

Spring 2008

Volume 17 Issue 1

## **Professor Peter Ellaway joins the INSPIRE Scientific Committee**



*Professor Peter Ellaway of Imperial  
College London*

Following the retirement of Professor Jonathan Cole last year, Professor Peter Ellaway of Imperial College London has accepted the invitation to become a member of the Scientific Committee. He is the Professor of Division of Neurosciences and Mental Health. His awards include the Commemoration Medal from Charles University, Prague in 1988.

Prof Ellaway comes with a great deal of interest in spinal cord injury as can be seen from his numerous publications on the subject. He is also a member on the International Advisory Committee of the Motor Control Symposia; on the Scientific Committee of the International Spinal Research Trust and on the Advisory Board of the Medical Research Council.

Prof Ellaway is the Principal Investigator in a collaborative project which is looking at establishing reliable techniques to assess changes in clinical neurology, motor, sensory and autonomic function, and structure (imaging) in patients with spinal cord injury. The Clinical Initiative and the Fellowship form collaboration between Sensorimotor and other Departments within Neurosciences at Imperial College and the National Spinal Injuries Centre at Stoke Mandeville Hospital.

I am very aware of how extraordinarily lucky we are to have Prof Ellaway join the Scientific Committee, and on behalf of all the INSPIRE members say welcome and thank you for agreeing to join us.

# What's Happening?

## Reports from Project Leaders

### Cycling Therapy for the Incomplete Spinal Cord Injury

Cost of the Project: £18,791

Location of the Project: University College London

Mr Perkins writes:

A number of possible commercial recumbent cycle ergometers have been investigated, including Roger Black, Life Gear Easy Rider, Powertrek XR-580 and Neoracer. We have made a wheelchair retaining frame arrangement for the Neoracer to allow an SCI person to do Electrically Stimulated (ES) cycle training without having to transfer from their wheelchair. This can be used with a commercial stimulator (BerkelBike) but a shaft encoder has still to be added. The arrangements for fitting have been prepared and the encoder is due for delivery shortly.

To monitor the performance of the ES cycling remotely, without staff having to visit the patient's home every time, we need a method that will be possible for nearly everybody. The combined coverage of BT broadband services and / or 3G is estimated at 93% of England by area and in excess of 99.2% by population. Therefore, out of 20 patients randomly chosen, there will be an 85% chance that all will be covered for remote data logging and the chance that no more than two patients are not covered is apparently 99.9% (Poisson statistics). This is a reasonably high proportion and therefore dual broadband and 3G telemetry seems appropriate.

A new more-sensitive sensor of pedalling cadence and torque, which can be readily calibrated by mechanical methods, is being developed with the aid of a student under our supervision. The product of torque and cadence will provide a measurement of power output which is what we want to monitor.

**Summary.** We have established the feasibility of most of the techniques we require. It remains to unite the individual techniques to create a viable ES cycle monitoring system.

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Central nervous system reorganisation following spinal cord injury its relationship to pain and response to mental imagery

Cost of the Project: £35,265

Location of the Project: Pain Research Institute, Liverpool

Mrs MacIver writes:

Recruitment for this study is proceeding well. In total I have assessed 15 people with spinal cord injury:

Two were unsuitable (pain already well controlled; level of SCI too low).

People with SCI and deafferentation pain: 7 have undergone the baseline scans. A further two were excluded from scanning because of internal metal, but I have included them in the clinical arm of the trial. Four from this group have completed the 6-week course of mental imagery. One has >50% reduction in pain, two >20% and one no change. Three of these people have had their follow up scan.

People with SCI and no deafferentation pain: 3 have been recruited and two scanned. Of the 3, one has no pain and the other two have musculoskeletal shoulder pain. These two have been scanned. One has completed the therapy and undergone the follow up scan. He has a 20% reduction in his shoulder pain. One further person has been successfully assessed and will be scanned in the near future.

Two healthy volunteers have been scanned. We are also able to use some healthy volunteer data from a previous study.

