

About This CME/CNE Activity

RATIONALE AND PURPOSE

The US Food and Drug Administration (FDA) first approved disease-modifying therapies (DMTs) for multiple sclerosis (MS) over two decades ago. Currently, the available armamentarium can limit the frequency of relapses and improve patient quality of life but can do little to stop progression of the disease. However, clinical researchers and drug companies are striving to develop therapies that can halt the disease and provide a greater degree of normalcy to patients with MS, based on our growing understanding of what causes the disease on a molecular level.

The articles in this edition of *The Neurology Report* turn the spotlight on the neuroimmunologic, environmental, and genetic roots of MS; approaches to achieving an accurate MS diagnosis; commonly reported symptoms of MS and their current management; the results of clinical trials evaluating the safety and efficacy of newer DMT regimens in patients with relapsing-remitting MS; and future research directions for improving the clinical management of MS. These reports, based upon presentations delivered during the 66th Annual Meeting of the American Academy of Neurology, held April 26 to May 3, 2014, in Philadelphia, Pennsylvania, cover strategies that need to be considered by all members of multidisciplinary teams caring for MS patients, including neurologists, radiologists, immunologists, nurses, and physical and occupational therapists.

The articles in this edition, written from the academic perspective of physicians-in-training at leading medical institutions, summarize the import of these new findings and place them into clinical context. This

activity has been developed and approved by a planning committee of nationally recognized thought leaders to meet a perceived educational need to provide neurologists, other physicians, and nurses with diagnostic and therapeutic strategies to help them perform their clinical roles.

LEARNING OBJECTIVES


After studying this issue of *The Neurology Report*, participants in this educational activity should be able to:

- Explain current theories on the pathogenesis of MS, its physical symptoms, and potential strategies to slow or reverse nerve damage.
- Describe the results of pivotal clinical trials evaluating dimethyl fumarate, pegylated interferon β -1a, and other promising drugs in MS patients.
- Summarize common symptoms experienced by MS patients and best current practices for providing comfort and stability and preserving independence.
- Review current and future directions for MS research, considering treatment optimization, molecular targets, and neurologic reparation.

TARGET AUDIENCE

Neurologists, other physicians, and nurses significantly involved in the diagnosis and management of MS should find participating in this educational activity valuable.

ACCREDITATION AND CREDIT DESIGNATION

 **Physicians:** This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical

Education (ACCME) through the joint providership of the University of Cincinnati and Direct One Communications, Inc. The University of Cincinnati is accredited by the ACCME to provide continuing medical education for physicians.

The University of Cincinnati designates this Enduring Material Activity for a maximum of 2.5 *AMA PRA Category 1 Credits*[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Nurses: A total of 2.5 continuing education contact hours for nurses are approved by the Ohio Board of Nursing (OBN) through the OBN Approver Unit at the University of Cincinnati College of Nursing, Continuing Education Program (OBN-011-93). Contact hours are valid in most states. Program #140808-1.

CREDIT AVAILABILITY

Activity release date: August 5, 2014
Expiration date: August 6, 2015

METHOD OF PARTICIPATION

This Enduring Material Activity is available in print and online at www.NeurologyReport.com and consists of an introduction, five articles, a postactivity assessment, and an evaluation. Estimated time to complete the activity is 2.5 hours.

To receive credit, participants must read the CME information on these two pages, including the learning objectives and disclosure statements, as well as the full content of this monograph, and then complete the post test and evaluation form online at www.NeurologyReport.com. Upon successful completion of the post test (80% correct) and evaluation form, a certificate of participation will be awarded automatically. The certificate

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may be printed directly from the Web site or e-mailed and printed later.

There are no fees for participating in or receiving credit for this activity.

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FACULTY DISCLOSURES

All faculty members (or anyone else in a position to control content, such as activity planners) are required to complete a Disclosure of Commercial Interest and Resolution form and to cooperate with identified methods for resolving conflict of interest prior to participating in the activity. The University of Cincinnati requires disclosure to the learners of all relevant financial relationships and adheres strictly to the ACCME Standards for Commercial Support.

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Rick Ricer, MD, has nothing to disclose.

Susan P. Tyler, MEd, CMP, CCMEP, has nothing to disclose.

Jacqueline Keenan and Edwin Geffner of Direct One Communications, Inc., have nothing to disclose.

DISCLAIMER

This activity is an independent educational activity under the direction of the University of Cincinnati. The activity was planned and implemented in accordance with the accreditation requirements and policies of the ACCME, the Ethical Opinions/Guidelines of the American Medical Association, the US Food and Drug Administration (FDA), the Office of Inspector General of the US Department of Health and Human Services, and the Pharmaceutical Research and Manufacturers of America Code on Interactions With Healthcare Professionals, thus assuring the highest degree of independence, fair balance, scientific rigor, and objectivity.

However, the planning committee,

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DISCLOSURE OF UNAPPROVED/OFF-LABEL USE

Discussions concerning drugs, dosages, devices, and procedures may reflect the clinical experience of the planning committee or faculty, may be derived from the professional literature or other sources, or may suggest uses that are investigational and not approved labeling or indications.

A number of the drugs mentioned in this edition of *The Neurology Report* have not been approved by the FDA for use in the treatment of patients diagnosed with MS. They include ocrelizumab, riluzole, amiloride, ibudilast, alemtuzumab, peginterferon β -1a, daclizumab, and laquinimod, as well as several drugs used off-label to treat some of the symptoms of MS. These investigational or otherwise unapproved uses are clearly identified in the text.

CONTACT INFORMATION

We would like to hear your comments regarding this or other educational activities produced by Direct One Communications, Inc. In addition, suggestions for future activities are welcome. Contact us at:

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