



Self-Care SOCIO-ECONOMIC RESEARCH

Regional Summaries: East Asia and Pacific



INTRODUCTION

East Asia and Pacific is a diverse region encompassing developing economies such as Indonesia and the Philippines as well as more developed markets like China, South Korea, and Australia. Self-care is a fundamental healthcare practice that continues to play an important role in healthcare systems with practices such as good nutrition, hygiene, exercise, and self-medication all emphasized as self-care practices.

Traditional herbal medicines are prevalent as a form of self-care in Korea, Japan and China and can be accessed as either for over-the-counter (OTC) medication or prescription.

Rx to OTC switches and OTC expansion are key concepts of self-care in this region to improve the sustainability of healthcare systems e.g., governments in Japan, Korea and Hong Kong investigate products to be switched and improve access through additional sale points.

In addition, a study conducted by the *Journal of Japan Hospital Association* estimating the impact of the new income deduction system for OTC drug expenses found that tax revisions could create a system that can decrease the national medical expenses and alleviate crowding in hospitals and pharmacies. These tax revisions would help in individual health promotion and disease prevention. More precisely, the income deduction could be used for specific health checkups including cancer screening and vaccinations [1].







REGIONAL PERSPECTIVES ON SELF-CARE PRACTICES

- Self-care is a fundamental healthcare practice that continues to play an important role in healthcare systems in East Asia and Pacific region. Practices such as good nutrition, hygiene, exercise, and self-medication are all emphasized as self-care practices.
- Traditional herbal medicines are prevalent as a form of self-care in Korea, Japan and China and can be accessed as either OTC medication or prescription. It is reported that 40% of all delivered healthcare in China is in this form. In Korea, 69% of the population have previously used traditional medication [2]. Other forms of traditional self-care concepts in China are T'ai Chi and Qi gong practices [3].
- Rx to OTC switches and OTC expansion are key concepts of self-care in this region to improve the sustainability of healthcare systems, e.g. governments in Japan, Korea and Hong Kong investigate products to be switched and improve access through additional sale points.

REGIONAL RESULTS

18 countries are considered in the East Asia and Pacific region and the total number of countries are evenly distributed across the three Country Groups. Group B has the largest proportion of OTC packs used in the **self-care as the first treatment option (FT)** and **self-care as the only treatment option (OT)** in this region. The impact of self-care clearly reflects this through the high values achieved for individual time savings, physician time savings, productivity and QALYs gained (Table 1) due to the fact that the total population in Groups A and C is about 200 million each, while Group B has a total population of nearly two billion. China, with a population of approximately 1.4 billion, accounts for a large part of the total population in Group B.

Table 1: Current value of self-care in East Asia & Pacific

		Group A • 222 mn people • 620 mn FT packs • 931 mn OT packs	Group B • 1,881 mn people • 1,535 mn FT packs • 4,606 mn OT packs	Group C • 184 mn people • 16 mn FT packs • 298 mn OT packs
FT	 Cost Containment	\$13,187 mn	\$17,954 mn	\$211 mn
	 Individual Time Saving	776 mn hours	2,303 mn hours	30 mn hours
	 Physician Time Saving	186 mn hours	307 mn hours	2 mn hours
OT	 Productivity	1,396 mn days	6,908 mn days	448 mn days
	 Welfare	\$184,939 mn	\$221,320 mn	\$3,705 mn
	 Quality of Life	753,799 QALYs	3,730,508 QALYs	241,674 QALYs

Cost containment of \$13.2 billion is achieved in Group A and about \$18.0 billion in Group B because the average cost of OTC packs in Group A countries, such as Australia and Japan, are much more expensive

than the average cost in Group B countries leading to more dollars being spent on OTC products despite a lower expenditure in terms of OTC packs purchased.

Similarly, there is a minor variance between the welfare in Group A (\$184.9 billion) and B (\$221.3 billion), which may be explained by differences in average income per capita. The average income per capita per day in Group A countries is approximately \$130.00, while the average income per day is below \$35.00 in Group B countries and below \$10.00 in Group C countries. Thus, despite the gains in productivity of 6.9 billion days in Group B and 1.4 billion days in Group A, the value of a productive day in Group B is much smaller than that in Group A.

The future value of self-care for East Asia and Pacific is summarized in Table 2 by Country Group and the overall value of self-care for this region, divided by Market Driver, are highlighted in Figure 1. These future projections are compared to current values to estimate the extent of influence of the three OTC drivers (namely, demographics, welfare and better self-care policies) on future savings.

