Chronic Fatigue Syndrome – You CAN Get Well

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INTRODUCTION

I am writing this book in the hope that others suffering from chronic fatigue syndrome will not have to go down as many dead-end roads as I did in my search for recovery. And I want to share some good news. You can get well.

Our bodies have a marvellous ability to heal themselves, if only we will do our part and give them a chance. As someone once wrote: "God heals. The doctor sends the bill".

I know what it feels like to be in the depths of chronic fatigue syndrome. (I will use the term "chronic fatigue syndrome" throughout this book because I believe it best describes the condition. But I am also referring to ME, post-viral illness, "yuppie flu", Epstein-Barr virus and other names which have been applied to the condition).

When your body is aching from head to toe, and you feel as weak as a kitten, it is hard to believe you will ever get well. And if, on top of that, you are among the many unfortunate ones who have been told that your symptoms are 'all in your head', the burden is doubly hard to bear.

Fortunately, most of us with chronic fatigue syndrome have an enormous strength of spirit. It is a characteristic which has impressed me in those I have met with the condition. Even if a doctor tells us our symptoms are "just psychosomatic", we know in our own minds that the doctor is wrong. We know there is something wrong with us and, furthermore, we are determined to get well. That is when many of us turn down the path of alternative medicine. In fact, virtually everyone with chronic fatigue syndrome has turned to alternative practitioners out of necessity because conventional medicine has few, if any answers.

My own battle over several years with chronic fatigue syndrome began in 1977 when most doctors had never heard of the condition. Thus, I began a lonely, frustrating - and very expensive - journey to alternative practitioners, trying one suggested cure after another, and getting no better. In fact, it would be fair to say that almost everything I tried made me worse.

So how did I get well? This book tells the story of my journey - a journey which is still not fully completed, and never will be, because health is something which we only have from day to day. We have to be vigilant about our health, especially when our bodies have been weakened by something like chronic fatigue syndrome.

But the good news is this. If you are now sick, you can get well. My prayer for you, as you read this book, is that it will help on the journey back to health.
Chapter 1

MY LIFE FALLS APART

Exactly when it started is hard to pinpoint. Perhaps it was as far back as January 1976 when I fainted suddenly one morning while visiting a friend. I had slept badly the previous night and had not eaten breakfast, so I attributed the fainting episode to the combined effects of tiredness and hunger.

But for several days afterwards I had a bad headache. Feelings of faintness would come over me at unexpected moments and I feared I might pass out again, although thankfully I did not. Over a period of weeks, the headache lifted and the feelings of faintness became less frequent. But something had changed. I did not feel quite well and seemed increasingly susceptible to colds and sore throats, even in summer.

Until then I had always prided myself on my physical fitness. I was a competitive runner during school and university, training up to 60 miles a week by the time I was 18 or 19, with long runs of more than 20 miles on Sunday mornings. When I graduated from university and started work with the New Zealand public service at the end of 1975, I found less time for serious training although I still ran several times a week and regarded myself as fit.

But after the fainting episode, my energy for running seemed to wane. I would go out occasionally and run three or four miles, struggling to complete the distance, my legs feeling strangely wooden. "I'm just unfit," I told myself.

At the end of 1976 I moved to Wellington with my job and lived for several weeks in a hostel, eating irregular meals. I also seemed to have an increasing craving for chocolate bars and similar snacks, particularly after work in the early evening as I walked home.

I moved into a flat in Hataitai, a hilly Wellington suburb overlooking the sea. Walking uphill from the bus-stop to the flat each evening became increasingly difficult but I put it down the fact that I was unfit and determined I would get back to regular running again. A series of colds and sore throats put paid to that idea.

In April 1977, my life took a radical new direction. I resigned my job and went to Pakistan to stay with some missionary friends in Hyderabad. I had been interested in overseas missionary work for some time and wondered whether it might be my eventual calling, so the purpose of my trip was to see first-hand the conditions in which missionaries lived and worked.
Before leaving New Zealand, I had the usual jabs for cholera, typhoid and malaria. The after-effects of injections left me feeling under par, and when I arrived in Pakistan I felt as though I had a bad cold which I could not throw off.

The heat in Hyderabad was intense. I did a lot of walking around the crowded city and always returned exhausted to my host's house, usually sleeping in the afternoons, as was the local custom. I had a craving for sweets. One way to satisfy it, along with the thirst created by the heat, was to drink several bottles of soft drink each day, usually a local brand called Apple Cidra and sometimes Coca Cola. I also found myself buying packets of Pakistani-style biscuits and eating the whole bag in one sitting.

About two months into my visit, I developed what I thought was the 'flu. I put it down to the heat and the fact that I had been over-exerting myself, and decided to have an early night in the hope of sleeping it off.

The next morning when I climbed out of bed, all my strength seemed to have vanished. I felt as weak as a kitten, drained of energy as barely able to walk to the bathroom. I sank back into bed.

For several days I spent most of my time asleep and my hosts became increasingly concerned, urging me to see a doctor, which I did.

I managed to drag myself to the surgery of a Pakistani GP who stunned me by suggesting I might have diabetes. Blood tests a few days later showed my blood sugar levels were normal - much to my relief.

Over the next few weeks, my energy slowly returned. I moved to Karachi where I lived in a flat above the home of an English engineer, sharing the flat with two Pakistani students. One morning, I woke feeling weak and trembling, with a bad headache. I was planning to visit someone in hospital and although I did not feel well, decided to go anyway, in the hope I would "come right" as the day went on.

I survived the hospital visit - just - and was about to climb onto the back of my friend's motor scooter to return home, when I fainted. I came to, lying on the footpath, with a sea of puzzled Pakistan faces looking down at me. It was an awful experience. My friend was panic-stricken when I collapsed. Fearing the worst, he ran to his father-in-law's house about 100 metres away, to get help.

I managed to walk back to the aforementioned house and collapsed onto a bed for several hours. Finally, I felt strong enough to take a rickshaw back to my flat, my head still throbbing intensely as I rode in the rickety three-wheel machine over roads riddled with potholes.
My collapse caused great concern among my Pakistani friends. They called an English missionary who took me to a hospital for extensive tests, which found nothing apparently wrong with me. I went to a Pakistani doctor, recommended as one of the best in Karachi. He diagnosed low blood pressure but made no suggestion as to what I could do about it.

