



MSAA Podcast – Episode 25

MS in Your 30s

The MS Journey: Stories and Strategies for Women Across the Decades

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With special guests:

Jessica March

Mitzi Joi Williams, MD, FAAN

Kate Durack

Welcome to the MS Journey: Stories and Strategies for Women Across the Decades, a series from MSAA exploring how multiple sclerosis intersects with every stage of life. In this episode, we move into the 30s, a decade often defined by career growth, relationships, family planning, and evolving identity while living with MS. We'll hear from Jessica March about her lived experience navigating the stage of life, and I'm happy to share that we're joined again by Dr. Mitzi Williams.

Together, we'll explore what it means to balance ambition, family health and uncertainty, and how priorities can shift in your 30s. I'm Kate Durack and I was diagnosed with MS at age 30, and I've been living with this diagnosis for ten years now. I'm the Director of MSIN Operations and Engagement with MSAA, and I will be your host for this episode.

Welcome, Jessica and Dr. Williams. Thank you so much for being here. I'd like to start us off with introductions. Jessica, can you begin and tell us a little about yourself and your diagnosis journey?

Jessica March

Hi. I'm so happy to be here. My name is Jessica March. I am 46 years old and I'm a mom of two kids, and I work in health care marketing, and I'm also a patient advocate. I'm also a proud member of the Board of Directors for the Multiple Sclerosis Association of America.

I started noticing symptoms in my late 20s. I was an athlete at the time, and I had just run the Honolulu Marathon. I just completed a 100 mile bike ride, and I had noticed that my feet were feeling a little bit tingly and numb, and I would chalk it up to the high heels that I was wearing. I was also going to grad school at night and working full time, so I had like a really full plate.

So, I made all these excuses about symptoms but I guess my body finally told me that enough was enough and I woke up one day completely paralyzed from the waist down when I was 29. And that is obviously, you know, something that I couldn't chalk up to any other excuse and I had to get evaluated, and subsequently was diagnosed with multiple sclerosis after a lot of different testing.

Kate Durack

Thank you for sharing that. I really appreciate it. And then, Dr. Williams, I know you joined us in the previous episode and we discussed MS in our 20s, but if you can give us a little refresh on who you are and your experience in MS care.

Dr. Mitzi Williams

Absolutely. I'm so excited to be here. Thank you so much for inviting me back. My name is Dr. Mitzi Joi Williams, and I am a board-certified neurologist and fellowship trained immunologist who specializes in multiple sclerosis and I practice at the Joi Life Wellness MS Center in Atlanta, Georgia. So, very excited. I do a lot of work with advocacy as well as speaking and education, so I love getting to interact with people living with multiple sclerosis and helping to help others understand their diagnosis and journey.

Kate Durack

Thank you, and we're so happy to have you set the stage for this podcast episode. I'll be leading the discussion with some key questions, and I think I would like to start out with a question for you, Jessica.

When you think back to your 30s, what stands out most about how MS affected your everyday life during that decade?

Jessica March

I am in my 40s now, but the 30s weren't that long ago, and obviously the diagnosis came right on the cusp of when I turned 30. What I remember most is having to re-envision what my life was going to be like with my career, my family, and what I thought I was going to do with my life to be perfectly honest.

I thought I was going to travel the world and teach English in Japan and find someone to marry and have kids very quickly and it turned out my life path of where I thought I was going significantly changed, but for the better. I was able to get out of a relationship I was in for a really long time and identify that that probably wasn't the healthiest or best for me and it brought me to my current husband who's amazing, and got married a little bit later and had kids.

But when I was diagnosed, I didn't know if I was going to be able to have kids, and I didn't know what my future held. What I knew about MS was that people were in wheelchairs and needed canes to walk, and I was terrified, honestly.

I didn't know if I had to quit my job, I didn't know if I could progress in my career. But to be honest, I've proved all of that wrong and I'm so thrilled and grateful and happy with where I ended up, because it's where I was meant to be. But at the time I didn't know that, obviously, so it was a lot of anxiety of the unknown.

Kate Durack

I hear that more than you know. I was diagnosed at 30 as well, and all of the same things ran through my head, that's for sure.

Dr. Williams, do you want to speak to that and what you're seeing people in their 30s experiencing?

