

POLIO DEJA VIEW

October-November 2010

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*A Newsletter for the
Central Virginia
Post-Polio
Support Group*

Mary Ann Haske,
Editor

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October 2nd, 2010 Meeting

2:00 pm at Children's Hospital, 2924 Brook Road, Richmond
Remember to come at 1:30 for refreshments and social time!!
Cookies provided – bring your own beverage.

General Discussion

Bring questions, ideas, anecdotes and comments. This is the members' time to share.

November 13th, 2010 Meeting

2:00 pm at Children's Hospital, 2924 Brook Road, Richmond
Remember to come at 1:30 for refreshments and social time!!
Cookies provided – bring your own beverage.

“Driving Miss Daisy...down the Medical Information Highway”

Jessica L. Waugh, M.A., MSIS, Librarian, Chesterfield County Public Library, is our speaker. Jessica will discuss various health information resources and how to effectively “mine the web” and other resources to obtain current authoritative health information. (Please note that the November meeting is on the 2nd Saturday in November due to the Teddy Bear Run at Children's Hospital on November 6th.)

Wednesday, October 20, 2010

Amuse Restaurant

Virginia Museum of Fine Arts

200 N. Boulevard, Richmond, VA 23220 • 804-340-1400

There will be a limit of 12 participants at this lunch! Reserve Early!

For a reservation, call Barbara Bancroft (204-1688)

or Carol Kennedy (740-6833) by Friday, October 15.

(Drop off and parking – One can enter from the Boulevard or Sheppard and drop off people in front of the entrance. Free parking for handicapped is near the entrance. More handicapped parking is available in the garage, fee \$3.00 or free for members.)

Wednesday, November 17, 2010

Flinn's

403 N. Ridge Rd, Richmond, VA 23229 • 804-303-6125

(It is located in the Tuckahoe Shopping Center where the Graffiti Grill used to be.) For a reservation, call Carol Kennedy (740-6833) or Barbara Bancroft (204-1688) by Monday, November 15.

(Please note: Our lunches are now held on Wednesdays!)

**Mid Month
Lunches**

From Your Editor...SERENDIPITY

Serendipity – The faculty of making fortunate discoveries by accident (reference.com). I also think of the words fate, bonne chance, luck, life. They all symbolize to me something that just seems to fall into my lap.

About two months ago, a friend hung a book review on my door. It was by Carolyn See and featured in “The Washington Post”. (Reprinted in this issue - “The Disease That Took Her Breath Away”) I had never heard of Martha Mason even though a lot of my friends had. How did I miss the ABC piece on her, the earlier book reviews, or her obituary? What first interested me about the review was that it was written by someone not involved with polio. I liked hearing from the non-polio world. I liked the fact that someone noticed us at a time when polio is no longer foremost in the world. I even liked that I had read books by Lisa See, Ms See’s daughter. I also could not wait to read the book. It was about an extraordinary polio journey and a delightful memoir of a time before her polio. Often, in groups of polios who have had a severe case and whose recovery was amazing, we would have the old “which came first, chicken or egg” discussion. Did we survive and thrive because we had strong Type-A Personalities or did we develop those personalities because of our enormous struggle? I doubt if there is a definitive answer, but in the case of Martha Mason, I would have to say her feistiness helped bring her through the acute phase and helped her to have a joyous and productive life. I loved reading about this little girl who had the nerve to ask her minister why, when Jesus turned water into wine, it was a miracle but when Mr. Jones made moonshine, it was a crime. I understand that sometimes we polios want a good escape book, not more about polio. However, this book not only celebrates an amazing woman but gives homage to small town life and a captivating little girl.