About this time, I ran out of the antibiotics (tetracycline) which I had been taking almost continually for the previous seven years, to control my acne. In New Zealand, I had always needed a doctor's prescription to obtain tetracycline but in Pakistan I could get it freely from any pharmacy.

However, I had a niggling doubt as to whether the antibiotics might be doing me harm. Could they have something to do with my constant headaches and weakness, I wondered. But I had to keep taking them, or my acne came back worse than ever, despite the fact that I was then 22 and well past the normal teenage acne stage.

I went to two or three more doctors, in desperate effort to find out what was wrong with me. One advised me to "get out of this God-forsaken country", advice which I was more than ready to take at that point.

I had an air ticket to England and my original plan had been to stay with my grandmother initially and look for work in England. But I felt so terrible - constant headache and feeling that I had the 'flu which I could not shake off - that I decided to return immediately to my parents' home in New Zealand.

Thus began three humiliating years of being unable to work at a full-time job. Three years of being misunderstood and being accused of being a malingerer by family and friends who did not understand the constant pain and exhaustion I was battling.
Chapter 2

SEARCHING FOR AN ANSWER

My faith in the medical profession quickly evaporated as several doctors told me there was nothing wrong with me. My blood tests were all "normal". Furthermore, I didn't look sick. I was lean and suntanned, and, as one friend put it, I looked "as fit as a buck rabbit".

The general consensus among the doctors I visited was that my problems were all in my mind. One prescribed tranquillisers. I took them for two days, but felt so drowsy and miserable I threw them in the rubbish bin.

Somehow, I managed to hang on to my faith in God. I prayed for an answer, and the first glimmer of hope came about three months after I returned to New Zealand when a friend suggested my problems could be caused by food allergies. I knew several people with so-called food allergies. They were all pasty-faced and anaemic-looking, and I didn't feel I fitted that description. But I was desperate to get well.

A few weeks later I was sitting in the consulting room of a food allergy specialist in Wellington. His nurse gave me a series of skin tests to find the foods I was allergic to. She came up with about 30, including wheat, dairy products, eggs, citrus fruit, potatoes, apples and corn. Essentially, they were all the foods I ate most of.

So I had to totally change my diet. Initially, it was a source of much amusement among my flatmates, who turned up their noses at the transparent-looking tapioca I was eating for breakfast, and the bread made from whiter-than-white gluten-free flour. It all tasted pretty insipid.

But I was determined I was going to get well and followed the allergy specialist's instructions to the letter. I was encouraged initially by the disappearance of my acne within a few days on the new diet. That was nothing short of miraculous, I thought. I stopped taking tetracycline.

But my head still ached constantly, despite the diet, and after meals I often got a more severe headache accompanied by a general feeling of dullness and lethargy. Each time I got such a reaction from a meal, I assumed it must be something I had inadvertently eaten, to which I was allergic.

I telephoned the allergy specialist several times, seeking advice. He told me that food allergies could change. For example, if I overate of any particular food it could create a new allergy to that food. The answer was to 'rotate' foods, never eating too much of anyone thing. It made life enormously complicated.
But still I stuck with it.

During this time, I was studying Business Administration at Canterbury University but found it increasingly difficult to concentrate on my work. I eventually quit the course at the start of the final term and worked as a part-time gardener for a few months, then as a part-time window cleaner. The outdoor work was easier on my aching head, but my energy was so low that I could not work a full day. Often, I collapsed into bed exhausted and aching all over.

In mid-1979 I heard of a doctor in Auckland who treated food allergies by injecting tiny amounts of the offending foods into the patient - rather like immunisation. I went to see him and spent several weeks having injections in both arms as he tried to come up with a "formula" which would cure my allergies. I spent a large amount of money on this treatment. It was money I did not have. But I was convinced I would get well, then get a job and repay the debt.

Finally, after three months, during which I got worse rather than better, I abandoned the treatment. I then turned to an osteopath for answers. He was confident that by manipulating the "kinks" in my spine he could release the "blockage" causing my problems. But after spending yet more money, the end result was the same. The treatment made me worse, not better.

However, there remained within me a burning desire to get well. The more knock-backs I experienced, the more determined I became. The source of my indomitable spirit was largely my faith in God which never wavered, even in the darkest moments, and I clung to Bible verses I had memorised which promised answers to prayer, even if they might be a while coming. I believed without a shadow of doubt that eventually I would get well.

By this time, I had started reading extensively about nutrition. I became convinced that "nature cure" was the answer. I heard of a health centre in Australia where people had been cured of all sorts of illnesses through fasting, drinking fruit juices and eating raw foods, and I decided I would go there myself. A friend, whose generosity still overwhelms me when I recall it, gave me the money to travel to Australia.

But my trip to the health centre turned into yet another disappointment. After five days of fruit juices and little else, I had lost a huge amount of weight and felt weaker than ever. The naturopaths at the centre assured me my body was "eliminating toxins". But I was not convinced. My instinct told me the treatment was wrong - at least for me. I left the centre with my money spent and my spirit at a very low ebb.
I decided to stay in Sydney. There was more chance of finding the answers there, with so many nutritionists and other health professionals, I thought, and I found a doctor sympathetic to "food allergies" who gave me the necessary letter to claim sickness benefit.

It was the first time I had been on a benefit. I found it humiliating but at least it allowed me to survive financially.

I devoted my days in Sydney to studying nutrition. With my limited money, I could not afford to buy many books, so I searched libraries for information about diet, and also browsed in bookshops. Being a fast reader, I could often absorb an entire book within 30 minutes, standing in the shop.

I still believed my problem was food allergies. The general consensus among the authors I read was that food allergies were caused by "stress" and the need for extra vitamins and minerals was also a common theme. So I started experimenting with various supplements. I also visited a doctor who recommended megavitamin therapy - taking huge doses of certain vitamins in an attempt to stimulate the body to get well.

But megavitamin therapy turned out to be just as disappointing as everything else I had tried. The vitamins gave me terrible headaches, particularly Vitamin A in large doses. The doctor was mystified. And I knew then that megavitamin therapy was not for me.

One Sunday after church, a saintly-looking older woman approached me and said: "I hear you have food allergies. You can cure them, you know". She offered to draw up a diet for me to follow and I readily agreed. A few days later I was sitting in her living room, listening to stories of how she had helped people get well during her years as a nurse both in Australia and on the overseas mission field.

