



Isle of Wight Heart Care Club

TICKER TAPE

2019

Affiliated to The British Heart Foundation

ISSUE NO. 78

COMING EVENTS

May 2019 – Onwards

HCC AGM

Isle of Wight College

2.30pm Friday 21st June

Followed by Afternoon ~Tea

£5.00 per person

Race Night

Wootton Community Centre

Saturday 26th October

HCC Christmas Lunch

Sunday 15th December

Lakeside Park Hotel Wootton

All events will be advertised by posters in classes or visit our website:

www.islandheartcareclub.co.uk

LEAVE A GIFT IN YOUR WILL

If you are making or updating your will, please consider leaving a gift to the Isle of Wight Heart Care Club. Any bequest, big or small will help us to ensure that we can be here to support local people affected by Heart Disease, now and for future generations. Leaving a gift to the club is a way of safeguarding the future of our vital services so that we can be here if your family, neighbours and other members of our community need us in the future.

Making or amending your Will to leave a gift to us is one of the kindest gestures you could make. Of course, we understand that when making a Will, the needs of your family and loved ones will always come first. However, once you've looked after those closest to you, leaving a gift to us could make an amazing difference to the lives of many more people; people in our community whose lives are affected by heart disease.

In the Club, we want to say thank you for every donation we receive. If you do decide to leave a gift in your Will for us, please do let us know your intentions. We would really love the opportunity to thank you personally.

The future of the Club, depends on donations and fund raising, we never know what is around the corner. One day, we would like a place of our own, a Cardiac Centre for people to pop in and meet. Giving support and advice to patients and their families. For more information please see page 8 in this issue.

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VIEW FROM THE VACANT CHAIR

As we have no chairman at this moment in time. I thought I should write a piece in their absence.

At the last AGM Harry Lawrence stepped down as chairman after many years in post. Harry has been undergoing treatment for the past twelve months, and has not yet returned to the club.

At all of the Executive Meeting over the past twelve months we have elected a member to stand as chairman for each meeting. But now as we approach the next AGM, we are looking to appoint some new members and would like to have a new chairman and secretary.

I will be standing down at the AGM as secretary. We will have a new treasurer in place as David Lankshear our current money man is standing down as well. This will mean we have positions available on the Executive.

Alan Whitehouse who attends the Heights Classes, has agreed to take over as treasurer. Alan has been looking at his new job over the past year and is now ready to control the purse strings.

If you would like to help and assist, we would love to hear from you. Nomination forms can be found with this issue of Ticker Tape along with 2019/20 membership forms.

This year's AGM will be held at the Isle of Wight College, in their conference room on Friday 21st June starting at 14.30. Then at 15.00 we will move to the Restaurant where the college catering staff will serve afternoon tea. Places are limited to the first 50 members who can buy tickets for £5.00 each from every exercise class.

The future of the Club looks to grow, with new members arriving all the time, but things are changing. The Fitness Factory in Newport where we hold classes on Monday, Wednesday and Thursday, will be closing in the next couple of years. We are currently looking for a new home to hold these classes in the Newport area.

Ideally, we need one venue to hold all of the classes, but although Lyn has been looking we haven't been able to find the ideal place so far. We have moved one of the Monday morning classes to the Isle of Wight College, with another one hopefully moving later this year.

I hope you enjoy reading this issue, we do try and incorporate many different stories and articles, from members across all classes. Please feel free to send me your views or for the next issue. I will do my very best to include them.

Gary Smith

Editor Ticker Tape

SITUATION VACANT

Wanted Heart Care Club Chairperson

Must be a good listener

Able to smile a lot

Keen, eager and sociable

Duties

Attend at least four meeting per year

Plus the AGM

Attend social events

Be a good speaker

Have a few funny jokes up their sleeve

Chair the meetings and be decisive

Listen to what the secretary tells you

Be able to control other members of the committee and put across a different point of view when needed

SITUATION VACANT

Heart Care Club Secretary

Attend at least four meeting per year

Plus the AGM

Take minutes and accurately type them up

Help the chairperson when they need guidance

Sort out the Agenda for each meeting and remind all the other members when the meeting is to take place

Be responsible for booking rooms for each meeting

Help the instructors as and when required

Apply to Gary Smith, or fill in the nomination form with this Ticker Tape.

