

ISSUE NO:- 06/ 2019

# BULLETIN



## EVENTS

### Drop-In:-

Greens Lane Methodist Church, Hartburn. We meet here 1pm to 4pm on a Tuesday. Alternative therapy is available for those who enjoy or would like to try Shiatsu.

### Social Evenings:

These are held at the Orthoptic Supplies, 176 Belasis Avenue, Billingham, TS23 1EY, on the last Wednesday of every month at 7pm.

### Shopping Online????

Buy items or book holidays through the Stockton MS Group web site and we will receive a donation. There are over 100 top retailers to choose from. It all helps raise funds for the group.

### Monthly Bulletin

"If you would like to receive this bulletin by email, then just send a request to [news@stocktonmsgroup.org.uk](mailto:news@stocktonmsgroup.org.uk).

Remember if you change your email address to let us know by sending a message to [news@stocktonmsgroup.org.uk](mailto:news@stocktonmsgroup.org.uk)"

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## NEWS UPDATE

www.gazettelive.co.uk 4 June 2019

### **DWP: There's been a big change to disability benefit testing - but there's a catch**

Disabled pensioners will no longer face "stressful" eligibility tests for benefits every two years, the Government has announced.

Instead, those claiming the Personal Independence Payment (PIP) will instead move to a "light touch" review every ten years.

But charities say the reform - which came into force last Friday - does not go far enough.

**The Mirror reports** this is because the change only applies who start a PIP claim from now on. Department for Work and Pensions (DWP) Secretary Amber Rudd said: "I have set out a number of initiatives to improve the quality of life for disabled people; to level the terrain and smooth their path.

"Stopping unnecessary PIP reviews for people over state pension age is a positive change. It applies a common-sense approach to treating those whose conditions are unlikely to change, and we want to introduce it as quickly as possible for those who will benefit from it."

The department said applying this change to **new claimants** is the first step, and the reform will be extended to existing PIP claimants above State Pension age in the coming months.

Minister for Disabled People Justin Tomlinson said: "We are determined to improve our support for disabled people, and stopping needless PIP reviews for pensioners is the right thing to do.

"This step means new claimants to PIP who reach State Pension age before their review is due won't have one unless they tell us their needs have changed, and the next step is to bring this in for all pensioners."

But Genevieve Edwards of the MS Society told the Mirror it was "really disappointing" that the pledge "has been delayed for existing claimants".

And Vicki Nash of **mental health charity** Mind added: "It's good news that some new claimants of PIP won't have to be reassessed for health conditions that aren't going to change significantly over the long-term.

"But this announcement doesn't go far enough for the hundreds of thousands of people still facing mandatory reassessments.

"We want to see more people being awarded longer-term PIP payments.

"Unless there's strong evidence that a person's health has changed, there's just no need for a series of face-to-face assessments."

This change was part of a wider package of measures announced by Ms Rudd.

Other improvements include combining the separate assessment processes for PIP, Employment Support Allowance and **Universal Credit** into one integrated service from 2021.

The DWP says the integrated service will "simplify the assessment process for millions of people claiming health related benefits, reducing the need to submit information multiple times and for some people reducing the number of face-to-face assessments".

A small-scale test to explore the viability of a single assessment for Work Capability Assessments and PIP assessments will also be undertaken.

The government will also work with stakeholders to understand how to help people submit the right evidence with their claim at the outset so that fewer people have to take their case to tribunal.

## Are we more constipated than we think?

Doctors and the public are at odds over the symptoms of constipation, leaving some people without the advice or treatment they need, researchers say.

While medics think infrequent bowel movements are an important sign, less than a third of the public does, a study found.

The King's College London team said a new definition for constipation was needed, based on patient experiences.

"This shows the poo taboo is over," charity Guts UK said.

Constipation is a very common condition, affecting around one in seven people who are otherwise healthy.

It means having difficulty opening or emptying the bowels, and passing stools - but the way it is diagnosed varies widely.

The researchers say this list of six groups of symptoms could help form a new definition of constipation:

- abdominal discomfort, pain and bloating - clothes not fitting as well as usual
- rectal discomfort - bleeding from pushing too hard, pain or burning sensation in the anal area
- infrequent bowel movements and hard stools - normal can range from three times a day to three times a week
- sensory dysfunction - not having the urge to go or a sense of incomplete evacuation
- flatulence and bloating - noisy or smelly wind
- faecal incontinence - uncontrolled leakage or rectal bleeding

### What is this list based on?

The researchers surveyed 2,557 members of the public, 411 GPs and 365 gastroenterology specialists and published the results in the [American Journal of Gastroenterology](#).

They found that what most people think of as symptoms of constipation aren't included in any official diagnostic criteria.

These include:

- spending a long time on the toilet unable to pass a stool
- straining
- needing to use laxatives

While most people who said they had constipation had symptoms that matched the official criteria, one in three 'healthy' patients didn't recognise their symptoms of constipation at all. And doctors and the public don't seem to agree on the signs to look out for either, the study found.

