

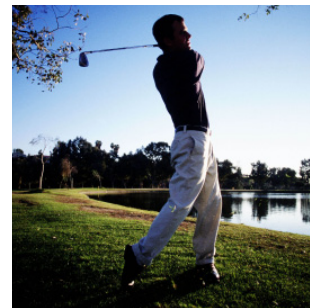
WINTER 2009
NEWSLETTER



AStretch

ANKYLOSING SPONDYLITIS AUSTRALIA

www.asaustralia.org



AStretch: Changing of the Guard

Annie McPherson

You may have been wondering lately what has happened with our AS Australia AStretch newsletter for the Ankylosing Spondylitis groups of Australia. Well, we had certainly not forgotten about it, in fact lots have been happening here.

Our wonderfully talented editor Greg Tate, who has been editing and producing our newsletter for over 10 years, has had a change in circumstances and he has found less time can be devoted to our newsletter. In addition Greg and Lee have moved out to the "countryside" town of Berwick from their city location. Consequently, Greg identified to us an opportunity to have a "changing of the guard" for the custodian of our newsletter.

Our committees and associates would like to sincerely thank Greg for all his effort, expertise and innumerable hours of dedicated work. He has contributed immensely to the education of people in the Ankylosing Spondylitis groups of Australia.

Greg has been a critical part of the development of the Australian support groups in Queensland and Victoria as well as the newsletter development. His smiling face at our meetings will be greatly missed, however we are fortunate to still have access to his brilliant ideas and participation in our Victorian group. We will have a profile on Greg and his illustrious AS involvement and career in a future edition of AStretch.

We now have a huge challenge, and our AS committees in Victoria and Queensland are working as a team to produce our AStretch Winter 2009 edition as a trial run.

We are working on a new format for the newsletter, but we will maintain our articles from the international AS associations and research communities, along with articles from our Australian representatives, Dr. Lionel Schachna and Margaret Lewington. We will also include our news and events reports from the Australian states.

We would like you to welcome a new member to the AS Group of Victoria committee, volunteer Danielle Pullin. Danielle will be taking over Greg's role of handling all the desk-top publishing, collation of the material and production of the newsletter. Danielle has a background in Information Technology and has worked in desktop publishing and web-site production areas. Rosemary Stephens (AS Victoria's treasurer), the AS Queensland committee and myself will assist with the articles, editing and distribution of the newsletter.

As always, we value your feedback, so forward any requests or suggestions on AS issues you would like to see included in AStretch future editions. Please keep in touch and let us know how we're going, we appreciate your patience and your contact. Please contact me directly if you have any queries, on mobile 0408 343 104 or email aniasvic@bigpond.net.au

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The information contained in this Newsletter should not take the place of advice and guidance from your own health-care providers.

Be sure to check with your doctor about changes in your treatment plan.

Allied Health Professionals Day Report

From Margaret Lewington

I was pleased to be invited by Arthritis Queensland to have a display stand featuring the AS group at the annual Allied Health Professionals Day in May this year. This conference is always well attended by all professionals working in rheumatology and related areas. This includes nurses, physio's, OT's, educators and others, numbering about 100 delegates.

It was a wonderful opportunity to raise the AS profile and awareness. The stand was very popular with a lot of enquiries and discussions. One nurse had a son diagnosed the previous week and was thrilled to have information readily available.

We had pens and pads with our contact details on for people to take, along with copies of our news-



letter, guidebooks, flyers for the pool exercise class and other educational literature. These were taken with interest. The bowl of lollies also helped attract some interest, but people didn't get away without knowing it was the AS stand.

As well as the stand, our logo was on the slide screen before and after

each presentation along with the other sponsors. I had quite a few people coming to me who knew nothing of AS and I was able to raise their knowledge and awareness. It was a great day and very worthwhile, and I thank Arthritis Queensland for the opportunity and support.



