AWISH

Arthritis West Island Self Help Association

www.awishmontreal.org

Joint Effort Newsletter

Spring 2024 Edition

In your community

37 years

Since 1987

WE NEED YOUR HELP

VOLUNTEER

DONATE

BECOME A MEMBER

Annual Membership:

Single $25 | Family $30

In This Issue…

Arthritis West Island Self Help Association

640 Lakeshore, #103
Dorval, QC, H9S 2B6

514-631-3288

arthritis@awishmontreal.org

www.awishmontreal.org

Reg'd #: 89055 8893 RR0001

facebook

AWISH Presents…

ARTHRITIS RENDEZ-VOUS 2024 ITS IMPACT TODAY

Information Day on Arthritis & Community Services

Sunday, March 24th 2024 10:00am – 4:00pm

Sarto-Desnoyers Community Centre – 1335 Lakeshore, Dorval

GUEST SPEAKERS

10:30am - New Studies on Rheumatoid Arthritis Dr. Marie Hudson, MD, MPH, FRCPC

1:15pm - Improving Pediatric to Adult Care - Transition in Young Adults with Rheumatic Diseases Dr. Elizabeth M. Hazel, OLY, MDCM, FRCPC, MM

2:30pm - Taking Care of Mental Health and Care Givers Jessica Schiff, MSW

MEDICAL INFORMATION

ASK THE DOCTOR | ASK THE PHARMACIST

FREE ADMISSION & PARKING - COFFEE & MORE!

All donations/proceeds go to arthritis support and education in the West Island & surrounding areas – THANK YOU

*** CASH ONLY ON-SITE ***

DOOR PRIZES

+ FREE TICKET if you complete the anonymous SURVEY on-site (your opinion of this event) and receive a chance to win!

COMMUNITY KIOSKS

Christian Aubert
Financial Advisor
Conseiller financier

CRC Ouest-de-l'Île West Island

RE/MAX remax-quebec.com KAREN KURTZ

Canada Revenue Agency | Agence de revenu du Canada

Table de Quartier Sud

Société Alzheimer Society Montréal

TQN

santé • health NOVA Ouest de l'Île west island

SPVM

WITT

PHARMAPRIX Jardins Dorval Gardens

Résidence de soins palliatifs Teresa-Dellar

Kiwanis Lakeshore Montreal

Wiaih services • support • leadership

ABOVAS Accompagnement bénévole de l'Ouest / W.I. Volunteer Accompaniment Service

SOMNOLENCE CANADA FOUNDATION/ FONDATION SOMNOLENCE CANADA

Amis de la santé mentale Friends for Mental Health

Guest speakers will present in English followed by a bilingual Q&A.
Some kiosks have limited hours & posted information is subject to change. Contact AWISH for more details.

Want to become a member? Volunteer your time? Need someone to talk to?
Would you like additional information? Wish for an in-person presentation? Please let us know!

YOU, YOUR CHILD AND ARTHRITIS

(Source: The Arthritis Society – sponsored by TD Bank Financial Group)

Arthritis is not just a disease of old people. In fact, approximately 1 in 1,000 children under the age of 16 suffer from arthritis, making the disorder more common than most chronic childhood disorders, including cystic fibrosis and diabetes. Previously, chronic childhood arthritis was referred to as juvenile rheumatoid arthritis (JRA) but arthritis in children is quite different from adult rheumatoid arthritis and is not always associated with the presence of an arthritis associated autoantibody known as the rheumatoid factor. As a result, many people now refer to chronic childhood arthritis as juvenile idiopathic arthritis or JIA. Idiopathic simply means 'unknown' and is used when other known illnesses known to cause arthritis are ruled out such as infections, injuries, cancers and other related rheumatic/autoimmune disorders (lupus, dermatomyositis, vasculitis). While research has not yet provided us with a cure for childhood arthritis, there is effective therapy.

Children, who are followed closely, monitored carefully and adhere to the recommended treatment provided by a multidisciplinary team do best overall and most are able to participate in normal activities and have a bright future. Expanding research initiatives and the availability of more effective medications will allow us to do even better with this disease.

Once your child has been diagnosed as having arthritis, the overall treatment plan will be coordinated by your child's doctor, and will include medication and rehabilitation therapy. An exercise program, specially designed by your child's doctor and therapists, is one of the cornerstones of treatment. Even if arthritis does cause joint damage, the bones and cartilage of growing children have amazing abilities to heal. Exercise helps prevent loss of joint movement and encourages normal growth.

