

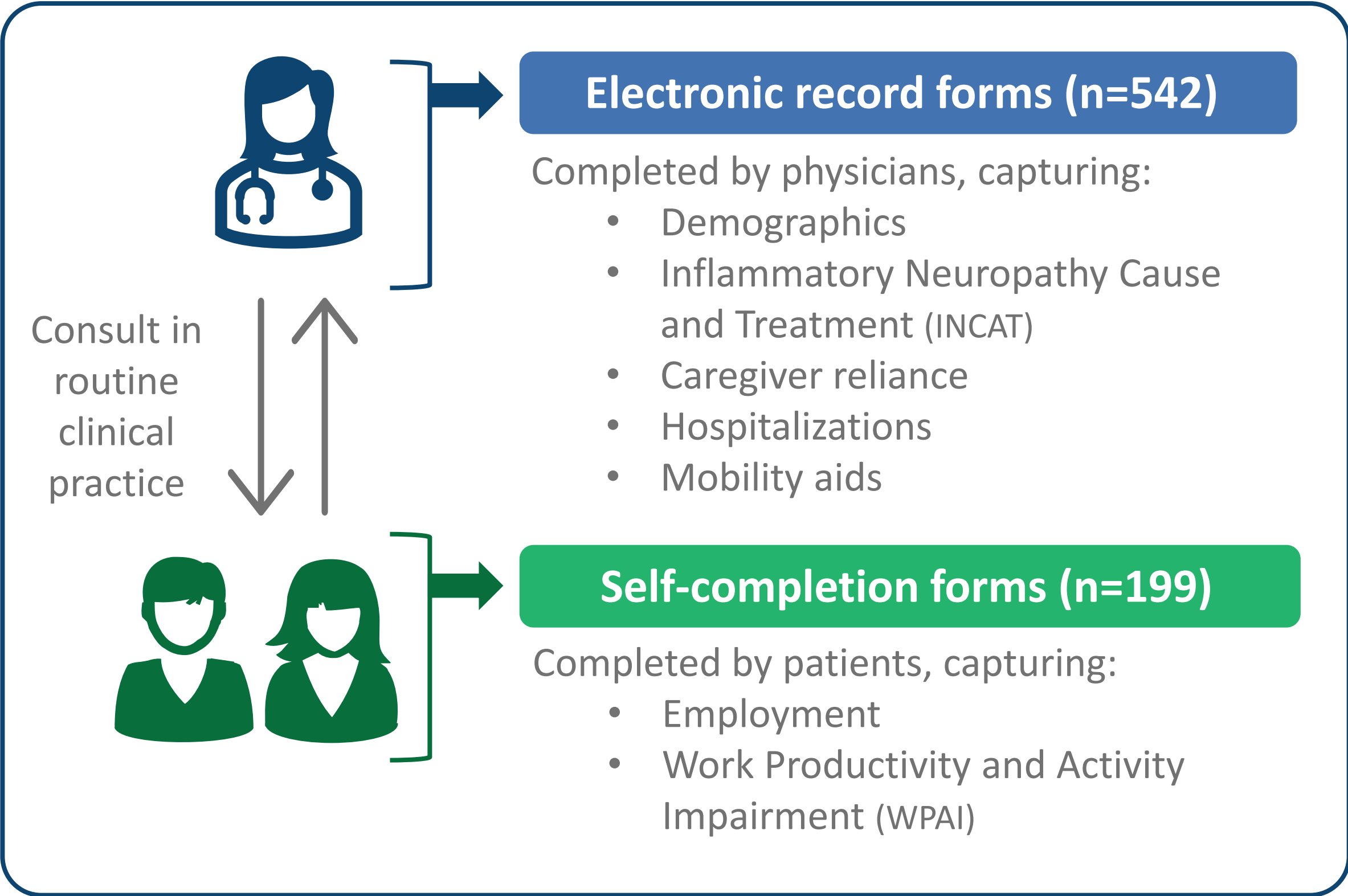
Medical and Non-Medical  
Resource Utilization Associated with CIDP  
Results from a Real-World International Survey

