

LoFric[®]

Issue No. 3, Summer 2005
A newsletter for CIC users
Astra Tech, USA

bladdernews

INSIDE

Feature Story

**The Advantages of Using the
LoFric Catheter in Urological
Care of the Spinal Cord
Injured Population**

Personal story

**Living with
Bladder Exstrophy**

New!

**LoFric Ready-Kit: New &
improved**

**Plus, the new LoFric Primo
coming soon**



Welcome... to Bladdernews issue #3!

Announcing two new products from Astra Tech. Read about the new and improved LoFric Ready-Kit (page 6) and the new LoFric Primo (page 11).

Inside this issue, you will also find a personal story about Bladder Exstrophy, a condition affecting 1 in 40,000 children born.

The feature article talks about the urological care of the spinal cord injured population.

Please continue to send in your suggestions and comments for future newsletter issues. Send your letters by mail or email to the address below.

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The Advantages of Using the LoFric C of the Spinal Cord Injured Population

Article by Luis Montes, M.D., Medical Director of the Rehabilitation Dept.,
Children's Hospital Los Angeles

An estimated 180,000 to 250,000 people with spinal cord injuries are living in the United States. The causes of spinal cord injuries vary with different age groups and roughly half of the people present with paraplegia (below T-1 vertebral level) and half present quadriplegia (above T-1). In each category roughly half present with complete paralysis and the other half have varying degrees of incomplete paralysis.

The National SCI Database provides information collected from the 13 regional Model SCI Centers throughout the United States that helps guide medical professionals in the care of the SCI population. The information includes: the general incidence and prevalence of SCI, the causes, the demographics of the SCI population, their medical characteristics and complications, and the outcomes for persons treated in these regional centers.

Persons with a spinal cord injury are often plagued by a number of medical complications that arise during their lifetime. In regards to the neurogenic bladder, these complications can range from a simple urinary tract infection to a life threatening infection. In addition, if the bladder is mismanaged, the person may ultimately end up with end stage renal disease. In the post WWII era, the medical community did not truly understand the complexities of the neurogenic bladder and unfortunately many patients with SCI succumbed to end stage renal disease. Fortunately, modern day physicians working with the SCI population now realize that preventive care is paramount in maintaining a healthy bladder and avoiding serious medical complications.

One of the most important advancements in the care of the neurogenic bladder is the advent of the hydrophilic catheter. Astra Tech pioneered and developed the LoFric hydrophilic catheter and numerous studies have documented the advantages of this catheter over non-hydrophilic catheters in the market. Furthermore, the LoFric catheter has established an excellent reputation among its users, and medical professionals regard this catheter as the best catheter on the market. Studies have shown that persons who use LoFric have fewer problems with urinary

tract infections and have a lower frequency of urethral trauma.

During the time I was Medical Director for the Pediatric and Adolescent SCI Program at Rancho Los Amigos National Rehabilitation Center (one of the 13 Model Systems) from 1990 – 1996, there were no such things as hydrophilic catheters. I was well aware of the complications that often arose from chronic intermittent bladder catheterizations. Aside from the frequent urinary tract infections, many of my patients would suffer from urethral trauma that resulted in significant bleeding or bladder neck spasms that would prevent the passage of a catheter. Many of these patients would show up to my clinic in distress and after a few attempts to pass the catheter, I eventually would call to the urologist to take over their care. These persons required treatment with anti-spasmodic medications and once the urologists were able to pass the catheter they would leave the catheter in place for one to two weeks. Some patients would ultimately end up in the operating room for repair of a urethral tear or bladder neck sphincterotomy. Luckily, these incidences of complications are significantly decreased in persons who use LoFric hydrophilic catheters.

