

The Newsletter  
of the Friends of  
the Manx  
Diabetic.  
The diabetic  
support Group  
of the IOM

# 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 30

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## LEADING FROM THE FRONT

### *Caaryjn Lught Vannin yn Chingys Millish*

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

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

The Group that fights on behalf of the Manx people without fear or favour

**Members of Tynwald force Minister Anderson into statement.**

**Jersey hopeful of New Reciprocal Health Agreement with UK by end of year.**

**Once again nothing is happening with the Reciprocal Health Agreement here**

**It's not us It's someone else.**

**Government cuts front line hospital services but spends £213,832 on Home of Rest for Horses**

**Euthanasia through the Back Door.**

## In this issue

Members of Tynwald demand statement from  
Minister of Health

Chairman's Correspondence

Jersey Hopeful of Reciprocal Health Agreement  
with the UK by end of year

What Reciprocal Health Agreement?

Andrew Mackinley gets Freedom of City of  
Gibraltar

It's not us it's someone else

Government cuts front line hospital services but  
spends £213,820 on Home of Rest for Horses

Euthanasia through the Back Door

What is Avastin

Jersey Health U-Turn on diabetes costs

Our Health Services second to none

The Hedgehog Saga

Ballasalla Medical Centre Newsletter

Another U Turn

The Blue Badges are not so Blue

News in Brief

The Last Laugh

Remember the MHK's that votes against you at the  
October 2009 Tynwald, at the next election

### Quote of the quarter

The Chief Minister Mr Brown at the last Tynwald  
on the Government failure to renew the  
Reciprocal Health Agreement

**'The Isle of Man Government would seek  
an extension to the present arrangement to  
enable it to continue'**

Already throwing in the towel before the  
30<sup>th</sup> September 2010.

Well done Chief Minister

**30 Days to go at the time  
of *The Diabetic* going to  
press and the  
Government has not yet  
been able to sign a new  
Reciprocal Health  
Agreement**

**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

**Members of Tynwald force  
Minister Anderson into  
statement**

Fed up to the back teeth due to the  
inactivity of the Brown Government in not  
giving substantial and positive answers to any

questions on the reinstating of the Reciprocal Health Agreement, Members of Tynwald who do not belong to the click of his Government wrote to the Minister for Health Mr David Anderson MHK, demanding an unequivocal statement on its progress.

The letter dated 18<sup>th</sup> August 2010 signed by seven MHK's and one MLC reads:

"We the undersigned Members of Tynwald request that as a matter of urgency, you make a full and unequivocal public statement on the progress of the negotiations with the Secretary of State for Health of the United Kingdom in respect of either the extension of the existing temporary Reciprocal Health Agreement or the introduction of a New Reciprocal Health Agreement, that will take effect from October 2010.

Time is of the essence, in that Island residents, are presently making plans to visit the United Kingdom from 1<sup>st</sup> October onwards and require the reassurance that a Reciprocal Health Agreement will be agreed and effective from 1<sup>st</sup> October 2010.

We look forward to receiving an early reply.

Yours sincerely".

And it is signed:

Steve Rodan Speaker of the House of Keys.

Quintin Gill MHK (Rushen)

David Cannan MHK (Michael)

John Houghton MHK (Douglas North)

Brenda Cannell MHK (Douglas East)

Chris Robertshaw MHK (Douglas East)

Peter Karran MHK (Lib Vannin Onchan)

David Callister MLC

It appears everyone is fed up with the stunned silence from the Minister, the Government, and we all want answers and resolutions.

But as the Chief Minister would say this is all 'nonsense, unhelpful and everything has already been said'.

### **Chief Minister the people of the Isle of Man can't hear you.**

Notice how the other MHK's that vote with the Government and voted against you in the October 2009 Tynwald have not signed the demand.

Anyway on the 27<sup>th</sup> August the Minister for Health Mr Anderson was eventually forced to come out of hiding and make a statement.

He paraphrased it by saying as usual, that such comments from the media and members of Tynwald were unhelpful.

In his statement he insists he is satisfied with the progress being made in negotiations with the UK Department of Health, and it is really a matter of not if, but when it would be signed.

That's what we all want to know **when?** But he still can't tell us when, when in ten years time?.

Again still no agreement, and without a signed agreement it is all pie in the sky.

We have gone through all this before, we have had all these hollow statements before, what the Manx people want is a finite resolution to this problem, a signed agreement.

## **Chairman's Correspondence**

The Chief Minister and Minister keep repeating like a cracked record stuck in the same groove, the same statements.

The Minister Mr Anderson says that there is no reason to doubt that a new agreement will be in place by September 30<sup>th</sup> 2010.

These hollow words always remind me of Mr Earnshaw's derisory intervention at the October 2009 Tynwald when he spoke on behalf of his friend, and supporting Mr Teare who was then Minister for Health.

As Mr Earnshaw said in the debate, quote; "I would urge Hon members, Mr President to support the Minister (Mr Teare), do not support the amendment. **If he (Mr Teare) thinks he can find a solution I am quite confident he will**" unquote.

**Famous last words, 5 months later we were running out of time, Mr Teare hadn't found a solution, and people power had to intervene, with nothing in sight except the hollow words of Mr Earnshaw, as Mr Teare had not got it together.**

**Great confidence, amazingly great confidence, Mr Earnshaw.**

**Yet 11 months after Mr Earnshaw's statement** we are in the same boat once again. Where is Mr Earnshaw's confidence in his friend now?

However it is another MHK, Mr Anderson, who is now '**confident**' that everything will be resolved at the eleventh hour. This '**confidence**' lark appears to be endemic.

Mr Brown keeps on repeating that it is the British Government that broke it off, we all know about this, what happens is that it must be resolved, not dwell in the past.

They say the UK Government are at present consulting with the devolved Governments, but the truth of the matter is that there is **NO** Reciprocal Health Agreement in place, five months have elapsed and we are again running out of time.

As we had confirmation from the Secretary of State for Health in the UK, that as of **30<sup>th</sup> June** there was no agreement the Chairman decided to give our Minister a wake up call.

This was done in an e-mail on 12<sup>th</sup> July in which the Chairman brought to his notice that 4 months of the six months moratorium that the people had got the Government had elapsed without an agreement, and the people wanted to know what was really happening.

The Chairman further wanted to know what this draft agreement that the Minister keeps trumpeting about contains.

The Chairman therefore asked for answers from the Health Minister, Mr Anderson as to the following questions: -

- 1) "What this draft agreement that you keep talking about contains?"
- 2) How far has it been progressed by your department and the Health department in the UK?
- 3) What amendments has the UK Government proposed to its contents if any?
- 4) When will it be ready for signature by yourselves and the British Government?
- 5) Could we please have a copy of your draft paper if it really does exist".

Two weeks elapsed without an acknowledgement or reply from Mr Anderson the Minister for Health to our original letter, so we had to write and e-mail again on 25<sup>th</sup> July, because contrary to what the Minister might think the people feel this is an urgent matter that must be resolved before the 30<sup>th</sup> September.

Again, in no uncertain terms the Minister was informed of the urgent need to resolve this and we wanted to know why he had not replied to the questions in the original letter of 12<sup>th</sup> July, or even acknowledged the letter, as we didn't want another Government debacle like the last time.

He acknowledged; but did not answer any of the questions of the previous letter.

Instead he reiterated his master's voice in Tynwald saying "I was disappointed with much of the contents of the letters". Why because we demanded answers?

The Chairman told him on 27<sup>th</sup> July "I am sorry you are "disappointed with much of the contents of the letters, but then again the people of the Isle of Man are much more disappointed with your department's apparent inactivity", again reiterating we wanted answers to our questions, as we were now creeping into the **fifth month** without a positive resolution.

We haven't heard from Mr Anderson since the **27<sup>th</sup> July** in answer to the points raised in our letters or questions.

As we say in Gibraltar, a cricket only costs one penny, but when it sing everyone hears it.

Mr Anderson just you wait until you sing at the next election, the people will not be listening, hearing or bothering with you.

