## A statement of appreciation for our FlexxiCore Passive Exerciser

Some years ago on the internet we ran across Energy for Health's information and video regarding the FlexxiCore apparatus. We at once saw its potential as a way in which my husband, Kim, could experience more mobility in his limbs.

Kim has had secondary progressive MS since 1979 which has eventually resulted in total paralysis from the waist down and ataxier in his arms when he attempts any wilful act with them. He has been treated by a physiotherapist generally twice a week in order to keep his body in as best form as possible under the given circumstances. The exercise machinery which is available in a nearby gym and which can move both the arms and legs in circular movements (as in bicycling) has not been an option for many years, as they do not afford total passive exercise, but rather require a bit of effort.

We ordered the FlexxiCore and placed it at the end of Kim's bed on a solid piece of wood covering the entire width of the bed. After using a quite slow program for some time, we advanced to the Auto 1 program with which Kim was quite pleased. We could however see that this placement was not optimal, as the whole mattress moved as well, but that was what was possible under the circumstances.

In time however even that was not possible due to the fact that we acquired a hospital bed and a new system for turning Kim over in the bed, both of which are governed by sensitive computers. We observed a number of times the shaking of the bed and were of the opinion that the computers would be damaged in the long run due to the shaking.

We opted for the above two systems even though it meant stopping the use of the FlexxiCore . The rationale was as follows. The hospital bed provided an anti-trendelenburg option. That means that the entire bed can be moved into a position whereby the head of the bed is aproximately 15 cm higher than the feet end. (See Andrew W. Fletcher's description on the internet under Inclined Bed Therapy.) This choice was made due to the newest research in MS which proposes that in MS patients there is venal insufficiency in neck and chest which results in iron deposits around the nerves in the brain. (See CCSVI on the internet.) The positioning with the head high will not correct the presumed disorder, but it is the next best thing, as gravity is made use of in improving blood flow from the head. We cannot claim to see improvement in Kim's condition from that position, but Kim definitely prefers it, so it does have subjective value, whereas an operation to correct the condition is not available for him. Moreover the anti-trendelen has become invaluable to us since, as Kim now receives his food/liquid through a stomach tube, the inclined position is optimal for that.

The new system for turning Kim over in his bed was a great improvement both for Kim's helpers and for himself. The German Eka-move system turns the patient gently from side to side by inflating and deflating two air channels under the mattress according to the computer settings. This prevents bed-sores and relieves the helpers from physical strain. From the start we used the side resting position of 30 degrees, as recommended in some English research, as most advantageous for breathing. We very quickly opted out any rest on the back, as it obviously worsened Kim's sleep apnea.

In the year which followed these new developments Kim was also outfitted with a C-pap apparatus for the sleep apnea. However an ever present problem with mucous accumulation in the throat worsened. (I can see that it is noted as far back as 1999) Now the mucous coupled with problems with swallowing whereby food particles entered the airways became the seat of bacterial growth. This resulted in five serious episodes of pneumonia/bronchitis from the fourth of January til the middle of May 2011. It must be said that Kim generally succumbed to one bout of illness each

winter. But this winter it was essentially unending. Kim received penicillin on these 5 occasions (5x10 days each). When he was having trouble breathing due to the obstruction caused by the accumulation of mucous, he was unable to have the C-pap apparatus on, and each bout of illness made him weaker and weaker.

When the attending physician at the last episode turned Kim completely over on both sides to listen to his lungs, Kim coughed really strongly. Generally he didn't have the strength to do that. Only then did I realize the mistakes which had worsened his condition. One: the new turning system did not bring Kim completely over on his side as before. Two: Kim no longer had the use of the FlexxiCore Passive Exerciser.

We then discovered that Kim's ceiling lift which was relatively new to us could move Kim from the bed to the floor. We placed a thin mattress on the floor and at the bottom we placed the FlexxiCore directly on the surface of the floor. It was very obvious from the start that this new position was much better for Kim, as now it was only his body moving and not the bed as well. We used a very slow movement (80rpm) in the beginning, but having forgotten the initial instructions to work up from one minute, we started in with 15 min.! At the same time we began manually turning Kim over completely on his side for the duration of his daily naps (from 2-3 hours per day). He still used the Eka-move at night. Within 3 days the mucous was dispersed, and Kim was a completely new person. It was like witnessing a miracle!

In July Kim was called in to the Respiration Center in Aarhus to have his C-pap and mask checked. One of the questions which the doctor asked was, what happened to the problems with mucous? We of course told him about our experience with the FlexxiCore, and his reply was, "that is exactly our approach: Mucous-loosening through exercise". But without the FlexxiCore that was impossible for Kim. The physiotherapy twice a week could not provide that.

After a few month's time with no further problems with mucous, Kim was on two "walks" outside in the same day. Maybe he had just caught a cold, but the sound of mucous in his throat panicked me. I said to Kim, we must do something, let's see if you can take a stronger program. By that time we were using Auto 1. That day we changed to the FlexxiCore's Auto 2, the Oxygen program. Kim is even more keen on it than Auto 1, though it looks like a real "shake-up"! That day's mucous disappeared at once and has not returned, so now it is only Auto 2 which Kim uses.

I think that it's fair to say that the FlexxiCore has been a real life-saver for Kim. I'm frankly not sure that Kim would have made it through another bout of pneumonia. And although it is sad that Kim had to go through all that, we would never have known the true value of the FlexxiCore without experiencing that total reversal of his condition.

These many benefits of the FlexxiCore would have been enough to merit our gratitude, but we had another surprise coming. A short time after choosing to use the Auto 2 (Oxygen) program, a remarkable thing happened which has continued to this day. For whatever reason, Kim has for years only had mobility in his right hip. When Kim was positioned to rest on his side during the day, his bent knees always fell easily to the right. However when Kim was to rest on his left side (it is necessary to use both positions in the course of the day), his bent knees had to be pulled to the left manually and held there while pillows and the like kept them in place for the duration of his rest. Hard work for the helpers and hardly pleasant for Kim. That problem simply no longer exists! A tight, closed hip is now a moveable hip – something which years of physiotherapy had not achieved.

A new advantage of the FlexxiCore has been made clear this week through the report of a Danish scientist. A recent European study with Danish participation has further revealed that when the energy-molecule ATP is released through physical activity, it stimulates new bone structure and thereby also the preservation of bone (Professor Peter Schwarz, Det Sundhedsvidenskabelige Fakultet.) So now we can add one more benefit which the FlexxiCore Passive Exerciser provides even though it is unobservable to the eye.

We certainly want to recommend this wonderful passive exerciser to MS patients and anyone else who wants to optimize their health through effortless movement.

Sara and Kim Damskier Denmark, August 2011