



ART



SHOW

Toomey j GAZETTE

SPRING 1960 • by for and about RESPIRATORY POLIOS

Toomey J Gazette

Vol. III, No. 1 Spring 1960

Editorial Office: T.J.G. Box 149
Chagrin Falls, Ohio, USA

The TOOMEY J GAZETTE is published entirely by respiratory polios and their friends under the program of the Iron Lung Polio Assistance, Incorporated.

FREE to Respiratory Polios
("Respos")

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EDITORIAL

"If I live to be a hundred, I would never be able to earn enough to support myself."

This statement was recently made in a letter to me by one of my good friends. Let's call him John Respo. This line of thinking is not John's alone. The great majority of us think this way, along with our families, doctors and professionals in the field of rehabilitation.

As the situation stands now, John's statement is most often true. John Respo did not come to think like this automatically. He has reached what society calls "maximum rehabilitation." He has come to the point where he can do no more without a secretary or assistant. He cannot work on an assembly line, or ring doorbells, or ever spend the day at home filling orders.

"Hire the Handicapped," reads the slogan.

Right there is the rub. The very word "hire" rings with the sound of physical labor, the general principle being that the physical residue of the disabled, if properly adapted, can be used to run a machine.

Respos are executives. A new modern concept of rehabilitation must be developed to make use of this potential.

John has a Typical Respo Story: He is a college graduate, age 30, married, has 2 children, was just gaining promotions and recognition in his chosen field 5 years ago when polio struck, totally paralyzed, requiring 24-hour mechanical respiratory assistance.

Now John earns a few dollars a month selling greeting cards. Contrary to the thinking of busy people, his mandatory retirement is not pleasant. Man's natural desire and urge is to be producing and active.

At this office, we have a good joke on society. We do not think the respo needs to run into that brick wall of "maximum rehabilitation."

How's this for a dream?

We see research teams (1) visiting each respo, studying the individual situation, and helping with direction and education plans; (2) working with the community, the Chamber of Commerce, etc. local businesses and manufacturers, finding how this latent ability of the respo can be used; and (3) financing six months service of a good secretary or laboring assistant or financing the creation of a small business.

Now, my dear friend, John, with your interests and education, what could you do with a secretary for six months? Would there be more hope for you before you reach a hundred?

If I live to be a hundred, I will never believe that muscle is more important to success than brain.



Reds Say Polio Drug Helps Ease Paralysis



Monica Le Monnier

RESPIRATOR CONTEST WON BY SOUTH AMERICAN GIRL

The judges of the Thompson Respirator Contest, Dr. Burton H. Fern, Conn., Dr. Marion H. Sims, Ala., and Dr. Duncan A. Holbert, Cal. (all respos themselves), had a difficult time making the final decision.

Monica Le Monnier, the winner, lives in a hospital in Buenos Aires, Argentina and will share her new portable with the other patients there.

"POLIO DOCTOR" LEAVING CLEVELAND TO STUDY

Dr. Robert M. Eiben will leave for Seattle, Wash. on July 1. He has accepted a three-year N.I.H. fellowship to study pediatric neurology under Dr. Fred Plum at the University of Washington.

RESPO'S LETTER TO KHRUSHCHEV UNANSWERED

After the brief radio flash and tiny newspaper reference to a Russian claim of a polio paralysis cure, our reporters made inquiries of the following: UPI, Cleveland Medical Library, Institute for the Study of Poliomyelitis, Moscow, Soviet Embassy, National Institutes of Health, National Library of Medicine and the National Foundation.

Mary W. Angel, Bath, N.Y., topped the search with the following letter to Premier Nikita Khrushchev:

"Dear Sir: I am writing on behalf of Americans who have been left paralyzed by poliomyelitis. About a

NF AND AP REPORT ON RUSSIAN CLAIMS

The first Radio Moscow report on the drug, called galanthamine, (erroneously reported at first as "karatonin"), said it cured polio paralysis.

But a later Associated Press dispatch said that doctors emphasize the drug does not produce a complete cure. Destroyed nerve centers cannot be made well again.

Instead, they explained that the drug works by boosting the ability of surviving nerve endings to move the muscles.

Polio experts in this country, who have had hundreds of queries on the Soviet drug, said that they investigated similar chemicals ten to fifteen years ago.

"We gave up on them," said Dr. Thomas Rivers of the NF. "They had a short-lived effect."

month ago we read in our newspapers that Russian scientists have discovered a new drug that completely cures this type of paralysis. This drug is known as "karatonin" and is processed from the fruit of a perennial herb that grows in Central Asia.

"We felt that by writing directly to you we would get information. You are really famous for being able to cut through useless red tape and get to the heart of the problem.

"As you might expect this discovery means more to us than we can even begin to tell you. I know whereof I speak because my body has been almost completely paralyzed for fourteen years.

"We would greatly appreciate any information or help you are able to give to us.

"I would like to close by offering our congratulations on your approaching birthday and our hopes that that day may be an especially happy one for you."



THE MAIL BOX

● LA BOITE AUX LETTRES

..I managed to read Toomey Gazette with the help of a dictionary. I have mentioned receiving your TJG here and to distribute it to the polio respiratory cases; we would need a French translation with it that we could mimeograph. This idea could go a long way.

Your magazine is very interesting because it shows everybody's "thousand tricks" and also the equipment. As a matter of fact the respiratory cases are those that need the most the help of the techniques...

M. BONNET, L II R, Hopital R. Poincare, Garches, S. et O., France

..I have read your article No. 258 that appeared in the Polio-Revue L'Archipel last March, 1960.

Being a polio-respiratory patient I would like to ask you if it is possible to obtain a subscription to your journal. I ask this because I am very interested in the progress that the United States is making for polio patients. And also to contact polio patients on other continents. Thanking you.

P.S. Being equally paralyzed all over the body I ask you to accept this letter without a signature.

JEAN ZEENDER, Hopital de Ille, Centre de Polio, Berne, Suisse

(ED: Monique Harwin translated the above letters.)

..Having been a polio friend of the National Association of the Friends of the French Polios, Haubeville St., Paris. And having observed the revue of this beautiful work "Polio L'Archipel's" your announcement. I will be happy to receive for nothing your revue "Toomey J Gazette" of the American respiratory polios.

Also, I will ask you to put me in contact with some American polios for to correspond and to exchange some postcards and gracious letters. With the hope that you write soon and send your beautiful revue. With my thanks.

I am 36 years old and have had polio since 1939.

Believe, dear friend, from a French polio friend my respectful remembrance grateful and friendly.

CAMILLE DESCAT, Route de Roquefort, Retjons, Landes, France

(ED: Respo Gretchen Lees translated Mr. Descat's letter and also made a summary in French of the Fall-Winter TJG which was mimeographed and sent to all French polios on our mailing list.)

YOU CAN WRITE TO TJG IN ANY LANGUAGE

Monique, Gretchen or Toni Gafford will translate your letter or find someone who can.



T H E
M A I L B O X

• THE NATIONAL FOUNDATION STORY

..For sometime now I have wanted to write and thank you all for the tremendous service you do for us. TJG almost gives one a feeling of belonging to a very exclusive club...Though this is doubtless an honor that most of us would gladly forego. The Gazette does much to banish the feeling that many of us most often have, namely that of being the only person on earth with just such a problem.

However, I believe your greatest service to us was your last issue. In bringing out into the open this new Foundation policy on attendant care, you have done much to help those of us who have great fears for the future with this policy in force. For some of us this policy spells disaster and despair because in some states, such as my own, there are no provisions made to adequately help people with such a terrible problem. The only help provided by the state is so small that it could not begin to cover more than five or six days of attendant care per month. And yet attendant care is just as necessary to the polio as food and drink and even respiratory equipment. The fact simply must be faced that a person who is completely paralyzed requires a lot of care from others if he is not to just vegetate.

As you so wonderfully pointed out in TJG, it is not that we want to have to accept this help, it is that we must accept it. There is no other way for many of us but to be helped physically and financially by others who are more fortunate. This is not an easy thing for pride to accept, but it must be done. Let's all work together as you suggested to find a solution. Something must be done...

ANN ADAMS, Jacksonville, Florida

..My children and I live with my parents (thank goodness for my parents)... speaking of help - the new Foundation policy affected me as it has everyone else. I mean to say, I have a fear for the future (I do not wish to sound mor-

bid). My parents are not young, and I think of the unhappy possibility of my needing live-in help. I have been told by the NF city chapter not to worry and I try not to. I guess none of us could have survived without them and I am very grateful for everything...
ELEANOR BILLMIRE, Baltimore, Md.

..The fact that the National Foundation is now dropping their home attendant care plan is nothing new to the polios of Southern California. Since So. Cal. was always an endemic polio area, the local Foundation chapters have always been short of cash.

Fortunately for us, the County of Los Angeles had the foresight to establish a "Home Care Program" in 1953. This program provides for attendant care, hospitalization and equipment loan for Los Angeles County long-term polio patients. There is also a "Home Maintenance Program" for polios who only require equipment loan and maintenance. The patient or his family are expected to pay the County whatever amount they are able to each month. Under this system some patients pay nothing and some pay practically the entire cost of their care. In this way there is no undue financial hardship and no feeling of being an indigent charity case.

