

Can Do MS Podcast Resilience: Finding Your Strengths and Staying Positive Episode 30

Krista: Welcome back to the Can Do MS Podcast. We are happy that you have tuned in today. I would love to welcome our guests as well. A psychologist, Linda Trettin and person living with MS, Karla Ramirez. So big warm welcome to both of you and thank you for being here with us today, to share your story, and your insights.

Linda Trettin: Thank you so much for having me. I am Dr. Linda Trettin, I am a clinical neuropsychologist in California. I have been working with Can Do now I think about five or six years, time flies when you are having fun. I always enjoy the Can Do spirit which is very likeminded with my work with people living with MS, as well as Support Partners. I enjoy working with Support Partners as well. Over the course of working with people, I tend to do more neuropsychological evaluations and then some counseling with individuals living with MS or their support partners. Really looking at some of the cognitive challenges and changes in emotion like depression and anxiety that can be really prevalent in MS, these invisible symptoms that keep people stuck and so we are always trying to figure out, okay, how can we get them going in a direction that they really want to move, so being very practical-minded but also looking at the whole person. So I look forward to speaking with you today, Karla, just to talk a little bit more about psychologists tend to see, okay, what is wrong with us and what do we need to fix. So that positive psychology stances, well, what is right with us, and what are our strengths and our resilience that we bring to bear to challenging situations? When you think back now, when were you first diagnosed with MS?

Karla Ramirez: Well, first of all, thank you so much for having me. It is really great to be able to talk to you. You are so experienced with the whole MS world and I am super comfortable with you, so thank you. Okay. I was diagnosed in-- I remember the date exactly, April 12, 2016, so it is some four years and months. And it was difficult at the beginning trying to get a diagnosis. I remember it was probably like a year since I have had symptoms that I was not aware of them until I was diagnosed and I read about MS because I did not even know what it was. I mean, I have heard about it but I was not sure what it was.

Linda: Uh-huh.

Karla: First, I think I went to one of those emergency care clinics and they said to me that it could be a sinus infection because I had trouble with my eyes. They gave me a steroid shot

and I think that helped, maybe, because it got a little bit better but then it was worse and worse and worse and worse. I also had a sleep study done. It was probably a year I saw around four or five doctors and I remember one of them, he said, "Oh, everything resonates like it is MS." I was like, "Oh, he is crazy. No." Then I was like, "No, he probably does not know anything." I am sorry. So I was like, "No, that is it." I went to-- because we live in El Paso, so it is a border. My mom she has doctors who are friends of her, and one of them is a neuroscientist doctor. Sorry, I forget words. She took me with him and he did an MRI and he said that it was mostly MS and I was like, "Wow." So then I was super stressed at work because we had to do this whole conference, but we are such a small group of people and I was basically in charge of having a conference for two hundred and fifty people. I remember I wore a leg brace because I could not walk and I said I fell and that is why I was in a wheelchair but not really it was because I was not able to stand or anything and I remembered that when they talk to me, it was like a super slow turn and it took me a while to know where the person who was talking to me. Everybody was like, "Wow. What is wrong with you?" I was like, "I do not know." So yes, it was very scary at the beginning.

Linda: Yes. Looking back it can be hindsight is 20-20 but it is hard to know when these symptoms are first on the scene and it is very typical that people will go to multiple doctors or specialists trying to find out before they are diagnosed which can be difficult in and of itself, a very challenging time. It is great that you and your family advocated for yourself to get you another opinion. Sometimes we need that just to understand fully and with an MS specialist, it is always the best if you can try to get a neurologist that is an MS specialist. Looking back it sounds like your family was involved right away in what was going on for you, and I think that every culture views illness as well as wellness and the path to healing in different ways. So can you tell us a little bit about your culture and how your family has played a role in diagnosis and just how you been doing?

Karla: Of course. Well, let me go back to one instance where it was clear that my mom was like, okay, there is something wrong with you. We went to this convention, gardening convention and we were walking but I remember that I was already walking like this. I was like no, no, no. She walked for...

