



# THE BRAIN TRAIN

*Get on board with BIAC*

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## In A Nutshell

by Barb Butler- Editor

January. A time when we sometimes make resolutions to do things to better ourselves and make the world a better place to live. Resolve to read The Brain Train through and through- I am sure you will find things of interest to you.

Thank you to all who contributed articles for this issue. A warm hello to those who emailed with comments about our last issue. I can be reached at [rbbutler@sasktel.net](mailto:rbbutler@sasktel.net) with contributions or suggestions.

On behalf of the Brain Injury Association of Canada I wish you a healthy happy 2006. I hope many of you join us at our AGM in July in Montreal.

## Looking Ahead

by Mireille Provost, President

At this time of the year, we are starting to prepare for the annual general meeting. We have to report on our activities, human and financial resources but most importantly, we are looking for input to make this organization a viable source of information.

We are a young organization which is striving to make a difference with the help of sponsors and volunteers. Injury prevention is everybody's business but what belongs to everybody doesn't belong to anybody.

Take ownership of your actions and work with us to prevent brain injury.

## HAWAIIAN OYSTER ODYSSEY (HOO) TAKING OFF ACROSS CANADA!

by Howard Brown, BIAC Fundraising Chair

**Wow! What a start to the new year!**

- We have eight Hawaiian Oyster Odysseys (HOO) on the go in eight provinces.
- We have also arranged for a national door prize of two tickets to Hawaii, courtesy of Air Canada.
- We have confirmed eight new corporate sponsors - Bombardier, the Insurance Bureau of Canada, Diageo, Scotiabank, RBC Financial, GlaxoSmith Kline, DOT Group of Companies and Tommy Bahama.
- We are full steam ahead for the HOO's in Halifax on February 8, Toronto on February 20, Saskatoon on March 17, Edmonton April 27, Gatineau May 30 and P.E.I. June 17th. (See back page for complete list)
- In Halifax, chair Ian Ross has arranged for one of the special guests to be Bruce Beaton of the Grey Cup Champions Edmonton Eskimos.
- In Toronto, co-chair Julie Katz has arranged for CFL legend and brain injury survivor Terry Evanshen to speak. Julie is Vice-President of the DOT group of companies, which is sponsoring Terry's appearance.
- In PEI, BIAC Board member Marie Mossey is looking to host the June P.E.I. HOO at her house.

The best news of all is almost every HOO is going to be a partnership:

- in Halifax with the Brain Injury Association of Nova Scotia
- in Toronto with the Brain Injury Society of Toronto
- in Saskatoon with the Saskatchewan Brain Injury Association
- in Edmonton with the Brain Injury Association of Alberta
- in Gatineau with the Outaouais Brain Injury Association/the Association des neurotraumatisés - Région de l'Outaouais (ANO)
- in Souris, P.E.I. with the Brain Injury Association of P.E.I.
- in St. John's with the Brain Injury Association of Newfoundland & Labrador
- in Vancouver (working on a partnership with the newly formed Brain Association of British Columbia)

We also have sponsoring restaurants in Halifax (Waterfront Warehouse), Toronto (Miller Tavern), Saskatoon (Sheraton Hotel), Edmonton (The Bank) and Gatineau (Perfume).

Many thanks to all.

**Please join us.**

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## Brain Injury Association of Canada (2005-2007)

### Brain Injury Association of Canada

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### Board of Directors (2005–2007)

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### Volunteers

It would be impossible to accomplish as much without the help of many dedicated volunteers who are doing translation, preparing and editing this newsletter, building the website and much more.

# RECOGNIZING A STROKE

Sometimes symptoms of a stroke are difficult to identify. Unfortunately, the lack of awareness spells disaster. The stroke victim may suffer 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:

1. Ask the individual to SMILE.
2. Ask him or her to RAISE BOTH ARMS.
3. Ask the person to SPEAK A SIMPLE SENTENCE (Coherently) (i.e. It is sunny out today?)

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

After discovering that a group of non-medical volunteers could identify facial weakness, arm weakness and speech problems, researchers urged the general public to learn the three questions. Widespread use of this test could result in prompt diagnosis and treatment of the stroke and prevent brain damage.

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Lisez ce qui suit, ça pourrait toujours servir...

