

MS Links

Fall-Winter 2025

HolyName 

The Alfiero & Lucia Palestroni Foundation Multiple Sclerosis Center



Letter from the Medical Director

Welcome to the Fall-Winter edition of MS Links. Many patients look forward to fall and cooler temperatures, as heat can often worsen some MS symptoms.

As we began writing this newsletter, I had just returned from the European Committee for Treatment and Research in Multiple Sclerosis, the largest international MS educational meeting. There were 9,600 attendees from around the world!

Here are just a few of the highlights of the program:

- **An Epstein-Barr vaccine, which may help prevent MS, is in development.** The virus, which causes mononucleosis, increases the risk of developing MS. In fact, we often detect prior exposure to this virus when we test patients.
- **Finding and treating MS early gives us the best chance to slow down disability.** New guidelines for diagnosing MS let doctors make an accurate diagnosis sooner. Now we can sometimes find MS on MRI scans before symptoms start; this is called Radiologically Isolated Syndrome. Problems in the optic nerve and signs of inflammation are also considered early warning signs.
- **The number of people diagnosed with MS worldwide is rising.** This may be because we diagnose it better, more people know about MS, and people with MS are living longer. Researchers are studying how to tell which changes are from MS and which are from normal aging.
- **We've made big progress controlling the inflammatory part of MS.** New treatments reduce relapses and MRI activity. Infusion medicines like Ocrevus and Briumvi work well for this, but some patients still get worse over time, even while on these drugs. One big unmet need is better treatments for people with non-relapsing progressive MS.

The Next Steps in MS Care

Scientists are now focusing on ways to repair the nervous system, a process known as **remyelination**. The goal is to restore function and slow long-term decline. Maintaining your overall health is crucial to this. Here are some tips:

- Get regular aerobic exercise
- Ensure you're getting enough vitamin D
- Manage your hormones, which can affect immune cells involved in MS

Chimeric Antigen Receptor Therapy (CAR T) is another exciting new treatment. It takes a patient's T-cells, changes them so they target the B-cells that attack myelin, and then returns them to the body. This can lower inflammation and may slow progression. CAR T is still in Phase 1 trials to test safety because it can cause strong inflammatory reactions, but early results show promise for improving function and slowing disability.

Lastly, in this newsletter, you'll read about:

- **Frexalimab**, a drug being studied for non-relapsing progressive MS.
- **BTK inhibitors**, a drug class that lowers B-cell activity without fully removing B-cells. The first BTK drug, tolebrutinib, may get FDA approval soon.

Our center remains committed to innovation and delivering better treatments for our patients. There is no one-size-fits-all in MS care; every person is unique, so treatment plans are personalized.

I hope you enjoy reading more about these therapies and more in this newsletter.

Mary Ann Picone, MD

Mary Ann Picone, MD, Medical Director, MS Center

ASK THE EXPERT



Should I Take Vitamin D Supplements?

Mary Ann Picone, MD
Medical Director, MS Center

Several clinical research studies support the use of vitamin D supplements in the treatment of multiple sclerosis.

A recent study found that taking vitamin D supplements not only helped decrease the risk of developing MS but also decreased MS disease activity.

What You Can Do

While fish like salmon, tuna, sardines, tilapia, and flounder are good sources of vitamin D, it's not easy to get enough of it from foods and drinks that contain it naturally. Consider choosing foods and drinks fortified with vitamin D, and talk with your healthcare provider to determine if you need a supplement.

If taking supplements is right for you, aim for a blood level of 50 to 100 ng/mL. The dose necessary to achieve these levels is usually 5,000 to 10,000 IU daily; however, the correct amount depends on your current blood level.

- Get your level checked so your doctor can pick the right dose for you.
- Don't rely on sun exposure to raise your vitamin D. Heat can worsen MS symptoms, and sunscreen—which helps prevent skin cancer—reduces vitamin D production.
- Talk with your doctor before starting supplements to make sure the dose is safe and appropriate for you.



Andrea Greene, LCSW

6 Strategies for Managing Holiday Stress



Being around friends and family during the holidays can bring warmth, laughter, and maybe even an extra helping of your favorite food. But stress and overwhelm shouldn't be part of the celebration.

According to the American Psychological Association, 93% of Americans reported feeling more stressed during the 2023 holiday season. Common reasons include overspending, family tensions, or feeling left out when the season doesn't match everyone's traditions.

