



The National Pensioners and
Senior citizens Federation

Incorporated May 1, 1954



La Fédération National des
Retraîés et Citoyens Agés

Incorporée le 1 Mai, 1954

NEWSLETTER

Winter

Volume 7 , Issue 4 , 2008

The opinions expressed in this publication are those of contributors and not necessarily those of the N.P.S.C.F newsletter

Winter

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The National Pensioners and
Senior citizens Federation

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Retraîés et Citoyens Agés

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Our History

The National Pensioners and Senior Citizens Federation (NPSCF) is a democratic, non-political, non-sectarian organization.

Our mission has remained the same for fifty years. The issues are as important today as when we started.

The NPSCF was started in Saskatoon, Saskatchewan, by provincial organizations from British Columbia, Alberta, and Saskatchewan. Groups from other provinces have since joined.

It is made up of provincial affiliates, groups, clubs, and individuals.

Objectives

The National Pensioners and Senior Citizens Federation is an organization devoted entirely to the welfare and best interests of Canada's elderly.

1. To promote and establish and foster, Seniors' Centres (called Clubs or Groups) and Regional and Provincial Seniors' groups throughout Canada.
2. To provide education for persons in the retired and senior citizens age group and other individuals interested in aging, and the status and well being of seniors.
3. to reach out to seniors who are lonely, or isolated, or at risk..
4. To provide programs, which promote healthy active lifestyles for seniors, thus sustaining mental and physical health.

5. To assist in developing the knowledge that seniors should learn during their aging process, through promotion of educational experiences.
6. To research the aging process, and any problems and benefits pertaining to the aged that might be of interest to the Federation, and to use the knowledge gained from that research to educate seniors and any other party or parties who are or might become interested in these concerns.
7. To provide opportunities for seniors to utilize their volunteer and leadership skills for the benefit of all persons.
8. To consult with other private and public organizations which offer similar services in order to gather any education information that will add to knowledge and be of use in seniors and the public.



Message from President

- *Art Field*

Just a few words to let you know what has been done since the Convention and what we have planned for the next two months.

We had an Executive meeting in Toronto on Jan. 25-26, 2008 at Holiday Inn West near Toronto Airport. It was decided the 2nd Vice President, Sheila Righi, who is new on the Executive and from Saskatchewan was assigned research duties. The 3rd Vice President John Gatens is website co-ordinator to work with the web master. John is new to the Executive and is from Ontario and has a CAW background. John represented the Federation at the Ontario Pension Reform Committee in Toronto on Feb. 4, 2008.

I appeared before the Committee in November 2007 in co-operation with the Small Investors Protection Association and the United Senior Citizens of Ontario. We hope this Committee can advise the Ontario government on bringing the pension act into this generation so employees and seniors of Ontario will be protected when they retire.

At our Executive meeting Johnston Insurance made a presentation on the business that our Federation members are doing with them on Medoc. We also had a meeting with Dianne Urquhart, our financial consultant, who updated their activities on white-collar crime. Since that meeting we were notified that the RCMP want to meet with us in the next month or so.

Also at the Executive meeting we went over our brief that we are presenting to the government of Canada and Opposition members in March. We also had a discussion about our Convention to be held in the fall.

The Congress of National Seniors Organization will be having a meeting in Ottawa in March, which I am on the board of representing the Federation. This organization is funded partly by the division of aging of Health Canada.

Our web page is up and running and our web master is adding to it as John, our 3rd Vice, gives him the information. There should be some new government departments on our link system soon.

The National Seniors Council, which was appointed in March 2007 by the Tory government, is up and running, with 12 members appointed from across Canada. There were over 100 people who applied, myself and Fern Haight our secretary submitted our names, but we were not successful. The Committee has seven women and five men on it; the breakdown is British Columbia two members, Alberta one, Saskatchewan one, Ontario two, Quebec three, New Brunswick one, Nova Scotia one and Newfoundland one. Jean Guy Sauliere is chair of the Council who is from Ontario, in fact lives in Ottawa. I know Jean Guy well as he was our Chair at the Congress of National Seniors Organizations. The objectives of the National Seniors Council are as follows:

