



Optimizing initiation for self-injectable medications with remote demonstration kits delivered via specialty pharmacy

Sean Glynn^a, Todd Greenwood^a, Yash Prajapati^a, Xinyu Xu^a, Tim McLeroy^b, Joe Reynolds^b

aZS Associates, bNoble International



BACKGROUND

- Patient training for self-injectable medications varies greatly, with some receiving no or minimal in clinic training and training resources
- In-clinic training shows variations in time, methods, and effectiveness
- **Remote Demonstration Kits (RDKs)** with high-fidelity devices are an alternative for at-home self-injection practice

- Supplying RDK's to patients via Healthcare Providers and Pharma HUB services has been considered, but logistics and awareness of services may prove challenging



- Specialty Pharmacy, given its role in supplying self-injectable medications, is well-positioned to provide patient training and distribute RDKs effectively

OBJECTIVE

- This exploratory pilot aims **to investigate the impact of supplying self-injection RDK's** (IFU, injection demonstration device and video) to patients via specialty pharmacy

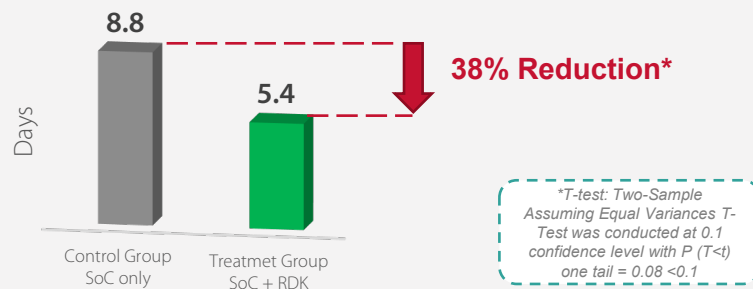
METHODS

- Patients were randomized equally into two groups: Standard of Care (SoC) or SoC + RDK. The RDK was shipped on the same day as the first dose, and Patient Reported Outcome (PRO) data was collected at intervals, alongside patient refill data from the specialty pharmacy
- Inclusion Criteria: One of three biologics with a 14-day dosing schedule and naïve to self-injection medication

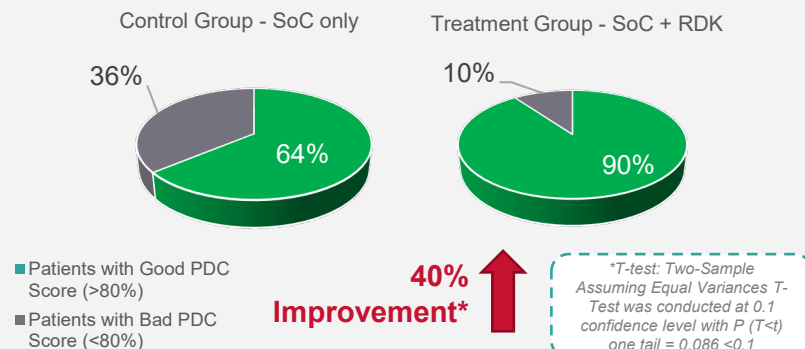
Measure	Measure description
Script-to-Injection	✓ Patients reported 1 st self-injection
Adherence	✓ Patients claimed 1 st refill
Persistence	✓ Patients who are eligible for 3 dispenses

RESULTS

Average Script-to-Injection Days



Adherence Impact - PDC (Percentage of Days Covered)



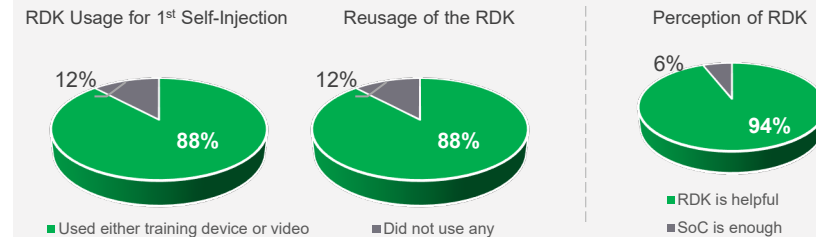
Persistence Impact (Preliminary Findings)

	Persistence Rate*
Control Group (SoC only)	82%
Treatment Group (SoC + RDK)	94%

* Patients discharged in refills due to co-pay and side effects are not included in the persistence calculation

