

The Newsletter
of the friends of
the Manx
Diabetes Centre.
We are the
support Group of
the IOM Diabetic

The Diabetic

All monies
collected are
spent on the Isle
of Man.
No monies are
sent
off Island

The Best and most Informative Diabetic Newsletter on the Isle of Man

Issue number 19

Date: March 2008

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LEADING FROM THE FRONT

Caaryjn Laare Chingys-Shugyr Vannin

A Charity registered in the Isle of Man. Charity number 894.

All monies collected from whatever source will be used exclusively on the Isle of Man for the benefit of diabetics and their medical carers.

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Age Concern, how can they help?

WHERE HAS ALL THE MONEY GONE?

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How can they help?

AGE
Concern
ISLE of MAN

The Editor asked Penny Creighton MBE of Age Concern for a contribution for *The Diabetic*, explaining what Age Concern was and what Age Concern Isle of Man do.

**Feegans
Deli**

Food to eat in
Food to take away
Food for thought

Are all available at
Feegan's Internet Lounge
8 Victoria Street, Douglas



Penny Creighton MBE Chief Executive & Cliff Thomas who raised funds for Age Concern by taking part in the Parish Walk

This is what Penny had to say: -

Age Concern is a local charity working in partnership with older people. It is our 15th Birthday this year!

Age Concern can support anyone over 50 and anyone who has a disability.

Our aim is simple – to help everyone make more of life. The things we do ensure that older people have the opportunity to live life to the full. We do that in ways that may surprise you.

We believe that age should be valued. We believe that there should be just as much choice available to the older generation as to the young, and we believe in your right to stay independent for as long as possible.

We are here to support and assist you in a variety of ways with 32 caring professional staff and over 100 exceptional volunteers.

These are some of the things we do.

We work in partnership with Social Services and deliver Day Care in 5 centres around the Island.

We have so much on offer to help you enjoy your day at any one of our centres. Activities include games, crafts, social gatherings and excursions.

We also provide lunch and refreshments through the day, and of course our clients are collected and returned each day by one of our fleet of minibuses.

Our Advice and Information Service is one that you can trust and it is free.

We receive over 60 calls a day and offer help and information on a wide range of issues. These include benefit advice and help with applications, income tax returns, UK tax issues, the financial implications of going into a care home, wills, enduring power of attorney, advocacy services, arbitration and much more!

We have 5 Computer Drop-in-Centres to help older people all over the Island with the latest computer technology. The Centres provide free access to computers and the internet. You can learn whatever you want at your own pace and you can drop in at any time during opening hours.

We have 4 Lunch Clubs. These are in Castletown, Port Erin, Laxey and Union Mills.

At any one of these you can have a delicious lunch for £4 and meet new and regular friends.

We have a ‘man with a van’ who offers practical support services for the over 50’s.

Living comfortably in your own home is key to retaining independence.

The type of repairs may include DIY jobs and maintenance that you usually carried out yourself in the past, but no longer feel safe to do now.

We have two fundraising shops, one in Port Erin and one in Ramsey. These are run by marvellous volunteers who help to raise much needed funds.

We also have many fundraising events throughout the year that appear on our website and in the local press.

We are a ‘Freedom to Flourish Champion’ giving ‘Older People Freedom to Flourish’ and have joined other ‘Champions’ on a most exciting inter-generational initiative called ‘Tell Me What it was Like’.

Students in Year 6 and Year 9 from all the Island schools are interviewing older people about their life experiences and all of these stories are being hosted on a special website - the address is www.thetellmeproject.com.

We have funding for 4 years from AXA and the H & S Davidson Trust. Everyone is very excited about this project and hopes that the idea will go global!

Our 15th Birthday will see the launch of another very special project, our ‘Landmark Appeal’. We are going to build a ‘Healthy Living Centre’ for all older people on the Island. We have to fund raise one and a half million pounds to supplement our own funds.

There are many more exciting things happening. To find out more please call us on 613044.

We have five lines open and are waiting to hear from you. Above all we strive to make daily life better now and in the future.

For more information you can find us on www.ageconcerniom.com

We are most grateful to Penny for explaining some of the activities that are available to you at Age Concern Isle of Man.

It is now up to you to get in touch with them and take advantage of the facilities that they have so generously on offer.

So pick up that phone and ring 613044 now.

Where has all the money gone?

The DHSS was given a considerable amount of money by Tynwald for the Minister and his Advisors to sort out the waiting lists at Noble's Hospital.

Has there been any improvement?

People come to *The Diabetic* with their problems and it appears that the waiting list system has not improved one iota irrespective of whatever the DHSS wants to kid themselves into believing it has.

