Treatment outcomes during Teriparatide use in Greece: Country sub-analysis of the ExFOS observational study.

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ABSTRACT

Scope: Extended Forsteo Observational Study (ExFOS), a multinational, non-interventional, prospective, observational study aims to evaluate fracture outcomes, back pain (BP), compliance and health-related Quality of Life (QoL) in osteoporotic patients prescribed teriparatide (TPTD). We present treatment outcomes for patients (male or female) treated for up to 24 months in Greece.

Methods: Of the 440 patients enrolled in the study 416 (mean age 69.9±9.7 years) have performed at least one active treatment post-baseline visit. These were predominantly women (92.1%), at postmenopausal stage (99.7%). Self-reported parameters of health perception have been recorded throughout the study through validated questionnaires (EQ-SD). We report the observed percent and mean responses.

Results: 17 (4.1%) patients had an incident clinical fracture during follow-up. Adherence: 80% of subjects used the treatment through Month 23; 45% continued use through Month 24. BMD numerically increased in all sites. Indicatively, Lumbar BMD T-score (mean (SD)) increased from -3.39 (0.73) at baseline to -2.36 (0.63) at study end. BP history the last year before enrollment was reported by 88.9%. During treatment, all self-reported variables improved. Examples of BP frequency (% of patients with BP fairly often or almost daily) and BP severity (% with moderate-severe BP), EQ-SD Visual Analogue Scale (VAS) score and EQ-SD mobility (% reporting some or extreme problems) are depicted below:

Conclusions: Use of TPTD remains high almost throughout the follow-up. A decrease at month 24 may be due to prescribing (24months/26cartridges) particularities. Patients experience improvement in BP and QoL. Fracture rate was low. Results should be interpreted in the context of an observational study.

INTRODUCTION

• Extended Forsteo Observational Study ExFOS evaluates fractures, back pain, compliance and health-related Quality of Life in osteoporotic patients prescribed teriparatide.

• We present treatment outcomes for patients treated for up to 24 months in Greece.

• Methods and Hellenic baseline data have been published (Aloumanis et al. BMC Musculoskelet Disord. 2015; 16:136).

METHODS

• We present data of the 416 Active treatment (AT) out of 440 enrolled Greek patients (mean age±SD: 69.9±9.7 years) who performed at least one active treatment post-baseline visit.

• Self-reported parameters of health perception have been recorded throughout the study through validated questionnaires.

• No statistical analyses of the Hellenic data have been performed at this point.

RESULTS

Adherence

• Adherence: At least 80% of subjects continued treatment through Month 23; 45% continued use through the entirety of Month 24 (Fig 1).

• Back Pain: In the active treatment (AT) cohort, numerical improvement was recorded in BP frequency and severity, as well as in consequent limitations of activities (Fig 2-4).

Health-related Quality of Life (EQ-5D)

• Health-related Quality of Life: The percentage of AT patients reporting "some or extreme problems" in the 5 dimensions of the EQ-5D questionnaire shows numerical improvement (fig. 6).

• Visual Analogue Scale (VAS): numerical decrease for back pain VAS and improvement in EQ-5D VAS was recorded (fig 7).

Bone Mineral Density (BMD)

• BMD: numerical increase in all sites. Indicatively, Lumbar BMD T-score (mean (SD)) increased from -3.39 (0.73) at baseline to -2.36 (0.63) at study end.

• Fractures: Fracture rate was low (non-interpretative).

CONCLUSIONS

• Use of TPTD remains high almost throughout the follow-up.

• A decrease at month 24 may be due to prescribing (24months / 26cartridges) details and timing of completion in the study.

• Patients experience improvement in BP and QoL. Fracture rate was low.

• Results should be interpreted in the context of an observational study

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