Medics placed lots of emphasis on infrequent bowel movements, as a symptom, but only half of people who said they had constipation actually experienced this symptom.

### What do the researchers say?

Dr Eirini Dimidi, study author from King's College London, said: "Our research may indicate that people who seek help for symptoms of constipation don't always have them recognised, diagnosed or managed."

She said constipation was usually caused by a lack of fibre or fluid in the diet but it could also be a sign of another underlying problem, such as bowel cancer, diverticular disease or coeliac disease.

Dr Dimidi said it was "always important to consult your doctor if you experience gut symptoms".

### **What about other experts?**

Listening to what patients say about constipation is important, said Julie Harrington, from charity Guts UK.

"Patients are the experts, by experience, and when they come together with specialists, that's the sweet spot."

Not all constipation is the same, and different people have different symptoms, she added.

"Bowel problems are less likely to be picked up than other problems because people wait 6-12 months out of fear and embarrassment.

"You have to tune into your body."

### **How often should we poo?**

This is difficult to answer - it can vary dramatically from person to person.

In the study, seven bowel movements a week was the average among people who weren't constipated.

But experts say three bowel movements a day to three a week qualifies as normal.

So you need to know what's normal for you - and then look out for changes.

### **What are the treatment options?**

Most people recognise the problem themselves and try to solve it by increasing the fibre in their diet and drinking more fluid, according to **NHS advice**.

**Fibre** is present in wholegrain bread, wholegrain pasta, fruit, nuts, pulses and cereals.

Taking more exercise and eating regular meals can also help.

You can buy laxatives from the chemist if diet and lifestyle changes aren't working.

But it's important to see your GP if the problem persists, and you have other symptoms.

www.sciencedaily.com 6 June 2019

### **Scientists edge closer to root causes of multiple sclerosis**

An international team of researchers led by the University of British Columbia has made a scientific advance they hope will lead to the development of preventative treatments for multiple sclerosis (MS).

In a study published today in *PLoS Genetics*, researchers found mutations in 12 genes believed to be largely responsible for the onset of MS in families with multiple members diagnosed with the disease.

"These genes are like a lighthouse illuminating where the root cause of MS is," said lead author Carles Vilariño-Güell, assistant professor in the UBC faculty of medicine's department of medical genetics and a Michael Smith Scholar.

MS is a disease that affects the central nervous system, in which cells from the immune system attack and damage the nerve cells' protective sheath. The disease often results in disability and can have a significant impact on quality of life.

For the study, researchers sequenced all known genes in three or more MS patients from 34 families and examined the genetic variants in family members both affected by and unaffected by MS. By looking at the genes of 132 patients, they identified 12 genetic mutations that can lead to an overactive autoimmune system that attacks myelin, the insulating layer around nerves in the brain and spinal cord.

Of people diagnosed with MS, only 13 per cent are believed to have a genetic form of the disease, but those presenting the mutations identified in this new study were estimated to have an up to 85 per cent chance of developing MS in their lifetime.

Vilariño-Güell aims to develop cellular and animal models with the identified mutations to mimic the biological processes responsible for the onset of MS in patients, with the goal of eventually developing preventative treatments for the disease.

"We have treatments that address the symptoms of MS, but not the causes. People with MS take drugs that reduce the attacks, but the disease still progresses," said Vilariño-Güell. "Now, with knowledge of these mutations, which suggest a common biological process that leads to increased inflammation in MS families, we can try to address the root causes."

The researchers hope the findings will one day lead to personalized treatments for MS patients and preventative strategies for those at greater risk of developing the disease.

This study was supported in part by the Canada Research Chair program, the Michael Smith Foundation for Health Research, the Canadian Institutes of Health Research, the Vancouver Coastal Health Research Institute, the Milan & Maureen Ilich Foundation and the Vancouver Foundation.

**Story Source:**

Materials provided by **University of British Columbia**.

www.eiuperspectives.economist.com 28 May 2019

## **The workplace response to neurological conditions: A focus on migraine, multiple sclerosis and Alzheimer's disease**

**Migraine, multiple sclerosis (MS) and Alzheimer's disease (AD)** affect over 1.3bn people globally. The report *The workplace response to neurological conditions* looks at the impact of these three neurological conditions on both patients and carers in the workplace. It also examines how employers can support their employees living with the conditions and the reasons why it is important for their enterprise.

Based on the results of qualitative interviews and research conducted, it is clear there are a number of significant challenges that employees, employers and governments need to address to improve outcomes for those living with these conditions and those caring for them.

