

Are MS therapies safe and effective in the elderly?

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Multiple sclerosis (MS) is a chronic and disabling autoimmune disease with significant neurodegenerative and inflammatory components. The onset of the disease happens mainly between 20 and 40 years. It was accepted that the natural history data of persons with MS reveal survival approximately 38 years after diagnosis. The use of disease-modifying therapies (DMTs) influenced the longevity too, and approximately 90% of people with onset of MS in their 20s may live into their 70s (according to Hurwitz, 2011). On the other hand older patients present with increased medical complexity and decreased health-related quality of life (HRQOL) requiring a comprehensive and multidisciplinary approach and making the treatment choice more difficult. The main question in this condition is if we may continue to use the MS therapies in the elderly patients avoiding the side effects and the influence on other age related diseases and on the other hand preserving their effectivity? Shall we continue for the lifetime the DMTs or have we to interrupt the medications, if yes, when it is the better time and/or criteria to do it?