

Christmas 2015



Warwickshire
Vision

Lights Camera Action!



Warwickshire Vision Support



Your Local Charity for Local People

Seeing Things Clearer

Did you know?

- There are almost two million people in the UK living with sight loss. This figure includes those that have uncorrected refractive error or cataract that may be reversed. This figure also includes around 360,000 people registered as blind or partially sighted in the UK, who have severe and irreversible sight loss.
- Sight loss affects people of all ages but especially older people: 1 in 5 people aged 75 and 1 in 2 aged 90 and over are living with sight loss.
- There are over 25,000 blind and partially sighted children in the UK aged 0-16. As many as half of these children may have other disabilities.

Sources: RNIB Sight Loss Postcode March 2014

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Making life clearer

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of Warwickshire Vision Support

This publication is also available in digital audio,
Braille and by email

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Rosemary Went, Editor



Rosalie Visick, Co-editor

Editorial

Seasonal Greetings
to all our readers and listeners

Thank you to the people who told us about errors in the Summer edition of Warwickshire Vision, we apologise for them.

This year has seen a number of national anniversary milestones - Hiroshima and Nagasaki and the devastation of the atomic bombs, then VJ Day, celebrating the ending of the Second World War.

Queen Elizabeth II is now this country's longest reigning monarch, exceeding the reign of her great-great-grandmother, Queen Victoria. Elizabeth II ascended the throne at the age of 25, as did Elizabeth I, who reigned for 45 years. When the coronation of our reigning monarch took place it made history by being shown on television.

It is now 60 years since commercial television began to be broadcast in this country - to the limited number of people who had television sets that were able to receive this second TV channel. Since then the number of all broadcasting channels has grown dramatically - increasing the choice available to us.

Leisure activities for the season are featured - it is forecast that this winter could be a long one. Some aspects of diabetes are described in the Medical and Health section. We end our occasional series of articles describing the jobs of the staff with the Manager - John Davis.

We appreciate the contributions we have received to this magazine and we look forward to hearing from more of you. Do get in touch.

We wish you happiness and good health for the New Year.

News from Warwickshire Vision Support

General Meeting

Stratford was the venue for this meeting where it was attended by three Directors/Trustees - Peter Soles, Philip Austin and Rosemary Went, staff - John Davis, Imke Carruthers, Wendy Knott and Andrew Harris and 26 Members, carers and Volunteers.

Peter Soles welcomed everyone and introduced the Directors. John Davis reported that it was nearly 12 months since the name change; membership changes meant that everyone on the data base receives the magazine, providing regular contact and there is no membership fee.

The areas covered by the Community Workers had been combined – enabling more flexibility between Vision Support Centres and the Help Desks. We were working with other organisations to provide information and support at local hospitals. It was hoped to establish a group for newly registered VIPs. Funding was necessary for services. A mobile service was being considered to expand the Vision Support Centre services.

He also said that a new contract with the Local Authority for Rehabilitation services was due, and that there was more demand than needed to be met.

Philip spoke about the work of the Advocacy Groups, establishing

channels of communication with appropriate authorities and raising awareness of the needs of VIPs.

Andrew described helping people to use new technology - the services available which could lessen isolation. One recent new client was 90 years old. The dangers of scams was discussed and that passwords should not be disclosed.

One Member described how useful she found the Assisted Travel service on trains and the confidence it gave her.

Board of Directors/Trustees

At The Election Board Meeting on 24th September 2015, Rob Ballinger, Kath Phelps and Tony Thompson retired. Ninety six out of a total of 299 voting members (244 of whom are visually impaired) had participated in the postal voting procedure. Richard Orme was elected and Kath Phelps was re-elected. The membership of the Board is now:

Peter Soles (Chairman)
Howard Burgess (Vice-Chairman)
Kath Phelps (Company Secretary)
Lesley Edwards (Treasurer)
Philip Austin
Richard Orme
Steve Plumpton
Rosemary Went

Fundraising Report

Phil Arkell

Regular Giving

I would like to say a big Thank You to everyone who responded to our recent Regular Giving campaign. You will recall that in April we stopped charging a subscribing membership fee in favour of a voluntary donation for those who are willing and able to make a contribution. We did this to try to ensure that our services are free to everyone who needs them irrespective of their ability to pay an annual fee.

I am happy to report that we have received over £3,600 in donations and pledges from South and Mid Warwickshire with letters having just been sent to Rugby, Nuneaton and North Warwickshire. In real terms this means that we are raising almost the same amount of money

as we did under the old subscribing membership system but now believe the system is fairer for everyone.

Leamington and Warwick Soroptimists

Warwickshire Vision Support has been chosen by Mary Sue Stathe, the President of Leamington and Warwick Soroptimists, as her Charity of the Year.



On 1st November Leamington and Warwick Soroptimists held their annual Swimathon at Warwick School in support of Warwickshire Vision Support and the Warwick District Citizens Advice Bureau. We are pleased to say that we were able to put together a mixed team from



Wishing you a very
MERRY CHRISTMAS



From everyone at
Warwickshire Vision Support



John

Imke

Joanne

Casceta

Mel

Imogen

Wendy

Phil

Barbara

Karen.

Kelly

Andrew

Sue

Tracey

Warwickshire Vision Support to participate in the event.

Although we do not yet know the final amount raised by the Swimathon, we are confident that it will prove as successful as previous years.

We would like to say a big thank you to Team VIP comprising Sue Chambers, Robert Franklin, Paul Bowler, Rosemary Went, Imke Carruthers and Phil Arkell who gave their time and effort to swim for Warwickshire Vision Support and of course everyone who sponsored them.

Advocacy Update

The major activity of the summer has been in conjunction with the RNIB "Who put that there!" campaign. We wrote to service users at the beginning of July and I am pleased to say we received over fifty reports of problems throughout the county. This is a fabulous response and we will be using that evidence in our negotiations with county and local councils.

During the autumn months we will work with councils to try and negotiate street charters to improve the situation for all visually impaired people in the county. We will report progress in the next Warwickshire Vision magazine.

Progress has been made on the removal of A-boards in some areas.

