

# hepc.bull

## Canada's Hepatitis C News Bulletin

www.hepcbc.ca

### CELEBRATING OUR 20th ANNIVERSARY!!

ORIGINAL MARCH, 1996 ISSUE INSIDE, SEE LAST 4 PAGES

#### A WORD FROM ROBIN

##### A REFLECTION OF TIME WITH HEP C



It was back in the '90s that a few victims of Hep C got together to help all people with Hep C, through education and support. These brave few started what we now know as HepCBC and bonded a bunch of men and women

from all over BC and from all walks of life.

You know who you are, and we know who you are, as well. Over the years they pushed for a cure, offered support to those who needed it, and they never turned anyone away. They had politicians come to conferences to speak and listen to our concerns. They brought in specialists from the medical profession, drug companies, and of course the media, when needed. They are the front line troops in our fight to survive, and we lost a few brave soldiers on the way to VICTORY!!

I just want to say thank you to the soldiers past and present, for without them, we never would have won this WAR. To the fallen soldiers' families, we thank you for your sacrifice. Even with the war almost over, they still continue to stand up for us all.

Ken Thompson, you were my hero (R.I.P., my brother), and to the others, THANK YOU.

So next time you get together, remember how we all got here, and say a prayer for those we dearly miss.

We never thought we would see a cure, but we kept fighting for one. I remember we used to get grants if we included HIV. They had the spotlight. We did not. We powered on past HIV and won. The original crusaders we

(Continued on page 5)

#### PATIENT ATTITUDES TOWARDS RIBAVIRIN CHANGING

When the government asked HepCBC to report on patient attitudes towards the new DAA treatments that frequently have ribavirin (Ibavyr™ or Moderiba™) added to make them more effective, we decided to poll our website visitors. 19 participants offered up their opinions. Five wrote in some thoughtful comments as well.

##### FACTS WE GAVE THE PARTICIPANTS:

"Ribavirin's side effects can be awful. However it is cheap, has no long-term effects, and when combined with new HCV treatments, can boost the chance of a cure for some genotypes, or for those with cirrhosis. It also can prevent drug-resistance when re-treating."

**OUR QUESTION:** "How many percentage (%) points IMPROVEMENT IN YOUR CHANCE OF A CURE would be necessary for YOU to take (or re-take) a new HCV treatment with added ribavirin for 12-16 weeks? Select the answer closest to your own feelings about this."

##### OUR CONCLUSIONS:

(1) Almost half of patients (47.4%) said they take whatever their doctor recommends. Only 10.5% said they would never take ribavirin. The remainder compared the

(Continued on page 2)

#### WILLIAM'S STORY

The pain was constant. Day after day, week after week, it seemed to go on endlessly. I started to deal with the pain by sleeping a lot. I had been infected for many years, and at first my body managed to cope. I slowly broke down bit by bit. It's a slow and almost unnoticeable process. The virus began to win. My body had done as much as it could do. It sneaks up on you very slowly. Maybe that's why we seem to accept our condition, or maybe it's the brain fog and the confusion that overtakes us. I am not sure.

My doctor had sent me to a liver specialist, and I was under his care for a couple of years, until my situation got much worse. I was sleeping 16 or more hours a day, and was so confused I couldn't concentrate. As with

(Continued on page 2)

#### UNDETECTABLE Book Launches!

Award-winning poet and journalist Kim Goldberg of Nanaimo, author of *Where to See Wildlife on Vancouver Island* and *Red Zone* (about urban homelessness) and winner of several top poetry and alternative journalism prizes, lived for over 40 years with chronic hepatitis C. She never told anyone, and thought she would never live to see a cure for hepatitis C. When the cure arrived, and Goldberg reaped the victory, it gave her the poem of a lifetime. That poem is her seventh book: *Undetectable*. In it, she documents her hepatitis C healing journey using a Japanese literary-style called *haibun*, a travel diary paired with haiku. SAMPLE OF DIARY:

*For three-quarters of my life I have co-existed with an entity. A companion. An alter-intelligence. A shotgun wedding between*

(Continued on page 3)

#### INSIDE THIS ISSUE

<i>A Word from Robin / Patients &amp; RBV</i>	1
<i>William's Story / Undetectable –Book</i>	1
<i>Still a Role for IFN? / Conferences</i>	3
<i>Hep C 20 years in Photos</i>	4
<i>Boom Boom corrections/ Honour Roll</i>	5
<i>Events / Intriguing Study</i>	6
<i>Care Programs</i>	7
<i>Coming Up</i>	8
<i>Entire Issue: March 1996 HepC.bull!</i>	9

## ORDER OR DONATION FORM

NOTE: Ordering (or donating) via Credit Card or PayPal is available online.

Go to [www.hepcbc.ca/hepcbc-order-form/](http://www.hepcbc.ca/hepcbc-order-form/)

OR...Fill out form below with a cheque made out to "HepCBC" - Send to our NEW address:

HepCBC  
#20-1139 Yates Street  
Victoria, BC V8V 3N2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov. \_\_\_\_\_ PC \_\_\_\_\_

Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

Email: \_\_\_\_\_

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Bulletin through mail, Subscribe 1 year. \$10.00

Peppermint Patti's FAQs through mail...\$20.00

Donation enclosed.....\$ \_\_\_\_\_

(You will receive an annual charitable tax receipt)

TOTAL ENCLOSED.....\$ \_\_\_\_\_

\*Only name and email address required for emailed bulletin.

Membership also requires a postal address.

We will mail you a member package with pamphlets, yellow and red ribbon pins, information about volunteering opportunities, and how to participate in our annual general meeting, plus other ways to make your voice heard.

(Note: Nothing mailed to you from HepCBC will have ANY reference to hepatitis on the envelope.)

Registered Canadian charitable organization since 2001. No. 86800-4979-RR00001.

\*\*Download the *hepc.bull* free (since 2001) at [www.hepcbc.ca/hepc-bull-monthly-newsletter/](http://www.hepcbc.ca/hepc-bull-monthly-newsletter/)

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

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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.

## THANKS!!

HepCBC thanks the following institutions and individuals for their generosity: The late John Crooks, Allison Crowe, Billie Wood and Adrian, Victoria Positive Living Centre, Provincial Employees Community Services Fund, the Victoria Foundation, Dr. C. D. Mazoff, Judith Fry, and the newsletter team: Beverly Atlas, Diana Ludgate, Alp, Cheryl, Anamaria, and S.J.

Please patronize these businesses that have helped us: Top Shelf Bookkeeping, Merck Canada, Bristol-Myers Squibb, Roche Canada, Vertex, Gilead, Janssen, Boehringer-Ingelheim, AbbVie, Rx&D, VanCity, Country Grocer, and Thrifty Foods.

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**VICTORIA (MAIN) OFFICE [NEW**

**HOURS!]**, #20- 1139 Yates Street: Mon-

days & Tuesdays 11 am-5 pm, Wednesdays

11 am-3 pm, Thursdays 1 pm-5:30 pm, OR

other times by appointment (call or email to

arrange).

**VANCOUVER (OUTREACH) OFFICE,**

#206A-938 Howe Street. Mondays and

Thursdays, 10 am- 2 pm OR other times by

appointment (call or email to arrange).

**SUPPORT PHONE LINE NUMBERS:**

**VANCOUVER & LOWER MAIN-**

**LAND:** 1-604-259-0501

**THE REST OF BC:** 1-778-655-8000

(WILLIAM—Continued from page 1)

all chronic illnesses, the depression was setting in.

So I was set on a course of medication. It was to include interferon and ribavirin with another drug that was available, and the course was 48 weeks. Brutal! Terrible! The cure was worse than the illness. When I finished, my viral count was about 20. It had been in the millions before that. I was weak, unable to walk, and I must say, somewhat out of my mind. Those were some of the worst days I remember.

The virus came back with a vengeance! But I was too weak to even think about treatment, and it took me and my body over nine months to recover. So then the doctors thought that I should go back on the treatment with a new drug that showed promise plus, of course, interferon.

