

Managing a Multiple Sclerosis (MS) Relapse

What is a MS Relapse?

A relapse is any new or worsening neurological symptom that lasts for at least 24 hours or more in the absence of other causes such as illness, fever, medication side effects or stress.

Relapses are unpredictable and may occur months or years apart. They may be mild (not interfering with daily activities) to moderate (may have to change your daily routine until the symptoms resolve) to severe (significant impairment interfering with ability to function, for example symptoms prevent going to work).

Relapses may come on over a period of days to weeks and the symptoms may last for several months.

How are relapses treated?

Relapses can be managed with corticosteroids (or steroids for short). Not all relapses are treated with steroids. Steroids are reserved for moderate to severe relapses.

Steroids can be given in pill (called prednisone) or intravenous form (called *methylprednisolone*). In the event that you require steroids, your MS health care provider will talk with you about which type of steroid would be best for you.

To be effective in MS, the steroid treatment must be given in high doses.

If you are prescribed prednisone, it will be dispensed to you by the pharmacy of your choice. You will be asked to take 25 prednisone pills a day for 3 or 5 days. You can take this as one dose in the morning or as a divided dose 13 pills with breakfast and 12 pills with lunch.

If you are prescribed intravenous steroid treatment, the *methylprednisolone* will be given to you at the hospital as an outpatient or by home care. You will be treated with 3 to 5 doses of intravenous steroids. Each infusion will take a couple of hours.

What do steroids do?

Steroids help to lessen the relapse symptoms and help to speed up your recovery. They are not a long-term treatment. Steroids do not replace disease modifying drugs.

Not all relapses are treated with steroids. If you think you are having a relapse, contact your MS nurse to review your symptoms and discuss what if any treatment is required.

Do steroids have side effects?

Like all medicines, steroids can have side effects. When used infrequently and for short periods of time, side effects are usually manageable.

You may experience some of these side effects however generally the side effects are mild and go away once the treatment is finished.

Most of the side effects are mild including:

Difficulty sleeping or insomnia – this will improve once the steroids are finished.

Metal Taste in Mouth - the “funny” taste in your mouth may last for the entire time you are treated with steroids. Chewing gum, lozenges or fruit drinks, such as orange juice, may help.

Mood Changes - You may feel “hyper” or irritable during your treatment. Talk to your MS nurse if this symptom bothers you or does not go away once the treatment is finished.

Appetite Changes, Heartburn, Stomach Upset - You may try over-the-counter antacids such as TUMS® or ranitidine to treat this.

Steroids may have more serious side effects including:

Avascular Necrosis of the hip - is a serious but very uncommon side effect where the hip bone loses blood supply and is damaged. It causes severe pain in the hip and is not reversible.

Psychosis – is a serious but uncommon side effect where the person has difficulty distinguishing what is real and what is not. It can be treated with medication.

Elevated blood glucose – is a common side effect where blood glucose (sugar) levels increase by reducing the action of insulin (causing insulin resistance). This is most common in people who have a diagnosis of diabetes. However, regular or prolonged use of steroids may increase your risk of developing diabetes.

When steroids are used frequently or for prolonged periods of time, other side effects can occur. These include:

Osteoporosis - is the loss the of bone thickness. This can lead to bone fractures, loss of height and bone deformities. The chance of getting this problem is increased if you have other risk factors. Some of these are being female, being inactive, smoking, not having enough dairy products in your diet and having a family member with this condition.

Cataracts – a cataract is a coating that covers the lens of the eye. This causes dimming vision. This can be corrected with surgery.

What will happen after I take this treatment?

Once you have finished the steroid treatment, you may notice that your symptoms have not improved much if at all. Be patient as sometimes relapses take several weeks or months to improve even with treatment.

If you are concerned that you are not improving as quickly as you should, contact your MS Nurse or Neurologist at 902-473-5734.