

Multiple
Sclerosis
Society of
Canada

Société
canadienne
de la sclérose
en plaques



BC Bulletin

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SPRING 2004

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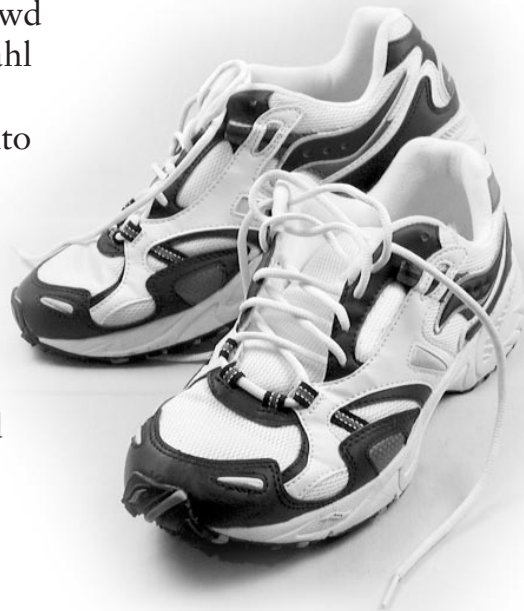


▲ Lori Wickdahl

BC woman becomes first woman with a disability to walk across Canada

On February 8, amidst a crowd of supporters, Lori Wickdahl emptied a bottle of water from the Atlantic Ocean into the Pacific Ocean at English Bay, Vancouver, to symbolize the end of her Trans Canada Trek for MS. Lori left Confederation Bridge in New Brunswick on May 1, 2003, and has since walked 6,430 km in an effort to fight the debilitating effects of multiple sclerosis. This remarkable achievement is despite the fact that just a few years ago she was bedridden because of MS.

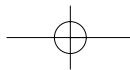
Lori's journey started in February 2002, when she found herself alone and needed to walk to the store. Although this short trip took her several hours, it was the beginning of a much longer journey. She



began walking a couple of times a week and gradually built up to walking every day. On December 31st, she added up all of her walks and found that she had walked over 3,000 km without actually going anywhere! That is when she decided to walk across Canada.

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Editorial Statement

The MS Society believes strongly in the freedom of speech and the right of all sides of an issue to be heard. The editors and authors endeavour to provide relevant and up-to-date information about multiple sclerosis.

The MS Society does not approve, endorse or recommend specific products or services, but provides information to assist people in making their own decisions. For specific, personalized information, please consult your physician or other healthcare professional.

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***Our mission:** To be a leader in finding a cure for multiple sclerosis and enabling people affected by MS to enhance their quality of life.*

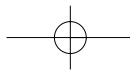


Nationwide Client Service study

The MS Society of Canada is undertaking a nationwide Client Service study to determine what programs and services are most valued by the people the Society serves. This survey is targeted specifically at children and adults who are:

- people with a confirmed diagnosis of MS
- people waiting for a diagnosis with respect to MS
- people in close relationship to a person who has MS
- unpaid caregivers to a person who has MS

The survey is available online from www.mssociety.ca and will be in the February issue of MS Canada. By the end of February, paper copies will be available from the BC Division office. Thank you in advance for your participation!



New Logo for the MS Society of Canada



The MS Society of Canada has rolled out its new logo! While there is a new look for the logo, it still includes the well-recognized broken MS and SP symbols. The process to update the MS Society logo and wordmark (our name) began a number of months ago. It involved volunteers and staff in all divisions.

Why update? There were a number of reasons. While surveys showed the broken MS and SP had a high recognition factor, they also found sometimes the logos and wordmark were being used incorrectly.

Another reason was our need to move to 21st

century technology. The last time we updated our logos was in the early 1990s, and the version developed then is not capable of meeting our current needs, such as for use in desktop publishing.

When staff and volunteers found it hard to use the logo and wordmark, they sometimes created something that looked similar. Unfortunately, at times these versions were incorrect.

The new logos have a bar above and below the familiar broken MS or SP logo. The breaks in the logos symbolize how the signals from the brain to the body are disrupted due to multiple sclerosis.

Thinking of visiting us in our new office?

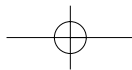
Here is what you need to know about parking in the area. There is underground parking in our building at \$1.00 per hour, up to \$4.00 per day, with access one block south of Kingsway. There is metered parking on all four sides of our building. If you have a valid handicap placard you can park free at any meter in Burnaby with no time limit. This means that even though the meters state a three hour maximum you can park as long as you like. The only exception is if there are parking limitations. For example, on Kingsway there is no parking between 4-6 pm in the curb lanes. If you park between 4 and 6 you will be ticketed and possibly towed even with a handicap decal! We hope you can come visit!

BC Division and LMC offices move to Burnaby

We did it! The BC Division and Lower Mainland Chapter offices were successfully moved from our downtown location to our new home in Burnaby on December 13. We are now located on the 15th floor of the GVRD building at 4330 Kingsway, just west of Metrotown. We would love for you to come and visit us!



▲ Board member Janene Spring, MP Svend Robinson, MLA John Nuraney, and Manager of Government and Community Relations Cynthia McEwan at the Open House on Friday, February 6



MS Society Hosts Annual Recognition Event

—by Jodi McIsaac, Manager of Communications

One of my first “tasks” as the new Manager of Communications for the BC Division of the MS Society was to attend the 2003 Recognition Event on October 30. I could not have had a more wonderful introduction to the people and the cause that we are all fighting for: a future free from MS. Every speaker, every volunteer and every story I heard increased my sense of the enormity of our cause and made me realize how privileged I am to be part of this team.

David Kincaid of CityTV, who kept the agenda flowing smoothly with wit and grace, emceed the evening. Singer/songwriter Robert T. James, who shared the story of his sister’s struggle with MS, entertained the guests with two songs and also gave a free CD to all in attendance.

The speakers were inspirational and each addressed a particular aspect of multiple sclerosis. Dr. Helen Tremlett from the UBC MS Clinic spoke about the importance of scientific research. Brenda Worthington moved the audience with her personal story of living with MS

—continued on page 5



▲ Fundraising superstars of the Lower Mainland!

Award Winners

Division Award of Merit, Non-Member: Davis and Company and Salvation Army Pro Bono Program

Division Award of Merit, Member: Ron Briggs and Ron Jones

Opal Award for Caregivers: Jack Smith

President’s Award: Gabrielle Veto

Super Cities

WALK/Run For MS:

Top Fundraiser:

Wendy Baker

Runner Up Fundraiser:

Joe Frank

Top Rookie Fundraiser:

Ken Carlson

Top Fundraiser Age 12 and under: Paige Craven

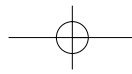
Top Friends & Family

TeamMS: Westside

Wobblers -Team Captain:

Mary Bobinski

—continued on page 5



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and the triumphs of spirit she has experienced. Awards were given to volunteers, fundraisers, and others who have contributed in a significant way to the work of the Society (see sidebar for details!). The evening was closed by an emotional speech by President's Award

recipient Gabrielle Veto. The President's Award is the top award recognizing the valuable contributions of persons with MS within the MS Society of Canada. Many thanks to all who made such a delightful evening possible. I am sure that my eyes were not the only ones opened that night.

MS researcher Dr. Helen Tremlett spoke at the Recognition Dinner about the importance of MS research. Below are some of her comments from that evening:

“The MS Society of Canada funds research into the disease to the tune of \$6 million annually. This covers every aspect of research into MS at institutes throughout Canada.

This evening I would like to give you a snapshot of some of the research at UBC that has been generously supported by financial

contributions from the MS Society. We really are so fortunate to have the MS Clinic, a world-renowned center of excellence in the field of MS research right here in BC. This reputation for excellence is in no small part the result of the generosity of the MS Society and its patrons.”

MS Clinic research includes:

- Genetic aspects of MS
- Drug therapy
- Magnetic Resonance Imaging
- Treatment retention

“At UBC, with the support of the MS Society, we are striving to better understand the disease, a pre-requisite in the search for a cure. In addition, a better understanding of drug therapy and its side-effects allows us to improve the quality-of-life of people with MS at this

present time. I hope this illustrates to you the importance of funding research into MS. As global funding for research shrinks, the competition for these limited funds intensifies. The importance of a charity that exclusively supports MS research is paramount.”

