

A RESOURCE FOR  
HEALTHCARE PROFESSIONALS

# EMOTIONAL DISORDERS IN MULTIPLE SCLEROSIS

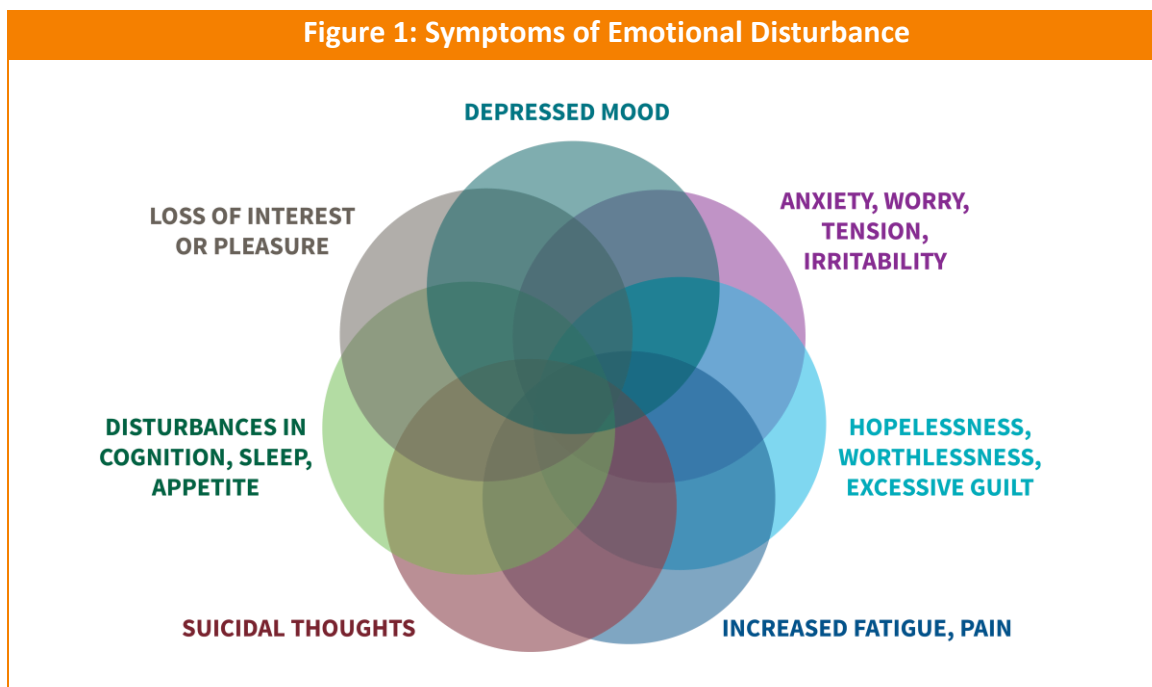
Jagriti 'Jackie' Bhattarai, PhD  
Sarah Minden, MD  
Aaron Turner, PhD, ABPP-RP  
Rosalind Kalb, PhD



**National  
Multiple Sclerosis  
Society**

## Emotional Disorders in MS

- **Depression** is the most common mental health diagnosis in MS, with a lifetime risk for major depressive disorder of 50–60%.
- **Anxiety** frequently occurs with depression. Compared to the general population, anxiety is three times more common in MS.
- **Suicidal ideation** is about three times as common in MS compared to the general population.
- **Adjustment disorder** and **bipolar disorder** are also more common in MS.
- **Pseudobulbar affect (PBA)**, involuntary laughing and/or crying often without consistent feelings, affects more than 10% of people with MS.



## Reasons to Assess for Emotional Disorders

- Depression is a primary predictor of quality of life in MS, second to physical disability.
- Emotional diagnoses often occur with other MS symptoms (e.g., fatigue, disturbed sleep, cognitive problems).
- Emotional diagnoses are underrecognized and undertreated in MS, yet they can be disabling and fatal.