- A. Advise or comment on emerging issues and opportunities related to the quality of life and well-being of Seniors, both now and in the future.
- B. As needed, undertake activities such as commissioning research, convening expert panels and roundtables and holding consultation meetings.
- C. Deliver well-balanced advice, taking into account the views of experts, seniors, organizations and groups that provide seniors' programs and services, provincial/territorial advisory bodies on seniors and other relevant stakeholders and interested parties; and advisory bodies on seniors; and other relevant stakeholders and interested parties.
- D. Ensure a comprehensive and collaborative approach in its examination of the policies, programs and services that impact the lives of seniors by consulting with other federal departments, other levels of government and advisory bodies involved in senior-related efforts.

This sounds a lot like our Federation's objectives that we have been asking for years. Their budget is a lot more than ours. They have already had five elder abuse clinics in Toronto, Montreal, Calgary, Vancouver and Moncton. When we are in Ottawa when we get a meeting, we will be after some help financially to help the Federation to look after seniors.

Our brief was done by our 1st Vice President Art Kube, and is being collated and will be going out in the mail to our MPs shortly.

I see ads on TV and in magazines on reverse mortgages for seniors. These ads are very misleading and are not as rosy as the ads look. I am saying you need to check it out with different people as it could cost a lot more than they're worth in the long run. In closing, the best thing about the future is that it comes only one day at a time.

First Vice-President's Message

by Art Kube

SENIORS' HEALTH, HOUSING AND INCOME IN AN ELDER FRIENDLY CITY.

The World Health Organization has released a Global Age – friendly Cities Guide, which deals with all issues effecting seniors living in cities. The guide, which has been developed with three Canadian Cities as models, has been adopted by the three levels of government, as a possible planning guide. A number of Provinces have set up Age-friendly Leadership Networks to implement the guide. The Council of Senior Citizens' Organizations of British Columbia (COSCO) is using this guide to develop a policy frame-work for the area of health, housing and income for seniors.

To bring this about COSCO is organizing a two-day conference, September 15th and 16th, 2008 in Vancouver, entitled "SENIORS' HEALTH, HOUSING AND INCOME IN AN ELDER FRIENDLY CITY". The conference will bring together representatives from seniors groups, social planners, representatives from University departments like Gerontology, Social and Medical Schools, Social Planning Councils and representatives from the three levels of government. In addition COSCO is inviting representatives from seniors' organizations from other provinces to this ground-breaking conference.

The conference will deal with all aspects of seniors' health and healthcare in line with the changing demographics, emphasizing health promotion, illness and accident prevention as tools for a better quality of life for seniors. Part of the conference will deal with seniors' housing, assisted living, long-term and palliative care, the whole concept of aging in place and the role of home support in maintaining the independence of seniors'.

The question of poverty will be addressed, especially among surviving female spouses and ways and means to combat it. The role of government in reducing and eventually eliminating poverty is an issue, which will be addressed by representatives of Government. The conference will deal with the need for strong seniors' organizations, and government support for them, to enable them to build their capacity to participate in policy formation. The question of how all groups can work together, to bring about elder friendly cities will have prominence and role of seniors' helping seniors' will also be aired.

The format of the conference will have the Honorable Roy Romanow as keynote speaker, a number of expert speakers who will address key issues, and workshops with a lot of input from all participants, especially seniors'. All participants will receive health literacy material, the Elder-friendly City Guide and other pertinent material. Conference brochures including registration forms will be sent out in May. The conference precedes the convention of the National Pensioners and Senior Citizens Federation, which is also held in Vancouver on September 18th, 19th and 20th. Come to beautiful Vancouver and help to set the policy for the perimeter of an age friendly City.

Art Kube is the President of COSCO, serves on the British Columbia Age-friendly Leadership Network and is the 1st Vice-President of National Pensioners and Senior Citizens Federation.

**A NOTE FROM
Sheila Righi
2ND Vice President**

CHANGING LIFE STYLES

Seniors and those approaching 55+ need to focus on the kind of life style they are going to maintain, after years of getting up early in the morning, rushing around to make sure the family is taken care of and you are out of the door and at work on time. With a feeling of what am I going to do with my time, you have to consider a good exercise program, whether at home or a gym with instructor teachers providing the program that best suits your individuality, also diet has to be dealt with as we are being made aware there are a lot of obese people in our society, even in our younger generation. Canada's Food Guide organizes foods into groups and suggest we choose a number of servings from each group everyday.

