As the new year progresses, June Halper, Executive Director of the Consortium of Multiple Sclerosis Centers (CMSC), reports that the organization has embarked on a busy slate of activities.

A record number of abstract applications have already been received for the second joint meeting of the CMSC and the Americas Committee for Treatment and Research in MS (ACTRIMS), “Teamwork, Trends, and Technology: New Solutions in Multiple Sclerosis,” to be held in Atlanta, Georgia, from May 27-30, 2009. Plans for the dissemination of the results of three recent CMSC Consensus Conferences are also underway. Areas of focus include imaging protocols and magnetic resonance imaging (MRI) clinical guidelines for MS, the treatment of primary progressive disease, and tools and competencies for rehabilitation professionals. These consensus results will be made available through publications and web-based updates and tools, as well as a series of visiting professor programs.

According to Ms Halper, “Although the CMSC is involved in many educational efforts, all share common objectives: addressing current and future best practices, identifying gaps in education, and building competencies among our membership.”

Thanks to the generous contributions of corporate supporters, individual CMSC members, and a special funding challenge met by the CMSC Board of Governors, the Foundation of the CMSC (FCMSC) is working to support the mission of the CMSC and advance the growth and development of current professionals and the MS workforce of the future.

Recently, CMSC member neurology programs across the United States and Canada put out calls for applications to encourage residents and neurology fellows to apply for annual meeting scholarships. These scholarships enable physicians in training to attend specialized MS courses at the 2009 Annual CMSC Meeting. A similar call for applications encourages CMSC member nurse

(Continued on page 2)
practitioners and physician assistants to apply for a limited number of annual meeting scholarships.

The 2009 application process has begun as well for FCMSC Summer Research Scholarships. CMSC Member Center research program directors may apply to mentor medical students for 2-month summer research projects. These projects provide excellent opportunities for students to gain exposure to and build interest in MS, and encourage the development of professional mentorships crucial to committed, impassioned, and empowered MS researchers and clinicians of the future. Details will also be announced soon regarding the continuation of the MS Rehabilitation Fellowships, which provide intensive additional training for licensed rehabilitation specialists already working in the field of MS.

For more details, deadline dates, and individual stories of 2009 students and their projects, please visit the FCMSC website, www.cmscfoundation.org, or contact the CMSC office at 1-888-MS-CURES.

How can you help? Please join your colleagues—members of the only interdisciplinary professional organization dedicated to MS—in building the foundation for the future of quality MS care through your personal support of FCMSC initiatives.

Tell us what you think

We want to hear from you. We welcome your comments and suggestions, as well any information on meetings and studies. Please write to the editors of MS Exchange at:

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GLOBAL SUPPORTERS OF MS EXCHANGE INCLUDE:
Educational Programs Teach Patients To Explore Their Capabilities With MS

Ruth Memoli, CSW, is the Multiple Sclerosis (MS) Wellness Coordinator at the Linda Cardinale Multiple Sclerosis Center at CentraState Medical Center in Freehold, New Jersey. In the past year, she coordinated an ongoing educational program for MS patients to help them develop and explore the boundaries of what they can do with MS, rather than focusing on their limitations.

The MS Wellness Center runs cycles of 12-week programs, with about 12 people per class. The curriculum changes weekly, depending on the needs of the group, and covers a range of topics including symptom management and modifying basic activity, as well as exercises such as yoga, tai chi, and aquatics. “We also invite staff nutritionists from the Health Awareness Center to come in twice during the 12 weeks to lecture on nutritional guidelines, such as eliminating bad fats and sugars from the diet,” Ms. Memoli says.

Other health and wellness instructors include physical therapists, personal trainers from the CentraState Fitness and Wellness Center, and RNs. Attorneys teach sessions on disability, Medicare, Medicaid, and trusts. “We also have a counselor come in and discuss issues with intimacy, depression, and communication,” she notes.