Dr. Mitzi Williams

Yeah. So, first of all, thank you so much for sharing that, Jessica. I think that what you both have said is really relevant to what I see on a day – to – day basis. In treating people with MS for the past almost 20 years, is first, there's that fear of the unknown. Often in the 30s is when people are either just kind of starting, or just really getting settled into their career, making plans for the future, also thinking about family planning, relationships, marriage, those types of things.

And so, a lot of that can feel like it's up in the air when you have this diagnosis and what does that mean for the future, what does that mean in terms of symptoms that you'll have, activities you will and maybe won't be able to do, and who do you want with you on that journey?

I think that many people do have to re-evaluate but I also think many of them, as Jessica said, do wind up realizing what's most important. So, saying, “Okay, you know, I've got this diagnosis. Let me focus on what's really important, the people that I really want around me, and what I really want to do.” And often they do say that, you know, they wind up in a better place than what they thought because of the diagnosis.

Kate Durack

Yeah, I can definitely see all of that.

I wanted to go back to you, Jessica. You did mention that it changed the way that you saw your career rolling out. Can you talk a little bit more about that and how your professional identity had to change in your 30s?

Jessica March

In the beginning, I hid my diagnosis, so I was terrified to let anyone know that I had this disease. And honestly, it was the fear of what others would think that kind of stopped me in my tracks. I realized over time, hiding that had hid a part of me, of being my true self, and being honest with people, and making really deep relationships, and showing empathy, and being a true leader - I couldn't be a leader hiding this.

It turned out that when I was able to come out and share living with this condition was actually when my career thrived, and I was able to connect and relate and lead large teams of people to trust and work together. So, I think I was scared in the beginning, and that kind of held me back a little bit.

But I also had to work on myself internally and kind of deal with what medications am I going to take, explaining this condition to my family and the internal unit. I kind of was thrown into, unusually thrown into, coming out with my condition in a way that is unusual for most people, but it ended up being the best thing ever for me as far as my career goes, because I work in healthcare and I work with people that dedicate their lives to finding new treatments for people living with all kinds of conditions, from rare conditions to oncology conditions to immune - mediated diseases.

There's this connection these people have that I work with, that they get up every single day and have this hard grind to help patients and this whole time I was the patient, and people relate to that. And it just gave this, I don't know, deep sense of trust, I guess, once I was able to bring that out. But that was in my late 30s. So, it took a good ten years for me to get there.

Kate Durack

Yeah. Thank you for sharing that. I'm obviously, I should probably mention that it was a very similar journey for me too. I think that I feel incredibly grateful to have taken my diagnosis and turned it into something that is working in my career, and that I can use and have a platform and a voice and be able to hopefully really help other people with MS and build community. I think we're very much in the same boat there.

Dr. Williams, what else are you seeing with career changes?

Dr. Mitzi Williams

Yes. Career can sometimes be a little tricky, you know? In both of your instances you were able to take what you do and incorporate that as it relates to your diagnosis, but sometimes that's not the case for folks. And so, I think that it is very important to have conversations and strategic thought processes about how people may want to disclose their diagnosis, or who they may want to disclose their diagnosis to.

In some cases they have very good support within their corporate structure. In other cases, it may lead to people being very nit-picky and, unfortunately, losing their jobs. So, the first thing that I often recommend is to start early in terms of asking for help. If we're talking about paperwork, if we're talking about accommodations. Even if we don't need accommodations or extra help at work- intermittent FMLA's so that if you're having a bad

day or you're having symptoms and you need to protect your job, put those things in place early. Because often what I see is that people ask for help once it's too late, once they're starting to have trouble or starting to get poor evaluations and so it's much harder to kind of come back from that versus putting things in place from the beginning to make sure that we're protected and following things along the way so that if there are further accommodations needed, we already have that kind of cued up.

Kate Durack

That makes good sense. I want to mention this. We talked about this in the last episode about MS in your 20s. Just the fact that there are resources available if a job shift needs to change from one career path to another, and there are local agencies that can help with that and I just wanted to make mention that if you give the MSAA helpline a call, people can help you with that, and I'll provide that number at the end of our episode here.

