Relapsing-Remitting Multiple Sclerosis

What is relapsing-remitting multiple sclerosis?
In 1999, an international panel published a classification of multiple sclerosis (MS) that defined different forms of MS. One of these, the most common form, was relapsing-remitting MS (or RRMS).

Relapsing-remitting MS is defined as MS in which patients have relapses of MS and periods of stability in between relapses. Relapses are episodes of new or worsening symptoms not caused by fever or infection and that last more than 48 hours. In other words, a stable course is punctuated by episodes of new or worse symptoms.

Relapsing-remitting MS is the most common initial form of MS. Younger patients are more likely to have this form of MS than older patients.

What are the symptoms of relapsing-remitting multiple sclerosis?
The symptoms of RRMS vary widely. Frequent early symptoms include:

- episodes of visual loss in one or the other eye
- tingling or numbness
- double vision, fatigue
- urinary urgency
- balance problems
- weakness

No two patients have the same symptoms. Some people are sensitive to heat. Some people get a tingling feeling when they bend their neck forward (Lhermitte’s symptom). Some patients will have problems with weakness or unsteadiness of walking. Some combination of symptoms is common, and symptoms may vary over time in an individual.

How do I know I have this form of multiple sclerosis?
As long as you have had two or more attacks of MS, and are otherwise stable, you have relapsing-remitting MS. There is no specific test for this, and the MRI scan or spinal fluid test does not tell this form of MS apart from any other form.

How is relapsing-remitting multiple sclerosis treated?
In general, all of the standard disease-modifying agents for MS have been tested in patients with relapsing-remitting MS. All of these medications reduce the number of relapses, reduce MRI activity, and may reduce disability.

Each one is an injection medication, and they all work to a similar degree. They differ in their
side effect profiles and in how often and the way in which they are given. Administration of these medications ranges from once weekly to daily, either under the skin or in the muscle.

**What is the prognosis for relapsing-remitting multiple sclerosis?**
The prognosis varies widely for RRMS. Some patients rarely have attacks and go years without having new clinical problems. Others have frequent attacks and require extensive medication treatment.

There is no predictable pattern for RRMS. There is no test that predicts specifically what will happen in RRMS. Prognosis for all forms of MS tends to be much better than people suspect.