



Prescribing for Spasticity

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This content has been adapted from a workshop originally delivered at a Biogen meeting in 2019. Permission kindly provided by Julie Matthews RN, MSc Rehab Med, QN. Spasticity Consultant Nurse (Intrathecal Baclofen), Haywood Community Hospital, Stoke-on-Trent.

Learning objectives

At the end of this module you should:

- Be able to define spasticity
- Be familiar with the principles of managing spasticity in people with MS
- Be familiar with the mode of action of certain drugs used to treat spasticity in people with MS
- Be able to recognise the signs and symptoms of under- and over-dosing with intrathecal baclofen

Reflective questions

Before the module, please reflect on a recent patient with MS-related spasticity. How did you							
ascertain the effect of spasticity on the patient's daily life? Which strategies most improved the							
patient's function and comfort? Which strategies proved less effective?							

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	What are the three most important 'take-home messages' you learnt in the module? Will the						
nfluence your practice? If so, how? If not, why not?							
		overcome thes	nanges will you m se?	and. Do you o	rpoor to lace all		

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Further reading

Akgün K, Essner U, Seydel C et al Daily practice managing resistant multiple sclerosis spasticity with delta-9-tetrahydrocannabinol: Cannabidiol oromucosal spray: A systematic review of observational studies *Journal of Central Nervous System Disease* 2019;11: DOI: 10.1177/1179573519831997

Albright AL, Barron WB, Fasick MP, et al Continuous intrathecal baclofen infusion for spasticity of cerebral origin *JAMA* 1993;270:2475-77

Sammaraiee Y, Yardley M, Keenan L et al Intrathecal baclofen for multiple sclerosis related spasticity: A twenty-year experience *Multiple Sclerosis and Related Disorders* 2019;27:95-100

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