



Welcome to today's Webinar:

Disease Modifying Medication in Multiple Sclerosis

Your Presenter is Jane Bridgman
Your Facilitator is Andrea Salmon

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Acknowledgement



We acknowledge and pay respect to the traditional custodians past and present on whose lands we meet today.

We acknowledge the deep feelings of attachment and the relationship of Aboriginal people to country and respect the cultural authority of the elders in each community.

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Informed Choice

The symptoms of MS vary from person to person.
A person's symptoms of MS vary over time.
Every person is an individual and requires a personalised assessment and management plan.
Individuals should seek further advice regarding the relevance for their situation by contacting MS Connect on 1800 042 138.

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Introduction to Presenter



Jane is Registered Nurse with 6 years' experience in disability and aged care, progressive neurological conditions and primary healthcare. Jane is also an internationally certified MS Nurse and works as an MS Nurse Advisor.


The MS Nurse Advisor service is available for clients, carers, family members and health professionals who may have queries about multiple sclerosis, symptoms, medications and general wellbeing.

If you would like to speak with an MS Nurse Advisor, contact MS Connect on 1800 042 138. MS Nurse Advisor appointments are available by phone.

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Overview

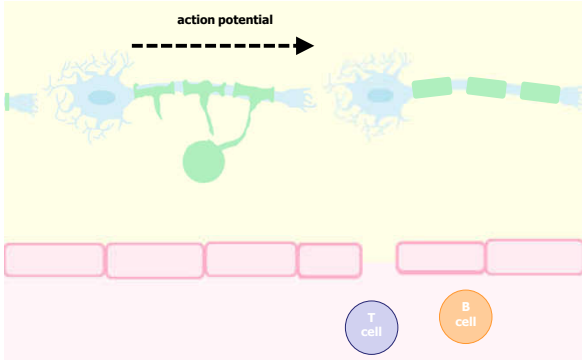



- Pathophysiology
- Disease modifying therapy
- Benefits and Risks
- When to treat
- Process
- Overview of drugs
- Side effects
- Decision making

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What happens in MS?



The diagram illustrates a neuron with an action potential moving along its axon. Below the neuron, a layer of pink cells is shown, with a T cell (blue circle) and a B cell (orange circle) positioned near the base of the neuron.

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Disease modifying therapy (DMT)





- Group of medications used in the treatment of MS
- Oral, injectable or intravenous
- Used in a preventative way
- Usually over long term
- Interrupt the process that causes new damage
- Immunomodulators = regulate the immune system
- Immunosuppressive = suppress the immune system


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Differences in MS treatment

Strategy	Slow disease progression	Minimise symptoms
Disease modifying therapy	✓	✗
Symptom management	✗	✓
Brain healthy lifestyle	✓	✗









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Benefits and Risks

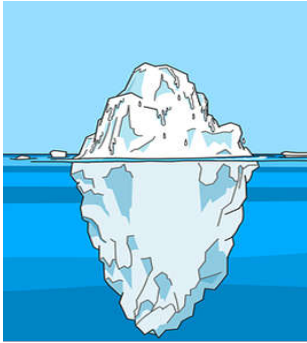


Benefits:

- Preventing further damage
- Fewer relapses
- Less severe relapses
- Fewer, smaller or no new lesions
- Works on visible activity
- Works on silent activity

Risks:


- Side effects



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Efficacy: how well the drugs work




Category	1.1	1.2	2.0
Reduces relapses by	One third (30%)	One half (50%)	Two thirds (70%)
Drugs	Avonex	Tecfidera	Tysabri
	Betaferon	Gilenya	Ocrevus
	Plegridy	Mavenclad	Lemtrada
	Rebif		
	Copaxone		
	Aubagio		


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When is treatment recommended?



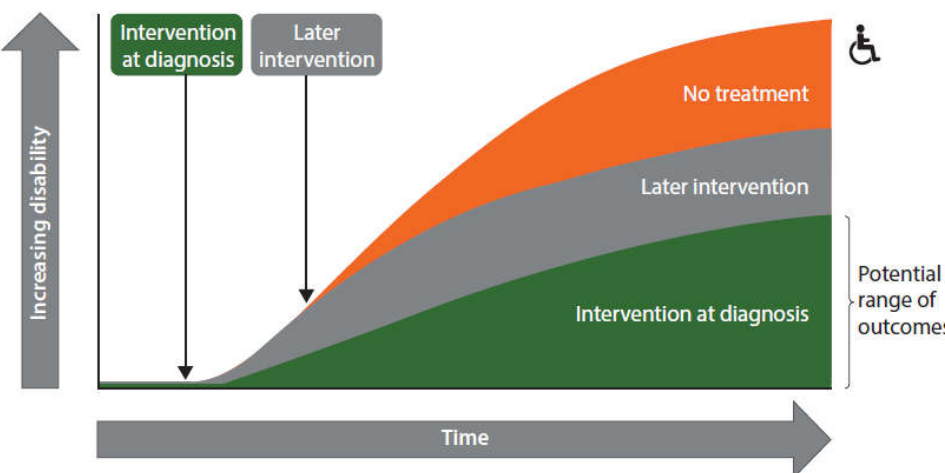

Early treatment with a disease modifying therapy (if appropriate) = Better long term outcomes



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Brain Health: time matters!



