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SEPTEMBER 14, 1965 RELEASE: 124-65

REHABILITATION CENTER NEARS COMPLETION

SATPAN, M.I. (September 14)...The 60-bed Trust Territory Rehabilitation Center is hearing completion as a major division of the Majuro Medical Center in the Marshalls District.

Under construction since early 1964, it is hoped that the new anodized-aluminum-constructed Center will receive its first in-patients early in October. Adequate staff for opening one 30-bed ward will be hired before that date, reports Dr. John Iaman, Marshalls District Director of Public Health. "This will be a real improvement over the present polio center," Dr. Iaman said. Employing Micronesian personnel and two American Registered Physical Therapists, the Center is already under very limited use by one or two patients learning to walk after spinal injuries.

Started for the purpose of rehabilitating the victims of the 1963 polio outbreak in the Marshalls, the new Center will eventually be used to help victims of illness and injury from every District of the Trust Territory to regain their ability to get around, to take care of their personal needs, and even to earn a living.

"I am really beginning to get excited about moving into the new building," remarked Mrs. Billy Sypher, physical therapist, who has been with the polio program for over 18 months. Equipped with

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many modern therapy devices including an "iron lung," the Center was inspected by Dr. H. Mathew Lee of the Institute for Physical Medicine and Rehabilitation of New York City. "Rehabilitation is actually a philosophy. Either you buy the idea or you don't," Dr. Lee said. Obviously the Trust Territory has bought the tune of over \$160,000 with more yet to be spent.

As a part of the growing medical complex, the new Center will share kitchen, laundry, records, and x-ray and lab facilities with the Armer Ishoda Memorial Hospital at Majuro. In turn physical therapy will be available to the patients of the ATMH as well as those in the Center. Training in physical therapy techniques will be given the nurses assigned to the Center. These nurses can then be rotated to other districts to bring benefits of these techniques to other patients especially after injuries requiring casts or other prolonged therapy.

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