Award Winners

—continued

Top Corporate TeamMS:

Royal Bank Langley -Team Captain: Joe Frank

Top Rookie TeamMS: DM

For MS - Team Captain: Dianne Mack

MS Bike Tour:

Top Fundraiser: Laura Suhner

Top TeamMS: Scott Construction

Top Rookie TeamMS:

Team Latin

Top Rookie Fundraiser:

Sheryl Wood

Top Rookie Fundraiser

under 18: Bryce Wilson

Top Online Fundraiser:

Michael Hennessey

MS 100 Hole Golf

Challenge:

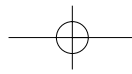
Top Fundraiser: Jonathon Rees

Runner Up Fundraiser:

Soren Schou



▲ Dr. Helen Tremlett



BC woman with MS becomes first disabled woman to walk across Canada

—continued from page 1



► Lori Wikdahl with BC Division staff and members of the Board

▼ Lori Wikdahl speaks with reporters after the triumphant finish of her 6,430 km journey to English Bay

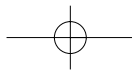


Lori says, “MS has limited my control and ability to use my hands and legs. It’s created perception and pain problems that limit my reading, writing, thinking, and even social interaction. I no longer enjoy or pursue 95% of the things I used to do – but I can walk!”

On average, Lori has walked 35 km per day for 6 days per week since the

beginning of May. En route, she has raised money for a cure and also raised awareness about MS. She has met with and encouraged local MS support groups and has been a popular guest on radio, television and in the print media. “Walking has given me a quality of life I no longer thought possible. Walking away from MS is my dream, and I hope I will help others,” she says.

Donations can be made at any Royal Bank branch across Canada care of the MS Society – Lori Wikdahl Trans Canada Trek using account number 504-718-8, branch 03040, through the MS Society website at www.mssociety.ca/bc/lori_trek.htm or by calling the Society at 1-800-268-7582.



Laughing and crying at the same time...out of joy!

—by Brenda Worthington

Jennifer Paszkat, 27, wants to encourage others with MS to believe in their dreams. A music teacher and hobby figure skater, she is a shining example. I spoke with her and asked her to share her story.

Brenda: When did MS enter your life?

Jennifer: I was diagnosed after my fourth year university. Three days after the competition necessary for my music program, one finger became numb. As I had been practicing flute five hours daily in preparation, I dismissed it. Within a week my whole body was numb and my legs were growing weak. A neurologist said, even before proof of an MRI, he felt it was MS. Over that summer I had a debilitating attack, moved home, and got permission to change universities and take my courses there. By fall I was almost well. After a year, I moved from Ontario to Vancouver and took my teacher's certificate. I believe that life is not over because of MS, but rather a new beginning, as I now cherish things I love the most.

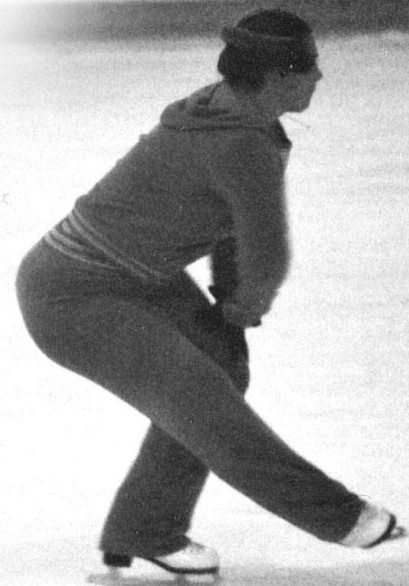
B: Tell us about your involvement in figure skating.

J: I started skating at 5 years of age, and worked at the local arena through high school and summers while in university. I enjoyed coaching for Special Olympics, which developed into a passion.

B: Have you been able to pursue your interests in teaching and skating even with MS?

J: After only one month on call in Surrey, I got a full time position, teaching music to children from kindergarten through grade four. I signed my contract on my birthday. What a great present! I enrolled in the Special Education Program, and hope to complete my diploma next December.

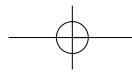
In November 2003, I heard about the National Adult Figure Skating Championships in Burnaby this March. With a coach, and three days of practice weekly, I am trying my best.



B: Sounds like you are holding on to your dreams!

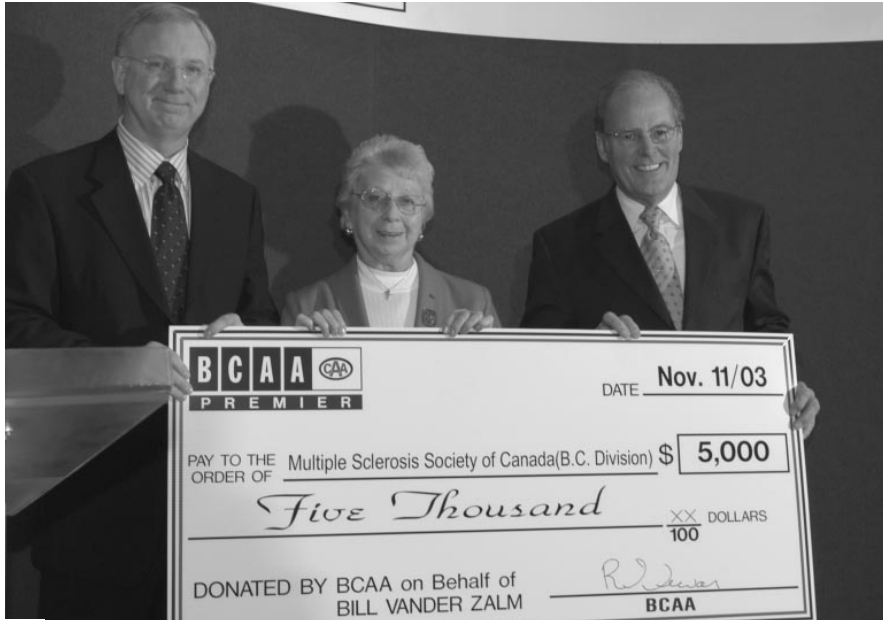
J: I was told not to become a teacher. I was told not to skate. The first time I stepped on the ice after my diagnosis I fell because my legs were wobbly. I sat there, crying and laughing at the same time: not out of fear but out of joy. I remember thinking, "I can do this!"

We wish Jennifer the best of luck in March. Regardless of the outcome, she is already a winner.



Former Premier Vander Zalm donates BCAA fee to the MS Society

—by Lisa Fratpietro, Manager, Major Gifts/Planned Giving



▲ Former Premier Bill Vander Zalm with the MS Society's Irene McKenna and BCAA's Chief Operating Officer Rod Dewar.

You may have seen the ads on TV – Bill and Lillian Vander Zalm trapped on a desolate country road in somewhat of a bind. Their vehicle has broken down and if they had only taken a membership in the new BCAA Premiere program things may not be so bleak. What you may not know is that Mr. Vander Zalm has donated his fee from the BCAA TV ads to the MS Society to help fund vital research into finding a cure for MS.

Why did Mr. Vander

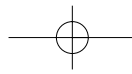
Zalm choose the MS Society to be a recipient of the funds? He answers, “There are many extended families out there that have in some way been affected by MS. Most of us have had a friend that has been diagnosed.” One of Mr. Vander Zalm’s favorite cousins in Holland had five children, three of whom lived with the challenges of MS. The Vander Zalm’s experienced the impact that this disease has on family. “We looked into things that could be done to help,” he states. “We explored new therapies

and investigated options in alternative medicine.”

The MS Society of Canada has been a world leader in funding projects related to MS. Through Dr. Dessa Sadovnick’s work at UBC, we now know the risk factor related to MS and family history. Through donations such as Mr. Vander Zalm’s, we are able to find the answers to the mysteries of MS.

Mr. Vander Zalm believes that support is paramount to finding a cure. “In a time when governments are cutting back severely, it is very important that the community participates as fully as possible.” The MS Society of Canada does not receive government funding for research initiatives. It is only through individual contributions that we have been able to commit \$20 million over the next five years to MS research.

