



MS Spring 2010 Matters

Multiple Sclerosis Services Program Turns 30!

In April of 1980, after several years of planning, a group of people officially launched an organization called the Area VII Multiple Sclerosis Service League. They were brought together by the belief people who had MS and their family members needed emotional support, information about the disease and help getting connected to other services and resources in the community.

These people were truly visionary, which was recently validated by the Healthy Iowans 2010 which found people affected by chronic, progressive illness need: emotional support, current information and access to community services. Further, they found the health and human service systems in Iowa are fragmented and difficult to access.

Those of us involved with what is now the Multiple Sclerosis (MS) Services, a program of Exceptional Persons, Inc., continue this same quest. Some of the pioneers of this program have moved out of the community, others have passed on, and still others remember those first difficult years of supporting an organization working to give hope and help to people facing a progressive, incurable disease.

The success of their endeavors can be measured by the hundreds of people who have benefited from their commitment to help make a better life for those affected by Multiple Sclerosis. Please join the Advisory Committee of MS

Services, the Board of Directors of Exceptional Persons, Inc. and the hundreds of people who have supported this program with their financial support and volunteer hours as we celebrate the accomplishments of our program over the last 30 years.

Save the Date

Plans are well underway for the 5K Run, Walk, and Roll 2010. Your participation and sponsorship help assure the continuation of valuable services. Hope to see you there!



Saturday,
SEPTEMBER 18 • George Wyth State Park
Registration 9:00 am • Start 9:30 am • Awards 11:00 am

Shh... Do we have to talk about this?

Bladder problems are vexing, embarrassing and often a topic avoided, even with your doctor. The urinary system eliminates urine from the body using complex neurological messages. The urinary system includes the kidneys which filters the blood to remove waste products. The bladder is a muscular sac that stretches to hold the urine until it passes through the hollow tube, the urethra. The last stage of the voiding process is the opening and closing of the sphincter, a valve-like muscle that controls the holding or releasing of the urine.

When the bladder has accumulated 6 to 8 ounces of urine, nerve endings in the bladder wall are stimulated which, signals an area in the spinal cord referred to as the “voiding reflex center” that the bladder is full. Then the voiding reflex center sends a message to the brain that it is time to



urinate. The brain then relays to the spinal cord two signals – one to contract the bladder and the other to the urethral sphincter muscle to relax allowing the urine to flow out of the body.

Such intricate communication through a central nervous system damaged by MS can be disrupted causing urinary tract symptoms. The most common symptoms include:

- *Increased frequency* - the urge to urinate frequently, sometimes every 15 to 20 minutes
- *Urgency* involves the feeling of having to empty the bladder and the inability to hold it once the urge is felt.
- *Dribbling* is leaking of a small amount of urine sometimes without the awareness of the person.
- *Hesitancy* may be related to urgency. The person is unable to urinate even though they experience the urge to void.
- *Incontinence* is the inability to hold the urine because they cannot reach the toilet in time or due to the unawareness of the need to empty the bladder because of blocked neurological communication.

The most common MS-related bladder problem is *small spastic bladder* sometimes referred to as “failure-to-store” which is caused by demyelination between the voiding reflex center and brain.

Demyelination in the voiding reflex center blocking communication to the bladder and the brain, can result in a bigger or *flaccid* bladder.

The third type of bladder dysfunction related to MS is the *dyssynergic* or conflicting bladder in which either the bladder wall contracts while the sphincter remains closed, or the bladder wall relaxes while the sphincter remains open causing dribbling or incontinence. While MS does not cause kidney problems, in men there is a risk of urine backing up into the kidney.

Bladder symptoms can often be managed with medication and other approaches. Generally the testing, diagnosis and treatment are handled by a urologist.

Small spastic bladder often treated with medication that slows the neurological messages that tell the bladder to empty. Other medications



lengthen the time between urination, decreasing frequency. In more complex cases alpha blocker medications can be prescribed to improve coordination and increase bladder control.

For night time incontinence another medication, desmopressin (DDAVP) can be prescribed. Botox injections into the bladder wall and the sphincter can reduce muscle tone and allow the urine to be retained. This treatment needs to be repeated every three months and is administered by a urologist with experience in this area.

Physical therapists have developed exercises and biofeedback, to reduce the use of medications to treat an overactive bladder. A more complex treatment, a bladder massage, *the Crede technique* can only be used with bladders that fail to empty. This technique needs to be used with caution because of the

risk of urine backing up into the kidneys.

Other bladder-management strategies are more invasive and pose a greater risk of infection. Intermittent self catheterization is a process in which a small catheter is inserted through the urethra into the bladder to allow the urine to drain out of the bladder. This is a process a person can do themselves if they have the hand coordination and finger sensitivity to manage the process.

