



STROKE FOUNDATION HAMILTON

Hamilton Stroke Club Newsletter: July, August, September 2015

Age Concern - Mens Health Day on the 8th of June 2015.

On the 8th June 2015 a number of community health groups participated in a Men's Health Event from 10.00 am till 1.00 pm at the Celebrating Age Centre at 30 Victoria Street, providing free health screening checks and providing health and fitness information to Hamilton men.

Among those involved were the Stroke Foundation see the picture above with the Stroke Foundation information stand being manned by Lyn Harrè and with Nurses Christine Mara and Adrian Coleman giving free blood pressure checks and giving out stroke information along with Deborah Riley (not pictured).

Lyn Harrè and the team stepped in to assist when Hamilton Community Stroke Advisor Lynette Jones who was to man the stand had ill health on the day of the event thank you Lyn and Deborah, and many thanks to Nurses Christine Mara & Adrian Coleman who did the free blood pressure checks on the Stroke Foundation stand on the day.

Other groups involved were the Heart Foundation, Diabetes New Zealand giving blood glucose checks, Life Unlimited who gave hearing checks, Foot Mechanics who gave podiatry feet checks. The Cancer Society, the Hamilton Hearing Association Along with fitness advice from Sport Waikato.

The aim of the Mens Health Event is for men to develop a regular relationship with their GP, getting a yearly Health WOF.

A busy day saw 86 men receive a health "Warrant of Fitness". A number of men were identified as "at risk" with high blood pressure, high Glucose, high cholesterol, hearing and podiatry issues. All the

men deemed at risk were referred to their GP for additional testing.

thanks to the wonderful team of volunteers from Forsyth Barr, Age Concern, Hamilton Chinese Golden Age Society and Chinese Sunshine Society and the Chinese interpreters who helped with signage in Mandarin and supported over 30 Chinese men to participate in the Mens Health day.

The theme of the event was to encourage men to have regular annual health checks and to reinforce the message that "Ignoring it won't make it better or make it go away" and that prevention is the best way of dealing with health issues and that often if you have things checked there was often something that could be done before things got worse, so go to the GP and have regular checks.

Annette at it again



Word power

Stroke survivor and Hamilton stroke club stalwart Annette Coombes has shown that stroke is no barrier to achievement by winning the E-grade section of the NZ National Scrabble Championships in Wellington in May. Annette has been an avid Scrabble player for many years and although her stroke slowed her down a little at first she was fortunate that it did not affect her language skills.

It certainly has not affected her energy or appetite for competition – Annette plays regularly in tournaments all over New Zealand and is hoping to take part in an international tournament in Perth, Western Australia in November. Annette also featured in the Winter July 2015 issue of Penstrokes the Stroke Foundation of New Zealand Community Newsletter well done again Annette.





ROLL CALL

Sadly we have to report that the following past and present members and volunteers have passed away since our last newsletter.

Lin Crocombe

28th of July 2015 Caregiver & wife of Roy Crocombe

Alan Tossell

19th of August 2015

Maude Pere

2nd of September 2015

Carol Lindale

3rd of September 2015 Wife of Caregivers Support Group Member Don Lindale



They will all be greatly missed by many friends at the Stroke Club and we give our sincere condolences to all their families.



FROM THE PRESIDENTS DESK.

Following is the text of the Presidents report read out to the 33rd AGM held on the 22nd July 2015 Bev read the report as the incumbent President and at the AGM was re-elected to the role of President for the 2015 - 2016 year.

Presidents Report to the 2015 AGM

I am privileged again to be able to present my annual report to the 33rd Annual General Meeting of **Stroke Foundation Hamilton** held 11.00am 22rd July 2015 at the Marist Rugby Club rooms, Hillcrest, Hamilton for the 2014-2015 year.

First: We must remember all members who have passed away during the last year.

I would like to acknowledge the committed and dedicated efforts of all members of our committee, and the support they have shown and given us all over the past year. The committee is made up of eleven members – five of whom are stroke persons.

