

# Impact of CIDP on Health-Related Quality of Life, Fatigue and Daily Activities

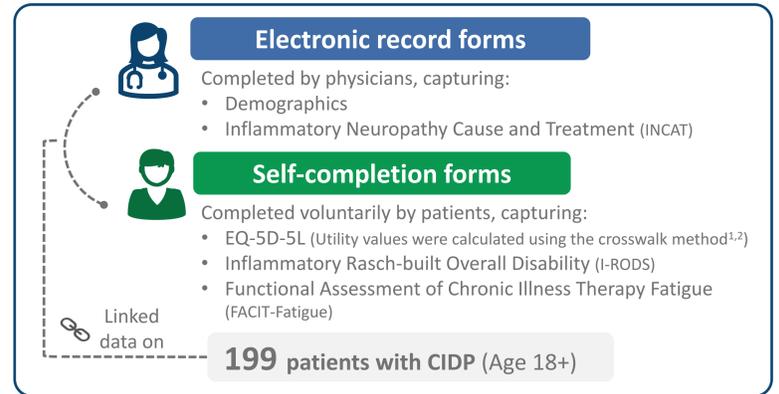
## Results from a Real-World International Survey

Febe Brackx, Ir, Msc,<sup>1</sup> Clémence Arvin-Berod, PharmD,<sup>2</sup> Sandra Paci, PhD,<sup>2</sup> Lucas Van de Veire, MA,<sup>1</sup> Yasmin Taylor, Mbiol,<sup>3</sup> Jack Wright, MSc,<sup>3</sup> Sarah Dewilde, PhD,<sup>1</sup>

<sup>1</sup>Services in Health Economics (SHE) BV, Brussels, Belgium  
<sup>2</sup>argenx BV, Ghent, Belgium; <sup>3</sup>Adelphi Real World, Bollington, UK

### BACKGROUND | METHODS

- Patients suffering from Chronic Inflammatory Demyelinating Polyradiculoneuropathy (CIDP), a rare, immune-mediated disorder, experience muscle weakness and sensory symptoms.
- Our analysis examines HRQoL, disability, fatigue, and limitations in daily activities among CIDP patients, and explores associations between these outcomes.
- We analyzed matched physician-patient data from Adelphi's CIDP Disease Specific Programme™ (DSP), a multinational cross-sectional survey conducted in France, Germany, Italy, and Spain (September 2022-April 2023).
- We used Spearman rank correlation coefficients and linear regression to estimate associations between the different outcomes.



### RESULTS

#### 1. Demographics and outcome measures

- Patients' mean (SD) age was 52.4 (12.0) years, with 56.8% being male. At the time of the survey, 82.4% were prescribed treatment, with a median (Q1–Q3) time since diagnosis of 2.7 (1.3–5.1) years.
- Patients reported a mean (SD) utility value of 0.65 (0.22); 67.2% suffered from moderate to severe fatigue, 27.7% experienced substantial limitations in daily activities, and 48.3% had moderate to severe disability (Table 1).

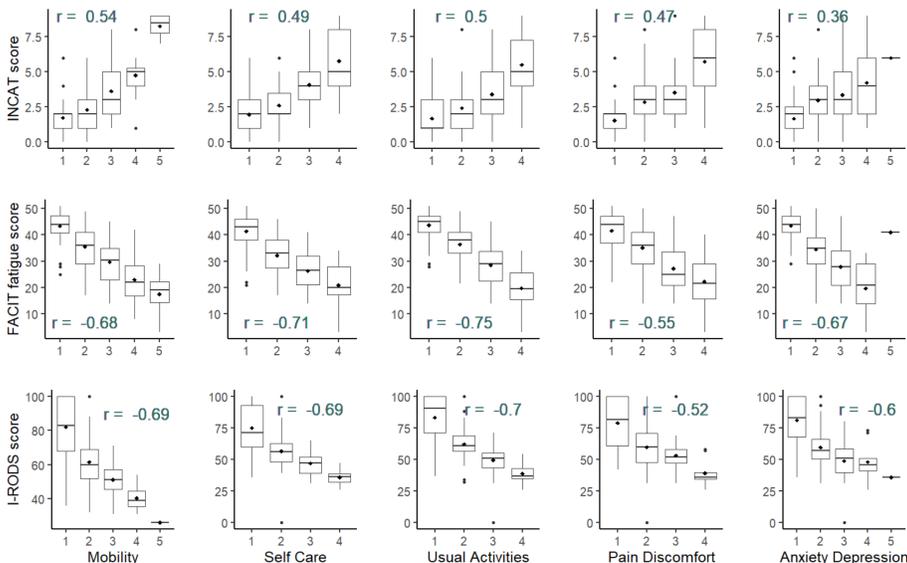
**TABLE 1** FACIT-Fatigue, I-RODS and INCAT scores, and EQ-5D-5L utility values

