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BC CHAPTERS NEWS BULLETIN

HEPATITIS C SOCIETY OF CANADA MAR 1998

Issue No. 10



THE CURE?

Note: We must be very cautiously optimistic about this news. The data has not been published yet and the report is lacking in real information. Furthermore, there are problems with the study that include but are not limited to these facts:

1. This study is only done with 42 patients.
2. They say that they have both HCV and HBV patients but do not say how many of each.
- 3.. They say that the duration of the disease was shortened considerably- by what measurement, assumption, etc.?
4. Relapses were high in the HCV group.

This study will be published in the Anticancer Research in March, so we will have a better opportunity to review it then.

Darlene

Hungarian, U.S. doctors claim new hepatitis cure

By Duncan Shiels

BUDAPEST, Feb 18 (Reuters) - A group of Hungarian and U.S. scientists say they have found a cure for hepatitis B and C which has no side effects and costs less than a fifth of current methods of treatment.

Results of phase two tests of the treatment using a naturally occurring virus developed by Laszlo Csatory of the United Cancer Research Institute in Alexandria, Virginia, are to be published in the March edition of the international journal *Anticancer Research*.

"This is the first actual cure for hepatitis B and C," one of Csatory's team Tibor Bakacs of Hungary's Institute of Oncology told Reuters on Wednesday. "This virus is non-pathogenic to humans, it produces no illness and a course of treatment costs a fraction of other treatments."

Infections of hepatitis B (HBV) reached epidemic proportions in the 1970s but the number of cases has been reduced in recent years through international preventive vaccination programmes.

Hepatitis C (HCV), which first appeared in 1989, is now recognised as a major public health problem worldwide. Between one to two percent of the population of developed countries are affected and infection rates run as high as 15 percent in parts of Africa.

(Continued on page 3)

Hepatitis victims in line for millions Ottawa could act without provinces

Wednesday, February 4, 1998

*By Anne Mcilroy
The Globe and Mail©*

OTTAWA -- The federal government is willing to contribute at least \$300-million to compensate Canadians who were infected with hepatitis C through tainted blood.

But negotiations with the provinces on a joint assistance package for the forgotten victims of the blood tragedy are making little progress.

Some provinces are offering little or no cash, arguing that they already have to shoulder the cost of looking after the thousands who face a life of illness because the blood system failed them.

Sources familiar with the secret negotiations say the hard-line position that Manitoba and New Brunswick presented at the meeting of federal and provincial deputy ministers of health last week in Vancouver could be a negotiating tactic. But if it isn't, it could set the stage for a confrontation with the federal government that would see Ottawa acting alone in offering a settlement for victims infected with the sometimes-deadly disease.

Cyrus Reporter, spokesman for federal Health Minister Allan Rock, said yesterday the government still hopes a joint package can be worked out because that would better for the victims. Spokesmen for the New Brunswick and Manitoba health ministers did not want to comment.

Symptoms of hepatitis C range from mild discomfort and fatigue to cirrhosis or liver cancer. As many as one in five people who are infected will likely die, and there is no vaccine and no cure.

Tens of thousands of Canadians are believed to have been infected with the hepatitis C virus through contaminated blood and blood products, including but not limited to the 28,600 who contracted the disease between 1986 and 1990. Mr. Justice Horace Krever's final report into the tainted blood tragedy of the 1980s blamed the federal and provincial governments and the Red Cross. He said a test that was used in the U.S. could have prevented 85 per cent of those people from getting the disease.

The pressure is on for the federal and provincial governments to agree on a package because victims have launched lawsuits worth more than \$3-billion in total. The idea is that

(Continued on page 8)

COMING UP:

Victoria Chapter Meetings: Last Wednesday of each month 1 - 3 PM, and again at 7-9 PM, St. John the Divine Church Lounge, 1611 Quadra St. (Entrance through the rear, marked Annex) NEXT MEETING: Mar. 25

Penticton Chapter Meetings: Third Thursday of every month, 7-9 PM, Penticton Health Unit - Board rooms. NEXT MEETING: Mar. 19

Kelowna Chapter Meetings: Last Saturday of every month, 1-3 PM, Rose Avenue Education Room in Kelowna General Hospital. NEXT MEETING: Mar. 28

Nanaimo Chapter Meetings: Second Thursday of every month, 7 PM, Health Unit-Central Vancouver Island, 1665 Grant St. NEXT MEETING: Mar. 12

Sunshine Coast Support Group Meetings: First Thursday of each month, 7:30 PM, Coast Garibaldi Health Unit in Gibsons. NEXT MEETING: Mar. 5 Contact Carol for more information: 886-4298 or email her at Carol <ryker@cheerful.com>

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THANK YOU!

Victoria Chapter HeCSC acknowledges the personal donations, donations in kind and memorial donations received to date, and the following for discounts, donations of services, or equipment: Monk Office Supply. CFAX 1070 Radio, Apple Canada, and Pacific Coast Net.

The deadline for any contributions of hepc.bull is the 22nd of each month. Please contact: Joan Diemecke at Tel (250) 388-4311 or FAX 479-5490 or Darlene Morrow at 1203 Plateau Drive, North Vancouver, BC, V7P 2J3
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\$300 for 12 issues

Ayurvedic Medicine

Part Two: Herbs, Formulas and Healing Toxins:

The root of disease is ama. Ama, the accumulation of toxins, develops for many different reasons. For example, whenever incompatible foods are ingested, agni, life energy or body fire, will be directly affected as a result of the toxins, or ama, created from these poorly digested foods. If the tongue has a white coating, this indicates the presence of ama in the large intestines, small intestines and stomach. This depends on which part of the tongue is coated. Ama develops when agni's function is retarded, although, over active agni is also harmful and will eventually lead to a weakened immune function.

