

Polio News

P R E S E N T E D B Y

W I L D R O S E P O L I O S U P P O R T S O C I E T Y

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A MESSAGE FROM YOUR PRESIDENT

“Summer time and the livin is easy...” I hope that your summer will be easy and enjoyable. If you are travelling anywhere I hope you have a great time and come back safely.

Thank you to everyone who came out to our Annual General Meeting. We had a great turnout; your participation was very much appreciated. See inside this issue for highlights of the AGM as well as photographs to show that you can have fun—even at an AGM.

Our Reimbursement program has undergone some changes [some only temporary] check out the article starting on page 10 to learn all about the changes.

At the time of writing this message our Casino is still a couple of weeks away, but by the time you read this it will be finished. I’d like to thank, in advance, all of the volunteers that participated. Special recognition to George and Marie Kunec who once again took on this task. It’s a major undertaking—yet they seem so relaxed and in control. Thanks guys !!

Our next social event will be our barbeque at Hawrelak Park in July. Come join us, bring your own food and drinks. Let’s hope the weather participates.

Once again, have a great summer and wear lots of sunscreen!!

Marleen Henley
President

LAUGHTER IS GOOD MEDICINE

ABOUT GROWING OLDER...

First - Eventually you will reach a point when you stop lying about your age and start bragging about it.

Second - The older we get, the fewer things seem worth waiting in line for.

Third - Some people try to turn back their odometers. Not me; I want people to know 'why' I look this way. I've traveled a long way, and some of the roads weren't paved.

Fourth - When you are dissatisfied and would like to go back to youth, think of Algebra.

Fifth - You know you are getting old when everything either dries up or leaks.

Sixth - I don't know how I got over the hill without getting to the top.

Seventh - One of the many things no one tells you about aging is that it's such a nice change from being young.

Eighth - One must wait until evening to see how splendid the day has been.

Ninth - Being young is beautiful, but being old is comfortable and relaxed.

Tenth - Long ago, when men cursed and beat the ground with sticks, it was called witchcraft. Today it's called golf.

And, finally - If you don't learn to laugh at trouble, you won't have anything to laugh at when you're old.

DID I READ THAT SIGN RIGHT

Something Went Wrong in Jet Crash, Expert Says Really? Ya think?

War Dims Hope for Peace
I can see where it might have that effect!

If Strike Isn't Settled Quickly, It May Last A while Ya think?!

Cold Wave Linked to Temperatures
Who would have thought?!

Enfield (London) Couple Slain; Police Suspect Homicide
They may be onto something!

Man Struck By Lightning Faces Battery Charge
He probably IS the battery charge!

New Study of Obesity Looks for Larger Test Group
Weren't they fat enough?!

Astronaut Takes Blame for Gas in Spacecraft
That's what he gets for eating those beans!

Local High School Dropouts Cut in Half
Chainsaw Massacre all over again

GAMES FOR WHEN WE ARE OLDER

1. Sag, you're It.
2. Hide and go pee.
3. 20 questions shouted into your good ear.
4. Kick the bucket
5. Red Rover, Red Rover, the nurse says Bend Over.
6. Musical recliners.
7. Simon says something incoherent.
8. Pin the Toupee on the bald guy

SIGNS OF MENOPAUSE

1. You sell your home heating system at a yard sale.
2. You have to write post-it notes with your kids' names on them.
3. You change your underwear after a sneeze.

OLD IS WHEN:

1. Going bra-less pulls all the wrinkles out of your face.
2. You don't care where your spouse goes, just as long as you don't have to go along.
3. Getting a little action means I

4. don't need fiber today.
4. Getting lucky means you find your car in the parking lot.
5. An all-nighter means not getting up to pee!

THOUGHTS FOR THE WEEKEND

1. Wouldn't it be nice if whenever we messed up our life we could simply press 'Ctr Alt Delete' and start all over?
2. Brain cells come and brain cells go, but fat cells live forever

REIMBURSEMENT STATISTICS

Here are the reimbursement program statistics from February 1st to April 30th, 2016

Therapy: 4 members claimed \$1,145

Aids & Devices: 2 members claimed \$2,000

EVENTS



PICNIC IN THE PARK

Hawrelak Park

Friday July 15

11am to 3pm

No cost—just bring your own food

At the AGM some people suggested that there should be a social event held at the Baseball Park [formerly Telus Field]. Rick Meunier has looked into this possibility and reported back to the board. Unfortunately the board felt that it will not work for WPSS. First of all the minimum number required is higher than we believe we can make and secondly there is very little wheel chair access.

