ABSTRACT

Introduction: Extended Forsteo® Observational Study (ExFOS), a multinational, non-interventional, prospective, observational study, designed to evaluate fractures, back pain (BP), adherence and health-related quality of life (QoL) in teriparatide (TPTD) treated patients, based on the extension of treatment duration (24 months) and the addition of new indications (glucocorticoid-induced and male osteoporosis) was compared with EFOS.

Methods/design: Baseline data showed that Hellenic EFOS patients share similarities and noticeable differences with female ExFOS patients. To further evaluate such similarities / differences between the two studies, we aimed to compare the active treatment results of the Greek cohorts between EFOS² (N=301, all female) and ExFOS (N=416, 92.1% female). No statistical comparisons were performed.

Results: Approximately 80% of patients in both cohorts were on treatment one month before maximum treatment period. Lumbar T-score (mean±SD) increased from -3.46±0.67 (N=175) to -2.54±0.74 (N=120) at 18 months. In ExFOS, lumbar T-score increased from -3.39±0.73 (N=263) to -2.36±0.63 (N=78) at 24 months.

Conclusions: Two similarly designed studies, in comparable Hellenic populations, yielded similar results that should be interpreted in the context of observational studies.

INTRODUCTION

Extended Forsteo® Observational Study (ExFOS), a multinational, non-interventional, prospective, observational study, designed to evaluate fractures, back pain (BP), adherence and health-related quality of life (QoL) in teriparatide (TPTD) treated patients, based on the extension of treatment duration (24 months) and the addition of new indications (glucocorticoid-induced and male osteoporosis) was compared with EFOS²-³.

METHODS

Baseline data showed that Hellenic EFOS patients share similarities and noticeable differences with female ExFOS patients. To further evaluate the effect of the similarities / differences between the two studies on the response to therapy, we aimed to juxtapose the active treatment results of the Greek cohorts between EFOS² (N=301, all female) and ExFOS (N=416, 92.1 % female). No statistical comparisons were performed.

REFERENCES