Toxins are also created by emotional factors. Repressed anger aggravates pitta, causing inflammation throughout the digestive system. Repressed fear and anxiety can cause bloating and gas. Imbalances will occur and affect all the tridoshas if emotions are repressed long term. Agni is weakened, which in turn weakens the immune system, causing allergies and particularly, intolerances to the foods which would normally aggravate each dosha. For example a person born with a pitta constitution will naturally be sensitive to hot, spicy foods which aggravate pitta. In the same way repressed pitta emotions such as hate and anger may also increase the hypersensitivity to foods which aggravate this constitution.

Ayurveda recommends that emotions be observed with detachment and then allowed to dissipate. When emotions are repressed, that repression will cause disturbances in the mind and eventually in the functioning of the body.

Incidentally, in Chinese medicine, each organ has an emotion linked to it. The emotion connected with the liver is anger. So it is assumed that any liver problem would be associated with anger being stored in the organ, and therefore, anger release work would be an important adjunct to any therapy.

The importance of taste (Rasa):

Ayurveda states that the taste of a herb is not incidental, but is an indication of its properties. Different tastes possess different effects. We do not usually connect taste with therapeutic properties, but rather enjoyable or not.

The Sanskrit word for taste, rasa, has many meanings, all of which help us to understand the importance of taste in Ayurveda. Rasa means "essence", the essence and prime factor, of a plant. It means "sap", the invigorating part of plants. It means "appreciation", "artistic delight", "a musical note". Thus taste evokes feelings, which is again the essence of the plant. Rasa means "circulation", "to feel lively", "to dance", all of which reflect the energising power of taste.

Taste directly affects the nervous system through prana. Taste stimulates nerves, awakens the mind and senses to make us feel alive. Thus taste sets our own rasa or essence in motion. Through stimulating Prana, particularly the gastric nerves, taste affects agni and enhances the power of digestion. It is the good taste of food that is necessary to awaken our agni for proper digestion.

For this reason, bland food may not be nourishing in spite of its vitamin or mineral content. Without stimulating agni, there is no real power of digestion. Ayurvedic medicine has, therefore, always included the science of cooking with the right spices.

When we are sick, we lose our sense of taste and our appetite. Taste, appetite, and the power of digestion are related. Lack of taste indicates fever, disease, low agni and high ama, the accumulation of toxins. To improve agni and eliminate disease, it is necessary to improve our sense of taste. This is why spices are such important Ayurvedic herbs.

Ayurveda recognizes six tastes: sweet, sour, salty, pungent, bitter and astringent. These derive from five elements—each taste is composed of two elements. Sweet taste is composed of earth

and water; sour of earth and fire; salty of water and fire; pungent of fire and air; bitter of air and ether; and astringent of earth and air. Many herbs and foods will have more than one taste or flavour.

The essence of nourishment, the sweet taste, is used for general debility, weakness, symptoms of aging, lack of semen and impotence. The sweet flavour is cooling, nutritive (tonic), pleasant and softening. It is contraindicated for kapha (water) disorders, including obesity, mucous diseases like cough and asthma, diabetes. Herbs useful for hepatitis C include Astragalus, Licorice, Siberian Ginseng, Marshmallow, Slippery Elm. Foods: Sesame seeds, peas and beans, rice, barley, millet, oats and yams. Yogurt is both sweet and sour.

The sour taste is heating, and causes salivation, increases secretions, cleans the mouth, possesses stimulating and digestion-promoting properties and is thirst relieving, induces sweating and causes burning in the mouth and throat. It is used for loss of appetite, dyspepsia, and vata disorders or diseases of the nervous system. It is contraindicated for disorders of pitta and blood, gastritis, internal bleeding and jaundice, and therefore should be kept to a minimum with Hep C or combined with cooling, bitter herbs. Foods/herbs citrus, yogurt, green grapes and hawthorn berries.

The salty taste is heating, is easily soluble, water-retaining, softening, and causes a burning sensation in the mouth and throat. It is used for loss of appetite and dyspepsia, as an expectorant for coughs, as a diuretic, and for neurological (vata) disorders. It is contraindicated for disorders of pitta (fire) and blood, skin diseases, swelling hypertension, hemorrhage and gastritis. Hepatitis would be considered a fire disorder. Epsom salt and seaweeds are salty flavour.

The spicy or pungent taste is heating, counteracts congestion and stagnation, stimulates the nervous system, warms, stimulates digestion, causes tears, headaches and tingling sensations. Spicy taste is effective in treating loss of appetite and indigestion, and as an anthelmintic for dysentery. It also is helpful for coughs, colds, asthma, obesity, skin diseases and as a dentifrice. It reduces excess kapha (water) and vata (air). Hot, spicy-tasting herbs and foods are contraindicated in disorders of pitta (fire) and blood, eruptive skin diseases and semen disorders. Some spicy or pungent flavour substances are peppers, cinnamon, asafoetida, garlic, aconite, and prickly ash. Spicy or pungent herbs should not be used with Hep C to reduce aggravation of the liver unless they are combined with cooling herbs such as peppermint, dandelion and other bitter herbs.

