

# POLIO DEJA VIEW

December 2010 - January 2011

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

Mary Ann Haske,  
*Editor*

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## **December 4th, 2010 Meeting - Annual Holiday Party**

The Luncheon will be held on Saturday the 4th of December, 2010 at Children's Hospital, 2924 Brook Road, Richmond

**Time: 12:00 Noon - 3:00 p.m.**

The Menu will offer Roast Pork with Gravy, Chicken Alfredo with Penne and Broccoli, Penne Alfredo without Chicken, Roasted Vegetables, Pear Salad, Tossed Salad, and Dinner Rolls. For Dessert there will be Fresh Fruit Bowl, Cookie Tray and Brownie Tray.

The Beverages will be Coffee, Iced Tea and Water.

Cost: \$15.00 per person

RSVP: No later than Wednesday, November 24, 2010,

to Barbara Bancroft at 204-1688 or Judith Moffitt at 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.*

## **January 8th 2011 Meeting**

(Note: The meeting date is the Second Saturday in order to avoid New Year's Day)

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.

### **Polio and Discrimination**

*Henry D. Holland, MD FAPA is our speaker. We know him from his contributions to our Support Group and his Deja View articles, "From Henry's Desk..." . Henry grew up in Richmond and graduated from Washington and Lee University, 1962 and Medical College of Virginia, 1966. Henry has vast experience as an academician in the field of psychiatry. He also has a private practice. Henry has been active in River Road Church, Baptist and in numerous historical societies. He and his wife, Brenda, enjoy their three children and six grandchildren.*

**Mid Month  
Lunches**

## **No Mid-Month Lunch in December!**

### **Wednesday, January 19, 2011**

Mid-Month Lunch at 11:30

We will have lunch at The Brio Tuscan Grille  
in Stony Point Fashion Park

For a reservation, call Carol Kennedy (740-6833)  
or Barbara Bancroft (204-1688) by Monday, January 17th.

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

## *From Your Editor...A Cautionary Tale*

One thing you need to know right off is that I am not fond of heights. My hands sweat buckets in movies when someone in the movie is on a cliff or the roof of a building. If my husband were alive, I would beg you not to mention the glass enclosed elevator at the NY World's Fair back in the 60's. Let's just say it had something to do with my cowering behind a candy counter and saying he would have to blindfold me to get me back down. (I do want you to know that I now enjoy that type of elevator so I am able to make changes in my life.)

Now the tale can begin. When I first went into my power chair, it was 14 years ago and I lived in the country on the Eastern Shore of MD. The most exciting thing to do then when I was in my chair was to dodge deer and turkey buzzards which seemed to like to play with a lacrosse ball in my backyard. Then, I went on the cruise from hell. After that, I went on Amtrak to New Orleans. I figured I would never tackle a plane with the chair but someday I would try a bus.

Last week, I went on a tour bus with a group to the National Gallery of Art in Washington, DC. The first hurdle was that the bus was not prepared for me. Even though the leader of the tour had called twice to make sure all would be fine, the bus still had to be converted. The driver did a great job but I think, if it had been done at the car barn, the seats would have been anchored and would not have flopped down and wedged me between the set of seats. So the moment of truth had arrived. I watched with eyes as big as saucers as the driver flipped up the upper side of the bus and I saw that I was going to go way up! Then, she dropped the bottom side of the bus and started to bring out the lift. The laboring chugs of the lift being moved did nothing to instill confidence. I rolled up onto the lift very aware that this flimsy piece of material across the back of the lift was not really going to offer much protection. The lift sort of started up then moved back and up with the motion of a Ferris wheel. All the passengers were seated so I had plenty of room to move forward into the aisle and then to negotiate my way into a forward position. Because I was wedged in, I could not move my legs around and did experience some discomfort on the ride. However, we made good time. The museum was great, the docent was terrific, the lunch was delicious and the shopping was fun.

Now, time to go home. I am now used to the awful chugs of the lift. I am used to the swing up and out and in. I am a veteran. Just one thing was different. The passengers were not yet seated. They were moving down the aisle. I rolled off the ramp and over a bit into the aisle. My hands and arms were full of packages. Right beside me in the aisle was my friend, "Sally". "Sally" is hard of hearing. She is beginning to climb over me as I am asking her to wait until I get situated. She does not hear me and is climbing over my legs and foot plates. I start to back up to get out of her way, but noticed my friend who is sitting in the seat across the aisle looking rather like "The Scream" by Munch. I knew something was wrong and looked over my shoulder to see the bay was still open and I had better stop moving. "Sally" finished her assault with a flourish. She tripped over my feet and went flying down the aisle.