While some stress may be unavoidable, learning to manage it can help you enjoy this time of year more fully. Here's how:

1. **Budget wisely:** It's easy to overspend on gifts and events, but expensive presents don't accurately measure love or friendship. Sticking to a budget helps prevent future financial stress.
2. **Plan ahead:** Make a schedule for shopping, cooking, and gatherings. Also, set aside time to rest and recharge. If you'll be spending time alone, consider planning meaningful activities, such as volunteering or attending community events.
3. **Manage expectations:** Things might not go perfectly—and that's okay. Stay flexible and focus on what truly matters, rather than getting caught up in small setbacks.
4. **Practice gratitude:** Take a moment to reflect on what made your year special and who you're thankful for. Gratitude helps shift your focus from stress to appreciation.
5. **Pay it forward:** Helping others—through donations, volunteering, or a simple kindness—can boost your mood and strengthen your sense of connection.
6. **Find meaning:** Focus on what's most important to you this season, whether it's family, faith, rest, or community.

Most importantly, let your celebrations reflect your values. By keeping your priorities in mind and taking care of yourself, you can make the holidays both peaceful and meaningful.



Scan to view the photo gallery.

Events Help Raise Funds for MS Care

This year, Holy Name’s centennial coincided with the 40th anniversary of the Alfiero & Lucia Palestroni Foundation Multiple Sclerosis Center, making our **MS** fundraisers especially momentous.

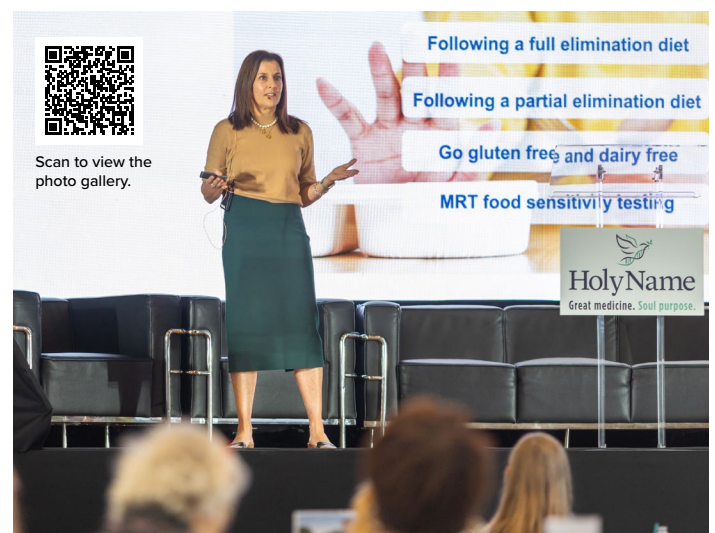
In April, the Holy Name Foundation hosted the **25th Annual Spring Fashion Show for MS**, welcoming nearly 400 guests to the Teaneck Marriott at Glenpointe, as MS patients, donors, and staff took to the runway to the beat of a feel-good soundtrack. Guests enjoyed brunch, a 50/50 raffle, and an auction featuring high-end prizes.

The celebration continued in November at the annual **MS Awards Dinner** at The Venetian, where 200 members of Holy Name’s MS community gathered for dinner, music, dancing, and an awards ceremony recognizing:

- **The Joan Perkowski Cashin Foundation**, which received the Lawrence R. Inserra Leadership Award for its generous support of the MS Center and the Sister Claire Tynan School of Nursing.
- **Asya Wallach, MD, neurologist and MS specialist**, who received the MS Center Distinguished Service Award for her clinical expertise and compassionate care.

We are grateful to Larry R. Inserra, Jr., for his loyal support and leadership of both hallmark MS events, which he co-chairs with Foundation trustee and MS patient Susan Zurndorfer (Fashion Show) and Joseph M. Sanzari (Awards Dinner).

Another milestone event in 2025 was Holy Name’s first **Women’s Health Symposium**, held in October at the Sister Claire Tynan School of Nursing. Nearly 200 attendees learned about the top health issues for women from a distinguished panel led by Foundation trustee and gynecologic oncologist Sharyn Lewin, MD.



Scan to view the photo gallery.



Frexalimab

A New Treatment Being Studied for MS

Asya Wallach, MD - Neurologist, MS Center

Frexalimab is an exciting new medication being studied for the treatment of multiple sclerosis (MS). It's part of a new wave of therapies that aim to calm the immune system without weakening it too much. This could mean fewer relapses, less long-term damage, and fewer side effects.

