The burden of illness in Chronic Inflammatory Demyelinating Polyneuropathy: results of a multinational real-world survey

Swapna Karkare, MS¹, Clémence Arvin-Berod, PharmD², Febe Brackx, Ir, MSc³, Arash Mahajerin, MD, MSCr¹, Dustin Nowacek, MD¹, Lucas Van de Veire, MA³, Rabiyah Sahar, MSc⁴, Yasmin Taylor, MBiol⁴, Jack Wright, MSc⁴, Jonathan deCourcy, BSc⁴, Sarah Dewilde, PhD³

¹argenx US Inc., Boston, MA, USA, ²argenx BV, Ghent, Belgium, ³Services in Health Economics (SHE) BV, Brussels, Belgium, ⁴Adelphi Real World, Bollington, UK





Introduction

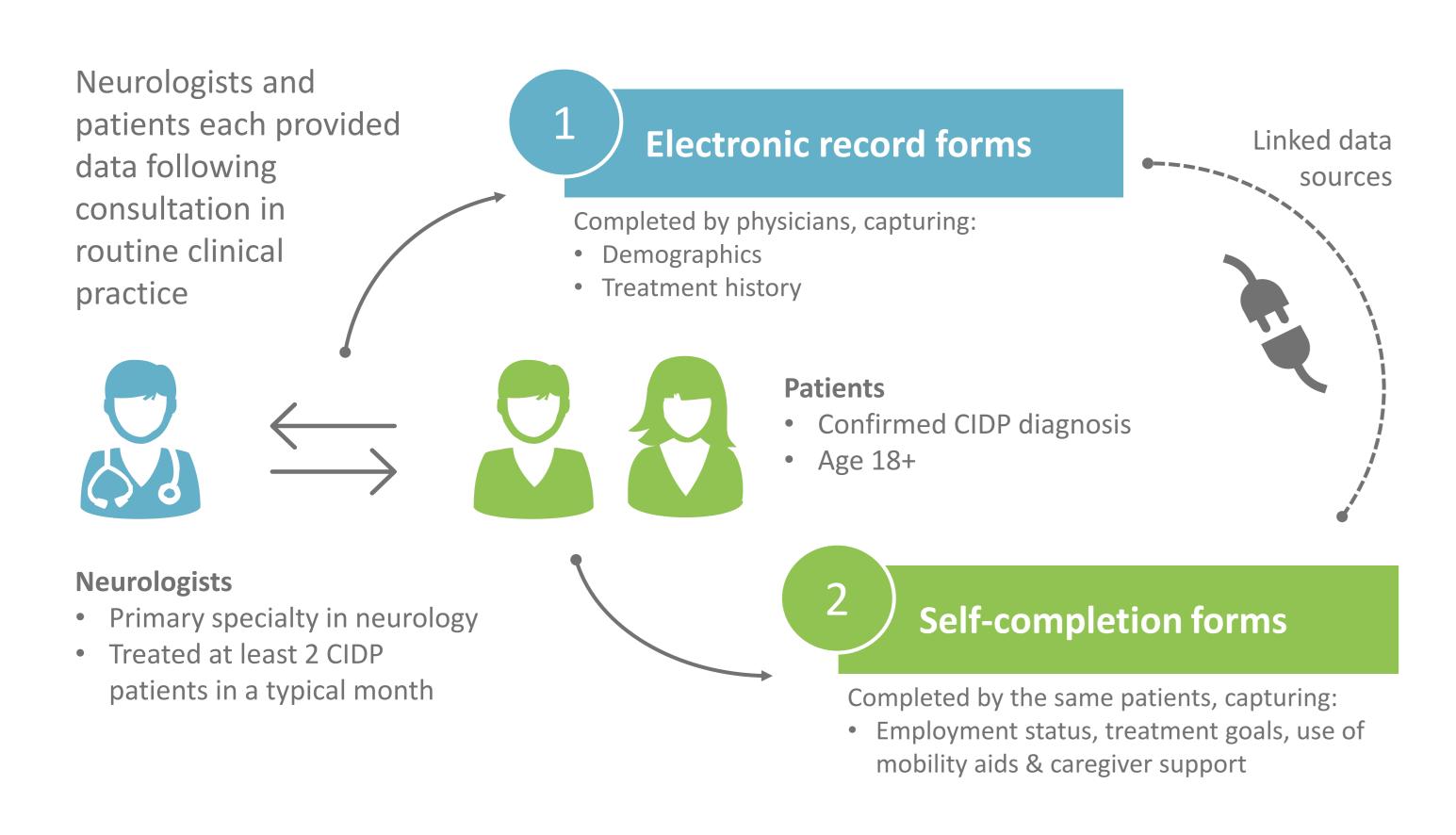
- Chronic Inflammatory Demyelinating Polyneuropathy (CIDP) is a rare, progressive immune-mediated neurological disorder that causes disability due to limb weakness and/or sensory deficits.
- Real-world evidence reported by patients and their physicians is valuable for assessing the needs and burden associated with CIDP.