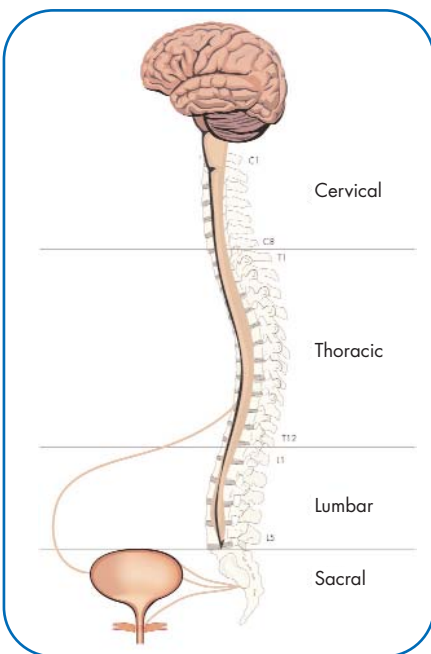
In my present job as the Medical Director of the Rehabilitation Department at Childrens Hospital of Los Angeles, I care for a number of children with spinal cord injuries that are at risk for severe bleeding due to a low platelet count caused by chemotherapeutic drugs. In addition, at our facility we care for children with hemophilia that have suffered a SCI from a bleeding into their spinal canal. In both of these populations, the risk for a urethral bleed is significantly increased with intermittent catheterizations and when they do occur the medical management is often very difficult. The time it takes to control these bleeding episodes dramatically delays their rehabilitation. As a result of my experience in dealing with these medical complications, I developed a policy to only use hydrophilic catheters in all children with spinal cord injuries admitted to my service. Furthermore, I specifically order the LoFric catheter because it is the superior product on the market and

Catheter in Urological Care

has the lowest frictional resistance.

My interest is advocating for good urologic care in the SCI population extends beyond my medical practice and has evolved through my work in the field of violence prevention. This work has taken me into the communities of South Central Los Angeles where many of my past patients live. This area has one of the highest rates of violence in America and literally the highest concentration of adolescents and young adults with SCI caused by firearm injuries live in this part of the world. In 1991, I joined forces with an agency called Youth ALIVE. This agency was established in Oakland California in 1985 and is dedicated to reducing youth violence. In 1991, Youth ALIVE expanded its "Teens on Target" Program to Los Angeles. The "Teens on Target" program trains youth to become violence prevention advocates and conduct violence prevention workshops in the schools plagued with high rates of violence. Each workshop extends over a 5-week period and the students review the risk factors that lead to violence. The program also provides peer-mentoring services to many high risk youth and provides them with alternatives to violence. While working at Rancho Los Amigos Medical Center, I recruited several of my patients who had suffered a SCI from a gunshot wound and trained them to become violence prevention advocates. Since program inception we have reached well over 40,000 youth with our violence prevention message and have trained over 750 youth to become peer mentors.

In 1995, Youth ALIVE started another program in Oakland, California called "Caught in the Crossfire". This program provides case management for youth who are victims of violence and are cared for in Emergency Departments or admitted to the hospital. Program results are outstanding. Based on findings from a multidisciplinary evaluation team, hospitalized youth who participated demonstrated a 70% decrease in incarceration compared to youth who did not participate in the program. In addition, 30% of the targeted youth received special tutoring when they returned to school and 25% obtained employment. The results have been published in the Journal of Adolescent



Injuries to the cervical area (C1 through C8) result in quadriplegia. Frequently, quadriplegia is accompanied by paralysis or weakness of both arms and legs, loss of physical sensation, loss of bowel and bladder control, and sexual dysfunction. Less common are injuries to the thoracic area (T1 through T12) and the lumbar area (L1 through L5), which result in paraplegia. Paraplegia is accompanied by paralysis or weakness of the legs, loss of sensation, sexual dysfunction, and problems with bowel and bladder control. Arm and hand functions are usually unaffected. Injuries to the sacral region (S1 through S4) primarily results in loss of bowel and bladder control and sexual dysfunction. Some sacral injuries may also cause weakness of paralysis of the hips and legs.

Medicine. In 2004, Youth Alive received the necessary funding to fully implement the program in Los Angeles County.

The point to be made in describing these community outreach programs and its relation to urologic management is first there is an unacceptable rate of violence in our society that has dramatically increased the number of youth paralyzed by guns and consequently the rate of urologic problems to be addressed in this population. Second my involvement with the program has given me insight as to how a number of people with SCI handle their urologic care on a daily basis. Through these programs I have employed a number of young men and women with a SCI as peer mentors or as part of our Youth ALIVE staff in Los Angeles. I have witnessed that urologic problems in my employees contribute to a

number of work days lost and affect their quality of life. Medical management of some of the complicated urologic problems mentioned previously often requires weeks to resolve. During this time, the person is absent from work and is often overburdened with the loss of income and the demands of dealing with their medical problems. I also have observed that some of my employees suffer from depression when having to dealing with a complicated urologic problem. Once they return to work,

(Continued on pg. 11)

NEW FACES AT THE OFFICE!

