Amputee Society of Canterbury & Westland Inc.

⊠ PO Box 7424. Sydenham. Christchurch.8240

President

Noel Dolamore 203-384-4580 ^@noel@towright.co.nz

Vice President Rod Boyce 203-980-9395 ¹ rod.g.boyce@paradise.net.nz

Secretary/Treasurer Taxi Co-ordinator Ava Thomas 203-382-1873 A avat@clear.net.nz

Funding Co-ordinator Mark Bruce 203-376-4436 [^]mark.bruce@xtra.co.nz Visiting Co-ordinator **Events Co-ordinator** Margaret Hunter 203-349-7585

1 jim.marg.hunter@clear.net.nz

<u>Newsletter</u> Editor Sue Lemieux 203-385-7727 𝔅 suelmx@hotmail.com

West Coast Contact Will Sturkenboom 203-732-8312

Manager Artificial Limb Centre Graham Flanagan 203-383-0501

Marketing Coordinator Malcolm Fleck 203-381-7164 𝑘 malfleck@gmail.com

Web Site Manager Jo Boereboom 203-942-5320 thfarmtree@prardise.net.nz

Cards & Games Co-ordinator Maire Sadler 203-359-2044

Life Members

Rachel White Lorraine Wyse Ray Newton Heather Plows Ray Boundy War Veterans

F L Petrie Don McKenzie S C Common

Disabilities Information Service

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

203-366-6189 ₿ 03-379-5939

Ø 9.00am - 4.30pm

Adis@disinfo.co.nz

Artificial Limb Centre 330 Burwood Road, Christchurch

☎03-383-0501 🖹 03-383-3566 ② 8.00am - 4.30pm

Manager Graham Flanagan

Office Administrator Pauline Afitu www.nzalb.govt.nz

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



Burwood Hospital Hvdro Pool



Every Monday

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

Thanks to Our Sponsors





thewarehouse //





Amputee Society Canterbury & Westland Inc

In this edition

EDITORS MESSAGE SECRETARY REPORT CHUCKLE CORNER UPCOMING EVENT ARTICLES OF INTEREST SOCIETY NEWS CHRISTMAS TREATS MISTLETOE ARTICLE LINKS AND NUMBERS

Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed it is the only thing that ever has.

Margaret Mead (1901)-(1978)

Editors Message

Hello Everyone and hope this finds you well and managing. It's good to be back in NZ after my longer than expected trip to the USA. Braved a few Hurricane threats and went through a couple of Tropical Storms but believe me they were nothing compared to what we went thru together in Feb and June.

I attended our Christmas Luncheon and it was so nice to see a great turnout as usual and once again thanks to Margaret for all the arrangements and extras. It was also a treat to meet a few new and younger members attending their first function with us and hopefully we will hear from them in future issues of this newsletter. We heard a very interesting talk from our guest speaker Mr McKie who showed us the vast job the Medical Community went thru post quakes. Our hats sure go off to all those involved. At this time I would like to extend our deepest sympathy to Heather Plows and

Family on the loss of their Dear Brian. Brian served as President for a number of years for our Association and will be sorely missed.

Also condolences to our President Noel Dolamore on the passing of his beloved Father. Our thoughts and prayers are with you and your Family.

Well its that time of year once again so on behalf of your Executive Committee I I look forward to seeing many of you at the AGM and hope I have given you

would like to wish you all a very Blessed Holiday Season and a Very Happy. Healthy. And Prosperous New Year. If you are driving during the Holidays please take care and for those of you who are going to visit Family out of town---enjoy!! something to think about concerning that (hahaha) It has been a pleasure doing this newsletter for you all and I do hope that the articles and info has been of some help. See you all in 2012 which by the way will be a QUIET ONE!!!!!!



Amputee Society of Canterbury and Westland Inc. PO Box 7424 Sydenham e-mail: info@amputee.info.co.nz Website: www.amputeeinfo.co.nz



NOV/DEC/2011

Ouote of the Month

SOCIETY NEWS

Our Annual General Meeting is coming up in the New Year and details will be in the next issue. I encourage you all to attend as this is your chance to let us know what you want, don't want, and give us any suggestions that you might have for our future planning. A society is only as good as its members so your input is critical. Also we can always use more committee members so give it a thought and come prepared.

