

Treatment persistence with golimumab in France

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INTRODUCTION

Immune-mediated rheumatic disease (IMRD) including rheumatoid arthritis (RA), psoriatic arthritis (PsA) and ankylosing spondylitis (AS), are severe and disabling chronic diseases in rheumatology. Biologics such as subcutaneous tumor necrosis factor-alpha inhibitors (SC-TNFis) have transformed the management of the diseases.

AIM

The study objective was to describe treatment persistence in a real-world setting, among patients diagnosed with IMRD, initiating treatment with golimumab (GLM) in France.

METHODS

The *Système National d'Information Inter-régime* [French national health insurance scheme information-sharing system] database lists all outpatient and inpatient healthcare consumption for individuals covered by the general health insurance scheme.

Patients with RA, AS or PsA were included through Long Term Disease (LTD) status and hospital admission, based on ICD-10 codes:

- For RA ICD-10 codes used were M05, M06, M08.0, M08.2, M08.4 and M13,
- For AS, ICD-10 codes used were M08.1, M08.8, M08.9, M45 and M46 to M14,
- And for PsA ICD-10 codes used were M07 and M09.

Then, patients were then identified through filled prescription of GLM between 07/01/2012 and 12/31/2013.

Persistence was estimated using Kaplan-Meier analysis at 12 and 24 months.

A sensitivity analysis was conducted on patients who were naive of biotherapies (subcutaneous and intravenous) in the last 18 months before initiating GLM.

RESULTS (1)

Among all IMRD patients, a total of 1,315 RA patients initiating treatment with GLM, 2,656 AS patients and 514 PsA patients. The characteristics of these patients are presented below.

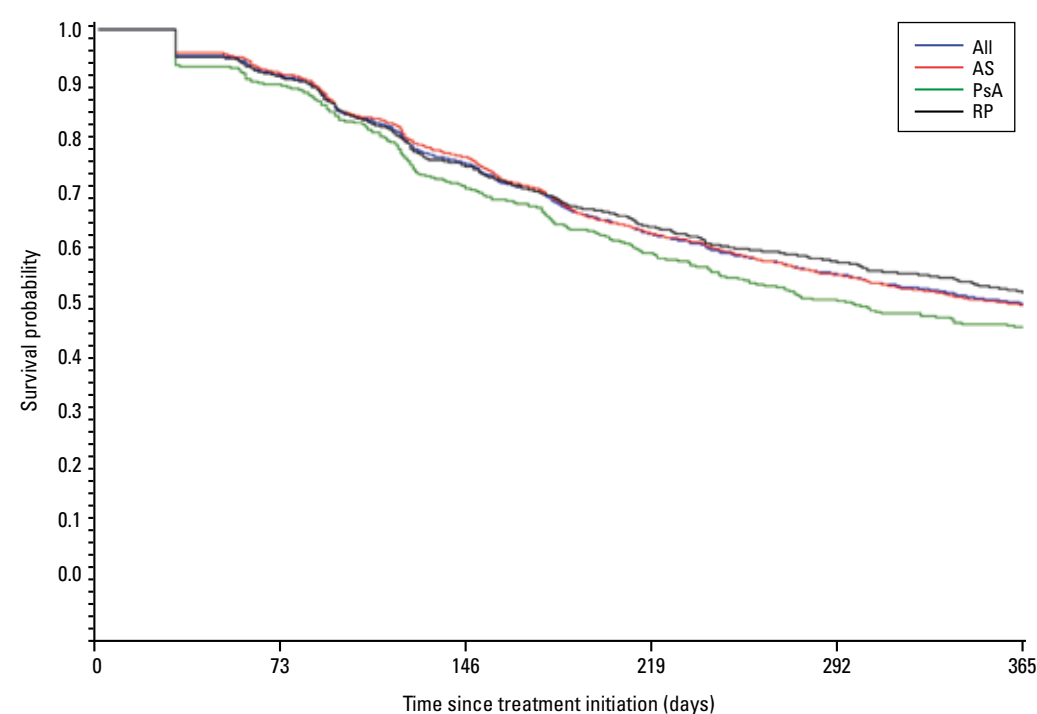
	RA (n=1,315)		AS (n=2,656)		PsA (n=514)		All patients (n=4,485)	
	N	%	N	%	N	%	N	%
GENDER								
Male	230	17.5%	1,102	41.5%	185	36.0%	1,517	33.8%
Female	1,085	82.5%	1,554	58.5%	329	64.0%	2,968	66.2%
Free access-to-care status	90	6.8%	215	8.1%	32	6.2%	337	7.5%
Death in 2013/2014	4	0.3%	6	0.2%	2	0.4%	12	0.3%
Mean age (SD)	53.8 (13.2)		44.2 (11.7)		48.9 (11.8)		47.6 (12.9)	

For patients who were bionative for the last 18 months a total of 436 patients initiating GLM with RA were identified, 769 with AS and 127 with PsA.