The scanning paradigm is running well with no adverse events. Early, descriptive data of baseline scans show differences in neural response to the tasks between the SCI group and the healthy volunteers, mainly in the primary and secondary motor and somatosensory areas, but also in the thalamus. However we have not yet run the tested group analysis so caution must be exercised.

I am able to continue working on this study until the end of July 2008 so recruitment will continue, as will the therapy and scanning sessions. I am submitting an abstract to the International Association of Pain for their conference in August (you will of course be fully acknowledged). I have also

*(Continued on page 4)*

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been accepted as a part-time PhD student at the University of Liverpool, and will write up this study as a thesis.

Thank you for your support, I hope we can continue to work together.

Optimising power output during electrically stimulated cycling in people with a spinal cord injury

Cost of the Project: £52,025

Location of the Project: Kings College London

Professor Newham writes:

*Stimulation pattern.* We compared 3 currently used stimulation protocols and found that there were no significant differences in the power produced or efficiency. A user specific pattern might affect power to a greater extent. This data was presented at the FES Workshop, Vienna.

*Electrode position.* We plan to carry out 5 MRI scans on one SCI person. Before doing this it is important that we decide on a technique to analyse the data. We are currently waiting for advice on the best way to go about this before carrying out the data collection.

*Strength training.* Four SCI subjects carried out 12 weeks of strength training, which resulted in a significant improvement in strength but only a small increase in power output. A well trained rower was able to produce greater strength than the cyclists but a similar power output. Therefore, power output is limited by factors other than low muscle strength.

*Blood flow.* We used NIRS to measure Hb content of quadriceps during i) voluntary and ES elicited short term contractions of quadriceps (26 AB subjects); ii) voluntary and ES elicited steady state contractions of quadriceps (15 AB subjects) and; iii) FES cycling. We have found that short term ES elicited contractions occlude blood flow to a greater extent than voluntary; blood flow to working muscles is not impaired in SCI people and; ES contractions of quadriceps cause a greater reduction in oxygenation for a given torque indicating that it is less efficient.

*Blood pressure.* Fifteen AB and 3 SCI subjects carried out ES elicited contractions of quadriceps - with and without arm exercise. In AB subjects, arm exercise did not affect the torque produced or fatigue. In SCI subjects, arm

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exercise increased blood pressure as well as Hb content in quadriceps but this did not affect torque or fatigue. Therefore a lack of rise in blood pressure does not appear to limit ES performance in SCI people.

*Muscle composition.* Biopsy samples have been collected from 4 SCI people before and after strength training and from 1 well trained FES rower. These data are in the process of being analysed and we plan to publish these data.

A systematic exploration of Neuromuscular Electrical Stimulation in Spinal Cord Injury: users' perspectives of current and future use

Cost of the Project: £79,776

Location of the Project: Southampton University

Dr Burridge reports:

As I previously reported the focus groups have been held, all the data transcribed and much of it analysed. The remaining work involves interpreting the data, writing the papers and designing the questionnaire.

There have been changes at the SHPRS in the University because of the NHS reduction in training budget and as a result the school has had a substantial reduction in staff. Unfortunately a member of the team has therefore moved to a new post at Brunel University. Although she will remain involved with the project, and we will pay her out of the budget for the work she puts in, it does mean that a greater amount of the work will have to be done by the remaining team member. Consequently it will take us a little longer to complete the project.

Having reviewed the timeplan carefully and realistically we need to request a three month un-funded extension. Is this acceptable? It means that we will have the final report to you at the beginning of July rather than the beginning of April.

Because the project has been so successful we are confident that we will be able to develop an excellent questionnaire which will be done by June.

*A three month extension has been agreed.*

*(Continued on page 6)*

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A Randomised Trial of Rectal Stimulants for Neurogenic Bowel Management after Spinal Cord Injury.

Cost of the Project: £28,439  
Location of the Project: Stoke Mandeville

Dr Coggrave writes:

After many delays and difficulties associated with pharmacy department activities related to the Rectal Stimulant Trial we are finally in a position to begin recruitment to this study at the National Spinal Injuries Centre.