An updated version was released in February 2007, has recommendations for number of servings for different age and life stage groups, to meet the changing needs as we grow and mature. It provides guidance for making the best choices in each food group – for example among the grain foods, we are advised to make a least half of our grain products whole grain each day.

The food guide recommends serving sizes for the foods in each group, and you may be surprised to learn that a little food goes a long way towards good nutrition. Example of that statement is

- Vegetables and fruits ½ cup or a serving the size of a tennis ball.
- Cereal half a standard cereal bowl, or the size of a light bulb.
- Cheese 30g, 2 slices of processed cheese.
- Peanut Butter, 2 tablespoons. Nuts ¼ cup
- Meat, 1 small chicken leg; 1 small hamburger; 1 unbreaded fish fillet; about the size of a deck of playing cards.
- Butter, 1 teaspoon; a pat of margarine or butter; the size of the top half of your thumb.
- Banana, 1 medium.

To help you with grocery shopping the healthy way and a balanced diet, the “Heart and Stroke” Foundation created a program called “Health Check”, which is easily identified with their symbol a round red circle; with a white check mark in the middle of the circle. Every Health Check product has a message on it explaining why it is part of a healthy diet.

Here are some healthy eating tips.

- Enjoy fruit with breakfast snacks
- Add more vegetables to sandwiches, pasta, etc.
- Choose whole grain cereal and whole grain breads
- Lower fat milk a light or fat free sour cream
- Fish rich in omega-3 fats (salmon, sardines)
- Use nuts instead of croutons in your salads

Healthy body weight is one of the goals each individual wants to achieve so attention has to be portion sizes. But eating is only half of the battle.


Physical activity is essential to achieve and maintain healthy body weight. Health Canada recommends 60 minutes of activities each day in periods of 10 minutes each.

For those who want to make some lifestyle changes, there's no time like the present, this will help to keep you in your own home and not in long term care to live out your remaining years. Volunteering is another way to help sustain a healthy lifestyle, mentally, physically and a feeling that you've made a contribution to society.

Respectively Submitted
Sheila Righi
2nd Vice President

3rd Vice President

- John Gatens



Greetings. I hope by the time you read this the worst of winter will be behind us. Our winters can be very cruel to those of us who have any form of disability since it makes it very difficult to get around.

Many of you on the other hand will have gone to warmer climes, and escaped the very bitter cold that hit us this winter. Like many of you I will have a little of both and spend a few weeks down in Florida. Mean while I have spent part of the winter attending school. I am one of the fortunate whose union negotiated funds on behalf of retirees from a number of large companies such as Chrysler, General Motors, and Ford.

The program I am referring to is "Surfing Seniors." Many seniors were afraid to venture back to school since for most it has been close to fifty years since last they attended.

Classes as suggested by this program allowed retirees and their spouses, to attend classes introducing them to the computer, internet and the marvel of modern technology, which opens to us through computers.

I never thought school could be such fun, surrounded by men and women eager to learn how to gain access to this modern miracle. Unlike our youthful days, we were all encouraging the teachers to stay longer in class and show us more. The courses offered each spring and winter were progressively more intricate and complicated. The computer-training program began with INTRODUCTION TO COMPUTERS followed by INTRODUCTION TO THE INTERNET, then INTRODUCTION TO WORD PROCESSING. The latest of these courses

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was MICROSOFT OFFICE EXCEL. Each session or year, they offered refresher courses, which included the use of cameras etc.

All in all these courses were fun and allowed seniors to learn at their own pace and without embarrassment.

I recommend to all seniors given the chance, to learn a little about computers and enjoy a truly fascinating world that was never available to us in our youth. Do not be afraid, if all these kids can do it! So can you. Good luck and good health.

