

## Uncontrollable Laughing or Crying - Emotional Lability

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### Introduction

MSA can change parts of the brain that regulate or control emotional behaviour and feelings.

Emotional Lability refers to quick, often exaggerated changes in mood, where strong emotions or feelings (uncontrollable laughing or crying, or heightened irritability or temper) occur. These strong emotions are sometimes expressed in a way that is greater than the person's actual emotions.

### What is Emotional Lability?

With Emotional Lability, emotional reactions may be appropriate in the situation, but the behaviour or expression may be stronger, louder, or last longer than would be usual for that person. For example, a person may be genuinely happy but once the laughter has started they may be unable to stop or regulate the behaviour. This could include laughing too loudly, too much, or for too long.

An individual living with MSA may also show extreme but genuine emotional responses, including sadness and grief, despair, frustration and irritability, anger, anxiety and depression, and even joy, happiness, and pleasure. These may be appropriate and normal emotional responses.

### What causes Emotional Lability?

Emotional Lability occurs because of damage to parts of the brain that control:

- Awareness of emotions (ours and others)
- Ability to control how emotions are expressed – so ability to inhibit or stop emotions coming out
- Stronger emotional responses.

When a person is emotionally labile, emotions can be out of proportion to the situation or environment the person is in. For example, a person may cry even when they are not unhappy. They may cry in response to strong emotions or feelings, or it may happen 'out of the blue' without warning.

A person may have little control over the expression of these strong emotions, and they may not be connected to any specific event or person.

An individual may also lose emotional awareness and sensitivity to their own and other's emotions. Therefore, their capacity to control their emotional behaviour may also be reduced.

They may overreact to people or events around them, conversations about particular topics, sad or funny films or stories. Weaker emotional control and lower frustration tolerance, particularly with fatigue and stress, can also result in more extreme changes in emotional responses.

The person may have less control over their emotions in some situations such as, listening to music, attending a quiet church, in the library etc.

These behaviours can be confusing, embarrassing and difficult to understand for the person with MSA and for people around them.

## **Coping with Emotional Lability**

### **Become aware of triggers:**

Be aware of triggers for Emotional Lability and try to avoid these when possible. Triggers can include:

- excessive fatigue or tiredness
- stress, worry or anxiety
- high stimulation (too demanding, too noisy, too many people)
- strong emotions or demands from others
- very sad or funny situations (such as jokes, films, certain stories, or books)
- discussing certain topics e.g. driving, loss of job, relationships, planning future care etc
- speaking on the telephone or in front of a group or where a person feels under pressure.

### **Have a break:**

Have a short break away from the situation so the person can regain control of emotions and to give the opportunity for emotions to settle.

Sometimes a break of a few minutes or a longer period is enough to regain control of emotions – moving to a different room or doing a different activity can all help to cope with these strong emotions.

### **Ignore the behaviour:**

Carers, family members and friends should try to ignore the Emotional Lability as much as is possible. Try to get others to ignore it too and continue with the conversation or task.

Focussing on the lability or giving the person too much attention when it is happening can reinforce and increase the problem. It is important that other people do not laugh too, as this will also reinforce and increase the behaviour.

### **Change the topic or task:**

Changing the topic or activity (redirection and distraction) can reduce stimulation or stress - particularly if the topic was a trigger.

Try to distract or divert the person's attention by engaging them in a different activity or task.

### **Provide information and education:**

Uncontrolled crying or laughing can be upsetting, frightening or confusing for other people if they do not understand.

It may be helpful to provide simple explanations or information to other people about the Emotional Lability, for example, "I cry a lot since I was diagnosed with MSA ... don't worry about it" or "Sometimes when I am nervous, I get the giggles".

Let people know what they can do, for example "Just ignore me and it will stop".

### **Plan ahead:**

When there is severe Emotional Lability, one-to-one, brief, and fun activities in a quiet environment will be better.

- Try to avoid being in stressful situations or environments e.g., noisy, busy, high levels of activity or that are too demanding.
- Plan activities that are within the person with MSA's ability.
- Plan more demanding activities or appointments after rests or when the person has the most energy.
- Plan for rests between activities.

### **Use cognitive techniques:**

Some simple strategies can assist in managing Emotional Lability:

- Relaxation and breathing exercises to reduce tension and stress
- Using distractions – thinking of something else, imagining a peaceful image or picture, counting
- Doing an activity- going for a walk if able, having a cold drink
- Cognitive and behavioural strategies such as thought stopping, could be discussed with a Psychologist.

### **Medication:**

Antidepressant medication can be helpful for some people with Emotional Lability to help manage their labile mood. Talk to a Specialist or GP who can also check for depression and support with this. It is ok to establish what the person is actually feeling by asking them.

### **Counselling and support**

A person living with MSA has had many losses and changes to cope with - loss of work, ability to drive, independence, changes in relationships or finances, changes in the quality of life etc. All these changes can happen quite suddenly with little chance to prepare or get ready.

Feelings of sadness, grief, anger, frustration, disappointment or depression after a diagnosis are common and may be very difficult to cope with.

If there are emotional adjustment and coping issues, referral to a Psychologist or Psychiatrist may be helpful. Families (parents, siblings, children), friends or carers may also benefit from support and care to help them understand and to cope with the changes.

## The Trust's contact details

We have MSA Health Care Specialists that support people affected by MSA in the UK and Ireland. If you would like to find the MSA Health Care Specialist for your area, contact us on the details below or use the interactive map here – <https://www.msatrust.org.uk/support-for-you/hcps/>.

MSA Trust, 51 St Olav's Court, Lower Road, London SE16 2XB

T: 0333 323 4591

E: [support@msatrust.org.uk](mailto:support@msatrust.org.uk) |

W: [www.msatrust.org.uk](http://www.msatrust.org.uk)

**If you have any questions about anything you have read in this factsheet, then please contact your MSA Health Care Specialist**

With Thanks to ABIOS for permission to adapt their information The State of Queensland (Queensland Health) Acquired Brain Injury Outreach Service PO Box 6053 Buranda 4102

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