

Canada's Hepatitis C News Bulletin

www.hepcbc.ca

NEWS

NATALIE COLE GETS KIDNEY

On May 20, 2009, 59-year-old Natalie Cole, one of our celebrity co-sufferers of Hep C, received a kidney transplant in Los Angeles. The kidney did not come from her sister, as previously planned, but from a deceased donor. Ms. Cole was receiving dialysis even while touring. She has a new album, "Still Unforgettable". Her summer tour will be rescheduled. Natalie Cole has nine Grammys to her name.

Source:

http://uk.reuters.com/article/entertainmentNews/idUKTRE54J71G20090520

"CURED" BUT CONTAGIOUS

Some researchers at Memorial University, Newfoundland, in a study just published in the May 2009 issue of *Hepatology*, found that even though patients achieve an SVR (Sustained Viral Response) to treatment—no detectable virus in their blood, more sensitive tests are finding that some of them still have tiny amounts of virus. No one knows if they are still contagious.

The researchers used a system to allow the spread of HCV in human T cells outside the body (in vitro). They studied 9 patients with SVR and detected HCV only with the very sensitive tests. Then they prepared 12 cultures of lymphoid cells from healthy volunteers and exposed them to plasma of circulating lymphoid cells from the HCV SVR patients. 11 of the cultures became HCV+. Virus from 3 of the 9 SVR patients was able to set up active replication in cultures from the healthy donors.

The researchers reported, "These findings provide in vitro evidence that trace quantities of HCV persisting in the circulation for a long time after therapeutically induced resolution of CHC can remain infectious." The good news is that the replication of HCV in the T cells was neutralized with IFN treatment.

(Continued on page 3)

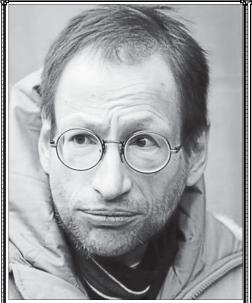


Photo: Globe & Mail

JAMES KREPPNER March 6, 1962-May 14, 2009

James Kreppner, like many of our community, was too young to die. While we have suffered a great loss with his passing, our cause has been greatly enriched by his support and advocacy. CBS (Canadian Blood Services) lowered its flags to half-mast all across Canada out of respect.

"He constantly reminded us of why this

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[the blood tragedy] should never happen again," said Verna Skanes, the board chair of CBS, "He was our conscience."

James, born in the Toronto area, was a hemophiliac, and as such, was one of about 2,200 infected with AIDS and/or Hep C in Canada in the '80s. Half had died by the time he was diagnosed around 1985. James was studying to become a lawyer when he found out he was infected, but he completed his degree anyway. He recovered from AIDS-related pneumonia in 1991, and proceeded to dedicate his legal knowledge to helping those affected by the Canadian blood scandal. He took part in the Krever Commission inquiry. His work became not just a profession but a vocation, a calling. Still fighting off near-death three times in the 1990s, he continued to fight for treatment opportunities for all those suffering from HIV and/or HCV, no matter how they were infected. His wife recounted, "One doctor once said to James, 'For a lawyer, you make a really good doctor." [Editor: I remember James taking part in a panel discussion with the Canadian Treatment Action Council, and how proud I was that one of ours was so well informed.]

Dignified. Dedicated. Professional. Passionate. Eloquent. Graceful. Courageous. Those are words his co-workers and co-sufferers have used to describe him. They remarked how he never brought up his own disease unless encouraged, and never complained. His proud presence was enough to make his point.

His is also a love story. He invited Antonia (Smudge) Swann to his high school senior prom. They both enrolled in York University. When she was seriously injured in a car accident, he offered to share his apartment so she wouldn't have to commute, and slept on the floor so she could use his bed. Their friendship turned into a life-long, loving and supportive

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HepCBC #306-620 View Street Victoria BC V8W 1J6

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■ "I cannot afford to subscribe at this time, but I

☐"I want to join a support group. Please call."

(Note: The hepc.bull is mailed with no reference to hepatitis on the envelope.)

You may also subscribe on line via PayPal at www.hepcbc.ca/orderform.htm

SUBMISSIONS: The deadline for any contributions to the hepc.bull® is the 15th of each month. Please contact the editors at jking2005@shaw.ca, (250) 595-3892. The editors reserve the right to edit and cut articles in the interest of space.

ADVERTISING: The deadline for placing advertisements in the hepc.bull is the 12th of each month. Rates are as follows:

Newsletter Ads: Maximum 4 per issue, if space allows. \$20 for business card size ad, per issue. Payments will be refunded if the ad is not published.

HOW TO REACH US:

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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.

FAQ version 8.1

Peppermint Patti's <u>FAQ Version 8.1</u> is <u>NOW AVAILABLE</u>, Version 8 is available in FRENCH and Version 7.1 is available in SPANISH. The ENGLISH version includes the latest treatment information and research from 2008. Place your orders now. Over 140 pages of information for only \$12 each. Contact HepCBC at (250) 595-3892 or info@hepcbc.ca

HepCBC Resource CD

The CD contains back issues of the *hepc.bull* from 1997-2007; the FAQ V8; the slide presentations developed by Alan Franciscus; and all of HepCBC's pamphlets. The Resource CD costs \$10, including S&H. Please send cheque or money order to the address on the subscription/order form on this page.