Do you have any other suggestions about social events. Send an email or telephone the office with your suggestions and we will see what we can do. The board will look into all suggestions and we will let you know the outcome. Thinking caps on!

EXECUTIVE

President Marleen Henley: Vice President George Kunec: Secretary Corinne Reid : Treasurer Erna Warnes

DIRECTORS

Marie Kunec, Marion Chomik, Maxine Madison, Rick Meunier, Bernd Schwanke, Darlene Procyshyn
Office Glyn or Chris Smith., tel: 780-428-8842, fax: 780-475-7968, Email: wpss@polioalberta.ca

DISCLAIMER

Information published in the Polio News and/or the Wildrose Polio Support Society web site may not represent the opinion of the Society. It is not to be regarded as the Society's endorsement of treatment, products or individuals. If you have or suspect you may have a health problem, please consult your health care professional.

LIFE IS LIKE A JOURNEY ON A TRAIN . . .

Life is like a journey on a train . . . with its stations . . . with changes of routes . . . and with accidents!

At birth, we boarded the train and met our parents, and we believe they will always travel on our side.

However, at some station our parents will step down from the train, leaving us on this journey alone.

As time goes by, other people will board the train; and they will be significant i.e. our siblings, friends, children, and even the love of our life.

Many will step down and leave a permanent vacuum.

Others will go so unnoticed that we don't realize that they vacated their seats!

This train ride will be full of joy, sorrow, fantasy, expectations, hellos, goodbyes, and farewells.

Success consists of having a good relationship with all passengers . . . requiring that we give the best of ourselves.

The mystery to everyone is: We do not know at which station we ourselves will step down. So, we must live in the best way – love, forgive, and offer the best of who we are.

It is important to do this because when the time comes for us to step down and leave our seat empty – we should leave behind beautiful memories for those who will continue to travel on the train of life.

Reap success and give lots of love. More importantly, thank God for the journey!

SECOND TIME AROUND, SEPTEMBER, 2014 – PUBLICATION OF BOCA AREA POST POLIO GROUP, BOCA RATON, FL 13

ON THE MOVE **BY ANITA WOLFE, BAPPG MEMBER**

Under the covers and out of sight

is our age moving in

in the darkness of night.

You can't touch it, you can't see it

but – you can feel the change – and

then someone turns on the light.

And here you are – someone older – and

maybe wiser – but a different “You”.

You've journeyed through life

and made things do.

Now – it's all new challenges and

wondering how to make it through!!

*So – we put on a smile and say I'm great – and just leave
the rest up to fate.*

We can talk about it – we can feel it –

and only hope our aging years will

be an easy pace –

Not too hard for us to face!!

SECOND TIME AROUND, JUNE, 2014 – PUBLICATION OF BOCA AREA
POST POLIO GROUP, BOCA RATON, FL

TREATMENT FOR POST POLIO SYNDROME

Review question

What are the effects of different treatments in people with postpolio syndrome (PPS)?

Background

PPS is a condition that can affect polio survivors years after recovery from an initial paralytic attack by the polio virus. PPS is characterised by progressive or new muscle weakness or decreased muscle endurance in muscles that were previously affected by the polio infection and in muscles that were seemingly unaffected. Other symptoms may include generalised fatigue and pain. These symptoms often lead to a decline in physical functioning, for example, trouble walking. The objective of this review was to assess the benefits and harms of different drugs and rehabilitation treatments compared to placebo (a pill or procedure without any physiological effect), usual care or no treatment.

Study characteristics

We searched scientific databases to find all studies on treatments for PPS up to July 2014. We found 13 studies involving a total of 675 participants that were of sufficient quality to include in this review. Ten studies evaluated the effects of drugs (modafinil, intravenous immunoglobulin (IVIg), pyridostigmine, lamotrigine, amantadine, prednisone), and three studies evaluated other treatments (muscle strengthening, rehabilitation in a warm climate (that is temperature $\pm 25^{\circ}\text{C}$, dry and sunny) and a cold climate (that is temperature $\pm 0^{\circ}\text{C}$, rainy or snowy), static magnetic fields).

