

THE ROLE OF REHABILITATION IN MULTIPLE SCLEROSIS - IS IT WORTH IT?

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Introduction

Multiple Sclerosis is a complex immune-mediated disease that causes demyelination and degeneration within the brain and spinal cord. This may result in muscle global weakness, abnormal tone, visual disturbances, decreased sensation, tremor/ataxia, bladder, bowel and sexual dysfunction, fatigue and impaired ambulation. Those symptoms cause disability and have a huge impact on quality of life (QOL).

Methods

Literature review about the evidence assessing the rehabilitation interventions for maintaining functional capacity and reducing risk for losing important abilities and independence. Databases of Cochrane Library/Pubmed/Medline were search from 2005-2016.

Results/Discussion

Physical exercise is safe and should be encouraged. Even though rehabilitation has no direct influence on disease progression, studies have shown that this intervention reduce the limitations in order to maintain quality of life. Timing and setting of rehabilitation interventions should be selected individually. Benefits are generally higher in earlier phases of MS.

A multidisciplinary approach, constitutes the basic concept of rehabilitation. The main symptoms that need to be specifically attended are spasticity, cognitive impairment, motor, sensory and visual disturbance, fatigue and bladder dysfunction.

Deficits in ambulation should be addressed to improve energy efficiency and reduce falls. Compensation through appropriate prescription of assistive devices, bracing, and wheelchairs will help improve safety. Cognitive training can improve memory span, working memory, and immediate visual memory. New promising rehabilitation techniques may also be useful: impairment-oriented training, CIMT, electromyogram-triggered neuromuscular stimulation, and robotic interactive therapies.

Conclusion

Rehabilitation can have significant impact on achieving and maintaining QOL improving independence in patients with MS.