DISCLAIMER: The hepc.bull® cannot endorse any physician, product or treatment. Any guests invited to our groups to speak, do so to add to our information only. What they say should not necessarily be considered medical advice, unless they are medical doctors. The information you receive may help you make an informed decision. Please consult with your health practitioner before considering any therapy or therapy protocol. The opinions expressed in this newsletter are not necessarily those of the editors, of HepCBC or of any other group.

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!!

HepCBC thanks the following institutions and individuals for their generosity: The late John Crooks, A-Channel News, The Ocean, JackFM, Health Canada, Community Living Victoria, Provincial Employees Community Services Fund, Dr. C. D. Mazoff, Lorie FitzGerald, Michael Yoder, Chris Foster, Judith Fry, Ernie, Bruce Lemer, United Way, and the newsletter team: Beverly A., Diana Ludgate, Alp, Judy K.

Please patronize the following businesses that have helped us: Top Shelf Bookkeeping, Thrifty Foods, Samuel's Restaurant, Margison Bros. Printers, Roche Canada, VanCity, Schering Canada, Shoppers Drug Mart, and the Victoria Conservatory. Heartfelt thanks to Blackwell Science for a subscription renewal to gastrohep.com.

Special thanks to Thrifty Foods for putting our donation tins at their tills in these stores: Greater Victoria: Quadra, Cloverdale, Hillside Mall, Tuscany, Broadmead, Fairfield, James Bay, Admirals Walk, Colwood, Central Saanich, and Sidney. Lower Mainland: Tsawwassen, Coquitlam, Port Moody. Also: Salt Spring and Mill Bay

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 a cheque 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. number, 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.

Got Hep C? Single? Visit:

http://groups.yahoo.com/group/ HepCingles2 http://groups.yahoo.com/group/ NewHepSingles/ www.hcvanonymous.com/singles.html www.hepc-match.com/ www.hepcsinglesonline.com/

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

HEP C WORKSHOPS

HEP DART 2009: Frontiers in Viral Hepatitis



December 6-10, 2009 Kohala Coast Big Island, Hawaii http://hepdart.com

DIAL-A-DIETITIAN

604-732-9191 or 1-800-667-3438 www.dialadietitian.org

Dietitians of Canada: www.dietitians.ca

MEET NEW FRIENDS!

We need people to summarize articles. HepCBC needs telephone buddies, a librarian, people to help translate the FAQ into Spanish and 2 people to help with our website. Please contact us at 250-595-3892 or info@hepcbc.ca

PRE-PLANNING YOUR FINAL ARRANGEMENTS?

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

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LIFESTYLE FACTORS

INTESTINAL BACTERIA

A new study found that NASH (nonalcoholic steatohepatitis) or fatty liver is associated with a leaky gut and overgrowth of bacteria. Some experts have wondered if bacteria leaking from the intestines could worsen liver disease. These researchers compared the leakage (permeability) of the intestines in 35 patients with fatty liver to 27 patients with celiac disease who hadn't received treatment, and to 24 healthy subjects. They measured the levels of bacteria using glucose breath testing, and checked the amount of leakage in the intestines by urine tests and biopsies of the duodenum. They found that leakage and bacteria overgrowth are worse in patients with fatty liver, probably due to the "disruption of tight junction integrity." They formed a theory that the leakage and bacterial overgrowth may actually cause fatty liver, and found that probiotics can improve fatty liver in mice. Also, antibiotics and prebiotics might be helpful.

Source: Miele, Luca, et al, "Increased Intestinal Permeability and Tight Junction Alterations in Non-Alcoholic Fatty Liver Disease (NAFLD). Hepatology; June 2009.

AVOIDING LIVER CANCER

Researchers compared two strains of mice. One strain was prone to cancer and the other wasn't. Males of both groups were fed either high or low-fat diets for 500 days. The mice prone to cancer developed NASH (fatty liver) and HCC (hepatocellular carcinoma or liver cancer) if fed a high-fat diet, but those not prone to cancer did not develop NASH or HCC. Interestingly, even the mice prone to cancer, when fed a high-fat diet, but switched to a low-fat diet early in the trial, avoided liver cancer. All of the cancer-prone mice who received a high-fat diet had liver tumours at the end of the trial.

www.firstscience.com/home/news/ breaking-news-all-topics/low-fat-diet-helpsgenetically-predisposed-animals-avoid-livercancer-page-2-1 65400.html June 9, 2009

WHAT ABOUT SMOKING?

Liver disease takes a predictable course, starting with the formation of fibrosis (scarring). Then the structure of the liver becomes distorted, leading to cirrhosis. Some Italian researchers wanted to know why hepatitis C gets worse, and took a look at the effect of nicotine on the liver. There were previous reports about smokers and fibrosis that worsened with daily use of tobacco, but they were controversial.

Nicotine is processed primarily in the liver, and experiments in animals have shown fatty liver and liver necrosis (cell death) that seems linked to lipid peroxidation (where free radicals "steal" electrons from the lipids or fats). Studies in Hep C+ patients show that smoking results in a lack of oxygen, causing a problem with the growth of the thin layer of cells lining the inside of the blood vessels. The authors conclude, "Since this issue is controversial and smoking is in any case unsafe, stopping is recommended for patients with liver diseases."