RESULTS

Kit Usages and Perceptions in Treatment Group



CONCLUSIONS

- Script-to-Injection Days:** Patients who received the RDK **took their first injection significantly faster (38%)** than those who received only standard of care
- Short-term Adherence (PDC):** Patients who received the Noble RDK are **40% more likely to reach an acceptable 80% PDC** than those who only received standard of care
- Persistence to therapy:** Early persistence data shows a **15% improvement in patients persisting to therapy**
- Patient perceptions:** Patients who receive the RDK are **highly likely to use it for on their initial dose (88%)** and **highly likely to re-access the training kit (88%)** for re-orientation for later doses

Limitations:

- Small sample size warrants further study with larger sample
- Script-to-Injection Days were not assessed if the 1st injection date was not available via survey
- This pilot study's scope was limited to demonstrating short-term adherence impact due to its relatively brief duration

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Presenting author: Sean Glynn

Full author: Sean Glynn^a, Todd Greenwood^a, Yash Prajapatia, Xinyu Xua,
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^aZS Associates, ^bNoble International

Background

Recent research reported that patient training for self-injectable medications varies greatly. Many patients receive no training or are left to find their own resources. HCP's that conduct training for patients report differences in the amount of time spent training, who delivers the training and training methods. When patients are offered demonstration devices to use at home only 2% decline. Supplying demonstration devices and Remote Demonstration Kits (DK's) to patients via HCPS has been recommended but the logistics may prove challenging.

Specialty Pharmacy is uniquely positioned to provide patient training given their role in the supply of self-injectable medications and could be a practical distribution path for RDK's.

Objectives + methods

This exploratory pilot attempted to investigate the impact of supplying self-injection RDK's (IFU, injection demonstration device and video) to patients via specialty pharmacy.

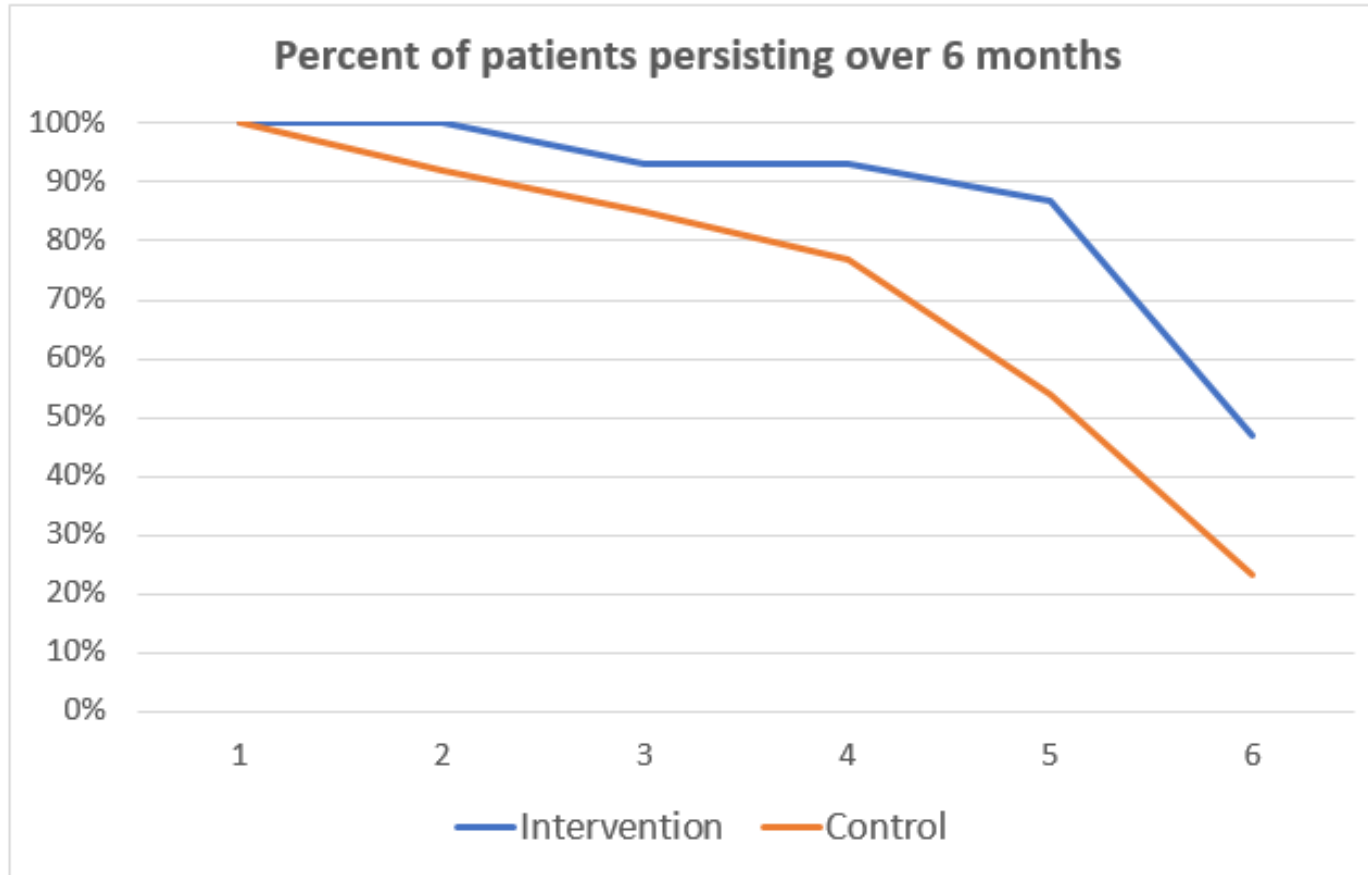
Methods:

