

# Thyrobuletin



Spring 2018



## PATIENT CARE

Our new patient support team is ready to help.



## COMING SOON!

[www.thyroid.ca](http://www.thyroid.ca) – TFC's new, improved website

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*Thyroid Foundation of Canada  
Supporting Outreach Activities  
in the Community*

*38<sup>th</sup> Annual General Meeting*



**Toronto ON  
June 2, 2018**



Thyroid Foundation of Canada  
La Fondation canadienne de la Thyroïde

June is Thyroid Month in Canada





**FOUNDER / FONDATEURICE**  
**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

National Board of Directors  
 Conseil national d'administration  
 2017-2018

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 Jennifer Olchowy

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Thyroid Foundation of Canada  
 P.O. Box 298, Bath ON K0H 1G0  
 www.thyroid.ca  
 800.267.8822

*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.*



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 Mabel Miller (President/ Présidente); Katherine Keen (Administrative Coordinator/ Coordonnatrice administrative)  
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**Membership Rates:**

One Year:	Regular \$35	Senior \$30	Family \$45
Two Year:	Regular \$60	Senior \$50	Family \$65

To renew your membership or make a Gift membership, visit:  
[www.thyroid.ca/join\\_donate](http://www.thyroid.ca/join_donate) or mail to: Thyroid Foundation of Canada,  
 P.O. Box 298, Bath ON K0H 1G0



*A message  
from the president*



*Un message  
de votre présidente*

Dear Readers

Officially Spring 2018 is here with time changes in most provinces across Canada. Longer days of light and the hope we'll soon see warmer temperatures and less snow.

Last spring as we looked to the AGM, it was said with help from dedicated people we hoped to see newer things happening and brightening our future. Well it did happen, some new things are happening and some new board members have eagerly and diligently helped with our mission and our goals. Let's look ahead to more positive things happening this coming year.

As we continue with our mission, watch for more initiatives in the near future. One thing worth mentioning, the Board has moved forward with updating our website which is well underway.

A Strategic Plan has been put in place and we're working on various projects and programming. A Patient Support Team is in place with a group of volunteers who are ready and willing to answer enquiries received from various sources. We will be working with our Medical Advisor in the near future to review information brochures on thyroid disease and also provide some presentations in various areas.

Funding is always a concern each year. We're pleased and very thankful for some bequests of significant amounts received this past year. This will give us great opportunity to pursue more research and more programming for education materials.

At present we are reviewing our By Laws and will be forwarding them to all members prior to the AGM.

Help us to Help others is a message I always like to leave everyone with. There is so much that needs to be done and we want to do but we need the assistance of others to help. "Many hands make light work" or should I say help us with passing the word along to anyone who might have some time and interest in Thyroid disease and the Thyroid Foundation of Canada. You could be helping someone near to you.

Have a great summer everyone and be safe no matter what you do.

Mabel Miller, President

**Mabel recently was the recipient of:** Senate of Canada Sesquicentennial Medal – 2017. She's also received Queen Elizabeth II Golden Jubilee Medal 2002 & Caring Canadian Governor General Award – 1997

Chers lecteurs

Officiellement, le printemps 2018 est arrivé avec des changements d'heure dans la plupart des provinces du Canada. De longues journées de lumière et l'espoir de voir bientôt des températures plus chaudes et moins de neige.

Au printemps dernier, lorsque nous avons regardé l'AGA, il a été dit qu'avec l'aide de personnes dévouées, nous espérons voir de nouvelles choses se produire et éclairer notre avenir. Eh bien, cela s'est produit, de nouvelles choses sont en train de se produire et de nouveaux membres du conseil ont aidé avec diligence notre mission et nos objectifs. Regardons vers l'avenir à des choses plus positives qui se passe l'année prochaine.

Alors que nous poursuivons notre mission, surveillez d'autres initiatives dans un proche avenir. Une chose qui mérite d'être mentionnée, c'est que le Conseil a mis à jour son site Web qui est en bonne voie.

Un plan stratégique a été mis en place et nous travaillons sur divers projets et programmes. Une équipe de soutien aux patients est en place avec un groupe de bénévoles prêts et disposés à répondre aux demandes provenant de diverses sources. Nous allons bientôt travailler avec notre conseiller médical pour examiner des brochures d'information sur les maladies de la thyroïde et faire des présentations dans divers domaines.

Le financement est toujours une préoccupation chaque année. Nous sommes heureux et très reconnaissants pour certains legs de montants importants reçus l'année dernière. Cela nous donnera l'occasion de faire plus de recherches et de programmer davantage de matériel éducatif.

Présentement, nous passons en revue nos règlements et les transmettrons à tous les membres avant l'AGA.