The bitter taste is cooling, overwhelms all the other flavours, and is clearing, drying and cleansing to the mouth. It is antipyretic, clears fevers, is detoxifying, removes pus, is anthelmintic, anti parasitical, inhibits bleeding, relieves burning sensations, promotes digestion and relieves constipation, treats skin diseases and also is useful in anorexia. Bitter taste in excess is contraindicated in nervous disorders, as it would further aggravate vata (air). It also is not recommended for semen disorders.

Bitter herbs include Milk Thistle, Turmeric, Boldo, Dandelion, Burdock, Barbary or Oregon grape (all helpful for clearing, detoxifying and/or strengthening the liver), Cascara, Turkey Rhubarb, Sarsaparilla, Blessed Thistle, Golden seal, Red Clover, Gentian, Centaury, Passionflower.

The astringent taste is cooling, contracting, cleaning, drying, and causes stiffness, mouth dryness, heart pains and feelings of heaviness. It also promotes healing, stops bleeding, is anti diuretic, stops diarrhea, is absorbent, and normalizes skin pigmentation.

(Continued on page 7)



Squeeky's Corner

or: How I Graduated



from Grade 1 to Grade 2

Well, since I last spoke to some of you in print, I've had the opportunity to speak to quite a few of you on the phone and now by email. And some of you might have noticed that, well, sumtimes I'm not as nice as I'm supposed to be. Downright crabby if you ask me--plain old insensitive etc. blah blah and yodie-doo!

Well, I guess there's really no excuse for being "rude"--especially when I'm generally "wunnerful"--except for sumtimes. And them sumtimes happen to be quite frequent recently--and I'd like to blame it on my liver. So there!

Speaking of which. Yours trooly just had a Killer of a biopsy. I was in tears! Felt like I had been kicked in the ribs all the way through to my back, and I couldn't take a deep breath for several hours. In the end, or more precisely, by the morrow, the pain was gone. But what ensued was a flare-up of my hep like I haven't had in quite a while. I again experienced a very strong fatigue for just over a week, in which any exercise was out of the question--including going for a walk.

So: I've been tired, and foggy, and achy and mumbly and grumbly. And no wonder why! My biopsy shows that I've made progress. Progress backwardz. Good old Billy Reuben (that's what I call my liver) has now made it to early fibrosis and the inflammation shows me that it's party time down there for all them invading viral particles. Sometimes I swear they've started a trailer park in my portal tract, and they're having one continual hoe-down. I almost positive I heard someone singing Willie Nelson tunes down around my midriff the other night. And no, dear, it wasn't gaz!

OFFICE UPDATE:

I'm now the "official" office manager (whatever that means) so I guess its up to me to tell you all that the phone almost always never stops ringing--which when you come to think of it is really sad. More people with hep. We now have close to 700 people on the bulletin mailing list and it is growing.

We have some new videos and some new books for you. We also have, thanks to Ivan Good, a faster Mac and modem (or is that a Mac with fries and a Coke?) and have been able to increase contact via the Web and email. Response to our Website is fantastic (another reason I'm totally pooped---rotsa woyk!), and as compensation issues come to a head, our ability to stay up to date and on top of it has run us of our feet.

Speaking of which: there's a Dance in Nanaimo Feb. 28 at the Dorchester Hotel at 8:30? and on Friday (27th) February there will be a Hepatitis C Rally at the Parliament

buildings in Victoria. The rally will start at 1:30.

And then let's not forget our upcoming "Run for Your Life: Cordova Bay, 5 km Fun Run," June 28, 1998. Volunteers are needed. Call Dave Smith at 388-4311 or email him.

Last: a special thanx to Sandy and Kim, for all the help they give us with the database and the mailing. Look for them up on our Website

squeek

THE CURE (Continued from page 1)

Current treatment of HCV, which becomes persistent in about 85 percent of its victims, involves the use of the drug alpha interferon, a relatively expensive therapy.

Researchers at the Mayo Clinic in Rochester, New York, concluded in results published in November that a six-month course of alpha interferon therapy cost an average of \$4,000 per quality-adjusted life-year gained.

Bakacs said a full course with the new virus, MTH-68/B, an attenuated form of Bursal Disease Virus (BDV), cost a total \$400 to \$800 for six months.

In terms of treatment, 25 to 30 percent of patients may respond to a prolonged course of alpha interferon (12 to 18 months) but the treatment produces some harmful side-effects.

According to Csatory's paper, 42 HBV and HCV patients were treated with the BDV virus and another 42 with conventional therapy in tests carried out at Budapest's Szent Laszlo Hospital.

In the case of HBV five percent of the test group relapsed, compared to nine percent on the control group, while for HCV sufferers the corresponding figures were 32 percent and 79 percent.

The duration of the disease was also considerably shortened, it said.

Bakacs said the findings came at a time when current vaccination programmes against hepatitis B were encountering difficulties.

"There are 70 countries currently vaccinating but they have discovered escapee mutants. We now need a treatment," he said.

He added that with such a small sample further research was needed but there were strong indications that the results would be confirmed in larger-scale tests.

"You cannot make sufficiently strong statistics on 40 people but it is the first evidence of the principle that this can be done," he said. "From here on it is just a question of bigger numbers."

SOURCE: REUTERS News Service

Additional note from the Toronto office:

[This treatment] is only in second phase trials. Phase three randomized control trials will take a minimum of five years and will involve thousands of patients before the treatment can be licensed and approved by the FDA in the U.S. and equivalent licensing bodies around the world.

