

TrEatment, utiLisation and safEty of medicines for MUltiple Sclerosis (TELEMUS)

Telemus is Eurymus' son, a prophet and a master at reading signs

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What is the issue?

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Multiple Sclerosis and Related Disorders (J Graves, Section Editor)

Early Aggressive Treatment Approaches for Multiple Sclerosis

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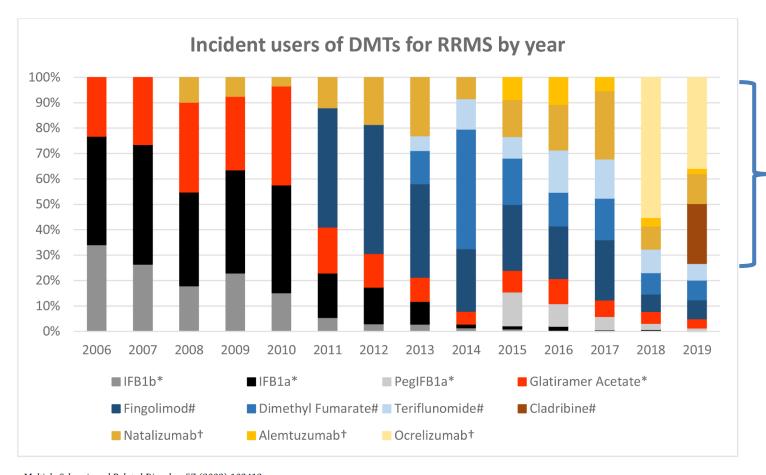
Recent findings

- Natalizumab promising efficacy in RCTs and observational studies when compared with placebo, the injectable DMTs, and fingolimod.
- The anti-CD20 B cell depleting therapies (rituximab, ocrelizumab, and ofatumumab) demonstrated superiority in RCTs compared to their comparator group (placebo, interferon, and teriflunomide, respectively) and
- Rituximab has shown in observational studies to be more effective than older injectable therapies and some of the oral therapies.
- Alemtuzumab has shown good efficacy in RCTs and observational studies yet has several potentially severe side effects limiting its use.

Has the increased use
of High Efficacy
treatments earlier in
the treatment pathway
led to better outcomes
for patients diagnosed
with MS?



2. What is the utilisation of multiple sclerosis treatments across the APAC region?



Early aggressive/highly effective

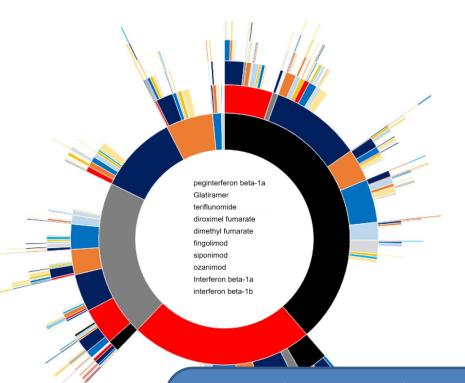
It's a dynamic market!

Multiple Sclerosis and Related Disorders 57 (2022) 103412

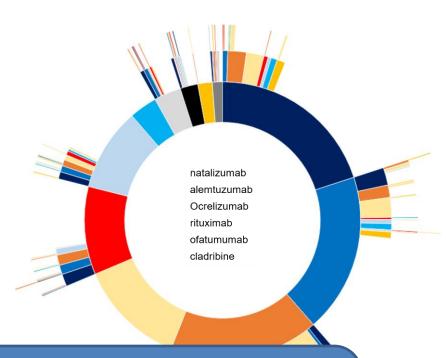


Traditional Approaches **2006-2013**

Early Aggressive Treatment Approaches **2014-2019**







Fingolimod

DimethylFumerate

Natalizumab

Ocrelizumab

GlatiramerAcetate

Teriflunomide

Cladrabine

PegIFB1a

IFB1a

Alemtuzumab

Has the increased use of High Efficacy treatments earlier in the treatment pathway led to better outcomes for patients diagnosed with MS?

