

ANNUAL GENERAL MEETING

Notice is given that the next AGM of the Centre will be held at
1A, Stockwell Street, Cambridge, on
Wednesday, 9th March 2005 at 7.30 pm.

The business of the meeting will include:

- ◆ To approve the minutes of the AGM held on 27th February 2002
- ◆ To receive the Acting Chairman's report
- ◆ To receive the Honorary Co-Ordinator's report
- ◆ To receive the Therapist's Group report
- ◆ To receive the Honorary Treasurer's report
- ◆ To approve the Annual Report and Accounts for the year ended 3rd March 2004
- ◆ To appoint the Independent Examiner of Accounts for 2004-05
- ◆ To elect the Centre's Officers for the year 2004-05
*Current Officers are as follows: Chairperson -[vacant];
Hon. Secretary—[vacant]; Hon. Treasurer ~ David Wilson*
- ◆ To elect members of the Committee of Management
*Current members of the Committee (being Trustees of the
Centre) are: David Barylko, Sheila Bennett, Jane Cornell,
Fran Dawson, Mark Howe, Robin Maunsell, Viv Neville,
Ros Nightingale, Gill Overhill, Tricia Smith*

All current Officers and Committee members are eligible and willing to stand for re-election. New nominations will be very welcome and should be made in writing and bear the signatures of proposer, seconder and candidate. Please send to the Centre office.

All interested may attend the meeting, but only paid-up members may vote.

Sneaky

Remember in the last newsletter that Steve put this bit in about one of his role-players. He bypassed me, the Editor, and somehow winkled his way to Tricia.

He said one of his role-players (*well, yes ...me*) had been described as

‘scruffy’ ~ well, if they want scruffy they get scruffy;

‘slim’ ~ well, there you go;

‘sturdy’ and ‘shifty’ ~ words fail me;

‘18 years of age’ ~ it’s these new glasses. The Tesco optician did say they made me look younger;

‘Villainous looking’ ~ I found that being given permission to be pretend villainous is **absolutely marvellous**: does you the world of good. Best of all is pitting your wits against experienced police officers (*I always lose*).

BUT

‘dyed blonde hair’ ~ that is absolutely not the truth. You ask Ingrid. It’s so unfair. I have complained..



Pilates with Anne R

Michalina Craft ~

“**Pilates** is a form of movement and exercise therapy that aims to change the way we use our bodies. These changes can help create a stronger, more flexible body, which is able to move in a free and natural way. The Pilates exercises are performed slowly and precisely releasing tight, over-tense muscles and strengthening deep postural muscles.”

(Quote from Cambridge Pilates Bodywork Centre Ltd. Michalina Craft’s leaflet)

Michalina Craft helped to transform my life when I had a rare joint disease that affected my ankles last year. She gave me gentle exercises to do which built up my strength and ability to walk further ~ first to the local shops, and later into town. I started with some one-to-one sessions, then joined one of Michalina’s weekly classes when I was ready. I have been attending for a year and still find her approach very inspiring and believe she’s gifted.

I would recommend her to anyone ~ from someone wanting remedial exercise, to someone who wants advanced body control!

For information contact: Michalina Craft

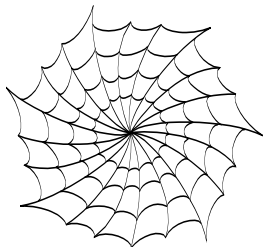
*Cambridge Pilates Bodywork Centre Ltd, Unit 4, Dales Brewery, Gwydir Street,
Cambridge Tel 01223 527408*

Spider/Party/ADT alarm

Lots of people helped us get ready for the party ~ David B put up the decorations, Brenda and Edna decorated the tree, Margot, Gill, Yvonne, Jane and Ros prepared the fruit punch and laid the tables. Unfortunately only just over forty people came along this year ~ just about half the number of those who partied with us last year but there was a lot of illness around. In fact Jane had put up a notice which said, 'This is Embarrassing! ~ all the therapists are sick or looking after sick family members, so unfortunately all therapies and relaxation are cancelled this week. Hopefully normal service will resume next week!'

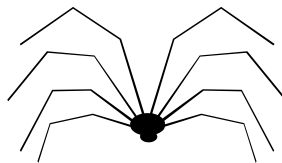
However, we were delighted to see all the people we did see. Dorothea and Nicholas entertained us with recorders and organ and helped us sing carols. Brigid (*one of our therapists*) enthralled us all as she told stories by candlelight.

Well, to try to make sure the alarm wasn't activated for any reason other than someone breaking in, David B, Brenda and Edna took down all the decorations before we went home. And so we slept soundly in our beds...but Fran didn't. She was called out at 1 am and, with a couple of police officers, went in to the Centre but could find no reason for the alarm to be activated. So the ADT engineer called in the following morning to investigate. He told us that the sensor in the office was the one where the action was but we couldn't see any signs of what had triggered it. But ... he did discover that behind the sensor were many spiders' webs. And I have seen a particularly spiderish spider in that sort of vicinity more than once.



"Can you dust behind here", he said, "spiders crawling over the sensor will activate the alarm. Have you got a duster? ~ can you do that?" "Erm".. I said and looked helpless. "Only Tricia knows where the duster is", I added pathetically. "And she isn't here on Tuesdays. He smiled knowingly and asked for paper towels so that he could do it. And so we gave this lovely man some Christmas cake and coffee as a thank you.

Christmas Party this year will be on
Monday December 5th.
Please put it in your diary now.



Yvonne wrote this:

Ann, A short time ago I asked one of my special friends, Bill, if he would write a piece for our Newsletter. Knowing him, as I do, a very likeable man with enormous courage, determination and positive attitude towards coping with his cancer, he never ceases to amaze all his many friends and family. He also has a wonderful sense of humour. I sincerely hope, therefore, that the following may help to inspire and encourage others.

A Colon Cancer Patient ~ from Bill

Yep, I'm one! Diagnosed six years ago this October.

Episode 1 "Malignant I'm sorry to say. Operation needed to remove a section as soon as we can." says consultant.

