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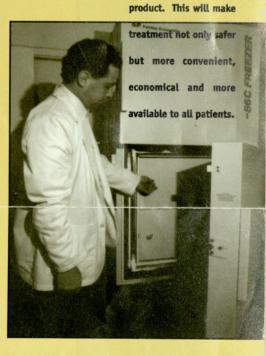
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Dear Patients and Friends:

I would like to thank each of you personally for your contribution to our new plasma program. With your generous donations we have purchased the freezer that will store the plasma product. This will make treatment not only safer but more convenient, economical and more available to all patients.

As you can see from the picture, the size of the freezer is quite large. The temperature inside is -86 degrees which is necessary to store plasma for several months.

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will store the plasma



The clinic is expanding its services and opening the door to more patients. As we go forward, we must not forget the philosophies of the Swank Program.

We are overjoyed with the support you have shown. We will make every

attempt to continue to provide the "Best" treatment available for all M.S. patients.

Barbara Brewer Dugan, R.N. Director





Betaseron - Avonex - Copaxon

Should you or should you not?

We have had many calls and inquiries regarding the treatment with the A - B - C's. Like many of you, we have done our reading and we have been told Avonex reduces the risk of significant progression of physical disability compared with placebo by 37%. At the completion of the two (2) year study, participants have 32% fewer relapses. We also learned Copaxone was shown to reduce the MS relapse rate by 29% compared with placebo.

Now, Betaseron reportedly reduces exacerbation rate by 30%. However, after 18 months of treatment 38% of the participants in the study developed neutralizing antibodies against the drug.

For the newly diagnosed patient, or the patient continuing to experience problems, these drugs sound hopeful. For the neurologist who wants to help his patient, it's worth a try.

What we can tell you about the drugs are only facts as relayed to us in our clinic by patients who have had first hand experience:

- (1) We have seen several patients following 6 months 1 year of treatment continue to get worse and eventually stop the drug;
- (2) We have seen some patients have few side effects and tolerate the drug well;
- (3) We have seen patients experience severe pain which does not pass after stopping the drug;
- (4) We find early cases tolerate the drugs better than more advanced cases;
- (5) We have seen mild to severe side effects.

No one knows for sure the safeness and effectiveness of these drugs. The decision must only be made individually and with the help of your physician.

A recent article published in he <u>British Medical Journal</u> 1998:316:1407 gives the following overview of the effects of Betaseron:

Interferon beta produces only small benefits in M.S. Treatment of relapsing remitting MS with interferon beta produces only a small improvement in overall quality of life at considerable cost to the health service.

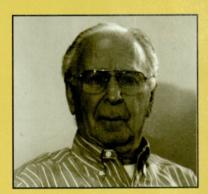
We will continue to keep you informed as more information is compiled.

DID YOU KNOW LOW FAT DIET DECREASES RATE OF EXACERBATION BY 37% DURING THE FIRST YEAR AND HALTS THE PROGRESSION IN EARLY CASES BY 3 YEARS AND HAS NO NEGATIVE SIDE EFFECTS.

Welcome

The staff is changing alo with the clinic. We must say good-bye to Charlotte Hyatt, R.N., and welcome Dorene Kemp, R.N. Dorene will work part-time as the infusion nurse. She has had extensive experience working as an I.V. Therapist including administration of all blood and blood products. She is a skilled valuable addition to our staff.

Also, welcome Linda Leeche. Linda will be working closely with Barbara on diet instruction and patient care. Linda joins the staff with a degree in health education and has worked as a teacher as well as a professional health care team member. Her qualifications are a true asset to to growth of the Swank Foundation.



HE'S BACK

Dr. Swank is back - As most of you know, Dr. Swank officially retired in December due to illness. We are very happy he has made a marvelous recovery and is back in the office on a part-time basis. He is presently completing a research paper on the effects of microembolism soon to be published. He is actively involved writing the new "Multiple Sclero. Diet Book" with Barbara - Watch for it's release.

Dr. Swank Says: "My work is not finished."

JEKYLL AND HYDE

SPOUSES:

The Swank Clinic tries very hard to not only educate the patient regarding management of MS but we also spend a great deal of time educating the spouse. This segment of the newsletter is directed to the friend or significant other living with or in close contact with the patient.

