



Polio News

Post Polio Support Society NZ (Inc)

May 2010

Illustrated Story of the Eradication of Polio



Steve Buccellato has drawn a comic book of the history of polio eradication

<http://stevebuccellato.blogspot.com/2008/12/amazing-stories-of-polio.html>

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Post Polio Support Society of NZ Inc

AGM and MINI CONFERENCE

**Thursday 9th of September
Hamilton
Venue: The Airport Inn**

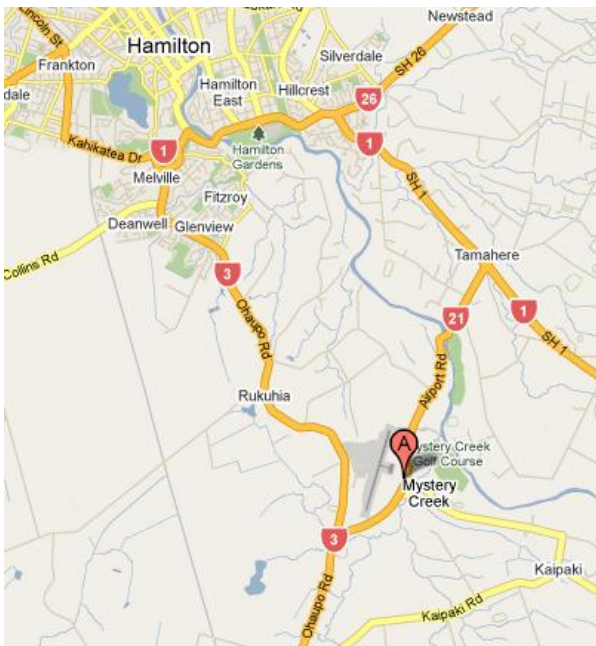


More details later but please mark your calendar now if you, or a member from your Support Group, are planning to attend.

The plan is for a 9am start on the Thursday and conclude by 4 pm in time to fly out or drive home before dark.

Accommodation is available for those who wish to arrive on the Wednesday in the later afternoon.

Enquiries to 0800 476 546



The balloon marks the venue.



The Conference Centre.

NZ Government Contributes To "End Polio Now"

On May 19 Rotary NZ World Community Service Limited (RNZWCS), on whose Board JB Munro our Post Polio NZ Secretary serves as Vice Chairman, celebrated in the Beehive, 25 years of endeavouring to improve educational and living standards and other humanitarian needs of people overseas including the elimination of Polio.

At the "birthday" function it was announced that the Government had agreed to grant this year \$700,000 towards the Rotary "End Polio Now" campaign.

Our Post Polio Support Society President Edith Morris had earlier written a letter of support to the Minister of Foreign Affairs and that helpful letter is copied below

19th March 2010

The Minister of Foreign Affairs
Parliament Buildings
Wellington

Dear Mr McCully,

Our Post Polio Support Society of 600 Polio Survivors across New Zealand strongly endorse the efforts of Rotary Club members nation-wide in their promotion of "End Polio Now".

Poliomyelitis in New Zealand was virtually eliminated by 1962, so almost all of our members are over the age of 60 with several living into their 90's. Many recall as youngsters, the assistance of Rotarians through their local Crippled Children Society and are most appreciative of the

determination of Rotary to eradicate Polio globally.

In partnership with the UN, WHO and major benefactors such as Bill and Belinda Gates, Rotary embarked in 1985 on a programme to eradicate Polio once and for all. Today just four countries, Afghanistan, India, Nigeria and Pakistan, remain polio endemic with fewer than 2,000 cases reported worldwide in 2009. Last month in India six National Immunisation Days were held with 191 million homes visited and 167 million children immunised. I understand that several NZ Rotarians participated in this great immunisation exercise.

We are aware and gratefully acknowledge that while Rotarians have raised in New Zealand nearly \$6 million over the past twenty five years, the NZ Government has also been generous. This fiscal year Rotary is making a special effort to assist in raising \$US 200 million of which 60% has already been contributed.