We would like to extend our heartfelt thanks to the Vander Zalm’s for their participation and support of the MS community!



Research Update: Study Reports Possible Link Between Vitamin D and Reduced MS Risk

A new study in nurses suggests that those with higher vitamin D intake may have had a reduced risk of developing multiple sclerosis. The study included 187,563 women, including 173 with probable or definite MS, enrolled in the Nurses' Health Study, which regularly surveys female registered nurses in the United States. Women whose intake of vitamin D was greater than or equal to about 400 IU/day from supplements and food, or from supplements alone, had a 40% lower risk of developing MS than women who did not take

vitamin D supplements.

This study adds new information to ongoing research focused on a possible role for vitamin D in reducing the risk of

developing MS. There is no information in this study to determine whether vitamin D affects the course of MS once it has begun. Further research is necessary to

clarify these findings.

The normal requirement for vitamin D is 200 to 400 IU daily for adults and adolescents from both food and vitamin supplement sources. Excessive intake of supplemental vitamin D can have serious, toxic effects.

For more information, view the complete study at www.mssociety.ca.

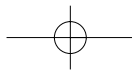


A future free from MS is yours to give

MS Bequest
Week

May 24th to 28th, 2004

1-866-MSWILLS • www.msplannedgiving.ca



The Littlest Patients – Kids Face Special Challenges

—By Brenda L. Banwell, M.D.

It's a sad fact that kids and teens can get multiple sclerosis (MS) too. About one in 20 MS patients has his or her first symptoms before the age of 16, with one in 200 under age 10. While MS in adults strikes mainly women, boys and girls are almost equally affected.

How to Spot It

In just over one-half of children with MS, the earliest hint is a single symptom that lasts a short time, such as blurring or loss of vision in one eye, or weakness or numbness on one side. Or they may experience symptoms of brainstem dysfunction, for example, double vision or poor balance.

But many kids first develop a set of symptoms that includes fever, sleepiness and problems with the nervous system, and may be correctly diagnosed with a condition called acute disseminated encephalomyelitis (ADEM). Some of these children go on to develop a second event and then meet the criteria for MS, so ADEM or an ADEM-like illness may, in fact, be the first sign of MS.

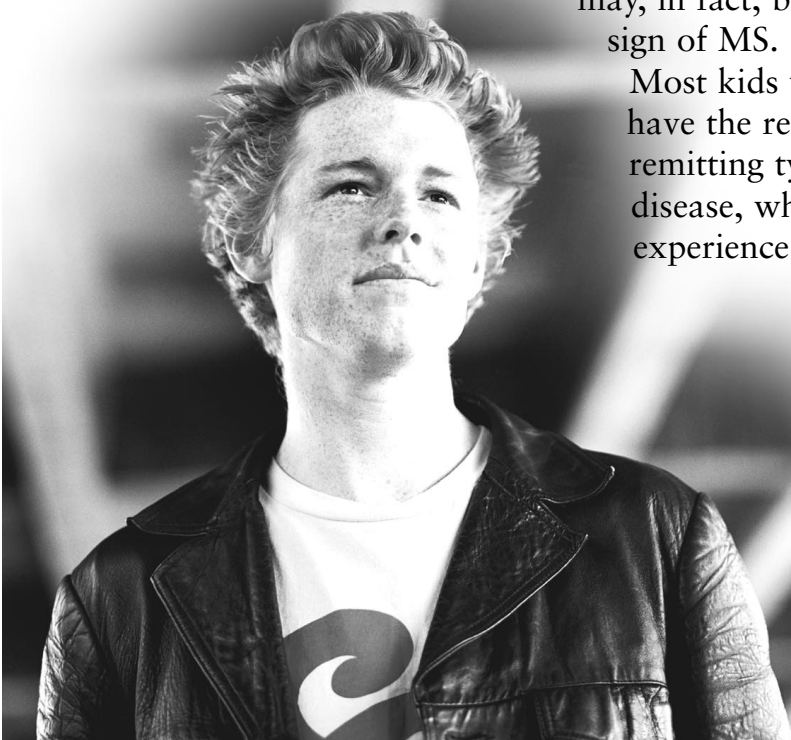
Most kids with MS have the relapsing-remitting type of the disease, while a few experience the

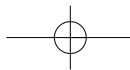
primary progressive or even secondary progressive forms. It's not clear whether MS in children is more or less severe than in adults, and we really don't know the prognosis for pediatric MS.

Many adults with MS say that fatigue is the most disabling feature. We don't know if kids agree, for 42% of them report they feel tired a lot.

Special Problems for Kids

Slower thinking and difficulties with problem solving, concentration and memory are common in MS, especially in children. Kids who've had the disease longer tend to have more problems than those diagnosed more recently. They're generally able to stay in regular schools, but may have special needs. They might have a hard time grasping orally presented





information, struggle to memorize long lists, or do poorly on tasks that require planning or organization. Because these learning difficulties can become overwhelming in high school as workloads increase, it's important to get help from teachers or tutors when needed.

Treatment Options

For relapses or attacks severe enough to interfere with daily life, corticosteroids (by injection, then pills) are the mainstay. Brief courses of steroids are well tolerated by kids with MS. The duration of the therapy is kept to a minimum to reduce the risk of osteoporosis (thinning of the bones), and to avoid the impact of steroids on a child's growth, which the drugs can slow down. If these therapies don't work, or if a child can't take them, intravenous immune globulin may help.

An important newer weapon against MS is treatment that actually prevents relapses by affecting the immune

system, "disease-modifying" agents, such as the interferons and glatiramer acetate. In adults, it's crucial to start this therapy early in the disease, so we're beginning to use it more in kids. After talking with the patient and the family, we set up an individualized treatment program. Since immunomodulatory therapies have to be injected, parents usually have to learn how to give the shots, although some teens can do it themselves.

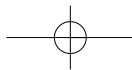
Staying Positive

Coping with a chronic and sometimes disabling illness like MS is obviously very stressful. Although we don't have the exact numbers on kids, we do know that almost one-third of adult MS patients suffer from depression. This makes emotional support a vital part of MS therapy at any age. As we learn more about MS in kids, we'll be able to design therapies that cater to their physical and emotional needs, helping them grow into happy, active adults.



Brenda L. Banwell, MS, FRCPC is the Director of the Pediatric MS Clinic and an Associate Scientist at the Research Institute of The Hospital for Sick Children, Toronto. She is an Assistant Professor of Pediatrics (Neurology) at the University of Toronto. Source: Compass, Vol.4, No. 1, 2003





Complementary and Alternative Medicine 101

The MS Society of Canada, BC Division, is committed to informing our members about the various options open to them regarding their health and well-being. One of these very important options is complementary and alternative medicine (CAM), also known as alternative therapy, traditional medicine, or unconventional therapy.

We have been writing about alternative therapies in the BC Bulletin for many years, but perhaps you have been newly diagnosed with MS or have never seriously considered alternative therapy as a treatment option. In this article, we endeavour to introduce or re-introduce you to the world of complementary and alternative medicine and give you some tips and guidelines for discovering if this branch of treatment is right for you.

What is CAM?

Complementary and alternative medicine (CAM) covers a broad range of healing practices. In the 1970s and 1980s, a number of treatments were promoted as an alternative to conventional health care. On the other hand, complementary therapies are used alongside or in addition

to mainstream medical treatments.

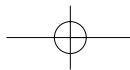
“Complementary and alternative medicine” has become the catch-all phrase to describe any therapy that is not usually accepted or used in mainstream medicine. This includes acupuncture, ayurveda, homeopathy, prayer, hypnosis, and a number of other methods. The phrase “integrative medicine” is also becoming more common, in which individual mainstream practitioners help patients combine the alternative, complementary, and mainstream health practices that are right for them.

The Tzu Chi Institute for Complementary and Alternative Medicine, which closed down in March 2003, broke CAM down into four general types. Many CAM health systems use a combination of these types. **Body therapies:** approaches that involve touch or direct

Questions to ask about CAM

There are three important things to find out about any alternative (or conventional) therapy: Is it safe? Is it effective? Do the possible benefits outweigh the possible harms? By asking the following questions and working with your practitioner, you can reach the conclusions that are right for you. It is also important to discuss any new treatment with your physician.

