

In A Nutshell
May 2019
New Kids on the Block

Two new MS therapies have been FDA approved in March, 2019.

Mavenclad (cladribine)

Mavenclad (cladribine) is a purine antimetabolite.

Mavenclad is specifically indicated for the treatment of relapsing forms of multiple sclerosis (MS), to include relapsing-remitting disease and active secondary progressive disease, in adults. Because of its safety profile, use of Mavenclad is generally recommended for patients who have had an inadequate response to, or are unable to tolerate, an alternate drug indicated for the treatment of MS. The mechanism by which cladribine exerts its therapeutic effects in patients with multiple sclerosis has not been fully elucidated but is thought to involve cytotoxic effects on B and T lymphocytes through impairment of DNA synthesis, resulting in depletion of lymphocytes.. Mavenclad is supplied as a tablet for oral administration. Mavenclad can be taken with or without food. The tablets can be taken with water and swallowed whole without chewing. The recommended cumulative dosage of Mavenclad is 3.5 mg per kg body weight administered orally and divided into 2 yearly treatment courses.

Mayzent (siponimod)

Mayzent (siponimod) is a sphingosine1-phosphate receptor modulator.

Mayzent is specifically indicated for the treatment of relapsing forms of multiple sclerosis (MS), to include clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease, in adults.

Mayzent is supplied as a tablet for oral administration.

Will either of these be the therapies that works the best for you?

<https://www.centerwatch.com/drug-information/fda-approved-drugs/drug/100369/mavenclad-cladribine->

<https://www.centerwatch.com/drug-information/fda-approved-drugs/drug/100367/mayzent-siponimod>

Just for Fun

With each new therapy we get closer to a cure.

The following US Food and Drug Administration (FDA) approved disease modifying therapies for MS have been found through clinical trials to reduce the number of relapses, delay progression of disability, and limit new disease activity (as seen on MRI).

- **Injectable medications**
 - [Avonex](#) (interferon beta-1a)
 - [Betaseron](#) (interferon beta-1b)
 - [Copaxone](#) (glatiramer acetate)
 - [Extavia](#) (interferon beta-1b)
 - [Glatiramer Acetate Injection](#) (glatiramer acetate -generic equivalent of Copaxone 20 mg and 40 mg doses)
 - [Glatopa](#) (glatiramer acetate - generic equivalent of Copaxone 20mg and 40mg doses)
 - [Plegridy](#) (peginterferon beta-1a)
 - [Rebif](#) (interferon beta-1a)
- **Oral medications**
 - [Aubagio](#) (teriflunomide)
 - [Gilenya](#) (fingolimod)
 - [Tecfidera](#) (dimethyl fumarate)
 - **[Mayzent \(siponimod\)](#)**
 - **[Mavenclad \(cladribine\)](#)**
- **Infused medications**
 - [Lemtrada](#) (alemtuzumab)
 - [Novantrone](#) (mitoxantrone)
 - [Ocrevus](#) (ocrelizumab)
 - [Tysabri](#) (natalizumab)
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<https://www.nationalmssociety.org/Treating-MS/Medications>