

GOLD METTLE

Maureen Manley had hoped to represent the U.S. in cycling in the 1992 Olympics, but found her greatest challenge elsewhere.



(ONE WILD RIDE)

Maureen Manley went from being a world-class cyclist to needing a cane to cross the driveway. But thanks to diet, drugs, determination and lots of exercise, 18 years after her diagnosis of MS she's back on the bike.

{continues on next page}



At 19, inspired by U.S. cyclist Connie Carpenter's photo-finish, gold-medal race in the **1984 Summer Olympics**, Maureen Manley set an ambitious goal — to be the best female cyclist in the world.

By age 25, she was, amazingly, poised to achieve it. "We'd just set a record at nationals and I was the only female racer on the U.S. team chosen to be in two road events at the world championships," she says. "The Olympics were the next year, and I felt like I was exactly where I wanted to be."

Yet, suddenly, training seemed to be taking more of a toll. "I felt weak and exhausted," says Manley, now 44. "And my vision was blurring sometimes." She got new sunglasses from Oakley, her sponsor at the time, and pushed on. At the world championships in Germany in 1991, a fatigued Manley faltered and the team came in fourth. "It was devastating that I couldn't be there for my team," she says. "I thought I'd overtrained."

But it was at the Tour de France Féminin a few weeks later that she was forced to confront her health problems. Struggling to stay with the leaders during the mountain phase of the women's version of the famed multiday endurance race, Manley's vision blurred so badly that she crashed. "I finished the race, and everyone was asking 'What happened?'" she recalls. "I threw my bike and said, 'I can't see when I go

[CLICK HERE TO READ MORE](#)

1 2 3 4 5 6

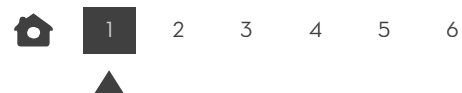
that she crashed. “I finished the race, and everyone was asking ‘What happened?’” she recalls. “I threw my bike and said, ‘I can’t see when I go hard!’ Everyone knew it was time for me to go home.”

THE DIAGNOSIS

At first, Manley feared she had a brain tumor. Or maybe diabetes. A doctor ordered an MRI to “rule in or out MS.” When she asked the doctor what she’d be feeling if it were **multiple sclerosis**, a disease in which the immune system attacks the central nervous system, Manley realized the symptoms fit her to a T. Later, when she got the call that the scan wasn’t normal, she looked at her friend. “This is the beginning of the rest of my life,” she remembers telling him. “Then I bawled my eyes out.”

Today, it’s better known that people with MS have normal or near-normal life expectancy and a handful of drugs to help keep the autoimmune response in check. But when Manley learned her diagnosis, all she knew was that it was a chronic degenerative disease and there was no cure. She told her boyfriend: “Now is a good time for you to run.”

He didn’t, and Manley credits her teammates, friends and family with helping her cope — and even laugh — during those first few terrible



He didn't, and Manley credits her teammates, friends and family with helping her cope — and even laugh — during those first few terrible months. While there were no drug therapies yet — today there are seven — she learned the importance of managing stress, eating right and resting. She even tried to race again, promising everyone that her health came first, but she struggled. “I quit, but I didn't retire,” she says. “I couldn't admit that I was done — but I was.”

The disease, which erodes myelin — the fatty substance surrounding nerves that is crucial to transmitting signals in the brain, spinal cord and optic nerves — progressed rapidly in the first year, and she soon needed a cane to walk. It was clear she couldn't stay in Boulder, CO, a town where people knew her as a top athlete. “Everything there reminded me of my loss,” she says.

A FRESH START

Manley and her boyfriend moved to Seattle, where she immersed herself in learning about nutrition, alternative medicine, and the mind-body-spirit relationship in MS. “I knew there was something more to my life, so I made a decision to figure out who I am now and not be in denial about



spirit relationship in MS. “I knew there was something more to my life, so I made a decision to figure out who I am now and not be in denial about my disease.”

