

Spasticity

Spasticity is common in MS and is responsible for a great deal of disability. It is associated with muscle tightness and weakness that limit a limb's range of movements. Effective treatment by a team of medical specialists can produce a significant reduction in the problem so improving the person's mobility and quality of life.

Positioning

It is important that someone with spasticity is positioned correctly when sitting and lying down to prevent limbs becoming fixed in an inappropriate position. He or she should be able to lie flat every day in order to stretch the muscles involved. Lying on the side and standing are also useful for stretching muscles in spasm. Posture when sitting needs to be well balanced and stable. Special seating systems are available to help with this. The person should be moved regularly to avoid damage to skin and help in joint mobility. Design of the wheelchair is also important, as it is essential that it provides support for the upper body and limbs.

Physiotherapy

Physiotherapy, using techniques such as aerobic and aquatic exercise, is of great value in improving muscle strength and the range of movements available. Any physiotherapy programme needs to be tailored to the specific needs and abilities of person with MS.

Drug treatments

A number of antispasmodic drugs are available, e.g. baclofen which is widely used in MS. However, there are other effective drugs which all need to be used carefully because a rigid, spastic limb may be important in walking or transferring for some people, and loss of this may actually reduce mobility and independence.

References

Barnes D. Multiple Sclerosis. Questions and Answers. Merit Publishing International 2000, Pp. 125. Gibson J, Frank A. Supporting individuals with disabling multiple sclerosis. Journal of the Royal Society of Medicine 2002; 95: 580-586.