

FOUNDATIONS OF NURSING

PART 4 EMBEDDING EMPOWERMENT



Contents

Course presenters	3
Learning objectives	4
Modifiable lifestyle factors	4
MS Brain Health	4
Brain Health - Time Matters report	4
Fundamentals of brain health	5
Early diagnosis & prompt treatment	5
Regular monitoring & patient partnership	5
Managing comorbidities	5
Cognitive function & mental wellbeing	5
Five key lifestyle recommendations for brain health	6
Case study - Jilly	7
Living well with MS guides	8
Conclusion	8

Course presenters

Dr Therese Burke, Registered Nurse - MS Specialist

Australia Adjunct Senior Research Fellow, School of Nursing, University of Notre Dame, Sydney Campus



Dr Therese Burke is an internationally dual certified in Multiple Sclerosis (MSCN) and Rare Neuroimmunological Disorders (CRND) and is currently an Adjunct Senior Research Fellow in the School of Nursing at The University of Notre Dame, Sydney, Australia where she continues to be involved with neuroimmunological research.

Therese's post-doctoral research explored the skillsets, support and education of Multiple Sclerosis (MS) Nurses and focused on defining the role in Australasia. She is also active nationally in research and education for MS Nurses Australasia (MSNA Inc) and internationally as part of the International Organisation of MS Nurses (IOMSN). Therese has extensive research experience in many aspects of MS, particularly in understanding the lived experience and identifying ways to improve the quality of life and healthcare experience for people living with MS, as well as in clinical drug trial project management and investigator initiated clinical research.

Therese was awarded a Member of the Order of Australia (AM) in the 2023 Australia Day Honours list for significant service to medicine, particularly to MS research and to nursing. Therese is the current MS Nurse International Leadership awardee, an IOMSN International Nightingale recipient for 2025 and has recently been a member of the international working group to review MS Brain Health guidelines.

Therese is a member of the MS Australia [MS Nurses Working Group](#).

Belinda Bardsley, Registered Nurse - MS Specialist

Manager, N-CRESS at Austin Health, Melbourne



Belinda works in both a clinical role as a MS nurse and in research management, overseeing MS clinical trials at a Victorian hospital. Belinda has been working with people living with MS for more than 18 years and supports them from the time of diagnosis and helps them to understand the unique complexities and challenges of MS.

Belinda manages a team of MS nurses who provide support to people living with MS and specialist MS Nurse education through preceptorship programs for new MS Nurses and by helping them develop a broader understanding of MS care and clinical trials skills by providing training by observation in their large multidisciplinary clinic.

Belinda works closely with other services, general practice, local community, national and international partners. As part of her role Belinda is actively engaged in MS research including management of the research program and oversight of clinical trials. Belinda has also been involved in research that explores the delivery and value of MS nurse care in Australia and is a co-author of the [MS Nurse Care in Australia Report](#).

Belinda was the recipient of MS Australia's [2025 MS Advocacy Award](#), recognising her more than 18 years of contribution to improving MS care through clinical leadership, education and national advocacy focused on better outcomes for people living with MS.

Belinda is the Chair of MS Australia [MS Nurses Working Group](#).

Learning objectives

In this session you will learn about:

- Modifiable lifestyle factors
- Empowerment for people living with MS
- MS Brain Health

Modifiable lifestyle factors

Modifiable lifestyle factors are behaviours or habits which we can change or control and they can significantly influence a person's health and risk for disease. There has been an increase in the amount of evidence available about lifestyle factors for MS over the last five to ten years.

There are a lot of fixed factors in MS that nurses and patients cannot do anything about, including genetics and biological sex, when the next relapse will happen, the location of the next relapse and how well someone is going to do on a disease modifying drug (DMD).

A focus on modifiable lifestyle factors can provide practical hands-on advice for patients, allowing them to feel more empowered and have a greater sense of control. This is one of the greatest areas of impact that a MS Nurses can have. If you can make positive changes for a patient in this area, you can change the pathway they are on and change the course of their life.

