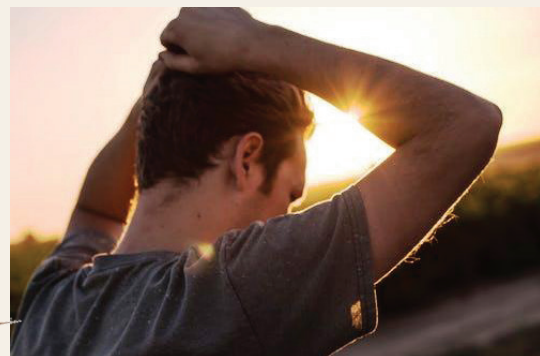


Thyrobulletin



Autumn 2019



The link between
Thyroid and Mental Health



November is Thyroid Disease
in Children Month



Let's Light a Tree for Thyroid!

9th Annual Campaign

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Thyroid Foundation of Canada
La Fondation canadienne de la Thyroïde



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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2019-2020

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

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 diagnostic individuelle veuillez consulter votre médecin.

Thyrobuletin Committee/: Mabel Miller (Editor and Director, Education and Publications); Katherine Keen (Administrative Assistant)
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FROM THE EDITOR



As we look around the landscape where we live most of us have the opportunity to experience the grandeur of the beauty of colours of this season, Autumn. How magnificent the variety of colours are from the yellows to the reds with still some green mixed in between and we are in awe of the beauty of this earth and this country, Canada.

The work of the Thyroid Foundation of Canada can be said to be like the seasons of the year as we move from one season to the next. Change is inevitable and so we must embrace the change as it gives us the opportunity to move from one phase to another, doing what we can to "Help others – Thyroid Patients". We are all volunteers and achieve a sense of pride from all our efforts with our best reward being the satisfaction of helping others. The main focus of our work is to continue to help make lives of thyroid patients a more pleasant and more normal existence. I have been involved with TFC since 1990, almost 30 years and I would not even try to estimate the value of the hours, days, etc. that have gone into the work I've seen done by our volunteers. I did it and I continue to do so to help others - Thyroid patients.

Facebook is a great avenue for news however It is unfortunate that sometimes we receive comments from some upset patients and others who seem to be misinformed or possibly unhappy with the management of their condition. We encourage all to join our team and help with the challenges facing us as an organization. Interested or know someone who might be, please get in touch.

As stated in the president's message we are now looking to financially support research into thyroid disease which affects more of the population than we realize. Fortunately for TFC and thyroid patients there were some kind persons who left us some bequests that will give opportunity to do research into thyroid disease. For me and I'm sure it's not much different for any of us, no matter where you go or what group of people you might be involved with, mention thyroid disease and it's an easy connect. You hear many say I'm taking medication for thyroid disease or I'm being tested regularly because my thyroid levels are all over the place, etc. etc. We are hopeful the research will find some answers to those situations and make all of us with a thyroid condition live a more normal existence. Please get in touch with us should you have any comments. We'll be glad to hear from you.

Wishing all of you a Healthy and Happy Holiday season celebrating in your own way that will bring you the enjoyment of the best life can offer.

Mabel Miller, Editor



MESSAGE FROM THE PRESIDENT



The Thyroid Foundation of Canada (TFC) held a very successful Annual General Meeting on June 22 in Toronto. This year, Ms. Inika Anderson, Executive Director of the Canadian Society of Endocrinology and Metabolism (CSEM) attended the AGM and delivered an excellent presentation to the board on the mandate and work of CSEM. Dr. Morrison, our Medical Advisor, teleconferenced in for the presentation and we discussed future developments for Thyroid research as well as other topics. Ms. Tracy Hey was elected as a new board member. Tracy will be supporting Mabel Miller in Education and Publications. Board members were able to relax in a more casual setting at a Saturday night dinner. On Sunday, plans for next year's 40th Anniversary AGM were discussed with great enthusiasm.

This past year has been a productive one! Following the Strategic Plan which was approved by the board in November 2017, we have completed more than half of the 19 initiatives in this first year of the plan. This was accomplished while having four director positions vacant on the board.

One of the areas I reported on in the spring issue of Thyrobuletin was on thyroid research. TFC is looking into entering into a long-term agreement with CSEM for Thyroid research. This means that we will provide annual grants of possibly \$30K or more for thyroid research through CSEM over a period of five years and CSEM will provide all the administration for this effort. They have a Grants Committee and procedures in place to manage the award selection. We have received some bequests for research which will allow us to begin providing research grants quickly.

We are still looking for volunteers to take on board positions in several areas such as Public Relations, Thyroid Research, Volunteer Recruitment and Development and Local Area Development. The more volunteers we have, the more we can achieve!

If you would like to become a volunteer, please contact us at: **1-800-267-8822** or by email at info@thyroid.ca.