The LoFric team has welcomed two new people to our office. We are very happy to have them!



Kim Adams - Executive Assistant

Working primarily as the assistant to the Vice President, Kim also overlooks the general office administration and helps with customer service and sales needs.



Jessica Schulte - Marketing Assistant

Jessica assists the Product Manager and works primarily with trade shows, promotional items, and the Website.

FREQUENTLY ASKED QUESTIONS

Can I leak during or between catheterizations?

If you use the catheter size that is recommended for you, the risk of leaking during catheterization is very small. By emptying your bladder regularly and thoroughly, you also reduce the risk of leakage between catheterizations.

Could I hurt myself with the catheter?

There is little chance of hurting yourself with the LoFric catheter. The slippery surface of LoFric causes minimal friction against the urethra and cannot damage the bladder. You can never insert the catheter too far because the soft, flexible catheter bends when it reaches the bladder wall so it is impossible to puncture the bladder.

Does catheterization hurt?

No, intermittent catheterization with the LoFric catheter should not hurt. Whether you feel the catheter or not often depends on the cause of your problem. People with spinal cord injuries usually have very little feeling in the area of urethra. Other people may experience the catheter as slightly uncomfortable at first, but most people get used to it very quickly.

How many times a day should I catheterize?

How often you need to catheterize varies from person to person. The schedule depends on your medical condition, how much you drink and what medications you are taking. A general rule is that the bladder should never contain more than 350-400 ml of urine. Your doctor or nurse will tell you how often you need to catheterize. Generally, every 3-4 hours is a good rule to follow.

How would I know if I had a UTI?

You may have a urinary tract infection if you are experiencing constant urgency to empty your bladder, pain when emptying your bladder, back pain, fever, cloudy or foul-smelling urine, or blood in the urine. You should always seek medical advice if you have any of these symptoms.

Is it hard to learn self-catheterization?

No, it's easy! Basic personal training is usually all that is needed. If you feel unsure, ask your nurse or doctor as many questions as necessary. In general, anyone who can catheterize using an ordinary catheter with gel can learn to catheterize with LoFric. If you are accustomed to using an ordinary plastic catheter, LoFric will feel different at first. Patient satisfaction studies show, however, that most people prefer LoFric once they become used to it.

May I reuse the catheter?

You should not reuse the catheter under any circumstances. The LoFric catheter is for single use only. If used more than once the outer layer loses its ability to attract water, and there is a risk of damaging the urethra. The risk of infections may also increase.

What do I do if I can't get the catheter in?

It can sometimes prove difficult to insert the catheter. This is usually because the sphincter muscle is closed. If you are tense and find it difficult to relax, a good tip is to cough a few times. The sphincter will then open up, and it will be easier to insert LoFric. You can also try pushing the catheter gently against the opening of the urethra. Men with a narrow urethral passage can also ask for a coude catheter from the LoFric product range, which is a catheter with a slightly curved tip to help navigate the curved urethra. Generally, LoFric is easier to insert than regular catheters, even for those with spastic sphincters.

What should I do if there is blood on the catheter?

