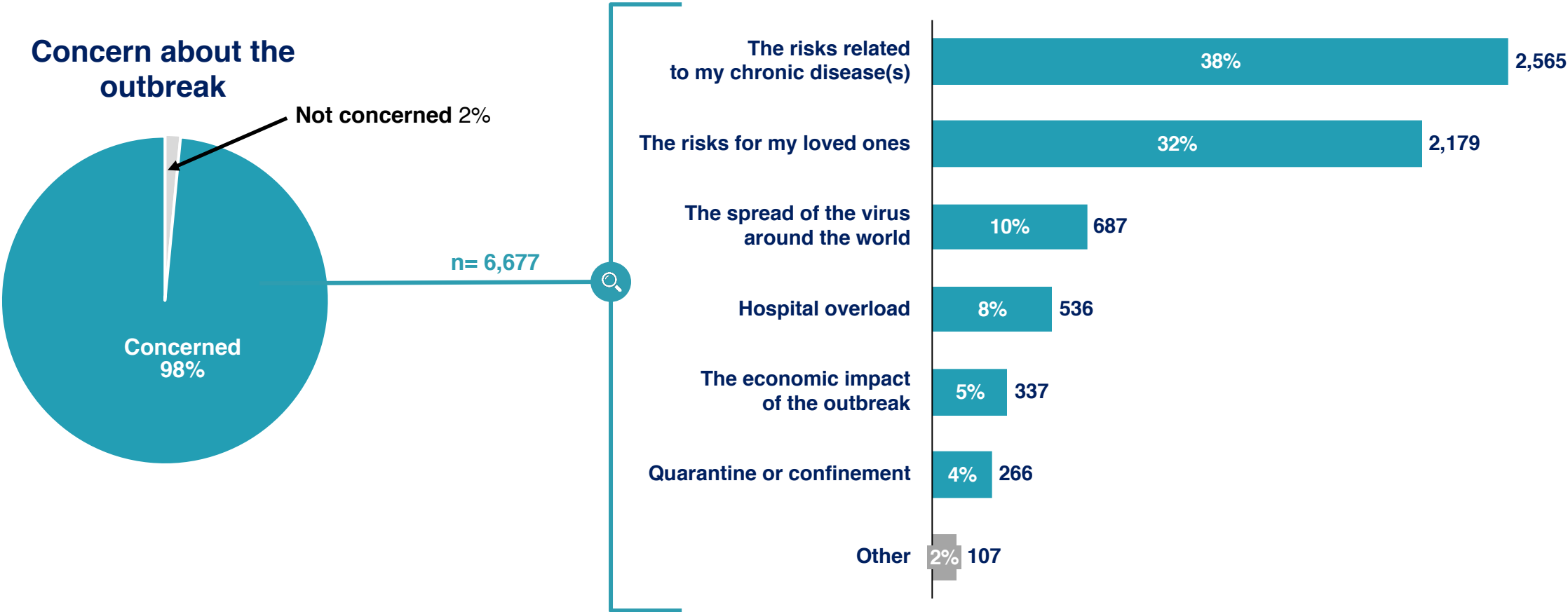
Base: 6,780 respondents with a chronic condition

