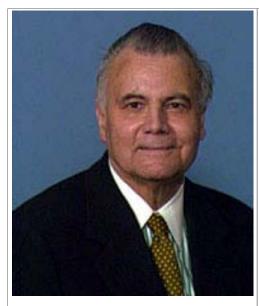
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Canada's Hepatitis C News Bulletin

www.hepcbc.ca



DINNER IN HONOUR OF DR. ANDERSON

A tribute dinner was held on November 18, 2004 at the Plaza 500 Hotel & Conference Centre in Vancouver, to honour Dr. Frank Anderson, one of British Columbia's principal hepatologists and researchers, and a real treasure to us, his patients.

Dr. Frank H. Anderson, a graduate of UBC, is now an associate Professor at that school, where he has been involved with teaching and research since 1970, following an internship at Vancouver General Hospital and residency training in both Medicine and Pathology. He received the R. Samuel McLaughlin Traveling Fellowship for study with Dame Professor Sheila Sherlock, at the University of London, England, and another Fellowship for study with Dr. Joseph Kirsner, at the University of Chicago. Dr. Anderson was the head of Gastroenterology at the Vancouver General Hospital for 15 years. As chairman of the Nutrition Committee, he helped establish the Chemical Dependency Resource Team at the Vancouver General Hospital, and the Provincial Home Enteral and Parenteral Feeding Program.

Dr. Anderson is renowned in our circles

for his research studies, mainly in the areas of Inflammatory Bowel Disease and in Liver Disease. He has a team of five research nurses and an ethics coordinator working with him. Dr. Anderson established what is now known as the Canadian Society of Intestinal Research. Dr. Anderson was President of the Alcohol and Drug Education Society for 10 years.

Dr. Anderson is internationally known for his abilities as a speaker and writer, and produces and distributes a physician newsletter entitled "The Hepatitis Knowledge Network" to about 1,000 physicians in British Columbia. Dr. Anderson is also working to increase the awareness, screening and treatment of hepatitis B in the Asian community.

One of his pet projects has been a comprehensive database for liver disease that has helped identify the demographics and distribution of Hepatitis C throughout the province and establish a standard of treatment for hepatitis C. He advocates and practices the team approach to care for patients with chronic liver and bowel disease.

Dr. Anderson's nurse, Natalie Rock, commented: "The feedback I have heard from so many people is that it was a really heartfelt evening on a very personal level. The stories shared about Dr. Anderson gave the audience an opportunity to see the man behind the Doctor. It was beautiful." sive medical treatment. The HCV community in BC has been in decline in recent years as evidenced by the loss of the majority of community HCV support groups. A strong grassroots movement can overcome barriers to optimum care and treatment through focused community action on com-

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Grassroots Rebuilding and Networking Project Road Report.

By Marjorie Harris

The Caravan of Hope was formed as a coalition of HepCBC, HepCURE and the Princeton Support Group, in support of May, Hepatitis C Awareness Month 2004. We met with the Hon. Colin Hansen, Minister of Health Services. A written dialog with the Minister has continued ever since. Twelve community advocacy letters focusing on common goals for care and treatment have been written since May 2004 and 75 letters from individuals to their MLAs were sent from the Hep C Council workshop Nov. 14th, 2004

In late Aug. 2004 the new Grassroots Rebuilding and Networking Project began. There are many challenges facing BC's 44,000 HCV+ people to obtain comprehensive medical treatment. The HCV community in BC has been in decline in recent years as evidenced by the loss of the majority of community HCV support groups. A strong grassroots movement can overcome barriers to optimum care and treatment through focused community action on common goals. The vision of the project was to rebuild grassroots and develop a network between consumers and health service providers to create an environment where this can happen.

The project has conducted a variety of events and workshops to promote and stimulate new growth in the hepatitis C community's grassroots; to increase the HCV knowledge and skills base; to network and encourage active consumer/volunteer involvement in achieving identifiable common community goals, such as timely care and treatment.

August 2004: The project kicked off with a letter supporting the quick approval of

(Continued on page 3)

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SUBMISSIONS: The deadline for any contributions to the hepc.bull® is the 15th of each month. Please contact the editors at info@hepcbc.ca, (250) 595-3892. The editors reserve the right to edit and cut articles in the interest of space.

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Newsletter Ads:

\$20 for business card size ad, per issue.

There will be a maximum of 4 ads in each issue, and the ads will be published if space allows. Payments will be refunded if the ad is not published. Ads are also posted to the Web.

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http://health.groups.yahoo.com/ group/hepcan/messages

HepCBC 306-620 View Street Victoria BC V8W 1J6

LETTERS TO THE EDITOR:

The *hepc.bull* welcomes and encourages letters to the editor. When writing to us, please let us know if you do not want your letter and/or name to appear in the bulletin.

NEW!!!!

Peppermint Patti's FAQ

Peppermint Patti's FAQ Version 6 is now available, and Version 5.6 is available in Spanish. The English version includes updated Canadian Links and includes the latest TREATMENT INFORMATION. Place your orders now. Over 100 pages of information for only \$6 each, plus postage. Contact HepCBC: (250) 595-3892, info@hepcbc.ca

HepCBC Resource CD: The CD contains back issues of the *hepc.bull* from 1997-2003; the FAQ V6; the slide presentations developed by Alan Franciscus; and all of HepCBC's pamphlets. The Resource CD costs \$10, including shipping and handling. Please send cheque or money order to the address on the subscription form on this page.

REPRINTS

Past articles are available at a low cost in hard copy and on CD ROM. For a list of articles and prices, write to HepCBC.