Laz Bouros
President



TFC President Laz Bouros with Inika Anderson, Executive Director, CSEM

La Fondation canadienne de la Thyroïde (FCT) a tenu une assemblée générale annuelle très réussie le 22 juin à Toronto. Cette année, Mme Inika Anderson, directrice exécutive de la Société canadienne d'endocrinologie et du métabolisme (SCEM), a assisté à l'AGA et présenté un excellent exposé au conseil sur le mandat et les travaux de la SCEM. Le Dr Morrison, notre conseiller médical, a comparu par téléconférence pour la présentation et nous avons discuté des développements futurs pour la recherche sur la thyroïde ainsi que d'autres sujets. Mme Tracy Hey a été élue membre du conseil d'administration. Tracy soutiendra Mabel Miller dans Education and Publications. Les membres du conseil ont pu se détendre dans un cadre plus décontracté lors d'un dîner le samedi soir. Dimanche, les plans de l'AGA du 40e anniversaire de l'année prochaine ont été discutés avec beaucoup d'enthousiasme.

L'année écoulée a été productive! À la suite du plan stratégique approuvé par le conseil d'administration en novembre 2017, nous avons mené à bien plus de la moitié des 19 initiatives de la première année du plan. Cela a été accompli alors que quatre postes d'administrateur étaient vacants au sein du conseil.

Un des sujets sur lesquels j'ai parlé dans le numéro du printemps de Thyrobuletin était la recherche sur la thyroïde. Le TFC envisage de conclure un accord à long terme avec le CSEM pour la recherche sur la thyroïde. Cette signification que nous fournirons des subventions annuelles pouvant atteindre 30 000 dollars ou plus pour la recherche sur la thyroïde par le biais du CSEM sur une période de cinq ans et le CSEM assurera toute l'administration de cet effort. Ils ont un comité des subventions et des procédures en place pour gérer la sélection des bourses. Nous avons reçu des legs de recherche qui nous permettront de commencer rapidement à fournir des subventions de recherche.

Nous sommes toujours à la recherche de volontaires pour occuper des postes dans plusieurs domaines tels que les relations publiques, la recherche sur la thyroïde, le recrutement et le développement de volontaires et le développement local. Plus nous avons de volontaires, plus nous pouvons accomplir!

Si vous souhaitez devenir volontaire, veuillez nous contacter à: **1-800-267-8822** ou par courriel à info@thyroid.ca.

Laz Bouros
Président



JUNE ROSE-BEATY - IN REMEMBRANCE

Ottawa chapter members as well as members of the thyroid community nationally and internationally were saddened at the passing of long-time member and volunteer, June Rose-Beaty, on March 27, 2019. June was one of the founding members of the Ottawa Chapter and was instrumental in maintaining a well-functioning Chapter for over 25 years.

During the early years in Ottawa, Penny Jackson remembers June's dedication to the work of the local chapter, and the many hours that she devoted to its activities. She was passionate about helping others with thyroid disease as they sought treatment or adapted to life with a chronic disease. June's beloved husband Stuart, greatly encouraged her with all her work for The Thyroid Foundation of Canada and lovingly cared for her especially in the very difficult latter decade of her life until his death the year before.

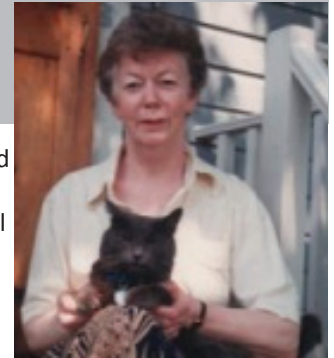
Over the years, she shared her wealth of knowledge and understanding of the many facets of thyroid illness, of available services and how and where to access medical help. Dagmar vanBeselaere remembers June's support and her willingness to listen when she was frustrated, bewildered and angry after a doctor's failure to correctly diagnose Graves' disease.

June was an excellent leader, excelling in her ability to recruit volunteers, engage them in tasks and equip them with the knowledge needed to do the job. She retired as the chapter president only when Parkinson's disease made it too difficult for her to continue. Carolyn Goodfellow remembers how June shared her vision of the Foundation and her enthusiasm for organizing public education meetings, by ensuring that every chapter member was engaged in some way. In particular, she remembers a young, pre-med student who had great success in finding speakers for the meetings and who enjoyed the opportunity to meet these specialists. She also recruited an unemployed young man, who was interested in working on our web site and soon after he found full-time employment doing similar work!



June Rose-Beaty (centre) with Ottawa Chapter members in 2005
(L-R) Carolyn Goodfellow, President, Dagmar Van Beselaere, Elizabeth Hennesey and Anna Kyle

At the national level, June believed that communication was very important. She worked for several years as editor of Thyrobuletin and attended national meetings as the representative from the Ottawa Chapter.



