MSSI®

MULTIPLE SCLEROSIS SOCIETY OF INDIA

Mental health & MS

Outline

- Introduction
- MS and mental health coping
- Screening
- Diagnosis
- Treatment
- Carers support

MS and mental health

- UK survey of MS patients
  - Depression 23% 10% general popln
  - Anxiety 21% 7%
  - Cognitive impairment 30-70% 6%
- 15-250 per 1,00,000
- Women
- 20-40yrs

Coping strategies

- Modifiable
- Involves cognitive and behavioural effects
- Manage external and internal demands
- Active/adaptive vs Avoidant/maladaptive

Types of coping

- problem-focused, which includes solving, reconceptualizing, or minimizing the effects of stressors;
- emotion-focused, including affect regulation; and
- avoidant, which refers to wishful thinking, escapism

Coping and MS

- Women, older patients, and those with progressive MS tend to use denial and religion-based coping
- Higher depression scores lead to more avoidance strategies, negatively impacting QoL, while anxiety also detracts from mental QoL domains
- positive reinterpretation and growth can enhance QoL by reducing stress, depression, and anxiety
- coping strategies have a significant impact on the relationship between daily pain, fatigue fluctuations, and the resulting functional and emotional outcomes
- Avoidant coping strategies lead to greater functional and emotional difficulties

MS and mental health coping

- Sadness and worry over diagnosis
- Irritability and fear
- Sleep disturbance
- Appetite changes
- Lack sexual drive
- Self harm, social isolation etc
- Work performance issues- job loss
- Not wanting or seeking treatment

Other features

- Brain fog
- Fatigue
- Pain
- Mobility issues
- Cognitive issues
- More likely prodrome to MS

MS and mental health

- Depression
  - Lesions in brain
  - Inflammatory reaction
- Starts as physical symptoms
  - Low confidence
  - Fear
  - 1 day---- many days----- don’t want to
  - Unpredictable course----- anxiety

MS and mental health

- Bipolar disorder
  - Depression with mania or hypomania
  - Opposite to depression
- Pseudobulbar affect
  - Involuntary episodes of crying or laughter
  - 10% of MS patients
  - More often associated with the progressive form of MS
  - Good response to treatment

MS and mental health

- Side effects of meds
- Psychological effects
  - Problem solving vs emotional focused
  - Task oriented coping vs avoidance
  - Cognitive reframing vs helplessness
- Social circumstances
- Financial strain

Prognosis

- SPMS had higher depression and anxiety levels and lower QoL scores.
- PPMS had lower depression and anxiety scores and a better QoL have adapted to constant physical impairments from disease onset.
- The precarious condition of SPMS patients can be attributed to the cycle of relapses and recoveries
- Duration of the disease does not exacerbate depression

Screening for mental illness

- DASS
- HAM-A & HAM-D
- GAF/ QoL scales
- MMSE
- CAGE etc
- Ask yourself or carers

Diagnosis

- Psychiatrists
- Primary care physician
- Neurologist
- Online tools
- Hospital liaison

Treatment

- Biological
- Psychological
- Social
- Complimentary treatments
- Support groups
- Day care/ Hospital

Social and family support

- Support from family and friends
- Marital and successful sexual reln is protective
- Longer duration of disease and higher education are poorer outcomes

Carer support

- MS society
- Tele manas
- Regional support centres
- Local support

THANK YOU

MSSI®
MULTIPLE SCLEROSIS SOCIETY OF INDIA

Dr. Anand Jayaraman

&

Arun Mohan (PwMS since 2017)