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Abstract Title: Real-world treatment patterns of anti-CD20 therapies in multiple sclerosis: insights into patients treated with Ocrelizumab and Ofatumumab in Germany

Abstract Category: THERAPY - 04.05 - Real world evidence

Preferred Presentation Type: Oral or poster presentation

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Introduction:

Insights into real-world treatment patterns of approved anti-CD20 (ocrelizumab [OCR] and ofatumumab [OFA]) disease modifying therapies (DMT) in multiple sclerosis (MS) are scarce. Understanding their treatment pathways can inform optimal MS management in clinical practice and offers additional insights into patient preferences.

Objectives/Aims:

This study aims to report real-world treatment pathways and persistence of OCR and OFA in German outpatients diagnosed with MS.

Methods:

The study analyzed data from the German NeuroTransData MS registry (NTD), including adult patients diagnosed with relapsing-remitting or secondary-progressive MS and newly treated with OCR or OFA DMTs earliest on the respective approval dates (01/2018 or 03/2021) and followed up to December 2023, representing up to 6 years and 2 years follow-up (OCR and OFA, respectively). Patients' characteristics at DMT start were assessed descriptively. Persistence was evaluated via Kaplan--Meier estimates, as the probability of remaining on OCR or OFA free from interruptions.

Results:

Overall, 1179 patients (OCR n = 909; OFA n = 270) were included. Baseline characteristics were similar across treatments: mean age (SD) of 41.6 (11.5) and 41.2 (10.9) years for OCR and OFA, respectively, mean disease duration from MS diagnosis of 9.9 (8.1) and 9.5 (8.2) years, mean expanded disability status scale score of 3.0 (2.0) and 2.5 (1.9), and mean crude relapses rate 12 months before DMT start of 0.6 (0.8) and 0.5 (0.7). OCR and OFA were initiated as first-line DMT in 21.7% and 24.1% of patients during the entire study period, respectively. The proportion of patients initiating both DMTs as first-line increased from 22.2% to 26.6% after 03/2021. The proportion of switches between the anti-CD20s was low: n = 41 (15.2%) from OCR to OFA and 2 (0.2%) from OFA to OCR. Persistence (95% CI) on OCR and OFA were 93.8% (92.2 - 95.5) and 94.7% (91.4 - 98.1) at one year and remained high for OCR at four years (72.2%, 68.5 - 76.1; no data for OFA). Over the study period, 196 patients discontinued OCR or OFA, mostly observed in OCR because of its longer observation time and availability since approval. Most-frequent discontinuation reasons were low efficacy (n=36, 18.4%), patient's desire (n=30, 15.3%), and family planning (n=27, 13.8%), pooled across DMTs.

Conclusion:

Our findings show similar one-year persistence rates for OCR and OFA, reflecting high patient acceptance. The increasing use of anti-CD20s as initial DMT signals a treatment strategy change, in line with updated treatment guidelines. The absence of notable clinical baseline differences underscores the multifactorial nature of anti-CD20 therapy choice.

Travel / Abstract Grant Application and Young Scientific Investigators' Session: No

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