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Abstract **Submission Deadline**: January 16, 2023 at 11:59PM EST.

Word Count: 2,499/2,500 characters including spaces; The title may not exceed **150 characters excluding spaces** (Title=140 characters)

Real-world persistence and adherence of ofatumumab versus platform self-injectable disease modifying therapies (DMTs) in patients with multiple sclerosis (MS)

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Background: Ofatumumab (OMB) was approved in the US in Aug 2020 as the first B-cell therapy to be self-administered subcutaneously once-monthly for relapsing multiple sclerosis (MS). The ALITHIOS extension study showed that nearly 9/10 patients remained on OMB over the long term (up to ≥4 years). There is need for real-world data on persistence and adherence of OMB, and how it compares to platform self-injectable DMTs.

Objectives: To compare persistence and adherence of OMB versus platform self-injectable DMTs.

Methods: This retrospective cohort study utilizing IQVIA PharMetrics® Plus (a longitudinal health plan database of medical and pharmacy claims in the US), identified adult (≥ 18 years) patients diagnosed with MS and treated with OMB or platform self-injectable DMT (glatiramer acetate, interferon beta-1a/1b, and peginterferon beta-1a) – referred to as index treatment - from Aug 2020 to Nov 2021. First pharmacy claim for index treatment=index date. Continuous enrollment in health plan was required for ≥12 months (mo) pre- and 6 mo post-index date. Discontinuation was defined as having a gap >60 days for index DMT or switching to another DMT and was reported at 6 mo post-index. Persistence was defined as the number of days from the index date until the earliest of the discontinuation or switch date. Adherence was calculated based on proportion of days covered (PDC); adherence was defined as

PDC ≥0.8. Propensity score matching was used to balance baseline demographic, disease characteristics, and prior DMT between cohorts.

Results: A total of 1,168 patients met inclusion criteria (OMB n=576, platform self-injectable n=592). On average, patients were 46.7 years-old with a majority being female (79.4%) and commercially insured (94.1%). Baseline demographic and disease characteristics were balanced after matching. In the matched cohorts (both n=333), 80.8%, 77.6%, and 74.5% patients on OMB were persistent at 6 mo, 9 mo, and 12 mo post-index versus 56.7%, 48.1%, and 43.2% patients in the platform self-injectable cohort, respectively (p<0.001), indicating a 72% (74.5%/43.2%-1) improvement in persistence over platform self-injectables at 1 year. The proportion of patients classified as adherent (PDC>0.8) at 6 mo post-index was 73.6% for OMB, versus 52.6% in the platform self-injectable cohort, respectively (p<0.001). Results remained consistent after sensitivity analyses.

Conclusions: Patients treated with OMB have significantly higher persistence and adherence than those treated with platform self-injectable DMTs.

Submission requirements:

Presentation preference

Platform/Oral

Poster

Disclosures

- Magdaliz Gorritz, Chi-Chang Chen, Rifat Tuly and Yifan Gu are employees of IQVIA Inc. and worked as consultants to Novartis Pharmaceuticals Corporation
- Qiujun Shao, Abhijit Gadkari, and Brandon Brown are employees of Novartis Pharmaceuticals Corporation
- Carrie M. Hersh has received speaking, consulting, and advisory board fees from Genentech, Genzyme, Biogen, Novartis, EMD-Serono, Bristol Myers Squibb, TG Therapeutics, and Alexion. She has received research support paid to her institution by Biogen, Novartis, Genentech, Patient-Centered Outcomes Research Institute (PCORI) and NIH - NINDS 1U01NS111678-01A1 sub-award.