June Rose-Beaty

She attended the inaugural meeting of Thyroid Federation International (TFI) in Toronto in 1995 and several subsequent international conferences to promote thyroid awareness worldwide. For 10 years, June was editor of Thyroworld, the TFI newsletter.

Many other friends and acquaintances remember her fondly, and we recognize her long and outstanding commitment to the Thyroid Foundation of Canada. Donations in memory of June would help to continue the work that was close to her heart.

Ottawa Chapter Members

It is worth noting that June became an integral part of Thyroid Federation International, willingly sharing her talents as editor of their newsletter Thyroworld for many years.

Comments from TFI associates all over the world state how well she was known and how well she was liked. TFI dedicated a whole page in their latest publication to June.

Many of those who knew June when she was active with TFC have now passed on too. Phyllis Mackey, a member on the National Board with June many years ago, remembers June was always happy to have her picture taken and had a lovely smile. She remembers June was always very pleasant to deal with and very helpful at committee meetings. June was well read and had many excellent ideas for the Thyroid Foundation, to which she showed great dedication. Phyllis was the official photographer for the Thyroid Foundation of Canada National Board events for many years and shared her talents creating some wonderful memories. Nathalie Gifford, Past President of TFC fondly remembers June as a fantastic member of the team, very personable and a great help in growing TFC.

Interestingly enough, as editor of a publication that June once so proudly produced, I hope I can in some small way provide something that is worthwhile like she did. I shared many times with her on the TFC National Board and, as everyone else expressed, she was a wonderful person to share thoughts and ideas with, always for the best interest of all thyroid patients across our nation. She left a legacy of dedication, wisdom and insight in all she was involved with.

*Mabel Miller, Editor, Thyrobuletin
Director, Education and Publications*

THYROID FOUNDATION OF CANADA BOARD OF DIRECTORS



TFC Board of Directors are Busy People We need you!

Yes, we are busy, very busy with so much to do and sometimes having to take on lot more than we expected. In spite of this, what we do and what we are challenged with always proves to be fulfilling and gratifying in the end.

Education and Awareness or Research or Patient Support or acquiring Funding requires a lot of work, work that is unseen by others but it definitely is there, that's what we do. More Board members would help so we are hoping you will consider getting involved and at our June 2020 AGM we will see our numbers grow. Some of us will be completing our terms according to the By Laws and will be leaving the board which results with fewer left to carry on with our goals.

Nominations are always welcome and will be formally considered at next year's 2020 AGM in Kingston, ON where the first organization in the world to help thyroid patients was formed.

Specific skills are not required for you to be part of the National Board of Directors. We just need people who are willing to help in any way they can and Help us to Help others. Maybe you know someone who could; let them know and ask them to get in touch with us. 1-800-267-8822 or nominations@thyroid.ca

Consider helping out now.

Mabel Miller,
Nominations 2020 Committee Chair.



TFC Board and Chapter members hard at work at AGM 2019



Do you have thyroid disease?

Would you like to Help us Help other thyroid patients??

Lots to do and lots of interesting happenings

Be part of a hardworking energetic group of dedicated volunteers

Join the team and enjoy some meaningful experiences.

Oh yes, and we all have thyroid disease!



THYROID DISEASE – ONLY ME

You're not Alone!!

Do you feel your thyroid problems are different? Do you feel it's the way you'll always be – tired, gaining weight and can't lose it, losing weight and can't gain it, problems with your skin and your hair, nail breakage, and on it goes?

Well, you are not alone. There are many who share similar problems because of thyroid disease and we try to let patients know they are not alone by featuring Personal Stories in each Thyrobuletin publication.

If you have a story to tell about your thyroid condition, let us know about it so we can all share and give others a sense of "You're not alone". Contact us at info@thyroid.ca and we'll be glad to get in touch.

Flu shot 2019 - It's that Time!

The weather is getting colder. It's time to prepare for those colder temperatures with proper precautions to stay healthy. One thing to remember, flu season is almost here.

Flu season usually starts in late fall, peaks around January, and ends around March, although it can last as long as April or May.

Time to make sure you haven't forgotten to get your annual vaccination; as well check who else in your family should get one. Always remember to check with your doctor or Community Health officials regarding any concerns you may have.

Do those with autoimmune conditions have a greater risk of getting the flu? There is indication that autoimmune conditions do and since thyroid disease is an autoimmune condition it's best we make sure we protect ourselves from the flu. So, some wise advice –

Get a Flu shot - Spread the word!!!



RECOGNIZING MENTAL HEALTH MAINTENANCE

By Heather Paul, R. Psych

As research has shown, many symptoms of thyroid dysfunction can mimic psychological disorders. Depression symptoms may include depressed mood, fatigue, weight gain, reduced sexual desire and trouble concentrating. Anxiety symptoms may include nervousness, rapid heartbeat, excessive sweating, weight loss and sleep problems. This revelation has impacted me both personally and professionally.