The Role of Manager/ Senior Rehabilitation Officer **John Davis**



My job is:

- To administer the Association in accordance with its Constitution and Policies of the Chairman and Board of Directors/Trustees
- To ensure that the overall objective of the Association of providing assistance and services to blind and partially sighted people in Warwickshire and Coventry is met
- To advise and support the Board of Directors/Trustees in their Governance of WAB, operating as Warwickshire Vision Support
- Overall management responsibilities for all Warwickshire Vision Support services

- To manage the Rehabilitation Service Level Agreement with Warwickshire County Council
- To represent and promote Warwickshire Vision Support at external meetings, presentations and with the media.

The ways I undertake to achieve the main purpose of my job are:

- To work closely with the staff
- To work closely with the Chairman and also the Board
- To establish and maintain good working relationships with key individuals and groups that are involved with service provision and commissioning for visually impaired people.

I work closely with the Chairman, Peter Soles, meeting weekly. I keep Peter informed of matters arising and events coming up. The threats and opportunities that I foresee: we talk tactics. This is necessary because although the Association has a Strategic Plan, the climate we are working in creates uncertainty.

Local Authority and Health structures have been in a state of constant change for years. Their personnel come and go and their finances are uncertain. This creates short termism. I try to stay abreast of all these changes as best as I can. I seek to promote the needs of visually impaired people to groups that can influence decision makers.

But Peter and I have to be fluid in our approach to strategic planning. We have to consider that Service Commissioning could be for Sensory Services, not solely Visual Impairment. We must be prepared to deal with commercial providers where there used to be NHS providers. We must constantly be looking at what other Voluntary Organisations in our sector are doing and attempt to ensure our services complement and do not conflict with these Agencies. We look at potential problems and work out solutions, how to achieve our strategic plans or what we have to add or remove from them.

Warwickshire Vision Support has a small staff team, but we achieve a lot. The only way this is possible is through teamwork and individuals who are committed to serving visually impaired people.

My job is to ensure that all our services keep running. We have monthly individual staff supervision, Team Meetings and Staff Meetings. It is important to try and ensure we have good communication channels because most of our service operations take place in the community.

I deal with staff issues as they arise and with service developments through Team and Staff Meetings. I try to keep abreast of service developments elsewhere and provide ideas but I encourage the staff to

look constantly at our efficiency and seek their ideas for development and new services.

My job is to ensure the 'machine keeps turning'. To ensure there is adequate staff cover across operations; to ensure each person is able and doing their job.

I like to give a person an area of responsibility and let them take ownership and control of it. I want people with knowledge of their service, commitment to visual impairment, and enthusiasm for working with people. I want someone who wants to 'get the job done'; I don't want someone who waits for me to tell them what to do. I want them to bring me ideas for improvement and development; who complains when things are wrong.

I am very lucky. I have a group of staff that are dedicated to their work. Helping visually impaired people is their profession but also their vocation. They genuinely care.

When I talk about staff dedication I refer to all the staff: Operational, Administration, Finance and Fundraising are equally important. Our services rely on these people being able to do their jobs. People who contact Warwickshire Vision Support will be most familiar with Casceta, Imogen, Joanne or Barbara. These are the 'first contact' people with Warwickshire Vision Support.

Services for visually impaired people are tied into Health Services, Social Care Services and Education Services. All of these Agencies have specific duties to meet the needs of visually impaired people and it is important to maintain good working relationships with them. It is important because very often their services for visually impaired people are 'an after thought' in their service planning. I need to ensure that these Agencies are aware of their duties. If I bring them problems or remind them of their duties I always also provide them with a solution.

Warwickshire Vision Support has the reputation of being 'proactive'. We make it clear that we can work with sensory impaired people not just visually impaired people. We work with Social Workers, Occupational Therapists, Stroke Teams, Dementia Services and Hospital Staff. It is important that the Statutory Agencies in Warwickshire and Coventry know that we are an organisation that they can rely on to provide sound, professional advice and services that enable them to meet their legal duties; that we have plans they can turn to if they wish.

I am involved with groups that influence the strategies of the Statutory Agencies; Warwickshire Reference Group is made up of all the Statutory Agencies and Representatives of the Voluntary

Sector. I am also on the Healthwatch Forum.

We are very aware that finances will remain very restricted for the next few years. However, we are still trying to reach more people to make them aware of our services. There are 3,200 people on our database, yet RNIB says there are 18,500 visually impaired people in Warwickshire. We will endeavour to produce more cost effective ways of supporting more people over time.

Behind this approach will be the need for visually impaired people to be involved in helping other visually impaired people, whether by running groups or giving advice and support to newly visually impaired people. We will not stop trying to reach and help visually impaired people in Warwickshire.

Staff News

Jenny Lane, Rehabilitation Officer

At the end of August we said goodbye to Jenny Lane as she left us to join Blind Children UK. This organization is part of the Guide Dogs group. Jenny has taken on a new challenge of providing 'habilitation' support to children and young people. This will require her to work with children from babies through to early twenties. We all wish her every success.

Wendy Knott

Wendy left the service of Warwickshire Vision Support in mid-

October in order to take up another post in Community Work. Wendy spent most of her time developing our network of local Drop-in Centres, now called Vision Support Centres. We are grateful to Wendy for all her hard work and give her our good wishes for the future.

Andrew Harris, IT Officer

At the end of October Andrew left the organisation. He came out of retirement to help with the service and we are very grateful for everything he has done. We wish him all the best in his second retirement.

Changes to the Shoppa Hoppa Service

If you live in mid-Warwickshire and would like to use this weekly bus to take you from your home to the supermarkets near Leamington Shopping Park (with assistance available), the service has been changed to reduce travelling distances. The area covered has been split in half.

If you live between Budbrooke and Warwick south and Bishop's Tachbrook the service still runs on Monday mornings. For anyone living between Whitnash and Cubbington the service now runs on Wednesdays.

If you are interested in using this service telephone the booking line:
01789 471595

Features

Dot Roberts - 100

Dot was born in Coventry on 7th October 1915. She was the middle child in a family of nine but she is the only one left now. She went to Stoke Council School until she was 14 and then did small assembly work at GEC until she married. She moved to Southam about 45 years ago and attended Southam Club for many years with her husband. She likes Southam and finds it a very friendly place.



A Visit to Oxford Botanic Garden Paul Bowler, Coleshill

The University of Oxford Botanic Garden is the oldest garden of its type in the UK, with a history stretching back almost four centuries. Established in 1621 as a physic garden to grow plants for medicinal research, it is situated in the north east corner of Christ Church Meadow, on land belonging to Magdalen College and overlooking the River Cherwell. Founded following a £5,000 donation from Henry Danvers, the 1st Earl of Danby, today it has a diverse collection of some 8,000 different species, ranging from the tropical to the more temperate.

