MANAGING ANGER
“How could this be happening to me? Why me? Why now?”

Anger with MS is part of having MS. I know. The professionals tell me that anger is a normal adaptive human emotion, a signal that something needs to be changed. Anger can also be a symptom of depression—which is something for people with MS to remember. Rates of depression are up to three times higher for us than the general population.

Dr. Randolph B. Schiffer, professor of Neuropsychiatry and Behavioral Science at Texas Tech University, says that people with MS deal with two kinds of anger. There is “existential anger”—about the injustice of it all. Having MS is deeply unfair. Then there is “instrumental anger”—the anger that stems from everyday frustrations presented by MS, from trouble with a belt buckle to the HMO that won’t pay for your disease-modifying medication.

Dr. Schiffer believes that the two kinds of anger are fundamentally linked. Each person with MS must come to terms with the core injustice and then, in daily life, learn to balance out the frustrations. He likes to point out that anger can fuel positive problem solving. Years ago, Sylvia Lawry’s brother was diagnosed with MS. She was so angry that medical science could offer no help that she started the National MS Society.

According to Peggy Crawford, PhD, a clinical psychologist with the Cleveland Clinic’s Mellen Center for Multiple Sclerosis, “Anger often comes in waves. At the time of the diagnosis, there can be anger over how long it took to get the diagnosis. Anger may resurface when new symptoms appear, and again when old symptoms come back in new ways.”

My own experience mirrors the experts’ words. When exacerbations left me without the use of my limbs, and the recovery seemed endlessly slow, I raged. When vision loss took away my ability to drive and the independence that goes with that, I fumed. When my body functions dimin-
ished, I felt fury. When I was diagnosed, floods of anger ran through me. Visuals of a wheelchair and a paralyzed body kept playing in my head.

**Learning that anger is a normal feeling**

In the past 17 years of living with MS, anger has been an almost constant companion. Luckily, I have learned how to dissipate some of it and to channel the rest into a positive force. Learning that anger is normal was a first step. It paved the way for me to seek the help of a mental-health professional.

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Dr. Crawford asks her patients, “What is the payoff for all this anger?” This is a difficult question, but it’s one that must be answered if a person is going to distinguish between the anger that leads to problem solving and the anger that simply overwhelms.

**How angry are you, how often, and when?**

Dr. Crawford gives her patients a questionnaire that asks about moods, physical symptoms, and how the individual copes with stress. When people feel over stressed, it’s common to feel angry. Dr. Crawford’s thorough evaluation helps people frame the basic questions—how angry are you, how often, and when?—which can lead to identifying ways to deal with stress.

Men and women tend to express anger differently. Men are more likely to show their anger. They become assertive, even bullying. Women often resort to passive-aggressive behavior. They retreat into silence—and resentfulness. But both behaviors are made of the same basic stuff. The reason to explore the whys and whens of your anger is to come up with solutions you can use to manage it in more healthy ways. Understanding what triggers your anger can circumvent many explosions.

My personal flash points are varied:
some silly, some serious. I’m easily trig-
gered when I see others do what I can no
longer do: dancing gracefully; walking
hand-in-hand with a partner; driving any-
where, anytime; trying on and buying styl-
ish high-heeled shoes; and filling their
vacation days with nonstop shopping,
museum visits, concerts, and dinners—all
with no concessions to fatigue, spasticity,
or mobility problems. I also have to work
on managing anger whenever I need to
ask someone for help. It always makes me
feel that MS has turned me into more of a
receiver than a giver.

What are your personal triggers?

■ New symptoms.
■ People who equate a chronic disease
with loss of intelligence.
■ Family and friends who should be
able to see what needs to be done with-
out needing another explanation of the
situation.
■ Needing to ask—every time—for a
ride to a regular event or meeting.
■ Demanding social events or extended
family gatherings.
■ Handicapped seats that are in the
worst viewing areas at arenas or theaters.
■ Feeling left out in social situations
when a mobility aid keeps you from
being close to the action.
■ Going to restaurants, stores, or hotel
rooms that claim to be accessible and
aren’t.

What are some solutions?

When you feel the heat rising:
■ Do something physical as a release:
Hit a pillow, rip up paper (old phone
books work especially well), let out a
scream, go for a walk, get on a bike (sta-
tionary or outdoor bike), or use any
other piece of exercise equipment. You
could even try swishing finger paints or
pudding on a big piece of paper until the
anger dissipates.
■ Let music calm you: dance or just
sway to music, sing your favorite songs as
loudly as you can.
■ Use the soothing power of water:
take a shower, relax in a bathtub, swim, if
that’s available, or simply splash your
hands in a basin of cool water.
■ Practice the old “count to 10”, then
shift to deep breathing or any of the
relaxation techniques you have learned
(see below).
■ Bake bread—kneading dough is a
great release—keep frozen dough on hand
or use play dough to slap around if you
don’t want the bread.
■ Escape into a book or video and lose
yourself in someone else’s life; engage
your mind in a challenging crossword or
jigsaw puzzle.
■ Pray or meditate—these are powerful
tools for managing anger.

To help keep your anger under control,
choose some of these for a regular emo-
tional maintenance program:
Work on communication. Those around you aren’t mind readers.
- Ask for help. It does get easier.
- Practice relaxation techniques. There are many to choose from: breath-work, yoga, tai chi, guided imagery, meditation.
- Begin (or restart) a regular exercise program, after checking with your health-care provider, of course.
- Keep an Anger Diary or journal to record your grievances.
- Talk to someone close to you—friend, family member, or peer—and consider professional help.
- Find out about available support groups. Just call the Society. A network of MS friends can make a difference.
- Engage in activities that include other people—iso lation can fuel rage.
- Set reasonable expectations for yourself. Break each activity, task, or trip down into small, defined steps.
- Be kind to yourself in simple ways—listen to the birds, watch a sunset, garden.
- Be kind to someone else. There is always someone whose day will be brightened by your phone call, e-mail, or visit.
- Volunteer! It fights isolation and will remind you how much you have to give. You may also have a chance to see that your own situation is not so bad.
- Develop creative outlets—paint, draw, knit, write, take photographs, do crafts.
- Get a massage. Enlist a friend, family member, caregiver, or go to a professional who will smooth on some lotion and knead the anger out of your body.
- Use laughter to turn the anger away. Watch comedy on video or TV; collect cartoons; read joke books; or check out joke sites on the Web.

I use many of these in my own quest for a balanced life. When I keep busy, the demons of fear and frustration are kept at bay, and I don’t spend time raging. I call it the distraction factor.

I may have learned to tame my anger, but I know it’s never all gone. Looking into the future, I still fear what lies ahead. Will I be able to walk down the aisle at my sons’ weddings? Will I be able to baby-sit my grandchildren? Will I lose more of my mobility and vision? When these thoughts play in my head, anger starts to bubble up.

You may have your own fears. Like me, you’ll have to start again with the first step, questioning the reasons for your anger so you won’t cut off a path to the best ways of managing it.

Joyce Render Cohen and Gayle R. Dinerstein are frequent contributors. Their article “Living With Low Vision,” written with Evelyn Katz, won the 2002 Health Information Gold Medal for patient education.