How Does It Work?

Frexalimab is a monoclonal antibody, which means it's a lab-made protein that targets a specific part of the immune system. It blocks a pathway called CD40/CD40L, which helps certain immune cells become overactive. These cells—like B-cells, T-cells, microglia, and macrophages—are believed to play a role in both MS relapses and disease progression.

Unlike some MS treatments that broadly suppress the immune system, frexalimab takes a more focused approach. This may help reduce inflammation while keeping the rest of your immune system working normally.

What Studies Have Shown So Far

According to the *New England Journal of Medicine*, in a recent study that lasted about two and a half years:

- People who got frexalimab through monthly IV infusions had **89% fewer relapses** after just 12 weeks.
- They also had **92% fewer new or growing brain lesions** on MRI scans.
- A blood test showed a **40% drop in inflammation markers**, which may mean less damage to the nervous system.
- Many patients said they felt better physically and had less fatigue.
- The most common side effects were mild and included sore throat, headache, COVID-19, and back pain.
- Importantly, frexalimab **did not lower white blood cell counts**, which suggests it may be safer than treatments that suppress the immune system more broadly.

MS is a complex disease. Some treatments work well for relapses but don't slow down long-term progression. Frexalimab may help with both. By calming the immune system in a targeted way, it could protect the brain and spinal cord while reducing flare-ups. This is especially promising for people who are looking for effective treatment options with fewer risks of infections or immune-related complications.

Researchers are also looking at whether frexalimab works better as an IV infusion or as an injection under the skin.

To learn more about MS studies at Holy Name, visit holyname.org/ClinicalResearch or email Diome Kramer, our clinical research nurse coordinator, at dkramer@holyname.org.

BUILDING MS AWARENESS

One Social Media Story at a Time

Jodi McCaffrey

Natalie Caez was no stranger to movement. A former photojournalist and social media content creator, she thrived on high-intensity workouts, solo travel, nights out dancing, walks with her dog Kiko, and the daily hustle of New York City life. When she began experiencing subtle symptoms in 2017—tingling, numbness, and electric shock sensations in her legs—she wasn't too concerned. However, when she uncharacteristically fell while running in 2023, she could no longer ignore the signs.

"I averaged 15,000 steps a day, but for the first time in three years of running, I tripped over my feet while running a four-mile race," explained Natalie. "I fell just feet before the finish line, and I knew something was wrong."

Despite repeated visits to her primary care physician, she was told her symptoms stemmed from low vitamin D. It wasn't until she sought out a rheumatologist that her path toward answers began. The rheumatologist, recognizing the complexity of Natalie's symptoms, referred her to neurologist Joseph Petrusic, MD, at Holy Name Medical Center.

"It wasn't until they did a brain scan that they saw I had lesions—multiple white spots in the white matter," Natalie explained. "That's when everything started to make sense."

After months of uncertainty, Natalie was officially diagnosed with MS in September 2024, just two months shy of her 41st birthday. The diagnosis marked a turning point—not only in her health journey but in her outlook on life. The initial months post-diagnosis under the care of Asya Wallach, MD, at the MS Center were physically and emotionally exhausting. Natalie relied on a cane for mobility and had to adjust her new lifestyle. But now, with a treatment plan that includes Ocrevus infusions and intensive physical therapy, she is seeing a major improvement.

"I can walk several blocks, and haven't needed a cane since April," she said. "I've made so much progress since my diagnosis, and I'm doing everything in my power to keep moving forward. It's been a journey for me to get to a place of acceptance. I'm learning to have patience with myself, especially on challenging days."

Natalie credits the MS Center's team—especially the nurses in the infusion center—for their unwavering support. Her care



is closely monitored by Dr. Wallach, who tracks her progress through strength and mobility assessments every three months. Adjusting to life with MS has meant reimagining her career and daily routines. Once immersed in the fast-paced world of digital media, Natalie now works in an office three days a week and remotely on Mondays and Fridays.

Despite the fatigue and physical limitations, Natalie remains committed to finding joy in new ways. She continues to share her MS journey on social media, a practice she finds both therapeutic and empowering.

"I'm not positive all the time, but I won't give up on myself," she explained. "There's a grieving process—not being able to do the same things in the same way, grieving what you envisioned your life to be—but you can still live a full life. It's just going to look differently."