So, we started home and I was more comfortable as I seemed to have more room.

That night, around 2 in the morning, I awoke with a start. I sat up in bed and my heart was pounding. I realized that when Sally tripped, she could have fallen on the joy stick and sent me, herself and maybe the bus driver all to the morgue! Good Grief! Now my hands were sweating!!

So, here is the CAUTION. When doing something new, YOU MUST TAKE CARE OF YOURSELF ABOVE ALL ELSE. DO NOT DEPEND ON THOSE AROUND YOU TO ACT RATIONALLY. TRY AND STAY COOL. All I really needed to do was to TURN OFF MY CHAIR and I would have been safe. "Sally" had me really flummoxed and I did not take time to think. So, the lesson for me was that, when vulnerable and using a powerful machine, flip the power switch until things calm down. And yes, I will go on another bus trip but I think I would be more proactive. I would call the bus company and state my needs rather emphatically. I would ask the driver to wait until all are seated to put me on or put me on before others are allowed on. I would worry less about the passengers and more about myself. And maybe, just maybe, I'd keep way away from "Sally"!

Mary Ann Haske



## Broken Spirit

“The Church is curiously a mixed body consisting of those who have never been shaken in their self-esteem or self-righteousness and who use the forms of religion for purposes of self-aggrandizement; and of the true Christians who live by a “broken spirit and a contrite heart.” This citation is attributed to Reinhold Niebuhr:

Once again we are approaching the holiday season. Those of the Christian Church will be celebrating the birth of Jesus of Nazareth. Most of us who are survivors of poliomyelitis have probably experienced the feeling of a broken spirit and many of us have once again experienced a broken spirit with the onset of Post Polio Syndrome and its ongoing aftermath.

Recently I have read again a polio biography entitled *The Man in the Iron Lung*. This 1956 book is about the life of Frederick Bernard Snite, Jr. Snite grew up in a family of wealth, graduated from Notre Dame University and was a committed Christian all of his life.

One of the first polio victims to receive significant publicity regarding chronic dependency on the iron lung was Fred Snite, Jr. After college at age twenty-five he joined his family on a dream trip around the world in 1936. While in Peiping (now Beijing) he came down with polio. He was admitted to the Rockefeller Memorial Hospital. This hospital was known as the John Hopkins of the Orient. His physician was a graduate of the Harvard Medical

*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.

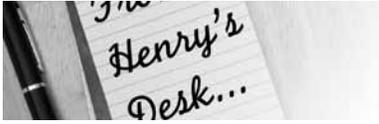
We would love to have any of our members write an article for our newsletter. It can be about your lifestyle adjustments, comments on post-polio or any subject, humorous or serious, that we may all benefit from.

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

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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.*



*Cont'd from page 3*

## Broken Spirit - continued

School. This hospital owned the only iron lung in China. At the time there were just over two hundred iron lungs in the world. This iron lung weighed 1200 pounds.

After fourteen months in the iron lung, Snite was successfully moved from China to Chicago by ambulance, train and ocean vessel. He never became independent of the iron lung except for several hours a day by using a portable respirator that could be strapped to his chest. In 1939 he was able to travel to Lourdes, France. The public remained interested in his story and the press followed him to Lourdes. Snite was able to bathe in the healing waters and he said, "If it's God's will that I be cured. I will be; if not, I won't. I figure I have a right to ask only one thing; the strength to face up to it."

In 1939 he married Teresa Larkin, a woman he had known before polio. They had three daughters. His medical problems took their toll and at the age of forty-three, Snite died in the iron lung in 1954 from heart and lung failure. His long time nurse felt he died after "eighteen years in that hunk of steel."

