

Health and Wellness: Care of the Body, Mind, and Spirit



CMSC Indianapolis

May 29, 2015

Topic outline

- Meet the presenters:
 - Body- Robin Tillett, RN, MSCN
 - Mind- Lee Hayward, BSN, RN, MSCN
 - Spirit- Mary Kay Fink, ACNS, MSCN
 - The Whole- Jill Griggs



A Health and Wellness Approach to Multiple Sclerosis



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Defining Health and Wellness

- Since 1948, the WHO has defined 'health' as "a state of complete physical and social well-being and not merely the absence of disease or infirmity."
- Wellness is considered to be "an active process of becoming aware of and learning to make choices (healthy) that lead toward a longer and more successful existence."
- As healthcare providers, we need to change our focus to health promotion as well as disease management.



What are some obstacles that may prevent patients living with MS to access ongoing health and wellness maintenance?

- Lack of transportation
- Lack of local resources
- Financial issues/insurance coverage
- Psychosocial issues:
 - Cognitive dysfunction
 - Depression
 - Lack of social support
- Time
- Structural barriers
- Perceptions of the disease process and possible limitations
- Patient doesn't want to learn any more "bad news"
- Patient is unaware of the benefits of health promotion



Neurologists vs. Primary Care Providers

- Patients with MS often consider their neurologist to be their primary care provider.
- We should encourage and provide information to our patients regarding the importance of having a primary care provider.
- As healthcare providers to patients with chronic diseases, we should incorporate a health and wellness approach into our patient care.



Nutrition and MS

- There is no real recommended diet for patients with MS other than a healthy, low fat, high fiber diet.
- Things to consider:
 - Maintain ideal body weight
 - Patients that are overweight have decreased mobility, which can lead to osteoporosis, skin breakdown, fatigue, depression, and increased risk of comorbid diseases
 - Fatigue
 - Bladder incontinence
 - Constipation



Nutrition and MS cont.

- Treatment Plan:
 - Educate patients on importance of healthy diet
 - Provide ongoing educational classes regarding healthy diets
 - Educate patients on consuming smaller, more frequent meals
 - Keep a power pantry and/or snack drawer stocked with ready to eat, grab and go, healthy snacks.
 - Limit alcohol and caffeine consumption
 - ↑ Fiber; ↑ Fluids; ↑ Exercise



Importance of...

- Calcium
 - Patients with MS have an increased risk of osteoporosis
 - It is recommended that adults take 500-600 mg of calcium, twice daily (along with Vitamin D).
 - Dietary rich foods
- Omega-3 Fatty Acids:
 - Plays an important role in myelin production
 - Mild anti-inflammatory/neuroprotective
 - It is recommended that adults consume 3 grams of omega-3 fatty acids, daily
 - Dietary rich foods
- MVI Supplement
 - May provide MS patients with baseline nutrients
- Avoid Saturated Fats
 - Dietary Sources:
 - Animal fats, butter, shortening, hydrogenated oils
 - May alter stability of myelin
- Alcohol
 - Can affect balance and coordination
 - Alcohol is a depressant
 - It may interact with medications
 - Empty calories
 - Some studies have shown that alcohol intake may be associated with lower risk of MS. It has both anti-inflammatory immunomodulating properties.



Sodium

- High sodium intake may correlate with clinical activity.
- Most westernized countries, 3.4 – 3.8 gm/ day
- Average Asian countries, 4.2 – gm day
- Adults only require 250-500mg /day
- The WHO recommends < 2 gm /day
- ↑ sodium intake may be associated with ↑ RR and ↑ MRI disease activity.