So where has all the money gone that was supposed to be used to resolve this problem?

Could it be that the system has an inherent flaw that cannot be addressed?

Patients come to *The Diabetic* with their complaints that they cannot see anyone for months.

We shall only for the time being quote what has happened to three patients.

We shall tell you about the miracles but not the saints.

1) A gentleman needed his cataracts operated. He went to hospital where he was told that to have the operation he would have to go on the waiting list which was considerable, 18 to 20 months.

However if he wanted to do it privately he could have them done in a couple of weeks.

This gentlemen paid over £5,000 to have them done.

Great - isn't this what our DHSS was given money for by Tynwald to resolve the waiting lists?

2) A lady needed her back seen by a consultant because of problems she was having with her legs and could not walk properly.

Sorry she was told, but there is a considerable waiting list and it would take months and months for them to see you.

However if you want to go privately they can fit you in within a couple of weeks.

Great - wasn't this what our DHSS was given money for by Tynwald to resolve the waiting lists?

3) A little girl of nine has what appears to be hearing problems. Sometimes she can't hear what is being said in class or by her swimming instructor.

What were her parents told?

You have guessed it.

You can see the consultant but it will take 18 months for them to see the little girl, but if you want to go privately, they can see her within a couple of weeks.

The family cannot allow this little girl to have 18 months of difficulty with her schooling and with her problem, so, you know the outcome.

Her grandmother agreed to pay for them to see her, as granny and her family did not want to continue with this problem during the coming 18 months of waiting as the implications are too horrendous to contemplate. She could be run over by a car she may not hear coming.

Great - wasn't this what our DHSS was given money for by Tynwald to resolve the waiting lists?

Is this the new no waiting list system implemented with the money Tynwald gave the DHSS,

The whole waiting lark is absolutely disgraceful. If you have or hear of similar problems let us know

The DHSS is playing with the emotions of, and the wellbeing of the patients, in particular those who are unable to pay to go privately.

Surely this was never the intention of those good people that originally drafted the Isle of Man Health Act.

All this ensures that people who should be seen are pushed back in the queue to accommodate these paying guests.

Our three examples are happening across the board at Noble's Hospital every time a patients needs to see a consultant.

What is the DHSS doing to circumvent the waiting lists?

This is what the DHSS should be addressing instead of going off at tangents with crackpot ideas to try to save monies at the expense of the Manx patients without even considering the future ramifications of the DHSS actions.

WHERE HAS ALL THE MONEY GONE?

So what happened to the money given to the Minister by Tynwald to shorten waiting list?

WHERE HAS ALL THE MONEY GONE?

Can some MHK ask the Minister this question in the House or in Tynwald?

“WHERE HAS ALL THE MONEY GONE? WHAT HAS IT BEEN USED FOR, OTHER THAN THE PURPOSE IT WAS GIVEN FOR, ELIMINATING WAITING LISTS?”

WHAT’S AN AUDITOR?

Someone who arrives after the battle and bayonets all the wounded

The New Manager for Ramsey and District Cottage Hospital.

In a press release the Department of Health and Social Security announced the appointment of Janet Grib as the new Ramsey and District Cottage Hospital Manager.

Janet was born in Yorkshire and started her nurse training in Sheffield in 1969, before qualifying in 1973.

Janet worked in the NHS and Independent Sector as a Ward/Home Manager, before moving to the Isle of Man in 1990 to take up the role of Clinical Nurse Manager of Newlands.

Her next appointment was Clinical General Manager of the Medical Elderly Directorate at Noble’s Hospital and served in this post until October 2004.

During this time Janet was also Acting Director of Nursing Services.

Prior to her appointment as Ramsey and District Cottage Hospital Manager, Janet had spent the past three years with the Social Services Registrations and Inspections Unit.

On her appointment she said that in her short time at the Ramsey and District Cottage Hospital, her predecessor, Brian Presley, and the staff had been very supportive and she had been delighted with the extremely friendly and welcoming environment at the Hospital.

She said she was also very impressed with the level of skills and professionalism of the staff,

She added that she looked forward to contributing to the future development of the Ramsey and District Cottage Hospital, for the benefit of the people of Ramsey and the Island as a whole.

The Minister for Health and Social Security explained that he was delighted that in Janet, the

Department had found the ideal appointee for this key role.

Her vast experience in the Health and Management profession, he pointed out, will help to continue the development of services provided at Ramsey and District Cottage Hospital.

The Diabetic would like to wish Janet all the best on her new appointment, and welcomes the expertise that she will bring to the post, which will be for the benefit of the people of Ramsey and all those that use the Ramsey and District Cottage Hospital.

