Patient-reported positive outcomes upon initiation of teduglutide therapy

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Introduction

Perceived benefit is one factor determining therapy continuation. Little information is published regarding positive outcomes for patients receiving the GLP-2 analog teduglutide apart from success rates of weaning HPN and hydration volumes by 20%. Patients who are new to therapy may question how long after initiation should they expect to see results. Patients may collaborate with prescribers to improve therapy tolerance if they have hope for improvements in their quality of life. This data analysis will provide details regarding patients receiving teduglutide and their perceived benefits to therapy.

Methods

Dietitians interview patients receiving teduglutide as part of a service agreement, monitoring persistency and helping to eliminate barriers to therapy. Dietitians make weekly and monthly calls based on patients' drug start dates and document interventions in flowsheets in patients' electronic medical records. The interventions are published to data visualization software to monitor compliance with dietitian outreach as part of a quality improvement project. Retrospective analysis of the existing dashboard using three years of assessments

(May 1, 2021-April 30, 2024).

- Excluded patients whose medication was dispensed from a pharmacy not using the company's newest computer platform and patients who did not respond to outreach.
- Analyzed the time on therapy before a positive outcome was reported by the patient to the dietitian and which positive outcomes were most frequently reported.

Results

The data set included 336 patients with 2509 phone assessments.

- Most frequently reported first positive outcome was improved ostomy output / less diarrhea, occurring just after a month on therapy (72%, n=243).
- Mean time for first positive outcome for all patients who reported one was 32 days + 28.5 (n=314). Of the 22 patients who reported no positive outcome, 13 didn't answer the dietitians' calls after initial contact.
- Overall positive outcomes reported:
- improved ostomy output / less diarrhea (87%, n=292)
- weight gain (70%, n=236)
- HPN / IV hydration wean* (62%, n=136)
- improved appetite / interest in food (33%, n=112)
- feeling stronger / more energetic (27%, n=92)
- improved quality of life (23%, n=90)
- improved lab results (13%, n=45)
- fewer antidiarrheal medications (12%, n=40)
- fewer hospitalizations (n=39)
- being able to travel (n=35)
- tolerating more enteral nutrition volume (n=19)
- returning to work/school (n=14)
- improved sleep (n=13)
- *Of the 218 patients receiving parenteral support, 44 patients stopped hydration and HPN completely (20%) with another 92 patients reporting less time or days on hydration and HPN (42%) for a total of 136 patients experiencing a positive outcome of parenteral support weaning (62%).

Conclusions

- Teduglutide is associated with improved symptom control and improved quality of life measures, with most patients seeing a response to therapy within the first two months.
- Patients responded to teduglutide with a decrease in ostomy output and diarrhea as the most frequent recognizable response to therapy.
- In addition to the goal of weaning parenteral support, clinicians should be cognizant of improvements in patients' clinical status that can have significant impact in quality of life.



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Table 1. Timing of first reported positive outcome by patients receiving teduglutide