Hepatitis victims issue ultimatum

A lawyer for B.C., claimants says the BC and Federal government face litigation warfare unless tainted-blood settlement negotiations start this month.

*By Petti Fong
Vancouver Sun©*

The Vancouver lawyer representing B.C. claimants who contacted hepatitis C through tainted blood gave the provincial and federal governments an ultimatum Tuesday, saying they'll face litigation warfare unless negotiations begin this month on a settlement.

"I hope to hear from them by mid February. If we don't, we just go to litigation warfare," warns J.J. Camp, who represents 1500 claimants. "We have the financial muscle and the guts to do it."

On Tuesday, some details of the plaintiff's demands were released for the first time, nearly two months after the proposed settlement was sent to provincial and federal health ministries.

Camp said there will be coordinated effort between lawyers representing claimants in B. C., Saskatchewan, Alberta and Ontario to put increasing pressure on all governments. Part of that campaign will include press conferences to allow the victims to detail the emotional and physical costs of the potentially life-threatening virus.

The proposal written by Camp and the basis for a common settlement for victims in other provinces, does not give a specific monetary demand.

Under the plan, individuals with hepatitis C would become eligible for compensation by proving they received a transfusion and that they have not engaged in high-risk activity, such as intravenous drug use. An initial payment would be made to all victims, even if they had not developed symptoms.

Claimants who have developed symptoms would then receive further compensation.

Those who have not developed symptoms would have the right to defer the assessment of damages and a fund would be established to cover these claims at a future date.

In November, Justice Horace Krever recommended a no-fault compensation system for anyone who contracted a disease through the blood system.

B.C. Health Minister Joy MacPhail could not be reached for comment on Tuesday.

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UASK

Natalie Rock RN, BSN
Hepatology Clinical Research Nurse
Dept of Medicine UBC
Vancouver Hospital Div. Gastroenterology

Q: I have hepatitis C. Where has my libido gone?

A: Libido can very simply be defined as "sexual desire". A more encompassing definition might define libido as "the psychic energy of sexual desire derived from instinctive biological drives". (I will not go into detail of how Freud and Jung define libido). Humans are very sexual beings and because of this it plays a very significant role in our lives.

Many things affect sexual desire even in those who consider themselves "healthy". These factors are numerous and multidimensional such as stress, fatigue, body image, lack of interest, etc. In those who also have a chronic illness these factors may be even more heightened beyond what the general population experiences. Thus the issue of the effects of a chronic illness and libido is a very complicated one.

Specifically, let's look at the effects of having hepatitis C on one's libido. When first diagnosed with HCV there may be questions or concerns and anxiety regarding sexual transmission. If not dealt with immediately, or if you are not provided with accurate information, fear of passing the virus to your partner may create a barrier between you and your partner. The longer it is not addressed, the harder this barrier is to overcome.

Having liver disease itself can also play a big part in deterring an active sex life. Studies measuring sexual hormones in patients with mild liver disease showed that the level of sex hormones was normal. In cirrhosis, however, the liver may not properly metabolize sex hormones and there may be an estrogen/testosterone imbalance, particularly in men. In men with cirrhosis there is an increase in estrogens with resulting effects such as shrinking of the testicles, enlargement of the breasts, loss of body hair, and certainly loss of libido. The effect in women is not as apparent, but many women with liver disease stop having menstrual periods, also an indication of estrogen/progesterone imbalance, and this may contribute to the loss of libido. Other studies have shown that chronic infection will activate the immune system with production of cytokines (agents which initiate or inhibit the bodies inflammatory processes). In animals it has been shown that cytokines decrease libido, cause fatigue, and anorexia, and it has been suggested that these effects may occur in humans as well.

Relationships also play a large role in your ability to have an active sex life. Openness, honesty, and communication are important

PRELIMINARY HEPATITIS C AND HEEL PAIN SURVEY

Tammy M. Gracen, B.Sc., D.P.M.
Podiatric Medicine & Surgery

1. How long have you had hepatitis C?

2. What is your age?

3. Gender: Male Female

4. List any other medical problems:

5. List all medications that you are currently taking:

6. Do you currently use...?

Alcohol - yes - no

Drugs - yes - no

If yes which drugs?

7. Have you ever used alcohol or drugs?

Alcohol - yes - no

Drugs - yes - no

If yes, please explain

8. Do you experience muscle fatigue? (Please explain)

9. Do you experience muscle or tendon pain? (Where and for how long)

10. Do you experience joint pain? (Where and for how long)

11. Did you experience the symptoms in questions 8, 9, and 10 prior to being diagnosed with hepatitis C?

12. Do you have heel pain? - yes - no
If yes, please continue

A. One or both heels?

B. How long have you had the symptoms?

C. Do you experience pain with activity?

D. When is pain the worst?

E. What aggravates the pain?

F. What makes the pain better?

G. Have you had any treatment for this? (If yes, please explain the treatment and what worked and what didn't work)

H. Did you ever experience heel pain prior to your diagnosis with hepatitis C?

Please send your completed survey to:
Dr. Tammy M. Gracen
Broadway Medical Building
#530-943 West Broadway
Vancouver, BC
V5Z 4E1

Tel: (604) 734-7331 or Fax 737-1146

aspects to any relationship and are necessary if a sense of closeness and sexual intimacy are to be maintained. With the diagnosis of hepatitis C there may be a feeling of separation due to the chronic disease, a sense of guilt that one has the disease, a sense of frustration, and these emotions may cause a sense of separation and isolation. The desire for sexual intimacy may thus decrease. Chronic anxiety also has a major effect in decreasing sexual desire. The anger, fear, guilt or grief about the disease, the uncertainty about the course of the disease, the uncertainty about the treatment may all cause anxiety such that sexual desire is significantly lessened.

