

# APPA NEWS

## The Atlanta Post-Polio Association

Volume 30, Issue 2

Summer/Fall 2017

### Polio Support Group Seeks Volunteers

The Atlanta Post-Polio Association has a critical need for volunteers to help with the work required to keep the organization functioning. Polio support organizations worldwide are facing the same dilemma. The demographics of the typical Polio support group are that the membership is both aging and becoming more infirmed. This fact makes it difficult to keep a group functioning. Most groups function until they burn out the last few members willing to do the work required. What happens over and over is the groups close up shop! Is that going to be the fate of APPA? The obvious solution is to spread the work among more members so the work does not fall on only a few members. We have run an article seeking volunteers in two issues of **APPA NEWS** in a row with no response from the membership. The only other options are to begin to pay for these services to be done by commercial businesses or we may have to consider not providing them at all.

Here are the jobs required to keep the organization functioning:

#### **Facebook Manager**

Maintain the APPA Facebook page. This includes, at the very least, updating the page before the monthly meeting. Beyond that the sky's the limit. Be as creative as you want in using our Facebook page to spread the word about APPA! Knowledge of Facebook required.

#### **Monthly Meeting Notice**

Responsible for creating and emailing the monthly notice to the membership. Knowledge in one or more of the following needed: Microsoft Access Database to create the email address list, Email processing, Microsoft Word and/or Publisher.

#### **Annual Phone Directory**

Create the once/year phonebook of members who have donated to APPA. Microsoft Access Database & Microsoft Publisher is utilized to create the directory.

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Please don't forget to  
make your annual  
donation to **APPA**.  
Thanks for your  
continued  
support.

## Board Members

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<b>Rita Carlson</b>	First Vice President Public Relations
<b>Betty Wright</b>	Second Vice President
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<b>Pat Harris</b>	Membership Advocate
<b>David Jordan</b>	
<b>Leslie Schulgen</b>	

## Contact Information

Atlanta Post-Polio Association, Inc.  
P.O. Box 245  
Cumming, Georgia 30028  
(404) 350-7631  
[www.atlantapostpolio.com](http://www.atlantapostpolio.com)  
[appaemail@gmail.com](mailto:appaemail@gmail.com)

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

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



# President's Message

Dear Friends and Supporters:

*These past months have reminded me of how resilient post-polio survivors are and I am encouraged. This quarter, my message is "Be encouraged." After talking with several members, including board members, I am convinced that we are spirited, strong people. Sharing our personal stories has a cathartic effect. For most of us, we are guided by our faith which helps tremendously. Regarding our health, we are having meaningful conversations with our doctors. Several members are in the process of transitioning from walking with the assistance of canes or crutches to the requirement of a wheelchair or scooter for mobility. I have had that conversation with my doctor as well. Some members have experienced the dreaded "fall." Also, personal care for ourselves and loved ones is an issue we constantly face. In addition to the side effects from the polio virus, now we are experiencing not only aging factors, but the maladies of today. Despite the circumstances, we encourage our peers and friends. At APPA, we seek to encourage and let you know we care through our programming, internet, and personal notes of wellbeing. Recently, I have had many challenges and contemplated, "Can I do this, serve as a leader in APPA?" The answer is a resounding "yes." I choose to give to APPA for what it has provided me... wonderful people who can relate to my struggle, a doctor for my personal care and a bevy of doctors, medical, and other professionals who answer questions and provide support. See Dr. DeMayo's article on page 18.*

*I am encouraged, because I am surrounded by strength... family, APPA family, church family, friends, and associates. In the coming months, for those who have been out of touch for a while and/or in nursing homes, look for a personal note from us. If you or a family member read this article and have not heard from us, please let us know and ensure that we have the proper contact information. We will surely reach out to you. Stay Strong and let's continue to Encourage one another!*

*Faithfully Committed,*

**Carol Crumby - APPA President**

# Mid-Year Status

By Carol Crumby  
APPA President

APPA members have been very busy. In February, we started the first meeting of the year with a bang...launching our updated website. Then we relaxed with a little fun with Bingo in March after a productive board meeting. In April, we had the opportunity to join the Jimmy Carter Library and Museum in the Exhibit and program, "Defeating Disease: Defeating Polio." The following month, May, we honored the mothers who had children stricken by polio giving us the opportunity to salute our mothers. In June, the group had fun at the Gwinnett Braves game. The last meeting, before summer break, we had a lesson on Alzheimer's. Check out the website gallery to see more pictures.

## From the Editor

I always leave this column until the end. I have to say this issue has been a struggle. I've noticed they all are getting a little more that way. I think I'm getting tired. That and I've been a bit distracted by some things happening in my personal life. Pleasantly distracted but distracted just the same.

Upon writing the front page article I found myself torn between sounding too negative and maybe not getting the point across. I rewrote it and massaged it until it culminated in the form you see here. You ought to see one draft I sent to our president for her feedback!

