

Multiple Sclerosis and Pregnancy: *Expert Guidance on Care Across the Continuum*

KEY TAKEAWAYS

- Women's health and pregnancy are critical considerations in multiple sclerosis (MS) care.
- Each practice should establish its own processes and protocols that support patients' needs from preconception through postpartum care.
- Efforts should be made to select the most appropriate therapy for an individual patient to stabilize the disease before conception.
- The timing of discontinuation or completion of treatment courses before conception is critical, and these treatment plans must be individualized and based on shared decision making.
- To protect against postpartum relapses, high-efficacy disease-modifying therapy (DMT) should be started early after delivery.
- For patients who plan to breastfeed, several DMTs are compatible with lactation.
- Patients should be encouraged and empowered to seek information and build their own care teams to ensure appropriate expertise.
- If you're not comfortable or up to date with managing MS before, during, and after pregnancy, find someone who is!

RESOURCES

[Bove R, Sutton P, Nicholas J. **Women's health and pregnancy in multiple sclerosis.** *Neurol Clin.* 2024;42\(1\):275-93.](#)

[Graham EL, Bove R, Costello K, et al. **Practical considerations for managing pregnancy in patients with multiple sclerosis: dispelling the myths.** *Neurol Clin Pract.* 2024;14\(2\):e200253.](#)