December 2012

Fall Issue

Canadian Paraplegic Association (Manitoba) Inc.
Association Canadiénne des Paraplegiques

MPF MANITOBA PARAPLEGIA FOUNDATION INC.

PARATRACKS

Newsletter of the Canadian Paraplegic Association (Manitoba) Inc.

Life goes on!

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Canadian Paraplegic Association (Manitoba) Inc.
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MANITOBA PARAPLEGIA FOUNDATION INC. (MPF) NEWS

MPF funds go to work in four main areas that are not supported by any other sources in Manitoba: *special projects, product testing, research and direct aid to persons with spinal cord injuries who do not have the necessary financial resources for equipment and/or services. All requests for direct aid are initiated through CPA. Individuals must provide information on their financial status, explain why they cannot meet the expense within their own budget, and identify any other potential sources to support the request including potential for contribution from family.*

CPA thanks MPF for its continued support to improving the quality of life of persons with spinal cord injuries.

MPF Trustees

Doug Finkbeiner, Q.C (President), Arthur Braid, Q.C (Vice-President), James Richardson Jr. (Treasurer), Dr. Lindsay Nicolle, Ernie Hasiuk, John Wallis, Dr. Jan Brown, Dr. Kristine Cowley

MPF has approved several requests for financial support during the past few months. Some of the highlights are as follows:

During the month of July 2012:

- Financial support was provided for the purchase and installation of a residential door opener in a CPA Member's home. This will allow the member to gain independence and it will also serve as a safety feature.

During the month of September 2012:

- Financial support was provided to offset the cost of repairs to a CPA Member's power wheelchair. These repairs will allow the member to venture outside of his home to attend functions and to do his own shopping.
- Financial support was provided to a CPA Member for tuition, books and incidental fees to attend Red River College in the Disability and Community Support Worker Program. This program will provide the member with the practical skills and abilities to work with people as a Residential Support Worker in group homes or as an Educational Assistant in the school system.
- Financial support was granted for a backrest and repairs to a CPA Member's power wheelchair. This support will allow the member to continue to maintain her independence and quality of life in her rural community.
- Financial support was provided to a CPA Member for tuition, books, transportation and incidental fees to continue pursuing his educational degree.

Visit MPF's website at: www.cpamanitoba.ca/mpf

Applications for assistance are available by contacting the CPA office.

BECOME A CPA MEMBER TODAY!

Your membership dollars support us in our efforts to:

remove barriers in the community, publish the newsletter ParaTracks and provide rehabilitation counselling services to our members.

Please take a moment to fill out the application on the back cover and send in your membership today!

Thank you for your commitment to the vital work of our member-based organization!

CPA Kicks Off Their Employee Campaign

On November 1, 2012 CPA held their United Way Employee Campaign Kick-off Event which featured a United Way Guest Speaker, Lunch from King's Head Pub & Eatery, a Best Hats Contest, Silent Auction and 50/50 Draw.

Thank you to Campaign Chair Shannon Dupont, who did a tremendous job in organizing this fun-filled event! A huge thank you to everyone who attended and supported this very worthwhile cause!

CPA would especially like to thank the following donors for their generous support:

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Manitoba **News**Release

September 20, 2012

PROVINCE MOVES TO INCREASE SAFETY FOR PEOPLE WITH DISABILITIES: HOWARD

– – –

Wheelchair Lifts Now Require Inspections

Elevating devices for people with physical disabilities, except those in private homes, are now being held to the same level of scrutiny as elevators and must have regular inspections and a valid permit, Family Services and Labour Minister Jennifer Howard, minister responsible for persons with disabilities, announced today. "The safety and security of all Manitobans is important to our government. We want to be sure any kind of lifting device is working properly and has been carefully inspected," said Howard. "A person can be injured if something goes wrong regardless of whether the lift is a few feet or a few stories off the ground." To ensure the safety of all types of elevating devices, the elevator regulation requires:

- drawings and specifications be approved before an elevator is installed,
- initial inspections be conducted prior to a permit being issued and an elevator put into service, and
- periodic re-inspections and permit renewals based on the age and condition of the equipment be conducted.

In addition to the new rules for inspections, the province will increase permit and approval fees by about 10 per cent, the minister said, noting this is the first fee increase since 2005. These new fees will help offset the additional workload of elevator inspectors from Inspection and Technical Services Manitoba, which is part of the Office of the Fire Commissioner (OFC). Additional information on the changes to the elevator regulation is available on the OFC's website at www.firecomm.gov.mb.ca.

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Quickie 2 fully adjustable wheelchair about 10 years old. size 16" X 16", swingaway foot rests, 24" spoked rear wheels, and 8" pheumatic front wheels. All bearings like new. Tires are worn but do not leak air. No cushion. With custom made lap tray. Must sell as soon as possible. $400 OBO.
Call Bruce Brown at 204-897-6365
or email: ve4blb@mts.net

New 26 inch Kendra grip tires and rims. $50 for the pair. Email for pics. wroblew@mts.net

Free wheelchair lift available
Call Rob at 204-782-7124 for more information.

32 ft x 11 ft wheelchair accessible houseboat for sale. Sleeps 4 comfortably or max. 6. $16,000 OBO. Boat could easily be moved to Manitoba for use. To view in Kenora, Ontario, call Wayne Ficek at 807-468-5305 or email: wficek@shaw.ca for pictures.