Aidez-nous à aider les autres est un message que j'aime toujours laisser à tous. Il y a tellement de choses à faire et nous voulons faire, mais nous avons besoin de l'aide des autres pour les aider. «De nombreuses mains font un travail léger» ou devrais-je dire que cela nous aide à passer le mot à tous ceux qui pourraient avoir un peu de temps et d'intérêt pour la maladie thyroïdienne et la Fondation canadienne de la thyroïde. Vous pourriez aider quelqu'un près de vous.

Bon été à tous et soyez en sécurité, peu importe ce que vous faites.

Mabel Miller, présidente

**Mabel a récemment reçu:** la Médaille du sesquicentenaire du Sénat du Canada en 2017. Elle a également reçu la Médaille du jubilé d'or de la reine Elizabeth II et le Prix du Gouverneur général du Canada pour l'entraide - 1997

**Thyroid Foundation of Canada  
CALL FOR NOMINATIONS  
2018 – 2019**



**La Fondation canadienne de la Thyroïde  
APPEL DE CANDIDATURES  
2018 – 2019**

**The National Board is accepting nominations for vacant positions on the Board for the coming year 2018-2019.**

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.

Positions to be filled include: President, Vice-President, Treasurer, and Secretary as well as Directors for Public Relations, Patient Support, Fundraising, Thyroid Research, Education and Publications, and Chapter Development.

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 Chair at [laz.bouros@thyroid.ca](mailto:laz.bouros@thyroid.ca)

*(Copies of the nomination form may be obtained by contacting [laz.bouros@thyroid.ca](mailto:laz.bouros@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 2018-2019.**

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 nouveaux postes de directeur comprennent de: président, vice-président, trésorier et secrétaire, ainsi que directeurs des relations publiques, soutien aux patients, collecte de fonds, recherche sur la thyroïde, éducation et les publications, développement de chapitres.

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 [laz.bouros@thyroid.ca](mailto:laz.bouros@thyroid.ca)

*(Des copies du formulaire de mise en candidature peuvent être obtenus à [laz.bouros@thyroid.ca](mailto:laz.bouros@thyroid.ca) ou par composant le 1-800-267-8822.)*

**THYROID FOUNDATION  
OF CANADA**

**38<sup>th</sup> ANNUAL GENERAL MEETING**  
June 2, 2018  
9:00 am - 12:00 pm

Members of the public are welcome to attend.  
Members of the Thyroid Foundation of Canada are entitled to vote.

**Four Points by Sheraton  
Toronto Airport**



6257 Airport Road  
Mississauga, ON

**LA FONDATION CANADIENNE DE LA  
THYROÏDE**

**38<sup>ème</sup> ASSEMBLÉE GÉNÉRALE ANNUELLE**  
le 2 Juin, 2018  
De 9h00 à midi

Les membres du public sont invités à y assister.  
Les membres de la Fondation canadienne de la Thyroïde ont le droit de voter.

Awareness • Support • Research



Sensibilisation • Soutien • Recherche





## I WEAR MY SUNGLASSES AT NIGHT

By Jennifer Olchoway

I have a story to tell and I hope that once you read it you will share yours with all of us. Every story is an important one as it binds us together, makes us even more compassionate towards each other and most importantly, with each story we learn from one another and try to make things better for the common good.

My name is Jennifer Olchoway and I have the privilege of volunteering on the Board of Directors of the Thyroid Foundation of Canada. For me, the reason why I sought out this Canadian Organization is because I wanted to be a part of a group of like-minded people who were passionate about talking about thyroid disease and who collectively used their voice to raise awareness, educate and empower. Not to mention, it was pretty great to find people that could relate to what I was going through.

In September of 2011, I was diagnosed with a very severe case of Graves' Disease and multi nodule goiters. I didn't really know just how severe until years later, when my Doctor wrote a letter for insurance purposes stating that in his 20 years of practice mine was one of the most severe, if not the worst case he had seen. For me, this tiny little gland, which has been characterized by shape as the oh so pretty butterfly, affected every part of my being, my body and my way of life for many years until I went into remission. For those around me, from colleagues to friends, there wasn't much being said about thyroid disease at that time, let alone Graves', so many couldn't understand just what I was going through. The oh so beautiful butterfly gland I had inside me was taking up arms and I was its number one enemy.

Hold that thought though because there is more to my story, as there often is, but I want to first note 3 things: 1) I am not a Doctor but I do know my body well enough to know when it is not working properly and what I need to do to realign myself to get back in check, 2) cliché to say, but go with your gut instincts, literally and figuratively and 3) be your own advocate, do your homework and use your voice.....always!

