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|  | Multiple Sclerosis | Guillan-Barre | Myasthenia Gravis | Parkinson’s  |
| Pathophysiology | AutoimmuneMyelin inflamed, detaches and forms scar tissue | Autoimmune-Inflammation PNSAfter GI/Respiratory Infection | AutoimmuneAffects transmission at myoneural junction | Decreased dopamine |
| S/S | Vision pblmsTingling/numbnessFatiguepain | Ascending paralysisFeels like pinched nerveRespiratory | Double visionPtosisMuscle weakness  | (TRAPS)TremorRigidityAkinesiaPosturestare |
| Dx | H & PMRI | H & P Evoked potential studies | Tensilon test | H & PPETSPECT scan |
| Treatment | IVIGCorticosteroidsPlasma exchange | Plasma or IVIGNO corticosteroids | Plasma exchangeSurgery (Thymectomy) | Dopamine replacementSurgery |
| Nursing priorities | Symptom managementPromote mobilityAvoid injury | Monitor for respiratory distress | Energy conservationMedication management (stay on schedule)Prevention of complications | Improve mobilityEncourage self-care |
| Outcome | LifelongDebilitatingNo cure | Full recovery after several months to a year | Chronic disease | ProgressiveDegenerative  |