

**Amputee Society of
Canterbury & Westland Inc.**

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Heather Plows Ray Boundy
Ray Newton



War Veterans

S C Common

Artificial Limb Service

330 Burwood Road,
Christchurch
Phone 03-383-0501
Fax 03-383-3566
Hours: 8.00am - 4.30pm

Manager

Graham Flanagan

Office administrator

Pauline Afitu
www.nzalb.govt.nz

**Burwood Hospital
Hydro Pool**

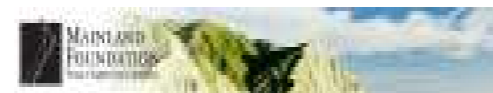


6:00-6:45 pm

Every Monday

See you there for a
Relaxing session!
Funded by Lottery Board.

Thanks to Our Sponsors:



More Mobility Limited



*doing more
with less!*

In This Edition

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MAY/JUNE 2012

Quote of the Month

We laugh a lot. That's for
sure. Sure beats the
alternative, doesn't it?

Betty White, Mark Twain Prize, 2010

Editors Message

Hello Everyone and I hope this finds you all well and managing now that our cooler weather is upon us. Before I have a Senior Moment and forget, we have changed our address to-----**PO Box 26-148 North Avon Christchurch 8148.**

As you will see, our Annual Winter Luncheon is July 15th and I do hope that many will be able to attend. Anyone who has any new articles they would like to donate for the raffle, can let Margaret know ahead of time and would be much appreciated.

There is a new Red Cross grant that some of you mite be interested in: The Red Cross disability grant provides \$750 to people with disabilities, who are encountering considerable hardship in meeting disability-related needs and maintaining quality of life.

It is to be used towards the increased costs incurred by individuals and families, to access additional respite or help for carers, to help individuals/families to access activities or take a short break, or to assist with things like packing and moving from quake-damaged homes. www.redcrosseqgrants

PLEASE remember that if your subs for 2012 have not been paid by the end of June then you will be removed as a financial member. Also, if you use the Taxi Voucher Scheme and have **NOT** paid the annual Admin fee, then Ava is unable to provide more vouchers until the fee is paid.

We are making some changes in all our sites such as a new logo, contact details, etc. If you have any pictures or interesting personal stories you would like us to use just send them along either to me for the Newsletter or to Jo for the website. It would be great to read about some of our own members and see what they accomplish or just having fun. The next Newsletter will be coming to you from Florida so until then stay well, stay safe, and remember to have your stump and prosthesis checked regularly.



**Amputee Society of Canterbury and Westland Inc. PO Box 26-148
North Avon Christchurch 8148 e-mail: info@amputee.info.co.nz
Website: www.amputeeinfo.co.nz**

SOCIETY NEWS

MID-WINTER CHRISTMAS LUNCHEON

Place: Hornby Working Mens Club

17 Carmen Road

Hornby,

Christchurch.

Date: Sunday 15th July 2012

Time: 11am for Social Drinks and get together

Meal: 12 Midday

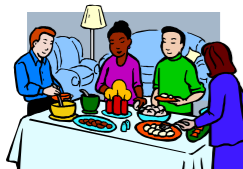
Cost: \$26 per head but will subsidize on all who attend so will cost 20.00.

Speaker: Karoline Potter from "Human Rights Commission" Speaking on "Is Christchurch an Accessible City"

Please contact Margaret on 03 349 7585 before Sunday 6th July if you would like to attend.

Please advise me if you require a ride.

IF YOU ARE UNABLE TO ATTEND AND HAVE ALREADY SAID YOU ARE COMING PLEASE ADVISE ME AS WE MAY HAVE TO PAY FOR THOSE WHO DO NOT ATTEND



MESSAGE FROM THE PRESIDENT

As President of the Canterbury/Westland Amputee Society, I was invited by Graham Flanagan of the Christchurch Limb Centre to attend a visit to the centre on Thursday 19th April by Jo Goodhew who holds the following portfolios in the National caucus: Minister for Community & Voluntary Sector.

Minister for Senior Citizens.
Minister of Women's Affairs
Associate Minister of Health.

She spent an informal hour at the Centre and we all felt very comfortable in her presence whilst she chatted over a cup of tea and during her tour of the centre.

The Minister asked many interesting questions of the staff as well as enquiring about the role of the Society in our community. What struck me about her was her genuine interest and knowledge about our specific disability sector. She comes from a nursing background and this was quite evident in the tone of her enquiries and understanding of such.

I was hugely impressed with the way the Minister portrayed herself and have a fair degree of confidence that she will serve her portfolios well within this current term of Parliament. I have no reason to doubt that she has the very best interests of constituents within her portfolios close to her heart...yes, contrary to popular belief; I think politicians do have one!!

I would like to acknowledge Graham Flanagan & the Chief Executive of the Artificial Limb Service, Mervyn Monk, for extending the invitation to our Society to attend this very worthwhile & enjoyable hour with the Minister.