Evidence of therapy forms in treating ankylosing spondylitis

By Prof. Dr. Edward Senn, specialist in physical therapy, Lucerne (Switzerland) and Munich (Germany), and Prof. Dr. Uwe Lange, Kerckhoff-Klinik Bad Nauheim, Germany

Reproduced, with approval, from ASIF News No 8 (Fall 2008)

We agree that medical therapy should concentrate on therapeutic options the usefulness (efficacy and relative innocuousness) of which is evident.

In this connection one has to distinguish between:

- Therapeutic options the usefulness of which is logically obvious and thereby so evident that the evidence can almost not be increased by any studies (examples are disease specific patient education, disease-specific postural training, physiotherapy appropriate to the stage of the disease);
- Therapeutic options the usefulness of which is evident by experience over many decades, the evidence of which can, however, be further increased by controlled studies (examples are radon therapy and other spa interventions);
- Therapeutic options the usefulness of which can only be made evident by randomized studies

(examples are all kinds of drug therapies).

"We asked Prof. Dr. Edward SENN and Prof. Dr. Uwe LANGE how "evident" the usefulness of patient education, of disease-specific advice on patient behavior, and of physiotherapy options really is for patients with ankylosing spondylitis"

This means that the need for randomized studies as proof of usefulness must not be generalized, as if evidence could generally only be based on randomized studies.

The ASAS/EULAR recommendations for the management of ankylosing spondylitis (ASIF News No. 3 p. 7 and No. 7 pp. 5–6) are focussed on drug therapy because only these are regarded as "based on evidence" due to large randomised double-blinded studies. In some countries funding for patient educa-

tion is refused by the health system using the argument that they are not "evidence-based". We asked Prof. Dr. Edward SENN, until 1996 the chair of Physical Medicine at the University of Munich, Germany, then medical head of Rehaklinik Bellikon, Switzerland, and Prof. Dr. Uwe LANGE, Department of Rheumatology, Clinical Immunology, Physical Medicine and Osteology, Kerckhoff-Klinik Bad in Nauheim, Germany, how "evident" the usefulness of patient education, of disease-specific advice on patient behavior, and of physiotherapy options really is for patients with ankylosing spondylitis.

The following recommendations which should be carried out regularly, do not need statistical substantiations expressed in success rates by (in many cases impossible and ethically impermissible) double-blinded studies, because their usefulness is evident already without such studies.

1 When patients are first given the diagnosis of ankylosing spondylitis (AS), extensive advice should be given on practicing good posture at all times. Patients with AS should be taught about dynamic, resting, and occupational postures. Later in the course of the disease, disease specific patient education should be repeated from time to time.

Substantiation: Only when they

have such advice and education, can patients adapt their behavior, habits and their living and working environment in a way which will favorably influence the disease outcome.

2 Patients with AS should sleep on a level firm bed with a pillow just thick enough to allow a horizontal position for the face. They should make a habit of sleeping on their back. A saggy mattress or waterbed and a pillow which reaches under the shoulders should be avoided.

continued page 4

Substantiation: Hip joints and back can thus be prevented from becoming bent, and the tendency for curvature can be decreased. A small pillow may be necessary to prevent pain from overextension of the neck.

3 Good posture should also be maintained while sitting. Sitting for prolonged periods in low soft sofas or in chairs where the seat tilts backwards should be avoided.

Substantiation: While sitting on a soft surface which inclines backwards, the pelvis and sacrum tend to tilt backwards (humpback) leading to back pain when the patient tries to stand up again.

4 The work place should allow patients to alternate between sitting, standing and walking. Physical activity with prolonged strain on back and neck muscles and prolonged stooping and bending should be avoided.

Substantiation: Prolonged periods in an unfavourable posture tires the muscles primarily responsible for an upright posture and shortens their antagonists.

5 Sports (choose an activity you enjoy), endurance activities (strengthening fitness) in a deliberately upright posture should be performed regularly (4–5 times a week or even, better daily).

Substantiation: Each training session leads to a positive adaptation of structure: for muscles adaptation of their length, force, endurance, coordination and flexibility; for

connective tissue structures (ligaments, capsules, tendons, cartilage) adaptation of their strength, loading capacity and freedom from pain.