Despite some advertising of the study in the last 2-3 months (in Spinal outpatient department National Spinal Injuries Centre (NSIC), SIA's Forward and E Clips, and INSPIRE's newsletter) response to the project has been muted. I have had 15 inquiries regarding participation. The advertising already undertaken can be repeated and advertising on websites such as St. Mark's and NSIC sites can now begin as we are ready to start.

Regarding the collaborators, Stanmore pharmacy has declined participation due to staffing issues and lack of insurance/indemnity. However, the unit is happy to recruit on our behalf and send participants to the NSIC, if they are willing. This is important as it is hoped that the Aspire unit will provide an opportunity to contact large numbers of possible participants. St. Mark's Hospital also has pharmacy staffing issues but we will be able to advertise through their outpatient department and on their website, and would hope to run the study there in the future. Salisbury, on the other hand repeated their desire to take part.

In the light of the long delay in commencing the study, the loss of collaborators and the low level of interest to date I would ask you to discuss the future of the project. One option is to cease the study. However the research question remains as relevant now as when funding was agreed and is not likely to be addressed elsewhere. The other option is to continue the study but in order to enable recruitment over a longer period I would propose that the time devoted to the study per week is reduced to two days, to stretch out the available funding.

*An extension has been agreed.*

## **New Projects**

### The short term efficacy of sacral nerve stimulation (SNS) in patients with neurological constipation

Cost of the Project: £31,750

Location of the Project: University Hospital of North Durham

This project was first reviewed by both Committees in June 2007 and reported on in the September issue of this Newsletter as was the Board's reaction. They had directed that if the Scientific Committee were satisfied with the re-submission, the project was to be awarded £31,750, half of the original request. The Scientific Committee reviewed the new application and were satisfied. The project was given the award.

### Improving the efficiency of electrically stimulated cycling

Cost of Project. £33,708.

Location of Project. Kings College London.

Synopsis. Functional electrically stimulated (FES) cycling offers people with a spinal cord injury (SCI) the benefits of exercise combined with participation in recreational and functional activities. It has been shown that even with prolonged and intense training the power output (PO) remains too low for functional cycling out of doors. It is not thought that the primary problem is not the muscles themselves but inefficiency in converting energy into power at the crankshaft. One of the major muscle groups stimulated appears also to act to reduce net PO and efficiency. We aim to establish a stimulation pattern that allows SCI people to cycle at a higher cadence, since the current stimulation pattern produces cycling at a cadence well below the optimal for PO.

### Comments by the Committees.

User Committee. This project was supported by the User Committee.

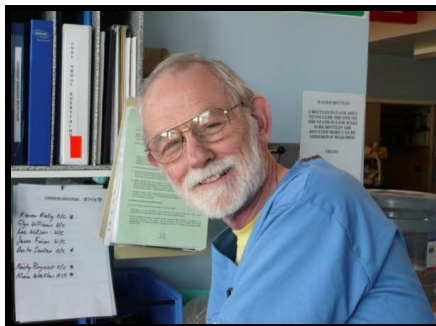
Scientific Committee. Overall the Scientific Committee felt that this was an important project as it was addressing issues which need to be addressed if rehabilitation cycling is to be truly successful.

Recommendation. It is recommended that the Board supports Improving the efficiency of electrically stimulated cycling and makes an award of £33,708.

## John Aves retiring from Salisbury Spinal Unit 18<sup>th</sup> April 2008

When I began working at SSU, in April 1984, Maggie Thatcher was still on the throne and beer was a penny a pint – well, almost. I was able to witness the opening of the Unit by Prince Charles and Princess Diana having stayed on after a night shift. For my first 18 months I worked as a nurse on Tamar Ward, followed by a stint as a therapy assistant before taking on the role of Unit Technician in 1986. Over the years I have had the privilege of dealing with at least 2,000 patients and ex patients in my capacity as technician. In regard to former patients my biggest problem is remembering their names when they call in for their annual check-ups. They only have one name to remember – mine, I have over 2,000 to remember, not an easy matter, especially as one gets older. So I ask forgiveness of all those who I haven't greeted by their first name over the years

