

**Tuesday, 30th June 2026**

**15:30 Registration and refreshments**

**16:00 Chairs welcome and introductions**

Dr Maruthi Vinjam, consultant neurologist, Leeds Teaching Hospitals NHS Trust

**16:10 Changing MS diagnostic criteria: implications for your practice**

Dr Linford Fernandes, consultant neurologist, Leeds Teaching Hospitals NHS Trust

**A 34 year old woman attends SDEC with a 5 day history of ascending numbness up to the waist. Her MRI scan shows a lesion in the thoracic spinal cord and a periventricular lesion in the brain**

- How should this patient be investigated further?
- How and when to apply the McDonald criteria to make a diagnosis of MS?
- What is the role of contrast-enhanced MRI, spinal MRI and lumbar puncture in patients with suspected MS?

**16:40 Disease-modifying therapy MDT meeting**

Dr Tom Button, consultant neurologist, York and Scarborough Teaching Hospitals NHS Foundation Trust

**A 27 year old woman is newly diagnosed with MS. The regional MDT meeting has recommended she start treatment with an antiCD20 therapy.**

- Initial treatment of relapsing MS escalation vs early, intensive treatment?
- Monitoring response to treatment
- Long term management issues in patients treated with antiCD20 drugs – hypogammaglobulinemia/infections, family planning, cancer

**A 42 year old man was diagnosed with MS in 2014. He started treatment with dimethyl fumarate in 2016 after a second clinical episode. There have been no relapses since then but in the last few years he reports worsening fatigue and urinary frequency/urgency. His EDSS has increased from 2.0 to 2.5. He is concerned that he might not be taking the most effective treatment available for managing his MS**

- Treated natural history of MS
- Progression independent of relapse activity
- When and how to change therapy in patients with PIRA

**A 66 year old man is seen for annual review. He was diagnosed with MS in 2001 and has received treatment with beta interferon and natalizumab but was switched to**

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**fingolimod in 2016 because of JCV positivity.**

- Managing older patients with MS
- Treatment de-escalation and discontinuation
- Healthcare maintenance in older patients

**17:25 Refreshment break**

**17:40 Managing advanced MS**

Sarah Watson, advanced MS champion, Leeds Teaching Hospitals NHS Trust

**A 48 year old man with aggressive MS (EDSS 8.5) is recovering following admission to hospital with aspiration pneumonia. He has lost 5kg of weight over the last 12-18 months because he is no longer able to feed himself and has difficulty swallowing. He has a very soft voice and a weak cough. While in hospital he developed a sacral pressure area which is healing. He was discharged with an indwelling catheter after a failed trial of void two days before discharge**

- When and how to consider PEG feeding
- Respiratory management in people with advanced MS
- Managing skin and pressure areas
- Bladder and bowel management in advanced MS
- Advanced care planning

**18:20 Comfort break**

**18:30 Roche promotional satellite symposium**

**19:00 Final remarks and networking dinner and refreshments**

**20:00 Meeting close**