6 Exercises to fight the humpback and the limitation of hip extension should be performed daily, for instance repeated lifting of the upper trunk and the angled elbows from a prone position.

Substantiation: Such exercises train the back muscles which straighten the back. The exercises also help mobilize the thoracic spine and simultaneously train the patient's own perception of how to correct poor posture.

7 Respiratory capacity should be maintained by regular sports activities and by daily rotation training in the lying stretch position according to Schaarschuch-Haase, for instance on a stability ball or on a rolled up blanket, preferably in combination with deep breathing.

Substantiation: Rotation in the lying stretch position effects mechanically (as a reflex) a widening of the thorax and thereby of lung sections. Stretching, activation and training of muscles is the precondition for maintaining the mobility of the costovertebral and costosternal joints.

8 Annual rehabilitation stays should be made possible for patients with AS, with the full range of physical therapy (primarily physiotherapy). Also stimulating balneotherapy (moor baths, radon baths, radon gallery therapy, sulphur

springs, thermal baths) are indicated if inflammation activity is not too high.

Substantiation: Pain due to inflammatory processes leads to muscle overloading, shortening of muscles and ligaments and limitation of the functions of spine and joints. Balneotherapy acts to help with pain control, and to some extent is also anti-inflammatory. Intensive exercise therapy and other elements of a complex rehabilitation program make it easier for patients to keep their muscles strong and flexible.

9 Exercise and training activities which have to be performed autonomously by the patient, should be repeated regularly.

Substantiation: Regular motivation and corrections are essential.

10 Local painful inflammation processes (sacroiliac joints, entheses) should be eased by means of heat (however this is contraindicated in states of acute inflammation) or cold (repeated cold compresses, cold room).

Substantiation: Since cold diminishes the sensation of pain, intensive exercise is easier afterwards. Heat increases the blood circulation and thereby eases muscular tensions.

Addresses of the authors:

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Kerckhoff-Klinik, Benekestr. 2-8, D-61231 Bad Nauheim

Hydrotherapy in Brisbane

Supervised by Margaret Lewington

(B.Phty. Cert Hydro. M.A.P.A.)

WHEN: Tuesday Nights

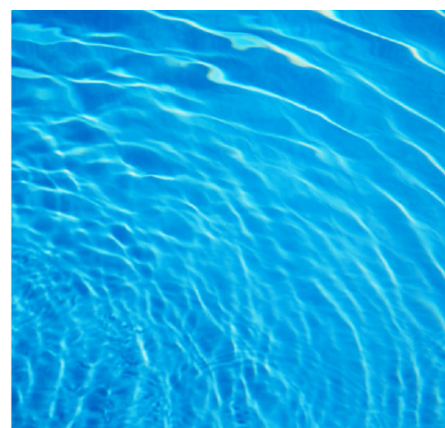
TIME: 6.30 – 7.30 pm

WHERE: Hydrotherapy Pool,
lvl 2, Ned Hanlon Building,
Royal Brisbane & Women's
Hospital, Butterfield St
Herston.

COST: \$10 or 10 classes for \$90

ENQUIRIES:

Margaret 0404 414 501
or 07 3376 6889





Austin Spondylitis Clinic/ Ankylosing Spondylitis Group of Victoria

Seminar Tuesday 5 May 2009 – Melbourne – Park Hyatt Hotel

Report from Annie McPherson

Our Ankylosing Spondylitis information night and seminar was conducted as a joint arrangement between the Austin Spondylitis Clinic of Heidelberg (ASC) and the Ankylosing Spondylitis Group of Victoria (AS Vic). It was wonderful to see over 60 participants attend the evening. Five speakers with expertise in AS, gave very interesting and relevant presentations which were both educational and beneficial.

I began the presentations with a brief description of the AS Vic support team and our objectives, activities and up-coming events.

