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BACK IN THE BUSH

SCI AND MOTHERHOOD

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Adventure.

TWO RECENT NEWSPAPER HEADLINES CAUGHT MY EYE.

"Why do so many disabled people embark on dangerous feats?" asked one newspaper. Another blared, "Skydiving Quadriplegic's Death Raises Questions of Safety for Disabled Thrill Seekers."

On one hand, they underscore the cultural stereotypes that are still so prevalent within our society. People with disabilities are people first, which is why the first headline should really read, "Why do so many *people* embark on dangerous feats?" or "People with disabilities are thrill seekers too." The fact is that, as a species, we humans seem to have an innate desire to embark on feats involving danger. This desire doesn't disappear because a person has a disability. It just means that the logistics and equipment needed to participate might be a little different.

But on the other hand, these headlines remind us of the increasing opportunities for people with disabilities to get out and live life to its fullest. In fact, BC is leading the way in providing or funding programs and equipment for people with SCI and related physical disabilities to have equal access to adventure and sport.

In August, I had the pleasure of meeting up with a group of our Northern Peers, who made the trip down to the Whistler area to go kayaking, gliding, and hiking. This adventure was made possible through the BCPA Peer Program and the Whistler Adaptive Sports Program (WASP), which provides a wide variety of summer and winter recreational activities. WASP and other adaptive sports programs across the province provide access to an increasing range of adaptive equipment, which may be too costly for many to own, but can be rented at very reasonable rates. Needless to say, everyone had a great time, and you can read about their exploits in the next issue of *The Spin*.

Should people with disabilities be engaging in adventurous activities? Of course, it's tragic that an American quadriplegic skydiver died because his emergency backup chute couldn't be activated. But the fact that 30 Americans die in skydiving accidents every year hasn't led the press or public to question whether this extreme sport should be grounded for everyone.

Successful acts of adventure and personal triumph are inspiring, whether an individual has a disability or not. If these acts are more inspiring when they're performed by people with disabilities, it's only because we're not yet used to hearing about them. The more we hear about them, the more they'll inspire others to get out and try them. This is one reason why we publish *The Spin*.

Extreme sport and dangerous feats may not be for everyone, but that's not because of one's ability or disability. Our Northern Peers are living proof of that. So too are those featured in *The Spin* and the broader media. Get used to hearing about them.



Chris McBride
Executive Director, BCPA



thespin

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ALL TERRAIN HANDCYCLE

The ATH is a rugged handcycle built for use in all seasons by Anchorage, Alaska-based Lasher Sport. Much more than an off-the-shelf handcycle with fat tires, the ATH was specifically designed for use off the pavement—yet it's still very adept on the pavement. A generous six inches of ground clearance helps you get over rough trails and gnarly terrain, or navigate a standard height curb. The frame is built from oval magnesium for maximum strength and durability, while forks and backrest are built with airplane aluminum. The standard 26" quick release mountain bike wheels can be outfitted with any 26" mountain bike tire sold in your local bike shop, so servicing the wheels is easy. With the seating designed to be more upright and forward, there is plenty of weight on the front drive wheel to get up relatively steep slopes. Other features include Shimano SLX components, Avid hydraulic disc brakes, and powder coat finish. For more information, visit www.lashersport.com or check out the company's other mobility products on Youtube.

gear & gadgets



Innovations

New products, devices & aids to daily living that might make a difference in your life...



WHEELMAP APP

Wheelmap is an iPhone app that shows wheelchair access around the world. The app tags different locations, facilities, businesses and transportation services on an open source map with red, yellow or green to indicate the level of wheelchair access. Locations tagged red have no wheelchair access; yellow locations have partial access, and green locations are totally accessible. Locations without an access rating are gray. The easy-to-use app also allows users to search for locations much like other map applications for the iPhone. It's also linked to the Wheelmap website, where users from around the world can contribute

to developing the app by rating locations for wheelchair accessibility. The website reports 300 new user-ratings daily for a total of info on 30,000 locations. The app was developed in Germany and is widely used there. But it's also gaining momentum worldwide, and there's a growing following of users and contributors in North America. Visit <http://en.wheelmap.org> for more information.

VIBERECT

No, it's not the latest rage in barbeque utensils. It's the Reflexonic Viberec, the first male vibrator to be approved by the Federal Drug Association (FDA). The therapeutic device is designed specifically to treat men with erectile dysfunction and provoke ejaculation in men with SCI. Designed and developed by urologists and sexual medicine experts, Viberec has two pads that provide targeted simultaneous vibratory stimulation on both the top and bottom of the penis, which has been demonstrated to be effective in triggering ejaculation in men with SCI. Keep in mind that you won't be able to buy the Viberec at your local sex shop anytime soon—right now, you can only get one with a doctor's prescription. For details, visit www.reflexonic.com.



INTELLIWHEELS

IntelliWheels AGS, short for IntelliWheels Automatic Gear-Shift, is the brainchild of two University of Illinois students. When the product receives final approval for sale, it will be packaged as a set of two lightweight, quick-release wheelchair wheels which will replace your current manual wheelchair wheels. IntelliWheels AGS senses your movements and effort while wheeling, and intelligently shifts gears to adapt to any terrain. "When people ride bicycles, they are constantly shifting gears in order to keep themselves moving in the most efficient way possible," reads the company's website. "Remarkably, wheelchairs have been without that simple but effective technology for as long as they have existed. IntelliWheels is the first automatic gear-shifting system for manually propelled wheelchairs. By adding the IntelliWheels system on to your wheelchair, you will be able to push further, faster, and up steeper hills. It will save your shoulders without asking you to think about gears or change your behavior." Check out www.intelli-wheels.com for videos and information.



Laughing Spasms.

"Laughter during tough times is a necessity and a huge part of healing," says BCPA Vancouver Peer Associate Brad Jacobsen. In 2002, Jacobsen launched Laughing Spasms, a comedy event for people with SCI—particularly those recently injured—and their families and friends. This year's event will take place October 20th at the GF Strong gym, and will feature a number of top local comedians. This is a free event but space is limited. To reserve your seat, email [bjacobsen@bcpara.org](mailto:hjacobsen@bcpara.org). Laughing Spasms is made possible with the support of comedian Sean Proudlove. Check him out at www.seanproudlove.com.



