

## The Newsletter of The Scleroderma Society (UK)

### A Word from Kim

I'm going to keep this very brief as we have a packed newsletter. In September we attended the Skin Care Information Day in Blackburn. It was great to see Janis Waller and new member Sheila Proctor. Caroline Walker has been busy attending various meetings, which range from telephone helplines, Health Coalition Initiatives to Specialised Health Care. In November we both went to the Cambridge Skin Care Information Day and I attended a Musculoskeletal One-day conference at Earls Court. The Standards of Care for Connective Tissue Conditions is underway with the first meeting being held in December. We also had a successful full committee meeting in December.

Many thanks to every one who sent Christmas cards, News and Donations. I do hope that you will all have had a wonderful Christmas and I wish you a Peaceful New Year! Take care

**Lol Kim**

### WRITTEN DECLARATION FOR RHEUMATIC DISEASES, WD41

In the Summer issue of "Scleroderma News" we published the Written Declaration for Rheumatic Diseases, WD41, which asked the European Union to address the fact that arthritis/rheumatism needs to be acknowledged as a priority issue within the next 7<sup>th</sup> Research Framework Programme but also in the field of public health in general. In order for WD41 to be successful a majority of Members of the European Parliament had to sign the declaration in Strasbourg by the 5<sup>th</sup> October 2005. This happened and 406 MEPs signed the declaration – the second highest support for a declaration in the history of the European Parliament. The excitement of this success is being shared with more than 100 million people in Europe – people with arthritis/rheumatism but also with their families, caregivers and health professionals who are all determined to improve the quality of life for people with rheumatic diseases. Neil Betteridge, the Chair of PARE Manifesto Steering Group, writes "EULAR, the EULAR Social Leagues and their campaigning arm PARE Manifesto will continue to concentrate their efforts to lobby on a European level".

For more information see the PARE Manifesto Website [www.paremanifesto.org](http://www.paremanifesto.org)

### CHARITY BALL

A Charity Ball in aid of Scleroderma is to be held on 22<sup>nd</sup> April 2006 at the Ramada Leicester Hotel Leicester. The cost is £25 per person. There will be a buffet and entertainment. There is also reduced room rate for people wishing to stay in the hotel overnight. To book or for more details phone Yun Wah on 07960 514207

### CHRISTMAS CARDS

The Christmas cards have gone well this year. Many thanks to those who also sent donations with their orders. We have some lovely designs for our 2006 cards but there is still time to put your designs forward. The selection will be made at the committee meeting on the 25<sup>th</sup> February. So please get out your paints and brushes and send your pictures to me a week before the committee meeting.

***A Happy New Year to you all.***

Anna Clark, 28 Hertford Road, Digswell, Welwyn, Herts. AL6 0DB

### THE QUARTERLY NEWSLETTER OF THE SCLERODERMA SOCIETY

CHARITY REGISTRATION NUMBER:286736

The Scleroderma Society 020 8961 4912

Helpline Hours 9.00 till 9.00 7 days per week.

[www.sclerodermasociety.co.uk](http://www.sclerodermasociety.co.uk)

[info@sclerodermasociety.co.uk](mailto:info@sclerodermasociety.co.uk)

*The Scleroderma Society is not responsible for any information, news or views that appear in this newsletter.*

**Please send YOUR articles, etc.** for the next issue to Carol Sanders, The Laurels, Westport, Langport, Somerset. TA10 0BN Tel: 01460 281305  
e-mail [roy4sanderson@aol.com](mailto:roy4sanderson@aol.com)

**Closing date for contributions 17th March 2006**

## Hampshire

Contact: Liz and Steve Holloway,  
80, St. Agnes Place  
Chichester PO19 7TU

Tel: 01243 539466 Email  
[lizemail99@btopenworld.com](mailto:lizemail99@btopenworld.com)

Many thanks to Carol and Steve Todd for once again hosting our November meeting. There were not many of us there but it was a good afternoon. Marion Walton brought some beautiful knitted items (including very popular ponchos) to sell in aid of the society and Celia Graham brought three lovely Christmas log decorations to be part of the raffle. Thank you both very much indeed.

The next meeting will be on Wednesday 17<sup>th</sup> May 2006 at Queen Alexandra Hospital, Portsmouth, at 7.00 pm for 7.30 pm, probably in the same room as last year. That was the seminar room on ward D4. Please phone us nearer the time for confirmation. Colin Beevor has kindly agreed to talk to us about his job as a Modern Matron at QAH – over and above the marvellous help he is to the Hants group every year.