THIS PRODUCT MOVES WHEN IN USE

LABEL ON A CHILD’S SCOOTER

Obesity and the Isle of Man

So what has been happening on the Obesity front?

The Friends of the Manx Diabetes Centre welcomes the programme as rebroadcast by Manx Radio of the Forum on Obesity debate that we organised at the Manx Museum in 2004.

We understand that Mr Roger Watterson will also be broadcasting an updated situation on Obesity in March, for which we thank him.

Have things been dormant since the Friends of the Manx Diabetes Centre organised the first Obesity Forum at the Isle of Man Museum on 20th May 2004?

We are pleased to say that things have been moving, slowly, but moving.

The DHSS last year appointed Ms Lez Dorward to be public health service lead on obesity.

She has been working on an obesity framework, which at present is not yet ready to go to press, which the facilities of the Public Health Department will produce.

They are at present concentrating on target groups which consist of three elements, weight management, promoting local awareness for schools, and promoting food preparation skills.

In the meantime *The Diabetic* has been informed by the Manx Diabetes Centre, that

limited funds have been made available by the DHSS for obesity surgery.

There is the prospect of setting up an obesity Clinic which at present is being worked on.

Also in March or April *The Diabetic* has been told that they hope to set up a research project under the auspices of the Isle of Man Medical Research Committee.

So if you want to take part or help, they are planning to recruit some 300 volunteers.

Advertisements for volunteers will appear in the press in the not too distant future.

So keep an eye out for that.

**Are you affected by STROKE
or are you caring for someone who is?
If you need help the Manx Stroke Foundation
can help you.
Their helpline is 627163
or
Contact Jane Corkill on 853046
or
Terry Chilcott on 627163**

The Editor's Crystal Ball

I have a fantastic Crystal Ball.

As you may recollect, as I reported in last quarter's Newsletter, during my temporary cardiac incident the only thing I could see and foretell was the deplorable future of the DHSS.

This was in June 2007.

Quote "The only prediction that I can safely make is, if the DHSS continue with their crackpot ideas, and don't make better use of their finances, they shall be regularly at Tynwald's' door, cap in hand, asking for more and more money" unquote.

Did the DHSS listen? Certainly not.

Seven months later at the January Tynwald, they were cap in hand asking for an extra £2.6 million. So my Crystal Ball prediction was right.

What was this for? As the Health Minister pointed out this was mainly blamed on the off Island reciprocal treatment.

But I thought that the DHSS was trumpeting the fact that treatment across was going to be offset by UK patients coming over here to be treated at Nobles.

Since I was informed they had entered into this new agreement in April 2004, (of which I was aware of, even before it was reported to Tynwald or made public), I have been at pains pointing out to MHK's that this was not going to work, it was a disaster in the making, and that the DHSS was going to be involved in much much more extra expenditure.

I brought this to the notice of MHK's, who were kept waiting by the DHSS for over six months before the Minister of the time condescended to a meeting, and then had to admit that they had indeed entered into a new agreement with the UK Health Authorities, and he claimed that this would be offset by English patients being treated by Nobles.

How naïve and gullible did the DHSS think we all were? How could they kid themselves? Talk about being on cloud nine.

They certainly didn't fool me, and I vociferously made my thoughts clear.

What we want to know, who were the civil servants who entered into this agreement that is going to perpetually cost millions and millions to the DHSS, and where are all these English patients that are supposed to be coming over for reciprocal treatment?

We have not seen any parade of ambulances at our airport or at our quay sides loading and unloading all these English patients that the DHSS promised us to ensure that X equals O.

What next?

I would not say that the future is
necessarily less predictable than the past.
I think the past was not predictable when
it started.

Donald Rumsfeld

Help to the Diabetes Centre.

The Chairman and Mrs Brenda Williams, a member of the committee made a presentation on behalf of the Friends of the Manx Diabetes Centre of 100 books required by the Centre.

These books were to be handed out to patients in an effort to standardise the information given to those attending the Centre.

The first is called GI and entitled “How to succeed using a Glycaemic Index diet”. It is an easy to use red, amber and green key system to hundreds of foods.

It is geared to dieters, diabetics and anyone who wants to be slimmer and healthier.

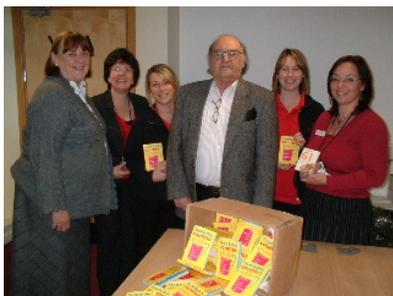
The second book is called the “Food and Diet Counter” by Dr Wynn Chan,

It contains essential nutritional facts for every type of diet and special food needs. It is a handy pocket format and a clear A to Z organisation for easy use.