Now, in July, there was another serendipitous event. Out of the blue, my youngest son called and said he was sending me a subscription to the magazine, “Harper’s”. No reason; he just did it. My first issue came and I scanned the table of contents and guess what caught my eye? An article, “PARALYZED, Learning to live in polio’s shadow by Roxana Robinson” jumped off the page. Ms. Robinson’s mother was born in 1911, had polio in 1914 and is still alive at age 99. Ms. Robinson gives a history of her mother’s childhood. Then she talks about her own childhood and her anger and frustration. She did not develop empathy for her mother until

she, herself, had to have foot surgery and use crutches. Two things fascinated me. The first was that I was getting to hear the voice of a child whose parent had polio. At our meetings, we have heard from spouses and siblings. Occasionally a child who attends with their parent might say a few words but never as openly as Ms. Robinson. The second was that she made a point of wishing that her mother had talked about her day to day life of dealing with pain and a disability. I wondered if my own children would have the same thoughts. So, I began to think about this and how sometimes we say that in our families it had gone this way: 1.) Acute Phase, 2.) Recovery Phase and 3.) It’s done; put it behind you; don’t dwell on it; act as if you are fine. I don’t think, based on #3, that it would ever have occurred to me to say to my kids that I probably sound cross because of pain. Maybe I did not even realize how cross I might have sounded. Recently, even before the article, I started to be more open about my fatigue and pain. Once, recently, one of my children wanted to know why I sounded so angry with him. I was not angry at all. I was fatigued; it was the end of the day and I had to push the words out because I was breathless. It just sounded like anger. The article was interesting and gave me food for thought.

I love serendipity. I love making connections. I’ve never grabbed the brass ring on the merry-go-round but a serendipitous event makes me feel like I have.

Mary Ann Haske



Polio and Discrimination

According to the Merriam Webster Dictionary, discrimination is: 1: the process by which two stimuli differing in some aspect are responded to differently: the quality or power of finely distinguishing and 3 a: the act, practice, or an instance of discriminating categorically rather than individually; b: prejudiced or prejudicial outlook, action, or treatment such as racial discrimination.

Throughout our country's history discrimination has had an ongoing presence. Women, people of color, some immigrants, some religious groups, some with a different sexual identity and those with physical or mental disabilities are among those who have been the recipients of discrimination. Most of you that are reading this article are survivors of polio. Have you experienced the sting of discrimination because of your history of polio? Perhaps you have some objective evidence or memory of discrimination related to polio. Perhaps you cannot describe any objective evidence of discrimination, but maybe you have experienced the feeling of discrimination.

I know that this issue is a sensitive one. One's perception of others could easily be a misperception. With this thought in mind I asked ten

The rest of the story is continued on page 4

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If you would like to talk with someone about Post-Polio Syndrome, you are welcome to contact the above members. If you send an e-mail, please refer to APPS@ in the subject heading.

We would love to have any of our members write an article for our newsletter. It can be about your lifestyle adjustments, comments on post-polio or any subject, humorous or serious, that we may all benefit from.

Please send articles for or comments about our newsletter, as well as changes, additions or deletions for the newsletter mailing list to:

Mary Ann Haske, Newsletter Editor
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or contact me at: (804) 323-9453 or mahaske@hotmail.com

The opinions expressed in this newsletter are those of the individual writers and do not necessarily constitute an endorsement or approval of the Central Virginia Post Polio Support Group.

Please note: Our articles may be used exactly as written provided credit is given for each article used.



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Polio and Discrimination

active members of the Central Virginia Post-Polio Support Group regarding their experience or feeling about discrimination. These ten members included some who had a visible mark of polio, some who had a visible mark of polio but could hide it and some who passed for able bodied until Post Polio Syndrome. Below I will list the eight questions asked and share some of the responses.

1. As a survivor of polio do you feel you experienced any form of discrimination or prejudice?

Three responders did not feel they had experienced any discrimination related to polio. The other seven did. A few unique examples follow:

There were times when I started a new job, I felt like I had to prove myself.

Yes, in school I could not earn A in phys ed since I could not run, only B I got in high school; so made me 10th in class rather than at the top.

Yes, in college getting into a fraternity and after professional school – to some extent in the lack of opportunities for work with excellent groups; thus I have been self employed for most of my career.

I have not felt discrimination. I kept the fact that I had polio to myself and did not speak about it to anyone in elementary school, junior high or high school. I doubt that my peers or teachers noticed. I was very thin so having an arm that was even thinner than the other was not obvious. When in OT school I was a bit of a celebrity during labs teaching muscle testing because I actually had weakness which made it much more exciting to learn on me as a partner. I knew what I could physically do and not do. In public I never attempted activities with my right arm that would have revealed weakness or difficulty.

2. If you had a visible physical disability from polio (atrophy, limp, orthotic devices, curvature of spine or limbs, etc), were you ever called a “cripple” or overheard comments to that effect?