The diet initially involved two days drinking nothing but carrot juice - freshly-made in a juicer which I bought specially. I rested for those two days and felt remarkably well. My head cleared and I felt light and energetic, and naturally I was excited. I felt I had finally found the answer to my problems.

The next stage of the diet was raw vegetables and fruit, chosen to avoid anything I was "allergic" to, like citrus fruit, and chopped into salads. I ate three such meals a day and continued with carrot juice between meals. I noticed some of the fruit meals gave me headaches and I felt weak after them, but the vegetables agreed with me.

The only problem was, I started to lose weight at an alarming rate. My adviser added some chicken to my diet, to counter the weight loss, but she was adamantly opposed to starchy food, saying my body needed time to eliminate toxins. I persevered. Despite my loss of weight, I was still convinced I was on the right track. I rested more as my energy declined due to the sparse diet.
One afternoon I was lying on the sofa and was overcome by a feeling of weakness. My weight by this time had dropped to 8 stone 10 pounds, which for my height of 6ft 2ins was verging on emaciation. I was suddenly frightened.

I telephoned my parents in New Zealand and said I was coming home and when my mother saw me a few days later there was no disguising the look of dismay on her face. She immediately made me a drink of warm milk with chocolate. I was too weak to protest, despite the fact I still believed I was allergic to milk and had not drunk it for three years.

The milk tasted great. And I felt better for drinking it. I fell into bed and slept like a baby. When I woke up, I had a wonderful feeling of God's love surrounding me and an absolute conviction that I was going to get well. I had drunk milk and not suffered any ill effects. Had I been miraculously cured of my allergies? For breakfast, I had fried eggs on well-buttered toast for the first time in three years, and again I felt great I really was cured, I told myself.

I was on something of a high, emotionally and spiritually. I believed God had healed me and although I was still very thin and weak, it would only be a matter of time - and rest – before I was completely well, I thought.

For two weeks, I was on cloud nine. Then, I decided to speed up my weight gain by drinking a product which you add to milk, full of vitamins and minerals, and recommended by the local chemist. I started consuming this drink in great quantities. And I started feeling sick again. However, I did not immediately connect my relapse to the milky drinks I was having. All I knew was that somehow I had lost the wonderful recovery I had. I fell into a deep despair - the worst period of discouragement of my entire life.

I felt deserted by God. But there was still a remnant of hope within me and I clung to it for several weeks as I spent most of my time in my bedroom, too depressed to venture outside or see people. One of the few outings I made was to church and there I heard about a Christian radio station, Radio Rhema, which needed a journalist. I knew I had writing ability and applied for the job, offering to work only part-time because of my health problems.

Starting work at Radio Rhema took enormous courage. Because of my depression, it seemed I was thrusting myself into a hostile environment and I was barely able to look anyone in the eye - so badly had my confidence evaporated. I clung to the remnants of my faith in God, drawing strength from the Christian music of the radio station. Gradually, I came out of my depression. And slowly, my energy increased and my headaches became less severe.
I decided to forget about food allergies. I knew I could eat bread, milk, eggs and everything else because of my experience after arriving home from Sydney. I wanted to recapture that experience. I decided to eat a sensible, balanced diet with three meals a day and avoid junk food. That seemed a reasonable dietary path to follow. And it paid dividends. During the 18 months I spent at Radio Rhema I recovered my health almost entirely, gained back the weight I had lost and even started running again.

I met my wife, Angie, in October 1981 and we were married in May 1982. Life was wonderful. But I did not know then that several more years of poor health lay ahead of me.
In July 1982 I left Radio Rhema to work as a journalist with a private radio station in Christchurch. The new job was stressful and involved rotating shift work. Day shift, night shift and early morning shift, one after the other, started to take a toll on my body. The old symptoms returned. First headaches, then faintness, panic attacks and a feeling of being totally drained of energy.

I managed to keep working until April 1984. Then, I knew I needed a change from pressure cooker of radio journalism. We moved to England, my parents' home country, where they had returned a few years previously along with my two younger brothers and a sister. I got a job with a London book publisher. Though I suffered bad headaches most afternoons and came home exhausted at night, I managed to hold down the job but I knew I could not keep living that way.

Once again, I turned to the study of nutrition in an effort to get well. I read about macrobiotics, food combining, vegetarianism, Ayurvedic medicine, the Pritikin diet and many more theories, experimenting with each in turn. This was much to the frustration of my poor wife whose patience was tested to the limit as she cooked the various meals I requested.

Then I read about hypoglycemia - low blood sugar. The cure, the books said, was to avoid sugar and simple carbohydrates like honey and fruit juice. Caffeine and alcohol were also factors, according to most experts. Now this made sense. I had known instinctively for several years that sweets and coffee made me feel bad, yet in all my nutritional studies I had overlooked the obvious. Perhaps it was because I had always loved sweet things. Not only cakes and biscuits, but healthful natural things like dried fruit, fruit juice and honey.

In my days as a runner I had learned to stoke up on carbohydrates for energy. I had become addicted to sweet things. Now, I started to see light at the end of the tunnel. After a few days of avoiding sweet things, my energy started to come back, my headaches got less and I felt a new sense of vitality. Then I had a particularly stressful day at work and came home exhausted. I craved something sweet. I knew I shouldn't but I could not stop myself bingeing on half a dozen muesli bars.

Next morning, I woke feeling rotten. It was just like a hangover. I was back to square one again, my discouraged mind told me. But I now knew the answer. Be careful with sugar. As long as I kept away from sweets, my energy and health came back, slowly but surely.
There were many ups and downs over the next three years as we moved to a new home in the Cotswolds, then to Cardiff where I worked for a magazine publisher. I was well enough to do a day's work and live an almost normal life but I still was not 100 per cent.

I knew diet was crucial to my health. But I continued to relapse regularly and eat sweet things, or stuff myself with other carbohydrate food, like bread, when I was tired or under stress. Something was still missing from the dietary jigsaw puzzle and I continued to seek until I found it. The answer came unexpectedly in a book I found in a Cardiff bookshop, the name and author of which I cannot now recall.

Its message has stuck with me as the cornerstone of my philosophy on diet ever since. It is this: *Eat when I'm hungry, eat what I'm hungry for, and stop when I've had enough.*

It is so simple. But the most profound truths are always the simplest. According the book, we have natural instincts which can tell us what to eat, if only we will learn to listen to our bodies. Forget the rules about calories, carbohydrates, fats, vitamins and minerals. Just listen to what your body wants. It will naturally gravitate towards healthy foods.

