

"Newspaper editors are men who separate the wheat from the chaff and then print the chaff." -A. Stevenson

"Journalism largely consists in saying 'Lord Jones is dead' to people who never knew that Lord Jones was alive." G.K.Chesterton

Question of the day: How do they get the caramel inside the caramilk bar?

Calum Iain Johnston	Co-Editor
Brenda Paul	Co-Editor
Wendy Douglas	Administrative Secretary
Kaye MacPhee	News Editor
Pamela Johnson	Asst. News Editor
Zoe Green	Co-Entertainment Editor
Karen Mair	Co-Entertainment Editor
Ken Quigley	Sports Editor
Ernest Dunphy	Asst. Sports Editor
Richard Hutchins	Features Editor
Katherine Davidson	Advertising Manager
Cindy Davis	Ad Design
Tim MacKinnon	Offset Editor
Sandy Rabasse	Photo Editor
Wendy Douglas	Typesetter
Steve Boyko	Typesetter
STAFF THIS WEEK:	

Radical feminist maso-sadists of the week: Neil Toner, Mike MacKinnon, Lauren Grieve, Badger, Bernice Allison, Drew Brown, Valerie White, Rick Gaigneur, Dolores Allison, Nusin Brown, Allan Brown, Lauralee Mclean, Mary Scott, Tom Legace, Tim Lethbridge, Kelly Maher

PINION

The "OPINION" section is a forum for Brunswickan staff members to voice their views on various subjects. Peggy Johnson submitted the following story regarding her own experiences and I felt it was important enough to warrant being in this section. I hope everyone will read this

Cal Johnston

Believe Me, There's A Difference!

Many people confuse head injuries (H.I.) and multiple sclerosis (M.S.). I feel that I should make the distinction more clear. I suffered a head injury and people have automatic responses. They naturally assume I have M.S. (anyone with a disability, such as walking with a cane, having slurred speech, poor motor functions, etc. is assumed to have M.S. I want to say that there really is a difference.

Speaking for myself, when people say to me "Excuse me, but do you have M.S.?" that makes me angry.

So, that's why I feel ... I must say something in regards to the distinction here!

The symptoms of multiple sclerosis overlap with many of those of head-injured people. That's why there is confusion here. So those who just don't know how much year, M.S. is a very degenerative disease, whereas with head injuries, you either progress or plateau (you stay the same, but you never get worse.) This depends on the extent and location of the injury to the brain, though.

As for M.S., it is disease of the brain and spinal cord (central nervous system). It's called 'multiple' because many areas are greatly affected. It's called 'sclerosis' because sclerosed or hardened tissue is involved in damaged areas of the brain and spinal cord. This interferes with the brain's functions such as walking, talking, etc. Symptoms may vary individually and at times. They might include: speech-such as slurring, shaking of hands, loss of coordination, etc. These are just a few.

Multiple sclerosis affects young adults, usually between twenty and forty years of age. Very rarely, people under fifteen or over fifty get it and more women than men get it. Multiple sclerosis is not contagious, but it's not preventable or curable.

On the other hand, head injuries result from a severe blow to the brain, generally caused by motor vehicle accidents, gunshot wounds, high-risk sports, etc.

With injury to the head of various individuals, to the same place and severity, will produce different patterns in different degrees.

The distinction between M.S. and H.I. is important to me because on July 6, 1975, I was involved in a car-pedestrian accident. I was hit on my right pelvis, fracturing it severely. I received a number of cuts and bruises. I was then thrown clear of the car, sixty-five feet to be exact. (I know this because the RCMP measured the starting of the brake marks to where I was lying) and wouldn't you know it, I landed on my head.

I had traumatic brain injury. I was immediately unconscious and I remained in this state for five and a half weeks.

I was in intensive care in Saint John for six weeks. A week later, I was transferred to the Forest Hills Rehabilitation Center in Fredericton because I required extensive rehabilitation

I was like a newborn, except for the fact that I could not cry (and to this day, I still can't).

Since I had my catheter removed, I couldn't control my bladder, my bowels I could but I had to have help to, in and out of the bathroom. I couldn't even feed myself. To drink any type of liquid, I had to have a straw.

In rehabilitation, there's physiotherapy (sensory-motor training) such as - first you learn to sit up straight (I found that tremendously difficult, since I had been lying down roughly seven weeks and that's all I wanted to do since I was so accustomed to it). But the therapists made it very clear to me, as long as I was going to be there, I had to do my share. You also learn to crawl, along with various balancing and coordinating exercises.

Then the hard parts comes...to walk again! Jeez-what a task! It was always-'Johnson! Bring your hips forward! Shift your weight! Heel-toe, heel-toe!' But at the point of starting out, I used to have a therapist on each arm, I would lift my feet roughly a foot and a half off the floor. I had a very bad loss of coordination. I had weights strapped on my ankles to maintain my feet from going so high. It worked to a degree, I still lifted them, not as high though. With persistency, day by day, week by week, I finally learned to walk again (at the time, that was very gratifying to me!)

The Brunswickan, in its 119th year, is Canada's oldest official student publication. The Brunswickan office is located in rm.35, Student Union Building, University of New Brunswick, P.O.Box 4400, Fredericton, N.B., E3B 5A3.

The Brunswickan is printed with flair at Covered Bridge Printing, Ltd., Hartland, N.B.

Subscriptions are \$20 per year. National and local advertising rates are available at (506)453-4974. General phone 453-4983. News line 453-4973.

The Brunswickan is copyright the Brunswickan. All rights reserved. The opinions expressed within are not necessarily those of the Brunswickan's editorial board, its staff, or its publishers the UNB Student Union), or the administration of the university. All letters to the editor must be typed and double spaced, and signed along with phone number. Names may be witheld by request. The Brunswickan reserves the right to refuse publication of etters with libellous, sexist, or racist material. Letters over 250 words may be edited for brevity.

Articles in the Brunswickan may be freely reprinted provided roper credit is given.

There was occupational therapy (creative activity). This is where I learned to dress and undress myself (even today I still find buttons (especially small ones) hard to master). There's grooming in general, cooking, macrame, rug-hooking, coloring, handwriting, and various mind-testing games.

Naturally, speech therapy. The key factor here is articulation, the sounding of your word endings, such a P,t,d,ing,etc. Also, the tone of your voice, I had quite a difficult time here, since the accident seemed to bring in loudness. I learned to control the loudness, but even today when I get the least bit excited, up it goes again! Then I usually have to be told: 'Peggy! Keep it down to a dull roar!' That's all it takes!

Finally, there's education. Refresher mathematics and English (grammar) not bad!

Overall, it's just amazing how many or what impairments are sustained due to head injuries. There are such as physical, cognitive, psycho-social behaviour-emotional impairments.

So, it's very important to note that multiple sclerosis is very degenerating, whereas with head injuries, you either progress or plateau.

Respectfully submitted,

Peggy Johnson