A Word From Our Director

Winter is here and we have just welcomed in a New Year—2009! In this issue of MS Interactions we report on promising new advancements in research. Our Keynote article discusses two new research studies of potential MS medications, Alemtuzumab and Fingolimod (pages 1-3).

Another article by Dr. Jennifer Finkel describes the MS Hope for a Cure grant, which is a pioneering vision for incorporating short-term psychiatric assistance within MS care. This is a project in process. We will be adjusting to the needs of our MS patients and looking to enable the best rewards for this innovative grant (Please see page 3). We are excited to once again have (cont. p. 2)

Keynote Article: Breaking News:
Promising Results for both Fingolimod and Alemtuzumab (Campath)
Stephen Krieger, MD

In recent weeks, there have been two significant advancements in Multiple Sclerosis research that we are very excited to share with you. Both involve results of clinical trials of promising new medications for MS that are of particular interest to the CGD Center, as we are participating in new studies of both of them.

The results of the TRANSFORMS study, a head-to-head trial comparing the once-a-day pill called Fingolimod with weekly Avonex injections, were announced in December. This was a large scale, Phase III trial designed to evaluate whether Fingolimod was as effective as Avonex at reducing the numbers of relapses in patients with relapsing remitting MS (RRMS). The experimental drug, Fingolimod, which is being developed by Novartis, was not only as effective as Avonex, but in fact reduced relapses significantly more than Avonex in the one-year trial. Both a high-dose and a low-dose version of Fingolimod were studied. The annualized relapse rate in those taking the lower dose of Fingolimod was 0.16, compared to 0.33 in those on Avonex (a comparative reduction of 52%). In a result that surprised many in the MS community, no statistically significant difference was seen between the two Fingolimod doses, indicating that even the lower dose is as or more effective than an existing, FDA-approved medication for RRMS. To best understand “annualized relapse rates” consider the number of relapses that a given patient has in a year. An annualized relapse rate of 1 would mean one relapse per year; a relapse rate of 0.5 would mean one relapse every two years. The relapse rate of 0.16 translates into an average of one relapse every six years, and is therefore a terrific achievement for Fingolimod.

With every significant achievement in research, however, comes a meaningful risk. While similar numbers of patients in all groups “dropped out” of the trial due to side effects,
Director’s letter (cont. from p.1) Dr. Finkel’s presence back in the Center. Her unique qualifications include completion of an MS Psychiatric Fellowship at our Center.

We mention the importance of our annual appeal, which “pays dividends” by enabling the Center to continue and expand some of the patient programs we are so proud to offer. We are always striving to innovate and improve. The support of our friends and patients is both necessary and encouraging.

We have a new section, CGD News Briefs, that highlights activities and accomplishments of Center physicians and health care professionals within the Center.

We include a list of the rest of the year’s after-hours seminars and highlight the next two in particular. In January, we present Dr. Tracy DeAngelis talking about Neuromyelitis Optica and in February, I will be presenting “How to Keep Up With MS News”. Please check the schedule on page 8.

Throughout this issue there are reminders and Save the Dates for the 2009 MS Awareness Week lecture, held during the week of March 1st; the Seventh Annual CGD Dance Party on Thursday, March 5th at the legendary Rainbow Room; the upcoming MS Walk, April 19, 2009, and how to join the CGD Team. There is also the Social Workers’ Tip of the Month, which tackles insurance terminology.

There are many things happening with us and at the Center. We look forward to seeing many if not all of you in the upcoming year.

All the best for a happy and healthy New Year.

Best,

Fred D. Lublin, MD
Saunders Family Professor of Neurology
Director, The Corinne Goldsmith Dickinson Center for Multiple Sclerosis

Keynote article (cont. from p.1) there were two deaths from severe viral infections that occurred in the group taking the higher dose of Fingolimod. Although there were no deaths in the patients taking the lower (and equally effective) dose, the degree of risk of the medication is still unknown.

There are currently two other large Phase III trials of Fingolimod ongoing, called FREEDOMS and FREEDOMS II. FREEDOMS II is a two-year, placebo-controlled study that is assessing the impact of Fingolimod on MS relapses and progression of disability. Another study, INFORMS, is evaluating the effectiveness of this drug in primary-progressive MS. The CGD Center for MS is already participating in FREEDOMS II, and is gearing up to begin enrolling patients with PPMS in the INFORMS trial.