Main Concerns about the Outbreak



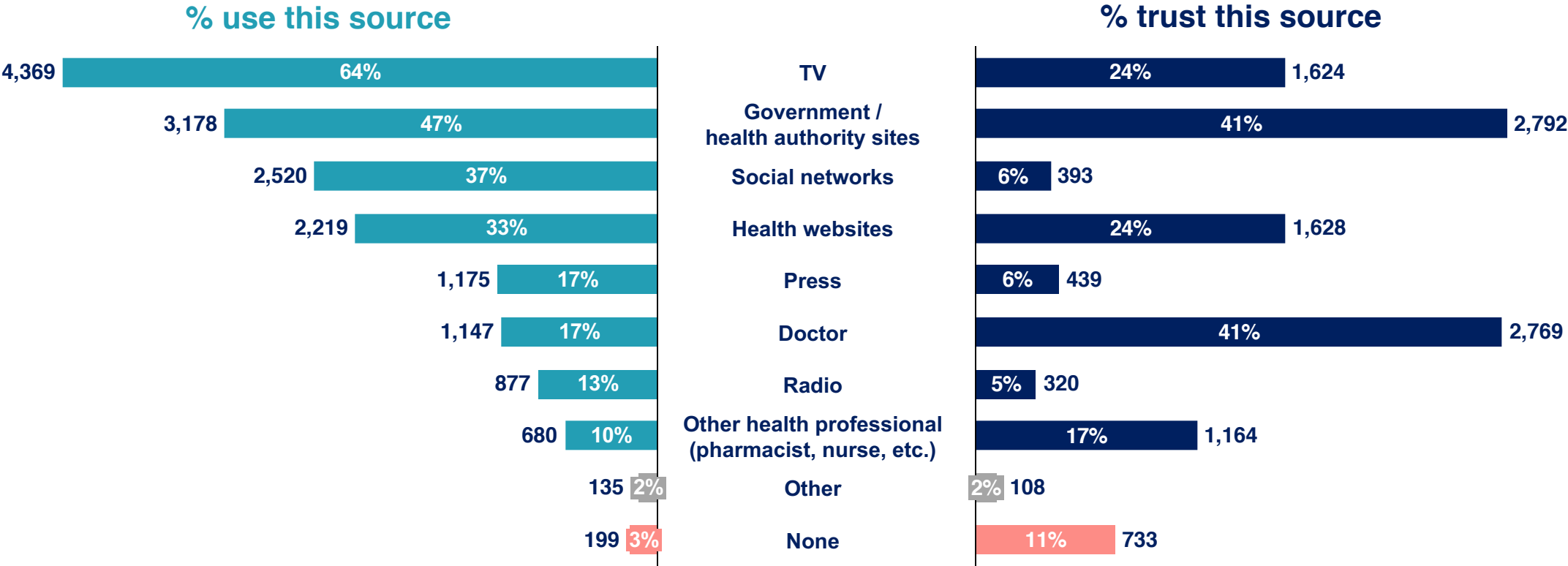
Base: 6,780 respondents with a chronic condition

Main Concerns about the Outbreak



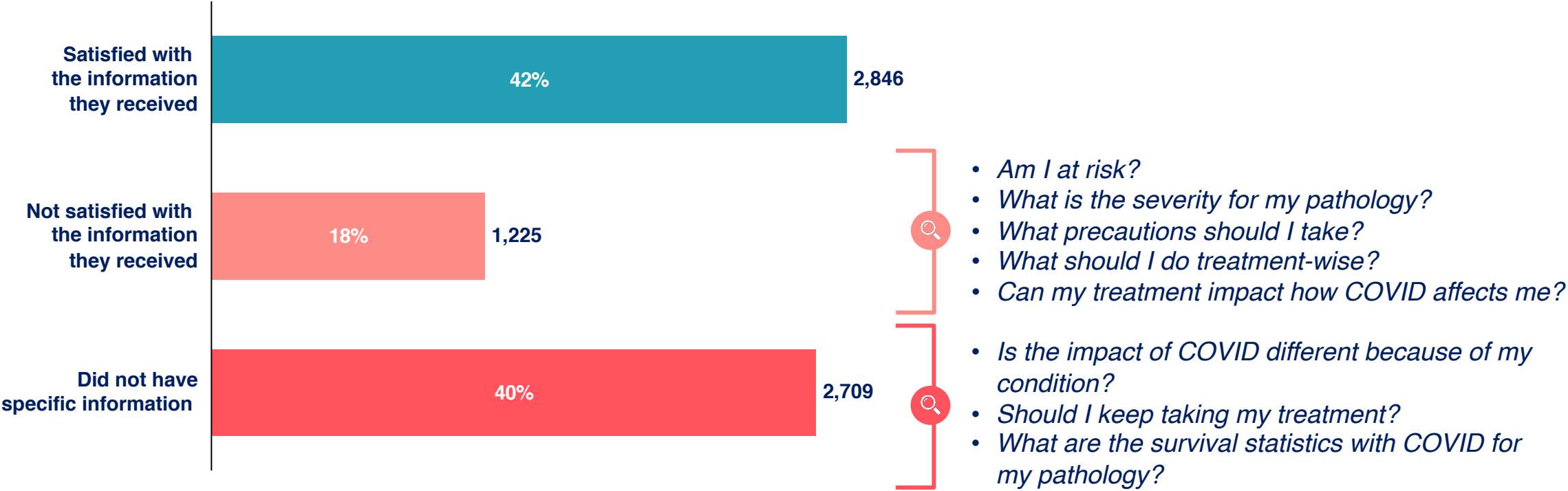
Base: 6,780 respondents with a chronic condition

Sources of Information



Base: 6,780 respondents with a chronic condition

Patient Satisfaction with Information



Base: 6,780 respondents with a chronic condition

Specific Information Patients Would Have Expected

Q24. In this pandemic situation, what information specific to your chronic disease would you like to have ? (Verbatim)



Woman, 52 y/o

“How does the medication I take effect my immune system?”



