

## **Are MS therapies safe and effective in elderly? Yes**

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The average age of persons with multiple sclerosis (PwMS) is increasing worldwide. Improvements in treating the vascular comorbidities associated with aging as well as new available MS disease modifying therapies (DMTs) contribute to more stable disease and to longevity. Recent estimates suggest that as much as 10 -15% of PwMS are 65 years old. Aging PwMS are rarely included in clinical trials for DMTs. Approximately 30% of PwMS 65 years or older still have relapsing remitting disease that is highly amenable to treatment. Furthermore, approximately 8 % of PwMS present with very late-onset multiple sclerosis (VLOMS) acute onset after age 60 requiring treatment with DMTs. Older PwMS have a higher tolerance for DMT-related risks. To evaluate the effects of DMT discontinuation in aging PwMS, we extracted 135 participants from the New York State Multiple Sclerosis Consortium with stable disease who were at least 50 years of age and  $\geq 15$  years' disease duration. Of these 35.6% worsened in EDSS after discontinuation (34.1% in patients 55 years and 37.7% in patients 55 years or older). Patients  $\geq 50$  who continued treatment with interferon beta or glatiramer acetate were no more likely to experience EDSS or Timed 25-Foot Walk (T25FW) worsening over time than patients 50 years on same medications. Conclusion: Aging PwMS represent a challenge to the MS community. A stable disease course does not protect against disability progression after treatment discontinuation. Additional studies are needed to assess benefit and safety on use of DMTs in aging PwMS.