

POLIO



POST

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You may visit our website at www.postpolionetwork.ca or email us at postpolionetwork@gmail.com

President's Report May, 2015

Spring has sprung! Our 28th annual general meeting was held on March 31, 2015. It was great to have such a good turnout for this meeting. Thanks to the board members for working so hard to make the past year such a success. One of the announcements made at the AGM was regarding the Holiday Party. We are all finding it more difficult for us to attend major functions in the cold weather. So, the board has decided to hold our regular meeting in November @ the Katherine Friesen Centre and instead of a speaker we would have a holiday celebration. Then to celebrate the warmer weather —let's have a Summer Luncheon in June of 2016 at one of our local hotels instead of the June picnic. If we don't like the change we can always go back to the way things were.

The board would like to thank Linda Wilkins and Kathryn Harper for representing us so well in the media regarding the vaccination discussions that have recently arisen due to the measles outbreak.

After the business meeting, Mr. Roger Currie spoke about CJNU, 93.7 FM, a non-profit community co-op radio station.

Starting with this issue, the plan is to provide a write up on the speakers from our general meetings under "Monthly Meeting Highlights" and our individual histories under "Members' Stories". Thanks to Kathryn Harper for volunteering to take this on.

It's time again for our triennial conference. This year the conference will be held on Sept. 21, 2015 and the topic is "Physical and Psychological Aspects of Aging with Post-Polio Syndrome". A registration form can be found in this newsletter. Please send your registration in early to reserve your place. Our key note speakers are:

1. Dr. Carol Vandennaker; Residency Director of Physical Medicine and Rehabilitation at UC David Health System in California and Medical Director of the UC Davis Post Polio Clinic, which she established in 2001. Dr. Vandennaker is a well respected expert in Post Polio Syndrome and has written many articles related to aging with disabilities. Dr. Vandennaker is well versed in the area of physical issues and changes due to aging with PPS. Dr. Vandennaker was the key note speaker at our 2012 conference and we are so pleased that she will be in Winnipeg to share her expertise

with us once again.

2. Ms. Marion Cooper, BSW; Executive Director of Canadian Mental Health Association (CMHA) Winnipeg / Canadian Mental Health Association-Manitoba. Prior to her appointment as ED of CMHA, Ms. Cooper was with WRHA as the Regional Manager of Mental Health Promotion, Illness Prevention and Intervention. In the past she also worked for CMHA Winnipeg Region's Rehabilitation Services.

If you are interested in custom-made orthopedic shoes or need made to measure footwear, contact AFANA POULIOT.

For an appointment call Karen Henry at 204-889-0917, 101-420 DesMeurons St.

Mark your calendars for our upcoming events:

-May 26th General Meeting at the Katherine Friesen Centre, 940 Notre Dame Ave.

SPEAKER: Heather Ann Dixon LLB .

TOPIC: Wills, Power of Attorney, Health Directive Document

-June 15th Annual Picnic at Bourkevale Community Centre, 100 Ferry Road

-September 21st - Triennial Conference at Victoria Inn, 1808 Wellington St.

If you haven't done so, please renew your annual membership. Membership applications are located in this newsletter. It is you the members that make the Post Polio Network, so please join.

Thank you.

*** Cheryl Currie, President ***

MARCH 31ST MEETING HIGHLIGHTS

Guest Speaker – Roger Currie, from CJNU Nostalgia Radio 93.7 FM

Roger has been a writer, broadcaster and storyteller on the Canadian Prairies for more than 40 years. From a junior in the CJOB newsroom in 1970, to a news director in Regina in 1977, to CJOB in 1981 Roger was on the move pursuing what he loved to do most – report news, and interview people.

In 2006, finding himself drifting into early retirement, wondering what he should be doing now, Roger finally settled in Winnipeg in 2012 continuing with freelance writing for the Free Press and Senior Scope which he still does today. It was then that Roger met Bill Stewart from CJNU Radio; a non-profit community co-op station that had been operating on temporary permits until 1994, CJNU progressed into selling annual memberships to where they currently have about 1,000 members.

The nostalgia music from 1920's through the 1960's era was very well received by the listeners. It was something new and refreshing. The biggest change for CJNU was that the station moved from 107.9 to 93.7 FM, a position that allowed more freedom in broadcasting, and acquired a new 500 watt transmitter that was able to deliver this nostalgia music without interruption 24/7.

Broadcasts are heard at host-sponsor locations throughout the city. These are mostly non-profit organizations themselves, who pay for CJNU to come in and help promote their work while playing the music that leaves the audience with a positive feeling. Many of the CJNU staff are volunteers. Many unique volunteer positions are available. CJNU appreciate their co-op members who pay and annual membership.

