Q. Can an athlete continue to perform at the same level with Addison's Disease with proper amounts of medication?

A. Although I am not aware of any professional athletes with Addison's disease, certainly many Addisonians can do strenuous exercise and participate in sports of all types. Each person needs to develop his or her own sense of balance between exercise and steroid dosing by trial and error. Extra fluids, salt and calories are needed, especially in warm climates.

Q. I read all kinds of stuff regarding cardio-fitness. And I read all kinds of stuff saying that we with adrenal problems should not exert ourselves longer than 45 minutes or excess cortisol kicks in and will further stress our bodies. Can you give me some general guidelines as to length of time we can exercise in total and of that time how much should be spend on exertion vs. just a gentle heart rate increase? I hope that makes sense.

A. I believe everyone should try to stay physically fit with regular exercise and good diet. There is no specific restriction on exercise for people with Addison's disease. For general fitness, I suggest an aerobic routine like a treadmill for 30 minutes with added training exercises like weights if desired. There is nothing wrong with doing more exercise - just listen to your body. Make sure you stay well hydrated and replace salt as needed, especially if you are exercising in hot weather. If the exercise causes excess fatigue, it may be necessary to add a little extra hydrocortisone before the next routine. Start with an extra 5 mg and go up from there if needed.

Q. I have benefited greatly from DHEA supplementation. My doctor is not big on this. I am taking pharmaceutical grade 20 (mg?). The more I take the better I feel. At 150 (mg?) I was feeling GREAT but then I read to only take 16 to 20 (mg?) per day so I am now taking just the one tablet. Does the NADF have any recommendations on supplementing with DHEA as to frequency and dosage size? (I get the DHEA at the health food store and the bottle is at home. I am writing this in my office so I can't verify the dosage ...mg? I think) Thank you so much for your guidance.

A. My suggestion for DHEA is 25 mg per day for women, 50 mg for men. It doesn't seem to do much for everyone. If it helps with overall sense of well being (admittedly vague), keep taking it. If
Q. Is it common for Addisonian’s to experience body aches, cramping and muscle spasms? What might be the cause? Is there any feedback data concerning successful treatment modalities from patients?

A. Untreated or poorly replaced Addison’s disease can cause muscle spasms and cramps, especially in the abdomen. These symptoms usually resolve promptly with hydrocortisone because they are primarily due to the electrolyte abnormalities of untreated adrenal insufficiency (high potassium and low sodium). If a treated Addisonian continued to have muscle cramps or aches when all the other symptoms have resolved, other causes should be sought, especially hypothyroidism which is very commonly associated with Addison’s disease.

Q. I was wondering it there is a healthy weight maintenance diet that people with Addison’s should follow, especially when hypoglycemia is a concern. If you could send me any information that would be wonderful.

A. The best diet for people with Addison’s disease is a well balanced nutritious diet with three meals per day, adequate complex carbohydrate and protein, and adequate salt. If hypoglycemia is frequent, there is probably a need for a higher dose of hydrocortisone, but adding small snacks between meals can help. Addisonsians must drink enough water to avoid dehydration and low blood pressure, and increase fluids with exercise or in hot weather. Maintaining a normal weight is important for everyone, including people with adrenal insufficiency. Beyond these generalities, there is no specific “Addison’s” diet regimen.

Q. How quickly can changes to concentrations of sodium and potassium occur in a body?

A. Sodium and potassium changes can occur in minutes in the setting of acute illness in an Addisonian.

Q. I have had Addison’s disease since 1972. Within the past year, I have had experienced low blood pressure more frequently than before. I have tried water, Gatorade®, increased prednisone and fludrocortisone acetate, and am concerned that I am not getting a long-term solution. Any ideas or confirmation?

A. Low blood pressure is a cardinal feature of Addison’s disease. Unless there is evidence of some other factor, my first response would be to increase the fludrocortisone acetate dose until the
blood pressure is normal. I would expect your doctor to be able to document the need for an increased dose of fludrocortisone acetate by finding an elevated level of plasma renin and possibly as elevated serum potassium. I have many patients who need 0.3 mg of fludrocortisone acetate a day.

