

# 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
- Recent surgery
- Dental treatment
- Increased stress
- Vaccinations
- 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**

**021-544-099**