HEALTHCARE CONSUMPTION, QoL, AND PATIENT-REPORTED OUTCOMES DURING GH REPLACEMENT IN HYPOPITUITARY ADULTS: RESULTS FROM THE GERMAN KIMS COHORT

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OBJECTIVES: The beneficial effects of growth hormone (GH) replacement in patients with GH deficiency (GHD) are now well recognized. Moreover, first evidence that these effects are accompanied by a reduction in the use of healthcare resources has been provided by KIMS, the Pharmacia International Metabolic Database of adult GHD patients receiving GH therapy (Genotropin, Pharmacia Corp.). The aim of the present study was to investigate effects of GH replacement in the German KIMS cohort. METHODS: The analysis was based on 105 patients (65 m, 40 w) with GHD. 1-year follow-up was available from all patients, 2-year follow-up from 60 patients. Statistical analyses were performed with repeated measurements technique. RESULTS: QoL, measured by Nottingham Health Profile (NHP) and QoL-Assessment in GHD Adults (QoL-AGHDA) significantly improved after 1 and 2 yrs of GH therapy (NHP distress index: 5.4 ± 4.4 (mean ± SD), 1 yr 3.7 ± 4.2 (p < 0.001), 2 yrs 4.1 ± 5.0; QoL-AGHDA score: 9.4 ± 6.3, 1 yr 6.4 ± 6.1 (p < 0.001), 2 yrs 6.3 ± 6.4 (p < 0.001)). Patient-reported outcomes were collected with help of Patient Life Situation Form. 64.0% reported subjective improvement at 1yr, and 78.9% at 2 yrs (2nd vs. 1st yr: p < 0.05). Visits to the doctor per yr (8.2 ± 6.9, 1yr 4.8 ± 7.2 (p < 0.001), 2 yrs 3.9 ± 5.0 (p < 0.001)), days in hospital (14.6 ± 20.5, 1yr 0.9 ± 3.3 (p < 0.001), 2 yrs 0.4 ± 1.8 (p < 0.01)), and days of sick leave (23.8 ± 33.3, 1yr 1.7 ± 3.5 (p < 0.05), 2 yrs 3.0 ± 4.2 (p < 0.05)) significantly decreased during GH therapy. Males presented a significantly better QoL score in terms of NHP distress index (p < 0.02). Need for assistance with daily activities decreased only in females from 30.8% to 19.1%. CONCLUSIONS: This country specific analysis of the German KIMS cohort confirms significant reduction in the use of healthcare resources as well as significant improvements in QoL and patient reported outcomes during GH replacement in previously untreated adults with GHD. Improvements in QoL seem to be more pronounced in males, whereas females showed a higher reduction of the need for assistance in daily activities.