Escalation approach v early High-Efficacy treatment approach
DELIVER-MS study TREAT-MS study



RCTs that are investigating the effectiveness of traditional MS treatments with HET strategies

- The 'Determining the Effectiveness of earLy Intensive Versus Escalation Approaches for the treatment of Relapsing-remitting MS' (DELIVER-MS) (NCT03535298) trial will directly compare traditional MS with HET strategies and their impact on clinical and radiologic outcomes.
- The 'TRaditional versus Early Aggressive Therapy for MS' (TREAT-MS) (NCT03500328) trial aims to 1) evaluate, jointly and independently among patients deemed at higher risk vs. lower risk for disability accumulation, whether an "early aggressive" therapy approach, versus starting with a traditional, first-line therapy, influences the intermediate-term risk of disability, and 2) to evaluate if, among patients deemed at lower risk for disability who start on first-line MS therapies but experience breakthrough disease, those who switch to a higher-efficacy versus a new first-line therapy have different intermediate-term risk of disability."
- The DELIVER-MS study is due for completion in 2025 while the TREAT-MS study is due for completion in 2024.



Utilisation

1. Characterization

- Characteristics of initiators over time
- Trends in use over time
- Treatment pathways
 - Overall
 - By Calendar Era
 - By Traditional/Early aggressive approaches



2. What is the utilisation of multiple sclerosis treatments across the APAC region?

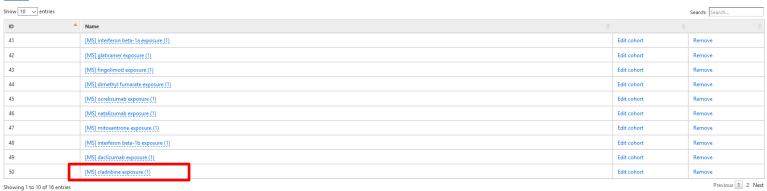
Early aggressive/highly effective		Traditional/escalation		Other FDA approved	
Medicine	Concept_ID	Medicine	Concept_ID	Medicine	Concept_ID
natalizumab	735843	peginterferon beta-1a	45775146	Daclizumab	19036892
alemtuzumab	1312706	Glatiramer	751889	Mitoxantrone	1309188
Ocrelizumab	1593457	teriflunomide	42900584		
rituximab	1314273	diroximel fumarate	37497593		
ofatumumab	40167582	dimethyl fumarate	43526424		
cladribine	19054825	fingolimod	40226579		
		siponimod	1510913		
		ozanimod	37499437		
		Interferon beta-1a	722424		
		interferon beta-1b	713196		



Event Cohorts

Each Event Cohort defines the step in a pathway that may occur for a person in the Target Cohort.

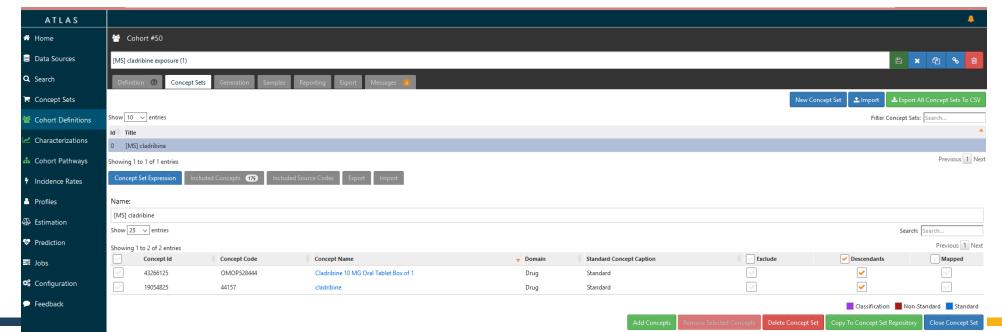






Analysis Settings

The following set of parameters will be used when performing the pathway analysis.





tystan ry

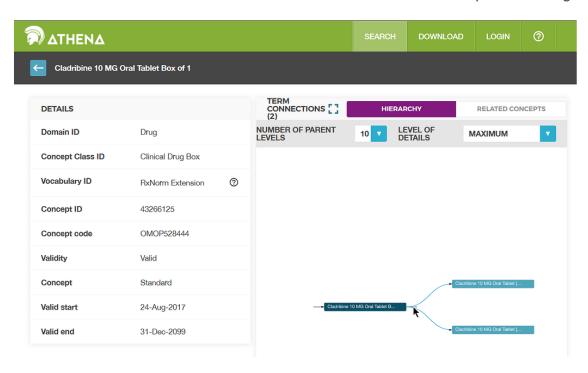
Ju

Hi Vocab Wizzes

I was unsure where/who to reach out with this so apologies if this is not the right place - please feel free to point me in the right direction.