Having attended a Braille class for the past year, I took part in an end of year excursion to the Botanic Garden in early July, and we spent a

day learning about its background and history. On arrival we were greeted by Sarah and Susan, two of the Garden's tour guides, who began our visit with a quick overview of its history, before taking us on a walk during which they described some of the many different plants and trees on show, as well as highlighting the Garden's more notable features.

One of the most striking of these is the famous stone archway that forms one of three entrances. Completed in 1633 it was built on such a grand scale that its cost exhausted Danvers' original donation, and there was nothing left to pay for the garden's upkeep. Funds were initially raised through the growing and selling of fruit, but a financial endowment courtesy of Oxford academic William Sherard would later ensure a healthier income.

The Garden's oldest tree is an English Yew planted in 1645 by the first curator, Jacob Bobart, and this survives to the present day. Although originally having no medical purpose, we were told that the bark of yew trees has more recently provided the raw materials for two drugs that are important in the treatment of cancer, these being paclitaxel and docetaxel.

Another tree of note is believed to have inspired the author J R R Tolkien during the writing of Lord of the Rings. As a professor at nearby Merton College, he was a frequent visitor, and is said to have modelled the treelike 'ents', creatures that appear in the books, on his favourite black pine. Sadly though, Tolkien's tree, as it became affectionately known, is no more. It had to be felled in late 2014 due to safety concerns when two of its larger branches broke off following a prolonged period of hot, dry weather.

As well as the outdoor garden, Oxford has several glasshouses designed for plants that need a much warmer climate than our own. In the Tropical Lily House can be found water lilies and water lettuce, banana plants and rice. There are even carnivorous trees with banana-like fruit that eat insects, capturing them in a similar fashion to a Venus fly trap. But the central feature is a pool in which float several Santa Cruz lilies, giant dish-shaped lilies that we were told are capable

of supporting the weight of a small human.

In contrast the Arid House's climate is more desert-like, with cactuses, aloe vera, and other plants that can survive in very dry conditions. Its centrepiece is a giant cactus that stretches at least fifteen feet skyward, and which towered above Sarah when she stood beside it. Wherever we went we were invited to hold and smell different plants, and there was a multitude of fragrances in the air. As a hay fever sufferer I was expecting to be sneezing my head off, but I was surprisingly ok.

It was definitely a good day out, and highly recommended for anyone with an interest in gardening and plants. One of my favourite parts of the tour was the Arid House with its vast array of cactuses. I'd always thought cactuses were covered with prickly spines, but several of the species we saw had much smoother surfaces, their texture almost like that of bark. I was also quite fascinated by the carnivorous plants. Gently shaking one of the fruit I heard something rattling inside, no doubt an unfortunate insect about to breathe its last.

A bit closer to home can be found Birmingham Botanical Gardens, and I'm ashamed to say that although I've lived most of my life in and around that city, it's a place I've never actually visited. Maybe I'll have to do something about that now.

A Royal Event

Harold Smart, Kenilworth

A short time after I was first registered as 'partially sighted' I was visited by a Rehabilitation Officer from Warwickshire Vision Support who asked me if I had ever been in the Armed Forces. When I replied that I had, she suggested that I contact Blind Veterans who would help me with my condition so I joined.

They have been very helpful and this year, 2015, is their 100th anniversary so the Queen decided to hold a Garden Party at Buckingham Palace in their honour. The date chosen was 4th June, which was considerate of Her Majesty as I could celebrate my birthday as well!

My wife and I decided to go to London by train on the morning of the 4th and after having lunch near Trafalgar Square I hailed a taxi. I had much pleasure in giving the instruction 'Buckingham Palace, Driver'. It didn't take long before joining a queue of taxis and cars at the gates of the Palace where we alighted and presented our documents to the police for inspection.

We were directed across the courtyard up some steps through a doorway, which brought us into a quadrangle. We went across this, then more steps, another door and yet more steps into the garden.

Along the whole way there were both members of the Royal Household in morning suits and members of the three armed forces in uniform to assist you in any way they could. They were most attentive to our needs.

The very large garden had open fronted tenting erected along the left-hand side where the food was served. There was also a VIP tent directly opposite about 100 yards from the Palace. Military bands were playing in the two diagonal corners. A vast number of chairs were set out in front of the food tenting. At 4pm the Countess of Wessex appeared on the steps of the Palace, accompanied by a squad of Yeomen of the Guard with halberds held at the slope. These are spear type weapons eight feet long with a wooden shaft. The Countess walked slowly across the lawn towards the VIP enclosure along a corridor of Blind Veterans, stopping frequently to speak to members.

As there were so many people, tea was served from half past three. Dainty small sandwiches with crusts removed, together with individual



small cakes of an amazing variety were available. Tea, coffee and soft drinks were also on offer. The staff were attentive and you hardly had time to place your teacup on the ground before a waiter was there to take it away. At 5pm these same people were around the garden offering tubs of ice-cream.

At 6pm the Countess of Wessex departed the same way as she had arrived, accompanied by Beefeaters; the band played the National Anthem and the event was over. Outside the Palace in the area where crowds usually gather for important occasions, Blind Veterans UK had marshalled a huge number of buses to take those able to walk to the various main line stations and their own people carriers with lifts for wheelchairs for those unable to walk. The organisation was very slick and within the hour the whole 7,000, plus carers, had left the Palace.

It was a wonderful day and an event to remember.

Editor

In 2014 the Queen welcomed 24,000 guests to her three principal garden party events, held in her 39 acre garden. Preparations for these events begin 6 months in advance.

Bus Crash in Shared Space

In a shared-space road in the centre of Coventry a double-decker bus crashed into the front of a Sainsbury's shop. A 7 year old boy

from Leamington on the bus and a pedestrian from Nuneaton were killed and five other people taken to hospital. This took place at 6 p.m. on 3rd October.

Coventry has been in the forefront of the shared space schemes where pedestrians and vehicles share the same road-space and there are no kerbs. The crash was at a junction of a shared space scheme, near where a pedestrian was killed by a bus 3 years ago. Another bus crashed into a shop opposite the Sainsbury's store just 3 months previously. This is a 20 mph zone.

