



Behavioral Health Interventions for Persons with MS at OSU

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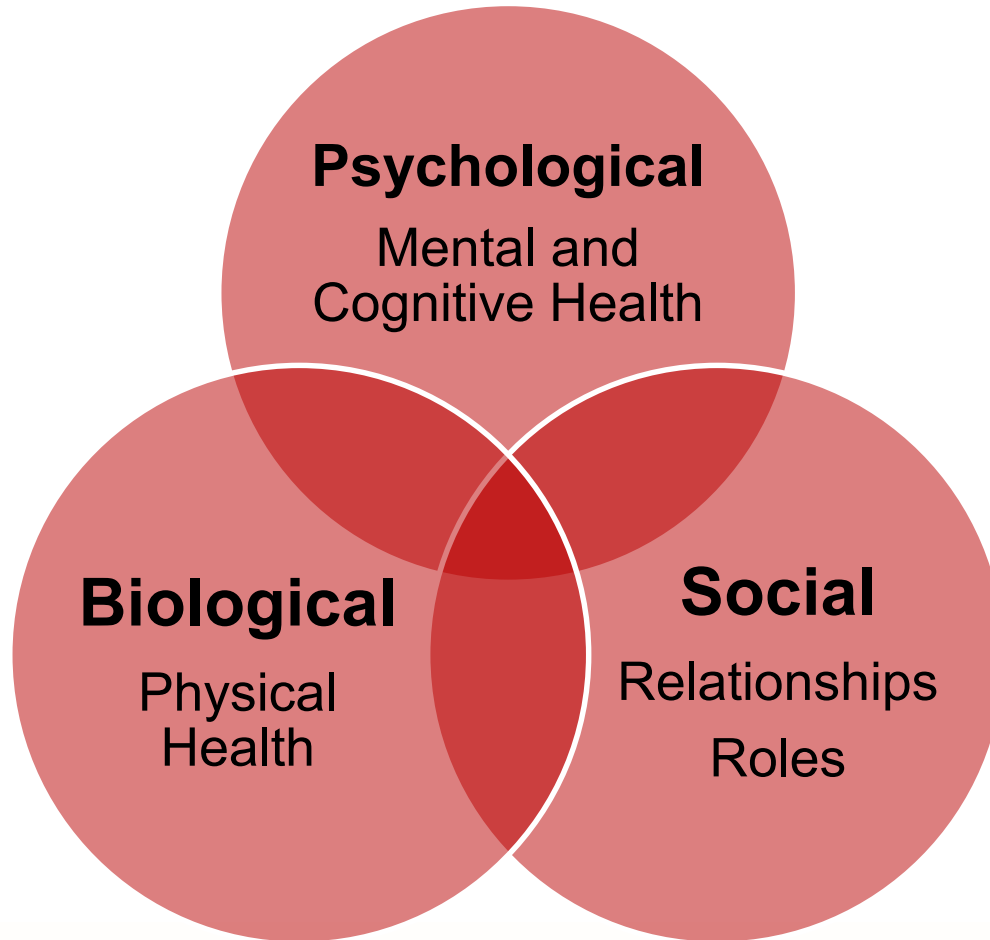
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Treating the “Whole Person”



Behavioral Health Treatment and MS

Research suggests that behavioral health treatment, such as psychotherapy can be effective at addressing many symptoms that patients with MS experience

The goal is to learn new coping strategies to manage a range of symptoms/experiences

Common treatment targets include:

Mood (depression, anxiety)

