

MSAA Podcast: A Little is a Lot When Exercising with MS Episode 5

Host: Andrea Griffin
With special guest: Brian M. Hutchinson, PTA

Andrea Griffin:

Hello, and welcome to the Multiple Sclerosis Association of America's podcast, "A Little is a Lot When Exercising with MS." I'm Andrea Griffin, Vice President of Communications and Marketing for MSAA, and your host for today's program. Today's program is part of MSAA's 2020 MS Awareness Month, *The Mind, Body, and MS Connection* campaign, which has been made possible by the generous support of Biogen, Bristol-Myers Squibb, and Genentech. I'm honored to welcome our guest presenter, physical therapist Brian Hutchinson to the program, who will be sharing with us his insights on the importance of exercise and physical activity in managing MS. Brian is an MS-Certified Specialist and the Director of the Multiple Sclerosis Achievement Center in Sacramento, California. Brian, thank you so much for being here and giving us your time today.

Brian Hutchinson:

It's a pleasure, Andrea. Look forward to it.

Andrea Griffin:

Wonderful. So, our topic for MS Awareness Month is the mind-body connection, which looks at how both physical wellness and emotional wellness are really integrated and so important in managing MS. Brian, can you talk a little bit more about this?

Brian Hutchinson:

Sure. I think we often know that the mind and body are very closely connected. We think about it in terms of our physical activity. But also, we know when we're moving, we feel better. And when we feel better, we move more. So, there is definitely a connection. Wellness, or what we consider wellness in terms of the physical and emotional side of things, and how that fits into the overall management of MS is becoming more and more well-understood. We know that disease-modifying therapies are really important in terms of managing the disease, as well as symptomatic medications and symptomatic therapies and the like. But we also have learned a lot about how these wellness strategies, whether it be diet, exercise, the ability to get proper sleep, or cognitive stimulation, all of those kinds of things are extremely important in the well-being of the person. And the exciting component from a research standpoint is we're understanding that this may also have an impact on how well people do with multiple sclerosis.

Andrea Griffin:

Sure. That makes a lot of sense. It's certainly important for people to be physically active and non-sedentary as much as possible with MS. With that being said, can you help us understand the differences between physical activity and exercise?

Brian Hutchinson:

Sure. When we talk about it in a very simplistic fashion, physical activity is any body movement. So, if we are getting up and being mobile, and if for whatever reason we are primarily in a wheelchair, still being able to move, push the chair, you know, go to a standing position, if possible, those kinds of things, all of those types of movements would be considered physical activity.

Exercise is merely a structured form of physical activity. So, something that takes place in a planned way and often is something that is hopefully well-rounded, that includes endurance, strength, flexibility, and the like. Back in the day, if you will, we used to think that physical activity was not something that counted, if you will. So, we had to have a very structured exercise program. We are learning that movement is the most important component in that adding it all up throughout the day, whether that be your activities of daily living, maybe doing lawn work, all of those things are movement oriented and certainly are important in the overall well-being of the person. So, the physical activity part, whether it be counting steps or counting movement in another way is probably as important as looking at how you structure your exercise program. The benefit of a structured exercise program is it is something that you're able to monitor, track and identify whether or not you're reaching those specific goals.

Andrea Griffin:

Great. Thank you for explaining the differences between those two, physical activity and exercise. And that's a good segway to our next question. As you know, the title of our program today is "A Little is a Lot when Exercising with MS". Can you explain that a little bit further?

Brian Hutchinson:

Yes, I think it's a great topic and a great phrase when we talk about MS. Because what we often look at, particularly when someone is starting with an exercise program, is they will often overdo. And what that can do, when we go back to that mind-body or that emotional and physical connection, is that can become demotivating. So, finding ways in which we can do just a little bit of that activity, be successful with it, and then increase from there, particularly when starting an exercise program, is a great way of approaching it. So, look at ways in which you can do a little bit of activity, gain the benefits, and then start to increase from there.

