



THE LIGHTHOUSE

Coastal Empire Polio Survivors Association, Inc.
Shining Light on Post-Polio Health

February, 2014 Newsletter

www.coastalempirepoliosurvivors.org

Vol. XVII, No. 2

What's Inside THE LIGHTHOUSE:

CEPSA Business 2-3

- General Meeting Minutes
- Upcoming Meeting Dates
- Banquet Oops!
- Our February Speaker
Peter Brodhead CN, C.Hom
- January Program Summary
- Voluntary Dues

Articles 4-7

- SYRIAN POLIO VICTIMS ALSO
VICTIMS OF GLOBAL POLITICS
By Trudy Rubin
- Raise Your Prescription IQ
By William H. Thomas, M.D.
- Valentine's Day Tips

Announcements 7

- Birthdays
- Member Concerns
- Condolences
- Congratulations

Contributions 8

- Contributions Form

The President's Message...



What a great program we had for our first meeting of the year! Alison Walmsley, Occupational Therapist, shared excellent information and suggestions to help us in our daily lives. My thanks to Alison and the members who braved a very cold Savannah morning to attend. Feedback about our new meeting location, the conference room in the Lewis Cancer and Research Pavilion on the Candler campus, was very positive. Kudos to the Candler Hospital Security Department for their professionalism and promptness in opening and closing the building for us.

February is a busy month. We recognize or celebrate Black History Month, American Heart Month, President's Day, Georgia Day (February 12), Savannah Museum Sunday, Savannah Book Festival, and Susan B. Anthony Day (February 15). Look for events, lectures, and programs we can attend in the community focusing on these topics.

I have my own personal moment to celebrate Susan B. Anthony, a civil rights leader who worked for a woman's right to vote in this country. When I realized that women did not have the right to vote when my mother was born, I was appalled and saddened. That has influenced my lifelong interest in civil rights, including women's rights. My beloved mother valued the right to vote and exercised it until near the time of her death.

I recently began reading *The Man He Became: How FDR Defied Polio to Win the Presidency* by James Tobin. This is a fascinating look at President Roosevelt's polio journey and how it changed his life in many positive ways.

Coming Attractions in CEPSA: Programs on nutrition and wellness; having critical paperwork in order; potential pulmonary problems in polio survivors; celebrating 17 years of CEPSA; bracing for polio survivors.

Our February 22 program is not to be missed. Peter Brodhead of Brighter Day Natural Foods will enlighten us about nutrition and supplements that can help us regain or maintain our health. Peter spoke to CEPSA in our early days and prepared a large notebook filled with information helpful to polio survivors. He speaks to varied groups in the community, including medical students and physicians. This man is a forever student and will bring new information to us.

I hope everyone was safe during our big weather event. We wish for an early spring with 70+ degree days and a sunny Savannah. See you on February 22 for our second meeting of 2014.

Cheryl Brackin

Next Meeting
Saturday,
February 22, 2014
10:30 AM
at Nancy N. and J.C.
Lewis Cancer and
Research Pavilion
Room 203

225 Candler Drive, Savannah, GA 31405

Coastal Empire Polio Survivors Association, Inc.

General Meeting Minutes January 25, 2014

Location: Nancy N. & J.C. Lewis Cancer &
Research Pavilion, 2nd Floor, Room 203

Call to Order/Welcome: President Cheryl Brackin called the meeting to order at 10:45am and then welcomed everyone with recognition of new member Margaret "Peggy" Wise. She thanked those in attendance for making the meeting despite the cold weather and gave an orientation to the new meeting room.

Pledge of Allegiance: Harvey Varnadoe led the Pledge of Allegiance.

Inspiration: Terri Dunnermann gave the inspiration, the poem, "Drop a Pebble in the Water," by James William Foley. Dropping words of kindness is like dropping a pebble in water; words of kindness go on and on. Terri then passed a sign-up sheet for future inspiration speakers to volunteer.