I even had a classic publishing adventure obtaining a reprint permission. The World Health Organization (WHO) has always been supportive of APPA and exceedingly generous in allowing us to reprint articles published by them. It appears they have some new legalize wording in their conditions. I'm not sure if it was simply semantics, a language barrier, they are in Switzerland, or my ineptitude but getting it worked out was a challenge. My money is on ineptitude. It was almost comical in a way. They are very restrictive on the use of their logo and name, including the acronym (WHO). Yet with that being stated I needed to acknowledge them as the owner/publisher of the document in question. So how do I acknowledge the World Health Organization and/or WHO without using either. I resisted the urge to write an Abbot & Costello like piece similar to the "Who's on first" skit from 1937. As in I'd like to acknowledge "a source I can't name" who allowed us..., oops can't say who, for the use...etc., well you get the idea. I did the best I could to comply with their requirements. I very much would like our wonderful professional relationship to continue. The worst that could happen is I get a "Cease and Desist" order from their attorneys. That wouldn't be the first one I've received in this capacity, and for any of you that know me at all, probably won't be the last!

*Joe Drogan*

Continued from page 1

### **Forward PHI Updates**

Polio Health International allows us to forward their emailed memos to our membership. They occur monthly. Knowledge of email systems required.

### **Forward GA Tech Study Opportunities**

We occasionally receive opportunities for our members to participate in studies being done by Georgia Tech. We forward the details on to our members via email.

### **APPA NEWS Mailings**

Process the latest issue of APPA NEWS for mailing to our members. Requires basic knowledge of Microsoft Access & Word to produce mailing name and address labels.

In addition, newsletters must be labeled, sealed, and delivered to the post office.

### **Create Mailing Labels**

We create a mailing label file and/or physical labels at various times during the year.

These include labels for APPA NEWS, APPA postcards, and special mailings. Requires basic knowledge of Microsoft Access & Word to produce mailing name and address labels.

In addition to the above jobs there are members who have served the organization for many years that are getting tired. If there continues to be no interest from the group in stepping into some of these jobs, the future doesn't look bright for us.

One of those positions is APPA NEWS Editor & Publisher!

If you can help us out with any of these jobs, just let us know by either sending an email to [appaemail@gmail.com](mailto:appaemail@gmail.com) or leaving a message on the APPA line **(404) 350-7631**.



## APPA Prepares for Georgia Gives Day 2017

On November 16, 2017 the Atlanta Post-Polio Association (APPA) will participate in Georgia Gives Day. Launched by Georgia Center for Nonprofits (GCN) in 2012, **Georgia Gives Day** is a unique, all-online fundraising initiative built for non-profits and fueled by a **large statewide coalition** of corporations and foundations, government officials, media partners, and volunteers. Last year our members and supporters added over \$1500 to our fundraising efforts through Georgia Gives... and we thank you. We hope you will support us again this

year. More information will be provided later. We will provide ways for you to engage your friends, family, and employers. While Georgia Gives Day raises significant money for nonprofits in 24 hours, GCN strengthen Georgia's nonprofits through this initiative in many other ways, which benefits APPA and our community. Get ready APPA.

# Random Thoughts and Tidbits

By Carol Crumby

- Lately I've heard a lot about polio in the media.
  - On RLTV, I watched "Revisiting Polio" (timely, isn't it?). Great hour long presentation, included post-polio.
  - In June, Atlanta hosted The 108th Rotary International Convention, whose rallying cry, according to Maria Saporta, Atlanta Business Chronicle, Monday June 12, is "End Polio Now."
  - Recent AJC articles include:
    - Lifestyle Section: Driven to succeed: "Steve Stirling's commitment to eradicate polio is personal" By Ariel Hart; Friday, June 9;
    - News Section: "Rotary and Gates Foundation Pledge \$450 million to eradicate polio", by Shelia Poole, June, 12;
    - Opinion Section: "Opinion: We can achieve a world without polio" by Ted Turner, Friday June 9.
- APPA was contacted by an Emory student seeking an interview with a polio patient. I met with her and found her sister also had polio. They are from Texas.
- Dr. Strasser has requested more brochures; he had distributed all of his. Thanks to all the physicians and health care professionals that support APPA. Does your doctor need more information? Ask!
- Rita Carlson is working on the schedule of programs for the remainder of the year. What would you like to see for the 2018 year?
- VOLUNTEER TO HELP APPA. We have tried to let people know who we are with our little band of volunteers who promote this work. Recently APPA added new members through the website. It works! We continue to seek your support. *How?* When we have an activity/event, actively encourage your friends/supporters to join you - participate, volunteer! Share who and what we are! Thanks to all the family, friends, and supporters.