That's true with physical activity as well as exercise. With MS, we know that there are a number of different factors that can limit or decrease one's ability to exercise. Those could be fatigue, they could be oriented to weakness, balance problems, it could be heat sensitivity. All of those things can be things that one has to manage their exercise or physical activity around in order to be successful. So, starting out with a little bit and then increasing from there is a great strategy in order to be able to improve and increase your physical activity levels. Now, there's a couple of different ways you can go about that, and we may talk about that here in a minute. So, we'll get to that here shortly.

Andrea Griffin:

That's a great segue, Brian. Let's talk a little bit about how someone would start an exercise program. Can you take us through those steps?

Brian Hutchinson:

Well, I think the first thing that we need to make sure of is that there's not something that is going to prevent an individual from participating in an exercise or physical activity program. And by that, I mean, we want to look at safety first, but we also need to understand that there are comorbidities or co-existing conditions that can exist, and that may change the way that we recommend specific exercises. And by that, I mean whether someone has increased or high blood pressure, they may have cardiovascular conditions, they may have pulmonary conditions, asthma, or other coexisting types of conditions that we need to plan around. So, one should really make sure that they are safe to exercise by speaking with their doctor and having everything in place. It is clear that exercise is important for all of those conditions, but it may be how we recommend and carry through with that exercise dependent upon the co-morbidities or co-existing conditions that exist.

And then we go back to what we were just talking about, starting slow. So, before that even, I always recommend that people try to find something that they enjoy, and if they're an individual that says, well, I hate exercise, then find something that you'll tolerate.

Andrea Griffin:

Yeah.

Brian Hutchinson:

So, ways in which you can perhaps increase the ability to enjoy that is group activities. There is a mountain of research out there that individuals who participate in group activities are often more successful because of accountability, because they can participate with other people, but you need to know what works best for you. Some people do like to exercise individually, at least to start, but starting slow and going from there. And by slow, I mean not necessarily long periods of time. We have a couple of rules that we utilize as far as exercise, and that's: if you don't feel as good two hours after you've done your exercise, or better, you've probably done too much. So, just a little tip to think about how you can look at it. Unfortunately, it's retrospective, but you can then make adjustments the next time. So, I think that that's an important one.

In addition, we also recommend that people try to start with their exercise program and see how they're feeling into it. So many times, all of us, whether diagnosed with MS or not, have come home from a day at work and said, "Well, you know, it would really be good if I went out and walk the dog" or "I went for my exercise session or did whatever, but I just don't feel like it". What I recommend that people do is go through the process, get dressed for the activity that you're going to do, and go out and start it. Often what people will find is that they feel better. That cloud lifts a little bit. That fatigue goes away. And if they don't, then often what we will recommend is that, you know, go ahead and stop that activity and try it the next day because, you know, there is MS fatigue and we know that it's real and sometimes we can't power through that. But often the fatigue that we feel either getting up in the morning or later in the afternoon or whatever it happens to be is due to that emotional, maybe even cognitive, fatigue, and activity can be very helpful for managing that piece. So, looking at ways in which you can do that and then we can talk about some other strategies as you get into your exercise program. But when you start, make sure that you're clear with your physician, and then if you need some assistance from other professionals as to where to start, that can be helpful also.

Andrea Griffin:

Great. Well, you've made some excellent points and certainly, your point about finding the right activity, something that you enjoy, is crucial. And, you know, maybe that activity is part of a larger group that you were referring to. So, a lot of great points that you made there. And you touched on this, you know, we've all been there, myself included, where we start that exercise program and then it stops, and you've talked about this. Is there anything else you'd like to add around helping folks maintain an exercise program?

Brian Hutchinson:

Well, I think the one thing specific to MS that I didn't particularly allude to is that you know, sometimes the challenge or the frustration or the lack of motivation may come from the symptoms that you're experiencing, whether it be heat sensitivity or fatigue or weakness. You know, it's not a lack of motivation, it's the ability of how to get past some of those kinds of things. You and I sometimes get stuck in that rut and can't get to the gym, and we have all kinds of excuses why. That happens with MS, but also, we know that there can be other components of the disease that get in the way.

Andrea Griffin:

Absolutely.

