

■ NATIONAL SUPPORT GROUP FOR FAMILIES WITH CRI DU CHAT SYNDROME ■

Volume 36 Issue 2

President's Message -

NICK WALLACE



Happy Spring Everyone! Now with spring appearing, we have planted some wonderful seeds, and we are so excited to see them blossom. One of the best seeds we have planned is our 2021 International Awareness Week. We have been having this event for several years now, but thanks to this crazy pandemic bringing Zoom to the forefront, we were able to have a meeting with a few other countries and were able to discuss some amazing ideas with them. We have always had international participation, but this is the first year that we have really had a strong collaboration with some of our international friends.

As usual, we will be having our virtual 5k, but this year we are hoping to have a few live events where you can walk/run with people from across the globe. We are also planning a video project that will be done using families from the North American 5p- Society, but it will also include families from other countries as well. The

thing I am most excited about uses something that is common among all countries, and it doesn't matter what language it is written in ... that would be music. We will be announcing our first annual Awareness Week Virtual Dance!! We will be planning this dance so that everyone around the globe will be able to join us! Yes, it may be morning in some areas and even the next day in other areas, but we will be extending the invitation to everyone and hope you will join us when we announce the details of this event.

I hope you are all as excited as I am about the upcoming events for International Awareness Week. It is going to be a wonderful event, and I hope you will all join us in raising awareness during this special week.

5p-Society Zoom Talks

The 5p- Society continues its Zoom Talk Series. Zoom Talks are designed to be conversations between parents and/or caregivers about a specific topic. Zoom Talks are not presentations. To maintain confidentiality and allow a safe space for people to talk, it will not be recorded. The following topics are currently scheduled:



March 27, 2021 — 3:00 PM Eastern Standard Time (adjust for your own time zone) **Feeding Tubes and 5p-Syndrome**

Registration required at: https://us02web.zoom.us/meeting/register/tZcpfuqqqz8oGNRi5OqGjQsdZCdVHNXBeb29



April 10, 2021 — 7:00 PM Eastern Standard Time (adjust for your own time zone) **Adult Transition**

Registration required at: https://us02web.zoom.us/meeting/register/tZIudOqqrT8rGNcZTjdzMG5gHKlpNgO5VBP5



April 16, 2021 — 8:00 PM Eastern Standard Time (adjust for your own time zone)

Mild Adults with 5p- Syndrome Zoom Social Hour

Registration required at: https://us02web.zoom.us/meeting/register/tZ0lde2oqTMqGNOdfCrSnujpha-qe2n5UZuw



April 24, 2021 — 7:00 PM Eastern Standard Time (adjust for your own time zone) **Aggressive Behavior and 5p- Syndrome**

Registration required at: https://us02web.zoom.us/meeting/register/tZwtcu6hrTovGdVC1wBeL-Sc6udiMIw_vURE

Information about May's Zoom Talks will be announced in an email and on our social media pages.

Tired of the Newsletter in Boring Black and White?—Don't struggle anymore, it's in full color online only!! If you want to see all of the photos in color along with colorful graphics, please send your email address and a request to Laura Castillo, director@fivepminus.org before the next issue!! It will save the Society money and will help the environment! We think you are missing out!!

"The Faces of 5p-" Awareness Campaign



You are invited to join us in the 2021 Awareness Week Campaign, "The Faces of 5p-," by submitting a picture of your child or adult with 5p- Syndrome along with a short bio. The twist this year, if you can, is to dress your child or adult as if they were from the '80s, as our theme this year is "Party Like it's 1985p-." Everyone will be a DJ for this campaign!

We are hoping to receive pictures and bios from families all over the WORLD.

If you would like to participate, please submit your pictures (in either jpg or png in portrait, full face is preferred), bio information and release form by **April 25, 2021** to <u>director@fivepminus.org</u>.

We will begin to showcase the pictures on our social media pages each day during awareness week and beyond. The goal is to get enough pictures to put together an awareness campaign video slide show to use to promote and create awareness of the syndrome.