Win an iPad with Tyze.

In September, BCPA will launch its Tyze network. Tyze is different than other social media in that BCPA is able to offer a number of super-secure, private, group and personal networks that Peers can join and use as a social hub to connect, care and collaborate. Some networks will be regional, and other networks will be created for a variety of special interests. Peers can also set up individual networks to organize appointments, schedule outings, manage attendant care, and share photos, stories and private documents. To learn more about Tyze and to enter to win an iPad, visit www.bcpara.org/We-can-help/Tyze.



Perfect Harmony.

Spend your November 5th evening listening to the sweet sounds of an award-winning choir in the spectacular atrium of Vancouver's Blusson Spinal Cord Centre. Spinal Chord is a gala evening in support of ICORD, a world-leading SCI research centre, and the Vancouver Cantata Singers. Enjoy fabulous hors d'oeuvres and bid on an array of unique auction items. ICORD's share of the proceeds will be used in part to fund the new SCI Community Resource Centre at Blusson. Doors open at 7 PM. Tickets are \$100 with an \$80 tax receipt. For more information or tickets, visit www.spinalchordgala.icord.org.

Accessible housing: think you've got it bad?

We know there's a critical shortage of accessible housing across British Columbia. But things could be worse. Take Russia, for example.

Six years ago, Dmitry Bibikow, a 32 year-old with paraplegia from Voronezh in Southwestern Russia, bought a fifth floor apartment in a building that had no elevator. He agreed to the purchase because the owners of the building promised him that they would soon construct an elevator.

That promise turned out to be empty. Exasperated by the inaction, Bibikow took matters into his own hands. His solution is pictured to the right. With the help of friends, the former sky diver and mountain climber designed and built his own personal lift, which can be operated by hand or with an electric motor.

Bibikow, who was injured in a climbing accident, can now use the winch lift system to enter or leave his apartment's balcony in a matter of minutes.

"Living on the fifth floor without a lift was a nightmare because I couldn't get in or out of the block without someone's help," says Bibikow. "It was like being in a prison—so I decided to sort it out myself. I used to do a lot of mountaineering before I had an accident which crippled me, so my arms are really strong and I can get from my flat to the ground and back up again before other people living on the same floor."

We caution you not to try this at home.





Back in the Bush

Don't expect to find Rob McKeeman sitting around the house when autumn arrives—or any other season, for that matter.



When Rob McKeeman sustained a complete T8 injury during a workplace fall in 1997, one of his deepest fears was not being able to enjoy the great outdoors.

"I was born and raised in Golden, in the heart of the Canadian Rockies," says McKeeman. "I have always had a love for the outdoors—hiking, fishing, guiding. After my injury there was a time when I did doubt that I would be able to enjoy my outdoor activities."

Doubt, however, soon gave way to desire, and as McKeeman healed, he began to explore the possibilities of getting back into the bush as a wheelchair user. "My first experience in the outdoors after my injury was to be able to go fly fishing with my cousin Bob up to Nine Bay Lake, in behind Parson, BC," he says. "The feeling to be once again outside was phenomenal."

That experience would pave the way for McKeeman to again be a complete outdoorsman. Today, he makes his home in Cranbrook, BC, where he enjoys fly fishing, sport shooting (silhouette, black powder, and trap), flying RC model airplanes, and sit-skiing.

Each year, McKeeman eagerly awaits the early signs of autumn, as they signal the beginning of hunting season.

"Hunting is an important part of my life," he says. "I have to be thankful and appreciative that I live in a country that offers this opportunity to experience the outdoors. Foremost, I'm thankful to experience and respect the beauty and grandeur of the country I'm surrounded by, and if I harvest an animal while I'm there, well, that's a bonus."

This year McKeeman will try his luck with a new crossbow. He generally hunts deer and elk, although this season he has a limited entry draw for moose.

Like other outdoorsmen with an SCI, McKeeman relies on modern all terrain vehicles (ATVs) and his own ingenuity and perseverance to modify them to meet his needs.

"I have a 1999 Bombardier Traxter ATV," he explains. "I had a roll bar made for it to assist in my transfers and for rollover protection. Other mods include back rest, seatbelt, and foot guards to keep my feet from falling off. I have mountain bike tires on my wheelchair and a unit called a FreeWheel—a 12 inch pneumatic tire which attaches to the footrest which makes it easier to get around on rough and uneven terrain. I also have a 1993 Suzuki Sidekick with hand controls. It's an awesome bush buggy for hunting."

McKeeman is able to hunt and shoot from his Sidekick, thanks to a Disabled Hunting Permit available from the BC



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Ministry of Forests, Lands and Natural Resources.

Common sense, says McKeeman, is also important for hunters with SCI. "It's always best to be with someone. Have proper equipment and clothing for all possible weather conditions. And make sure you have proper seating to avoid pressure sores."

His advice to others with SCI who want to enjoy hunting or other activities in the great outdoors is simple: if you have the right attitude, anything is possible.

"I believe there's a time that all people with traumatic injuries go through in order to be able to come to terms with what's happened and carry on with your life. To have the belief that you can still lead a productive life and do the things that you love to do, you need to improvise—and use other means to accomplish your goals. After I realized this, I knew I would be able to experience the outdoor activities I loved." ■



4

1. Modifications to a 1999 Bombardier Traxter allow travel deep into the back-country.
2. A sturgeon caught and released on the Fraser River.
3. Competing at the Golden Black Powder Shoot.
4. A whitetail deer brought down in hunting season.



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Botox and your Bladder

Allergan's recently completed study of Botox for use in neurogenic bladder has been deemed a success by the FDA—and that means we could soon see it become an approved therapy for Canadians with SCI.

BOTOX GETS A BAD RAP. Mention it and most of us think of aging Hollywood stars who've sought out Botox injections to smooth facial wrinkles and, in the process, have ended up with telltale blank, expressionless features—or worse yet, a permanently surprised look.