(RIBAVIRIN—from page 1)

benefits versus the drawbacks, and felt the use of ribavirin is justified in contexts where it gives them an increased chance of a sustained viral response (SVR). The average minimum increased chance of gaining SVR which they would accept was 18% (range 1% –30%). Clearly, the higher the benefit (difference in % of SVR attained with ribavirin vs. without it), the more patients are willing to take ribavirin. However, there are a few patients who will simply refuse to take anything with ribavirin in it.

(2) The patients who had taken both interferon-containing medications (unsuccessfully) and later, a new DAA + ribavirin for 12 weeks all said the side effects were either non-existent or far less serious in the later treatment, and all happily achieved SVR (except one who is undetectable but still awaiting SVR verification).

(3) We also saw a need for physicians and/or nurses to counsel patients being prescribed one of the new DAA treatments including ribavirin who may be reluctant to take it:

Compared to other ribavirin treatments patients may have heard about, current ribavirin treatments do not generally contain interferon, boceprevir, or telaprevir. These three ingredients may have been responsible for side effects patients have heard about. Because of this, the side effects of another drug may have been incorrectly ascribed to ribavirin.

The side effects of ribavirin are cumulative, developing and worsening over time. Current ribavirin-containing treatments are typically 8-16 weeks long, so in many cases, side effects may not even have time to show up before the treatment is over.

We wish to thank the 19 participants who generously shared their time and experience with us. They helped us to inform the government of patient attitudes and concerns, which hopefully will help future patients.

I had to take Ativan to inject myself with the Pegetron, because everything in my existence cried out against it, so I was in very bad shape. The interferon was the worst. After about 30 weeks...and don't quote me here, because I chose not to remember these traumatic days... started to black out. Regularly. It was strange... like the floor came up and hit me. My medication was stopped immediately, and I returned to the constant pain and confusion of chronic hepatitis C.

Things went along unchanged for a time, until one day, cirrhosis was diagnosed, and from that point, it got much worse. I couldn't stand. I could hardly walk. Every muscle, even every joint in my body, ached massively. Like I said, the pain was constant.

At my appointment in the early days of January 2015, I was told that the situation was

(Continued on page 6)

## HEP C TREATMENT: STILL A ROLE FOR IFN?

by Shakuntala Soden

During the last couple of years, there has been a sea change in the treatment of chronic hepatitis C. Before 2011, there was only the old dual combination of interferon plus ribavirin (IFN/RBV), whatever your genotype (GT), disease stage, etc. The treatment was long and arduous. It was also not very effective for a lot of people. Patients and doctors could only dream of better and less toxic treatments. Fast forward to 2016: The dream has become a reality. Hepatitis C is now curable most of the time and for most sufferers. If one drug combination is not ideal, the chances are another will be. There are several Direct Acting Antivirals (DAAs) to select from. In some cases, they can even be mixed and matched. And the even better news is that treatment is usually only one pill (or a few pills) a day, for just 12 weeks. Weekly IFN injections are no longer needed, right??

Unfortunately, there are some patients for whom the new DAAs don't have such good success rates. Cure rates sometimes fall well short of the high figures we are getting used to seeing of 95%+. Often it is cirrhotic patients and/or patients with GT3 who don't do so well, particularly those who are treatment-experienced. The new DAAs do work on these patients, but there are treatment failures, and that, we don't want to see.

In a November, 2015 article in Gastroenterology, Professor Graham R. Foster described how his team carried out Phase III studies to evaluate the efficacy of treatments for GT2 (treatment-experienced with cirrhosis) and GT3 patients (treatment-naïve or treatment-experienced). The results showed that pegylated interferon (pegIFN) plus RBV and sofosbuvir (SOF) for 12 weeks remains a highly effective option for GT3 patients, particularly those who are treatment experienced and cirrhotic. The SVR rates for GT3s taking pegIFN/RBV/SOF were higher than for an all-oral combination of SOF/RBV for 24 weeks.

An editorial in the same issue compared different treatment options for GT3. All-oral combinations considered were:

- SOF+RBV; SOF and ledipasvir with/without RBV (the latter combination is designed for GT1 but is approved for GT3 by the European Medicines Agency);
- or SOF and daclatasvir with/without RBV for up to 24 weeks (a pan-genotypic combination).

For those who are treatment-experienced, whether cirrhotic or not, SOF with pegIFN/RBV for 12 weeks yields excellent cure rates.

For treatment-experienced, cirrhotic patients with GT3, pegIFN/RBV/SOF tops any of the alternatives. The editorial highlights that SOF/pegIFN/RBV is currently the better option for GT3 with cirrhosis, if you take effectiveness and treatment duration into account, as it results in SVR rates in excess of 85% and often above 90%.

Interferon is an unpleasant drug for most, but as Foster et al.'s study demonstrates, taking it for 12 weeks didn't really produce many differences in terms of adverse events than taking SOF and RBV only for between 16 to 24 weeks. Only one patient stopped taking their treatment. The researchers note that one of the main difficulties with IFN treatments in the past was the duration: 24-48 weeks, with a significant chance of relapse. This study shows that shorter treatments with IFN and a much greater chance of success need not be so problematic. Clearly, for some people IFN is contraindicated. For others, until more effective DAAs are developed for GT3, the triple combo is an important option, as it achieves high cure rates for specific populations, in a relatively short period of time.



References: All three papers from which this article was drawn, can be found at: <http://goo.gl/h3GCLT>

## CONFERENCES

### The International Liver Congress 2016

13-17 April 2016

Barcelona, Spain

<http://ilc-congress.eu/>

### 12<sup>th</sup> World Congress

20-23 April 2016

Sao Paulo, Brazil

[www.ihpba2016.com/](http://www.ihpba2016.com/)

### Digestive Disease Week

21-24 May 2016

San Diego, CA

[www.ddw.org/attendees/registration](http://www.ddw.org/attendees/registration)

### 2016 APASL Single Topic Conference on Hepatitis C

10-12 June 2016

Kaohsiung, Taiwan

[www.apasl-hcv-2016.org/](http://www.apasl-hcv-2016.org/)

### GEEW 2016

34<sup>th</sup> Gastroenterology and Endotherapy

European Workshop

22 June 2016

Brussels, Belgium

[www.live-endoscopy.com/](http://www.live-endoscopy.com/)

### EASL - AASLD

Roadmap for Cure

23-24 September 2016

Paris, France

(UNDETECTABLE—Continued from page 1)  
*virus and teenage flesh, sanctified in the condemned annex of a North Bend hotel, or a Coos Bay fire-trap with a Colt 45 on the table, or a shack in Eastside where the toilet's sewer pipe emptied onto the dirt, or a dilapidated party house in Coquille, or quite a few other possible venues. Who will I be without it?*

THE HAIKU PART:

*fir limbs strewn across the road – all night I heard the wind*

We here at HepCBC have seen this beautiful book and are totally excited about it; we decided to ask Kim, who has said she hopes to use her new book to raise public awareness and encourage everyone to get tested (and treated!), if HepCBC could combine a hepatitis C outreach meeting with a book launch for her book in Victoria and Vancouver. She said YES! She will do a reading from her book, followed by a 20-minute version of the wonderful film DEAL WITH IT, then ending with a panel discussion with several local people who have been cured of hepatitis C, including audience participation. The two events are free.

Kim says, "The way to end the stigma is to normalize discussion about hepatitis C, to make it part of the public discourse, the same way we openly discuss cancer or diabetes...Nobody asked for hepatitis C. And everyone who has it deserves to be cured."

Well-known HCV advocate Lucinda Porter also praises UNDETECTABLE in her thumbs-up review at: <https://goo.gl/roqOOT>

We encourage you to come to the event nearest you to meet and support this author who put the experiences she shares with so many of us into this reflective, honest, inspirational poem.