## **Jersey hopeful of Reciprocal Health Agreement with UK by the End of the year**

Last June Deputy Anne Pryke told the States in Jersey that a meeting was taking place between the acting Chief Officer of Health and the UK's Department of Health on the possibility of reinstating a new Reciprocal Health Agreement.

Now an article in the Jersey Evening Post says that a new Reciprocal Health Agreement could be agreed by UK Ministers and Jersey by the end of the year, in which no one pays each other anything.



Deputy Anne Pryke

Islanders have been given the strongest indication yet that the deal, under which Islanders receive health insurance in the UK and vice versa, is back on track, after the Labour Government cancelled it in April 2009.

The Health Department in Jersey have confirmed that it spoke to officials from the UK in July last, and that it hopes a new deal could end up on the desks of the new UK Health Minister Andrew Lansley and Jersey's Council of Ministers by the end of the year.

We on the Isle of Man have no problem with this, if they want to get on the backs of the Isle of Man people power that got the six months moratorium for our Government, that's their prerogative.

We welcome this, and we wish them all the luck in their deliberations. God bless them if they can get things done for their people.

What *The Diabetic's* concern is that the Jersey Government can keep their people informed of their meetings with the UK Health Department and what they are doing, including their hopes and aspiration, and we on the Island, our Government, the Chief Minister and Minister are conspicuous by their silence in the Keys and Tynwald, ridiculing anyone who asks about progress, and intransigent in their position, dismissing all and sundry who asks the question, as nonsense and unhelpful.

Without the Tynwald members that wrote to the Minister demanding a statement, he would not have done so.

Our MHK's were elected by the people, to work for the people, our Government was elected by Mr Brown to work for Mr Brown and with his block voters, it stifles democracy and the wishes of the people.

We are now into the **SIXTH** and **LAST** month of the moratorium that the people got for our Government.

Chief Minister, have we got to take to the streets again?

We don't want an extension to the six months moratorium that we got you.

An extension is just confirmation of your Governments inactivity and incapacity to achieve a resolution and shows the Brown Government is once again impotent at negotiations.

What we want is a permanent resolution.

**CHIEF MINISTER, WHERE IS THE PEOPLE'S RECIPROCAL HEALTH AGREEMENT?**

**Next are we going to pass a law to pronounce the Numbers as from 11, onety one; onety two etc?**

## **What Reciprocal Health Agreement?**

Due to the apparent inaction of the Minister for Health in getting things moving on a permanent agreement, the Chairman wrote to Andrew Lansley the new Secretary of State for Health on **16<sup>th</sup> June** last.

The Chairman was asking for an update of what had transpired between the Secretary of State and the Isle of Man Health department, how far the talks had progressed and if they had come to an agreement.

He got a reply on **30<sup>th</sup> June** from the Minister responsible for International Health Policy, Anne Milton.



Ms Anne Milton

Minister responsible for International Health Policy

*As usual the Chairman's comments are in italics.*

In her reply she said that the Chairman's correspondence had been selected for a quick reply from her high volume of letters sent to her office.

*This was very nice of her*

It also claims quote: "Unfortunately, we are not yet at the stage where it is possible to share any further information.

**As soon as I am in a position to confirm any agreement I will of course do so".** Unquote. **The Bold is ours.**

*In other words as of the 30<sup>th</sup> June dated letter nothing was happening or has happened.*

*They do not have an agreement and it does not matter what the Chief Minister or the Minister says in the House, Tynwald, on Radio or in press releases, they have **NO agreement.***

*It is no good saying we are 'confident' we shall have an agreement, because at the*

*present time it appears we have no agreement. They have nothing tangible.*

*When the Chairman was little he was 'confident' his parents would never die, but they eventually did.*

Mr Andrew Mackinley asked the Chairman for a copy of the above letter when he was here and they met and discussed the situation.

He promised to take the matter up with the Secretary of State, to ascertain what our Minister and Government were doing.

Now at publication of the September *Diabetic*, we are into the **sixth and final month without a signed agreement.**

Mr Karran MHK had a question on the rescinding of the Reciprocal Health Agreement at the last Tynwald before the recess.

During the question and answer session the Chairman's letter from Anne Milton was brought to the notice of the Chief Minister (the Chairman had originally sent the Chief Minister a copy) by Mr Cannan MHK, saying the letter from the Secretary of State for Health confirmed there was no agreement and he wanted to know what the problem was in finalising this.

As usual anything that shows up his Government's ineptitudes and inadequacies, Mr Brown tries to ridicule. Its like his namesake on immigration during the UK elections.



The Hon Tony Brown Chief Minister

He replied that quote "Can I first start by saying I find the tone and the letter content from the Chairman of the Manx Diabetic Society (*as usual he couldn't even get our title right*) most unfortunate, and I have to say unnecessary. If people make enquiries I do not think they have to be abusive in making these enquiries".

*The letter was not abusive, it was to the point, if they appear to be doing nothing someone has to point it out to them, because*

*the block voters are certainly not going to do so.*

*It was not unnecessary as the problem was, that at that juncture four months had elapsed without an agreement or comment and they had to be woken up.*

*The letter is not 'unnecessary' because no agreement had yet been reached, and the people wanted to know why?*

*However the Chairman thanks the Chief Minister for mentioning him in dispatches, as endorsements from the Chief Minister and comments like his, especially in Tynwald, helps him in fund raising for the Group, as it shows the Group is alive to the problems the Brown Government does not appear to address, and the Group is prepared to fight for its members and the Manx people.*

*Chastising any Government by the electorate for non compliance, whatever the Chief Minister might think or say, is fair game.*

The Chief Minister went on to say: "The danger is Mr Cannan is trying to distort it by making out that we can tell the UK to give us an agreement"

*With this defeatist attitude he might as well take his bucket and spade and a deck chair, and sit on the beach in Douglas prom and wait for the Secretary of State to ring him, and meantime cover himself on the beach, up to his neck in sand thinking happy happy thoughts.*

*Again, because of his Government's ineptitude, that is why we have so far got nowhere.*

*Of course you can "tell the UK to give us an agreement" we are a Nation, but Chief Minister, not if you persist in going down there and touching your forelock and bowing to them as you appeared to have done at the meeting in December.*

*Chief Minister take the Chairman's advice and go there and be proud of representing a Nation, the Nation of the Isle of Man and its people, **and demand**, not go there like the President of a two bit banana republic with your tails between your legs and throwing in the towel at the first opportunity.*

*It's a good job that you have people like the Chairman and other members of the House outside your block voters to keep you on the straight and narrow.*

Mr Houghton MHK wanted the Chief Minister to give the Court during the recess, a weekly update on 'this vitally important matter', and wanted to know what meetings had been held with UK representatives.

The Chief Minister wasn't going to answer this, so he replied that the decision had been made at political level.

*What decision? At what political level? **We have NO agreement.** We therefore have no decision at any political level? All we have is block voting.*

*The Chief Minister did not really answer Mr Houghton's question. He was dismissed like everyone else. Again how dare Mr Houghton ask the Chief Minister a searching question?*

Mr Karran then intervened saying that in his opinion, we did not want to end up in a situation where we ended up with Government with its head in the sand running round in ever-decreasing circles, like this and many other Government issues.

