



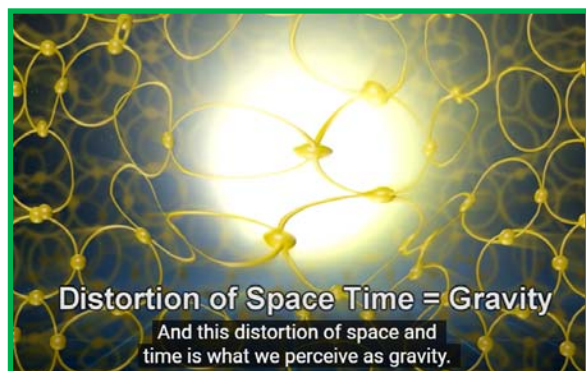
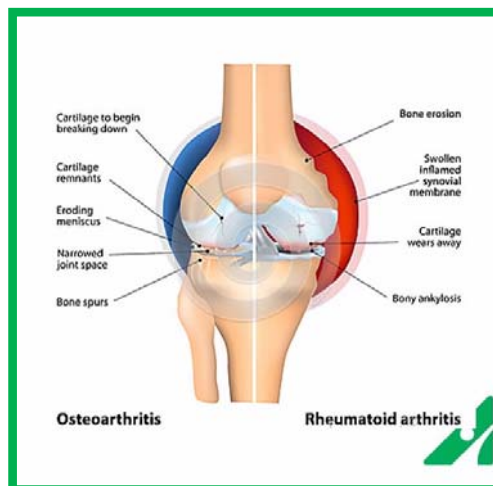
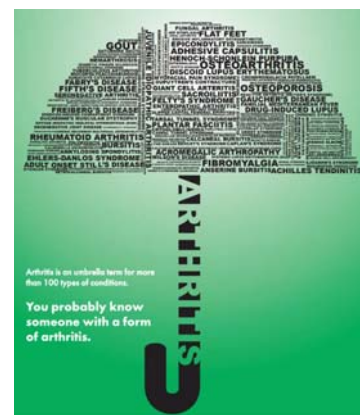
# APPA NEWS



## The Atlanta Post-Polio Association

Volume 38, Issue 3

Winter 2023



Distortion of Space Time = Gravity

And this distortion of space and time is what we perceive as gravity.

### APPA Quiz

$$\begin{aligned} & M^2 W_\mu^+ W_\mu^- - \frac{1}{2} \partial_\nu Z_\mu^0 \partial_\nu Z_\mu^0 - \frac{1}{2\alpha_h} M^2 Z_\mu^0 Z_\mu^0 - \frac{1}{2} \partial_\mu A_\nu \partial_\mu A_\nu - i g_{cw} (\partial_\nu Z_\mu^0 (W_\mu^+ W_\nu^- - W_\mu^- W_\nu^+) - Z_\mu^0 (W_\mu^+ \partial_\nu W_\nu^- - W_\mu^- \partial_\nu W_\nu^+) + Z_\mu^0 (W_\nu^+ \partial_\mu W_\nu^- - W_\nu^- \partial_\mu W_\nu^+) - i g_{sw} (\partial_\nu A_\mu (W_\mu^+ W_\nu^- - W_\mu^- W_\nu^+) - A_\nu (W_\mu^+ \partial_\mu W_\nu^- - W_\mu^- \partial_\mu W_\nu^+) + A_\nu (W_\nu^+ \partial_\mu W_\nu^- - W_\nu^- \partial_\mu W_\nu^+) - \frac{1}{2} g^2 W_\mu^+ W_\mu^- W_\nu^+ W_\nu^- + \frac{1}{2} g^2 W_\mu^+ W_\mu^- W_\nu^- W_\nu^+ + g^2 c_w^2 (Z_\mu^0 W_\mu^+ Z_\mu^0 W_\mu^- - Z_\mu^0 Z_\mu^0 W_\mu^+ W_\mu^-) + g^2 s_w^2 (A_\mu W_\mu^+ A_\mu W_\mu^- - A_\mu A_\mu W_\mu^+ W_\mu^-) + g^2 s_w c_w (A_\mu Z_\mu^0 (W_\mu^+ W_\mu^- - W_\mu^- W_\mu^+) - 2 A_\mu Z_\mu^0 W_\mu^+ W_\mu^-) - \frac{1}{2} \partial_\mu H \partial_\mu H - 2 M^2 \alpha_h H^2 - \partial_\mu \phi^+ \partial_\mu \phi^- - \frac{1}{2} \partial_\mu \phi^0 \partial_\mu \phi^0 - \beta_h \left( \frac{2M^2}{g^2} H + \frac{1}{2} (H^2 + \phi^0 \phi^0 + 2 \phi^+ \phi^-) \right) + \frac{2M^2}{g^2} \alpha_h - g \alpha_h M (H^3 + H \phi^0 \phi^0 + 2 H \phi^+ \phi^-) - \frac{1}{8} g^2 \alpha_h (H^4 + (\phi^0)^4 + 4 (\phi^+ \phi^-)^2 + 4 (\phi^0)^2 \phi^+ \phi^- + 4 H^2 \phi^+ \phi^- + 2 (\phi^0)^2 H^2) - g M W_\mu^+ W_\mu^- H - \frac{1}{2} g \frac{M}{c_w} Z_\mu^0 Z_\mu^0 H - \frac{1}{2} i g (W_\mu^+ (\phi^0 \partial_\mu \phi^- - \phi^- \partial_\mu \phi^0) - W_\mu^- (\phi^0 \partial_\mu \phi^+ - \phi^+ \partial_\mu \phi^0)) + \frac{1}{2} g (W_\mu^+ (H \partial_\mu \phi^- - \phi^- \partial_\mu H) + W_\mu^- (H \partial_\mu \phi^+ - \phi^+ \partial_\mu H)) + \frac{1}{2} g \frac{1}{c_w} (Z_\mu^0 (H \partial_\mu \phi^0 - \phi^0 \partial_\mu H) + M (\frac{1}{c_w} Z_\mu^0 \partial_\mu \phi^0 + W_\mu^+ \partial_\mu \phi^- + W_\mu^- \partial_\mu \phi^+) - i g \frac{1}{c_w} M Z_\mu^0 (W_\mu^+ \phi^- - W_\mu^- \phi^+) + i g s_w M A_\mu (W_\mu^+ \phi^- - W_\mu^- \phi^+) - i g \frac{1-2c_w^2}{2c_w} Z_\mu^0 (\phi^+ \partial_\mu \phi^- - \phi^- \partial_\mu \phi^+) + i g s_w A_\mu (\phi^+ \partial_\mu \phi^- - \phi^- \partial_\mu \phi^+) - \frac{1}{4} g^2 W_\mu^+ W_\mu^- (H^2 + (\phi^0)^2 + 2 \phi^+ \phi^-) - \frac{1}{8} g^2 \frac{1}{c_w^2} Z_\mu^0 Z_\mu^0 (H^2 + (\phi^0)^2 + 2 (2s_w^2 - 1)^2 \phi^+ \phi^-) - \end{aligned}$$

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**Annual contributions help to educate the public and health care community concerning polio. We respond to the needs of individuals who suffer from post-polio syndrome through group meetings, educational programming, newsletters, and advocacy. APPA is a 501(c)(3) nonprofit corporation. All contributions are tax deductible.**

**To contribute and join APPA, see back page.**



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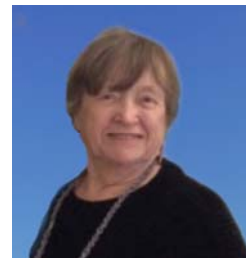
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## President's Message

It was my pleasure to attend a virtual polio conference which was sponsored by the March of Dimes-Canada, October 24, 2023. The program was called, "Polio Canada, Past, Present and Future". There were 74 participants logged into the program including one from Scotland. Locally, participants included Shirley-Dukart Green, Paul Suwak, Gloria Mims, Ollie Harrison, Darrel, and me. The leaders of this program stressed that there will be continued support for polio survivors from the Canadian government in regards to disability financial support.

Speakers for the program included Dr. Hannah Wunsch, an intensive care physician, who traced the history of polio in her book, "The Autumn Blast". Recognition of disability problems with health care was the result of polio survivors. Professor Mike Kassove of the School of Health at Touro University, New York gave a detailed description about the polio virus and provided information about the Iron Lung and how it functioned. Susan Schoenbeck, RN from Arizona and author of "Polio Girl", stressed the importance of a ritual for a peaceful life for polio survivors. Rituals calm us during uncertainty and help us restore confidence to our life. Programs include gardening and reading books. Rituals also soften grief and bring closure to our evenings.



