Evaluation of shorter infusion times with ocrelizumab in patients with relapsing-remitting multiple sclerosis
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Objective:
To report the safety of ocrelizumab (OCR) infused over a shorter time in patients with multiple sclerosis (MS) participating in an extension of the Phase IIIb CHORDS study (NCT02637856) or a stand-alone Phase III shorter-infusion study (NCT03606460).

Background:
Infusion-related reactions (IRRs) were common but manageable in pivotal trials of OCR. Shorter infusions may help improve convenience and compliance for patients and healthcare practices.

Design/Methods:
Patients with relapsing-remitting MS who complete the single-arm, open-label CHORDS study, which is evaluating the efficacy and safety of OCR in patients who had a suboptimal response to a previous disease-modifying treatment, are eligible for an optional extension in which OCR 600 mg is infused over 2 hours instead of 3.5 hours as recommended by US prescribing information (USPI). In the stand-alone study, patients with relapsing or primary progressive MS will either receive OCR 600 mg over 2 hours after completing 1-2 doses of OCR per USPI (Cohort 1), or receive the second 300-mg infusion of OCR Dose 1 over 1.5 hours after completing the first 300-mg infusion of Dose 1 per USPI (Cohort 2).

Results:
As of September 27, 2018, data were available from the first 25 patients enrolled in the CHORDS extension study. These patients had a mean (SD) age of 35.2 (9.1) years, were 72% female, and had a mean (SD) time since diagnosis of 4.35 (2.64) years. Updated findings from the CHORDS extension study and the first ≈50 patients enrolled in the stand-alone study will be presented.

Conclusions:
Results from both studies will provide information on the safety and tolerability of OCR infusions that are shorter than the currently approved rate per USPI.