Introduction

More disease-modifying therapies approved by the US Food and Drug Administration (FDA) are accessible for the treatment of MS. Scientists around the world are actively working to find more effective treatment for MS progressive forms and address advanced MS challenges as a primary goal of research strategy.

These MS drugs alter MS and are also known as disease-modifying treatments (DMT). Each of the disease-modifying treatments have side effects and the risks associated with them. The onset of a DMT or change in DMT are decisions by a person with MS and a MS healthcare provider, after discussing how the drug is taken, the side effects, risks and costs.

Clinically Isolated Syndrome (CIS)

For those with a syndrome who are advancing in the clinical diagnosis of MS an MS disease-modifying therapy (DMT) is often recommended and aim for a delay in a second attack. DMTs approved by the United States FDA for renewal of copper relapses forms. Initial and ongoing treatment of MS is support by the MS Alliance, which includes the National Association of Multiple Sclerosis. This evidence-based agreement is in the context of disease-modifying treatments that are useful when discussing therapy options with healthcare providers and supporting insurers for access and coverage [1].

Relapsing-remitting MS (RRMS)

The USFDA has approved more than 10 medicines for the treatment of MS recurrent diseases, including common clinical syndrome, recurrent cancer (RRMS) and secondary advanced disease (recurrent SPMS). Research has shown that all MS medications can:

- Reduce the number of relapses or attacks or escalation
- Limiting the new MS activity in the central nervous system (CNS) and observation in magnetic resonance imaging (MRI)
- Getting worse (progress)

Secondary progressive MS (SPMS)

US Food and Drug Administration (FDA) has approved More than 12 disease-modifying treatments for use in MS recursive forms, including: Common Clinical Syndrome, Repetitive Cancer (RRMS) and Secondary Secondary Disease (SPMS) with flush). Ocrelizuma - is developed by the USFDA for the treatment of primary-progressive MS (PPMS), as well as for clinically isolated syndrome, relapsing-remitting disease (RRMS) and active secondary progressive disease. Disease modifying treatments primarily reduce inflammation in the central nervous system (CNS), they also work in a course of disease that is characterized by nerve degeneration rather than inflammation. For this reason, they have not been shown to be effective in progressive disease types unless the person indicates a relapse or MRI activity due to inflammation [2].

A number of these factors, including Copaxone® and an experimental drug called Rituxan, have been studied in PPMS, but unfortunately without having a positive effect on progression. There are several clinical trials recently conducted for Advanced MS Forms or some other PPMS.

References