



# Phoenix

Newsletter of The Central Lancashire ME/CFS Support Group

Patron: Doctor J Roberts

**May 2013 issue**

Charity no. 1106333

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**An ongoing plea!**

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Well... can we firstly apologise that this newsletter is a little later than we had initially planned. Unforeseen circumstances... health issues... and other unavoidable commitments for various committee members/ the support team... along with an almost unbelievable incident involving a combine harvester & a shoal of mackerel... all led to the aforementioned delay. (OK... I may have made that last bit up!)

Being serious however, what it does add emphasis to, is something that we plead for in each and every newsletter. That is... that most of the committee are M.E. sufferers themselves... and there are times when we really do need a few more volunteers to be able to help with a few of the ongoing duties and tasks involved in keeping **your** support group running as smoothly and professionally as we would all wish. Even if you... or indeed a healthy family member can only offer a few hours occasionally... if several people do so... it will add up to an invaluable resource... and ensure that we can continue to offer help, advice and support to members, whenever it is needed. Please do let us know if you would like to help within the group!

Moving on... this will also be a slightly reduced size newsletter, due to the fact that we've also enclosed information about the upcoming AGM, along with details about renewal of membership (as you no doubt discovered on opening this newsletter's envelope, or email if you received the newsletter that way!). If you have any questions, please contact the office.

Finally... as we're allegedly getting towards summer, here are a few pictures of some things that you may have forgotten exist if you don't get away very much (certainly from Lancashire any way!) Oh well... here's hoping for next month, or July... or maybe August... or maybe next year!



**Disclaimer**

**The views represented in this Newsletter may not necessarily represent the views of the committee. Therapies, treatments, techniques etc, are described for information only and inclusion in this Newsletter should not be taken as a recommendation. Items featured are for information only.**

## Support Group News

### The “Lifeline” Programme

Our next Lifeline meeting is on June 5th at Bamber Bridge where Robert J Goodman Edwards will be telling us about The Perrin Technique and how it can help some people who have specific symptoms.

We are hoping to have some Yoga & Relaxation sessions on Thursday afternoons run by Jayne Morrisey who many of you will know from previous Lifeline meetings. Anyone interested in coming to these sessions please let us know and we can find a suitable venue in your area. We are ‘piloting’ this on 20th June at The Pensiones Hall, St Albans Rd, St Annes on Sea, FY8 1XD, everyone is welcome. Jayne hopes to have time to talk about individual symptoms and aspirations so the yoga could be personally tailored to them. We will have to make a charge of £3.50 for this until additional funding can be found.

### Carers’ Contacts

**Carers Lancashire:**           **0345 6887113** Ring the central number and you will be put through to the Carers’ organisation covering **your area**.

**Blackpool Carers’  
Centre:**                   01253 393748   info@blackpoolcarerscentre.co.uk  
Covering **Blackpool**

### M.E. Awareness Week - 12th to 18th May

As we finalise this newsletter, it is the start of National M.E. Awareness Week.

We appreciate that if you were not already aware (though we would hope that most members might be), that the newsletter may be a little late for you to start planning any scheme or fundraiser (joke!), but we feel that you might like to know that we as a group are “doing our bit”, so to speak.

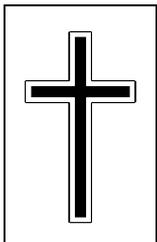
We have tried to pass the word on as much as possible by email, word of mouth etc... but for reference... we are holding (or have already held, depending on when you see this)... a combined coffee morning and table top sale at the office (ie... Galloways) from 10.30am to 12.30pm on Saturday the 18th May.

Once again... apologies... for the unforeseen delay in getting the newsletter out, with a further apology if we also haven’t managed to get the word to you about the above mentioned Central Lancashire M.E. Support Group M.E. Awareness Day event.

