Chronic inflammatory demyelinating polyneuropathy (CIDP) is a rare autoimmune disease affecting the peripheral nervous system.¹

The body's immune system mistakenly attacks and damages the protective layer around the nerves, called the myelin sheath. This damage slows or blocks the nerves from sending and receiving signals.¹



Symptoms include: 1,2



Fatigue



Muscle weakness of the arms or legs



Tingling or numbness (beginning in the toes and fingers)



Loss of reflexes



Abnormal sensations

CIDP is chronic, progressive and may lead to loss of arm and leg function. One of the goals of early diagnosis and proper treatment is to avoid this level of disability.^{1,2}

Understanding CIDP

Difficulties in Diagnosis

CIDP is difficult to diagnose and often requires a process of elimination that can stretch out over many months or even years.^{1,3,4} People may experience missed diagnosis, and up to 50% of people with suspected CIDP are incorrectly diagnosed.^{3,4}

Key reasons for this include:

There is no specific test for CIDP, and the initial symptoms are often non-specific³ People with suspected CIDP may experience nerve issues or other "CIDP-like" symptoms due to a different underlying cause⁴ CIDP can be confused with other diseases affecting the nervous system, such as multiple sclerosis, amyotrophic lateral sclerosis and Guillian-Barré syndrome¹

A New Approach to Treatment

People living with CIDP often require ongoing treatment to avoid disability. Yet, existing treatments may fail to fully meet their complex and variable needs.⁵



At Immunovant, we believe FcRn-targeted therapies may help reframe care for people with CIDP



Evidence suggests that harmful IgG autoantibodies attack the myelin sheath, resulting in peripheral nerve damage⁶



Blocking FcRn reduces harmful IgG autoantibodies and may potentially stop the progression of CIDP

Learn more about our goal of reframing expectations in autoimmune disease at Immunovant.com

IgG = immunoglobulin G

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