

Membership Pack

Sussex MS Centre

Membership and Consent Form



Title					
First Name					
Surname					
Dat	e of Birth				
Add	iress				
Pos	stcode				
Hoı	me Phone				
Мо	bile Phone				
Em	ail				
	ergency Contact				
	ext of kin) me and tel. no.				
Rel	ationship to you				
Ple	ase tick as approp	riate in box			
Α	Multiple Sclerosis		Е	Other Neurological (please give details)	
В	Carer / Partner		F	History of seizures or Epilepsy	
С	Broken Bones/ Wound				
$\overline{}$	Broken Bones/ Wou	ınd	G	Other (please describe)	
	Healing/ Sports Inj		G	Other (please describe)	
D	1		G	Other (please describe)	
	Healing/ Sports Inj		G	Other (please describe)	
D I ur	Healing/ Sports Inj Cancer nderstand that this is	a self-referra	al pro	cess, and it is my responsibility to consult w	rith
D I ur my	Healing/ Sports Inj Cancer nderstand that this is	a self-referra	al pro		rith
I ur my clas	Healing/ Sports Inj Cancer Inderstand that this is GP regarding the subsets offered at the Subsets See See See See See See See See See Se	a self-referra	al pro	cess, and it is my responsibility to consult w	rith
I ur my clas	Healing/ Sports Inj Cancer derstand that this is GP regarding the su	a self-referra	al pro	cess, and it is my responsibility to consult w	rith
I ur my clas	Healing/ Sports Inj Cancer nderstand that this is GP regarding the subses offered at the Subsessined:	a self-referra	al pro	cess, and it is my responsibility to consult w	rith

The information that you have provided is held confidentially on our database and stored securely in accordance with General Data Protection Regulations (2018), our Privacy statement, and our Data Protection Policy. We never share your information with third parties.

We would like to send you our newsletters and other information about our own services, by email or post (only if you do not have email). If you agree to being contacted in this way, please tick the relevant boxes.

piedse tick tile	relevant boxes.			
		` '		u so that you may receive y therapies you attend at the
Email 🗌	Post	Text (SMS) Messag	је 🗆	
	•	e will call you on your ange or cancel an appo	-	phone or mobile sometimes ent with you.
our social medi	ia platforms, in ou aising material. Ple	r newsletter 'The Belle', q	genera	ties in the Centre for use on al publicity, our website and in to consent to photographs of
Yes 🗌	No 🗆			
Our joining fee	is £20.00			
Annual Membe	rship subscription	is £20.00 and is due in J	anuar	y of each year.
Member Signat	cure			Date
For office use	:			
Membership N (Contact ID –				
Added to Data	abase (staff/vol to	initial and date)		



Oxygen Therapy

This helpful guide to Oxygen Therapy has been provided by the MS National Therapy Centres Website www.msntc.org.uk .

Anyone wishing to access oxygen treatment should be prepared to commit to an **initial intensive course of treatment**, usually 3 - 5 treatments per week, for 15-20 treatments. If this is not possible (either due to personal circumstances or centre capacity), the closer together the first 15-20 sessions can be attended, the greater the potential effectiveness of the treatment. We will always try to work with users to implement a workable schedule but, given the limited capacity of the centre, this may not always be possible.

What is Oxygen Therapy?

The oxygen in the air we breathe is constantly treating the day to day damage we sustain - repairing and renewing our cells. When tissues are damaged the capillaries they contain are also damaged. This reduces the flow of blood that transports oxygen, which may limit or even prevent recovery.

Being a gas, the concentration of oxygen in blood is actually determined by the air pressure surrounding us. To significantly increase the oxygen concentration in blood to improve healing a higher dose is needed - 100% oxygen delivered by a mask and the use of a sealed room, known as a "barochamber" to allow an increase in pressure.

How does it help people with MS?

The disease that results in the scarring – the sclerosis – in multiple sclerosis (MS) is associated with damage to blood vessels in the nervous system. This is not blockage but leakage which leads to inflammation and *hypoxia* - which simply means lack of oxygen. A high level of oxygen reduces the hypoxia and the latest research has shown that it down regulates the genes that programme inflammation.(1) In other words oxygen induces remission. Healing is impossible without sufficient oxygen being present.(2)

Does everyone benefit?

The sclerosis, that is scarring, is healing just as a scar heals a cut in the skin. The objective of oxygen treatment is to help tissues heal and be able to function before the damage leads to scarring. Damage in MS patients occurs over time so the latest areas affected will be the most likely to recover. Trials have shown that patients may experience reduced levels of fatigue, improvements in balance and walking and also bladder function.(3,4)

Is it Safe?