My journey with my thyroid was an excruciatingly painful one. When I was diagnosed and even years later, I felt guilt and shame and I felt like I had this big black X on me. I was tainted somehow and everything up until that point was all my fault. What I haven't told you yet is an additional piece to my story which, in my opinion exacerbated my recovery. In 2011, when I was diagnosed, I was employed and working for a Minister in the Federal Government. I was a political staffer and had been one since 2007. I worked many long hours and traveled a great deal so when my symptoms started revealing themselves, I didn't listen to my body because I just thought my lethargy, the weight gain, my eyes being sensitive to light, the migraines, the heart palpitations and shortness of breath, the hair and nails breaking etc, etc, were all from the 60 hours a week I worked and the lack of nutrition I was getting from my food while traveling. It wasn't until I walked into a clinic in September of 2011, that I finally realized I was in trouble. My GP gave me a doctor's note

to rest and take the week off. Unfortunately, when I was given that note to take time off, my Boss didn't let up with emails and phone calls and document writing, even though I was away from work. The second medical note was given the beginning of the next week but that too was disregarded as I was fired that Monday for insubordination and treated like I had no medical condition. I had three medical notes in total with the last coming the week later, with no work for an indefinite period of time. I will spare you the details on how that story ended because unfortunately it is still ongoing more than six years later.

With that being said, it is an important piece of my personal story. First and foremost, your thyroid truly can wreak a lot of havoc in your life from the professional side to the personal side. In addition, many people discount and disregard just how impactful a non functioning thyroid can be.

With all that I went through, here are a couple of things I learned which I hope are helpful to you: DO NOT be hard on yourself; BE compassionate with what you are facing; know that YOU are not at fault and YOU should not feel embarrassed or ashamed or feel guilty for your diagnosis; DO NOT try to mask your disease but DO embrace it and have those educational conversations with your friends and family and CHOOSE YOU!

When I was diagnosed I dove into research when I had enough energy to do it and when I was able to read books and internet articles in between my long bits of crying bouts due to my hormones being so out of sorts. I started listening to me and piecing together what my body was telling me while connecting the dots with what my body liked and what my body rejected. Though I was on Tapazole, for a couple of years, I finally went into remission because, I believe, I finally decided to listen to me and change some things in my life. I read about triggers of thyroid and Graves', endocrine disruptors from plastics and chemicals and foods that were good for your thyroid and those that weren't. From all that I read, I did a major sweep and garbage toss of makeups, shampoos and conditioners, lotions and potions, my plastic water bottles, and plastic food containers and also cut gluten, dairy and corn from my diet, as they all mimic thyroid antibodies and are natural inflammatory. The last piece of my plan was finding peace and balance and that I found on my hot yoga mat.

During this time, I've seen and lived through a great deal to get me to where I am today with my Graves'. My journey was hell and back and then some but I did find some resolve and I met a lot of kind and incredible people along the way. My plan is not your plan but it may guide you to make one if you haven't yet. As someone who is in remission with Graves', I literally take Cory Harts' advice to heart everyday no matter what when I "wear my sunglasses at night" to protect my already sensitive eyes from further damage. I get looks of disdain especially when I wear them in buildings and get snide

*Continued on page 6*



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comments about being a wanna-be celebrity but they don't know my story and I don't know theirs. I do what is best for me while trying to educate. Thyroid disease continues to ever grow at any age and with our stories come possibilities that just one more person will demand to get their thyroid checked by their doctor. What comes with anything in life is self doubt. Don't! YOU know YOU well enough. If you need time then take it! If you need to get a second opinion from a doctor or endocrinologist then get it! If you need to change your diet then do it! Your body is your temple and don't ever forget it. :)

Thank you for allowing me to share my story with you. I hope I get to read yours next.

Jennifer



[www.thyroid.ca](http://www.thyroid.ca)

## COMING SOON!

Watch for TFC's new, improved **website!**  
**Expected launch date: June 2018**

Further development will include Members Only section with:

- Member profiles
- Thyroid Patient Forum
- Ask the Doctor

## IS THYROID DISEASE A CHRONIC DISEASE?

By Mabel Miller

Is thyroid disease a chronic disease? For quite some time, we have been asking that question of medical professionals and government officials only to be told it's not included in the list of chronic diseases. So why not?

The definition of chronic diseases is: "generally they are conditions that cannot be prevented by vaccines or cured by medication, nor do they disappear".

The Public Health Agency of Canada's list of Chronic Diseases includes heart disease, stroke, cancer, asthma, chronic obstructive pulmonary disease, diabetes, arthritis, Alzheimer's disease or other dementia, mood disorders and anxiety disorders. No mention of thyroid disease.