We hope you enjoyed Christmas and will have as happy and as healthy a New Year as possible. All best wishes to those who are not so well at the moment, especially Jill Sloggett who has been very poorly and much missed at our meetings.

Steve and I are celebrating the recent birth of our first grandson, Samuel George (Sam) to our daughter on 30<sup>th</sup> November. Looking forward to seeing you in May.  
Liz and Steve

*If anyone has any news to go into this section of the newsletter please send details preferably via email to Kim (details above) or to Carol and Roy email: [roy4sanders@aol.com](mailto:roy4sanders@aol.com)*

# Area News

## Volunteer Local Contacts needed

The Society would love to have more local contacts in and around the country to help people with scleroderma meet up at a local level. If you would like to start a local group and want to know what it entails why don't you contact one of our local group contacts for more information.

## London & South East

Contact: Kim Fligelstone,  
3 Caple Rd, Harlesden,  
London. NW10 8AB  
Tel: 020 8965 4094

Email:

[info@sclerodermasociety.co.uk](mailto:info@sclerodermasociety.co.uk)

Dr Gerladine Brough gave a really interesting talk on calcinosis, the synopsis will appear in the next newsletter. Sadly some of our regulars could not attend for one reason or another. We discussed meeting earlier in the next winter before it becomes too cold and dark. The next meeting is on March 9<sup>th</sup> at 7.30 in the Rheumatology Library on the Lower Ground Floor (Opposite the main lifts) at the Royal Free Hospital, Pond Street, Hampstead, NW3 2QG. Nearest tube: Belsize Park on the Northern Line and Silver Link at Hampstead Heath.

## Edinburgh and East Scotland

Contact: Frances Bain,  
5 Swanspring Avenue,  
Edinburgh.  
EH10 6NL

Tel: 0131 477 1122

[iainandfrancesbain@msn.com](mailto:iainandfrancesbain@msn.com)

## Glasgow and West Scotland

Contact: Betsey Stephenson,  
23 First Avenue,  
Bearsden, Glasgow. G61 2JD  
Tel: 0141 942 0723

## South Wales

Contact: Belinda Thomson  
39 St Alban Avenue, Heath,  
Cardiff, CF14 4AS

Tel: 02920 612690

Email: [bigb263@yahoo.com](mailto:bigb263@yahoo.com)

## DIARY DATES

### CHARITY BALL

Charity Ball in aid of Scleroderma on 22<sup>nd</sup> April 2006 at the Ramada Leicester Hotel. (See front page)

### AGM

Our AGM will be on Saturday the 29<sup>th</sup> July at the Royal Free Hospital. Please let us know if you have a topic that you would like covered at the meeting.

### Scleroderma Family Weekend

The Raynaud's & Scleroderma Association will be holding its 5th Family Weekend on 24<sup>th</sup>, to 26<sup>th</sup> February in Chester. Families who have a child under the age of 18 with scleroderma are welcome to attend. The event will be a good opportunity for families to be educated by members of the medical profession about the condition and the best coping strategies as well as meeting other children in the same position. For more information and a booking form please contact the Association on: 01270 872776 or email: [info@raynauds.org.uk](mailto:info@raynauds.org.uk)

## SCLERODERMA MORNING

A morning to meet others with Scleroderma and find out more. All Welcome. February 11<sup>th</sup>. 10.30am – 12.30 Cedar Court Hotel. At junction 24 of the M62 (Huddersfield/Halifax) For directions please telephone hotel - 01422 375431

For other enquiries please contact Naomi Reay tel: 0113 343 4948

*Sponsored by Actelion*

# THE ROLE OF OCCUPATIONAL THERAPY IN SCLERODERMA

*Presented at the Society AGM by Phoung Quach Royal Free Hospital London*

## **What is Occupational Therapy?**

- We work with people of all ages who have physical, mental and / or social problems, either from birth or as a result of accident, illness or ageing.
- Our aim is to enable people to achieve as much as they can for themselves in order to get the most out of life.
- We work closely with the individual and with his / her family in order to achieve client centred goals.

