MS INFO CHANNEL

Guide · Exercises · Checklists · Evidence

Steady on Your Feet with MS

Train your balance, understand dizziness, prevent falls and make your home safer



PDF BOOK · A4

88 PAGES

Contents

Imprint and notices 2

Preface: How to use this book 8

What you will find 8

How to read this book 8

What "evidence-based" means here 9

How sure are the figures? 9

1 Balance and MS: What is going on? 10

Balance is teamwork 10

What the German guideline says about unsteady walking 11

Where MS can affect balance 13

Other things that can worsen balance 13

2 Understanding dizziness 15

Dizziness is not one thing 15

Possible causes at a glance 15

How often is MS the cause? 16

Positional vertigo (BPPV) 17

Dizzy on standing up and the circulation 18

3 Dizziness in daily life: heat, infections, medicines 19

Heat: the Uhthoff effect 19

Infections and sudden worsening 20

Medicines and the risk of falling 20

Fampridine and walking difficulty 20

4 My dizziness diary and the doctor's visit 22

Preface: How to use this book

This book helps you understand balance, dizziness and falls in MS. It shows what research knows and what you can do at home.

Many people with MS know the feeling. The floor seems unsteady. The room spins for a moment. A leg does not do what you ask of it. Some people fall. Others fear falling and start to move less.

This book aims to give you more confidence. It explains why balance can suffer in MS and how professionals measure it. It tells you honestly what training can do and what is still unclear. And it helps you make your home and your day safer.

What you will find

- Plain explanations in short sentences
- Figures from studies, each with its source in square brackets, for example [4]
- Exercise cards with sketches, checklists and worksheets to fill in
- "When to see a doctor" boxes and conversation aids for appointments
- Case stories that are clearly invented

How to read this book

You do not need to read from front to back. If dizziness bothers you most, start with Chapter 2. If you want to adapt your home, go to Chapter 10. If you have just fallen, Chapter 12 has a step-by-step plan.

ATTENTION Important: not a substitute for your doctor or therapist

This book is not a substitute for medical advice. It gives no drug doses and no instructions for your individual case. Which exercise, aid or medicine suits you is for your neurologist, physiotherapist and family doctor to decide with you.

What "evidence-based" means here

We checked every statement against its source. We only used a number if it appears in the source. What we could not confirm, we left out. Where studies are small or uncertain, we say so.

Some advice does not come from MS studies but from general fall prevention for older people. We mark it as such. It is sensible, but it has not been tested one by one in MS.

> **INFO Date and country**
>
> This edition is dated 4 November 2026. Several sources are German, and rules on care insurance and health insurance apply to Germany only. We mark them with "Germany". Elsewhere, ask your own health service or insurer. Emergency numbers differ by country.

How sure are the figures?

Table 1: How we rate the kinds of evidence

Type of source	What it tells you	How reliable?
Guideline	Experts agree on a recommendation	Based on studies and consensus
Cochrane review	Many studies are assessed together	High, but only as good as the studies
Single randomised trial	Groups are formed by chance and compared	Medium to high
Observational study	People are followed to see what happens	Shows links, not causes
Information leaflet	General advice from organisations	Practical, but not study evidence

Source: our own grading of source types

1 Balance and MS: What is going on?

Balance is teamwork between eyes, inner ear, feeling in the feet and the nervous system. MS can disturb this at several points.

Balance is teamwork

When you stand or walk, your body works quietly in the background. Your eyes report where you are. Your inner ear reports movement and head position. Feeling in the feet and legs adds more information. The brain, above all the brainstem and cerebellum, puts it together and steers the muscles.

In MS, any of these links can be affected. Nerves may carry signals more slowly or less precisely. Signals from the eyes and inner ears can be disturbed [27]. Reduced feeling in the feet is a known risk factor for falls [24]. Weak muscles and tiredness add to this.

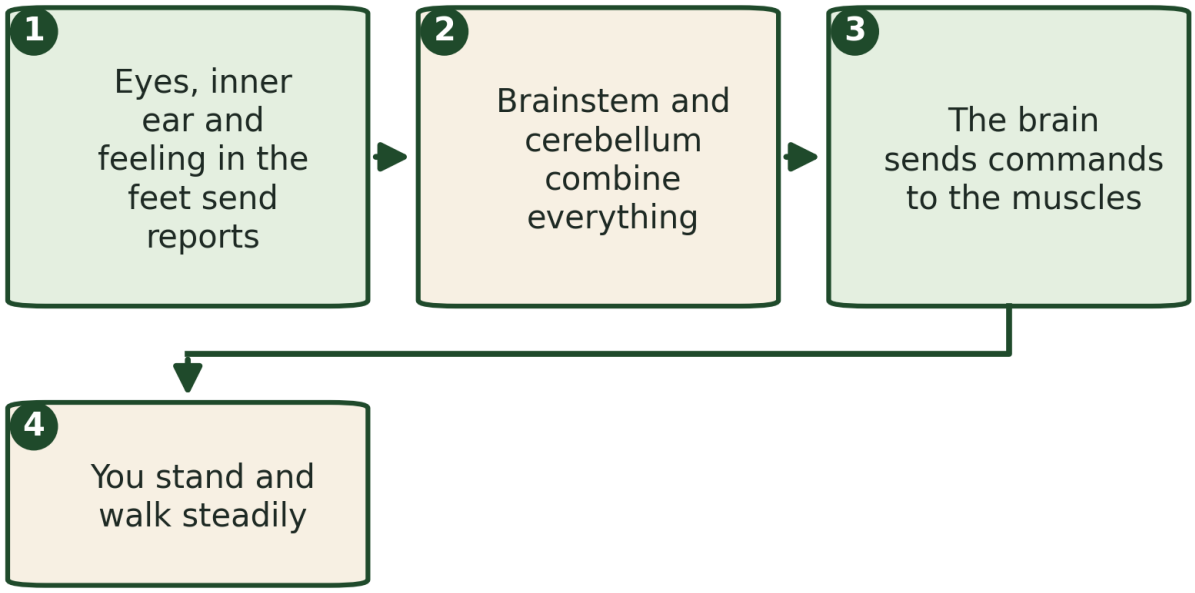


Figure 1: How your balance comes about (simplified)
Source: own simplified scheme; senses after MS Australia [27] and Austrian Red Cross [24]

REMEMBER

> Balance is not a single muscle you can train. It is the interplay of many parts. That is why causes can differ from person to person.

What the German guideline says about unsteady walking

The German MS guideline describes ataxic symptoms. These are unsteadiness when standing and walking, shaky aiming movements and tremor during purposeful movement. Over the course of MS they occur in up to 80 percent of people [1].

How strong they are varies. Effort, tension and the form of the day all play a part [1]. This is why one day goes well and the next does not.

What this means for you

- Ups and downs are known in MS. They are not a personal failure [1].
- Watch when you feel better and when worse. The diary in Chapter 4 helps.
- Plan demanding walks for the times when you are fit.
- Ask for help on bad days. The Austrian Red Cross advises accepting that not every day is equally good [24].