THANKS

epCBC would like to thank the following institutions and individuals for their generosity: The late John Crooks, The Ocean 98.5 for their Public Service Announcements, Durhane Wong-Rieger, Bryce Brogan, Bruce Lemer, Lexmark, Health Canada, Pacific Coast Net, Margison Bros Printers, Royal Bank, Schering Canada, Brad Kane, Chris Foster, Darlene Morrow, Will Lawson, Judith Fry, and the newsletter team: Jay P. and Diana L. Heartfelt thanks to Blackwell Science for a subscription renewal to gastrohep.com

Special thanks to Roche Canada for an unrestricted grant to help publish this newsletter!



CUPID'S CORNER

This column is a response to requests for a personal classified section in our news bulletin. Here is how it works:

To place an ad: Write it up! Max. 50 words. Deadline is the 15th of each month and the ad will run for two months. We'd like a \$10 donation, if you can afford it. Send cheques payable to HepCBC, and mail to HepCBC, Attn. Joan, #306-620 View Street, Victoria BC V8W 1J6, (250) 595-3892.

Give us your name, tel. no., and address.

To respond to an ad: Place your written response in a separate, sealed envelope with nothing on it but the number from the top left corner of the ad to which you are responding. Put that envelope inside a second one, along with your cheque for a donation of \$2, if you can afford it. Mail to the address above.

Disclaimer: The hepc.bull and/or HepCBC cannot be held responsible for any interaction between parties brought about by this column.

Want a mate? Your Cupid ad could go here!

Got Hep C? Single? Visit:

http://forums.delphiforums.com/HepCingles/ http://groups.yahoo.com/group/PS-Hep/ http://groups.yahoo.com/group/HepCingles2 http://groups.yahoo.com/group/ NewHepSingles/

CHAT: http://forums.delphiforums.com/ hepatitiscen1/chat

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HepCBC gives special thanks to Lexmark for printing out our Treatment pamphlets!

PRE-PLANNING YOUR FINAL ARRANGEMENTS?

Please consider arranging for donations to your local hepatitis C organization.

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(CARAVAN—Continued from page 1)

Common Drug Review in late Sept. 2004. We are still waiting.

NEWS FLASH!!

Darlene Arenson, Pharmacy Consultant, on Dec. 10th and she said that it is safe to report RBV could expect to receive a letter of con-Solven, within 60 days of today's date."

Coverage early in the new Pharmacare year would give the benefit of the maximum deductible limit for insurance plans. So far, Pegasys RBV has been given reimbursement approval in Ontario and Nova Scotia. It's been confirmed that it will be reimbursed in Alberta as of January 1. Decisions from Manitoba and Saskatchewan are expected any day now, and a listing in Ouebec is due for February.

The Schering Redipen is scheduled to get a green light by BC Pharmacare in the New Year. The Pegetron Redipen has provincial 500. The glaring gap is the need to develop a coverage in Ontario (effective Dec. 1st), Manitoba, and possibly Nova Scotia. All the rest are pending. The Redipen removes the need to manually mix the dry product with sterile water. It is equipped with an ultra fine working group was formed headed up by Dr. needle tip.

Sept. 12th Ottawa, ON: The Caravan of Hope penned a letter to the Federal Health Minister requesting that the Health Canada website be updated with the new care and treatment guidelines. The website was updated in less then 24 hours!

Oct. 6th Victoria, BC: The Caravan of Hope participated in the Hep C Council Regional Capacity Building Workshop and then in conjunction with community partners held a successful meeting at the BC legislature, meeting with seven members of the liberal Health Caucus committee on Health. Presenters on behalf of the Caravan were Dr. D. Petrunia, Ken Thomson, BC Hepatitis C Council; Arthur Ralfs, Pres. HepCBC; Marjorie Harris, Pres. HepCURE; Pauline Melanson and Jan Harder, nurse clinicians, North Island Liver Services; Joan King, Vice Pres., HepCBC; and other patient representatives.

Oct. 27th Kelowna, BC: The Caravan of Hope participated in a number of the BC Hep C Council Regional Capacity Building Workshops organized by Ken Thomson. The Kelowna meeting highlighted the need for more trained public health nurses to track Hep C positive people and help them to ac-

cess resources for care, treatment and pre-Pegasys RBV in BC after its release from the vention education. The Caravan presented advocacy letters covering current community goals.

Nov. 2nd Surrey: This Regional Capacity Building Workshop, held in the Fraser Health Authority, where they have 15,000+ I spoke with BC Pharmacare representative, infections and 10 correctional facilities, and where up to 40% of the inmates test positive for Hep C, focused on the need to develop a that "the manufacturer (Roche) of Pegasys | Hep C strategy that integrates services through the view of comprehensive health firmation of recommendations from the concept. The next step is to put together a Pharmacare Executive Director, Suzanne proposal for funding to develop such a strat-

Nov 5th Vancouver: A Regional Capacity Building Workshop was held in the Roundhouse. Members of the downtown eastside community attended, as well as service agencies. Prevention was a main topic and, since youth aged 14 to 25 have the fastest growing infection rate, a "youth poster campaign day" was suggested, using the slogan: "A Weekend of Partying could lead to a Lifetime of HCV."

Nov. 6th Vancouver: The Co-Infection Action Committee did a co-infection doctors' workshop in Vancouver at the Plaza Centre of Liver Disease which can coordinate a provincial hepatitis C strategy in conjunction with other liver diseases like hepatitis B, which need overlapping services. A Yoshida, to be organized by PWA.

Nov. 13-15th Victoria: The BC Hep C Council Workshop was a successful skills building and networking opportunity for both provincial and national contacts.