Three different polio survivors discussed their life situations after contacting the polio virus. One discussed her life as a single woman. One was a lawyer who was the caregiver for his wife while practicing law and the other was a woman who developed a facial paralysis and legs that did not work properly but maintained a positive life style.

Additional information can be obtained through a paper submitted to the JAMA, July 26, 2000 called "Characteristics of Post Polio Syndrome" by Buck Jubelt, MD and James Cagre, MD. For assessing pain, the invisible long-haul polio symptom consult [tinyurl.com/47cmdz4d](https://tinyurl.com/47cmdz4d) and Growing Older with Post-Polio Syndrome: Social and Quality of Life Implications, 2018 at [tinyurl.com/y73ejhbn](https://tinyurl.com/y73ejhbn)

The conference has been posted on YouTube. The program was wonderful and well worth four hours of our time.

**Future programs** for APPA include a Zoom presentation about musical therapy for healing to be held February 3. In addition to virtual meetings we would like to have gatherings at local restaurants. For this purpose, please recommend accessible restaurants in your area and our program team will work with you to set up an event.

## From the Editor

Quite a few of us polio survivors have mentioned that despite the remnants of polio we are determined to overcome that word “can’t”. You see below, not only do I have a flying carpet for myself, but we’ve now developed the family model. It occurred to me that for centuries, people were pretty content with a candle and few thought they needed much more than the gas-lights. I think we’ve needed something better than a power chair and so I continue to promote the idea of flying carpets. I have expanded on my thoughts and researched a bit more into gravity and quantum physics. AND you never tell a polio person they can’t. See page 25. (If you know any quantum physicists please pass this on.) The fun part is picturing it. My daughter was able to herd a few of the kiddos on to the rug, try to keep them still, or rather have a phone camera to catch them mid-movement, then she created this prototype.



Among other miracles is managing to put out a third issue of APPA News for year 2023. Thanks in huge part to all of you who contribute to the each issue. Thanks also to Joe Drogan for taking over the APPA mailing list and advising me on how to do make that work—also for his wonderful Grace story in the Fall issue. Thanks to Rita for planning such interesting events for the Zoom meetings first

Saturdays of each Month. Thanks to the presenters who give us permission to use a few slides in our Highlights of APPA Zoom meetings. Since the last issue we had three Zoom meetings. These are archived via Events on our website. A few highlights start on page 5: September on Arthritis, October on Medicare and in November traveling and bell ringing.

In this Winter issue the “Getting to Know Us” series introduces us to Nancy Truluck and Leo Roszkowski. Thanks to them for writing up their stories for us.

Special thanks to Alan Obrdeck. After his story last year, I bought one of his books: *Lost in the Shadows*. I happened to be carrying the book when my always-had-been-healthy husband went to the ER and then got admitted for a week in the hospital. This book carried us away to a better place (as good books do). Since then Alan has kindly given me a new story each week to read to Steve while he is undergoing chemotherapy. Many of the stories are published in his book: *Stories Told by Traveling Salesmen*. So this issue, we are sharing one of the chapters with you all, starting on page 26.

Have fun,



Nancy Winter

## Highlights of APPA Events; September, October and November

**September 9, 2023 One Hundred Types of Arthritis** <https://www.ncoa.org/author/nick-turkas>

Nick Turkas presented information about arthritis research programs. As a non-profit professional for more than 20 years at the Arthritis Foundation, Nick Turkas, MS, Sr. Director of Health Promotion & Community Connections, has designed and managed local, regional, and national programs and services with measurable results. He oversees the Arthritis Foundation's signature physical activity program Walk with Ease programs and manages relationships with national non-profits, academic institutions and healthcare professional societies.

Mr. Turkas earned a bachelor's degree in public relations and a master's degree in human services management.

We learned so much. Who knew there are 100 types of arthritis. All of our aches and pains might be one version of arthritis. The good news is that the Arthritis Foundation has it all covered with website, books, webinars, podcasts, support groups and much more. Watch the entire Zoom Meeting on our "Archives of Past Events" which takes you to the APPA YouTube Channel.

A quick way to tell a difference between Rheumatoid- and Osteo-arthritis is the mirror effect. In RA if you have arthritis in one hand you have it in the other. In OA just a joint on one side might have arthritis.

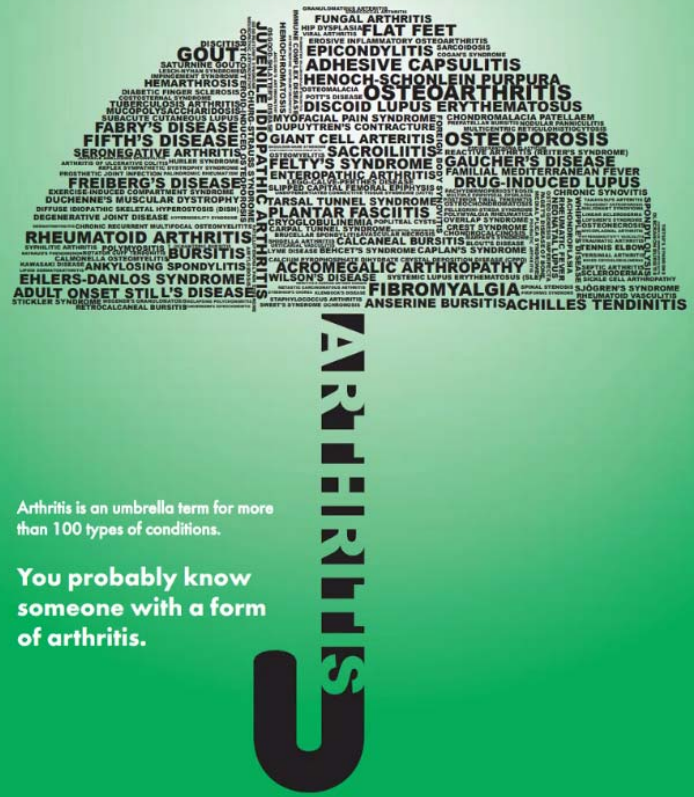
The Arthritis Foundation has two ongoing trials: one is to see how Medforman might reduce incidence of OA after traumatic injury to a joint. The other trial is working toward precision medicine for different blood types. There are different RA meds available but one needs to have the right one for that blood type.

Make sure also to listen to the end. This is where we learn so much from each other. Like, sugar is a major arthritis trigger. The way to stop sugar cravings is to limit added sugar and eat fruit instead. To stop a salt craving, try drinking more water. Some of us are starting to use a back-brace or corset for back weakness. Watch the video for more very useful information.

Here are two slides from his presentation:

## What is arthritis?

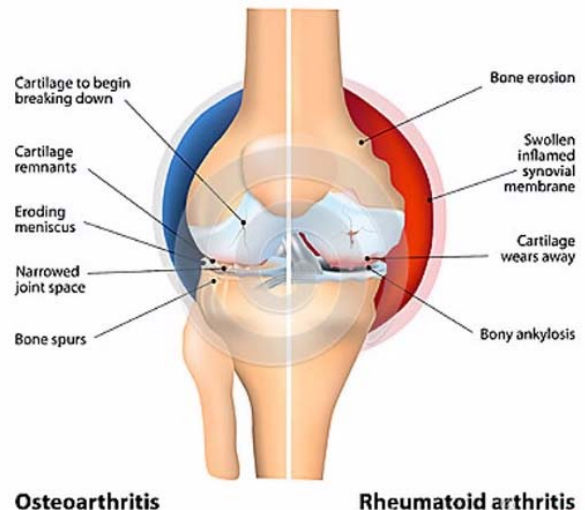
- Arthritis is not a single disease; informal way of referring to joint pain or joint disease
- Over 58.5 Million Adults live with at least one form of arthritis diagnosed by a physician.
- 300,000 Children
- **100+ Different Types:** Rheumatoid, Lupus, Gout, Plantar Fasciitis, Fibromyalgia, Bursitis, Osteoarthritis, Osteoporosis, Raynaud's, Scleroderma, Tendinitis, Degenerative Disc, Juvenile Idiopathic Arthritis, Carpal Tunnel...