Four repair trucks check each piece of respiratory equipment at a patient's home once a month. I consider myself lucky to live in an area where I am entitled to this service. A word of caution, though, don't come flocking out here just because things sound so good. The program is only available for those who got sick in, or who are bona-fide residents of, Los Angeles County...
JERRY E. STEIN, Alhambra, Cal.

..I was writing news for a little local weekly paper thinking the extra dollars helped, but when it ups your income tax, there's no percentage. How are the others who have businesses and spouse working taking care of this item?

Your statements on the new Foundation policy were very helpful to me and the first official word I had received. It seems as though it would have been nicer to have had some kind of official letter stating the fact. So your magazine took the place of the letter and showed us just how the Foundation now

CONTINUED

stands with regard to home care...
JUANITA PUSATERI, Three Rivers, Cal.

..If you need attention the first two years and you do not improve (my case) then what do they think you are going to do without attention hereafter? I can't afford to hire my own help. It is hard for my wife to take care of me at night and try to make a little bit of a living...

ROBERT E. BRITEN, Dunlay, Texas

..I hope you and the many readers of the Gazette will bear with us during this difficult period. I hope your readers will also understand that we are not diverting any significant amount of money to the treatment of new diseases to the detriment of the polio patient...

WILLIAM S. CLARK, M.D., Director of Medical Care, The National Foundation.

● POST-REHABILITATION FACILITIES

..Here at the Center, our main project is in seeking sources of information. We are trying to gather all the information available on post-rehabilitation facilities for people who cannot go home for some reason. Eventually, we would hope to canvas New York to determine how many people would be interested in a fully equipped handicap community. Then perhaps someone else could start a project to take rehabilitated respos out of hospitals and into a more home-like atmosphere. Needless to say, I would appreciate any suggestions you might have...

TOM CLANCY, Goldwater Hosp., N.Y.

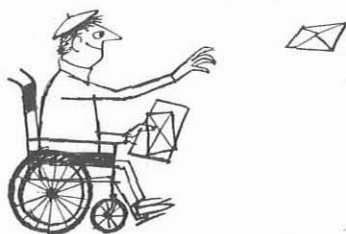
● VIA AIR MAIL, VIA AEREA, PAR AVION

..all who join in your gazette are "special people." I would go still further. I believe they are the best example of optimism and courage not only to other patients but also to everybody who contacts them...

SPYROS THEOLOGOS, Hellenic Rehabilitation Centre, Athens, Greece

..I have sent you under separate cover all the information regarding Equipment, Respirators, etc. that I can rustle up at the moment. I will get you more literature as soon as possible...

HEATHER RUFFELL, Rush Green Hospital, Romford, Essex, England



T H E

..I am accustomed with the situation in the U.S. regarding polios having spent 13 months (1957-1958) at the Goldwater Resp.Cen. on Welfare Island, N. Y. It was a most worthwhile stay and did me a lot of good.

Polio rehab has made great strides in Switzerland recently. The main resp. center is in Berne. I go there for check-ups occasionally and will bring them your paper next time I go.

CHARLES FROELICHER, Steinhofhalde 18, Luzern, Switzerland

● OF PROFESSIONAL VALUE ALSO

..use in teaching students of Occupational Therapy...

MARIA VAN GARDEREN, MAOT, Liverpool, England

..Those who use these pieces of apparatus can give us much better appraisals than many of us who just see the product in use...enjoy having it readily available...

IRENE HOLLIS, OTR, American Occupational Therapy Association, N.Y.

..The close and warm relation to you has been very important for the spirit of our patients. For example, Yrjo is now very busy studying English so he will be able to read the letters from the USA...I wish to your great exhibition of art all possible success and believe that it is a very important occasion for all respiratory patients every where in the world...

TAPANI KOSONEN M.D., Helsinki, Finland

..In the light of experience gained by many of the respiratory quads within your ken, I wonder if you could advise us as to the relative merits of the (piece of equipment)...

D. E. CURREN, Canadian Paraplegic Assoc. Halifax, N. S., Canada

..We are actively engaged in a Polio Home Care Program in our Province...and would like to receive each issue of your Gazette as it comes off the Press. WALTER N. BOYD, Dept of Health & Public Welfare, Winnipeg, Manitoba, Canada

MAIL BOX



..use in my classes here at Eastern...
JOSEPHINE C. MOORE, OTR, Eastern Michigan College, Ypsilanti, Mich.

..(TJG) certainly stands as evidence to the infinite powers of the human spirit.
REV. JOE STAFFORD, Ceres, Cal.

..of value to our program with the severely disabled in this District...
MRS. ELISE WILLSON, Rehab. Counselor, Dept. of Educ., State of California

● "BUTT BOARD"

..I refer to the diagram of the "Butt Board" (TJG, F-W 1959, p.15) and note that the front and back were labeled incorrectly and it would be very uncomfortable if used as shown. I know, I tried it...

LORRAINE LIEBERMAN, Vineland, N.J.
(ED: You're right! We did too. Ouch)

● POLIO GRANDMOTHER

..I am 51 years old, the only Louisville polio grandmother. Although I spent a couple of months with respiratory aid I can now use crutches and do most of my own housework...

● 20 YEAR RESPO

..I am a veteran respo, having served my time in the iron lung in 1940 (I was 12 years old). Thanks to a wonderful family and friends I don't miss much, even though I am completely wheelchair-bound.

Gadgets are a tremendous help to me. I have an electrical device which makes it easy to look up phone numbers, etc., hands-free telephone, a special mouth-stick. I have done several telephone jobs. I do typing, any kind - legal, manuscript, etc. I have done a little free-lance writing and had a few articles published in small magazines...
IMOGENE PRICHARD, Lima, Ohio

● SPEEDY AND THE CD

..I would like to write about my help situation if I may. My last attendant is 18. They call him "Speedy". Last winter Schnectady had a Civil Defense Drill, so what does my man "Speedy" do?

He races me across the street and into a CD shelter. I wouldn't mind, but it was 2 degrees outside. The rocking bed seems to fascinate him. He is always trying to see how fast it will go...
ROBERT LAYMAN, Schnectady, N. Y.

● TAPE CORRESPONDENCE?

..If you have a tape machine available, I would enjoy talking to any of you. It would be much better than writing...
DON PARKER, VA Hospital., 4A,114, Portland, Oregon

● A NON-PROFESSIONAL PROFESSIONAL

..I endeavor, at times, to rally the patience and tolerance of those who have to put up with me. At other times I just plain give them cause for mayhem. I make a concerted and continuous effort to keep from becoming what I call a professional invalid. You, of course, are well acquainted with this type...
DR. MARION H. SIMS, Talladega, Ala.

● HOME-MADE TRAILER RESPIRATOR

..I have a lot of trouble with mucus in my chest so I'm unable to get along with just the rocking bed or the chest respirator. Because of this we were never able to spend a vacation away from home until last year.

We bought a small house trailer and Harry built a respirator in it. The "Tank" part is made of plywood and a cover in the "Tank" lifts up rather than having the cot section slide out. He got an old American iron lung that a hospital wanted to dispose of and the motor and drive assembly comes from this. A Drinker bellows furnishes the air pressure. We spent several weekends away from home last summer and a week in northern Michigan 400 miles away from home...

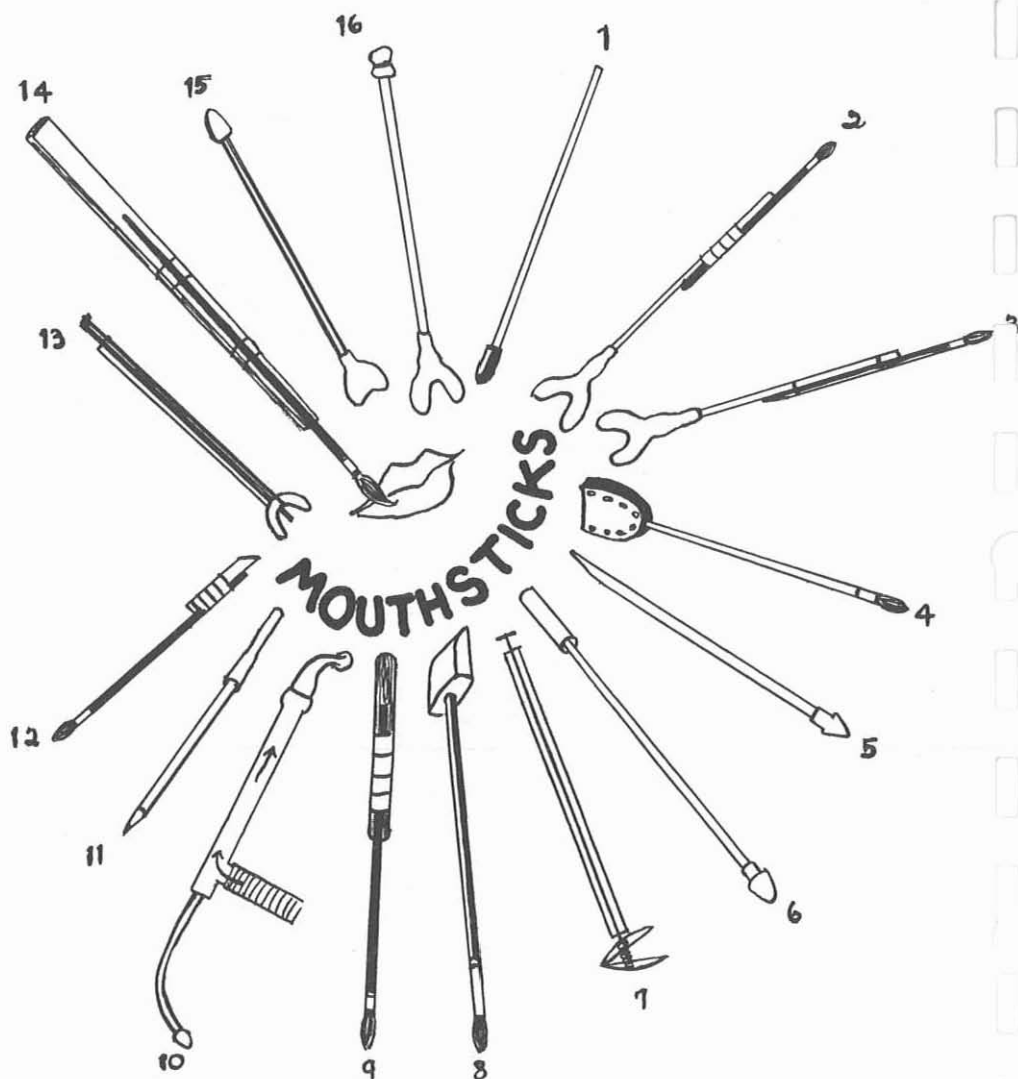
VERA LARSON, Grand Rapids, Mich.

