Ofatumumab: Adis Evaluation

Clinical Considerations

- Convenient self-administered treatment regimen (once-monthly subcutaneous injections)
- Significantly reduces annualized relapse rate, MRI-detected lesion activity and disability progression compared with teriflunomide
- Generally manageable tolerability profile; adverse events of special interest include infections and injection-related reactions

Plain Language Summary

Background and rationale

- Multiple sclerosis (MS) is an incurable disease that affects ≈ 2.8 million people worldwide
- Limiting the progression of disability associated with this disease is crucial, and treatments such as teriflunomide or monoclonal antibodies can prevent the relapses which define MS
- Ofatumumab (Kesimpta®), a monoclonal antibody, works by reducing the level of B cells which contribute to the development and progression of MS
- Ofatumumab is approved in several countries worldwide to treat adults with certain relapsing forms of MS. It is administered by subcutaneous injection once per month and is the first therapy of its kind that patients can self-inject at home

Clinical findings

- In clinical trials, ofatumumab was more effective than teriflunomide in reducing the annual relapse rate, as well as slowing both the progression of disability and formation of new MS lesions in the brain
- Ofatumumab had a generally manageable tolerability profile, although treatment resulted in infections and injection-related reactions; these were generally manageable with treatment

Conclusion

Ofatumumab is an effective and convenient treatment option, with a generally manageable tolerability profile, in adults with relapsing forms of MS

Kang, C. & Blair, H.A. Drugs. 2021. https://doi.org/10.1007/s40265-021-01650-7