Yours sincerely
John Gatens 3rd Vice

ATM – PIN Number Reversal – *Good to Know*

If you should ever be forced by a robber to withdraw money from an ATM machine, you can notify the police by entering your PIN# in reverse. For example, if your pin number is 1234, then you would put in 4321. The ATM system recognizes that your PIN number is backwards from the ATM card you placed in the machine. The machine will still give you the money you requested, but unknown to the robber, the police will be immediately dispatched to the location. This information was recently broadcasted on CTV by Crime Stoppers however it is seldom used because people just don't know about it.



From the Treasurer's Desk

- Joyce Mitchell

A belated Happy New Year to everyone. Thanks so much to all the clubs who have submitted their dues for 2008 already. It really is appreciated. If by any chance you do not know your club charter number, it is on the label of your newsletter. Also, thanks to all the individuals who submitted their dues, and it has proven that having the due date on your label is a good reminder.

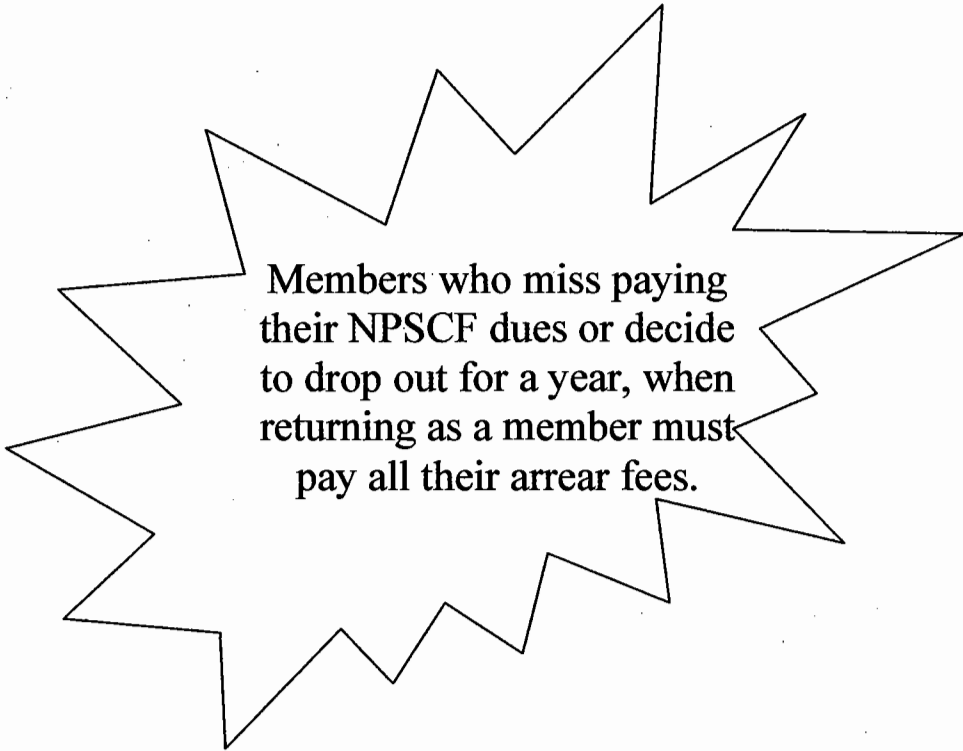
As you will hear from our President and others, we had our executive meeting in Toronto in late January. This proved very productive and helped define our goals and objectives. I presented the end of year financial statement to the executive and we continue to be in a sound reasonable financial position.

The New Horizon Capital Grants are in process at the present time, as a note I sit on that board in Ontario, and everyone is working hard so that clubs may begin their projects if they are successful in obtaining funding.

Take care of yourselves, and continue being so prompt with your dues.

YOURS FOR THE BETTERMENT OF SENIORS

Joyce
Mitchell
NPSCF
Treasurer



Members who miss paying their NPSCF dues or decide to drop out for a year, when returning as a member must pay all their arrear fees.

From My House to Yours

- Secretary

Our executive meeting in Toronto, the end of January, was very productive. The executive got acquainted with each other and are now ready to work together as a team. There are many issues that are of a concern to seniors and each needs to be addressed. This becomes the duty of the National Seniors and so the work of the N.P.S.C.F. organization is endless.