*Mr Karran was only expressing his concerns at the inadequacies of the Brown Government in the negotiations and reflected in many other Government matters.*

But the Chief Minister once again felt threatened and immediately said "If I ignore the nonsensical comments from the Hon Member"

*Anything that shows up the real inadequacies of his administration, The Chief Minister puts down as nonsensical, anything he feels threatened with, then it's nonsensical.*

*Mr Karran's Comments like those of Mr Cannan, Mr Houghton and the Chairman's were not nonsensical. They were to the point.*

*They were in reality what the people that got him and his Government the six months moratorium wanted to know, because of the apparent inactivity of the Government on the political front.*

*The vote in Tynwald against the people in October 2009, the debacle of the inactivity in getting a resolution and the moratorium of six months achieved by the people, (which the Chief Minister does not like being reminded of, and which he terms abusive but which is reality), and the fact that it was the people that got the moratorium and not the Brown Government, not to mention what Mr Brown said that morning in the House, that shows him up, and is what niggles him.*

*The Chief Minister cannot continue to hide in the House and Tynwald behind derisory comments to all and sundry who do not approve with his running of the Island.*

*The Chief Minister was in the States recently, The Diabetic sincerely hopes no one asked him a pertinent question.*

*It's not only in the House, it's the people who do not approve of his running of the Island.*

In the answer to Mr Karran's question the Chief Minister went on to say that if they could not get an agreement before 30<sup>th</sup> September then "The Isle of Man Government would seek an extension to the present arrangement to enable it to continue"

*How pathetic Chief Minister, we the people of the Isle of Man want a permanent agreement, not to go by nibble surgery existing from hand to mouth, from six months to six months.*

*In six months time the coalition may have collapsed and we have to start all over again.*

*By this statement, the Chief Minister also appears to be even contradicting his health Minister Mr Anderson's statement that **he is 'CONFIDENT' he will get an agreement before the 30<sup>th</sup> September 2010.***

So the Chairman was left with no option but to write once again to the Minister responsible for Health Policy in the UK, Anne Milton, on **1<sup>st</sup> August 2010**

In his letter he said;

"I am sorry for once again intruding in your otherwise busy schedule, but as we are now into the fifth month without an apparent agreement, and time is rapidly running out, I would be most grateful if you could give me an update on the situation".

On **13<sup>th</sup> August** the Chairman received a communication from the UK Health Department dated 12<sup>th</sup> August giving him an update on the situation, again saying "Unfortunately, the Department is not yet at the stage where it is possible to share any further information"

*It appears as this is a similar statement to that made to the Chairman on 30<sup>th</sup> June 2010, it means that no progress has been made since their last communication to the Chairman on 30<sup>th</sup> June*

**IN OTHER WORDS MR BROWN, AS OF 12<sup>TH</sup> AUGUST YOU STILL HAVE NO AGREEMENT.**

*And as of the date of the statement from your Minister of 27<sup>th</sup> August you still have NO signed agreement*

***YOU ARE SUPPOSED TO BE STRIVING TO IMPLEMENT AN AGREEMENT JUST LIKE THE ONE THE PEOPLE GOT FOR YOU IN MARCH AND WE HAVE IN OPERATION AT PRESENT.***

***How difficult can that be Chief Minister?***

On the 28<sup>th</sup> July the Chairman sent an e-mail to Mr Bob Russell the Lib Dem MP for Colchester asking him for a copy of the written answer to his question from the Secretary of State for Health, to be made in the Commons on the progress of the Reciprocal Health agreement.

This question was down for written answer when Parliament comes back from the recess.

The Chairman received a letter from Mr Russell dated the same day saying that Parliament was in recess until 6<sup>th</sup> September and he would keep the Chairman informed of the answer.

Unfortunately this will not come to hand until after *The Diabetic* goes out.

We will publish it in the December Newsletter because by then the Minister's '**confidence**' will be overflowing.

**Our Government should not be distracted by what Boris Johnson the Major of London describes as 'an inverted pyramid of piffle'**

## **Andrew Mackinley gets freedom of the City of Gibraltar.**

On the 6<sup>th</sup> July 2010 at a sitting of the Gibraltar Parliament the Government and Opposition unanimously voted to award the Freedom of the City of Gibraltar to Mr Andrew Mackinley in appreciation for all the work that he had done on behalf of the people of Gibraltar.

The Chief Minister of Gibraltar Mr Peter Caruana in presenting the motion to the Gibraltar Parliament, recognised he was no longer active in the UK Parliament, but he said Mr Mackinley had a pedigree of service to the Rock.

He applauded the "sustained and constant support over many years to the aspiration and interest of Gibraltar and its people".

He pointed out "that Mr Mackinley had never missed an opportunity to defend the rights of the people of Gibraltar and his support continued to this day".

Mr Caruana the Chief Minister said that "Mr Mackinley had been Chairman of the Parliamentary all party Gibraltar Group, and held this post for some years.

His dedication to Gibraltar continued after he had relinquished the Chairmanship and he was instrumental in supporting all things Gibraltar".

Mr Caruana explained that Mr Mackinley "was one of the many Labour MP's during the joint sovereignty periods who dared to raise his head above the party parapet wall, in defence of the rights of the people of Gibraltar"

"An action" claimed the Chief Minister, "which many believed had been taken by him at the expense of a ministerial career in the Blair Government"

The Leader of the opposition Mr Joe Bossano expressed full support for the motion, he recalled Mr Mackinley's many years of support for Gibraltar in particular how Mr Mackinley had been "willing to take on anybody even when his party was in power".

He concluded by saying "I think as new members come into the UK Parliament, we have to find ways of cultivating a similar alliance and support for Gibraltar, but it is right that we should not forget those that stood us well for so long and defended us so admirably" and he said that "the opposition supported the motion".

The Motion was carried unanimously.

(Extracts taken from and by courtesy of the Gibraltar Chronicle)

**So the Gibraltar Government and Opposition gave Mr Andrew Mackinley the Freedom of the City of Gibraltar, whilst here he was presented during his visit to an institution on the Island, with a box of kippers.**

Isn't it time that our Government rose to the occasion and presented Mr Mackinley with the honour he deserves for the invaluable work that he has done for the Island and people of the Isle of Man?

## Mr Brown, how about it?

As soon as the Chairman was made aware of the situation from Gibraltar, he broke the news to Andrew Mackinley whilst he was on the Island staying with Mr Rodan, on the evening of the day the Gibraltar Parliament unanimously passed the vote bestowing on him the Freedom of the City of Gibraltar.

The Chairman also informed the Press and Radio of the momentous event.

The Chairman once again congratulates Mr Mackinley for his accolade from the grateful people of Gibraltar and their Parliament.

## It's not us it's someone else

*The Diabetic* is sick and tired of hearing the Chief Minister, Mr. Teare, most Ministers and most block voters whinging about the rescinding of the Reciprocal Health Agreement and their 'glorious' non entity part in it.

It appears that after they did nothing about it, they persist on saying how wonderful they all were and still are.

Well enough is enough, just read the Hansards and see what they all did and said about you and how they voted.

The block voters abandoned you.



Mr Phil Gawne MHK

On the morning of Thursday 10<sup>th</sup> June, Mr Phil Gawne now also on the bandwagon, said on Manx Radio that we should not support the England world cup squad because of what the British Government had put us through with the Reciprocal Health Agreement.

He said he was supporting Italy and Brazil. As usual with Mr Gawne's Government, Italy was sent packing at the first hurdle and Brazil soon after.

*The Diabetic* would like to remind Mr Gawne and the Chief Minister, who persist in saying its was them that broke it off not us, that the British Government was not present, represented, or had a vote at the October 2009 meeting of Tynwald, and consequently the British Government did not vote in the

October Tynwald to abandon the Manx people into getting their own insurance policies, if they were able to get insurance.

To quote from the October 2009 Tynwald debate Mr Teare the then Minister for the DHSS, (and now trying his best to get re-elected, being constantly on radio and cutting his wages by ten percent whilst people like Mr Cannan had **his cut by 30% for fighting for the people**) presented his motion which contained the following paragraph:

*a) That from April 1<sup>st</sup> 2010, the payment of any NHS charges incurred by Manx residents visiting the UK is an individual responsibility.*

In other words we wash our hands of you lot, you are all on your own

**It was Mr Gawne and his fellow Ministers and the block voters that voted for this motion and against the MANX PEOPLE.** (See the last page as to who voted against you and whom you should not vote for at the next election).

Only six MHK's in Tynwald voted to help the people of the Island, in the October Tynwald of 2009, Mr Steve Rodan, Mrs Brenda Cannell, Mr John Houghton, Mr Quintin Gill, Mr Peter Karran and Mr David Cannan to whom we are all indebted, most grateful, and we will vote them back in again.