Program: Cheryl then introduced our guest speaker Alison Walmsley, OTR/L, CHT, CLCP, Occupational Therapist at Chatham Orthopaedics & Sports Medicine. Her presentation was entitled "Making the Most of Your Daily Living." Alison described or demonstrated numerous techniques we can use. She suggested ways to make bathing, dressing, driving, traveling, and shopping easier and safer for us. We learned how to grasp items in order to protect the joints in our hands. Alison demonstrated massagers that will improve blood flow to decrease pain. She stated that good mental health is important to good physical health. Alison recommended using deep breathing to reduce stress. She left handouts for those that want to read more. We can reach her by email at awalmsley@chathamorthopaedics.com. Alison shared that she does life care planning in addition to occupational therapy.

Business Meeting:

Approval of Minutes: Minutes from the October meeting posted in our newsletter were approved as written.

Financial Report: The treasurer's report was given by Terri Dunnermann and approved as presented.

Care Team Reports: The care team leaders reported concerns about Delores McIntyre, Ruth Parham, Betty Goff, Lorraine Frew, Janet DiClaudio, and Archie Ivy.

Old Business: Cheryl gave a word of thanks to Wanda & Carlos Clas for their major assistance to her on the January newsletter. Alphagraphics now will be mailing

out our newsletter for those who do not have e-mail.

New Business/Announcements: Cheryl reported that CEPSPA now has a new post office box. Correspondence can be sent to CEPSPA, P.O. Box 14252, Savannah GA 31416. The President and Vice-President will manage the keys and deliver mail to the officers during board meetings and general meetings.

Cheryl has recommended that we request a mayoral proclamation recognizing CEPSPA at our April anniversary luncheon meeting. Diane Davis agreed to assist Cheryl in providing the information to Mayor Jackson for the proclamation. Three members will tell their polio stories at the meeting.

Diane reported on an email, shared by Jim, from our website. Seventh-grade students from California are requesting our input regarding a project they are doing, concerning the effects of polio and current effects of immunization requirements versus no immunization. Diane has offered to assist Jim in responding to the students. More information will be shared at the next meeting.

Our next meeting will be at the same location with our guest speaker, Peter Brodhead of Brighter Day Natural Foods, on February 22nd.

The meeting was adjourned at 12:35 pm.

Respectfully submitted,
Michael Dunnermann, Secretary

Attendance: Cheryl Brackin, Wanda Clas, Michael & Terri Dunnermann, Lavonne Calandra, Susan and Paul Pineo, Sissy Morel, Diane Davis, Adrienne Stallworth, Esther Simmons, Della Simmons, Margaret Wise, Alan & Joan Page, Penny & Ross Smith, Harvey Varnadoe.

Upcoming Meeting Dates

February 22, 2014 @ ***

March 22, 2014 @ ***

April 26, 2014 @ Marsh Auditorium

May 17, 2014 @ ***

June 28, 2014 @ ***

July & August - No Meetings

August 2, 2014 - Summer Luncheon

noontime, Dutch treat

September 27, 2014 @ ***

October 25, 2014 @ ***

November - No Meeting

December 6, 2014 @ Hilton Garden Inn

*** (General Meetings)

@ Nancy N. and J.C. Lewis Cancer &
Research Pavilion, Room 203

Banquet Oops!

Marty Foxx's name inadvertently was omitted from the list of banquet door prize donors. We thank her for donating a gas card, a very useful item. Betty Goff's name was omitted from the list of door prize winners. Congratulations to her!

Our February Speaker



Peter Brodhead CN, C.Hom

Peter will present our February program "Diet and Nutritional Support for Polio Survivors." He and his wife Janie Brodhead opened Brighter Day Natural Foods in Savannah in 1978. Peter holds a Bachelor of Arts degree in Economics from Mercer University. He became a certified nutritionist in 1985 and received certification in homeopathy with Robin Murphy, ND at the Hahnemanian Academy of North America in 2005. He has lectured to medical residents and freshman medical students about integrative medicine. Peter has presented at conferences for nurses, nurse practitioners, and pharmacists; university nursing departments; and various community organizations including support groups. He gave an outstanding lecture to us in the early years of CEPSSA. We are honored to have Peter return.

