Real-World Analysis Affirms the High Persistence and Adherence Observed With Diroximel Fumarate in Patients With Multiple Sclerosis

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Why carry out this study?

Adherence to disease-modifying therapies is key for achieving optimal outcomes in multiple sclerosis (MS)

- Diroximel fumarate (DRF) is an oral fumarate approved for relapsing MS
- Similar efficacy and safety to dimethyl fumarate (DMF) but with improved gastrointestinal (GI) tolerability based on clinical trials
- Limited data characterizing persistence/adherence in a real-world setting

How was this study performed?

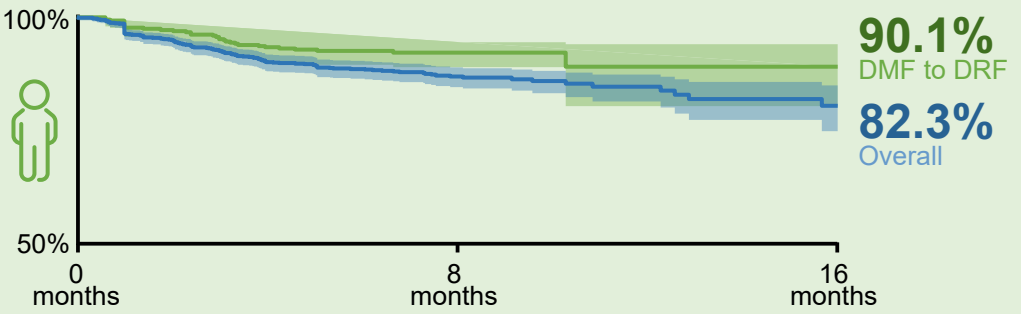
- Retrospective analysis of AcariaHealth Specialty Pharmacy Program
- Patients with MS who initiated DRF from December 1, 2019, through January 30, 2021
- Overall population of > 1000 patients
- Subgroup of patients (n = 433) who had switched from DMF to DRF
- Analyzed persistence and adherence

What was learned from the study?

- In this analysis of > 1000 patients treated with with DRF, in the overall population, persistence to DRF at 16 months was high (82.3%), discontinuation due to GI AEs was low (4.5%), and patients were highly adherent to therapy (mean proportion of days covered: 90.8%)
- The findings were consistent in the subgroup of 433 patients who switched from DMF to DRF

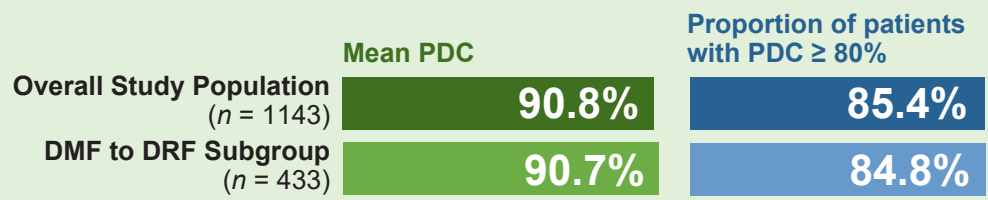
Persistence to DRF was high

Estimated proportion of patients remaining persistent on DRF treatment at 16 months was **82.3%** in the overall population and **90.1%** in the DMF to DRF subgroup



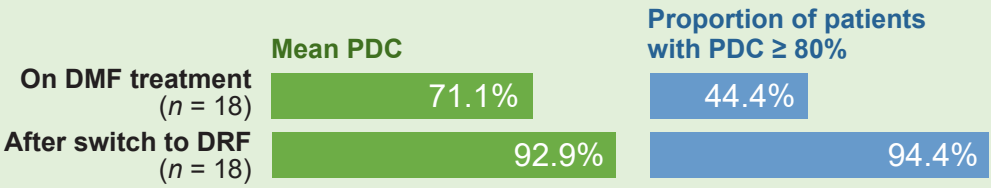
DMF dimethyl fumarate, *DRF* diroximel fumarate
[a]Persistence was characterized using the Kaplan-Meier method with 95% CIs (95% CI indicated by shaded area).

Adherence to DRF **was high** in both the overall and DMF to DRF subgroups



DMF dimethyl fumarate, *DRF* diroximel fumarate, *PDC* proportion of days covered

Adherence in a subset of patients (n = 18) with lingering GI AEs[a] on DMF **increased significantly** when they switched to DRF



AE adverse event, *DMF* dimethyl fumarate, *DRF* diroximel fumarate, *GI* gastrointestinal, *PDC* proportion of days covered
[a]Lingering GI AEs were defined as those GI AEs resulting in discontinuation of DMF ≥ 1 year after initiating DMF.

PEER-REVIEWED FEATURE

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