

## Suggested answers to case study part 1

### 1. How is the MND affecting Jenny at the moment?

**Lower limbs** – altered mobility with increased falls risk, may feel less confident with walking

**Upper limbs** – mainly right- hand movements harder, maybe slower and less accurate with a tendency to cramp

**Bulbar symptoms** – voice quieter and may find it harder to be heard over background noise.

### 2. Is there anything else you would want to ask her about now?

What effects does the MND have on her activities of daily living? On her work? On her social life? On her relationships? Has she any concerns around finances? How is she adapting to the changes? How does she like to be communicated with? Does she feel she has enough information? What is her mood like? Is she someone who likes to plan ahead?

### 3. Who from the MDT should Jenny meet with now?

OT, MND Association, SLT

### 4. What specifically do you want them to assess and provide support with? Document the information you need to pass on for each referral.

OT = functional review within her home and consider the layout of her house. Look at computer use and aides for her hands.

*Referral:* include her functional ability, layout of house, all aides and equipment, who is with her at home, what she is concerned about.

(Could show a completed example of what to write)

MND Association = for information and support now and in the future.

*Referral:* brief history of her illness.

SLT now = already seeing them in clinic but could consider voice banking at an early stage as maybe too late otherwise. Also for computer usage (some overlap with OT, maybe specialist OT?)

*Referral:* include communication now and desire for continued employment as long as possible. Include negatives – no problem swallowing currently.

(Could show a completed example of what to write)

NB: All referrals need patient consent for the referral and consent to share information.

### 5. What difficulties can you already anticipate Jenny will experience in the future due to her illness

Mobility will be an issue at home and getting to work – house adaptation. Her type of work will need consideration. Finances if she is less able to work. Fatigue – often forgotten but this will be apparent. Speech and swallow will deteriorate. Weakness in hands. May get spasticity.