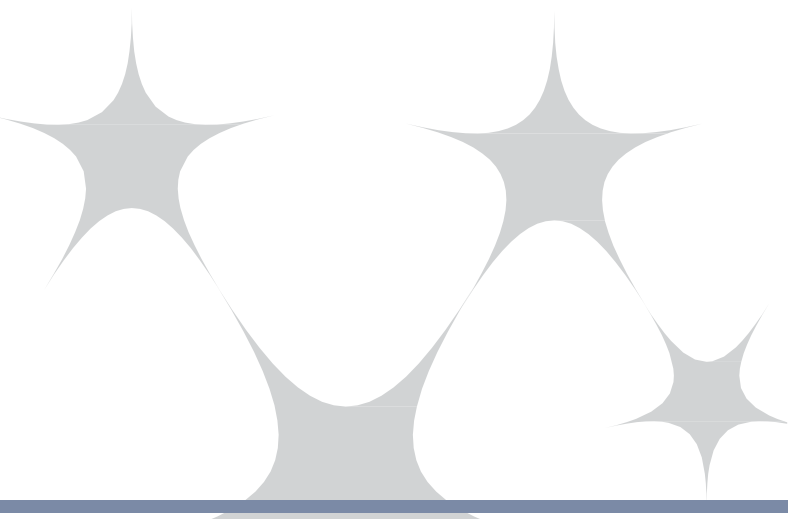


Take Home Messages

RIMS Workshop - Rehabilitation in Progressive MS

December 13, 2019

Milan, Italy

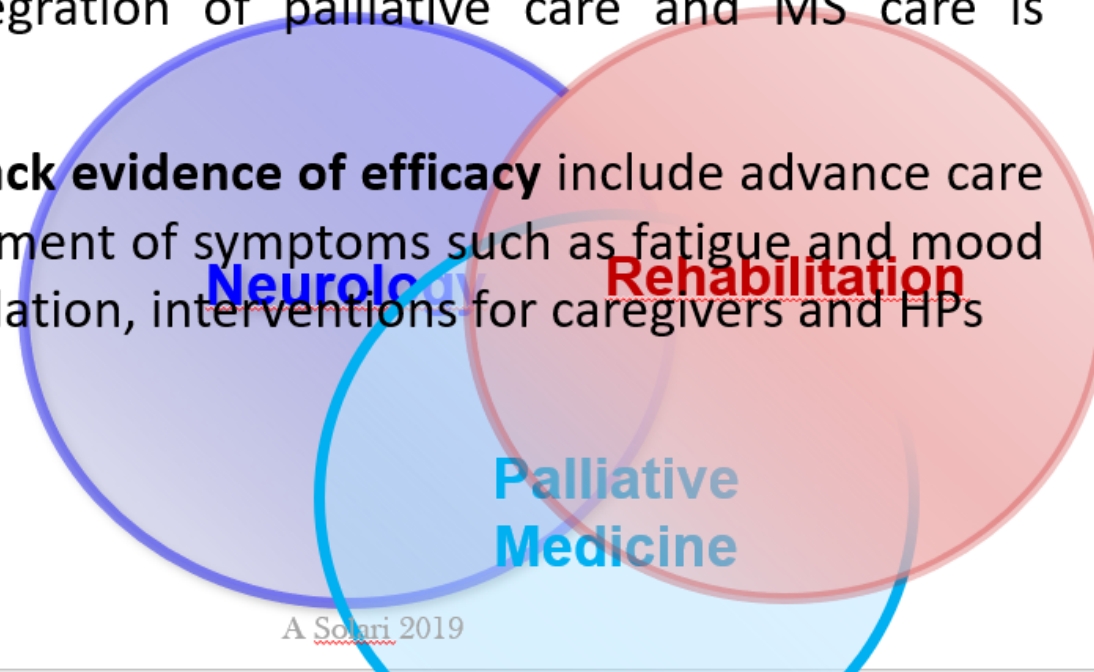


KEY NOTE II: Palliative Care in MS – *Dr. Alessandra Solari*

The **provision of palliative care** (either general or specialist, home-based, inpatient or outpatient) is recommended with weak strength for patients with severe MS