I guess one or two of you may want to know what I hope to do when I retire – well, the answer is, "Nothing, absolutely and utterly nothing!" Well, that's not quite true. My wife and I hope to do some travelling through the summer months, then there's the house to paint from top to toe, plus the garden to get into shape. I hope to continue, and perhaps increase my role in Wheels for the World – taking refurbished wheelchairs to people in



*John at his work bench looking very fetching in his scrubs!*

Third World countries. However, as a committed Christian, I will have to see what the "Boss" thinks about all these plans – He may have other ideas! Then there's the family (four children and five grandchildren) to see more of. Well that's about it – I think.

Once upon a time I thought about setting myself up as a wheelchair consultant, to whom people could contact to see what the latest lightweight or powered wheelchairs were on the market. However, with the advent of the Internet most folk can simply log onto Google, punch in "Lightweight or Powered wheelchairs" and have every company and agency in the world at their fingertips. So when I retire on 18<sup>th</sup> April it will be "goodbye wheelchairs", apart, that is, from my work with Wheels for the World. At this stage I'm not sure who

*(Continued on page 9)*



## The Editorial

First of all, to all of you who sent us Christmas cards, thank you very much indeed. It is impossible to answer or respond to everyone but please rest assured that your thoughts were very much appreciated. Thank you.

As you will have read on the previous page, John Aves is retiring, but thankfully not leaving Salisbury. He has been a tremendous friend and colleague and, from an INSPIRE point of view, a great ally. Not only does he lend us wheelchairs

for the wheelchair race on the Charity Polo Day, he also joins the INSPIRE team and shows us non-professional wheelchair pushers just how it should be done without cheating.

Rose and I have just attended a Charity Cocktail Party given by the Worshipful Company of Leathersellers in their beautiful Hall in the city of London. It is the Leathersellers' policy to invite those charities which have benefited from the Company's generosity so that they can put a face to the Charity and at the same time allow us to 'network'. Rose accompanied me because it was she who introduced INSPIRE to her brother-in-law who just happens to be the Clerk to the Company. This was the second time that we had attended and as before it was, a very happy and relaxed occasion.

I have just returned from Liverpool. It is unusual to visit a project twice within a year but I was invited by the Spinal Injuries Association NW to give a talk about the work of INSPIRE along with Mrs Kate MacIver who spoke on the Pain Project (see pages 3 & 4). I took the opportunity to visit the project and met for the first time Kate's boss, Professor Turo Nurmikko. As I said in the last issue there are some exciting results but it's too early to come to any conclusions.

My thanks go to the contributors who, as always, make one stop and think, or smile, or both and to Nessie for more delicious recipes.

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my successor will be – but whoever it is will need some time to adapt to the job and pick up all the contacts and knowledge I have accumulated over the past 24 years – so please be patient with them when you ring up or call in to pick their brains.

Thank you for the privilege of knowing you all over these many years.

John

# A Couple of Recipes

*Nessie Owen*

## **Lime and Lemon Grass Chicken**

Serves 4

One of my favourite cookbooks is Donna Hay's At My Table – this recipe is taken from there. This lovely supper dish is a burst of Asian flavours and a true delight for the palate! The curry is best made the day before, as it gives all the flavours a chance to really develop.

6 chicken thighs, boned, skinned and cut in half  
2 teaspoons sesame oil  
Grated zest of 2 limes  
2 large fresh red chillies, seeded and finely chopped  
2 kaffir lime leaves, sliced  
2 lemon grass stalks, finely chopped  
1 tablespoon palm or brown sugar  
2 inch/5cm piece of fresh ginger or galangal, peeled and grated  
2 teaspoons ground cumin  
1 tablespoon lime juice  
2 teaspoons tamarind paste  
8 fl oz/240ml coconut milk  
8 fl oz / 240ml chicken stock

### Salsa

Mango

bunch of mint

Yogurt

Heat the oil in a wok or large frying pan and when it is hot add the chicken and stir-fry until golden brown on both sides, about 5 minutes.