Well, thank you both for sharing that. I'm going to move back to relationships. Jessica, what role did MS play in your decisions or experiences around relationships? You talked about it a little bit so far, but more than that, what about relationships and parenting, caregiving, and family planning?

Jessica March

Yeah. So as far as relationships and parenting go, the defining moment was becoming a mom. I mean, that literally changed everything and that's when I was 35. So, right in mid - 30s is when I had my first child. That, for anyone, whether you have MS or not, is a defining moment for any family, right?

But I think at that time, I hadn't really thought about what I want to tell my kids about MS because they were so young, I didn't even think about it. Now it's become more of a topic in our household. My kids are 11 and 9, and in my 30s, I just didn't want MS to define who I was as a parent so I didn't really get into it those first few years. I really tried to enjoy that time with my kids.

But for me, as a parent, co-parenting, the biggest support for me in my 30s was my husband. Like, it really was about teamwork and shared accountability and communication and also needing to ask for help. I know Dr. Williams mentioned the topic of asking for help and asking for help early. That was not in my vernacular before. I mean, I'm like a doer, a go getter, type A, I'm going to make things happen. And that's really hard for people like me to let go of and not feel guilty about.

That's actually something I worked on quite a bit with through therapy when I was first diagnosed, which was also super helpful. The institution that I go to provides such comprehensive care from therapy, to nutrition counseling, to obviously the medical care that I get, and that was a really big part of my life in my 30s, but also still today.

And that's something that I think has really helped me a lot.

Kate Durack

Yeah, that's great that you have access to that. Mine's a little bit more piecemeal, but I do want to just highlight that it's important that we all take time to figure out what our support system needs to look like, and find those professionals that can step in to fill those places that we might need extra support in.

I also wanted to share what maybe a different perspective might be in your 30s. I agree, I had my kiddos early in my 30s. They are seven and eight. We talk about MS now. It is something that they are aware of and I've hopefully made it not scary, that's my goal.

But I also became a single mom in my 30s, and so that looked a lot different too for our family and for me trying to navigate MS and building a new support system. I just wanted to mention that because I'm sure, Dr. Williams, I'm not the only person to have experienced that. I'm wondering if you can sort of speak to what relationship changes look like in the 30s.

Dr. Mitzi Williams

I will say it can be very surprising. Right? MS and MS diagnosis is a life changing event and with any dramatic life shifting event you may find that people that you thought were going to be there forever are not willing to walk out that journey with you. And then you may be surprised that people, you know, kind of come out of nowhere and really are the best support, and the most helpful, beyond what you could have imagined.

I think that that has been the experience. There are some people, whether it is partners or marriage relationships, where when that diagnosis came, whether that person recovered fully or had symptoms left over, that person was not for the 'in sickness and in health' part. They weren't for the sickness part. Right? With the fear of the unknown. And there are others who, they will find, will stick by their side until the wheels fall off, as some people would say. So, I think that it causes many people to re-analyze those relationships, to say,

“Okay, is this really working? Is this really, you know, supporting me, or is this making my condition, whether it's mentally or emotionally, worse?”

I think that it gives some people freedom to say, “You know what? This is not it,” you know, but also some people are freed involuntarily because that person is just not equipped to walk out that journey. And not making a judgment on whether people are good or bad or in between, right?

So, I think that in that same vein, it can be very life changing but I also think that one of the things that has also been surprising, because many of my patients, particularly my women, are go-getters. They're doing all the things. They get it done, they take care of everything, and you don't realize how much support you have because you don't ask. And so many times I find that when you do reach out and ask, there's so many people around who are willing and want to help, they just don't know what to do.

So, when we open ourselves up and make ourselves a little bit more vulnerable, it allows those people to come in and say, “You know what? I'll take the kids to the pool today. Or, you know, they can ride with me in the car pool to school. Or if you need some time to yourself, I can, you know, they can do a sleepover with my kids,” etc.

And so that community has really become a huge part once people are open enough to say, “You know what, I could use a little bit more support” or “It would help me a little bit to get this relief here.” And so that has been, I think, really a surprising and amazing part of the journey for many people living with multiple sclerosis.

Jessica March

Couldn't agree more. Can I make a comment on that of just an example? For me at least, when I was in my 30s, gosh, this is the end of COVID and I was taking an infusion that, unfortunately, made me very susceptible to illness. So, I had so much anxiety during that time, and I didn't feel like I could go to the grocery store.