Three responders reported “No.” The other seven were called derogatory terms. Here are a few examples:

The only recollection I have was that when my mom and I went shopping as a smaller child, other children would stare at me. It didn't hurt my feelings as much as make me angry and I know I made the comment “What are you looking at!?” more than once.

I was called “gimp” as a child often because I was in a cast and used crutches (doctor efforts to correct drop foot).

Yes, I was called a cripple by a few peers, felt stares and once was called Quasimodo.

I have muscle wasting in my right shoulder, elbow, hand and

thear eminence. In street clothes, it took a very observant person to notice. I worked with many therapists in other departments who did not notice. In contrast to this, young children would often notice my hand and ask why it looked like it did.

I had a limp but I don't ever remember hearing comments. I was pushed out into the middle of Grove Ave. into traffic while riding my velocipede. I also was beaten up every day on the way home from kindergarten because I could not run away from the kids. The solution was to send me home 15 minutes before dismissal. I did not think that was a good way to handle it. As a senior citizen, I was attending a Board meeting of the condo and one woman wanted to make a law that no more wheelchair people could move in!

3. Even if you have no objective evidence of being the victim of prejudice or discrimination, did you ever “feel” that way?

Four members stated “No.” A few of the positive responses are below

Yes, I was turned down for a job for which I was highly qualified, and had been told by the interviewer that I definitely had the job, but she changed her mind when she saw me. I had obvious scoliosis at the time, but could walk without problems.

Who among us hasn't felt “different”? Or asked “Why did this happen to me?” and shed some tears as a young child or especially a teenager. I was aware that I wasn't asked out on dates in high school, but went out with groups of friends instead. Most teenage girls with obvious polio had to have dreamed of a romantic boyfriend, etc. which didn't happen. By the time I got to college, I had enough self confidence to be gregarious, social, humorous, etc. and a new social life opened up. I never looked back; and although I was very aware that I had a physical disability, I didn't dwell on it. I guess I felt people were “attracted” to the person and overlooked any physical difference.

Polio affected my self image. I felt somewhat “inferior” but I don't remember anyone trying to make me feel that way.

I think I just felt I had to try so much harder to be normal in every way.

4. Do you think having polio caused you to receive more attention after you regained a level of stability (the acute phase was over)? If so, what kind of attention?

This question got more positive answers than any other. Here are some of the responses.

When I returned from my first hospitalization at age 6, I remember the neighbors coming in and asking to see me walk. I know now that, for them, it was somewhat of a miracle that I could walk (I had not walked since I was 10 months old), but at the time I felt humiliated and exploited.

I have an older brother (5 yrs. older) and I've often wonder if he had some form of resentment because I got more attention (or at least I thought I did). He was a wonderful big brother then and now, so he certainly didn't show any resentment. I certainly got some benefits from having polio. I was in the newspaper often, photographed with First Ladies, dignitaries, fund raising, etc. I know I was protected and got special treatment from my aunts, uncles, cousins, etc.

Yes, small town, everyone wanted association on our newspaper coverage than other teenagers for accomplishments

I generally denied or avoided getting help as I tried in every way I knew to be normal. During the first year back in school my best friend carried my books.

I think there were two kinds of attention. One was the attention that appeared to be done to "help" me but really seemed sadistic to me. The other was done perhaps in a more concerned way. (That does not mean I wanted that attention.) One example of the first kind was in kindergarten when we had to run races or do skipping races. I could not run and I did a sort of half skip hop thingy. The teacher made me go the same distance as the other kids and they finished before I even covered half the distance. That would have been uncomfortable but the kicker was that the teacher and kids all jeered at me the whole time that I was trying to catch up.

5. If you did get more attention, did you like the attention or did you try to avoid the attention?

The majority of the responders attempted to avoid attention related to polio. . Two admitted that they enjoyed the attention. Here are some of the responses.

I never turned down special treatment. I can't say it was horribly obvious and no one else my age was overlooked because of it. That would have bothered me.

I try to avoid attention which is why I was resistant to using a scooter in stores. After a while I realized that people in the grocery store were not paying any attention to me. I use it now without concern about what others are thinking.