# **APPA Membership NEWS**

## **Advanced Level Memberships**

**Rachel & Edwin Buice Gold**

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

**Gloria Mims - Lifetime Member**

**Ray Fitzpatrick**

**Alan Mitchell**

**Anonymous in honor of  
Vicki Crowell - Board Member**

***Thank You!***



**APPA Welcomes The Following  
New Members:**

**Leo Roszkowski  
Nancy Winter  
Clara M. Benson**

**2017 Membership Donors**

Karen Ragsdale  
Dewey Moody  
Karen Rogers  
Carol Holliday  
Barbara & Herbert Ruecksties  
Belinda Whitaker  
Barbara Reynolds  
Ron & Linda Swor  
Margret Dobbs  
David Jordan - **Board Member**

*Thank You!*



# APPA At The Ballpark!

APPA attended the Gwinnett Braves game at Coolray Field on June 11, 2017. It was a perfect day for a game, not too hot not too cool and no rain. The seats we get are in Section 111 which has a very nice section at the top for wheelchairs. You are seated above everyone with a great view from the first base line. There is a roof above providing shelter from the sun and rain. There is even a net to prevent you from getting hit by a foul ball. The restrooms are located close by as well. The only thing you could ask is that the home team plays well. They did winning 5-0. At one point the Charlotte Knights had the bases loaded with no outs. They failed to score a single run out of that situation. I'd have hated to be in their clubhouse after that!

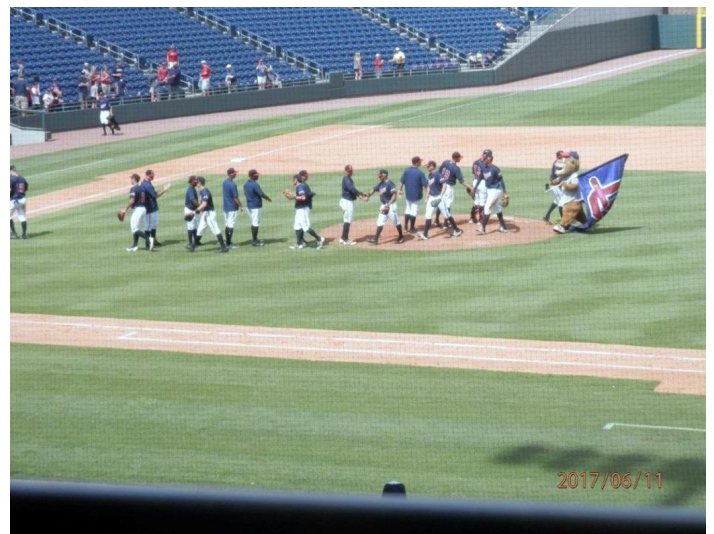


From l-r Joe Drogan, Brad Mayer, Vicki Crowell, Barbara Mayer, and Betty Wright.



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# Shopping made easy

By Joe Droган

Here at APPA NEWS we are always on the lookout for ways to make life easier and we think we have found something.

The world of shopping has changed dramatically in the last few years and there is a huge move toward on-line, shop from home; this has revolutionized the merchandising industry.

I did some work for Federated Stores, Macy's, years ago and whereas I'm hardly a retail expert I did learn one key thing. The theory of merchandising back then was to do whatever it took to get the customer in the store. Well Duh? That made sense back then when the only way they *could* buy something was to be there. That began changing with the whole Amazon type of shopping. The brick and mortar stores have lost huge market share to on-line. To fight back they are trying several things. One of which is order on-line and pick up in store. That gets the customer in the store but also offers the on-line shopping experience many prefer. The logic here is on your way to the pickup counter, usually in the back of the store, you may spot another item you need. This has met with a little bit of success but perhaps not enough. Another idea is the concept of grocery delivery. The first go round of this was a business failure. I could see several ways that might have problems. First the sheer cost of the delivery, gas, oil tires, driver, etc. People complained about the freshness of the items. The latest idea is being rolled out by Walmart, order on-line and pickup outside the store. This reminded me of one of my first impressions of Georgia when I visited 30+ years ago. Back then they had a liquor store in Marietta in a barn where you drove through the building, told them what you wanted, paid, and had your trunk loaded up. My first thought was hmmm so this is for folks too drunk to walk into the store? Sorry I digressed there for a second. When I first heard about the Walmart pickup service I thought what a great idea for mobility impaired people. You can do your groceries from your couch, drive over to the store and have them loaded into your vehicle without even having to get out of it. No unloading your powerchair or scooter or be limited by the little basket on the in store scooters. You can even pick out the items you want and have someone else stop by and pick them up for you.