"Going Forward Together"

Through the "Going Forward Together: The Government of Manitoba's Contribution to Spinal Cord Injury Leadership in Manitoba" Grant Contribution Agreement, the Rick Hansen Foundation and the Canadian Paraplegic Association (Manitoba) Inc. will address unmet needs of Manitobans living with a spinal cord injury. Specifically, from April 1, 2008, this five-year initiative supports services in four main areas: Research Innovation, Solutions That Work, Community Engagement & Support, and Leadership.

Research innovation funding has strengthened Manitoba's position to develop innovative research projects that address the priority needs of Manitobans with SCI. Through the coordination and careful stewardship of the Manitoba Spinal Cord Injury Research Committee (MSCIRC), as well as connections to the broader research community in Canada and beyond, Manitoba increased its capacity to implement world-class scientific research. SCI translational research in Manitoba has been enhanced, improving Manitoba's ability to attract and retain world-class researchers and skilled technicians. Increasing the capacity to carry out important and relevant SCI-related research in Manitoba has resulted in improvements for Manitobans' living with SCI, in the areas of health, accessibility, and quality of life.

For 2012-2013 (Year 4), six projects have been funded, utilizing the total $250,000.00 funding available. The following project summaries illustrate the impact that SCI translational research funded by this grant will have on people with SCI and mobility-related disabilities in Manitoba:

Project Title:
Enhancing axonal protection and remyelination after spinal cord injury by neuregulin-1 therapy through a bioengineered drug delivery approach
~ Dr. Soheila Karimi ~

To date, treatment options for SCI are minimally effective and new regenerative medicine strategies are required to bring the patients with SCI back to an active and productive life.

Neurological deficits after SCI are mainly attributed to the degeneration of nerve fibres and loss of insulating myelin sheath around them. Myelin is an essential compound made by myelin forming cells namely oligodendrocytes that facilitate rapid signal transmission in nerve fibres between the brain and spinal cord. SCI causes permanent damage to oligodendrocytes and myelin sheaths that leads to body paralysis and loss of sensation in patients. Therapeutic strategies to replace myelin forming oligodendrocytes and repair nerve fibres have great potential to improve recovery of functions in persons with SCI.

The goal is to develop new effective therapies for patients with SCI. The research team will develop and evaluate regenerative medicine strategies to promote spinal cord repair and regeneration and to improve functional abilities.

Project Title:
Protein transduction technology for treatment of spinal cord injury
~ Dr. Eftekhar Eftekharpour ~

Currently there is no standard treatment for patients during the critical stage immediately after a spinal cord injury. Within the minutes after the mechanical impact on the cord, a series of molecular events start that initiate a long lasting wave of cell death. It is well known that limiting the extent of cell death will enhance functional recovery; however despite many clinical trials, very limited effective treatment options are available for the patients, therefore the quest for suitable neuroprotective treatments still remains. This proposal addresses the therapeutic potential of a novel approach to inhibit the extensive neural cell death. This can potentially lead to improvement of patients' quality of life.

The overall goal in Dr. Eftekharpour's laboratory is to develop a drug delivery method that can be administered at the scene of the accident, even before the transfer of patient to an advanced medical facility. This will provide the patients with a much needed enhancement of cell's antioxidant support to neutralize the damage effect of free radicals. Their molecularly drug-delivery technology provides an excellent candidate for such approaches. In this approach they can deliver the drug into the brain and spinal cord as early as 15 minutes after its injections into a vein or a muscle. If successful, this method can be quickly translated into a clinical approach with potential improvements of the quality of life for patients with brain or spinal cord injury.

Project Title:
The role of BDNF in myelin repair following non-traumatic spinal cord injury
~ Dr. Michael Namaka ~

There are several different diseases that cause spinal cord damage, including cancer and multiple sclerosis. Any form of injury to the spinal cord causes damage to the white matter that surrounds these nerve cells. When the spinal cord white matter is damaged it causes

loss of signals along the nerves. This results in the functional loss that we commonly associate with spinal cord injury. Depending on the cause of the damage, recovery is dependent on several factors including the formation of new white matter. Dr. Namaka is proposing to study the role of a specific protein in the formation of new white matter after spinal cord damage. In addition, they will look at the way the white matter structure is altered during the process of repair. The results of their study will be useful to identify potential treatments for all types of damage to the spinal cord.

Project Title:
The regulation of spinal motoneuron excitability during motor output
~ Dr. Brent Fedirchuk ~

Movements are accomplished by activation of the output nerve cells in the spinal cord, which then project to muscles in the limbs and initiate muscle contraction. Following spinal cord injury, the damage to descending pathways from the brain impairs the individual's ability to activate these spinal output cells, and this contributes to their motor impairment and paralysis. Work done over the last 15 years, largely at the University of Manitoba, has shown that during motor activities like walking, the excitability of these spinal output cells normally changes. Therefore, the motor system has a means to turn up the excitability of spinal nerve cells and "prime" them for activation. This finding is important because it means that if we understood and could activate this "priming" mechanism, perhaps we might be able to increase an individual's ability to activate their spinal output cells, improve their motor function, and thereby reduce the incident of permanent paralysis following spinal cord injury.

