PURPOSE

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PURPOSE

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EDITORIAL

A questionnaire included with the last issue of *Purpose* asked if there were any ways in which your quality of life could be improved through the support and services provided to you as an amputee. Going by the very small number of responses, one can only assume that you are all a very contented lot! Thank you to those who did respond. We noted that:

- Readers would like to see more articles of a personal nature in *Purpose* about the achievements of amputees and how some cope with day-to-day living. (This issue includes profiles of 3 such people; we are happy to keep these coming but need to hear from you with your story!)
- Phantom Pain is an ongoing problem for some amputees and an article relating to this will follow in a future issue.
- Many years ago, the quality of stump socks used to be the subject of perennial remits at annual conferences and it seems there is again some dissatisfaction with these. Do you have any problems with your stump socks?

In past years, the November issue of *Purpose* has included details of the Federation's National Conference and Give it a Go! event. However, to free up space in our Journal, next year's Conference and GIAG programmes, together with registration forms, will be available separately. You can obtain an electronic or hard copy from the National Coordinator or your local Secretary. See page 5 for a brief summary of what next year's Conference and GIAG will be offering. It would be great to see you there!

Take care

Lorraine Peacock

JOIN US ON FACEBOOK - GO TO OUR WEBSITE www.af.org.nz
and click on our name to LIKE us!

STOP PRESS - NZPA 19 October

New Zealand's own "blade runner" hit the ground running yesterday in his attempt to become our fastest paralympian. *Read more in the next issue of* Purpose.

NEWS FROM OUR SOCIETIES

Auckland & Northland - We had a very successful Social Sunday afternoon on Sunday 8 September, when the Manager of the Auckland Artificial Limb Centre gave a very informative presentation on the limbs and joints (ankles and knees) available to amputees. This was followed by the usual cuppa and chat. The next and final Social Sunday afternoon will be an End of Year Christmas Barbecue on Sunday 3 November. Amputee swimmer Cameron Leslie has joined the Wheel Blacks. (See article on p9).

Waikato, Bay of Plenty & Districts - For an update on latest news and planned activities, contact the Secretary (page 12).

awke's Bay/East Coast - They have had some good meals out during the last 3 months which have been well supported. Geoff Hansen (Field Officer) and Joan Parker (President) attended the Gisborne clinic in September - a small group joined them for lunch and Geoff took photos for their Facebook and website pages. Membership figures are climbing and future events include a Christmas lunch at the fishing club in Napier and a car rally in January.

Taranaki - For an update on latest news and planned activities, contact the Secretary (page 12).

Manawatu - For an update on latest news and planned activities, contact the Secretary (page 12).

Greater Wellington Region - For an update on latest news and planned activities, contact the Secretary (page 12).

Nelson & Marlborough - Lots of energy is going into arrangements for the hosting of the National Conference which is shaping up to be a stimulating and interesting weekend.

Canterbury & Westland - Their latest newsletter advised that a group of Committee members were off to the West Coast to meet up with members there and an early Christmas lunch was planned for 17 November.

Committee members, Holly Robinson and Rory McSweeney, both competed in javelin events at the international paralympic athletics world championships in France in July. Holly won a Silver medal and broke her personal best record to throw the javelin 34.37m in the F46 class, and Rory threw a personal best of 49.95m to finish 6th in his F44 javelin event. Scheduled for November and December are annual get-togethers: Invercargill meeting and dinner, golf day, multiquadrant sports and end-of-year barbecue.

Newsletters of District Societies are available to readers on the Federation's website (*www.af.org.nz*), along with plenty of other useful information.

ARE YOU ONE OF THESE?

Once upon a time, there were four people named Everybody, Somebody, Nobody and Anybody. When there was an important job to do, Everybody was sure that Somebody would do it. Anybody could have done it but Nobody did it. When Nobody did it, Everybody got angry because it was Somebody's job. Everybody thought that Somebody would do it but Nobody realised that Nobody would do it. So it ended up that Everybody blamed Somebody when Nobody did what Anybody could have done in the first place.