Listen live at 93.7 FM Radio, channel 725 on MTS TV or off their website at www.cjnu.ca. Or call their info line at 204-942-2568. volunteer.coordinator@cjnu.ca.

Roger does a newscast that is heard every weekday morning at 7:15 a.m. and 8:15 a.m. He also looks at stories in greater depth on Currie's Corner, heard Friday through Monday mornings at 10:15 a.m., and in partnership with Barry Bowman, another prairie broadcaster, who lives in Victoria, Roger co-hosts a weekly podcast, called Boomertown which can be heard every Saturday at 8 a.m. and 11 p.m., also in CJNU 93.7 FM.

APRIL 28TH MEETING HIGHLIGHTS

(A & O Support Services for Older Adults)

The guest speaker, Katherine Nelson from A & O, was a very knowledgeable lady and an excellent presenter with a wealth of information on the many services offered.

All services are FREE of charge, but each person requesting any of their services must be interviewed and registered. ONE phone number will get you in touch with the staff and volunteers who will get you connected to the services you require: 204-956-6440 or Toll Free: 1-888-333-3121.

“A&O Mission Statement: A&O Support Services for Older Adults (formerly Age & Opportunity) is a not-for-profit social service agency that offers life-enhancing programs and services to older adults 55+ living in the province of Manitoba. A&O programs and services support and enhance the physical, intellectual, emotional, social and spiritual lives of older persons and actively promote participation in all aspects of community life.” *Some highlights from the Programs and Services that were presented:*

- **Safety and security** – 24/7 abuse help line, safety aids
- **Social engagement** – interactive programs from the comfort of your own home
- **Connect program** – assist socially isolated older adults – connecting to independent living
- **Counselling services** – information & referrals, housing information, legal clinics

For More Information on any Programs Listed or if You Would Like a Printed Copy of all Their Services; Please Call Any Time of the Day, 204-956-6440. There is Always Someone at the Other End of the Phone.

Accessibility at Winnipeg Richardson International Airport

Getting to the Airport:

Pick-up and drop-off locations designated with the International Symbol of Access are located on the median on Arrivals, located on the main level roadway and on the curb on Departures, located on the level two roadway of the terminal. The availability of these designated spaces are for use as loading zones only.

Ground transportation:

All ground transportation service providers accommodate passengers of all abilities. Ground transportation should be pre-arranged to ensure that an accessible vehicle is ready to take you to and from the airport when needed. Travellers with service animals are permitted to ride in any vehicle without pre-arrangement.

Parking:

Accessible parking is available on levels 2, 3 and 4 of the parkade. Level 3 of the parkade is connected to the airport terminal, departures level by a walkway. Another option for parking is our valet service. Simply pull up to the terminal on the Departures level and a valet attendant will park your car in our valet lot. Leave us your travel itinerary and your car will be waiting for you upon your return.

Universal Design:

Universal design principles were used in the design of the terminal and parkade to ensure that all areas are accessible for all users. The parkade has two oversized elevators, a pedestrian ramp, and stairs connecting all four levels. In the terminal, design cues make important facilities easier to find. Orange glass wall tiles and granite floor tiles identify washroom entrances. Elevator locations are distinguished by granite tiles embedded into the floor surface.

Helpful Goldwing Ambassadors:

Easy to spot in their gold jackets, Goldwing Ambassadors are volunteers who provide personal assistance to passengers and other airport visitors who may need assistance.

** Reprinted from Go-55Plus – a guide for the mature adult – spring / summer 2015 edition **

China Approves New Polio Vaccine

Reuter's article - January 15th, 2015

China has approved a new polio vaccine, the first of its kind to be produced in the country. The development drew praise from the World Health Organization (WHO) who said the vaccine, which will be given to Chinese children as part of routine disease prevention, would help the global fight against the polio virus.

China's private and state-run medical laboratories have been growing in sophistication, helping reduce reliance on imported medicines and competing with global rivals. "This new vaccine is a critically important weapon in the fight against polio as the world nears the eradication of this dreaded disease." Bernard Schwartlander, WHO representative in China, said in a statement.

China technically eradicated polio in 2000, but there have been outbreaks of the disease in the country since. China's drug regulator approved the new vaccine, called Ai Bi Wei. The vaccine was developed by the Chinese Academy of Medical Sciences.

China currently produces an oral vaccine to protect against polio, but it can in some cases cause people to develop the disease. The China Food & Drug Administration (CFDA) said it expected demand for the new vaccine to be in the tens of millions of doses each year.

