A quarterly newsletter designed to support victims, survivors, caregivers and loved ones of motor vehicle collisions.

WINTER EDITION 2020 ISSUE 13

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We Are Thinking of You This Holiday Season

The world has certainly changed this year, and we have all been reminded of what is most important in our lives. For victims of motor vehicle crashes, and the people who love them, this year has been especially difficult and we are so grateful that our *Online Support Group* could continue without any disruption as we face such an unprecedented time.

As we wind down on such an incredible challenging year, we would like to take this opportunity to reflect on our gratitude for our support community. This year has proven that their spirit and resilience remained hopeful as we were still able to connect with so many courageous survivors as well as some wonderful Organizations and Businesses that support crash survivors.

This Winter Issue marks our 2nd Anniversary of *Sharing our Recovery* and we are so grateful to our 800+ subscribers. We are also extremely thankful to our sponsors for their support as it allows the continued growth of this valuable free resource for crash survivors. *Thank you!* I have been working hard the last few months on an incredible opportunity to further support victims of life-changing motor vehicle crashes and I am so excited to be able to share this news with you in the near future so stay tuned.....

In this issue you will hear from two women who decided to put their heads together and create an Organization supporting concussion recovery, you will also want to read how a doctor went from a victim of a pedestrian crash who then pursued a career in mental health and now specializes in trauma related disorders, a crash survivor who sustained a serious brain injury shares her relationship tips with us and an Occupational Therapist explains how beneficial it is to receive Occupational Therapy as you recover.

My hope is that our Winter Issue helps you find some comfort knowing that you are not alone in what has been one of the craziest years most of us have ever known.

I am thinking of every victim of a motor vehicle crash recovering this holiday season and please always remember to **take it one step at a time!**

Warmest thoughts and Best Wishes for a Happy Holiday. May the 12 months of the New Year be full of new achievements in your recovery journey. *Stay safe!*





Survivor Story **Piece**

Victim of Pedestrian Crash Now Helps Others With Reconsolidation Therapy

"I was kept under

observation and after

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over. I had no idea

Submitted by Dr. Sandra de Blois, PhD



One morning in June of 1999 I was in a pedestrian cross-walk on my way to the University of Denver where I held a post-doctoral research position. I remember feeling particularly happy and hopeful about my future. Out of no where, a commercial truck appeared and hit me, sending me flying across three lanes. My sandals stayed at the point of impact and I landed in oncoming traffic. Fortunately, the light was red and good samaritans had time to surround me and re-direct traffic. I remember drifting in and out of consciousness and feeling incredible pain in my left thigh.

I vaguely remember the frenzy in the emergency room and

hearing "closed head injury", "severe contusion", "compartment syndrome". A doctor was flashing light in my eyes saying "you are very lucky. You could have easily died. You suffered a head trauma". I recall the sudden onset of a horrific headache. I was kept under observation and after I returned home, I thought the worse was over. I had no idea how much my life would change.

I started noticing problems remembering, paying how much my life attention, and planning. Everything seemed to would change." make me irritable and very anxious. I either slept too much or too little. My left thigh was so swollen that I could not see my knee. It was like a big block and the pain was acute and throbbing. I did not understand why the doctors sent me home in this condition.

Returning to the hospital for a MRI on my leg put me in a state of panic. I had to go by ambulance and it felt like I was reliving the whole event all over. The orthopedist had a worried look on his face as he told me he had to measure the pressure inside my thigh, saying that it was possible he may have to make a cut to relieve the pressure. Somehow, he judged he did not have to do that. Back at home, I immediately researched compartment syndrome and

I felt horrified that it can lead to amputation of the limb if not treated fast enough. What is fast enough in my case? Is the doctor making a mistake by not relieving the pressure now? Should I get a second opinion? I was in tears and felt helpless. Thankfully, I did not develop compartment syndrome but had to go through many months of physiotherapy to be able to walk again.

