



# DURATION OF NATALIZUMAB MAINTENANCE IN PATIENTS WITH MULTIPLE SCLEROSIS

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## PURPOSE

To evaluate **Natalizumab's maintenance** in our center and the **motives of suspension**.

## MATERIAL AND METHODS

Retrospective observational study of the **relapsing-remitting multiple sclerosis (RRMS) patients** in treatment with **Natalizumab** in the last five years in our Hospital. Collected data were: age, gender, diagnosis, previous treatments, Expanded Disability Scale (EDSS), length of treatment, Ac JCV, adverse reactions, reasons for beginning and suspend treatment.

## RESULTS

\* We analyzed **36 patients: 22 women and 14 men aged from 30 to 55 years.**

\* 12 (33,3% ) patients had two previous medication or more, 20 (55,5%) had one previous medication and 4 (11,1%) had no previous medication.

\* The **reasons to start natalizumab** therapy were **treatment failure** in 27 patients (75%), **aggressive disease** start in 4 patients (11,1%) and **other reasons** in 5 patients (13,8%).

\*The mean (SD) **EDSS** score was **2,9 (2,04).**

\***20 patients (55,5%)** were **seropositive to JVC** (index value ranged from 0.02 to 3.7), within which **3 suffered positive seroconversion.**

Interferon beta	16Patients (44,4%)
Glatiramero	14patients (38,8%)
Teriflunomida	1patient (2,7%)
Fingolimod	1patient (2,7%)

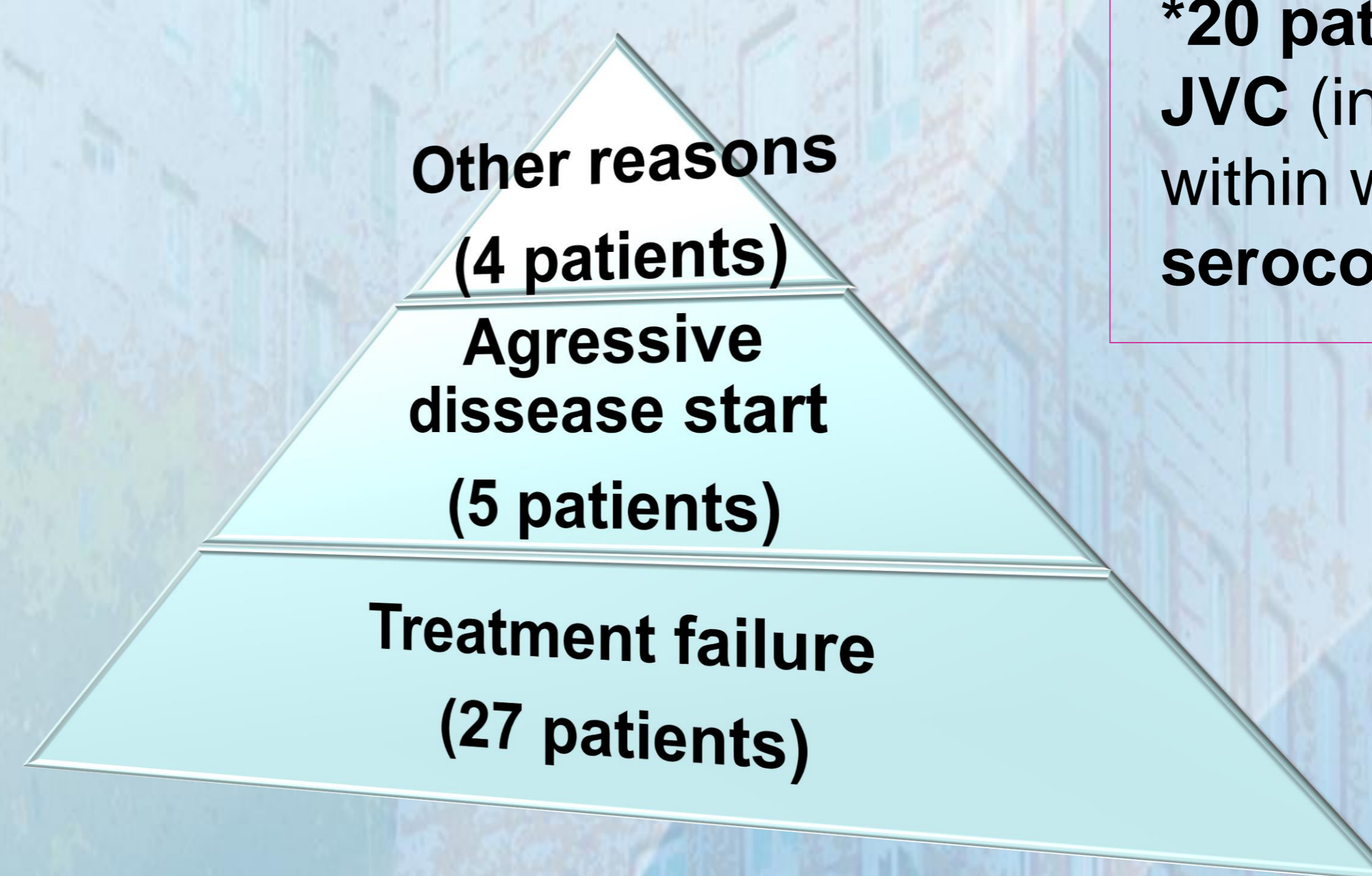


Table 1. Previous treatment received by patients.