Isle of Wight Heart Care Club Annual General Meeting

on Friday 21st June in
The Conference Room - at the Isle of Wight College

**the meeting will start at 14.30
finishing at 15.00**

Starting at 15.00 in the College Restaurant

AFTERNOON TEA

TICKETS ARE LIMITED TO THE FIRST 50 PEOPLE

ONLY £5.00 PER PERSON

Price includes Tea/Coffee, Sandwiches, Savouries and Assorted Cakes



JACK'S STORY

16th of June 2018, the day it all happened!

I was in Newtown Harbour, working on a small boat (photo attached) as an assistant harbour master.

I had collected the fee from a sailing boat. I untied my boat then collapsed. A member of that sailing training boat crew, a vet, saw me falling. She quickly realised something was wrong, jumped on board, called her sister, a junior doctor for assistance and asked the skipper to radio a "Mayday". The two sisters started CPR.



A senior doctor took over some of the CPR but then Andy, a CPR trainer at Southampton Hospital came to the rescue together with Henry (an ex Royal Marine paramedic), Andy on CPR, Henry on mouth to mouth and the two sisters still assisting as well.



All of them kept me going until the RNLI and the

Coastguard arrived with a defibrillator and oxygen. The whole rescue lasted about 45 min. before I was airlifted to the Q.A Hospital where I received very good care. I was diagnosed with reduced ejection fraction of 25 and dilated cardiomyopathy. I have now a CRTD device and with a cocktail of medicine, I am recovering well.

I am a very lucky man to have had so many medically qualified caring people around me on that day.

My family and I will be forever grateful to them all.

I have no recollection of any of it, even lost some of my memory of previous days but otherwise all is well.

I've recently joined the Isle of Wight Heart Care Club, doing an hour exercise class in Newport once a week. It is helping me regaining fitness and I also enjoy meeting people with various heart stories which is boosting my confidence for the future. Lyn, her team and Steve are very supportive and have a nice approach when dealing with us. I've never done any exercise as we do during the class but it's never too late!

Jack Cameron-Wallace

DRAMA ON THE HIGH SEAS

A different view from Jack's rescuers.

In the middle of June last year, one of our radiology staff was involved in a dramatic sea rescue, and it is a tale highlighting an amazing sequence of events that ultimately demonstrated the value of first class training at the UHS.

Jack Wallace, an assistant harbour master, was working on his small boat in Newtown Harbour, Isle of Wight, collecting mooring fees from yacht owners.

On one of these yachts were two young women who had just completed a sail training day on the Solent. As they paid him their mooring fee, they noticed that Jack looked ashen, and then suddenly he collapsed, hitting his head on the cash desk on his boat, causing a gash which bled copiously. Jack's first stroke of luck that day was that the women happened to be a vet and a junior doctor. They rapidly scrambled down into the small boat, initially concerned about the head injury, but quickly realised that Jack was in cardiac arrest and immediately started CPR.

Jack's second stroke of luck was that the BRIG Owners Club (a small RIB club based in the Solent) was passing by on their way to a liquid lunch at the New Inn in Shalfleet. As they passed the yacht, the captain shouted that they had a medical emergency on board and could anyone assist.

Henry Hillier, a former Royal Marine paramedic and Andy White, ex-Cardiothoracic Superintendent Radiographer, clambered on board to see what help they could provide. As Andy recalled, "There was a fair amount of blood everywhere; Jack had vomited and he had no pulse".

Henry immediately cleared Jack's airway and administered rescue breaths whilst Andy began chest compressions. "It didn't look good but we continued CPR for about 40 minutes until the rescue services arrived".

A paramedic was winched down from the Coastguard helicopter carrying a portable defibrillator (AED). Amazingly this showed a shockable rhythm and with one shock, Jack was back in sinus rhythm (albeit with a sizeable ST elevation).

Once the paramedic was happy that Jack was relatively stable he was rolled onto a special stretcher, then lifted manually on to the prow of a RNLI Inshore Lifeboat, which then took him out into the Solent (avoiding the masts on the surrounding yachts) before he was winched up into the helicopter and taken to the QA hospital.

Jack recalled that he 'received very good care' at the QA even though he has no recollection of the event. "I even lost some of my memory of previous days but otherwise all is well." He was diagnosed with a reduced ejection fraction of 25% (normally 50-75%) and cardiomyopathy. He now has a CRT (cardiac resynchronisation therapy) device to help his heart maintain a synchronised rhythm accompanied with a cocktail of medicine.

Continued...

