doing more with less!

Canterbury & Westland Inc

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September/October/2012

Quote of the Month:

Great ability develops and reveals itself increasingly with every new assignment.

Baltasar Gracian

Editor's Message

Hello All and hope you are keeping warm and dry. Hopefully the weather will start to change soon and sunnier and warmer days will be with us. It would be nice not to have to warm my liner under the covers before I put it on in the morning-hahaha.

At present I am recouping from some arm surgery and believe me have gained a great deal of understanding for upper extremity amputees. My hat goes off to you! I believe tho that it is good if we understand other levels of amputation and how it affects people.

As you will see later in the issue, we are going to be busy in November, as our Awareness Campaign will be in full swing and we also have our Xmas dinner to look forward to. If any of you would like to attend or work at the functions we are going to be at, or have anything you would like to sell, just get in touch with me as soon as you can.

We have made some new contacts at the local hospitals and I know that these people will help us make new/old amputees aware of our Association and we gain more members. Unfortunately many in the community are not aware of us and hopefully that will begin to change.

We would like to welcome our new members and please don't hesitate to call us if you need anything. Once again I am asking if you have any stories, pictures, or new web sites, please let Jo or me know so we can add them. Our website is doing well and many folks have visited it but we would like to be getting some new articles etc to keep it up to date and to let us know what you are up to.

This is your Newsletter so if you have something to sell, an event coming up such as an Anniversary etc just let me know. It's always encouraging to see what other folks have accomplished and it just mite help someone else. Give it a thought!!

Just a reminder—if there is a red dot on your issue it's to remind you that your annual dues are late. Please don't let your membership lapse.

Take care of yourselves and please check with the Limb Centre if you have any problems with your stump or prosthesis.

Have a fun Halloween and don't eat too many lollies! hahahaha



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Christchurch 8148E-mail: info@amputee.info.co.nz
Web site: www.amputeeinfo.co.nz

Affiliated with Amputees Federation of NZ Inc.

Here And There

Due to the ongoing changes to our city's roads, we will be providing regular transport related news stories to ensure road users are well informed.

This will provide road users with some of the information they need to help navigate around Christchurch. The website's key feature is an interactive map which is updated with real time travel speed information and road closures. Navigate around the interactive map to identify where traffic incidents and delays are located and how they may affect your journey. The website will also include news stories on how events around the city (e.g. festivals, road closures, building demolitions) may affect your travel plans.

Marie Byrne

Strengthening Communities Adviser (Riccarton/Wigram)South-West Strengthening Communities TeamCommunity Support Unitwww.transportforchch.govt.nz

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Our Awareness Campaign will be on display at the following venues:

October28 ^{th-} New Brighton Catholic School Fete	11:30-2:30	
November 3 rd - St Mary's Church Fair	9:30—	
November 15 th - Linwood Community Arts Centre	9:30-noon	
(corner of England and Worcester Streets)		
November 17 th - New Brighton Community Market	9am-2:pm	
Here to see you at any of these systems and sive your systems		

Hope to see you at any of these events and give your support.

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We have letters drawn up to hand out to local merchants asking for a donation in the way of merchandise or vouchers to provide articles for our raffles at the social functions. If you would like a few to hand out in your area just let me or Margaret know and we will get them out to you.





Healthy Living

Correct treatment of common diabetic foot infections can reduce amputations

EMBARGOED FOR MAY 22, 2012, ARLINGTON, Va.] – Diabetic foot infections are an increasingly common problem, but proper care can save limbs and, ultimately, lives, suggest new guidelines released by the Infectious Diseases Society of America (IDSA). Because people with diabetes often have poor circulation and little or no feeling in their feet, a sore caused by a rubbing shoe or a cut can go unnoticed and worsen. As many as one in four people with diabetes will have a foot ulcer – an open sore – in their lifetime. These wounds can easily become infected. Unchecked, the infection can spread, killing soft tissue and bone. Dead and infected tissue must be surgically removed, which, if the infection is extensive, can mean amputation of the toe, foot, or even part of the leg. Nearly 80 percent of all nontraumatic amputations occur in people with diabetes – and 85 percent of those begin with a foot ulcer.

