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Lung Cancer and the Use of Oxygen Therapy

By Vicki Sorrenti, Oncology Nurse

LCC Program and Volunteer Committee Member

For some patients dealing with dyspnea (shortness of breath), the use of supplemental oxygen can be quite helpful. Oxygen therapy benefits patients by increasing the supply of oxygen to the lungs and thereby increasing the availability of oxygen to the body's tissues. Your physician can and should be the person to determine if oxygen supplementation could be an option for you.

Lung Cancer and the Use of Oxygen Therapy

Many people believe that "being on oxygen" is a sign that they are desperately sick. This isn't always true. For some people, being on oxygen is an important part of their therapy. For others it may be a form of short term treatment.

Only people who suffer significantly from low blood oxygen levels will benefit from oxygen therapy. In the case of lung cancer, patients with low blood oxygen levels (Hypoxemia) or temporary lung damage from infections like pneumonia, will benefit most from oxygen therapy. Ask your doctor to test your hemoglobin levels to determine if oxygen therapy might help you.

How Does Oxygen Therapy Work?

Oxygen therapy is generally delivered as a gas from an oxygen source such as a cylinder or concentrator. The oxygen is either administered through small nasal "prongs" that fit into the nostrils (figure 1) or through a mask that covers the mouth and nose (figure 2). Taking in this extra oxygen raises low blood oxygen levels, making breathing easier and lessening strain on your body. Because your body can not store oxygen, the therapy works only when you are using it.

Like any other prescription medicine, oxygen must be used very carefully and only as prescribed. Your doctor will tailor your oxygen prescription to your individual needs. When your oxygen is delivered to your home, you and your family will be given instructions on how it is to be used and how to clean your equipment.

How Long Do People Use Oxygen?

If you have a respiratory infection you may only need oxygen until your infection clears and your blood oxygen levels return to normal. If you have chronically low blood oxygen levels because of cancer or COPD you may need oxygen permanently.

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November
is
Lung Cancer Awareness Month.

*Raise awareness in your community by
hosting a lung cancer awareness display!*



LUNG CANCER CANADA
Awareness. Support. Education.

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LCC News

Director Profile – Dr. W.K. (Bill) Evans



Dr. William (Bill) Evans is the President of the Juravinski Cancer Centre (JCC) at Hamilton Health Sciences, the Integrated Vice-President for Oncology Services, St Joseph's Healthcare, Hamilton, the Executive lead for the Henderson General Hospital and the Regional Vice-President for the Hamilton, Niagara Haldimand Brant LHIN.

Dr. Evans obtained his undergraduate and postgraduate training at the University of Toronto and his medical oncology speciality training at the Princess Margaret Hospital. He was on the staff at the Toronto General Hospital from 1975 until 1980 and then moved to Ottawa to be Head of Medical Oncology at the Ottawa Regional Cancer Centre. From 1988 to 2000 he was the Chief Executive Officer of the Ottawa Centre and Chair of the Interdepartmental Program of Oncology.

Prior to taking on his current positions in Hamilton in the fall of 2004, Bill was the Chief Medical Officer and Provincial Vice President at Cancer Care Ontario (CCO). He has also held the position of Provincial Systemic Therapy Program Leader and Director of Quality Improvement and Cost Evaluation at CCO's provincial office.

Dr. Evans has published over 200 articles on lung cancer treatment, the economics of cancer care and on various aspects of healthcare delivery.

Other current responsibilities include:

President, Canadian Association of Medical Oncologists;
Chair, Provincial PET Steering Committee;
Member, Ontario Health Technology Assessment Committee;
Chair, Provincial Lung Disease Site Group;
Co-Chair, Working Group on Economic Analysis (NCIC CTG);
Member, Board, Lung Cancer Canada.



Dr. Jason S. Agulnik, MD, CM, FRCPC Medical Advisory Panel Appointment

Dr. Jason Agulnik obtained his medical degree from McGill University in 1997 and has been specializing in thoracic oncology interventional bronchoscopy since 2004. He is a practicing pulmonologist at the Jewish General Hospital-Departments of Oncology

and Internal Medicine, Pulmonary Division; and is an Assistant Professor of Medicine at McGill University.

