



Polio News

P R E S E N T E D B Y

W I L D R O S E P O L I O S U P P O R T S O C I E T Y

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A MESSAGE FROM YOUR PRESIDENT

'Tis the season to be jolly...!' By the time you actually get this newsletter Christmas (or whatever you believe in) will be over for another year. I hope that everyone had a happy holiday and wish you health and prosperity in the New Year.

It has been a good year for the society, and we hope that next year will be even better.

- ◆ The newsletter is always looking for items to print. If you have a story about polio you would like to share please send it in to the office.
- ◆ We still have a lot of brochures that could be distributed to doctors offices, etc. If you would like some let the office know and we will get some out to you, even if you live out of town.
- ◆ Do you have a suggestion for an accessible event or place we can go to? Let us know!

Don't forget to renew your membership.

Be sure to check out everything in the newsletter. Want to see something specific? Let us know!

Thanks again to everyone who contributed to the newsletter and helped put it together. Keep up the good work.

Marleen Henley

LAUGHTER IS GOOD MEDICINE

THE FIRST CHRISTMAS JOKE - AND IT'S SCOTTISH.....

A man in Calgary calls his son in Regina the day before Christmas Eve and says,
"I hate to ruin your day but I have to tell you that your mother and I are divorcing; forty-five years of misery is enough".

"Dad, what are you talking about?" the son screams.

"We can't stand the sight of each other any longer", the father says. "We're sick of each other and I'm sick of talking about this, so you call your sister in Stoughton and tell her".

Frantically, the son calls his sister, who explodes on the phone, "Like hell they're getting divorced", she shouts, "I'll take care of this".

She calls Calgary immediately and screams at her father, "You are NOT getting divorced. Don't do a single thing until I get there. I'm calling my brother back and we'll both be there tomorrow. Until then, don't do a thing, DO YOU HEAR ME?" and hangs up.

The old man hangs up his phone and turns to his wife. "Done! They're coming for Christmas - and they're paying their own way".

AAH, THE GOLDEN YEARS!

SPECIAL POEM FOR OLDER FOLKS

A row of bottles on my shelf
Caused me to analyze myself.
One yellow pill I have to pop
Goes to my heart so it won't stop.
A little white one that I take
Goes to my hands so they won't shake.
The blue ones that I use a lot
Tell me I'm happy when I'm not.
The purple pill goes to my brain
And tells me that I have no pain.
The capsules tell me not to wheeze
Or cough or choke or even sneeze..
The red ones, smallest of them all
Go to my blood so I won't fall.
The orange ones, very big and bright
Prevent my leg cramps in the night.
Such an array of brilliant pills
Helping to cure all kinds of ills.
But what I'd really like to know.....
Is what tells each one where to go!

THE PIRATE.....

A pirate walked into a bar, and the bartender said, "Hey, I haven't seen you in a while. What happened? You look terrible."

"What do you mean?" said the pirate, "I feel fine."

"What about the wooden leg? You didn't have that before."

"Well," said the pirate, "We were in a battle, and I got hit with a cannon ball, but I'm fine now."

The bartender replied, "Well, OK, but what about that hook? What happened to your hand?"

The pirate explained, "We were in another battle. I boarded a ship and got into a sword fight. My hand was cut off. I got fitted with a hook but I'm fine, really."

"What about that eye patch?"

"Oh," said the pirate, "One day we were at sea, and a flock of birds flew over. I looked up, and one of them shit in my eye."

"You're kidding," said the bartender. "You couldn't lose an eye just from bird shit."

"It was my first day with the hook."

TRAVEL TIPS

Helen Engels

Winter is now upon us and it seems that more and more people are escaping to warmer climates, if at all possible, and more and more travel agencies are offering "unbelievable specials". While splashing in our own warm, tropical ACT pool and discussing our various travel adventures, some of your Board members thought it would be of interest to share our experiences in the hope that it would be of benefit given the obstacles, as post-polios, often encounter. As I volunteered to start up a "travel column" in the newsletter, here is my first effort.

