Development and Usability Testing of a Patient-based Digital Tool to Understand Early Signs of Changes in Multiple Sclerosis Symptoms and Progression: Your MS Questionnaire



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Introduction



There is an unmet need as discussion of symptoms between plwMS and HCPs can be unstructured and lead to uncertainty in recognizing subtle worsening of MS¹



Your MS Questionnaire (YMSQ) was developed with input from plwMS, patient advocacy groups and HCPs and is based on the MSProDiscuss™, a physician-completed digital tool



YMSQ is a **patient-completed questionnaire** that asks information on relapses, symptoms and impacts experienced within the past six months. The purpose of this questionnaire is to **facilitate a discussion between HCPs and plwMS**, to better understand patient history, symptoms and impacts experienced by the patient

Objective

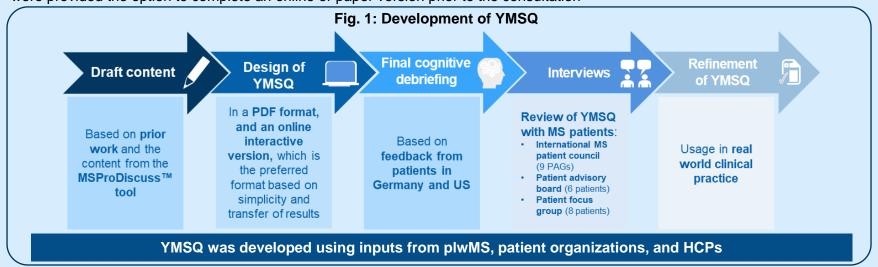
- To develop a patient-based tool, Your MS Questionnaire (YMSQ), that is completed by plwMS
- To evaluate the usability of Your MS Questionnaire (YMSQ) in helping both plwMS and HCPs in clinical practice, and to understand
 whether the plwMS have experienced any changes in their disease

^{1.} Davies F et al. Int J MS Care. 2016.

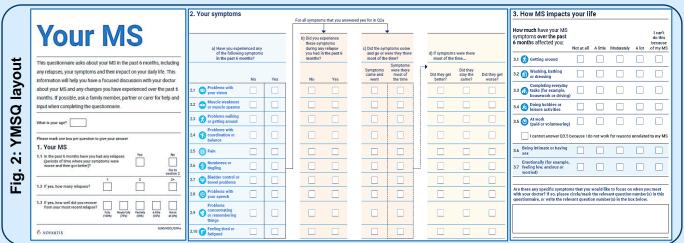
Methods

Development of YMSQ

- YMSQ was designed based on MSProDiscuss™ to capture the experience of plwMS regarding changes in their MS symptoms and its impact on daily living over the past 6 months
- The questions were identified as relevant through qualitative and quantitative research with experienced HCPs and using inputs from plwMS and patient organizations
- YMSQ was initially developed as a paper version, however, later due to COVID-19 pandemic and to support telemedicine, plwMS were provided the option to complete an online or paper version prior to the consultation

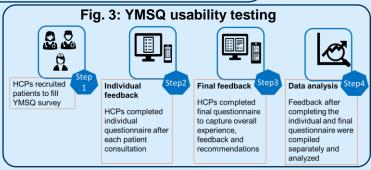


Methods (contd.)



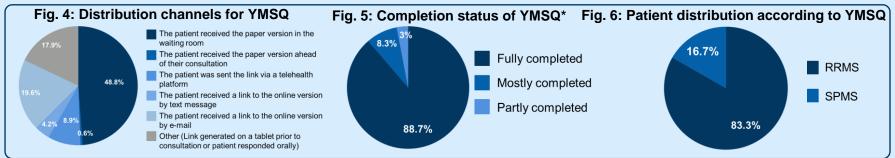
YMSQ usability testing: A two-part HCP survey

- Individual questionnaire (15 questions):
 - After every patient consultation, collected feedback for usability and usefulness, comprehensibility, patient and HCP satisfaction, and usability in conjunction with MSProDiscuss™
- Final questionnaire (15 questions):
 - After 40 patient consultations (a minimum of 10), collected in-depth feedback on usefulness, integration into clinical routine and recommendations for improvement areas
- HCPs had option to provide their response in four categories: strongly agree, agree, disagree, strongly disagree