Our wish is that you as Minister and your colleagues will endeavour to assist Rotary in New Zealand through Rotary New Zealand World Community Service Limited by way of a substantive contribution in order to advance the total elimination of Polio across the world.

Yours sincerely,

(Mrs) Edith Morris
President

Gates Rethinks His War on Polio

Bill Gates walked into the World Health Organization's headquarters in Geneva—for a meeting in an underground chamber where global pandemics are managed—and was greeted by bad news. Polio was spreading across Africa, even after he gave \$700 million to try to wipe out the disease.

That outbreak raged last summer, and this week a new outbreak hit Tajikistan, which hadn't seen polio for 19 years. The spread threatens one of the most ambitious health campaigns in the world, the effort to destroy the crippling disease once and for all. It also marks a setback for the Microsoft Corp. co-founder's new career as full-time philanthropist.

Next week, the organizations behind the polio fight, including WHO, Unicef, Rotary International and U.S. Centres for Disease Control and Prevention, plan to announce a major revamp of their strategy to address shortcomings exposed by the outbreaks.

Polio is a centrepiece of Mr. Gates's charitable giving. Last year the billionaire travelled to Africa, one of the main battlegrounds against the disease, to confer with doctors, aid workers and a sultan to propel the polio-eradication effort.

"There's no way to sugarcoat the last 12 months," Bruce Aylward, a WHO official, told Mr. Gates in the meeting in the underground pandemic centre last June. He described how the virus was rippling through countries believed to have stopped the disease.

Mr. Gates asked: "So, what do we do next?"

That question goes to the heart of one of the most controversial debates in global health: Is humanity better served by waging wars on individual diseases, like polio? Or is it better to pursue a broader set of health goals simultaneously—improving hygiene, expanding immunizations, providing clean drinking water—that don't eliminate any one disease, but might improve the overall health of people in developing countries?

The new plan integrates both approaches. It's an acknowledgment, bred by last summer's outbreak, that disease-specific wars can succeed only if they also strengthen the overall health system in poor countries.

The more detailed story can be read at:
<http://www.zimvi.com/?p=3593>

Nigeria

Nigeria is ground zero for the re-emergence of polio. Now the country is making surprising headway against the crippling disease, in part thanks to an unlikely meeting of two leaders: Microsoft mogul Bill Gates, and the Sultan of Sokoto, the spiritual leader of Nigeria's 70 million Muslims.



From the President's Chair

My warmest greetings to all. As the weather is getting colder extra care is needed: careful not to fall, careful not to catch cold, careful not to get depressed as sunlight is less. Why not rug up warmly and enjoy the colours of Autumn? Even a drive around the parks and gardens is a delight.

As our mobility decreases and attending support meeting becomes more difficult, it is important that we keep in touch with each other by e-mail, phone calls, letters and local newsletters.

I will be travelling in the South Island with Noel for his work, and I have a little free time to visit with the Nelson, Oamaru and Dunedin support groups. I hope to meet some of you then.

Orthotics again: I met with the CEO and a manager of a major orthotic provider, and presented our concerns and recommendations to them on behalf of our board and members of our society. It may have given things a bit of a shake up and hopefully the quality of work will be improved, with quicker appointments and less delays in repairs. Thank you to polios in the Wellington area and the National Board for paving the way for ongoing interaction with Orthotics. It isn't over yet.

AGM and mini-Conference 2010: Our conference this year will be held in Hamilton. (see details on other page) In view of decreasing members and decreasing funds the conference side of our AGM has been scaled down. However it will be a conference with excellent content. Details will follow as planning continues.

Polio Stories: Only one person has given any feedback on personal stories. (see

last issue for Clare's story) There is evidence that compiling polio stories is a valuable endeavour (see book reviews on another page) and it is vital that there are historical records of our collective experiences. I haven't received any stories to write up in this issue.

Keep well.

WE ARE STILL HERE (and doing our best)

From my wheelie friendly chair

Edith

0800 476 546
edith@catchword.co.nz



Regional Events

Nelson

Hello everyone,

Let's hope this lovely weather lasts a little longer although I feel sorry for those affected by the drought. Nothing's ever perfect is it!