Being in a pressure chamber is actually safer than being outside, e.g. it is not possible to be hit by a bus, nor will patients have either a heart attack or a stroke breathing a high level of oxygen. With over 3 million sessions completed without a serious incident, MS Therapy



Centres were deregulated by an Act of Parliament in 2008. Minor problems such as ear and sinus discomfort similar to that encountered in flying may occur, but, in contrast to aircraft, they can be dealt with by adjusting the pressure.

What happens during a session?

Oxygen treatment sessions at the Sussex MS Centre are simple, non-invasive and painless. Once they have become accustomed to the procedure most users find the sessions pleasurable and relaxing. Each session lasts around 90 minutes (you should allow for 2 hours at the centre, particularly for your first few sessions) and consists of three phases:

1. Pressurisation

Our centre has a barochamber which can accommodate a maximum of 5 people at a time. Once everyone is inside, the operator will close the door and begin pressurisation. This is where the air pressure increases slowly - users may experience slight ear discomfort similar to that experienced when flying in a commercial aircraft. The rate of pressurisation can be controlled to ensure all chamber users are comfortable.

2. Treatment

The treatment begins when the pressure reaches the prescribed level. This is between 1.5 atmospheres absolute (ATA) and 2.0 ATA. Users may then rest, read, listen to music or watch something on a tablet/phone/laptop. A general rule is that courtesy should be shown to other chamber users (headphones used, discussions kept to a minimum etc.).

3. Depressurisation

The operator advises users when the treatment is complete and reduces the pressure slowly, until it is the same as the ambient atmosphere. At this point, the barochamber door can be opened and the session ends.

References

- 1. Eltzschig HK, Carmeliet P. Hypoxia and inflammation. N Engl J Med 2011;364:656-65.
- 2. Semenza GL. Oxygen sensing homeostasis and disease. N Engl J Med 2011;365:537-47.
- 3. Fisher BH, Marks M, Reich T. Hyperbaric-oxygen treatment of multiple sclerosis. A randomised placebo controlled trial. *N Engl J Med* 1983;**308**:180-86.
- 4. Perrins DJD, James PB. Long-term hyperbaric oxygenation retards progression in multiple sclerosis patients. *IJNN*2005;**2**:45-48.

Why is Oxygen Therapy Effective?

Oxygen, Inflammation and Hypoxia Inducible Factor Protein

It has been known for many years that breathing more oxygen causes blood vessels to constrict reducing blood flow. Oxygen controls blood flow by involving another gas which has been thought for many years to be just a poison - nitric oxide. But there is even more than this to the oxygen story and it is of direct relevance to the disease underlying 'MS'.



Even those doctors who are convinced that the auto immune theory is correct admit that the affected areas of the brain and spinal cord in MS are inflamed.

A review in a top scientific journal 'Nature' entitled 'Oxygen and inflammation' (Carl Nathan, Weill Medical College, Cornell University, USA) gives the detailed information. Inflammation causes the level of oxygen in the tissues to fall and this, in turn, activates a protein system – the Hypoxia Inducible Factor proteins (HIF). One of these proteins, HIF 1 alpha, not only controls the migration of white blood cells into the tissues to control infection, it is also responsible for the growth of new capillaries in wounds. This master protein regulates over 8,000 genes. So giving a high level of oxygen even has genetic consequences and it is little wonder that one hour of oxygen in a chamber has effects that last.

All those of us who have used oxygen as a treatment for their MS for many years are shown to be correct and it is time for all neurologists, General Practitioners and all the MS Societies to listen to their expert patients and members.

Oxygen Therapy does not repair existing damage but tests have shown on MRI pictures how long-term regular sessions can help to slow down the progression of symptoms and so the earlier one starts following the confirmation of MS the better.

Christopher Fox-Walker has used Oxygen Therapy weekly for almost 35 years at the Sussex MS Treatment Centre. (Information source Emeritus Professor Philip James, University of Dundee.)

