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Safety and Efficacy of Dimethyl Fumarate in Clinical Practice: Rashid Hospital MS Center Real World Experience

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Background: Epidemiology of multiple sclerosis (MS) is rapidly changing in the world and the Middle East. There are relatively few studies addressing the real-world clinical experience with dimethyl fumarate especially in the Middle East region.

Objective: To review our clinical experience with dimethyl fumarate at the specialized MS center (MSC) in Rashid hospital, Dubai.

Design & Method: This is a prospective /retrospective review of Cohort MS patients at the MSC at Rashid Hospital. The medical records of all MS patients seen at the MSC between Feb 2014 and Sept 2015 were reviewed. Patients were included in the study if they fulfilled the following criteria: (1) Age older than 18 years, (2) Confirmed diagnosis of relapsing-remitting MS (RRMS) according to the 2010 McDonald criteria (3) On treatment with dimethyl fumarate. All patients had clinical as well as laboratory assessments at initiation and at least every 3-month (CBC, LFT's, RFT's) as well as magnetic resonance imaging (MRI) brain and spine with or without contrast at initiation and at least at 1 year follow up. All patients received titration dose of dimethyl fumarate 120mg twice daily over 1-4 weeks then continued at 240mg twice daily. Patients were followed at the MSC every 3 months for a full clinical evaluation and assessment of expanded disability status scale (EDSS).

Result: 30 patients were included. 3.3% of the patients experienced clinical relapses. Clinical as well as radiological relapses were documented in 3.3% of the patients. The proportion of patients with no new T2 or enhancing lesions was 97%. Patients experienced adverse events such as gastric symptoms (6.67%) and flushing (3.3%). There was no adverse event of major medical concern.

Conclusion: Our cohort confirms the efficacy and safety of dimethylfumarate in the treatment of relapsing-remitting MS patients.