

Visual problems are often the first symptoms associated with multiple sclerosis (MS). More than half of people with MS will experience at least one issue with vision. Identifying this and seeking early treatment is key. With the right information and support, vision issues can be managed effectively to maintain a healthy and active lifestyle.

How MS can affect my vision

There are three types of visual symptoms in MS:

1. Optic Neuritis
2. Double vision (diplopia)
3. Nystagmus

1. Optic Neuritis

Optic neuritis is common in MS and can occur more than once.

It is caused by inflammation or demyelination (damage to myelin - the nerve covering) of the optic nerve, which transmits the image (message) from the retina (thin tissue layer behind the eye) to the brain.

This often causes blind spots or areas of poor vision surrounded by an area of normal vision. Colour vision can also be severely affected (colours, in particular red, may appear faded). Frequently there is pain, particularly during eye movement, such as looking sideways. The visual loss associated with optic neuritis is often in one eye only. It occurs suddenly, is progressive and usually reaches its peak after about two weeks before symptoms start to improve.

The effects of optic neuritis e.g. visual disturbance (sometimes blurring) and pain behind the eyeball, are often the first symptoms experienced by people with MS. Like MS itself, optic neuritis normally affects people aged between 20 and 40 and women more than men.

Also recognised as a condition on its own, not everyone who experiences optic neuritis goes on to develop further symptoms of MS, but many do.

2. Double vision

Our eyes are like two cameras and should take the same image. Double vision (also known as diplopia) can occur in MS when the nerve pathways that control eye movements are damaged. The vision in each eye is usually normal but the nerve damage means that the eyes are not aligned properly. As such, vision messages from each eye are uncoordinated and you experience a false double image and sometimes, loss of balance.

3. Nystagmus

Nystagmus is the involuntary movement of the eyes - from side to side, up and down or in a rotary manner. This sometimes goes unnoticed by the person with MS but can be clearly seen by an observer. If more persistent, nystagmus may contribute to dizziness, nausea and impaired balance.

What should I do if I experience vision issues?

If you feel eye pain, colours appear to have faded, experience double or blurred vision or visual field defects (part of your vision is missing in different areas of your visual field), or seem to have 'blind spots', talk to your GP, MS Nurse or ask to be referred to the appropriate specialist.

An eye assessment can determine how much inflammation is present and inform your doctor whether treatment will speed up the recovery of your vision.

What else can I do to manage these symptoms?

Treatments

Optic Neuritis

Optic neuritis is usually transient and associated with good recovery, which takes four to six weeks. In the majority of people with MS, eyesight can return to normal without treatment. Depending on severity, optic neuritis is sometimes treated with steroids, which aim to reduce the inflammation and speed up recovery.

Double vision (diplopia)

If you experience double vision as part of a relapse, it will often recover, partially or fully – often on its own. Steroid treatment can help speed up the rate of recovery. To reduce the impact of double vision you can use a patch over one eye to block out one of the images. Temporary stick-on Fresnel prisms, can be worn on your glasses to adjust the way light enters your eye to help realign the two images.

If you have long lasting double vision, discuss other treatment options with your medical team, such as botulinum toxin or surgery, which adjust the muscles that control vision to restore the symmetry of your eye position.

Nystagmus

Nystagmus can be a difficult symptom to treat so discuss with your doctor. Occasionally drug therapy may be suggested.

For more information and assistance, including financial advice:

- **Your GP** should be the first contact for any new and/or persistent vision concerns. MS nurses and vision advisers can also help you to manage these symptoms on an ongoing basis.
- **Contact your state MS society** (details below) to access services such as MS nurses, peer support and other resources.
- **Vision Australia 1300 84 74 66** www.visionaustralia.org has useful [products](#) such as talking books and provides financial and benefits advice for eligible people, including those with low vision.
- **Independent Living Centres Australia 1300 885 886** www.ilcaustralia.org.au provides information about products and services to help people remain independent and improve their quality of life.

- **Carers Australia 1800 242 636** www.carersaustralia.com.au provides information and advice to carers, their friends and families about carer support and services.
- Federal Government agency Moneysmart www.moneysmart.gov.au provides financial advice, including debt help options, during stressful life events with a free **Financial Counselling Helpline 1800 007 007** www.moneysmart.gov.au/managing-your-money/managing-debts/financial-counselling
- Some utility and other services offer payment extensions. Consider a local welfare service for help with payments or the **National Debt Helpline 1800 007 007** www.ndh.org.au/
- Speak to your neurologist and other healthcare providers about the best approach to treatment management for your individual circumstances.
- For information about MS and MS treatments visit www.msaustralia.org.au

■ **Contact details for your state MS organisations:**

MS Limited (Victoria NSW ACT Tasmania)	1800 042 138	msconnect@ms.org.au	www.ms.org.au
MSWA (Western Australia)	1300 097 989	communications@mswa.org.au	www.mswa.org.au
MS Society SA & NT (South Australia NT)	1800 812 311	msassist@ms.asn.au	www.ms.asn.au
MS Queensland	1800 177 591	info@msqld.org.au	www.msqld.org.au

Sources: This fact sheet comprises material from previously published Australian MS Society leaflets plus Multiple Sclerosis (MS) UK Trust online resources (and associated references), and has been endorsed by both a medical expert and a person living with MS.

Disclaimer: This information was prepared by MS Australia. It is intended to provide useful and accurate information of a general nature and is not a substitute for medical advice.