

# APPA NEWS

## The Atlanta Post-Polio Association

Volume 24, Issue 1

1st Qtr 2011

### Washington In February

By Linda Priest



Accepting an invitation to come to Washington, DC in the middle of February brought with it many doubts about my ability to travel in the snow and the need to purchase warmer clothes than my Atlanta climate usually requires. What a superb surprise! The weather was spectacular...one of the warmest on record, and for the whole week. The gods were definitely smiling on our mission, which was to visit with as many congressional members as possible to spread the word about the sorry state of providing complex rehab technology within our antiquated Medicare/Medicaid system.

I have been aware of this problem for some time and had been talking about it with my polio support group (the Atlanta Post-Polio Association) for a couple of years. I take these issues very personally because I am a user of complex rehab technology and I am a Medicare client. I had polio at the age of two, but unlike many polio survivors; I did not miraculously get up from my bed and walk after the acute phase was over. In fact, I have been in a wheelchair virtually all of my life. I started out at the age of two in a huge, heavy wooden cane-back chair with bricks built up on the

Continued on page 5

WEBSITE ADDRESS: [www.atlantapostpolio.com](http://www.atlantapostpolio.com)

**Table of Contents:**

<b>President's Message</b>	3
<b>Marie's Voice</b>	6
<b>Thoughts</b>	7
<b>Haiti Project</b>	8
<b>CDC Visits</b>	9
<b>Ask Dr. Maynard</b>	10
<b>2010 Holiday Party</b>	13
<b>Disability Day</b>	16
<b>Concrete Change</b>	17
<b>The Polio Place</b>	19
<b>Tech Bits &amp; Bytes</b>	20
<b>2011 Event Schedule</b>	23

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Web hyperlinks are underlined and in red [www.atlantapostpolio.com](http://www.atlantapostpolio.com)

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## *Message From The President*

One of the reasons I haul my sometimes still tired body out of bed each morning is I can't see what adventures life has in store for me that day. Not all of them are good but the vast majority truly are. As I was working on the latest Tech Bits & Bytes installment I was reminded of when I first walked into the Shepherd auditorium to see what this **APPA** thing was all about. I remember feeling very welcome and was immediately glad I had. It was reassuring to know others were going through the same post-polio experience as I was and it wasn't all just "in my head." For me my involvement with **APPA** has been a rewarding experience. It has given me the feeling that even though my working life may be over I still have a lot I can give. It's opened up new experiences I could have never imagined. When Linda Priest asked me if I would take on the job of **APPA NEWS** editor I remember saying something like "I'll try but are you crazy, my background is science and engineering hardly English." Now the adventure continues with me serving as **APPA**'s president. I explained to our board that I know as much about being **APPA** president as I knew about being the editor of **APPA NEWS** back when. That didn't dissuade them in the slightest so here we are. I'm grateful for the faith the board has in me and am honored to be chosen to serve. Both president's preceding me during my time here have set the bar pretty high. Sylvia Gray and Linda Priest are both tough acts to follow. I promise to do my best. I did, however, make it clear that I wanted to be able to continue as editor and publisher of **APPA NEWS**. I'll do my best to have time for both. We are blessed with a wonderful working board to help me and we have a new board member Shannon Morgan. Shannon's taking over the Database Manager position from me which will help a lot. As always Cheryl Hollis has great programs planned for us this year. Among them are an off-site bingo party, a visit from Dr. Leslie, and of course the holiday party.

Among the things I'd like to see accomplished by **APPA** in the future is a resurrection of the **APPA** grant program. Even more fundraising to help support the grant program and other **APPA** activities. A bigger push to get the word out about us. There are many polio survivors out there we haven't reached yet.

I look forward to serving **APPA** in my new position and another year trying to make a positive difference.

*Joe Drogan* - **APPA** President

A big “**APPA** Welcome” to our newest member

**Jane Kilgore** - Atlanta GA



# APPA Welcome



**APPA wishes to thank the following  
for their donations to APPA:**

**Ann & Richard Coultrip   Joe Drogan**

**Jane Kilgore   Cathy McIntire**

*Thank You!!!!!!*

## From The Editor

Well the 2011 1st quarter issue is ready for proofing. I'm planning 4 issues this year. The front page has been re-designed. I wanted more room for news and the font on the table of contents and **APPA** board was too small. Hope you like the new look. We've got a great article about Linda Priest's trip to Washington, a blast from the past with a reprisal of Myrna Whittington's "Thoughts - A Potpourri of Life," and another installment of "Marie's Voice" from Marie Latta. Tech Bits & Bytes got a little technical on me but describing system backups is going to be. Hope you get something out of it. It was a tough one to write keeping it generic enough to apply to most of you but specific enough to give you what you need to protect yourself. The back page has been re-done too. We've had a problem with matching up a renewal with the correct name & address or reading them. Our new database manager Shannon Morgan had a great idea. Why not put the address label on the other side of the renewal portion. Duh? Why didn't I think of that! This issue should keep you busy for a while.

