Real World Data on Antifibrotic Prescribing Practices and impact of ILD MDM on prescribing patterns in SHSCT.

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Background: Interstitial Lung Disease (ILD) is an umbrella term used for respiratory diseases that cause lung fibrosis. Lung damage from ILDs is often irreversible, worsening over time with a 3-5 year prognosis if untreated. There are two antifibrotic treatments available (Pirfenidone and Nintedanib). They are high cost, with funding approval requirements, blood monitoring and possible side effects. To ensure fair and equitable access, patients are discussed at ILD MDM (team includes Respiratory Physicians, Radiologists, Rheumatologists, Specialist ILD Pharmacist, Nurse and Dietician).

Method: A review of workload, prescribing practices and patterns was carried out using the SHSCT ILD database.

Results: The ILD MDM reviewed 28 patients in 2014, increasing to 280 patients in 2023 (1345 patients discussed since 2014). 20% of patients discussed are prescribed an antifibrotic. 53 patients commenced antifibrotics in the past 12 months. 76% of patients were prescribed Nintedanib in June 2022 (IPF, FVC range 50-80%) which reduced to 42% in June 2024 with the availability of generic Pirfenidone. 100% of patients commenced on antifibrotics receive medication review and counselling by the ILD Pharmacist, with follow up by the ILD Nurse Specialist and Pharmacist.

Conclusion: This review demonstrates a growing demand for the expertise of the ILD MDM, requirements for antifibrotics and specialist practitioners.

Keywords: Interstitial Lung Disease, Pirfenidone, Nintedanib, Pulmonary Fibrosis

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