

A Message from the President



Yves Savoie

It's always a pleasure for me to report good news to donors and friends in the MS community. This means that my message today is one that will be particularly enjoyable to deliver.

The fact is, after attending dozens of presentations at the ECTRIMS Conference, many of them from

the greatest talents in MS research, we have more reason than ever to be hopeful about the future.

Scientists and researchers reported on advances in the areas of myelin repair, possible immune targets in MS, new therapies designed to restore function, and enhancements in our understanding of what causes MS.

Perhaps most importantly, the conference presented a number of new therapeutic options for those living with relapsing-remitting MS and bold new insights into our understanding of progressive MS. This gives hope to the estimated 55,000 to 75,000 Canadians who live with MS.

As a supporter of the Multiple Sclerosis Society of Canada, you play such an important role in our journey toward the end of MS. Thanks to you, we are leading the way forward.

On behalf of all of us at the MS Society, I am deeply grateful for your efforts to help us take the next step on this journey. We cannot advance without you, and your continued support is critical to us.

Thank you.

Yves Savoie
President and Chief Executive Officer
Multiple Sclerosis Society of Canada

Conference Highlights Emerging Therapies and Treatments for MS

Anyone attending the ECTRIMS (European Committee for Treatment and Research in Multiple Sclerosis) conference in late 2012 would have found many reasons to be hopeful about the future of MS research. Some of the most exciting presentations during the four-day event focused on clinical trials and promising treatment options.

There was particularly good news for people living with progressive MS, who can look forward to more clinical trials of treatments aimed at slowing the progression of their disease.

We've outlined a few of the conference highlights below, which we hope will give you a renewed sense of optimism and purpose in the fight to treat, and ultimately cure, MS.

• Statin slows clinical progression in secondary-progressive MS *

A phase II, two-year study of high-dose simvastatin (a therapy for high cholesterol) involving 140 people with secondary-progressive MS showed the possibility that this drug may protect against nervous system damage.

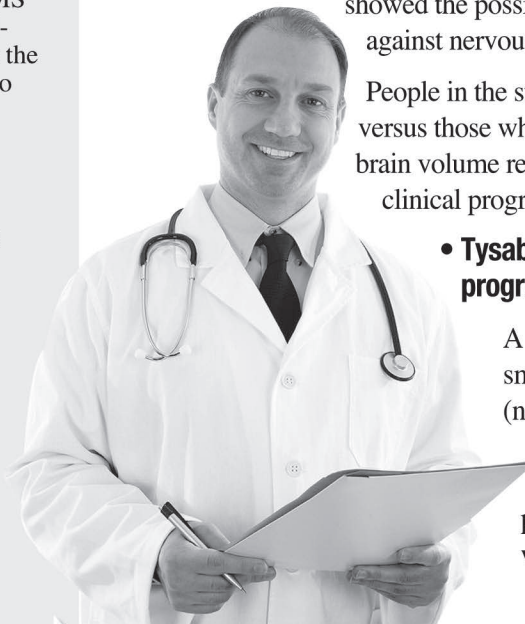
People in the study who took 80mg of simvastatin, versus those who took placebo, showed nearly 40% less brain volume reduction (atrophy), and also had slower clinical progression.

• Tysabri impacts brain tissue loss in progressive MS

A research team presented results from a small, unblinded clinical trial of Tysabri® (natalizumab, Biogen Idec and Elan)

infusions in 24 people with primary-progressive MS or secondary-progressive MS. In 17 people who completed the study, they found

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Decades of Hope:

1981

1996

More Than 30 Years of Progress in the Fight Against MS

In just over three decades, MS research has advanced by leaps and bounds, dramatically improving prognoses for patients in Canada, and around the world. Just a few of the critically important developments in the field of MS include:



The first MRI scan of people with MS is performed.



Canadian researchers find gene linkage to MS susceptibility.