Increasing disability

Intervention at diagnosis

Later intervention

No treatment

Potential range of outcomes

Time

Source: Brain Health

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Process of starting medication

- Determine MS classification
- Discussion options
- Pre-treatment screenings, such as:
 - MRI (if not recently done)
 - Blood & urine tests
 - Vaccinations: such as chicken pox, flu or pneumococcal
 - Pap smear
 - Skin checks
- Start treatment
- Review side effects & efficacy
- Monitoring: MRI, blood test, pap smear, skin cancer

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MS

Tysabri

- RRMS
- Infusion, every 4 weeks
- Selective immunosuppressant
- Category 2.0 reduces relapses by two thirds (70%)
- Works by preventing lymphocytes crossing the blood brain barrier
- Common side effects: headache, dizziness, itchy skin rash, increased risk of infections
- Uncommon side effect: PML
- Monitoring during treatment: pre-infusion obs, 6 monthly JCV testing

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Ocrevus
MS

- RRMS
- PPMS (not PBS listed)
- Category 2.0 reduces relapses by two thirds (70%)
- Pulsed immune reconstitution therapy
- Selective immunosuppressant
- Intravenous infusion
- Works by destroying certain white blood cells
- Common side effects: infusion related reactions, infections, herpes infection (cold sore or shingles)
- Less common side effects: depression

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Lemtrada
MS

- RRMS
- Immune reconstitution therapy
- Intravenous Infusion
- Selective immunosuppressant
- 2 treatment courses, 12 months apart
- Category 2.0 reduces relapses by two thirds (70%)
- Works by killing immune cells and allowing them to grow back
- Common side effects: infusion reactions, infections, thyroid disorders, rash
- Less common side effects: blood clotting disorder, kidney & thyroid problems, increased liver enzymes
- Monitoring: monthly blood & urine tests for 4 years after treatment
- Lifestyle changes: listeria aware diet

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Gilenya



- RRMS
- Oral capsule, 1 per day
- Category 1.2 reduces relapses by one half (50%)
- Maintenance therapy
- Selective immunosuppressant
- Works by stopping lymphocytes from leaving the lymph nodes
- Common side effects: headache, influenza, infection, diarrhea, back pain, abnormal liver enzyme levels and coughing.
- Less common side effects: breathing difficulties, basal cell carcinoma, increased risk of infection including isolated cases of cryptococcal meningitis and macular oedema

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Tecfidera



- RRMS
- Take 1 capsule, twice a day, with food
- Category 1.2 reduces relapses by one half (50%)
- Maintenance therapy
- Immunosuppressant
- Works by inhibiting immune cells and protecting brain and spinal cord
- Common side effects: flushing, diarrhea, nausea and abdominal pain
- Less common side effects: more severe gastrointestinal side effects, effects on the kidneys and liver, reduced white blood cell counts.
- Very uncommon: progressive multifocal leukoencephalopathy (PML)

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Mavenclad

- RRMS
- Immune reconstitution therapy
- Selective immunosuppressant
- Oral tablet, dosed as per body weight
- Years 1 & 2: taken for 4 or 5 days in week 1 and week 5
- Years 3 & 4: no treatment required
- Category 1.2 reduces relapses by one half (50%)
- Works by reducing number of destructive immune cells in circulation
- Common side effects: cold sores, shingles, skin rashes, increased viral infections
- Less common side effects: reduced white blood cells

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Mayzent

- SPMS
- PBS listed from November 1st 2020
- Maintenance therapy
- Oral tablet, one per day
- Selective immunosuppressant
- Genetic test required to determine dose
- Works by stopping lymphocytes from leaving the lymph nodes
- Common side effects: headache, increased infections, high blood pressure, abnormal liver test results,
- Less common side effects: tremor, meningitis, increased risk of skin cancers

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Aubagio



- RRMS
- Oral tablet, taken once daily
- Maintenance therapy
- Selective immunosuppressant
- Category 1.1: reduces relapses by one third (30%)
- Works by stopping immune cells from dividing, resulting in less cells
- Common side effects: hair thinning & loss, nausea, diarrhoea
- Less common side effects: decrease in blood platelets, peripheral neuropathy

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Copaxone




- RRMS
- Immunomodulator
- Maintenance therapy
- Category 1.1: reduces relapses by one third (30%)
- Works by acting as a chemical decoy which diverts an immune attack away from your myelin
- Common side effects: injection site reactions, lipoatrophy, depression, anxiety
- Less common side effects: blood cell changes, extra heart beats, thyroid changes, immediate post injection reaction (IPIR)

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Interferons: Avonex, Betaferon, Rebif & Plegridy




- RRMS:
- Immunomodulator
- Maintenance therapy
- Category 1.1: reduces relapses by one third (30%)
- Works by reducing inflammation and immune response
- Common side effects: flu like symptoms, injection site reactions
- Less common side effects: changes in menstruation, liver abnormalities

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Which drug for which types of MS?