But Botox—which is actually pharmaceutical giant Allergan's trade name for botulinum toxin type A—is getting increasing recognition for its therapeutic qualities. Painful muscle spasms, crossed eyes, migraine headaches, and upper motor neuron syndrome are among conditions that are now being treated with Botox.

Today, Botox is one step closer to becoming a treatment for people with SCI who have an overactive bladder. On August 24, Allergan announced it had received approval from the US Food and Drug Administration (FDA) for the management of urinary incontinence in adults with neurogenic detrusor overactivity (NDO) resulting from neurogenic bladder due to SCI (or multiple sclerosis).

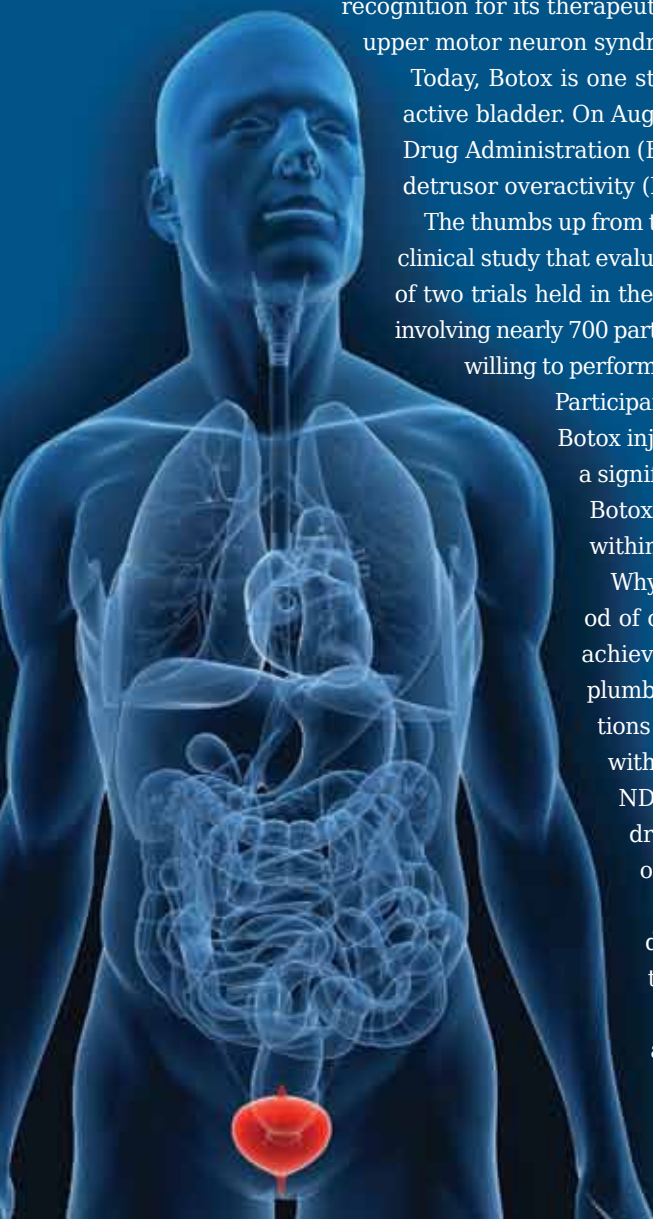
The thumbs up from the FDA is based on results from Allergan's DIGNITY program, a double-blind clinical study that evaluated the safety and efficacy of Botox for this specific use. The study consisted of two trials held in the USA, Canada (including a location in Victoria) and various other countries, involving nearly 700 participants with either SCI or multiple sclerosis. Eligible participants needed to be willing to perform clean intermittent catheterization to remove urine from the body, if required.

Participants were randomly selected to receive either a single treatment of placebo, or Botox injected into the detrusor muscle of the bladder. The results showed there was a significant reduction in frequency of incontinence in the participants treated with Botox compared to those given the placebo. Treatment was shown to be effective within two weeks and lasted for approximately eight to ten months.

Why is this important? Clearly, clean intermittent self-catheterization is the method of choice for most people with SCI. The fact that emptying the bladder can be achieved without foreign material remaining permanently in the body's internal plumbing has shown many advantages—primarily less complications such as infections and better outcomes in terms of volume (providing, of course, it's performed with the greatest attention to technique, timing and cleanliness). But the dreaded NDO is a reality for many who self-cath, and so treatment using anticholinergic drugs to relax the bladder is necessary to prevent accidental leaks which are not only embarrassing but can compromise physical and mental health.

The problem is that many people don't respond well to or tolerate these drugs. And that's where a single Botox injection, administered every eight to ten months, may ultimately provide a much more trustworthy solution.

Dr. Andrei Krassioukov, a staff physician at GF Strong Rehabilitation Centre and Director of UBC's Autonomic Research Unit, believes Botox will provide significant benefits for some people with SCI.



"During clinical trials, injections of Botox directly into the smooth muscle of the bladder wall resulted in relaxation of the bladder wall, increase in bladder capacity, and significant decrease in pressure that the bladder generates during contractions, which is dangerous for the kidneys," says Krassioukov. "For the patient, this means an increase in bladder volume, less frequent catheterizations, more time staying dry, and less or no oral medications that have many side effects."

Keep in mind, however, that Botox is a powerful, bacteria-produced neurotoxin which blocks the release of the chemical that causes muscles to contract. As such, it has its own set of potential side effects: urinary tract infections, insomnia, constipation, muscle spasms, painful urination and profuse sweating are all possibilities. However, Allergan's study showed that, when these side effects occur, they generally do so within the first few days and last only for a short time. Overall, the treatment was generally well-tolerated in the majority of participants.

One of those participants is Mark Triner, a 59 year-old from Whitecourt, Alberta. Triner was involved in an accident in 2008 that resulted in injuries at two locations in his spinal cord— C6-7 incomplete, and L8-9 complete. Triner cathes with a little assistance from his caregiver five times a day, using pre-lubricated catheters one time only. Prior to the study, he was prone to urinary tract infections and accidental leaks due to NDO.

In 2010, Triner agreed to be part of Allergan's study at an Edmonton location overseen by urologist Dr. Gary Gray. He has received two sets of Botox shots—one in June 2010, and one this past spring.