In 2003 Dr. Agulnik was awarded a fellowship grant from the Canadian Institute of Health Research and attended Harvard University to obtain highly specialized research training in lung cancer. Since that time, Dr. Agulnik has gone on to co-lead several medical research studies, publications and international lectures on lung cancer diagnosis and treatment.

Dr. Agulnik joined Lung Cancer Canada's Medical Advisory Panel in 2007.

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Charitable Registration Number: 872775119 RR0001



Lung Cancer and the Use of Oxygen Therapy

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Funding for Oxygen Therapy

Oxygen therapy can be expensive, especially when taken over the long term. Government funding for oxygen therapy is available. Ask your doctor about funding programs and if you are eligible. Funding varies from province to province.

Travelling with Oxygen

With help and planning you can travel with oxygen. Contact your Oxygen Supply Company well in advance to allow them to arrange for oxygen while travelling to and from your destination.

Smoking, Fire and Flammable Products

You should never smoke while using oxygen because of the risk of fire. Warn family members and visitors not to smoke near you when you are using your oxygen (1). Should you go out to a restaurant with your portable oxygen kit, ask to be seated in the non-smoking section (2).

Remember that every question is a good one. Keep asking your doctor or oxygen supplier questions until you feel confident that you understand how and when to use your oxygen.

Sources

(1) Yourlunghealth.org. Healthy Living:Home Oxygen Therapy:
http://www.yourlunghealth.org/healthy_living/living/home_oxygen_therapy/

(2) Yourlunghealth.org. Healthy Living:Home Oxygen Therapy:
http://www.yourlunghealth.org/healthy_living/living/home_oxygen_therapy/



Figure 1



Figure 2

Lung Cancer Canada Grove 2008



The Win We We Women's Drum Group

Each Spring Lung Cancer Canada supporters gather at **The Grove** in Seton Park, Toronto, to plant trees in honour of those who have survived the lung cancer journey and to remember those loved ones lost to this devastating cancer.

The Grove's design is based on the traditional healing circle with paths leading to different tree groups with benches for quiet contemplation. Each tree has been dedicated with a plaque at its base.

This June we were privileged to have the blessing ceremony performed by Grand Council Chief John Beaucage of the Wasauksing First Nation, accompanied by the Win We We Women's Drum Group. The Chief gave the prayers up to the sky through the traditional sweet grass smoke ceremony and leaves were scattered at the base of each tree, as silent prayers and thoughts were given.

If you would like more information about the "first in Canada", Lung Cancer Canada Grove or about purchasing a tree to dedicate to a loved one, the web site address is www.lungcancercanadagrove or call the office at **1-888-445-4403** toll free.



*The Honorable George Smitherman
former Minister of Health, Ontario*



Lung Cancer Canada Grove



Grand Council Chief John Beaucage

How to Prepare for Lung Cancer Surgery When You Smoke

By Dr. John Oyston, MB BS, FFARCS, FRCP(C),

Staff Anesthesiologist, The Scarborough Hospital

Most doctors prefer that their patients stop smoking several weeks before surgery. This can be an especially difficult time to quit for lung cancer patients who are often under a tremendous amount of stress as a result of their diagnosis. However, knowing the benefits of non-smoking before and after surgery can help optimize one's prospects of healing and recovery.

Why should you stop smoking before surgery?

Smoking damages your lungs

Smoking puts you at increased risk of having breathing problems after your anesthetic. The results may range from needing drugs to reduce wheezing, to being put on a breathing machine in Intensive Care. Not smoking a few weeks prior to surgery allows your lungs to start healing and reduce the risk for breathing complications.

Smoking puts your heart at risk

Cigarette smoke contains poisons that put your heart at risk. Inhaling carbon monoxide, which is present in every cigarette, reduces the amount of oxygen that blood can carry to your heart and vital organs. Nicotine makes your heart beat harder and faster. Together they can put you at risk of a heart attack. If you stop smoking for even a few hours, your body can get rid of these poisons and reduce potential heart risks.

