

MANAGING YOUR MULTIPLE SCLEROSIS

What Is Multiple Sclerosis?

Multiple sclerosis (MS) is a progressive, lifelong illness that affects nerve cells in the brain and spinal cord. Normally, myelin protects nerve cells. Myelin is a fatty substance that acts like electrical wire insulation. Myelin helps signals move along nerves. In MS, myelin becomes damaged or inflamed, interrupts nerve signals, and causes symptoms. People can have only one mild symptom, very few symptoms, or many symptoms with severe disability.

MS is more common in women than men and in temperate climates more than the tropics.

What Causes MS?

The cause is unknown, but MS is thought to be an autoimmune illness. That is, the body's own immune system attacks itself. In MS, it attacks the myelin covering.

What Are the Symptoms of MS?

Symptoms improve (during remissions) and then can worsen. Symptoms depend on whether the brain or spinal cord is affected and which areas are involved. Symptoms of brain involvement may include sudden vision loss or blurry vision, clumsiness, slurred speech, tiredness, muscle weakness, and trouble walking. Loss of bladder control and numbness, tingling, weakness, or heavy feelings in arms or legs mean spinal cord involvement.

How Is MS Diagnosed?

The health care provider may think of MS because of age, symptoms, and physical and neurological examinations. No specific test proves the diagnosis. The health care provider will suggest seeing a neurologist (specialist in nervous system diseases). Magnetic resonance imaging

(MRI), spinal tap, and visual-evoked response may be done. MRI shows areas where myelin is inflamed or destroyed. In a spinal tap, the health care provider takes a sample of fluid from the spinal cord for study.

How Is MS Treated?

MS cannot be cured, but many treatments are available to control the symptoms and slow the progression of the disease. Both the disease and complications (e.g., spastic movements, fatigue, pain, thinking problems, and bladder and bowel problems) are treated.

Corticosteroid drugs are the main treatment to control symptoms. Medicines such as interferon beta-1a and -1b, glatiramer, fingolimod, natalizumab, and several newer medications slow MS progress and reduce the number of relapses.

Medicines used for complications include amantadine, baclofen, gabapentin, oxybutynin, propantheline, stool softeners, psyllium, fiber, nonsteroidal antiinflammatory drugs (NSAIDs), and acetaminophen.

Maintaining a healthy lifestyle, getting enough rest and exercise, and keeping to a normal weight are important.

DOs and DON'Ts in Managing MS

- ✓ **DO** start physical therapy. It may improve or maintain mobility. Exercises can give you more energy and keep your body fit. Do regular exercises approved by your health care provider.
- ✓ **DO** get counseling. It may help you and your family adjust to MS. Contact support groups.

- ✓ **DO** call your health care provider if you have facial weakness, weakness of a limb, partial blindness, or eye pain.
- ✓ **DO** use medicines to help prevent or reduce the number of relapses.
- ✓ **DO** get enough rest and eat a healthy diet for better overall health.
- ⊗ **DON'T** ignore worsening symptoms, especially visual changes. These can sometimes be stopped if medicine is started promptly.

FROM THE DESK OF

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FOR MORE INFORMATION

Contact the following sources:

- National Multiple Sclerosis Society: Tel: (800) 344-4867; Website:
<http://www.nationalmssociety.org>
- Multiple Sclerosis Association of America: Tel: (800) 833-4672; Website:
<http://www.msassociation.org>

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