

# MULTIPLE SCLEROSIS TREATMENTS

Generic	Brand	Strength	Form	Adult Dose
<b>ORAL FORMS</b>				
cladribine	<b>Mavenclad</b>	10mg	tabs	Give 3.5mg/kg cumulative dose divided into 2 yearly treatment courses (1.75mg/kg per treatment course). Each cycle: give 1–2 tabs once daily over 4–5 consecutive days. 1st course/1st cycle: start at any time; 1st course/2nd cycle: give 23–27 days after the last dose of 1st course/1st cycle. 2nd course/1st cycle: give ≥43wks after the last dose of 1st course/2nd cycle; 2nd course/2nd cycle: give 23–27 days after the last dose of 2nd course/1st cycle. 40–<50kg: 4 tabs per cycle; 50–<60kg: 5 tabs per cycle; 60–<70kg: 6 tabs per cycle; 70–<80kg: 7 tabs per cycle; 80–<90kg: 8 tabs in 1st cycle, then 7 tabs in 2nd cycle; 90–<100kg: 9 tabs in 1st cycle, then 8 tabs in 2nd cycle; 100–<110kg: 10 tabs in 1st cycle, then 9 tabs in 2nd cycle; ≥110kg: 10 tabs per cycle.
dimethyl fumarate	<b>Tecfidera</b>	120mg, 240mg	del-rel caps	120mg twice daily for 7 days, then increase to 240mg twice daily
diroximel fumarate	<b>Vumerity</b>	231mg	del-rel caps	Initially 231mg twice daily for 7 days, then increase to maintenance dose of 462mg twice daily. If maintenance dose not tolerated, temporarily reduce back to initial dose. Within 4wks, resume maintenance dose; if not tolerated, consider discontinuing.
fingolimod	<b>Gilenya</b>	0.25mg, 0.5mg	hard gel caps	(>40kg): 0.5mg once daily; (≤40kg): 0.25mg once daily. First dose monitoring for bradycardia or re-initiation of therapy: see full labeling
monomethyl fumarate	<b>Bafiertam</b>	95mg	del-rel caps	Initially 95mg twice daily for 7 days, then increase to maintenance dose of 190mg twice daily. If maintenance dose not tolerated, temporarily reduce back to initial dose. Within 4wks, resume maintenance dose; if not tolerated, consider discontinuing.
ozanimod	<b>Zeposia</b>	0.23mg, 0.46mg, 0.92mg	caps	Initiate dose titration regimen (Days 1–4): 0.23mg once daily; (Days 5–7): 0.46mg once daily. Maintenance (starting Day 8): 0.92mg once daily. Re-initiation after dose interruption (during 1st 2wks): start with Day 1 of titration regimen; (after the 1st 2wks): continue treatment as planned.
ponesimod	<b>Ponvory</b>	2mg, 3mg, 4mg, 5mg, 6mg, 7mg, 8mg, 9mg, 10mg, 20mg	tabs	Initially 2mg once daily on Days 1 and 2; 3mg once daily on Days 3 and 4; 4mg once daily on Days 5 and 6; 5mg once daily on Day 7; 6mg once daily on Day 8; 7mg once daily on Day 9; 8mg once daily on Day 10; 9mg once daily on Day 11; 10mg once daily on Days 12, 13, and 14. Maintenance: 20mg once daily on Day 15 and thereafter. Re-initiation of therapy after interruption for ≥4 consecutive doses: start with Day 1 of titration regimen.
siponimod	<b>Mayzent</b>	0.25mg, 2mg	tabs	Determine CYP2C9 genotype before initiation. <i>CYP2C9 genotypes</i> (*1/*1, *1/*2, or *2/*2): initially 0.25mg once daily on Day 1 and Day 2; 0.50mg once daily on Day 3; 0.75mg once daily on Day 4; then 1.25mg once daily on Day 5. Maintenance: 2mg once daily starting on Day 6. <i>CYP2C9 genotypes</i> (*1/*3 or *2/*3): initially 0.25mg once daily on Day 1 and Day 2; 0.50mg once daily on Day 3; then 0.75mg once daily on Day 4. Maintenance: 1mg once daily starting on Day 5. First dose 6hr monitoring for bradycardia, other abnormalities: see full labeling. Re-initiation of therapy after interruption for ≥4 days: start with Day 1 of titration regimen.
teriflunomide	<b>Aubagio</b>	7mg, 14mg	tabs	7mg or 14mg once daily
<b>INJECTABLE FORMS</b>				
alemtuzumab	<b>Lemtrada</b>	12mg/1.2mL	soln for IV infusion after dilution	≥17yrs: Infuse over 4hrs. First course: 12mg daily for 5 consecutive days; Second course: 12mg daily for 3 consecutive days given 12mos after first course. May administer subsequent courses as needed (12mg daily for 3 consecutive days given ≥12mos after last dose of any prior courses). Premedications, herpetic prophylaxis: see drug monograph.
glatiramer acetate	<b>Copaxone</b>	20mg/mL, 40mg/mL	soln for SC inj	20mg SC once daily or 40mg SC three times weekly (at least 48hrs apart). The 20mg/mL and 40mg/mL injections are not interchangeable.
interferon β-1a	<b>Avonex</b>	30mcg/0.5mL	soln for IM inj	30mcg IM once weekly. May titrate dose to reduce severity of flu-like symptoms; give once weekly, IM: Week 1: 7.5mcg. Week 2: 15mcg. Week 3: 22.5mcg. Week 4: 30mcg.
	<b>Rebif</b>	8.8mcg/0.2mL, 22mcg/0.5mL, 44mcg/0.5mL	soln for SC inj	4.4mcg 3 times per week for 2wks, titrate to 22mcg 3 times per week by Week 5 <b>OR</b> 8.8mcg 3 times per week for 2wks, titrate to 44mcg 3 times per week by Week 5. Give by SC inj in PM at least 48hrs apart.
interferon β-1b	<b>Betaseron</b>	0.3mg	pwd for SC inj after reconstitution	0.0625mg (0.25mL) SC every other day; increase by 25% every 2wks to target dose of 0.25mg (1mL) every other day
	<b>Extavia</b>			
mitoxantrone	—	2mg/mL	soln for IV infusion after dilution	12mg/m <sup>2</sup> IV over approx. 5–15mins every 3mos. Patients with LVEF <50%, significant reduction in LVEF, cumulative lifetime dose of ≥140mg/m <sup>2</sup> : not recommended.
natalizumab	<b>Tysabri</b>	300mg/15mL	soln for IV infusion after dilution	300mg IV over 1hr every 4wks
ocrelizumab	<b>Ocrevus</b>	30mg/mL	soln for IV infusion after dilution	Initially 300mg IV infusion, followed by a second 300mg infusion 2wks later, then 600mg infusion every 6mos thereafter. Premedicate with corticosteroid and antihistamine prior to each infusion; may consider antipyretic.
ofatumumab	<b>Kesimpta</b>	20mg/0.4mL	soln for SC inj	Initially 20mg SC at Weeks 0, 1, and 2, followed by 20mg once monthly starting at Week 4.
peginterferon β-1a	<b>Plegridy</b>	63mcg/0.5mL, 94mcg/0.5mL, 125mcg/0.5mL	soln for SC or IM inj	Initially 63mcg on Day 1, increase to 94mcg on Day 15, then 125mcg on Day 29 and every 14 days thereafter. May give by SC inj in abdomen, back of the upper arm, or by SC or IM inj in thigh(s). Consider analgesics and/or antipyretics for flu-like symptoms.

**NOTES**