Enjoy,

*Joe Drogan*

Continued from page 1

footrest so my feet would reach. As the saying goes, “we have come a long way baby” since then. It has been an incredible ride (no pun intended) to witness the change in rehab technology over the years. Most of my life I have used a manual chair, but as I have aged and with the coming of post-polio syndrome, I now use a wonderful chair designed by Permobil and prescribed by the seating clinic at the Shepherd Center in Atlanta. I am one of the lucky ones to live in a large metropolitan area with access to one of the most prestigious rehab hospitals in the country. Few people in my situation are so lucky. The bad news is that because of early retirement due to a multitude of factors including post-polio syndrome, I no longer have medical insurance and my wonderful Permobil will soon need to be replaced. I am in a scary place because I have no idea what my next wheelchair will be. There are no truer words in my situation...we are only as independent as our rehab equipment allows us to be.

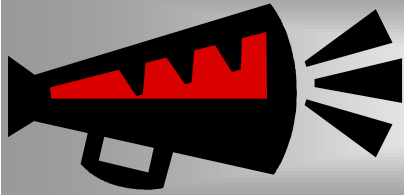
The current problem: Medicare processes complex rehab technology within the same category as all durable medical equipment. The system was created some 40 years ago to assist the elderly with devices as they aged. These devices are not specialized and to a great degree can be used by most people interchangeably. On the other hand, the chair I sit in today was prescribed, designed and fitted just for me with my specific needs and deformities. There is no comparison between the two. We need a separate benefits category for complex rehab technology within the Medicare program to insure that qualified people are prescribing this equipment and that qualified technicians are available to service them. The current Medicare process is so fraught with antiquated rhetoric and requirements that it has created an environment that makes reimbursement for these products and services untenable for those professionals who are the best in their field and the most appropriate for designing and providing the equipment. The proposal prepared by Continuing Education and Legislative Advocacy, CELA, addresses all of these issues.

It was an honor to work with the CELA organization over a five-day period. I visited my senators' offices, and all of the offices of my representatives. It was a huge job and I was exhausted at the end of the day, but the work was very rewarding.

I am a full-fledged member of the CELA bandwagon and I believe completely in what they are doing. Since I've been home I have written to each office that I visited thanking them for their time and reminding them of how important this proposal is. In addition, I have attended a Disability Day at the Capitol here in Atlanta that was coincidentally slated for the week after my return from DC. I am currently working on an appointment with my US House (District 7) Representative. He is a “newbie” in Washington, having just been elected this term. He seemed truly touched that we had traveled all the way to Washington to speak to him and he promised me a meeting when he returns to Georgia.

I am pumped and I hope that you are! What we want is right. It makes sense and it needs to happen, not when they some day overhaul all of the problems with Medicare, but NOW. This issue can't wait.

For more information: <http://www.celaadvocacy.org/>



# MARIE'S VOICE

by

Marie B. Latta

## Hope For Worldwide Eradication Of Polio

Can polio really be eradicated worldwide? The CDC, Rotary International, UNICEF, and World Health Organization say yes, but it won't be easy. Two recent events gave us an updated picture of the current status of the multiyear (since about 1985) effort with its successes and challenges worldwide.

On February 9, 2011 our own Linda Priest told her story to the Rotary Club of North Fulton. Joe Drogan, Shannon Morgan, and I were there in support of Linda. Dr. Steve Cochi, Senior Advisor of Global Immunization at CDC, spoke of the current status of polio and the challenges for eradication. He has been on many eradication trips throughout the world.

At the March 5 **APPA** meeting John W. Fitzsimmons, Deputy Director for Immunization and Respiratory Diseases, Global Immunization Division at CDC, presented another update. He also had been in the world wide field doing the eradication work.

So what does this have to do with us in the United States? Aren't we safe from outbreaks? As long as there are countries who still have uncontrolled outbreaks of polio and there is international travel with the possibility of infected people spreading the virus from one region to another, no country can let down their surveillance.

In 2011 the focus is on India and Nigeria, the two countries with most significant reservoir of polio cases. In the USA many young families do not feel the urgency for vaccinations. A combination of lack of protection and international travelers who are carriers could be a recipe for disaster. What can we do? We can each have a voice about the necessity of being vaccinated against polio. We are real live examples of the long term effects.

\*\*\*



# Thoughts

by Myrna K. Whittington

## A Potpourri of Life

**G**osh, it has been a long, long time since I have written this column, I only hope this older, addled brain is still working!