Linda: She is walking kind of out of balance, you...

Karla: Yes. Like, what do not see me?

Linda: Sometimes people will say, "Oh, my goodness. Is that person drunk?" or something about that.

Karla: Yes. I was like, what is wrong with me? It was super frustrating but I was like no, I need to have my poker face on saying that I was okay, but my mom cut it right away and then she is like, "Why are you walking behind me all the time?" Then we sat down for a little bit and I was like, I do not know what is wrong with me blah, blah, blah, and she was like, okay and I could see she was worried, like her concern. My sister was the one that was able to get me an

appointment with Mayo Clinic in Scottsdale. She was the one that-- because I could not even speak. I was like super, how do you say it like, I would talk that super slow when, yes.

Linda: Yes. Sometimes our processing speak can be impacted and just communicating our thoughts, it is hard.

Karla: Yes, it was real-- it was bad. Luckily she was able to find an appointment for me and we travel-- I could not even walk. I remember I was in a wheelchair like going on the airplane and everything. We were there for a week with multiple exams. I had a spinal tap, I was care about that and that is when they told me was multiple sclerosis. I have mixed feelings, but I was relieved that finally I was able to get the diagnosis and from there I could learn and see how I was able-- like I could move forward with my life.

Linda: I really follow what you are saying, it is a bind and in some ways we do not want to know but then when we are given a label it gives us a roadmap of hopefully a positive roadmap of okay now what can be done about my situation and brings clarity when you are feeling that unknown, it is just a bundle of nerves that people will experience a lot of time. Something important that you touched upon too is your family being involved advocate for you. It sounds like you took a stand and had your own voice but you know as human beings we all experience emotional and physical pain, and so there are times when we need for other people to step in and advocate for us, to communicate for us, to suggest things ultimately it is your decision to seek the medical care but that was really wonderful and loving from your mother and your sister. They connected you with resources, yes.

Karla: I must say that I am super grateful because I have a really strong support network with friends, family. I do not know for me personally. I do not know how I would have been able to move forward with this diagnosis if I did not have that and also it has been difficult because all my life since I was a baby, I would always say, "I cannot do it alone. I cannot do it alone." So it was difficult having to say like no I need help with this because I cannot do this. Getting my family and friends or somebody at work to help me, it was difficult for me to ask.

Linda: Uh-huh. What has helped do to kind of do you have any insights of what has helped you to become more comfortable with that that could be a journey, good days and bad days with that?

Karla: Exactly. Oh, my God, that is a difficult question.

Linda: Yes.

Karla: Well, for me, what work was, I did go to therapy. I have a therapist. I have not seen her since the epidemic started and I should, but I do not know I feel weird talking on the phone or something. It is like, "No, I want to see you in person." I do not know, it is me, but she really helped me to move on and to be able to ask for help when I needed to. She also made me recognize like it is okay to rest and to take a few days off. Or a moment off, so I always tell my

family that my family members that are here with me. Like, no, right now, I am not feeling well, just give me-- let me rest for a minute and then we can continue, but I do need like my little rest here and there. Yes.

Linda: So processing some of those emotions and problem solving and your therapy helped you to clarify, it sounds like, what can you do to ask other people for help and I think sometimes we just get used to doing it ourselves and that is very challenging to shift gears like that. We often say that MS is not a me disease but a we disease and so it really takes that kind of understanding of okay, what do I bring to the situation where I can do something positive for myself, but what can other people bring do to help. Yes.

Karla: Yes. On that note, I do want to say that having attended several of the Can Do MS webinars and also the JUMPSTART for young people with my sister. She understood and I understood how we could communicate much, much better because I was being super impatient and I would just snap when I was feeling overwhelmed. No, I mean she did not understand what was coming saying was difficult like, she was like, "I do not know why you were snapping, what is wrong with you?" I was like, blah, blah, blah. Now, I understand and I am so much more patient, I guess. I know how to say like, give me one second and the Spoon Theory it is like super cream. Yes. I was like, no, I do not have any spoons left. I am sorry. Yes.