### In Memoriam

It is with great sadness that we learned of the death on the 1st October 2012, of member Vera Harrison. We were at least pleased to know that Vera had not suffered prior to her sudden death... and we were all deeply moved, on hearing the kind words of Vera’s friend, who told us that Vera had felt comforted and supported by the group through the years. Even at sad times like this, it is on hearing that we have helped or made a difference in some way, that makes all the effort of keeping the group running so worthwhile.

In addition, we must also thank Vera’s friend for a very generous donation to the Group’s funds. Rest in Peace Vera... you will be sadly missed.



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As the next newsletter may also now be sent out slightly later than usual, we should perhaps take this opportunity to remember that possibly before said newsletter is sent out, that on the 1st of July, it will be former committee member Christine Marshall’s anniversary. It is scarcely believable that it is almost two years since she passed away, but the group will always remember her... and all the hard work that she did within it.

## Support Group News

### Don't let M.E. win! *(a 'guest' item, by 'our own' Paul Leeming)*

The best way I can put it, is that we are all given a hand of cards when we're born. Some are good, some are not so good... and some are pretty terrible! Mine wasn't a very good hand... with 55 years illness.

Illness is like an old friend to me... I know nothing else... but equally... life is short. I have met many terminally ill people during my life and in all cases, I have found it to be the case that they love life and treat every day as a bonus.

You can go one of two ways in life, either down or up... but feeling down doesn't make you feel any better... does it? What you need to do is think about the good things in your life, not the bad ones.

Little things can make all the difference. A bird singing... looking at flowers in the garden... feeling a breeze on your face on a summers day... and many other things that may be **your** personal favourites.

Life is special and we only get one chance, so why not make the most of it? It's no use thinking about what you have lost... that's gone! Instead... think about what you can do!

I have found laughter to be a better cure than tablets. Whilst I know that there is no cure for M.E. and that sufferers are sent from pillar to post by doctors... it is important not to lose sight of the fact that life is still worth living... and that there are still good things that we can take from our lives.

Of course, some can do more than others... and equally... some may only be able to do a little... but that doesn't mean that anyone's life is worthless! As I said earlier, life is short, but is also very special. What I'm saying is... don't let illness rule your life... control life yourself. Set small achievable goals and be proud of yourself when you manage to do them.

It is easier to be happy than sad. Dwelling on the negatives and getting all "churned up" inside takes more out of you and makes your illness worse. My wife has suffered with severe depression for 40 years... so I understand that very serious illness... and the differences between it and M.E. very well.

If you were to draw up a list (an honest one!) of all the bad points... and good points in your life... I'd be willing to bet that there would be more good points than bad.

Life is for living and as many have said... we are a long time dead... so treasure the wonderful moments that can be there for us all.

Thank you for reading this... I hope that some might find it helpful.

Paul

*(Many thanks to Paul for taking the time to write down his thoughts and send them in. For those who might not have realised, Paul wrote the article about Wild Flower gardening in the last newsletter. If you have any ideas or subjects that **you** would like to have included... please send them to us. The address is on the back page, as always!).*

### Another personal thought!

Well... if you can forgive... or indulge me having a very slight rant... I must say that this is only **my own** personal view of the current situation regarding changes to disability benefits, financial cut-backs etc.

I've added this point at the end, having heard over the weekend about the suicide of Stephanie Bottrill, who blamed the awful and unfair 'bedroom tax' for taking her own life.

Now is not the time to do what many politicians will do and make this poor woman a "political football". Anyone with a background in psychology, will testify that it is very likely that there will be other factors involved in this woman's sad death... however, it cannot be disputed that **she** found it to be the unfair and cruel straw, which then broke the camel's back, so to speak.

In my view, the rhetoric currently being used to stigmatise the poor and sick is awful. I personally know a family who have lived in the same house for 30 years, but with the children having "left the nest" along with illness now playing a part, the bedroom tax means that they have had to leave their home. Crazy!