JANUARY PROGRAM SUMMARY

Alison Walmsley, Occupational Therapist, presented the first program of the year, "Making the Most of Your Daily Living," to our group on January 25. She is on the staff of Chatham Orthopedics and Sports Medicine, where she is the head of the Hand Therapy Department. Early in her talk Alison stated that good mental health is important to good physical health. She discussed the importance of dealing with stress, having us practice deep breathing as a way to reduce tension. We placed our hands on our abdomens as we used a diaphragmatic-abdominal breathing technique. Alison advised us to change our perspective and take time to relax to manage the stressors in our lives. Managing stress can have a positive impact on our daily cognitive functioning.

Alison reminded us that 75-80% of falls in the home occur in the bathroom. She advised us to place non-slip mats in bathtubs and to use grab bars, shower chairs, or benches. She said even placing a towel on the floor of a shower stall can prevent slipping. Alison showed a long-handled sponge (cost \$1 at Dollar Tree) to use in bathing.

When we begin our day by getting out of bed, we can use the "log roll" technique to assist us. (Maintain neutral position of spine; roll whole body to one side; ease legs off edge of bed toward floor, not dropping to floor; push self up into sitting position; move slowly to maintain control and neutral position of spine; reverse to lie down.) She demonstrated how to use a sock aid (cost \$15) and even a reacher in putting on and pulling off socks. She demonstrated the use of a long-handled shoehorn to assist in putting on shoes.

Our speaker advised us to use a three-finger pinch rather than a two-finger pinch to protect our joints. Splints or orthotics can be made by OTs to help with writing difficulty due to hand weakness or co-ordination problems.

Alison demonstrated the use of massagers to improve blood flow and decrease pain in affected muscles and joints. A mini-massager from Patterson (also Amazon) can be used on tennis elbow. An old sock or an Ace wrap can hold the massager in place. Alison demonstrated the Tapping Pro massager (cost \$25-30 on Amazon) for cervical, back, and leg pain. A full chair massager (cost \$40-60) from Con-Air can be helpful.

Alison advised us to conserve our energy by using courtesy scooters in stores and also using scooters for travel, including air travel. We can have our cars modified to make driving easier. Alison recommended driving gloves to facilitate holding the wheel.

Alison advised us to see our doctors as needed and to give them a list of concerns at the beginning of a visit. She suggested that we have appropriate lab work as needed. Research has shown that a low vitamin D level can cause fatigue, a particular concern for polio survivors who have reduced energy levels. We must be proactive and ask our doctors if we want specific blood work to rule out deficiencies, which might be increasing our post-polio symptoms.

Editor's Note: We have extra copies of Alison's handouts, which will be available at the February meeting.

**Voluntary Dues of \$20.00
may be paid to:**

CEPSA
P.O. Box 14252
Savannah, GA 31416

Please try to make your payment this month,
either at our next meeting or else by mail.

Thank you.

SYRIAN POLIO VICTIMS ALSO VICTIMS OF GLOBAL POLITICS

By Trudy Rubin

GAZIANTEP, Turkey – Just when you thought you had the measure of the war crimes in Syria, the Assad regime goes one worse.

The Syrian government is blocking efforts to distribute polio vaccine to children in opposition-controlled areas, who are the most endangered after an outbreak in October. More shocking, the United Nations and the international community are bowing to Assad and failing to get the vaccine to the children. This timidity could spark a polio epidemic throughout the Mideast.

Two months ago, doctors working in the rebel-held area of Deir al-Zour in northeast Syria reported the initial cases. Polio had been nearly wiped out globally, and this was the first outbreak in Syria since 1999.

Clearly an emergency vaccination campaign was needed. With sanitary conditions deteriorating under regime bombs, the outbreak could explode if spread throughout the region by Syrian refugees.

But here's the kicker. The fastest way to reach many endangered areas would be to transport vaccine across the Turkish border. However, the U.N. agencies that provide such vaccines--the World Health Organization and the United Nations' Children's Fund (UNICEF) -- will only work through governments, meaning the Assad regime.

