

2nd International Conference on **Alzheimer's Disease and Dementia** September 23-25, 2014 Valencia Convention Centre, Spain

An open-label, observational study evaluating caregiver preference and treatment compliance in Alzheimer's disease patients treated with oral versus transdermal monotherapy

Tournoy Jos¹, De Deyn P P², Marchau Michiel³ and Glassee Tinne⁴

¹University Hospitals Leuven, Belgium

²Memory Clinic, Hospital Network Antwerp (ZNA), Belgium

³ASZ hospital Geraardsbergen, Belgium

⁴N.V. Novartis Pharma S.A., Belgium

Background: In the phase III, pivotal trial, rivastigmine transdermal patch has shown higher caregiver satisfaction and greater preference than oral formulation in Alzheimer's disease (AD) patients. It investigated not only caregiver preference but also treatment compliance of oral versus transdermal therapy for AD.

Methods: AXEPT was a 6-month, open-label, observational study in mild-to-moderately severe AD patients, from 32 centers in Belgium and Luxemburg. After treatment decision, patients were grouped into 2 cohorts: Oral (donepezil, galantamine, rivastigmine, or memantine) versus transdermal (rivastigmine) therapy. The primary outcomes included caregiver preference (Questionnaire based evaluation, collected in transdermal treated cohort), caregiver satisfaction, and treatment compliance (Caregiver medication questionnaire scaled 0-10). Longitudinally, physician's treatment preference (Questionnaire based evaluation) and adverse events (AEs) incidence were measured.

Results: Overall, 93 patients were enrolled between May-Nov 2010, of which 90 (mean age 79 years; 62% female; 64 [71.1%] in the patch cohort) were analyzed. The caregiver preference was 73% for the patch (most frequent reasons: easier to use, administer and comply) and 26.9% for the oral treatment. Treatment compliance was comparable between the cohorts (mean score: 9.15, patch; 9.71, oral). Average caregiver satisfaction score was 6.3 (patch); 7.4 (oral). Overall, 22 (71.0%) physicians expressed preference for a patch. No unexpected treatment related adverse events were reported.

Conclusion: Caregivers' and physicians' preference for transdermal therapy in AD were high and consistent with the literature. Compliance rates were similar between the cohorts and safety data reflect the known profiles of the different treatment formulations.

Biography

Tournoy Jos is Head of the Division of Gerontology and Geriatrics, University of Leuven, and Vice-Head at the Geriatrics Department and Memory Clinic of the Leuven University Hospitals, Belgium. He obtained his PhD (2006) on molecular mechanisms involved in Alzheimer's disease. His clinical expertise includes age-related neurodegenerative diseases, including Alzheimer's disease, in addition to general geriatric disorders. His research mainly focuses on determinants and markers of age-related cognitive decline and neurodegenerative disorders.

jos.tournoy@uzleuven.be