Helen McLauchlan presented next with an overview of the services and activities provided by our umbrella group Arthritis Victoria (AV). These services include a telephone information service and library. The activities AV provide include Better Health Self Management courses, Water exercise programs (WAVES), Tai Chi programs and various metropolitan and regional seminars. Helen is the Education and Training Manager and our contact at AV, assisting with directing queries to the

correct people and administration issues.

Dr Lionel Schachna, Austin Spondylitis Clinic Director known to the majority of our readers, gave an update on AS research programs both locally and internationally. Some of these studies and papers are available from Belinda at ASC. Dr. Schachna then requested topics of interest from the audience and held a question and answer session. This proved a very interactive session covering areas such as diet; diagnosis, TNF's -the PBS qualification criteria, treatments and their side effects, questions on family history.

We were very fortunate to have Margaret Lewington, physiotherapist and leader of AS Group of Queensland's (AS QLD) water exercise program. Margaret was trained in Australia and the UK on specific AS treatments and water exercise programs and has been practicing for over 20 years. She is a regular contributor to this newsletter and was integral to the development of the land and water exercise DVD's for AS produced by AS QLD.

As with all our speakers, Margaret is a passionate believer in managing your condition as much as you possibly can. Her presentation emphasised the benefits of being proactive in managing your AS and taking charge of your treatment and care. In the segment on how you can incorporate exercise in your daily routines, she explained her "Get Active" principal and the benefits of exercise every day, specifically for AS.

Very positive feedback was received from several AS Vic members who are practicing health professionals and who are interested in further educational sessions with Margaret on AS specific exercises.

Our final speaker for the evening was Clinical Psychologist Dr Georgie Bancroft, who has also been involved with our group at previous seminars and at AV seminars. Dr Bancroft has been involved in research and study programs in the United Kingdom focusing on the psychological impact of living with a chronic condition. As always, her presentation was very thought provoking and relevant for our busy lives of trying to juggle family, work and health issues.

The audience were provided with a number of interesting documents including copies of research papers and studies Dr Schachna and Belinda have contributed to; Arthritis Victoria services, programs, courses and products; Past AS Astretch newsletters; Past AS International Federation newsletters.

We wish to acknowledge the following sponsors of our seminar, whose contributions enabled us to arrange a suitable central Melbourne location, accessible by public transport and with adequate parking, and made available refreshments and printed handouts: Pharmaceutical companies: Abbott and Schering Plough; Austin Spondylitis Clinic and our group, Ankylosing Spondylitis Group of Victoria. Our committee and members would also like to thank Belinda Martin (ASC) who worked tirelessly at arranging this successful seminar. During the evening, Belinda's informative introductions ensured the audience were kept abreast of the excellent credentials of our speakers.



Professor Geoff McColl delivered the inaugural Koadlow Lecture

Koadlow Lecture Report

From Annie McPherson

In April I was invited, by Natalie Savin Chief Executive Officer, to attend the inaugural Koadlow Lecture hosted by the The Trustees of The Dr. Leslie Koadlow Trust Fund and the Board of Arthritis Victoria, held at Arthritis Victoria in Elsternwick. During the 1960's Dr. Leslie Koadlow, a Melbourne based rheumatologist, recognised that many of his patients were sharing their experiences and strategies for living with arthritis in positive and practical ways.

Dr. Koadlow's vision was for a community-based organisation to provide access to good quality information at both simple and complex levels, academic support – and above all, an organisation that would facilitate communication between people with musculoskeletal conditions through self-help groups. These principles of self-help and the provision of evidence-based information were central to the development of Arthritis Victoria and remain at the core of our philosophy today. [This philosophy is also the basis of our AS Group of Victoria objectives for ensuring people are kept well informed of AS issues].

The speaker delivering this inaugural lecture was Professor Geoff McColl

MBBS BMedSc PhD FRACP, who is currently the Director of the Medical Education Unit at the Melbourne Medical School and Professor of Medical Education and Training at the University of Melbourne. He is the current President of the Australian Rheumatology Association and a member of the Pharmaceutical Benefits Advisory Committee.