NOT SUCH A GOOD DEAL - Gran Sirenis Riviera Maya, Mayan Riviera, Mexico - visited March, 2010 This was advertised at a great price and frequently they have "specials". However, I would not recommend this resort for people with mobility issues unless they had an electric chair or scooter and/or someone very strong who would assist someone in a standard wheelchair for the entire time they were at the resort. Some issues noted:

- resort was extremely expansive and difficult to get around;
- were not told you could "order" a shuttle when needed - long wait if you did order;
- incline to hotel lobby was very steep - very difficult

to push a wheelchair up it;

- scenic walkways had a series of steps;
- deemed "wheelchair accessible areas" had 4 to 6 inch ledges or steps - i.e. in public washrooms;
- food was terrific and plentiful - weather was fabulous.

A GOOD DEAL - we visited Las Vegas in September and stayed at the Tropicana. It is just being renovated so everything was new and clean and shining - and staff were extremely helpful. We were very impressed with the handicapped rooms and the price. I have made a suggestion to the Board that perhaps we should plan a group trip for 4 or 5 days. If this would be of interest to you, please let us know at 780-428-8842 by February 1.

In order for this column to be useful, it will be necessary to get input from all our members, so I urge you to please submit your travel tales, troubles and tips to hengels@shaw.ca or mail to 14103-70 Street NW, Edmonton, Alberta T5C 0L3.

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Information published in the Polio News and/or the Wildrose Polio Support Society web site may not represent the opinion of the Society. It is not to be regarded as the Society's endorsement of treatment, products or individuals. If you have or suspect you may have a health problem, please consult your health care professional.

DANCING IN THE RAIN

It was a busy morning, about 8:30, when an elderly gentleman in his 80's arrived to have stitches removed from his thumb. He said he was in a hurry as he had an appointment at 9:00 am .

I took his vital signs and had him take a seat, knowing it would be over an hour before someone would be able to see him. I saw him looking at his watch and decided, since I was not busy with another patient, I would evaluate his wound. On exam, it was well healed, so I talked to one of the doctors, got the needed supplies to remove his sutures and redress his wound.

While taking care of his wound, I asked him if he had another doctor's appointment this morning, as he was in such a hurry.

The gentleman told me no, that he needed to go to the nursing home to eat breakfast with his wife. I inquired as to her health. He told me that she had been there for a while and that she was a victim of Alzheimer's Disease.

As we talked, I asked if she would be upset if he was a bit late. He replied that she no longer knew

who he was, that she had not recognized him in five years now.

I was surprised, and asked him, 'And you still go every morning, even though she doesn't know who you are?' He smiled as he patted my hand and said,

'She doesn't know me, but I still know who she is.'

I had to hold back tears as he left, I had goose bumps on my arm, and thought, 'That is the kind of love I want in my life.' True love is neither physical, nor romantic.

True love is an acceptance of all that is, has been, will be, and will not be.

The happiest people don't necessarily have the best of everything; they just make the best of everything they have

'Life isn't about how to survive the storm, but how to dance in the rain.'

We are all getting Older

A RAINY MORNING

A young woman in a wheelchair,
wearing a black nylon poncho spattered with rain,
is pushing herself through the morning.
You have seen how pianists
sometimes bend forward to strike the keys,
then lift their hands, draw back to rest,
then lean again to strike just as the chord fades.
Such is the way this woman
strikes at the wheels, then lifts her long white fingers,
letting them float, then bends again to strike

just as the chair slows, as if into a silence.
So expertly she plays the chords
of this difficult music she has mastered,
her wet face beautiful in its concentration,
while the wind turns the pages of rain.

~ Ted Kooser

WHAT'S NEW?

At our Annual General meeting (May 2010) we discussed the possibility of using casino funds to help polio survivor members purchase aids/appliances that they need. Wildrose Polio Support Society has received approval from AGLC to provide some financial assistance to polio survivors who have varying needs in terms of aids and appliances that are designed to assist in maintenance of independence, mobility and quality of life. A new part of our reimbursement policy will include aids and appliances.

