



THE AGA KHAN UNIVERSITY

eCommons@AKU

Book Chapters / Conference Papers

10-2022

Demographics and baseline disease characteristics of patients with relapsing multiple sclerosis from Kenya participating in the CHIMES trial

Dilraj Sokhi

Juzar Hooker

Mitzi J. Williams

Aisleen Shamshudin

Yuashita Hussein

See next page for additional authors

Follow this and additional works at: https://ecommons.aku.edu/book_chapters



Part of the [Neurology Commons](#)

Authors

Dilraj Sokhi, Juzar Hooker, Mitzi J. Williams, Aisleen Shamshudin, Yuashita Hussein, Peter Betti, Heldah Amariati, Noreen Karimi, Stacey Gondi, and Mansoor Saleh

Demographics and Baseline Disease Characteristics of Patients With Relapsing Multiple Sclerosis From Kenya Participating in the CHIMES Trial

Dilraj Singh Sokhi,¹ Juzar Hooker,¹ Mitzi J. Williams,² Lilyana Amezcua,³ Aisleen Shamshudin,¹ Yuashita Evochi Hussein,¹ Peter Betti,¹ Heldah Amariati,¹ Noureen Karimi,¹ Stacey Gondi,¹ Jinglan Pei,⁴ Huwaida Bulhan,⁵ Dennis Okaka,⁶ Juan Acosta,⁴ and Mansoor Saleh¹

¹Aga Khan University, Nairobi, Kenya; ²Joi Life Wellness Center, Atlanta, GA, USA; ³Keck School of Medicine, University of Southern California, Los Angeles, CA, USA; ⁴Genentech, Inc., South San Francisco, CA, USA; ⁵F. Hoffmann-La Roche Ltd, Basel, Switzerland; ⁶F. Hoffmann-La Roche Ltd, Singapore

BACKGROUND



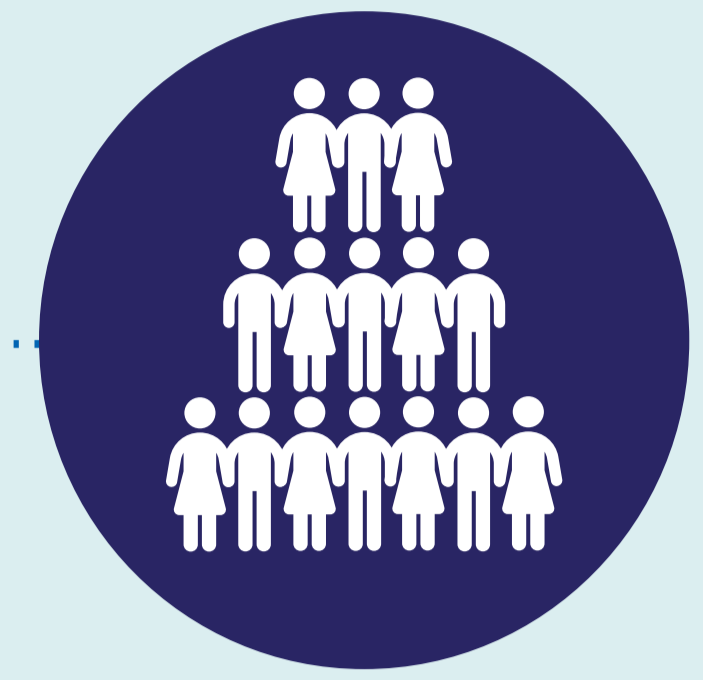
There is a paucity of epidemiological studies on multiple sclerosis (MS) in Black people from Africa, and this ethnic population is historically underrepresented in MS¹



