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A trial for the Zamboni MS treatment is worth trying

When there is some evidence of relief of symptoms, further research is worthwhile

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Canadian medical bodies should assess as quickly as possible whether there is merit to Paolo Zamboni's theory of multiple sclerosis: that vein blockages play a key role, and that a simple treatment that opens the veins alleviates many of the symptoms.

Putting Dr. Zamboni's theory to the test may, as critics say, give false hope to patients who suffer greatly from a neurological disease that may disturb their ability to hear, see, remember and move. Then again, the tests may prove promising. The real question is whether there's a credible case for pressing ahead with more study.

It is not as if Dr. Zamboni, of Italy, dismisses the idea that multiple sclerosis is an autoimmune disorder. Far from it. He says that vein blockages draining blood from the head back to the heart may also contribute to the disorder. His preliminary work suggests it does.

St. Joseph's Healthcare Hamilton, a leading Ontario hospital affiliated with McMaster University, believes Dr. Zamboni's theory is worth testing. The hospital is not offering to unblock people's veins. It will use magnetic resonance imaging and ultrasound to determine whether people with MS are more likely to have vein blockages than those who don't have MS. The University of Buffalo has begun a similar study, and preliminary results confirmed Dr. Zamboni's suspicions; 56 per cent of the MS patients had the blockages, more than twice the rate as in those without MS. But studies from Sweden and Germany have reported no differences in the rate of vein blockages.

MS wouldn't be the first disease to undergo a rethinking. In 2005 Barry Marshall and J. Robin Warren won the Nobel Prize in medicine for challenging "prevailing dogmas" (as the Nobel committee put it) on peptic ulcer disease. (Dr. Marshall drank a glass of bacteria and infected himself to prove the skeptics wrong.) "Revolutionary ideas don't sit comfortably with the medical community," says Ian Rodger, the vice-president of research at St. Joseph's. Skepticism is justified, but it shouldn't shut down exploration.

Saskatchewan Premier Brad Wall gave life to a national debate when he announced that his province would fund clinical studies of the treatment. This week, Manitoba's Health Minister, Theresa Oswald, called on her provincial counterparts to support multi-site trials. Quebec Health Minister Yves Bolduc expressed interest on Wednesday. They are right to be having this discussion. Saskatchewan has the country's highest rate of MS, and with up to 75,000 patients, Canada has among the highest rates in the world. There's an obligation not to sit on our hands.

Canada should examine its options for testing Dr. Zamboni's hypotheses, and answer definitively whether the hope is false or real.