

Ethnocultural Considerations in MS Care: Place of Birth and Age at Time of Immigration



Study of Hispanic US immigrants with MS

- Place of birth and age at time of immigration used as proxies for acculturation
- Immigration categorized as early (<15 years of age) and late (≥15 years of age)

Findings

- Late-immigrants had more ambulatory disability compared with early-immigrants and US-born people with MS
- Less acculturation associated with more barriers to healthcare and less utilization of preventive services

Authors speculated that late-immigrants

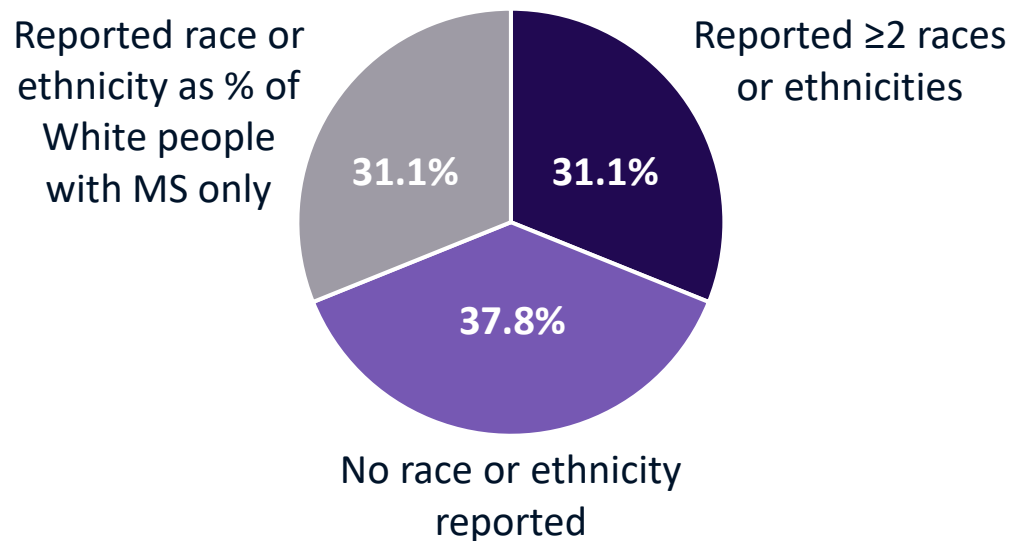
*“...may have low levels of acculturation and have more **acculturative stress** which could be preventing them from acquiring information about MS, utilizing MS services, and/or engaging in preventative measures that could **indirectly affect disease and MS progression.**”*

Low Participation of Minority Populations in MS Clinical Trials



Systematic review of 45 phase 3 clinical trials of MS DMTs

Reporting of race in phase 3 trials of DMTs



- Non-White populations may differ based on structural and social determinants of health, health care access, environment, or ancestry
- **Inadequate participation** of non-White people with MS may lead to **insufficient information regarding safety and effectiveness of DMTs**

Potential Barriers to Health Care Access, Utilization, and Participation in Research Among Minority US Groups



Education

Lack of education and/or low health literacy may keep patients from being informed about resources¹ and treatment options, including clinical trials²

Insurance status

Public services may not have resources or connections to enroll underinsured or uninsured patients in clinical trials²

Socioeconomic status

Cost-related concerns may affect adherence to therapy, including DMT³

Cultural beliefs

Illness perceptions

Religious beliefs^{4,5}

Mistrust of the medical community⁵

For example, in some Hispanic cultures, disease is thought to arise from strong emotions, which may affect adherence and other self-management behaviors⁶

1. Amezcua L et al. *Mult Scler Relat Disord*. 2015;4:25-30; 2. Onuorah HM et al. *Neurology*. 2022;98:e880-e892; 3. Amezcua L et al. *JAMA Neurol*. 2021;78:1515-1524;

4. Khan O et al. *Neurol Clin Pract*. 2015;5:132-142; 5. Rivas-Rodríguez E, Amezcua L. *Neurol Clin*. 2018;36:151-162; 6. Obiwuru O et al. *Int J MS Care*. 2017;19:131-139.