With all this in mind... all I'll add is this. If you are personally feeling depressed... please read what Paul wrote (above)... and don't try to cope alone. Please talk to someone... be it your family... the Samaritans... Welfare Rights... or if M.E. related... we may be able to help. If you don't give in... you will come through.

## National News (as promised in the last issue)

### ME isn't 'all in the mind', but it's still a mystery

**As medical adviser to the ME Association and an ME sufferer, Dr Charles Shepherd has spent the past two decades vigorously fighting the dismissive attitude still common among the medical profession. Here, he talks about the latest research into the disorder**

It was in the late Seventies that Charles Shepherd became ill with myalgic encephalomyelitis, or ME as it is better known. It was an era, he recalls, when the condition was still dismissed as “hysterical nonsense” by most clinicians. Working as a young doctor at Cirencester Hospital, he had contracted a severe case of chickenpox from a patient with shingles. “I’d been perfectly fit and healthy. The infection had resolved but I felt mentally and physically knackered and kept having to take more and more time off,” he recalls.

Shepherd says he has never been truly well since. He “plods along”, though managing to enjoy life: he regularly walks Polar, his snow-white labrador, near the Cotswolds home he shares with his wife Pam, a nurse. On the day we meet, he is helping his daughter Suzie, a student in London, plan her 20th birthday (he also has two sons, Patrick, 28, and Alisdair, 31).



As medical adviser to the ME Association, Shepherd has spent the past two decades vigorously fighting the “all in the mind” attitude which, he says, is still common among the medical profession. He is convinced that this complex disorder, which has puzzled scientists for decades, has biological rather than psychological origins – although unlike some on the militant fringes of the ME community, he prefers to use reasoned persuasion rather than threats when discussing the cause.

“I unequivocally condemn people who send abusive emails,” he says, referring to the harassment of researchers, doctors and journalists – including the Telegraph columnist Dr Max Pemberton – who have speculated on the “psychological” explanation. “But I also understand why people feel so angry. A significant minority of doctors still don’t believe in the existence of ME. They refuse to diagnose or manage it – that is totally unacceptable.”

Now more commonly known as chronic fatigue syndrome (CFS), ME has come a long way since it was derided back in the Eighties as “yuppie flu” (its typical victim supposedly being a high-flying young professional). Today, it is recognised by the World Health Organisation, the National Institute for Health and Clinical Excellence (Nice) and much of the medical establishment as an often severely disabling disease, characterised by a bewilderingly wide set of symptoms, the chief ones being profound fatigue and widespread muscle pain. Difficulties with concentration and memory are also common.

Yet the debate over the cause of ME continues. Is it biological, psychological or a combination of both? The controversy flared up again in September, with the publication of findings finally disproving the theory that ME is linked to XMRV and mMVL, viruses that had previously been isolated in tissue samples taken from ME patients. Scientists at Columbia University, New York, found compelling evidence that detection of the viruses was a result of contamination, corroborating two previous studies’ findings.

The collapse of this theory, greeted with dismay by some ME patients, came as no surprise to Shepherd, who says he was always sceptical of the “hype” surrounding it. “In the US people spent a lot of money getting tested [for XMRV] and getting anti-retroviral drugs, but we have always advised against this because the research [from the University of Nevada, published in 2009, that implicated the virus] hadn’t been properly evaluated or replicated.”

By taking this stance, Shepherd himself became the target of hate mail. “People get so desperate and put such faith in findings, they find it hard to have them criticised.”

## National News (continued from page 4)

### ME isn't 'all in the mind', but it's still a mystery

ME researchers now view the illness as having three separate components: first, a (probable) genetic predisposition; second, a precipitating factor – which for 75 per cent of patients is an infection, usually viral, although occasionally other immune stressors such as immunisation may be a trigger; and finally the development of the condition itself. Other signs include fainting, low blood pressure, and irritable bowel syndrome.

The origin of such symptoms remains a mystery. One theory gaining favour is that ME patients have an aberrant immune response which fails to “switch off” after the original infection has resolved itself. In particular, it is possible that some ME patients have a surfeit of cytokines – chemicals produced by the immune system.