Well I thought before I go ahead write this article I'd better test out this process. I sat down at my computer and went to the shopping site. You can shop most of Walmart's departments. For starters I thought one hassle for me is the 40lb sack of sunflower seeds. No I can't eat that many myself; they are for my bird feeders;-) But loading the sack in my cart, pushing it

Continued on next page



around the store, loading it into my trunk, and unloading it at home is a chore. This makes it easier, I just have to drag it out of the trunk and into my garage. I also noticed it's even easier to compare the cost/oz on many items. For example, in comparing almond milk, I can see all brands and flavors just by scrolling and comparing is easy. You can see several items side-by-side on your screen and easily compare. You can shop virtually all departments too. I've always thought it was cool to be able to buy motor oil and olive oil in the same store. Just be careful about which is which in your kitchen! You can create favorites so things you buy often are easy to re-order. I talked to two different people there that said the meat you get is the freshest in the store as it gets picked from the meat intake section of the store before it even gets loaded into the meat cabinet in the shopping area. The frozen items I ordered were still very frozen and refrigerated items cold. This is due to the fact that since you schedule your pickup time, perishables are put with the order at the latest time possible. There is an app for your phone so you can easily get reminded at pickup time and let them know you are on your way.

The downsides to this process are few. For one thing you miss out on the marked down items. You will miss those pork chops reduced to sell. I buy the rotisserie chickens there when they go from \$4.98 to \$2.50, and just use them sooner at home. If you are a steak "expert" you don't get to choose the perfect marbling for your rib eye. But for me chicken legs are chicken legs. There is a \$30 minimum for an order. At \$20 for the sunflower seeds I was almost there already.

So the bottom line on my test run was a big "Thumbs Up." The ordering was easy; the execution perfect. I will run one more test of this before I publish this article. So far Walmart says it's been a success. It'll remain to be seen how it goes moving forward. If it's too successful will that cause execution issues? Also I'm sure there will be competition as well. Kroger has a similar service called ClickList where you order on-line and pickup beside the store. They even offer delivery in some areas. They are just now starting to advertise it. There isn't a minimum order but there is a 4.95 service fee. Amazon just bought Whole Foods for 13 billion dollars. 13 billion? There is way more money in groceries than I thought. Are they setting up for something similar?

There are always clever ways to get things done. You just have to give it a little thought. I guess if you are unable to drive you could order groceries on-line, get an Uber ride over there to pick them up and done! I had a friend, years ago, that found a bar next to a Dominoes Pizza. When he got a little too hammered to drive he'd simply call next door and order a pizza. He'd wait 10 minutes or so, pay his tab, walk next door and catch a ride home with his pizza. No car crashes, no DUI's, and he'd have a hot snack ready when he got home safely.

## APPA Meeting Saturday, June 3 - Shepherd Center.

Kimberly Pierson, Executive Director of the AAchele Home Nursing Services, gave the presentation about 10 warning signs of Alzheimer's Disease. She is a representative of the Alzheimer's Association.

By Rita Carlson

alzheimer's association

### KNOW the 10 SIGNS

EARLY DETECTION MATTERS

It may be hard to know the difference between age-related changes and the first signs of Alzheimer's disease. Some people may recognize changes in themselves before anyone else notices. Other times, friends and family will be the first to observe changes in memory, behavior or abilities.

To help identify problems early, the Alzheimer's Association® has created a list of warning signs for Alzheimer's and other dementias. Individuals may experience one or more of these in different degrees.

1

#### Memory loss that disrupts daily life

One of the most common signs of Alzheimer's disease, especially in the early stage, is forgetting recently learned information. Others include forgetting important dates or events, asking for the same information over and over, and increasingly needing to rely on memory aids (e.g., reminder notes or electronic devices) or family members for things they used to handle on their own.

#### What's a typical age-related change?

Sometimes forgetting names or appointments, but remembering them later.

2

#### Challenges in planning or solving problems

Some people may experience changes in their ability to develop and follow a plan or work with numbers. They may have trouble following a familiar recipe or keeping track of monthly bills. They may have difficulty concentrating and take much longer to do things than they did before.

#### What's a typical age-related change?

Making occasional errors when balancing a checkbook.

3

#### Difficulty completing familiar tasks at home, at work or at leisure

People with Alzheimer's disease often find it hard to complete daily tasks. Sometimes they may have trouble driving to a familiar location, managing a budget at work or remembering the rules of a favorite game.

#### What's a typical age-related change?

Occasionally needing help to use the settings on a microwave or to record a television show.

4

#### Confusion with time or place

People with Alzheimer's can lose track of dates, seasons and the passage of time. They may have trouble understanding something if it is not happening immediately. Sometimes they may forget where they are or how they got there.

#### What's a typical age-related change?

Getting confused about the day of the week but figuring it out later.

5

#### Trouble understanding visual images and spatial relationships

For some people, having vision problems is a sign of Alzheimer's. They may have difficulty reading, judging distance and determining color or contrast, which may cause problems with driving.

