

Obesity linked to increased risk for pediatric multiple sclerosis

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versus 0.72) and a higher rate of second-line treatment (56.8 versus 38.7 percent).

"The findings do not indicate that [obesity](#) promotes greater disease activity, but pharmacokinetic factors are more likely associated with treatment response," the authors write. "This suggestion may have relevant management implications given that a healthy weight may potentially optimize treatment outcomes and reduce disease-related burden and [health care costs](#)."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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(HealthDay)—Obesity seems to be associated with increased odds of pediatric multiple sclerosis (MS), according to a study published online July 15 in *JAMA Neurology*.

Brenda Huppke, M.D., from the University Medical Center Göttingen in Germany, and colleagues examined the correlation of obesity with pediatric MS risk and first-line therapy response in a retrospective study. A total of 453 patients with relapsing-remitting pediatric MS and a body mass index measurement taken within six months of diagnosis were included in the study.

The researchers found that 126 patients (27.8 percent) were overweight or obese at diagnosis, and obesity was associated with statistically significantly increased odds of MS in girls and boys (odds ratios, 2.19 and 2.14, respectively). Compared with nonoverweight patients, [obese patients](#) had statistically significantly more relapses on first-line [treatment](#) with interferon beta and glatiramer acetate (annualized relapse rate, 1.29

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