

RWD12

MEDICATION ADHERENCE AND QUALITY OF LIFE OF PATIENTS
WITH MULTIPLE SCLEROSIS IN BULGARIA –
A PILOT STUDY



Seitaridou Y¹, Chamova T², Mitov K¹, Pesheva M¹, Vakov G¹, Petrova G¹, Kamusheva M¹

¹ Department of Organization and economics of pharmacy, Faculty of Pharmacy, Medical University – Sofia, Bulgaria

² Clinic of Neurology, Alexandrovska University Hospital, Sofia, Bulgaria

Virtual ISPOR Europe 2022, 6 – 9 November #ISPOREurope

OBJECTIVES

- ✓ To evaluate medication adherence (MA) and quality of life of patients with relapsing remitting multiple sclerosis (RRMS) in Bulgaria and the determinants that influence MA.

METHODS

- ✓ A pilot, cross-sectional, and prospective study among 18 patients with MS treated at the Clinic of Neurology in University Hospital Alexandrovska, Sofia, Bulgaria was initiated in April 2022.
- ✓ A questionnaire about patients’ demographic, clinical characteristics, and standardized instruments (EQ-5D, VAS and Morisky test) to evaluate quality of life and to assess patient’s MA were applied.
- ✓ Results were processed through statistical analysis using MedCalc software version 16.4.1

