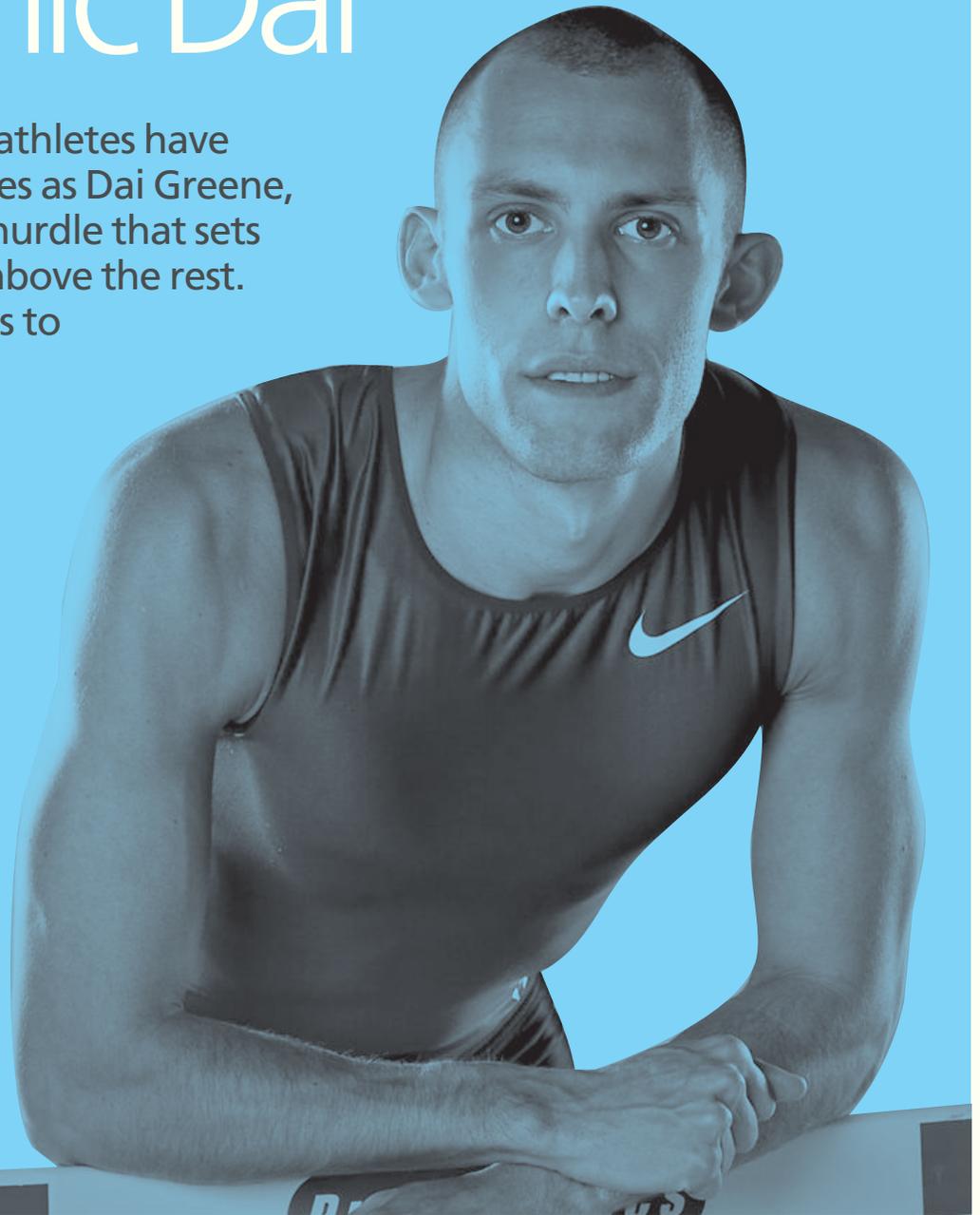


# Dynamic Dai

...goes for Gold! Few athletes have cleared as many hurdles as Dai Greene, but it is one personal hurdle that sets our Olympic hopeful above the rest. The Welsh wizard talks to Nicola Swanborough



There's a strong rugby tradition in the seaside town of Llanelli, home to the world-famous Scarlets whose conquering heroes come big, beefy and with a scrum-half brawn that could hold back a tide off the west coast of Wales.

But in the old tin-mining community where the only colour is red, red, red, there's a new sporting hero and he's not a flanker, fly-half or winger. No, the new boy on the block – Llanelli born and Llanelli bred – is a flyer on the

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athletics track, one Dai Greene, quiet, modest and among our finest hopes for London 2012.