Interferon, the drug used to treat hepatitis C may have a significant effect on libido. Some of the commoner effects of interferon are fatigue, headache insomnia, muscle aches and feeling down, all symptoms that will decrease

the desire for sex. The decreased libido from treatment affects males and females equally. A recent study of 18 males treated for 12 months with interferon showed that 22% of them complained of sexual dysfunction (defined as impaired libido erectile failure, and impaired ejaculation) which was unrelated to any significant hormonal change and resolved after interferon therapy was stopped.

In summary, decreased libido in patients with chronic hepatitis C is fairly common and has many causes. Some causes are from the disease condition itself, some from the emotional and psychological reactions to the disease, and some from the drugs used to treat the disease. A recognition of this is a starting point to a better understanding. Certainly, accepting the reality, discussing the problem, and assessing the contributing factors will assist in coping and dealing with the condition.

Thymus Gland Supplementation

The thymus is the most important gland in our immune system. It is comprised of two lobes which lie beneath the thyroid gland, above the heart. The health of the thymus is very important, to the extent that our immune system's functioning depends on it. People who have hepatitis C or other chronic infections often have decreased thymus activity, as do people who suffer from autoimmune diseases, allergies, and migraine headaches.

The thymus produces T-lymphocytes, the type of white blood cell which controls "cell-mediated immunity," which refers to the immune mechanisms which aren't regulated by antibodies. This kind of immunity is important because it protects us from infection by mould-like bacteria, yeast infections, fungi, parasites, and viruses, such as hepatitis C. If someone has symptoms from hepatitis C, that person probably has ill-functioning cell-mediated immunity. This kind of immunity is important in protecting us against cancer and autoimmune disorders, such as can often be found in hepatitis C patients.

The thymus gland releases hormones such as thymosin, thymopoietin, and serum thymic factor. These hormones regulate several immune functions, and low levels of the hormones may cause depressed immunity and make us more defenceless against infections. Usually older people, as well as people with cancer and AIDS, have low thymic hormone levels, as do people under a lot of stress.

Some naturopaths advocate strengthening the thymus. If someone has symptoms indicating that the thymus gland isn't working well, they say it may help to attempt to improve thymus function. This may be done by insuring good nutrition, and by taking antioxidants, such as carotenes, vitamin C, vitamin E, zinc, and selenium. The nutrients required to manufacture thymic hormones are zinc, vitamin B6, and vitamin C. The use of concentrates of calf thymus tissue may promote thymus gland activity, as well.

Numerous clinical trials have shown that calf thymus extract is effective in correcting the T-cell defects in HIV infections, preventing respiratory infections in children, treating acute hepatitis B infections, increasing white blood cell counts in cancer patients undergoing chemotherapy, and ameliorating allergies in children. It seems to regulate the immune system, so that it improves the function of the thymus both in cases of over- and underactive immune disorders.

When a person has a chronic infection, such as chronic fatigue syndrome, or chronic post-viral syndrome, the immune system is depressed. This makes it hard for these people to overcome their illness, which in turn leads to infection, which again leads to a damaged immune system, making the person still weaker. By restoring healthy immune function, thymus

extracts would theoretically provide the solution to chronic infections.

It has been shown that patients undergoing chemotherapy for cancer suffer a drop in white blood cells, similar to what hepatitis C patients undergoing interferon therapy often experience. In the cancer patients, taking thymus extracts has been helpful in preventing that effect. It stands to reason that the same would happen with hepatitis C patients on interferon.

We can use the same reasoning with autoimmune disorders. Thymus extracts have been shown to improve T-helper to suppressor cell ratios in rheumatoid arthritis sufferers, so for those of us who have auto-immune problems such as autoimmune hepatitis, cryoglobulinemia, Sjogren's syndrome, or any of the other autoimmune disorders related to hepatitis C, it may be advantageous to take thymus extracts.

No side effects or adverse effects have been reported with the use of thymus preparations.

Check with your doctor before beginning any supplements. You might also want to consider the possibility of "Mad Cow Disease."

Joan Diemecke

For more information, see "Enhancing thymus function: The clinical uses of thymus extracts", by Michael T. Murray, ND, American Journal of Natural Medicine, Vol. 3, No. 7, September 1996.



Chiron Testing Hepatitis C Vaccine

On February 16, 1998, the Chiron Corporation announced that it has begun a Phase I trial of its Hepatitis C Virus (HCV) vaccine. The company plans to test how safe and tolerable two different doses of the vaccine are, and will investigate the immune response in the subjects.

Chiron discovered the hepatitis C virus in 1987. Their vaccine consists of a recombinant HCV antigen combined with their MF59 adjuvant to induce antibodies and other possibly protective immune responses.

The study uses patients randomly chosen to be placed into two groups. One group receives the vaccine, and the other receives a placebo. This is a double-blind, dose-escalating study, given to forty-eight healthy adult volunteers who will receive three immunizations over a 6-month period. Chiron estimates that the trial and data analysis will be finished by 1999. The company believes that this product has potential both as prevention of the disease and therapy for the disease.

