



DAWN CASE STUDY

Specialist knowledge & intervention – Ruth O'Regan, Norfolk and Norwich

SITUATION

Dawn has Secondary Progressive MS. She requires twenty-four-hour care and lives with her husband who is also disabled.

AT A GLANCE

CHALLENGES

- Frequent hospital admissions for pneumonia
- Pressure sores, so unable to sit for prolonged periods

AMSC INPUT

- Referral to specialist respiratory physiotherapist
- · Provided training for carers
- Bi-monthly reviews now taking place

"Having some emotional reassurance and support is useful as I feel a bit alone with Dawn's MS — I did not realise she would get so ill. Dawn's ill health gives me a lot of anxiety. It is nice to have Ruth to ring and ask about things that are worrying me. She also asks how I am feeling and that helps."

- Keith (Dawn's husband)

BACKGROUND

- Dawn has now been classed as palliative for four to five years and has had frequent hospitalisations for pneumonia.
- She is fed with a feeding tube and requires a hoist to move. She
 has ongoing issues with pressure sores and significantly reduced
 cough power.
- Her husband who is also disabled, often feels isolated and anxious whilst managing Dawn's situation.
- Dawn has had no neuro-nurse or consultant review for four years because she is housebound.

AMSC INPUT AND RECOMMENDATIONS

- Dawn is only able to sit out of bed for short periods due to a
 pressure sore. However the AMSC noted that her breathing was
 much clearer when she was sitting compared to lying down.
- Breathing exercises were introduced for the patient and a referral to Specialist Respiratory Physiotherapy was made.
- The AMSC taught carers how to do a manual cough assist to help clear Dawn's lungs and encouraged daily sitting.
- Dawn's breathing was also improved when she lay on her side in bed, so the AMSC demonstrated how pillows could help to support her when in bed.
- Dawn's ankle muscles were weakening due to prolonged periods in bed, so the AMSC taught the carers how to complete ankle stretches and advised on positioning.
- The AMSC identified that Dawn might have oral thrush, she advised the carers to contact the GP about this.

OUTCOMES

- Cough assist machine has been provided and carers trained in use. There have been no hospital admissions for pneumonia since.
- Received a neurological review in accordance with NICE (National Institute for Health and Care Excellence) guidelines and has a contact number for specialist support as needed.
- Provision of a suction machine has been provided ongoing, along with training for new carers.