

WA Polio Clinic Newsletter



Polio Clinic WA Inc.

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New Website: <http://polioclinic.org>

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Vol 2: No 3

(web page) Polio Clinic WA

- a place for all your polio needs

- Polio Clinic WA
- Newsletters
- Information



Clinic Nurse, Tessa Jupp, RN OAM

Ring or email for information on
Post-Polio, clinic appointments,
phone consults,
nutritional supplement supply.

Search

Above: Board member Phil Slattery, volunteers
to help Tessa in the Office for 1 day a week.
Four other ladies come in for half a day a week.

Coming Events

Polio AGM

Sun 30 Oct

2 pm

at

Polio Office

Bring plate of
food to share for
afternoon tea

Christmas Party

Sun 4 Dec

12 md

at

Polio Office

More on inside
see page 2

Have you visited our new WEBSITE?

Our previous website was set up for us by a volunteer we had back in the 1990s and was functional for that time.

We are indeed fortunate that we have had another person, Dr Sue Taylor, volunteer to help us set up this new one. It has a new more modern look, with a dedicated search-engine, that enables you to try to find articles with answers for lots of our present health and disability problems.

We are still fine-tuning this, so if you have a particular problem and can't find a suitable answer, do email or ring me to discuss. I can send you the relevant article and organise for that article and links to be made, and to go up on-line. We are still trying to get these connections right so **you can help us with any corrections** you find still needed - that will benefit others in the future as well. We are getting much of the last 30 years of clinic articles back up.

I would like to thank Dr Taylor for all the work she has put in, helping us to get this information back on the internet for us all again. Doctors don't have a lot of free time and we really appreciate that she has dedicated some of hers to us.

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We do still need your donations!

The end of the year is racing forward. September is here already and the AGM approaching. Covid numbers are declining now, getting to under 1,000 per day, but we still need to be vigilant.

POLIO CLINIC AGM

Our second AGM is set for 2 pm on Sunday **30 October**. It will be held here in the Polio Office. Nominations are hereby called for President, Secretary and for 2 Board members as per our Constitution. Present Board members are happy to continue in these roles.

In order to qualify for our **DGR status for donations** to be tax-deductible for you, we are required to have a majority of Board members that have a significant standing in the community. To fulfil this criteria we have myself, Richard Diggins and Heather Henderson all with OAMs. Both Richard and Heather have previously served in the office of Mayor of Subiaco. Mohidien Khan Bpharm, also enables our eligibility as a working pharmacist and we thank him for his contribution as a needed Board member. We have DGR status with the ATO as a "Registered Health Promotion Charity".

So our nominations are myself as President, Pauline Diggins as Secretary and Heather and Mohidien as Board members. Continuing on from the 2021 AGM are Richard Diggins OAM & JP as Vice President, Thremy Richard as Treasurer and Phil Slattery as Board member. Hugh Walker FCPA, continues as our auditor and we have finished the financial year with positive finances.

We have been keeping the Office free of Covid infection by serving people at the door. Hopefully by the end of October we will be open again for the AGM. **Please RSVP if you intend to attend for the AGM.** Bring a plate of food to share for afternoon tea.

CHRISTMAS PARTY

Covid permitting, we will again have our end-of-year Christmas Party on **Sunday 4 December**. Starting at 12md, we will have a shared meal - bring festive food to share. We will have a **Lucky Dip** - bring a small gift to go under the Christmas tree. Everyone goes home with a surprise present. We will also have our usual rolling **Day Raffle** where everyone ends up with a chosen prize.

SUPPLEMENT SUPPLY

Supplies of all our **usual supplements are back in**. We have most common vitamins and minerals available as well, not just those listed in this column here. They can be picked up or mailed out. This way we can service our country members and those who have difficulty getting out and about or finding good quality supplements.

OFFICE TIMES

Please **phone or email on the day**, to make sure the office is open before coming in. **Usual times are Tues - Thurs 10.30am - 5pm.** Other commitments can crop up.

Next newsletter out in Nov. Tessa Jupp RN OAM

Membership fee is \$5 to enrol as a member.

Any payments made after March we will count for the **2022/2023 financial year**.

We do need people to keep purchasing the good quality nutritional supplements from us, that I have identified will give you the results we need. That helps us pay our monthly lease here too.

You can arrange to collect your supplies from here or **I can post out to you.**

Ring me on (08) 9284 9201 or via email.

New Bank details for **internet banking** or call in at a **Bankwest branch** - (please add invoice number and name - or post a cheque to the mailing address.)

BANKWEST - Polio Clinic WA
BSB 306 050
a/c 0702 158.

SUPPLEMENT SUPPLIES

We have a wide range of good quality nutritional supplements that are beneficial for polios still available thru our Polio Clinic. See list below for some you may find difficult to source. The carnitine, magnesium and manganese we have, work much more effectively than any you can buy in shops. For pick up or post out **ring Tessa**.

ALA - Lipoic Acid 400mg (60)	\$34
N-Acetyl Cysteine 590mg (60)	\$31
Quercetin 250mg (60)	\$75
Carnitine 200G	\$200
Carnitine 100G	\$110
Carnitine 50G	\$62
Magnesium 300G	\$55
Magnesium 200G	\$42
Magnesium 100G	\$25
Magnesium (250 caps x 500mg)	\$40
Magnesium (75 caps x 500mg)	\$15
Manganese powder 200G	\$90
Manganese powder 100G	\$50
Manganese (250 tabs x 200mg)	\$40
Borax 100G	\$12
Gelatine 1kg	\$30
Glutamine 100G	\$25
Taurine 100G	\$30
Iodine Tincture 50ml (paint)	\$16
Lugols Iodine 100ml (drops)	\$35
Vit A (120 x 10,000iu)	\$20
Vit D3 (400 tabs x 1000iu)	\$30
Vit D3 (200 tabs x 1000iu)	\$15
Vit K2 (90 tabs x 180mcg)	\$38
Molybdenum 250mcg (60)	\$28

Postage & Handling (small parcel)	\$11.50
(medium parcel)	\$17.00
Express Post (small parcel)	\$14.50

For other supplements available or postage costs - **ring or email Tessa (08) 9284 9201**

Funnies Page



PERJURY

Two senior fellas meet in the park to talk and feed the pigeons for almost 20 years. One day one of the fellas turns up and his buddy doesn't show. At first he thinks, "Well, maybe he has a cold." After a week or so he begins to get worried but realizes he doesn't actually know his friend's last name or how to get in contact with him. This goes on for a month, then two months, and he fears the worst, that his friend has passed away. But after three months, here comes his friend walking up to the park bench like nothing has happened. So he says, "My god! I thought you were dead! Where have you been?"