Mark

SPECIAL GENERAL MEETING

Notice is given of a Special General Meeting to be held prior to the mid-winter function at the Hornby Workingmen's Club on Sunday 15th July 2012 at 11.45am.

The committee has been advised by the Federation to consider adopting a new set of rules that are more concise and standardised with other local societies throughout the country. Advice was sought from the Federation's Honorary Solicitor in respect to the proposal and his advice was that the new rules are much more workable for our society to operate under.

Copies of the new rules will be tabled at the meeting but anyone wishing to have a copy can request a set from the Secretary, Leigh. at any time.

Should the membership adopt the new rules, they will come into force at the next General Meeting when the minutes of the July meeting are confirmed.

IMPORTANT NOTICE

On Wednesday, 9th May, Ava & I attended a meeting hosted by Pub Charity that was called to inform community/volunteer organisations of an intended change to the distribution of gaming machine proceeds in the form of a private members Bill introduced to Parliament. This bill was originally conceived by Hone Harawira over three years ago but has been picked up on by Te Ururoa Flavell of the Maori Party and also has support from the Green Party and the Left. The Bill had its final reading in Parliament on 9th May and has been referred to a Parliamentary Select Committee for six (6) weeks to allow debate & submissions to be heard.

The main thrust of this Bill is to hand over the distribution of gaming proceeds to local authorities which in turn will set up sub-committees to facilitate this process meaning that decisions about which organisations will benefit from grants will be in the hands of over 270 different committees around New Zealand. Further, Flavell was interviewed on TV One's Breakfast show on the 9th May and he clearly stated that elimination of all "pokie" machines was their aim. This Bill is clearly politically driven and a "points scoring" exercise and is seeking abolition of "pokie" machines on the basis that NZ suffers badly from problem gamblers as well as the claim that money derived from machines is not reaching the community.

Both these claims are blatantly lacking in any factual evidence. Only one country in the Western world (Sweden) has a better record of the number of problem gamblers seeking assistance and Government funding to the Problem Gambling Council has been reduced due to a lack of assistance required. Over \$300 million dollars was distributed by Pub Charity in its last financial year at a rate of nearly 40% of income generated to a multitude of community and charitable organisations. They pay tax to the Government at about 30%, as a comparison, Sky City Casinos tax rate is 4% and the Racing Industry nil.

I felt that Pub Charity's presentation was a balanced and common sense view on the ramifications should this proposed Bill proceed past the Select Committee stage. What their Chief Executive Officer, Martin Cheer, urged the people present was for them to disseminate this information to as many people as possible who benefit from present grants from gaming machine proceeds and to exercise their democratic right by making an individual submission to the Select Committee. The more people that do this will show the politicians that there is a groundswell of support in the community that the present distribution of money is working well and benefitting our wider community in a fair and balanced manner.

Statistics clearly show that there is presently more than ample support for problem gamblers (less than .05% of our entire population) and that it is NOT an environmental problem of having gambling machines but an entirely personal problem. Are the proponents prepared to ban alcohol simply because we have alcoholics and binge drinking in our society? **NO**

I am urging our members to visit the following website to learn just for themselves what the effect this Bill would have for a sector of our community that provides support and assistance to thousands upon thousands of people. It is my belief that we have an obligation to ensure that revenue streams from gaming machines continue to be distributed amongst the thousands of community/voluntary & not for profit groups throughout our country in its current form and not to allow local community committees to decide upon how monies are distributed.

Submissions can be made in writing but it is a very simple exercise to complete a brief online submission by following the prompts on this website. www.barthebill.co.nz
PLEASE PLEASE exercise your democratic right and have your say on this proposed Bill.

Mark Bruce- President

HERE AND THERE

Greetings Amputee District Secretaries,

For the past six years we have held an annual Amputee Golf tournament in NZ, alternating between the North Island and the Mainland, and this year it is the Mainland's turn to host this social event. We would appreciate your help in boosting the number of amputees, family and supporters attending this year's tournament. We therefore ask if you could include an invitation to our tournament in your next district news letter. This is a social event for Amputees, their supporters and friends. There is no need to be a gun golfer or have an official handicap. Just a willingness to have a go, a laugh and a smile. The Tournament dates are Thursday/Friday 25th & 26th October 2012. Entry form and more info at www.amputeegolfnz.co.nz or I can be contacted any time at amputeegolfnz@xtra.co.nz Thank you for your support.
Alan Dearden- Co-ordinator



WEB SITES

**Amputee Society of
Canterbury & Westland Inc.**
www.amputeeinfo.co.nz

The Amputee Federation of NZ
www.af.org

Amputee Information
www.mossresourcenet.org

International Diabetes Federation
www.idf.org

Parafed Canterbury
www.parafedcanterbury.co.nz

Disability Awareness in Action
www.daa.org.uk

Amputee News
www.amputeenews.com

Disability Rights Commission
www.drc-gb.org

UN Programme on Disability
www.un.org/issues/m-disabl.asp

WEKA-NZ Disability Info
www.weka.govt.nz

Disabilities Information Service

314 Worcester Street, Christchurch
PO Box 32-074, Christchurch

☎ 03-366-6189

☎ 03-379-5939

🕒 9.00am - 4.30pm

✉ dis@disinfo.co.nz

Amputee Coalition (USA)

www.amputee-coalition.org

the production house

Nigel Mathews Free phone 0800 533 6770

DDI 964-5312

ordersl@theproductionhouse.co.nz

ARTICLE OF INTEREST (PART ONE)

Integral Leg Prosthesis

What is the Integral Leg Prosthesis? The Integral Leg Prosthesis is a new type of prosthetic care for above-the-knee amputees making a conventional prosthesis shaft unnecessary.