When asked about how he felt attempting CPR out on the water, Andy said, "There's always trepidation before you decide to get involved in any emergency event, especially given that I have not worked clinically for over ten years. But the experience gained over many years



in the Catheter Labs, allied to the excellent ILS courses we receive at UHS as part of our mandatory training program, meant that administering CPR and working as part of a team came as second nature, even in such a cramped space on a choppy sea".

The British Heart Foundation states that the survival rate for 'out of hospital' cardiac arrest (served by a defibrillator equipped ambulance service)



averages only 6-7%, or 1 in 11 patients. In Jack's case, his "chain of survival" did benefit from extraordinary circumstances in that his collapse was witnessed, good CPR was started immediately, and continued until rescue services arrived. Prompt effective cardiopulmonary resuscitation, rapid defibrillation, and swift ambulance response times have been shown to reduce mortality and improve rates of recovery. And as all good practitioners will acknowledge, this is enhanced by a consistent and regular attendance of mandatory training.

Andy stated that "it was so good to hear that Jack had survived and even better to meet up with him and his wife a few months later at our local pub in East Cowes. How strange that they live literally 500 yards from us!"

And Jack has a message to all those who helped him: "I am a very lucky man to have had so many medically qualified caring people around me on that day. My family and I will be forever grateful to them all."

Mel

A VIEW FROM THE HELICOPTER TEAM

Patient Thanks Lee-on-Solent Crew for Quick Response, Saving His Life

When Jack Wallace was working on his small boat last summer in Newtown Harbour, Isle of Wight, collecting mooring fees from yacht owners, he suddenly collapsed due to cardiac arrest. As he fell, he injured his head and lost consciousness. Two witnesses who happened to have medical training immediately began administering CPR and other witnesses called for help.

Jack collapsed at 12:05p.m. Bristow was alerted at 12:15p.m., took off at 12:23p.m., and arrived on scene at 12:30p.m.

Upon arrival, Winchman / Paramedic Paul Vernon immediately assessed the situation and continued life-saving efforts. Once the patient was stabilized, Paul prepared him to be winched into the aircraft and the crew transported him to a hospital.

Jack made a full recovery thanks to the life-saving efforts of Paul and the crew, Captain Mark Jackson, Co-pilot Jason Davies and Winch Operator John Spencer.

Jack recently reached out to the crew because he wanted to thank them in person. He visited the Lee-on-Solent base, shook each crew member's hand and expressed his gratitude.

"Without the Lee-on-Solent crew, I wouldn't be here today to tell my story," said Jack. "All the people involved have enabled me to fully recover and get back to living my life! I am a very lucky man to have had so many medically qualified caring people around me on that day. My family and I will be forever grateful to them all."



"This is a terrific example of how we in the pre-hospital SAR community, local lifeboat and Coastguard can come together as a team to make a difference to the community we serve," said Paul. "We train together for these incidents on a regular basis and this incident proved the case. It also proves that the pre-hospital doctrine of good early bystander CPR and early defibrillation is vital to life."

"This incident will stay with me always," said Paul. "It was a pleasure to meet Jack and his family and see how well he is doing."

Jill Vitols

Senior Communications Specialist

CHRISTMAS PRIZE DRAW DONATION

Over the past 15 years, W Hurst & Son have organised a charity prize draw, just before Christmas, with the proceeds going to a different nominated charity each year.

Many island charities have benefitted because of the draw and have either received cash towards a particular project or a much-needed special item that they have otherwise been unable to afford.

The prizes for the draw have been collected from company representatives, or have been donated as free samples. They start collecting these just after the last draw and they accumulate over the year.



Pictured above are from left to right.

David Bowley, Janet Warr (Hursts), Peter Hartnell M.D W. Hursts & Son, Graham Fuller, Gary James, Lyn Smith, Alan Hopkins, Dorthy Telford-Bailie, Alan Davison, John Mills and Richard Telford-Bailie.

In previous years, they have received mountain bikes, televisions, power tools and IT equipment as top prizes for the draw. These much-valued items cause a lot of interest amongst the staff and encourages them to buy plenty of tickets.

Some of the charities who have benefited from our prize draw include Muscular Dystrophy Campaign, Ability Dogs, Riding for the Disabled, The Daisy Bus, Earl Mountbatten Hospice and lastly The Heart Care Club.

These charities are chosen at random from the many good causes on the island. Others are chosen as members of staff have a connection with them either as being a volunteer or a family member has benefitted from their help.

