

Patients' preferences for atopic dermatitis treatments in Europe: a discrete choice experiment

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Background & Objective

- Atopic dermatitis (AD) is a widespread chronic inflammatory dermatological disease [1]. Possible symptoms include intense itching, pain, vesiculation, crusting, erythema and scaling [2, 3], often accompanied by social isolation, stigmatization and lower self-esteem which can result in depressive, anxiety or sleep disorders [3–6].
- Prevalence in adults living in the EU ranges from 2.2% in Germany to 8.1% in Italy [7].
- It is of utmost important to deliver appropriate therapies to affected people that are in line with their preferences. Preference research can help to elicit most important treatment attributes for patients.
- This study aims to investigate AD patients' preferences for AD treatment attributes.**

Methods

- We conduct an online discrete choice experiment (DCE) with adult AD patients in Europe.
- Adult people, i.e. 18 years or older, with a physician-confirmed AD diagnosis and living in Germany, Austria, Switzerland, the Netherlands, Belgium, UK or Ireland can participate in the study. All severity levels are included.
- Attributes and levels were identified by literature search and consultations with AD patients, dermatologists and preference research experts. Six attributes with three to four levels each were chosen:
 Reduction in itching, time to onset of action, risk of serious infection, mode and frequency of administration, long-term disease management, availability on the market
- The questionnaire incorporates 15 hypothetical discrete-choice tasks, including a dominance test, with two options each. Participants are asked to choose the preferred treatment. An example is presented in Figure 1.
- A pilot test has been conducted to test comprehensibility and completeness.
- Participants are recruited with the help of patient associations and support groups (line 1) starting from February 2024. Recruitment has been enlarged to doctor's offices (line 2) and is still ongoing.



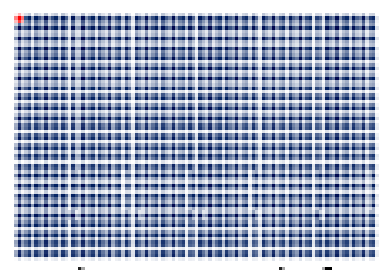
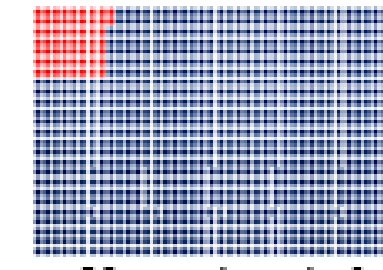


	Treatment A	Treatment B
Reduction in itching Reduction in itching (on a scale ranging from 0 (no itch reduction) to 10 (complete itch reduction))	Complete itch reduction (10 points on a scale from 0-10) 	Moderate itch reduction (4 points on a scale from 0-10) 
Time to onset of itch relief The time until the treatment starts to work	1 day	7 days (1 week)
Risk of serious infection Annual risk of experiencing a serious infection (for example an upper respiratory tract infection)	 1 person out of 1000 (0.1%)	 60 people out of 1000 (6%)
Mode and frequency of administration How the treatment is provided to you	 Emollient with preservatives 2 times a day	 1 self-injection every other week
Long-term disease management The time you can continue to use the treatment	5 years	1 year
Availability on the market The time the treatment is already available on the market	Available for 1-5 years	Available for less than 1 year
	Treatment A	Treatment B

Figure 1: Example discrete-choice task.

Results

- Fifty-nine AD patients were included in the analysis (80% female, mean age 38 years).
- Significant coefficients were observed for at least one level per attribute except for availability on the market.
- The efficacy attribute (itch reduction) was the most important for patients (50%), followed by infection risk (23%) and long-term disease management (10%). Time of onset (7%) and mode of administration (6%) seemed to play minor roles and availability on the market was least important (5%) (Figure 2).
- Overall, directions of preferences were in line with expectations (Figure 3).
- It seems that having to switch less between therapies as one therapy can be used for several years plays a role when patients choose their AD treatment.
- From given choices, emollients twice a day without preservatives was clearly the preferred mode of administration which indicates the relevance of preservatives for AD patients.