"Well," his friend replies. "Do you remember that little café we would go to once in awhile for coffee and a donut? I was in there by myself and that cute waitress waited on me. After I was finished and left, I realized that I had forgot to leave a tip. She got so mad she called the police and told them I raped her. So here come the police into the senior citizens home with a Warrant. They stated out loud that I was wanted for rape!! Hey, at my age, that brightened up my day. When I went before the judge and I was asked to declare if I was guilty or not, I said. 'Guilty, Your Honour'. The Judge, she took one look at me — and gave me 90 days for perjury!"



Dogs might be called "mans best friend"



But we don't show the police where your drugs are

The Queen and Paddington

"I am really not sure your Majesty." Paddington bear answered with a tear. "You see the Browns have all grown up and gone on their separate ways."

Paddington continued. "I am now homeless, as I have nowhere else to stay."

"Well, my little friend." The Queen replied to him. "This will never do at all. I too am all alone. You can move into my Palace with me. I'm sure we will have a ball."

The little bear looked up and asked.

"Will there be marmalade, dear Queen?"

"Of course." She replied. "The biggest spread of sandwiches you've ever seen. And cups of tea and crockery that you can drop. And I will never, never mind."

The little bear replied.

"Your Majesty. I accept your offer. You are very, very kind."



Sadly Helen is no longer with us - but she did achieve the last 2 goals she had set herself.

1. To have **her 80th Birthday** — She did. 3 Feb 2022!
2. To **die** in her **own home**. She did that too. Helen was the last of our iron lung polios that had been left in a wheelchair for life, which ended 30 May 2022.

Helen was one of our very first members in 1989. I had known Helen since 1976, when she came to live in the same block of flats that we did. But Colin, my husband, had known her since their polio days, and they had both lived at the Jack O'Keefe Hostel in Subiaco, which was opened in late 1960 by Para-Quad, to relieve the strain of too many long-term patients on the old Spinal Wards at Shenton Park Annexe. There was a caretaker couple living in the flat at the back, to look after the 10 people in wheelchairs, so that they could live more independently.

Whenever we held a Polio Clinic in Albany (and also in Mount Barker) I always stayed with Helen. Even for our first Albany Polio Clinic in 1990, Brenda Lake and I stayed with Helen and her mother, Mim, but Dr Peter Nolan from SCGH who had come with us, stayed elsewhere. We had a few Albany Clinics over the years and Helen started the Albany Polio Group there in 1990. Luckily as well as being interviewed for our Polio History book, she has also recorded her own life story and her family have sent a copy of it on to me, to write up for this newsletter.



"RAAF PLANE ON ALBANY MERCY DASH"

This was one of the Perth newspaper headlines on 26 February 1956. The story of this special flight for an Albany girl featured for several days. The mercy dash was for 14-year old Helen - to get her to an iron lung in Perth, quickly. There were 15 deaths from polio in 1956. But this is getting ahead of her story.

Helen was the first in her family, born 3 Feb 1942 at Mount Barker Hospital. Her father, had owned the local Mt Barker newspaper the "Southern Sentinel", but sold it to enlist in the Army in 1941, during World War 2. Her father's family were farming in Beverley and in 1943, he was sent from the army to work for his brother, to help produce food at the Beverley farm. So Helen spent most of her childhood at Beverley; and so to school by the country school bus.

Her father applied for a War Service Land Settlement Farm and in 1955 they were offered land to farm at Frankland, near Mount Barker again. So the family moved back there just as the fifth child was born.

Helen started at Albany High School and was sent to board in town. In her first week there, she became sick. Her father came on the weekend and took her home. She got worse during the next week and the doctor was called - it was Polio. The doctor stayed with her at the farm on Friday night, arranging an ambulance to Albany Hospital on Saturday morning. There she was placed in an old drawer-type iron lung.

From the Newspaper clippings —

"The girl patient is from the Frankland district. She was brought to Albany from Mt Barker by ambulance yesterday afternoon and was placed in a respirator at Albany Hospital. On the ambulance trip from Mt Barker she was given oxygen.

Her condition was so serious that it was considered advisable to send her to Perth, providing she was fit to stand the flight. The RAAF was asked for help and a Dakota took off from Pearce in the late afternoon.

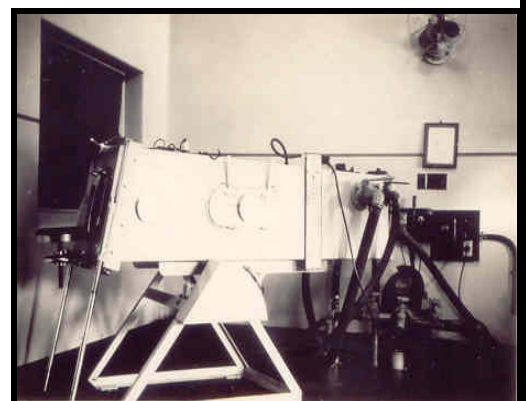
Before 6 pm it landed at Perth to pick up a doctor and two nurses. The aircraft left Perth at 5.40 pm and arrived at Albany at 7 pm. After the aircraft reached Albany, the doctors conferred before it was finally decided that it was in the girl's best interests to get her to Perth that night.