Through therapy, community support, and the compassionate care she receives at Holy Name, Natalie continues to move forward—one step, one story, one solo date at a time.

"All I can do is keep moving forward and adjusting to this new version of me," she said. "The life before MS and the life after MS. It's been a journey for me to get to a place of acceptance. I'm learning to have patience with myself, especially on challenging days. I celebrate my small wins."

HOLY NAME PHARMACARE

Your Prescription for Convenience

Managing MS means juggling doctor visits, infusion appointments, and a steady supply of medications. Holy Name PharmaCare is a hospital-based pharmacy that makes medication care easier and kinder for people with MS. Located at the rear entrance of the hospital, it works like a stand-alone pharmacy with the added benefit of onsite clinical support.

Carla Goldberg, PharmD, CCP
Pharmacy Manager,
Holy Name PharmaCare



What PharmaCare Offers

- **Easy access to MS medications** - Both brand-name and generic prescriptions are available.
- **Meds-to-Bed program** - If you're an inpatient or have same-day procedures, PharmaCare can deliver your discharge meds before you leave. They also bring medications to clinics such as the MS Center during infusion visits.
- **Home delivery and curbside pick-up** - Convenient options if mobility or transportation is a challenge. Delivery is available to most addresses in Bergen and Hudson counties.
- **30-day and 90-day supplies** - Choose the option that fits your treatment plan and routine.
- **Online refills and text alerts** - Simple ways to keep your prescriptions on schedule.
- **Expert staff** - Pharmacists and certified pharmacy technicians are available to answer medication questions and help you manage side effects or interactions.
- **Manufacturer discounts** - Our team looks for savings to help lower your treatment costs.
- **Vaccines** - We offer vaccines for the flu (including high-dose), COVID-19, pneumonia, shingles, and other conditions.

PharmaCare is connected to the medical center's services, which helps keep your care coordinated. If you receive infusions, wound care, or other outpatient services at Holy Name, the pharmacy can deliver medications directly to those departments, so you don't need to make extra trips. Having pharmacists onsite means quick, trusted medication advice when treatment decisions are made.

Getting Started

- To **transfer** prescriptions from another pharmacy, call 201-530-7991.
- To fill a **new prescription**, ask your clinician to e-prescribe directly to Holy Name PharmaCare.

For convenience, expert advice, and local delivery tied to your care team, consider making Holy Name PharmaCare your go-to pharmacy. Visit holyname.org/pharmacy to learn more.



A FAMILY FIGHTS TOGETHER

Digna and Yanni's MS Journey

Jodi McCaffrey



At Holy Name's MS Center, stories of resilience unfold every day. One of the most inspiring comes from Digna Nunez and her son Yanni—two patients, one diagnosis, and a shared journey of strength, acceptance, and hope.

Digna was diagnosed with multiple sclerosis at age 40 after experiencing frequent falls and memory lapses.

"I made a major mistake at work and forgot something really important," the Kearny resident recalls. "That's when I knew something was wrong."

After seeing multiple specialists, it was a neurologist recommended by her mother who confirmed the diagnosis. Since 2008, Digna has been under the care of neurologist Mary Ann Picone, MD, at Holy Name. She began with injectable treatments and transitioned to Tysabri in 2010. Though MS has affected her mobility and ended her career, Digna's outlook remains remarkably positive: "I realized my job wasn't the most important thing—my life is. My son is."

A Mother's Worst Fear

Yanni was just 16 when he, too, was diagnosed with MS. It took six months of testing to confirm the diagnosis. During that time, the active high school soccer player was hospitalized, homeschooled, and became deeply depressed.

"On December 19, he was fine. On December 20—his birthday—he was paralyzed on his left side," Digna says. "He didn't want to eat. He kept to himself, and he didn't want to hear about the outside world anymore. He even turned away from his faith."

But everything changed when Yanni started working, landing a job in the physical therapy department at Holy Name. Now 25, he works directly with MS patients, offering encouragement rooted in his own lived experience.

"I love what I do," Yanni says. "I'm staying active, walking 20,000 steps a day. I share my diagnosis with PT patients so they can see what's possible. I'm not a regular person saying 'do this.' I know exactly what they are going through."

Digna beams with pride. "He's back to the person he was before. He met his girlfriend at work. He started seeing life differently."

