

Nasal Polyp Symptoms: How Well Do Physicians Know Their Patients?

Poster No. 475

Benson VS¹, Sousa AR², Small M³, Scott M³, Milligan G³, Yang S⁴, Chan R²

¹Epidemiology, Value Evidence and Outcomes, GSK, Uxbridge, Middlesex, UK; ²Respiratory Clinical Sciences, R&D, GSK, Uxbridge, Middlesex, UK; ³Adelphi Real World, Bollington, UK; ⁴Value Evidence and Outcomes, GSK, Collegeville, PA, USA

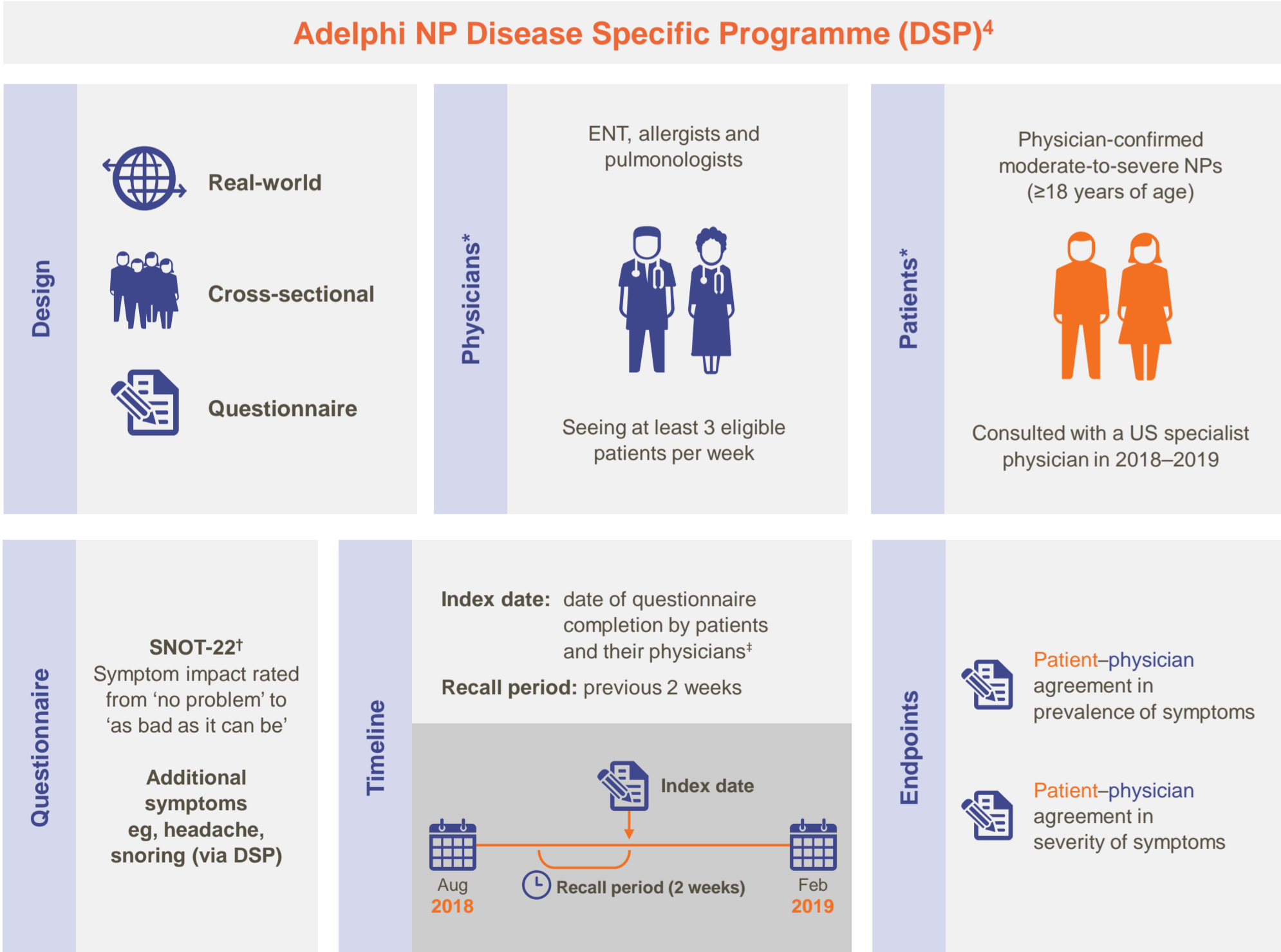
Aims

Nasal polyps (NPs) can have a significant negative impact on health-related quality of life due to symptoms such as nasal blockage, discharge, and a reduced sense of smell and taste.¹⁻³

It is poorly understood to what extent the frequency and severity of symptoms experienced by patients with NPs are recognized by their physician, particularly nonclinical symptoms such as sleep disturbance and emotional distress.