- Am I comfortable with the principles on which it is based?
- Can I use it along with my conventional treatment?
- What are the possible side effects?
- Will it interact with food, alcohol, or other drugs?
- Is it effective for my condition?
- Am I willing to spend the time and money required?
- How long should I use the therapy and how will I know if it is working?



physical contact with the patient's body

Mind-body therapies:

practices such as hypnosis and visualization that use the power of the mind to make positive changes in the body

Body-energy therapies:

techniques for manipulating the body's energy field to positively affect health

Body-spirit therapies: prayer, faith healing and shamanism affect both body and soul with the goal of healing.

Complementary and alternative approaches to medicine often share some core ideas about wellness and health. For example, they often promote holistic healing, which involves the mind, body, soul, and social environment. The participation of the patient in the treatment is also a key aspect. CAM often works with the body's ability to heal itself and usually has general well-being as the goal.

Who uses CAM?

In a 1997 survey conducted by Angus Reid, almost half of all Canadian adults (43%) reported they had used some form of alternative and complementary medicine and practices. Almost half of those people were between the ages of 35 and 54, and

52 percent of them reported annual incomes of \$60,000 or more. The number of CAM users was highest here in British Columbia at 56%! About half of the Canadians using CAM reported doing so for general wellness, rather than treatment of a specific problem.

Why use CAM?

People try complementary and alternative medicine for many reasons. Most people who use CAM say it fits best with their values and beliefs about life and health. Others may have had a disappointing experience with conventional medicine or are concerned about its side effects. Yet others want to gain personal control and take responsibility for some of their healing process. CAM broadens your options and can also prevent illness and/or injury by promoting general health and wellness.

Natural Doesn't Mean Safe: Risks and Cautions

- Avoid practitioners who are strongly against mainstream medicine or who insist that you use only their product (especially if it also happens to be very expensive).
- Avoid products that claim to be a miracle cure or contain 'secret' ingredients.
- CAM may interact or interfere with conventional medical treatments.
- Products derived from natural sources can have potent effects and should be used with the same care as other medicines.
- Herbal medicines and supplements are not regulated like prescription drugs. There may be a greater chance that they are mislabeled, impure, or contaminated.
- Many CAM practices are not regulated the way conventional practices are and the standards for training and education of CAM practitioners can vary.

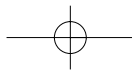
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Millar, W.J., (1997) Use of alternative health care practitioners by Canadians. *Canadian Journal of Public Health* 88(3), 154-158.

Canadian Health Network: Complementary and Alternative Health - www.canadian-health-network.ca

Tzu Chi Institute for Complementary and Alternative Medicine www.tzu-chi.bc.ca



2004 Super Cities WALK/Run For MS

>> Register Online at www.SuperCitiesWalk.com

The Super Cities WALK/Run For MS brings support and hope to over 6,000 British Columbians and their families who live with this terrible disease. Our hope is for a cure, and until that day we are providing support and encouragement to those who face the daily struggle of living with MS. Join us today and give hope to someone you know.

—Kevin Newman, Honorary Spokesman, 2004 WALK/Run For MS



Early Registration Draw

Register by February 28, 2004 and we'll enter you in a draw to win a Two Night Stay for Two at any Coast Hotel in Canada* plus a pair of Ped-Tech Custom Orthotics. *Certain restrictions apply.

Take Steps to Fight MS...

The Super Cities WALK/Run For MS is a fun, family-oriented event, taking place this spring in 21 communities across BC. The money you raise will help provide support to British Columbians living with MS and fund important research to find the cure.

Each WALK/Run location offers several accessible routes so that people of all fitness levels have the opportunity to take steps in the fight against multiple sclerosis.

You can participate as an individual, or form a TeamMS with your friends, family or co-workers.

Step 1 – Register

Register Online at www.SuperCitiesWalk.com or by calling your local Chapter or BC Division. We'll send you pledge forms and detailed information to help you get going. There is no registration fee.

Step 2 – Collect Contributions

Set a fundraising goal. Aim high. Think big. Start early. The fundraising kit we'll send you includes information on how to make fundraising easy. We ask that all participants raise a minimum of \$75 by event day (\$35 for children 12 and under).

Step 3 – WALK, Run or Roll For MS

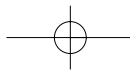
The event is held rain or shine. Simply bring your completed Pledge Forms and Pledge Envelope with the contributions you've collected and share in the community pride, fresh air, fitness and festivities. Snacks and lunch will be provided.

TeamMS: The best team you'll ever play on!

There is a contagious energy that comes from being part of a team. Organize your friends, family, co-workers, or people at your school, place of worship or community organization and form a TeamMS! A Team Captain and 4 others is all you need to make your own TeamMS. Choose a fun team name. Make sure everyone on your team registers and that one of you is registered as the Team Captain. We'll send you the TeamMS tools to help you succeed. We ask that all TeamMS members raise a minimum of \$75 by event day (\$35 for children 12 and under). Don't have a full team yet? No problem. Register yourself as Team Captain and add members later.

Self-Help Group Challenge

Self-Help Group Challenge Teams who register as a designated Self-Help Group Team will receive a cheque for 10% of their team's gross pledge total for their Self-Help Group. To be eligible, the words "Self-Help Group" must be included in the team name, and teams must have at least 5 members (a Team Captain and at least 4 others). Team members must turn in all of their pledges and the 10% cheque will be sent to the Self-Help Group after the event. Self-Help Group Team members are eligible for the same great individual and team awards as all other participants.



2004 Super Cities WALK/Run For MS

We Need Volunteers Too!

Volunteers are needed to help with such positions as participant registration, rest stops, food service, and route marshalling. Volunteers can become more involved by joining a local organizing committee. If you would like to volunteer for the WALK/Run or find out about other volunteer opportunities, contact your local Chapter or the BC Division.

BC WALK/Run Sites

The 2004 Super Cities WALK/Run For MS will be taking place this spring in 21 communities across BC.

Vancouver Island

Sunday April 4, 2004

Duncan
North Vancouver Island (Comox Valley)
Victoria

Sunday April 25, 2004

Nanaimo
Port Alberni

Lower Mainland

Sunday April 25, 2004

Vancouver
North Shore
Tri-Cities
Richmond
Langley
Surrey
White Rock
Ridge Meadows

Fraser Valley

Sunday April 25, 2004

Abbotsford
Chilliwack

Interior BC

Sunday April 25, 2004

Cranbrook
Kamloops
Kelowna
Nelson
Penticton

Northern BC

Sunday June 6, 2004

Prince George

WALK/Run Prizes

RAISE	You will receive	Plus	Plus Elite Feet Gift
\$75	Super Cities WALK/Run T-Shirt		
\$200	Super Cities WALK/Run T-Shirt	Maglite Flashlight	
\$400	Super Cities WALK/Run T-Shirt	Braun Multiquik Handblender	
\$600	Super Cities WALK/Run T-Shirt	Panasonic Personal CD Player	Digital Travel Alarm Clock
\$800	Super Cities WALK/Run T-Shirt	Hamilton Beach Meal Express Grill	Digital Travel Alarm Clock
\$1,000	Super Cities WALK/Run T-Shirt	De Longhi Espresso Machine	Digital Travel Alarm Clock
\$1,500	Super Cities WALK/Run T-Shirt	Waring Fruit & Vegetable Juicer	Digital Travel Alarm Clock
\$2,000	Super Cities WALK/Run T-Shirt	HP Digital Camera <u>OR</u> Columbia Sportswear Jacket	Digital Travel Alarm Clock
\$3,000 or more	Super Cities WALK/Run T-Shirt	You are a fundraising superstar! Go shopping from all prize levels above up to total amount raised.	Digital Travel Alarm Clock

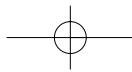
Cool Kids Prizes

\$35	Super Cities WALK/Run T-Shirt		
\$100	Super Cities WALK/Run T-Shirt	Beacon Light Pen	
\$200	Super Cities WALK/Run T-Shirt	FM Radio with Stopwatch	
\$300	Super Cities WALK/Run T-Shirt	Ripstop Nylon Backpack	

Donate Your Prize...