## Arthritis 101

### Core 6

- Osteoarthritis
- Rheumatoid Arthritis
- Psoriatic Arthritis
- Axial Spondyloarthritis
- Gout
- Juvenile Arthritis



## Highlights of APPA Events, Continued

**October 7, 2023 Medicare—Medicaid by Shirley Thomas** This Zoom meeting had most of us scribbling down notes as Shirley once again had information about the changes in law that has impact on our plans for 2024. Only at the end did she mention slides. The slides weren't showing while she was talking and we marveled how she could keep so much information in her head. Thankfully she has put her slides on our website and a few are offered for print in this issue. HUGE CHANGES, some sound pretty good to me. You don't want to miss this. SHIP is a great resource for us. Please call or email if you want some advice as to your plan (Parts A, B, C and D, etc.) for next year.

The following additional resources was mentioned in the chat.

DIAL : disability information and access line 888-677-1199,

National Paralysis Resource Center 1-800-539-7309

[ChristopherReeve.org](https://www.ChristopherReeve.org)

### Getting Ready for Medicare OEP: Common Questions

Shirley Thomas, Certified Medicare Counselor  
470-552-3162

September 2023



## Medicare Innovation Projects

What they do:

Help find new ways to improve health care quality and reduce costs

Operate for a limited time and for a specific group of people and/or are offered only in specific areas

Examples of current models include:

Accountable Care Organizations (ACO) Realizing Equity, Access, and Community Health Reach Model

Comprehensive Care for Joint Replacement Model

Kidney Care Choices Model

Enhancing Oncology Model

Primary Care First Model

These models seem to relate to the ideas we've discussed in APPA recently. See: <https://www.cms.gov/priorities/health-equity/c2c/manage-your-chronic-condition>

This might be helpful to post-polio & long-covid folks.

**The Grant by Dr. Strasser and colleagues was awarded!!!**

## LINET

- Provides immediate prescription coverage for Medicare beneficiaries that qualify for Medicaid or LIS and have no other prescription drug coverage.
- Pharmacist can submit the medication claim directly to LINET
  - Will ask for evidence of eligibility
- LI NET SHIP Line: 1-866-934-2019
  - Dedicated for SHIPs, Caseworkers & Medicaid Ombudsman Offices
- CMS contract for LINET is managed by [Humana](#)

## IRA Changes to LIS in 2024

- Starting January 1, 2024, the full LIS income limit will increase from 135% FPL to 150% FPL
  - Anyone receiving partial help will now be eligible for full help
- Everyone that qualifies for LIS will:
  - Have \$0 monthly premium
  - Have \$0 annual deductible
  - Pay reduced prescription copays at the pharmacy

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## IRA & Insulin

- Beneficiaries will pay no more than \$35 for a one-month supply of each covered insulin:
  - For Part D covered insulin change was effective January 1, 2023
    - It doesn't matter which tier the insulin is on
  - For Part B covered insulin change was effective July 1, 2023
    - Part B covers insulin when it is taken via a pump which is considered durable medical equipment (DME)
- Plan deductible (if the plan has one) will not apply to covered insulin
- For Part D – Insulin still must be on the plan's formulary

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## Highlights of APPA Events, continued

### November—Barbara Mayer

Barbara was born in Santa Monica, California. In 1954, at the age of 22 months, she contracted polio while living in Phoenix. Polio affected her from the waist down, and she ended up wearing a long leg brace on her right leg and using crutches as needed. She was selected as the March of Dimes Poster child for Maricopa County in 1956.

After attending public schools, Barbara received her Nursing degree from the University of California at San Francisco. She began her 40-year career working at an acute care hospital in Santa Barbara; half of her time was caring for adult medical/surgical patients and the other half was in Nursing education.

As the effects of post-polio weakness increased, Barbara retired in 2013 allowing her to spend more time pursuing her interests of traveling, music, volunteering, and spending time with friends and family. Barbara lives in Clermont with Brad, her husband of 36 years, and their cat. She has a daughter, a son, and two talented granddaughters. She joined APPA in 2009 and served on the APPA board from 2014-2022.

Barbara's November 2023 APPA Zoom presentation is archived under "Events" on our website:

<https://www.atlantapostpolio.com/>.

We always learn a lot, especially from each other. A few highlights:

She and Brad have travelled a lot. Their European trip was featured in the APPA News a few years ago. This picture is the method of mobility they used for most of the trip.



Finding bathrooms when you travel can always be difficult. Barbara showed one of the inconsistencies: A very useful design for toilet bars.



The problem was where it was located...

.... many of the handicap facilities were to be found down a flight of stairs.



Barbara performs regularly in a bell ringers group. This is a sample of ringers instructions along with the music notes. She demonstrated how these symbols translate into very specific sounds. Really cool.

<b>Ringing</b>		<b>Table Malletting</b>		<b>Echo</b>
<b>R</b> Ring	+	Handbells malletted while lying on a padded table.	+	On subsequent beats of a long note, lightly touching a handbell against a padded table as it continues to ring.
<b>LV</b> Let Vibrate	+	<b>Mallet Lift</b>	+	<b>Gyro</b>
Allowing the handbell's sound to continue until another LV, an R, or a damp (⊘) is encountered.		Table malletting, but with the handbell quickly raised afterward to continue the sound.		Slowly tilting and rotating the handbell vertically as it rings.
<b>RT</b> Ring Touch	+	<b>Mallet Roll: On Table</b>	+	<b>Roll Chord</b>
A short ring and damp in quick succession, close to the shoulder.		Rapid repeated malletting like a drum roll. The handbell remains on the table.		Rolling the notes of a chord in order from bottom to top.
<b>Damping</b>	+	<b>Mallet Roll: Suspended</b>	+	<b>Shake</b>
<b>Damp</b>	+	Rapid repeated malletting like a drum roll. The handbell is suspended in some way.		Shaking with a rapid but controlled back and forth wrist movement. The clapper strikes both front and back of the handbell casting.
<b>BD</b> Brush Damp	+	<b>Martellato</b>	+	<b>Trill</b>
Brushing the handbell down against the chest after ringing for a soft semi-damp.		Controlled "punching" of the handbell into the foam of a padded table. "Place not play."		Rapid ringing of two adjacent bells.
<b>HD</b> Hand Damp	+	<b>Martellato Lift</b>	+	<b>Swing</b>
Ring stopped by putting a hand on the handbell casting.		Quickly raising a handbell after a martellato for continued sound.		Ringing followed by swinging the handbell down, over to and behind the ringer, then back to regular position. The full arm is used.
<b>TLD</b> Table Land Damp	+	<b>Hand Martellato</b>	+	<b>vib.</b> Vibrato
Flourish; ring stopped by turning the handbell over (thumbs down), and standing it vertically.		Gripping the casting of the handbell (rather than the handle) in a martellato.		Gently waving the handbell side to side as it rings.
		<b>Muted Martellato</b>	+	<b>Miscellaneous Notation</b>
		A martellato with one or two fingers on the handbell's casting. Rarely seen outside of solo ringing.		<b>HC</b> Handchimes
		<b>PL</b> Pluck		Indicates notes in the music to be rung with handchimes.
		Throwing the handbell clapper against the casting while the bell remains on the table.		<b>HR</b> Handbells
		<b>TPI</b> Tap Pluck		
		Tap plucking the table.		