Lors d'un BBQ, Julie trébuche et fait une chute. Elle affirme aux autres invités qu'elle va bien et qu'elle s'est accroché les pieds à cause de ses nouveaux souliers. Les amis l'aident à s'asseoir et lui apportent une nouvelle assiettée. Même si elle a l'air un peu secouée, Julie profite joyeusement du reste de l'après-midi.

Le mari de Julie téléphone plus tard à tous les amis pour leur dire que sa femme a été transportée à l'hôpital.

Julie meurt à 18h. Elle avait eu un accident cérébrovasculaire lors du BBQ. Si les personnes présentes avaient été en mesure d'identifier les signes d'un tel accident, Julie aurait pu être sauvée.

Prenez quelques minutes pour lire ceci et peut-être sauver une vie:

Un neurologue dit que s'il peut atteindre une victime d'ACV à l'intérieur de trois heures, il peut renverser entièrement les effets de la crise. Il affirme que le plus difficile est que l'ACV soit identifié, diagnostiqué et que le patient soit vu en moins de trois heures par un médecin.

Reconnaître les symptômes d'un ACV : Les médecins disent qu'un témoin peut identifier un ACV en posant trois questions très simples à la personne en crise :

1. Lui demander de SOURIRE.
2. Lui demander de lever LES DEUX BRAS.
3. Lui demander de PRONONCER UNE PHRASE TRÈS SIMPLE (ex. Le soleil est magnifique aujourd'hui).

Si elle a de la difficulté à exécuter l'une de ces tâches, appelez une ambulance et décrivez les symptômes au répartiteur.



## BOOK REVIEW: The Horn of a Lamb

**From the author of the internationally acclaimed “The African Safari Papers” comes a story of a man caught between civic responsibility and sweet revenge.**

**Meet Fred Pickle.** He has a severe brain injury. For the past seven years Fred has lived under the loving guardianship of his uncle Jack on his sheep farm. Fred’s annual creation of a perfect neighbourhood rink is a joyous quasi-religious ritual for him. And his local NHL team means more to him than it would to the average fan; it renews hope and happiness.

So when the team’s owner announces he is moving the team, Fred’s world begins to fall apart. Torn between the law-abiding influence of Uncle Jack and the radical urgings of Badger, an 81-year-old anarchist, Fred must decide whether a plot of vengeance against the owner is a path to independence or oblivion.

“The Horn of a Lamb” charts an unforgettable year in the life of the incomparable Fred Pickle, a year that begins with the promise of another hockey season, and ends in a way few could have foreseen—especially the lambs.

The Horn of a Lamb – a novel with a hero who has a brain injury but, oh, so much more ...

*By Robert Sedlack*



**W**hen I began work on my second novel, “The Horn of a Lamb” I was focused on the impact of what happened to the hockey fans of Winnipeg when they lost the Winnipeg Jets. As time passed I decided it would be more interesting to focus on the effects upon one person and never identify what Canadian city lost its team. As more time passed I decided it would be even more interesting if that person had suffered a brain injury. That’s when my novel shifted from being a story about losing an NHL franchise to a story that explores a year in the life of Fred Pickle.

Having worked many hours as a volunteer in a school for the visually impaired I was somewhat acquainted with the challenges of those with disabilities. And these children were not just visually impaired. Almost all of them had severe emotional and mental difficulties. It was a revelation for me to meet someone who had suffered a brain injury. It altered my perception of the word “disability” and changed the course of my novel.

My relationship with my friend who suffered a brain injury from a ski accident was not without its bumps and bruises. But through it all I was struck by his spirit, his humour and his courage. I was also struck by the challenges that people with brain injury face (aside from the obvious and extraordinary ones of learning to walk and talk again). Not to take those lightly because I don’t. But somebody born with a disability has never known another life.

My friend remembered his former life before his accident; how athletic he was, how he was popular with the girls, how daring he was. It never seemed to bother him but it haunted me and this became a strong theme in my novel: Fred remembers.

It was never my intention to write a novel that captured the truth of everybody who has ever suffered a brain injury. I think that readers of this novel who know somebody with a brain injury may find similarities with Fred Pickle but then again they might not. What I hope they find is somebody who is not just “disabled” or “challenged” or “handicapped.” I put quotation marks around those words because I never thought of my friend as a label or somebody who should be imprisoned inside quotation marks or any other type of marks. I thought of him as a hell of a good friend.

