The Post Polio Network of WA was pronounced an official entity at a Public meeting held on the evening of Thursday 24 August 1989.

Following a Channel 7 news item that went national a week earlier, on that night, 230 polio survivors from as far as Wyalkatchem, Mt Barker, Albany and Busselton, flocked to the Para-Quad hall to find out what was happening to polio survivors many years down the track, after polio. PQA CEO Nigel Glass chaired this meeting and 3 people who had been invited to speak about the difficulties they were now having. Dr John Ker, from the Spinal Unit at RPH Shenton Park was the guest speaker, talking on Post-polio. An Interim Committee of 8 was set up which included Dr John Niblett (who has been our President from that time) and physiotherapist Brenda Lake (Vice-President since then) both seen in the photo opposite with Roy Scarr (in his usual push-pull wheelchair), who is now deceased.

Other original committee members included Kevin Lehane, Eddy Barrow, Rod Smith, Alex Kinnaid and Hendrikk Chapman and of course, the driving force behind it all, Tessa Jupp, whose polio husband, Colin (46), had died 25 July 1989, in the midst of all these preparations.

Aims & Objectives from that meeting were:
1. To set up the Network as an information base on polio in WA
2. To compile a register of polio people in WA
3. To get a Polio clinic within the hospital system in WA

By 2000 we had achieved all of the above and much more.

The second Public meeting 23 Nov 1989, with 190 in attendance, was addressed by Dr David Hillman from the Sleep Disorder Clinic at Sir Charles Gairdner Hospital. On overhearing Brenda and Tessa discussing setting up an in-house polio clinic with volunteer physiotherapists, Dr Hillman volunteered his assistance to be involved and help assess respiratory and sleep disorder problems in polios.

So on 4 January 1990 we saw our first 2 patients at this free new clinic; John Groves and Bob Reader. In the following year or two, evening clinics arranged by Tessa and attended by 6-10 polios, were held every week, staffed by volunteer physios, orthotists, podiatry students, an OT and Dr Peter Nolan, (Dr Hillman’s Respiratory Registrar from SCGH). Members of this team also visited country centres including Bunbury, Albany, Narrogin, Geraldton and Kalgoorlie.

Tessa produced a booklet of 39 personal WA Polio Stories from that meeting were:
1. To compile a register of polio people in WA
2. To get a Polio clinic within the hospital system in WA
3. To set up the Network as an information base on polio

In the meantime, members of the WA group had been busy organising fundraising events to enable the employment of Tessa Jupp as Nurse Coordinator from January 1992.

Fundraising activities included, Film Afternoons at the Cygnet Theatre in Como, the Tivoli Theatre, a Fashion Parade at the Hyatt, Quiz Nights, cake stalls, fetes, a Fair on the South Perth foreshore, community days in shopping centres and numerous raffles. People involved with these included Beth Clisby, Allan and Maureen Pomeroy, Dot and Reg Rundle, Bryan Magill, Lorna and Brian Mayne, Anna Eliasson, Heather Peacock, Ross O’Neil, Margaret and Rodney Orr, Kay Lewis-Brown, Hugh Mackay and John Beattie, to name a few. Jack Phillips was always there to lend a hand, sitting all day selling raffle tickets in shopping centres many times. This put the Network on a firm financial footing and in 1992 Incorporation was achieved.

Initially a small office was provided off the hall at PQA and the hall was used for monthly meetings. PQA made their First Aid area available for the weekly night clinics. By 1992, 1,000 polios in WA had registered with the Network. In 1995, needing more room, a move was made to lease a 2-roomed office at Perry Lakes Stadium, 3 km away. This venue served the Network and Clinic well for the next 11 years until imminent demolition of the Stadium forced a move to the present shop-front in Floreat in 2007.

In 2000, with the assistance of Jega and doctors at RPH - SPC, the Network was successful in getting the WA Health Dept to establish a Rehab out-patient clinic for the Late Effects of people aging with a long-term disability, that primarily provides service for polio survivors.

