Individualized OnabotulinumtoxinA Treatment for Lower Limb Spasticity Resulted in High Patient and Clinician Satisfaction in the ASPIRE Study

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To view a video of Dr. Alberto Esquenazi discussing these data, please follow the link below:

https://vimeo.com/300659002/a702fbb848
INTRODUCTION

OnabotulinumtoxinA Treatment Utilization

- The most commonly treated lower limb spasticity presentation was equinovarus foot (Figure 3)
- Data on onabotulinumtoxinA dosing, localization method, and muscle targeting for each lower limb spasticity presentation are shown below
- Lower limb spasticity presentations treated with onabotulinumtoxinA

OnabotulinumtoxinA Treatment Information

- Treatment strategies often changed between treatment sessions (Figure 4)

UnabotulinumtoxinA Treatment Satisfaction

- Majority of patients and clinicians were satisfied that onabotulinumtoxinA helped manage spasticity and had sustained benefit of treatment (Figure 5)
- The majority of patients and clinicians also indicated that they would continue onabotulinumtoxinA treatment to manage spasticity

Safety

- Overall, 197/530 patients (37.3%) reported 643 adverse events (AEs)
- 21 AEs in 18 patients (3.4%) were considered treatment-related
- The most common treatment-related AE was muscular weakness (n=6, 1.1%)
- A total of 138/530 patients (12.6%) reported 138 serious AEs
- 3 serious AEs in 2 patients (0.4%) were considered treatment-related
- Muscle weakness, dysphagia, slow speech
- No new safety signals were identified

DISCLOSURES

- Neither satisfied nor satisfied
- Financial arrangements of the authors with companies whose products may be related to the present report are listed below, as declared by the authors.
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- All authors met the ICMJE authorship criteria.

SUMMARY

- The use of onabotulinumtoxinA for the treatment of spasticity over a 5 to 11 week period resulted in consistent, high satisfaction among patients and clinicians.
- This study reports the individualized nature of onabotulinumtoxinA utilization.
- Clinical strategies varied, with corresponding changes in treatment satisfaction.

METHODS

- ASPIRE is a prospective, observational registry conducted at select sites in North America, Europe, and Asia (NCT01930786)
- A total of 530 patients (12.6%) reported 138 serious AEs
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BACKGROUND

- OnabotulinumtoxinA treatment for spasticity is variable, as treatment is individualized and dependent on numerous factors

OBJECTIVE

- To explore real-world patterns of onabotulinumtoxinA utilization in patients with lower limb spasticity from the ASPIRE study, over 2 years

RESULTS

- Study Disposition
  - The ASPIRE study was conducted at 54 sites, by 74 clinicians, across 7 countries and 3 continents
  - Primary specialty of clinicians: 59.5% Physiatry, 40.5% Neurology
  - Average 15.7 years of treatment experience
  - 730 patients received 1 onabotulinumtoxinA treatment for spasticity during the 2-year study
  - 397 patients (64%) completed the 2-year study

Figure 1. Study disposition

- Patient Demographics and Clinical Characteristics
  - Patients were: on average, 53.6 years of age (range=18.5–93.2 years)
  - Sex was nearly evenly distributed (female: n=380, 52%; male: n=350, 48%)
  - Majority of patients were white (n=562, 77%)
  - 461 patients (63%) were continuing botulinum toxin treatment for spasticity
  - Stroke was the most frequently reported etiology (66%) (Figure 2)

Figure 2. Distribution of patient etiology of spasticity

- Safety
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  - The most common treatment-related AE was muscular weakness (n=6, 1.1%)
  - A total of 138/530 patients (12.6%) reported 138 serious AEs
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  - No new safety signals were identified

- Summary
  - OnabotulinumtoxinA has been effectively used in the treatment of spasticity, with consistent, high satisfaction among patients and clinicians.
  - Clinical strategies vary, with corresponding changes in treatment satisfaction.