Figure 1. Reasons to start natalizumab.

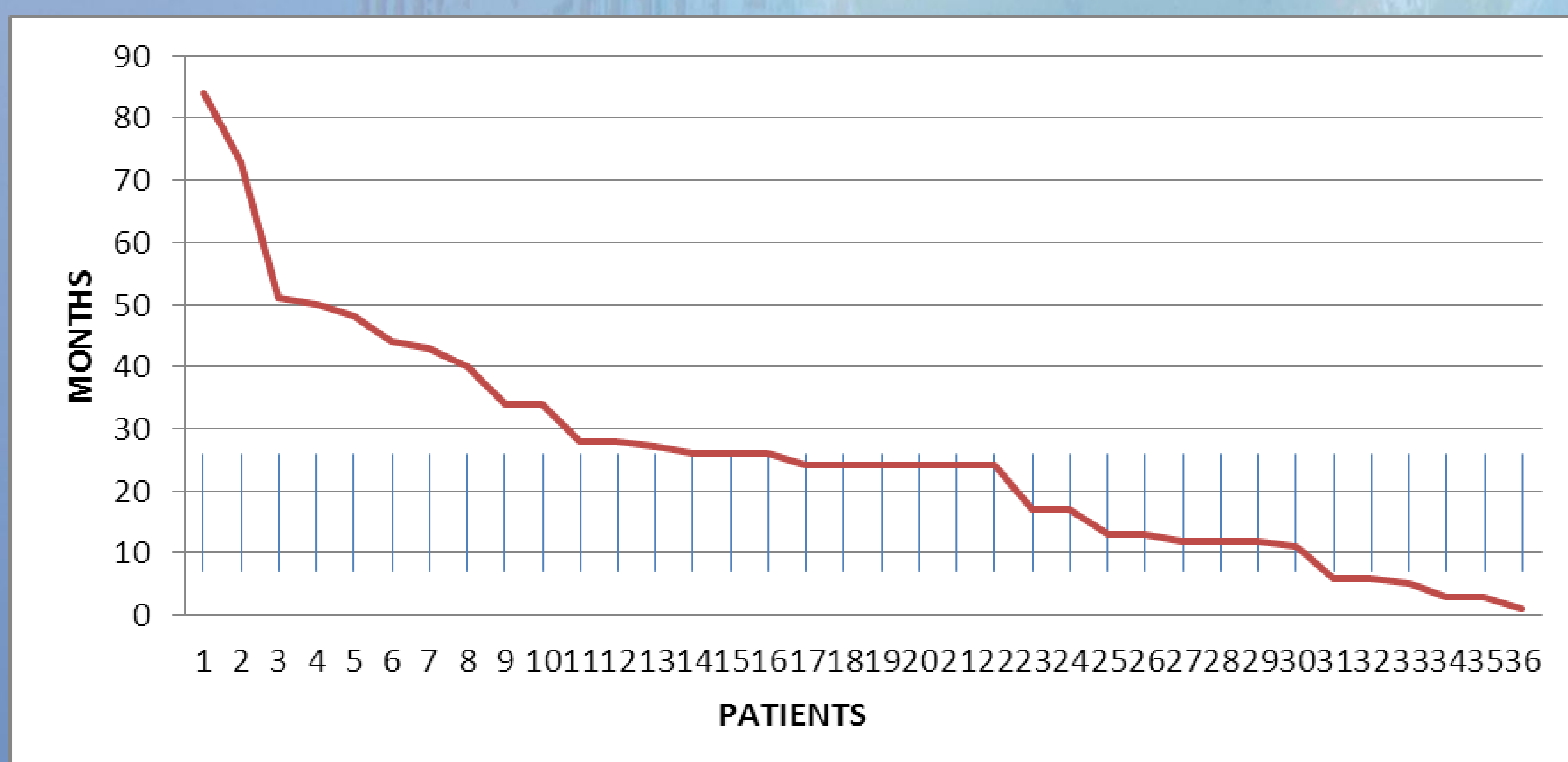


Figure 2. Months of treatment with natalizumab performed by each patient. **Median time of treatment was 26 months.**

<b>Risk of developing LMP</b>	9 (50%) patients
<b>Treatment failure</b>	4 (22,2%) patients
<b>Patient desire</b>	3 (16,6%) patients
<b>Other reasons</b>	2 (11,1%) patients

Table 2. Reasons to suspend the treatment with natalizumab. The percentages have been obtained from the patients that have given up with the treatment.

## CONCLUSIONS

The average time of maintenance of treatment with Natalizumab is 26 months, being the principal motive of suspension LMP's risk. There are important and necessary the effective scoreboards of LMP's risk to identify the patients of great risk, and to be able to minimize it.