

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/neurofrontiers/managing-ms-in-older-adults-top-5-clinical-considerations/32800/>

ReachMD

www.reachmd.com
info@reachmd.com
(866) 423-7849

Managing MS in Older Adults: Top 5 Clinical Considerations

Announcer:

This is *NeuroFrontiers* on ReachMD, and on this episode, we'll hear from Dr. Yinan Zhang, who's an Assistant Professor of Neurology at Ohio State University. He'll be sharing key takeaways from his session at the 2025 Consortium of Multiple Sclerosis Centers Annual Meeting, which focused on managing multiple sclerosis in older adults. Here's Dr. Zhang now.

Dr. Zhang:

So there's five major topics that tend to be important that many providers think about when caring for older adults with MS. One of them is being able to distinguish between MS and age-related changes—for example, whether or not the increasing weakness that the patient is presenting with is due to getting more frail from aging or MS progression. Likewise, changes in cognition, is that due to age or due to MS? Things like that.

Another topic is the risks and the benefit of disease-modifying therapies. With age, there's certainly consideration about the effectiveness of our treatments for MS, considering patients have fewer relapses and fewer new lesions forming on the MRI. Nevertheless, they are also at a higher risk for developing progression, so we have to weigh the benefits of remaining on medication versus stopping medications, particularly ones that have higher side effects that are amplified with older age.

Another topic facing older adults is the presence of comorbidities and also polypharmacy, which is defined as using multiple medications, usually more than five. So with older age, there are other age-related diseases that lead to challenges in MS diagnosis and management that can also worsen MS presentation, so these are issues that must be co-managed between the neurologists and the patients and other providers. With polypharmacy, patients tend to use multiple medications—not just for MS, but for other chronic health-related issues that can add to compounding side effects.

Then another topic is needing an integration of more interdisciplinary providers, so specialists that are trained in managing various aspects of MS symptomatology, such as physical therapy, occupational therapy, diet and nutrition, urology, ophthalmology, and social work. The list is very extensive, so how do we incorporate all these specialists into the care of an MS patient, and how are we going to improve the care of older adults who may need access to these specialists?

And then the final topic pertinent to your older adults with MS is, of course, access to care. Sometimes there's transportation and mobility issues. As people get older, they may have increased financial burdens and things like that. So altogether, this underscores another important aspect of the socioeconomic care for MS.

So gerotherapeutics is a unique term referring to treatments that target aging processes. This is a bit less well known to the field of neurology. More so, it's an emerging topic in the field of aging research. And the premise is that age is a common denominator for many age-related diseases, so if we—in addition to treating these individual conditions—target aging processes, then you can potentially slow down, prevent, or mitigate the development of these age-related conditions. So with gerotherapeutics, one of the more well-known examples are called senolytics, which are drugs that target senescent cells, or cells that can stop dividing but are instead secreting kind of proinflammatory cytokines and other mediators that in MS, at least, makes the remyelination potential decrease, and that promotes neurodegeneration. So the trials have not been done yet, but there have been trials done in animal models of MS, and several of them have shown efficacy of various senolytic drugs. So one potential application would be to conduct a trial in multiple sclerosis patients to see if this approach targeting an important aging process may have a potential effect on disease progression in MS.

Announcer:

That was Dr. Yinan Zhang talking about his session at the 2025 Consortium of Multiple Sclerosis Centers Annual Meeting, which

focused on how we can manage older adults with multiple sclerosis. To access this and other episodes in our series, visit *NeuroFrontiers* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!