They are actively engaged again this year collecting prizes to contribute to their prize draw 2019 with the hope of making it more successful than ever before.

The club would like to thank W. Hurst & Son for their donation of £900.00 towards running Cardiac Rehab.

ISLE OF WIGHT BRITISH AND CLASSIC MOTOR CYCLE CLUB

Last November Lyn was asked by Lloyd Hall, one of our members who regularly attends two classes every week. If the Club needed any new equipment.

Lloyd is a member of the Isle of Wight British and Classic Motor Cycle Club and can be seen riding his Harley Davison motorcycle around the Island.

Lyn made up a list of items that we wanted and presented it to Lloyd, he said he would put it to the committee of the club, as they wanted to donate to a worthy cause.

The list came to the sum of £254.75 including new Dyna-Bands, De-fib Pads, two new Oximeter's and several other items.

Lloyd then asked her to attend the Hare and Hound Public House in November last year as they had a surprise for her.

Both Lyn and I reluctantly went to the Pub not knowing what to expect. When we arrived there was a presentation going on with old photos and a talk about Newport over the last 100 years.

We sat there patiently having a glass of Ale, listening to the speaker, which I may say was very interesting.

Then the Chairman (John Cotton) of the Club stood up and asked Lyn to say a few words to the assembled congregation.

John read out Lyn's request to the penny and then presented Lyn a cheque for £1,500.00. her face was a picture as she only expected the amount that she had asked for.

He then explained that several other clubs were asked to contribute and explain what they needed, but they just put a total in with no explanation. As Lyn was so precise they were very pleased to contribute to the Club's funds.

We spent the rest of the evening talking to the other members, some of whom we knew. The Chairman has now joined the Fitness Factory class in Newport.

I'm sure you would all like to thank Lloyd and John for their very kind donation.

Gary Smith



MAKING A WILL AND PLANNING WHAT TO LEAVE

Making your will – step by step

Before you can write a will you need to decide who gets what.

You should set down the basics of your plan for your money and possessions – your estate – early on, before you visit a solicitor or discuss your will with your family.

Don't worry, it's easier than it sounds – just follow this step-by-step process.

1. Make a list of who you want to benefit from your estate

It'll probably take you just a few minutes to tick off this step – you can even do it right now.

You might include:

- friends
- charities
- your partner or spouse
- children and other family members

These people (or charities) are called your beneficiaries.

2. Write down your assets and roughly what they're worth

Start with assets that are easiest to value:

- savings
- valuable objects, like jewellery or heirlooms

Then move on to the things that change in value. These will be harder to estimate exactly.

They include:

- your pension
- your business, if you own or part-own one
- stock market investments - shares, bonds & funds
- property – your house, plus any investment properties, land, or even a parking space that you own. Remember to factor in the value of any debts secured against your property.

Lastly, think about any sentimental items that you want particular people to have.

Whether you can include your pension will depend on the rules of your pension itself and you'll need to check.

If you can include your pension, estimating its value might take some thought.

The value will depend on your scheme and when you die. Your first stop should be to read the death benefits advice opens in new window from the Pensions Advisory Service.

3. Think about how you want to split your money and property when making your will

There are broadly five types of legacy you can leave.

"I leave £2,000 to my son" – this is called a 'pecuniary bequest'. It means you leave a fixed sum of money.

you own. The way to identify it will be to see what meets that description at the date of death. If there is no jewellery at that time, then the gift will fail.

"I leave half my estate to my brother" – this is a 'residuary bequest'. It means you leave a percentage of whatever your estate is worth after any debts, costs, liabilities, legacies and tax have been paid.

"I leave my share of my house to my wife if she survives me, but if she does not survive me then it will pass to my daughter" – this is a 'reversionary bequest' for your daughter. You can specify what happens if the person you leave it to dies.

"I leave my share of my house to my wife for the rest of her life, and then it will pass to my daughter" – this creates a 'trust' over your share of the house. A trust allows you to say who you would like to benefit from your property immediately after your death (e.g. your wife), and then who you would like to benefit from your property (e.g. your daughter) once the first person you have chosen to benefit immediately after your death has died. This type of gift can easily go wrong, so you will need to get legal advice if you want to include a 'trust' in your will.

If your affairs are comparatively simple (for example, you want to leave everything to your husband), it's likely you'll just use simple residuary bequests.