The goal of the project is to determine the relative contributions of descending pathways from the brain and systems within the spinal cord itself in setting the excitability of spinal nerve cells.

Project Title:
The use of the Peristeen Bowel Irrigation System for People with Cauda Equina Syndrome
~ Dr. Karen Ethans ~

Studies have shown that people with spinal cord injuries often rate their bowel problems as one of the most significant consequences of their injury. Fear of bowel accidents has been identified as a significant limiting factor for individuals, which deter participation in social and other outside activities.

The goal of a bowel rehabilitation program is to help individuals regain the freedom and independence to lead a full life. People with SCI generally require a program to empty their bowels regularly. A successful bowel program results in predictable, regular and thorough evacuation of the bowels without episodes of loss of control (accidents) or additional complications. However, despite their best efforts, some people with SCI are unable to achieve an effective, regular bowel routine, and some suffer from significant problems. Some may even need to have surgery performed with a hole in the abdomen and bag to collect the bowel movement as they cannot find a successful program.

A method that has become available recently is the Peristeen Anal Irrigation System. Previous studies have found that this can help people with SCI be less constipated and have fewer accidents, decrease time spent on bowel routines, be less dependent on others for help with bowel routines, and have better quality of life. The decreased cost for a caregiver to assist, and less accidents, made this device cost effective too.

The aim of the project is to compare the Peristeen Anal Irrigation System with the usual bowel management, in people with this type of bowel dysfunction from lower spinal cord injury.

Project Title:
Reducing astroglial scarring after spinal cord injury through SLPI-mediated down regulation of Smad2
~ Dr. Sari Hannila ~

The spinal cord is made up of nerve fibres that carry information from the brain to the rest of the body. It also contains large numbers of cells called astrocytes, which provide structural support to nerve cells. When the spinal cord is injured, astrocytes undergo a process called reactive astrogliosis. They multiply, become larger, and eventually form a structure called the astroglial scar. This scar is very dense, and when severed nerve fibres attempt to regenerate, the scar physically blocks this regeneration. In addition, the astrocytes that form the astroglial scar express proteins called chondroitin sulfate proteoglycans (CSPGs), repel growing nerve fibres. As a result, nerve fibres fail to regenerate, and this can lead to permanent paralysis, loss of sensation, difficulties with bowel and bladder function, and occasionally, loss of ability to breathe on one's own. It is therefore important to identify new treatments that can reduce CSPG expression and astrolglial scarring after spinal cord injury. This study will test the ability of a protein called secretory leukocyte protease inhibitor (SLPI) to reduce CSPG expression and astroglial scarring. They will then build on these results by testing SLPI in complex models of spinal cord injury, and determine if it can enhance recovery of function.

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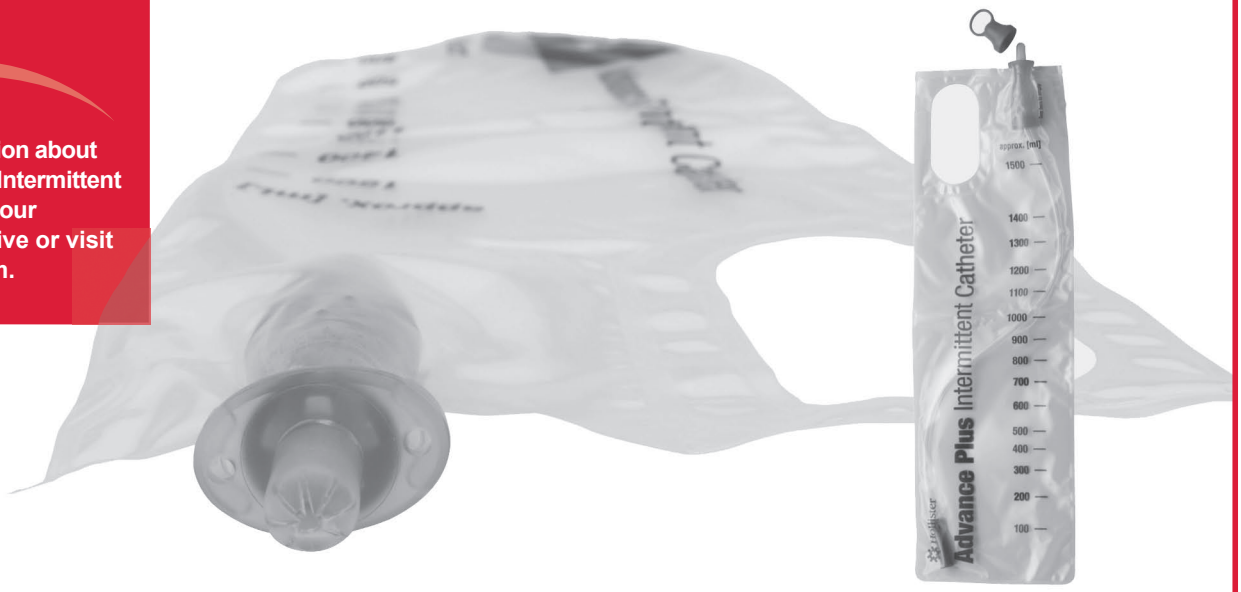


For more information about the Advance Plus Intermittent Catheter contact your sales representative or visit www.hollister.com.

iClones, Handroids, Apps, & You

iClones, Handroids, Apps, & You

By: Paul A. MacDonald

I hope you all had a wonderful summer. For those of you without air conditioning, you have my deepest condolences. After having mine serviced in June, it died in early July. It certainly was a nasty test of my adaptability to adversity. I survived and I live to write another article for you.