Two other surgical procedures create openings in the abdomen through which to empty the bladder. One procedure allows for *intermittent catheterizations* and the other has an external bag into which urine drains. A third catheter, an indwelling Foley does not require surgery but allows urine to flow into an external bag. Regular and proper cleaning and changing of all catheter are vital to prevent infections. Men can use a condom-type catheter but there is a risk of damage to the skin of the penis.

Complications can develop with all bladder problems. The greatest concern is infection. Generally urinary tract infections are treated with 7-10 days dosages of

antibiotics. The growth of bacteria can be prevented or slowed in a variety of ways such as frequent and complete urination. Women should avoid wearing synthetic underwear and be careful to wipe from front to back, especially after a bowel movement and urinate before and after intercourse. Eight ounces of water a day are recommended to keep the bladder flushed and 1000 mg of Vitamin C daily can prevent the growth of bacteria and in some cases low doses of antibiotics can be prescribed.

Other bladder problems such as bladder spasms which can cause total emptying of the bladder can be managed with the same medications used to treat other muscle spasms. In recent years a variety of incontinence pads and devices have become available for adults with incontinence. Care should be taken to assure proper fit to prevent skin irritation and to prevent offensive odor. Once soiled, it is important to change the pad to prevent infection. Plastic-backed, absorbent flat pads are also available to place on a chair or bed to prevent damage to the material, prevent odors and simplify clean-up when needed.

Source: Schapiro, R.T.; *Managing the Symptoms of Multiple Sclerosis*; 2007

With an Attitude of Gratitude

Several years ago I was visiting a woman whose body was slowly but steadily shutting down due to the progression of MS and its complications.

Her body may have been weak but her spirit was strong. She told me each day her last thoughts are the five things for which she was grateful that day. What a powerful testimony to the capacity of the human spirit.

In my many years of working with people facing great obstacles I have had the privilege of working with people who embody awe inspiring qualities, and this woman was just one example.

So I challenge myself, and I challenge you to take the time each day to look for those experiences, relationships or belief systems that help us remember even in the clamor of everyday life, there are AT LEAST five things for which to be grateful.

Try it for a week, and I'll wager you'll see a change in the world because there is a change in you. Your human spirit has triumphed, once again.

~Diane

Thank You Supporters

Contributions are vital to the continuation of services provided by MS Services. Thank you to the following for their financial support.

- Aplington-Parkersburg Community School
- Ms. Abbey Akin
- Ms. Sandra Y. Baker
- Mr. and Mrs. Kenneth W. Cook
- Mr. and Mrs. Russell DeBower
- Ms. Kathleen M. Harper
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- Ms. Doris M. Messer
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- Bradley D. Morris



- Jack G. Stabenow
- Barbara M. Wagner
- Dave Welter
- Debra L. Yankey
- * 2 Anonymous



MS Support Group & Events Schedule

MAY

Thurs. - May 6	1:30 pm	Buchanan	St. John's Catholic Church Rectory	209 5th Ave. NE, Independence
Wed. - May 12	10:30 am	Bremer/Butler	Redeemer Lutheran Church	2001 West Bremer, Waverly
Wed. - May 19	11:00 am	Waterloo	EPI Office	760 Ansborough Ave., Waterloo
Wed. - May 26	9:30 am	Tama	Senior Center - Community Building	103 S. Church St., Toledo

JULY

Wed. - July 14	10:30 am	Bremer/Butler	Redeemer Lutheran Church	2001 West Bremer, Waverly
Wed. - July 21	11:00 am	Waterloo	EPI Office	760 Ansborough Ave., Waterloo
Wed. - July 28	9:30 am	Tama	Senior Center - Community Building	103 S. Church St., Toledo

Multiple Sclerosis Services assists and supports people who have Multiple Sclerosis and those who care about them adjust to life with a chronic illness by providing emotional support, current information and connection to needed community services.



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Multiple Sclerosis Services

Multiple Sclerosis Services, founded in 1980 in Waterloo, Iowa, as Area VII MS Service League, was a non-profit organization created to provide services and information to address the day-to-day impact of Multiple Sclerosis (MS) on individuals and families.

Today's MS Services is a program of Exceptional Persons, Inc and continues to serve families coping with MS by supplying emotional support, current information, and connection to needed community services. MS Services is governed by a volunteer Advisory Committee made up of people who have MS, their family members and community representatives.

MS Services is funded by area United Way agencies, the South Tama United Fund a part of the Northeast Iowa Community Foundation, and private contributions. Funds are used to provide agency services. The annual audit is available for public review.

MS Services impacts over 400 families in Waterloo/Cedar Falls and the surrounding seven county areas. MS Services is not affiliated with, nor supported by, the National Multiple Sclerosis Society.



Exceptional Persons, Inc.

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