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Roberta Magliozzi

Scientific Secretariat

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Annalisa Colombi
Francesco Crescenzo

Damiano Marastoni
Marco Pitteri

100 Addressees

Medical Doctors specializing in
*neurology, neurosurgery, general medicine, radiology, geriatrics,
internal medicine, psychiatry, physical medicine e rehabilitation.*
Pharmacists, Speech Therapists, Nurses,
Physiotherapists, Rehabilitation therapists,
Psychologists-Psychotherapists,
Radiological technicians,
Neurophysiopathology technicians.

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The Silent
Disease Activity in

**MULTIPLE
SCLEROSIS**

Molecular and Imaging
Biomarkers

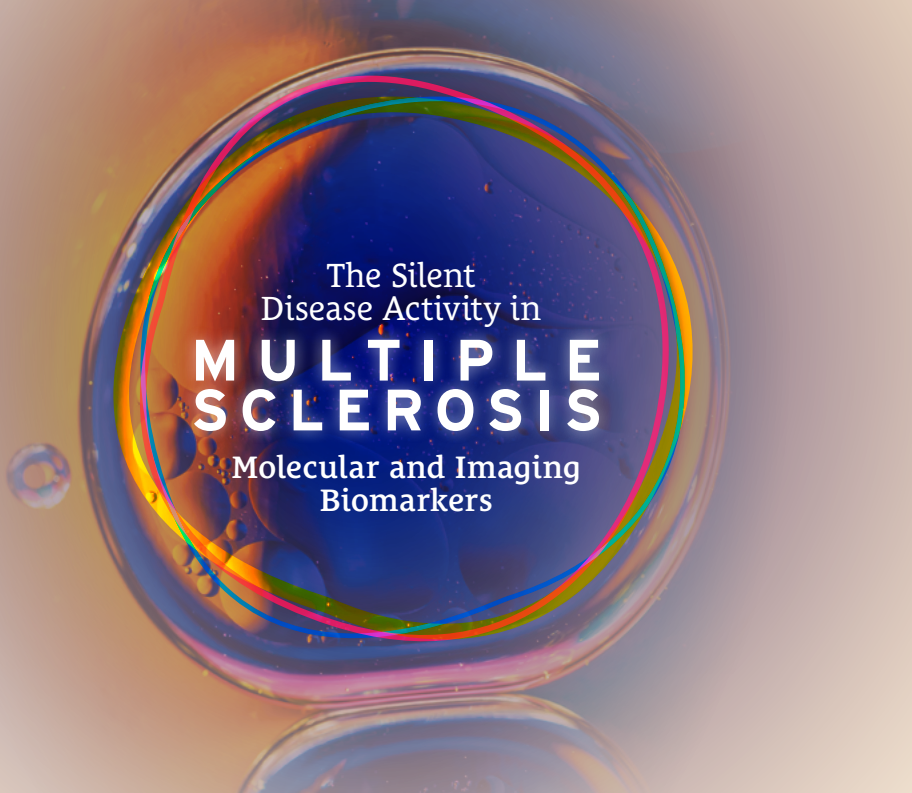
16th 17th
SEPTEMBER
2021

Centro Congressi Riva del Garda
Parco Lido 1

Riva del Garda



evento
IBRIDO



The concept of “silent” disease activity as a hallmark of the disease even in the earliest phase and during the disease-modifying treatment, is emerging in the last few years. It describes those patients that, even in the absence of classical clinical/radiological events, have an insidious disease activity which is unnoticed by the patient or physician in the early phase of the disease, whereas it becomes clinically relevant later on disease course. This could be mainly characterized by neurodegenerative mechanisms rather than inflammatory disease activity and its measure is fairly beyond the sensitivity of the conventional MRI. One of the expressions of such silent activity may be a surface-in gradient of cortical, thalamic and spinal cord grey matter damage, which is a primary key component of the demyelination and neurodegeneration processes and provides the best clinical correlate in terms of long term disability accumulation. A second emerging relevant sign of silent activity is represented by the chronic active lesions which have been neuropathologically and radiologically well described and which have been proposed as one of the major determinants of disability progression. According to this evidence, the unique use of No Evidence of Disease Activity (NEDA) status (no relapses, no new T2 and/or Gd-enhancing lesions, no EDSS change) is not completely appropriate to identify patients at high risk of a severe clinical outcome. The main goal of this symposium will be to better elucidate the most relevant molecular and radiological biomarkers of silent disease activity with special focus on Neuropathological, Imaging and CSF data.

16th

SEPTEMBER

8.30-12.30

YOUNG SESSION

È prevista una sessione dedicata ai giovani (età inferiore ai 35 anni) che vogliano presentare i loro dati in linea col tema del congresso.

Per partecipare è necessario inviare un abstract di massimo 500 parole a massimiliano.calabrese@univr.it includendo nome, cognome, numero di telefono **ENTRO IL 30 GIUGNO 2021**.

Saranno previsti Travel Grants per la presentazione degli abstracts selezionati.

8.30

Registration of participants

9.00

Welcome and Introduction to the Meeting

M. Calabrese and R. Magliozzi

9.10

Young Session 1

Chairs: A. Colombi, D. Marastoni and M. Pitteri

10.40

Coffee break

11.00

Young Session 2

Chairs: F. Crescenzo, A. Gajofatto and M. Castellaro

16th

SEPTEMBER

14.00-18.30

Registration of participants

Session 1

Chairs: M. Calabrese and R. Magliozzi

14.00

Key Lecture 1:
The neuropathological basis of the «Silent Disease activity»
Christine Stadelmann-Nessler, Gottingen

14.30

The role of GM damage in disability progression
A. Scalfari, London

14.55

The pathological basis of GM damage in MS
R. Reynolds, London

15.25

Cortical and deep GM atrophy
N. De Stefano, Siena

15.50

Cortical demyelination in MS from the imaging point of view
M. Calabrese, Verona

16.15

Coffee Break

Session 2

Chairs: M. Di Filippo and S. Monaco

17.00

Key Lecture 2:
Glia in MS: Culprit or Victim or Both
H. Lassmann, Wien

17.30

Iron related changes in MS: from neuropathology to MRI
S. Hametner, Wien

17.55

Iron and MS from the imaging point of view
M. Khalil, Graz

17th

SEPTEMBER

9.00-13.00

Registration of participants

Session 3

Chairs: F. B. Pizzini and M. Vercellino

9.00

Key Lecture 3:
Imaging Biomarkers of disease activity and progression
M. Filippi, Milan

9.30

Non-invasive quantification of inflammation, neuro-axonal and myelin injury in MS
M. Inglese, Genova

9.55

The role of Spinal cord in the disability progression
M. Rocca, Milan

10.20

Brain aging in MS
R. Nicholas, London

10.45

Coffee Break

Session 4

Chairs: A. Bertolotto and C. Solaro

11.15

Key Lecture 4:
B vs T cell in MS
R. Martin, Zurich

11.45

Meningeal inflammation in MS
O. Howell, Swansea

12.10

Intrathecal inflammatory profile predicts disease course in MS
R. Magliozzi, Verona

12.35

Can biomarkers reflect silent disease activity
L. M. Villar, Madrid

13.00

Closing remarks and proposal of a review
M. Calabrese and R. Magliozzi

13.15

ECM Questionnaire