Patient Journey and Initial Management for Allergic Conjunctivitis

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Disclosures

- **Presenter:** Nandini Venkateswaran is a consultant for Alcon, Allergan, BVI Medical, Corneagen, Dompe, Johnson and Johnson, and Tarsus
- **Co-authors:** Cynthia Matossian and Navin Tekwani were participants in this study. Ella M. Gibson Srilatha Vantipalli and Michael H. Goldstein are employees of Ocular Therapeutix.
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Background

Pathways of Care for Allergic Conjunctivitis Patients Remain Unclear

- Patients often delay medical care by self-treating with therapies most accessible or convenient to them¹
- Patients fail to seek timely care even when therapies are ineffective¹
- Allergic conjunctivitis is prone to misidentification in the primary care setting as it may be managed by general practitioners²

Research Question: What is the patient journey for allergic conjunctivitis?



of AC patients had an appointment with an ophthalmologist as first line of action³

References: 1. Dupuis P, et al. Allergy Asthma Clin Immunol. 2020;16:5. 2. Bielory L, et al. Ann Allergy Asthma Immunol. 2020;124(2):118-134. 3. Palmares J, et al. Eur J Ophthalmol . 2010;20(2):257 264.

Methods: Qualitative Online Survey

Objective: To characterize the patient journey and experience during initial AC management prior to receiving care from an eye care provider (ECPs)



Sample Population

- US-based ophthalmologists or optometrists
- Different practice types (e.g. private, academic)
- Various community settings (urban, suburban, rural)



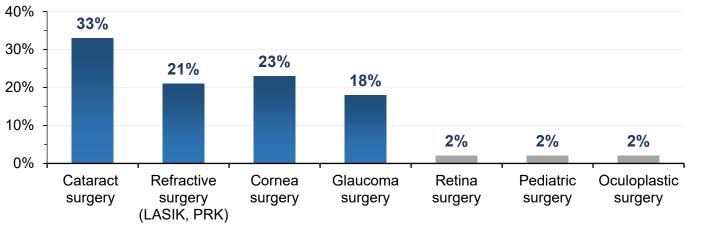
Qualitative Online Survey

- Distributed between August and September 2021
- Questions captured:
 - Characteristics of AC patients
 - Initial management before receiving AC diagnosis
 - Impact on quality of life

Highly experienced ECPs from anterior segment specialties participated in the survey

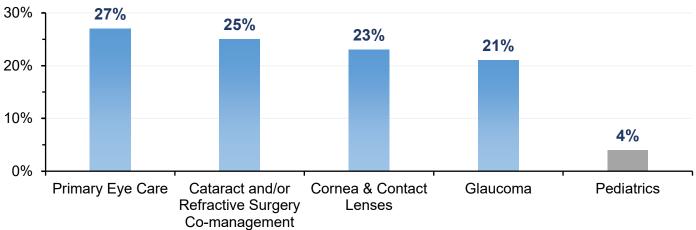
Ophthalmologists N=48	
Age, mean (SD)	50 (12)
Gender, M/F	62% / 36%
Years in Practice , mean (SD)	20 (12)

OPHTHALMOLOGISTS' SPECIALTIES (N=48)

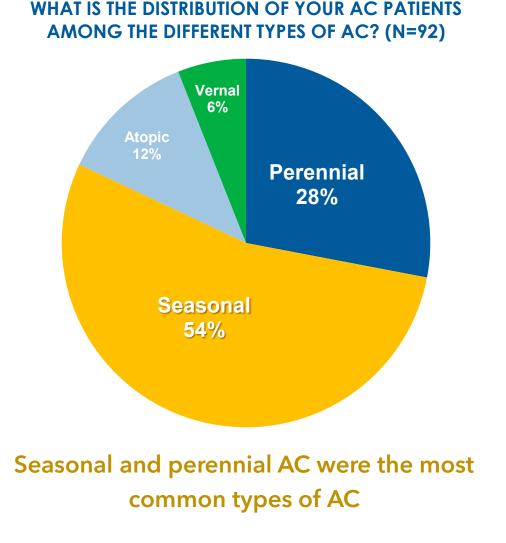


Optometrists N=44		
Age, mean (SD)	48 (8)	
Gender, M/F	60% / 40%	
Years in Practice , mean (SD)	15 (7)	

