IMPROVING THE QUALITY OF LIFE FOR THOSE WITH MS SINCE 1949

Director's Notes: by Candyce Hayes

Gosh, you can hardly pick up a newspaper, turn on the television, radio or log on to the internet anymore without being bombarded with negative news! The stock market is radically fluctuating, home values plummet, food and gas prices soar. Is there any good news? Well of course there is! Good news hasn't gone anywhere...it just isn't as glamorous and dramatic to report. Indeed, it seems fear and panic have taken over our lives. Unfortunately, when cultivated, fear and panic can lead to complete paralysis - it's true. So rather than focusing on the dark side of life, let's look at the power each of us has within to turn obstacles into opportunities.

A few weeks ago there was a knock at the MSSP door. A middle-aged man stood at the door holding a hammer. I hesitantly opened the door, not completely inviting him in. After all, it was a rather strange sight, wouldn't you agree? He said his wife was in the truck and asked if I would accompany him to talk with her. Half teasing I asked the bookkeeper to take note in case

police assistance was needed. We walked to the truck. I let him take the lead, thinking it seemed like the smart thing to do.

His wife, Noreen, and I talked for nearly 20 minutes. She was beautiful with dancing blue eyes and brown hair with a hint of gray combed back into a soft bun. We talked about the neighborhood. She explained that in the 70's they owned nearly the entire block! Now all that remained was a small duplex down the street. Her husband noticed the MSSP sign in the window as he was nailing a "FOR RENT" sign to the lamp post outside of the house. Aha, now the "mystery of the hammer in his hand" was now solved!!! As we continued to talk, Noreen shared her personal experience with MS

Noreen told me she never let MS stop her from pursuing her heart's passion, which happened to be working with dogs. Over the years she switched from sheep dogs to silky terriers because the tiny dogs are much easier to handle. She looked me straight in the eyes and said, "Candyce

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I search for my choice in situations."

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Multa Spes is the quarterly newsletter of the MSSP, distributed to MSers, consumers, families, professionals and friends.

Comments and articles are welcome. Publication depends on space available and is subject to editing. Submission deadlines: 7/1/2009 and 10/1/2009.

Please send submissions to Candyce Hayes, Executive Director, at: candycehayes@msoregon.org or mail: MSSP, 2901 SE 122nd Ave. Portland, OR 97236.

If you are not currently receiving Multa Spes by mail, we would be happy to add you to our mailing list. Direct all subscription requests or address changes to candycehayes@msoregon.org or call 503-297-9544.

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Director's Notes By Candyce Hayes Continued From pg. 1

Without skipping a beat she went on to say, "Thirty years later instead of being in the ring I watch from the bleachers. My grandchildren now walk the dogs in the ring. But I am there! It gives me great pride to see my grandbabies carry on the tradition. Others are mistaken when they say "MS has taken this and that from me." All misperceptions, I quickly point out. Instead, MS forces me to live in the moment. MS has caused me to train my mind to think and analyze situations so I can accomplish my goals and dreams. The process may be different but the outcome is the same – I remain in the game! If I had allowed fear, panic, sadness and despair to run amuck they would have robbed me of joy, peace and contentment. Once I found peace then creativity crept in and joy abounded. All you really need is determination, patience and a sense of humor," she said. We could have talked for hours but her husband was becoming restless. We agreed to visit again sometime in the near future. As we bid farewell I called out, "I look forward to seeing you again soon and by the way, please leave the hand tools at home!" They laughed and we waved goodbye.

My hope in sharing this short story is simple. I pray what resounds in your heart and mind is this: while tough times come and go, everyone can search to make empowered choices like Noreen. While it is important to be informed, don't become paralyzed by information. Rather become driven by determination to live your life to the highest quality possible. Should you find yourself feeling overwhelmed or if you want to reach out and help others, contact us at 503 297-9544. We exist to support and care for you. Enjoy the summer.





