

Monoclonal antibodies

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Impaired humoral immunity: 5 case reports

In a case series of 13 patients, 5 patients (3 men, 2 women) aged 20–55 years were described, who developed impaired humoral immunity during treatment with rituximab, ofatumumab or ocrelizumab for neuromyelitis optica-spectrum disorders (NMO-SD) or multiple sclerosis (MS).

The patients, who were diagnosed with NMO-SD (n=1), relapsing remitting multiple sclerosis (RRMS; n=1), secondary progressive multiple sclerosis (SPMS; n=1) or primary progressive multiple sclerosis (PPMS; n=2), started receiving rituximab (n=3), ofatumumab (n=1) or ocrelizumab (n=1) [*dosages and routes not stated*]. All the patients concurrently had COVID-19 infection. The severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) serology or antibody testing (IgG index) performed after >3 weeks was found to be negative in all patients, which was suggestive of impaired humoral response, which was attributed to the immunosuppressive therapies [*durations of treatments to reactions onsets and outcomes not stated*].

Maillart E, et al. Beyond COVID-19: DO MS/NMO-SD patients treated with anti-CD20 therapies develop SARS-CoV2 antibodies?. Multiple Sclerosis and Related Disorders 46: Nov 2020. Available from: URL: <http://doi.org/10.1016/j.msard.2020.102482>

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