



D VINE

How you want to be treated. P R O V I D E N C E

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Partnership between Providence Health Care and Uniterra sends two palliative care nurses to Malawi in Africa on volunteer program.



From left to right: Jenica Burns and Nadine Griggs will be volunteering in the African country of Malawi as palliative care advisors this March.

Caring Hearts

Dear PHC,
 It sounds trite, but I would like to say thank you for saving my life. When Laura and I were delivered to St. Paul's Hospital, the ambulance attendant said that this is where miracles happen.
 My entire family, especially Laura, felt supported and were given hope by the pre-transplant team at St. Paul's Hospital.
 Fifty-one years ago I was given life here, being born to single mother, and was baptized and named after this fine institution. Recently, I very nearly died and was given the last rites of the Catholic Church in this very hospital, but a miracle, however you define it, happened and I thank you for that.
 I apologize that my words fall short of the thank you that the team at St. Paul's deserves.
With gratitude, Paul L.

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PHC Named Among Top BC Employers



British Columbia's four Lower Mainland health organizations – Fraser Health (FH), Providence Health Care (PHC), the Provincial Health Services Authority (PHSA), and Vancouver Coastal Health (VCH) – have once again been named among the province's Top 55 Employers for 2011.

Awarded by MediCorp Canada Inc (the organizers of the Canada's Top 100 Employers competition), this is the third year in a row that PHC and PHSA have made the prestigious list and the second for

FH and VCH. The Top 55 Employers lead their industries in recruitment and retention and offer exceptional places to work. The selection of employers is based on high employment standards and performance in several areas, including physical workplace; work and social atmosphere; health, financial and family benefits; vacation and time off; employee communications; performance management; training and skills development; and community involvement.

The four health organizations employ more than 65,000 staff in highly specialized clinical and non-clinical roles.

They were recognized as offering employees progressive work policies, opportunities for growth, competitive compensation and excellent benefits.

"It is truly an honour for Providence Health Care to be chosen three years in a row as a leading employer in this province," said Dianne Doyle, President and CEO of Providence. "This is a testament to our unique culture here at PHC, and because of that we have been able to attract and retain some of the best health care professionals from BC, Canada and around the world."

Providence Health Care is one of Canada's

largest faith-based health care organizations, operating 15 health care facilities in Greater Vancouver. Guided by the principle "How you want to be treated," PHC's 1,200 physicians, 6,000 staff and 1,500 volunteers deliver compassionate care to patients and residents in British Columbia.

A full list of the Top 55 employers, including detailed reasons for the selections, can be found at <http://www.canadastop100.com/bc/>. If you are interested in a career with PHC please visit our careers website: <http://www.providencehealthcare.org/PHCCareers/>.

Mission Awards Recognize Providence Health Care Staff and Physicians that Live our Mission and Values



Do you know a staff member, physician, volunteer or team who consistently lives the mission and values of Providence Health Care?

Each year we invite nominations for both individuals (staff, volunteers and physicians) as well as teams who demonstrate through action and word the Mission, Vision and Values of Providence Health Care and the abiding spirit of the Founding

Congregations of Sisters. Awards will go to two individual nominees - one from residential care and the other from acute care - as well as one team nominee.

Please take some time to nominate an individual and/or team that best illustrates the power of the mission and values to shape our lives and workplaces. The nomination form is available on our intranet site PHC Connect under programs and services/mission services/mission awards.

The nomination deadline is Thursday,

March 31, 2011. Previous recipients include:

2010 Individual Acute Mission Award

Scott Harrison, operations leader, HIV & Addictions Programs, SPH.

2010 Individual Residential Mission Award

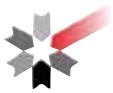
Ouida Lanuza, social worker, Langara.

2010 Team Mission Award

MSJ 3rd Floor Medicine Front Line Team (Sara Charlton, CNL, Zerlina Chan, CNL, Tom Sinclair, OL, Cindy Elliott, OL).



A few of the recipients of the 2010 Mission Awards.



Strategic Direction:
Promote
Partnerships

Two Providence Health Care Nurses Get Ready to Develop Skills in the Developing World

In March 2011, Jenica Burns and Nadine Griggs will board a plane to London, England, then one to Johannesburg, South Africa and finally one to Lilongwe, Malawi (near Tanzania and Mozambique) on the continent of Africa. It is a long trip, but for the Providence Health Care nurses, it will be well worth any jetlag, as they are heading to the district of Mulanje in Malawi to participate in a three-week volunteer program with Uniterria called Leave for Change® (L4C) at Mulanje Mission Hospital.