It seems to be on my mind lately, maybe the New Year has something to do with my thoughts of all of our loved ones and friends **APPA** has lost the past few years. I picture Jim Doherty leading the choir with his Irish Tenor voice. I see Lucille Anderson exclaiming over the beauty in heaven and grabbing her paint brushes. I see Linda Sutherland leading a meeting educating all about post-polio. I see Jack Dillman looking for folks who need help. Also I see our friend and neighbor Dick Clark (a master woodworker of furniture) going up to God and perusing his throne, saying: "I think it is time to make a new one, this throne is awfully old!"

But most of all I see, no more wheelchairs, canes, scooters, legs nor arms that do not work well, I see everyone with wings that fly and soar and land so softly on a cloud. It is a wonderful sight to see!

Editors note: I hope some of you "older" **APPA** members remember Myrna's column from the ol' days. I really look forward to more columns from her.

# Haiti Project Completed



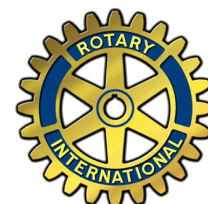
On September 11, 2010, **APPA** closed its Haiti relief project with members bringing their slightly used durable medical equipment to our meeting. Closets had been cleaned, basements checked and attics scrutinized for items that were not being used yet there was still life to be found in them. Shannon Morgan collected from coworkers and Sylvia Gray sent out word at her senior high rise which resulted in a utility van being sent to the pickup point. Thaddeus Lewis had a friend come with a pickup truck packed like Santa's sleigh! There were canes, crutches, braces, walkers and even a *potty chair*! Friends of Disabled Adults And Children (FODAC) in Stone Mountain, GA stored the items for **APPA** until final arrangements for shipping were made.

Rivers of the World located in Dawsonville, Ga. partnered with the local Rotary chapter in Gainesville, Ga. for the shipping. All in all, the project was a definite success with the result benefiting those in a country where people are worse off than we are.

Thanks to all who participated!

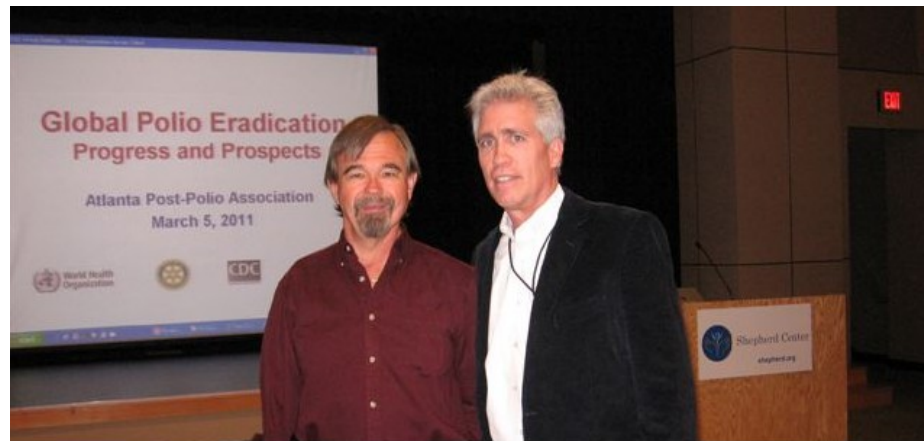
By Cheryl Hollis

**Rivers Of The World**  
International Exploration & Development





# The CDC visits APPA



**APPA** President Joe Drohan with CDC's John Fitzsimmons

Photo by Betty Storey

On March 5, 2011, John Fitzsimmons, the Deputy Director at CDC's Global Immunization Division in its National Center for Immunization and Respiratory Diseases presented a program on the worldwide polio eradication effort. This initiative combines the resources of partners chiefly from: the World Health Organization; Rotary International; the CDC; UNICEF; and most recently, the Bill and Melinda Gates Foundation.

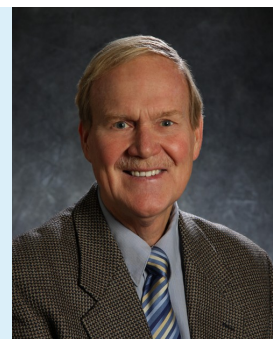
The Americas were the first region to interrupt the wild polio virus transmission with the last case reported in 1991. The European continent followed in June, 2002, when it was declared polio free. Worldwide there has been a significant drop in polio cases since 1988 with 99% of the globe being polio free at present. The global polio eradication initiative is composed of four key strategies: strengthening routine childhood immunization, supplementing the routine immunization activities, conducting surveillance for the wild poliovirus, and conducting intensive house-to-house targeted "mop-up" campaigns after the initial push for vaccination. The surveillance component is the cheapest of the strategies and it also provides the biggest value or "bang for the buck." The focus for 2011 is in India and Nigeria. For the period 2011-12 there is currently a funding shortfall of approximately \$720 million of the \$1.86 billion budget to continue the endeavor. The challenges that lie ahead continue to be access to children in the hardest to reach areas of the remaining 4 polio endemic countries, natural disasters (flood, earthquake, etc.) and civil strife and unrest. Partnering with other programs helps interest to stay high for the eradication goal. These interests include: strengthening the link between Epidemiology and Virology; responding to other health needs such as measles and malaria; distributing bed nets where needed; Vitamin A supplementation; and, a National Infant Immunization Week.