## **Areas of assessments**

The occupational therapist determines the person's functional level or areas of difficulty by assessing the person in the areas of;

Self Care — Bathing / dressing, eating / drinking

Mobility — Walking in & outdoor, using stairs

Transfers — In/out of bath/car, on/off toilet/bed/chair.

Domestic — Food preparation, cleaning and laundry

Work / Leisure — Correct seating and work space

## **Type of intervention**

Once the occupational therapist has completed the assessment, he / she will discuss with the patient their priorities and goals in order to determine the type of intervention or treatment.

Intervention in particular for a patient with scleroderma may include;

## **Advice on;**

### **Joint protection**

A person with scleroderma may experience mild aching in a few joints and / or swelling and stiffness of the joints. When the person performs daily activities stress can be placed on these joints and this can increase the pain and inflammation.

The principles of joint protection encompass how to perform daily activities with the minimal amount of stress on the affected joints.

The aim is to

1. Reduce pain by minimising strain.
2. Preserve the joint structure / prevent deformity.
3. Maintain function.
4. Conserve energy.

An example is to use the strongest or largest joints instead of smaller joints i.e. by using your entire body instead of using your fingers when opening or shutting doors.

### **Energy conservation**

When a joint is inflamed or is stiff to move, a lot of energy is being exerted therefore the person may find that they feel tired more easily.

By applying the principles of energy conservation the person learns to use the least amount of energy in the most efficient way and hence conserve energy for activities that the person enjoys.

An example is to break down a task into little components and identify which steps can be omitted or simplified.

## **Assistive devices and alternative methods**

At times, as a result of symptoms of scleroderma especially relating to the hand and wrist, the person may find doing daily activities such as washing and dressing, feeding and drinking difficult. The person may require assistance to achieve this. Using assistive devices or alternative methods the person maybe able to maximise their independence and can also help with energy conservation and joint protection.

Samples of aids;

Sock aid - used to put socks on without having to stretch down to the feet.

Button hooks – can be used if the person has difficulty with managing buttons.

Tap turners or tap levers – can make turning taps easier.

Adapted cutlery - built up or padded handles can increase the grip on the cutlery.

Bottle / jar openers.

Kettle tipper- allows pouring water without having to lift the kettle and helps to reduce the risk of scalding.

It is possible however to over adapt by making the task too easy and prevent exercise or muscle stretches and in turn increase joint stiffness. It is therefore important that the person compromises as to when they should use aids. For example on work days for speed in the morning the person can use the sock aid to put on socks, but at other times when less rushed the person should stretch to reach the feet.

## **Hand therapy and splinting**

This usually includes advice on hand exercise and provision of a thermoplastic splint.

The aim is to maintain joint movements and to prevent further deformity of the hand.

General advice on hand care i.e. how to keep the hands warm and moisturised and avoid harsh detergents is also given.

## **Home adaptation**

This requires liaison between the hospital and the community occupational therapist. Major adaptation may include stair lift, installation of a shower or ramp. The level and type of adaptation depends on the severity of the difficulty and it usually involves an assessment by the social services occupational therapist, a financial assessment and application for a disability facilities grant to provide funding.

## WALK FOR SKIN

Fresh air, splendid views, stately homes... what more enjoyable way to raise money for skin charities?

Supporters of the Scleroderma Society are being invited to join the Walk for Skin – and the best part is there's no training required!

The Walk for Skin is a series of sponsored walks across the UK. The British Skin Foundation, the charity for skin disease research, is organising the walks and has invited patient organisations to take part, as increased research into skin disorders is something of a shared goal. Funds raised by the Scleroderma Society walkers will be split equally between the BSF and the Scleroderma Society.

While fun-runs and marathons are a great way of raising money for charity, it can be hard for parents, grandparents and kids to get involved. They often take place in just one city, which can mean long travelling times or even an overnight stay if you live elsewhere in the UK. For those brave individuals who do muster up the stamina to take part, it can mean gruelling and time consuming training regimes. And the run itself is not always ideal for very young or more elderly spectators.

The Walk for Skin seeks to combat this problem by hosting pleasant walks in picturesque locales. They are accessible to almost everyone, particularly to attract families and people of all ages – it's not just for the twenty-somethings! Each walk will cover a circular route of around 3 to 4 miles and should only take an hour or two to complete. A brisk walk or a leisurely stroll – you decide. You can even bring the dog!

And there are 11 venues to choose from, to make it as easy as possible to get to.