Hello. I'm the newest member of the MSSP staff. I was hired in January and have been enjoying the experience ever since. I was born and raised in Oregon and am an avid fan of the Ducks. I enjoy frustrating myself trying to learn to knit, love a great read, and continue a decades long struggle with golf because any day walking that grass in

the sun is a great day. I'm pleased to be here and I'd like to thank everyone for the warm welcome!

Ginkgo Biloba for Cognitive Impairment in Multiple Sclerosis

The Portland VA Medical Center and the Seattle VA Medical Center are currently recruiting subjects to enroll in a placebo controlled trial that will study the effect of Ginkgo biloba on cognitive impairment due to multiple sclerosis (MS).

Eligible subjects must:

- be between the ages of 18 and 60 years,
- carry a diagnosis of multiple sclerosis
- be native English speakers
- not have taken Ginkgo in the prior 30 days
- not be severely depressed
- not have severe medical problems
- not have a significant MS relapse in the prior 30 days
- not have history of alcohol or drug abuse in the prior six months
- not be taking Coumadin (warfarin) or other blood thinners
- be impaired in at least one of the cognitive tests that will be administered at screening
- be using a reliable form of contraception

Participation in the study requires that subjects undergo clinical assessments at the Portland VA Medical Center or Seattle VA Medical center on two separate occasions over a 3 month period. The assessments will include cognitive tests and a physical exam. Also, the participant and a close family member or caregiver will be asked to complete several questionnaires regarding cognitive problems, social activities and depression. Subjects will also receive monthly phone calls.

This is a research study and not treatment.

There will be no financial costs to subjects who choose to participate in this study. Subjects will be paid \$25 for completing each visit. Subjects that live further than 1 hour from the Portland VA Medical Center or Seattle VA medical center will receive compensation for their travel costs up to \$75 per visit.

If you would like further information about this study or to refer a subject, please contact: Dr. Dennis Bourdette, the principal investigator, or Dr. Edward Kim, the co-investigator, at (503) 220-8262 x 54594

Portland VA Medical Center 3710 SW US Veterans Hospital Road Portland, OR. 97239 VA Puget Sound Health Care System 1660 South Columbian Way Seattle. WA. 98108

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HIMSPA

<u>H</u>ome-based intervention of <u>Individuals</u> with <u>M</u>ultiple <u>S</u>clerosis in <u>P</u>hysical <u>A</u>ctivity

Dear friends and whom it may concern:

We are looking for participants in home-based physical activity intervention. There are three phases in this study: (1) Focus group, (2) Survey, and (3) Intervention. <u>Depending on the preference, participants can participate in any or all of those phases.</u>

This study will be an individual-level home-based physical activity intervention using computer-based communication system based on transtheoretical model and social cognitive theory in persons with MS. Before developing the intervention, the current status of physical activity and physical activity environment (e.g., barriers, exercise instrument at home, etc.) will be investigated by survey and a series of focus groups with MS.

Survey and Focus Group

The potential participants for the survey and focus group have to meet the following criteria:

- Age 18-65 (both genders and all races)
- Diagnosed as MS
- Minimally assisted ambulatory

Physical Activity Intervention

Participants for the <u>intervention</u> will be classified as (1) inactive and not thinking about becoming more active, (2) inactive and thinking about becoming more active, and (3) doing some physical activity using the stage of change measures. Then, the participants will be randomly assigned to two conditions, (1) an interactive computer-based PA intervention and (2) control. The intervention will last for 6 months and physical activity level, MS related variables, mediators of PA behavior changes will be assessed four times (e.g., baseline, after 3 months, 6 months, and 9 months intervention) to investigate the effectiveness of the intervention. The potential participants for the intervention have to meet the following criteria:

- Age 18-65 (both genders and all races)
- Diagnosed as MS
- Minimally assisted ambulatory
- Under 7.5 of expanded disability status scale (EDSS)
- **Physically** inactive or less active

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HIMSPA

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• Have to have a computer at home with high-speed internet and be comfortable to use the computer

• NO cardiovascular disease, diabetes, orthopedic problems, taking medications known to affect cardiovascular or metabolic function (anti-inflammatories, thyroid medication),

Compensation

- Focus group: Each participant of the focus group will be paid up to \$40 during the meeting, which is \$20 per hour and the meeting will last no longer than two hours.
- Survey: The first 100 participants who complete the survey will be paid \$10 and will be notified via e-mail or mail at the end of data collection.
- Intervention: Each individual will be paid up to \$60. The participants will be paid \$10 for the pre-test and \$20 for the post-test. When the participants complete all 6-month intervention, the participants will be paid an additional \$30. Each individual in the control group will be paid a total of \$30 for pre-test (\$10) and post-test (\$20). All incentives will be given after the post-test.