Take the chicken out of the pan, add all the spices and flavourings and stir-fry for 2 minutes. It should smell overwhelmingly delicious. Put the chicken back into the pan, stir to coat thoroughly with the flavourings, pour in the coconut milk and stock and simmer for 30 minutes when the chicken will be tender and the liquid reduced a little. There should be plenty of tangy sauce.

Serve with a fruity salsa of chopped mango, chopped fresh mint and plain yoghurt and plenty of rice to soak up the delicious sauce.

## Hot Raspberry Soufflé

Serves 4

I took this recipe from The Saturday Telegraph Weekend section and produced it for a dinner party a while ago. I made the base a couple of days in advance and whisked the egg whites and put the mixture into pots an hour before the guests arrived, Even in my very basic oven they rose like a dream and I received lots of compliments! I poked a hole in each bronzed soufflé and dropped in a tiny scoop of vanilla ice cream.

7oz/200g raspberries  
7 fl oz / 200ml full fat milk  
1 large egg yolk  
3oz/85g caster sugar  
½ oz/15g cornflour  
4 large egg whites  
1 tablespoon creme de framboise liqueur (optional)  
Butter and caster sugar for the soufflé dishes  
Icing sugar to dust

Purée the raspberries in the food processor and rub through a sieve to get rid of the seeds. Measure out 3oz/85g of the smooth purée.

Bring the milk to scalding point (just below boiling point, when little bubbles are forming around the edge). Whisk the yolk with 1oz /30g sugar, until thick and creamy. Beat in the cornflour, then pour on the milk, still whisking. Rinse out the milk pan and pour the mixture back into it. Bring to a simmer, stirring constantly, so that it thickens to a gloopy mass. Simmer for about 2 minutes still stirring, then mix in 3oz/85g raspberry puree and cook for a further 2 minutes. Pass through a fine sieve and chill.

Preheat oven to 190C/375F/ Gas Mark 5 and put in a baking sheet to heat up.

Whisk the whites until they form soft peaks, then add the remaining sugar, still whisking. Continue to whisk until shiny and standing in stiff peaks. Fold in the raspberry mixture and the creme de farmboise if you are using it.

Brush 4 soufflé dishes generously with butter and dust liberally with caster sugar.

Fill the dishes with the soufflé mixture right to the top and level off with a knife. Run your thumb around the inside rim of each dish, making a groove in the mixture (this is messy but it gives it a professional neat rise)

Bake on the hot baking sheet for 9 minutes and finish by dusting with icing sugar.

## Selfless — Ex Duke of Cornwall Spinal Unit Nurse donates a kidney



Some of you may recognise Claire Johnston, (pictured left) a senior staff nurse who worked in Community Liaison in the Spinal Unit of Salisbury Hospital, before moving to New Zealand. I am grateful to Bridget Gunnewicht, who was on the Unit at the same time and who alerted me to a newspaper article from the Christchurch New Zealand press ([www.stuff.co.nz](http://www.stuff.co.nz)) on 26th January this year and an edited version follows:

**“Christchurch nurse Claire Johnston is donating a kidney to her friend and colleague, Lynsey Farra”**

*The bonds of friendship will be ever intertwined for two Christchurch women with the greatest gift of a new life. Christchurch nurse Claire Johnston is used to saving lives, but on Monday she will change the life of a colleague by giving her a kidney. Johnston, who works in Christchurch Hospital's cardiac ward, will donate her kidney to fellow nurse Lynsey Farra. Several years ago, Farra was told she needed a kidney transplant or would face life hooked up to a dialysis machine. Farra's kidneys had become damaged 20 years ago when she was given too many antibiotics after falling ill overseas.*

*Johnston, 43, said that after watching her friend's health deteriorate through the nine years they had worked together, she decided a year ago she wanted to give Farra the chance of a normal life. It challenged me to know that Lynsey could end up in a box or hooked up to a dialysis machine for life if she didn't find a donor. It got me wondering whether I could be unselfish enough to do that for another human being. You have to think through all the possibilities -- like how will I feel if it doesn't work. But the more I thought about it, the more I decided, why not?”*

