

Thyrobulletin



Spring 2016

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- Call for Nominations



Estelle



May 25-31

Theme for 2016:

Thyroid Disorders in Children

June is Thyroid Month in Canada!





FOUNDER / FONDATRICE

Diana Meltzer Abramsky, C.M., B.A.
1915 - 2000

The Voice and Face of
Thyroid Health in Canada



La voix et le visage de la santé
thyroïdienne au Canada

Thyroid Foundation of Canada
La Fondation canadienne de la Thyroïde

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2015-2016

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Thyroid Foundation of Canada
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Important Notice: The information contained within is for general information only and consequently cannot be considered as medical advice to any person. For individual treatment or diagnosis consult your health care professional.

Avis Important: Les renseignements contenu à l'intérieur sont à titre d'information générale et conséquemment personne ne doit les considérer comme conseils médicaux. Pour traitement ou diagnostique individuelle veuillez consulter votre médecin.

*A message
from the president*



*Un message
de votre présidente*

Greetings!

The Thyroid Foundation of Canada (TFC) plays a vital role in providing patients, families and the general public with much needed information on various types of thyroid disease. Each month, we hear from people seeking information or wanting to communicate information on thyroid conditions. Our website, www.thyroid.ca, is a much sought after source of information with more than 160,000 people accessing the website each month. In addition, we receive enquiries and hear concerns through phone calls to which Board members and dedicated volunteers endeavor to respond. These indicate clearly a continued need for the Thyroid Foundation. This year, the theme of the International Thyroid Awareness Week is thyroid disorders in children. For this reason, our two feature articles focus on children.

In past issues, we have looked back to the roots of the Foundation. Now, the Board is engaged in looking at where the Foundation is heading in the future and how it can best continue to serve thyroid patients and their families. The Foundation is always looking to improve and become more effective.

So, what does the future look like for the Thyroid Foundation? Since the Foundation members are mostly thyroid patients and not medical professionals, we are grateful to the knowledgeable medical experts who provide excellent information on thyroid conditions for our educational materials. We look forward to continued collaboration with top medical specialists. We will continue to refresh our materials as new information becomes available.

With issues in patient care continuing to exist, there's a great need for a patient-centred approach to our health care. One of the major concerns expressed by thyroid patients is a need for better patient testing. The Foundation would like to see patients get diagnosed earlier and more accurately. We are well aware of many who suffer too long because of lack of understanding of what thyroid disease is and the symptoms related to the condition.

Technology is changing how people communicate and gather information, and we realize the Thyroid Foundation needs to keep up with the times. Providing education and awareness materials and patient support continue to be key activities of the Foundation. Visitors to our website find it a source of excellent information. Nevertheless, we still need printed materials for distribution to

Bonjour! / Salutations!

La Fondation canadienne de la thyroïde (FCT) joue un rôle essentiel pour les patients, les familles et le grand public en délivrant de l'information indispensable sur les divers types de maladies de la thyroïde. Chaque mois, nous entendons des personnes qui cherchent des renseignements ou qui souhaitent communiquer de l'information sur les conditions de la thyroïde. Notre site web, www.thyroid.ca est une source d'information très recherchée avec plus de 160.000 personnes accédant à notre site Internet chaque mois. De plus, nous recevons des demandes et des préoccupations par téléphone auxquelles les membres du conseil et ses dévoués bénévoles tentent de répondre. Ceux-ci indiquent clairement un besoin continu de la Fondation de la thyroïde. Cette année le thème de la "Semaine Internationale de la Sensibilisation à la Thyroïde" est les troubles de la thyroïde chez les enfants. Pour cette raison, nos deux articles en vedette se concentrent sur les enfants.

Dans nos publications précédentes, nous avons jeté un regard vers les racines de la Fondation. Maintenant, le Conseil est engagé dans la recherche à laquelle la Fondation projette l'avenir et la façon dont elle peut mieux continuer à servir les patients de la thyroïde et leurs familles. La Fondation vise toujours à améliorer et à devenir plus efficace.

Alors, qu'est-ce que l'avenir ressemble à la Fondation de la Thyroïde? Étant donné que les membres de la Fondation sont pour la plupart des patients et non pas des professionnels en médecine, nous sommes reconnaissants aux experts médicaux compétents qui fournissent d'excellentes sources d'information pour nos matériels éducatifs sur les conditions de la thyroïde. Nous désirons poursuivre notre collaboration avec les meilleurs spécialistes médicaux dans le domaine. Nous allons continuer à actualiser notre documentation dès que les nouvelles recherches seront disponibles.

