

November 2008

MS Quality of Life Project

Transitions

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Transitions

**By Donna Krasnow,
MSQLP Board Chair**

Transitions – there can be so many when one has MS. As our lives change we have to make adaptations and it isn't just the person with MS who has to adapt. It impacts the whole family. The concept of transitions encompasses so many possible topics that we decided to devote both the November 2008 and February 2009 issues to an exploration of it. In this issue we look at transitions related to *mobility*. The February issue will focus on transitions related to the home.

I suspect that *mobility* is something we all took for granted before MS entered our lives. Now, of course, we have a much different perspective. Although a diagnosis of MS does not mean you will automatically end up in a wheelchair, we do know that many of our clients have concerns about mobility. And with concerns come questions. When is it time to make the transition to a cane or a walker or a scooter? Will braces help? Will exercise prolong my strength? What about maintenance of a scooter or wheelchair - will someone come to my house to make repairs? Why am I feeling depressed about moving from one level of technology to another?

I thank the professionals in mobility-related programs who shared information with us. I am especially grateful for our MS clients who were willing to share their own stories about transitions. Lotte Marcus, one of our co-founders, has always insisted that our MS stories need to be collected. I am glad to share some of them now.

When Is It Time?

**By Mary Lou Schaeffer, RN
MSQLP Board Member**

When is it time to move to the next level of mobility assistance? Of course, it's an individual decision. I also know that no one looks forward to the first time using a cane or a walker or, perhaps the greatest challenge, accepting that time has come to transition to a wheelchair. It is never easy. Here are things you should think about when considering a technology transition:

1. Live your life so you conserve energy for when it is needed most. If it takes all your energy to get to *where* you are going, you won't have the energy to participate in the activity once you get there. If you're too tired to enjoy what you are doing, it may be time to consider a transition.

2. If ambulation is the problem, talk with your doctor or physical therapist about a brace. It may provide enough support so that you don't burn as much energy when walking. But, if you get a brace, remember you need training so you use it most effectively. In fact, training should be part of any transition in technology.
3. If you move to using a scooter or wheelchair, use it only when needed. For example, it will make the long stretches associated with a visit to a shopping mall or a museum much easier but you can still stand or walk when appropriate. By using the scooter or wheelchair only when needed, you keep the benefits associated with walking or standing while retaining the energy needed to enjoy the overall activity.
4. Finally, if you are falling more frequently, think about why it is happening. Is it because your foot drags? If so, a brace might help. Or is it a result of general weakening? Discuss it with your doctor or physical therapist so you can make the decision that brings you the best quality of life.

Remember, technology is there to assist you. It doesn't define who you are and it can make your life better.

What should you look for in a neurologist or physical therapist?

Someone who:

1. *Listens to you.*
2. *Asks probing questions about your quality of life.*
3. *Supports getting second opinions if needed.*
4. *Discusses your options.*

Don't settle for less.

MS and Mobility Adaptations

By Marie Swank

If you have MS you may expect to use a cane, walker, scooter and then, finally, a wheelchair. But some of us never use some or any of these, and there are other possibilities.

There are several therapies to help you remain walking: drug therapies, physical therapy, exercise, the new "Walk-Aid" and "Foot-Lift". I, personally, do not know anyone who has had success with the latter two, but I have heard success stories about the first three.

When you transition to a new technology I strongly advise that you seek professional fitting and advice. You can cause harm with a cane that is too short and a handle grip can cause hand/arm/shoulder pain. If you don't use a walker correctly, you may have lower backaches. Wheelchairs need to fit your height, width and weight so that you can most easily transfer in and out of them and be able to spend long time periods in them without getting sores.

Many of us use hand-me-down canes, walkers, scooters and wheelchairs for obvious reasons; but please, if you get aches consider that the source may be that „thing' you acquired to make your life easier. If it does not fit you correctly it may be the problem.

