Discordance Between Neurologists and People Living With Multiple Sclerosis on the Perception of the Presence and Burden of Cognitive Impairment

Iris-Katharina Penner¹, Virginia De Las Heras², Eddie Jones³, Suzannah Ryan⁴, Patricia Dominguez Castro⁴, Emma Houchen⁴, Shruti Narasimham⁴, Himanshu Karu⁵, Rahul Chetlangia⁵, Sourav Biswas⁵, Vladimir Bezlyak², Daniela Piani Meier², Carol Lines²

¹COGITO Center for Applied Neurocognition and Neuropsychological Research, Merowingerplatz 1, 40225 Düsseldorf, Germany; Heinrich Heine University Düsseldorf, Medical Faculty, Department of Neurology, Moorenstr. 5, 40225 Düsseldorf, Germany; ²Novartis Pharma AG, Basel, Switzerland; ³Adelphi Real World, Manchester, UK; ⁴Novartis Ireland Limited, Dublin, Ireland, ⁵Novartis Healthcare Private Limited, Hyderabad, India.

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Disclosures

Author Name	Disclosures
Iris-Katharina Penner	Received fees for speaking at scientific meetings, serving at scientific advisory boards and consulting activities from Adamas Pharma, Almirall, Bayer Pharma, Biogen, BMS, Celgene, Desitin, Genzyme, Janssen, Merck, Novartis, Roche and Teva. She has received research support from the German MS Society, Celgene, Novartis, Roche and Teva.
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Virginia de las Heras, Suzannah Ryan, Patricia Dominguez Castro, Emma Houchen, Shruti Narasimham, Himanshu Karu, Rahul Chetlangia, Sourav Biswas, Vladimir Bezlyak, Daniela Piani Meier, Carol Lines	Employees of Novartis.

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Introduction & Objective

Introduction

- Approximately 34%-65% of people living with multiple sclerosis (plwMS) develop cognitive impairment (CI)
- CI can occur from the early stages of multiple sclerosis (MS), although it is more common in secondary progressive MS (SPMS). CI has a negative impact on quality of life for plwMS¹
- CI often encompasses different domains such as information processing speed, memory problems, difficulty concentrating, and problems using executive functions effectively²⁻⁵
- Cognitive status relates to working ability of plwMS and may be predictive of a more severe disease course and disability progression⁶⁻⁸
- CI is not routinely assessed in clinical consultations, and therefore can remain undetected⁹

Objective

 This study explores the level of agreement on the perception of the presence of CI between plwMS and neurologists

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Conclusions

Methods

- Retrospective cross-sectional analysis of data from neurologists and plwMS from the US, UK and EU (France, Germany, Italy and Spain) from the 2011-2019 Adelphi Multiple Sclerosis Disease Specific Programme (MS-DSP)
- The Adelphi MS-DSP is a study based in the real-world clinical setting which describes MS management, burden and associated impacts
- Participating neurologists provide data on the next 10 plwMS to have a consultation, patient record form (PRF), with the same plwMS invited to voluntarily complete a patient self-completion form (PSC)
- Both plwMS and neurologists were asked about the presence of problems concentrating around the time
 of consultation (two weeks prior, or at the consultation, respectively)
- Kappa analysis was used to calculate the level of agreement between neurologists and plwMS.
 Agreement results were derived from matched PRF-PSC pairs

MS, multiple sclerosis; plwMS, people living with multiple sclerosis; SPMS, secondary progressive MS.



Conclusions

Results: plwMS characteristics

- Surveyed neurologists provided data for 25,374 plwMS, of which 11,220 completed a PSC. Of the 11,220 plwMS with a PSC 4,817 provided information on cognitive and mood symptoms
- The majority of plwMS were female (67%) with an average age of 38.9 yrs for RRMS and 49.4 yrs for SPMS
- Fewer SPMS patients were in full/part time employment (36% vs 67%) vs RRMS

MS, multiple sclerosis; plwMS, people living with multiple sclerosis; PRF, patient			
record form; PSC, patient self-completion form; RRMS, relapsing-remitting MS;			
SPMS, secondary progressive MS.			