My mental health took a turn for the worse. A psychologist diagnosed me with PTSD and depression. I was in denial and refused to take any medication. A neuropsychologist diagnosed me with post-concussion syndrome. I was deeply ashamed of the cognitive deficits I was experiencing. I had always been a very high functioning person. The depression got worse and my self-esteem plummeted. I lost interest in the research I was involved in. This accident created an existential crisis. Up to that fateful morning, I had had a very good life. Now, the suffering I was going through made me more aware of human suffering. I became more engaged in therapy and I realized how much my psychologist helped me cope with the PTSD symptoms.

Many years past and with therapy, my mental health was restored. I decided to pursue a career in mental health and to specialize in the treatment of trauma-related disorders such as PTSD, depression and anxiety. In 2019, I became certified in Reconsolidation therapy ™ after attending training with Dr. Alain Brunet at the Douglas Research Center, McGill University. Reconsolidation therapy ™ is a revolutionary treatment for PTSD that is based on the neuroscience of memories. It directly targets traumatic memories. It includes 6 treatment sessions and leads to complete recovery from PTSD in 70% of cases.

> Furthermore, Reconsolidation therapy has very low relapse rate. The treatment is a combination of talk therapy done under the influence of a blood pressure lowering medication (a betaadrenergic blocker). The medication blocks the reconsolidation (i.e., re-storing) of the emotional intensity of a traumatic memory while keeping the memory itself (i.e., declarative memory) intact. Thus, people continue to remember the traumatic event. However, they do so without re-experiencing it all over again. The memory is gradually transformed from "traumatic" to

such as increased startle response, hypervigilance, nightmares, flashbacks, extreme anger and so on are greatly reduced to the point where a person no longer meets the criteria for PTSD. Reconsolidation therapy is effective regardless of how old the traumatic memory is. Reconsolidation therapy can easily be delivered long distance through video-counselling.

"unpleasant". Consequently, PTSD symptoms

For more information please visit: www.myrecontherapy.com.

Have You Met Survivor Davis?

While Davis is out meeting supporters, many have found out the meaning behind his name!



Are you aware that our Mascot, Survivor Davis wears a strong message for crash survivors?

Davis hosts Friday

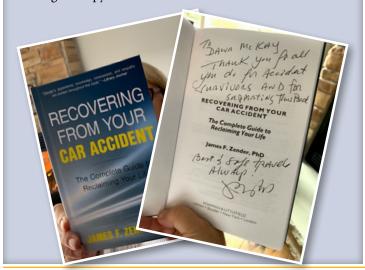
Focus every week on Instagram and shared the meaning behind his name recently. He wants Crash Survivors to know that you will:

Discover that you are:
Amazing,
Valued,
Inspiring and
Strong.



Last Month, Survivor Davis had the pleasure of meeting a professional team that helped me tremendously during my recovery and he sure wasn't camera shy! Drs. Michelle & Lucas Laframboise focused on multiple injuries that I sustained in a motor vehicle crash & I will be forever grateful that I found this amazing team to support me on my recovery journey.

I was deeply moved when Dr. Zender reached out to me to see if I would be interested in endorsing his book, **Recovering from your Car Accident**. His book is "a remarkable read that touches on every struggle that we face after surviving such a life-changing event. A silent pandemic that now speaks loudly & a book that every crash survivor should have!" It was truly an honour & I cannot thank him enough for sending me my very own signed copy. His book is now available on Amazon.





Davis not only got up close & personal to thank some First Responders but he was also happy to donate to their boot drive.

A firefighter is almost always the first on scene to help those that are involved in a motor vehicle crash and we thank all of you for your courage & commitment to continuously help others. Supporting your Local Food Bank is important more than ever this year & if you see First Responders looking for donations to support their local food bank, don't forget to donate and thank them for everything they do!

Health Piece

What is Occupational Therapy?

Submitted by Karen Forse, Occupational Therapist

After experiencing an injury or an illness, life can feel a lot different than it once did. You may have difficulties doing some of the activities that were once important or meaningful for you and you may struggle to fulfill the roles that you had in your life as a partner, parent, friend, or employee etc. When we are not able to do the things that are important to us it can lead to feelings of sadness. guilt, and feeling of being unproductive which can ultimately impact our mood and reduces our quality of life.