"I suppose we all have different sets of conditions, but my experience has been very positive," says Triner. "When I had the first treatments there was some bleeding from an accidental tear in the removal of the metal cath. This is not normal and didn't happen the second time. It was a very minor deal. I had a (allergic) reaction to something in the procedure and I had a Benedryl tablet and a little rest, and all was well. I took a Benedryl right after the second treatment and there were no problems at all."

What about results? "I had no more accidents for nine months after first shots, and it's now five months with no accidents (after the second shots). I usually only cath large volumes—up to 1,000 millilitres—after I've eaten at a restaurant—I think the extra salt and additives make me retain fluids, and I don't cath expected volumes at my cath times. Even with these extra volumes, no accidents. Since taking Botox I haven't had a bladder infection. I was getting about three per year and had to use antibiotics."

Triner is also doing what he can to stretch his bladder muscles. "My hope is that through the heavy exercise program I do that I won't need any more treatments. But if I do need them and there are no added side effects, I guess I'll continue."

So when can the rest of us expect to be able to try this new therapy in Canada?

"We intend to pursue licenses worldwide in order to secure access to this valuable minimally-invasive treatment option for as many patients as possible," says Naziah Lasi-Tejani, Allergan Canada's Manager of Corporate Affairs & Public Relations. "To this end, we have submitted a license application to Health Canada and intend to also work with other national healthcare authorities to seek licenses for this indication. At this time, we anticipate receiving information about our filing by next year, but cannot comment on the exact timelines. What we can tell you is that Health Canada has a robust process for reviewing data associated with an investigational drug that factors in the drug's safety, efficacy and quality of data to assess the potential benefits and risks of the treatment. Any questions about the specifics of this process should be directly referred to Health Canada."

Given the FDA approval and a recent "positive opinion" from the Irish Medicines Board which paves the way for approval in Europe, it seems likely that Health Canada approval will be granted. Meanwhile, if it does, questions remain. How much will it cost? Will provincial healthcare plans cover the costs? What about private insurance coverage?

Watch for answers in future issues of *The Spin*. ■

Heterotopic Ossification: Therapy on the Horizon?

Research from the Perelman School of Medicine at the University of Pennsylvania and the Northwestern University Feinberg School of Medicine shows that a brain chemical called Substance P appears to promote heterotopic ossification—and that eliminating Substance P dramatically reduces it.

Heterotopic ossification is the formation of the extraskeletal bone, and is a common and serious complication for some people with SCI. It is most common in the hips and knees, where bone-like material lays down in soft tissues such as muscles, tendons and ligaments. The joints involved can eventually fuse.

The researchers leading the study say that the discovery of Substance P (which is a brain neurotransmitter) and its role is significant,

in that there is now a molecular target for drugs to potentially prevent and treat abnormal bone growth.

"This work establishes a common mechanism underlying nearly all forms of heterotopic ossification including that caused by brain and spinal cord injury, peripheral nerve injury, athletic injury, total hip replacement and fibrodysplasia ossificans progressiva," says paper co-author Dr. Frederick Kaplan. "These novel findings usher in a new era in understanding of these complex disorders."

In the paper, published a recent online edition of *The Journal of Cellular Biochemistry*, the researchers report that knocking-out Substance P arrested the development of the extraskeletal bone in an animal model.

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Go-Go Mom

Many BCPA peers embark on the journey that is motherhood. Teri Thorson shares her story 18 months in.

Teri Thorson has worn many hats in her lifetime—some before the October 1996 car crash that left her with a C6/7 complete SCI, and many more after. She's been a model, Olympic athlete, go-go dancer, fashion designer, inspirational speaker, and a wife. But she says her greatest satisfaction has come from playing the role of mother since the birth of her son Lucian 18 months ago.

The decision to have a child didn't come easy. "I can't say I always wanted to have a family for sure—I was always on the fence about it," says Thorson.

Thorson's SCI wasn't the only factor in the decision. Brad, her able-bodied husband, suffers from Crohn's disease and was fearful that he would pass the disease on to their child.

A year after they were married, the couple overcame their concerns, and their desire to have a child won out.

Preparing for pregnancy, birth and motherhood took time and effort. But Thorson insists that it's the same for any mother. "Most everything I experienced through pregnancy, birth and post partum were things that every mother goes through, injury or not," she says. "It was all very normal."

In the time leading up to pregnancy, Thorson's focus was achieving optimal health. "In preparation for pregnancy, I read lots of books, blogs and websites," she says. "I made sure I was in good shape, I ate well and took the required vitamins. I also established communication with a physiatrist, occupational therapist, physiotherapist, nutritionist and sex therapist, all of whom provided me information on what to look forward to in my pregnancy and delivery."

The list of specialists grew once Thorson became pregnant. "I was seeing an obstetrician, an anesthesiologist, a hematologist, a dietitian, a lactation consultant and the coordinator at the hospital I was planning on delivering at. We did a pre-natal class and I connected with my community health nurse to get some help in my home as I got bigger and less independent."

Thorson was impressed by the professionalism of her support network. "I would say that the attitude and willingness from my physicians was very positive, but of course there were a few that wanted to err on the side of caution," she explains.

In particular, her physicians were concerned with her request to labour at home. Like others with quadriplegia, Thorson is susceptible to autonomic dysreflexia—a dangerous elevation of blood pressure in response to pain that can't be felt because of paralysis. "Because of that risk, some doctors wanted to admit me before my due date and induce labour. However, since we are only 10 minutes away from the hospital, they relented and allowed me to reach my due date at home."

Thorson also had a specific request when it came to the epidural. "I agreed to have an epidural, but I wanted it administered after I went into labour, which they agreed to but wanted to site it first. Unfortunately, when the needle was going in for the epidural, I went dysreflexic. So I agreed to start the epi-

dural right away on a very small dose and on a pump so I could increase the dosage as I felt I needed it when labour came on."