### VICTORIA LAUNCH:

Thurs., April 21, 2016,

7:00pm - 8:30pm

Silver Threads Service  
2340 Richmond Road  
(at Bay St., across from  
Royal Jubilee Hospital

### VANCOUVER

#### LAUNCH:

Thurs., April 28, 2016

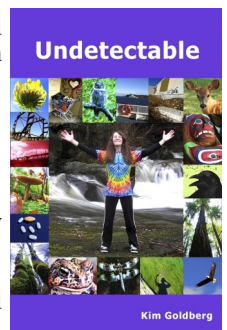
7:00pm - 8:30pm

Kensington Community  
Centre, Seniors Lounge  
5175 Dumfries St  
(From King Edward  
Stn., take #33 bus OR  
from Oakridge 41 Stn,  
take #41 bus)

To buy the book online for \$19:

<https://pigsquash.wordpress.com/>

Links to two really GREAT radio interviews she has done include some readings as well:  
20 minutes: <http://goo.gl/L9je5e>  
43 minutes: <http://goo.gl/NhtAcS>



# HEP C IN CANADA OVER THE PAST 20 YEARS IN PHOTOS



**Montreal Conference 2001**



**Wendy 2006**

**1999: International Quilts-  
HepFest Victoria**



**1<sup>st</sup> Manitoba Hep C Day Vigil 2003**



**2007 Red Robin Vancouver: Karen,  
Gordon, Joan, Beverly, Alp, Kelly**



**Rally 1998  
Parliament Bldg**

**Beverly & Joan with Sue  
post-transplant**



**Passing the candle in Montreal**



**"Sisters" Joan & Sandy  
2001 Ontario**



**HepTalk 2000: Roy, Barney,  
David, Marla, Lynn**

**Momma's Van Campaign 2006**



**ANKORS 2000**

**1998 5K Fun Run, Victoria**



**Joey Hache, age 15, at Mile 0, biked across  
Canada in 1998.**

**2001 Kitchener: Rudy CD Joan Jan Carolyn**



**Seattle 1999**



(ROBIN—Continued from page 1)

were...and still going strong. Hopefully one day HepCBC will not be needed, but they have to take the credit with them. We were pioneers in a field we knew little about, and now as I have done we pass our knowledge on to nurses and caregivers. I talk to the nursing students at our college every year, and love the response I get. It makes it all worth while.

Now hold your heads up high, breathe in the sweet smell of victory, and take a moment to reflect back on how we all got here.

THANK YOU

Respectfully, Robin Tomlin



### BOOM BOOM

Back to the 50's and 60's

**NOTE: THIS EVENT HAS BEEN CHANGED FROM JANUARY 30 IN YARROW**

**TO APRIL 23 AT THE JUBILEE HALL IN ABBOTSFORD.** ALL TICKETS CURRENTLY HELD WILL BE HONOURED AT THE EVENT.

“BOOM BOOM 2016” DINNER DANCE

KENNY SHAW & BRIAN TEMPLE

April 23, 2016 - 6pm to midnight

JUBILEE HALL in ABBOTSFORD, BC

FUN-RAISING EVENT FOR POSITIVE

LIVING FRASER VALLEY SOCIETY

Tickets: Positive Living Fraser Valley Society

108-32883 South Fraser Way

Abbotsford BC

9:30am-4:30pm M-F 604-854-1101 for more

information or buy online at <http://www.brownpapertickets.com/event/2163006>

Buffet Dinner/Dance \$30.00/person

Shuttle included from Abbotsford, Mission or

Chilliwack, for \$45.00/person (leave contact

information)

\*\*\*Must be 19 or over. Alcohol will be

served\*\*\*

*Positive Living Fraser Valley Society a non profit*

*society that assists those living with HIV and Viral*

*Hepatitis in the Fraser East region (Langley to*

*Boston Bar). It is highly recommended that all*

*baby boomers be tested for hepatitis C, hence the*

*name BOOM BOOM for the event.*

*You are guaranteed a great time and can boast*

*that you survived BOOM BOOM 2016.*

### QUESTIONS ABOUT COMPENSATION?

You can find your answers here:

<http://goo.gl/8hbZ1b>

The information in this newsletter is published in good faith, for general information purposes only. We do not make any warranties about the completeness, reliability and accuracy of this information, and it is not medical advice. We try to document our sources, but cannot guarantee their accuracy. Any action you take is strictly at your own risk. HepCBC will not be liable for any losses and damages in connection with use of the information provided.

## SVR HONOUR ROLL



Have you been undetectable for at least 12 weeks after treatment? Encourage others. Add your name! Congratulations to our friends:

1. **GJ** - SVR Dec 1998 - IFN/RBV 52 wks., Dr. Anderson /Natalie Rock, Vancouver, BC.
2. **Jeanie Villeneuve** - Oct 2000 - Schering IFN/RBV
3. **Amberose** (GT2a/2c) - SVR 2000 - Schering IFN/RBV 24 wks.
4. **KG**-Transfused 1987 (treatment-naïve GT2A/2C) IFN/RBV 24 wks., 2003-2004, Toronto. SVR confirmed 2014
5. **[NEW] Murray Palmer** (GT1a) Transfused. SVR 2003 - Rebetrone 48 wks (cleared at 24 wks.) SVR confirmed 2010.
6. **Darlene Morrow** (GT1 relapser) - Mar 2004 - Hyperthermia/Induction + pegIFN/RBV.
7. **Kirk Leavesley** (GT1) - 2004 - Roche
8. **Beverly Atlas** (GT1a) - 2005/2006 - Albuferon/RBV 44 wks.
9. **Steve Farmer** (Transplant Vancouver 2005) IFN/RBV 72 weeks. SVR 2008
10. **Gloria Adams†** (GT1b relapser) - Fall 2009 IFN/RBV/telaprevir 48 wks., Drs. Erb & Yoshida, Vancouver, BC)
11. **Don Crocock** (GT1 Stage II) - Dec. 2010 IFN/RBV - 48 wks.
12. **Daryl Luster** (GT1a) - Feb 2011 - IFN/RBV/RO5024048 48 wks.
13. **Donna Krause** (GT1 partial responder) SVR Nov 2011- Pegasys/Copegus, danoprevir/ritonavir/RO5024048 24 wks., Dr. Erb, Vancouver.
14. **Hermione Jefferis** (GT1a) - SVR 2011, PegIFN/RBV, 48 wks., Dr. Partlow, Victoria, BC
15. **Cheryl Reitz** (GT1b previous partial responder) SVR12 Mar 2013 - asunaprevir/daclatasvir 24 wks., Dr. Ghesquiere, Victoria, BC.
16. **Anita Thompson** (GT1a treated 3 times) Cirrhosis - Apr 2013 - Pegasys/boceprevir 48 wks. Dr. M. Silverman, Whitby, ON.
17. **Leon Anderson** (GT2 partial responder) SVR24 May 8, 2013 - GS-7977/RBV 16 wks., Dr. Alenezi & Dr. Conway- VIDC - Vancouver.
18. **Joan King** (GT1b treated 5 times) SVR24 June 2013 - asunaprevir/daclatasvir 24 wks., Dr. Ramji, Vancouver, BC
19. **Jackie** (GT1 relapser) SVR24 June 2013 - IFN/RBV/boceprevir 48 wks., Dr. Keith Bovell, Guelph, ON.
20. **Sandy J.** (GT1a treatment-naïve) Oct 31, 2013 - IFN/RBV/Victrelis 28 wks., Fran Faulkner, RN, Vancouver Island. SVR24.
21. **Andrew P.** (GT1a many previous treat-

ment attempts over 10+ years, including Incivek Jan 2014.) Sofosbuvir/ledipasvir + RBV 24 wks.

22. **Peter A Walker** (GT1a, treatment-naïve) SVR Jan 2014 - PegIFN/RBV +boceprevir (Eprex—for low RBC count from RBV.)

23. **Diane Stoney** - Transfused 3/21/79 (GT1a treatment-naïve) Feb 4 2014 - 12 wks. placebo, then 12 wks. on ABT-450/r+ABT-267+ABT-33+RBV. Dr. Tam, Vancouver, BC

24. **Coreen Kendrick** (GT1a treatment-naïve) Mar 10, 2014 MK5172/MK8742 12 wks., Dr. Ramji, Vancouver, BC.