The second significant advancement in MS research was the publication of the results of the Phase II trial of Alemtuzumab, compared head-to-head with the self-injected interferon Rebif. Alemtuzumab is an intravenously-given medication being developed by Genzyme. While it was originally designed to treat a form of leukemia, Alemtuzumab profoundly suppresses the same white blood cells responsible for multiple sclerosis. In a result that rapidly spread through the popular media after publication in the (continued, p. 3)
New England Journal of Medicine in late October, Alemtuzumab reduced the number of relapses by 74% over Rebif, and Alemtuzumab also lowered the risk of sustained disability by 71% when compared with Rebif.

Like the Fingolimod trial described above, the researchers examined the annualized relapse rate to compare the two treatments. After three years, the annualized relapse rate was 0.36 for the Rebif group, and 0.10 for those on Alemtuzumab — a rough average of one relapse every ten years for the Alemtuzumab patients. In a particularly stunning result for the MS community, the researchers also noted that patients on Alemtuzumab showed some degree of recovery of lost motor functions, and some were less disabled after three years than at the beginning of the trial. This suggested that Alemtuzumab, if given early enough in a patient’s course of MS, might effectively stop the advancement of the disease and also allow the nervous system to repair itself, restoring lost function.

Again, however, Alemtuzumab has not been without its downsides. Several patients on Alemtuzumab in the clinical trial developed Immune Thrombocytopenic Purpura, or ITP — an autoimmune condition where the immune system destroys the patient’s own platelets, the blood cells responsible for blood clotting. In the first patient who developed low platelet counts, the case of ITP was fatal. Subsequent cases were caught early and treated successfully. There were also a significant number of patients on Alemtuzumab who developed thyroid problems, and both platelets and thyroid functions are to be very closely monitored in further testing of this medication.

Our Center is completing our preparations to begin enrolling patients in one of two large, Phase III trials called CARE MS, which will again test Alemtuzumab against Rebif for patients who have had breakthrough MS attacks despite taking one of the FDA-approved medications.

As we look ahead to the future of MS therapy, we are both excited and humbled by the results of these recent studies. It is enormously gratifying to see the results of clinical trials prove that we can develop ever more successful drugs to fight MS, and to potentially answer two of the major wishes of our patients: to develop pills for MS instead of shots, and to develop medications that can reverse the effects of MS rather than just slow them down. It is also gratifying to see the surge of interest on the part of the media, spreading positive information about MS treatment and research, and of the scientific community which continues to invest extraordinary resources in our fight. We are particularly excited to be taking part in new trials of both Fingolimod and Alemtuzumab, though we are humbled by the unknown effects that these medicines may have, and the potential for rare but serious consequences. And we are ever grateful to all of our patients who bravely choose to participate with us in our clinical research mission.

Innovative Grant Launches New Psychiatric Care Program

There is a current realization that psychological disorders in the MS population occur at surprisingly high rates. In response to this, the opinion of experts strongly suggest that a specialist with psychiatric expertise would enhance the treatment of our MS patients. The Corinne Goldsmith Dickinson Center is thrilled to announce the inception of a three year (time limited) clinical grant that will allow us to offer this service to our patients.

This pioneering grant, funded by the MS Hope for a Cure Foundation, under the leadership of Elissa J. Levy, President, will provide for an on-site psychiatrist at the CGD Center, to assist in the identification and management of psychiatric and psychological disorders in patients with multiple sclerosis (MS). This will include (continued p. 4)

Our After-Hours Seminar in February features Dr. Fred Lublin, The Center’s Director, How to Keep Up With MS News, Wednesday, February 25th, 5:30-7 PM. Look for announcements for location. Light refreshments and free to attend; for reservations, please call 212-241-7393.
but not be limited to the screening of depressive disorders in this population; evidence based medication management (psychopharmacology) of patients with MS, and increased education and improved awareness in MS Center staff regarding psychiatric co-morbidity (or the possibility of psychiatric issues secondary to MS) in patients with MS.

Dr. Jennifer M. Finkel, Assistant Professor of Psychiatry and Neurology at the Mount Sinai School of Medicine, will serve as the MS/Psychiatry Consultant for the CGD Center for the duration of this Grant.

