MS Relapse Management



Intermittent MS Symptoms



Patients experience a temporary worsening of old symptoms for up to 1–2 days in the following situations:

- Heat
- Increased stress
- Recent surgery
- Vaccinations
- Dental treatment
- Infections and fever

Old symptoms may fluctuate over time. They usually do not require steroid treatment. They are most commonly a reactivation of symptoms from previous neurological damage.

GP to Consider Treatment of a Relapse



If the patient has new symptoms with neurological signs or worsening and prolonged old symptoms AND a septic screen is negative, consider high dose methylprednisolone (500mg orally) for 5 days then stop.

Symptoms of a relapse include:

- Changes in vision
 (double vision, blurred vision, colour changes, pain on eye movement)
- Urinary or faecal urgency, frequency or retention or incontinence
- Sudden unilateral hearing loss
- Numbness or parasthesiae
- Imbalance
- Weakness or clumsiness

Contact Patient's Neurologist or On-Call Neurologist



If any of the following situations occur, contact the patient's neurologist or the on call neurologist.

- Any new neurological symptom in a patient on fingolimod, natalizumab, di-methyl fumerate
- The patient requires hospitalization for the relapse
- Patient worsens despite steroids
- You are concerned that the patients symptoms are not MS related

Call Neurologist

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