An occupational therapist's (OT's) job is to help you to participate in your daily life in ways that matter to you the most.

An OT will help you to develop the necessary skills to re-engage in the activities that are most meaningful to you. These are referred to Activities of Daily living which can include anything from being able to take a shower or brush your teeth, prepare a meal for your family, attend to your housekeeping tasks, go shopping, take your children to the park, going to work or school, or socializing with friends.

The OT Assessment

An OTs approach to therapy is very different than other healthcare providers in that we are truly holistic in our approach. We look at assessing and treating the entire person, not just a specific component of the person. For example, a physical therapist will work on improving your physical ability and a psychologist will address the mental health condition. An OT will complete a thorough assessment on all the components of the person to find out why a client cannot do what they would like to or need to do. For example, an occupational therapist may assess:

- Your physical abilities like strength, balance, range of motion and coordination
- Your cognitive abilities like memory, attention, organizational skills
- Your emotional abilities like mood, sleep, motivation/initiation and use of coping strategies.
- Your sensory abilities like hearing, vision, sensation
- What materials or devices you use to participate in activities like furniture, utensils, tools or clothes
- What social and emotional support is available to you at home, school, work or in the community, and
- The physical setup of your house, classroom, workplace or



other environment Lets use Ms. Jane Doe as an example. She is a university student who was involved in a motor vehicle accident and sustained significant injures including a fractured pelvis and a complex concussion. She has many post concussive symptoms including headaches, sensitivity to light and sound, poor sleep, difficulties concentrating and remembering things. She has also been struggling with heightened anxiety and lowered mood. She lives with a roommate who is attending

school full time and is not always home to support her.

Ms. Jane Doe first met her OT while in the hospital just before she was going to be discharged home. The OT assessed what services she would need directly after being discharged and helped to facilitate these referrals (i.e. physiotherapy, psychology etc.). The OT also assessed what her equipment needs would be to help her safely perform the tasks she needs to do once at home (i.e. wheelchair, bathroom safety equipment, a bedrail to assist with getting in/out of bed etc.). The OT also assessed whether any modifications was needed to make the home more accessible (i.e. installation of a ramp to accommodate a wheelchair etc.). Finally, the OT will conduct an attendant care assessment that is a specific assessment that helps to quantify how much money you may be entitled to by your insurer to hire a personal support worker (PSW) who can help you with your personal care should you require it.

OT Treatment

Once Ms. Jane Doe is discharged home safety, she will continue to meet with her OT to work towards her goal of improving her independence and returning to the life roles and responsibilities that she previously had. As mentioned above, OT treatment addresses all of the components of the person including their environment. The following are some examples of OT treatment that could have been provided to Ms. Jane Doe during her recovery.

• Physical:

o Recommend equipment to improve mobility at home and in the community (i.e. wheelchair/walker/cane), to improve safety (i.e. raised toilet seat, bath seat, grab bars etc.), to improve function (i.e. perching stool to sit on when preparing meals/cooking, long handled reacher to retrieve items from lower levels etc.).

- Provide education on pain management and modalities to assist with pain relief (heating pads, ice packs, TENS machine etc.).
- o Develop/implement activity programs to improve endurance/strength.
- Providing education on energy conservation to combat fatigue and teach ways to modify activities that reduce the physical demands.

• Emotional:

- o Provide education on relaxation strategies such as mindfulness, meditation, visualization and deep breathing strategies.
- o Provide Cognitive Behavioural Therapy (CBT) to change distorted thinking patterns (i.e. negative/catastrophic thinking) and to help reduce anxious/depressive thoughts.
- o Development behavioural activation programs to promote initiation of activity when mood is low.
- o Provide education on ways to improve sleep.