MS Brain Health

MS Brain Health is achieving optimal care in MS. It goes beyond the treatments discussed in **Part 3: The Rescue Mission**, including Disease Modifying Drugs (DMDs), alternative therapies and complementary therapies and even some newer therapies. MS Brain Health factors in non-medical drivers including early treatment, close monitoring, and lifestyle education aimed at preserving brain function as long as possible.

Brain Health – Time Matters report

The first MS Brain Health report was released in 2016. It was developed by a team led by neurologists Gavin Giovannoni (Queen Mary University of London) and Helmut Butzkueven (Monash University) who looked closely at what modifiable lifestyle factors could do for the course of MS and what changes to those lifestyle factors might mean for people living with MS. This team also included Australian MS Nurse Jodi Haartsen.

The report was updated in 2024 and covers the latest advancements and needs in MS, Neuromyelitis optica spectrum disorder (NMOSD) and myelin oligodendrocyte glycoprotein antibody-associated disease (MOGAD) and highlights the policy changes needed to help people with these diseases live their best possible lives.

Care and treatment in neuroimmune conditions have hugely advanced since the first report. The new report delves into these advancements and addresses the ongoing needs of those living with these lifelong conditions.

NMOSD and MOGAD are rare, demyelinating diseases that have similar symptoms to MS, but different underlying drivers of the disease process. Anyone involved in clinical, societal or policy decisions concerning these conditions needs to understand the differences between them, to ensure that they are diagnosed and treated appropriately.

[Learn more about NMSOD and MOGAD](#)

[Learn more about Brain Health – Time matters report](#)

Fundamentals of brain health

MS Nurses have an important role to play in Brain Health from diagnosis and throughout the MS journey.

Early diagnosis & prompt treatment

Early diagnosis enables timely initiation of DMDs, which can slow disease progression.

MS Nurses play a critical role in accelerating referral processes, triaging urgent cases, and providing early education to support informed treatment decisions. Nurses also play a role in ensuring that patients begin a DMD as soon as possible including arranging logistics and ongoing education. Infusion nurses can play a critical role in support people living with MS to access treatment quickly. Shared decision-making is encouraged to tailor treatment choices to individual patient lifestyles.

[Learn more about MS Diagnosis in Part 1: Wrapping your head around what MS means](#)

[Learn more about DMDs and Shared Decision-Making Part 3: The Rescue Mission](#)

Regular monitoring & patient partnership

Regular monitoring, including MRI scans, is vital to track disease activity. MS Nurses help patients overcome barriers to MRI attendance, such as claustrophobia, by facilitating accommodations like sedation or earplugs.

Encouraging patients to keep appointments for infusions or injections and to report new symptoms early supports effective disease management. Building long-term trusting relationships allows nurses to partner with patients, fostering open communication about challenges like missed doses or fears, which is essential for successful care.

Managing comorbidities

Controlling comorbid conditions such as high blood pressure, diabetes, high cholesterol, and obesity is important since these can influence MS progression. MS Nurses should encourage patients to visit their GP regularly and maintain regular health checks such as skin checks, prostate checks and mammograms.

Cognitive function & mental wellbeing

Cognitive function and mental health are critical components of Brain Health and MS Nurses should provide an environment where patients feel comfortable talking about difficult issues such as their mental health. Early screening and referrals for psychological support are very important.

Loneliness can be a significant issue among MS patients, often due to shame or embarrassment around the disease and associated symptoms (for example, incontinence), early retirement from work or mobility challenges that lead to social isolation. MS Nurses can provide social support, peer connections and a compassionate presence, which can greatly alleviate feelings of loneliness.