You have the option of donating your prize back to the MS Society and receiving an official tax receipt for the value of the prize. Just let us know if you would like to do so when you turn in your Pledge Envelope.

It is very helpful to us if you submit all funds raised by or on event day. However, funds brought in up to 2 weeks after the event date will be credited toward your prize level. Prizes are not cumulative. The MS Society reserves the right to substitute prizes of equal or greater value. Prizes may include the Super Cities WALK/Run logo.



MS Global Dinner Party – February 28, 2004 The Perfect Recipe for a Cure!

On February 28th people around the world will be hosting dinner parties to raise funds for MS research. Instead of a traditional gift for the host, guests will be asked to bring a cash donation in support of research for a cure for multiple sclerosis.

This is the MS Global Dinner Party's second year. Last year 32 dinners were



held in British Columbia; from barbeques, sit-down dinners to pizza pub nights. We raised over \$7,500 of our national fundraising total of \$13,500!

To find out how you can get involved, go to the MS Society website (www.mssociety.ca) and click on MS Global Dinner Party, or call 1-800-268-7582.

MS Carnation Campaign— Watch Your Donation Blossom into a Cure



It is time for British Columbia to bloom as the MS Society of Canada launches its 28th Annual MS Carnation Campaign.

Since 1976 the MS Carnation Campaign has raised over \$37 million for the MS Society of Canada. It is the oldest fundraiser of the MS Society and it is the only fundraising event that

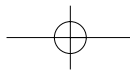
occurs on the same date throughout Canada. While the use of the carnation by the MS Society was chosen because of its close connection to Mother's Day, the MS Society has also marked the month of May as MS Awareness Month.

Since then, May has become a very special month for the MS Society as hundreds of volunteers across British Columbia – and all across Canada – sell bouquets/potted plants and single stem carnations. Money raised will support research to help find a cure and provide services for

individuals and families living with multiple sclerosis. It is also an important way to raise public awareness about this unpredictable and often disabling disease.

Street sales will occur from May 5th leading up to Mother's Day on May 9th where single carnations and bouquets will be available for sale on street corners, malls and other public spaces.

For more information or if you are interested in getting involved, please contact Erna Mead at 604-689-3144 or at erna.mead@mssociety.ca.



Government and Community Relations

Social Action Update

—by Cynthia McEwan, Manager, Government and Community Relations

Social Action has a new name! At the November BC Division board meeting, “Government and Community Relations” officially replaced “Social Action.” This term indicates our cooperative approach to policy development and is more descriptive of what this particular activity of the BC Division is all about. This change marks a change that other Chapters and Divisions in the country have become interested in and may adopt in the future.

The year 2003 concluded with Government Relations being well on its way for future initiatives. Apart from providing general MS information, the Division’s delegation walked away from the Ministry of Human Resources with nine action items and a forthcoming meeting with the Minister. Division representatives will also be presenting briefing notes on a variety of health related issues to the Chair of the Government Health Caucus Committee (GHCC). This is in addition to a previous

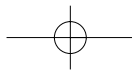
presentation made to the GHCC in October on complementary and alternative health issues.

Health, housing, transportation, employment and income issues continue to be general concerns for our members. Cuts to income support for many people with disabilities have been couched in extra supports to education, re-training and employment. Serious shortfalls in homecare, MSP provisions and residential facilities remain very apparent. Getting beyond these and other circumstances requires us to become part of policy planning processes so that services are discussed with consideration of the uniqueness associated with MS. For example, over the past months Health Authorities have restructured the way they access community input. I encourage Chapters to know these new Health Authority processes and become part of them. It is so much more effective to be at the planning table rather than presenting

problems and trying to change policy after it has been established.

Remember, there is no magic to effective advocacy (speaking out for our own and others’ interests). That said, when we advocate in reference to policy change and/or development, there are some general guidelines: know the policy; specify the problem; have a strategy; come with solutions or a desire to cooperate to find solutions; be respectful; involve others. Over the coming months I hope to work closely with interested Chapters to identify local issues and cooperate in the development of advocacy strategies that affect municipal, provincial and federal policy change. I have been overwhelmed by the enthusiasm and experience that people within the MS Society have for policy issues and have no doubt that we can only become stronger and more successful by working together on issues.





Resources

New MS Websites

Manitoba Division has created a new series of websites designed specifically for children, teens of parents living with MS, and for their parents. These new sites provide age-appropriate information and resources about MS, and create an interactive environment in which children, teens, and parents living with MS can share and support one another.

You can access these sites by going to www.mssociety.ca/manitoba site or directly through www.msforkids.com, www.msforteens.com, or www.msforparents.com. The sites will provide a safe forum to connect children, teens and parents with similar questions, experiences, and difficulties. Overall, the goal is to help minimize the negative impact of a parent's MS on children and teens while maximizing the positive impact. These sites will also provide information and resources that families can use daily to manage the impact of MS. Production of this website was made possible in part by a financial contribution from the Population Health Fund, Health Canada as part of the National Growing Up Strong program.

Classifieds

Van in extremely good condition, 50,000 km. Includes \$24,000 worth of equipment, such as a power lift for wheelchair, power sliding door, and hand controls. The driver seat is hydraulically powered and there is a bench seat in the back of the van that folds down into a bed. On the back tail light there is a button that is used to operate the door and lift. Asking \$28,500 obo, call Wendy at (604) 576-8534 or or Scott at (250) 768-7246.

MS has taken driving from me (for now at least) so my **mini-van** is for sale. '99 Chevy Venture LE Trim Pkg – fully loaded with power everything! Just over 55,000 km, in excellent condition. Seats 7, am/fm/cd, a/c, roof rack, hand controls and an optional left foot gas pedal. Under warranty until April 2006, asking \$16,500 obo. Call David Bell at (604) 279-8994 (for photo see www.autosplusrus.com and enter above phone number).

New books in the MS Society Lending Library

Courage: The Story of the Mighty Effort to End the Devastating Effects of Multiple Sclerosis, Richard Trubo, Ivan R. Dee
Publisher, 2001, 276 pages.

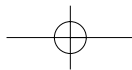
Multiple Sclerosis: A Guide for Families, Rosalind C. Kalb, Ph.D., Demos
Vermande, 1998, 207 pages.

Multiple Sclerosis and Having a Baby: Everything You Need to Know About Conception, Pregnancy, and Parenthood, Judy Graham, Healing Arts Press, 1999, 186 pages.

People with MS with the Courage to Give, Jackie Waldman, Conari Press, 2003, 163 pages.

Stairlift in good condition, holds up to 300lbs, includes rail extensions and all parts. Asking \$2,000, call Mr. O'Neil at (250) 427-3950.

Invacare Arrow power wheelchair, only 13 months old. Original price was \$13,000, asking \$5,500. Call Mel or Donna at (250) 554-2012 or Sally at (250) 374-5462.



Around the Province

Central Island Chapter



▲ *Marshmallow Moments Ride Again. Support Group Team Captain Rosanne Baker*

In November of 2003, the Central Island Chapter hosted the annual BC Division AGM and workshop. This year it featured an all day workshop with 4 speakers and the results (44% of evaluations returned) showed that it was a resounding success. The four speakers expertly tied together the theme “Challenge MS: Live Life to the Fullest.”

The CI Chapter Board of Directors welcomes a new member from Port Alberni for the first time this year, and a new member also

came on from Parksville/Qualicum. Several long-standing members stepped down and we thank you all for volunteering.

Two new programs initiated in the spring/summer of 2003 were the Volunteer Legal Advocacy Program (VLAP) program and a new family support group. The VLAP program is currently helping four members with concerns about CPP and/or disability benefits. The family support group meets the first Monday of each month and is centrally located in Nanoose.

The Parksville/Qualicum swim program continues to flourish and a gym program has now been added. In Nanaimo, the swim therapy program continues to support over 25 people. The Nanaimo gym program has been so successful, with 12-15 people on a regular basis, that we now have two classes per week. In both areas the programs run with three 12-week sessions to achieve the maximum benefit for the clients. Breaks between sessions allows for personal time with families and friends, vacations and also helps the clients to

assess their own progress outside the circle of the “MS family.” These breaks allow the participants time to take responsibility for maintaining fitness levels on their own between sessions.