Update on Anesthesia

Many polio patients fear anesthesia. Multiple surgeries in childhood were common for those who had polio, and anesthesia care then was not as sophisticated as it is today. Modern anesthesia is much improved since the time of polio epidemics!

What's new in anesthesia that I need to know? This is a brief listing:

- Better measurement of quality of care in anesthesia and better recognition of where problems are and how they could be improved.
- Increasingly sophisticated knowledge of ventilation problems and better management of respiratory problems post-op.
- Recognition that many patients are left with residual neuromuscular block and the possible complications.
- The desirability of using both regional anesthesia and general anesthesia together, for improved outcome.
- Shortages of standard anesthesia medications are happening, due to changes in the pharmaceutical industry. This has caused many problems.
- Does the medical literature document anesthesia problems for post-polio patients? A 2013 review found no unusual problems and that regional anesthesia was not reported to cause worsening of PPS.

*Selma H. Calmes, MD, retired Anesthesiologist, Culver City, California
(used with permission of Post Polio Health International)*

Choosing the Best Mobility Device for Your Needs

These are the questions to consider:

- Which type of device is right for you?
- Where will you use the equipment?
- Do the controls on the device provide comfortable and safe driving?
- Do you need customized seating?
- What size device is best?
- Are treaded tires better?
- How will you transport the device?

*Kate Hofmann, Marketing Manager, Amigo Mobility International Inc., Bridgeport, Michigan
(used with permission of Post Polio Health International)*

MEMBERS' STORIES: How Polio has affected them then & now
We encourage all members to consider submitting their stories

Albert Patenaude's Story

I was four years old in 1953 when I came down with sniffles and cold-like symptoms. The following morning I couldn't walk – my legs totally paralyzed. I was diagnosed with poliomyelitis, but because I had no respiratory issues, I was not admitted to hospital. This didn't stop me from having fun – I just rolled off the couch, laughing, crawling and rolling around on the floor.

Two months later I was introduced to a young physiotherapist who worked with me five days a week for one year. With strength training and increased range of motion, new neuron sprouts developed and activated – I was walking again, and my feet were growing so my shoes had to be adjusted every six months. The Polio virus had taken its toll, particularly on my upper body as scoliosis developed. I had no resistance on one side as the strong half of my body pulled on the weaker side causing my spine to rotate on itself – my hips went right and the rest of my body went left.

Between the ages of six and ten, I had a series of spinal fusions to straighten my spine and align my hips, allowing me to walk straighter. Despite all the trauma to my young body, and although limited, I still enjoyed an active childhood, but extended times in the hospital caused me to be held back in my school work.

As a young adult, I went on to pursue work in the television industry where I worked for 25 years. Around 1998, at the time this career was ending, my condition was deteriorating. It was then that I was diagnosed with Post-Polio Syndrome; my breathing became heavier and my legs were a lot weaker resulting in the use of one cane then increasing to two canes.

Not one to be idle, I had to do something meaningful, so I successfully studied and became a massage therapist. Two years into this new career, my symptoms progressed at an accelerated rate which finally forced me into early retirement.

I developed alarming bouts of disorientation and experienced hallucinations as my oxygen level decreased and my carbon dioxide level increased. One lung was compressed and one was expanded; my breathing was shallow and sleep very spasmodic. I was admitted to hospital where I was diagnosed with Hypercapnia - an increased amount of carbon dioxide, the waste product of respiration, in the blood. I lost consciousness, slipped into a coma that quickly became life-threatening, and was rushed to the ICU ward where I was intubated and on straight oxygen therapy. After my hospital stay I was sent home with a bi-pap machine and oxygen that I used for the better part of a year to restore my breathing, and balance the carbon dioxide in my blood.

I still have very challenging times with weakness in my respiratory system, my legs and back and still require those precious daytime naps. "Overall, I don't know what I would do without the loving support of my wife, Joan. Together, we enjoy our floral and veggie gardens – waiting with great anticipation to get our hands back in the soil.

(Albert's gardening story can be read in the November 2013 issue of our newsletter which can be found on our web site.)

Albert has been an active member of the Post-Polio Network Mb. Inc. since the late 90's, having served as Program Coordinator for eight of those years. Albert also worked closely with past-president David Turner, along with several other members and University of Winnipeg history students who went out interviewing Polio survivors. The stories were sent to, and are still available to read at the Manitoba Archives Building. (April 2015)

Janis Watson's Story

This is my mother's account of the onset of Polio in my life as of November 6th, 1953:

Janis was five years old, complaining of a very bad ear ache, unable to sleep, asking for the hot water bottle to be refilled and warmed all through that first night. She was feeling better by morning, pale but in good spirits.