And some woman in my town literally went to the grocery store for us every week for a year and I would have never asked anyone to do that for me, ever, but I just, I needed it. We needed to eat, and I just didn't know what was going to happen, and honestly, that was the kindest gesture that I still am grateful for that I would have never asked for. I didn't think I needed help, but that was just an example of something, you know, so simple.

Kate Durack

And so many people are willing to do that. We just don't ask.

Jessica March

I know. Yeah, yeah. It was like, no big deal. She was like, “Yeah, I'm going for myself. I'll grab you what you need. Drop it off at the doorstep. We're good.”

Kate Durack

When you were explaining that, Dr. Williams, I was thinking... I just turned 40 this year, and I was thinking “I think I'm just now figuring that out at 40.” Like, “I have to ask for things? They're not just going to magically happen? And I don't have to do it all myself?”

Dr. Mitzi Williams

You don't, and unfortunately, even the people that love us - their mind reading skills and their telepathy is just not up to snuff. So even though we would think they would see us doing all the things, because we always seem like we're okay they may say, “Okay, well, you look like you're okay.”

So it's just that simple ask, and letting people know will really open up a lot of opportunities for others to kind of pitch in and help us. And that's for people who don't have MS, but especially if you have a chronic condition like MS that affects your ability to function.

And can I say one more thing? I think the other thing that's been a theme since we've been talking is, people, giving yourself some grace, right? So, I hear both of you saying that these are not things you learned overnight. You were diagnosed right by your 30s, and everybody in their 30s with MS may be at different points.

Some people got diagnosed as a teenager, some people in their 20s, some people may have just gotten diagnosed right before they turned 30. And so I think everyone has to give themselves some grace and recognize that these things, although they seem like they should be easy to do, are not easy. And even for those who now seem to have mastered these things, it still can be difficult to ask for help.

So, just also give yourself some grace in the journey and realize you're not going to get all the wisdom in one day, or one year, or even two years. But over time, you realize what you need and that there are other people that are there that can help you fulfill those needs.

Jessica March

That's such a great point.

Kate Durack

It really is, and I wish, if I could give some advice to anyone in their 30s listening to this, it would be to open yourself up to this sooner than I did.

Jessica March

Yeah. Yes. Everyone can learn. You know, I think for me it's around replacing the feeling of guilt with being proud of asking for help. Then also reciprocating when I have the energy to help other people that might need it. You know, it's like good karma to do that.

Dr. Mitzi Williams

Absolutely.

Kate Durack

Yeah.

My next question for you, Jessica, your 30s can already feel like a decade of competing responsibilities. We were just talking about this. So how do you, and did you, manage fatigue, stress, and the pressure of doing it all while living with MS?

Jessica March

Yeah, that's a tough one. I think I have not fully mastered all of that. But, I always think about this, you know, and you go through this journey of diagnosis and understanding, I've come to this point where, at least this understanding with my husband as well, we're committed to the basics. It's nutrition, sleeping, having stimulating conversation, keeping our brain going kind of thing, and movement. Those are like the basics. If we can get all that stuff in, that's like the lowest level of my goal right now. And also, on top of it is rest. I think

that's really, really important. So, when you talk about fatigue, the best relief for me to be honest is napping.

You know, I tried all these medicines when I was first diagnosed, like, these medicines that make you stay awake during the day and all this stuff. I was throwing it all on there. And at the end of the day, it's just, I need to sleep more, you know? And it's just prioritizing that and having an understanding.

So, on the weekends, my kids have a ton of activities. And this is something that I've taught myself not to be guilty for, I stay home and nap on the weekends and my husband takes the kids to their activities, and that kind of gets me enough of what I need during the week. You know, and then I have to process missing out on certain things and that's something I'm working on not feeling guilty about. But, that's what's working for us right now.

Kate Durack

That missing out on things is so heavy. I hear that. And at the same time, I took a nap today.

Jessica March

Yeah.

Kate Durack

So, yes.

Jessica March

Good.

Dr. Mitzi Williams

And, hey, listen, I miss out on a lot, too, right? Not because of MS, but because of working, and so I think that this illusion that we have to do it all, and everything has to be perfectly balanced, is an illusion, right? Life just doesn't work like that. I always look at it like juggling.

