

# Oligoclonal bands in multiple sclerosis patients: worse prognosis?

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**Introduction:** Cerebrospinal fluid (CSF) oligoclonal bands (OB) imply intrathecal immunoglobulin synthesis and B-cell immune process. There is scarce evidence of OB having a role in disease prognosis. The objective of the present study was to determine OB's prognostic value regarding disease progression. **Methods:** Between January 1994 and January 2007, relapsing–remitting MS (RRMS) patients in which OB were determined were included. Demographic, clinical aspects and presence of OB were analyzed. We compared OB+ versus OB– patients regarding progression to expanded disability status scale (EDSS) of 6.0 and to secondary progressive MS (SPMS). Cox proportional hazard models were used to compare the outcome between groups. *P* values <0.05 were considered significant.

**Results:** One hundred and ninety-six patients were included. In 176 patients (90%), the CSF showed type II OB, 20 (10%) patients were OB negative. There were no differences between age, clinical presentation and EDSS at onset or in the immunomodulatory treatment received between OB+ and OB– patients. Sixty-two (31.6%) patients converted to SPMS during the follow-up, 59 (33.5%) were OB+ and 3 (15%) were OB–. EDSS of 6 was recorded in 56 (28.5%) patients during the follow-up; 54 (31%) were OB+ while only 2 (10%) OB- patients reached this outcome (reach SP phase, *P*=0.032; HR: 2.2; 95% CI: 1.3–7.5 and EDSS of 6, *P*=0.037; HR: 1.9; 95% CI: 1.3–8.5).

**Conclusion:** We observed during the follow-up that OB– patients had a better prognosis and milder disability compared to OB+ patients.

**Keywords:** Multiple sclerosis, Oligoclonal bands, Prognosis