ARE YOU AN ACTIVE MEMBER OF YOUR SOCIETY?

SUPPORT YOUR DISTRICT AMPUTEE SOCIETY IT SUPPORTS YOU!

CONFERENCE 2014

Next year's Conference will be held at the Trailways Hotel in Nelson on 21-23 March. A slight change in format will see the National Council Meeting take place following the Official Opening on the Friday evening. Free time on Saturday morning will provide an opportunity for a number of choices - the famous market, Nelson's Wearable Art, Classic Car Museum, or activities such as archery and golf.

Saturday afternoon's sessions include:

An Osseointegration Update

Iyengar Yoga - for strength, flexibility and balance

Latest news from the NZ Artificial Limb Service

On Saturday evening, a Pirate themed dinner and dance will include entertainment by Nelson's Copperhead Band, and on Sunday morning Conference attendees will join with Give it a Go! participants for a focus on "motivation"

A new innovation at next year's Conference will be a range of display booths by our Conference sponsors.

GIVE IT A GO!

Youths registering for GIAG will join with the main Conference on Friday and Saturday evenings and Sunday morning. During the day on Saturday, a variety of activities will include rock climbing and kayaking.

ATHLETICS STAR GRABS BIKE HANDLES

(Excerpts reprinted with the permission of Kapi-Mana News)



After racing at two Paralympics on the track and with a silver medal to show for it, Kate Horan has now turned her attention to cycling and has already won a national title. Earlier this year, she won the road time trial in the Club Road National Championships in Queenstown for her class, completing 25 kilometres in 46min 3.63sec. The below-knee amputee said there were not many competitive amputees in New Zealand so deciding races was not straightforward. "Because we're all different classifications – another girl in the race was missing a hand – it's done on who is closest to the world record in their classification."

Competing as a sprinter at two Paralympic games, Kate won silver in the 200m in 2008. In 2004 she was classified out of medal contention when she was forced to run against others with two good

legs because she was the only leg amputee who qualified. Shifting her focus from the athletics track to road cycling has meant learning new skills and overcoming unique problems, not to mention being a very costly business, Kate said. She turned up at her first event with her second-hand road bike fitted with borrowed racing wheels. "Everyone else was riding \$5,000 to \$10,000 aero bikes with aero bars and aero helmets," she said. "I still think it comes down to the rider not the bike." However, Kate knows she will have to spend a lot more money than a pair of running shoes used to cost. She will need a road bike, a track bike and a time trial bike to be really competitive, and her second hand one will be relegated to being permanently attached to her stationary wind-trainer. Kate's partner's trail bike is to be sacrificed to fund a new bike for her. Every paracyclist has their own unique problems and Kate and partner Bart are gradually overcoming hers. As a below-knee amputee she was unable to click her pedal cleats into her bike's clipless pedals, so couldn't get on it by herself. With some research and advice from Bike Hutt in Upper Hutt, and some parts from Wellington Hospital's limb and orthotic centre, Bart was able to adapt an old artificial leg to take the pedal cleat directly on to its stem. When we visited they were just working out how she could lock on to the bike by herself with the help of a wooden block. "The downside is that when I fall off my bike, as everyone does at some stage, I'm still attached to the bike. "If I have to get off on a ride, I can't get back on myself." But it's an exciting time, she said. "Coming from another sport to this one is when you're just starting out, and learning and improving all the time, enjoying every moment."

