

The Real Burden of Cervical Dystonia

Symptom recurrence: an unpleasant roller coaster ride for patients?

What is cervical dystonia?

Cervical dystonia is an often painful condition in which a person's neck muscles contract involuntarily, causing their head to twist or turn to one side. It can also cause a person's head to uncontrollably tilt forward or backward.¹

Cervical dystonia is relatively uncommon, affecting 57 to 280 people per million.²



About the Carenity 2 Survey

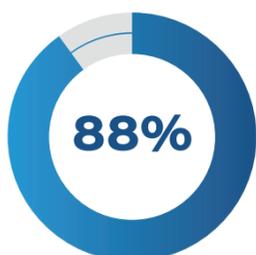
The Carenity 2 survey examined the challenges experienced by 209 patients in the U.S., the U.K., France, Germany, and Italy.

All patients had cervical dystonia and were being treated with Botulinum neurotoxin type A (BoNT-A) injections or had stopped BoNT-A injections within a year prior to the survey.^{3,4}

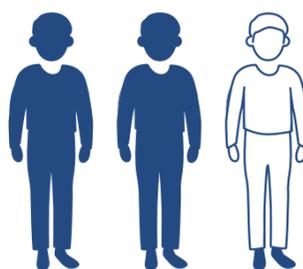


Cervical dystonia: Key takeaways from the survey

The reappearance of symptoms between injections is common among patients, and often occurs within three months^{3,4}

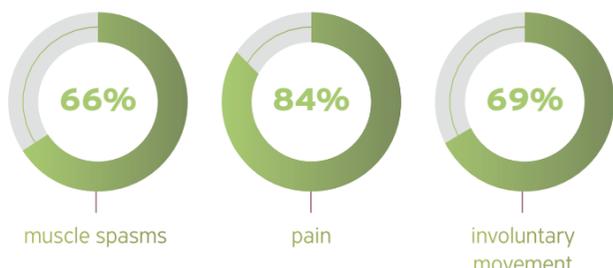


88% report the reappearance of pre-existing symptoms between injections^{3,4}



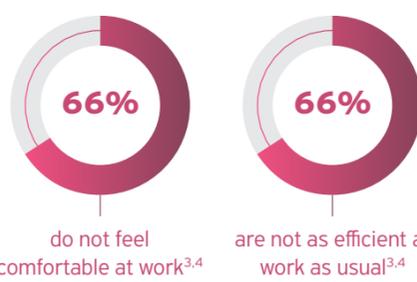
Two in three patients said their symptoms returned earlier than three months after being injected^{3,4}

Most common symptoms re-emerging between injections:^{3,4}



When symptoms reappear, muscle spasms are the first symptoms, followed by pain and involuntary movement.^{3,4}

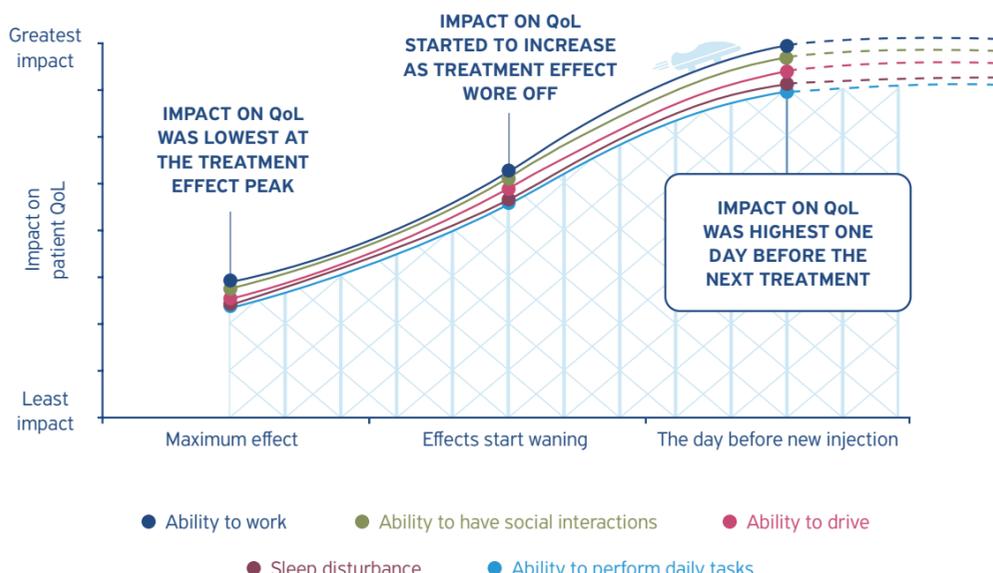
97% of patients currently working and whose symptoms reappear between two sessions of injections are impacted in their professional life. Of these people:



Recurring symptoms of cervical dystonia were found to have a far-reaching impact on quality of life (QoL), including:^{3,4}



Impact on QoL is a roller coaster for patients treated with BoNT-A for cervical dystonia^{3,4}



How can we help patients in the future?

LONGER-LASTING TREATMENT CAN HELP END THE ROLLER COASTER RIDE FOR PATIENTS



71%

of patients expect longer-lasting benefits between treatments^{3,4}

Patients are at the heart of everything we do at Ipsen, guiding our strategy and leading our drive for innovation in patient care. Ipsen is striving to understand disease burden, unmet patient needs, and barriers to treatment.

These insights have the potential to unlock meaningful changes in clinical practice, leaving no patient behind.

References:

1. National Organization for Rare Disorders (NORD). Cervical dystonia. Available at: <https://rarediseases.org/rare-diseases/cervical-dystonia/>. Accessed April 2020.
2. Castella M, et al. Botulinum toxin type A therapy for cervical dystonia. Cochrane Database of Systematic Reviews 2017;12:CD003633.
3. Ferreira J, et al. How do patients with cervical dystonia (cd) experience their botulinum neurotoxin type a (BoNT-A) treatment cycle: results from an international online survey. Abstract presented at the 6th Congress of the European Academy of Neurology, 23-26th May 2020, Vienna, Austria.
4. Comella C, et al. Gaps in the Management of Cervical Dystonia with Botulinum Toxin A: Findings from an Online Patient Survey. Poster presented at the 6th Congress of the European Academy of Neurology, 23-26 May 2020, Vienna, Austria.