For those of you who don't already know it, I'm a computer geek. Those enigmatic containers of digital mayhem and confusion are my life. It is very much a love / hate relationship. Despite my Baby Boomer ineptitude, I do manage to be productive. I am also very cautious when it comes to trading up to newer technologies.

I will not be found at the local fruit stand at three A. M. patiently waiting in line hoping to be the first to buy the freshest and most obscenely over-priced fruits when the doors open. I prefer to let others sample it first. When price and incidences of indigestion drop to an acceptable level; that is the time I buy.

I have been very slow warming to the smartphone & tablet craze. Until now, I have viewed them as toys and undeserving of being called real computers. Whenever I need a new phone, I want just that - a phone. Yes, I mean those things that look like Captain Kirk's communicator that you talk into, then listen to. The wireless companies make it more undesirable by overpricing and demands of contracts, not to mention poor selection. Forget Captain Kirk; Mr. Data has all the power now!

Early this year, my old, first generation smart phone was displaying symptoms of dementia and becoming unreliable. The only "Star Trek" phone available was over $100.00 and a 2 year contract to boot. If, instead, I opted for the newest super-duper Android thingy, it would be almost free & my new plan would be the same price as the old one for 6 more months. I think there was even a rebate in there somewhere. So... I opted for the new Android, fully prepared to ignore all the nonsense packed into it. I forgot that Computer Geek, or **C.G.**, also stands for **C**urious **G**uy.

Useful?

I'm not into gaming, social media, pop culture, shopping or watching T.V. online. The Internet for me is mostly a tool to aid in my productive creativity. I only look for Apps that will help me overcome physical limitations and improve quality of life.

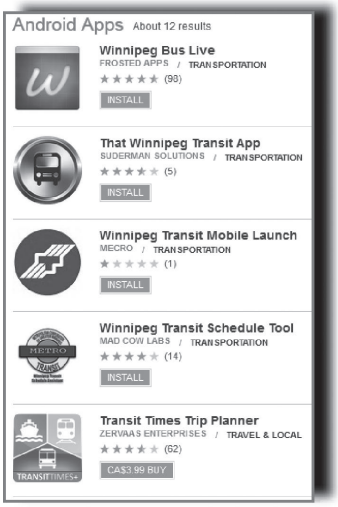
Please be aware that at present, the iPhone offers more Apps than Google's Android. The gap between them is shrinking. If an App is offering a free trial, make sure you read the fine print or you may wind up paying something for the "Free" trial. There are also phony Apps that contain malware, so be careful where you get them.

Mister Miser Me

Since I am such a tightwad, I only cruise the "free market". There are a lot of useful Apps asking for no donations. There are many Apps that can make life for people with mobility issues more functional. Each person has individual needs, so I cannot go into trying to list or give details about what is currently available. I will simply tell you about the ones I tried and now depend on every day.

Winnipeg Transit Bus Apps

Have you ever arrived at a bus stop, perhaps a little later than you would have liked? You wait and wait and the scheduled bus is nowhere to be seen. You think to yourself : "He must have gone by already, it's freezing out here so I might as well go home & try for the next bus". A minute or two later, you see the bus go by. He was just a little late & now you'll be too. The answer to this scenario is a WTS Bus App.



- Enter stop number for next bus times for all routes through that stop.
- Save a list of Stops & Route Numbers for one touch info on next 3 buses
- You are given the scheduled time and number of minutes you have to get to the stop.
- If your bus is late, the bus App will indicate that status.
- Symbols to indicate accessible buses.

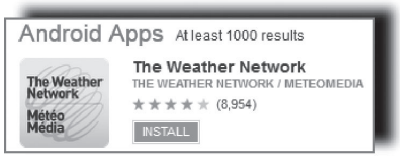
A recent announcement by Winnipeg Transit heralds a new digital bus pass system will soon be deployed using smartphones for paying fares. This will reduce the need to print new passes each month and a user can "recharge" the digital pass online.

QR Code Reader

QR Codes are the next generation bar code. In short, a QR code is an optical hyperlink. They save you from having to type in a long URL to get information on a product. There are free scan Apps that can read both QR and Barcodes through your device's camera. There are also free Apps that allow you to generate your own such as mine above.

For those with mobility limits, the ability to get on the spot information about an item one may be interested in purchasing, is a valuable asset. You may even be able to compare prices with other stores in the area. This is an App you may not use every day, but when you do need to use it, you are better off with it than without.

The WeatherNetwork Mobile Weather Eye



I travel around the city quite a bit. Weather is always a top of mind concern while travelling or planning a day. Everyone knows that weather in this province can change in a flash.

I have come to trust The Weather Network Free Mobile Weather Eye. It gives current conditions and forecast for the next 12 hours. You can even view Doplar Radar maps showing where precipitation is currently and the projected track it will follow in one hour increments. A few times I saw some very black clouds rolling in and I had to decide to stay or go. Using that App, I was successful in making the right decision each time.