WHO and UNICEF won't deliver aid across the Turkish border to Syrian children because the Assad regime won't OK it. "United Nations agencies do not provide such cross-border aid fearful that their operations in Damascus will suffer reprisals," complains Dr. Joanne Liu, president of Medecins sans Frontieres International, a private aid agency that sends medical aid across the border.

The U.N. stance means the Syrian government is in charge of the vaccination effort. True, U.N. personnel and Syrian health workers do take big risks crossing endless checkpoints to deliver vaccine to many parts of the country. But tens or even hundreds of thousands of children in opposition-controlled areas are not getting the vaccine.

Recently, I met Dr. Bashir Tajaldin, an epidemiologist with the opposition's transitional government in

Gaziantep; he said WHO's two vaccination campaigns since the October outbreak have failed.

Tajaldin said Assad's health ministry sent the vaccine to its office in Deir al-Zour, which sits in a small government-controlled area in the middle of rebel territory. In order to collect the vaccine, subdistrict health officials have to cross a bridge from rebel-held to regime-held territory. "Every day five, 10 people are killed on this bridge," Tajaldin said.

Their fears are enhanced by the regime's brutal campaign against opposition doctors and medical personnel. "The government tries to bomb field hospitals," Tajaldin told me. Tajaldin says that the opposition's medical network can go door to door with vaccines, the optimum procedure for anti-polio campaigns.

He also claims he got a "verbal promise from senior WHO and UNICEF officials" that they would deliver polio vaccine to Gaziantep in early December. Aid groups could then ferry the vaccine in without requiring U.N. agencies to violate their rules on sovereignty. However, the allegedly promised vaccine has not arrived.

After almost eradicating polio, it is criminal for the United Nations to risk a resurgence for political reasons. Although WHO says there are 17 confirmed polio cases, Tajaldin says there are 66. For each known case, he says, there are 200 asymptomatic carriers who could be spreading the disease.

When the world feared a genocide in the Darfur region of Sudan, the United Nations sent in food from Chad without asking the Sudanese government's permission. True, that operation obtained a U.N. Security Council mandate, which it might not get on Syria because of the Russian veto. But would Moscow really nix an anti-polio campaign to help Bashar al-Assad? As for WHO and UNICEF, the global protectors of children's health, they must find a way to speed vaccine across the Turkish border to Syria, and soon.

Trudy Rubin is a columnist and editorial-board member for the Philadelphia Inquirer. Readers may write to her at: Philadelphia Inquirer, P.O. Box 8263, Philadelphia, Pa. 19101, or by email at trubin@phillynews.com

Reprinted from SunSentinel, 1/1/2014.

Contributed by Jane McMillen, Member of Boca Area Post Polio Group.

Reprinted from Second Time Around, February 2014- Publication Of Boca Area Post Polio Group, Boca Raton, Fl.

Raise Your Prescription IQ

By William H. Thomas, M.D.

Even the most medicine-savvy person can pick up a few tricks, tips and tactics to help make wise choices, cut pill bills – maybe save a life. These true-or-false questions are just what the doctor ordered.

When you open your bottle of prescription drugs, you are in charge of your health – not your doctor. The risks you run and the benefits you reap depend greatly on what you know about your medications, or your Prescription IQ. Drug-smart patients know the pills they take are life-enhancing yet potentially dangerous. In my geriatrics practice, I've seen hundreds of patients whose health has suffered from side effects, drug interactions or simply taking too many medicines. Sometimes these problems are a nuisance. Sometimes they end lives. How smart are you? These questions test your knowledge.

True or False? You don't need to keep a list of the medications you take, because your doctor has that information.

FALSE:- Don't assume that doctors and hospitals have up-to-date information about you. Healthcare professionals do their best to be accurate, but you'd be surprised how easily errors can creep into your medical chart. Each time you visit a doctor or hospital, bring along an up-to-date list that includes:

- DOCTORS:- The names and phone numbers of all the doctors you're seeing.
- DIAGNOSES:- Your current and past conditions.
- MEDICATIONS:- Include the names and dosages of everything you take; don't skip over-the-counter drugs, herbal remedies and vitamins.
- HEALTH EVENTS:- Give dates and descriptions of key hospitalizations, surgeries, medical procedures, etc.

