

Polio Perspective
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UNINTENDED CONSEQUENCES:
What Bill Gates Doesn't Want You to Know

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Summary:
POLIO PROGRAMME:
LET US DECLARE VICTORY AND MOVE ON.

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JANUARY 12, 2012, marked a significant milestone for India. It was the first anniversary of the last reported wild polio case in India in 2011. India's programme has largely been self financed and not funded by Bill Gates.

However, in 2011, there were 47,500 cases of so-called "non-polio" acute flaccid paralysis (AFP), clinically indistinguishable from polio paralysis but twice as deadly. The incidence of AFP was directly proportional to the number of doses of oral polio vaccine (OPV) received. In some areas the vaccine is given practically once every month. The incidence of AFP in India increased exponentially after the

high potency OPV was introduced in 2005 and is now 12 times higher than international norms.

The Indian National Polio Surveillance Programme maintained that the 47,500 AFP cases in 2011 were due to reporting of “mild weakness of little consequence.” However, cases of AFP in Uttar Pradesh, the most frequently vaccinated state in India where children were given an average of 7 OPV doses per year between 2004 and 2009, were followed up after 60 days; 35.2% were found to have paralysis and 8.5% had died. The AFP rate in Uttar Pradesh is 25 times higher than international norms, with 1,900 polio cases but a staggering 178,000 cases of AFP between 2004 and 2009.

Though this data was collected within the government’s National Polio Surveillance Program, the cause of AFP was not investigated by the government, which ignores the fact that AFP was directly proportional to the number of doses of OPV received and likely results from mutation of the live, inactivated OPV allowing it to be able to cause paralysis. “Non-polio” acute flaccid paralysis is “OPV-derived” acute flaccid paralysis -- i.e., polio vaccine-induced paralysis -- caused by mutated vaccine strains of polio virus.

The huge costs of repeated rounds of OPV in terms of money and cases of AFP shows that monthly administration of OPV must cease. The polio eradication program epitomizes nearly everything that is wrong with 'disease specific' projects funded at the cost of investments in community-oriented primary health care. Such projects undermine broader health services through duplication of effort (each single disease control program requires its own bureaucracy), distort national health plans and budgets and, because salaries of donor-funded programs are often more than double those of equally trained government workers, lead to a diversion of skilled local health personnel from primary healthcare.

The WHO's current policy calls for cessation of OPV vaccination three years after the last case of wild polio-virus-caused poliomyelitis. The risks inherent in this strategy are immense. Herd immunity against poliomyelitis will rapidly decline as new children are born who have not been infected with wild-type viruses or were not vaccinated, a situation that has never existed in human history. Thus, any outbreak of poliomyelitis after cessation of polio vaccination will be disastrous.

From India's perspective the exercise has been extremely costly both in terms of human suffering and in monetary terms. The principle of *primum-non-nocere* (first, do no harm) was violated. Our resources are perhaps better spent on controlling poliomyelitis rather than trying to eradicate the disease. It is tempting to speculate what could have been achieved if the \$2.5 billion spent on attempting to eradicate polio were spent on water and sanitation and routine immunization. Perhaps control of polio, to the level of elimination, may well have been achieved without hundreds of thousands of cases of OPV-derived paralysis.

Another question ethicists will ask, is why champions of “polio eradication” continued to exhort poor countries to spend scarce resources on a program they should have known was never going to succeed.

When the US was badly mired in Iraq in 2005, Joe Galloway suggested that the US must simply declare victory, and then exit. Perhaps the time is right for such an honorable strategy with regard to polio eradication.

<http://www.issuesinmedicalethics.org/202co114.html>

WEB CORNER

Here is an article on aging with polio:

[Lincolnshire Post-Polio Network - LINC-PIN - Informative Newsletter Volume 2 - Issue 9 - February.](#)

The following article describes the treatment that are getting good results for fatigue in post polio syndrome in Copenhagen.

[An Immune Treatment Finds New Uses For Mental Health: Scientific American](#)

Here is an informative video of the onset of Polio in the '50s

http://www.snagfilms.com/films/title/a_paralyzing_fear

Tips to make traveling with a disability easier:

<http://www.disabled-world.com/travel/disability-travel-tips.php>

A new vaccine used against polio:

<http://postpolioproblemadediscapacidad.blogspot.com/2013/01/health-organization-has-begun-to-use.html?spref=fb>

An interesting article about the effects chronic inflammation has on our bodies. It speaks of Traumatic Brain Injury but also might apply to polio survivors.

<http://www.medicalnewstoday.com/releases/254617.php>

What Having Had Polio Causes, Might Cause, and Does Not Cause...

<http://www.post-polio.org/edu/pphnews/PPH28-2spr12p1-5.pdf>

Truth or Consequences by Millie Malone Lill

Facebook has several pages devoted to polio survivors, as you might have seen in the last issue of Polio Perspective. Today, I spent most of my morning on a discussion there. We started out talking about FDR, then segued into whether or not he had PPS and from there to why it is that some polio survivors get PPS and some do not.

My theory is this: When we contract polio in the first place, it hits our spinal cords with a shotgun effect. Motor neurons are killed right, left, and center. A muscle with a 60% loss of neurons is paralyzed. This is the Acute stage. Follow me so far? OK.