In summary two questions remain: (1) Can we really succeed? The resounding answer is *Yes!* and (2) Will it be easy? Equally resounding is the answer *No!* Poliovirus is a worthy adversary which requires sustained determination and innovation.

By Cheryl Hollis

## Networking

## Ask Dr. Maynard



Frederick M. Maynard MD

**Question:** I read with great interest the question and answer about knees collapsing in Vol. 26, No. 2 ([www.post-polio.org/edu/pphnews/pph26-2sp10p7.pdf](http://www.post-polio.org/edu/pphnews/pph26-2sp10p7.pdf)). I had polio at age 1. I'm told that I made a full recovery and that our local doctor used me as an example of a "miraculous" recovery.

A graduate of the U.S. Naval Academy, I am now 63 and have had a normal, active life. Several years ago I noted a weakening in my right leg that has slowly gotten worse. I attributed it to sciatica. I had surgery for a ruptured disc in 2002. Last summer after about a year of relative inactivity (just got lazy), my right leg started to buckle and deteriorate rapidly. It even looks smaller.

I saw a neurologist and first heard about post-polio syndrome (PPS). He felt it could be PPS combined with my back problem and with myopathy caused by my mild type 2 diabetes. I went through a period of rehab and regained some strength. I decided to do exercises at home and walk every day. The buckling frequency has decreased, but I have fallen a time or two. A recent MRI of my legs was shocking. My right leg muscles are almost gone, and the space filled in with fatty tissue. I am amazed that my life has been so normal. My body must have compensated incredibly without my realizing it.

*The question is ... Can I regain some muscle*

*mass and strength through exercise? I would love to work my legs harder, but have heard that I could damage my muscles since they may not have the capacity to recover. Should I experiment with a strenuous routine to see if I can improve strength, or do I risk doing damage and further deteriorating my legs?*

**A:** Thank you for describing your history of polio and recent changes so clearly. Here are some thoughts about your situation and what you can do about it.

The large amount of fat seen in your thigh suggests a chronic gradual loss of muscle mass and is an expected result of muscle atrophy. It does not explain if the new atrophy is a result of nerve loss from your lumbar disc problem or from nerve loss due to PPS. Reduced activity will also lead to muscle atrophy from "disuse weakness," and this happens more quickly and dramatically in people who have recent and old nerve losses. Exercise can usually reverse much of the loss of muscle mass from disuse atrophy.

I would not recommend a "strenuous routine" of exercise. Instead, I would recommend you try a low-intensity, non-fatiguing

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exercise program to strengthen your thigh muscles. However, combine this with a careful monitoring (keeping a written record) of your walking activity, including a record of your “maximum walking capacity” done once weekly. This is best done on a level surface and done either as a timed test (how far you can walk in 6 minutes) or as maximum distance walked before there is muscle fatigue (muscle not as strong as when activity started or aching pain in muscle develops). The former is better from a time management standpoint if walking distances are fairly long.

Walking is an activity that does require repetitive strong use of the thigh muscles and does lead to slow strengthening of these muscles in and of itself. A walking program alone may be best for strengthening your thigh muscles. One has to be careful that strengthening exercises don’t interfere with, or necessitate a decrease in, your functional walking. Overuse weakness can occur in polio-involved muscles, especially such as in your weakening and atrophying thigh muscles.

If you experience increased ache and/or burning discomfort/pain in the thigh muscles, or increased/frequent involuntary twitching in these muscles or increased weakness (even of a temporary nature) then you **MUST** significantly reduce, but not stop, the intensity and/or duration and/or frequency of the exercise and/or walking. Given the relative complexity of the decision making involved in the above rehabilitative steps, I would recommend seeking professional advice from a physical therapist or exercise physiologist who is familiar with

post-polio issues. A professional can support and guide you through the above steps and help you plan for regaining as much strength as possible in your leg muscles.

**Question:** *I have seen advertisements for products that claim to “cure” PPS. From all I know, there is no cure. Do these products have any beneficial ingredients that may help us?*

**A:** One must always be skeptical of anything advertised as a “cure” for PPS, because it is a condition that almost certainly has many causes. Most advertised products are nutritional “super-supplements” and/or herbal remedies. What some of them may do is decrease or alleviate PPS symptoms in some people, particularly if they correct a deficiency that is producing their symptoms.

If disabling symptoms end and a polio survivor can exercise and become more active, they may even regain some lost strength and function. Remember PPS symptoms are not specific and can be imitated by many other conditions – from vitamin deficiency to depression to even early cancer. See *Post-Polio Health*, Vol. 25, No. 2 ([www.post-polio.org/edu/pphnews/PPH25-2sp09p4-5.pdf](http://www.post-polio.org/edu/pphnews/PPH25-2sp09p4-5.pdf)).

