

Polio Australia Incorporated

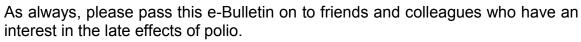
Representing polio survivors throughout Australia



e-Bulletin December 2010

Seasons Greetings

Polio Australia would like to take this opportunity to wish everyone Greetings of the Season, and may you have a healthy and happy New Year full of pleasant surprises.





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New Vaccine to Assist Worldwide Eradication of Polio

Scientists at the University of Leeds are joining the global fight to eradicate polio by developing a new type of vaccine that can trick the body to develop immunity against the disease.

Led by Professor Dave Rowlands and Dr Nicola Stonehouse from the University's Faculty of Biological Sciences, the research team will design a replica virus particle that looks and behaves like the real virus, but is actually an empty protein shell.

The researchers believe the hoax virus will trigger the body's immune system, but because it does not contain the genetic blueprint that replicates the virus inside the body, has no chance of causing or helping to spread the disease. Read more here.

Polio Eradication this Week



Eighteen new cases are reported from central Africa (in Angola, Democratic Republic of the Congo - DR Congo - and the Republic of Congo). The outbreak in central Africa remains the greatest risk to Africa's polio eradication effort, particularly given the recent progress achieved elsewhere on the continent.

India is recording the lowest-ever levels of polio transmission (both WPV1 and WPV3) during any high transmission season. This is extremely significant to the global polio eradication effort, given that India is arguably the most

technically challenging of the remaining endemic countries in terms of polio eradication.

Ramesh Ferris: Cycle to Walk In Australia 2012



On April 12th 2008, Ramesh Ferris departed from Victoria, B.C., Canada and after travelling more than 7,110 kilometres by handcycle he reached Cape Spear, N.L., on October 1st.

A 30-year-old polio survivor, Ramesh was adopted from India by Canadian parents in 1982. He can walk with the assistance of braces and crutches; however, his legs are not strong enough to propel a conventional bicycle. Instead, he rides using a hand cycle which relies upon his powerful upper body strength to maximize distance and speed.

He visited India in 2002 and witnessed the devastating reality for polio victims who do not have rehabilitative supports. Upon his return to Canada, Ramesh vowed to help. Cycle to Walk was born.

In 2012, Ramesh plans to bring his handcycle over to Australia for another epic journey from Queensland to Victoria. Of course, there is a great deal of preparation and publicity involved in this type of campaign and he is seeking the support of Rotary Clubs along the route. Polio Support groups on Australia's East coast should also feel encouraged to spread the word and to lend their support in other ways yet to be determined. Watch this space for updates.

According to <u>Ramesh's website</u>, "Cycle to Walk aims to raise funds and awareness to forward the global eradication of polio, to educate about the continuing need for immunization against polio and to support the rehabilitation of polio survivors in poor countries."

Medicare Rebates for Individual Allied Health Services

- for patients with a chronic medical condition and complex care needs

Did you know that people experiencing the Late Effects of Polio (a chronic medical condition) may be eligible to receive five free visits to a range of allied health professionals under the Medicare Rebates for Individual Allied Health Services scheme? It is well known that polio survivors can benefit from the ministrations of many of the service providers listed below, especially if these health professionals are knowledgeable about the Late Effects of Polio, or are open to further information.

A chronic medical condition is one that has been (or is likely to be) present for six months or longer. It includes conditions such as asthma, cancer, cardiovascular disease, diabetes, musculoskeletal conditions and stroke.

Patients have complex care needs if they need ongoing care from a multidisciplinary team consisting of their GP and at least two other health or care providers.

A referral is valid for the stated number of services. If all services are not used during the calendar year in which the patient was referred, the unused services can be used in the next calendar year. However, those services will be counted as part of the five rebates for allied health services available to the patient during that calendar year. When all referred services have been used, or a referral to a different allied health professional is required, patients need to obtain a new referral. The following Allied Health Professionals can be accessed under the scheme:



- Audiologist
 - Chiropractor
- Diabetes Educator
- Dietitian
- Exercise Physiologist
 - Mental Health Worker
- Occupational Therapist
- Osteopath
- Physiotherapist
- Podiatrist
- Psychologist
- Speech Pathologist







Complementary and Alternative Therapies

Complementary therapies complement conventional medical treatment, while alternative therapies are those which offer alternatives to conventional diagnosis and therapies. Complementary medicine used together with conventional medicine is known as integrative medicine.

Complementary and alternative medicines can include herbal, vitamin, mineral, homoeopathic, nutritional and other supplements. Therapies include herbal medicine, Chinese medicine, chiropractic, naturopathy, osteopathy,



acupuncture, homoeopathy, reflexology, aromatherapy, Alexander technique, Bach and other flower remedies, massage, hypnotherapy, shiatsu, ayurvedic medicine, nutritional medicine, yoga, anthroposophical medicine, spiritual healing, iridology, kinesiology, meditation and others.

For information on complementary or alternative therapies and medicines, click the link to the <u>Health</u> Losite Complementary and Alternative Therapies topic page.

Onwards and Upwards for Polio Australia in 2011

Polio Australia is looking forward to a much more productive 2011 thanks to the Neil Balnaves Foundation. Earlier this year, a Polio Australia delegation visited Neil Balnaves to discuss the Late Effects of Polio in Australia. After considering the issues raised at that meeting, the Trustees agreed to approve funding for a much needed Access Economics study into the prevalence and impact of the Late Effects of Polio in the Australian community. In addition to this, a surprise announcement was made to fund the National Program Manager position on a full time basis over the next three years! As Polio Australia's National Program Manager was only philanthropically funded to work for two days a week during 2010, this will make all the difference to the advancement of programs on behalf of Australia's polio survivors. We are extremely grateful to Neil Balnaves for the support he is providing.

In spite of severe time and financial restrictions (Polio Australia receives no government funding), the year in review has been very positive for Polio Australia:

- January engaged National Program Manager and established office premises in Kew, Victoria
- March launched "Parliamentary Friends of Polio Survivors" at Parliament House in Canberra
- **April** facilitated Australia's first "Polio Health & Wellness Retreat" attended by 60 polio survivors and spouses, in New South Wales
- June lobbying visit to Parliamentary Patrons in Canberra
- **July** launched video of Polio Health & Wellness Retreat on YouTube
- September/October launched Polio Australia website
- October ran national <u>Polio Awareness campaign</u> / launched <u>monthly e-Bulletin</u> / set up <u>National Polio Register</u>
- November established Clinical Advisory Group
- **December** hosted face-to-face meeting with the Polio Network representatives on the Committee of Management from around Australia

We also had the <u>support</u> of a number of individuals and organisations, to whom we are very grateful. And, of course, we are always looking for new <u>friends</u>. All in all, a wonderful first year in operation.

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Polio Australia Incorporated

PO Box 500 Kew East Vic 3102 Suite 119C, 89 High Street Kew Vic 3101

Telephone: (03) 9016 7678 ♦ Mobile: 0466 718 222

E-mail: office@polioaustralia.org.au ♦ Website: www.polioaustralia.org.au