● HOW TO MAKE \$\$\$?

..Any ideas on how to make money that have worked for other respos, I would appreciate hearing about...
BETTY LEEDOM, Broomall, Pa.

(ED: We recommend "One Thousand Ways to Make \$1,000" by Helen Hoke, Bantam, paperback, 50¢)

If you want to write to someone whose letter appears in "THE MAIL BOX", drop us a card, and we'll send you their complete address.



- 1 $\frac{1}{4}$ " plastic rod with rubber eye-dropper tip. (Don Parker, Oregon)
- 2 Custom plastic teeth-impressioned mouth grip on aluminum $\frac{1}{4}$ " OD tube. (Ed Thompson, Adapt. Equip., Cleve. Metr. Gen'l Hosp., Ohio)
- 3 Same as above, with stainless steel clips to hold brush or pencil.
- 4 Small rubber heel, sharpened brush inserted in slit. (Bill Wood, Ohio)
- 5 Tapered wood dowel with pencil eraser tip. (Ida Brinkman, Ohio)
- 6 Same as above, with plastic tool grip at mouth. (Doris Coutant, Ohio)

- 7 Pincer pick-up mouthstick for playing cards, etc. A pair of small cymbals on spring is connected by bar within lightweight tube, through the rubber mouth grip, to tongue plunger bar. (Vincent D. Masciarelli, Ad. Equip., Highland View Hosp., Cleveland, Ohio)
- 8 Large eraser mouth grip. Eberhard Faber, Pink Pearl, No.101, halved, with pointed brush end inserted. (Susan Armbrrecht, Ohio)
- 9 Brush taped to wood tongue depressor. (Roy Cary, Colorado)
- 10 Positive pressure mouthstick. Lightweight T-connection for positive pressure hose and mouthstick. (Louis Dabney, Maryland)
- 11 Brush or pencil inserted in cigarette holder. (John Arthur, Ohio)
- 12 Brush taped to 3" stick. (Irene Ridgeway, California)
- 13 Plunger, which is pushed forward with tongue and pulled back by a rubber band. (Louis Morris, Michigan)
- 14 Brush taped to wood windowshade slat. (Larry Williams, Ohio)
- 15 Springy action mouthstick - two bicycle spokes in Neolyte gripper with malleable gum rubber tip. (Louis Morris, Michigan)
- 16 Small square of foam rubber held by rubber band, extending $\frac{1}{4}$ " beyond tip of stick - for page turning. (Dr. Burton H. Fern, Connecticut)



WRITING BY MOUTH

Below is a picture of Enid Whitley, Riviera, Texas, and a reduced sample of her beautiful "hand"writing. She carries on an active correspondence with four sisters and many of her friends. ●●●

Dear Sue,

About my writing: it wasn't too hard to learn, just a lot of practice & patience - I started about 7 years ago. I would recommend some pretty good neck muscles, though

Love,
Enid Whitley



ABDOMINAL BELT RESPIRATORS

Description, comparison and uses

HUMAN life is dependent upon the individual's ability to receive oxygen and to remove carbon dioxide. This process, known as respiration, is divided into two phases: inspiration (breathing in), and expiration (breathing out).

During the past thirty or forty years various respiratory aids have been developed to aid the respiratorily embarrassed patients. First in this line was the iron lung, then came the chest shell, the rocking bed and the positive pressure devices. These aids are invaluable during the acute and early rehabilitation stages, but, when the respo feels ready in his rehabilitation growth for a less restrictive life, the need arises for a less bulky respiratory aid, ideally one with more aesthetic merits, such as the recently developed abdominal belt.

THE abdominal belt is an innovation. To the best of our knowledge, respirators especially adapted for abdominal breathing are produced in the U.S. by three companies: Conitech, Monaghan and Thompson.

The abdominal breather consists of a small adjustable belt encircling the abdomen and the small of the back, containing an inflatable bladder that alternately inflates and deflates when attached to an appropriate respirator motor. During inflation the abdomen and the other internal organs are compressed, causing the diaphragm to rise, thus causing expiration. When the bladder deflates, the diaphragm falls and inspiration occurs.

When worn under clothes, the belt is inconspicuous and provides adequate ventilation, even for those with no free time. It is comfortable even on warm days and affords unlimited mobility. It should be remembered, however, that it may be used effectively only when sitting.



CONITECH
Sally Russell, Kentucky, "You can so easily conceal the belt under slacks or skirts."

By **IRA E. HOLLAND**



THOMPSON

Harriet Stephens, Colorado, "Motor, plus batteries, mounted under wheel chair, make possible cord-free visits and outings."



MONAGHAN

Louis Morris, Michigan, "Used with house current, the small motor and abdominal breather take up little space."

LIKE the big-car small-car controversy, each of these designs has its plus and minus. Every individual must decide whether he wants a compact lightweight motor or a larger more versatile heavy-duty one.

Conitech uses a piston and cylinder (24-volt) arrangement for providing pressure. This design is quiet and smooth. In addition to positive, it provides negative pressure for use with the chest piece.

Monaghan and Thompson units incorporate a turbine blower (similar to a vacuum cleaner). They are both 12-volt units, which means they can be operated both in the home and directly from the car's ignition system.

All three companies have made their motors portable, with attractive finishes. All three may be used for mouth or trach positive pressure with special attachments. These special attachments and the abdominal belt hoses and batteries have to be purchased separately from the motor.

Rubber inflatable bladders, to be adapted to your own corset are available in several sizes from all three companies. A special belt (corset) including the bladder may be purchased from Conitech. ●●●

COMPANY	MOTOR WEIGHT	BATTERY WEIGHT	BATTERY RUNNING TIME
CONITECH, CHAUNCY, N. Y.	61 lbs.	61 lbs.	9 hrs.
MONAGHAN, 500 ALCOTT, DENVER, Colo.	25 lbs.	29 lbs.	3-4 hrs.
THOMPSON, 2625 PENNSYLVANIA, BOULDER, Colo.	17 lbs.	25 lbs.	5 hrs.



THE HOME AND I

SUSAN RAY is 12 years old - very small and has had polio 8 years. Her home is at 162 Mink Drive, San Antonio, 1, Texas. She and her family have traveled to the Great Smokies, Pike's Peak, Mesa Verde, and Yellowstone Park with her traveling equipment which will be featured in another issue.

The pictures presented here relate the story of this wonderful family at home.



CLIP-ON DESK (left) used for reading, looking at pictures and playing. It clips on chair arms with trunk catches. Adjusts with wing nuts. Cost \$8.



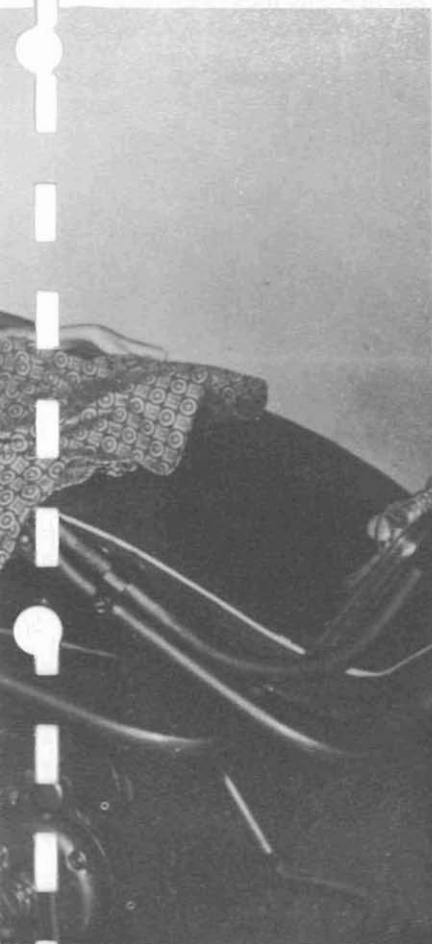
MECHANIZED DESK (left) makes possible writing over almost the entire sheet of paper. (Susan lacks ability to write except over 2 sq. in. space.) Used for writing, drawing, oil painting, etc.