The Manx public should remember Mr Gawne, the Chief Minister and all the Ministers and Members that voted against them when the next election comes around, and not vote for any of them, no matter how contrite, or in what colour they try to paint themselves on your door step or like Mr Gawne and the Chief Minister put the blame on others.

A Minister has even told the Chairman it was not me that voted against the people, it was Tynwald. We wonder who was holding their fingers to press the button when it came to the vote.

**Vote for your preference of anyone on that ballot paper other than any of those that voted against you.**

Let us stop all this nonsense that 'it wasn't me, it was the British Government'

It was our Government, the Chief Minister and hangers on, including Mr Gawne, that abandoned the people.

I must reiterate once again, as Mr Earnshaw said in the debate "I would urge

Hon members, Mr President to support the Minister (Mr Teare), do not support the amendment. If he (Mr Tearer) thinks he can find a solution *I am quite confident he will*"

**Famous last words, great confidence Mr Earnshaw, 11 months later we are still awaiting a resolution. We are still waiting for Mr Teare to 'find a solution'**

They must realise once and for all that they did nothing for two years, and it was they that voted not to help the people of the Island and abandon them to their own devices.

It was People Power that got the people of the Isle of Man the moratorium of six months, and laid the groundwork for an agreement, all the work had been done for the Government by the people, and our Government still can't follow it through.

**Mr Gawne, it was you, the Government and the block voters that abandoned the Manx people at the October Tynwald in 2009, by voting for the motion, not the British Government, they were not there, they did not vote against the Manx people.**

We now have all these MHK's starting to ask copious questions in the House, running scared, making noises, putting up-dates through constituency doors, all of a sudden running surgeries, going on Manx Radio and running around like headless chickens to attract the attention of the electorate so that they at the eleventh hour appear to be doing things on their constituents behalf, trying to distance themselves from the vote, but the people will not be hoodwinked, they know what happened, and what all their MHK's **didn't do** for them at the October 2009 Tynwald vote.

We respectfully refer our members and readers to our last page and remind you,

**not to vote at the next election  
for those that voted  
AGAINST YOU  
in the October Tynwald of 2009.**

**Why are wise men and wise guys  
opposites?**

**Government cuts front line  
hospital services, but spends**

## **£213,832 on The Home of Rest for Horses**

It transpires that according to the Chief Minister we have no money and must tighten our belts, and implement austerity cuts.

The Chief Minister says we must buy locally and the first thing his Government does is sack the local air ambulance service provider, and give the contract to someone in the UK.

Do what I say, but don't do what I do.

The Departments of Health and Social Care have already signalled a cut of the Podiatry Service, the Physio department, no drugs to prolong life for terminally ill cancer patients, a squeeze on pensions, breast screening, a stealth tax on attendance allowance for those in old people's homes, and by indirectly implementing an increase in work schedules increasing the waiting lists, and it goes on and on.

The old Minister for Health in which Mr Earnshaw had **'all the confidence'** is now the Minister for Education, hogging the airwaves and applying the same tactics there, getting rid of Teachers, playing at musical chairs, moving them from one department to another, closing down the kiddies swimming lessons, transport for special needs children are now being affected, canteen staff etc, all in the name of saving monies, yet Tynwald continues to spend as if they had just won £100 million on the Euro millions rollover.

The Minister Mr Gawne in answer to a Mr Malarkey's question tells us, that his department **spent £125,051** on a car park for the Home of Rest for Horses, with availability for **102 car parks and 5 coaches.**

Then in the same breath Mr Gawne said that a total of **£88,781** had been spent in the new access road for the Home of Rest for Horses.

This means a total expenditure of **£213,832** of taxpayers money (and we can't even afford to open Southlands), has been spent by our Government on rest for horses, when we have no money to keep some of our front line services going for the Manx people at our hospitals.

Excuse us, but has Mr Brown and his Government once again got the Isle of Man's people's priorities wrong?

**You might all think that this is a joke, but don't laugh just yet, because there is much much more hilarity to come.**

When asked by Mr Malarkey MHK, who was like all the Manx people extremely annoyed and aghast at the excessive expenditure, and rightly so, why such a massive sum of money was spent on retired horses, Mr Gawne the Minister, had no option but to agree with him that it was a bit over the top.

Mr Malarkey still most indignant, then went for the jugular. He huffed and puffed and demanded to know, who had authorised this excessive expenditure.

He was informed that it was **Tynwald** and that **Mr Malarkey himself appeared to have voted for it as a block voter.**

So there you have it, now you can laugh, it transpires that **Mr Malarkey did not even appear to know he had voted for the expenditure for the car park and the access, otherwise he would not have asked the question. Mr Malarkey had helped vote through a total of £213,832 and he appeared not to even know that he had voted for it, or what he had been voting for, hence his indignant intervention and question.**

Some of the other block voters in the Government probably didn't know that they voted for it either.

**Well done Mr Malarkey!!!!**

If you don't vote with the Government.... Well, just look at what happened to Mr Cannan MHK.

What kind of a caring Government do we really have that can spend **£213,832** on the Home of Rest for Horses and continue to cut our front line services at the Hospitals and Education for the Manx people saying they have no money?

*The Diabetic* has nothing against the Home of Rest for Horses, we should have one, but at this time of austerity don't you think that even the horses would understand that Mr Brown's Government should put the humans first?

**Really Chief Minister!**

**Isn't making a smoking section in a restaurant like making a peeing section in a swimming pool?**

## **Euthanasia through the back door.**

The Minister for Health claims that there is no money for cancer last resort drugs for terminally-ill patients.

It's just an excuse, and really following the NICE directive.

When you started paying your National Insurance, you thought you had all your medications covered, free national health, and there was no small print to say that if medication cost too much for the Health Department they would not prolong your life, they would let you die. What did you pay your National Insurance for?

I keep saying, if the financial sector does not work for the people of the Island, there is no point in having a financial sector.

Nevertheless this is one step nearer to Euthanasia through the back door, discrimination against patients, and the edge of the wedge.

Our 'caring' Government is now of the opinion that if you have cancer and are terminally-ill there is no point in giving you life prolonging drugs, for after all they are only going to prolong your life for a few weeks or months, so they might as well let the patients die, and save themselves the monies.

Now this is a fantastic solution to saving monies, and the person who proposed it and the Minister who sanctioned it on the Island should be given a big heavy medal as a going away present, **FIRE THEM.**

This has a knock on effect that they are not telling you, as they wouldn't have to pay the dead patient or their families any allowances or pensions once their demise is complete, thereby saving more money.

We are told that the private wing at Noble's hospital is fully staffed and under used, so why not use it for terminally-ill patients, and invite them from all over the world to come to the Island to die.

Imagine how much money the Health Department would make? The person who runs Dignitas is now a multi-millionaire.

However at Dignitas you have to kill yourself which might put off some people, but on the Isle of Man, well, the Government will do it for you, they will expedite your death without pain by stopping your life prolonging drugs.....for a modest fee of course.

The Health Department could run the following advert in the appropriate places;

**ISLE OF MAN  
HEALTH DEPARTMENT**

**You want to die because you are terminally ill, but don't want to kill yourself? come to the Isle of Man.**

**Die a 'Noble' death.**

**You will not have to take any potions to KILL yourself.**

**DIE a natural death as we will take you off all your life prolonging drugs, except for morphine, so that we hasten your death without pain.**

**We will even give you instant residency so that you won't need to pay capital gains tax when you are gone.**

**THE ISLE OF MAN IS NOW THE PLACE TO DIE IN**

Contact:- .....e-mail www.....Tel:- (01624).....

The Isle of Man Government has an advantage over Dignitas, because at Dignitas you commit suicide, on the Isle of Man you wouldn't, the Isle of Man Government would do it for you, they will withhold your life prolonging drugs and bingo your demise in the utmost comfort is assured.

At Dignitas any person assisting the suicide runs the risk of being taken to court in the UK for aiding and abetting in a suicide.

However on the Isle of Man you would not run that risk as it would not be suicide it would be the Isle of Man Health Department indirectly committing the act for your friend or loved one by not prolonging his or her life as long as possible, and they are not going to take you or themselves to court are they? You would be in the clear.