Visit other free zoom meetings and meet polio survivors around the world

**Yoga For You, Quebec**  
<https://us02web.zoom.us/j/9022259642>  
**First Tuesday 1- 2:30 PM Eastern**  
 South Denver, CO PPSG-Hal Goldberg, PhD  
 303-212-0017 or [halgoldberg@halgoldberg.net](mailto:halgoldberg@halgoldberg.net)

**Tuesdays 7 - 9:00 PM Eastern**  
**Polio Quebec - Mona Arsenault**  
<https://us02web.zoom.us/j/3776897370?pwd=VnZSMW4vYV1uUWx6QXN3aFZMc0Y5QT09>  
 Password: 3500

**First Wednesday 12 - 2 PM Eastern**  
**PPSG of Dallas Area, TX - Maggie Whitehead**  
 Meeting ID: 501 308 4368 Password: NTXPSPG

**Wednesdays 2 - 3:30 PM Eastern**  
**March of Dimes Canada - Kimberly Smith**  
 must register first -  
<https://www.marchofdimes.ca/en-ca/programs/Pages/Online-support.aspx#polio>

**First Thursdays (Qtlly) 4:30-6 PM Eastern**  
 8/3/2023, 11/2/2023, 2/2/2024, 5/4/2024, etc.  
 Marin County Polio Survivors, CA - Francine Falk-Allen [francineallen@comcast.net](mailto:francineallen@comcast.net) for info/links

**Second Thursday 12 noon - 2 PM Eastern**  
**Boca Area Post Polio Group, FL - Maureen Sinkule**  
<https://us02web.zoom.us/j/8319989241?pwd=dEw1c0QvZUElRGRGQkZUUGZ6emJUT09> Password: 1996

**Fourth Thursday 10 - 11 AM Eastern**  
**Rotary Post-Polio Syndrome Advocacy Group - Ina Pinkney**  
[PPSadvocacy@gmail.com](mailto:PPSadvocacy@gmail.com) - to get link/emailing list  
<https://lnkd.in.e4QbpQm6> Password: PPS

**First Saturday 1-3 PM Eastern**  
 (no meeting Jan & July; July - 2nd Saturday)  
**Atlanta Post Polio Assn., GA - Rita Carlsen**  
<https://us02web.zoom.us/j/8487424782?pwd=MUdaRic5ZEoKQ0ZlNWpYbnR5SHFpdz09> Password: 415481

**First Saturday (Qtlly) 2:00 - 4 PM Eastern**  
**Sacramento Region Polio Survivor Group, CA**  
 Dec., March, June, Sept. (2nd Saturday)  
 Larry Badger - [lbadger@badsound.com](mailto:lbadger@badsound.com)

**North Denver, CO PPSG-Jill Eelkema, LCSW**  
 720-657-9902 or [jille@westerncarepartners.com](mailto:jille@westerncarepartners.com)  
**Third Saturday 1:30 - 3 PM Eastern**  
**PSG San Gabriel Valley & W. Inland Empire, CA - Marci Ellison**  
<https://us02web.zoom.us/j/81428179432>

**Third Saturday 1:30-4:00 PM Eastern**  
**San Francisco Bay Area Polio Survivors, CA - Stella Cade - stellacade@aol.com**  
<https://us02web.zoom.us/j/84417410304?pwd=bXY3ZTE0Q1k0dUdKZF5SHNhhSkQT09>  
 Password: 475508

**Fifth Saturday 12:30-2:30 PM Eastern**  
**Colorado Post Polio State Wide, CO**  
 2024 TBD  
 Mitti Tolman - [mtolman@eastersealscolorado.org](mailto:mtolman@eastersealscolorado.org)  
 Must register first -  
<https://us02web.zoom.us/j/84417410304?pwd=bXY3ZTE0Q1k0dUdKZF5SHNhhSkQT09> Password: 143756

**First Sunday (ex. Holiday wknds), 3-5 PM Eastern**  
**Nebraska Polio Survivors Assn. - Steve Jackson**  
<https://us02web.zoom.us/j/87943273835?pwd=M2M0d0R0eNk0ZkZlNWpYbnR5SHFpdz09> Password: 143756

**First Monday, Sunday 7 PM Eastern**  
**Australia Polio Community-Devalina Bhattacharjee, MD**  
[www.aixbookings.com/BOBOW](http://www.aixbookings.com/BOBOW) to register

**DON'T BE LEFT OUT - IT IS SIMPLE TO 'ZOOM'**

I'm happy and available (except BAPPG meeting day) to provide 'zoom' trial-runs. Maureen 561-617-4450.

If for some reason you cannot make APPA's Saturday afternoon Zooms, I encourage you to visit with some of these other PPS groups. As I write this I'm awaiting 7pm to go to Australia. It's Sunday evening here, but in Australia it's already Monday morning. How cool is that?

To get updates on these Zoom meetings sign up with the Boca Area Post-Polio group monthly newsletter: [postpolio.wordpress.com](http://postpolio.wordpress.com)

P.S. I joined the Australia meeting. The speaker lives now in Arizona. But her polio was in Milwaukee (my home town). Small world.

We want your story to appear in the  
“Getting to Know Us Series” next year,  
what are some of the things you could say?

(We are here to help you talk about it, write it and edit it)

First you could introduce yourself

A little background information

Then the year you came down with polio

Your earliest memories

The areas affected

The treatments you remember

The way you remember you were treated by other children

The way that the after effects slowed you down, or not, and how you  
coped with them

Some funny things you did or that happened to you

How you kept yourself busy for the past 5 or 6 decades

The way polio might affected your work career

Did the fact that you had polio have an effect on your "social Life" and  
how girls or the boys saw you?

Tell us about your family

When you began to feel the effects of the post polio syndrome

Some interesting things you did

Why & how you settled in Georgia

How you found out about APPA

Some words of wisdom you would like to share

How you are doing with post-polio Pictures of you at various ages and maybe a creation,  
art, or hobby to show us.



The Getting to Know Us Series for Winter 2023,  
proudly introduces

**Leo Roszkowski and Nancy Truluck.**

Please turn the page.

## Leo Roszkowski      Polio Graduate circa 1961

Good day to everyone. I was born in 1958, Connecticut. I know very little bit about when or how I acquired polio. There are only a few things I remember about my polio experience. One thing I do remember is that I had to wear braces, and I am not sure if it was one leg or both. I remember going to the doctor and putting my leg in this whirlpool, which was a large metal tin with whirling water. I remember that I had polio when I started kindergarten because I rode a special bus to bring me home. When my family moved to another part off Milford at the beginning of the school year, my braces were removed as I was entering third grade.

My parents both came from Poland, and based on my readings, I assume there was a disgrace when your child had polio. My parents really didn't talk to me much about anything. They used to point out to me a man who walked down the beach: he had polio and one of his legs very thin and I was told that I needed to drink a lot of milk so I



wouldn't get to be like him. That was probably the only big push doing anything regarding polio. They never said the word polio to the best of my recollection. I also don't think I had any restrictions once I had the braces off.

Later in my grammar school years, I actually was on the baseball team, played the sport, and everything seemed as if I had no abnormalities. My life growing up seemed like a regular kid: no limitations and nothing ever spoken about my condition by my parents. I can look back and remember no physical signs or disabilities at that time that would make me question having polio.

I remember being a paper boy and started

out delivering one paper. As time progressed, I got a second newspaper, then I got a third paper. The result was if you wanted any of the three local papers, it was to get them from me or no paper at all. I remember saving up and getting a Schwinn 10 speed bike, which was a big deal back then.

I went to a technical high school for machine tool and die which I do strongly encourage. I wish there was more I could do to motivate school systems or the state governments to make more of them because it was a high school and a trade school: half a year trade school and half a year academics. As I was going to that school, I worked at a meat market and I know I abused my body at times though almost everybody working there did. We actually had to pick up hind quarters of beef and carry them to the scale, put on and then off and put it on a butcher block. I'm sure that was a part of starting my body down the road of deterioration.

However, a quick dabble into political life: I ran for Alderman for the City of Ansonia, Connecticut. I won the most votes, but somehow lost to the other guy who had the local connections. Thankfully, the wife of a man in the meat market happened to be Mayor at that time so she declared October 14, 1999 as Leo Roszkowski day. So that

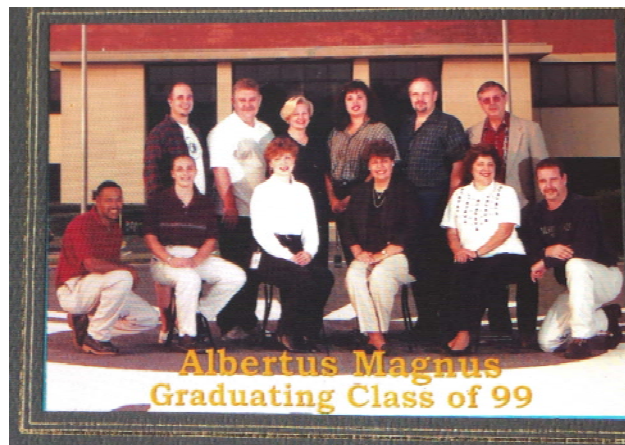
was a better thing in the end. ....  
We never know where God takes us.