Dangerous Parking

John Garrett of Warwick has been highlighting the danger experienced by visually impaired people when motorists park on the pavement. He has written to his local newspaper, the Leamington Spa Courier, explaining that when vehicles park on the pavement leaving insufficient space for him and his guide dog Kahn, they are forced to walk in the road. A local road where he is forced to walk has fast-moving traffic. He also explained that the same risk applies not only to guide dog users, but also to anyone who is visually impaired, is older, uses a mobility scooter or is pushing a buggy.

The newspaper produced an article headlined 'Blind man fears for his safety'. The article also described where another problem is caused



article provided the same information as the one in the Leamington Courier.

Guide Dogs has produced a video about the struggles that guide dog users face. To view it search for 'dangerous pavement parking vs guide dog' on www.youtube.com

for pedestrians by inconsiderate parking - where the kerb is dropped. Quite often these rights of way for pedestrians are delineated by the dimpled surface of the paving leading to the road.

Warwickshire County Council is responsible for local problems of this nature. A statement from the Strategic Director for Communities, Monica Fogarty, said: 'We are doing all we can to further enforce the parking controls in place. This case highlights the consequences when people park illegally and inconsiderately and we urge drivers to do the right thing. We also urge businesses to be mindful of how their own displays can obstruct the footpaths and highways. We encourage the promotion of their businesses but not to the detriment of pedestrians' safety.' She also said that the public can report illegally parked vehicles by calling **0333 999 3332**

'Bad parking could cost me my life' was the front page headline in the Warwick Observer. The

N.B.

A Bill by the MP for North Dorset calls for London's ban on pavement parking, which has been in existence for 40 years, to be extended across England and Wales.

Don't forget that Warwickshire Vision Support is supporting the RNIB's Safer Streets Campaign through its local Advocacy Groups.

A Culinary Adventure

Paul Bowler, Coleshill

Some time ago I was invited to take part in a cookery course for people with sight loss, which was held at the White Hart Centre in Atherstone in April and May this year.

I've largely cooked for myself since moving into my flat a decade ago, but hoped I could learn a few more things. In particular, how to prepare fresh vegetables, something I tend not to do at home because I'm not what you might term a skilled slicer. Instead I'll always look for ready prepared food. But here was

a chance to try it out in a controlled environment, so I signed up.

The course was run by Janet, a volunteer at the centre, and she was assisted by Karen, who many of us know from Warwickshire Vision Support. I was joined in my culinary adventure by Bev, who lives in Fillongley, one of North Warwickshire's many remote villages.

The course was 4 weeks in length, and before we got started, Janet gave us a quick overview of what we would be doing. As well as the cooking itself we would also be covering hygiene, and safety in the kitchen. Our first meal, spaghetti bolognese, had already been planned, but Janet asked us what else we wanted to do, so we quickly settled on dishes for the rest of the course. Week two would be a pork chop dinner, followed by beef stroganoff the week after (my choice), then bread and butter pudding and a nice chocolate cake to round things off.

With the planning done, it was through to the kitchen where we were soon slicing, dicing and cooking with confidence. In the first week, Janet and Karen showed us a safe way to chop onions and carrots, and how the process can be greatly aided with different coloured chopping boards that better highlight the food against the background. On another occasion we were shown a method

for buttering bread that ensures it spreads evenly.

A new experience for me personally was using a gas oven, which I've never cooked with before, and I quickly learnt that things heat a lot faster with gas. We were also taught how to safely check whether a hob ring is on or a pan is heating by holding a hand high above it and feeling for the heat. This prompted me to recall my late grandmother's method of checking. Her hob rings didn't glow when they were hot, so she would quickly pat them with her hand. Not really advisable, but if challenged about it she'd always say she'd been doing it for years without any problems.

Each week our meals gradually took shape, and the aroma of the dish of the day soon began to fill the building. The White Hart Centre includes a small cafe where people can pop in for tea and toast, so afterwards we were able to use it to sample our creations. They tasted very good, and on some weeks there was even enough for us all to take some home.

The course was very enjoyable, and I've learnt a lot. Now it's finished I'll be trying some of these dishes at home. I think one of the first things I'll have to make is the chocolate cake, particularly with my birthday approaching, and if the class is run again I'd love to have another go.

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Medical and Health

Bionic Eye for AMD

A British man was the first person in the world to have a bionic eye fitted, the Argus II. Ray Flynn had been suffering from dry Age-related Macular Degeneration for 8 years, gradually losing his central vision. He had surgery at Manchester Eye Hospital in June, where he was fitted with a device that receives images from a camera mounted on a pair of glasses, and stimulates the remaining cells in the retina to send signals to the brain.

The camera in the glasses captures light and sends it to the video processing unit (VPU). The VPU converts the light into electrical pulses and sends it to the implant in the retina. The pulses stimulate

the retina, which give the user the perception of light. The light created by the pulses is in the form of spots, which creates a pixelated view that the user must learn to interpret.

Two weeks after the implant was fitted it was switched on and by July Ray was able to see the outline of faces and watching television was easier. It was hoped that there would be further improvements.

Similar implants had previously been used on people with Retinitis Pigmentosa, of whom there are 375,000 worldwide. In comparison the worldwide figure for people with dry AMD is 20-25 million.

Research continues following this British breakthrough. At present the cost of the Argus II Bionic Eye is £150,000 per eye - but in 10 years time it could be available on the NHS.



Ray Flynn with his Bionic Eye

Diabetes

There are two types of diabetes, Type 1 and Type 2. While Type 1 is hereditary, Type 2 is acquired and linked to obesity, and being overweight can be a problem. It is thought that as many as a third of the UK's adult population is 'pre-diabetic'. This means that these people are at risk of developing the full-blown condition in the next few years.

Unfortunately, there is no consensus in the UK for defining 'pre-diabetics' but there are tests for blood sugar levels offered by GP surgeries.

Research suggests that as many as one in ten people with blood sugars in the pre diabetes range go on to develop type 2 diabetes in the following year unless radical measures are taken.

To be diagnosed as pre-diabetic should be a wake-up call to take action to avoid becoming diabetic. Cut down on sugary foods - it is surprising how much sugar there is in processed foods; one unlikely food is baked beans. Increase exercise - we are a very sedentary nation, often using transport when we could walk.

Unhealthy processed food is so readily available today, and frequently cheaper than fresh food. Sugary snacks such as sweets, biscuits and cakes can be a source of temptation.