So it is a plus all round to die on the Island.  
**By the way we would also offer them instant residency so that they do not have to pay capital gains tax when they die?**

The Department of Health can extend this system to other terminally-ill Island people for example like diabetics who if you stop their insulin they will go into a coma and die, so why spend money on insulin in the first place.

Then they can tackle people with strokes, and there are many other terminal-illnesses.

Everyone has a terminal-illness of one sort or another, that if you stopped their drugs, their health would deteriorate and they would die.

The moment you are born you start to die so the Isle of Man Government have a fantastically wide field and an already established conveyor belt.

This could also be a new way of controlling population which no one had thought about before.

There is really no ending to what the Isle of Man Government can do to help people die.

Whatever happened to the old dictum "where there is life there is hope".

**Well done Chief Minister, so much for your 'caring' Government, we are now really descending down, down, down, down into the pits.**

**Not even Edgar Allan Poe engineered a storyline like this.**

**On the other hand if your loved one dies because of the Health Department withholding their life extending drugs which you didn't agree with, take the Island 'caring' Government to Court.**

**Now to reality;**

A little bit of info for the Chief Minister and the Minister for Health, so that they know we know.

According to information received the UK is the only authority in the World that stops this life prolonging drugs or the grounds of costs, now we ourselves have also joined this elite group.

However Chief Minister, the Secretary of State for Health in the UK has made a U-Turn on cancer drugs.

He has now announced that tens of millions of pounds will be made available for any medicine recommended by a hospital doctor, this includes the life prolonging drug Avastin.

Now Ministers in the UK have agreed to introduce an interim fund to pay for this medication, as from October next.

Mike Hobday head of policy at Macmillan Cancer support said, "A few extra months or weeks towards the end of a patient's life

means an awful lot to a patient and their family affected by cancer”.

So Chief Minister and Minister for Health, hope you are hearing what Mr Hobday is saying.

A lady who took the life prolonging drug Avastin in 2006 is still alive today, another lady was in a hospice planning her funeral, until the doctors gave her the cancer drug Avastin.

Now 18 months later she asks: “why are NHS patients still denied this life saving treatment?”

So Chief Minister prepare to set up a fund for life prolonging drugs like the UK have done.

You cannot now hide behind the skirts of the UK NHS, and NICE anymore, you will have to abide by the Drug Tariff and implement the same here, irrespective of what it costs you.....alternately make money accelerating the patients deaths.

**What’s it going to be Chief Minister?**

**When Cheese gets its picture taken  
what does it say?**

### **What is Avastin.**

So that you know what we are talking about.

Avastin is one of the first of a new generation of targeted cancer drugs.

Chemotherapy poisons all fast-growing cells, Avastin is designed to knock out just one vital element of a tumour.

Unlike chemotherapy, it is able to destroy tumours without harming the normal healthy cells nearby.

This is more effective and causes fewer side effects.

Avastin is given to patients with advanced cancer where tumours have spread to other parts of the body, usually the liver and lungs.

Avastin contains antibodies which lock themselves onto the cancer cells, triggering the immune system to attack them.

The treatment which is injected intravenously into the arm or collarbone, can also block blood supply to the tumour, stopping it from growing.

Because it is expensive and normally increases survival by a few weeks or a few

months, (there have been cases of more), it is controversial.

The UK is the first country world wide to ban its use on the grounds of cost, even though in most other countries the cost is double that of the UK

The Isle of Man has the dubious distinction of being the second.

**Congratulation Chief Minister  
for coming second.**

### **Jersey Health U-Turn on diabetes costs**

U-Turns are in fashion this quarter, this is because Ministers implement systems on the say so of Civil Servants that have not been properly resourced as to what the long term implications will be.

Proposals to make diabetics pay nearly £1,000 a year for life saving equipment have been scrapped by the Jersey Health Minister, .....another one like ours.

Deputy Anne Pryke had originally planned to slash funding for the Diabetic Centre by up to 40% as the States aim to plug Jersey’s 50 million pound deficit.

But following a backlash from the Islands 3,500 diabetic patients and lobbying from Diabetes Jersey, those plans to remove subsidies have now been dropped.

*The Diabetic* is glad that common sense prevailed and that our friends the diabetics in Jersey were able to make their Minister appreciate the realities of life, and do a U-Turn. Well done.

But then again their Minister listens to reason, logic and common sense.

Chief Minister, they are leading the way and showing you that the patients must come before all other considerations and you cannot cut hospital front line services or are we eventually going to revert to the dark ages?

**If love is blind, why is lingerie  
so popular?**

### **Our Health Services, Second to None.**

Of late, and even in *The Diabetic* the Health Department has come for considerable criticism, and rightly so, but all is not doom

and gloom as our Health Services are second to none.

In an endeavour to ensure that you are all aware of the excellence of our Health Department and what our Health Services provides you with, *The Diabetic* decided to put some questions to Mr Norman McGregor Edwards, the Director of Health Strategy and Performance so that we could publish a comprehensive account of what the Health Department covers and does on behalf of the people of the Isle of Man, which we all take for granted.



Mr Norman McGregor Edwards.  
Direct of Health Strategy and Performance.

The Chairman therefore put questions to Mr McGregor Edwards in the hope that his department would be able to answer them.

To be precise there were 45 questions put to him. Which he did not shirk and answered them all. We are most grateful to him for taking time to produce the figures in his otherwise busy schedule.

We shall print the Chairman's questions and Mr McGregor Edward's answers, (without comment), as put to him with his replies.

**Q1. How many Hospitals do we have on the Island?**

**Ans.** Two, Noble's and Ramsey Cottage Hospital, there is also inpatient mental health units on the Noble's site and at various locations around the Island.

**Q2. How many people work for the Health Department?**

**Ans.** The number of people working for the Health Services is 1,896, this is 1,630 whole time equivalent.

**Q3. How many doctors work for the Health Services?**

**Ans.** The number of doctors directly employed by the Health Service is 120, this excludes GP's so the whole time equivalent is 94.98.

**Q4. How many doctors does this represent per 1,000 people of the population?**

**Ans.** The number of doctors per 1,000 of the population based on an estimated 80,000 is 1.5 excluding the GP's, but if you include the GP's then it is 2.13 per thousand.

**Q5. How many nurses are employed by the Health Department?**

**Ans.** This is impossible to answer without a clearer definition of 'Nurses'. Including unregistered nurses such as Health Care Assistants, those providing training and development too other nurses, and those in managerial or supervisory roles (nearly all of whom still provide at least some direct clinical care) they total approaching 1,000.

**Q6. How many dentists and other medical staff work for the department?**

**Ans.** The number of dentists and other clinical staff working for the Health Service number 17 dentists (excluding dental contractors who provide High Street NHS dental services). Other Clinical staff have been included in reply to Question 8.

**Q7. How Many General Practitioners are there on the Island?**

**Ans.** The number of General Practitioners working on the Island and providing NHS services are 51 which equates to 46.1 Whole Time Equivalent.

**Q8. How many clinical support staff does the department employ?**

**Ans.** This is impossible to answer without a clearer definition of 'Clinical Support Staff'. Including Therapists (Physio, speech etc) pathology staff, dieticians, podiatrists, pharmacists etc, there are at least 188.

Adding in porters, catering, housekeeping, sterile services and other groups who also provide direct clinical and other support to patients takes the number to over 350.

**Q9. How many are senior Managers?**

**Ans.** There are 14 senior managers, but this too depends on the definition of Senior Manager. The number quoted relates to Directors, General Managers and those occupying senior posts at the level below them.

**Q10. What is the number of administration staff for the Health Department?**

**Ans.** The Number of administration staff is 194 (this includes Family Practitioner staff,

ward clerks, medical secretaries, medical records staff, and some managers who are clinicians and retain direct clinical responsibilities).

