



Mexico City to September 14, 2018

To Whom It May Concern:

By means of the present report that finds me taking care of the patient Narendra Jana of 33 years of age whom is carrier of demyelinating disease of the type of multiple sclerosis, recurrent variety, remitting.

The patient presented a picture of left optic neuritis, which was initially managed with methylprednisolone 1 gm IV every 24 hours for 3 days, approximately 2 months after which he presented improvement, but later he presented paresthesia and dysesthesia in the left extremities, subsequently presenting with weakness mainly in the hand and later in the left leg.

At the initial examination, we documented marked decreased mentation papilla pallor in the left eye, and a little bit nystagmus when he looking to the left side, as well as motor and sensory deficits in the left body with an EDSS 4.5 rating, the last resonance performed 2 and a half months ago showed an increase in lesion load.

Based on the above, it was decided to start treatment with plasmapheresis for which required Niagara type catheter placement, as well as hospitalization in infusion center to apply 3 plasmapheresis sessions consisting of 2-volume replacement with 5% immunoglobulin 2 bottles per liter. This procedure was performed without complications except for the first day in which he presented an absence seizure with neurovegetative symptoms, which remitted after the application of the Hartman 500 ml solution in 30 minutes of a single dose, afterwards it no longer presented any complications and it was concluded on the day of today the 3rd session of plasma exchange.

After concluding the 3 plasmapheresis sessions, the patient showed improvement in visual acuity, improved the speed of thought and decreased sensory symptoms as well as increased strength in the left limbs, decreasing his EDSS to 3.0

The patient is released to his home today and depending on his evolution, a new cycle of plasmapheresis will be evaluated in 6 months or the beginning of a disease-modifying therapy based on fingolimod (Gilenya) or dimethyl fumarate (Tecfidera).

The present is given at the request of the interested party and for the purposes that are convenient for him; I remain of you for any medical information related to our patient.

Sincerely,