I was allowed to "help" the PE instructor since I couldn't play basketball, etc but I don't remember either liking or avoiding the attention.

6. Did you ever feel you were the subject of pity from others?

The majority did not feel that they were the object of pity from others. A few answered "Yes."

ARRRRRG! Yes

Yes, some childhood peers, a few adults at church.

When I first started using the scooter/wheelchair at schools I could see the pity in the eyes of the adults I would encounter in the hallway. As they got used to it they just saw me and that look was no longer in their eyes. I think that anyone who has a visible limitation receives pity occasionally from people they do not know. (except in the grocery store!) When people know you well, pity is not there because they just see you.

7. Did you feel that being a survivor of polio ever hampered you in the work place?

The majority of responders stated "No."

Yes, I was turned down for a job for which I was highly qualified, and had been told by the interviewer that I definitely had the job, but she changed her mind when she saw me. I had obvious scoliosis at the time, but could walk without problems.)

No, but as a passer, few knew. However, I was limited in type of job since I could not walk or stand for long periods

Yes, everything was harder to do and I did a lot of compensating, finding alternative ways of doing things and used sublimation like trying to make good grades.

I think I am going to include college in this answer, too. When I was at U of R in the 50's, I had a math class on the men's campus. The 10 minutes between classes was not adequate for me to walk from one side of the lake to the other. I would not make it in time. The professor would lock me out of the classroom and make me beg to come in. I had to throw apology letters over the transom before he would open the door for me. (Can you imagine that now???) Lawsuit time, for sure!

8. Did you feel that being a survivor of polio hampered you in social settings?

One half of the responders reported "No." Others reported "Yes." Here are some of their responses.

Slightly, I cannot stand up long; so cocktail parties were out. I could not play sports with friends. In high school and college people noticed my limp and commented.

Yes, during adolescence I avoided dances or proms until I was a class officer and I had to go to the prom because I was in charge of it. It was extremely difficult asking a girl to go with me.

Polio did make me unsure of myself as an adolescent in terms of self image. I wasn't comfortable at dances, for example.

It may have made me shyer around boys but I may have been that shy anyway. Most guys I met or dated did not even know that I had polio. I was concerned that my "little arm" would not be found attractive.

I guess I could say maybe a little bit. I tried to play tennis in high school because my friends did but I could not do that. I always felt awkward dancing.

What does this little survey reveal? Actually not much is unexpected. As a reality of our polio generation, discrimination and prejudice were generally denied or we simply dealt with it. It wasn't until twenty years ago with the passage of the American with Disabilities Act that polio survivors began to be more assertive in regard to realizing that we had certain rights as polio survivors. As a result many more buildings, both public and private, are more assessable than fifty or more years ago. Earlier in our lives we were more motivated to adapt to the environment as it existed rather than seek to change the environment. Some of us clearly had feelings of being subject to discrimination; even if there was not much we could do about it.

The Disease That Took Her Breath Away

(Reprinted from the Washington Post with permission from Carolyn See)

By Carolyn See

In September 1948, in the North Carolina town of Lattimore – only a few hundred souls – an epidemic of polio that had been raging in the region tapered off, then flared up again. A 13 year-old boy named Gaston Mason died; three days later his little sister Martha was stricken. She spent about a year in hospitals, then came home with helpful admonitions to the effect that she had a “horrible heart” and was actually little more than a “talking vegetable”, but that it didn’t matter much because she’d be dead shortly. She came home in an iron lung and, with only an occasional hour recess, lived in that unhappy circumstance until she died in 2009 – 60 years.

Something in her responded to this crazy challenge like an irate superwoman; she vowed, over and over, to live life fully, to enjoy herself and never, if possible, to complain.

Someone had told her when she was an active little girl that she lived in what amounted to a magic circle: “What did the preacher tell you? You know about that Babblin’ Tower. Stand there where the (train) tracks cross. Now, look around you. In every direction – north and south, east and west – for half a mile is where you live. If you went any way from the point where you’re standing, you would be in Lattimore till you went half a mile straight. Then you’d be out. You go ‘round and ‘round in your circle. Maybe that’s why you young’uns is so damn silly. ‘Cause you stay giddy from going ‘round and ‘round in the circle you live in.”