The at a glance tables shows the fat, calories, protein, carbohydrate and fibre in over 1,500 favourite foods.

There are enough books at the Centre to keep them going and the Group shall replace them as we go along.

In the meantime for those of you that do not attend the centre and would like to acquire these two books they are available from the Lexicon book shop in Douglas priced at £3.99 each.



The Presentation.

In the latter part of last year the Friends of the Manx Diabetes Centre made a contribution to Miss Amy Harris, one of our Podiatrists at the Manx Diabetes Centre, to help attend the Diabetic Foot Conference in the United Kingdom.

The Diabetic spoke with Amy on her return as we wanted to know how she had got on.

She said that the funding she received enabled her to join the other two members of the newly formed Podiatry Foot Protection Team who attended the conference.

The three of them attended this event which provides a forum for all clinicians involved in treating the diabetic foot to come together,

discuss research, and audits that are being done at the forefront of diabetic foot care across the UK and in America.

Amy explained that this year for the first time at the event there was a programme of workshops that ran alongside the normal lectures and presentations.

She pointed out that these master classes consisted of five core subjects relevant to diabetic foot management.

They included; the management of the ischaemic foot, the management of the neuropathic foot, the management of Charcot arthropathy and wound care of the diabetic foot.

Additionally, the last workshop covered the litigious foot, and why do things go wrong? Documentation, communication, dealing with errors, dealing with complaints and what to do if you get sued.

In this last workshop she said that she had noticed it had been very well attended.

She had her work cut out, as in addition to the master classes it was possible for her to attend a few symposiums demonstrating new technology and new therapies which have become available in treating Diabetic feet.

These included Vacs therapy for which a number of people on the island have already been involved in trials, and the Versajet hydro surgery technology with aims to change the way they undertake debridment.

Amy then told *The Diabetic* that other highlights included key note lectures from people like Dr Edmonds from Kings College London who are considered to be at the forefront of research in the diabetic foot.

The event, she was happy to say, was packed with prominent speakers from the field of diabetes and all were available and willing to discuss aspects of their research and its implications for diabetic care.

At the Diabetic Foot Conference there were also a large number of exhibitors in attendance demonstrating their products and available to answer questions on usage and evidence base.

Amy concluded by saying that the event was of great benefit to her and to the podiatry department at the Diabetes Centre, explaining that she was sure that changes in the podiatry department's practice will result from the

updated and new information disseminated through the Diabetic Foot Conference.

She thanked the Friends of the Manx Diabetes Centre for part funding her trip, as the funding she had received enabled her to join the two other members of the newly formed Podiatry Foot Protection Team.

The Friends of the Manx Diabetes Centre are pleased to have been able to help Amy in attending this most productive event.

After all that is what The Friends of the Manx Diabetes Centre's mandate is all about and is set up for, to help diabetics and their medical carers on the Isle of Man.

DisabledGo and the Isle of Man

Following a meeting with the DisabledGo Isle of Man Steering Group held at The Isle of Man Education Centre at which 17 people representing Manx Groups attended, *The Diabetic* is pleased to bring you the salient points of the presentation.

The meeting was informed that DisabledGo now has 52 live guides and is working in partnership with over 55 local authorities.

Since the launch of DisabledGo-Isle of Man, the DisabledGo website has grown and developed thanks to the feedback they have received from members of their steering group across the 52 areas they currently cover.

DisabledGo has recently launched DisabledGo-Jobs and DisabledGo-Education.

The purpose of these services is to connect inclusive employees and education providers with disabled people.

Disabled Go- Isle of Man breaking down barriers to social inclusion.

As you all know by now, DisabledGo is the National Accessibility Project founded by wheelchair user Dr Gregory Burke.

DisabledGo is committed to empowering disabled people to get out and do what they want to do in their own community, and in other areas they would like to visit.

Thanks to the pioneering support of the Isle of Man Government and Marks and Spencer, Isle of Man along with 53 areas across the UK are listed on www.disabledgo.info

So if you are travelling abroad and are disabled, log on to this website, bring up where you are going and if covered, you will get first hand knowledge of the facilities available to you.

DisabledGo produces internet access guides to over 1,000 goods and services providers in each area it covers.

It is available absolutely free and designed to answer the access questions that disabled people want answered.

DisabledGo is all about recognising the breadth of disability and maximising choice.

Rachel Felton the Partnership Manager at DisabledGo told *The Diabetic*, that the unique feature of DisabledGo was that every venue included is visited by a trained researcher, to ensure information is as accurate as possible.

By looking on DisabledGo, she said, you can find what you require quickly using a simple search engine.

