# Quality of Life and Treatment Satisfaction with Ofatumumab and Other DMTs in MS

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## Introduction

- MS affects daily activities, participation in work and QoL, and places a significant burden on patients, their caregivers/families and employers[1, 2]
- MS requires long-term treatment with DMTs
- Evaluating the effect of DMTs on patient-reported outcomes such as symptoms, QoL, and employment may improve selection of treatment[1]
- Ofatumumab and ocrelizumab are anti-CD 20 therapies with different route of administration
- Data comparing the effectiveness of different DMTs on patients-reported outcomes are limited
- Here, we compared the effect of different DMTs on patient-reported outcomes including QoL, patient satisfaction, and self-reported clinical and non-clinical burden

## Objectives

- To understand patients' perceptions about QoL and treatment satisfaction with DMTs in patients with MS and to assess the patient-reported treatment satisfaction with ofatumumab and other DMTs

## Methods

This study was conducted in two phases:

**Phase I (Patients and HCPs)**
***Qualitative 60-minute online interview***

**Patients**
- Age: 21–65 years
- Diagnosed with RRMS or SPMS within 6 months to 15 years
- EDSS score of 2–3.5
- Currently taking or has previously taken ofatumumab, ocrelizumab or fumarates

**HCPs**
- Experience of 3–25 years
- More than 75% time spent on direct patient care
- Managing/treating at least 20 patients with MS per month
- Prescribe, onboard, and monitor ofatumumab, ocrelizumab or fumarates

**Phase II (Patients)**
***Quantitative 20-minute online survey***

**Patients**
- Age: 21–65 years
- Diagnosed with RMS for at least one year
- Up to early cane on PDDS scale
- EDSS score of 6 or less
- Currently on ofatumumab, ocrelizumab, BRACE, or fumarate for ≥2 maintenance cycles of respective drug

**Assessments in Phase II**
- Patient demographics and baseline characteristics
- Up to early cane on PDDS scale
- QoL with current DMTs was assessed using EQ-5D-5L
- Patient satisfaction with current DMT was assessed using treatment satisfaction questionnaire
- Clinical and non-clinical burden in patients receiving ofatumumab and ocrelizumab was compared

**Statistical analysis**
- Differences between treatment arms were calculated at 95% confidence interval
- Difference in score was compared at the top box (for 5 and 7 pt. scales), the top two boxes (5 and 7 pt. scales) and the top three boxes (7 pt. scales) of EQ-5D-5L and satisfaction score questionnaire
- The results were analyzed to compare four different treatment arms as well as anti-CD 20 therapies (ofatumumab and ocrelizumab) vs. BRACE and anti-CD 20 therapies vs. fumarates

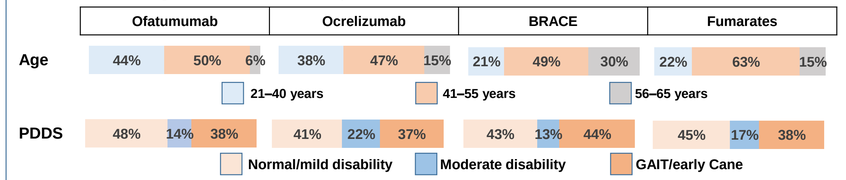
## Results

### Insights from Phase I

- In phase I, 39 patients (31 with RRMS, 8 with SPMS) and 19 HCPs (8 general neurologists, 4 MS specialists, and 7 specialist nurses/NP/PAs) were interviewed.
- The definition of QoL varied among patients; however, common themes that emerged were being independent and living uninterrupted by MS or MS treatment
- Patients defined treatment satisfaction as the extent to which they can achieve their desired QoL
- Patients were grateful to have access to anti-CD20 DMTs
- HCPs perceived that ofatumumab and ocrelizumab have comparable efficacy
- With the perceived equivalence among anti-CD 20 therapies, the route of administration played a significant role in treatment choice, often decided by the patient

### Patient demographics and baseline characteristics in Phase II

- In phase II, 400 patients with RMS (100 patients each currently receiving ofatumumab, ocrelizumab, BRACE, or fumarate) were included in the survey
- Distribution of age and PDDS score is presented below

