

FREQUENTLY ASKED QUESTIONS ABOUT MULTIPLE SCLEROSIS

1. What is multiple sclerosis?

Multiple sclerosis (MS) is an unpredictable, often disabling disease of the central nervous system — the brain and spinal cord. The disease attacks the protective myelin covering of the central nervous system, causing inflammation and often destroying the myelin in patches. In its most common form, MS has well defined attacks followed by complete or partial recovery. The severity of MS, progression and specific symptoms cannot be predicted at the time of diagnosis.

2. What are some common MS symptoms?

While MS symptoms are unpredictable and vary greatly from person to person, they may include: vision disturbances such as double or blurred vision; extreme fatigue; loss of balance; problems with coordination; stiffness of muscles; speech problems; bladder and bowel problems; short-term memory problems, and even partial or complete paralysis. Please keep in mind, not all people with MS will experience all symptoms and often the symptoms will improve during periods of remission.

3. Why do MS symptoms develop?

MS attacks the protective covering — myelin — of the brain and spinal cord, causing inflammation and often damaging the myelin in patches. When this happens, the usual flow of nerve impulses along nerve fibres (axons) is interrupted or distorted. The result may be the wide variety of MS symptoms, depending upon what part or parts of the central nervous system is affected. The damaged parts of myelin are often called “lesions” or “plaques”. There also is evidence that permanent damage to nerve fibres may occur in association with the attack on myelin.

4. What causes MS?

We do not know as yet what causes MS. Most researchers believe that MS is an autoimmune disease. For reasons that are still unclear, the body’s immune system malfunctions and starts attacking the myelin which protects the central nervous system. There is some evidence that MS may be triggered by a common virus, and

that certain people are more susceptible to developing MS because of genetic factors. There is no evidence, however, that MS is a directly inherited disease. A number of genes are probably involved in making some people more susceptible to MS.

5. Who gets multiple sclerosis?

Multiple sclerosis most often strikes young adults — women and men between the ages of 20 to 40 who are in their career and family building years. Women develop MS almost twice as often as men.

6. How many people have MS?

An estimated 50,000 Canadians have multiple sclerosis. Prevalence rates range from one MS case per 500 people to one in 1,000 across the country. Canada is a high risk area for the disease, which occurs more often in countries, like Canada that are further away from the equator. The MS Society estimates, based on current prevalence rates, that approximately 1,000 new cases of MS are diagnosed each year.

7. Is multiple sclerosis fatal?

MS is not a fatal disease for the vast majority of people with MS. Most people who have MS can expect to live a normal or near normal life span, thanks to improvements in the treatment of symptoms and in other therapies for people with MS.

8. Are there different types of MS?

Multiple sclerosis has been grouped into several main types. These include:

- **relapsing-remitting MS** — characterized by clearly defined attacks (relapses) followed by complete or partial recovery (remissions); most common form (70% at the time of diagnosis).
- **primary-progressive MS** — relatively rare (10 to 15% at time of diagnosis), people with this type of MS have a nearly continuous worsening of MS from the beginning with no clear relapses or remissions.
- **secondary-progressive** — about half of people with relapsing-remitting MS start to worsen within 10 years of diagnosis, with possibility of increasing levels of disability.
- **progressive-relapsing** — relatively rare, combines attacks with steady worsening and no remissions.

- **benign MS** — few attacks with long periods of remission and little disability after 15 years; about 20 - 25% of people who were diagnosed originally with relapsing-remitting MS have this type.
- **malignant MS** — rapidly progressive disability within five years of diagnosis; quite rare.

9. Does MS change over time?

Most people are diagnosed with the relapsing-remitting form of MS. Over time, some people in this category develop secondary-progressive MS while others may have mild attacks but do not worsen. They are considered to have benign MS.

10. Are there treatments for MS?

Since 1995, four medications have been approved in Canada for the treatment of relapsing-remitting MS and one is now available for secondary-progressive MS. The treatments have been shown in clinical trials to actually modify the course of the disease. They decrease the frequency and severity of MS attacks, reduce the number of MS lesions in the brain and several have been shown to slow the progression of disability. Treatment early in the disease is recommended because of recent studies showing the presence of early axonal damage. Also important are therapies which are available to help MS symptoms such as spasticity, bladder problems, pain and fatigue.

11. Is MS contagious?

No, MS is not contagious, nor is it directly inherited although research studies now underway are suggesting that genetic factors make certain people more susceptible to developing MS.

12. Is there hope for a cure?

Absolutely. Researchers are learning more about what causes MS everyday and zeroing in on ways to prevent it. Multiple Sclerosis Society of Canada funded researchers are targetting these areas:

- **Repairing or growing myelin** — Since the central problem in MS is the destruction of myelin, a crucial focus is to find a way to stop the damage and stimulate myelin regrowth. Almost 50 percent of MS Society funded research goes to myelin research.

- **Immune system** — The immune system attacks the body’s myelin so it is vital to understand what triggers that attack and to find ways to block it. About one-third of MS Society funded research is directed at immunology.
- **Virus research** — Some investigators think that a number of common viruses may trigger MS attacks. Work is underway to identify them.
- **Genetics** — Significant progress is being made in understanding how genes may contribute to the development of MS. The world’s largest study of genetic susceptibility is taking place in Canada.
- **MRI studies** — Since the 1980s, magnetic resonance imaging (MRI) has been used to allow investigators to see into the living brain and to detect MS lesions. MRI allows for faster diagnosis of MS and, equally important, faster evaluation of potentially useful MS therapies. Canadian scientists are leaders in this field.
- **Health Research** - This program funds research that seeks to find the overall determinants of health and that helps people with MS to better cope with the disease. Areas funded include: epidemiology, health economics and psycho-social and behavioral issues.

13. What other role does the MS Society of Canada play?

Besides funding MS research, the MS Society provides services for people who have MS, family members, caregivers and health care professionals. These services are delivered through the network of divisions and chapters across Canada.

Individual and Family Services volunteers and staff provide information, funding and support through the following core services:

- MS Society publications
- ASK MS Information Resource Centre
- Publications and videos
- Conferences and workshops
- Equipment purchase and loan
- Special assistance
- Individual advocacy
- Support counselling
- Referral to community resources
- Support and self-help groups
- Recreation and social programs

Services offered vary depending upon existing provincial and community programs and financial resources available to Individual and Family Services in the division and chapters. The MS Society does not duplicate services available through other sources.

14. What does the MS Society do in social action?

The MS Society also works with people who have MS to ensure they have the opportunity to participate fully in all aspects of life. The MS Society works to change government policies at all levels, private industry practices and public attitudes in positive ways. Current issues include access to CPP disability benefits and the disability tax credit; improving provincial drug plans; and overall barrier-free design and access to allow people with disabilities to participate easily in their communities.

**An expanded version of Frequently Asked Questions is available
on our website: www.mssociety.ca.**

**To get in touch with the MS Society division office nearest you
call 1 800 268-7582.**