Source: www.ncbi.nlm.nih.gov/ pubmed/19305373? ordinalpos=154&itool=EntrezSystem2.PEntrez.P ubmed.Pubmed_ResultsPanel.Pubmed_DefaultRe portPanel.Pubmed_RVDocSum

POLLUTION AND LIVER DISEASE

Some US researchers believe that pollution may be causing the increase in liver disease in the population there. The researchers used data from 2003-2005 to find adults with pollutants in their blood or urine. The subjects were tested for 196 different pollutants. An incredible 37.6% of the subjects had high ALT levels, even though those with Hep B and C, those who have abused alcohol, and those with iron overload were not counted. The results indicated that about 70 million adults in the US have liver problems not caused by the expected risk factors. Most are due to NASH (fatty liver). The researchers could blame some of the problem on pollutants like pesticides (some that were banned decades ago) and heavy metals.

High levels of heavy metals and pesticides were associated with higher ALT. Subjects with the highest levels of mercury had double the risk of an elevated ALT. Two pesticides banned in the U.S. since the 1970s and 1980s, dieldrin and heptachlor epoxide, were also associated with more risk of liver disease. Most people are exposed to pollutants through food. Once in the body, they are not well metabolized. The pesticides are notorious for accumulating in fat tissue, so those who are overweight may have higher levels of pollutants in their bodies.

www.medpagetoday.com/ MeetingCoverage/DDW/14428 DDW 2009; Abstract 289. May 29, 2009

METABOLIC SYNDROME

We with Hep C are at a greater risk of dying from the disease if we have a problem

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NOW ENROLLING **HEAT Study (HCC)**

HEAT Study Hepatocellular Carcinoma of RFA and ThermoDox®

Now Enrolling Recently Diagnosed Hepatocellular Carcinoma (HCC) Patients in Clinical Trials

Celsion Corporation is an oncology drug development company which develops targeted chemotherapeutic treatments based on a unique heat-activated liposomal technology. Celsion is currently enrolling patients in a global Phase III clinical trial the HEAT Study-which is designed to demonstrate the safety and efficacy of Thermo-Dox® in hepatocellular carcinoma (HCC) patients.

The HEAT study involves an investigational anti-cancer drug, called Thermo-Dox®, used in combination with an approved medical device for radiofrequency ablation (RFA) in the liver.

The study will be the largest investigation of RFA in HCC and will involve approximately 600 patients in over 40 research institutions in seven countries and regions.

ThermoDox is designed as a heatactivated liposomal technology that is administered intravenously. When used in combination with RFA to ablate tumors high concentrations of doxorubicin is released directly to the tumor and the surrounding liver tissue. The primary endpoint of the trial is progression-free survival.

For more info, contact: Jeannette Tighe, Principal MedAdvisoryllc 7 Glenn Road, N. Easton, MA 02356 itighe@medadvisory.net 508.297.2439

The clinicaltrials.gov link for this trial is: www.clinicaltrials.gov/ct2/show/ NCT00617981?term=celsion&rank=6

(**NEWS**—Continued from page 1)

"Our present findings reveal that HCV circulating in some individuals with resolved hepatitis C is capable of inducing productive infection in vitro at doses of 20 to 50 copies," the authors conclude. "This can be interpreted as a strong indication of potential virus infectivity in vivo."

Source: www.physorg.com/news160656818.html May 4th, 2009



WORLD HEPATITIS DAY and MAY, HEP C MONTH EVENTS in BC

From Kelly, Hep C Canada





We at Hep C Canada held an event on World Hepatitis Day at Vancouver's City Hall, with musicians from SevenSecond-Chase, and then, carrying Hep C signs, participated in a march on Hastings Street with people from VADUC. We were successful in having our poster and hepatitis info hung up in over 100 businesses this year. The big poster you see next to the podium was produced by those 113 businesses and lists all their names!

My goal this year is to build a team and to raise awareness. I plan to work the whole year doing advocacy/activism and organizing events, starting with one this summer, to raise funding for my 2010 Dream Concert! Our heartfelt thanks to the mayor's office for all their support with this WHD!

From Karen: The Happy Liver Society presented the Spring Fling on May 29th at Heritage Hall in Vancouver, which included dinner, dancing, auction, a raffle, and more.



Dr. Erb and Karen



Kelly O'Dell and friends





Drs. Scudamore and Erb



HEPCBC participated in the Victoria Day Parade with a decorated car, placards and candy. On the following day, we held a memorial event with speakers at the Parliament Buildings in Victoria, BC.





www.youtube.com/watch?v=KS4TvtT8sbY

From Jessica, HepCBC:

On behalf of HepCBC and AIDS Vancouver Island I would like to thank everyone who attended the World Hepatitis Day Rally on May 19th, 2009. Special thanks to all of our speakers—Philippe Lucas, Fran Falconer, David Mitchell and Dr. John Farley—for their inspiring words and passion for the hepatitis community.

I would also like to acknowledge Schering-Plough Canada for their efforts in assisting in the organization of the event. Schering-Plough, along with the PACE Group of Victoria, contributed greatly, and we would like to say how much their work was appreciated.

HepCBC and AVI hope to continue raising awareness surrounding hepatitis, and hope that this is a start of a wonderful annual tradition on World Hepatitis Day.

Thanks again to one and all for a truly successful event!

In addition to the World Hepatitis Day report, HepCBC would like to thank Country Grocers, Shopper's Drug Mart, Pharmasave, McGill and Orme, Burnside Gorge Community Centre, Sukhi Lalli Pharmacies, Cadbaro Bay Pharmacy, Saanich Pharmacy and Dr. Pearson for allowing us to have our donation tins and hepatitis C ribbons in their establishments. It was a great success and we hope we can do it again next year!