True or False? After a medication is prescribed for a serious illness, it's dangerous to ever decrease the dosage or stop taking it.

FALSE:- When I speak to doctors, I often ask if anyone remembers attending a med school lecture on the art of tapering medications. Typically no one raises a hand. Modern medical education pays very little attention to how to safely discontinue drugs. This is a tragic oversight, because continuing medications past their effectiveness is expensive and dangerous. Ask your physician: "Are the medications I am taking still necessary?" Help your doctor provide good care by letting him or her know you understand that more is not always better.

True or False? You should keep medicine where it belongs: in the medicine cabinet.

FALSE:- To preserve their power, medications should be stored in a cool, dry place. That rules out the medicine cabinet; bathrooms are among the moistest rooms in a house. A kitchen cabinet is better, but your best bet is a dresser drawer. Just use the childproof cap if the grandkids are around. According to the U.S. Consumer Product Safety Commission, one-third of the accidental prescription drug poisonings in children involve a grandparent's pills.

Another good idea is to use pill sorters to help keep track of medications. These small plastic trays can hold a week's worth of medication, slip easily into a purse or bag, and provide visual evidence of which doses already have been taken.

True or False? Savvy consumers dispose of outdated medications by flushing them down the toilet.

FALSE:- It's a good idea to get rid of old medicines, because prescription drugs are chemical compounds that break down over time. But flushing them is not the best option. Researchers are finding traces of prescription drugs in some public water supplies. The amounts are tiny, but the consequences could be huge.

A better option: Take your old pills back to the pharmacy – most pharmacies accept the return of outdated drugs.

True or False? Some side effects mimic signs of aging.

TRUE:- If you're suffering anything from memory loss to erectile dysfunction, don't just blame it on Father Time. Certain conditions are chalked up to "normal aging" when they're actually side effects from medications. Tell your doctor if something is not right, and do some research of your own. Sure, you never read the flimsy package inserts that accompany your medications – the print is tiny, and they're about as easy to understand as an income tax form – but your pharmacist can provide you with more readable and useful medication guides. You also can learn more about the side effects of specific medications on the Web, at www.fda.gov. The consumer information is current and accurate.

True or False? Lifestyle changes are less effective than drugs in improving long-term health.

FALSE:- Healthful eating habits, regular moderate exercise and weight loss are all linked to increases in strength, endurance, improved sleep and a better overall sense of well-being. Next time you pop the top on your medicine bottle, ask yourself whether a new commitment to diet and exercise might be part of the answer to your health issues. For example, weight loss, exercise and salt reduction can lower high blood pressure, and eating less saturated fat but more vegetables can lower cholesterol.

As a doctor, I can tell you that some people will need to take medications no matter how much they exercise and

how closely they watch their diet. But many more people can reduce the number of pills they take by embracing healthful food, fresh air and exercise.

And it's never too late to start: A study that followed more than 7,500 women ages 65 or older found that those who had been inactive, but took up exercise, had a 48% lower risk of death from any cause during the 12 years of the study than those who stayed sedentary.

True or False? Prescription drugs are tested on people of all ages before they receive FDA approval.

FALSE:- Few research trials include older people. As a result, doctors often have little information on how older people may respond to a particular medication. It's a critical issue because older people metabolize medications differently from healthy young adults. When prescribing medication to an older patient, my philosophy is "start low and go slow." If you start taking a new medicine, ask to begin at a reduced dose and make changes gradually. Doing so can protect you from unpleasant and dangerous side effects.

True or False? You can safely save money by splitting tablets at home.

TRUE:- Sometimes you actually can buy two pills for the price of one. For example, my local pharmacist tells me Zoloft costs \$2.87 for a 50mg pill – and a 100mg pill is the same price. So people taking 50mg of Zoloft a day could buy the 100mg tablets, break them in half with a plastic pill splitter (which costs about \$4) and save \$43.05 a month. If you take 10mg of Lipitor a day, you could buy the 20mg strength, split the pills and save \$1.87 a day, a 28% discount adding up to \$56.10 a month.