MS patients (n=4817)				
Age	40.0 (SD=11.77)			
Gender	67% Female, 33% Male			
	RRMS (n=4320)	SPMS (n=497)		
Age	38.9 (SD=11.52)	49.4 (SD=9.49)		
Gender	67% Female, 33% Male	64% Female, 36% Male		
Working full-time	53%	21%		
Working part-time	14%	15%		
Student	8%	0%		

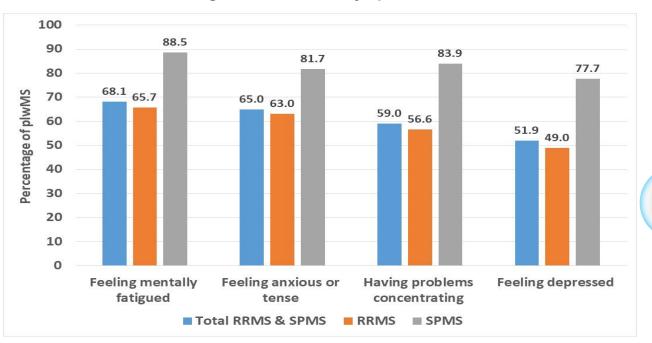




Results: Proportion of RRMS and SPMS participants reporting cognitive and mood symptoms

- 59% reporting having problems concentrating, and 68% reporting feeling mentally fatigued
- A higher percentage of SPMS participants reported suffering from cognitive or mood symptoms compared to RRMS participants

Cognitive and mood symptoms



RRMS, relapsing-remitting multiple sclerosis; SPMS, secondary progressive multiple sclerosis.

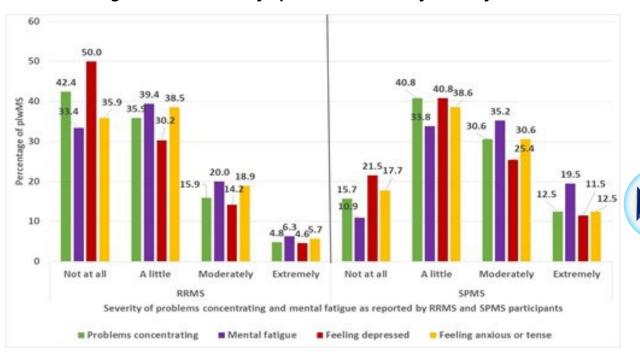
Introduction Methods Results Conclusions



Results: Proportion of RRMS and SPMS participants reporting cognitive and mood symptoms classified by severity

- 59% reporting having problems concentrating, and 68% reporting feeling mentally fatigued
- A higher percentage of SPMS participants reported suffering from cognitive or mood symptoms compared to RRMS participants
- A higher percentage of SPMS participants reported moderate or extreme cognitive and mood symptoms compared to RRMS participants

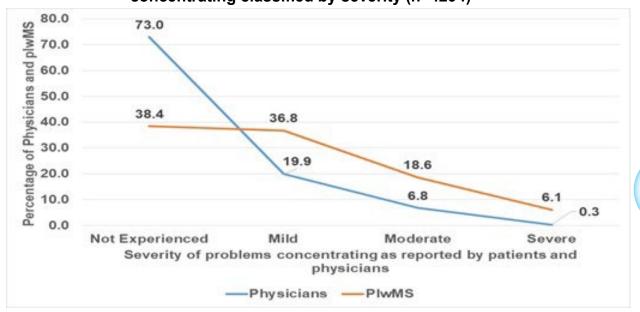
Cognitive and mood symptoms classified by severity



RRMS, relapsing-remitting multiple sclerosis; SPMS, secondary progressive multiple sclerosis.

- 59% reporting having problems concentrating, and 68% reporting feeling mentally fatigued
- A higher percentage of SPMS participants reported suffering from cognitive or mood symptoms compared to RRMS participants
- A higher percentage of SPMS participants reported moderate or extreme cognitive and mood symptoms compared to RRMS participants
- 62% of plwMS reported problems concentrating in the past two weeks. For the same plwMS, neurologists reported 27% currently having problems concentrating, showing a discordance on the perception of the presence of CI between neurologists and plwMS (Kappa=0.162)





plwMS, people living with multiple sclerosis; RRMS, relapsing-remitting multiple sclerosis; SPMS, secondary progressive multiple sclerosis.



Conclusions

 A large proportion of plwMS reported cognitive and mood symptoms, participants with SPMS reporting these symptoms with higher frequency and severity

 A clear discordance is observed between neurologists and plwMS when reporting their perception of the presence and severity of CI with neurologists underestimating their existence

 This might be responsible for cognition not being discussed at the time of consultation and clearly indicates an unmet need

CI, cognitive impairment; plwMS, people living with multiple sclerosis; SPMS, secondary progressive MS.



Conclusions