

Health Resource Utilization among Individuals with Multiple Sclerosis: Analysis from the North American Registry for Care and Research in Multiple Sclerosis (NARCRMS)

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Introduction

- ❖ The North American Registry for Care and Research in Multiple Sclerosis (NARCRMS) is a physician-based longitudinal registry of clinical records and patient-reported outcomes.
- ❖ The health resource utilization (HRU) questionnaire developed for NARCRMS represents a way of collecting patient-centered data to analyze multiple sclerosis (MS) related HRU patterns and the potential impact of having MS.

Objectives

- ❖ To describe real-world health care utilization pattern of the NARCRMS cohort of patients
- ❖ To determine the living situation and disability income status of this cohort
- ❖ To elucidate type of assistance (paid or unpaid homecare) received by the participants enrolled in the NARCRMS registry

Methods

- ❖ A cross-sectional analysis of the NARCRMS-HRU questionnaires which were completed at enrollment by individuals with MS or CIS across the United States and Canada
- ❖ The Patient-reported services and support were according to the HRU in the three months prior to reporting
- ❖ The data was extracted for analysis on November 30, 2020 and analyzed using SPSS version 25

Results

- ❖ Between December 1, 2016 and November 30, 2020; 802 patients were enrolled in NARCRMS from 25 participating sites
- ❖ Of those enrolled, 711 (88.7%) patients (528 females, mean age = 42.7 ± 10.05 years, and median EDSS = 1.5) completed the HRU questionnaire.