My story and source of my „expertise' starts at about age 38 when I stumbled too much and acquired canes (device #1). I was diagnosed with primary progressive MS when I was 43, and physical therapy was recommended. It didn't fit my schedule and I considered myself too busy and able bodied to need to do those exercises. I acquired a used manual wheelchair for trips (device #2). I retired five years later on disability (mostly for MS related fatigue), got a scooter (device #3) from my HMO within two years, a walker (device #4) two years after that and stopped driving at age 51 because my gas pedal foot was too

Traverse the course ahead

Realizing change is in the air

Accepting what was is no more

Navigate your path

Slowly evolve

Improve your outlook

Tranquility is a blessing

Instead of wishing for change, work for change

Opportunities and options are endless

Now is your time

**By Victoria Scaccia,
Volunteer and
Outreach Assistant**

heavy to move without manual assistance. I didn't want to cause an accident. Then I got an ankle/foot brace (device #5). When I got a longer brace a few years later I made the mistake of chucking the AFO. At 57 I got an electric wheelchair (device #6) from Medicare. I still walk a little in my home, but also use the electric wheelchair. I get hip pains when I walk too much.

Some of those acquisitions were poorly timed. I may have made a mistake in not exercising more in earlier days, and not getting braces earlier. I wish that when I acquired canes, walker, and braces I had had a physical therapist advise me on which postures to use and avoid. I believe the pains I got five to ten years later are attributable to improper usage of these devices.

What I've learned along the way:

- Exercise, especially stretching and strength building, are very important at every stage.
- Transitioning from one device to another is not admitting defeat. The devices help maintain quality of life during a chronic, ever changing disease. I still use all of them.
- Electric/electronic equipment needs TLC and periodic maintenance which I cannot master and am extremely frustrated by. It's the pits, maybe worse than having MS!
- The power wheelchair I recently got from Medicare (\$12,000 of which I paid \$2,000) was my attempt to get a device I wouldn't have to maintain. It took me two years to get this wheelchair.

I would be happy to talk about the experience with you. Call me through the MSQLP office at (831) 333-9091.

- Doctors and physical therapists know a lot, but they don't know me and my body as well as I do. It takes frank conversation to find amelioration.

While preparing to write this article I spoke with several other MSers about transitions between mobility devices. No one regretted a transition up and many have transitioned back down. For example, two cane users and a wheelchair user are no longer using those devices except on the rare bad days or when they expect to become fatigued. Everyone thought that using a device improved quality of life and was better than denying that they needed the assistance.

There are still individuals who believe that wearing a brace or using a cane, walker, or wheelchair is unattractive and is defeatist. But the eleven local people with MS who I interviewed disagreed. Of course we'd rather not have MS, but we are thankful for the devices.

As Marie stated above, equipment may require periodic maintenance. To help with this, MSQLP is now offering free equipment clinics.

Equipment Clinic

Don Jones, ATS, from American Medical & Equipment Supply in San Jose is offering a **free Equipment Clinic at our office every fourth Monday of the month, from 10 am – 1:30**. If your wheelchair repairs are minor, he may be able to fix it right on the spot. If not, he can assess what needs to be done to get it functioning properly. He is qualified to assist both Medicare and Medi-Cal insurance holders. Our next clinic is **November 24th** call Don at (408) 559-5800, ex 114 to set up an appointment or just drop by.

MS Stories about Transitions

Robin Flaherty

My “ah ha” moment happened in a grocery store. I was using my walker while shopping with a friend at Lucky’s. We had been in the store for about 30 minutes and I realized I was getting weaker and weaker. As I moved toward the cashier I knew I had reached my limit – I couldn’t stand any longer. In those days walkers didn’t have seats and I was desperate. I told the cashier I needed a chair or I would collapse. She ran and got a wheeled desk chair from the store’s office. I sat while my groceries were checked. The bag boy pushed me in their wheeled chair out to the car. He then helped me get in. I knew I could not have done it without his help. It scared me to realize how lucky I had been and knew I couldn’t count on such luck in the future. The very next day I started the process of getting a wheelchair. I rented one while waiting for my own to arrive.