[I was most interested to attend this lecture, as Prof. McColl had been a very strong supporter of patient education and a speaker at the bi-annual Ankylosing Spondylitis Education Program conducted at Royal Melbourne Hospital, Royal Park Campus up until 2006. I had attended a number of these education program as a self-help group representative and Prof. McColl's session were always jam-packed with a myriad of interactive questions and responses.]

On this occasion, Prof. McColl's lecture was focused on the patient/doctor relationship and entitled "Good Doctor – Good Patient: A search for Perfection".

Prof. McColl started by acknowledging the guidance of Dr. Leslie Koadlow and his considerable contribution to patient education, communication and welfare in the community.

Prof. McColl then proceeded to expose his ideal of "A Search for Perfection" where the combination of patient and doctor equate to the best possible outcome.

On the doctor side of the equation suggestions were put forward that not all patients are the same and doctors need to adapt to appreciate "one size does not fit all"; each patient should be have their history reviewed and be considered independently for their needs and capabilities; half of the role of a medical professional is to be able to communicate effectively with their patient; patients depend on the doctor to guide them through the myriad complex health and medical systems and processes; Patients need diagnosis, feedback and examination or test results interpreted to help with decisions.

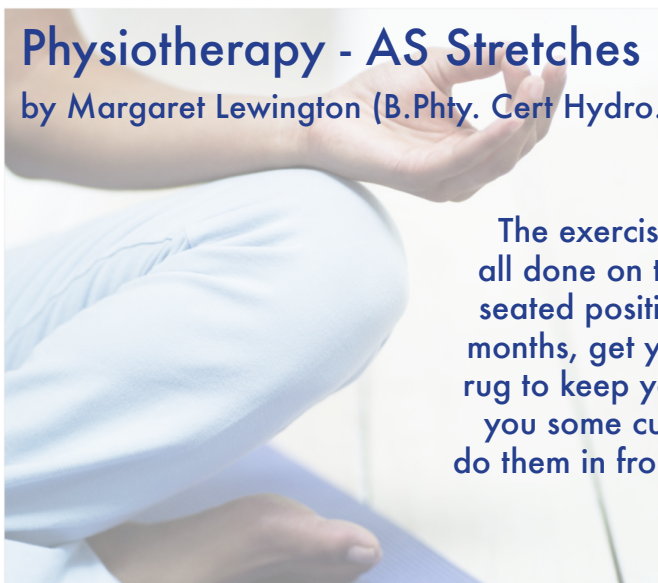
On the patient side of the equation very similar qualities were highlighted: It is imperative patients have a good relationship with their medical professionals to guide and advise them through these health systems; Not all doctors have the same skills sets and attributes and this needs to be recognised by patients; Doctors have huge work-loads and it is important that patients are prepared with appropriate paperwork or questions to maximise their time together; Mutual trust, respect and reasonable expectations are important qualities in this relationship;

Both patients and doctors can benefit from contact and interaction with community organisations such as Arthritis Victoria. These organisations can provide a service as a clearinghouse where the enormous wealth of information available is filtered and sorted for easy access. The educational aspect of these organisations can assist in training members of the community to self-manage and navigate the health systems. The management aspect also applies to the associated self-help group network who have direct contact with the patients. Arthritis Victoria's role in supporting advocacy groups and their interaction with government agencies and authorities is a vital link in this information flow.

A DVD of this lecture was made, and can be borrowed from the library by members of Arthritis Victoria by calling Lisa Bywaters on 03 8531 8031, or email lisa.bywaters@arthritisvic.org.au

Physiotherapy - AS Stretches

by Margaret Lewington (B.Phty. Cert Hydro.M.A.P.A)



The exercises in this issue are all done on the floor in a semi-seated position. For the cooler months, get yourself a mat or a rug to keep you warm and give you some cushioning. You can do them in front of the heater or TV if you wish.

No excuses!

Sit with your legs in front, knees bent to the most comfortable position.