Construction: A stand of steel tubing on wheels. Wooden desk with aluminum frame has movable panel-on-panel for 4-way movement. Micro switches on either side of her head move small panel up and down. Micro switches under heel and toe of right foot move large panel right and left. A.C. current. Cost about \$125.

BY MR. AND MRS. CECIL RAY

Susan's father, during the last 8 years, has made these pieces of equipment, as well as others, from new, used, and give-away materials.

TINY ROCKING BED (left) is used as a basic day-time unit. A. C. only. Weighs approx. 100 lbs. Cost about \$100.



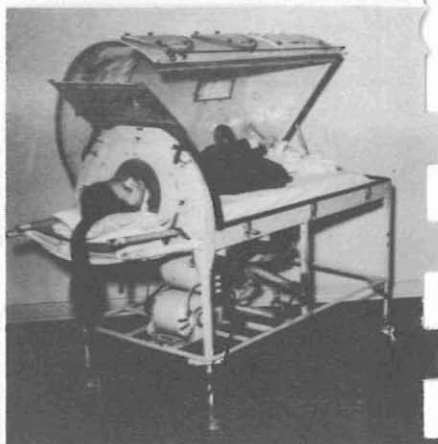
MULTI-PURPOSE CHAIR is used especially for travel as car chaise (on small base, right above), as rocking bed-chair (on the larger wheel base, right), and as an outdoor chair.

Construction: Aluminum tubing. Bed section adjusts for different posture. Regular bicycle tires and wheels.

Operation: Bed section may be used separately for playing "in the floor." 4 wing nuts fasten it to the bases. Rocking is by A.C. aluminum motor. Large wheel base and bed weigh 60 lbs., small base and bed weigh 20 lbs. Cost about \$90.

CONTINUED





THE HOME AND I CONTINUED

SUSAN'S "BABY" IRON LUNG (above) was originally built for travel. Is now used as a regular home unit. Built before small tanks were available from manufacturers.

Construction: Sheet metal. Rod running along side, attached to positive pressure flap, used for coughing.



MOTOR CHAIR was designed for independent "whizzing" over the house. May also be driven outdoors on the sidewalk.

Construction: Aluminum tubing. Tri-cycle wheels. Adjustable posture.

Operation: 12-volt battery and charger under seat. Foot pedal works reversible motor for forward or backward drive by push of heel or toe. Extra-sensitive micro-switches run motor for right and left turns - accomplished by slight forward or backward push of right hand. It cost about \$125.



BATH CHAIR can be put down in the tub for "bubble" baths or up on the frame at the top of the tub for shower hose baths.

Construction: Metal tubing frame, heavy (tent & awning) tape for lattice. Weight approximately 20 lbs (could be much lighter if made from aluminum tubing). Cost about \$10. ●●●

Frog Breathing

A RESEARCH FEATURE
by THE STAFF



STEP 1

A MOUTH AND THROAT FULL OF AIR IS TAKEN DEPRESSING THE TONGUE, JAW AND LARYNX TO GET MAXIMUM VOLUME. THE LARYNX HAS BEEN SHUT.



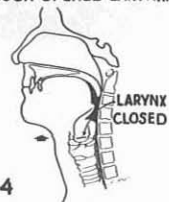
STEP 2

THE LIPS ARE CLOSED AND THE SOFT PALATE RAISED TO TRAP THE AIR.



STEP 3

THE LARYNX IS NOW OPENED. THE JAW, FLOOR OF MOUTH AND LARYNX ARE RAISED. THIS TOGETHER WITH PROGRESSIVE MOTION OF TONGUE FORCES AIR THROUGH OPENED LARYNX.



STEP 4

AFTER AS MUCH AIR AS POSSIBLE IS FORCED THROUGH THE LARYNX IT IS CLOSED AND ALL IS READY FOR REPETITION OF FIRST STEP.

**GLOSSOPHARYNGEAL
BREATHING²**

Glossopharyngeal breathing (GPB) is a substitute method of breathing that can be used to produce adequate respiratory ventilation when there is paralysis of the respiratory muscles. It makes use of the ability of the mouth and throat to act as a pump to force air into the lungs. The muscles of the tongue, soft palate, fauces, pharynx and larynx must be functional. This method of breathing has also been called "frog breathing" and "gulping."

Uses: Frog breathing frees the respo from mechanical equipment for a) emergencies, b) transference, c) chest stretching and coughing, and d) supports greater physical activity i.e. longer sitting or walking.

Limitations: There are some respos who will find GPB impossible because of severe throat involvement. One cannot sleep on GPB and, occasionally, there is leakage and irritation around the tracheostomy.

The value of glossopharyngeal breathing to those who have impaired breathing ability cannot be over-estimated. The advantages include medical, social, psychological and economic. Many patients state that their lives have been greatly changed with having learned GPB. Those persons who have no tolerance emphasize that the fact they no longer live under the tension caused by the thought of a power failure is worth any effort required in learning.¹

CONTINUED

FROG BREATHING CONTINUED

After five years of trying I thought I would never learn to frog breathe. Then, once when "goofing off" I imitated, in an exaggerated way, my friends I had seen doing it. Suddenly, I found myself laughing very loud laughs - I was frogging too!
-Donna McGwinn, Ohio

Don't get the air in your stomach. You have to close off your larynx. Don't move your Adam's apple, then you are swallowing. Leave your throat alone. Work with your tongue. The air goes down automatically
-Susan Armbrecht, Ohio

I close the back of my throat, just as one does when he pretends to have a cold in the nose
-Sally Van Der Kar, New York

We used a hand bellows, the type used to pump up an air mattress. With this I was able to get the feel of air in my throat and enough pressure to close my larynx against.
- Don Parker, Oregon



It was first a gulp then a taste
-Lowell Weissert, Indiana

Try to scratch an itch on the back of your throat with your tongue so that you almost gag (SKIP the roof of your mouth)
-Susan Armbrecht, Ohio



CASE STUDY NO. 1. When Mrs. X was admitted to our hospital at the age of 31 she was completely paralyzed with polio one month after the onset of the illness. About 4 months later GPR instruction was started; 3 months later the patient had learned the technic. In 10 months she could breathe over 7 hours in one stretch. The patient was put on a schedule of $3\frac{1}{2}$ hrs twice a day with shorter periods for care as needed. About $1\frac{1}{2}$ years after onset of the disease, the tracheotomy was repaired, since she could now cough up her own mucus adequately. Now she is at home. She is pushed about in her wheel chair for her weekly visits to the food market. She is a regular attendant at church and parent-teacher association meetings.³

Try to make believe
you are blowing up a balloon.
then follow through with the
motion of dropping the
throat muscles
-Bill Woodworth,
Massachusetts

I learned by
continuously clucking
my Adam's apple
until I obtained a
steady rhythm
of teking in air
-Tony Mathews Jr,
Georgia

On my imaginary straw
I take a big swig
of a yummy, thick,
chocolate milkshake
-Peggy Shofstall,
California

You have a big orange
hanging in front of your mouth.
Reach out with your lips
and get it in your mouth,
then move it around
and then swallow it.
-Carol DeVaney, California

As you gulp, hold your breath.
It closes off the throat and keeps
the air from escaping.
Once you learn to do it
the holding of your breath
doesn't seem to come to mind.
-Jim Ross, California



*DRAWINGS BY BASIL GREENYAR,
SOUTHAMPTON, ENGLAND*

CASE STUDY NO.2 "I had polio in 1949 and learned to breathe with my neck muscles out of necessity for nursing care. Fifteen months after the onset of the illness I could "neck breathe" about 3 hours, but I noticed when I needed to call, I would gulp, gulp, gulp. In 1954, I was transferred to a Rehab. Center. It was noticed that I could frog breathe and they helped me develop it to a V.C. of 1300 cc." Ruby Heine, Nebraska

CASE STUDY NO.3 "For a long time I have been trying to put down in words a simple way to explain GP breathing. Some of you may like to try the following: Put a straw in your mouth, then suck on it, using your mouth and tongue only to make the suction. Then after each time you draw in air, put the end of your tongue over the end of the straw to keep the air from escaping. Also, I've found that the front part or the tip of your tongue plays little part in GP breathing because I am able to hold

CONTINUED

SOME GPB "CLUES" FROM AN EXPERIENCED TEACHER

Following are excerpts from a letter by Miriam Zumwalt, R.P.T., Rancho Los Amigos Hospital - one of the country's best-known GP teachers.

●● As a result of our experience in teaching over 400 patients and about an equal number of normals, one point has become very clear to us. There are two well defined groups among persons who learn. First, those who learn quickly by mere imitation and, secondly, the group who must be taught. Those in the first category usually learn no matter who demonstrates or explains the process. The clues are many, -- a different one for almost every patient!