Regarding beneficial ingredients in advertised products: Most of these nutritional supplements contain some type(s) of antioxidants, which are compounds that have a neutralizing capacity on free radicals. Free radicals are circulating compounds in the blood and cells that are produced as a result of energy use by the body’s cells and

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have a destructive effect on cell health. All diseases and injuries, including vigorous exercise, increase free radical production, and the body requires more antioxidants to neutralize them and maintain stable cell health (also known as homeostasis). Anything that promotes antioxidant capacity and activity within cells is probably good for health.

Some products contain glutathione (GSH) or promote its production. GSH is the most powerful antioxidant that occurs naturally in all cells and is made by most cells. Probably any supplement, as well as certain foods and lifestyle behaviors that promote the produc-

tion of GSH, is helpful for maintaining good health. Nevertheless, specific studies are needed to document how valuable these are for health maintenance and potential disease treatment.

The best thing I can say about the use of the complementary and alternative medicine products, many of which are sold through marketing programs with questionable claims, is that they have little risk of harm and may have some benefit to individuals that can only be discovered by a “try it and see” approach.

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Send your questions  
for Dr. Maynard to  
[info@post-polio.org](mailto:info@post-polio.org).

### Statement of Policy

**APPA** and **APPA** News do not express or imply endorsement of physicians, products, seminars or services that are mentioned in this newsletter.

They are mentioned simply as a public service to polio survivors and those interested in them.

Articles reflect the opinions of their authors and do not necessarily reflect the official policy of the Atlanta Post-Polio Association.

The information provided herein represents what the authors believe they heard during the May and June, 2009, presentations at **APPA**. The authors are neither legally or medically trained and for these reasons may not have recorded an accurate accounting or understanding of the important details discussed. Neither they nor **APPA** assume any responsibility for the accuracy of the information provided. It is, therefore, highly recommended that all and any information provided be confirmed with an appropriate lawyer or physician before applying any of these legal instruments or medical treatments on your own. It is hoped that this summary serves to apprise the reader of available means to help them be prepared for the future.



# APPA 2010 Holiday Party

The 2010 **APPA** holiday party was held on December 4th at Brio's Tuscan Grille on Peachtree Rd. in Atlanta, GA. As always, it was a splendid event organized by our own Cheryl Hollis with assistance from her husband Jack. The group enjoyed a fabulous lunch consisting of Brio Chopped Salad, Lasagna Bolognese, Pasta Mediterranean, Chicken Milanese Pomodoro, Beverage and a Dolchino Sampler for dessert with choices of Crème Brulee, Tiramisu, and Cheesecake. Our social coordinator, Cheryl did her usual fantastic job getting things started with us all trying to have people guess what holiday item we were



Cheryl Hollis  
our party coordinator



Gloria Mims—Lifetime Member!



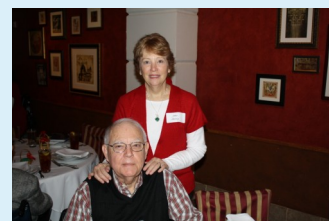
Thad Lewis



Nancy Truluck our faithful secretary



Longtime Board Member  
Charlotte Terry



Jean & Robert Abney



Lynda Dillman & daughters  
Lori & Amy



Mary Anne & Gordon Henderson



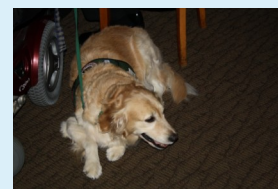
Linda Priest  
(also known as Penny's mom)



Irvin Massey & daughter Mary Jane



George & Marie Moore



Penny - **APPA's** "official" mascot

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as shown in our holiday card. Other games followed including a short term memory game. Me? I used to have a short term memory but I forgot where I left it! The group did a fantastic rendition of "Twelve Days of Christmas" with each sub group singing the day that corresponds to their birth month. By the second time thru "on the 3rd day" we were ready to take it into the recording studio. Thanks a million to Dennis McCaw for taking these great photos! We had a bigger crowd than last year and expect an even bigger one this year as folks realize what a terrific **APPA** event this is. Ya gotta be there!!



Jane Kilgore—a new member :-)



Yep, Lasagna *is* for dogs



Jean & David Jordan  
(check out that tie!!)



Laura Priest



We always have tons of door prizes



All the way from Brazil it's  
.....Roberto Moraes



Jack Hollis  
Does SO Much for APPA



Cathy McIntire - **APPA's** artist



Jim & Maurine Dorsey



Marcus & Sharon Gunter



Shannon Morgan's first holiday party. She'll be back!