I am in the business of mental health. I have been a licensed psychologist for over 25 years. Over this time I have collaborated with many clients with a diagnosis of depression and/or anxiety. Treatments have included psycho-therapy, development of coping skills, use of activities such as exercise, mindfulness, meditation, hypnotherapy, healthy eating and sleeping regimes, and the use of medication recommended by a medical doctor. These options are often quite beneficial in the management of depression and anxiety symptoms. I continued to obtain professional development training in treatment options, eager to learn about the latest form of therapy and how to apply what I have learned to my practice.

I am a person who tries to “practice what they preach” – thus I have been an advocate for work-life balance and self-care. I learned to set boundaries in my personal life, learned to re-adjust my daily routine when life changes happened, (moving to a new community, changing jobs or the arrival of children) and to have moments that fed my individual needs as well. I enjoyed reading and took classes in sewing, quilting and painting. I enjoy volunteering and would often include the whole family in activities that taught valuable lessons to my children.

One of the occupational hazards of the psychotherapy profession is not being aware of the presence of depressive or anxious symptoms in your own life. The adage “Physician – heal thyself” comes to mind. I am grateful that my practice of self-care allowed me to reflect and recognize that I was experiencing symptoms of depression following a particular series of life changes in a short period of time.

I had always been a good sleeper. Even as a teenager I was not a person who could stay up late. I would often come home after school and have a nap before suppertime. My mother was the same, so no-one really noticed it was a strange thing to do. Fatigue was often in my life, so much that I cannot tell you how many times I was tested for iron deficiency. Results would be sometimes yes, sometimes no. Weight issues in my teen years became my obsession. No matter what I did – including abstaining from eating – changed my weight. I was a fairly active person – exercised twice a day and swam three times a week to counter the effects of scoliosis.

So, when in my early 30's I noticed the extreme fatigue, slow, depressed mood, and loss of interest in any activity, I went to my family doctor to ask that she “send me to someone like me”. Depression does not suddenly demonstrate itself. It is slow, almost unnoticeable. By the time it has taken hold, the behaviours and symptoms are almost second nature – you do not notice the changes unless you step back and think about it. Most people who have depression can carry about the day, doing what they always do. However the effort and toll the activities take on one's physical and emotional strength is heavy – often leading to the crash in the privacy of your own home. This is how I felt – I was able to get through the day, but once home after my workday, activity became less, my stamina lessened and my interests in anything became non-existent.



Depression and anxiety has been in my family on both sides for many generations. I wasn't surprised I was feeling this way given the genetic odds. I felt I was lucky enough to recognize it, and to seek help.

But my doctor had other ideas. While she agreed my symptoms could be indicative of depression, she also asked me about my tolerance for heat and cold – *always cold*; weight fluctuation – *could not lose weight*; appetite - *never felt hungry but did eat meals*; nails and hair – *always brittle and losing lots of hair*; sleep – *in bed by 9:00 PM, sleep soundly, still tired in afternoons*. These were not new symptoms – they were the story of my existence.

I had a family story of all of my symptoms – depression – check; overweight extended family; family members always cold and tired – could sleep on a bed of nails, always had sweaters on, even in summer. (I was cold in Jamaica in July). We often jokingly referred to all of these as the Family Trend.

By now I guess you know how my request for a referral to a psychologist went. It didn't. Blood work, CT Scan and further nuclear imaging identified Hashimoto's Hyperthyroidism. It was so severe my doctor suggested I mention it to my family, given we all had the “family traits”. My sister and mother were diagnosed immediately with hypothyroidism. I received treatment, including surgery. For the past twenty-five years I have been actively involved in my treatment.

(Continued on page 8)

(Continued from page 7)

Going through this experience is one of the best professional development opportunities I ever had. I researched Thyroid Dysfunction and was very fortunate to have a member of the Executive of Thyroid Foundation of Canada living in my community. She provided me with valuable information that I was able to learn from and to pass on to my clients.

I was able to incorporate what I learned into my practice. Any referrals I received from physicians, I asked that T4 and TSH levels be assessed. During my initial sessions, I include a list of questions reflecting possible thyroid dysfunction so I can consult with the client's family physician. These changes to my practice have led to some clients receiving a diagnosis of thyroid dysfunction from their family doctor. As well it has helped to target psychotherapy and treatment options when we know thyroid dysfunction is or is not an underlying issue. Even those patients who are referred and already have a diagnosis of thyroid dysfunction, my asking the questions help to understand presenting psychological symptoms with a wider lens.

Of course, a separate diagnosis of depression or anxiety can also be present. Regardless if your symptoms are the result of thyroid dysfunction or depression or anxiety or a combination of both, there are things you can do to improve your quality of life. I would encourage you to discuss these options with your physician. By collaborating with them, you can then decide if these suggestions may be benefit.

