

PERIPHERAL NEUROPATHY SUPPORT GROUP



**REGISTERED OFFICE CONTACT:** Secretary: Barbara M.  
**EMAIL:** [barbara.m@pnsg.org.au](mailto:barbara.m@pnsg.org.au)  
**Web:** [www.pnsg.org.au](http://www.pnsg.org.au)

**GENERAL ENQUIRIES:** Chair: Phil R.  
**MOBILE PHONE /TEXT:** 0417 186 337  
**EMAIL:** [phil.r@pnsg.org.au](mailto:phil.r@pnsg.org.au)  
**Web:** [www.pnsg.org.au](http://www.pnsg.org.au)  
**Post:** Phil Reed.  
9 Redfin Cres,  
BELDON WA 6027.

**Other Team Members:**

Treasurer: Faye H.  
Newsletter Distribution: Ninetta G.  
Meeting Activity Coordinator: Celia M.

**BANK DETAILS:** For submitting annual subscriptions, donations etc.  
Bendigo Bank: BSB No.633 000 - Acct No.125 154 856.

**Please:**

When making a payment, please include your name and specify what the payment is for (e.g., annual subscription, donation). Without this information, we cannot match the payment to your account.

**NEWSLETTER /PN MINUTES:** 15<sup>th</sup> June 2026.

The meeting opened at 10:04 am and Phil R welcomed us all.

**CONFIRMATION OF MINUTES OF 11<sup>th</sup> May 2026 COMMITTEE MEETING**, as circulated as being true and correct.

Accepted: Lynne G. Seconded: Suzanne D.

**ATTENDANCE:** Lynne G., Barbara M., Suzanne D., Dan D. Lindsay G., Ron H., Patrick Mc., Murray C. Ron G. and Phil R.  
(Online): Ninetta G., and Peter H (South Australia).

**APOLOGIES:** Faye H., Laurel M., Celia M., Faye B., Mike K., Cobie H., Lorry H., and Peter T.

**CORRESPONDENCE (INC. EMAILS):**

1. Alike W.A.
  - a. Details of the "Blokes to Bridges Walk on Saturday. Participants are to gather at the Swan River Rowing Club along Mounts Bay Road. This community event brings people and events together for connection, conversation and wellbeing during Men's Health Week.

Accepted: Phil R. Seconded: Dan D.



## **GENERAL BUSINESS:**

### **1. New Members:**

None.

### **2. Grants and Donations:**

We will not intentionally apply for grants until we decide our future direction with registration and incorporation.

### **3. PNSG Internal Audit (April 2026):**

- a. Phil R completed an internal audit in April and presented what he had found to the attendees of the meeting. The purpose of the audit was to see how well PNSG Inc is following legal requirements and its own rules.
- b. As a result of the internal audit which Phil R. carried out in April 2026, a few discrepancies were found in our system.
- c. Phil R. brought this to the meeting and there was an extended discussion between those members present and him on the pros and cons of staying with the Incorporated body or go our own way. It was found that Etta (NCWA – CEO) would assist us leave the Incorporation behind if decided to do so. The consensus was that it would be better for all concerned if we if we took up Etta's offer to merge us with two similar charities in the same position as us.
- d. At the end of June's monthly meeting Etta P., Melinda., Phil R., Ron G., Patrick Mc and Murray C. attended another meeting to continue working out the finer details.
- e. Our possible transition may allow PNSG Inc to maintain its registration and incorporation. The possible transition will require us to hold off collecting our usual annual subscription fee of \$20 until further notice.

***Therefore, members please do not send your annual membership for 2026-27 until asked to do so.***

**Stay tuned for further updates about PNSG Inc's possible future transition.**

**Whether PNSG Inc decides to change its formal status or not will make little difference to members. We will continue to operate and hold our monthly meetings at The Niche Building on the second Monday of each month (except January.)**

### **4. Community Radio:**

Community Radio is one of PNSG Inc's three marketing resources to help us get our message to the big wide world and attract new members. Other sources are: Senior Newspaper and our website:

<https://pnsg.org.au/>

### **5. Dr Prax:**

Dr Prax and his team continue to support us by sending Phil R some interesting articles which Phil R will endeavour to distribute to members as soon as he can.