ITEMS for which reimbursement could apply but ARE NOT LIMITED TO THE FOLLOWING EXAMPLES

- limb braces, crutches, canes....
- repairs for wheelchairs, scooters, bathlifts...
- shower and bath assists--bath lift, shower chairs, grab bars, ceiling track systems....
- oxygen canister refills
- CPAP breathing devices/aids...
- custom made shoes-specialty orders, Lifts for shoes
- buying 2 pairs of shoes to accommodate leg braces and foot sizes (only one pair will be paid for)
- support hose (stockings)
- the required personal payment portion that Aids to Daily Living does not cover
- replacement batteries for assistive devices
- part payment (to a maximum of \$500.00 for electric wheelchairs, stair lifts, scooters, porch lifts...
- wheelchair cushions
- SAD lamps
- modifications to raise toilet seat levels
- medical beds
- scooter/ wheelchair lifts for vehicles (max payment is \$500.00)

Any polio survivor member requesting reimbursement for therapy or aids/appliances is required to have written confirmation from a doctor or health care provider that verifies they are a polio survivor. This is a onetime requirement that will be kept on file at the office.

The costs for therapy or aids/appliances are first sent by the polio survivor to Blue Cross, private insurance plans or Aids to Daily Living.

The portion or amount not paid is stated in a summary which is returned to the polio survivor. This summary and payment amount along with a completed reimbursement form is sent to WPSS.

If you are requesting reimbursement for aids/appliances and therapy, you need to use two reimbursement forms--one for therapy and one for aids/appliances.

ORIGINAL invoices and PAYMENT RECEIPTS must be included. Keep photocopies FOR YOUR FILES of the paperwork that you send in to the office. Services for therapy have an annual (Nov01 to Oct31) maximum of \$1000.00. Payment for aids/appliances will have an annual maximum of \$500.00. Request for reimbursement must be made within 6 months of the therapy provided or the aids purchased. The board of directors exercises discretion as to whether or not the reimbursement will be provided.

Our therapy program has also been expanded to access counselors, psychiatrists and psychologists. Contact the office if you wish to apply for assistance in these areas.

Don't forget to renew your membership. The membership year runs from January 1 to December 31st. This means that your membership has expired. A membership form is on the back page of this newsletter.

Remember that the above benefits are only available to paid up members and during the time your membership was current. Access to the pool is also only available to members.

TO CHIRO...OR NOT TO CHIRO..

By Bernie Hornung

Chiropractic care is not generally recognized by the mainstream medical community. Therefore, it is a personal choice as to whether or not to have chiropractic treatments. This article is about my experience and is not an endorsement one way or the other.

In June of 2007 I awoke one day to find that I had a problem lifting my left arm at the shoulder. I iced and heat treated it to no avail. I considered my options for professional assistance. It was not serious enough for emergency but it would take days to see my GP and get a referral to physio, which would probably take another day or two. Across from where I was living at the time, is a strip mall that had a chiropractic clinic that advertised walk in service. I had never been to a chiropractor but I had heard lots about them, both positive and negative. I figured what the heck and walked over.

After completing a medical history and consent form, and having some measurements taken, I met Dr. Ernest Li. He examined my spinal system, reviewed my history and explained what chiropractic was about. He asked when the last time I had had a full spinal x-ray was and I replied that it must have been over 40 years ago as a child patient for corrective surgery related to my polio. He completed a request for x-rays and I took it to the nearest facility. I got through rather quickly and was expecting the large envelope with x-ray, but was instead presented with a CD which apparently contained all images. Wow, new technology.

I took this back to the clinic, the CD was plugged in to the doctor's computer and we reviewed the results. There was also a review included by the attending radiologist. I was diagnosed with moderate scoliosis (17 degrees) with advanced degenerative disc disease – osteoarthritis. My left hip was 2 inches higher than the right and my right shoulder was 1 inch higher than the left. My neck was hunching forward by 2.5 inches resulting in advanced spinal decay.

Alternatives for treatment were presented. I had two treatments per week for a while until the shoulder issue was resolved and then once a week. This was regarded as a maintenance program to prevent further damage. More

treatments a week would have been for corrective measures. At this time some treatments were covered by Alberta Health (9) as well as by my Blue Cross (9).

I have been going once a week, every Wednesday, since then. From time to time I had serious issues with lower back spasms and was unable to move without being severely hunched over and using every means of mobility accessible to me. The doctor and his associate were extremely helpful in getting my legs under me again and back on the golf course. This service went so far as opening the clinic on statutory holidays so that I could have regular treatment to alleviate the situation.

Recently I had new x-rays taken and reviewed by a different radiologist and the chiropractor. The scoliosis was reduced in rating from moderate to mild – a reduction by 4 degrees. The pelvis was found to be only $\frac{3}{4}$ of an inch out of balance; the shoulders were even from side to side; and, forward head carriage was reduced to one inch. All this was achieved by a maintenance program.