Not every drug can be chopped in half: Capsules cannot be split, and some tablets (mostly long-acting ones or those that are coated to pass intact through your stomach) should not be split either. Ask your doctor or pharmacist about each medication you take before splitting pills, and be sure to follow that advice.

True or False? Herbal remedies and dietary supplements rarely have side effects; that's why they don't require a prescription.

FALSE:- Herbs and dietary supplements are prescription-free as long as they don't claim to treat specific medical conditions. That's why packages tend to make vague promises such as "Prostate Health!" or "More Energy!" or "Lose Weight!"

Not only can these remedies have serious side effects, but they also can interact with prescription drugs. Some examples: Ginkgo can affect the body's response to anticoagulants or anti-platelet agents, while saw palmetto can increase the effects of estrogen.

It's always best to ask your doctor or pharmacist about

possible inter-actions before trying an herbal remedy.

True or False? The new Medicare prescription benefit law provides the same coverage to all regardless of income. (*This information may have been updated or changed for 2014; please check the Medicare website for current information.*)

FALSE:- This year, low-income beneficiaries can apply for a Medicare discount card and receive a \$600 credit for drugs. Check online at medicare.gov for eligibility information. Next year, the discount card program and the "direct subsidy" both end. But people with the lowest incomes will pay no premiums or deductibles, will pay small or no co-payments, and will have no coverage gap. Slightly higher incomes will have a reduced deductible; some will have a sliding-scale premium.

True or False? Brand-name medications are more expensive than generic because they are more effective.

FALSE:- The FDA guarantees that every generic medication works exactly the same as its brand-name equivalent. The only real difference is price. Generics cost an average of 20% to 40% less than their brand-name counterparts. Drug companies spend millions of dollars emphasizing the size, shape and color of their drugs. But it's what's inside the pill that counts, so ask if a generic form is available.

True or False? Drugs that have been on the market for years can be as effective as new ones – and may be safer.

TRUE:- Older and more established medications can be a wise choice for several reasons. First, they have a well-established track record, so you are unlikely to get a nasty Vioxx-style surprise when you open the morning paper. Older drugs often cost much less, because the original patent has run out and they are available in generic form. In some cases, older medications have been shown to outperform new drugs in head-to-head comparisons. Don't assume that newer automatically means better.

True or False? People taking six or more daily medications are more likely to have a negative drug interaction.

TRUE:- Wayne Anderson, dean of the State University of New York School of Pharmacy, notes that patients who take at least six drugs a day have an 80% chance of experiencing a negative drug-drug interaction. Even more alarmingly, about 7,000 people die from medication errors each year – about 16% more deaths than occur from work-related injuries.

While some people have medical conditions that require the use of complicated drug regimens, it's best to use the fewest medications possible. Prescription drugs are

double-edged swords and always must be handled with care.

Here's an example of one drug-drug interaction to be wary of: People taking cholesterol-lowering statins should not use antibiotics related to erythromycin; that combination can cause dangerously high blood levels of the statin drug as well as muscle soreness.

Florida East Coast PPSG Editor's Note:- When I saw this article and thought it would be a good one for the newsletter, I also thought it would be a good idea to show it to a pharmacist friend of mine to see if the article read true. My friend told me it did but to remind everyone that they should always check with their doctors before taking any new over-the-counter drugs, and also to make sure that their medications don't interact with each other. She also said that if you go to the Google search engine on your computer and put the name of the drug in, you can get a lot of information.

Editor's Note: Most local pharmacies **do not** take unwanted medications. Old, expired meds can be dropped at the Armstrong Atlantic University Security Office. Turn off Abercorn Extension at the traffic light at Arts Drive onto the campus. Go to the end of that street, and you will see the security building straight ahead. There is ample handicapped parking in the lot adjacent to the building. It is a short walk across the street to enter the office.