Ainsi que les questions liées aux soins des patients de la thyroïde continuent à exister, il y a un grand besoin que nos soins de santé devraient adopter une approche centrée sur le patient lui-même. L'une des principales préoccupations exprimées par les patients de la thyroïde est la nécessité d'incorporer de meilleurs tests dans les régimes de santé. La Fondation aimerait que les patients obtiennent un diagnostic plus précoce et plus précise. Nous sommes bien conscients que des nombreuses personnes souffrent trop longtemps en raison d'un manque de compréhension de ce qu'est la maladie de la thyroïde et les symptômes liés à la maladie.

La technologie est en train de changer la façon dont les gens communiquent et recueillent de l'information, et nous nous rendons compte que la Fondation de la Thyroïde a besoin de se tenir à jour. Fournir du matériel d'éducation et de sensibilisation aussi que le soutien des patients continuent à être les activités principales de la Fondation. Les

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clinics and public events, and this puts extra pressure on TFC financially as we endeavor to meet the needs of patients whenever possible.

The national Board is always looking to improve the Foundation's programs and services despite our limited resources. There's a great need to have more concerned and dedicated people involved in our organization who can help with the varied demands that come to us. Can you help – or do you know someone who can? We would welcome your offers of assistance. Come to our Annual General Meeting in June, bring your concerns and suggestions, and meet the other people who are shaping the Thyroid Foundation for the future!

visiteurs à notre site Web trouvent une excellente source d'information. Néanmoins, nous avons encore besoin de documents imprimés pour la distribution aux cliniques et aux événements publics, et cela met une pression supplémentaire financièrement sur la FCT.

Le Conseil national est toujours à la recherche à améliorer les programmes et les services de la Fondation, malgré nos ressources limitées. Il y a un grand besoin d'avoir des gens intéressés et dévoués impliqués dans notre organisation qui peuvent aider avec les demandes variées qui viennent à nous. Pouvez-vous aider - ou connaissez-vous quelqu'un qui peut nous aider? Nous serions heureux de votre aide. Joignez nous à notre assemblée générale annuelle en juin, faites-nous savoir vos préoccupations et suggestions, et venez rencontrer les autres personnes qui façonnent l'avenir de la Fondation Canadienne de la Thyroïde!

36TH ANNUAL GENERAL MEETING

TORONTO ONTARIO

JUNE 11, 2016, 9:00 AM

For more information: 1-800-267-8822
www.thyroid.ca info@thyroid.ca

*Thyroid Foundation of Canada
CALL FOR NOMINATIONS 2016-2017*

*La Fondation canadienne de la Thyroïde
APPEL DE candidatures 2016 - 2017*

The National Board is accepting nominations for vacant positions on the Board for the coming year 2016-2017

As per Article No. 17 (a) - The Board shall consist of a minimum of seven directors and up to a maximum of 15 directors elected by the membership plus the immediate past-President if s/he agrees to serve. If vacancies exist on the Board, the Board may appoint directors up to a maximum of one-third of the Board. The term of any appointed director shall expire at the close of the next general meeting.

The positions of directors are not designated to any specific title or responsibility. The roles will be determined subsequent to the AGM at the first meeting of members of the National Board.

If you are interested or know of anyone who might be interested, please have them complete the Nomination form and forward along with a CV to the Nominating Committee at info@thyroid.ca no later than May 20, 2016.

(Copies of the nomination form may be obtained by contacting info@thyroid.ca or by calling 1-800-267-8822.)

Le Conseil national accepte des candidatures pour des postes ouverts sur son Conseil d'administration pour l'année 2016-2017

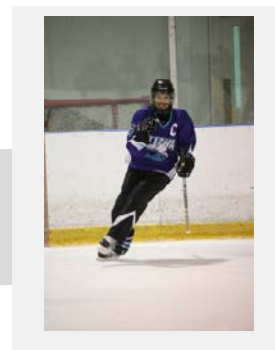
Conformément à l'article n° 17 (a) - Le Conseil d'administration est composé d'un minimum de sept directeurs/trices et jusqu'à un maximum de 15 directeurs/trices élus par les membres en plus du/de la Président(e) sortant (e) si il / elle s'engage à continuer. Si les postes vacants existent au sein du conseil, le Conseil d'administration peut nommer des directeurs/trices jusqu' à un maximum d'un tiers du conseil. Le terme de tout directeur/trice nommé fini à la fin de la prochaine assemblée générale.