It made a great difference in my life. It was a relief to know I no longer had to worry about collapsing. It was, in fact, liberating – I could now do more. Prior to the chair I had to think about how many steps – and stairs – might be involved in any outing I planned. Because my arms were strong I did not have to get a motorized wheelchair and, thankfully, my apartment was accessible. I didn’t have to make any adjustments. The people at Dominican Hospital taught me how to pivot so I could easily transfer from the bed to the chair, from the chair to recliner, and so on. For me, the wheelchair improved my quality of life.

Donna Krasnow

When my husband began to have trouble with stability he refused to use a cane. He did not define himself as a person with MS and believed that a cane would focus attention on his inabilities rather than his abilities. I watched, a little frustrated, from the sidelines while he walked unsteadily through his days. He would grab my arm for support at unexpected times and sometimes take me down with him. He fell often. The most interesting was when he fell into the women’s bathroom at a McDonald’s. The women inside did not find it quite as amusing as he did! And

I’m sure people often thought he was drunk as he weaved from side to side as he walked down a street.

What finally changed his mind? We were driving across the country – moving back to California after a 16-year stay in Connecticut. We had just checked into a motel in Winnemucca, Nevada. It was late in the afternoon, it was hot, and Gary was absolutely exhausted. He realized he couldn’t make it from the car to our motel room unassisted. The woman registering us looked around and gave him a gift of an old golf club. I will never forget the sight of him making his way around the motel using that upside-down club for support. Unfortunately, he left the club at a gas station where we stopped the next morning. He looked at me, dismayed. I nodded and we stopped so he could buy his first cane. It wasn’t easy to acknowledge that his need for assistance had finally outweighed his sense of self as an able-bodied person. I suspect it is never easy.

Terri Nash

I know most people don’t associate catheters with liberation. In fact, they believe the opposite. They worry that a catheter may change their life. What if it shows? What if it leaks? Will it smell? Does it hurt when inserted? This has not been my experience. In reality, my life prior to the catheter had become completely focused on access to a toilet. I wouldn’t stay in a hotel or sleep at a friend’s house because I was worried about getting to a toilet in time. And what if I wet the bed? If I went to a restaurant I was so focused on bathroom accessibility that I couldn’t enjoy the meal. I love going to the theater but I wouldn’t see a movie longer than 90 minutes because I believed I might be in jeopardy. There were restaurants I wouldn’t go to, friends’ houses I couldn’t visit and most outdoor activities seemed verboten. Basically, I didn’t leave the house unless I knew a bathroom was easily available and accessible.

It wasn’t all that better at home. I felt like I lived in the laundry room and was married to the damn washing machine! Every day I ran at least one load of wash. I limited myself to drinking 2 glasses of water a day, 3 if I felt

daring. In addition I had frequent urinary tract infections (UTIs).

My “ah ha” moment came when a fellow MSe and I were in the ladies room at the theater. She was in and out before I even got my pants down. I was amazed. I didn’t realize she had a catheter and that started a discussion. Within 2 months I was set up with one. There was, most definitely, a trial-and-error period. Don’t be afraid to ask questions, to find out what works best for you. But it completely changed my life. It gave me back movies, the street market, travel, visits with friends at their houses, restaurants and outdoor events. There is not a whole lot that stops me now. In fact, I have it easier than people who are looking for a toilet. I have a 32-ounce bag so I can go hours without needing a bathroom. Does it leak? Not if inserted and used correctly.

By the way, the other person impacted by my catheter was my caregiver. She had spent a great amount of time dealing with bathroom issues and cleaning up messes. Now, so little time is spent on such issues that it has been liberating for her as well.

It has been almost 10 years since that “ah ha” moment in the theater. I am meticulous about keeping myself clean, getting it changed every four weeks, drinking lots of water and following all the directions and guidelines related to sanitation. I have gone from having at least 8 UTIs per year to one or less. In fact, I can’t remember the last time I had one. I drink at least 12 glasses of water a day – I love water. My body, my bladder and my skin thank me. I feel better in every way.