Snite's courageous story helped the fledgling National Foundation for Infantile Paralysis or March of Dimes get a jump start. Snite was fortunate to come from a wealthy family, but most polio victims did not have the advantage of wealth. Snite's life was a great inspiration to many people, especially Catholic Christians. In 1958 Snite's story was included in an elementary reader used in Catholic schools. The story was titled "The Man in the Iron Lung" and was written by Leonard C Hawkins and Milton Lomask. The story revealed Snite's life in the iron lung and his trip to Lourdes. The story carries a religious message and ends with these words:

"As the years went on, he was constantly asking himself what he could do to help others and to get closer to God himself. He never questioned God's will where his illness was concerned, but he was often plagued with the feeling that his prayers were not worthy in God's eyes. He had no intention of coasting into Heaven in an iron lung. Frederick was determined to earn his way, just as the rest of us must. 'This life is preparation for the next,' he often said. 'I have a job to do like everybody else.'"

Nineteen hundred years before Frederick Snite, the physician Luke tells the following story in the earthly life of Jesus of Nazareth:

One day as he was teaching, Pharisees and teachers of the law, who had come from every village of Galilee and from Judea and Jerusalem, were sitting there. And the power of the Lord was present for him to heal the sick. Some men came carrying a paralytic on a mat and tried to take him into the house to lay him before Jesus. When they could not find a way to do this because of the crowd, they went up on the roof and lowered him on his mat through the tiles into the middle of the crowd, right in front of Jesus. When Jesus saw their faith, he said, "Friend, your sins are forgiven." The Pharisees and the teachers of the law began thinking to themselves, "Who is this fellow who speaks blasphemy? Who can forgive sins but God alone?" Jesus knew what they were thinking and asked, "Why are you thinking these things in your

hearts? Which is easier: to say, 'Your sins are forgiven,' or to say, 'Get up and walk'? But that you may know that the Son of Man has authority on earth to forgive sins . . ." He said to the paralyzed man, "I tell you, get up, take your mat and go home." Immediately he stood up in front of them, took what he had been lying on and went home praising God. Everyone was amazed and gave praise to God. They were filled with awe and said, "We have seen remarkable things today."

During this holiday season many of us have probably experienced a broken spirit at some point in our lives. Many know the emotional pain of a broken spirit. As Frederick Snite so many of us have perhaps repressed our memories of a broken spirit and pushed on. That broken spirit may have been a small or large part of your polio pilgrimage. In some cases after overcoming so much and adjusting to the reality of our personal worlds we have persevered and lived a nearly normal life. Now, later in life, we have once again faced a reality that could break the heartiest of spirits. Many of you in our group have and are still overcoming a broken spirit and "we have seen remarkable things today"

### References:

Hawkins, Leonard and Lomask, Milton; *The Man in the Iron Lung*, Double Day and Company, Inc; Garden City, New York, 1956.

Good News Bible, Today's English Version, Gospel of Luke, chapter 5, verses 17-26.

## Another "Broken Spirit"

When I proof-read "From Henry's Desk" for this edition of the newsletter about the "Broken Spirit", I felt that I needed to comment on the book I had just finished reading. The book is "Nemesis" by Phillip Roth. This work of fiction takes us back to 1944 in the city of Newark, NJ. The main character is Bucky Cantor, a gym teacher during the school year and a playground director in the summer. Roth's description of the playground and its children and their activities took me right back to my childhood. I even began humming "Here's to Humphrey Calder Playground" under my breath. This lovely scene soon becomes a terrifying one as one child after another is stricken by polio. Bucky does his best to reassure children and parents alike as the disease becomes rampant. Bucky was reared by his grandparents. His grandfather stressed the importance of duty. Bucky tries to be ever dutiful to all around him. However, demons from his childhood make his efforts very stressful. The paths and choices he makes impact mightily on his spirit's recovery when Bucky faces life after polio. I was much taken with this book and had to keep reminding myself that it was fiction. Roth did an amazing job of capturing the emotions that must have run rampant during an epidemic of polio.

Mary Ann, Editor

## *An Homage to Our Parents*

If you are a regular Polio Deja View reader, you probably realize that I spent over six months last year up on Long Island helping to care for my daughter's Significant Other who had been totally paralyzed with Guillain-Barre Syndrom (GBS or French Polio). It has now been 18 months since Neil became ill. I went up in September for about ten days to be with Neil while my daughter, Sue, travelled with a few hundred 8th graders to a Wilderness Camp. It had been 5 months since I had last seen Neil. I knew he now had a walker that made him appear like Herman Munster. Because he cannot use his hands, the walker has two half pipes that extend out from his arm pits and his arms rest in them to hold him up. So, anyway, I pull up and Sue brings him out on to the deck using his braces and his walker. They kept saying to stop my chair when I reached the top of the deck. I figured they were going to push a button, have a trap open and I would disappear forever! I stopped and Sue moved the walker and hovered as Neil took steps across the deck by himself. I filled up and started to cry. I never expected to see him actually walk at all!