The aircraft left Albany shortly before 10 pm. When the Dakota touched down at Perth Airport at 11.15 pm after its 200 miles dash, it was met by an ambulance from RPH. Security men at Perth Airport kept sightseers clear. The patient was carried off the plane on a stretcher and was rushed to the Infectious Diseases Hospital in Shenton Park. She was placed back in an iron lung on arrival there."

Helen's comments were: "All I felt was relief at having something else to do my breathing. It was a peculiar sensation being in them. The 'lungs' are like long oblong boxes. This one opened like an alligator. My head poked out one end and it had a rubber collar which was tightened until reasonably firm against my neck, so that no air escaped. To prevent the rubber chaffing, a piece of lint bandage was wrapped around my neck. There were large bellows which pumped air into the 'lung' and sucked it out again. This was the action that breathed for me. It was very noisy.

When eating and talking, I had to be careful, because when the air was sucked out, I lost my voice and if

eating, I had to be very careful food didn't go down the wrong way. Of course, I had to be fed, as my arms were enclosed in the 'lung'."



Back home, the farm had been quarantined for 2 weeks. The man from the shop in Frankland would bring supplies and just leave them on the letterbox. Everyone who had been in contact with Helen was given a gamma globulin needle for temporary protection. There was no phone and the only way the family knew how and where Helen was, was from announcements on the radio. They did not know how much was paralysed.

Helen was in the iron lung for several months. Her family came to visit when possible, but the other kids still had to go to school. Helen's uncle, a policeman in Perth, could get in to visit her, and relayed her condition to her grandfather in Nedlands, who phoned the shop in Frankland. Then a written message was left on the gate post for the family to collect the latest news on her.

After the 2 weeks quarantine, Helen's mum came to Perth for 6 weeks. She went in twice a day to feed Helen her lunch and tea, as they were short of nurses. One day, Helen excitedly got her mother to look through the 'lung' porthole. She could move her thumb for the first time! Later feeling came back to her hands and arms, and slow progress was made from there on.

Helen's aunt would visit to feed and wrote letters to be sent home too.

There was a cyclone up north affecting Perth's weather making it hot and windy and one night they lost power in a

storm. This stopped the iron lungs working. The nurses all rushed over from their quarters to man the hand bellows to keep the 'lungs' going. Helen says she wasn't worried - she had confidence in the nurses.

After 6-8 weeks, Helen was gradually taken out of the 'lung' for longer and longer periods until she could breathe by herself. Then rehab began in earnest. She went from Ward 1-2 to Ward 3-4, for physio, OT and hydrotherapy. At the time there was a diphtheria scare and thirty children were also there in quarantine

Each room had four beds. Helen shared with Elsie Warren, her baby daughter Debra and Harry Smith from Katanning. Harry's father and brother had died on the farm with polio and another brother was in an iron lung but died at IDB a few months later. His mother had polio too and only she and Harry survived. Helen was also told at that time that she would never walk again.

Helen was given a diary by her grandfather and she records going to Ward 8 on 19 April and being able to move her little toe on 24 April. On May 1 she was very pleased to move her left foot a bit. She had calipers for both legs by June 1 and then was stood with crutches. She got weekend leave with her family in Perth occasionally after that and 2 weeks holiday in Sept!

After many months of physio and pool exercising as well as OT for her hands and arms, she returned to Frankland in June 1957, in a wheelchair. Her mother, who had just had her 6th baby, now had Helen to look after as well. Her father fashioned her a commode from the old pan toilet. And no more school for her.

In 1960 she returned to Shenton Park Annexe for a review and learnt switchboard operating, scoring a job at the Karrakatta Army Base. She moved into the Subi Hostel, buying herself a red Mini with hand controls, which gave her more independence. In 1967 she went back home, returning to Perth in 1972 to live in a flat, work at the Para-Quad



workshop and learnt to hand-paint pictures, with other disabled painters, including Paul Berry. With Paul, she too had some paintings chosen for the PQA Xmas cards

Helen finally returned to Albany to live with her now widowed mother, in late 1980. Her brother had taken over the farm. Helen became involved with improving disabled access in Albany, joined the CWA, Spinning group and initiated the Albany Lace Makers group. She was eventually teaching others many handcraft skills, including embroidery, lace, tatting and basket weaving.

In 1985, she embarked on a trip to Malaysia and later to Melbourne to see Phantom of the Opera. She visited her family farming in Badgingarra and Jerramungup in an assortment of cars over the years, as well as staying with us whenever in Perth for family visits, medical appointments, repairs to her wheelchair, new cushions.

In 2004 Helen gave up driving and used the disabled taxi service. She and Mim sold the family home and moved to a unit where it became Helen looking after her elderly mum rather than Helen being looked after. Helen continued to live at the unit independently with her family support. A life well lived.



A letter from Helen to her Dad.

My Darling Daddy,
I miss you quite a lot and would like
you to get here as quick as you can.
The lung is very hot and I can stay out
for quite a while. I have been changed
to another lung into another room.
I have things on my mind as I am
waiting for a pan. Uncle Merv has just
come and had a look through the
portholes at my hands, which I can
now move. OK. My secretary has to
go now, so I will say cheerio.
From your loving daughter,
Helen xxx

Post-Polio Question answered by Richard Bruno PhD by Tessa Jupp RN OAM

Some people have told me that doctors today do not believe that they had Polio - because they have no visible deformity. Others are not believed as they got polio from the polio vaccination. These are now the most common recent cases today. This piece is adapted from the Boca Post Polio Group in Florida USA's April 2022 Newsletter. We thank them for the info.

Question: I got polio in August 1959. I was always told it was vaccine-induced but my daughter says it couldn't have been. The doctors at the time said I would always be immune to polio after having it. Is this true or do I still have to have vaccines periodically? I'm not taking the vaccine if it can give me polio again!