There are seven (7) major subtypes of Juvenile Idiopathic Arthritis:

- **Oligoarticular – Persistent JIA**
- **Oligoarticular – Extended JIA**
- **Polyarticular – RF negative JIA**
- **Polyarticular – positive JIA**
- **Systemic JIA**
- **Enthesitis – Related Arthritis**
- **Psoriatic arthritis**

Oligoarticular – Persistent JIA:

Name given to the most common and general mildest form of JIA. Oligoarticular (and sometimes called pauciarticular) means involvement of fewer joints (4 or fewer joints). Children are classified as having oligoarticular – persistent JIA if beyond 6 months after the initial start of arthritis, there is involvement of no more than 4 different joints throughout the course. Girls are affected much more commonly than boys. It usually starts in children four year of age or younger. The most commonly affected joints are the knee, ankle, wrist and elbow. May involve flares and remissions but with appropriate treatment, there is rarely permanent damage to the joints. In fact many affected children will be in permanent remission within a few years after the onset of the disease.

Up to 20% of children with oligoarticular-persistent JIA will eventually develop uveitis. Therefore, all children with OP-JIA should have a regular, routine slit-lamp examination of their eyes at least three or four times a year for the first few years after diagnosis. In children who develop eye inflammation, the blood test for antinuclear antibody (ANA is almost always positive. The ANA blood test therefore helps to identify those children who will require frequent eye checks.

Continued on page 4

Arthritis West Island Self Help Association

SEASONAL CALENDAR – SPRING 2024

For more information on our programs and activities, please contact us.

www.awishmontreal.org | 514-631-3288 | arthritis@awishmontreal.org

ARTHRITIS RENDEZ-VOUS 2024

SEE PAGE 1 FOR MORE DETAILS **Sunday, March 24 2024 10:00am – 4:00pm**

Sarto-Desnoyers Community Centre - 1335 Lakeshore, Dorval, H9S 2E5

EXERCISE CLASSES – pre-registration is required

Income Tax Receipts issued upon request

DORVAL
Sarto-Desnoyers Community Centre - 1335 Lakeshore

WEDNESDAY - MORNING	WEDNESDAY - AFTERNOON
11:00am – 12:30pm	1:00pm – 2:30pm

April 3rd - June 5th

10 weeks | $65 AWISH member | $75 non-member

DDO
DDO Civic Centre
12001 De Salaberry Boulevard

FRIDAY

11:00am – 12:30pm

10 weeks: April 5th - June 7th

$65 residents of DDO & AWISH members 55+

PIERREFONDS
Gerry-Robertson Community Centre
9665 Boulevard Gouin Ouest

TUESDAY	THURSDAY
10:30am – 12:00pm	10:30am – 12:00pm
April 2nd - June 4th	April 4th - June 6th

10 weeks | $58 AWISH member | $67 non-member

Led by certified, professional fitness instructors. Well designed to meet individual needs and abilities.
Joint and muscle-friendly whole-body exercises, including resistance, aerobics and stretching.

Some programs/activities are free for AWISH members - others require a charge to cover expenses. Payment is required at least 2 weeks prior to the start date to ensure sufficient participation. Contact AWISH for cancellation policy, to register & for more information.

SOCIAL BRUNCHES are held every 3rd Sunday of each month. Please contact the office for more information. We hope you'll join us for a good meal & good conversations!

CARING & SHARING SUPPORT GROUP with a Psychologist
We hope to be able to offer this soon!

YOU, YOUR CHILD AND ARTHRITIS Continued from page 2

Polyarticular – Rheumatoid Factor Negative Juvenile Idiopathic Arthritis:

Children with polyarticular-RF negative JIA have many joints (five or more) involved within the first 6 months of disease but without a positive blood test for rheumatoid factor (RF). This type of juvenile idiopathic arthritis can begin at any age, and usually, the arthritis starts in several joints at the same time. It is more common in girls than in boys. Occasionally it will begin in only one or two joints, and then spread to other joints. Of special note, two joints that may become involved in this type of JIA are the temporomandibular joint (TMJ) and the cervical spine (neck). TMJ arthritis can lead to limited jaw opening and affect chewing as well as cause abnormal growth of the jaw leading to a small chin. Your child's doctor will check if these two joint are affected (physical examination and X-rays when indicated) and inform you and your child of any further management and precautions if necessary. The duration of polyarticular JIA varies from six months to many years. In general, the arthritis runs a course that lasts several years. Interference with growth is less of a problem in polyarticular JIA than it is in systemic JIA and inflammation internal organs is rare.