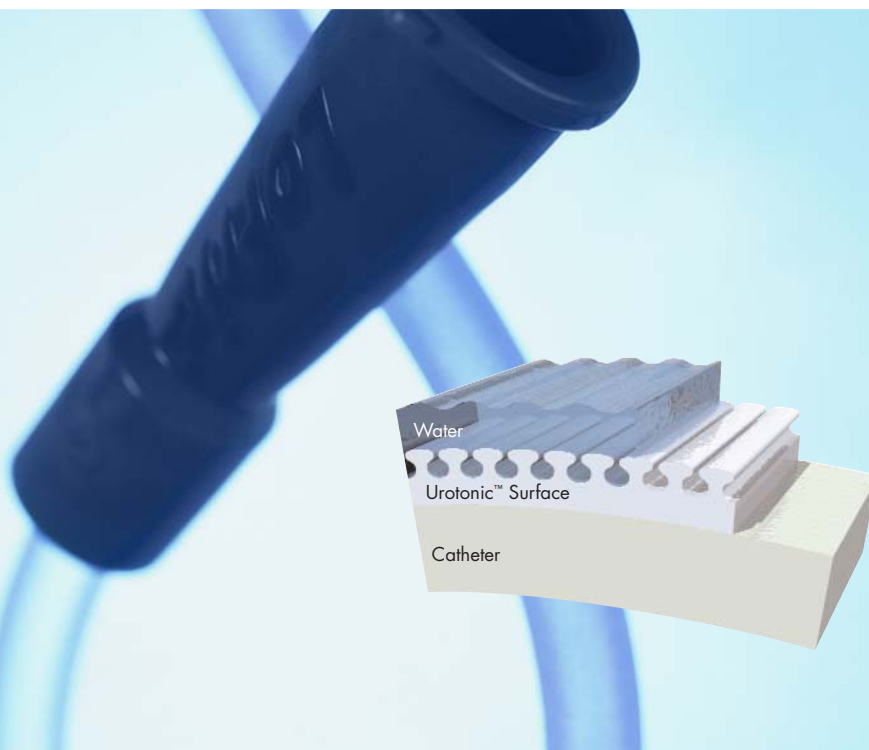
If a few specks of blood appear in your urine, don't worry. This sometimes happens and should clear up in a few days. If blood continues to appear, or if the blood in your urine increases or if you have concurrent fever, contact your doctor, as this may be a sign of a UTI.

Why don't I need any lubricant when using LoFric?

The LoFric catheter has its own coating, consisting of PVP and salt. When immersed into water the PVP attracts water, creating a so-called hydrophilic surface. A very slippery layer of water comes in contact with the urethra when you catheterize. This outer layer gives the LoFric catheter a unique ability to reduce friction to a much lower level than what is possible using uncoated catheters with separate lubricants.

The world's only catheter with Urotonic™ Surface Technology

LoFric is the only catheter with Urotonic Surface Technology - a unique surface layer that makes the catheter more comfortable to use. The secret behind this is a chemical process that makes the surface layer isotonic to urine. This means that the salt content of the catheter's surface is the same as that in urine. The result is that the hydrophilic layer stays in tact during catheterization and it provides extremely low friction both during insertion and withdrawal.



ANDREW'S LIFE WITH BLADDER EXSTROPHY

The word Exstrophy is derived from the Greek word ekstriphein, which literally means to "turn inside out." Bladder exstrophy is a malformation of the bladder, in which the bladder and related structures are turned inside out. The skin of the lower abdominal wall that normally covers the bladder also does not form properly and is separated, thus exposing the inside of the bladder to the external world. If you imagine a balloon that has been split and opened up so that the inside of the balloon is visible, you will have a picture of what has happened.

Bladder Exstrophy affects one in 40,000 children and affects the genitals, the bladder neck, the bladder, the pubic bones, and in the more severe cases, exstrophied intestines, limb deformities, and spina bifida. Eighty percent or more of these children are completely incontinent without the intervention of multiple surgeries.

Ten years ago, my husband David and I were blessed with the birth of our second baby boy, Andrew. The feelings that we experienced after his birth were a mixture of joy, confusion and uncertainty. Andrew was born with a rare birth defect called epispadias, a part of the Bladder Exstrophy complex. Because of the nature of this birth defect, it is often considered a 'hidden' or invisible birth defect. Our children face many, many surgeries and they deal with many psychological and physical issues most other children never have to face in their entire lifetime.

At 2 years old, Andrew went

through his first major surgery after multiple procedures to determine his degree of incontinence. This surgery rebuilt his urethra and attempted to provide some resistance to encourage the bladder to grow and achieve a bit more continence. Andrew had a very difficult time recuperating from this surgery. At the time when many other children were being toilet trained, Andrew wore pull-ups day and night and entered kindergarten totally incontinent.

