

# Policy Statement

## Integrated Care Must Become the Standard in Multiple Sclerosis

*For launch at the 31st Annual RiMS Conference, Prague, Czech Republic, 11-13 June 2026*

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**RiMS calls for integrated care to become the usual way multiple sclerosis care is organised across Europe. People living with MS need support that looks at the whole person, not separate services working in isolation. Medication, rehabilitation, support for symptoms, mental well-being, healthy lifestyle advice and participation in daily life should be brought together in one clear care plan, shaped around each person's needs and goals.**

Medication, rehabilitation and lifestyle support should work together. Medication can help manage MS, while rehabilitation helps people keep or improve people's abilities, independence and quality of life. Support with physical activity, fatigue, nutrition, sleep, mental well-being and self-management can help people live better. These forms of care should not be seen as separate or optional. They are all important aspects of good MS care.

RiMS urges healthcare professionals, policymakers, healthcare organisations, funders and MS organisations to remove the barriers that keep these forms of support apart. People with MS should be able to reach the right professionals at the right time, including rehabilitation and self-management support early in their care journey. Services in hospitals, the community and primary care should communicate and work together more effectively.

Care should be built around the needs, preferences and goals of people living with MS. Neurologists, nurses, rehabilitation professionals, psychologists, social workers, general practitioners, primary care providers and other healthcare professionals should work together with people with MS and their families or caregivers. This partnership should help people make informed choices, stay independent where possible and take part in daily life.

By launching this statement at the 31st Annual RiMS Conference in Prague, Czech Republic, from 11 to 13 June 2026, RiMS confirms its commitment to care that not only treats MS disease and symptoms, but people with MS holistically. RiMS calls on health systems across Europe and worldwide to make integrated care a shared priority and to ensure that every person living with MS can access joined-up support that helps them not only to live longer, but to live better.

**Media note: This statement may be quoted in full or in part with attribution to RiMS.**

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# Clinical Case Example: Integrated Care Pathway in MS

*A fictional case to accompany the RiMS policy statement on integrated care*



*Integrated care brings treatment, rehabilitation and lifestyle support together around the person living with MS.*

## Sofia's care journey

Sofia, 34, has recently been diagnosed with relapsing multiple sclerosis (MS). She is experiencing fatigue, mild walking difficulties, uncertainty about work, and anxiety about what the diagnosis means for her future. At her first appointments, the neurologist discusses treatment options to reduce disease activity, while the MS nurse helps Sofia understand the diagnosis, answers questions, and navigate the next steps in care. Her general practitioner is informed early, so that follow-up in the community is aligned with the hospital team and Sofia does not feel she has to coordinate everything herself.

As part of an integrated care pathway, Sofia is referred not only for drug treatment, but also for rehabilitation and lifestyle support. A physiotherapist assesses her walking, balance and energy levels, and develops a safe physical activity plan. An occupational therapist helps her manage fatigue at work and in daily life. A psychologist supports her in coping with uncertainty and anxiety. Together with the MS nurse, Sofia discusses sleep, stress, nutrition, physical activity and self-management strategies. Her partner is invited to join part of the conversation, so they can better understand how to support her without taking away her independence.

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Sofia also uses a simple digital care app that connects her to the pathway between appointments. The app helps her keep track of fatigue, walking difficulties, mood, sleep, physical activity and questions she wants to raise with the care team. It also gives her trusted information, reminders for appointments and rehabilitation exercises, and a shared overview of her personal goals. With Sofia's consent, relevant updates can be viewed by the MS nurse, rehabilitation team and general practitioner, helping them notice changes earlier and respond in a coordinated way. Sofia is also offered the opportunity to donate her usual care data for research purposes and is also informed of research projects she may be eligible to participate, should she wish to.

Over time, Sofia's care is reviewed regularly by the multidisciplinary team. When her fatigue increases, the team does not look at this as a single medical problem, but considers treatment, rehabilitation, work demands, sleep, mood and lifestyle together. Adjustments are made to her care plan, including changes to her exercise programme, workplace adaptations, psychological support and follow-up with her general practitioner. This integrated approach helps Sofia remain active, informed and involved in decisions about her care. It shows how drug treatment, rehabilitation, lifestyle support and digital tools can work together to help a person with MS live better, not only manage the disease.

### **Key message**

Integrated care means that Sofia is not asked to manage separate and disconnected services. Instead, her treatment, rehabilitation, lifestyle support, digital follow-up and community care are coordinated around her needs, goals and daily life.