



# How to Tell the Difference Between ALS and MS

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## ALS vs. MS

When it comes to ALS vs. MS, you should know they are different diseases with similar symptoms. ALS was discovered by a French doctor named Jean-Martin Charcot in 1869. You may know ALS as Lou Gehrig's disease, after the baseball player who was diagnosed with ALS in the 1930s.

The disease is progressive, which means that it gets worse over time, affecting nerve cells in the nervous system (brain and spinal cord), causing loss of muscle control. Motor neurons are affected, which alters how messages are sent through the spinal column, into the brain, then back into the muscles. The neurons send messages to your muscles telling them how to move. For example, walking, picking up items, breathing and swallowing.

ALS is a motor neuron disease and there are a few others:

- Primary lateral sclerosis (PLS).
- Progressive bulbar palsy (PBP).
- Pseudobulbar palsy.

## Differences and Similarities Between ALS and MS

### Differences

Here are the main differences between MS and ALS:

- ALS causes are unknown, but it can be hereditary in 1 out of 10 people due to a mutated protein, whereas MS is an autoimmune disease.
- MS has more mental impairment and ALS has more physical impairment.
- ALS is completely debilitating, leading to paralysis and death. Late-stage MS is rarely debilitating or fatal.
- MS is more common in women and ALS is more common in men.

### Similarities

MS and ALS have some similarities in symptoms too:

- Fatigue.
- Difficulty walking.
- Involuntary muscle spasms and muscle weakness.
- Slurred speech or difficulty swallowing, although this is less frequent for MS.
- At present, there is no known cure.

## MS Symptoms

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Symptoms in people with MS may include:

- Numbness and tingling in the body.
- Vision problems.
- Sexual dysfunction.
- Bowel problems.
- Depression.
- Mood swings.
- Fatigue, often when warming up to exercise.
- Slowed or fuzzy memory (cognitive problems).
- Mild problems walking.
- Periods with few symptoms followed by relapses.

## **ALS Symptoms**

Because ALS cannot send messages to your muscles, they start to break down, causing muscle atrophy. I have muscle atrophy in my calf muscles from back surgeries and immobility, and you start to notice the muscles losing their fullness. You may also see gaps appearing in and around muscle groups.

With ALS, these symptoms can worsen over time:

- Feeling stiff and weak.
- Muscle cramps and twitching in your arms, shoulders and tongue.
- Trouble undertaking simple movements, such as trying to insert a key into a door.
- Inappropriate crying, laughing or yawning.
- Cognitive and behavioral changes.
- Slurring words.
- Wobbling, stumbling and falling over.
- Inability to move your head, arms and legs.
- Trouble swallowing and breathing.

Eventually the disease progresses and the diaphragm, which controls your breathing, will not be able to breathe on its own without using a machine.

Most people die within three to four years after being diagnosed with ALS, while some people live between 10 to 20 years. Have you heard of the English theoretical physicist Steven Hawking? He had ALS for 55 years and died at 76 years old. It is possible to have a long life with ALS.

## **Is It ALS or MS?**

Some types of MS are characterized by a gradual decline, while others are characterized by periods of improvement and relapses. ALS is characterized by a steady decline and worsening symptoms.

## **How is ALS Diagnosed?**

The first step is to visit your doctor. A physical examination will be done, and you will undergo tests to check for a multitude of conditions. If your doctor suspects ALS, they will send you for further examination and testing with a specialist.

According to MedicineNet, you may have an electromyogram (EMG), a spinal tap, MRI and other tests in order to rule out other diseases, such as MS. ALS is only diagnosed after other diseases/conditions are ruled out first.

## **What Treatments Are Available for ALS?**

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Unfortunately, there is no treatment that will eradicate the disease, but there are treatments available to possibly slow down the progression.

## 1. Medical Treatment

According to MDA.org, there are a number of drugs used in ALS treatment:

- Rilutek (Riluzole), which is also available in liquid form (Tiglutek), is for those who have trouble swallowing. Exservan, an oral formulation of Riluzole, dissolves on the tongue and is used to delay the onset of having to use a ventilator.
- Nuedexta is for treatment of pseudobulbar affect (PBA), suppression of emotional lability, which causes inappropriate emotional expressions, often characterized by uncontrollable laughing or crying.
- Radicava is an intravenous therapy for adults which helps to keep motor neurons healthy, helping to preserve muscle function.

## 2. Therapies

- **Breathing support:** devices to assist breathing at night.
- **Physical therapy:** learning exercises to assist with pain, walking, mobility, use of bracing and other equipment to help stay independent.
- **Occupational therapy:** utilizing ways to remain independent despite hand and arm weakness. Providing adaptive equipment can help you perform activities, such as dressing, grooming, eating and bathing.
- **Speech therapy:** learning techniques to make speech more understandable. Trying out different equipment, such as tablets or computers with text-to-speech applications, or computer-based equipment with synthesized speech.
- **Nutritional support:** looking at different foods that are easier to swallow, ensuring nutritional needs are met.
- **Psychological and social support:** getting help with financial issues, such as insurance, getting equipment and paying equipment, while also providing emotional support for the ALS patient and their families.

## Future Treatments

There are research trials taking place with ALS, such as stem cell treatment. You can sign up to newsletters to be kept informed. It might be worth talking to your doctor to ask about suitability to get involved.

## ALS Support

I find that social media has a fantastic array of support groups for patients and families, such as Facebook. Many organization websites also have links to online support groups, which means you do not have to worry about traveling to meet others if you are struggling to do this. I recommend reviewing the ALS Association. This website caters specifically for people with ALS and their families.