From Q & A by Dr. Margulies, MD, FACE, FACP, VOL. XXIII, No. 2 • 2008

Q. Is there any information on steroid dosing in high altitude conditions? It affects breathing, I believe, and I thought I read somewhere that we should up our steroid replacement a bit for the altitude stress.

A. An interesting question that I have not been asked before. I found one study on adding fairly low dose glucocorticoids to normal people suddenly dropped off at a high altitude. It showed that the steroids (in the equivalent of prednisone 10 mg) helped them function better than people not treated. I have not seen a study of Addisonians, but extrapolating the data, it would make sense to increase the dose of hydrocortisone in an Addisonian by 20 to 30 mg for acute high altitude exposure. If a gradual increase in altitude is encountered, this would probably not be necessary. Also, after prolonged exposure to high altitude, the body adjusts and extra steroids would not be required.

From NADF News®, VOL. XX, No. 3 • 2005

Brittle Bones Can Affect Older Men As Well
Fractures less common but more lethal for men than for women, experts say.

By E.J. Mundell
HealthDay Reporter
(Reprinted using the Fair Use Act.)

SUNDAY, July 10 (HealthDay News) — ...As for exercise, its benefits are more about balance than bones, according to Weber. “Exercise’s effects on the skeleton tend to be fairly modest,” he explained. “When we prescribe exercise for older people we’re doing it not only to help bone density but to increase strength and reduce their risk of falls.”

Lane agreed. “You need two things for a fracture: bad bones and a fall. There's an easy way to tell if you're at high risk for falling: try standing on one leg for 12 seconds. If you can't do that, then by definition you're an unsteady individual who needs fall protection” such as sturdy shoes, a cane or walker, he said.

But failing balance can be restored, and one of the world's oldest interventions remains among the most effective. “The most successful method is Tai Chi,” Lane said. “All of the YMCAs in New York now teach Tai Chi, and we send all the people who fail the one-leg test to the Y to learn it.”

More information:

Bone up on bone loss at the American Academy of Orthopaedic Surgeons.

(SOURCES: Thomas J. Weber, M.D., assistant professor, medicine, division of endocrinology,
HORROR STORIES
Two more United States citizens have died from adrenal disease!
(Borrowed from the Addison’s Disease Support Group for Northern Illinois (ADSGNI) Spring 2006 Newsletter, who was alerted to the story courtesy of NADF and ADSGNI member Lisa Savegnago.)

“Wheaton North mourns sophomore”
By Jack Komperda and Justin Kmitch
Daily Herald Staff Writers
(reprinted using the Fair Use Act)

Kevin Newman was never the biggest kid in school. He wasn’t the biggest on the football field, either. But friends and family said his heart made up for it. “He was little, but he was tough,” said Sam Fawkes, a longtime friend who grew up down the street from the Wheaton North High School sophomore. “He was always a fun kid, always smiling and laughing.”

Kevin, 16, died Wednesday of complications from Addison’s disease, a hormonal disorder that causes muscle weakness and weight loss.

Fawkes recalled Kevin as an outgoing guy who talked him into playing youth football in elementary school through the Carol Stream Panthers organization and again later when they were freshmen at Wheaton North. “He was always the one lowering his shoulder and plowing over people,” Fawkes said.

Steve Hoel coached Kevin on the sixth- and seventh-grade team in 2001 that defeated Wheaton in the Bill George Super Bowl. Kevin played defensive line and sometimes linebacker during his two years on the team. “The thing about Kev was his heart. He was always kind of the smallest kid on the team, but he was also the hardest hitting. He’d line up against a kid twice his size and put a wallop on him like he never saw coming from a little guy,” Hoel said. “He never let his size be an issue no matter where he played on the field.”

Kevin’s father, Michael, said his son’s enthusiasm for sports came from watching his older brother, Luke.
Beyond sports, his father said, Kevin was able to cultivate a close network of friends. “He was a fun, popular classmate,” Michael Newman said. “He had lots of friends. He was a real boy’s boy.”