Carrieanna Hess

I have many tools to assist my mobility. I wear an ankle brace on my left foot and an ankle--to-under-the-knee brace on my right. In addition, I have a traditional cane, an Australian crutch, a walker, a manual wheelchair, and an electric wheelchair. I always wear the braces and then select among the others for the one most appropriate for the activity I have planned. Right now I’m not feeling well - I think I caught the flu – so am using my walker to go to a PT appointment. Normally I would use the Australian crutch but today I don’t have the necessary strength. I use my electric wheelchair around the house but can’t get it into a car so use the manual wheelchair whenever I go shopping or am doing an activity that requires a

lot of walking. What is my goal? It might surprise you. I am working with my PT to increase my use of a traditional cane and reduce my dependence on the Australian crutch. Why? Although the Australian crutch gives me more support, I find it bulky to use when traveling and I have a big trip planned for the spring of 2009. Not only am I returning to Amsterdam but my father surprised me by adding Paris to our travel plans. I am really excited and want to use a traditional cane as the supplement to the manual wheelchair I will rent in Europe.

Transitions and Grief

By Marilyn Howell, MFT, MSe and board member

Is it normal to feel depressed when you finally agree to use a cane or a walker or a wheelchair? Absolutely. Grief is part of having a chronic disease. Anytime there is a change, even a small one, you may feel sad. There are a lot of changes associated with MS – and not all of them are good! Each may represent a small or large loss in your life.

What to do? Talk about it. Write about it. In reality, you may find it difficult to share your thoughts with your family. MS is like the elephant in the living room – an unwelcome part of family life. People with MS worry about how their disease affects the whole family. I urge you to find an MS buddy with whom you can share your concerns. We are all scared about changes in our lives – what is going to happen and what it may mean. It is much better to talk about it than to pretend it isn’t a problem. Don’t try to tough it out. Talking helps.

Adaptive PE

How can you prolong the time between adaptations of new levels of mobility assistance? Dr. Darin Okuda from UCSF’s MS Center, the speaker at our November education event, said that MS medications are only 25% of a treatment plan. The other 75%? Following a good diet, maintaining a positive attitude and exercise. Exercise helps you keep fit.

What exercise options do we have here in the Central Coast? Options that address our MS needs? Check out the Adaptive PE program at your local community colleges. 74% of California’s

community colleges offer this course and we are lucky in that all 4 of ours do – Monterey Peninsula College, Cabrillo, Hartnell and Gavilan. Mark Clements' program at MPC is popular with many of our clients who want to exercise but have physical challenges that affect their ability to perform.

How does it work? If you want to enroll, Mark or a staff member would conduct a basic assessment of your needs. What are your expectations and how might experiences from your past affect your performance? He selects machinery and sports equipment that will best address your needs and then shows you how to use them.

What is a session like? The program operates from 8 am – Noon, Monday through Friday. You sign up for a one-hour block of time and then go as often as you can. Some people choose to work on their own, some like to chat with others in the room. Several of our clients reported that they saw it as a combination of a workout and a chance to socialize with people they have met at the program.

When we asked Bill Wright why he attends Adaptive PE he explained that he had used up all the PT services Medicare would cover. He needed more exercise but didn't know how to get it. Then he heard about Adaptive PE and joined the program. He does it whenever he can - sometimes 3 times a week, sometimes only once. He still has his MS days, but on the whole, feels better than before he started the program. So check out your local community college and find out what they offer in Adaptive PE. Although it should not be viewed as a replacement for physical therapy, it may prolong having to move to the next level of mobility assistance.

Alternatives to Driving

If you have had to give up driving and cannot always depend on others for meeting your transportation needs, remember that RIDES is available through the Monterey Salinas Transit (MST) system. It covers all of the Monterey Peninsula and the Salinas Valley from Salinas down to King City. Its website, www.mst.org/rides, has both the application and a complete user's guide.

If you live in the greater Santa Cruz area, you can use METRO ParaCruz Services. Their

website, which also contains the application and complete user's guide, is at www.paracruz.com. If you need to go from one of these service areas to another, RIDES will take you as far as the Watsonville Transit Center where you can pick up METRO ParaCruz. Remember, however, that you must be enrolled in these services before you can use them and must schedule your trip at least 24 hours in advance.