At the age of 5 1/2, Andrew underwent another difficult surgery to reconstruct his bladder sphincter to try to achieve continence. He was off school for 6 weeks while he coped with a suprapubic catheter and then eventually



trying to clamp the catheter to encourage him to urinate through his urethra. Unfortunately it seemed that Andrew's new bladder neck was too tight and after two weeks of trying to urinate through his urethra, we were faced with the fact that Andrew would need to catheterize to urinate.

The need to suddenly deal with catheterization was very traumatic for a scared little boy who was only 5 1/2 years old. Children at this age are often quite irrational in their thoughts and Andrew resisted the need to be catheterized. For six weeks, I catheterized him every two hours until his bladder neck muscles were

re-trained and he was able to start urinating through his urethra. Slowly over the next two years, Andrew was able to achieve an acceptable level of continence while at school and he entered Grade 2 wearing underwear. Andrew was still completely incontinent at night.

After recurring infections over the next several years, it was advised that Andrew would need to be catheterized on a daily basis to fully empty his bladder. By seven, Andrew has mastered the 'art' of self-catheterization and was fully independent. Although he did not complain of much pain, I knew that catheterization through his urethra was sometimes painful and uncomfortable.

Six months ago, Andrew had a kidney scan to assess his kidney function. We were very disappointed to hear that Andrew has only partial functioning of his left kidney and it was advised that he undergo bladder augmentation as soon as possible to alleviate the high pressure in his bladder and protect the future of his kidneys. On May 27, 2005, Andrew underwent a very difficult operation to augment his bladder with intestinal tissue and to create a continent channel from his bladder to his belly-button that he could catheterize from. The channel, better known as a Mitrofanoff, would allow him to painlessly catheterize.

Recuperation again was very difficult, but after three weeks, he started catheterizing through his new Mitrofanoff. We started using the standard catheters issued from the hospital. At this time, I was in contact with Carolina Facciani from AstraTech USA and asked her if we could try their Lofric hydrophilic catheters. Andrew tried them for the first time. His first reaction was "I can't believe it...they go in SO smoothly...and it doesn't hurt when it hits the bladder wall!".

(Continued on pg. 8)



Introducing the new & improved LoFric Ready-Kit!



Whenever, wherever

LoFric Ready-Kit is now more simple than ever. We have integrated the LoFric catheter, with sterile water for wetting the catheter, and a urine collection bag. Pack some of these when you go out on vacation or anywhere access to a toilet and running water is limited. Outside its outer packaging, it folds down to fit inside your shirt pocket. And it comes with sterile insertion supplies - gloves, a drape, and a swabstick. Now you are ready for anything.



Easy to use

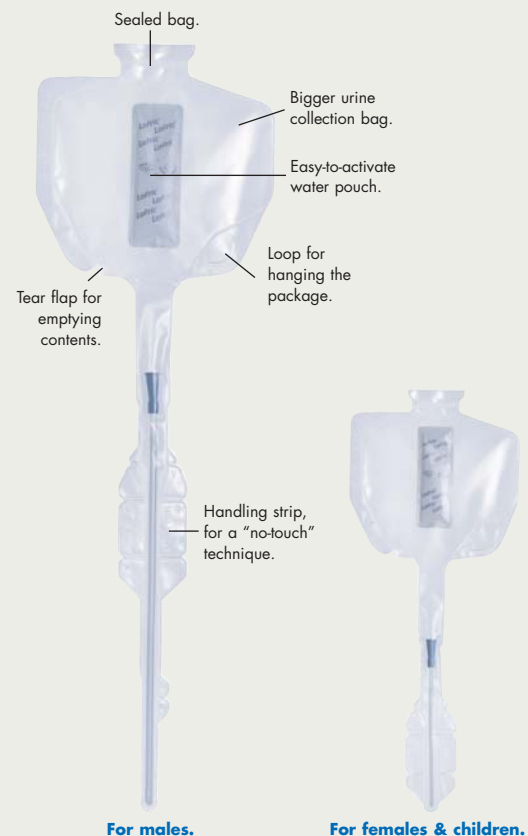
LoFric Ready-Kit has a number of new features. It's easier to handle, it's smaller, more flexible, and has a large urine collection bag, making it suitable for anyone. The water sachet is integrated, which means you don't have to remove it or close the bag with a knot before use. And if you have limited hand dexterity, it can be opened, used, and disposed of in a number of different ways, which allows you to choose the way that suits you best.

