Diagnosis and Treatment of Multiple Sclerosis
Nomination Summary Document

Results of Topic Selection Process & Next Steps

- Diagnosis of multiple sclerosis was found to be addressed by a 2011 systematic review on the accuracy of diagnostic tests in multiple sclerosis. Given that the existing review covers this aspect of the nomination, no further activity will be undertaken on this topic.


- Treatment of multiple sclerosis will go forward for refinement as a systematic review. The scope of this topic, including populations, interventions, comparators, and outcomes, will be further developed in the refinement phase.

- When key questions have been drafted, they will be posted on the AHRQ Web site and open for public comment. To sign up for notification when this and other Effective Health Care (EHC) Program topics are posted for public comment, please go to http://effectivehealthcare.ahrq.gov/index.cfm/join-the-email-list1/.

Topic Description

Nominator: Individual
Nomination Summary: The nominator discusses developing a survey to examine the early warning signs of multiple sclerosis

Staff-Generated PICO – Diagnosis of multiple sclerosis
Population(s): Patients suspected of having multiple sclerosis due to neurologic deficits of subacute onset
Intervention(s): MRI, cerebrospinal fluid testing, evoked potentials, clinical findings
Comparator(s): Comparison of diagnostic techniques alone or in combination
Outcome(s): Diagnostic accuracy, time to diagnosis, patient-oriented outcomes (e.g., delay of disease progression, quality of life, prevention of complications)

Staff-Generated PICO – Treatment of multiple sclerosis
Population(s): Patients with multiple sclerosis or clinically isolated syndrome
Intervention(s): Disease-modifying therapies for delay of relapse and disability, treatments to address symptoms of multiple sclerosis, including pharmaceutical and non-pharmaceutical treatments
Comparator(s): Comparative effectiveness of disease-modifying therapies, comparative
effectiveness of treatment within each symptom category (e.g., fatigue, spasticity, disability)

**Outcome(s):** Prevention or delay of disability, improved function, alleviation of spasticity, prevention of complications, quality of life, delay of disease progression, reduced relapse rates

**Key Questions from Nominator:** None

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**Considerations**

- The topic meets all EHC Program selection criteria. (For more information, see [http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/](http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/).)

- The original nomination discusses development of a survey to identify early warning signs of MS. In order to approach the nomination with a comparative effectiveness framework, it was expanded to a consideration of the comparative effectiveness of diagnostic and treatment interventions for MS.

- There is a significant body of literature on the diagnosis and treatment of MS. The diagnosis of MS is largely covered by a 2011 systematic review by Shaffler and colleagues titled *Accuracy of Diagnostic Tests in Multiple Sclerosis—A Systematic Review.*

- MS is a chronic, autoimmune disease of the central nervous system that can cause significant physical, mental, and emotional disability. There is no cure for MS; treatments aim to reduce the frequency and hasten recovery from relapses and exacerbations, slow disease progression, provide symptomatic relief, and maximize independence and physical abilities at all stages of MS. While there are many reviews that address a range of issues pertinent to the treatment of MS, there is not a product that pulls together all the information on the treatment of MS. Therefore, treatment of MS will move forward as a systematic review.