Five key lifestyle recommendations for brain health

There are five key lifestyle recommendations that MS Nurses can make to patients to improve their Brain Health:

- 1. Don't smoke:** Smoking accelerates brain atrophy and MS progression. MS Nurses should provide referrals to quit-smoking resources and regularly check smoking status.
- 2. Stay active:** Regular physical activity supports brain function, mood, cognition, and bladder health. Exercise does not require intense gym workouts; even daily gentle movement is beneficial. MS Nurses can provide referrals to physiotherapists and exercise specialists.
- 3. Eat well:** Following balanced diets, such as the Australian Dietary Guidelines, is recommended.
- 4. Sleep well:** Adequate sleep supports memory, energy, and healing, and helps manage MS fatigue.
- 5. Manage stress:** Stress reduction techniques such as mindfulness, counselling, relaxation, or simple nature walks are valuable. These approaches often overlap with exercise benefits.

[Find resources and advice on quitting smoking here](#)

[Find Australian Dietary Guidelines and resources here](#)

It is important to build trust and rapport with a patient, and this may take several appointments. Work with the patient at their level, taking into consideration their health literacy, current lifestyle, mental health and issues that are important for them.

Case study - Jilly

Jilly is 32 years old and describes starting her MS journey with a 'wonky eye' two years ago. She is now visiting the MS Nurse after being diagnosed with RRMS following a second attack.

The MS Nurse gathered some background information:

- Jilly has significant motor deficit with several spinal cord lesions and is incontinent of urine on occasion (she only disclosed to nurse, not neurologist).
- She works in advertising at a desk and is a musician on the weekends with very little free time
- She smokes and drinks alcohol on the weekends with her bandmates and only on weekdays if on a tight deadline
- Her diet is interspersed with takeaway and occasional sugary treats
- She doesn't exercise and never has. She has heard that exercise might help her but is now scared she might fall due to experiencing foot drop
- Jilly feels completely overwhelmed and doesn't want to tell anyone (including her parents) about her MS diagnosis and keeping this secret has put her under constant stress and is she is not sleeping well
- She has not had any serious health issues in the past and doesn't have a regular GP, meaning she may have poor health literacy and also limited understanding of what MS is (as she has seen some frightening information online)

The MS Nurse focused the first appointment on gaining Jilly's trust, explaining the role of the MS Nurse and neurologist and introducing the concept of brain health and evidence-based decisions. The nurse was also able to talk about what MS looks like today and addressed her fears and uncertainty. She was also referred for psychological help.

Over the next 3-4 visits, the MS Nurse was able to slowly introduce a range of other initiatives, with a focus on brain health including:

- Health literacy education and getting to know MS
- Starting small amounts of exercise
- Discussing treatment options and starting on a DMD

Never let a patient leave without a plan for follow up. A follow-up plan enables all the others Brain Health factors to fall into place a little more easily. If a patient knows there's help around the corner and there's always someone to call, that will help to keep them on track.

Living well with MS guides

Originally developed in 2020, MS Australia updated the *Living Well with MS* guides to incorporate new wellness content supporting people living with MS to make informed lifestyle decisions that promote better health and wellbeing and support day-to-day living with MS.

These resources include two guides – one for people living with MS and one for health professionals – informed by the latest research and real-life experience.

The guide for health professionals brings together the latest evidence on modifiable lifestyle factors in MS, offering practical insights and evidence-based interventions to support MS management, clinical conversations, and shared decision-making to improve health outcomes for people living with MS.

[View the guides](#)

Conclusion

This session focused on what people with MS can do to feel more in control, even when there are parts of the disease that cannot be changed. Modifiable lifestyle factors – like smoking, physical activity, diet, sleep, and stress – can make a real difference to long-term health and day-to-day wellbeing.

The session also looked at Brain Health in MS, which means acting early, treating promptly, and reviewing progress over time. MS Nurses play a key role by helping people get the right information, start treatment sooner, attend monitoring (such as MRI scans), and speak up about symptoms and concerns. Just as important is supporting mental wellbeing, reducing loneliness, and connecting people with practical help.

Remember...Time is critical. Time is brain



IOMSN has reviewed this project that was developed by Therese Burke as a resource for MS Nurses. IOMSN has concluded that this project is fair balanced and accurate and is valid for educational purposes.