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The Future of MS Management: Novel Agents and Clinical Approaches

Announcer:

You're listening to *NeuroFrontiers* on ReachMD. On this episode, Dr. Marisa McGinley, a neurologist at the Cleveland Clinic, will discuss emerging therapies in multiple sclerosis. Here's Dr. McGinley now.

Dr. McGinley:

We've had a huge boom of lots of medications come to market the last decade, but there's many more in the pipeline. BTKI inhibitors are probably the most imminent thing that might change some of our practices. So tolebrutinib data came out last year—the phase three clinical trial. It was promising in a progressive population. And obviously, that is a huge gap for us in our treatment of MS patients. We're very good early on and we're very good with the typical inflammatory disease activity, but there's a huge need to develop things to target more of that chronic inflammation and neurodegenerative aspect of the disease or remyelination. And so BTKI inhibitors may be our first foray into learning how to treat that differently. There's obviously data from ocrelizumab in primary progressive MS, but I think this will just be a different mechanism that we really might start to leverage more for our progressive patients.

And then there's several other BTKIs that are still completing their phase three trials where we're going to get emerging data to see if there's differences. The molecules are different in how they function in the body, so it's very possible we'll see varying degrees of effectiveness. So I think we're all going to be looking to see how they compare, the tolerability for our patients, and the types of monitoring that we require. But I do think that has a lot of potential to treat a population with not a lot of options currently.

The other thing that a lot of people are discussing—and there's a lot of trials underway—are CAR T-cells. So when we think about cell-based therapeutics, historically, we've talked a lot about hematopoietic stem cell transplant or mesenchymal stem cells. There's an ongoing study looking at highly effective therapies compared to hematopoietic stem cells. That's called the BEAT-MS study. So that'll help us a little bit more with sequencing with our highly active MS patients and whether or not hematopoietic stem cells are beneficial.

But we've also found that's not necessarily the perfect fit for a lot of our progressive patients. And so I think CAR T studies are looking at the spectrum of the disease—so still in typical inflammatory patients, but also looking at some progressive patients, either progression from onset or secondary progressive populations. I think there's a lot of hope—none of our currently available treatments target that type of biology. So I think CAR T in the coming years also has a lot of promise for those patients.

And then I think we're all hopeful about remyelinating agents. A lot of compounds have been identified through high throughput techniques that have the potential to remyelinate. I think that where we've been a little bit stalled in remyelination is we may have compounds that look promising, but then moving them to a clinical trial and the primary outcome that we use for those trials has been tricky because it's very different from a typical relapsing remitting trial. And that is where I think there's a lot of potential compounds that may be beneficial for remyelination that are ready to go, but there's a lot of work still in developing how we try all that best.

Announcer:

That was Dr. Marisa McGinley talking about emerging therapies in 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!