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Patients' Reported Perceptions on Satisfaction with Immune Thrombocytopenia Treatments: Results from the ITP World Impact Survey (I-WISh)

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Disclosures

- **WG** reports honoraria for speaking engagements and participation in advisory boards from Amgen, Novartis, Pfizer, and Principia, and also received research grants from Bayer, Bristol Myers Squibb, and Pfizer. **JBB** reports consultancy fees from Rigel, Principia, Regeneron, 3SBios, Dova, Momenta, Rallybio, Amgen, Novartis, Argenx, UCB, CSL Behring, and Shionogi. **DP** received research grants and honoraria from Novartis and Amgen, and consultancy fees from UCB, MedImmune, and ONO Pharmaceutical. **CK** reports that PDSA received payment for recruiting patients to I-WISh and for promoting I-WISh on the globalitp.org website, grant and consultancy fees outside the submitted work from Novartis, grant and honorarium from Amgen, grant and consultancy fees from Pfizer and UCB, and grants from Argenx, Principia, Rigel, and CSL Behring. **YT** reports consultancy fees and honoraria from Novartis, honoraria from Kyowa Kirin, and consultancy fees from Sysmex. **CS** reports honoraria for participating in speakers' bureaus and advisory boards for Novartis, Amgen, Takeda, Novo Nordisk, Bayer, CSL Behring, Roche, and Sobi. **MM** received consultancy fees paid to the ITP Support Association from Novartis, UCB, and Sobi. **BL** received consultancy fees from UCB and honorarium from Novartis, paid to AIPIT. **TB** is an employee of Adelphi Real World, which has received consultancy fees from Novartis. **JH** is a full-time employee of Novartis Pharma AG. **NC** reports honoraria for speaking engagements and advisory boards from Amgen and Novartis. **AK**, **MH**, and **SL** have nothing to disclose

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Introduction

ITP is an acquired autoimmune disorder characterized by thrombocytopenia (platelet count <100 × 10^9/L) in the absence of other causes or disorders[1,2]

I-WISh explored the burden of ITP and its impact on fatigue and QoL using a global patient and physician sampling frame

This analysis reports patient and physician perceptions of both AEs and satisfaction with CSs, as well as with anti-CD20s and TPO-RAs

AE, adverse event; CS, corticosteroid; ITP, immune thrombocytopenia; I-WISh, ITP World Impact Survey; QoL, quality of life; TPO-RA, thrombopoietin receptor agonist.

1. Rodeghiero F, et al. *Blood*. 2009;113(11):2386-2393. 2. Psaila B, Bussel JB. In: Michelson AD, ed. *Platelets*. 3rd ed. Academic Press; 2013:819-833.

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Methods

I-WISh was an exploratory, cross-sectional 30-minute survey conducted in 13 countries between December 2017 and May 2018

1,507 patients with ITP

472 physicians

- Satisfaction with treatment was evaluated based on responses to specific statements. Responses were rated on a 7-point Likert scale to indicate the level of agreement or disagreement with a particular statement, eg:

"Completely unsatisfied", "Strongly disagree", etc.

"Completely satisfied", "Strongly agree", etc.

Scores of 5-7 indicated agreement unless stated otherwise.

ITP, immune thrombocytopenia; I-WISh, ITP World Impact Survey.