Special thanks to Paul and Jill Kurtich & Paul Burroughs for the professional presentation of the financial accounts. This year we have the second full year of accounts being reconciled and balanced using the XERO accounting system.

Special thanks also to Paul Burroughs. our Secretary. Fundraiser. Transport Coordinator. Newsletter producer, web site maintainer, and our first line Stroke communication for Foundation Hamilton.

A big thank you and acknowledgement to all funders we have had successful Grants from over the year to keep our club operating.

GRASSROOTS TRUST
INTERNAL AFFAIRS (COGS)
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HAMILTON CITY COUNCIL
NZ POST COMMUNITY
POST.

HIGHLIGHTS:

2014-2015 has been another very busy year with several meetings and public displays.

September 3rd we had a site at *Bunnings Mens night out*, where we handed out information on stroke prevention and *Free Blood Pressure testing* was carried out by Waikato Hospital Nurses Christine and Morag.

September 8th the saw completion and presentation of the project done for Stroke Foundation Hamilton Wintec Students, Cinnamon Crane and Nathalie Ross. This is a very functional resource & support directory for individuals affected by stroke and their family/caregivers.

This is also on our web-site www.strokefoundationhamilto n.co.nz

October 16th saw the launch of the **FAST** campaign in the Waikato region to help raise the awareness of the signs of stroke and the action that needs to be taken when these are seen.

October 31st in conjunctions with the FAST CAMPAIGN we had a site at the Kaumatua Olympics organised through the Rauawaawa Kaumatua Trust, held at the Claudelands Arena.

Also over the weekend 31st October. 1st 2nd and had November we an information stand at the Waikato A & P Show held at Claudelands showgrounds also in conjunctions with the FAST campaign.

March 14th we had a display at *Bunnings Community Fun Day* Free Blood Pressure testing was done this day as well with no one needing to be referred to their G.P. A good result.

March 18th we had a display at the *Cambridge Baptist*

Church, "Live Well, Live Safe" Expo, Plenty of information was distributed out this day.

April 7th to 12th was Stroke Awareness week. We had displays at Hillcrest New World, Te Rapa New World, Countdown Dinsdale, and Westfield Chartwell, over this week. Also 10th to 12th April we had a site at the *Waikato Show, Claudelands*, in the *Wellbeing Expo* area of the show.

Over the year we also had displays and presentations at: VISION **FOREST** LAKE Retirement Village **EVENTIDE** TAMAHERE Resthome and Hospital COGS Public Meeting (Internal Affairs) and MENS HEALTH DAY at AGE CONCERN Celebrating Age Centre.

Over and above all of these meetings Paul Burroughs attends as our representative on the Disabled Persons Assembly (Waikato), CCS Access For All Committee and DHB Community Health Forum, meetings held regularly throughout the year.

I attend **Volunteering Waikato** volunteer coordinator meetings throughout the year.

All of these events and meetings give Stroke Foundation Hamilton great opportunities to get the Stroke Risk factor and **FAST** messages out into the community.

I must acknowledge the

commitment of our committee and volunteers who gave their time to make all these events the success they all were, thank you.

SPECIAL HIGHLIGHT

Exciting news for Stroke Foundation Hamilton with the launching of our very own web-site in May 2015 at www.strokefoundationhamilton.co.nz this site has all the programmes we run here in Hamilton plus lots of links for further stroke information.

A big thankyou goes to Steve Outram and Paul Burroughs for building the site and getting it launched. Well worth logging onto if you have access to the internet.

OUTINGS

December 9th 2014; Life Member, Mrs Nora Adams, celebrated her 100th birthday. Myself and other stroke club members were invited to attend an afternoon tea for Nora at Eventhorpe Hospital that day. Nora had birthday cards from, Queen Elizabeth, Governor General, Prime Minister, Cabinet Ministers Maggie Barry and Peter Dunne on display.

We have all enjoyed *Christmas Lunch* at the Hamilton Combined Returned Services club on 10th December, 2014 and again for our mid-year Christmas lunch on June 10th 2015.

ACKNOWLEDGEMENTS:

Grateful thanks to our team of volunteers whose help and

support along with Committee members keeps our club days running smoothly.