*Claire invited her friend for a coffee and “stunned” her by offering to undergo tests to see if she was a compatible donor. After a year of tests including assessments by a psychologist, blood tests and scans to check the position and health of the donors kidney a time was set for the operations.*

*(Continued on page 13)*

*(Continued from page 12)*

*The operations would take place in different theatres and take about three hours. The operation would be more gruelling for the donor though Lynsey would take about 2 months to recover and have to take anti-rejection drugs for life. She could not describe how much she appreciated her friend for being a donor. What she has done is so special she deserves so much credit. Her emotions before the transplant were too high to talk to the media but she wanted her story told to encourage others to donate organs.*

*Soon after, Claire Johnston said she had no regrets about donating her kidney and her health was back to normal just a fortnight after the operation.*

*Christchurch nephrology department clinical director Kevin Lynn said that kidney transplants were successful in about 95 per cent of cases. He said many people did not realise that they could donate outside their families.*

Kim Thomas—The Press  
www.stuff.co.nz

A friend writes “Her kidney removal went very well and without complications as did the recipient operation. Both Claire and Lindsay are very happy with the result and the surgeons were too. She was discharged today and Sue went to visit her with some prunes “

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## **Bowel care research**

**Do you use suppositories or enemas  
for bowel care?**

**Would you be interested in helping  
with a short research study?**

**For information about the study please contact**

**Maureen Coggrave on 01296 315888**

**maureen.coggrave@buckshosp.nhs.uk  
or**

**Wendy Slater on 01722 429291**

**wendy.slater@salisbury.nhs.uk**

# WIDENING HORIZONS

*John Gisby*

At first sight a Shadow Microlight aircraft appears to be a remarkably skeletal flying machine with its pusher propeller driven by a lawn mower sized engine, tiny in-line double cockpit hanging under the wings and a tail unit on the end of what might be thought a length of drain pipe. As such it is not an obvious choice for anyone with a spinal injury to learn to fly in, or even just to enjoy the tremendous sense of freedom that flying a light aircraft provides.

It is however remarkably robust, reliable and economic to maintain and operate. Its design makes both access and exit easy for anyone with limited mobility, the use of a hoist enabling a tetraplegic potential airman to settle into the cockpit easily and comfortably. Everyone who has sat in the front cockpit of one of these aircraft, with no obstructive limitations set by wings, engine or propeller discovers that they have a remarkable field of view – some on their first experience feel it is considerably more than remarkable and verging on the alarming until they get accustomed to it. This they almost always do very quickly and then relax to enjoy the breathtaking panorama drifting by



*Shadow aircraft in use at APT*

below them.

Aviation for Paraplegics and Tetraplegics Trust, (APT), has two Shadow Microlights which have been adapted so that even those with very limited dexterity and movement can fly them easily and safely. APT is a charity which was established in 1994 to teach people with spinal injuries, and more recently people with other disabilities to fly, or at the least to enjoy a morale enhancing flight experience. To anticipate the reader's inevitable question, no accidents have occurred in the fourteen years that the Trust has been functioning, except one which was the fault of a recently qualified pilot who flew against the advice of the Air Traffic Controller because of anticipated deteriorating weather. Even so he managed to land without injury although he caused some damage to the machine.

Achieving a Civil Aviation Authority's Private Pilot's Licence (PPL) is a considerable achievement for anyone. Attempting such a project which challenges but rewards any student, let alone one with a

*(Continued on page 15)*

*(Continued from page 14)*

severe disability. On average about fifteen hours of flying under instruction is needed before flying solo and this is then followed by a minimum of twenty five hours to qualify. In addition there are several important subjects to learn and on which to be rigorously examined, such as navigation, radio procedures, meteorology, safety regulations and checks.