Linda: Yes. Can you explain this Spoon Theory for maybe people who have never heard that before? Now, that is something that we tend to talk about, yes.

Karla: Yes. Spoon Theory for me it is like you have certain number of spoons. Let us say around 20-25 spoons per day and the Spoon Theory is your energy levels. So I have 15 spoons left, I have 10 spoons left. It gets so points especially me with MS that I have no spoons left and I have to tell my family member is like, okay, I have maybe one spoon left, please let us choose it wisely because there is no way I can function ones. They are depleted.

Linda: That is well said kind of monitoring where am I at, right? Because sometimes just end up in the morning getting dressed, getting ready might take up two spoons, and so then we have to be mindful and realistic about, okay, well, what does the day hold? What do I want to do? Sometimes when I tell people to do is get their calendar out and write all the things that they have planned for the day and look at it, but we know MS is so unpredictable and uncertainty is a hallmark feature, right? So then just being compassionate to yourself as you look at that list or that calendar of to do's that day is there something that I could put on for two days from now I could do this instead of today. You touched upon some really important parts when you were talking about what you learned in your therapy and just on your own. You talked about reading your own body signals in a way, I mean, you did not use those that term but that is usually the way that I put it. Kind of looking inward and saying, "Wait, when do I need to take a break and giving yourself permission." I think that is really important being kind to yourself in that way. How would you treat a friend or someone else looking inward and saying, "I am my best version of myself when I take a break."

Karla: Yes.

Linda: The other piece that you mentioned is so, so important communication. Communicating and that is hard for any of us, right, trying to even psychologists who have training and communication and relationships. It could be so challenging to look inward and say what are my thoughts and my feelings kind of exploring that first in our self and then relating that to someone else. It does take two to tango in that way having there is going to be approachable...

Karla: It definitely took me a while, I am still turning to this day but it is gotten much better. Also for advocating for myself that I also learn it took me around three years to say to admit to myself that no, I cannot do absolutely everything and I need to take care of myself so that way I can take care of other things around me. You cannot deplete yourself and then be like, oh, no but this and that, but really—no, you cannot. I mean, there is no way and my former boss, he knew about my condition and he always said, "Okay, we are doing the best we can and that is all we can do. So do not stress about how things are going to go, even like whenever you do not know what is going to happen, why stress about it until way before about different situations, no, do not do that." I was like, yes, so I learned that stress, why did you yell. No. I cannot over think basically.

Linda: It is good to be realistic with yourself. It does not mean to lower your expectations but just to say, "Okay, how can I get this done in a different way." Be reasonable with yourself, I think that really brings up kind of the topic of our strengths and resilience. What strengths have you covered about yourself since you were diagnosed with MS?

Karla: About myself?

Linda: Mm-hmm.

Karla: Oh, my gosh. I think I have learned to be resilient in a way I mean, so you look at me and you do not think about, oh, she has a condition or she has meds or what not, but no it took me years to be able to be where I am at right now, be at peace with myself with this new me. I would say I learned how to adapt very quickly and how to look for the positive of everything. I mean, I know we live with this 24/7 even though it does not look like it but for us it is 24/7. Right now, I always said and for me, my MS, it is like when you are spinning when you stop. You know that feeling that is why I feel about it all the time. I learned how to cope with it and how to look forward to my life and how to move on and right now I am trying to decide. Okay, how can I move forward without being scared of going through those changes, so yes.

Linda: Uh-huh. Yes. I think one of the most rewarding parts of my work with people living with MS and Support Partners is their resilience and just learning about that not only to adapt in the face of adversity but survive and bounce back but coming back even, stronger, and wiser, finding a lesson and the challenging circumstances that they face and that you face. I think that part of that resilience it is, some of us are just positive people and some we have to

work that muscle, is like working out to learn some tricks of the trade of how do we do that. What daily practices do you do to or maybe over the course of the week or so to promote a positive mindset?