Free Odometer Distance / Speed Tracker

Have you ever used your power chair or scooter in an unfamilliar area and wondered if your battery had enough power left to get home? This App will help take the guesswork out. As long as you know the maximum range of your battery, you can use this App to clock not only the distance you have travelled, but also your average speed. It displays Kilometers or Miles and the three modes of operation are: walking, biking or driving. The GPS on your device must be activated for this program to work.

There are also Apps that can use the camera to make your device a magnifier of tiny print. Other Apps can read labels out loud. I could go on App nauseum about the world of Apps, but I will leave you with this simple crtiteria: If a need gets you to say: "I wonder if.....there is an App for this?", there probably is, and it may even be free. There may be one exception to this rule. I have heard many folks tell me where to stick my smart phone, but I have thus far failed in my quest to find an App that would turn it into a Rectal Thermometer. ☺

I will offer a caution. I do not trust banking Apps and I do not have confidence using my credit card to make purchases over a smart phone. If crooks will not conduct business on cell phones, that should tell us something about how secure they are.

Available on the iPhone App Store

Feedback

Google play

What do you use? Please feel free to pass on information on any Apps that you may be using that are helpful for people with disabilities. Are you a developer? If you are, there is a market for people with disabilities, so consult with some of us to find out the needs. If an App comes along that improves quality of life, most people would be happy to pay for it, including me!

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Life Goes On....

Having a spinal cord injury (SCI) is one of the most traumatic life changing experiences one can imagine. I won't lie to you, it's tough. Every single waking moment is a constant struggle. I'm injured at the C5/6 level, which would give most of you reading this a rough idea of my capability and/or disability. Basically my motor function ends at the wrists with zero finger movement.

I have to be blunt as space is limited. Was there a time when I wished I had not survived my accident? ***Yes.*** In the early days/weeks/months of my injury I felt like less of a man and did not want to sentence my wife and children to a lifetime of the hardships that inevitably accompany an SCI. The one big thing that I am thankful for is that there was no plug to pull at the time, because it would have been a big mistake.

No, my injury has not improved; there is no miracle cure on the immediate horizon, at least not one that I am aware of. I just had to simply make up my own mind to persevere, to merge my old life with my new life and let the chips fall where they may. You can always hope that one day humanity and science will merge for the greater good and get this thing fixed. You can even advocate for yourself and get involved if that is your desire. My advice to you is not to dwell on it (the cure), because it can consume you and make you lose focus on what is most important...you. Why? Because life goes on.

If I had quit, I wouldn't have broken barriers that were once thought unachievable at my level of injury. For instance, I was told that I would never drive again…they were wrong. I have my license back. I designed and built a tractor that allows me to plow snow and feed calves. I can shoot, fish and use a computer. I am only limited by imagination and a lack of perseverance. Use the tools provided to you like CPA, Wheelchair Services and Rehab. Engineering. Without them I'm not sure what I would have done. Their value to a person with a spinal cord injury is immeasurable.

TRIBUNE PHOTOS BY JOSIAH NEUFELD
Teulon area resident Doug Barker shows off the one-of-a-kind tractor he invented.

My kids were two and four years old at the time of my injury. If I had quit, I would not have been there to help shape them into the young adults they are today – a welder who helped me build my tractor, and a school teacher. If I had quit, I would not have had the pleasure of walking/wheeling my daughter down the aisle or having the father/daughter dance at her wedding. These are only some of the things that have happened to me in my "new life". With technology continually advancing, who knows what lies ahead? I think I'll ride it out, persevere and let the chips fall where they may. ***Because life goes on!***

~ Doug Barker ~
Injured January 8, 1993 while playing hockey

Doug Barker with daughter, Brittany

Sledge Hockey

Winter is upon us and another year of sledge hockey is finally here. Whether you are interested in participating, or attending to support the players, sledge hockey returns to the MTS Iceplex, 3969 Portage Avenue. Sledge Hockey Manitoba will have 3 divisions for the 2012/13 season. The junior division will be open to all players who are 14 years old or younger. The Intermediate division will be open to those individuals 14 years and over focusing on basic skills, open to those of all skill levels. The senior division focuses on individuals with higher skill levels and for those who wish to compete for the Manitoba travelling team.

The dates and times are shown below. If you are interested in participating, please contact Bill Muloin at 204-975-3261 or bmuloin@smd.mb.ca.

Please note that the schedules are subject to change, so please check the Sledge Hockey Manitoba website for updates: www.sledgehockeymanitoba.com.