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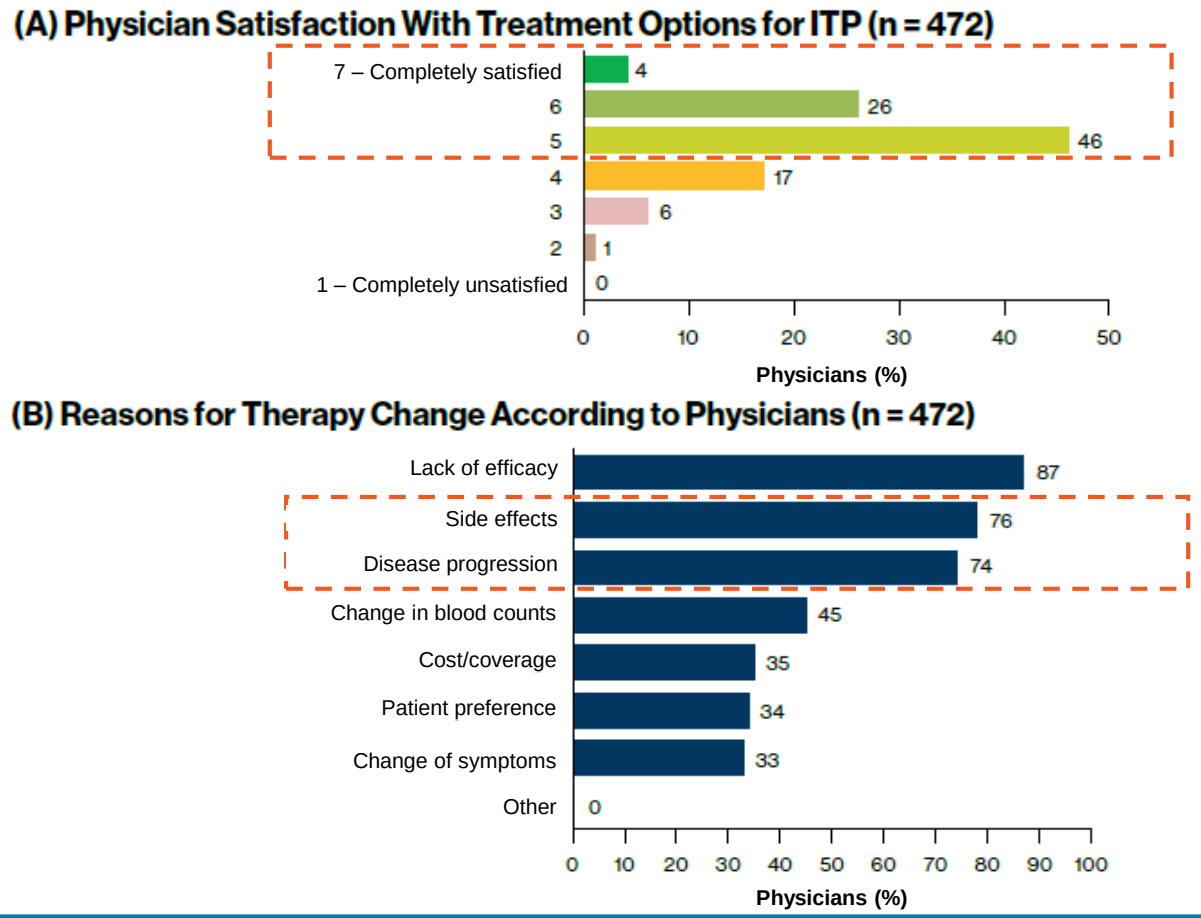
Results

Patient characteristics

- Mean patient age was 47 years and 65% of patients were female
- Symptom burden was reported by responders as:
  - “Low to moderate” (43%)
  - “High to very high” (39%)
  - “Unknown” (18%)

Seventy-six percent of physicians were generally satisfied with treatment options available for ITP (scores 5-7)



ITP, immune thrombocytopenia.