Prevention is better than cure and there is a new NHS Diabetes

Prevention Programme - a joint initiative between NHS England, Public Health England and Diabetes UK.

To find out more, visit www.diabetes.org.uk

Telephone **0345 123 2399** or e-mail **info@diabetes.org.uk**

More Diabetics

Earlier this year the charity Diabetes UK reported that over the last 10 years the number of cases of people with diabetes had risen. There are now 1.2 million more adults living with the condition than 10 years ago, and this means that over that period there has been a 60 per cent increase. At the current rate of increase it is predicted that in a further 10 years time there will be 5 million Britons who have diabetes.

There is a cost to this increase. Every diabetic needs to control their diet to avoid further health problems. This is already an enormous cost to the NHS, using 10 per cent of the total budget of £8 billion. While everyone who has paid in to the NHS is entitled to free health care, money that is spent on preventable health problems is not available in other areas.

Diabetics should have annual checks, eight care checks are recommended by NICE, the National Institute for Health and Care Excellence. The checks include body mass index measurement and foot examinations. However, only six out of every 10

patients with diabetes are given these checks.

Diabetics who do not have these checks are at increased risk of complications. The complications suffered by 200,000 Britons each year are heart attacks, strokes and amputations.

There are 3.9 million Britons with diabetes and 11.5 million people at increased risk of developing the condition.

Diabetic Retinopathy Research

This disease is caused when the cells at the back of the eye, the retina, are damaged by high blood sugar levels. If left untreated, they can cause blindness. The disease is a complication of diabetes and is the most common cause of blindness among people of working age in Britain.

The retina is supplied with blood by a delicate network of blood vessels. When these become blocked, leak or grow haphazardly, the light-sensitive retina becomes damaged and is unable to work properly.

Treatment of the condition in its early stages has been to control the diabetes. If it is more advanced laser surgery or injection therapy can be carried out to prevent further damage to the eyes. Central vision will be saved by laser surgery, but

peripheral and night vision may be lost.

Research carried out at Johns Hopkins University School of Medicine in Baltimore shows that the recently developed drugs Bevacizumab, Ranibizumab and Aflibercept could help. These drugs block the action of VEGF, which stimulates the growth of new, often abnormal, blood vessels. While they can slow the progression of diabetic retinopathy, they do not prevent it.

Diabetic Macular Oedema

This is a common complication associated with diabetic retinopathy, and is the most common cause of visual impairment in people with diabetes.

It develops when blood vessels in the eye are damaged by a continuously high blood sugar level, which causes plasma to leak into the eye. Abnormal new blood vessels also form under the retina. This causes a build-up of excess fluid (oedema) in the macular, which is the central part of the retina. The oedema impairs light perception, causing blurred vision. If it is not treated effectively, it can lead to irreversible vision loss.

There are now more choices for some people who have diabetic macular oedema. In June, the National Institute for Health and Care Excellence (NICE) recommended the use of Aflibercept, a vascular endothelial growth factor (VEGF)

inhibitor for people who have a central retinal thickness of 400 micrometers or more.

It is marketed for injection as Eylea by Bayer Pharma and implant as Ozurdex by Allergan.

Healthy Eating

Advice on eating well with diabetes given by Diabetes UK is to:

- Eat regular meals, which means spacing them throughout the day. Breakfast is an important meal.
 - Portion sizes should be kept under control if weight watching; this can be done by
 - using smaller plates
 - for main meals dish up the vegetables first, so they occupy more space on the plate
 - don't pile different foods on top of each other, separate them
 - avoid second helpings, have a glass of water first
 - Carbohydrates in moderation should be part of each day's food. Healthy sources of these include wholegrain starchy foods, fruits and vegetables, pulses and some dairy foods.
 - Fat should be eaten in moderation. Reduce the intake of saturated fats which are found in foods that are made of animal products like butter and cheese, red and processed meats, palm oil, coconut oil, ghee. Also reduce intake of cakes and pastries.
- Try to eat at least five portions of fruit and vegetables each day.
 - Adults should not have more than 1 teaspoon (6 grams) of salt each day. Salt is part of many processed foods, so it is better to cook from scratch where possible. Food can be flavoured with herbs and spices. Food labelling states the amount of salt in any product - a lower salt option may be available.
 - Fish is a healthy food, especially oily fish, such as mackerel, sardines or salmon. It can be fresh, frozen or canned (but avoid added salt). Also avoid fish fried in batter.
 - Beans, lentils and pulses are low in fat, high in fibre, cheap and packed with nutrients. Kidney beans, chickpeas and green lentils are also healthy.
 - Sugary foods such as cakes should be eaten in moderation and artificial sweeteners can be used if drinks and foods need to be sweetened.
 - Drink 8-10 glasses of fluid each day. Water is best, but milk, tea and coffee, herbal teas and some foods, particularly fruit and vegetables contribute to the total.

Although this advice is aimed at diabetics, what has been described is simply healthy eating.

Cataract Treatment

Misty vision can be a sign of cataracts; a cloudy patch grows over the lens of the eye, and it can be difficult to see in dim or bright light. The treatment of cataracts is to remove them; this is the most commonly performed operation by the NHS, it is therefore relatively routine and does not take long to carry out, usually about 15 minutes. More than half of the UK population is likely to have a cataract or cataracts as they age.

Manual phacoemulsification is carried out under local anaesthetic. The surgeon makes an incision in the cornea at the front of the eye and then makes a circular opening in the capsule holding the affected lens. An ultrasound probe breaks up the lens, which is suctioned out and replaced by an artificial lens of clear plastic.

Complications can be serious, but are only experienced by two people in every hundred. There could be a tear in the capsule holding the cataract; this might lead to inflammation, retinal detachment and poor vision. Usually any swelling or redness is temporary and vision improves immediately.

Laser surgery is already available privately. The laser machine first makes a detailed 3D image of the eye, which is displayed on a screen, enabling the surgeon to position the laser precisely. Next, the machine emits a femtosecond laser beam to

make the initial cut in the cornea, cut the opening in the capsule and break up the cataract. Each pulse of the femtosecond laser beam lasts for one millionth of a billionth of a second. So the operation itself takes about a minute. The procedure costs more than £2,500 per eye.

A trial is taking place at Moorfields Eye Hospital in London to compare laser surgery with the standard operation. A trial using 800 patients will compare visual outcomes, quality of life and complication rates.

