

Could a pill help MS patients walk again?

Scientists have developed the first pill to help multiple sclerosis sufferers walk properly. The twice-a-day tablet boosts leg strength and significantly increases walking speed.

Multiple Sclerosis affects an estimated 85,000 people in Britain.

The disease appears to be caused by a chemical found naturally in the body called interferon gamma.

Under normal circumstances this helps to activate the immune system to attack foreign invaders, such as viruses and bacteria.

But, for reasons that remain unclear, interferon gamma can also cause the immune system to turn against the body it is supposed to protect. As a result, the immune system goes into overdrive, attacking nerves in the brain and spinal cord.

Gradually, the protective coating that shields these nerves – called the myelin sheath – starts to break down and the transmission of signals between nerve cells slows down and becomes irregular.

With the nervous system being destroyed, the first symptoms to appear are usually a loss of balance, blurred vision and bouts of paralysis.

Within 15 years of an MS diagnosis, 50 per cent of patients often require assistance walking, and in later stages up to a third are unable to walk at all.

There are drugs that can slow the progression of the disease. However there is no treatment to restore a patient's lost mobility.

The new drug, called Acorda, which has been undergoing tests for several years, works by improving the way damaged nerve cells send signals to each other.

Each nerve cell has a very short protrusion called an axon that it uses to send electrical signals to other nerve cells throughout the body. Most axons have a covering of myelin that acts as insulation to preserve and speed up signals. (This is similar to the way the insulation cover of an electrical cord helps preserve the transmission of electricity.) However, if the myelin is damaged, potassium ions can leak out of the axon.

These ions are important because they help to conduct the electrical current in the nerve signals. Once they escape, the current becomes weak, and the messages to the body's muscles and limbs do not get through.

In tests, Acorda has been shown to prevent the escape of potassium ions and help electrical signals to pass through areas of damage.

When researchers at a number of hospitals in the U.S. and Canada tested it on 240 MS patients, they found 43 per cent showed a significant improvement in walking speed over a two-month period.

They measured this by checking how long it took each one to walk 25ft. Those who responded to the drug took 25 per cent less time than they did before they were put on the medicine.

Separate tests showed that many patients scored better on leg strength tests too.

However, the drug does not slow down the progression of the disease and can have side effects such as urinary tract infections, insomnia, headaches and nausea.

Acorda Therapeutics, the U.S. firm which made the drug, plans to apply for a licence in the U.S. then Europe. It means the drug could be available in the UK within the next two years.

'This new research is exciting news,' says Laura Bell, research communications officer at the MS Society. 'MS can severely affect people's mobility and, in turn, their sense of independence.'

'We would welcome any drug that is proven to help with walking disability and allow people with MS to regain some of their freedom.'

Small study shows caffeine could help prevent MS

A small study published in the Proceedings of the National Academy of Sciences journal has shown that mice given the equivalent of six to eight cups of coffee a day were less likely to develop a condition similar to multiple sclerosis (MS).

It is hoped that this type of research could lead to insights into how to prevent MS in humans. MS is caused by immune cells entering the **central nervous system** (CNS) and attacking nerve fibers. The research reported that the caffeine appeared to prevent damage to the CNS.

The researchers used mice with an MS-like condition (called **experimental autoimmune encephalomyelitis** or EAE) to mimic the development of MS in humans. Caffeine affects the function of a molecule called adenosine, which plays a role in sleep and energy production. When mice were dosed with caffeine, changes in adenosine appeared to have an indirect effect on the ability of immune cells to enter the CNS and the mice did not develop EAE, though the precise reason this happened was not clear. The researchers used mice with an MS-like condition (called **experimental autoimmune encephalomyelitis** or EAE) to mimic the development of MS in humans. Caffeine affects the function of a molecule called adenosine, which plays a role in sleep and energy production. When mice were dosed with caffeine, changes in adenosine appeared to have an indirect effect on the ability of immune cells to enter the CNS and the mice did not develop EAE, though the precise reason this happened was not clear.

Dr Linda Thompson, who led the study, said that the next step was to see if humans who drank plenty of coffee showed any signs of being less prone to MS. "If you found a correlation between caffeine intake and reduced MS symptoms, that would point to further studies in humans."

However, even if this were established, coffee might not be a good way to prevent MS. Experts recommend no more than five cups of coffee a day, amid evidence higher doses can worsen diabetes and could also be physically addictive. The Department of Health has also set a limit of six to eight cups a day.