Results

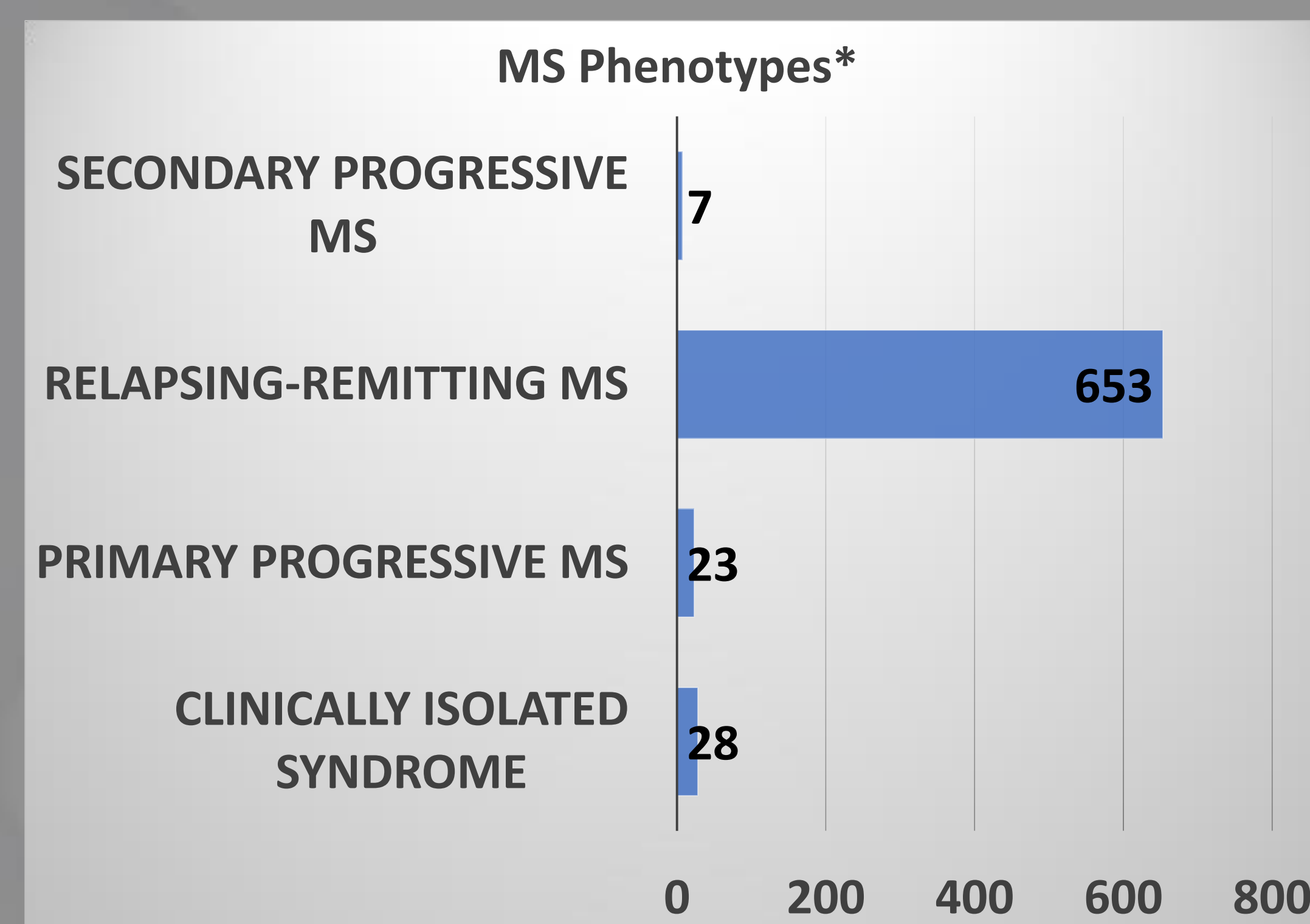


Figure 1: MS Phenotypes of the participants who completed the HRU questionnaire (n=711)

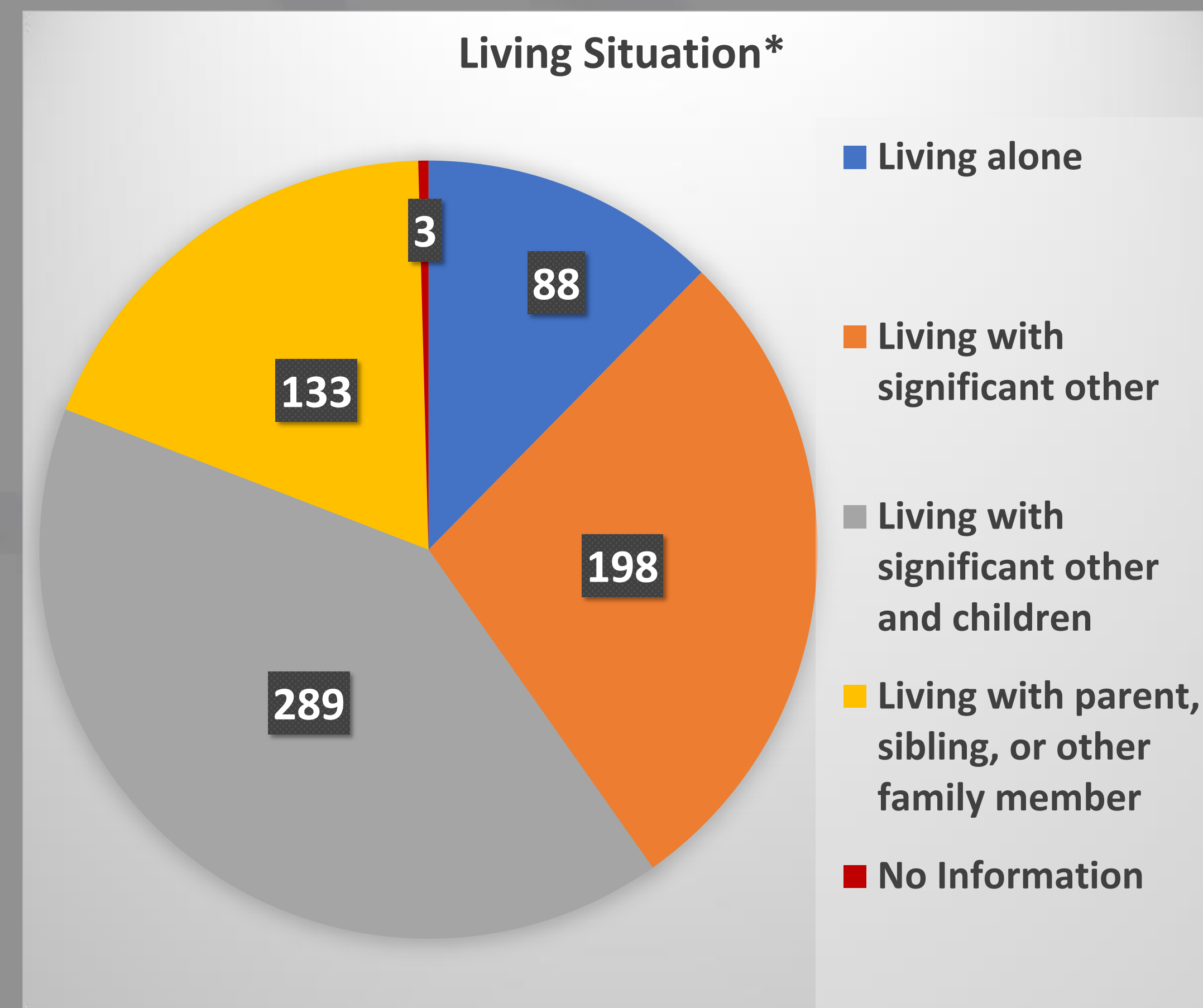


Figure 2: Living situation of the participants in the three months prior to enrollment