They had another surprise for me. I was not looking forward to feeding him as that is rather hard on me physically. Well, he had a strap contraption for his hand and a spoon fitted into it. Neil had been using it for soft foods. When I saw him use it I knew, as a mother of 6, that if he could shovel up soft food, he could shovel up anything else if it was cut small. By the time Sue returned, Neil was totally feeding himself. Really, my gig

there this time consisted pretty much giving him his medicines and cooking. What a difference 5 months made.

When my children took their first steps, there was much excitement and applause, laughter and joy. However, it was not like a miracle or anything. It was expected. The same emotions were experienced when they began to feed themselves. Yes, it was messy but still it was progress. It was not a big deal.

However, watching Neil made me think of what it must have been like for our parents when they had seen us paralyzed and had received bleak forecasts for our future. Then, finally, many of us were able to walk with braces, crutches, or high top shoes. Imagine what that must have been like for our parents when we achieved goals such as walking, teeth brushing, feeding ourselves, taking a flight of stairs. I can't imagine how they felt. I know what I experienced watching Neil but he is not my child. I am moved just thinking about it. What amazes me is that I never thought of this before now.

I don't remember my first steps. I remember being taken to the doctor's office to have the full body cast cut off. The doctor kept saying to my mother to not get her hope's up. I would most likely not be able to move. When they removed the top half of the cast, my body was covered in boils. (I still have one large scar.) I remember I moved my right leg and there was much rejoicing. The next memory was being taken downtown to see the Christmas windows. I was placed

in a wagon with rails around it, with lots of pillows and blankets and pulled around the blocks to see the displays. (Since I was four and a half years old, my memories are sketchy.) Santa brought me a big velocipede. He figured I could use it for exercise for my legs. My father had to build up the pedals with big blocks of wood. At first I could just push the pedal with my right leg and the left leg just went along for the ride. Except for the joy when I moved when the cast came off, I just don't remember any other excitement. Maybe my parents were so caught up in the day to day routine to get me moving again that there was not time for the reaction like I had with Neil.

At any rate, I want to pay homage to all of our parents who must have been so terrified and helpless and yet were our cheerleaders as we journeyed toward recovery. They might have been somewhat silent cheerleaders. I don't think my parents in the 40's were as openly emotional as the parents of today. It was a different time. I wish my parents were still alive so that I could talk to them about that period in our lives. I would like to hear how they survived that dreadful period. I would like to be able to thank them for all they did to make my recovery possible. If your parents are still alive, maybe you can do what I can't and have a discussion about what it was like for them and thank them for their support.

Mary Ann

## *Mid Month Lunch Review*

Attending a mid month lunch is always a treat. We alternate between the south side of Richmond and the city/west end. People recommend places they like and we select restaurants with a variety of price ranges.

However, our most recent outing was a special location. We went to the Virginia Museum of Art restaurant, Amuse. It was a very nice experience. The food was delicious, service was attentive, and the decor with the white linen tablecloths was first class. Our visit also gave us a chance to see the many changes in the architecture of the recently renovated museum. Some of us even did shopping in the gift shop!

Next time we go, come along and you will feel that you are experiencing some of the finer things in life!

Barbara Bancroft, Social Committee

## *When Do You Need a Power Chair?*

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Lawrence (Larry) C. Becker, PhD, Roanoke, Virginia, lcbecker@bookwork.net

Saul Morse, JD, Springfield, Illinois, SaulMorse@sbcglobal.net

Larry Becker and Saul Morse, both polio survivors and members of PHI's board of directors, recently took delivery of new power wheelchairs – both, coincidentally, are Permobil chairs made in Sweden. PHI asked Larry and Saul to share their experiences and decision-making processes with readers who may be contemplating a power chair purchase.

PHI: When did you have polio, and what assistive devices have you used in the past?

Larry: I contracted polio in 1952 at age 13. It affected my hands and arms, but not my legs and feet - what we called "upside-down" polio. Through college and graduate school and then 20 years of teaching, I used a chair occasionally and had a golf cart to get around campus. I rented a chair in the mid-1980s and finally bought the first of three scooters, which had to be modified with foot controls.