That circle kept Martha perfectly safe, until it didn’t. Before the polio she was willful, smart, pretty, clueless. Her father worked hard to keep them in their snug little house; her mother was a meticulous housekeeper who contributed to the family finances by working in the cafeteria at school. They were devout Baptists. Both sets of grand-

parents lived nearby. The children grew up on good home cooking; meals came to the kitchen table virtually straight from the fields or barnyard. Gaston got a .22 rifle for his 12th birthday and cherished it. Their dad bought his first new car. Martha performed in a piano recital when she was 10, looking very grown up in a long, silky dress. She was very beautiful in those last photographs taken before she fell ill.

“I knew that I had polio. I didn’t want anyone else to know,” she writes. “The day before I had heard Mother talking to a friend about the iron lung Gaston had been in... I knew I wouldn’t have that difficulty because I had excellent lungs.” But the illness came down in all its fury. Her temperature soared, she endured horrendous pain, and then she was a quadriplegic.

Her parents seem to have been saints: Without thinking twice, her mother moved into the hospital where Martha stayed, working as a nurse’s aide. Her father toiled on at home. Something about her parent’s quiet devotion worked in Martha to ensure that when she came home, she graduated first in her high school class, went on to a junior college and then to a four-year institution, with her mother right along with her, feeding and bathing and cleaning and cooking and turning thousands of pages in hundreds of books, so that Martha could graduate *summa cum laude*.

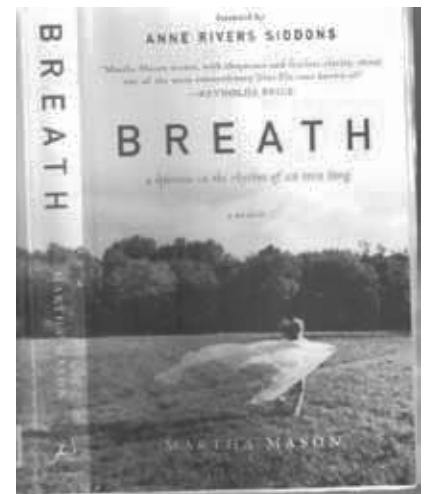
But life isn’t placated so easily. Extreme difficulties challenged her as an adult when she returned to her parents’ home in Lattimore, which, by then – thanks to her good education and introduction to the larger world – had begun to look shabby in her eyes. But what else could she do? Where else could she go? How could she redeem this life of hers, which started as something so mindlessly joyful, then was hit by catastrophe, even before the tiresome deprivations of real life had fairly begun?

Among other things Mason chose to write this memoir, which was released in 2003 by

Down Home Press, a small North Carolina publisher, and is now being republished by Bloomsbury with a foreword by Anne Rivers Siddons. “Breath” reminds us of a time irrevocably gone – a time when everyone knew a couple of survivors from polio, relatives hidden from visitors in a back bedroom; a society in which gentility wasn’t always marked by a university degree and people showed their cultural affiliation by exhibiting ferociously good table manners or dressing in good taste or listening to classical music on the radio during a Sunday afternoon.

That’s the way Mason was raised. College was a fluke because of her disability. The community rose up and took care of her because it reflected well on all of them, showed the world who and what they were. Maybe these values still exist in the middle of our country.

So this book, although its prose style can be artless and a little pokey, is well worth reading. It really does sum up a vision of America as absolutely reliable, decent, resourceful and kind – just as Martha Mason and her wonderful mother managed to be during their difficult but extremely rewarding lives.



Breath

A Lifetime in the Rhythm of an Iron Lung

By Martha Mason

Bloomsbury. 342 pp. Paperback, \$16

ADA Anniversary – July 26, 2010



In July, the 20th Anniversary of the ADA was celebrated. We, the Post-Polio Community, have really benefitted from that piece of legislation. Are you aware that “one of our own” was instrumental in the passage of the ADA? Justin Whitlock Dart, Jr. helped to pass the “American with Disabilities Act of 1990” which President George H.W. Bush signed into law.

Justin Dart was born in Texas in 1930. He came down with polio in 1948 just before time to enter the University of Houston. Six years later, he earned degrees in history and education in 1954. It is hard to believe that he was denied a teaching certificate by the University because he was disabled. It seems that there was concern about law suits.

