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MULTIPLE SCLEROSIS AND POSSIBLE WAYS OF IT'S TREATMENT
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Relevance. Multiple sclerosis (MS) is an unpredictable autoimmune disease of CNS in which patient's own immune system affects myelin sheath of neurons. This may be due to unknown environmental triggers. Successes in studying of multiple sclerosis pathogenesis predetermined the emergence of therapy that slows of the disease progression. However, the mechanisms of development and progression of neurological symptoms in MS patients remain unclear. It hampers the development of methods for restoring of lost functions.

The study of neurological symptoms in patients with multiple sclerosis can help to identify the mechanisms underlying the progression of the disease and the development of severe disability.

The goal: to study neurological status of the patients with different types of multiple sclerosis.

Materials and Methods. 60 case histories of patients with multiple sclerosis (35 women and 25 men) aged 18 to 67 years were examined in the Department of Neurology of the 9th Clinical Hospital in Minsk. The investigation of the neurological status of the patients included the study of medical documentation to establish the type of multiple sclerosis, as well as the symptoms of the main functional systems disorders (optic nerve damage, cranial nerve damage, pyramidal pathology symptoms, sensory disorders and cardiac dysfunction).

Results and discussions. Researches showed that the most common type of MS among the patients was relapsing-remitting - 30 cases (50%). Secondary progressive type was revealed in 28 patients (46,6 %). As for primary progressive type and progressive remitting types of MS each of these types were revealed in 1 patient (1,6%) respectively.

For relapsing-remitting of MS the next symptoms are characteristic: 1) clearly defined relapses or flare-ups that result in episodes of intensive worsening of your neurologic function; 2) partial or complete remissions or recovery periods after the relapses and between attacks when the disease stops progressing; 3) mild to severe symptoms, and relapses and remissions that last for days or months. Secondary progressive type may involve a period of relapsing-remitting activity, with symptom flare-ups followed by recovery periods. Primary progressive type progresses slowly yet steadily from the time of its onset. Symptoms stay at the same level of intensity without decreasing, and there are no remission periods. Patients with primary-progressive MS experience a fairly continuous worsening of their condition. Progressive remitting type is relatively rare form of MS, people experience their condition as steadily worsening, yet also experience clear relapses in the form of acute flare-ups. In some cases, there is no recovery from these flare-ups, although in other cases there is recovery. The difference between progressive-relapsing MS and relapsing-remitting MS is that in the former type, the periods between relapses involve continuing progression of the disease.

The investigation of the neurological status of the patients showed that the most of patients suffer from pathology of vision (nystagmus in both eyes), pathology of pyramidal system (Babinski Syndrome in both sides), pathology of nerve system (different types of paresis) and cardiovascular diseases. Sensation disorders was seen in only 7 (11,6%) patients. These symptoms are more common in women than men.

Conclusion. 1. the most common type of MS is relapsing-remitting. 2. neurological state of patients is characterized by pathology of vision, nerve system and cardiovascular pathology. 3. the severity of these symptoms is more pronounced in women than in men.