Outside of treatment, Digna has found joy in unexpected places. At Dr. Picone's encouragement, she took up drawing—something she'd never done before. She also cooks traditional Honduran dishes, such as Montuca and oxtail stew, often teaching Yanni how to prepare them. She even participated in a clinical trial, motivated by Yanni's diagnosis.

"I wanted to help find a new therapy for us. Well, mainly for him," she shares. "I wanted to do what I could to try to help him."

For the Nunez Family, MS is part of their story—but not their whole story. Both have found a way to turn their MS journeys into opportunities to spread positivity.

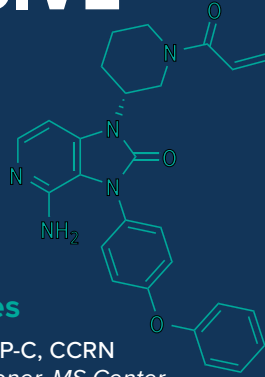
"The nurses at Holy Name tell me, 'You're always happy, always smiling.' And I say, 'I'm happy because I'm alive. Everyone should be happy that they woke up today.'"

NEW PILL OFFERS HOPE IN PROGRESSIVE MS FIGHT



Dana Jones

MSN, AGPC NP-C, CCRN
Nurse Practitioner, MS Center



There's important news for people living with non-relapsing secondary progressive MS. A drug company is working to get a new pill called tolebrutinib approved, and early results are very hopeful.

This medicine is a special kind of oral pill that's taken once a day, making it a convenient option compared to injections or infusions. Tolebrutinib is designed to target the "slow burn" damage—called smoldering neuroinflammation—that makes disability symptoms worse. The drug is different because it can get past the brain's protective barrier to calm down the immune cells that are causing damage inside the brain and spinal cord.

Results from a major study showed that this pill slowed down how quickly a person's disability got worse by 31% compared to a placebo. Researchers say it also made patients nearly twice as likely to see an improvement in their disability. If this pill is approved, it would be the first of its kind specifically for treating non-relapsing secondary progressive MS.

While the medicine was generally well-tolerated in clinical trials, some patients experienced side effects, including the common cold, flu, and headaches. The most serious concern was a small number of cases of liver injury, mostly in the first three months of treatment. Given this consideration, baseline and follow-up liver function testing is recommended after starting the medication.

The U.S. Food and Drug Administration (FDA)—the government agency responsible for approving new drugs—is still reviewing the data. The final decision is expected in late December of this year. In the meantime, these results offer a real reason to be optimistic about a future treatment that targets the progressive side of MS.



Healthy Holiday Eating 5 Strategies to Strike a Balance

Debbie Bessen, MS, RD, CLT, Nutrition Outreach Manager

'Tis the season for all things decadent! With parties, luncheons, dinners, and endless celebrations, food and drink seem to take center stage. While there's plenty to enjoy and celebrate, somehow the "holiday season" now stretches from Halloween candy to New Year's brunch—usually without much mindfulness.

Balance is Key

Enjoy your traditions but also create new ones that include the gift of wellness. It's all about frequency; your daily choices impact your health, but an occasional sweet treat won't derail your overall wellbeing and health goals. Try these simple strategies to keep your health habits in balance this season:

Use smaller plates: Small dishes help control portion sizes. Studies have shown that people tend to eat less when using smaller plates.

Prioritize vegetables and protein: Start your plate with salads, vegetables, and lean proteins (chicken, fish, turkey, beans, tofu). Once you are satisfied, enjoy smaller portions of your favorite treats.

Arrive prepared: Eat a light, balanced snack before heading to a holiday event to prevent overeating. A piece of fruit with a handful of nuts or some vegetables with hummus are great options.

Stay hydrated: Thirst can sometimes masquerade as hunger. Drink water before and during meals to help manage your appetite. Mocktails can also be a fun, festive, non-alcoholic alternative to holiday cocktails.

Mindful eating: Put your fork down between bites and really enjoy what you are eating. Chew thoroughly and give your brain time to catch up and signal that you are full.

ASK THE EXPERT

Menopause & Multiple Sclerosis

Many women with MS ask: “I’m going through menopause. I’m not sleeping well, I feel foggy, and I’m slowing down. Is it my hormones or my MS?”

It’s a good question—and the answer isn’t always clear-cut. Menopause and MS can share similar symptoms, but understanding what’s behind your changes can help you feel better and get the right support.



What Is Menopause?

