

Post-Polio- Syndrome. Ruth's Journey.

The Story of My Wife – Ruth Ann Snyder Anselm

By Paul Anselm



In October 1955 my wife Ruth Ann, 8 months pregnant with our second baby, started to experience symptoms indicating a problem with the pregnancy. She was admitted to the local hospital maternity ward. Twenty four hours later after four doctors watched her fall to the floor when attempting to get out of bed for them to examine her, they determined that no trouble existed with the pregnancy. She had Polio. Ruth Ann had not (on Doctors orders); received the Salk vaccine, which was newly available at this time. We were told that the other mothers in the maternity ward were never informed that the mother occupying the bed among them had just been diagnosed with Polio.

For the first ten or 15 days Ruth Ann's condition was really unknown. Those days seemed endless. She was transferred from Montgomery Hospital to the Polio "unit" of Sacred Heart Hospital in Norristown, Pa. We were happy when the Iron Lung that was strategically placed outside her room door was removed , as it appeared that Ruth was not going to need it. She had some difficulty breathing and swallowing. Her legs were affected and she was unable to stand or walk. The daily treatment was of course heated compresses and physical movement of the affected parts of her body by staff persons. Our second baby was born on time and thankfully not affected by her illness. "Momma Ruth" was very upset that she was not going to be able to take care of our new baby girl. Fortunately my Aunt Laura offered to take care of her and did so for the next 8 months until Ruth Ann was able to care for her daughter herself. Aunt Laura and the baby made many trips to Sacred Heart so that Ruth could see her out of the hospital windows. After 3 months, Ruth Ann was allowed occasional home overnights and of course the baby was always there.

After 6 months Ruth Ann was finally released and came home. Almost daily therapy nurses and aides were present to continue her treatments. Her condition at this time was as some walking with a cane with a brace on her right leg, weakness in her arms and her in her ability to walk and lift. She was very much restricted. In 1956 she had a left ankle arthrodesis surgery (surgical immobilization of a joint by fusion of the adjacent bones).

Over the years Ruth walked fairly normally, having only a slight limp. We were blessed to have two more daughters. Of course, chasing the little people was somewhat challenging but Ruth managed. Our children still talk about what would happen if you tried to run away from mother! She loved to sew and always made our girls their Easter dresses. I always loved taking their picture prior to going to church on Easter morning. We were one of the few families in the neighborhood with a 2nd car. She would pile in the children and their Moms for store trips. Afterwards, we never knew what we would find in the back seat ! She rode a three wheel bike (with a motor assist) in Ocean City, NJ. Ruthie loved the bike rides with the whole crowd, often leading the way with 7 or 8 children in tow. She would manage a "bunch call" at intersections, lining them up in single file.

Ruth experienced a totally normal life as a public school teacher and then the Managing Director and creator of day care centers for the Central Montgomery County YWCA, until her retirement in 1985. During this period, it would have been difficult to establish the fact that Ruth was somewhat handicapped in mobility and actions. It appeared that she remained "stable" until approximately 1995 when some minor stamina conditions started to appear and she began to use a manual wheelchair for shopping and other similar activities. She had a cane, but rarely used it. Over the next 10 years, Ruth's mobility decreased noticeably and she switched to a power wheelchair for normal activities .

In the 80's, after our move to Ocean City, Ruth's involvement with our Fire Safety Inc. business was a plus. We would be training health care personnel that included group homes and major hospitals. She, sitting in her power wheel chair would introduce us and explain what we would be covering in that particular training session. At the end of her remarks she would pretend that her chair was not operating and announce, "is that the fire alarm sounding, will someone help me"? I would enter the picture and frankly ask all attendees what to do and where to go to get her out safely. Over the years this part of the act really became important as not to many were prepared for the reality of that problem.



We always questioned new medical persons treating Ruth as to their knowledge of Post-Polio Syndrome (PPS) and it was always very evident that not many of these professionals had treated patients with this condition. (Of course they would all say that they were "very knowledgeable" about the topic).

Ruth and I tried to contact as many "experts" on PPS that we could. We had her evaluated by Dr. Richard L. Bruno, HD, PhD., Director of The Post-Polio Institute. We were within reach of the Englewood, NJ Clinic, where his team confirmed the diagnosis. Her PPS diagnosis was also confirmed by a recognized expert from Bacharach (a local hospital).