In the upcoming year we would like to wage an amputee awareness campaign as it is so disheartening to talk to people and even Medical staff who state that they weren't aware that there is an Amputee Society. If you would like to assist in this please contact me as all help is greatly appreciated.

CHRISTMAS TREATS

Edible Ornaments: Sugar and Spice Snowflakes

3 1/2 cup(s) all-purpose flour2 teaspoon(s) ground cinnamon1 1/2 teaspoon(s) ground ginger1/2 teaspoon(s) baking^o soda

- 1/2 teaspoon(s) salt •
- 1/4 teaspoon(s) ground cloves •
- 1/4 teaspoon(s) ground nutmeg •
- 1 cup(s) unsalted butter¹, softened
- 3/4 cup(s) packed dark brown sugar •
- 1/2 cup(s) granulated sugar •
- 2 large eggs
- .
- Whisk flour, cinnamon, ginger, baking soda, salt, cloves, and nutmeg in a medium bowl; beat butter and sugars in a large bowl until creamy. Beat in eggs one at a time. With a mixer on low speed, beat in flour mixture, one half at a time, until blended. Divide dough^o into thirds; wrap each third in plastic wrap and press into a disk shape. Refrigerate until firm enough to roll, about 2 hours.

Preheat oven to 350 degrees F. Lightly grease several large baking sheets. Roll 1 piece of dough at a time, on a lightly floured surface with a floured rolling pin, to scant 1/4-inch thickness. With 3- to 4-inch snowflake and star cookie¹ cutters, cut out cookies¹⁰. Using the end of a drinking straw, cut out a small circle in each star and snowflake so cookies can be hung. Place 2 inches apart on prepared baking sheets. Bake¹ 8 to 10 minutes, or until lightly browned at edges. Remove to wire racks to cool completely. Decorate as desired.

These snowflake cookies are perfect for the holiday season. They look beautiful on the dessert table and work well as a hostess gift!

CHUCKLE CORNER

CAUTION

A Pharmacy major was taking a course in Dispensing. One day they were discussing the various labels affixed to prescription containers, such as, "Take with food, "and "Take with water." At the end of class, the professor passed out a few sample labels.

Days later he noticed that one member of the class had stuck one of them onto his chemistry textbook. It read: "Caution: May cause extreme drowsiness."

2012 AMPUTEE GOLF TOURNAMENT

The Tournament in its present format has been running for the past 6 years. The first two at Waiheke Island, then Cromwell, Whangarei, Nelson and Auckland. As you can see we try to alternate between North and South Islands to help keep travel costs to a minimum. It was decided last year at our Nelson tournament to form an Amputee golf society, so as to be able to apply for funding through Community Trusts, and gaming machine operators etc. Also as golf is now to be an event at the Paralympics in 2016 we are hoping to maybe fund a team to represent NZ. We also hope to help people to attend our tournaments, who can't make it for financial reasons. They will be able to apply to the Society for help.

We have approx 30 members so far and hope to grow this to 100+ in the next year. Our membership fee is \$10 per year and is open to all amputees, supporters and friends. The next tournament is to be held in Christchurch on Thursday and Friday 25th, 26th October 2012, at Windsor Golf Club.. There will be a practice round for those that need it on Wednesday 24th. The entry fee will be \$110.00 for Amputees and \$130.00 for non amputees. We are looking for Sponsors for each of the 19 Holes. To sponsor a hole will cost \$100 cash or prizes to this value or more. All sponsors will be able to have a player in the tournament at the visitors' price of \$130.00. The entry fee covers the cost of hiring the course, electric carts for those amputees who can't walk the course, two meals and food and drinks at the meet and greet. There will be heaps of prizes for all levels of golfers. We run a stroke, and stableford competition for golfers with handicaps, and a separate competition for golfers with no handicap. There is also a section for All Friends, Family and Supporters. We are hoping all Amputees in Christchurch can get behind us and support this tournament.

Even if you don't want to play, we will find something for you to do to help. We are also organising discounted accommodation for out of towners who come and also billeting will be an option.

Any offers of Sponsorship, help, information or donations of prizes, please contact Alan Dearden 03 3833 766, or 027 217 8227.

UPCOMING EVENT

SECRETARY'S REPORT

Message from the Secretary's desk

Hello everyone,

I do hope you're all coping with the fickle, changeable weather we're having?

