

DID YOU KNOW?

March is MSA Month

February 28 is Rare Disease Day

May is our Fundraiser Month

Visit Our Sister MSA Awareness
Charity, the MSA Shoe:



www.MSAshoe.org

For MORE INFO on MSA, visit:

National Institutes of Health (NIH):
<https://www.ninds.nih.gov/Disorders/>

Autonomic Diseases Consortium (part of
Rare Disease Clinical Research Network):
<https://www.rarediseasesnetwork.org/cms/autonomic>

National Organization of Rare Diseases
(NORD):
<https://rarediseases.org/rare-diseases/multiple-sys-tem-atrophy/>

What is Multiple System Atrophy?

Multiple System Atrophy, or MSA, is a rare, degenerative neurological condition that affects both men and women, usually starting in the 50's or 60's. MSA is likened to Parkinson's Disease but its impact on one's physical health is more profound.

How Does MSA Affect the Body?

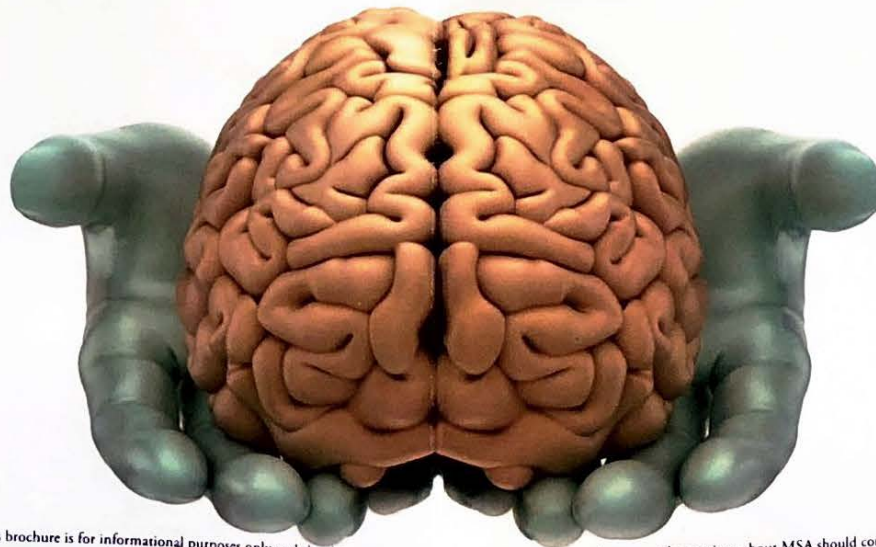
MSA impairs the body systems that regulate blood pressure, heart rate and the bladder – many of the basic bodily functions that people take for granted every day. People with MSA suffer from low blood pressure, speech and swallowing difficulties, sleep disturbances, breathing problems, rigidity and tremors.

Alike, But Not Alike

MSA is often confused with Parkinson's Disease. Both MSA and Parkinson's (PD) exhibit many of the same features. Like PD, MSA is associated with an accumulation of the alpha-synuclein protein in the brain. Both disorders exhibit motor and autonomic symptoms, and in particular these two diseases affect the cells that produce dopamine. In MSA, the effect on motor and autonomic functions are more intense.

What is the prognosis for someone with MSA?

Tragically, the life expectancy for those diagnosed with MSA is typically only 5-10 years. There is no remission of the disease. Almost 80% of patients are disabled within five years of the onset of the motor symptoms, and less than 20% of the cases survive beyond 10 years. However, the rate of progression and the speed of decline varies widely from case to case.



This brochure is for informational purposes only and should not be used for medical diagnosis or treatment. Anyone with questions about MSA should consult

GOALS OF DEFEAT MSA

- To build a community that truly serves those that suffer from MSA.
- To cultivate promising research into treatments that will slow MSA.
- To promote better education among physicians who treat MSA.
- To raise greater public awareness about living with MSA.

Diagnosis

At present, there are no labs or imaging studies to definitively diagnose or detect MSA. Doctors, usually movement neurologists, utilize a combination of symptoms to reach a probable conclusion.

The MSA diagnosis results from a number of factors that contribute to the overall clinical picture, such as balance, coordination, blood pressure, temperature, heart rate, digestion and a number of other symptoms.

Please help us help all those who suffer so much from Multiple System Atrophy! United together, we can and will defeat MSA forever!

www.DefeatMSA.org

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1 (855) KICK-MSA
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Dysautonomia

MSA is characterized as both a movement and an autonomic neurological disorder. The most suitable specialist to diagnose it is a movement disorder neurologist. In addition to what has already been mentioned here, people with MSA may experience a loss of bladder or bowel control, abnormal sweating, sexual impotence in men, sleep apnea and REM Behavior Disorder (RBD), which involves movements during sleep, that may seem as if the person is "acting out" their dreams. In fact, some researchers have suggested that RBD may possibly provide an early indication of an eventual MSA diagnosis.

Types of Treatment

Since MSA's main features involve symptoms on "multiple" levels, the known treatments are usually the same treatments used for similar diseases, such as PD. Since MSA is characterized as both autonomic and movement related, physicians in those fields would be the most appropriate specialists. Drugs such as those to treat muscle rigidity, slowness and tremor may also help someone with MSA. Blood pressure enhancing meds, increasing salt in one's diet, changing one's position during sleep or the use of a CPAP or BiPAP for sleep apnea may help as well. Some researchers have also speculated that different forms of physical therapy and increased exercise may act as neuroprotectors, thereby slowing the disease.

Reason for Hope

There is currently no cure for MSA. However, there are medications and therapies that can alleviate some of the more disabling effects, thus, greatly assisting in maintaining or improving the quality of one's life. In recent years, new research has given us hope that we will soon, "turn the corner" in our quest to find reliable biomarkers, more definitive ways to diagnose MSA and distinguish it from similar diseases, such as Parkinson's, Lewy Body Dementia and Pure Autonomic Failure (PAF).

Great strides have also been made in developing new medications that will help treat, and possibly slow the disease. Although, some people suffering with MSA succumb after 10 years, other patients do not. Some MSA patients have been known to live up to 20 years, after their initial diagnosis. As research into the origins of the disease continue, there is increased confidence among researchers and advocates today that very soon, we will discover new therapies to treat and slow the disease. We believe that a cure to this devastating neurological disease is on the horizon. Please help us on this great quest!

Is It All in Your Head?

On Multiple System Atrophy



Take the first step toward a diagnosis...

www.DefeatMSA.org

support@defeatmsa.org

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1 (855) 542-5672

Looking for an
on-site Support Group?

Email us and we will send you a comprehensive
list for groups in US and Canada:
support@defeatmsa.org

Defeat MSA is the founding sponsor of the Global Online Support Hub (GOSH), the world's first website and IOS application of video chat groups, dedicated to supporting MSA patients everywhere!

Learn about GOSH and download the app for free at: www.BrainSupportHub.org