If the laser operation proves to be more successful it is likely to become available free on the National Health Service.

Eyedrops for Cataracts

Every day hundreds of Britons are diagnosed as having cataracts and it is estimated that every year 300,000 operations to remove the clouded lenses are carried out.

The lens refracts light onto the retina at the back of the eye and is made up of millions of slender, fibrous cells containing proteins called crystallins.

The density of these crystallins plays a role in determining the clarity of a person's vision. Cataracts occur when these proteins become damaged and the cells make opaque clumps that scatter light. In healthy eyes it appears that these structures are broken down by an enzyme called Lanosterol, produced by the LSS gene.

Work by a team of Chinese scientists studying the DNA of two families with a genetic predisposition to cataracts discovered that they shared mutations of the LSS gene. Lanosterol has been tested on the cloudy lenses of animals, and made their eyes significantly clearer, it broke up the clusters of proteins on a molecular level.

The lenses of our eyes are one of the most delicately structured parts of our bodies. The crystalline proteins govern the shape of the lens and these are some of the densest human tissues.

These tissues are not replaced as people age and the fibre cells in the lens lose their alignment, often leading to a natural clouding effect in the eyes of old people. Ultraviolet light from the sun can also damage the cells.

The population in this country is ageing and this situation is predicted to continue in the UK and around the world. This will mean that the incidence of cataracts will double in the next 20 years. If this research is successful the need for surgery could be reduced by almost half.

N.B.

The presence of one eye condition does not preclude the development of a different one. Regular eye checks are important as they can discover problems with our sight and general health.

Surgery for AMD?

In August a female patient with wet Age-related Macular Degeneration had a groundbreaking operation at Moorfields Eye Hospital in London. A single stem cell was taken from an embryo, a 'patch' of cells grown in a laboratory and then transplanted into one of her eyes. The operation was successful, although the impact on the patient's sight would not be known for some months. An additional nine people were due to take part in the same trial.

A great deal of research has taken place into using embryonic stem cells. It is hoped that such surgery could be routine within 3 to 5 years. Surgeons believe that the technique will also work on patients with dry AMD.

Seasonal Affective Disorder

Christine Ramble, Warwick

Many of us don't feel as lively or cheerful in winter as we do in spring and summer. As the autumn days begin to draw in we might have less energy, feel low-spirited, tend to eat and sleep more and are less inclined to go out. In hedgehogs and bears those would be signs of approaching hibernation. In humans it's probably a case of the 'winter blues'. But if the symptoms are bad enough to seriously affect daily life and activity, it could be Seasonal Affective Disorder (SAD).

SAD is a form of depression, so called because it is related to the change in season. It occurs in winter, usually in northern countries, and in the UK affects about three people in 100. It tends to come on as the days get shorter and light levels decrease. It is usually worse from December to the end of February, when it lifts gradually, or you could suddenly wake up one morning and feel completely different! The symptoms are similar to those of depression:

- low energy, lethargy
- irritability
- low mood, no zest for life
- loss of libido
- difficulty in concentrating
- sleepiness, hard to get up in the morning
- inclination to shut one's self away and avoid socialising
- desire for carbohydrate and sugary comfort foods

What causes SAD?

The causes are not fully understood but are thought to relate mostly to low levels of environmental light. Light stimulates a part of the brain called the hypothalamus, which controls mood, appetite and the daily rhythm of waking and sleeping. When it gets light, the light sensitive cells in the retina send a message to the hypothalamus, which then signals to the pineal gland to stop producing the hormone melatonin,



which regulates sleep. When it gets dark, more melatonin is produced to make one sleepy. This mechanism might not work properly in those with SAD, who may retain higher levels of melatonin.

Light also affects the hormone serotonin, which serves as a neurotransmitter carrying messages between nerve cells in the brain. Serotonin is linked to mood and clarity of mind. High levels of serotonin make one feel alive, alert - the 'feel good factor'. Low levels are found in those in a depressed state who feel sluggish and find it

difficult to take an interest in things, concentrate or think clearly.

Who is affected by SAD?

Although SAD can affect all age groups, it is less common in older people, and more women are prone to it than men. No studies appear to have been done which link visual impairment with SAD but it is known that in those who are completely blind, the eye's inability to perceive environmental light can lead to a serious disturbance of the body clock. This sets the circadian (daily) rhythm because light perception is vital in maintaining the natural 24-hour cycle.

What is the treatment for SAD?

Not surprisingly, one of the main treatments for SAD is light therapy. This usually involves sitting next to a special lamp of a particular brightness for a certain length of time daily throughout the dark months. Dawn simulation lights may also help; these bedside lights come on gradually in the morning, sending the necessary signal to the brain that it is time to wake up. These lights are commercially available, but they can be quite expensive and before you buy one you should, if you think you have SAD, first consult your doctor for a proper diagnosis.

If your GP thinks that you are indeed suffering from this form of depression, which can affect some

people quite seriously, he/she may prescribe antidepressant medication, light therapy or a course of cognitive behavioural therapy (CBT). Your GP will probably also ask you whether you take any physical activity, as this has been shown to be very beneficial in lifting mood and promoting proper sleep and appetite, particularly when taken outdoors.

There are no studies to suggest that Visually Impaired People (VIPs) are more susceptible to SAD or winter blues than anyone else. However, people with impaired vision generally experience lower levels of environmental light than those with normal vision. This may be due to the eye condition itself, or because they need to wear dark glasses. So it is important, weather permitting, to get outdoors as much as possible in winter to take advantage of whatever natural light there is, and even a short walk on a crisp winter's day can be enjoyable and exhilarating.

It's no coincidence that many winter festivals centre around the solstice, when humans have since antiquity expressed their fundamental need for sunlight by lighting fires, torches and candles to encourage and celebrate the rebirth of the sun. It's an affirmation that even the darkest days will pass, and after December 22nd we can start to look forward to brighter times to come.

Leisure Activities

A Special Perspective on Photography and RP

Nivi Morales, Leamington Spa

Photography has been in my life from very early on. When I was 5 years old my mum bought me my first camera and photo album.

Both my parents are keen photographers and had SLR cameras, which they always played around with when they travelled. I believe this is how I developed an interest for photography. My main interest always was capturing the moment, not so much understanding how cameras worked technically.