Hygienic, no-touch design

It has its own water, so you don't need to worry about the availability or the quality of the water. It has an integrated handling strip which gives you a firm grip without touching the catheter. All this makes it easy to use the catheter kit, even when you aren't able to wash your hands.

Proven clinical benefits

The catheter's surface layer binds water and is virtually frictionless upon insertion and removal. Compared to other catheters, the friction against the urethra is reduced up to 95%, offering reduced risk of urinary tract infections and long-term urethral complications, and greater comfort. Because the kit is completely closed, the catheter maintains its unique chemical properties and the surface layer stays intact until it is ready to be used.



Call us for your free LoFric Ready-Kit sample today at (877) 4-LOFRIC (456-3742).

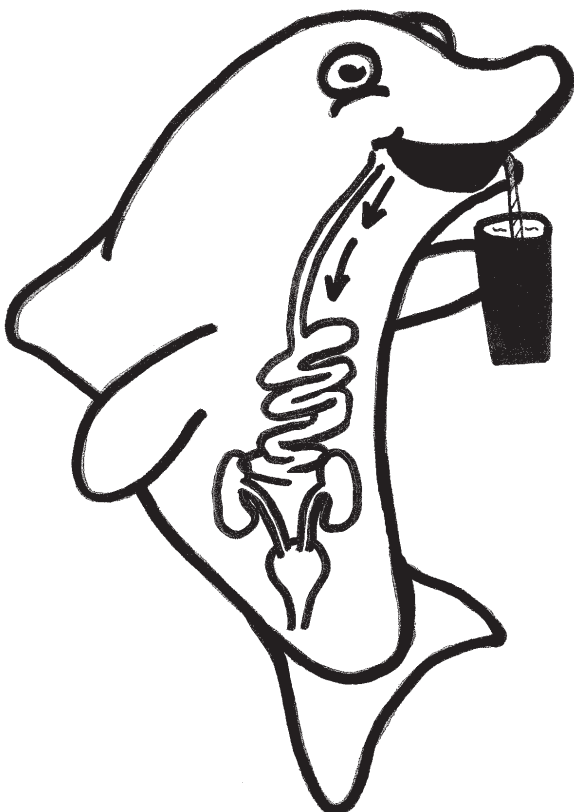
LoFric® Ready-Kit comes with sterile drape, gloves, and swabstick. All components are 100% latex-free.

Just for kids

See if you can find these words either across, backwards, or diagonally!

- bladder
- catheter
- dolphin
- kidneys
- lofric
- towel
- derek
- soap
- urethra
- water
- plastic tube

Z	T	S	U	B	R	A	P	E	K	G	H	R	C
V	S	O	A	P	K	Q	X	D	E	R	E	K	C
E	N	C	W	G	Z	O	I	J	R	T	L	M	I
D	A	J	X	E	M	D	M	K	W	A	T	E	R
Q	L	I	R	I	L	O	N	W	D	Y	T	K	F
S	H	E	B	U	T	C	I	T	S	A	L	P	O
Y	D	O	L	P	H	I	N	U	Y	Z	U	D	L
E	T	Q	A	E	C	A	T	H	E	T	E	R	F
N	N	I	D	B	V	V	Y	X	N	F	I	Q	S
D	J	O	D	F	G	R	E	D	D	A	L	B	G
I	V	K	E	C	U	U	X	X	I	N	T	T	O
K	G	L	R	X	C	I	A	R	H	T	E	R	U



When the dolphin drinks water, it goes down to his kidneys. His kidneys will turn the water his body doesn't need into urine.

Then the urine will go down into his bladder through his ureters and it will wait there until it is time to be emptied through his urethra.

Use a pencil to trace the path a drink takes as it travels down to the bladder.

(Continued from pg. 5)

Six weeks post-op, Andrew is catheterizing every 4 hours and is completely dry during the day for the first time in his life.

Currently Andrew is waking up every 4-5 hours at night to catheterize until his bladder stretches to the size that will allow him to achieve full night-time continence.