1 Put your hands on your knees. Relax your body, slump the trunk, let your pelvis rock back to round your low back. Also, drop your chest, round your upper back, look down and let your head go down. Try to lengthen and stretch the whole back of the body.

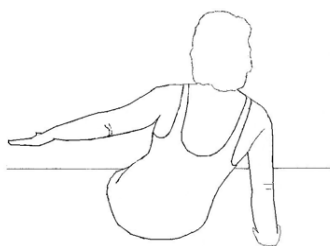


Now sit up tall, arch/hollow your low back, lift your chest, looking forward and up a little, keeping your head in alignment with your body. Feel the front of your body lengthen and stretch. Keep your hands on your knees, maybe even pulling gently forwards to help you move your chest forwards towards them.



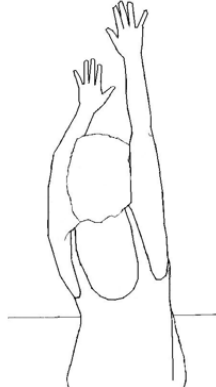
You may like to breathe out as you curl and in as you sit tall and open your body and chest.

2 Put your hands on the floor beside you. Rock your weight to



one side. Lift your other buttock up off the floor. Lean your upper body towards the side you have lifted off the floor as this will give you extra stretch in the side of your trunk, from the hip to the underarm, of the side you have on the floor.

3 Take both arms above your head. Sit as tall and straight as you can. Bring your arms back as far as you can, near the sides of your head, close to your ears. Now stretch one arm upwards a little further, stretching and lengthening through your side. Relax a little and stretch the other arm as high as you can.

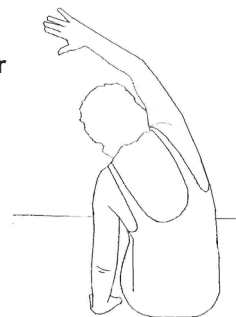


4 Sitting tall, turn to one side as much as you can. Look around, turn your body, reach with both your arms. Keep your chest tall, don't allow yourself to bend forwards, looking down. Look over your shoulder. Come back to the centre and turn to the other side. You may like to repeat a few to one side before changing, to try to get a little further each time. You can push



on the outside of your knee to help you turn further. Remember to relax, do not tense your body, breathe easily. You may wish to breathe in when in the centre and breathe out as you turn.

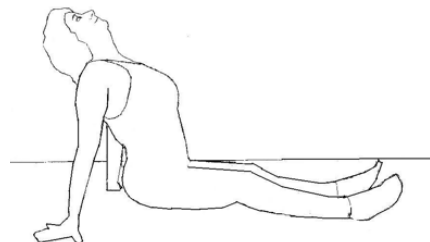
5 Sit tall, lift one arm up and take it over your head to the other side. Lean on your other arm on the floor for support. Keep your chest tall. Stretch and reach as much as you can. Lengthen your arm to your finger tips. Don't curl it around your head and don't roll or twist forwards. Keep your buttocks on the floor.



6 Straighten your legs a little. They may be straight or have a little bend in them. Reach and lean forwards towards your feet. Stretch your fingers towards your toes. Pause and stretch and lean into it. Feel some stretch in the backs of your legs, your low and upper back and in the backs of your shoulders and upper arms.



Now sit tall, place your hands on the floor behind you, lift your chest and look up, arching your back. Combine your breathing with the movement again.





Bike ride by the bay at Aquatic Paradise

Queensland Report

From Ross Wilson



Hi Everyone,

Welcome to the Queensland news. It's been a while since the last newsletter but everything is getting on track and I would like to take this opportunity to thank Greg Tate for his dedication and hard work in producing the AStretch newsletter for so many years. He has done a fantastic job and we wish him well in his new endeavours.

The water exercise DVD is well on the way to being translated into German and I can't wait to see how it turns out.