Fawkes said he joined more than 30 of his classmates from Wheaton North Tuesday at Central DuPage Hospital in Winfield. Most sat silent, while others cried during the night as they waited for word of Kevin’s condition.

“Everybody loved him,” Fawkes said.”

It happened in Illinois, home of the largest NADF affiliated adrenal support group in the United States. Why? We are hoping that a NADF member, with the soul of a news reporter, will investigate, and get answers to these questions for us.

If you would like to hunt down the “ins and outs” of this story, please contact Melanie Wong at NADFMAIL@aol.com or call 1-516-487-4992....”

From NADF News®, VOL. XXI, No. 3 • 2006

NADF SPORTING NEWS
It was a summer of amazing athletic feats performed by individuals who have chronic adrenal insufficiency (Addison’s disease).

DUSTY HARDMAN

On Sunday, September 3rd, NADF’S very own Idaho (Montana and Wyoming) Addison’s Support Group Leader/Facilitator Justine (Dusty) Hardman ran the grueling Grant Tetons Races Marathon, held at the Grand Targhee Ski & Summer Resort in Alta, Wyoming. Why grueling?

The marathon was 26.2 miles long, with 23 miles of the race run on trails and only 3.2 miles run on road, all at an elevation of 5,000 vertical feet. It was the biggest physical challenge that Dusty ever faced.

She shared that she wasn’t running the race to win. Her goal was to complete the race and to remind Addisonian’s what can be accomplished.

During her eight months of training for the race, Dusty not only planned the race with a message for Addisonians in mind, but also went as far as to raise money to help NADF help others. She collected a grand total of $963.60! We send a heartfelt thank you out to Dusty.

After the race, Dusty relayed, “The marathon was awesome. I finished 17th overall, out of 44. I am very happy with that finish, considering I just wanted to finish upright!”

You did so much more then that, Dusty. You inspired us all. Congratulations!

On Sept. 16th, less then two weeks after the Grand Teton Races Marathon, Dusty participated in a Trail Race and the weekend after that, hit the road again with a Bike/Run Race on September 23rd. Her accomplishments and stamina boggle the mind!
BAINBRIDGE

Dan Bainbridge, inspired by Dusty’s athletic accomplishments, shared, “What a great thing you are doing, both for yourself and NADF. I am the father of a 16 year old boy who went through a serious Addisonian crisis at age 9. His doctor recommended that he stay as active as possible for his overall health and he has done just that. We hike, backpack and mountain bike together, but his main activity is crew (rowing).

He is starting his second year with the local rowing club (LGRC) and last year his boat won the gold metal at the Western Regional Junior Finals. Rowing is an intense form of exercise, like marathon running, but you two are both showing it can be done.”

NADF sends a big WAY TO GO! and CONGRATULATIONS! to Dan’s son.

HEATHER AND DAVE NAGY

While on vacation in Michigan, NADF Director of Fund Development, Heather Nagy, an Addisonian, and her husband Dave joined the Annual Labor Day Bridge Walk, traveling south along the five mile Mackinac Bridge, which towers 200 feet above the Mackinaw Straits, connecting the Upper and Lower Peninsula.

Seriously dedicated to NADF in her volunteer position of raising funds for NADF, Heather recognized an opportunity in her and her husband’s walk. The generous couple raised an awesome $2,006.00 toward NADF’s goals of education, support, research and a cure for chronic adrenal disease. Thank you so much, Heather and Dave!

As a follow up, Heather reported, “…the bridge walk was perfect, weatherwise and otherwise. We had a great time…”

Heather also shared that she had signed up for a 5K race. She wrote, “The 5K that I’ll be running next Thursday (Sept 21) is a marathon for me! I’m in awe of Dusty and Teresa!”

On September 23rd, Heather generously shared, “I told you I’d let you know about my 5K, so here’s the wrap-up: I *did* finish, but I walked quite a bit of it, and it was my slowest time ever. Yet, I’m still pleased.

Monday my endo and I had changed my steroid from cortisone acetate to prednisone, and my body did NOT like it! By Tuesday afternoon I was lethargic, had achy pains in every joint, and was nauseated even after I doubled the dose. When I spoke with my doc on Tuesday evening, we agreed that I’d be in the emergency room that night if I didn’t go ahead and load up with some cortisone, which I did. Wednesday I went back to my usual schedule of cortisone acetate, but I still didn’t feel well.