Dr Lee Dunster, Head of Research at the MS Society was also cautious: "Over the years there have been numerous discoveries that have prevented EAE in mice but turning this into effective therapies for humans remains a challenge. Based on the results of this study, we wouldn't advise people to change their caffeine intake."

DISCLAIMER

Articles in this Bulletin are meant for the sole purpose of information only and do not necessarily reflect the views of the committee.

NHS failing people with MS

A report published today by the Royal College of Physicians (RCP) and the MS Trust states the NHS is failing people with multiple sclerosis (MS).

The report identified that the estimated 85,000 people in the UK with MS are subject to a "postcode lottery", with access to basic services - including pain relief - a matter of geographical location.

The NHS is still failing to implement 2003 National Institute of Clinical Excellence (NICE) guidelines on the management of the condition.

An audit of services revealed that only 36% of people with MS had access to neurological rehabilitation facilities and long delays mean 50% of patients are waiting more than 20 weeks to be diagnosed after a GP referral.

Simon Gillespie, chief executive of the MS Society said: "It's vital that health services are held to account and this latest audit confirms what our 40,000 members tell us - people with MS need access to more and better care.

"The NICE guideline sets out a laudable range of care and support on paper but it needs to be backed up in practice."

North East Disability Cycling **Gateway Wheelers**

Our Mission is to enable people with disabilities to enjoy cycling,
and to give them opportunities for personal development by
providing suitable cycles, equipment and support.

We have a large selection of specialized cycles to suit different needs.

We have four sites in throughout the Northeast: Chester-le-Street, Gateshead Stadium, Lockhaugh Farm (on the Derwent Walk) and at Teeside Admiralty Ecology Centre.

We run rides every weekend and on various weekdays.

We run special rides aimed at small groups or individual members.

We aim to develop the skills and experience of both our members and volunteers.

We also aim to improve the health of our members and provide information on safe cycle routes around the North East.

Membership of the club is £4

Cycle hire to non-members is at a donation rate £10 per day.

See our website –

www.gatewaywheelers.org.uk

**For more information email:- officegatewaywheelers@yahoo.co.uk
Ring 0791 3905422 or write to Gateway Wheelers, Bullion Hall, Bullion Lane,
Chester-le-Street, DH2 2ES**

Individual Taste

Despite fears that the system could be open to abuse, the government this week made it clear that personal budgets for care are the key to providing services that people really need. Alison Benjamin reports.

The government's drive to personalise public services has moved up a gear. Following the prime minister's announcement that the extension of personal budgets - tested predominantly so far in social care - is a key plank in his vision for delivering world-class public services, health minister Lord [Ara] Darzi this week proposed to give NHS patients personal health budgets to spend as they wish on treatment.

"Our priority will be to put citizens in control," said Brown. One way that will manifest itself is, he said, by "increasing choice and introducing the opportunity of personal budgets in new areas of our public services . . . and extending their use in areas like social care and disability".

The proposals were contained in a Cabinet Office report, which acknowledges that giving people control over the money used to fund their social care has already played an important role in improving the care people receive. The report says: "When people are given control over the funds to be spent on them, they often make changes that significantly improve the care they receive: bringing support closer to home; fitting services more closely around the needs and resources of their family; and getting better value for money in the services they buy."

Slow spread

Only about 6,000 personal budgets are in operation across the UK. Their spread has been slow partly because of the difficulty local authorities have had assessing individual needs and applying a cash value to the care package they have received. But that is about to change. Within three years, councils will be expected to have mechanisms in place that will enable the 1.7 million people eligible for a personal budget to be able to get control over money spent on their support.

John Bolton, director of strategic finance for social care at the Department of Health, has allayed fears that the personalisation agenda was to be diluted, telling local authority finance officers last week that by April 1 next year, he expects everybody in receipt of a social care package to know the allocated amount of money that is spent by the council's social care department and to be informed that they have a choice to spend the money differently. Early indications from the 45 local authorities offering personal budgets show that half the people given the choice opted to keep existing services, 35% made some adjustments, such as mixing council day care services with their own personal assistant a few days a week, while only 15% went for a complete change.

Bolton told Society Guardian this week that the government has no intention of stopping anyone from ordering their care services à la carte. "It is not the case that the freedom to choose their own forms of care and support will be restricted to traditional services," he said. And he dismissed concerns about fraud: "It's a small risk, but that is already there with direct payments. Councils have to make judgments."

