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Patient-Reported Activity Impairment, Work Productivity Loss, and Carcinoid Syndrome Outcomes: Interim Analyses of the XERMELO Patient Registry



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BACKGROUND: Inadequately controlled carcinoid syndrome (CS) may impair daily activities and has been shown to reduce productivity with subsequent costs to society. In the third interim analysis of an ongoing registry, we analyzed activity impairment, productivity loss, and CS control and satisfaction reported by patients receiving telotristat ethyl (TE).

METHODS: Ongoing, noninterventional prospective registry of patients with CS initiating TE who opt-in to online surveys every 6 months up to 3 years. Assessments include demographic and clinical characteristics, changes in activity impairment and work productivity, weight, CS symptoms, patient global impression of change (PGIC), and satisfaction with TE treatment. Characteristics and outcomes were evaluated using descriptive statistics.

RESULTS: This interim analysis included 158 patients at Baseline; 41% were ≥ 65 years old, 61% female, 83% white. Among patients with Baseline and Month 6 responses ($n=79$), 49% reported decreased activity impairment. Forty-six patients (29%) reported employment at Baseline. Mean work productivity loss was 45% (SD, 27%) at Baseline and 24% (SD, 19%) at Month 6. Mean missed work hours due to CS in the previous 7 days was 3.2 (SD, 6.1) at Baseline and 1.1 (SD, 2.5) at Month 6. Most patients reported weight gain or maintenance, improvements in CS symptoms, and satisfaction with TE treatment at Month 6 (Table).

Patient-reported outcomes at Month 6

	Month 6 (% patients)
Reduced activity impairment	49%
Reduced work productivity loss	57%
Weight gain or maintenance	77%
Reduced bowel movements	84%
Improved CS symptoms	78%
Satisfied with CS symptom control	75%

CONCLUSION: Patients reported reduced activity impairment and work productivity losses after 6 months of TE treatment. Patients continued to report weight gain or stability by Month 6, with improvements in CS symptom control and satisfaction with TE treatment.

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