By Thursday I was feeling much better and decided I could probably walk the 5K. I did a combo of running and walking, and ended up with the phenomenally slow time of 36 minutes. But I finished, and I wasn’t last! :) And I was most likely the only person to participate without the function of several important endocrine glands. So 36 minutes was my own personal victory.
It’s been a long time since I did an organized race, and I really enjoyed it. I look forward to doing more, and improving each time."

Congratulations, Heather!

**TERESA WALLIN**

Teresa Wallin ran the New York City Marathon in 2002 (featured in NADF News® VOL. XVII, No’s. 2, 3 & 4 • 2002).

Following that wondrous feat, Teresa competed in sprinttriathlons and bicycle tours, but was soon sidelined with a diagnosis of fibromyalgia. She also gave birth to a healthy baby boy.

Teresa, like the Phoenix, rose from the ashes, and entered the New York City Marathon in November of this year.

She shared, “...I’m back, still struggling — but strong.”

Teresa will also be running in the Disney World Marathon in January of 2007.

**BOISE CITY OF TREES MARATHON**

On November 5th, Dusty Hardman ran another marathon - the Boise City of Trees Marathon - with another Addisonian, NADF member Linda Ambard. (Dusty was able to display the NADF banner at the race.)

**LINDA AMBARD**

Even though she now lives in Colorado, Linda claims Idaho as home. She has entered the Boise Marathon before, and actually holds the record on the old course.

But...that was all before chronic disease struck. Linda shared, “I qualified numerous times, in every marathon I ran, BEFORE Addison’s. It isn’t so easy now, but I am extremely close to my qualifying time.” “…this is my year to finally acknowledge that this is something I will have to get beyond (I’ve dealt with this insipid disease since 1997). I am stronger and healthier than I have been in a long time!” “I have slowed down a lot since Addison’s Disease, but I am trying to define my life the way I want to live it!”

Linda hopes, through running the Boise Marathon, she will qualify for the Boston Marathon.

**DEBORAH STANTON**

Long Island NADF member Deborah Stanton expressed appreciation for news of the marvelous accomplishments of her fellow Addisonians. She wrote, “It helps us have hope when we see others who are managing to find energy to do the things we enjoy. I hope to be able to send an encouraging report to share with others eventually from my horseback riding adventures as an Addisonian.”
On the day Deborah was diagnosed with Addison’s disease, her four year old chestnut thoroughbred filly collapsed with Equine Protozoal Myeloencephalitis (EPM) (a protozoa that attacks the brain and nervous system of young horses). Deborah envisioned getting well along with her fellow patient, hoping the recovering youngster would blossom into her next event horse.

On the day that I corresponded with Deborah about her plans, she related that she had been involved in an accident with her filly.

Deborah also owns a 24 year old former event horse mare. She often starts out by riding the mare, while leading the filly with a rope, hoping to tire the frisky youngster out a bit before getting on her back.

That day, Deborah tried riding the filly first, while leading the old timer. When she got to an open field, and tried to turn, the lead line hit the filly’s rear end, triggering explosive bucking.

Deborah might have been able to ride out the filly’s exuberance, but the lead rope had somehow gotten across her throat, and the mare, feeling the need to go her own way, pulled Deborah off from behind!

Thankfully, Deborah was not seriously hurt by her fall. “No Addison’s problems...just cuts and bruises”, she assured.

Thank goodness! Be careful Deborah!

Deborah shared that the toughest part of the experience was having to repeatedly explain to her art students the rope burn around her neck.

Later she related, “The filly tried to go bucking bronco again last night, but I stayed on! And today went smoothly. Whew.!”

Be safe Deborah, and best of luck with your frisky filly.

JIM MITCHELL

Jim Mitchell has Addison’s disease, and lives in Pennsylvania with his wife and two daughters.

Jim wrote “...I did (the Downingtown “Good Neighbor” day festivities 5K run) in 22 minutes and some change. It was a good run.

