EU Charcot 2021

Brain Volume Changes During 3 to 5 Years of Ozanimod in Relapsing MS

Short title: Effect of Ozanimod on Brain Volume in RMS

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Introduction:

Ozanimod reduced whole brain volume (WBV), cortical grey matter volume (CGMV), and thalamic volume (TV) loss vs interferon beta-1a (IFN) in phase 3 SUNBEAM (NCT02294058) and RADIANCE (NCT02047734) trials. We evaluated brain volume loss among SUNBEAM/RADIANCE participants who entered an ongoing extension trial (DAYBREAK, NCT02576717).

Methods:

The 2 randomised, double-blind trials compared oral ozanimod 0.92 and 0.46 mg/day with intramuscular IFN 30 µg/week in adults with relapsing multiple sclerosis (RMS). Completers were eligible to receive open-label ozanimod 0.92 mg/day in DAYBREAK. MRI was performed at months 6 (SUNBEAM), 12 (SUNBEAM/RADIANCE), and 24 (RADIANCE), then every 12 months (DAYBREAK). Baseline WBV and CGMV were measured using SienaX, and TV using ThalamicVolume software; percentage change in WBV, CGMV, and TV was

quantified using Jacobian integration. Data are reported through DAYBREAK month 36 (December 2020 data cutoff).

Results:

DAYBREAK includes 2257 SUNBEAM/RADIANCE participants. Loss of WBV, CGMV, and TV was less in ozanimod-treated participants than IFN-treated participants and remained less after switching from IFN to ozanimod, especially for WBV and TV. CGMV was lost to a much greater extent while on IFN, and recovered substantially, but not completely, upon switching to ozanimod.

Conclusion:

Switching from IFN to ozanimod reduced the rate of WBV, CGMV, and TV loss. Global and regional brain volume loss after 4–5 years of follow-up remained greater in participants who started on IFN than in continuous ozanimod users. These results support early treatment with ozanimod to reduce brain volume loss in patients with RMS.

Presented at the European Academy of Neurology 2021.

Funding: This study was supported by Bristol Myers Squibb, Princeton, NJ.

Disclosures

DLA: personal fees for consulting and/or grants from Albert Charitable Trust, Biogen, Celgene, F. Hoffmann-La Roche, Frequency Therapeutics, MedDay, Merck Serono, Novartis, Population Council, and Sanofi-Aventis; grants from Biogen, Immunotec, and Novartis; and an equity interest in NeuroRx Research.

JKS: employee and shareholder of Bristol Myers Squibb.

XM: speaking honoraria and travel expenses for participation in scientific meetings, has been a steering committee member of clinical trials or participated in advisory boards of clinical trials in the past 3 years with Actelion, Alexion, Bayer, Biogen, Bristol Myers Squibb/Celgene, EMD Serono, EXCEMED, Genzyme, Hoffmann-La Roche, Immunic, Janssen Pharmaceuticals, MedDay, Merck, Mylan, MSIF, Nervgen, NMSS, Novartis, Roche, Sanofi-Genzyme, Teva Pharmaceuticals, and TG Therapeutics

BACC: personal compensation for consulting for Alexion, Atara, Autobahn, Avotres, Biogen, EMD Serono, Novartis, Sanofi, TG Therapeutics, and Therini, and received grant support from Genentech.

LK: institutional research support: steering committee, advisory board, consultancy fees: Actelion, Bayer HealthCare, Biogen, Bristol Myers Squibb, Genzyme, Janssen,

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Japan Tobacco, Merck, Novartis, Roche, Sanofi, Santhera, Shionogi, and TG therapeutics, speaker fees: Bayer HealthCare, Biogen, Merck, Novartis, Roche, and Sanofi; support of educational activities: Allergan, Bayer HealthCare, Biogen, CSL Behring, Desitin, Genzyme, Merck, Novartis, Roche, Pfizer, Sanofi, Shire, and Teva; license fees for Neurostatus products; and grants: Bayer HealthCare, Biogen, European Union, Innosuisse, Merck, Novartis, Roche, Swiss MS Society, and Swiss National Research Foundation.

GC: compensation for consulting and/or speaking activities from Almirall, Biogen, Celgene, EXCEMED, Forward Pharma, Genzyme, Merck, Novartis, Roche, Sanofi, and Teva

HPH: personal fees for consulting, serving on steering committees, and speaking from Bayer Healthcare, Biogen, Celgene, GeNeuro, Genzyme, Merck, MedImmune, Novartis, Octapharma, Roche, Sanofi, and Teva

HL, CP, DS: employees and shareholders of Bristol Myers Squibb

JAC: personal compensation for consulting for Adamas, Atara, Bristol Myers Squibb, Convelo, MedDay, and Mylan; and serving as an Editor of *Multiple Sclerosis Journal*