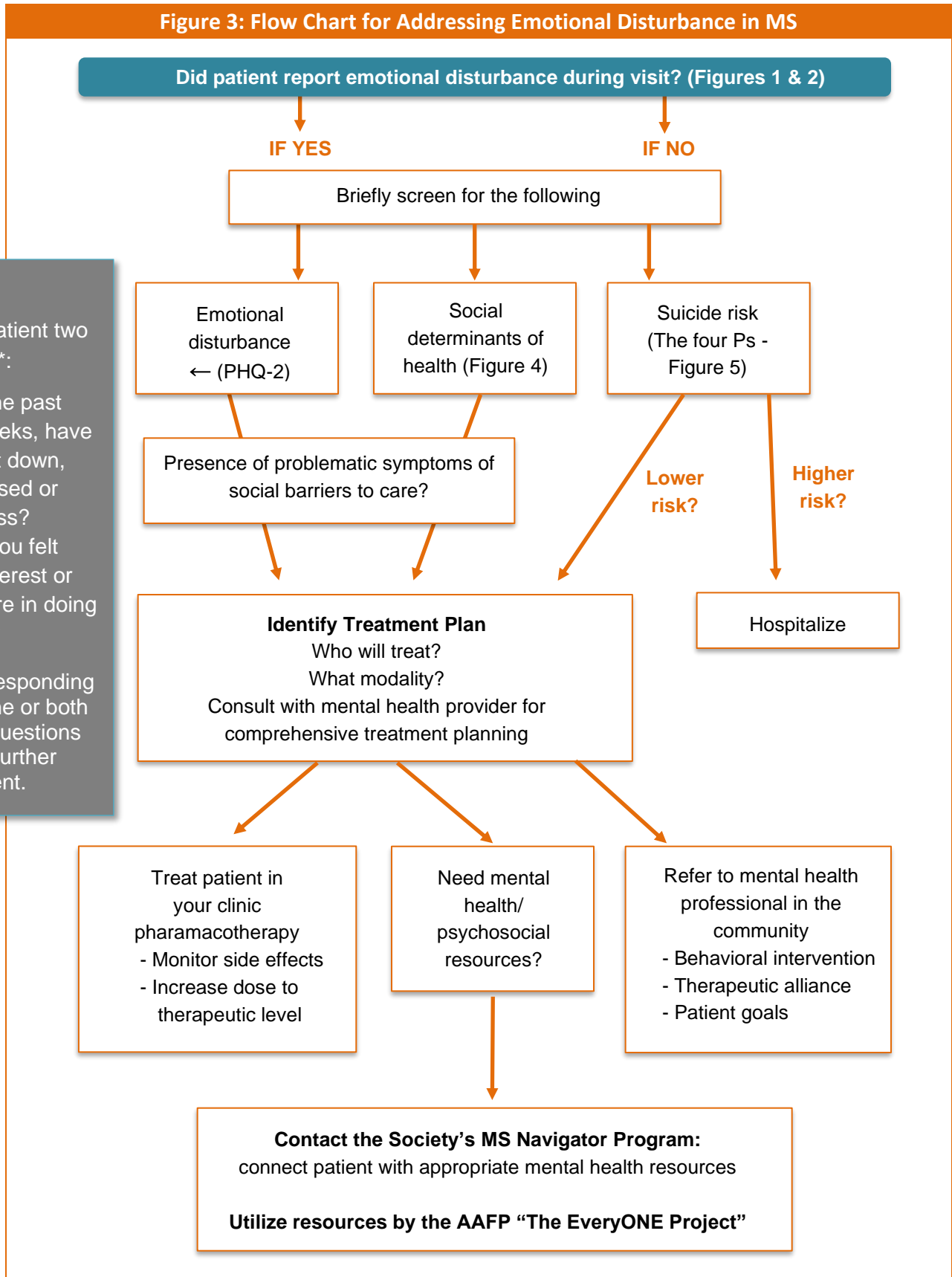
Figure 2: Example Patient Statements of Emotional Disturbance	
“I feel worthless. I just don’t know if I can keep going.”	“I don’t even know who I am at this point.”
“Nothing interests me, not even getting better — that’s why I stopped taking my medication.”	“I jump down people’s throats for no good reason.”
“My partner is so moody — one moment he’s ok and the next he’s losing his temper and yelling.”	“My partner seems so sad and has been drinking a lot. She has even isolated herself from her friends.”
“If I think about a wheelchair, I get this awful feeling in the pit of my stomach.”	“I know life can change in a second. The minute I start to have a funny feeling somewhere I panic.”