Dr Bruno's Answer: You could very well have had polio after being given the **Salk injectable polio vaccine** in 1959. Virtually all polio survivors know that the **Sabin inactivated oral polio vaccine**, released in 1961 (1966 in Australia) **can mutate** and become a cause of **vaccine-associated paralytic polio (VAPP)**, in approximately 1 in 2.7 million doses.

VAPP is the principle cause of paralytic polio today. Because of this small chance of developing polio, the **Sabin** vaccine is **no longer used** in the United States. (Nor in Australia since Nov 2005.) But Sabin's oral vaccine is still used in 3rd World countries throughout the world and is responsible for the virtual elimination of polio.

1953 – 1955: Salk Vaccine Danger

Many polio survivors also know about "*The Cutter Incident*." Twelve days after the Salk vaccine went into use in 1955, 40,000 children who had received the injectable vaccine made by Cutter Laboratories developed polio and eleven died because the vaccine contained live poliovirus.

But what people don't know is that not only Cutter's vaccine, but also other companies' vaccines, contained poliovirus that was not killed by Salk's formaldehyde inactivation formula. Explained by Dr. Paul Meier in (Clinical Trials, 2004): "*Because the other manufacturers went around to various newspapers and threatened to cut their advertising, it was dumped on Cutter.*"

Unfortunately, the failure of Salk's formula, using formaldehyde to kill poliovirus was known in 1953.

In testimony before the United States House of Representatives, Dr. Herbert Katneb reported that: "*The Michael Reese Hospital in Chicago failed to produce a safe vaccine by the Salk formula. In March 1954, 10 of the 48 lots of vaccine [21%] produced for field trial use were positive for live virus. Yet the 1954 field trials were allowed to proceed.*" Katneb testified to Congress that live poliovirus was found in four separate manufacturers' vaccines. One manufacturer "*discontinued production of Salk vaccine but some of the released vaccine of this manufacturer, however, had already been used in Massachusetts, which experienced an epidemic [thousands of cases and at least 10 deaths]. It is not surprising that there were cases of vaccine-induced polio in the spring of 1955.*"



1957-1960: Salk Vaccine Ineffectiveness

When polio cases in the US rose again after 1957, not only were there questions about the safety of the Salk vaccine but also about its effectiveness. In 1962, public health specialist Dr. Herbert Ratner's conclusions about the Salk vaccine were presented, again in testimony to Congress:

"In the fall of 1955 Dr. Langmuir [director of polio surveillance for the U.S. Public Health Service] had predicted that by 1957 there would be less than 100 cases of paralytic polio in the United States. As is now known, 4 years and 300 million doses of Salk vaccine later, we had in 1959, approximately 6,000 cases of paralytic polio, 1,000 of which were in persons who had received three, four, and more shots of the Salk vaccine. So you see, expectancy of the Salk vaccine has not lived up to actuality, and Dr. Langmuir was right when he said the figures of 1959 were sobering." In 1960 Ratner had chaired a panel to discuss "*The Present Status of Polio*

Vaccines." Despite Salk claiming in 1955 that his vaccine was "*100% effective*," the panel calculated that the Salk vaccine was "*possibly 72% effective*", in part because the poliovirus wasn't thoroughly killed, with the live vaccine virus causing both immunity and cases of polio.

2020: The Polio Vaccine Today

You should be immune to the type(s) of polio you had in 1959. You need booster shots of all 3 Types only if you travel outside the US. But you shouldn't be afraid of the vaccine today, even if it did cause your polio in 1959. The old Salk formula has been replaced by a more modern and safer injectable polio vaccine.

Having spoken with and listened to the histories of most of the 2,500 polio survivors who have registered with me in WA since 1989, I have heard a number of cases, and Brenda Lake our physio had too, of where they have contracted polio from the polio vaccine. Some were here in Perth in the late 1950s and early 1960s before the Sabin became available, like this person. Others have been in the 1970s, 1980s and even in the 1990s - here in WA and people coming to live here from other countries. We also know that some people had mild cases of polio or developed muscle wastage months or even many years later. Others may have had massive initial weakness and paralysis, but have recovered so none now visible. All of these polio cases have the potential to develop further deterioration now with the Late Effects of Polio

Thyroid - what do I need?

by Tessa Jupp RN OAM

Fatigue is one of the most common problems with **Late Effects of Polio** and is also common **after Covid** and with **Long Covid**. The thyroid is the gland that tells the other parts of the body to do their bit - **the master messenger** that regulates growth and **energy expenditure**, including our muscle, heart, brain and digestion.

Imagine that the **human body is a car** ... and that the **thyroid is the car's battery** ... powering all of the essential systems. So that the car can perform at its best, in order for the battery to function at its peak ...

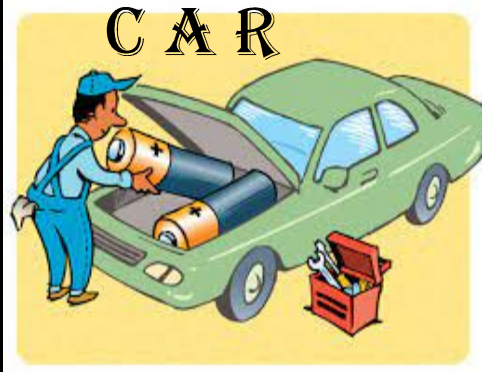
What is needed?

CREATE - Step 1 is to **make the messenger**.

We need the battery to start the car and keep the car going. **Thyroxine** is the hormone. Without it, everything slows down, stops and we die. The two principal ingredients we need for the thyroid to make thyroxine, are **iodine and tyrosine**. **Tyrosine** is an amino acid found in protein foods like **meat**, chicken, **fish**, dairy, cheese, eggs and some plants like nuts, **pumpkin seeds**, **gelatine**, **potatoes**, **avocados** and even **chocolate**, as it can be made from the phenylalanine in foods. **Iodine** is in seafood ie fish, kelp and sea salt, but we may need more. Iodine or Betadine can be **painted on** and **absorbed thru the skin**. If absorbed within a few hours we may need oral iodine drops. Ring me to discuss, if this is so.

