

Connect

ISSUE | 02

'I was very thin, malnourished and in horrific pain because I could not eat, and still I had no explanation for what was happening to me.'

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13 things people
with an invisible
illness will
understand

DELICIOUS
SPRING
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INSIDE

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experience manager
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life
better

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Letter from Chris

Dear Reader,

I hope you enjoyed your first issue of Connect and found it interesting and informative. I was delighted by the response to our first issue, so many of you got in touch to tell us about yourselves and enter the 'face of connect' competition, we love hearing from you. I am sure you enjoyed reading about us and I certainly enjoyed reading such inspirational stories.

I am sure that like me you are pleased that the days are now getting brighter, longer and warmer. Spring is such a special season, watching the trees and shrubs budding adding more and more colour to each day and new life, lambs and calves, in the fields. This is my most favourite time of year.

Spring is also an exciting time for us all at Respond. Our Nottingham office and warehouse has moved to new premises at Manvers Street in Nottingham City centre (see page 13). The building, previously a tile showroom and warehouse, has been refurbished to a very high standard creating a fabulous office and warehouse space, with a nurse consulting room and excellent staff facilities. If you live locally feel free to pop in and meet the team.

I am sure you will enjoy this issue as much as the last and we look forward to hearing from you in the near future.

Regards

Chris Cochlin,

Director of Home Delivery Service

Connect

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A day in the life of our Customer Experience Manager

Garry Hallett

How long have you been in your role?

I have worked for the group for 7 years and my job title changed to Customer Experience Manager in 2016, to better reflect my roles and responsibilities.

What does a day in the life of a Customer Experience Manager look like? Describe a typical day at work for you.

It's probably a cliché to say this, but there isn't really a typical day for me. I report into the Director of Home Delivery Service and am part of Respond's Senior Management team. I am responsible for ensuring a consistently high level of Customer Service across all of our Customer Care teams and I report on how we are performing as a business. I liaise with Healthcare Professionals, the NHS, our Customer Care Staff and customers to make sure we offer the best service possible.

What are your favourite things about your job?

I really love talking to customers about their view of the service Respond provides. It's always great to hear the reasons why customers love using the Respond Home Delivery Service. It's also great to hear where customers feel we can improve, so that I continually make things better for our customers. As well as talking to customers over the phone, I'm fortunate in that I also get to speak to customers face-to-face (over a cup of tea is always good!). I'm always keen to talk to people about our service and feel really privileged to have been asked to speak at stoma association meetings and events, as well as at meetings that we have held in our offices with Stoma Care Nurses, charities and associations.

What makes you feel proud about working for Respond Healthcare?

All the team at Respond are fantastic and very customer-focused. I am very proud of them. I can genuinely say that Respond puts the customer at the heart of everything we do and there is a deep passion, throughout the company, to deliver the very best level of customer service.

Tell us about your biggest achievement in your current role to-date.

When I first started with the company, I was responsible for the team in Cardiff only. Over the years, as the business has grown, I am now responsible for the customer experience across all of our Care Centres in the UK. It's not something you can do single-handedly and I work with a great team of people, but I'm very proud of the part I have played in making Respond Healthcare what it is today.

What is the most important personal attribute that you bring to your job?

I think I have great energy; I love talking to people, celebrating successes and resolving issues, and, I have quite an inquisitive and analytical mind. This really helps with understanding others' point of view and developing relationships. Also, in my former years, I had the privilege of teaching English and this skill has really helped when training and coaching our teams.

What advice would you give to someone aspiring to get into your field of work?

Be passionate about what you do and never underestimate what a difference you can make to people's lives.

How would your friends describe you?

Loyal, quick-witted and spontaneous.

What is the best vacation you've ever had?

It was this year, actually. I went to Rome and there was so much to see and do. So much history – I was amazed. The food and drink was also fantastic. I loved it.

What was the best thing that happened to you this weekend? This month? This year?

Last November I got a new German Shepherd puppy, called Alfie. It's been hard work training him – lots of my socks have been disappearing into the garden, but he's 5 months old now and starting to turn in to a lovely, (almost) well-behaved dog!



To find out more about your team at Respond visit our blog at respond.co.uk

#Get Your Belly Out

A global campaign for Crohn's disease
& Ulcerative Colitis.

Voluntary run by those
with IBD /an ostomy.

Social gatherings &
fundraising activities.