Vitamin D

- We now know that low vitamin D levels can be a risk factor for both the development and progression of MS.
- Vitamin D has important effects on the immune system. It may help regulate cell growth and differentiation. It also has anti-inflammatory properties.
 - Low levels of vitamin D can result in dysregulation of the immune system.
- Some studies have actually shown that ↓ vitamin D levels are associated with ↑ relapse rate, new T2 lesions and ↑ in disability.
- ↑ levels of vitamin D have shown a slower conversion from CIS to CDMS, fewer new lesions, ↓ T2 lesions, and less brain volume loss.
- Higher levels of vitamin D, > 59 ng/ml has shown 27% ↓ RR and lower changes in EDSS.
- Sun exposure, genetics, and diet may all affect vitamin D levels.
- Other medical conditions associated with low vitamin D levels:
 - Osteoporosis
 - Myopathy
 - Type I Diabetes
 - ↑ risk of cancers, heart and lung diseases
 - Depression and schizophrenia
- Treatment Strategies:
 - Monitor vitamin D levels
 - Supplement as needed
 - Vitamin D rich foods
 - Exposure to direct sunlight



Smoking

- We are all aware that smoking has been linked to heart disease, hypertension, respiratory illnesses, cancers, erectile dysfunction, and numerous other medical problems.
- Many recent studies show the negative effects that smoking has on Multiple Sclerosis:
 - May influence risk of conversion of CIS→CDMS as much as 79%
 - Changes in the BBB, making it permeable
 - Increases the risk of PPMS as much as 2.4x
 - ↑ risk of developing MS if the individual started smoking before the age of 17 (2.7)
 - ↑ release of free radicals into the blood
 - Triggers risk of autoimmune diseases
 - ↓ absorption of vitamin D
 - Disability in MS is directly related to the number of cigarettes smoked
 - Non-smoker risk of MS: 1/1000
 - Smoker risk of MS: 1/819 – 1/662
 - Progression to SPMS occurs 2.5x faster in smokers than non-smokers
 - ↑ Brain volume loss, ↑ vascular changes on MRI
 - ↑ EDSS scores
 - Releases a chemical called acrolein that causes neurodegeneration
 - ↑ symptoms



Smoking cont.

- Smoking Cessation Strategies:
 - Educate patients and families about the risk of smoking and MS disease progression
 - Offer smoking cessation classes
 - Provide NRT (if not contraindicated) at no cost
 - Support groups
 - Counseling
 - It usually takes multiple attempts to quit smoking. Don't give up!
- E-cigarettes are not approved as a safe device to aid in smoking cessation.
 - They may be modified for use of other drugs
 - Most always nicotine
 - They are not currently regulated or approved by the FDA
 - The physical behavior has not changed
 - Formaldehyde is found in the liquid and vapor



Exercise

- Exercise used to be strongly discouraged in patients with MS because increased body temperature often worsens symptoms. We now know that exercise is an important component of disease management.
- Researchers have conducted numerous studies looking at EDSS, MSFC, and relapse rate.
- A study from University of Illinois showed that patients with MS exercise less than both diseased and non-diseased patients.
- Benefits of exercise:
 - ↓ pathogenesis, ↓ RR
 - ↓ symptoms
 - ↓ axonal damage and loss
 - ↓ risk of secondary health problems
 - ↑ QOL
 - ↑ function and strength
 - ↑ cardiovascular fitness
 - ↑ cognition
 - ↑ social interaction
- Treatment strategies:
 - Start exercise programs early in the disease
 - Educate patients and families on the benefits of exercise
 - Tailor exercise programs to the specific disabilities
 - Intermittent exercise may be more tolerable and just as beneficial
 - Integrate weight bearing exercise
 - Provide exercise programs for MS patients through grants
 - Aqua aerobics, swimming, yoga, and tai chi work well for patients with MS



Mental Health Issues

- Individuals with Multiple Sclerosis often have increased rates of other mental health illnesses.
- Depression:
 - May result directly from the disease process itself (interrupts neuron transmission and affects mood)
 - Can be situational
 - Related to medication
 - About half of all individuals with MS experience depression at some point in their lives
 - Lesion related
- Other mental health issues:
 - ↑ anxiety
 - Bipolar disorder, as much as 10%
 - Schizophrenia
 - Substance abuse
 - Pseudobulbar Affect (brainstem), 10%
- Treatment strategies:
 - Medication
 - Counseling
 - Rule out a correlation with other medications
 - Support groups