Each session is run on Thursdays from 9 a.m. to 2 p.m. (see box for sample schedule). Usually, a class is 45 minutes long, with about five classes per session. Patients attend all 60 sessions. The feedback has been fabulous, reports Ms. Memoli. “We’ve had extremely positive results.” Since January of 2008, about 40 patients have gone through the program, which Ms. Memoli hopes to continue with support from corporate foundation grants.

Ms. Memoli explains that they use a tool called “Focus on Therapeutic Outcomes” to measure the success of the educational program. Each participant takes the survey at the beginning and the end of the 12 weeks, so the program coordinators can gauge patient progress in physical abilities, somatization, functional ability, and mental ability. “The test is pretty inclusive,” she says.

In planning ahead, she evaluates what she has learned from the previous session. “We’re starting to branch off a little,” she observes. “This year I ran a separate scuba class for people with MS. We had seven participants and used the pool at the center. I’m also starting an aquatics class weekly.”

The program continues beyond the initial 12 weeks with a weekly graduate program, with two 1-hour sessions on Thursday afternoons in tai chi and strength, balancing, and conditioning. “I often say I have the best job in this hospital. It’s wonderful to see the progress these patients make,” Ms. Memoli says.

### SAMPLE MS WELLNESS PROGRAM SCHEDULE

**Session IV, Week 1**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Instructor</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:00 am – 9:10 am</td>
<td>Welcome</td>
<td></td>
</tr>
<tr>
<td>9:10 am – 10:00 am</td>
<td>Determining Appropriate Levels of Activities</td>
<td>Brian Mason, PT, DPT, Clinical Director, Rehabilitation Services</td>
</tr>
<tr>
<td>10:00 am – 10:45 am</td>
<td>Tai Chi</td>
<td>Greg SanAndres, OT Multiple Sclerosis Certified Specialist</td>
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<tr>
<td>10:45 pm – 11:00 am</td>
<td>Break</td>
<td></td>
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<tr>
<td>11:00 am – 12:00 am</td>
<td>Symptom Management</td>
<td>Michele Emmons, RN, BSN, Clinical Coordinator MS Center</td>
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<tr>
<td>12:00 pm – 1:00 pm</td>
<td>Lunch</td>
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<tr>
<td>1:00 pm – 2:00 pm</td>
<td>Conditioning</td>
<td>Diane Baum, Personal Trainer, CentraState Fitness &amp; Wellness</td>
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</tbody>
</table>

Homework: “To me, wellness means...”
The Foundation of the CMSC (FCMSC) has made a strong commitment to supporting the work of young professionals who are involved in research that promotes the further development of multiple sclerosis (MS) care.

Two prominent awards that are given at the Annual CMSC meeting include the Labe C. Scheinberg Award for outstanding work in the field of neurorehabilitation, and the Whitaker Prize for MS Research, which goes to young scientists working to expand our knowledge of MS disease pathophysiology, immunology, genetics, and/or epidemiology.

Dr. Labe Scheinberg was one of the earliest advocates for bringing together professionals from many disciplines to address MS. In 2008, the Labe Scheinberg Awardee was Jose A. Cabrera-Gomez, MD, PhD, FAAN, from the International Neurological Restoration Center in Havana, Cuba, for his work on “Intensive Neurorehabilitation Program One to One with a Multi-disciplinary Team for Persons with Multiple Sclerosis. A Phase II Clinical Trial.” This award will be partially funded over the next 3 years through a grant from members of Dr. Scheinberg’s family.

The 2008 Whitaker Prize was awarded to Laura M. Piccio, MD, PhD, from Washington University School of Medicine in St. Louis, Missouri, for her research on “Identification of a Novel Soluble TREM-2 Protein in the Cerebrospinal Fluid and Its Association with Multiple Sclerosis and CNS Inflammation.” This award was created in honor of John Whitaker, MD, a pioneer and role model in MS research who focused attention on the immunological and chemical aspects of neurological and neuromuscular disorders.

