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

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

https://vimeo.com/300663316/77bd8be38b
INDIVIDUALIZED ONABOTULINUMTOXINA TREATMENT FOR UPPER LIMB SPASTICITY RESULTED IN HIGH PATIENT AND CLINICIAN SATISFACTION IN THE ASPIRE STUDY

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INTRODUCTION

- Other includes hereditary spastic paraparesis, stroke during aneurysm clipping, Chiari malformation, and hydrocephalus.
- SPASTICITY RESULTED IN HIGH PATIENT AND CLINICIAN SATISFACTION
- INDIVIDUALIZED ONABOTULINUMTOXINA TREATMENT FOR UPPER LIMB SPASTICITY

METHODS

- Study Disposition
  - The ASPIRE study was conducted at 54 sites, by 74 clinicians, across 7 countries and 3 continents (Figure 1)
  - Primary specialty of clinicians: 59.5% Physiatry, 40.5% Neurology
  - Average 15.7 years treating spasticity
  - 62% had >10 years of experience using onabotulinumtoxinA to treat spasticity
  - 730 patients received 21 onabotulinumtoxinA treatment for spasticity during the 2-year study
  - 397 patients (54%) 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=192, 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

- OnabotulinumtoxinA Treatment Utilization
  - The most commonly treated upper limb spasticity presentation was clenched fist (Figure 3)
  - Data on onabotulinumtoxinA dosing, localization method, and muscle targeting for each upper limb spasticity presentation are shown below
  - Figure 3. Upper limb spasticity presentations treated with onabotulinumtoxinA

- OnabotulinumtoxinA Treatment Information
  - Treatment strategies often changed between treatment sessions (Figure 4)
  - Figure 4. Upper limb spasticity treatment information

- OnabotulinumtoxinA Treatment Satisfaction
  - The majority of patients and clinicians were satisfied that onabotulinumtoxinA helped manage spasticity and had sustained benefit of treatment (Figure 5)
  - Figure 5. Patient and clinician satisfaction

- Safety
  - Overall, 178,484 patients (37.0%) reported 563 adverse events (AEs)
  - 15 AEs in 14 patients (2.9%) were considered treatment-related
  - The most common treatment-related AE was muscular weakness (n=7, 1.4%)
  - A total of 178,484 patients (14.3%) reported 137 serious AEs
  - 3 serious AEs in 2 patients (0.04%) were considered treatment-related
  - No new safety signals were identified