Jessica Chan, HepCBC Acting Executive Director



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HEPCBC SPRING UPDATE

by Jessica Chan, Acting Executive Director

Over the past few months, HepCBC has been working to expand its programs and raise the profile of hepatitis C in the public eye. In the months of March, April and May HepCBC has held two fundraising campaigns, participated in the Victoria Day Parade, held a World Hepatitis Day rally in partnership with AIDS Vancouver Island, and launched a new branch of its peer support program.

HepCBC continued its annual fundraising by putting donation boxes at the checkouts of all Thrifty Foods locations in lower Vancouver Island, Salt Spring Island and the mainland. The donation boxes were meant to increase visibility of hepatitis C by being in high traffic areas. They were also used to collect donations to fund HepCBC's programs. This year, HepCBC expanded its campaign by putting donation tins and hepatitis C ribbons at local pharmacies and at Country Grocers in the month of May.

As another initiative to raise the visibility of hepatitis C, HepCBC participated in the Victoria Day Parade for the second time this year. Thousands of people turned out for the parade and luckily, the rain clouds didn't gather until after the parade. A successful event! HepCBC would like to thank all those who participated, and especially thank JoAnn for lending HepCBC her car for the parade.

The World Hepatitis Day rally was also a great success this year. HepCBC and AVI had invited prominent members of the hepatitis C community to speak, and were even surprised with a visit by Denise Savoie, MP of Victoria. Many people turned up and everyone was given 'Am I Number 12?' gear to celebrate. CHEK News, the Times Colonist and the local Victoria News all showed up in support of the event. CHEK News followed the rally up with a news piece about hepatitis C aired May 28th on their Island 30 program.

Last but not least, HepCBC's peer support group was launched in May. The peer support group is a means for people in the hepatitis C community to talk about challenges they may encounter. Its format is a peer-run group where everyone is welcome. The group starts with a presentation followed by a discussion. Then, if time allows, other topics are covered based on the needs of the group. HepCBC's next two support meetings are on Tuesday July 28th and August 25th at 7:00pm. Meetings are held at the Victoria Health Unit on 1947 Cook St.

For more details about any of HepCBC's programs or events, please phone (250) 595-3892 or email info@hepcbc.ca.

(LIFESTYLE FACTORS —Continued from page 3)

with one or more conditions associated with metabolic syndrome, according to a study participated. Among them were 264 people with HCV infection, and 13,004 who were free of liver disease and were used as con-

Among the conditions considered to be part of metabolic syndrome are obesity, type 2 diabetes, and high blood pressure.

While the HCV+ participants were more likely to have insulin resistance and diabetes, and were more likely to smoke, they actually had fewer incidences of high blood pressure, obesity and metabolic syndrome. Having said that, there were 51 mortalities among those with Hep C, a much greater proportion than among those without liver disease. The researchers concluded that those with Hep C would have more serious effects from metabolic syndrome, especially if they were overweight and had high blood pressure. They pointed out that anyone with any of the conditions associated with metabolic syndrome should be treated for them, including those with Hep C, but they can't promise that such treatment will improve

survival of those patients...yet.



Source: www.kenes.com/ easl2009/Orals/324.htm

BANANA BERRY SMOOTHIE

Make the most of summer berries and ripe bananas by blending this delicious and nutritious smoothie.

Ingredients: 2 small ripe bananas 12 ounces strawberries, hulled and halved 6 ounces blueberries 6 ounces raspberries 12 ounces fat-free vanilla vogurt

Place bananas and berries in a blender, followed by vogurt. Blend until smooth, scraping down halfway through if necessary.

Serves 4

Per Serving: Calories 224, Calories from Fat 19, Total Fat 1.8g (sat 0.5g), Cholesterol 4mg, Sodium 61mg, Carbohydrate 45.1g, Fiber 7.7g, Protein 6.1g

Source: http://lowfatcooking.about.com/od/ breakfastandlunch/r/banberrysmoothi.htm

PegCARE

PegCARE is a reimbursement program to called NHANES, in which 31,000 people help people who have been prescribed Pegetron and need assistance with any copayment they might have, whether through their provincial coverage (i.e., Pharmacare) deductible or their 3rd-party health insurance. It is pro-rated, so the less the family income is, the more help they get. If someone's net family income is less than \$30,000, they will get 100% reimbursement. The income maximum is \$100,000. Patients must be signed up for Fair Pharmacare to qualify, and they need to provide a copy of last year's T4 form.

There is a 24/7 Nursing Hotline and bilingual assistance available, at no charge. Other services are access to live translation services (150 languages) and injection assistance from registered nurses. Patients starting on Pegetron should ask their doctor or nurse to enroll them in PegCARE. It's an easy singlepage form to fill out, which they will provide. PegCARE: 1-866-872-5773

PEGASSIST

The PegAssist Reimbursement Assistance Program provides reimbursement coordination assistance for patients who have been prescribed Pegasys or Pegasys RBV. The program will assist in securing funding for patients to ensure that they can start, stay on, and complete their treatment successfully.

PegAssist Reimbursement Specialists are available (Monday to Friday, 10 AM- 6 PM EST) by calling: 1-877-PEGASYS or 1-877-734-2797. Patients can also obtain a program enrollment form from their nurse/physician to gain access to the program.