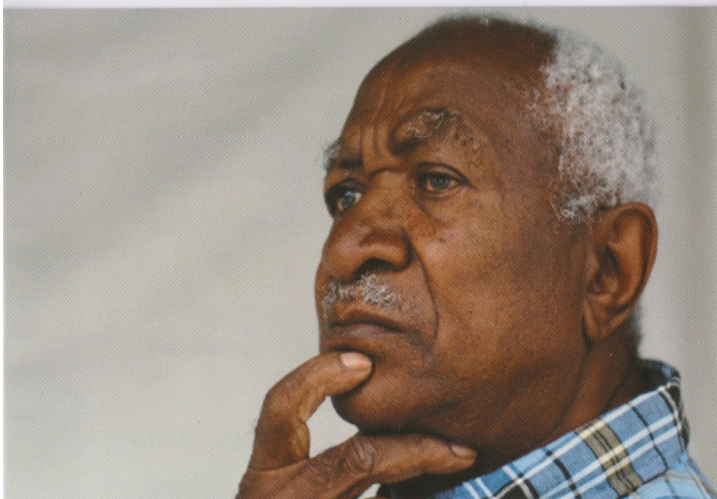
#### What's a typical age-related change?

Vision changes related to cataracts.



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6

### New problems with words in speaking or writing

People with Alzheimer's disease may have trouble following or joining a conversation. They may stop in the middle of a conversation and have no idea how to continue or they may repeat themselves. They may struggle with vocabulary, have problems finding the right word or call things by the wrong name (e.g., calling a "watch" a "hand-clock").

#### What's a typical age-related change?

Sometimes having trouble finding the right word.

7

### Misplacing things and losing the ability to retrace steps

A person with Alzheimer's may put things in unusual places. They may lose things and be unable to go back over their steps to find them again. Sometimes they may accuse others of stealing. This may occur more frequently over time.

#### What's a typical age-related change?

Misplacing things from time to time and retracing steps to find them.

8

### Decreased or poor judgment

People with Alzheimer's may experience changes in judgment or decision-making. For example, they may use poor judgment when dealing with money, giving large amounts to telemarketers. They may pay less attention to grooming or keeping themselves clean.

#### What's a typical age-related change?

Making a bad decision once in a while.

9

### Withdrawal from work or social activities

A person with Alzheimer's disease may start to remove themselves from hobbies, social activities, work projects or sports. They may have trouble keeping up with a favorite sports team or remembering how to complete a favorite hobby. They may also avoid being social because of the changes they have experienced.

#### What's a typical age-related change?

Sometimes feeling weary of work, family and social obligations.

10

### Changes in mood and personality

The mood and personalities of people with Alzheimer's can change. They can become confused, suspicious, depressed, fearful or anxious. They may be easily upset at home, at work, with friends or in places where they are out of their comfort zone.

#### What's a typical age-related change?

Developing very specific ways of doing things and becoming irritable when a routine is disrupted.

*Note: Mood changes with age may also be a sign of some other condition. Consult a doctor if you observe any changes.*

If you or someone you care about is experiencing any of the 10 warning signs of Alzheimer's disease, please see a doctor to find the cause. Early diagnosis gives you a chance to seek treatment and plan for your future.

The Alzheimer's Association can help.

Visit: **alz.org/10signs**

Call: **800.272.3900**

**(TTY: 866.403.3073)**

Learn more: **alz.org/education**



# The Case for Hand Sanitizer

Joe Droган

Many years ago I used to be bothered by the common cold. I'd get one and that was bad enough, but the after effects seemed to linger on for weeks. I wasn't sick any more but went through this thing where I'd be clearing my throat 20 times an hour or so. In addition, it'd be almost impossible for me to sing, something I still do to keep my lungs healthy. I tried all sorts of remedies and prevention techniques - Vitamin C, Vicks Vaporub, and all that stuff. I remember once I tried the original version of Alka-Seltzer Plus, it made me feel better in an hour or so. So much in fact I decided I felt good enough to drink a beer. Holy cow, 10 minutes later I was drunk as a skunk. Don't remember if my cold felt better or not, I simply did not care. Something about chemical synergism. I made a mental note that if I was ever almost out of beer on a Sunday, when you couldn't buy it, simply toss down an Alka Seltzer Plus with the last beer and I'd be good for the rest of the day.

I really needed to fix this common cold thing. About 10 years ago I was helping someone through cancer chemotherapy. The doctors made sure you knew how vulnerable a chemo patient was to infections. They suggested the patient wear one of those masks to prevent infection. These apparently work in two ways. First they stop water droplets from, say, a sneeze from getting into your nose or mouth. Secondly they discourage you from touching your 'T Zone' which is the area of your face comprised of your eyes, nose and mouth. The second thing the doctors recommended was the use of hand sanitizers. You'll notice they have the dispensers all over the place in a hospital. Medical staff are supposed to use them when they enter and leave your room. But you say I'm not always in a hospital. Look around, they are appearing in restrooms all over. Best of all is you can carry a little bottle with you. They have them in the travel section in the store with



those little bottles of shampoo. The cost/oz is higher that way, but I refill them from the big pump type bottle. Try and find the ones that are at least 60% alcohol. Ever since I started carrying one of these in my pocket, my cold problem has been solved. I've been doing this for about 10 years and in that time have never gotten the flu, I don't get flu shots, and have had but one cold. Probably forgot to sanitize one time I needed to. I put it right next to my car keys so I don't forget it when I go out. Hmmm, maybe I'll invent a car remote with a built in

hand sanitizer, yeah that's the ticket!