### Recommendations

- Assess for symptoms of emotional disturbance at each visit (Figure 1) and recognize verbal indicators (Figure 2).
- Utilize brief screeners to assess for emotional disturbances (Table 1). If pressed for time, use the PHQ-2 to assess for depressive symptoms (Figure 3).

Table 1: Screeners for Emotional Disturbance in MS			
Symptom/DX	Measure	Cut-score	Source
<b>Depression</b> (major depressive disorder; adjustment disorder; dysthymia; bipolar affective disorder)	Patient Health Questionnaire-9 or PHQ-2	≥ 10 ≥ 1x “Yes”	<a href="http://phqscreeners.com/select-screener">phqscreeners.com/select-screener</a>
	Beck Depression Inventory-Fast Screen (BDI-FS)	≥ 4	<a href="http://pearsonassessments.com/">pearsonassessments.com/</a>
	Center for Epidemiologic Studies Depression Scale (CES-D)	≥ 10	<a href="http://cesd-r.com">cesd-r.com</a>
<b>Anxiety</b> (generalized anxiety disorder; adjustment disorder)	Generalized Anxiety Scale-7 or GAD-2	≥ 7 ≥ 2	<a href="http://phqscreeners.com/select-screener">phqscreeners.com/select-screener</a>
	Beck Anxiety Inventory (BAI)	≥ 10	<a href="http://pearsonassessments.com/">pearsonassessments.com/</a>
	HADS-Anxiety	≥ 8	<a href="http://gl-assessment.co.uk">gl-assessment.co.uk</a>
<b>Pseudobulbar Affect (PBA)</b>	Center for Neurologic Study – Lability Scale	≥ 13-17	<b>Moore et al. (1997)</b>

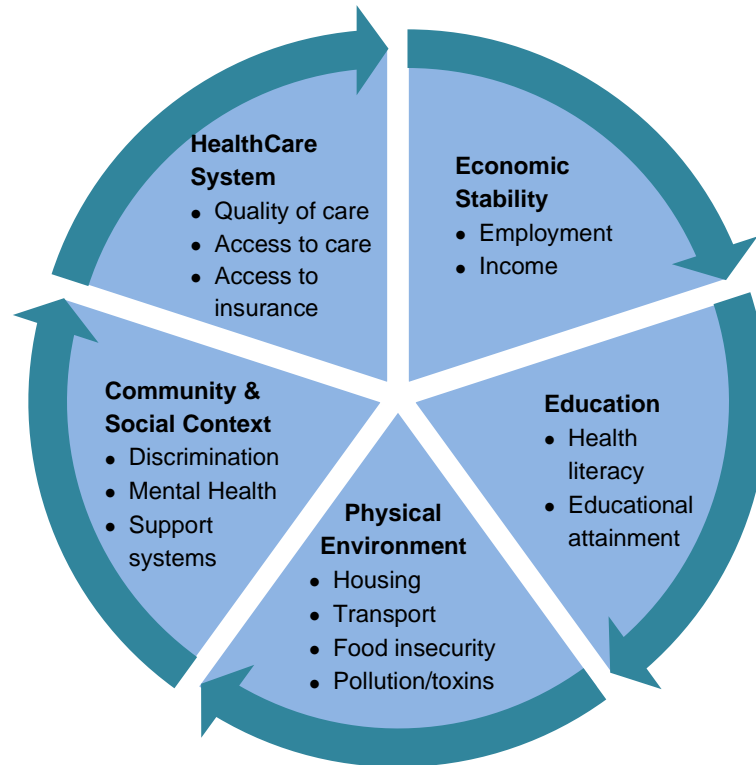
**Figure 3: Flow Chart for Addressing Emotional Disturbance in MS**



