

L03 - Immunomodulating agents





PERSISTENCE OF INTRAMUSCULAR VERSUS SUBCUTANEOUS FIRST-LINE THERAPIES IN MULTIPLE SCLEROSIS PATIENTS

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BACKGROUND

Parenteral first-line treatments for multiple sclerosis (MS) include disease-modifying therapies (DMTs): intramuscular (IM) interferon (IFN) beta-1-a, subcutaneous (SC) IFN-beta 1-a, SC INF-beta 1-b glatiramer acetate. Long-term persistence for chronic diseases is difficult for patients to achieve and low persistence has been related to increased mortality and morbidity as well as higher costs in medical care.

PURPOSE

The aim of this study is to analyze first line parenteral treatment persistence in patients with MS according to the administration route.

METHODS

Observational, retrospective and longitudinal study.

Inclusion criteria:

- ✓ MS adult patients (≤18 years).
- ✓ First-line treatments (IM IFN-beta-1-a, SC IFN-beta 1-a, SC INF-beta 1-b and glatiramer acetate).
- ✓ Study period: 1st September 2005 to 31st August 2015.

PERSISTENCE

Continuous variable: Time from initiation to discontinuation of therapy

Dichotomous variable at first and second year of therapy

For the analysis of persistence, a survival analysis with Kaplan-Meier estimator was used. The log-rank test was used to compare survival times between administration routes. Persistence at first and second year was compared using a Chi-square test. Statistical analysis were performed using SPSS®.

Covariables:

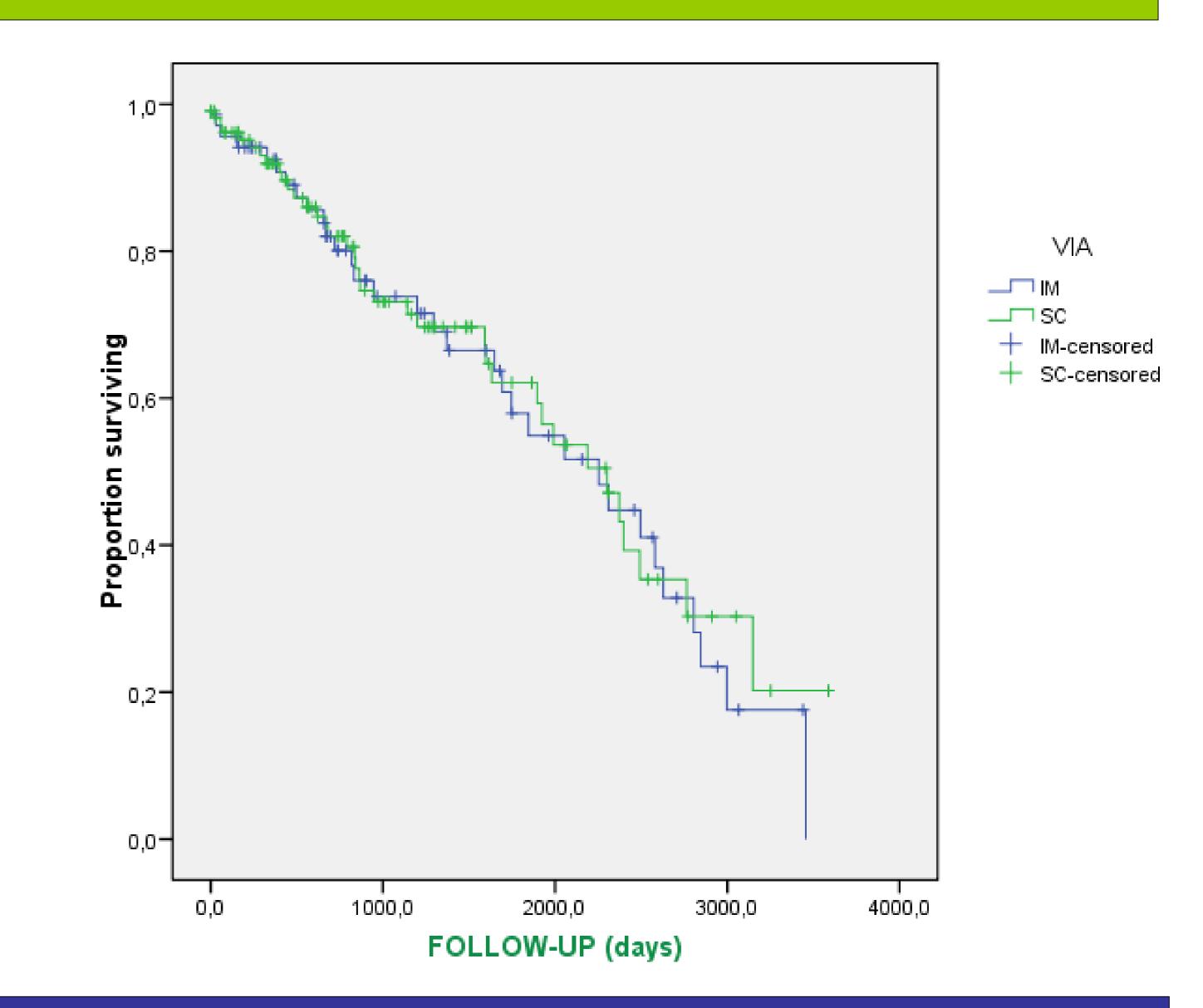
- ✓ Demographics (gender, age).
- ✓ Adherence.
- ✓ Treatment.

Covariables influence was tested according to a Cox regression model

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RESULTS

Number of patients	176				
Sex	67.6 females		32	32.4 males	
Mean age (±SD)	36.27± 11 years				
Mean adherence (±SD)	93.6%±16.5%				
Mean persistence (days)	Overall	2,043 (CI 95% 1,827-2,260)		p=0.217	
	IM route	2,007days (CI 95% 1,580- 2,927)		p=0.751	
	SC route	2,302days (CI 95% 1,799- 2,805)			
% persistent patients	1 st year	IM route	81.2%	p=0.506	
		SC route	75.7%		
	2 nd year	IM route	68,3%	p= 1.000	
		SC route	68,1%		



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CONCLUSIONS

There were no differences regarding persistence between IM or SC first-line therapies in MS patients.

Conflict of interest: nothing to disclose

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