Extensive neurological examination (blood pressure, prostate volume, brain MRI).

First symptoms can be general

or non-specific and may

not be recognized by GP.



Diagnosis

MSA with Parkinson (slowness, tremor) or MSA with Cerebellar (balance, speech).



Only symptom treating (breathing, incontinence, psychological support, palliative care)

Treatment



Monitoring

Monitored by expert centres with multidisciplinary teams.







Identify and monitor progression of symptoms. Integration with appropriate services.



country to country.

for patients and families.

MRI

MSA

O₂

PD

REM

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Magnetic Resonance Imaging

Multiple System Atrophy

Parkinson's Disease

Rapid Eye Movement

Oxygen

Please note that specific terms (e.g. home care services, general

physician, physiotherapy) do not include the same services in all

EU countries and might differ from

Patient advocacy groups can often provide support and resources

Updated in July 2025.



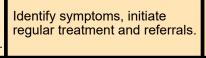


MSA can mimic other conditions such as PD and ataxia. It can take time to diagnose MSA.

Be aware of: dangers of

serious falls, respiratory

symptoms, malnutrition.

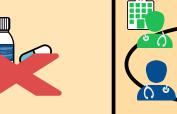




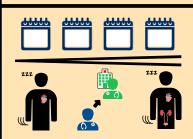
Need for research to find a cure.



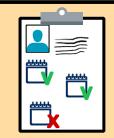
Holistic care includes home care aspects and emotional support for patients and carers.



Observation for "red flags". Greater awareness on MSA, its symptoms, psychological and emotional needs of patients.



Multi-disciplinary cooperation on developing new therapies and care pathways.



Person with MSA has a care plan that includes wishes for future care and interventions.



for rare or low prevalence complex diseases

Network Neurological Diseases (FRN-RND)





Clinic

Disease

Goals