Karla: Okay. So for me what really helped was to work out regularly, of course, I have lost weight, which is like a super extra nice plus. For me, it is more mentally, it helps me so, so much and I know at the beginning I do hate work out. High interval, whatever that is, I am sorry. High impact interval training, yes. There you go.

Linda: Awesome.

Karla: Yes. I do that and I was scared at the beginning because I could not walk. Well, I could walk but I could not run or something I would lose my balance. So I was super scared but I found a really great group and trainers that really helped me out and modified several, for example burpees since one I have modified activities. It has helped me tremendously and to these days even with the pandemic. I also meditate. I used the headspace stuff.

Linda: Okay.

Karla: I do.

Linda: Yes. Those are too good. You are hitting body, mind, and spirit with everything that you are doing. That is awesome.

Karla: Yes.

Linda: Yes. I know big part of Can Do is the role of activity and exercise and just the feedback loop that that does for us, again, body, mind, and spirit. Just think about that, you talked about your clarity of thought, or just how it helps you with focus, or just helps you mood with wise too, just feeling like you are regulating your moods, feeling better, more balanced, and coping with things better. I think that that is a wonderful part of your day your daily routine and it feeds back in the self-care, just keeping that to help you feel like you are coping with MS, and coping with the challenges and balancing out your emotions. I think we can be the best version of ourselves when we give ourselves that time. So that is really important.

Karla: I mean, I am not going to lie. I am always like, it is time to work out but I am like, okay. Yes, that is why I do it and I push through. Yes.

Linda: Yes. What are some things that motivate you because I think motivation is so key to working out or doing these things whether it is practicing cognitive strategies or helping ourselves with physical exercise or nutrition, what motivates you or helps motivation?

Karla: For example with exercise, what motivates me I notice it right away my cognitive functions were so much better when I exercise. I know that it will help me when around my

work, because right now with the whole pandemic there is a lot of work, I mean, such a different setting. I am not a tech person at all. Yes, no, no, no. With exercise and so on I have a clear head and it makes everything some much, much, much easier than to where I did not move in, and I was so super frustrated and angry at myself. Then typing, it would have been like I would click the next letter instead of the one I meant to and with this, with the exercise, I know that I am able to do that. For me, it is it is a win-win, I mean, there is no way I can I stop for the exercise, though.

Linda: That is awesome. Yes. When we think about exercise, I know I think about the neurophysiology of exercise and how there is this brain derived neurotropic factor try to say that five times fast. I am like that helps with neurogenesis and neural plasticity, so that means as like helping to create new brain cells and making networks what I call super highways in the brain that connect different parts of the brain to communicate with each other that much stronger. So you are laying down good foundations and that is really interesting the way you are talking about it, how it even impacts your motor functioning with typing, your clarity of thought, and you are thinking skills. I think it can be so important to look at what motivates us to get into that gym or into our home exercise program. It is often that feedback of okay, yes. This is really great and getting benefit right away. I know that when we do a lot of talks with the Can Do community. We often have a psychologist and a nutritionist and physical therapist who can say, "How can we modify these exercises or what helps to motivate us?" I think just thinking about function and being practical, it keeps you as independent as possible too, so that is so important.

Karla: Yes. So what I would say it is, do not think that you cannot do it. I mean, you can do-they can adapt the exercises some way that you be able to have a little of physical at least. So trust me, it makes a huge difference. So for me it is like, do not do not say that you cannot do it, just try it, and yes.

Linda: You talked about going and seeing a psychologist or therapist for some counseling and personal growth and I think just likewise seeing a physical therapist who knows about MS can be so helpful. I do not know if you have ever had that experience. I work in a rehab setting so I am surrounded by physical therapists and speech therapists. I know the power of those rehab professionals like occupational therapists who can help individuals living with MS. Have you ever seen a physical therapist?

Karla: No, I have not, but I in the webinars they always mention physical therapists, occupational therapists, speech language pathologist, and I know I have got it written down just in case because right now I feel like I am in a good position. So right now I am okay, but I know that if things happened then I will be able to look into that.