• Sensory:

- Recommend noise cancelling ear buds to reduce distractibility and noise sensitivity.
- o Recommend glare reducing computer screens and/or blue light filters for computer/cell phones
- o Recommend sunglasses and black out blinds to reduce light sensitivity

• Cognitive:

- o Conduct standardized cognitive assessments to determine where the deficits lie.
- o Develop a cognitive rehabilitation program that targets the deficit (i.e. attention, short term memory, planning/ organizing). This may include participating in functional activities or "brain exercises".
- Develop compensatory strategies to (i.e. use of daytimers, writing to do lists, using apps and technology for reminders/ scheduling etc.), and teach new ways of learning/studying etc.

Environment

- o Assess need for home modifications/renovations to improve accessibility
- o Connect with employers/schools to arrange for accommodations to improve function (i.e. note taking services, special computer technology, additional time for assignments/exams, writing exams in quiet room etc.)
- o Arrange for tutoring services if required
- o Arrange for specialized transportation

OT's understand that each person is unique and it is our job to understand each client's strengths and weaknesses in order to facilitate recovery. You are the expert in "you" and we are here to work with you to best support your goals. Recovery is a journey and we are very honoured to have the opportunity to work along side you, support you and to be your biggest cheerleader!





Struggling After a Brain Injury – Keep Your Head Up

Submitted by: Allie Harrison & Felicia Corrado

Why are we so passionate about supporting concussion recovery?

We have both struggled with persistent symptoms ever since sustaining sports-related concussions in high school. We both faced an uphill battle in getting the right support that we needed, and struggled to cope with the curveballs and changes brought about by our injuries. We are so grateful for the amount of awareness that has developed over the past several years thanks to the diligent efforts of many amazing organizations. However, we have found that many individuals are still struggling to access the support they need after a brain injury. After supporting each other through high school and university, we decided to put our heads together and create an organization that we believe will help to make the recovery process a little bit easier.



We have combined our personal experiences navigating brain injury recovery, along with the knowledge and tools we gained from studying public health. Our goal is to create a world where individuals affected by brain injuries feel supported, connected, and empowered during their recovery and therefore can build resilience that will help them navigate their new normal. We hope that we can take all that we have learned to make it easier for others going through a similar journey.

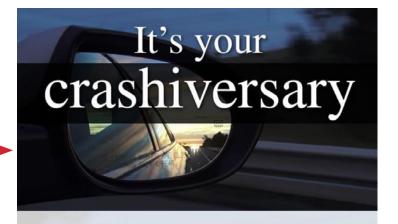
For more information on Keep Your Head Up please visit: <u>www.</u> <u>keepyourheadup.ca</u> or feel free to follow them on Instagram at: <u>www.instagram.com/</u> <u>keepyourheadupfdn/</u>

Is it your Crashiversary this month? Approaching this day is difficult for so many motor vehicle crash survivors but you must always remember on this day that you are healing and that's worth celebrating every year!

Looking to connect with other Survivors of Motor Vehicle Crashes?

We welcome you to join our Facebook Family at <u>Crash Support</u> <u>Network Group</u>

Is your loved one, friend or colleague recovering from a motor vehicle crash or have you met another victim of a motor vehicle crash? Please ask them to <u>subscribe</u> to our informative newsletters and tell them about the <u>Crash Support Network</u>.



You are healing and that's worth celebrating every year! Take a moment and reflect at how far you have come today.

Never lose hope. Be proud of yourself. You are amazing!

You have survived a lot and we are thinking of you today.



Tips for Dodging Behaviour Related Misunderstandings Provoked by Brain Injury

Submitted by Michelle Munt



As I write about my experience of brain injury a lot, you might be surprised when I say sometimes, I can't explain how I feel. There are times this invisible heavy cloak descends on me. I'm trying to get on with a "normal" life whilst the cloak drags me down and wears me out. But the casual observer knows nothing of the cloak, just that my behaviour is different. Weirdly I have no motivation to even try to communicate. It's just too much of an effort. I imagine when this happens I have more in common with an overworked Donkey, than a woman in the prime of her life.