Key results and quality of the evidence

IVIg is a treatment in which antibodies that have been purified from donated blood are given as an infusion into a vein over a period of time. There was moderate- and low-quality evidence that IVIg has no beneficial effect on activity limitations in the short term and long term, respectively.

Evidence for effectiveness on muscle strength was inconsistent, as results differed across studies. IVIg caused minor side effects in a substantial proportion of the participants.

Lamotrigine is a drug used to help control certain kinds of epilepsy and to treat bipolar psychiatric disorder. Results of one trial provided very low-quality evidence that lamotrigine might be effective in reducing pain and fatigue, resulting in fewer activity limitations, and in this study it was well-tolerated. We based these conclusions on results of only one small trial with important limitations in study design.

There was very low-quality evidence that muscle strengthening of thumb muscles is safe and beneficial for improving muscle strength. Again, we based these conclusions on results of only one small trial with important limitations in study design, and they are applicable only to thumb muscles.

Static magnetic fields is a therapy in which electrical currents are applied to the skin with the intention of reducing pain. There was moderate-quality evidence that static magnetic fields are safe and beneficial for reducing pain directly after treatment, although functional effects on activity limitations and long-term effects are unknown.

Finally, there was evidence varying from very low quality to high quality that modafinil, pyridostigmine, amantadine, prednisone and rehabilitation in a warm or cold climate are not beneficial in PPS.

Authors' conclusions:

Due to insufficient good-quality data and lack of randomised studies, it was impossible to draw definite conclusions about the effectiveness of interventions for PPS. Results indicated that IVIg, lamotrigine, muscle strengthening exercises and static magnetic fields may be beneficial but need further investigation to clarify whether any real and meaningful effect exists.

Source: www.cochrane.org—Published 18 May 2015

Authors: *Koopman F, Beelen A, Gilhus N, de Visser M, Nollet F*

Polio Oz winter 2015

EXERCISES RECOMMENDED BY POLIO HEALTH INTERNATIONAL

Seated on a Chair with Arms: (Do not rush the exercise).

Place your hands on your knees, then, simultaneously raise your arms overhead and breathe in deeply. Lower your arms and exhale. Complete 5 times.

Stretch your arms straight in front of you and then, slowly twist your arms and your body to the left and then, to the right. Complete 5 times.

Grasp the arm rests, lean forward and pushing down on your hands on the chair arms; try to lift your bottom off the chair. Complete 5 times.

Lean back into the chair and try to lift your right knee up. Lower the right knee and do the same with the left knee. Complete 5 times with each leg.

Lean back and try to straighten out your right knee and lift your foot up as high as you can. Lower the right foot and do the same exercise with your left leg. Complete 5 times with each leg.

Place both your hands on the arms of the chair and holding the head, neck and trunk still, straighten your arms and lift your buttocks 2-3 inches above the seat of the chair. Relax. Complete 5 times.

Seated: (Do not rush the exercise).

Pick up your leg and hold it up and then try to move your foot to the left and then to the right. If possible, keep your knee up without holding it up.

Reach first as far forward as possible, and then simultaneously exhale and bend forward as far as possible.

After bending forward, simultaneously reach up overhead and breathe in as deeply as possible. Very slowly complete 5 times

. Reach up toward the ceiling and simultaneously inhale as deeply as possible. Exhale and bend to the right as far as you can. Straighten up again, inhaling as you reach up. Then, exhale and bend to the left as far as possible. Complete 3 times, resting between each repetition.

Fold your arms across your chest. Rotate your body to the right as far as possible and then to the left. Complete 10 times

Pull your chin straight back and flatten the back of your neck pulling the ears directly over the shoulder joints. Relax after each repetition. Complete 10 times.

Hold both arms straight ahead with the elbows slightly bent. Pinch your shoulder blades together toward your spine. Hold for a count of five and then relax. Complete 10 times.