Thank you to Lynette Jones, Community Stroke Advisor for attending Stroke Club and for the new referrals and support made to the stroke club over the year.

<u>CAREGIVERS</u> <u>SUPPORT</u> <u>GROUP:</u>

Betty Collis and myself for our joint co-ordination of the Caregivers Support Group. These monthly meetings are appreciated by those who are able to attend. Thanks to Lyn Harre, our Vice President for standing in for me at various times over the last year.

HOME VISITORS:

Thanks to Betty, Deborah, and myself for the home visiting over this past year.

PHYSIOTHERAPY & SPEECH LANGUAGE THERAPY:

Thanks to Tania Bron and Tracy Stirling for their physiotherapy sessions and Leisha Davies-Colley and Pip for Speech Language therapy sessions.

FIRST AID VOLUNTEER:

Thanks to Graham Thomson our committee member and first aid volunteer at our monthly club days, giving us all great peace of mind.

MARIST CLUB ROOMS:

Thanks to Andy Costain, Manager, Marist Rugby Club, for setting up the tables, chairs etc for Stroke Club days and Committee meetings.

CLUB DAY ACTIVITIES:

We have all enjoyed a variety of musical entertainment over the year selected mainly by your entertainment subcommittee of Annette Coombes, David, Lyn and Cathy. Well done team.

A wonderful variety of raffle prizes has been spread over the year. Thanks to Annette Coombes and David Gunn

Special extras and effort were put into our Christmas, Easter and mid-year Christmas club days.

We all enjoyed a wonderful barbeque lunch cooked by Brent (Jill & Paul Kurtich's) son-in-law at our March 25th 2015, meeting.

We are catering most months for a head count of 70 plus.

The membership draw has been a positive incentive to be a financial member of the club.

This brings to an end my report for 2014/2015.

Trust our club will enjoy another successful year ahead.

Bev Depree

Barlepiel

PRESIDENT

The Latest in Stroke Rehabilitation and Recovery

<u>Chris Illiades, MD</u>, December 08, 2014



Image courtesy Rehabilitation Institute

UPMC

Stroke prevention and early treatment to ameliorate longterm disability are the main focus of stroke medicine, but despite advancements these areas, approximately 6 million stroke survivors today are living with disability.1 Stroke researchers have responded by honing ways to predict which patients will respond best to which rehabilitation treatments.

"That is where we are now. We know that most repairs happen in the first three to six months. We also know that there is no outer limit for repair in some people," said Jill Stewart, PhD, assistant professor of physical therapy and exercise science at the University of South Carolina in Columbia. "Being able to and measure response to rehabilitation will help us learn what works best for each patient, how often to use the therapy, and when

therapy has hit its limit. That will improve outcomes."

"Predictors tell us who is likely to respond. Biomarkers tell us how effective the treatment is. Together they tell us what we need to know," said Steven C. Cramer, MD, professor of neurology at the University Of

California Irvine
School Of
Medicine. "Some
treatments are
uniform. Flu
shots work about
the same for
everybody. But
stroke

rehabilitation is at the bottom of

the uniformity ladder. It is far from one size fits all."

Another reason better predictors of recovery are needed is to better allocate One-on-one resources. physical therapy and occupational therapy are labor intensive, robotic therapies are expensive, and new technologies may be expensive. more even Knowing where and when to use limited resources will maximize their benefits.1

What the Latest Research Tells Us

Cramer and colleagues most recently analyzed stroke recovery in 29 patients with upper extremity paralysis three to six months after stroke. Before starting three weeks of standardized upper extremity robotic therapy, patients underwent a battery of neurologic tests to see which findings would best

predict response to therapy. The study will be published in the *Annals of Neurology*.²

"The best predictors were a percent of corticospinal tract injury and degree of cortical connectivity. Connectivity is a measure of the way different parts of the brain talk to each other. In simple terms, it's all about function and injury. Each has good predictive value, but taken together they have better predictive value," Cramer said.

In the study, patients who had greater than 63% loss of corticospinal tract were unable to benefit from the therapy.2 "The corticospinal tract connects the motor cortex to muscle. There to be enough needs connection to effect change. You either have enough or you don't," Stewart said.