Home Health Care

Margarite Alvarez sent us her third and final part of her series on home health care. It is so long that we cannot reprint it here but have it, in its entirety, on our website: www.msqplp.org. Once on the site, click on the November 2008 newsletter link. If you do not have a computer call us at the office (831-333-9091) and we will send you a copy of the article.

2008 Educational Speakers Series

Dr. Darin Okuda from UCSF's MS Center spoke in Monterey on Sunday, November 9. He made a brief presentation about recent MS research at UCSF related to genetics and MRI imaging. Following this brief presentation, Dr. Okuda devoted 2 hours to answering questions from the audience about MS. The questions ranged over many topics – medications, treatments, exercise, diet, specific symptoms and alternative therapies. The evaluations indicated that the attendees found the conference extremely valuable and Dr. Okuda an effective presenter who seamlessly merged cutting edge information with humor. We thank Dr. Okuda and EMD Serono for sponsoring this educational event. **Save these upcoming dates!**

January 9, 2009 (Salinas, Ca)

Miriam Franco, MSW and PsyD, will speak about guided imagery and then conduct a guided imagery session. Due to the nature of the presentation it has limited enrollment – we are only accepting 40 participants. Call the office (831-333-9091) to reserve your place.

April 18, 2009 (Monterey, Ca)

Allen C. Bowling, MD, PhD, the author of *Complementary and Alternative Medicine and Multiple Sclerosis* will speak about complementary and alternative medicine as it relates to MS. Miriam Franco (above) will come again to conduct a shortened guided imagery session

Lisa Yocum is Moving

Dear MSQLP Clients, Caregivers, and Supporters,

It is with mixed emotion that I must notify you of my departure. I will be leaving MSQLP at the end of December. My family and I will be relocating to Germany. I enjoyed being a part of MSQLP over the past year. Thank you for the opportunity to be your voice and assist you with meeting your needs. You all have a special place in my heart and will be missed. I look forward to other adventures awaiting me and my family. You will be in great hands with my replacement, Susan Lewis, LCSW.

Welcome Susan Lewis

Many of you already know Susan as she has served on the MSQLP Board for several years. Susan is a Licensed Clinical Social Worker with over 20 years of experience.

Susan and Lisa will spend December transitioning and contacting clients. They will both attend all support group holiday parties and the December MS Lunch. We hope that you can join us in December to meet Susan and say goodbye to Lisa.

MS Support Groups

Anyone dealing with MS on their life journey is welcome to attend, whether as one with MS, a family member, caregiver or friend.

Holiday Parties: We will celebrate the holidays at all MSQLP support groups in December with food and refreshments sponsored by EMD Serono

MSQLP sponsored groups:

Oldemeyer Center: 986 Hilby Ave. Seaside
Second Saturday of each month
11:00 am to 1:00 pm

Lorna Wheatley Memorial Support Group at Salinas Valley Memorial Hospital

Downing Resource Center
Third Friday of each Month
11:00 am to 1:00 pm

Times and locations are subject to change, please call the MSQLP Office at 333-9091 for current information.

Santa Cruz Skilled Nursing Center (formerly known as Pleasant Care)

2990 Soquel Avenue, Santa Cruz
Second Thursday of each month
1:30 pm to 3:00 pm

National MS Society sponsored groups:

Monterey

Community Hospital (CHOMP)
Last Wednesday of each month
7:00 to 8:30 pm
Call Susan Jones at 659-1354

Santa Cruz

United Way, 1220 41st Ave. Capitola
3rd Saturday of each month
10:30 am to 12:30 pm
Call Ada Shannon at 440-1211

NEW!

Workshop for the Newly Diagnosed

A recent diagnosis of multiple sclerosis, leaves you with lots of questions and concerns. You may be feeling so overwhelmed that you aren't sure what kinds of questions to ask. MSQLP is offering a monthly workshop to discuss MS basics and give you the information and support you need to live comfortably and confidently with this change in your life. This workshop is scheduled the third Saturday of each month. **Registration is required**, call 831-333-9091 for details.