EQ-5D-5L Utility value	n=194
Mean (SD)	0.65 (0.22)
INCAT score	n=199
Mean (SD)	2.8 (1.9)
n (%) Mild disability (≤2)	103 (51.8%)
n (%) Moderate disability (3 – 4)	64 (32.2%)
n (%) Severe disability (≥ 5)	32 (16.1%)
I-RODS score	n=177
Mean (SD)	62.5 (20.3)
n (%) Few/no limitations (≥80)	38 (21.5%)
n (%) Mild limitations (51–79)	90 (50.8%)
n (%) Moderate to severe limitations (≤50)	49 (27.7%)
FACIT-Fatigue score	n=198
Mean (SD)	34.8 (9.9)
n (%) Mild fatigue (>40)	65 (32.8%)
n (%) Moderate fatigue (21 - 40)	115 (58.1%)
n (%) Severe fatigue (≤20)	18 (9.1%)

#### 3. EQ-5D-5L domains' associations with INCAT, I-RODS and FACIT

- Scores on the EQ-5D-5L's domains (1=no problems, 5=extreme problems) were all negatively associated with FACIT-Fatigue and I-RODS scores, and positively associated with the INCAT score, meaning that greater fatigue, poorer physical functioning, and greater disability were linked to more problems reported across the EQ-5D-5L domains. These associations were strongest for the domains Mobility, Self Care and Usual Activities (Figure 2).

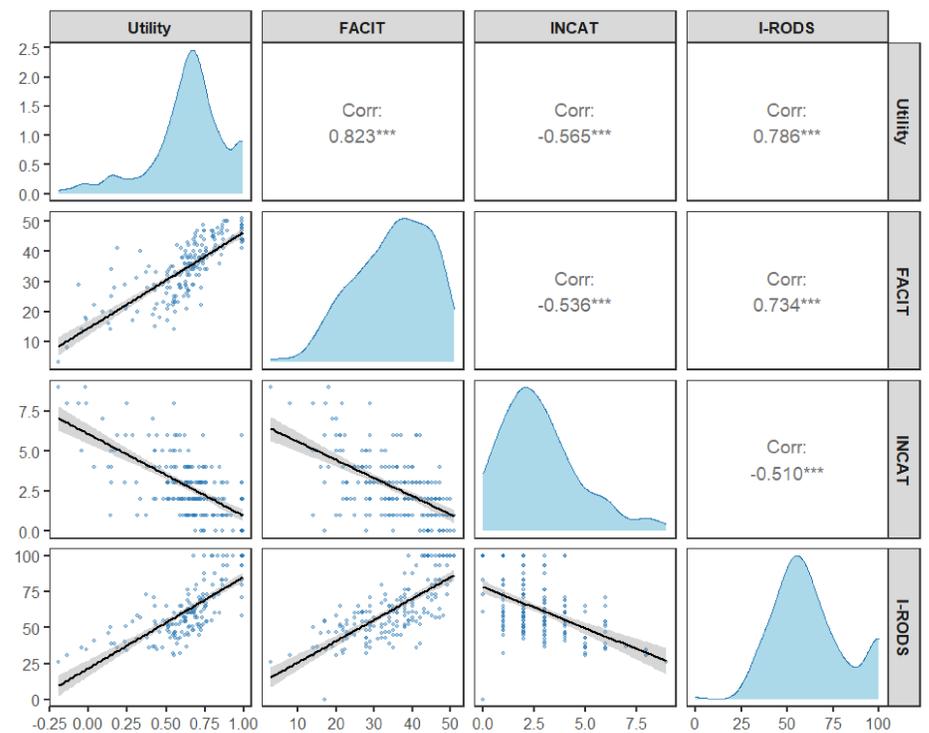
**FIGURE 2** Boxplots of INCAT, FACIT-Fatigue, and I-RODS by EQ-5D-5L Domains with Spearman Correlations



