

Editorial Note on Amyotrophic Lateral Sclerosis

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Introduction

Amyotrophic lateral sclerosis is a motor neuron disease. It refers to a group of ongoing, neurological problems that cause nerve dysfunction and controls muscle movement. ALS is a disorder of the nervous system that regulates voluntary muscle movement. In ALS, motor neurons (nerve cells that control muscle cells) gradually disappear. As these motor neurons are lost, muscles become weak and inactive, thus leading to muscle weakness, paralysis, and eventually death. The word "amyotrophic" comes from a Greek root meaning "without muscle nutrition" and refers to the loss of symptoms nerve cells are often sent to muscle cells. "Lateral" means "lateral" and refers to the area where the spine is injured.

The term "sclerosis" means "severe" and refers to a strong spinal condition in high-grade ALS.

The causes of ALS are still unknown. Researchers speculate that some people may be more prone to the disease but only after contact with the environment. Due to genetic and environmental interactions some people develop ALS. Medical inventions have improved the quality of life for people with ALS by providing breathing, nutrition, mobility and communication. Proper management of symptoms, as well as the effective use of medical and mechanical interventions, can make a positive difference in daily life and may even increase health.

Riluzole was the first treatment to treat ALS. Other forms of riluzole have been developed, which allow the drug to be easily digested by humans that are difficult to swallow. Nuedexta was used in the treatment of pseudobulbar affective disorder (PBA), a condition experienced by ALS patients. There is no cure for ALS, so treatment is aimed at reducing symptoms, progression of the disease and to avoid unnecessary complications or further complications. ALS can cause physical, psychological and social activities. Specialists often help patients to manage their symptoms and care, improve their quality of life, and extend their longevity by using specific treatment. Rilutek was the oldest drug that appears to have slowed the progression of the disease. It works by lowering the body levels of glutamate and excitotoxin which is linked to neuronal damage. Many research projects are looking at ways to use new and existing

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drugs to treat various aspects of ALS. Various therapies for treating ALS are as follows

Physical therapy can help people with ALS manage pain and cope with mobility problems. A physiotherapist provides help and information by Low-impact trials to improve cardiovascular fitness and overall well-being, mobility aids such as wheelchairs and devices that make life easier such as ramps. Occupational therapy helps a patient to maintain independence by choosing flexible equipment and assistive devices to maintain their daily routine and train them to compensate for hand and arm weakness. Respiratory therapy may be needed over time, as the respiratory muscles become weaker. The other process was one end of the tube is connected to a ventilator and the other is inserted into a windpipe through a hole in the neck, or tracheostomy. Speech therapy is helpful when ALS patient is difficult to speak. Speech therapists can help by teaching flexible techniques. Other means of communication include typewriters and electronic communications equipment. Supporting a healthy diet is important, because the difficulty of swallowing can make it difficult to get enough nutrients. Healthy nutritionists can advise on preparing nutritious foods that are easy to swallow.

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Conflict of Interest

The author declared that there is no conflict of interest.