Systemic Juvenile Idiopathic Arthritis:

This form of JIA affects the body generally with fever and can affect the child's internal organs as well as joints and skin. Systemic JIA can begin at any age and affects boys and girls equally. It usually involves many different joints and some joints may have severe disease. Children with systemic JIA have spiking (rapidly rising and falling) fever, which usually occurs once (or sometimes twice) a day, and a rash that frequently comes and goes with the fever. The rash usually appears as pale red spots on the child's chest, upper arms, thighs and other parts of the body. In addition, they often have swollen lymph glands, and enlargement of the liver and spleen. They appear listless and unwell during the fever (most often in the late afternoon or evening), only to brighten up by the next day as their temperature returns to normal. When fever in systemic JIA persists for several weeks, the child will be weak, lose weight and may become pale from anemia (a fall in the level of hemoglobin in the blood). Flares that last a long time may also interfere with growth, although the growth usually improves as the child's condition improves. Inflammation of internal organs may cause stomach pain or affect the heart or lungs but will not cause permanent damage.

In the early stages of systemic JIA, there is sometimes no sign of joint inflammation. This may make it a very difficult disease to diagnose because there are many other illnesses that also cause a fever and rash in children. Therefore, many tests are done. The arthritis usually appears with the first six month after the start of the fever, and usually persists, even when the fever settles. The arthritis may be mild or severe, and may involve just a few, or many joints. However even severe forms of arthritis sometimes go into remission within a few years. If the arthritis does not go into remission, it will follow a pattern of "ups and downs" that is different for each child. In most cases, the pattern will gradually become less severe.

Occasionally, as with all forms of JIA, flares may occur after the disease has been inactive for a long time.

Medications used to treat children with systemic JIA will include drugs that control not only the arthritis but also the systemic part of the illness, such as the fever and anemia. Uveitis is uncommon in systemic JIA but children should still have their eyes examined annually.

WELLNESS THROUGH JOURNALING

Hélène Brunet – Owner of Ink Well Journaling, B.A. Honours, Certified Therapeutic Writing Institute in Denver, Colorado with more than 30 years of journaling experience.

BENEFITS OF JOURNALING

- Self-discovery
- Insight
- Intuition
- Self-empowerment

JOURNAL WRITING WILL:

- Provide focus and insight
- Release emotions
- Clarify goals
- Uncover your intuition
- Reduce stress
- Tap into your creativity
- Enhance your self-esteem

JOURNAL WRITING HEALTH AND WELLBEING:

- Joy, self-expression, and improved health
- Help a senior cope with change and express difficult emotions
- Improves health and self-esteem
- Can dissipate anger
- Can ease depression
- Can prevent illness

Arthritis West Island Self Help Association

PRESIDENT'S MESSAGE

Dear Members, Friends and Faithful Supporters of AWISH!

We are now into the 3rd month of 2024 with a bright future ahead of us! AWISH was founded in 1987 and here we are in 2024 planning for many more years of helping those diagnosed with one of more than 100 forms of Arthritis.

Even though Juvenile Idiopathic Arthritis is not part of our core Mission, I have always been concerned personally which is why this issue contains general information to educate those who still believe that arthritis is a disease for our older generation only. Thanks to Dr. Marie Hudson's assistance, another of our keynote speakers at our **ARTHRITIS RENDEZ-VOUS 2024** is Dr. Elizabeth M. Hazel , OLY, MDCM, FRCPC, MM.

I have devoted my time to not only Administer AWISH with a dedicated Board of Directors, but also being the ambassador within the West Island Community. In 2023, I was able to attend 105 meetings and events to continue learning more about what is happening in our community and to educate the public about arthritis and chronic pain. I'm always amazed at how little some understand this disease.