Thank you for the response to my request re a DVD on the conference in the last newsletter, especially to Dorothy of Northland, it was most appreciated.

Our best wishes go to Anne and Rex Wastney who are looking forward to their trip to visit their son in Holland. They will enjoy some summer weather while we are shivering!

Our mid-winter luncheon will be on:-

Saturday, 26th June, 12.30pm
Anchor Bar and Grill
Vickerman St
The Port

There is easy parking and access and also suitable toilets. All we need is a nice day!

Please let us know if you are coming by 22nd June and we'd love to see you.

You may ring Rex [547 7043] or Jenny [545.1030] any time for help or just a chat. Take care of yourselves this winter

Regards
Rex Wastney and Jenny. Kissane

Christchurch

I have to begin, as I did last report, with a word about the weather. All through Easter and up till now it has been so warm that we have been tempted to the outdoors on many occasions.

As a group, we had a glorious day cruising by bus through the Canterbury countryside recently with a stop for lunch at a small country tavern in Coalgate, a little country town on the fringe of the plains. After the meal we were entertained with tales of the district's beginning. The destination had not been disclosed and no one guessed correctly.

The trip had been in doubt after the loss by fire of our popular wheelchair bus, but the operator managed to obtain a replacement vehicle on loan from Auckland. We have promptly booked it for two more trips while it is still available.

The weather didn't treat us quite so kindly on a day in March when we all gathered for lunch at a converted orchard Packing Shed (that's what it is called) but never mind, the meal was great and no body got too wet.

It has been fortunate that, over the past year or two, we have had a trickle of new members which helps to keep our numbers stable. It would be interesting to know if any other branches have experienced this.

George Ross

Nelson



View of Nelson Harbour, near venue for next meeting

Christchurch



Norma McKenna, Ruth Hall, Peter Humphries and Noelene Benbow eagerly awaiting lunch at the Packing Shed.

Otago

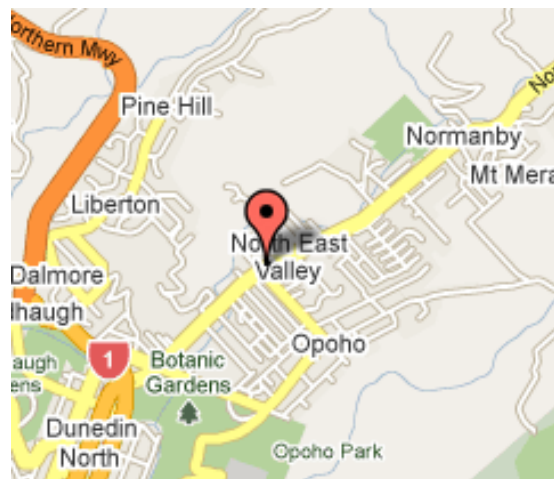
The Otago Group ended 2009 with a bus trip to Waihemo Lodge in Palmerston. We hire a DDC bus because they have the kneel down access and wheelchair facilities and a very obliging and friendly driver.

We took the main road up and enjoyed a great lunch with a good selection to choose from. Once the staff learned that we are a Post Polio group they put themselves out to be helpful. We find that is the case everywhere we go.

There are great views from the main road but we returned by the coastal road and those views were stunning. So were the corners. The road winds around the coast as does the railway line and you see things you would usually see only from the excursion train.

Our first meeting for 2010 was held at Manniquin's Cafe. We were a bit squashed as they set up two long tables in the conservatory so that we could all be together. The noise level was about the usual so everyone was enjoying themselves and the staff remained good humoured as they slipped around behind the chairs to serve the meals so we feel properly launched for the year and will be thinking about speakers next.

Diane Jackson.



"Lately, I've been feeling lethargic, listless and apathetic, and if I stand up too suddenly, I get dizzy. My daughter says she has to smoke two joints to feel like that."