There is no registration fee to take part and you are not expected to raise vast quantities of money – just £20 can help, although more sizeable contributions will, of course, be welcomed too!



The walks will take place between May 13<sup>th</sup> & May 21<sup>st</sup> There are 11 venues to choose from:  
*Beamish Open Air Museum, NEWCASTLE, May 21<sup>st</sup>*  
*Beaulieu Abbey and Motor Museum, SOUTHAMPTON, May 14<sup>th</sup>*  
*Cosmeston Lakes & Medieval Village, CARDIFF, May 14<sup>th</sup>*  
*Wollaton Deer Park, NOTTINGHAM, May 14<sup>th</sup>*  
*Bramham Park, LEEDS, May 21<sup>st</sup>*  
*Himley Hall, BIRMINGHAM, May 20<sup>th</sup>*  
*BELFAST Castle, May 21<sup>st</sup>*  
*CHEDDAR Caves and Gorge, Somerset, May 20<sup>th</sup>*  
*LIVERPOOL (exact location and date to be confirmed)*

*LONDON, Greenwich Park, May 21<sup>st</sup>*  
*Holyrood Park, EDINBURGH, May 21<sup>st</sup>*

The 'Walk for Skin' sponsored walks will take place at a variety of museums, country parks and stately homes. At many venues a discount to the venue's visitor attraction will be offered, so that if you wish, you can make a fun day of the event – perfect for all the family.

The walks are generously supported by corporate sponsors so that every penny raised by the public will go towards the work of the skin charities involved. Everyone who completes the walk will receive a goody bag which will contain a range of products donated by our sponsors.

For more information or if you wish to participate please contact Caroline Walker 020 8876 1917 email [carolinew7@btinternet.com](mailto:carolinew7@btinternet.com)

### KEEPING WARM

“Keep Warm Keep Well” is a Winter Guide with advice on: Keeping warm and healthy, Home improvement grants, Heating your home and Help with bills. The booklet is published in a number of languages and can be obtained by calling the advice line. The Winter Warmth Advice line Freephone 0800 085 7000 is open 8am to 8pm Monday to Friday October to March.

[www.dh.gov.uk/socialcare](http://www.dh.gov.uk/socialcare)

## THE ROLE OF PHYSIOTHERAPY

*Presented at the Society AGM by Mary Hanania, Royal Free Hospital London*

In conjunction with the correct medical advice, Physiotherapy can be effective in the management of scleroderma. You can be seen at the Royal Free Hospital as an inpatient once a member of the medical team or nursing staff has referred you. As an outpatient, you can be referred to the physiotherapy rheumatology clinic by your rheumatologist, where the physiotherapist will be happy to offer you advice and exercises. Some general points to keep in mind are set out below.

- Stretching is very important and should be a part of your daily exercise program.
- Daily stretching is essential to maintain joint range and flexibility.
- Stretches should not be painful, but you may find them uncomfortable.

- You should hold a stretch for approximately 15-30seconds.
- Scleroderma is not worsened by exercise, and it is important to keep as fit and healthy as you can.
- You should exercise little and often. An excellent form of exercise is walking, swimming, riding a stationary bike etc.
- One form of exercise is strength training. This is very important as it makes bones and muscles stronger.
- Good forms of strength exercises include; walking, climbing stairs, and performing sit to stand off a chair with arms folded.
- Strength exercise helps fight osteoporosis (osteoporosis is the thinning of bones, making them more likely to break).
- It is important not to overexert yourself.
- You should be taking frequent short breaks rather than one long one.
- Always think about and look after your posture. It is up to you to protect your joints.
- Assistive equipment and splints may help to support your joints and make daily activities easier.

Wax therapy may be helpful to reduce pain and stiffness in the joints of the hand. We do not offer wax therapy treatment in the hospital for hygiene reasons but you may purchase a small wax kit for home-use from various retailers. This information can be provided by your local rheumatology department.

### LATEST ON THE QUINS TRIAL:

The follow-up of patients in this clinical trial has now finished. Data is being collected from all the hospitals involved and we shall spend the next six months checking, analysing and writing reports. We have already completed an article, to be published in the American journal “Arthritis Care & Research”, about the health-related quality of life of the QUINS Trial patients with limited scleroderma and Raynaud’s disease. All QUINS patients filled in the SF36 questionnaire at their first visit. The results can be divided into physical health-related quality of life and mental health-related quality of life. In general, mental health of QUINS patients was the same as that of the general population but the physical health measure was lower. **We found that the single factor with the greatest impact on their health-related quality of life was their Raynaud’s symptoms.** Also the effect of limited scleroderma was worse in younger patients.