After trade school, I went to work at Sikorsky Aircraft, building aircraft parts and doing assembly work. It was an exciting time to be working there. Sikorsky Aircraft had won a government contract to produce their helicopters. I was in my early 20's when they hired me among the first 100 people. I was blessed to get on board that first year before they hired many more. I worked there 30 years. I started as machine operator, promoted to the lead position, and later promoted to supervisory role. In that department we made critical rotor parts that

attach the blades to the helicopter. It was wonderful working with a team. In the first year, before they started second shift production, we used to go see the finished helicopters and enjoy seeing the parts that we had made in our department. Later I was on a team in the designing and serialization of parts. All the positions were exciting. In the machine shop I was go-to for all kinds of projects and being in the work cell we were in. we were the guinea pigs—so we'd move machines around to reduce process and cost.

To get promoted we had to have a degree, so I went to college in a program for working adults. After six years I got Associates, Bachelors, and finally the Master in Mechanics Here's my graduating class picture.



I'm the taller one here

Sikorski Aircraft started outsourcing for parts. Sharon my wife and I had planned on moving down south after retirement, but based on the business, climate, and outsourcing, that life change process started a little earlier. We went to visit my daughter in South Carolina, and started looking around to see what it was like to live in the South

We found a house we really liked and decided to make the move. I had a certain timetable but Sharon was blessed to get a teaching job within a week. So she moved into that house while I stayed in Connecticut while our house was being sold and finished off my time at Sikorsky. We would never think someone having worked 30 years in one place would see there were so many job choices down in South Carolina.

Of course we moved down in 2008 when the economy was beginning to decline. I worked at Walmart as a front guy, and then as a manager, at a company that made drills. Then a place that made catalytic converter parts, another one making ceiling fire extinguishers, and finally a place that made transmissions for cars. Worked with Gideon's handing out Bibles. Times & Seasons for all things.

But the most important part of my life was spiritual. God showed me some things that I have been doing wrong, and seeking a

fellowship that coincided with my new beliefs and journey, we first visited a fellowship in Georgia. I can say it this way for people to understand: there are many people that feel God calls them to the mission field going to Africa or Ukraine or Russia. I can relate to that. When people ask why I moved to Georgia, I use that explanation.

So when we transitioned, we first purchased a mobile home in Georgia. My wife was retired, so we moved her to Georgia while I stayed in South Carolina as our house was being sold. Of course we used movers to move 98% of our furniture and boxes. I kept a very minimal amount in the bedroom where I slept. When the house sold, I started to move what little was left with a rented van. I made three trips to Georgia and that is when my health rapidly deteriorated.

As I understand from doctors and testimonies, a traumatic event can be one way that **post-polio becomes evident and rears its ugly head**. I foolishly tried to find a job, but my health was so bad I couldn't find what I was hoping I could do.

During that time I had drop foot and numbness in my midsection so I couldn't stand from within a minute or two maybe five if I was fortunate. I went and saw some general practitioners during this time of not

working, as well as researching as I was somehow prompted, and I believe it was a God moment regarding post polio.

I saw a doctor who furthered my post-polio understanding and told me about APPA. Still, even with my health issues, I was able to get a job, with ACH Foam in Gainesville, which was a blessing because it allowed us to move into our house.

Unfortunately, as I worked, my condition got worse and worse, and that's when surgeries started. No other doctor recognized post-polio

when I mentioned it. They all seemed to be ignorant of this abnormality. My first experience started with a knee replacement and not being able to go back to work. I was encouraged to file for disability, which was a new concept for me.

During the battle of my disability claim, I also had a hip replacement, two back surgeries, and fusions that removed the numbness in my midsection. Unfortunately it didn't relieve the noticeably other pain - muscle fatigue pain in my hips and my legs associated to post polio,



Leo at APPA Luncheon 2023

I have now been identified as disabled by Social Security and I am still in that condition. After having recently fallen once on my side going down a ramp, I went to an orthopedic surgeon, who now declared my other hip was a candidate for replacement. Fortunately, he recommended Cortisone shots as an attempt to relieve some of the pain, making it somewhat acceptable. I also returned to the back surgeon as my back conditions were getting worse, and that also confirmed I was a candidate for surgery. He also recommended I try Cortisone shots first.

An interesting thing is going back to a few points when I had post polio. When I had drop foot, a nerve activity test was done on both legs, and a doctor in Atlanta used that data to confirm that I had polio. Also, when I

had to have hip surgery, my predominant polio side showed my hip was deformed, eliminating all possible variables. Post polio has been my diagnosis since the doctors have not found any other ailment causes. Currently when walking, my legs feel very weak, like they will buckle out from under me. Pain in my legs, hips, and feet can only be attributed to post polio syndrome as none of my doctors can attribute another abnormalities to my symptoms.

So I guess that's my story and I'm sticking to it.



## Bits & Pieces

Does Open Enrollment Period give you a headache? For the past few years I have had Brad Surrett's help and he can help you too.  
<https://www.thesurrettgroup.com/>  
 (770) 752-2706

Copied from an article by James Sale in the Epoch Times:

"... there is a point from which you can go from false love and all the Hollywood images to the other side ....The other side, where you persevere, you dedicate yourself to another, you focus, and you get creative, flexible, and open; and forgiveness becomes an automatic state of mind; and you're on a journey, a big journey—together. That side. That's when it gets romantic all over again."

## Nancy Truluck

## Polio Graduate 1947

I was born in January 1947 in a cold winter, the fifth child of John and Vera Jordan in Burlington, N.C. weighing 10 pounds + 1 ounce. It was said I was a very happy baby, but that year a deadly virus was striking many children around the world and was soon identified as infantile poliomyelitis.

My parents prayed fervently that I would not contract the virus since mother had a miscarriage before I was born and felt somewhat susceptible. However in October they heard curdling screams from my crib, and for two days I lay lifeless and could not pull up in the crib anymore. The doctors confirmed I was totally paralyzed from my waist down and partially paralyzed on the right side of my body from waist up. I had one strong left arm.

My father worked for General Tire company full time, and as a TV repairman on the side to make ends meet. He was sent across town to live with another family, trying to protect him from the virus since he was the only breadwinner. It was a very fearful time for our country and for Mother trying to raise four children at home, and me in the hospital miles away, no husband to help bear the burden, and unable to visit their little girl.

*When I am afraid,  
I will put my trust  
in thee*

But God, don't we love that phrase in the Bible, and in our lives. My family believed God was in

control and had a purpose for my life, even though life would become very difficult. Little was known how the virus spread and what age group would be next. As time went on it seemed the virus mostly attacked the children.



The doctors, I'm sure trying to prepare parents with information available at the time, informed my family I would not make it to my 30th birthday, if that long, but would basically be an invalid of no use. Their advice was to place me in an institution since it

would be too difficult to raise me along with an already large family. My parents went ballistic and absolutely rejected that idea and said they along with God were up to the challenge and informed all the doctors, with all boldness, that I would live as long as God wanted me to live. I think I have made it way past 30 with God's help.

I have had many surgeries, hospital visits, lots of therapy. There were no TV's, no toys, no clowns to make us laugh, no frills that I can remember, just everyone in all white uniforms trying their best to keep us all alive. As time went on my family was able to visit one Sunday a month outside my window.

**Story.** One day however, our ward had a visitor. She and her husband must have been very important people since we never saw anyone from the outside world. I will never forget that day. In our all white surroundings, this beautiful lady, with a red hat stood at the foot of my bed with a great big smile and said everything will be ok and that God had a wonderful plan for my life. Her name was Story and many years later I tried to locate her but was unsuccessful just to tell her what an encouragement she was to me that day. Maybe she was an angel? I wanted to grow up and be beautiful and graceful just like Mrs. Story. **We never know how important words can be. They are powerful enough to make or break a life.**

Surgeries were the worst but mother had me memorize Psalm 23 just for these occasions. I would be wheeled into that blinding white room with fear and trembling but always saying that Psalm over and over to calm my heart. I hated the ether anesthesia and counting backward from 100 with long deep breaths and then following weeks of heaving green sickness, being in a cast for three or four months, coming out of the cast with stiff limbs and layers of dead skin to be removed with very hot towels several times a day, and learning to walk all over again.

Around my third or fourth birthday, I became rebellious and determined not to participate in any more therapy until I was

allowed to go home for a visit. I was weary of hospital and longed for my family. Finally, they allowed it. I remember that day as if it was yesterday. What a wonderful birthday that year!!



Our house was one that when you walked in the front door, you could see the back door at the end of the hall. The living room on the right, mother and daddy's bedroom on the left, my sister and my bedroom next, then my brothers room on the right and kitchen and back porch at the end. We did not have an indoor bathroom but that was no problem for me since all I knew was a bedpan.