Saul: I had polio in 1949 when I was 21 months old. The next two years are a blur. I was separated from my family and isolated in an iron lung. I came home with a manual wheelchair. I have no recollection of a time when I didn't use one. After graduating from high school, I entered the University of Illinois, which had started a program for disabled veterans following World War II. You had to be able to push yourself, and we had to push a mile-and-a-half before breakfast to get in shape. Power chairs were not allowed, and there were no ADA laws on the books. I used a manual chair exclusively until the early 1980s when I traded my van in for another and also got a scooter.

PHI: When and why did you first purchase a power wheelchair?

Larry: I got my former power chair, which

was something like a personal assault vehicle – with foot controls- in 2001. I was having trouble with transfers at the office, and it was increasingly difficult to transfer at home. I have read all about the late effects of polio, but I have always had a tussle acknowledging new problems that might get worse. So I just bought the first power chair off the rack, without any modification other than the foot control, and without getting a thorough evaluation.

Saul: In the late 1980s, I represented an equipment supplier and received two manual wheelchairs as an initial fee and, later, a power chair because I didn't think I would be paid otherwise. At the time, my son was three, and I found that I was able to chase him better in the power chair and could also take him for rides. And I discovered that I was not as exhausted at the end of the day. By the early 1990s, I was using a power chair 80 to 90 percent of the time and, finally, all the time, except for transferring out of bed in the morning (and briefly when I had a mid-life crisis convertible and had to use a manual chair).

PHI: What factors did you consider in your recent purchase of a power wheelchair?

Larry: I think the crucial consideration in my case were first, what uses I could now make of the chair that would be helpful, and second, what my needs are likely to be for the foreseeable future. Some of the features on the old power chair were not always the best ergonomically, and it was not only getting old and unreliable, but also hard to use.

I have full muscle control in my feet and require a foot-controlled chair. In the old



*Larry Becker with his new chair elevated "to the max". "The seat puts me on the same vertical plane as the center of gravity so it is very stable, and I am on an eye level with anyone under 5 foot 8 inches or so."*

*Saul Morse operates his chair with a left-hand joystick. "The controller screen shows me the 'drive profile' of the chair, and has a speedometer, odometer, an indication of the charge level of the battery and a clock."*



chair, the control was mounted on top of the foot pedal, causing me to shift weight onto my left hip. It was also very touchy. I couldn't safely let my right foot fully rest on it, even while I was driving. I talked to a rehabilitation engineer and to an occupational therapist (OT) and an adaptive technology engineer, who observed me in my office to assess my needs. They agreed I needed a new chair, but they insisted that it be a custom chair and that I go through a full evaluation.

Saul: I've now had several power chairs. It used to be that insurance companies considered the useful life of a chair to be five years, but not anymore. My old chair is a Permobil that is six-plus years old and has been used 14 to 18 hours a day every day of the year. I wanted a new Permobil that was identical because I drive my van in the chair – it rolls in and locks into place. Permobil is reputed to be the world's best mass-marketed chair, perhaps because manufacturers in Europe are required to pay for any repairs during the first five years, so they are built to last.

PHI: What was the administrative process you went through to get and fund the new chair?

Larry: The first step was to meet with my doctor who wrote an order – in my case to Medicare – saying that I needed a power chair. I made several trips to the Woodrow Wilson Rehabilitation Center, which provides comprehensive medical, assistive technology and vocational rehabilitation services to Virginia citizens with disabilities. I tried out lots of chairs on a variety of terrains. A durable medical equipment supplier (DME)

## *When Do You Need a Power Chair? - continued*

who certifies to the insurance company that a power chair is needed, sent specialists to do a home evaluation. Meshing schedules with all these people meant that this full assessment took about six months with a lost paperwork glitch adding several weeks. Because mine is a customized chair, elaborate specifications were necessary for the factory fabrication. The chair was delivered to the rehab center and various features adjusted for my use. I can't use a hand-controlled joystick, and a foot-controlled joystick is not typical, so a factory representative was involved in getting that installed under the foot rest.

Saul: I had a face-to-face meeting with the doctor, who wrote the order. I had an OT evaluation and a DME home inspection. My insurance is through the state of Illinois, as a retired employee, and initially they wanted

me to buy a cheaper model. After some negotiation, we reached an agreed price, and the power chair was ordered. People who need a high-end custom chair have to work for it! When the chair was delivered, the OT reviewed my needs and made some adjustments.

