## **HOW OFTEN SHOULD I GET MY TOXIN INJECTIONS?**

John A. Burns, MD, FACS

The title of this article asks a question and the answer, as it so often is, "It depends". In fact, it depends on a larger number of factors, including:

- The severity of your spasms
- Your insurance company
- The duration the Botulinum Toxin (BoNT) is effective in you
- The pharmaceutical company's product (drug) insert
- The frequency of the spasms
- Medicare Policy
- Your doctor's philosophy and availability

You as a patient know that you would like to be reinjected on a schedule that controls your spasms and allows you to carry on a normal work/social schedule. Recently a study was undertaken to better understand benign essential blepharospasm patients' response to BoNT. It may cause physicians to modify their reinjection recommendations. Product labeling provided by drug companies presently recommends retreatment at 12 week intervals. Many insurance companies restrict reinjection to this period of time.

The study was done by 6 physicians, including this author, at 6 separate institutions and included 114 patients. Each had spasms for a minimum of 12 months and the median was 10 years. These patients had experienced the nuances of BEB. Each participated in a 30 minute structured interview. They described their experience with BoNT via specific questions. Their patient records were also reviewed to obtain other pertinent information. The demographics of the 114 patients were the same as other studies have reported; 70% females and mean age 66.

The purpose of the study was to better understand the BEB patients' experience and response to BoNT. They reported the mean frequency of injections was 12.5 weeks and 91% reported that the reason for this interval was; to maintain efficacy/effectiveness (60%), their doctors standard procedure (20%), or their insurance companies approval guidelines (17%). IN OTHER WORDS, 91% WEREN'T NECESSARILY TREATED WHEN THEY FELT THEY NEED THEIR SPASMS BROUGHT UNDER CONTROL.

There were patients in the study who used each of the Botulinum A Toxins available in the United States, incobotulinumtoxinA (Xeomin®, Merz), onabotulinumtoxinA (BOTOX®, Allergan) and abobotulinaumA (Dysport®, Ipsen). 93% of the study patients reported they feel the effects of the BoNT within 7 days. 90% noted the maximum effect was during the first 4 weeks after injection. 67% observed considerable decline in the control of their blepharospasms between 8 and 12 weeks after injections. The 114 patients were asked to rate their satisfaction with their spasm control on a 1 to 10 scale with 10 being complete satisfaction and 1 completely unsatisfactory. They were asked to make this observation at two specific times in their treatment cycle. The first was when they were experiencing maximum control and again just before their repeat injections. At maximum effect they reported a mean satisfaction of 8.8 (8.8 on the 10 point scale). Just prior to retreatment the median satisfaction dropped to 6.2 and at least one patient rating was 3.3. Probably the most telling question asked was what frequency would you like your injections. 52% felt they need their injections before 12 weeks. It was found that 25% of patients would prefer to go longer than the standard 12 weeks. These two treatment pattern preferences confirm the observation of many physicians that the patient response is quite variable and the treatment plan must be individualized to provide maximum control and satisfaction of each person with BEB.

So the answer to the question in the title is at whatever interval provides you the relief necessary to carry on the requirements of daily living. That interval should be reasonable and physicians who use a patient flexible schedule have very rarely observed an individual needing injection more frequently than 8 weeks. Of the study patients only 12% thought they would benefit by having injections more frequently than every 8 weeks and that is only their speculation.

If a significant number of patients would benefit from injections between 8 and 12 weeks and many insurance companies only approve treatment at 12 weeks or the doctor only schedules patients at 12 week intervals is there a solution? The answer is yes. If your doctor appeals your 12 week authorization with written documentation that you would benefit from more frequent treatment it is almost always approved by your insurance company. If your doctor's standard policy is to treat all patients at 12 weeks it's time for a heart to heart talk that you are incapacitated before then (can't drive, read or function at work) and must be treated sooner.