

MS Foundation MasterClass 19 Module 1**16th & 17th May 2024 – Halifax Hall, Sheffield****Day 1 – Thursday, 16th May 2024**

N.B. Cases are for illustration purposes only and may be adapted by the faculty.

09:30 Registration and refreshments**09:45 Welcome**

Dr Wallace Brownlee, consultant neurologist, University College London Hospitals NHS Foundation Trust & honorary academic director, MS Academy

10:15 Diagnosis and differential diagnosis

Dr Wallace Brownlee, Helen Willis, MS clinical nurse specialist, Mid and South Essex NHS Foundation Trust & Dr Christine Longinotti, clinical psychologist, Central London Community Health Care NHS Trust

A 32 year old man attends SDEC with a 1 week history of numbness in the left leg. The symptoms started in the left foot and have gradually spread up to his waist. He is tripping over easily. An MRI scan shows a lesion in the cervical spinal cord

- How does MS first present?
- How can MRI help make a diagnosis of MS?
- When should we do a lumbar puncture?
- What support and education is required in patients with a new diagnosis of MS?
- What are the challenges in adjusting to chronic illness?

12:15 Lunch**13:00 Epidemiology**

Dr Azza Ismail, consultant neurologist, Sheffield Teaching Hospitals NHS Foundation Trust & Daisy Cam, lead MS specialist nurse, Sheffield Teaching Hospitals NHS Foundation Trust

A patient with newly diagnosed MS attends the MS clinic for the first time. She asks if she will end up in a wheelchair?

- What is the natural history of MS?
- What factors are associated with poor prognosis in people with MS?
- How should patients be counselled about long-term prognosis?

The patient has a 5 year old son and is thinking about having another baby. She has questions about her child, breast feeding, other pregnancies, and whether she would pass it on to her children

- How should women with MS be counselled about fertility and family planning?
- What genetic factors are important in MS? Does MS run through families?
- Discussing MS with children

MS Foundation MasterClass 19 Module 1**16th & 17th May 2024 – Halifax Hall, Sheffield****15:00 Refreshment break****15:30 Pathophysiology (1) - progressive MS**

Dr Ghaniah Hassan-Smith, consultant neurologist, University Hospitals Birmingham NHS Foundation Trust, Dr Christine Longinotti & Ruth Stross, head of nursing, Neurology Academy and neurology specialist nurse, Kingston Hospital NHS Foundation Trust

A 46 year old woman has been referred back to the clinic. She had a diagnosis of MS made when she was 27 when she had optic neuritis followed by sensory change in the arm a year later. She has been well until last year when she noticed that her walking has deteriorated and she struggles to walk more than 10-15 minutes before the right leg starts to drag

- What is the difference between MS activity and progression?
- What are the main mechanisms that underpin MS progression?
- When and how should we discuss progression with people with MS?
- Disease-modifying lifestyle: What should we advise patients?
- How should we support patients transitioning to secondary progressive MS?

17:00 Career planning and mentorship

Dr Wallace Brownlee & Ruth Stross

18:00 Sessions close for day 1**19:00 Pre-dinner drinks****19:30 Informal dinner****Day 2 – Friday, 17th May 2024****08:30 Registration opens****09:00 Welcome and day overview**

Ruth Stross

09:05 Symptom management (1) - focus on mobility, spasticity and tremor

Kelly Broome, clinical specialist physiotherapist, University College London NHS Trust

A 55 year old woman with SPMS reports progressive right-sided foot drop. She falls at home every couple of weeks and fractured her wrist last year while taking the bins out.

- What treatments are available to address foot drop?
- What is the role of physiotherapy?
- How does fampridine work?

MS Foundation MasterClass 19 Module 1**16th & 17th May 2024 – Halifax Hall, Sheffield**

- How should we screen for osteoporosis in people with MS?

A 54 year old lady with secondary progressive MS. She has been a wheelchair user for the last 5 years, and can just transfer independently. She is struggling with spasms in her legs. She has tried baclofen, gabapentin and tizanidine and can't get to a dose that helps her symptoms without causing side effects.

- What non-pharmacological measures help manage spasticity?
- What oral medicines are available for managing spasticity?
- When should patients be offered Sativex?
- When should patients be referred for intrathecal baclofen?

62 year old man with secondary progressive MS reports left arm action tremor for the last 4 years. Over the last year this has significantly worsened, has started to affect his right arm. He is no longer able to eat or drink without assistance.

- What treatments are available for tremors?
- How can physiotherapy and occupational therapy help with the management of tremors?

11:00**Refreshments****11:30****Disease modifying therapies - MDT meeting (1)**

Dr Rhian Raftopoulos, consultant neurologist, King's College Hospital NHS Foundation Trust & Rachel Dorsey-Campbell, senior lead pharmacist - neurosciences, Imperial College Healthcare NHS Trust

A 27 year old woman with right optic neuritis is diagnosed with MS following an MRI and a lumbar puncture. She is asked to read about the available treatment options on the MS Decisions website but feels overwhelmed.

- Initial treatment of early relapsing MS – escalation vs early intensive treatment?
- What factors are important when selecting disease-modifying therapies?
- What screening investigations and vaccinations should be considered before starting disease-modifying therapy?

A 19 year old man is recovering from a brainstem relapse with double vision and ataxia. Three months ago he had an episode of clumsiness and tremor in the right arm. An MRI of the brain shows three gadolinium-enhancing lesions.

- What is rapidly evolving severe MS?
- How should we select high-efficacy therapies?

A 61 year old woman with MS has noticed gradually worsening fatigue, foot drop in the right leg and bladder problems over the last few years. She hasn't had any relapses since starting treatment with dimethyl fumarate in 2014 and her MRI scan has remained stable. Her EDSS has worsened from 3.5 to 5.5 the last few years.

- What are the indications for Siponimod?
- How do age and comorbidities influence treatment decisions in MS?

MS Foundation MasterClass 19 Module 1**16th & 17th May 2024 – Halifax Hall, Sheffield**

A 42 year old man with a diagnosis of primary progressive MS asks why he is not treated with a DMT? His MS has worsened over the last year and he is only just able to walk 100m unaided (EDSS 5.5). His most recent MRI scan shows no new lesions.

- What is active MS?
- What are the risks and benefits of ocrelizumab in patients with PPMS?

13:30 Lunch**14:30 Relapse management**

Dr David Paling, consultant neurologist, Sheffield Teaching Hospitals NHS Foundation Trust & honorary strategic director, MS Academy & Liz Woodhead, MS clinical nurse specialist, Sheffield Teaching Hospitals NHS Foundation Trust

A 34 year old man with RRMS on treatment with Ponesimod contacts his MS nurse with a 5 day history of numbness in both legs

- What is the difference between a relapse and a pseudo-relapse?
- How should patients be counselled about the risks and benefits of steroids?
- What is the role of plasma exchange in treating relapses?
- How to set up and run an effective MS relapse clinic?

15:30 Patient session

Dr David Paling with local patients: Zoey & Paul

16:30 Mentorship & project, including recording of 2023 project winner

Dr David Paling

17:00 **Final remarks and depart**

Dr David Paling