**Fellowship Programs**

FCMSC MS Rehabilitation Fellowships are training programs for rehabilitation professionals working in physical therapy, occupational therapy, and speech/language pathology with an interest in MS. Susan Bennett, PhD, Program Director of the FCMSC MS Rehabilitation Fellowships, explains that “participation in the program is designed to foster the development and enhancement of rehabilitation and comprehensive care in the clinical settings of the participating fellows.” In this way, the CMSC not only trains the MS care professionals of the future, but also helps to spread the concept of a comprehensive approach to lifetime MS management to new therapeutic groups already working with these patients.

The program, which is sponsored by an educational grant from Acorda Therapeutics, currently supports a total of nine 1-week fellowships mentored at MS center sites at the Heuga Center in Colorado, the Jacobs Neurological Institute at the University of Buffalo, New York, and the MS Center in Calgary, Alberta. As Program Director, as well as a site mentor at the Jacobs Neurological Institute, Dr. Bennett will lead the MS Rehabilitation Fellows team in presenting their results at the 2009 CMSC Annual Meeting in Atlanta, Georgia.

For more information go to www.cmscfoundation.org
The International Organization of MS Nurses (IOMSN) has been growing exponentially, and 2008 was the most active year in our history in terms of membership growth, international recognition, and programs.

Our activities are tailored to the needs of our membership, and I am proud to report that this organization truly represents the full range of our members’ needs and experience.

One of our major initiatives was a series of regional 1-day meetings developed by the IOMSN Education Committee. These meetings provided continuing nursing education credit for attendees, highlighted local speakers, and received administrative support from the IOMSN office.

The regional meetings provide outreach to health care professionals who are unable to attend national or international meetings. The six meetings were extremely well attended, the evaluations were outstanding, and we continue to receive requests to schedule programs in other regions of North America. Bayer HealthCare Pharmaceuticals, Inc. has long recognized the role of MS nurses and it is through their support that we continue this program. In 2009, we have scheduled nine accredited regional nursing programs throughout the United States, so please visit www.iomsn.org for the complete schedule of events and contact information.

We also wish to thank Nurse Practitioner Alternatives, Inc. for their collaboration on the development of these programs and for providing valuable nursing credits for attendees.

A Big Year Ahead

A major event in 2009 will be the full IOMSN Board Meeting at the end of February to revise our strategic plan. We hope to identify new, expanded goals, based on discussions with Board members and committee chairs, to set the stage for the next 3-5 years of the IOMSN.

Our new plan will take into account the changing economic times and how they affect multiple sclerosis (MS) care. We also plan to continue to review and update guidelines for patient care. Maintaining awareness and interest in MS worldwide will remain a major focus.

Finally, we are reaching out to some of our global affiliates by developing opportunities to partner with related industries and associations. Recently, we held discussions with the President of the American Association for Spinal Cord Injury Nurses (AASCIN) about the potential for coordinating a joint meeting within the next 2 years, an event we hope to make happen.

We are looking forward to accelerated growth of the IOMSN in 2009, as we become a global organization with strong regional ties, and continue to develop the depth and breadth of our collective clinical experience with MS.

— Amy Perrin Ross, APN, MSN, CNRN, MSCN
President, IOMSN
In addition to her duties as President of the Consortium of Multiple Sclerosis Centers (CMSC), Colleen Harris is co-chair, along with Beverly Layton, of the Education Committee for the International Organization of MS Nurses (IOMSN). This past year, Ms. Harris developed a program of half-day and dinner meetings on multiple sclerosis (MS) care that could be held in any region. Here, she reports on the overwhelming success of the first run of meetings.

