

*From Henry's Desk:*            **Is PPS Fatal?**

*By Henry Holland*

The answer to the above question is no. To my knowledge there has not been any clinical research to indicate that Post-Polio Syndrome (PPS) is a terminal disease process. Acute polio was all too often a fatal disease, but the vast majority of polio victims survived. It seems that the majority of polio survivors are now dealing with PPS. If not a terminal condition, does PPS increase the risk for a shortened life span? I would answer this question with a probable yes. It is becoming more common for Post-Polio newsletters to report the deaths of beloved members. Time and research will probably reveal whether individuals with PPS have a shorter average life span than other individuals who never had polio. It is my opinion that polio survivors with PPS often live with a greater risk for a number of conditions or mishaps that could be terminal or life shortening. During the month of December two of our active members experienced life-threatening situations. Their experiences are demonstrative of the risk that is often present in the daily life of many individuals with PPS.

Linda Wyand had polio at the age of ten, was hospitalized on the polio ward at MCV from early August to October in 1946 when she was transferred to the (Crippled) Children's Hospital where she remained hospitalized until February 1947. She initially wore a long leg brace on her right leg and a short leg brace on her left leg. At the age of fifteen, she discarded her braces and got along without them. She married and raised four children. About twelve years ago, she had to resume wearing her braces again. Five years ago, she found it necessary to use a wheelchair. Linda's life with residual polio is not atypical. She was left with significant damage from acute polio. She recovered some level of strength, reached a plateau level of functioning, and began to experience the early signs of PPS about forty years after acute polio. Now she has significant limitations. For some time she had experienced dependent edema in her feet and legs. Her doctors had been treating her edema with diuretics. The edema became extreme and did not resolve over night or with elevation of her legs.

Around 4 AM in the early morning of December 21, 2001, Linda awakened with shortness of breath and in respiratory distress. Her son lives with her. He came to her assistance and called 911. Linda remembers getting dressed and being helped onto the rescue squad stretcher. At this point she apparently lost consciousness. At the hospital she required intubation for treatment of congestive heart failure and respiratory failure. She was placed in an intensive care unit (ICU). Fortunately her condition improved. The endotracheal tube was removed on Christmas Day and she was transferred from ICU to the regular floor. A few days later she was transferred to a rehab hospital and discharged to home on January 4, 2002. She was treated aggressively and successfully. Linda's experience demonstrates the eventual dangers of continuous dependent edema, which is so common among polio survivors who are now less active and spend a lot of time sitting. Her leg edema became chronic and progressive resulting in an emergency life-threatening situation. Linda is now wearing support stockings, taking a number of medications, and trying to elevate her legs during the day. She also has learned a lesson. If you have dependent edema, don't ignore it. Bring it to the attention of your doctor.

Congestive heart failure and respiratory failure can happen quickly if persistent edema is ignored or untreated.

One of our charter members, Patricia Poole, attended a matinee Christmas concert at the Carpenter Center here in Richmond on December 10, 2001. It was a cold day. Pat had a severe case of polio in 1950 in Norfolk, Virginia. She married and raised four children. Pat has been in a wheelchair for many years. She drives her own van equipped with a handicapped lift for her wheelchair. After the concert she rolled to the parking lot and proceeded to back her wheelchair onto the lift of her van. Because of the uneven surface of the parking lot, Pat's van was not level. As the lift was rising, Pat's wheelchair began sliding forward and to the left. The situation quickly became precarious. The left front wheel of her wheelchair slipped over the side of the lift and she knew that she was going to fall. Fortunately, she was not strapped into her wheelchair. She fell forward (or as she said, "I was flying"), landed on her knees and elbows and apparently rolled over on her back with her legs straight out. She did not hit her head and did not sustain any fractures. Two caring strangers saw her dilemma, stayed with her and called the paramedics. Amazingly her electric wheelchair did not fall on top of her and landed upright and undamaged. While she was lying on the asphalt pavement waiting for the paramedics, Pat became chilled. She kept a blanket stored in her van because she thought that someone else might use it in an emergency. This blanket as well as a gentleman's coat was used to warm and comfort Pat. The paramedics arrived and safely restored Pat in her wheelchair. She got back in her van and drove home. This dramatic accidental fall had a good outcome.

However, a different outcome could have easily occurred. Pat could have landed on her head resulting in a severe head injury or a possible cervical spinal cord injury. This fall could have had a fatal outcome. She could have fractured any number of major bones. Post-Polio individuals are at a greater risk for accidents and falls. An accidental fall can lead to injury, increased immobilization and medical complications. It is important to be constantly vigilant in assessing every physical situation to avoid taking any unnecessary risks. If you are still walking, don't attempt stairs without a railing or some assistive devices. If you are in a wheelchair or scooter, do not assume that every ramp is secure. Examine it before ascending or descending that ramp. In the home, watch where you are walking. Carpet edges, doorways and objects on the floor can cause falls. Aging is a process that everyone faces. For PPSers, the aging process may contribute to increased vulnerability for medical complications and increased risk for accidents.

Future statistical research should determine if PPSers have a shorter life span than the general population. Meanwhile all of us should try to seek and maintain good medical care and try to eliminate the risk of accidents. Remaining mindful of the future may not only lengthen your life with PPS, but may also improve the quality of your life.