Be more active and healthier! We will help you to change your physical activity behavior from sedentary to active using face-to-face internet-communication system while you are at home: No need to visit the lab.

If you are interested in learning more about this study or to participate in the study, please contact:

Dr. Miyoung Lee

Office phone: 541-737-4649 Fax: 541-737-6613

E-mail: miyoung.lee@oregonstate.edu

Movement Studies in Disability Nutrition & Exercise Science Oregon State University 20 Women's Building

Ms. Alicia Dixon

Office phone: 541-737-5927 Email: dixona@onid.orst.edu

You can also visit the following website to participate in the study **right now**. Please complete surveys listed below:

National Survey Study of Barriers and Exercise/Physical Activity Participation http://www.surveymonkey.com/s.aspx?sm=LeWitBO_2f8YrR_2f7rRVljwUQ_3d_3d

Preference of Exercise/ Outcome/ Physical Activity Enjoyment Scale http://www.surveymonkey.com/s.aspx?sm=ZTVKzS2sqq1ylBlpD6pHJA 3d 3d

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MS Pain and What To Do About It By Laurie Long

Twenty years ago doctors used to say that there was no pain with MS. But these days there is no question from any of the medical community that pain associated with MS is real. Most of the recent studies show that neuropathic pain – pain caused by problems in the nervous system – is experienced by 50% or more of MS patients sometime during the course of the disease.

So what causes this pain? Demyelinated axons may cause neural impulses to leak out and spread to other adjacent demyelinated fibers. If the adjacent fibers belong to the sensory pathway, these misdirected neural impulses give rise to pain. Trigeminal neuralgia (sharp facial pain brought on by chewing or touch) is an example of this pain, where the motor and sensory branches of the trigeminal nerve short circuit. Nerve cells can also become overstimulated or misfire. This means that an overabundance of pain messages are sent to the brain, causing severe and often long-lasting agony. Dr. Randall Schapiro explains in his book "Symptom Management in MS", that these types of pain often do not respond to ordinary pain medications. Muscular and skeletal pain is also prevalent and can be due to muscular weakness, spasticity and imbalance.

Pain associated with MS is divided into different areas, but the most common classifications are acute, subacute, and chronic pain.

Acute Pain

Acute pain syndromes are sudden attacks of pain, often repetitive and lasting anywhere from seconds to hours. Acute pain is usually caused by abnormal conduction or 'short circuit' along demyelinated nerve fibers. Trigeminal neuralgia (see above) is the

The preferred drug for treating acute pain syndromes in MS is anticonvulsant medication.

most recognized acute pain syndrome. Trigeminal neuralgia occurs about 300 times more frequently in people with MS than in the general population. Lhermittes sign (electric-shock sensation passing down the back when the head is flexed forward) and paroxysmal (brief) pain in the arms and legs are also known pain syndromes found in MS. These symptoms can be triggered by touch, movement, or even rapid breathing. Acute pain syndromes often occur at the beginning of the disease and are less frequent than the chronic pain syndromes (less than 15% according to Moulin at al, 1988).

Treatment

The preferred drug for treating acute pain syndromes in MS is anticonvulsant medication. Carbamazepine (Tegretol) is the drug of choice. Gabapentin (Neurontin) and phenytoin (Dilantin) are also used. These medications block abnormal nerve conduction at the demyelinated site. These drugs can have side effects, and may also cause the worsening of other MS symptoms such as weakness or tremor because they block nerve conduction.