There's work. There is self-care. There is home, there are children, there are relationships if you're in a partner relationship or a marriage. And I'm always just kind of juggling. And there's something that's at the top. There are a couple things that are coming close to the top, and then there's some things that are at the bottom, right?

So, sometimes the bottom is I'm not going to be able to get that massage as often as I would like. Or, you know, maybe I won't be able to go to every basketball game. Or sometimes maybe that note is not going to get finished on time, you know? But I think that we're all juggling. And I think that once we kind of let go of this illusion that we have to be perfect at everything, it provides a lot of freedom to be able to just be a real person and to also delegate the things that can be delegated.

So, it's not necessary that I sit there and watch my daughter swim for an hour. Right? She gets a lesson. If there's a meet, I would love to be at the meet, but do I really have to sit there through football practice? Probably not. My time may be better spent doing something else. And so, I think looking at those things that are essential that we have to do, things that we need our spirit, our energy, our intellect, our minds to engage in. And then those other things, if there are resources or availability to delegate some of those things or get help that we get help with those things.

Kate Durack

Yeah. You just talked about things that your spirit needs to do. So, I'm going to piggyback off that, Dr. Williams.

Jessica, have your hobbies shifted or things that you are finding enjoyment and did that shift in your 30s?

Jessica March

Yes, oh, gosh. I, you know, it always shifts. I'm the kind of person that finds new things to be interested in. But in my 30s, from a fitness perspective, I was a power lifter. I was also an athlete like I said, before I got diagnosed. So, I felt like I had to prove something to myself.

Like, "I'm not that sick. I can squat 250 pounds." Yeah, that's not working for me anymore. It was like this mental experiment in my 30s of proving something that, I've evolved now where I'm not proving anything except joy. You know, like, that's basically it. But, that was tough for me, it really was. And I think it was probably tough for other people to see too, you

know, because I would push myself to my limits. Yeah. I don't know. It was- it was an interesting time.

Kate Durack

Yeah. I bet that was a really hard transition. I went the opposite way. So, I want to share that too, because I think it does go the opposite way, where I became more active and I started lifting weights and I hadn't before. I played basketball and did yoga. But I started incorporating things that I thought were more difficult, and definitely not pushing it too hard. But I feel like I made a different kind of shift where I was like, "Oh, I need to be more mindful of my body" because it sounds like you were very mindful of that mind - body connection long before I was. But I started making that connection later and started incorporating those things.

Dr. Williams, what do you see in terms of hobbies and fitness in the 30s?

Dr. Mitzi Williams

So, I see the whole spectrum, right? So, I see some people that say, "Okay, I'm going to do everything I can to put myself in the best shape, to try to work out, to try to eat right." I see some others who, you know, unfortunately, after diagnosis may become very depressed and they don't want to do anything, right? And they're just kind of laying down and like, "You know, I'm just not going to move around," you know? So, I think it is always ultimately about finding a balance. One of the biggest issues alludes a little bit to what you were saying, Jessica, comparison to what your pre-MS body was, and what it could do.

And so that I found has been one of the biggest roadblocks to people living well and being their healthiest self because they have a new normal. So, it's been long enough after a relapse or episode where we kind of have an idea that you're probably going to have a little bit of these symptoms here and there, and they're trying to get back to what they were like when they were 18, 19, 20.

And so, I think that kind of recognizing this is where we are, working with what we have, and making the best of where we are, that's a big mindset shift when it comes to hobbies and activities. Because oftentimes people are just trying to do what they used to do instead of saying, "Well, you know what? I can't do that. But maybe let's try something new. Maybe I can't do HIIT workouts, but maybe I can swim, or maybe I can walk."

And so, once we get over that hurdle, I find that people actually can often do really well and pick up new things. But that hurdle is a big one, particularly in the 30s.

Kate Durack

I just recently, we can totally cut this out, but I just recently got a treadmill in the house and it has been a life changer. I'm like, "What? Why? Why did I wait so long for this?" I live in Florida. I can only walk outside six months out of the year this is not going to work.

So, yeah. I watch my stories and I get on my treadmill every day, and I love it.

