

Managing ME/CFS/SEID: Learning to Pace

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Finding a balance...

- Too much exertion triggers illness or relapse
- Lying around causes stiffness, soreness, and deconditioning

GOAL: Stay active but not too active!

Lack of activity leads to deconditioning...



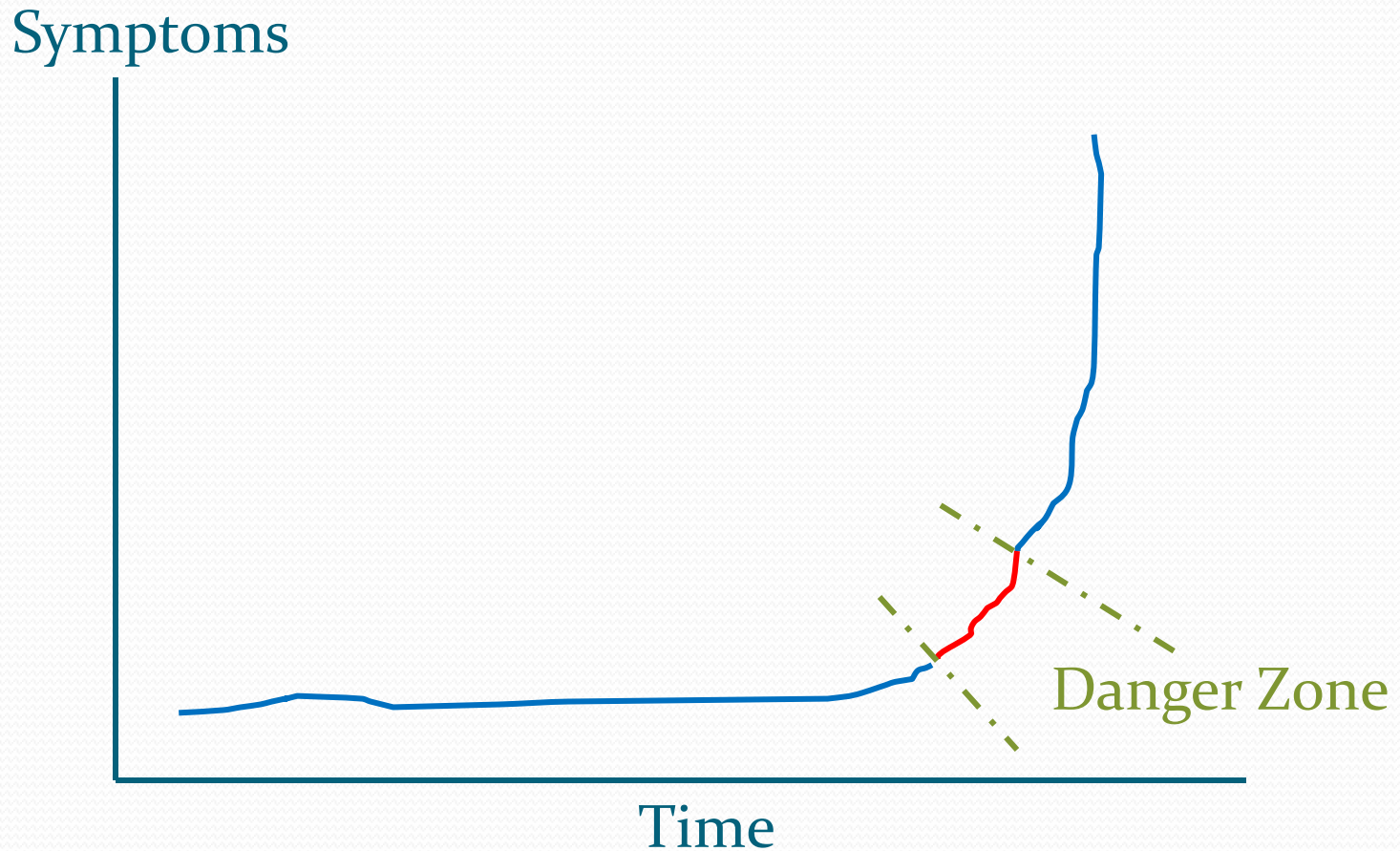
- Weakness / stiffness and soreness in muscles and joints
- Elevated heart rate / heart racing with minimal activity
- Postural hypotension / dizziness or faintness on sitting up or standing

Exercise Testing



- “Brick wall” occurs at Anaerobic Threshold
- AT frequently occurs within 3-5 minutes of exertion

Symptoms



Pedometer

- Establish your average steps per day
 - Try not to exceed this more than 500 steps
- Aim for at least 1000 steps per day ...
- But less than 5000 steps per day, typically



Three Ways to Limit Activity

- Interval activity
- Stop before you reach your “danger zone”
- Avoid exceeding your weekly average of steps-per-day

Objections

“I felt good, so I decided to catch up on what I couldn’t accomplish the day before.”

Over time it takes less and less to overexert and longer to recover.

“I push until I feel symptoms.”

By the time you feel symptoms you are already in “the danger zone” and risk a flare or relapse.

“Mornings are good for me, so I do all my tasks in the morning and rest all afternoon.”

But wearing yourself out in the morning just perpetuates the push-crash cycle.

“I would never get anything accomplished using brief intervals and then resting all the time!”

PWCs who practice interval activity get *more done*!

“Sometimes I just *have to* push myself beyond limits, even though I pay a price for it.”

Why would you sacrifice your health and wellbeing just to get something done?

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- Bruce Campbell, PhD
 - Founder, CFIDS & FM Self-Help Program
 - www.cfidsselfhelp.org and www.TreatCFSFM.org
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