JUNIOR DIVISION 2012/2013 SCHEDULE

Date:		Start Time:	Duration/Type:
Saturday	October 27	11:45 a.m.	1 hour (Practice)
Saturday	November 3	11:45 a.m.	1 hour (Game)
Saturday	November 10	11:45 a.m.	1 hour (Game)
Saturday	November 17	11:45 a.m.	1 hour (TBA)
Saturday	December 1	11:45 a.m.	1 hour (Practice)
Saturday	December 8	11:45 a.m.	1 hour (TBA)
WINTER	**BREAK**	----------	----------
Saturday	January 5	11:45 a.m.	1 hour (Game)
Saturday	January 12	1:30 p.m.	1 hour (Game)
Saturday	January 19	11:45 a.m.	1 hour (Game)
Saturday	January 26	11:45 a.m.	1 hour (Game)
Saturday	February 2	11:45 a.m.	1 hour (Game)
Saturday	February 9	11:45 a.m.	1 hour (Game)
Saturday	February 23	1:30 p.m.	1 hour (Game)
Saturday	March 2	11:45 a.m.	1 hour (Game)
Saturday	March 9	11:45 a.m.	1 hour (Practice)
Sunday	March 17	11:45 a.m.	1 hour (Game)
Sunday	March 24	5:45 p.m.	1 hour (Game)

INTERMEDIATE DIVISION 2012/2013 SCHEDULE

Date:		Start Time:	Duration/Type:
Sunday	October 28	3:20 p.m.	1 hour (Practice)
Sunday	November 4	3:20 p.m.	1 hour (Practice)
Saturday	November 10	1:00 p.m.	2 hours (Practice/Game)
Sunday	November 25	11:45 a.m.	2 hours (Practice/Game)
Sunday	December 2	3:20 p.m.	1 hour (Practice)
Sunday	December 16	3:20 p.m.	2 hours (Practice/Game)
WINTER	BREAK	----------	----------
Sunday	January 6	3:20 p.m.	1 hour (Practice)
Sunday	January 13	3:20 p.m.	2 hours (Practice/Game)
Sunday	January 20	3:20 p.m.	2 hours (Practice/Game)
Sunday	January 27	3:20 p.m.	1 hour (Practice)
Sunday	February 3	2:10 p.m.	2 hours (Practice/Game)
Sunday	February 10	3:20 p.m.	1 hour (Practice)
Sunday	February 24	3:20 p.m.	2 hours (Practice/Game)

Sunday	March 3	3:20 p.m.	2 hours (Practice/Game)
Saturday	March 9	1:00 p.m.	1 hour (Practice)
Sunday	March 17	1:00 p.m.	2 hours (Practice/Game)
Sunday	March 24	7:00 p.m.	2 hours (Practice/Game)

SENIOR DIVISION 2012/2013 SCHEDULE

Date:		Start Time:	Duration/Type:
Sunday	October 28	4:30 p.m.	1 hour (Practice)
Sunday	November 4	4:30 p.m.	1 hour (Practice)
Saturday	November 10	1:00 p.m.	2 hours (Practice/Game)
Sunday	November 25	11:45 a.m.	2 hours (Practice/Game)
Sunday	December 2	4:30 p.m.	1 hour (Practice)
Sunday	December 16	3:20 p.m.	2 hours (Practice/Game)
WINTER	BREAK	----------	----------
Sunday	January 6	4:30 p.m.	1 hour (Practice)
Sunday	January 13	3:20 p.m.	2 hours (Practice/Game)
Sunday	January 20	3:20 p.m.	2 hours (Practice/Game)
Sunday	January 27	4:30 p.m.	1 hour (Practice)
Sunday	February 3	2:10 p.m.	2 hours (Practice/Game)
Sunday	February 10	4:30 p.m.	1 hour (Practice)
Sunday	February 24	3:20 p.m.	2 hours (Practice/Game)
Sunday	March 3	3:20 p.m.	2 hours (Practice/Game)
Sunday	March 10	4:00 p.m.	1 hour (Practice)
Sunday	March 17	1:00 p.m.	2 hours (Practice/Game)
Sunday	March 24	7:00 p.m.	2 hours (Practice/Game)

Research

Regulated Regimen Readies Rendered Rats to React to Rewards (Regrettably Rats Require Restraints to Remain Erect)

by Kristine Cowley, PhD

In this installment of ParaTracks I will describe some recent research published in Science magazine regarding rats with spinal cord injury that recovered their ability to perform functional hindlimb movements in response to offered food rewards. Since this research article appeared in Science in June, it has received a fair amount of attention in the news and on the internet, and so I thought it would be useful to describe it here and mention a few points to consider when trying to decide what this may mean for people currently living with a spinal cord injury.

The **methods** used are summarized in cartoon form in Figure 1, but basically the researchers 1) cut the spinal cord in two places to get rid of all direct input from the brain (two contralateral hemisections), 2) trained the rats in a support harness (robotic postural interface) that keeps the rats upright, 3) gave the rats a small electrical current to the spinal cord in the area involved in hindlimb control, and 4) gave injections of drugs that mimic two neurotransmitters (serotonin and dopamine) that are thought to be involved in locomotion.

Outcomes: The rats that were trained with food rewards while in the harness were able to take steps, go up rat-sized stairs, and avoid obstacles while seeking food rewards. This work was done by several researchers working in a lab in Switzerland (Science June 2012 van den Brand and others) and is an amazing example of how motivation can get paralyzed rats moving.

To get an idea of what I'm talking about, type and paste the link below into your web browser's URL so you can then click on the videos that show the rats' activities: www.sciencemag.org/cgi/content/full/336/6085/1182/DC1).

