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News

New Data Identify Important Factors that May Reduce Hospitalizations among People with Epilepsy in the U.S.

Results of retrospective analysis show use of newer anti-epilepsy drugs, access to specialty care, and deliberate efforts to change medications following epilepsy-related hospital encounters were associated with improved outcomes

The findings, published in *Epilepsy & Behavior*, resulted from a research collaboration between the Epilepsy Foundation and UCB

The Epilepsy Foundation has released state scorecards based on the research findings showing how these factors may influence care at a local level

Atlanta, June 16, 2015 – 9:00 a.m. (EST) – The Epilepsy Foundation and UCB today announced the publication of data demonstrating that use of newer anti-epilepsy drugs (AEDs), access to specialty care, and deliberate efforts to change medications following epilepsy-related hospital encounters were associated with improved treatment outcomes, based on average time between epilepsy-related hospital encounters. The results were published online in *Epilepsy & Behavior*.

“We aspire to make a difference in the epilepsy community by providing valuable data that helps patients partner with their health care providers to make the most informed treatment decisions,” said Patty Fritz, Vice President, Corporate Affairs, UCB. “Our hope is that our findings will improve public understanding of the health policies that could truly have a positive impact on epilepsy patient care and outcomes.”

“We are proud to announce this publication and educate policymakers about epilepsy and seizures,” said Philip Gattone, President & CEO, Epilepsy Foundation. “Our hope is that these scorecards will raise awareness about barriers to epilepsy care at the local level and, over time, build momentum for stronger public health policies that ensure access to quality care for the 1 in 26 Americans living with epilepsy and their families.”

Key findings of the retrospective analysis of U.S. claims data included the following:

- Patients taking at least one older AED (i.e., one introduced in 1993 or earlier) experienced an epilepsy-related hospital encounter, on average, every 684 days (22.8 months). Those taking

at least one newer AED (i.e., one introduced after 1993) were hospitalized every 1,001 days (33.4 months), a relative risk reduction of 31% ($p < 0.01$) between the two groups.¹

- Prescriber modifications to AED therapy after a hospital encounter were associated with fewer subsequent epilepsy-related hospital encounters. The largest benefit occurred in patients switched from an older AED to a newer AED.
- Neurologists, especially those near a National Association of Epilepsy Centers (NAEC) member center, were significantly more likely to prescribe newer AEDs than primary care physicians.¹

Based on results of this analysis, the Epilepsy Foundation released state-by-state scorecards that assess each state's utilization of newer AEDs and the availability of specialty care from a neurologist in comparison to other states. These metrics were determined by such factors as favorability of managed care coverage and proximity of the state's population to a member center of the NAEC. The scorecards identify potential barriers to optimal epilepsy care and opportunities for improvement no matter what grades are received. The scorecards are available on the Epilepsy Foundation's website at www.epilepsy.com/scorecards.

About the Data Analysis

Researchers conducted a retrospective analysis of two insurance claim databases, covering commercial and government insurance plans between November 2009 and September 2011. Claims from Surveillance Data Incorporated (SDI) comprised the primary dataset, and the Truven Health MarketScan[®] Research Database was used for validation. A total of 17,743 patients who were being actively treated for epilepsy, identified by treatment with an AED and epilepsy diagnosis coding, were included in the analysis dataset. This study was funded by UCB.

About Epilepsy^{2,3}

Epilepsy is a chronic neurological disorder affecting approximately 65 million people worldwide and more than 2.8 million people in the U.S. It is the fourth most common neurological disorder in the U.S. Anyone can develop epilepsy; it occurs across all ages, races and genders and is defined as two or more unprovoked seizures that occur at least 24 hours apart.

About UCB's Research Collaborations in Epilepsy

UCB is a global biopharmaceutical company with a focus on epilepsy treatment and research. UCB has a rich heritage in epilepsy with more than 20 years of experience in the research and development of anti-epilepsy drugs. As a company with a long-term commitment to epilepsy research, we partner and create super-networks with leading researchers and institutions to use cutting-edge scientific research and technology to deliver unique patient solutions. At UCB, we are inspired by patients and driven by science in our commitment to support people living with epilepsy.

About the Epilepsy Foundation

The Epilepsy Foundation, a national non-profit with 48 affiliated organizations throughout the United States, has led the fight against seizures since 1968. The Foundation is an unwavering ally for individuals and families impacted by epilepsy and seizures. The mission of the Epilepsy Foundation is to stop seizures and sudden unexpected death in epilepsy (SUDEP), find a cure and overcome the

challenges created by epilepsy through efforts including education, advocacy and research to accelerate ideas into therapies. The Foundation works to ensure that people with seizures have the opportunity to live their lives to their fullest potential. For additional information, please visit www.epilepsy.com.

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2. IOM (Institute of Medicine). 2012. *Epilepsy across the spectrum: Promoting health and understanding*. Washington, DC: The National Academies Press.
3. Centers for Disease Control and Prevention. *Epilepsy Fast Facts*. Accessed March 25, 2015 at <http://www.cdc.gov/epilepsy/basics/fast-facts.htm>

About UCB

UCB, Brussels, Belgium (www.ucb.com) is a global biopharmaceutical company focused on the discovery and development of innovative medicines and solutions to transform the lives of people living with severe diseases of the immune system or of the central nervous system. With more than 8500 people in approximately 40 countries, the company generated revenue of € 3.4 billion in 2013. UCB is listed on Euronext Brussels (symbol: UCB). Follow us on Twitter: @UCB_news

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This press release contains forward-looking statements based on current plans, estimates and beliefs of management. All statements, other than statements of historical fact, are statements that could be deemed forward-looking statements, including estimates of revenues, operating margins, capital expenditures, cash, other financial information, expected legal, political, regulatory or clinical results and other such estimates and results. By their nature, such forward-looking statements are not guarantees of future performance and are subject to risks, uncertainties and assumptions which could cause actual results to differ materially from those that may be implied by such forward-looking statements contained in this press release. Important factors that could result in such differences include: changes in general economic, business and competitive conditions, the inability to obtain necessary regulatory approvals or to obtain them on acceptable terms, costs associated with research and development, changes in the prospects for products in the pipeline or under development by UCB, effects of future judicial decisions or governmental investigations, product liability claims, challenges to patent protection for products or product candidates, changes in laws or regulations, exchange rate fluctuations, changes or uncertainties in tax laws or the administration of such laws and hiring and retention of its employees. UCB is providing this information as of the date of this press release and expressly disclaims any duty to update any information contained in this press release, either to confirm the actual results or to report a change in its expectations.

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Moreover, sales may be impacted by international and domestic trends toward managed care and health care cost containment and the reimbursement policies imposed by third-party payers as well as legislation affecting biopharmaceutical pricing and reimbursement.