12-month persistence:

For all IMRD patients (bionative for the last 18 months or not) 12-month persistence rate was 54.7%.

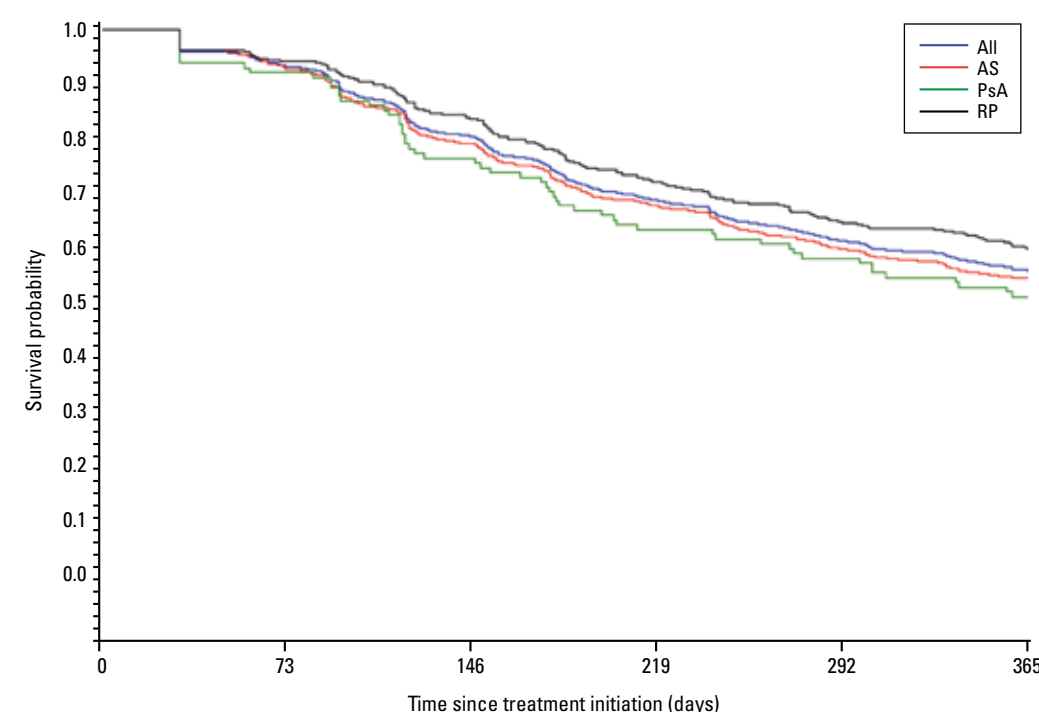
- 56.6% for RA,
- 54.5% for AS,
- 50.8% for PsA.



RESULTS (2)

For bionative for the last 18 months IMRD patients, GLM persistence rate was 60.2% at 12 months:

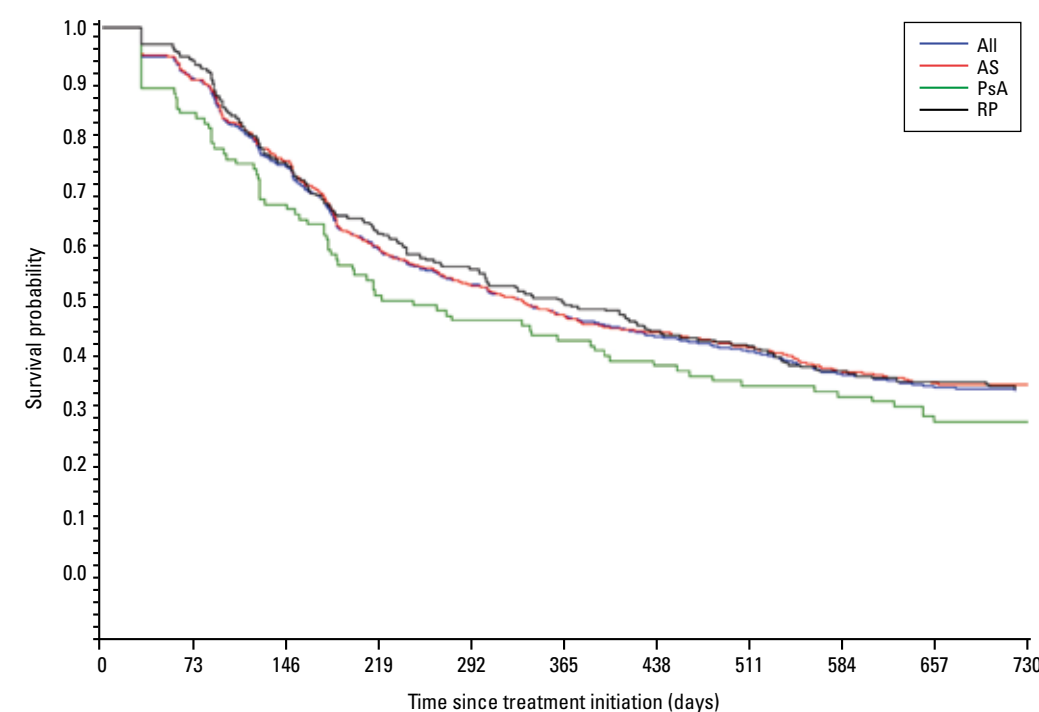
- 63.8% for RA,
- 58.9% for AS,
- 55.9% for PsA.