Place both hands on your right knee. Keeping your hands together and elbows straight, reach with both hands up and out to the left side twisting your body to the left as far as possible. Lower your hands to your left knee and then, complete the exercise moving to the right. Complete 3 times, resting between each repetition.

Try to blow up a balloon. Rest for 20-30 minutes after completing the exercises. And drink a glass of water.

Lying on Your Bed: (Do not rush the exercise).

Lift one leg straight up as you are able without bending the knee. Repeat with your other leg.

Place a small rolled towel behind your knee and then try to straighten that knee.
Bend both legs and place your feet so that they are flat on the bed. Reach with your hands up toward your knees and lift your head and shoulders.
Bend both legs and place your feet so that they are flat on the bed. Move both knees as far as possible to.

the left and then to the right as far as possible. Bend both legs and place your feet so that they are flat on the bed. Reach with your hands up toward the left and twist your body to the left also. Do the same to the right.

Turn over and lie on your stomach. Put your arms at your sides and try to lift your head and shoulders up as far as possible

In addition, try to lie on your stomach and up on your elbows. Keep your hips down and in contact with the bed. Stay in this position for 2 minutes. Fold a tissue in half and then in thirds. Grasp the tissue at the top and hold the tissue three inches in front of the mouth. Purse your lips and blow out as hard as possible against the tissue attempting to bend the tissue 90 degrees and to keep it bent at 90 degrees for a count of six. Complete 5 repetitions of this exercise and then rest for several minutes.

Place your hands below the ribs across the upper abdomen. Simultaneously exhale and compress the upper abdomen. Then, breathe in as deeply as possible and attempt to force your hands out. Release pressure

on your abdomen as the downward movement of the diaphragm is felt. Complete 5 repetitions and rest for several minutes.

Standing and Holding Onto a Counter: (Do not rush the exercise).

Move the right leg as far as possible to the right. Make sure that the toes are pointing straight forward throughout the exercise. Do the same with the left leg.

Bend both knees about 30 degrees and no further. Straighten both knees.

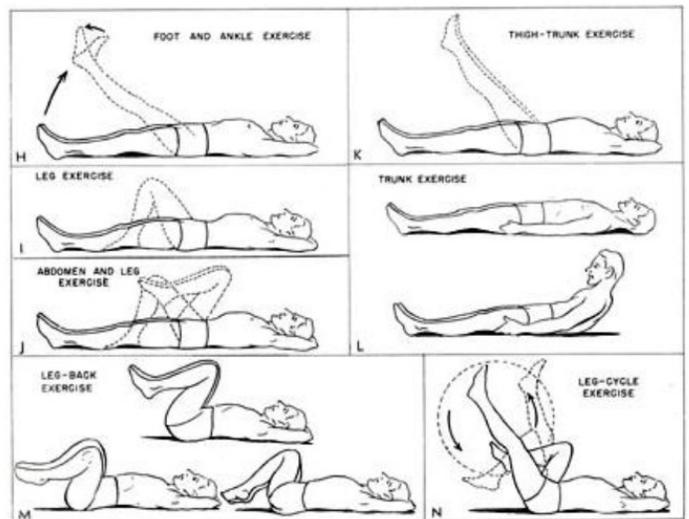
Do all the exercises above 20 times, twice daily if you can. Remember to not get fatigued.

Reprinted from *Connections*, CO, Spring, 2015

SECOND TIME AROUND, FEBRUARY, 2016 – PUBLICATION OF BOCA AREA POST POLIO GROUP, BOCA RATON, FL

Editors Note

Wildrose Polio Support Society has printed this article for information and takes no responsibility for any of the activities described in this article. Please check with a professional before carrying out these exercises.



ANNUAL GENERAL MEETING APRIL 23, 2016



YOUR 2016-17 BOARD OF DIRECTORS

[back row—left—right] Maxine Madison, George Kunec, Corinne Reid, Bernd Schwanke, Erna Warnes, Darlene Procyshyn, Rick Meunier. [front row] Marion Chomik, Marleen Henley, Marie Kunec



ANNUAL GENERAL MEETING APRIL 23, 2016



REIMBURSEMENT PROGRAM

During the last fiscal year [November 1, 2014 to October 31, 2015] the following was paid to members in reimbursements for Therapy and Aids and Devices.