DAVE'S COLUMN

Grievous words stir up anger.....

But a soft answer, turns away wrath.

In my last article, I talked about depression and how I deal with it. I've never been officially diagnosed with clinical depression or bi-polar disorder but I've had bouts of acute depression throughout my life which have no doubt interfered with the normal ebb and flow of things.

The reason I'm bringing it up again is that last time I only obliquely referred to anti-depression medicine as a possible treatment. Yes, it is part of my treatment and yes, I am deriving benefit from its effects. It was pointed out to me by my excellent physician that I might be doing a disservice to you, our readers, by not mentioning this personal but very important piece of information. Not that I am ashamed of my condition, but I hedged at revealing it until I had thought it through.

At the time of my last writing, I was just starting to come out of a deep black hole and wasn't sure which way the wind was going to blow for me. Since that time, though, I've definitely noticed a significant improvement in my outlook, and I seem to have a little more positive energy.

Depression is not something to be ashamed of. People, especially men, have a tendency to feel that there is a stigma attached to the subject of depression. Women, on the other hand, are socialized to be more emotive than men, and, as a consequence, more anti-depressants are prescribed to them. I merely want to make a point here rather than throw open a gender-related debate.

Anyone who doesn't need to take them cannot fully appreciate the mindset of those who do, and if someone was prescribed an anti-depressant drug they didn't need, they would reap no benefit from taking it.

Depression seems to be a byproduct of Hep C. The harder the liver has to work just to perform its normal functions, the more negative the effects on a person's outlook. The body is constantly tired and the sufferer is literally sick and tired of being sick and tired. Add to this the anxiety and worry of being able to continue providing for your family; maintaining a living; keeping a roof over your head; not having the powers-that-be recognize the severity and the potential for a devastating worst-case scenario; and being denied disability payments when, and if, that time comes, then there is a distinct opportunity for depression to become an integral part of your life.

Zoloft, the drug I'm taking, is in the same class as Prozac, perhaps the best known of a specific class of drugs known as Selective Serotonin Reuptake Inhibitors. It's one, if not the least sedating, of the anti-depressants. The benefits of Zoloft over Prozac are quite significant for someone with liver disease. It

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Astringent herbs are contraindicated in conditions of general debility and weakness, anorexia and loss appetite, and disorders of vata (air) or neurological disorders. Oak bark, cranesbill, alum, witch hazel, red root and bayberry are astringent taste.

Ayurvedic Formulas:

Hepatitis is treated with herbs that improve bile flow. These herbs are usually bitter in taste. Blessed thistle is an excellent and gentle liver and blood detoxifier. In Ayurveda, turmeric is considered helpful as a herb especially when used with barberry. Milk thistle is prized for its powerfully regenerative effects on the liver cells, as is the Ayurvedic herb Picorhiza, which can be found combined with milk thistle. Liv-52 is a popular Ayurvedic liver formula.

Constipation can be quite a problem with Hep C. The safest and best known laxative formula in Ayurveda is Triphala. This is a mild-acting, internal cleansing combination of three nutritive fruits called "myrobalans", including amla fruit, the highest known source of vitamin C.

Neem (bitter and pungent taste), a little known tonic herb in North America, is used extensively in Ayurvedic medicine. It is one of the most powerful blood purifiers and detoxifies. In addition to building up the body and immune system (equal to Astragalus) it appears to have merit as an anti viral herb. Although not an Ayurvedic herb, but worth mentioning, Olive Leaf extract seems to equal Neem in its action. Both herbs are worth considering as supplements for improving immune function, with the added bonus of having anti viral properties. Ashwaganda (bitter, sweet and astringent taste) is another tonic herb and is India's equivalent to Ginseng.

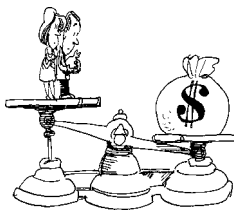
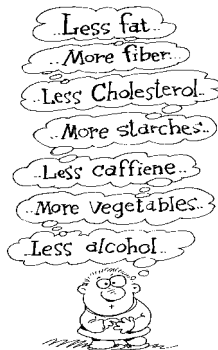
Finding out your constitution, dosha, and using the appropriate foods/herbs to promote healing and balance could be very helpful in controlling Hepatitis C. Certainly energetic medicine makes a lot of sense. If you have a hot condition with excess fire, as with most liver disorders, it makes sense to use cooling herbs or foods which will help to eliminate the heat. This is the basis of both Ayurveda and Traditional Chinese medicines. There are many good books and practitioners available who can support your healing process.

As a healing guide, I would encourage everyone with Hep C to take a wholistic (body, mind, spirit) approach to support their condition, and ultimately improve your quality of life. It is everyone's right to not have to struggle with life. Claim it!!!

Reference:

- 1 AYURVEDA The Science of Self-healing, Dr Vasant Lad, Lotus Press, 1984
- 2 The YOGA of HERBS, Dr David Frawley & Dr Vasant Lad, Lotus Press, 1986
- 3 Planetary Herbology, Michael Tierra, CA, ND, Lotus Press, 1988.

Mishel Rees MH, WT, RM, BDiv is a Healing Guide and Master Herbalist, using many different healing modalities to support her clients. She is coowner and the operator of Quantum Life Energy Natural Dispensary & Clinic, 1050 Marine Drive, North Vancouver B.C. Ph 604-986-7908, Fax 604-986-7925, email blairt@wimsey.com



NEED HELP WITH INTERFERON COSTS?