### **Key findings**

- Employees working at less than full productivity is a bigger problem for employers than absenteeism
- These three neurological conditions may negatively affect the productivity, participation, and current and future earning potential of employees living with the conditions in the workforce.
- Education and increasing awareness of these conditions in the workplace is crucial.
- Better accommodations for employees affected by the conditions can contribute to retaining staff and keeping them motivated
- Early medical consultations and diagnosis can help employees affected stay at work

"Minor adjustments can be easily introduced in the workplace, costing very little to the employer, and this can mean so much to people living with these conditions and their carers, so that they can have fruitful and productive working lives. Employers benefit from having more diverse workplaces, as so many women are affected by these conditions. They will also see increased productivity and a boost in employee morale"

The findings of the report are based on desk research and eight interviews with physicians, health experts, business leaders and policymakers.

## YOUR JOKES

### *Irish Ghost Story*

John a Dublin university student, was on the side of the road hitch-hiking on a very dark night and in the midst of a big storm.

The night was rolling on a not car went by. The storm was so strong he could hardly see a few feet in front of him. Suddenly, he saw a car slowly coming toward him and it stopped.

John desperate for shelter and without thinking about it, got into the car and closed the door....only to realise there was nobody behind the wheel and the engine wasn't running.

The car resumed moving slowly. John looked at the road ahead and saw a curve approaching. Scared, he started to pray, begging for his life. Then, just before the car hit the curve, a hand appeared outside the window, and turned the wheel.

John, paralysed with terror, watched as the hand came through the window but never touched or harmed him. Shortly thereafter, John saw the lights of a pub appear down the road, so gathering strength, he jumped out the car and ran to it... Wet and out of breath, he rushed inside and started telling everyone what a terrible experience he had just had.

A silence enveloped the pub when everybody realised he was crying... and wasn't drunk.

Suddenly, the door opened, and two other people walked in from the dark and stormy night.

They, like John, were also soaked and out of breath. Looking around, and seeing John sobbing at the bar, one said to the other....

Look Paddy...there's that f\*\*\*ing idiot that got in the car while we were pushing it!!!

\*\*\*\*\*

Malcolm Turnbull called Bill Shorten into his office recently and said,

'Bill, I have a great idea. We are going to go all out & talk to country voters.'

'Good idea Malcolm, how will we go about it?' said Bill.

'Well,' said Malcolm, 'We'll get ourselves one of those Driza Bone coats, some RM Williams boots, a stick & an Akubra hat. Oh, and a blue cattle dog. Then we'll really look the part. We'll go to a typical old outback country pub, we'll show we really enjoy the bush.'

'Right.' said Bill

Days later, all kitted out & with the requisite blue heeler, they set off from Canberra in a westerly direction. Eventually they arrived at just the place they were looking for & found a typical outback pub. They walked in with the dog & up to the bar.

'G'day mate,' said Malcolm to the bartender, 'two middies of your best beer.'

'Good afternoon Malcolm,' said the bartender, 'two middies of our best coming up.'

Turnbull & Shorten stood leaning on the bar drinking their beer and chatting, nodding now & again to whoever came into the bar for a drink.

The dog lay quietly at their feet...All of a sudden, the door from the adjacent bar opened & in came a grizzled old stockman, complete with stockwhip.

He walked up to the cattle dog, lifted its tail with the whip & looked underneath, shrugged his shoulders & walked back to the other bar.

A few moments later, in came another old stockman with his whip.

He walked up to the dog & lifted its tail, looked underneath, scratched his head & went back to the other bar. Over the course of the next hour or so another four or five stockmen came in & lifted the dogs tail and went away looking puzzled.

Eventually, Turnbull and Shorten could stand it no longer & called the barman over.

'Tell me,' said Shorten, 'why did all those old stockmen come in & look under the dog's tail like that? Is it an old outback custom?'

'Strewth no,' said the barman. 'Someone told 'em there was a cattle dog in the bar with two arseholes.'

## MEMBERS COMPETITION

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

- 1/ Who was born "Stefani Joanne Angelina Germanotta" on March the 28th 1986? .....
- 2/ What cake derives its name from the French word for lightning? .....
- 3/ Who were stripped of the European Champion Club's Cup they won in 1993 after a bribery scandal involving their president, Bernard Tapie? .....
- 4/ Which island, named after a Dutchman, is often said to have the cleanest air in the world? .....
- 5/ What is the national flower of Belgium? .....
- 6/ Collins, Burgundy, Highball, Yard and Shot are all examples of what? .....
- 7/ Which novelist drowned herself in the River Ouse in 1941? .....
- 8/ In which city is Jim Morrison buried? .....
- 9/ Name the cult holed up in Waco, Texas, many of whose members were killed when the FBI stormed their compound after a 51-day siege. ....
- 10/ Sniffing for tidbits like you on the ground is from which song? .....

Name:

Address:

Send Completed Forms To:  
Mr D Henderson  
74 Windermere Road  
Stockton-on-Tees  
Cleveland 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/ SENT: (Seven, Eight, Nine, Ten) 2/ Amsterdam 3/ 50 4/ 4,000 miles 5/ 99999  
6/ Venezuela 7/ Cadillac 8/ Golgotha or Calvary 9/ Clavicle 10/ Seven