Comorbidities in MS

- It is not uncommon for MS patients to be diagnosed with another medical condition.
- The MS Comorbidities Project is currently reviewing the types and frequencies of comorbidities in MS.
- A review of 249 studies occurring between from 1905 and 2012, revealed these highlights:
 - The five most prevalent disorders occurring alongside MS were depression, anxiety, high blood pressure, high cholesterol, and chronic lewy disease.
 - The most prevalent auto-immune diseases occurring with MS were thyroid disease and psoriasis.
 - Types of cancer that occurred included cervical, breast, and digestive system cancers.
 - ↑ risk of meningioma and urinary system cancers
 - ↓ risk of pancreatic, ovarian, prostate, and testicular cancers
 - ↑ occurrence of heart disease, CHF, stroke, arthritis, inflammatory bowel disease, IBS, seizure disorders, bipolar disease, sleep disorders, and alcohol abuse.



General Health and Wellness

- Patients with chronic diseases such as MS tend to neglect their general health and wellness evaluations such as:
 - Annual physical exams
 - Vaccinations
 - Pap smears and mammograms
 - Colonoscopies
 - Bone density
 - PSA
- 11% of hospital admissions, 40% nursing home admissions, and 125,000 deaths annually are due to non-compliance and a lack of health maintenance.



General Health and Wellness cont.

- Strategies:
 - Provide clear recommendations to patients with MS regarding diet, exercise, smoking, weight management, and the risk factors for other comorbid illnesses
 - Provide patients with community resources, such as locations or events offering free health screenings
 - Partner with local MS centers or community organizations to provide exercise programs for people living with MS
 - Provide on-going support services/support groups
 - Educate other healthcare professionals about wellness and MS
 - Identify and implement strategies to promote emotional well-being
 - Empower patients to be in charge of disease management as well as wellness strategies
- Outcomes:
 - ↓ healthcare costs
 - ↓ comorbid diseases
 - ↓ progression of disease
 - ↑ QOL



Thank You ☺



CARING FOR THE MIND

**SOUND MENTAL HEALTH AND COGNITIVE
FITNESS FOR PERSONS WITH MULTIPLE
SCLEROSIS**



**Lee Hayward, BSN, RN, MSCN
INDIANA UNIVERSITY MULTIPLE SCLEROSIS
CENTER
IU HEALTH NEUROSCIENCE CENTER**

Approximately 25% of the general population will develop 1 or more mental or behavioral disorders at some time.

- This can rise to approximately 50% in persons with multiple sclerosis.



Mental health disorders are frequently overlooked due to:

- changes in mental state being considered solely a reaction to having a chronic illness
- many mental health issues go untreated unless there is an impact on the person's function
- healthcare professional focusing on managing physical symptoms and failing to also address mental health needs
- lack of understanding of the mental health issues and their complexity



Many factors can affect the emotional state of the person with multiple sclerosis:

- the need to adjust to progressing physical disability
- the need to accept more help from others and possible use of mobility aids
- profound fatigue (fatigue can affect up to 80% of persons with multiple sclerosis)
- clinical depression
- cognitive dysfunction



Medications can contribute to or mask mental health disorders

- Anti-anxiety medications
- Pain medications
- Steroids
- Interferons
- Muscle relaxants
- Antidepressants



What are some specific mental health issues that a person with multiple sclerosis might encounter?

- depression
- anxiety
- grieving
- anger
- frustration
- stress
- emotional lability (moodiness) (irritability)
- pseudobulbar affect (uncontrollable episodes of inappropriate laughing and/or crying that are unpredictable)

Any or all of these can increase during an exacerbation



Treatments for mental health issues:

- evaluation of disease state
- medications (could current medications be contributing to mental health problems or do additional medications need to be considered?)
- assess need for/recommend psychotherapy
- stress management program
- support group (may not be appropriate for the newly diagnosed)



Depression

- Affects more than 350 million people worldwide and 25% to 50% of persons with MS will experience depression.
- Less than 30% of persons with MS that have symptoms of depression will seek help.
- Depression can be difficult to diagnose in persons with MS as common medications used in MS can cause changes in mood.
- Physical conditions, such as anemia, vitamin deficiencies, and thyroid disease must also be considered and ruled out.
- Depression may be inaccurately attributed solely to MS fatigue as MS fatigue can increase depression.
- Factors affecting fatigue should be evaluated and treated (sleep disruption perhaps due to bladder dysfunction or spasticity, other illnesses or medications causing or contributing to fatigue).



