# Complementary use of administrative and clinical data in studying disease-modifying therapies in MS in France in 2010-2015

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#### Introduction

- Wide range of disease-modifying therapies (DMTs) in France over 2010-2015
- 11 MS-specific DMTs
- 6 injectable DMTs (5 β-interferons (of which peg-interferon-β), glatiramer acetate)
- 2 in-hospital infusions (natalizumab, mitoxantrone)
- 3 oral DMTs (fingolimod, teriflunomide, dimethyl fumarate)
- 6 off-label drugs (azathioprine, methotrexate, mycophenolate mofetil, alemtuzumab, cyclophosphamide, rituximab)
- Two main types of data sources to study utilization of DMTs
  - Clinical series: strong quality but potential recruitment bias
  - → OFSEP database ("Observatoire Français de la Sclérose en Plaques")
  - Administrative data: exhaustiveness but no clinical data
    - > French National Health Data System (SNDS-"Système National des Données de Santé")

### Objective

To describe the use of DMTs in real-life settings of persons with MS (PwMS) in France over 2010-2015 period by using two different data sources: the OFSEP database and the SNDS

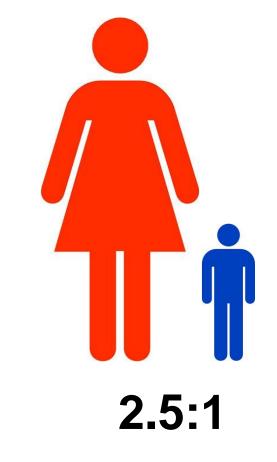
#### Methods

- OFSEP cohort (extraction date: December 2016)
  - All PwMS seen at least once in 2010-2015 in one of the 41 inclusion centers across France
  - Data completed by neurologists Clinical trials included
  - DMTs available: 11 MS-specific and 6 off-label drugs
  - Exact start and end dates of each DMT
- **SNDS cohort** (extraction date: October 2017)
  - All PwMS identified using a validated algorithm over 2010-2015 across France (Foulon 2017) with at least one reimbursement of care over 2010-2015
  - Data issued from health insurance reimbursements
  - DMTs available: 10 MS-specific (mitoxantrone missing) and 3 off-label drugs (alemtuzumab, cyclophosphamide and rituximab missing)
  - Only delivery dates of each DMT

Follow-up period: From the earliest of January 1st, 2010 or MS diagnosis (in the OFSEP) / identification date (in the SNDS) until the earliest of last clinical visit (in the OFSEP only), death or December 31<sup>st</sup>, 2015

**Outcomes**: Monthly proportion of PwMS receiving each DMT and individual sequences of DMTs

# Results

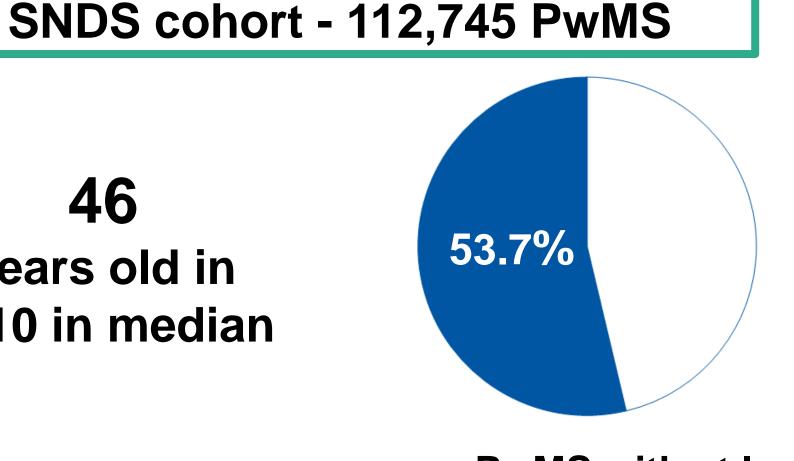


OFSEP cohort - 36,329 PwMS 63.8% 55.3% years old in 2010 in median 2.8% PwMS with at least one delivery of a DMT available in SNDS an MS-specific DMT unavailable in SNDS mitoxantrone