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BACKGROUND | METHODS

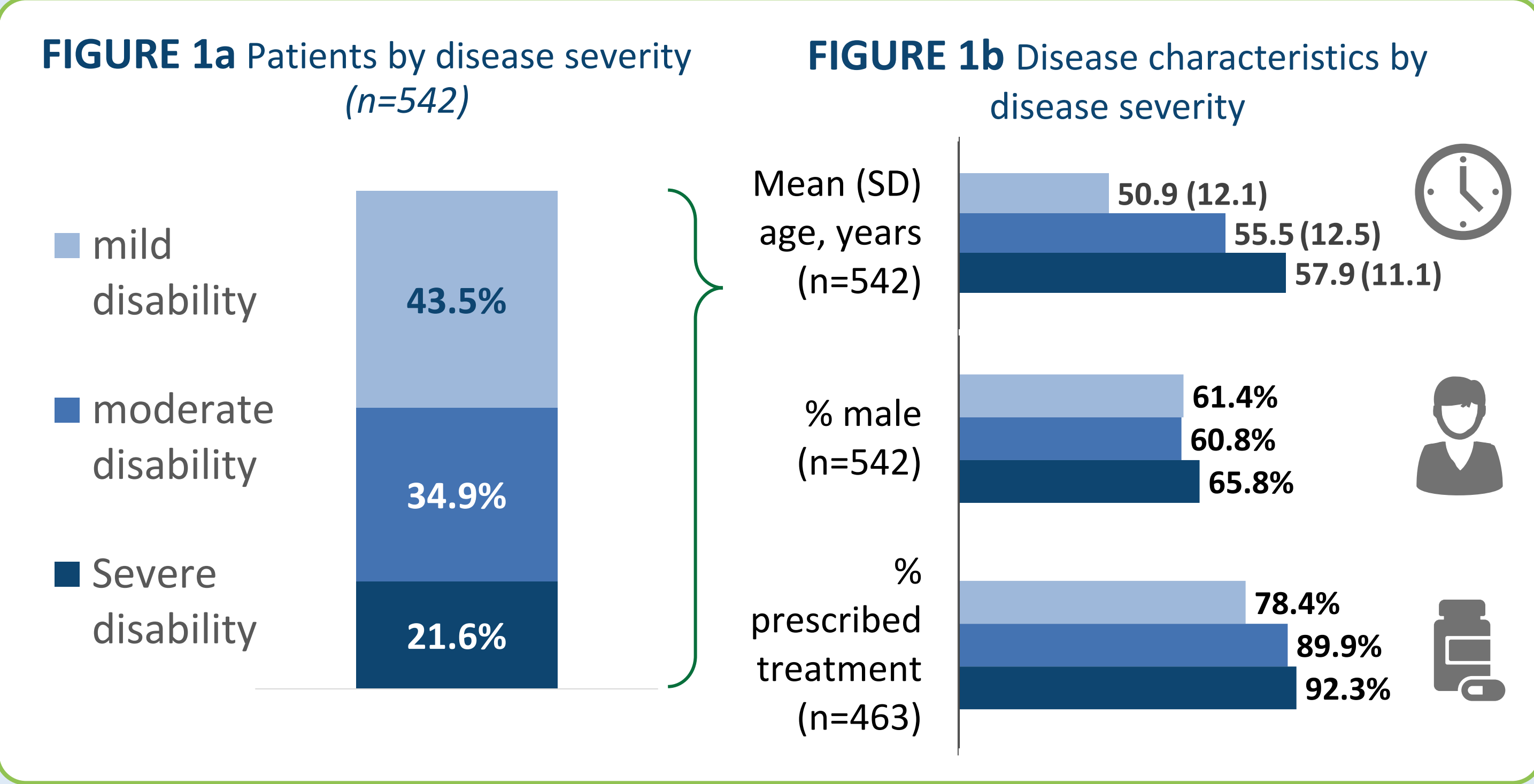
- Chronic Inflammatory Demyelinating Polyradiculoneuropathy (CIDP) is a rare autoimmune disorder causing progressive or relapsing muscle weakness and sensory symptoms.
- People with a chronic condition frequently use healthcare services and depend on loved ones to assist with activities of daily living<sup>1,2</sup>.
- We analyzed resource use and productivity losses across levels of patient disability.
- Data were drawn from Adelphi's CIDP Disease Specific Programme™ (DSP), a real-world cross-sectional survey conducted in the UK, Spain, Italy, Germany and France (September 2022-April 2023).
- Disability was measured with the INCAT disability score (0-10), grouped as mild ( 2), moderate (3-4), or severe ( 5). These categories were applied across all figures.
- Associations with disability level were tested using Kruskal-Wallis (ordinal variables) and Chi-squared (nominal variables) tests.



