

Understanding MS related spasticity

FAST FACTS

- Multiple sclerosis (MS) is an incurable condition that affects approximately 100,000 people in the UK and is usually diagnosed between the ages of 20 and 40 years^{1,2}
- Damage occurs within the central nervous system (CNS - brain and spinal cord)¹
- Spasticity is a common symptom associated with MS,³ affecting most people with MS at some point
- In a survey, 84% of people with MS reported symptoms of spasticity⁴
- Symptoms of spasticity include loss of mobility, painful spasms / cramps, stiffness and / or weakness of muscles⁵
- There are a number of medicinal therapies commonly used to treat spasticity, although not all are licensed for this purpose⁶
- Many have side effects which some people find difficult to tolerate at effective doses⁶

Background

- Multiple sclerosis (MS) is an incurable condition that affects approximately 100,000 people in the UK in which damage occurs within the central nervous system (CNS - brain and spinal cord).¹ It is usually diagnosed between the ages of 20 and 40 years²
- Spasticity is a common symptom associated with MS³ and is a major contributor to disability.⁶
- Spasticity is caused by damage to the nerves in the CNS that carry messages instructing muscles how to move, resulting in an involuntary muscle over-activity
- In a survey, 84% of people with MS reported symptoms of spasticity.⁴ Moderate, severe or total spasticity is reported in 34% of individuals.⁴
- Symptoms of spasticity include loss of mobility, painful spasms / cramps, stiffness and / or weakness of muscles.⁵ As a consequence an individual may have difficulty in walking, picking up objects, washing, dressing and other everyday activities involving movement.³
- In addition to causing a great deal of distress to the person with MS, mood, self-image and motivation can also be affected.⁷

Management and treatment of spasticity

- Spasticity is difficult to measure. A variety of scales and measures are used by doctors and physiotherapists to quantify the different aspects of the condition.⁷
- Treatments for spasticity range from physiotherapy and exercise programmes, to drug treatment, and surgery in the most severe cases.⁷
- There are a number of medicinal therapies available to treat MS-related spasticity. NICE guidance states that the first line of treatment should be baclofen or gabapentin, although gabapentin is not licensed for treating spasticity. Other medications may be used only if treatment with baclofen or gabapentin is unsuccessful or side effects are unmanageable.⁸
- Despite the range of treatment options, not all patients with MS spasticity can achieve adequate symptom relief. Also, at effective doses many existing oral drug treatments for MS spasticity have side effects which some people find difficult to tolerate.⁶

References

1. Multiple Sclerosis Society. About MS. Available at http://www.mssociety.org.uk/about_ms/index.html (Last accessed: 14/04/2010)
2. NHS Choices. Multiple Sclerosis Introduction. Available at <http://www.nhs.uk/conditions/multiple-sclerosis/pages/introduction.aspx> (Last accessed: 22/04/2010)
3. Multiple Sclerosis Trust. Multiple Sclerosis Information for Health and Social Care Professionals. 2007. Available at: http://www.mstrust.org.uk/downloads/ms_information_for_hps.pdf (Last accessed: 8/4/2010).
4. Rizzo MA, et al. Prevalence and treatment of spasticity reported by multiple sclerosis patients. *Multiple Sclerosis* 2004; 10:589/595
5. Multiple Sclerosis Trust. Spasticity and Spasms factsheet. November 2009
6. Beard S, et al. Treatments for spasticity and pain in multiple sclerosis: a systematic review. *Health Technol Assess* 2003; 7(40)
7. Multiple Sclerosis International Federation. Spasticity in MS. *MS in focus*. Issue 12. 2008. Available at <http://www.msif.org/docs/MSinFocusIssue12EN.pdf> (Last accessed: 14/04/2010).
8. The National Institute of Clinical Excellence (NICE) Management of multiple sclerosis in primary and secondary care. *NICE*; London: 2003