Regional nursing updates
- Austin, Texas on April 26th hosted by Lori Mayer
- Orange, New Jersey on April 10th hosted by Kathy Costello
- Malvern, Pennsylvania on May 10th hosted by Dorothea (Dottie) Pfohl
- Nashville, Tennessee on September 27th hosted by Julie Coleman
- Helena, Montana on October 25th hosted by Pat Loge
- Milwaukee, Wisconsin on October 25th hosted by Cheryl Blaschuk

Dinner programs
- Augusta, Georgia on Sept 4th hosted by Shelia Mobley
- Detroit, Michigan on September 25th hosted by Deena Lisak
- Minneapolis, Minnesota on October 2nd hosted by Cindy Phair
- Salt Lake City, Utah on October 18th hosted by Julia Klein

We have had a very busy year with educational events in 2008. Turnout was excellent, and the evaluations were out of this world. So far, we have held meetings in the following locations:

Innovative approach draws a large audience to a dinner meeting in Detroit

It is always difficult to get people to attend dinner meetings, according to Deena Lisak, RN, MA, MSCN, a nurse educator who is now retired from the Wayne State University Multiple Sclerosis (MS) Clinic, and coordinator of the September 2008 regional dinner meeting in Detroit, Michigan. Twenty-three people came out, despite a cold night, when usually there would have been only five or six attending, she observed.

“This was the first time we ever had so many people attend one of these dinners,” says Ms. Lisak, “and I think it was because we had Fred Foley speaking.” Dr. Foley addressed the audience on Cognitive Issues in MS, a subject that is of great interest to MS professionals. Ms. Lisak sent around his biography to medical groups with MS patients in their practices, which she felt influenced their decision to attend, as Dr. Foley is so well known for his ability to hold an audience. “He jokes, and brings everything down to their level,” she says. “There was a lot of audience participation.”

Dinner meetings have developed a reputation over time for being stale and boring, and predicting attendance can be difficult. The harsh weather in Michigan contributes to the challenge and so the time of year a meeting is held is important. They chose a date in September, which was chilly but did not pose any significant driving hazards.

Ms. Lisak worked to promote and execute a different kind of meeting, and her efforts paid off. She chose a nice steak restaurant for the location, which was an upgrade from the standard venue. She asked the pharmaceutical representatives she knew for the names and emails of all the nurses in the state. She put together materials, including Dr. Foley’s biography, and sent them around, and then followed up with everyone—multiple times. “I visited them and called them all a million times. I also got a motel room for one of the nurses,” she says. “If you can help attendees find a room rate that’s reasonable, it really encourages them to travel a longer distance.”

Ms. Lisak was very pleased with the level of attendance. “I was really excited by the response,” she says.
In September of 2007, Pat Loge, FNPC, CNM, MSCN, a family nurse practitioner at St. Vincent’s Healthcare Neuroscience Center in Montana, hosted one of the pilot Regional Nursing Update meetings in the Multiple Sclerosis (MS) Educational Series in Helena, Montana, along with Dr. Roger Williams, a staff neurologist. More than 60 health care professionals attended this first meeting, which was so well received that Ms. Loge hosted a second meeting in Billings, Montana, in October of 2008. More than 90 people attended the second gathering, which achieved a greater mix of allied health care professionals and nurses. “We really had such positive responses to the conference on the questionnaires. There was rarely a score under ‘5,’ which was excellent,” says Ms. Loge.

The meetings focused on similar topics, including the epidemiology and diagnostic criteria for MS, the chronic nature of the disease as it affects family and personal relationships, treatment options, overcoming difficult symptoms such as bowel and bladder issues, and finally, what the future holds. The topics were modified after the Helena meeting to more specifically meet the interests of the attendees of that region.

As Ms. Loge explains, “Montana is an area with a high prevalence of multiple sclerosis. The disease-modifying therapies (DMTs) are of great interest, and we are especially interested in learning how they are used versus the risks. And while there’s an understanding of the chronicity of the disease and how it affects quality of life if not treated early, I think the health care providers here had little idea how expensive these DMTs were,” she says.

Other interesting topics discussed at the meetings included the first signs and symptoms of MS, and issues affecting the patient’s lifestyle patterns. “Colleen [Harris] presented cases of chronically ill patients and showed how their disease affected the whole family,” which, as Ms. Loge points out, helped to clarify the importance of symptom management in improving quality of life for MS patients.

The meetings highlighted the need for further MS education. “We found from the conferences that people had a lot of misconceptions, even the nurses. The majority of health care providers view an MS patient as someone in a wheelchair or walking with a cane, although most MS patients are active and pursuing careers and family lives,” she explains. “It really helped the nurses to understand MS and know how to deal with it in the future.”