Uniterria is a major Canadian voluntary cooperation and international development program jointly operated by WUSC (World University Services of Canada) and CECI (Centre for International Studies and Cooperation) and is present in 13 countries. A component of Uniterria, Leave for Change® (L4C) encourages employees from participating companies and organizations to transform part of their annual leave into a two to four-week volunteer assignment in a developing country.

Last fall, Providence Health Care posted a call for applicants interested in participating in the Leave For Change® program. The initial idea was that the organization would be able to send one staff member



These photos were taken by Dr. Romayne Gallagher, head of residential care and palliative care division, PHC, in Malawi last year.

in 2011, with hopes of it becoming an annual opportunity.

Both from the palliative care program, Nadine, a direct care nurse at St. Paul's Hospital and Jenica, a patient nurse educator and member of the palliative outreach and consult team (POCT) providing care to PHC's residential sites, applied for the opportunity. After going through an extensive interview process in the fall of 2010 with PHC and Uniterria, they were met with the good news before Christmas – Nadine and Jenica would both be going to Malawi as palliative care advisors.

Thanks to a three-year commitment and donation by the St. Paul's Hospital Foundation, with additional one-time resources provided by the Tapestry Foundation for Health Care, a donation from a people-development trust fund of Mission, Ethics & Spirituality, and non-

operating-fund donations through the palliative care program, PHC was able to select two participants for the first year of its partnership with Uniterria.

"Providence Health Care is proud of forming this exciting partnership with Leave for Change," said Dianne Doyle, President & CEO. "Caring, learning and teaching are foundational to our mission. So is developing our staff and helping provide opportunities that expand their experiences, enable them to pursue their passions and share their new knowledge with colleagues. I am extremely grateful to our foundations and colleagues for providing the donations towards this program."

Nadine and Jenica's volunteer mandates are based on the specific needs of Mulanje Mission Hospital. The hospital has been developing a palliative care program for



the past several years, but has experienced challenges with staff retention at the hospital. Nadine and Jenica's tasks will include palliative care advocacy, training, one-on-one coaching and workshops for staff.

Both women are looking forward to sharing their knowledge and passion with the hospital staff in Malawi and to bringing back learnings to share with staff here at home through lunch and learns, palliative care education day and other opportunities.

"I'm really looking forward to sharing our stories and I hope to incorporate our experiences in some of the palliative care teaching sessions I do across PHC," said Jenica.

"It will be really interesting to see the innovative strategies they're

using to treat patients without the use of hi-tech machines," added Nadine.

They hope their trip will put some positive steps in place to continue the partnership between Mulanje Mission Hospital, Uniterria and Providence Health Care. Keep reading d'Vine for a follow-up story once they are back.



EDEN CORNER

Lunar New Year at Holy Family Residence

Residents at Holy Family (HFH) were treated to a lion dance for Lunar New Year earlier this year. The lion dance symbolized the cleansing of HFH residents, patients, and staff, protecting them from evil throughout the year.

During the celebration, the lion danced its way around HFH while residents played the drums and gongs. One resident tied a piece of lettuce around a red packet containing money and used the treat to entice the lion to jump up and eat. The lettuce serves as a symbol of wealth, while the money is a symbol of happiness.

Many other activities took place amongst residents in celebration of the year of the rabbit.

Volunteers gave red packets and golden rabbits to residents and patients who participated in a special Chinese church program and Catholic Mass. During hymns, residents, staff, and volunteers sang traditional Chinese New Year songs.

One highlight was the Chinese Cultural Dancing Group which performed for rehabilitation patients and residential care.

On the Lunar New Year's Eve, residents enjoyed a bus trip to the Buddhist temple for prayer and a seven course vegetarian lunch to celebrate the end of the year of the tiger. The master gave each resident and their family member a red scroll blessing and a red packet containing blessed rice.



Resident Jack Wong receives the blessed rice from the Master at the Buddhist Temple on Lunar New Year's Eve.