After a successful vaginal delivery, the new parents pulled together a fabulous support team for their return home, where Thorson began her long recovery. "After I had the baby we had a doula (a person who provides non-medical support to women and their families during labour and childbirth), a nurse, a care worker, and a lactation consultant, all helping me and the baby. And my husband, friends and family provided me with invaluable support and advice and continue to do so today—without such great support, I don't know if I could do it."

Interestingly, Thorson didn't make any home modifications, or make or purchase any special equipment to assist her with daily "mom" chores. "I made the choice not to, as I had—and still have—a nanny to help me when my husband is at work and when I run into any issues," she says.

However, Thorson is the first to admit that being a mom with a SCI has had its challenges. "When Lucian first arrived home, I couldn't get him in and out of his bassinet and I gave up trying to change his diaper as my hand function was just not good enough. I could get him undressed but not dressed, I could get him out of his high chair but not into it. I couldn't lift him up onto my lap from the floor and I had to play with him on our bed as I couldn't get down on the floor. I couldn't take him out in his stroller or in and out of his car seat either, although at least he sat well on my lap so I could wheel around with him."

As Lucian gets older, however, some of these difficulties have all but disappeared. For example, she can now easily get Lucian out of his crib and off the floor as long as he helps.

Thorson admits that the hardest part of motherhood right now is not being able to keep up with her very active son. "He still sits well on my lap," she says. "But when he wants down, he's off and running—usually to places I can't get to. I have a power chair now too, but even with that I can't get everywhere he goes. I can't take him out on my own, so when we're alone it doesn't take long before he's bored and is into everything. Luckily I've learned a few tricks with trial and error along the way to coerce something from him. It's all about communication."

Along the journey of motherhood, she's had to learn to live with strangers assuming the Lucian isn't her son because she uses a wheelchair. And it's still sometimes difficult watching others do activities with him that she can't because of her injury.

But she wouldn't change a thing.

"Every stage Lucian goes through brings new challenges—but also so many great successes. The hugs, kisses, love and happiness he shows us makes it all worth it and assures me that we're doing the right thing."

Would Thorson recommend motherhood to other women with SCI? "I think it's totally up to the individual, disability or not. I don't think having an SCI should stop you from having a family if you really want one. Yes, there may be a bit more risk involved, but we have just as much to offer as any other mother." ■

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I married Jason, a C5 quadriplegic, in 2007, and we've been inseparable globetrotters ever since. Gazing in awe at the Christ the Redeemer statue in Rio de Janeiro and the Great Pyramid on Giza Plateau, wandering through the streets of Rome, watching the sun rise on the ancient Inca Trail of Machu Picchu, snorkelling with sharks in Bora Bora, being serenaded by gauchos while enjoying fresh guacamole in Zihuatanejo, and watching tango dancing buskers in Buenos Aires—we have fallen in love with seeing this world.

We've travelled to 27 different countries, and we've done almost all of this as passengers aboard cruise ships.

Cruising is simple, easy, and luxurious. Between adventures in port and complimentary room service, it's easy to forget there is world that exists outside of your cruise vacation. We here on the west coast are particularly lucky: cruise ports abound and are easily reached by train, plane or automobile. A few quick hours and you could be embarking on your own cruise escapade.

Flying to a resort or destination has its own merits. But with cruising, you don't feel stuck in one place. Every morning you wake up and you're somewhere new, and since you've taken all of your stuff with you, there's no need to worry about the arduous pack-and-unpack routine.

Perhaps most importantly, cruise ships are generally constructed to Americans with Disabilities Act (ADA) standards. You also can rest assured that no matter what accessibility features you might need, they'll be on board, ready for you. And cruise ship staff are also service industry experts, ready to help any way they can.