AMPUTATION, ASYMMETRY AND LOW BACK PAIN

- A Research Study

Whilst advancement in prosthetic technology has improved the physical functioning of people with a lower limb amputation, the prevalence of musculoskeletal problems such as lower back pain and osteo arthritis are on the rise in this population. Lower back pain is a major disabling condition following lower limb amputation. The principle aim of our research is to investigate the prevalence and possible mechanisms of lower back pain in people with a lower limb amputation. As a first step, we wished to explore what people with a lower limb amputation think about their back pain. We conducted focus group interviews with people with above-knee and below-knee amputation from the Otago region who suffer from on-going back pain. This provided us with valuable information about back pain, the activities that aggravate back pain and what it is like to live with back pain, for example, one participant described her back pain as: "Back pain is not extreme, it's not terrible, it's not life threatening, but it is annoying." Our findings suggest the causes of lower back pain are multifactorial, although the unnatural movements of the spine following amputation may be a main factor contributing to back pain. In terms of alleviating back pain symptoms and improving the quality of daily activities, improved physical fitness by being physically active, maintaining an optimal prosthetic fit and prosthetic leg-length were what our participants considered important. From the results of our focus group study, we then developed a questionnaire which sought to investigate the back pain prevalence and what common daily activities aggravate back symptoms. This questionnaire was sent to a national random sample of people (N= 490) with one-sided lower limb amputation (those with above-knee and below-knee amputation due to trauma and tumours). A response rate of 43 % from the National Survey showed:

- 67 % of respondents experienced back pain in the four weeks prior to completing the survey.
- In those with back pain, 45 % reported that pain restricted their daily activity for more than one day.
- Approximately 30 % of those with back pain reported their pain as 'extremely bothersome' which suggests the severity of the back pain.
- In terms of common activities which aggravate back pain symptoms, standing, sitting for long periods, lifting/bending and walking often increased their back pain symptoms.

Currently, we are in the process of examining the movement asymmetries (unnatural movements) of the lower back region during the common daily activities (lifting/bending, walking and a sit to stand task) identified in the National Survey using a sophisticated motion capture system. For further information about the research study, contact <code>hemakumar.devan@otago.ac.nz</code> from the School of Physiotherapy, University of Otago, Dunedin.

MATTHEW AMES - AN INSPIRATION

(Excerpts from news.com.au 1 Oct 2013, Photo Brisbane Times)

In just one week Matthew Ames has undergone major surgery, shared his inspiring story with the nation and received an award for courage. Now he's on the road to recovery.



Days before Mr Ames' incredible story *Bionic Dad* was featured on the current affairs programme, *Sunday Night*, the quadruple amputee underwent the first operation - to have titanium rods embedded in what remains of his limbs - of many rounds of surgery in a lengthy osseointegration procedure.

The Brisbane father-of-four will eventually undergo more surgery to link the implants with even more titanium on which bionic prosthetics can be attached. He is now trying to raise the \$500,000 to purchase bionic prosthetic limbs and effectively become Australia's first bionic man.

After having surgery and his story seen around the country, Mr Ames was honoured with a Queensland Pride of Australia medal for courage.

Matthew's story started in 2012 when his body was attacked by the streptococcal A bacteria. On the verge of death and in an induced coma in intensive care, his family

had to decide on his behalf to amputate all four limbs to stop the bacteria spreading through his body, and thereby save his life. Assuming Matthew, 39, would prefer to live as an amputee rather than die, wife Diane agreed to the surgery. Matthew's courage, stoicism and positive attitude since the surgery have been inspiring.

(Matthew is a recipient of the OPRA osseointegration procedure)

LETTERS TO THE EDITOR and any other contributions to *Purpose* are very welcome. If you have anything to share with readers, please send it to the Editor at 213a Bay View Road, St Clair, Dunedin, fax to (03) 455-9547, or email to *info@af.org.nz*

