



**MS Learn Online
Feature Presentation
Choosing an MS Healthcare Provider
and Preparing for Your Appointment
Featuring Dr. Rock Heyman**

>>Kate Milliken: Hello. I'm Kate Milliken, and this is MS Learn Online. As someone who has multiple sclerosis, I learned quickly that having a good relationship with my health care provider is an important part of living well with MS. Recently, I read a brochure titled "Choosing the Right Healthcare Providers." It's a nice guide to help people think comprehensively about their own provider.

We have a contributing writer of this brochure with us today, Dr. Rock Heyman is Chief of the Division of Neuroimmunology and is the Director of the MS Center at the University of Pittsburgh. Hello, Dr. Heyman, and thank you for being here.

>>Rock Heyman: My pleasure.

>>Kate Milliken: So, here it is, the brochure, which I think has been really helpful, really interesting to read. I'll start with a general question first, which is-- what are some tips on how to pick the best healthcare provider for you?

>>Rock Heyman: Well, there are many things that come into play, but usually once somebody knows they have multiple sclerosis, they want somebody who knows more than the average doctor, more than the average therapist, whatever the health profession is, about the disease. And one of the hints might be finding out how many patients does that therapist or doctor see? And if they say, "Well, yeah, I've seen eight whole cases."

It's like, well, yeah, that may be better than anyone else in the area, because people with MS can live in parts of the country where there's not a lot of other people with MS, but in a more urban area, they may say, "I want somebody who has a lot of experiences, used multiple different medicines, dealt with symptoms in multiple different patients, and is staying up-to-date as much as possible."

>>**Kate Milliken:** That's a great question to ask a doctor in terms of their experience, so are there any other questions that you would suggest that might be good to find out whether or not a doctor is a good fit for you?

>>**Rock Heyman:** I think knowing how long the doctor has scheduled to see each patient. Most physicians have varying times of how long they schedule for a new or a follow-up, but many standard appointments are either 30 minutes, 40, 45, an hour, an hour and a half, and knowing how much time you can expect that you will have that healthcare provider in the office with you, paying attention to you, and the same for a follow-up visit.

I know neurologists who see people back in 5 minutes. And if you have more than a touch of MS, you really need a lot more time than that to sort out many of the details of what's going on, or simply, to answer your questions, about some alternative therapies, or other options that may exist.

>>**Kate Milliken:** Great. I had never thought that. That makes total sense. Your brochure says, quote "The job of being a good consumer is up to you." I think that this is not always the way that it has been in the past. So, what's changed in the world of doctor-patient relationships?

>>**Rock Heyman:** A lot of things have changed over the last years. The attitude of "I'm the physician and I will tell you what to do with your health and fix you," no longer exists. And-- but there are a few people who still want to be more directed. There are a lot of patients who read the articles, they're very up-to-date, they listen to programs like this and formulate great questions, and they really have the expectation of, they're not there for the doctor to fix them or tell them what to do, they're there to get information and make informed decisions together, and I think that's a much better model, bringing the person who's got the highest stake in this all into the room, even if their family is present, too, it's like, "let's all meet together and say, how can we best fight this disease?"

>>**Kate Milliken:** That's great. And in the time allotted that you get from your neurologist or your doctor, what is the best way to make the most out of your time in terms of your appointment?

>>**Rock Heyman:** Being organized. Nothing hurts a visit worse than a patient coming in who doesn't know what medicines they're on, what dose they're on, what they need refills of or even their family doctor's name. And if you come in, and-- I just love it when a patient comes in and says "Here's a list of all my medicines, the ones with the stars need refills, and the family doctor's name and address and phone number is printed there, my last blood work was at this lab, oh, by the way, I have a copy of results, too," it's like, let's get everything else out of the way so we can deal with the problems and questions that the person with MS might have, and also the essential things that, even though they may not seem relevant to the person with MS, that the doctor needs to verify on the exam to make sure that there's nothing sneaking up on the patient.

>>**Kate Milliken:** And not only that, but when you're in an appointment, and again, I can speak from personal experience, there are some issues with MS that are deeply personal and, one might even say, embarrassing, so do you have any tips on how to kind of get that information conveyed to your doctor?

>>**Rock Heyman:** I think one is being comfortable with your doctor that they care about you. How do you discuss personal information with your doctor, or nurse practitioner, or physician assistant, therapist, if you don't actually feel that you have a relationship? So, it's unusual for somebody to be very willing, the first visit with me, for instance, to discuss control issues for bowel or bladder or sexual function, so helpfully, the health care professionals are going to bring these things up, because they may occur in people with MS, and if not, and particularly if you've got a good relationship, you can bring it up and say "Hey, doc, I'm going to embarrass you today, because we're going to talk about sex, or we're going to talk about my bladder," but, you know, just bring it up, and it's that relationship side of saying, "this is important to me," and most younger physicians are hopefully better trained than this. Older physicians, by now, should be experienced, but there are many who just don't want to go there, or are a little embarrassed, but I think once you bring it up, they should at least be a good resource to you, just as your doctor's nurse may be a great resource, or some of your other healthcare professionals can help out in those ways.

>>**Kate Milliken:** Certainly, because I think that for all those issues, the embarrassing ones are just as important as the other ones.

>>**Rock Heyman:** And people feel bad that they can't keep up and work as much, and they feel embarrassed to have to say "I think I may need to go on disability or cut back, or I might need to use a handicapped parking placard," and I see the range of people who come in who are very open, and they want to bring up these things right away, and other people, I have to say, "You really should do this so that you and your family can do more," you know, the goal of being successful as a person and doing what you want to do is there, and sometimes the healthcare practitioner needs to bring it up, but I find most of the patients are reluctant.

And it's a balancing act. If I don't know the person with MS as well, I might feel that my bringing up a partial disability or a job change would trigger their anxiety or depression more, or make them feel that their MS is doing badly--

>>**Kate Milliken:** Offend them, even.

>>**Rock Heyman:** Right. Whereas, I'm thinking, that, you know, if they weren't working themselves to death, they could exercise a little, and they would be feeling better in a year.

>>**Kate Milliken:** Thank you so much, Dr. Heyman, for being with us.

>>**Rock Heyman:** My pleasure.

>>**Kate Milliken:** If you would like to get more information on living with MS, go to www.nationalmssociety.org. This is Kate Milliken for MS Learn Online. Thank you for joining us.