I was overjoyed to read in the paper this week, the heading "Coverage approved for Cancer Drug". I had skin cancer as a young girl, my father died from bone cancer, my 10 year old sister died from leukemia, my younger sister died from breast cancer, my brother passed away from prostate cancer and my older sister has had surgery for ovarian cancer, leaving one in a family of six supposedly free from this dreaded disease. Needless to say I am very anxious and concerned about cancer and interested in all research done in the field of cancer.

Avastin is a new cancer drug used for the treatment of patients with advanced colorectal cancer. This drug does not cure colorectal cancer, but it can extend lives and alleviate suffering. Up until now, patients with advanced colorectal cancer have had to pay for Avastin themselves, at an average cost of \$2000 per dose. At this rate it doesn't take long to deplete your finances. Yet, it is a life or death situation.

Colorectal cancer is the second most common cancer in men (after prostate cancer) and women (after breast cancer) in Saskatchewan.

In 2005, about 650 Saskatchewan residents were diagnosed with colorectal cancer and 250 died from the disease.

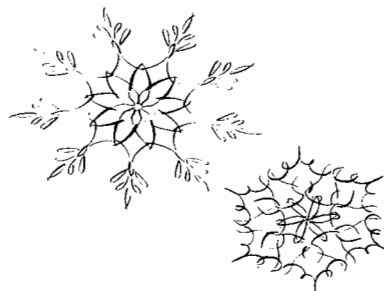
I was very pleased that the Government of Saskatchewan has approved funding for Avastin. Eligible patients will be able to receive Avastin in combination with chemotherapy in our Saskatchewan hospitals.

Also too, Health Minister, Don McMorris said the government is considering options for government/patient co-payment on new, high cost drugs.

Saskatchewan also participates in the national Joint Oncology Drug Review process for assessing oncology drugs. The program is the first step toward a permanent, national oncology drug review. It will help ensure that all provinces benefit from the same evidence and decision-making principles about new cancer drugs

I commend the Government of Saskatchewan for the steps they have taken regarding new drugs for the treatment of cancer, helping to prolong the lives of the terminally ill.

Respectfully submitted
Fern Haight



DID YOU KNOW...?

MEDOC® Travel Insurance automatically provides the added protection of Trip Cancellation, Trip Interruption and Trip Delay insurance. If you were to purchase these coverages separately, they can often cost more than the emergency medical insurance premium available in the marketplace (*which often does not include these features*).

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MEDOC® is underwritten by Royal & Sun Alliance Insurance Company of Canada and is administered by Johnson Inc. Johnson Inc. and Royal & SunAlliance share common ownership.

PERSONAL INTERNET AND IDENTITY THEFT

Did you know that identity theft is becoming an increasing problem in Canada? Would you be surprised to learn that recent reports indicate that two million Canadians have been affected by this crime? Identity theft is a growing concern and to help policyholders clean up the mess left behind by an identity theft event, Unifund Assurance Company and Johnson Inc. provide **Personal Internet and Identity Theft Coverage**.

Personal Internet and Identity Theft Coverage is available to all Unifund policyholders who currently have or purchase Preferred Service Home Plus (PS-Home Plus). All PS-Home Plus planholders receive this benefit at no additional charge to their current level of premiums. The Personal Internet and Identity Theft benefit provides up to \$30,000 coverage for either a PS-Home Plus planholder or their spouse residing in the same household who suffers from a stolen identity event. This coverage provides financial support for: reasonable costs incurred in Canada for refiling applications for loans, credit cards and credit reports as well as any necessary documentation; long distance calls; postage; lost wages due to time taken off work to correct records; and legal (including criminal) defense fees and expenses arising from the event.

If you would like to learn about Johnson's Preferred Service Home-Auto plan for your employees, please contact mcturner@johnson.ca or bmaxwell@johnson.ca.

STROKE IDENTIFICATION

During a BBQ, a friend stumbled and took a little fall – she assured everyone that she was fine (they offered to call paramedics) she said she had just tripped over a brick because of her new shoes.

They got her cleaned up and got her a new plate of food. While she appeared a bit shaken up, Ingrid went about enjoying herself the rest of the evening.