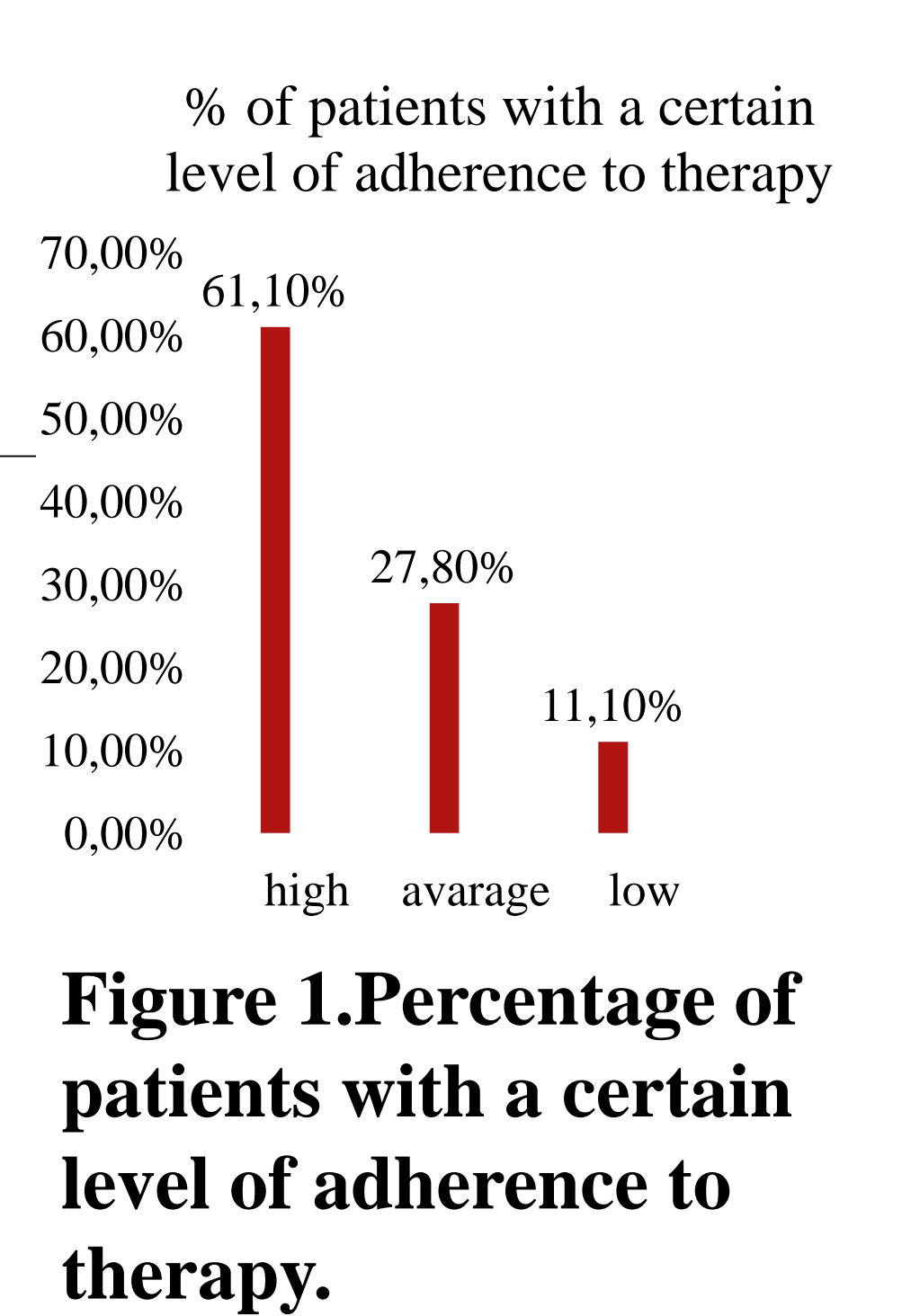
RESULTS

- ✓ This pilot study included 18 MS patients as most were female (72.2%, p=0,0593) and prevailed those in the age group 30-40 years (50,0 %). (**Table 1.**)
- ✓ The median years lived with MS were 5.5 (p=0.0113). (**Table 1.**)
- ✓ More than 80% of the observed patients were employed (p=0.0155) and around 44% were with reduced work capacity. (**Table 1.**)
- ✓ The largest was the number of patients treated with injectables 61,1 % (p=0.0155), 50 % were treated with interferons, 38,9 % - immunosuppressants and 11,1 % - immunomodulators (p=0.1146). (**Table 1.**)
- ✓ The median values for quality of life were 80 [95% CI 60-90, VAS-score] and 0,84 [95% CI 0.7359-1.00, EQ-5D test] and they were similar among different genders, age groups, MA level or types of therapy. (**Table 1.**)
- ✓ High level of adherence was reported by **61,1 %** of the patients (p=0.0302). (**Figure 1.**)
- ✓ At a sample level the odds for being adherent were **1.2 higher** in women than in men [OR=1.1667 95% CI 0.0742-18.3469, p=0.9127] and 2 times higher in case of shorter duration of MS [OR=2.00 95% CI 0.09019-44.353, p=0.6611]. (**Table 2.**)

CONCLUSIONS

- ✓ At this stage of the study, we can conclude that MA among MS patients is high and depends on the duration of disease and gender. However, these hypotheses should be further confirmed by collecting more data.

Variable	Value	P value
gender		
men	27.8%	P = 0.0593
women	72.2%	
Age		
18-30 years old	11.1%	
30-40 years old	50%	
40-50 years old	22.2%	
50-60 years old	16.7%	
Professional status		
employed	83.3%	P<0.0001
unemployed	11.1%	
retiree	5.6%	
Years living with the disease	Median = 5.5 years, 95% CI 4-11.723	
Type of MS		
Relapsing – remitting MS (RRMS)	100%	
Type of Therapy		
immunosuppressants	38.9%	P=0.1146
interferons	50%	
immunomodulators	11.1%	
Type of Therapy		
p.o.	33.3%	P=0.0155
s.c.	61.1%	
i.v.	5.6%	
Quality of Life (VAS)	Median = 80.00, 95% CI 60-90	
Quality of Life (EQ-5D)	Median = 0.84, 95% CI 0.7359-1.00	
Quality of Life (EQ-5D) and level of adherence		
Low level	0.895	P=0.140461 Kruskal-Wallis test
Avarage level	0.76	
High level	1.00	



Determinant	High level of adherence (N)	Low level of adherence (N)	OR, 95% CI, p
Gender			
Female	7	2	OR=1.1667 95% CI 0.0742-18.3469 P=0.9127
Male	3	1	
Year lived with MS			
<=10 years	6	1	OR=2.00 95% CI 0.09019-44.353 P=0.6611
>10 years	3	1	
Type of therapy			
p.o.	2	1	OR = 0.25 95% CI 0.01044-5.9851 p=0.3922
s.c.	8	1	
Type of therapy			
Имуносупресори	3	1	OR=0.5 95% CI 0.0225-11.0882 p=0.6611
Интерферони	6	1	
Age			
18-40 years	6	2	OR=0.75 95% CI 0.0497-11.3114 p=0.8354
>40 years	4	1	

Table 1. Results from statistical analysis.

Table 2. Characteristics of the determinants that influence MA.