# MS Clinical Care Connection

## **Breaking Research News**

**Fall 2013** 

#### **Inside This Issue**

Which drug for which patient?

The case for early treatment

Is "benign" MS really benign?

### **Breaking News**

Health Insurance Exchanges now open, offering new coverage options:

http://main.nationalmssociety.or g/site/R?i=1fwrUMNM9\_45UZkH kVd8gA

# Wheeled Mobility Resources

Seating and Mobility Evaluations:

http://main.nationalmssociety.or g/site/R?i=VuDqPUkSjBKi63saC 8JWLw

Talking about Wheeled Mobility: http://main.nationalmssociety.or g/site/R?i=8lOOiWHRfj33rbZkifUNw

Customized Wheeled Mobility: http://main.nationalmssociety.or g/site/R?i=Awul6yyAgeAsRr6O GI\_cHQ

### For patients:

How to Choose the Mobility
Device that Is Right for You:
<a href="http://main.nationalmssociety.org/site/R?i=MfoFaRjR-">http://main.nationalmssociety.org/site/R?i=MfoFaRjR-</a>
ILkmJc9e4J2aQ

With 10 MS disease-modifying agents currently available, new options expected within the next few months (see our Summer issue: <a href="https://www.nationalMSsociety.org/clinicalcareconnection">www.nationalMSsociety.org/clinicalcareconnection</a>) and several more in the research pipeline, treatment decisions are becoming increasingly complex. New research presented at the 2013 ECTRIMS meeting supports early treatment but clinicians and scientists debate which MS treatments to use – and when.

# Which drug for which patient?

Most MS patients are started on so-called "platform drugs" (beta interferons and glatiramer acetate), but some clinicians advocate for earlier, more aggressive treatment. As more medications become available, the debate grows around how to treat the disease most effectively: <a href="http://main.nationalmssociety.org/site/R?i=UbQdRGib3sc7lt4WTE30yw">http://main.nationalmssociety.org/site/R?i=UbQdRGib3sc7lt4WTE30yw</a> (Requires Medscape login.)

## The case for early treatment

With growing evidence of inflammation and tissue loss very early in the MS disease process, early treatment is supported even in patients with few apparent symptoms.

Giancarlo Comi, MD (Department of Neurology, Università Vita-Salute San Raffaele, Milan), discusses the matter at the plenary session of this year's ECTRIMS meeting in this comprehensive and enlightening webcast: <a href="http://main.nationalmssociety.org/site/R?i=KPw3uBqpz\_Ir6pCCOyBSzw">http://main.nationalmssociety.org/site/R?i=KPw3uBqpz\_Ir6pCCOyBSzw</a> (Requires registration; search for "plenary" + "Giancarlo Comi".) His takeaway message: "Treat immediately (as soon as you are confident of the diagnosis) and treat adequately (selective induction)."

#### Is "benign" MS really benign?

Studies indicate that many patients initially diagnosed with "benign" MS will go on to develop significant disease:

http://main.nationalmssociety.org/site/R?i=AYLxwh1xE2YpKuJknQhcoA

Even in people with few locomotor symptoms early in the disease course, cognitive impairment and fatigue are common – reinforcing the importance of early treatment and cautioning against use of the term "benign."

#### Free mobile app for healthcare professionals:

http://main.nationalmssociety.org/site/R?i=\_3\_dwJWfSfDG6Z4rBCwcSw - now including symptom management - for iPhone, Droid and Windows Phone. App production made possible by Allergan, Bayer HealthCare, Novartis and Questcor Pharmaceuticals, Inc.

