

# Patient information from BMJ

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## Multiple sclerosis

**It can be frightening to find out you have multiple sclerosis (MS). But there are treatments that can help relieve your symptoms, slow down the illness, and help you keep getting the most out of life.**

**You can use our information to talk with your doctor and decide which treatments are right for you.**

### What is it?

Multiple sclerosis is an illness that affects your nerves. Nerves carry messages between your brain and the rest of your body. These nerves have a protective coating made out of a substance called **myelin**.

If you have multiple sclerosis, this myelin coating gets damaged in places. This stops the nerves working as well as they should.

### What are the symptoms?

Some people with MS are hardly affected at all. But for others it causes serious disability.

For many people, the first symptoms they get affect their **vision**. For example, you could get blurred or double vision, or you might see colours less clearly.

Vision problems can come and go, but the good news is that your vision will probably go back to normal.

The most common longer-term symptoms are **feeling very tired** and getting **numbness or tingling** in parts of your body. The other symptoms you get will depend on which nerves have been damaged.

There are many possible symptoms of MS, but many people only get a few of them. Here are some of them:

- If the nerves that carry signals to your arms and legs get damaged, you may not be able to move as easily. Or your arms or legs may shake while you move. Some people get muscle spasms or twitches, or find that their muscles go stiff.

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- You may get bladder or bowel problems, such as needing to go to the toilet urgently or not being able to control when you go.
- Some people get dizziness and have problems with balance.
- Your memory can be affected, or you may find it harder to concentrate.
- Some people have sexual problems, such as erection problems in men or a dry vagina in women.

### Different types of MS

You may not have symptoms all the time. It depends on what type of MS you have. About 85 in 100 people with MS get what's called **relapsing-remitting** MS at first.

This means that you get flare-ups of symptoms that last for a few days or weeks. A flare-up of symptoms is called a **relapse**. But after each relapse your symptoms go away completely. This is called **remission**.

You may stay in remission for months or even years. However, over the years, you may find some of your symptoms don't go away completely after each relapse. They stay with you and may start to get worse over time.

When this happens it's called **secondary progressive** MS. Almost everyone with the relapsing-remitting type goes on to have secondary progressive MS within 25 years.

A less common type of MS is called **primary progressive** MS. If you have this type, your symptoms never really go away from the start. Instead they get slowly worse. But they may stay the same or get slightly better at times.

The rarest type of MS is called **progressive relapsing** MS. Your symptoms steadily get worse from the start. On top of that, you also get relapses, when your symptoms suddenly get much worse.

The symptoms of MS can sound very frightening. But you're unlikely to get all of these symptoms, and usually you'll have just a few at a time. You don't have to just put up with your symptoms. A lot can be done to help you feel better.

### What treatments are available?

There isn't a treatment that can completely cure MS. But treatments can:

- improve your symptoms
- slow down the illness, and
- help you keep living a full life.

Doctors can't say for certain what course your MS will take, so it's hard to know what treatments you'll need.

A lot depends on which type of MS you have. You'll probably need different treatments for MS over time.

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## Treatments to reduce relapses and disability

If you have relapsing-remitting MS, several drugs can slow down the damage to your nerves.

This means you'll hopefully have fewer attacks of symptoms. And, by taking these drugs, you may slow your MS from going on to become secondary progressive MS.

Because these drugs can slow down the course of your illness, they're sometimes called **disease-modifying drugs**.

These drugs include medications called **immunomodulators**. They can help you have fewer relapses and less disability. They're given as injections.

There are other drugs that are used less often, and usually only for people whose symptoms haven't improved enough with other drugs.

Newer drugs have also become available in recent years as treatments for MS have improved. For example, you might have heard of medications called **monoclonal antibodies**. You can ask your doctor if these newer treatments might be suitable for you.

Treatments for MS can cause unpleasant **side effects**. Your doctor should explain these to you, and you should feel free to ask about them, and to mention any side effects you have noticed. If side effects bother you a lot, you might be able to change to a different treatment.

You might need to have regular tests, such as blood tests, to make sure that your treatment isn't harming you.

## Treating symptoms during a relapse

Whatever type of MS you have, your doctor may give you drugs called corticosteroids for a short time during a relapse.

Corticosteroids help to reduce inflammation (swelling), which can help your nerves to work better and give some relief from your symptoms.

## Treating other symptoms

Some of your symptoms might not clear up with some of the drugs mentioned above, especially if you have primary or secondary progressive MS. These include:

- fatigue (feeling very tired)
- muscle spasms
- bowel or bladder problems, and
- sexual problems.

But your doctor might be able to prescribe other drugs to help with these problems.

You can also try a **rehabilitation programme**. During these programmes a team of specialists checks your symptoms and works out what you need to help you cope. For example, you might get **physiotherapy** to improve your balance, strength, and ability to move.

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Many doctors also recommend changes to your lifestyle, such as making sure you get **plenty of sleep**, and not eating too much salt.

It's also becoming clear that **exercise** is very important for people with MS. For example, it helps to:

- improve muscle control
- improve balance, and
- prevent diabetes and too much weight gain, both of which can make MS symptoms worse.

### What to expect in the future

It's hard to say how MS will affect you. It affects people in different ways. And a lot depends on the type of MS you have.

In general, the longer you have MS, the more symptoms you're likely to have. You may start to need more help getting around. But don't assume that you'll need a wheelchair.

Many people with MS can walk unaided. Others can walk short distances, but need walking aids and perhaps a motorised chair or scooter to help them with longer trips. Some people with MS still have very little disability even after 15 to 20 years.

More and more people with MS are now taking drugs to reduce flare-ups and slow the illness. These drugs are fairly new, so people with MS may do better now than they would have done in the past.

MS doesn't affect people's length of life by very much. You'll probably live pretty much as long with MS as you would if you didn't have the condition.

### Where to get more help and support

MS is a serious condition and it's important to get all the help and support that's available. Many people find it useful to talk to other people with MS. You could ask your doctor about what's available in your area.

There are various charities and support groups that help people with MS. For example, in the UK the Multiple Sclerosis Society is a charity that offers advice and support for people with MS (<http://www.mssociety.org.uk>).

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