The prospective randomized pilot sought to quantify the impact of specialty pharmacy supplying self-injection RDK's to patients. Patients had to be on one of three biologics with a 14-day dosing schedule (all indications for each biologic were included), naïve to self-injection medication as well as other inclusion/exclusion criteria. Patients were assessed for inclusion at their initial care call with a specialty pharmacy care coordinator and if appropriate were randomized to receive Standard of Care (SoC) or SoC plus the RDK. The RDK was shipped such that it was received same day as the first dose of medication. PRO data were collected at various intervals and patient refill data was collected from the specialty pharmacy.

Result

A total of 52 patients were enrolled in the pilot and randomized equally into SoC or SoC + RDK. Of patients who received the RDK, 88% (N=15/17) reported using some portion of the RDK to support the administration of their first injection and 94% (N=16/17) reported feeling more confident to perform the self-injection after using the RDK. Patients who receive the RDK were more likely to inject sooner than those who did not, 5.4 days after receiving the medication shipment vs 8.8 days ($p=0.08$). Patients who received the RDK were more likely to have better adherence after their second dispense of medication (Percent of Days Covered (PDC)>80%) 90% v 64% ($p=0.086$).

Persistence Survival Curve



Patients who received the Noble Training Kit persisted to therapy longer than those in the control group.

Mean scores

- Intervention = 5.7 months
- Control = 4.4 months

A 29% improvement in persistence duration

Conclusion

This pilot demonstrates that remote demonstration kits can speed patient initiation to self-injectable medications and improve short-term adherence. Patients, providers, payors, pharma and specialty pharma may all benefit from an improved patient training experience. The authors recommend a larger study to give further confidence to these initial results and a longer data collection period to explore impact to therapy persistence.

CONTACT: Sean Glynn, sean.glynn@zs.com, ZS Associates

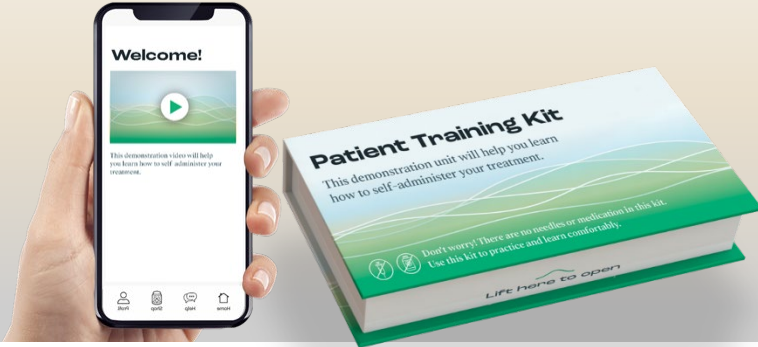


NPSI: NOBLE'S PATIENT SUPPORT INITIATIVE

Noble's Pilot Has Demonstrated Impact on Patient Experience, Adherence and Refill Behavior

BACKGROUND

Noble, working with a specialty pharmacy, conducted an exploratory pilot to investigate the impact of supplying self-injection remote demonstration kits to injection naive patients via specialty pharmacy. These kits contained a simple instructions for use, injection demonstration device, and an instructional video via QR code.



EARLY FINDINGS

- Many of these patients *never* received training from an HCP
- **Utilization: 88%** patients used the kit after receiving it
- **Repeated Use : 88%** patients went back for additional support after the first injection
- Early persistence data shows a **15% improvement in patients persisting to therapy**
- Patients reported **lower anxiety and improved confidence**, preparedness overtime (first 3 doses)

The future state of patient training should be built around the needs of the patient, and requires cooperation from multiple stakeholders:



RESULTS:

38%

Improvement in time to first injection administration
(3.5 days sooner)

15%

Improvement in time to ordering first refill

40%

Improvement in achieving >80% PDC

29%

Improvement in medication persistence at 6 months

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