The neck manipulation is the one treatment that scares the most people. There have been reports of adverse reactions, including death by stroke, and this is probably the basis for the fear by the medical community. I have received this treatment for three years and am surprised at the immediate results of it as well as the long term. I firmly believe that the treatment I have received will continue to improve my spinal issues, or at least delay the onset of totally debilitating problems. I feel more upright and have far fewer episodes of minor irritations and aches. Along with an exercise program through the winter, I believe that I will be able to continue getting around, as well as golfing, as well as I can now, for a number of years.

My thanks to WPSS for including chiropractic care as one of the alternate treatment plans covered under the reimbursement program. This has certainly helped make it more affordable and therefore long term.

If you think that this might be an option for you, contact me directly at ber.hor@telus.net and I will gladly give you the contact information for my chiropractor. Please note that he is located in the southside – Millwoods.

HOW TO HAVE A SUCCESSFUL PHYSICAL THERAPY EXPERIENCE

Leslie Drawdy, PT and on Polio Epic Medical Advisory Board

I've worked with a lot of patients with Post Polio Syndrome who have come to me after having a bad experience with Physical Therapy, often in worse shape than before they started therapy. Finding the right therapist can be quite a challenge, especially in communities where practitioners are not familiar with Post Polio Syndrome (PPS). But don't lose heart! Finding the right therapist can actually be easier than finding the right physician. Here are some basic guidelines:

Things to look for in a physical therapist: (Assuming that you can't find a therapist who has knowledge and experience in treating PPS)

Kat Wollam, PT

1. You need a therapist that is familiar with neurological and/or neuromuscular disorders, preferably with experience treating Multiple Sclerosis (MS) patients. Start by asking others that you know with PPS who have had physical therapy. This is the best way to start looking for any health care professional. If the therapist has a good understanding of MS, then they already know the basic treatment principles for Post Polio Syndrome, whether they are aware of it or not!! Although at times, you may be able to find this type of therapist at an outpatient orthopedic clinic, *most of the time you won't*. In fact, many of my clients first received their Physical Therapy treatment at an outpatient orthopedic clinic, and ended up in worse shape! You're most likely to find a qualified therapist in a hospital-based outpatient therapy clinic, so that's a good place to start.

Your doctor may be helpful with recommendations, but don't count on it! Oftentimes doctors refer patients to therapists that have done a great job for them in the past, but this may not apply to PPS. Just because a therapist is great at treating knee or back problems does not mean they are going to be able to help a person with PPS! You need to do your own investigation.

If your function has declined to the point that leaving your home for an appointment completely wears you out and you are avoiding activities outside your home, you may qualify for home health therapy services. Most home health therapists are competent to treat patients with PPS, as they see a wide variety of complicated diagnoses and situations. This would be an excellent place to start if you

are finding that you need increased help with your activities of daily living and general mobility in your home.

2. Keep in mind that PPS affects everything! If you had polio, you are at risk for PPS. Even if you are getting PT treatment for something other than PPS (i.e., a shoulder injury), PPS will influence your treatment plan and affect your recovery, so be sure to disclose all PPS related information to your therapist.

This can make finding the right therapist a little more difficult. Let's say you have a history of PPS, but you suffered a back injury. This would mean that your primary diagnosis for physical therapy is the back injury and related back pain, so you need someone who will treat your back injury appropriately...within the limits of your PPS! Again, the best place to start looking is at a hospital-based outpatient therapy clinic. Usually the therapists at these clinics are more general in their practice, treating a wide variety of clients, often with complex medical histories and multiple diagnoses.

Preparing for Your Physical Therapy Evaluation and Treatment Program:

1. If you are able to, prepare your medical history. (This is a good thing to do anyway.) Many PPS clients have thick notebooks full of information, and while this can be helpful to the therapist, it can be TOO much information!

Here are the highlights of what you need:

General medical history: Diagnoses, with dates of onset; Allergies; Previous Surgeries, with dates, Date/age of original polio onset; Original effects of polio; Any devices/braces used during initial recovery; Level of function after initial polio recovery, History of PPS; Approximate date of symptom onset; Formal medical evaluation & diagnosis; Previous treatments for PPS symptoms and Medication list. Many of my clients have typed up a list which can be easily photocopied at the time of their therapy evaluation. I've always found this to be very helpful!