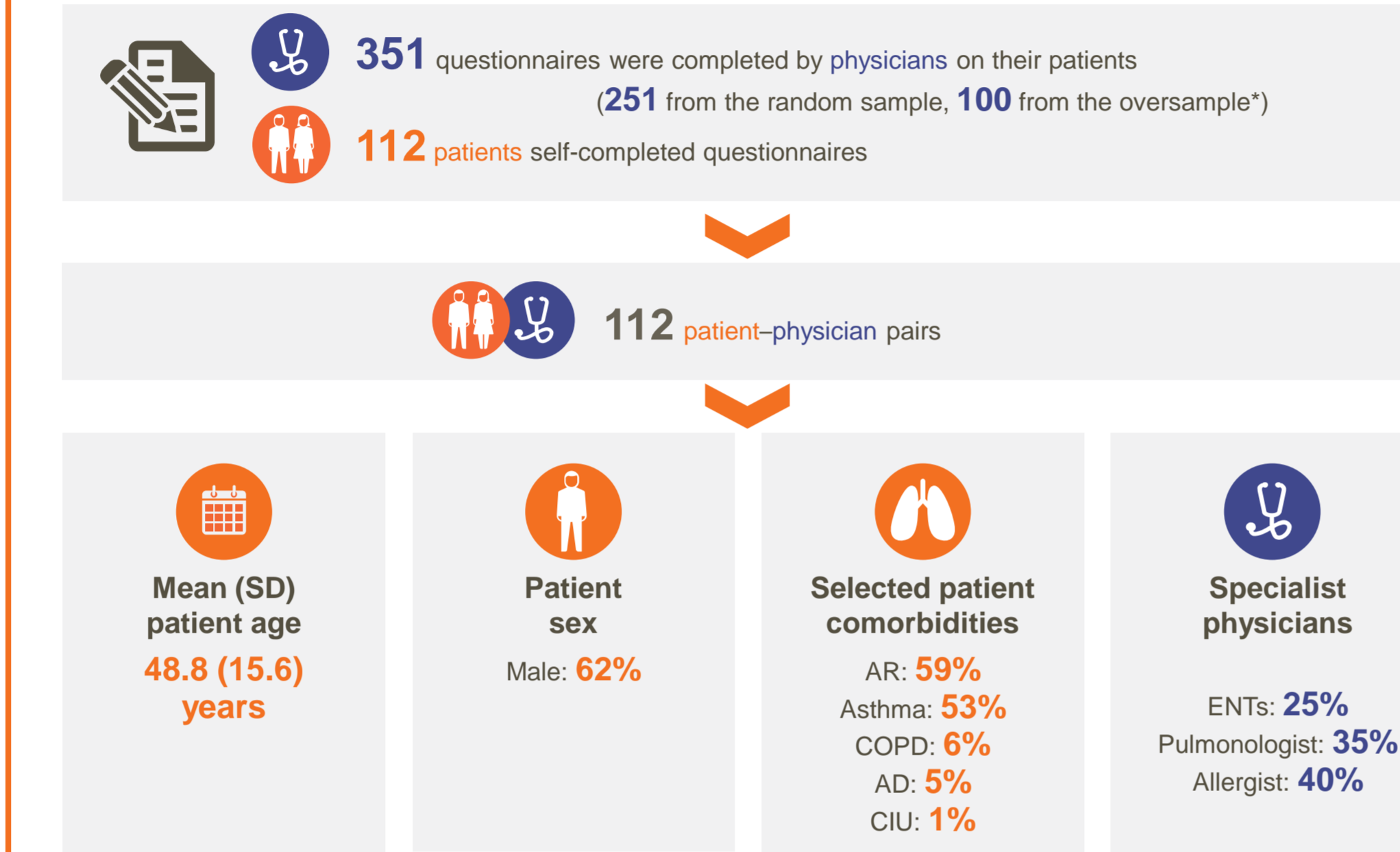
The objective of this study was to investigate the level of agreement between patients and physicians in the frequency and severity of NP symptoms among patients with moderate-to-severe NPs.