40/41 guideline recommendations are **of weak strength**: Further research on the integration of palliative care and MS care is needed

Areas that currently **lack evidence of efficacy** include advance care planning, the management of symptoms such as fatigue and mood problems in this population, interventions for caregivers and HPs



PRACTICAL SESSION I: Physical Outcome Measures in MS – *Mr. Anders Skjerbaek*

Four simple and valid physical outcome measures in MS:

9-Hole Peg Test :Assessment of dexterity
25-foot walk test: Short walking (speed) test
Six Spot Step Test :Walking, Balance and coordination
5 times Sit To Stand : Lower extremity muscle strength

To ensure valid test results

Minimize bias from the tester and
from the test-person

To become a valid tester

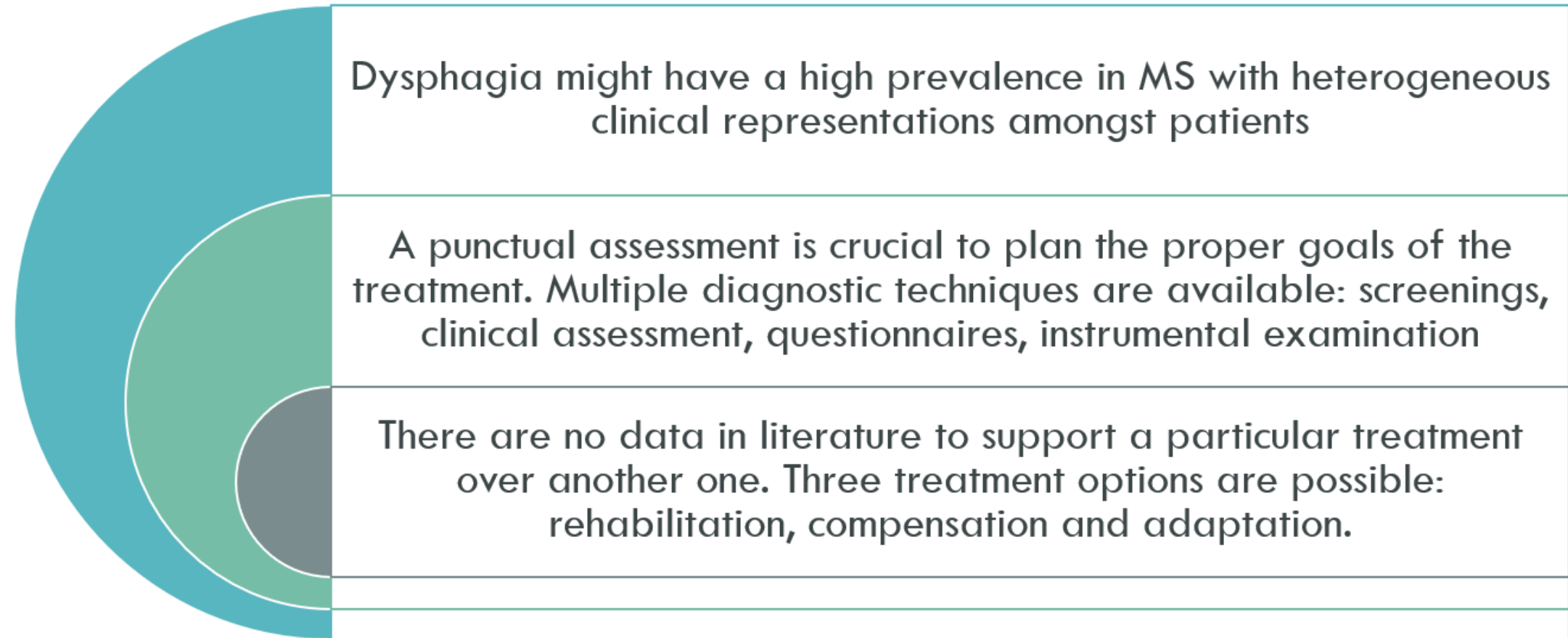
....you need to practice 😊



PRACTICAL SESSION I: Managing Time and Energy in Daily Life – *Prof. Daphne Kos*

- Life of people with (progressive) MS is more than medical management and ADL
- Interests (often) do not change
- Create awareness of strategies and devices to manage time and energy
- Take into account: person, activity, environment