24-month persistence:

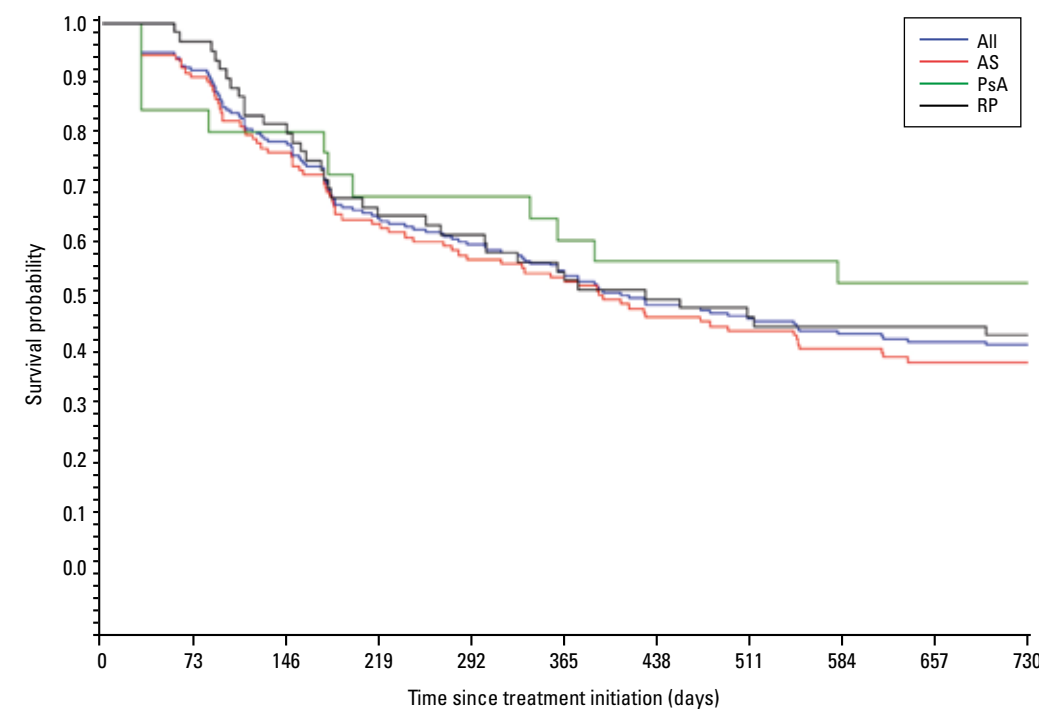
For all IMRD patients (bionative for the last 18 months or not) 24-month persistence rate was 40.1%.

- 40.1% for RA,
- 41.0% for AS,
- 35.0% for PsA.



For bionative for the last 18 months IMRD patients, 24-month persistence rate was 47.0%.

- 48.5% for RA,
- 44.1% for AS,
- 57.1% for PsA.



CONCLUSIONS

Golimumab persistence rates at 12 months are between 55% (bionative for the last 18 months and bioswitch patients) and 60% (bionative for the last 18 months patients only). Persistence rates at 24 months were between 40% and 47%. Further analyses are needed to understand determinants of persistence among patients diagnosed with IMRD, and impact of non persistence on health care resource utilization and costs.