Waikato

With many of our Waikato members facing mobility challenges and some needing home help, it was good to have two representatives from "ACCESS HOME HEALTH" speak to us about their organisation. The service manager for the Midlands area filled us in on the history of Access which has been going for 80 years. Our Jack piped up with "you don't look 80" and the delightful young Access lady laughed at that. As a digression one of our oldest members Joan Woolhouse turns 89 years old and was serenaded with "Happy Birthday."

Back to Access. The process of qualifying for home help was explained: A referral from your GP, a NASC (needs assessment and service co-ordination service), a visit to your home from an

assessor, then a support plan is put in place which sometimes involves working in with other agencies, and finally a helper is allocated to you. Personal Care, nursing services, household assistance, transport and other assistance is offered. It depends on your DHB what help is available and funded.

Fourteen of us attended this Access meeting, and questions asked and stories told of our polio experiences. We learnt from the Access ladies and they learnt about some of the polio challenges we face and cope with. As always it was good to get together and linger over afternoon tea.



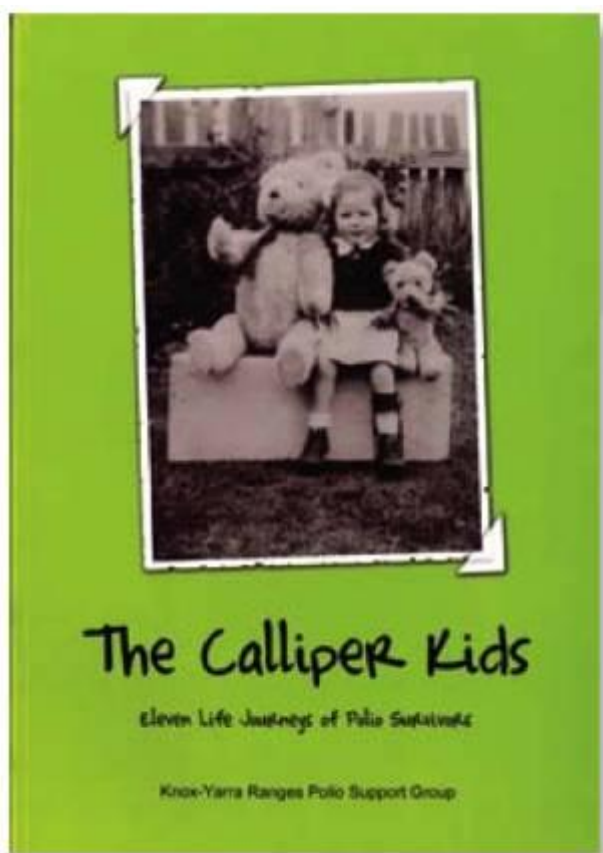
Two members from Access Home Health address the Waikato meeting in Edith's lounge.

Edith Looks at Books

The Calliper Kids

Eleven Life Journeys of Polio Survivors
(Review from *Polio Perspectives*, Victoria)

Reading *The Calliper Kids* reminded me of things I had long forgotten. The well written stories are extremely readable and uplifting. Some made me laugh but mostly made me marvel at the endurance and perseverance of those of us that live with polio.



Stories, memories have answered questions that had bemused me about things my mother did – like fuel me with brandy egg-nogs for pain, squelch me with prunes and send me to school with date, walnut and vegemite sandwiches. I was probably constipated. Yes, I was also a Calliper Kid. If you read nothing else this year you must read *The Calliper Kids*.

For orders contact:

*Knox-Yarra Ranges Polio Support Group
email joansgra@bigpond.com*

Edith says

It took a couple of sessions to read this very engrossing collection of eleven stories. There are plenty of black and white photos to break up the text of outback scenes, farms, families, weddings and graduations to illustrate each person's story.

Everyone has a story and it has been my desire to see more of our members' stories recorded, at least in this newsletter as a start. Who knows what could come out of it. Maybe another New Zealand flavoured book. Keep writing your own story, get it down for your children, your grandchildren and as an historical record. Do it before it is too late.

