

15th & 16th May 2025 - Halifax Hall, Sheffield

Day 1 - Thursday, 15th May 2025

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 <u>Diagnosis and differential diagnosis</u>

Dr Wallace Brownlee, Helen Willis, MS clinical nurse specialist, Mid and South Essex NHS Foundation Trust & Dr Christine Longinotti, highly specialist clinical psychologist, Chelsea & Westminster NHS Foundation 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 Gemma Maxwell, consultant neurologist, South Tyneside and Sunderland NHS Foundation Trust & Noreen Barker, MS consultant nurse, University College London Hospitals NHS Foundation Trust

A patient with newly diagnosed MS attends the MS clinic for the first time. She is tearful and 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



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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 was diagnosed with MS at the age of 27 following an episode of optic neuritis. In the last year her walking has gradually worsened 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 Project planning and networking

Dr Wallace Brownlee & Ruth Stross

18:00 Sessions close for day 1

19:00 Pre-dinner drinks

19:30 Informal dinner

Day 2 - Friday, 16th May 2025

08:30 Registration opens

09:00 Welcome and day overview

Ruth Stross

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

Rhian O'Halloran, clinical specialist physiotherapist in MS, Cardiff and Vale University Health Board & Dr Elizabeth Davis, consultant in rehabilitation medicine, Cumbria, Northumberland Tyne and Wear NHS Foundation Trust



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

A 59 year old woman with PPMS 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 find 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?

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

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

11:00 Refreshments

11:30 <u>Disease modifying therapies - MDT meeting (1)</u>

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 has recently been diagnosed with MS following an attack of optic neuritis. Her MS team recommends that she reads the MS Decisions website to learn more about treatment options but she finds this overwhelming.

- 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?



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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 weakness in the right arm. An MRI of the brain shows three gadolinium-enhancing lesions.

- What is rapidly evolving severe MS?
- Selecting high-efficacy therapies?

A 61 year old woman with MS has noticed gradually worsening fatigue, right foot drop in the 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?

A 42 year old man with a diagnosis of primary progressive MS wants to know why he is not treated with 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 the difference between active and inactive 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 2024 project winner

Dr David Paling

17:00 Final remarks and depart

Dr David Paling