After completing a psychiatry residency at the NYU School of Medicine and Bellevue Hospital, Dr. Finkel completed the Goldman Fellowship in Multiple Sclerosis and Psychiatry at the Mount Sinai School of Medicine which provided her with the unique opportunity to learn first-hand about the psychiatric manifestations of Multiple Sclerosis.

Upon completing her fellowship, Dr. Finkel joined the Mount Sinai faculty and has continued to work closely with the MS community for the past four years. Since joining the faculty, Dr. Finkel has served as the primary psychiatric MS consultant to the CGD Center as well as the primary geriatric consultant for the Mount Sinai Hospital. She is dually boarded in both Psychiatry and Psychosomatic Medicine and is an expert in the psychiatric manifestations of medical illness. She is currently the Associate Director of the Department of Behavioral Medicine and Consultation Psychiatry and also serves on the Mount Sinai Ethics Committee.

In this new and exciting role, Dr. Finkel will provide both outpatient and inpatient consultative psychiatric services to the MS Center’s patients. She will be available for initial psychiatric evaluations, psychopharmacologic recommendations and will also be available for collaborative projects with clinical staff.

Our hope is that this grant will not only serve our own patients, but will also serve as a model for other MS centers in recognizing the importance of addressing the disease in its totality—by treating the emotional symptoms as well as the physical. Please join us in welcoming her aboard.

Fred Lublin, MD, Director of the CGD Center, was invited to speak at the inaugural George A. Schumacher Lectureship at the University of Vermont in Burlington on November 13. Dr. Lublin has the distinction of being the very first recipient of this named Neuroscience Grand Rounds series, founded in honor of the distinguished neurologist who in the 1950’s and ‘60’s, shaped the future of multiple sclerosis diagnosis and treatment. Dr. George Schumacher’s clinical observations led to the development of the ‘Schumacher Criteria’—the fundamental clinical principals used for entering patients into clinical trials in MS. Dr. Lublin’s lecture was entitled “New Horizons in Treating MS: A Different Take on Holism.”

Fred Lublin, MD will speak informally about new findings in MS at a cocktail reception on January 29th hosted by the Connecticut Chapter of the National Multiple Sclerosis Society. The (continued p. 5)
gathering, to be held in Stamford from 6:00-8:00 PM, is the kick-off event for the Women Against MS (WAMS) luncheon in Fairfield County, held later in the spring. For location details and to purchase tickets, contact Kim Maloney at the Connecticut chapter, (860) 714-2300, ext. 334.

• Fred Lublin, MD is one of the key experts participating in the 2009 Drug Discovery for Neurodegeneration Conference to be held Feb. 2-3 in Washington, DC. Dr. Lublin will present to other academic scientists on issues in the drug discovery and development process relative to progressive MS. The event is presented by the Alzheimer’s Drug Discovery Foundation.

Aaron Miller, MD, Medical Director of the CGD Center, was requested to give Grand Rounds at two notable institutions this fall. In October, he presented his lecture entitled “Can We Predict the Future of Patients with MS?” at the Hospital of the University of Pennsylvania, department of Neurology; in December, he presented a similar topic at NYU Langone Medical Center. Grand Rounds are attended by neurologists and other specialists, residents, medical students, and the public, and is an advanced medical lecture on recent findings or medical issues.

• Aaron Miller, MD presented a poster “A Comparison of the Characteristics of Elderly MS Patients to Younger Patients at a Tertiary MS Center,” at the World Congress on Treatment and Research in MS in Montreal this past fall. Together with his colleagues, the group presented findings of their study which explored late-onset MS patients diagnosed after age 60, and the impact of their care within tertiary MS centers. Other participants included Fred Lublin, MD; Krupa Pandey, MD and Fellow at the CGD Center; and Colleen Farrell and Christine Hannigan, both Research Coordinators at the CGD Center. You may remember Rebecca Straus, a promising Mount Sinai medical student at the CGD Center from 2007-2008. She also presented two posters at the World Congress concerning her research in neuroimaging -- quite a distinction for a student. Her further accomplishment was giving birth to beautiful Charlotte Eliana on Nov. 11.

