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
Rest Before the Onset of Symptoms
(before the Danger Zone)
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

- Drs. Charles Lapp and Laura Black