Andrew is a very active boy and enjoys sports tremendously. He plays baseball and swims in the summer and plays hockey in the winter. He is crazy about hockey! Nothing will keep him back.

Andrew has started to realize that freedom from incontinence is giving him a new lease on life. No more embarrassing accidents during the day and he is free from worry about having to run to the bathroom every hour. Andrew is beginning to learn that success and a sense of competence in mastering challenging life experiences are contributing to his evolving improved self-concept. I am very proud of my son's

SEND YOUR LETTERS...

Readers of Bladdernews enjoy reading new articles and stories. They appreciate knowing that they are not alone and can relate to someone else with their condition.

If you or your child has a condition that requires intermittent catheterization, we invite you to send it in.

Your privacy is important to us and we will not publish your name unless you give us permission.

Send your letters to:

Astra Tech, Inc.
Attn: Carolina Facciani
21535 Hawthorne Blvd., Suite 525
Torrance, CA 90503
Email: carolina.facciani@astratech.com

perseverance in dealing with this difficult birth defect and know that his challenges will make him into a fine young man that I know he will become.

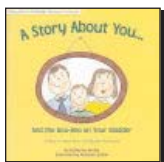
- By Barbara Ward, Pres. of ABC

WANT TO KNOW MORE ABOUT BLADDER EXSTROPHY?

The Association for the Bladder Exstrophy Community (ABC) has a number of resources on their website, including these great books for children.

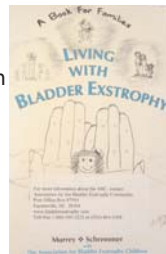
Buy them online at www.bladderexstrophy.com.

This is Me! is bound lovingly by hand and comes with a 'Worry Doll'. Books can be ordered in boys version or girl versions. This is a new book geared specifically for 5-10 year olds to discuss bladder exstrophy, school issues, catheterization (through a Mitrofanoff) and how to discuss their condition with their friends if they choose to do so.

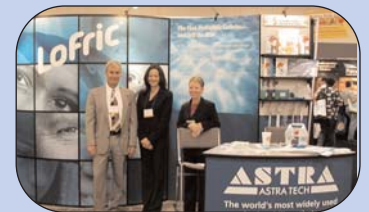


The Association for the Bladder Exstrophy Community (ABC) is pleased to unveil a new tool to teach children about bladder exstrophy, called A Story About You! This book is an eight page picture book written for the young child ages 3-6. So that both boys and girls can relate to the book, it was produced in a two-in-one format - with a version portraying a girl on one side of the book and a boy version on the flip side.

Living with Bladder Exstrophy is the first book ever to address the medical, psychosocial, and emotional aspects of bladder exstrophy in an extensive and detailed fashion. It combines the opinions and stories of family members with information from some of the country's leading healthcare experts on this condition, in order to provide every family with new ideas, different treatment options, increased information, and the support of knowing that they are not alone in their situation.



EVENTS in 2005



Come see us at the following upcoming events. Stop by to say hello and see our new products!

Child and Family Health Fair

October 7, 2005

Shriners Hospitals for Children
Los Angeles, California

Website:

www.shrinershq.org

Abilities Expo Northern California November 18-20, 2005

Santa Clara
Convention Center
Santa Clara, California

Website:

www.abilitiesexpo.com

SIGN UP!!!

Want to be added to our mailing list?

If you did not already receive this newsletter by mail, we would be happy to add you to our mailing list. To receive future issues of this newsletter, please fill out and return this reply card. By sending it in, it will ensure that we continue to deliver you with up-to-date information on new products and services relating to intermittent catheterization and the LoFric® Catheter.

Simply complete and sign the form below, tear off this page along the perforation on the left side, then fold the page at the lines shown, and seal with tape. The postage is already included.

..... Fold in here

Yes, please add me to the Astra Tech mailing list.

*** Required fields**

Full Name* _____
Street* _____ Apt _____
City* _____ State* _____ Zip Code* _____
Phone Number* _____
Email Address _____

Astra Tech respects your right to have personal and medical information kept confidential. The information will only be used to the extent necessary to provide the services described above. It will not be shared with any third parties (such as outside mailing lists). Your consent is required in order to add you to Astra Tech's mailing list.