Man, 54 y/o

“Am I at risk of dying because of my illnesses if I get COVID-19?”



Woman, 48 y/o

“If I'm in the high risk category and can my employer make me work.”



Woman, 47 y/o

“More precise and clear direction on how to keep myself safe ”



Woman, 61 y/o

“Having so many Chronic diseases, would the hospital still allow me access to a ventilator if I need one?”



Woman, 53y/o

“Everybody advises something different and nobody will put it in writing.”



Woman, 53 y/o

“Why the long term ill health condition is not enough to considered that I’m high risk? My employer wants a document that saying I’m eligible for COVID-19 isolation high risk.”



Man, 74 y/o

“Am I a vulnerable adult because of my conditions?”



Woman, 59 y/o

“Will I be given the same treatment as a healthy person?”



Man, 65 y/o

“I would like to find information on possible support since going out is not recommended.”



Woman, 71 y/o

“Why stopping my Infusions has happened, as this leads to me being in constant pain?”



Man, 67 y/o

“What are the possible complications due to my disease?”

Base: 6,780 respondents with a chronic condition



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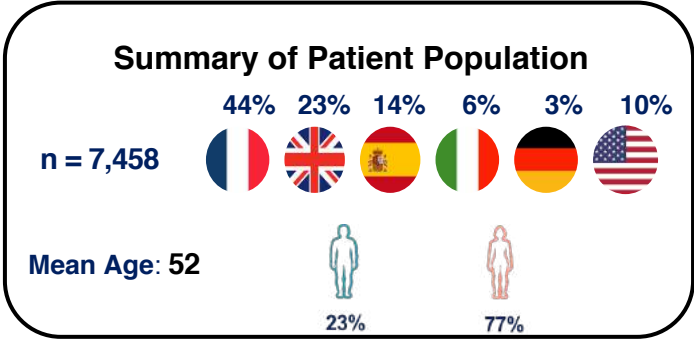
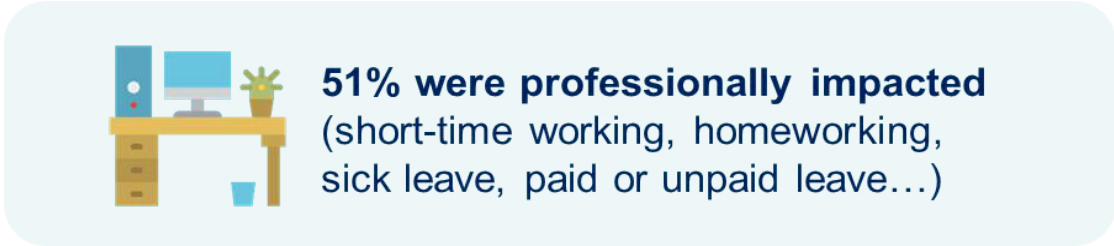
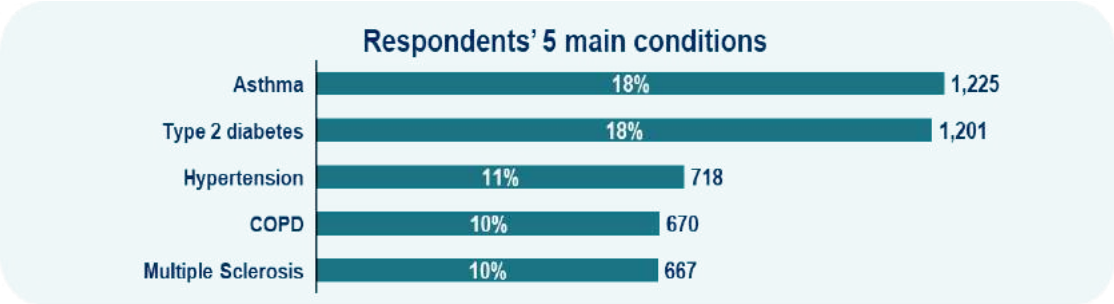
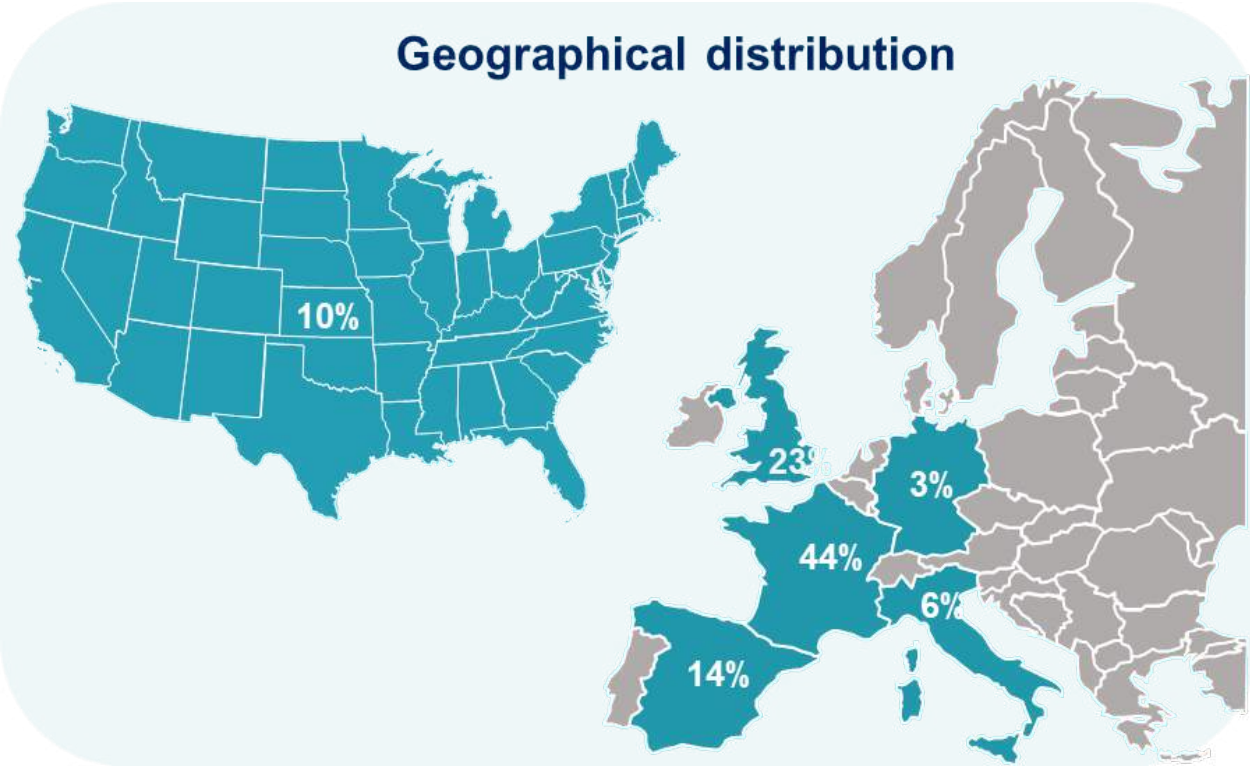