Well guess what? Those conditions cannot be cured nor do they disappear which is the same for thyroid disease. In the case of diabetes – it's a chronic condition that stems from the body's inability to sufficiently produce and/or properly use insulin, which the body needs to use as sugar as an energy source. Hypothyroidism and hyperthyroidism stem from the body's inability to properly control how the thyroid functions.

The definition of thyroid disease is "a condition due to over- or under-functioning of the thyroid gland". The thyroid gland is an essential organ for producing thyroid hormones, which maintain body metabolism and has important roles to regulate numerous metabolic processes throughout the body.

So what's so different when looking at one being a chronic condition and another not? Diabetes is considered a chronic condition – thyroid disease is not. Both indicate something has gone wrong and is not working as it should and may never.

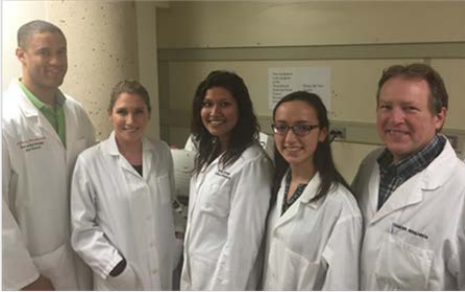
Again the question, "Is thyroid disease a chronic condition?" Relating to one condition, those diagnosed with Hypothyroidism will always have the condition – some may improve with time and some may get worse but there is very little hope that it will go away, be cured and not be an issue, not have to be managed.

Designating thyroid disease as a chronic condition is a challenge with the medical community and with those who define what a chronic condition is.

Anyone wishing to comment on this article is welcome to do so at [info@thyroid.ca](mailto:info@thyroid.ca).



## THYROID RESEARCH PROGRAM



### Did you know?

Since 1981, the Thyroid Foundation of Canada has given close to \$1,000,000 to research into thyroid disease in Canadian institutions.

Thanks to some recent generous bequests, plans are underway to develop the **2019-2020 TFC Research Award Program**.

*Left: Dr. Anthony Nicols and his team, London ON, received funding for research in 2015.*

## THYROID CANCER – DO A NECK CHECK

By Chrissy Jones, [writer.chrissy@hickorymail.net](mailto:writer.chrissy@hickorymail.net)

In 2017, over 200 Canadians are estimated to have died from thyroid cancer. It can occur at any age and women are 3 times more likely to be affected than men. Whereas self-testing for breast and prostate cancers is well documented, not as much is understood about the signs and symptoms of thyroid disease and, in particular, thyroid cancer. Through high profile campaigns and celebrity endorsement the 'pink ribbon' has become synonymous with breast cancer and women are more aware than ever how to self-check. The self-test on the thyroid gland, however, is just as simple yet rarely done. This is despite the fact that, in Canada, thyroid cancer is the most diagnosed type of cancer in people aged 15-29 years old and incidences are increasing more rapidly than any other cancer in Canada.

### Thyroid Gland

The role of the thyroid gland, and its profound effect on the human body, is varied and should not be underestimated. A poorly functioning thyroid gland, a condition known as hypothyroidism, can have a profound impact on many aspects of health including depression, digestion problems, menstrual irregularities, and can even mimic the signs of dementia.

### Warning Signs

Thyroid cancer is rare and only 5% of neck lumps result in a

diagnosis of cancer. An obvious symptom is a lump in the front of the neck. The lump is usually hard and may be accompanied by swollen glands. To check the thyroid gland for lumps, it is best to use a mirror as they are often visible when swallowing. The gland is located under the Adam's apple and just above the collarbone. Swallow some water and check for any protrusion that may appear around the area of the thyroid gland. Other symptoms include a persistent sore throat, hoarseness and difficulty swallowing. Occasionally there may be associated pain in the ears. A stubborn cough may also be present.

There are different types of thyroid cancer each with differing treatments and prognosis. As with all cancers it is important to react to any noticeable changes within the body as quickly as possible. Contributing factors for thyroid cancer may include genetics, exposure to high levels of radiation or a previous diagnosis of breast cancer.

### Diagnosis and Treatment

If a lump is detected, or if any other symptoms are present, it is important to get it checked as soon as possible. Thyroid cancer is typically slow developing but there are rare forms that can be aggressive. To accurately diagnose thyroid cancer it is usually necessary to undergo a fine needle biopsy. This involves a thin needle being inserted into the lump, often with the help of ultrasound, to obtain a sample which will then be tested. If thyroid cancer is detected early, following treatment, the outlook is excellent with a 5 year survival rate of 98%.