WHEELCHAIR RUGBY

Three amputees have been named in New Zealand's wheelchair rugby team to contest the Asia Oceania Zone Tournament in South Africa next month. Aucklanders Barney Konoferenisi (pictured) and Maia Amai join Whangarei's Cameron Leslie as part of the nine-strong 'Wheel Blacks' team. The trip will be Amai's first as part of a Wheel Blacks side, becoming just the third female to wear the Kiwi singlet. For the team, the competition is a further step towards World Championships next year in Denmark with the longer term goal being a medal at the 2016 Rio Paralympics. Coach Peter Martin said South Africa won't be a



walk in the park by any means, adding that the Kiwis will need to be at their best to be competitive. "Our ultimate goal, in this four year cycle, being a podium finish at the Rio Paralympics 2016," Martin said. "We currently have a world ranking of 10th, so are a long way from that goal at present. As we continue to improve, gain experience and develop our game and tournament strategy, I believe we are very capable of success with that [goal for Rio]. "There is no doubt within our squad we have some real talent developing, which has yet to show its full potential. "As a small sport, with a small player base, with relatively little support, we need our top athletes to strive to perform at their highest level, to be self-driven, self-motivated, in order to achieve their potential." Within the current Wheel Blacks' ranks, there are only two players who have competed in more than two World Championships.

Interested in playing wheelchair rugby? To play wheelchair rugby you must have at least three limbs effected by some form of disability, whether it be weakness or amputation. Players are classified and given a points rating depending on what limbs, or function, you have or don't have. Each team has four players on the court at any one time, with the total team points value not exceeding eight. To find out more, visit www.wheelblacks.com or follow them on Facebook. Or, contact Tim Johnson at tcj14@ext.canterbury.ac.nz.

OUR THANKS to the Southern Trust and the Rehabilitation Welfare Trust for their recent grants; we very much appreciate this support.

NO MORE SOCKETS

by Leigh Ellis

Fifteen months ago it was just an incredible dream. I wanted so badly to receive the Integrated Leg Prosthetic (ILP) surgery after seeing Phil Coulson on Campbell Live. When I was asked to be the first to trial the operation at Burwood Hospital in Christchurch, I could hardly believe my ears. March 12 2013 was my first operation to integrate the implant into my femur. On 14 May I received the second operation to attach the abutment. Both operations were very smooth and trouble free. Recovery has sometimes not gone so smoothly - but has not been enough trouble to make me regret the procedure, far from it. Around the hole at the end of my stump where the metal rod protrudes (stoma) I have had pulling of skin and tissue. The most prominent pain for me was my hypersensitive muscle and tissue around the end of my stump. Attimes I could not tolerate wearing the genium knee for very long. My stump would ache. Turning over in bed was difficult. Unfortunately, I am an unusual case, other people who have had this procedure have not experienced this pain. The great thing was that 8 weeks post second operation, the muscle pain and tissue sensitivity went away. I had had the help of a Craniosacral Therapist, Gill Redden, who worked wonders with me through these two months. At the moment I have to watch for over-granulation and I have had a few minor infections, nothing too sinister

At the moment I use one crutch when I walk more than 3km. My muscles are still building up and I notice improvements every week. One psychological benefit that stands out for me is the feeling of trust and predictability towards my prosthetic. I know that tomorrow my leg will fit the same as it does today. Changes in weight, heat, cold, exertion, friction, movement do not change how my attached prosthetic feels. I have barely spoken about my Genium Knee and how I find it in comparison to the 3R80 knee that I wore prior to this surgery. The style of walking required to use the genium is different but it easy enough to



adapt to. Everyone recovers at their own time and speed. Every week my ILP promises improvement to my gait, mobility and endurance. I can't wait to see what I am doing next month.

(Leigh is a recipient of the ILP osseointegration procedure)

YOUR RIGHTS

The Human Rights Act - If you're treated unfairly because of your disability, this may be unlawful discrimination. The Human Rights Act can protect you from discrimination in these areas: Government or public sector activities; Employment; Business partnerships; Education; Public places, vehicles and facilities; Goods and services; Land, housing and accommodation; Industrial and professional associations, qualifying bodies and vocational training bodies. Disability includes physical, psychiatric, intellectual or psychological disability or illness. This includes mental health conditions. You can call the Human Rights Commission toll free on 0800 496 877 or visit their website at www.hrc.co.nz

A Code of Health and Disability Services Consumers' Rights protects your rights to receive quality health and disability support services. A national, free advocacy service is also available to assist where people with disabilities believe their rights have been breached. Health and Disability Advocates can be contacted toll free on 0800 55 50 50 or website www.hdc.org.nz

Artificial Limb Services - It is also important that you are aware that you have rights when visiting the Limb Centre. You can request an appointment with the surgeon at any time and you also have the right to request a private consultation with any person providing a service to you, e.g. the prosthetist or the surgeon.

