



Audit of Multiple Sclerosis Practice Against NICE guidelines 2014 Sunderland Royal Hospital

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Background

Multiple sclerosis (MS) is an acquired chronic immune-mediated inflammatory condition of the central nervous system, affecting both the brain and spinal cord. It affects approximately 100,000 people in the UK. It is the commonest cause of serious physical disability in adults of working age. In 2014, NICE produced MS guidelines to replace the NICE clinical guideline (2003) and covers diagnosis, information and support, treatment of relapse and management of MS related symptoms.

After the NICE guideline of 2003, there was an audit of how the Sunderland MS Service of the time taken between initial referral to neurological services and diagnosis. This is an audit measuring the time between suspected MS and confirmed MS, and the time taken between a patient being eligible for Disease Modifying Therapy and receiving it.

Aims

To determine:

* The time taken from an appointment with a Neurologist with suspected MS to receiving a confirmed diagnosis

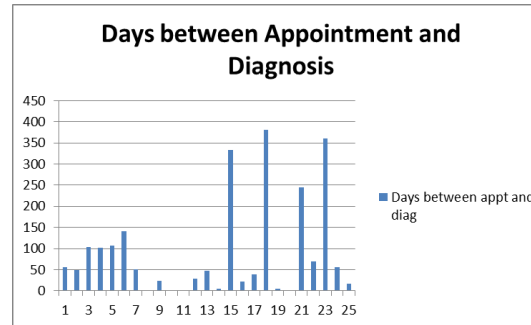
* The time taken from when a patient becomes eligible for DMT therapy to receiving their chosen DMT treatment

Methods

A database of patients at Sunderland Royal Hospital with a diagnosis of multiple sclerosis is kept. This retrospective study looked back at the records of these patients, including outpatient scheduling records, MRI scheduling records and outpatient clinic letters.

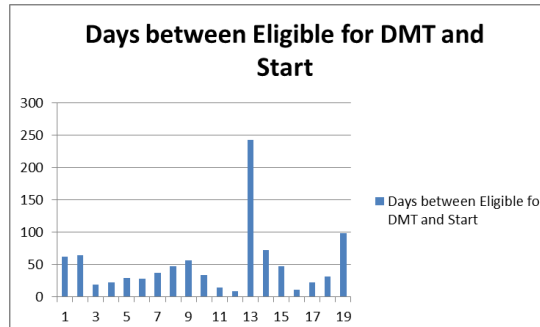
Results

25 patients who had made contact with the neurological services from 9.6.09 to 22.1.14 had their notes analysed to determine the time taken from an appointment with a Neurologist with suspected MS to receiving a confirmed diagnosis; and the time taken from when a patient becomes eligible for DMT therapy to receiving their chosen DMT treatment.



Diagnosis:

Patients waited a median of 49 days between outpatient appointment and diagnosis. The range was between 0 and 381 days. This compared superbly to the previous 2003 audit where a median of 315 days between outpatient appointment and diagnosis was achieved, with a range of 0 and 1764 days.



Treatment:

Patients eligible for DMTs started treatment in median time of 32 days with a range between 9 and 243 days. This wasn't measured in the 2003 audit

Discussion

Regarding diagnosis, patients report that the wait from seeing their Neurologist with suspected diagnosis to a confirmed diagnosis as being an anxious time and so the fact that the median time for this period has reduced from 315 days in 2003 to 49 days is a huge step forward.

Regarding DMT treatment, Dr Gold's 2010 abstract Evolving expectations around early management of multiple sclerosis states "current opinion on treatment encourages early intervention with well-tolerated disease-modifying treatments in order to optimize long-term clinical outcomes."

Therefore to show a median time of 32 days between patients eligible for DMTs and then starting treatment is a very pleasing audit result.

It is important to note that although DMTs can be highly effective, it is ultimately the patients' choice, and in this audit there was an example of one patient with a gap of 243 days whilst the patient considered if they wanted treatment.

19/25 patients became eligible for DMT therapy in this audit. Exceptions were patients who were diagnosed with Primary Progressive MS; and patients with Clinically Isolated Syndrome who are eligible for DMT funding by NHS England only if the patients are within 12 months of a clinically significant clinically isolated syndrome and MRI evidence predicts likelihood of recurrent episodes.

Comparative Data

The Novo study in Spain found the median overall time from initial medical consultation and the confirmation of the diagnosis by a specialised MS unit to be 5.7 months; and the median time from symptom onset to first treatment was two years.

Conclusion:

Sunderland Royal patients wait a comparably short time for their diagnosis and treatment, and the service has moved forward considerably since the last audit in 2003, and is favourable compared to previous audits.