Results: Some similarities and differences between the treatment side effects were reported by patients versus physicians

Patient and physician perspectives on common side effects of ITP treatments

CSs

The most common side effects reported by patients and physicians were:

- "Weight gain/increased appetite" (47% and 39%, respectively).
- "Changes in face shape/bloating/swelling" (37% and 24%, respectively)

≥30% of patients also complained of abnormal hunger, fatigue, and anxiety and/or nervousness

≥20% of physicians noted trouble with blood glucose levels and osteoporosis as their main concerns

Anti-CD20s

For patients, the most commonly reported side effects (≥20% of patients) were:

- Fatigue
- Headaches
- Dizziness
- Difficulty sleeping
- Bruising around injection site
- Anxiety and/or nervousness

For physicians, the most commonly selected side effects (≥20% of physicians) were:

- "Infusion reactions during the infusion"
- "Increased infections"
- "Fever"
- "Chills"

TPO-RAs

For patients, the most commonly reported side effects (≥20% of patients) were:

- Fatigue
- Difficulty sleeping
- Body aches and pains
- Headaches
- Insomnia, restlessness, and/or trouble sleeping

Physicians most frequently selected:

- "Thrombosis" (24%)
- "Fatigue" (22%)
- "Nausea/upset stomach/vomiting" (19%)

CS, corticosteroid; ITP, immune thrombocytopenia; TPO-RA, thrombopoietin receptor agonist.

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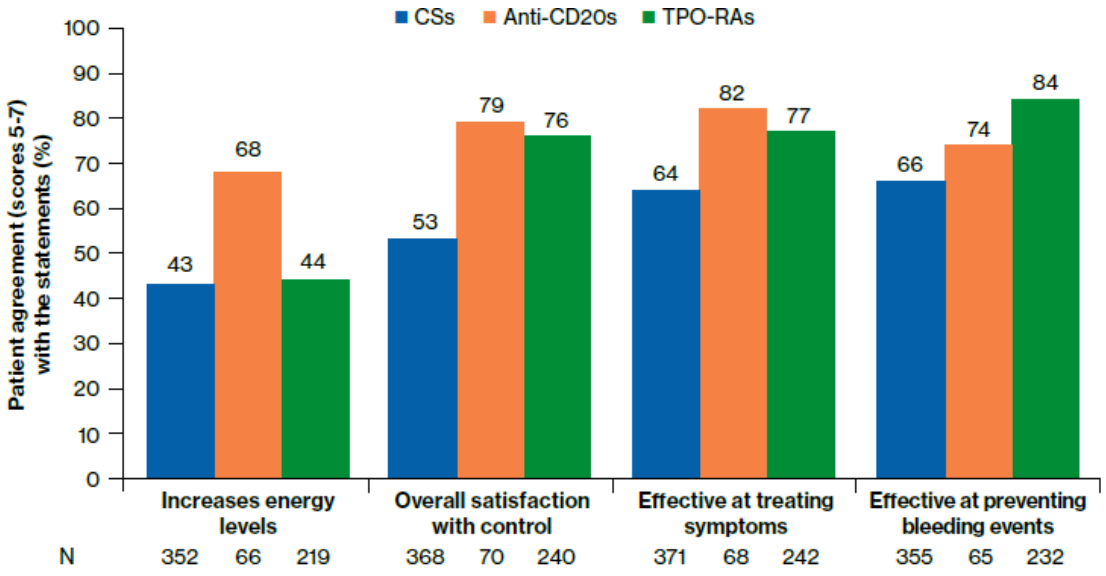
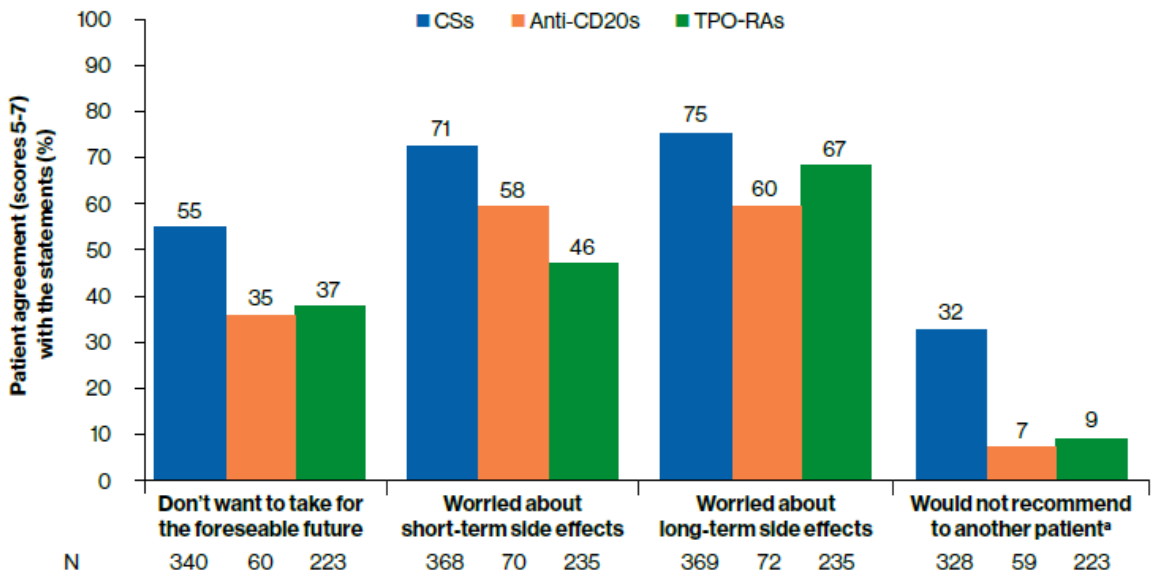
Results: More patients were satisfied with the effectiveness of TPO-RAs and anti-CD20s than of CSs