PUBLICATIONS available (no cost) from the National Coordinator or District Society Secretaries

A New Challenge - Advice for New Amputees (a 32 page booklet)

An Ongoing Challenge - A 60 page publication which covers a wide range of topics and includes personal profiles of 10 amputees.

A Challenge with Purpose – A History of the first 50 years of the Amputees Federation of NZ Incorporated (275 pages)

The Amputee Society of Otago & Southland Inc. –The first 60 years (146 pages)

NEW ZEALAND ARTIFICIAL LIMB SERVICE

Our mission is enabling people with limb loss to achieve independence by delivering prosthetic and rehabilitation services.

The New Zealand Artificial Limb Service is a Crown Entity (Government organization) that manufactures limbs and provides rehabilitation to amputees to increase their mobility, independence and quality of life.

The New Zealand Artificial Limb Service is the sole national provider of artificial limbs in New Zealand. For New Zealand citizens and legal residents, the service is generally free of charge.

AFFILIATED AMPUTEE SOCIETIES

District	Secretary	
Auckland & Northland	Janis Bourne P O Box 71171 Rosebank Auckland 1348	Phone (09) 833-8057
Canterbury & Westland	Shazz Hanrahan P O Box 26-148 Christchurch 8148	Phone (03) 385-7727
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Manawatu	John Maher 27A Alfred Street Palmerston North 4414	Phone (06) 354-7023
Nelson & Marlborough	Claire West 5 Cape View Nelson 7010	Phone (03) 545-1410
Otago & Southland	Lorraine Peacock 213A Bay View Road St Clair Dunedin 9012	Phone (03) 455-6347
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Greater Wellington Region	Juanita Penhey 34 Doncaster Tce Ascot Park Porirua 5024	Phone (04) 235-6338

ottobock.

Triton

Learning from nature

When developing the Triton prosthetic feet, our engineers made mobility their priority. They worked together with amputees to create a comprehensive family of products that meet the various demands of an active lifestyle. Thanks to the innovative design, the Triton feet are suited for a broad range of applications. They offer excellent functionality even under high load.





Pure Sport.

With the new 3S80 Sport knee joint

There is nothing like the satisfaction you get after a good run. The new 3S80 Sport knee joint, with the proven rotation hydraulics principle, enables the user to simply run again.

Whether it's for jogging or sprinting, the new sport prosthesis – in combination with the 1E90 Sprinter carbon spring foot – is perfect for running sports and is approved for a body weight of up to 100 kg.

The locking function of the new sport knee joint gives the user a secure stance--especially helpful for warming up and stretching exercises.

Michelangelo

Using advanced technology to help you reach your potential

The Michelangelo® Hand is the most technologically advanced and functional prosthetic hand available. As the heart of the new Axon-Bus® prosthetic system, it offers unrivalled benefits and new freedom of movement for the user. This is our vision of innovation—technology for the benefit of people.

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REMEMBER THAT YOU'RE NOT THE
FIRST PERSON TO HAVE LOST A LIMB MANY OTHERS HAVE PASSED ALONG
THE SAME ROUTE AND ACHIEVED
CONSPICUOUS SUCCESS.
IF YOU WISH TO DO THE SAME,
YOU ARE MORE THAN HALF-WAY THERE THE REMAINDER IS AS EASY OR AS
DIFFICULT AS YOU MAKE IT.