I have recently re-read Karen Butterworth's excellent book "**Mind Over Muscle**" printed in 1994 and am reminded of the value her book has for New Zealanders. If you haven't read it, I'm sure it is still available.

Earlier in May I was honoured to be part of the IHC "our stories" photographic exhibition and I spoke to a class of primary school children about my polio story. How wonderfully frank children can be. Their teacher told me later that the class have been reading "**Enemy at the Gate**" by Philippa Werry printed in 2009. Philippa spoke about her book at our last polio conference in Wellington and held us all spellbound as we re-lived the reality of the enemy at our own gate so many years ago.

"**Ready, Willing and Able**" The CCS West Coast Journey by Heather Knowles printed in 2006 was sent to me by Patsy Bell. This book outlines the historic links between Polio, Rotary and CCS on the West Coast. Full page black and white portrait-like photos have pride of place as key people are acknowledged. Patsy's father, Percy Atkinson QSM was certainly

an outstanding and influential driving force in establishing CCS there, in response to his own daughter Patsy having polio. There are snippets of polio stories throughout this little book. An easy read for those interested in the West Coast communities.

So why not read some of our polio stories over this Winter? Ask yourself “Could I write my story too?”

Papamoa Rotary



Papamoa Rotary recently spent a weekend in the mall educating the public about polio.

Russia confirms first polio case in 13 years

Friday, May 14, 2010

MOSCOW (Reuters) - Russia has confirmed its first polio case in 13 years in an infant visiting from Tajikistan, but there is no immediate threat of a wider outbreak, the country's main public health body said Friday.

The 9-month-old girl was diagnosed with the disease after arriving in the Siberian region of Irkutsk from the Central Asian state, where at least 12 people have died from a polio outbreak, said Rospotrebnadzor spokeswoman Lyubov Voropayeva.

"All the necessary epidemiological measures have been taken. There is not currently any threat the disease will spread," Voropayeva said.

Tests in a Moscow hospital found that a second girl from Tajikistan, also 9 months old, was carrying the polio virus but had not developed the disease, Voropayeva said. The last case of polio was confirmed in Russia in 1997.

Polio, which spreads in areas with poor sanitation, attacks the nervous system and can cause irreversible paralysis within hours of infection. Children under the age of 3 are most vulnerable.

The disease was practically eliminated as a public health problem in industrialized countries in the 1960s, but remains endemic in seven countries, including India, Nigeria and Pakistan, according to the World Health Organization (WHO).

At least 12 people have died of polio since January in Tajikistan, WHO figures show. "It is a huge outbreak," WHO spokeswoman Sona Bari told Reuters in Geneva.

She said at least 83 cases of polio had been registered in Tajikistan. Apart from Russia, no other ex-Soviet country has reported infections from the outbreak, she said.

UNICEF, the U.N. children's fund, Friday said it was starting a second round of polio vaccination in Tajikistan, aiming to reach 1.1 million children under the age of 6 and was planning additional vaccinations in Uzbekistan and Turkmenistan.

The WHO, a U.N. agency, will present its strategy for eradicating polio by 2013 at its annual ministerial meeting of 193 member states in Geneva next week.

Read more:

<http://www.nationalpost.com/life/health/story.html?id=3bf0741d-bf76-4987-95d2-70ffe0a736f2#ixzz0o2KLUUkt>

Russia confirms 2nd case of polio

Friday, May 14, 2010

MOSCOW – A laboratory has confirmed polio in a 9-month-old Tajik girl in Moscow, news media reported May 14. She is Russia's second confirmed polio patient.

Doctors diagnosed another Tajik girl, also 9 months old, days ago in Irkutsk Oblast with polio. Both infants arrived in Russia before it banned Tajik children under age 6 from entering the country.

Both patients are in satisfactory condition, doctors said.

Tajikistan has recorded 15 polio deaths this year, news media reported. Tajik health official Samardin Aliyev told khovartj the country had 52 confirmed polio cases.

Editorial

A little bit of History



Susan gets the first anti-polio vaccination in the Dunedin health district, given by her father Dr Murphy, on the 24th September 1956.