"How long?" asks daughter. "Oh about this much!" indicating between left and right hands a distance of two to three feet. "No, I mean how long before the operation?" says she. It took place before Christmas. According to overseas guest surgeon three people had a go. His was the lower abdominal part. Phew. Told him I was glad there weren't four. Alto to Soprano was not on my agenda. Never did find out whether he was serious or just in a jocular Christmas mood.

Episode 2 Nodes taken at time of operation indicted a suspect. Care referred to Oncology. Decision ~ chemotherapy. Six months of treatment followed. Usual side effects. Like most, I had my tough days, low days, indifferent and good days. However, scan at end of treatment gave "all clear."

Episode 3 All OK for next eighteen months then scan check indicated secondaries on liver. Excellent chance of operation until further tests and a biopsy confirmed left lung also affected. No chance of operation now. Only option ~ chemotherapy. (*Here we go again!*) Different chemo though, felt fitter this time. "Probably lose your hair", says Doc. How right she was! All OK until after third chemo session. Adverse reaction. Sixteen days in hospital. One twelve-hour period decidedly dodgy. Head again smooth. I tell you this though, during my stay in hospital what I found particularly heart warming, besides the care given by the Ward Staff (*brilliant!*) was the concern shown by patient to patient. We were family. Can't beat that!

Episode 4 Seven months on, hair on head soft but spiky, just like an adolescent boy's first whiskers. But guess what? More chemo needed. (*Another seven sessions this time*). By now a VERY regular Oncology customer. On first names with some of the staff and patients. Some with accompanying partners. Comparing notes, exchanging ideas and thoughts etc. ~ great! Hair, of course, slinked off again ~ third time. Feeling cool around the ears again!

Episode 5? Dunno! It's four and a half months now since my last chemo session and a couple of weeks since the result of my last scan ~ "holding". Next scan will determine what the future holds. I am truly grateful for the past six years though ~ each day a bonus and used to the full whenever possible.

Another great day today. Hope same tomorrow. Mind you, I have fantastic support from my wife, my family and friends, and the hospital and Oncology staff. Faith and prayer are also equally important. I can never repay such debt.

By the way ~ hair on head once more. Soft, white and spiky. Hair on face quite dark. Never was before. Still, I now have options; stay as I am or become blonde or brunette? No comments please!

Breast Unit at Addenbrooke's Hospital

Went along there and again offered under our National



was very impressed with what is Health Service. How fortunate we are to have this hospital on our doorstep.

Lunch at Snakatak

During these enjoyable social get-togethers at the end of the Centre's activities on Tuesdays, Robin (*Artist/Writer*) often promises to write something for the newsletter. He sort of says that he will base his writings on a bit of fact and some porky-pies. As a regular swimmer at a local health club I think he has absorbed the following goings-on as he observes and reflects upon what is happening around him as he does his leisurely swim.

Pool Notes (1)~ from Robin

I spoke to my friend, Griselda, who was on her sixty third length of *butterfly*. She is a beautiful swimmer that Griselda.

"How about the water jet thingy?" I asked.

"What about it", she queried, as she came up for air at the shallow end.

"Does it tickle?"

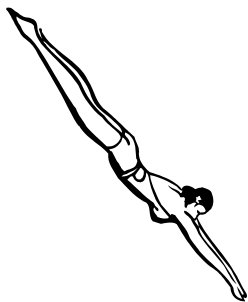
"Does what tickle?"

"You know."

Ronaldo, the pool attendant, Lord Lucan moustache, lycra down to his ankles, is checking the performance with his stopwatch.

"Faster, faster. You can do it, Miranda."

"F off will you." Miranda silently mouths. She goes underwater then off for a *steam* with Matilda.



A stasis settles on the afternoon.

"He's usually here by now."

"I know", says Griselda.

"What's happened to him?"

The man who walks through (*not on*) water is late.

"I think Matilda's nipples are bigger than on Friday."

"She's probably been..."

"That would be it."

"You see that man over there with the striped towel, Lucy-Jane? I don't half fancy him."

"I'd rather have an éclair myself. In fact that's what I'm going to have when I get

out of here.”

“Of course you are. You’re more of an éclair person than a people person.”

“Is that a hedgehog I saw breast-stroking in the shallow end just now?”, asked Paul.

“Hedgehogs I’ve known”, whistled Simon

Pool Notes (2) ~

“The way she crawls!”

“Baby like, isn’t it?”

“I’d push her head under the water if I had half the chance.”

“Is that right, Lucy-Jane?”

“What do you think of this lot then,?” murmured Harry.

“Not sure.”

“The only one I’d rate is the little Venus in blue.”

“Bit top heavy, isn’t she?”

“That’s what I mean.”

The Jump, Swim, Shout Group are lining up waiting for Renaldo's whistle.

“Just look at her cosi.”

“Whose cosi are we looking at, Lucy-Jane?”

“Matilda’s”

“Yeah, you’re right. I like Ronaldo’s little trunky things.”

“I like what’s inside Ronaldo’s little trunky things.”

“Griselda says a hedgehog was found swimming in the shallow end last week”

“What was he doing there?”

“Breast stroke, I think.”

Heart Attack Self Help

A cardiologist says if everyone who gets this e-mail sends it to ten people, you can bet that at least one life will be saved. Read this ... It could save your life!!

Let's say it's 6.15 pm and you're driving home (*alone of course*), after an unusually hard day on the job. You're really tired, upset, and frustrated. Suddenly you start experiencing severe pain in your chest that starts to radiate out into your arm and up into your jaw. You are only about five miles from the hospital nearest your home. Unfortunately you don't know if you'll be able to make it that far. You have been trained in CPR, but the guy that taught the course did not tell you how to perform it on yourself.

How to Survive a Heart Attack When Alone

Since many people are alone when they suffer a heart attack, without help, the person whose heart is beating improperly and who begins to feel faint, has only about ten seconds left before becoming unconscious. However, these victims can help themselves by coughing repeatedly and very vigorously. A deep breath should be taken before each cough, and the cough must be deep and prolonged, as when producing sputum from deep inside the chest. A breath and a cough must be repeated about every two seconds without let-up until help arrives, or until the heart is felt to be beating normally again. Deep breaths get oxygen into the lungs and coughing movements squeeze the heart and keep the blood circulating. The squeezing pressure on the heart also helps it regain normal rhythm. In this way, heart attack victims can get to a hospital.