First and foremost is to understand the diagnosis – there are physiological components in thyroid disorders as well as in depression and anxiety. Therefore there will be some times that no matter how dedicated we are to adhering to a healthy living routine, our bodies will let us know that we are not in total control. But that is OK because we know we are doing our part.

Once you know how the symptoms impact your life, carefully adjust your activities to allow you to provide the gradual re-introduction of what you wish to accomplish, while providing a window that allows you to re-group. For example, rather than returning to the gym or a volunteer group three times per

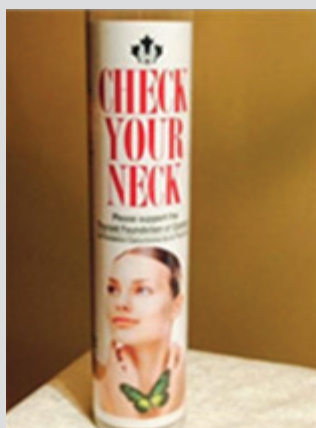
week, pick one time per week for a couple of weeks. This allows you to tweak what works for you. Take a moment to relish the fact that you are back at the gym or involved with your volunteering, rather than being disappointed that you are not back to where you once were. It is OK to be gradual – remember, many things changed gradually, so you will need time to re-group and organize.

If eating patterns have included less than healthy choices, consider taking one meal or snack at a time to make the changes. For example, breakfast can be a good place to start as it can set the tone for the day. Check with a dietician to review what would work best for you. Dieticians can offer many choices that are quick and easy and fill your nutritional needs.

Consider meditative activities such as Yoga, Mindfulness or Meditation. Resting the mind is a skill that can be learned and it promotes overall relaxation and a sense of well-being. Mindfulness helps us stay focused on what is happening in the moment and encourages a sense of inner contentment and awareness. There are many forms of Yoga, however all can provide physical and emotional benefits.

Psychotherapy is also an effective tool that can help us stay grounded and true to ourselves. Ask the counsellor if they are familiar with thyroid disorders. There are many models of psychotherapy (i.e. Cognitive Behavioral Therapy (CBT), Interpersonal Therapy (IPT), Dialectical Behaviour Therapy (DBT)). One size does not fit all, so you can research and find a method that you are comfortable with.

Mental health maintenance is important to our overall general health. This is especially true when there is thyroid dysfunction. When we have the information that is relevant to us and the willingness to explore options, we are actively engaged in managing the impact our diagnosis is having on our quality of life. Including activities that support our mental health helps us to accomplish our goals and improve our sense of wellbeing.



CHECK YOUR NECK FUNDRAISER SASKATCHEWAN

Past President Donna Miniely held her 6th annual Check-Your- Neck fundraiser. The coin canisters were placed in a number of liquor stores in the Regina SK area. This year's total amount collected was \$380.25. Over the past 6 years, this event has raised close to **\$5,000**.

We hope to expand this fundraiser to other locations and provinces. If you would like to host a Check Your Neck in your area, please contact us at: info@thyroid.ca or 1-800-267-8822.



9th Annual Campaign Let's Light a Tree for Thyroid!

It's our 9th Annual Campaign! Every donation of \$25 puts an ornament on the Tree and will help fund our programs including:

- Maintaining our Website thyroid.ca which provides thyroid-related news and information
- Providing Resource Materials on Thyroid Disease to thyroid patients and medical facilities
- Managing our toll-free Help Line
- Producing Thyrobulletin, TFC's official newsletter with news, patient stories and events
- Holding Public Information Meetings and Forums
- Awarding funds to carry out research on thyroid disease to improve the lives of thyroid patient



Let's Light a Tree for Thyroid!

Name:

Address:

Telephone:

Email Address:

Donation Amount: ☐ \$25 ☐ \$50 ☐ \$100 ☐ Other \$_____ Monthly \$_____

Payment: ☐ Visa ☐ MasterCard ☐ Cheque (payable to Thyroid Foundation of Canada)

Credit Card No.:

Exp Date:

CVV No.:

Donate before December 31st to receive an official tax receipt for 2019. All donations go towards the work of the Thyroid Foundation of Canada. Please send payment to: Thyroid Foundation of Canada, P.O. Box 298, Bath ON K0H 1G0

You can also make your donation online and save postage at: thyroid.ca/donate

Thank you for your support!

THYROID MONTHS



There are many types of Thyroid Disease. Each month we are featuring a different Thyroid topic on our website. For the month of November we are focusing on Thyroid Disease in Children.