• Aaron Miller, MD and colleague H. El-Moslimany, MD published a chapter in a new MS textbook by C.S. Raine et al. The chapter is entitled Escape Therapies and Management of MS; When Traditional Therapies Fail. This comprehensive volume includes contributions by notable MS experts from around the world, and is expected to be widely used by professionals seeking information on MS.

Dr. Lublin also collaborated with Dr. El-Moslimany in writing a chapter for this same volume entitled Clinical Features in MS. (Multiple Sclerosis: A Comprehensive Text, published by Elsevier Ltd.)

• Aliza Ben-Zacharia, CRRN, ANP-BC, MSCN, a nurse practitioner at the CGD Center and a noted educator and clinician, is doing a research study as part of her doctoral program involving the criteria for screening for depression in adult MS patients relative to the urban setting, relapse rate, and degree of disability. Aliza serves on Mount Sinai’s Nursing Research Committee, which supports Nursing Research Day. Held recently on Nov. 14, the annual event is designed to encourage nurses to engage in more original research studies.

Tracy DeAngelis, MD, attending physician at the CGD Center, authored an article with Dr. Lublin entitled “Multiple Sclerosis: New Treatment Trials and Emerging Therapeutic Targets,” which appeared in the June 2008 issue of Current Opinions in Neurology. It offered an overview of the up-to-date therapeutic strategies and new drugs which are currently studied in clinical trials. A team based at the Institute of (continued p.6)
Neurology (London) specially selected the article for the MS International Federation publication, Making Connections, as a key review of the current understanding of new treatments.

- Dr. DeAngelis also co-authored with Dr. Miller and others a retrospective review of a promising new treatment for neuromyelitis optica (NMO), which was published in Archives of Neurology and entitled Treatment of Neuromyelitis Optica with Rituximab.

Dr. DeAngelis will discuss new insights into our understanding of what factors play a role in causing NMO (Devic’s disease) at the upcoming After-Hours Seminar on January 28. See the last page of this issue for further details on how to register.

- Jennifer Decker, MSN, ANP-BC, CNRN, MSCN, recently received specialty certification in multiple sclerosis, which recognizes abilities in treating the MS patient population. A board-certified nurse practitioner at the CGD Center for the past two years and also certified in neuroscience, Jennifer’s successful completion of this MS exam gives her an edge in nursing. And the really big news is that she just became Mrs. Brian Reardon on November 22!

Stephen Krieger, MD, attending physician at the CGD Center, was one of the keynote speakers at the 2008 Annual Research Symposium presented by the New York City Chapter of the National MS Society last fall. The focus of the half-day educational program was on repairing and protecting the nervous system. Dr. Krieger provided an update on the latest MS research and future therapies for a capacity audience. He will be profiled in an upcoming issue of the National MS Society magazine MS Connection, along with a synopsis of his keynote remarks.

- Stephen Krieger, MD addressed the Long Island MS Nurse’s Society about new treatment options at its annual patient education event in November. The program, “Living with MS: A Positive Approach,” was held at Good Samaritan Medical Center in West Islip, NY.

Time to Celebrate!

Get your rhythm section in gear and mark the date on your calendars: the 7th Annual Dance Party to benefit the Corinne Goldsmith Dickinson Center for MS will be held on Thursday, March 5, 2009 from 6:30 - 10:30 PM. And once again, the location is the stunning Rainbow Room atop Rockefeller Center in Manhattan.

The CGD Center opened its doors seven years ago, and this gala fundraising dinner-dance became an annual rite of spring soon after. To mark the seventh year, seven chairmen and vice chairmen will help guide the event to success. We’re fortunate that one of the Center’s founders, George J. Gillespie, III and his wife, Eileen, will serve as chairmen. The vice chairmen are: Elissa Gretz Friedman, MD, Mount Sinai faculty, and Robert Friedman, Mount Sinai Trustee; Deepka and Shyam Gidumal; Katherine and Clifford H. Goldsmith, co-founder of the CGD Center and Mount Sinai Trustee; Pari Kreutter Hirsch and John Hirsch; Linda Schoenheimer and Ric McCurdy; and Jill and Robert C. Smith.

Funds raised will enable us to continue to provide the very highest level of patient care and groundbreaking research. And in these uncertain times, your support is needed now more than ever.

