MSMilan2023

9th Joint ECTRIMS-ACTRIMS Meeting 11–13 October 2023 | Milan, Italy

ECTRIMS actrims

Abstract Number: 2306/O035

Predicting disease course in Multiple Sclerosis using deep learning on clinical data

Akshai Parakkal Sreenivasan * 1, Joachim Burman 2, Kim Kultima 1, Ola Spjuth 3, Aina Vaivade 1,

¹ Uppsala University, Department of Medical Sciences, Clinical Chemistry, Uppsala, Sweden ² Uppsala University, Department of Medical Sciences, Experimental Neurology, Uppsala, Sweden, ³ Uppsala University, Department of Pharmaceutical Biosciences, Uppsala, Sweden

Introduction:

Multiple sclerosis (MS) is a demyelinating disease affecting both the brain and spinal cord, causing inflammation and disruption in the signal transmission of the nervous system. MS usually starts as relapsingremitting MS (RRMS) with relapses and demyelination, later transitioning to secondary progressive MS (SPMS), with continuous neurodegeneration and progression of disability. The transition to SPMS is usually diagnosed in retrospect, as there is currently no way to identify individuals at risk for SPMS.

Objectives/Aims:

To identify patients with SPMS using a deep learning approach.

Methods:

We developed a deep-learning model capable of predicting the current disease status. Clinical data were extracted from the Swedish MS registry (SMSReg), containing clinical data for 22,748 MS patients and 197,227 patient visits. The model was then trained on longitudinal information containing information on current and previous clinical visits, containing clinical features such as Expanded Disability Status Scale (EDSS) score, sex, age of onset, relapses, Magnetic resonance imaging (MRI) data, and drug treatments.

Results:

The model identified patients with SPMS earlier than the assessing clinical neurologist in 54.7% of cases, matched the clinical assessment of the neurologist in 33.8% of cases, and identified SPMS later than the clinical neurologist in 5.8% of cases. The model was also able to correctly assign disease courses to patients with only RRMS and SPMS from the beginning of diagnosis, with 83.7% and 92.6% accuracy, respectively.

Conclusion:

A deep learning model outperformed the assessment of clinical neurologists in 91.5% of cases and could be used to support the diagnosis of SPMS. Artificial intelligence is a promising tool in neuro healthcare and should be explored further.

Disclosures:

This work was supported by the Swedish Research Council (2021-02189) and (2021-02814), FORMAS (2020-01267), Region Uppsala (ALF-grant and R&D funds), Neuro Sweden, Bissen Brainwalk Foundation, Marcus and Marianne Wallenberg Foundation, the Swedish Society for Medical Research and the Swedish Society for Medicine (SLS-726341). The funding agencies did not influence the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the abstract; and the decision to submit the abstract for presentation at ECTRIMS.

Akshai Parakkal Sreenivasan: nothing to disclose. Aina Vaivade: nothing to disclose. Joachim Burman: nothing to disclose. Ola Spjuth: nothing to disclose. Kim Kultima: nothing to disclose.