October	Hypothyroidism
November	Thyroid Disease in Children
December	Hyperthyroidism
January	Thyroid Nodules
February	Thyroid Disease, Pregnancy & Fertility
March	Graves' Eye Disease (Ophthalmopathy)
April	Thyroid Cancer
May	Thyroiditis
June	Surgical Treatment of Thyroid Disease
July	Thyroid Disease and Seniors
August	Thyroid Disease and Mental Health
September	Thyroid Disease... Overview of thyroid function
Visit <i>thyroid.ca</i> each month to read our Thyroid Topics	

WHAT DO YOU KNOW ABOUT THYROID DISEASE AND CHILDREN?

A thyroid patient, a mother and a grandmother's point of view.

We don't often hear about Thyroid Disease in Children as much as we do with adults – and then it's mostly females who talk about it. The basic reason for this is thyroid disease is mostly diagnosed later than childhood and often children don't talk about their condition as much as adults do. If not for the testing thyroid disease in North America of all babies at birth, I'm sure we would see many more cases diagnosed well into childhood.

Most people don't realize - the Thyroid Gland affects every cell, tissue, and organ in the body. It affects growth and development and is therefore essential for life. For those of us who deal with thyroid disorders ourselves, most of us have come to realize that. The condition is mostly genetic so if I have a problem with my thyroid, I'd better be sure to let all my family know there is a possibility of others developing thyroid disease too.

This includes children – especially children!!

Children can't express that something is wrong with how they feel nor do they know if someone in the family has thyroid disease. The onus is on family to recognize what might be happening to the child when they are not feeling well or behaving abnormally. A simple blood test can determine whether there may be a problem or not. If a thyroid problem is diagnosed, children can return to a normal functioning level with proper treatments.

For example, hypothyroidism can be treated with medications. Once the treatments are working well, the condition is stabilized. With other thyroid conditions, such as hyperthyroidism or thyroid nodules, other approaches are used and can be very effective.

Even though thyroid disease can develop less often in children than adults, the symptoms leading up to a diagnosis can be very similar.

If your child has thyroid disease, find out about the disease – you need to know the symptoms, the effects, how it can impact the child in various ways. Recognize when the child's thyroid condition may be affecting many things that are happening to them. Becoming better aware and better informed can make life a lot better for the whole family.

The prime thing to remember is – know what thyroid disease is all about – know that it affects children as well as adults and can have a big part to play in the proper development of the child – their growth, their ability to learn and function normally.



Female Thyroid Patients of child-bearing age who anticipate getting pregnant or are pregnant should also be aware that the proper functioning of their own thyroid can play a big part in the development of the fetus.

Pregnant mothers with thyroid disorders who are not receiving proper treatment for their condition risk developmental problems of the baby prior to delivery.

I firmly believe for any of us who have a health problem (whether it be thyroid condition or not), it is our responsibility to follow through with treatments and management of our condition. As parents, it's also our responsibility to ensure our children's health is well taken care of. Keep up to date on new approved methods that are available and check them out with medical professionals.

Mabel Miller
Editor,
Director, Education and Publications

November is Thyroid Disease in Children Month

Other reading on Thyroid disease and children:

- **Thyroid Disease in Childhood**
- **Hypothyroidism in Infancy and Childhood**
- **Hypothyroidism**

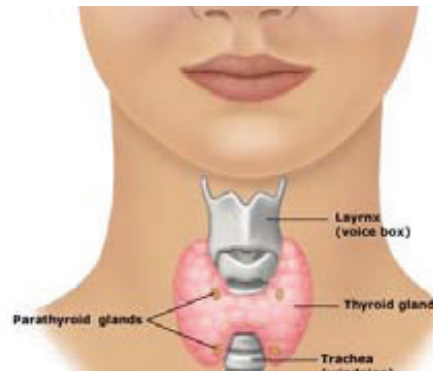
THE THYROID ZONE: KNOWING HOW THYROID DISEASE CAN AFFECT YOUR BODY

Although weighing at most 20 g when normal, the thyroid is one of the largest glands of the human body. Its importance has been in the limelight lately because of the nuclear leak in Japan. So why is radiation dangerous for the thyroid?

The thyroid gland produces its hormones using iodine. When there is a nuclear leak, radioactive iodine can be released in the atmosphere and it then contaminates the soil and the food we eat. The thyroid gland is unable to distinguish between the iodine it needs to produce thyroid hormones and the radioactive iodine. Radioactive iodine is captured by the thyroid and, if present in high doses, can lead to the development of thyroid cancer. Radioactive thyroid is especially problematic for young children or pregnant women because the foetus might get exposed. It is important to note that the foetal thyroid has completed its development by approximately the 12th week of gestation and starts producing its own thyroid hormones.

So far, the doses of radiation that have reached North America are not high enough to be considered dangerous and do not warrant thyroid protection by taking potassium iodide pills to block the capture of radioactivity by the gland. Public authorities are keeping a close watch and will advise the public if they need to take potassium iodide pills. They should not be taken unnecessarily as they can have side effects in some people (allergic reaction, skin rashes, interference with normal function of the thyroid gland).

