Background and importance
Multiple sclerosis is a demyelinating neurodegenerative disease that affects SNC, caused by immune dysregulation associated with various factors. At the moment numerous therapies are available that change its course, slowing down its progression. C.T.O’s Neurology clinic has joined the FASM (Multiple Sclerosis Active Pharmacovigilance) project, a study underway in Campania since September 2018, which aims to collect the ADRs (Adverse Drug Reaction) related to the DMTs (Disease -Modifying Treatments) reported during clinical practice.

Materials and methods
In our sclerosis centre, during outpatient visits, there is a pharmacovigilance monitor that collaborates with the specialist in the collection of ADRs and then sends them to the pharmacovigilance manager and then insert them on the Net. In the period between September 2018 and April 2021, from the National PV network, we extrapolated the ADRs by age, gender, severity and SOC.

Conclusions and relevance
Pharmacovigilance activity is essential to collect safety data. Monitoring DMTs has made it possible to optimise care to maximise benefits and minimise risks. The FASM project has created a network between clinical and pharmacist such as to allow the sharing of clinical and epidemiological data.

Results
To date, out of 90 treatments, 45 reports have been collected, 22 of which are serious and 23 are non-serious (Fig.1). 28 of these reports belong to women and men (Fig.2) between the ages of 18 and 64. 24.4% are borne by the hemolymphopoietic system, 12.7% upper respiratory tract infections, 5% urinary infections, 17.7% injection site-related systemic reactions, 15.5% skin and subcutaneous tissue pathologies, 7.2% IgM decrease, 11% flu, 6.5% herpes virus infections (Fig.3). The drugs that reported the most ADR are Dimethylfumarate (20%) and Fingolimod (26.6%) (Fig.4). No patient has changed therapy.

Aim and Objectives
The purpose of the work was to classify the ADRs by SOC (System Organ Classification), frequency and drugs involved.