RESULTS

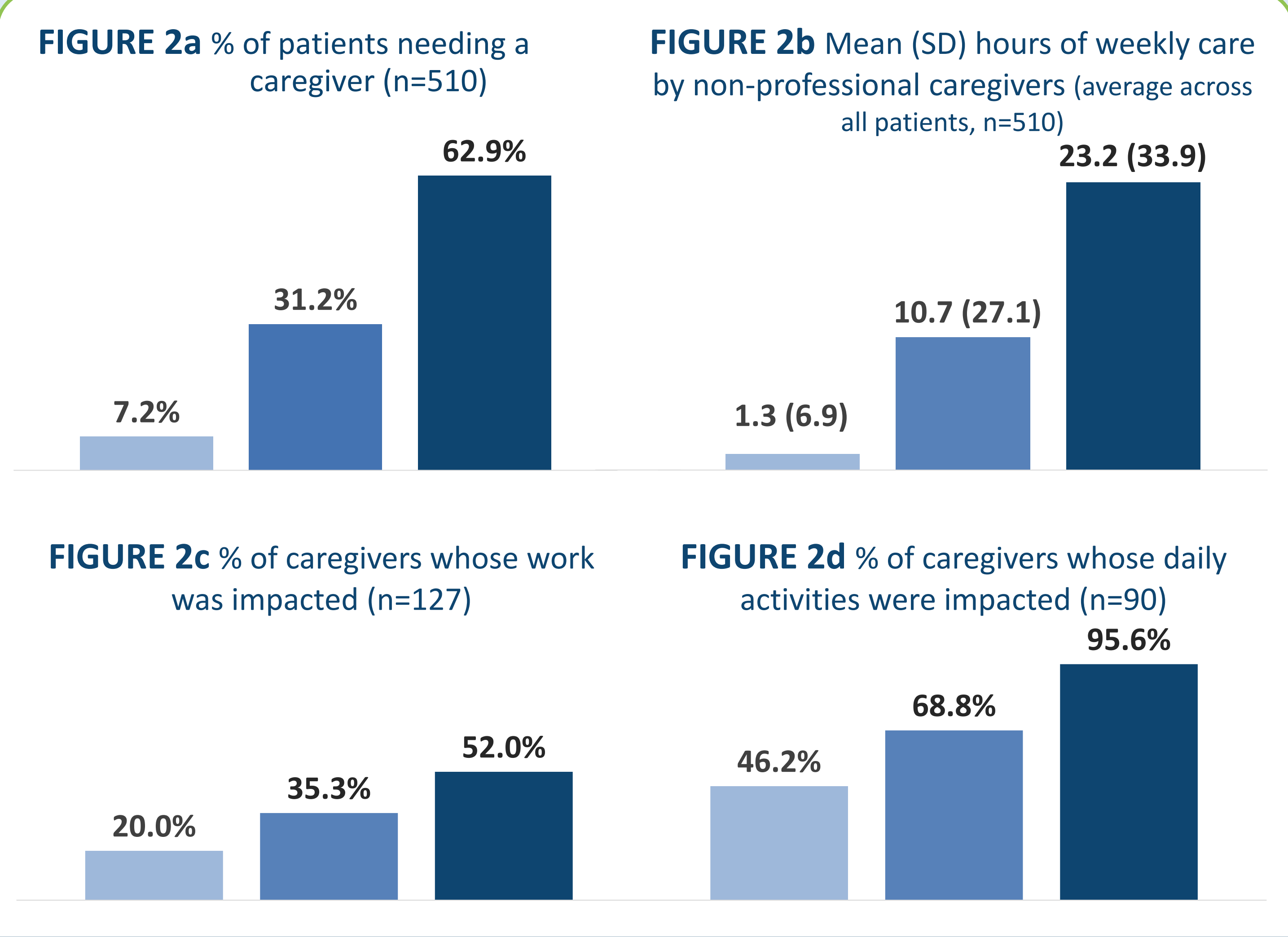
1. Patient and disease characteristics

- Of 542 patients, 236 had mild, 189 moderate, and 117 severe disability. Across disability levels, most patients were male. Mean age and treatment prescription rates increased with disability severity (p < 0.001 for both) (Figures 1a and 1b).