#GetYourBellyOut
educates, supports &
restores confidence.

Pride of Britain
award winners.

Search
#GetYourBellyOut on
Facebook & Twitter.

Raised £60,000 for charity.

GetYourBellyOut

www.GetYourBellyOut.org.uk

Scars, an ostomy or no visible
signs; we're united in the fight
against IBD.

The Face of Connect

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Thank you for all your entries for our
“Face of Connect” competition.

The winner, as featured on our front cover is Paige Joanna Calvert.
Paige is a personal style and lifestyle blogger living with Crohn's
disease. To read her blogs visit: paigejoanna.co.uk

Here are some of our favourite entries...



If you would like the chance to feature on our next cover then
email your photos to marketing@respond.co.uk
Please ensure images are high resolution.

What if you get a parastomal hernia?

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What is a parastomal hernia?

A parastomal hernia is a bulge or swelling around or underneath your stoma. The hernia usually develops slowly and may increase in size over time.



Avoid heavy lifting

Keep your back straight, place feet apart and bend your knees when lifting.



Hints & Tips *In the months following your surgery*

Support

your stoma and tummy whilst coughing or sneezing

3



Wear a support garment if you are doing heavy work.

Avoid getting constipated

2



Take gentle exercise

4

Take regular, gentle exercise such as swimming or walking in the months following surgery. Avoid high impact sports such as rugby, football or strenuous racket sports.

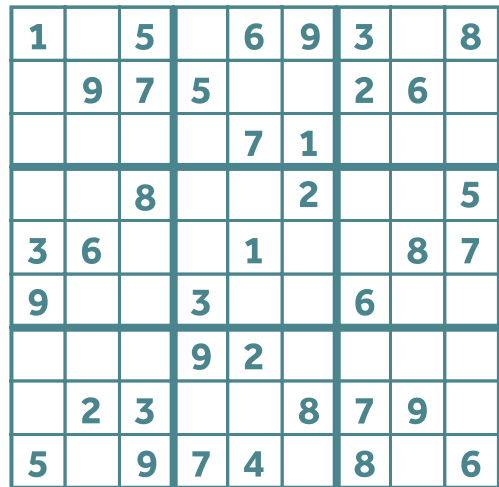
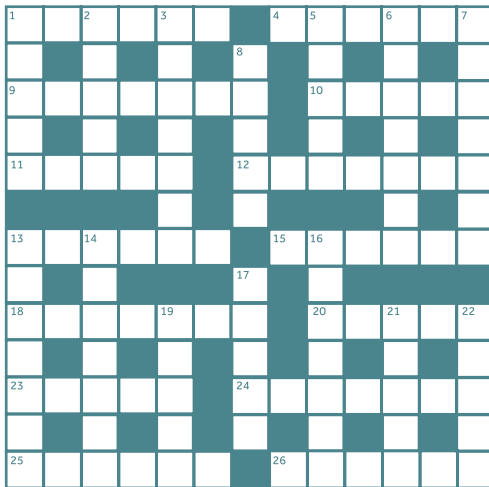


What can cause a parastomal hernia?

When a stoma is created, the end of the bowel is brought out onto your tummy through the muscle of the abdominal wall. This process can cause a weakness or gap in the abdominal muscle. Sometimes a loop of bowel bulges through that gap causing a hernia to develop.

Puzzle Page

Crossword and Suduko



Across

1. Tune (6)
4. Shriek (6)
9. Elaborate ceremony (7)
10. Youngster (5)
11. Plaudit (5)
12. Dried grapes (7)
13. Comfort (6)
15. Slapstick (6)
18. Lamp (7)
20. Legally acceptable (5)
23. Happening (5)
24. Coach (7)
25. Tallies (6)
26. Tiers (6)

Down

1. Tree (5)
2. Licit (5)
3. Extreme (7)
5. Desert plants (5)
6. Building (7)
7. Freedom from vanity or conceit (7)
8. Rear part of a ship (5)
13. Prominent (7)
14. Soft or indulgent (7)
16. Avert (7)
17. Combine (5)
19. Laud (5)
21. Spear (5)
22. Sews (5)

Please find the answers on page 27

Rachel's Story

Hi, I'm Rachel, I am a 30-year-old woman who has been poorly for 9 years. I am what the ostomy world would refer to as a 'Double Bagger'. I am a proud owner of an ileostomy called "Bob" formed 5 years ago and a urostomy called "Squirt" that was born 2 years ago.