Therapy: 17 members claimed a total of \$8,795.25*

Aids & Devices: 24 members claimed a total of \$8,830.87

*The actual amount spend on therapy was \$11,095.25. The extra amount of \$2,300 was expenses incurred for the services of Activate Exercise Therapy [pool therapy].

Access to these funds has increased even more in the current year. There was a 33% increase in payments for aids and devices since last year.

There are three changes that members need to be aware of.

1. Suspension of payments.

A letter from the Board to Members

REIMBURSEMENT PAYMENTS

April 4, 2016

Dear WPSS member,

As you are probably aware, the funding for the reimbursement program is provided from the Casino account. Other day to day operational costs are also partially funded from this account.

At the last board meeting the board of directors reviewed the Casino account and decided that there were only sufficient funds in the account to pay for the day to day operations of the Society.

The decision was made:

Effective from after the day of the meeting [March 29th] that claims received would be put on hold.

This is not a cancellation of the Reimbursement program – your claims will be paid when we receive the next casino funds. This will probably happen in September or October.

Please do not send in your claims at this time. Please hold them and submit them to the office in mid-September.

The board regret having to take this step but it is also aware of its fiscal responsibilities.

Should you have any questions or concerns about the above feel free to contact Glyn in the office at 780-428-8842 or by email at wpss@polioalberta.ca

2. Reduction of Aids and Devices Reimbursement

At the AGM the following motion was presented by the board and was approved by the membership.

Motion: to reduce reimbursement for aids and devices to a maximum of \$750, per polio survivor, per year effective May 1, 2016

The reason for the board putting this motion forward was explained by the President.

Marleen explained that the Casino account, which pays these expenses. is running out of money. There was a question as to if this reduction would last. Marleen replied that it would have to be considered on a year to year basis. There is no change to the Therapy Reimbursement

There was a question as to how many people were reaching their maximum. Although there was no exact figure available at the meeting it was announced that a lot of them were. Marion Chomik stated that there was a 33% increase in aids and devices since last year.

3. Other sources of payment for Reimbursement [Aids & Devices]

At the first meeting of the new board there was lengthy discussion about other sources of reimbursement that members should seek prior to applying for reimbursement for Aid and Devices. The current claim form does state "I understand that reimbursement of these expenses may only be requested after I have exhausted all benefits available from all plans through which I am covered". It was felt that some members may not be aware of other sources of full or partial reimbursement for aids and devices. Such sources as Aids to Daily Living or your insurance company may be able to contribute to these purchases. Members then should contact Aids to Daily Living and their insurance company first. If they are refused or receive only partial reimbursement only then should they submit a WPSS claim form. The WPSS claim form must be accompanied by written statements from the parties refusing or only partially covering the cost of the item. This will enable available funding to be made available to more members. Below is the motion passed by the board at its meeting on May 31, 2016.

Motion: For Aids and Devices claims co-payments statement from Aids to Daily Living and your Insurance Company must be submitted with a claim. This directive will be effective June 1. 2016.

If you receive your newsletter by mail you will find a copy of the revised form inside. If you receive an electronic copy of the newsletter please go to the web site and select Reimbursement program under Support http://www.polioalberta.ca/wildrose/reimbursement_service.htm

Please discard older forms and use only the new ones for all claims. Copies of the forms can be obtained from the office.

REPORT FROM THE AGM

The WPSS Annual general Meeting was held on Saturday April 23, 2016 at the ACT Centre in Rundle Park with 43 members in attendance. The meeting started with the lighting of a candle to remember all those members who passed away during the past year.

Reports were presented by the various Directors. It was reported that the reimbursement program was very popular with 17 members claimed a total of \$8,795.25 [plus \$2,300 for the services of Activate Exercise Therapy] for Therapy. For Aids and Devices 24 members claimed a total of \$8,830.87. Membership for the year was: Individuals 51; Couples 41; Honorary 3 for a total of 95 paid members. The Newsletter editor requested that members put pen to paper [or fingers to keyboards] and write an article for the newsletter.

The slate of board members presented by the nomi-

nation committee was accepted by the meeting. One new member to the board is Darlene Procyshyn. See page 8 for a photograph of the new board and on page 3 can be found the list of officers and directors.

