Monitorina **First symptoms Diagnosis Treatment**



Autonomic disorder, movement symptoms, sexual dysfunction and REM-sleep behaviour disorder



MSA with Parkinson (slowness. tremor) or MSA with Cerebellar (balance, speech).

88888



Only symptom treating (breathing, blood pressure control. incontinence, psychological support, palliative care).



Monitored by expert centres with multidisciplinary teams.



Please note that specific terms (e.g. home care services, general physician, physiotherapy) do not include the same services in all EU countries and might differ from country to country.

Oxygen

Magnetic Resonance Imaging

Multiple System Atrophy

Parkinson's Disease

Rapid Eye Movement

Patient advocacy groups can often provide support and resources for patients and families.

Disclaimer

MRI

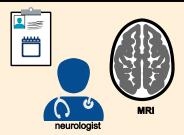
MSA

O₂

PD

REM

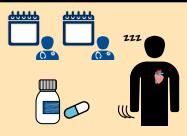
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Extensive neurological examination, blood pressure, genitourinary assessment, brain MRI).



MSA can mimic other conditions such as PD and ataxia. It can take time to diagnose MSA.



Identify symptoms, initiate regular treatment and referrals.



Identify and monitor progression of symptoms. Integration with appropriate services.



First symptoms can be general or non-specific and may not be recognized by clinicians.



Missed diagnosis: dangers of serious falls, respiratory symptoms, malnutrition, infections.



Need for research to find a cure.

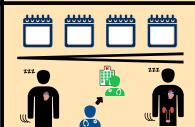


Holistic care includes home care aspects and emotional support for patients and carers.

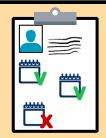




Observation for "red flags". Greater awareness on MSA, its symptoms, psychological and emotional needs of patients, physical therapy needed



Multi-disciplinary cooperation on developing new therapies and care pathways.



Person with MSA has a care plan that includes wishes for future care and interventions.



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