Firstly I have a FREE wheelchair which has been donated for anyone who may need a spare (it's very heavy so not ideal for taking on outings) but ideal for gardening, leaving at a holiday home or relatives you may visit regularly. Please phone me: 3821873 if you're interested. Remember also our FREE loan equipment if you plan to be away over the holidays. Phone Mark for this: 3764436.

We have received news from the solicitor of a former member amputee who has passed away that they have a vehicle with wheelchair hoist for sale. Interested? Again phone me please re this

The Limb Centre will be closing at mid-day on 23 December 2011 and open again at 8.30am on 5 January 2012. Burwood pool will be closed from 23 December 2011 and open again early Feb. 2012 (no date yet but will advise when I know to those who attend). If you will need extra Taxi Vouchers over the Xmas period please give me a call and I'll send out to you. Also, when returning empty books to me could you **please** include your name on the empty book if you're not sending a return envelope?

Volunteer pool supervisors in the east needed please. If you're willing to give us an hour on a Monday evening & you live near Burwood Hospital please give me a call and I can fill you in with the details

Take care and have a wonderful Xmas and safe New Year. Ava.





CHRISTMAS FACT

What's the Deal With Mistletoe? How the plant came to be associated with Christmas kissing

The Druids started it. Mistletoe, a <u>hemi-parasitic plant</u> that grows on trees, has long been considered a cure-all with special properties: In the *Aeneid*, the hero brings a <u>bough thought to be mistletoe</u>—a symbol of vitality that remains green even in winter—to the underworld. But the earliest mention of mistletoe's romantic powers was by Roman natural historian Pliny the Elder, who scoffed at the Druids of the 1st Century A.D. for believing that "<u>mistletoe, taken in drink, will impart fecundity to all</u> <u>animals that are barren</u>."

That romantic association was later expanded by the Norse myth about Baldur and his mother, Frigga, the goddess of love and marriage. According to legend, Frigga got all the plants and animals of the Earth to promise not to harm her son except mistletoe. Loki, the god of mischief, took that opportunity to kill Baldur with a spear made of mistletoe. In some versions of the tale, Frigga's tears then turned into mistletoe berries, which brought Baldur back to life, prompting Frigga to declare mistletoe a symbol of love.

It wasn't until the 18th or 19th centuries, though, that the British started hanging mistletoe as part of Christmas celebrations. In an 1820 story, Washington Irving described Christmas decorations that included "the mistletoe, with its white berries, hung up, to the imminent peril of all the pretty housemaids." In *The Pickwick Papers*(1836), Charles Dickens paints a scene of mass sub-mistletoe kissing: Young women "screamed and struggled, and ran into corners, and did everything but leave the room, until ... they all at once found it useless to resist any longer and submitted to be kissed with a good grace." In this context, mistletoe was supposed to bring luck to two people who kissed underneath it and bad luck to those who didn't. Some say proper etiquette is to pick a berry off for every kiss and stop when all the berries are gone. Just don't eat them: Some species of mistletoe are poisonous.

Mistletoe's reputation as a healing plant persists in the world of herbal remedies, but there's little clinical evidence that it can cure disease. Actress Suzanne Somers famously opted to treat her breast cancer with mistletoe extract instead of chemotherapy. Extract has even been shown to kill cancer cells in the lab. But the American Cancer Institute has <u>concluded</u>, "There is no evidence that mistletoe's effects on the immune system help the body fight cancer."



MGH to begin replacing hands: By Liz Kowalczyk

Massachusetts General Hospital is launching Boston's second hand transplant program, hoping eventually to pioneer a new way of replacing patients' limbs without subjecting them to a lifetime of dangerous antirejection drugs — an advance that could turn a rare operation into a routine one.

The idea is to transplant a donor's bone marrow along with the hand to trick the recipient's immune system into accepting the donated hand as its own. The hospital has had early success with this experimental approach with certain kidney transplant patients. If it works with hands, these transplants could become more attractive to thousands of amputees — many of them veterans of recent conflicts because they wouldn't have to take medications that suppress the body's defenses against infection. Initially, Mass. General will do conventional hand transplants using antirejection drugs, while doctors prepare to test the new approach. "We are starting a revolution in reconstructive surgery," said Dr. Curtis Cetrulo, a plastic surgeon and senior investigator at the Transplantation Biology Research Center. "It's a very exciting time." Brigham and Women's Hospital, which like Mass. General is part of the Partners HealthCare network, has done two double-hand transplants since June, one of which was successful. Leaders of the two hospitals said that offering the procedure at both facilities will not add extra costs to the health care system. They said they are not building new operating rooms or hiring new surgeons, but using existing resources. "This is not an example of costs out of control in health care. We're not making a major capital investment," said Dr. Peter Slavin, Mass. General chief executive. Dr. Michael Zinner, Brigham surgery chief, said the two hospitals, which run a joint plasticsurgery training program, are consulting each other on best approaches for hand transplant surgery and rehabilitation. "We see this program as collaborative, not competitive," he said.