Cognitive Changes (Memory and Thinking)

- Approximately 40 - 70% of persons with MS have some form of cognitive impairment such as:
 - reduced speed of processing information
 - reduced attention span/concentration
 - impaired language processing
 - impaired memory
 - impaired reasoning/problem solving
- Cognitive impairment can be very distressing and disruptive.



Ways to treat cognitive challenges

- Evaluation by a neuropsychologist with specialized knowledge of MS to identify specific areas of cognitive impairment so that interventions can be tailored to help the person function as well and as independently as possible.
- Teaching compensatory skills such as memory strengthening techniques, attention training, use of notebooks, lists, organizers, etc.
- Offering counseling and reassurance in dealing with the fear and frustration
- Consider the use of donepezil as this may be beneficial



Team approach critical in addressing mental health and cognitive fitness in persons with multiple sclerosis.

Communication is the key

- Physicians
- Nurses
- social workers
- Neuropsychologists
- therapists
- most importantly-the person with MS and their family



Resources

- National MS Society
- The MS Foundation
- Multiple Sclerosis Association of America
- IOMSN



References

1. Fact Sheet: The World Health Report 2001
2. Abnormal Mental States In Multiple Sclerosis by Dr. Hugh Richards; Way Ahead 2003; 7(1): 6-7
3. National MS Society
4. World Health Organization
5. Case Management In Multiple Sclerosis-by The International Organization of MS Nurses
6. Nursing Management of the Patient with Multiple Sclerosis-AANN and ARN Clinical Practice Guideline Series



Thank You ☺



Spiritual Wellness



Mary Kay Fink, ACNS- BC, MSCN
The MS Center of Saint Louis

Spiritual Wellness

- is a personal matter involving values and beliefs that provide a purpose in our lives.
- While different individuals may have different views of what spiritualism is, it is generally considered to be the search for meaning and purpose in human existence, leading one to strive for a state of harmony with oneself and others while working to **balance** inner needs with the rest of the world.



www.dreamstime.com



MS is the “Uninvited Guest”



MS and Spiritual Health

- Physical, mental and spiritual health are deeply intertwined and have a profound effect on one another.
- Spiritual wellness is an extremely helpful asset for anyone living with a chronic health condition.
- The person with MS may not be able to cure their illness, but the spiritual can be used to help them feel better, cope with pain, symptoms, limits and daily challenges,
- Additionally it will help them to continue to find meaning and purpose in your life and live life more fully.
- When things get really rough it gives one the strength to carry on.

- <http://www.holistichelp.net/spiritual-health.html>



MS has a Ripple Effect

- Spouse or Significant Other
- Children
- Extended Family
- Friends
- Work
- Recreation
- Church/Spirituality