Please fill in the information below and submit with your picture:

Child/Adult's name:

Child/Adult's birthday:

Where your Child/Adult lives (City, State/Province, Country):

Answer the following questions (please keep the answers short to maybe 3-4 things):

Things I love:

Things I am successful at:

Things that challenge me:

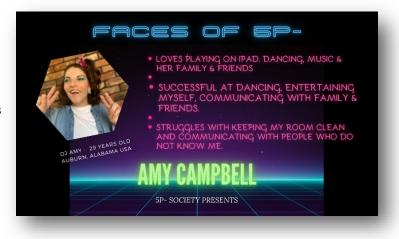


Photo Release:

I hereby release to the 5p- Society all proprietary rights and copyrights in all such photographs, digital images, voices, recordings, actions, films, and likenesses (including negatives, positives and prints) of my child/adult which shall be and remain the property of the 5p- Society. I understand that this material may be used in various publications, public affairs releases, recruitment material, and broadcasts or for other related endeavors. This material may also appear on the 5p- Society's website and other public social media sites.

I expressly release the 5p- Society, its directors, officers, employees, agents, and volunteers from any and all claims, including copyright and privacy arising out of any reproduction, broadcast, distribution, publication, or promotion of this event.

(Danast signature) (Data)

(Parent signature) (Date)

Virtual 5k for 5p- and Awareness Week Events May 1-10, 2021

It is not too late to join us for the Virtual 5k for 5p- Event. This year's theme is PARTY LIKE IT'S 1985P-, and we are going all out '80s theme. What was your favorite part of the '80s? The big hair, mullets, headbands, Walkman, music, clothes, music videos or the VJ's?

Register here: http://bit.ly/3qpf4YU

We have also included a Spotify playlist to rock out to while you run! Hey, feel free to use it while you are training, too! Find it on Spotify here: https://spoti.fi/3tSVYfU





Post your Virtual 5k for 5p- event and pictures on our social media:

FB: @virtual5kfor5pminus • Instagram: @virtual5kfor5pminus

Sign up for the Totally Bodacious Registration package and get these awesome socks, a head band, tee shirt, and medal. **Register by April 1 to guarantee** your tee shirt size.

Wear your stripy socks during Awareness Week during our STRIPY SOCK CAM-PAIGN. Remember to wear one high and one low to represent the complete and deleted 5th chromosome.

Visit our website at https://fivepminus.org/event/awareness-week-events/ for links, pictures, and ideas, including printable fact cards, 1st Responder cards, mascot C5 in color and as a coloring page.

Have ideas? Share them with us and on your social media pages!!! FB: @CriDuChatSociety • Twitter: @5pminus • Instagram: @5pminus

#partylikeits1985p #virtual5kfor5p #5pminus #stripysocks #cdcawareness #welovethe80s #fitnessiscool



2021 Chicago Conference??

Will we have an in-person conference in 2021? This is a very hard question to answer. My heart says "yes, let's do it." We all need to see each other and be together to learn, meet, and network. My logical director part of me is saying "not yet" as there are still too many unknowns – including risks and restrictions to make it a successful conference. Our survey results are in. Thank you to the 175 people who responded. Only 18% said they would attend a conference. A few more said they would attend only if safe to do so. The hotel is telling us they will be re-opened by July (they have

been closed). The contract for the hotel is based on a specific number of people attending and rooms being reserved. However, if restrictions are in place the amount of people we would normally expect would have to be reduced. Is the hotel willing to reduce those numbers? We are actively working with the hotel to come up with the best scenario for you and for the 5p- Society. We should have an answer soon, just not in time for this newsletter. As soon as the Board of Directors in consultation with the host families have come to a decision, you all will be the first to know. We appreciate your patience as we navigate the best decision.