Dr. Mitzi Williams

And I've had a bike in my house since COVID, and after I had several injuries last year I just started using it. I'm like, "This thing is great." The music is good, the rides are good, the people are fun, you know? I'm like, why haven't I been doing this? So, just sometimes looking at what we can do instead of focusing on what we can't do.

Kate Durack

Yes. And try something new because it could surprise you.

Dr. Mitzi Williams

Absolutely

Jessica March

Yeah I ended up getting a, it was like a really inexpensive walking pad at my desk, and I can just walk during the day at like, two miles an hour and it gets a lot of steps in, honestly. It's like a great way to do that. That's helped.

Kate Durack

Yeah, any little thing.

Jessica March

Yeah. The one word that you said, Dr. Williams, that really, really connected with what I've learned in my 30s is 'balance.' If people can find- and it's not just with exercise, it's with everything. That's something that I definitely struggled with. And I'm really happy I'm learning, but I'm still evolving.

Dr. Mitzi Williams

Absolutely. I think we all are, right? So, I get the same conversations with my patients who are in their 60s and 70s and they're like, "Well, my memory used to be so sharp." And I'm like, "Well, honey, you were 20. Now we're no longer 20, so we can't expect to have the same function that we did, you know?"

So, it's always just everybody's trying to get back to what they considered their peak. But we do have to realize. Okay, well, this is where we are now. We want to make sure nothing's wrong that needs to be addressed. But at the same time, we also want to say, "Okay, well, how can we live well, where I am right now?"

Kate Durack

Yeah. And in that, I actually can do a shift over to our emotional and mental changes.

So, Jessica, what mental or emotional challenges felt most significant for you in your 30s with MS?

Jessica March

I think that I noticed in the beginning was word finding issues for me. And I don't know, Dr. Williams, if that's something very common for people with MS, but that really was tough for me because I work in communication. And I couldn't think of, just, having a normal conversation. I remember I couldn't think of people's names or I got dates wrong and it just, you know, things would come out jumbled.

And that really hit my ego pretty hard. And I still, you know, kind of laugh it off when it happens. And it happens. It has happened more recently, and I think for me that was the toughest part is just acknowledging that it is probably related to MS.

Kate Durack

Yeah. I actually just experienced, well, I experience this often, but Dr. Williams, did you want to respond to that before I get into it?

Dr. Mitzi Williams

Yeah. So, word finding is a big challenge for people with MS. So, we're dealing with cognitive dysfunction. So, there are many things that affect our cognition. When it comes to MS you have brain lesions which can affect your thinking and your ability to recall words and things like that.

Also, one of the more common symptoms of cognitive dysfunction we see is what we call slowed processing speed. So, it may take you a couple of times to kind of let something sink in. You may have to read it 3 or 4 times to get it, so to speak. And then people also report memory difficulties, but memory not in the same sense as like what you see with dementia, but more like short term memory. Like what I ate for breakfast.

Now the other part that's really tricky is that lifestyle modification and lifestyle factors really factor into cognitive dysfunction. So, let's say someone has multiple sclerosis and we are optimizing all of our lifestyle things, right? And they may have a little bit of word finding difficulty. But let's say you got MS and then you're only sleeping 4 or 5 hours a night. Okay. Chronic sleep deprivation affects cognitive dysfunction. Let's say you got MS, and you're only sleeping 4 or 5 hours a night because you're depressed. Depression also can cause the same cognitive symptoms.

And so, oftentimes what happens is that when people begin to notice something really interfering with their daily life, it may be because part of it is the MS, but we also have all these other lifestyle factors that are affecting that cognition as well. And so, that's when we really do a lot of counseling to make sure that we're getting the sleep, that if there are mood issues we're addressing that, and then in some cases if those things are optimized, we talk about things like cognitive rehabilitation, etc. But oftentimes that lifestyle modification really will tip someone over the edge versus being able to function versus not being able to function so that's a really key point when it comes to the word finding and other cognitive changes.

Kate Durack

That's so hard in your 30s though. I mean, you're building this career, you're used to being able to find your words. I mean, I definitely- I felt like I could be in speech and debate all day long in high school, in college, and thrive. And now, if someone put me in a room against one other person, I would just, you know, turtle and just be like, "No, you win, I'm good. I can't do this anymore."