2. Avoid telling your whole life story at the initial visit. It is tempting to tell your life story to your therapist. There is nothing wrong with this impulse, but try to avoid doing this on your initial therapy visit. Remember, you've hired the therapist to help you regain the function that you've lost. In order to do that, the therapist will need to conduct a focused interview and a thorough physical examination

This would include specific questions regarding functional mobility status and/or changes, assessing range of motion and strength in all of your extremities and trunk, balance, coordination, transfers (i.e., moving from lying down to sitting up, sitting to standing, etc) and walking. If all of your time is spent on talking, the therapist won't be able to look at everything YOU NEED them to look at. Remember, there will be plenty of time to get to know your therapist and share your story. You will likely be seeing them several times per week for approximately one hour per session.

3. It is important to work WITH your therapist. Give your therapist an honest report about your body's response to changes in activities or exercises. There may be times when a therapeutic intervention doesn't work the way you and the therapist hoped it would! Maybe it caused you to be too fatigued, or caused a significant increase in muscle soreness. In order to adjust the treatment appropriately, the therapist needs to know. Be as specific as you can! Physical Therapy can be tricky in the beginning, as each person responds to physical interventions differently. Medicine is more of an art than a science, and sometimes a little "trial and error" must occur in order to find just the right thing. Ever tried a new medication that didn't work and have to get a prescription for a different one? If your therapist is not listening to your feedback and not adjusting your treatment program (just pushing you to do the same thing regardless of your response), you need to find a new therapist!

Worst Case Scenario:

Sometimes, no matter what we do (or don't do), a client with PPS will continue to have functional decline. This may be in spite of 100% appropriate participation in treatment. In this case, therapy interventions must shift focus to adapting to the new level of disability with appropriate equipment and/or assistance, in order to maximize independence. Like many other chronic conditions, PPS ranges from very mild to very severe. Those who develop very severe PPS will likely continue to decline whether they participate in therapy or not. The problem is that there is no way to tell if this will be the outcome or not, until it happens. In the hands of the right therapist, a well designed and highly individualized treatment program won't harm you, and may help you.

Best Case Scenario:

Some individuals actually experience resolution of their PPS symptoms with successful completion of their therapy program. They regain the functional independence that they were hoping. This is ideal! However, it is important to keep in mind the principles of energy conservation and activity pacing. You want to avoid exacerbation/recurrence of PPS symptoms. Don't start over doing it because you feel great! One patient of mine just recently had an exacerbation, after years of no PPS symptoms, because he started to "ignore the rules" and overwork himself at the gym. PPS is a life changing condition. If you have been able to resolve your symptoms, you need to continue with whatever program or modifications to your lifestyle that helped you achieve these results!

WHAT NO ONE WILL TELL YOU

Some of this may be hard to hear, but I believe every PPS patient should know there is a widely held perception in the therapy community that PPS patients are "high-maintenance": needy, emotionally draining, and never satisfied. In fact, many of the therapists I have worked with and educated about PPS treatment actually dread seeing that diagnosis come across their desks. Some have even refused to treat PPS patients. How could this be? Generally speaking, polio survivors have overcome huge obstacles in their lives, and are very educated, knowledgeable people. They should be an exciting group of people to work with, right?

Well, there is a trend in the complaints I've heard from therapists. Basically, their clients become argumentative and non-compliant. They are not willing to try following the therapist's recommendations, and don't want to take any responsibility for the therapy "not working." For example, let's say that a gentleman with PPS has started Physical Therapy. He is having increased loss of balance and has had a few falls, all of his transfers are more difficult, and he doesn't have the energy to go to his weekly investment group anymore. His therapist tries using a walker with him, and this greatly improves his balance and stability with movement. She recommends that he use his walker at this time to help safely increase his mobility. He, however, is very resistant to the idea, and refuses.

The therapist and patient then have lengthy discussion about the seriousness of potential injury related to falling, and the likely continued decline of function related to overuse and inappropriate activity pacing. She suggests the

idea of utilizing the walker as a tool to safely increase his mobility and independence, while continuing therapy to see if he can regain enough endurance, strength and balance to resume his normal activities without a walker. Despite the safety concerns and benefit that the therapist outlines, the patient continues to refuse. Could this be related to the stigmas associated with disability and assistive devices from the time of the Polio epidemic? Is it from this gentleman's denial regarding his current functional status? Is it just because the situation he now finds himself in is completely, inarguably unfair?