Smoking after surgery makes it harder for your body to heal and increases risk of infections

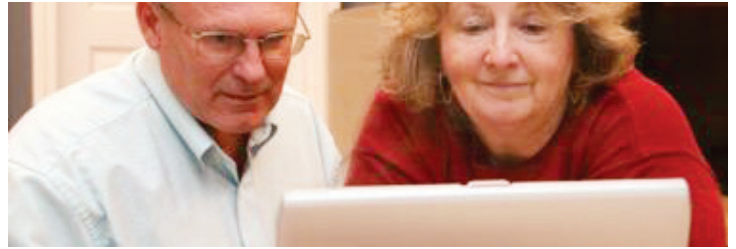
A decrease in the amount of oxygen getting to the site of your surgery makes it more difficult for the normal healing process to take place. This decreases your ability to fight infection and increases the risk of wound infection. It may even reduce your chance of having a successful operation. Continuing not to smoke after surgery helps to improve your healing and the prevention of infections.

Healing after surgery is improved mainly by not smoking

The risk to your heart is reduced by even a few hours of non-smoking, but it takes your lungs several weeks to improve after you stop smoking.

Quitting smoking reduces your risk of returning to the hospital

After six months lung function improves by 10%. After one year the risk of a heart attack drops 50%. After ten years the risk of getting lung cancer drops 50%. Stopping smoking is always the sensible thing to do.



Tips

- It may be easier to quit smoking when you are having surgery because you are away from normal routines. While you are in hospital you can get help to quit smoking from medical professionals and the risk of withdrawal symptoms is less if you quit while in hospital. The hospital is generally a non-smoking area and there may be less withdrawal symptoms if you stop smoking in an environment in which you have no choice. Remember, medical staff at the hospital can also help you quit.
- If you have more than four weeks to prepare for surgery, choose a "Quit Day" at least four weeks before surgery, and stop smoking on that day.
- If you do not have four weeks, try to stop smoking at midnight before surgery, so you have at least 8 hours to get rid of the carbon monoxide in your body. Often you will be told not to eat or drink after this time, so try to stop smoking at the same time.
- If you do not manage to stop smoking before your surgery, try not to start again after the operation. Do not hesitate to ask your healthcare team for help.

Remember there are many resources available which offer help and advice to people who want to stop smoking. Patients can usually access this information and services through the hospital for which they are receiving care.

Sources:

"Stop Smoking for Safer Surgery" is an initiative originated by the department of Anesthesiology at the Scarborough Hospital and now supported across the province by Ontario's Anesthesiologists.



John de Jong and mother
Ann de Jong

John de Jong: Toronto, Ontario

The Second Annual Breathe Easy fundraiser in support of Lung Cancer Canada was held on June 5th 2008. The event was created by Canadian jeweller John de Jong (of JdJ Jewellery) in honour of his father- Egbert De Jong, who passed away from lung cancer. Each year the event brings together fine jewellery, art, food and entertainment to raise money and awareness for lung cancer. This year's event was held at the Jamie Kennedy Restaurant at the Gardiner Museum, located in downtown Toronto. Guests enjoyed signature hors d'oeuvres and a silent auction; with the highlight of the evening being a draw for a pair of stunning peridot and diamond earrings by JdJ Jewellery, worth \$5,000. All proceeds raised were donated to Lung Cancer Canada in support of the Egbert De Jong Fellowship Fund. Lung Cancer Canada wishes to thank John de Jong for his commitment and support.



Joe Di Vincenzo and Team
Lung Cancer Canada Nepean

Joe (Giuseppe) Di Vincenzo, Family and Friends: Nepean Ontario

On June 13th, 2008, Joe Di Vincenzo rallied his family and friends to walk in the Canadian Cancer Society's Relay for Life as members of Team Lung Cancer Canada. Together the team raised \$1,000.00 for lung cancer research. Proudly sporting their Lung Cancer Canada t-shirts and banner each team member crossed the finish line with a feeling of hope and having made a real difference. Lung Cancer Canada salutes Joe Di Vincenzo and the entire Lung Cancer Canada Team of Nepean Ontario.