(A) Patient agreement with positive statements about the effectiveness of each treatment (scores 5–7)



(B) Patient agreement with negative statements about side effects, continuation or re-initiation and recommendation of treatment (scores 5–7)



[a]Disagreement scores with "would recommend to another patient" statement (scores ≤3) have been banded and displayed as an agreement with "would not recommend to another patient", to allow a direct comparison with the other statements.

CS, corticosteroid; TPO-RA, thrombopoietin receptor agonist.

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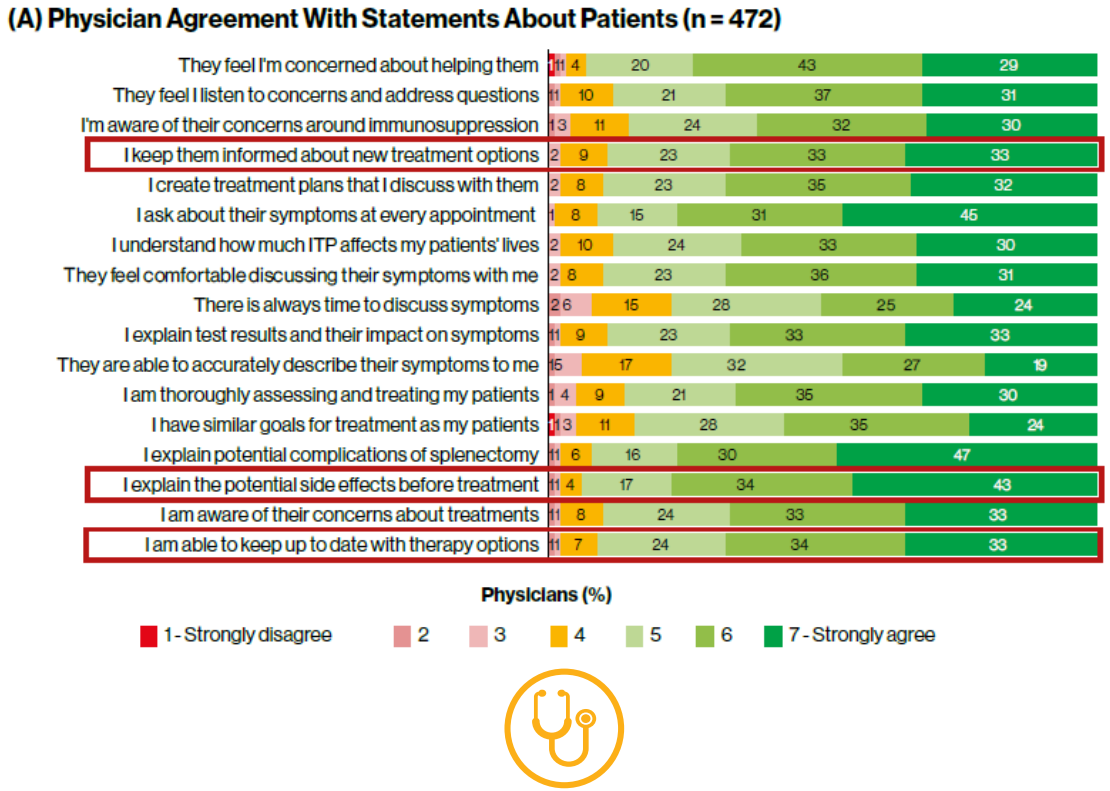
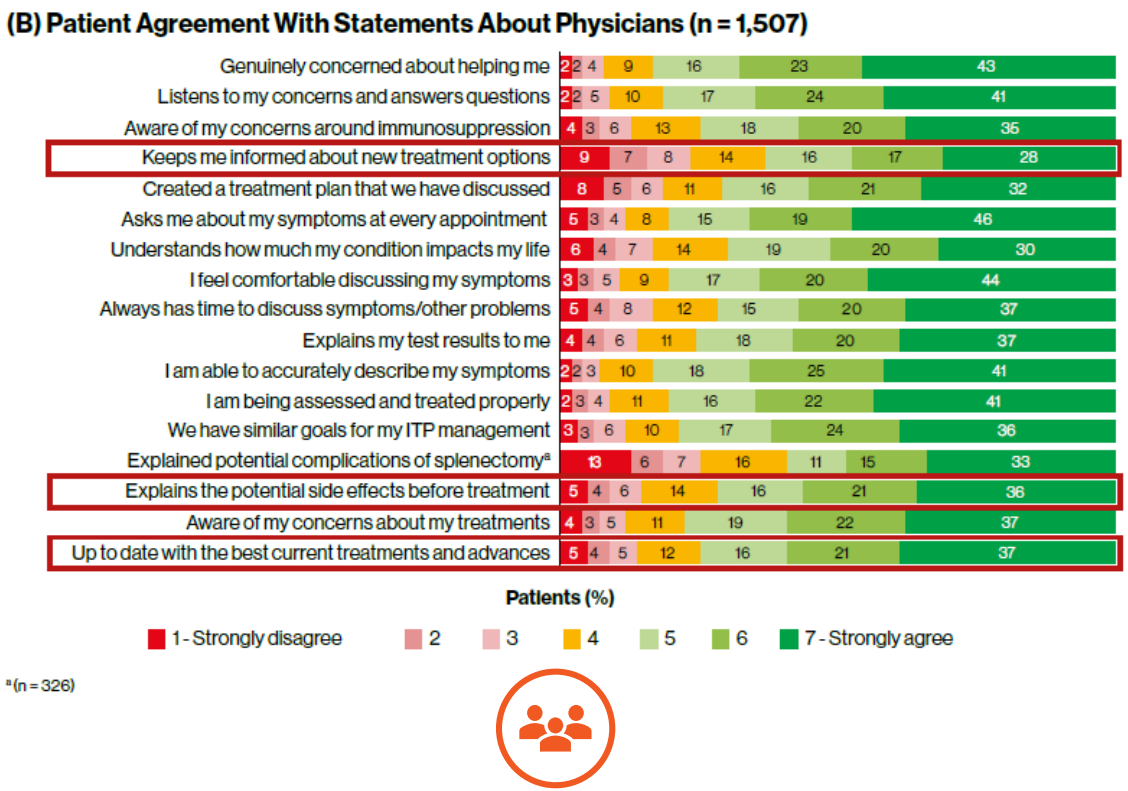
Results: A small gap exists between patient and physician perceptions of the patient–physician relationship

Patient and physician perspectives on the patient–physician relationship relating to side effects and treatment options





[a](n = 326)

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Conclusions

Patients and physicians had some similarities and some differences in their perceptions of the most frequently associated side effects for all agents, including CSs.