New Zealand was declared polio free in 2000. It took about 44 years of immunisation to achieve this – effectively only two generations. This illustrates what can be achieved when the collective will of a nation is harnessed.

Continued immunisation of the next generations is the key to maintaining our polio free status. As we all know there is apathy in certain sectors of our nation. The thinking is “we don’t have polio here, so we don’t need to vaccinate against it.” Now that our generation has moved into grandparenthood we need to remain active in community education. Edith has a comment in her column about visiting a local school, and the students’ comments.

I am occasionally asked why I walk with a limp by younger folk. After showing the enquirer, I always tell them they must immunise their offspring when they have them. ☺

Take care.

David

About Us

The Post Polio Support Society of NZ is an incorporated society



dedicated to seeking support for people who have had poliomyelitis. It does this through information sharing and where possible, assistance to polio society members and their families, whether or not they are experiencing problems at present.

The Society’s Board of Management meets regularly either physically or by telephone conference, and the annual general meeting of members is held in September.

The Society’s newsletter, **Polio News**, is published four times a year (March, May, August, and November) and is sent to all members.

Contributions are welcome and the deadline for copy is the 15th of the month before publication.

Disclaimer: Opinions expressed in the newsletter are those of the writers and not necessarily those of the Society.

Acknowledgement: This newsletter has been paid for by a grant from the Lottery Grants Board and the JR McKenzie Trust, to whom the Society expresses its thanks.



Feed Drink for Thought?

Alcohol in our Lives

Public Health Perspective
Dec09

Alcohol policy is in the spotlight with the Law Commission reviewing the regulation around the sale and supply of liquor.

“Alcohol in our Lives” outlines the changes that have occurred since the liberalisation of our drinking laws in 1989. Since then alcohol has become more affordable and more widely available. Young people are drinking from an earlier age and drinking larger quantities.

While many New Zealanders enjoy alcohol responsibly, the Law Commission’s report raises some concern about the impact alcohol is having in our communities.

These impacts are particularly felt by the health and justice sectors. It is estimated that about 1000 New Zealanders a year die from alcohol-related causes and thousands more are injured in alcohol-related trauma or suffer adverse chronic health effects of alcohol.

New Zealand Police report at least 31 percent of recorded crime in 2007/08 was committed by someone who had consumed alcohol beforehand, with alcohol a factor for offenders in over 20,000 violent offences.

Dr Bruno Answers

Q: I saw a recent article that alcohol actually decreases the possibility of having a heart attack. I am very sensitive to alcohol. My husband calls me a cheap date. One drink and I'm asleep. Other polios tell me they're like this, too. Since alcohol has so many bad effects, is drinking good for polio survivors?

A: Recent research suggests that the answer may be "yes"--but it's important to remind ourselves of the dangers of alcohol. In the short-term alcohol can trigger headaches and decrease both attention and coordination. Over time alcohol is the number one cause of liver disease. The perils of alcohol addiction are all too well-known.

But moderate drinking may be good for polio survivors and almost everyone. First, alcohol makes you and your muscles relax, slows your heart rate and your breathing--all good things. Alcohol is said to do these things by "depressing" the brain, discharging neurons' internal batteries and making them less able to fire. Of course, if you discharge the batteries too much you have a falling-down, snoring drunk. **Too much muscle relaxation isn't good in polio survivors whose muscles aren't so strong to begin with. And, as your experience makes clear, polio survivors' damaged brain activating systems make them more sensitive to anything that causes brain "depression."** So you need to be careful about how much and when you drink, especially if you have post-polio fatigue and if you're taking medications that themselves cause sedation.

From
<http://www.newmobility.com/articleViewIE.cfm?id=732>

World Health Organisation and Late Effects of Polio (LEOP)

WHO estimates there are 20 million people worldwide with some degree of disability caused by poliomyelitis. A 1996 National Centre for Health Statistics survey reported a preliminary estimate of one million survivors in the United States. About 450,000 of them reported paralysis resulting in some form of impairment.

