

Interferon-beta-1a/natalizumab

S

Lack of efficacy: case report

A 54-year-old man exhibited lack of efficacy during treatment with interferon-beta-1a and natalizumab [*not all routes and dosages stated*].

The man was diagnosed with secondary progressive multiple sclerosis in 2010. In 2001, he had relapsing multiple sclerosis, and had received treatment with IM interferon beta-1a as a preventative therapy. Interferon beta-1a therapy was proved ineffective as recurrent relapses of the disease were noted.

Over the course of 10 years, The man had gradual disability progression. Interferon-beta-1a was discontinued in 2011. In 2012, he started receiving treatment with natalizumab. However, he discontinued natalizumab in 2014 due to gradual deterioration of the disease. From 2014 to September 2019, he had received treatment with fingolimod (discontinued due to paroxysmal atrial fibrillation). His medical history included dry eye syndrome and concomitant medications included fampridine [dalfampridine] and metoprolol for atrial fibrillation rate control. In January 2020, he developed mild lymphopenia. In February 2020, he started receiving treatment with cladribine. However, he concomitantly developed COVID-19. Therefore, cladribine treatment suspended until he tested negative for COVID-19 IgG serology. In April 2021, he still had mild lymphopenia. The second year course of cladribine was planned further.

Haham N, et al. COVID-19 in Cladribine-treated patient with multiple sclerosis. *Journal of Neuroimmunology* 359: 15 Oct 2021. Available from: URL: <http://doi.org/10.1016/j.jneuroim.2021.577690>

803596878