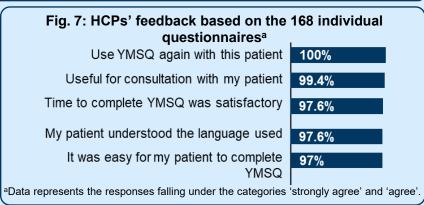


Results

Usability testing of YMSQ is ongoing with HCPs across 8 countries. Until data cut-off for interim analysis (12 Feb 2021), nine HCPs from four countries (US, China, Spain and Italy) completed the testing based on 168 MS patient consultations where YMSQ was used



- The majority of HCPs agreed or strongly agreed that YMSQ was useful in their practice and was easy for plwMS to use and understand (Fig. 7)
- The use of YMSQ positively influenced the clinical practice; it was helpful in engaging patients with their MS
- The majority of HCPs (80%) were willing to integrate the YMSQ in addition to MSProDiscuss™ in routine clinical practice



^{*&#}x27;Mostly' refers to >50% of the questionnaire, while 'Partly' refers to <50% of the questionnaire.

Conclusions

- YMSQ was developed with input from plwMS, patient advocacy groups and HCPs, based on the MSProDiscuss™, a physician-completed digital tool
- YMSQ facilitates discussion between plwMS and HCPs on changes in MS symptoms and ways in which they impact daily activities within past six months, enabling holistic approach to MS patient management
- Based on initial results from the usability testing of YMSQ in real-world clinical practice, HCPs found it useful and are willing to use it again on the same patients
- When completed before consultations, YMSQ may benefit plwMS and HCPs by enabling a better-structured conversation, a better-informed consultation, with potential uses in telemedicine

The tool is freely available online at www.yourms.com

Disclosures

TZ has received compensation for consulting and lecturing from Alexion, Biogen, Celgene, Novartis, Roche, Sanofi, and Teva and for research from Biogen, Novartis, Roche, Teva, and Sanofi. EA received compensation for consulting from Actelion/Janssen, Alexion, Bayer, Biogen, Celgene/BMS, EMD Serono/Merck, Genentech/Roche, Genzyme, Novartis, Sanofi, and TG Therapeutics and for research from Biogen, Genentech/Roche, Novartis, TG Therapeutics, Patient-Centered Outcomes Research Initiative, National Multiple Sclerosis Society, National Institutes of Health, and Rocky Mountain MS Center. VB received compensation for consulting, lecturing and advisory board from Biogen, Celgene, EMD Serono, Genzyme, Novartis, Roche, Sanofi, and Teva Neuroscience, for site PI from Biogen Idec, EMD Serono, Novartis, Sanofi-Aventis, and Teva Neuroscience. JB received compensation as a speaker and advisory board member from Bayer Schering, Biogen-Idec, Novartis, Merck Serono and Sanofi-Genzyme. OH received consulting fee from Biogen, Merck, Novartis, Roche, Sanofi, for research from Biogen, Novartis, Sanofi and as speaker from Merck, Novartis, Roche, Sanofi. COG received consulting fee from Novartis, Alexion, Roche, for research from Alexion and as speaker from Novartis, Roche. RRC has received compensation for consulting services and speaking fees from Biogen, Roche, Novartis, Bayer, Merck, Sanofi, Genzyme, Teva Pharmaceutical Industries Ltd, and Almirall. MT has received compensation for consulting from Novartis, Biogen, Merck, Roche, Sanofi, and for research and as salary from Biogen, Merck, Novartis, Roche. PV received compensation for consulting and/or research and registration, travel, and accommodation for meetings from Biogen, Roche, Novartis, Sanofi, Teva, Merck, Celgene, Imcvse and AB Science, SN received compensation as speaker from Accorda Therapeutics. Biogen, Genentech, Genzyme, Mallinckrodt, and Novartis. AM received compensation for consulting from Novartis, Genetech, Biogen, Alexion, EMD Serono, BMS, for research from Alexion, Novartis, Biogen, as speaker from Alexion, EMD Serono, BMS, Genetech. YX has nothing to disclose. JV, MK, MM, BS, TH are employees of Novartis, GG received consulting fee from AbbVie, Actelion, Atara Bio, Biogen, Celgene, Sanofi-Genzyme, Genentech, GlaxoSmithKline, Merck-Serono, Novartis, Roche and Teva, for research from Biogen, Roche, Merck, Merck-Serono, Novartis, Sanofi-Genzyme and Takeda.

Acknowledgment: Medical writing support was provided by Gillipsie Minhas and Jitendriya Mishra (employees of Novartis Healthcare Pvt. Ltd., Hyderabad, India). The final responsibility for the content lies with the authors.

This study is funded by Novartis Pharma AG.

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