

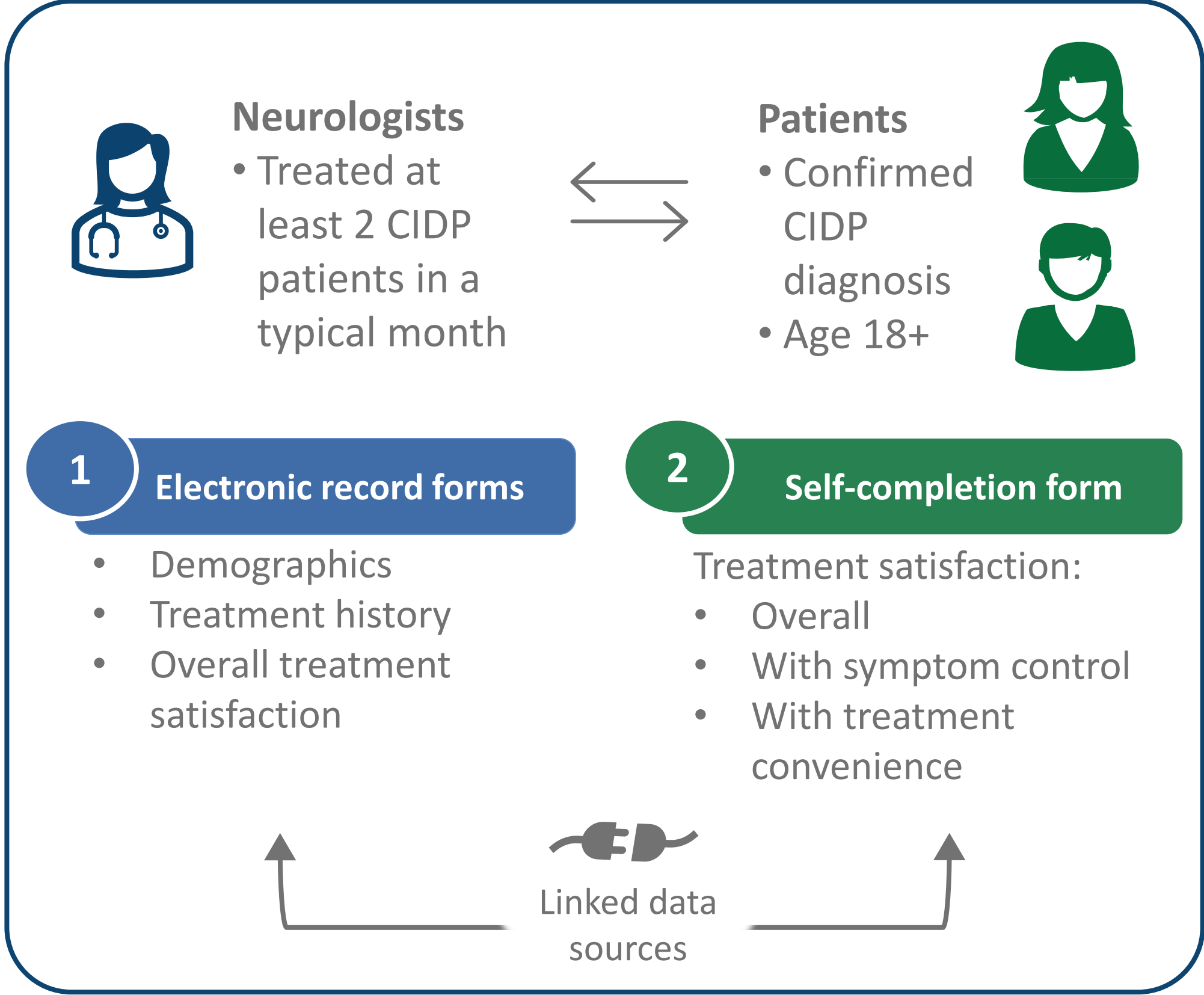
Correspondence Between Patients' and Neurologists' Satisfaction With Treatment in Patients With CIDP: Results from a Real-World International Survey

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BACKGROUND | METHODS

- Chronic Inflammatory Demyelinating Polyradiculoneuropathy (CIDP) is a rare progressive autoimmune disorder affecting the peripheral nerves, characterized by muscle weakness and sensory deficits.
- Real-world evidence reported by patients and their physicians can help ascertain the needs and burden associated with CIDP.
- We assessed the level of alignment between patient- and physician-reported treatment satisfaction using matched patient-physician data from Adelphi's CIDP Disease Specific Programme™.
- The survey was conducted in France, Germany, Italy, and Spain between April 2022 and April 2023 (n=199), with treatment satisfaction data available for **152 patients**.
- Data on patients' satisfaction with overall treatment, symptom control and treatment convenience was included when all three questions were answered.
- Patients and physicians completed slightly different Likert scales to assess treatment satisfaction: *completely satisfied / satisfied / neither / dissatisfied / completely dissatisfied* (patients) versus *very satisfied / somewhat satisfied / neither / somewhat dissatisfied / very dissatisfied* (physicians). For correspondence analyses, it was assumed these scales are the same.