Pamela & Calvin State

Continued on next page





All photos by Dennis McCaw

# Disability Day at the Capitol a Big Success!



Photo by Joe Drogan

The 13th Annual Disability Day at the Georgia State Capitol was held on February 24th. With well over 2,000 people with disabilities, their families and advocates attending it was a huge success. This marks the first time reservations had to be cut off at 2000 due to limitations of the Atlanta Railroad Depot where the free lunch was held. This was the 40th anniversary of the Georgia Council on Developmental Disabilities (GCDD) and the Developmental Disabilities Bill of Rights and Assistance Act. Georgia governor Nathan Deal's pledge to work with others to make sure we expand the opportunity to improve the quality of life for all Georgians in the disability community was the highlight of the event. "I promise you that I will work with others here to make sure we expand the opportunity to improve the quality of life for all Georgians in the disability community." - Georgia's Governor Nathan Deal.

Chairs and cold water were provided and the weather could not have been better! APPA was represented and we hope to have an even larger presence at next years event. Longtime **APPA** member Eleanor Smith received the The 2011 Samuel B. Mitchell Life Time Achievement Award "For a lifetime of Service to Georgia's Disability Community." Presented jointly by the Georgia Independent Living Network and the GA Council on Developmental Disabilities. Specifically, for work advocating "basic access in EVERY new home" (since 1987). Eleanor's organization is Concrete Change [www.concretechange.org](http://www.concretechange.org) and is featured in this issue of **APPA NEWS**.

Next year's event will be held on 2/16/2012 - mark your calendars.

By Joe Drogan



# Concrete Change

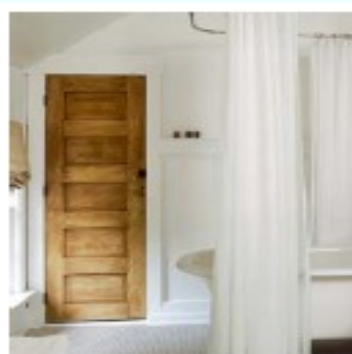
## Basic Access in Every New House

© Concrete Change, 2011

**The Status Quo: Barriers are the Norm—  
Even in New Houses!**



**Steps at all  
entrances**



**Narrow Bathroom  
Doors**

**The Goal: Basic Access in All New Houses  
(except the few unfeasible)**



**One ZERO-STEP entrance  
(at the front, side,  
or back depending  
on topography)**



**32 inches  
of clear  
passage space  
through doorways**

Continued on next page

**In spite of successes, the vast majority of new houses continue to be built with barriers.**

**Low Financial Costs of Basic Access in New Construction**

- Wide interior doors and a zero-step entrance, built on concrete slab: \$100 or less.
- Wide interior doors and a zero-step entrance, built over a basement: \$600-800

(Contact Concrete Change for costs statements by experienced builders)

**High Financial Costs of Continuing to Build Barriers**

- Typical costs of adding a zero-step entrance and widening doors on an existing house: \$10,000 or more.
- Typical cost of one year in nursing home: \$36,000, double occupancy.
- High medical costs of people who have developed mobility problems but lack resources to modify their unsafe houses: falls on entry steps, health consequences from lack of access to one's own bathroom, injuries to caregivers lifting family members, etc.

**More than half of houses built today will have a resident with a severe mobility impairment during the lifetime of the house. More than 90% of these houses will have a visitor with a severe mobility impairment.**

***It is not possible to predict which houses.***

**For more information, and to help create policies and practices that change the status quo, contact:**

Concrete Change  
600 Dancing Fox Road  
Decatur, GA 30032

[www.concretechange.org](http://www.concretechange.org)  
[concretechange@mindspring.com](mailto:concretechange@mindspring.com)  
404-378-7455

# The Polio Place

## A part of Post-Polio International The Polio Place is a great source of information for polio survivors

Have you explored [Polio Place](http://www.polioplace.org/), PHI's new additional website? Throughout the year, we will ask you to help add information to it. Let's start with photographs of useful devices that make living with polio easier. Have you created a device or purchased one that you would like others to know about? One goal of the site is to gather information that is useful to polio people now, but will also be useful to the younger polio survivors in the world who will need a "place" to help them live with polio. <http://www.polioplace.org/>

Home • Contact • About • [post-polio.org](http://post-polio.org)

Search

- People
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- Living With Polio

**FEATURED ARTICLE**


>> Post-Polio Health International's Post-Polio Directory

Post-Polio Directory is an extensive listing of self-identified groups and... [More](#)

**Submit your artifact**

Add some of your personal history to the Polio Place archive. >>

**polioplace**  
A service of Post-Polio Health International




**Welcome to Polio Place**

EXPLORE THE PAST, THE PRESENT AND HELP BUILD A PROMISING FUTURE FOR THE WORLD'S POLIO SURVIVORS.

- The past includes not only the story of the disease, but the story of its survivors.
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- Their future is influenced by their access to health care, social and governmental support, and medical and practical information from other survivors.