**Q11. How many Ambulance staff does the Health Department employ.**

**Ans.** The Number of Ambulance Staff the Department employs is 42.5

**Q12. How Many Hospital beds do you have available?**

**Ans.** The Total number of beds is 343 this includes 41 at the Ramsey Cottage Hospital.

**Q13. How many are adult beds?**

**Ans.** The number of adult beds is 283 including those at the Ramsey Cottage Hospital.

**Q14. How many are mental beds?**

**Ans.** The number of mental beds is not held by the department this information is available from the Department of Social Care.

**Q15. How many geriatric beds does the Department have available?**

**Ans.** The Department has no dedicated geriatric beds. Geriatric patients are treated in the most appropriate setting.

**Q16. How many day beds does your department have?**

**Ans.** The Department has 14 day beds.

**Q17. How many intensive care beds do you have?**

**Ans.** The Department has 2 intensive care beds and 4 High Dependency beds.

**Q18. How many maternity beds does the Department have available?**

**Ans.** The Department has 17 maternity beds.

**Q19. How many patients attended Accident and Emergency in any one calendar year?**

**Ans.** The number of A & E attendances (not admissions) per year is 30,390 at Noble's plus 6,650 at the MIU at the Ramsey Cottage Hospital.

**Q20. What is the average time patients wait to be seen when they visit A & E?**

**Ans.** Average waiting time at A & E is negligible and there is normally no significant wait for initial attention.

**Q21. How many A & E admissions are attributed to assaults?**

**Ans.** 169 at Nobles plus 6 at MIU at the Ramsey Cottage Hospital.

**Q22. How many A & E admission are related to sports injuries?**

**Ans.** 1,347 at Noble's plus an estimated 200 at MIU at the Ramsey Cottage Hospital.

**Q23. How Many heart operations are done locally?**

**Ans.** There have been no heart operations done locally.

**Q24. How many heart operations are done for your department across in any one year?**

**Ans.** The number of heart operations conducted in the United Kingdom is 65.

**Q25. How many patients are seen per year at the Hospital?**

**Ans.** The number of patients seen at all hospitals in any one year is 121,041 including in and out patients, Day procedures, Ward Attenders etc. This equates to 331 patients per day including weekend?

**Q26. Have any plastic surgeries procedures been performed locally?**

**Ans.** The number of locally conducted plastic surgery procedures have been nil, except for a very small number to correct problems, such as removing disfiguring birthmarks using lasers. The department does not provide 'cosmetic surgery' at NHS expense.

**Q27. Do you do any plastic surgery across?**

**Ans.** The Department does not provide 'cosmetic surgery at NHS expense. We send a small number of cases 'across' each year for the correction of significant congenital or post trauma disfigurement. The number is very variable.

**Q28. How many people in the Isle of Man have work limiting illnesses?**

**Ans.** There are around 1,420 people claiming long-term incapacity benefits, and 373 claiming short term benefit. This latter figure is quite volatile, however in July last year the short-term claimants figure was 250 and in March this year 141.

**Q29. How many births were there on the Island in the last calendar year?**

**Ans.** The number of births in the Isle of Man were 968.

**Q30. How many were there by spontaneous delivery?**

**Ans.** The number of spontaneous deliveries were 800 this includes vacuum and foreps-assisted.

**Q31. How many births were there by emergency caesareans?**

**Ans.** The number of emergency Caesarean sections were 168 deliveries.

**Q32. How many by Vacuum extraction?**

**Ans:** There were 82 Vacuum extraction assisted births.

**Q33. How many by forceps extraction?**

**Ans.** There were 44 forceps assisted births.

**Q34. How many eye tests have been performed during a calendar year?**

**Ans.** There were 32,752 eye tests performed.

**Q35. How many hospital appointments were dealt with in total by all departments over the last calendar year?**

**Ans.** The number of hospital appointments were 152,831 which includes Noble's and the Ramsey Cottage Hospital.

**Q36. How many children do we have that are morbidly obese?**

**Ans.** The department does not record this only underweight, healthy weight, overweight or obese.

**Q37. How many children between aged 2 and 10 are obese on the Island?**

**Ans.** The number of obese children aged 2 to 10 years based on two surveys, are estimated at 7% or 600 children.

**Q38. How many alcohol related deaths are recorded annually?**

**Ans.** From 2003 to 2006 there were 10, where alcohol was implicated, but this is a very subjective question as it depends on the precise definition of 'alcohol-related death'.

**Q39. What is your estimated annual costs for alcohol abuse?**

**Ans.** The Department does not hold this information but the figure for England and Wales is £12.6 million pounds.

**Q40. How many residents have died from MRSA?**

**Ans.** None recorded.

**Q41. What are the total deaths from all causes and all ages in one calendar year on the Island?**

**Ans.** The total number of deaths from all causes in 2008, which is the most recent year with analysed figures is 843.

**Q42. What is the Total Budget for the Health Department for running all these services?**

**Ans.** The department's total budget is £130 million pounds.

**Q43. What is the expenditure per head of the population of the Isle of Man?**

**Ans.** The expenditure on Health services per head of the population based on an 80,000 population is £1,625 per head.

You should bear in mind, however, that the spend-per-head in the UK has a considerable range with rural costs much higher than urban costs.

In addition, our structure is very different and we have lower organisational costs than the UK.

**Q44. How many patients does the Department of Health send to the UK for treatment in a calendar year?**

**Ans.** In a normal year we send some 6,500 patients for treatment to Hospitals in the United Kingdom.

We also send some 3,500 escorts with them.

The biggest condition catered for are Cancer and Heart problems that we do have the necessary facilities to deal with here

**Q45. What does it cost the Health Department to send all these patients and escorts across for treatment over a yearly period**

**Ans.** The cost is calculated this year to be at £8,500,000.

We hope you find the above most interesting.

We are most grateful to Mr Norman McGregor Edwards for answering all our questions most proficiently and for producing all the statistics.

*The Diabetic* would also like to thank all those that may have helped Mr Edwards in compiling the answers which is most appreciated.

What we wanted to do was to show that we have excellent facilities that cannot be compared with those across the water, because we must cut our cloth according to our size as we are an Island, and have different needs to the needs of the whole of the UK.

Comparisons are odious, hence we have not compare them to the UK figures, as *The Diabetic* feels that our services are fantastic and the UK figures would serve no purpose whatsoever, as there cannot be any real comparison.

The above shows that the people of the Isle of Man must be proud of our health facilities and services, and that our facilities are tremendous for our small Island population.

In addition to the above as we have already pointed out, the Health Department sends over 8% of the population across the water (not counting escorts) whenever they require treatment there which is not available here, and their bill for this service is some 8.5 Million pounds per annum. Isn't that wonderful?

May we be able to keep these services going for many years and for generations to come.

Mr McGregor Edwards, thank you once again for your invaluable help.

**If people from Poland are called Poles, why aren't people from Holland called Holes?**

## The Hedgehog Saga

A little saga that happened in our Garden.



A Hedgehog.

I was working on *The Diabetic* in my study, when Jan came running in and said there was a hedgehog in the middle of the Garden.

I was not amused as she had broken my train of thoughts.

So I said "What do you want me to do, go out and kiss it?"

"No, it's just it shouldn't be there".

"What do you mean it shouldn't be there? Hedgehogs do live in gardens".

"Hedgehogs are nocturnal, so it should not be sitting in the middle of the garden in the middle of the day in the sun. I am going to ring the MSPCA"

Before I could open my mouth, away she goes and when she comes back she informs me that the MSPCA had asked her to take it in.

Jan picks it up, puts it into a box, and puts the box in the shade till after we finish lunch.

When we go to the car, panic, the hedgehog had got out of the box and Jan eventually

found it curled up and very lethargic under the hedge a few feet from the box in the driveway.

So we trundled up to Foxdale to the MSPCA.

On arrival Jan is informed that what the Hedgehog has is a chill and they will keep it until he gets better.

They ask Jan if she wants it back if it recovers. She says "but of course" and gives them our telephone number and address.

Now here I am in the car on the way home with nothing better to do, except that my brain goes into top gear as to what might happen next.

Just imagine the scenario racing through my mind.

For arguments sake, we get the Hedgehog back.

