

April 1996

FROM THE MEMBERSHIP DESK by Jim Lodge

We are still in need of volunteers in the following areas:-

Ingrid Brundin 920-5708 Joan Diemecke 479-5290 Library

475-1860 Fund-raising - Ryta Tracy

Publicity -David Smith 658-4991

Afternoon meeting minute taker -Rae Supeene

Telephoning - Priscilla Ekman 652-6499

Tea and Cookie helpers at meetings -Joy Hull 656-4938

Info Packet Project Rae Supeene 478-1974

If you would like to volunteer in the above areas, please contact the co-ordinater listed or phone me at 386-8227.

The deadline for any contributions to next issue of hepc.bull is April 23rd. Please contact Joan Diemecke at Tel. 479-5290.

Membership in Hepatitis C Survivors' Society:

Anyone wishing to become a member, the minimum dues are \$15.00 per year and application forms are available at each meeting or on request. Benefits through the National Office are an Income Tax receipt, membership through November each year, plus the national newsletter. The Victoria Chapter benefits, too, by receiving a portion of the dues to help with operating expenses.

I would like, on behalf of the Support Group, to thank the persons already volunteers, in helping to run the group more efficiently so that at every meeting the upmost help and support is forthcoming to each one of you in need of answers to the many questions you must have and the support you are looking for.

Reminder: - If you have a change of address, name, or phone number please let me know at your earliest. Thanks.

Jim Lodge 386-8227

Co-chairperson, Membership Chair.

NEXT MEETING: April 17, 1996

 $1 - 3 PM \quad and/or \quad 7-9 PM$ St. John the Divine Church Lounge

1611 Quadra St. (Entrance through the rear, marked Annex)

Nutritionist Elizabeth Bergen will speak at the evening meeting. Afternoon speaker to be announced.

Notes from the Jan 17, 1996 Meeting:

The Guest Speaker for our January meeting was Natalie Rock, BSN. Natalie is the hepatology clinical research nurse at Dr. Anderson's Hep C clinic in Vancouver, BC.

Natalie began by demonstrating for the group how the medical profession is not quite clear about Hep C, i.e., how the process can be confusing to both patient and doctors.

Natalie then presented an overview of Hep C: Causes and effects, transmission and treatment.

An introduction to the protocol of treatment at the clinic and what they had to offer in Vancouver followed.

There was discussion of the need for a hepatologist on Vancouver Island. Natalie can be reached at Tel: (604) 876-5122

Notes from the Feb. 15, 1996 Meeting:

Guest Speakers: Jeremy Beatty and Herb Moeller.

On March 9, 1996 in Vancouver, BC, there was an all day discussion on the topic of Class Action suits for Compensation. Class action suits are carried by large law firms that can afford the cost. Many law firms will need to work together on a class action suit for Hepatitis C patients. It may take 3 to 5 years to plan such a suit. Lawyers will need to get information now to form an opinion so as to be prepared to begin action, and funding will be needed to pay for the disbursments.

In reply to a question from the group, i.e., Support vs. Compensation dollars--Jeremy replied that this was a

legal question. As a non-profit society, HeCSS cannot legally be part of a class action suit. In order to stick to the letter of the law, at the February board meeting a motion was adopted that HeCSS would "encourage, foster and support the formation of a group to begin the legal process of a suit". This legal distancing is mandatory for a non-profit society which expects to apply for funds from any government, or which wants to keep its charity designation in Ottawa. It was also noted that the courts decide which case classifies as a "class-action suit", not the lawyers representing the persons or group of persons who wish to pursue legal means of re-covering damages. Such a group has been formed in Penticton. They are in the process of registering as a non-profit society, as well, but with the intent of registering as a charitable organization, for tax receipts of donations. It would be a group that includes only those transfused with the virus. Their proposed name is "The Blood Transfused Victims with Hepatitis C. in B.C.". HeCSS's official position is one of being very supportive to this group.

Jeremy mentioned that hospitals keep records for only five years, so it will be a problem for many to prove they received tainted blood before 1988. The group received an update on the activities of HeCSS with the Krever Commission, which will possibly go to court in May. Suggested reading list:

Bad Blood

Gift of Death

The February 12, 1996 Globe and Mail article on the Krever Commission. (continued on p. 3)

(continued from p. 2)

There was news about HeCSS in Toronto, including mention of Allan Powell's "team", the fact that

\$252,000 has been raised, and that a request for \$200,000 is before the BC government. Also mentioned was the

fact that there are now 12 chapters and 14 telephone networks affiliated with HeCSS.

Certain issues to be dealt with on a national level, such as a membership drive, chapter development, and fundraising were mentioned.