Re-assessments of this program were done in the Nanaimo area in the fall and marked improvement was again recorded.

Results showed:

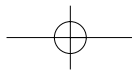
- Improvement in muscle strength
- Ability to transfer more easily
- Improved coordination and balance
- Increased mobility and endurance
- Improved circulation in the legs and feet
- Increased range of motion
- More social interaction and support
- Improved quality of life and confidence

Please note our new email address: mssociety@shaw.ca. For more information, call:

Events and Exercise Therapy Programs:

Nathalie Cooke,
(250) 754-6321

Client Services: Iris Bailey,
1-888-844-2047,
(250) 468-1757



Around the Province

Capital Region Chapter

Partnership in Action: A New Equipment Loan Service in the Capital Region

In our last submission to the *BC Bulletin* our Chapter outlined the intention to support efforts to integrate specialized community rehabilitation and Chapter services with the new MS Clinic at the Royal Jubilee Hospital.

In this submission we will highlight a new service partnership, led by our Chapter, whose goal is to provide an accessible, appropriate and responsive equipment loan service for MS clients in the Greater Victoria area. The partners in the project are the MS Society of Canada Capital Region Chapter, the Vancouver Island MS Society (VIMSS), the Canadian Red Cross BC Coastal Region and the Victoria United Way.

Together with our partners we believe that an accessible, appropriate and responsive loan service will ensure that

individuals with MS are enabled to maximize their independence and engage more fully in daily living activities.

Our Chapter operated an equipment loan service on its own until the late 1990s when budget pressures and the risk management issues associated with equipment loans (e.g., the cleaning and maintenance of equipment, especially personal care items) resulted in the scaling back of this service. In an endeavour to fill this substantial gap in services, the Chapter entered into partnership with the Red Cross. However, the attempted partnership was limited by the highly specialized needs of MS clients, the lack of Chapter resources and the

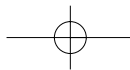
scope of services offered by the Red Cross.

Recognizing the substantial unmet needs of MS clients, the Chapter, the VIMSS and the Red Cross

proposed a collaboration that has the potential to not only meet the needs of MS clients, but to build community capacity and ultimately respond to the needs of clients with other complex conditions. The Chapter and the VIMSS are contributing MS clinical expertise, administrative capacity and the operational space; the Red Cross is contributing its equipment loan technical capability and the United Way is contributing \$50,000 over the next three years. If these partners had not come together, the need would have been unmet because the costs, specialized resources and risk management issues precluded any of the partners from operating the service individually.

We believe that this





Around the Province

project is an example of how services can be improved through partnership. A detailed document outlining the objectives, indicators and expected outcomes of this project is available by contacting Bonny Pashak.

Please note: A public education session titled Living Well with MS: Managing Fatigue will be held in Victoria on Saturday, April 24, 2004. This presentation is organized by our National office and supported by an unrestricted educational grant from Teva Neuroscience. For more information, give us a call at (250) 388-6496.

Kelowna Chapter

The Kelowna Chapter was very busy with year-end activities. Our Annual Christmas Party had all our members and guests enjoying a wonderful dinner prepared by the Coast Capri Hotel. Our sincere thanks to the Kelowna Hostesses and the Kelowna Handi-Dart

drivers!

A Children's Christmas Party, three Christmas Social Teas at our local Care Homes and an Open House at our Drop-In Centre helped give all of our members ample opportunity to join us during the holiday season.

Unfortunately, we lost one of our dearest friends and most valued volunteers in November. Peggy De Gruchy's involvement with the MS Society dates back to our Self-Help Group years before our Chapter came into existence. Peggy was one of the first volunteers to sit on the Steering Committee and guide our members with her experience and vision in creating the Kelowna Chapter as it exists today. She became one of the first members of our Board when BC Division granted our Charter.

Peggy had the vision that has made our annual Super Cities WALK/Run For MS a community event that is a must on everyone's calendar. The success of our Walk is part of Peggy's legacy to

our Chapter.

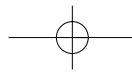
Peggy was a volunteer's volunteer. Our Chapter will remember Peggy for her absolute loyalty: to her faith, to her family, to her friends, to her causes and to herself.

Prince George Chapter

The year 2004, a year to prosper, move forward and grow!

Our Chapter goals this year are to remain strong and united!

Jacinthe Brochu will again be coordinating the Global Dinner with the College of New Caledonia and having a buffet with foods from all over the world. Nadine Lindstrom, our Carnation Coordinator, has begun our fresh flower welcome campaign. We have a new Walk co-ordinator, Kathy Siddall, who is very talented and experienced at such events. The first edition of the Prince George Messenger is in circulation. Our editor, Tim Lee, welcomes your ideas/stories for the next edition.



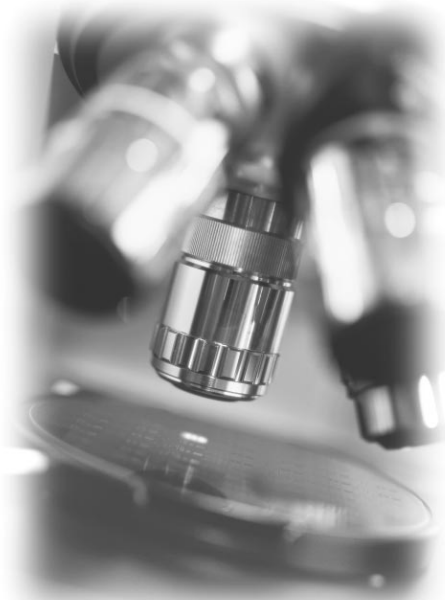
Research

Moving toward treatment and a cure: *The history of MS research*

The Multiple Sclerosis Society of Canada is one of the world's largest supporters of MS research. Each year, the MS Society provides \$5 to \$6 million to its research program. In addition, the MS Scientific Research Foundation - which is related to the MS Society - funds large collaborative research projects and innovative pilot research projects.

Have you ever wondered what path MS research took to bring us where we are today? And perhaps you have also wondered why most MS Society-funded research is concentrated in the areas of myelin repair, genetics, immunology and MRI technology. This short history of MS research should help answer some of those questions.

Multiple sclerosis is not a modern disease. Europeans in the Middle Ages described MS symptoms in diaries and journals. In the following centuries, others also described strange symptoms which would now be



identified as multiple sclerosis.

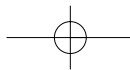
In 1868, Jean-Marie Charcot, a professor of neurology at the University of Paris, carefully examined a young woman with a tremor unlike any he had seen before. He also noted other neurological problems such as slurred speech and abnormal eye movements. When she died, he examined her brain and found the characteristic scars or "plaques" of MS. Dr. Charcot is credited as being the first to describe MS. However, he and his fellow neurologists were baffled by

the disease and its resistance to all treatments.

Following World War I, MS research grew more sophisticated as myelin was studied intensively under the microscope. The cell that makes myelin, the oligodendrocyte, was discovered in 1928 and the first electrical recording of nerve transmission in 1925 established techniques needed to study the activity of nerves. Scientists now understood the role of myelin in nerve conduction and knew that demyelinated nerves cannot sustain electrical impulses.

The availability of medical information on a huge population of mostly young men who had served in the military during World War II allowed people to see the uneven geographic distribution of MS. It was discovered that the rate of MS increased the further one was north or south of the equator.

The first valid scientific clinical trial took place in 1969 when a group of people with MS who were having exacerbations were given the steroid ACTH, which proved effective in



Research

speeding recovery. This early intramuscular steroid therapy lead to the modern steroid treatment still in use today for acute exacerbations.

Two big ideas emerged from the 1960s that are still being pursued today. It was discovered that white blood cells react against myelin, especially against a component called myelin basic protein. This led scientists to consider the possibility that MS involves a direct immune system attack on myelin. The other idea was that people with MS have altered antibodies against viruses. Scientists now believed that viruses involved in MS alter the immune system and trigger it to damage the myelin.