There has been several social events held with some good attendance figures. The bike ride/walk was rescheduled after being rained out and was a great day by the Bay at Aquatic Paradise. Five riders tackled a 20 km ride along the Bay to Wynnum with a quick stop at the Manly Hotel just to make sure we didn't dehydrate on the way back! The non-riders enjoyed a leisurely walk and then everyone sat down to a great BBQ lunch and a relaxing afternoon. Margaret, the groups

consultant physio, hadn't ridden for many years and reckons she was in desperate need of a physio when she got back to the park!

On the subject Marg, she has been off to Melbourne visiting at the invitation of the Victorian Group. We in Queensland are very spoilt to have Marg and it is great that she is able to share her knowledge with those in other states.

We have had several after class suppers at The Earth and Sea Pizzeria and the food and company are always great.

Our biggest event by far was the presentation dinner at the Genghis Kahn in which a group of 40 gathered to honour our first life members; Margaret Lewington and John Ebert. Both have been here from the start and without them there would not have been a group. It was a

great night with many weird and wonderful mixtures of ingredients cooked up on the giant BBQ.

The Canadian Spondylitis Groups have recently joined together to form the Canadian Spondylitis Association which is a great step forward. It would be great to think we here in Australia could get all the states involved in a national association. It could only improve the support the groups could offer.



Margaret Lewington and John Ebert honoured as life members of the Queensland Ankylosing Spondylitis Group

There are several events pencilled in for the remainder of the year so please come along and enjoy.

Ross Wilson

AS Group of QLD



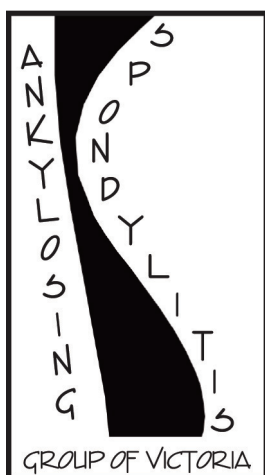
Dinner at The Earth and Sea Pizzeria



Doctor Samantha Thomas presents at the 41st AGM of the Arthritis Foundation of Vic

Victoria Report

From Annie McPherson



I attended a planning meeting with Arthritis Victoria with the volunteers of these two groups. Arthritis Victoria is supporting both groups and has assisted in setting up web sites links and email contacts (see

below). These groups primarily run as email and telephone support group networks.

The Young Adults Group are based in metropolitan Melbourne and predominantly offer social support to younger adults with a musculoskeletal condition. At the end of the year, November, they will most likely hold another one-day joint seminar at Arthritis Victoria. Email address: youngadultsarthritisgroup@gmail.com

We now have a supply of the Young Womens' Arthritis Support Group brochure /information sheet, they meet on a monthly basis for social and exercise activities and they have an active email network, website blog

and interactive discussion forum. Web address: www.ywasg.com

The Consumer Advisory Committee met in early March with good attendance by representative of active support groups. The primary topics discussed included:

- Training for consumers who wish to become consumer representatives for Arth.Vic. on community and government committees and working parties.
- Rheumatology Nurse education and training. Arth. Vic has developed an on-line course document, which was presented at the Rheumatology Association Annual Symposium on Rheumatology in Sydney in March.
- A review is being conducted of the suppliers contracts for the service of hydrotherapy pools utilised in the WAVES program with the aim to ensure quality and consistency of service
- Consumer Health forum update (a national government forum)
- New draft information sheet on Accessing the Internet
- General Practitioners: A lengthy discussion was held on the difficulties various group's members experience when attending a GP's appointment. Some of the many examples given were: GP's not completing forms; GP's not providing referrals; GP's not informing patients of community

services; GP's not providing results of tests.

[The AS Group of Victoria are planning a survey on our members and their GP's services etc - so look for it in future editions of Astretch.]

Lauren Baker held a Community Speakers update program in March, covering a range of training tools and condition specific presentations.

- About Arthritis Victoria, services and training programs
- Falls Prevention documentation draft information sheets
- Presentation preparation, guidelines and training
- Skills workshop on Learning styles
- Condition review: Fibromyalgia Syndrome
- Self Help Group – Victoria group contact details.