The book also stressed the need to be gentle on yourself when you have a dietary lapse and binge on "forbidden" food. Don't worry. Just listen to your body and eat less at the next few meals, of simple food, until you get back into balance.

I grasped hold of this new theory and immediately felt a new sense of liberation in the area of diet. I found I could eat small amounts of sweet food - perhaps a muffin or a biscuit - as part of main meal and not suffer any adverse effects from low blood sugar. I also found that it I overate of any food, I would get bad headaches and loss of energy.

Initially I found myself bingeing on sweet things quite often, as a result of this new, liberated approach to diet. I suffered the inevitable ill effects. But I also found I was slowly gaining weight (which I needed to do as I was overweight) and also becoming more energetic. In late 1989 we returned to New Zealand. I worked for a small newspaper in Hokitika and spent one of the most enjoyable years of my life in that small West Coast town. Then, we moved to Ashburton where I spent six years as a reporter at the Ashburton Guardian.

My health and energy gradually improved during that period. There were still bad times, when I got overtired, binged on sweet foods and suffered the inevitable heachache and fatigue. But the overall trend was upwards. I started running again and went on several outings of more than 12 kilometres with the local harriers. It was a wonderful feeling to be able to run again. But I found it was easy to overdo it. Often, I pushed myself too far or too fast and came home exhausted. Then I would crave something sweet, with the familiar consequences.
As many others with chronic fatigue syndrome have discovered, exercise is not the panacea which popular literature portrays it to be. We are so bombarded with the exercise message today, with magazines proclaiming how marvellous it will make us feel.

Maybe so, but not for those of us with chronic fatigue syndrome. Gentle exercise, yes. But we overdo it at our peril. This has been a hard lesson for me, a former competitive runner, to learn. But painful experience has taught me to listen to my body and to rest when it tells me it is tired.

In September 1996 we moved to Napier, where I spent five years as a journalist with Hawke’s Bay Today, one of New Zealand’s largest regional daily newspapers. Then I became press secretary for a politician in the New Zealand Parliament in Wellington for two years.

These were stressful jobs – on top of the demands of a family - but by this time I had learned my limits and how to give my body the right food and rest to ensure good health.

Today, I am a freelance journalist and web copywriter, working from a home-based office in Ashburton. I am 99 per cent recovered from chronic fatigue syndrome. I say 99 per cent, rather than 100 per cent, because I still sometimes get fatigued more than I would like. I still get headaches when I push myself too hard, or overeat of sugar. But now I know the reason whenever I suffer fatigue and headaches.

My health is in my hands. It’s wonderful to look back and see how far I’ve come from those dark days 20 years ago.
Chapter 4

WHAT IS CHRONIC FATIGUE SYNDROME?

When I became ill in 1977 most doctors had not heard of chronic fatigue syndrome. Blood tests at the time did not pick it up and the usual diagnosis was either a vague one of a 'virus' or it was dismissed as 'psychosomatic'. Today, the condition is widely recognised but it is still controversial. Whether you call it chronic fatigue syndrome, myalgic encephalomyelitis (ME), Tapanui flu, yuppie flu, post-viral fatigue syndrome or one of the many other names which it is given, there's no doubt the condition is real.

It has affected thousands of previously healthy, active people – usually hard-driving types who push themselves to the limit physically. The main symptom is profound exhaustion accompanied by flu-like symptoms such as headaches, aching muscles and joints, a sore throat, difficulty in swallowing, and often depression. It is always made worse by exercise or hard physical effort.

Chronic fatigue syndrome usually begins with an infection of some kind, or a bout of flu, which the sufferer can't seem to throw off. After a period of rest, the person might get better for a few weeks - although not quite 100 percent - and go back to work. Then a relapse follows. Usually, the person tries to battle on, as in the early stages it is unusual for a doctor to diagnose chronic fatigue syndrome.

By its very definition the condition is not diagnosed until it is chronic, so there is usually a long period of feeling below par. In extreme cases, sufferers are so ill they can barely get out of bed. Others have a milder form of the condition which makes them feel lousy but they often look perfectly well, which makes it difficult to convince doctors that they are ill.

With proper rest and a good diet, a person usually makes a slow recovery. However, most sufferers tend to relapse because they are active by nature and, when they start to feel better, they do too much. That pattern of recovery followed by a relapse can go on and on for several years - it did in my case because of a personality which seems intent on pushing to the edge of one's physical limits.

A British study found the main cause of relapse among chronic fatigue syndrome sufferers was physical exercise. This flies in the face of everything we are told these days about the need to do more exercise but I can't stress enough the need for REST if you have chronic fatigue syndrome.
I don't intend to go into the medical causes of chronic fatigue syndrome in this book, as I am writing as a layman, not as a doctor. There are blood tests now, which can pick up the condition although not all doctors will do such tests. There is no drug available as a 'cure' which I believe is a blessing in disguise because the long-term cure can only come through a change in lifestyle and diet. Above all, rest and a slower pace of life is essential.

A rough estimate is that 1 in 1000 people in western countries suffer from chronic fatigue syndrome but it could be higher.

A British survey found the following list of symptoms among those with chronic fatigue syndrome:

- Feel worse after exercise 100%
- Exhaustion 85%
- Muscle weakness
- Pain in shoulders, neck, arms or thighs
- Headache
- Pains in joints
- Blurred vision
- Poor concentration
- Poor circulation (cold hands and feet)
- Dizziness or feeling faint
- Difficulty in standing
- Ringing in ears (called tinnitus)
- Depression
- Lack of sexual interest
- Constipation
- Difficulty in swallowing
- Chronic sore throat
- Thirst

Several other symptoms were also reported, including 'feeling awful'. Not all sufferers have all symptoms and some symptoms may come and go. But almost all said they felt worse after physical exercise or mental effort.

Medical experts have different opinions on what causes chronic fatigue syndrome. Some believe it is caused by a virus, others say a disordered immune system, others suspect food allergies and others an overgrowth of yeast (candida albicans). Many experts believe the heavy use of antibiotics during the past few decades has contributed to the rise of diseases such as chronic fatigue syndrome, due to the antibiotics weakening the body's natural immune system.
I certainly suspect the prolonged use of antibiotics for acne to be the main cause of the illness in my case.

