



pseudobulbar affect

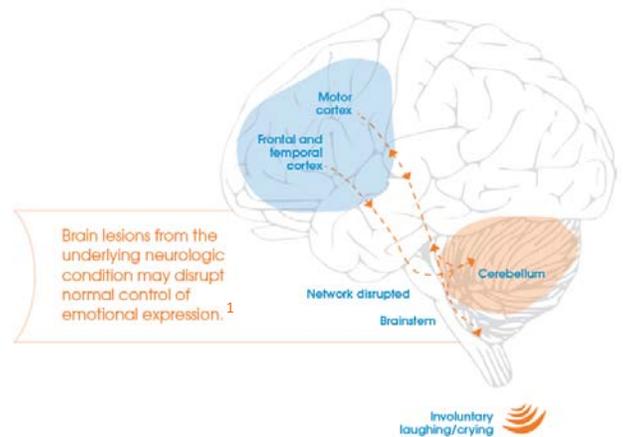
What is pseudobulbar affect (PBA)?

PBA is a distressing condition marked by sudden, involuntary episodes of crying and/or laughing. It occurs when certain neurologic conditions or injuries damage the areas of the brain that control normal expression of emotion. This damage can disrupt brain signaling, causing a 'short circuit' and triggering episodes of involuntary crying or laughing.

What does a PBA episode look and feel like?

PBA episodes of laughing and/or crying may:

- Occur several times a day and last from seconds to minutes
- Be exaggerated or incongruent to a patient's inner emotional state
- Occur spontaneously, often with no clear trigger



PBA is more common than you think.

PBA is a prevalent yet under-recognized and undertreated condition. Nearly two million Americans with underlying neurologic conditions or brain injuries may suffer from PBA. These neurologic conditions include Alzheimer's disease and other dementias, stroke, traumatic brain injury (TBI), Parkinson's disease, Multiple sclerosis (MS), or Lou Gehrig's disease, also called Amyotrophic Lateral Sclerosis (ALS).

PBA is not depression.

PBA is frequently mistaken for depression, but PBA is actually a neurologic condition. Sometimes PBA episodes can look like symptoms of depression. However, unlike depression PBA episodes are sudden, unpredictable and may not reflect how a person truly feels.

Diagnosis

Patients and caregivers may be unaware that PBA is a distinct, treatable condition, so they may not raise the subject with their physicians. Communication with a health care professional is important for proper diagnosis. There are tools available for patients or caregivers to assist them in talking to their doctor, such as the PBA episode diary and PBA assessment.

To learn more about PBA, visit www.PBAinfo.org and follow @PBAinfo on Twitter.

¹ Miller A, Pratt H, Schiffer RB. Pseudobulbar affect: the spectrum of clinical presentations, etiologies, and treatments. Expert Rev. Neurother. 11(7), 1080(2011)

Do I have PBA?

Being or taking care of someone who is struggling with complex rehabilitation after a traumatic brain injury (TBI) or stroke, or fighting to maintain independence while living with Amyotrophic Lateral Sclerosis (ALS), Alzheimer's Disease or Dementia, Multiple Sclerosis (MS), or Parkinson's Disease is challenging and sometimes tremendously difficult. Too difficult to also contend with the embarrassment and unpredictability of experiencing frequent, involuntary outbursts of crying or laughing that may inhibit social interaction and have a negative impact on daily activities. Those experiencing these episodes may avoid community interaction; social activities or group therapies which can be integral to gaining or maintaining function after an acquired brain injury or while fighting a chronic neurologic condition. Many with uncontrollable outbursts of crying or laughing may ask, am I losing my mind? The answer may be that you could be experiencing the symptoms of Pseudobulbar Affect, or PBA.

The Science of PBA

One of the jobs of the brain is to discern how we feel in the moment. That information is then sent to the brainstem. The brainstem then sends signals to the face and other parts of the body that show emotion. PBA is believed to be the result of a disruption of these signals. When people have certain neurologic conditions or brain injuries, it can cause damage in the brain tissue that, in turn, creates a disconnection between the parts of the brain that express emotion and those that control emotion. PBA is the result. If you break the term down literally, "pseudo" means false, "bulbar" refers to the brainstem and "affect," describes how the body shows mood or emotion.

If you are experiencing laughing and or crying that don't seem to match how you are feeling, you may have PBA. PBA episodes are typically described in two key ways:

1. Crying or laughing episodes that are inappropriate to the situation in which they occur. Sometimes these are spontaneous crying or laughing eruptions that don't reflect the way a person is actually feeling.
2. If a crying or laughing episode is appropriate for a given situation, it may become exaggerated. For instance, the episode may be more intense or last longer than the situation calls for.

Though many have never heard of PBA, nearly two million Americans with certain neurologic conditions or brain injuries are estimated to suffer from these uncontrollable outbursts of crying or laughing.

What Should I do if I am Experiencing This?

Talk to your doctor. Doctors rely heavily on what patients and their caregivers tell them about their episodes. Today, PBA is treatable, but before discussing treatment options, your doctor must be able to correctly diagnose your symptoms. One way to be prepared for your next doctor's visit is to ask yourself the following questions about your crying or laughing episodes and describe your answers to your doctor:

- Are my emotions sometimes exaggerated or inappropriate?
- Do my episodes actually reflect what I'm feeling inside?
- Have I avoided spending time with my family or friends because of my unpredictable outbursts?
- Could my crying episodes be mistaken for depression?

Once you've discussed your symptoms with your doctor, you can develop a treatment plan together that can help you manage your PBA outbursts. For more information, contact (name of patient group contact) at (contact information), or visit www.PBAinfo.org.