Ms. Loge feels that the response from the two initial meetings was strong enough to suggest the need for yet another meeting in the northern part of the state, perhaps near the Canadian border, which could also include a discussion of differences in the Canadian versus the US approach to MS care. Additionally, former attendees expressed an interest in hearing more about new developments, such as vitamin D research.

Ms. Loge points out that the meetings also provided a unique networking opportunity for health care workers who deal with MS. “I was delighted we were able to develop relationships with the attendees, and keep these relationships going beyond the meetings,” she says.
The International Organization of MS Nurses (IOMSN) President Amy Perrin Ross was invited to attend the 2008 *MS Trust Annual Conference* held in Leeds, England from November 2nd to 4th. The theme of this year’s conference was “Making it Happen.”

The MS Trust Conference has been going on for 10 years, and this year the organization asked for IOMSN representation as part of a new session called the “Information Zone.” This was an area for educational groups, universities, and organizations like the IOMSN to set up booths so conference participants could speak with their representatives.

To show what our organization does, Ms. Perrin Ross brought IOMSN brochures, copies of the *MS Exchange*, information about the MS Certification examinations, and membership information.

“I was able to meet with nurses not only from rural communities in England, but also from Ireland, Scotland, and Wales as well,” says Ms. Perrin Ross. She observes that many of the nurses in these small rural areas feel isolated and have only limited local resources and support for their daily practice. “We’re excited to connect with them, and to offer them membership that can allow them to interact with other nurses via the internet, enter discussion groups, and get information such as monographs and educational DVDs that are part of the IOMSN membership,” Ms. Perrin Ross continues. “I look forward to having an IOMSN presence at the MS Trust Conference next year, and to expanding into other global regions that need us.”

(Continued from page 6)

All events were sponsored through an unrestricted educational grant from Bayer HealthCare Pharmaceuticals, Inc. and were accredited by Nurse Practitioner Alternatives.

**The Educational Agenda for 2009**

With support from an educational grant from Teva Neuroscience, the IOMSN is sponsoring three educational workshops entitled, “Clinician to Research Coordinator—Making a Successful Leap: Basic Principles of Conducting Clinical Trials.”

The first workshop will be hosted by Ismari Clesson on May 26, 2009 just prior to the CMSC Annual Meeting at the Shepherd Center and Crawford Research Institute Auditorium in Atlanta, Georgia. Two other clinical trial workshops will be scheduled in the fall of 2009, to be held in Birmingham, Alabama, with Beverly Layton as chair, and Detroit, Michigan, to be chaired by Christine Caon.

Continued support from Bayer HealthCare Pharmaceuticals, Inc. has made it possible for additional regional programs to take place in 2009. The following spring events have been scheduled:

- April 18: Kansas City, Kansas, to be hosted by Doug Schell
- April 25: Saginaw, Michigan, to be hosted by Heather Clark
- May 16: Rochester, New York, to be hosted by Eileen Scheid, Cynthia Irish, and Martha Lightfoot

Fall dates will be scheduled in these regions:

- St. Louis, Missouri, to be hosted by Mary Kay Fink
- Augusta, Georgia, to be hosted by Shelia Mobley Wilson
- Waltham, Massachusetts, to be hosted by Linda Guido and Christine St. Laurent
- Lancaster, Pennsylvania, to be hosted by Dorothea (Dottie) Pfohl
- Stony Brook, New York, to be hosted by Jennifer Boyd and Maria Milazzo
- Orlando, Florida, to be hosted by Connie Easterling

— Colleen Harris, RN, MS, MSCN, MSCS
Co-chair of the Education Committee, IOMSN

For more information on dinner meetings, please visit: www.iomsn.org/iomsn_regional_dinner_2009.html.
For more information on regional meetings, please go to: www.iomsn.org/iomsn_regional_meeting_2009.html.
Any practice or institution interested in hosting future meetings please contact Colleen Harris at: colleen.harris@albertahealthservices.ca.
EXAM NEWS