On November 10th, Janis began eating less, sleeping more and ran a fever. I called the local doctor on the 11th but he couldn't see Janis until the 13th. On November 12th, she stopped and began to tumble, needing assistance to move about. The doctor said to bring her in right away, but after a two-hour wait we took her straight to the Gladstone General Hospital where she was admitted; the tumbling had turned to muscular spasms when she drifted off to sleep.

Her neck was stiff when she was first admitted though we weren't aware of this. It was a factor, which haunted me through her confinement. By day and night she had violent muscular spasms when sleeping – at regular short intervals gradually dying out to half hour periods and then later to none.

The doctor gave her a lumbar puncture and said he believed it might be meningitis. The doctor said when she entered the hospital, “a few more hours and it would have been useless to take her in”.

At times the spasms were so violent that she would be up on her knees. When I said, “It's okay Janis” or “it's alright”, she would immediately lie down and go off to sleep. She also had bad coughing spells when she brought up thick discharges from her throat. Without someone constantly there to wipe this out of her throat I believe she would have died in the early stages of her illness. I stayed with Janis day and night leaving her side around 11pm that same night to give birth to my next child. Her condition worsened; we were at a loss to know what was wrong.

The first day she received 500 c.c saline intravenous solution; no food, also second, third and fourth day 1000 c.c. As it was necessary to find veins it became increasingly difficult to find a suitable spot in arm, wrist or foot and finally the fluid was injected into the tissues to prolong life. By the 18th, after evening visiting hours, it became apparent that she was sinking fast. The doctor came in with a hypodermic for giving adrenalin to her heart. When he had finished looking to her immediate needs, he called another doctor – something in the saline solution was missing; they decided it could be potassium. The fed her eggnog through a tube via nose and throat, and once the potassium was administered she began to take on new life.

The doctors and nurses held a special meeting to consider whether Janis should go to King George Hospital, Winnipeg. Janis was eventually diagnosed with bulbar poliomyelitis, and as the iron lung wasn't necessary it was decided to keep her in Gladstone. As the doctor said “In there she would be one among many, but in Gladstone she was a pretty important young lady.”

Janis was recovering – first a step, then a few steps until finally after 18 days she was able to come home. She lost 7 pounds during her stay, her throat was weak and her nerves were bad but we still had our daughter.

** Mary E. Watson **

Janis has no residual ambulatory issues, but is extremely sensitive to cold temperatures, has difficulty sleeping, experiences shallow breathing and weakness in her vocal chords.

Janis is currently a member of the Post-Polio Network MB Inc., volunteering on the telephone committee, calling other members on a regular basis to say hello, answer any questions, and inform of upcoming events. (April 2015)

This and That

Do you have an interesting story to tell?

Or do you know any good jokes, inspirational or humorous quotes or poems?

Then you are invited to email them to:

postpolionetwork@gmail.com or mail them to:

Post-Polio Network (Manitoba) Inc.

C/O SMD Self-Help Clearinghouse

825 Sherbrook Winnipeg, MB, R3A 1M5

6 Simple Life Hacks

- Use a bread tab to hold your spot on a roll of tape
- Use a can opener to open blister packs and avoid cutting yourself
- Put pancake mix in a ketchup bottle for a no-mess experience.
- A frozen, saturated sponge in a bag makes an ice pack that won't drip all over when it melts.
- To remove the stem from strawberries, use a straw.
- Rub a walnut (shelled) on damaged wooden furniture to cover up dings.

FYI: for the museum of healthcare in Kingston visit <http://www.museumhealthcare.ca>

2015 - 55 Plus Games

Beausejour, Manitoba

June 16-18, 2015!

"Never Too Old to Play"

Are you 55 plus or turning 55?

Register today for the 2015 - 55 Plus Games!

Ph: 204-261-9257, toll free 1-885-261-9257

Email: manitoba55plusgames@gmail.com

Registration deadline is May 8, 2015

Presented by Active Living Coalition
for Older Adults in Manitoba

8th Annual 55+ Housing & Active Lifestyles Expo

Supported by Age and Opportunity

– Support Services for Older Adults –

Tuesday May 26th, 2015 10am to 3pm

Victoria Inn, 1808 Wellington Ave. Wpg. Mb.

Event includes: exhibitors representing housing facilities, care facilities, housing support services, realtors, home safety and security, and not-for-profit agencies that provide services for older adults.

For more information phone 204-956-6440 or visit www.ageopportunity.mb.ca.