The program provides financial aid to qualified patients, alleviating any financial barriers which may prevent patients from starting treatment, i.e., deductibles and/or copayments.

In partnership with CALEA Pharmacy, the program can conveniently deliver the medication directly to patients' homes or to the clinics.

COMPETITION!

epCBC is looking for writers for the next issue of the *hepc.bull*, and is willing to pay \$50.00 for a featured article. The article should be original, consist of 500 to 800 words, and of course, be about hepatitis C. It may be, for example, about the author's experience with hepatitis C, a study (with references) on some aspect of the disease, or a call for action. Submissions should be in by the 15th of next month, stating interest in the bonus. If there is more than one submission chosen, the editors reserve the right to print both, or leave one for a future edition. info@hepcbc.ca

MAKING A CLEAR DECISION WITH EFT TAPPING

by Karen Hodson, BA, EFT-ADV EFT Practitioner

This is a regular segment of a series on using EFT (Emotional Freedom Techniques) to create more personal peace in a rapidly changing world.

We make hundreds of decisions every day—what to wear, options for meals, travel directions, what to say, choosing a TV program, etc. So why is it when a bigger decision is to be made, one that may have important consequences, we often hit a wall? Why is that we are unable to make a clear choice and take the next steps that move us in a positive new direction?

We can come up with many excuses not to take action: My health won't allow it; I need the money; she/he will not understand me; I will look foolish, etc. Often confusion sets in, and we get stuck sitting on the fence of uncertainty, or fear takes hold and we roll back down to our old comfort level where we are unhappy but feeling safe in familiar territory.

I recently made a clear decision and took an action on something which I had been thinking that I "should" do for the past year. I wrote a letter stating that I was ending a relationship with a company with which I had been doing some contract work. This had served both of us during the time and I felt like I was ready to move on.

However, whenever I thought about leaving, I had all kinds of feelings and emotions show up—the "what ifs" that sabotaged me from taking action. I had fear that the money would not be replaced, worry that with the bad economy, I would end up losing more, ego pride that no one would be able to replace my quality of work, etc. Instead of taking action, I kept hitting my wall, then spiraling down in my negative feelings, with resentment showing up followed closely by guilt. I felt I was ready to leave, yet I just could not take that first big step.

Working with EFT helped me to get to the underlying emotion of what was blocking me from moving forward. I brought up my "should" and peeled it open so I could look at my truth. Was it really what I wanted or was it an old belief telling me that it should be different and I just needed to adjust within that system? Once I determined that, yes, this is what I wanted, I could explore what I feared and tap through to release those emotions. When I reached a neutral place, I was able to sit and calmly type my letter, feeling positive with my decision. It was my solid truth, uncluttered with emotional fears of what "may" happen if I did or

did not take that step. A huge burden was released and I felt complete and at peace.

Here is what an EFT tapping session on making a clear decision would look like: (See www.pivotpoint4u.com for tapping points and a full description of how EFT works)

Tap the Karate Chop (*side of the hand*) the Set-up Phrase (repeated up to 3 times) then the Tapping Phrase Sequence (*top of head, eyebrow, side of eye, under eye, under nose, chin, collar bone, under arm, liver point*) and repeat for as many rounds as needed, adding new words or phrases as they come up, until a more balanced feeling is present. Once neutralized, go onto the next set-up and tapping phrase.

Karate Chop Set-up:

"Even though I am afraid to make a decision—what if I make the wrong decision?—I deeply and completely love and accept myself."

Tapping a phrase on each point:

This fear; What if I make the wrong decision?; I just can't choose; I feel so frustrated; I am so stuck I can't move; Why does this always happen to me?; I feel so angry; I can't let go; I might fail; I am so afraid.

Karate Chop Set-up:

"Even though I don't have the courage to take this step, I deeply and profoundly love and respect myself anyway."

Tapping a phrase on each point:

I just can't do it; All this fear inside me; What if I do make the right decision?; I don't have the courage to take that step; I release these fearful thoughts; I am so frustrated; I choose to be courageous; All these old beliefs that no longer work; I choose to create new beliefs that are based on my truth now.

These sequences can be repeated for as many rounds as needed. Once a more neutral feeling is present the following positive phrases can be introduced until it feels complete.

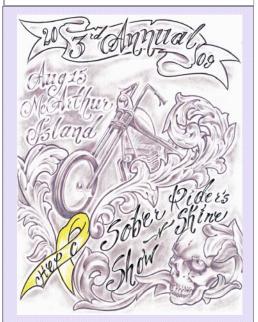
Tapping a Positive Phrase on each point:

I choose to trust in a positive outcome; I release those old heavy belief burdens; I am a magnet for prosperity of every kind; I feel so strong and courageous; I love this peaceful feeling of letting go; It feels so wonderful to be filled with joy; I love this feeling of serenity; I trust in the goodness that flows to me; I bask in this feeling of calmness; I choose positive thoughts; I am filled with love.

Everyday we are faced with decisions. When we hit a block, EFT tapping helps you to see the choices clearer so that making a decision becomes easier. Each decision we make has pros and cons based on beliefs from past experiences and the potential of what may happen in the future. It is the double edge of the sword and yet the real truth lies on the thin edge in-between – the "being in the moment." That thin edge is the exciting place where life truly exists. EFT helps to make living on the edge a joyful and peaceful experience.