Tell as many people as possible about this. It could save their lives!!



A Lucky Escape ~ Andy Newman (Amigo 2)

A show of blood in my water ~ panic, panic. My father had died of prostate cancer a few years earlier. I was now convinced I was on the same road! Off to the doctor's surgery I rushed ~ "don't worry", says the doctor, "some antibiotics will soon clear that up" ~ and it did.

For six months.

Then it all happened again.

Off to the surgery I rushed again to see a different doctor. "There's a clinic at Addenbrooke's that deals with that", he said, and I had an appointment within a few days. I was then on what I call a 'merry-go-round' that has never stopped. I was diagnosed with bladder cancer. That was five and a half years ago. My treatment has now finished and I now get a check-up every six months, soon to be 12 months. I cannot speak highly enough of the treatment I have received, and regard myself as cured. The surgeon in charge of me could not understand why I was not referred after my first visit to the doctors, and to be fair to the surgery they have now changed their procedures and refer those with blood in their urine straight away.

My advice to all is "don't be put off". The sooner you receive treatment the more chance of survival you have. Always insist on being referred to the specialist clinic at your hospital straight away.

A lucky escape, don't leave it to luck.

Whoops ~

Someone I know, who is a management trainer, said that during some sort of charade-type ice-breaking exercise, course participants were handed a slip of paper which gave them instructions on what to do for a couple of minutes in front of the rest of the students. She couldn't quite understand why one of the men, whose turn it was, was almost sitting/standing on her lap and obviously enjoying himself. After a perplexing couple of minutes she said "hold on a minute"... "what does it say on your bit of paper?" He read it to himself and said "it says demonstrate lap-dancing". "No, no, no", said our trainer. It actually says "demonstrate **tap**-dancing"!

This trainer also gave me this:

Start Here:

1. When do you feel at your best?

- (a) in the morning
- (b) during the afternoon or early evening
- (c) late at night

- side by side
- (b) your legs crossed
- (c) your legs stretched out and straight
- (d) one leg curled under you

2. You usually walk

- (a) fairly fast with long steps
- (b) fairly fast with little steps
- (c) less fast, head up, looking the world in the face
- (d) less fast, head down
- (e) very slowly

5. When something really amuses you, you react with

- (a) a big appreciative laugh
- (b) laugh but not a loud one
- (c) quiet chuckle
- (d) a sheepish smile

3. When talking to people you

- (a) stand with your arms folded
- (b) have your hands clasped
- (c) have one or both of your hands on your hips or in pockets
- (d) touch or push the person to whom you are talking
- (e) play with your ear, touch your chin or smooth your hair

6. When you go to a party or social gathering, you

- (a) make a loud entrance so everyone notices you
- (b) make a quiet entrance looking around for someone you know
- (c) make the quietest entrance, trying to stay unnoticed

4. When relaxing, you sit with your

- (a) knees bent with your legs neatly

7. When you're working or concentrating very hard, and you're interrupted, you

- (a) welcome the break
- (b) feel extremely irritated
- (c) vary between these two extremes

8. Which of the following colours do you like most

- (a) red or orange
- (b) black
- (c) yellow or light blue
- (d) dark blue or purple
- (e) white
- (f) brown or grey

you lie

- (a) stretched out on your back
- (b) stretched out face down on your stomach
- (c) on your side, slightly curled
- (d) with your head on one arm
- (e) with your head under the covers

10. You often dream that you are

- (a) falling
- (b) fighting or struggling
- (c) searching for something or somebody
- (d) flying or floating
- (e) you usually have a dreamless sleep
- (f) your dreams are always pleasant

9. When in bed at night, in those last few moments before going to sleep, do

Points						
	(a)	(b)	(c)	(d)	(e)	(f)
1	2	4	6			
2	6	4	7	2	1	
3	4	2	5	7	6	
4	4	6	2	1		
5	6	4	3	2		
6	6	4	2			
7	6	2	4			
8	6	7	5	4	3	2
9	7	6	4	2	1	
10	4	2	3	5	6	1
Now add up the total points						

Over 60 points

Others see you as someone they should 'handle with care'. You're seen as vain, self-centred and one who is extremely domineering. Others may admire you, wishing they could be more like you, but don't always trust you, hesitating to become too deeply involved with you.

51-60

Others see you as an exciting, highly volatile, rather impulsive personality, a natural leader, one who's quick to make decisions, though not always the right ones. They see you as bold and adventuresome, someone who will try anything once, someone who takes chances and enjoys an adventure. They enjoy being in your company because of the excitement you radiate.

41-50

Others see you as fresh, lively, charming, amusing, practical and always interesting; someone who is constantly at the centre of attention, but sufficiently well-balanced not to let it go to their head. They also see you as kind, considerate and understanding; someone who will always cheer them up and help them out.

31-40

Others see you as sensible, cautious, careful and practical. They see you as clever, gifted or talented, but modest. Not a person who makes friends too quickly or easily, but someone who is extremely loyal to friends you do make and who expects the same loyalty in return. Those who really get to know you realise it takes a lot to shake your trust in your friends, but equally that it takes you a long time to get over it if that trust is ever broken.

21-30

Your friends see you as painstaking and fussy. They see you as very cautious, extremely careful, a slow and steady plodder. It would really surprise them if you ever did something impulsively or on the spur of the moment, expect you to examine everything carefully from every angle and then usually decide against it. They think this reaction is caused partly by your careful nature.

Under 21 points

People think you are shy, nervous and indecisive, someone who needs looking after, who always wants someone else to make the decisions and who doesn't want to get involved with anyone or anything! They see you as a worrier who always sees problems that don't exist. Some people may think you are boring. Those who know you well know that you aren't.

