

Survey of U.K. Physicians Reveals Concerns with Government Interference in Health Care

A survey of physicians in the United Kingdom who treat complex conditions like cancer, HIV, rheumatoid arthritis and diabetes, shines a light on some of the problems that arise when governments interfere in health care, limiting choice and hindering doctors' ability to provide the best possible care for their patients. Findings from this survey demonstrate why the U.S. government should not import other countries' health care policies. Four topics were considered in the survey: patient access to treatments, government influence in the practice of medicine, physicians' flexibility and autonomy, and investment in research and development.

U.K. physicians say their single-payer health care system prioritizes cutting costs over ensuring patients have access to the best possible health care.

Patient Access to Innovative Treatments

Limited access to innovative treatments leaves many patients in the United Kingdom with few options, resulting in poorer health outcomes. For example, between 2010 and 2014, a U.K. patient with brain cancer was nearly 40% less likely to survive five years after diagnosis than a patient in the United States.¹



Half of U.K. physicians have had multiple patients travel abroad to gain access to a treatment.



The majority of U.K. physicians agree their patients would benefit from access to more innovative medicines.

"It is much more challenging in the [U.K.] compared with other health care systems... overall, we have less access." ~U.K. Oncologist

The Influence of Government in the Practice of Medicine

As part of a single-payer system, the U.K. government plays a significant role in determining the course of a patient's health care.

66% of U.K. physicians say the

government focuses too much on cost control, at the expense of patient access.



3 out of 4 U.K. physicians say their government **rations health care** to control spending. 79% of U.K. physicians say the government has equal or greater influence over health care decisions compared to providers and patients.

"We as physicians, our hands are so tied, we can recommend... but yes, it is very much up to the government in terms of what [patients] can get." -U.K. Oncologist



Physicians' Flexibility and Autonomy

The government imposes strict regulations and guidelines on physician prescribing and rations patients' access to care, including innovative medicines.



Most U.K. physicians say guidelines and regulations sometimes, often, or always prevent them from providing their patients with the best treatment.

of U.K. physicians say health care decisions are completely directed by providers and patients.

"It is inflexible, so if you do not meet the rigid guidelines for treatment, then you cannot have treatment." ~U.K. Rheumatologist

Research and Development (R&D)

The U.K. must improve its environment for research and development to ensure that it can remain globally competitive.

93%

of U.K. physicians believe their government should increase investment in medicine R&D.



3 out of 4 U.K. physicians say their country trails the United States in biomedical R&D.

"...in the U.K., ever so slowly, research is dying... This country was a country of excellence for a hundred years. And now, we are getting bad not because we are poor [but] because of a lack of insight." ~U.K. Endocrinologist

Survey Methodology: Health Strategies Insights by EVERSANA conducted a 20-minute online survey with 100 U.K. physicians, fielded 11/11-12/03/2019, and 30-minute telephone interviews with 6 U.K. physicians between 9/19-9/20/2019. Survey targeted clinical specialists (hematologists, oncologists, immunologists, neurologists, rheumatologists, and endocrinologists) with at least 5 years of clinical practice in the U.K., who treat a minimum number of patients per month based on their specialty, are affiliated with an academic institution or are involved in clinical trials as part of their practice, are up-to-date on the latest advances in their specialty, and are knowledgeable about the U.K. process for assessing cost effectiveness, pricing and reimbursement process for new drugs.

Sources:

 ^{26.3%} in U.K. vs. 36.5% in U.S.; C Allemani, et al. "Global surveillance of trends in cancer survival 2000-14 (CONCORD-3): analysis of individual records for 37 513 025 patients diagnosed with one of 18 cancers from 322 population-based registries in 71 countries," The Lancet, 2018. 391(10125): 1023-1075.