25. **Jack Swartz** (Treated 3 times) Apr 2014 IFN/RBV/Victrelis, Dr. S. Wong, WHSC.

26. **Del Grimstad** July 2014, 12 weeks simeprevir/Sovaldi

27. **Linda May** (GT1b transfused, treatment-naïve) asunaprevir/daclatasvir 12 wks., Dr. Tam, LAIR Centre.

28. **Robin Tomlin** (GT1 treatment-naïve) SVR12 May 4, 2014 - Harvoni 12 wks., Dr. Yoshida VGH.

29. **Bob** (GT1a/HIV relapser) SVR24 Nov 2014 pegIFN/RBV/Incivek 24 wks., Dr. Montaner, Salt Spring Island, BC.

30. **Nancy Neel** (GT1a previous relapse IFN/RBV 48 wks.) SVR24 Mar 2015 MK-5172/MK 8742 12 wks., Dr. Ramji, Richmond, BC.

31. **Catherine Luke** GT3b, treatment-naïve) SVR 12 May 19, 2015 SOF/pegIFN/RBV 24 wks [NEW]

31. **Sandra Newton** (GT1a treatment-naïve, infected 1984) SVR12 Aug 2015. Harvoni 8 wks., Dr. David Pearson, Victoria, BC

32. **Wendy Mackay** Transfused 1971 (GT1a prev. 48 wks., Victrelis Triple ) Cirrhosis. SVR24 Aug 2015, Harvoni 24 wks., Dr. Tam, LAIR Centre

33. **Wendy L** (GT1b pegIFN/RBV intolerant) SVR12 Sep 15, 2015, Harvoni 8 wks. Dr. Steve Brien, Peterborough ON.

34. **Nancy Dunham** Transplant patient. SVR 2015, Harvoni Toronto, ON.

35. **Chaim David Mazoff** (GT1a treated 5 times) SVR24 Mar 2 10 2016 Harvoni 12 wks. Dr. Ghesquiere, Victoria, BC

[NEW]

Please send your name and info to Joan [info@hepcbc.ca](mailto:info@hepcbc.ca)

You Can Have Hepatitis C and Not Know it.



चेपेटाइटिस 肝炎 التهاب الكبد viêm gan hépatite

There is a Cure.

Find out more at [HEPCBC.ca](http://HEPCBC.ca)



## HEPCBC COMING TO LIFESTYLE SHOWS IN VICTORIA AND VANCOUVER

### HEPC BOOTH AT 55+ LIFESTYLE SHOW VICTORIA 2016

Tuesday, March 22  
12 noon - 6 pm  
Pearkes Recreation Centre  
(behind Tillicum Mall)  
3100 Tillicum Rd  
Victoria, BC V9A 6T2

Tickets \$5 available online here:

<https://goo.gl/8pn4dU>

Group of 10 tickets for \$20 (\$2 each)!

- Leisure, Travel, Passion, Wellness, and Fashion!
- Join us and explore a variety of inspiring lifestyle options, products and services for people over 55.
- 120+ Exhibits, All Day Entertainment, Interactive Displays, Free Giveaways and more.
- Produced by INSPIRED Senior Living Media in partnership with the Eldercare Foundation.

### VANCOUVER 2016 ZOOMERSHOW LIFESTYLE EXPO FOR THE 45+

Saturday, March 19, 10 am - 5 pm  
Sunday, March 20, 11 am - 5 pm  
Vancouver Convention Centre, East  
Building, Halls B and C  
999 Canada Place  
Vancouver, BC V6C 3T4

Visit us at Booth #1215, near the Pet Area!

Advanced tickets (by March 19<sup>th</sup>):

\$8 through [www.zoomershow.com](http://www.zoomershow.com)

2 for \$15 and 5 for \$25

OR \$12 each at the door

CARP members and up to 5 guests - FREE  
with your membership card

- Exhibitors featuring the latest trends, products and services for YOUR generation.
- Travel, money, health and fitness, retirement and reinvention – if it's new, if it can show you how to live big, it's at the ZoomerShow!
- Explore hundreds of ways to live big with ZoomerShow Vancouver 2016!

(WILLIAM—Continued from page 2)

very bad, and it was indicated I should prepare myself. I had genotype 1b, which had no cure at the time. Then on the 15<sup>th</sup> of January, a new drug was announced. It was called sofosbuvir. Immediately the specialist set me up for a prescription. I had been on disability, unable to function for a number of years, and money was scarce. I managed to get some loans and gifts from friends and relatives, but not nearly enough to cover the over \$140,000 that it would take. The provincial health care had turned me down flat. I went to the drug company, but when they found I didn't have that amount, they stopped answering my calls and emails. I was destitute.

Then a new drug was approved shortly after. It was called Holkira Pak, by AbbVie, and the specialist recommended I try this. I thought I was never going to get treatment. These were tremendously expensive drugs. AbbVie called me. They were amazing. There was actually someone dedicated to help people like me, and they got it done! I received my course of treatment, and within a month, the virus was undetectable! THE CONSTANT PAIN WENT AWAY. I HAD ENERGY AGAIN. IT WAS AWESOME.

I have been virus free for nine months now-- UNDETECTABLE for nine months! I am feeling great.

I have been given a new life to live, and every day is the best day.

### VOLUNTEERS:

HepCBC will have an info booth at BOTH of these events! If you'd like to volunteer, let HepCBC know through this page:

<http://hepcbc.ca/hepcbc-volunteer-application-form/>

(In the box, mention the event you want to volunteer for.)



### AFFORDABLE TREATMENT IN CANADA?

<http://goo.gl/dmc60v>

### INTRIGUING STUDY

A new study shows tantalizing evidence that SVR from HCV leads to a decrease in free time among those who are successfully treated.

Researchers found that an increase in activities such as dating/mating rituals, travel, dining out, live music (symphony orchestras, opera, Broadway musicals), as well as internet activities to plan and book such things, take up an increasing amount of time in some of those who achieve SVR.

It is not certain whether the condition will be short-lived or become a chronic problem.

Further research is needed in this area, as is funding.

Please send your donations to:

Help Me Afford My New Girlfriend.  
P.O. Box 2000,  
Behind the garage in the alleyway north  
of 69<sup>th</sup> Avenue and Wiltshire St.,  
Vancouver, BC.



Positive Living Fraser Valley Society & Pacific Hepatitis C Network is  
pleased to invite you to this exciting FREE Conference

"Towards Collaborative Hepatitis C Community Support"

Holiday Inn Express

15808 104 Avenue

Surrey, BC

- The latest HCV information delivered by specialists in the field
  - Interactive peer panel discussions
  - HCV Advocacy Training & much more...

March 21<sup>st</sup>

9:00 am - 4:00 pm

March 22<sup>nd</sup>

9:00 am - 2:30 pm

A great lunch and refreshments will be provided on both days

\*\*Please register early as space is extremely limited\*\*



Travel subsidies may be available on a very limited basis



This conference is made possible through funding from the Public Health Agency of Canada

Lunch and refreshments on both days are generously provided by AbbVie

For more information and to RSVP, please contact Kerstin Stausberg at  
[Kerstin.Stausberg@student.ufv.ca](mailto:Kerstin.Stausberg@student.ufv.ca) or call 604-701-8132

### Peppermint Patti's FAQs, V 10.1 !!

Do you have questions about Hep C  
or about treatment? Do you want  
to  
know how to make healthier  
choices  
for your liver?

Download for FREE:

HEALTH CARE LOANS  
<http://goo.gl/dmc60v>

IF YOU ARE OVER 50,  
PLEASE CONSIDER  
GETTING  
A SHINGLES VACCINE.  
SHINGLES CAN CAUSE  
LONG-TERM, INTENSE  
PAIN.

<http://goo.gl/dmc60v>

## ABBVIE CARE

With the approval of HOKIRA PAK™, AbbVie is launching AbbVie Care, which is a program that will provide best-in-class solutions to improve outcomes for people living with hepatitis C.