Spice of Life

'Life Nutrition' in the Observer magazine says that laboratory studies suggest that turmeric can help reduce the risk of the body's cells turning cancerous, and may help curtail the growth and spread of existing tumours. Other research discovered that components in turmeric can help to quell the action of cancer-inducing substances called carcinogens and might also cause cancerous cells to self-destruct. Dr John Briffa, in this article tells us that more research has come to light that suggests that this spice might indeed have anti-cancer properties. In an American study turmeric was found to inhibit the multiplication of leukaemia cells, in the laboratory. He goes on to say that interestingly, in Asia, where turmeric is a commonly used food ingredient, rates of childhood leukaemia are much lower than they are in the West. While it is admitted that this may be due to variations in other factors, it is believed that the results of the recent laboratory study do suggest that the consumption of turmeric may help in the prevention of childhood leukaemia.

Dr Briffa also recommends that we should eat a wide range of foods to ensure we get useful levels of a broad spread of the health-giving substances in different vegetables. In theory, his cooking up of several types of vegetables should yield a veritable alphabet soup of nutrients. He tells us that in one study in the American Journal of Clinical Nutrition, researchers assessed the relationship between the consumption of five major food groups (*meat, dairy, grain, fruit and vegetables*) and overall risk of death. This research showed that eating a diet limited to two or fewer major food groups was associated with a 50 and 40 % increased risk of dying in men and women respectively. In another study eating a diverse diet was associated with a significantly reduced risk of death due to both cardiovascular disease and cancer. A veggie intake was associated with a 34 % reduced risk of colon cancer in men and vegetable consumption was found to be associated with a reduced risk of breast cancer. He says it was not so much the volume but rather the variety consumed that seemed to offer protection. He ends by saying that it does seem as though ~

variety really is the spice of life.

'Perennial Gardeners' *Royal Benevolent Society ~Richard*

This charity has been helping horticulturists in need since 1839.

It is for gardeners who retire homeless as with the work went a home. Some gardeners are forced to retire early due to serious illness, as in my case, with lymphoma. We are offered homes in Barton, Sussex, York Gate near Leeds, Gloucestershire and Netherbyes near the Scottish border. Our gardens at Barton will be open on **April 10th** and **May 8th** this year in aid of the **National Gardens scheme**.



Both our patron, the Queen Mother and our president Princess Alice have died. However, the Queen has chosen **'Perennial'** to be the beneficiary of an Open Day at Frogmore Gardens, Windsor Great Park on May 18th this year. The gardens occupy almost 35 acres and are most beautiful. They are the glorious setting of the royal graves including the mausoleum of Prince Albert and Queen Victoria.

Tickets for the Open Day are £3.50 and can be purchased in advance by calling 01372 384049.

Perennial is also expanding its help to young gardeners who have had serious accidents or illness. They are given grants and all sorts of practical help.

There is a Supporters Scheme. *Call 01372 384049 to request a leaflet or write to Perennial, 139 Kingston Road, Leatherhead, Surrey KT 22 7N*

Gardening Notes ~ Snowdrops (Galanthus)

Snowdrops arrive in very early spring and will survive snowfall unharmed. They are indeed the heralds of spring and very uplifting. The white petals are nearly always touched with green. Usually the flowers are single with six petals, but there are doubles.

Snowdrops like growing in woods, under shelter and in shade. They combine very well with small Iris reticulata and yellow winter aconites (*Eranthis*).

Dried bulbs do not transplant very well. It is best to buy them 'in the green' after flowering.

Plant the bulbs 8-10 cm (3-4 in) apart and cover them with 5cm (2in) of soil.

Snowdrops will self-sow, if left to themselves, but it will be three to four years before the new plants flower. You can collect the seed and sow it in pots or in a frame, under shade. Keep it well watered. If you buy seed, sow it between autumn and early spring. Divide the plants after the flowers have died. Lift the clusters and separate them carefully into individual bulbs, each with its own roots and leaves.

Popular species are Elewesii (*Asia Minor*) ~ a large flowered species, whose inner segments are marked a deep emerald green and Nivalis (*Europe*) known as the common snowdrop. Favourite varieties also include sweet-scented 'Sam Arnott' and the double 'Floreplena'.

In Cambridgeshire we are fortunate in having a fine snowdrop collection at Anglesey Abbey.



*In the dew of little things
the heart finds its morning and is refreshed.*

Kahlil Gibran ~from Fiona's 'Little Book of Quotations'

From Margaret, who received this...

Message from a lady ~

It was about three weeks ago, I was at the Shell station in London getting diesel. It was about 11.30 pm. I was approached by two men and two women in a car. The man that was driving asked me "what kind of perfume do you wear?" I was a bit confused and I asked him "why?" He said, "we are selling some name brand perfumes, at cheap prices". I said I had no money. He then reached out of the car and handed me paper that was laminated; it had many perfumes on it. I looked quickly at it and gave it back. I said "I have no money". He said "it is OK, we take cheque, cash or credit cards". Then the people in the car began to laugh. I just got in my car and said "no thanks". Then I received this e-mail yesterday and it sent chills up my spine. Please read this.

Here is the e-mail I was sent:

Be careful. I was approached yesterday afternoon around 3.30 pm in the Tesco car park when two males asked what kind of perfume I was wearing. Then they asked if I'd like to sample some fabulous scent they were willing to sell to me at a very reasonable rate. I probably would have agreed had I not received an e-mail some weeks ago warning of a "wanna smell this neat perfume?" scam.

This is not perfume...it is ether! When you sniff it, you'll pass out. They'll take your wallet, your valuables and heaven knows what else. If it were not for this e-mail I probably would have sniffed the 'perfume' but thanks to the generosity of an e-mailing friend, I was spared whatever might have happened to me. I wanted to do the same for you.

Beware of new car-jacking scam.. This is said to be from a Manchester Police Officer. Imagine you walk across the car park, unlock your car and get inside. Then you lock all your doors, start the engine and shift into reverse. You look into the rear-view mirror to back out of your parking space and you notice a piece of paper stuck to the middle of the rear window. So, you unlock your doors and jump out of your car to remove the paper (*or whatever it is*) that is obstructing your view. When you reach the back of your car, that is when the car-jackers appear out of nowhere, jump into your car and take off. Your engine would be running. (*Ladies would have their handbag in the car*) and they practically mow you down as they speed off in your car. Be aware of this scheme that is now being used. Just drive away and remove the paper from your window later and be thankful you read this notice A handbag contains all identification and you certainly do not want someone knowing your home address, as they already have your keys!!