* As of November 30, 2020

Results

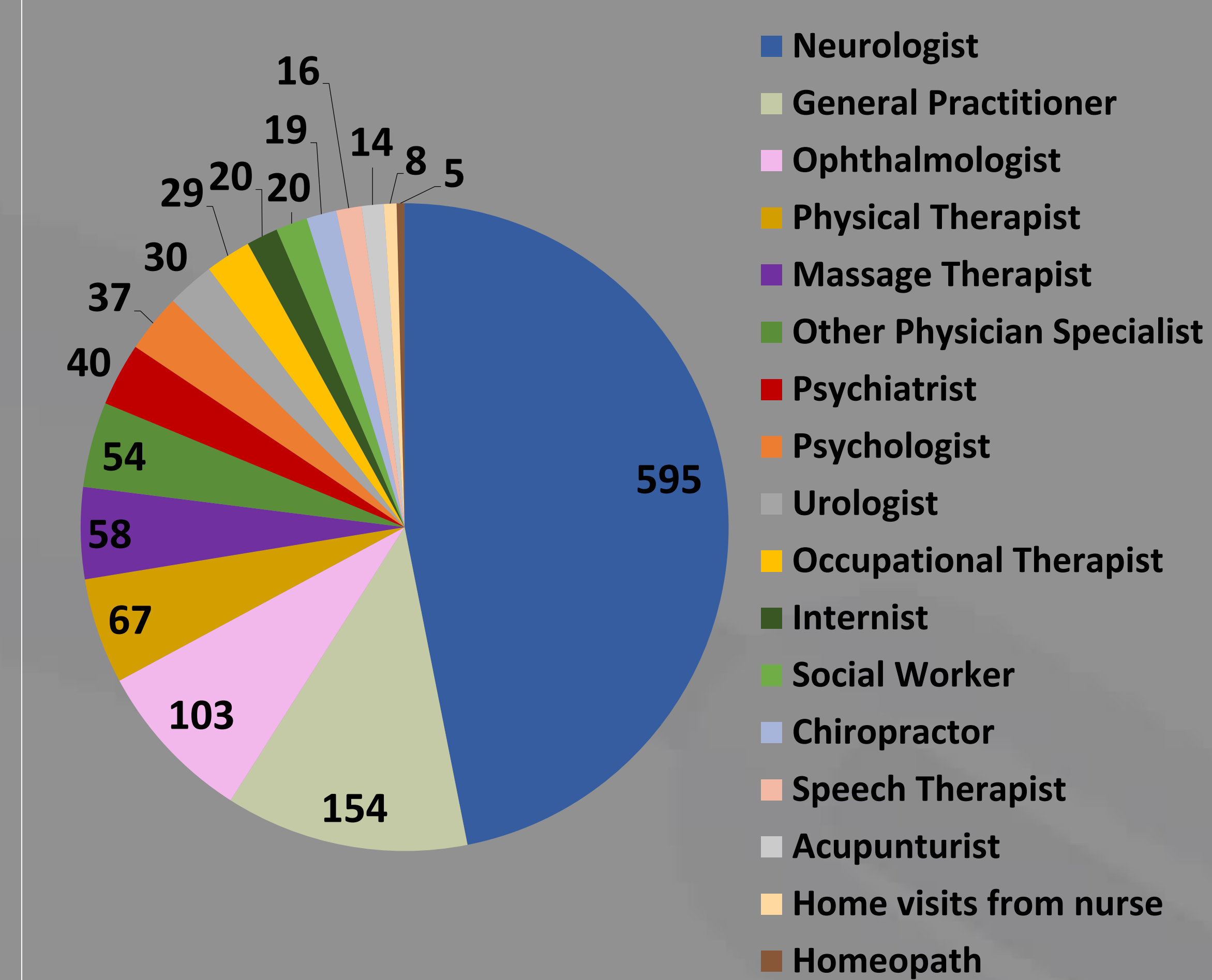


Figure 3: Healthcare provider visits in the three months prior to enrollment due to MS