"There are two important "clues" that if followed, increase the percentage who learn quickly. 1. Take a large breath and hold it while practicing the stroke.

2. Be sure to pull the back of the tongue far down into the throat on each stroke.

"But the persons who do not learn easily or quickly must be taught. This group must be trained in detail to perform certain movements or they go on years without learning. We have used several approaches to teaching. Recently I gave instruction to 99 physical therapy students in order to evaluate two methods.

"Clinical experience has demonstrated that a larger percent learn if given a noise and definite movements to imitate. In fact I do not agree that there are those who can't learn unless, of course, they have considerable weakness of the bulbar structures.

"There is definitely no correlation between intelligence and ability to learn GPB. But there is close relationship between muscular coordination and the ease with which it is mastered. ●●

FROG BREATHING CONTINUED

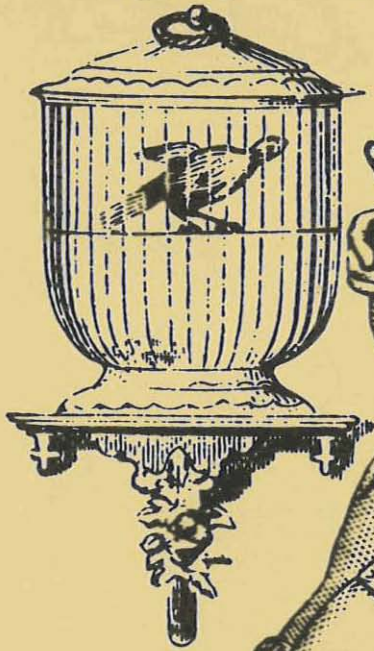
my tongue between my teeth and, with my mouth closed, pump in air through my nose. This is a more advanced method, but it might give someone the clue." John M. Dennis, Colorado. ●●●

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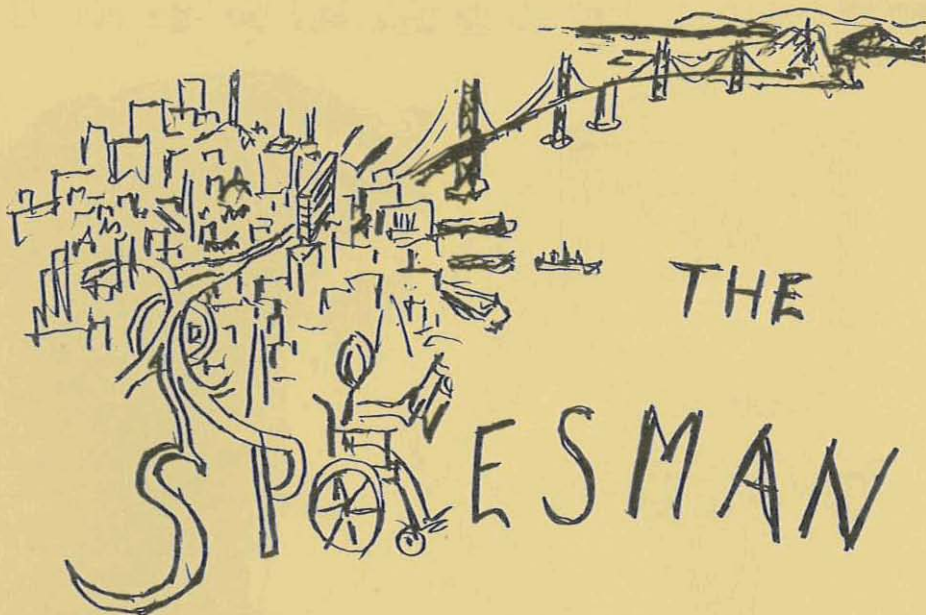
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The SPOKESMAN

SPECIAL SUPPLEMENT TO TJG • SPRING 1960



TJG PROUDLY
PRESENTS THIS
SPECIAL 12-PAGE
SUPPLEMENT
BY BAY COUNTIES
(SAN FRANCISCO)
POST-POLIO
ASSOCIATION



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EDITORIAL

The following pages will introduce our newsletter. Change the format to regular letter style, add a few ads, meeting notices, etc., and you are our guest.

You are asking, "Why is this little paper included in a quarterly such as TJG?"

We were both stunned and flattered when invited to contribute. It said on the cover that it was a "leisurely quarterly" so what could we lose?

It has been a grand opportunity to learn first hand the mechanics of getting out this finest of post-polio quarterlies. We believe the word "leisurely" can apply only to the readers.

A MESSAGE FROM THE EDITOR

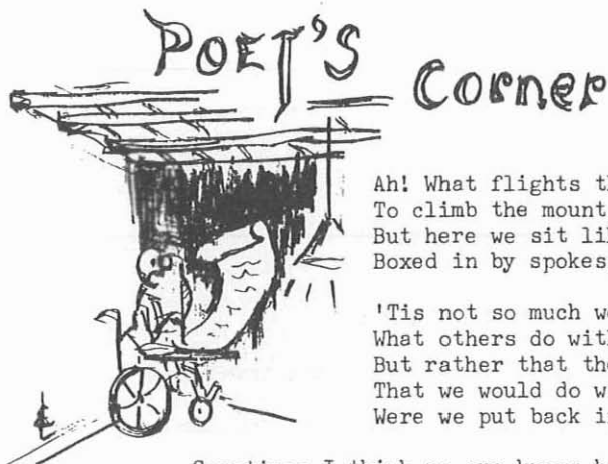
by CHARLES LYSER

Did you see the "Bulletin Board" in the last issue of TJG? It read "EYE BANK" - "Have you considered donating your cornea for post-death transplant to restore sight to blind?"

Last night's paper tells of a 36 year old man being able to see a TV showing of his own successful cornea transplant. The same article concludes with this sad commentary on society's thoughtlessness: Medical scientists estimate that as many as 25,000 people in the United States today could benefit from a corneal transplant, were there sufficient donor eyes."

Each of us has to go sooner or later. Almost everyone, on departing, could have previously willed his eyes that another might see. Why aren't the eye banks filled to overflowing? It costs nothing; there is no cosmetic difference at the funeral.

We Respos have been helped by our fellow man in the amount of literally thousands of dollars for our individual care. How can we ignore an opportunity for curing another's disability when it costs not one thin dime?



POET'S CORNER

Ah! What flights the fancy takes,
To climb the mount, or roll on skates,
But here we sit like fruit in crates
Boxed in by spokes, held down by weights.

'Tis not so much we cannot do
What others do with ease and grace,
But rather that there is so much
That we would do with better touch,
Were we put back in our old place.

Sometimes I think no one knows how
But I, and yet I can't allow
The fact that were I back again,
I too would bow to others when
They deftly through a task do plough.

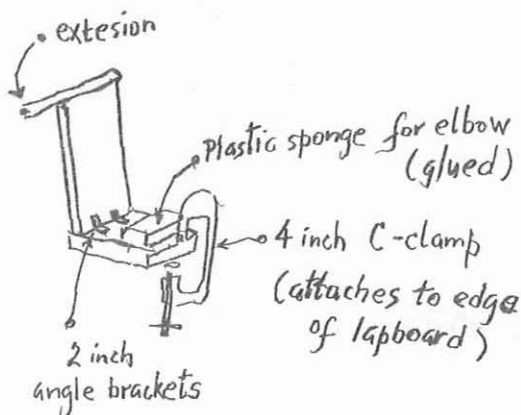
So please forgive our lack of patience
And help us do that which we can,
While we in turn attack with vengeance,
A fruitful life with fellow man.

by Emmanuel Leplin

ARM REST (A handy gadget) By E



for those with only limited wrist and finger movement - for holding cigars, pipes, straws (long) and sandwiches (light) - and/or anything else you dare, such as a 5 lb. turkey leg.



GADGETERIA

(Cleanings from Equipment Editor Dick Smith's invaluable department)

ELECTRIC SOCKS: Sizes 10 to 12. Small batteries and case.

WRITING BOARD FOR ONE HAND: Two small magnets hold paper in place. The paper is easily removed.

SPORK: Combination spoon and fork for one hand use. Well balanced to serve for solid or liquid foods.

WHEELCHAIR HANDY TRAY: Makes wheel chair more convenient. Clamps to either front vertical bar of chair. Height is adjustable.

CLIP ON FOOD GUARD: Designed for those with limited hand function. No more food spilling over. One inch high guard clamps to side of plate.

ONE HAND SHUFFLING MACHINE: Simply turn the handle and cards are shuffled thoroughly.



EMANCIPATION RAMP. A simple, easy-to-make gadget which has proved indispensable to the fortunate few who are able to stand and walk ever so slightly.

The chair is rolled up the slight incline until the rear wheels roll into slight depressions in level section. The chair is now steady. This respo is now ready to stand or walk without assistance.

Ramp stands on end when not in use, taking up little space. Non-skid strips are a must.

Any handy man can construct this using 1/4" 3-ply for the runways which are set in grooved 1" board as per photo. For blue prints, write Chas. Lyser, 717 Liberty St., El Cerrito, Cal.

NEW PORTABLE RAMPS:

Aluminum Ramps. Lightweight, portable, adjustable. "Travel Tric" Trio - curb, car and stair ramps. Write for brochure and prices: Shaw's Travel Tric, Inc., 601 Kingwood, Brainerd, Minnesota.