This interest gradually started to blossom into full passion when I owned my first digital camera. It was great to see the results of my experiments straight away, but it was when I discovered the macro option on a mobile phone camera that my world shifted. I started taking close up photos of flowers as I walked around Warwick town and loved it. Capturing those moments reminded me that I could appreciate the small beautiful things in life and helped me cope with the stress of daily life.

I would often share these images with others and get very nice reactions, it feels like I was making their day better. This is no small feat as I suffer from a mild case of Retinitis Pigmentosa - a condition that



deteriorates my peripheral vision. In a way having this condition made my ability to notice and capture images even more significant. Photography has become a form of art therapy for me. It has become a way of transforming the way I perceive living with a progressive visual impairment.

The need for better means to capture images naturally drove me to improve the cameras I was using.



So I went from smart phones to a Nikon Coolpix Compact and to my current camera, a Cannon G12. I have recently upgraded to a Nikon D3100, my first ever DSLR! Photography subjects have also evolved from flower macros to trees, landscape, urban and my latest favourite - gig photography.

In the journey to expand my photographic passion I've also

been able to meet wonderful fellow amateurs. Two years ago I collaborated in organising two editions of the 4amproject in Warwickshire - a project that captures life at 4 o'clock in the morning. The concept fascinated me as I've always been a night owl. There was no doubt that these two projects presented challenges due to night blindness related to RP. But I was



still able to capture great images. Each edition brought together 16 to 18 other amateur photographers, of whom I was the only one with a visual impairment, at a local historical site to which we were given free access (more information on warwick4amproject.blogspot.co.uk)

In 2013 I collaborated with a good friend of mine in promoting local musicians through a project called Plug and Amp. This project involved going to gigs around Warwickshire, which she would review and promote through a blog and social media - occasionally using my photography as part of it. More than once we found ourselves in venues with dim light, which can be a challenge. But I won't let my night vision get in the way of my passion for music. As a result my photographs have been published in two local newspapers!

I feel this whole process has highlighted the importance of using creativity as an outlet to cope with vision loss, and most importantly not to succumb to my own internal dialogue of 'I can't do this because of my visual impairment'. Breaking those barriers is key to maintaining a positive attitude, which is absolutely key in facing life's challenges. You can see my work on:

www.flickr.com/nivims

<https://instagram.com/nivims>

Editor

Retinitis Pigmentosa, regularly referred to as RP, is the name of a group of inherited eye conditions affecting the retina at the back of the eye. The sight loss caused by RP is gradual, usually over many years. At present there is no treatment or cure for RP.

If you are interested in photography and want to share your ideas with others, please call **Sue** on **01926 411331** and we will see if we can link you with one another.



Gardening Tips

Gardening isn't easy when you can't see, but it doesn't mean you have to give up gardening. If you have any tips on what makes gardening easier or more enjoyable for you, send them to us – we can all learn from each other!

Winter can be drab and though snowdrops and crocus will be emerging in the new year, you might want to add a little more instant colour. Pots of already flowering polyanthus, miniature narcissi and daffodils will be cheap at the greengrocers and supermarkets, and even if you haven't got a garden, these will brighten any window sill, or you could cluster several into a window box or put pots outside your door.

When they finish flowering you can plant them out either in your own or a friend's garden and they will be ready to flower again next year.

P.S.

You can also bring garden colour and scent into your home with a range of bulbs, one of which is hyacinths.

Thrive

Thrive is a national charity that helps people with a disability to start or continue gardening. It will help you carry on gardening, whatever your disability.

It has practical information to make garden jobs easier, advice on taking



care, useful hints and tips and details of the equipment and tools that will be particularly helpful. Thrive has worked with visually impaired gardeners for more than 30 years and during that time has collected a wealth of gardening hints, tips and stories from blind and partially sighted people.

Thrive publishes a range of leaflets, fact sheets and books. Some of them are free and some can be purchased from the Thrive website. The information provided includes getting ready to garden, digging, weeding, pruning, sowing seeds, planting out, moving things in the garden and garden design - all when you have sight loss. There is also advice on equipment and tools and raised beds.

To carry on or start this therapeutic hobby contact Thrive by telephone on **0118 988 5688** email **info@thrive.org.uk** or visit www.carryongardening.org.uk

Apiculture

Wendy Carter

Good Companions Club,
Leamington Spa

In June my daughter Juliet and I attended an introductory day course about Beekeeping, having been given two beehives, which we keep at her allotment.

In the morning we had an introductory talk about Beekeeping, which was fascinating and intellectually challenging.

In the afternoon the participants, all clad in the essential protective clothing were split into teams, each with a hive and an instructor. We were introduced to an examination of the hives, with no ill effects. In all, it was a friendly experience.

The next step will be in February to sign on for the 7-week course. We hope to have Monty Don, a TV gardener, as a Bee Mate in future and meet members of the Beekeeping Association as we launch into an enriching experience.



Bird Song

January 30th-31st is the Great Garden Bird Watch weekend, when the Royal Society for the Protection of Birds (RSPB) encourages people to go out into their gardens or open spaces and observe how many different types of birds they can see in an hour. This survey helps the RSPB keep track of our bird population, many of which are declining at an alarming rate, as well as noting newcomers as the climate changes.

Although visual impairment might make it difficult or impossible for us to actually see birds, we can (as long as we're fortunate enough to have our hearing) still enjoy their song and identify them by their calls. After all, the dawn chorus takes place in near darkness and everyone, whether sighted or not, has to rely on their ears!

If you can barely tell a blackbird from a sparrow or would simply like to learn more, the RSPB produces good recordings which will help you 'name that bird', and their excellent book 'Bird Voice' has printed information on over 200 species of British birds which, when you touch the picture with the special stylus provided, also plays the relevant call.

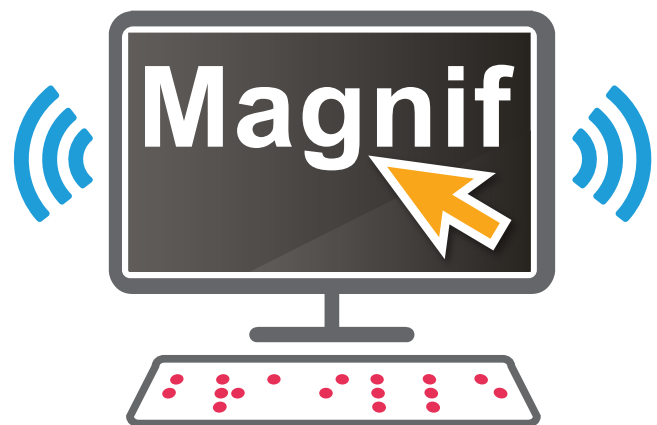
To take part in the Great British Bird Watch 2016 request an application form, which should be available shortly by calling **01767 693680** or download from rspb.org.uk



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Winter: Challenge or Opportunity?