I’m still playing soccer despite the occasional minor injuries. I’m feeling fit and I finally have an endocrinologist who is in tune with what I want to accomplish athletically. I even told all the guys that I play soccer with that if I ever got knocked out (which is unlikely) that they should just dial 911 without hesitating.

Hopefully they won’t treat me any differently, which I don’t think they will.

It is such a joy to be competing and playing. I feel like I’ve got a new lease on life...”
Way to go, Jim! Thank you for sharing your story with us.

From NADF News®, VOL. XXI, No. 4 • 2006

NADF SPORTING NEWS

LINDA AMBARD RUNS THE LAS VEGAS MARATHON

A month before the race, Linda shared, “...I hope that it doesn’t rain! Though it won’t be half as much fun as running with Dusty in Boise, this will probably be my last chance to qualify for Boston this year. I am a little concerned about pushing myself this hard in such a short time span. I haven’t even completely recovered from Boise yet.

I appreciate your thoughts and encouragement!

Linda Ambard”

On Sunday, December 10th, NADF member and Addisonian Linda Ambard ran in the “New Las Vegas Marathon”.

After the race, Linda shared, “Well, I didn’t quite qualify for the Boston Marathon with my latest effort in Las Vegas. I did, however, run a great race with negative splits. I ran the last thirteen miles in one hour, 53 minutes.

Unfortunately, the first half was much slower. 16,000 plus runners, to include walkers, half marathoners, and wheel chairs started together. This created a horrible bottle neck of runners. Until the 10 mile mark where we split from the half marathon group, I was constantly behind large groups of slower runners or walkers.

To add to my woes, I had hydrated well on Saturday. Unfortunately, my kidneys flushed water out six times in the first thirteen miles. Six times at a minimum of a one minute pause in running did not help matters. I ended with a 4:10,

SO....I am going to look for another marathon in Feb or March.

I am feeling really tired this week. Maybe this has something to do with how fast I ran the second half. I am struggling with abdominal problems and severe fatigue.

Yes, I am taking time off of running (at least two weeks).

I am so grateful for all of the e-mails and support that you have all given me.

Linda Ambard”

Congratulations to Linda on her awesome accomplishment!

(To interact with Linda and offer her your thoughts and personal congratulations, she can be e-mailed at ambardpl@msn.com)
ATHLETES FOR AWARENESS

August 4th, 2007 marked an unprecedented event in NADF's history.

Addisonian Super-Athlete Dusty Hardman was undergoing grueling training again, this time for the 140.6 mile Guerneville, California Vineman Triathlon.

The NADF affiliated NorCal Addison's Disease Support Group saw an opportunity to work with Dusty to help her raise money for NADF and support for adrenal patients nationwide. NADF Publicity Director Virginia Perry and NorCal Addison's Support Group Co-Leader Trice Roberts tirelessly sent out press releases, created official forms, arranged housing and travel for volunteers; basically worked very hard to make Dusty's fundraiser a success.

We also want to thank NADF Support Group Coordinator Pam Robbins for the vital assistance she lent to the fund raising effort.

Go Dusty, Go!

The Story of Dusty Hardman

Having lived through twelve long winters in Teton Valley, Idaho, Dusty Hardman has learned the value of athletic competition. With nine months of cold, snow and ice, “you had to do something to keep you going,” she says.

But in 2001, Addison's Disease, a rare, life-threatening but treatable illness caused by insufficient adrenal gland hormone production, suddenly sidelined this aggressive downhill mountain biking competitor.

Suffering from exhaustion, nausea, chest pain and low blood pressure, Dusty spent eight months going from doctor to doctor without a diagnosis, and ultimately was told she was simply depressed.

After doing her own research and writing a paper summarizing her findings, Dusty finally convinced her doctor to prescribe medication for Addison's Disease, “and I've never looked back,” she says.

Since then, Dusty's health has improved at a slow but steady climb, and her competitive spirit has soared. Over the past five years, she’s run three marathons in Wyoming, Idaho and Colorado, with increasingly better finish times.