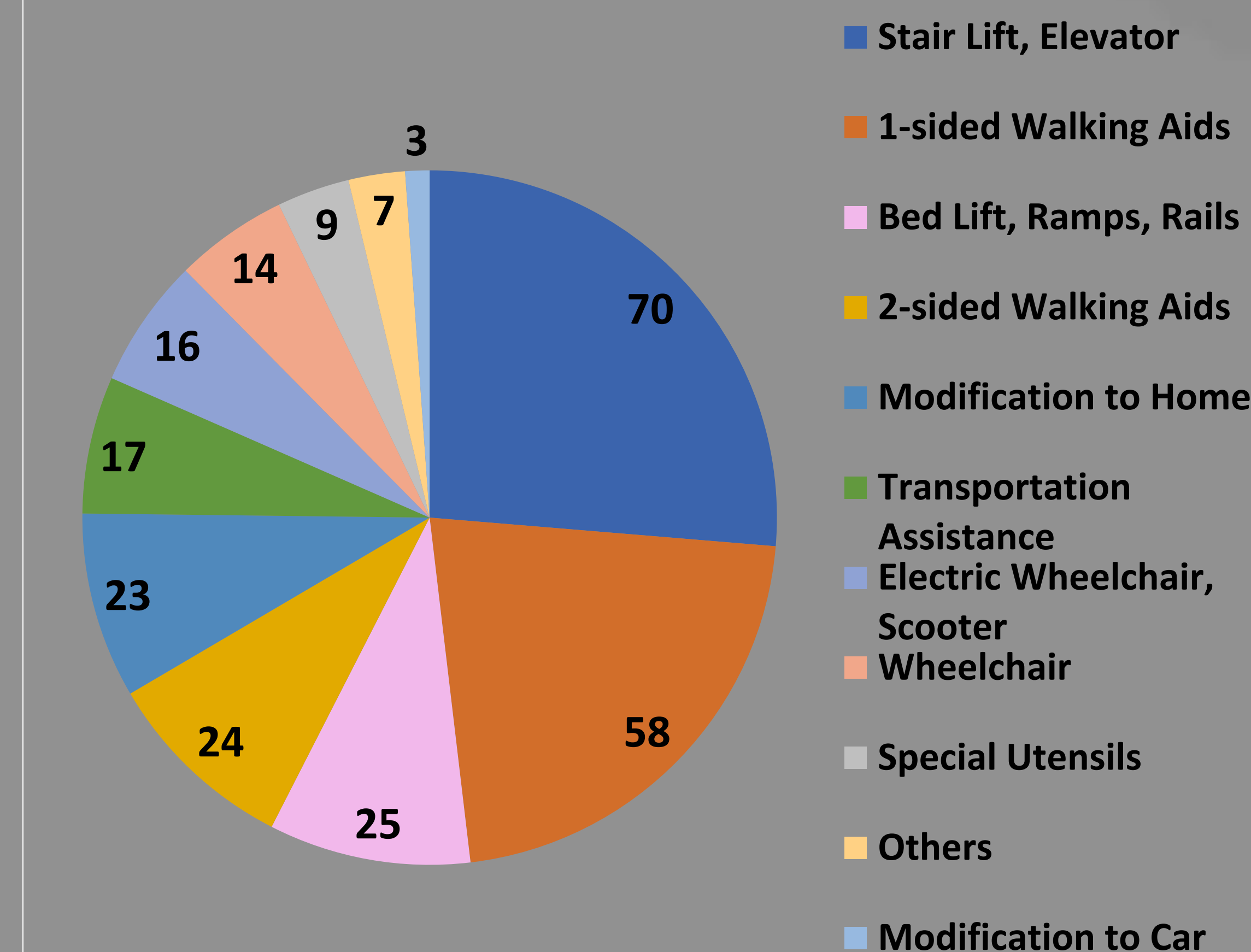


Figure 4: Types of aids utilized in the three months prior to enrollment due to MS

Results

- ❖ 47 (6.6%) patients had received unpaid homecare (family, friends) with a mean number of 5.6 ± 9.8 hours/day for 34.2 ± 61.7 days. Family members or friends of 63 (8.9%) patients had to miss paid work due to the patients' MS, with a mean number of 6.2 ± 22.8 days.
- ❖ Eight (1.1%) patients had received paid homecare with a mean number of 3.4 ± 1.2 hours/day for 6.8 ± 7.1 days. 84 (11.8%) patients were receiving disability income at enrollment due to MS.
- ❖ Forty patients had visited an emergency room, 24 patients had an inpatient hospital stay, and four patients were admitted to a rehabilitation center due to MS.

Conclusions

- ❖ MS has economic implications for both people living with MS and their family members or friends.
- ❖ Services from a neurologist, a general practitioner, an ophthalmologist, a physical therapist, and a massage therapist were the top five most frequently reported services received by this cohort of patients.
- ❖ Stair lift/elevator and one-sided walking aids were the top two most frequently reported aids utilized by the enrolled participants.
- ❖ A higher proportion of NARCRMS participants had received unpaid homecare from family or friends in the three months prior to reporting as compared to paid homecare.

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