Your Monthly Gift Makes a World of Difference

Join us as a Partner in Progress

As one of our Partners in Progress monthly supporters, you can play a leadership role in the vital search for an MS cure. Without your generosity, our research projects, scholarships, and training programs would not be possible. In fact, 92% of our funding comes from private donations from supporters like you.

You can give as little as \$10 a month. That's how much you might spend taking a friend out for coffee and a muffin!

And yet, all it takes is your \$10 monthly gift to have a real impact on the lives of Canadians with MS.



As a Partner in Progress, you'll receive **MS Canada Magazine**, the **MS Society Progress Report**, and occasional address labels and notepads as a special "thank you" for your ongoing support.

Plus, if you join us today, you'll receive a handsome metal bookmark designed exclusively for our Partners in Progress monthly supporters.

Simply visit www.mssociety/monthlygiving to sign up. Thanks so much.



MS in the News

Decreased hospital admissions for patients with MS

A recent retrospective study conducted in British Columbia shows that hospital admissions for MS have decreased over the past 20 years, but the length of stay has increased.

Higher admission rates and longer stays were associated with older age, the presence of a primary progressive disease course, and a longer disease duration. The length of hospital stays increased over the study period, averaging 10 days for all inpatient admission and 13 days if the admission was MS-related.

This study highlights many changes in the management of MS over the past 20 years, including the treatment of MS relapses on an outpatient basis.

Reference: Evans C et al. American Journal of Managed Care. 2012; 18(11): 735-742

Early relapses may not influence time to secondary progressive onset

A team of researchers investigated the relationship between early relapses (within the first two years), secondary progression and late disability in MS. They suggest that the total number of early relapses in the relapsing-remitting phase does not influence the time to secondary progressive onset.

Supported in part by the MS Society of Canada, the study examined 730 patient records of people with relapsing-remitting MS from the London Multiple Sclerosis Clinic in Ontario from 1972–2000.

Reference: Scalfari A et al. Journal of the American Medical Association Neurology. 2013; 70(2): 214-222

1997



Multiple Sclerosis Scientific Research Foundation (MSSRF) funds cutting-edge Canadian Collaborative Project on Genetic Susceptibility in MS for \$4.7 million.

1999



Health Canada approves Betaseron® (interferon beta-1b) as a treatment for secondary-progressive MS to slow the progression of disability and to reduce the frequency of MS attacks.



Keeping the Volunteer Spirit Alive

Queen Elizabeth II Diamond Jubilee Award Honouree, Audrey Wheeler

Not everyone has the commitment to service that characterizes our dear friend,

Audrey Wheeler. This high-energy lady has been volunteering for the MS Society for more than 20 years!

Her interest in helping her neighbours with MS began close to home, when her sister was diagnosed with the disease. After joining the MS Society of Canada in 1961, she began volunteering as she neared retirement age, serving as a site captain for our vital Carnation Campaign.

When Audrey finally did retire in 1994, she was ready to take on an even greater role, joining us as an office volunteer to contribute her time and efforts to the MS Society. For the many people with MS who have come to know Audrey, she has been the face of the MS Society. And for those who worked alongside her, she is quite simply, an inspiration.

To thank her for her extraordinary efforts, and for serving as a role model to so many, Audrey was recently given the Queen Elizabeth II Diamond Jubilee Award by the MS Society of Canada.

The Queen Elizabeth II Diamond Jubilee Medal is a tangible way for Canada to honour Her Majesty for her service to this country. At the same time, it serves to honour significant contributions and achievements by Canadians.

To be eligible for this honour, a person must be a Canadian citizen or a permanent resident of Canada who has made a significant contribution to Canada or an achievement abroad that brings credit to Canada.

Audrey Wheeler certainly fulfills all those requirements, and more.

Please join us in congratulating her on her award, and honouring her dedicated service to the estimated 55,000 to 75,000 Canadians who live with MS.