In April, Natalie Savin, CEO Arthritis Victoria, invited all members of the organisation and specifically members of our AS Group of Victoria to the 41st Annual General Meeting of the Arthritis Foundation of Victoria Inc. One of our committee volunteer's, Ellen Makridis and I attended on behalf of our group. There were several addresses by members of the Board and staff along with the usual AGM proceedings. There were two main items of interest on the agenda for our group:

The first was the address by the guest speaker, Dr Samantha Thomas, PhD MPHAA, focusing on "Being Connected – how it leads to better health". Dr Thomas' background is in sociology and methodology. She has worked at addressing social problems and health inequalities at the grass roots and policy levels both locally and internationally. Dr Thomas spoke of recent research showing a decline in the communities' spirit and that the more isolated people are, the worse the health situation becomes. Consequently, there is a need to shift the emphasis to better communication, promote self-management and improve self efficacy. Anti-stigma campaigns and self-management programs have shown amazing results and very positive findings

The second item was the presentation of Arthritis Victoria special service and contribution to the community awards. Much to my amazement, I was successfully nominated by the staff of Arthritis Victoria, for the Margaret Strang Award for 2008. This award is presented annually to a person who has made an outstanding personal achievement in the face of difficulty resulting from arthritis. The award was established in memory of the late Margaret Strang, wife of rheumatologist Dr Roderick Strang. At the AGM, Ms Elaine Bee and Ms Heather Rose RN presented me with a framed award and citation. These ladies are members of the Board of Arthritis Victoria and have been a

great support and inspiration to me. The citation I received summarised the community service work with our AS Group of Victoria, the Consumer Advisory Committee and the Community Speakers Volunteer Program. During a very brief acceptance speech, I acknowledged the invaluable assistance of Greg Tate, our committee members and Dr Lionel Schachna in establishing and maintaining our support group.

During May we held an Educational seminar reported on page 5.

Our AGM was held in June and resulted in some changes in our committee. We had Greg Tate, Maria Makris, Vincent O'Grady stand down as Editor, Secretary and

Events Coordinator respectively. Voted in were President – Annie McPherson, Secretary – Belinda Martin, Treasurer – Rosemary Stephens, Editor – Danielle Pullin and the role of Events Coordinator currently stands vacant. We thank our past members for all of their hard work and look forward to working with our new members.

Over the past few months we have two very kind donations. One from Rio Tinto directly to the AS Group of Victoria and one from Butcher Machinery Sales and Service to Arthritis Victoria to be used for the AS Group of Victoria. We are most grateful for these donations that contribute to providing services to our group.

AS Group of Western Australia Information

The WA group holds two sessions of land exercises and hydrotherapy each Monday at the Shenton Park Hospital. While one group of participants starts with hydrotherapy, another commences with land exercises and after an hour they swap. It is an excellent way to achieve a balance between land and water exercises.



Western Australia Hydrotherapy (Perth)

WHERE: Royal Perth Rehabilitation Hospital
Shenton Park Annex Selby St Shenton Park

WHEN Every Monday evening
(Public Holidays excepted)

COST \$6.00

TIMES:

Hydrotherapy Pool
5.30pm Hydrotherapy exercises

Gymnasium
5.45pm - Land Exercises

Note: All sessions are conducted by experienced Physiotherapists. Total Session time is two hours with groups changing over at the end of the first hour.



Calendar of Events Sept & Oct 2009

Victoria

20 Sept	TBA	AS Exercise Workshop 10:30 - 12:00 *Alexander Technique Demo & workshop - including 10 mins refresh/stretch break- Duncan Leggeo 12:30 - 1:30 Nordic Pole Walking in park - Lauren Baker
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16 October	Rose Hotel, Fitzroy	Social Dinner
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Queensland

30th August	TBA	Bike Ride/Walk
18th October	TBA	Barefoot Bowls
28th November	TBA	Christmas Dinner