ACTIVATE - Step 2 is like **charging the car battery**. We can't keep going with a flat battery. The basic thyroid hormone is T4 that is made (or that we take as a thyroid medication). For the body to use it, **T4 needs to be turned into T3**. This step requires **Magnesium (Mg), Zinc (Zn) and Selenium (Se)**. These are all low in our WA soils and we may need to take more. Farmers need to give their animals "**selenium licks**" so you can get some Se from meat and fish. The best food source is **Brazil nuts!** You can take Se in tablet form but it is only a trace element so you don't need too much. Once your levels are up, you may only need occasional Brazil nuts to maintain your levels. **Mg and Zn** we often need to supplement anyway, if we have symptoms.

RELEASE - Step 3 is like **turning the key** to get the engine going and the car travelling up the road. A 2016 study in the Journal of Environmental Health found increased uptake of **Manganese (Mn) and Copper (Cu)** led to higher levels of circulating T3 and T4. Manganese is already something we know is low in our soil and that we need to take a supplement if our **joints are stiff and sore**.



THYROID

C—**create** - build
iodine, tyrosine

A—**activate** -
the charger

Mg, Zn, Se

R—**release** - drive
Mn, Cu

Copper is rarely needed in WA as our old water pipe systems are often copper-based and contribute to copper-overload. This picture of the eye shows a **typical darker outer rim** and a **sunflower effect** on the coloured part of the eye, typical with severe copper overload. Copper needs to be balanced by **extra zinc**, which is also low in WA soils. **Copper** is found to be **high in peanuts and peanut butter**, along with a lot of other minerals etc. But be careful on too much. **Signs of copper toxicity** include headaches, **stiff and weak muscles**, body shakes, trouble **swallowing** and poor **coordination**.



Excess copper eye signs

Signs that your Thyroid is Struggling are:

Fatigue	Neck Goitre
Weight gain	Dry skin & hair
Poor memory; Brain fog	Hoarse voice
Feel the cold; Cold hands & feet	Tingling hands & feet
Headaches & muscle aches	High cholesterol
Fluid retention; swelling	High blood sugar

As you can see, these are also common problems with **post-polio** and for **certain nutritional deficiencies**. So some of the answers may lie in eating certain foods and taking extra specific supplements.

Poor thyroid function can interfere with how **blood sugar and cholesterol** are handled in the body and so elevate these levels. Getting the thyroid working better can help to stabilise these levels too.

Other items that may help with our thyroid function and so energy levels, are Vitamin B12, Molybdenum, Vitamin A, Vitamin C and Cayenne Pepper.

Vit B12 is low in 40% of people with low thyroid. **Molybdenum** is needed for the enzymes that make and release T3.

Vit A aids in uptake of iodine, T4 to T3 and in TSH.

Vit C is needed for the adrenal function which works together with the thyroid and supports the thyroid.

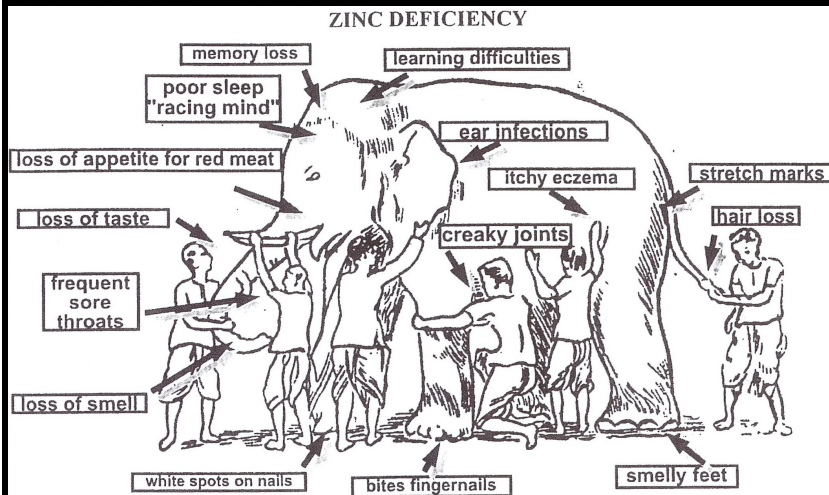
Cayenne Pepper improves circulation of T3 & T4.

Need for Zinc!

by Tessa Jupp RN OAM

I have written before about why we need Zinc to help get a better sleep. Now I want to touch on many of the other reasons we need Zinc. With the prevalence of Covid over the last few years, there has been a lot more research coming out on why it might be a factor with **loss of taste and smell** and the many other things that go wrong if we don't have enough zinc.

In my booklet on Signs and Symptoms written in 2004, I featured the Zinc Elephant, with the blind men all knowing just their part of the elephant that they can feel.



You may be surprised to learn that **your body does not store zinc**. It has to be consumed daily, either through the foods you eat or by taking a high-quality zinc supplement. **Zinc is needed for thyroid** function, blood clotting, cell division, immune function, smell, taste, vision and wound healing, to name just a few body functions.

Our bodies contains 300 unique enzymes that require zinc to function normally. Researchers estimate about 3,000 proteins out of the roughly 100,000 we have in our body, are mainly made of zinc.