Les postes de directeurs/trices ne sont pas désignés à un titre ou une responsabilité spécifiques. Les rôles seront déterminés à la suite de l'AGA à la première réunion des membres du Conseil national.

Si vous êtes intéressé ou connaissez quelqu'un qui pourrait être intéressé, s'il vous plaît remplir le formulaire de candidature et l'expédier, accompagné du CV du candidat au président du Comité de mise en candidature à info@thyroid.ca au plus tard le 20 mai 2016.

(Des copies du formulaire de mise en candidature peuvent être obtenus à info@thyroid.ca ou par composant le 1-800-267-8822.)

Mon Histoire - Estelle's Story



par/by Estelle Bourlon, Ottawa, Ontario

Jamais j'aurais imaginé que j'allais avoir une condition médicale qui sera tout le long de ma vie. La façon dont j'ai appris de mon hypothyroïdisme était suite à une commotion cérébrale que j'ai soufferte.

Depuis mes 8 ans, je joue à la ringette. Ces dernières années, je joue au niveau compétitif et je suis attaquante. La ringette c'est ma passion.

Le 7 février 2014, lors d'un match, je suis tombée et ma tête a souffert deux coups, un premier sur la glace et un deuxième sur les bords de la patinoire.

Quelques jours après cet accident, je suis allée voir le Dr. Kristian Goulet qui est spécialiste en commotions cérébrales chez les enfants qui jouent des sports. Quand mes parents et moi sommes arrivés pour la visite, je me sentais épuisée, j'avais froid tout le temps ainsi qu'autres symptômes liés à ma commotion cérébrale. Le docteur était curieux de ces symptômes et il a demandé des prises de sang pour avoir des tests complets y compris le fer, les vitamines et il a demandé surtout de vérifier le fonctionnement de la thyroïde puisque ma mère a aussi une condition thyroïdienne.

Quand nous avons reçu les résultats de ces prises de sang, nous avons appris que mon niveau de TSH était élevé, ce que signifie que j'ai une hypothyroïdie.

Puisque je faisais des grands progrès avec ma commotion cérébrale, Dr. Goulet a adressé mon cas au Département d'Endocrinologie de CHEO (Centre Hospitalier pour Enfants de l'Est de l'Ontario) où ma condition serai traitée. J'ai rencontré la Dr. Ellen Goldbloom qui m'a guidé à trouver la dose adéquate de levothyroxine.

Cela a pris quelques mois car il faut une prise de sang chaque fois que le dosage est ajusté. Dr. Goldbloom m'a donné beaucoup de soutien en m'expliquant ma condition et, maintenant qu'elle a trouvé la bonne dose, je me sens beaucoup mieux. Je prends une pilule par jour et je vais faire une prise de sang chaque six mois pour vérifier que tout va bien.

Une fois que j'ai suivi les directives des deux docteurs, je suis retournée à la glace avec beaucoup plus de connaissance de ma capacité physique.

I never would have imagined that I would have a medical condition that will last throughout my life. The way I learned I had hypothyroidism was after an accident resulting in a concussion.

Ever since I was 8 years old, I have played ringette. In recent years, I have been playing at the competitive level as forward. Ringette is my passion.

On February 7th, 2014, during a match, I had a bad fall and my head got hit twice, once on the ice and a second time, on the boards.

A few days after the accident, I went to see Dr. Kristian Goulet who specializes in concussions in children who play sports. When my parents and I arrived for the visit, I felt exhausted, I was cold all the time as well as having other symptoms related to my concussion. The doctor was curious about these symptoms and requested comprehensive blood tests including iron levels and vitamins and he requested especially to check for the functioning of the thyroid since my mother has a thyroid condition.

When we received the results of the blood tests, we learned that my TSH level was high which means that I have hypothyroidism.

Since I was making great progress with my concussion, the doctor referred my case to the Department of Endocrinology of CHEO (Children's Hospital of Eastern Ontario) where my condition was to be treated. I met Dr. Ellen Goldbloom who guided me in finding the right dose of levothyroxine.