Another theory is that an auto-immune response (in which the immune system produces antibodies that attack the body's own cells) may be involved. Other research is looking at potential abnormalities in the muscles of ME patients, with evidence that some sufferers produce excess acid when they exercise (Shepherd himself took part in research on muscle tissue – and still has a scar on his leg to prove it).

One study at Liverpool University is examining potential structural abnormalities in the mitochondria – cell components which produce energy in a usable form – in skeletal muscle.

A further focus of research are abnormalities in the hypothalamus. This tiny pea-shaped gland in the brain regulates a number of functions including hormone secretion (via the pituitary and adrenal glands). Problems here could help explain symptoms as diverse as sleep disorder, low blood pressure, temperature disturbance and heart, bowel and bladder problems. “A large number of papers demonstrate that ME patients have abnormalities in the hypothalamic-pituitary-adrenal axis,” says Shepherd.

In particular, he says, ME patients have been found to have lower levels of cortisol, a hormone secreted by the adrenal glands. He concedes that ME researchers are still “fitting together the jigsaw puzzle”, with some way to go before treatments are developed. “We have reached a point where there are drugs that would be worth trialling,” he says. But clinical trials are expensive to run and the pharmaceutical industry, the only realistic source of such funding, has shown little interest.

In the meantime, can graded exercise (a programme aimed at building up activity levels) and cognitive behavioural therapy, advocated by Nice, help with the symptoms? “The Nice guidelines on ME are not fit for purpose,” Shepherd argues. “They reflect the belief that this is a psycho-social illness.” He himself is a fan of pacing – a technique which involves listening to your body to find the right balance between rest and activity. “I go swimming and walking, but within the limits of what I can do.”

He also feels progress has been stymied by rebranding ME as chronic fatigue syndrome. “Doctors never liked the term ME because it refers to inflammation of the brain and spinal cord, which has never been found,” he says. “But calling it CFS has made research trickier because CFS is an umbrella term for different pathologies – it's a bit like grouping together all the different kinds of arthritis and saying they have the same cause.” He prefers the term myalgic encephalopathy, which reflects a significant neural abnormality in the brain.

He is encouraged, though, by progress at the Medical Research Council, where an expert group to encourage high-quality research into ME was set up in 2008, and where, last year, £1.5 million was ring-fenced for this purpose. So far funding has been approved for five studies – among them mitochondrial function and cytokine production in muscle tissue, immune system involvement and autonomic dysfunction.

So is Shepherd discounting entirely any psychological component in ME? “I have no problem,” he replies, “with the idea that the mind affects the body and the body affects the mind. Of course, people who are chronically ill get depressed and have psycho-social stress. But the point is that too much energy and money has gone into research based on the belief that ME is psycho-social – when the right route is biomedical.”

*(Reproduced with kind permission of The Daily Telegraph, issue dated 26th November 2012, original interview given to Caroline Lavender... and also the M.E Association... [www.meassociation.org.uk](http://www.meassociation.org.uk))*

## Let's lighten the mood!

### Healthy recipe - Slow Cooker Goulash

- Mix 500g of stewing steak with some peppered flour on a plate.
- Flash fry it in some olive oil and remove from the pan.
- Turn down the heat. Put one chopped red pepper and one chopped green pepper along with a chopped onion and two cloves of finely chopped garlic into the pan and cook for about 5 minutes until they soften.
- Add the meat back into the pan with a couple of really good squirts of tomato puree, 1 tablespoon of paprika, 1 tablespoon of pimento (smoked paprika) and a teaspoon of cayenne pepper.
- Add the drained contents of a tin of chopped tomatoes, about half a pint of beef stock and a good glug of white wine.
- Bring to the boil and throw the whole lot into the slow cooker. Add some boiling water if necessary but you only want it just covered and no more.
- Cook - monitor, but as a guide, ours was in from 10am until 5pm.
- I stirred through some freshly chopped parsley just before serving with rice and we had a dollop of creme fraiche on top.
- We found it absolutely delicious... hope you enjoy it too!

