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Amasia study: real-world data on MS therapy optimization with siponimod

O. Hoffmann[1], H. Schreiber[2], L. Klotz[3], M. Weber[4], C. Baufeld[5], T. Ziemssen[6]
[1]St. Josefs-Krankenhaus, Potsdam, Germany, [2]Neurological Practice Center Ulm, Ulm, Germany, [3]University Hospital Münster, Muenster, Germany, [4]University Medical Center Goettingen, Goettingen, Germany, [5]Novartis Pharma GmbH, Nuremberg, Germany, [6]Carl Gustav Carus University Clinic, University Hospital of Dresden, Dresden, Germany

Background: Progressive motor dysfunction and cognitive decline are typical hallmarks of secondary progressive multiple sclerosis (SPMS). Siponimod, a selective sphingosine-1-phosphate receptor modulator, is specifically approved for the treatment of active SPMS in the EU. The non-interventional AMASIA study will provide real-world evidence on the long-term effectiveness and safety of siponimod as well as its impact on quality of life.
Methods: A large cohort of Siponimod treated active SPMS patients are followed over 3 years. Every 6 months, disability progression and cognitive changes are evaluated by the expanded disability status scale (EDSS) and the symbol digit modalities test (SDMT). Questionnaires from the perspective of patients, physicians, and relatives on disability progression, cognitive worsening and quality of life are documented.
Results: In this recent interim analysis we present results of therapy effectiveness and treatment satisfaction of approximately 570 siponimod patients observed in real-world in the AMASIA study 12 months after siponimod treatment initiation. The patients will be analyzed in subgroups based on their last pre-treatment regimen before starting siponimod, focussing on interferons, glatiramer acetate and oral baseline/platform disease modifying therapies (DMTs) (teriflunomid, dimethylfumarate). Previous results indicate that EDSS remains stable with siponimod therapy regardless of the previous therapy regimen. Treatment satisfaction is increased in patients that switched from interferons to siponimod.
Conclusions: AMASIA provides valuable insights into the effectiveness, tolerability, safety, and treatment satisfaction of active SPMS patients on siponimod in a real-life setting after having switched from first-line injectable and oral MS therapies.
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