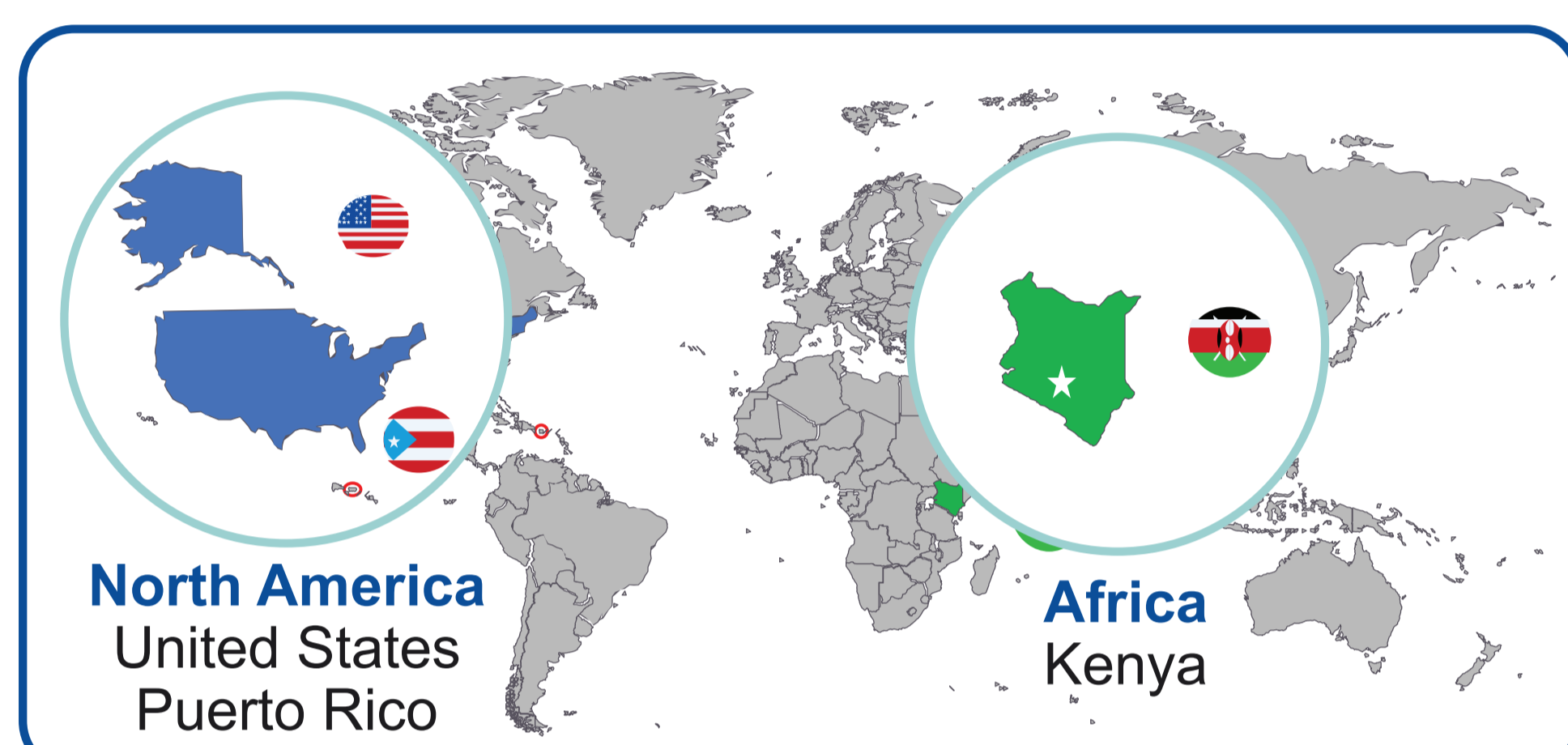
The CHIMES trial (NCT04377555) is an ongoing, open-label, single-arm, Phase IV clinical study that is investigating the efficacy and safety of ocrelizumab (OCR) in Black and Hispanic patients with relapsing MS (RMS)



OCR, currently approved in North America for RMS and primary progressive MS and pending government approval in Kenya, is a humanised monoclonal antibody that selectively targets CD20⁺ B cells and reduces the rates of disease activity and progression^{2,3,4}