Linda: That makes sense. Yes, knowing your resources and I like that looking ahead, thinking okay, well, there might be a day that I need that, maybe not, but if I will then those are some potential resources to tap into. Yes, we have been talking about resilience and I think part of that is that self-care of exercise and also emotional well-being you have talked about that

journey would from the time you were diagnosed and often times we think about, there are high rates of depression and anxiety. In MS, we now think that that might be part and parcel of the disease process, maybe something about inflammation or something about the disease process itself, but we also talk about grief. Grief is a normal natural response that any of us experience any time we are experiencing loss or change in our life and with grief there could be a variety of emotions and I think sometimes it is like peeling layers of an onion, you might feel very angry but then when you peel another layer down you say, "Oh, it is a lot of anxiety the what-ifs of the future or sadness and regret of the person I used to be is not the person I am today. All these different emotions come up, how have you kind of maintained your emotional resilience, do you have someone you talk to, whether then your counselor or...?

Karla: Well, my friends family, they pretty much-- whenever I am feeling down the help me. Also at work, I was able to do-- also, I felt the need of disclosing because it is just so tricky the way that there are some things as you mentioned in that now you kind of do or you struggle with them. It is difficult, it took me a while to be able to disclose it, but it was some needed because I knew this help with some things.

Linda: Mm-hmm. Yes. Disclosure in the workplace and in personal relationships, it is unique to each person, right? There is no right or wrong, but I think that sometimes there comes a time where you say, I will actually get more benefit if I disclose and of course that cannot be rushed and that takes time to think and process and maybe get some advice from a counselor or family members or even there are job accommodations, social workers that are really knowledgeable about workplace accommodation so that you can go in with some ideas about what helps me in the workplace. We have been talking about resilience and I think that part of resilience is being flexible in our thinking and looking at situations from multiple perspectives which means, "Hey, what is going to improve my productivity and efficiency at work?" Because that is what I hear from people in the workplace with MS. Sometimes they will say, "Oh, gosh, it takes me longer to do tasks, or I had to double check my work or oops, I will make-- I will forget what my boss or supervisor or someone said during a meeting and it is not that they are lazy or not conscientious. That is quite the contrary, right?

Karla: Exactly.

Linda: Right to do well, yes.

Karla: Yes. I remember one time my boss was like, "Can you be then, note-taking? I was like, "No, I am sorry. I cannot do that because for me it is difficult to hear a conversation and writing notes, I kind of do that. Tell him my notes would look super bad and so no, I am not the person to do that. I am sorry. Yes.

Linda: So that is a perfect example of just communicating, communicating something that does not work well for you, and then it creates a lot of stress for you too. If you feel like, oh, my gosh or maybe it would create a lot of stress in terms of having to rewrite the notes

afterwards or trying to read your writing it could be tough. That was a brave step, to talk with your boss and it sounds like at your workplace, people were really open to it. Was that your experience that your supervisor has been open to talking with you about that and coming up with strategies?

Karla: Yes. I have been super lucky. I would say for me to be able to be outspoken about my condition and what I can, I can do and they have all been super understanding and I really appreciate that because I know it is not the case for a lot of people, so I am lucky and thankful, yes, that is an important warning my life, being thankful.

Linda: Yes. I think sometimes our thinking gets into either black or white kind of thinking and not seeing the shades of gray and often times people will think, oh, well either work or not work and some people do. Unfortunately they do have to get disability benefits or Social Security benefits, and there is nothing wrong with that. You know I mean, it is a painful transition for that person. They should not think less of themselves, sometimes that is necessary to do. In the meantime, sometimes for some people there are some workplace accommodations you can do either informal or formal. So informal might be things like you write yourself, reminder notes, or create a calendar, having alarms go off.