PHI: Tell us about your new chair.

Larry: It's an astounding chair! The foot control is wonderful – a joystick turned on its side and mounted under the foot rest. The chair has an elevating seat, which helps with transfers, and I can now carry on a conversation eye-to-eye with most people. Getting enough ground clearance for the foot control required putting a slight tilt in the

seat, and although I don't need it now, the seat also reclines. The chair also has "attendant control", a joystick usable by

someone else. The foot control is equipped with Bluetooth® capability for wireless operation of my computer mouse. An on-board screen that I can operate with either the foot control or a mouthstick indicates seat position, drive speed and battery level. It's a front-wheel drive and weighs 260 pounds. The top speed is 5 miles per hour. The technology is so good now – I think it's the only chair I'll ever need.

Saul: My chair has a left-hand joystick. It has a seat elevator, which is great for restaurants, talking to people at eye level and transferring to high beds in hotels. I also got a seat recliner that I use more than I had imagined. It's a rear-wheel drive and weighs 280 pounds. Top speed is 7 to 8 miles per hour. I like speed!



*Detail of Larry's foot control. In drive mode, pushing the toe down produces forward motion, heel down is backward motion, and toes outward or inward turn the chair. "There is a very secure neutral position, so I can actually safely rest my foot in the position shown. Getting back into drive mode just takes a quick rightward flick of my foot."*

*(Permobil has been committed to enhancing the lives of people with disabilities for more than 40 years. As a world's leader in developing and manufacturing powered wheelchairs, Permobil is a global company whose products can be found in more than 30 countries on four continents. Its world headquarters office is Timra, Sweden. Its North American headquarters is in Lebanon, Tennessee. Permobil's products include power wheelchairs, seating operations, accessories and operating systems. For more information, visit [www.permobil.com](http://www.permobil.com))*

## *Save the Dates*

***Meetings: Holiday Party, December 4th, 2010***

***January Meeting, 2nd Saturday, January 8th, 2011***

***February Meeting, February 5th, 2011***

***Mid-month Lunches: Wednesday, January 19th, 2011***

## *Why Does Resting Help?*

by Dr. Richard Bruno

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

**Q:** If the accepted theory of post-polio muscle weakness is that our motor neurons are dying, why do I improve with rest after having a period of severe weakness when I overdo? Even though I can become completely lame, the loss is temporary if I rest up for a day or a week.

**A:** You're describing a symptom that PPS researchers have totally ignored: "transient weakness". We call it "New Year's Syndrome". Polio survivors complain that their muscles become significantly weaker in late December, more than likely because of too much Christmas shopping, but strength returns in January after they rest.

But something dangerous is happening to cause the transient weakness of "New Year's Syndrome". Remember that the poliovirus killed off at least 50 percent of your motor neurons. The neurons that weren't killed

were damaged by the poliovirus but were able to sprout – send out extra "telephone lines" – to talk to the muscle fibers that were orphaned when their motor neurons died. After polio you were left with less than half of your motor neurons – neurons that not only are oversprouted, but also have cell bodies that are smaller than normal, have damaged protein-making "factories", and have been severely overworked for the past 50 years.

When you experience transient weakness, we think you have overloaded your neurons' protein-making factories and drained their reserves. After you rest, the neurons' protein supply increases and you are able to use your muscles again. But every time you drain your motor neurons, we think you are doing damage that eventually causes permanent weakness as the drained neurons die. Think of what would happen to your car battery if you left the headlights on every night. You get up the first morning and your battery is flat. You jump-start the battery and drive off. The next night you



leave the lights on, jump-start the battery again, and drive away. But after about a week the battery will no longer take a charge and you won't be driving anywhere! Canadian PPS researcher Alan McComas found that polio survivors who are getting weaker over time lose seven percent on top of the 50 percent they have already lost! Prevent transient weakness – and possible permanent weakness – by resting before your muscles become weak, let alone completely lame. Remember: You can replace your car's battery, but you can't replace your motor neurons.

### ***FYI***.....

Ever wonder what is happening in other Post-Polio Groups? Here are some sites that you can visit and read newsletters from around the world.

**<http://home.iag.net/~bgold/polio.htm>**  
(Florida East Coast Group)

**[www.postpolio.wordpress.com](http://www.postpolio.wordpress.com)**  
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