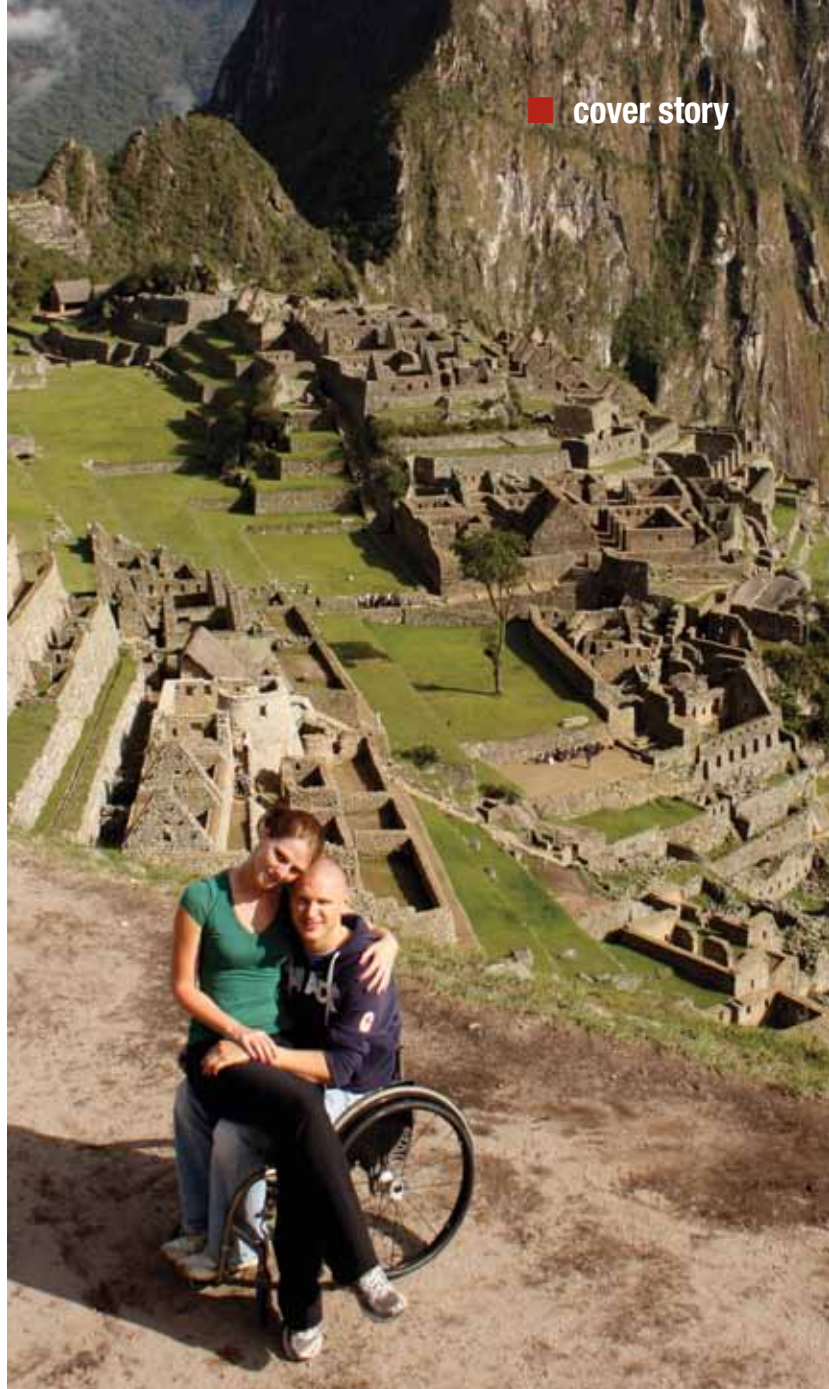
See the World by Sea

For people who use wheelchairs, cruising is an accessible, comfortable way to get a tan—or travel the globe.

■ By Amy Billingsley

Do you want a mai tai without getting out of your deck chair? Done. Do you want a massage while gazing out at stunning scenery? Just ask! The staff on board is there to help you, and by the end of your cruise you'll be saying, "Let's do that again!"

If all of this has been enough to convince you to look into



a cruise this winter, there are five main areas you need to consider. Dialing in some choices in each of these areas will help to shape your vacation experience.

SELECT A BUDGET: For any vacation, setting a realistic budget helps you set the tone for the rest of your planning process. There's a cruise for every budget.

Remember that you need to consider travel to and from the cruise port, pre and post-voyage hotels, excursions, onboard gratuities (typically \$10 to \$12 a day) and any extra onboard expenses you might incur. One thing I can't stress enough is that cruising doesn't have to be expensive. Jason and I budget about \$100 a day per person for a cruise and we rarely have trouble sticking to that.

CHOOSE A PORT: Depending on your comfort level with travel you can get to some great embarkation ports easily. Vancouver has its share of outgoing cruises depending on the season, but Seattle, Los Angeles, San Diego and Hawaii are also all reached with short flights from Vancouver. These require little travel time and minimal expense, but the places you can cruise from them are amazing: Asia, Alaska, Australia, South America, South Pacific, and the Panama Canal can all be

reached from our side of the continent.

If you decide to venture over to another coast, be sure to book flights with longer connections—at least two hours. Passengers who use wheelchairs are the first onto a plane but the last off, so allowing extra time to connect will cut down on any travel stress. If you're travelling with your own chair, make sure you gate-check it—this means you'll stay with your chair right to the plane door and that it will meet you there when you get off the plane. This way, you'll have peace of mind that your chair is coming with you on all the legs of your journey. If you need an aisle chair to board the plane, make sure your travel agent or the agent at the check-in counter knows this.

CONSIDER AN ITINERARY: For your first cruise, I recommend something simple and nothing over seven days. One of your first considerations should be how

many ports will require you to use a tender, a small boat used to ferry passengers between the cruise ship and the shore (this is often noted on the itinerary). Newer cruise lines have a ramp that can be used to get you easily into a tender boat, but you may need assistance getting seated. Cruise lines are staffed for this, but there are weight restrictions, so always ask before you book.

Once you have that first cruise under your belt, you may want to become a little more daring. The internet is a vast resource and you're never the first person to stop in a port in a wheelchair—get involved in travel forums, ask questions and take some chances. My constant advice is to make sure you pack a sense of humour. Not everything goes right all of the time, so enjoy the ride.

SELECT A SHIP: We live in the days of the mega ships; for example, the Oasis

TRAVEL ACCESSIBLE BC: HORSEFLY

If you enjoy exploring our province, consider a stop in Horsefly—a small community in the heart of Cariboo country that prides itself on superb wheelchair accessibility.

Located about a six hour drive north of Vancouver, Horsefly is a charming village of some 1,000 friends and neighbours who have long-known how to warmly welcome visitors. Its history goes back to 1859 when it was the site of the first gold discovery in the Cariboo. Horsefly is part of the now well-promoted "Gold Rush Trail" and is known far and wide for its great recreational opportunities, skilled artists and craftsmen, and great natural beauty.

In recent years, the village has gained a sparkling reputation for its wheelchair accessibility. Every business in Horsefly is wheelchair accessible, as are public facilities such as the library and the community hall. Accessible public washrooms were added at both the local provincial campground and in the town itself.

Another reason the village is on the map is its annual Horsefly Salmon Festival, held every Labour Day Weekend. During the event, tourists and visitors gather to watch one of BC's most prolific sockeye salmon spawns. It can now be thoroughly enjoyed by wheelchair users, thanks to a recently-opened wheelchair accessible trail that meanders about 1.5 kilometres along the Horsefly River. The trail begins at the bridge in Horsefly and follows the river to the spawning channel before winding through some large cottonwood trees and ending back at the bridge.

One person behind Horsefly's accessibility is Bruce MacLeod, who was born in Horsefly but left the town in 1958. When Bruce and his wife Faye returned in 2006, he found he was the only resident of the town who used a wheelchair.

"There was a very steep ramp to the Community Hall that I needed

help to get up," says MacLeod. "The Cariboo Regional District had an open house meeting, and I asked our representative Duncan Barnett if there was any funding for ramping. The end result is that the Horsefly Community Club received a \$16,000 grant to ramp the hall, and with \$5,000 extra from the BC Freshwater Fisheries Society, had enough to build an accessible fishing dock at nearby Tisdall Lake."

Since then, accessibility has become the norm in Horsefly. Other improvements followed, and local businesses embraced the concept.

"Once done, it's quickly accepted by the general public," says MacLeod. "No one even thinks twice about the issue any more. If there is a problem, the residents fix it, and since we're such a small town, there wasn't much to fix anyway."