Ingrid's husband called later telling everyone that his wife had been taken to the hospital – (at 6:00 PM Ingrid passed away.) She had suffered a stroke at the BBQ. Had they known how to identify the signs of a stroke, perhaps Ingrid would be with us today. Some don't die They end up in a helpless, hopeless condition instead.

It only takes a minute to read this.

A neurologist says that if he can get to a stroke victim within 3 hours he can totally reverse the effects of a stroke Totally. He said the trick was getting a stroke recognized, diagnosed, and then getting the patient medically cared for within 3 hours, which is tough.

RECOGNIZING A STROKE

Thank God for the sense to remember the '3' steps, STR. Read and Learn!

Sometimes symptoms of a stroke are difficult to identify. Unfortunately, the lack of awareness spells disaster. The stroke victim may suffer severe brain damage when people nearby fail to recognize the symptoms of a stroke.

Now doctors say a bystander can recognize a stroke by asking three simple questions:

- S * Ask the individual to SMILE
- T * Ask the person to TALK and SPEAK A SIMPLE SENTENCE (Coherently)
(i.e. It is sunny out today)
- R * Ask him or her to RAISE BOTH ARMS.

If he or she has trouble with ANY ONE of these tasks, call 999/911 immediately and describe the symptoms to the dispatcher.

New Sign of a Stroke ----- Stick out Your Tongue

NOTE: Another 'sign' of a stroke is this: Ask the person to 'stick' out his tongue .. If the tongue is 'crooked', if it goes to one side or the other, that is also an indication of a stroke.

SPECIALTY SOUP

This delicious soup is packed with ingredients shown in clinical studies to relieve joint pain, prevent cancer and heart disease, reduce blood sugar and prevent memory loss.

Ingredients:

1 onion	1 ½ tsp. ground turmeric
2 carrots	1 Tbsp. Grated gingerroot
2 celery sticks	1/8 tsp. cayenne pepper
3 medium-sized potatoes	½ tsp. curry powder
4 medium-sized tomatoes	4 strands of saffron
14-oz. Can of chickpeas	1 bay leaf
5 cups vegetable stock	1 Tbsp. fresh squeezed lemon juice
1 tsp. ground cinnamon	

Preparation:

1. Dice celery, onion and potatoes. Peel and dice carrots. Dice tomatoes, remove seeds
2. Pour 1 ½ cups of the veggie stock into large saucepan. Add onions and simmer for a few minutes.
3. While onions are simmering, deal with the spices. Mix in the cinnamon, curry, turmeric, cayenne, and ginger and add 2 Tbsp. Of the vegetable stock. Mix well.
4. Add this mix to the onions and stock already being heated.
5. Add the rest of your veggie stock to the onion and stock mix and let soup return to boil. Stir, then cover and heat.
6. After 5 minutes, add the potatoes, tomatoes, celery, and carrots and allow it to simmer in the covered saucepan for 20-30 minutes or until carrots and celery are tender.
7. Pour in the chickpeas, black pepper, saffron, and fresh-squeezed lemon juice and heat thoroughly before serving.
8. Enjoy

MEDOC[®] Travel Insurance

It's never been easier to travel with peace of mind. Enjoy the benefits of MEDOC Travel Insurance, including comprehensive coverage at competitive rates.

The MEDOC Plan is designed to provide travellers with all the protection and support they need should a medical emergency arise.

In addition to hospital and medical costs, there are many other costs that can be incurred in a medical emergency including loss of pre-paid travel arrangements, additional transportation and accommodation, air ambulance and / or medical assistance in returning home. Protecting your members from the cost of an emergency is essential, however, their need for advice and support at that difficult time is equally as critical.

The MEDOC Plan includes the services of a Travel Assistance Company, Global Excel Management Inc., who will provide your members and their family the 24-hour support they need through a 1-800 medical helpline. Global Excel Management Inc. will provide:

- 24/7, multilingual assistance hotline.
- Claims assistance and medical monitoring.
- Confirmation of coverage.
- Direct payment of claims to the Medical Service Provider, whenever possible.
- Assistance with replacement of lost travel documents and tickets.
- Language assistance and help in obtaining legal services.
- Pre-trip planning.