Suzanne sent us this review. She said it appeared in the counselling journal *hcpj* in October 2004 and is reproduced by kind permission of *bacp* and Janet Thomas.

‘Trust me I’m a Cancer Patient’

by Wesley Finegan

Radcliffe Publishing, 2004, ISBN 1857758773 £14.96

Cancer patients and those who care for them will welcome this book. Wesley Finegan’s experience of being both a cancer patient himself and a doctor caring for others enables him to be in touch with the intense emotions that a diagnosis of cancer brings.

The book is presented in four sections dealing with pain, physical problems, personal, social and spiritual problems, and an appendix containing a glossary, charts for mapping symptoms and useful contacts.

The text is clearly laid out in a uniform style with headings and logos for different prompts. In the midst of fear and confusion this makes the information easily accessible ~ just what I would need if I felt my world was falling apart. The information provided enables people to help themselves and indicates when to ask for medical intervention. The author really understands the patient’s need for information, which is realistic without being unnecessarily threatening ~ also the need to have a sense of involvement in their own treatment.

In spite of the serious subject I found myself smiling often as I read this book. Personal anecdotes remind us that here is a man writing from personal experience of serious illness, but who is still able to see the funny side of his life.

The tricky issues of spiritual and emotional reactions to cancer are sensitively addressed and there is even a section on making a will. Unpleasant symptoms and difficult topics are faced in a matter of fact way. Finally the appendix explains unfamiliar terminology and gives a comprehensive list of organisations that might be able to help.

I would like to see copies of this book in hospices, surgeries and oncology departments as well as in the homes of cancer sufferers.



In all Innocence ~

I simply remarked that if I found I had parked my car parallel to the kerb I knew I had achieved that by accident. I didn't really see that it was that funny.

But when I told Tricia she said that early last year a mathematician (*a woman in fact!*) ~ a Dr Rebecca Hoyle of Surrey University, had worked out a formula (*or formulae*) for accomplishing the perfect manoeuvre.

Here they are:

$$p = r - w/2$$

$$g \geq w + 2r + b$$

$$f \geq w + 2r - fg$$

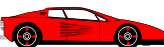
$$\max [(r + w/2)^2 + f^2, (r + w/2)^2 + b^2] \leq \min [(2r)^2, (r + w/2 + k)^2]$$

where w = width of car at widest point, c = the midpoint between the axles, f = distance from c to front of car, b = distance from c to back of car, r = minimum radius of turning circle, p = distance away from parallel car at the start, k = optimal distance from kerb at the finish, fg = distance from car front at finish.

Tricia assures me that this complicated series of equations boils down to these five seemingly simple steps to achieving the perfect 'S-shaped' curve at the roadside.

- ◆ Find a space between two cars that's at least one and a half times the length of your car.
- ◆ Move into a position parallel to the front car and not too far away from it (*not too close either*).
- ◆ Inch slowly back and when your back bumper is level with the parking space, apply full lock towards the kerb and move back slowly until your car is at an angle to the kerb of exactly 45° (*this is quite tricky*).
- ◆ Turn the wheel full lock the other way.
- ◆ As the front of your vehicle approaches the kerb, straighten the wheel ~ and there you are ~ beautifully parked at just the right distance away from the kerb.

Tricia goes
But a word of



on to say:
caution ~

The formulae bring into play a variety of variables ~ the width of your car, the distance between the axles, the distance from the mid-point of the axles to the front and back of the car, the minimum turning circle of the car and the distance from the parked car in the first manoeuvre. Critical factors are ~ the correct starting position and the size of the available gap, followed by the timing and the speed of the approach. Get these wrong and what should have been a benign and smoothly rippling 'S' wave could become a self-generated tsunami ~ apparently misjudged low-speed manoeuvres account for £151 million pounds worth of damage a year!

Although we of the fairer sex can take some pride in the fact that one of our number created the formulae, it would be wise, before being completely overcome by hubris, to note that an insurance company survey conducted in 2002 showed that "women were almost twice as likely as men to have a collision in a car park, 23% more likely to hit a stationary car and 15% more likely to reverse into another vehicle."

Turbulence

Well, have to say that BT were



amazingly good at handling my complaint about paying that £55.

They replied to my letter and said they would look into it, then a short time later they phoned to say they would cancel the charge and a day or two after that a letter arrived saying that BT does adopt a policy of charging customers for unnecessary visits if it is clear that the customer has been advised by their 151 Fault Repair Service of how to check and test their own equipment, to eliminate it as a possible cause of the fault. They went on to say they were not satisfied that either of the above had been established in this instance and that the work undertaken by the engineer to clear the fault should therefore have been carried out free of charge. This is a different story from a particular book company which doesn't reply to letters, doesn't take them into account, makes no reference to them as it continues to send letters threatening bailiffs, a swiftly increasing solicitor's bill and threats of a court appearance. If you want to know the name of this company, ask me.

Pain management

The Lymphoma Association Fact File writes about pain management in the Summer 2004 issue.

Some of the headings are: treating pain, drugs, non-opioid painkillers, drugs for neuropathic pain, adjuvant drugs, including corticosteroids, antidepressants, opioid drugs and pain clinics and pain programmes, unsound fears of addiction. Also there is a section on 'frequently asked questions'. The answers come from Dr Andrew Lawson, who is a consultant in Anaesthesia and Pain Management at the Royal Berkshire Hospital and Senior Clinical Fellow in Medical Ethics at the Medical Ethics Unit, Imperial College School of Medicine. Dr Lawson is also Chairman of the Pain Intervention Interest Group (*Pain Society UK*).

Here are some of the answers to the 'frequently asked questions':

There is no serious risk of addiction when morphine-like drugs are given for pain control.