The increased consumption of refined sugar may also play a part. Those who believe in the candida theory say sugar feeds the candida organism which they suspect is behind the condition. Use of other drugs such as the birth-control pill and asthma medications may also contribute to a weakening of the immune system.

Another theory is that mercury poisoning due to the amalgam used in dental fillings is either a factor or the major cause of chronic fatigue syndrome. (Some believe mercury toxicity is also the main cause of other diseases such as multiple sclerosis and there are well-documented cases of remarkable recoveries after people have had their amalgam fillings replaced).

Many chronic fatigue syndrome sufferers report feeling worse after dental treatment although that could be caused by the pain-relief injections, not necessarily mercury released from the filling material. Mercury toxicity is a controversial subject on which I still have an open mind. It is expensive to have a mouthful of fillings replaced and the expense may not be worth it.

We know that mercury is extremely poisonous. Amalgam fillings contain about 50 percent mercury mixed with silver, tin, copper and zinc, and there is no proof that mercury does not escape from the fillings into the body. When the fillings are ground, as in chewing, it is almost certain some mercury does escape although most dentists argue the amount is too small to cause symptoms. However, in very sensitive individuals that small amount might be enough to cause major symptoms.

Dental fillings also create a small electric current in the mouth. That could be enough to cause symptoms in some people. If you can afford to have your amalgam fillings replaced (with one of the excellent composite materials which are now available) make sure to find a dentist who understands the procedure.

The fillings need to be removed in a particular sequence. The dentist also needs to take steps to prevent a large release of mercury into the system. I have not had my amalgam fillings replaced (yet) but it is an area I am still studying.

Another controversial subject is immunisations. I believe my own illness could have been made worse by injections I had in 1977 before travelling to Asia. I certainly felt unwell for several weeks after the injections. The best advice is to avoid any immunisations if you have chronic fatigue syndrome. Immunisations stress the immune system, and your immune system is already weak without being stirred up further. (This advice does not include tetanus injections, which have no record of causing ill effects).
Chapter 5

LOW BLOOD SUGAR (HYPOGLYCEMIA)

Low blood sugar (hypoglycemia) is a major cause of chronic fatigue and some experts believe up to 20 percent of adults in the western world suffer from the condition. It is possible that chronic fatigue syndrome is actually a severe case of hypoglycemia, although that might to too simplistic an explanation. In any case, the treatment for hypoglycemia is essentially the same as that for chronic fatigue syndrome - correct diet and the avoidance of heavy exercise.

Hypoglycemia results in rapid rises and falls in the level of glucose in the blood - due to a malfunctioning of the pancreas and liver, predominantly. Exhaustion of the adrenal glands is also a factor.

I don't intend to get into a detailed medical explanation of hypoglycemia because it is complicated and somewhat controversial. However, in simple terms it is caused by overactivity of the pancreas which produces too much insulin when sugar or sweet foods are eaten.

In a healthy person, the pancreas produces just enough insulin to neutralise any sugar eaten, to bring the blood sugar back to normal. But in those with hypoglycemia, the pancreas overreacts and produces too much insulin in response to the sugar eaten. This over-abundance of insulin metabolises not only the sugar which has been eaten but also some of the glucose which was already present in the bloodstream.

The result is a state of low blood sugar which can cause an alarming number of distressing symptoms -fatigue being only one of them. Other symptoms include headaches, dizziness and feeling faint, irritability, depression, difficulty in remembering, blurred vision and in most cases an overwhelming craving for something sweet or a stimulant such as tea or coffee.

If any of those symptoms sound familiar, particularly if they are accompanied by a craving for sweet food, then it is very likely you are suffering from hypoglycemia. Strenuous exercise also lowers the blood sugar, which is why those with chronic fatigue syndrome should be careful not to over-do any physical activity. After heavy physical work, a healthy person feels tired, his energy has been drained. However, if he rests, his strength will return reasonably quickly.

What has happened? The exercise has burned up part of the glucose in the blood. Stored glycogen in the liver is then used to bring the blood sugar level back to normal - even if the person doesn't eat anything immediately. The adrenal glands help raise the blood sugar level by releasing catecholamines which convert glycogen into blood sugar.
Thus, the healthy body has a system of checks and balances, involving mainly the liver, pancreas and adrenal glands, to ensure the blood sugar level stays stable. But in a person suffering from hypoglycemia (and chronic fatigue syndrome) the system doesn't work properly. After strenuous exercise, the person's blood glucose is depleted and the adrenal glands react by releasing catecholamines to convert stored glycogen into glucose. But unlike the process in a healthy person, in the hypoglycemic the new glucose stimulates the pancreas to produce more insulin - which once again lowers the blood sugar level.

The pancreas of a hypoglycemic person is extremely sensitive to extra glucose, whatever the source. It over-reacts to glucose with a secretion of insulin too large to maintain an equilibrium in the body - and the person suffers the symptoms of hypoglycemia.

The cure for hypoglycemia is to prevent large swings in the blood sugar level, by eating little or no sugar and by avoiding excessive physical exercise. But it is much more difficult than it sounds. Sugar is found in so many foods these days, particularly packaged foods, which almost always have sugar added. Some people are also sensitive to "natural" sugars such as those in fruit and even milk.

**Diet for Hypoglycemia**

Various diets have been proposed for hypoglycemia over the years. The earliest treatment was a high-protein, high-fat diet with a minimum of carbohydrates, in the belief that all carbohydrates stimulated the pancreas to produce insulin. Such diets had mixed results and are certainly not healthy in the long run. They have largely been abandoned but variations still exist, such as the Atkins diet and more recently Barry Sears' "zone" diet which involves a 30/30/40 ratio between protein, fat and carbohydrate.

The prominent American nutritionist Paavo Aerola started a change in thinking about hypoglycemia treatment in the 1970s when he advocated a largely vegetarian diet with an emphasis on complex carbohydrates. Aerola's diet was popular for many years and very successful. However, it relies heavily on dairy products for protein - which doesn't suit everyone.

More recently, a concept known as the "glycemic index" of foods has been developed. The glycemic index represents the amount by which a food raises the blood sugar level, with glucose having an index of 100. It is interesting that foods such as white bread can raise the blood sugar almost as much as ordinary white sugar, whereas as whole-grain breads cause a much slower rise in blood sugar.
I have proved this myself - before I knew anything about glycemic indexes. When I was experimenting with the high-carbohydrate, low-fat diets I often had a white bread roll with a small amount of low-fat cheese (no butter) and salad for lunch. I would always get a headache during the afternoon following such lunches but I persisted because I thought it was a "healthy" low-fat meal and it had no-sugar.

