

What Factors Influence Changes in MS Management?

Comparing the Perspectives of Patients and Health Care Providers using Nominal Group Technique

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Background

- Little is known about differences between patient or health care provider concerns that may prompt a change in the management of Multiple Sclerosis (MS).
- Incorporating patient perspectives into treatment decisions promotes shared decision-making and values-based choices.

Study Objectives

To compare factors that may influence changes in the management of MS between patients with MS and health care providers.

Inclusion Criteria

- Patients:**
- Confirmed MS diagnosis
 - Age 21-75
 - Web access
 - Targeting racial diversity
 - National sample
- HCPs:**
- Neurologist, PA, RN or NP;
 - MS focus,
 - Sees ≥ 10 MS patients/month
 - National sample

Methods

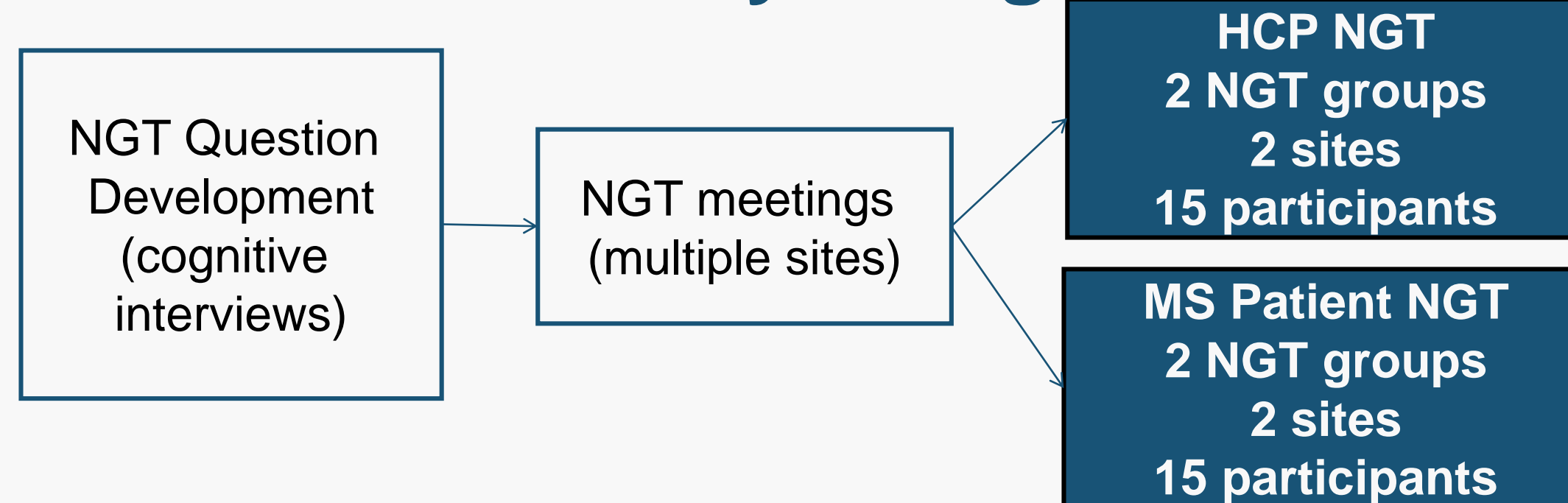
Nominal Group Technique (NGT):

- Structured focus group
- Elicits and prioritizes responses to a single question
- NGT Steps:
 1. Participants silently write down ideas to the question
 2. Round-robin recording of ideas then group discussion
 3. Private vote on item importance with weighted ballots
- Resulting prioritized lists of items were combined