PRACTICAL SESSION I: Dysphagia in MS – *Mrs. Francesca De Biagi*



PRACTICAL SESSION I: Management Techniques Bladder and Bowel Problems – *Dr. Sara Rinaldi & Mr. Piet Eelen*

- Evaluation (identify symptoms)
- Define targets (to improve autonomy and reduce problems)
- Set \ execute \ monitor the rehabilitation program

KEY NOTE III: Treating progressive MS: the Disease Modifying Drugs Perspective – *Dr. Marco Rovaris*

- A deeper understanding of disease physiopathology is needed for a better treatment
- At present prevention (risk reduction) still represents a more effective strategy
- Future goals are:
 - Targeting (residual) inflammation
 - Fostering remyelination and neuroprotection
 - Stimulating and favouring neuroplasticity (by combining drugs and rehabilitation)

KEY NOTE IV: Rehabilitation in Progressive MS – *Prof. Jenny Freeman*

- Evidence still limited, but accumulating
- Focus must change along disease continuum
(health promotion, restoration, compensation)
- 1% of pwMS time is spent with health professionals
- Equip people with skills and knowledge

KEY NOTE V: Implications of Exercise in Progressive MS – *Dr. Ulrik Dalgas*

1. Only few and small exercise studies dedicated to progressive MS, but findings are positive and resemble the general exercise findings in MS
2. “Exercise is medicine in MS” and more focus on prevention and building of reserve capacity should be adopted when prescribing exercise to MS patients
3. Early interventions, use of technology and combined interventions may move the MS exercise field forward
4. Ageing, long-term adherence, relapse management and understanding the underlying mechanisms remain challenges in relation to MS and exercise

PRACTICAL SESSION II: Robotic and Wearable Devices – *Dr. Davide Cattaneo & Dr. Giampaolo Bricchetto & Dr. Margherita Monti Bragadin*

- hunova evaluates the rehabilitation of each clients and offers a personalized rehab strategy
- hunova transforms exercise into gaming motivating the client during each step of the rehab process
- Hunova provide in real time outcomes from each clinic and each client

PRACTICAL SESSION II: Neuropsychological rehabilitation – Cognitive Training and other Techniques – *Dr. Jessica Podda & Dr. Andrea Tacchino*

- Systematic assessment of cognitive functioning should be integrated in daily clinical practice.
- Cognitive rehabilitation treatments should be administered in an adaptive, customized and intensive way.
- Further studies are required to produce higher levels of evidence for cognitive rehabilitation research and develop new technologies to promote accessible, at-home, and self-managed cognitive intervention for PwMS.



PRACTICAL SESSION II: Priming Rehabilitation – *Dr. Ludovico Pedullà & Prof. Marco Bove*

1. Age and fatigue may influence LTP-like plasticity
2. Aerobic exercise can be a suitable substrate for rehabilitation (increasing LTP reserve)
3. Attention should be driven to LTP-like and maladaptive plasticity mechanisms

A big thank you to ..

- the Don Carlo Gnocchi Foundation and the Italian MS Society Foundation, who co-organized this 2nd RIMS Workshop
- the Sponsors & Exhibitors
- the international and local faculty
- all delegates!

Let's meet again in Leuven at the RIMS Annual Conference 2020 !



*European network for
best practice and research*

Annual RIMS Conference

**Collaborate and Engage
in Personalised Rehabilitation**

**June 4-6, 2020
Leuven, Belgium**

www.rims-annualconference.org/Leuven2020

IN
PARTNERSHIP
WITH

KU LEUVEN

National
MS center
Melsbroek

