

### Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/neurofrontiers/the-burden-of-cognitive-dysfunction-in-multiple-sclerosis/54238/>

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### The Burden of Cognitive Dysfunction in Multiple Sclerosis

#### Announcer:

This is *Neurofrontiers* on ReachMD. Today, we'll hear from Dr. Christopher Lock, who's a Clinical Associate Professor of Neurology at Stanford University in Palo Alto California and Clinical Trials Director of the Stanford Multiple Sclerosis and Neuroimmunology Program. He'll be discussing cognitive changes in patients with multiple sclerosis.

Here's Dr. Lock now.

#### Dr. Lock:

How often does MS affect cognition? It's fairly frequent. There's quite a wide range in estimates. I've seen 30 to up to 60 percent in some studies. And MS is really a very broad spectrum and can affect everyone differently. Some people have quite a lot of motor symptoms. Other people, they experience the less visible symptoms, like difficulty with cognition and fatigue. And why that is, I think, is not really understood. Also, there's a disconnection between what we see on an MRI and what we see clinically. Sometimes people can have quite a lot of change on their MRI and very little to find on exam.

Unfortunately, a fair number of people tell us in clinic that they experience some cognitive difficulty, and that can affect their studies or their work. And we don't always routinely test cognitive function in clinic, because it can take a little while to do that. So if somebody mentions that to me and it's a significant concern, I usually refer them to one of our neuropsychologists for a formal assessment. And that can be very helpful to see if there are some areas where they're having difficulty and figure out ways to work around that and strategies to compensate.

At the present time, there aren't any medications that have been shown to directly help cognitive function, except for being on an effective disease-modifying therapy that's been shown to protect the brain over the long term. But other than that, there aren't any medications to specifically help cognition. Fatigue can be a factor. So, if that seems to be a component, putting somebody on a medication to help fatigue can be useful.

I think the things that get affected are processing speed, retaining new information, and executive function. Those kind of areas are some of the more common ones where people can experience difficulty. So I think it's good to do testing. If it's something that's affecting somebody's studies, we can write letters to request, say, more time for taking exams and accommodation. That way, if it's something that's affecting somebody's work, we can also advocate for them and request some modification of their work. We don't have to disclose a diagnosis. But we can ask for accommodation.

#### Announcer:

That was Dr. Christopher Lock talking about how multiple sclerosis can affect cognition. To access this and other episodes in our series, visit *Neurofrontiers* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!