This gentleman needs to step back and take a hard look at the situation. Arguing with the therapist's recommendations, just because he doesn't like what he is hearing, is not helping him. Yes, it is unfair that after having overcome Polio once in his life, he is forced to deal with its ongoing effects. It should be obvious to the reader, however, that the therapist has made an honest professional recommendation for the patient's safety, consistent with his goals of increasing activity and independence. Think of it this way: You hire a lawyer to evaluate a legal situation and give you sound advice on the matter. You're paying the lawyer for his expertise. Once he provides you with the information and recommendations, it is your choice to follow his advice or not. Would you sit

and have a debate with him because you don't like what he has to say? Would you go and do the exact opposite of what he recommends, and then argue that his legal advice was no good?

I think sometimes patients have the attitude that Physical Therapy is like a magic pill, that the therapist is supposed to "fix" them. Unfortunately, this is not how things work. You have to actively participate in the process. If you have a bottle of pills that help control high blood pressure, but you never actually take one of the pills, your blood pressure will not change. You're probably thinking, "well, that's common sense." But many people fall into this mental trap, so to speak, of showing up to their therapy appointments and expecting some sort of magical results, without actually following any of the recommendations OUTSIDE of their therapy sessions. Unfortunately, there is no magic cure for PPS. Therapy can be helpful, but only if you really, actively choose to face the reality of your situation and give the therapy program a fair try.

**Reprinted from *Polio Epic, Inc*, AZ, Dec 2009/Jan 2010.
Postpolio – boca – October 2010**

CASINO (FUNDRAISING) UPDATE

Submitted by Marie and George Kunec

April 17 and 18 were indeed busy days (and nights) for our volunteers who "worked" at the casino. In September we learned that we earned \$75625.08. We have two years to spend these funds. Please contact any board member if you have ideas or projects as to how the funds could be spent.

Few things are impossible to diligence and skill...Great things are performed not by strength, but by perseverance. Samuel Johnson

Thank you to the following volunteers who committed their time to enjoy the work, good food and good friends. Without their help our major fundraiser would not have been a success!

Anita Auger
Lorne Brotherston
Cliff Cyr

Helen and Art Engels
Richard Engels

Marleen Henley

Bernie Hornung
Ferne Hymanyk
Maxine Madison

Jackie and Joe Makarowski
Sharon and Robert Moffatt
Jeff Moffatt

Rick and Ann Meunier
Les Pgetzke
Corinne Reid

Marguerite Robinson
Dianne and Dennis Turner
Erna Warnes

*Surround yourself with people who believe in you.
Brian Kaslow*

GREETINGS FROM ORCAS ISLAND

Greetings from Orcas Island. I don't post often, but I read your posts. I have had some experience with Neurontin (Gabapentin) and theoretical experience with Lyrica. As many of you, I have had the nearly intolerable electrical pains (shocks) in both legs from PPS or severe Polyneuropathy.

For a while, I took Neurontin, with little effect, until, suddenly, I began serious side effects best described as sudden "brown-outs" and confusion. My neurologist at that time immediately took me off Neurontin and prescribed Zonegran, which he said had proved very helpful for some patients. It basically does the same thing as Neurontin, but is a totally different type of drug. It has similar side effects, including one more pleasant one: on some people, including me, it encourages weight loss.

At any rate, after taking Zonegran (actually, the original form Zonisamide) the pain completely left with no apparent side effects, except some gradual weight loss. Then, Group Health refused to allow it because it was not on their formulary, despite my good doctor's serious objections. At that time, it was very expensive. I spent nearly three years in hell, with pain, side effects from various drugs, increased muscle weakness, etc., etc. My new neurologist was very keen on prescribing Lyrica, but after researching it and reading about the likelihood of side effects that I seem to be quite prone to with neurological

meds, in concert with my PCP, it was decided that the chance was not worth it.