- Patients most commonly reported “weight gain/increased appetite” and “changes in face shape/bloating/swelling” with CS treatment, and “fatigue” and “headaches” or “body aches/pains” with anti-CD20s and TPO-RAs

There is a small gap between patient and physician perceptions of the patient–physician relationship.

This suggests that optimizing patient communication with the physician beyond the initial encounter only requires moderate improvements to be very beneficial to both.

Patient satisfaction with CSs was lower than with anti-CD20s and TPO-RAs.

Recommendations such as those in the 2019 ASH Guidelines for ITP and 2019 International Consensus report support substantially earlier transitioning from CSs to second-line treatment options.[1,2]

This strategy would reduce the side effects associated with CSs, thereby improving QoL for patients with ITP.

ASH, American Society of Hematology; CS, corticosteroid; ITP, immune thrombocytopenia; QoL, quality of life; TPO-RA, thrombopoietin receptor agonist.

1. Neunert C, et al. *Blood Adv*. 2019;3(23):3829-3866 (erratum in: *Blood Adv*. 2020;4:252). 2. Provan D, et al. *Blood Adv*. 2019;3(22):3780-3817.

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- This poster is an encore presentation and data were first presented at the 25th Congress of the European Hematology Association (EHA), Virtual Congress, June 11-14, 2020
  - Ghanima W, et al. Patients' reported perceptions on satisfaction with immune thrombocytopenia treatments: Results from the ITP World Impact Survey (I-WISh) [EHA abstract EP1631]. *HemaSphere*. 2020;4(suppl):754
- Other I-WISh survey results are reported at ASH 2020 – please see posters 1760 and 2668

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Results: Some similarities and differences between the treatment side effects were reported by patients versus physicians (1/2)

Figure 1 (A) Top 10 Commonly Reported Side Effects With CS Use According to Patients (n = 382)

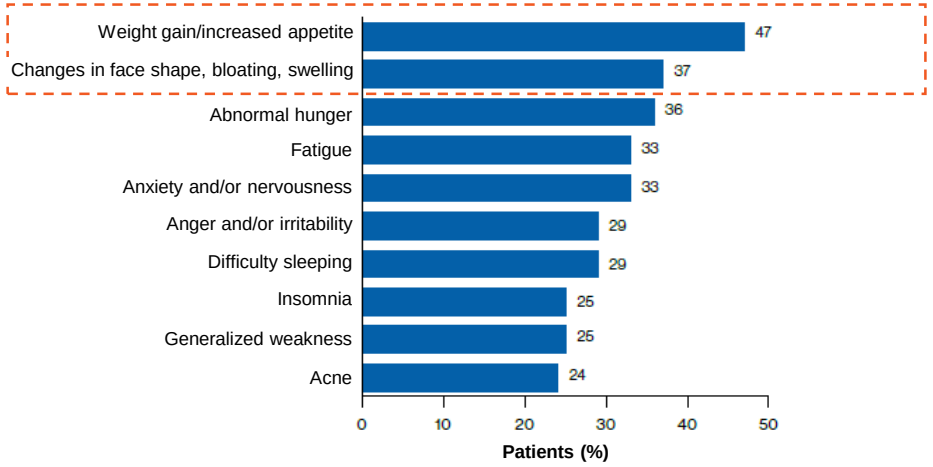


Figure 1 (B) Top 10 Commonly Reported Side Effects With CS Use According to Physicians (n = 472)