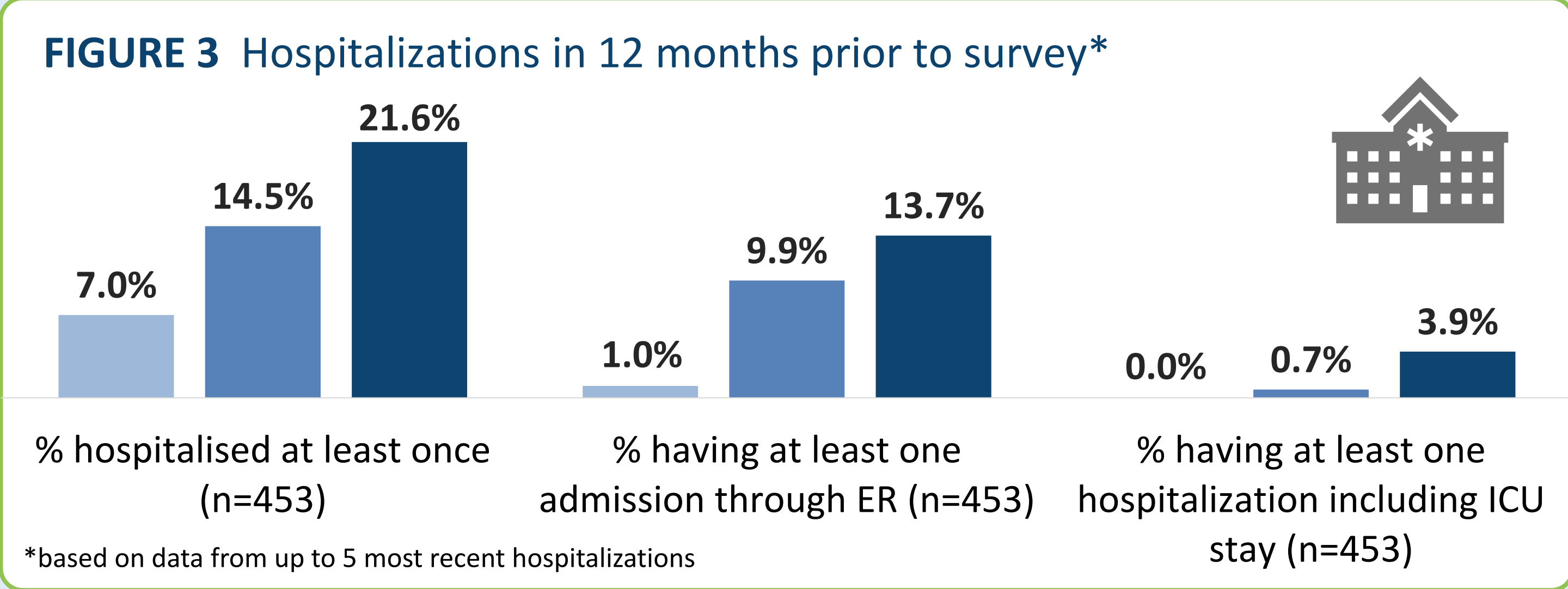
2. Non-professional caregiving

- Disability correlated significantly with caregiver reliance (p < 0.001) and the average number of weekly hours of care provided by non-professional caregivers (p < 0.001) (Figures 2a and 2b).
- The impact on caregivers' work (p = 0.028) and daily activities (p < 0.001) likewise increased with disability (Figures 2c and 2d).