Resident Jack Wong, who participated in the Buddhist temple bus trip, extends good wishes

to everyone in 2011, "Congratulations, wishing everybody good health & good wealth all year."

Valentine's For Residents

On February 10, Langara Residence was graced with 35 grade three students from Sexsmith School for a morning of Valentine's crafts.

Students were divided between floors at the site so that they could interact with residents and offer their creative inspiration. There were about 14 residents per floor participating in the crafts and each resident had one or two students helping them out. Some of the residents watched as the students got to work and others dove right into making their own Valentine's.

The youthful interaction with the elementary school students added extra joy and warmth that day to residents living at Langara. In return, the students learned about another generation and about interacting and respecting their elders.

MSJ Residence Celebrates Lunar New Year Family Night



Lion dance performance for Mount Saint Joseph residents.

Residents and family members at Mount Saint Joseph Residence (MSJ) brought in the Lunar New Year with a traditional Chinese meal.

Celebrating the start of the Year of the Rabbit, a traditional Kung Fu demonstration and lion dance were performed by the Traditional Kung Fu Training Centre in Richmond. This group

has been coming to Mount Saint Joseph Residence since 1990 for annual Lunar New Year's celebrations.

The evening was enjoyed by all the residents, family members and staff. Thanks to Tapestry Foundation for making this event possible through funding for the evening dinner and entertainment.



Residents make Valentine's cards with students from Sexsmith Elementary.

Kudos for Great Care at MSJ

My wife was in Mount Saint Joseph Hospital from October 18, 2010 for approximately two weeks. Her operation turned difficult and she had to be transferred to the Intensive Care Unit (ICU) for a few days. In the end, due to God's goodness, everything worked out okay.

Our overall experience at the hospital was satisfactory, but there are a handful of individuals who we felt deserved a special mention, for their professionalism and their genuine care.

We would like to thank the following people:

- Dr. Victor Tsang, the surgeon who operated on the patient.
- Dr. John Boyd, the ICU specialist who was a most competent and calming voice during this most worrisome and stressful time at the ICU.
- Dr. Fera, who was very precise and timely with post-hospital care.
- And last but not least, an ICU nurse who was (luckily) assigned for two days immediately before we were transferred up to the 4th floor west hospital room. We are commending her for her professionalism, her caring attitude, her attention to details, and her sincere approach to patient care. We can say that she is a very considerate person! We were so fortunate to have had her nursing care. Her name is: Mrs. Mary Luk.

Sincerely, James O



Strategic Direction: Foster a Culture of Innovation and Improvement

PHC Technology Brings Nurses Together with NEARR – Nursing Education and Research Rounds

Through the use of technology and nurse-to-nurse information sharing, Providence Health Care (PHC) is enhancing patient health and nurse education. The recently introduced nursing education and research rounds (NEARR), is a monthly series of web-based nursing education sessions where nurses present their research or synthesis projects to an audience of nurses and other health professionals. Nurses can attend these sessions live or participate online via WebEx, with all sessions archived on the nursing research website, InspireNet, for later use.

The first NEARR session was held in January, featuring long-time Providence Health Care nurse leader and researcher, Irene Goldstone, speaking on "Embracing the Chaos: Chart Review as a Tool in Confronting the AIDS Crisis." The inaugural session drew 71 participants including 36 in person and 35 via webinar.

NEARR, a joint project between Providence Health Care and Vancouver Coastal Health, aims to engage nurses in discussion about evidence-informed practice, to increase networking opportunities and provide professional development

opportunities that enhance the professional practice of nurses and positively influence patient outcomes. The launch of NEARR was made possible through funding for a nursing research facilitator position from the Michael Smith Foundation, the work of the NEARR Advisory Committee, and support from nursing leadership at PHC and VCH.

According to Agnes Black, nursing research facilitator for Providence Health Care and Vancouver Coastal Health, participant response has been great so far. One web participant had this to say "I just really appreciate that we are using technology to support the learning and participation of nurses who do not live in the large urban areas. As someone who lives rurally, these are the very opportunities that I am seeking to support my learning, as there is simply no budget to attend conferences."

NEARR is offered to nurses and other interested health care professionals at no cost with webinar access available from any work or home computer. For more information visit the NEARR Action Team page on InspireNet: <http://www.inspirenet.ca/group/nursing-education-and-research-rounds-nearr>.

