

Long Term Differential Outcomes of CIDP Patients After Using IVIG, Plasmapheresis, Or Corticosteroids: A Statewide Planning and Research Cooperative System (SPARCS) Study 2002-2014

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Objective: To compare trends in outcomes including mortality rates, discharge to a nursing home, and disability of CIDP patients across 2002 to 2014 treated with IVIG, corticosteroids, and plasmapheresis.

Background: IVIG, Plasmapheresis, and corticosteroids have been used as a first line to treat chronic inflammatory demyelinating polyneuropathy (CIDP). However, the trends in long term outcomes were not investigated.

Methodology: Patients were retrieved from the Statewide Planning and Research Cooperative System (SPARCS) database for the 2002 - 2014 time period using ICD 9 code for CIDP. Death was compared between patients receiving IVIG, plasmapheresis and steroids.

Results: We identified 2850 patients with CIDP. Among them death occurred in 96 patients. All 96 deaths were patients who solely used corticosteroids as their treatment. However, the overall death rate from 2002-2014 steadily decreased ($y = -0.0006x + 0.0138$). The death rate peaked in 2003 at 1.85% and dropped to 0.22% by 2014.

Conclusion: Our preliminary data reported a trend toward reduction of mortality rates in CIDP between 2002-2014. Death was exclusively observed in patients treated exclusively with corticosteroids. Work in progress to determine the disability and discharge to nursing home rates, as well as the effect of comorbid condition and socioeconomic factors on CIDP patients treated with IVIG compared to patients treated with corticosteroids and plasmapheresis.