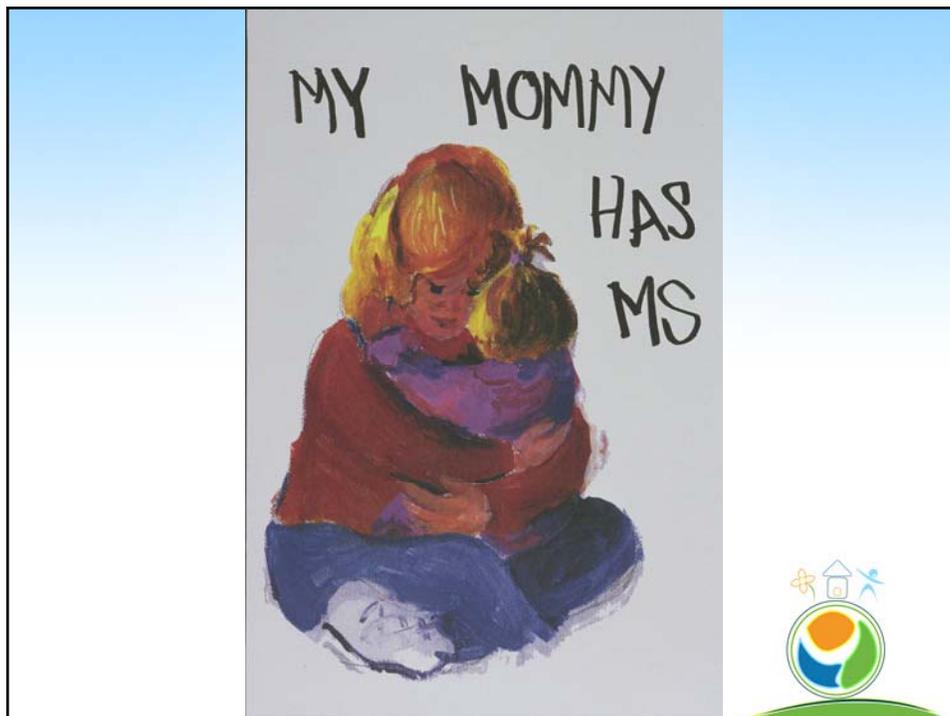
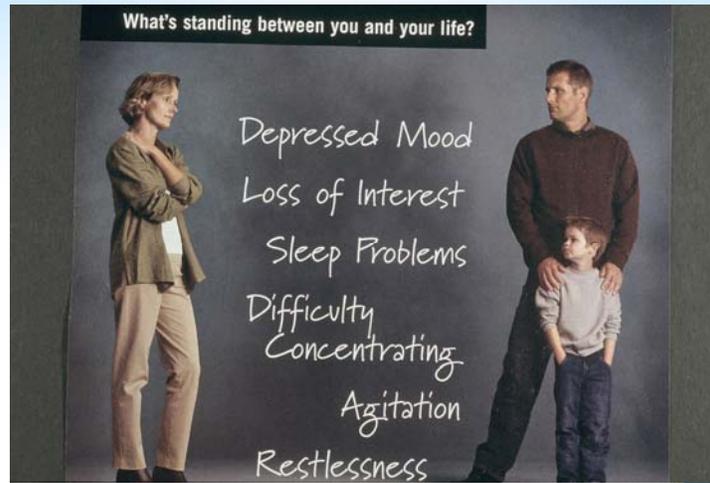


MS is the “Uninvited Guest”

- Affects on spouse
 - Change in roles
 - Caretaker duties
 - Childcare duties
 - Financial worries
 - Marriage stability
 - Communication
 - Coping mechanisms



MS is the “Uninvited Guest”



MS and Children

- Children and adolescents behavior may be because of this “false maturity”
- Become caretakers at an early age
- May not know how to relate to peers
- Or act out when not in that role
- Financial distress is greatest in low-income families with teenage children



Watch for Clues



MS and the Extended Family



MS and the Extended Family

- Family are often called upon to “help out”
- Often retired and find they are rearing their grandchildren
- May be the
- May help financially



MS and Friends

- Persons with MS tend to withdraw from social activities
- They may have a “shrinking” circle of friends
 - Poor mobility
 - Cognitive decline
 - Fatigue
 - Depression



MS and Work



MS and Recreation



MS and Recreation

- Recreation therapy professionals see very few cases where the MS patient actually improve.
- This presents challenges:
 - goals are written to maintain functional ability
 - goals must be modified continually as the disease changes
 - goals include maintaining range of motion, strengthening, enhancing balance.
 - adaptive equipment, support and a acceptance make life enjoyable
 - socialization is a secondary outcome
- Healing of the soul is paramount

• <http://recreationtherapy.net/?p=238>



MS and Church/Spirituality

- Become socially isolated
- Doubts- about a higher being, guilty, shame
- Last on the list of priorities



Spiritual Wellness

- Is having compassion and the capacity for love and forgiveness.
- Altruism, joy, and fulfillment helps one enjoy spiritual health.
- Religious faith, values, beliefs, principles, and morals define ones spirituality.