Self-identified Black and Hispanic patients aged 18 to 65 years with RMS and an Expanded Disability Status Scale (EDSS) score of ≤ 5.5 were recruited at all study sites



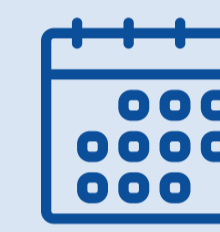
The CHIMES trial is a North American trial with one site in Kenya



To promote inclusive recruitment in Kenya:



- Study-related patient materials were available in English and Kiswahili

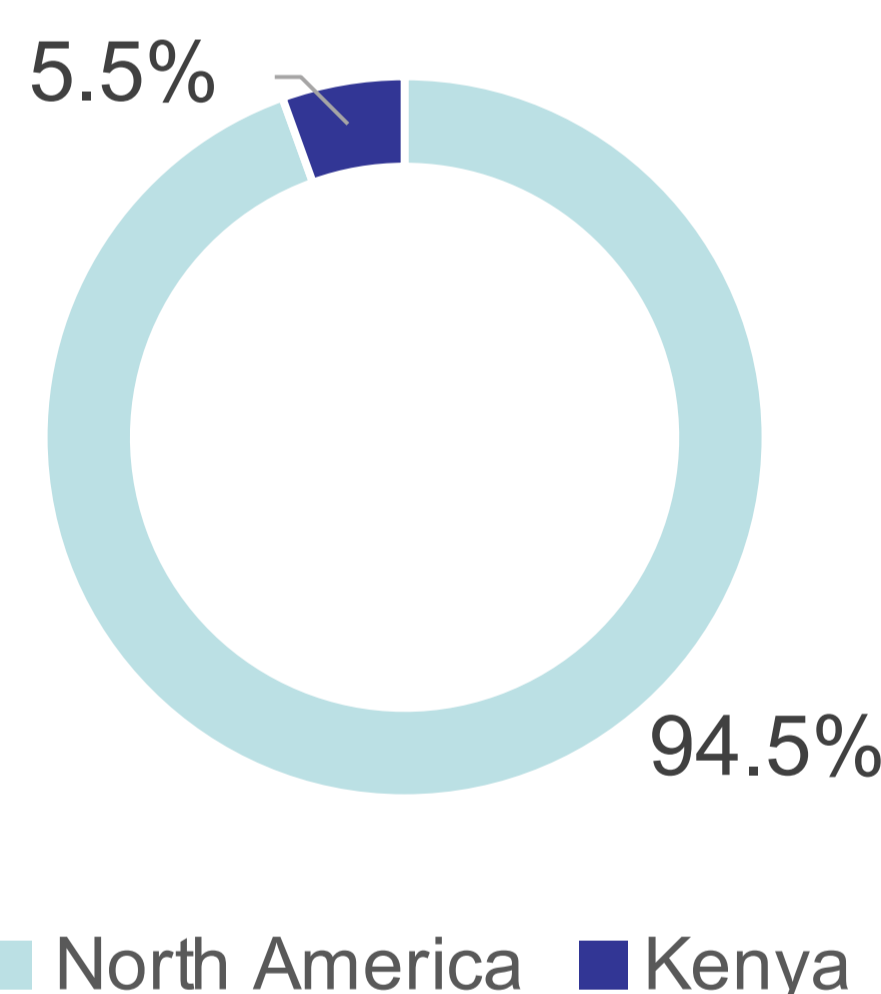


- Flexible scheduling options were based on specific needs of the catchment area to also recruit from rural areas and comply with local healthcare ecosystems