Karla: You should see myself coming to full of reminder is like full and I have this what. Smart question like this morning was, today looks really busy, yes. Because I put absolutely everything on my calendar because I have learned also that, I mean, I used to write sticky notes or on a notebook. It just happens that sometimes I forget where I left a sticky note or something and I would be like, I remember I wrote something but I cannot remember what it was and where is it. So now with the reminders, every time it does that, I have always like even delay to the next day, but I make sure of it because even though I do not forget.

Linda: Smart. Yes, that is good. Coming up with some strategies and it is a transition. It is an emotional transition, right, to say, okay, I am open to trying something new and I think of just those ideas of nothing ventured, nothing gained, just trying it out and it may not be your helpful for you but just trying it out, see, and then that gives you feedback to go forward. Another piece of resilience is kind of cultivating gratitude. Optimism it helps you to focus on what we can control and looking at what we are grateful or can be important to you, do any type of gratitude, journaling, or any of that.

Karla: I started a journal but I will be honest, I completely forgot every soft and I remember and then I make a note but that is it. I am a Catholic. My religion for me it is a super important and every day I say thank you for everything that has happened, that my family is okay, that I am okay. Yes, I am always thank you.

Linda: Yes. I actually think that is an important part of our culture. Some people have different types of faiths and spiritual practices. That can be a really big part of healing and of feeling the wellness that comes with living with a chronic disease, right? So that is important. I think it is a sense of community is really important in connection and your spirituality and faith

sometimes can be part of that, so building and maintaining trusting, relationships is so important in MS and for young people living with MS and being diagnosed it is typically diagnosed in people's 20s, 30s, 40s, and so that is usually when they are getting out and finding a life partner or on the dating scene. I do not know if you are in a relationship or not. Can you tell us a little bit about being navigating the challenges most of us can have with dating and finding that right person and communication in relationships?

Karla: For me, forever I have been super typical for the relationships, like romantic relationships and then you have the MS into the equation and oh, no, no, no, it is been horrible. I am single. I am 36. If you would have asked me when I was like 25 or so, I would never guess that I would be single and, I mean, here is me and saying things I should not. I live with my mom and it is difficult. It is very difficult to disclose to somebody you are dating. When do you know, when to disclose it, it is so difficult. It is super important to be able to let the person know. Here I am, I mean, right now, I did want him to online dating. Yes. Had multiple bad mistakes, but right now I really want a guy and his like super sweet and super understanding but with the whole pandemic right now, it is okay from communicating like this, it is so difficult. He does know about my MS diagnosis and everything and he understands because he is a biologist. I do not know. He has like a weird, yes, title, but he does understand what it is. That makes such a difference, I would say.

Linda: Mm-hmm. Yes, I think a good rule of them is, just communication and all relationships and certainly on that first date, you do not have to feel the pressure of totally everything about yourself. I think often times it helps us to look inward and say, well, when would we want to know something important and I think in relationships in MS, no MS, there are always something that is very personal that someone might feel nervous or want to avoid the topic whether it is finances, or some relationship, past relationship issue, or whatever, health issue. Figuring out, when would that be the best part of the relationship to build the trust and intimacy, communication is so important and being are genuine self in the relationship is so important. I think earlier rather than later once you are figuring out, hey, this is a person I really want to grow with or get to know better. I often find that earlier rather than later can be helpful.

Karla: Yes.

Linda: Because it could be a time where you say, "Okay. Well, this person is open to it." Yes. I think also kind of thinking ahead how am I going to say this and how it might mean that you have to put on your teachers hat, you know as a person living with MS, you do a lot of educating of other people. What is MS and how does it impact you and all of that. So being kind of prepared for explaining and also knowing that everyone is different with receiving information. Some people might ask a lot of questions and be curious, other people might say, oh, yes, no big deal. I have my own health problems or something like that and move on or using, everybody is different. It is just another type of communication and relationship and that I work a lot with Support Partners and with people have been married for over 30 years in with MS and I see that that communication and talking about someone's weaknesses or

challenged areas, that is a lifelong process. It is good that you are working on those skills now.

Karla: It took me several years.

Linda: Yes. Well, that is an exciting time for you too. It is an exciting time to be in a new relationship and learn about someone. I think that is great that you are putting yourself out there.