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## Emergencies preparedness, response

# Circulating vaccine-derived poliovirus type 2 – Democratic Republic of the Congo

Disease outbreak news

13 June 2017

In the Democratic Republic of the Congo (DRC), two separate circulating vaccine-derived poliovirus type 2s (cVDPV2s) have been confirmed. The first cVDPV2 strain has been isolated from two acute flaccid paralysis (AFP) cases from two districts in Haut-Lomami province, with onset of paralysis on 20 February and 8 March 2017. The second cVDPV2 strain has been isolated from Maniema province, from two AFP cases (with onset of paralysis on 18 April and 8 May 2017) and a healthy contact in the community.

### Public health response

The Ministry of Health, supported by WHO and partners of the Global Polio Eradication Initiative (GPEI), has completed a risk assessment, including evaluating population immunity and the risk of further spread.

Outbreak response plans are currently being finalized, consisting of strengthening surveillance, including active case searching for additional cases of AFP, and supplementary immunization activities (SIAs) with monovalent oral polio vaccine type 2 (mOPV2), in line with internationally-agreed outbreak response protocols.

Surveillance and immunization activities are being strengthened in neighbouring countries.

Continued on next page

## WHO risk assessment

WHO assesses the risk of further national spread of these strains to be high, and the risk of international spread to be medium.

The detection of cVDPV2s underscores the importance of maintaining high routine vaccination coverage everywhere, to minimize the risk and consequences of any poliovirus circulation. These events also underscore the risk posed by any low-level transmission of the virus. A robust outbreak response as initiated is needed to rapidly stop circulation and ensure sufficient vaccination coverage in the affected areas to prevent similar outbreaks in the future. WHO will continue to evaluate the epidemiological situation and outbreak response measures being implemented.

## WHO advice

It is important that all countries, in particular those with frequent travel and contacts with polio-affected countries and areas, strengthen surveillance for AFP cases in order to rapidly detect any new virus importation and to facilitate a rapid response. Countries, territories and areas should also maintain uniformly high routine immunization coverage at the district level to minimize the consequences of any new virus introduction.

WHO's International Travel and Health recommends that all travellers to polio-affected areas be fully vaccinated against polio. Residents (and visitors for more than four weeks) from infected areas should receive an additional dose of OPV or inactivated polio vaccine (IPV) within four weeks to 12 months of travel. As per the advice of the Emergency Committee convened under the International Health Regulations (2005), efforts to limit the international spread of poliovirus remains a Public Health Emergency of International Concern (PHEIC). Countries affected by poliovirus transmission are subject to Temporary Recommendations. To comply with the Temporary Recommendations issued under the PHEIC, any country infected by poliovirus should declare the outbreak as a national public health emergency and consider vaccination of all international travellers.

Article used with permission of The World Health Organization (WHO)

Original URL <http://www.polioeradication.org/>

Editors note: **APPA NEWS** would like to thank the World Health Organization (WHO) for the use of this article. Their cooperation is sincerely appreciated.

# The Role of the Primary Care Physician in the Life of a Polio Survivor

William DeMayo, MD, Summit Medical Rehabilitation, PC,  
Johnstown, Pennsylvania



William DeMayo, MD

On each of my several trips to Post-Polio Health International conferences, as well as on my recent three-week lecture circuit in Australia, I have been amazed at the number of individuals who see my specific expertise as “the missing piece” in their future health, yet their local therapists and primary care physicians (PCP) seem to be relegated to some distant and less important role.

While I appreciate the importance of specific expertise in this sub-specialty area, I often find myself trying to bring folks back to their local resources. In my opinion, regardless of expertise, it is local therapists and PCPs that can have a much bigger role in longterm health.

The most obvious reason to conclude this is that a polio survivor’s health is not solely dictated by their history of polio. They are just as susceptible to the same medical conditions as everyone else. In fact, for some, a relatively sedentary life will make them more susceptible.