In 2004 a Lotterywest Grant enabled the writing, and publication in 2013, of a 460-page book on the history of Polio in WA. People involved in this project include Jan Lord, Lesley Steele, Tessa Jupp and John Richard.

Over the past 25 years, more than 2,000 polio survivors in WA have registered with the Network. Ages have ranged from 9 - 106. As the years pass, our numbers diminish from disease and old age, but the need for the Network remains.

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So I had a Fall - what next? by Tessa Jupp RN

We have had a few people falling lately so it may be time for a reminder that it can and probably will happen to all of us sooner or later and we need to be vigilant and take extra care to prevent falls.

It is not only the bruises and grazes that might result from your fall - but the extra longer lasting damage we do.

A real danger time is when there are other people around.

You may be distracted and talking to them so not concentrating on moving the way you usually do.

Or you might not want to be seen to appear awkward, or want to be seen as “normal”, or simply not want to hold others up, or slow them down!

Either way, when we hurry or try to get up or walk in a different way to the way we usually do it, our bodies let us down, give way, twist the wrong way, we are distracted, forget to concentrate on what we are doing - and our usual “safe” way.

The other thing that happens is - people want to help us - and they don’t know to do it “our” way.

Polios often have “trick movements” they use to make up for missing or weak muscles. We have used these successfully for many years and someone wanting to change the way we move (or stand or walk, or the shoes we wear, the caliper or stick/crutch we use) can upset that delicate balance - and down we go.

Polios often “know how to fall”. If we “go with the fall” - “like a rag doll” we are probably less likely to hurt ourselves badly. It is when we (or someone else) try to save ourselves, that we do more damage.

For example - someone thinks they are being helpful by holding your arm as you get up from a chair, you end up off balance, throw out your other arm to steady yourself or to grab something to hold on to - and wrench, strain, pull - the muscles or tendons in that arm or shoulder. This then becomes an injury - doctor’s visits, x-rays, MRI’s, ultrasound, endless physio appointments, painkillers, anti-inflammatories, hydrotherapy - the list goes on.

And if your leg or arm won’t support you, or if you are dizzy, you could quickly be right back where you started.

Take your time. And take time to get over a fall. A fall is a stressful event - and a shock to the system!

**Fall Prevention Tips**
1. Concentrate - finish task
2. Stop first, then change
3. Go at your pace
4. Accept help carefully

**FIRST AID FOR FALL INJURIES**
1. Apply Hirudoid cream (a chemist line) to sore, bruised, swollen areas ASAP, 4 hourly as needed for next few days or so. Great for soft tissue injuries.
2. Apply Iodine to any grazes and leave open to air.
3. Take extra Manganese for any tendon, ligament injuries or stiffness. May need 3-4 twice a day.
4. For Fractures - lick top third of forefinger, dip in Borax powder and lick off what sticks, twice a day with extra magnesium to bowel tolerance. This will take the pain out of the fracture site within 48 hours and speed healing of the bony surfaces.

How Much Exercise should I do?

Another question that keeps coming up. How much is too much?

Everyone is of the opinion that if you are getting weak - you need to exercise more. This is NOT the case for Polio survivors. The muscles that are left are already working overtime. We do not register ANY WEAKNESS at all until we fall below 50% of normal muscle capacity. Too much exercise will increase the rate of muscle deterioration. But so will not doing enough. We each need to find that happy medium that applies to us at this point in time. We also need to give our muscles carnitine (red meat) for energy to work and magnesium to allow relaxation to be able to work again. And we need REST TIME.

You have done too much if -
* you feel tired at the end of an activity
* you are exhausted the next day
* muscles or joints ache the next day
* legs feel like "jelly" or "lead boots"
* muscles are "jumping" or "twitching"
* cramps or "charlie-horses" occur
* "creepy", "crawling" sensations under skin
I often say a picture speaks a thousand words - and with manganese deficiency I think that is true. Are you stiff when you first get up - after sitting for a while - at the table, watching TV, a drive in the car? People say to me - “But that’s just old age. You’ve got to expect that at my age!” And I say “NO! We don’t have to be like that.”