Karla: Yes, I am excited. I have nightmares with past relationships. He said like, it is difficult. Should I disclose right away or not? Then, are they wasting my time? I do not know, it is just like super hated you.

Linda: Yes, that idea of should I disclose, when should I disclose? This is an issue that a lot of people with MS are dealing with and kind of questioning and then themselves what is the "right way" and there is really no right or wrong way. It is just in any relationship building intimacy means I want to be my genuine self and that means that I need to trust in the other person and take a risk sometimes and sometimes we take a risk in life in relationships and you know what, it does not work out. That was not the person for you, but it is important for you to know that your partner will be there for you and that you will be able to be there for them too. That is good that you are broadening your horizons and seeing what is out there, that is a big step in your life.

Karla: Yes. I agree.

Linda: I am noticing the artwork behind you there. Are you an artist?

Karla: Well, I try.

Linda: Beautiful. There she is beautiful scene of us. I think a sunflower and horizon scene with this.

Karla: Yes. Thank you.

Linda: Gorgeous.

Karla: Yes. One of my students, she is like, you put there in purpose of people can see and I am like, no. I swear. I am working on it, so yes. It is been like a year that I started taking oil painting classes and I do have several paintings. I have one in my living room. It is like a three piece, but it is super important and it is my time.

Linda: Uh-huh.

Karla: Yes, I have a wonderful teacher. She is always like, no there are no mistakes so we can fix it in case you will like it but just have fun.

Linda: That is great. Yes. Emotions are such a big part of the human experience. We all have a wide array of emotions and our senses are so important for kind of bringing up healthy emotions to and dealing with those times of depression or anxiety and so when we think about our senses, art can be a nice way to contact you with that. Like what you are seeing or sometimes when people are very stressed I often tell them take a nice deep breath in and nice long exhale, the exhale can really send messages back up to the brain to feel a little bit more relaxed and in control. Then also to feed your senses to think about what am I smelling, what am I seeing, and being mindful of the moment, looking out that window and seeing that tree and all of the different colors and the shades of green or that is, I am here in California. So we are just getting all the colors that maybe you already had for fall.

Karla: Well—Yes.

Linda: It is important just to do those simple techniques every day that can help us to be a little bit more calm and or energized to take a break and just be in the here and the now.

Karla: Yes, exactly.

Linda: I was telling you, I work in a rehabilitation area and right next door to me is the MS Achievement Center.

Karla: Okay.

Linda: Committee health and that is a day program where people living with MS can go and do physical exercise, cognitive exercise, there is a big piece of sense of community and social connection with each other and you will often see canine companions.

Karla: Ah, really?

Linda: See at the dogs and dogs have their practical. Those canine companions are providing a practical skill or help to people living with MS, but it is really an emotional connection also, is not it?

Karla: No, I want to able to do.

Linda: Yes. Yes. It is an exciting place. It is very like Can Do, looking at kind of the body and mind interactions and what brings up wellness, right? That is what we are trying to always promote wellness. Yes. I think when we are thinking about all these different concerns about dating you talked about when do I disclose and are there any other concerns that come up for you with dating or being in an intimate relationship?

Karla: For example right now, I disclose because with this whole pandemic thing that is going on. For me, but you know how MS makes you a little bit like higher risk. Well, this person I am

dating. His like, "Come on, COVID is going to be here for a long time, so why cannot we meet." I had to disclose but I have MS, so I am considered a higher risk. So he was very understanding.

Linda: That was an important step that you did for self-care just saying, "Okay. These are what I need to do to make sure that I am feeling safe and healthy." This is the way that I could offer to be with you in a relationship, right?

Karla: Yes.

Linda: Connecting, like you are saying technology has its pros and cons, but you know that was an important step you took in the relationship. It sounds like his been open to that.

Karla: Yes.

Linda: Yes, yes.