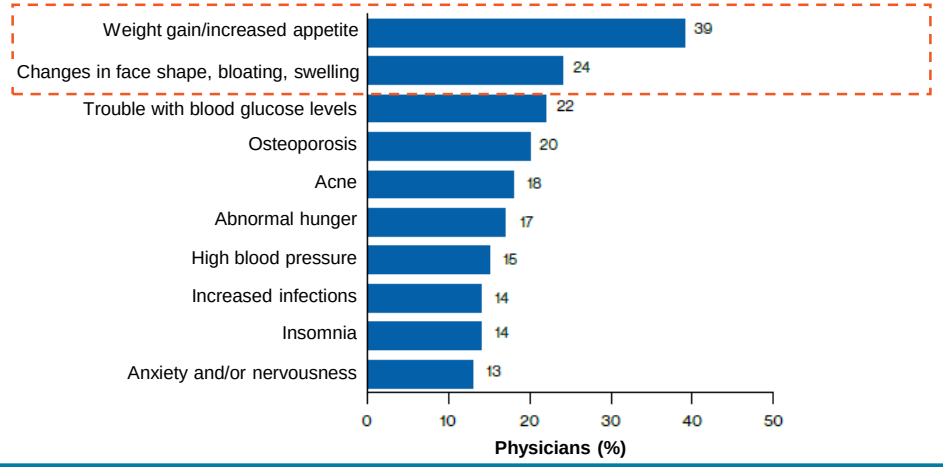


Figure 2 (A) Top 10 Commonly Reported Side Effects With Anti-CD20 Use According to Patients (n = 76)

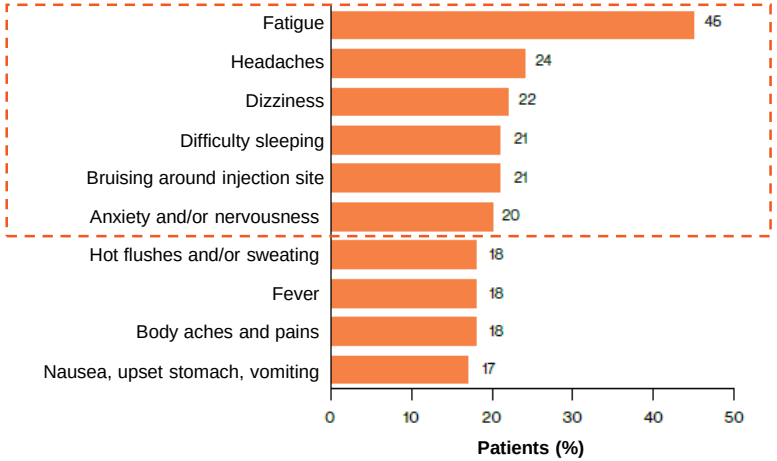
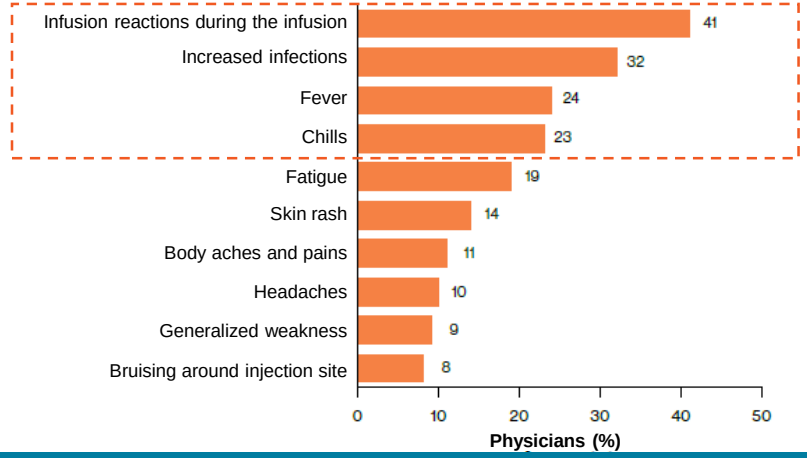


Figure 2 (B) Top 10 Commonly Reported Side Effects With Anti-CD20 Use According to Physicians (n = 472)



CS, corticosteroid.