PK's Fight Club Triathlon

Kanitsch Family: Markham, Ontario

On June 21st, 2008 the Kanitsch family hosted the Pk's Fight Club Triathlon in honour of Mr. Peter Kanitsch. The event was well attended by family members, friends and general supporters. Over 30 athletes registered to participate in the triathlon. Lung Cancer Canada awareness materials were made available to attendees to raise awareness about the disease. All proceeds raised were generously donated to Lung Cancer Canada. Many thanks to the Kanitsch Family and friends for their efforts, generosity and support of Lung Cancer Canada.



Scott Secord and
his Grandfather

Scott Secord: Calgary Alberta

Last year Scott Secord raised \$5,000 in support of his Grandfather and lung cancer research. Scott resides in Calgary, not Edmonton, Alberta. Lung Cancer Canada apologizes for the error.

Volunteer Profile: Rose Yu, Markham Ontario



By Betty Jacoby, Lung Cancer Canada Volunteer Committee Chair



Rose Yu began her relationship with LCC in 2006. As a primary caregiver to her mother, she experienced the effects of lung cancer first hand. In search of additional information and treatment options, Rose attended many LCC information and educational events. A cancer diagnoses is stressful for everyone and Rose appreciated the knowledge and support she received for

her family. After the unfortunate death of her mother in May 2007, Rose was inspired to share her experiences and further LCC's mission.

Within the Chinese community, there is a large incident of Lung Cancer. As a result of her Chinese heritage, Rose felt the need to provide awareness and support to more diverse groups. She knew from personal experience that these diverse communities required additional assistance. Through

personal contacts, Rose provided LCC the opportunity to work with the Chinese community at information forums. During a two-day forum approximately 1000 patients and families attended LCC's sessions. It became apparent that LCC had found an area of great need in the community. Along with two other volunteers, Teresa Hau and San San Chung, Rose has been available to assist patients and families in need of information in both Mandarin and Cantonese. Enabling patients and concerned loved ones to specifically address their issues in their language of comfort, has been a great asset.

We at Lung Cancer Canada are inspired by the sensitivity and caring Rose demonstrates. Regardless of her busy career, Rose happily donates long hours providing the understanding and compassionate support to Lung Cancer patients. Rose is a valuable member of both LCC's Program and Volunteer Committee. It is a privilege to have her on our team.



Story of Hope: Maureen Lacey, Toronto, Ontario

By Natalie Daye, LCC Volunteer



With a lot of help from her beloved pets, family and friends, Maureen Lacey is slowly finding her way back after surviving two bouts of cancer, and considers herself a "very, very lucky woman." Maureen was 56-years-old and living in Pembroke, Ontario when she was diagnosed with very aggressive, stage-3 uterine cancer in the spring of 2006.

In October, she travelled to Ottawa for complete hysterectomy surgery, followed by 25 rounds of radiation. It was during one of her treatments, doctors performed a full body CT scan and discovered a spot on her left lung. "The doctors weren't sure if it was scar tissue or cancer," says Maureen, who thought it might have been scar tissue as well from an earlier case of bronchitis. What followed next was what Maureen describes as "utter shock," the news she might have lung cancer-completely unrelated to her uterine cancer. "I couldn't believe what was going on," she explains, "There is no real cancer in my family and I've always been fairly healthy, took vitamins and ate healthy foods."

Maureen had zero symptoms of lung cancer and believes her years of stress and losing a business, contributed to her vulnerability to the disease. "I think it had a lot to do with the combination of the stress from losing that business and a great deal of money too," she says.

