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MULTIPLE SCLEROSIS IN PAKISTAN: COLLABORATIVE WORKING TO IMPROVE CARE

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Respected Editor,

We read the recent article by Zara Shah et al with great interest.¹ We appreciate the effort to present and publish novel data on Multiple Sclerosis (MS) in Pakistan. Herein, we want to put some light on a very important aspect of management in MS, i.e., multidisciplinary neuro-rehabilitation, to be considered an integral part of treatment in MS to improve the quality of life. Neurological rehabilitation is considered to be a key component of treatment in MS but has largely been neglected in developing countries.

MS is a complex condition affecting almost every aspect of a patient's life and causing significant long-term disability burdens worldwide. It has an unpredictable disease course and varied patterns of presentation, which requires comprehensive, long-term management, including pharmacology and multidisciplinary neurological rehabilitation.² A comprehensive assessment of functional disturbances and personal needs is essential for an individualised, goal-oriented treatment programme. Realistic goals must be laid down in collaboration with patients and caregivers before multidisciplinary inpatient rehabilitation is started, which provides coordinated and structured programs with the aim of improving function, well-being, and quality of life in people with MS.^{3,4}

The available rehabilitation management may include (but not limited to) physical therapeutic modalities (physical activity and exercise therapy, aerobic conditioning, gait training, balance and coordination, hippo therapy, hydrotherapy, hyperbaric oxygen therapy), occupational therapy (assistive technology to improve mobility and function), speech and swallowing therapy, cognitive and psychological interventions including cognitive behavioural therapy. Vocational rehabilitation and tele-rehabilitation may be indicated in some cases.³ Pain, spasticity, bladder and bowel problems and musculoskeletal consequences of the long-term neurological disability are all important symptoms in patients with MS and may result from different causes. Comprehensive evaluation and continuous management of these symptoms are provided through the inpatient/outpatient input from the physical medicine and rehabilitation consultant through the multidisciplinary approach.⁴ It has been shown that MS patients who receive rehabilitation differ significantly from those who do not in terms of their functional status the provision of neurological rehabilitation is also shown to ease the burden of the symptoms by improving self-performance and independence.^{4,5}

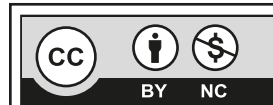
In short, we advocate the inclusion of neurological rehabilitation in MS management in Pakistan to give maximum benefit to the patient and provide lifelong support to the patients and relatives.

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