Stiffness is just a sure-fire sign that we could do with a bit more manganese in our systems. Stiffness happens when tendons are losing their stretch and flexibility. Tendons are like strong elastic bands. When they get old, they become lax, floppy, hard, stiff, likely to snap under pressure. Tendons and ligaments are the same. To nourish them we need No 1 - manganese, but also gelatine, Vit C, Vit E, zinc. Another good way of getting these extras is to boil up your own soup with soup bones, vinegar and vegetables. Plus extra manganese.

Droopy eyelids are a giveaway sign that you need manganese. The tendons struggle to open the eyes. The more droopy the more manganese you need.

Upper & lower limb problems

Twinges on movement and stiffness - then try manganese. Extra calcium in dairy foods can also cause stiff back. Try cutting out dairy for 2 weeks.

Tinnitus (ringing in ears) a problem? Try 4 manganese chelate 200mg a day. If newish problem can fix altogether. If long term can improve but may have some permanent damage.

Backache can be tight muscles (need magnesium to relax) or tight tendons. Twinges around joints, neck pain when we turn, or lift an arm? Slept on your shoulder the wrong way? Wry neck? Try 2-3 manganese 200mg twice daily.

Tendons thicken & knot. If early enough manganese, gelatine & Vit C plus exercise can resolve.

Carpal tunnel caused by pressure from carpal ligament causing swelling of the flexor tendons. Manganese reduces the swelling. Need B6 as well if pain, tingling or loss of sensation indicate nerve being pinched too.

Clumsy? When our manganese is low we lose our sense of where we are in space and balance. We bump into furniture, doorways, misplace objects so they fall. 4 x Manganese chelate 200mg daily will fix.
Are you anxious, stressed, brain fogged? - try Glutamine by Tessa Jupp RN

The need for carnitine and glutamine seem to go hand in hand for polios. We have certainly been using them both very effectively for many years. The reason may be that both are stored in muscle cells and polio survivors, having less muscle have lost a lot of their normal storage capacity.

60% of the body's glutamine supplies are stored in skeletal muscle. The rest is in the brain and nervous system, stomach, liver and lungs.

Glutamine and the Brain
Glutamine is the only amino acid that can pass the blood-brain barrier and by its interaction with ammonia and glutamate conversion, acts as a brain neurotransmitter crucial to normal mental function. Glutamine also converts to provide the glutamic acid that the brain uses as fuel (the only other substance the brain uses for fuel is glucose.) In this way glutamine increases mental alertness, memory, concentration, mood and lessens anxiety.

Glutamine and Muscles
The main site for making glutamine in the body is in the muscles. So muscle loss from polio means both glutamine production and storage ability is less. Exercise lowers these levels even more, often resulting in brain fog.

Not only is glutamine stored in muscle it is needed for maintaining muscle function and energy production but is also needed for muscle growth and to stop muscle wastage. Just as magnesium and other minerals are taken from the “Bone-Bank” resulting in bone cell loss (osteoporosis) so if glutamine is low in other parts of the body it will be taken from the “muscle-cell-glutamine bank” to maintain blood glutamine levels needed to provide for other vital areas, so causing muscle cell breakdown and thus muscle loss.

This is why we get weaker when we are sick. Glutamine is needed for immune function and the muscle cells pay for it. Extra glutamine counters allergies and to recover from illnesses like pneumonia. Glutamine, cysteine and glycine (from protein) make the powerful antioxidant glutathione.

Glutamine and the Gut
Glutamine protects the gut mucosa. It maintains the protective mucus stomach lining and protects against the helopbactor pylori which cause stomach ulcers. Glutamine repairs damage to the intestinal wall and the villi in the small intestine that can be stunted with gluten and coeliac disease.