4. Check if you'll have to pay Inheritance Tax

The Inheritance Tax threshold is currently £325,000 for an individual, or up to £650,000 for a married couple or a couple in a civil partnership.

If your estate is worth more than this, when you die and it passes to a non-exempt beneficiary, such as a child, or doesn't qualify for relief as an agricultural or business asset, then Inheritance Tax (currently 40%), will have to be paid on the excess.

The Inheritance Tax threshold can be reduced or eliminated by certain gifts made in the seven years before death.

A new tax free allowance of £125,000 (rising to £175,000 by 2020/21) provides each individual with an additional allowance to be used against their home, provided they leave it to their children or grandchildren and their estate doesn't exceed £2.35 million.

The allowance can be transferred to a spouse or civil partner if it isn't used up on the first death.

This means when added to the existing £325,000 individual allowance, a couple will be able to leave £1 million without paying inheritance tax by 2020.

The rules aren't straightforward. If you think you're near the limit you need to get more information on how to legally avoid it or minimise the amount – which could save thousands of pounds.

You'll probably want to get professional advice to help with this.

Information provided by

www.moneyadvice.service.org.uk/en/articles/planning-what-to-leave-in-your-will

SO DO YOU HAVE A 'BUCKET LIST?'

About a month ago at the end of a class we were talking about bucket lists' and Lyn asked me to share my thoughts. It seems that often when we're recovering from a health scare we think of all the things we want to do before we run out of time. I don't really have a 'Bucket List', although I am hoping to be able to walk up to Tennyson's Monument this year, but whenever things have been tough I've always longed for 'normal', just being well enough to do the ordinary things.

When I was first diagnosed with heart problems back in 2013 at the age of 56, I was in complete denial about the changes this would bring to our lives. My husband Peter was much more realistic and realised that things would be very different from now on. The medical explanation for my problems was heart failure caused by dilated cardiomyopathy probably caused by a virus that I had contracted sometime during the previous year. After the initial 2 weeks in hospital I was allowed home with strict instructions to rest, not something I've ever been very good at, and I found not being able to do the normal ordinary things very difficult. I remember having a conversation with the heart failure nurse that went something like this.

Me -Would I be allowed to start doing a bit more?

HFN - What do you want to do?

Me - Could I clean the bathroom?

HFN - No!

Me- OK, could I bake a cake?

HFN - No!

Me - Could I do the hoovering?

HFN - NO!

Me -How about the ironing?

HFN - If you can sit down to do it and someone else puts the ironing board up for you, then you can do 10 minutes ironing and then another 10 minutes 2 hours later

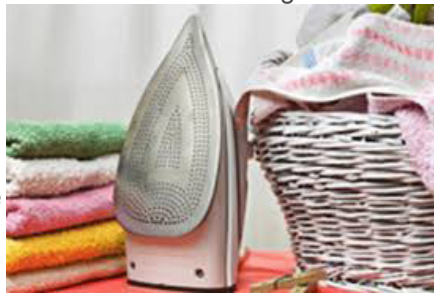
Me - GREAT

HFN - But I do mean 10 minutes

I was so excited to be allowed to do this that I rang my sister to tell her I was allowed to do the ironing, and a number of other people heard the news too! A friend said to me ' why on earth if you have 10 minutes of energy would you use it for ironing? Good question I suppose, but doing normal things had become really important to

me, I suppose I wanted my old life back. Gradually things improved, and for a while we were able to do a few more exciting things than ironing. After 10 months I was allowed to drive again, and soon after that we became grandparents and being well enough to travel to London by train to see our new granddaughter became the next thing to achieve. I guess not a thing most people would put on their must do list, but it felt like an enormous achievement for me.

Towards the end of 2014 my heart condition became more of a problem and in January 2015 I was told that the next stage was to refer me for a transplant



assessment at Papworth Hospital in Cambridge, all a bit of a shock really as although it had been mentioned in passing, I'd been told I was too old so had dismissed it as 'one of those things I didn't need to think about'. May 2015

we were at Papworth for the intensive 2 day assessment, with me being quite convinced they would tell me I was not poorly enough to be considered for transplant. Instead of which I was told that I would be a candidate for transplant and would in fact need to go onto the urgent list which would mean being in hospital at Papworth while I had treatment to improve my kidney function and waited for a compatible heart. More tests followed and lots more questions from Peter and me, then in September 2015 I was admitted to Papworth to await the transplant.