Table 2: Future value of self-care in East Asia and Pacific per country group







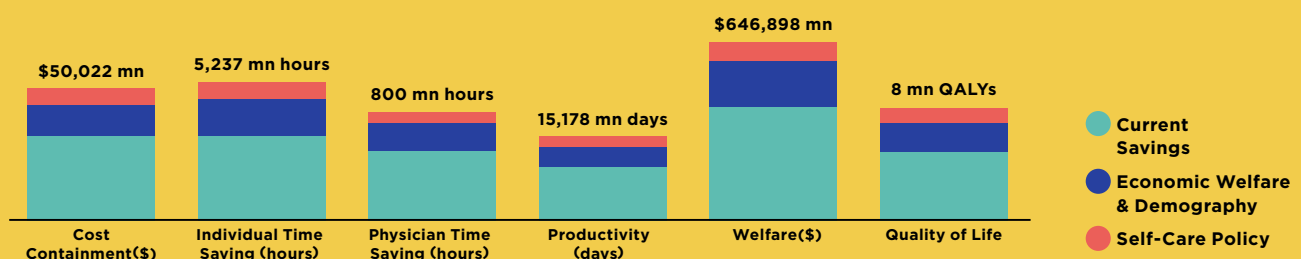
		Group A • 220 mn people • 800 mn FT packs • 1,200 mn OT packs	Group B • 1,997mn people • 2,787 mn FT packs • 8,361 mn OT packs	Group C • 202 mn people • 29 mn FT packs • 558 mn OT packs
FT	 Cost Containment	\$17,085 mn	\$32,542 mn	\$395 mn
	 Individual Time Saving	1,000 mn hours	4,181 mn hours	56 mn hours
	 Physician Time Saving	240 mn hours	557 mn hours	3 mn hours
OT	 Productivity	1800 mn days	12,542 mn days	836 mn days
	 Welfare	\$239,450 mn	\$400,512 mn	\$6,935 mn
	 Quality of Life	972,103 QALYs	6,772,593 QALYs	451,605 QALYs

Table 2 summarizes the savings of self-care that are influenced by the three OTC drivers namely, demography, economic welfare and self-care policies. Additional savings are generated in the future potential scenario for each self-care metric in for every country group in this region. The gains through welfare which is associated with an individual's decision to practice self-care instead of doing nothing (OT)

is predominant across all Country Groups and the gains through cost containment and time savings for individuals and physicians due to an individual's decision to practice FT is also notable. Overall, the greatest value is observed in Group B. It is important to note that China is categorized as Group B and its estimated future population of one and a half billion contributes to most value observed in this region.







Figure 1: Future value of self-care in East Asia and Pacific



In the future scenario, substantial monetary and time savings are anticipated in the East Asia and Pacific region overall. Figure 1 indicates that more than \$50 billion in cost containment and almost \$650 billion in welfare can potentially be generated through future self-care efforts. Additionally, more than five billion hours in individual time savings and 15 billion days could be gained

in productivity. The amount in physician time savings is equivalent to over 370,000 physicians. The value of self-care in terms of quality of life is also expected to significantly increase by more than 70% in comparison to current scenario. Finally, as shown in Table 3, appropriate self-care policies a major drivers for future contributions of 18-22% across all metrics through self-care.

Table 3: Value of self-care achieved through self-care policy in East Asia and Pacific

		Overall impact of self-care		Future value of self-care policies	Future contribution of self-care policies as a driver
		Current	Future		
LT	 Cost Containment	\$31.4 bn	\$50.0 bn	\$5.9 bn	+19%
	 Individual Time Saving	3.1 bn hours	5.2 bn hours	0.6 bn hours	+21%
	 Physician Time Saving	0.5 bn hours	0.8 bn hours	0.1 bn hours	+19%
OT	 Productivity	8.8 bn days	15.2 bn days	1.9 bn days	+22%
	 Welfare	\$410.0 bn	\$646.9 bn	\$75.2 bn	+18%
	 Quality of Life	4.7mn QALYs	8.2mn QALYs	1.0mn QALYs	+22%

RECOMMENDATIONS

- **Increase awareness and accountability towards responsible self-care by increasing self-care literacy and the prominent role of pharmacists**
- **Assure the quality and accessibility of digital health information**
- **Enable a favorable environment for Rx to OTC switches**
- **Embed harmonized regulatory frameworks to increase access to OTCs**

REFERENCES

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