RESULTS

1. Demographics

- The mean age in our sample was 52.4 (SD 12.0) years; 56.8% of patients were male, and 69.8% had typical CIDP. Out of 199 patients, 82.4% were prescribed treatment. Corticosteroids were the most prescribed treatment type (40.9%) (Table 1).

TABLE 1 Patient characteristics (n=199)

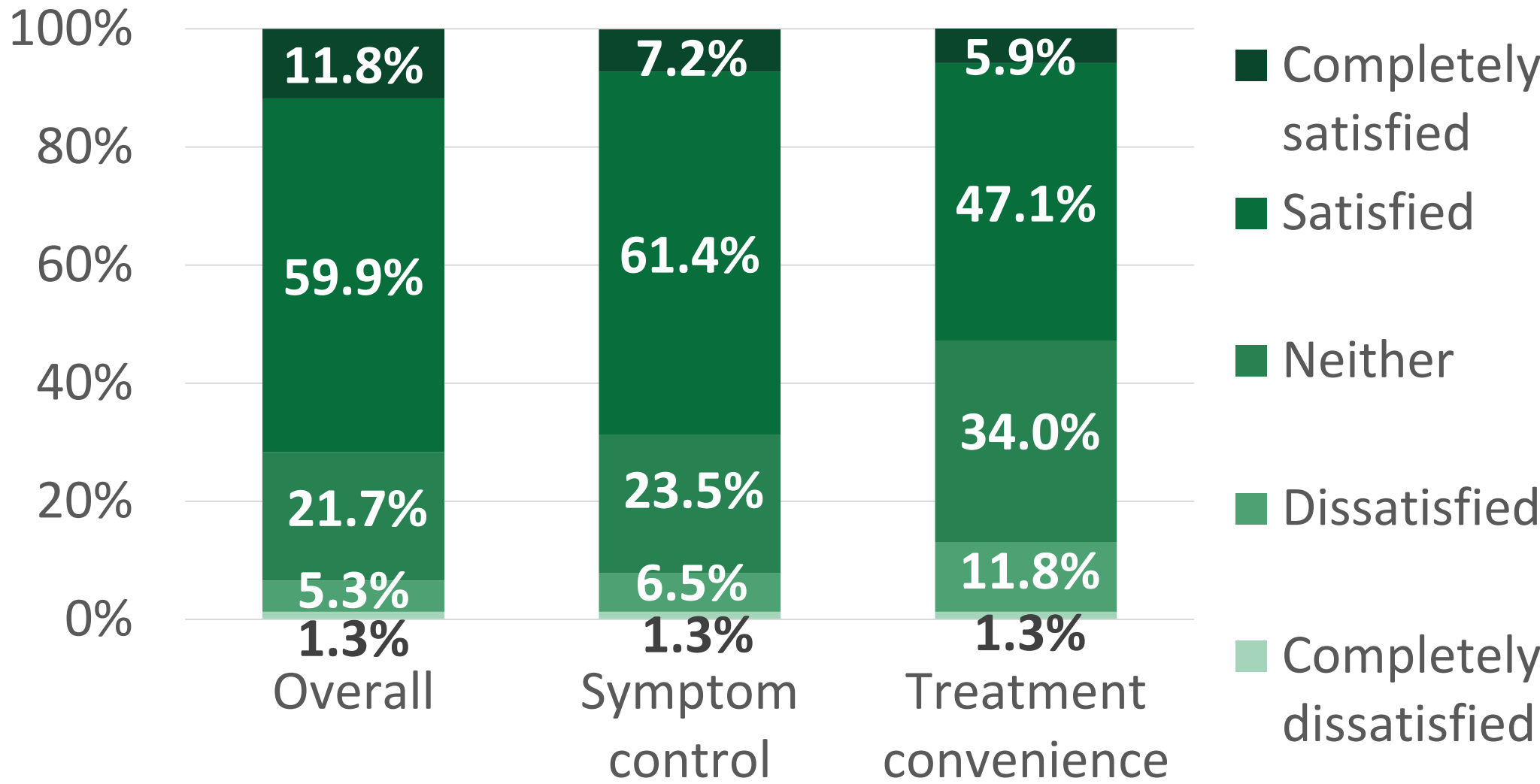
Sex, N (%)	Male	113 (56.8%)
	Female	86 (43.2%)
Age (years)	Mean (SD)	52.4 (12.0)
Country, N (%)	France	32 (16.1%)
	Germany	93 (46.7%)
	Italy	34 (17.1%)
	Spain	40 (20.1%)
CIDP type, N (%)	Typical CIDP	139 (69.8%)
	Atypical CIDP	60 (30.2%)
Prescribed treatment, N (%)		164 (82.4%)
	Immunoglobulins (no corticosteroid)	49 (29.9%)
	Corticosteroids (no immunoglobulin)	67 (40.9%)
	Both immunoglobulins & corticosteroids	13 (7.9%)
	Other*	35 (21.3%)
Time on prescribed treatment at time of survey (n=161)		Median (IQR) years 1.9 (0.8-3.3)