MEDOC offers coverage for any eligible sudden, unforeseen medical emergency that arises while travelling outside the province or territory of residence or outside Canada. Medical emergencies and eligible expenses will be covered to a maximum of \$5,000,000 per person per emergency. Covered expenses include:

- Hospital, physician, surgical and medical treatment, drugs and medication, x-rays, and nursing services.
- Air emergency transportation or evacuation.
- Transportation to the bedside for a family member.
- Return of vehicle up to \$3,000.
- Return of minor dependent child with escort.
- Additional hotel and meal expenses up to \$150 per day, to a maximum of \$1,500.
- Repatriation or Burial at destination up to \$5,000.
- Pet return up to \$500.
- Emergency dental up to \$5,000.
- Emergency relief of dental pain up to \$300.
- Incidental hospital expenses up to \$250.

All amounts are in Canadian currency

Depending on the Plan design, up to \$8,000 Trip Cancellation, Interruption & Delay coverage per insured person, per trip is available if the member, a family member, close business associate, caregiver, travelling companion or travelling companion's family member suffers a medical emergency before or during the scheduled trip. For Trip Cancellation coverage to be in effect, the MEDOC plan must be in force within five business days of making a deposit or full payment for your travel arrangements, whichever occurs first and before your day of departure.

The MEDOC Plan balances the needs of both healthy travellers and travellers with pre-existing medical conditions. Members will have the opportunity to purchase the Plan that is best suited for them depending upon their travel needs.

Enjoy the benefits of MEDOC because there's no room for worry in your suitcase.

Some conditions, limitations and exclusions apply, as outlined in your MEDOC Travel Insurance policy, available from Johnson Inc. To be eligible for trip cancellation, your policy must be in force within 5 business days of booking your trip, or making a deposit or full payment for your trip. MEDOC is a registered trademark of Johnson Inc. MEDOC is underwritten by Royal & Sun Alliance Company of Canada and is administered by Johnson Inc. Johnson Inc. and Royal & SunAlliance share common ownership.

***BEST WISHES TO THE
NATIONAL PENSIONERS AND
SENIOR CITIZENS FEDERATION
FROM QUEBEC***

FROM, EVELYN MCOUAT



Representing Seniors Since 1950

President of COSCO,
Art Kube
*Congratulations
from NPSCF.*

MEDIA RELEASE

COSCO ELECTS ART KUBE AS PRESIDENT

The Council of Senior Citizens' Organization of British Columbia (COSCO) has elected Art Kube as its President for two-year term. Mr. Kube has been active in seniors' organizations for the past 14 years. He helped COSCO to grow to its present size of 75 affiliated seniors' organization with a combined membership of approximately 90,000. Art Kube succeeds Rudy Lawrence who served COSCO with distinction for the past ten years. Lawrence declined to stand for election due to illness in the family and also because he expressed the need for a changing of the guard.

During the last six years COSCO has played a major advocacy role on behalf of seniors in the Province. It has been at odds with the Campbell Government on healthcare issues which have negatively impacting seniors'. Presently COSCO is involved in a pioneering way in the area of illness and accident prevention education among seniors. It is planning a major conference on the World Health Organizations Program of "Age Friendly Cities". COSCO is able to attract may highly trained and committed seniors to its Executive positions and as volunteers for its numerous programs and activities. It operates solely with volunteers who come from all walks of life and who buy into the COSCO's commitment of "SENIORS HELPING SENIORS". It has 32 trained seniors' advocates around the Province who are helping seniors to deal with service providers and different government agencies.

In electing Art Kube it assures that the course set for COSCO by Rudy Lawrence will continue. Art Kube served in the past as President of the United Way, as President of the BC Federation of Labour, presently he serves as Treasurer of the New Vista Society and as 1st Vice President of the National Pensioners and Senior Citizens Federation. He is 73 years young, is married and lives in Surrey.

For more information on COSCO, log on its web-site www.coscobc.ca. Art Kube can be reached at 604-576-8000 or at 604-312-2089 or at aakube@telus.net.