Subacute Pain

Subacute pain can also be caused by demyelination, or from a secondary source, such as the swelling of the nerve. The most common subacute syndrome is optic neuritis. Optic Neuritis is an aching,

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throbbing pain around or behind the eye and is provoked by eye movement. It is often the first symptom of MS. Optic Neuritis usually resolves in 7-10 days.

Treatment

Treatment of Optic Neuritis is generally with corticosteriods like Solumedrol or Prednisone to reduce optic nerve swelling.

Chronic Pain

Chronic neurogenic pain is the most common, and the most intractable of the pain syndromes in MS. Chronic pain syndromes make up 50 to 80% of all pain experienced in MS. Chronic pain syndromes include paraesthesias and dysesthesias.

Paresthesias include pins and needles, tingling, shivering, burning pains, feeling of pressure, and areas of skin with heightened sensitivity.

Dysesthesias include burning, aching or girdling around the body.

Treatment

Treatment for neuropathic pain is with antidepressants called tricyclics. Amitriptyline (Elavil) has been the most commonly used tricyclic, but newer antidepressants such as bupropion (Wellbutrin) are replacing the older tricyclics because of reduced side effects.

If these medications do not work anticonvulsants, narcotics or the anti-spasticity drug baclofen can be tried. Combinations of these drug therapies can also be tried, although the risk of side effects rises with increased medication.

In addition to the drug therapies, other therapies such as physiotherapy, relaxation, meditation, deep breathing, yoga, chi gung, biofeedback, massage, chiropractic, hydrotherapy, acupuncture, etc. can help to alleviate and control chronic pain. Transcutaneous nerve stimulation (TENS) has been occasionally used to provide relief, but since it sometimes produces the opposite effect it is not recommended.

Other MS Pain

Other MS pain is often not directly related to demyelination and neuropathic pain. Chronic pain syndromes such as backache and leg spasms affect many people with MS. Reduced mobility, poor posture in walking and sitting can cause lower back pain. Spasms (intense cramping) are often due to increased disability and immobility.

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Treatment

Back pain can be treated with non-steriodal anti-inflammatory medication (NSAIDS), physiotherapy, chiropractic, massage, yoga and other stretching and strengthening exercises. Treatment for spasms is generally anti-spasticity medication such as baclofen (Lioresal). Tizanidine (Zanaflex), diazepam (Valium) and dantrolene (Dantrium) are also used. This treatment is combined with physiotherapy – stretching and strengthening exercises, which should be done on a daily basis.

Conclusion

It is critical that a correct diagnosis of the cause of any type of pain be made to ensure that it is properly treated. There are more available drugs and other therapies today for MS pain than ever before, and new discoveries are giving people more choices to combat that pain. But the most important point is that you don't "just have to live with" MS pain! Never assume that new pain is "just my MS". Have it evaluated by your health care provider and get the proper therapy to alleviate it. Take control of your pain – don't let it take control of you!

Type of Pain	Drug Therapies	Other Therapies
Acute: Trigeminal neuralgia Lhermittes sign Paroxysmal in arms/legs	Carbamazepine (Tegretol), Gabapentin (Neurontin), Phenytoin (Dilantin)	Meditation, deep breathing, relaxation, chi gung,
Subacute: Optic Neuritis	Solumedrol, Prednisone	Meditation, deep breathing, relaxation, chi gung,
Chronic Pain: Paraesthesias Dysesthesias	Amitriptyline (Elavil), Bupropion (Wellbutrin), Carbamazepine (Tegretol), Gabapentin (Neurontin), Phenytoin (Dilantin), Baclofen (Lioresal)	Physiotherapy, relaxation, meditation, deep breathing, yoga, chi gung, biofeedback, massage, chiropractic, hydro- therapy, acupuncture, TENS
Other Pain: Backache Leg spasms	Non-steriodal anti-inflammatory medication (NSAIDS), Baclofen (Lioresal) Tizanidine (Zanaflex), Diazepam (Valium) dantrolene (Dantrium)	Physiotherapy, chiropractic, massage, yoga and other stretching and strengthening exercises