From 2005 to 2015 (when she died), Ruth traveled a long and slow decline in a number of health issues. During this time, she developed Bronchiectasis (a condition in which the lungs' airways become damaged, making it hard to clear mucus) and minor swallowing issues. By 2010 it was necessary to have a new power chair. Her ability to transfer was now of critical concern and she needed additional assistance at all times. Medical issues associated with breathing required her to have specialized breathing equipment. She also developed Diabetes.

In October of 2012 our home was seriously damaged by hurricane Sandy and we relocated to one of our daughter's homes for a period of 5 months until our home was restored to normal. On a positive note, one hears constant criticism of FEMA. When they came in to assess the damage of our home, the inspector noted the handicapped entrance and assistive devices. I was concerned we were headed into a REAL problem with our claim. Instead, he informed me that his wife was disabled as well, understood the issues and would "elevate" our claim status.

We returned to our reconstructed home in March 2013. For the next two years her ability to do things "normally" prior to this period seemed to have diminished greatly. Things such as assisting in the kitchen, house cleaning, laundry and other household activities that could be done from her power chair became less important and more difficult. She still maintained a control of these items but left the actual doing to others.

In retrospect, our children saw signs of Ruth's behaviors that today may have been recognized as additional signs of PPS. She was no longer actively involved in the things she loved such as her passion in continuing work on her genealogy research projects. She was now rather "quiet" at family gatherings. The overwhelming fatigue of Post-Polio Syndrome had set in.

Early July 2015 Ruth awoke one morning with severe pain at the base of the spine. She was unable to sit up, even in her wheelchair. At this point in her life, her mobility was for all practical purposes gone. MRI results indicated past problems but nothing current that may be causing the existing problems. Attempts were made by the therapy staff at the rehabilitation center to work on her arms and upper body with little or no results. At this point Ruth still had no leg or lower body mobility. It was breaking my heart to see my wife decline so rapidly.

I had asked every doctor, nurse or aide, taking care of Ruth what they knew about PPS. When

I asked one physician., he immediately slammed his hands together with a loud slap noise and said: “It comes on you just like that!” I knew then that he knew nothing about the effects that Polio had on my wife. He never returned to her room again.

With my wife dying beside me, we started arrangements to transfer her to the Hospice unit. The Social Worker explained that the “time wasn’t right”. I asked her what she knew about PPS conditions. Sadly, she knew nothing. Dr. Gary Raab, our family physician in Ocean City, had become very knowledgeable on the topic of PPS. He was one of a very few medical persons in our area to do so. As a result, I worked with Dr. Raab to complete what we knew were the necessary conditions and terms. Afterwards, the social worker had no choice but to obtain the necessary approval. Ruth was admitted to the Hospice unit. That same social worker later admitted to me that prior to this, her knowledge of PPS was only the term “PPS”. Nothing else.

Hospice was wonderful for my wife’s remaining days. One day, she was more “with it “ than any period of the last weeks. When I arrived in the morning she said “wait until you hear what I did. I talked with the Lord and I told them to stop all of my IV feedings, medicines and anything else hooked up to me.” I simply responded “that’s good dear”. During the next 24 hours Ruth had one on one good-bye talks with me, all of our daughters and most of our many grandchildren.

The last day wasn’t easy for my wife. My Ruth passed away at 8:38 that evening. Her Immediate Cause of death as listed on her Certificate is “Progressive Weakness with Post-Polio Syndrome”.

Ruth and I were married for 63 years. I’m fascinated by the term “caregiver”. I never saw myself that way. I saw myself as her husband. We were blessed with 4 daughters, 8 grand children and 9 great-great grandchildren. My wife lived an active, loving and meaningful life. Polio was just a part of that. Many people remember my wife as the fascinating lady, although in a wheelchair was always smiling, helping and caring for those she loved. She was a powerhouse in guidance, direction, knowledge, skills and education. I love remembering folks telling me that after they met her, their reaction had been “Wow, who WAS that lady”? She loved strong, and her love lives on.

It is my hope in telling this story, that other Polio Survivors and their families no longer have to work with a professional community that is unaware of the terrible effects of Polio.