Back to the bucket list. One of the questions I was asked most while I was waiting was "what do you want to do when you get your new heart, are you going to travel the world, are you going to run a marathon, are you going to write a book?" For me there were no big things I wanted to do, getting through the operation and getting home were

pretty important, being able to bake a cake, going for a walk along the old railway line at Yarmouth and being well enough to enjoy playing with our granddaughter all seemed fairly important to me. I received my new heart in Oct 2015 and came home a couple of weeks before Christmas.

Over the last 6 years I've come to the conclusion that for me the 'every day and normal' are really important, and maybe I'll never be a Bucket List person. One thing I am doing which I could never have imagined doing before I was ill, is going to the Fitness Factory twice a week for exercise classes, which are now an important part of my 'normal!'

Sue Young

WILL WEARING A FITNESS TRACKER IMPROVE MY HEALTH?

Devices that measure physical activity, such as pedometers, smartphone apps and Fitbits are a great way to track how much physical activity you do. They can help you get more active, as they enable you to monitor the activity you do and how it changes over time.

You don't have to spend a lot of money – a cheap pedometer is great for measuring walking and running, if that's all you want to track. If you want to monitor your progress over time, look at something that can be linked to other tracking tools, such as a free smartphone app or a mid-price fitness tracker.

If a medical professional has advised you to keep track of your heart rate, talk to your doctor to make sure you choose a suitable device

Fitbit is the best-known brand of fitness tracker but there are many others. If you want to know how active you are,



a device that just measures physical activity is sufficient. Some offer reminders to move if you've been inactive for an hour, waterproof casing so you can wear it for swimming, or a heart rate monitor. Shop around for one that meets your needs.

If you do get a fitness tracker, start by wearing it for a week or so to see how active you are, before you make lifestyle changes. Think about ways to add activity to your day – focus on small changes that are easier to make, which you can build on. This could be walking to work, an evening stroll, cycling or more formal activities such as team sports, exercise classes or swimming (if your device is waterproof). Use the device to see how your activity pattern increases over time and what works for you.

The key thing to remember is that some days you will not do as much activity as you intended – everyone has days like this. When this happens, just reset your goal and have another go the next day.

Taken from BHF Web Site

A TEACHERS DILEMA

A first-year teacher, Miss Brooks, was having trouble with one of her more precocious students. The teacher asked, 'Edwin, what exactly is your problem?'

Ewin answered, ' I'm too clever for the 1st year. My friend is in the 3rd year and I'm cleverer than she is! I think I should be in the 3rd year too!'

Miss Brooks finally had enough. She took Edwin to the Principal's office.

While Edwin waited in the outer office, the teacher explained the situation to the Head. He told Miss Brooks he would give the boy a test. If he failed to answer any of his questions he was to go back to the 1st year and behave. She agreed.

Edwin was brought in. The conditions were explained to him and he happily agreed to take the test.

Principal: 'What is 3 x 3?'

Edwin: '9.'

Principal: 'What is 6 x 6?'

Edwin: '36.'

And so it went with every question the Head thought a bright 3rd year should know.

The Head looks at Miss Brooks and tells her, 'You know, I reckon Edwin CAN go into the 3rd year.'

But Miss Brooks is still sceptical of the little so-and-so and says to the principal, 'Not so fast, let me ask him a few questions..'

The principal and Edwin both agree.

Miss Brooks asks, 'What does a cow have four of that I have only two of?'

Edwin, after a moment, says, 'Legs.'

Miss Brooks: 'What is in your trousers that you have but I do not have?'

The Head wondered why would she ask such a question.

Edwin replied: 'Pockets.' to the Principal's great relief.

Miss Brooks: 'What does a dog do that a man steps into?'

Edwin: 'Pants.'

By now, the Head is sitting forward with his mouth hanging open.

Miss Brooks: 'What does a man do standing up, a woman does sitting down and a dog does on three legs?'

Edwin: 'Shake hands.'

The Principal is now trembling with apprehension as Miss Brooks asks the last question.....

Miss Brooks: 'What word starts with an 'F' and ends in 'K' and indicates a great deal of heat and excitement?'

Edwin: 'Firework.'

The Head breaths a huge sigh of relief and tells the teacher, "Put the little swine in 5th-year, I got the last seven questions wrong myself."