Christine Ramble, Warwick

The winter months can seem long and dreary, especially once the bustle and anticipation of Christmas and New Year celebrations have passed. It's natural to feel less inclined to go out and be active, but this can so easily slide into negativity and inertia. We all need something to look forward to, literally something to 'get out of bed for'! So let's turn the challenge of winter into an opportunity, a time for making plans and getting on with projects old and new. You probably have some ideas lined up already but if not, these might help to get you going!

Make Plans

It's fun to do things spontaneously, but when we make plans to do something, we have the additional pleasure of talking about it, making arrangements and looking forward to it. Even planning something small is enjoyable - meeting up with a friend you haven't seen for a long time, or getting matinée tickets for that film or play you've been meaning to see for ages. Then there are the bigger plans:

Take a day trip

This could be via your local bus service to a place you rarely visit, or a coach excursion. There are lots of Christmas market trips, to places such

as Birmingham, Lincoln or York, or even France.

Plan a sunshine holiday for early in the New Year

There are deals to be had early in January. Just going to a travel agent and leafing through brochures can be exciting! Some companies specialise in holidays for VIPs and the RNIB produces an excellent fact sheet of suggestions that includes helpful information on funding, useful contacts and guide services. For a free copy ring **0303 123 9999**

Plan your garden (or help a friend with theirs)

As the saying goes - you can't be a pessimist if you're a gardener! The weather might be too bad to get out there but just looking through seed and plant catalogues and gardening magazines (audio versions are available from RNIB), or visiting a winter garden, will give you ideas.

Plan a gathering of family or friends

Don't feel left out if you didn't see them over the festive season - it's a busy time for everyone. You could suggest meeting at a later date for a meal or drink at a pub or restaurant convenient to you all. It's usually less crowded then, and cheaper!

Start, or Join, a New Group

U3A (University of the Third Age)

This is a network of learning groups where older people can share their interests, knowledge and skills. There

are no exams or homework, just regular friendly study groups of like-minded people. Meetings are held locally, often in someone's home, and costs are minimal. There is a huge range of subjects, from history, languages, dance, practical crafts and wildlife to rambling and walking - you're sure to find something that interests you! To see what the U3A groups are doing in your area, see www.u3a.org.uk, or for a helpful write up see www.ageuk.org.uk

Book Clubs

Remember the famous Richard and Judy book club that really got these going? Group members agree on a book that they all read and then meet up monthly to discuss it. As a group member, you could ensure that the book is available in audio version. Local libraries often have a book club but you could always set up your own with a few friends and meet in each other's homes. There are even telephone groups for those who can't get out.

Social and Friendship Groups

These are exactly that: members go on pre-arranged outings to theatres, cinemas or restaurants, to a quiz or a ten pin bowling evening, or it could be as simple as a Knit and Natter group (no, you don't have to be good with the needles!) And don't forget the Association's own VIP Clubs all around Warwickshire - contact **01926 411331** for more information.

Volunteering

Deteriorating vision can sometimes make us feel that we're no longer very useful. Not true! We all have a part to play in society, and volunteering can reassure us that we are still valued and needed. There's always something you can do, and we all have different abilities, so explore the possibilities. Perhaps it could be working in a charity shop, on a telephone help line, befriending a lonely person by visiting or on the phone, stacking tins at a food bank, helping at an animal refuge. Just think about what you can do, and what you would like to do, and there's bound to be a charity that would welcome you and most offer basic training and support. If you're alone at Christmas, helping out at a shelter for the homeless can be a particularly rewarding experience all round.

IT Skills

Whether we like it or not, computers and digital and electronic devices are here to stay, and they really do add a lot to our lives. They bring the world to you even if you can't get out. You can keep in touch with friends and family easily, research a wealth of information, take a university course, read books, take photographs, listen to music, catch up on radio and TV programmes - the list is endless! Winter is a good time to learn the basics, brush up on your existing

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skills or find out how to use a new device like a tablet or smart phone. You can book sessions with one of our IT Officers by phoning the office on **01926 411331** These sessions will usually be at one of our Vision Support Centres, or sometimes at the Warwickshire Vision Support office or occasionally in your home.

Family History

Who do you think you are? Finding your roots could absorb your interest and time for the entire winter! It involves patient research, contacting relatives you never knew you had and delving into lives from a bygone age. It's simple to start with: looking for old diaries, letters, photographs, and certificates of birth, marriage and death. Then there are some local groups or adult education classes to guide you, and the County Record Office in Warwick also websites like www.ancestry.com where you might find more information. You will need a sighted person to help you sometimes because archive information can be difficult to read, but there's usually a friend or family member who will enjoy getting involved, especially if it means a trip to the National Archive at Kew (National Express coaches drop you close to it). Getting a professional genealogist to help with some of the work might not cost as much as you think, although it would be expensive to have a complete family tree drawn up as a piece of art work

you could hang on your wall! There are several magazines on the subject, including audio versions.

And while you're at it, why not write the story of your life? Winter is a good time to reminisce, remember the past - write it down. If you can't read your own handwriting, even in felt tip pen, or can't type (touch typing is another skill you could easily learn this winter!), record your voice on one of the many devices now available. You can do this on your own at home, join an existing memoir or life writing group or set up your own with a few friends. Don't be bashful about your writing skills - just put it down as if you were telling someone a story. It doesn't have to be a literary masterpiece; just something your family would enjoy reading and value as part of their ancestral story.

Once you really get stuck into some of these projects and ideas, you'll wonder where the time went! So take advantage of these quiet winter months and before you know it, we'll be looking forward to spring.

Share your winter adventures by writing to the Letters page of Warwickshire Vision, so we can publish it in the Spring edition - we'd love to hear from you!

Editor

Christine is Registered Blind.

Services for VIPs

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Rosalie Visick

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Views expressed in Warwickshire Vision are not necessarily those of the management of Warwickshire Vision Support.

All photographs of flowers and the night scene are courtesy of Nivi Morales who is featured with her camera on the front cover.



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