Occasionally, I would have a thick cheese sandwich on wholemeal bread (with butter) and a glass of milk - supposedly a very bad meal from the low-fat viewpoint. But I felt great during the afternoon after such a lunch. Fats such as butter and cheese can be useful in controlling low blood sugar because they slow down the absorption of carbohydrate. Of course, that is not a licence to eat a lot of fat - nor a lot of anything, for that matter.

A huge meal, even if it contains no sugar, can raise the blood sugar more than a candy bar. Getting back to the glycemic index, it can be confusing sometimes because different studies give different indexes for the same foods. For example, some studies have found potatoes to have a high glycemic index (making them unadvisable for people with hypoglycemia) while others recommended potatoes as one of the best foods for keeping blood sugar stable!

Fruit is another controversial food in relation to hypoglycemia. Some experts advocate eating fruit because its sugars (mainly fructose) are "natural" and thus don't affect the hypoglycemic like refined sugar does. Others find better results by avoiding fruit, at least in the initial stages of treatment. I found fruit often affected me adversely, particularly sweet fruit likes bananas, grapes or water melon.

I believe the best diet for controlling low blood sugar – and chronic fatigue syndrome - is the good old-fashioned "balanced diet" with three meals a day. You need to avoid sugar for the first few weeks and then have sweet things occasionally in small amounts as you start feeling better.

I have experimented with different diets to see which has the most beneficial effects on my blood sugar levels. I have found the best results with a diet based on complex carbohydrates and adequate protein, with a certain amount of fat to slow down the impact of the carbohydrates on my blood sugar. Fat is usually regarded as the main villain by modern diet writers but a certain amount of fat is essential, particularly if you suffer from low blood sugar.

In fact, many people develop low blood sugar by following the popular high-carbohydrate, low-fat diet theories to extreme. They think fruit is a "good" food and eat lots of it while avoiding foods like eggs, cheese and whole milk. But they could be better off avoiding fruit if they are hygpolycemic and eating eggs for breakfast.
Eggs are a particularly valuable food. They help build up the adrenal glands - a vital factor in recovery from hypoglycemia. Of course, they contain cholesterol and should be eaten in moderation. But one or two eggs a day will not harm most people's cholesterol levels and, in fact, there is growing evidence that sugar is much more harmful in raising cholesterol than foods such as eggs, dairy products or meat.

Many experts on hypoglycemia advocate six small meals a day rather than three meals. It used to be almost universally accepted that frequent, small meals was best. But some writers on the subject have recently challenged this belief. The problem with eating six or more meals a day is that it can easily lead to over-eating – something that can adversely affect hypoglycemics because the body is flooded with extra sugar which it doesn't need.

In the early stages, you might find you need a snack between meals to alleviate extreme symptoms of low blood sugar. However, I believe it is best to establish the habit of eating three balanced meals a day and keep snacks to a minimum. Having said that, you shouldn't allow more than five or six hours between meals or you will start to experience hypoglycemic symptoms. Eating breakfast at about 7.30am, lunch about 12.30pm and dinner about 6pm should be fine for most people, without the need for regular snacks. But if a meal is late, for some reason, then it's best to have a snack (but not a sweet snack!).

Eating snacks can also be detrimental if you have a problem with addictive eating or a tendency to binge on sweet foods which many people with hypoglycemia do, in a desperate attempt to make themselves feel better. If you find you can't stop yourself bingeing on sweet or starchy foods, it's virtually certain you are suffering from hypoglycemia. By eating three balanced meals a day, you have the best chance to keep your blood sugar stable and avoid destructive sweet snacks.

A balanced meal should contain some protein and complex carbohydrate plus a moderate amount of fat. A good breakfast is one or two eggs on one or two slices of buttered wholegrain toast; or unsweetened porridge or cereal plus one or two pieces of buttered toast.

Lunch could be sandwiches with wholegrain bread and butter plus a filling of salad vegetables and a small amount of cheese, meat, chicken or fish; or it could be a more substantial meal of meat or fish with cooked vegetables, potatoes, pasta or rice. Forget dessert and, until you feel better, avoid even fruit at the end of the meal initially.

If dinner is the main meal of the day, there is an endless variety of suitable foods, according to your taste. The main principle is to eat protein, complex carbohydrates and vegetables, and avoid refined sugar in any form.
If you really need to finish with something sweet, try a small home-made muffin, biscuit or piece of cake, made with just a small amount of sugar and have only a small helping! You'll need to experiment to see how much sugar you can tolerate.

Eating sugar as part of a meal has less effect on blood sugar levels than eating a sweet snack on its own. That's another good reason for eating just three meals a day. It is important not to over-eat because that overworks the liver, which plays a vital role in keeping blood sugar stable. An overworked liver is the cause of much chronic fatigue and it takes time for a damaged liver to restore itself.

So don't set back your progress by over-eating. Listen to your body and stop when you feel comfortably full. If you are not eating sugar, you are less likely to overeat because most over-eating tends to be of sugary, fatty foods.

It usually takes at least a month to recover from hypoglycemia by following a balanced diet. Some people start feeling better after a week or two, while others who have been sick a long time might find they need three months or more to really start feeling the benefits. Initially, you will almost certainly feel intense cravings for something sweet and may be tempted to lapse.

If you are hypoglycemic, you are essentially addicted to sugar and you are fighting something which can be as difficult as an addiction to cigarettes or alcohol. If you do slip, pick yourself up and start again. The first week or two is the hardest in starting a low-sugar diet that's when the cravings will be at their most intense. Eating even a small amount of something sweet can actually trigger a full-blown binge because of the way your body reacts to sugar.

Don't despair. You may have to pick yourself up many times before you can stick to a balanced diet. It just proves that you have been over-dependent on sugar for too long and that you must break the addiction before you can ever expect to enjoy good health again.

Keep that as your motivation when the sugar cravings come. Tell yourself: "I might feel bad now but I'll be ten times worse if I binge".
Chapter 6

DIET

More has been written about diet than almost any other subject under the sun. And the more you study nutrition, the more confusing it becomes, with an endless stream of theories about what you should and should not eat - many of the them contradicting one another.