"It's safe to say that the bedside exam is still the best predictor, but neurological measurements and imaging also have a front row seat at the table," Cramer said.

The best tools for predicting improved gait velocity were functional MRI (fMRI) and a Fugl-Meyer score (a clinical assessment system) of the leg, according to findings from a 2014 *Stroke* study that examined baseline multimodal testing on patients with hemiparesis one to 12 months after stroke.³

Baseline motor-evoked potential (MEP) amplitude was the most effective predictor of functional gain before an eight-week course

of robotic exoskeleton training for the arm after stroke, findings from a separate 2014 Neurorehabilitation & Neural Repair study indicate.⁴

"The best tools right now are transcranial MEP and fMRI. Also important are enhanced MRI technologies that show both gray matter and white matter," Stewart said.

Future Rehabilitation Technologies: Robotics, Stem Cells, and BrainComputer Interfaces

Robotic technologies are already here and may eventually be laborsaving devices for therapists. In the future, robotic therapies may be used primarily at home, or patients may be able to go to a robotic gym and be supervised by one therapist.¹

But these machines can cost hundreds of thousands of dollars, and so far have not been shown to be superior to dose-matched, humandelivered therapy.

"Right now robots are clunky and expensive. They will get better, but they will have to prove to be affordable, safe, and practical before they can be used more widely," Cramer said.

As for stem cells, it's known that they have the ability to migrate to the site of brain injury. Preclinical studies

suggest they can also promote neurogenesis, angiogenesis, and synapse formation.

What researchers still need to determine is which stem cells to use, the best routes of administration, and the optimal time to treat. "We are very early in stem cell technology for stroke recovery. Initial results are astounding, but we have a whole lot to learn yet," Cramer said.

As for patients with more severe disabilities, including paralysis, brain-computer interfacing can allow for movement of robotic limbs via cortical activity.

Using fMRI to precisely map motor-related cortical activity, researchers place electrodes in the brain that are stimulated imagined movement. bv Patients have been able to make а state-of-the-art motorized prosthetic limb shake hands, stack cones, and perform a wide variety of other tasks.1

In the future, new, high-tech innovations may be combined for best results. A person who suffers a stroke may be treated with stem cells, while brain-computer interfacing is used to trigger the stem cells. At the same time, robotic technology may be used to maximize neural plasticity and reorganization.¹

Low-Tech Can Also Be Effective

Some innovations are less technical, like adding

techniques based on the imagination. In a study that both Stewart and Cramer worked on, patients were asked to move a strokeparalyzed arm on visual cue. The patients were then asked to do the movements while they imagined opening and closing а door. Adding imagery to movement lit up additional brain regions, fMRI findings showed.5

"Don't forget about low-tech options," Steward said. Transcranial direct stimulation during exercise — a simple, safe, and painless procedure — can help maximize daily exercise, and many physical therapists are incorporating this technique into their practice.

"There are lots of possibilities for the future, but they all have some big safety and financial obstacles to overcome. Will they work better than what we have now and will they be cost effective? Time will tell," Stewart said.

Chris Iliades, MD, is a fulltime freelance writer based in Cape Cod, Massachusetts. This article was medically reviewed by Pat F. Bass III, MD, MS, MPH



The National Institute for Stroke and Applied Neurosciences. (An Institute of AUT

University in Auckland)

The National Institute for Stroke **Applied** and Neurosciences (NISAN) epidemiological conducts studies and clinical trials to improve health and outcomes people with major neurological disorders. Current research programs focus on:

Stroke

Traumatic brain injury

Neuromuscular disorders

Research with this aim is unique in New Zealand and **NISAN** is hub а for information sharing and developina а cohesive network between existina research and clinical groups with interests in:

Neuroepidemiology

Public health

Neurorehabilitation

Neuropsychology

Biostatistics

Recent developments

Currently available cardiovascular disease (CVD) risk assessment algorithms allow calculation of absolute risk of CVD (including stroke) but they are designed for use by health professionals and require a lab test to complete.