The 1980s saw a huge growth in clinical trials as new treatments were developed and tested on the symptoms for MS. These led to approvals in the 1990s of the first drugs in history shown to affect the course of MS, the beta interferons and glatiramer acetate (Avonex, Betaseron, Rebif and Copaxone). Scientists also learned that

parts of some viruses are sufficiently similar to components of human myelin that the immune system may inadvertently attack the myelin when it attacks the virus.

MRI (magnetic resonance imaging) has been around since the 1950s. MS lesions or damaged areas show up on the MRI as bright spots. A new MRI technique called MRS (magnetic resonance spectroscopy) allows researchers to measure the amount of certain chemical markers in nerve cells, providing another way to calculate how much permanent damage has occurred. Recent discoveries emphasize that often the underlying nerve fibres are damaged as well, which may account for much of the permanent disability MS causes.

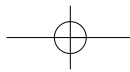
In the 1990s, the Canadian Genetic Susceptibility Study of almost 20,000 people with MS and their families clearly demonstrated that there is a genetic determinant to MS. Although there does not appear to be any single

“MS gene”, there does seem to be something fundamental to each of us which helps determine who will get MS.

In this new century, research has paid off with new and better symptomatic treatments for MS than we have had before. Tizanidine was introduced as a new treatment for spasticity. Use of the intrathecal baclofen pump for severe spasticity became more common. Gabapentin was introduced to treat many painful symptoms ranging from severe face pain (trigeminal neuralgia) to burning pains in the limbs.

Many more therapies—some targeted at stopping MS attacks and slowing the development of disability and others for MS symptoms—are actively in development thanks to research underway in Canada, the United States, Europe and other parts of the world.

Adapted from *Multiple Sclerosis* by Donald Paty, MD, and George Ebers, MD; *The History of MS: The Basic Facts*, a brochure by the National MS Society (USA) by Loren A. Rolak, MD and “*Bright Spots & Black Holes: What Doctors are Learning from Advanced MRI*” by Martha King from *Inside MS* (Oct-Dec 2002 issue).



Annual Report 2003

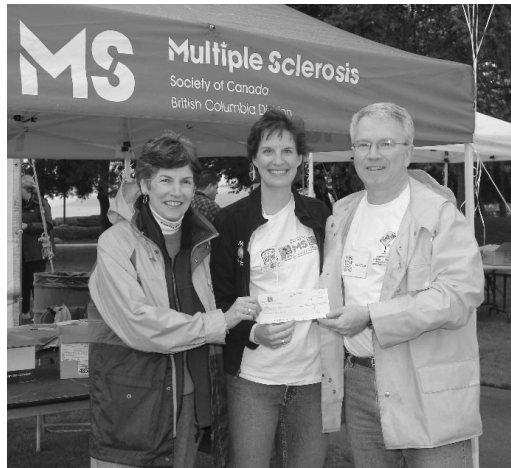
A Year to Celebrate

Annual report time is always a time to reflect on the forward movement achieved in the year just passed and to celebrate our successes.

As the BC Division's President and Executive Director, we take pride in highlighting the fact that in the past year we have been refocusing on our mission and strengthening the partnerships internally and externally that will help us meet our mission "to be leaders in finding a cure for multiple sclerosis and enabling people affected by MS to enhance their quality of life."

In 2003, we have been successful in renewing our commitment to support the best in MS research through increased contributions to the National MS Research Program and we have done this in partnership with all of our Chapters. Canadian research, including projects right here in BC, is recognized as being the best in the world and very worthy of our support.

In 2003 we welcomed another Chapter to our midst. The North Vancouver Island Chapter was established in May,



▲ Mary Macdonald (l) and Dan Rollins with Walk/Run volunteer Gill Watson.

centered in the Campbell River/Comox Valley areas. This newest Chapter highlights our commitment to the second half of our mission statement, which is to bring the best in services to people affected by MS.

We wanted to know how our members felt about the services we provide and in 2003 we surveyed our 6,000 members and received an astonishing 700 responses that told us overwhelmingly that our members like what we do – our equipment provision program, our new Volunteer Legal Advocacy Program, the 1-800 support line, peer counselling training, information on our website and our newsletters. We discovered that we are doing a good job and also that our

members want us to support research.

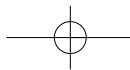
Government Relations is the Society's way of dealing with issues that affect many of our members and we are very pleased to have recruited Cynthia McEwan, an expert in community and government relations, to provide us with leadership in this area.

We have been holding meetings with both politicians and bureaucrats in Victoria and with other disability organizations in an effort to raise awareness to and bring change in a number of areas.

Fundraising is the gas that fuels the engine that drives our mission and, thanks to the many people who have connected so strongly to the MS cause, we have had a very good year with a record \$1.4 million in special events and over \$100,000 in individual and corporate donations.

We are also embarking on new fundraising initiatives for this year. We have launched a Read-A-Thon program in elementary schools and

—continued on page 25



—continued

have re-started the Carnation Campaign in the Lower Mainland. We are also undertaking a major gift campaign to raise over \$200,000 in new funds for MS research. Last year's successful launch of the Global Dinner Party for MS research saw BC host the largest number of parties and raise the most money of any province in Canada.

And finally, we successfully moved our office and that of our Lower Mainland Chapter from downtown Vancouver to the Metrotown area in Burnaby so that we will be closer geographically to those who access our services in the Lower Mainland.

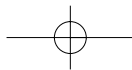
Again, thank you to every one of you throughout the province: volunteers, staff, partners, sponsors, donors, event participants and our members. We would not have had the success we have had this year without you and you are part of a very large BC team that is making a difference in the lives of many.

Sincerely,
Mary Macdonald,
Executive Director
Dan Rollins,
President of the Board

2003 Audited Financial Statements

	2003	2002
Assets		
Current assets		
Cash	\$ 1,264,597	\$ 799,972
Short-term investments	51,350	276,987
Accounts and grants receivable	257,559	328,235
Inventory	1,500	2,600
Deferred expenditures	33,209	19,573
	<u>\$ 1,608,215</u>	<u>\$ 1,427,367</u>
Capital assets	187,451	192,752
	<u>\$ 1,795,666</u>	<u>\$ 1,620,119</u>
Liabilities		
Current liabilities		
Accounts payable and accrued liabilities	147,005	247,051
Due to National Office	375,183	73,639
Deferred revenue	4,813	37,807
	<u>\$ 527,001</u>	<u>\$ 358,497</u>
Deferred capital contributions	8,903	26,752
	<u>\$ 535,904</u>	<u>\$ 385,249</u>
Net assets		
Invested in capital assets	178,548	166,000
Externally restricted - Cohen Fund	21,208	20,451
Internally restricted - Building Fund	644,612	644,612
Unrestricted	415,394	403,807
	<u>\$ 1,259,762</u>	<u>\$ 1,234,870</u>
	<u>\$ 1,795,666</u>	<u>\$ 1,620,119</u>

	2003	2002
Revenue		
Donations and special fundraising projects - net of related expenditures	\$ 1,790,405	\$ 1,826,497
Direct mail and corporate campaign	445,882	536,499
United Way	142,942	137,297
Grants	142,858	293,079
Investment income	55,650	58,403
Miscellaneous income	53,110	12,677
Memberships	2,080	1,320
Amortization of deferred capital contributions	17,849	35,546
	<u>\$ 2,650,776</u>	<u>\$ 2,901,318</u>
Expenditures		
Program services		
Funds remitted to National Office for research, programs and services	\$ 680,096	\$ 787,038
Equipment provision program	172,436	243,685
Client services	909,889	894,121
Social action	74,462	76,646
Public education	188,295	189,545
Volunteer resources	100,079	92,606
MS clinics	66,224	169,553
	<u>\$ 2,191,481</u>	<u>\$ 2,453,194</u>
Support services		
Administration	377,306	342,847
Fundraising	57,854	87,675
	<u>\$ 435,160</u>	<u>\$ 430,522</u>
	<u>\$ 2,626,641</u>	<u>\$ 2,883,716</u>
Revenue over expenditures for the year	<u>\$ 24,135</u>	<u>\$ 17,602</u>



Self-help Groups in the Province



Self-help groups are composed of persons who come together to provide mutual support and share information. Although the groups are affiliated with the MS Society, the contacts listed below are volunteers and not paid staff. Call your local Self-Help Group contact to find out more about its activities in your area. If you would like to establish a SHG in your area, call the MS Society at (604) 689-3144.