Methods



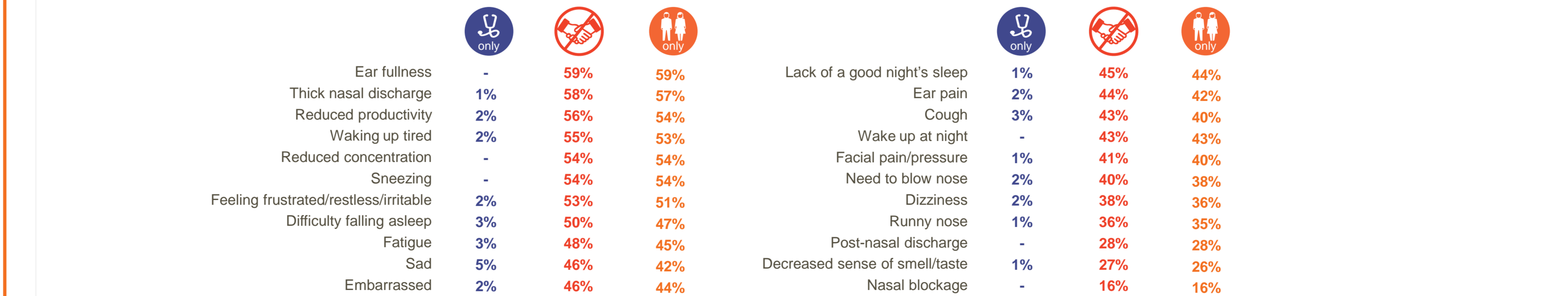
*Physicians were identified by a local fieldwork agency according to specialty, geographic location, whether they were personally responsible for treatment decisions and how many patients they see in a typical week. Up to 7 consecutive presenting patients were identified by each physician according to specific NP related inclusion criteria: [†]All rights reserved. Copyright 2006 by the Washington University in St. Louis, Missouri; [‡]Only matched patient and physician combinations who completed ≥1 question on the SNOT-22 were included. DSP, disease specific programme; ENT, ear, nose and throat; NP, nasal polyps; SNOT-22, Sino-nasal Outcome Test