MS Pain and What To Do About It By Laurie Long

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Pain Websites

www.theacpa.org The American Chronic Pain Association

www.tna-support.org Trigeminal Neuralgia Association

www.paincare.org The National Foundation for the Treatment of Pain

www.aapainmanage.org/aapm/resources.html American Academy of Pain Management

www.painmed.org American Academy of Pain Medicine

www.painfoundation.org The American Pain Foundation

www.ampainsoc.org The American Pain Society

www.painsupport.co.uk/ Pain Support - Natural Pain Relief

www.ninds.nih.gov/health_and_medical/disorders/chronic_pain.htm National Institute of Neurological Disorders and Stroke Chronic Pain page

www.mayoclinic.com/invoke.cfm?id=BN00016 The Mayo Clinic on Trigeminal Neuralgia

www.albany.net/~tjc/pain.html Pain in MS

Christmas Party Moving

We have an exciting new location for our Christmas Party this year! Join us at the Montavilla United Methodist Church December 12 from 11:30-3:30. This new venue is more easily accessible for everyone. There is a ramp inside the building so there'll be no waiting in the rain and a lift that allows access to the fellowship hall upstairs where the party will take place. The hall's beautiful, bright, cheery windows look into the Sanctuary and open up the room to a view of the winter weather outside. We are looking forward to hosting our famous Christmas party at this new location!!



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Meet Our New Board Members

Back in March you may have seen the MSSP mentioned on television a time or two...over seventy times in the course of a month to be precise!! If so, then you learned more about MSSP, and you met one of our newest board members. Teresa Forsell, a member of the Media Committee, in collaboration with her employer and friend, Sherri Hiner, owner of Mattress World, used those thirty seconds to raise awareness about MS and about the MSSP. It was an invaluable gift.

Teresa was diagnosed in 1999 and has found that after ten years of living with MS, acceptance and lots of work with her massage therapist/personal trainer Daniel Wahl (www.danwahl.com) are what keep her at her best every day and keep her healthy in the long term.

Teresa joined the board this February after meeting board President, Dave Peery who met her while buying a mattress. When they discovered that they



had volunteerism in common Teresa, a volunteer at The Pixie Project, asked Dave about his work and he handed her his card. When she read "Multiple Sclerosis Society of Portland, OR Inc." she said, "Really? I have this." When she read the MSSP mission statement to "improve the quality of life for those with MS" she knew she wanted to help get the word out. If her work with Mattress World to coordinate March's public service announcement is any indication, the media committee has a valuable member on their team. Welcome Teresa!





The MSSP would like to welcome Jim Hisatomi to the Board of Directors! Jim joined us back in March bringing along his experience in sales and a commitment to helping the MSSP help the community.

Jim, President of American Benefits, Inc., is married, and an active Dad to two growing boys. He enjoys golfing, University of Oregon sports and spending time with family and friends. When asked to outline his goals while on the Board, Jim said, "I look forward to as-

sisting the MS Society of Portland in any way I can. I feel that my personal background and experiences can provide a unique and productive voice on the board."

Welcome Jim! The MSSP, its Board of Directors, and staff, are thrilled to have you here. We look forward to a long and productive relationship.

Mark These Dates

We have lots of fun and exciting programs and events coming your way in 2009. All MSSP programs are free. Save the following dates:

Event/Activity	Date	RSVP Deadline
Annual Picnic @ Oaks Park	June 13	June 8
Caregiver class @10:00 a.m. MSSP House	June 20	June 15
2009 Educational Workshop	June 27	June 22
Summer Comfort Applications Available Apply online @ www.msoregon.org or Call 503-297-9544		*Registration Form Req 1st deadline June 30 2nd deadline Aug. 1
Caregiver class @10:00 a.m. MSSP House*	July 18	July 13
Caregiver class @10:00 a.m. MSSP House*	August 15	August 10
2009 Christmas Party (NEW LOCATION) Montavilla United Methodist Church 232 SE 80th St. Portland, OR 97215	December 12	December 7

Please Join Us At Our Summer Picnic

Come out to Oaks Park for FREE RIDES and a FREE PICNIC!! We're serving up the world's best fried chicken, potato salad, melon, and ice cream, so join us for great food and fun with family and friends!! (Maximum 4 to a group including client.)