Jan take it home and put it in the middle of the garden.

The next thing we know is that the hedgehog makes a beeline for a certain bush.

As soon as he disappears into it there is an almighty commotion in the bushes.

The female hedgehog is going bananas and is shouting at him saying "I only sent you to the corner shop at the end of the garden for some worms for the kids, and you disappear for five days. Where the hell have you been? With a flousie? Who is she? I want to know who she is? I will not tolerate this kind of behaviour on my patch, we are done"

He on the other hand is speechless, rolled into a ball, but cursing Jan for taking him away from his garden, his comfort zone, and dumping him in the proverbial.

**If a pig loses its voice,  
is it disgruntled?**

## Ballasalla Medical Centre Newsletter.

The Summer 2010 Ballasalla Medical Centre Newsletter has been issued by the Doctors there, Dr A.M. Blackman, Dr J.E. Hockings and Dr J.F.Longan.

In it they say that the Doctors of the Ballasalla Surgery feel that their patients should know about the following reductions in services available on the NHS: -

### **Physiotherapy:**

The NHS Physiotherapy Department are able to accept the following referrals: -

- 1) Patients with musculoskeletal conditions of less than 8 weeks duration.
- 2) Patients who are off work because of their condition and who have not yet seen a physiotherapist.
- 3) Patients with acute pains/strains.
- 4) For first episode of low back pain a booklet issued by the physiotherapy department is available from the surgery.

### **Podiatry:**

From 1<sup>st</sup> May 2010 NHS podiatry will only be available to high risk individuals whose medical history, medication or foot pathology may put them at risk of developing potentially serious foot problems

### **Upper airways surgery for Patients with Obesity:**

Upper airways surgery for patients with obesity is now not indicated.

Patients will have to undergo a weight-loss programme and have to bring their weight to within normal limits before surgical procedure will be indicated.

### **ENT procedures not available on the NHS:**

- 1) Removal of benign/congenital skin lesions—surgically or laser.
- 2) Laser services are restricted and are a low priority treatment with a few exceptions.
- 3) Rhinoplasty.
- 4) Rhinophyma/face and brow lifts/Botox are not available to treat the normal process of aging.
- 5) Blepharoplasty will not normally be funded.
- 6) Prominent ears—patients must be under the age of 18 at the time of referral.
- 7) Refreshing of scars will only be done on the NHS for burns/severe trauma/surgical scarring.
- 8) Correction of earlobes.
- 9) Complimentary and alternative medicines will not normally be funded.
- 10) Allergy diagnostics and allergy treatment (immunotherapy).

We are thankful to the Ballasalla Surgery for allowing us to publish their Summer Newsletter so that patients know what they can now have on the NHS or are exempt from getting.

**I thought about how mothers feed their babies with tiny little spoons and tiny little forks, so I wondered if Chinese mothers used toothpicks?**

### **Another U Turn.**

As usual in order to save a few pennies the Department of Health puts in jeopardy the welfare and health of the Manx patients.

In its usual wisdom they decided to sack Bridgewater as they had done Eddie, and give the contract to City Kabs.

Mistake, mistake, this was a backward step in an endeavour to save monies and once again the civil servants, to be polite, put the Minister in another invidious position.

Have you noticed how many apologies the Minister has given this past quarter?

He even had to apologise to Peter Karran MHK for telling him in the House that for 2007/8 the cost of employing agency Staff at the Hospital was £2,500,000 when in fact the Minister later confessed and apologised in a press release, that it should have been £4,139,735.

What is a couple of million amongst friends, when the Government has so much money to burn.

*The Diabetic* has been wondering if our present Government will emulate the UK Labour Government and leave a note for the incoming Government in November 2011 saying 'sorry there's no money left'.

Anyway back to taxies, what should happen before any contract is cancelled, irrespective of what it is, is that the Minister should go on a fact finding mission, by himself, and find out for himself what it is all about.

It was apparent that from the reports *The Diabetic* was getting, this was not working properly to the detriment of the Manx patients.

The Chairman even raised the matter with Mr Mcgregor Edwards at a meeting of the Tynwald Advisory Committee on Disabilities, and was told everything was working properly and there was no problem.

The Chairman had occasion to avail himself of this facility and no one using the service who were in the queue to book in on their return, had a good word for the service

that City Kabs had provided for them that day.

On our arrival our taxi driver wasn't helpful at all, he tried to put the Chairman's wheelchair into the black cab when there was already a gentleman sitting in the jump seat.

He was told by the Chairman it would not fit, but it fell on deaf ears.

The wheelchair was halfway out of the cab so when he slammed the door, it hit the back wheels and the wheelchair was sent flying across the cab and hit the gentleman sitting on the jump seat.

An unsatisfactory state of affairs when you are going to hospital with God knows what problems.

We were holding the wheelchair upright between us all as it did not fit against the back of the driver's seat and consequently couldn't be belted in, because one of the jump seats was being used.

The Chairman to meet his appointment has to get up at 4 in the morning, as having no legs, it takes time to do his ablutions, and get to the airport by 6.15 a.m.

Because of this time sequence his injections are somewhat out of kilter for the morning consequently at lunchtime he has to have a proper meal to be able to inject and bring them into line.

He therefore always gets and pays for a taxi himself from the hospital into town to have a proper lunch.

There is now no plane at around 3 p.m. now, so you have to wait until the 5.20 p.m. plane to return irrespective of when your appointment terminates.

The Chairman himself was refused a pickup from town to the airport, not because he was in town, the excuse given was because he had to wait for other people to finish their appointments to make up numbers. But he has a wheelchair which complicates the issue.

This was at three in the afternoon. The plane was at 5.20 p.m.

He then explained that the person that was originally in his cab was going to see a surgeon, had no appointment, and had been told he would have to wait until the surgeon finished in the operating theatre that day to see him.

Therefore there was no guarantee of the time that he would be seen or finish at the hospital, hence him apparently having the

option of a later flight, and he informed City Kabs that under the circumstances he would not wait.

Because of the time constraints the Chairman decided to take his own black cab from the rank to the airport and pay for it himself. (He did not submit a bill to the Health Department, they have enough problems).

We are pleased that the Minister has risen to the promise he made to Mr Houghton MHK in the House, and done another U-turn and that the Department took on board the Chairman's complaints and those from the many other patients dissatisfied with the new service.

However this is what the Minister should have done at the beginning when the civil servants proposed the deal, he should have sided with the patients and a proven service, and not the pennies he appeared to be saving.

The moral of the story Mr Anderson, don't pay attention to civil servants bearing promises of saving monies at the expense of the Manx patients.

Work for the people not the department, that is what you were elected by your constituents to do, as they will remember the October 2009 Tynwald, all these debacles and having to make all these U-turns at the next elections.

**You never really learn to swear until you learn to drive.**

## **The Blue Badges are not so Blue**

The Chairman was recently in London and in his quest for knowledge he was asking the Taxi Drivers what the situation was with the blue badges in London.

He was told that in an endeavour to raise monies certain boroughs of London were now issuing their own coloured Disabled Badges.

So if you parked with a Blue Badge and it was not the colour of theirs you are fined £30, and if you didn't pay within 7 days it would go up to £60.

These Badges are in different colours depending on their boroughs, and if you go into another borough you need their own colour badge or be fined again.

On the Isle of Man we were under the impression that the Blue Badge was universal, but apparently they are not now.

So remember if you are in London that some boroughs of London appear to be issuing their own different coloured disabled badges, and if you haven't got one of their colour when you park in their borough you may be done.

*The Diabetic* contacted the Blue Badge Scheme in the Isle of Man asking for a ruling on the subject so that we could inform our disabled members, as it is of the utmost importance that disabled people in the Isle of Man are made aware of this anomaly.

We communicated with them on Monday 7<sup>th</sup> June last, and asked for a ruling.

They replied quote:- "Disabled visitors across the EU can enjoy the parking concessions provided in the host country by displaying the badge issued under their own national scheme.

