

The 5-Domain Niemann-Pick Disease Type C Clinical Severity Scale (NPCCSS)

### The Niemann-Pick Disease Type C Clinical Severity Scale (NPCCSS)





NPC is a progressive disease and the

# NPCCSS IS AN NPC-SPECIFIC, CLINICIAN-REPORTED TOOL

to characterize and quantify disease progression<sup>1</sup>

The original NPCCSS has

17DOMAINS: 9 MAJOR and 8 MINOR

Click here for the 17 DOMAINS



A shorter form of the NPCCSS containing the most clinically relevant domains would allow clinicians to

### FOCUS ON THE CORE SYMPTOMS

of the disease<sup>2</sup>

An abbreviated

# **5-DOMAIN NPCCSS**

has been created to focus on domains identified by patients, caregivers, and NPC experts as the most clinically relevant when assessing disease progression<sup>2-4</sup>

Click here for the abbreviated 5 DOMAINS





## The 5-Domain Niemann-Pick Disease Type C Clinical Severity Scale (NPCCSS)



### Validating the 5-domain NPCCSS

The **5-domain NPCCSS** has demonstrated:



High correlation with the 17-domain NPCCSS (excluding the hearing domains)<sup>4,5</sup>





Strong intra-rater and inter-rater reliability<sup>2</sup>

Click here for more information



R2=0.1060

P = 0.0411

Disease severity (5-domain NPCCSS score)

- In clinical practice, cholestane-triol is frequently used as a biomarker to support diagnosis, as the levels correlate with NPC disease severity and age of disease onset<sup>6,7</sup>
- In the NPC-001 study, cholestanetriol levels significantly correlated at the population level (Spearman's correlation coefficient=0.265, P=0.0411), with disease severity as measured by the 5-domain NPCCSS<sup>2</sup>
- A Delphi study of 19 international NPC experts evaluated the utility of 6 clinical severity scales\*8

Serum cholestane-triol (ng/mL)

- There was consensus agreement (≥70%) that the 5-domain NPCCSS should be used for the evaluation of disease in clinical practice
- The 5 domains within this scale are the 5 most clinically relevant domains to measure









# The 5-Domain Niemann-Pick Disease Type C Clinical Severity Scale (NPCCSS)



### Using the 5-domain NPCCSS



#### **DOMAINS**

• The 5 domains evaluate ambulation, fine motor skills, swallow, cognition, and speech<sup>5</sup>



#### **SCORING**

- Each domain is rated on a scale of 0-5 based on clinical assessments, observations, and interviews with patients/caregivers<sup>1,5</sup>
- The clinician assigns a score for each domain based on his or her assessment of that particular symptom<sup>5</sup>



#### TOTAL SCORE

- The patient will have a score from 0-25, with a higher score indicating more severe clinical impairment<sup>5</sup>
- The total score is a composite of the 5 domains that reflects the full impact of NPC on patients' functioning. No single domain can be viewed as the most clinically relevant<sup>2,5</sup>

#### CONSIDERATIONS

- NPC is a heterogeneous, progressive disease and patients may have wide variability between the scoring of the different domains<sup>1,2</sup>
- The progressive nature of NPC is highly variable. For example, a patient may be stable over a period of time and then they may progress quickly in certain domains<sup>1,4</sup>
- Additional care should be given to assessing patients aged 2-4 years due to the potential for interference of normal child development with the interpretation of the domain scores<sup>5</sup>









### Interpreting the 5-domain NPCCSS<sup>5</sup>

- NPC is a progressive disease and patients and caregivers view any change in any domain as clinically meaningful and a signal that the disease is progressing and worsening<sup>5</sup>
- Most NPC experts view a 1-category change as clinically meaningful, corresponding to a 1- or 2-point change within the total score<sup>5</sup>

Domain		Score								
Domain	0	1	2	3	4	5				
Ambulation	Normal	Clumsy	Ataxic unassisted gait or not walking by 18 months		Assisted ambulation or not walking by 24 months	Wheelchair dependent				
Fine motor skills	Normal	Slight dysmetria/ dystonia (independent manipulation)	Mild dysmetria/dystonia (requires little to no assistance; able to feed self without difficulty)		Moderate dysmetria/dystonia (limited fine motor skills; difficulty feeding self)	Severe dysmetria/dystonia (gross motor limitation; requires assistance for self-care activities)				
Swallow	Normal, no dysphagia	Cough while eating  •Intermittent dysphagia*  +1=with liquids  +1=with solids			Nasogastric tube or gastric tube for supplemental feeding	Nasogastric tube or gastric tube feeding only				
		•Dysphagia* +2=with liquids +2=with solids								
Cognition	Normal	Mild learning delay; grade appropriate for age		Moderate learning delay; individualized curriculum or modified work setting	Severe delay/plateau; no longer in school or no longer able to work; some loss of cognitive function	Minimal cognitive function				
Speech	Normal	Mild dysarthria (easily understood)	Severe dysarthria (difficult to understand)	Nonverbal/functional communication skills for needs		Minimal communication				