The following conditions each have an incidence of at least 10% in those over 65 and **ALL ARE ON THE RISE** in this age group:

- High Blood Pressure (55%)
- High Cholesterol (45%)
- Diabetes (20%)
- Cancer (>10)
- Mental Illness (>10%)
- Back Problems (>10%)

Multiple other conditions pose a significant threat of disability as we get older:

- Obesity
- Coronary Disease/ Congestive Heart Failure
- TIA/Stroke
- Arthritis
- Bladder and Bowel difficulties
- Infection
- Lung disease
- Kidney disease

Most individuals develop **MULTIPLE** chronic conditions as they age:

- For 65-75 year olds
- >20% had a chronic condition

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- >50 % had two-four chronic conditions
- This trend increases after 75 years of age with >20% having more than five chronic conditions.

Primary care physicians are the “go-to person” for nearly all the above conditions yet, somehow, their role seems to be minimized by many polio survivors.

It has been my sense that this is, at least in part, due to a frequent “disconnect” that occurs when the issue of polio or post-polio related issues come up. Most PCPs willingly admit to a lack of expertise in this area and, sometimes, this creates a dynamic that their opinion on other matters is also downgraded. In fact, from my standpoint, it is unreasonable to expect that a PCP have extensive post-polio knowledge.

Rather than downgrading the PCP opinion on other matters, it is my opinion that polio survivors are better off being unusually grateful for the PCP. Since the vast majority of physicians went into medicine for good reasons, a statement like “I really need your help with ...” goes a long way. Consider comments like “I really appreciate your keeping such a close eye on my blood pressure” or “My polio slows me down enough, I’m really glad that you help me tightly control my diabetes, so I won’t have complications that worsen my disability.” These comments will increase the connection rather than allow a disconnection that may result when a PCP is not familiar with concerns that relate to adaptation to slow progress of weakness and chronic disability (aka PPS).

Having said all of the above, most of us have noticed that medicine has been changing. There may be PCPs out there that just won’t engage. In this case: find another PCP. One physician’s lack of interest should not dictate a polio survivor to poor future health.

Polio survivors, as a group, have a long history of focusing on goals and making things happen despite adversity. It is surprising that in dealing with the healthcare system, some can become passive or even fatalistic. In my opinion, the same “Can Do” attitude can be applied to assuring optimal health care by working with the healthcare system to insure that it meets their needs.

The stakes are too great not to address the issue. If developing polio is seen as a strike, and post-polio is a second strike, one more unmanaged (yet preventable) chronic condition could be the last strike leading to severe disability and loss of independent living.

In this light, one can say that the role of the PCP becomes even greater, not less, for aging polio survivors.

Reprinted from Post-Polio Health

Vol 33, No 1 Winter 2017 [www.post-polio.org](http://www.post-polio.org)

Editors note: **APPA NEWS** would like to thank Post-Polio Health International for the use of this article. Their cooperation is sincerely appreciated.

# Miscellany



Brand new 2017 Mustang. I've been hoping to find a super deal on one of these. Never thought to try the thrift store.



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# Tech Bits & Bytes

By Joe Drogan

There is a lot of scary computer hacking going on out there. You've probably heard about the recent ransomware attack in Europe. This kind of attack is where a hacker gets control of your computer system, encrypts the hard drive, and won't give you the unlock key until you pay a ransom to them. This payment usually in the form of Bitcoin. They use Bitcoin because it is pseudonymous. No paying the ransom in a dark alley where the cops jump out of hiding and grab him. There was a time when I was raising my teenage boys on my own where if they had gotten kidnapped, no pun intended, and held for ransom I might have said "Not only will I pay the ransom, I'll double it if you don't bring 'em back!" Ok that aside I used a couple of terms we need to discuss. First, what in the world is Bitcoin? A bitcoin is a form of digital currency developed in 2009. It isn't tied to any particular government central bank. With some effort it can become somewhat anonymous. Is it the currency of the future? Remains to be seen. It is gaining credibility around the world. Stay tuned. Second, what is encryption? Simply put - it is a way of encoding your data so without the key it can't be read. Remember the Secret Decoder Ring from the 50's? Here is a super simple way of encoding a message.

