

Living With MS

By BD Tharp

Debbie is a 25-year-old woman, a newlywed, who has never had any health problems. She's driving to work one morning and her vision becomes distorted. She's scared and confused with no idea what's wrong, so she pulls over and calls her husband. He takes her to immediate care and the doctors say it could be a tumor or multiple sclerosis so they order a cat scan. The diagnosis is inconclusive, however it doesn't look like cancer. They send her to a neurologist next, but he says it is too early to be sure.

For three years Debbie has unexplained vision problems and she thinks, "If I ignore it, maybe it will go away." After an MRI they finally diagnose her condition, it's MS. "Once I was diagnosed they put me on medication. I hated needles and I had to give myself an injection every other night," she said. "After I got past the denial and accepted that it was now a part my life, I went to a Newly Diagnosed Group Meeting at the MS Society."

About a year later Debbie became pregnant, so she went off the medication and had no symptoms. Her children are in preschool now, and she visits the neurologist every 6 months for blood tests and a physical exam. Through an MRI they can monitor the progression of MS by the number of lesions. "The lesions come and go. You could take an MRI today and another a week from now and they could be totally different," Debbie said.

She knows that stress can trigger symptoms, and heat can affect vision, dexterity or even drain her of strength, so Debbie always wears a hat for protection. "I've been doing very well for the past two years. Right now I have some symptoms, but I know I'm doing everything I can. It's just part of who I am," Debbie said. "Life is much more immediate. You can live very well with MS and do whatever you want. It's just a bump in the road."

MS is an autoimmune disease that affects the central nervous system of more than 400,000 Americans and 2.5 million people worldwide. When myelin, the fatty tissue that surrounds and protects nerve fibers of the brain, optic nerves and spinal cord is damaged or lost, sclerosis or lesions develops. Without the protective myelin, broken or damaged nerve fibers disrupt the electrical impulses to the brain.

People with the most common form of MS experience flare-ups that affect neurological function, which are followed by partial or complete recovery periods. Only 10-15% of the people diagnosed with rare forms of MS experience a steady worsening or continuing disease progression.

Scientists don't know what damages myelin and triggers autoimmune diseases. Most people are diagnosed with MS between the ages 20-50. Twice as many women have MS

than men, and genetic studies indicate that some individuals are more susceptible than others, but it is not directly inherited.

MS symptoms most commonly experienced may include:

- Bladder or bowel dysfunction
- Changes in memory, attention and problem solving function
- Dizziness and vertigo
- Depression
- Fatigue
- Difficulty walking or loss of balance
- Numbness or “pins and needles”
- Pain
- Sexual Dysfunction
- Spasticity
- Vision Problems

For support or more information contact the local MS Society.