About 70 patients worldwide have received hand transplants, including at least 16 in seven US hospitals, while many more are developing programs. All have been done the conventional way, with patients having to take antirejection drugs so that their immune systems don't attack the transplanted tissue. Mass. General Drs plan to minimize the levels of drugs for their initial patients by using sensitive immune monitoring techniques developed at the hospital. Slavin has approved the use of hospital funds for hand transplants on up to five patients. The surgery and hospital stay will probably cost between \$100,000 and \$200,000 and is not covered by insurance. Mass. General Doctors, nurses, and social workers are evaluating patients, including James Barrows, 49, of Woburn, whose shirt sleeve got caught in a meat grinder at work, pulling in his right hand. "When I lost my hand I really felt I lost myself as a man," he said. "To take my wife out for steak dinner, my wife would have to cut up my food for me."

The drugs Barrows will take can have debilitating side effects, such as warts, cataracts, and increased risks of heart disease, diabetes, kidney failure, and serious infections.

Transplant patients who receive new hearts, livers, lungs, and kidneys also face these risks, but they are especially problematic for patients considering hand transplants. They don't need the surgery to save their lives. And they can use prosthesis to pick up objects, although, Cetrulo said, prosthesis doesn't allow a person to feel the things they touch.

Also, many amputees are young adults "with a whole life ahead of them," and therefore would spend decades on the powerful drugs, said Dr. David Sachs, who pioneered the unorthodox bone marrow transplant approach in kidney transplant patients.

"The more we can minimize the risk, the more likely (hand transplants) will be a worthwhile operation do to," said Sachs, who is director of the Transplantation Biology Research Center. The marrow produces immune cells that identify whether tissue is the patient's own, so in theory, transplanting the donor's marrow should result in the recipient's immune system identifying the transplanted hand as its own. Sachs said 7 of 10 kidney transplant patients who have undergone a simultaneous bone marrow transplant at Mass. General have developed tolerance for the new organ and do not require antirejection drugs. This approach can be difficult for patients to tolerate, however, and it will be more difficult to make work in hand transplant patients.

Five days before transplant surgery, patients begin to undergo low-dose chemotherapy to kill off some of their marrow cells and make room for injection of the donor's bone marrow. The patients also receive a drug and radiation to the thymus to eliminate a type of immune system cell, known as a T cell, that typically attacks any tissue perceived as foreign. On the day of the procedure, surgeons attach the new kidney while injecting the donor's bone marrow into a blood vessel in the patient's arm.

Kidney transplant patients who have undergone it have received an organ from a living donor, meaning doctors are able to schedule the surgery and begin preparations in advance. Hands will come from deceased donors and the timing will be unpredictable. In his lab, Sachs is studying whether it's possible to store the donor's bone marrow and inject it after the transplant — an approach doctors hope will be ready to test in patients in one to two years.

Barrows, the former meat cutter, said he is not daunted by the antirejection drugs. At the time of his injury in March 2005, Barrows had stayed late at the Mayflower Poultry Co. in Cambridge to fill a special order. As he was feeding a chicken into the meat cutter, the machinery pulled in his sleeve and then his right hand up to the wrist. Firefighters cut off the front of the machine and rushed Barrows to Mass. General with the rest of the meat cutter attached to his hand. The pressure from the metal parts had stopped the bleeding. After emergency surgery and a monthlong hospital stay, Barrows said he barely left home for two years because he "couldn't deal with the way people looked at me." He opted against a prosthesis because he didn't want to draw further attention to his disfigured arm. Barrows, who was right-handed, tries to write with his left hand, though at times his writing looks like that of a preschooler, he said. He needs help showering and shaving. He has gone back to work, as a delivery truck d Barrows has two sons, ages 3 and 1. "My number one goal after this is done," he said, "is I want to pick my children up with two hands.".

ARTICLE OF INTEREST Part 2