Diet and Exercise for MS: What is Hype? What is Right? What You Need to Know

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Presenters



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Learning Objectives:

Participants and Support Partners will:

- Strengthen abilities to distinguish between "what's hype" and "what's known" related to diet, exercise, and multiple sclerosis
- Lay groundwork to understand how diet and exercise may influence MS symptoms and overall health
- Considering current evidence-based recommendations & developing questions to ask to your team



Dr. Google Can Be Confusing...

- Science
 - Seek out ".gov" and ".org" websites
 - Explore peer-reviewed information
 - Use your healthcare team as a guide

- Pseudoscience
 - Beware of "cures"
 - Watch out for "all" and "absolute" words/phrases
 - Be cautious of testimonials



There is an ideal diet for MS



What's Known

- Many diets promoted to benefit people with MS but at this point,
 NO DIET has been proven to alter the course of Multiple
 Sclerosis.
- Do you have a comorbid health condition?
- Speak with your healthcare team prior to beginning dietary interventions.
- What changes are you considering and why?
- What are your expectations? Are they realistic?
- Can it become your forever "diet"?



"If I exercise *right*, I can stop my MS"



The Potential Role of Exercise & Physical Activity in Multiple Sclerosis







What's Known:

Functional Benefits











Lessen Disability & Enhance Quality of Life



Exercise and Physical Activity as a "Disease Modifying Treatment"

- Exercise and physical activity have been linked to reduced:
 - Relapse frequency
 - Mobility disability
 - Mobility progression
 - Lesion volume
- Exercise and physical activity can influence co-morbid health conditions that may worsen symptoms and hasten disease progression



Having MS means you have a "leaky gut"



What's Known

- "Leaky gut" is not a clinically recognized diagnosis
- While the gut (microbiome) is an exciting area of research, it is in the early stages.
- Research is underway but not yet conclusive
- What We Know:
 - Research suggests that the microbial contents of the gut (Microbiome) :
 - Can be altered by the diet
 - May affect the immune system
 - people with MS may be different than non-MS population
- What we DON'T Know (yet)
 - What makes a favorable and unfavorable microbiome?
 - What is the best approach to alter the microbiome?
- In other words, the news is exciting and promising BUT, there is still a lot more to learn.

"I have to do the same exercise, so I don't lose progress"



What's Known

- ALL movement counts!
 - Physical Activity versus Exercise
 - Physical Activity: ALL movement
 - Exercise: Flexibility, resistance training, balance training, aerobic exercise
- Exercise performance can fluctuate
 - Variety of exercise options can be helpful
- Schedule intermittent exercise throughout the day
- Prioritize exercise
- Have options and consider adaptations





Movement Prescription:

150 minutes of moderate intensity exercise/physical activity per week



Evidence-Based Exercise Ideas:

Flexibility:

- Daily
- 2–3 sets of each stretch, hold 30–60sec/stretch
- Modes: yoga, targeted stretching exercises

Resistance Training:

- 2–3x/week
- 1–3 sets for each exercise, 8–15 repetitions/set, 5–10 exercises
- Modes: weight machines, free weights, resistance bands, body weight

Balance/Coordination:

- 3-6x/week
- 20-60 minutes
- Interventions individualized for intensity/duration fall prevention goal!
- Modes: Pilates, dance, Tai Chi, postural stability, vestibular exercises



Evidence-Based Exercise Ideas

Aerobic:

- 2–3x/week
- 10–30minutes
- Moderate exercise intensity (40%–60% of maximum HR) OR 11–13 RPE (on a 20-point RPE)
- Modes: Arm bike, cycling, treadmill or overground walking, rowing, swimming

Advanced Aerobic:

- 5x/week
- Up to 40 minutes
- 70%-80% of maximum HR
- Approaching 15 RPE (on a 20-point RPE)

• HIIT:

- 1x/week
- 5, 30-90 second intervals
- 90%-100% maximum HR with equivalent rest
- Stair stepper



Food is medicine



"Let Food Be Thy Medicine, and Let Medicine Be They Food."

Hippocrates

c. 460 – c. 370 BC



The History of Food as Medicine

AD 1000 that root is heathen. Here, say this prayer.

AD 1940
That potion is snake oil.
Here, swallow this pill.

AD 2000 That antibiotic doesn't work. Here, eat this root.

2020 BC here, eat this root.

AD 1850
That prayer is superstition.
Here, drink this potion.

AD 1985
That pill is ineffective.
Here, take this antibiotic.



What's Known

- Medicine has advanced since the days of Hippocrates. And while environmental factors, diet, and living habits are all important contributors to our overall health, they do not take the place of medicine. And will not cure cancer. Or Multiple Sclerosis.
- "All Natural" supplements and herbal remedies are treated as medicine by our bodies.
 - Liver
 - Interactions
 - Not regulated
- Get your nutrients from food



Avoiding Hype Doesn't mean Avoiding Hope

- Continue to:
 - Be curious
 - Seek out the most accurate, up-to-date information and resources that will help you live your best life with MS
 - Find those health care providers, people, and organizations that support your efforts for a healthy life!
- Diet and exercise strategies are unique to each person just like your MS



"Find a place for the illness, but keep the illness in its place."

Gonzalez, Steinglass, & Reiss





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