Karla: Because right now, I am-- I struggle with my cognitive issues. I know that when I am trying to-- I think everything what I want to say, but it does not reflect when I say it. So is there like any strategy I can probably use so I could get better at it because it is so frustrating because for me it everything would come super easy before, and now it does not.

Linda: It is very frustrating. I think our cognitive functioning is so part of our identity and independence and relationships and communication and all of those different areas of our life get impacted by cognition. We know in MS, there can be high rates of cognitive problems. Some studies have said even up to sixty percent and we know that annual screening for cognitive issues like with your neurologist talking about these issues would be a good first step for you and seeing if they can do a quick screener in their office to see where your kind of level is or what areas you are facing. I think you are bringing up though some issue that it is hard sometimes to communicate your thoughts and we know that could be a variety of cognitive problems in MS. They could be mild, subtle problems, moderate, or severe. Most people have mild or settle problems but even that can bring up difficulties for them in day-today functioning. As a neuropsychologist, we do a comprehensive evaluation as a first step to say, okay, where are your strengths and where my weaknesses lie and in those challenging areas, what can we do about it. So providing you with kind of a roadmap can be a healthy first step as well. I think that the specific issue of coming up with the right word or communicating your thoughts, that is something that I hear a lot from people living with MS, so it is very typical.

I often tell them the first thing to do is to take in a deep breath. I know that sounds kind of funny but just think about it our stress and anxiety, hijacks the brain and makes it that much more difficult for people to think straight and figure out what they are trying to say in the first place. The next thing to do is to know that there are certain environments that can really trigger that. So if there is a lot of noise, like if you are in a restaurant or something and there is

a lot of people or multiple conversations going on that could be difficult for people. So sometimes thinking ahead and saying, "Okay, how can I make this conversation more one-to-one?" If there is a problem, like when you are going to meetings at work, sometimes it is helpful to come up with like you were saying, a notebook ahead of time jotting down little bullet points of what do I want to discuss. So that can help you to remember what you are trying to communicate. Sometimes people get frozen and feel that tip-of-the-tongue phenomenon of who, what was I about to say or lost your train of thought, right? Being kind to yourself in the process and taking just a moment to reflect and say, okay. Well, if I do not think of it right now it will come back to me. So we know in MS, oftentimes memory can be impacted in the way where it is a retrieval issue, meaning the information is in there, but it is in a filing cabinet drawer that needs to be kind of unkind of shook up and unstuck and then the information will come out.

That is why a book was some prompts or cues can be helpful to trigger. It does not have to everything has to does not have to be written out but just a few words to kind of trigger that memory can help.

Karla: Yes.

Linda: Just also taking your own pace at things, do not feel rushed. Sometimes when people are feeling really rushed or on the spot, that can really magnify that problem. So taking your own pace and it is okay to tell people, well, one moment or time out during a difficult conversation with the partner or doing what you need to do to communicate and that might mean setting a different pace of things for you.

Karla: Okay.

Linda: I hope that helps.

Karla: Yes.

Linda: A few tricks of the trade, but did some work in progress.

Karla: Thank you.

Linda: I often tell people try things out, see if it fits for you. It may not fit and then we kind of experiment and use it is, that just that a scientific experiment. Just trying things out, seeing if it works, seeing if it is helpful, finding out what part was not helpful, and then learning from it and trying to tweak it a little bit.

Karla: Okay, perfect. Thank you.

Krista: Thank you to Linda and Karla, what an awesome chat there. Really appreciate you guys being here today to share your thoughts and approaches to life with MS resilience, and also

chatting about staying positive. Thank you also to our listeners for tuning in to this episode. We would love to thank our sponsors as well for making these podcasts possible. So thank you to our online program sponsors for 2020, Bristol-Myers Squibb, Biogen, EMD Serono, Sanofi Genzyme, Genentech, Novartis, and Mallinckrodt Pharmaceuticals. Be sure to check out our other podcast episodes. We also now offer transcripts for all of our podcasts. If you would like to have a printed version of this audio podcast, you can find those on our website, candoms.org. Again, thanks for tuning in and have a great day.

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