Background

- Epilepsy is one of the most frequent neurological diseases.
- No representative data about the drug treatment of adult incident focal epilepsy patients exist for Germany.

Objective

- To investigate the antiepileptic drug (AED) treatment in patients with newly diagnosed focal epilepsy in Germany in 2014.

Methods

- This analysis was based on claims-data of 2.7 million members of a regional German statutory health insurance fund (AOK PLUS).
- Analyses were carried out for focal epilepsy (ICD10-Code G40.0/G40.1/G40.2).
- Analyses were based on patients with incident focal epilepsy (diagnosed in 2007/8); AED treatment analysis was done for these patients in the year 2014, so 5-7 years after that incident diagnosis.
- Inclusion criteria:
  - Patients aged 16-years or older
  - At least one in- or outpatient diagnosis of focal epilepsy in 2007 or 2008
  - At least one prescription of an AED in 2014.
- Exclusion criteria:
  - Any previous epilepsy diagnosis/AED prescription in the last 6 months before the first diagnosis of focal epilepsy.
  - The number of previously prescribed AEDs stratified by type of prescribed AEDs in 2014 were calculated.
  - ‘Previously prescribed’ was defined as the number of prescribed AEDs from the first prescription onwards (2007/2008 - 2013), excluding the treatment in 2014.
  - ‘Newer AEDs’ (introduced in the last decade, since 2006): Lacosamide, Eslicarbazepine, which were introduced in the last decade, are only rarely prescribed and relatively late in the treatment course.

Results

PATIENT DEMOGRAPHICS

- The sample showed 4,555 incident adult patients (mean age: 59.38 years, age SD: 21.082; female: 54.4%).
- 1,639 patients (mean age: 53.43 years, age SD: 19.632; female: 45.4%) were identified with AED monotherapy in 2014 (76.0%).
- 0.6% of all patients with monotherapy in 2014 are on 1st-line treatment
- 87.5% of all patients with add-on therapy in 2014 are on 2nd- or 3rd-line treatment

ANTEIPILEPTIC DRUG TREATMENT

Mean number of previously prescribed AEDs

- The mean number of previously prescribed AEDs varied between the substances:
  - 0-1 previous AEDs: Carbamazepine (0.53), Gabapentin (0.84), and Valproic acid (0.87)
  - 1-2 previous AEDs: Oxcarbazepine (1.07), Lamotrigine (1.08), Levetiracetam (1.13), Topiramate (1.25), and Pregabalin (1.57)
  - 2-3 previous AEDs: Clobazam (2.38), Zonisamide (2.55), and Lacosamide (2.59)
  - ≥3 previous AEDs: Eslicarbazepine (3.42).
- The sample showed 4,555 incident adult patients (mean age: 59.38 years, age SD: 21.082; female: 54.4%)
- 25.4% of all patients with monotherapy in 2014 are on 1st-or 2nd-line treatment
- 65.5% of all patients with add-on therapy in 2014 are on 2nd- or 3rd-line treatment
- At least one prescription of an AED in 2014.
- Patients with AED monotherapy in 2014 (76.0%) or second line therapy with established AEDs (mostly Levetiracetam, Lamotrigine or Valproic acid as first choice), which is consistent with the recommendations from the German treatment guideline, valid at the time of data collection.
- Newer AEDs (eg, Lacosamide, Eslicarbazepine) are rarely prescribed and relatively late in the treatment course.

Conclusions

- A variety of AEDs are available for the treatment of focal epilepsy.
- Many patients remain on their first- or second-line treatment with established AEDs (mostly Levetiracetam, Lamotrigine or Valproic acid as first choice), which is consistent with the recommendations from the German treatment guideline, valid at the time of data collection.
- Newer AEDs (eg, Lacosamide, Eslicarbazepine) are rarely prescribed and relatively late in the treatment course.

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