APT has provided these facilities for over a hundred students since its foundation, many of whom have achieved the PPLs.. There are similar organisations in the UK and elsewhere but it is believed that it pioneered the opportunity for the wheel chair bound to take to the wing and enhance their personal horizons in more ways than one. Those interested may care to visit the website at [www.disabledflying.org](http://www.disabledflying.org).



**INSPIRE Charity Polo Match  
Saturday 12th July  
12 o'clock  
Tidworth, Wiltshire**

**After the game, champagne,  
delicious lunch with great  
wines, in the players and  
sponsors marquee, afternoon  
tea before The Rundle Cup,  
The Royal Navy versus The Army**

**Call Heather: 01722 336262 Ext2465**

# Post card from the seaside

There are some places in and around Bournemouth that can be described as beauty spots and others that become attractions for entirely different reasons, but St Catherine's Hill falls into the best kept secret category with many residents who are living within a mile or two of its slopes knowing very little about it or even being aware of its existence. I can vouch for the fact that the hill has an enigmatic quality because, on returning to live in Bournemouth for a second time back in the late Eighties, and looking at bungalows in the area known as St Catherine's Hill, the Dommett family didn't manage to seek out the viewpoint until a year or more after moving, despite the fact that we ended up living within the above mentioned radius.

The hill is just east of Bournemouth and provides a panoramic view across the town after an easterly directional gaze at the New Forest spreading out as far as the eye can see. Turning to look southwards, Hengistbury Head appears with the Isle of Wight beyond and in the foreground is the Avon Valley and the river running down from Salisbury to meet the Stour before going on to Christchurch Harbour and the sea. Completing the sweep westward, modern day Bournemouth landmarks, such as the JP Morgan Chase Bank and the Bournemouth International Centre stick out on the skyline to provide an all too obvious contrast with the hill's historical background, but, before going there, Poole is in sight and the Purbecks are beyond. It is, therefore, no stretch of the imagination to call it a panoramic view and as such you do tend to wonder why it is a hidden treasure rather than a crowd pulling attraction. That is until you go back in time...

If history dictated the importance of the place you would have thought the Romans would have made use of the elevated position and they did, by building a military signalling station there nearly a thousand years ago. However, the most influential event to affect the subsequent notoriety of the hill occurred in Saxon times when it was almost chosen as the site of Christchurch Priory. Legend has it that the project actually started, but, each evening after the builders left, the work they had carried out that day was mysteriously undone and by the following morning there was no sign of progress and the materials had been removed. On one occasion a beam, said to be cut too short, disappeared only to be found at the present site of the Priory having been miraculously lengthened to fit again! It was deemed to be the work of Christ and the rest, as they say, is history. Could it be that those who work in mysterious ways had a different outlook on St Catherine's Hill and maybe another perspective on its future? I suppose, when it comes to belief or superstition, it all depends on your point of view.

Alan Dommett (C6/7)



# A Letter from America



As you may surmise, Florida is no place to have a load of unrefrigerated food around the house. So what happens when this marvel of modern science decides to go on strike? We, thankfully, brought our old fridge from New Jersey (some seven years ago) ostensibly to store extra soft drinks for when the family descends on our normally peaceful abode. The panic started when I got up early one morning last week, tottered bleary eyed into the kitchen only to find myself standing barefoot in an ever widening puddle of none too warm water! Well I was aware previously that the automatic icemaker/cold water source had ceased to respond to my irritable tap tapping on the appropriate lever – a minor annoyance or, as my neighbour frequently intones, “no big biggy”.

Anyway this rogue “new” fridge was now, like some mini nuclear plant, shutting down sequentially – firstly, the freezer stopped causing the frozen fish pieces to droop unbecomingly in their allotted spaces and the ice cream to form an elegant but unwanted pink sauce in its plastic container! Secondly, Julie and I debated as to what would come next. Naturally the fridge side of the beast was an obvious choice and sure enough the clues provided were a none too cool gallon of skimmed milk and a dish of pseudo-butter which was more liquid than the vendor

intended it to be.- Thirdly an attempt to draw a glass of cold water revealed the fact that there was no water cold or warm being pumped through the system. . Nothing daunted I checked the incoming water supply tube by unwisely disconnecting it from its mate behind the fridge. You will, I am sure, not be surprised that the only thing I achieved by this action was to spray the kitchen walls with a high pressure jet of water running straight off the main water supply.