The frequency of Raynaud’s attacks reported at the first Trial visit were as follows:

% of patients	occurrence of attacks during the previous month
39	several times a day
27	at least once a day
16	at least once a week
7	at least once a month
5	no attacks in past month

Of course, some of these reports were during the summer months. If we exclude those reports collected in May to September, the results would be as shown.

% of patients	occurrence of attacks during the previous month
49	several times a day
31	at least once a day
12	at least once a week
4	at least once a month
3	no attacks in past month

We also asked patients to estimate the frequency and severity of their Raynaud’s attacks by marking a visual analogue scale. The frequency of attacks was measured by making a mark along a line ranging from frequent attacks at one end to no attacks at the other end. Similarly the severity of Raynaud’s attacks was measured by the patient making a mark along a line ranging from very severe to not severe. Our patients’ assessments of their Raynaud’s severity had more effect on their health-related quality of life than their assessments of Raynaud’s frequency.

We feel that some doctors have not realised the importance to scleroderma patients of their day-to-day Raynaud’s symptoms and we will look carefully at our QUINS Trial data to see whether quinapril can reduce Raynaud’s symptoms and improve health-related quality of life.

Angela Gliddon,  
QUINS Trial Co-ordinator, Ysbyty Gwynedd Hospital, Bangor

**E-mail addresses of members happy for contact-**

**POST CODE INFORMATION**

As you see we have added the post code areas for those members who have given us their permission.

We hope that this will encourage members to communicate with others in their area. Please check your entry and if we have it wrong please let us know and we will try to get it right in the next edition of the newsletter.

roy4sanderson@aol.com

## PEOPLE LOOKING FOR CONTACT WITH OTHERS

I would love to be in contact with other sufferers in my area. I live near Salisbury, Wiltshire. Lynn Morton Tel: 01980 863444  
Fax: 0845 226 0928 Email: [lynn@dbl.co.uk](mailto:lynn@dbl.co.uk)

I would love to hear from anyone with Scleroderma who has had or is having IV Cyclophosphamide. I am starting this soon and any helpful hints would be appreciated. Also I wondered if anyone knows or has had a heart lung or double lung transplant as I also have pulmonary hypertension and have been referred for assessment with a view to transplant. Many thanks everyone for your help. I will keep you posted how things go.  
Caite Wych [caite@jwych.freemove.co.uk](mailto:caite@jwych.freemove.co.uk)  
Tel. home 01257 275204 mob 07917 500543

## FUNDRAISING

Parachute Jump update (see October Newsletter) The parachute jump organised by Anne and Bob Hall in memory of their daughter Susan raised a total of £1,507.38. Thanks to all those who supported the event and gave donations.

Carol Todd and her sister Jo raised £120 in commission by selling chocolates worth £1400 from Chocoholics. Included in this magnificent figure is one of the hostess gifts, which they sold for £10, the other two being donated to school raffles.

Congratulations and many thanks to Christine Grant, the daughter of London and South East member Betty Lane, who took part in the Hydro-Active Women's Challenge in Hyde Park, London on the 4<sup>th</sup> September 2005. Christine raised £100 in sponsorship.

### USED POSTAGE STAMPS REMINDER

Member, Alison McGlashan of 10 Bothlyn Ave., Kirkintilloch, G66 3DU, telephone 0141 7752777, is collecting used postage stamps on behalf of the Society. The only sorting needed is into Foreign and British stamps, so please support her.

“The Annual Ladies Rounders Charity Event could not have wished for a warmer day or more excellent support from the huge crowd. The eight teams who took part were all in fancy dress and played two games each and the top two with the most points got to the final. This was won by a local Pub “The Gwyn Hotel”(Ladybirds) and the cricket club (Posh Ladies) were runners up. All games were played in good spirits with everyone having FUN. We raised £1,000. Special thanks go to the Organiser Mr Keith Griffiths and the Entertainment Committee of the Pontdardulais Cricket Club”.