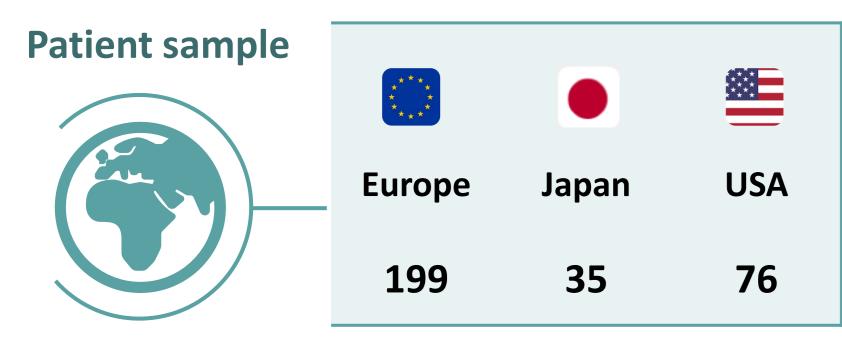
Objective

To characterize the burden experienced by patients with CIDP.

Methods

■ This was a secondary analysis of data collected as a part of Adelphi's CIDP Disease Specific Programme™, a real-world cross-sectional survey of CIDP patients and their neurologists conducted between September 2022-April 2023 across 7 countries (France, Germany, Italy, Japan, Spain, UK and US).





 Only matched data, consisting of physician- and patient-reported data, were utilized in this analysis. In total, 310 patients were included. Sample sizes vary per question as their completion by patients was voluntary.

1. Demographics and symptom severity

- The mean (SD) age of the patient population was 54.4 (12.6) years; 59% were male. Immunoglobulins and corticosteroids were the most frequently prescribed treatments at time of survey (Figure 1).
- Despite treatment, 50% of patients continued to experience moderate-to-severe symptoms (Figure 2).