Information for People Considering Oxygen Therapy

Contra-indications for Oxygen Therapy (April 2018)

Oxygen Therapy can interact with other drugs and either alter or reduce their effects. Please note the information below regarding conditions and medication is **not exhaustive** and we therefore **strongly recommend** you consult with your medical professional before signing the attached consent form and commencing Oxygen Therapy

ABSOLUTE	Untreated Tension Pneumothorax
RELATIVE	
Upper Respiratory Infections	These predispose to otobarotrauma and sinus squeeze.
Emphysema with CO2 retention	Patients with this problem may develop pneumothorax due to rupture of an emphysematous bulla.
Asymptomatic Pulmonary Lesions on	Oxygen Therapy should not be carried out if chest X-ray reveals such
chest X-ray	lesions.
History of thoracic or ear surgery	The patient should be thoroughly evaluated before Oxygen Therapy



	is considered.		
Uncontrolled high fever	Fever predisposes to seizures. The temperature should be lowered		
	before Oxygen Therapy is commenced.		
Pregnancy	There is animal experimental evidence that exposure to Oxygen		
	Therapy during early pregnancy increases the risk of congenital		
	malformations.		
Claustrophobia / panic attacks	Oxygen Therapy in our centre is carried out in a small multi-place chamber.		
Seizure disorders	Seizures are rare during Oxygen sessions for neurological indications where pressures do not exceed 1.5 atmospheres. If the disorder is		
	due to focal cerebral circulatory disorder or hypoxia, oxygen		
	sessions should help reduce the tendency towards seizures.		

Source: K.K.Jain "Textbook of Hyperbaric Medicine"

Oxygen Therapy can interact with other drugs and either potentiate or reduce the effects of other drugs. Please note information below:

Doxorubicin (chemotherapy drug)	Must be stopped 3 days before Oxygen Therapy can commence.		
Cis – platinum (chemotherapy drug)	Cannot be taken by Oxygen Therapy users.		
Bleomycin (antibiotic)	Cannot be taken by Oxygen Therapy users.		

Patients with undiagnosed anaemia undergoing a course of Oxygen Therapy for another condition may not display symptoms of the anaemia until the course of Oxygen Therapy ends.



Could you become a Monthly Giver?

This Centre is a very special place.

We rely on your generosity to keep going.

By donating a small regular amount every month, you will help us to keep the doors open, every day of the week.

Just fill in the form overleaf, and either send it back to us or drop it in to your bank.

A regular gift from you will make a difference.

Thank you.



STANDING ORDER

To The Manager
Name of Bank:
Address of Bank
Account Name(s)
Account Number
Please pay to
Lloyds TSB
Sort Code: 30-98-74
Credit Account: Sussex MS Centre
Account Number 01813557
The sum of £
Amount in words
On the (date of first payment)
And on the following datemonthly/annually
Until cancelled by me in writing
Signature(s) of account holder(s)





Charity Gift Aid Declaration

Charity Name: Sussex MS Centre **Registered Charity Number:** 801075

Boost your donation by 25p for every pound you spend!

As a charity that is 100% dependant on donations, we are keen to make use of the government's Gift Aid scheme whenever we can. This will boost any relevant donation by 25% at no additional cost to you. If you pay UK Income and/or Capital Gains Tax, please allow us to claim Gift Aid on your donations.

• I confirm that I am a UK taxpayer and would be happy for Sussex MS Centre to claim Gift Aid on any donations I make to them either now or in the future. I understand I may cancel this declaration at any time by contacting the charity directly.

Gift Aid is reclaimed by the charity named above from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer

MY DETAILS TO CLAIM GIFT AID

TITLE FIRST NAME/INITIAL	SURNAME
HOUSE NAME OR NUMBER	POSTCODE
SIGNATURE	DATE

Please notify us if you:

- Want to cancel this declaration
- Change your name or home address
- No longer pay sufficient tax on your income and/or capital gains tax.

If you pay Income Tax at the higher or additional rate and want to receive the additional tax relief due to you, you must include all your Gift Aid donations on your Self-Assessment tax return or ask HM Revenue and Customs to adjust your tax code.

The Belle essentials - starting Oxygen Therapy

Before you start Oxygen Therapy:

- You will need to sign the safety disclaimer. Nothing considered dangerous in an oxygen rich environment is allowed into the chamber.
- You can leave your valuables in a locker. Please ask for one to use if you have substantial clobber.

The "Belle" itself:

- A pressure chamber housing the oxygen delivery system, which seats up to 3 people with social distancing (5 under normal circumstances). It is entered via a narrow door which opens inwards to the chamber. This makes the inside pressure work towards sealing the chamber.
- There are a number of viewing portholes, to help the operator see what is happening inside and to allow occupants to see/communicate out.
- It is controlled externally by the trained & certified chamber operator.
- The chamber is pressurised to 1.5, 1.75 or 2.0 atmospheres, equivalent to 5, 7.5, and 10 metres depth underwater (16, 24, and 33 feet).