WHO:	MSer's, Family and Friends
WHAT:	MSSP Summer Picnic
WHEN:	Saturday, June 13, 2009 from 11:30 am - 3:30 pm
WHERE:	Oaks Park SE Spokane St Portland, OR 97202
WHY:	Because it's FUN, FREE and FABULOUS!!
RSVP:	By June 9, 2009. Call 503-297-9544 or email us at events@msoregon.org Remember, we need the number in your party!

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ADA by Russ Carter

The Americans with Disabilities Amendments Act was signed by George W. Bush on September 25, 2008. The Act will significantly broaden the provisions of the ADA and the Rehabilitation Act. The legislation will become effective on 1/1/09.

The new law rejects four Supreme Court decisions which have narrowed coverage and forced courts and the Equal Employment Opportunity Commission (EEOC) to consider all mitigating measures in defining substantial limitations in performing a major life activity resulting from impairment. The four rejected Supreme Court rulings often had the effect of precluding individuals with disabilities from coverage under the Act.

The new law also rejects the EEOC's regulations regarding the definition of disability, requiring that it be "broadly construed" in favor of coverage, including reinstating the Court's language in Nassau v. Arline, 480 U.S. 273 (1987) in a broad view of the definition of "regarded as" disabled. As before, the Act specifically excludes transitory and minor impairments, and does not require an employer to provide reasonable accommodations to an individual regarded as having a disability.

The new Act requires the EEOC, Department Of Justice, and Department of Transportation to enact and implement new regulations, and amends Section 705 of the Rehabilitation Act to conform with the new legislation.

New to Lending Library by Kristin Dickinson

The MSSP lending library has a valuable new addition. Only in its first year of publication, PainPathways is a quarterly journal and the "Official Magazine of the World of Pain." Intended as a

This is just one of the many media resources available at the MSSP house. means to reach people living with chronic pain, it provides the most current information on research, products, information from leading experts and stories about surviving pain from those who are living with it.

This issue has an uplifting article on Montel Williams who shares his strategies for living from day to day battling MS. He outlines his struggle against pain and depression and shares his methods for

coping with the emotional and physical manifestations of the disease. For more about PainPathways including subscription information, visit www.painpathways.org. You can also call 336-714-8389 or write the magazine directly at 145 Kimel Park Drive, Ste. 350; Winston-Salem, NC 27103.

This is just one of the many media resources available at the MSSP house. The library is open for all of our clients and friends because the MSSP knows that access to information is an integral part of the battle against chronic pain. We hope material like this will prove helpful to all.

Can You Relate? by Candyce Hayes

Jennifer(*) was diagnosed with MS 15 years ago. Though now confined to a wheelchair, Jennifer remains active in her church, MS support groups & several civic groups. Jennifer enjoys the freedom of using her specially equipped car to get her to all the places she needs to go: church, the grocery store, a movie with friends or medical appointments. She lives alone, so the only way Jennifer is able to transfer from her wheelchair to her car is with the assistance of her brother-in-law. What will happen if her brother-in-law becomes ill or moves away? Will Jennifer's independence be at risk?

Yes. Without her brother-in-law's training and assistance, Jennifer will be housebound. Expanding Jennifer's sphere of support is crucial to her independent lifestyle. By identifying friends and/or family members that would be willing to attend the free 2-hour MSSP caregiver basic transfers skills training class Jennifer assures that she will always be able to come and go at will.

The MSSP offers monthly weekend classes to prepare caregivers lead by a licensed RN in an inhome setting. Small classes and individual attention will leave Jennifer and other clients with a greater circle of support, ensuring freedom, independence and better educated in caring for the physically challenged. Take advantage of our free caregiver classes and expand your support system.