Canadians prescribed HOKIRA PAK™ will have the opportunity to request to be enrolled in AbbVie Care. The signature care program is designed to provide a wide range of customized services including reimbursement assistance, education and ongoing disease management support. AbbVie Care will not only support health care professionals but people living with genotype 1 hepatitis C throughout their treatment journey to achieve high cure rates in the real world.

For enquiries: 1-844-471-2273.

## MERCK CARE™

MerckCare™ is a program to help people who have been prescribed PEGETRON™, VICTRELIS™ or VICTRELIS TRIPLE™. The program provides:

- assistance with reimbursement and/or insurance claims.
- financial assistance for co-pay/deductible for people who qualify.
- 24/7 nursing support by phone.
- multilingual assistance.
- home delivery of medication.

MerckCare™ provides all of these services free of charge.

To enroll in MerckCare™, you can call 1-866-872-5773 or your doctor or nurse can submit an enrollment form for you. Reimbursement specialists are available from 8:00 a.m. to 8:00 p.m. EST Monday to Friday, excluding statutory holidays.

## IBAVYR™

Pendopharm has established the IBAVYR™ Patient Support Program. The program will assist patients who have been prescribed IBAVYR™ (ribavirin tablets) with reimbursement navigation, financial assistance and pharmacy services. Case managers will support patients with insurance-related matters and assess eligibility for financial support. Pharmacy services include adherence support, medication delivery and counseling.

To enquire or to enroll, you may call 1-844-602-6858 Monday–Friday 7am to 11pm EST.

## BIOADVANCE®

JANSSEN's GALEXOS™ (simeprevir) BioAdvance® program can assist you in many ways during your treatment. This includes compiling and submitting, on your behalf, all the forms and documents required by your insurance company to request coverage of GALEXOS™, and following up with your insurer to get you the best coverage possible. If you don't have private insurance, the GALEXOS™: BioAdvance® program will investigate public assistance programs that can help pay for your treatment. Whichever type of coverage you have, if your insurance does not fully cover the cost of treatment, the GALEXOS™: BioAdvance® program can usually coordinate and provide financial assistance to help you get treated. Finally, the program can offer many other types of support and your doctor and members of your healthcare team will work with the GALEXOS™: BioAdvance® Program to develop a customized approach to best support you throughout the course of your treatment. Contact: 1-855-512-3740.

## CLAIRE

Bristol-Myers Squibb Canada has created Claire, a patient support program designed to provide patient health information and reimbursement assistance for patients who have been prescribed DAKLINZA™ (daclatasvir). This personalized patient support program is now available, and represents a service offered at no cost to the patient and is fully confidential. It is set up so you will have a single person to take care of you during your treatment. You can call the information line for more details at: 1-844-428-2559. Should you have medical enquiries regarding DAKLINZA™, please contact our Medical Information Department at 1-866-463-6267 or email [info@claireprogram.ca](mailto:info@claireprogram.ca)

## 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 financial barriers which may prevent patients from starting treatment, i.e., deductibles and/or co-payments. In partnership with CALEA Pharmacy, the program can conveniently deliver the medication directly to patients' homes or to the clinics.

## MOMENTUM™ SUPPORT

To learn more about SOVALDI™, HARVONI™ or the Momentum Program™ in Canada, the patient should speak to his/her doctor or nurse or call the Gilead Sciences Canada medical information line at 1 855 447 7977. Eligible patients may receive an integrated offering of support services for patients and healthcare providers throughout the entire treatment journey, including:

- Access to dedicated case managers/reimbursement navigators to help patients and their providers with insurance-related needs, including identifying alternative coverage options through private, federal and provincially-insured programs.

- The SOVALDI™/HARVONI™ Co-pay assistance program, which will provide financial assistance for eligible patients who need help paying for out-of-pocket medication costs.

- Medication delivery services.
- Compliance and adherence programs.

## HEALTH BENEFITS 1<sup>ST</sup> NATIONS AND INUIT

There are a number of health-related goods and services that are not insured by provinces and territories or other private insurance plans. To support First Nations people and Inuit in reaching an overall health status that is comparable with other Canadians, Health Canada's Non-Insured Health Benefits (NIHB) Program found at <http://goo.gl/8K9ODK> provides coverage for a limited range of these goods and services when they are not insured elsewhere. Their number in BC is 604-666-3331 or 1-800-317-7878 (toll-free).

## COMPENSATION

**Class Action Suit Hotline:** 1-800-229-5323 ext. 8296  
**1986-1990 Compensation Line:** 1-877-434-0944  
**Red Cross Compensation pre-86/post-90 (Federal)**  
**Administrator:** 1-866-334-3361  
[preposthepc@crowco.ca](mailto:preposthepc@crowco.ca)  
**Ontario Compensation:** 1-877-222-4977  
**Quebec Compensation:** 1-800-561-9749

### CLAIMS ADMINISTRATOR 1986-1990

Claimants may be reimbursed for costs of treatments and accepted hepatitis C medications not covered by public or private healthcare plan while they wait for reimbursement from the 1986-1990 plan.

Administrator 1-877-434-0944

[www.hepc8690.ca](http://www.hepc8690.ca)  
[info@hepc8690.ca](mailto:info@hepc8690.ca)

### Pre-86/Post-90

Administrator 1-866-334-3361

[preposthepc@crowco.ca](mailto:preposthepc@crowco.ca)  
[www.pre86post90settlement.ca](http://www.pre86post90settlement.ca)

### Settlement Agreement:

[www.pre86post90settlement.ca/english/eng\\_home.htm](http://www.pre86post90settlement.ca/english/eng_home.htm)

## SUPPORT BC/YUKON

Armstrong HepCURE Phone support 1-888-437-2873

**AIDS Vancouver Island** The following groups provide info, harm reduction, support, education and more:

• **Campbell River:** Positive Wellness program and counseling, harm reduction, needle exchange, advocacy. 1371 C - Cedar St.

Contact [leanne.wingert@avi.org](mailto:leanne.wingert@avi.org) 250-830-0787

• **Comox Valley** Harm reduction, counselling, advocacy. 355 6<sup>th</sup> St., Courtenay. Contact Sarah [sarah.sullivan@avi.org](mailto:sarah.sullivan@avi.org) 250-338-7400

• **Nanaimo AVI Health Centre.** Counseling, advocacy. **NEW: 102-55** Victoria Rd. Contact Michelle for details. 250-753-2437 [michelle.latour@avi.org](mailto:michelle.latour@avi.org)

• **Victoria** Access Health Centre, Tuesday lunch, disability applications, peer training. Support group Tues 12:30-1:30 PM, 713 Johnson St., 3rd floor, 250-384-2366, ext 3112 [leslie.robinson@avi.org](mailto:leslie.robinson@avi.org).

### ANKORS Hepatitis C Project

Hep C Info, support for prevention, testing, treatment and living well with Hep C.

• **Boundary, Nelson, West Kootenay** Women's gathering monthly. 101 Baker St, Nelson. Contact Laura 1-800-421-2437 250-505-5506 [ankorshcpc@ankors.bc.ca](mailto:ankorshcpc@ankors.bc.ca)

• **East Kootenay** 209 16th Ave N, Cranbrook, Contact Michelle 250-426-3383 1-800-421-2437 [ankorshcvc@gmail.com](mailto:ankorshcvc@gmail.com)

**Castlegar** Contact Robin 250-365-6137 [eor@shaw.ca](mailto:eor@shaw.ca)

**Chilliwack PCRS** Hep C Prevention, harm reduction. 45904 Victoria Avenue, Chilliwack. Contact Kim Lloyd 604-798-1416. [lbirdsall@pcrs.ca](mailto:lbirdsall@pcrs.ca) [www.pcrs.ca](http://www.pcrs.ca)

**Comox Valley Positive Wellness North Island Treatment/Pre & Post-treatment Support Group** 2<sup>nd</sup> & 4<sup>th</sup> Wed., 615-10th St, Courtenay. Lunch. Contact Cheryl 250-331-8524.

