

EVALUATION OF ADHERENCE TO ORAL DISEASE MODIFYING THERAPIES (ORAL-DMT) IN PATIENTS WITH RELAPSING-REMITTING MULTIPLE SCLEROSIS



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BACKGROUND AND IMPORTANCE

Adherence to treatment is a key factor in the control of symptoms of multiple sclerosis, the risk of relapses with adherence exceeding 80-85% is lower¹⁻³. Oral treatments can improve adherence.

AIM AND OBJECTIVES

To evaluate the adherence to oral-DMT in multiple sclerosis and evaluate the factors that can influence this adherence.

MATERIALS AND METHODS

Retrospective study of adherence to oral-DMT for multiple sclerosis from October 2017 to October 2019, in a general university hospital with a reference population of 361,526 inhabitants. All patients who had been dispensed oral-DMT in the indicated period (with at least 6 months of treatment) were selected. Dates and amount dispensed to calculate the percentage of adherence and persistence to treatment, as well as demographic (sex, age) and therapeutic data (previous treatments, stop of treatment, subsequent treatments) were recorded. The data were analysed statistically with the SPSS programme, version 24.

RESULTS

87 patients, 56 (64,4%) women, with mean age of 46 years (SD 13,3). Most treated previously with injectables drugs (figure 1). Mean persistence of treatment was 6,7 years (CI95% 6-7,3). 15 (17,2%) patients finished the treatment during study period. Table 1 shows adherence of different oral-DMT.

Figure 1: Treated previously with injectables-DMT (n=68, 78,2%)

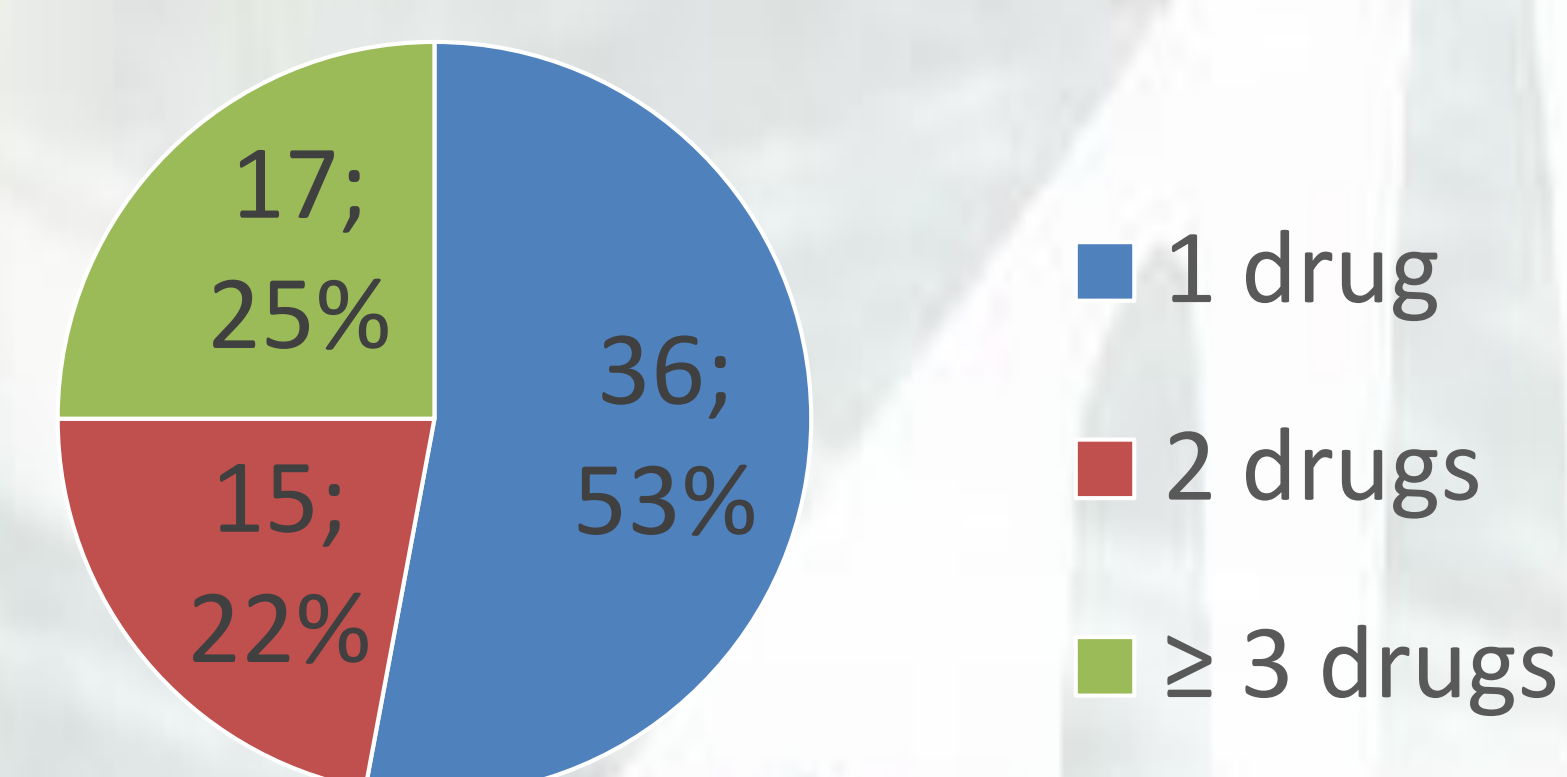


Table 1	Fingolimod	Teriflunomide	Dimethylfumarate
n (%)	45 (51,7%)	22 (25,3%)	20 (23%)
Mean adherence (%)	93,2% (SD 18,9)	99,2% (SD 11,4)	92,7% (SD 14,4)
Adherence < 80% (n, %)	5 (0,11%)	2 (0,09%)	3 (0,15%)

We did not find statistically significant differences in adherence (neither in the percentage nor classifying it in <80% or ≥80%) according to whether the patients had been previously treated or according to the number of previous treatments. There is no correlation between the percentage of adherence and the duration of treatment.

CONCLUSION AND RELEVANCE

We observed a high adherence to oral-DMT with a mean of 94,6%. Only 10 (11,5%) patients had adherence <80%. This value is higher than value observed with injectable-DMT that ranges from 41 to 88%⁴, and similar to the values obtained with oral drugs⁵. Moreover, the persistence of treatment has been long.

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