Effects of Multiple Sclerosis on Motor Movement

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Abstract
This article explains about what the effects of multiple sclerosis on motor movement are which includes muscle weakness and what is the reason for muscle weakness, spasticity & loss of coordination and what are the symptoms of multiple sclerosis.

Introduction
In the diseased condition of multiple sclerosis, myelin sheath present within the nerve fibres of central nervous system gets damaged due to which it causes pain, tingling and numbness of arms and legs. It causes muscle weakness as the muscles in a person’s body get damaged due to which slowdowns messages/signals. Multiple sclerosis also causes spasticity and loss of coordination. Muscle weakness associated with multiple sclerosis is a type in which there is depleted energy or no energy but the person’s inability to exhibit movement of the muscles. It is mostly likely to be perceivable in limbs. Muscle weakness can cause a major negative impact in a person’s daily life which involves walking, showering, & even dressing. Foot drop is a condition in which a person will feel extreme incapability & difficulty to lift the front part of foot.

Spasticity is a condition in which muscle tone rises or muscle tightness occurs due to loss/damage of myelin sheath in channels where signals between motor & chain takes place. As the pathways are destructed signal transfer between muscles and brain is slowed down due to which the persons muscles gets harden and clutch up on their own. Due to the spasticity, muscles become harder and inflexible due to which a lot of pain occurs as time passes since the person will not likely be able to use the muscle which hurts it will result in muscle atrophy. Loss of coordination includes vertigo, blurry vision, sensory problems and numbness in legs and have become progressively responsive to the brain’s regenerative potential, also as dynamic brain reorganization, months and even a few years later. Neurorehabilitation scientists pushed for travel adaptation to outline the permissive conditions beneath that optimum modification and recovery happens, apparently requiring controlled, intensive stimulation of impaired brain networks.

Neurorehabilitation could also be thought-about to be a mixture of 2 processes, which has associate optimum adaptation to incapacity associated an alteration of incapacity in sort or degree. associate adaptation could be the prescription of associate appliance, like a chair, cane, walker, or brace, associate alteration could occur by natural processes or by the manipulation of the physical talents or anatomico-physiological structure of the disabled person.

They are certain symptoms for multiple sclerosis which affect certain parts of the body which is unique from patient to patient. In some patients symptoms gets pronounced and in some patients symptoms just appear and disappear.

Fatigue, problems with sight, trouble with balance & dizziness, Osteoporosis, numbness and tingling, muscle spasms, stiffness, weakness, problems when decision making, sexual problems, bladder problems, Bowel Problems, Problems with speech & swallowing.

Conclusion
Multiple sclerosis is an autoimmune disease which mainly have a target muscular movements of a body leading to a person’s incapability to walk to due to muscle weakness which is caused due to persons incapability to move the muscle as the signal channel between motor and brain is damaged due to abolition of myelin sheath in nerve fibres of central nervous system. Multiple sclerosis symptoms are varied from person to person in which some of the symptoms may come and disappear whereas in others they might improve or get cleared.

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