Once inside:

- After you take your seat, you should couple your masks to the 2 tubes either side of your chair
- Until you reach the bottom you should clear pressure in your ears, by pinching your nose and blowing down it, swallowing, or waggling your jaw (talking doesn't really count in this regard, but it's a good time to catch up with others). Whatever works for you! Never use sweets to help as we cannot get to you if you choke.
- The operator will advise you via the intercom that you've reached the prescribed pressure & also to put your mask on fully.

The mask:

- Has two couplings: one for oxygen, the other for exhaled air. There are a few different styles of mask, allowing you to get a best fit with your own face shape. All types have the same coupling. These will usually be fitted in advance by the operator.
- The strap is adjustable and is fitted with one part around the back of the neck and the other at the upper back of your head, your mask should be on tightly so as to create a good seal.
- Masks should be uncoupled after the dive just as you are about to leave the chamber one by one.
- You will have purchased your own mask which means you are in control of your own hygiene
- You can wash it between dives at home with hot soapy water (the straps are washable but you can take them off to wash the mask if you like)

Oxygen flow:

- Is via a one-way system. 100% oxygen in via the RHS pipe, and exhaled air out through the LHS pipe.
- There are membranes to prevent the flow going the wrong way. One is on the oxygen regulator, which lets oxygen in and shuts over to prevent exhaled air flowing that way, and the other is in the facemask itself, which stops exhaled air being re-inhaled, whilst allowing the exhaled air out.

- Think of it like doors: You are in a corridor between two (very light) doors which open in the same direction. When you inhale the oxygen door is pulled open towards you and the other is pulled shut towards you, and this reverses on breathing out.
- The result should be 100% oxygen in and only exhaled air out

Time:

- It takes 8-14 minutes to pressurise to get to the desired pressure. The deeper the Oxygen Therapy the longer it takes.
- A session then takes 45 minutes at the prescribed pressure breathing the good stuff!
- It then takes between 8-14 minutes to depressurise.
- Leaving 90 minutes for a dive is good and you should always arrive in plenty time before hand so you have the time to get prepared by visiting the toilet (you're in a chamber for at least an hour and can't leave!), getting a good book to read or whatever etc

Noises:

- There are a few different noises, most of them loud:
 - The roar of air as the chamber is pressurised
 - The roar the opposite way as the chamber is depressurised
 - o The noise of breathing via the masks and the supply system
 - Occasionally there is a rushing noise during the session. This is when there's a need to vent excess oxygen or 'flush'. This is usually due to there being some leakage from a mask. The operator aims to have an oxygen level of no more than 25% in the area of the chamber (VS 20% in normal air). A warning system is in place to help the operator with this, but you won't hear that
 - There may be a clanging noise at the door. This is caused by the door lock being disengaged. It's
 engaged at the start of the dive, to keep the chamber sealed, and releases once the pressure rise
 hold the door firmly closed

Breathing:

- This is purely a matter of choice, as regards the way you breathe. It's not optional as an activity:
 - Some people breathe normally, as they would outside the chamber
 - o Some inhale and exhale deeply using their full lung capacity in a Yoga type style
- Just be aware that it can be surprisingly tiring actively breathing for an hour.

Activities:

- This is also a matter of choice:
 - Most read books or magazines
 - One major activity, for some/most people, is checking the time left before depressurisation there is a clock viewable on the porthole opposite the door
 - The one thing you can't do is hold a conversation whilst you have your mask on, but that doesn't stop us trying!
 - Sleeping is not a good idea as you won't reap the benefits of the oxygen if you don't actively breathe

Comfort:

- It can be uncomfortable to spend over an hour in the same seated position, so some gentle stretching and/or other seated exercise may help
- There are two fans in the chamber either side of the door. These can only be switched on from outside. You can have one or both on. They have a slide switch which selects the swing or static modes. It can get hot just after reaching the bottom, particularly if there are 3 bodies generating heat
- If you're only a bit hot you can press your back or hands onto the metal of the chamber. It's a convenient heat sink, and always feels cold
- It can also get cold in winter, although the operators try their best to warm it up with a fan heater between dives. You may want to bring your own blanket!