I believe we have come across an orphaned Concept ID for the medication "Cladribine 10 MG Oral Tablet Box of 1". It's a standard and valid concept but it does not seem to be a descendant of the more general RXNorm standard concept of "Cladribine" as an ingredient.

I paste a screenshot of the hierarchy diagram on Athena for "Cladribine 10 MG Oral Tablet Box of 1" that does seem to be self-referential/not have a "is a" relationship with the ingredient standard concept.







mik Michael Kallfelz

5d

Hi @tystan - for creating a new issue about existing content that needs fixing, go here. For your case the "Faulty content" template is probably best.

You do not have to repeat the whole forum post of course, but just state the facts and insert a link back to the post!

Thanks for spotting this!

~mik







tystan Ty

5d



tystan:

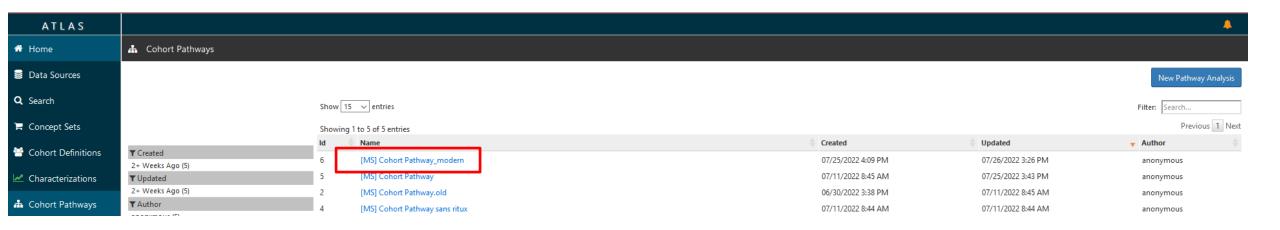


create the parent-descendant relationship between the Concept IDs 43266125 and 19054825

Thanks for such a quick and helpful response **@mik**! I have submitted a github issue: https://github.com/OHDSI/Vocabulary-v5.0/issues/678



Treatment pathways



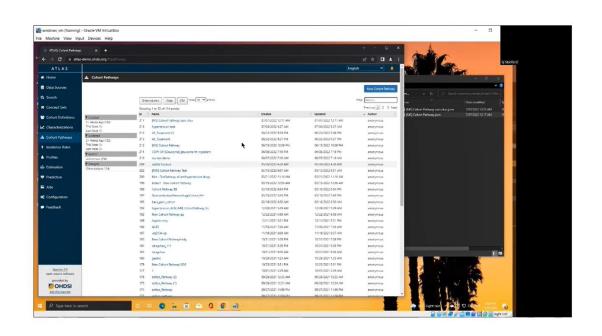


Mini-tutorial (building treatment pathways) by Ty Stanford

OHDSI APAC Study 3 (Multiple Sclerosis) Meeting-20220713 110558-Meeting Recording.mp4



Treatment Pathways





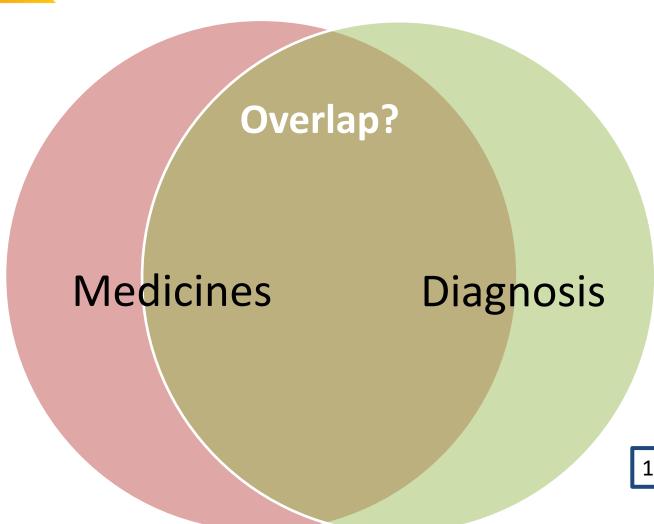
Validation of phenotypes

Cohorts

- Generate cohorts with and without diagnosis
- Evaluate treatment schedules for the 3x medicine condition
 - particularly for medicines that have 6/12month dosing schedules or limited dose eg alemtuzumab (12 months), ocrelizumab (6 months)



MS Phenotype



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Culpepper:

