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Understanding MS: Managing Hidden and Overlooked Symptoms

Announcer:

You're listening to *NeuroFrontiers* on ReachMD. On this episode, Dr. Marisa McGinley, a neurologist at the Cleveland Clinic, will discuss symptoms and management in multiple sclerosis. Here's Dr. McGinley now.

Dr. McGinley:

MS causes a lot of different symptoms. Of course, it will cause trouble with walking or dexterity. But actually, when we look at the symptoms that occur in MS, there are some more general symptoms that are much more common. Fatigue is something that we see very frequently in our MS patients. And then there's many others—things like spasticity or tightness in the limbs—often the limbs that are affected by the weakness—that's something that can occur early in the disease and maybe subtly in certain environmental situations or if they are pushing themselves more.

We also see more hidden symptoms, like bladder symptoms, where if you're not looking at the person, you may not know that they're dealing with it. But they can have a lot of urgency and a lot of urinary retention that can lead to infection. Along those lines, there can also be bowel issues that are sometimes intertwined with the urinary problems that we have to think about managing.

And then similarly, cognitive function and mood changes are also things that are very important. So we can have patients who have cognitive decline sometimes early—subtle processing speed deficits that we have to be mindful to pick up because patients are very good at minimizing that symptom. And then intertwined with that, we can also see a lot of changes in mood. So our MS patients have a much higher proportion of depression and anxiety.

All of the symptoms that I mentioned can occur along this spectrum of the MS disease. And many times, when I'm talking to my patients, I say, "Don't worry about the type of MS." We really just think about the biology that's occurring, which means that we really should be questioning and understanding the potential symptoms at any point in the disease.

It may seem like there's very minimal deficits or symptoms. But oftentimes, when we dig in, we will find that, "Oh, I am kind of processing things a little bit slower. I notice at work it takes me a little bit longer. I have to take a few more breaks. I need more reminder cues." Or they'll have more fatigue.

I think early on in the disease, many of these symptoms that we know of can be a little bit more subtle. But they're still very present, and it's very helpful to question patients a little bit more—"Outside of this office environment, what things fluctuate for you?" And then, of course, over time, we do see changes in the magnitude of symptoms and maybe the layering on of new symptoms. We also layer on other comorbid conditions that can exacerbate and make their MS symptoms more obvious or frustrating.

There's so much to manage, and so I think that this is where we make sure we have regular check-ins with our patients. I'm seeing patients at least every six months—that way, we're making sure that things aren't evolving and changing. I really try to bring up different symptom domains with patients even if they don't prompt me with them because sometimes patients don't realize something may be related to their MS.

We do use a lot of patient-reported outcomes in our practice to engage patients around different types of symptoms, get their feedback, and monitor those changes over time. And then we really encourage patients to reach out to us. And with that, we often will leverage a lot of virtual care. And so I find that in those types of visits, we can really do a lot of symptom management. And again, patients won't necessarily go months and months without us making changes that are hugely beneficial.

Announcer:

That was Dr. Marisa McGinley talking about symptoms and management in multiple sclerosis. To access this and other episodes in our series, visit *NeuroFrontiers* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!