years old in 2010 in median

Figure 2 Distribution of DMTs use in France over 2010-2015 in the SNDS cohort

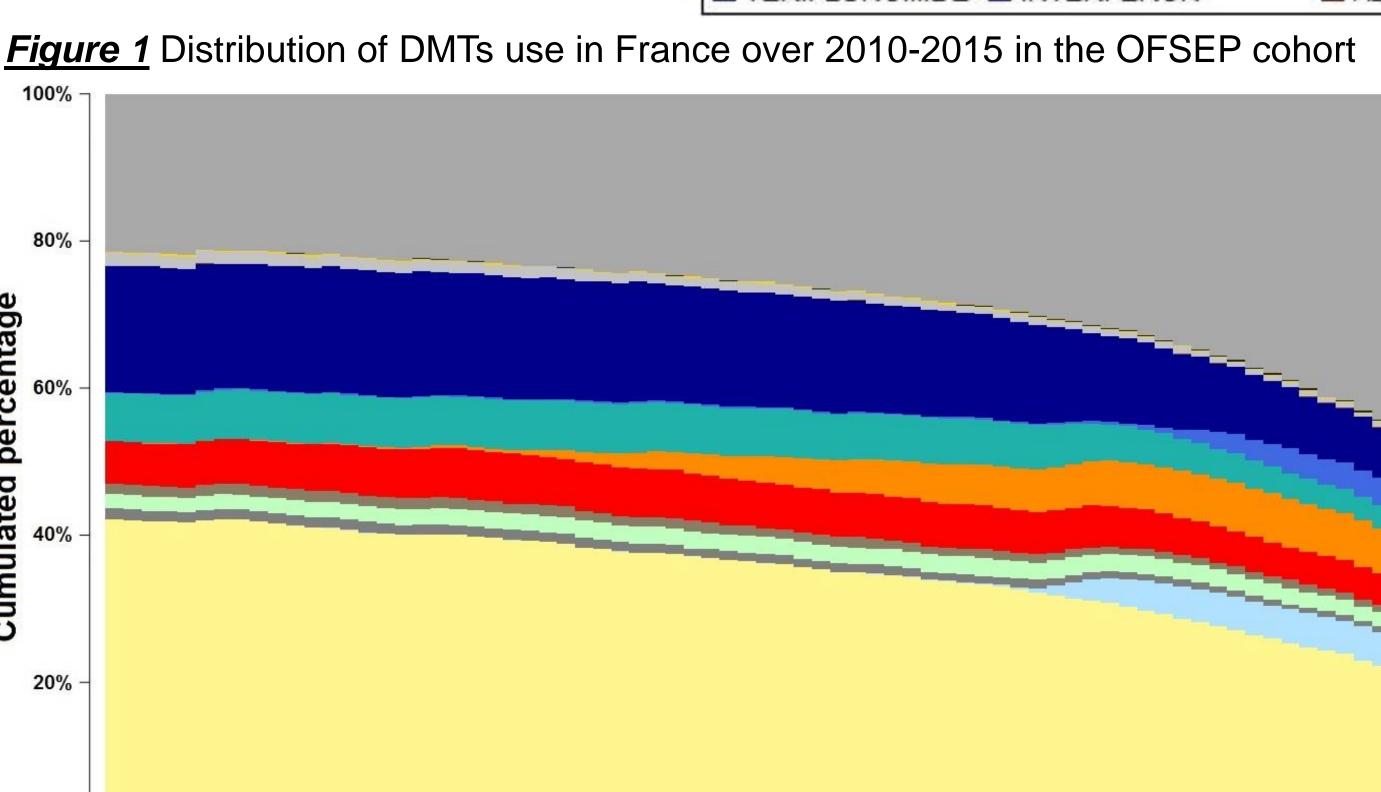


47.4%

PwMS with at least one delivery of a DMT an MS-specific DMT

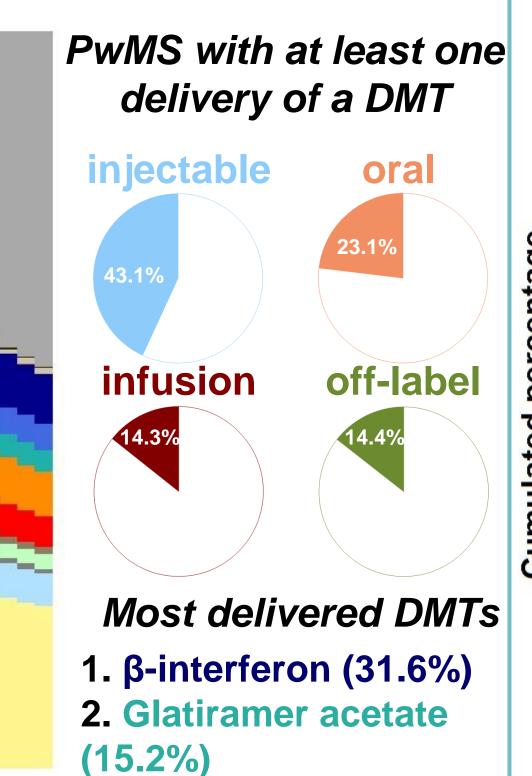
More treated patients in the OFSEP cohort than in the whole population of PwMS in the SNDS -> Recruitment bias linked to MS expert centers PwMS treated with mitoxantrone missing from SNDS

■ NO TREATMENT
■ DIMETHYL FUMARATE
■ AZATHIOPRINE
■ MYCOPHENOLATE MOFETIL
■ METHOTREXATE
■ NATALIZUMAB
■ FINGOLIMOD
■ GLATIRAMER ACETATE ■ ALEMTUZUMAB □ CYCLOPHOSPHAMIDE ■ TERIFLUNOMIDE
■ INTERFERON ■ MITOXANTRONE ■ RITUXIMAB Missing