TRAVEL INSURANCE FOR PEOPLE WITH HEART CONDITIONS

We have recently been sent some information from Freedom Insurance Services Ltd. They specialise in travel insurance with people with medical conditions. We have not tried them but we thought that we should inform you of their existence. They can be contacted on their web site www.freedominsure.co.uk or telephone 01223 454 290.

KEY BENEFITS

Freedom Travel Insurance policies are designed to include cover for declared pre-existing medical conditions and will protect you, subject to policy terms and conditions, in the event of:

- Cancellation or Curtailment - Up to £3,000
- Medical Expenses & Repatriation - Up to £5,000,000
- Replacement of Lost Medication - Up to £200
- Baggage - Up to £1,500
- Personal Money - Up to £250 cash (£50 for under 16s) and up to £250 all other personal money and documents
- Single Article limit - £250
- Personal Accident - Up to £15,000
- Personal Liability - Up to £2,000,000
- Travel Delay - Up to £100
- Travel Disruption Cover is included as standard Policy Excess - £75
- Help is never far away with their 24 Hour Medical Assistance helpline.

They base their quotes on your current medical status at the time of taking out your policy. Freedom Travel Insurance is underwritten by AXA Insurance UK plc.

MEDICAL TRAVEL INSURANCE FOR PEOPLE WITH PRE-EXISTING MEDICAL CONDITIONS

Freedom Insurance specialise in providing medical travel insurance to people with pre-existing conditions including cancer, diabetes, epilepsy, heart conditions and many more. They aim to provide cover to protect you should an emergency arise on holiday.

They base their quotes on your current medical status at the time of taking out your policy. If your medical circumstances change before you travel, provided you are still fit and well to travel there will be no additional price to pay. However, it's a good idea to let them know. When your renewal is due they we review your medical details again at which time there may be an impact on your renewal.

POTENTIAL NEW HEART ATTACK TREATMENT

Scientists we help fund have found a potential new drug for treating the heart damage caused by a heart attack by targeting the way the heart reacts to stress.

The research team, led by BHF Professor Michael Schneider at the National Heart and Lung Institute, Imperial College London, used stem cells to grow heart tissue and mimic a 'heart attack in a dish', and were able to block the chemical signals within heart muscle that lead to cell death and heart damage.

The team are the first to discover that a protein called MAP4K4 plays a central role in how heart muscle cells die off as a response to the stress of a heart attack. They have managed to develop a potential drug that targets this protein and can minimise damage after a heart attack by 60 per cent, in mice.

A heart attack happens when a blood clot blocks one of the main coronary arteries, the blood vessels supplying the heart muscle. The heart is starved of oxygen and nutrients and the muscle produces stress signals that ultimately cause heart cells to die. This means that the heart can't pump effectively and this can lead to heart failure. Heart failure is a debilitating condition that makes everyday tasks like climbing stairs, or even getting dressed, exhausting.

Notoriously, potential treatments from prior research into protection from heart muscle death have not proven effective in large clinical trials, but the team believe targeting this new protein, and testing their results in human heart tissue grown from stem cells before moving to trials in heart attack patients, could be the key to success in this area.

These successes have led to a family of potential new drugs being developed for heart attack, with the next steps including rigorous safety testing and a clinical trial, which could start as early as 2021-22.

BHF Professor Michael Schneider who led the research at the BHF Centre of Regenerative Medicine said:

"There are no existing therapies that directly address the problem of muscle cell death and this would be a revolution in the treatment of heart attacks.

"One reason why many heart drugs have failed in clinical trials may be that they have not been tested in human cells before the clinic. Using both human cells and animals allows us to be more confident about the molecules we take forward."

Professor Metin Avkiran, our Associate Medical Director said: "Coronary heart disease is the major cause of heart attacks and it kills 180 people in the UK each day. Finding a drug that could limit the death of heart muscle during and after a heart attack, and stop the decline towards heart failure, has been a target of research for decades. But, despite a number of promising candidates in the past, we still have no drugs that can do this in routine clinical use.

Taken from the British Heart Foundation Web Site.

THE BODY BEAUTIFUL

In the mid -fifties, when I was younger, fitter and more bendy, I trained with an Olympic gymnastics class at the YMCA - London.

At the other end of the gym was a regular group of body-builders, muscles big and shiny, who had developed a display team, centred round a small dais with a quick flying curtain, on which a poseur would position himself and at the pull of a lever, the curtain would fly apart, displaying his torso to the amazed audience.

The team became very well known, and were invited to display in a famous nightclub in Amsterdam.

