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Poster Presentation

Interferon beta-a1 vs. Teriflunomide for Multiple Sclerosis

Ayda Radfar*

Student Research Committee, Faculty of Medicine, Mashhad University of Medical Sciences, Mashhad, Iran

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Abstract

Multiple sclerosis (MS) is an inflammatory disorder, in which neurons in central nervous system (CNS) become demyelinated. MS is named for its formation of plaques due to sclerosis of myelin. Variable degree of demyelination results in mild, mediate or severe symptomatic episodes of this disease. It is commonly characterized by recurrent relapses and often followed by severe neurological disabilities. The hallmark of its symptom is optic neuritis, muscular spasms, depression, anxiety and dysphagia. Etiology of MS is uncertain. However, it is mostly believed to be an autoimmune disease in which T and B lymphocytes disintegrate oligodendrocytes which are in charge of myelin production. Therefore, Interferon beta -1a and Teriflunomide seem to improve such condition as they inhibit proliferation of leukocytes. Nonetheless, there are some inconsistencies concerning their outcome. The aim of this study was to designate one of them to optimal remedy option. 40 percent of the resources regarding Teriflunomide denied its potency for prospective treatment as a result of frequent relapse-remitting of MS, as well as liver problems, hair loss, nausea and diarrhea. 20 percent of this category confirmed 90 percent desired result and the rest ensured demanded outcome. On the other hand, though, 100 percent of the resources concerning Interferon beta-1a confirmed its efficacy with minor side effects. In a general sense, forthcoming outcome of prescribing Interferon beta-a1 for multiple sclerosis patients is foreseen more beneficial.

Keywords: Interferon, Teriflunomide, Multiple sclerosis

***Corresponding Author:** Ayda Radfar

E-mail: Ayda.1375@gmail.com