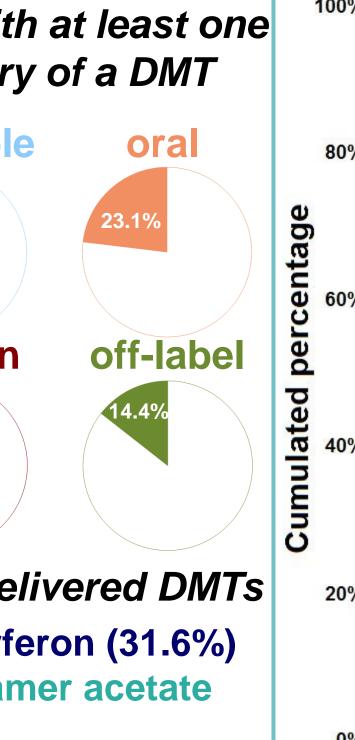


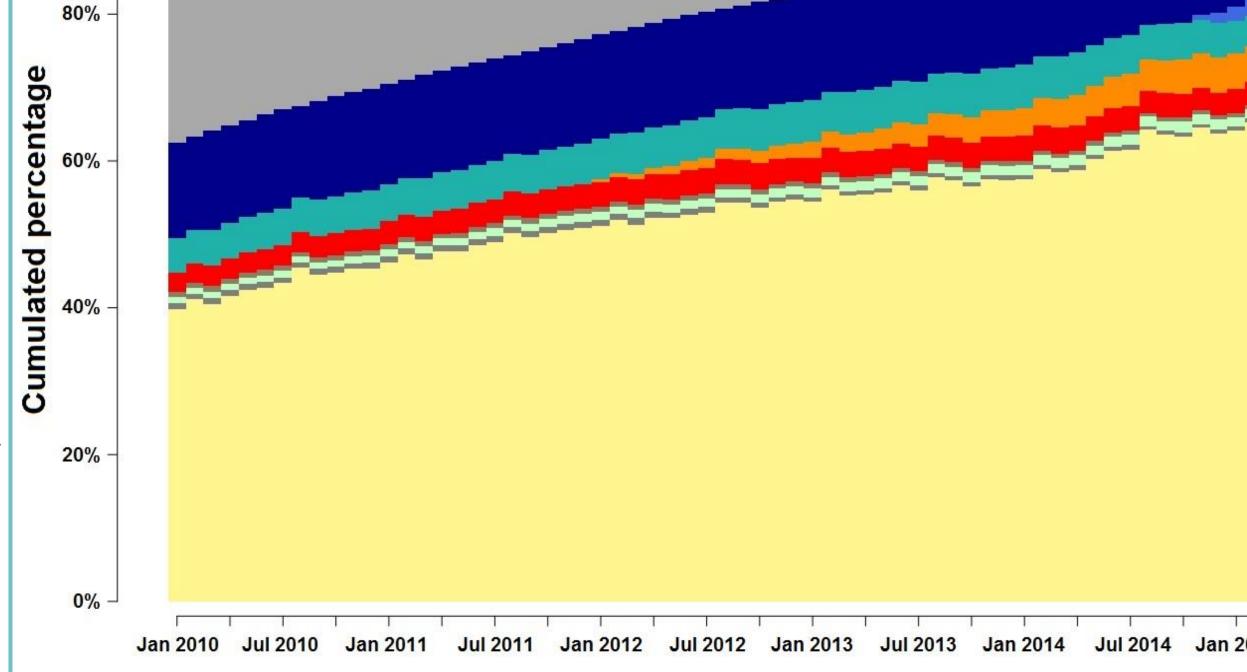
Time

Jul 2010 Jan 2011 Jul 2011 Jan 2012 Jul 2012 Jan 2013



3. Natalizumab (13.2%)

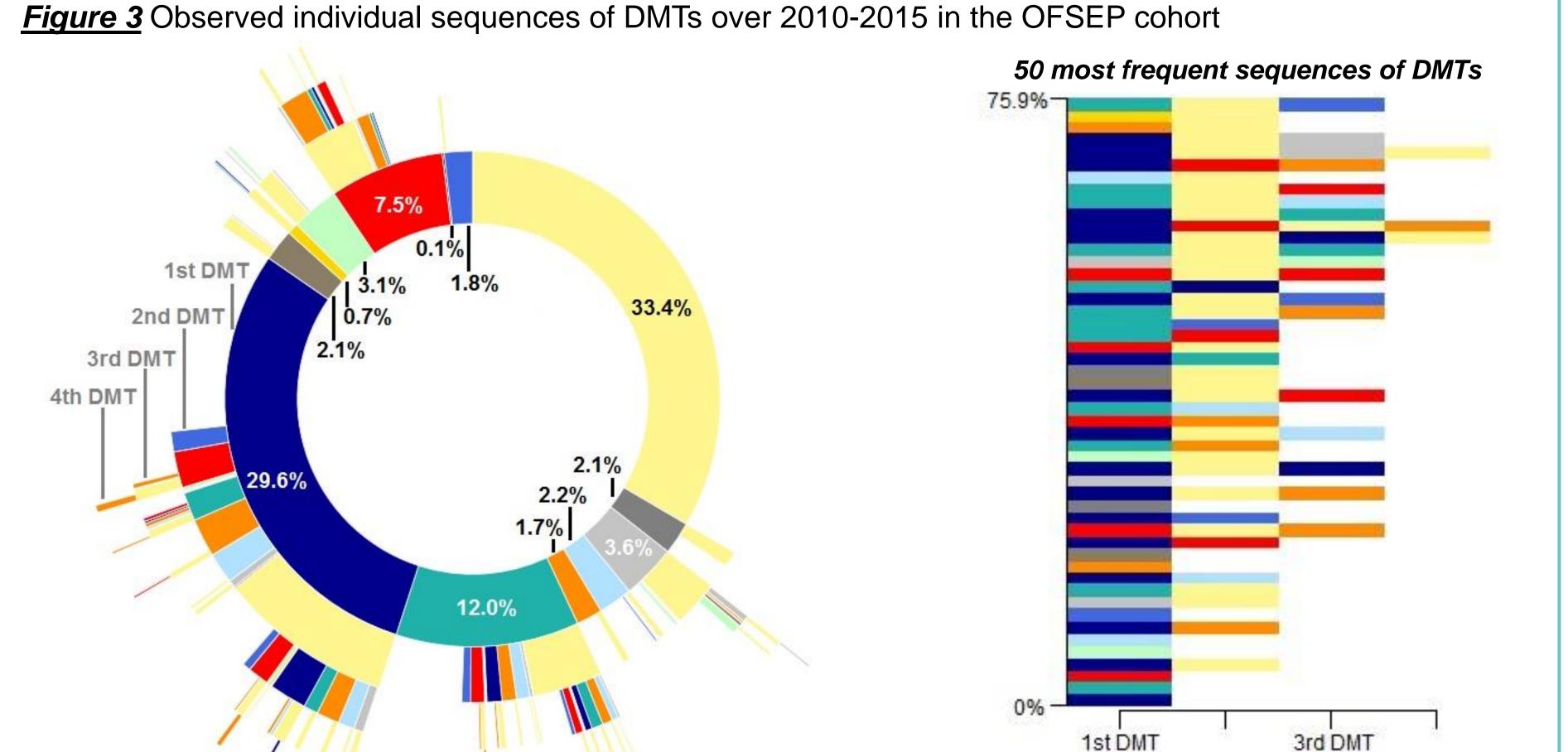




delivery of a DMT injectable off-label infusion Most delivered DMTs 1. β-interferon (28.2%) 2. Glatiramer acetate (13.5%) 3. Fingolimod (7.9%)

PwMS with at least one

Higher number of missing values in the OFSEP cohort due to the availability of data linked to last clinical follow-up Clinical trials available in the OFSEP cohort  $\rightarrow$  longer follow-up of newly introduced DMTs, especially oral one Over-representation of PwMS with at least one delivery of either an infusion DMT, an injectable DMT or off-label one in the OFSEP cohort



Only "no treatment" period longer than 6 months are represented Start date: the earliest of January 1st, 2010 or MS diagnosis End date: the earliest of death or December 31st, 2015

Figure 4 Observed individual sequences of DMTs over 2010-2015 in the SNDS cohort 50 most frequent sequences of DMTs 81.8%-3rd DMT 4th DMT 2.5% 2.0% 2.6% 1.0% Only "no treatment" period longer than 6 months are represented Start date: the earliest of January 1st, 2010 or identification date End date: the earliest of death or December 31st, 2015

Time

Wide variety of DMTs sequences in both databases

Longer sequences of DMTs in SNDS → Lack of exact start and end dates of each treatment contrary to the OFSEP cohort

## Discussion

- Use of administrative data highlighted the recruitment bias of the OFSEP cohort
- Over-representation of treated PwMS in the OFSEP cohort, probably linked to recruitment based upon MS centers
- **Linkage of both databases** would give opportunity to study MS care practices in France on an
- exhaustive population-based dataset Period 2010-2015: too early to study prescription of oral DMTs

#### Literature

Foulon S, Maura G, Dalichampt M, Alla F, Debouverie M, Moreau T, et al. Prevalence and mortality of patients with multiple sclerosis in France in 2012: a study based on French health insurance data. J Neurol. 2017;264(6):1185–92.