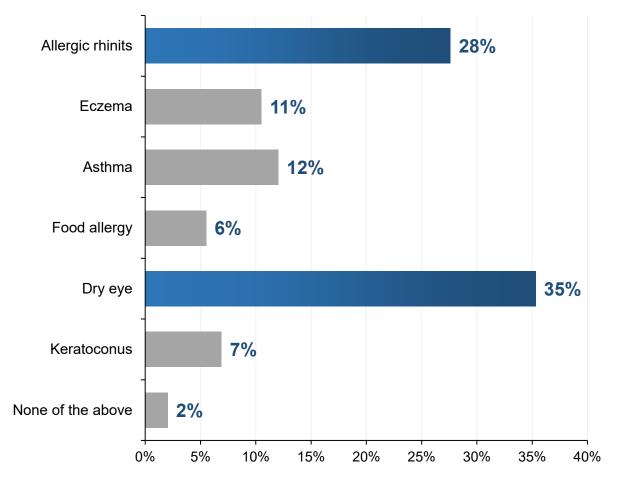
OPTOMETRISTS' SPECIALTIES (N=44)



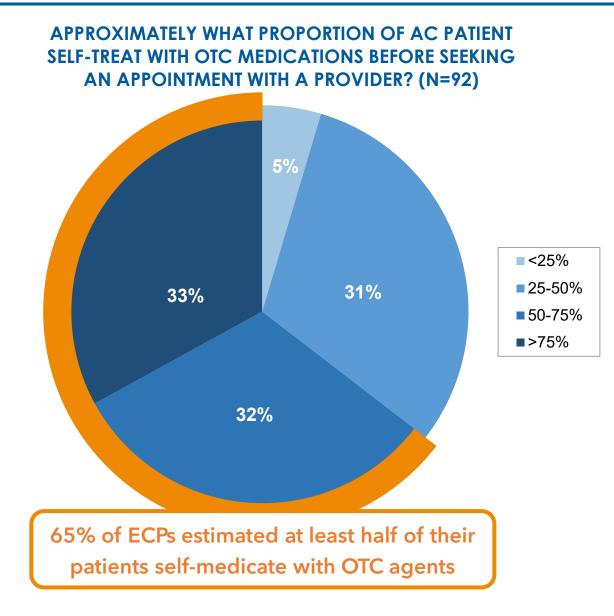
Patients with AC also predominantly suffer from allergic rhinitis and dry eye comorbidities



WHAT PERCENTAGE OF YOUR AC PATIENTS ALSO HAVE THE FOLLOWING COMORBIDITIES? (N=92)

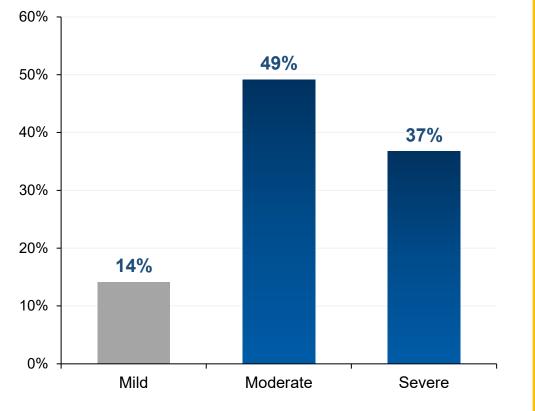


Self-treating symptoms with OTC medications was commonly reported among AC patients

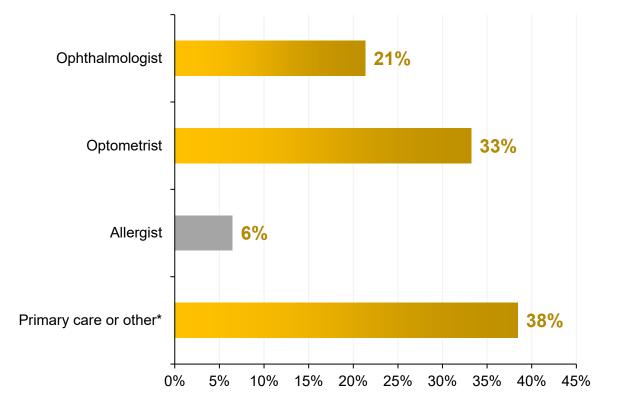


Most patients seek care when they have moderate or severe symptoms and initially with a PCP, optometrist, or ophthalmologist

AT WHAT LEVEL OF SEVERITY DO YOUR AC PATIENTS TYPICALLY SEEK CARE? (N=92)