This book was never dedicated to anyone. But if there were readers I would want more than any others, they would be readers who are close to someone with brain injury. If there were to be a dedication today, it would be to those who have suffered brain injury and to those who stood beside them.

If Fred Pickle can be a friend for a reader for a few nights (especially a reader who has been touched by brain injury) then I would feel that my years spent working on this novel were worth every second.



# The Synapse

**A** synapse is a junction between two nerve cells, where the club-shaped tip of a nerve fiber almost touches another cell in order to transmit signals. This column can be seen as a link between us all and will let you know what is happening in other parts of Canada.

The Canadian Brain and Nerve Health Coalition (CBANHC) would like to remind members that **Brain Awareness Week** is coming up on the week of March 13 – 19, 2006.

Brain Awareness Week (BAW) is a series of events held around the world to increase public awareness about the brain. Dedicating a full week to brain awareness allows voluntary health organizations and other groups to hold events that will raise public awareness and generate support for neurological diseases, disorders and injuries.

Organizations interested in recognizing Brain Awareness Week can visit the Society for Neuroscience Brain Awareness Week website at <http://apu.sfn.org/baw/> or the Dana Alliance for Brain Initiatives website at [http://www.dana.org/edab/baw/index\\_en.cfm](http://www.dana.org/edab/baw/index_en.cfm) for more information and ideas on how to participate.

This year's Brain Awareness Week is particularly important because CBANHC will be using the week to build momentum for other communications activities related to the Impact Study and other initiatives.

# Bananas

After Reading THIS, you'll NEVER look at a banana in the same way again -

**Bananas.** Containing three natural sugars - sucrose, fructose and glucose combined with fiber, a banana gives an instant, sustained and substantial boost of energy. Research has proven that just two bananas provide enough energy for a strenuous 90-minute workout. No wonder the banana is the number one fruit with the world's leading athletes. But energy isn't the only way a banana can help us keep fit. It can also help overcome or prevent a substantial number of illnesses and conditions, making it a must to add to our daily diet.

**Depression:** According to a recent survey undertaken by MIND amongst people suffering from depression, many felt much better after eating a banana. This is because bananas contain tryptophan, a type of protein that the body converts into serotonin, known to make you relax, improve your mood and generally make you feel happier. PMS: Forget the pills - eat a banana. The vitamin B6 it contains regulates blood glucose levels, which can affect your mood.

**Brain Power:** 200 students at a Twickenham (Middlesex) school were helped through their exams this year by eating bananas at breakfast, break, and lunch in a bid to boost their brain power. Research has shown that the potassium-packed fruit can assist learning by making pupils more alert.

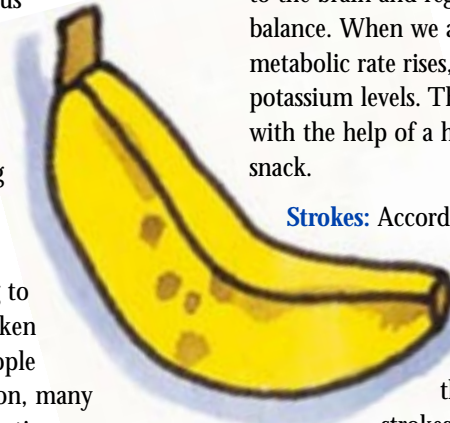
**Nerves:** Bananas are high in B vitamins that help calm the nervous system.

**Seasonal Affective Disorder (SAD):** Bananas can help SAD sufferers because they contain the natural mood enhancer tryptophan.

**Stress:** Potassium is a vital mineral, which helps normalize the heartbeat, sends oxygen to the brain and regulates your body's water balance. When we are stressed, our metabolic rate rises, thereby reducing our potassium levels. These can be rebalanced with the help of a high-potassium banana snack.

**Strokes:** According to research in "The New England Journal of Medicine," eating bananas as part of a regular diet can cut the risk of death by strokes by as much as 40%!

**Bananas must be the reason monkeys are so happy all the time!**



## Our next issue

Make sure to read our next issue as we will talk about the releasing of the Impact Study by CBANHC, a survivor is writing to us, some very exciting news about some research activities and much more.