Although patients tend to be very gregarious, sensitive, fun-loving people, there are times when the table flips and you feel you should run for cover. You chalk it up as a bad day and quickly forgive. As this begins to happen more frequently, you begin to be less sympathetic and understanding and both you and the patient become frustrated.

It has been said that the divorce rate among the MS population is as high as 50%. Why? This generally is not due to disability but due to the lack of understanding of the personality changes that accompany the illness.

FATIGUE FATIGUE FATIGUE FATIGUE

The following schematic will illustrate the changes the MS patient endures and the end result felt by the one closest to them:

"I just have a little more to do." "I've got to get it all done today." "There is no one else that can do it."

"Yes, I can volunteer to do that. Where, When, What time?"

"I feel so good I'll skip my rest break. Maybe I should do a little exercise today I'm feeling so well."

BUSY BUSY BUSY BUSY BUSY BUSY BUSY

"Hi honey, I'm home. Did you have a bad day? Can't you tell, I'm so tired. There just isn't enough time and energy to go around. I can't keep up. You don't understand what I'm going through. I'm trying - I think you over did today dear you are just tired. "I'm not tired - leave me alone - I can keep up with the best of them."

SOLUTION: REST REST REST REST REST

"Good morning honey what would you like for breakfast."

Most patients reading the newsletter, if they are completely honest with themselves, have experienced this series of events.

As a friend or significant other, it is important to communicate before it happens. Watch for the warning signs:

- (1) Pallor the color of the skin will change to a grey.
- (2) Patient will become weepy and irritable.
- (3) Patient will lose interest in activities.
- (4) Patient will become reclusive

It is wise not to wait for the warning signs and rest daily. All patients should be resting a minimum of 1/2 hour daily. This should increase during times of fatigue and activity of the disease. Rest breaks rejuvenate the nervous systems and increase stamina. Without rest, most all patients develop exacerbation of disease. Diet alone is a highly effective tool in arresting MS but diet and rest is even more powerful.

REMEMBER - Look for the warning signs. Listen for the personality changes. Feel for any new symptoms.

LOOK LISTEN AND FEEL.



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"Yes, I can volunteer to do that. Where, When, What time?"



"I feel so good I'll skip my rest break. Maybe I should do a little exercise today I'm feeling so well"



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SOLUTION:



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The Swank M.S. Foundation 13655 SW Jenkins Road Beaverton, OR 97005 Non-Profit Organization U.S. Postage PAID Portland, OR Permit No. 542

hat's To Eat?

VINAIGRETTE FOR STEAMED VEGETABLES

1/2 cup chicken stock

2 Tbl. lemon juice

2 tsp. dijon style mustard

2 tsp. olive oil

2 tsp sugar

1 tsp. dried tarragon leaves

1 Tbl. water

1 tsp cornstarch

6 oz. each, cut into pieces 1/2 inch thick, 3 inches long:

cauliflower

broccoli

carrots

In a small sauce pan over medium-high heat combine stock, juice, mustard, oil, sugar and tarragon.

Bring to boil, stirring constantly. Whisk together water and cornstarch. Add to saucepan. Cook and stir until vinaigrette is slightly thickened, about 1 minute. Set aside; keep warm.

Bring water to boil in bottom of steamer; put vegetables in steamer basket, cover and cook about 10 minutes until crisp-tender. Serve vegetables in piles of each kind. Drizzle with warm vinaigrette. Makes 4 side dish servings.

This is the original recipe, but Orb tweaks this to her liking. She doubles the recipe, as she likes a lot of sauce on the vegetables. She also puts everything in the pan instead of the way they do it. Quicker and easier, but be sure to dissolve the cornstarch. This is good on steamed cabbage, green beans, you name it!!!

SWEET AND SOUR HOT DRESSING

1/4 cup of sugar 1/4 cup olive oil 1/4 cup of red wine or regular vinegar Salt and pepper to taste Heat to dissolve sugar

Cool slightly and poor over firm lettuce greens with green onions and oranges topped with croutons.

This can be used for cabbage slaw. Add 1/2 teaspoon of celery seed. She adds shredded carrots, chopped green pepper and peanuts to the cabbage. Makes it more interesting. Double this if salad is larger or you like stronger and more dressing.