A biopsy followed in December, where three samples of Maureen's upper left lung were taken. Maureen describes her experience as simply "going through the motions, in the beginning I was in shock, but now I'm a fighter," she says proudly. The biopsy revealed what doctors already suspected, stage one lung cancer-half of Maureen's upper left lung had to be removed. In the early summer of 2007, she moved back

to her hometown, Toronto and had the surgery. "When I found out I had lung cancer, I knew I had to come back home for more support," she says. It's the support Maureen received at home that got her through the recovery process, "They made me become a stronger fighter."

She mentions Dr. Andrew Pierre, a thoracic surgeon at Toronto General Hospital for his kindness and non-invasive surgical technique, with which he performed her surgery. Unlike previous methods of lung removal surgery, Dr. Pierre was able to go in from Maureen's back, and make three small incisions, rather than going in from the front of her chest, and spreading her ribs. Maureen was able to get up and walk the next day, but admits, "I was terribly scared, fighting for my breath." Trying to get used to breathing with one-and-a-half-lung takes patience and practice, but with a positive outlook and a dedicated will to live, she is determined to fight cancer no matter what.

Maureen admits there are good days and bad days-on the good days she'll cook up three meals a day, take her small boarder collie, "Providence" out for walks or visit the St. Lawrence Market in Toronto for some antique shopping. Her proudest accomplishment this summer was when she took her old Rally 3-speed bike out for a spin. Maureen also spends her free time volunteering at Lung Cancer Canada, and at her local church. She also enjoys a good read-history is her favourite subject. Maureen maintains a healthy diet of fresh fruits and vegetables and fish and follows up with her medical team every 6 months to insure the cancer is still in remission.

Maureen offers some parting words of advice for those fighting lung cancer as well, "Try and stay calm and be a stronger fighter with a positive attitude- moving full force ahead."



3RD Annual Leon Benoliel Golf Tournament

By David Benoliel, LCC Director and Fundraising Chair



Lung Cancer Canada Board Director, fundraising Chair and event coordinator David Benoliel (left) and Lung Cancer Canada President, Morty Sacks (right)

The 3rd Annual Leon Benoliel Invitational Golf Tournament in support of Lung Cancer Canada was enjoyed by over 70 golfers who turned out to support Lung Cancer Canada in spite of the heavy rains at Royal Woodbine Golf Course in Toronto.

The BBQ dinner and the inspiring talk by Roz Brodsky, a lung cancer survivor, were followed by the silent and live auctions with incredible items donated by over 100 event sponsors. We are grateful to the hole sponsors - RBC Royal Bank, Z. Stern Holdings, Paradise Homes, M. N. Sacks Insurance, Hilborn Ellis Grant, McMillan LLP, Goldhar, Rubinovich Shoib Accountants, Levine Insurance Agencies, Cyberplex, Numbercruncher.com, Superior Quilting, Comwave, Encore Sales, Vital Signs and Cunningham LLP.



LCC Tournament Golfers

The past 2 years this event has been in sole support of Lung Cancer Canada's free programs and services to those affected by lung cancer. A special thank you to the volunteer golf committee of David Benoliel, Darren Sacks, Louisa Benitah and Betty Jacoby.

We hope to see you next year for the fourth Annual Leon Benoliel Golf Tournament and please take some time to browse Lung Cancer Canada's website to learn more about this vital and dedicated cause.

For Patients & Caregivers: Communication, Coping & Support



By Julie Burnett, BA (Hons), BSW, MSW, RSW

Oncology Social Worker, Odette Cancer Centre, Sunnybrook Health Sciences Centre

"In terms of your emotional and social well-being, communication is an important factor in how you cope with your illness, treatment and recovery."

-Canadian Association of Nurses in Oncology

If you are a lung cancer patient or caregiver, you may find that often times it will be left to you to initiate conversation about the illness with other family and friends. This may be because those around you may fear invading your personal space and are hesitant about what to ask or say. Whether you choose to tell only close family or everyone with whom you socialize or work, there is one common principle that aids communication – to be as open and honest as possible. Without it, people may be left to fill in the gaps themselves, often erroneously, and may be left to imagine the worst.

