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The Aquaporin4-IgG status and how it affects the clinical features and treatment response in NMOSD patients in Egypt

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Background: In Egypt, the characterization of Neuromyelitis Optica Spectrum Complaint (NMOSD) is deficient.

Objectives: To estimate the demographics, clinical features, aquaporin4 antibodies (AQP4-IgG) status, and neuroimaging of Egyptian NMOSD patients.

Methods: Retrospective analysis of 70 NMOSD patients' records were attained from the MS clinic, Kasr Alainy clinic, during January 2013 and June 2018.

Results: Patients 'mean age was34.9 ±9.2 times, and the mean at complaint onset was28.9 ±10.5 times. Fifty-nine cases had an original monosymptomatic donation. AQP4-IgG was measured using either enzyme- linked immunosorbent assay (ELISA) (22 patients) or cell- grounded assay (CBA) (34 patients). Six and 29 patients had shown positive results, independently ($p < 0.001$). 84 had typical NMOSD brain lesions. Longitudinally expansive myelitis was detected in 49 patients, and 9 had either short parts or normal cords. Treatment failure was advanced in seropositive patients. Rituximab significantly reduced the annualized relapse rate (ARR) compared to Azathioprine with a chance reduction of (76.47 ±13.28) and (10.21 ±96.07), independently ($p = 0.04$). Age at complaint onset was the only independent predictor for disability ($p < 0.01$).

Conclusion: Treatment failure was massive in seropositive patients. Still, there was no difference in clinical or radiological parameters between seropositive and seronegative patients. Patients, who were polysymptomatic or with aged age of onset, were prognosticated to have advanced unborn disability anyhow of the AQP4-IgG status.

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Biography

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