Evidence suggests that far from leading to a misuse of funds, giving people control of their budgets has saved public money.

A two week holiday in Spain, annual gym membership, and a car are some of the more contentious items that people in control of their budgets have already splashed out on. The most high profile case is Gavin Croft who spent £375 of care money from Oldham council on a season ticket for Rochdale FC for a fellow fan to accompany him to home matches and commentate on the action on the pitch.

Croft, who suffers from multiple sclerosis and whose vision is impaired by a degenerative

condition, recruited his companion from the supporter's internet site. Croft's wife said that allowing her husband to spend his care money in this way gave her a much-needed break. "It has been great. It gives me the only time I get off all week and I don't have to watch football in the wet and the cold," she told the Manchester Evening News. Croft said he also enjoyed going to the pub after the match with his Saturday afternoon "carer".

His decision was supported by social care minister Ivan Lewis, who said it was a "very good example of imaginative use of individual budget", and by most readers of the paper who pointed out that Croft knew what was right for him and his family more than a social worker. Yet it also prompted fears among council officers about fraud risks and inappropriate use of public money, and raised questions about whether the government should restrict freedom of choice to a range of more traditional services

Campaigners for personal budgets have welcomed the clarification, and stressed that placing limits on what people can choose to spend their money on would defeat the purpose of the exercise. "It would go against the values and philosophy of personalisation," says Peter Beresford, professor of social policy at Brunel University.

Proper system

Simon Duffy, chief executive of In Control, a social enterprise leading the implementation of personal budgets, says: "If there is a thorough and proper system in place to ensure the right person has control of the budget, there is no logical or rational basis for restricting how people should use it that reduces the efficiency of the budget."

Charles Leadbeater, co-author of a report on personal budgets by the thinktank Demos agrees: "If it were to restrict choice to a menu of what is already on offer from the authority then it would not be a full implementation of the idea. As long as it is legal, and contributes to meeting the goals of the person's support plan, people should be able to spend the money on whatever they choose."

The Demos report, Making it Personal, says there is an unstated assumption that people in receipt of state-funded care should not have too good a time at the taxpayer's expense. The attitude is that services ought to be "a bit like eating greens", it states.

"Self-directed services create an incentive for users to mobilise their knowledge and energy to generate better outcomes for themselves, and in the process they make the social care system more efficient and generate more value for money for the taxpayers," says Making it Personal, which reported a 10% reduction in social care spend among 102 people who adopted personal budgets.

In Essex, for example, a personal budget-holder with serious respiratory problems that kept her in hospital for three months a year, had air conditioning installed in her house - an adaptation that neither direct payments nor traditional services would have paid for. As a result, she has not been back to hospital, making savings to social care and the NHS.

In addition, a separate evaluation of almost 200 people receiving personal budgets across 17 local authorities found that the majority reported improvements in their quality of life, taking part and contributing to their local community, and in their personal dignity.

For Bolton, the biggest challenge is for local authorities to come up with a fair way of allocating money to service users. "Local authorities have to devise a fair resource allocation model which has to be clear at the outset the money available," he says. "Only one or two are close to cracking it."

Beresford says there is a danger that people won't receive their full entitlement. "Local authorities' overhead and administrative costs of running services will not be passed over," he warns. "We need new accounting methods." He also argues that personal budgets must be accompanied by an infrastructure of support because not everyone is able or willing to take on board the responsibility of managing their own budget.

Bolton accepts that the low take-up of direct payments since 1997 has in part been due to a lack of support in helping people to employ their own personal assistants. But the first step towards truly personal social care, says Bolton, is for council transparency over what is currently

spent. "People say to me, government does not tell me what to spend my benefit money on, so why should social care payments be any different?"

YOUR JOKES

Prepare now for the Beijing Olympics - Learn Chinese in 5 minutes

That's not right	Sum Ting Wong
Are you harbouring a fugitive?	Hu Yu Hai Ding
See me ASAP	Kum Hia Nao
Small horse	Tai Ni Po Ni
Did you go to the beach?	Wai Yu So Tan
I think you need a face lift	Chin Tu Fat
I thought you were on a diet!	Wai Yu Mun Ching
It's very dark in here!	Wai So Dim
This is a tow away zone!	No Pah King
Our meeting is scheduled for next week	Wai Yu Kum Nao
Staying out of sight	Lei Ying Lo
He's cleaning his automobile	Wa Shing Ka
Your body odour is offensive	Yu Stin Ki Pu

An old man in his mid-eighties struggles to get up from the couch then starts putting on his coat. His wife seeing the unexpected behaviour, asks, "Where are you going?"

