

Symptoms, effects and management

Visual Problems

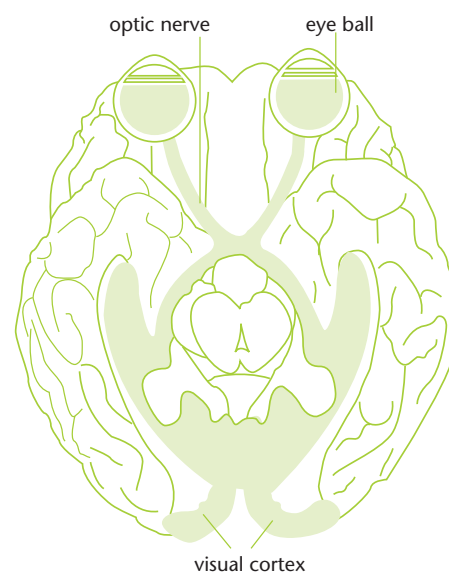
NICE guidelines state that each professional in contact with a person with MS should consider whether the individual's vision is disturbed and this could be achieved by considering the ability to read the text of a newspaper or see television.

Optic neuritis is the most common ocular manifestation of multiple sclerosis and is characterised by an inflammation or demyelination of the optic nerve. The optic nerve is the second cranial nerve that joins the eye to the brain, transmitting the retinal image to the brain. Optic neuritis is usually transient and associated with good recovery.

The effects of optic neuritis, ie visual disturbance and ocular pain, are the first symptoms experienced by 25% of people with MS. 70% of people with MS will have optic neuritis during the course of their disease. Like MS itself, it normally affects people aged between 20 and 40 years, women more than men, and usually occurs in one eye. Not everyone who experiences optic neuritis goes on to develop further symptoms of MS, but a significant proportion do.

The visual loss associated with optic neuritis is often monocular. It occurs suddenly, is progressive and usually reaches its peak after about two weeks. Frequently there is pain, particularly during eye movement. Visual recovery takes from 4 to 6 weeks, but colour vision can be severely impaired with other minor defects often persisting. There are commonly central scotomas, which can also be persistent. A scotoma is an area of depressed visual function surrounded by an area of normal vision.

A person with optic neuritis presents with loss of vision and complains of eye pain, particularly associated with eye movement. Further investigation usually reveals defects in colour vision and central scotomas measured with a visual field analyser. On retinal inspection with an ophthalmoscope, the optic nerve head is clearly visible, and often unaffected as the inflammation is usually retrobulbar, i.e. on the optic nerve behind the eye rather than at the nerve head.



Double vision (diplopia) may be another early symptom of MS. This occurs when the nerve pathways that control eye movements are damaged. The vision from each eye is usually normal but the person experiences double vision, often in one particular direction of gaze. If this symptom occurs as part of a relapse of MS then it will often recover, partially or fully, with the use of steroids. When the condition develops more slowly there is often little that can be done, although a patch or prism glasses may be useful.

Nystagmus can also occur. This is a condition in which the eyes are seen to move in a more or less rhythmical manner, from side to side, up and down, or in a rotary manner from the original point of fixation. This sometimes goes unnoticed by the person with MS but is clearly seen by the observer. This is a difficult symptom to treat. Occasionally drug therapy can help and very recently the use of a muscle relaxant injection (botulinum) into the eye muscles has been shown to be effective.

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Further Reading Publications from the MS Trust*

► For people with MS

MS: what does it mean for me? - For people newly diagnosed with MS, a practical introduction to MS to help answer questions at a time of uncertainty.

MS together - A DVD that offers clear and concise information on MS.

Disease modifying drug therapies - A general guide to people with MS that covers disease modifying drug therapies licensed for use in the UK.

At work with MS: managing life and work - Elements that make for a successful working life when someone has MS and considers the support available to both the person with MS and the employer.

Living with fatigue - Offers advice on how to live with fatigue, one of the commonest symptoms of MS.

MS Explained - A guide to the mechanisms of the disease.

Sexuality and MS - a guide for women - Explains how MS can impact on sexuality and intimacy and offers positive practical solutions.

Young person's guide to MS - For young people aged 10-15 who have a parent with MS.

Exercises for people with MS - Exercises from a senior physiotherapist illustrated throughout by easy to follow diagrams and on DVD in **Move it for MS**.

Move it for MS - A DVD of exercises for people with MS.

Factsheets covering a wide range of symptoms and therapies - for further details and to order any of the publications contact the MS Trust Information team 01476 476 700 email infoteam@mstrust.org.uk.

► For health and social care professionals

Spasticity care pathway - The role of the nurse in the management of spasticity

Therapists in MS: delivering the long-term solutions

Comprehensive resources are available to download from our website www.mstrust.org.uk.

* As of November 2007

Publications

We hope that you have found this information helpful. The MS Trust offers a wide range of publications, including our quarterly newsletter Way Ahead and the MS Information Update. These provide details of latest developments and recently published papers in the field of MS. Our website is regularly updated www.mstrust.org.uk

Contact us to receive our newsletter or to request another publication. All our services are free within the UK.

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We hope that you have found this information helpful. The MS Trust offers a wide range of publications, including our quarterly newsletter Way Ahead and the MS Information Update. These provide details of latest developments and recently published papers in the field of MS.

All our services are free within the UK.

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