A DISCRETE-CHOICE EXPERIMENT EVALUATING PREFERENCES FOR ON-DEMAND TREATMENTS FOR PATIENTS WITH PARKINSON’S DISEASE AND “OFF” EPISODES

INTRODUCTION

Parkinson’s disease (PD) is a chronic neurodegenerative disorder that affects movement and is characterized by "off" episodes (a state of motor impairment that is not responsive to current medications) [1]. Among the 300 participants, 294 (98%) had experience with "off" episodes [2]. Treatment of "off" episodes is a significant burden for patients, caregivers, and health care systems [3]. Among the 300 participants, 294 (98%) had experience with "off" episodes [4].

OBJECTIVE

- To quantify patient preferences for theoretical on-demand treatments among patients with PD and "off" episodes.
- To define the least preferred mode of administration was injection with a high out-of-pocket cost and mode of administration.
- To determine the least preferred mode of administration was injection with a high out-of-pocket cost.
- To identify a theoretical on-demand treatment with "off" episodes.

METHODS

Study Design

- Participants were willing to pay considerably more for a theoretical on-demand treatment with AEs ($24).
- Dissolvable sublingual film with AEs vs an inhaled treatment with AEs ($24).
- Dissolvable sublingual film with AEs vs an injectable with AEs ($52).
- Treatment that decreased the time to "full on" ($58).

In an online discrete-choice experiment (DCE) survey evaluating patient preferences for theoretical on-demand treatments of Parkinson’s disease (PD)-related “off” episodes, participants placed the most importance on avoidance of high out-of-pocket costs and mode of administration. A theoretical dissolvable sublingual film with no AEs was preferred over all other modes of administration.

RESULTS

- Among the 300 participants, 294 (98%) had experience with "off" episodes (Table 2).
- The least preferred mode of administration was injection with a high out-of-pocket cost and mode of administration.
- To identify a theoretical on-demand treatment with "off" episodes.

KEY FINDINGS

- In an online discrete-choice experiment (DCE) survey evaluating patient preferences for theoretical on-demand treatments of Parkinson’s disease (PD)-related “off” episodes, participants placed the most importance on avoidance of high out-of-pocket costs and mode of administration.
- A theoretical dissolvable sublingual film with no adverse events (AEs) was preferred over all other modes of administration and mode-specific AEs.
- The least preferred mode of administration was injection with a high out-of-pocket cost.
- Participants were willing to pay considerably more for a theoretical on-demand treatment with AEs ($24).
- Dissolvable sublingual film with AEs vs an inhaled treatment with AEs ($24).
- Dissolvable sublingual film with AEs vs an injectable with AEs ($52).
- Treatment that decreased the time to "full on" ($58).

Study Population

- Completed an envelope-based survey (age 18–75 years) at a US with a self-reported diagnosis of PD for 5 or more years, or 5 or more years of “off” episode experience were recruited as participants. The survey included participants from all 50 states and from a range of racial and ethnic backgrounds.

Statistical Analyses

- Data were analyzed using a random parameters logit model.
- The model related participants' choices to the differences in attribute levels across the alternative levels in each DCE question.
- The attribute utility is calculated as the difference between the most- and least-preferred levels and was conditional on the levels selected for other attributes.

DISCLOSURES AND ACKNOWLEDGMENTS

- The views expressed are those of the authors and do not necessarily reflect the views of the sponsor or the US Food and Drug Administration.
- The views expressed are those of the authors and do not necessarily reflect the views of the sponsor or the US Food and Drug Administration.
- The views expressed are those of the authors and do not necessarily reflect the views of the sponsor or the US Food and Drug Administration.
- The views expressed are those of the authors and do not necessarily reflect the views of the sponsor or the US Food and Drug Administration.
- The views expressed are those of the authors and do not necessarily reflect the views of the sponsor or the US Food and Drug Administration.

REFERENCES