*photo credits*

**Artifacts**



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# Tech Bits & Bytes

By Joe Droган

HELP!!! I've got a huge problem, my computer GOT STOLEN !!! (Believe me it happens.) Now what? My first question always is "Do you have a backup?" I can't print some of the answers I get, I haven't been in trouble with the **APPA** censors in a while let's try an' keep


it that way. 😊 Recently a friend had one stolen with 20 years of writing on it. She's a published author. Good news is her machine had an automatic backup system on it. It backs up her system nightly at 7PM. That usually doesn't happen. Why? Because backups aren't done. Folks have more important stuff to do. Heck! "**Dancing with the American Idols**" is on tonight and that's gotta take priority. At least it does until a disaster occurs.

The experts say for critical things you can't afford to lose, a backup should be done to three different media types. For example, a second hard drive in your system, an external hard drive, burned to a CD or DVD, a flash drive, or on cloud storage. (Stay tuned to TB&B I'll be talking about cloud storage in a future article). At least one media type should be offsite at say grandma's house, a safe deposit box, or at work. Backups are only effective if you actually do them.

The best way costs a little money but is the most goof proof.



My favorite product for backups is the Acronis True Image software package. One thing I love about it is it can be free. You are going to need an external

hard drive to save your backup files. Western Digital (WD)  has cooked up a great deal with Acronis. If you buy or have a Western Digital external hard drive or have at least one WD drive in your system you can download a free copy of Acronis for WD software from the Western Digital support site. [WD support Acronis for Western Digital](#) How cool is that! The full true image product sells for around \$49.99 a WD external drive starts around \$49.99 soooo, kinda free! The Acronis WD edition can't be used to schedule automatic backups but it's only usually \$29.99 to upgrade to the full version which does and includes some other cool features too like email notification that a backup was done. The full version has a 30 day trial too. Plan on a drive at least twice the size of your internal drive.

Ok, here is what we can do with backup software. There are other similar products out there too.

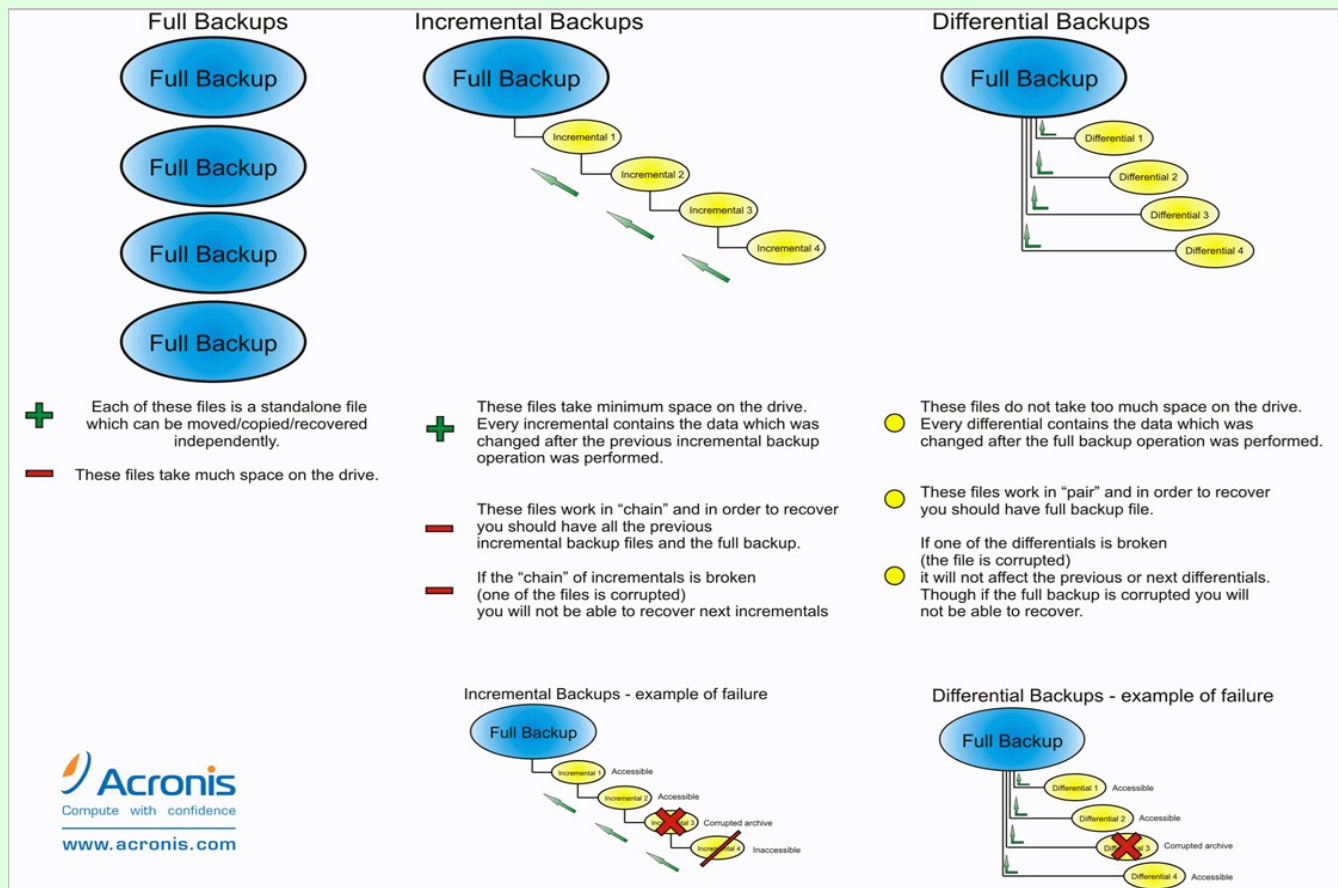
To start with you should make an image of your systems hard drive. I like to do this on brand new machines right "out of the box." This allows you to completely restore your system to brand new state. This method takes a "picture" of your hard drive. This is important for two reasons. One if all heck breaks loose you can go back to "day one" easily. Two if your hard drive fails you can just buy a new one, load your image on it and you're back in

