

PRACTICAL MANAGEMENT OF PROGRESSIVE MS: CASE FOR DISCUSSION

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J.Z.

- 41 year old male; out of work financial planner
- **Initial symptoms:** 2008 (cerebellar);
Diagnosis: 2013
- **Course:** Slow progressive course; no evidence of relapse
- **EDSS:** 6.0
- **Symptoms:** ataxia, drop foot; cognitive impairment; fatigue; insomnia; mood changes (depression, anger, anxiety; mild paranoia)
- **DMT:** IM INF-b 1a (unable to tolerate); dimethyl fumarate 240mg bid

J.Z.

- Relevant psychosocial issues
 - ◆ Single
 - ◆ Lives alone in SFH he owns
 - ◆ No history of substance abuse
 - ◆ Athletic; loves scuba diving and participating in 'tuff mudders'-but has not participated since 2012 due to poor balance; former marathon runner
 - ◆ Ignored diagnosis, delayed care, initially refused DMT
 - ◆ Family tells him "you cannot trust doctors"
 - ◆ Estranged from family
 - ◆ Denies depression; continues to say he is "fighting MS"

J.Z.

- Neurological exam:
 - ◆ Mental status: psychomotor slowing; flat affect
 - ◆ CN: gaze evoked nystagmus
 - ◆ Strength: weak right hip flexors bil; rt. ant.tib 4/5
 - ◆ Reflexes: grossly hyperreflexic throughout
 - ◆ Cerebellar: dysmetria FNF and HTS bilaterally; unable to straight line walk, hop; ataxia on heel and toe walk; positive Romberg EO
 - ◆ Sensory: patchy hypoesthesias

J.Z.

■ Neuropsychological testing:

- ◆ Average IQ
- ◆ Delayed information processing
- ◆ Impaired executive function
- ◆ Impaired short term memory and working memory
- ◆ Poor attention to task

J.Z.

■ Most bothersome problem for J.Z.

- ◆ Poor balance and can no longer participate in his love of marathon running
- ◆ Overwhelming fatigue that prevents successful job hunting
- ◆ DMT does not seem to be working
- ◆ Does not have enough money for food after paying bills and often burns food due to neglect

J.Z.

- Most concerning problems for providers
 - ◆ Little incite into physical and emotional deficits
 - ◆ Cognitive deficits
 - ◆ Interplay of mood, fatigue, insomnia and cognition
 - ◆ Social isolation
 - ◆ Risk for falls
 - ◆ Risk of financial collapse/homelessness
 - ◆ Appropriateness of DMT