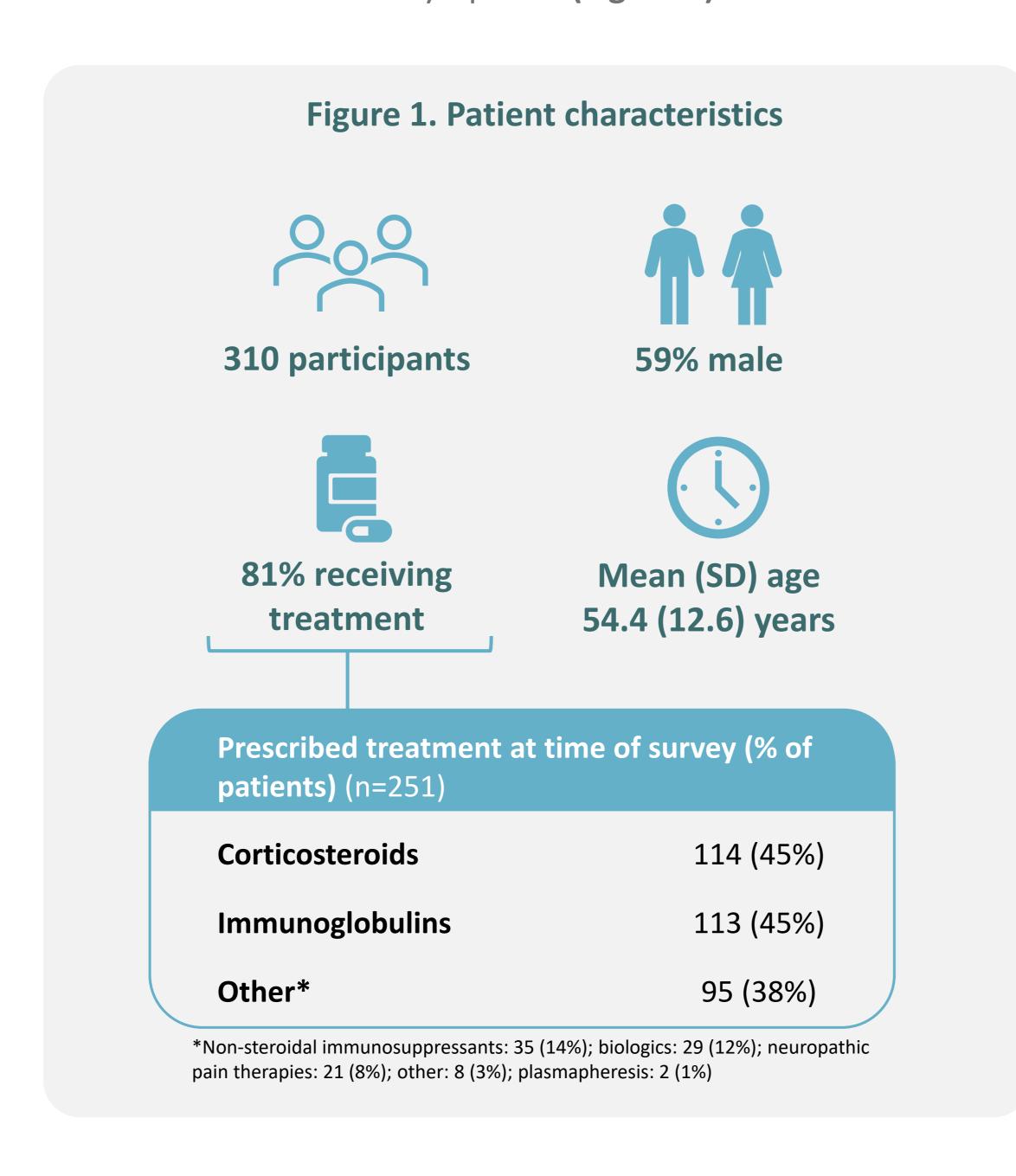
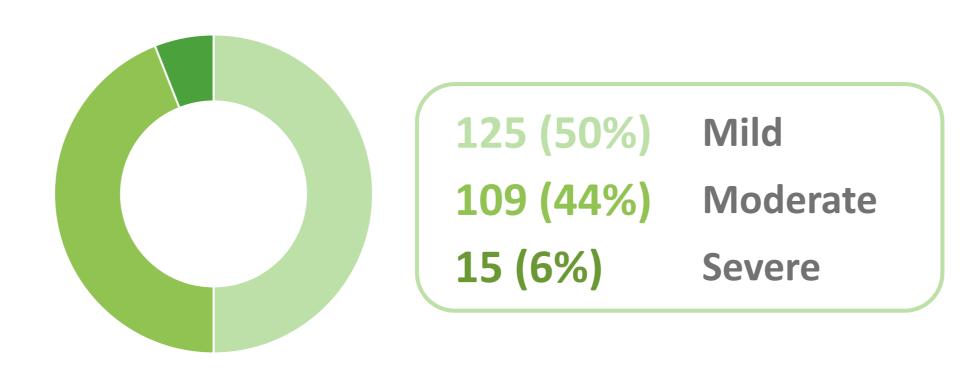


Figure 2. Symptom severity as reported by treatmentprescribed patients (n=249)



2. Symptom control and mobility aids

 "Regaining control/function of arms and/or legs" was most often reported by patients as their most important treatment goal (Figure 3).

Results

 Over half of patients used tools/home modifications to aid mobility, with a cane/walking stick being the most common (Figure 4).

Figure 3. Patients' most important treatment goal (top 5)

(n=294)