For example, she pointed out, you can search for a bank that has a hearing loop, a restaurant with large print menus, a solicitor who offers a home visiting service or a restaurant with an accessible toilet.

She was very proud that DisabledGo-Isle of Man was launched in February 2006 and emphasised that they will be renewing the information available on the Guide starting as from February of this year.

The Annual Renewal Rachel pointed out, will include all venues to ascertain whether their access has changed in any way.

She told *The Diabetic* that DisabledGo is writing to all venues and those that appear in more detail on the website will be called to talk them through their entry.

Any venue that reports a change to a physical access will be revisited and the information updated.

If anyone has any information about venues that have made adjustments or of new venues that have opened in the last 12 months, please let Rachel know and they will contact the venues concerned.

Alternately if you want any new venue included please also get in touch.

Remember this is an interactive operation and it is in your interest to let her know.

For more information or to join the DisabledGo-Isle of Man steering group please contact Eugene Hanshaw, Partnership Coordinator, DisabledGo, 01438 842710 or e-mail: - eugene.hanshaw@disabledgo.info.

The Diabetic is grateful to Rachel Felton for the information given us and we sincerely trust that the disabled of the Isle of Man will make full use of the facilities provided on the DisabledGo websites.

I can't help I'm in customer service

Overheard at a discount department store

Haven't the DHSS anything better to do?

Millions of blind men and women could have their sight restored thanks to a technique being developed by British scientists.

They say that operations using stem cells to replace damaged eye cells could take place within three years.

Isn't that fantastic?

Should we not rejoice on the Isle of Man?

Not on your Nelly.

On the same day as the above announcement, our DHSS themselves announced that they are considering cutting free eye tests to save money.

What did Marie Antoinette say "Let them eat cake?"

So we say "Let them all go blind first and then we can probably use this new development to give them their sight back, and spend much more money in the process, instead of having preventative care in place in the first instance".

As Mr Teare said in the House, "We are just considering options".

The Diabetic understands that they are at present auditioning for comedians for the next Variety Concert performance at the Palladium.

COUNCIL LISTENS TO PEOPLE ON PUBLIC TOILETS.

Headlines in the Shepway News (UK)

They are all on a Committee.

Oh give them your pity,
They are all on a committee
Which means, that from morning till night
they attend and amend,
and contend and defend
without a conclusion in sight.
They confer and concur,
they defer and demur
and reiterate all of their thoughts.
They revise the agenda with frequent addenda,
and consider a load of reports.
They compose and propose,
they suppose and oppose,
and the points of procedures are fun.
But though various notions.
are brought up as motions,
there's terribly little gets done.
They resolve and absolve,
but they never dissolve,
since it's out of the question for them.
What a shattering pity it would be
to end their committee.
Where else could they make such a fuss.
Oh give them all your pity
Because nothing is resolved in committee

Many thanks to Harry
for his invaluable comprehension
of quangos and their committees
and for keeping us in mind
with his wonderful ditty.

The Reciprocal Agreement.

According to the Chief Minister, in a letter to the Chairman, and later explained in the House, there is a reciprocal agreement between the Isle of Man DHSS and the UK, that requires the Isle of Man to keep the same conditions of entitlement as those that exist in the United Kingdom.

If these conditions are ridiculous, well then, we must ensure we also embrace them, but go one further, so that we not only look ridiculous but more comical.

If you have an amputation, in the UK they say that "your entitlement for payment of Assistance Allowance in accordance with the Act, starts six months after notification".

In the Isle of Man they say “We have to wait six months to see if the condition is permanent”.

No wonder the UK Health Department were splitting their sides when *The Diabetic* spoke with them, and the Isle of Man are the butt of jokes at after dinner speeches.

If we have to wait over a period of six months to see if amputated limbs will grow before Assistance Allowance is paid then so be it.

We must presume that the DHSS knows something we all don't.

This applies to all DHSS operations on the Island because of the assimilations to those in the UK.

There have been arguments in the House recently as to the disclosure of salaries for local health members.

As a starter, last month the UK NHS Department of Health made known figures for the year 2005/2006.

This has come about under the Freedom of Information Act.

It was disclosed that the average hourly rates for NHS employees are as follows, £15.66p per hour for a nurse, £24.14p for a junior doctor, and £60.31 for a consultant, based on a 37.5 hour standard working week.

Agency staff according to the UK health Services were paid £120 per hour.

It has also been mooted in the UK that the GPs will also be getting an extra £10,000 on top of their £100,000 per annum for working three more hours at weekends.

The Diabetic hopes that our DHSS in accordance with the reciprocal agreement are paying our lovely, caring, dedicated and efficient medical staff the same.