Fibre Glass Ramp. Lightweight and portable. Folds up to store in car trunk. Permanent new look. Roll it where you want it. \$139. Shipping weight, 50 lbs. Handicaps, Inc., 4345 So. Santa Fe Drive, Littleton, Colorado.

FEATHER TOUCH CHIN SWITCH: A remote control switch is placed around the patient's neck. The slightest movement of the chin will activate this device and turn ON and OFF any appliance to which it is attached.

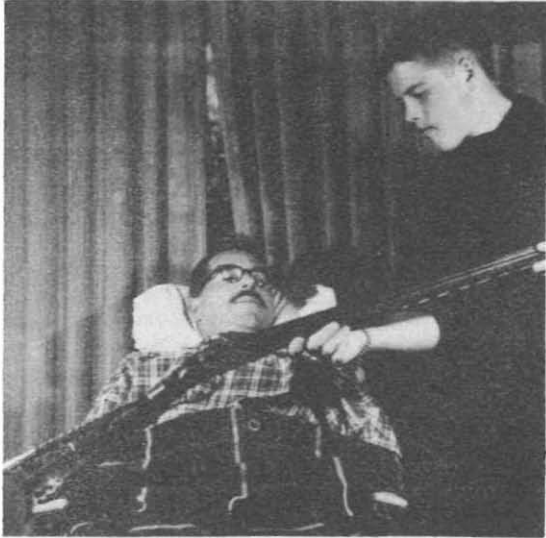
REMOTE CONTROL SWITCH: Plug in this master switch and leave it. Push on button turns off or on any electrical appliance.

ELECTRIC SCISSORS: Feather light and used in either hand. Enables one to cut light or heavy material all day without fatigue. A.C. only.

ELASTIC SHOELACES: Slip shoes off without untying. Yes, slip them on too without tying.

SAFETY TREAD STRIPS: Abrasive coated strips and sheets that come coated on the non-abrasive side for simple application to strategic spots in the house, or on walks and ramps.

(The gadgets above and on opposite page are available from:
Fascole Corporation, 229 Fourth Ave., New York, 3, New York)



Hobby - collecting old guns with son

In 1955 my physical therapist, Eugene Fleming, and I had the brilliant idea that a mail order business for rehabilitation equipment - grab bars and all sorts of helpful gadgets would be of value to post-polios and other orthopedically handicapped patients.

We hoped, in addition, that it would be profitable for us. We were unable to find any similar enterprises and felt that this might be a new and fruitful field.

It took about a year to correspond with all the different manufacturers of appropriate items and to obtain their authorizations, photographs of their equipment, etc. Then we planned our catalog.

This is where we made our first mistake! We felt it was important to present a catalog on good paper and with good reproductions. We should have been satisfied with a much cheaper paper and printing process - perhaps multilith.

A good mailing list is of essential importance in an enterprise such as this, and we found innumerable obstacles in trying to obtain a list for our particular purposes. None of the organizations such as the National Foundation were able to supply any names as this was regarded as private information. Such an attitude was obviously correct, but made our problem very difficult. Accordingly, we gleaned names from patients we met, from respirator center newsletters, from appliance salesmen, and from any source we could think of.

Our first mailing of about 1,500 catalogs went out early in 1957 and the returns were quite disappointing. We had hoped to receive orders for large items such as wheel chairs, rocking beds, lifts, etc., but our biggest item by far proved to be Sta-Dri panties! After postage and correspondence, our profit on this item was less than \$1.

MAIL ORDER BUSINESS

The usual percentage offered by manufacturers is 40%. This is great when the item retails for \$200 or \$300, but when the business turns out to involve items that sell for \$2 or \$3 or less - well, our dreams of a personal yacht for each of us rapidly faded!

Of course, during this time, there were two or three other large, well-financed outfits that published catalogs and were able to engage in real publicity jobs. And, in addition, during this time Mr. Fleming's office was getting busier and busier and my practice was getting busier and busier, so that we had less time to devote to the mail order business. We should have been sending out circulars and promotion letters, getting new mailing lists, etc.

We are still in business and we still get trickles of orders - really not enough to support the business, but we are still trying to recoup our original investment. I think that the mail order is still a good business for a disabled person and money can be made, but most of us do not have a large reserve to risk, and one has to remember that if the business is successful - it will attract competitors, often with a sales setup already established and reserves enough to squeeze the little man out.

We have gathered from our own experiences many helpful suggestions which we would be happy to pass on to anyone who is interested in starting a mail order business.

- Duncan A. Holbert, M.D.

(Dr. Holbert has built a wheel chair medical practice, specializing in allergies. This practice requires few urgent calls, no bedside visits. As an allergist, Dr. Holbert needs no hands, examines patients, interprets lab reports, makes diagnoses, etc.)



Examining patient with assistant

"HAVE TRANSMITTER - WILL YAK"

After living with polio for six years, two of which were spent in an iron lung and almost four in the hospital, I found myself at home with time on my hands and only myself to talk to.

Then, miracle of miracles, my minister was transferred to Vancouver, B.C., and he, being a "ham radio operator," suggested that I look into the fascinating hobby of "Ham Radio."

I contacted the nearest electronics store and picked up a copy of "The Radio Amateurs License Manual." This gave me a list of questions and answers on radio theory. So far so good, but I still had to send and receive 5 wpm (words per minute) for the novice examination and 13 wpm for the general examination.

Word was put out over the ham bands about my burning desire to become a Ham Radio Operator. It wasn't long until my telephone rang and I found myself talking to a real, live, honest to goodness ham - W6KWT. My first remark, after hello, was, "Oh Frank, I want to be a ham so bad I could die!"

He took me at my word and the next three weeks sent me code practice over the telephone. I talked, ate, slept, and dreamed in code. Imagine waking up in the morning only to be greeted by a cheery voice saying, Dah Dah Dit, Dah Dah, short for good morning.

I passed my novice examination on December 23rd and my general examination the following April 26th. The Federal Communications Commission issued me my station license, call letters, K6LPH - phone speaking K6 Little Power House.

Sink or swim, I fired up the rig and called my first "CQ" (being rather self-conscious of my extreme respiratory

voice, I was taken by surprise when various hams broke in wanting to meet the gal with the sultry, sexy voice). Nine hours later I signed off from my first phone QSO.



There is never time to be lonely. Besides handling emergency and non-emergency messages for friends and relatives, I help others obtain their ham licenses and I am teaching the Morse code to my Cub Scout Den.

- Pat Faria

CAREER

From where I sit, (and I do all the time) the hardest person to convince about this job business, was me. "After all, girl, I'd say to myself, what can you do?" and this would about end the conversation:

Many thoughts later I says, "How about commercial art?" (still talking to self and a few friends). At which point my unofficial counselors chimed in... "They don't like women in the advertising field!" or "Too competitive" or "Training is awfully expensive!"



It was then I knew I'd try to be a commercial artist. The schedule was a steep one - 1 year lost in the iron lung....4 years to rehabilitation....2 years of working at home and going to night school....3 years of art school and here I am. Not so young any more, but nevertheless, employed as an artist in an advertising agency... working an eight hour day (sometimes ten) and a five day week (sometimes six).

Mom drives me to work on her way to her own job with the American Express Company and the freight elevator takes me up to the composing room where the art director and two of us gals design things that make you want to buy something you might not need, but just so the old money keeps circulating.

Am I satisfied, you ask? Well, almost, but the following years hold an even heavier schedule. I like to think I'll get married, buy a home (designed for me) and do free lance work at home to pay for all the things that I buy because I saw an ad that said I needed it.

The object, if any, seems to be...keep busy enough and you won't notice that you are different.

Or...if you can remain calm amongst all this chaos, you just don't understand the situation.

- Faith Bunting

TRAVELOGISTICS

(Jerome Sills has a busy law practice in Hayward. He tells here some of the mechanics of his trip to Hawaii).

The travel agency arranged a choice of two airlines for the trip over, either of whom would carry my special equipment free and without any weight limit, in addition to the regular luggage allowance. In addition to wheel chair and sliding board, I took my Hoyer lifter and commode chair. I went via Pan American because their schedule fitted my plans. It was a night tourist flight.

They put my attendant and me aboard before the other passengers, using a fork lift. It was a huge double decked plane, with one male steward and two stewardesses. They put me in an end seat where I could prop my legs on a pillow-covered box. I had previously dehydrated myself in anticipation of a long flight, and the eight hours passed routinely. They were expecting me in Honolulu, and I debarked by fork lift after all the other passengers were gone.

The Reef Hotel was selected as convenient for a wheel chair, and it was. The stay in Honolulu was similar to that in any interesting city. It is a crossroads for Pacific travelers, and many fascinating people were met at the hotel.

The return trip on the Lurline was a pleasant voyage with one day of mildly rough water. Although a number of passengers got seasick in spite of Dramamine, I was fortunate to escape it, although my stomach did feel mildly sad at intervals. The ship accommodations are adequate for wheel chairs, except the toilets in all the staterooms are too small to get into, let alone to maneuver. The public ones are better. The service on board is excellent. We had a good cabin steward who would bring us meals or snacks at any hour.