It took a few months to get to the right number since blood tests have to be taken each time the dosage is adjusted. Dr. Goldbloom gave me a lot of support by explaining my condition to me, and, now that she has found the right dose for me, I feel much better. I take a pill a day and I have a blood test every six months to check that everything is okay.

Once I followed the directions of these two doctors, I returned to the ice with a lot more knowledge of my physical ability.

Thyroid Cancer in Children

**Deric Morrison MD, MHPE, FRCPC, ECNU, Division of Endocrinology,
Dept. of Medicine, Western University London, Ontario**

Thyroid cancer is much more common in children than adults. Blood cell cancers like lymphoma and leukemia, and cancers of connective tissues like bone and muscles are the most common types of cancers in children. Cancers of solid organs, like kidneys, lungs, liver and thyroid, make up about 10% of cancers in people under the age of 20, compared to the majority of cancers in adults. Thyroid cancer is the most common solid organ cancer in childhood. The thyroid contains follicular cells and C-cells. The follicular cells are responsible for making thyroid hormone and make up most of the thyroid. The C-cells don't seem to have important functions in humans, they make a hormone called calcitonin that regulates calcium levels in some other animals, but calcium is regulated in humans much more so by parathyroid hormone and vitamin D. There are 3 types of cancers of follicular cells: papillary, follicular and anaplastic cancer; and one type of cancer of C-cells, medullary thyroid cancer. In both adults and children the most common type of thyroid cancer is papillary thyroid cancer; it makes up about 95% of thyroid cancers in childhood. The remainder of thyroid cancers in children are follicular thyroid cancer and medullary thyroid cancer.

Most cases of medullary thyroid cancer are related to a mutation in a specific gene called the *RET* gene. This is an autosomal dominant mutation meaning that if a child has a parent with the mutation, then that child has a 50% chance of inheriting the condition, in this case, medullary thyroid cancer. A person with a mutation in the *RET* gene is felt to be certain to develop medullary thyroid cancer at some point in their life, but the timing can vary from early childhood to mid or late adulthood. This is a rare mutation, but people with medullary

thyroid cancer should be tested for it, and if they have the mutation, their first degree relatives should also be tested. If a person has been found to have the *RET* mutation, they can have a prophylactic thyroidectomy (surgical removal of the thyroid) prior to developing medullary thyroid cancer. Note most medullary cancers in adults are not associated with *RET* mutation.

Papillary thyroid cancer is by far the most common type of thyroid cancer in children and adults. Papillary thyroid cancer is treated with surgery. Depending on the stage or subtype, surgery may be followed by radioactive iodine. Thyroid stimulating hormone (TSH), produced by the pituitary gland, stimulates thyroid follicular cells to make thyroid hormones, but it can also stimulate growth of follicular cells, including papillary thyroid cancer cells. Therefore, after thyroid surgery, thyroid hormone replacement is given in doses to keep the TSH low, but the benefit of low TSH must be balanced with the risks of causing thyrotoxicosis (too much thyroid hormone).

Long term outcomes for children with thyroid cancer are felt to be very good with generally very low mortality but a fair chance of (treatable) recurrence. There is little data available about recurrence rates for patients more than 20 years after diagnosis. Most patients probably have ultrasounds and blood tests yearly for about 5-10 years after successful treatment, and then just blood tests with periodic ultrasounds. The optimal strategy for detecting recurrence without undue inconvenience on the patient and avoiding unnecessary cost is not known at this time.

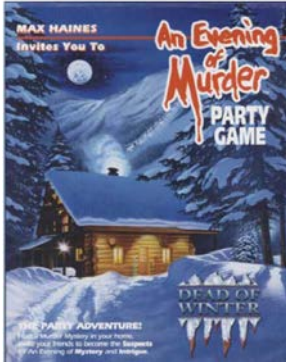
Our Goals

- **Awareness** - To awaken public interest in, and awareness of, thyroid disease.
- **Support** - To lend moral support to thyroid patients and their families.
- **Research** - To assist in fund raising for thyroid disease research.

Nos objectifs

- **Sensibilisation** - Accroître l'intérêt du public envers les maladies thyroïdiennes et le sensibiliser davantage à ce problème.
- **Soutien** - Offrir un soutien moral aux personnes atteintes d'une maladie thyroïdienne et à leur famille.
- **Recherche** - Contribuer à recueillir des fonds pour la recherche sur les maladies thyroïdiennes.