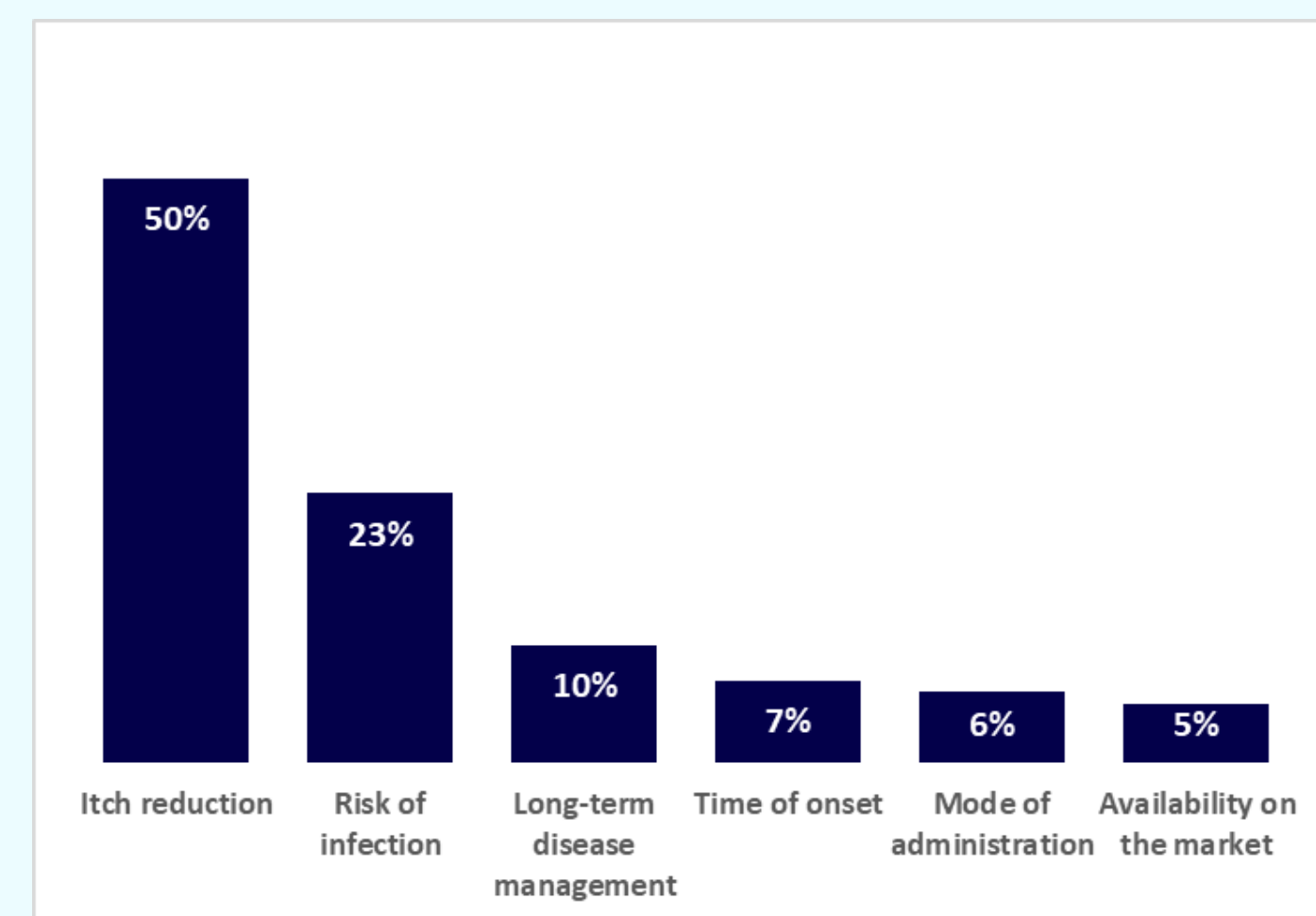


Figure 2: Relative importance of treatment attributes.