# From A Strategy for Injury Prevention Smart Risk.

by Richard Kinar

Injury is Canada's invisible epidemic. It is the leading killer and disabler of Canadians in the prime of their lives and it kills more youth and young adults than all other causes combined. Injury also places a tremendous economic burden on this country, conservatively estimated at \$14.7 billion annually in direct and indirect costs.

Nonetheless, injury has historically been overlooked as a health issue, consistently taking a back seat to far lesser health threats. This is due in part to the common belief that injuries are "accidents" that can be neither anticipated nor prevented. Like diseases, however, most injuries follow a distinct pattern and are, therefore, both predictable and preventable. Where evidence-based prevention measures have been introduced, significant reductions in disability and loss of life have resulted. The dramatic success of mandatory seatbelt and bicycle helmet laws are two such examples.

Despite this evidence, Canadian policy-makers and the public remain largely unaware of the human and economic burden associated with preventable injury and of the many effective ways this can be reduced. As a result, one of Canada's most critical health problems continues to go largely unaddressed. In the current struggle to contain rising health care costs and to ensure the sustainability of Canada's public care system, policy-makers can no longer afford to ignore injury prevention; it is one of the most promising means to significantly reduce hospitalizations, wait times, and related health care costs without compromising the accessibility and quality of care that Canadians want.

If Canada enjoyed the same child injury rate as Sweden, from 1991-1995, 1,233 children would not have died.

Between 23,000 and 50,000 would not have been hospitalized.

More than 250,000 children would not have visited emergency rooms.

Wearing a helmet while skiing or snowboarding may reduce the risk of head injury by 29% to 56% that is for every 10 people who wear helmets; three to six may avoid injuries.

Canada spends less than one percent of its health research budget on injury research.

Canada lacks a comprehensive Injury Prevention Strategy to help reduce the pressure on our health care system.

The launching of the National Injury Prevention Strategy under the leadership of the Insurance Bureau of Canada and SmartRisk is a call to government to take leadership on injury prevention and implement this suggested strategy funded by both organizations. A letter writing campaign has begun and SmartRisk has made it easy for us to participate and made our views known. Visit the website, follow the steps and your voice will be added to the thousands who will write to ask our government to consider this strategy as a cost saving and effective injury prevention strategy - visit [www.timeforaction.ca](http://www.timeforaction.ca)

If you want additional information about this national strategy, visit the website of SmartRisk at [www.smartrisk.ca](http://www.smartrisk.ca) and you will find more details about the strategy entitled *Ending Canada's Invisible Epidemic - A Strategy for Injury Prevention*.

## Hawaiian Oyster Odysseys (HOO)

**FUNdraisers coming up fast!**

*-continued from Page 1-*

**By Howard Brown,  
Chair, Fundraising  
Committee**



HOOs are meant to help raise funds for BIAC operations, programs and support from coast to coast.

Last January, a dedicated group in Toronto raised \$35,000 for the Brain Injury Association of Canada by holding a FUNdraiser called the Hawaiian Oyster Odyssey (HOO).

**Already scheduled in 2006:**

**Halifax, NS** - February 8

*Co-chairs:* Ian Ross & Barb Hart

**Toronto, ON** - February 20

*Co-chairs:* Howard Brown & Julie Katz

**Saskatoon, SK** - March 17

*Co-chairs:* Rich Chapman & Doug Richardson

**Vancouver, BC** - April (tba)

*Co-chairs:* Patrick Maloney, Jeff Topp & Richard Kinar

**Edmonton, AB** - April 27

*Co-chairs:* Melodi Lyon, Sharlene Bell & Trevor Hassall

**Gatineau, QC** - May 30

*Co-chairs:* Yvan Teasdale & Lorna Counsell

**Souris, PE** - June (tba)

*Co-chairs:* Eric Creamer, Marie Mossey

**Winnipeg, MB** - (tba)

*Co-chairs:* Bobbi Ethier, Monika Huminuk

Other Hawaiian Oyster Odysseys are to be announced at a later date.

If you want to hold a HOO in your community, contact Howard Brown at [howard@brown-cohen.com](mailto:howard@brown-cohen.com).