[Cheryl.taylor@viha.ca](mailto:Cheryl.taylor@viha.ca)

**CoolAid** Community Health Centre, **Victoria.** Meetings each Wed 10 AM and Thu 1:30 PM. 713 Johnson St. Support for all stages of treatment (deciding, during, after). Contact Roz [rmilne@coolaid.org](mailto:rmilne@coolaid.org) for treatment or group info.

**Courtenay HCV Peer Support and Education.** Contact Del 250-703-0231 [dgrimsstad@shaw.ca](mailto:dgrimsstad@shaw.ca)

**Cowichan Valley HCV Support** Contact Leah 250-748-3432 [r-lattig@shaw.ca](mailto:r-lattig@shaw.ca)

**Haida Gwaii** support. Contact Wendy [wendy@wendyswellness.ca](mailto:wendy@wendyswellness.ca) [www.wendyswellness.ca](http://www.wendyswellness.ca)

**HepCBC** [info@hepcbc.ca](mailto:info@hepcbc.ca), [www.hepcbc.ca](http://www.hepcbc.ca) Call for office hours. Email support through website form. Peer phone support through:

• **Lower Mainland:** 1-604-259-0501

**Fraser Valley** Support/Info: 604-576-2022 (9 am-10 pm)

• **The rest of BC:** 1-778-655-8000

**Kamloops** ASK Wellness Centre. Chronic illness health navigation/support.

[info@askwellness.ca](mailto:info@askwellness.ca) 250-376-7558 1-800-661-7541 ext 232 or Merritt health housing & counseling 250-315-0098 [www.askwellness.ca](http://www.askwellness.ca)

**Kamloops** Hep C support group, 2<sup>nd</sup> and 4<sup>th</sup> Wed monthly, 10-1 PM, Interior Indian Friendship Society, 125 Palm St. Kamloops. Contact Cheri 250-376-1296 Fax 250-376-2275

**Kelowna Hepkop:** Phone support, meeting info. Contact Lisa 1-866-637-5144 [ljmortell@shaw.ca](mailto:ljmortell@shaw.ca)

**Nanaimo - Central Island Hepatitis Service:** Nurses & doctors available for info, support, treatment. Clinic located in Nanaimo. Doctor or self-referral. Contact 1-855-740-2607,

[sarah.hughes@viha.ca](mailto:sarah.hughes@viha.ca) or [shel-by.munk@viha.ca](mailto:shel-by.munk@viha.ca)

**New Westminster Stride with Purpose "HepC"** Support Group 1<sup>st</sup> & 3<sup>rd</sup> Wed monthly 1-2:30pm Refreshments.

Contact: Stride Workers 604-526-2522, [mail@purposesociety.org](mailto:mail@purposesociety.org)

**Positive Wellness North Island-North Island Liver Service** Info, support, treatment/pre-post treatment groups. Doctor or self-referral. 1-877-215-7005 250-850-2605.

• **Courtenay:** 2<sup>nd</sup> Fri monthly 1PM, Drop-in, Comox Valley Nursing Centre (nurse)

• **Campbell River:** Treatment/pre&post-treatment support group 1<sup>st</sup>&3<sup>rd</sup>Thu monthly 10-12 noon, Discovery Room, Sunshine Wellness Centre, Campbell River Hospital. Jody Crombie at 850-2620, [jody.crombie@viha.ca](mailto:jody.crombie@viha.ca)

**Penticton & District** Community Resources Society, Harm Reduction Program, Meetings every 2nd Tues, 12:30-1:30 PM. 330 Ellis Street. Contact Melanie: 250-488-1376 or 250-492-5814

**Positive Haven** Info, harm reduction, support, drop in, clinic. 10697 135A St. Surrey. Contact Monika 604-589-9004.

**Positive Living Fraser Valley (Abbotsford)** Hep C support, Drop-in centre #108-32883 S. Fraser Way, M-F 10:30 AM-4:30PM. Info, support worker, rides to appointments in surrounding areas. Contact 604-854-1101 or [plfvcentre@plfv.org](mailto:plfvcentre@plfv.org)

**Powell River Hepatology Service** Powell River Community Health, 3<sup>rd</sup> Floor-5000 Joyce Ave. Contact Melinda 604-485-3310 [Melinda.herceg@vch.ca](mailto:Melinda.herceg@vch.ca)

**Prince George Hep C Support** Contact Ilse [ilse.kuepper@northernhealth.ca](mailto:ilse.kuepper@northernhealth.ca)

**Sunshine Coast-Sechelt** Healthy Livers Support Group Information/resources Contact Catriona 604-886-5613 [catriona.hardwick@vch.ca](mailto:catriona.hardwick@vch.ca) or Brent 604-740-9042 [brent.fitzsimmons@vch.ca](mailto: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](mailto:vandu@vandu.org) [www.vandu.org](http://www.vandu.org)

**Vancouver HCV Support** Contact Beverly 604-435-3717 [batlas@telus.net](mailto:batlas@telus.net)

**Vancouver Hepatitis C Support Group** Contact 604-454-1347 or 778-898-7211, or call 604-454-1347 (Terry), to talk or meet for coffee.

**Vancouver: YouthCO** HIV and Hep C Society of BC. Call for appts or drop in M-F 10-6. 205-568 Seymour St, Vancouver 604-688-1441, 1-855-YOUTHCO Stewart [info@youthco.org](mailto:info@youthco.org), [www.youthco.org](http://www.youthco.org)

**VIDC HCV Support Group** 9:30AM-12PM Every Friday 200-1200 Burrard St., Vancouver. Contact 604-642-6429 [info@vidc.ca](mailto:info@vidc.ca)

**Vernon telephone buddy,** M-F 10-6 Contact Peter, [pvanbo@gmail.com](mailto:pvanbo@gmail.com) Tel. 250-309-1358.

**Whitehorse, Yukon—Blood Ties Four Directions** Contact 867-633-2437 [admin@bloodties.ca](mailto:admin@bloodties.ca)

## OTHER PROVINCES

### ONTARIO:

**Barrie Hepatitis Support** Contact Jeanie for info/appointment [jeanievilleneuve@hotmail.com](mailto:jeanievilleneuve@hotmail.com)

**Hamilton Hepatitis C Support Group** 1<sup>st</sup> 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](mailto:mkowalski@hucchc.com)

**Hep C Team, AIDS Committee** of North Bay & Area. Education, outreach, treatment, individual & group support, harm reduction, needle exchange. 269 Main St. W, Suite 201, North Bay. Contact 705-497-3560, 1-800-387-3701 or [hepcnetwork@gmail.com](mailto:hepcnetwork@gmail.com), [www.aidsnorthbay.com](http://www.aidsnorthbay.com)

**Hepatitis C Network of Windsor & Essex County** Last Thurs. monthly, 7 PM, Teen Health Centre-Street Health Program Office, 711 Pellissier St., Suite 4, Windsor. Contact Andrea Monkman 519-967-0490 or [hepcnetwork@gmail.com](mailto:hepcnetwork@gmail.com), <http://hepcnetwork.net>

**Kingston Hep C Info** HIV/AIDS Regional Service. Contact 613-545-3698, 1-800-565-2209 [hars@kingston.net](mailto:hars@kingston.net) [www.hars.ca](http://www.hars.ca)

**London Hepatitis Hep C Support** 186 King St, London. For those infected as well as affected by Hep C. Contact: 519-434-1601, 1-866-920-1601 [www.hivaidconnection.com](http://www.hivaidconnection.com)

**Niagara Health System – Hepatitis C Care Clinic (HCCC) Clinics:** New Port Centre-Port Colborne, 4 Adams Street - St Catharines, Niagara Falls Hospital. Education, counseling, individual/group support, treatment, outreach, and harm reduction. Contact 905-378-4647 ext 32554 and [HCCC@niagarahealth.on.ca](mailto:HCCC@niagarahealth.on.ca) [www.niagarahealth.on.ca/services/hepatitis-c-care](http://www.niagarahealth.on.ca/services/hepatitis-c-care)

**Oshawa Community Health Centre Hepatitis C Team** Drop-in, lunch provided each Thurs. 12-1 PM, 79 McMillan St. [www.ochc.ca](http://www.ochc.ca) Contact 1-855-808-6242

**Owen Sound** Info, support. Contact Debby Minielly [dminielly@publichealthgreybruce.on.ca](mailto:dminielly@publichealthgreybruce.on.ca) 1-800-263-3456 Ext. 1257, 519-376-9420 Ext. 1257, [www.publichealthgreybruce.on.ca](http://www.publichealthgreybruce.on.ca)

**Peel Region** (Brampton, Mississauga, Caledon) 905-799-7700 [healthlinepeel@peelregion.ca](mailto:healthlinepeel@peelregion.ca)

**St. Catharines** Contact Joe 905- 682-6194

**Toronto CLF "Living with Liver Disease" group** 1<sup>st</sup> Mon. monthly Oct.—June, 7:30 PM, North York Civic Centre, 5100 Yonge Street. Contact Billie 416-491-3353, ext. 4932 or 1-800-563-5483 ext. 4932..

