Effect of AHSCT on inflammatory mediators in serum and CSF of RRMS patients in the HALT-MS study

INTRODUCTION

In the HALT-MS study, twenty-four participants with relapsing-remitting multiple sclerosis (RRMS) underwent autologous hematopoietic stem cell transplantation (AHSCT), of which seventeen achieved durable remission (Nash et al. Neurology 2017). Our goal was to better understand mechanisms mediating increased immune regulation following AHSCT and biomarkers associated with or predictive of long-term disease remission. To achieve this goal, we analyzed soluble inflammatory markers in serum and cerebrospinal fluid (CSF) from HALT-MS participants before and after AHSCT.

METHODS

Serum was collected at nine timepoints from baseline (prior to mobilization and conditioning) through 60 months post-transplant. Lumbar punctures were performed at three timepoints: screening, 24- and 48-months post-transplant. CSF was centrifuged, aliquoted, and transferred to -80C immediately after collection.

Approximately 40 Inflammatory mediators were measured in serum and/or CSF by Meso Scale Diagnostics, LLC. Four additional mediators (sCD27, CXCL13, CXCL10, and CCL19) were measured in CSF by ELISA in the Muraro lab. IgG and IgM concentration and oligoclonal bands in CSF were measured by the Villar lab.

Clinical data used in the analysis includes Expanded Disability Status Score (EDSS), total brain volume, T1 volume, and T2 volume by MRI (Nash et. al. 2017, available at ITNTrialShare.org)



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