During the Any Other Business section there was a question about the sustainability of the membership. Marion Chomik stated that the membership remained fairly steady. There was also a question "is there a national organization for polio". The response was that there was but most activities seem to occur in Central Canada. The membership felt that the national association needs to be more active country wide.

There was discussion about the Reimbursement program. See page 10 for an article about this program and some changes that have been made.

THE TRUTH ABOUT FATS & OILS

DIANA HERRINGTON

Are you confused about fats and oils in your diet?

There is a common diet trend that eliminates fats for weight loss and health. Eliminating dietary fats is not good for the body.

We need dietary fats. It is impossible to eliminate them totally as fat is found in most foods; even green peas and carrots have small amounts of fat in them.

Dietary fats help with many basic functions in the body:

- Protect your organs
- Help keep your body warm.
- Fats help your body absorb fat-soluble vitamins A, D, E and K and stores them in the liver and in fatty tissues for future use.
- Cholesterol, which is created by fat, produces important hormones like estrogen and testosterone.

Yes, we need fat but not as much as we usually eat.

There are three main dietary fats. Each fat has different chemical structures and physical properties. Unsaturated Fats (called the good fats) can improve blood cholesterol levels, ease inflammation and stabilize heart rhythms. They are liquids at room temperature.

Two types of unsaturated fats:

Monounsaturated Fats are found in high concentrations in olive oil, peanut oil, avocados, almonds, hazelnuts, pecans, pumpkin seeds and sesame seeds.

Polyunsaturated Fats are found in high concentrations in sunflower, corn, soybean, flaxseed oils, walnuts, flax seeds and fish. Omega-3 fats are one important type of polyunsaturated fat. The body can't produce these, so they must come from food.

Most of us don't get enough of these healthy unsaturated fats. The traditional Greek diet gets up to 30 percent of its calories from monounsaturated fats, mostly from olive oil.

Trans Fat raises bad cholesterol and increases the risk of heart disease. Even worse, it lowers good cholesterol! The American Heart Association recommends limiting your trans fat daily consumption to less than 1 percent.

Scientists have now established that trans fats found in many fast foods, bakery products and margarines increase the risk of cardiovascular disease through inflammatory processes

Saturated Fats, according to old research, raises blood cholesterol levels. High blood cholesterol is a risk factor for heart disease. Foods containing saturated fat include: Lard, pork, regular ground beef, bologna, hot dogs, sausage, bacon, full-fat cheese, ice cream, whole milk, sour cream, butter, palm oil, coconut oil, chicken and turkey skin.

The Cholesterol Myth

Cholesterol is a natural part of our body; we have between 1,000 and 2,000 milligrams of cholesterol in our body at any time depending on our body size. Three quarters of it is produced our body's liver, and one quarter comes from our diet, much of that is unable to be absorbed by our body. We have a sophisticated control system that controls the amount of cholesterol in the blood by controlling internal production. When there is not enough cholesterol coming in, your body creates more. When there is too much coming in our body makes less.

Saturated fats like butter and coconut oil have a bad public image. Research studies in both animals and humans, done more than half a century ago, stated that saturated fats raise blood cholesterol and cause heart disease. Coconut oil research done in the past used hydrogenated coconut oil, which is a trans fat. These studies were also only conducted for a few weeks, rather than long term. There are more recent

studies of a higher quality that show different results. Data from 21 studies with nearly 348,000 adults, found no difference in the risks of heart disease and stroke between people with the lowest and highest intakes of saturated fat.

Unsaturated Oil is Not as Good as We Thought!

Unsaturated oils in cooked foods become rancid within a few hours, even in the refrigerator. Once fresh unsaturated fats are inside the body, they oxidize (turn rancid). Coconut oil does not go rancid even after one year at room temperature. Even ghee, made from butter, will last for 3 to 6 months at room temperature. Most of the saturated fat in coconut oil is easy to digest and converts into quick energy so people are less likely to become obese, as the fat is not stored.

To quote Dr. Mary Enig: "The research over four decades concerning coconut oil in the diet and heart disease is quite clear: coconut oil has been shown to be beneficial." Coconut oil has been used as cooking oil for thousands of years.

Stay Away From Trans Fats!