For an individual, one of the main challenges in effective stroke prevention is:

Lack of awareness about stroke symptoms and risk factors.

Self-managing strategies to reduce their risk of stroke.

We have developed an App called Stroke Riskometer which has the potential to:

Significantly improve stroke prevention in individuals with an increased CVD risk.

The Stroke Riskometer calculates your risk by evaluating a series of risk factors such as age, gender, ethnicity, lifestyle and other health factors that directly influence your likelihood of a stroke within the next 5 and 10 years, and the user can:

Find out their risk of developing a stroke

Have a baseline risk to compare their risk against

Compare details with someone of their age and sex who has no risk factors.

Developed in collaboration with international leaders in stroke prevention, The Stroke Riskometer™ app:

Is an award winning and easy-to-use tool

Measures your individual risk of a stroke in the next 5 to 10 years

The Pro version provides essential information on how to reduce the chance of stroke.

Reducing the International Burden Stroke of Using Mobile Technology (RiBURST), is a worldwide conducting crossstudy sectional. cohort and interventional (primary prevention) research of stroke other and major noncommunicable diseases (NCD) (heart attack, dementia and type 2 diabetes mellitus).

You can help us learn more by:

Submitting your data to help us better understand stroke, its risk factors and develop global prevention strategies.

The information presented in the Stroke Riskometer has been developed by Professor Valery Feigin (MD, MSc, PhD, FAAN), Director of the National Institute for Stroke and Applied Neurosciences, AUT, New Zealand.

Information about the Riskometer™ app and where to find it can be found on The National Institute for Stroke

and Applied Neurosciences (NISAN) web site below.

http://www.nisan.aut.ac.nz/

Members End of Year Christmas Lunch Wednesday the 9th of December 2015

The stroke Club End of year Christmas Luncheon for members will be held this year on the Wednesday the 9th of December 2015 and will be held at the Hamilton Combined Returned Services Club rooms in Rostrevor Street at midday.

The taxi's will pick you up at a later time around 11.00 am and will take you home again at about 2.00 pm that day the cost to members will be \$20 (see Menu right) which will include the taxi fare from home and back again for those eligible for mobility and your total **Christmas** End year meal, if you are able to give the \$20 for the Christmas Lunch to the front desk at the Sept, Oct or Nov 2015 Stroke Club meetings it would be appreciated

End of year Christmas Lunch Menu

Sugar Glazed Ham Leg

Hot Roast Beef
Gravy & Mushroom Sauce
Various Sauces and condiments
Roast Potato, Roast Kumara,
Roast Pumpkin
Minted Peas & Carrots,

Cauliflower Mornay, Green

Beans

Mixed Lettuce Salad, Coleslaw and Beetroot

Desserts

Bread & Butter Pudding, Pavlova, Chocolate Log

Hot Fruit Pudding with Brandy Cream, Caramel Brule

Tropical Fruit Salad, Fresh and whipped Cream

Tea & Coffee





Quotes

Blessed is he who expects nothing, for he shall never be disappointed

As I have grown older, I've learned that pleasing everyone is impossible, but pissing everyone off is a piece of cake

Thought of the Day:

Your value does not decrease based on someone's inability to see your worth

The Best way to escape from a problem is to solve it

Marian Burns in Te Awamutu



Stroke Foundation Hamilton members from R to L Annette Coombes,
Pam Mason, Paul Burroughs, Pam Bennett,
Peter Jurgens Bev Depree & Marian Burns

On Tuesday the IIth of August a van load of Hamilton Stroke Club members (see photo on the left with Marian Burns) went down to Te Awamutu at the invitation of the Te Awamutu Stroke Club to join them at the Tarahill Rest Home to hear a concert by award winning fiddler Marian Burns.

Marian played a selection of her own music and sang classics that everyone could sing along too and also gave a rendition of her specially written song "Beautiful Soldier" Marian's tribute to our fallen soldiers and dedicated to our ANZAC Soldiers from New Zealand and Australia who died at war.

Marian also showed the video of the "Beautiful Soldier" song.