(see page 11 for schedule) *name has been changed for privacy.

SSDI - Ask An Expert

Have you ever thought about applying for Social Security disability but didn't know if you qualified? Have you applied for disability, been denied, and not appealed? Have you started the application process but become overwhelmed with all the paperwork?

Come hear Sharon Maynard, attorney at law, make sense of it all on Saturday, June 27th, 2009 at the Lloyd Center DoubleTree Hotel.

Sharon will explain Social Security's application and appeals process, the analysis used by Social Security to decide disability, provide tips for success, and answer questions. Her presentation is entitled "Everything You Wanted to Know About Social Security Disability But Didn't Know Who to Ask."

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KEEPING OUR DOORS OPEN:

Donate A Vehicle

Have you seen this ad (below) in The Oregonian? Then you know that MSSP recently partnered with NW Charity Donation Services (NWCD) to help raise awareness about the MSSP and to continue to bring in the donations that keep us able to provide support programs. While the NWCD runs these ads several times a week to encourage the community to donate cars, boats,



etc. to support local charities, the MSSP also needs to promote the program thru our website, newsletter and within our community.

So here's your chance to make a tax deductible donation and help MSSP at the same time! Simply give us a call at 503 297-9544 or dial NWCDS directly at 1 800 961-6119 (and don't forget to mention it's to benefit the MSSP). Your car is removed free of charge, you suddenly have all of that extra space in your

driveway, and you get a receipt for a tax write off. Best of all, you can rest assured your donation guarantees that the MSSP is able to reach out to even more of our friends with MS! Thank you for all of your support.

Your Chance To Make A Difference

Every day it seems we receive calls from clients and people in the MS community seeking assistance. Some are housebound and would love a visitor to read to them or just talk. Some need equipment delivered from our closet. Busy hands and a helping spirit are always welcome to assist with stuffing envelopes, staffing events and reaching out into the MS community to make life a little easier for someone living with the challenge of Multiple Sclerosis. Make a little time to make a huge difference. Contact us at 503-297-9544 or email us at Kristin@msoregon. org and arrange to become an MSSP volunteer!!

Equipment Closet

Don't forget the MSSP maintains an equipment closet of donated items. We have scooters, power chairs, hospital beds, walkers,

canes and manual wheelchairs. Sorry no bathroom items due to hygiene reasons. All of this equipment is available to anyone diagnosed with MS in Oregon & SW



Washington for free! If you need an item contact us at 503 297-9544 to inquire about availability. We are here to help make your life a little bit easier.

The Multiple Sclerosis Society of Portland, OR Inc. Invites You to Join Us For:

Dr. Michelle Cameron, MD, PT of OHSU "The Role of Physical Therapy in Optimal Symptom Management" And

Attorney Sharon Maynard "Social Security and Disability: What You Need To Know"

Managing MS: An Educational Brunch June 27, 2009

9:30 a.m. registration and breakfast 10:00 a.m.-2:00 p.m. program



Lloyd Center DoubleTree Hotel 1000 NE Multnomah Portland, OR 97232

RSVP to Kristin at the MSSP 503-297-9544 or Kristin@msoregon.org. Submit questions for Dr. Cameron and Ms. Maynard via email to events@msoregon.org by June 22, 2009

Lunch and parking are free of charge courtesy of a grant from Teva Neurosciences

Yes, I want to help improve t	he quality of life for persons with MS!			
Here is my contribution to the Multiple Sclerosis Society of Portland, Oregon, Inc. □ \$250 □ \$100 □ \$50 □ \$20 □ other My Contribution is for:				
☐ Project Helping Hands ☐ Summer Comfort ☐ Caregiver Classes	☐ Summer Comfort ☐ Medical Equipment			
My Name:				
Address: If you would like to send this gift in honor or remembrance of someone, please include a note with their				
Email:	name & address or if appli- cable, the name of whom we should send acknowledge-			
Phone:	ment to with their address.			
Please clip this form and mail with check payable to MSSP: 2901 SE 122nd Ave. Portland, OR 97236				

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