Karen is an EFT Practitioner in West Vancouver and is offering a reduced fee for EFT sessions to people with hepatitis. You must mention this article, some restrictions apply and sessions can be over the phone. Karen would love to hear from you, please e-mail any comments or feedback. For more information:

(604) 913-3060 <u>pivotpoint4u@gmail.com</u>



The Sober Riders Motorcycle Association Kamloops Chapter and ASK Wellness Centre have come together on the Sober Riders Hep C Show N Shine. This is an event where we can gather to learn about hepatitis C and have fun doing it. We will start at McArthur Island Sports Arena at 1 pm, with lots of bikes, some fun and games and a 7 pm concert to follow. Local musicians Yell, Earthbound, cReEPsoLoW, and others TBA will be performing for the evening.

For more information or tickets (\$20 for the concert), please contact Shawna at ASK Wellness at 1-800-661-7541, 250-376-7558 ext 228, or via email:

shawna@askwellness.ca.

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(**KREPPNER** —Continued from page 1)

relationship. Just two weeks before James died, she completed her thesis for a doctorate in economics.

"He was fighting until the last minute," she said, and explained that they were investigating the possibility of getting a transplant. "But this time it was too much, and he finally said to me, 'I'm tired. I don't want to be intubated." [Editor: I remember James speaking at the Victoria Convention Centre a few years back in favour of transplantation for AIDS patients. 1

James' latest crusade was to protect the blood system by restricting high-risk donors. citing the probability of still-unknown pathogens. "He wanted us to put safety above all else," Antonia said.

Sources:

www.bloodservices.ca/CentreApps/Internet/ UW V502 MainEngine.nsf/page/ Passing of Board Member James Kreppner? OpenDocument&CloseMenu www.theglobeandmail.com/servlet/story/ LAC.20090516.OBKREPPNER16ART2204/ *PStory/?query=james+kreppner*

JUST DIAGNOSED. **NOW WHAT?!!**



If you're diagnosed with hepatitis C, get informed. Check with your local support group (Look on 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.)



HCV: NASAL TRANSMISSION

Hepatitis C Virus Can Be Transmitted by Drug Use Through the Nose

In most cases of hepatitis C virus (HCV), the virus is transmitted through contact with infected blood, usually through the sharing of needles and other drug injection instruments. However, for up to 20 percent of HCV infections, the method of transmission is unknown. Researchers have suggested that for some of these cases, HCV may be transmitted through the nose via the use of contaminated drug-sniffing implements. To test this hypothesis, investigators funded in part by NIDA tested mucus samples from 38 intranasal drug users with chronic, active HCV infection for the presence of blood and HCV. They also asked participants to snort air through a straw in a way that would mimic their normal drug-sniffing behavior to determine whether sniffing implements became contaminated. The straws were then tested for blood and HCV. The investigators found trace amounts of blood in 74 percent of mucus samples and on 8 percent of the straws used for sniffing. In addition, they detected HCV in 13 percent of mucus samples and on 5 percent of the straws. Only 8 percent of the samples contained both HCV and trace amounts of blood. Participants had a high rate of nasal inflammation and other nasal problems, including nosebleeds and damage to the inside of the nose from drug use, which may have contributed to the passage of blood and HCV from the nose. These results lend support to the hypothesis that HCV can be transmitted through shared use of contaminated sniffing implements, stated the authors.

Aaron S, McMahon JM, Milano D, Torres L, Clatts M, Tortu S, Mildvan D, Simm M. Intranasal transmission of hepatitis C virus: Virological and clinical evidence. Clin Infect Dis. 2008;47(7):931-34.

http://drugabuse.gov/newsroom/09/NS-03.html March 24, 2009



COMPENSATION

LAW FIRMS

1986-1990

Bruce Lemer/Grant Kovacs Norell Vancouver, BC Phone: 1-604-609-6699 Fax: 1-604-609-6688

Pre-1986/ Post-1990

Klein Lyons

Vancouver, BC 1-604-874-7171. 1-800-468-4466, Fax 1-604-874-7180 www.kleinlyons.com/class/settled/hepc/

David Harvey

Lauzon Belanger S.E.N.C. (Quebec)

Toronto, ON

Phone 416-362-1989: Fax 416-362-6204 www.lauzonbelanger.qc.ca/cms/index.php?page=108

Roy Elliot

Roy Elliott Kim O'Connor LLP.

hepc@reko.ca www.reko.ca/html/hepatitisc.html

Kolthammer Batchelor & Laidlaw LLP #208, 11062 - 156 Street. Edmonton, AB T5P-4M8

Tel: 780-489-5003 Fax: 780-486-2107

kkoltham@telusplanet.net

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

LOOKBACK/TRACEBACK

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

Lookback Programs, Canada: 1-800-668-2866 Canadian Blood Services, Vancouver, BC 1-888-332-5663 (local 3467) or 604-707-3467 **Lookback Programs, BC:** 1-888-770-4800 Hema-Quebec Lookback/Traceback & Info Line:

1-888-666-4362

Manitoba Traceback: 1-866-357-0196 Canadian Blood Services, Ontario 1-800-701-7803 ext 4480 (Irene) Irene.dines@Blood.ca

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

Class Action Suit Hotline: 1-800-229-5323 ext. 8296 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 **Quebec Compensation**: 1-888-840-5764

http://www.phac-aspc.gc.ca/hepc/comp-indem_e.html

CLAIMS ADMINISTRATOR

Administrator 1-877- 434-0944 www.hepc8690.com info@hepc8690.com www.hepc8690.ca/PDFs/initialClaims/tran5-e.pdf

Pre-86/Post-90

Administrator 1-866-334-3361 preposthepc@crawco.ca www.pre86post90settlement.ca

http://www.reko.ca/html/ Settlement Agreement: hepc_settleagreement.pdf

COMING UP IN BC/YUKON:

Armstrong HepCURE Contact 1-888-437-2873 Phone support.