On the whole, there were no special difficulties encountered during the trip, possibly because the advance planning had anticipated most problems. It is always helpful to let people know in advance so they can be prepared to assist.

- Jerome Sills

GETTING TO KNOW YOU.....

Roger Lappin is in his late teens and is now staying at Fairmont Hospital and attending classes at Junior College. He has been totally paralyzed from polio since early childhood, sleeps in a "tank" at night and uses a chest piece or positive pressure aid during the day.

His mother and brother, with whom he lives when home, have an antique shop in an older section of Berkeley and have been recently specializing in shops of that nature.

Roger doesn't care too much for mathematics but is a whiz in English. He has a reading knowledge far beyond his years and enjoys both deep and the light in music.

With his appreciation of good literature, his imagination and fine brain, we can accurately predict a long and successful career as a writer. Good luck, Roger.



Bill Sparks began his studies on two legs at the University of California and eleven years later finished with high honors on two wheels.

Getting around the campus in a wheel chair presented many problems which Bill solved so well that he decided to continue his studies and won a scholarship at Boalt Hall, the law school.

Bill lives with his father and his sister and has a special room and ramp. He is a member of Phi Delta Phi, the legal fraternity.

He enjoys reading philosophy and listening to serious music and has a particular enjoyment in playing his Russian folk music records.

The Shearing of Lady de Larde



By Barbara Havelaar

In days of old when nights were cold
And ladies wore high-necked dresses,
A warrior bold, so it's been told,
Cut off a lady's tresses!

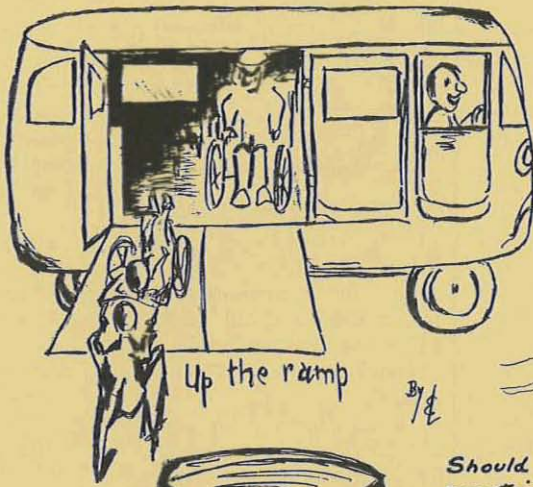
Case went to court, or a place of that sort,
Where even the lawyers did grin,
Not at the knight, or thought of his plight,
But at the baldness incurred by the sin!

The court called witness upon witness
Who were obliged to state
The damsel there, though once had been fair,
Now blinded the court with her shiny pate!

They called the doctors, and then the lawyers
All of whom did agree
The Lady de Larde had had her beauty marred
By the knight Sir Reggie McPhee!

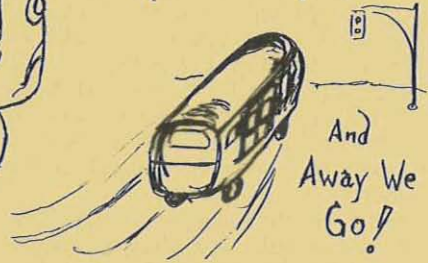
The jury deliberated, discerned and debated
And finally decided the case,
There was clearly a need to pay for his deed,
And that was the end of the case!

Sentence pronounced and to public announced
That the knight had met his due,
And would pay for his crime in manner sublime
By replacing each hair with glue!!!



THE WHEELNIKS

(Penn and Leplin)



Safety
Installed

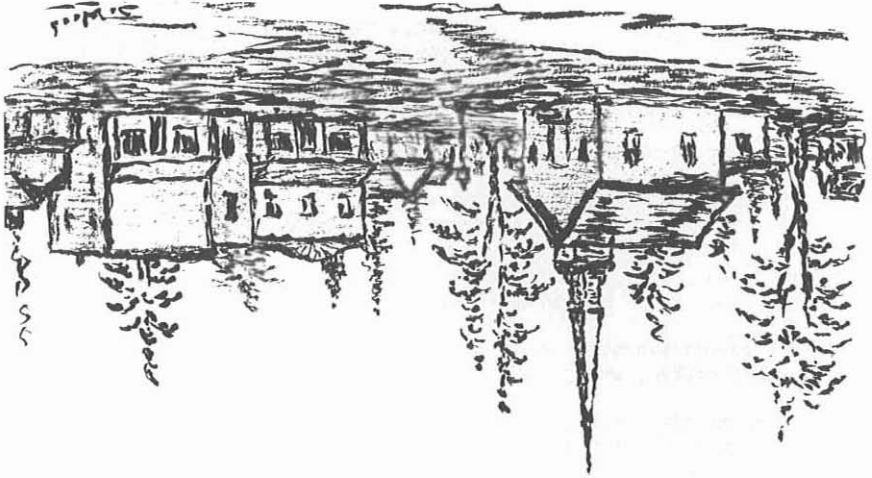


Should you live in California and sometime look streetward to see the "Wheelniks" and their apparatus being unloaded in front of your home, don't lose your breath; it's merely Penn and Leplin dropping in for a visit. They'll engage you in a three man chess game, share their delicious lunch and enjoy cigars afterward. They're gone, man, gone!

"Manny" Leplin, whose drawings appear above and throughout this issue, is totally disabled except for slight finger movement. "Slight of hand" magic describes the results of his fabulous accomplishments, namely painting in oils, composing various musical works, including symphony and quartet, and - from the sublime to the humorous - cartoons.

Bob Penn of San Mateo is a respo of near total involvement. He is a physicist who has been unable to continue his career but coaches in related subjects and manages an extensive magazine subscription service. Last summer Bob received an order for "Time" from Papeete, Tahiti. Soon after a friend paid him a visit, informing him he was on his way for a vacation in Tahiti. Zealous in his duty for service to subscribers, Bob suggested that his friend drop in and deliver the first issue. Bob's friend soon was on his way to the South Seas where he personally gave the "Time" to a very flabbergasted but pleased new client.





township hall
 chargin falls, ohio
 may 28 thru june 5

first international exhibition
 of
 paralyzed artists
 featuring mouthstick painting
 t.p.g.
 presents

An art show for paralyzed artists was born of a sincere conviction that the handicapped had much to contribute to the world of art. The galleries, the art market are inaccessible to him. Isolated as he is, he has no place to show, no outlet for encouragement.

What mulled as an interesting idea for a year suddenly flamed into an exciting venture. What sparked the flame was a neat little bundle of enchanting watercolors. Finland was their postmark. Four little children, whose home is a hospital, were the creators. International scope gained momentum with a second surprise bundle. England was its mark and a former ballerina its artist. Elizabeth Twistington Higgins spirited our hopes with eight studies of the ballet, small oils depicting the dancer's movements in space. Exquisite little sun-bathed landscapes of Nairobi followed. The deft brush of Ian Bompas captured a very special atmospheric quality of African light. The contribution of Sweden's Ake Humohr was dynamic. Rugs so rich in texture and color, so superb in craftsmanship, so contemporary in design. Striking black and white woodcuts of Nova Scotia's Earl Bailly broadened the horizons of diverse skills.

Our own country's wide range of media - cartoons, collage, delicate pencil portraits, oils - avalanched upon us during the last weeks of entry. These uninhibited, adventuresome artists from Tennessee, Arkansas, Colorado, Kansas, Kentucky, Michigan, etc. have produced some works which are sheer delight. Painted with the naturalness of the primitive, these naive productions at times startle with the correctness of their design, the textured intimacies of their narrative, which so charmingly and artlessly express the imaginative workings of the mind. Among the more sophisticated, uncharted areas of the imaginations explored were the prolific output of watercolor abstractions of West Virginia's Bob Reynolds. Humor and sophistication were delightfully felt in Emmanuel Lepplin's San Franciscan watercolors.

From this show, who can predict the outcome? Perhaps for some, recognition will come, for others encouragement, and for all, pleasure. The State Department has worked hard at the exportation of culture. The results have been a "blight over the arts, making cultural relationship forced." Our first international paralyzed artists show has achieved something in which our State Department has failed - a natural, real cultural communication.

Martha B. Scott

MERLE CHISHOLM. (See Cover). St. Paul, Minnesota. Graduated from the Minneapolis School of Art, worked as fashion illustrator and free lanced, married a commercial artist. In 1952 polio struck.



"After paralysis, somebody showed me some notepaper done by mouthstick which encouraged me to try anew. At first, I was extremely disgusted and frustrated.

"I think the fact that I was an artist before made my art work rehabilitation more difficult because I could not come anywhere near my former standards.

"As time went on, my drawing improved a great deal. After a year or so, I produced my first Christmas card. I was beginning to feel that I wasn't through with art after all. I now have a Christmas card business of 10,000 a year.

"As long as I can remember I wanted to be an artist."



EALON LAMPHIER, Navy Veteran, stricken with polio at Pearl Harbor in 1950. Student of Famous Artist School, Conn. Has sold more than 50 paintings. Had one-man shows at Medina Art League, Hale's Restaurant in Medina and Maharas Restaurant in Cleveland. Lives in Seville, O. in a rest home. Does large scenic oils with a painting knife held between his teeth.