Regaining control/function of arms and/or legs

Improving overall quality of life

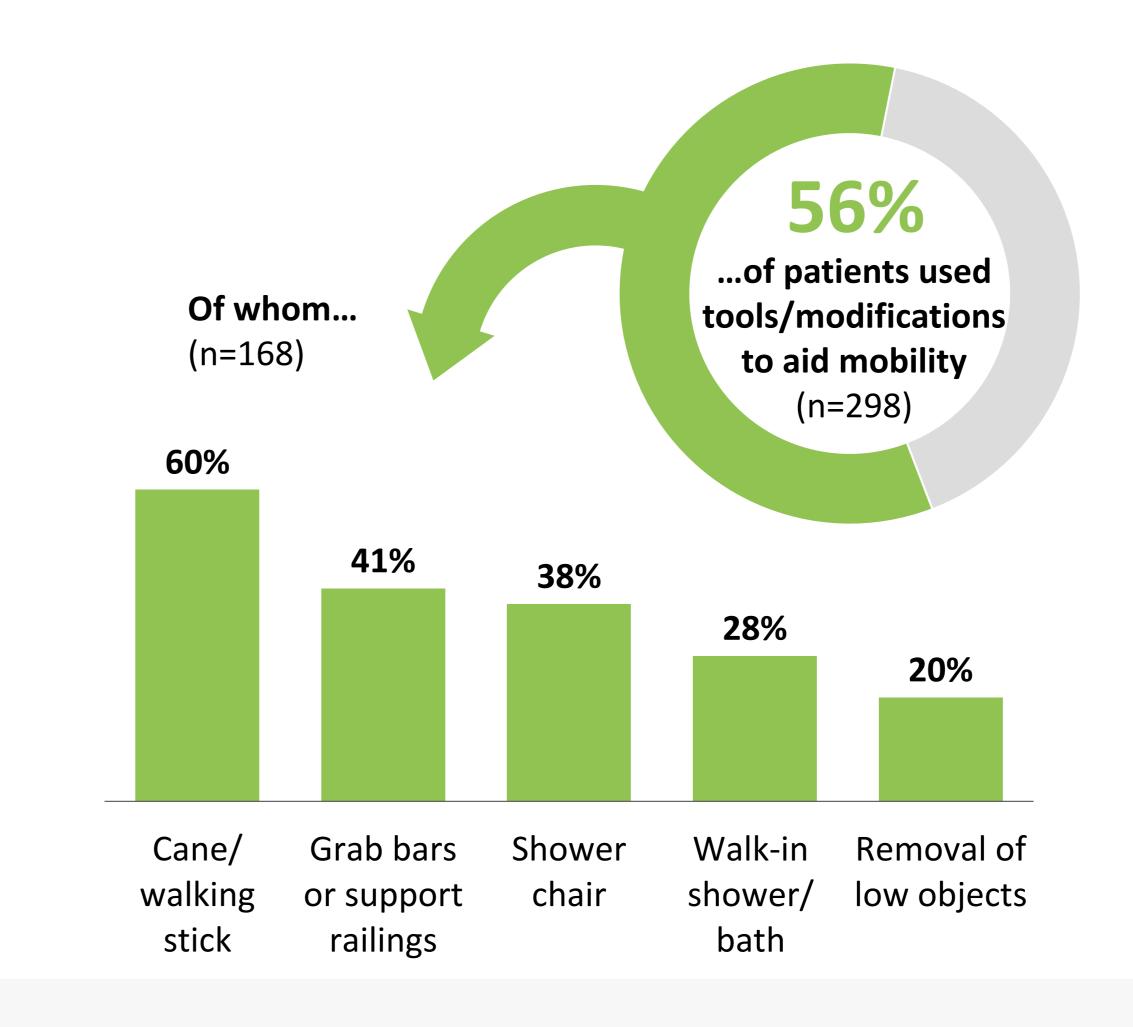
Improving balance and coordination

Stopping/reducing fatigue

Stopping/reducing sensory problems

13%

Figure 4. Supportive aids/home modifications (top 5)



3. Caregiver burden and employment status

- Over a quarter of patients required caregiver help, usually from a partner/spouse (Figure 5).
- Nearly two fifths of patients were in full-time employment, while a little under half were working part time, retired, unemployed or on long term sick leave due to CIDP. Of those, nearly half were due to their CIDP (Figure 6).