AIDS Vancouver Island HCV support

- Campbell River: Drop in, harm reduction, support, education. 1371 C Cedar St. Contact 250-830-0787 leanne.cunningham@avi.org
- Comox Valley 355 6th St. Courtenay; Contact Sarah 250-338-7400 sarah.sullivan@avi.org Drop in, harm reduction, support, education.
- Nanaimo Info: Contact Anita 250-753-2437 anita.rosewall@avi.org
- Port Hardy (Port McNeil, Alert Bay, Port Hardy, Sayward, Sointula and Woss) 7070 Shorncliffe Rd, Contact Tom, 250-949-0432 tom.fenton@avi.org. Education, harm reduction, support, drop-in kitchen.
- Victoria 1601 Blanshard St., 250-384-2366 info@avi.org Harm Reduction.

Boundary HCV Support and Education. Support, education, presentations. Contact Ken 250-442-1280 <u>ksthomson@direct.ca</u>

Castlegar Contact Robin 250-365-6137 eor@shaw.ca

Courtenay HCV Peer Support and Education. Contact Del 250-703-0231 dggrimstad@shaw.ca

Burnaby HCV Support Contact Beverly at 604-435-3717 batlas@telus.net

Cowichan Valley Hepatitis C Support Contact Leah 250-748-3432 r-l-attig@shaw.ca

Cranbrook HeCSC-EK Phone support. Contact Leslie 250-426-6078, ldlong@shaw.ca

HepCBC info@hepcbc.ca, www.hepcbc.ca

- Victoria: Peer Support Last Tues. monthly 7-8:30 PM, Victoria Health Unit, 1947 Cook St. Drop-in/Office/Library, 306-620 View St. Contact 250-595-3892 Phone support 250-595-3891 9 AM-10 PM
- Fraser Valley Support/info 604-576-2022

Kamloops AIDS Society of Kamloops (ASK Wellness Centre) HIV/HEPC Peer Support Group each Thurs. 11-2 PM, 433 Tranquille Rd. 250-376-7558 Support/Referral. info@askwellness.ca 1-800-661-7541 www.aidskamloops.bc.ca

Kelowna Hepkop: Last Sat. monthly, 1-3 PM, Sep-May, Rose Ave. Meeting Room, Kelowna General Hospital. Contact Elaine 250-768-3573, eriseley@shaw.ca, Lisa 1-866-637-5144. ljmortell@shaw.ca

Mid Island Hepatitis C Society 2nd Thurs. monthly, 7 PM, (Location to be arranged.) Contact midislandhepc@hotmail.com

Nanaimo Hepatitis C Treatment Peer Support Group Meetings 1st & 3rd Thurs. Monthly 4-5 PM, AVI Health Centre, #216-55 Victoria Rd, Nanaimo. Contact Fran 250-740-6942. hepctxpeersupport@hotmail.com

Nakusp Support Contact. Contact Vivian 250-265-0073 Claire@columbiacable.net

Nelson Hepatitis C Support Group 1st Thurs.

every 2nd month, afternoons. ANKORS Offices, 101 Baker St. Drop-in library M-Th 9-4:30. Contact Alex or Karen 1-800-421-2437, 250-505-5506, information@ankors.bc.ca alex@ankors.bc.ca www.ankors.bc.ca/

New Westminster Support Contact Dianne Morrissettie, 604-525-3790 before 9 PM. dmorrissettie@excite.com

North Island Liver Service - Viral Hepatitis Information, support and treatment, serving Fanny Bay North to Pt Hardy, Vancouver Island. Toll free 1-877-215-7005

Pender Harbour Contact Myrtle Winchester 604-883-0010 myrwin@dccnet.com

Powell River Hep C Support Powell River Community Health, 3rd Floor–5000 Joyce Ave. Contact Rosemary rosemary.moran@vch.ca 604-485-3310

Prince George Hep C Support Group 2nd Tues. monthly, 7-9 PM, Prince George Regional Hospital, Rm. 421. Contact 250-963-9756, Ilse 250-565-7387 ilse.kuepper@northernhealth.ca

Princeton Contact the Health Unit (Princeton General Hospital) 250-295-4442

Prince Rupert Hep C Support Contact: Dolly 250-627-7942 hepcprince-rupert@citytel.net

Queen Charlotte Islands/Haida Gwaii & Northem BC support. Contact Wendy 250-557-2487, 1-888-557-2487, wendy@wendyswellness.ca www.wendyswellness.ca http://health.groups.yahoo.com/group/Network-BC/

Slocan Valley Support Group Contact Ken 250-355-2732, ken.forsythe@gmail.com

Smithers: Positive Living North West Contact the Prince George group, please.

Sunshine Coast-Sechelt Healthy Livers Support Group Information/resources, contact Catriona 604-886-5613 catriona.hardwick@vch.ca or Brent,604-740-9042 brent.fitzsimmons@vch.ca

VANDU The Vancouver Area Network of Drug Users. 380 E Hastings St. M-F 10-4 Contact 604-683-6061

vandu@vandu.org www.vandu.org

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

Vancouver Hepatitis C Support Group Contact 604-454-1347 or 778-898-7211, or call 604-522-1714 (Shelley), 604-454-1347 (Terry), if you would like to talk or meet for coffee.