Wyn & Mandy Williams

Lorraine McGrath and Family collected £169 and raised awareness of scleroderma outside Sainsbury's Supermarket in Enfield. To make a collection of this kind you have to ask permission from the Manager of the Retail Outlet.

Mr JG Brown sent in £300. This fabulous amount was raised at his Masonic Ladies Night for the Porta Sapientiae Lodge No: 9429, and writes “hopefully this has made a lot more people aware of this terrible disease”.

Anona Morgan raised £150 in the Hydro-Active Women's Challenge at Hyde Park in September. Anona is not well at the moment and we wish her a very speedy recovery!

Thank you to Mrs R Smith of Langham, Norfolk, who together with her friends raised £40 from her Christmas raffle.

### INSURANCE QUESTION

Has anyone taken out Life Insurance and or Travel Insurance recently? If so please let Kim know as we are updating our insurance list; tel: 020 8965 4094. Email [info@sclerodermasociety.co.uk](mailto:info@sclerodermasociety.co.uk)

### “The Scleroderma Book”

The second edition of this guide for patients and families is now available. The author Maureen D. Mayes M.D. has updated her invaluable, user friendly book/guide about Scleroderma.

ISBN 0-19-516940-9

Published by Oxford University Press.

## Ask The Expert

**Q.** Is there medication that can manage pain and stiffness in the hands effectively?

**A.** Pain and stiffness in the hands is a common problem in scleroderma.

This may be due to a number of problems and each would have to be assessed by your rheumatologist. They include osteoarthritis, inflammatory arthritis, calcinosis and finally Raynaud's phenomenon. Some patients may have just Raynaud's but others may have a combination of these and each will require quite different medication or combination of treatments. Overall we would recommend diagnosis in the first instance. We often favour wax treatment, as this is useful for osteoarthritis and for the treatment of calcinosis.

**Important Note:** When using wax treatment on your hands any broken skin must be protected with plastic gloves.

**Q.** What is the current medical opinion with regard to the treatment of calcinosis in cases of scleroderma. In particular what are the risks and benefits of surgical intervention?

**A.** Treatment is difficult but there are a few anecdotal suggestions such as low dose warfarin, probenecid and colchicine which are used in gout, calcium channel blockers such as diltiazem, intralesional corticosteroids, carbon dioxide lasers and anti-TNF therapies used in rheumatoid arthritis.

Recently reported in the Annals of Rheumatic Disease were 9 patients treated with Minocycline an antibiotic. Minocycline was shown to be beneficial to the removal of calcinosis as well as its other properties. This was given in cyclical doses. But the side effects limited its usage. A well tried method particularly for many patients with calcinosis of the fingers is waxing (as mentioned above). This softens the skin and allows natural extrusion of the calcium. One must always resist the temptation to 'pick' at these lesions as this leads to skin infection and then the need to proceed further with oral antibiotics. Surgical techniques that are well tried include removal with the aid of a dental drill, but this would require an anaesthetic and does not guarantee permanent removal. A few patients require surgical removal by plastic surgeons depending on the size, location and degree of the problem.

## Nurse Specialist Helplines



**Anabel Smith**

Woolmar Hill Hospital, **Aberdeen**  
01224 555 403

**Sue Brown**

RNHRD, **Bath** 01225 447997

**Karen Walker** (Scleroderma)

Freeman Hospital, **Newcastle Upon Tyne**  
0191 2231503

**Rachael Crackett & Julia De-Soyza** (Pulmonary  
Hypertension)

Freeman Hospital, **Newcastle Upon Tyne**  
0191 213 7418

**Liz Wragg**

Hope Hospital, **Manchester** 0161 206 0192

**Sally Smith**

General Infirmary, **Leeds** 0113 3922189

**Steve McSwiggan**

Ninewells Hospital, **Dundee** 01382 633957

**Royal Free Hospital, London**

Scleroderma 020 78302326  
Pulmonary Hypertension 020 7472 6354

Lung Enquiries only **Ross Ellis**

**Brompton Hospital, London** 020 7352 8121  
(Bleep 7112)

**Sally Marsh**

**Northampton General** 01604 545531

The Nurse Specialist Helplines are part funded by the Raynaud's and Scleroderma Association.

**Please Note:** These helplines are for general inquiries. Unfortunately it is impossible for any health professional to comment on individual treatment without seeing the patient.

If there is no reply, please leave a message with your telephone number.