That muscle is still there, but there is no 'plug in' to connect it to the brain. So the neighboring neurons

pinch off little pieces of themselves and make little baby neurons to keep that muscle from being stranded. How neighborly, right? But the baby neurons are not quite as strong as their full grown neighbors and the neighbors themselves have lost just a bit of their oomph. As Mark Twain said, "No good deed ever goes unpunished." This act of unselfishness on the part of those larger neurons made it possible for us to recover. It looked like full recovery, but it wasn't, really. However, we could do just about what others could do and, being typical Type A polio survivors, we did all that and more just to prove we were even more normal than normal people are. This is the Stable stage of the process.

We are now 'cured' and we go like a house afire. It's the Polio Way, after all. But what's happening to that little collection of Neurons? The ones who shared of themselves are now kinda wishing they hadn't. I can almost hear them muttering, "Well, sure, I wanted to help out, but if I'd known this person was going to go crazy with the running around and overdoing, I would have thought a bit longer about it before just splitting off that baby neuron like I did!" They are now aging, too. Besides being a smaller number of neurons, since The Virus had wiped out 60% of their number at the beginning of all this, they've split themselves up with the baby neurons, so now they have less to work with.

The next stage is PPS. The unselfish neurons who made the baby neurons are now getting old and feeble and tired of doing all the work and trying to meet the expectations of that crazy survivor who doesn't want to behave. The demands are unreasonable, you must admit. So those neurons that are left decide to retire to Myrtle Beach or Sun City or somewhere they can enjoy the limited time they have remaining. Uh oh. Hmmm. Hey, you! The neuron who makes my left leg work, whatever your name is...where'd ya go? Baby neuron, pitch in here, will ya? But the baby neuron was not all that robust to begin with and he has wandered off to play in the sand box and isn't responding, either.

Here's where the crutches, canes and wheelchairs come into play. Crutches and canes are more easily accepted by some of us because they don't look as 'crippled' as a wheelchair. And, let's face it, most things we do are easier from a standing position than a seated one. Of course, there is always the thought that someone might not believe we are more normal than normal if they see us with these assistive devices. Once people see all of these as merely tools, acceptance can follow. I have been using a power chair for many years, not all the time, but for any distances, and guess what I've noticed. The earth has kept on twirling, the people who were my friends before are still my friends, and the people who are offended by my use of the chair were never going to be my friends in any case. I don't have any bigots as friends.

I believe that those people who never walked again after the Acute stage, are less likely to get PPS or are probably not going to get as severe a case as those of us who had a 'complete recovery' and went on to abuse those poor beleaguered neurons that were left after the Acute stage. For one thing, no one expects you to do some of the things a walking person does. It's also a lot harder to swim in that river in Egypt. You know, De Nile? This is not to say that the ones who never walked again don't have problems. Someone using a manual chair is going to wear out their neurons most likely at the same rate as someone using crutches or a cane. I'm just saying that ignoring our pain and exhaustion, continuing to pretend we never had polio and constantly working ourselves into exhaustion is as good a way to get PPS as any I can think of.

Some unenlightened medical professionals will urge us to use it or lose it, no pain, no gain, let's build that muscle up and you can get rid of the wheelchair/cane/crutch. And some of us will dutifully obey and then wonder why we are so exhausted after exercising that we can hardly keep going. After a few days of this craziness, we find we are worse off than before we started doing the exercises. My reply to that is that you cannot tune a radio if it has no source of power. No plug in, no batteries, it is not going

to work, no matter how hard you push those buttons or twist that dial. Same with a muscle that has no neuron to connect it to the brain.

We are back on that tightrope I've mentioned so many times in these columns of mine. Too little exercise and we lose the use of what muscles we retain. Too much and we lose the use of what muscles we retain. The secret, I think, is to keep moving, but quit before you are tired. Dr. Bruno says that if something hurts when you do it or causes fatigue, either quit doing that or do a lot less of it. Wise man, Dr. Bruno. So, to explain my title, we must face The Truth or suffer The Consequences.

I'm going to leave you now. I have to settle a dispute between a couple of neurons who think I should have my head examined for expecting them to hold my body upright while baking cookies instead of sitting down between batches. I'm afraid if we don't get this settled, there might be a general strike!

A Bit of Humor

Carolyn, a rich blonde...Buys a new automatic Jaguar XKR Sport. She drives the car perfectly well during the day...But ... at night, the car just won't move at all. After trying to drive the car at night for a Week (but without any luck), she furiously calls the Jaguar dealers and they send out a technician to her.

The technician examines the car and finds...nothing wrong with it. So... he turns to the blonde and asks: "Ma'am, are you sure you are using the right gears?"

Full of anger, the blonde replies: "You fool, you idiot, how on earth you could ask such a question? I'm not stupid you know! Of course I am using the right gears...I use D during the day and N at night!!!"

Misunderstanding at the Hardware Store

There was a bit of confusion at Ace Hardware this morning. When I was ready to pay for my purchases of gun powder and bullets the cashier said, "Strip down, facing me."

Making a mental note to complain to Orlando Sentinel about the gun registry people running amok, I did just as she had instructed.

When the hysterical shrieking had finally subsided, I found out that she was referring to my credit card. They need to make their instructions to us seniors a little clearer!

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