Nov. 18th Vancouver: The Canadian Liver Foundation had a appreciation dinner for Dr. Anderson. A silent auction, held amidst live jazz entertaining 220 dinner guests, raised \$41,000 dollars for charitable \ Dr. Erb: Hepatitis C & You programs.

Dec. 4th Victoria: Hep C 101: "Bringing Resources and Community Together": Dr. Denis Petrunia was our keynote speaker for the Caravan of Hope's first Hep C 101 workshop. Cool Aid Community Health Centre's hepatitis nurse Caite Meagher gave a Hep C client treatment walk-thru. Central Island Viral Hepatitis Service, Nanaimo Hep C support nurse Frances Falconer gave a snapshot of hepatitis service and its treatment successes. Robyn Loxton of BCCPD presented an overview of federal and provincial disability plans and the main keys for application success. The last speaker was Nicole Little, support group coordinator. The event drew 36 people. Thanks to the many volunteers who helped to make Hep C 101 a success in Vic-

HEALTHY HEPPER

The Alternative Treatment Hepatitis Website, previously objectivemedicine.com can now be found at www.healthyhepper.com

It still has the SAME GREAT FREE RESOURCES:

- * Hepatitis data base and search engine
- * Mailing list for updates, news, and changes to
- * Information on nutritional healing and specific supplements
- * Links to Hepatitis C Fact Sheets & FAQ Sheets
- * List of Potentially Harmful Substances
- * Letter From Naomi Judd (who successfully beat Hep C)
- * Interview with Lloyd Wright, author of Triumph Over Hepatitis C
- *E-book collection and free reports

And now you can also expect to find these **GREAT NEW IMPROVEMENTS:**

- * New streamlined design
- * Additional links to products useful to those with hepatitis C
- * Additional free report on general health
- * Access to Young Living's full line of all natural nutritional supplements, and toxin free personal care and cleaning products

Please visit the new site today! www.healthyhepper.com

Hep C 101

Saturday January 22nd 1pm - 5pm Surrey Memorial Hospital, Annex Building, Rooms 1 & 2, 13570 96th Ave.

> "Bringing Resources and Community Together"

Free Admission! Win Door Prizes! **Make Connections!**

- ◆ Current & Future Treatment Options
- ◆ Understanding Your Liver Enzymes
- ♦ Hepatitis C Nurse: Walk-Thru treatment patient perspective
- Nutrition for Hepatitis C
- ◆ Information & Community Resources
- How to apply for Temporary BC Disability Benefits
- ◆ Common Community Goals & Self Advo-
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HOW TO START AN HCV SUPPORT PROJECT: PART 3

Alan Franciscus, Editor-in-Chief HCV Advocate

groups serving the various needs of the HCV community. Try to decide beforehand what type of support group you envision—but a word to the wise: be prepared to change the group format based on the needs of the entire group.

Type of Support Group

There are many types of support groups, ranging from strictly informational to emotional support groups. In general, all meetings have an educational element and provide emotional support, but how you define and set up the group will set the tone for the type of group you envision. Keep in mind that some people are uncomfortable coming to a "support group" but feel very comfortable attending an informational meeting or a group that is not labeled as a support group.

Drop-in Support Meetings

Drop-in groups are very important for people who need to receive emotional support and education, especially in a time of crisis. People who attend these meetings may also attend the meeting to learn more about community resources, which may include information about other types of meetings and support groups.

Informational Meetings

Informational meetings are geared mainly towards people who want to learn more about hepatitis C in general or about a certain topic related to hepatitis C. This is the preferred format for people who want to educate themselves and connect with other hepatitis C individuals, but who may not feel comfortable talking about very personal issues with others. Even though the main focus is on education, there is an element of emotional support given, since there are others who attend the meetings with similar interests, fears and questions. In fact some informational meetings end with people talking in-depth to the expert speaker, facilitator or others about various issues which may include personal stories or feelings.

Emotional Support Group Meetings

Support groups that concentrate on emotional support explore almost every aspect of hepatitis C, and this type of environment helps people to really connect with others

living with disease. Since it is more personal the session. Examples of group rules will be in nature than an informational meeting, this support group format can also be more intense and may bring up many issues and feelings. This series is mostly focused on providing tools to people who wish to start emotional based support groups, but much of There are many different types of support the information can be applied to any type of u p p o r t g r o u p

> There are many important decisions that a potential support group leader needs to make before convening the first group meeting—finding a location, selecting a meeting format and other issues that, when planned well in advance, will help to make the support group successful.

Closed or Open Group

Structure is a very important part of the group dynamic. Some groups like having new members at each weekly meeting as long as there is a core group that they can rely on for support. It is important to remember that new members will most likely have issues that they think need to be addressed immediately. It is also important to realize that the new members might be exposed to more information than they are ready to handle emotionally. For example, if some members are dealing with issues about end-stage disease, a new member might become afraid and panicked. It's a fine line between the need to support current members and being sensitive to those recent members who may have been recently diagnosed, or others who are not educated about hepatitis C or ready for the emotions that may overwhelm a new member

It is a good idea to interview potential members before they start attending the group, including when the group is launched. During the conversation, you can assess whether the person would be a good fit. It is appropriate to be very honest during this process. It is not that you want to exclude someone from the group but there are reasons that some people might not be a good fit with the other members.

Examples:

- "Our support group is for members who are very sick. Are you able to handle this type of discussion and deal with the emotions that may surface?"
- "Our group is very clear that the mode of transmission is not discussed and that people are not discriminated against because of past or current behavior. Do you think you could | As expected, the length of the meeting time accept this?"

If for some reason this is not practical, a list of support group guidelines for all members should be discussed at the beginning of

discussed later in this series.

How Many Members?