NGT Questions

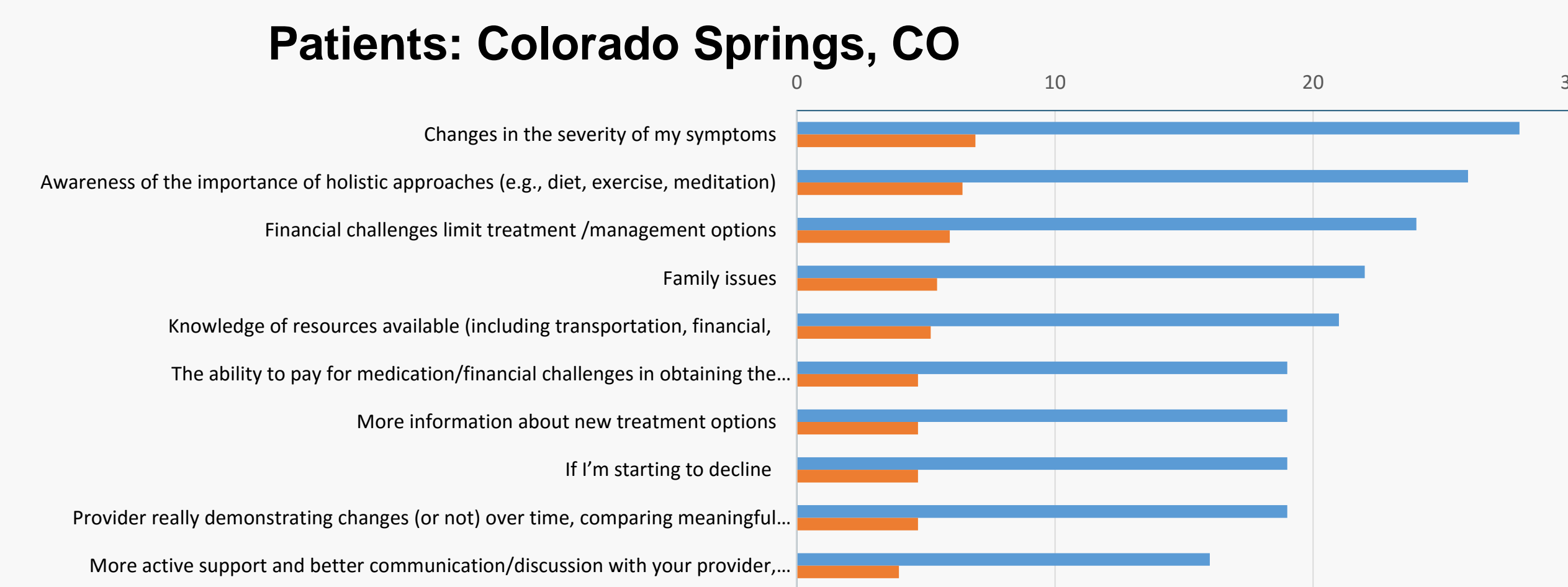
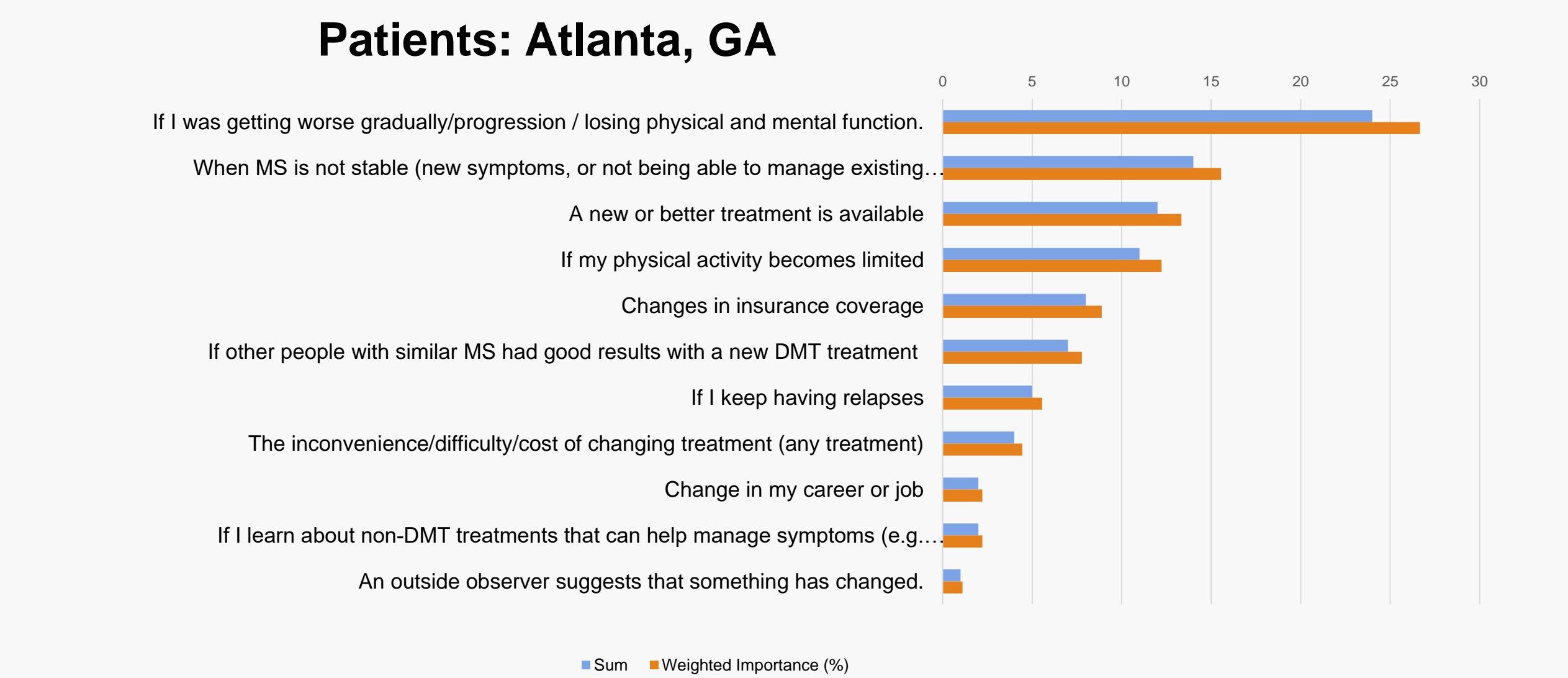
- Patients were asked: “What factors would make you decide to change how you manage your MS?”
- HCPs were asked: “What factors would make you decide to change how you manage your patient’s MS?”