Brian Hutchinson:

So, if you need some assistance and you need some ways in which you can manage your program and modify it a little bit, that's certainly where you can turn to some of your rehab professionals, some people with experience in exercise. If right leg weakness, for example, is the one that is getting in the way of you doing the activities, you may need to figure out ways to modify it. Or if balance is an issue. So, you know, there are ways to participate in the activities and gain the benefits. It may require some additional modification, and working with your healthcare professionals on ways in which you can do that to be successful, is an important step that needs to be considered.

Andrea Griffin:

Absolutely. So, what are some ways that people can exercise at home if they're unable to afford or travel to a class?

Brian Hutchinson:

Well, there's lots of household items that can certainly allow you to do different activities at home. So, you can use regular jars or cans of vegetables, those kinds of things as your weight or resistance. You can obviously participate with some instruction prior to in some flexibility types of activities. Balance types of activities can also be done at home given the proper instruction and safety parameters, you know, making sure that your external environment is good for that. And then, there are ways in which you can participate in more endurance types of activities, whether that be getting out and going for a walk or, you know, pushing your wheelchair if you're primarily using a wheelchair, but utilizing different types of activities that might be beneficial for you to participate at home.

I would say that instruction is an important component in order to make sure that you are safe and that you have all of the different external activities around, or external support systems around, in order to be able to participate. There are DVDs, there are YouTube videos, there are online programs. What I would say to you is that you can search that, it doesn't necessarily

have to be specific to MS, but that may be a good place to start because often those instructors or individuals are taking into consideration some of those modifications that may need to take place, such as kind of, active rest periods. So, when you're doing an activity, you may do something that is a little bit more exertional for a short period of time. And then have some active periods where you do flexibility or stretching. So, you're still exercising, but you're allowing some recovery that may be leading to, or the activity may be leading to some localized fatigue. And you can manage some of those rest periods through more active rest like flexibility or maybe even some strengthening types of activities.

So, there's a lot of ways in which you can do that, if you can involve, perhaps, members of your family, so you get that group accountability, that can be helpful. And then for those who require a little bit more assistance, again, I would refer you back to some of your rehab professionals to perhaps instruct you in some partner stretching types of opportunities that might be helpful, ways in which you can assist with strength training by either using those household items or resistive bands, all of those kinds of things that are relatively inexpensive, accessible, and available for you to do at home.

Andrea Griffin:

Those are great tips. Thank you so much, Brian. So, we've been talking a lot about exercise in MS. However, there are also times when people need or can benefit from physical therapy or occupational therapy. Can you elaborate more about these areas?

Brian Hutchinson:

Well, yes, absolutely. I just referred to one of those potential opportunities in that if you need a place, you're not sure exactly where to start with your exercise program, and particularly if you're looking at starting something at home, then I would certainly recommend looking at ways in which you can engage a physical or occupational therapist with some experience in MS to help guide you through that exercise program. But by and large, when we start talking about rehabilitation, and that's what we're talking about with physical therapy and occupational therapy, there needs to be very specific goals or goal-oriented types of activities. And that's not to say that your exercise program isn't towards a specific goal, but often we are looking at functional mobility types of goals.

So, when you have very specific functional mobility goals — "I want to be able to transfer better, I want to be able to walk better, I want to be able to get around in the community better," all of those are much more oriented towards functional mobility. And you should really seek out through a discussion with your doctor, a rehabilitation therapist, whether it be a physical or occupational therapist, in order to be able to start working you towards those goals and hopefully providing you with some exercises that you can follow through with at home or out at a gym, if that works for you, in order to be able to maintain the functional mobility that you hopefully will gain and/or maintain as part of your rehabilitation program. So, it's really more around functional mobility and speaking to your physician because it does tend to be geographical as to who handles which different aspects. By and large, occupational therapists are going to be working more with activities of daily living. So, if you need to find ways in which you can better maintain your energy in the kitchen or with dressing, grooming, those kinds of things, that often is going to fall into the occupational therapy side of things.