Upcoming NEARR

Topics and speakers for upcoming sessions include: Dr. Leanne Currie from UBC School of Nursing on Nursing Informatics; Dr Peggy Simpson (CNS in mental health at SPH) on delirium; two wound clinicians from Lion's Gate Hospital on wound care, and more. NEARR presentations will take place monthly on the fourth Thursday at 2 p.m., and last 45-60 minutes. The NEARR calendar for 2011 can be found on InspireNet: <http://www.inspirenet.ca/document/nearr-calendar-2011>.

Webinar Access

To participate in a NEARR webinar, you must first join InspireNet (free and easy to join) at www.inspirenet.ca, and request to be a member of the NEARR Action Team (click

the link under "My Teams" on InspireNet). InspireNet holds the WebEx license for the webinars, so all online participants must log-on through this site. It also helps NEARR organizers keep track of the number of people participating via webinar. Links to the February NEARR session and all future NEARR sessions are found in the NEARR calendar on InspireNet.

Evaluation

NEARR will be formally evaluated in late 2011, to determine the number of participants, and collect participant suggestions. In the meantime, send comments or suggestions for future sessions to the nursing research facilitator: ablack@providencehealth.bc.ca.



From l to r: Aggie Black, nursing research facilitator; Rosa Hart, practice consultant; Astrid Westervelt, nurse educator, clinical information resources; and Shelley Fraser, practice consultant.

PHC Shook It Up with ShakeOut BC

On January 26, 2011, approximately 1,000 Providence Health Care (PHC) staff joined thousands of people across British Columbia in the largest earthquake drill in Canadian history. Participants were encouraged to “Drop, Cover, and Hold On” for 60 seconds, or at the very least, to think about their immediate response to an earthquake.

After the drill, staff shared their thoughts on how they could protect themselves and their patients or residents during a large earthquake

and how they could mitigate potential hazards (for example, ensure that furniture and shelving is secure; and remove glass-plated wall-hangings above beds).

As a result of feedback from participants, some misconceptions were revealed about earthquake safety. We explain some common myths below:

Myth: Stand in a doorway.

Truth: Until about 20 years ago, this was the recommended response to an earthquake. Research now indicates that doorframes may

not offer solid protection because they are not always built into the structural integrity of a building. Doorframes will not protect you from falling debris and they may also move during an earthquake, causing injury.

Myth: “Triangle of Life”. (This is a controversial theory that the safest place during an earthquake is next to tall solid, support objects, so that if the ceiling collapses, it will collapse on an angle and create a triangle-shaped space to hide within).

Truth: Most injuries



and deaths during earthquakes are caused by falling objects, not collapsed structures. Due to strict Canadian building codes and construction standards, and dependable building materials, it is unlikely that a building will collapse. Hiding under a table or desk offers you the best protection during an earthquake.

Myth: “Just run!”

Truth: It is not possible to outrun an earthquake. You are more likely to be injured or killed trying to move during one. “Remember, Drop, Cover, and Hold On” is the recommended earthquake response by seismologists, professional and academic research organizations, and emergency management agencies.

Values in Action: Trust We behave in ways that generate trust and build confidence Recognizing the Accomplishments and Good Work of Our Staff and Physicians

Congratulations to all those celebrating service milestones this year! This year Providence Health Care (PHC) honoured 547 employees and physicians who have distinguished themselves by the quality of their service and the depth of their passion to health care. The total combined years of service amongst these staff members equals 9,915 years in all areas of health care from administration and support services to point-of-care.

Each January, Providence Health Care celebrates the commitment and continuing excellence in care of PHC employees and physicians who have

been with us for 10, 15, 20, 25, 30, 35 and 40 years. The 10, 15, and 20-year staff are honoured at site-specific events, while staff with 25, 30, 35 and 40 years of service are honoured at a special invitation-only dinner.

Celebrating our staff with Long Service Awards is one way Providence Health Care strives to show appreciation for the good work and accomplishments of our employees and physicians. It is through commitment and efforts that Providence Health Care is better able to live our mission of providing compassionate care, teaching and research.



PHC staff recognized for their years of service.

Resourceful Actions St. Paul's Hospital Teams Receive People First Recognition Award

At the recent People First Recognition Awards, Vancouver Coastal Health recognized the amazing team work and clinical expertise demonstrated during the care of a patient on October 21, 2010 involving Richmond General Hospital and St. Paul's Hospital.