5p- Dental Issues Faced by Our Kids

by Kimon (Kim) A. Rumanes, DDS and Alexandra Latimer, RDH, BSDH

As I am sure you already know, our kids have many challenges ahead of them as they develop and grow into adulthood. Many have mild to severe systemic issues, communication difficulties, mobility challenges, and almost all of them have dental issues. Micrognathism, or a small lower jaw, is a common trait in individuals with Cri du Chat (CDC). This can result in abnormal tooth alignment, difficult feeding, and even speech issues. Like any trait related to CDC, it can be minimal in nature or can become an extreme challenge to deal with in severe cases. In any manifestation, maintaining good oral health in a child or adult with CDC is difficult at best but absolutely necessary for their continued wellbeing and ability to thrive. Not only are teeth required to help eat food, but they also play a very important role in communication; both of which have been some of the most frustrating problems that our son Tom has had to deal with over the years.

Like many of you, we had never heard of CDC when Tom was born. I vaguely remembered it from my dental studies, but it was a very rare condition that was not at the top of the list of syndromes that we focused on in dental school. After Tom's diagnosis we dove into researching everything that we could about CDC, but information was scarce in 1990 when Tom was born.



At the time, we were stationed on Guam, and that made gathering information that much more difficult. As a Navy dentist, I was lucky to have a number of colleagues with which to discuss Tom's syndrome, particularly our staff pediatric dentist. That is where I first learned about possible dental issues that we might face as Tom's teeth erupted. We thought they would never come in, but when they did, we began home care just like we did with our other children. We would rub his teeth with a wet, soft cloth to remove any plaque (a build-up of food and bacteria particles on the teeth that sticks to the tooth surface like Velcro unless it is mechanically removed). Tom was not fond of this part of our nightly routine, but being a dentist, I knew that it was necessary and had dealt with unhappy patients before. In order to better access his mouth and eliminate the inevitable squirming and protests, my wife Chris and I would sit on the floor with Tom laying between our legs. We would then put his arms and feet under our legs to control his movement and then take a small baby washcloth to rub his teeth while singing, "This is the way we brush our teeth...(to the tune of "The Wheels on the Bus"), to distract him. We continued this process every night before bedtime, even when our patient was not happy. At first it was a challenge, but as time went on, he got more used to the process and did not squirm as much, but I doubt he ever really enjoyed it.

When he started to get his baby canines and molars, we had to change to a soft baby toothbrush, but we still continued our evening ritual. Tom thrives on a routine and does not deal with change very well, so once again, we had a challenge to overcome along with new squirming and protests. With all of the other obstacles we had to face, this may have seemed like it was not as important, but we were not going to let his oral health defeat us. I know how important flossing is in order to prevent cavities between the teeth where a traditional toothbrush does not reach, but his mouth was just too small and my fingers were too big. We tried some floss tools that we researched, but they did not seem to work well, especially on his very back teeth, and we had great difficulty seeing what was going on in there. As Tom got a little older, he became used to the nightly routine, and his communication skills improved, so we could explain what we were doing and why. We introduced a fluoride toothpaste, using a pea sized dot on his toothbrush, at about age 6. Still laying on the floor between our legs for this, he would end up swallowing the toothpaste, but this would not hurt him since it was in such a small quantity. To this day, Tom never has gotten the hang of rinsing and spitting.

We were able to successfully master our routine as a team with Tom's baby teeth but hit a speed bump when his permanent teeth began to erupt and the crowding began. Flossing became even more important because the spaces between his baby teeth that we could try to clean with a toothbrush before began to disappear. This is when we started to see the impact of micrognathism. He developed severe crowding; many of his teeth were overlapped and some were erupting toward his cheeks. Looking back, one of the best things we did (and something I would highly recommend) was to take Tom to a pediatric dentist beginning at three or four years old for check-ups. This got him familiar with a dental office setting, which can be intimidating even to an adult. He would play with the air/water syringe - squirting the assistant and dentist with water, and we made a big fuss over that, so he actually liked the visits. The pediatric dentist would take a look in his mouth and keep us advised about the order of tooth eruption and what we could expect next. We were able to get some terrible x-rays when he was about 8 (because he moved a

