

Common Neurological Disorders

And conditions of the nervous system

Myasthenia Gravis-

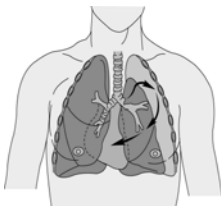
Autoimmune disease of peripheral nervous system



Onset usually insidious, rapid onset from infections, stress, pregnancy, or anesthesia have occurred.

- disease of neuromuscular junctions.
- 90% have ocular muscle disturbances, ie droopy eyelids, diplopia, weak eye closure
- Few develop rapidly leading to resp. failure
- Chronic disease which involves a decrease in acetylcholine receptors.
- 70 % of cases, thymus gland (lymphoid organ) is often abnormal, hyperplasia.
- 15% of cases thymoma, men predominate
- Peak age at onset is 20-30yrs of age
- Women 3X more than men before age 40.
- Later life incidence of MG equal in M/F

Treatment for MG



Thymus gland surrounds trachea, larger in children

- Drugs that affect the symptoms, anticholinesterase or cholinergic drugs.
- Drugs that induce remission, immunosuppressive drugs, corticosteroids.
- Plasmapheresis- antibodies removed from plasma, weekly/monthly as needed.
- Thymectomy- removal of thymus gland early in disease. Remission may take several yrs. If it occurs at all.

Nursing Care



- Pace activities, weakness ^ on exertion, improves with rest. Assist ADL's
- difficulty chewing/swallowing, soft diet
- Meds. Admin. 30-60 min. before meals
- Paresthesia (numbness) Fall risk
- Resp. difficulty, weakness of voice
- Muscle aches- pain management, ROM.
- Discourage talking before eating
- Difficulty raising arms overhead, sitting.
- Most advanced cases all muscles are weak, which can lead to resp. failure
- Check skin integrity.
- Eye protection- corneal abrasions- eye gtts eyes alternately covered with patch.

Lifestyle Changes



- Avoid sedatives, enemas, strong cathartics, alcohol, surgery.
- Avoid heat- sauna, hot tubs, sun
- Avoid crowds (infections) overeating, changes in sleep habits.
- Manage stress
- Most importantly- Pace all activities.

Gullian-Barre Sundrome - peripheral nervous system disease - Pathophysiology

- Immune system destroys myelin sheath.
- M/S affects CNS, GBS peripheral nervous system.
- Cause- unknown
- Incidence- .4-1.7 cases/100,000
- Women more susceptible
- Ages 30-50, **abrupt onset usually.**
- 50-60% higher in Caucasians than African/Americans.
- Relates history of acute illness, trauma, surgery, or immunization.

Multiple Sclerosis

- Chronic, progressive, degenerative disease affects myelin sheath of CNS. Cause unknown.
- Usually occurs in people between 20-40.
- Women affected slightly more than men.
- Seen more often in colder climates.
- Life expectancy about 85% of general population.
- Periods of remission and exacerbation.
- Six types of MS seen. Drugs to decrease spasticity.
- Symptoms that are different from GBS are: Nystagmus- involuntary rapid eye movements, intention tremors, stiffness of extremities, positive Babinski's (great toe dorsiflexes) instead of flexing, tinnitus, hearing loss, personality changes.
- Nursing Care remains much the same as MG, and GBS.