Physical therapy will be more around other kinds of functional mobility, like ambulation. It may have more to do with how you are working with transfers, but occupational therapists work with transfers also, and in some of these other things, like standing balance, that physical therapist... So, it really depends upon the expertise and the individuals that you're dealing with in your

particular area. But hopefully, if you have very specific goals, you have someone that you can go to to help troubleshoot, provide adaptations, and look at ways in which you can improve in those areas. And if improvement is not necessarily your goal, then at least looking at ways in which you can maintain.

Andrea Griffin:

Great. And thank you for helping to explain the difference between physical therapy and occupational therapy for our listeners.

Brian Hutchinson:

Yeah. It can be fuzzy. But definitely talk to your doctors and make sure that you go in with an understanding of what your goals are. And hopefully if for whatever reason, that referral is to the "wrong", if you will, professional, they will be able to guide you to the right one.

Andrea Griffin:

Great, excellent tips and certainly having goals in mind is an absolutely great place to start. You've provided so much great information and helpful insights today, Brian, as we wrap up the program, what are some of the key takeaway messages you want to leave our listeners with today?

Brian Hutchinson:

Well, I think the first key message is, is exactly what this particular podcast is all about, is that people with multiple sclerosis can exercise and they can do it safely and they can gain the benefits of physical activity or exercise just like anyone else. And that may not sound groundbreaking to the listeners, but it wasn't that long ago when it was thought that exercise was something that was going to make people with MS worse, that it was going to increase exacerbations and the like. And we know now that that is not the case, that people can exercise safely. They may have some transient symptoms that they need to keep an eye on. There may be, we refer to the increase in fatigue that can occur in the short term. There can also be an increase in sensory symptoms or an increase in symptoms that you currently have. You just have to pay attention to that. So, it's important to look at ways in which you can exercise and participate in the activities that you enjoy.

The second key takeaway that we touched upon is that physical activity counts. So, if you enjoy doing things, whether it be getting out and playing golf or doing other kinds of activities, getting out and working in the garden, all of those things are activities that contribute to your overall well-being, both physically and emotionally. So, it's important to not pigeonhole yourself into the fact that, well, I don't belong to a gym or I'm not doing these different activities or I'm not doing an exercise program. The activities count. The exercise programs are good because we can focus them in on areas that hopefully will improve and allow you to do more of those fun activities. But the physical activities in and of themselves do count.

The one thing that we didn't touch upon a whole lot is looking at the adaptations. One of the adaptations that are really important as we start to approach the warmer times of year is looking at cooling because heat sensitivity is something that we do know can occur in people with MS. When we become physically active, we start to increase our core body temperature. And then you add in the ambient temperature which can be problematic also. Then that can increase the symptoms that someone has. So, looking at ways in which you cool while doing different activities or taking advantage of the cooler times of day to do your physical activity are really important also.

So then lastly, think about alternative types of activities that fit into exercise, whether it be yoga or Pilates or Tai Chi, or some of these other classes that have become more popular and active. A lot of them are modified for individuals who may have more mobility problems or more balance problems. Seek out within your community and utilize organizations like the MSAA as a resource to identify where there may be some of those types of programs available. So, it's important to get out there because not only is the physical activity good from an overall physical health standpoint but interacting with other people and being able to share can be very educational and supportive, also. So, looking at that not only physical but also the mental and social components. Get up, exercise, laugh, and have some fun.

Andrea Griffin:

Absolutely. Great advice. And those are excellent key takeaway messages, Brian. And thank you also for touching on the heat sensitivity that we know so many of our listeners experience. So, thank you for providing all of those terrific tips.

Brian Hutchinson:

You bet.

Andrea Griffin:

Great. Well, that concludes our podcast, "A Little is a Lot when Exercising with MS." On behalf of MSAA, I would like to thank Brian Hutchinson for his excellent presentation on this very important topic, Gradwell House Recording for hosting us today and producing the program, and our funding partners, Biogen, Bristol-Myers Squibb, and Genentech for supporting this podcast, as well as additional programs as part of our MS Awareness Month campaign. This podcast, along with additional information on multiple sclerosis can be found on our website at mymsaa.org. Once again, thank you for listening.