Glutamine is one of the most important nutrients for healing leaky gut syndrome because it is the preferred ‘fuel’ for the cells lining the mucosa of the small intestine. These cells have the ability to take up glutamine directly in the gut rather than waiting for it to be supplied through the blood. Glutamine is also required for the production of intestinal mucous. As a result of these functions, a generous supply of glutamine will help repair and maintain a healthy small intestinal lining. Glutamine also heals mouth ulcers and the lining of the esophagus that is damaged by heartburn or reflux. These functions, as well as glutamine’s ability to prevent bacteria moving from the gut to the bloodstream, have been established in a substantial number of clinical studies on animals and human patients. Leaky gut and damaged mucosa are usually associated with glutamine deficiency.

Glutamine and Diabetes
Glutamine is important for cell repair, gene expression and cell signalling. It reduces inflammation, is used with glucose to make 2 types of glucosamine - one for repairing gut lining and the other for healing cartilage, tendons and ligaments - hence its use with arthritic and joint pain problems.

Glutamine lowered by exercise, stress, illness - colds, flu, surgery, acute trauma, cancer drugs, methotrexate

Glutamine and Arthritis
Glutamine is destroyed by cooking and acids. People who cook too much of their food at high heats may easily be glutamine deficient. -Glutamine is easily destroyed by high temperatures. Acid also destroys glutamine. Supplemental glutamine is best taken in the morning before breakfast. As it increases mental alertness, taken later in the day or too large a dose, can keep you from sleeping. Glutamine powder available $25 for 100G at Polio Office

Usual dose needed is quarter to half a teaspoon. If taking to repair gut lining or bowel disease you may need 1-2 teaspoons daily. Vitamins B3, B6 and C are required as helper nutrients in its conversion pathways.

Food sources of glutamine include protein foods: meat, chicken, fish dairy food, eggs, fish, nuts, veg but a supplement may still be needed due to increased need eg stress, illness, or reduced storage capacity as in muscle loss due to polio, statin drugs etc.

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Amazing Actions of Glutamine
1. Helps Build and Preserve Muscle
2. Improves Brain Fog / Mood
3. Integral to Insulin Control
4. Strenthen Immune System
5. Controls Sugar & Alcohol Cravings
6. Supports Optimal Gut Health
7. Maintains Body pH Balance

CAN PREVENT or HELP these CONDITIONS

<table>
<thead>
<tr>
<th>Condition</th>
<th>Treatment</th>
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<tr>
<td>Brain fog</td>
<td>Memory</td>
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<td>Post-exercise fatigue</td>
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<td>Diabetes</td>
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<td>Colds and flu</td>
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<td>Food allergies</td>
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<td>Ulcerative colitis</td>
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<td>Chemotherapy side effects</td>
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<td>Pancreatitis</td>
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Because it tastes good? Or is there more to it than that?

You may wonder why I keep going on about foods and vitamins. Apart from the obvious need for air and water, the next most important thing we need for life is the food we eat. God has provided all living forms with what is needed to sustain life. We just need to use our foods more wisely, not be tempted to do the wrong thing, as in the story of Adam, Eve and the apple.

Our bodies run on the food we eat. It is how we prepare (or don’t prepare) that food that can make all the difference. Why do we have different likes and dislikes when it comes to food? The work I have been doing here in WA on blood groups and diet explains a lot of this. If we all ate by instinct we would be on the right track. And if we all ate foods - “just like mother used to make” - we would all be better off.

You may have seen the recent ABC Catalyst programs “Could our food be making us sick?”. If you missed them you can still see them on the following -
www.abc.net.au/catalyst/stories/by-date/2014/
It is well worth your while watching.

On this ABC program Dr Graham Phillips talks about the effect the normal good or bad bacteria that live in our gut has on our health and disease. This is research being undertaken in Australia and USA. It involves the Universities of Sydney and Queensland and Monash Uni in Victoria, amongst others.