News & Events



Ottawa – ‘An Evening of Murder’ Fundraiser

The Ottawa Chapter held their second murder mystery dinner on February 27th, 2016. The murder took place at the Twilight Lodge, a ski resort nestled deep in the mountains and popular with the rich and famous. The victim was only three days away from inheriting an estate worth 1.2 billion dollars. After finding the lifeless body, the eight murder suspects dressed in the ski suits and outdoor styles gathered in the Lodge. The mystery party kit provided the hidden secrets, deadly clues and mysterious backgrounds for each character. The eight suspects enjoyed many laughs and successfully identified who among them was the murderer. A total of \$125 was received in donations in support of TFC’s programs.

Be sure to send an email to info@thyroid.ca if you are interested in attending our 2017 murder mystery dinner.

Coming Events

KITCHENER-WATERLOO

Monday, April 25, 2016

Causes and Diagnosis of Hyperthyroidism and Hypothyroidism

Dr. Deric Morrison, MD, FRCPC, ECNU, Endocrinologist

Division of Endocrinology, Department of Medicine
University of Western Ontario

Meetings are held at: Kitchener Public Library,
85 Queen Street North, Kitchener ON

Education Table available 6:00 ⌘ Business Meeting 6:30
Speaker 7:00 - 8:45

Please register: Wheelchair accessible

Phone: 519-743-7502
Online: www.kpl.org (see Programs)

IMPORTANT DATES

Mark your calendars and *Think Thyroid!*

> **April 10-16**
National Volunteer Week 

> **May 25-31**
International Thyroid Awareness Week
This year’s topic: *Thyroid Disorders in Children* 

> **May 25**
World Thyroid Day 

> **June 1-30**
June is Thyroid Month in Canada! 

> **June 11**
36th Annual General Meeting 



The Thyroid Foundation of Canada gratefully thanks
Mylan Canada
for an educational grant

National Volunteer Week
April 10-16, 2016

Thank you to all our volunteers!



Semaine de l'action
bénévole
10 au 16 Avril 2016

Merci à tous nos bénévoles!



Thyroid Foundation of Canada
La Fondation canadienne de la Thyroïde


Bus. No. 11986 4422 RR0001

MEMBERSHIP AND DONATION FORM

ADDRESS DETAILS

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|------------|-------------|---|--------------|
| Name: | | Is this a Gift membership? Enter Gift details here: | |
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| City: | | Address: | |
| Province: | Postal Code | Province: | Postal Code: |
| Telephone: | | Telephone: | |
| Email: | | Email: | |

MEMBERSHIP CATEGORY

| | | | | |
|--|---------------------------------------|---|---------------------------------------|--------------------------------------|
| ONE YEAR: | <input type="checkbox"/> Regular \$25 | <input type="checkbox"/> Senior \$20 | <input type="checkbox"/> Student \$20 | <input type="checkbox"/> Family \$30 |
| TWO YEAR: | <input type="checkbox"/> Regular \$40 | <input type="checkbox"/> Senior \$30 | <input type="checkbox"/> Student \$30 | <input type="checkbox"/> Family \$50 |
| Members receive  <i>Thyrobulletin</i> | | Please indicate your preference: <input type="checkbox"/> by regular mail <input type="checkbox"/> by email <input type="checkbox"/> no Thyrobulletin | | |

PAYMENT TOTAL

| | |
|----|---|
| \$ | Enter Membership Amount |
| \$ | Enter Donation Amount <i>All donations support the work of the Thyroid Foundation of Canada</i> |
| \$ | TOTAL |

PAYMENT DETAILS

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|-------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Visa | <input type="checkbox"/> MasterCard | <input type="checkbox"/> Cheque <i>(payable to: Thyroid Foundation of Canada)</i> |
| Visa/MasterCard No.: | | Expiry Date: |
| Name on credit card: | | |

RECEIPT

An official receipt for income tax purposes will be issued for both membership fees and donations

| | | |
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| Receipt preference: | <input type="checkbox"/> Receipt by regular mail | <input type="checkbox"/> Receipt by email |
|---------------------|--|---|

Please send completed form to: **Thyroid Foundation of Canada, PO Box 298, Bath, ON K0H 1G0**

THANK YOU FOR YOUR SUPPORT!