

Adding steroid drug to MS treatment may reduce disease activity

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Using a steroid drug for multiple sclerosis (MS) in addition to an MS drug may reduce the amount of disease activity more than using the MS drug alone, according to a study that will be presented as part of the Late-breaking Science Program at the American Academy of Neurology's 61st Annual Meeting in Seattle, April 25 - May 2, 2009.

For the study, people with MS received the steroid drug methylprednisolone in monthly "pulses," or three doses over three days, in addition to regular weekly treatment with the drug interferon beta-1a. The steroid drug has typically been used only to treat acute MS attacks, not as an ongoing treatment.

The study involved 341 people with relapsing-remitting MS. Half of the participants received both drugs; half received only the interferon drug plus a placebo. The participants were seen every three months during the three-year study for evaluation.

The participants had the disease for an average of three years and had not yet received a disease-modifying drug such as interferon.

Those who received both drugs had 38 percent fewer relapses, or times when the disease is active, than those receiving only the interferon drug. They also improved slightly on a test of MS disability, while the scores for the [placebo](#) group decreased slightly.

At the beginning of the study and again after three years, the researchers

measured the size of lesions in the brain that are a sign of disease activity. For those receiving both drugs, the lesions stayed the same size or shrunk, while the size of the lesions grew for those taking only interferon.

"These results indicate that these two drugs may have a synergy when taken together and provide a more beneficial effect on the disease activity," said study author Mads Ravnborg, MD, of the Danish [Multiple Sclerosis](#) Research Center at Copenhagen University Hospital in Denmark. "This is a promising finding, as the benefit from interferon is only moderate and not everyone responds fully to the treatment, so anything we can do to boost those results is positive."

Source: American Academy of Neurology ([news](#) : [web](#))

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