### **6. Meeting Catering:**

On behalf of all members attending Phil R expressed his sincere appreciation to Suzanne D. for providing the catering for our meetings.

## 7. Slips, Trips and Falls:

It's extremely important that we understand as people with PN the dangers that slips, trips and falls present.

In so many cases slips, trips and falls can end up taking a long time for us to recuperate and yet they are mostly unnecessary and avoidable.

The single biggest enemy is *rushing*. By that I mean not allowing enough time to do something properly and then trying to make up time which can end up in personal injury.

The research I've done shows that the main reason why we are rushing to get things done is often due to a lack of planning on our part or on the part of someone else. Try to resist the temptation of being "popular" by overpromising to do things for other people in an unreasonable or untested amount of time.

Therefore, please consider keeping a user-friendly scheduling system that suits you. Whether it is a calendar with your handwritten notes your mobile phone your computer or whatever works for you.

The next thing for you to consider that's been highlighted from my research is that when people plan things to do for one day they over commit and therefore find themselves rushing to try to complete the day's activities. The same research shows that if you plan a week ahead (not just one day) you have a much better chance of *not* over committing and therefore less likely to find yourself rushing around and taking unnecessary risks of falling.

Please keep in mind Murphy's Law #23: "We can always find time to fix problems and errors but can never find the time to do the job properly in the first place."

**The following information has been derived from the Internet and copied to this document. The only editing I have done is to remove unnecessary clutter and/or duplication. The wording and intent of the copied information remains the same:**

In Western Australia, falls are the leading cause of injury among older adults. Safeguarding older people involves local programs, home modifications, and health interventions. The State Government and health organizations provide targeted initiatives to prevent falls, promote independence, and reduce fall-related hospitalisations.

### a. State Initiatives & Support:

- i. \* Stay On Your Feet®: Managed by: [Injury Matters] (<https://www.injurymatters.org.au/programs/stay-on-your-feet/>) and funded by the WA Department of Health, this program targets adults over 60. It promotes key strategies: Move your body, improve your health, and Remove hazards.
- ii. \* Community Health Services: The WA Country Health Service and [WA Department of Health] ([https://www.health.wa.gov.au/Articles/F\\_I/Falls-prevention-and-management-in-WA/Community-based-falls-prevention-and-management](https://www.health.wa.gov.au/Articles/F_I/Falls-prevention-and-management-in-WA/Community-based-falls-prevention-and-management)) offer local community-based falls prevention, multidisciplinary assessments, and personalized fall action plans.
- iii. \* My Aged Care: For seniors living at home, [My Aged Care] (<https://www.myagedcare.gov.au/>) is the centralised government portal to access subsidised in-home support, such as mobility aid assessments and occupational therapy for home modifications.

### b. Hazard Reduction at Home

- i. Most falls occur in and around the home. Older individuals can safeguard themselves by modifying their living spaces:

- ii. \* Remove Trip Hazards: Clear walkways of trailing electrical cords, loose rugs, and accumulated clutter.
- iii. \* Improve Lighting: Ensure hallways and stairwells are well-lit and consider installing motion-sensor nightlights.
- iv. \* Bathroom Safety: Install grab rails in the shower, use non-slip mats, and apply transparent non-slip tape on slippery tiled surfaces.
- v. \* Accessing Support: Local organizations like [Arthritis WA] (<https://www.arthritiswa.org.au/2025/01/03/understanding-and-reducing-fall-risks-practical-tips-for-older-adults/>) provide practical fall-reduction tips specifically for seniors managing joint conditions.

**c. Individual Health & Exercise:**

- i. \* Strength and Balance: Regular, evidence-based physical activity (like Tai Chi or specialized strength training) is one of the most effective ways to lower fall risk.
- ii. \* Medication Reviews: Older adults should have their medications reviewed regularly by a GP or pharmacist, as certain combinations can cause dizziness or drowsiness.
- iii. \* Regular Check-ups: Routine eye exams with an optometrist and foot care with a podiatrist directly impact balance and spatial awareness.
- iv. For individuals with peripheral neuropathy who live alone, the safest exercise strategy focuses on seated strength, stable balance supports, and ankle flexibility. Peripheral neuropathy reduces sensation in the feet, which significantly increases fall risks. High-impact movements like running or long walks can cause undetected joint stress or foot injuries.
- v. The following low-intensity, daily routine can be safely performed at home using a sturdy chair for support.