	RRMS	SPMS	PPMS
Avonex	Betaferon	Mayzent	Ocrevus
Plegridy	Copaxone		
Rebif	Tecfidera		
Gilenya	Mavenclad		
Aubagio	Tysabri		
Ocrevus	Lemtrada		

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Managing Side Effects MS

Know what to expect & what to do about it:

- What are the commonly reported side effects?
- What should you do if you experience them?

Don't be afraid to ask questions, seek clarification & get further information:

- MS Nurse
- Neurologist
- GP
- Pharmacist
- Patient Support Program

Seek regular reviews:

- Should the side effects have subsided by now?
- What else can I do to minimise the side effects?

REPORT A SIDE EFFECT

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Changing Medication MS

When do I need to change my MS medication?

- New lesions or relapses
- Worsening disease
- Side effects
- Lifestyle changes
- Other changes in health
- Better options

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MS

Decision making

Things to consider:

- Likely disease course
- Treatment goals
- Health conditions
- Values & beliefs
- Lifestyle
- Access to healthcare
- Side effects
- Monitoring requirements
- Future plans

Vote:

- 1 Least worst
- 2 Medium worst
- 3 Most worst

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Resources

- **Reputable**
- **Current**
- **Specific to your situation**

UK based MS Trust: <https://www.mstrust.org.uk/>

MS Research Australia: <https://msra.org.au/>

MS Clinical Trials Network: <https://mstrials.org.au/>


MS longitudinal study: <https://msra.org.au/amsls/>

MSRA: Adapting Your Lifestyle: A Guide For People With MS.
<https://msra.org.au/modifiable-lifestyle-guide-2020/for-people-with-ms/>

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Contacts and Questions




Our team of MS Nurse Advisors are available Monday to Friday

Contact MS Connect on 1800 042 138 or at msconnect@ms.org.au

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MS Connect



10 reasons to call us:

1. Up-to-date, evidence based information about multiple sclerosis
2. Expert advice on managing symptoms
3. Information about minimising the impact of multiple sclerosis
4. Support for people who are newly diagnosed
5. Information about treatment options
6. Education programs
7. Connections to other people living with multiple sclerosis
8. Referrals to appropriate services in your area
9. Extra support for you and your family
10. Respite options to give families short-term breaks



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Peer Support MS

- ❖ 1:1 Phone Support
- ❖ Face to Face groups
 - 2 in the ACT,
 - 9 in Tasmania,
 - 17 in NSW and
 - 40 in Vic
- ❖ Telegroups
 - Currently running 12 telegroups
- ❖ Facebook groups
 - 3 groups – for people living with MS
 - for carers
 - for young carers – up to 25 years of age



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Get Your Act Together MS

- Online Tool – designed to help you better manage your multiple sclerosis symptoms
- Focuses on some of the common symptoms of MS – emotions, fatigue, continence, cognition, pain and heat sensitivity
- Designed for people living in the ACT but includes useful information for all people living with MS
- Complete the tool to receive a personalized report (listing services, resources, tips etc)

Visit www.ms.org.au and search Get Your Act Together

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Employment Support Services

The MS Employment Support Service (ESS) is the only MS specialist employment service for people living with multiple sclerosis in Australia that can help you succeed at work, whether that is staying in your current job or finding new employment.

MS Connect PH 1800 042 138



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Registered NDIS Provider

MS is a registered NDIS provider in NSW, ACT, Vic and Tas and is approved to provide:

- Assistance with 'Access Request Forms', Access rejections and pre-planning
- Support Coordination – assistance to help make your plan active
- Plan Management
- Short term accommodation (Vic)
- Group activities – yoga, dance for health, exercise (NSW)
- Exercise Physiology (NSW)
- Specialist Continence Assessment (Vic)
- Occupational Therapy (NSW and Vic)
- Physiotherapy (NSW)

Want to learn more?
Please call
MS Connect
1800 042 138

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My Aged Care 

My Aged Care is an Australian Government initiative, website and phone line to help you find about aged care services.

Available to people who are 65 years of age and over.

Why Contact My Aged Care?


- ✓ Information
- ✓ Assistance in mapping out your needs
- ✓ An assessment for further supports

Phone: 1800 200 422 Free call Australia wide

Website: <https://www.myagedcare.gov.au>

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Thank you 

MS Connect
1800 042 138
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