Click on any domain to expand









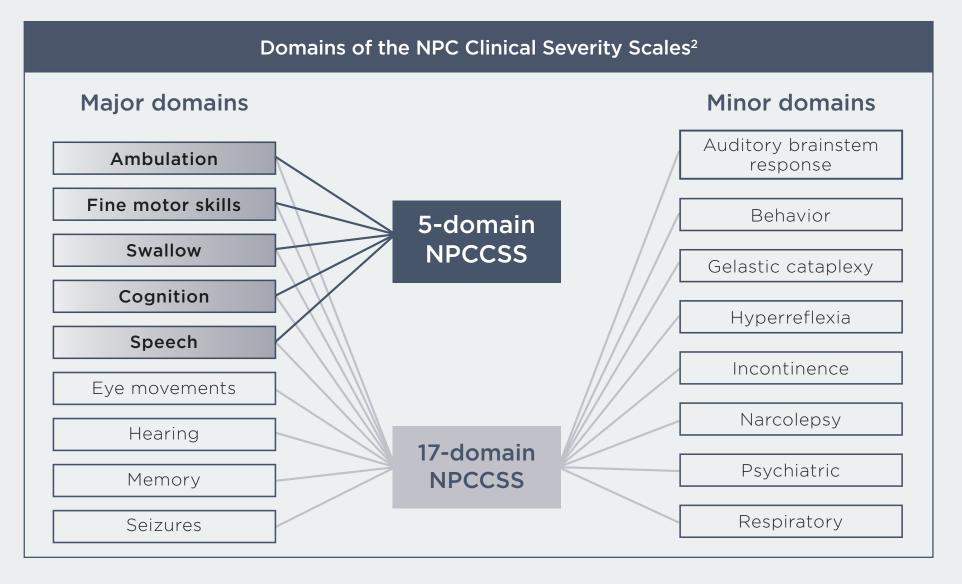
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9 MAJOR DOMAINS¹					
Ambulation	Cognition	Hearing			
Fine motor skills	Speech	Memory			
Swallow	Eye movements	Seizures			

8 MINOR DOMAINS <sup>1</sup>						
Auditory brainstem response	Behavior		Gelastic cataplexy			
Hyperreflexia	Incontinence		Narcolepsy			
Psychiatric			Respiratory			

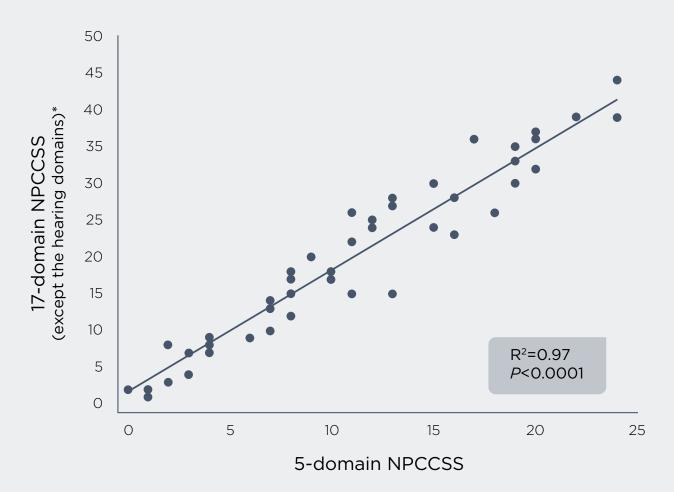




NPC, Niemann-Pick disease type C; NPCCSS, NPC Clinical Severity Scale.



# 5-Domain NPCCSS Score vs 17-Domain NPCCSS Score (Except the Hearing Domains)\* at Baseline of the NPC-002 Study<sup>5</sup>



\*The excluded domains are the major domain of hearing and the minor domain of auditory brainstem response.<sup>2,5</sup>

High correlation between the 5- and 17-domain NPCCSS (except the hearing domains)\*5

• Spearman's correlation=0.97

NPC, Niemann-Pick disease type C; NPCCSS, NPC Clinical Severity Scale.



Reliability of the 5-Domain NPCCSS <sup>2</sup>					
Domain	Kappa Coefficient of Concordance				
	Initial rating	Repeat rating			
Ambulation	0.785	0.681			
Cognition	0.917	0.883			
Fine motor skills	0.763	0.723			
Speech	0.954	0.949			
Swallow	0.813	0.858			

- The 5-domain NPCCSS showed high ICC agreement in inter- and intra-rater reliability (ICC=0.995 and ICC=0.937, respectively)<sup>2</sup>
- This reliability study supports use of the 5-domain NPCCSS as an abbreviated alternative to the 17-domain NPCCSS on the most relevant domains of NPC<sup>2</sup>

ICC, intraclass correlation coefficient; NPC, Niemann-Pick disease type C; NPCCSS, NPC Clinical Severity Scale.