lot) in order to look for cavities in between his teeth that could not be seen otherwise. I have to give a shout out to the assistants who moved very fast and kept his attention while taking the images – somehow they were even diagnostic! Tom would sit on either my wife's lap or my lap when this was done, and we had a lead shield placed on us for our safety as well. We were able to get a rubber cup polishing done on these visits with some bubblegum flavored prophy/tooth paste (his choice) which made my day, as I knew that we were winning the dental battle – his teeth may not be straight, but at least they were healthy. Tom could not chew his food well, as only his back teeth were in contact with each other when he bit down, so we were advised to cut his food into smaller pieces. This allowed him to chew a little better, but there was no way he was going to take a bite out of a sandwich, as his front teeth would not come together. As he got older, we did remove some of his permanent teeth, based on the advice of his pediatric dentist, but had to do this in a hospital operating room. We would try to group other medical procedures together, such as eye exams and other surgeries, if we had to put Tom under general anesthesia in order to limit how often we would have to visit the operating room.

At age 12, we tried orthodontics to try to guide his growth while his other permanent teeth began to erupt. Our goal was to try to widen his upper and lower jaw so that more of his teeth would contact and he could eat his food better. A secondary goal was to improve his smile and decrease his front "buck tooth" issue. By this time, Tom was pretty used to nightly and now morning toothbrushings by us (the morning toothbrushing started as soon as he began to go to school). We thought about using a water flosser to help clean the appliances in his mouth better, but we would have probably drowned him and made a huge mess. To maximize our visibility, (Tom never was able to stand at the sink so we could brush his teeth) he would lay on the floor or on his bed. While in braces, we did the best we could with a soft-bristled toothbrush and what little flossing we could accomplish.

Usually when someone completes their orthodontic treatment, they get a set of retainers (either removeable or fixed) to wear nightly. Because Tom has a habit of picking his gums, especially when he had the braces on (which he actually tolerated pretty well), we were not able to put any fixed retaining wires in place when the braces came off. In retrospect – this was an error on our part, as his teeth began to shift back almost immediately after 18 months of braces and hard work. A removable retainer was not possible either, because he would not have kept it in his mouth for long. I believe it would be different today, as the retainers used by orthodontists now are much smaller. However, they hinder flossing, which can be a problem for any patient and particularly for our kids. Tom still only bites on his back molars and can't take a bite out of a sandwich, but he has a wicked smile – bucked teeth and all. We looked into having his bite corrected surgically but decided against it when we were told that he would have his jaws wired shut for six weeks following surgery and would have difficulty eating and communicating during that time.



Routine dental exams and cleanings with his pediatric dentist continued for many years. After 31 years (this March) we have established an excellent at-home oral care routine. This consists of brushing with a Sonicare toothbrush with a pea size dab of a fluoride toothpaste in the morning on his bed while we stand at his head. He then gets a glass of water to wash everything down since he still has not mastered how to rinse and spit. At night before he goes to sleep, he lays down on his bed and we stand at his head to floss with a Listerine flosser and brush with the Sonicare toothbrush with a pea sized dab of toothpaste again. He



then drinks some water and goes to bed. He is fully cooperative and I think enjoys getting the "gunk" out of his teeth as he says. Tom goes to see a regular general dentist now for routine cleanings and check-ups and has no issue with x-rays – but the assistant still moves pretty fast. We had 4 fillings put in once when he was 17 in the operating room in conjunction with other medical procedures, but "knock-on-wood" he is in good dental health. We still have to cut his food into small bites and keep an eye on a picking habit he has with his gums occasionally, but he has no dental pain and is able to use his teeth for good communication.