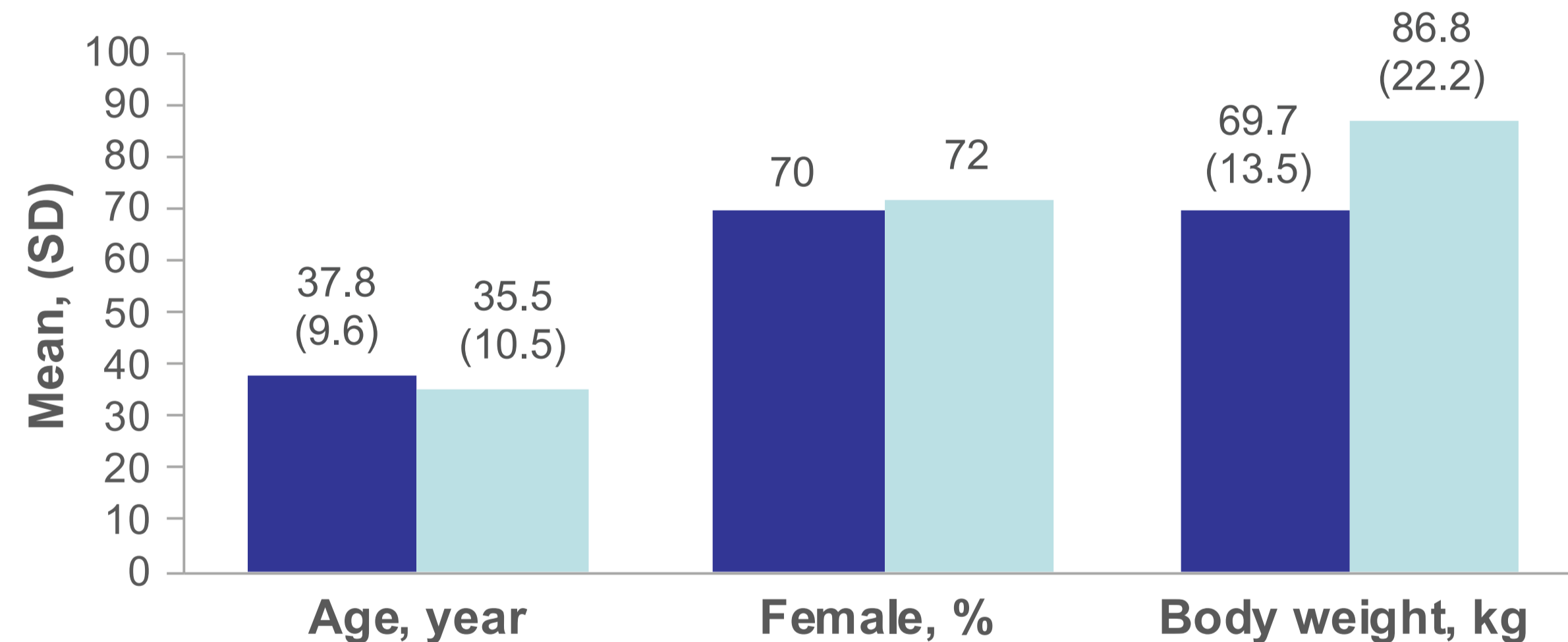
KEY FINDINGS



Of 182 enrolled patients, 10 are in Kenya and all self-identify as Black



Baseline Patient Demographics^a

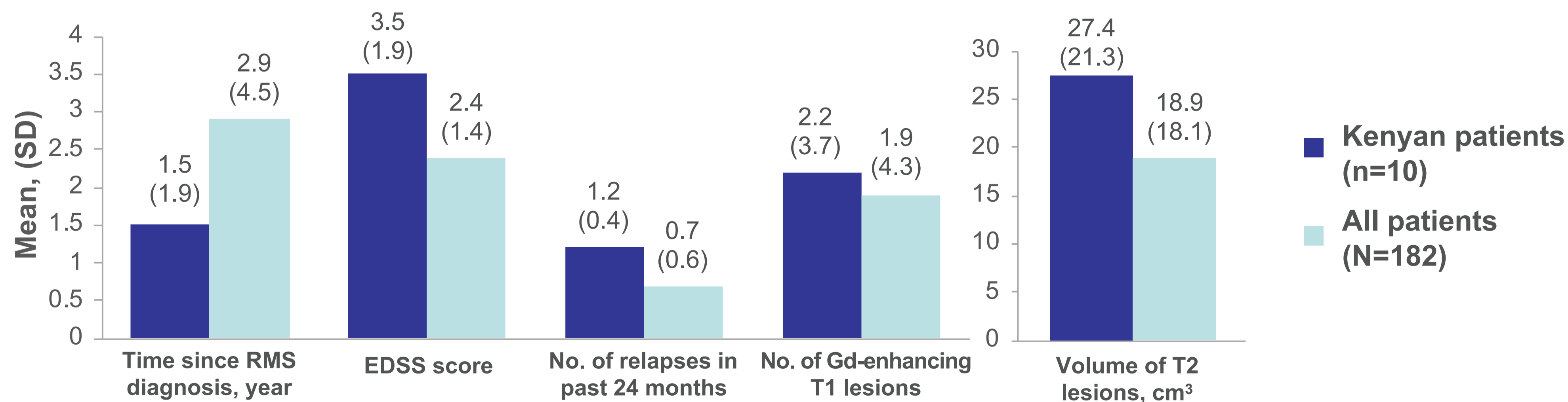


Kenyan patients were observed to have a lower mean body weight than the total population

^aNo statistical comparisons were made due to the small sample size.



Baseline Disease Demographics^a



- Kenyan patients were observed to have a shorter time since diagnosis and higher disease disability and burden than the total population

- Mean time since first MS symptoms, time since onset of last MS relapse before enrolment and normalised brain and thalamic volume were observed to be similar between both groups

Gd, gadolinium. ^aNo statistical comparisons were made due to the small sample size.

CONCLUSIONS

- CHIMES is the first Phase IV clinical trial to prospectively assess patients with RMS from sub-Saharan Africa
- Differences observed in demographic and disease characteristics between patients with RMS enrolled in the Kenyan and North American sites highlight the importance of enrolling more diverse populations in RMS trials and conducting more demographic-specific studies

REFERENCES

1. Yamout BI, et al. *Mult Scler J Exp Transl Clin* 2020;6:2055217319841881.
2. Hauser SL, et al. *N Engl J Med* 2017;376:221–234.
3. Montalban X, et al. *N Engl J Med* 2017;376:209–220.