The researchers **conclude** that the rats' movements while in the support harness were due to reconnection between the brain and spinal cord that was brought on by the repeated application of drugs, electrical stimulation and locomotor training (they

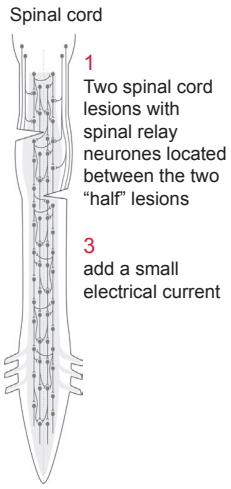
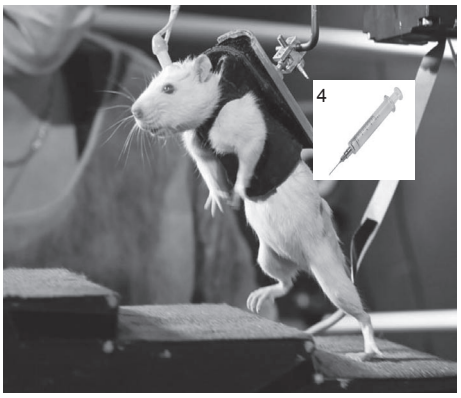


Figure 1:



Methods:

1- make 2 cuts in the spinal cord at two different locations (each cut only goes halfway across the spinal cord, called a 'hemisection')

2-train the rats in a body harness that keeps the rat upright (provides for balance) to find ways to seek out food rewards

3-Electrically stimulate spinal cord neurones and motoneurons using fine wires implanted into the area of the spinal cord that controls the hindlimbs

4-inject drugs that mimic serotonin and dopamine to the animal

reported restoring the rats' 'voluntary control of stepping'). Figure 2 shows a pretty muscular rat taking steps overground while being held in a harness that keeps the animal upright and prevents it from lurching from side to side.

While no one can argue that the animals movements are really quite impressive, it also becomes apparent from the videos that it is hard to tell if the movements of the legs are due to reconnection between the brain and the part of the spinal cord controlling the hindlimbs or whether the animals' hindlimbs start moving because of the huge increase in activity from the rats' forelimbs while trying to lean forward and retrieve their food rewards. The hindlimb movements may be triggered by activity in relay neurons located within the spinal cord (between the two partial spinal cord lesions) or they could be triggered by activity located below the injury sites.

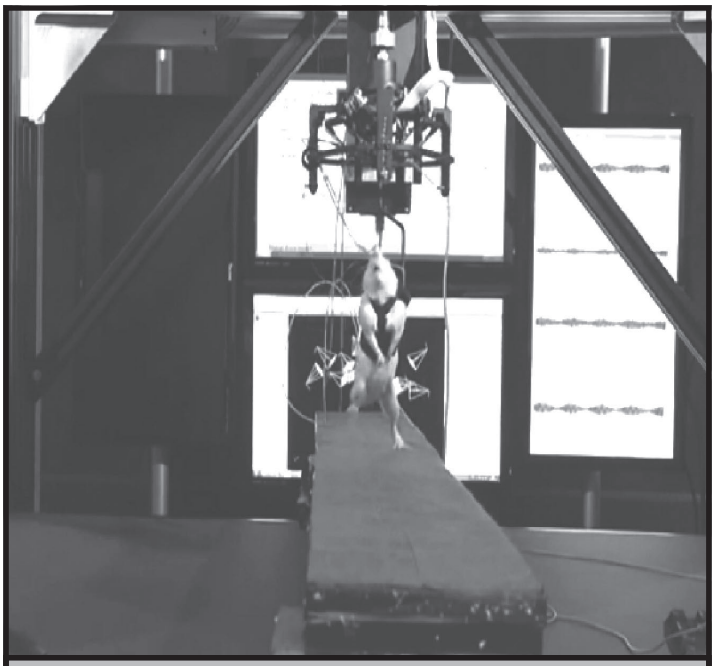


Figure 2: Spinal injured rat showing overground stepping while in the postural support harness.

This point is important because even completely paralyzed rats can show hindlimb movements if put in the right position, with balance support (and sometimes chemical and electrical stimulation). In this last example, the hindlimb stepping is thought to be due to activity solely within that part of the spinal cord below the injury site, and not at all due to reconnection with the brain.

Nonetheless, this research does show that a combination of treatments (drugs, electrical stimulation and a postural harness) and very importantly, motivation with a food reward, can improve the stepping of animals with a spinal cord injury. Although drugs and electrical stimulation and treadmill training have been shown to improve hindlimb stepping after spinal cord injury, the results were not quite as robust as what was shown in this Science paper. However, earlier reports did not involve the food rewards either.

So, what does this mean for people living with spinal cord injury today? Well, I don't think it will be time to start training those with a motor complete injury in this fashion, but this work (and that of many others) is suggesting that more aggressive rehabilitation training and various drugs or electrical stimulation applied directly to the spinal cord may be of use for improving motor function in those with incomplete spinal cord injury.

A final point to consider regarding this report in Science is that none of these animals are able to maintain an upright posture and balance on their own; without the body harness the animal would fall down. So the other necessary research goal needed is to discover ways to improve balance and posture after spinal cord injury.

If you have any questions about this or other spinal cord injury related research, Kris Cowley can be reached via email at kris@scrc.umanitoba.ca.

Home & Yard Maintenance

The following is a list of non-profit organizations in the Winnipeg area that offer cleaning & household maintenance services at an economical rate.

Please note: These companies are not necessarily endorsed by your Occupational Therapist or the WRHA.