Mother was always cooking up something good in the kitchen. All day long I walked up and down that seemingly long hall stating loudly, "I can walk, mother, I can walk". When mother would peek around the corner from the kitchen, I could see her tears but no tears for me because I could finally walk by myself even though slow and with much effort. I was home at last.

Home did not last long for I had surgery every June and in and out of the hospital for various treatments the first eighteen years of my life.

I did not go to school like other children. Southern Bell Telephone Company stepped in and made communication possible from my bedroom to the school house. There were two boxes so to speak, one for my bedside and one for the classroom that just plugged into the wall electrical outlet. I could listen to class discussions. The teacher could ask me questions and I could press a button on my box to respond. My teachers came to my house for exams.

Usually by February the cast was removed and I would start the recovery process of meeting my classmates at school by April. Our highschool was two stories high. My morning classes were scheduled on the second floor and afternoon classes on first floor. Each morning I was welcomed

by two strong football player-type classmates to place me in a chair to carry me up the steps and the return trip down at lunch time. I think all the girls were jealous but I was so thankful to be able to attend class for a few weeks before the next surgery.



Life was good, I was learning to walk better and learning to live a normal life and how to properly string beans, shuck corn shell peas, peel potatoes, fold clothes, iron all my brothers and daddy's white shirts, how to mend, make the bed, wash dishes, dust furniture, sit by the sewing machine and watch mother make all our clothes. We were always busy but enjoying life.



One day mother said it was time to teach me to sweep. I told her I did not need to learn how to do that for I planned to marry a rich man who could buy me a vacuum cleaner. She explained I could make all those plans but I still needed to learn to sweep. Every time I sweep my garage these days, I think of that day and thank God for a very wise mother. It still

takes me a very long time but I get the job done.

Mother and Daddy took a lot of heat from their families by the way they were raising me in such a strict manner but I knew I was loved and they were preparing me for life.

I graduated from high school and went two years to Kings College in Charlotte, N.C. In the second year at Kings, I was elected Homecoming Queen. A pair of handsome twins escorted me, so I wouldn't have to use my crutches on the runway.



I heard the airlines were hiring so I applied and was hired in the reservations department. What a perfect job it was for me. I was able to travel and made very good money.



When I started working for the airline, this article was published

From the Daily Times-News, Burlington, NC. October 14, 1966

**My most memorable trip** was a month in Taitung, Taiwan. I had a girlfriend with the Evangelical Alliance Team there. Every week this mission group would go into the woods looking for children that had been left to die. That culture believed that if a child was paralyzed it was a bad omen for the family.

Most of those children did have polio and this mission took care of these children and helped them the best they could. It was so sad because there were no braces, crutches, wheelchairs or medical supplies, only tender loving care. Their supplies consisted of sticks for crutches and boards taped together for braces.

It broke my heart. I so wish every American could visit a third world country just to see how God has blessed America.

I wanted to kiss the ground upon returning home. I could have been born there and would still be crawling on the ground all my life. These dear people had nothing, but a complaint was never heard.

I was married then and my husband was reluctant for me to go on that long trip but it changed my life forever. He even wanted us to go the next time. Next time never came, because he had a massive heart attack and went to be with the Lord that very day.

I had never lived alone. I went from home to college then marriage. I was not sure I could live alone but like mother always said "necessity brings creativity"

I went directly back to work which was a wise choice that helped me through the grieving process.



I had not planned to remarry, I was content being single for the next 7 years. In addition to working at the airlines, I sang at the Catfish Hollow. My friend Tommy and I sang every Tuesday night for a 3 hour show. Then Jim Truluck came to the show and into my life. Jim was a dear man who loved God first and me second. After we married, he and I sang together at several venues including nursing homes on the weekends. We sang country gospel but mostly Johnny Cash and June Carter love songs that Johnny wrote to June. These songs were never the popular ones you heard on the radio. Like *"You're the Nearest Thing to Heaven," "Cause I Love You."*



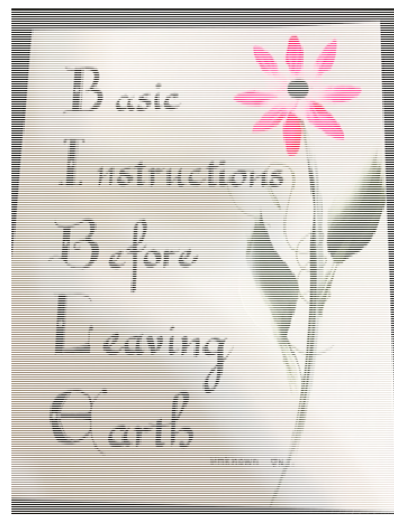
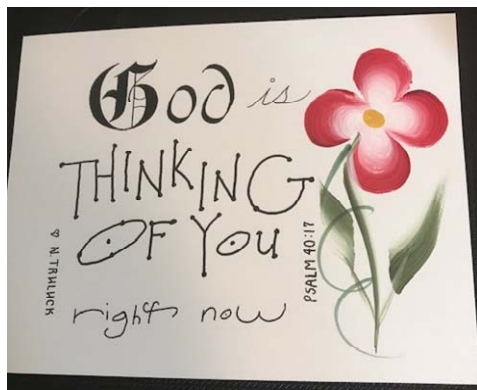
Jim sang *"I Promise You"* at our wedding. His promises were true for thirty years but he went to be with the Lord after suffering six years with Alzheimer's disease.

I am in another season of life alone, but trusting God for the future. I still wear long leg braces and use two Canadian crutches but mostly use my power chair for long distance. I am getting much weaker it seems by the day. However every morning I quote Deuteronomy. 33:25 "as your days are, so shall your strength be." just to remind the Lord that I am still trusting Him.

I still teach ladies how to study the Bible at my church and in my home; and I continue to work on my calligraphy skills. Last year I taught English Second Language ESL at my church which turned out to be a great challenge.

My prayer is that I will finish this life well since this life is our training for Heaven and what a blessed day that will be when Jesus returns a second time to take us there.

\* \* \* \* \*



## Bruno Bytes Excerpt from 3rd Quarter 2023.

[www.papolionetwork.org/](http://www.papolionetwork.org/) by Richard L. Bruno, HD, PhD,  
Director of International Centre for Polio Education

### **Non-Paralytic Polio:** Original Post:

Why is it when polio is discussed in literature only "paralytic" is mentioned: Bulbar and Bulbar/Spinal. Is "Non - Paralytic" the ugly step child?? Talking to a doctor today he said NO SUCH THING AS NON-Paralytic. He made me feel small.

Additional Post: It has only been in latter years that asymptomatic polio has been properly recognized and this has only occurred when patients started to present with PPS. That certainly took a mindset change as PPS is a diagnosis of exclusion - one of the first prerequisite was someone having a history of paralytic poliomyelitis! It is now recognized, (certainly in Europe through medical centers and the European Polio Union) that asymptomatic polio can result in PPS.

Without question, this should be the case when we realized that under WHO (World Health Organization) definitions: a single paralytic case is counted as an epidemic. Therefore, up to 1,000 persons may have had the virus pass through the gut. Only the few were paralyzed by this "gastro-enteritis virus". The Poliovirus enters the body through the intestinal route, e.g. most commonly by mouth (although in rare occasions it has been shown to enter the bloodstream directly through an open wound such as a cut).

### **Those who have had asymptomatic polio are just as much a part of the "polio family" as those affected with paralysis.**

Dr. Bruno's Response: "Non-paralytic" polio can mean that you had: 1) No poliovirus invasion of neurons and no neuron damage; 2) Widespread neuron damage that was not severe enough in any spinal cord or brain area to cause symptoms that could be detected but that now leaves you vulnerable to Post-Polio Sequelae; 3) Neuron damage that was severe enough in a spinal cord or brain area to cause symptoms, symptoms that were not obvious but could be detected had someone tested you.

Two studies during the polio epidemics found that as many as 40% of "non-paralytic" polio survivors had detectable muscle weakness WHEN THEY WERE TESTED in hospital. Once again, as with "the 3 types of polio," there is a semantic problem, here is the difference between the physiology and clinical findings:

- "Non-paralytic" polio meaning no neurons damaged and
- "non-paralytic" polio meaning nobody bothered to see if you HAD muscle weakness caused by neuron damage.