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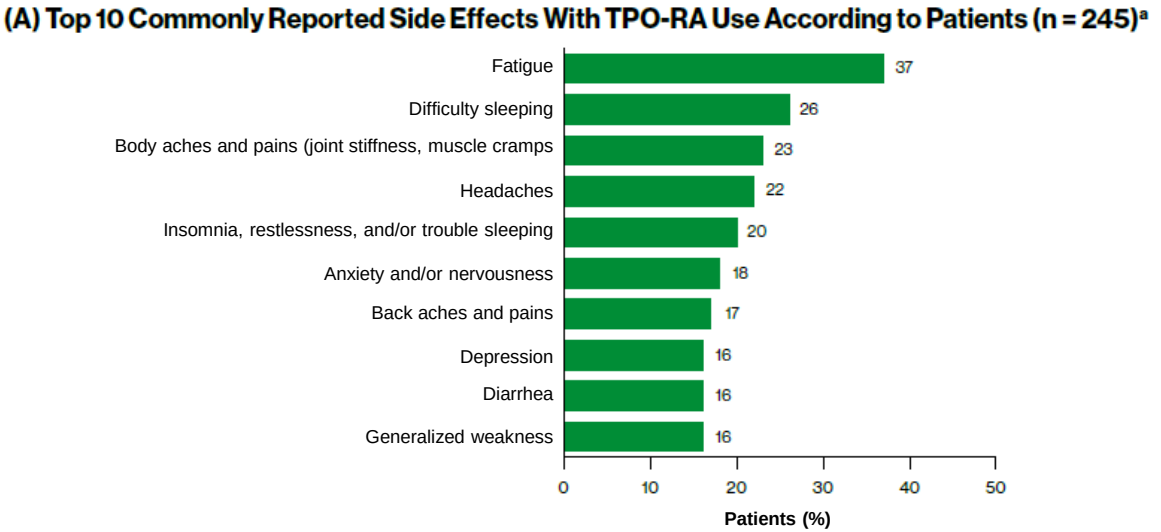
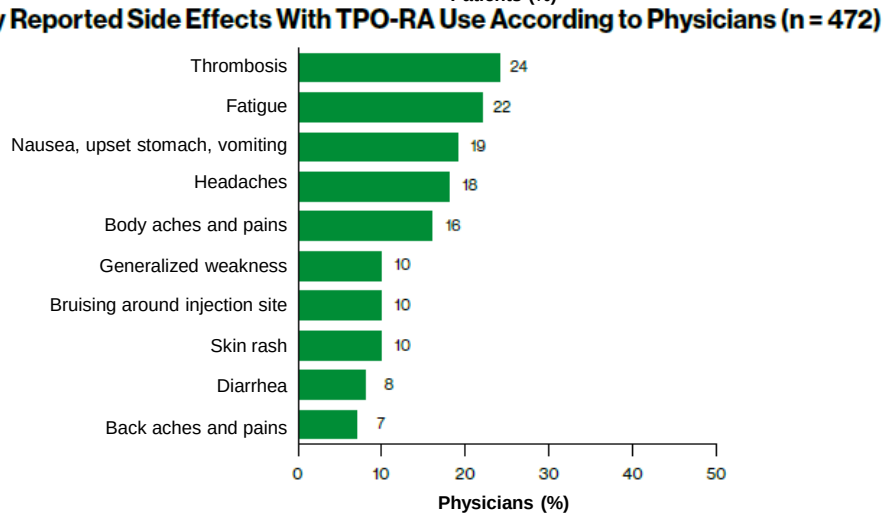
Results: Some similarities and differences between the treatment side effects were reported by patients versus physicians (2/2)





[a]"None" was reported by 23% of patients.
TPO-RA, thrombopoietin receptor agonist.

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