We graduated to an electric toothbrush, specifically Sonicare. I highly recommend an electric toothbrush as it does a much better job, according to all of the studies, and from what I have seen in my

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clinical practice. I also suggest specifically ordering "sensitive toothbrush refill heads," as they are softer than some of the other refill heads on the market. The Sonicare toothbrush has a built-in audible pressure sensor which minimizes the possibility of toothbrush damage if one has a tendency to brush a little heavy-handed. You can expect to spend approximately \$80 for this rechargeable toothbrush. Some models cost much more because of different features, much like when buying a car, but I do not believe that all the extra bells and whistles (outside of the pressure sensor) are necessary. In all fairness, Oral B makes a similar electric toothbrush with a round head that rotates, and it has a pressure sensor that lights up the handle if you push too hard. According to the clinical studies, both of these brands are about equal in their cleaning effectiveness. I have used both but prefer the audible pressure sensor and overall functionality of the Sonicare. When using any electric toothbrush, it is important to note that the traditional toothbrushing motion is not needed. The toothbrushes really do the work for you, you only need to guide it around the mouth, focusing where the tooth and gum meet. They have built-in timers that signal every 30 seconds to tell you to move to a different part of the mouth, and they shut off after 2 minutes. If you prefer to use a manual toothbrush, either for yourself and/ or your CDC child, please use a soft-bristled toothbrush to avoid toothbrush abrasion if you accidentally brush too hard. Toothbrush abrasion can cause premature recession of the gums, also known as root exposure, and this can lead to a lot of temperature sensitivity and/or cavities on the roots of the teeth. We have also discovered a floss tool made by Listerine which is basically a toothbrush handle with a removeable U-shaped bow (like a bow and arrow) attached to one end. This tool easily fits into Tom's smaller mouth, and I can floss his back teeth without accidentally choking him with my fingers while trying to use traditional string floss. My visibility is not inhibited; therefore, I can see that I am flossing effectively. When we are done flossing, we remove the used bow off the end of the toothbrush handle and replace it with a new bow the next time we floss. The bows are available in refill packs of 40 and are pretty cheap. These items (Sonicare and Listerine Flosser) can be found on-line, but I always see an ample supply at Target, pharmacies and grocery stores near the floss products when I shop. (I have no financial interest in anything I recommend, and they are my recommendations only – not from the 5P- Society).

I recommend closely supervising oral hygiene if your child with CDC can perform this on his/her own to ensure it is being done well – after 3 kids and 4 grandkids, I can tell you this is necessary. If flossing is a challenge, then I urge you to floss your child's teeth at least a few times per week to minimize decay and help avoid future gum disease. Our CDC kids are prone to higher rates of decay and gum disease because of the crowding and other medical challenges that may involve adjusted diets and/or medications that impact the flow of saliva (which is extremely important and necessary due to its natural cleansing ability). After 42 years as a practicing dentist, I can say that many adults who are uninhibited both physically and mentally do not do a very good job maintaining their oral health or my services would not be required. Therefore, direct engagement by you or any caregiver is encouraged on a daily basis to ensure good oral health.



My name is Kim Rumanes, and I have been a general dentist for 42 years, 30 of which were spent in the Navy and the last 12 years as a staff dentist working at the Walter Reed National Military Medical Center. I was also in private practice part time where I met my wife Christine while stationed at Camp Pendleton California with the Marines. We have two daughters: Carrie has 2 teenage children (14 and 16) who lived with us for many months as they grew up and followed the same daily cleaning regimen as Tom; and Alex has a 13-year-old daughter and a new baby. Alex is a dental hygienist and has helped with this narrative based on her experience in private practice and with her brother Tom, both professionally and as a family member. Thomas is 30 years old and functions at the level of an 8-year-old. He attends a day program and lives at home with Chris and me. He loves to travel with us and enjoys sports and using his iPad. He told me to tell everyone to floss to get the "gunk" out of your teeth.

Journey of Love

Infant Massage—The Benefits for the Cri du Chat Child

Colleen Frayn, CEIM

The parents of a Cri du Chat child have many things to focus on and can feel overwhelmed in the first year of their baby's life. In the midst of what can feel like uncertainty and overload, learning and sharing Infant Massage with your infant can help support your special needs child physically as well as assist you and your family emotionally.