Abbotsford

Betty (604) 859-2739

Armstrong

Cindie (604) 546-3283

Burnaby

Lawrence (604) 552-5560

Metrotown

(Friday Drop-in)

Sam (604) 273-7574

Burns Lake

Louise (250) 692-7479

Pennie (250) 692-7072

Campbell River

Ray (250) 286-0852

Castlegar

Jan (250) 365-6264

Chase

Georgie (250) 679-3505

Andrea (250) 679-3576

Chilliwack

Don (604) 795-2529

Comox Valley

Joan (250) 338-0448

Cranbrook (East Kootenay)

John/Sylvia (250) 489-4740

Creston

Ken (250) 428-7737

Cowichan Valley

Judy (250) 748-3933

Dawson Creek

Joyce (250) 782-2705

Grand Forks

Cathy (250) 449-2177

Gibsons/Sunshine Coast

Ellen (604) 886-4651

Houston

Corrie (250) 845-7759

Kamloops

Cherye (250) 828-0413

Ladner/Tsawassen

Elaine (604) 946-6658

Langley

Dennis (604) 533-7655

Logan Lake

Cindy (250) 523-6334

Midway

Cathy (250) 449-2177

Merrit

Ann (250) 378-5327

Mission

Judy (604) 826-0116

Nanaimo

Iris (888) 844-2047

Nelson

Darlene (250) 359-7494

Lonnie (250) 352-3997

North Shore

Gerry (604) 987-6701

Marilyn (604) 929-0146

John (604) 929-7133

Oliver/Osoyoos

Cathy (604) 495-6866

Parksville/Qualicum

Kathy (250) 752-5721

Penticon

Val (250) 492-6350

Port Alberni

Yvette (250) 723-9345

Shirley (250) 724-4646

Port Hardy

Ed (250) 949-7007

Port McNeil

Mike (250) 956-4578

Powell River

Brin (250) 485-7338

Prince George

MS Chapter (250) 564-7074

Richmond

Pat (604) 271-6065

Salmon Arm

Aileen (250) 833-0527

Donna (250) 832-4427

Sechelt

Ellen (604) 886-4651

Shuswap

Bill (250) 833-4916

Smithers

Beth (250) 847-4855

Surrey

Pat (604) 594-1951

Saanich Peninsula

Dorothy (250) 656-5764

Squamish

Paddy (604) 898-2049

Terrace

Doug (250) 635-4809

Trail/Rosland

Estelle (250) 362-5517

TriCities

Diana (604) 941-5122

Vancouver –

Pearson Hosp.

Lorne (604) 323-8167

Vernon

Rene (250) 545-5723

Whitehorse

Carol (867) 633-4151

White Rock

Susan (604) 536-5019

Victoria

Bonne (250) 388-6496

ONE-TO-ONE CONTACT

Chetwynd

Ann (250) 788-3991

Clearwater

Mila (250) 674-3526

Kitimat

Sylvia (250) 632-3926

Mackenzie

Sandra (250) 997-6098

Prince Rupert

Dae (250) 624-4372

Sandpit

Sandra (250) 637-5693

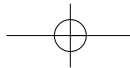
Williams Lake

Gwen (250) 392-4308

MS Wellness Group

Wendy (604) 464-9133

Gloria (604) 941-0791



Membership Form



Please mail or fax in your new membership or membership renewal form and payment to: **MS Society of Canada, BC Division** 1501-4330 Kingsway, Burnaby, BC V5H 4G7

Membership with the MS Society provides up-to-date information through Division, Chapter and National newsletters. You will be eligible to vote at the Annual General Meeting. If there is a Multiple Sclerosis Society Chapter in your area, do you wish this application and membership fee forwarded in order to receive Chapter newsletters and be informed of educational events in your area? (See below for more information). Yes No

Mr Mrs Ms Miss Dr

Last Name _____ First Name _____ Initial _____

Street _____

City _____ Province _____ Postal Code _____

Email _____ May we contact you by email? Yes No

Home Phone (____) _____ Work (____) _____

May we contact you for volunteer activities in your community? Yes No

I agree to provide the above personal information and certify that the above information is accurate. Yes No

MEMBERSHIP FOR:

FAMILY INDIVIDUAL

Please select membership type from the following:

ANNUAL (\$10.00)

FAMILY ANNUAL (\$10.00)

PROFESSIONAL (\$10.00)

COMPLIMENTARY (\$0.00)

Donation gratefully received: \$ _____

Total enclosed: \$ _____

Complimentary Memberships

The Multiple Sclerosis Society of Canada may offer complimentary memberships in your local office, including one for persons with MS. This requires you to disclose that you have multiple sclerosis. If you wish to take advantage of this complimentary membership (if applicable) and do not object to disclosing that you have MS, please check here:

This information will be kept confidential.

IF THE MEMBERSHIP FEE (RENEWABLE ANNUALLY) PRESENTS FINANCIAL HARDSHIP, PLEASE CONTACT THE MS SOCIETY OFFICE.

MS CHAPTERS

PLEASE CHECK THE CHAPTER TO WHICH YOU WISH TO HAVE YOUR APPLICATION AND MEMBERSHIP FEE

CAPITAL REGION CHAPTER

CENTRAL ISLAND CHAPTER

KAMLOOPS AND AREA CHAPTER

KELOWNA CHAPTER

LOWER MAINLAND CHAPTER

NORTH VANCOUVER ISLAND CHAPTER

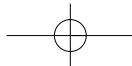
WEST KOOTENAY CHAPTER

PRINCE GEORGE CHAPTER

SOUTH OKANAGAN/SIMILKAMEEN CHAPTER

PRIVACY RESPONSIBILITIES

The Multiple Sclerosis Society of Canada, BC Division is aware of its responsibilities under the Personal Information Protection and Electronics Documents Act (PIPEDA) and other applicable privacy legislation. It limits its collection of personal information to that necessary to serve its members in providing them with information and member services. The MS Society does not share, exchange, trade or sell members' personal information to external parties. Personal information is stored in a secure manner and protected against unauthorized access. MS Society staff and volunteers are aware of their obligations and responsibilities to safeguard individuals' rights to privacy and are required to adhere to an internal confidentiality policy. Any questions concerning the MS Society of Canada's use of personal information should be directed to Janet Palm, Privacy Officer, MS Society of Canada, BC Division, 1501-4330 Kingsway, Burnaby, BC V5H 4G7, (604) 689-3144. Email: info@mssociety.ca.



Upcoming Events

2004 Fundraising Events

—Dates and Locations

READ-A-THON

January 26 - March 12
Throughout British Columbia

GLOBAL DINNER PARTY

February 28 - Around the world

CARNATION CAMPAIGN

Month of May - Throughout British Columbia

MS BIKE TOUR

'Grape Escape' one-day tour - August 8
'Grape Escape' two-day tour - August 7, 8
Vancouver - August 15
Fraser Valley - August 22
Kamloops - September 12

MS 100 HOLE GOLF CHALLENGE

Monday, September 20
Carnoustie Golf and Raquet Club

2004 SUPER CITIES WALK/RUN FOR MS

Vancouver Island - Sunday, April 4

Duncan
Victoria

North Vancouver Island
(Comox Valley)

Lower Mainland, Fraser Valley, Vancouver Island, Interior BC - Sunday, April 25

Vancouver
Tri-Cities
Langley
White Rock
Abbotsford
Nanaimo
Cranbrook
Kelowna
Penticton

North Shore
Richmond
Surrey
Ridge Meadows
Chilliwack
Port Alberni
Kamloops
Nelson

Northern BC - Sunday, June 6

Prince George



Production of this issue of the BC Bulletin is made possible by the generous support of Biogen Canada.



>> **Readers:** What do you think of our new look? At the *BC Bulletin* we are always open to your feedback! We're especially interested in readability, so please contact us if you had any problems reading this issue.

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