[bpotkonjak@liver.ca](mailto:bpotkonjak@liver.ca) [www.liver.ca](http://www.liver.ca)

**Thunder Bay** Hep C support. Contact Sarah Tycholiz 807-345-1516 (or for 807 area only 1-800-488-5840)

**Unified Networkers of Drug Users** Nationally [undun@sympatico.ca](mailto:undun@sympatico.ca)

**York Region Hepatitis C Education Group** 3<sup>rd</sup> 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](mailto:info@hepcyorkregion.org) [www.hepcyorkregion.org](http://www.hepcyorkregion.org)

### QUEBEC:

**Quebec City Region** Contact Renée Daurio 418-836-2307 [reneedaurio@hotmail.com](mailto:reneedaurio@hotmail.com)

**CAPAHC** support group meetings 3<sup>rd</sup> Thurs. monthly 6-8PM, 032-2065, rue Parthenais, Montreal. Contact 514-521-0444 or 1-866-522-0444

### ATLANTIC PROVINCES

**Hepatitis Outreach Society of NS.** Info and support line for the entire province. Call 1-800-521-0572, 902-420-1767

Online Peer Support: [info@hepnsc.ca](mailto:info@hepnsc.ca) [www.hepnsc.ca](http://www.hepnsc.ca)

### PRAIRIE PROVINCES:

**Calgary Hep C support group** meets 1st & 3rd Wed. monthly, 11:45am-1pm, CUPS 1001-10th Ave, SW. Contact Lynda 403-991-1930 [www.cupscalgary.com](http://www.cupscalgary.com) [lyndaw@cupscalgary.com](mailto:lyndaw@cupscalgary.com)

**Manitoba** Hepatitis C phone and email support and outreach. Contact Kirk at [info@mbhepc.org](mailto:info@mbhepc.org). Direct line: 1-204-231-1437

**Manitoba CLF** each Thu 1:30-3. 375 York Avenue, Suite 210, Winnipeg, Contact Bianca 204-831-6231 [bpengelly@liver.ca](mailto:bpengelly@liver.ca)

**Medicine Hat, AB Hep C Support Group** 1<sup>st</sup> & 3<sup>rd</sup> Wed. monthly, 6:30 PM, HIV/AIDS Network of S.E AB Assoc, 550 Allowance Ave. Contact 403-527-7099 [bettyc2@hivnetwork.ca](mailto:bettyc2@hivnetwork.ca)

To list Canadian groups here, please send your details to [info@hepcbc.ca](mailto:info@hepcbc.ca) It's free!





*March, 1996*

**FROM THE MEMBERSHIP DESK  
by Jim Lodge**

By way of an introduction, my name is Jim Lodge, and I am Co-Chairperson and membership Chair of the Victoria Chapter of HeCSS.

Through recent publicity, the Support Group has grown to such an extent, the few founding members have become inundated with requests for help and support, and need help themselves.

We are indebted to the persons volunteering at our first appeal at the last meeting, but we need to continue our appeal to ensure a smooth running and strong support group.

The greatest need just now is for persons willing to take over a portion of our ever growing telephone list. This entails confirming by phone, meeting dates and times, together with any forthcoming special meetings, and of course offering some support to members, at the same time. If you can see your way clear to help, please phone me, Jim Lodge, 386-8227, or Priscilla Udall-Ekman at 652-6499. Thank you in anticipation for realising the need, and caring enough to offer support to others.

Anyone wishing to become a member, the minimum dues are \$15.00 per year and application forms are available at each meeting or on request. Benefits through the National Office include an Income Tax Receipt, membership through November each year, plus the National News Letter.

**Other areas needing help:**

Library	Ingrid Brundin	920-5708
	Joan Diemecke	479-5290
Fund-raising	Ryta Tracy	475-1860
Publicity	David Smith	658-4991
Minute Taker for Afternoon Meetings	Rae Supeene	478-1974
Meeting Suggestion/Question Box	Jim Lodge	386-8227

Thank you once again for your help and understanding in the Support Group, and in providing comfort and support, educating, and also striving to eradicate Hepatitis C and advocate justice.

Jim Lodge Co-chairperson  
Membership Chair 386- 8227

\*\*\*\*\*

**\*A WORD FROM DAVE**

Hi, my name is Dave Smith. I'm one of the co-chairpersons of the Victoria branch of HeCSS. I'm the one who's had the liver transplant. I suppose this means I'm going to be around to give people a hard time for a while, yet.

From time to time, I would like to take the opportunity to say a few words to you about what we're doing, how we're feeling and why, and anything else that may come to mind. I hope that everyone is feeling well as you read this.

The fact is, it's possible you're not, since you have Hep C. What can we do in order to feel our best when faced with the problems as Hep C patients? I am reminded of something I read the other day about "attitude." It said life is 10% what happens and 90% how you react to it.  
(continued on p. 2)

I think this is quite true, in my case. Attitude has played a very important role in my life since I was diagnosed with Hep C two and a half years ago. Attitude can be positive or negative, just like, for instance, a glass of water can be half-full, or half-empty. It all depends on your perception.

At one time I had a tendency to be easily frustrated and even angry at inappropriate times. This disease somehow has given me the opportunity to look at life in a totally different way. Now, when I feel myself slipping back into old frames of mind, I am able to pull myself out, and those old modes of thinking usually fade away. Like the other day, for example, I felt really dragged out after feeling great for a couple of weeks. I had difficulty dealing with this, but instead of fighting it, I just let it ride, and it went away of its own accord. In the "old days" my attitude would have been one of mounting frustration as to the way I was feeling, especially prior to my diagnosis. Since my diagnosis, I can now put a name to my symptoms. Frustration and anger are part and parcel with fatigue and pain. Now I realize that attitude has a great deal to do with how I am feeling. I have discovered through Hep C that I have a greater reserve of strength than I thought I had. I'm sure that's the case with all of us.

In closing, I would like to thank June Shane for her guidance and unconditional dedication to the founding of our group. Her inspiration will remain with us always. Good luck, June!

I'll talk to you all next month.

Dave

\*\*\*\*\*

If you have a change of address, name, or phone number, please let Jim Lodge know at 386-8227.

**COORDINATING COMMITTEE-VICTORIA CHAPTER**

**CO-CHAIRS:**

JIM LODGE	TEL: 386-8227
DAVID SMITH	TEL: 658-4991
RYTA TRACY	TEL: 475-1860
SECRETARY RAE SUPEENE	TEL: 478-1974
TREASURER CHRIS REID	TEL: 478-4144
MEMBERSHIP JIM LODGE	TEL: 386-8227
LIBRARY INGRID BRUNDIN	TEL: 920-5708
LIBRARY & BULLETIN JOAN DIEMECKE	TEL: 479-5290
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Minutes of past meetings will soon be available through the Lending Library. Contact Ingrid Brundin at 920-5708.