Reported first outcome

Improved ostomy output / less Weight gain

Feels stronger / more energeti

Less time / fewer days on HPN

Improved appetite / interest in

Less time / fewer days on IV hy

Fewer antidiarrheal medication

Increased urine output*

Improved quality of life

HPN discontinued

Fewer hospitalizations than pri

IV hydration discontinued

Improved labs*

Tolerating increase in enteral n

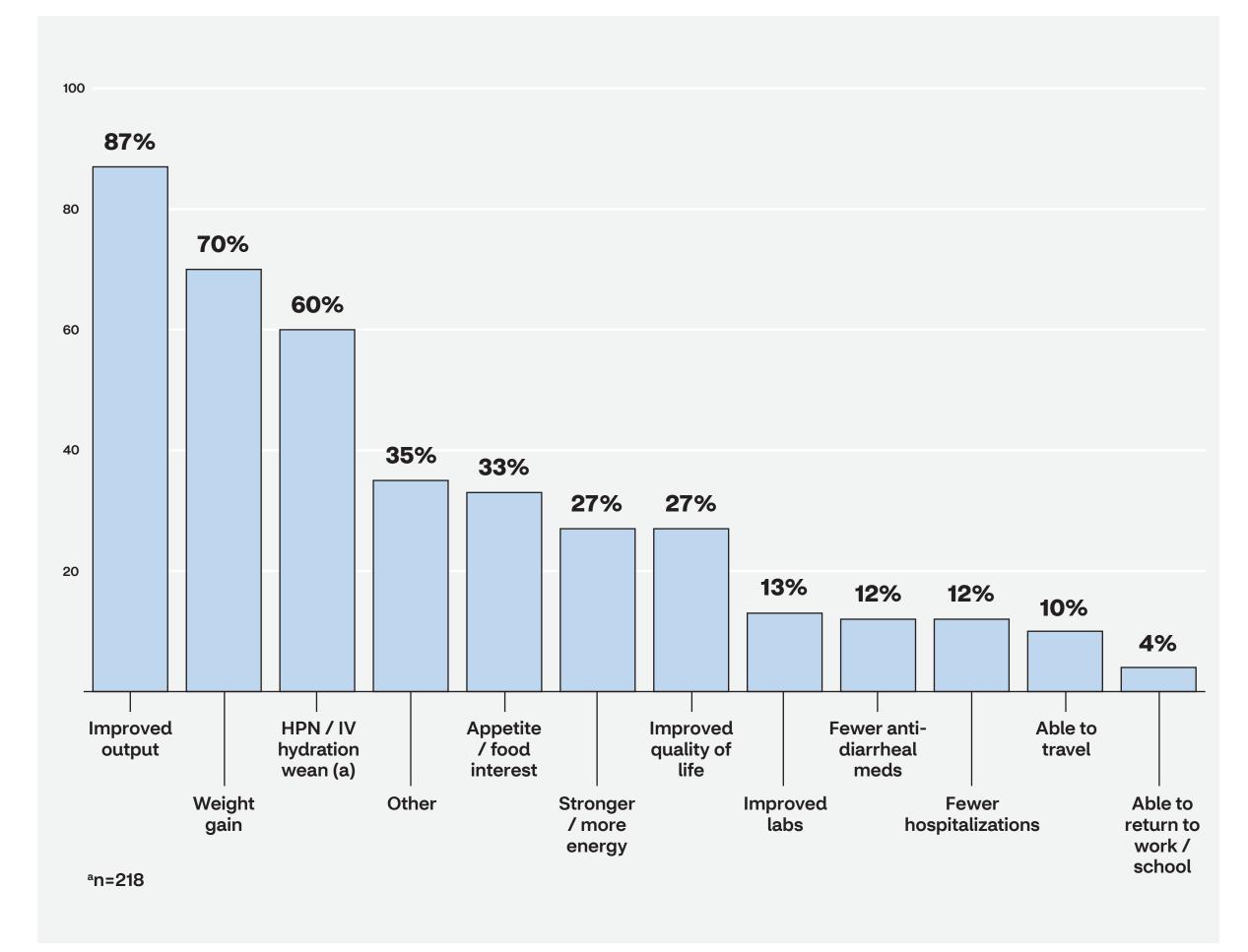
Less incontinence*

Less fistula output*

Improved sleep*

Key: HPN, home parenteral nutrition *These were identified as free text under the category "other positive outcomes"

Figure 2. Total positive outcomes reported by patients (n=336)





| | Number of patients reporting | Mean number of days from initiation <u>+</u> SD | Max days | Min days |
|-------------------|------------------------------------|---|-------------|-------------|
| s diarrhea | 243 | 31 <u>+</u> 26.43 | 149 | 2 |
| | 121 | 30 <u>+</u> 27.65 | 213 | 4 |
| ic | 28 | 25 <u>+</u> 14.87 | 90 | 8 |
| J | 26 | 32 <u>+</u> 28.72 | 119 | 5 |
| n food | 20 | 24 <u>+</u> 12.35 | 55 | 5 |
| ydration | 16 | 32 <u>+</u> 25.33 | 119 | 5 |
| ns | 16 | 27 <u>+</u> 12.24 | 58 | 12 |
| | 16 | 23 <u>+</u> 26.02 | 118 | 7 |
| | 15 | 27 <u>+</u> 20.19 | 81 | 5 |
| | 13 | 30 <u>+</u> 29.53 | 119 | 5 |
| ior to therapy | 10 | 37 <u>+</u> 22.83 | 88 | 12 |
| | 9 | 36 ± 14.31 | 55 | 13 |
| | 8 | 47 <u>+</u> 55.74 | 182 | 11 |
| nutrition volume* | 3 | 25 <u>+</u> 30.81 | 60 | 2 |
| | 3 | 21 <u>+</u> 9.29 | 29 | 11 |
| | 2 | 31 <u>+</u> 14.85 | 41 | 20 |
| | 2 | 20 <u>+</u> 0 | 20 | 20 |
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