ECTRIMS
EUROPEAN COMMITTEE FOR TREATMENT AND RESEARCH IN MULTIPLE SCLEROSIS

-NEWS RELEASE-

Late breaking reports on new treatment studies in MS: ECTRIMS congress

14 September 2016, **London**: The 32nd Congress of the **European Committee for Treatment and Research in Multiple Sclerosis** opened today in London (September 14-17) and key presentations reveal the latest results from treatment studies focusing on pharmacological management of MS.

These cutting edge research findings highlight the continued progress in developing improved treatment for many aspects of the disease, including mobility, disease progression and relapse rates. The full findings of all four abstracts will be revealed in a dedicated late-breaking session – Saturday 17th.

Latest results from the EXPAND study [i]

We do not yet have treatments that delay disability progression in secondary progressive multiple sclerosis (SPMS). EXPAND, a large randomised, controlled phase III trial has been investigating the efficacy of siponimod (BAF312), an orally active selective modulator of the sphingosine-1-phosphate receptor subtypes 1 and 5.

The trial included 1651 patients from 31 countries. It was recently announced that the trial met its primary endpoint, which was an improvement in the time to three-month confirmed disability progression, as measured by the expanded disability status scale (EDSS), versus placebo. The topline results of the trial will be presented, including the primary and key secondary outcome measures.

Five-year treatment outcomes with alemtuzumab compared to natalizumab, fingolimod and interferon β-1a [ii]

While previous studies have demonstrated the greater efficacy of alemtuzumab, a highly effective anti-CD52 agent, over interferon β in the treatment of relapsing-remitting multiple sclerosis, this is the first study to look at the relative efficacy of alemtuzumab compared to natalizumab or fingolimod.

This five-year observational study included 3936 patients from the UK, Ireland and Germany, and compared the effect of alemtuzumab versus natalizumab, fingolimod and interferon β on annualised relapse rate (ARR) and Expanded Disability Status Scale (EDSS) progression or regression events.

- Patients with MS that was previously active and who were given alemtuzumab had a lower ARR and lower risk of EDSS progression compared to those given interferon.

- ARR was lower in the alemtuzumab treatment group compared with the fingolimod group.
- Patients receiving natalizumab and alemtuzumab experienced very similar ARR and EDSS progression, while the likelihood of EDSS reduction was higher on natalizumab

Treating progressive multiple sclerosis with fluoxetine: the FLUOX-PMS trial[iii]

No disease-modifying treatments are available that stop or slow the widespread axonal degeneration, which is characteristic of the progressive phase of multiple sclerosis and which leads to a substantial disability in patients.

Stimulated by previous work suggesting that fluoxetine has neuroprotective effects, the FLUOX-PMS trial investigated whether the drug has an impact on the progressive phase of MS.

The multi-centre, randomised, controlled and double-blind clinical study in 134 patients with secondary or primary progressive MS ran for a total period of 108 weeks, finishing in July 2016. The first reports from analysis of the data will be presented at ECTRIMS.

Reports from the ENHANCE study: potential of fampridine to improve mobility[iv]

As many as 4 in 5 people with MS report problems with walking and staying mobile: improving function and quality of life in these patients is a research priority. While previous trials, observational studies and anecdotal evidence suggest benefits of prolonged release fampridine, some clinicians are not convinced by the quality of data previously produced.

The ENHANCE study, largest and most extensive randomized trial to date of prolonged-release fampridine (PR-FAM; dalfampridine-ER in US), set out to settle this important question.

A total of 646 patients from 11 countries were enrolled in a multicentre, randomised, double-blind, placebo-controlled study lasting 24 weeks.

The results were promising: compared to the placebo group, a significantly greater number of patients treated with fampridine reported an improvement in walking, balance and mobility. The benefits appear to be sustained over the full 24 weeks of the study.

Prof. David Miller, Vice President & Chair of Scientific Committee of ECTRIMS: *"The results presented in the late breaking sessions at ECTRIMS will review some of the most exciting research to emerge in MS and will help further understand the disease's mobility, disease progression and relapse rates. Most crucially, the session will present results of new studies that could potentially have a positive effect on the treatment and management of MS for patients."*

-ENDS-

Notes to editors

The European Committee for Treatment and Research in Multiple Sclerosis (ECTRIMS) is an independent representative European-wide organisation devoted to multiple sclerosis (MS). For a quarter of a century, ECTRIMS has served as Europe's and the world's largest professional organisation dedicated to the understanding and treatment of Multiple Sclerosis

MISSION

To facilitate communication, create synergies, and promote and enhance research and learning among professionals for the ultimate benefit of people affected by MS.

VISION

ECTRIMS works with researchers and clinicians of its member countries and with other organisations that share similar missions and objectives on a worldwide scale, creating networking and collaboration opportunities. The ultimate goal of ECTRIMS is to improve basic and clinical research and clinical outcomes in MS.

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[i] Kappos et al.

[ii] Kalincik et al.

[iii] Cambron et al.

[iv] Hobart et al.