Urostomates are like the middle child in the ostomy world! Unseen, underestimated and misunderstood they are not given the same amount of attention as the others. Like a middle child we as urostomates must try a little harder to be heard.

So, this is why I am sharing my story; to raise awareness and be heard.

It all began 9 years ago in 2007 when I was in my third year of university. I contracted *Campylobacteriosis* from ready cooked chicken purchased in a well-known supermarket chain. Little did I know that this moment would be the catalyst that triggered a chain reaction of multiple organ system failings and the birth of my 2 stomas. From that day on my life would never be the same.

After 6 months I began to have severe and frequent Urinary Tract Infections (UTIs) I was given multiple antibiotics to clear the infection but as soon as I finished the course I would have the symptoms of another one, then one day I was unable to empty my bladder and was in complete retention with horrific pain. The urologist team decided that I needed to start Interstitial Self-Catheterisation (ISC). Well what an adventure that was! I had to do this twelve times a day while trying to work as a nurse and still suffering from



the pain, retention and cramping. During lunch time I frantically ran to the urology department for the nurse to catheterise me. After weeks of this the urology team decided it was time for me to have a urethral catheter. Looking back I cannot believe I still tried to work running around the department with this bag attached to my leg. It didn't last long though and I ended up having to leave, which was a very hard decision. I had worked so hard to get to where I was but it all seemed to disappear in the blink of an eye. However, this turned out to be a good decision because things got worse. For some reason my body did not like the urethral catheter which brought on horrendous spasmodic pain that felt like my bladder was giving birth to the catheter. During that period I ended up in A&E roughly every 2-3 months with catheter induced infections.

After a couple of years I was totally at the end of my tether with the pain and always being in A&E. I was unable to do anything which affected me physically, mentally and spiritually. In 2010 I had a Supra-Pubic Catheter (SPC) which was much

easier to cope with and the pain improved. While all these bladder problems were going on my bowel started to fail. It began with severe constipation and the inability for the bowel engage in peristalsis and have a movement. The only way to empty my bowels was with interventions such as laxatives, barium enemas and the Peristeen Irrigation System. As you can imagine at this point I was very thin, malnourished and in horrific pain because I could not eat, and still I had no explanation for what was happening to me.

At this point, I was 7 stone and very malnourished. It was decided that I needed an emergency operation to form the loop ileostomy. This happened in June 2012 where 'Bob' was born. The surgeons said he saved my life and that I wouldn't have been here if it wasn't for him.

I still didn't have a diagnosis and but late 2012 a neurologist got involved, he was adamant that it was 'Autonomic Neuropathy'. He chased the referral to the UK specialist Autonomic Unit at the University College of London Hospital where I was admitted and had lots of weird and wonderful tests. Eventually I got the diagnosis that I fitted under the umbrella term of Autonomic Neuropathy but the specific type has no name but it is very similar to Multiple System Atrophy (MSA). The relief I felt, hearing that all of this wasn't in my head and there was a reason my organs were failing was indescribable. This was short lived when they told me there was nothing they could do and there was no cure. Little did I know then the lack of knowledge the medical profession has in this area. There have only been a handful of doctors I have ever met who knew what autonomic neuropathy and what the different types were.

Summer 2015 it was discovered that the cells in my bladder had started to mutate so I had my bladder removed and a urostomy formed. I named the stoma 'Squirt' after causing havoc when the stoma nurse changed him! The last 2 years have been extremely difficult for me. I have been hospitalised for roughly 7 months in the past year on separate occasions. The longest spell out was seven weeks, which as you can imagine, just when I am starting to get on with my life I am back in the hospital yet again!

I truly believe that even after all these admissions; my life does not stop because I am in hospital! My life still goes on. It's just that now I have to make the most out of my situation, sharing my story and experience with other patients who have had some sort of stoma surgery or just need to chat about what they are going through!

The last 9 years of illness feels like I have achieved a degree, masters and a PHD in being ill. All the trials and tribulations of having a chronic illness and different type of stoma bags means I HAVE A STORY and if this story can help just one person to identify and feel they are not alone then I have done my job! I can honestly say that without my stoma bags I would not be here today. Life doesn't stop because of your ostomies, it is the beginning...

Thanks,
Rachel x

For more blogs from Rachel visit
www.rocking2stomas.co.uk or watch her on
"The IBD and Ostomy Support Show" live every
Thursday at 8pm on youtube.