Results



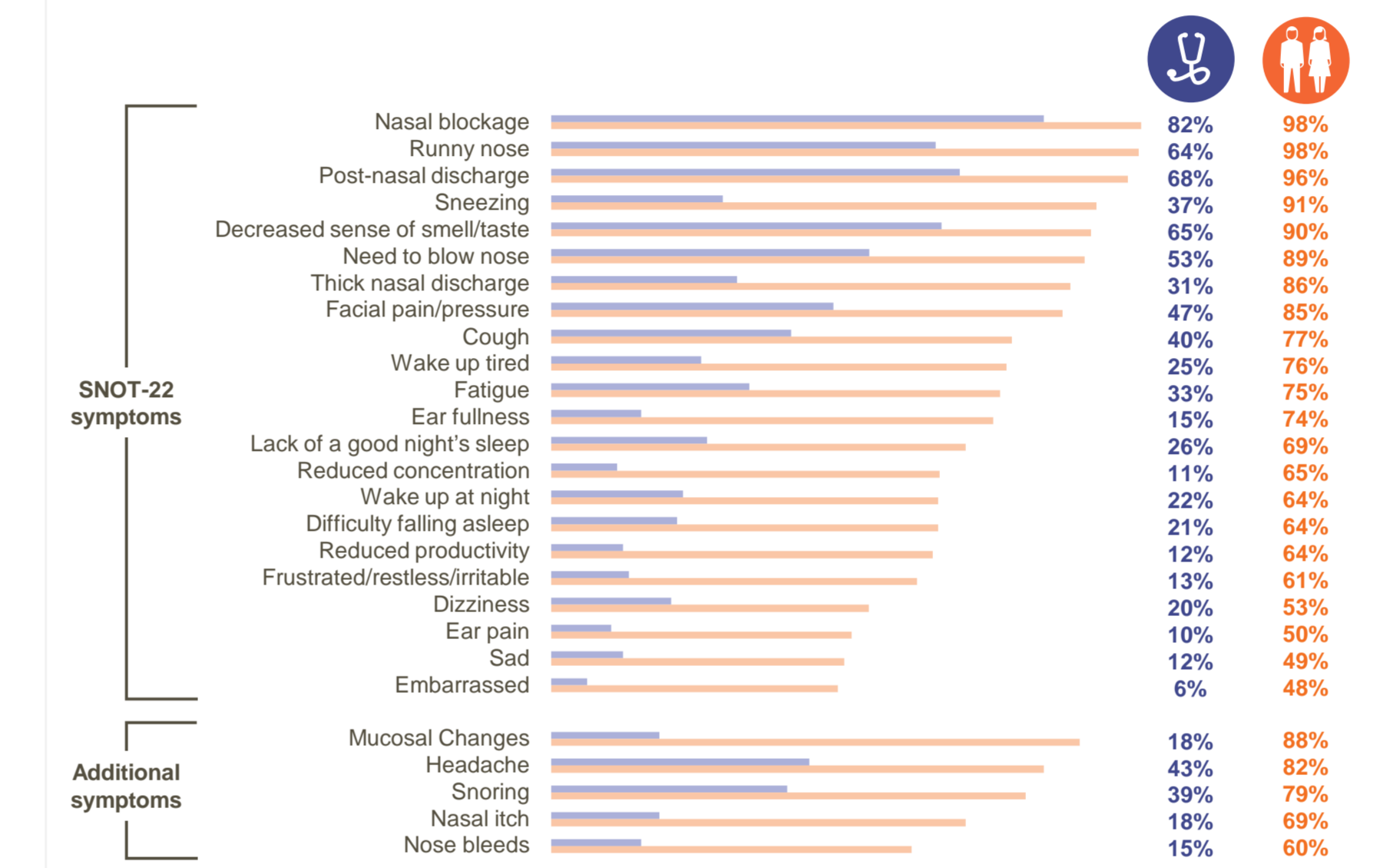
*Patients with a history of ≥1 surgery for NP removal. AD, allergic dermatitis; AR, allergic rhinitis; CIU, Chronic idiopathic urticaria; COPD, chronic obstructive pulmonary disease; SD, standard deviation

The symptoms with the largest disagreement between patient and physician pairs were ear fullness, thick nasal discharge, reduced productivity, waking up tired, reduced concentration, sneezing, and feeling frustrated/restless/irritable (symptoms from the SNOT-22)



Disagreement (denoted by the red symbols) was defined as the patient reporting a symptom not reported by the physician, or vice-versa.