As I appear grumpy, others think I'm annoyed at them.

We've all experienced that person who makes you feel like you can't do anything right. You feel like you should be apologizing for everything. Or making special efforts to win them over. Well, the cloak turns me into that person. It's not intentional. I'm not really criticizing everything, but I'm not showing any enthusiasm either. My brain injury just turns off the communication switch for a while. I still have emotions; I just can't express them.

As this behaviour doesn't give them anything to work with, I understand how it makes them insecure. Particularly since females are known for going quiet when they are angry. My partner, James, will ask if he has upset me with a tone similar to a child who thinks they have disappointed their parent. Even when I tell him to ignore my behaviour, he seems unsettled. Perhaps he thinks that is just an excuse so I don't have to explain what's wrong?

If you have been reading my blog for a while, you will know by now James is my rock. And yes, I am guilty of sometimes being a battle-axe just because his socks aren't in the laundry basket. But when my brain injury cloak is on me, my behaviour is nothing to do with anything he has or hasn't done. So, the thought that I am unintentionally chipping away at his confidence is awful. I don't want to make him question himself when he is completely innocent. In fact, I don't know where I would be without him.

My tips on dealing with this situation.

I am not an expert or a counsellor, all I can tell you is how I'm dealing with this. It has taken me time to get to this point. So, if highlighting this helps smooth another person's relationship, it's worth it.

- Acknowledge that it happens. Just because I don't mean to make James question himself, it doesn't mean it's OK. I didn't recognize it before as I didn't have the ability to. But now I do, just ignoring it won't solve anything.
- Talk about it when you can. Even if it's days later, I find a moment that it good for both of us to run through what happened. James is very understanding, which makes it easier. But even if the person in your life struggles to put themselves in your shoes, it's important they see you making the effort. Most people will find it touching and sincere, which will help them see your bond isn't broken.
- Have a signal. Now I have described this as the heavy cloak feeling in this way, that's all I need to say in the future. Then he will know that I can't go into detail during that moment, but he doesn't need to worry. But you can make a single where you don't even have to say anything. It could be a long squeeze of their hand, a kiss on the tip of their nose (as long as they don't have a cold at the time) or just a simple knowing nod.

I sometimes am guilty of thinking that as he knows I have a brain injury; he should have got used to my behaviour by now. But that's absolving myself of responsibility for how my actions affect him, which isn't fair. Yes, it's true that I can't help my bad days, but he isn't to blame for them either. So, he shouldn't feel like he has to tiptoe around his home in hope I won't use him as a punching bag. (Just to be clear, I'm not violent I just mean verbally.) It's important we don't forget they are in this boat too, even though none of us planned this.

Michelle Munt sustained a serious brain injury in a car accident back in December 2014. The journey to recovery has been a challenge and as a result she had to give up her career in recruitment. However, her confidence has grown and now she is able to run her own business as a coach, supporting others. She maintains a blog documenting her various struggles and offering advice to other brain injury survivors at www.jumbledbrain.com

Would you like to be part of Sharing Our Recovery?

We are always looking for articles or stories, and we would love to hear from you!

Email us: info@crashsupportnetwork.com

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We couldn't have done it without your support!

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CRASHSUPPORTNETWORK

Our Mission is to provide online support, resources and to raise awareness for survivors that have been affected by a motor vehicle crash.



Crash Support Network.com

Meet Dawne McKay – Founder

Dawne McKay is a survivor of a horrific motor vehicle crash and is the creator and editor of **Sharing our Recovery** as well as the Founder of the Crash **Support Network**. Dawne is not shy about what happened to her because she has become an advocate for other crash survivors. She had to go through her own struggles to create a community of courageous survivors who continuously fight everyday. Dawne resides in Ontario, Canada and manages both the Sharing our Recovery Newsletter and the Crash Support Network Group virtually from her home. The Crash Support Network Group consists of members from all over the globe and her highly informative oneof-a-kind website is attracting thousands of visits a day.

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