*(Many thanks to Viv for sending this in!)*

### Awful joke corner...(and it's not even a corner!)

*(Possibly an improvement on the usual jokes... or worse, depending on your taste and sense of humour! This issue finds an almost "Milton Jones" type humour, with some jokes sent in by Helen. Many thanks!)*

The Grim Reaper came for me last night & I beat him off with a vacuum cleaner. Talk about Dyson with death.

My girlfriend thinks that I'm a stalker. . . .well, she's not exactly my girlfriend yet.

I woke up last night to find the ghost of Gloria Gaynor standing there. At first I was afraid.... then I was petrified.

My wife said to her me: "You're always pushing me around and talking behind my back". I replied, "What do you expect? You're in a wheelchair".

The wife has been missing a week now. Police said to prepare for the worst. So I've been to the charity shop to get all her clothes back.

They've opened a new shop across the road selling camouflage clothing but I have my suspicions something weird is going on. Yesterday I saw 20 people go in but I never saw anyone coming out.

I've been on the phone for ages trying to book tickets for an Elvis tribute act, but it keeps asking me to press 1 for the money, 2 for the show.....

A friend of mine moved into a new house at the weekend so I took him over a couple of radiators. Just a little house warming present.

I've just heard the window cleaner shouting and swearing outside my house. I think he's lost his rag.

I went to my allotment last week and found someone had covered it with 2 inches of soil. I went again yesterday only to find it covered again with another 2 inches of soil. The plot thickens!!!

My son's been asking me for a pet spider for his birthday, so I went to our local pet shop and they were £70!!! nuts to this, I thought, I can get one cheaper off the web.

Statistically, 6 out of 7 dwarves are not happy.

I was driving this morning when I saw an RAC van parked up. The driver was sobbing uncontrollably and looked very miserable. I thought to myself 'that guy's heading for a breakdown'.

## Sudoku (fairly easy)... and a member's request!

I had a heated debate with one of our members (who I'll simply call "B", as I can't remember whether he said it was OK or not for me to name him!)... that almost developed into fisticuffs! Only joking!!! Actually, as the only person to have offered an opinion, "B's" comments were a most welcome surprise!

"B" says that the January Sudoku (difficult) puzzle, was actually a bit too difficult, certainly bearing in mind the nature of M.E. It would be good if anyone else would like to add any comments, such as whether you agreed with "B", or not, and whether you'd like to have easier, or harder puzzles... or none at all!

"B" also posed the following question, that whilst I personally didn't agree (for reasons that I'll touch on briefly below), I could be wrong, so I promised that I'd put it "out there" for other members' views.

***"Why is a Sudoku "solution" always given as a completed grid? I'm sure this is not at all helpful. What would be helpful is to give the sequential steps by which a/the solution is reached, eg D3=4, H9=5, B6=4, etc, where D3 etc is the square on the grid (like in the old game of "battleships"), and =4 etc is the number which logically must go there (possibly with explanation in the case of a very complex deduction)."***

*("B" also asked for views on... "Who constructs them?"... "How are they constructed?"... and finally... "How are they classified as easy, difficult, etc, and by whom?")*

Any answers or comments from other readers/members would be welcomed. However, my own personal view is that whilst "B's" 'grid suggestion might be good for easier puzzles, many of the harder puzzles require numbers to be found by techniques such as elimination... "X wings" etc, so providing numbers as "B" described alone, would not enlighten many people as to **how** the number was found.

There are also several internet programs & websites, which allow a user to input the numbers from a Sudoku puzzle they may be doing... and it can then solve the puzzle... showing a complete sequence of how numbers are found, including which techniques/methods were needed to solve it. However... once a puzzle gets a little more difficult, doing this does take quite a bit of space... possibly more space than we could reasonably allocate to doing so within the newsletter.