If you are suffering from chronic fatigue syndrome, the chances are you have already experimented quite a bit with your diet. You might have been to an alternative health professional who has given you dietary guidelines to follow, or you might, like me, have started reading on the subject of nutrition in an effort to find an answer to your health problems.

During the past 20 years or so, I have read extensively on the subject of diet. And not only have I studied countless nutritional theories but I have also experimented personally with many of them. Macrobiotics, the Pritikin diet, the Hay diet (food combining), the Aarola diet, vegetarianism, Ayurvedic diets, not to mention elimination diets for food allergies - you name it and I have probably studied it, if not tried it out on myself.

I spent many painful years seeking for the truth about diet. When you have chronic fatigue syndrome, you are very sensitive to the effects of various foods (and drinks) on your body, and often notice your symptoms feel worse after eating. Perhaps that is why it is so easy to fall for the 'food allergy' theory. I went down the food allergy track for almost three years. In fact, it was the first area of diet, which I explored and I went into it so intensely that I almost destroyed myself physically in the process.

It began with tests by an allergy specialist in Wellington. He gave me a list of foods to which I was supposedly allergic and advised me to avoid them scrupulously for several weeks. Even a tiny taste of a forbidden food could trigger my symptoms, he said. My list of allergic foods was daunting. There were the usual ones like wheat, dairy products and eggs, as well as citrus fruits, apples, potatoes and several others which I cannot now remember.

With such a list of forbidden foods, I had to change my diet drastically. Eating out became a major problem for my hosts. I started eating a lot of dried fruit. It was among my "legal" foods and it seemed to satisfy my craving for something sweet, hence I would demolish a packet of dates in one sitting, or a packet of dried figs or apricots.
Looking back, it is hard to believe that I persisted two-and-a-half years with the food allergy line. My health improved little, if at all. Yet I was convinced I would one day find the food, or foods, to which I was allergic, and my problems would be over. I now believe the cure for so-called food allergies is to build up your general health and eliminate the root cause of the problem, which is a weakened immune system.

Many so-called allergies are actually food addictions. If you find yourself craving - and eating - large amounts of any food then you are almost certainly addicted to that food. Food addiction can be just as powerful as addiction to alcohol, cigarettes and drugs.

An underlying hypoglycemia, or low blood sugar, seems to exist whenever addictions occur. Tests have found hypoglycemia is almost universal in alcoholics. I believe it is usually present in people with chronic fatigue syndrome too. The encouraging thing about low blood sugar is that you can overcome it by diet alone.

The first step is to avoid all refined sugars and also to restrict even natural sugars such as fruit and juices, as well as alcohol and caffeine. If you have low blood sugar, the chances are that you crave sweet things, especially when you are tired or under stress. In fact, if you regularly get irresistible cravings for sweet it is almost certain that you have low blood sugar.

So giving up sugar and sweet things can be an enormous battle at first. However, when you start to notice the amazing increase in your energy you will be less tempted to eat sweet things because you know the inevitable 'slump' will follow.

So, what is a healthy diet? There's no easy answer because almost every expert seems to differ. Some say you should eat lightly or even have no breakfast at all while others say breakfast like a king, lunch like a prince and dinner like a pauper. Some promote a vegetarian diet while others say animal protein is essential for good health. Some believe whole grains should be the basis of the diet while others say 'grain is for the birds' and warn of allergies to wheat.

Some tell you to eat margarine or low-fat spreads, while others promote butter because it is 'natural'. And then there is the endless list of foods and drinks which you should avoid, depending on which expert you read - in fact, if you believed everything written on diet, there would be very little left to eat.

Even the 'official' view of what makes up a good diet has not been consistent during the past 30 years or so. In the 1960s, when I was a child, we were advised to eat daily from the 'four food groups' - meat, dairy products, cereals and fruit/vegetables. Milk was the old-fashioned type with a layer of cream on top and it was quite acceptable to pour the cream on your porridge. We were told to drink a pint of milk a day and eat plenty of dairy products and meat.
But things started to change in the late 1970s and early '80s when Nathan Pritikin's low-fat, high-carbohydrate diet caught the attention of the media. Gradually, the prevailing wisdom changed. Today, the official line from health authorities is that we should cut back on fatty dairy products and meat, and eat plenty of complex carbohydrates such as bread and pasta.

Pasta has become a gourmet food and ethnic diets have become popular because they are supposedly more healthy than the old-fashioned British fare of 'meat and three veges'. Gone are the days of 'bangers and mash' for dinner, and apple crumble with cream. Instead, it's pasta and salad, with frozen yoghurt (kow-fat, of course) for dessert.

But the tide is starting to turn again. Many people who have faithfully followed the low-fat, high-carbohydrate gospel have found it doesn't provide the boundless energy and super health that the experts say it will. In fact, many people wonder why they feel so lousy when they are so conscientiously doing everything 'right' and following the 'food pyramid' guidelines to the letter.

Because of the discovery that low-fat diets don't suit everyone, books promoting low-carbohydrate diets are starting to make a come-back. In fact, this is the current wave of diet wisdom. Protein and fat - which for so long have been the 'bad guys' of nutrition are now okay to eat in large quantities – the Atkins diet being the classic example.

One explanation for the confusion and contradiction which exist with regard to diet, is the theory of 'body types'. This concept dates back thousands of years, to the ancient Hindus, Greeks and Romans, who recognised that people are born with different physical constitutions. Lucretius, the Roman philosopher, is credited with the saying “One man's meat is another man's poison” and there is the old nursery rhyme about Jack Sprat, who could eat no fat, and his wife who could eat no lean.

In the 1960s, Henry Bieler, in his book Food Is Your Best Medicine, classified individuals according to the dominance of their adrenal, thyroid or pituitary glands. Even before that, Dr William Sheldon had classified three basic physical types - mesomorph (muscular), ectomorph (thin) and endomorph (fleshy).

Dr Elliot Abravalen developed the 'body type diet' in the 1980s, using Bieler's adrenal, thyroid and pituitary types, and adding a fourth the gondal type for women. Thyroid types (of which I am one) tend to be thin, sometimes underweight, during their youth and when they do put on fat it is in a roll around their middle. Thyroid types crave sweet and starchy food, which stimulate the thyroid gland. They must be careful not to overeat sugars and starches, and must build up their weak adrenal glands with light protein foods such as eggs, chicken and fish.
Thyroid types should also add butter and oils to their food, to slow down the absorption of carbohydrates. They must be particularly careful not to overdo sweets, cakes and white bread products when tired or under stress.