4. Ocrevus. Prescribing information. Genentech, Inc; 2021.

DISCLOSURES

D.S. Sokhi has received speaker fees from F. Hoffmann-La Roche Ltd. J. Hooker has nothing to disclose. M.J. Williams has received honoraria for speaking, consulting or serving on steering committees for AbbVie, Biogen, Bristol Myers Squibb, EMD Serono, Genentech, Inc., Janssen, Novartis, TG Therapeutics and Sanofi Genzyme. L. Amezcua reports personal compensation for consulting, speaking or serving on steering committees or advisory boards for Biogen Idec, Novartis, Alexion Pharmaceuticals, Genentech, Inc., EMD Serono and AbbVie and research support from the National Multiple Sclerosis Society, National Institutes of Health National Institute of Neurological Disorders and Stroke and Biogen. A. Shamsudin, Y.E. Hussein, P. Betti, H. Amariati, N. Karimi and S. Gondi have nothing to disclose. J. Pei is an employee of Genentech, Inc., and a shareholder of F. Hoffmann-La Roche Ltd. H. Bulhan and D. Okaka are employees of F. Hoffmann-La Roche Ltd, Nairobi, Kenya. J. Acosta is an employee of Genentech, Inc., and a shareholder of F. Hoffmann-La Roche Ltd. M. Saleh has nothing to disclose.

Scan Quick Response (QR) code or click link to download a pdf and enhanced content. Copies of this poster obtained through QR code are for personal use only and may not be reproduced without permission from ECTRIMS and the author of this poster.



<https://bit.ly/3DUYdqs>