CONVENTION 2008

The 2008 National Pensioners and Senior Citizens Federation convention will be held in Surrey, BC at the Days Hotel, 9850 King George Highway on September 17,18, 19 and 20th/08. A block of rooms are booked for the NPSCF convention. Room rate is \$89.00 per night. Phone numbers for the hotel are 1-604-588-9511 or toll free 1-800-663-0660. a convention call, with all details, will be out in the spring and summer mail outs.

Labels on individual newsletters have a date, which is the anniversary date of their policy.

Individual membership fee is \$25.00
Family rate is \$35.00

The number on your newsletter is your charter number. If you are unable to find your charter, notify Joyce Mitchell and she will send you a new charter.

NEW DRUG RULES POSE GRAVE RISKS: CRITICS

(Taken from CGPA Digest)

The federal government is about to overhaul the way drugs are regulated in Canada to give consumers faster access to breakthrough treatments, but some medical experts and political critics are worried the changes will turn Canadians into guinea pigs for new drugs that haven't been adequately tested.

A new regulatory system, outlined in a broad package of changes to consumer product and food regulations announced last December, would allow certain drugs to be quickly approved for sale without the safety evidence that is normally required.

The changes are designed to update Canada's aging drug regulation system to allow faster access to new blockbuster pharmaceuticals and let health officials evaluate potential risks throughout a drug's lifespan, instead of focusing on safety mainly before they're approved.

But without massive changes in the way health officials monitor drugs once they hit the market, the new system could post serious risks to consumers, said David Juurlink, clinical pharmacologist and drug safety researcher at Toronto's Sunnybrook Health Sciences Centre.

"I suppose it's laudable to want to get new drugs on the market sooner, but I think we have to be very, very aware of the fact the faster we bring something to market, the less we will know about its risks and benefits. That has got to be a bad thing," he said.

Others say it's a mistake to even consider reducing the level of safety evidence required before a new drug is approved, focusing instead on assessing safety once drugs are already on the market.

"I question the need for relaxing premarket standards when currently they're not catching a significant portion of the drugs with risks." Say Mary Wiktorowicz, chairwoman of the school of health policy and management at Toronto's York University.

Recent high-profile examples of drugs – such as Vioxx and Avandia – that had to be pulled from the market even after going through rigorous premarket test, highlight the need for thorough trials both before and after drugs are available to the public, said Judy Wasylcia-Leis, health critic for the federal New Democratic Party.

"I would like to see a much more rigorous process at the front end," she said. "We're putting drugs on the market that aren't fully tested and for which there may be serious problems and we're putting peoples' lives at risk."

Health Canada first floated the idea of adopting a progressive licensing system about a year ago and has been consulting with experts and the industry in recent months. But the new system could take effect very soon under the recent legislative package.

Many of the details outlining the specifics for the operation of new system and the type of evidence that would be required before drugs hit the market won't be made public until federal regulations are published in coming weeks. Health Canada officials declined requests seeking information on the changes.

.... Continued from page 16 New Drug Rules Pose Grave Risks

But in documents posted on its website, Health Canada said the new system would require increased safety monitoring, changes to help improve reporting of problems experienced by patients and greater transparency, such as public disclosure of clinical drug trials that companies submit to the government.

The changes are a step toward making necessary improvements to the drug safety monitoring system and aligning Canada with similar developments in other countries, said Michael Paterson, a scientist at the Institute of Clinical Evaluative Sciences.


Although the new system calls for greater scrutiny, Ms. Wasylycia-Leis said the government must establish an independent body to review drugs in order for it to work.

"We can't have this system of set standards on paper and then let the industry see if they're safe or not. That's like putting the fox in charge of the hen house."

Experts say other measures that must be adopted to ensure a move to progressive licensing doesn't compromise safety include public disclosure of the rationale for approving new drugs, establishing public registries to address the difficulty of tracking adverse reactions to drugs, and setting a requirement for continuing, large clinical trials once the drugs hit the market.

Regardless of the safeguards that are put in place, reducing the safety evidence required before new drugs are approved will make it very difficult to monitor and catch problems before it's too late, said Jim Wright, professor in the anesthesiology, pharmacology and therapeutics department at the University of British Columbia.

"It's very difficult to pick up things after (the drug) is on the market. That's not what we want," he said. "I think it sounds to me like it's moving toward a less rigorous review. That's the whole issue."

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