REAL-WORLD STUDY TO ASSESS QUALITY OF LIFE, MEDICATION ADHERENCE AND SATISFACTION WITH A LOW-DOSE 7-DAY BUPRENORPHINE PATCH

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Introduction: To assess the benefits of a transdermal patch compared to other commonly prescribed oral opioids in patients with OA of the hip and/or knee.

Methods: This report provides a cross-sectional overview of baseline scores from a prospective, observational study of patients prescribed 7-day transdermal buprenorphine (TDB), co-codamol tablets or tramadol for at least 1 month. Patients self-completed questionnaires at baseline and then monthly for 3 months to assess quality of life (QoL; SF-36), medication adherence (Morisky adherence scale) and patient satisfaction (5 point scale from very satisfied to very unsatisfied). The baseline results are reported here; longitudinal data will be analysed in subsequent reports.

Results: 755 patients (27.9% >60 years of age, 27.4% male and 72.6% female) completed the baseline questionnaire and 636 patients were eligible to be included in the analysis (7-day TDB (n = 78), cocodamol (n = 378), tramadol (n = 180)). 119 patients did not meet the inclusion criteria and so were not eligible for the analysis. QoL, as assessed via the mean (SD) SF-36 aggregate physical score, was higher for 7-day TDB [40.53 (10.11)] compared with cocodamol [29.62 (10.11)] or tramadol [26.94 (8.53); P < 0.0001 for both comparisons]. Patient satisfaction with treatment was also higher for 7-day TDB with 80.8% being very satisfied or satisfied, compared to 41% for co-codamol and 38.3% for tramadol. The Morisky adherence score was lower for the 7-day TDB (indicating better adherence) with a mean (SD) of 2.79 (1.88) compared to 3.54 (2.00) for co-codamol and 3.23 (1.91) for tramadol (P = 0.0005).

Conclusion: Based on these initial results, patients with OA of the hip and/or knee appear to have higher QoL on treatment with 7-day TDB compared to co-codamol or tramadol: higher scores were observed in several aspects of QoL, as well as greater treatment satisfaction. These improvements could be due to better adherence with a transdermal patch compared to oral medications. Forthcoming longitudinal data from this study may provide support for this hypothesis.