Accessible accommodations can be found at Lynn's Bed, Breakfast & Bale with three accessible suites and two shared bathrooms. Phone 250.620.3310 for reservations. Remember, when you come to Horsefly, you won't find buses, taxis or even a doctor. You will find accessibility, businesses and attractions that are all within easy walking or wheeling distance, and the warmest of welcomes.

Check out www.horsefly.bc.ca for more information.



Bruce MacLeod officially opening Horsefly's wheelchair accessible salmon spawning trail

of the Seas is four football fields long. But for every mammoth ship, there's a small one lurking in its shadow. Depending on the type of experience you're looking for, I suggest sticking to midrange ships. These typically accommodate 1,200 to 1,500 passengers. And that means traffic on and off the ship will be minimal, making it easier for you.

Once again, the great thing about cruising is that ships are designed to be accessible. Between ramps, lifts, and reserved seating, there isn't anything onboard that you'll be excluded from. The world onboard is open to you. Ships completed after 2006 are some of the best for accessibility, but refurbishments to older vessels mean you should be okay anywhere you travel.

CHOOSE A ROOM: Inside, Ocean view, Balcony, and Suite are the main stateroom categories. Each offers several levels of pricing within it. You can expect a larger stateroom than your able-bodied counterparts, which pro-

vides ample space for your chair and any equipment you might need. Roll-in showers, emergency alert pulls in the washroom, hand rails by the toilet and a lower roll-under sink are all features of your accessible stateroom.

Like real estate, it's all about location. Staterooms located in either the mid-ship or back part of the ship are best for motion. Some companies do offer accessible staterooms at the absolute front of the ship. This is something I've experienced, and I would suggest you avoid.

Once you've made some decisions in these five key areas, you'll be ready to move forward and book a cruise.

Bon voyage! ■

Amy Billingsley is a travel agent with Expedia CruiseShipCenters Burnaby, where she specializes in accessible travel. She has booked and organized countless trips and sightseeing tours. She has a blog (www.curbcut.com) where she's able to share information she and Jason wish they'd known before they'd set sail, solutions they figured out along the way, and tips to get the most out of your travel experience. If you have any questions about travel and cruising, or are ready to take the next step in planning your cruise vacation, please call Amy at 604.299.7447 or email her at abillingsley@cruiseshipcenters.com.



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WORK SAFE BC

No Excuses!

Thanks to the BC Wheelchair Sports Association's Bridging the Gap program, there's nothing to stop you from getting involved in some great sports.

Bridging the Gap, the wildly successful program that introduces wheelchair users to the world of sport, now operates in every Canadian province. "Have-A-Go Days" are held regularly in rehab and community centres across Canada to demonstrate adapted sports and let anyone interested try them out. These events are led by peer athletes, including some Paralympic athletes, who are identified by local coordinators.

The program was developed by the BC Wheelchair Sports Association (BCWSA) before being exported across the country, and it continues to thrive in our province.

Holly Tawse, program coordinator, says that Bridging the Gap—BTG for short—introduces sport to approximately 500 people per year throughout B.C. "The program has reached roughly 5,000 people since its inception," she says. "Of these, roughly 70 percent have an SCI. Retention is also excellent. About 60 percent continue in the sport they've been introduced to. And 75 participants have gone on to high performance sport—for example, participating in national championships and international competitions."

What makes the program such a success?

"The emphasis of our events is having fun and providing a non-threatening, non-competitive environment for new athletes to be introduced to wheelchair sports," says Tawse. "The support and guidance that our athlete peer mentors provide at these sessions is invaluable to the program and the continued success of it. And since sport wheelchairs can be expensive, the wheelchair loan program is a huge draw for participants and allows participation in sport programs at a low cost."

Other keys to success, says Tawse, are continued follow-up with participants and communities where events are held, and ensuring there is the capacity to sustain and support regular wheelchair sport programming in that community. "For example," she says, "a wheelchair rugby Have a Go Day was held last December in Squamish. Three months later, a weekly wheelchair rugby program was established."

Along with rugby, basketball, tennis and athletics make up the four core sports offered by Bridging the Gap program across Canada. "We also launched a para-throws program this year—shot put, discus, javelin, and club throw—as part of our broader wheelchair athletics pro-



gram," says Tawse. "Also, at GF Strong events, various partner organizations are invited to present their sports as well—for example, disabled sailing and curling."

She says that the value of introducing people to wheelchair sport can't be understated. "There are so many benefits—health and fitness improvements, increased independence in both sport and daily living, opportunities to make new friends, increased self-confidence, and an overall increase in quality of life."

Twenty-five year old Tristan Smyth from Maple Ridge agrees. Smyth was injured this January while skateboarding. As a patient at GF Strong Rehabilitation Centre, he was introduced to wheelchair racing by BTG. This summer, just months after being discharged from rehab, Smyth won three gold medals at the Western Canada Summer Games in the 200m, 400m, and 1500m. He's also started playing wheelchair basketball and sledge hockey—and volunteering

as a mentor with BTG.

"I may not have known it at the time, but looking back on it and taking into consideration the appreciation I have for where I am now and the world of opportunity I now have ahead of me, I would say my introduction to wheelchair sport and athletics was a very important moment for me," says Smyth. "I would recommend following the advice and direction of your therapists first. But, yes, I would encourage anyone to try something new. I developed a personal attitude of being open to trying anything at least once, because you never know—if you try it, it just might click." ■

For more information about Bridging the Gap and Have a Go Days, contact Holly Tawse, BCWSA/BTG Program Coordinator at holly@bcwheelchairsports.com or 604.333.3526; or Kevin Bowie, BCWSA/BTG Program Coordinator at kevin@bcwheelchairsports.com or 604.333.3524.