The smallest member of the team, Dave, had a special act, where he poised in the style of well known statues, "The Thinker" "The Discus Thrower" etc. This proved to be very popular, and he was chosen as the grand finale.

All went well in Amsterdam and Dave was performing his poses, the curtain flying backwards and forwards in great style. Having completed his posing, Dave though he would amuse his mates before the main curtains opened. Pushing down his briefs, he delicately held his penis between his thumb and finger, thrust his hips, and artistically held his spare hand up behind his tilted head.

The stage hand thinking this was an extra pose, promptly opened the curtains, displaying Dave and his spotlighted equipment to the whole audience.

The crowd went wild - clapping and cheering him for an encore. Dave realised that they probably thought he was paying homage to the famous "little Boy Statue", so politely smiled and nodded to the operator to close the curtain.

Now this was in the "pre-electronic age" when snail mail ruled, nevertheless, the story of Dave's display went the length and breadth of Britain at lightning speed. He found he could endure the fame quite easily, but to his chagrin, thereafter he was always known as "Wee Willy".

Derek Harvey

GRIEF

I wish I could go to the supermarket
And buy some motivation
Along with a pound of enthusiasm
And a bag of concentration

On the "down" days I get all three
But its normal I understand,
Grief does this to you, you see
Its very underhand.

Hazel Tinson 2018

I'M VERY WELL THANK YOU

There is nothing the matter with me,
I'm as healthy as I can be,
I have arthritis in both my knees,
And when I talk - I talk with a wheeze.
My pulse is weak, and my blood is thin,
But - I'm awfully well for the shape I'm in.

Arch supports I have for my feet,
Or I wouldn't be able to be out on the street,
Sleep is denied me night after night,
But every morning I find I'm alright.
My memory is failing, my head's in a spin,
But - I'm awfully well for the shape I'm in.

The moral is this - as my tale I unfold,
That for you and me who are getting old,
It's better to say " I'm fine " with a grin,
Than to let folks know the shape we are in.

How do I know that my youth is all spent ?
Well, my ' get up and go ' has got up and went.
But I really don't mind when I think with a grin,
Of all the grand places my ' got up ' has bin.

Old age is golden I've heard it said,
But sometimes I wonder as I get into bed,
With my ears in a drawer, my teeth in a cup,
My specs. on a table until I get up,
'Ere sleep overtakes me I say to myself,
Is there anything else I could lay on the shelf ?

When I was young my slippers were red,
I could kick my heels right over my head,
When I was older my slippers were blue,
But I still could dance the whole night through,
Now I an old my slippers are black,
I walk to the shop and puff my way back,
I get up each morning and dust off my wits,
And pick up the paper to read the ' Obits ',
If my name is still missing I know I'm not dead ;
And so I have breakfast and - go back to bed.

Constance O'Neon, 1953

BIRTH CONTROL

Mrs. Donovan was walking down O'Connell Street in Dublin when she met up with Father Flaherty.

The Father said, 'Top o' the mornin' To ye! Aren't ye Mrs. Donovan And didn't I marry ye and yer Hoosband two years ago?'

She replied, 'Aye, that ye did, Father.'

The Father asked, 'And be there any wee little ones yet?'

She replied, 'No, not yet, Father.'

The Father said, 'Well now, I'm going to Rome next week And I'll light a fertility candle for ye and yer hoosband.'

She replied, 'Oh, thank ye, Father...'

They then parted ways..

Some years later they met again.

The Father asked, 'Well now, Mrs. Donovan, how are ye these days?'

She replied, 'Oh, very well, Father!'

The Father asked, 'And tell me , have ye any wee ones yet?'

She replied, 'Oh yes, Father!

Two sets of twins and six singles, Ten in all!'

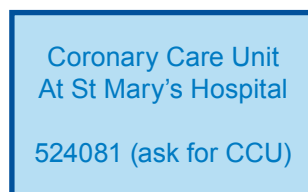
The Father said, 'That's wonderful!

And how is yer loving hoosband doing?'

She replied, 'E's gone to Rome to blow out yer bloody candle.'



OR



Health Questions

Answered by NHS 111 or your Coronary Care Unit

If you are at all worried by an ache or pain which you do not understand – professional help is at hand, just telephone:

'They will take the worry away'

Isle of Wight **NHS**
NHS Trust

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The next issue of Ticker Tape is due out in October 2019. The latest date for copy to be included in this issue is September 30th 2019