Summary of
Key Findings



Q&A

Key Findings



Key Findings

Impact on medical consultation

49% of respondents changed the frequency of their visits to the doctor and **41%** see doctors less than usual (week 1: **39%** VS week 4: **42%**).

25% of respondents say it is **difficult to find an available doctor**.

46% of respondents had their long-planned **consultations** or **surgeries cancelled** or **rescheduled** (week 1: **38%** VS week 4: **46%**).

Only 3% of respondents have been **tested for COVID-19**.

Information

There is a huge gap between **used** and **trusted** sources of information (e.g. **TV 64%** used, **24%** trusted, **doctor 17%** used, **41%** trusted).

58% of chronic patients are **not satisfied with the information they received** regarding their condition.

They expect information about the **specific risks they face**, as well as **medical information** on their treatments and how to proceed.

Impact on treatment intake

18% of chronic patients have **changed** the way they take their treatment (week 1: **14%** VS week 4: **21%**). **10%** **stopped taking it**.

10% of chronic patients cannot **find their treatment** in pharmacies. (week 1: **9%** VS week 4: **11%**).

Impact on stress and isolation

Most respondents feel more -

Stressed (6.5 out of 10): week 1: **6.3** VS week 4: **6.7**

Socially Isolated (5.9 out of 10): week 1: **5.6** VS week 4: **6.4**

38% are concerned about the **risks linked to their chronic disease**.

The Carenity COVID-19 Study Continues...