Seniors Centres

Services: You can contact senior centres for a list of people who do jobs like cleaning, yard work and snow removal at economical rates

Broadway Seniors Resource Council Inc.
The Wolseley, West End, & Broadway area.
Phone: 772–3533

Keewatin/Inkster Neighborhood Resource Council Inc.
The East Kildonan, North Kildonan, Elmwood & Transcona areas.
Phone: 774–3085

River East Council for Seniors
The River East area.
Phone: 667–6812

St. James Assiniboine Senior's Centre
The St. James area.
Phone: 987-8850

Transcona Council for Seniors
The Transcona area.
Phone: 222-9879
E-Mail: transconacouncilforseniors@gmail.com

Other Resources for Seniors

Community Home Services Project
Services: Provides assistance for low-income seniors (60+) & physically disabled persons throughout the city. Services offered include yardwork, home cleaning, window & wall washing, snow removal & small jobs.
Services are free of charge for qualified individuals.
Phone: 927–1720

SSCOPE Inc. (Self-Starting Creative Opportunities for People in Employment)
Services: Provides casual employment opportunities for consumers of mental health services, so that they can use & develop their work skills. These men & woman will do yard work, light moving & hauling, general maintenance & other odd jobs. Average monthly cost for service is $90–125.
Phone: 987–6300

Snow Angels Snow Removal (Charleswood)
Services: Matches seniors with community volunteers who provide free snow removal in winter months from sidewalks and driveways.
***Closed June - September
Phone: 897-5263 or 832-6527

Housework, Chores & More
Services: services offered include housekeeping, home & yard work & escorted transportation. Free estimates.
Phone: 237-7866

Workforce Venture
Services: Workforce Venture is a division of McDonald Youth Services. They provide work training for young people aged 14–18. Supervision is provided for yard work & snow removal.
Phone: 477–1722

Good Neighbors Seniors Centre
Services: services offered include cleaning, laundry & yardwork for seniors. Fees apply.
Phone: 669–1710
E-Mail: gnscl@mts.net

Did You Know?

The City of Winnipeg is able & willing to provide special services to seniors living in their own homes that are physically unable to put out their own garbage & recycling.
Here's how it works:

Garbage: Call the City at **986–5858** and explain your need. They will send a bylaw Constable to tell you about the program & give you an application. A medical certificate may be required. If you're eligible for the service, the foreman of the refuse crew will check to see if your home is easily accessible for his crew.

Recycling: The City of Winnipeg has a porch/front door pick up program for individuals who cannot carry out their blue box recycling bin or garbage to the curb. Individuals need to complete a special application, which can be obtained by calling **986–5858**.

Snow Removal: There is a provision for the city to make sure that you have a path cleared from the sidewalk in front of your home to the road (in the winter). You are only eligible for this service if all persons in the household are physically unable to do the work and there are no other options (family, friends, neighbours). For more information, call the City at **986–5858**

From: Seniors Resource Network, July 2011
http://seniors.cimnet.ca/cim/19C99_51T1945T50T1930T52T19065.dhtm

G:\Occupational Therapy\Resource Aide OT\Patient Handouts\WRHA Patient Handouts 2011

Revised July 2011 by VGH Occupational Therapy

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CPA extends its sympathies to the families of the following loved ones who recently passed away

Bryon Crerar
Georgia Dubois
Ray Schaak
Ann Slochinski
Malcolm Paupanekis
Helmut Enns
John Wolfe
Maurice Silver
Robert Vielfaure
Andrea Johnston

CPA also extends its apologies to Travis Pemmican and his family and friends for mistakenly listing his name as a member who recently passed away.
We sincerely apologize for any sorrow and pain this may have caused.

Therapy First

Occupational Therapists who specialize in Spinal Cord Injury Rehabilitation and Wheelchair Seating. Call us!

Therapy First

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or contact Therapy First by phone at 204-612-0398

Return undeliverable Canadian addresses to: _____ PM 40050723

Canadian Paraplegic Association (Manitoba) Inc.
825 Sherbrook St., Winnipeg MB R3A 1M5

MEMBERSHIP APPLICATION

YES! Count me in as a member of the Canadian Paraplegic Association (Manitoba) Inc. All members receive *"Para-Tracks"* CPA (Manitoba) newsletter, *"Total Access"* CPA National Magazine and voting privileges at the Annual General Meeting. Members also receive discounts at various health care supply stores – Stevens Home Health Care Supplies (special pricing for supplies & 10% off equipment), The Access Store (10%), Northland Home Health Care (10% off medical supplies) and Disabled Sailing membership (25%).

I wish to select the following category of Membership:

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All Monies donated remain in Manitoba to support CPA (Manitoba) Inc. An income tax receipt will be issued for any amount over $15.00. Sustaining, Charter and Patron Members will receive recognition of their generous contribution in the context of events such as our Annual General Meetings or in the programs of other CPA (Manitoba) Inc. functions.

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Name: _____ Signature: _____ Date: _____

Make cheque payable to: **Canadian Paraplegic Association (MB) Inc.**
Mail to: 825 Sherbrook Street
Winnipeg MB R3A 1M5

For more information:
Phone: 204-786-4753
Toll-free within MB: 1-800-720-4933
Fax: 204-786-1140
Email: aconley@canparaplegic.org

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