Safety:

- There is an intercom which is always on and listened to by the chamber operator. If you have any difficulties (ears getting sore, too hot, or anything else), just let him/her know and action will be taken to help you.
- There is a yellow manual decompression valve inside the chamber above position 1 which you could use to decompress the chamber in an emergency
- There is an alarm button (doorbell) on the inside of the door which you can ring to get attention
- If there are others in the chamber, they will be looking out for you, as you should do for them.
- There is a warning system monitoring the oxygen content of the non-mask environment, and a procedure to flush the chamber of excess oxygen.
- There are the viewing portholes to aid communication.
- If we need to we can decompress the chamber very fast.
- Pressurising the chamber can be very noisy and communication may not be easy. These basic hand signals shall be used by all members and operators:
 - Thumbs up to your operator means everything is fine
 - Thumbs down means there is a problem
 - Cutthroat signal means: STOP you want to be brought back up and abort the dive
- There is a sprinkler system, which will come on in the unlikely event of any of us needing a good wash, or the even more unlikely event of fire!

NOTE: The chamber has been on the go for over 35 years, incident free.

After all that, you get let out and can get on with the rest of your life, until the next time...

Equal Opportunities and Diversity Monitoring Form

We're committed to ensuring our services are accessible regardless of ethnicity, race, gender, gender identity, ability, religion, belief, sexual orientation or age.

The details you provide will be securely stored in line with the UK data protection GDPR regulations 2018. They help us to assess equality in our services, and to meet our equal opportunities and diversity commitments.

Full name (please print):							
What is your age group							
Under 5s □	5-10 🗆	11-16 🛚	17-19	20-29 🗆	30-39 🗆		
40-49 □	50-59 □	60-69 □	70-79 🗖	□ 80+	☐ Prefer not to say		
Identity (Please	tick the optior	that best de	scribes your	identity)			
☐ Female	□ Male	□ Non-bina	•	□ I use another gender	term to describe my		
☐ Prefer not to	say	•	on-binary me ale nor 100%	eans identifying 6 female.	as neither		
Do you Identify	as the sex you	ı were assign	ed at birth?				
□ Yes	□ No	☐ Prefer	not to say				
About your ethr	nic background	d: Please tick	the ethnic o	origin you ident	ify with		
Asian or Asian British ☐ Bangladeshi ☐ Indian ☐ Pakistani ☐ Chinese							
☐ Any other Asian background, please write in: ☐ Prefer not to say							
Black British ☐ African ☐ Caribbean							
☐ Any other Black, African or Caribbean background, please write in:							
☐ Prefer not to say							
Mixed British							
☐ Asian & White	e 🗖 Bla	ck African & V	Vhite	☐ Black Caribb	ean & White		
☐ Prefer not to	say 🔲 Any	other mixed b	ackground,	please write in:			

White ☐ English/Welsh/Scottish/Northern Irish/British ☐ Irish ☐ Gypsy or Irish Traveller						
☐ Any Other White background, please write in: ☐ Prefer not to say						
Other Ethnic Group)					
☐ Arab ☐ Any ot	☐ Arab ☐ Any other ethnic group, please write in: ☐ Prefer not to say					
Sexual orientation:	Please tick	the option that you	identify with			
☐ Bisexual ☐	☐ Bisexual ☐ Gay man ☐ Heterosexual/'Straight' ☐ Lesbian					
□ Other □	l Prefer not	to say				
What is your religion	on or belief	system? Please sel	ect the option	you most identify with		
☐ No particular rel	igion	□ Jewish	☐ Agnostic	С		
☐ Buddhist		☐ Muslim	☐ Atheist			
☐ Christian		☐ Pagan	☐ Other			
□ Hindu		☐ Sikh	□ Jain	☐ Prefer not to say		
Disability - The Equality Act 2010 defines a disability as a "physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities". An effect is long-term if it has lasted, or is likely to last, more than 12 months.						
 This includes: - Cancer An HIV infection Multiple Sclerosis (MS) A visual impairment – if someone is certified as blind, severely sight impaired, sight impaired or partially sighted 						
Your health: Are your day-to-day activities limited due to a health problem or disability which						
has lasted, or is expected to last				Prefer not to say		
How would you describe your disability?						
☐ Physical Impairn	nent 🗆 🗅 🛚	Visual impairment	☐ Hearii	ng impairment		
☐ Speech impairm	ent 🗆	Learning Disability	☐ Long	☐ Long standing illness		
☐ Mental health co	☐ Mental health condition ☐ Other					
In what capacity are you linked to the MS Centre: Please tick the boxes that apply						
☐ Member [⊐ Volunteer	□ Staff				