Support groups come in all sizes! If there are two people at a meeting it can be a very powerful support group. The size of the group will depend on the type of group you want to start. An emotions-based support group that has many members may become too impersonal for this type of format. Conversely, an informational meeting may benefit by having more people attend since the members have attended to learn more about hepatitis C in general or about specific topics from a speaker rather than from other group members. The meeting space or room also dictates the amount of people that can attend a support group. In general very few emotions-based support group have to worry about too many people attending since most people live very busy lives that may prevent them from attending every meeting. If you add hepatitis C related fatigue to the equation, you will find that there will always be some members who can not attend every meeting. A good number of members is between six and fifteen. The general rule is that 10% of members will not show up for any number of reasons. If there are more than 10-15 members it may be difficult for every member to have time to talk about their issues. A group meeting that has eight members attend is the best for everyone getting his or her needs met. Even if every member does show up for one meeting, steps can be taken to make sure that everyone is served. There are always exceptions and a lot depends on the support group members' expectations, meeting space and goals of the support group.

How Often Should the Group Meet?

Generally, the nature of the support group will dictate how often it should meet. Monthly meetings work best for informational meetings. Support groups that are geared towards providing emotional support will work best if members meet every week or every other week. These types of groups can meet once monthly, but the close personal connection so important for these types of groups is difficult to maintain when people only see each other once a month.

How Much Time for Each Meeting?

can vary depending on the format of the group. In general, an hour is probably not long enough for everyone to get his or her emotional needs met. An hour and a half usually works best for most groups, but

(Continued on page 5)

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(SUPPORT—Continued from page 4)

some groups may need even more time. It is highly recommended that, if the group meets for longer than an hour, the members are given a short break halfway through the meeting to allow for a stretch or bathroom Annual Meeting of the American Associabreak. It is, however, important that the break(s) be kept short so that any issues brought up before the break can be resumed with little effort. The exception would be if you divided the support group into two parts – one part for information or education and one part for emotional support. A little longer break is helpful for this type of group Hep C. to help the group transition from one type of format to another.

It is very important to make sure that the length of time agreed upon by all of the members is strictly followed—always start and finish on time. People have very busy schedules, and if a support group starts late or ends late the attendance will suffer. Starting and stopping on time will also help send a message that everyone needs to show up on time out of respect for the other members. However, it is also wise to be prepared to extend the meeting time under certain situations where emotional issues have surfaced during the meeting that require additional time in order to provide support to a member. But the entire group should make the final decision as to whether to stay or leave. The leader or other members can always stay over to talk to a member who needs additional support.

What Time Frame - Ongoing or Limited?

As the name suggests, an ongoing support group can run for an indefinite period of time. A time limited support group is set up so that the support group members know the exact date when the group will begin and end. A group that ends at a specific date works well for people who may not want to commit to coming to a support group over an extended period of time. Time limited support groups can run for any period of time, but generally run for a period from a few weeks to several months. This is also an excellent format for people who want to see if they are suited to running a group and an opportunity to work out the "bugs" before making a commitment to start a permanent way for other group members to become more involved in the group. If the group members form personal attachments to the other group members, they may decide to meet informally or may even decide to "take over" the existing group or form another group. This allows for the current facilitator to take a well-deserved break before starting another group.

WARNINGS

CANNABIS AND FIBROSIS

A presentation made last Fall at the 55th tion of Liver Diseases showed that HCV + people who smoke marijuana daily have a rapid rate of liver scarring (fibrosis). The active ingredient in the herb binds CB1 and CB2 receptors, and CB1 receptors have increased scarring in the livers of mice, so experiments were done on 211 people with One group smoked daily for an average of 16 years. The second group smoked about once every 2 weeks, and the third group never smoked marijuana, 66% of group 1 progressed rapidly, compared to 40% of group 2, and 41% of group 3. Other factors increased progression rates: alcohol intake, older age at time of infection, and having genotype 3.

"Patients with ongoing chronic hepatitis C should be advised against daily cannabis use, since regular use over the span of the disease is an aggravating factor regarding fibrosis progression."

Another researcher commented that Hep C patients have many CB1 receptors in their livers, so that smoking marijuana is a cofactor, and not directly responsible for the fibrosis.

Source: Mark L. Fuerst, AASLD: Smoking Marijuana Raises Fibrosis Risk in Patients With Chronic Hepatitis C Infection Nov. 2, 2004 [Presentation title: "Daily Cannabis Smoking as a Risk Factor for Fibrosis Progression in Chronic Hepatitis C." Abstract 67]



ATTENTION: ARTISTS

We at HepCBC are looking for a new, or ongoing group. This is also an excellent | bold logo. We are prepared to offer \$100.00 for any logo that is used on our website or bulletin as a result of this contest. To enter, please send your logo design info@hepcbc.ca The deadline is extended to January 15, 2004.



INTERMUNE: EXPANDED RIGHTS

InterMune Inc. has been granted the exclusive right to use Array BioPharma's findings in small molecule drug research through March 31, 2005. Should InterMune change its research focus, Array would receive funding and future royalties under this new agreement. (Note: InterMune has initiated their phase II clinical trial of daily infergen plus actimmune for non-responders.)

Source: http://biz.yahoo.com/prnews/041207/ latu111 1.html Array BioPharma Inc., Array BioPharma Grants InterMune Expanded Rights Under Hepatitis C Discovery Agreement, December 7, 2004

GENOTYPES CAN CHANGE

There are 6 major genotypes of HCV, and until now, it was thought that those remain constant. It has been learned that HCV genotype can change over time in practicing IV drug users, according to studies done in Melbourne. Australia. Traditional calculations represent only a fraction of new infections when genotype change is added to infection rates. This new development suggests that HCV transmission rates among active drug users are much higher than had been previously believed.