- **Menopause** happens when you’ve gone 12 months without a period (not due to pregnancy or birth control). It usually starts around age 50 or 51.
- **Perimenopause** is the transition leading up to menopause. It can last several years and cause hormone shifts and irregular periods. These changes happen in all women—whether or not they have MS.

Hormones or MS?

Some menopause symptoms can feel like MS symptoms:

- Trouble sleeping
- Mood swings or brain fog
- Hot flashes and night sweats
- Bladder issues (urgency, leakage, infections)

That’s why it’s important to talk to your care team—your neurologist, gynecologist, and primary doctor. There are treatments that can help.

Treatments That May Help

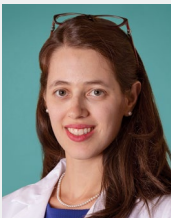
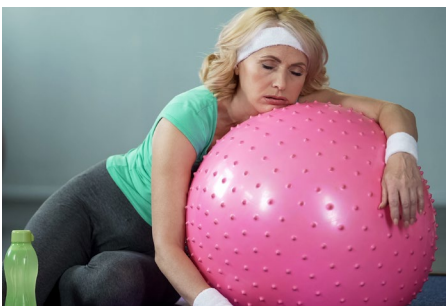
- **Sleep** is often the easiest place to start. Poor sleep can worsen your thinking and mood. Improving sleep may help with brain fog and emotional changes.
- **Vaginal estrogen** and **pelvic floor therapy** can ease bladder symptoms.
- **Therapies** like cognitive behavioral therapy, mindfulness, and hypnosis can help with sleep, mood, and hot flashes.
- **Lifestyle changes** like eating well, exercising (especially yoga and strength training), and quitting smoking can make a big difference.
- **Supplements** like soy isoflavones and red clover may help—but always check with your doctor first.
- **Medications** like Paxil, Zoloft, Effexor, Neurontin, and Lyrica may help with hot flashes, mood, and nerve pain.

Is HRT for Me?

Hormone replacement therapy (HRT) may help with hot flashes, night sweats, and bladder issues—especially for women under 60 or within 10 years of menopause. It also may protect against bone loss, which is more common in people with MS.

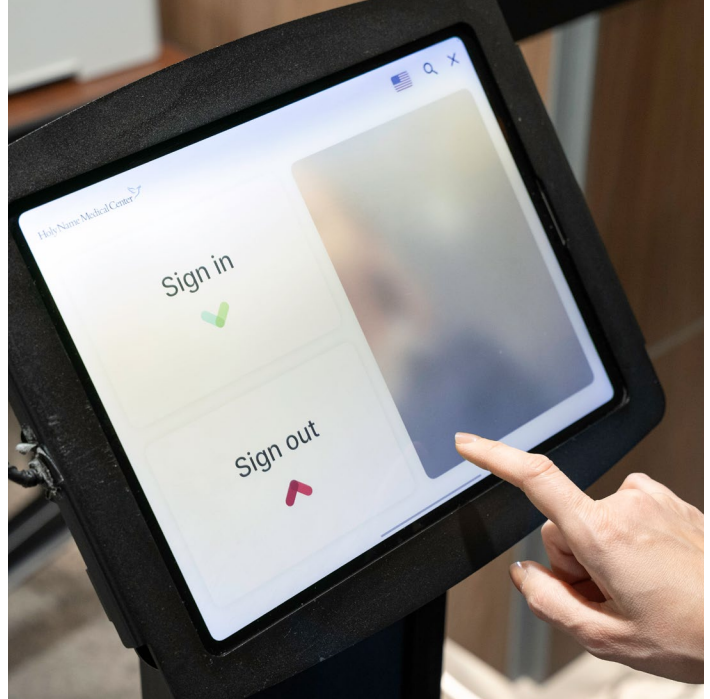
We don’t yet have strong evidence that HRT treats MS directly, but some studies suggest estrogen might help in the future. In younger women with MS who used birth control along with MS medications, relapse risk dropped by up to 37%. And, according to early studies, a type of estrogen called estriol may help with cognitive function and brain changes.

Menopause and MS can overlap in confusing ways—but you don’t have to figure it out alone. Talk to your care team. There are many options to help you feel better, sleep better, and stay strong.



Asya Wallach, MD
Neurologist, MS Center

IMPORTANT UPDATES You Should Know



We want to keep you informed about several important updates and reminders that will help ensure you have a smooth visit and continued access to our programs and services.

