4 Tips for Dealing With a Dual Diagnosis

Yes, you can have multiple sclerosis. And something else.

Just two years after being diagnosed with MS, 47-year-old Lisa Emrich, a professional musician in Falls Church, Virginia, suddenly was unable to play the piano.

Lisa, who had already lost control of two fingers on her left hand the previous year due to MS, figured the new symptoms were just the next chapter in her struggle with the disease. But after several months and referrals to many other medical professionals, her finger issues turned out to be due to a whole other diagnosis — rheumatoid arthritis (RA).

If you’ve received one or more diagnoses on top of your MS, it’s critical that your providers work together, making sure the most urgent conditions and tests are prioritized, medications don’t interact negatively (or duplicate each other) and side effects are effectively managed. Follow these steps to ensure you get the best possible care.

• Get the right people on your medical team. For most new problems, you’ll want to see a primary care physician (PCP) for a referral to a specialist like an oncologist, cardiologist, pulmonologist or psychologist. Your PCP can also act as the central point in care, coordinating all of the various healthcare providers and treatments you may be getting. This can help streamline your medications (possibly dropping any that are redundant) and ensure you don’t end up with drugs that interfere with one another or cause dangerous interactions). Tip: Use one pharmacy if possible for all of your medications. Today’s prescription software will automatically flag some drug
interactions.

- **Triage your needs.** While your medical team can work together to prioritize and manage your treatment needs, it’s a general rule that more urgent, life-threatening illnesses should be dealt with first, over your MS. Your team will also consider whether the same treatment could be used to manage both conditions (like a healthier diet and exercise to help with high blood pressure, high cholesterol and MS fatigue), and which treatment is most affecting quality of life and daily function.

- **Maintain your own lists of medications and providers.** Your PCP might keep all of your healthcare providers informed, but you shouldn’t count on it. To be proactive, write down all of the names and contacts for your physicians and bring the list to every appointment. The same goes for your medications: Keep a running list of each one you’re taking, the dose, why you’re taking it and who prescribed it. After each visit, make a point of asking the physician’s office to share a record of the appointment—including any treatments recommended or medications prescribed—with all of the medical specialists on your list. Tip: Lisa maintains her own records, with the help of her smartphone. She uses the note-taking app to keep track of medications and any questions she has for the doctor, and the calendar to keep track of appointments.

- **Ask the experts.** When managing your health care begins to feel like a full-time job, or you simply don’t have the energy or ability to manage the numerous providers, tests, appointments, prescriptions, and insurance plans, it may be time to look for some assistance. [Contact an MS Navigator](#) for information about care management resources.

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Editor’s Note: For more information on comorbidities, visit the [Society’s website](#).