“With a 4,000-foot elevation gain, the Teton Races in Idaho were tough,” Dusty says.

But now she has stepped up to an even greater challenge: the Vineman Triathlon in California this August, with a 2.4-mile swim, 112-mile bike ride, and 26.2-mile run.

And she's combined her love of athletic competition with a new passion: raising funds for the National Adrenal Diseases Foundation (NADF). “With a rare disease like Addison's, people can die before diagnosis,” she explains. “Yet once treatment begins, most patients have a normal life expectancy. NADF is the only organization that educates the medical community about this disease
and offers support and information to patients and their families.”
Along with serving as leader for NADF’s Idaho, Montana, and Wyoming patient support groups, last year Dusty raised close to $1,000 for NADF during the Teton races.

Now you can help her raise even more by making a 100% tax-deductible pledge of “Dusty Bucks” for her Vineman race.

Dusty’s next steps after Vineman? She’s shooting for a 50-mile trail run in Wyoming and has entered the lottery for the New York Marathon.

With a life-threatening illness, does she ever get nervous about running a marathon? “Listen,” she says. “I train by myself in Idaho and Wyoming backcountry, with bears and moose to worry about. A marathon is a piece of cake.”

To keep up with Dusty’s accomplishments, go to: www.addisonssupport.com

OTHER ADDISONIAN ATHLETES IN THE NEWS

Jim Mitchell

“My official time was 23:55. I placed 172nd out of 786 runners. This time was about a minute slower than my pace last year, but I'll blame that on a nasty head cold I got a few days before the race.”

Way to go, Jim! Congratulations!

BRIARGATE MARATHON RUNNER AN INSPIRATION

BY GAIL HARRISON

Linda Ambard

Ten years ago, Linda Ambard ran a marathon in Frankfurt, Germany, and did well until the fifteenth mile. From then on she faltered and by the end of the race, she was so ill she couldn't remember her last name.

For the next two years, she underwent numerous tests and with undiagnosed symptoms of severe tremors, drastic weight loss, dangerously low blood pressure that was affecting her heart, and incohesive thoughts, she didn’t understand what was happening and feared she might be dying.

She persisted in running when she could, even during that time.

Finally, after two years of debilitating illness, she learned she had Addison’s Disease. She learned that she had had an acute Addisonian crisis during the Frankfurt marathon.

She began her battle to regain her health.

Before developing Addison’s, Ambard ran during four pregnancies.
During the fifth pregnancy, she experienced problems with pre-term labor, so she swam daily.

Taking cortisol and fludrocortisone to compensate for her adrenal system’s failure to produce those hormones enabled her to resume a normal life—as long as she trains smart and faithfully takes the medications. “Now,” says Ambard, “I am very healthy and very much plan to live to a very old age, running!”

At the age of 15, Ambard, a student at a small private school in Idaho, was shy and overweight. Accepting a challenge to go out for cross-country, she discovered her niche and was off and running. In high school and at Idaho State University, which she attended on a running scholarship, she achieved All-American distinction.

Her first marathon, an easy win, was accomplished at 16.

Through the years Ambard did triathlons and marathons and won many races. Though she always qualified for the Boston Marathon, she never got there because she was either in college, or later after marriage, her Air Force husband was deployed, or she was pregnant or they simply didn’t have the financial resources for a trip to Boston.

But she kept the dream alive and this year she ran the Boston 2007.

Her time was not the sharp 2:50 hours she once enjoyed, but a 4:00. However, that time is very satisfying to her, not because of her present age of 46, but because she accomplished it despite Addison’s.

According to Ambard, there are five registered marathoners nationwide with Addison’s disease.

A major issue with Addison’s is the body’s failure to retain electrolytes, which can be life threatening.

Ambard says, “The first thing my endocrinologist told me was that I needed to learn to pace myself. He also told me that marathons would tax my body too much.

At the time, I had five children at home, aged 12 and under. However, running was, and still is, my selfish time. It is my time away from the everyday demands.

I’m teaching full time at Falcon High School and teach swimming at the Brairgate YMCA.

Running is as much who I am as anything else. I love being outside, the runner’s high, and the fact that no one can bother me when I run (laugh.) The phone doesn’t ring when I’m running.