I decided no matter what, it was going to be back on Zonegran. In the mean time, in talks with my pharmacy (and on the Island, this is in no way a low-cost pharmacy) I found that if I were to buy three months supply at a time, the cost would be about what the non-formulary per month co-pay would be – about an average of \$30 per month. Well worth it. I've been back on Zonegran about 9 months now, and for the last 7 months, nearly no leg pain. In the last five months I've begun to lose a little weight easily which doesn't hurt my feelings.

In short, Zonegran has been a miracle drug substitution for Neurontin and I'm sure Lyrica. You might discuss this with your doctor. It has to be taken at first in small doses, and has a very strong half-life, so you can't just pop a pill. Also, I've found that many physicians have no knowledge of it – including my very up to date Neurologist. I would suggest it is certainly worth looking into. FYI, a three month's supply at a very non-discount pharmacy for 300 mg per day is \$101.

Richard on Orcas Island, Puget Sound, WA.

Reprinted from *Forward Motion*, FL, March 2010

MEMORIES

Vivian Onushko

Many years ago, 1943 to be exact, when I was diagnosed with polio, my mother and I rode the street car across the high level bridge and walked from the top of the hill to the University Hospital. In those days we lived in Fort Saskatchewan and we had no vehicle so we came to Edmonton on the train. I was scared to death of that ride over the river.

Well something nice happened this year. On August 25 my daughter took me for a ride on the street car over the high level bridge, and I thoroughly enjoyed it. But it is no wonder I was so scared as at that long ago I was nine years old.

I spent six months in hospital.

HALLOWEEN SOCIAL



QUIZ TIME

WELL ... that challenge sure didn't work!

Our first venture only garnered interest from two people: Maxine Madison and Herbertta Hutton with the winner of the \$5.00 Tim Hortons' gift certificate going to Herbertta. Congratulations: Herbertta

Perhaps you found the quiz to be too easy after all, it was just a "teaser".

So take a crack at this one - if it's a challenge you need! Mail your answers to: WPSS, 14103-70 Street NW, Edmonton, AB T5C 0L3 by February 20, 2011. A draw will be made from all correct answers and the winner will receive a \$5.00 Tim Hortons' gift certificate.

If you are looking for even more of a challenge -we are still hoping someone (you?!) will take on the task of coordinating the Quiz Time feature. If you are interested, please call the office at: 780-428-8842

CHRISTMAS QUIZ

| QUESTION | ANSWER |
|---|--------|
| Name the three reindeer with names that start with "D"? | |
| What is the traditional Christmas plant? | |
| What was the name of Grinch's dog? | |
| What was Scrooge's first name? | |
| Who was Balthazar? | |
| Quote Tiny Tim's famous four word line | |
| Not counting Rudolph, how many reindeer are there? | |
| Who has eyes made of coal? | |
| What song begins "Chestnuts roasting on an open fire"? | |
| To whom does the Immaculate Conception refer? | |
| How many lords were leaping? | |
| Where was the clatter that made the narrator say. "I sprang from my bed, to see what was the matter"? | |
| In "A Charlie Brown Christmas", what does Lucy want for Christmas? | |
| What specific drink is most closely associated with Christmas? | |
| What colour is the Grinch? | |

QUIZ TIME-ANSWERS

Here are the answers to the last quiz.

1. Ask a silly question and you get ___A SILLY ANSWER
2. Strike while the ___IRON IS HOT
3. Discretion is the better part ___OF VALOUR
4. Don't put all your eggs ___IN ONE BASKET
5. You can lead a horse to water but ___YOU CAN'T MAKE IT DRINK
6. Beggars can't be ___CHOOSERS
7. Do as I say ___NOT AS I SAY
8. After a Storm ___COMES A CALM
9. You can't teach an old dog ___NEW TRICKS
10. All work and no play ___MAKES JACK A DULL BOY
11. Don't count your chickens ___BEFORE THEY ARE HATCHED
12. The pen is mightier than ___THE SWORD
13. Don't cut off your nose ___TO SPITE YOUR FACE
14. Where there's smoke ___THERE'S FIRE
15. All's fair in ___LOVE AND WAR
16. Necessity is the ___MOTHER OF INVENTION
17. Two's company ___THREE'S A CROWD
18. Don't put off till tomorrow ___WHAT YOU CAN DO TODAY
19. Money is the root ___OF ALL EVIL
20. A fool and his money ___ARE SOON PARTED
21. Children should be seen ___NOT HEARD
22. If at first you don't succeed ___TRYAND TRY AGAIN
23. All the world loves ___A LOVER
24. Bad News ___TRAVELS FAST
25. A bird in the hand ___IS WORTH TWO IN THE BUSH
26. Better late than ___NEVER.
27. Nothing Ventured___NOTHING GAINED
28. All that glitters ___IS NOT GOLD
29. A drowning man will___CLUTCH AT STRAWS
30. All things come to___THOSE WHO WAIT.