Our congratulations go out to the following candidates who passed the examination for certification in the United States and Canada as MS Certified Specialists (MSCS) in August 2008:

- Amanda K. Barnhart, Colorado, USA
- LaDonna D. Brinson, North Carolina, USA
- Vera Bukonja, New Jersey, USA
- Theresa A. Callender, Florida, USA
- Tracy L. Carrasco, Florida, USA
- Angie N. DeEsch, Pennsylvania, USA
- Vonda L. Ford, Florida, USA
- Susan Golden, Pennsylvania, USA
- Kim L. Hogenson, Minnesota, USA
- Harold B. Hubble, Michigan, USA
- Zoltan L. Kaliszky, Saskatoon, Canada
- Margaret L. Quinn, Florida, USA

Don’t Forget to Register for the Next Examination Sittings!

**2009 Multiple Sclerosis Certified Nurse (MSCN) Examination**

Exam Dates: May 27, 2009 at the Hyatt Regency, Atlanta

May 30, 2009, nationwide

Registration Deadline: April 15, 2009

Fee: $250

For more information: www.ptcny.com/clients/MSNICB/index.html

**2009 Multiple Sclerosis Certified Specialist (MSCS) Examination**

Exam Dates: August 8-22, 2009

Registration Deadline: July 1, 2009

Fee: $250

For more information: www.ptcny.com/clients/MSCS/index.html

For Recertification

MSCN

Applications for MSCN recertification must be submitted at least 3 months prior to expiration date.

**Deadlines:**

- March 28th for May/June certification expiration
- August 29th for November 30th certification expiration

For recertification guidelines, go to: www.msnicb.org/Recertification.htm

MSCS

For those MS certified specialists who obtained certification in 2004, your certification expires on December 31, 2009. If you have not received your recertification package, applications for recertification are available from the Professional Testing Corporation. Please contact the Professional Testing Corporation by phone, fax or on the web:

Professional Testing Corporation
1350 Broadway, 17th Floor
New York, New York 10018
Phone: 212-356-0660, Fax: 212-356-0678

Application packages can also be obtained online at www.ptcny.com.

Guidelines for recertification are available on the CMSC website: www.mscare.org under “for MS Professionals.”

Application deadline submission for those certified in August 2004:

- Recertification by learning activity hours or learning activity and practice hours: September 30, 2009
- Recertification by examination: July 1, 2009 (to write the August exam).

Please note: All applications for recertification received after the above dates will be denied.
An article published online in December 2008, in advance of publication of the Journal of Neurological Sciences, reported on the conclusions of a study by Richard Rudick, MD, of the Mellen Center for MS Treatment and Research at the Cleveland Clinic, in Cleveland, Ohio, and his colleagues. This study found that gray matter atrophy directly correlated with multiple sclerosis (MS) disability as measured by the Multiple Sclerosis Functional Composite (MSFC) but not the Expanded Disability Status Scale (EDSS).

A total of 70 patients with MS or a clinically isolated syndrome (CIS) were monitored over 6.6 years of study with bi-annual magnetic resonance imaging (MRI) to measure changes in mass to the whole brain, and white matter versus gray matter atrophy. The baseline level of whole brain, gray matter, and white matter atrophy predicted an EDSS score >6.0 at the last study visit. Thirty-three percent of patients worsened using the EDSS to measure disability versus 46% who worsened according to MSFC score.

Patients who showed disability progression according to the MSFC showed significantly higher rates of gray matter atrophy compared with patients who maintained stable MSFC scores. White matter atrophy patterns were similar in all patients, regardless of disability progression. Most importantly, atrophy rates did not correlate with progression according to EDSS scores.