The thyroid gland affects our life in many other ways besides making us worry in case of a nuclear explosion. It produces essential hormones that are released in the bloodstream and that increase metabolism and promote growth and development. So when the thyroid gland is underactive (hypothyroidism) things can seem to be “slow”. One can be tired, have problems concentrating, gain weight, and have muscle cramps. Young women with thyroid hypofunction can have changes in their menstrual cycle and have problems with fertility. When the thyroid gland is overactive things can be in “override”: symptoms include palpitations, heat intolerance, tremors, increased sweating, anxiety and weight loss despite conserved appetite. Symptoms of thyroid dysfunctions are not exclusive to the thyroid and confirmation by appropriate lab tests is usually required.



Hypothyroidism is easy to treat by replacing the missing hormone with thyroxine tablets. Hyperthyroidism can be treated with medication, radioactive iodine to destroy the part of the thyroid that is overactive. Surgery is used for cases not responding to medical therapy or special circumstances where rapid control of thyroid hormone levels is required or there is a contraindication to the other treatment.

The thyroid can also harbour thyroid cancer without any exposure to radiation. Thyroid nodules (“lumps”) are a common occurrence and are more frequent in women and with increasing age. Thyroid cancer usually presents as a painless nodule. Its prognosis is usually very good but requires complete thyroid removal and long term thyroid hormone supplementation and follow-up. Depending on the type of cancer, its size and the risk factors for recurrence, it is sometimes necessary to complete the treatment with a dose of radioactive iodine, given under medical supervision. If you suspect thyroid dysfunction, do not hesitate to talk to your physician. Investigations are easy to perform and readily available all throughout the country.

Hortensia Mircescu MD FRCPC
Assistant Clinical Professor, Faculty of Medicine,
University of Montréal
Endocrinology Division, Hôtel-Dieu du CHUM,
Montreal, QC

Reference for radiation precautions:
A Joint Statement from the American Association of Clinical
Endocrinologists, the American Thyroid Association, The
Endocrine Society and the Society of Nuclear Medicine
www.thyroid.org accessed on March 31st 2011.



Halifax NS Area Public Education Meeting

DATE:	Wednesday, November 13, 2019, 7:00 - 8:00 PM
PLACE:	Tantallon Public Library, 3646 Hammonds Plains Road, Upper Tantallon NS
TOPIC:	"GETTING TO KNOW YOUR THYROID"
ORGANIZER:	Tracy Hey, Volunteer, Thyroid Foundation of Canada Join Tracy Hey for an hour of education and support around thyroid health.

Educational materials available

902-826-3330 <https://halifax.bibliocommons.com/events/5d7fe3ff83fca52300826b02>

Kitchener-Waterloo ON Area Public Education Meeting

DATE:	Tuesday, April 28, 2020, 6:30 - 9:00 PM
PLACE:	Kitchener Public Library, Main Branch, ROOM D & E, 85 Queen Street N., Kitchener ON
TOPIC:	"WHAT'S NEW IN THYROID DIAGNOSIS AND TREATMENT"
SPEAKER:	Dr. Deric Morrison, MD FRCPC, ECNU, Endocrinologist, ASSISTANT PROFESSOR -- Division of Endocrinology, Dept. of Medicine, University of Western Ontario, London, Ontario

Education Table - 6:00 - Business Meeting - 6:30 - Speaker - 7:00

PLEASE REGISTER: **519-743-7502** or kpl.org

OUR GOALS	NOS OBJECTIFS
Awareness – To awaken public interest in, and awareness of, thyroid disease.	Sensibilisation – Accroître l'intérêt du public envers les maladies thyroïdiennes et le sensibiliser davantage à ce problème.
Support – To lend moral support to thyroid patients and their families.	Soutien – Offrir un soutien moral aux personnes atteintes d'une maladie thyroïdienne et à leur famille.
Research – To assist in fund raising for thyroid disease research.	Recherche – Contribuer à recueillir des fonds pour la recherche sur les maladies thyroïdiennes.



Thyroid Foundation of Canada 1980 - 2020 40 years!

since the Thyroid Foundation of Canada was formed in Kingston, ON

Diana Meltzer Abramsky had a vision and a dream and now some 40 years later we are a source of much needed information and support to thyroid patients all across Canada and beyond.

Join us in Kingston, ON in June 2020 to mark this special occasion. More information to follow. Keep checking our website.

YOUR SUPPORT MAKES A DIFFERENCE

To our members, we want to thank you for all your support this year. The Thyroid Foundation of Canada is run by a group of volunteers who have been impacted by various thyroid disorders personally and within our families. We are a passionate group who want to increase awareness of the prevalence of thyroid disorders in Canada and make a difference for all those suffering from the impact of thyroid dysfunction.

