

Introduction

THE POST-POLIO ISSUE: AN OVERVIEW

Although acute poliomyelitis has largely disappeared from the United States for the past 30 years, it has become evident that polio survivors from the large epidemics of the 1940s and 1950s are now developing new health problems which are related to their history of poliomyelitis. During the past 10 years, increasing numbers of polio survivors with progressive new muscle weakness, severe disabling fatigue and a variety of pain problems have sought medical attention. When these new symptoms disable people from continuing their previous level of functioning, they are often said to have the Post-Polio Syndrome. The late effects of polio typically begin 20-40 years after the acute paralytic polio infection.

There appear to be many causes for the late effects of polio and the Post-Polio Syndrome. Many problems result from aging and long-term strenuous use of the previously damaged muscles and limbs. Additionally, if polio survivors become ill from medical problems unrelated to their polio history, general debilitation may cause progression of post-polio weakness and lead to new symptoms. Occasional polio survivors develop unexplained new muscle atrophy and weakness, a condition known as Progressive Post-Polio Muscular Atrophy.

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Using modern rehabilitation methods and techniques, polio survivors are able to be helped and can usually be restored to their customary levels of functioning. Pain can be eliminated or managed in virtually all cases. Therapy can sometimes restore lost muscle strength and energy levels can often be improved by adaptive fitness training programs. Nevertheless, many paralytic polio survivors need to return to or begin to use braces, crutches, canes, wheelchairs and a variety of adaptive equipment in order to compensate for greater weakness and loss of functional abilities. Re-rehabilitation through the use of new assistive devices and other lifestyle adaptations can usually restore the capacity for continued productive and satisfying activities.

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Psychological stress from the development of new impairments and functional limitations is another important and real problem for polio survivors who experience the late effects of polio. Our experience has shown that associations of polio survivors who join together for supporting each other can be very helpful. Polio survivors can learn from each other more quickly than learning from health care professionals. They can share methods for re-adapting their lifestyles and altering their customary ways of doing life activities. They can also effectively work with community and government organizations for improving accommodations and facilities for people with physical disabilities and handicaps. In order to avoid depression and to reduce stress from loss of income and enjoyable leisure-time activities, polio survivors must be encouraged to creatively find new adaptations for their physical problems in order to remain productive in their lives and active in leisure-time activities.

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After a decade of observing and studying people with the late effects of polio, it is clear to me that re-rehabilitation and support for making adaptations is not enough. Many polio survivors continue to experience new problems, and most of these are potentially preventable. I believe polio survivors need opportunities to learn how to apply general health promotion practices to their unique conditions and circumstances. Because of their special vulnerabilities to new health problems, polio survivors need intensive instruction, coaching and support to learn how to apply these practices in their lives. This manual is dedicated to creating these opportunities and preventing unnecessary progression of disability.

--Frederick M. Maynard

THE GOALS OF THIS HEALTH PROMOTION PROGRAM

This health promotion program has been designed for persons who have the late effects of polio or who are at risk for those late effects. It is meant to help participants alleviate, manage, and prevent a variety of secondary conditions that are associated with long-term muscle impairments and that can lead to new debilitating secondary disabilities if left unchecked. Its purpose, moving beyond corrective rehabilitation, is to promote good long-term health and wellness by introducing people to new tactics that can be customized to their needs and teaching them how to successfully adopt appropriate health-enhancing behaviors on a long-term basis. STAY WELL! is not a self-help program. It must always be directed by qualified professional facilitators.

THE PURPOSE AND CONTENTS OF THIS MANUAL

The purpose of this manual is to provide structured written guidelines for starting and conducting a successful health promotion program. It offers organizers a wide range of choices for creating and coordinating the most appropriate type of health promotion program for their community and presents a variety of ideas for the actual content and format of educational programming. Chapters 2, 3, and 4 present working information for program development.

Chapter 2 provides step-by-step guidelines on how to start and organize a program. Much will depend upon available local resources, including personnel, facilities, and financial support.

Chapter 3 introduces and describes the course curriculum and is divided into three units: nutrition, exercise, and lifestyle enhancement. Each unit is organized into sections with suggestions for weekly session content and activities. Sections and/or session models are divided into the following segments with occasional slight variations in format:

- * Goals
- * Structured Overview
- * Teaching Tips
- * Key Points and Activities
- * Materials Needed
- * Suggested Readings

Handout models are provided at the end of many sessions and may be photocopied for participant use.

Chapter 4 includes program evaluation forms that can be utilized for short-term as well as long-term follow-up purposes.