In addition to your child's special needs, they also have the regular needs of a child. Vimala McClure, founder of the International Association of Infant Massage and author of <u>Infant Massage: A Loving Handbook for Parents</u> in her chapter on special needs babies states, "Affectionate interaction is the most important element in any baby's life." She also reports that The Touch



Research Institute in Miami has completed many studies that show how special needs children benefit from loving touch and massage with decreased anxiety and stress hormones, and improved results on clinical scores.

So what is Infant Massage? According to Donna Anderson, Physical Therapist and International Infant Massage Trainer with Infant Massage USA, "Infant Massage is a longstanding parenting tradition in many cultures, which research now confirms, has an extraordinary ability to sooth, reassure, relieve, promote healthy attachments, and provide a lasting impact on a child's emotional and physical development." She continues with, "Infant Massage is not a generic delivery of consecutive strokes. Because touch is an infant's first language, Infant Massage is an invitation for parents to be fully present 'with' their baby. Communicating HEART to HEART is the primary goal."

The benefits of Infant Massage are classified into the following four categories: Relaxation, Relief, Interaction, and Stimulation. Let's see how these benefits can support you and your child.

Starting with Relaxation, when you massage your baby, saliva cortisol (stress hormone) levels drop and relaxation hormones increase. Babies often begin to sleep better, and crying length and intensity can decrease. The person giving the massage also benefits with an increase in relaxation hormones. This can offer the family needed times of tranquility and loving connection. This scientific evidence was not available when I started massaging my children, but I felt the peacefulness that has now been demonstrated through research.

Relief can be experienced in a variety of ways. Many Cri du Chat babies have issues with constipation. By providing the Infant Massage strokes for the abdomen, this symptom can frequently be relieved. There are strokes to help with teething pain which helped my three-year-old grandson significantly. It can also reduce respiratory congestion, gas, and painful conditioning with touch. The release of emotional pain or memory of bodily trauma (injections, surgery, etc) can be supported by listening to the baby's cues and feelings which can aid resolution of issues. For example, a baby in one of my classes was enjoying the massage, but when his father began to massage his feet and heels, the baby began to cry. I asked his dad about any previous trauma to the area, and he reported multiple heel sticks in the first days after birth. I encouraged the father to not massage, but to hold his son's foot and ask how that was for him. The baby cried that night in class; and after releasing feelings at home during massage for a few days, the infant no longer cried when his feet and heels were massaged. After making sure that the baby has no physical needs (feeding, diapering, sleeping, etc.) or medical issues (check with your doctor and therapists to be sure there are no medical or therapy issues that need attention when your baby is crying), this kind of emotional support can be helpful to relieve feelings and held trauma.

Interaction is the third benefit. Bonding continues with our children beyond birth. Infant Massage provides all the elements

Journey of Love: Infant Massage—The Benefits for the Cri du Chat Child

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of bonding such as skin-to-skin and eye-to-eye contact, vocalization, odor, taste, and responsiveness. Infant Massage promotes a sense of safety, recognition, and being understood for the infant. Parents often describe an increase in confidence in caring for their baby as they deepen their understanding of their baby's cues and behavior; it gives fathers and parents working outside of the home a time of closeness and connection. Since touch is the most developed sense at birth, massage is a great way to provide loving communication with our children.

Stimulation is the last category of Infant Massage benefits. Massage increases oxygen and nutrient flow to the body and helps modulate the digestive, respiratory and circulatory systems. It may be able to help Cri du Chat children who are having issues with muscle tone. Ask your doctor and therapists about the special needs of your baby to see if learning Infant Massage could assist.



I will close with a quote from my sister-in-law, Pam, who is the mother of my nephew, Ken, who was born with Cri du Chat:

"I was introduced to Infant Massage 31 years ago when my son Ken was diagnosed with Cri du Chat. Knowing that our children born with Cri du Chat have physical and intellectual disabilities, my sister-in-law Colleen introduced us to Infant Massage. I found that Infant Massage helped me to bond with my son. I too noticed the effects of Infant Massage helped to soothe Ken when he was irritable. I noticed his irritability decreased, and he began sleeping through the night. Our biggest concern was the possibility of constipation with a low-tone baby. We continued his Infant Massage regimen for five years to stimulate his colon and decrease his stress. During those five years I too allowed his siblings to massage his tummy and body extremities with supervision. One day I walked past Ken's room to find he himself was massaging his feet and another time it was his tummy.

