

SOUTHWESTERN NEWS

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UT SOUTHWESTERN TESTING NEW MULTIPLE SCLEROSIS TREATMENTS

DALLAS — March 10, 1997 — Physicians at UT Southwestern Medical Center at Dallas are beginning to test the effectiveness of two new treatments in the battle against multiple sclerosis, the most common neurological disease among young adults.

Patients are being sought for the vaccine trials, said Dr. Elliot Frohman, assistant professor of neurology and ophthalmology and director of the medical center's multiple sclerosis (MS) program. Frohman is the principal investigator for both studies. The trials are open to any area MS patients who meet the criteria necessary for inclusion.

In the case of the T-lymphocyte vaccine, patients will be injected with a replica of a portion of the T-cell receptor that may be attacking the myelin in MS sufferers. The deterioration of myelin — nerve fiber insulation — provokes the symptoms of MS. If the vaccine is effective, it will create an immune response against patients' own, damaging, T-cell receptors.

The second trial involves treating patients with a fragment of basic myelin protein, the major protein in myelin. Researchers hope the T-lymphocytes might recognize the injected protein and render these cells inactive and thereby become less able to attack myelin.

Frohman said these drugs, if successful, would affect only a specific portion of the immune system, as opposed to other therapies, which suppress the entire immune system.

"It's too early to know how successful these drugs will be, but we are encouraged by the fact that MS patients are being offered promising alternatives," Frohman said.

Researchers are seeking about 20 patients for each project. For the first trial, the T-lymphocyte vaccine, Frohman needs patients who stopped using MS drugs at least one month before beginning this new treatment. For the second trial, doctors will work solely with patients who formerly had the remitting/relapsing form of multiple sclerosis but who now experience more persistent symptoms (secondary progressive MS). Also, in order to

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participate in the second trial patients need to have ceased using beta interferon or other MS drugs for more than three months.

Participants also need to be mobile so that researchers can more easily evaluate their progress. The trials will last one year. If the results are promising, the drug trials could be broadened. Ten centers around the nation will test the first medication, with UT Southwestern serving as the only Texas site. UT Southwestern and the University of California, San Francisco, are the sites for the second drug trial.

Frohman said he is scheduled to take part in several other drug trials later in the year. While MS is a highly destructive disease that continues to baffle researchers, steady advances have been made in recent years in evaluating and treating the disorder, which tends to strike otherwise healthy individuals in their 20s and 30s. An estimated 7,000 individuals in the region suffer from MS.

In the last two years, UT Southwestern has developed a comprehensive care center that employs the expertise of neurologists, physical therapists, clinical psychologists and neuro-urologists.

A major threat facing individuals diagnosed with MS is paralysis. Symptoms differ greatly between cases; however, all patients face uncertain futures that could include speech impairment, weakness, sensory and visual loss, and tremor.

Researchers have conflicting opinions regarding the cause of MS, and they cannot explain why it affects more women than men or why it tends to be more common in people from cold climates. The disease eventually disables some of its sufferers, but other patients undergo a sudden episode of MS symptoms that later abate and never recur. A predisposition to develop MS may have a prominent genetic component.

The first drug trial is being supported by Connective Therapeutics, while Anergen Inc. is the sponsor of the second trial.

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