Taking morphine will not mask any new disease and prevent your doctor from treating you properly because though an increase in the strength of drug needed to control pain may be a harbinger of new disease, treating pain does not prevent diagnosis.

If you can manage without painkillers you are not better off by just putting up with the pain. Evidence suggests that just tolerating the pain is physically bad for you.

If you take morphine-like drugs your life expectancy will not be shortened. The opposite is probably true, good control of pain will increase life expectancy.

No, it is not true that nerve blocks cannot help pain caused by cancer. In certain circumstances they can give dramatic improvements. (*My Mum had nerve blocks for her pancreatic cancer pain and the effects were dramatic ~ Ann*)

Pain may seem worse at night and this is probably because you are less distracted and likely to notice it more.

If your doctor wants to start morphine that does not mean nothing more can be done to fight the disease. Getting good control of pain goes hand in hand with treatment

If you cannot swallow tablets, pain killers also come as liquids, in lozenges that dissolve under the tongue, as lollipops, as suppositories and as patches which act through the skin.

In answer to the question "won't morphine make me feel sick, drowsy and unable to function or drive?" there are ways to deal with side-effects and there is some evidence that driving with effective pain relief is safer than driving in pain*

**The Drivers Medical Group (tel. 0870 600 0301) of the Driver and Vehicle Licensing Agency (DVLA) and your car insurer may need to be informed about your medical condition and/or your treatment.*

Views expressed in the Lymphoma News are those of the contributors. The Lymphoma Association does not necessarily agree with or endorse their comments.

PING

If you are sitting in Snakatak with **Hazel P** she may be in the middle of a conversation but a ‘ping’ will impinge on the conversation and she will stand up and carry on talking. If you know Hazel you know that this is quite normal behaviour for her since she attended the Input course at St Thomas’s Hospital to help her with pain management. She wrote this for us:

Coping with Chronic Pain

I was talking to Ann and Robin and John in the cafe one Tuesday and Ann was asking me all about my stay in London.

I’ve just been into the pain management centre at St Thomas’s Hospital for a month. It wasn’t like normal hospital. I had my own room and shared kitchen and bathroom and a stunning view of Big Ben and we started at 8.30 am and finished at 5 pm. You see I’ve had this terrible pain in my lower back and underneath my left buttock and down my left leg for four years now. It’s been there right from the beginning from when they first found the cancer in my bladder, which they removed and gave me chemo and they checked me every four months, but still the pain persisted. Then two weeks after the cancer was removed I told them I couldn’t stand, sit or lie down and didn’t know what to do with myself. I thought, naturally, that I had cancer somewhere else and that this was ‘it’ but it turned out I had a cyst the size of a rugby ball on my left ovary, which caused me to collapse. My son, Thomas, found me and I was rushed to hospital and given immediate surgery. But still the pain persisted. They discovered that my sterilization clips were imbedded in my tube and amongst severe adhesions so there was more surgery. I lost my ovary and fallopian tube but still the backache didn’t disappear.

When I went back to the Cancer Help Centre, after being away for many weeks, people were saying “where have you been, you look well”, and I was saying, “I’ve been in St Thomas’s for a month”. They responded with “oh no, more ops, poor you” but ~ no ops, no nasty tests, nothing like that. I’d been in the ‘Input Centre Pain Management Unit’. It’s amazing now, after all the years of still thinking something was terribly wrong with me. Now I know it’s chronic pain

which cannot be cured but at least I know what it is. My nervous system is sending all the wrong signals to my brain (*I'm amazed that I have got a brain!*), and saying pain, pain, real pain. And what had I been doing? ~ loads of work, rushing around when I was having a good day and then knocking myself up for the next few days, taking tablets, resting in the day. The pain was controlling my life. I couldn't drive, work, swim, dance, was depressed, big vicious circle. I'd be overactive on a good day, under-active on a bad day. But now, no more of this ~ not any more!

Now I write down for the whole week every hour what I'm going to be doing. I do a job, maybe vacuum one room, then rest then maybe wash up then have a rest. I pace my whole day. I even have a timer. I can walk for eight and a half minutes, stand still for three minutes, sit in a hard chair for seven minutes then up I get. My timer is bleeping. I'm like a jack in a box. I do thirty minutes of stretches every day, different exercises too, just like everyone brushes their teeth in the morning. It's just part of my life now and I think about all my thoughts and feelings. I don't panic about anything any more. I'm not passive or aggressive. I'm assertive but calm because upsetting myself will not help the pain. I do lots of short relaxations through the day, even in the street. I also do a long one before I go to sleep. I go to bed before midnight and get up the same time every day. It's all about me controlling the pain not the pain controlling me. If I achieve something, maybe just one length in the swimming pool, that's great. It's more than I did last year, so it is a great achievement. So I have a 'reinforcer' (*that's a 'treat'*). It might only be a biscuit or five minutes with a cuppa or I pat myself on the back and say "well done you".

Getting back to the Centre is an amazing feat as well. No car, so that's two buses. "How am I going to manage" is what I would have thought a few months back but not now. Timer on, it bleeps ... so stand up, people look at me asking themselves "why is she standing when she's not pressed the button to get off the bus, why is she kneeling facing the wrong way on her seat and looking at us?" I know that's what they are thinking. But do I care? NO.

When You Feel Frightened, what do you do?

FRIGHTENED is a big word. A lion confronts me on the plains of Africa. What would I do? I don't know but I suspect freeze initially and then probably do the wrong thing by running like hell, a sort of running-hop with my stick. If **FRIGHTENED** equals very worried, concerned etc. then I would go in on myself. When my marriage broke up (*reasonably amicably*) some years ago I buried myself in work. This was partly because I needed to improve my cash flow but, more importantly, to deal with the situation of sense of failure, unhappiness. When I am worried or unhappy I try and do constructive things. It doesn't take the problem away and it's not easy to do because part of me wants to simply sit and wallow in it, but it allows me to reason with myself along the lines of despite all the negative things that are surrounding me I have got something positive done. It makes me feel that not all the ropes that should be holding the ship to the quay have fallen into the water. *Robin*

With the diagnosis of cancer, I made a deliberate effort to overcome fear, because fear in this context is so unhelpful and takes precious energy better used elsewhere. *Viv*

If feeling DOWN or FED UP ~ finish the day. Have a drink of whatever suits you and go to bed early ~ get rid of that day and look forward to tomorrow ~ a NEW DAY! *Dorothy*

Say a prayer 'teach us Lord to be anxious for nothing' ..., *Richard*

If I am frightened by a noise I have to go and find out what is making it. Anything else, I have to try and do something about it if I can. I talk to my son about it. Sometimes after I have slept on it I can see things differently and work it out in a better way. Sleep rests the mind so you can work things out. *Brenda D*



Christmas Lights ~ Charlie

The story I am about to relay to you involves someone who I know very well and because of this I will not name him. But I'm sure if you try you will recognise him as the story unfolds.