The EDSS has been a useful tool for quantifying the amount of disability a patient is experiencing, and helps to measure the rate of disability progression using subjective indicators largely related to ambulation (see graphic). However, in this study, the MSFC far more accurately indicated gray matter atrophy. The study also highlights the poor correlation between MRI evidence and current measures of clinical disability.
New Study Shows MS May Be Predicted on MRI

Exploration of the pathology of multiple sclerosis (MS) recently yielded another important piece of the puzzle when researchers at the University of California, San Francisco (UCSF) MS Center reported in Neurology on their use of magnetic resonance imaging (MRI) evidence as a prognostic indicator for future disease.

MRI evidence is widely accepted in support of a diagnosis of MS in the presence of clinical symptoms, and is used in clinical practice to chart disease progress. This study, however, is the first to suggest that morphological changes in white matter seen on MRI in previously undiagnosed patients indicates a higher than average risk for the development of MS.

A total of 44 subjects (41 female, 3 male) who underwent MRI study with 1.5 or 3.0 Tesla imaging for other neurologic conditions such as migraine headache, vertigo, and for a range of other reasons (e.g., ear pain, angioedema, hypersomnolence, panic attacks, lower back pain), were isolated for the study based on radiologically identified brain abnormalities. The baseline MRIs of all 44 patients showed gadolinium-enhancing lesions that met the Barkhof criteria for dissemination in space. Baseline neurological examination was normal for nearly all patients.

Of the original 44 patients in the cohort, 30 were available for clinical long-term follow-up. Radiologic follow-up, available for 41 subjects, showed progression in 59% of cases, and the presence of a contrast-enhancing lesion on baseline MRI was predictive of dissemination in time on repeat MRIs.

Ten patients of the 30 followed clinically went on to develop a clinically isolated syndrome (CIS) or clinically definite MS (CDMS) within a median time of 5.4 years. These results indicate that the presence of contrast-enhancing lesions on MRI suggestive of demyelination is associated with a higher than normal risk of developing MS.

Lead investigator Daniel Okuda, MD, was interviewed by USA Today shortly after the publication of the journal article. “The significance of the research is that we are capturing MS at a much earlier time frame,” he told the newspaper. He and his colleagues at UCSF identified this early phase in the MS process as a “radiologically isolated syndrome (RIS).”

Numerous studies in recent years have suggested that earlier therapeutic intervention in the disease process can significantly reduce later progression to disability. This latest study further supports this contention, and also provides a significant screening tool to identify those patients at higher risk before they show clinical evidence of MS.

APRIL 23-25, 2009
RIMS 14th Annual Conference
Location: Genoa, Italy
Contact: Peter Feys, PT
Email: peter.feys@faber.kuleuven.be
Website: www.rims.be/

APRIL 24, 2009
2009 Multiple Sclerosis Rehabilitation Symposium: Enhanc-
ing Health Promotion
Location: Pantages Suites Hotel and Spa, Toronto
Contact: Marta Murawiecka, Event Marketing Specialist
Email: murawiecka.marta@torontorehab.on.ca
Website: www.torontorehab.com/education/mssymposium
2009index.html

APRIL 25–MAY 2, 2009
American Academy of Neurology (AAN) Annual Meeting
Location: Seattle, Washington
Contact: American Academy of Neurology
Tel: (800) 676-4226 or (415) 979-2283 (international)
E-mail: aan2009reg@cmrus.com
Website: www.aan.com/go/am

SEPTEMBER 23-26, 2009
The 2009 Congress on Spinal Cord Medicine and
Rehabilitation
Location: Sheraton Dallas Hotel
Contact: American Association of Spinal Cord Injury
Nurses (AASCIN)
Website: www.spinalcordcongress.org/

OCTOBER 11-14, 2009
American Academy of Neurology (AAN) Regional
Conference
Location: Baltimore, MD
Contact: American Neurological Association
Tel: 952-545-6284
Email: ana@llmsi.com
Website: www.aan.com/go/education/conferences

Teva Neuroscience is dedicated to the MS nurse community and has supported scholarships for nurses, educational
programs such as monographs, CE programs, IOMSN dinners, the MS Exchange, and MS Nurse Counseling Points™.
Teva Neuroscience is also proud to say that all of its Shared Solutions Nurses are certified in MS Nursing.