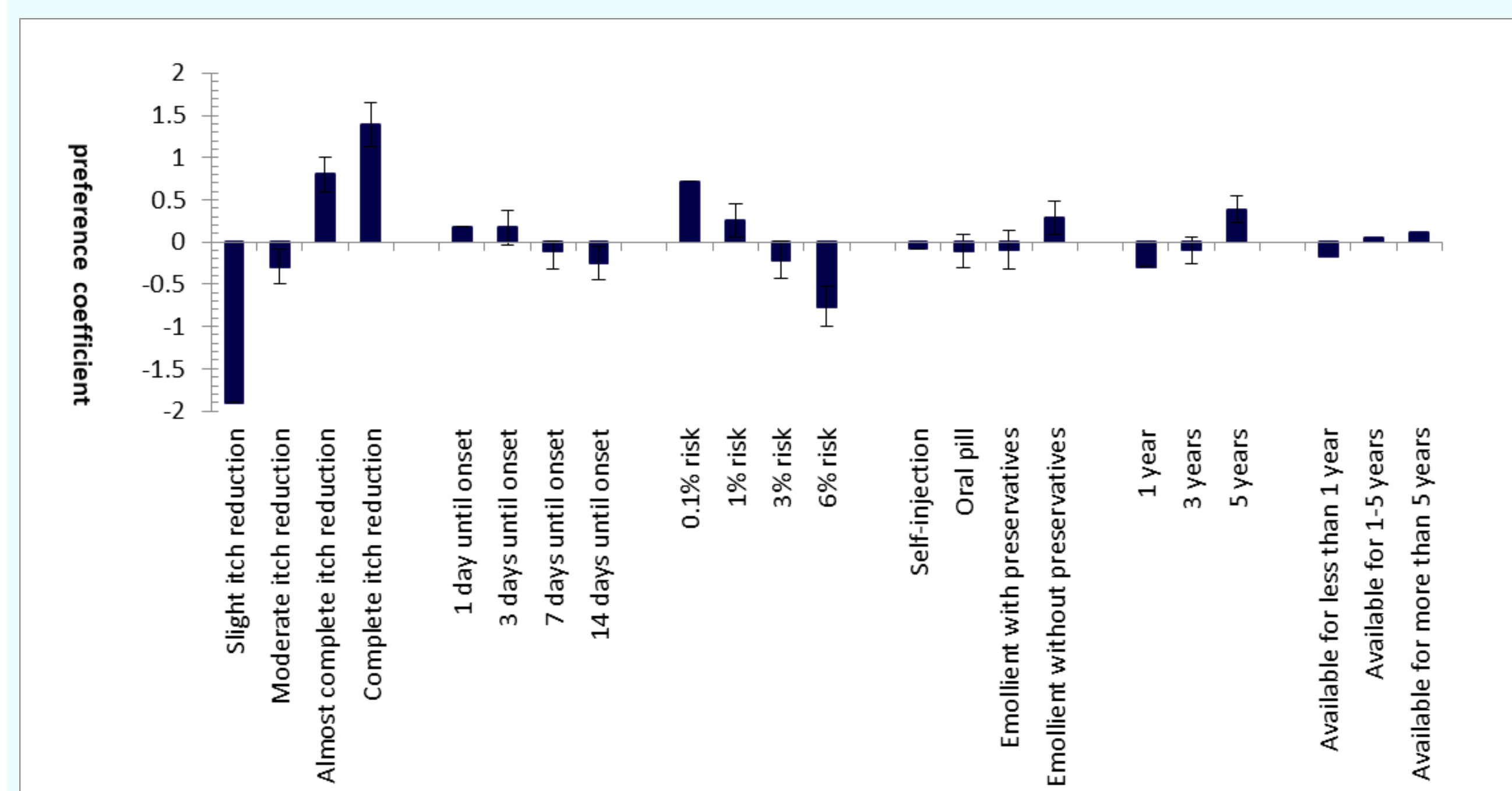


Figure 3: Preference coefficients per level.

Conclusion

- This study identified itch reduction, infection risk and long-term disease management as most important of investigated treatment attributes for AD patients. Furthermore, the use of preservatives seems to play a role in the choice of therapy.
- Findings can improve shared-decision making, acceptance of therapies as well as treatment development.
- Additional data are being collected to confirm these findings, to enable additional analyses and to increase understanding of AD patients' preferences further.

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