## PROGNOSTIC FACTORS OF DISABILITY IN CHRONIC INFLAMMATORY DEMYELINATING POLYRADICULONEUROPATHY

E Spina, A Topa, R Iodice, S Tozza, L Ruggiero, M Esposito, L Santoro, F Manganelli

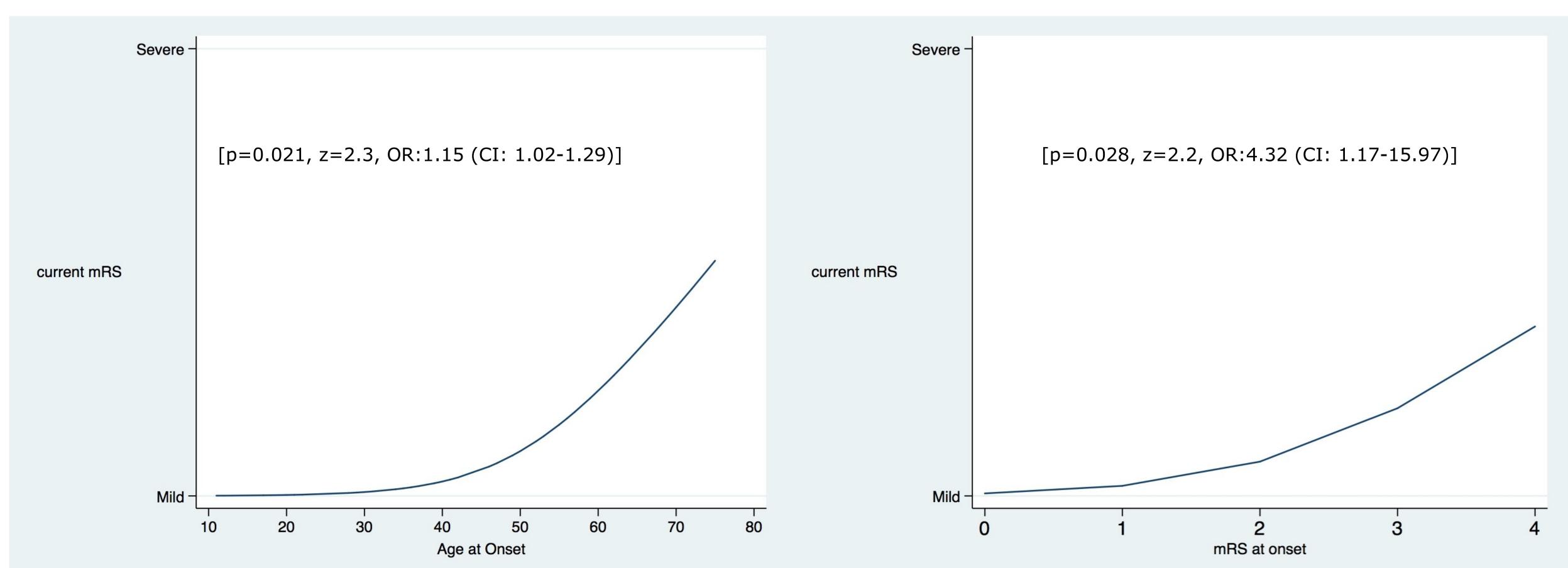
Department of Neurosciences, Reproductive and Odontostomatological sciences, University "Federico II", Naples, Italy

**Introduction**: chronic inflammatory demyelinating polyradiculoneuropathy (CIDP) is a disabling disease and about 10% of patients may become persistently disabled. Our aim was to identify early clinical, electrophysiological and biochemical prognostic factors of disability in CIDP.

**Methods:** we evaluated retrospectively clinical, electrophysiological and biochemical data from 60 patients with a definite or probable diagnosis of CIDP according to the European Federation of Neurological Societies/Peripheral Nerve Society (EFNS/PNS) criteria. At the time of diagnosis we collected sex, age of onset, type of onset (acute or subacute/chronic), phenotype (typical or atypical), time of delay from onset of symptoms to diagnosis and treatment, protein level in cerebrospinal fluid (CSF), response to first line treatments (intravenous immunoglobulin or corticosteroids), clinical disability at onset estimated with modified Rankin Scale (onset-mRS) and electrophysiological parameters. At current time, we calculated disease duration and assessed clinical disability (current-mRS).

We performed a univariate logistic regression model to assess the independent association between each clinical, biochemical and electrophysiological variable and current-mRS; afterwards we applied a multivariate logistic model by entering the independent variables with p < 0.1 at univariate test. Moreover, we used Spearman's rank correlation coefficient to evaluate the relationship between disease duration and current-mRS.

## **Results:**



**Conclusions**: our data suggest that older age at disease onset and a worse clinical status at time of diagnosis may be negative prognostic factors of clinical disability independently from disease duration.

## References:

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