Source: Aitken C, et al, Change in hepatitis C virus genotype in injecting drug users. J Med Virol. 2004 Dec; 74(4): 543-5

CELEBRATE SAFELY

Instead of alcohol, drink:

- Tonic with a twist of lemon or lime
- · Tomato juice with a dash of Tabasco and a slice of lemon
- Club soda or seltzer on the rocks with an olive
- Cola with lemon or lime
- Hot chocolate topped with whipped cream
- Hot apple cider with a cinnamon stick
- · Carbonated water with grenadine and a wedge of lemon, lime, or orange
- A "virgin" version of any favorite mixed drink, such as a non-alcoholic piña colada

(Caution: non-alcoholic beers and wines are usually prohibited for those in addiction recovery or organ transplant programs)

Drink from nice glassware. Sparkling water from a wine glass adds a touch of elegance.

Source: HealthWise: Holidays, Alcohol, and HCV by Lucinda K. Porter, RN, CCRC

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PROMISING ALTERNATIVES

Current treatment for HCV infection is expensive, often ineffective, and fraught with unpleasant and even dangerous side effects. What can a patient do to improve chances of responding to treatment, or even when conventional treatment doesn't work? This study found 27 randomized clinical trials which involved herbs and supplements, of which 14 were used in combination with IFN-alpha. The researchers found only 11 of the 27 trials to be of good quality. Good results were seen in the trials with vitamin E, thymic extract, zinc, traditional Chinese medicine, Glycyrrhiza glabra and oxymatrine. More research is needed in these and other possibly promising therapies.

Source: Coon J. T., Ernst E. J Hepatol 2004; 40 (3): 491-500, Complementary and alternative therapies in the treatment of chronic hepatitis C: a systematic review

URL:http://www.gastrohep.com

GEMS FROM AASLD 2004

Experimental HCV Drugs

Ribavirin and **viramidine** (a similar drug) were compared. Viramidine at 600 mg/twice daily had the better safety profile with comparable efficacy.

Albuferon, a modified interferon fused with albumin, was found to have mild side effects and may need less frequent dosing than the current pegylated IFNs.

Idenix's **NM 283**, a polymerase inhibitor, plus pegylated interferon was used in a phase II trial with 12 genotype 1 HCV patients, which resulted in a 99.8% drop in viral load in 28 days, with mild side effects.

Adverse Events

Report hearing loss, now a documented side effect in a small number of IFN-treated patients, and any other adverse event to the FDA at https://www.accessdata.fda.gov/scripts/medwatch/ or call 1-888-463-6332.

Non-Invasive Liver Markers

A new test, FibroScan©, which compares liver stiffness to clinical, biological, morphological and histological parameters, looks promising.

Exercise, Fatigue and Sleep

Fatigue caused by HCV can be helped by exercise such as walking. Sleep disturbances and fatigue were common in all patients with hepatitis C in one study, not just those with cirrhosis.

Source: www.hcvadvocate.org



RCMP Blood Task Force Project Oleander

345 Harry Walker Parkway S. Newmarket ON L3Y 8P6

To whom it may concern,

2004-11-08

RCMP Blood Task Force - Toronto North

The RCMP Blood Task Force would like to update you on the court appearances for those who were charged with criminal offences relating to the Canadian blood system.

The legal counsel for the Canadian Red Cross and Dr. Roger Perrault appeared in Hamilton Superior Court on October 15th, 2004. Counsel for Dr. Roger Perrault were advised to file materials in support of an application before the Superior Court prior to the next court date. This matter is scheduled to return to the Superior Court at 10:00 a.m. on November 19th, 2004. The Superior Court in the City of Hamilton is located at 45 Main Street East, Hamilton, Ontario.

On June 28th and 29th, 2004 the legal counsel for Dr. Roger Perrault, Dr. John Furesz, Dr. Wark Boucher, Armour Pharmaceutical Company, and Dr. Michael Rodell appeared in the Superior Court in Toronto for a change of venue application. The application was denied. On June 30th, 2004, the parties attended the Superior Court in Toronto for a Judicial Pretrial. A trial date was set to begin November 18, 2005. The Superior Court in the City of Toronto is located at 361 University Avenue, Toronto, Ontario.

The toll free line and the web site are still available for those who wish to contact the Blood Task Force.

1-888-530-1111

www.rcmp-grc.bc.ca/html/ bloodtaskforce_e.htm (English) www.rcmp-grc.bc.ca/html/ bloodtaskforce_f.htm (French)

Sincerely,

D.O. Hvidston, Cst BTF Liaison Officer

B.W. Fair, Insp. OIC RCMP Blood Task Force

I'VE BEEN DIAGNOSED. NOW WHAT?

If you're diagnosed with hepatitis C, get informed. Check with your local support group (See page 8)

Make sure that you:

- Get re-tested to confirm the diagnosis
- Get vaccinated against hepatitis A and B, and get tested to see if the vaccinations took.
- Ask about the pneumonia and flu vaccines
- Get sent to a specialist
- Get copies of all tests

The specialist should:

- Order an ultrasound yearly, if your family doctor didn't
- Order an alphafetoprotein test yearly
- Order a liver biopsy. (This is usually done by needle aspiration, but there are other options if there is a bleeding problem, for example)
- Discuss treatment options with you (Get a second or even a third opinion if you don't agree)

THANKS, LIFESTYLES!

