(S125) EFFICACY OF MYCOPHENOLATE MOFETIL IN MULTIPLE SCLEROSIS: A RETROSPECTIVE STUDY

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Background: Multiple sclerosis (MS) is an autoimmune disease of unknown etiology. Interferon beta (IFNβ) and glatiramer acetate (GA) are recommended first-line agents for the treatment of MS. However, despite treatment with these agents, the disease may continue to progress in some patients. Mycophenolate mofetil (MMF) is an inhibitor of inosine monophosphate dehydrogenase used in organ transplant patients. It has also been used as a second-line agent in patients with MS. We conducted a retrospective study to evaluate the efficacy of MMF in patients with MS.

Objectives: To study the efficacy of MMF in MS patients.

Methods: All patients with a diagnosis of active MS prior to starting MMF were studied. Active disease was defined as continued relapses and/or new or enhancing magnetic resonance imaging (MRI) lesions. The clinical data were retrospectively obtained by chart review and included age, sex, disease type and duration, and disability scores (Expanded Disability Status Scale [EDSS], Timed 25-Foot Walk [T25FW], and modified Nine-Hole Peg Test [mNHPT]). The disability scores at baseline and at 9 to 15 months were analyzed using the paired t test for the T25FW and mNHPT and the Wilcoxon signed rank test for the EDSS.

Results: Thirty-seven patients (mean ± SD age, 45.78 ± 9.01 years; 70% women) treated with MMF (30 relapsing, 7 progressive MS; mean disease duration, 9.84 ± 6.82 years) were studied. Twenty-three (62%) were on immunomodulatory therapy (16 IFNβ, 7 GA) prior to initiation of MMF. Following initiation of MMF, 17 (46%) continued concomitant immunomodulatory therapy; 20 (54%) were only on MMF. There was an improvement in T25FW (mean ± SE time in seconds) from 6.89 ± 4.64 to 6.26 ± 3.16 (P = .056). The mNHPT showed a trend of improvement from 15.19 ± 6.62 to 14.65 ± 6.36 (P = .091). The median EDSS score (n = 26) was not significantly different: 3.75 at baseline versus 3.0 after treatment (P = .7). Conclusions: In this retrospective study, MMF seemed to improve disability scores in MS patients who had not responded to first-line therapy.


Keywords: disease-modifying treatment in MS