Continued on next page



business. The new drive can even be a different brand and size (at least as big). Sure beats buying a replacement operating system disk.

OK so we have an image now what? There are three kinds of backups normally done full, incremental, and differential. The full type backs up all your files is the largest and takes the longest. An incremental backs up only files changed since the last incremental is the quickest and smallest file size. A differential backs up only files changed since the full backup. They get larger with each one. Make sense? Here is a graphic borrowed from Acronis for illustrative purposes.



Types of backups a picture is worth 1,000 words etc. ;-)

Incremental backups are risky because they form a chain and to recover using them requires they all be present and none of them are corrupted. As such I'll only talk about differential backups. Say you do a full backup on Sunday night. Then beginning on Monday you change only one file a day, called Monday-Notes, Tuesday-Notes etc... and do a differential backup and the end of every day. The Tuesday differential would contain Monday-Notes and Tuesday-Notes but the Friday differential would contain Monday-Notes, Tuesday-Notes, Wednesday-Notes, Thursday-Notes, and Friday-Notes since that's what changed since the last full backup.

What's backed up is important to understand because how you restore from them is to-

Continued on next page

tally different. Let's say you pickup a virus on Sunday morning after doing all the above. You have choices. Choices are good! You can get back to where you were on any day of last week by restoring from that days differential backup. So to get back to where you stood Thursday night you use Thursday's backup. Differentials aren't a chain. If Wednesdays is corrupt and you have Thursdays you're still ok. So why not just always do a full backup? It can be a long process depending upon the size of your hard drive and the file created is large. The differentials start out smaller but grow as you go along. Bottom line is your needs are unique. Most folks do a full then differentials until the differentials get running too long or get too big then they do a full backup delete most of the old differentials and start the differentials again.....

.....sorry 'bout that pause I thought it'd be good to save a copy of this on the Penguin Labs server as a backup, it's on the cloud too. It's also auto saved by Word on this system every few minutes. It'd be embarrassing to lose an article on backups while writing an article on backups. Yikes!!!



OK to summarize: Image your system, do a full backup, do differential backups, say once a week or, if necessary, nightly.

### **Any backup is better than no backup department.**

At the very least you can buy a fairly inexpensive flash drive also called a USB stick, or thumb drive. See [TB&B August 2008](#) (holy cow I've been writing this column since then!) Backup My Documents or Documents, My Pictures if you always follow Windows default for saving things you can backup those folders to the flash drive, CD, external drive etc. Email is a little trickier to backup, probably an article in itself. Save photos to a consistent location like My Pictures in Documents or My Documents. Then most of your stuff will be backed up but not your operating system and settings. The main problem with this method is remembering to actually do the backup. Still don't feel like doing backups? Consider this. The folks that do support work like trying to restore your crashed computer charge \$85/hr and even more for "house calls." The "clean room" labs that recover a blown hard drive charge \$1200 and up!

I'm thinkin' maybe I should "un-retire"



Until next time - **Happy Computing!!!**

**Disclaimer:** Neither APPA or the author of Tech Bits & Bytes have any financial interest in or a business relationship with Acronis or Western Digital. The recommendations herein are simply based upon very good experience with these products.

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May 7	"Rap" Session
June 4	"Medicare and Power Mobility" with David Kreutz of the Shepherd Center&
	"Complex rehab Technology Conference Recap" with Linda Priest of ADA Consulting Services
July	No meeting - summer break
August 6	BINGO - off site at a restaurant
September 10	"Disability and Taxes" with Alicia Allen - Liaison with the IRS
October 1	Dr. Donald Leslie
November 5	Annual Business Meeting
December	Holiday Party

**Shepherd Center Auditorium, 7th Floor**  
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