

MULTIPLE SCLEROSIS

Overview:

Multiple Sclerosis (MS) is a chronic degenerative disease of the central nervous system. As of the time of this writing, early in 2003, there is no cure for the condition, although modern drug treatments show promise of delay and hint at a cure. As a result, life underwriting is becoming increasingly more favorable.

Although the cause for MS is not yet certain, there is increasing evidence that a combination genetic, environmental, and immunologic variables play a role in the onset and development of the disease. MS affects the nerve cells primarily in the brain, the optic nerve, and the spinal cord. Affected cells experience a process called “demyelination” - referring to the removal of the protective covering of a nerve cell. Once stripped of protective coating, electrochemical functions that facilitate nerve conduction are gradually diminished and eventually lost. MS occurs in women twice as often as in men.

The onset of MS can be sudden. An attack may be brief, lasting as little as a few weeks. Early symptoms include inflammation of the optic nerve, weakness of the eye muscle, or tingling sensations or numbness experienced in hands and arms. The classic definition of MS is “two or more central nervous system events, separated in time and space (i.e. anatomic location)”. Today, MRI studies allow for a firm diagnosis during the first “event”.

The only predictable variable in MS is the unpredictable nature of the condition. MS frequently does go into remission. For some, remission can last a lifetime. For others, MS progresses quickly, leading to death in a few months or years. For the majority of individuals with MS, the degree of disease progression falls between the two extremes.

Impact on Life Underwriting:

The extra mortality caused by MS mainly evolves from debility and infections caused by the neurological deterioration. With modern medicine, the years of survival following diagnosis continues to increase; the median rate of survival post diagnosis has now increased to almost 40 years. *Suicide* is also a significant risk factor, especially for the very young.

Ratings for MS are determined by the age at diagnosis; the frequency, duration, and severity of attacks early in the disease and any subsequent changes in the frequency, duration, and severity of attacks; the sex of the proposed insured; the type of symptoms; the degree of neurological impairments; and response to modern drugs (Avonex and Antegren).

As MS follows an unpredictable course, the longer the condition has been observed, the more favorable are underwriting results. Underwriting is most favorable for individuals with MS who have minimal disability 5 years after onset; who show complete and rapid remission of initial symptoms; who are under age 35 during the first attack; who only experience one symptom during the first two years; who have only a single episode during the first year; and whose event episode is of short duration. Underwriting is less favorable for those who present with many symptoms during the first attack (i.e. are “polysymptomatic”), have five or more attacks during the first two years, and whose symptoms appear to have a cerebral origin, such as ataxia or tremor vertigo. After becoming bed-bound, life expectancy is between 2 and 7 years; such cases are uninsurable. In order to help us quote on a proposed insured with MS, please gather as much information as possible and call us with the details. Perhaps the following questionnaire will be of help to you. SB 01/03/2003

Diagnosis	Common Symptoms	Onset of Symptoms 2 Years or Less	Onset of Symptoms 3 to 5 Years	Onset of Symptoms 6 Years +
<i>Mild</i>	Infrequent attacks, long periods of remission, no disability.	Table 6	Table 2 - 4	Standard to Table 2
<i>Moderate</i>	Attacks with increasing frequency/duration with some residual neurological impairment but individual is fully functional.	Postponed Possibly +/- Table 16	Table 6 - 8	Table 4 to Table 6
<i>Severe</i>	Individual is wheel chair bound or bed ridden, incontinence, complete loss of independence.	Uninsurable	Uninsurable	Individual Consideration
<i>Current Attack</i>	Varies.	Postponed	Postponed	Postponed



Phone: 1-888-227-3131 Ext. 600

Fax: 215-233-3683

Email: LIFE@ABSgo.com

MULTIPLE SCLEROSIS QUESTIONNAIRE

Agent: _____ Phone: _____ Fax: _____

Proposed Insured Name: _____ M F Date of Birth: _____
 Face Amount: _____ Max. Premium: \$ _____/year UL WL Term Survivorship
 Do you currently smoke cigarettes? Y N If no, did you ever smoke: Never Quit (Date): _____
 Do you currently use any other tobacco products (e.g. cigars, pipe, snuff, nicotine patch, Nicorette gum...): Y N
 If Yes, please provide details: _____
 When did you last use any form of tobacco: _____ (Month) _____ (Year) Type used last: _____

(1) *Date of first diagnosis:* _____

(2) *How was the condition diagnosed?* MRI Evoked Potentials Other: _____

(3) *Please complete the following table as much as possible:*

Approximate Date of Attack(s)	Duration of the Attack(s)	Residual Effects	Specify Impairment for Residual Effects
		<input type="checkbox"/> None <input type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Severe	
		<input type="checkbox"/> None <input type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Severe	
		<input type="checkbox"/> None <input type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Severe	
		<input type="checkbox"/> None <input type="checkbox"/> Minimal <input type="checkbox"/> Moderate <input type="checkbox"/> Severe	

(4) *Is there is disability, please provide the score for the Expanded Disability Status Scale (EDSS) or otherwise describe the disability:*

EDSS Score: _____ (0 through 10) *or* Description: _____

(5) *Does the proposed insured take any medications, like Avonex or Antegren?* No Yes (please list below)

Name of Medication (Prescription or Otherwise)	Dates used	Quantity Taken	Frequency Taken

(6) *Are there any other medical conditions or factors that may be relevant to assessment of the insurability of the individual? If yes:*



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