This is especially true for young children who have little experience in understanding and dealing with illness. Open and honest dialogue with family and friends can harvest many positive outcomes including compassion, emotional support and practical assistance.

Remember that as a patient or caregiver it is important that you get the support that you will need along your lung cancer journey. For patients this may mean accessing a support group or supportive care service as people with lung cancer may often feel that no one else can truly appreciate how they are feeling. Support groups and related supportive care services can be helpful for patients as a means of identifying with other patients and thus hopefully, alleviate feelings of isolation. Feelings of sadness, anger, guilt, fear and shock, while common reactions to a lung cancer diagnosis can become problematic if they leave you feeling immobilized and unable to confront the situation. Take for instance denial, which is a common experience for so many newly diagnosed people. While initially it can allow for time to adjust to a new diagnosis, it can be

problematic if it prevents you from getting appropriate treatment and support. 'A support group and/or through a supportive environment with family and friends might help to discuss these difficult feelings with someone having gone through the same thing or with whom you trust.

Caregivers may often experience depression, helplessness, severe and constant fatigue, a decrease in work production and withdrawal from social contacts. These signs associated with caregiver stress are necessary to face up to prevent a caregiver from experiencing burnout. For caregivers, helpful tips include consulting with professionals, such as a Social Worker, to explore issues around caring for the patient and symptoms of caregiver fatigue. Also, seeking others who are caring for a loved one for mutual support can be helpful in terms of exchanging coping strategies and peer support. In addition to a healthy diet and regular exercise, setting aside time, each day if possible, for yourself to do whatever you find enjoyable and refreshing is also imperative to caregiver health.

Helpful Resources

Lung Cancer Canada: www.lungcancercanada.ca 1.888.445.4403

- Patient and Caregivers' Peer-Support Service and Information Resource Centre
- Lung Cancer Canada's Stories of Hope

This article was adapted from three previous articles by Julie Burnett found in Lung Cancer Canada's newsletter, Lung Cancer Connection:

"Communicating about lung cancer", Fall 2004.

"Taking care of our caregivers", Spring 2005.

"Reaction to a new diagnosis", Fall 2005.

¹U.S. National Cancer Institute (2005). www.cancer.gov "Taking time: Support for people with cancer and the people who care about them."

November is Lung Cancer Awareness Month... Globally



While around the world in countries like Brazil, Japan and Slovakia, November is officially noted as Lung Cancer Awareness Month, here in Canada we have no such designation.

It is the goal of Lung Cancer Canada to raise awareness of the importance of early diagnosis, improved treatment options and more research for lung cancer.

We can do this with your help in your community and province. Consider asking your Mayor, your MPP or MLA to officially declare, by proclamation or petition, November as Lung Cancer Awareness Month.

Once we have examples in cities and provinces, we will petition the federal government for this designation nationally.

In Ontario, this initiative for provincial designation has been spearheaded by LCC volunteer, Laurie Bass. First she collected over 2500 signatures in support and then she worked with her local MPP, now Ontario's Minister of Health, David Caplan, to have the petition read in parliament. The next step is for the formal approval and to be recorded in the Ontario Health calendar. You can read her story on LCC's web site at www.lungcancercanada.ca/stories.

For more information of how to make it happen in your community or province, contact LCC at info@lungcancercanada.ca. Let's get November recognized as LCAM in your province. **Together we can make a difference.**





Newsletter Survey

Please provide us with your feedback by filling out the questionnaire below.

1. Was the content of this newsletter (edition 11:08:02) comprehensive and patient friendly?

2. What aspects of the booklet did you value most?

3. What topics would you like to see covered in future editions of Lung Cancer Canada's newsletter?

4. If you are a healthcare professional, how have Lung Cancer Canada's newsletters been made accessible to lung cancer patients or caregivers at your hospital/treatment centre?

5. Any further comments:

Please fax to 416-785-2905 or mail to Lung Cancer Canada, 1896A Avenue Road, Toronto, Ontario M5M 3Z8



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