

# UNDERSTANDING RELAPSE IN MS



## RELAPSE

## What is a Relapse?

- An episode of neurological dysfunction
- When your immune system attacks the brain
- New or returning worsening symptoms lasting more than 24 hours

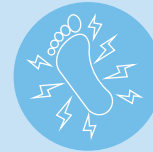
## Possible SYMPTOMS



Blurred Vision



Double Vision



Areas of numbness



Bladder/Bowel issues



Fatigue



Loss of Balance



Pins and needles



Cognitive issues



RELAPSES  
CAN VARY IN  
LENGTH AND  
SEVERITY

## NO TWO RELAPSES ARE THE SAME



**30%** of people with MS

**DO NOT** report relapses<sup>1</sup>

If you have a **Relapse**, it may be a signal to **start** or **change** disease modifying therapy<sup>2</sup>





# When is a Relapse **NOT** a Relapse?



## pseudo-relapse

When symptoms are caused by other factors:

- Tiredness
- Heat
- Stress
- Infection

## WHAT TO DO IF YOU HAVE A RELAPSE

### Tell your GP

- Agree on severity of relapse
- Exclude pseudo-relapse
- Agree on a course of action

Stay in contact!  
**IF IN DOUBT, SHOUT!**



Tell your MS nurse/  
consultant

*"Steroids only shorten relapse,  
but DO NOT change trajectory"*

A Relapse  
may be a signal to  
**start** or **change**  
disease modifying therapy<sup>2</sup>



### Goals of therapy in RRMS

- Reduce relapses
- Reduce MRI activity
- Preserve ability



### Tips from MSers

- Record your relapses
- Avoid stress
- Keep an eye on steroid use
- Communicate honestly with your healthcare team
- Adhere to treatment
- If in doubt, shout!



Tips with thanks to MS Ireland and participants in the Relapse Forum, December 2016

Reference: 1. Duddy et al. 2014 A descriptive study of relapsing-remitting Multiple Sclerosis treated with first disease modifying therapies in current UK clinical practice: patterns of clinical decision making and the patient. Multiple Sclerosis and Related Disorders.  
2. Vargas et al. Update on disease modifying therapies for MS. J. Investig Med. 2017. Jan 27.