*Biologics: 12.8%, Non-steroidal immunosuppressants: 6.7%; neuropathic pain therapies: 1.8%; plasmapheresis: 0.6%

2. Patient satisfaction with treatment

- The majority of patients were completely satisfied or satisfied with treatment overall (71.7%) and in terms of symptom control (68.6%). Almost half were less than satisfied with treatment convenience (47.1%) (Figure 1).

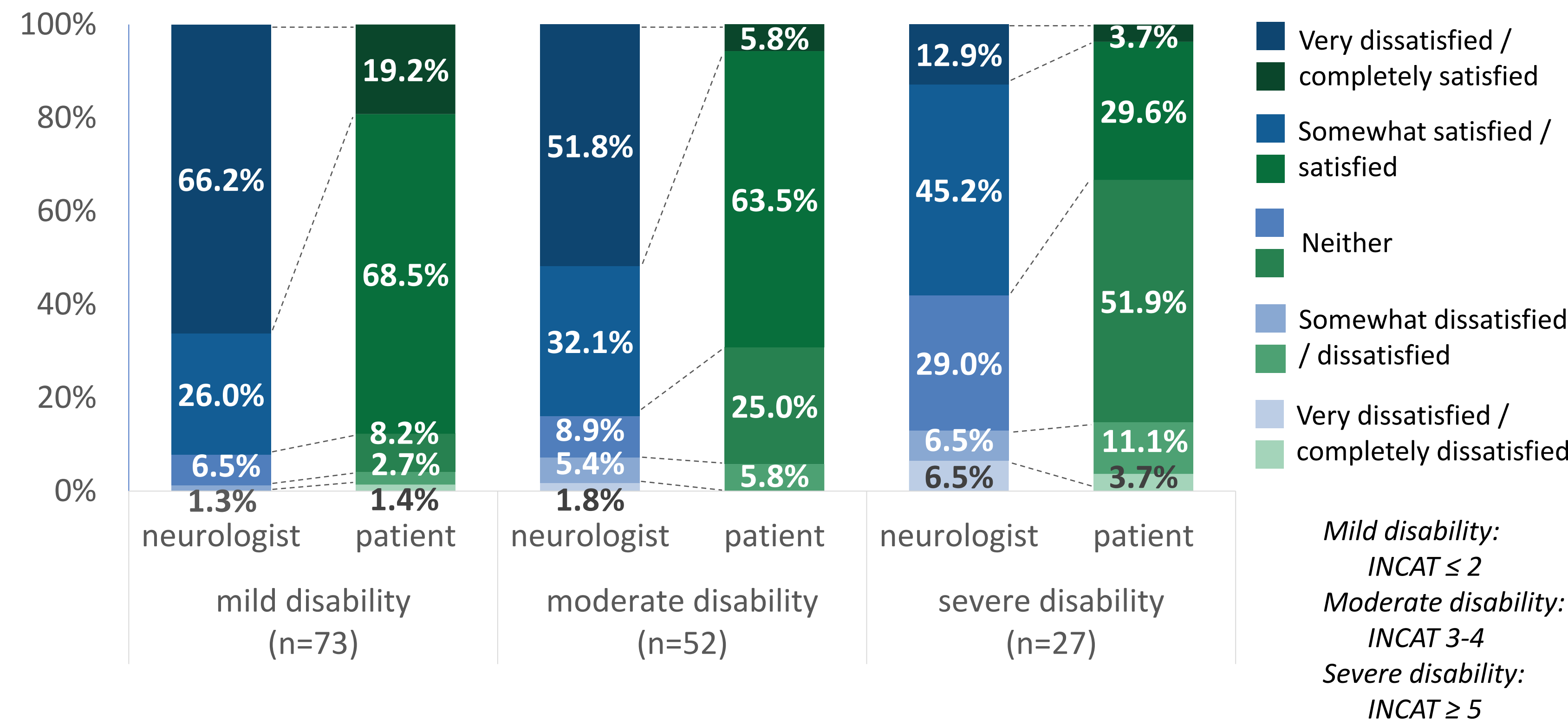
FIGURE 1 Patient satisfaction with treatment in terms of... (n=152)



3. The association between overall treatment satisfaction and disability

- Overall treatment satisfaction was significantly associated with disability level (p<0.001 for both patients and neurologists), with satisfaction decreasing as disability increased. Across all disability levels, neurologists reported higher satisfaction than patients (Figure 2).