I strongly believe in the benefits of Infant Massage to encourage bonding with our children, to help stimulate low-tone digestive systems and to help relax and accept our children for who they are and who they will become.

I want to thank my sister-in-law for her continued love and support to us, to Ken, and to the 5p Minus Society. Colleen has attended multiple conferences over the last 31 years to help implement Infant Massage for our families." (Pam Frayn)

To learn Infant Massage, there are practicing Certified Educators of Infant Massage in 70 countries who are certified by IAIM. If desired, I can provide an individual class in person or virtually. Wishing you and your families the best. Colleen Frayn, CEIM, colleenfrayn@gmail.com

Here is a link to Infant Massage USA where you can find classes and other information: (https://www.infantmassageusa.org/)

Below is the link for a short and informative video on Infant Massage created by Infant Massage USA: https://www.youtube.com/watch?v=IwwmorKTyfQ



Colleen Frayn is a Certified Educator of Infant Massage, practicing for over 30 years. She has massaged her own children, her three- and five-year old grandchildren who she cares for once per week, and many families in private sessions and group classes. She has an Integrative Healthcare practice where she teaches Infant Massage and provides Healing Touch and Therapeutic Breathwork sessions for clients. She received her Bachelor of Science, Major in Nursing degree at NIU in 1976.



C5's Tricks of the Trade



Here's a couple helpful ways to help your little ones with trunk support. On the left you see Abigail Vaden sitting inside two stacked C-shaped pillows (Boppy brand) with a small TV tray in front of her. On the right you see Mila Ruza in the corner of a small to medium sized box playing with toys and this is helpful for mom/dad to move her from room to room as needed (a laundry basket could also be used). A secret that Cathy shared was that it kept not only toys at bay but also crumbs and the dreaded DROOL, which makes for less carpet cleanings!

Cathy Vaden, Contributor and Sandy Lynn, Contributor



Here are a couple different toothbrushes that we have found to work really well for Amy who is now 29 years old and has some sensory issues with her mouth. On the top is a triple sided battery operated toothbrush that is quiet with three different speeds and also has a two-minute timer. The Triple Bristle brand also comes as an electric rechargeable model which we use. On the bottom is the Surround toothbrush that we use when traveling. We have found that these triple sided toothbrushes definitely make the job easier.

Shari Campbell, Contributor and Newsletter Editor



Newsletter Submissions Request

We are asking all members to submit ideas, photos, or best yet, articles to be published in future editions.

*NEW...C5's Tricks of the Trade!!! Got a trick or tip up your sleeve,

please send it in with a photo (s) if possible, we love to share!!

We need to know what interests you and your family.

Please submit articles, photos, and ideas to Shari Campbell at:

djcshc@charter.net.



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Fax: (562)920-5240 Email: director@fivepminus.org

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The Mascot of the International Cri du Chat Awareness Week

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FIND US ON FACEBOOK AT http:// www.facebook.com/CriDuChatSociety

Check out the latest socks on page 3!!

Help the 5p- Society with all your Shopping

When SEARCHING the internet, don't forget to use GOODSEARCH – sign up and put in 5p-Society as your Cause. The 5p-Society gets a penny for every search. www.goodsearch.com.



Don't forget



When purchasing items on Amazon, make sure you go to AmazonSmile at https://smile.amazon.com/ and choose to support 5p- Society (Lakewood). The 5p- Society gets a small % of what you purchase. Every little bit counts and we are grateful to you for your participation.

Shop for your 5p- items below at https://fivepminus.org/shop/







Shop on SquareUp



Shop on InkSoft