The last two meetings of HeCSS, Victoria Chapter, were interesting and beneficial to our members who attended. The February meetings were "getting-to-know-you" sessions. The March meetings introduced us to Ozone Therapy, and the speakers left material, including video tapes, in our library. If anyone is interested, he/she should contact Ingrid Brundin at Tel. 920-5708

NOTE:

HeCSS cannot endorse any physician, product or treatment. The guests invited to our group to speak, do so to add to our information only. What they say should not necessarily be considered medical advice. It may help you can make an informed decision. Please consult with your health practitioner before considering any therapy or therapy protocol.

RYTA'S COLUMN

I want to fill everyone in on the formation of a group in Penticton to pursue a class-action suit. Some of their publicity and fund-raising efforts may benefit many of our members. When their ribbon campaign starts on March 30th, we may want to support them also by ordering some of the ribbons (\$1 each) and spreading them around also to our members and city.

Also, I want toletreaders know about the positive feedback from Dr. Sean Peck, Deputy Provincial Health Officer, concerning our funding proposal, which will be forwarded to the Minister of Health, once it is determined who will be in that position for the long term, not the short term (i.e., until an election). Dr. Peck mentioned in his call to Jeremy (chairman of the Board) that he is a member of the Blood Issues Advisory Group of B.C., and that he intends to recommend that the government provide funds to consumer groups (i.e., HeCSS).

I also want to remind everyone that we are going back to our regular meeting schedule of every 3rd Wednesday of the month. Please bring a friend or family member as we need their support and their volunteer efforts on our behalf. Hopefully, they will decide to become members.

Ryta Tracy

To Laugh or Not To Laugh -- That is the Answer

You've always heard that humour and laughter are good for you. Now there's proof. "It's no longer mystical," said Dr. Lee S. Berk of the Loma Linda School of Public Health in California. He says he is gathering hard, serious evidence to show why. Although he doesn't say how, he just says that an hour spent laughing lowers levels of stress hormones like cortisol and epinephrine, and that the body's T-cells and antibodies all show signs of heightened activity.

I think everybody knows this deep down inside, one way or another. I know it works for me. I always feel better after a good laugh.

According to Dr. William F. Fry, of Stanford, babies begin laughing at the age of 2 or 3 months, and the rate of laughter picks up steadily for about 4 years, when the average child laughs 300 times a day.

After that peak, the desire to conform to one's peer group puts a damper on how much one laughs. How much the average adult laughs varies from a dour 15 chuckles a day to a high of 100 or so giggles of delight. Clearly, adults are the losers here, and laughter authorities (I hope this group includes John Cleese, Robin Williams, or Steve Martin) regard this decline as a blow to the health of body and spirit.

Laughter increases blood circulation, works abdominal muscles, raises heart rate, gets stale air out of the nether regions of the lungs, and even lowers blood pressure.

Anyway, I don't need statistics to prove to me what I already know. Now, I can't tell a joke to save my life, but I sure do appreciate a good one. Jokes aren't necessarily the most fundamental element of humor. Life itself is funny. Not fun, especially. Just funny. There are many hilarious instances in life that crop up on a day to day basis, and you just have to be receptive to them when they do. It helps to be open to all things. That's a basic recipe for success in life. For some people, that may require work, while for others, it will come more naturally.

As for me, well, Monty Python works, and so does Fawlty Towers and Mr. Bean, the first 4 Marx Bros. movies, and comedians like Robin Williams, Steve Martin, Charles Chaplin, and Jim Carey. (Yes, even Dumb and Dumber made me laugh.) Being funny isn't simply trying to be funny -- it just is. So next time you feel a little down about what's happening in your life, go rent yourself Duck Soup or All of Me. There are many others to choose from, guaranteed to raise your spirits and, maybe for just a little while, help you forget your troubles.

David Smith

FDA Clears Liver Assist Device

WEST LAFAYETTE, IN, SAN DIEGO, CA and SILVER SPRING, MD Mar 04 (Reuters) -

HemoCleanse, Inc. announced that the FDA has granted 510(k) clearance to market the Hemo-Cleanse BioLogic-DT System for the treatment of acute hepatic coma, pending an FDA inspection of its manufacturing facilities. This FDA action will enable HemoCleanse to offer the BioLogic-DT System to hospitals treating patients with liver failure. Currently, there are no similar devices approved by the FDA for use in the U.S.

Robert B. Truitt, CEO of Hemo-Cleanse, said, "...Our device can be used to increase liver failure patients' chances of recovering their own liver function, possibly avoiding the need for a costly liver transplant."

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