



**P**lanning for each Consortium of Multiple Sclerosis Centers (CMSC) Annual Meeting begins well before the previous meeting ends. Like many of you, I look forward to hearing about new developments in MS care, updating my knowledge, and spending time with old and new friends. June Halper and the CMSC staff's commitment to sharing updates and best practices in MS care will not be stopped by the coronavirus pandemic. The CMSC quickly adapted the conference to a virtual format. Accepted abstracts will be published here as usual, and there will be a mini poster session online with selected abstracts.

The CMSC is not the only group making adjustments in these unprecedented times. Health care has been disrupted for many people living with MS, and practices are adapting care delivery to meet ongoing needs. This means an all-hands-on-deck approach and attempts to obtain data outside the health care setting. Thotam and Buhse surveyed patient satisfaction at two MS centers. Patients were highly satisfied with their experiences with nurse practitioners or physicians, particularly when the visits were longer than 20 minutes. A team approach can improve access while maintaining high levels of satisfaction with care. In the article offering continuing education credit, Mate and Mayo compare walking capacity in the clinic setting to accelerometer measurements in patients' normal environment. Walking cadence and bouts of walking outside of the clinic setting were affected by availability of walkable areas and mood.

People with MS are encouraged to exercise, and it is generally assumed that exercise will improve mood. Gascoyne and colleagues present a systematic review of the effect of exercise on anxiety. More focused studies are

needed to determine if exercise can help anxiety in people with MS and if specific types of exercise have more effect than others. Imbalance is one of the reasons that people with MS may be concerned about falling and thus reluctant to walk or exercise. Garg and colleagues describe clinical metrics for evaluating gaze and postural response. These measures have good reliability, which makes them potentially useful for initial evaluation and for monitoring response to treatment. Arpan and colleagues studied neuroanatomical correlates of postural deficits with eyes open and eyes closed. Postural deficits at baseline and worsening over 2 years were inversely associated with spinal cord cross-sectional area.

People newly diagnosed with MS may struggle with uncertainty and anxiety. Garabedian and colleagues describe common themes and questions from participants in two monthly support groups dedicated to newly diagnosed patients. One of the key themes that emerged was uncertainty about disease course and future disability. Scott and colleagues demonstrated the impact of disease-modifying therapies (DMTs) by comparing a cohort of patients diagnosed in the modern era to the natural history of MS in the pre-DMT era. It is reassuring to see reports from large centers describing a lower percentage of patients with severe disability at 15 years and longer time to reach moderate disability.

We are focused on maintaining excellent care for people with MS. Past Editor-in-Chief Dr. Lael Stone would be sure to remind us that self-care is important. We hope you remain safe and remember to do something to take care of yourself today.

—Mary Alissa Willis, MD  
*Associate Editor*



## HERNDON AWARD FOR OUTSTANDING IJMSC ARTICLE

The Consortium of Multiple Sclerosis Centers (CMSC) presents an annual award, the Herndon Award for Outstanding IJMSC Article, for the best article published in the *International Journal of MS Care* during a given calendar year. The award carries a \$1000 stipend and is named in honor of Robert M. Herndon, the founding editor of IJMSC. The winner of the 2019 award will be announced in August as part of the 2020 Virtual Annual Meeting of the CMSC (see <https://cmscscholar.org/2020-virtual-meeting/>).