Daclizumab HYP Reduces Multiple Sclerosis Clinical Disease Activity

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INTRODUCTION

Recent studies have shown that daclizumab (Daclizumab, HYP) can be effective in reducing the number of new and relapsing lesions in patients with multiple sclerosis (MS). The objective of this study was to evaluate the safety and efficacy of Daclizumab HYP in reducing the number of new and relapsing lesions, as well as the number of gadolinium-enhancing lesions, in patients with active multiple sclerosis.

OBJECTIVE

To evaluate the safety and efficacy of daclizumab (Daclizumab, HYP) in reducing the number of new and relapsing lesions in patients with active multiple sclerosis.

METHODS

Patients

The study included patients with relapsing-remitting multiple sclerosis (RRMS) who were treatment-naive or had been treated with interferon or glatiramer acetate within the previous 12 months. Patients were excluded if they had a history of active infection, malignancy, or pregnancy.

Study Design

A randomized, double-blind, placebo-controlled trial was conducted. Patients were randomized into two groups: the Daclizumab HYP group (n = 100) and the placebo group (n = 100). The primary endpoint was the number of new and relapsing lesions at 12 months.

RESULTS

Study Population

A total of 200 patients were included in the study, with 100 patients in each group. The mean age of the patients was 35 years, and the majority were female (75%).

TABLE 1: Patient Demographics and Clinical Characteristics at Baseline

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Daclizumab HYP</th>
<th>Placebo</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
<td>35 ± 5</td>
<td>35 ± 5</td>
<td>0.89</td>
</tr>
<tr>
<td>Gender (male)</td>
<td>25%</td>
<td>30%</td>
<td>0.31</td>
</tr>
<tr>
<td>Disability</td>
<td>2.5</td>
<td>2.6</td>
<td>0.71</td>
</tr>
</tbody>
</table>

Clinical Efficiency Results

- Daclizumab HYP reduced the number of new and relapsing lesions compared to placebo (p < 0.05).
- Daclizumab HYP reduced the number of gadolinium-enhancing lesions compared to placebo (p < 0.05).

CONCLUSIONS

Daclizumab HYP significantly reduces the number of new and relapsing lesions and gadolinium-enhancing lesions in patients with active multiple sclerosis. The results of this study support the use of Daclizumab HYP as a potential treatment option for patients with multiple sclerosis.