Remember when they told us to eat margarine instead of butter? It turns out that most margarine is filled with trans fats and butter is fine when used in moderation.

The real problem-fats in our diets are the trans fats also known as hydrogenated oils; they are found in most processed food, including margarine, potato chips, baked goods etc. They are toxic, blocking absorption of essential fatty acids and raising blood cholesterol.

All Fat Have Calories!

Also, whether it is olive oil, ghee, butter or coconut oil ... they are all 100 percent fat! No matter how good the oil sounds....remember that it is still a fat, with 120 calories per tablespoon. Consuming a high fat diet may lead to becoming overweight and that is not healthy!

ANNOUNCEMENTS

SWIM SCHEDULE

ACT Aquatic & Recreation Centre

In the heart of Rundle Park
2909 113 Avenue NW
Edmonton Alberta
(780) 496-1494

Tuesdays 5:00 pm to 6:00 pm
Saturdays 4:00 pm to 5:00 pm

RATES:

No charge to members during WPSS scheduled times.

HAPPY BIRTHDAY!



July 5	Ballesteros	Loida
July 12	Schwanke	Bernd
July 15	Gronau	Julie
July 17	Engels	Helen
July 17	Robinson	Linda
July 18	Betke	Doreen
July 26	Hewko	Betty Lou
August 12	Henley	Marleen
August 13	Karbonik	Hilda
August 22	MacLeod	Marshall
August 25	Franklin	Anna
August 26	Onushko	Vivian
August 27	Hornung	Bernd
August 30	Procyshyn	Darlene
Sept 18	Kozub	Florence
Sept 19	Belva	Eileen
Sept 27	Millar Long	Bette Ann

Welcome to the following New Members

Mario Lindsay
Margueritte Owings

In Memory of

[Empty dashed box for memorial text]

WE'RE ON THE WEB
<http://www.polioalberta.ca/wildrose/wpss.htm>

**WILDROSE POLIO
SUPPORT SOCIETY**

132 Warwick Road NW
Edmonton AB T5X 4P8
Phone: (780) 428-8842
Fax: (780) 475-7968
E-mail: wpss@polioalberta.ca



Providing support for Polio survivors

The Wildrose Polio Support Society (WPSS) was formed in 1999 to provide information and support to Polio survivors.

The objects of the WPSS are:

- 1 To provide education to members in respect to post polio syndrome;
- 2 To provide group support and therapeutic support to polio survivors and to provide other support as approved by the Board of Directors;
- 3 To disseminate information concerning research and treatment about post polio syndrome;
- 4 To raise monies for research into post polio syndrome and to donate same to such institution that is conducting research into post polio syndrome as the members of the Society shall decide;
- 5 To develop awareness, communication and education between the Society and the Community.

WPSS News sponsored in part by



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Edmonton AB T6E 0C4
Phone: (780) 434-1314
Fax: (780) 434-1514
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Do you have an announcement that you would like us to publish?

Send an email to: wpss@polioalberta.ca

Telephone: 780-428-8842

Mail: 132 Warwick Road NW
Edmonton AB T5X 4P8

Wildrose Polio Support Society

132 Warwick Road NW
Edmonton AB T5X 4P8

2016 Member / Donor Form [Membership year is January 1 to December 31]

NAME(S):

MEMBER _____

[Polio Survivor]

ASSOCIATE MEMBER _____

[Husband/Wife/Caregiver]

ADDRESS: _____

CITY: _____ **POSTAL CODE:** _____

PHONE (DAY): _____ **PHONE (EVENING):** _____

FAX: _____ **POLIO YEAR:** _____

E-MAIL: _____ **BIRTHDAY MONTH:** _____ **DAY:** _____

SENIOR [60 or over] YES NO

MEMBERSHIP: Associate YES NO

Individual (\$20.00) \$ _____

Couple (\$30.00) \$ _____

DONATION: \$ _____

TOTAL ENCLOSED: \$ _____

DATE: _____

I would like to receive my newsletter; by email by regular mail

HOW DID YOU HEAR ABOUT WPSS: _____

The Wildrose Polio Support Society will use this information solely for the express purpose of the functions of the Society. We will not disclose personal information for commercial purposes without your permission.

Registered Charity No. 867883985RR001