ANNOUNCEMENTS

SWIM SCHEDULE

Our warm water therapy program at the ACT pool will be interrupted from Jan.17 to March 26 /2011.

During this time, POLIO SURVIVOR MEMBERS can pay for a water therapy program at another facility and send in the INVOICES, PAYMENT RECEIPTS and completed RE-IMBURSEMENT FORM to the WPSS office. You will be issued one cheque, after April 01/2011 to cover the payments you made.

Please call the WPSS office if you have questions.

We are encouraging members, spouses, family members and caregivers to join us when the pool reopens at the end of March 2011.

Our exercise leader will be with us on Tuesdays from 5 to 6 pm. The reserved time for Saturdays is 4 to 5 pm for general personal water exercises

HAPPY BIRTHDAY!



| | | |
|-----------|------------|--------|
| Sharon | Moffatt | 13-Jan |
| Seymour | Neumann | 22-Jan |
| Art | Berry | 25-Jan |
| Erna | Warnes | 25-Jan |
| Donald | Cameron | 29-Jan |
| Bill | Chorney | 30-Jan |
| Margaret | Robertson | 2-Feb |
| Emily | Leitch | 12-Feb |
| Cliff | Cyr | 18-Feb |
| Diane | Thompson | 20-Feb |
| Murdo | Whitfield | 28-Feb |
| Betty | Lawrence | 5-Mar |
| Ferne | Hymanyk | 5-Mar |
| Catherine | Strome | 9-Mar |
| Doug | MacEachern | 12-Mar |
| Elaine | Van Kleek | 13-Mar |
| Norm | Link | 13-Mar |
| Jean | Bara | 14-Mar |
| Juanita | Takahashi | 18-Mar |
| Jean | Adrian | 25-Mar |
| Heinke | Osadchuk | 26-Mar |
| William | McCormack | 31-Mar |

Do you have an announcement that you would like us to publish?

Please let us know . . .

Email:
wpss@polioalberta.ca

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(780) 428-8842

WE'RE ON THE WEB
<http://www.polioalberta.ca/wildrose/wpss.htm>

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Providing support for Polio survivors

The Wildrose Polio Support Society (WPSS) was formed in 1999 to provide information and support to Polio survivors.

The objects of the WPSS are:

- 1 To provide education to members in respect to post polio syndrome;
- 2 To provide group support and therapeutic support to polio survivors and to provide other support as approved by the Board of Directors;
- 3 To disseminate information concerning research and treatment about post polio syndrome;
- 4 To raise monies for research into post polio syndrome and to donate same to such institution that is conducting research into post polio syndrome as the members of the Society shall decide;
- 5 To develop awareness, communication and education between the Society and the Community.

WPSS News sponsored in part by



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Wildrose Polio Support Society

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2011 Member / Donor Form [Membership year is January 1 to December 31]

NAME(S):
MEMBER _____

[Polio Survivor]

ASSOCIATE MEMBER _____

[Husband/Wife/Caregiver]

ADDRESS: _____

CITY: _____ **POSTAL CODE:** _____

PHONE (DAY): _____ **PHONE (EVENING):** _____

FAX: _____ **POLIO YEAR:** _____

E-MAIL: _____ **BIRTHDAY MONTH:** _____ **DAY:** _____

SENIOR [60 or over] YES **NO**

MEMBERSHIP: **Associate YES** **NO**

Individual (\$15.00) \$ _____

Couple (\$25.00) \$ _____

DONATION: \$ _____

TOTAL ENCLOSED: \$ _____

DATE: _____

I would like to receive my newsletter; by email by regular mail

HOW DID YOU HEAR ABOUT WPSS: _____

The Wildrose Polio Support Society will use this information solely for the express purpose of the functions of the Society. We will not disclose personal information for commercial purposes without your permission.

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