Figure 5. Caregiver burden

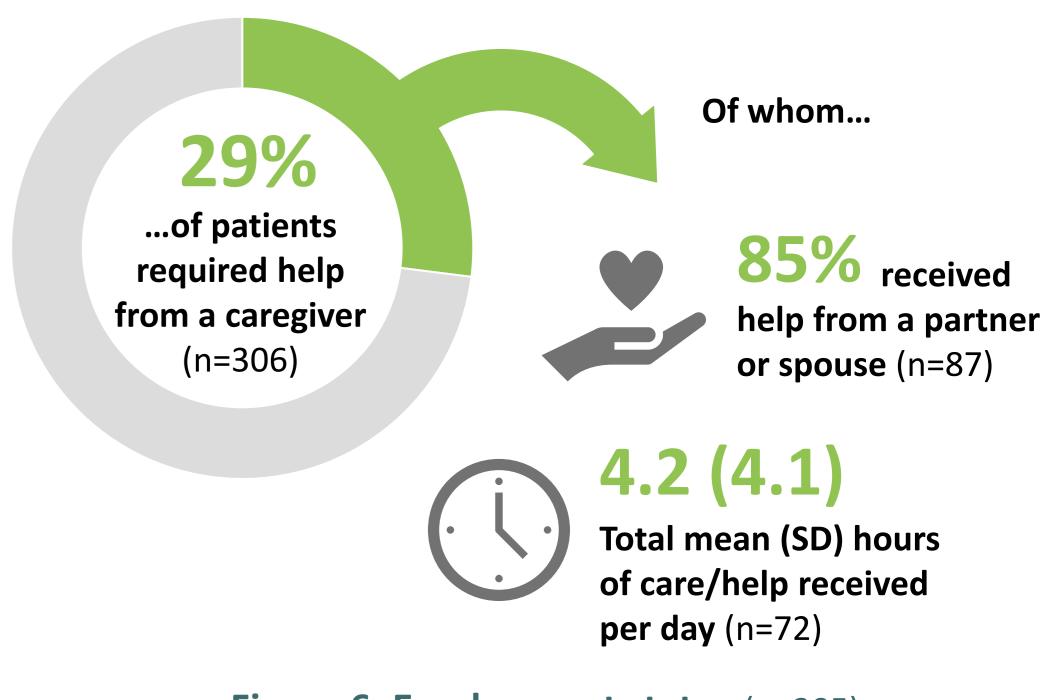
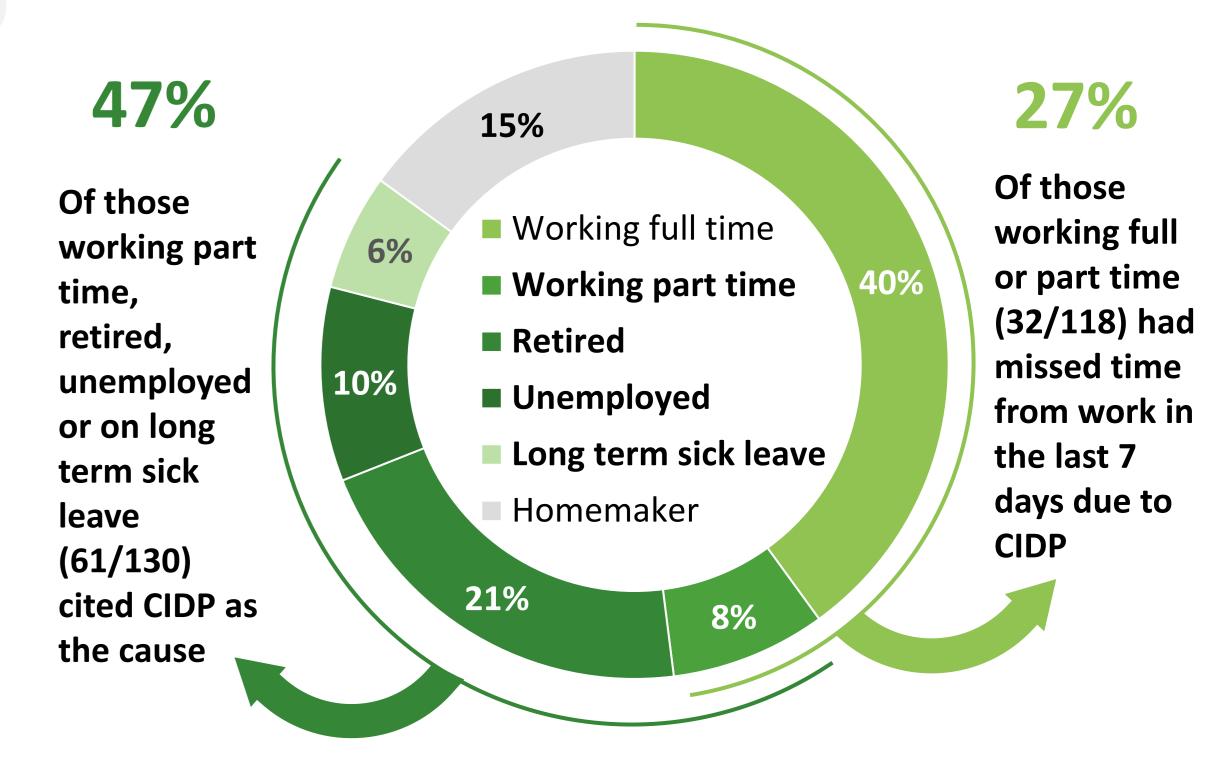


Figure 6. Employment status (n=305)



Conclusions

- Patients with CIDP experience a significant burden, often despite receiving treatment.
- They continue to experience symptoms that affect their mobility and productivity, which leads some to rely on a caregiver for help.

Abbreviations: CIDP: Chronic Inflammatory Demyelinating Polyneuropathy, N: Sample size, SD: standard deviation Funding: This study used data from the Adelphi Real World CIDP DSP, an independently conducted survey. The DSP is a wholly owned Adelphi Real World product. Argenx were one of multiple subscribers to the DSP, and funded the analysis described here.

Acknowledgments and disclosures: The material in this poster has not been previously presented or published. DN, SK, CA and AM are employees of argenx. FB, LV and SD are paid consultants for and receive grant support from argenx. RS, YT, JW and JD are employees of Adelphi Real World.