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Characterization of patient and treatment characteristics in SPMS and at risk for SPMS patients in clinical routine: final results from the pangaea 2.0 evolution study

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Background: Until today, the diagnosis of patients with secondary progressive multiple sclerosis (SPMS) and especially identification of the transitional phase from relapsing remitting multiple sclerosis (RRMS) to SPMS remains challenging since reliable clinical diagnostic criteria and tools are missing or are not yet established.

Objective: The aim of the PANGAEA 2.0 EVOLUTION study was to evaluate and compare clinical parameters and patient reported outcomes of patients with RRMS at high risk to develop SPMS with SPMS patients in order to characterize the transition between these two stages of MS.

Methods: In the prospective non-interventional study PANGAEA 2.0 EVOLUTION 600 patients with either SPMS or RRMS at high risk for SPMS were followed independently of treatment for up to 2 years. As there are no standard criteria for the transition state from RRMS to SPMS, physicians independently assigned patients to the 'high risk for SPMS' cohort after a comprehensive evaluation of the patient's symptoms according to their daily practice. At 6-month intervals routine clinical measurements, quality of life and socioeconomic parameters are documented.

Results: Final results from the 600 patients will be presented including baseline characteristics as well as up to 24-month follow-up data. First data shows that SPMS patients are older than RRMS patients at risk for SPMS (53.6 vs 49.5 years), have a longer disease duration (17.2 vs 13.8 years) and a higher EDSS (5.1 vs 4.2). Cognition (assessed by SDMT) and motor fatigue (assessed by FSMC) are more pronounced in SPMS patients (SDMT: 38.0 SPMS vs 43.0 high risk for SPMS; FSMC: 68.1 SPMS vs 63.9 high risk for SPMS). Here we will expand on these data to show how the patients in the two groups progressed during the observational period of up to 24 months.

Conclusions: PANGAEA2.0 EVOLUTION allows comparing SPMS patient profiles to RRMS patients at risk for SPMS in a real world, yet well-structured setting. Combining clinical and non-clinical parameters for a patient profile may help to establish standard early diagnosis criteria and therapy of SPMS patients.

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