

Ocrelizumab may help preserve hand, arm function in PPMS

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trends. In a subgroup analysis, consistent directional trends were observed.

"Preservation of UE function is an important therapeutic goal," the authors write. "Findings from this analysis showed that ocrelizumab mitigated progression of UE impairment in patients with PPMS using the 9HPT."

Several authors disclosed financial ties to [pharmaceutical companies](#), including F. Hoffmann La-Roche, which manufactures ocrelizumab and funded the study.

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(HealthDay)—For patients with primary progressive multiple sclerosis (PPMS), ocrelizumab reduces progression of upper-extremity (UE) impairment, according to an exploratory analysis published online Nov. 12 in the *Multiple Sclerosis Journal*.

Edward J. Fox, M.D., Ph.D., from the University of Texas at Austin, and colleagues conducted an exploratory analysis of the effects of [ocrelizumab](#) on confirmed progression (CP) and confirmed improvement (CI) in UE [impairment](#) using data for [patients](#) from the phase III randomized ORATORIO trial. Patients with PPMS were randomly assigned to ocrelizumab or placebo every 24 weeks for ?120 weeks. At baseline and every 12 weeks thereafter, the Nine-Hole Peg Test (9HPT) was administered.

In the intention-to-treat population, the researchers found that ocrelizumab significantly reduced the change in 9HPT time over 120 weeks, the risk for CP of ?20 percent in 9HPT for both hands, and the risk for more severe 9HPT progression versus placebo. Compared with placebo, ocrelizumab was favored with respect to achieving CI in numerical

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