Does the nature of nutrition affect the development and course of relapsing-remitting multiple sclerosis (RRMS)?

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Considering the connection between microbiota and immune system, nutrition recommendations for patients with multiple sclerosis can lead to immune modulation and positive effect. Aim: determine the main models of nutrition dominating among patients with RRMS with different activity. Material and methods: 30 women with RRMS who didn't change their dietary habits, and 30 healthy women at the age 25.0 ± 5.0 and 26.0 ± 5.0 , respectively, were examined. The diagnosis was established in accordance with the McDonald's criteria, EDSS = 2-3. The FFQ-based questionnaire was used, where nutrition products were grouped into clusters and 5 types of dietary models were derived. Results: all 5 types of dietary patterns were identified in the examined patients: western, high-fat, vegetarian, lactovegetarian and traditional models. Most patients followed the western model [odds ratio (OR)= 1.97; 95% confidence interval CI: 1.61-2.92, P 0.005] and high-fat model [(OR)= 1.87; 95% CI: 1.61-2.92, P 0.005]. A minority of the patients preferred the traditional [(OR) = 0.17; 95% (CI): 0.05-0.20, P = 0.028], vegetarian [(OR) = 0.40; 95%; (CI): 0.17-0.78, P = 0.026] lactovegetarian [(OR) = 0.33; 95%; (CI): 0.14-0.84, P = 0.018]. During 6 months the patients who followed the western model had 1-2 exacerbations with new periventricular Gd+ lesions on MRI while patients on other diets didn't have exacerbations. Conclusion: the western and high-fat models dominate among the RRMS patients which probably causes the bigger activity of the disease.