2015 Volunteer Excellence Awards — 26th June 2015



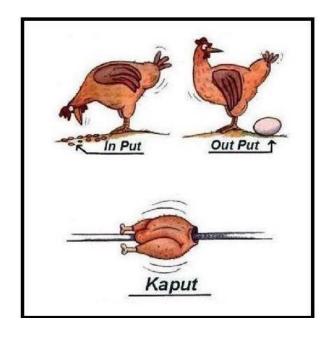


Hamilton City Councilor Philip Yeung presenting
Paul Burroughs with his volunteer awards nomination
certificate, Paul was nominated by Stroke Foundation
Hamilton

Stroke Foundation Hamilton representatives at the 2015
Volunteering Waikato Volunteer Excellence Awards
From the left, Pam Mason, Bev Depree,
Paul Burroughs and Steve Outram



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Facts about stroke in New Zealand.

Stroke is the third largest killer in New Zealand (about 2500 people every year). Around 10 percent of stroke deaths occur in people under 65.

Every day about 24 New Zealanders have a stroke. A quarter occur in people under 65.



Stroke is the major cause of serious adult disability in New Zealand.

Stroke is largely preventable, yet about 9000 New Zealanders every year have a stroke. For information about reducing your stroke risk check the SFONZ web site.

There are an estimated 60,000 stroke survivors in New Zealand. Many are disabled and need significant daily support. However, stroke recovery can continue throughout life.

Most people can't recognize the signs of a stroke occurring. Make sure you are aware of the signs to look for. See the FAST information above. High blood pressure is a major cause of strokes. One in five New Zealanders has high blood pressure, and a third of these don't know it. Reducing your blood pressure can greatly reduce stroke risk. For more information see the SNONZ web site for risk factors

Stroke is a medical emergency but many New Zealanders do not have access to the best possible stroke hospital services.

The fallacies: common myths about stroke

Myth: Stroke can't be prevented, there's nothing you can do about it.

Fact: Stroke is largely preventable. Early detection and effective control of stroke risk factors can greatly reduce the possibility of stroke.

The number of people suffering stroke would be more than halved if all recommended risk reduction strategies were taken in the community.

Myth: Stroke hits without warning.

Fact: Transient Ischaemic Attacks or TIAs ("ministrokes") can happen prior to a stroke. These signs of stroke disappear within minutes or hours, but should be seen as a clear warning that a more severe stroke might follow. Early medical attention and treatment can prevent this. There is nothing trivial about a so-called "ministroke" - seek medical help immediately.

Myth: Stroke only affects older people.

Fact: Stroke affects all ages. About 40 strokes a year in New Zealand are suffered by children. Nearly 2000 (a quarter of all strokes) will be suffered by people under retirement age.



Stroke Foundation Hamilton membership draw

There are benefits of being a financial member of Stroke Foundation Hamilton for the 2015 – 2016 financial year.

Every month at the monthly stroke club meeting a draw is done of all financial members and the winning member receives a \$50 Pac N Save gift card. You don't have to be present to win the draw but you must be financial.



Social Lunch Group:

For those of you who don't know yet there is a Stroke Social Group who are now each third meeting Thursday of the month at the Hamilton Workingmen's Club in Commerce Street in Frankton for lunch. The social group is not a structured group just a drop in group who meet for a chat or for a coffee or cup of tea and a meal at the workingmen's club using the clubs facilities which for those of you who have not been there before are excellent including a good casino, bars and dining area.

The meals are very good value with blackboard specials of the day from \$10 to \$15 and a good selection of other meal options from toasted sandwiches and chips to a nice steak and salad. The club shuttle van is

also available in the afternoon to go home in for only \$5.00 to anywhere in the city which is very good value.

Don't worry if you are not a member of the Hamilton Workingmen's Club just see Kurtich Paul or Paul Burroughs and they will explain how you can get into the club without being a member on the drop in days. Why not check us out by coming along in 2015 on the third Thursday of the month at 11.00 am to the Workingmen's club in Commerce Street in Frankton the next meeting will be on the 15th October 2015

Caregivers Support Group:



The Carer Support Group has monthly meetings which are now held on the **third**

<u>Tuesday of each month</u> and the venue varies each month.

