Norte, Caicó, Brazil; [g]Pharmacy, Universidade Federal da Paraíba, João Pessoa, Brazil; [h]Pedagogy, Universidade Estadual Vale do Acaraú, João Pessoa, Brazil

Introduction: Multiple sclerosis (MS) is a chronic neurological disease, inflammatory, demyelinating and immune-mediated of the Central Nervous System, affecting, in the form of plaque lesions, white matter of the brain and spinal cord.

Objective: Evaluate epidemiological, clinical, evolutionary and therapeutic aspects of patients treated at the Reference Center for Multiple Sclerosis of Paraíba (CREMPB).
Method: Observational, cross-sectional and descriptive study with qualitative-quantitative approach, based on a review of medical records of patients treated between November 2012 to April 2015. Seven variables were assessed: gender, skin color, age of the first outbreak, time diagnostic in years, family history, clinical presentation and use of disease-modifying drugs.
Results: Prevalence of the disease in females at a ratio of 3.3:1, in white (52.1%), with age of the first outbreak between the 3rd and 5th decade of life (50.7%) and diagnostic time equal or more than five years (52.8%). Negative family history (88.7%), prevalence of clinical form relapsing-remitting (66.2%), followed by secondary progressive form (31.7%). Among the disease-modifying drugs, predominated the beta-interferons (subcutaneous β1A: 37.3%, intramuscular β1A: 16.2% and β1B: 16.2%).
Conclusion: This study will contribute to the understanding of MS at the state of Paraiba, and help to guide the care and coordinate with otther medical centers of Brazil and the world.

doi:10.1016/j.jns.2015.08.1102

1036
WFN15-1172
MS & Demyelinating Diseases
Perception, knowledge and quality of life in 64 patients with multiple sclerosis treated at a Brazilian reference center

B.E.S. Oliveira[a], I.H.S. Dantas[b], L.F.S. Santos[c], L.F. Souza[d], P.V. Nóbrega[e], I.S.S. Dantas[f], A.C. Silva[g], A.B. Silva[h]. *[a]Medicine, Universidade Federal do Amazonas, João Pessoa, Brazil; [b]Medicine (Student), Faculdade de Ciências Médicas da Paraíba, João Pessoa, Brazil; [c]Nurse, Escola de Enfermagem Santa Emília de Rodat, João Pessoa, Brazil; [d]Nurse, Universidade Federal da Paraíba, João Pessoa, Brazil; [e]Medicine, Universidade Federal da Paraíba, João Pessoa, Brazil; [f]Medicine (Student), Universidade Federal do Rio Grande do Norte, Caicó, Brazil; [g]Pedagogy, Universidade Estadual Vale do Acaraú, João Pessoa, Brazil; [h]Pharmacy, Universidade Federal da Paraíba, João Pessoa, Brazil*

Introduction: Multiple sclerosis (MS) is a chronic neurological disease that can cause significant impact on patients' lives. Consideration of these effects is critical in the clinical management and monitoring of the disease evolution.

Objetive: Evaluate the perception, knowledge and quality of life in patients from the Reference Center for Multiple Sclerosis of Paraíba (CREMPB), Brazil.
Methods: 64 MS patients were studied, based on review of records and interviews of patients treated between November 2012 to April 2015. The cases were analyzed by seven variables: patient's reaction at the time of diagnosis, prior knowledge about the disease, limitation to the activities of daily living (ADL), physical activity, memory impairment, need of support to walk and presence of voiding symptoms.
Results: 62.5% of patients had difficulty accepting the diagnosis, but understanding the disease helped the acceptance process. 92.1% of patients were unaware about the disease when they were diagnosed. On the other hand, 54.6% of patients reported some kind of limitation to the ADL and 51.5% said they didn't perform any physical activity. The memory changes were predominant in 64.0% of the patients and 72.5% didn't use support to walk. 56.2% did not present voiding dysfunction, but when affected (43.8%), there was a predominance of urgency and urinary retention.
Conclusion: MS has a variable impact on quality of life of patients. Recognizing this impact is important on the clinical management, therapeutic and multidisciplinary approach of the disease.

doi:10.1016/j.jns.2015.08.1103

1037
WFN15-0444
MS & Demyelinating Diseases
Monthly pulse methylprednisolone as an add-on therapy is effective in long-term treatment of relapsing remitting multiple sclerosis

S. Ozakbas[a], B. Piri Cinar[b], T. Kahraman[c], G. Kosehasanogullari[d], D. Oz[a]. *[a]Department of Neurology, Dokuz Eylul University, Izmir, Turkey; [b]Department of Neurology, Giresun State Hospital, Giresun, Turkey; [c]Dokuz Eylul University, Izmir, Turkey; [d]Usak State Hospital, Usak, Turkey*

Background: Although some conflicting results, there are some evidences for beneficial treatment effects of long-term pulsed intravenous methylprednisolone (IVMP) and combination of interferon beta (IFNB) and pulsed methylprednisolone in multiple sclerosis (MS), but more evidence are needed to establish clinical practice for such a treatment strategy.
Objectives: To evaluate the efficacy of monthly pulse methylprednisolone treatment added to IFNBs or Glatiramer acetate (GA) in breakthrough MS.
Methods: MS patients receiving ongoing IFNBs treatment were eligible if they had Expanded Disability Status Scale (EDSS) scores of 5.5 or less. Patients with at least two relapses or at least one relapse and new T2 or gadolinium enhanced lesion within the previous year. Patients received 1 g pulse IVMP once a month at least one year.
Results: A total of 89 (58 female) patients finished the one year study period. Relapse rate was decreased from 1.6/ year to 0.3/year ($p = 0.000$). 64 patients (65.3%) became relapse free. Mean EDSS score was decreased significantly from 3.01 ± 2.3 to 2.89 ± 1.82 ($p = 0.012$). Female patients responded better than male patients based on both relapse and disability. Health related quality of life (HRQoL) measured by MUSIQoL was significantly improved in the study population ($p = 0.005$).
Conclusions: Our data suggested that methylprednisolone given in pulses every 4 weeks as an add-on therapy to subcutaneous interferon beta-1b, interferon beta 1a and glatiramer acetate in patients with relapsing-remitting multiple sclerosis leads to a significant reduction in relapse rate and disease progression. Significant improvement in HRQoL was also found in the study group. However, these findings need to be corroborated in larger cohorts.

doi:10.1016/j.jns.2015.08.1104

1038
WFN15-0446
MS & Demyelinating Diseases
Utilization of the brief international cognitive assessment for multiple sclerosis during treatment of relapses in patients with multiple sclerosis

O. Oztürk[a], B. Piri Cinar[b], S. Ozakbas[a]. *[a]Department of Neurology, Dokuz Eylül University, Izmir, Turkey; [b]Department of Neurology, Giresun State Hospital, Giresun, Turkey*