PLEASE SIGN HERE IF YOU CONSENT _____

..... Fold in here

I am answering this form on behalf of? *

Myself My child My spouse My client (I am a caretaker)

Are you currently being prescribed LoFric? Yes No

If not, which catheter brand are you using?

Mentor Bard Rochester Coloplast Rusch/MMG

Is the catheter used with or without gel? With gel Without gel

How many times a day do you catheterize?

1-2 3-4 5-6 More than 6 times

Thank you for your interest in the LoFric Catheter. We hope you also find our future newsletters valuable. If you have any questions or comments, please feel free to call or email one of our editorial contacts listed on the first page. We would love to hear from you!

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POSTAGE WILL BE PAID BY ADDRESSEE

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STE 525
TORRANCE CA 90503-9803**

**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**



(Continued from pg. 3)

I often have to deal with the depression and make sure that it does not adversely affect their job performance.

My experience as an employer and physician of persons with SCI has led me to believe that preventative care in the SCI population is not only a responsibility of the medical community but also responsibility of companies who employ them. In addition, school officials should also understand the role of preventative care in children with SCI

who attend school. Again, we cannot afford to take short cuts when it comes to preventative care and preventative care should include the use of high quality products. In the case of urologic management there is no better product for preventative care than the LoFric hydrophilic catheter.

I would like to add one last comment that I hope will become a reality; I feel that many of the manufactures of urologic supplies can play an important role in preventative care of the SCI. Beyond providing the essential supplies for urologic

care, I feel they can play an important role in educating the community where the some of the highest concentration of SCI people live, mainly among the poor urban population. This education can take place at the schools or the work place. All we have to do is look at the growing prevalence of the SCI population in the United States to realize that we need a public health and business partnership to help this population maintain a healthy life style, improve work productivity and improve their quality of life.



Available in September, the **NEW** LoFric Primo... ... it's simple, small, and reliable!

Extra large loop for opening or hanging the package.

Adhesive area on back for hanging the package while the catheter soaks in water.

Easy "peel-open" packaging.

Handling strip. Provides a firm grip without needing to touch the catheter.

LoFric catheter with Urotonic Surface Technology. Gives the lowest friction during insertion and withdrawal.

Sterile water. A light press on the water-pocket makes the water run down and activate the catheter's surface layer.

Extra large loop for opening or hanging the package.

Since the water is separate, the packaging is small and foldable. It fits easily in your shirt pocket.

More information at www.lofricprimo.com

Want more information on spinal cord injuries?

These are two books that we found to be very informative. *Living with Spinal Cord Injury* by Adrian Cristian, MD, and *Spinal Cord Injury: A Guide for Living* by Sara Palmer, Ph.D. These books can be purchased at your local bookstore.



Additionally, the **National Spinal Cord Injury Association** offers a great amount of information and resources.

<http://www.spinalcord.org>

Toll-free Helpline: (800) 962-9629

Glossary of terms from the feature article

Bladder neck sphincterotomy

The cutting of the bladder sphincter muscle (from the bladder neck to just short of cutting the bulbous urethra) to allow urine to flow out more easily. After this surgery, you will urinate involuntarily, and must wear a collection device.

Platelet count

The number of platelets in a blood sample. Counts below 100,000/ml are significant.

Neurogenic bladder

Nerves carry messages from the bladder to the brain and from the brain to the muscles of the bladder telling them either to tighten or release. In a neurogenic bladder, the nerves that are supposed to carry these messages do not work properly.

End stage renal disease

Kidney disease from any cause that has lead to the requirement for dialysis.

Bladder neck spasms

The muscles around the bladder neck tighten and produce painful contractions.

Anti-spasmodic medications

Medications that help relax muscles and reduce muscle contractions.

LOFRIC DISTRIBUTORS...

These are some of the national home healthcare companies that carry the LoFric products. You may contact them directly for details, or call us toll free at (877) 4-LOFRIC (456-3742).

A-Med Healthcare

5401 Argosy Avenue, Suite #101
Huntington Beach, CA 92649
Toll free: (800) 552-2633
Email: sales@a-med.com
Website: www.a-med.com

Xtreme Medical, Inc.

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Downey, CA 90242
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Edgepark Surgical

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