

Multiple Sclerosis: DMT Switching in MS (US)



OVERVIEW

Multiple sclerosis is a complex disease that does not have clearly established treatment patterns. While the availability of multiple therapeutic tools is theoretically beneficial to the patient and neurologist, deciphering which treatment is best for which patient and when to initiate or switch therapies is a major challenge. With diagnosis occurring earlier in the disease course, patients are cycling through multiple therapies. Understanding when, why and to which product a neurologist will transition is critical to building a commercial strategy.

RealWorld Dynamix: DMT Switching in Multiple Sclerosis (US) will help you to evaluate this critical point in a patient journey. As a follow up to the 2016 study, the changes over the course of the past year, which have been significant for many DMTs, highlight this rapidly evolving market. As the physicians themselves complete the audits, RealWorld Dynamix also allows for forward looking perspectives about future intentions and also gives insight into which patient types Roche's ocrelizumab is most likely to capture.

SAMPLE & METHODOLOGY

Spherix Global Insights will conduct a large scale patient record audit for over 1,000 DMT-treated MS patients that were switched to a different brand in the past three months. Approximately 200 neurologists provide standard chart data along with their intentions and goals surrounding treatment choices. An attitudinal and demographic survey is also completed with the data integrated with the patient records to see how practice type and setting and certain beliefs influence the treatment pathway.

KEY QUESTIONS ANSWERED

- What are the most frequently prescribed agents for efficacy/safety/tolerability/patient/payer driven switches?
- How do second line switches differ from third and later line? How much time do patients spend on first line agents before switching?
- What is the opportunity cost for each brand (e.g. where would their brand have been selected if the first choice were not available)
- Are neurologists willing to sacrifice safety for more efficacy in certain populations of MS patients?
- How frequently are neurologists using the JC virus assay and does the result shape the patient pathway?
- How have the switching patterns changed year-over-year?
- What is the patient profile for Ocrevus?

KEY DATES

- Publication April 2017

Products Profiled

Commercial Products*

Bayer (Betaseron), Biogen (Avonex, Plegridy, Tecfidera, Tysabri, Zinbryta), EMD Serono (Rebif), Sanofi-Genzyme (Aubagio, Lemtrada), Novartis (Gilenya, Extavia), Roche (Rituxan), Sandoz (Glatopa), Teva (Copaxone)

Pipeline Agents

Active Biotech /Teva (Laquinimod), Roche/Genentech (Ocrevus), Novartis (Siponimod, Ofatumumab), Receptos/Celgene (Ozanimod), Actelion (Ponesimod)

*Brand names are trademarks of their respective companies. Rituxan is not indicated for MS but if frequently used off-label

Deliverables

- PowerPoint Deck
- De-identified database in SPSS or Excel
- Up to 10 custom analyses & 10 custom subgroups built into database

Related Reports 2017

- RealTime Dynamix: Multiple Sclerosis US
- RealTime Dynamix: Multiple Sclerosis EU
- RealTime Dynamix: Multiple Sclerosis Nurses US
- RealWorld Dynamix: DMT New Starts in Multiple Sclerosis US
- RealWorld Dynamix: DMT Switching in Multiple Sclerosis EU