It is the Sunday before the Centre Christmas party and Mr X is at home with his partner when they decide it is time to put up their Christmas decorations. In his true 'let's get it done' mode they decided to do them there and then.

Mr X gets out his step ladder and climbs up to where his light is in the lounge to hang up a decoration. On getting to the light fitting he finds that it is loose and one of the screws and fittings have come out of their hole. The fact that this light fitting is directly under their bed is another story for another day.

"Not a problem", he calls to his partner, "all I have to do is move the fitting about three inches and it will screw into the wooden beam and the problem will be solved". So Mr X gets his big screwdriver out and screws the light fitting tightly to ceiling and into the beam above and it no longer moves. The Christmas decorations are then put up and all appears well within the household.

Before going to bed his partner says, "have you tested the lights?", and Mr X nods and says they will be alright.

The next morning Mr X gets up early as he has a course to train. In fact he is up so early he does not go into the lounge or turn on the lounge light. This will become a crucial feature as the story continues. He leaves his partner in bed to get up at a normal time to go to a sensible job.

At work Mr X is busily getting ready for his course with his co-trainer, in fact deciding what they will train, how and in what order, as they had both forgotten the programme.

Meanwhile back at the house his partner is getting up. Now first thing on Monday mornings is not a good time for most people and she comes down stairs and decides to go into the lounge. She reaches for the light switch and . . .

Thirty seconds later the phone rings on Mr X's desk. He picks it up and all I hear is "um, um, er, well I think if you put the main fuse back on it should be alright till I get home tonight ~ I can't come now we're still sorting out the course"!!

He then very gingerly puts the phone down and explains what has happened, his partner has switched on the light, there was an almighty bang, the light switch moves from the wall and the whole of the house is plunged into darkness. Cue the telephone call ...

Now it is pretty obvious to astute readers that Mr X had not been totally up front with his nod and “they’ll be alright” the previous evening, and no doubt this will be mentioned several times over the next five to ten years whenever he is in trouble.

At work both he and I are full of concern, admittedly sat in a lit room with a hot cup of tea, trying not to smirk as he relays the details.

He decides it will be something simple and that on his way to collect me for the Centre party he will call at Homebase to pick up a few things and sort it out Tuesday evening. His partner who was unwell with flu would enjoy candlelight that evening ~ it would soothe her fever.

We go to the party and have a lovely time.

The next morning Mr X says he will have to be off sharp to do the light before it gets dark. That evening he returns home, and using all his DIY skills makes a repair that looks fine ~ until you turn on the light. A loud bang follows, and also words that could not be repeated in print. By now it is dark and another night of romantic candlelight ensues.

On the Wednesday morning Mr X arrives explaining how the lights are still not working but will be sorted out that day.

That afternoon on his return home he removes the light fitting again and then notices the problem ~ the live wire has bare wires protruding from the fixture and he has very cleverly, and with amazing accuracy, screwed up the metal plating to trap this bare wire to complete a circuit. And as we all know from our physics at school that will make a very loud bang indeed. Mr X now has to replace the wiring in the light fixture which is burnt out and welded to the side, the light switch that was an expensive timer switch and also endure much laughter and sympathetic support from his colleagues.

After this the lights worked again ~ all this work and expense for his Christmas decorations.

Perhaps now you can all see why the Government brought in the law about electrical work within the home ~ they had obviously heard of Mr X!

PS When the Centre moves Mr X has offered his services. I suggest he is not given anything electrical to do apart from plugging in the kettle!

Judith ~ felt the earth move (in Costa Rica)

Well, that's what she e-mailed to me. So we waited in a state of excitement. "Sorry to disappoint you (*and me*)", she said, "it was only an earthquake of 6.3 on the Richter Scale, but apparently that's quite big, it certainly shook my bed. love Judith"



Brenda D writes

I have been asked by the hospital to write this as it will help them a lot. Sometimes something can happen to us and we have to be taken to hospital in a hurry. So to help the ambulance staff and yourself they would like us to always have a bag ready somewhere downstairs where they can get it quickly. Inside the bag put your name and address, GP's name and phone number, your next of kin and the tablets you are taking. Include spare house keys, toiletries, night things and jacket or cardigan. Anything else can be got another time. Then all the ambulance crew have to do is pick up the bag and get you to hospital ~ saving them a lot of time.



GIVE TO THE TSUNAMI BOGUS

VICTIMS ~ NOT TO APPEALS

The Charity Commission is warning that misleading leaflets claiming to collect for the Tsunami earthquake victims are being distributed by clothing collectors asking for clothing and cash. Areas so far targeted include London, Lincolnshire, East Anglia, Leicestershire and Essex but previous similar scams show that other areas tend to follow. The Commission is advising local people to be extremely cautious about donating to such misleading appeals. Many of these collections are not registered charities ~ although they often give fictitious or limited company numbers ~ and there is no guarantee at all that donations will reach victims of the earthquake.

Took a call yesterday from a lady who had found one of our (*empty*) collection tins in her garden. **Sid** says three of our tins were stolen from pubs and clubs during 2004. So it is just as well that he and **Maureen** continue to find extra places for our collection boxes ~ thank you, both of you.

And thank you:

Enda for the microwave

Gill & Eileen for organising our fund-raising stalls.

Pharmion Ltd who raffled corporate Christmas gifts & raised £92 for us.

