



## Urinary Incontinence

### Urine In-continents

If sclerotic plaques resulting from chronic inflammation are located in areas of the central nervous system that regulate elimination, the patient may experience bowel and bladder dysfunction. Patients with multiple sclerosis may develop a spastic or uninhibited bladder, leading to urinary urgency and frequency. In contrast, a lesion involving the reflex arc that controls bladder function can result in a flaccid or hypotonic bladder. Because these patients lack the sensation or urge to void, they often develop a large bladder capacity. Anticholinergic medications may be used to manage bladder dysfunction.

## Optic Neuritis

### Optics Nerve-on-fire

Patients with multiple sclerosis may develop optic neuritis, an inflammation of the optic nerve that causes visual disturbances. Evoked potential testing, which records electrical activity in response to visual stimuli, can help detect abnormalities such as optic neuritis.

## Considerations

### Women Between 20-50 Years Old

#### Women with (20) dollar bill and (50) Cent

Multiple sclerosis most commonly affects adults between the ages of 20 and 50. Adult females are affected two to three times more often than males. Although less common, multiple sclerosis can also occur in adolescents and older adults.

### Relapse and Remission of Symptoms

#### Play and Pause button

Individuals with multiple sclerosis often experience periods of symptom relapse and remission. Demyelination causes neurologic symptoms such as weakness; however, partial remyelination may occur, leading to temporary improvement. Symptom remission may be followed by relapse when the inflammatory process reactivates and causes further damage to the myelin. Over time, repeated exacerbations can lead to progressive deterioration of neurologic function.