YouthCO AIDS Society HepCATS 900 Helmcken St, 1st floor, Vancouver 604-688-1441 or 1-877-YOUTHCO www.youthco.org Support program manager: Renaud Boulet renaudb@youthco.org

Vernon HeCSC HEPLIFE 2nd & 4th Wed. monthly, 10 AM-1 PM, The People Place, 3402-27th Ave. Contact 250-542-3092, hecsc@hepc.vernon.bc.ca

Whitehorse, Yukon—Blood Ties Four Directions Contact 867-633-2437 blood-ties@klondiker.com

OTHER PROVINCES:

ONTARIO:

Barrie Hepatitis Support Contact Jeanie for info/appointment jeanievilleneuve@hotmail.com

Sandi's Crusade Against Hepatitis C/Durham Hepatitis C Support Group Contact Sandi: smking@rogers.com

www.creativeintensity.com/smking/ http://health.groups.yahoo.com/group/ CANHepC/

Hamilton Hepatitis C Support Group 1st Thurs. monthly, 6-7 PM, Hamilton Urban Core Community Health Centre, 71 Rebecca St, Hamilton. Contact Maciej Kowalski, Health Promoter 905-522-3233 mkowalski@hucchc.com

Hepatitis C Network of Windsor & Essex County Last Thurs. monthly, 7 PM, Teen Health Centre-Street Health Program Office, 711 Pelissier St., Suite 4, Windsor, ON. Contact Andrea Monkman 519-967-0490 or hepcnetwork@gmail.com.
http://hepcnetwork.net

Kingston Hep C Info HIV/AIDS Regional Service. Contact 613-545-3698, hars@kingston.net, www.hars.ca

Kitchener Area Chapter 3rd Wed. monthly, 7:30 PM, Zehrs Community Room, Laurentian Power Centre, 750 Ottawa St. S., Kitchener. Contact Bob 519-886-5706 bc.cats-sens@rogers.com or Mavis 519-743-1922 elroym222@rogers.com

Niagara Falls Hep C Support Group Contact Rhonda 905-295-4260, kehl@talkwireless.ca

Owen Sound Info and support. Contact Debby Minielly 1-800-263-3456 Ext. 1257, 519-376-9420, Ext. 1257,

dminielly@publichealthgreybruce.o

www.publichealthgreybruce.on.ca/

Peel Region (Brampton, Mississauga, Caledon) Contact 905-799-7700 healthlinepeel@peelregion.ca

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

 $\begin{array}{lll} \textbf{Sudbury} & \textbf{Circle} & \textbf{C} & \textbf{Support} \\ \textbf{Group} & 1^{st} & Tues. & monthly. & Contact \\ Ernie & 705-522-5156, & & \end{array}$

hepc.support@persona.ca or Monique 705-691-4507.

Toronto CLF First Mon. monthly Oct. through June, 7:30 PM, North York Civic Centre, 5100 Yonge Street. More info: www.liver.ca. Contact Billie 416-491-3353, bpotkonjak@liver.ca

Thunder Bay Hep C support. Contact Janet Adams 807-345-1516 (or for 807 area only 1-800-488-5840) Unified Networkers of Drug Users Nationally undun@sympatico.ca

York Region Hepatitis C Education Group 3rd Wed. monthly, 7:30 PM, York Region Health Services, 4261 Hwy 7 East, B6-9, Unionville. Contact 905-940-1333, 1-800-361-5653 info@hepcyorkregion.org www.hepcyorkregion.org

OUEBEC:

Quebec City Region Contact Renée Daurio 418-836-2307 reneedaurio@hotmail.com

ATLANTIC PROVINCES:

Cape Breton Island, NS The Hepatitis Outreach Society Support Group 2nd Tues. monthly 150 Bentinck Street, Sydney, NS. 7-9 PM. Call 1-800-521-0572, 902-733-2486

info@hepatitisoutreachsociety.com.

PRAIRIE PROVINCES:

Edmonton Contact Jackie Neufeld 780-939-3379.

Wood Buffalo HIV & AIDS Society #002-9908 Franklin Ave, Fort McMurray, AB Contact 780-743-9200 wbhas@telus.net ww.wbhas.ca

Manitoba Hepatitis C Support Community Inc. Each 2nd & last Tues. monthly, 7 PM, United Church, Crossways-in-Common, 222 Furby St., side door, Main Floor. Look for signs. Everyone is welcome. Contact Kirk 204-772-8925 info@mbhepc.org www.mbhepc.org

Medicine Hat, AB Hep C Support Group 1st & 3st Wed. monthly, 6:30 PM, HIV/AIDS Network of S.E. AB Association, 550 Allowance Ave. Contact 403-527-7099 bettyc2@hivnetwork.ca

TIP OF THE MONTH:

Check out WIN, the Weight-Control Information Network: http://win.niddk.nih.gov/

If you have a Canadian HCV support group to list here, please send details to info@hepcbc.ca by the 15th of the month. It's free!

ADVERSE EVENTS

Report problems with medical products, product use errors, quality problems, and serious adverse events.

www.accessdata.fda.gov/ scripts/medwatch/medwatchonline.htm

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