

Coping With Mild Post Polio Syndrome

By David S.T. Blackmore

In 1926, at the age of two while in Egypt, I contracted poliomyelitis (then called infantile paralysis). As the crisis approached I was not expected to survive the next 24 hours but, to the doctors' surprise, seemed to make a full recovery. I was able to play contact sports at school, and to undergo commando and parachute training in the Navy during World War II.

When I was about 55 years old (polio age 53), I began to experience severe lumbar discomfort. X-Rays showed my right leg to be almost three centimetres shorter than the left and a physiatrist suggested this was probably a residual effect of the polio. However, I was able to continue almost normal activity for many years, assisted by regular adjustment and manipulation.

At about polio age 62, I began to notice progressive ambulatory difficulty, intermittent pain and swelling in the right knee, exertional dyspnoea (breathing difficulty), and decreasing general endurance. At about this time I developed steadily increasing kyphoscoliosis, and persistent dysphagia (difficulty swallowing).

By 1996 (polio age 70), I could still walk five kilometres, but in considerable discomfort and only when assisted by elastic knee braces, a corset, elevated shoes, and a cane. I was also responding less to manipulation and the practitioner referred me to West Park Post Polio Clinic (WPPPC). Respiratory tests indicated normal, pulmonary function, but clinical and electromyographic tests confirmed chronic neurogenic disfunction in the right lower extremity with an estimated 35% loss of muscle cells.

Faced with dire warnings of progressive incapacity and lifestyle restrictions I decided to do as much as possible to defer further deterioration. Extensive research led me to construct what I call my "three-pillar" support regime,

First, I was introduced to a physician specializing in environmental medicine. After extensive tests he prescribed radical dietary changes, including complete elimination of all wheat and dairy products, and sundry other exclusions. Dysphagia disappeared almost immediately, but returns whenever I consume a wheat product. As toxins and allergens gradually leached out of my system, other long-standing aches and pains went with them, and a feeling of well being took their place. However bodily movements continued to be painful and restricted.

At about the same time, my chiropractor recommended Feldenkrais "Awareness Through Movement" exercises and her suggestion was endorsed by the sports medicine MD who had been treating me for years. (In the long run that recommendation cost each of them a patient!)

On investigation, I learned that this is a method of gentle exercise, designed to retrain the nervous system so that it controls movement efficiently, with minimal muscular exertion. Dr. Moshe Feldenkrais, an Israeli nuclear scientist, and martial arts expert invented the treatment to help himself after doctors told him an injury meant he might never walk again.

His system is deceptively undemanding, rejecting "no gain without pain" in favour of "less is more". During early classes at The Feldenkrais Centre in

Toronto I thought I was wasting my time but, after three months, I was able to dispense with the corset; two months later, leg braces were no longer needed; elevated shoes and cane were gone before the year was out.

By the time I was enjoying a flexibility and mobility I had not know for decades – bending to tie my own shoelaces, walking frontward down stairs, and many other regained movements. I continued to walk one or two kilometres several times a week, but with increasing difficulty.

A return visit to WPPPC in 2000 (polio age 74) confirmed improved mobility, but disclosed additional wasting of the right leg. In consequence, I was advised to replace my walks with aquatic exercises, but could not continue with them due to an allergic reaction to chlorine in the pool. As an alternative, trainers at the YMCA developed a personalized conditioning programme for me, involving four barbell exercises and eight resistance machines. This has become the third "pillar" in my régime.

To avoid overstressing already-weakened muscles, weights and resistance were set well below my capability, with the emphasis being on gradually increasing the number of iterations to just below the level of discomfort or fatigue. Over nineteen months, I have advanced from ten repetitions to eighty, performed without resting. My goal is to reach a hundred.

I would add a fourth "pillar" in the form of aerobic exercise, but every piece of equipment – treadmill, step machine, bicycle, rowing machine, cross trainer and the like – demands extensive use of the legs, which, for me, is impossible.

To summarize, at polio age 76 (chronological 78) I am fitter and feel better than I did twenty years ago. Thanks to watching my daily dietary intake I have far fewer aches and pains. Thanks to Feldenkrais (three days/week) I can move easily and fluidly. And thanks to YMCA conditioning (also three days/week) it takes three or four times as much exertion for me to reach the "Polio Wall" of exhaustion.

Admittedly, my PPS is far less severe than that of many polio survivors, but I hope this account may prove helpful for people with relatively mild disabilities such as my own.

Reprinted with permission of David Blackmore and the Toronto Peel York Post Polio Newsletter, Issue #55 November 2002

For information on classes and private sessions, please contact:

Marion Harris

390 Dupont Street, Suite 201

Toronto, Ontario M5R 1V9

Tel: 416-928-3505 Fax: 416-928-3593

www.feldenkraiscentre.com


The
Feldenkrais
CENTRE

