

DIMETHYL FUMARATE SAFETY IN THE TREATMENT OF RELAPSING-REMITTING MULTIPLE SCLEROSIS

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BACKGROUND AND IMPORTANCE

Dimethyl fumarate (DMF) is a drug with anti-inflammatory and immunomodulatory properties used as a first-line treatment for Relapsing-Remitting Multiple Sclerosis (RRMS). Due to its poor tolerability and high number of adverse reactions (ARs), it is important to monitor it more closely, especially in the first months of treatment.

AIM AND OBJECTIVES

To analyze the safety of DMF in the treatment of RRMS.

MATERIALS AND METHODS

Retrospective observational study of patients with RRMS starting DMF between 2022 and 2023. All included patients had to have a treatment time of greater than or equal to 6 months.

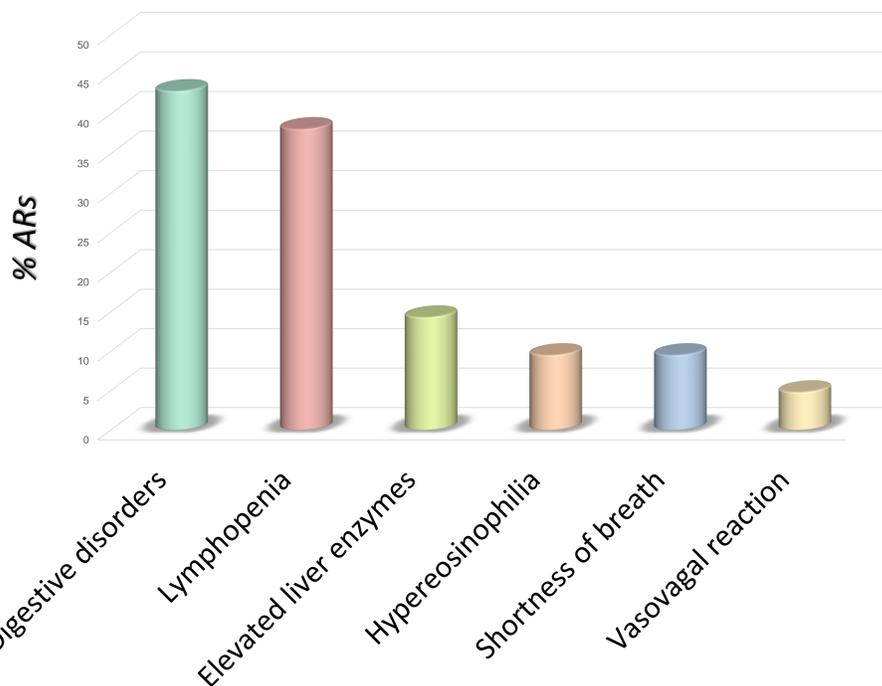
VARIABLES

- Demographic data (gender and age)
- Previous treatments
- Treatment duration
- Treatment interruptions due to the presence of ARs
- The causative ARs.

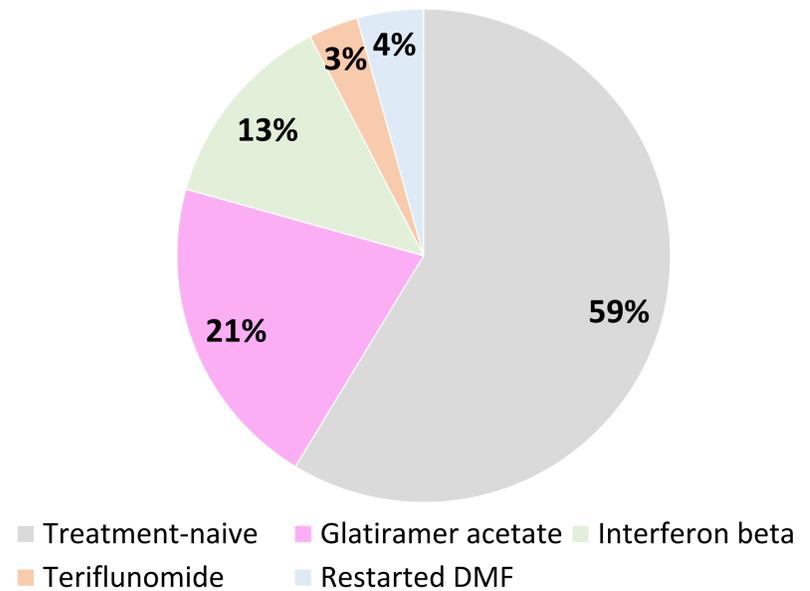
RESULTS

92 patients
77,2% women
Mean age: 41 years (17-66)

% ARs SOBRE EL TOTAL DE POBLACIÓN



PREVIOUS TREATMENT



Discontinued treatment:
- **22,8%** at 6 months due to ARs.
Mean treatment: **5,1 months.**

- 6 patients in the first days after starting
- 3 patients at one and a half month
- 10 patients at 3 months
- 4 patients at 6 months

Previous treatments:

47,8 % of patients
- 1 patient previous teriflunomida, who was discontinued DMF at the beginning for persistence lymphopenia.

CONCLUSIONS AND RELEVANCE

ARs related to DMF are a significant cause of treatment interruption in the early months, mainly due to digestive disorders and lymphopenia. As is common in clinical practice, initial monitoring of patients after starting treatment is necessary for early detection of ARs and should be a priority for patients who have been previously treated, which could be considered a risk factor for the development of ARs.