Because treatment of diabetic foot infections can be complicated, the best approach is to involve a multidisciplinary team that can assess and address various aspects of the problem, suggest the guidelines, which are a revision and update of IDSA's 2004 diabetic foot infections guidelines.

The new guidelines include 10 common questions with extensive, evidence-based answers, which the panel that wrote the guidelines determined were most likely to help a health care provider treating a patient with diabetes who has a foot wound. The first step is to determine if the wound is infected, which the guidelines note is likely if there are at least two of the following signs: redness, warmth, tenderness, pain or swelling. About half of ulcers are not infected and therefore should not be treated with antibiotics, the guidelines note. People with infections do need antibiotic therapy and those with a severe infection should be hospitalized immediately. ---When a foot sore is infected, imaging the foot is usually necessary to determine if the bone is infected. It is also important to perform a culture of the wound to determine the bacteria causing the infection, which will then help guide which antibiotic should be used for treatment. Because of the complexity of diabetic foot infections, the guidelines suggest these patients are best served by a multidisciplinary team, including infectious diseases specialists, podiatrists, surgeons and orthopedists. In rural areas, doctors may be able to use telemedicine to consult with the appropriate experts, Dr. Lipsky said. (Benjamin A. Lipsky, MD, is chair of the review panel, and lead author of the guidelines)

"There is quite a bit of over-prescribing or inappropriate prescribing of antibiotics for diabetic foot wounds, which doesn't help the patient and can lead to antibiotic resistance," said Warren S. Joseph, DPM, co-author of the guidelines and consultant for lower extremity infectious diseases at Roxborough Memorial Hospital, Philadelphia. "The guidelines note that when antibiotics are necessary they should be discontinued when the infection is gone, even if the wound hasn't completely healed." The voluntary guidelines are not intended to take the place of a doctor's judgment, but rather to support the decision-making process, which must be individualized according to each patient's circumstances.

EXPECTATIONS DURING FIRST YEAR AS A LOWER EXTREMITY AMPUTEE

by John Peter Seaman, CP, CTP

As a recent amputee, you're not alone if you feel clueless about what to expect during your first year as an amputee. While there are no set guidelines that will fit every amputee's individual situation, there are some generalities that may apply.

<u>MONTH 1</u>---- Following your amputation, you and your residual limb will start your respective psychological and physical healing processes. Depending on how fast your limb heals, you should expect to have your stitches/staples removed within 3 to 4 weeks of your surgery. You should start pre-prosthetic physical therapy soon after your amputation, working on your upper body strength and your lower limbs to maintain good range of motion in your hips and knees and strength in your leg muscles. You should also start desensitizing your residual limb by rubbing it and manually moving your tissue around with your hands to loosen any scar tissue that might develop inside your limb. You will also meet your prosthetist multiple times, first for a consultation/evaluation and then to be fitted with a "stump shrinker" that will start shaping your residual limb for initial prosthetic fitting.

<u>MONTHS 2-3</u> ---- Once your incision has completely healed, you will meet with your prosthetist to be measured and cast. Once your prosthetist has a positive model of your limb, it will be used to create a diagnostic socket for test fitting purposes. This socket will be connected to a knee (for transfemoral amputees) or just a pylon (for transtibial amputees), which in both cases will then be connected to a prosthetic foot. Once a diagnostic socket is deemed to fit "comfortably," your preparatory socket will be fabricated and connected to your other prosthetic componentry, resulting in your first prosthesis. Adjustments to this prosthesis may be required during the first month or two that you wear it, leading to follow-up visits to your prosthetist. Usually, you will see a physical therapist two to three times a week for 1-hour sessions. These sessions are important to ensure that you develop good habits while you relearn how to walk, using a prosthesis. You will typically start walking using a walker as you work to regain strength, balance, endurance and confidence.