At 25, the 400m hurdler has already been crowned European and Commonwealth champion but it was at the recent World Championships in Daegu that his title of true national hero was cemented. With lightning speed legs Dai crossed the finishing line at 48.26 seconds, to become our first Britain at the games to win gold. He narrowly missed smashing

Kriss Akabusi's 47.82 second record for the distance.

But it's a hurdle that Dai has had to cross aside from the athletics arena that puts this impressive Olympic gold medal contender on a podium above the rest. And it's a hurdle few of his international competitors or British fans are aware of. Elite athlete Dai Greene has epilepsy. Not that it's a problem. No. With his characteristic understatement and go-to approach, he categorises the condition as a positive.

'My epilepsy has been a blessing,' he says. 'It's made me far more structured in my life in a way that has benefitted my athletics. My seizures are triggered by lack of sleep, poor diet and alcohol so I have to be very strict with myself in order to avoid all three of these. As an athlete in a highly competitive field, plenty of sleep, a good diet and no alcohol are absolute musts. The need to control my seizures is an added incentive to optimising my lifestyle for my athletic goals.'

And with the London Olympics on everyone's lips, he needs little reminder of those golden goals.

Dai's seizures began before his passion for athletics took hold. He was 17 when he was diagnosed with epilepsy and like most teenagers lived for late nights and long weekends. Although he was prescribed sodium valproate, his seizures still continued and it was only gradually that he started to recognise the cause and effect cycle of hard partying and seizures and began to rein in his lifestyle to help control his epilepsy.

But it was when he was at university and discovered athletics that he made a bold decision – one that he now admits his parents had deep concerns about. In consultation with his epilepsy specialist, he decided to stop taking his medication and to try and totally manage his seizures through conscious lifestyle choices.

'To be honest I was still having seizures when I was taking the drugs,' he says in his soft Welsh lilt. 'By the time I was at university I was becoming very serious about athletics and training. I was

improving all the time as an athlete and had yet to reach a plateau, but I worried that the sodium valproate could have a negative effect on my sporting ability.

'A lot of students are out partying when they go to the university, but because of my training I was more focused on a good night's sleep, a balanced diet and regular exercise. My GP was very supportive. She said she wished more people would look at their lifestyle and the impact it has on their epilepsy.

'Since coming off the AEDs I have had a few seizures but these have been caused by very obvious extreme situations such as when I had to get up at 4.30am for a flight and ended up having a seizure through tiredness. Now, if I know I'm going to be up late, I write off the next day so I know I can rest – it's just a matter of managing my time.'

Dai points out though that while his own decision not to take his medication has worked for him, his younger brother Darren – also diagnosed with epilepsy at 17 – had a very different experience.

'When Darren stopped taking his drugs he had a cluster of seizures so went back on to his medication,' says Dai. 'He has quite a different lifestyle and works late most nights in a pub, so medication is definitely the best option for him.'

Dai's regime is typical of a world-class athlete although he probably averages more sleep than most. He cannot cope with less than nine hours sleep, eats food in great quantities – pasta, vegetables, chicken, fish and rice – and trains six days a week, fast and furious from early morning until 1pm.

'There's no point in training if you're not going to push yourself hard,' he continues. 'I run with such intensity that my legs really hurt. Many athletes are sick from the exertion. Even though it may be painful, you hope that the hard work of the winter, running long, tiring distances, will pay off in the summer.'

Rest is an important part of the equation too. If Dai's not slumped on

the sofa in the afternoon or evening, he likes to go to the cinema or out for coffee with his girlfriend, primary school teacher Sian Davies, also a 400m hurdler.

Dai is adamant his epilepsy has never held him back and recognises he is lucky to be able to identify and avoid the triggers for his seizures. But then he sees himself as an all-round lucky person.

Next year, when London hosts the Olympics, Dai will be 26½, the peak age for an athlete in his field.

'How lucky is that to have the Olympics when you are the perfect age and for it to be in your own country,' he says. 'I want to do my best for Great Britain and I really think I'm on course.'

*Epilepsy Society medical director Professor John Duncan advises:*

'There is no doubt that lifestyle factors can have a major impact on the occurrence of seizures, and attention to these can reduce the risk of seizures.

Common triggers include tiredness, lack of sleep, stress, alcohol and not taking anti-epileptic drugs.

'Triggers are not the same as causes of epilepsy. Although a seizure may be triggered by stress, the underlying cause for the epilepsy could be structural from a head injury, or genetic. Stopping medication carries the risk of increased seizure frequency and severity, and of status epilepticus. Therefore withdrawal is generally against medical advice.

'If a person is determined to stop their medication they should do so slowly in consultation with their epilepsy specialist. They should advise family and friends of what they are doing, and should avoid high-risk situations. They should always recommence medication if seizures worsen.'