He replies, 'I'm going to the doctor.'

She replies, 'Why are you sick?'

He says, 'Nope, I'm going to get me some of that Viagra stuff.'

Immediately the wife starts working and positioning herself to get out of her rocker and begins to put on her coat.

He says, 'Where the heck are you going?'

She answers, 'I'm going to the doctor too.'

He says, 'Why, what do you need?'

She says, 'If your going to start using that rusty old thing, I'm getting a Tetanus shot!'

Japanese Banks

Following the problems in the sub-prime lending market in America and the run on Northern Rock in the UK, uncertainty has now hit Japan.

In the last 7 days Origami Bank has folded, Sumo Bank has gone belly up and Bonsai Bank announced plans to cut some of its branches.

Yesterday, it was announced that Karaoke Bank is up for sale and will likely go for a song while today shares in Kamikaze Bank were suspended after they nose-dived.

While Samurai Bank are soldiering on following sharp cutbacks, Ninja Bank are reported to have taken a hit, but they remain in the black.

Furthermore, 500 staff at Karate Bank got the chop and analysts report that there is something fishy going on at Sushi Bank where it is feared that staff may get a raw deal.

OLD GEEZER STORIES

An elderly gentleman had serious hearing problems for a number of years.

He went to the doctor and the doctor was able to have him fitted for a set of hearing aids that allowed the gentleman to hear 100%.

The elderly gentleman went back in a month to the doctor and the doctor said, "Your hearing is perfect. Your family must be really pleased that you can hear again."

The gentleman replied, "Oh, I haven't told my family yet. I just sit around and listen to the conversations. I've changed my will three times!"

Two elderly gentlemen from a retirement centre were sitting on a bench under a tree when one turns to the other and says: "Slim, I'm 83 years old now and I'm just full of aches and pains. I know you're about my age. How do you feel?"

Slim says, "I feel just like a newborn baby."

"Really!? Like a newborn baby!?"

"Yep. No hair, no teeth, and I think I just wet my pants!"

An elderly couple had dinner at another couple's house, and after eating, the wives left the table and went into the kitchen. The two gentlemen were talking, and one said, "Last night we went out to a new restaurant and it was really great I would recommend it very highly."

The other man said, "What is the name of the restaurant?"

The first man thought and thought and finally said, "What is the name of that flower you give to someone you love? You know... the one that's red and has thorns."

"Do you mean a rose?"

"Yes, that's the one," replied the man.

He then turned towards the kitchen and yelled, "Rose, what's the name of that restaurant we went to last night?"

Three old guys are out walking. First one says, "Windy, isn't it?"

Second one says, "No, it's Thursday!"

Third one says, "So am I. Let's go get a beer."

A man was telling his neighbour, "I just bought a new hearing aid. It cost me four thousand dollars, but it's state of the art. It's perfect."

"Really," answered the neighbour. "What kind is it?"

"Twelve thirty."

MEMBERS COMPETITION

A £5 prize will be given to the member whose entry has the most correct answers. Even if you can't answer all the questions send in those you have answered – you could still win!

NAME THE FLOWERS

- 1/ MUNCH – MOUTH EDGES
- 2/ MEDIEVAL PUNISHMENT
- 3/ “NOOKIE” ON A FOGGY NIGHT
- 4/ EFFEMINATE MALE
- 5/ NOVEMBER DAY
- 6/ GIRL ON A TANDEM
- 7/ SONG BIRD ON COWBOYS HEELS
- 8/ SWEET – BUNCH OF HAIR
- 9/ FIRST WOMAN M.P.
- 10/ TYPE OF WORD MRS SHARPLES
- 11/ LOADS OF SHEEP
- 12 GRACIE FIELDS BIGGEST

Name:

Address:

Send Completed Forms To:

Mr D Henderson
74 Windermere Road
Stockton-on-Tees
TS18 4LY

All entries to be received by the next social. The winner will be drawn from entries received with the highest number of correct answers.

Answers to last quiz:

1/ Hyacinth 2/ Violet 3/ Peony 4/ Forget Me Not 5/ Marigold 6/ Lotus 7/ Fox Glove 8/ Periwinkle
9/ Alysumm 10/ Catmint 11/ Cowslip 12/ Hydrangea