<u>MONTHS 4-6</u> ---- Your residual limb will continue to go through physiological changes as you use your prosthesis more, typically resulting in volume loss. If your rehabilitation process proceeds well, you might see your prosthetist on a monthly or bimonthly basis during this time period. It might become necessary for your prosthetist to fit you with a socket replacement during this timeframe due to significant volume loss in your residual limb, which can cause your original preparatory socket to become too large and adversely affect its fit. If so, you may be test fit again before you are fitted with another downsized laminated socket.

Article of Interest (Part two)

Be aware that every socket you are fit with will feel different, which may require some getting used to and possible adjustments following fitting.

<u>MONTHS 7-9</u> -----By now, your residual limb may have stopped shrinking and reached a somewhat mature state. At this point, your physician might prescribe that you be fit with your definitive prosthesis, assuming your preparatory socket no longer fits intimately. This may require test fitting again and additional visits to your prosthetist. Your prosthetist will also incorporate componentry into your definitive prosthesis that matches your current and/or potential level of activity, assuming your activity level has changed since originally being fit with your preparatory prosthesis. You may have progressed through the use of a variety of assistive devices to the point where you can ambulate without an assistive device. However, not all lower-limb amputees are able to function safely without the use of an assistive device, depending on their overall health, determination and confidence. Be aware that for some amputees, prolonged use of an assistive device the potential for falls.

<u>MONTHS 10-12</u>----As you approach the end of the first year since your amputation, you will hopefully have become fairly comfortable with life as an amputee: You will have mastered using a prosthesis – putting it on (donning), taking it off (doffing), making adjustments to the number of socks being worn, etc.; your phantom pain will have subsided and your phantom sensations will have lessened or become more tolerable; you will have found that you are able to do many of the activities of daily living that you did prior to your amputation, but possibly in different ways; and you will have established a good relationship with your prosthetist, who you've seen many times during the past year and will continue to see on a regular basis in the future.

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FOOTNOTE:

There is also information in the brochures included in the welcome packs and also the booklet Kia kaha obtained from the Limb Centre.

	Annual Christmas Dinner
Place	Hornby Working Mens Club
	17 Carmen Road,
	Hornby.
Date	Sunday 25th November 2012
Time	11am for drinks and a social get together.
	Special meeting 1145am
	Meal 12.15pm
Cost	\$26 but will subsidise \$6 on all who attend so will be \$20 per person
Speaker	Mr Colin Patterson on" Poetry and Entertainment" Well worth hearing and a good laugh, which we all need.

Please contact Margaret on 03 349 7585 before Sunday the 18th of November if you would like to attend as she is unable to ring everyone this time.

If you are unable to attend and have already said you are coming please advise Margaret by 9:30 am on the 25 th as we may have to pay for those who not show up.

PLEASE NOTE CHANGE OF DATE NOW 25TH OF NOVEMBER 2012







A big warm welcome to our new members and happy to have you with us:

Jim Teear, Joyce Esslemont, Ray Mikkelson, Joyce Frahm, Graham Stokes.

Look forward to seeing and meeting you at the Xmas dinner and have a chat.

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Our Heartfelt Sympathy goes out to the families of our recently Deceased Members:

Avis Forward, John Palmer, Les Goslin, Mr T Duncan

Our thoughts and Prayers are with you.

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, ChristchurchPO Box 32-074, Christchurch(03) 366-6189(03) 379-5939

9.00am - 4.30pm Email: <u>admin@aspirecanterbury.org.nz</u>

Website: www.aspirecanterbury.org.nz

Amputee Coalition (USA)

www.amputee-coalition.org

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West Coast Contact Will Sturkenboom 03-732-8312

Life Members Rachel White Lorraine Wyse Heather Plows Ray Boundy Ray Newton



War Veterans

S C Common

Artificial Limb Service

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

<u>Manager</u>

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.

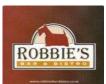
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