Manley has the most common type of multiple sclerosis — relapsing-remitting MS, in which there are flare-ups, followed by full or partial recovery. She learned that staying active was helpful in keeping the body strong, so she did laps in the apartment with her cane. She began taking fatty-acid supplements; eliminated dairy, meat and gluten; and cut back on sugar. “I stay away from anything that could have an inflammatory effect on my immune system,” she says.

In addition to diet and exercise, Manley opted for a high-dose steroid treatment that improved her vision and mobility. She married her boyfriend in 1993 and had a baby boy, Braden, in 1996. “I knew that I might have a flare-up after the birth, and I did,” she explains. Determined to nurse her son for six months, she put off getting another steroid treatment. “It’s really important to take care of yourself, so if I’d had other children, I may have chosen differently,” she says.

steroid treatment. “It’s really important to take care of yourself, so if I’d had other children, I may have chosen differently,” she says.

SPEED BUMP NO. 2

Caring for a baby, herself and her husband proved trying, and her marriage ended in 1998. “Here was another period where life as I knew it was no longer,” she says. “But I’d grown so much through meeting the challenges of MS that I knew I could handle this.” While things looked bleak personally, the U.S. Food and Drug Administration had recently approved three MS drugs. Based on her symptoms and type of MS, Manley chose **Copaxone**, a daily shot she gives herself.

To further her career, Manley, who had a B.S. in exercise physiology, took out loans to get her master’s degree in whole-systems design. She now has a life-coaching, speaking, teaching and consulting practice, **Spirit in Motion**. She recently helped create the **MS Wellness Center** at Swedish Medical Center in Seattle and put together a women’s retreat for her local chapter of the **National MS Society**, where she also teaches an eight-week wellness course. One of Manley’s missions is to help people with MS find the courage to confront their disease and learn ways to live well

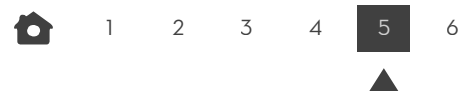


week wellness course. One of Manley's missions is to help people with MS find the courage to confront their disease and learn ways to live well despite it. "It's not always fun to tune into this body that has wacky stuff going on in it," she says. "But the alternative is worse."

BACK ON THE BIKE

Thanks to drug therapies, diet, exercise and understanding the mind-body-spirit connection, Manley's symptoms eased. More than a decade after her final race, Manley experienced a near miracle: Her vision didn't blur when she exercised. She began toying with the idea of signing up for a triathlon to raise awareness for MS: "Part of me had the attitude that if I couldn't compete as a world-class athlete then I wasn't going to compete," she says. "But I realized that was stupid — did I want to play and have fun or did I want to sit here? When I realized I could participate in sporting events a decade into my diagnosis, I needed to wrap my heart and mind around how far I had come and all I had gone through to get there." A friend did the running portion while Manley swam and biked.

Thrilled to be back in touch with what had once been her core self, she continued to cycle, getting stronger and going harder than she'd thought



Thrilled to be back in touch with what had once been her core self, she continued to cycle, getting stronger and going harder than she'd thought possible just a few years prior. She compares competing in her first bike race for MS in 2003 to her awe-filled days on the U.S. team. "Both times I was pinching myself, so grateful and proud of what I could do."

It's still tough for Manley to predict when she'll be in racing form. She occasionally experiences weakness in her lower left leg that can affect her foot's ability to point and flex, the result of permanent spinal damage that occurred in the disease's early stages. But in the last six years, she's participated in several events for MS — including [this one](#) in 2008 — relishing the chance to train with friends and raise money and awareness for a condition that affects 400,000 Americans and is two to three times more common in women. And while she recognizes that she'll never grind her way up the Pyrenees as a professional bike racer again or be able to say that she was in the Olympics, she says she almost never thinks of her loss anymore. "Sometimes I wonder, 'What if?' but it's rare," she says. "I'm too busy living this life now."

CLICK HERE TO READ AGAIN

1

2

3

4

5

6