Upcoming BTG Events

Have a Go at Tennis

- Tuesday, October 11th, 3 - 4:30 PM, GF Strong Rehab Centre: Have a Go at Tennis
- Tuesday, November 22nd, 3 - 4:30 PM, GF Strong Rehab Centre: Have a Go at Tennis
- Saturday, October 22, 4 - 7 PM, Delta Town and Country Inn Courts, Delta: Halloween All-Comers Wheelchair Tennis Night
- Saturday, December 10th, 4 - 7 PM, Delta Town and Country Inn Courts, Delta: Holiday All-Comers Wheelchair Tennis Night

Have a Go at Basketball

- Saturday, November 5th, 12 - 4 PM, Douglas College, New Westminster: Fall All-Comers Wheelchair Basketball Day

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The Simple Things in Life

Five simple household items that make my life easier.

■ by Barry Lindemann

“It has long been an axiom of mine that the little things are infinitely the most important,” once wrote Sir Arthur Conan Doyle, author and creator of Sherlock Holmes.

I couldn't agree more. In a world full of expensive assistive devices and complicated gadgetry, it's the simple things that often seem to lead me to greater independence. Here's five of my favourites.

1. TIC TAC BOXES: If you're quadriplegic and can't open prescription pill bottles yourself, look no further than the lowly Tic Tac box for an easy and low-cost solution. Dump out the Tic Tacs (or freshen your breath), pour in your pills or medication, and you're all set. Flip the box's top open with your teeth, and shake out the number of pills you need.

2. STRING: With my limited hand function, I get really tired of dropping things—like my phone and remote controls—and then having to wait for someone to come by and pick them up. One answer is to tie or attach a short loop of string to each item. This allows me to hook a finger, a stick or a reacher through the loop for easy retrieval.

3. STEEL KEY RINGS: These are another unsung hero of the disability world. Having difficulty pulling a zipper up or grabbing a set of keys? Just throw a semi-large steel key ring on, and you'll find that even the most uncooperative finger can hook in and do the job when no able-bodied helping hand is around. And a bonus is that a magnetic reacher can latch onto the key ring that's attached to items that somehow find their way onto the floor.

4. WIRE COAT HANGERS: Look no further than your local dry cleaner for



this handy helper. You can bend a wire coat hanger into any shape you need to get those extra few inches of reach. Give me a wire coat hanger and throw a loop of string or a steel key ring on a lot of the everyday items that I need to get through a productive day, and it's hello to independence. And, while I was never much of a fisherman, trying to hook what I need can sometimes be a pretty fun challenge.

5. ROUND YOGA BOLSTER: When my aunt gave me my first yoga bolster, it changed my life. A yoga bolster is just a round, firm pillow about two feet long. I use it when I go to sleep at night to keep my feet up and get the swelling to go down in my legs and ankles. During the day, when I need a little rest and don't

want to have someone help transfer me to bed, I just rest one end on my knees and the other end under my chin to take the weight off my neck and shoulders. Voila, instant relaxation! I just shut my eyes and 15 minutes later I'm a rested new man.

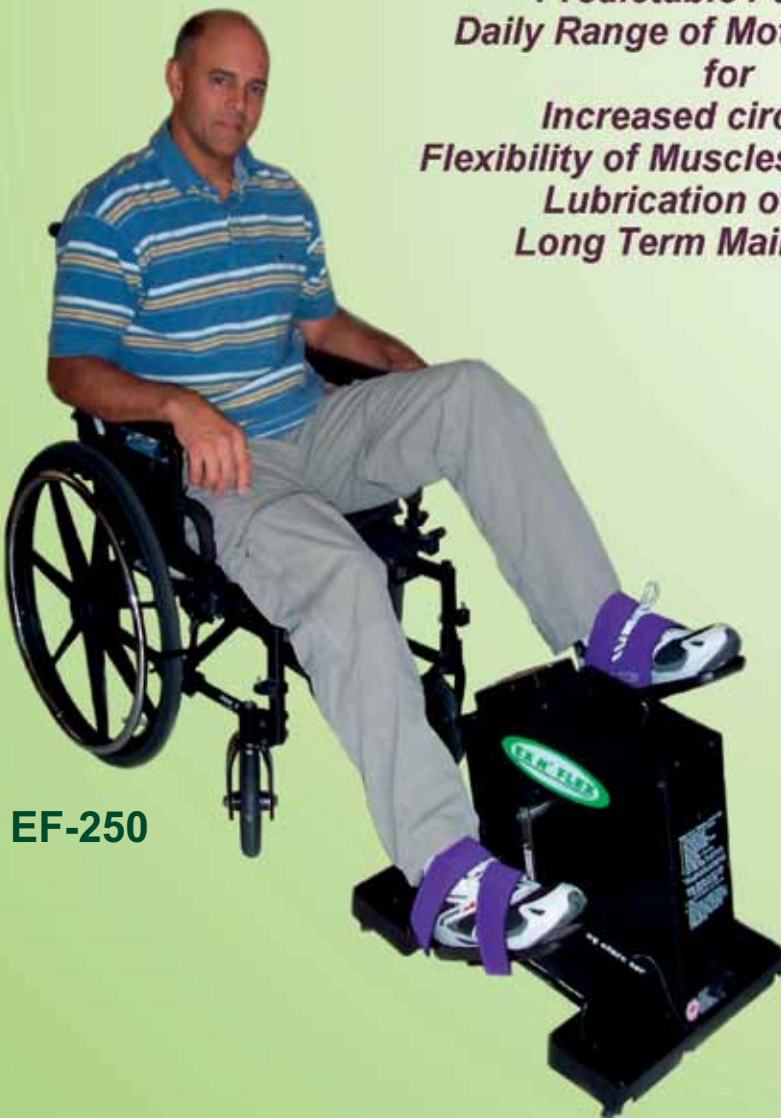
Keep it simple! ■

Barry Lindemann is a Calgary-based Client Services Coordinator for CPA Alberta. In addition to pursuing the simple life, Barry also enjoys having CPA members from across Canada visit his accessible Las Vegas condo—visit www.barrysvegascondo.com for more information. Do you have a simple solution that's helped you be more independent? Email us the details at thespin@bcpa.org and we'll let other readers know about it.

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Thank you to Wheelchair Basketball Canada for the action shots of Chantal Benoit, white, and Kendra Ohama, black above.
More information is available on these two veterans of the women's National Program in Canada on the web site at wheelchairbasketball.ca