#### 2. Associations between EQ-5D-5L and INCAT, I-RODS and FACIT

- Utility values demonstrated a moderate negative correlation with INCAT ( $r = -0.568$ ) and showed strong positive correlations with FACIT-Fatigue and I-RODS ( $r = 0.799$  and  $r = 0.770$ , respectively) (Figure 1).

**FIGURE 1** Scatter plots (lower half), density plots (diagonal) and Spearman correlation coefficients (upper half) for the EQ-5D-5L utility values, FACIT-Fatigue scores, INCAT scores and I-RODS scores



#### 4. Multiple linear regression analysis for EQ-5D-5L utility value

- INCAT (beta= -0.024, 95% CI=[-0.036,-0.013]), FACIT-Fatigue (beta=0.009, 95% CI=[0.006,0.012]) and I-RODS (beta=0.004, 95% CI=[0.002,0.005]) were significant covariates in a multiple linear regression model with utility value as outcome (Table 2).

**TABLE 2** Multiple linear regression analysis for the EQ-5D-5L utility value

	Beta coefficient	95% CI	t-value	p-value
Intercept	0.179	0.071, 0.288	3.235	0.001
FACIT score	0.009	0.006, 0.012	6.668	<0.001
INCAT score	-0.024	-0.036, -0.013	-4.07	<0.001
I-RODS score	0.004	0.002, 0.005	4.951	<0.001

### KEY TAKEAWAYS

- Patients faced **significant disability, functional limitations and fatigue** because of their CIDP, indicating a **substantial burden**.
- Symptom severity has a marked impact on quality of life, demonstrated by **significant associations between utility values and disability, functional limitations and fatigue**.
- CIDP patients showed lower utility values than population norms<sup>3,4</sup> (0.84– 0.88), indicating **reduced HRQoL**.

PRESENTED AT THE PROFESSIONAL SOCIETY FOR HEALTH ECONOMICS AND OUTCOMES RESEARCH (ISPOR); NOV 9 – NOV 12, 2025; GLASGOW, SCOTLAND, UK

**ABBREVIATIONS:** CIDP: Chronic Inflammatory Demyelinating Polyneuropathy, N: Sample size, SD: standard deviation, **FACIT-Fatigue:** Functional Assessment of Chronic Illness Therapy Fatigue, **INCAT:** Inflammatory Neuropathy Cause and Treatment, **I-RODS:** Inflammatory Rasch-built Overall Disability, **Q1:** 1<sup>st</sup> quantile (25% percentile), **Q3:** 3<sup>rd</sup> quantile (75% percentile)

**ACKNOWLEDGMENTS:** This study used data from the Adelphi Real World CIDP DSP, an independently conducted survey. Argenx were one of multiple subscribers to the DSP, and funded the analysis described here. The material in this poster has not been previously presented or published. **CA** and **SP** are employees of argenx. **FB**, **LV** and **SD** are paid consultants for and receive grant support from argenx. **JW** and **YT** are employees of Adelphi Real World.

**REFERENCES:** 1. Van Hout et al. (2012) – Mapping EQ-5D-5L to EQ-5D-3L value sets. Value Health, 15(5):708–715. 2. Dolan (1997) – UK EQ-5D-3L valuation model. Med Care, 35(11):1095–1108. 3. Grochtdreis et al. (2019) – German population norms for EQ-5D-5L. Eur J Health Econ, 20:933–944. 4. Janssen et al. (2018) – EQ-5D-3L population norms across 20 countries. Eur J Health Econ, 20(2):205.

SCAN ME