Reality is of course that I can't be everywhere physically – SO – we've decided to endorse new marketing/communications strategies. The major decision was to work on a new website with all the modern applications possible to reach as many people as possible. Our goal was also to reach out to those actively employed and unable to attend or participate in our events/programs. We still need to add technical knowledge/tools in order to offer Webinars, live-stream on our website and other modern applications.

I owe an immense amount of gratitude to the members of our Communications Committee: Jean Roger, Sam El-Toka and Lee Royko who dedicated hundreds of hours on a Business Plan and to finally have a finished new website. Thank you to André Laperrière who was involved with our Business Plan and translation. The official launch will be done as soon as the translation is available. One of our most loyal volunteers in helping us understand certain functions and needs is Jennifer Sarrasin, a member of Kiwanis Club of Lakeshore Montreal that I met while they initiated their own new website. Jennifer and I became a perfect team and we both realized that we held a mutual respect for each other's organizations and dedicated towards a successful launch of our own website. AWISH and Kiwanis are mutual partners since 2010 – AWISH gets to help raise money for all Kiwanis' causes, supporting 21 organizations involving 98% of children and youth programs and services as well as food banks etc.

AWISH needs continued financial support to maintain not only its current programs and services, but to offer new ones. **ARTHRITIS RENDEZ-VOUS 2024** is our major project. The 2nd project we are trying to initiate is to revitalise the **Caring and Sharing Support Group** that was passionately animated for many years by Margaret-Ann Nielsen. Having noticed that mental health has become a major concern in our society by those constantly suffering from pain, isolation and the effects of Covid-19, we are planning to start a new group animated by a certified Psychologist who is trained in dealing with mental health and chronic pain. Hopefully, we can launch this group in April.

TOGETHER, WITH YOUR SUPPORT – AWISH WILL STRIVE FOR MANY MORE YEARS IN THE COMMUNITY.

What does it mean to FOSTER RELATIONSHIPS?

(Source: Mouvement Santé Mentale Québec – etrebiendanssatete.ca)

To Foster Relationships and hold each other close implies:

- Being a part of a welcoming society
- Developing and maintaining relationships that make us feel good
- Developing our capacity to build networks that reflect our values
- Having activities and projects
- Defending causes alongside others
- Receiving support in our journeys and supporting others in theirs
- Knowing that we can count on someone and that others can count on us
- Experience a sense of belonging and solidarity
- Building robust social networks for both individuals and communities

COMMUNITY CALL TO ACTION - VOLUNTEERS & SUPPORT NEEDED

AWISH is looking for volunteers to actively participate as a member of the Board of Directors.

Our charity is particularly in need of skilled individuals willing to take leading roles in:

- **Fundraising and donor relations**
- **Community outreach and member relations**
- **Communications and marketing, including increasing online and social media presence**
- **Program management and development**

Positions are for a renewable 1-year term with a 6–month probationary period.

Knowledge of arthritis is not a requirement.

Experience in a similar position at another non-profit organization would be an asset, but not essential.

Board members must also be AWISH members ($25 - annual membership)

www.awishmontreal.org | 514-631-3288 | arthritis@awishmontreal.org

MANY THANKS TO OUR SUPPORTERS!

It is with their continued support that AWISH is able to better serve the community.

Please contact us today to find out how you can help.

DORVAL

partageaction West Island Community Shares

PHARMAPRIX Jardins Dorval Gardens

The Dr. J. David & Doris Roger Family Fund

VILLE DE CITY OF DOLLARD-DES-ORMEAUX

PME MTL OUEST-DE-L'ÎLE

Anonymous Legacy

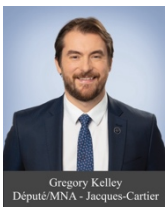
AWISH members

Les Anciens de Dorval Oldtimers Fondé en/Established in 1968

Railroaders in the community CN

CAISSE DE BIENFAISANCE DES EMPLOYÉS ET RETRAITÉS DU CN

CN EMPLOYEES' AND PENSIONERS' COMMUNITY FUND



Agence de la santé et des services sociaux de Montréal Québec

Kiwanis LAKESHORE MONTREAL

Les Anciens Oldtimers Pointe-Claire

BEACONSFIELD

Pierrefonds Roxboro

Joint Effort is a quarterly publication. All articles, at times translated and edited, are presented for your information and do not necessarily reflect the opinion of AWISH. We recommend you consult your doctor if you have any questions about diagnosis or treatment.