The group meets each month for coffee at a number of city venues and each month the members of the group will decide where the following months Caregivers Support Group will be held.

For information about 2015 meeting times and the venue and any other questions for the groups meetings

Contact Betty Collis on Phone: 855 - 6440 or Email at: bettycollis@clear.net.nz
Or
Contact Bev Depree on Phone: 847 – 9354
Email: bevdepree@gmail.com

Or contact the North Waikato Community Stroke Advisor on:

Phone: 856 - 1654 or Email at: north.waikato@stroke.org.nz

The caregivers group also runs regular raffles to raise funds for the group so if you see them at stroke club or other places please support them.

The raffle drawn since the last newsletter was won by:

Winn Fowlie

CROSSWORD

Clues Across

- 6 Find fault with (5)
- 7 Deer's flesh as food (7)
- 9 Brilliant red (7)
- 10 Thoroughly proficient (5)
- 12 Inquire inquisitively (3)
- 13 Multiply by four (9)
- 16 Body of employees (9)
- 17 In golf, a ho5e in one (3)
- 19 Insect infesting plants (5
- 21 To give help to (7)
- 23 Professional dancer (7)
- 24 American buffalo (5)

1 2 3 4 5 7 8 9 10 10 11 11 15 15 15 17 18 18 19 20 21 22 24

Clues Down

- I Select freely from the menu (1-2-5)
- 2 Quick-witted, clever (5)
- 3 Wild beast's lair (3)
- 4 Taking thought or care (7)
- 5 Cage for keeping poultry (4)
- 8 Comes back again (7)
- II Unfavourable, harmful (7)
- 14 Place other than studio, where filming occurs (8)
- 15 Tablet used to relieve pain (7)
- 18 Intense, graphic (5)
- 20 Forward, saucy (4)
- 22 And the rest (3)

Solution on Page

Crossword kindly supplied by

Brainte aser Publications, P.O. Box 10101, Hamilton, N.Z.

STROKE FOUNDATION HAMILTON

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Web site: <u>www.strokefoundationhamilton.co.nz</u>

Newsletter editor and any contributions please contact Paul Burroughs

At the above address or email.



Stroke Foundation of New Zealand Mission Statement

Reducing the risks - improving the outcomes

Without the generosity of the following Businesses organisations and Community Trusts, we could not continue to operate, so we thank them all most sincerely for their continuing support of our group:

COGS, Trust Waikato, Wel Energy Trust, Grassroots Trust, Countdown Dinsdale, Pak N Save Mill Street & Clarence Street, New World Rototuna, New World Te Rapa. New World Hillcrest, NZ Post Community Post, Techsoup (Microsoft). Westfield Chartwell. Page Trust. WDFF Karamu Trust B.P. Voucher for Volunteers, Lion Foundation, Red Cabs Hamilton, Animation Hair Design Cambridge ValRay Country Music Promotions Te Awamutu, Betta Electrical Te Awamutu, Clive Steenson Plumbing Te Awamutu, Pukete Northcare Pharmacy, Hamilton City Council Wellbeing and Sustainability Fund, Z Good in the Hood. Summerset Down the Lane Retirement Village, Trikiso Buses Ltd. SkyCity Hamilton, Tommo's Bakery & Lunch bar Hamilton

Thanks also to those members and supporters who have made donations and supported raffles and the sales table at stroke club meetings by supplying items like knitting, baking, books, vegetables, magazines and plants and donating raffle prizes including the Caregivers Support Group Raffles.

Please support all the sponsors who support us







2 A-la-carte 2 Smart 3 Den 4 Mindful 5 Coop 8 Returns 11 Adverse 14 Location 15 Aspirin 18 Vivid 20 Pert 22 Etc

UMO

o Blame 7 Venison و Scarlet عد Adept عد Pry عد اPhidA ود Ace عرد Ace عن Aphid عد Artiste عرد Brisse عرد Bison عدد Staiste عرد Briste عرد Briste

ACYOSS