We shall know when the Minister lodges the information at Tynwald's Library won't we?

If they are not the same, *The Diabetic* will want to know why not, and so should our MHK's?.

Are we a Nation, or just a glorified county of the United Kingdom?

The Chief Minister has kindly arranged a meeting between the powers that be, the Chairman, the Deputy Chairman and Mr John Houghton MHK who is one of our Trustees.

We shall bring you the outcome of this meeting in the June quarter of *The Diabetic*.

News Updates

Pain after surgery could be a thing of the past.

A credit card-size device made by Jansson-Cillaghat has been approved for use in the United Kingdom. In accordance with the Reciprocal Agreement it must have also been approved here.

It controls pain at the touch of a button and is set to revolutionise the care of patients after surgery.

The battery operated device is stuck to the patients upper arm or chest. It delivers the drug by using low-level electrical energy to transport the painkiller through the patients skin and into the bloodstream.

What! No stitches?

A new film-like material, based on a compound made from crab shells, could consign sutures to medical history.

The film, which is thinner than the diameter of human hair, is placed on surgical wounds and then exposed to an infrared laser.

The film known as Surgilux contains the raw material Chitosan, extracted from crab shells. It works against bacteria and has been shown to help blood to clot.

The infrared laser heats the film just enough to mould it around the wound, perfectly sealing it and allowing it to heal.

Carrots and your eyes

Researches are now claiming that carrots are good for your eyes and can help you see more clearly, and Popeye fans would be pleased to know that spinach can do the same.

They claim that eating lots of yellow or dark leafy vegetables lowers the risk of developing cataracts because of the concentration of vitamins and nutrients in them.

The study of more than 2,000 women by UK researchers over ten years is published in the Archives of Ophthalmology.

Does Tea and Coffee increase your blood sugar levels?

Researchers have shown that a daily dose of caffeine raises blood sugar levels by 8 per cent, undermining the effects of drug treatment.

Eliminating caffeine might be a good way to help manage type 2 diabetes, which usually develops in middle age.

The research has been carried out at the Duke University in North Carolina.

Dr Lane, in charge of the research, said that the results could be explained by caffeine interfering with the process that moves glucose around the body.

Caffeine is found in tea, coffee and some fizzy drinks.

The Smallest way to Cure Cataracts.

Surgeons are now performing cataract operation through holes so small in the cornea that they are no bigger than a full stop.

A machine has made this possible, as it allows the plastic replacement lens to be rolled up and pushed through the incision.

Once in place it unfurls like an umbrella to restore vision.

The US made machine costs £70,000

The machines are being installed in NHS hospitals in the UK and at least eight hospitals have taken delivery so far.

We look forward to the reciprocal agreement kicking into place and having one here at Noble's in the not too distant future.

Blood clot risk in pregnancy for the obese.

Researchers are claiming that women who are obese during pregnancy are twice as likely to suffer a dangerous blood clot in the lungs during pregnancy.

Dr Marian Knight from the University of Oxford, who led the study, said: "Over weight and obese pregnant women were at particular risk with a two and a half times increased risk compared with women of normal weight".

Dr Knight added that women, their doctors and midwives should be aware of the risk factors for blood clotting.

**Patient has left his white blood cells
at another hospital**

Actual comment written by a doctor on a patient's chart.

Community Transport

The Diabetic spoke with Alison Crookall the Service co-ordinator of the Community Transport Service based at Marsham Court, who are available to help people with mobility and sensory problems.

We were told that they provide a friendly door-to-door minibus service in the Douglas, Braddan and Onchan areas.

Their aim is to give their members a reliable personal service.

Their trained friendly drivers will give the support that the persons using the service need at the beginning and end of their journey.

When asked who can use the service? Alison explained that you can use the community Transport Service if: -

a) You have mobility problems:

b) You have visual problems:

c) You have learning difficulties:

d) You need assistance with your own escort for which there is an additional charge, but assistance dogs travel free.

e) The facility is available to all age groups.

Members may want to go shopping, visit friends, GPs, attend a meeting etc, but they do not normally take members on trips for which other bodies, such as Education or Health have responsibility.

The next question of course was the matter of costs and how does it work?

To be able to avail yourself of this facility in the first instance she explained you have to become a member.

The membership fee is £10 and then for each journey you have to pay £1.50.

Once you are a member you can book journeys, but these must be made 48 hours in advance, on the telephone, by e-mail, fax or post.

The Community Transport Service is operated from Monday to Fridays and from 9.00a.m. to 5.00 p.m.

If you wish to become a member or you require any further information please telephone 665050 and they will send you the necessary application form.