Overall Study Design

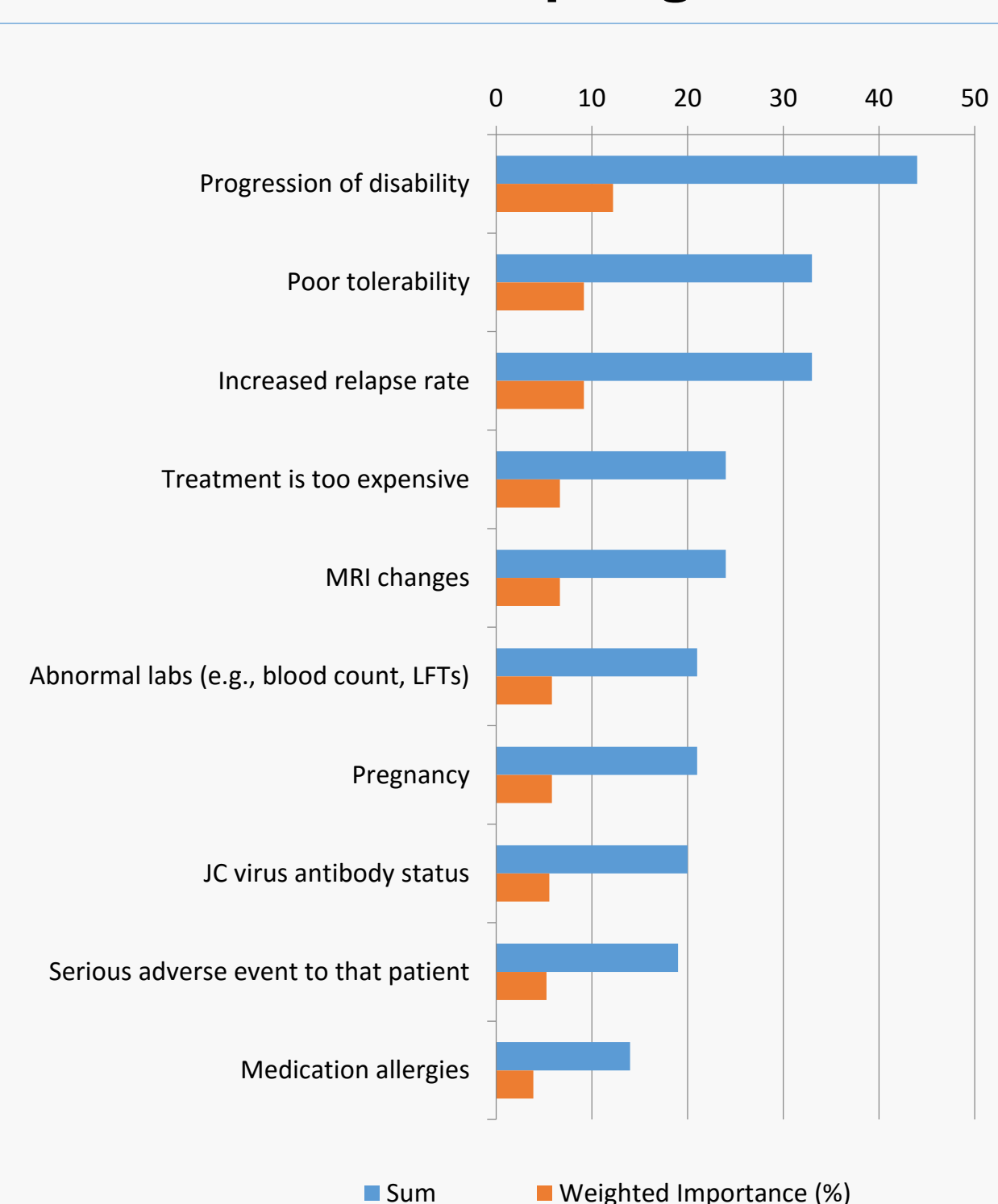


Results

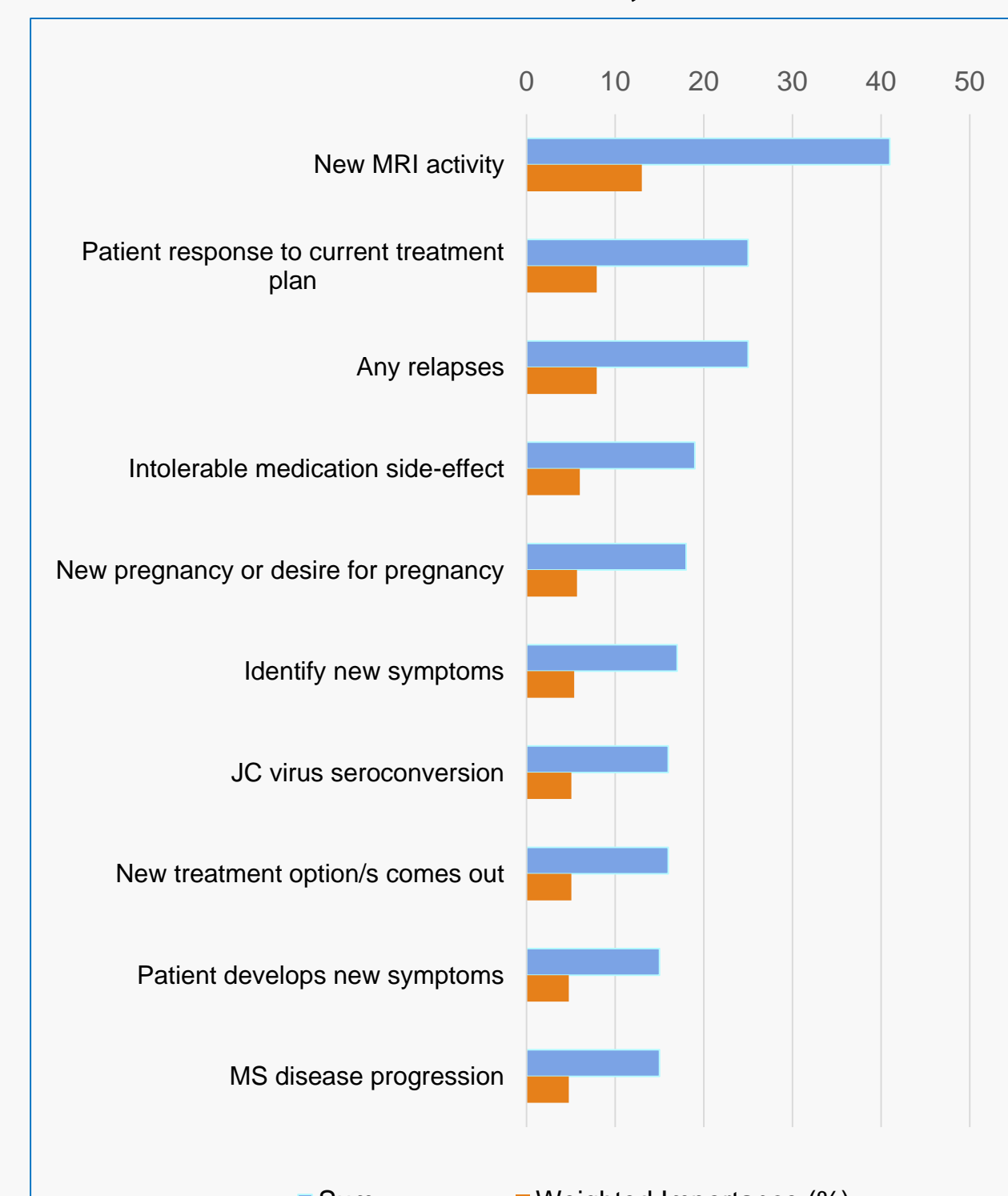
Raw NGT Findings: Top 10 Factors



HCPs: Colorado Springs, CO



HCPs: Denver, CO



Comparison of Factors Influencing Treatment Changes, Patients versus HCPs, by Category

(Shading indicates items that were unique to either patients or HCPs)

Patient Factors	HCP Factors
New or better treatments are available	
If others with similar MS had good results with a new DMT	New treatment option/s comes out
Finding out about new or better treatment	New research findings
Awareness of non-DMT treatments or holistic approaches	
Lifestyle/convenience	
Family issues	Patient's desire for change
Inconvenience of changing treatment	
Access to exercise equipment	
Disease progression or relapses	
Starting to decline /getting gradually worse	Progression of disability
Losing physical or mental function	Any relapses/Increased relapse rate
Physical activity becomes limited	
Having relapses or more relapses	MS disease progression
Change in MRI	MRI changes/New MRI activity
Provider demonstrates objective evidence of change (or not)	
MS is not stable (new symptoms, unable to manage symptoms)	Identify new symptoms/ Worsening of chronic symptoms (e.g. fatigue)
Financial concerns	
Change in financial situation	Insurance and financial availability
Change in insurance coverage	Change in insurance provider
Change in my career or job	
Treatment is too expensive	Treatment is too expensive
Unable to handle treatment	
Getting tired of dealing with MS	Patient response to current treatment
Complications or adverse effects arise from the med	-Serious adverse event to that patient -Abnormal labs/Intolerable side-effect -Medication allergies