Dr. Mitzi Williams

No, don't give up.

Kate Durack

So, that's so hard when you're trying to build a career and you know you've got it in you. It is really, it is a struggle. And then on top of that, if you're building a family and a career and you have little kids who wake you up at all hours of the night, you can't adjust your lifestyle.

I mean, last night my son slept. He's eight, and I don't know what we're doing right now. We're in some kind of regression. But he was...we got four hours of sleep. I don't know what's going on, but it feels impossible sometimes.

Dr. Mitzi Williams

Yeah. And I think, again, that's the part where giving yourself some grace comes in, right? Realizing that, you know, I always tell people we didn't get here in a day and we ain't going to get out in a day, and that's oftentimes what happens, right? So, we're not talking about, you know, one or two nights of missing sleep, right? Because that happens. We're talking about chronic.

So, if you got small kids, definitely chronic sleep deprivation. But to the best of our ability, doing what we can. And I think that this is also very empowering because if we had had this conversation 10 or 15 years ago, we weren't really talking about lifestyle modification. We were just talking about DMTs disease modifying therapy because we were so focused on trying to prevent relapses that we didn't have time to figure out that "Oh, sleep really does help keep your brain from shrinking over time" or "Maybe if you eat certain foods, it really does make a difference in your literal brain function."

So, I think that it is never a perfect process, but it is empowering to know that there are some things that we can do or try to work on that can improve cognitive function. And it

may just be doing one thing at a time. So, if we can't get the sleep, let's make sure we're trying to focus on the mental health if that's an issue. So, there's always something that we can do. Maybe it's the diet, right? The difference you feel between eating a big holiday meal versus eating a nice light salad are two totally different things and that can affect the way you think and your cognition.

So, what are the small things and small changes we can do, even if there are other things that, due to life circumstances, or where we are in family planning or family raising, that we can't change. Usually there's something small that we can do to cause a significant benefit.

Kate Durack

Yeah, this was great. I'm glad you just mentioned family planning there, Dr. Williams, I do want to talk about that a little bit more in depth, because I feel like that is such a defining moment in the 30s.

I can start by just saying that my family planning was put on warp speed because I was diagnosed with MS, and so I waited to start my treatment until I had my two boys, and I was so lucky to have them quickly.

And I just wanted to know, from your perspective, Jessica, did you have to make any alterations with family planning that you would like to share?

Jessica March

Yes. Oh, I'm happy to. Yeah, that was a really big topic of conversation when I first met my husband, because I was taking immunotherapy for so long, I wasn't sure how it was going to work to have kids, and get off my treatment and, you know, make it all work. I had a lot of conversations with my physician, and we chose to go off treatment for a certain amount of time and literally had to plan when we tried to conceive.

And, you know, it wasn't very romantic, it was very scientific, but it worked. I'm very grateful for that.

For my second, I did have to go through reproductive medicine support because I think I had a cyst on my ovary, but that was not related to MS. I did have to go to a clinic to see about doing, potentially doing IVF, but it turned out that it was just a cyst and that I was able to conceive. But it was very stressful. Yes.

Kate Durack

It so is. I hear you there.

Dr. Williams, what conversations should patients in their 30s be having early about pregnancy and family planning?

Dr. Mitzi Williams

I think having those conversations as early as possible is important. So, as soon as we get diagnosed, if we are of childbearing age and want to have children, whether it is a year from now or ten years from now, it's important to start having those conversations because it can affect the disease modifying therapy or treatment that people go on.

I will say, one of the amazing things about MS at this point is that I've got many great colleagues in the community who have really been focused on better understanding how to treat women before, during, and after pregnancy, and who have also been collecting tons of breast milk to understand what happens as you're breastfeeding those babies. And so, we have a lot more information.

It's not perfect, but we do have treatments that people can take up until conception, and some through pregnancy, as well as others that we can kind of time where the medicine is still working in their system while they're trying to get pregnant and while they're pregnant. So, there's been a lot of advancement where that's concerned.

But the key is to try to plan early. And even if we don't necessarily have the timing down, to let your doctor know that, "I do want to plan to have kids in the future." And that can affect what we go on from the beginning.