Earliest occurrence of MS diagnosis, requiring ≥3

[

MS-related occurrences of any combination of inpatient or outpatient diagnosis
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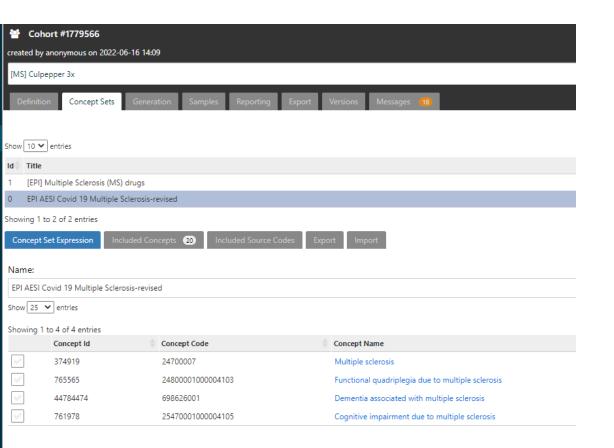
OR specific disease-modifying therapies (DMT)]

within a 1-year time period

1. Determine overlap between diagnosis and treatment



Diagnosis

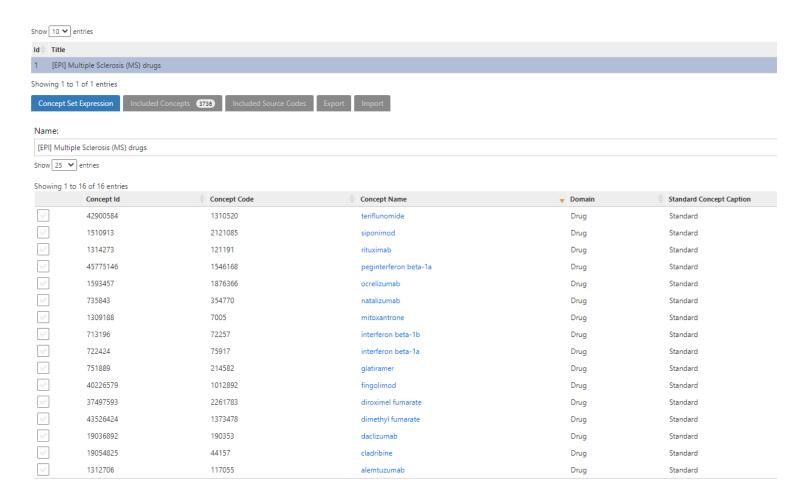


In the absence of diagnostic information:

- Must be treated by a neurologist (*provider* specialty).
- Magnetic resonance imaging of the brain and/or spinal cord (procedure)



Disease-modifying therapies (DMT)



Explore 3x medicine condition (particularly for medicines that have 6mth/12month dosing schedules or limited dose eg alemtuzumab, ocrelizumab)

mitoxantrone cladribine (others)
may be problematic if we are unable
to use diagnoses as they can be used
for multiple indications (eg cancer)



Early aggressive/early highly effective	Concept_ID	Formulation	Treatment	Indication
natalizumab	735843	infusion	Monthly (30)	Potentially used in Crohns
alemtuzumab	1312706	infusion	12 months	
Ocrelizumab	1593457	infusion	6 monthly	
rituximab	1314273			Potentially used in RA
ofatumumab	40167582	injection	30 days	
cladribine	19054825	Oral (table)	30 days	Also used in cancer (L01BB04 injection)
Traditional/escalation treatments	Concept_ID	Formulation	Treatment	Indication
peginterferon beta-1a	45775146	injection	30 days	
Glatiramer (acetate)	751889	injection	30 days	
teriflunomide	42900584	oral	30 days	
diroximel fumarate	37497593	delayed-release capsules		
dimethyl fumarate	43526424	oral	30 days	
fingolimod	40226579	oral	30 days	
siponimod	1510913	oral	30 days	
ozanimod	37499437	oral	30 days	
Interferon beta-1a	722424	injection	30 days	
interferon beta-1b	713196	injection	30 days	
Other Approved	Concept_ID	Formulation	Treatment	Indication
Daclizumab	19036892	injection	30 days	
Mitoxantrone	1309188		5	
ponesimod	740121	oral	?	



Next Steps

- 1. Finalise characterization and treatment pathway package
- 2. Develop phenotype cohorts considering dosing schedules (3x dispensing requirement) & validation with and without MS diagnosis



Thank you!

 Fortnightly meetings at 11am Korean Time on Wednesday