After a lifetime of working for rights of the disabled, he was awarded the Presidential Medal of Freedom in 1998.

In the spring of 1999, I had the exciting privilege of demonstrating at the Supreme Court Building in favor of the bill called “Mi Casa”. Our demonstration was led by none other than Justin Dart wearing his famous cow-boy hat.

Justin Dart died in 2002 at age 71 from complications of post-polio syndrome.

Justin Dart, the “Father of ADA”

(Washington, D.C., 1999, from album of M. A. Haske)

Hearing Workshops

The Chesterfield Disability Services Board will provide **free hearing screenings** for adults and children by local audiologists. Individuals must make appointments for the screenings by calling 768-7878.

Three workshops will be held during the morning. They are as follows:

9:30 a.m. Coping with Hearing Loss

10:30 a.m. Buying a Hearing Aide

11:30 a.m. Equipment Available for Persons with Hearing Impairments

Vendors that provide a service for people with disabilities will also be present.

Saturday, November 6, 2010 @ 9:00 a.m. – 1:00 p.m.

Bon Air Methodist Church • 1645 Buford Road, Richmond, VA 23235

For reservations or more information, call 768-7878

Chronic Pain: Does Vitamin D Help?

I (Reprinted with permission from "The Seagull", August, 2010, the Triad Post Polio Support Group)

Not getting enough vitamin D in your system may be linked to chronic pain.

Over the past 10 years, several researchers have found an association between extremely low vitamin D levels and chronic, general pain that doesn't respond to treatment.

Many Americans are running low on vitamin D. A study published in the Archives of Internal Medicine in 2009 showed that vitamin D levels have plummeted among all U.S. ages, races, and ethnic groups over the past two decades.

But does not having enough vitamin D cause pain? That's not yet clear. But here's what you need to know about vitamin D and chronic pain.

Boosting Vitamin D, Easing Pain

Greg Plotnikoff, MD, senior consultant with the Allina Center for Health Care Innovations in Minnesota, still remembers the woman in her 40s who told him that he was the 30th doctor she'd seen.

"Twelve of them had told her she was crazy," says Plotnikoff, formerly an associate professor of internal medicine and pediatrics at the University of Minnesota Medical School. "She had weakness, achiness, fatigue – three pages worth of symptoms. Doctors had offered her antidepressants, and seizure medications and all kinds of things that didn't work. I checked her vitamin D levels – and they came back barely measurable."

After six months on an aggressive, high-dose prescription vitamin D replacement, the woman could cross off every symptom on her three-page list. "I knew I wasn't crazy!" Plotnikoff says she told him.

That's just one woman. Her case doesn't mean vitamin D will erase pain for everyone.

However, Plotnikoff published a study in 2003 on 150 people in Minneapolis

who came to a community health clinic complaining of chronic pain. Virtually all of them – 93% - had extremely low vitamin D levels.

Vitamin D blood levels of 30-40 ng/mL are considered ideal. The average level in Plotnikoff's study was about 12, and some people had vitamin D levels so low they were undetectable.

"The group with the lowest levels of vitamin D were white women of childbearing age," Plotnikoff says. "Most of them were dismissed by their doctors as depressed or whiners. They attributed their pain to an inability to manage stress. But after we replenished their vitamin D, these people said, 'Woo hoo! I've got my life back!'"

Plotnikoff notes that vitamin D is a hormone. "Every tissue in our bodies has (vitamin) D receptors, including all bones, muscles, immune cells, and brain cells," he says.

And in March 2009, researchers at the Mayo Clinic published a study showing that patients with inadequate vitamin D levels who were taking narcotic pain drugs required nearly twice as much medication to control their pain as did patients with adequate D levels.

Jury Still Out

But other studies have shown no connection between vitamin D and chronic pain, and a research review published in January 2010 showed that the evidence on the subject is inconclusive.

"It would be nice if vitamin D worked for chronic pain. It would offer an inexpensive and simple treatment with known and probably limited adverse effects," Sebastian Straube, MD, PhD, tells WebMD in an email. Straube is a physician-scientist at Germany's University of Gottingen and led the research review, published in the Cochrane Library.

But it hasn't been proven that boosting your vitamin D level will erase your pain.