FREE ADMISSION



Doug Mihalyk, a Post-Polio member, seen here with his wife Deb visiting the Salk Institute while on holiday this winter in San Diego. The Salk Institute was founded in 1960 by Dr. Jonas Salk, the scientist who developed the first polio vaccine. There is a short 3D documentary produced by Hollywood veteran actor, Robert Redford, which focuses on the Salk Institute for Biological Studies. Redford's interest to produce this film was due to his brush with polio - mild enough not to cause any real damage.

Come and Enjoy our Annual Picnic



Monday, June 15th, 2015
Time: 5:00pm – 7:00pm
Bourkevale Community Centre
100 Ferry Road
(turn south off Portage Ave at Ferry Road
towards the Assiniboine River)



Bourkevale is wheelchair accessible with adequate parking.
We will use the clubhouse in the event of inclement weather.

Catered by: Famous Dave's Ribs
Cost: \$5.00/person

Membership Application Form

Name: _____

Address: _____

City: _____ **Province:** _____

Postal Code: _____

Telephone: _____ **E-mail:** _____

Annual membership fee is due January 1

New Membership - \$15/year

Membership Renewal - \$15/year

I wish to make a charitable donation of \$
(Tax deductible receipt will be issued.)

Please make cheque payable to:

Post- Polio Network Mb. Inc. and mail application form and cheque to:

Post-Polio Network, 825 Sherbrook St., Wpg. Mb. R3A 1M5

For further information please phone 204-975-3037

Post-Polio Network's Privacy Policy

The Post-Polio Network will use this information only for the purpose of the functions of the Network. We will not disclose personal information to anyone without your permission.

Charitable registration number: BN 13189 2267 RR

You may visit our website at:

www.postpolionetwork.ca or email us at postpolionetwork@gmail.com

POLIO SUFFERER EXTOLS VIRTUES OF BIONIC LEG

The new intelligent, carbon fibre brace uses a built-in microprocessor and sensors which allows the knee to control all aspects of the walking cycle and can be worn on either one or both legs. It can help people who do not have control of their legs to walk naturally, cycle, walk down stairs and descend slopes at a normal walking speed.

John Simpson, 63, of London, England said that the lower-limb robotic brace was a “revolution”. It will now help many others who are living with partial paralysis, spinal injury, post-stroke and post-polio syndrome to walk naturally again.

“For as long as I can remember, I’ve had to walk with a locked knee, which is awkward, cumbersome and puts great strain on my lower back”, Mr. Simpson explained. “Over the years I tried new braces, supports and therapies, but nothing helped me walk and so I stuck with my original steel calipers. Now I can walk naturally and I can walk downstairs with a bent knee without fear that my leg will give way as the brace provides support intuitively.”

Article from Polio Quebec Association – February 4, 2015

MERGER TIPS FOR 2015

For all of you with any money left, be aware of the next expected mergers so that you can get in on the ground floor and make some BIG BUCKS.

WATCH FOR THESE CONSOLIDATIONS IN 2015

1. Hale Business Systems, Mary Kay Cosmetics, Fuller Brush, and W. R Grace Co. will merge and become: Hale, Mary, Fuller, Grace.
2. Polygram Records, Warner Bros., and Zesta Crackers join forces and become: Poly, Warner Cracker.
3. 3M will merge with Goodyear and become: MMMGood.
4. Zippo Manufacturing, Audi Motors, Dofasco, and Dakota Mining will merge and become: ZipAudiDoDa.
5. FedEx is expected to join its competitor, UPS, and become: FedUP.
6. Fairchild Electronics and Honeywell Computers will become: Fairwell Honeychild.
7. Grey Poupon and Docker Pants are expected to become: PouponPants.
8. Knotts Berry Farm and the National Organization of Women will become: Knott NOW.

And finally.....

9. Victoria’s Secret and Smith & Wesson will merge under the new name: TittyTittyBangBang.



CONFERENCE 2015

“Physical and Psychological Aspects of Aging with Post-Polio Syndrome”

Date: September 21, 2015 **Time:** 8:30am – 3:30pm
Place: Victoria Inn **Cost:** \$35.00 (incl. lunch/coffee)
1808 Wellington Ave
Winnipeg, MB

For further information contact:

TELE: 204-975-3037 **EMAIL:** postpolionetwork@gmail.com

Registration Deadline: Sept 10, 2015

Registration Form

Name(s) _____

Address _____

City _____ Province _____ Postal Code _____

Phone (____) _____

Food Allergies: _____

No. of attendees: _____

**Send cheque or money order with the registration to
Post Polio Network, 825 Sherbrook Ave., Winnipeg Mb R3A 1M5**