Their surprising findings are that the foods we eat dictate what sort of helpful (or otherwise) bacteria live in our gut and the effects this has on our energy levels and also on the increase of many diseases common today that were not so common in the past. Specifically - heart disease, cancer, diabetes, MS, arthritis, allergies, depression, autism, and more.

The main 2 points made are the need for fibre in our meals and the need for some sort of vinegar.

This means starting food preparation from scratch ie basic meat and veg meals and the use of the acid-based accompaniments that were always traditional parts of our meals - like mint sauce with lamb etc.

People ask me - why do I need to keep taking these supplements? The answer is - if we are not getting enough in our food, then we are going to need to keep taking them just as regularly as we need to eat.

We also need to be more knowledgeable on our food choices and how we prepare and combine these foods, what we eat when, and one size doesn’t fit all - ie the fact that what suits one may not suit another.

On the opposite page is the climatic food chart that I compiled many years ago (in my first blood group booklet) that gives you guidelines as to which of our natural foods, our digestion can handle best without causing stress to the system. You probably have a natural preference for the right varieties and foods and if you dislike a food - don’t eat it. It probably won’t do you much good. See my blood group booklets (3 in the series $13) and our cookbook “Just like Mother used to make” $10 plus $3 postage, for more information on this.

This latest research talks about how acetate, found in the traditional apple cider vinegar, as well as being created by good bacteria action on fibre in the gut, increases an enzyme AMPK naturally, which help cell insulin sensitivity and reduces blood glucose, in the same way that the drug Metformin does for diabetes, and also encourages fat breakdown rather than fat storage. Acetate activates and regulates the immune cells in the gut, which reduces inflammation - source of many diseases. Acetate increases antibodies in the blood and natural killer cells that help to eliminate cancer cells. It strengthens the protective mucous lining of the gut, fixing many gut problems and sparing glutamine so it can be used for immune function and energy production. These good gut bacteria also stop dementia and mental diseases too. So don’t eat the sugary processed foods that breed bad gut bacteria.

**Diseases caused by wrong foods & gut flora**
- allergies
- arthritis
- asthma
- autism
- cancer
- depression
- diabetes
- heart disease
- Multiple Sclerosis
- obesity
- and more.

**TAKE HOME MESSAGE**
1. Eat more natural good fibre foods ie vegetables, fruit, unprocessed grains
2. Eat basic “real” foods - as God made them
3. Have vinegars as part of diet/meals ie apple cider vinegar, fermented foods, vinegars
4. Take specific supplements if not getting enough from your diet (need right balance)
5. Eat for blood group (instinctive) including the traditional food exposure of our ancestors and the correct climatic varieties of foods
**Blood Group Food Chart - hot & cold climate** by Tessa Jupp RN

Many foods have warm and cold varieties to suit the blood groups. eg pumpkin - Qld blue (warm climate) Jap (cold) O & A1B are warm climate blood groups and are better with foods from warm climates, - A1, A2, B & A2B are cold climate B and A1B may tolerate some different warm and cold foods eg B (banana but not pineapple) AB (pineapple but not banana)

See my blood group booklets for more specific info on WA foods, acid/alkaline balance and characteristics of blood groups.

### WARM CLIMATE FRUIT
- apples (ripe)
- avocado - round
- banana
- coconut
- dates/figs
- gooseberries
- grapes/ guava
- grapefruit
- jack fruit
- lemons - eureka
- limes
- mango
- mulberry
- passionfruit
- pawpaw
- pineapple
- rockmelon
- strawberry
- watermelon

### WARM CLIMATE VEGETABLE
- alfalfa
- artichoke/basil
- beans - legumes
- beetroot
- broccoli
- capsicum/chilli
- cauliflower
- cucumber
- mulberry
- nectarine
- passionfruit
- pawpaw
- pineapple
- rockmelon
- strawberry
- watermelon