As many as **40% percent of the elderly, are at risk for low zinc**. This is from soil depletion due to our conventional farming methods, as well as the use of toxic pesticides such as Roundup. Also many of us simply do not eat enough zinc-rich foods, and zinc is often poorly absorbed. Compounding the problem is the reality that zinc levels are not always tested, and available testing methods are not always accurate. **Common signs** your body may need more zinc are:

- **Lack of appetite**
- **Impaired sense of taste or smell**
- **Frequent colds, flu or infections**
- **Depression**

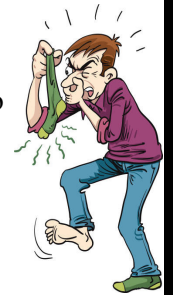


Related to your thyroid health, zinc plays a role in making thyroid stimulating hormone (TSH) in the pituitary gland in your brain, to signal the thyroid to make thyroxine. Low zinc is associated with low T3 and a reduced ability for your body to convert T4 to T3, which also requires sufficient stores of selenium.

When your zinc levels are low, you may experience many of the characteristic symptoms of low thyroid such as **cold hands and feet**, sluggish metabolism and thinning hair. Zinc also helps your thyroid hormone bind to the DNA receptors inside your cells. If you are lacking in zinc, your body can't effectively make use of thyroid hormones even if you have normal levels of it in your blood.

Signs of Low Zinc!

- **poor sleeper, wake often**
- irritability
- **temper tantrums, ADD**
- inattention, day-dreamers
- poor attention span
- poor memory recall
- loss of **taste & smell**
- poor appetite, **fussy eater**
- tummy aches, ie reflux
- diarrhoea
- **ear infections, sinus**
- colds, **runny nose, phlegm**
- **sore throats**
- **bite fingernails, suck thumb**
- **itchy dry skin, rashes,**
- **psoriasis, eczema**
- **smelly shoes and feet**
- poor scant hair growth
- **hair loss**



Does Zinc help us sleep?

Zinc acts on the brain like turning our computer off at the end of the day. **Taking zinc within 30 minutes of getting into bed** is like pushing the switch to do a "save" (memory) and "shut down". Usual dose needed is 3 x 30 mg of elemental zinc. Use less for children who won't sleep.

What about Reflux?

A study published in the *American Journal of Gastroenterology* in 2011 found that **taking zinc, quickly relieved acid reflux symptoms**. If we have enough stomach acid, the opening at the top of the stomach closes up, stopping regurgitation. But to make stomach acid we need zinc, vitamins B1 & B6. So if we **have a teaspoonful of pure lemon juice or apple cider vinegar** with our problem meals (can also sprinkle it over or add to meal), this will happen. Taking zinc gluconate at bedtime will then fix both sleep and reflux! When zinc levels improve our acid we won't need the extra lemon juice with meals anymore.

Is zinc good for arteries?

Zinc appears to be protective in coronary artery disease and cardiomyopathy. Replenishing with zinc supplements has been shown to **improve heart function** and prevent further damage.

Is zinc good for high cholesterol?

Zinc supplementation significantly reduced total cholesterol, LDL cholesterol and triglycerides.

Does zinc lower blood sugar?

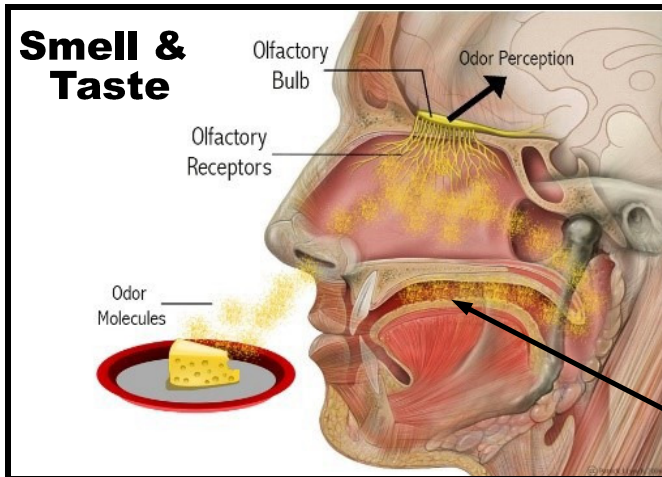
Studies show taking zinc reduces Fasting Blood Glucose, and HbA1c in all patients, incl diabetes.

"Taste and Smell"

by Tessa Jupp RN OAM

With loss of the senses of taste and smell being now seen as an **early symptom of Covid infection**, it is a good time to understand better how these functions we normally take for granted, actually work in the body and what we might need more of to fix these problems.

These senses, along with our eyes and hearing often getting worse as we get older, have some common structures. One of these is "**cilia**" or **very fine hairs** that send messages to the brain by "vibrating" under certain conditions. Covid has led to a lot more research going on into how these work. Research from Harvard and a clinic in Cleveland USA as well as another in Germany, has given us these thoughts on the relevance of zinc and other nutrients.



In this picture we smell the cheese from the odour going up our nostrils to the receptors at the top of the **nasal cavity**, to which are the hairy cilia that attach to the lining (epithelium) and then to the nerves in the bulb, which send the message to the brain to identify the smell. There are **more cilia** on the **taste buds on the tongue** which also work together with the nose, to fine-tune the result. We also have receptors on the roof of our mouth and back of our throat. These receptors also send messages to our brain that tell us when food or drinks are **sweet, salty, sour, bitter or savoury**.

The Covid research has found that the **ACE2 gene** to which the **Covid** virus attaches, is in the lining tissues that support these nerves, not in the actual nerves. So the repair work to fix this is not to nerves but to the **support tissues**.

Zinc helps to prevent viral entry to these lining support cells, suppresses viral replication, **increases ciliary length** and movement, normalises the inflammatory response of the immune system and prevents blood vessel complications. In other words - **zinc works like the Police** coming in with shields and baton **to disperse the rioting crowd** and put the streets and meeting areas back to normal!

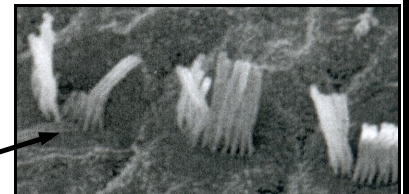


"The best way of dispersing crowds in the inner city is to start handing out job applications!"