That said... it was possibly remiss of me... being that we have not included any 'solutions' to previous Sudoku's... not to point out that a simple 'Google search' for 'Sudoku solvers' would provide a method of obtaining a solution... so apologies for that! Of course, not everyone has access to the internet, so again, if you have been left fuming by any of the puzzles, or lack of solutions... let us know! And... of course... sincere thanks to "B" for taking the time to offer some input!

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(Complete the grid so that every row, every column and every 3x3 box contains the numbers 1-9)

<b>3</b>	<b>5</b>	<b>2</b>		<b>6</b>		<b>9</b>		<b>7</b>
	<b>1</b>		<b>9</b>	<b>7</b>				
				<b>1</b>		<b>4</b>	<b>6</b>	<b>2</b>
		<b>3</b>	<b>7</b>		<b>6</b>		<b>2</b>	<b>4</b>
			<b>5</b>	<b>2</b>				
<b>7</b>		<b>8</b>					<b>5</b>	<b>3</b>
<b>4</b>				<b>5</b>		<b>2</b>		
<b>2</b>	<b>8</b>	<b>1</b>			<b>7</b>			<b>5</b>
	<b>6</b>	<b>5</b>					<b>4</b>	

## Open Meetings and Social Lunches 2013

### Preston Open meetings

**Bamber Bridge Methodist Church,**  
Station Road, Bamber Bridge. PR5 6ED  
Wednesdays 7-9pm.

5th June - ME LIFELINE Talk  
Perrin Treatment  
Rob Goodman Edwards

**Galloway's, Howick Park Dr, PR1 0LS**

***For ME Awareness Month:***  
**Coffee Morning**  
with information and table top sale

Sat 18th May 10.30—12.30

### Other Preston area events

#### **Minerva Centre coffee/tea Mornings:**

Café area to the left of reception, PNE Football Ground, Lowthorpe Road, Preston, PR1 6SB.

Last Friday of the month, **11.30am onwards:** May 31st, Jun 28th



#### **Craft/Coffee Sessions 2-4pm**

Last Wed of the month, **Roccoco Coffee Lounge, Chapel Brow, Leyland PR25 3NH**

29th May— tbc

26th June—Rag Rug Making Demo

#### **Lunch: Thurs Jun 13th, 12.30pm**

**Botany Bay Restaurant**  
Chorley  
PR6 9AF

**Our AGM will be on**  
**Thurs 20th June 2pm**  
**At Galloway's, Penwortham**

**PLEASE CONTACT US IN ADVANCE IF YOU WOULD LIKE A LIFT TO ANY EVENT/MEETING**

## Open Meetings and Social Lunches 2013 continued

### East Lancs meetings

**Wilshire Methodist Church Hall,  
Ribchester Rd, BB1 9HU - One Monday  
every other month, 7-9pm**

We will now be using a room off the Knowsley  
Rd entrance not the main road  
(where the small car park is)

**Cancelled—20th May**

### Lunches

**Simply Classic Bistro**  
Shuttleworth Mead Business Park,  
Padiham BB12 7NG—J8 M65  
**12.00pm onwards**

**Wed 12th Jun  
Tues 13th Aug**

### Craft and Chat

#### Aroma Cafe

7 Infant St, Accrington  
BB2 6AA

**Thur 30th May Tues 2nd Jul  
1-2.30pm**



### St. Annes meetings

#### **Ansdell House Clinic, 261 Church Rd, St Annes, FY8 3NP**

Open meetings - Wednesdays 7-9pm (Usually 2nd Wed of every other month)