We have been fortunate to receive generous bequests to support our mission and much of that will be supporting upcoming research. As we don't receive government funding, we rely on the donations of our members and those affected by thyroid disorders to operate our charity organization. Our various initiatives such as our yearly **Let's Light a Tree for Thyroid** fundraiser and our ongoing **FlipGive** partnership offer ways to donate, however donations at any time are welcome and we encourage you to talk to friends and family to become a member and support the organization.

We welcome donations and are always open to volunteer support. Your donations and membership allow us to operate all our administrative functions, marketing to build awareness, production of our Thyrobuletin and website content, events in the communities, and much more. We need your support to continue to be active advocates arming thyroid patients with pertinent information and tools to support and improve their lives.

Renew your membership - and add a donation. The generosity shown by members and friends over the past 7 years has helped to make our **Let's Light a Tree for Thyroid** campaign a success, raising close to **\$25,000!** Share with your friends and let's make this year's Light a Tree the biggest yet! Simply donate online at: thyroid.ca/light-a-tree-for-thyroid



Susey Harmer
Director, Fundraising

Join: thyroid.ca/join **Donate:** thyroid.ca/donate **Volunteer:** thyroid.ca/volunteer

FUNDRAISER, GANDER, NL



Thyroid Foundation of Canada Ticket Lottery

Handmade Quilt – 100% cotton, double bed size
Made by a Group of Thyroid patients in Gander, NL

To be drawn April 30, 2020

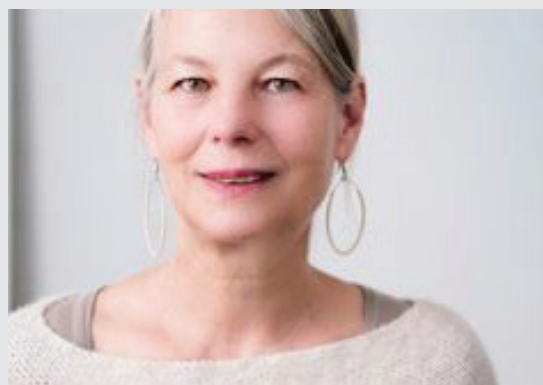
For more information, please contact us:
800-267-8822 info@thyroid.ca

HAVE YOU GIVEN ANY THOUGHT TO LEAVING A BEQUEST TO TFC?

The Thyroid Foundation of Canada has been fortunate to receive several bequests recently for Thyroid Research. Important though research is, we are also in great need of funding to continue and expand our **Awareness** and **Support** Programs. You can make a lasting difference and help other thyroid patients!

By including the TFC in your will, your gift will help achieve the following:

- Raise awareness and **reach more thyroid patients**
- Impact the **medical profession**, the government and the public
- Accomplish **earlier diagnosis** for thyroid patients and provide education on the best treatments
- Receive **significant tax benefits** for your personal estate



With this gift, you can make a lasting impact for those suffering from thyroid disorders. Learn more on our website at: thyroid.ca/bequest

Contact us for more information: 1-800-267-8822 or info@thyroid.ca



IS IT TIME TO RENEW YOUR MEMBERSHIP?

All Memberships end December 31st each year
Renew now or consider giving someone a Gift Membership!

MEMBERSHIP AND DONATION FORM

Name:

Address:

City:

Prov:

Postal Code:

Telephone:

Email:

MEMBERSHIP LEVEL

ONE YEAR:

TWO YEAR:

☐ Regular \$35 ☐ Senior \$30 ☐ Family \$45

☐ Regular \$60 ☐ Senior \$50 ☐ Family \$65

TOTAL AMOUNT

\$ **Membership** *(All members receive Thyrobuletin)*

\$ **Donation** *(All donations support the work of the Thyroid Foundation of Canada)*

\$ **Total Amount** *(All membership fees and donations are issued official tax receipts)*

PAYMENT METHOD

☐ Visa ☐ MasterCard ☐ Cheque *(Payable to Thyroid Foundation of Canada)*

Visa / Mastercard No.:

Expiry Date:

CVV No:

FlipGive An Easy Way to Donate...Go Shopping!

Planning on online shopping? We have partnered with **FlipGive** to make donating to the TFC effortless. By visiting FlipGive via the link below, simply do your online shopping as you normally would – be it Amazon or Walmart, Nike or Indigo (or any of your favourite retailers) – and a percentage of your purchase goes directly to TFC. Do all your **Black Friday, Cyber Monday** and **Holiday Shopping** with us on FlipGive. It doesn't cost anything extra for you and you can feel good knowing your purchases will help support our programs.

To support our fundraising campaign:

1. Visit <https://www.flipgive.com/f/1139467> (scroll up for the TFC Team)
2. Click **Shop Now** or **Donate**

Team name on FlipGive is **TFC – Thyroid Foundation of Canada**.

Please share with family and friends to make a bigger impact!

Shop. Get. Give.