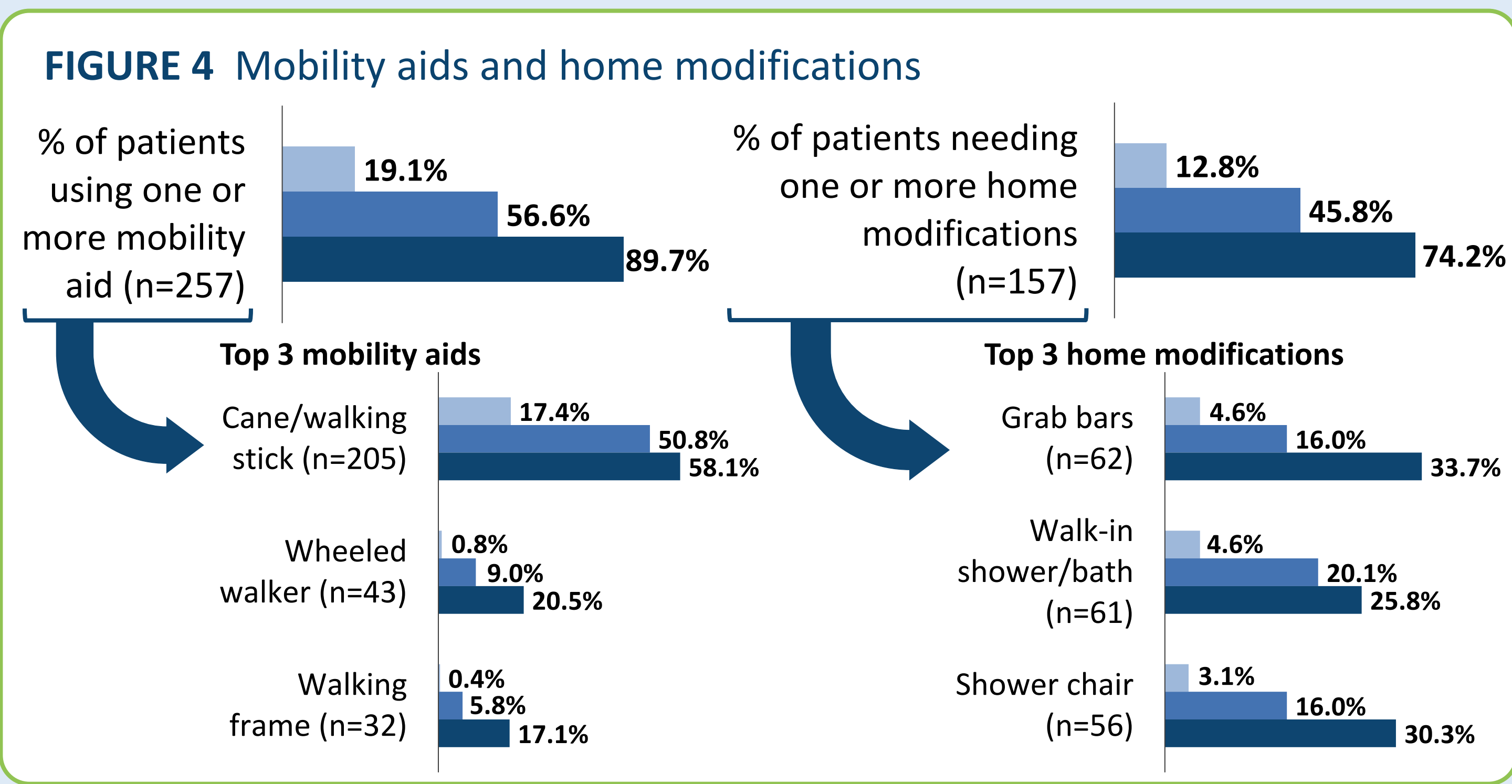
3. Hospitalizations

- Hospitalizations in the 12 months prior to the survey were more frequent with greater disability (p = 0.001), as were emergency admissions (p < 0.001) and ICU stays (p = 0.004) (Figure 3).



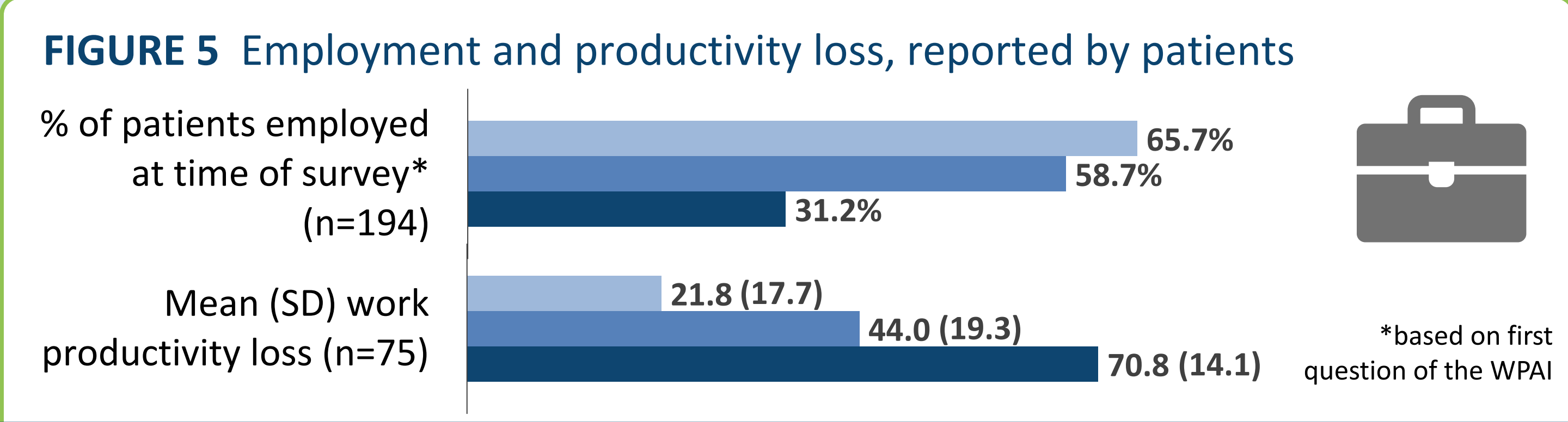
4. Mobility/supportive aids and home modifications

- The use of mobility aids and the need for home modifications correlated significantly with disability (p < 0.001 in both cases) (Figure 4).



5. Employment

- Among the 199 patients that completed the survey, higher disability was associated with lower employment rates (p = 0.003) and higher overall work productivity loss (p < 0.001) (Figure 5).



KEY TAKEAWAYS

- This study underscores the substantial and multifaceted burden of CIDP experienced across different levels of disability.
- Patient burden intensifies with disease severity and extends beyond direct medical healthcare utilization to include significant caregiver strain and loss of work productivity.
- These findings highlight the wide-ranging impact of CIDP and the need for comprehensive management strategies, particularly for patients with greater disability.