**Wed 10th Jul**

#### **Afternoon Tea/Coffee 2pm**

**Thurs 7th Jun, 4th Jul, 1st Aug, 5th Sep**

**Hotel Dalmeny, Reception area, South Promenade FY8 1LX**

#### **YOGA/Relaxation for ME**

**Thur 20th Jun 1.30-3.30pm £3.50**

**Pensioners Hall, St Alban's Road, St Annes FY8 1XD**

## Useful Contacts



### Central Lancashire ME/CFS Support Group

Howick House  
Howick Park Avenue  
Penwortham  
Preston. PR1 0LS  
Tel: 01772 751254



For all enquiries, please contact the office at the address above

**Web:** [www.clancsme.org.uk](http://www.clancsme.org.uk)

**Email:** [info@clancsme.org.uk](mailto:info@clancsme.org.uk)

**Chairman:** Colin Briggs

**Deputy Chair:** Vivienne Henderson

**Support Workers:**

Helen Crossan:  
[helen@clancsme.org.uk](mailto:helen@clancsme.org.uk)

Lynn Green

**Committee Members:**

Shelley Burrows

Harriet Fairhurst

Kath Grannell

Pat Iddon

Paul Leeming

Keith McNicholas

Moira Portman

**Newsletter:**

Keith McNicholas  
[keith@clancsme.org.uk](mailto:keith@clancsme.org.uk)

**Volunteers:**

Dave Berry

Claire Tracey

Brenda Wilson

Rob Edwards

Pat & Albert Hardaker

Phil Green

Central Lancs ME/CFS Support Group is a Registered Charity - No 1106333.  
Patron: Doctor J Roberts

## Help and Advice



Accrington: 01254 394210  
Blackpool: 01253 308400

Preston: 01772 682588

Chorley: 01257 279807

Blackburn: 01254 671211

Burnley: 01282 450535

Kirkham: 01772 682588

**Welfare Rights: : 0845 0530013**

(You will be connected to your local office in Lancashire)

**Except:** Blackburn with Darwen: 01254 583350  
Burnley/Nelson: 01282 470570  
Blackpool 01253 477488

**PALS (Patient Advice and Liaison Service):**

Preston: 0800 032 2424  
Chorley & South Ribble: same number, but then 'option 3'  
West Lancs: same number, but then 'option 4'  
Fylde 01253 655588

**Help Direct For Practical Support: 0303 333 1030**

**Benefit Enquiry Line: 0800 882200**

**Disability Equality North West (formally known as DISC):**

Preston (Mon—Thurs 9.30am—4pm) 01772 558863

**Shop Mobility:**

Preston 01772 204667 Chorley/South Ribble: 01257 280888

Burnley: 01282 450684 Blackpool: 01253 476451

**Council for Voluntary Services (CVS)**

Preston 01772 251108

**Samaritans:**

**National: 08457 909090 Preston: 01772 822022**

**Chorley: 01257 266881 Blackburn: 01254 662424**

**Burnley/Nelson: 01282 694929 Blackpool: 01253 622218**

**Useful Websites:**

<a href="http://www.afme.org.uk">www.afme.org.uk</a>	Action for ME
<a href="http://www.meassociation.org.uk">www.meassociation.org.uk</a>	The ME Association
<a href="http://www.tymestrust.org">www.tymestrust.org</a>	Young ME Sufferers Trust
<a href="http://www.ayme.org.uk">www.ayme.org.uk</a>	Young people with ME
<a href="http://www.investinme.org">www.investinme.org</a>	Invest in ME
<a href="http://www.mereseach.org.uk">www.mereseach.org.uk</a>	Research & scientific info
<a href="http://www.drmyhill.co.uk">www.drmyhill.co.uk</a>	GP - specialising in ME
<a href="http://www.benefitsandwork.co.uk">www.benefitsandwork.co.uk</a>	Benefits advice/forms etc
<a href="http://www.turn2us.org.uk">www.turn2us.org.uk</a>	Benefits advice
<a href="http://www.lancashirecare.nhs.uk">www.lancashirecare.nhs.uk</a>	Adult Services for CFS/ME
<a href="http://www.mentalhealth.org/relax/sleep">www.mentalhealth.org/relax/sleep</a>	