Obviously it stands to reason that The Community Transport Service reserves the right to request medical confirmation of any mobility problem, and to exclude any individual that abuses the service.

The application form is available in Braille, Audio and an electronic version if required.

It goes without saying that if you require assistance in completing the form all you have to do is ring 665050 and they would be delighted to help you out.

A Community Transport Newsletter is available on request.

Six and a half million people have visited the Dome and six and a half left happy or happier

Chief Executive Millennium Dome

Connect2Charity

The Diabetic has received notification of a new organisation called Connect2Charity, which is a combined venture between Personal Choice Limited and The Head Office, claiming that by working together they can offer a valuable contribution to Isle of Man Charities.

Their service, they say, offers great value for money and can raise public awareness and the potential for increased donations for those charities affiliated to them.

They are, they claim, an exciting new concept, designed to help charities fulfil financial obligations and promote public awareness.

In their brochure Personal Choice Limited says it has years of experience in dealing with financial obligations, with integrity, professionalism and confidentiality and they assure the highest standards for all financial affairs.

The Head Office, on the other hand is a new company designed to offer professional advice and services in the world of publications.

Their skill and expertise are directed at creating clear, well-designed presentations and publications for all their clients.

Connect2Charity offers an accounts package consisting of, financial advice, supply of a computerised cash book, income and expenditure account, balance sheet, end of year accounts, and guidance through "three tier" review.

Connect2Charity also offer a Web Portal package consisting of, design of a web page for inclusion on the connect2charity.im directory, creation of a facility to accept on line donations

via charity's web page, charity event listings on the connect2charity.im calendar, and a search engine submission.

The annual costs including VAT for both packages are £115 and £80.

Other services provided are single page brochure design £50, stationery design £50 and monthly newsletter design £100.

They are of the opinion that your charity will benefit from the use of their facility because, it is value for money, it is cost effective, it outlines community presence, it has greater visibility, it raises awareness, it has potential for increased donations, it has financial transparency, it has regulations compliance and it has increased credibility.

Connect2Charity was launched at a meeting held on 1st March 2008 at St. Johns Mill, Tynwald Mills, St Johns at 10.30am.

If you are interested, please contact David Talbot at Personal Choice Limited, Nadine House, 13 North Quay, Douglas, IM1 4IE on telephone (01624) 610986. or by e-mail david@personalchoice.co.im

What is MRSA

The Infection Control Pathology Department at Nobles Hospital in conjunction with the Public Health Directorate at Crookall House have produced a leaflet on a question and answer basis entitled "What is MRSA?".

As the Editor had MRSA (cleared now) whilst he was in hospital, *The Diabetic* thought we should impart its contents to our readers, so that they are aware of what MRSA is all about.

The DHSS has kindly agreed for us to reproduce it here.

Methicillin-Resistant Staphylococcus aureus.

Staphylococcus aureus (SA) is a type of bacteria (germ) found mainly in the nose and on the skin of many healthy people.

It is normally harmless and you don't know you have it, but can sometimes lead to infection causing boils, abscesses and wound infections.

Such infections can usually be easily treated with antibiotics.

However some Staphylococcus aureus germs are resistant to Methicillin which is a type of antibiotic; this is **Methicillin Resistant-**

Staphylococcus aureus or **MRSA**. Many commonly prescribed antibiotics are not effective against these germs.

MRSA, me and you

MRSA and healthy people can live very happily together without causing any health problems. As with *Staphylococcus aureus* described above, some people have the germ present but it is not causing them any harm or infection. This is known as being **COLONISED** (or like being a carrier) and you probably won't know you have it unless you are checked for it.

In some cases **MRSA** colonisation clears up in time by the body using its own natural defences.

So what is MRSA infection?

MRSA can be naturally colonised on the body and may enter the body causing wound, skin and urine infections. **MRSA** may also be responsible for pneumonia and blood poisoning.

Occasionally, vulnerable people develop **MRSA** infection, e.g. people who are ill or need surgery.

People with the infection will develop signs – for example, fever and pain. If **MRSA** infection is suspected it is checked by the laboratory so the correct treatments can be given.

Can I catch MRSA in Hospital?

It is a myth that you can only catch **MRSA** in Hospital. **MRSA** exists in the community as explained above and people who are colonised may go into hospital with the germ on their skin without them knowing they have it (this applies to visitors as well as patients).

How can it tell if I have MRSA?

People who are colonised with **MRSA** do not look or feel any different. The only way that the germ can be detected is by taking samples (e.g. a swab from the skin, nose and throat) for testing in the laboratory.

Testing for **MRSA** colonisation is only carried out as part of Noble's Hospital inpatient screening policy. It is not necessary to screen individuals in the community.