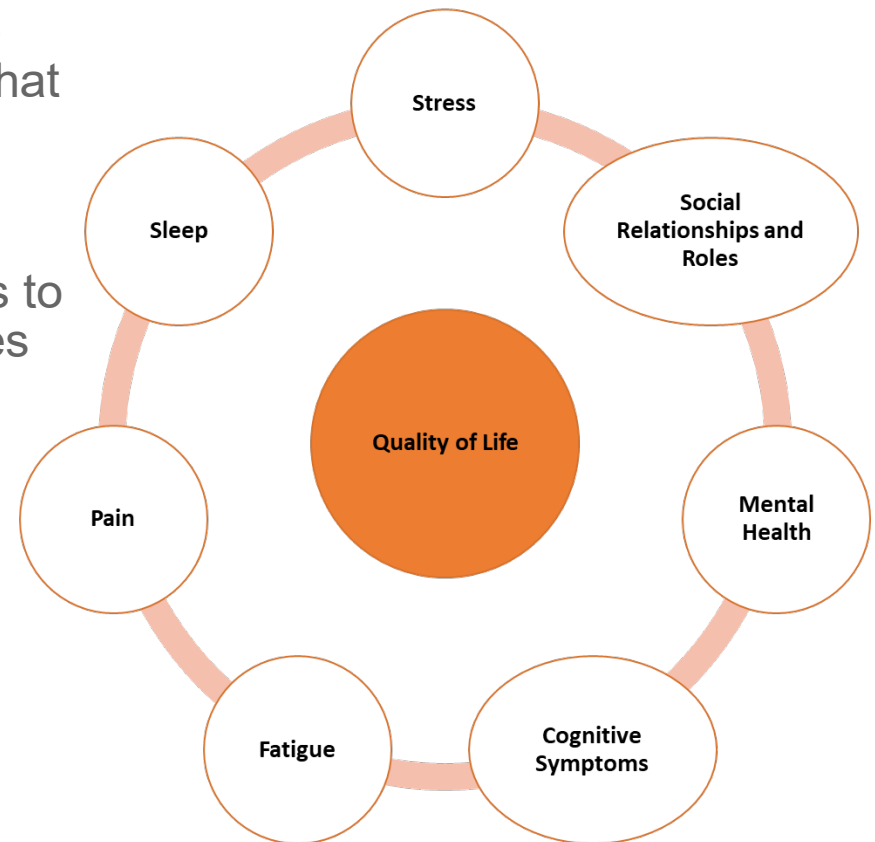
Adjustment to MS

Fatigue

Sleep

Chronic pain

Cognitive symptoms



Emotional Symptoms among Patients with MS

Patients with MS experience unique challenges

Having MS can be stressful

Stress may exacerbate MS symptoms

There may also be disease-specific reasons individuals with MS experience emotional symptoms

Prevalence of depression among patients with MS: 30.5%

Prevalence of anxiety among patients with MS: 22.1%



Myths about Emotional Symptoms among Patients with MS

Myth #1: Anyone with a disease like MS will be depressed

Myth #2: People with MS and depression will always “look and act depressed”

Myth #3: Depression and grief are the same thing

Myth #4: Visible MS symptoms are the most difficult to cope with

Myth #5: Fatigue and cognitive dysfunction are not related to depression

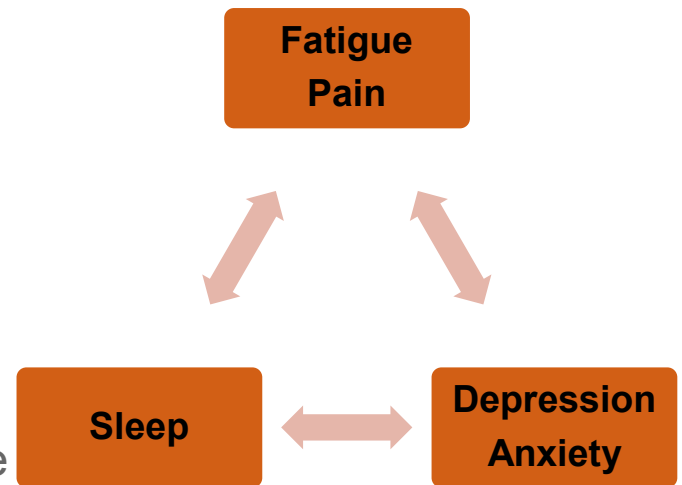
Fatigue, Sleep, and Pain

Fatigue, sleep, and pain are common symptoms of MS

Symptoms of fatigue are present in 75-95% of MS patients

Sleep disturbance can be due to a variety of reasons, including bladder dysfunction, spasticity, pain, anxiety/depression, and fatigue

Problems with fatigue, sleep, and mood have been shown to impact sensations of pain (and vice versa)



Cognitive Symptoms and MS

43-70% of patients with MS have cognitive complaints

Symptoms may vary greatly between individuals

Common patient complaints include:

- Decreased mental efficiency or “brain fog”

- Decreased attention/concentration

- Short-term memory

Treatment to learn ways of compensating for weaknesses have been most effective (i.e., cognitive rehabilitation)



What Does Psychotherapy Treatment Look Like?

- Meet with clinical psychologist or therapist
- Review background, symptoms, needs, and goals
- Collaborate with psychologist to determine an appropriate treatment plan
- Learn new coping strategies in sessions through education and practice
- Outside of session, practice strategies
- Review experience using strategies, problem solve, and make adjustments



Evidence-based psychotherapy is time limited!

Typically no more than 12 sessions

Examples of Effective Strategies

Stress/Mood:

- Identifying and challenging unhelpful thoughts
- Relaxation strategies (mindfulness, deep breathing, progressive muscle relaxation)
- Increasing engagement in personally meaningful activities (goal setting, activity pacing)

Cognitive Symptoms:

- Cognitive rehabilitation (learning compensatory strategies)

Sleep:

- Relaxation strategies (mindfulness, deep breathing, progressive muscle relaxation)
- Sleep hygiene
- Quieting distressing thoughts/stress

Pain and Fatigue:

- Activity pacing
- Relaxation strategies (mindfulness, deep breathing, progressive muscle relaxation)
- Addressing unhelpful thoughts related to pain and fatigue
- Increasing engagement in personally meaningful activities

Helpful Resources

National MS Society

<https://www.Nationalmssociety.org>

<https://www.nationalmssociety.org/Chapters/OHA>

Multiple Sclerosis Association of America

<https://mymsaa.org/>

Multiple Sclerosis Foundation

<https://msfocus.org/>

National Suicide Prevention Lifeline

1-800-27-8255

<https://suicidepreventionlifeline.org/>

24-hour free hotline and online chat services