On behalf of HepCBC's board and members, I would like to sincerely thank Carmine and Steve of the Douglas Street Lifestyles Market. The 50%-off donation of food they provided for our "Hep C 101" Awareness Day allowed us to provide healthful and great-tasting refreshments for those who attended, which assisted us in letting people know how important healthful eating is and how it can still taste great! So, again, thank you to Lifestyles Market (Carmine & Steve) for helping us with the education about this very important issue!

Sincerely, Karen Dennis HepCBC Executive Director

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VOLUNTEER APPLICATION FORM

NAME: _				
ADDRESS	5 :			
CITY:				
	PROV:			
)			
FAX: ()	-		
EMAIL:				
ABILITIES OR AREA OF INTEREST:				
Web	site Printing	Copying		

Website Printing Copying
Phoning Fundraising
Counseling Research
Refreshments Special Events
Publications Computer Help
Errands Grant Applications
Board Member Other

Experience:

Time available:

Date of Birth:

SEX M F

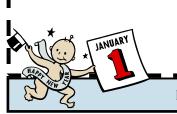
Ma Bau

Mo Day Year Contact: HepCBC

#5-915 Glen Vale Rd Victoria BC V9A 6N1

Tel. 595-3892 or Email: info@hepcbc.ca





CARE-LINE

A limited patient assistance program, called CARE-Line, is available in Canada for some people receiving Pegetron. Patients can call 1-800-603-2754 extension 2121 to find out if they are eligible for help from this program. Health care providers who wish to make inquiries about their patients access to CARE-Line may call 1-800-463-4636 extension 346.

Source: http://www.hepcyorkregion.org/docs/352.1.Slide I

HEPCBC INFO SESSIONS

epCBC in Victoria, BC, is offering moderated 8-session pilot groups for those who are infected with hepatitis C. Please sign up, leaving your name and phone number at 250-595-3892, or email info@hepcbc.ca. Space will be limited.

I WANT TO WATCH!

Whence comes time, In clear cold of night. To cross this thin void, Of tomorrow, and light!

Hold fast, this black Dragon! Aye, hard unto my soul. Pray, grant me the might!

Whence comes the time, With ne'er sorrow, nor fright To cross this thin void, Of grace, and love's sight!

Guard safe, this black Dragon! Clenched tight, in mine gut. Pray, grant me the right!

Whence comes the time, Pace swift, steady, and light.

To cross this thin void Of hope, and charity's quiet might!

Carry through, this sad Dragon Oe'r, to the far sight. Pray there and he'll burn BRIGHT!

Del G.G. 02 /Oct/2003 Courtenay, B.C.

ATTENTION: ARTISTS

We at HepCBC are still looking for a new, bold logo. We are prepared to offer \$100.00 for any logo that is used on our website or bulletin as a result of this contest. To enter, please send your logo design to info@hepcbc.ca The deadline has been moved to January 15, 2005.



COMPENSATION

LEGALACTION

Hepatitis C Class Action Suit Line: 1-800-229-LEAD (5323)

1986-1990

Bruce Lemer/Grant Kovacs Norell Vancouver, BC

Phone: 1-604-609-6699 Fax: 1-604-609-6688

Pre-86/Post-90

Hepatitis C Settlement Fund—KPMG Inc. Claims Administrator

2000 McGill College Avenue, Suite 1900

Montreal (Quebec) H3A 3H8

1-888-840-5764 (1-888-840-kpmg)

HepatitisC@kpmg.ca

http://www.kpmg.ca/en/ms/hepatitisc/forms.html

Klein Lyons

Vancouver, BC 1-604-874-7171, 1-800-468-4466, Fax 1-604-874-7180

 $\underline{www.kleinlyons.com/hepc/intro.html}$

David Harvey Toronto, ON

Phone 416-362-1989; Fax 416-362-6204

Lauzon Belanger S.E.N.C. (Quebec) www.lauzonbelanger.qc.ca.

Goodman and Carr LLP pre86hepc@goodmancarr.com www.goodmancarr.com

Kolthammer Batchelor & Laidlaw LLP #208, 11062 – 156 Street, Edmonton, AB T5P-4M8 Tel: 780.489.5003 Fax: 780.486.2107 kkoltham@telusplanet.net

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William Dermody/Dempster, Dermody, Riley & Buntain Hamilton, ON L8N 3Z1 1-905-572-6688

LOOKBACK/TRACEBACK

The Canadian Blood Services, Vancouver, BC 1-888-332-5663 (local 207)

Lookback Programs, Canada: 1-800-668-2866 **Lookback Programs, BC:** 1-888-770-4800

Canadian Blood Services Lookback/Traceback & Info Line: 1-888-462-4056

Hema-Quebec Lookback/Traceback & Info Line: 1-888-666-4362

Manitoba Traceback: 1-866-357-0196

RCMP Blood Probe Task Force TIPS Hotline 1-888-530-1111 or 1-905-953-7388

Mon-Fri 7 AM-10 PM EST

345 Harry Walker Parkway, South Newmarket, ON L3Y 8P6 Fax: 1-905-953-7747

CLASS ACTION/COMPENSATION

National Compensation Hotline: 1-888-726-2656 Health Canada Compensation Line: 1-888-780-1111 Red Cross Compensation pre-86/ post-90 Registration: 1-888-840-5764

Ontario Compensation: 1-877-222-4977

Toronto Compensation: 1-416-327-0539, 1-877-434-0944

Quebec Red Cross Compensation: 1-888-840-5764 **1986-1990** Hepatitis C Class Actions Settlement 6/15/99 www.hepc8690.ca/

ADMINISTRATOR

To receive a compensation claims form package, please call the Administrator at 1-877- 434-0944. www.hepc8690.com info@hepc8690.com http://www.hepc8690.ca/PDFs/initialClaims/tran5-e.pdf