IAN BOMPAS, Nairobi, British East Africa. Paints African scenes with a mouthstick. Plays bridge and chess. Has sold many paintings, presented one to the Queen Mother. Designed a Christmas card for the Disabled Society of Kenya. Travels in his D.K.W. van in the National Game Parks. Sleeps in iron lung at night.



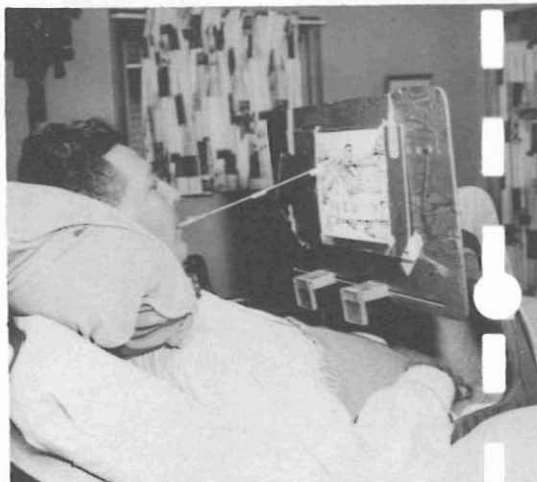


A. WILSON WOOD ("BILL"),
Cleveland artist.
Polio 1954.
Discovered his interest and
ability to paint
while still in the hospital.
Holds brush in teeth.
Practising attorney
at the Central National Bank.
Lives at home with his
wife and children.



JIM WOOD ("BIG JIM"), Charlotte, Mich.
Father of seven children.
Before polio, worked for the
Michigan State Highway Department.
Writes exciting adventure stories.
Turns out quantities of
mouthstick decorated note paper.
Also does some sketching
and painting.
His art and gift shop
specializes in foreign imports.

(One of Jim's drawings is
reproduced on page 19.)



ROBERT J. REYNOLDS, artist of Kanawah Valley, West Virginia
Member of Allied Artists. His work has been shown at the Civic Center,
the County Library and Coyle and Richardson's.

His interest in art dates back to high school when he won gold keys for
state and national contests. He studied art in California and architec-
ture at the University of Cincinnati.

He was stricken with polio seven years ago. (He is married to his O.T.)
His oils and watercolors are painted with a slight finger movement aided
by mechanical arm weights and an electrically rotated easel. He is one of
the most prolific painters of this show.



ELIZABETH TWISTINGTON HIGGINS, daughter of a Kent surgeon. Her studio is a hospital room with a view of the cliffs of Dover. A graduate of Sadler's Wells Ballet School. Before polio, six years ago, she was applauded by London as a rising ballet star. East Kent Art Society showed her work. Had a one-woman show in Dover. Ballet dancers, flowers, and still life are painted with a brush held in her mouth.

GLEN FOWLER, Beverly, Mass. (Pictured with Norman Pockwell) Married, lives at home. Paralyzed after automobile accident, spent 5 years in hospitals. During this time, learned to draw with a pencil in his teeth. Won a scholarship for Famous Artists Course, which he completed in three years. Has sold many paintings. Had a one-man show at the Capri Theatre in Boston. He was among top ten in National Christmas Seals Design Contest. This year won First Prize in PVA National Employ the Handicapped Poster Contest.



BURTON H. FERN, M.D. Stratford, Connecticut. Pediatrician. Active practice halted due to polio in 1955. Now doing medical research and writing. States he would like to be another Van Gogh but lacks the courage to cut off an ear. Paints with mouthstick.



FINNISH CHILDREN. These totally paralyzed children in Finland, who use mechanical breathing aid, paint beautiful miniature watercolors with mouthsticks. The hospital, in which they and the adult patients live, is their government-supported home for life. Mirjam Jokinen (girl, 13 years old), Kaija Poytakivi (girl, 11), Tuomo Viherlehto (boy, 3), and Timo Ristekallio (boy, 7).



ROY CARY, Denver, Colorado.
 Encountered polio in 1952.
 Paralyzed from the neck down,
 uses a chest respirator.
 Young bachelor,
 ex-lineman (REA),
 paints with a brush
 taped on a wooden tongue depressor.
 Has contributed to the Art Show some
 floral studies
 in vivid watercolors.

DONNA McGWINN, Cleveland, Ohio,
 is a writer
 and studying via
 correspondence with the
 University of Chicago.
 Uses full time
 respiratory aid.
 Will give a
 demonstration
 at the Art Show
 of her method of
 painting watercolors
 with brush taped to
 big right toe.



EARL BAILLY, Lunenburg, Nova Scotia.
Polio since childhood. Started
to paint with a mouthstick at a
very early age.

Works on lino blocks with a
chisel in mouth and does oils with
a brush in mouth.

Has exhibited in Montreal, Toronto,
Philadelphia, New York, Boston, and
Palm Beach.

Was presented to the King and Queen
when they were in Halifax in 1939 and
to Queen Elizabeth and Prince Philip
during their Canadian tour.

One of his paintings is hung in the
National Gallery at Ottawa.

Hallmark has sold his paintings on
Christmas cards.

He works in his studio gallery in
the seaport town of Lunenburg.



MICKIE MCGRAW, Cleveland, O.
Has been a respiratory polio
since her early teens.
Lives with her parents and a sister.
Her works in mosaics,
collage and design
are outstanding.
Has been studying art at home and
hopes to study art full time.

EILEEN MARTIN,

Louisville, Kentucky. Her bout with polio in 1954 resulted in the loss of
all movement except in one arm from elbow to hand. She is married and has
one child. Many of her cartoons and poems have been published in the TJG.
Her poetry and drawings show an unusual sense of humor.

IRENE RIDGEWAY,

Downey, California. Polio in '48 left her totally paralyzed, dependent on
an iron lung at night. Now, after 11 years of hospitalization, she has
her own home and makes a living for herself creating Christmas cards and
oil paintings. One year she sold 95,000 of her mouthstick-sketches cards.
Her art work is entirely post-polio and shows a sensitive quality



DONNA GRAHAM,
University of Alberta Hospital, Canada
Donna was a nurse in Alberta when a little Eskimo girl was flown down from the Arctic. The child had a combination of T.B., measles and polio. Donna nursed her through her worst crisis before she too was stricken. The little girl has recovered. Donna is completely paralyzed, breathing fulltime with mechanical aid. She paints with a mouthstick and has designed many charming Christmas cards.

JIMMY RODOLFOS,
Woburn, Massachusetts.
His wife is a
wheelchair polio.
Paralyzed as a result of a
diving accident.
Paints large oils
and watercolors
with brush held
between his teeth.



CLARENCE BRINEGAR,
Solsberry, Indiana.
Polio at age 12.
Paints with left hand,
his arm supported by
over head sling and
balanced arm tipper.
Won blue ribbons
for paintings in
Green County Fair and
Monroe County Fair.
Now taking a 3-year
correspondence
course in art.





PETER NELSON SPENCER, Wallasey, Cheshire, England.
 Was a pilot in the R.A.F. Transport Command in 1939-45 War.
 Right arm amputated at the shoulder, left arm paralyzed.
 Member of the International Association of Mouth & Foot
 Painting Artists. Married in '51, one son aged two.
 Keen on portraits and still life.
 Works with oils, holding brush in his mouth.

and

Margaret Anderson (Minnesota)	Ake Humohr (Asbysand, Sweden)
Susan Armbrecht (Ohio)	Mirjam Jokinen (Helsinki, Finland)
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these artists' photographs and stories will be shown with
 their works at the Art Show.



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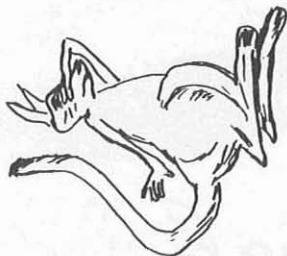
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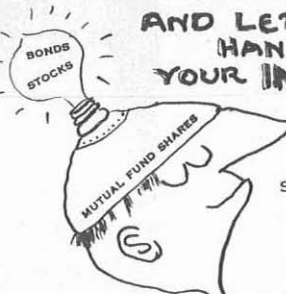
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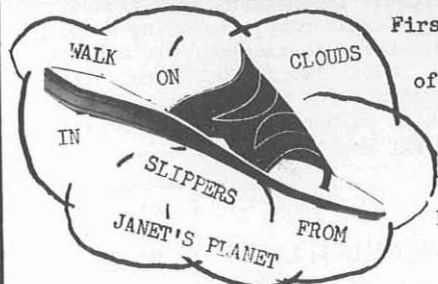
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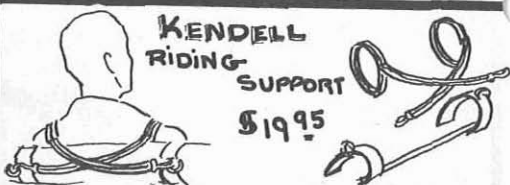
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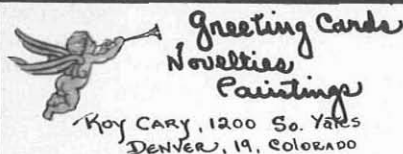
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