\* \* \* \* \*

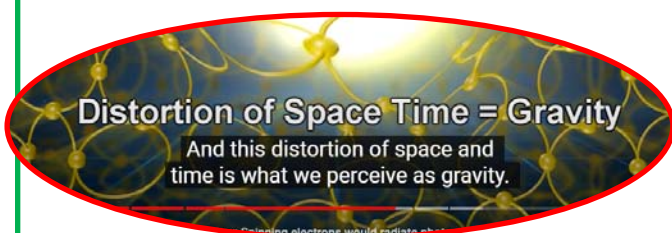
## Flying Carpets in Compact and Family Models

*Never tell a Polio person it can't be done*

In the Winter 2019-2020 APPA News, I asked engineers and techies to create flying carpets because our power chairs have some limitations. Calculus of Newton and Einstein got rockets in the air, but not us. I'm now asking the quantum physicists to consider this flying carpet project



After creating this image of the family-sized model, we realized that the kids needed some force to stay on the carpet and to provide ambient air. Perhaps use a bit of force from the that which is released to leave the ground. A simple fold in the carpet could carry electro-magnetic devises that would be simple to control. A few thoughts and images from a YouTube video: *Quantum Gravity Explained*, by Arvin Ash, might help get this project off the ground.



Gravity is  $10^{39}$  weaker than electromagnetism. Thus, a magnet can lift another magnet off the ground.

Any theoretical formulation [regarding quantum gravity] will have to be done by "thought experiments" rather than real experiments.

Simple math for quantum physicists

$$\begin{aligned}
 & M^2 W_\mu^+ W_\mu^- - \frac{1}{2} \partial_\mu Z_\nu^0 \partial_\mu Z_\nu^0 - \frac{1}{2} M^2 Z_\mu^0 Z_\mu^0 - \frac{1}{2} \partial_\mu A_\nu \partial_\mu A_\nu - i g c_w (\partial_\mu Z_\nu^0 (W_\mu^+ W_\nu^- - W_\mu^- W_\nu^+) - Z_\nu^0 (W_\mu^+ \partial_\mu W_\nu^- - W_\mu^- \partial_\mu W_\nu^+) + Z_\nu^0 (W_\mu^+ \partial_\mu W_\nu^- - W_\mu^- \partial_\mu W_\nu^+)) - \\
 & i g s_w (\partial_\mu A_\nu (W_\mu^+ W_\nu^- - W_\mu^- W_\nu^+) - A_\nu (W_\mu^+ \partial_\mu W_\nu^- - W_\mu^- \partial_\mu W_\nu^+) + A_\nu (W_\mu^+ \partial_\mu W_\nu^- - W_\mu^- \partial_\mu W_\nu^+)) - \\
 & \frac{1}{2} g^2 W_\mu^+ W_\mu^- W_\nu^+ W_\nu^- + \frac{1}{2} g^2 W_\mu^+ W_\mu^- W_\nu^- W_\nu^+ + \frac{1}{2} g^2 W_\mu^+ W_\mu^- W_\nu^- W_\nu^+ + \frac{1}{2} g^2 W_\mu^+ W_\mu^- W_\nu^- W_\nu^+ - \\
 & Z_\nu^0 Z_\nu^0 W_\mu^+ W_\mu^- + g^2 s_w^2 (A_\mu W_\mu^+ A_\mu W_\mu^- - A_\mu A_\mu W_\mu^+ W_\mu^-) + g^2 s_w c_w (A_\mu Z_\nu^0 (W_\mu^+ W_\nu^- - W_\mu^- W_\nu^+) - \\
 & Z_\nu^0 (W_\mu^+ \partial_\mu W_\nu^- - W_\mu^- \partial_\mu W_\nu^+) - \frac{1}{2} \partial_\mu H \partial_\mu H - 2 M^2 \alpha_h H^2 - \partial_\mu \phi^+ \partial_\mu \phi^- - \frac{1}{2} \partial_\mu \phi^0 \partial_\mu \phi^0 - \\
 & \partial_h \left( \frac{2 M_h^2}{g^2} + \frac{2 M_h^2}{g^2} H + \frac{1}{2} (H^2 + \phi^0 \phi^0 + 2 \phi^+ \phi^-) \right) + \frac{2 M_h^2}{g^2} \alpha_h - \\
 & \frac{1}{2} g^2 \alpha_h (H^4 + (\phi^0)^4 + 4 (\phi^+ \phi^-)^2 + 4 (\phi^0)^2 \phi^+ \phi^- + 4 H^2 \phi^+ \phi^- + 2 (\phi^0)^2 H^2) - \\
 & g M W_\mu^+ W_\mu^- H - \frac{1}{2} g \frac{M}{c_w^2} Z_\mu^0 Z_\mu^0 H - \\
 & \frac{1}{2} i g (W_\mu^+ (\phi^0 \partial_\mu \phi^- - \phi^- \partial_\mu \phi^0) - W_\mu^- (\phi^0 \partial_\mu \phi^+ - \phi^+ \partial_\mu \phi^0)) + \\
 & \frac{1}{2} g (W_\mu^+ (H \partial_\mu \phi^- - \phi^- \partial_\mu H) + W_\mu^- (H \partial_\mu \phi^+ - \phi^+ \partial_\mu H)) + \frac{1}{2} g \frac{1}{c_w} (Z_\mu^0 (H \partial_\mu \phi^0 - \phi^0 \partial_\mu H) + \\
 & M (\frac{1}{2} Z_\mu^0 Z_\mu^0 (\phi^0 + W_\mu^+ \partial_\mu \phi^- + W_\mu^- \partial_\mu \phi^+) - i g \frac{M}{c_w^2} Z_\mu^0 (W_\mu^+ \phi^- - W_\mu^- \phi^+) + i g s_w M A_\mu (W_\mu^+ \phi^- - \\
 & W_\mu^- \phi^+) - i g \frac{1-2c_w^2}{2c_w} Z_\mu^0 (\phi^+ \partial_\mu \phi^- - \phi^- \partial_\mu \phi^+) + i g s_w A_\mu (\phi^+ \partial_\mu \phi^- - \phi^- \partial_\mu \phi^+) - \\
 & \frac{1}{2} g W_\mu^+ W_\mu^- (H^2 + (\phi^0)^2 + 2 \phi^+ \phi^-) - \frac{1}{2} g \frac{1}{c_w} Z_\mu^0 (H^2 + (\phi^0)^2 + 2 \phi^+ \phi^-) - \frac{1}{2} g \frac{1}{c_w} Z_\mu^0 (H^2 + (\phi^0)^2 + 2 \phi^+ \phi^-) - \frac{1}{2} g \frac{1}{c_w} Z_\mu^0 (H^2 + (\phi^0)^2 + 2 \phi^+ \phi^-)
 \end{aligned}$$

**Okay, fellow never-say-can't PPSers, you take it from here!**

## Airplane Flu

Alan M. Oberdeck

You asked me a question about how a traveling man remains healthy when he is constantly exposed to whatever bacteria and viruses are popular at any given time. What affected the traveling man also seemed to affect the people working in the airline industry. All who travel have had to face this dilemma and all have handled it differently. Let me tell you a story:



Back in the days that Eastern Airlines was one of the large airline companies with a large number of

flights in and out of Atlanta, they were my favorite air carrier. I flew them so often that I earned a Gold Frequent Flyer designation. Sometime I will explain to you what could be done with a Gold Card, but that time is not now.

It was back in 1979, if my memory serves me correctly, that I had a major distributor for my products in Dallas, Texas. This distributor was so important that I would visit his facility at least every six weeks if not once a month. The flights I took were generally the same times and same numbers when I made those trips. My favorite place in the plane was in the back, usually in one of the last two rows, an isle seat if I could get it. The Atlanta based stewardesses bidding these trips had enough sen-

iority that they became regulars. Over the months several other salesmen and I, who made the same trip regularly, got to know them quite well.

It wasn't unusual that when all the passengers had been served and things quieted down that the stewardesses would join us at the back of the plane for some subdued levity. (We would joke around with them and depending on the trip it could have been perceived that we were actually having a party back there!)

In those days flying was so much different. The planes were smaller. The Federal rules were not as tight and the whole atmosphere was different than now. In reality there were two types of people who flew then. The first types were the Salesmen/Businessmen who were regulars and very relaxed. The second types of people, the vast majority, were those who were somewhat fearful about flying. Some even occasionally used the "Air Sickness Bags" that were prominently displayed in the seat pocket in every row of seats.

