MULTIPLE SCLEROSIS: WHICH LINE OF TREATMENT GENERATES MORE VISITS TO THE EMERGENCY DEPARTMENT?

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Background

Multiple sclerosis (MS) is the most common cause of disability in young adults. Most patients present relapsing-remitting form (RRMS).

The management of RRMS is multifocal, using drugs for treatment of acute relapses, and disease-modifying drugs (DMT).

There are different DMTs from different patient profiles, it is important to know the utilization according to the type of patient.

Aim and objectives

Determine line and type of DMT in patients attended at pharmacy service and day hospital. know the proportion of visits to the emergency department of sclerosis patients and to relate it to the DMT line.

Materials and methods

Cross-sectional observational study (January 21-February 21) in which patients with RRMS were attended pharmacy consultation and day hospital.

Variables: DMT, age, sex, Expanded Disability Status Scale (EDSS 0-10) and number of emergencies visits in the last 3 years.

Data were obtained from dispensing program and the clinical history.

Patients were classified in 2 groups according to DMT used, first line was considered: interferonβ, dimethyl fumarate, glatiramer acetate and teriflunomide; and second line: cladribine, fingolimod, natalizumab and ocrelizumab. Comparative analysis (Chi-square) of the number of emergency department visits generated by both groups.

Results

N=52 patients, 70% female, median age 43(19-76) yr, mode EDSS=1.

%DMT used:

<table>
<thead>
<tr>
<th>DMT</th>
<th>1st line</th>
<th>2nd line</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interferonβ</td>
<td>34.6%</td>
<td></td>
</tr>
<tr>
<td>DMF</td>
<td>17.3%</td>
<td></td>
</tr>
<tr>
<td>Fingolomod</td>
<td>15.4%</td>
<td></td>
</tr>
<tr>
<td>Teriflunomide</td>
<td>11.5%</td>
<td></td>
</tr>
<tr>
<td>Cladribine</td>
<td>7.7%</td>
<td></td>
</tr>
<tr>
<td>Natlalizumab</td>
<td>5.7%</td>
<td></td>
</tr>
<tr>
<td>Ocrelizumab</td>
<td>5.7%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>5%</td>
</tr>
</tbody>
</table>

Patients whit 1st line of treatment:

- 30% n=11 Went to emergency department.
- Median age 47

Patients whit 2nd line of treatment:

- 47% n= 7 Went to emergency department.
- Median age 41

Comparative analysis chi-square p=0.341

Conclusions

The most commonly used first-line drug is interferonβ, and fingolimod in second-line. 71% of patients received first-line drugs, while 29% escalated to second-line treatments.

No differences were observed in emergency department visits for RRMS breaks between first- and second-line DMT groups.

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