Iced Biscuits

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Iced Biscuits

Makes 24 cookies

Ingredients:

- 250g plain flour
- A teaspoon of baking powder
- A pinch of salt
- 115g margarine
- 150g white sugar
- 1 large egg
- 1 teaspoon of vanilla extract

Method:



1. In a large bowl, combine margarine and sugar, mix until light and fluffy. Beat in the egg and stir in the vanilla. Mix the remaining dry ingredients (flour, baking powder and salt) in a separate bowl. Gradually add the dry ingredients into the wet mixture until fully combined. Cover and chill in the fridge for 2 hours.
2. Preheat the oven to 200C and grease some parchment paper. On a clean floured surface, roll out small portions of dough to ¼ inch thickness. Cut out biscuits with a shape cut out.
3. Bake for 6-8 minutes, or until the edges just start to brown. Remove from parchment paper and cool on wire racks. Decorate your biscuits as you wish with icing!

13 things you only have to deal with if you have an invisible illness

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1 "You don't look sick."

Not all illness is visible from the outside, many illnesses are completely internal, such as Crohn's and mental illness. Just because someone doesn't 'look sick', doesn't mean they are feeling 100%.

2 "Everybody gets exhausted."

While the current pace of modern life is tiring, there is a distinct difference between being tired and being sick. Sickness can take a lot out of you and even mental illnesses can have a dramatic effect on energy levels.

3 "You'll feel better tomorrow."

A lack of understanding drives this statement. 'Invisible' illnesses will not be made better by "a good night's sleep". Some 'invisible' illnesses are long term and a lot of people must learn how to live with them for their entire lives.

4 "I wish I had time to take a nap."

Debilitating fatigue is not falling asleep on the sofa after Sunday dinner. Tiredness is one of the hardest invisible symptoms to explain, often being wrongly associated with laziness.

5 "Push through it and you'll be ok."

That is not at all how this works. Especially when working through common daily tasks feels like wading through treacle. Consider asking how you can help rather than making off-the-cuff statements.

6 "Have you tried doing this..."

When it comes to any illness, there are those friends and family members that instantly become a doctor when the subject arises. The likelihood is that we've already had all the information we need from our GP's and we don't need unqualified advice.

7 "You need to get out more."

Making and keeping plans whilst ill isn't easy. Friendships can be tough with an invisible illness, but they can take on a deeper quality that doesn't rely on "getting out more". Socialising can seem a lot more tiring when you feel sick and just the thought of 'getting out more' can make you feel worse.

8 "You can't use the disabled toilet, that's for people with disabilities."

Often you can feel self-conscious using facilities reserved for disabled people, despite the need for them. People often don't understand that not every disability manifests itself in the same way.

9 You constantly have to think of an excuse.

We shouldn't have to think of an excuse whenever we are too tired or feeling unwell. We shouldn't have to feel the need to explain why we don't want to meet up or why we've changed our minds last minute about going for that drink.

10 "There's people that have it a lot worse."

It's not a competition as to who is more sick than whom. Every illness, no matter how severe or how visible, should be treated with the same sensitivity.

11 "Your life is great...what do you have to be sad about?"

Living with an invisible illness isn't easy but comments like this make it harder. Having to justify yourself constantly to overcome ignorance only adds to any stress. Depression is a sickness just like any other illness and those that suffer with it will know that there doesn't have to be a specific reason or event that has made us feel this way.

12 It doesn't matter how old you are, you can still have an invisible illness.

Young people are often unaware of hidden illness, which makes explaining and understanding it even more difficult. We assume that young people are generally healthy and carefree, however there are more and more young people being diagnosed with mental health issues than ever before.

13 You can end up making yourself more sick.

All these daily battles wear you down. Often we push ourselves too hard to comply with preconceived expectations and this in turn can make recovery longer.

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WE ARE
MACMILLAN.
CANCER SUPPORT

RESPOND FUNDRAISING IN AID OF MACMILLAN CANCER SUPPORT

We're delighted to announce that we have helped raise a staggering £2,325.45 for Macmillan Cancer Support in 2016/17.

Questions about living with Cancer?

Call free on 0808 808 00 00 or visit macmillan.org.uk

Macmillan Cancer Support. A registered charity in England & Wales (261017), Scotland (SC039907) and the Isle of Man (604)

#Get Your Belly Out

A global campaign for Crohn's disease
&Ulcerative Colitis.