The fall of that year was visited by a virulent strain of the flu. This flu would come upon you with about five minutes' warning after which you would begin to sweat, become dizzy and sometimes throw up. It would usually pass within twenty-four to

thirty-six hours. I mention this because this plays a critical part in the flight from Dallas to Atlanta one Thursday evening.

This flight began the Thursday afternoon the week before Thanksgiving. I had had an amazing week with them as everyone at the distributor's facility was looking forward toward the short work week ahead. My spirits were high. I was looking forward to getting back to Atlanta and finishing the week off early Friday afternoon so I also could enjoy a short week in my office.

I turned in my Hertz rental car at the Dallas airport and was one of the last to board the plane. It was a dinner flight and I believe it was scheduled to leave at 5:30 p.m. I got to my seat and stowed my briefcase under the seat in front of me. I was second row from the back, isle seat, just where I liked to ride. The stewardess was one who I had ridden with many times, and she gave me a cordial greeting. The other stewardess came down the isle doing the seat belt check.



Several of the regulars were seated in their regular seats also. This looked like it would be a usual trip, and unless

one of the other fellows was wound up and in a party mood this would be a dull trip. I think we were all tired and looking

forward to the upcoming short week. Everything was in order for the flight to leave the gate, so the doors were shut and we were pushed from the gate.

As we were being pushed back from the gate, one of the stewardesses spoke to the other in a kind of hushed voice. "I think I'm coming down with the flu! I'm dizzy. Should we tell the pilot and go back to the gate?" The second stewardess said. "No! I am feeling a little bad myself, but do we want to be stuck here for two days? We can do this!"

At that time the FAA had a rule that a flight could not leave the gate without a full flight crew. If the plane would have returned to the gate the two stewardesses would have been relieved from duty. The plane would have had to remain at the gate until two other stewardesses could be found, or the flight would have had to be cancelled. This was Dallas and the chances that two other stewardesses could be found was slim to none. If that had happened we all would have had to rebook and some of us might have to wait until morning to fly home. It was obvious that these ladies wanted to get home. I believe the statement "**We can do this!**" was as much of a relief for the several other frequent travelers, who probably also heard what they had said, as it was to me. I think we were all happy that these ladies didn't ask to go back to the gate.

They buckled themselves into their jump seats and in minutes we were air born. A little bit later the curtain separating first class from coach was pulled across the aisle and the flight had officially begun. The first action the stewardesses took after takeoff for a dinner flight, such as this, was the unleashing of the drink cart.



It became apparent to two of the regular riders that the stewardesses were having trouble with

the drink cart. One appeared so dizzy she could hardly stand up. These two regulars got out of their seats and went up to where the stewardesses were working.

In a kidding manner they made a challenge to the two stewardesses that they could do a better job! The stewardesses joked with them and pretty soon were supervising the two regulars who had in essence commandeered the drink cart. The way they clowned was very entertaining and soon the passengers in coach were in a party mood.

The drink cart finally made it back to the rear of the plane and was stowed. The two regulars were still clowning around. One of the stewardesses pretty much collapsed into the jump seat while the

other one looked pretty green around the gills.

One of the regulars went to the back and stood next to her. "What are you planning to do about the dinners?" He asked. I watched as she leaned against the bathroom door post and answered: "I have no idea!"

"If we bring you the trays, can you serve them?" He asked.

"Yes, I think we can do that."



I don't remember what the stewardess in first class was doing or if she even

was aware of what was happening in the coach section of the plane. She was probably so busy in first class she had no time to check. After a little conference in the back it was decided that the one stewardess would serve the plates at the seats while the other would prepare the plates in the back. This required her to remove the trays from the racks in the catered food carts, then remove the aluminum foil covering and place the cups and silverware on the tray. The two regulars from the drink cart were still clowning around entertaining the passengers. They would bring the plates forward and the stewardess would serve them. This worked fairly well, but it was slower than usual because of all the clowning that took place.

All the meals were served, but the time was running out. We were fast approaching Atlanta! The flight had gone well and we were ahead of schedule. The pilot announced that due to upper winds we would arrive ten minutes early!

Again Federal Air Regulations kicked in. All the food trays had to be gathered and properly stowed before landing. By this time the one stewardess was sitting in one of the seats of the regulars fast asleep. The two regulars jumped into action and began collecting the trays. The other stewardess began the process of separating the items from the plates and properly stowing them.

The way the regulars were working there was a need for someone to help. I brought the trays the last few steps to the stewardess who was sorting and stowing them. The trays were coming back so fast that in her condition she had trouble keeping up with the flow. Also in her condition she was unable to bend over without becoming dizzy, so she sat down on the floor in front of the open doors of the food carts and the racks where she needed to stow the trays.

All the trays were at the back, but some were still in a pile beside the stewardess, who from a sitting position on the floor, was frantically stuffing trays into the slots

before her. Looking toward the front of the plane I saw the curtain being pulled open for landing. Then was heard the voice from the front of the plane telling us to fasten our seat belts, stow our tray tables and to make sure our seat backs were in the full upright position for landing.

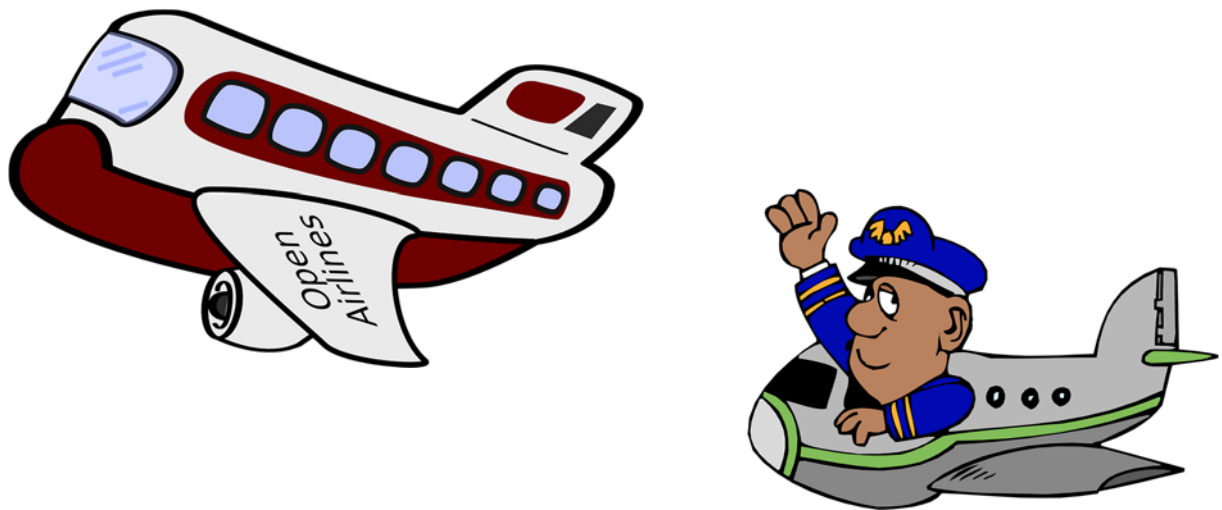
Nobody did the seatbelt check or walk-through making sure we had complied with the previous instructions. I was now in my seat safely belted in and looking back at the stewardess sitting on the floor of the galley still stuffing trays into the appropriate slots. One of the regulars was in the jump seat. One stewardess was asleep in the regular's seat while the other was still on the floor of the galley. She did get the doors to the catered food carts closed before we landed. The galley was ready for the cleanup crew!

We landed and taxied to the gate. As soon as we stopped, even before the cabin door was opened the passengers were up and opening the bins to remove their carry on luggage. It seemed as though all were in a good mood and soon the plane was empty. Almost immediately the galley door was opened and the food crew was removing the catered food carts and replacing them with the ones for the next flight. By this time the two stewardesses were finishing their duties and getting ready to deplane. We came in early and I actually made it home early.

The next time I saw one of those stewardesses was weeks later. We greeted each other cordially, but nothing was ever mentioned of our unusual flight. As I think back on my early days of flying, I am amazed at how free it was and the things that took place in the air. Flying used to be fun.

I often wonder how many of the passengers from that flight came down with that version of the flu. I didn't, but I had probably been exposed sometime earlier and had had a light case. In any case I believe that we traveling men were exposed to so much that it took something really potent to take us down. I suppose this still holds true today.

Alan M. Oberdeck



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