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EXPERIENCE WITH TERIFLUNOMIDE TREATMENT FOR MULTIPLE SCLEROSIS IN A UNIVERSITY HOSPITAL

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Background

Teriflunomide (TRF)

- It's a once-daily oral immunomodulatory drug
- Approved in over 80 countries for multiple sclerosis (MS)
- Indicated in adults and contraindicated for pregnant women
- Starting 2017 became available in our hospital

Purpose

To describe our **experience** with the use of TRF and assess its **safety profile**, knowing disease-modifying therapy (DMTs) works differently and have different adverse reaction (AR).

Methods

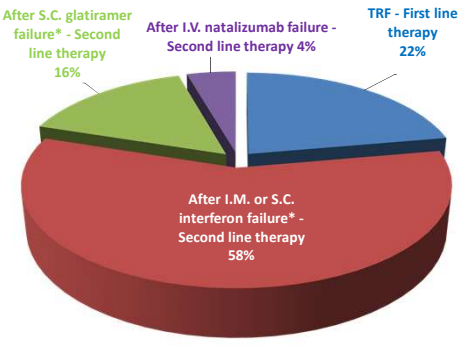
✓An observational retrospective study January 2017-January 2020.
✓Collected variables from medical records: age, sex, expanded disability status scale score -EDSS, previous DMT, safety profile (AR, suspension of TRF treatment) and results of blood tests.

✓Sustained disability progression was defined as at least a 1-point increase from baseline EDSS score ≤5.5 (or at least a 0.5-point increase for those with a baseline EDSS score >5.5) sustained for at least 12 weeks[1] .

Results

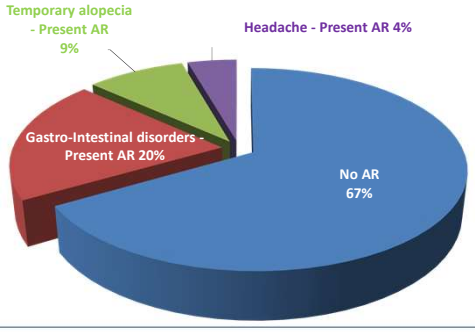
Patients characteristics	
Number of patients	**45**
Men/women	10/35
Mean age	35,7
The average duration of TRF	2,5 years
EDSS remain stable	30 patients
Mean change in EDSS from baseline	0,7
Moderate elevation of liver enzymes	9 patients
No suspension of TRF recorded	
No increase in disability progression	

Treatment distribution



The main reason of change were: convenience of oral administration, poor tolerance, AR at the site of injection

Safety profile



Conclusion

TRF seems to have a **safety profile**, it was **well tolerated**, no new or unexpected AR were reported and no suspension of treatment. Because our experience reflect only 3 years, increased monitoring is necessary to assess long term safety.

References

[1] *AUBAGIO (teriflunomide) [package insert]. Cambridge, MA: Genzyme Corporation.*

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No conflict of interest