"Looking at all the available evidence, the link is not convincing," Straube says. "As far as treatment studies are concerned, we found a striking contrast in study outcome between randomized double blind trials that by virtue of their study design minimize bias, and other (non-double blind) studies that are more prone to bias. The latter largely do suggest a beneficial effect of vitamin D treatment; the former largely don't."

Plotnikoff says that there is no evidence from randomized controlled trials that replenishing vitamin D levels will cure chronic pain. "But it doesn't hurt to do it," he notes.

So, if you've got chronic pain, it can't hurt to ask your doctor to check your vitamin D levels. "I believe this is absolutely medically indicated, and it should be the standard of care for everyone with chronic, nonspecific musculoskeletal pain," Plotnikoff says.

"Considering that establishing the effectiveness (or lack thereof) of vitamin D in chronic painful conditions is a clinically important question, there is rather little high-quality evidence on this topic," Straube says. "At present, we do not think the evidence in this area is of sufficient quality to guide clinical practice. There clearly is a need for more and better studies in the future."

If you have severe vitamin D deficiency, any efforts to boost your D levels should be done by consulting with your doctor. Too much vitamin D can be dangerous and lead to an excess accumulation of calcium in your blood which can lead to kidney stones.

-Gina Shaw, WebMD

(FYI: Milk is a #1 source of Vitamin D because it is fortified with that vitamin. While you are consuming your milk, be aware that you are also building bones (calcium), helping your muscles build and repair, and satisfying your appetite. GO MILK! - Editor, M.A.H.)

My Life with Polio

I was hit by polio when I was an infant in 1950. I had some high temperature but no one figured what it was until I tried to start walking. What came next were many surgeries on my legs. The Wythe County health department had me sent to The Crippled Children's Hospital in Roanoke (now Roanoke Memorial). A large part of my early life was there. I missed my mother, Betty Ashford, terribly. She would come visit me on weekends.

She would catch a bus from Wytheville and then ride back to take care of her other three children and work at a local shirt factory.

We students had a school teacher Miss Kickaladder. School was okay except

for learning Roman numerals. I would cry and say I didn't want to do them.

Our meals would be in a little dining area. One day another little girl and I had not drunk all our milk. We decided to pour it out the window. Little did we know, that, as we were pouring out our milk, it landed on a Navy officer who was walking underneath.

He came up to our floor fussing and told the nurse those children should be punished.

She took up for us and told him it was purely accidental. These children are cooped up here and just like to think up fun things to do. The officer left with a different mood after he saw the

conditions we were facing. However, the nurse did put us on restriction for a short time making us eat in our rooms.

I left the hospital for grade school at Sheffey Elementary in the Piney area of Wythe County and later finished high school at Ft. Chiswell in 1969. I even got to be a varsity cheerleader and enjoyed playing some softball.

I am thankful for the help I receive to help me live my life at a better quality.

Mickey Callahan

(We are continuing to feature the stories of our members as we receive them. Pen and paper, anyone?)

Save the Dates

Regular Meetings: October 2nd and November 13th

Mid-month Lunches: October 20th and November 17th

Board Meeting: November 10th, Children's Hospital, 10:00

ANNUAL HOLIDAY PARTY

Date: December 4th, 2010 • Time: 12:00 noon – 3:00 p.m.

Place: Children's Hospital, 2924 Brook Rd, Richmond

Menu: Roast Pork with Gravy, Chicken Alfredo with Penne and Broccoli, Penne Alfredo without Chicken, Roasted Vegetables, Pear Salad, Tossed Salad, and Dinner Rolls.

Desserts: Fresh Fruit Bowl, Cookie Tray and Brownie Tray

Beverages: Coffee, Iced Tea and Water

Cost: \$15.00 per person

*RSVP: No later than Wednesday, November 24, 2010,
to Barbara Bancroft 204-1688 or Judith Moffitt 754-1067*

Activity: Chinese Auction, (Please bring a gift, per person, suitable for a man or woman, costing between \$10 and \$15.

Morrissey's Catering will begin serving at 12 noon. Members of the Youth Group from Bon Air Christian Church will be available to help carry and secure items for those who need assistance. A check to the CVPPSG for \$15.00 per person or the exact amount is due prior to the event or on the day of the event. Our Post Polio Group is pleased to be able to pay the balance of the fee.


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