We Love Our Volunteers! National Volunteer Week is April 21-27, 2013

Across Canada, more than 13.3 million people give of their time and their passion to make positive change in their communities. During this special week, we thank the volunteers who make it possible for the MS Society to help so many Canadians with MS.

If you're not yet a volunteer, this is a great time to consider becoming one!

You could join our Family & Friends and Neighbourhood Drive to help spread the word about MS and raise funds for vital research.



To learn more, visit our website at mssociety.ca/en/give/family&friends.htm or call 1-800-361-2985.

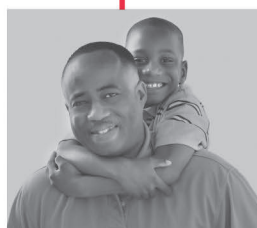
Or if you'd like to get involved with your local MS Chapter, simply contact your division office at 1-800-268-7582

2004



Link between vitamin D and reduced risk of MS identified.

2004



MSSRF funds groundbreaking study of pediatric MS for \$4.3 million.

2011



Health Canada approves Gilenya® (fingolimod) capsules, the first oral therapy developed for relapsing-remitting MS.

Spring Events

World MS Day is May 29.

Last year, World MS Day was commemorated by more than 73 countries around the world. Go to mssociety.ca to learn how Canada will be honouring this special occasion.



Show your support – Wear a carnation.

This May, volunteers across Canada are showing their dedication to finding a cure by selling carnations on street corners, malls and other public spaces. If you can, please help raise awareness about multiple sclerosis by purchasing a carnation.



MS Walk: Every step matters.

This spring, walk to help change lives for the better – beginning right where you live. Your participation will help fund innovative programs in your community and support groundbreaking research dedicated to finding a cure. Visit mswalks.ca for more information.



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signs in spinal fluid of possible benefit, and also found slowing in the rate of brain tissue loss (atrophy). While there are some known potential adverse events related to the use of Tysabri, the investigators did not identify any new safety issues. (A large, phase III trial in people with secondary-progressive MS is underway.)

• Teriflunomide reduces relapse rate in relapsing-remitting MS

Results of the TOWER study, the second phase III study to be completed in relapsing-remitting MS, showed that, compared to placebo, a 14mg dose of teriflunomide reduced relapse rate by 36.3% and reduced the risk of disability progression by 31.5%. The most common adverse events included headache, liver enzyme elevations, hair thinning, diarrhea, nausea and reduction of white blood cells (neutropenia). (Abstract 153)

• New treatment approach decreases lesions in relapsing-remitting MS

AIN457 (secukinumab) is a monoclonal antibody given by monthly IV infusion, which is being developed by Novartis. Results of a small proof-of-concept trial in 73 people with relapsing-remitting MS decreased active lesions MRI scans significantly over placebo. AIN457 neutralizes an immune messenger called interleukin-17A, which has been implicated in MS disease activity. A follow-up clinical trial is planned.

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In addition to reporting on treatment options and clinical trials, the conference also included news about research into the underlying processes involved in MS, risk factors for the disease, myelin and nervous system repair, and rehabilitation.

* Source: National MS Society, USA

Check Out the MS Research Portal

We know that many Canadians with MS are eager to learn more about research studies that are seeking participants. That's why we created the MS Research Portal, a centralized online resource for studies across the country. If you're interested, simply go to msresearch.ca. You can look for studies by province or Canada-wide, that you may be able to participate in.

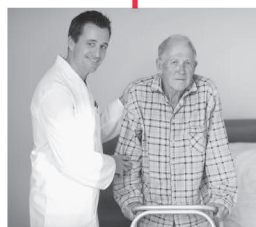
MSC-NL3-S13

2011



MSSRF funds a \$3.8 million study on progressive forms of MS.

2012



The first oral treatment for improved walking performance in patients with MS is available.

As you can see, thanks to the support of people like you, research is moving us forward toward a world without MS. Together, in the 21st century, we're building toward the day when the word "cure" will close out our timeline.