We are pleased to announce our fundraising partners of the year for 2017/18 are #GetYourBellyOut.

We will be holding fundraising activities throughout the year...watch this space!

New Nottingham office

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Last month our Nottingham care centre moved to a new premise in Manvers Street, Nottingham.

The building, previously a tile showroom and warehouse, has been refurbished to a very high standard creating fabulous office and warehouse space, with a nurse consulting room and excellent staff facilities. If you live locally feel free to pop in and meet the team.



Experts at Living with a Colostomy

Support, Reassurance and Practical Advice

Thinking about going on holiday? Don't let having a stoma stop you.

Our resources on travelling in the UK or abroad will provide you with all the information you need.

- ▶ **Travel Advice Booklet**
Planning a trip, what supplies to take, travel check list, FAQs and more.
- ▶ **Travel Certificate**
Explains in various languages to authorities that people have a medical condition.
- ▶ **Travel articles from travellers and our volunteers**
- ▶ **Travel Insurance Factsheet**
- ▶ **Our 24 hour helpline**
Ask to speak to a volunteer about their travel experiences.

Colostomy Association is a national charity that provides support, reassurance and practical advice to anyone who has or is about to have a colostomy in the UK. We believe that everyone with a colostomy should be able to live a full and active life.



Contact us to order copies of our resources or to find out more about the free services we provide.

General Enquiries:
Tel: 0118 939 1537

Website:
www.colostomyassociation.org.uk

24 Hour Helpline:
0800 328 4257

E-mail:
cass@colostomyassociation.org.uk

www.colostomyassociation.org.uk

support for you

Innovative support wear

HiLINE

We take pride in our expertly designed support wear, swimwear and underwear for people living with a stoma or continence issues.

View our full range online or request your free brochure today. These items may also be available on prescription.

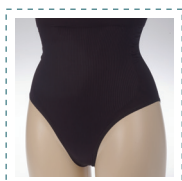
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15



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HiLINE garments are designed to provide abdominal support following bowel surgery and can be used for hernia support or as a preventative measure during physical activity. Ideal for a wide range of conditions such as: ileostomy, colostomy, urostomy, hernias and incontinence.



Unisex light control support garments.

Available in a choice of boxer, brief or support belt.



Lightweight unisex support belts.

Medium support wear available in 2 depths and 3 colours.



The HiLINE Activ range.

Medium support wear available in 5 plain unisex colours.



Ostomy pantie brief.

Medium support wear to relieve hernia symptoms and protect hernia repairs. Available in white or black.



Breathable stretch unisex ostomy belt.

Firm support wear available in 3 different depths. Supports hernias and lower back.



HiLINE EZ-wrap unisex hernia support belt with aloe vera coating.

Medium/firm support wear in a choice of 3 depths and 3 colours.

Support items may be available on prescription.
Call our friendly Customer Support Team today for more information.

0800 220 300
0800 028 6848 N. Ireland

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Meet Karen your community nurse

Karen began her nursing career in 1976 in Frimley Park Hospital as a student nurse. Once qualified Karen worked in several areas over the years including Haematology, Dermatology and Isolation.

For fifteen years Karen was the Colorectal/Stoma Clinical Nurse Specialist which included counselling patients prior to surgery and continuing with their care post-surgery.

Karen's passion is teaching her patients to be confident and independent in their stoma care whilst supporting them psychologically in their transition from hospital to home.

Karen covers Portsmouth and surrounding areas.

Do you have a question for Karen?
email hello@respond.co.uk

moisturising and nourishing



The **astoa**® range from respond



Astoa Barrier Cream is a unique formulation with Raspberry Seed Oil and Sunflower Oil

- Soothes damaged skin
- Moisturises dry skin
- Prevents skin irritation
- Protects skin from harmful body waste
- Silicone and fragrance free
- Cost effective



Astoa Hydrocolloid Flange Extenders protect your skin and reduce leaks

- Advanced technology
- High absorbency
- Leakage prevention
- Skin friendly strong adhesive
- Flexible
- Provides confidence & security
- Choice of small, large and wide options



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Two reasons Astoa naturally helps

Stretch, break, reshape and mould Astoa seals to fit even the most awkward of areas. The natural Shea butter will help protect and moisturise your skin. Available in a choice of thin or standard options.