NEW!

Caregiver Support Group

Beginning Saturday, Jan 10, 2009, MSQLP will start a new support group just for caregivers. This group will meet the 2nd Saturday of each month at Oldemeyer Center (986 Hilby, Seaside) from 11 am – 1 pm.

This group meets at the same time and place as the current Oldemeyer group, but will be in a separate room and have its own facilitators: Susan Lewis, our new MSQLP case manager, and Donna Krasnow, a former caregiver. Any caregiver may attend. The person you care for does not have to attend the accompanying MS support group meeting. Please call the office if you are interested in attending. We look forward to seeing you Jan 10.

MS Lunch

The next MS Lunch, on **December 4th**, will be at the **MSQLP Office** at 519B Hartnell Street in Monterey, 12:30pm. Bring your own bag lunch or you can get a take-out burger next door at RG Burgers or something healthy at Trader Joe's. Come join us, YUM!

Water Aerobics

Weekly classes at the Monterey Sports Center, Wednesdays from 12-1. Free to MSer's and their caregivers. Get Wet!




Yoga Classes in Santa Cruz

Yoga Classes for people living with MS at the Pacific Cultural Center (rear of the parking lot, in the studio), Sundays 3:30-5:00pm. Call Annica Rose at 423-9642 for information.

Terri's Tinsel Town Talk

By Terry Nash

One of our clients, Terri Nash, is an avid moviegoer. She, along with her service dog, Mabel, sees about 8 movies a month.

Rating: 1 to 4 paws    
(in honor of Mabel)

Batman, the Dark Knight

First things first - for those of you who either loved *Batman, the Dark Knight* or haven't yet seen it, go, go, go to the new Imax Theater. It's now showing on the big screen and is spectacular.

Eagle Eye

The trailer looked intriguing but the movie itself made no sense. The premise was completely unbelievable. I walked out shaking my head. Why 2 paws? I didn't leave early and I didn't hate it, it was just so off-key.

Nights in Rodanthe

I went in with great expectations because it was based on a book written by the author of *The Notebook* - a movie of that book was well received. I have always loved Richard Gere and the addition of Diane Lane - well, what great chemistry. I didn't hate the movie but expected more. The characters could have been expanded. It just didn't live up to my expectations.

Appaloosa

I know Westerns aren't first on the list for most people but I do love a good one. Appaloosa is not about horses - it's the name of a town - but it is a good shoot ,em up about the life and times of a town in 1800s New Mexico. I liked the story. I love Richard Harris and he did a great job.

Burn After Reading

I came out of this movie laughing hard. Please, please remember it is a farce and is completely tongue in cheek. It is about a security leak at the CIA. Brad Pitt and George Clooney love working together and it shows. If you can let yourself go and not take it seriously, get ready for a good time.

Flash of Genius

Excellent David-and-Goliath story about the development of intermittent windshield wipers. I don't know if I would like to be married to the guy because he was so focused on getting what he thought he deserved, but Greg Kinnear does a fine job and can carry a movie by himself. Although it takes place in the early 50s, it feels like a story that could happen today.

Miracle at Saint Anna

This is a good World War II movie about a group of Buffalo Soldiers who help Italians in the countryside evade the Germans. It's a part of World War II history that may not be familiar to many in the audience and it is an important story to be told. Even though it was a bit long, the movie worked for me.

I look forward to seeing the *Curious Case of Benjamin Button*, *The Express*, and, of course, *Bond*! Will review these and others in February.

Terri's Favorites:

Terri's Favorite Movie of All Time: *Babe*
Terri's Favorite Since Starting these Reviews: *Batman, the Dark Knight*
Most Disappointing Since Starting these Reviews: *Forgetting Sarah Marshall*

Did anything change since the last issue?
No!