There are so many people who help our Centre ~ here are some of them ~ they will all know what our thanks are for:

Glyn	Ros
David B	Fran
John	Brigid
Yvonne	Scilla
The Carlton Arms	Lesley
Daily Bread	Linda
Brenda	Dennis
Dorothea	Don
Nicholas	Mandy
Tricia	Lee and Steve
Jane	Charlie
Jack	Robin
Ken	Barton Church Fellowship
Margot	Evelyn Borley & Abington
Richard	Whist Drive

*And thank **you** Ann for making sure that material for the newsletters keeps coming in. You always manage to hit the 'right' note and find the 'right' balance between information, inspiration and entertainment ~ **Tricia***

David Cornwell Fund

This fund is to pay for complementary therapy to alleviate suffering and distress in people with cancer. This assists the Centre to make available to those in need some therapies that are not provided on the Centre's own premises, such as pain management, physiotherapy, specialist massage and some counselling. It is also used to help with the travel costs of attending courses at the Bristol Cancer Help Centre.

If you would like to take advantage of this Fund please speak to Ann.

Terry Waite

We're having a gradual clearing out of unnecessary belongings at the Centre. So we asked Emmaus if they would like to collect what we don't need. We gave the two gentlemen coffee and cake and they mentioned that Terry Waite had asked if he could join the Emmaus community for Christmas Dinner. So we thought we would send him a copy of our book. So this means that if you were a contributor to that book your story will be read by Terry Waite.

Centre Evening Opening

We plan to open one evening a month
for dropping in and for reflexology
and healing, beginning on

Thursday 3rd March from 5.30 pm-8.30 pm.

Please book your appointment by
phoning the Centre.

And later in the year we will have an
Open Day.

Jean Cairns

Last summer Jan told us that Jean was longing to go to the seaside. So, of course, she came to Sheringham, in preparation for which she purposefully endeavoured to increase the amount of care she could do for herself. We found her a convenient bedroom of her own but she did wonder whether she could manage the bunk beds because of their restricted headroom. So we piled up mattresses on the floor and Jean, who couldn't be particularly agile, practised getting off the reconstructed bed and standing up and proved to all of us she could do that safely. I think she fantastically enjoyed that long weekend.

Dennis told me that just before Jean had some healing with him, some time in December, she told him that she had had a "marvellous experience". She went on to describe that she was in bed, and woke up in the night. The curtains weren't completely drawn and as Jean looked through the window there was a beam of moonlight shining on her bed. So she looked out of the window and "there was a very beautiful angel looking in. I said, out loud, oh, please don't take me before Christmas".

And if that brings a tear to your eye and a lump to your throat, as it did to mine and Dennis's, do think about this ~ that I remember one evening at Sheringham when we were all sitting around while Chris Stagles took that delayed photographic shot. I looked around, as one does, to assure myself that everyone we had brought together was enjoying the experience, and I felt absolutely certain, from the laughter I saw on Jean's face, that this must surely have been one of the happiest moments of her life. I am convinced that at our Centre we all made a very positive difference to Jean's life.

Jean died on the 16 January 2005



Mid Anglia Centre of the Caravan Club ~

remember Andy and Alan who went Mexican and raised, via their caravan club, a lot of money for us. We have bought two relaxer chairs with it to help make up for the three non health and safety chairs which went to the dump. And I believe there is a third chair on the way from some special friends of ours.



Has he Got a Brother?

That lovely Cambridge Resale man Alan said, “your Centre needs a sugar daddy”. “Yes, please” I said. “But I want one as well” he said. Well, I said, you find one for you and then see if he’s got a brother ~ for us. He said he’d see what he could do. Anyway, he’s already filled half the whisky bottle (*over £54*) which is on the counter in his shop. We keep sending John in to buy things as a sort of repayment. Not that John needs much persuasion to do that ~ suspect it is almost his favourite place to be.



Look ~

everyone gets Christmas presents they aren’t particularly thrilled about (*but all mine were marvellous*) so please pass them on to us if you don’t want them. We have a tombola stall coming up in April and another one maybe in June and another one in November. And we need to raise lots of money for our new Centre.

Ode to Spell Checker ~ from Pat

Eye halve a spelling checker,
It came with my pea sea;
It plainly marks four my revue
Miss steaks eye kin knot sea.

Eye strike a key and type a word
And weight four it two say
Weather eye am wrong oar write
It shows me strait a weigh.

As soon as a mist ache is maid,
It nose bee fore two long;
And eye can put the error rite,
It's rare lea ever wrong.

Eye have run this poem threw it,
I am shore your pleased two no,
It's letter perfect awl the weigh,
My checker tolled me sew.

Anon

Thailand Son

Can't tell you how marvellous it was to receive so many messages by phone and in person about the safety of one of my marvellous sons: Thailand son and his delightful wife. I knew they should be safe and were either in the north of Thailand or on the way to Bangkok at the time of the tsunami. But although I knew he was safe I kept sending messages asking throughout that day and the following two days to make sure he was still alright. In the end he assured me he was as safe as if he were in Histon! But I wanted to cry all over him because he was safe! We also knew that Robin was in Bangkok and should be safe. Margot's daughter had flown from the UK to Bangkok on Christmas Day, on her way to Phuket to sail for a week. But she was safe and hadn't reached Phuket until after the disaster time. Tricia had been in Phuket just two months ago and remembered shopping in the market with her daughter and grand-children ~ a market which had been badly damaged.

What's more, the elephant called Ning Nong, who had brought a young girl to safety actually kissed Tricia when she was in Phuket. See, let her out of your sight and look what happens.



One of
*Tricia's granddaughters being kissed
by Ning Nong*

And
the day the Centre re-opened,
Annie arrived, got out of her wheelchair at the main door in preparation for a successful attempt to walk along the corridor into the main room, spotted me in the distance, and her first words were "how is your son, is he safe" (*with no search for the right words, they just came*) ~ and that summed up and verified how marvellous this Centre is, and the people who come to it, are. All caring about other people when they have got lots to care about for themselves.

Much love
Ann x x x