### WARM CLIMATE MEAT
- buffalo
- chicken/duck/goose
- cow - Kimberley
- goat
- emu
- kangaroo
- pig (wild boar)
- rabbit
- sheep - merino
- turkey

### WARM CLIMATE WATER FISH
- albacore
- bass
- barramundi
- bluefish
- blue threadfin
- crayfish
- dhufish
- droper
- hake
- parrot

### WARM CLIMATE OILS
- coconut oil (good)
- corn oil
- dripping (beef/lamb)
- evening primrose oil
- fish oils (max-EPA)
- olive oil
- peanut oil
- safflower oil
- soya (avoid)
- sunflower oil

### WARM CLIMATE GRAINS
- almonds
- Brazil
- cashew
- chia
- macadamia
- pecan
- pistachio
- pumpkin
- sesame

### COOL CLIMATE FRUIT
- apples/apricot
- avocado (small)
- egg shaped
- blackberry
- blackcurrant
- blueberry
- cherry/cumquat
- kiwi fruit/loquat
- lemon - meyer
- melon - (honeydew)
- mulberry - rhubarb

### COOL VEGETABLES
- Artichoke-Jer'slm
- beets - root/sugar
- broccoli
- brussel sprouts
- cabbage - (green but red is colder)
- carrot
- celery / celeriac
- chard/chicory
- chive/leeks
- lettuce
- parsnip
- potato/pumpkin
- shallots
- silver beet
- snow pea
- sweet potato - (orange, white)
- swede
- turnip
- zucchini

### COOL HERBS
- angelica
- borage
- chamomile
- chive/lemmon
- dandelion
- dill/fennel
- elderberry
- ginseng
- horseradish
- lovage
- mustard
- nasturtium
- parsnip
- parsley
- poppy seed
- rosemary
- saffron
- St John wort
- thyme
- yarrow
- green tea
- Japanese
- roobios
- chicory cafe

### COOL GRAINS
- barley
- buckwheat
- millet
- oats
- potato
- rye
- rice- basmati
- spelt dinkelbroth
- wheat - durum
- *other plants
- used as flour

### COOL CLIMATE MEAT
- bear
- chicken/duck/goose
- cow (soutth-west)
- deer/elk
- emu
- grouse
- hare/rabbit
- goat (mountain)
- pheasant
- pig (small domestic)
- quail
- sheep (south-west)
- wallaby

### COOL WATER FISH
- cod - Atlantic
- dory
- flounder
- haddock
- hake/halibut
- herring
- pilchard
- salmon - (Alaskan)
- sardines not Fremantle
- tuna
- whale
- whiting

### RIVER FISH
- black fish
- bream
- catfish
- hairtail
- perch
- prawns
- pike
- sardine
- sole
- trout

### COOL OILS
- beechnut
- coconut oil (ok but not for A2)
- cod liver oil
- canola (avoid)
- chestnut oil
- fish oils (salmon)
- halibut oil
- lard (pig fat)
- linseed (flaxseed oil)
- rapeseed (canola oil)
- walnut oil
- whale blubber

### NUTS/SEEDS
- chestnut
- chia
- hazelnut
- pine nut
- poppy seed
- walnut
**Soluble and Insoluble Fibre**

“There are two distinct types of fibre in our diet, soluble and insoluble.” says Dr Leo Galland MD FACP (USA) who has found that soluble fibre increases gut permeability (makes leaky gut worse) whereas insoluble fibre decreases gut permeability (heals a leaky gut). The insoluble fibre that Dr Galland uses with his patients is cellulose and many supplement manufacturers now make cellulose powder and capsules. Cellulose always helps to remove toxins from the intestinal tract before they can be absorbed into the body.

Dr Galland says “Common sources of soluble fibre that should be avoided include psyllium and bran. Ironically these are often suggested by naturopaths and other therapists for people suffering from leaky gut syndrome.”

