



Multiple Sclerosis (MS)

DEFINITION

Multiple sclerosis: A degenerative disease of the central nervous system in which the sheaths surrounding individual nerve cells of the brain and spinal cord or both become damaged, causing disorders of vision, speech and muscle coordination, sometimes leading to paralysis.

OVERVIEW

In Europe and North America multiple sclerosis is the most common cause of neurological disability in young adults, affecting 1 in 800 of the population. Diagnosis is usually made between the ages of 20 and 40 years - rarely under 12 or over 55. It is slightly more common in women than men. There is a slightly higher chance of developing MS if a relative has it. MS is not contagious.

Common symptoms include fatigue, problems with sight, mobility and pain. MS is caused by damage to myelin - a substance that forms a protective covering around specific (myelinated) nerve fibres and enables nerve impulses to pass along these nerves faster than in unmyelinated nerves. Damage to the myelin sheath around these nerves affects their ability to transmit impulses from the brain to other parts of the body.

MS is characterised by periods of relapse and remission in some sufferers and a progressive pattern in others. It can be seriously disabling for those affected and can affect relationships, employment and everyday activities. The most common symptom associated with MS is tiredness (fatigue). Over-activity during periods of remission can cause excessive fatigue over the next few days, or a worsening of other symptoms. The most common of these other symptoms are spasms and muscle stiffness (collectively called spasticity) and pain. Normally, when one group of muscles in the body contract, the opposing group of muscles relax. The spasticity in MS is due to a failure of this normal system, allowing some opposing muscles to contract at the same time. This can make it difficult to perform normal activities, like the coordinated activity of the leg muscles involved in walking. Muscle spasms are uncontrollable muscle contractions, which can cause violent twitches and movements in the limbs, which may be painful or lead to worsening fatigue. MS may also weaken the muscles affected.

There are two main types of pain associated with MS: primary and secondary. Primary pain is a direct result of the central nervous system damage caused by MS. It is also called neurogenic pain and includes burning and tingling feelings, sensations similar to receiving an electrical shock, eye pain (optic neuritis) and facial pain (trigeminal neuralgia). With this type of pain, normal pain killers (analgesics) have been shown to be ineffective. Secondary pain is caused by 'knock-on' effects of MS such as muscular pain.

MANAGEMENT OF MS

The conventional management of MS could involve steroid treatment, painkillers, muscle relaxants, antidepressants and medicines for preventing urinary incontinence. Unfortunately, it is not currently possible to predict its behaviour in an individual person. Fatigue can be managed by changes to daily routine with the support of an Occupational Therapist (OT), Physiotherapist. The OT advises on how to perform daily activities in the most energy efficient way while the physiotherapist creates a tailored exercise programme to help sufferers achieve mobility and fitness without becoming exhausted.

RECOMMENDATIONS

Dietary changes

Very little research has been carried out into the benefits of particular diet regimens for people with MS. This is partly because diets do not make profits for the large pharmaceutical companies who carry out most medical research and partly because clinical trials of dietary changes are difficult to design and expensive and complicated to perform. People suffering any complex medical condition like MS will benefit from a normal, well-balanced, healthy diet (see 'Healthy Eating Plan' and 'Diet and Lifestyle' leaflets). Such a diet should include lots of organic fresh fruits and vegetables and keep red meat intake to a minimum.

Supplements

•*Essential Fatty Acids*: Small studies have shown, however, that a diet high in polyunsaturated fats can help people with MS. Polyunsaturated fats can be found in vegetable oils and fish oils and include essential fatty acids which nourish the nervous system. Improving the intake of Poly Unsaturated Fatty Acids (PUFAs) such as Omega 3 in Fish Oils, Flax seeds and omega 9 in Olive oil, and Evening Primrose oil (70% Linoleic acid and 9% gamma linoleic acid) should help the phospholipid profile in the brain and have an anti-inflammatory effect.. EFA's are vital raw materials for the repair/replacement of myelin. They also aid in the transmission of nerve impulses, strengthen the immune system, and are vital to many functions. Those with MS need more EFA's because of their constant need to repair and rebuild myelin (see 'Fish Oil' and 'Fatty Acid content of Various Oils' leaflets).

•*Glyconutrients*: MS has been linked to the inability to absorb the glyconutrient xylose or the presence of abnormal glyconutrient galactose molecules. The myelin sheath that covers our nerves and is attacked by immune cells in MS contains galactose. Because of this, supplementation with glyconutrients - in particular galactose and xylose may have a corrective effect for MS sufferers (see.

•*The B Vitamins*: May be beneficial in certain individuals.

For recommended suppliers and supplement advice please contact Pauline. Telephone: 01905 798567

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The Boulderstone Technique

The Boulderstone Technique is a pioneering hands-on treatment that stops the development of Multiple Sclerosis, permanently. John Boulderstone claims that the well known symptoms of MS, such as fatigue, weakness, numbness and pain, stop getting worse about five days into learning the technique. Phone: 01892 863958; 08456 443626 (local rate)
www.boulderstonetechnique.co.uk

HOMEOPATHY

Homeopathy can help restore balance to the body and many people have experienced relief from the symptoms of multiple sclerosis. Moreover treatment by a qualified homeopath will also raise the general level of health and keep MS symptoms in remission. Please phone Pauline to discuss this. Telephone: 01905 798567

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