

## A Case of Multiple Sclerosis with Prolonged Illness Behavior

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### ABSTRACT

Multiple Sclerosis is the most common cause of chronic neurological disorder in young adults. This disorder is more common in female population. The disease may be difficult to diagnose early in the course and the physical symptoms are sometimes misinterpreted as psychiatric. Two third of the patients will experience psychological symptoms at some stages. Depression is usually seen in 50% of the patients while euphoria, emotional liability & fatigue also seen in MS patients.

Here we report a case of 32 years old married lady, with a known case of MS for last 5 years was referred by neurologist & by family members for her psychological issues & for rehabilitation. During her admission are major focus was to improve patient motivation to work independently & to take care of her personal hygiene & to change her mal-adaptive behaviour of sick role & illness behaviour. Whole team of mental health including psychiatrist, psychologist, occupational therapist & social worker worked on patient betterment but we were not very much successful in improving her prolonged illness behaviour.

### Introduction

Multiple Sclerosis is a potentially disabling disease of brain & spinal cord. It is an autoimmune disease with unknown aetiology.

It is a neurological condition which effects around 100,000 people in UK [1]. Symptoms often starts between ages 20-40 & most people with MS have attacks (relapses) when condition gets worse & in some it continues to get worse over time [2]. There is no cure for MS right now but treatment available can improve patient symptoms & keep them to work on [2]. Therefore illness behaviour & sick role are two terms which are much used in discussions of adjustment to illness & handicap [3].

Illness behaviour is adaptive in early stage of illness but maladaptive if persist into stage of convalescence [4].

When person is ill, sick role is adaptive but if people continues sick role after illness is over then recovery is delayed as person avoids responsibilities & depend on others [5].

Thus the purpose of this paper is to present that prolonged illness behaviour with sick role in chronic illness like, Multiple sclerosis can worsen chances of recovery in patients in long term.

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## Case Report

Here we report a case of 32 years old married lady having 3 daughters, known case of MS for last 5 years was referred by neurologist & by family members for psychiatric issues & for rehabilitation. Patient was on wheel chair with limited walking, walk only with support. On MSE she was unkempt, looking sad & had no disturbance in thought, perception & cognition. Had no suicidal ideas & had no awareness about her maladaptive behaviour.

She was admitted in our hospital for about 2 months where we focused on her basic hygiene, daily routine tasks & to make her independent & improve her maladaptive behaviour. Therefore she was put on antidepressant together with neurology medicines. Counselling, motivational interviewing daily done by psychologist with graded activities.

Physiotherapy by physiotherapist & rehabilitate by nurses & occupational therapist. Was daily assessed by Mental health team.

During her stay family psychoeducation & counselling was also done to improve family dynamics which was also disturbed due to patient behaviour & illness. As patient was very social & performing all her household chores appropriately before the illness, therefore expectations were too high by family.

To increase patient motivation, she was involved in every extra circular activity of the hospital, but not much improvement seen in her maladaptive behaviour.

Therefore patient was discharged with daily plan to follow at home & continue her treatment. Few days after discharge she did not follow the daily routine plan & again dependent on family for her daily routine works.

## Discussion

In this case though patient had chronic illness but due to her maladaptive behaviour i.e., illness behaviour her recovery was delayed & she avoids her responsibilities as a wife, mother & as a daughter in-law.

There are some cases worldwide that also report about illness behaviour in illness like Chronic fatigue syndrome & Multiple sclerosis. Treatment of MS with illness behaviour is challenging & difficult in long term.

Though we had some limitation as we have only one case of MS, if we have more cases then we can have group therapy of same case with different patient & it might create sense of well being in the patient after hearing suffering of other patient. We try are level best to maintain a good liaison b/w mental health team & neurologist in managing her maladaptive behaviour & illness.

## Conclusion

MS with prolonged illness behaviour can worsen & lessen the chances of recovery in long term. Due to persistence maladaptive behaviour patient usually dependent on family for all daily routine works. This dependency increase workload & disturb relationship of family especially spouse. And give impression to all that pt is useless & huge amount of resources spend on their treatment. Therefore there is a need to assess illness behaviour & sick role in all patients suffering from Multiple sclerosis, as to discourage maladaptive behaviour & motivate patient to adapt healthy behaviour & work independently after illness is over.

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