

CONDEMNED TO A LIFE OF FITNESS - David Hirst

At the age of seventeen I became almost blind in one eye. I spent two frantic weeks in hospital as doctors pumped me with a variety of drugs and a series of steroid injections to clear the infection that had formed a grey mass over my left eye. In an effort to blitz the infection, some of those injections went directly into the eyeball. The needle going into the eye was fine - the pain which followed was the worst I have experienced before or since.

Identifying the immediate culprit did not appear to be a problem. The doctors put it down to inflammation within the eye called iridocyclitis. However, it was quite obvious from the number of blood tests they took, and the questions they asked about whether I had suffered any back pain, that they were looking for something else.

This pattern repeated itself several times over the next few years. On each occasion I went straight to the casualty department rather than to my GP, to make sure I got prompt treatment from an ophthalmology team.

By now I had developed another problem - pain and stiffness especially in the buttocks, or down the back of the thighs. I lost weight and couldn't sleep because of the discomfort, and found myself becoming an insomniac.

My one escape from all this was my love of football. But even that was suffering. The pain at times was so excruciating I found myself unable to run properly. In one match, I was challenging for the ball and the goalkeeper came down on my back like a ton of bricks. I played on, but when I got home I could barely climb the stairs so acute was the pain in my lower back.

It went on for months and I was becoming desperate. The doctor gave me painkillers, but they had little effect. So I paid for a series of alternative remedies: acupuncture, physiotherapy and osteopathy. The pain seemed to be worse after manipulation on the spine, so I stopped attending these sessions.

Just when it seemed all hope was lost I read an article in the Sunday Times about a surgeon in Doncaster who was carrying out pioneering surgical work on back problems. I saw him privately, and after explaining my difficulties, he immediately recommended I meet his colleague, a specialist in rheumatoid arthritis.

It was through him that I discovered, at the age of 23, that I had the wierd and wonderfully-named condition, ankylosing spondylitis, a painful, inflammatory rheumatic disease of the spine, that can also affect other parts of the body, including the eyes. As a journalist I am interested in words. I discovered that ankylosing spondylitis originates from the words: SPONDY - from "spondylos", the Greek word for a vertebrae; ITIS - the inflammation of the joints, which causes pain; and ANKYLOSIS - this is the bony fusion, which can follow inflammation.

I felt both relieved at having pinpointed the problem, yet frightened about the future. There is no cure for ankylosing spondylitis and no two cases are the same.

I soon discovered though that having AS is not the end of the world. Quite the contrary. By following the advice of the experts, I have lived a full and active life in every possible sense.

The choice was simple: either stay fit and supple forever or risk becoming crippled. In other words, having this disease has condemned me to a life of fitness because regular exercise and good posture is the best form of treatment for ankylosing spondylitis. The choice was easy.

>From the moment I was diagnosed with AS and prescribed the necessary anti-inflammatory drugs the pain disappeared overnight. More importantly, it allowed me to perform a daily series of exercises aimed at keeping the back supple and maintaining the mobility which is crucial. It's

become part of my daily routine for the past 24 years.

Self-help and the discipline that goes with it is vital. Any exercise where muscles are stretched and strengthened are helpful - swimming is ideal. I must confess that for once I ignored the advice of the experts and continued playing football (contact sports can lead to joints getting knocked, leading to further complications for AS sufferers).

At the age of 47, I still play competitive football to a high standard against guys more than 20 years my junior.

As you get older with more responsibilities, time becomes tight, so over the years nights of time-consuming football practise have given way to running, either on grass or woodland to take the stress off the joints, or sessions on my motorised treadmill. There are no hard and fast rules about the exercise you do. That is down to the individual and what interests that person.

Another regular exercise I have maintained over the years is to take the weight off the spine by lying flat on the floor (face down) for between 20 minutes and half an hour. This is not as uncomfortable as it might seem. In fact, years ago, it was a godsend at a Cubs weekend for dads and lads. Many of the dads missed the comfort of their own bed and found it impossible to sleep on the floor of the tent, whereas I slept like a log. Give me a firm, comfortable bed anyday - though for years now I have slept on my stomach WITHOUT a pillow.

A good diet and relaxation are also important. So too is making sure you don't get overweight and put extra pressure on the spine. My wife reckons I'm developing a middle-aged spread, but I feel lucky in that my weight has remained fairly constant and is about 68 kg (10 stones 8 lbs?) at the moment. People think I'm skinny, but I am the correct weight for my height and, more importantly, it makes it easier for me to keep in the shape I need to be to fight AS.

It hasn't all been plain sailing. A few years after AS was diagnosed, my left knee ballooned and I was taken into hospital. There were anxious looks from the doctors and nurses and mutterings of septic arthritis, until I pointed out my history of AS. And, sure enough, a biopsy revealed what I had suspected - that AS was the culprit.

It got very much like that over the years. I have learned to read the signs. I know when AS is attacking my system. In years gone by I would go straight to hospital and on occasions I was advising the medical staff about the disease and how to treat it. Nowadays, an attack of AS usually manifests itself through pressure in the eye. In that case I increase the Preservex (Aceclofenac) medication and try to get more day-to-day rest until the problem goes away.

I have many more good days than bad and it is a long time since I last needed hospital treatment. When ankylosing spondylitis is active, your health as a whole suffers. It can be loss of weight, feeling unusually tired or even depressed.

Over the years it has got easier, though it has meant a lot of hard work to control it and not allow it to ruin my life. I know of another AS sufferer, the same age as me, who was unlucky in that his condition was diagnosed at a later age. He is suffering for it now. His neck is permanently stiff and his head tilts to one side.

However, there remains an extraordinary amount of ignorance about the condition and the effect it can have on the sufferer (apparently there are 80,000 of us in Britain).

Some life insurance companies know little about ankylosing spondylitis and add loading onto policies for AS sufferers. I have found in the past that getting health cover is a particular nightmare.

Employers also need educating, as I once found to my cost. Several years ago, my job description changed and my new role involved carrying some heavy equipment. I didn't think

twice about the effect it might have on my ankylosing spondylitis. I was simply grateful for the job I had been given.

Everything went fine until I developed pain on the right side of my abdomen. I consulted a specialist and his conclusion was that carrying equipment was aggravating the AS, which had been dormant for some time. This was backed up by the company's own doctor.

Yet over the next six months the company (one of Britain's leading broadcasters) offered little or no support in terms of reducing the burden I was expected to carry. I can only assume that some stupid individual must have decided I was "trying it on". After all, back trouble is one of the most common complaints seen in a doctor's surgery.

The result was a series of AS flare-ups, a loss of more than a stone in weight, many sleepless nights and time off sick. In fact, more time off than in my previous 20-odd years in work. Good management, eh?

Life is too short for that kind of unnecessary stress. In the end I left of my own accord to become self-employed, where I have greater control over how I work and what jobs I do, with no heavy lifting involved. The National Ankylosing Spondylitis Society will tell you that most people with AS are highly-motivated and are reported to have less time off work than average.

For me the biggest worry has always been whether our three children would develop AS. Our middle child - a keen footballer - had a blood test a couple of years ago. It turned out negative. I am told the chance of them developing AS, even in mild form is very small.

Let's hope so. If any of them does, I'm right here to give them all the expert advice they'll need - starting with a five mile run!