So the extras we need on patrol are **Zinc, Vit A, Vit C, Vit B12 and iodine**. Vit A drops are being tried. I had iodine sniffs in the June 2022 newsletter.

Zinc is also needed as a part of a **transport vehicle** to get other nutrients like Vit A, Vit D and possibly others, absorbed from the gut through the cell lining, into the blood and in and out of every cell, where they are needed.

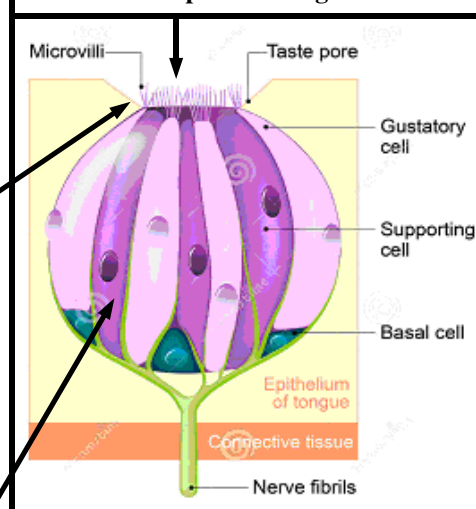
These **hairy cilia** are found on all our senses and act **like leaves blowing in the wind** to send messages to the brain to tell us what is going on around us. These are pictures of **cilia in the ear** that have been damaged by loud noises.



Magnesium and manganese are needed here as well. It all has to do with maintaining "**lining**" tissues. In the eye, **zinc** is essential for protecting the **macula** and the **retina**, and for colour and **night vision, glaucoma and cataracts**.

We can actually see **hair on the skin**. **Zinc is needed for hair tissue growth and repair**. It helps keep the hair oil glands working properly and is needed to **prevent hair loss**.

Cilia at the top of the tongue taste bud.



Hair loss can also result from **low Vit A and D - because they need zinc** as a nutrient transporter. **B12 and B vitamins are also needed for hair growth**. This applies to all our cilia as well as hair on our heads!!

Just as **taste can change** with different foods, so it can with how it tastes, **depending on our blood type**. Taste is our body's way of getting us to eat foods that will give us the nutrients we need at this point in time - and what to avoid.

Vit B6 tastes sweet when we need it and really bitter when we have enough or need to stop taking it. We get a **craving for chocolate** when we **need more magnesium**. Our taste and smell is giving us directions.

Medications that can affect taste are - some antibiotics, cholesterol drugs, some drugs for blood pressure, asthma, antihistamines, heart, seizures, cancer and antidepressants. Here are some websites with more information on all of this.

<https://www.westonaprice.org/health-topics/abcs-of-nutrition/the-role-of-zinc-in-human-biology>
<https://www.frontiersin.org/articles/10.3389/fimmu.2020.01712/>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6770818/>
<https://www.medicalnewstoday.com/articles/263176>

"Water" – by any other name!

by Tessa Jupp RN OAM

In 1997, a 14-year-old student at Eagle Rock Junior High School in Idaho Falls **won first prize** at the Greater Idaho Falls Science Fair by showing how conditioned we have become to alarmists spreading fear of everything in our environment through junk science. In **his project** he urged **people to sign a petition** demanding **strict control** or **total elimination of the chemical — "Dihydrogen monoxide"** because:



1. It can cause excessive sweating and **vomiting**.
2. It is a major component in **acid rain**.
3. It can cause severe **burns** in its gaseous state.
4. Accidental inhalation **can kill** you.
5. It contributes to the **erosion** of landscape.
6. It **decreases** the effectiveness of car brakes.
7. It is found **in tumours** of cancer patients.

He asked **50 people** if they **support such a ban**.

43 said **yes** !
6 were **undecided**?

And **only 1 knew** that this chemical is ... **water**. (H₂O)



Interesting Facts on Water

"Rule of 3" - Generally, the most time our bodies can go without **oxygen** is **3 minutes**, **without water** is **3 days** and without **food** is **3 weeks**.

Our bodies are about 60% water. There is water in every cell of the body, from the brain to the teeth.

Brain 85%	Kidneys 85%	Heart 80%	Lungs 80%	Liver 75%
Skin 75%	Muscles 75%	Blood 50%	Bones 25%	Teeth 10%

Water is crucial to keep the body working correctly. It is essential for **protecting** the spinal cord and all sensitive tissues; **removing waste** by urination, sweating, and bowel movements; **regulating** temperature; **lubricating** and **cushioning** joints. Once we feel **thirsty** we are already slightly dehydrated. We need **6-8 cups of fluids** per day.