## PATIENT SUPPORT

By Kim McNally

As was the vision of our founder Diana Abramsky, the Thyroid Foundation of Canada is committed to supporting patients seeking information about thyroid disease. To that end, as the Director of Patient Support, and along with a number of other volunteers, I am excited to be able to answer phone calls and emails from those seeking information about issues related to their thyroid.

We as volunteers are committed to offering assistance to individuals seeking information on



Where we can, and without offering any medical advice, we strive to provide information relevant to the inquiry and offer resources for more information where applicable.

behalf of themselves or their loved ones. Calls and emails we receive cover everything from symptoms of Graves' Disease or Hashimoto's to what to expect following thyroid surgery.

Most importantly, we want to let others know they are not alone as many of us have ourselves been diagnosed with a thyroid related condition. As such, we strive to do our best to provide direction on where to find answers or where to turn in the community, be that your family doctor, pharmacist or other resource. If you or anyone you know is seeking information related to a thyroid disorder, please do not hesitate to reach out to our dedicated team of volunteers at 1-800-267-8822 or by email at: [info@thyroid.ca](mailto:info@thyroid.ca)



## THYROID FOUNDATION OF CANADA SUPPORTING OUTREACH ACTIVITIES IN THE COMMUNITY



While recognizing the ever changing landscape in the way we receive information, be that through the internet, health based web sites or social media, the Thyroid Foundation of Canada (TFC) is committed to promoting, developing and supporting individuals or groups in the community, who are interested in providing information to patients about thyroid disease.

Through our Chapters, we have in the past, and remain, dedicated to providing avenues for patients seeking information about thyroid disease. Along with supporting Chapter development, TFC is in the process of developing guidelines that would focus more on public education meetings and or information sessions, in lieu of starting a Chapter. Public education meetings typically involve a guest speaker (endocrinologist, pharmacist, family doctor) who provides community members an opportunity to find out more about a particular thyroid issue, and where time permits, engage in a

question and answer period. They further provide a forum for patients to receive information, sign up to become a TFC member and receive our newsletter, Thyrobuletin. TFC is committed to supporting any such endeavours by providing a guide on how to facilitate such meetings as well as information (i.e. health guides, slide presentation) to assist with the implementation of sessions.

Anyone interested in starting a group for information sessions or public education meetings is invited to contact Kim McNally, Director, Chapter Development and Patient Support, at 1-800-267-8822 or email to my attention at [info@thyroid.ca](mailto:info@thyroid.ca).

For further information about the Thyroid Foundation of Canada, please visit our website at [www.thyroid.ca](http://www.thyroid.ca).

Kim McNally  
Director Chapter Development and Patient Support

## KITCHENER-WATERLOO CHAPTER

### “THYROID CANCER TREATMENT: One Size Does Not Fit All”

On April 4, 2018, the Kitchener-Waterloo Area Chapter conducted their Annual General Meeting and an Education Meeting. Whatever weather could happen did unfortunately.

Thanks to the assistance of the Kitchener Public Library, we usually have about 80 – 90 in attendance. We had only 34 but an excellent, informative session during which everyone had all of their questions answered. Dr. Deric Morrison braved the weather and came from London to Kitchener to present an amazing session titled

“Thyroid Cancer Treatment: One Size Does Not Fit All”. Dr. Morrison is not only a practising Endocrinologist but an Assistant Professor at the University of Western Ontario and also part of the Cancer Team.

With the changing times and with so much information available through technology, we now only have 2 meetings a year instead of the 5 that we had for about the past 35 years. We are still very fortunate to have a very loyal and dedicated Board of Directors who work very hard during the meeting to keep it running very smoothly. We always provide a full Education Table with our pamphlets, Thyrobuletins, memberships and

other useful items. Thank you to everyone. We could not be so successful without you!!



(From left): Dr. Derek Morrison, Endocrinologist, Cassandra Howarth, K-W President, and Susan Hopper, K-W Secretary

### Hypothyroidism Follow Up



You'll need to have your TSH (Thyroid stimulating hormone) checked 6 to 10 weeks after a thyroxine dose change. You may need tests more often if you're pregnant or you're taking a medicine that interferes with your body's ability to use thyroxine. The goal of treatment is to get and keep your TSH in the normal range

(Information taken from the American Thyroid Association website - [www.thyroid.org](http://www.thyroid.org))

## IMPORTANT DATES in 2018

May 21-27	International Thyroid Awareness Week 2018 This year's theme: <b>The Thyroid – Check Your Body's Control Panel</b>
May 25	World Thyroid Day
June 2	TFC Annual General Meeting
June 1-30	<i>June is Thyroid Month in Canada!</i>