It took six years to get her health stabilized to the point it is now. She ran 10 marathons from April 2006 through May 2007 and has three more on the calendar before the end of this year.

Six years ago, she began special medications and a careful regimen of physical training. She pays attention to restrictions that can cause severe problems. She can’t run in heat over 65 degrees. And she is still discovering which amount of medication works best for her.

Ambard says, “This past year, my running clicked again. No, I will never be anywhere near the top of my age group, but I am okay with that. I fell in love with running again. I entered marathon after marathon; in the process, I became part of an elite marathon group – the Marathon Maniacs. I ran
10 marathons in a calendar year. I ran in Idaho, Washington, Nevada, Louisiana, Colorado, Oregon, and, of course Massachusetts. I qualified for Boston at the Mardi Gras Marathon in New Orleans.”

Her next three races are in Oregon, Alabama and Arizona.

Ambard is exuberant about her experience in Boston. Even in atrocious weather, she loved running with the caliber of the athletes in the race, loved the excitement of the crowds, and says she zoomed up the hills in Boston because of her training in Colorado. (This year’s Pikes Peak Ascent will be her fifth.)

When she crossed the finish line in Boston and received her medal, she couldn’t stop smiling.

The Ambards moved to Briargate five years ago. Her husband, Phil, is active duty Air Force. Their children are: Patrick (24, USAFA graduate, medical school), Joshua (23, Army nursing program), Emily (21, a 2007 USAFA graduate), Alex and Tiger “Timothy” (both juniors at Liberty).

Linda Ambard is an inspiration. She shares her philosophy, “I aspire to encourage people to find an activity that they love and to stick to it. I may come to the day when I can’t run, but then I will swim or do something else. Though we all have battles that we must fight in our daily lives, I am not ready to stop. I am fighting the fight. I am finishing the race and I am keeping the faith.”

From NADF News®, VOL. XXII, No. 3 • 2007

LIVING THE LIFE OF AN ATYPICAL ADDISONIAN
by Jan Judge

It was very refreshing to read in the last NADF newsletter about how well some of our members are doing. It is incredible to believe what Dusty is undertaking! No matter what, she is a winner!

I was an advocate of exercise and played various sports prior to acquiring Addison’s disease.

I have the secondary type due to developing severe adult onset asthma and being given high doses of steroids over a long period of time.

This has drastically changed my life. I can no longer play sports and have gained over 100 pounds from the steroids. I have had many complications from the steroids, some of which include: having to have both hips replaced; osteoporosis; multiple stress fractures; steroid-induced cataracts; and myopathies and neuropathies, to name a few. I also easily go into crisis and am often on increased doses of Prednisone to stop the oncoming crash.

I remain thankful that we have the technology and medications available to treat most of these side effects as well as the Addison’s Disease itself.

I am sure that, as with any other disease, people have varying degrees of severity and different complications. For example, there are four of us in my support group who have underlying conditions and complications associated with Addison’s that have drastically affected our lives. For most of us, sports have sadly become things of the past.
I am genuinely happy for all of you who are doing well and living the lifestyle you want. It is good that the disease does not keep you down or dominate your life. I just wanted to make you aware that there is unfortunately another side of the coin. Some of us have had to put our sport shoes away, and continue to deal with limiting complications on a daily basis.

ATHLETES FOR AWARENESS

From Dusty Hardman on her races after Vineman:

- Teton Races, 50 miles, Alta, Wyoming - September 1, 2007
- Horseshoe Challenge, 20 kilometers, Driggs, ID - September 15, 2007

“Why a 50 you might ask? I’m in shape and I feel good, it’s close (about 20 miles from here). I’ve never run an Ultra before. It’s on my home turf and the views are spectacular! Doing the 50 is yet another way to test my limits and see what my body is capable of. Besides, I can eat a lot if I run 50 miles, right?”

Supplied as a service by:

The National Adrenal Diseases Foundation is a non-profit organization providing information, education and support to all persons affected by adrenal disease.

For more information on joining NADF, or to find a support group in your area, contact:

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