

Multiple Sclerosis Journal – Pronk *et al.*, Supplementary data - Questionnaire

Multiple Sclerosis Temperature Sensitivity Scale (MSTSS-15)

For each statement, please circle the **one** number that **best describes your situation**.

Please answer **all** questions, even if some statements look similar or seem not to be applicable to your situation.

<u>In an environment with a high temperature (hot summer or warm country) to what extent ...</u>	Not at all	A little	Moderately	Quite a bit	Extremely
1. are you are more bothered by fatigue?	1	2	3	4	5
2. is your vision diminished?	1	2	3	4	5
3. is your walking ability reduced because of loss of strength in your legs?	1	2	3	4	5
<u>During or immediately after a (high) fever, to what extent ...</u>	Not at all or hardly		Moderately or quite a bit	Extremely	
4. are you are more bothered by fatigue?	1		2	3	
5. is your vision diminished?	1		2	3	
6. is your walking ability reduced because of loss of strength in your legs?	1		2	3	
<u>Immediately after a hot bath, a hot shower or the sauna, to what extent ...</u>	Not at all or hardly		Moderately or quite a bit	Extremely	
7. are you are more bothered by fatigue?	1		2	3	
8. is your walking ability reduced because of loss of strength in your legs?	1		2	3	
<u>To what extent is your vision diminished</u>	Not at all or hardly		Moderately or quite a bit	Extremely	
9. immediately after a hot bath, a hot shower or the sauna	1		2	3	
10. after drinking hot drinks?	1		2	3	
11. after (intensive) exercises?	1		2	3	
<u>To what extent are you trying to avoid the next issues because of your MS:</u>	Not at all		Sometimes	Most of the times or always	
12. sitting in the open sun?	1		2	3	
13. holiday and/or travelling in a warm country?	1		2	3	
14. Do you ever take a cold shower to improve your functioning?	Never or seldom		Regularly		
	1		2		
15. Did you install an air-conditioning system at home because of your MS?	No		Yes		
	1		2		

Please check that you have circled **ONE** number for **EACH** question.