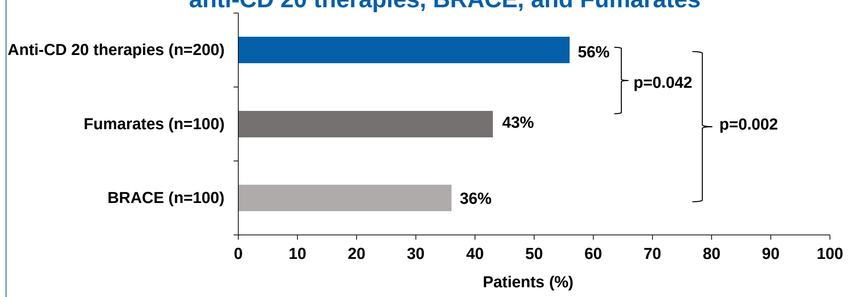



- Overall, approx. 50% of the patients with RMS belonged to 41 - 55 years of age group

### QoL with DMTs in patients with RRMS and SPMS

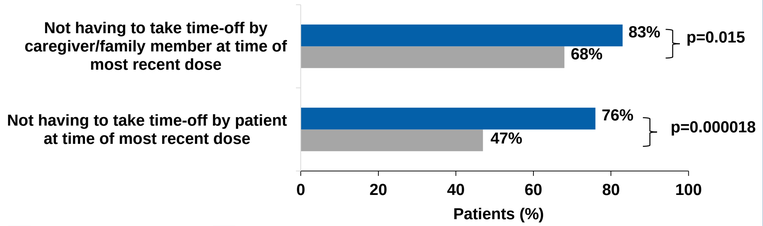
- Overall, QoL was similar (no significant difference) among the four treatment arms in patients with RRMS and SPMS

### Comparison of treatment satisfaction in patients receiving anti-CD 20 therapies, BRACE, and Fumarates




- More patients receiving anti-CD 20 therapies (ofatumumab and ocrelizumab) reported satisfaction with treatment compared with patients receiving either BRACE or fumarates

### Comparison of the non-clinical burden between ofatumumab and ocrelizumab




- Significantly, more patients receiving ofatumumab reported that either they or their caregivers/family members did not have to take time off from work or their daily schedule on the day of the most recent dose than that of ocrelizumab

## Conclusions

- Greater patient satisfaction was observed with anti-CD 20 therapies than with BRACE and fumarates
- Ofatumumab also improved the non-clinical burden suggesting greater beneficial effects on day to day living/activities in patients and/or caregivers than with ocrelizumab
- Further analyses of patient satisfaction with efficacy, safety, convenience, and overall QoL with DMTs are warranted

**References**
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2. Hunter SF. Am J Manag Care. 2016;22(6 Suppl):s141-s150.

**Acknowledgments**
The study was funded by Novartis Pharma AG, Basel, Switzerland. Writing support was provided by Shashank Jain and Sreelatha Komatireddy (employees of Novartis Healthcare Pvt. Ltd., Hyderabad, India). The final responsibility for the content lies with the authors

**Disclosures**
**Tamara Kaplan** has received consulting honoraria from EMD Serono, Genentech, and Novartis
**Ann Cabot** has served in speaker bureau, consulting or ad board for EMD, Biogen, Novartis, Genentech, and BMS
**John Kramer,** has received consulting fees and served on speakers' bureaux for Biogen, Celgene, Genentech, and Novartis
**Noreen Barker** has received honoraria for consulting/speaking for Biogen, Merck, Roche, Novartis, Sanofi, and Teva
**Robert K. Shin** has received consulting and speaking honoraria from Alexion, Biogen, BMS, EMD Serono, Genentech, Horizon, Novartis, and Sanofi Genzyme
**Jonathan Simons** and **Neil Valentine** are employees of Lumanity Inc, London, UK.
**Gemma Codling** and Dee Stoneman are employees of Novartis Pharma AG, Basel, Switzerland
**Zain Zafar Khan** is an employee of Novartis Healthcare Pvt. Ltd., Hyderabad, India


**Poster presented** at the ACTRIMS forum 2023 at San Diego, February 23-25, 2023

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**DMTs**, disease modifying therapy; **EDSS**, Expanded Disability Status Scale; **EQ-5D-5L**, EuroQoL-5Dimention-5Level; **HCPs**, healthcare professionals; **MS**, multiple sclerosis; **NP**, Nurse practitioner; **PDDS**, Patient Determined Disease Steps; **QoL**, quality of life; **RMS**, relapsing MS; **PA**, Physician Assistant; **RRMS**, relapsing-remitting MS; **SPMS**, secondary progressive MS.