

Amiloride, fluoxetine or riluzole to reduce brain volume loss in secondary progressive multiple sclerosis: the MS-SMART four-arm RCT

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†A list of MS-SMART Investigators is provided in the *Acknowledgements*.

Declared competing interests of authors: Marie Braisher has received funding from the UK MS Society and the National Institute for Health Research (NIHR) Local Clinical Research Network. Ferran Prados receives a Guarantors of Brain fellowship. Sebastien Ourselin receives funding from the Engineering and Physical Sciences Research Council (EP/H046410/1, EP/J020990/1, EP/K005278), the Medical Research Council (MR/J01107X/1), the European Union's Seventh Framework Programme for Research (FP7-ICT-2011-9-601055) and NIHR University College London Hospitals Biomedical Research Centre (BW.mn. BRC10269). Frederik Barkhof serves on the editorial boards of *Brain*, *European Radiology*, *Journal of Neurology*, *Neurosurgery and Psychiatry*, *Neurology*, *Multiple Sclerosis and Neuroradiology*, and serves as a consultant for Bayer Schering Pharma AG (Berlin, Germany), Sanofi-Aventis (Paris, France), Biogen-Idec Limited (Maidenhead, UK), TEVA Pharmaceutical (Petah Tikva, Israel), Genzyme (Cambridge, MA, USA), Merck Serono (Darmstadt, Germany), Novartis International AG (Basel, Switzerland), F. Hoffmann-La Roche Ltd (Basel, Switzerland), Synthon (Nijmegen, the Netherlands), Janssen Research (Beerse, Belgium) and H. Lundbeck A/S (Copenhagen, Denmark). Claudia AM Gandini Wheeler-Kingshott has received research grants (principal investigator and co-applicant) from Spinal Research (London, UK), Craig H. Neilsen Foundation (Encino, CA, USA), Engineering and Physical Sciences Research Council (Swindon, UK), Wings for Life-International (Salzburg, Austria), UK MS Society (London, UK), Horizon 2020, University College London Hospital and Biomedical Research Centre. Sharmilee Gnanapavan has received honoraria and meeting support from Biogen-Idec Limited, Novartis International AG, TEVA Pharmaceutical, Genzyme and research funds from Genzyme. Gavin Giovannoni is a steering committee member on the daclizumab trials for AbbVie, the BG12 and daclizumab trials for Biogen-Idec Limited, the fingolimod and siponimod trials for Novartis International AG, the laquinimod trials for TEVA Pharmaceutical and the ocrelizumab trials for F. Hoffmann-La Roche Ltd. He has also received consultancy fees for advisory board meetings for oral cladribine trials for Merck Serono, Sanofi Genzyme (Cambridge, MA, USA) and in relation to Data and Safety Monitoring Board activities for Synthon BV (Nijmegen, the Netherlands), as well as honoraria for speaking at the Physicians Summit and several medical education meetings. He is also the co-chief editor of *Multiple Sclerosis and Related Disorders* (Elsevier, Amsterdam, the Netherlands). In the last 3 years, Jeremy Chataway has received support from the Efficacy and Mechanism Evaluation (EME) programme, a Medical Research Council (MRC) and NIHR partnership, and the Health Technology Assessment (HTA) programme (NIHR), the UK MS Society, the US National MS Society and the Rosetrees Trust (London UK). He is supported in part by NIHR University College London Hospitals, Biomedical Research Centre, London, UK. He has been a local principal investigator for a trial in multiple sclerosis funded by the Canadian MS Society; he has been a local principal investigator for commercial trials funded by Actelion (Allschwil, Switzerland), Biogen-Idec Limited, Novartis International AG and F. Hoffmann-La Roche Ltd; he has received an investigator grant from Novartis International AG; and he has taken part in advisory boards/consultancy for Azadyne Ltd (Canterbury, UK), Biogen-Idec Limited, Celgene Corporation (Summit, NJ, USA), MedDay SA (Paris, France), Merck & Co. Inc. (Kenilworth, NJ, USA) and F. Hoffmann-La Roche Ltd.

Published May 2020

DOI: 10.3310/eme07030

Plain English summary

The MS-SMART four-arm RCT

Efficacy and Mechanism Evaluation 2020; Vol. 7: No. 3

DOI: 10.3310/eme07030

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Plain English summary

Multiple sclerosis is a disabling and progressive neurological disease that affects approximately 120,000 people in the UK. Many people with multiple sclerosis experience two phases of disease called relapsing–remitting multiple sclerosis and secondary progressive multiple sclerosis. Relapsing–remitting multiple sclerosis is often characterised by periods of ‘attacks’ (relapses) interspersed with periods of ‘remission’ with no or few disease symptoms. The attacks are due to inflammation of the nerves and the insulation (called myelin) that surrounds the nerves. Secondary progressive multiple sclerosis, which ultimately affects most people with multiple sclerosis after 10–15 years from disease onset, results from nerve death (called neurodegeneration) and relentless disability. Unlike relapsing–remitting multiple sclerosis, there are few treatments with limited effects that can slow down the disability accrual in secondary progressive multiple sclerosis. MS-SMART (Multiple Sclerosis-Secondary Progressive Multi-Arm Randomisation Trial) was a randomised and blinded trial that investigated three drugs (i.e. amiloride, fluoxetine and riluzole) that showed potential to prevent nerve death in multiple sclerosis. Randomisation means that participants can get any one of the three active drugs or the inactive placebo/dummy; blinded means that neither the participants nor the investigators will know which drug (or placebo) the participants are receiving. All participants in MS-SMART were planned to have brain magnetic resonance imaging scans before starting the trial and after 96 weeks, which were used to measure brain shrinkage – a normal process of ageing that occurs faster in people with multiple sclerosis and is thought to reflect nerve death (neurodegeneration). Across 13 UK clinical neuroscience centres, 445 people with secondary progressive multiple sclerosis were enrolled and each person was followed up for 96 weeks between December 2014 and July 2018. When we completed our analyses, we found no difference in the brain shrinkage rates between participants receiving amiloride, fluoxetine or riluzole and the dummy, suggesting that these drugs do not prevent nerve death (neurodegeneration). The results also suggest that testing three drugs simultaneously in one trial (rather than one by one) is feasible in secondary progressive multiple sclerosis.

Efficacy and Mechanism Evaluation

ISSN 2050-4365 (Print)

ISSN 2050-4373 (Online)

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The EME programme is funded by the Medical Research Council (MRC) and the National Institute for Health Research (NIHR), with contributions from the Chief Scientist Office (CSO) in Scotland and National Institute for Social Care and Health Research (NISCHR) in Wales and the Health and Social Care Research and Development (HSC R&D), Public Health Agency in Northern Ireland.

This report

The research reported in this issue of the journal was funded by the EME programme as project number 11/30/11. The contractual start date was in April 2013. The final report began editorial review in April 2019 and was accepted for publication in November 2019. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The EME editors and production house have tried to ensure the accuracy of the authors' report and would like to thank the reviewers for their constructive comments on the final report document. However, they do not accept liability for damages or losses arising from material published in this report.

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