

HEALTH

New device helps palsy victims

POSITIVELY BLACK

Life's about learning and recognizing our blessings

By Junious Ricardo Stanton
Special to Sentinel-Voice

Writer Tonya Bolden once said, "you can handle life better if you make it a policy to learn from your mistakes and keep a record of your blessings." This is a profoundly useful statement. Surely all of us want to be able to handle life better, to get what we want out of life, to be able to weather its storms and rough spots and be able to roll with its punches. Life can be exasperating and exhilarating with all its ups and downs. All of us will experience disappointment, setbacks as well as success and great elation. Handling life means living it on your own terms as much as possible, being in the divine flow, being on task and on purpose. The key to handling life and living an effective and purposeful existence is taking a proactive approach rather than merely sitting around letting life happen to us.

This can be an arduous process because there is so much in life over which we have no control. Things happen without our input, consultation, prior planning or approval. That's just the way life is. Learning from our mistakes makes us wiser. Wisdom is more than mere knowledge. It is using knowledge aright, it is discerning right from wrong and acting accordingly. Who among us has not made any mistakes, or errors of omission and commission? How many of us have actually taken the time to learn from our mistakes

and miscues? How many of us examine our lives to look at where we are, how we got there and where we are going? Someone once said, "the unexamined life is not worth living." By examining our lives, looking at our mistakes. I believe we can get a better understanding of our blessings.

Blessings come in many guises. They don't always come in neat packages marked "blessing!" They are the miracles encoded in our mundane experiences. Many times what we perceive to be a disaster or major upheaval is actually a blessing, an opportunity to alter our lives for the better. As I have said on many occasions, "there is always a message in a mess, a lesson in a loss and an ordination in every ordeal; if we only take the time and make the effort to discover them."

Life offers many opportunities to learn about ourselves and discover what we are made of. Life is a learning experience. Many times we learn more when things don't go according to our plans or the way we want than when things sail smoothly along. Problems are challenges that force us to use our inner resources and ingenuity to find ways to solve them. Along the way we will make many mistakes. Learning from our mistakes can be a painfully edifying experience. Look at your mistakes as lessons. Sift through the ashes of your failures. Instead of being embarrassed or ashamed, learn

from them so the experience doesn't happen again. Pay attention to what's going on in your life, especially when you find yourself in a rut or slump. Look for the causal factors or the elements that have contributed to your predicament. Figure out how you got there and what it will take to turn your life around. Most importantly look at the situation as a blessing or a door that will lead to new opportunities for personal growth and development.

In case you haven't noticed no one is perfect. Everyone makes mistakes and everyone
(See Blessings, Page 8)

Eye care company names first black executive

Bausch & Lomb has named Daryl M. Dickson as its senior vice president - human resources. Dickson is the first African-American in Bausch & Lomb's 143-year history to become an officer and senior-level executive serving on the Management Executive Committee, the key internal decision-making body of the global eye-care company.

Dickson joins Bausch & Lomb from The Quaker Oats Company, based in Chicago, where she has been vice president - human resources for the 2.8 billion Quaker Foods business unit. Prior to joining Quaker, she held senior human resources management positions with AlliedSignal, Inc., in their Aerospace and Automotive Sectors.

"Daryl Dickson brings to Bausch & Lomb a wealth of

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A device that delivers medication directly into the spinal fluid is helping loosen the overly-tensed muscles of cerebral palsy and brain injury patients.

"Patients suffering from severe muscle contractions, or spasticity, have a hard time sitting or using their arms or legs," said Dr. Richard Simpson, associate professor of neurosurgery at Baylor College of Medicine in Houston. "Lessening these involuntary contractions makes caregiving easier and makes it easier for patients to do some things on their own."

The technique, called intrathecal baclofen therapy, involves implanting a hockey-puck size device in the abdomen between the hip and

rib. A catheter or small tube runs under the skin from the device to the spinal cord's intrathecal space, the area surrounding the spinal cord.

"The medication is inside the device which is programmed to deliver the prescribed amount at certain intervals," Simpson said. "We can vary the level to what best suits the patient."

The device holds enough medication for about 90 days and is refilled easily in the physician's office.

"The pump is refilled by injecting the medication through the skin into a soft opening in the device," Simpson said.

Good candidates include patients with spasticity that cannot be controlled with other therapies or patients at risk for

other medical problems due to uncontrolled spasticity.

Simpson adds that the device can be used in children or adults as long as the patient weighs at least 40 to 45 pounds. Benefits vary depending on the severity of the muscle contractions and the injury.

"For patients with mild problems, it may become easier to use a wheelchair. Or, they may be able to use crutches or even go without crutches," he said. "Tasks we take for granted — like feeding ourselves and getting to the bathroom — may now be possible."

Caregivers of more severely injured patients will find it easier to sit patients up and to prevent bed sores. These patients also may have improved bowel and bladder control.

Potential candidates are given an injection of the medication directly into the spinal fluid to test its effectiveness. If there is a good response, then they can receive the implant. Surgery requires at least a one-night stay for observation.

"It is important to have realistic expectations," Simpson said. "The pump cannot make the problem go away, but it can make the condition more livable."

Study finds women with disabilities most oppressed

Special to Sentinel-Voice

A new study reveals the damaging effects of social attitudes on women with disabilities.

"Previous research indicated that women with disabilities constitute our nation's most severely oppressed minority," said Dr. Margaret Nosek, principal investigator for the study and director of the Center for Research on Women with Disabilities at Baylor College of Medicine in Houston. "Now we have more information about what factors increase their ability to beat the odds."

The four-year study involved more than 1,000 women, about half with and half without physical disabilities.

Among the findings:

- Women with disabilities had limited opportunities to establish romantic relationships. The large majority, 87 percent, of the women had at least one romantic relationship or marriage. However, only 52 percent were involved in a serious relationship at the time of the study, versus 64 percent of women without disabilities.

- Self-esteem in women with disabilities was more strongly influenced by social and environmental factors than by the mere fact of having a disability. For women who were not

working, or in a serious romantic relationship, or who had experienced physical or sexual abuse, self-esteem was much lower.

- Abuse was a serious problem for women with disabilities. They had even fewer options for escaping or resolving the abuse than women in general. About 60 percent of women with and without disabilities had experienced emotional, physical or sexual abuse, but women with disabilities experienced abuse for longer periods.

- Women with disabilities encountered serious barriers to receiving general and reproductive health care. Thirty-one percent of the women with disabilities were refused care by private physicians because of their disability. According to Nosek, who is a wheelchair-user, few of these problems are directly related to disability. They are more a result of society's negative stereotypes about the abilities and potential of women with disabilities.

"Self-esteem seems to be the critical element," she said. "If you believe that you are a woman of value, you gain strength to forge your way through the most stubborn of barriers."

The Center for Research on Women with Disabilities study was funded by the National Institutes of Health and the Centers for Disease Control and Prevention.

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