### The 5-Domain NPCCSS: Ambulation<sup>5</sup>



Domain		Score				
	0	1	2	3	4	5
Ambulation	Normal	Clumsy	Ataxic unassisted gait or not walking by 18 months		Assisted ambulation or not walking by 24 months	Wheelchair dependent

Return to the full table

- Ambulation is rated on a scale of 0 to 5, from normal to wheelchair bound<sup>5</sup>
- The domain of **ambulation** is frequently chosen as the most important domain by NPC patients and caregivers<sup>9</sup>
- **Ambulation** is identified as a key domain due to the importance to patients of being able to move independently or not relying on someone to be mobile, and concerns about risks of falling or the greater health impacts associated with losing the ability to walk<sup>9</sup>

### The 5-Domain NPCCSS: Fine Motor Skills<sup>5</sup>



Domain		Score					
	0	1	2	3	4	5	
Fine motor skills	Normal	Slight dysmetria/ dystonia (independent	Mild dysmetria/ dystonia (requires little to no assistance;		dystonia (limited	Severe dysmetria/ dystonia (gross motor limitation;	
		manipulation)	able to feed self without difficulty)			requires assistance for self-care	
						activities)	

Return to the full table

- Fine motor skills are rated on a scale of 0 to 5, from normal to severe dysmetria/dystonia<sup>5</sup>
- Fine motor skills is identified as a key domain due to the impact of hand tremors or difficulty coordinating hands has on patients' everyday activities, like eating, writing, and caring for themselves<sup>9</sup>





### The 5-Domain NPCCSS: Swallow<sup>5</sup>



Domain	Score					
	0	1	2	3	4	5
Swallow	Normal, no dysphagia	<ul> <li>Cough while eating</li> <li>Intermittent dysphagia <ul> <li>+1=with liquids</li> <li>+1=with solids</li> </ul> </li> <li>Dysphagia <ul> <li>+2=with liquids</li> <li>+2=with solids</li> </ul> </li> </ul>			Nasogastric tube or gastric tube for supplemental feeding	Nasogastric tube or gastric tube feeding only

- Return to the full table
- Swallow is rated on a scale of 0 to 5, from normal to requiring a nasogastric tube or relying on gastric tube feeding only<sup>5</sup>
- Swallow is identified as a key domain due to the possible risks of choking, aspiration, pneumonia, and even death<sup>9</sup>
- Under the **swallow** category, the "cough while eating" score of 1 has additive symptoms. Intermittent dysphagia or dysphagia with liquids or with solids is additive<sup>5</sup>
  - -For example, for intermittent dysphagia with solids and dysphagia with liquids, a score of 4 applies (1+1+2)

# The 5-Domain NPCCSS: Cognition<sup>5</sup>



Domain	Score					
	0	1	2	3	4	5
Cognition	Normal	Mild learning delay; grade appropriate for age		delay; individualized curriculum or	Severe delay/ plateau; no longer in school or no longer able to work; some loss of cognitive function	Minimal cognitive function

Return to the full table

- Cognition is rated on a scale of O to 5, from normal to minimal cognitive function<sup>5</sup>
- Cognition is identified as a key domain due to the impact on patients' education or work9

# The 5-Domain NPCCSS: Speech<sup>5</sup>



Domain		Score				
	0	1	2	3	4	5
Speech	Normal	Mild dysarthria (easily understood)	Severe dysarthria (difficult to understand)	Nonverbal/ functional communication skills for needs		Minimal communication

Return to the full table

- Speech is rated on a scale of O to 5, from normal to minimal communication<sup>5</sup>
- **Speech** is identified as a key domain due to the importance communication has in everyday life, especially in expressing patients' needs or wants<sup>9</sup>

# Sample Clinician Scoring Sheet for 5-Domain NPCCSS<sup>5</sup>



#### 5-domain NPCCSS (Clinician Reported)

Date completed: \_\_\_\_\_ Patient ID: \_\_\_\_\_

Please refer to the 5-domain NPCCSS Scoring Guidelines on how to score.

Indicate the correct score (circle the appropriate number).

Ambulation	Score
Normal	0
Clumsy	1
Ataxic unassisted gait or not walking by 18 months	2
Assisted ambulation or not walking by 24 months	4
Wheelchair dependent	5
Fine Motor Skills	Score
Normal	0
Slight dysmetria/dystonia (independent manipulation)	1
Mild dysmetria/dystonia (requires little to no assistance; able to feed self without difficulty)	2
Moderate dysmetria/dystonia (limited fine motor skills; difficulty feeding self)	4
Severe dysmetria/dystonia (gross motor limitation; requires assistance for self-care activities)	5

Swallow	Score
Normal, no dysphagia	0
Cough while eating Intermittent dysphagia* with liquids +1 with solids +1  Dysphagia* with liquids +2 with solids +2 *To be added to "cough while eating" score of 1.	1
Nasogastric tube or gastric tube for supplemental feeding	4
Nasogastric tube or gastric tube feeding only	5
Cognition	Score
Normal	0
Mild learning delay; grade appropriate for age	1
Moderate learning delay; individualized curriculum or modified work setting	3
Severe delay/plateau; no longer in school or no longer able to work; some loss of cognitive function	4
Minimal cognitive function	5

Speech	Score
Normal	0
Mild dysarthria (easily understood)	1
Severe dysarthria (difficult to understand)	2
Nonverbal/functional communication skills for needs	3
Minimal communication	5

Completed by:

Signature: