Multiple Sclerosis Classification and Overview

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Abstract

Multiple Sclerosis is briefly called MS. It's an disease during which the myelin sheaths of the nerve cells are damaged within the brain and medulla spinalis (spinal cord). The body mistakenly attacks the protective material round the neurons (axons) of the brain and therefore the medulla spinalis . This means that the system which usually works against infections, confuses and attack to internal tissues with foreign objects like bacteria. In the MS, the immune system attacks to myelin sheets over nerve fibers. The multiple sclerosis can damage the myelin and eliminate it from the nerve field partly or completely and makes wounds that are called lesion, plaque or sclerosis. Disruption of the messages transfer in the direction of the nervous system occur due to Damage to myelin. The message may be slow or incorrect and it also may be transmitted from one strand to another or rejected altogether. This damage can interfere with the parts of the nervous system ability that are liable for communication, leading to high levels of physical symptoms.

Introduction

The explanation for MS has not yet been confirmed, but evidence indicates that there's a posh interaction between environmental and genetic factors. This stimulates the immune system to supply an autoimmune inflammatory response targeting myelin forming cells. Over time, loss of axon and neurodegeneration may lead to an abrupt increase in disability [1]. However, Multiple Sclerosis is not directly inherited and not like some of the complications, only one gene does not result in multiple sclerosis. It's possible that a combination of genes will make some individuals more susceptible to Multiple Sclerosis. But these genes are among the population also. Therefore, genes are only part of the narrative, and other factors are involved in MS. It is of four types according to the International Advisory Committee on MS Clinical Trials in 2013: Clinically isolated syndrome, relapsing remitting, and secondary progressive and primary progressive [2]. The diagnosis of MS is predicated on the mixing of clinical, imaging and laboratory findings. To demonstrate evidence of dissemination at a time and place, and most importantly, to eliminate other neurological conditions Clinical expertise is essential. MRI can provide this evidence and, apart from other conditions, provide early detection with increased confidence with successive versions of diagnostic metrics. The diagnostic criteria have improved since technology has improved to make definitions better, easier, and more accessible to parts of the population, while preserving the specificity and sensitivity. However, several strategies to determine if you have met the old criteria for diagnosis of Multiple Sclerosis. Some of these strategies include: Accurate medical record, neurological exam and various tests, including spinal fluid analysis, and blood tests to eliminate other conditions [3].

References

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