

Comparative Efficacy of Double-Filtration Plasmapheresis Versus Intravenous Methylprednisolone in Acute Attacks of Neuromyelitis Optica Spectrum Disorder: A Prospective Cohort Study

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STROBE Checklist for Cohort Studies

This checklist is completed for the manuscript "Comparative Efficacy of Double-Filtration Plasmapheresis Versus Intravenous Methylprednisolone in Acute Attacks of Neuromyelitis Optica Spectrum Disorder: A Prospective Cohort Study".

Item No.	STROBE Item	Location in Manuscript	Response/Description
1	Title and abstract Indicate the study's design with a commonly used term in the title or the abstract	<i>Title, Abstract</i>	Title: "Prospective Cohort Study"; Abstract: "prospective single-center cohort study"
2	Abstract Provide in the abstract an informative and balanced summary of what was done and what was found	<i>Abstract</i>	Abstract includes objectives, methods, results, and conclusions
3	Introduction Explain the scientific background and rationale for the investigation being reported	<i>Introduction</i>	Background and rationale provided in Introduction paragraphs 1-2
4	Introduction State specific objectives, including any prespecified hypotheses	<i>Introduction, last paragraph</i>	"This study aimed to directly compare..."; hypotheses clearly stated
5	Methods Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	<i>Methods: Design, Study subjects</i>	Single-center study at Renji Hospital; dates: Nov 2017 - May 2024
6	Methods Give the eligibility criteria, and the sources and methods of selection of participants	<i>Methods: Study subjects</i>	Inclusion and exclusion criteria clearly defined
7	Methods Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers	<i>Methods: Observational and outcome measures</i>	Primary outcome: Δ EDSS; secondary outcomes defined; confounders addressed in statistical analysis
8	Methods For each variable of interest, give sources of data and details of methods of assessment	<i>Methods: Observational and outcome measures</i>	EDSS, mRS, laboratory parameters clearly described
9	Methods Describe any efforts to address potential sources of bias	<i>Methods: Statistical analysis</i>	Multivariable regression used to adjust for confounders

10	Methods Explain how the study size was arrived at	<i>Methods: Statistical analysis</i>	"Given NMOSD's rarity, the sample size (N = 146) was determined by available cases..."
11	Methods Explain how quantitative variables were handled in the analyses	<i>Methods: Statistical analysis</i>	Continuous variables expressed as mean $\pm$ SD or median (quartiles) as appropriate
12	Methods Describe all statistical methods, including those used to control for confounding	<i>Methods: Statistical analysis</i>	All statistical methods clearly described, including regression models
13	Methods Describe any methods used to examine subgroups and interactions	<i>Methods: Statistical analysis</i>	Subgroup analyses described; interaction term between treatment and baseline EDSS included
14	Methods Describe any sensitivity analyses	<i>Methods: Statistical analysis</i>	Sensitivity analyses for first-attack patients and AQP4-IgG positive patients described
15	Results Report numbers of individuals at each stage of study	<i>Results: Baseline characteristics</i>	Flow of participants through each stage of study clearly reported (n=149 assessed, n=146 analyzed)
16	Results Give reasons for non-participation at each stage	<i>Results: Baseline characteristics</i>	3 excluded due to treatment intolerance (2 DFPP, 1 IVMP)
17	Results Consider use of a flow diagram	<i>Results: Figure 1</i>	Flow diagram provided as Figure 1 (see separate STROBE flow diagram)
18	Results Give characteristics of study participants	<i>Results: Baseline characteristics; Table 1</i>	Demographic and clinical characteristics provided in Table 1
19	Results Indicate number of participants with missing data for each variable of interest	<i>Methods: Statistical analysis</i>	"A complete-case analysis approach was used"; patients with missing EDSS excluded
20	Results Report numbers of outcome events or summary measures	<i>Results sections; Tables 2, 3</i>	Outcome data comprehensively reported in text and tables
21	Results Give unadjusted estimates and confounder-adjusted estimates	<i>Results: Comparative effectiveness</i>	Both unadjusted (OR=0.89) and adjusted estimates (aOR=0.92) reported
22	Results Report category boundaries when continuous variables categorized	<i>Results: Efficacy outcomes of DFPP cohort</i>	Δ EDSS categorized as >0 , 0.5, 1.0, ≥ 1.5 with clear boundaries

23	Results Report any other analyses performed	<i>Results: Subgroup analyses</i>	Subgroup analyses for treatment modalities and AQP4-IgG positive patients reported
24	Discussion Summarize key results with reference to study objectives	<i>Discussion, first paragraph</i>	Key results summarized with reference to initial objectives
25	Discussion Discuss limitations of the study, considering sources of potential bias	<i>Discussion, Limitations paragraph</i>	Three key limitations discussed: single-center design, non-randomized allocation, short follow-up
26	Discussion Give a cautious overall interpretation of results	<i>Discussion, Conclusion paragraph</i>	Interpretation is cautious and appropriate to the study design
27	Discussion Discuss the generalizability (external validity) of the study results	<i>Discussion, Limitations paragraph</i>	Generalizability discussed as a limitation of single-center design
28	Other Give the source of funding and the role of the funders	<i>Funding Statement</i>	Funding sources clearly acknowledged; no role of funders stated (implied no involvement)
29	Other Describe where the protocol can be accessed	<i>Methods: Ethics</i>	Study was not registered as a clinical trial as per Methods section
30	Other Indicate whether a protocol exists and where it can be accessed	<i>Methods: Ethics</i>	Protocol not publicly available but approved by ethics committee