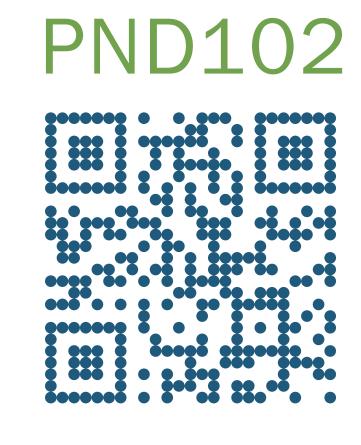
Care pathway diversity of patients with Multiple Sclerosis between french regions

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Conclusion

This study highlights the diversity of Multiple Sclerosis hospital management and care practices between these three regions.

This study does not explore the determinants these differences. In particular, the analysis of comorbidities, date of the diagnosis and the history of the expert centers, as well as patients profiles, could explain these differences.

Cost shown in this study are those of hospital management of MS. These costs were estimated to represent 22% of overall National Health Care expenditures for MS.

Objectives

The aim of this study is to analyze and to compare data from the 2015 French hospital discharge database, focusing on hospital care of patients with Multiple Sclerosis from 3 French regions with different characteristics in terms of prevalence, size and number of Multiple Sclerosis Competencies Resource and Centers.

Methods

Analysis of care pathways of MS patients was conducted using the French national hospital **PMSI** database discharge médicalisé ("Programme d'informations"). All Systèmes hospital admissions from the PMSI MCO 2015 database with a principal or related diagnosis (PD-RD) of G35* ("Multiple Sclerosis") were extracted. We also extracted chemotherapy administered treatments hospital during admissions with a significant associated diagnosis (SAD) of G35*, if the PD or RD was coded Z512 ("non-tumor chemotherapy"). The analyzed regions correspond to those of 2015, some of which have since merged.

The study analyzed:

- MS patients characteristics: gender, age;
- hospital care characteristics: inpatients, outpatients, mixed;
- hospital burden from a health insurance perspective.

We chose three regions to focus on for:

- prevalence difference;
- **Competencies and Ressource** Centers number;
- region size¹.

