Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

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Material(s) and Method(s): This observational drug utilisation study, using national register data in Finland (1996–2022) and Sweden (2005–2022), will report the number of pregnancies in women with MS (1) exposed to interferon beta only in later-stage pregnancy and (2) unexposed to any MS disease-modifying drugs. The 95% confidence intervals (CIs) of detectable relative risks (RR) for pre-defined adverse pregnancy outcomes are calculated for study size simulation. Based on the available background prevalence among the unexposed (Pbackground) and assuming 4% of all pregnancies are exposed, 100 exposed pregnancies are expected to be sufficient to detect all anomalies, spontaneous abortions, elective terminations (RR=2.00 [95%CI 1.40–2.89]; Pbackground 12.0%); preterm birth (RR=2.00 [95%CI 1.28–3.18]; Pbackground 8.3%); low birth weight (RR=2.00, [95%CI 1.03–4.05]; Pbackground 4.0%); major congenital anomalies (RR=2.50, [95%CI 1.32–4.92]; Pbackground 3.5%); and small for gestational age (RR=2.50 [95%CI 1.08–6.29]; Pbackground 2.0%).

Result(s): One hundred exposed later-stage pregnancies are considered the minimum number for a cohort study on the adverse pregnancy outcomes. First results of this drug utilisation study will be reported in 2024. In case of inadequate number of pregnancies, the drug utilisation study will be extended for 2 years.

Conclusion(s): This drug utilisation study (EUPAS38736) will evaluate whether the accrued number of exposed pregnancies is adequate for a cohort study to evaluate the safety of interferon beta exposure in later-stage pregnancy among women with MS.

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Medication Adherence Among Patients with Multiple Sclerosis During the COVID-19 Pandemic: Perspective from the Near East Region

Murad Al-Naqshbandi, Hoda Joudi, Abded Raki

Merck Serono Middle East FZ-Ltd (an affiliate of Merck KGaA), Dubai, United Arab Emirates

Background: Several factors rendered patients with multiple sclerosis (pwMS) likely to be affected by the rapidly evolving events of the COVID-19 pandemic. Globally, pwMS were confronted with limited access to their healthcare team, potential treatment interruption, and concerns about the risk of infection while treated with immunomodulatory disease-modifying therapies (DMTs), particularly high-efficacy DMTs. The current study explored treatment-related concerns and their impact on medication adherence during the COVID-19 pandemic in pwMS treated with subcutaneous interferon beta-1a (sc IFN β-1a) in the Near East region.

Material(s) and Method(s): A total of 3,348 pwMS treated with sc IFN β-1a across five countries of the Near East region (Iran, Iraq, Jordan, Lebanon, and Palestine) participated in a telephone survey. The survey was conducted by nurses, on behalf of the Merck Patient Support Program in the Near East region, from May 1–30, 2021. A standardized questionnaire allowed participants to report their concerns related to COVID-19 and their MS treatment, along with medication adherence over the previous 3 months. Concern with current MS treatment was rated on a scale of 1–10, with levels 1–3 reflecting a low level of concern, levels 4–7 reflecting a moderate level of concern, and levels 8–10 reflecting a high level of concern. Adherence to sc IFN β-1a was defined as administration of the prescribed three weekly injections.

Result(s): Amongst the countries surveyed, a total of 3,074 participants (92%) reported being concerned about sc IFN β-1a increasing their risk of COVID-19 infection. However, a majority of participants from Iraq (94%), Palestine (88%), Jordan (84%), and Iran (84%) reported a low level of concern. More participants from Lebanon reported high (51%) and moderate (38%) levels of concern about their MS treatment and the risk of COVID-19 infection. Full adherence to sc IFN β-1a over the previous 3 months was reported by 3,293 (98%) participants. Key factors influencing medication adherence included the lack of access to sc IFN β-1a, physician supervision, and adverse events.

Conclusion(s): This study explored the impact of treatment-related concerns on medication adherence in pwMS treated with sc IFN β-1a during the COVID-19 pandemic in the Near East. Despite a large proportion of study participants being concerned about a potential increase in the risk of COVID-19 infection while on their current treatment, participants were only mildly concerned and the majority remained adherent to the prescribed medication. Furthermore, the fear of COVID-19 infection by participants was not a key factor associated with non-adherence. Instead, limited access to medication and decisions of supervising physicians negatively impacted medication adherence. More than a year after the World Health Organization declared the COVID-19 outbreak a pandemic, safety concerns related to DMTs still exist. Interferons can be prescribed as usual in COVID-19 times, and this should be communicated effectively to clinicians and patients.

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Prevalence of Urinary Tract Symptoms in Patients with Multiple Sclerosis and Health Care Seeking Behavior: A Cross Sectional Study in Riyadh, Saudi Arabia

Awad Al Harbi

King Abdullah Bin Abdul-Aziz University Hospital, Riyadh, Saudi Arabia

Background: Exploring the prevalence of lower urinary tract symptoms (LUTS) in multiple sclerosis (MS) patients may lead to optimizing therapeutic interventions that could improve their quality of life (QoL). The main objective of this study was to assess the prevalence of LUTS in patients with MS in Riyadh, Saudi Arabia.

Material(s) and Method(s): This cross-sectional study targeted Saudi nationals aged 18-50 who were previously diagnosed with MS and presented with urinary tract dysfunction symptoms. It was conducted from November 2020 to January 2021 through the distribution of a self-administered electronic questionnaire.

Result(s): Data were collected from 158 patients with MS. Most participants (44.3%) were between 30 and 39 years old, and 64.6% were female. The severity of LUTS is significantly associated with the QoL of patients, where an increase in severity of LUTS would worsen their QoL (p < 0.001). More than half of the sample (52.5%) indicated that they had taken treatment for these symptoms, 40.7% of whom reported using medicinal treatment. The duration of illness, age, or gender was found to have no significant effect on LUTS severity.

Conclusion(s): We found that there is relatively high prevalence of lower urinary tract symptoms among patients with multiple sclerosis which seem to have a significant negative impact of quality of life of those patients. There is still need to have more patients reporting those symptoms to their health care provider as well as to be started on effective treatment strategies when appropriate.

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