

Editorial

Despite the advances in multiple sclerosis (MS) treatment, symptom management remains a major aspect of MS therapy. This issue of the *International Journal of MS Care* contains several articles that delve into the understanding and management of some common clinical problems seen in MS.

Ferrando and colleagues address the problem of detecting depression. In MS, depression is often missed for several reasons. First, the patient may not show any obvious signs of depression; therefore, unless the individual is asked about his or her mood, depression may not be detected. Second, many people with MS have some degree of involuntary emotional expression disorder (IEED), and their apparent mood in the clinic may not reflect their internal affective state. This is especially true when IEED is expressed as pathological laughter. These authors have developed an effective screening tool for depression.

Using the Consortium of Multiple Sclerosis Centers NARCOMS patient database, Sutton and colleagues compared patient satisfaction for patients receiving treatment in MS care centers with those cared for in other settings. The authors found that patients who went to MS centers were more satisfied and had better access to ancillary services than people who went elsewhere for MS care.

Jackson and colleagues deal with the problem of imbalance in MS, a common cause of falls and injury. A fall-related injury is often the event that converts a person with limited ambulation into one who is permanently wheelchair bound. The authors have developed a home treatment program that improves balance as measured by the Berg Balance Scale, which measures how well various physical movements can be accomplished.

Graham and colleagues report on a means of assessing the dimensions of MS fatigue. Efforts to sort out the many factors involved go back to at least the early 1980s. The article presents a significant advance in efforts to understand the major factors underlying fatigue in MS.

Finally, Wiggins, Rader, and Erdmann present a case report on the benefits of an exercise program. Long experience in caring for people with MS suggests that exercise has numerous benefits, including, counterintuitively, reduced fatigue. This article provides evidence for various benefits, many of which are not captured by existing scales.

The articles in this issue of the journal emphasize the benefits of a comprehensive, multidisciplinary approach to MS management. They also illustrate the significance of the Consortium of Multiple Sclerosis Centers.

—Robert M. Herndon, MD