

MULTIPLE SCLEROSIS

WHY?

Immune-mediated CNS Demyelination of:

- *Optic nerve
- *Brain
- *Brainstem
- *Cerebellum
- *Spinal cord

WHO?

- F(2): M (1)
- ~30 average age of onset (usually 15-45)



WHAT?

Tempo

- Relapsing/remitting (90%)
- *Flares occur over hours/days and resolve days/wks
 - Secondary Progressive
 - *Can be later stage of RR
 - Primary progressive (least common)

Most common symptoms of flare

- *Optic neuritis
- *Internuclear ophthalmoplegia
- *Transverse myelitis (usually partial)
- *Unilateral ataxia

DDX?

- of CNS demyelinating disease (NMO, MOG)
- of acute focal CNS
- of multifocal white matter lesions

DX @ 1st episode

Compatible neurologic syndrome

AND

Characteristic MRI Findings

-Dissemination in both space and time

*Space: T2 lesions at target sites, usually small/ovoid

*Time: Enhancing (acute) and nonenhancing (chronic); or non-enhancing + CSF OCBs

RX

Flare: High dose steroids

Chronic: Disease-modifying

EDU

-Consider MS in young patient w/ trigeminal neuralgia, esp bilaterally

~1/2 patients w/ presumed MS have alternative Dx

-CSF oligoclonal bands represent intrathecal antibody production, not specific for MS