“Soluble fibres attract water and form a gel, which slows down digestion. Soluble fibre delays the emptying of your stomach and makes you feel full, which helps control weight. Slower stomach emptying may also affect blood sugar levels and have a beneficial effect on insulin sensitivity, which may help control diabetes. Soluble fibres can also help lower LDL ("bad") blood cholesterol by interfering with the absorption of dietary cholesterol.

**Sources of soluble fibre:** oatmeal, oat cereal, lentils, apples, oranges, pears, oat bran, strawberries, nuts, flaxseeds, beans, dried peas, blueberries, psyllium, cucumbers, celery, and carrots.

Insoluble fibres are considered gut-healthy fibre because they have a laxative effect and add bulk to the diet, helping prevent constipation. These fibres do not dissolve in water, so they pass through the gastrointestinal tract relatively intact, and speed up the passage of food and waste through your gut. Insoluble fibres are mainly found in whole grains and vegetables.

**Sources of insoluble fibre:** whole wheat, whole grains, wheat bran, corn bran, seeds, nuts, barley, brown rice, zucchini, celery, broccoli, cabbage, onions, tomatoes, carrots, cucumbers, green beans, dark leafy vegetables, raisins, grapes, fruit, and root vegetable skins.

**Resistant starch**

This is starch that resists digestion in the small intestine. Once in the large intestine, friendly bacteria ferment resistant starch. This process produces substances that help to keep the lining of the bowel healthy. Sources of resistant starch can be found in slightly undercooked pasta, under-ripe bananas, cooked and cooled potato.”

**Here are some good easy fibre recipes to try.**

---

**Fibre Smoothie**

(we used to call them egg-flips!)

**Ingredients:**
1 free range egg
1 banana or any other fruit
Vegetable assortment of carrot, some green veg and nuts or seeds
½ cup of milk - rice, oat or almond or however much you need to get all ingredients to blend together.

**Instructions:**
Cut veg into chunks and put all into a blender. Blend all ingredients for some green veg and nuts or seeds 20 seconds, or until you have a nice creamy drink. Add honey and/or lemon juice/apple cider if/as desired.

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**Banana Macaroons or Apple Oatmeal cookies**

**Ingredients:**
2 free range eggs
2 mashed bananas or grated apple
2 cups desiccated coconut or rolled oats
4 tsp grated potato or SR flour
½ cup coconut oil or butter, melt
½ cup raw honey (optional)
1 tsp vanilla extract (optional)
¾ tsp cinnamon or ground cloves

**Instructions:**
Preheat the oven to 350 degrees. Mix everything together.
Form into tablespoon-size balls and place on a tray lined with a baking sheet. Bake for 18-20 minutes, until golden brown. Let cool COMPLETELY before removing from the baking sheet, otherwise they may crumble.

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**FREE with $200 WA Seniors rebate**

**Mobile-Alert 9246 5060**

From 1 January 2014, WA Seniors Card holders can apply for a new rebate to improve their safety and security. This includes up to $200 for a personal safety device that can alert whoever you nominate.

There are a number of different sorts around with different functions. The one pictured here is small enough to be hung around your neck, or slip into your pocket or handbag. Cost is covered by the rebate. $50 extra if you need it set up– is a local Perth firm. You can speak to them on the phone. Or if you are not sure what sort you need you can also contact the Independent Living Centre for advice on 1300 885 556.

For more information call the:
WA Seniors Card Hotline number on: 6551 8800
Country freecall number on: 1800 671 233
Email: seniorscard@dlgc.wa.gov.au
Download the forms at: www.dlgc.wa.gov.au/seniorscard or pick up at any Post Office.