**PHQ-2**  
 Ask the patient two questions\*:  
 1. Over the past two weeks, have you felt down, depressed or hopeless?  
 2. Have you felt little interest or pleasure in doing things?  
 \*Patient responding YES to one or both of these questions warrants further assessment.

- Recognize other MS symptoms that may contribute to mental health.
- Consider how the patient’s social determinants of health (SDOH) impact their mental healthcare (Figure 4).

**Figure 4: Social Determinants of Health (SDOH)**



The American Academy of Family Physicians ([aafp.org](http://aafp.org)) provides screening tools that can be completed in the waiting room or during the visit with the provider. It is always important to follow up on patient-reported social barriers to care, and The EveryONE Project provides resources for this purpose. Incorporation of emotional symptoms is important when screening for SDOH.

- Decide to treat the patient’s mental health needs in your clinic or refer out. Patients report higher quality of care and positive effect on symptoms when care is provided by a mental health professional.
- Consider the following if medical provider is treating:
  - Severity of the emotional disturbance
  - Evidence of optimal treatment
  - Patient willingness to engage in different intervention modalities (e.g., medications vs psychotherapy)
- Assess for suicidality, which is not always detectable via depression screening (Figure 5).

Figure 5: The Four Ps of Suicide Risk Assessment

<b>Are you having any thoughts of suicide, or harming yourself or others?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes (proceed to 4 Ps)
<b>1. Past Attempts:</b> Have you ever attempted to harm yourself before? <input type="checkbox"/> No <input type="checkbox"/> Yes
<b>2. Suicide Plans:</b> Have you thought about how you might actually hurt yourself? <input type="checkbox"/> No <input type="checkbox"/> Yes (How?)
<b>3. Probability of Suicide:</b> How likely do you think you are to act on your thoughts? <input type="checkbox"/> Not at all likely <input type="checkbox"/> Somewhat likely <input type="checkbox"/> Very likely
<b>4. Protective Factors:</b> Is there anything that would prevent you from harming yourself? <input type="checkbox"/> No <input type="checkbox"/> Yes (What?)
<b>RISK LEVEL</b> <ul style="list-style-type: none"><li>• Minimal risk = no items shaded</li><li>• Lower = at least 1 item shaded on items 1 &amp; 2; none shaded on items 3 &amp; 4</li><li>• Higher = at least 1 item shaded on items 3 &amp; 4</li></ul>

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## Resources

### National MS Society MS Navigator Program

Patients can connect to an MS Navigator for mental health resources and referrals to providers at [nationalMSSociety.org/MSnavigator](https://nationalMSSociety.org/MSnavigator) or 1-800-344-4867.

Visit [nationalMSSociety.org/FDR](https://nationalMSSociety.org/FDR) to search for mental health providers online.

### American Academy of Family Physicians (AAFP) - The EveryONE Project

The AAFP website provides resources to screen for and address problematic

SDOH: [aafp.org/family-physician/patient-care/the-everyone-project.html](https://aafp.org/family-physician/patient-care/the-everyone-project.html)

- **Social Needs Screening Tool:**  
[aafp.org/content/dam/AAFP/documents/patient\\_care/everyone\\_project/hops19-physician-form-sdoh.pdf](https://aafp.org/content/dam/AAFP/documents/patient_care/everyone_project/hops19-physician-form-sdoh.pdf)
- **Social Needs Patient Action Plan:**  
[aafp.org/dam/AAFP/documents/patient\\_care/everyone\\_project/action-plan.pdf](https://aafp.org/dam/AAFP/documents/patient_care/everyone_project/action-plan.pdf)