**The deadline for any contributions to next issue of hepc.bull is March 26. Please contact Joan Diemecke at 479-5290.**

Next Meeting Date is Thursday, March 21, 1996. Times are as usual: 1pm to 3pm, and again at 7pm to 9pm.

The topic will be Ozone Therapy. Information on this alternative treatment will be presented by Sol Preston from Vancouver. With Sol will be Barbara, a Hep C carrier, who has chosen ozone therapy over treatment with Interferon. There will be much time for questions. We will also have Louise Coutu with Sol. She believes in the therapy so much, that she now works for the company.

## RYTA'S COLUMN

Hi there,

My name is Ryta. I hope that each one of you will come up to me and introduce yourself sometime soon. Since David and I got elected to the national Board of HeCSS, I've been giving much thought to what my role is, and what it should be for our Victoria local. I hope to represent you in Toronto by making our group's needs known there, where numbers are beginning to make some changes possible for all of us. I want to be sure that you have a voice there, and I also want the Board to have clear voices here in Victoria. Together we are strong, and there is little we cannot do if we are willing. So please take the time to tell me what YOU think, what your questions are, and what concerns you. I hope you will keep me in tune with the issues and directions you think we (both here in Victoria, and in Canada as a whole) should be exploring. Then, and only then, can I attempt to do what I can to see those ideas shared with our Society in Toronto and all other centres across Canada. Our Hope lies within ourselves and our willingness to get (continued on p. 3)

involved. Join with your steering committee members and co-chairs and all members in helping ourselves.

Ryta Tracy

Contribution request: If any of you have delicious, nutritive, easy-to-make, low-fat, vegetarian recipes, we would like to print one each month in this news bulletin. Please contact Joan Diemecke at 479-5290 or send a FAX to the same number.

#### COMING UP:

Meeting Apr. 17 from 1-3 PM, and from 7-9 PM  
Meeting May 15 from 1-3 PM, and from 7-9 PM  
Meeting June 19 from 1-3 PM, and from 7-9 PM

Mark your calendars. More details will be given to you from your phone committee contact person.

### HISTORY OF OZONE THERAPY

The following information was retrieved from the Internet so as to provide you with a background on ozone therapy, since we plan to have speakers on the subject at our March meeting.

This is for information only, and should not be considered as medical advice. It is supplied so that you can make an informed decision. Please consult with your health practitioner before considering any therapy or therapy protocol.

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The first ozone generators were developed by Werner von Siemens in Germany in 1857, while 1870 saw the first report that ozone was being used therapeutically to purify blood by C. Lender in Germany. There is evidence of the use of ozone as a disinfectant from 1881, mentioned by Dr. Kellogg in his book on diphtheria.

In October of 1893, the world's first water treatment plant using ozone was installed in Ousbaden, Holland, and today there are over 3000 municipalities around the world that use ozone to clean their water and sewage.

In 1885, the Florida Medical Association

published "Ozone" by Dr. Charles J. Kenworthy, MD, detailing the use of ozone for therapeutic purposes.

In September 1896, the electrical genius Nikola Tesla patented his first ozone generator, and in 1900, he formed the Tesla Ozone company. Tesla sold ozone machines to doctors for medical use.

In 1898, the Institute for Oxygen Therapy was started in Berlin by Thauerkauf and Luth. They injected ozone into animals and bonded ozone to magnesium, producing Homozon.

Beginning in 1898, Dr. Benedict Lust, a German doctor practising in New York, who was the originator and founder of Naturopathy, wrote many articles and books on ozone.

In 1902, J.H. Clarke's "A Dictionary of Practical Materia Medica", London describes the successful use of ozonated water in treating anemia, cancer, diabetes, influenza, morphine poisoning, canker sores, strychnine poisoning and whooping cough.

In 1911, "A Working Manual of High Frequency Currents" was published by Dr. Noble Eberhart, MD. Dr. Eberhart was head of the Department of Physiologic Therapeutics at Loyola University. He used ozone to treat tuberculosis, anemia, chlorosis, tinnitus, whooping cough, asthma, bronchitis, hay fever, insomnia, pneumonia, diabetes, gout, and syphilis.

In 1913, the Eastern Association for Oxygen Therapy was formed by Dr. Blass and some German associates.

During World War 1, ozone was used to treat wounds, trench foot, gangrene and the effects of poison gas. Dr. Albert Wolff of Berlin also used ozone for colon cancer, cervical cancer and decubitus ulcers in 1915.

In 1920, Dr. Charles Neiswanger, MD, the President of the Chicago Hospital College of Medicine published "Electro Therapeutical Practice". Chapter 32 was entitled "Ozone as a Therapeutic Agent."

In 1926, Dr. Otto Warburg of the Kaiser Institute in Berlin announced that the cause of cancer is lack of oxygen at the cellular level. He received the Nobel Prize for Medicine in 1931 and again in 1944, the only person to ever  
(continued on p. 4)

(Ozone Therapy continued from p. 3)

receive two Nobel Prizes for Medicine. He was also nominated for a third.

In 1929, a book called "Ozone and Its Therapeutic Action" was published in the U.S. listing 114 diseases and how to treat them with ozone. Its authors were the heads of all the (continued on p. 4) leading American hospitals.

The Swiss dentist E.A. Fisch was using ozone in dentistry before 1932, and introduced it to the German surgeon Erwin Payr who used it from that time forward.

In 1933, the American Medical Association, headed up by Dr. Simmons set out to destroy all medical treatments that were competitive to drug therapy. The suppression of ozone therapy began then, and it continues in the US to this day.

Aubourg and Lacoste were French physicians using ozone insufflation from 1934-1938.

In 1948, Dr. William Turska of Oregon began using ozone, employing a machine of his own design, and in 1951, Dr. Turska wrote the article "Oxidation" which is still relevant today, and is included in our booklet. Dr. Turska pioneered injection of ozone into the portal vein, thereby reaching the liver.

From 1953 onward, German doctor Hans Wolff used ozone in his practice, writing the book "Medical Ozone", and training many doctors in ozone therapy.

In 1957, Dr. J. Hansler patented an ozone generator which has formed the basis of the German revival of ozone therapy over the last 35 years.

In 1961, Hans Wolff introduced the techniques of major and minor auto-chemotherapy.

In 1977, Dr. Renate Viebahn provided a technical overview of ozone action in the body.

In 1979, Dr. George Freibott began treating his first AIDS patient with ozone, and in 1980, Dr. Horst Kief also reported success treating AIDS with ozone.

In 1987, Dr. Rilling and Dr. Viebahn published "The Use of Ozone in Medicine", the

standard text on the subject.

In 1990, the Cubans reported on their success in treating glaucoma, conjunctivitis and retinitis pigmentosa with ozone. In 1992, the Russians revealed their techniques of using ozone bubbled into brine to treat burn victims with astounding results.

Today, after 125 years of usage, ozone therapy is a recognized modality in sixteen nations.

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## Research Update

From the Internet

A great deal of activity is ongoing in the development of new diagnostics, treatments and vaccines for the viral hepatitis in the United States and around the world. Several pharmaceutical companies involved in research and development have provided information on the status of their investigations.

AMGEN - Will soon be filing for approval of consensus interferon, called INFERGEN, a treatment for Hepatitis C.

CHIRON - is in the final stages of preparing to begin clinical trials for a Hepatitis C vaccine. Preclinical results have shown promise for this vaccine in preventing HCV disease. If effective, trials will require five years to complete.

ROCHE - anticipates approval of ROFERON for both Hepatitis B and Hepatitis C later this year.

SCHERING PLOUGH - has agreed to pay ICN a \$23 million licensing fee to have the rights to market ribavirin for Hepatitis C. Clinical trials for the combined use of alpha interferon and the antiviral drug ribavirin for Hepatitis C are being planned.

SciCLONE PHARMACEUTICALS - Phase III of clinical trials on thymosin alpha, with the trade name Zadaxin, have been completed for Hepatitis B and a combination therapy trial for Hepatitis C with Zadaxin and alpha-interferon is being conducted.