New Safety Procedures

For the safety of all patients, visitors, and hospital staff, **everyone must stop at the main lobby to obtain a visitor badge** before proceeding to the MS Center. We appreciate your cooperation in helping maintain a secure and welcoming environment.

New EMR System Transition

Our practice is transitioning to a **new electronic medical record (EMR) system** to enhance your care experience and communication with our team. During this transition, please **allow extra time for your appointments** and plan to arrive at **least 15 minutes early** to ensure a smooth check-in process.

Insurance Reminder for 2026

As 2026 approaches, please remember that **most benefit policies reset on January 1**. Be sure to understand your deductible, copay, and out-of-pocket maximums so you're not surprised in the new year. Contact your insurance provider if you have questions about the specific details of your plan.

Ongoing MS Center Events

Monthly Lunch and Learn

Open to anyone impacted by MS and their loved ones, this series is an opportunity to discuss topics related to living with MS. Held on the first Thursday of each month, past topics include eye issues in MS, vestibular therapy, navigating your health insurance, and treating yourself as a whole. Hosted by Dana Jones, NP-C.

Monthly Mindfulness Mondays

In this engaging 30-minute session held on the third Monday of the month, we explore the transformative practice of mindfulness. Whether you are new to mindfulness or looking to deepen your practice, this webinar is designed to offer valuable insights and practical tools to help you live a more mindful and present life. Hosted by Andrea Greene, LCSW.

Stay Connected with Us

Don't miss out on updates about new services, health programs, seasonal clinics, and community events.

More information about these events—including how to register—will be sent by email, so make sure we have your current email address. Staying connected ensures you'll always be informed about the latest opportunities to support your health and wellness. Add mscenter@holynome.org to your contact list so our messages don't go to spam. ***We look forward to seeing you at our next event!***

ASK THE EXPERT

When can I get vaccinations if I am on a Disease-Modifying Therapy (DMT)?



As your MS specialists, we know how important it is for you to stay healthy, and that includes getting your vaccinations. Many of the medications we use, called disease-modifying therapies (DMTs), can affect how well your body responds to a vaccine, so timing is everything.

When it comes to non-live vaccines, like your yearly flu shot, the COVID-19 vaccine, or the Tdap (tetanus, diphtheria, and pertussis) booster, you can usually receive them, but we need to time them carefully around some of your stronger MS treatments.

Medication-Specific Vaccine Guidance

For patients on:

- **S1P receptor modulators** (fingolimod, Zeposia, Ponvory, Mayzent) – These medications work by keeping key immune cells (lymphocytes) out of circulation in your blood. Because the cells that make the protective antibodies are “hiding,” it is generally recommended that you receive non-live vaccines at least two weeks before starting the medication to ensure the best possible immune response. If you are already on the drug, your body may not respond as well, but vaccination is still generally safe.
- **B-cell therapies** (Ocrevus, Briumvi, Kesimpta, Rituxan) - The timing is a bit more critical; try to get your vaccines at least four weeks before your first dose. If you are already receiving infusions, the best time to get a vaccine is generally one to two months before your next scheduled dose, when the cells that fight infection are starting to recover. For Kesimpta, we may recommend skipping a dose or taking it mid-month, depending on whether it is a live or non-live vaccine.
- **Fumarates** (Tecfidera, Vumerity) or **interferons** (Betaseron, Rebif) - These medications generally do not affect your ability to get non-live vaccines, and no special timing is needed.
- **Mavenclad** (cladribine) - The timing is important because it temporarily lowers your white blood cell count. You can get non-live vaccines at any time, but if you are due for your next course, we may plan the vaccination to be a few weeks before your next dose.



Dana Jones

MSN, AGPC NP-C, CCRN
Nurse Practitioner, MS Center

It is crucial to remember that you should never get a live vaccine—such as the MMR (measles, mumps, and rubella) or the yellow fever vaccine—if you are currently taking any of the immunosuppressive DMTs, including S1P receptor modulators, B-cell therapies, or Mavenclad. Because these medications temporarily lower your immune defenses, a live vaccine could potentially make you sick. If a live vaccine is absolutely necessary, it must be completed four to six weeks before you begin one of these specific MS treatments.

Ultimately, before you schedule any vaccine, please always call the office. We'll work together to review your specific DMT schedule and make a plan to keep you safe and fully protected.



**The Alfiero & Lucia Palestroni Foundation
Multiple Sclerosis Center**

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