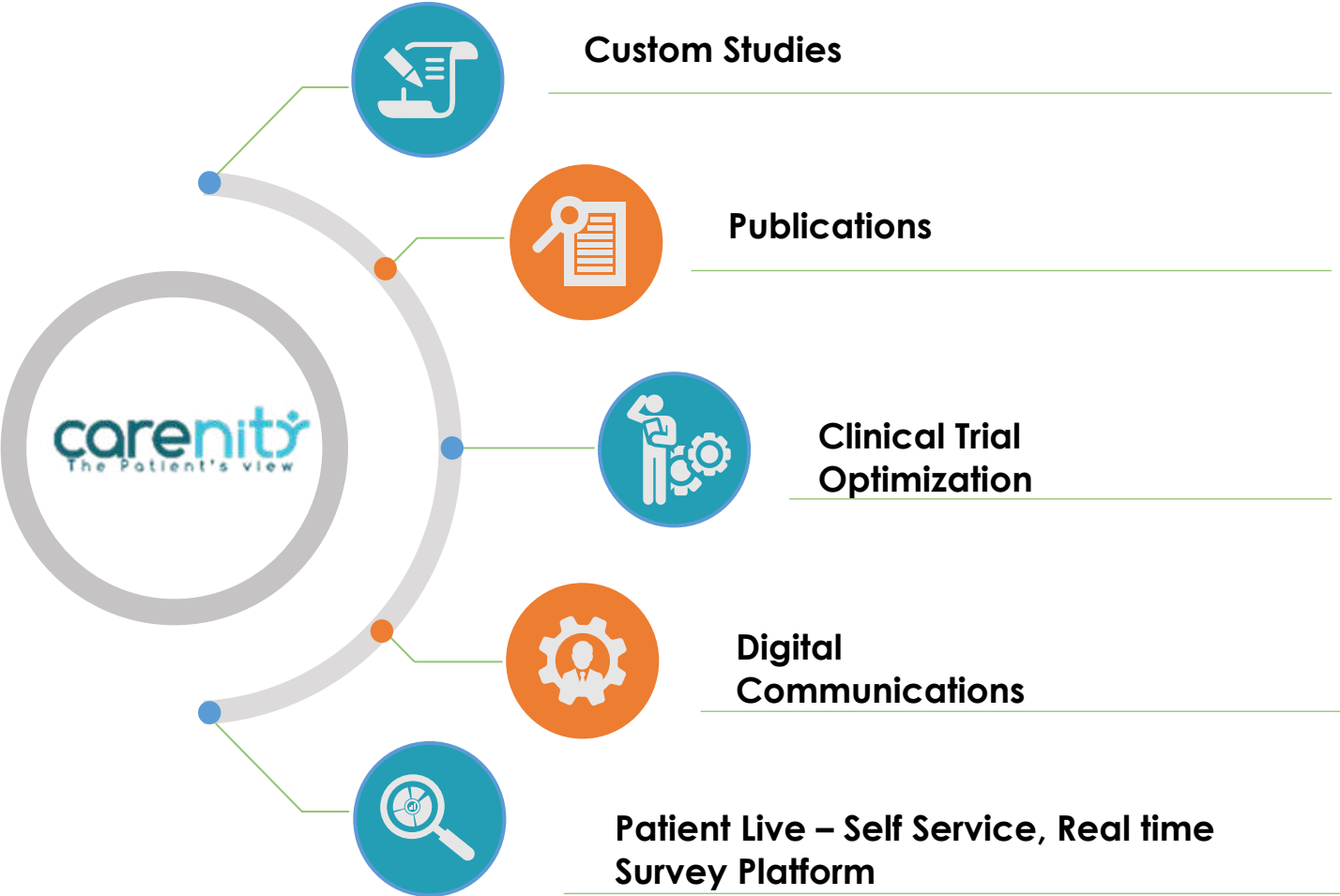
Wave 2

- The study continues with additional results forthcoming
- Carenity will continue to share the results
- Please contact us for additional information about this study or any of our services

Customizable Studies

- | | | |
|-----------------------|-----------------|-------------------|
| • Therapeutic area | • Gender | • Custom Analysis |
| • Country | • Age | • Timeline |
| • Treatment Adherence | • Stress Levels | • Therapy Type |

The Art of the Possible – How You Can Benefit from Carenity’s Digital Social Platform



Engage online patient communities to uncover real-world insights and advance medical research

Update on Carenity COVID-19 Study Wave 2

We have already exceeded 1000 respondents across all countries and these results will be available approximately the end of August/early September

We will continue to ask the same questions as in Wave 1 in order to measure the evolution and capture any changes post lockdown. These questions include physician and treatment availability, stress and isolation impact and concerns over specific information seeking.

In addition we have added the following inquiries:

- Have chronic patients' access to care gone back to normal? Have they been able to reschedule appointments and/or procedures and surgeries?
- Have they used telehealth consultations? If so, what is their satisfaction level? Do they plan to keep using these consultations?
- What has been the global impact of lockdown on their health and chronic condition?
- Have they resumed certain “normal” activities? Such as participating in social activities? Physical activities? Going to their place of work? Going to public places?



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- **2008-2015: Sales & Marketing / Commercial / Market Access– Baxter**
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- **2020: Business Developer Director– Carenity**



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