MISCELLANEOUS

Excellent Website!!: HCV Tainted Blood, Canada: http://creativeintensity.com/smking/tainted.htm

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COMING UP IN BC/YUKON:

Armstrong Hepatitis C United Resource Exchange Contact: 1-888-HepCURE amberose@sunwave.net www.hepcure.ca

AIDS Vancouver Island Hep C support in Courtenay, Campbell River and Pt Hardy. Contact Jeanette/Leanne: 0787, leanne.cunningham@avi.org

Castlegar Contact Robin 365-6137

Comox Valley AVI Hep C Community Support Mon.-Thurs. drop-in support 9-4 PM. 355 6th St. Courtenay Contact 338-7400 Del: dggrimstad@shaw.ca

Cowichan Valley Hepatitis C Support Contact Leah 748-3432

Cranbrook HeCSC-EK Support Group Monthly meetings. Contact Katerina 417-2010, hecsc-ek@shaw.ca Leslie 426-6078, ldlong@shaw.ca

Kamloops AIDS Society of Kamloops (ASK) 372-7585 for support or referral. ask@telus.net

Kelowna Hepkop: Last Sat. monthly, 1-3 PM, Rose Ave. Meeting Room, Kelowna General Hospital. Contact Elaine 768-3573, erise-ley@shaw.ca or Lisa 766-5132 Imortell@silk.net or 1-866-766-5132.

Kootenay Boundary: Individual support & info Contact Brian Reinhard 364-1112 reiny57@yahoo.ca

Mid Island Hepatitis C Society 2nd Thurs. monthly, 7 PM, Central Vancouver Island Health Centre 1665 Grant St. Nanaimo. Contact Sue 245-7635, mihepc@shaw.ca

Nakusp Support Group Meetings: 3rd Tues. monthly, 7 PM, Nakusp Hospital Boardroom. Contact Vivian 265-0073

Nelson Hepatitis C Support Group 1st Thurs. monthly. ANKORS Offices, 101 Baker St. Contact Alex 1-800-421-2437, 505-5506, info@ankors.bc.ca www.ankors.bc.ca/

Boundary Hep C Support. Contact Ken 250-442-1280 ksthomson@direct.ca

Mt Waddington Harm Reduction Each Tues. 10-12 8635 Granville, Pt. Hardy. Contact Dan 250-902-2238 mtwreduc@hotmail.com

New Westminster Support Group 2nd Mon. monthly, 7-8:30 PM, First Nations Urban Community Society, 623 Agnes Street, New Westminster. Contact Dianne Morrissettie, 604-517-6120 dmorrissettie@excite.com

Powell River Hep C Support Group Next meeting: Contact the Health Unit 485-8850

Prince George Hep C Support Group 2nd Tues. monthly, 7-9 PM, Prince George Regional Hospital, Rm. 107. Contact Gina 963-9756, gina1444@yahoo.ca or Ilse 565-7387 ilse.kuepper@northernhealth.ca

Prince Rupert Hepatitis C Support Contact Ted 624-7480

Ted.Rogers@northernhealth.ca

Princeton 2nd Sat. monthly, 2 PM, Health Unit, 47 Harold St. Contact Brad 295-6510, kane@nethop.net

Queen Charlotte Islands/Haida Gwaii: Phone Contact Wendy 557-2487. support. wmm@island.net, www.island.net/~wmm/ http://health.groups.yahoo.com/group/ CANhepc/

Salmo Hep C Support Group 2nd Wed. monthly 6 PM, 926 Davies. Contact Giselle Rogers 357-9511, Alex 304-3448 alex@ankors.bc.ca

Slocan Valley Support Group Contact Ken 355-2732, keen@netidea.com

Smithers: Positive Living North West 2nd Wed. monthly, 12 noon, 3862 Broadway (behind Panago). Contact Deb 877-0042 or Doreen 847-2132, deb@plnw.org

Sunshine Coast-Sechelt Healthy Livers Support Group 2nd Monday monthly, 6:30 PM, Sechelt Health Unit, 5571 Inlet. Contact Brent or Bill 604-740-9042 brent.fitzsimmons@cgh.bc.ca

Pender Harbour Hep C Support & Info Contact Myrtle Winchester 604-883-9911 or 604-883-0010, waterspider@telus.net

Vancouver: Healing Our Spirit—HCV and HIV education, support for Aboriginal People in BC. 100 - 2425 Quebec 1-800 336-9726, Contact info@healingourspirit.org www.healingourspirit.org

VANDU Vancouver Area Network of Drug Users: H.A.R.M. Each Mon., 10 AM, 50 East Hasting St. Bus fare & snack. Contact 604-683-8595 (ask for VANDU) Space limited. Satelite Hep-C group, each Mon. 2 PM, HCC, 166 E. Hastings, 604-658-1224. vandu@vandu.org www.vandu.org

Vancouver: Pre/post liver transplant support Contact Gordon Kerr sd.gk@shaw.ca

Vancouver Hepatitis C Support Group Meetings: 3rd Tues monthly, 7-9 PM, Lauener Room JPP 2809, Sassafras Cafeteria, Jim Pattison Pavilion, South Level 2, Vancouver General Hospital, and 1st Tues monthly, 5-8 PM, Java Express, 3420 Cambie St. Contact Robert, CLF: 1-800-856-7266

YouthCO AIDS Society HepCATS #205-1104 Hornby St., Vancouver. For info, contact Caitlin Padgett caitlinp@youthco.org For support, contact Matt Lovick 604-688-1441 or 1-877-YOUTHCO www.youthco.org Brandy Svendson brandys@youthco.org

Vernon HeCSC HEPLIFE 2nd & 4th Wed. monthly, 10 AM-1 PM, The People Place, 3402-27th Ave.. Contact Sharon 542-3092, sggrant@telus.net http://www.hepc.vernon.bc.ca/

Victoria Support & Info Contact the Needle Exchange 384-2366

Victoria HepCBC Support group and Info Contact 595-3892 info@hepcbc.ca, www.hepcbc.ca Library open M-F 306-620 View St. Phone support or private interviews.

