Correlation of clinical, MRI, and OCT outcomes in the 11-year follow-up from BENEFIT: BENEFIT 11

Introduction

Approximately 65% of patients with multiple sclerosis (MS) present with a single relapse shortly after a clinically isolated syndrome (CIS).

Patients with CIS who had early treatment with interferon beta-1a or placebo delayed the time to disease activity by 3 years.

Patients with CIS who had early treatment with interferon beta-1a were less likely to experience a relapse during the 11 years of follow-up.

Results

- Approximately 65% of patients with multiple sclerosis (MS) present with a single relapse shortly after a clinically isolated syndrome (CIS).

- Patients with CIS who had early treatment with interferon beta-1a were less likely to experience a relapse during the 11 years of follow-up.

Discussion

- Significant positive correlations in the BENEFIT 11 population were observed between: - ARR and volume of T1 lesions (r = 0.212) - ARR and volume of T2 lesions (r = 0.216) - EDSS and minimum G-RNFL thickness (r = 0.381) - EDSS and T2 lesion volume (r = 0.284)

- Significant negative correlations in the BENEFIT 11 population were observed between: - ARR and minimum G-RNFL thickness (r = -0.233) and PMB-RNFL thickness (r = -0.323) - T1 lesion volume and minimum G-RNFL thickness (r = -0.205) and PMB-RNFL (r = -0.340) - T2 lesion volume and G-RNFL (r = -0.307) and PMB-RNFL (r = -0.300)

- Significant correlations were found between OCT parameters and EDSS, KFSS, MSFC, SDMT, normalized brain volume, mean cortical thickness, normalized thalamic parameters, and EDSS, KFSS, MSFC, SDMT, normalized brain volume, mean cortical thickness, and normalized thalamus parameters.

- Mental processing speed correlated negatively with number of T1 lesions (r = -0.167) (Q1-Q2).

- Significant negative correlations in the BENEFIT 11 population were observed between:
  - EDSS and MUCCA
  - ARR and MUCCA (r = -0.208)
  - EDSS and G-RNFL (r = -0.184)
  - MIFC and T1 lesion volume (r = -0.182) and T2 lesion volume (r = -0.216)

Conclusion

- Long-term follow-up from the BENEFIT trial confirmed the relationship between measures of disease and long-term outcomes after 11 years, particularly with regard to lesion activity and MUCCA.

References

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