

Hot Topic 9: Science & art of symptomatic treatment

Grand perspective on tackling motor impairment

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Motor impairment is not just about mobility, it incorporates involvement of pyramidal, extra-pyramidal and cerebellar tracts resulting to problems with strength, tone, balance, and results in difficulties with walking, sitting, transferring and upper limb function. In a condition such as multiple Sclerosis (MS), which can result in a broad range of impairments, motor dysfunction can also be aggravated by other symptoms such as cognitive impairment, mood and fatigue. Taken together this has a direct impact on a wide range of functions and activities including an increased risk of falling, activities of daily living and employment. [Grand perspective on tackling motor impairment](#)

While self-management and expert physiotherapy input are the cornerstones the management of motor impairment, there are many other treatment options addressing weakness, spasticity and ataxia. There is now a sound evidence base to support the use of slow-release fampridine to improve muscle strength and a range of interventions for spasticity with a clearer sense of the role of cannabinoids and promising studies of the role of synaptic plasticity. Targeting upper limb function, particularly in the more disabled patient, has recently become a focus of activity with the incorporation of robotics and neurophysiological interventions. As with all symptoms of MS, motor impairment requires on-going, expert input to minimise its impact on the individual.

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