The Integral Leg Prosthesis is modelled on the anatomy of the human body and takes the load back to the thigh bone and hip joint when walking. OrthoDynamics GmbH has many years of experience in the field of endoprosthetics and the use of state-of-the-art materials which makes this type of care possible.

The Integral Leg Prosthesis is implanted directly into the thigh bone and facilitating a safe connection between the patient and the prosthesis.

Technology- How is the Integral Leg Prosthesis constructed?

The Integral Leg Prosthesis is made up of several modules which can be divided into an inner (endo) and an external (exo) module. The Endo-Module, the so called femoral stem, is directly implanted into the thigh bone (femur).

The special feature of the implant is the patented Spongiosa-Metal 11 surface. Bone grows through this three-dimensional grid structure (osseointegration), providing secure fixation of the prosthesis.

A dual adapter connects the endo and exo modules. Fixed internally, it leads out of the stump and is fitted with the knee connection components on the outside.

The silicone cover is used to protect the exit hole (stoma). The cone sleeve and the rotation disc serve as connection for the knee-lower leg prosthesis system.

All other components can then be quickly and easily linked to the Endo-prosthesis using the knee connector adaptor.

What are the Advantages of the Integral Leg Prosthesis?

Mobility

- Allows full freedom of movement at all levels-stump is not forced into a predetermined form--- Muscular strength can be developed freely
- Freedom of movement is not restricted by the interfering edges of a prosthesis shaft regardless of whether you are sitting, standing or walking.
- Less feeling of weight---• More control over prosthesis

No Shaft Strength is directly transported from the bone to the prosthesis enabling its precise handling. Using the Integral Leg Prosthesis puts the hip joint under strain in a natural way and it also counteracts decalcification of the bone. In combination of an improved perception of ground conditions, the Prosthesis facilitates a secure and harmonious walking pattern.

The Exo-prosthesis can be attached and removed completely within a few seconds when seated. Possible variations in the volume of the stump have no effect on the prosthesis' fit. No skin irritations due to sweat, friction, or heat occur, meaning the prosthesis can be worn for longer periods without pain or discomfort and mobility is not restricted at any time.

ARTICLE OF INTEREST (PART TWO)

Surgery: The implantation of the Integral Leg Prosthesis is carried out in two surgeries which are performed under General Anaesthetic. In the first surgery, the lower end of the thigh bone is uncovered and the femoral stem is implanted. When the implant is correctly positioned, the sleeve is fitted and the stump is closed up again. In the following 4-8 weeks, osseointegration, that fixes the implant to the bone, will take place. In the second operation, the circular skin opening (stoma) is created. The dual cone adaptor is connected to the internal femur stem through this stoma. The remaining components of the prosthesis can then be attached externally. Partial weight bearing and the adjustment of the prosthesis can take place as early as a few days after the second operation. This happens under the supervision of physiotherapists and orthopaedic technicians.



Website: www.orthodynamics.com.au

Am I the next NZ "Bionic Woman"??

Growing up I watched episodes with Lee Majors and Lyndsey Wagner with awe. Little did I know, 30 years later, I would be considering surgery that the media has labelled as 'Bionic'. I emailed Dr Al Muderis the moment I watched clips of the surgery shown on the Campbell live show. Within weeks I was in Sydney in front of his team being assessed as to whether I would meet the criteria for the implant surgery for above knee amputees.

Initially I was led to a room with 5 people who had the Endo-Exo surgery, all at different stages of post op recovery. I was one of a number of people considering the procedure and one of two kiwi's curious and excited about a prospect of not having to wear a socket again. I was then taken individually to meet Dr Al Muderis's team who were impressive, including a prosthetist, rehabilitation physiotherapists, a psychologist and assistant orthopaedic surgeon all assessing my eligibility.

I met two Australian recipients who were functioning extremely well post surgery. All the recipients swore that it was a procedure that they did not regret, including our NZ Bionic Man. Post op care appeared to be available for patients not living in Australia and the level of support prior to surgery was explained and I am honestly interested in taking up this option.

The initial financial cost(100,000 plus NZ) is considerable, but the physical and psychological benefits may be immeasurable. Financially it would be mean that I would never be fitted with a socket again. Over the last 18 years I have had a new socket at least once a year. I am 41 now so that could save over the next 30 years a considerable sum for the NZ government. I leave you with this question. What is the value of an improved quality of life for an above knee amputee worth?

Leigh Ellis