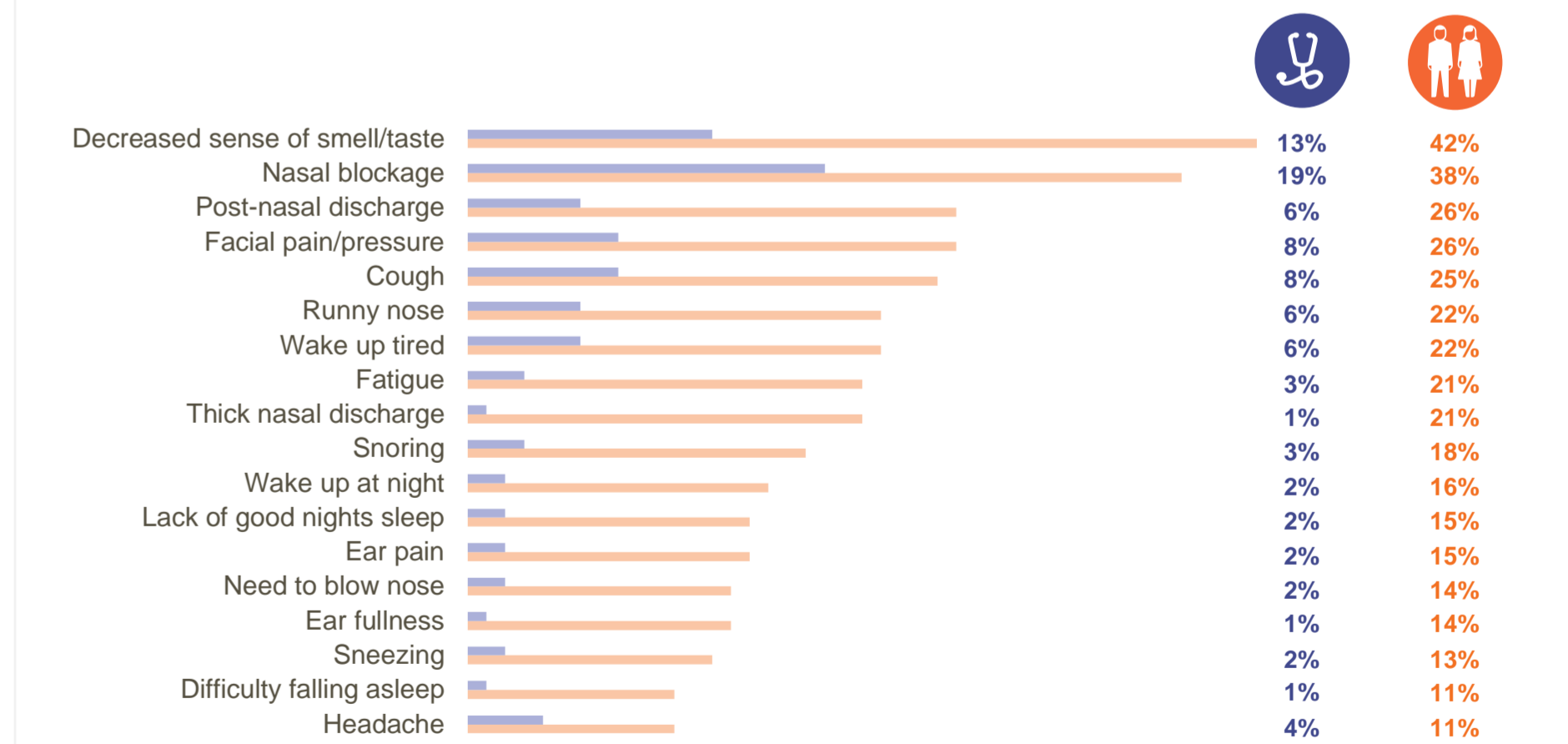
Over 2 weeks, the most common symptoms reported by patients and physicians were nasal blockage, post-nasal discharge, decreased sense of smell/taste, and runny nose



Conclusions

- There was a high level of agreement between patient and physician recognition of the most typical NP symptoms such as nasal blockage and decreased sense of smell and taste; however, the severity of all symptoms were underestimated by physicians.
- Nonclinical symptoms such as reduced concentration, waking up tired, and reduced productivity were some of the symptoms with the highest disagreement between physicians and patients, being commonly reported by patients but not currently considered beyond the main nasal symptoms by physicians.
- These results highlight the hidden symptomatic burden of NPs, which existing therapies may not currently address, in addition to the need for improved patient-physician communication of symptoms.

Over 2 weeks, the most commonly reported symptoms rated as 'severe' or 'as bad as it can be' by both patient and physician were nasal blockage, decreased sense of smell/taste, post-nasal discharge, runny nose, and facial pain/pressure



Only symptoms reported by >10% of patients are shown; all symptoms except snoring and mucosal changes were assessed by SNOT-22.

References

- Kim DH, et al. *Clin Exp Otorhinolaryngol* 2016;9(2):150–6.
- Khan A, et al. *Rhinology* 2019;57(5):343–51.
- Fokkens WJ, et al. *Rhinology* 2012;50(1):1–12.
- Anderson P, et al. *Curr Med Res Opin* 2008;24(11):3063–72.

Disclosures

- This study was funded by GlaxoSmithKline (GSK ID: 208086).
- VSB, ARS, SY, and RC are employees of GSK and own stocks/shares. MSm, MSc, and GM are employees of Adelphi Real World, which received funding from GSK for this study.

- Editorial support (in the form of writing assistance, including development of the initial draft based on author direction, assembling tables and figures, collating authors' comments, grammatical editing, and referencing) was provided by Kerry Knight PhD, at Fishawack Indicia Ltd, UK, and was funded by GSK.

Please find the online version of this poster by scanning the QR code or via http://tago.ca/AAAAL_7

