Improvements in Patient-Reported Treatment Satisfaction With Teriflunomide: Results From the Phase 4 Teri-PRO Study

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INTRODUCTION

- Teriflunomide is a once-daily oral immunomodulator approved for the treatment of relapsing-remitting MS in 55 countries. Approximately 53,000 patients have been treated with teriflunomide globally, with a mean exposure to teriflunomide of 14.6 mg/day (range: 1-24 mg/day) with total exposure to the 14 mg dose approaching 70,000 patient-years.
- The use of patient-reported outcomes complements clinical assessment and provides additional information on the effects of treatment on patients' health-related quality of life.

OBJECTIVE

- To report treatment satisfaction for patients enrolled in the 48-week phase 4 Teri-PRO (Teriflunomide Patient-Reported Experience) study

METHODS

- Study Design and Patients
- Teri-PRO was a prospective, global, multicenter, single-arm, open-label study. All patients who received ≥1 dose of teriflunomide were included in the analysis. Clinical significance was defined as per the ES limits set out by Cohen (1988).
- Baseline, Week 4, and Week 48 (or end of treatment) in patients switching from another DMT were assessed using the Treatment Satisfaction Questionnaire for Medication (TSQM, Version 1.0).
- In brief:
  - Teri-PRO was a prospective, global, multicenter, single-arm, open-label study (NCT01895135) evaluating patient-reported treatment satisfaction and the safety, efficacy, and tolerability of teriflunomide in routine clinical practice.
  - The use of patient-reported outcomes complements clinical assessment and provides additional information on the effects of treatment on patients' health-related quality of life.

RESULTS

- Baseline Characteristics
- A total of 1019 patients were included in the Teri-PRO study, and 1000 responses were included in the analysis. Ten patients were excluded because of exposure to teriflunomide for <30 days (n=9) or >90 days (n=1).

CONCLUSIONS

- At Weeks 4 and 48, high levels of patient treatment satisfaction with teriflunomide were seen across all 75MS domains in the real-world MS setting.
- In patients switching from other DMTs, statistically significant improvements in patient treatment satisfaction with teriflunomide were reported early at Week 4 and sustained over the course of the study across all 4 domains of the TSQM.

Table 1. Demographics and Baseline Disease Characteristics

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>N=1000</th>
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<tbody>
<tr>
<td>Age, mean (SD)</td>
<td>47.3 (12.0)</td>
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<tr>
<td>Female, %</td>
<td>756 (75.6)</td>
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<tr>
<td>Asian/Oriental</td>
<td>85 (8.5)</td>
</tr>
<tr>
<td>Black/White</td>
<td>526 (52.6)</td>
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<tr>
<td>Caucasian/Other</td>
<td>398 (39.8)</td>
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<tr>
<td>Time since first symptom of MS, mean (SD), y</td>
<td>10.9 (9.6)</td>
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<tr>
<td>Number of relapses within past 2 years, mean (SD)</td>
<td>3.1 (2.6)</td>
</tr>
<tr>
<td>Number of relapses within past 6 months, mean (SD)</td>
<td>0.6 (0.9)</td>
</tr>
<tr>
<td>No DMT intake within past 2 years</td>
<td>205 (20.5)</td>
</tr>
<tr>
<td>No DMT intake within past 6 months</td>
<td>136 (13.6)</td>
</tr>
<tr>
<td>No DMT intake at baseline</td>
<td>460 (45.9)</td>
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Figure 1. Reasons for Treatment With Teriflunomide According to Physician

- Clinical significance was defined as per the ES limits set out by Cohen (1988). The primary endpoint was global satisfaction with teriflunomide treatment, as assessed using the TSQM score. The TSQM was assessed at:
  - Baseline
  - Week 4
  - Week 48

Figure 2. Last DMT Taken Before First Teriflunomide Intake by Patients Switching to Teriflunomide

- For patients switching from injectable therapies, the most common reason for choosing teriflunomide was the convenience associated with an oral therapy; this was followed by effectiveness associated with previous DMT and disease-modifying therapy.

Figure 6. Improvement in Treatment Satisfaction with Teriflunomide Domain at Week 48 in Patients Switching From Another DMT Within 6 Months, Based on P646 ECTRIMS

- Treatment Satisfaction – Patients Switching From Another DMT
- In patients switching to teriflunomide from another DMT within the preceding 6 months, statistically significant improvements from baseline to Week 48 in TSQM scores were seen across all 4 domains (Figure 4).

Figure 7. Treatment Satisfaction – Patients From Week 4 and Week 48 in All Patients

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REFERENCES