**1. Seated Strength Exercises:**

- a. Perform these exercises while sitting firmly in a straight-backed chair to eliminate balance risks.
- b. \* Seated Heel Raises: Lift your heels high while keeping your toes on the floor. Hold for 2 seconds, then lower. Repeat 10–15 times to build calf strength.
- c. \* Seated Toe Taps: Keep your heels planted and lift your toes as high as possible. Repeat 15 times to strengthen the front shin muscles, which helps prevent tripping.
- d. \* Seated Leg Extensions: Straighten one leg out in front of you, hold for 3 seconds, and lower it slowly. Do 10 repetitions per leg to strengthen the thigh muscles (quadriceps) needed for standing up safely.

**d. ## 2. Supported Balance Exercises:**

**Always hold onto a heavy, non-slip surface—like a kitchen benchtop or a heavy dining chair—when standing. Do not perform standing exercises if you feel dizzy or highly unstable.**

- i. \* Supported Side Leg Raises: Stand tall, hold your support, and slowly lift one leg out to the side. Keep your toes pointing forward. Hold for 2 seconds, lower, and repeat 10 times per side to strengthen hip stabilizers.
- ii. \* Supported Mini-Squats: Hold your support firmly with both hands. Lower your hips slightly (only a few inches) as if sitting back into a highchair, keeping your weight in your heels. Push back up. Repeat 8–10 times.

**e. ## 3. Flexibility and Sensation Stimulation:**

**Improving joint mobility helps the brain process where the feet are in space, even with reduced nerve sensation.**

- i. \* Ankle Circles: While seated, lift one foot and slowly draw 10 large circles in the air with your big toe, then switch directions. Repeat with the other foot to maintain ankle flexibility.
- ii. \* Seated Towel Scrunches: Place a small hand towel flat on the floor in front of your chair. Use your bare toes to scrunch and pull the towel toward you. This stimulates foot nerves and strengthens intrinsic foot muscles.

**f. ## 4. Safety Guidelines for Exercising Alone**

- i. \* Check Your Feet Daily: Because neuropathy masks pain, inspect your feet every day for blisters, redness, or cuts using a small floor mirror.
- ii. \* Wear Proper Footwear: Never exercise barefoot or in loose slippers. Wear supportive, flat, closed-toe shoes with non-slip soles, even indoors.
- iii. \* Keep an Emergency Lifeline Nearby: Always keep a mobile phone, a personal medical alarm, or a smart device within arm's reach while exercising.

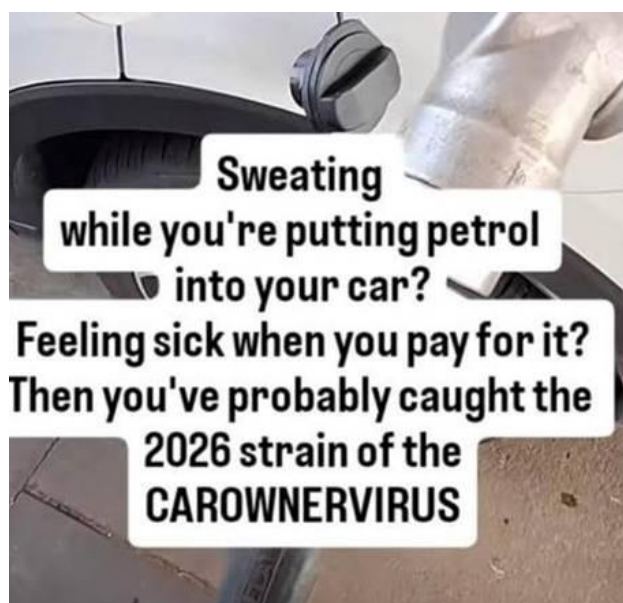
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*On a lighter note...*





The Rotterdam police stumbled on 56 drums of petrol today. The estimated street value is over 12 million euros. The drums were hidden in a shipment of Venezuelan cocaine.



Thank you and good night!