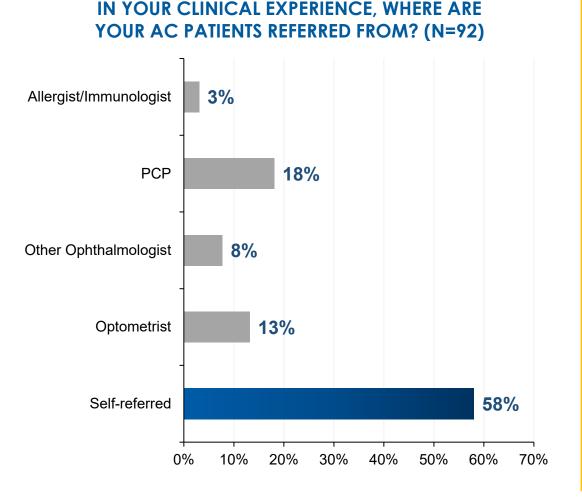


IN YOUR CLINICAL EXPERIENCE, WHERE DO AC PATIENTS INITIALLY SEEK CARE? (N=92)

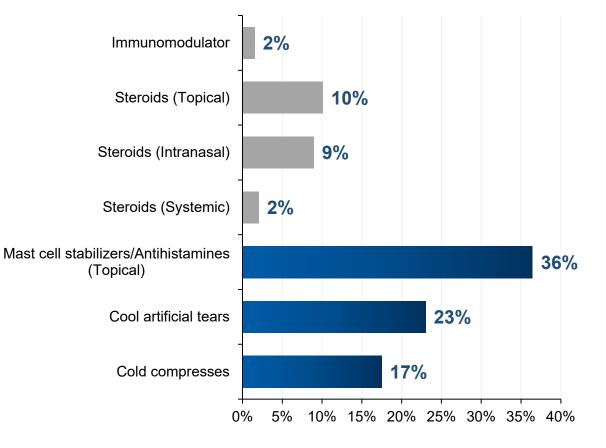


* Other includes pharmacy, pediatric, immunologist, dermatologist or urgent care settings

AC patients are typically self-referred and were most commonly treated with a mast cell stabilizer/antihistamine agent prior to care with an ECP

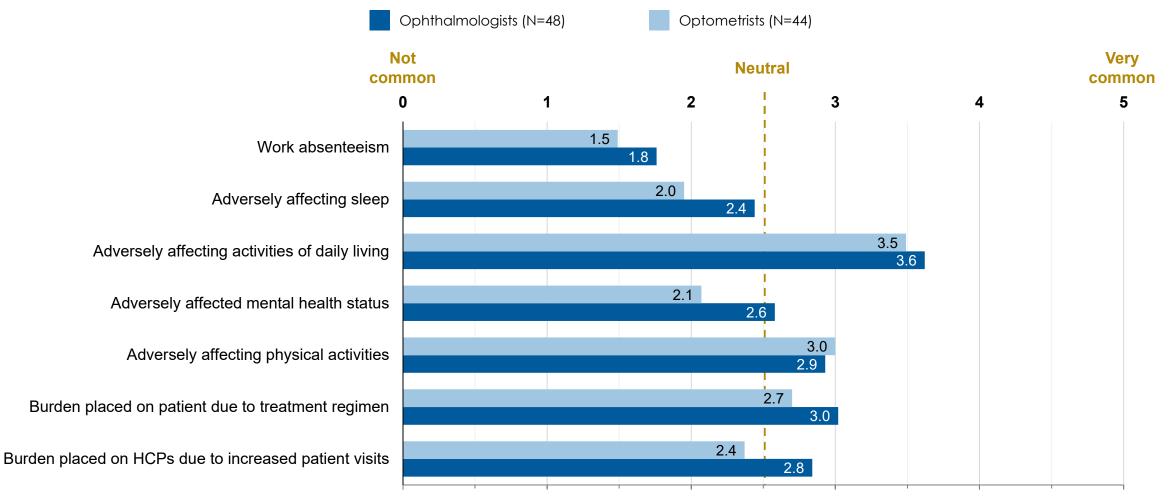


WHAT TREATMENTS HAVE YOUR PATIENTS RECEIVED PRIOR TO CARE WITH AN ECP? (N=92)



Adverse impact on routine daily activities was the most common issue reported in AC

RATE HOW COMMON THESE QUALITY OF LIFE ISSUES/BURDENS ARE REPORTED WITH AC (N=92)



Allergic Conjunctivitis Patient Journey Summary

1. AC Burdens Patients and Negatively Impacts Quality of Life

- Seasonal and perennial AC are most common
- Frequently occurs with dry eye and allergic rhinitis
- Most often adversely impacts routine daily activities

3. Symptoms May Persist Following Treatment

 Patients with moderate or severe symptoms find relief is inadequate

2. Patients Self-Treat with OTC Agents

- Topical mast cell
 stabilizers/antihistamine drugs
- Cool compresses

Artificial Tears

4. Patients Seek Care with a Provider

- Primarily by self-referral
- Most often at PCP, optometrist or ophthalmologist

Mapping AC Patient Journey is an Important Step in Helping Clinicians Improve Care