To see how the **Astoa** range of products can help keep your skin protected and your pouch secure please call

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What if you get pancaking?

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What is pancaking?

Pancaking is the term used to describe what happens when the output from your colostomy does not fall to the bottom of your pouch, but instead remains at the top and around your stoma.



1 Keep hydrated

Drink plenty of fluids, especially water, unless you have been advised by your doctor to restrict how much you drink.



3 Lubricate your pouch

Before removing the release film from the pouch adhesive, lubricate the inside of your pouch with OstoZYME odour neutralising pouch lubricant.



What can cause pancaking?

- Insufficient air in the stoma pouch causing the sides of the pouch to stick together
- Sticky or stodgy output from your stoma

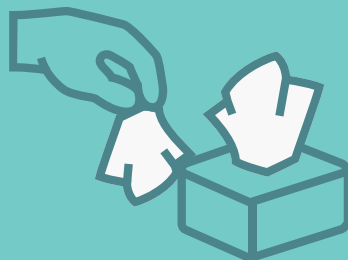


Hints & Tips

In the months following your surgery

2 Prevent pouch sticking together

Put a small crumpled tissue inside the pouch to prevent the sides sticking together.



Spring Chicken

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Recipe Card

Spring chicken with roasted vegetables and new potatoes

Ingredients:

- 1 large chicken
- 1 tbsp olive oil
- 50g butter, softened
- 500g bag of new potatoes (peeled if preferred)
- 200g bag of baby carrots
- 100g frozen peas, defrosted
- 2 courgettes, sliced
- Mixed herbs such as mint, parsley, chives (optional)

Method:



Heat oven to 200C/180C fan. Sit the chicken in a roasting dish, rub the butter over the outside of the chicken, season with salt and pepper and roast for 30 mins.

Toss the new potatoes in olive oil. When the chicken comes out, scatter the potatoes around it. Put back in the oven for another 30 mins.

Stir the carrots and courgette slices into the potatoes and put back into the oven for another 20 mins.

Check the chicken is cooked by piercing the thigh and making sure the juices run clear. Stir the peas into the other veg with a splash of water and put back in the oven for 5 mins. Remove from the oven, cover loosely with foil and rest for 10 mins. Scatter over the herbs before serving.



IA®

The ileostomy & internal pouch
Support Group

We've been there too...

IA is the national support group specialising in supporting people with an ileostomy or internal pouch

- Most IA volunteers are themselves living with an ileostomy or pouch

- National visiting service matching patient to visitor

- Patient-focused literature for ileostomy and internal pouch

- National network of volunteers providing local support

- Working closely with healthcare professionals to provide quality support

0800 0184 724

info@iasupport.org

www.iasupport.org

We are here to help

Our community nurses

Our local community nurse teams are available through the Respond service. Their support complements the care you receive from your hospital stoma nurse and healthcare professionals.

To find out more or book an appointment visit
respond.co.uk/our-nurses

Adhesive remover and deodorising fragrance in one convenient package



OstoPEEL Adhesive Remover

- Easily removes stoma appliances
- Refreshing fragrance for deodorising during changes
- 360 degree spraying
- Lower cost to the NHS

Available in mint, apple, blackberry or unfragranced

Call our Customer Support Team

on **0800 220 300** (or **0800 028 6848** for Northern Ireland)

or complete and return the form below to get your free sample.

Respond Healthcare Ltd

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Your free sample

Name

Address

Mobile

Email

Please detach and send to: **Freepost RTSZ-SLYE-EBTL, Respond Healthcare Ltd, Greypoint, Cardiff Business Park, Parc Ty Glas, Cardiff, CF14 5WF.**

Please select a fragrance you would like to sample:

☐ mint

☐ blackberry

☐ apple

☐ unfragranced

The information supplied on this form will be retained by Eakin Healthcare Group on a database. The data will not be disclosed to any external sources.

Please indicate here if you do not wish to hear of further products and services available from Eakin Healthcare. ☐ CH2

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Events

We would love to meet you

We run events and open days throughout the year, all over the country.

They're a great chance to meet with the Respond team, your community nurses and other people who are living with a stoma.

So whether it's at a coffee morning, a roadshow, an open day or clinic at one of our premises we'd love to welcome you.

Visit our website to find out about our upcoming events.



