



Multiple Sclerosis and Nutrition

The Internet is full of information about diet, nutrition and multiple sclerosis. A variety of fad diets such as the Swank diet, the 'no red meat, no pork diet', and others are only a Google™ search away. **So what should you believe?**

While there have been some studies of dietary supplements in the management of multiple sclerosis (MS), none of these studies have shown definitively that supplements or diet alter the course of MS. Small controlled trials using linoleic acid suggested that this supplement may have some benefit. However, larger studies to confirm this effect haven't been done.

Studies looking at polyunsaturated fatty acids have not shown a specific benefit in MS. Studies of dietary manipulation are difficult because many patients drop out of the study, biasing the results. In addition, patients cannot really be 'blinded' to diet. Blinding in a research study means that neither the patient nor the investigators know what the patient is taking during the study.

A well-designed systematic review of diet studies in MS was published in 2007 as a Cochrane abstract. This review showed that there was too little information to make specific recommendations about any diet or supplement for patients with MS. The authors reviewed the entire world literature on diet and MS and analyzed the type and quality of the studies done. This remains to this day the definitive statement about diet in MS.

Anecdotally, some patients find that they do not feel well if they eat a fatty meal or a big steak. Even if this doesn't affect 'MS disease', it probably is a good idea to listen to how your body responds to different foods and activities. If you find you don't tolerate a certain food, then you might consider changing that dietary habit next time.

Again, there are no rigid guidelines in terms of specific supplements. A variety of supplements are touted from time to time without any definite evidence to support their use. Vitamin D is the latest in a long line of vitamins that have been looked at in MS. There does seem to be some evidence that a low vitamin D level makes MS more likely, according to large population studies. In addition, animal models of MS show improvement with vitamin D supplementation.

Vitamin D levels are often low in northern populations, which are the same populations that are more likely to have MS. What's more, low vitamin D levels are probably not good for bone health. So while the jury is still out, we recommend vitamin D supplements primarily for their benefit on bone health. The dose is also unclear. We tend to recommend 1000 units per day, but there is essentially no data to support this other than studies that showed that vitamin D

doses over 700 units per day helped to prevent bone injury in post menopausal women.

The bottom line is that a healthy diet is probably good for everyone, people with MS included. A diet that is low in red meat, rich in vegetables, salads and fruits, and with perhaps a Mediterranean focus, is probably good for all of us. And this may include even a glass of red wine from time to time, in moderation!

References:

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