

Since then, about 40 cases of polio have been reported in the UK, but these were thought to have been acquired abroad or occurred as a very rare side effect of the attenuated polio vaccine (containing the live virus) that was routinely used up until 2004.

Pakistan, India, Afghanistan and Nigeria are the four countries where polio remains the highest risk. However, outbreaks of polio in other countries do sometimes occur and the condition can be spread to people who aren't protected (see below for vaccination advice for travellers). There's no cure for polio so it's important to take preventative measures by making sure your child receives all their necessary vaccinations.

## Polio vaccine

Since the introduction of a vaccine in the early 1960s, polio no longer exists naturally in the UK. The vaccine is now part of the NHS childhood vaccination programme. It's prevented by a series of five doses:

- babies are offered the polio vaccination as part of the 5-in-1 vaccine at two, three and four months of age
- this is followed by a booster dose as part of the 4-in-1 pre-school booster vaccine given to children aged three years and four months or soon after
- the fifth and final dose of the polio vaccine is given to children when they are 13-18 years of age as part of the 3-in-1 teenage booster

## Advice for travellers

Although there's a very low risk of getting polio in the UK, the condition is still a problem in some countries, particularly in India, Pakistan, Afghanistan and Nigeria. The NaTHNaC website has more information about other countries where cases of polio have been reported since 2007.

If you're travelling to a country where polio (and diphtheria and tetanus) are widespread, you need to make sure you're fully protected against these conditions. Your GP or practice nurse will be able to check your vaccination history. After receiving a primary course of the polio vaccine, it's recommended that you should have a booster every 10 years if you're travelling to a high-risk area.

Source: NHS Choice website

Further information leaflets are found on our website, [www.sppn.org.uk](http://www.sppn.org.uk)

- Guide for Polio Survivors, what you should know about your medication.
- Coping with Post-Polio Syndrome
- If you had Polio
- Polio Survivors as Patient
- Sleep Apnoea
- What is difficulty swallowing
- You are going to have Surgery
- Exercise
- Diet
- Pain
- Holistic



Scottish Post Polio Network

**Patrons:**

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# Are You a Polio Survivor?

**In this leaflet you find some information of the late effects of polio, called Post-Polio Syndrome PPS.**

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## Post-polio syndrome (PPS)

While polio is essentially a disease of the past, an increasing number of people who have had polio are developing a condition called post-polio syndrome (PPS).

PPS is a poorly understood condition that can cause a variety of symptoms, including pain, muscle weakness and fatigue.

It's estimated that there are around 120,000 people living in the UK who survived polio when they were younger. Some of these have, or will, develop a condition called post-polio syndrome (PPS).

Only people who've had polio can develop PPS, but it's not known exactly how many polio survivors are affected. Estimates vary from as low as 25% of those who have had polio to as high as 80%.

PPS takes decades to develop after the initial polio infection, taking an average of 30 years for symptoms to become noticeable.

The **symptoms of PPS** usually develop gradually and can include:

- increasing muscle weakness
- fatigue
- muscle and joint pain
- breathing or sleeping problems
- sensitivity to the cold

Although PPS is rarely life threatening, it can greatly interfere with everyday life, making it difficult to get around or carry out some tasks and activities.

## What causes post-polio syndrome?

The exact cause of PPS is unknown but the leading theory is that it's the result of the gradual deterioration of nerve cells in the spinal cord (called motor neurones) that were damaged by the polio virus. This would also explain why PPS can take years to appear.

PPS isn't contagious, and the theory that the polio virus may lay dormant in your system after the original infection, causing PPS when reactivated, has been disproven.

In recent years, PPS has become more common in the UK, largely because of the high number of polio cases during the 1940s and 1950s. However, as polio is no longer naturally active in the UK, PPS should become less common in the future.

## How post-polio syndrome is treated

Although there's currently no cure for PPS, a range of treatments and support is available to help manage the symptoms and improve quality of life.

Some of the ways that symptoms of PPS may be managed include:

- physical therapy known as "pacing" - to help recognise and manage fatigue
- mobility aids -such as walking sticks or scooters
- weight control and healthy eating -to avoid putting unnecessary strain on muscles and joints

- painkilling medication - to help relieve muscle or joint pain
- discussing the psychological impact - for example, with your GP, on an online forum, or in a local support group

## Who are The Scottish Post Polio Network?

The Scottish Post Polio Network was formed in 2001 to increase awareness of Post Polio Syndrome and provide a support network for those with the condition.

The Scottish Post Polio Network is committed to providing people who have had polio with the most up-to-date information about Post Polio Syndrome, and to campaigning for recognition of Post Polio Syndrome.

We hope that you will find this leaflet to be informative and helpful. Please have a look at our website and feel free to get in touch with us if you have any questions about Post Polio Syndrome.

## About polio

Polio was very common in the past. It affected children worldwide, causing paralysis and death. In the UK, there was a widespread outbreak of polio during the 1940s and early 1950s.

Since routine polio vaccination was introduced in 1956, the number of polio cases has significantly reduced. The last case of natural polio infection acquired in the UK was in 1984.