You'll also find lots of information on our **facebook** and **twitter** pages, so keep in touch!

respond.co.uk  respondltd  @respondltd

If you have any further questions about open days, please give us a call on 0800 220 300 or email hello@respond.co.uk

What if you get ballooning?

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What is ballooning?

Ballooning happens when the wind from your stoma collects inside your pouch causing it to inflate or balloon.



Cover your pouch filter

1

To avoid your pouch filter getting wet and therefore inactive, cover it with one of the adhesive tabs supplied with your box of pouches before you have a bath, shower or go swimming. Don't forget to remove the tab when you have finished.



Hints & Tips

In the months following your surgery

Irrigate your stoma

2

Irrigation or flushing the bowel out with warm water is a form of stoma management suitable for some but not all people with a colostomy. Irrigation can help reduce the problems associated with ballooning.

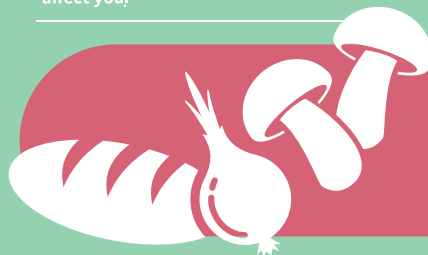
Avoid certain foods

3

Some foods, such as green vegetables, mushrooms, onions, garlic and wholemeal bread may give you excessive wind and you may want to eliminate the ones that affect you.

What can cause ballooning?

- A blocked pouch filter
- A wet pouch filter
- Dietary issues





Specialist support and encouragement, covering all types of urinary diversion

Local Branches give a chance to meet with others,
or our trained volunteers can assist on a one-to-one basis.

Comprehensive website and closed Facebook group

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Puzzle Answers

Crossword and Suduko

1	M	E	L	O	D	Y		4	S	C	R	E	A	7	M
	A		E		R		8	S		A		D			O
9	P	A	G	E	A	N	T		10	C	H	I	L	D	
	L		A		S			E		T		F			E
11	E	C	L	A	T			12	R	A	I	S	I	N	S
						I		N					C		T
13	S	O	L	I	C	E		15	C	O	M	E	D	Y	
	A		E				17	U		B					
18	L	A	N	T	E	R	N		20	V	A	L	I	22	D
	I		I		X			I		I		A			A
23	E	V	E	N	T			24	T	R	A	I	N	E	R
	N		N		O			E		T		C			N
25	T	O	T	A	L	S		26	L	E	V	E	L	S	

1	4	5	2	6	9	3	7	8
8	9	7	5	3	4	2	6	1
2	3	6	8	7	1	4	5	9
4	7	8	6	9	2	1	3	5
3	6	2	4	1	5	9	8	7
9	5	1	3	8	7	6	4	2
7	8	4	9	2	6	5	1	3
6	2	3	1	5	8	7	9	4
5	1	9	7	4	3	8	2	6



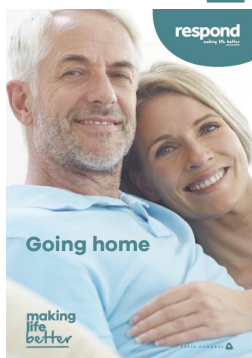
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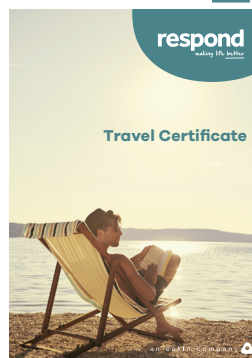

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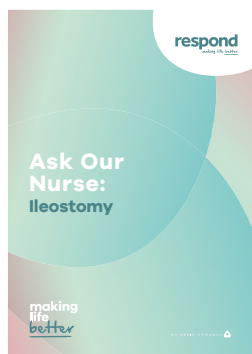
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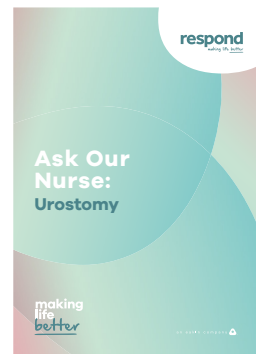

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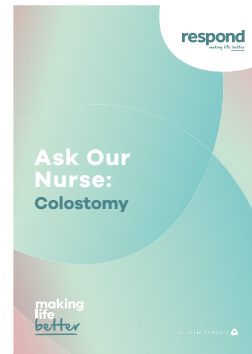
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