Works Without Words Yukon Hep C Support Group Every Thurs. at 7 PM., Grace Community Church, 8th & Wheeler St. Contacts: Harry & Debbie 867-667-2402 harry.mckenzie@klondiker.com. Brian: 867-668-4483 P.O Box 31216, Whitehorse, YK.

OTHER PROVINCES:

ONTARIO:

Barrie Hepatitis Support Contact: Jeanie for information/appointment 705-735-8153 hepcsupportbarrie@rogers.com

Durham Hepatitis C Support Group 2nd Thurs. monthly, 7- 9 PM, St. Mark's United Church, 201 Centre St. South, Whitby. Contacts: Smilin' Sandi smking@rogers.com Sandi's Crusade Against Hepatitis C http://creativeintensity.com/smking/ http://health.groups.yahoo.com/group. hepc-info/ 1-800-841-2729 ext. 2919

Kingston Hep C Support Group 1st Wed. monthly, 5:30 - 9 PM St. George's Cathedral, King and Johnson St. (Wellington St. entrance) Contact: HIV/AIDS Regional Service 613-545-3698

Unified Networkers of Drug Users Nationally undun@sympatico.ca

Kitchener Area Chapter 3rd Wed. monthly, 7:30 PM, Cape Breton Club, 124 Sydney St. S., Kitchener. Contact: Bob

bc.cats-sens@rogers.com

Niagara Falls Hep C Support Group Last Thurs. monthly, 7 PM excluding July and Dec., Niagara Regional Municipal Environmental Bldg., 2201 St. David's Road, Thorold. Contact Rhonda (905) 295-4260, hepcnf@becon.org

North Bay HCV Support Group 2nd Monday monthly 7 PM,269 Main St. West, Suite 201, North Bay. Contact: Gabe Giroux, Hep C Education and Support Coordinator 705-497-3560 ggiroux@vianet.ca

Peel Region Hep C Support Group Third Mon. monthly, 11AM-1PM Mississauga Office, 3038 Hurontario St. (Classroom C) Contact (905) 799-7700

healthlinepeel@peelregion.ca

St. Catharines Contact Joe (905) 682-6194 jcolangelo3@cogeco.ca

Hepatitis C Network of Windsor & Essex County Contact Andrea 250-5399 or Michelle 256-1878, hepcnetwork@mailcan.com http://hepcnetwork.cjb.net

York Chapter HeCSC 3rd Wed. monthly, 7:30 PM, York Region Health Services, 4261 Hwy 7 East, B6-9, Unionville. Contact 940-1333, 1-800-461-2135. info@hepcyorkregion.org www.hepcyorkregion.org

Victoria and Area S.O.L.I.D. Society of Living Intravenous Drug Users

Consumers Support Group Wednesdays (except welfare week)
7-9 PM

1947 Cook St, Health Unit (Cook and Pembroke) Past and Current IDU's welcome, support, info, & referrals Contact: momma@ven.bc.ca

OUEBEC:

Arundel Contact Andy Aitken chcn.alexander@sympatico.ca Canadian Hepatitis C Network http://www.canhepc.net/

Quebec City Region Contact Renée Daurio 418-836-2467

reneedaurio@hotmail.com

ATLANTIC PROVINCES:

Fredericton, NB Contact: Bob. 453-1340

Saint John & Area: Information and Support. Contact Allan Kerr kerrs@nbnet.nb.ca

Cape Breton Island, N.S. The Hepatitis Outreach Society Support Group 2nd Tues. monthly 150 Bentinck Street, Sydney, N.S. 7-9 PM. Call Cindy Coles 1-800-521-0572, (902) 539-2871 FAX (902) 539-2657 hoscb@ns.aliantzinc.ca

PRAIRIE PROVINCES:

HeCSC Edmonton Contact Jackie Neufeld 939-3379.

Hep C Edmonton HCV, pre/post liver transplant support Contact Fox 473-7600, or cell 690-4076, fox@kihewcarvings.com

Fort McMurray, Alberta Hepatitis C Support Network—Info and support. #205, 10012A Franklin Ave. Contact Lyn, (780) 743-9200 Fax (780) 943-9254 wbhas@telus.net

Medicine Hat, AB Hep C Support Group 1st & 3rd Wed monthly, 6:30 PM, HIV/AIDS Network of S.E. AB Association, 550 Allowance Ave. Contact (403) 527-7099 bettvc2@hivnetwork.ca

The Life with Hepatitis Society of Central Alberta Support group meets each Wed. 7 PM Turning Point Agencies 4611-50th Ave., Red Deer. Contact: Chris (403) 341-6026 crthomas@shaw.ca

Winnipeg Hepatitis C Resource Centre 1st Tues. monthly 7-9 PM. # 204-825 Sherbrook St. (south entrance—parking at rear) Contact 975-3279, hcrc@smd.mb.ca

If you have a Canadian HCV support group to list on this page, please send the name of the group, day, time, place, contact name/phone, and email address to info@hepcbc.ca Please inform us of any changes by the 15th of the month —Joan King

BE PART OF THE TEAM!

We need people to summarize articles. HepCBC needs office staff and 6 people to help with our website. The HepCAN list needs a moderator trainee. Please contact Joan at 250-595-3892 or info@hepcbc.ca

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