Will the MRSA harm my family or friends?

MRSA is not a risk to healthy people, including pregnant women and babies. Family and friends can visit patients in the hospital.

How is MRSA spread?

The **MRSA** germ is passed on from one person to another through skin contact or

following direct contact with things that have been contaminated with it.

It is only when it gets into the body through a wound or broken skin such as a rash, cut or sore or through a medical drip or drain that it can cause an infection. That's why thorough hand washing and hand drying are so important –in helping to stop the spread!

How is MRSA treated?

If as part of the inpatient hospital screening process a patient is found to be colonised with **MRSA** with no sign of infection, they may be asked to use:

A special antibiotic ointment to apply to the nose.

An Antiseptic skin cleaner to use for their daily body wash/bath/shower and hair wash.

An antiseptic talcum powder to use after their daily wash.

An antiseptic mouthwash/gargle.

If they have any wounds or sores they may also be given special dressings and/or ointments to apply.

If a patient becomes **INFECTED** with **MRSA** at home or in hospital this will need to be treated with special antibiotics.

The antibiotics may need to be given by intravenous infusion (a drip into the vein), therefore some people infected with **MRSA** will need to be treated in hospital.

However some people can be treated with special antibiotic tablets at home if they are well enough.

How is the spread of MRSA prevented?

Correct and thorough hand-washing and hand-drying are the most important ways to stop the spread of **MRSA**.

It is particularly important that patients, carers and healthcare workers wash and dry their hands thoroughly between contacts with each other.

Always wash hands:

After using the toilet

Before and after eating/preparing food

After handling soiled linen/bedding/nappies

After touching animals

When hands appear dirty

No general cleaning methods are required though good general cleanliness is important in helping prevent the spread of infection generally.

Should I stay away from work/school?

People with **MRSA** colonisation can live their normal lives at work and home.

If you have **MRSA** infection you may need to be treated in hospital. In some circumstances if you feel well enough and don't work with vulnerable people, you can work, but you will need to remember to take all your prescribed treatment.

For further information about **MRSA** and how it might affect you, your family and friends please contact:-

Margaret Knight, and the Infection Control Team based at Noble's hospital on direct line 650651.

Alternately you can ring The Public Health Directorate at Crookall House on telephone 642639 who will then refer you to Noble's.

The Diabetic is grateful to the DHSS for allowing us to publish their pamphlet on **MRSA** and ask those with concerns to contact the Infection Control Team at Noble's Hospital who will be only too happy to assist.

HERE-----GOOD FRIDAY
7 pm-----LIVE CRUCIFIXION
SIGN SEEN OUTSIDE A CHURCH

The AGM

Just an early reminder that the AGM will take place on Thursday 1st May at Keyll Darree following an EGM which will commence at 7,30 in the evening..

All members will be notified 21 days prior to the meeting and we hope to see you all there.

We hope to see you all there because prior to the AGM we shall be holding an Extraordinary General Meeting (EGM) at which we need your vote so that we can alter certain aspects of our Constitution.

This, because of the decisions that were taken at the last AGM to expand the activities of the Friends of the Manx Diabetes Centre, and encompass assistance to our GP's.

We have to tweak and alter paragraphs to accommodate this.

As you are aware, as from April of last year a new direction from the Charity Commissioners as to requirements of the presentation of Charity

accounts, has come into force. We have therefore to take into consideration this new legislation and consequently the relevant clause has to be amended, which at present our accountants are working on.

This cannot be done according to our constitution, without an EGM. This will also be an opportunity for any member so wishing to add to our constitution what they would like to see incorporated.

Please send whatever you think you would like to see included to Henry J Ramage Chairman at 39 Cronk Drea Douglas Isle of Man or telephone him at (01624) 613702.

All members have a Constitution which was given to them on joining. With the papers of the AGM the committee will also include the requirements for the EGM and a copy of our Constitution just in case you can't find it, as a reminder of what are the amendments required.

The Speaker for the meeting will also be disclosed at that time.

We look forward to seeing you all there.

The Last Laugh

The last laugh this quarter comes from Michael.

'A little old man shuffled slowly into an ice cream parlour and pulled himself slowly, and painfully up onto a stool.

After catching his breath, he ordered a banana split.

The waitress leans forward and asked kindly, "Crushed nuts?"

"No " he replied, "Arthritis".

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Won't it be great if you rang one of the T.V. shopping Channels and when the reception person asked;

"Hello can I help you?"

You said;

"No thank you, I am just browsing".

Competitors will defile themselves on the promenade at 11a.m., and each car will have two drivers who will relieve themselves at each other's convenience.

Brochure on motoring event on the French Riviera