Why Care?

- A steadily building body of research shows that spiritual and religious practices support health. Empirical studies show relationships between measures of health and religious indices that include prayer, religious observance, and self-rated religiousness/spirituality.

- <http://www.medpagetoday.com/Columns/FocusonPolicy/14725>



Spiritual History

- Spiritual history:
 - Do you use religion to help cope?
 - Is religion a source of stress for you?
 - Are you a member of a supportive spiritual community?
 - Do you have any troubling spiritual questions or concerns?



Interventions

- actively listen to our patient
- use therapeutic communication techniques
- pray with and for our patient
- secure resources such as religious counselor and or psychotherapists

- <https://engineeringhealthcare.wordpress.com/2012/03/26/addressing-spiritual-and-religious-needs-an-evidence-based-nursing-intervention/>



Interventions

- The path to spiritual wellness may involve meditation, prayer, affirmations, or specific spiritual practices that support ones connection to a higher power or belief system.
- Yoga and meditation can also help develop spiritual wellness.

- http://wellness.ucr.edu/spiritual_wellness.html



Sue Fitzmaurice FB/SueFitz50

My point is,
life is about balance.
The good and the bad.
The highs and the lows.
The pina and the colada.

Ellen Degeneres

A logo in the bottom right corner of the slide. It features a stylized house with a chimney, a person with arms raised, and a globe with a blue and green design, all set against a white background with a green hill at the base.

Thank You 😊

A logo in the bottom right corner of the slide, identical to the one in the first slide. It features a stylized house with a chimney, a person with arms raised, and a globe with a blue and green design, all set against a white background with a green hill at the base.

My Mind, Body, & Spirit

Living with Multiple Sclerosis



Jill Griggs

My Life

- At 50 years of life.....I am truly blessed
 - Daughter of Harold and Linda
 - Sister of John, Julie, and Jeff (I am the youngest of 4)
 - Wife of Phillip
 - Mother of Amy, Cari, Emily, and Elijah
 - Grandmother of Gracelyn, Mia, Amirah, Brooklynn, Oliver, Mason, and Charlie
 - Friend of Many



So Much Love.....

Jeremy, Me, Phil, Emily

Cari, Elijah, Amy

Amirah, Mia, Gracelyn, Brooklynn

And there's more!



Oliver, Mason, and Charlie



Multiple Sclerosis

A disease in which the immune system eats away at the protective covering of the nerves.

An unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body.

- Eye Pain – Grayed Vision
- MRI of the brain
- LP
- February 2012



My Experience as a Patient

Perception of my care...

Great medical care, but I needed something more:

- I needed to find a sense of control
- I felt a disconnect from within
- I needed a definitive answer from a crystal ball of my future



Holistic Approach

Finding balance in my life.....

Isn't that what we are all looking for?

My need is to integrate body, mind and spiritual well being for my ultimate overall wellness.

Where did I start?

I made a choice.



Choose Happiness

- It all started here for me...
 - Focusing on the positives in my life
 - Motivation to take better care of myself (eating, exercise, medication, vitamins, sleep)
 - Learning to laugh at myself
 - Taking risks and expanding my comfort zone



Sharing Happiness

This is my ultimate goal...

We have all heard the saying, "Love in your heart isn't love until you give it away" and I completely agree.

I also believe that true happiness in your heart is found when you share it with everyone you come in contact with.

Happiness motivates the body, calms the mind, and excites the spirit.



The physical structure of a human seen as one organism. The fleshly or corporeal nature of a human, as opposed to the spirit or soul.

BODY---

“THE BODY HEALS WITH PLAY”



The element of a person that enables them to be aware of the world and their experiences, to think, and to feel, the faculty of consciousness and thought.

MIND---

“THE MIND HEALS WITH LAUGHTER”



The nonphysical part of a person that is the seat of emotions and character, the soul.

SPIRIT---

“THE SPIRIT HEALS WITH JOY”



Thank you

Questions?

