



Bruno “Bytes”

November, 2018

From Dr. Richard L. Bruno, HD, PhD
Bits and Tidbits from the Post-Polio Coffee House

On the topic of “White Spots” in the Brain (11/2018)

Original Post: Would an MRI be able to tell the difference between polio brain and Alzheimer’s? Sometimes I feel overwhelmed by a feeling “fog” and “fatigue.”

Dr. Bruno’s Response: Brain “fog” and “fatigue” are the most common PPS symptoms. The “white spots” we found in fatigued polio survivor’s brains (indicating poliovirus-damage, not dementia) are easily differentiated from any other condition including MS (where there aren’t white spots but patches of white) and dementias (where, for example, cortical atrophy (shrinkage) can be seen).

Any polio survivor who feels foggy or fatigued during the day should see their physician, and have a physical that includes blood work and a sleep study. Then your doctor will tell you if you need any other test.

We can all develop white spots the older we get due to high blood pressure and other factors. See The [ENCYCLOPEDIA of Polio and PPS](#) for articles about Fatigue.
<https://www.papolionetwork.org/encyclopedia.html>

On the topic of New cases of Wild Polio (11/6/2018)

Dr. Bruno’s Original Post: The poliovirus just doesn’t get the message. It’s not wanted here...or anywhere!

Polio: Wild poliovirus cases in 2018 top 2017 total

By NEWS DESK
November 1, 2018

With the reports of three additional wild poliovirus type 1 (WPV1) in Afghanistan, bringing the total global cases to 25, it has eclipsed the total WPV1 cases for all of 2017 (22).

The three new cases have been reported from the Maywand district, Kandahar province, from Purnus district, Nuristan province, and from Nawzad district, Hilmand province. This brings the total cases reported in Afghanistan to 19 (Pakistan has reported 6 cases this year).

The third polio endemic country, Nigeria, has not reported any WPV1 cases in more than two years. The Global Polio Eradication Initiative (GPEI) says:

“Nominal variations (up or down) in the number of newly-reported cases at this point of the polio endgame – although tragic for the affected children and their families – are not operationally overwhelming, especially considering the population size in the 3 remaining endemic countries (upwards of 90 million children aged less than five years). However, confirmation of even a single polio case anywhere points to remaining vaccination coverage gaps which must be filled, to achieve eradication.”

Concerning circulating vaccine-derived poliovirus cases, Papua New Guinea reported three new cases of circulating vaccine-derived poliovirus type 1 (cVDPV1), bringing their total to 21. The Democratic Republic of Congo saw one new case of circulating vaccine-derived poliovirus type 2 (cVDPV2). The total cases in DRC is now 16.

Finally, Nigeria reported two new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2), bringing their total in 2018 to 19.

<http://outbreaknewstoday.com/polio-wild-poliovirus-cases-2018-top-2017-total-36943/?fbclid=IwAR2gsCn743yle-aVk3KxWmbYaupphaTJnDaextEXUyKo70357WJoDadE5fE>

On the topic of “New” Weakness and Chemotherapy (11/13/2018)

Original Post: I was wondering if you had any info about the metastatic breast cancer drugs: Faslodex (fulvestrant inj.) and Ibrance (palbociclib PO). I have been taking them since Feb. 2018. More recently I have noticed a marked increase in pain and weakness in my legs, arms & back. I saw my post-polio doctor in October. (I have been seeing him for many years). He did muscle strength testing and I have gone from 4 down to 3+ since May of 2018. The weakness was so wide spread that he feels it is from the chemo not the polio.

Dr. Bruno’s Response: You need to talk to your oncologist and you probably need a nerve conduction velocity study to see if the chemo is affecting the covering of your nerves, which likely would be associated with changes in sensation, numbness tingling.

Additional Post: Yes, I have numbness in my hands and feet, my finger tips are especially numb. I also have a shaking in my hands when I try to do something, like writing, the computer mouse and like that.

Dr. Bruno’s Response: Describe all of your symptoms to the oncologist and ask about the possibility of changing the dose, type or timing of the chemo.

On the topic of Gamma Globulin Infusions (11/15/2018)

Original Post: I read something about gamma globulin infusions. Does anyone have scientific information about this?

Dr. Bruno’s Response: Look for IVIG and XEPOL in the articles section of ENCYCLOPEDIA of POLIO & PPS (Under “Treatment”) <https://www.papolionetwork.org/brunoarticles.html>

On the topic of “New” symptoms after a New Wheelchair (11/16/2018)

Original Post: I’m using my wheelchair more to conserve, but it’s possible I’ve introduced a new problem. A week ago I was in my manual wheelchair (with a new cushion prescribed by my PT) for 12 hours (a long period for me). That night I was surprised the twitching on my AFO thigh was severe even with the usual alprazolam. Now I have a deep pain in that same AFO leg buttocks and down the side of my thigh. I get some relief if I use my electric wheelchair and go into the zero gravity position and I press deep into the butt muscles; it feels like a knot.

- Are wheelchair users who use just the upright sitting position more prone?
- Could long sitting cause more nighttime twitching on the thigh?

Dr. Bruno’s Response: Posture is EVERYTHING in a wheelchair! 12 hours sitting a long time, and apparently with the wrong cushion. Try heat and gentle stretching. Talk to your doctor about low dose valium if the spasm doesn't go away.

Are wheelchair users who use just the upright sitting position more prone to muscle pain?

Sitting upright takes muscle work, so yes: POLIO RULE #73: It is better to sit than stand, better to lie than sit!

Could long sitting cause more nighttime twitching on the thigh? Yes!

On the topic of Low Carb Diets (11/17/2018)

Original Post: On “Today Weekend” Dr. John Torres reported & commented on Low Carb Diet Research (source: BMJ, a British organization) including what type of carbohydrates matter. We need carbs to help brain & muscles. There was a graphic of carbs to avoid: “white bread, white rice, potato products, low fat cookies & crackers.”

Additional Post: You do need “good” carbs. But many low fat things have added sugar. That's a reason why I pay more attention to nutrition info on package - usually on back - than what's bragged about on the front. There are carbs in many fruits and vegetables.

Dr. Bruno's Response: See the low carb/higher protein "POST-POLIO DIET" at ENCYCLOPEDIA of POLIO & PPS <https://www.papolionetwork.org/encyclopedia.html>

On the topic of Muscle Spasms (11/20/2018)

Original Post: Some nights my legs go into spasm. I have no clue why it happens. Last night it took 4 hours for it to stop. Does anyone know what causes this?

Dr. Bruno's Response: Overuse during the day and cold temperature surely can cause nighttime muscle spasms. See the section on “Muscle Pain/Weakness” in the [Articles section](#) of the ENCYCLOPEDIA of POLIO AND PPS

<https://www.papolionetwork.org/brunoarticles.html>

Additional Bruno “Bytes” are available for you to share in the Encyclopedia of Polio and Post-Polio Sequelae.

Go to: <http://www.papolionetwork.org/bruno-bytes.html>

Scroll down the page (through the Current Month posts).

Previous months are located there, and are available by “clicking” on them, in easily printable PDF format

Would you like to see Dr. Bruno in “action”? Check out the [Video Library](#).

Looking for a particular topic? Check out the Bruno Bytes [“Index by Subject”](#)