

2599 AN UNUSUAL CASE OF INFLUENZA A AND INFECTIOUS RADICULOPATHY

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10.1136/bmjno-2023-ANZAN.45

Neurological manifestations of Influenza A are rare and not well described. We report a case of a twenty year-old male who presented with severe back pain, fevers and lower limb sensory changes in the setting of influenza A. Investigations for a localised infectious process to explain the severe lumbar pain, including MRI imaging, were negative. The presentation was thought to be most in keeping with viral-induced infectious radiculopathy. The patient was treated with a course of Oseltamivir and high dose prednisolone, with complete symptom resolution. Further research would be extremely beneficial in guiding clinicians when dealing with similar patients in the future.

2602 TAKAYASU ARTERITIS: AN UNUSUAL CAUSE OF STROKE IN A YOUNG PATIENT WITH NO RISK FACTORS

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10.1136/bmjno-2023-ANZAN.46

Background Takayasu arteritis is a rare cause of young stroke due to large-vessel vasculitis primarily affecting the aorta and its primary branches. Women are affected in 80 to 90 percent of the time.

Case-Report A 34 yr old female presented with sudden onset of slurred speech and confusion. Her husband had to repeat his questions and instructions many times before eliciting a response. There were no other neurological signs and symptoms. She was not on drugs or alcohol.

Physical Examination She had global aphasia with a right upper motor neuron facial palsy and right hemiparesis.

Investigations MRI brain revealed a left middle cerebral artery territory (MCA) infarct. On MRA there was diffuse narrowing of the left internal carotid artery compared to the right side.

CT 4 vessel angiogram revealed smooth mural thickening with perivascular haziness along the aortic arch, brachiocephalic trunk, proximal right subclavian and right common carotid arteries. There was severe stenosis of the left subclavian artery origin with occlusion of the entire left common carotid artery.

MRI vessel wall imaging revealed circumferential wall thickening and intense enhancement in the left common carotid artery from its origin. There was similar involvement of the left subclavian artery origin.

Diagnosis Takayasu arteritis.

Discussion Takayasu arteritis is an inflammatory vasculitis and is a rare cause of stroke. Steroids are the mainstay of treatment and in the long run, steroid sparing agents are used.

Conclusion Clinicians should not forget Takayasu arteritis in young/middle-aged stroke patients, especially when vascular risk factors are absent.

2603 SAFETY AND TOLERABILITY OF ZILUCOPLAN IN RAISE-XT: A MULTICENTER, OPEN-LABEL EXTENSION STUDY IN PATIENTS WITH MYASTHENIA GRAVIS

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10.1136/bmjno-2023-ANZAN.47

Objective To evaluate the safety and efficacy of zilucoplan in an interim analysis of RAISE-XT (NCT04225871). Collating long-term clinical data will contribute to an increased understanding of the safety profile of zilucoplan in generalized myasthenia gravis (gMG).

Methods RAISE-XT, a Phase 3, multicenter, open-label extension study, recruited patients with gMG who participated in randomized Phase 2 (NCT03315130) and Phase 3 (NCT04115293) zilucoplan studies. All patients self-administered daily subcutaneous injections of 0.3 mg/kg zilucoplan. Primary outcome was incidence of treatment-emergent adverse events (TEAEs). Key secondary outcomes included Myasthenia Gravis Activities of Daily Living (MG-ADL) score.

Results 199 patients enrolled in RAISE-XT; 104 continued zilucoplan from their qualifying study (zilucoplan group) and 95 switched to zilucoplan from placebo (placebo-switch group). Median exposure at data cut-off was 253.0 (range 29–765) days. 169 (84.9%) patients experienced a TEAE; 46 (23.1%) patients experienced a serious TEAE. Most common TEAEs were headache and worsening of MG, both in 33 (16.6%) patients. At extension study Week 12, after 24 weeks of zilucoplan, the zilucoplan group achieved a least square mean change in MG-ADL score from double-blind study baseline of -6.30 (95% CI: -7.44, -5.15). MG-ADL reduction from baseline for the placebo-switch group, after 12 weeks of zilucoplan, was -6.32 (95% CI: -8.00, -4.65).

Conclusion In this interim analysis of RAISE-XT, zilucoplan demonstrated a favorable long-term safety profile. Efficacy in patients who had previously received zilucoplan continued to improve and was demonstrated for those who switched from placebo. The study is ongoing. Funding: UCB Pharma.

2605 DIAGNOSIS OF ARTERY OF PERCHERON (AOP) STROKE

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10.1136/bmjno-2023-ANZAN.48

Objectives and Methods The Artery of Percheron (AOP) is an uncommon anatomical variant whereby the paramedian arteries supplying both thalami arise from a single common trunk from either posterior cerebral artery P1 segment. We