Symptoms of depression / helplessness develop/worsen	Pregnancy /desire to become pregnant
Caring and well-informed medical team	
More active support and better communication with provider	
Having a supporting neurologist who is well informed	
A change in provider	
Medical Background	
My age	
Diagnosis of PML	JC virus seroconversion
Support	
Knowledge of resources available (transportation, \$)	
End of a clinical trial that provides support and treatment	
Other	
	Poor tolerability
	Lack of compliance
	New safety concerns of a DMT

Key Findings

- The most important factor for patients was changes in severity of symptoms/disease progression.
- The most important factors for providers were new MRI activity and progression of disability.
- Both patients and HCPs prioritized slowing disability.
- Only patients prioritized awareness of holistic approaches, availability of resources, and inconvenience.
- Only providers prioritized concerns about safety, adverse events, and non-adherence.

Implications

- There were differences in the factors that might influence treatment changes between patients and HCPs.
- There were differences in how similar factors were articulated by both groups.
- Assessing factors that influence patient decisions about changing treatment should improve patient-provider communication and treatment management.
- Communication tools are needed to bridge communication gaps and support shared decision making in discussions about MS treatment.

Limitations

- Recall bias
- Small sample size limits generalizability
- Cross-sectional study design

Next Steps

- Develop and validate preference assessment instrument

References

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