I have had a great deal of difficulty lately trying to continue my Interferon treatment without interruption. I ran out of money for interferon and spied a 1-800 phone number in one of the newsletters a couple of issues ago. But it was the wrong number. The number *hepcBC. Bull* published was 1-800-521-7157, which was an American number for CARE. They could not provide me with the Canadian CARE 1-800 number! Wow...now isn't that a lack of international cooperation by a huge multinational pharmaceutical?

So around Dec.15, '97, I phoned my Contract Research Organization VIRIDAE and requested help. A week later I was told to phone 1-800-363-3422. That was CARE in Montreal. No answer, but an answering service kicked in. Callers should enter local 2000 and punch in the number "0" when prompted. It took them a week to call me.

With the ice storm the following week - The phone lines were dead. Then, due to the involvement with Pharmacare and pharmaceutical companies and doctors and the pharmacist, another two-week delay transpired. I ended up dealing with:

Ms. Sonja Turner
Information Officer
C.A.R.E. (with Schering in Montreal)

Tel. #:1-800-363-3422 Local 2000
Then punch in "0" when prompted
Fax :1-888-260-9490

I eventually got subsidized by CARE once they assessed various faxed financial documents and personal medical details. The whole process was tantamount to a crazy roller-coaster ride. VIRIDAE had the candidness to suggest that I had to track down the details and figure out where any delays mysteriously lurked. I have the energy and zeal. A sicker person wouldn't. HeCSC might well arrange for a contact person for those facing personal financial bankruptcy that need help in sourcing out subsidized Hep C medication. All the phone calls and faxes and follow-ups practically amounted to a part time job! It was very exasperating.

In the end it was only the kindness of the pharmacist that gave me a week's worth of interferon while I waited for the final approval. A person shouldn't have to depend on the kindness of strangers. There is enough loss of dignity with this disease.

Adriaan Von Meyenfeld

TRAVEL COST COMPENSATION About TAP:

The Travel Assistance Program is sponsored by the BC Ministry of Health and Ministry Responsible for Seniors.

TAP was created to help residents of BC to access health care services that they cannot obtain unless they travel.

In other words, if you have to travel to get access to specialists in Vancouver, for example, the TAP program will pay for, or give you discounts for your travel costs, such as ferry fares, for you, your vehicle, and for an escort, if one is needed.

Please ask your doctor for a form to complete. You also need to contact MSP to verify your eligibility and to receive a confirmation number before you travel. (Phone number below)

You are eligible if you are a BC resident enrolled in the Medical Services Plan, and your travel expenses aren't covered by other insurance policies. There are regulations such as arriving at the ferry, for example, one hour before departure.

This program doesn't include meals, accommodations, car expenses, or local transportation. You must make your own travel and accommodation arrangements. You may obtain more information by calling MSP at 1-800-661-2668 from 8:30 am to 4:30 PM, Monday through Friday. You may also call 387-8277 in Victoria.

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has a shorter half-life than Prozac, thereby reducing the tendency to accumulate and create toxicity. It also affects fewer liver enzymes making it less likely to affect other medications.

It takes about 4 to 5 weeks to start taking effect and now it is safe to say that it was the right drug for me. I've been on it now for 2 months. Thank you, good doctor, for coming thru for me once again.

It is very rare to be first time lucky with a medication of this nature. I must say, at this time, that I was dragged kicking and screaming into this reality. I had always been told that you have to figure it all out yourself, and believe me I tried. My life has been one constant balancing act (5 planets in Libra doesn't hurt) and one long roller coaster ride. My long departed father was a wonderful man, but he was a real promoter of this fix-it yourself philosophy. He was raised in the North of England and spent his formative years (11-17) hiding behind blackout curtains, during WW2, so ... that's the way he and many others of his generation worked out their problems. As a result, I never considered chemical therapy until this last bout of depression, which was as bad as it had ever been in my life.

One last comment: This worked for me and continues to improve day by day. In no way do I endorse this aspect of therapy for everyone; however, as I intimated in my last piece, if you can't get out of that deep black hole no matter how hard you try, go see your doctor and take it from there. Help is out there for anyone who is willing to be pro-active with his own health, despite the often crippling psychological effects of Hep C..

David Smith

(Continued from page 1)

the victims would get money in exchange for signing a waiver promising not to proceed with their suits.

In the past, both the provinces and Ottawa have resisted compensating people infected with hepatitis C through tainted blood, fearing it would cost too much. But the potential civil liability, coupled with Judge Krever's recommendation that all victims of the tragedy be compensated, has changed the federal position.

A government source said Ottawa is willing to offer anywhere from \$300-million to \$600-million or more in compensation, depending on how many victims are included in the offer. A key unresolved issue in the talks is whether the compensation package should be offered to more than the 28,600 who were infected between 1986 and 1990. (Roughly the same number were infected before 1986.)

They also can't agree on whether to compensate the so-called secondarily-infected. The federal government wants to include the spouses and children of victims of the tainted blood fiasco who were made ill through contact with loved ones.

Ottawa would prefer to make the offer before the end of the fiscal year. The government is currently cramming in all sorts of spending before the next budget to reduce the surplus. Finance Minister Paul Martin is expected to announce. The government wants a smaller surplus to prevent pressure to spend more or cut taxes.

But one senior government official said the money would still be available next year. "This is not a fiscal issue."