For years most of these polio survivors lived active lives, their memory of polio long forgotten, their health status stable. By the late '70s, polio survivors were noting new problems of fatigue, pain, and additional weakness. By the mid-'80s, health professionals and policymakers recognized these new problems as being real and not "only in the patients' minds." Studies on this phenomenon called "post-polio syndrome" have been – and are still being – conducted in research institutions and medical centres.

The survivors of poliomyelitis may experience symptoms that include:

- Unaccustomed fatigue – either rapid muscle tiring or feeling of total body exhaustion
- New weakness in muscles, both those originally affected and those seemingly unaffected
- Pain in muscles and/or joints
- Sleeping problems
- Breathing difficulties
- Swallowing problems
- Decreased ability to tolerate cold temperatures
- Decline in ability to conduct customary daily activities such as walking, bathing, etc.

These general symptoms are experienced in varying degrees, and their progression can be insidious. They should not be dismissed simply as signs of aging alone. Current research indicates that the length of time one has lived with the residuals of polio is as much of a risk factor as chronological age. It also appears that individuals who experienced the most severe original paralysis with the greatest functional recovery

are having more problems now than others with less severe original involvement.

The diagnosis of post-polio syndrome is one of exclusion.

A definitive test is not yet available. Some of the confusion and doubt among polio survivors, health professionals, and family members is due to the lack of common understanding of terminology. It is helpful to think of post-polio problems in the following categories, remembering that the groupings are not distinct but parts of a continuum.

The largest and most inclusive category is called Late Effects of Polio or Polio Sequelae and is defined as specific new health problems which result from polio-caused chronic impairments, e.g., degenerative arthritis of overused joints, carpal tunnel syndrome and other repetitive motion problems, tendonitis, bursitis, failing joint fusions, overstressed joints due to compensatory body mechanics.

Post-Polio Syndrome, a sub-category of the late effects of polio, is defined as a neurologic disorder characterized by increased weakness and/or abnormal muscle fatigability. The cluster of symptoms includes new weakness, intense fatigue, and pain in muscles and joints resulting in decreased endurance and diminished function. Most clinicians use the following criteria to diagnose post-polio syndrome.

Recovery followed by 15 years or more of stability preceding the gradual or abrupt onset of new weakness and/or abnormal muscle fatigability (decreased endurance), with or without generalized fatigue, muscle atrophy, and/or pain.

Other conditions that might cause the problems listed above must be excluded.

<http://www.post-polio.org/edu/lep.html>

Brainbox wins award for disease research

Professor Richard Faull was PPSS's 2009 Conference speaker. He has spent 35 years studying the human brain so he can help people affected by brain disorders including Parkinson's, Alzheimer's and Huntington's disease.

His efforts are recognised internationally and in 2007 he was awarded the Rutherford Medal - the highest honour for New Zealand scientists. Last night, the neuroscientist was honoured again as Supreme Winner of the 2010 World Class New Zealand Awards at the Langham Hotel in Auckland.

The 7th annual awards, also known as the "tall poppy awards", celebrate the achievements of innovators and entrepreneurs who have made significant contributions to the country's growth and development.

While Dr Faull found the award "incredible and humbling", he said that his work would not be possible without the generosity of sufferers of brain disease and their families, who donated brains for scientific research.

"I call the families the heroes of the disease because they've got to live with the disease 24 hours day. And if it's a genetic disease its even more than that because it can be

passed on to them and their children," he said.



"We can help them by doing scientific research to understand the tragedy of their lives."

Dr Faull is the director of the Centre for Brain Research at the University of Auckland and founder of the Neurological Foundation of NZ brain bank, which hosts 400 brains.

"It's this magic box which you've got to look after," he said of the brain. "You can do things on the outside but you can't rewire it on the inside."

Sir Stephen Tindall, chairman of the awards' judging panel, described Dr Faull's achievements as ground-breaking.

Directory

Information about membership and local support groups

Free phone 0800 4 POLIO (0800 476 546)

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