Secondary Progressive Multiple Sclerosis

What is secondary progressive multiple sclerosis?
Secondary progressive multiple sclerosis (MS) may also be referred to as SPMS. The term describes people with multiple sclerosis (MS) who find that they are gradually worsening over time. These people previously had relapsing-remitting MS but are gradually changing in between attacks. They may still have attacks but, in general, the attacks tend to be less definite and less often than earlier in their MS course. It is a common later phase of MS, and many people with relapsing-remitting MS eventually switch to secondary progressive MS.

Why do people switch to secondary progressive from relapsing-remitting multiple sclerosis?
The progression that patients with secondary progressive MS experience is not because their MS immune activity increases as compared with an earlier time in their disease. In fact, their MRI scans often do not seem to show much new activity at all.

One theory for their progression is that the nerve fibers that were injured earlier in their MS are now disappearing, sometimes years after the initial injury. Thus, the progression is not really because of new immune disease, but an after-effect of injury occurring perhaps years before.

Is there a test that diagnoses secondary progressive multiple sclerosis?
The testing for secondary progressive MS is the same as for other people with MS.

- MRI scanning of the brain and sometimes spinal cord is very helpful in showing changes in the white matter of the brain.
- Spinal fluid may also be important in selected patients.
- Evoked potentials are sometimes used.
- There are no special blood tests.
- There is no test that separates out secondary progressive MS from other forms of MS, and they are all probably variations on the same disorder.

Is there treatment for secondary progressive multiple sclerosis?
Most of the research done on MS treatment is specifically done in people with relapsing-remitting MS. However, the small number of studies in secondary progressive MS have shown some effect from medications also used in relapsing remitting MS. Interferon beta 1b...
(Betaseron®), mitoxantrone (Novantrone®), and natalizumab (Tysabri®) all appear to have some effect in patients with secondary progressive MS who are still having attacks. In general, when patients are not having attacks and are just having a progressive course, these medications do not seem to be useful. There is no standard treatment for such patients.

At the Mellen Center, we have used either pulse steroids (daily IV steroids for 3 days every 2 months in a pulse protocol) or a medicine called methotrexate weekly. There is continuing research on new treatments for MS of this type.

**Any suggestions for activities?**

We suggest regular exercise and stretching, both of which are important in maximizing function. While there is no special diet, a heart-healthy diet with low red meat and fatty foods seems to be better tolerated. Vitamin D may be important, although “the jury is still out.” Focusing on positive activities is also key to healthy living with MS.