But some of the provinces do not appear to be in any kind of hurry.

Sources say the provinces reviewed U.S. scientific papers on the costs of providing health care to people infected with hepatitis C and argue that it will cost them, on average, about \$49,000 a person each year to care for them. They argue that the cost they will bear of blood victims' basic health care should account for all or most of their contribution to a compensation package.

Because the provinces are responsible for health care and have no choice but to look after the needs of tainted-blood victims, they argue that they already bear a significant financial burden.

But it seems unlikely that the federal government will accept this idea. Ottawa believes that the provincial governments have a duty of fairness to provide compensation.

Groups representing victims say that they believe the federal government is keen to reach a deal, and that Saskatchewan and Quebec are also pushing for a settlement. They say Ontario, New Brunswick and Manitoba are the most hard line. The rest of the provinces appear to be hanging back, watching to see what will happen. They say it may soon be time for the federal government to make an offer on its own.

THE TORONTO OFFICE SPEAKS ON CLASS ACTION SUITS

Dear Tim:

It has been increasingly brought to our attention that many of our members are not only frightened by the sizable chunk that the class action lawyers seem to be demanding, but also leery of the strong-arm tactics and possible costs involved in litigation.

To be more precise, recently many of our members have been harassed by some class action lawyers urging them to sign-on (and possibly sign away certain rights) before an uncertain but soon approaching cut-off date. Our members have turned to us for advice in this matter, and, frankly, we are hard-pressed to give them needed direction.

Is there a cut-off date? And is there a penalty-free optout clause? Are these conditions clearly set out in writing? And if so, where?

Finally, at our last monthly meeting one of our members expressed his opinion that even if there were an optout clause in effect, nevertheless, those afflicted with hepatitis C who had signed on to the class action suit would have to pay some kind of costs--and this, even if the class action suits do not proceed.

We would appreciate a clear set of guidelines on this matter. Because of the urgency, a prompt reply would be sincerely appreciated.

Thank you very much

*David Smith, Joan Diemecke,
C.D. Mazoff*

Dear Dave, Joan and Squeeky:

I received your e-mail from yesterday... Firstly, remember we cannot give legal advice and cannot be held responsible if someone is unhappy with a course of action they chose from a list of options we outlined for them to the best of our knowledge.

However, we all know that people seek guidance from us anyway, so all we can do is present them with information as we know it. Here's what I know (or don't know):

Whatever pressure is being exerted from lawyers on members must be happening only in Victoria, because we have not heard it from anywhere else.

Questions: Is this pressure coming from the only two class action lawyers in B.C. --J. Camp and David Klein, both based in Vancouver? If so, my understanding is that there should be no upfront costs to join a class action. If a settlement is reached, either in court or out of court, then the lawyer's fee could be taken from the client's award. At this point the class is nowhere near trial stage. So, what's the hurry? Except that, maybe the lawyers are concerned that a compensation plan is coming down the pipe soon from the feds and the provinces. I wouldn't sign anything at this point, because access to a future compensation plan will not be controlled by lawyers. Everyone should be able to apply whether or not they have started any legal action.

If this pressure is coming from any other

lawyer, then this is an individual action, where the client must pay some upfront costs. Again, I personally would not sign anything or pay out any more fees. I would wait until we see what comes from the governments. If the person is not satisfied with the government offer, they could choose to pursue legal action, either individual or class, if the class action lawyers are also unsatisfied with the offer and continue. People in BC have more options than elsewhere because the two classes cover all time frames before and after 1986-90, so there is no need to pursue individual action at this point, unless the person has lots of money and is not satisfied with the class lawyers.

When people call, looking for the class action lawyers, we still give them the numbers of the four in Canada, depending on where and when they were transfused. There should be no costs involved at this point. They simply put their names on the lawyers list and wait to hear something further. If anything, the legal process seems to have slowed down pending a possible compensation offer from governments. I hope this helps.

If you have any other questions or information to shed light on, please let me know. There are no guidelines because the lawyers make up their own. If this pressure is from class action and continues, we may have to call the lawyers and ask them what's going on.

Tim McClement

CLASS ACTION SUITS:

BRITISH COLUMBIA

Camp Church and Associates
Sharon Matthews / Kim Graham
4th Floor, Randall Building
Vancouver, B.C. V6B 1Z5
1-800-689-2322

Grant Kovacs Norell
Bruce Lemer
Grosvenor Building
930-1040 West Georgia Street
Vancouver, BC, V6E 4H1
Phone: (604) 609-6699 Fax: (604) 609-6688

Before August 1, 1986
Klein Lyons
David A Klein
805 West Broadway, Suite 500
Vancouver, B.C. V5Z 1K1
(604)874-7171
(604)874-7180 (FAX)
also:

Dempster, Dermody, Riley and Buntain
William Dermody
4 Hughson Street South, 2nd Floor
Hamilton, Ontario L8N 3Z1
(905) 572- 6688

The toll free number to get you in touch with the Hepatitis C Counsel is 1-(800)-229-LEAD (5323). It may not be working yet so please be patient.

TRACEBACK PROCEDURES:

This information is for anyone who has received blood transfusions in Canada, if they wish to find out if their donors were Hep C positive.

TRACEBACK INQUIRIES

Contact:
Dr. Lisa Jeppesen, Dr. P Doyle, or Glenda
The Canadian Red Cross Society
4750 Oak Street
Vancouver, BC, V6H 2N9
1-888-332-5663 (local 207)