Adrenal types tend to be solidly built and muscular. They love red meat, nuts, salty and fatty food which stimulate the adrenal glands and given them energy. They do best on a diet which is low in fat and protein, and high in complex carbohydrates.

Pituitary types tend to look boyish or girlish even as adults, and their cravings are for dairy products, which they can get addicted to. They should avoid dairy products until they have balanced their metabolisms and the less dairy food they eat, the better. Instead, they should eat meat, fish and poultry with whole grains and vegetables.

Women who are gonadal types love spicy, creamy and oily food and their weight tends to go on their hips. They do best with a light breakfast such as fruit or cereal, a moderate lunch and their main meal at night but avoiding spicy and oily dishes.

I suspect thyroid types tend to suffer from chronic fatigue syndrome more than any other. The diet recommended for thyroid types is essentially the same as that for hypoglycemia (see Chapter 5).

Another controversial aspect of nutrition is whether or not to take supplements. Some experts recommend a list of vitamin minerals, herbs and other supplements as long as your arm, while others say you can get all the nutrients you need from a balanced diet. I don't have any hard and fast opinion on supplements. I have tried various vitamins and minerals but never found any dramatic benefits, although I have heard of many others who attribute their recovery to a certain supplement.

Anti-oxidants are currently being promoted as a cure for virtually everything, including chronic fatigue syndrome. I have not tried anti-oxidants, largely because they are expensive and I have never liked parting with money unless I am reasonably sure of getting a good return on the investment. But I wouldn’t discourage anyone from trying anti-oxidants.

However, it is worth remembering that all supplements – even "natural" products - are essentially drugs and they do have side effects. Supplements can never take the place of a balanced moderate diet. You can't continue your old, destructive eating habits and take a supplement, expecting it to work miracles. It just doesn't work that way. It's far better - and far less expensive - to work on your diet first.

The effects of a good diet should be dramatic within a few weeks. Only then should you consider whether you need to take supplements as well.
Chapter 7
EXERCISE AND REST

Millions of people around the world follow exercise programmes in the belief that it is good for their health. They jog, walk, go to the gym, swim, cycle, play squash or golf to "keep fit". I don't want to knock the benefits of exercise, it is undoubtedly good for us in moderation. But when you suffer from chronic fatigue syndrome, exercise is a mixed blessing.

Many people in the early stages of chronic fatigue syndrome begin to exercise more, in the belief that their tiredness is caused by "getting unfit". Sadly, the exercise can push them over the edge into a state of collapse. At that point there is only one thing you can do - rest. At last, you have to listen to what your body has been trying to tell you.

In my late teens and early 20s I was a competitive runner. I was proud of my fitness and my ability to push myself to a state of exhaustion on long runs. It's a great feeling to be fit. But if you ignore your body's cries for rest, something has to give eventually. Exercise enthusiasts tend to be highly-motivated individuals who push themselves hard in both work and play. That is good - up to a certain point. But life is a question of balance.

Work must be balanced with rest and sleep. It's common sense. In the early stages of your recovery from chronic fatigue syndrome you must be careful not to over-exercise, nor over-exert yourself physically in any other way. The normal tasks of daily living will provide enough exercise. Gradually, you can build up to walking but never push yourself too hard. Forget the old adage of "no gain without pain". Instead think: "no pain means maximum gain".

When it starts to hurt or you feel exhausted, back off. You're not training for the Olympics. You simply want good health. And when you do push yourself too hard, as you inevitably will, don't feel guilty about resting. Forget about exercise until you've fully recovered from your over-exertion.

At the other end of the scale is rest. When you are suffering from severe chronic fatigue syndrome, bed rest is the only option. You don't have the strength to do anything else. But there is a danger in too much bed rest because you lose muscle condition, which is very difficult to regain. It's best not to stay in bed more than two or three days. As soon as possible, get up and try to do something around the house.
Try to go about your normal work but listen to your body and stop as soon as you feel the signs of over-exertion. Everyone's capacity is different. There are no hard and fast rules, you have to work it out for yourself. Life is a balance of exercise, rest and sleep. When we get any of those three out of balance, our health suffers.
Chapter 8

You CAN get well

Sometimes you will despair of ever getting well. A dark cloud of depression will close in around you and the situation will seem hopeless but somehow you must cling to that glimmer of hope - of faith that you will get well.

Never lose hope. And if you have faith in God, you have a huge advantage in your battle against chronic fatigue syndrome. A major illness can either destroy a person’s faith if they become bitter against God or it can bring about a new depth of relationship with God.

I have always had a simple faith in God thanks to the grounding of some wonderful Catholic nuns who taught me at primary school and later to evangelical Christians who taught me to study the Bible and demonstrated genuine Christian love. The existence of God has always been self-evident to me, as obvious as the existence of life itself. So when I became sick it was natural to cry out to God, "why?"

I still don't know all the reasons why but I do know that the suffering I went through brought about huge changes for the better in my character. And it drew me closer to God because I had to rely on Him for strength just to get through each day. There is often a spiritual basis to sickness. If you are always striving to achieve, pushing your body beyond the point of fatigue and whipping it along with stimulants such as caffeine and sugar, something will eventually give.

If you have inherited a strong constitution you may be able to continue that kind of lifestyle for many years. But if you are reading this book the chances are your body has already succumbed to some bad lifestyle habits. It is time to re-evaluate and that can include a spiritual re-assessment of the direction of your life.

Pray that you will be fully restored to health. If you don't believe in God, believe in the power within your body to heal itself, given the right conditions of a good diet and adequate rest.
Above all, never lose hope. Many others before you have suffered from chronic fatigue syndrome and have come out the other end. Even if it feels now that you will never get well, cling to whatever tiny amount of faith you have. You can get well. You WILL get well. My prayer is that this book will help you on your journey to recovery.

Chris Mole

www.chronicfatigue-help.com

Email me with your feedback on this book, at chris@plainwords.co.nz

More helpful resources:

‘I Cured Chronic Fatigue Syndrome - You Can Too’ - By Jeremy Carew Reid. Inspiring book with a lot of useful information that will help you get well. Based on Ayurvedic principles. Find out more