Background:

Since 1995 we have run courses for people diagnosed with MS. Our courses are based on the theories and experiences described in the book "From MS Diagnosis to Better Health", by Birgitta Brunes and Adima Bergli.

The course evaluations completed by the participants show that they have been very happy with the course. Many have remarked that the course has deeply changed their attitude towards their disease. Many participants have continued to receive medical treatment with Dr. Birgitta Brunes or Dr. Karin Edberg Andersson. The physicians have worked closely with the participants and observed positive changes in many of them.

In 1998 we held the first month long MS course, combining medical treatments with body oriented psychotherapy. After the month, almost all of the participants continued medical treatment with Birgitta or Karin. When Birgitta and Karin compared the condition of the participants with how it was when they started the month course they considered the results to be very good. This assessment of the development of the disease was built upon the participants' own experience of their symptoms, which is, of course, of great importance. However, within medical research, patients' experiences are not considered objective scientific data.

In 2001 we received support from a foundation (Olsson's Foundation) to do a scientific study of MS progression with a one month course group. The study group consisted of 20 participants and the course was held September 2001. At the end of the month, the group members were examined by a Norwegian neurologist and MS specialist, Dr. Elana Pedersen. The examination resulted in a score for each individual participant according to the EDSS, Expanded Disability Status Scale. The EDSS is an internationally recognised scale for evaluating MS progression in patients. It measures neurological symptoms relating mainly to walking ability – not psychological symptoms. Each grade on the scale represents a considerable difference in the progression of the disease. Small changes do not show up on the scale. A higher score represents more symptoms of the disease. From March 19-23, 2002, six months after the course and the continued medical treatment, the group participants were gathered again. Three participants were not available to take part. The 17 remaining participants were again examined by Elana Pedersen and rated on the EDSS. Elana did not have access to the participants' previous scores. The EDSS scores at the end of the one month course and after the six months treatment were then compared.

Result:

At the end of the course the average EDSS score was 4.5 and after six months treatment it was 3.9. This is an improvement of 0.6 points or just over 13 %. Fourteen of the participants, or 76%, had improved according to the EDSS. Three of the participants had more symptoms of the disease and one participant was unchanged. Five of the participants had decreased their EDSS score by over 44%. These are very good results considering that the traditional MS treatment with Interferon only works to halt the progression of the disease.

With more economical support from Olsson's Foundation we researched whether the month course's therapeutic element had impacted on the lifestyles of the participants and on their quality of life. An independent psychologist conducted a comprehensive interview study with 19 of the 20 participants.

The result of the study showed that more or less all had experienced an improved quality of life after the course. They described the month course as a turning point in their lives and reported that they now had a method for working with their disease. Though they had been sceptical to the psychological component of the course, many of the participants were amazed at the great impact the psychological part of the course had in their rehabilitation.

We are now working with analysing data which was gathered in October 2003, two years after the end of the course, from the same month course group. When the study data is analysed, the results will be published in a scientific report.

We realise that a problem with the month course is that it can be difficult for participants to be away from home so long. The cost of the course and accommodation also gets to be quite high.

Therefore, we now offer a ten day MS course with medical treatment and basic body oriented therapy. Birgitta and Karin, the responsible physicians, consider 10 days to be sufficient for participants to feel the effects of the treatment. Those who experience benefits will likely feel motivated to continue the treatment. Those not experiencing benefits will have the opportunity to discuss with Birgitta or Karin if there would be any value in continuing the treatment. We are aware that the treatment is not beneficial to all and that we can not predict the outcome of the treatment in advance. We have found, and would like to emphasise, that the earlier in the progression of the disease that treatment begins, the greater the chances for good results.

The therapy part of the ten day course is not as comprehensive as it is on the month course. Even so, a basic knowledge in body oriented therapy is useful since the aim of the treatment is to improve the functioning of the body. There will also be medical lectures, relaxation exercises, and meditation during the ten day course. In order to give deeper therapeutic insight we will regularly arrange short courses with different themes. There will always be a medical follow up at these courses.

At the time of writing this, in spring 2007, we have held 11 ten day courses. Our opinion is that the ten day course has given equally good results as the month course. The majority of participants experience concrete improvement during the ten days. Almost all the participants have continued to receive medical treatment with Birgitta and Karin after the course.