Kate Durack

Yeah. That's great. We did a whole podcast episode about this, and I thought that it was fascinating just knowing what's available now. And it is really cool just, you know, my boys... obviously, I was in this boat about ten years ago, and things have changed drastically. So, yeah, just making sure that you're having those conversations with your providers is really important.

All right. Well, we are coming up on time here.

Jessica, at the very beginning, when you were doing your introduction, you mentioned that MS actually may have changed things slightly for the better for you and that you found

some positive things that came out of your diagnosis. Can you speak to that a little bit more?

Jessica March

The best thing that's come out of my MS diagnosis is the friendships that I've been able to make in my 30s. In the beginning, I felt very alone. But now I've been able to make connections all over the world with people. Really deep friendships. My friend Damian in the MS community always says to me, we text and chat all the time, and he says "It's the worst way to meet the best people" and I really feel that.

Kate Durack

I love that, and it is the worst way to meet the best people and I'm on a call with two of the very best people right now that I'm very appreciative to have met.

Dr. Williams. Do you hear people talking in your office about things they are grateful for that MS brought to them?

Dr. Mitzi Williams

I do hear people talking about things they are grateful for. I will say that it often takes a while before people have that perspective. I think it's important to recognize that that's not something that we can rush. And depending on the symptoms people have and how it affects their life, I'm never someone that's like pushing people or say, "What good do you see out of it?" Because sometimes we have to go through that process. That process of grief, of what my life, I thought it would look like where I am now.

And many times when we come out on the other side of that, which may take 5 or 10 years for some folks, many people do look back and say, "You know what? I'm in a much better place than I thought I would be. And I found a new purpose because I can't do what I used to do. But I found this other thing. There's another thing that I'm really great at" whether it's advocacy, whether it is helping others, being an ambassador, being an advocate, people find these hidden talents that they didn't know that they had or didn't focus on because they had other things they were focused on.

But I think the key is that it does take time to have that perspective and that we have to give ourselves grace and say, "We got to go through this process of dealing with it." Maybe some

of those dreams are changed. That career may be changed. But what it looks like now. But many people on the back end do say that they have made great relationships or made great life changes because of their MS.

Kate Durack

Yeah. I'm glad you get to hear that, too. I do want to just say that for me, and what I've heard other people say, is that grief process isn't just a one-time thing. That's going to come and go. You're going to have to deal with it a couple of times probably, and hopefully you can get it sorted if you're lucky.

But for me, I mean, I feel that grief heavily every time I'm going in for an infusion. It really brings it home for me. And I think, "Oh, right, this is real." And I work in MS every day. But really, it hits me personally and I go through that twice a year. Like clockwork.

And sometimes it speaks in between those, let's be honest. But for me, what's come of my diagnosis- and I've mentioned this in the past so, sorry to be so repetitive, but I just am so grateful that I was given the perspective earlier in life, to really focus on what matters and what I want to achieve in life and what brings me joy.

I feel like I've been able to make a lot of changes in my life and have been able to hopefully parent in a way that encourages my kids to do the same. So basically, living life to its fullest and focusing on what we've got today. I'm thankful for that. I think that this has been a really hard journey. But I'm appreciative of it, in that way. Yeah, definitely.

Well, thank you both so much for joining me. This has been great. Jessica, we have so much in common. And Dr. Williams, thank you so much. I look forward to chatting with you again as we talk about MS in our 40s next time.

Dr. Mitzi Williams

Absolutely. Thank you so much for having me. And it was so great to join in this conversation with you and Jessica.

Kate Durack

Wonderful. Thank you both so much for your time.

Jessica March

Thank you so much. It's so nice to meet you.

Kate Durack

All right. Thank you for listening to the MS Journey: Stories and Strategies for Women Across the Decades. I'd like to thank Jessica March and Dr. Williams for sharing their insights about MS in their 30s. I'm grateful for their openness and insight.

Special thanks to Gradwell House recording for hosting and producing this episode. Support for this episode is provided through an educational grant from EMD Serono.

This podcast, along with additional resources and support, can be found by visiting the Multiple Sclerosis Association of America's website at MyMSAA.org, by calling our helpline at (800) 532-7667 extension 154, or you can send an email to MSquestions@MyMSAA.org. I look forward to our upcoming episodes of the series as we explore the topic of MS through the decades.

Thank you so much for listening and take good care.