Reprinted from Daytona Beach News-Journal's USA Weekend, Jan. 21-23, 2005 and from FLORIDA EAST COAST POST-POLIO SUPPORT GROUP - Vol. 12, #5

Reprinted from "Library of Articles", Central Virginia Post-Polio Support Group, Richmond, VA.

Valentine's Day Tips

Whether you plan to celebrate on your own or with someone special, use these tips to give a gift of health to you or someone you love on Valentine's Day and all year long.

Be heart-healthy.

Make A Date With Your Heart! February is American Heart Month, and Valentine's Day is a great time to start taking steps to be heart-healthy.

- Prevent and control high blood pressure, high cholesterol, and diabetes.
- Avoid smoking and secondhand smoke.
- Limit alcohol use.
- Maintain a healthy weight.
- Be active.
- Eat healthy.

To read this article in its entirety and for more information, please visit the Centers for Disease Control and Prevention website at: <http://www.cdc.gov/family/valentine/>.



February

Sharon Underwood - 4
Edie Porter - 7
Larry Richter - 7
Steve Todd - 7
Sandra Bath - 16

March

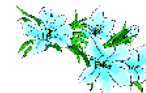
Barry Turner - 2
Thelma Tillotson - 4
Lavonne Calandra - 7
Della Simmons - 14
Terri Dunnermann - 18
Robert Stinnett - 18
BJ Vance - 22
Roy Tillotson - 24
Betty Hope - 26

Member Concerns

Janet DiClaudio, Lorraine Frew, Betty Goff,
Archie Ivey, Ruth Parham, Delores McIntyre,
Marie McManus & Barry Turner.

Please keep these members in your prayers.

Condolences



Raford T. "Tim" Daniel, Jr., evangelist and polio survivor, died January 19, 2014, in Indianapolis, due to injuries sustained in a car accident. A native of Savannah, Reverend Daniel lived in Salisbury, North Carolina at the time of his death. Although not active in our group, Reverend Daniel had received our newsletter for several years. CEPASA offers sincere condolences to Mrs. Daniel and the family.

Congratulations

We offer warm congratulations to Sandra Bath and Dorinda Duggan on winning the 2013 Nadine Goldwire CASA Volunteer of the Year Award. They were recognized for their significant contributions in helping abused and neglected children.

Sincere congratulations to Penny Smith who is serving as 2014-2015 President of the United Methodist Women at the First United Methodist Church of Brunswick. She is a past-president of the Women's Club of Brunswick.

The articles, seminars, thoughts, ideas and suggestions mentioned in this newsletter are provided as a public service and do not express or imply endorsement by CEPASA, CEPASA's THE LIGHTHOUSE or its editors. They are for your information only. Consult with your doctor or health care provider before beginning any new medication, product or program. CEPASA, CEPASA's THE LIGHTHOUSE and its editors do not assume any responsibility for an individual's actions.



Coastal Empire Polio Survivors Assoc., Inc.
 P.O. Box 14252, Savannah, GA 31416
 GA (912) 355-1221 • SC (843) 837-1230
 E-mail: CEP5A05@msn.com
 www.coastalempirepoliosurvivors.org

Shining Light on Post-Polio Health

Next Meeting
 Saturday,
February 22, 2014
 10:30 AM
 at Nancy N. and J.C. Lewis
Cancer & Research Pavilion ←
 Room 203
 225 Candler Drive
 Savannah, GA

CONTRIBUTIONS

The Coastal Empire Polio Survivors Association is a non-profit corporation, which is tax exempt under IRS code 501c(3). We have no paid employees, only volunteers dedicated to helping all polio survivors. Your financial support is appreciated at any level suggested below:

- * CEPSA Member - \$20.00 annual voluntary donation
- * CEPSA Supporter - \$25.00 \$50.00 \$100.00 \$300.00 Other
- * CEPSA Memorial or Honor Gift - any amount
- * CEPSA Sponsor - any amount

Your contributions are tax deductible and will be acknowledged appropriately.

Please complete this form and mail it along with your check to: **CEPSA**
 P.O. Box 14252, Savannah, GA 31416.

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Are you a relative or friend of a CEPSA member? _____

Name of member

Thank you for your support and encouragement.