These 'informal' arrangements have been the subject of legislation in Scotland, Wales and Northern Ireland, but it remains a matter for individual Local Authorities in England to decide whether they are prepared to recognise Badges issued in other EU countries.

In view of the above, although Blue Badges issued from the Isle of Man are valid in the UK, care should be taken regarding the differences in the concessions by checking with the relevant Local Authorities" unquote.

So take their advice and check with local authorities in the UK before you travel.

There is one crucial point we all have seemed to miss, and that is **the Isle of Man does not belong to, or is part of the EU.**

Now it appears that the Chairman had opened a Pandora's Box, because following the Chairman's approach the Blue Badge Scheme Authorities have gone deeper into it, and on Monday 9<sup>th</sup> August 2010 they issued a press release.

In it they summarise what a Disabled Blue Badge can do for you including where the scheme does not apply.

It claims that the Blue Badge Scheme does not apply to off-street, private roads and at most airports.

**Also the Scheme they say does not fully apply in four central London Boroughs. These are.**

**City of London.**

**City of Westminster.**

**Royal Borough of Kensington and Chelsea, and**

**Part of the London Borough of Camden.**

**So the Chairman was right.**

Blue Badge Holders, they also say do not have to pay the Toll congestion charges in London, provided that you register with Transport of London ten days before your journey and pay a one-off £10 registration fee.

Blue Badges, says the press release, can be used throughout the UK and in some other European Countries.

The EU publishes a booklet with detailed information about the use of the Blue Badge in European countries.

The booklet can be downloaded from the Department of Transport website.

The Blue Badge Advise line is on 020 7944 2914 or 0161 367 0009 or on e-mail [blue.badge@dft.gsi.gov.uk](mailto:blue.badge@dft.gsi.gov.uk)

**Once again remember you are NOT in the EU so that you are there on sufferance, as Isle of Man residents are considered non EU residents, so tread carefully.**

## **News in Brief**

**Researchers now say Brown Rice lowers risk of diabetes.**

Researchers at the Harvard School of Public Health say that switching from white rice to brown rice could reduce your chances of developing diabetes.

They claim that wholegrain rice raises the sugar levels less dramatically than white rice.

Their study which is believed to be the first of its kind, found that a third of a serving of white rice per day with brown rice would cut the risk of Type 2 diabetes, by 16 per cent.

The study also found that eating five or more servings of white rice per week led to 17 per cent higher risk of diabetes compared with one or two servings per month.

## **Pill that could replace jab**

We are now being told that there could be a pill that kick-starts the body's own insulin production.

The drug is undergoing test on animals and have shown that it can prompt pancreatic cells to start making insulin once again.

Earlier human trials using the experimental drug Exsulin partially restored insulin production.

However a new study is about to start in McGill University Health Centre in Montreal, Canada, to see if a new formulation can improve in the result.

### **The cost of diabetes to the NHS in prescribed drugs,**

Writing in the journal Diabetes Medicine, Cardiff University researchers say that the expenditure on prescriptions for glucose-lowering drugs has risen by 50%.

The say that the figures have shown an increase from £290 million to £591 million over the study period.

However in 2008 alone the NHS spent £700 million on drugs to control blood sugar.

Our Health Department here does not know what they spend on diabetes on the Isle of Man as Minister after Minister says in the House that they do not have figures for this.

The researchers claim that newer drugs like rosiglitazone as well as an increasing use of insulin have contributed to increased costs.

The problem that exists is that the diagnosis of diabetes is going up and up and now in East Lancashire alone according to the Rosendale Independent there are approximately 200 patients diagnosed per month in the area, that is 2,400 people per year, and many more people may not know they have diabetes, or that their life style could lead them to develop the condition.

The researchers consider the bill to high for the expenditure on drugs, but if they continue to diagnose 200 people a month in East Lancashire, just multiply this across the country and the bill will continue to escalate not diminish.

There needs to be a massive education programme here.

Warning to our Minister: **preventative care must be the order of the day, so no more funny antics on front line services.**

### **Eat Curry Leaves**

In a study at the University of Chicago animals with diabetes were given curry leaf extract daily for ten days, As a result blood

sugar levels were significantly reduced. The extract also cut cholesterol levels compared to a comparison group.

Curry leaves may therefore help patients with type 2 diabetes.

It is thought that the leaves contain compounds which control the amount of glucose entering the bloodstream which in turn reduces levels of cholesterol.

The aromatic leaves are found on the Indian *Murraya Koenigii* tree.

As all housewives know, curry leaves are available in supermarkets and can be used to flavour many dishes.

**Do infants enjoy infancy as much as adults enjoy adultery?**

### **The Last Laugh**

Control: Hello 999

Caller: There is a burglar in my house, I am standing outside, can you please send someone round quickly?

Control: Sorry we have no man power available to deal with your problem.

Two minutes later.

Control: Hello 999

Caller: It's me again, I have just shot the burglar.

Control: Stay where you are and don't move.

Within minutes a massive armed response unit arrived with half a dozen cars and vans, surrounded the house and asked him where the shot burglar was.

Caller: What shot burglar? No one has been shot, the burglar is still inside the house.

Police: But we thought you said you had shot the burglar?

Caller: And I thought you said you had no man power available to deal with my problem.

*Thanks to Doreen for the Last Laugh.*

### **A Reminder of the MHK's that voted against you at the October Tynwald and that included Mr Gawne.**

The following MHK's voted against you and for the Teare proposal for us to go it alone, and they abandoned us all.

The motion as presented by Mr Teare contained the following;

a) *That from April 1<sup>st</sup> 2010 the payment of any NHS charges incurred by Manx residents visiting the UK is an individual responsibility.*

In other words we wash our hands of you all, you are all on your own.

**Cut this out and put it on your fridge door and when they come to your door tell them you are not voting for them anymore.**

Mr Brown MHK	Castletown
Mr Teare MHK	Ayre
Mr Quirk MHK	Onchan
Mr Earnshaw MHK	Onchan
Mr Crookall MHK	Peel
Mr Anderson MHK	Glenfaba
Mrs Craine MHK	Ramsey
Mr Bell MHK	Ramsey
Mr Qualye MHK	Middle
Mr Malarkey MHK	Douglas South
Mr Cretney MHK	Douglas South
Mr Corkish MHK	Douglas West
Mr Shimmin MHK	Douglas West
Mr Watterson MHK	Rushen
Mr Gawne MHK	Rushen

Mr Bill Henderson MHK left the chamber for the vote, so he did not vote for you either.

Whatever they tell you take it with a pinch of salt, this is the vote that the Chief Minister's proud of, and keeps on quoting as the Tynwald authority for what they did.

One MHK even had the cheek to tell the Chairman that it was not him that voted against the people, it was Tynwald.

We all wonder who was holding his little finger to press the button to vote against the people.

They claim it was Tynwald and the British Government, not them.

We shall send them each a Christmas present of a bucket full of sand, so that being portable, they have it always at hand just in case they are caught short.

The Chairman told Manx Radio of what was going to happen, but it has happened sooner than he had anticipated.

Have you noticed that some of them are already asking lots of questions in the Keys and Tynwald, putting out 'Up-dates' and holding surgeries, are on Manx Radio constantly telling you what they are doing and

how well they are doing, and some even saying how wonderful they are by cutting their salary, **like Mr 10%**.

Pay no attention to them they are only playing to the gallery so that you vote them in again.

**It is time to give them the heave ho.**

**So remember them at the  
Ballot Box.**

**Don't vote them in again.**

**The Ticking Clock  
keeps forever  
Ticking and  
bringing the  
30<sup>th</sup> September  
rushing headlong  
towards us.  
It will overwhelm  
the Brown  
Government  
unless they wake  
up to reality.**

**We are the Group that leads from the front  
and gets things done.**

**We are the diabetic support Group of the  
Isle of Man Diabetic.**

**All monies collected are spent on the  
Isle of Man.**

**No monies are sent off Island.**

**Join the Friends of the  
Manx Diabetic today.**

**Telephone (01624) 613702 or  
e-mail [secretary@diabetes.org.im](mailto:secretary@diabetes.org.im)**