Don’t miss out on the fun! Join us in making a commitment to support our mission. For further information and ticket prices, call Eileen Solomon at the Mount Sinai Office of Special Events at (212) 659-9701.
Come Join Us for the 2009 MS Walk
Sunday, April 19, 2009

It is time to start thinking about the 2009 MS Walk. Last year our team raised over $41,000, making us eligible as one of the Top Tier Teams this year! This means that we as a team are able to meet with the other high level fund-raising teams and breakfast with the “high rollers/walkers.” We have only our patients to thank for this honor, for without their support and fundraising efforts, we would not have made such a fabulous showing. This year we want to do even better. We would love to have you join us and start the day with The Mount Sinai CGD MS Center--our Top Tier Team!

Aliza Ben-Zacharia and Tova Epstein are our team captains. Aliza has helped us start early. You may register now. Please visit www.msnyc.org and join us for a day of fun, an opportunity to meet great people, and a charitable way to spend a few hours. Please look out for our subsequent mailings. Should you have any questions in the meantime, feel free to call Tova at 212-241-7113.

You are Invited:
CGD Center Hosts an MS Awareness Week Special Event

Multiple Sclerosis Awareness Week, an annual nationwide event presented by the National Multiple Sclerosis Society, will be celebrated from March 2-8. The purpose of this week-long series of special events, lectures, workshops and more, is to promote awareness and expand knowledge about MS, which affects some 400,000 people in the US, and 2.5-million around the world.

The CGD Center is pleased to present a very special evening seminar during MS Awareness Week. On Tuesday evening, March 3, we invite you to Finding Inspiration on the Road Ahead - a panel discussion featuring several remarkable MS patients with winning personal stories to share and inspire us all.

The session will be held from 5:30-7:00 PM on the Mount Sinai campus, location to be announced. It is available free of charge to the MS community and the general public. Look for additional details about this seminar in the coming weeks. To register, please call (212) 241-7393.

Your Gift to the CGD Center Pays Dividends

As you consider the range of charitable requests that fill your mailbox at this time of year, we hope you'll give some thought to the Corinne Goldsmith Dickinson Center for MS Annual Appeal.

For this year’s fundraising campaign, in these extraordinary times, our goal is to increase participation among the Center's patients and friends. Over the past few weeks, many of you have received our appeal letter. It describes the important role philanthropy plays in insuring that the CGD Center continues to deliver the best level of care and most advanced research.

Did you know that charitable donations comprise a significant proportion of the Center’s operating budget? Like many non-profit institutions, we are dependent in part on your support to maintain highest standards in patient treatment and diagnosis, as well as clinical and basic research.

This past year has been a period of unparalleled growth for the Center, reflecting an increasing demand for the standard of excellence that sets us apart. We are counting on all of you to help us maintain that momentum, and continue to provide the services you need, at the highest caliber.

Please respond to the Annual Appeal with whatever amount is comfortable for you—each individual's contribution is meaningful and greatly appreciated. To make a donation, you may call the CGD Center, or contact Kim Woodward in the Mount Sinai Development Office, at (212) 659-1594 or kim.woodward@mountsinai.org.

We are trying to alert people who have MRI films at the Center. Space is limited. We would like to return your MRIs to you. While we would appreciate people picking up their MRIs and keeping them themselves, we know this is not always possible. We will be happy to give your MRIs to you at your next visit, or alternatively, to mail your MRIs to you. If your MRIs have been done at Mount Sinai, they are not taking up room, for they reside on the physicians’ computers.
The CGD Center for MS After-Hours Seminars 2009
Fourth Wednesday of Each Month

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Please call to sign up as soon as possible—212-241-7393.
Free to Attend—Light Refreshments provided

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SPECIAL MS AWARENESS WEEK EVENT

MS Lecture—Tuesday evening, March 3—
Finding Inspiration on the Road Ahead a panel discussion featuring several remarkable MS patients with winning personal stories to share and inspire us all.

The session will be held from 5:30-7:00 PM on the Mount Sinai campus, Location TBD.

MS Interactions newsletter and After-Hours Seminars supported in part by grants from Bayer Healthcare Pharmaceuticals, Biogen Idec, and Teva Neuroscience.

Our Phone Tree and how to use it......
We are doing our best to improve our phone tree. Please look for a revised phone tree in 2009. Our goal is to make our resources work as well as possible. We appreciate your suggestions, and we do listen.