Enough already, I called the manufacturer to get some professional help and learned from the charming young lady manning the customer service phone that it was not a problem – just pay the man close to a hundred dollars for stopping by the house plus the cost of the parts which by now were out of warranty and rather expensive – oh yes, she assured me, he is busy but will be at chez Gardner tomorrow. **Tomorrow** sounded a long way off so I quit my homestead and repaired to the Club House to play duplicate bridge. I got home around five pm Julie’s first words were a sheer joy to me...“Hello darling, the fridge man came, repaired everything and then when I pulled out the cheque book he said to have this one on us” ..... Julie’s charm never fails to amaze me!

Best wishes from us both  
Jack & Julie G.

# **New Element Discovered** **GOVERNMENTIUM**

*This came to us from the USA*

The discovery of the heaviest chemical element yet known to science. The new element has been tentatively named Governmentium. Governmentium has 1 neutron, 12 assistant neutrons, 75 deputy neutrons, and 224 assistant deputy neutrons, giving it an atomic mass of 312. These 312 particles are held together by forces called morons, which are surrounded by vast quantities of lepton-like particles called peons. Since Governmentium has no electrons, it is inert. However, it can be detected as it impedes every reaction with which it comes into contact. A minute amount of Governmentium causes one reaction to take over four days to complete when it would normally take less than a second. Governmentium has a normal half-life of three years; it does not decay, but instead undergoes a reorganisation in which a portion of the assistant neutrons and deputy neutrons exchange places. In fact, Governmentium's mass will actually increase over time, since each reorganisation will cause some morons to become neutrons, forming isodopes. This characteristic of moron-promotion leads some scientists to speculate that Governmentium is formed whenever morons reach a certain quantity in concentration. This hypothetical quantity is referred to as Critical Morass.

When catalysed with money, Governmentium becomes Administratium, an element which radiates just as much energy as Governmentium since it has half as many peons but twice as many morons.

PS: Occasionally, the existing neutrons, morons and peons get together – in what is called a "CAW-CUSS" -- and try to generate a new pecking order among the possible neutron wanna-bees.

**Do you want to receive your INSPIRE Newsletter on line?  
Send us an email to [inspire@freeuk.com](mailto:inspire@freeuk.com) to request the  
newsletter on line and we will send you a password in May  
for the Summer issue**

# **Acknowledgements & Notices**

In addition to thanking the Trusts, groups and individuals listed below, who have donated £25 or more to INSPIRE, we would also like to thank other members and friends, too numerous to list, who have supported us since our last newsletter went out in December 2007. There are also many others who donate once a month and their annual total exceeds £25. They are also too numerous to list. To you all, thank you very much indeed.

Anonymous  
Mr & Mrs JA Pye's Charitable  
Settlement  
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The Misses Barrie Charitable Trust  
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Mrs BDM Green  
Rowan Bentall Trust  
George Skeates Fund  
Mrs AM Robinson  
Mr J Boyd  
Green & Lillian FN Ainsworth and  
Family Benevolent Fund

## **Collection Boxes**

Mr & Mrs MA Peacock

## **In Memoriam**

We have received a donation in memory of Adrian Hounsome

## **Deaths**

Death of Arnold Bond of West Parley, Dorset. On behalf of the Trustees and Members, our heartfelt condolences go out to his family and friends.



# THE INSPIRE FOUNDATION

INSPIRE - INTEGRATED SPINAL REHABILITATION.

Registered Charity No 296284



## OBJECT

To promote research into, and the development of, electronic, mechanical and medical aids to assist the mobility and enablement of people suffering spinal cord paralysis and its associated effects and to communicate the useful results of such research.

## PATRONS

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Mr Robert Key MP  
Mr Clive Pryke  
The Lord Vincent of Coleshill GBE KCB DSO  
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\* Denotes Spinal Cord Injured

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