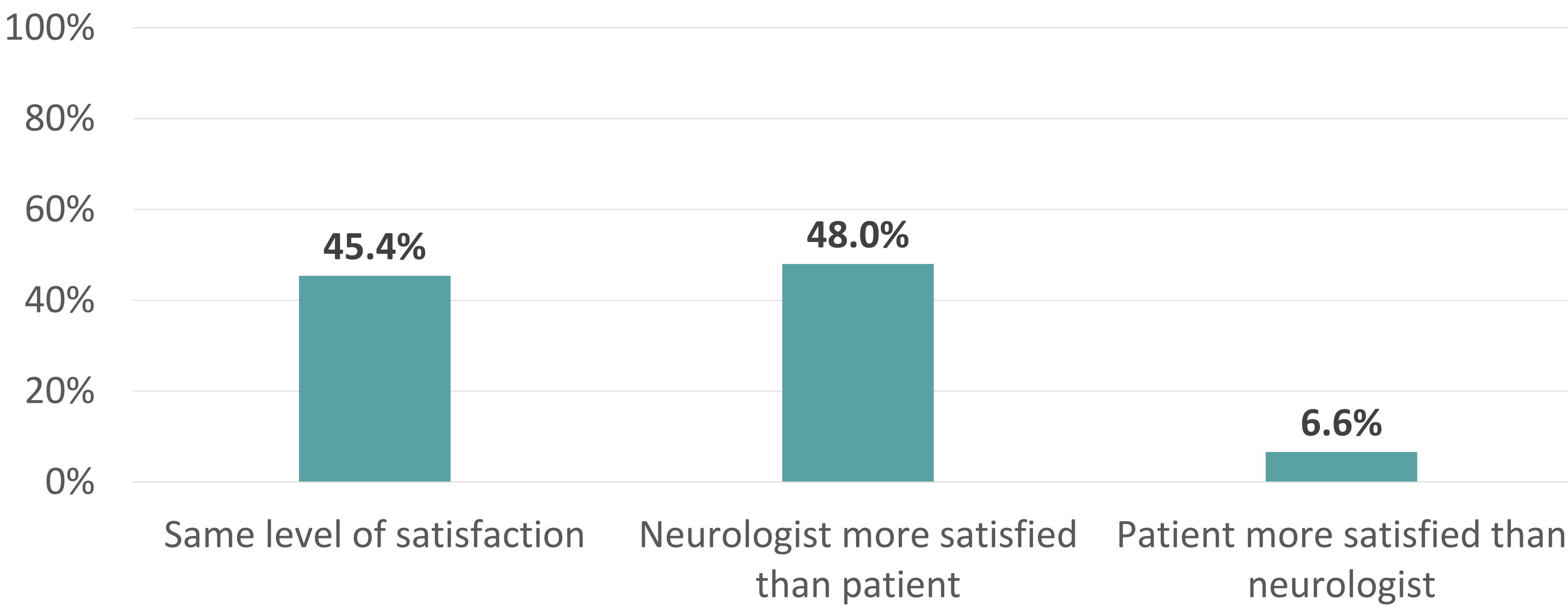
FIGURE 2 Patient vs physician-reported overall treatment satisfaction per INCAT level (n=152)



4. Alignment between patient and physician-reported treatment satisfaction

- Neurologists reported higher overall treatment satisfaction than patients in 48.0% of cases. Agreement between both parties occurred slightly less often (45.4%), while patients reported higher satisfaction than neurologists in only 6.6% of cases (Figure 3).

FIGURE 3 Alignment between overall treatment satisfaction reported by patients and neurologists (n=152)



* This analysis assumes that the different Likert scales completed by patients and physicians can be treated as equal.

KEY TAKEAWAYS

- High usage of corticosteroids despite the approval of Ig indicates a potential unmet need for new treatments.
- Treatment satisfaction decreased with increasing disability. Across disability levels, physicians reported higher satisfaction than patients.
- Physician and patients were **not aligned** in their satisfaction with treatment in **over half of the cases**; physicians were more likely to report a higher satisfaction level than patients.
- This points to potential gaps in perception that may impact patients' management, adherence and quality of life.