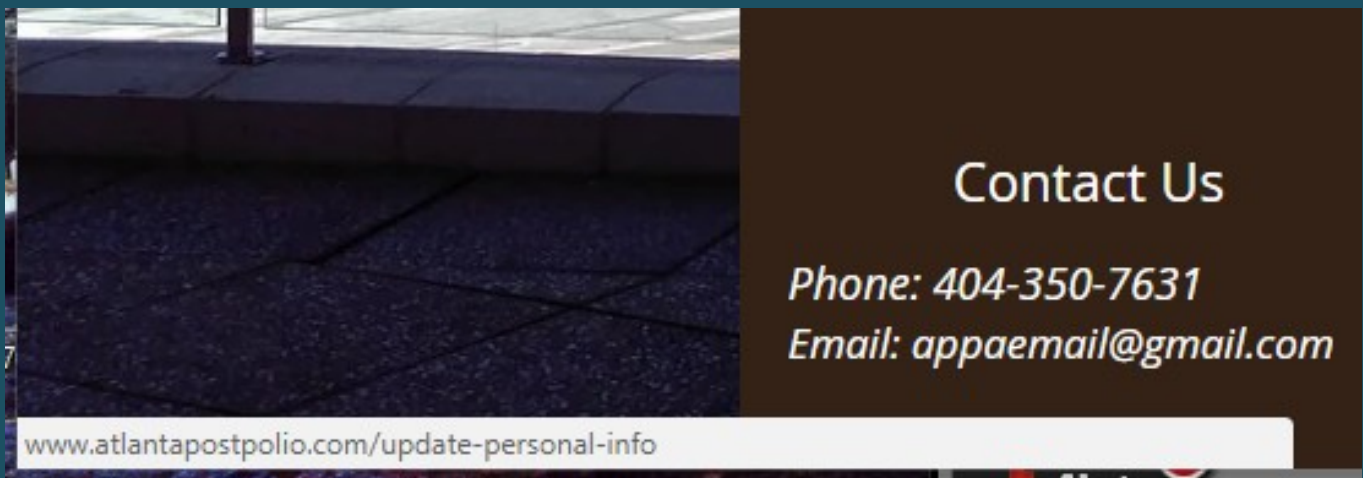
For the letters A=R, B=S, C=X and so forth for the entire alphabet and numbers too. So if you and I have a copy of the codes and I send you a note that says RSX you know I mean ABC. Without a copy of the decoding "rules" our messages are kind of secret. This would be loosely described as a level 1 code. To make it even more secure we could have another level so after the first "translation" where RSX became ABC we have a key that says A=C, B=A, C=T so the message RSX really means CAT. Obviously this can get very complicated such as military grade encryption.

So how do we prevent some hacker from getting into our systems? It's just like safecrackers. If the guy trying to crack the safe is more talented and persistent than the safes designer, bingo, he gets it open. Same with computer security. But, we don't have to make it easier for them. Years ago I was working in tech support and went by an employee's cubicle to help with a problem they were having with their system. I powered it up, went to the sign on screen, typed in their username, tabbed down to the password and keyed it in, and hit enter. I was signed in! He looked at me like I was a computer god and said how did you know my password? I said "It's right there on your monitor on a sticky note." One thing you should do is create secure passwords.

Continued on next page

Don't make them easy to guess. My passwords aren't anything like Sushi Cat, or penguin or anything resembling a real word. Better ones are a combination of letters, numbers, capital letters, lowercase letters, and even special characters. As I mentioned long ago you can use an algorithm to make it easy to remember multiple passwords. That goes like this: memorize a five character **base** like **z\$A9!**. Create a rule for any website like "last 3 letters of the website's name + my **base**." So your Google password becomes gle**z\$A9!** Your Yahoo one is hoo**z\$A9!** That's a bit harder to guess than penguin.

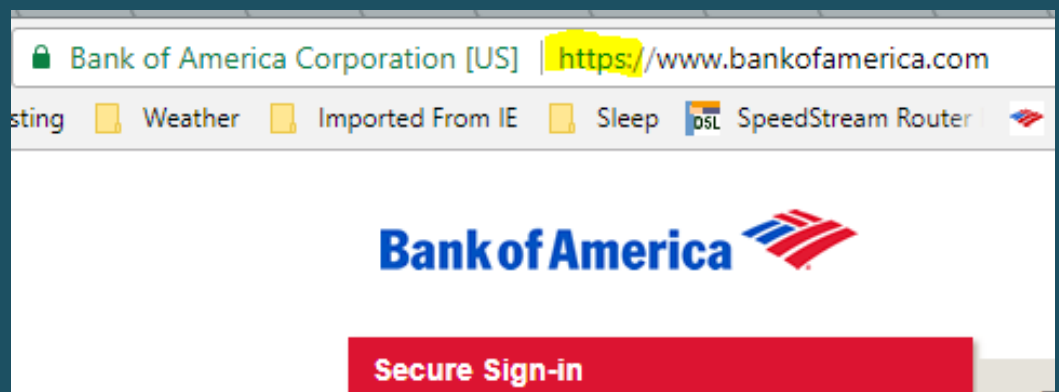
Ok and this is a biggie! Notice how on our webpage when I hovered over the Update Personal Information link on our home page the address this link will go to is presented in the white box at the bottom of the page. If the address there doesn't look like where you should be going **DON'T CLICK ON THE LINK**. Like if it says **www.hackers-R-US**, stay away! This link preview works on virtually all browsers.



One more thing before I go...in your browser, when you go to any site involving money or your privacy in any way, when you think you are on the site, like here Bank of America's site, check the address at the top of your browser. It must say **httpS//.....**

The "**S**" in **httpS** is critical. It means the site is secure.

*Be careful out there!*



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





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## APPA 2017 CALENDAR

September 9	TBA
October 7	TBA
November 16	Georgia Gives Day
December 2	Christmas Luncheon



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