Calendar



January 2009

- 1 Office Closed
- 2 Office Closed
- 7 Water Aerobics, Monterey
- 8 MS Lunch, @ MSQLP Office
- 8 Support Group, SC Skilled Nursing Center

9 2009 MSQLP Educational Speakers Event:

*Miriam Franco, MSW, PsyD, guided imagery workshop, Salinas
Reservation Required*

- 10 Support Group, Oldemeyer
- 14 Water Aerobics, Monterey
- 16 Support Group, SVMH, Salinas
- 17 Newly Diagnosed Workshop, Reservation Required
- 21 Water Aerobics, Monterey
- 26 Equipment Clinic
- 28 Water Aerobics, Monterey

April

2009 MSQLP Educational Speakers Event:

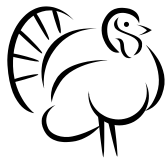
*Allen C. Bowling, MD
Complementary and Alternative Medicine and MS, and Miriam Franco, Monterey*

September

3rd Annual Walk-n-Roll

November

- 24 Equipment Clinic
- 25 Talk-n-Roll
- 26 Water Aerobics, Monterey
- 26 Support Group NMSS, CHOMP
- 27 Happy Thanksgiving!
- 27 Office Closed
- 28 Office Closed



December

- 3 Water Aerobics, Monterey
- 4 MS Lunch, @ MSQLP Office
- 10 Water Aerobics, Monterey
- 11 Support Group, SC Skilled Nursing Center ***Holiday Party**
- 12 Support Group, SVMH, Salinas ***Holiday Party**
- 13 Support Group, Oldemeyer ***Holiday Party**
- 15 Newly Diagnosed Workshop, Reservation Required
- 17 Water Aerobics, Monterey
- 22 **No Equipment Clinic**
- 22 Happy Hanukkah
- 24 **No Water Aerobics**
- 25 Merry Christmas
- 25 Office Closed
- 26 Office Closed
- 31 **No Water Aerobics**
- 31 Office Closed

Development!

We would also like to thank our donors. Since our last newsletter we have received donations from:

Lorianna Ashlee
Biogen, Idec
Lynda and Richard Cornell
Donation Line
Margaret and Ron Gaasch
George and Joyce Hahn
Richard Mayne
Monterey Peninsula Foundation
Multiple Sclerosis Foundation
Kent Newbold
Carolyn Niblick
Daniel Robbins, PhD
Mary Sherman,
In Memory of Alice Behrman
TEVA Neuroscience

Peter Murray's Easy Peppermint Bark

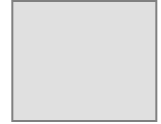
(Kim's nephew's favorite)

- Equal parts white chocolate and milk chocolate (chips are ok)
- Peppermint candy canes (or peppermint from See's Candy!)

- Place peppermint in ziplock bag
- Take a hammer or rolling pin and crush the peppermints
- Melt in double boiler milk chocolate, stir until smooth
- When melted pour on to cookie sheet, spread as thin as you can, sprinkle with peppermints, Put into refrigerator to cool
- Now melt the white chocolate
- Pour melted white chocolate over the milk chocolate and sprinkle more peppermints on top, return to the refrigerator
- When cool (about 1 hour) break apart. Store in refrigerator.

- Put some in a clear bag with a red or green ribbon for a quick homemade gift.

MS QUALITY OF LIFE PROJECT
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*Return Service
Requested*

MSQLP

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Final Word

By Donna Krasow

As a final point - here's an example of irony. Two weeks before sending this issue to print, I caught my foot in a desk leg while attending a class at our local community college. I twisted it, broke a bone and ended up in a wheelchair. I am sitting in it right now. Although my husband used a wheelchair for the last 8 years of his life and I had tried both his manual and electric models, I have never *had* to use a wheelchair before. I have new respect for all of you. My "ah ha" moment of frustration occurred at the grocery store. I had finally gotten out of the house and was shopping with a friend who handled the cart. At one point I picked up 4 items, turned around, and my friend wasn't there. What do you do when your hands are full and you need to move? I held the products in my left hand and tried to move forward using my right. You can guess what happened. I went in circles. I tried adding support from my left (healthy) foot – and moved about an inch. I honor all of you who struggle with mobility issues. My issues are tiny, yours are not. You are heroes.