**Itchy Skin? Could be your liver playing up.**

Your liver is your detox organ and if your liver is under stress your body can use your skin to get rid of toxins and waste products hence the itch or a rash. Take 1 - 2 scoops of Taurine in a little water before breakfast. Cleans up your liver. Or try apple cider in hot water first thing in morning. “Corn” cornflour, dusted on, takes itch away in a few secs.
Brilliant!
A woman goes to the Doctor, worried about her husband's temper.
The Doctor asks: "What's the problem?
The woman says: "Doctor, I don't know what to do. Every day my husband seems to lose his temper for no reason. It scares me."
The Doctor says: "I have a cure for that. When it seems that your husband is getting angry, just take a glass of water and start swishing it in your mouth. Just swish and swish but don't swallow it until he either leaves the room or calms down."
Two weeks later the woman comes back to the doctor looking fresh and reborn.
The woman says: "Doctor that was a brilliant idea! Every time my husband started losing it, I swished with water. I swished and swished, and he calmed right down! How does a glass of water do that?"
The Doctor says: "The water itself does nothing. It's keeping your mouth shut that does the trick ..."

Q1. In which battle did Napoleon die?  
A * His last battle  
Q2. Where was the Declaration of Independence signed?  
A * At the bottom of the page  
Q3. River Ravi flows in which state?  
A * Liquid  
Q4. What is the main reason for divorce?  
A * Marriage  
Q5. What is the main reason for failure?  
A * Exams  
Q6. What can you never eat for breakfast?  
A * Lunch & dinner  
Q7. What looks like half an apple?  
A * The other half  
Q8. If you throw a red stone into the blue sea what will it become?  
A * Wet  
Q9. How can a man go eight days without sleeping?  
A * No problem, he sleeps at night.  
Q10 How can you lift an elephant with one hand?  
A * You will never find an elephant that has one hand.  
Q11 If it took eight men ten hours to build a wall, how long would it take four men to build it?  
A * No time at all, the wall is already built.  
Q12 How can you drop a raw egg onto a concrete floor without cracking it?  
A * Any way you want, concrete floors are very hard to crack.

Children Are Quick
TEACHER: Why are you late?  
STUDENT: The class started before I got here.  
TEACHER: John, why are you doing your math multiplication on the floor?  
JOHN: You told me to do it without using tables.  
TEACHER: Glenn, how do you spell 'crocodile'?  
TEACHER: No, that's wrong  
GLENN: But you asked me how I spell it.  
TEACHER: The chemical formula for water is?  
TEACHER: What are you talking about?  
DONALD: Yesterday you said it's H to O.  
TEACHER: Give me a sentence starting with 'I.'  
MILLIE: I is.  
TEACHER: No, Millie. You always say, 'I am.'  
MILLIE: 'I am the ninth letter of the alphabet ...'  

TEACHER: Winnie, name one important thing we have today that we didn't have ten years ago.
Winnie: Me!
TEACHER: Glen, why do you always get so dirty?
Glen: I'm a lot closer to the ground than you are.
TEACHER: George Washington not only chopped down his father's cherry tree, but also admitted it. Now, Louie, do you know why his father didn't punish him?
LOUIS: Because George still had the axe in his hand .... ?
TEACHER: Clyde, your composition on 'My Dog' is exactly the same as your brother's..
Clyde: Did you copy his?
TEACHER: No, sir. It's just the same dog.
TEACHER: What is a person called who keeps on talking when people are no longer interested?
HAROLD: A teacher.
POST POLIO MEMBERSHIP is by Donation to the Network (due 30 June each year)

All Donations to Post Polio Network are Tax-deductible

We need to set up a fund to use for an assistant for Tessa to help run the Polio Office so she can do more clinical appointments to assist polios and their families and do more clinical research.

I would like to pay a donation membership to the Post Polio Network of WA

suggested PPNWA Membership Donation $20 or more $........
Pensioner Membership Donation $10 or more $........

I would like to also pay a Donation for a PA to assist Tessa $........

Total amount enclosed $.........(receipt in next newsletter)

Name _______________________________________

Address ___________________________________ email address __________________________________

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