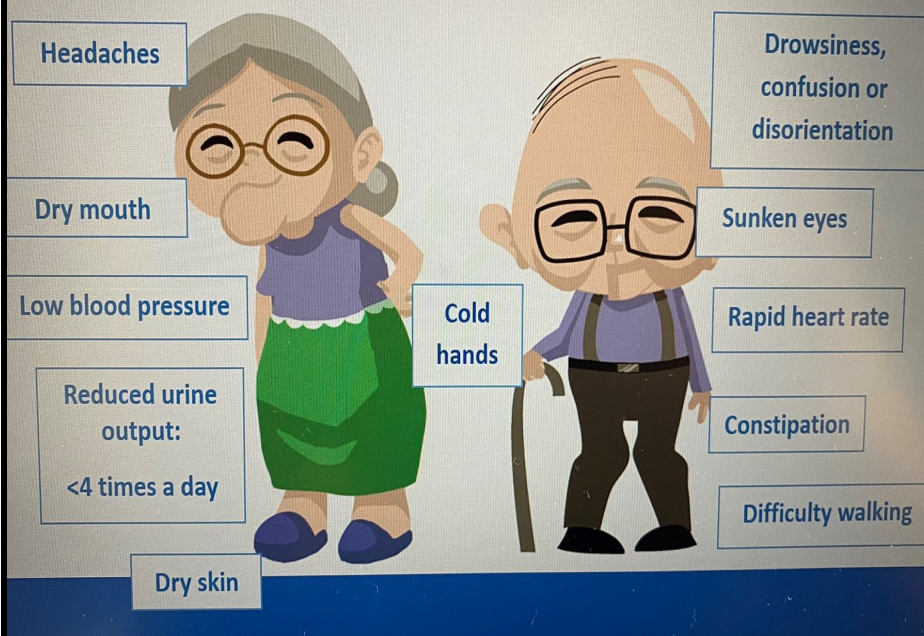
Signs of Dehydration

Dry mouth, smelly breath, croaky voice, persistent cough
Constipation, abdominal pain and cramping
Dark and scant urine
Persistent headaches and muscle cramps
Unexplained tiredness, sleepy
Dizzy and light-headed, fainting
Rapid heartbeat and breathing
Sunken eyes, dry skin
Increase in body temperature and feverish shakes
Mental confusion and memory loss

Signs of Too Much Water - ie electrolyte imbalance

Feeling bloated, full bladder with colourless urine
Nausea and vomiting
Swelling of tissues (oedema) and brain
Headache, muscle cramps and spasms
Confusion and fatigue .

Identifying Dehydration: Spotting the signs



THAT'S ACTUALLY A COMMON MISCONCEPTION. THE TRUTH IS WE CAN GO 8 DAYS WITHOUT WATER. BUT ONLY IF WE DRINK A LOT OF OTHER STUFF ... YOU KNOW, LIKE APPLE JUICE.



Make sure some of our drinking fluids - soups, teas, fruit juices, vegetable water to keep up our electrolytes with minerals.

Ginger - a natural anti-inflammatory by Tessa Jupp RN OAM

Who would think this popular spice would have so many good things going for **including ginger in our diet more?**

I remember my father really going for Mum's homemade ginger beer, gingerbread and ginger nut biscuits. He was forever twisting his ankles after the War - and we get extra **manganese** (that helps with tendons) in ginger.



Ginger also has significant **potassium, magnesium, zinc, selenium, and Vit A.**

An article by US Cardiologist Dr S Sinatra lists multiple biological activities of ginger as "*anti-oxidant, anti-inflammatory, anti-microbial, anti-cancer, neuro-protective (nerve), cardiovascular (heart) and respiratory (breathing) protective, anti-obesity, anti-diabetic, anti-nausea and anti-emetic (vomiting) activities.*"

No wonder ginger has long been important in main dishes, drinks and cakes etc.

Nausea & Vomiting

Traditionally used for gastric upsets including morning sickness, travel sickness, and in hospitals after surgery and cancer chemotherapy, as well as after heart attacks.

Gastric Upsets

Useful for heartburn, dyspepsia, reflux, cramping, bloating and flatulence. It calms the intestine lining and is safer than taking painkiller and arthritic drugs.

Anti-inflammatory

Calms inflammation causing arthritis, diabetes, cancer and heart disease. Relaxes blood vessels thus lowering blood pressure, decreases fats in the blood so inhibiting fatty deposits in arteries and thinning blood and platelets.

CAUTION - for those on blood-thinner meds

As ginger increases the risk of bleeding, talk to your doctor if you are on blood-thinning medications like **warfarin** (Coumadin), **clopidogrel** (Plavix) or **Aspirin**.

TEA - A study in 2017 found that having ginger daily may protect against **heart disease** and **stroke**, high **blood pressure**, **diabetes**, **cholesterol** and **fatty liver disease**.

Gingerol, a compound in ginger, helps **repair damaged cells** and prevent several types of **cancer**. Other compounds in ginger also help with **weight loss**.

To **shed belly fat and lose weight**, combine **lemon juice with ginger** in tea. You can even make your own with freshly grated ginger or ginger powder. **NB** A quarter teaspoon of ginger powder equals 1 tablespoon of freshly grated ginger.



Reduces Pain

The gingerol acts on the sensory nerve endings relieving pain as well as NSAID drugs do, and with no bad side-effects.

To Make Ginger Tea - add 1 teasp or less (to taste) then fill the cup with boiling water.



Cover it with a saucer to steep for 5 minutes. Strain to remove any ginger granules before drinking. Can add **honey to taste**. Also **lemon** and/or **cinnamon**.

Foot Bath or Poultice

This tea in larger quantities can be used to soak a flannel in for a hot **ginger compress** to sore muscles or in a basin to **soak feet** for pain relief.

Sore throat

Sinus, stuffed up nose, sore throats will respond to drinking this ginger tea too. **Ginger and lemon** both have anti-viral and anti-bacterial properties, as does honey. It can also be eaten.



Chocolate Ginger -

is a tasty way to eat ginger.

Can also be found as naked ginger, crystallised ginger or in packets of ginger, honey and lemon chews at pharmacies.

As well as in ginger tea, the powder, packet or ginger root can be used in curries, stir-fries, to flavour baked potatoes, casseroles, cakes, biscuits, slices, puddings and smoothies. Add a quarter teasp to coffee or cocoa, a few times a day.

Eating chocolate for breakfast to lose weight!

Scientists from the Harvard University have found that chocolate consumed during a narrow window of time in the morning, (**within one hour after waking**) or at night (**within one hour of bedtime**) helped the body burn fat and decrease sugar levels.

The study also found that chocolate consumption at night time **did not lead to weight gain**. Eating 100g of chocolate in the morning or in the evening was also found to **reduce hunger** and appetite, improve sleep and the gut microbiome.

The consumption of chocolate at night also increased resting and **exercise metabolism** of the participants the next morning. Study participants who ate chocolate in the morning for the 14 days of the study had their **sugar levels reduced** by 4.4% per cent and waist circumference was reduced by 2%.

I wonder should we look for this??



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