Richmond General Hospital Team

On October 21, a young woman arrived at Richmond General Hospital (RGH) with flu-like symptoms approximately four months after giving birth. Recognizing the seriousness of her symptoms, RGH's Dr. Greg Haljan arranged for an urgent echocardiogram (an ultrasound of the heart). The woman's health was deteriorating and at one point she went into cardiac arrest, requiring full CPR (cardio-pulmonary resuscitation) performed by the care team at Richmond General Hospital.

The team at RGH began CPR immediately, while consulting with the

cardiac team at St. Paul's Hospital for an emergency transfer. The woman was immediately transferred by Dr. Haljan and the BC Ambulance Service (BCAS) team to the cardiac operating room at St. Paul's Hospital for emergency mechanical heart support after undergoing CPR for a prolonged period.

St. Paul's Hospital Teams

An operating team, consisting of Drs. Anson Cheung and Jamil Bashir (cardiac surgeons), Drs. Demetrios Sirounis and Matt Klas (anesthesiologists), Dr. Fawas Altaf (cardiac surgery fellow), Jonathan Triana and Harry Mickelson (perfusionists), and operating room support staff consisting of Dave Aulenback, Isabel Kadatawn, Todd Robinson, Janet Dadzak, Eddie Rozental, Mary Sullivan, and Marites Belasario were key in putting the patient on an extra-corporeal membrane oxygenator (ECMO), a machine used

to take over the work of heart and lungs when they are so severely diseased or damaged that they can no longer function to sustain life.

Following the operation, the patient was transferred to a post-operative care team in the Cardiac Surgery Intensive Care Unit (CSICU) that included Dr. Steve Head (anesthesia), Marianne Lesage (primary RN), Michael Knotts (charge RN) and a support staff that included Julbert Cajés, Brenda Chua, Tish Carter, Felino Jayin, Jun Labrador, Pam Mann, Orville Uy, Gina Walther, Omar Serrano, Christopher Williams and Jenny Coll.

Recovery

The patient stabilized over a few days and was able to transfer to an LVAD implant (Left Ventricular Assist Device), as a bridge to recovery. The incredible efforts, skills and collaboration of the teams involved, from the Richmond General Hospital transport team to the St. Paul's Hospital



Front from left to right: Julbert Cages, Felino Jayin, Isabel Kadatawn, Harry Mickelson, Michael Knotts, Tish Carter and Dr. Anson Cheung. Back from left to right: Jonathan Triana, Dr. Demetrios Sirounis, Dr. Jamil Bashir and Dr. Fawas Altaf.

operating room and cardiac teams, saved this young woman's life.

The patient was able to go home after a few weeks in hospital, with her LVAD in place, where she could let her heart recover from the strain it experienced. She has since had a remarkable recovery and was admitted to hospital early in 2011 to have the LVAD removed.

This story is a wonderful testament of the incredible excellence, teamwork, and caring that occurs throughout Providence Health Care and Vancouver Coastal

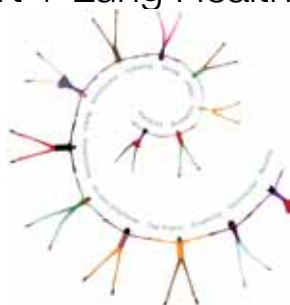
Health. We recognize there were many other staff involved in the complex care of this patient during her journey to recovery. Congratulations everyone for your exceptional work!

People First Recognition Awards

The People First Recognition Awards are presented quarterly at the Vancouver Coastal Health Strategic Implementation Forum (SIF).

Engage In Heart + Lung Health

Join us for Heart + Lung Health FEST 2011, March 8-12 at the Sheraton Vancouver Wall Centre. Discover scientific advances and



contemporary policy issues. FEST 2011 is five days of events that include workshops on best practices in personalized medicine and a forum

of international experts discussing the value of science for healthier societies. Whether you are a scientist, clinician, student, policy maker, or

member of the public, there will be something at FEST 2011 for you! Visit www.fest.heartandlung.ca for program details and how to register.

Join the Tapestry Trailblazers!



Last year's Tapestry Trailblazers after the Scotiabank Half Marathon.

It's official. Tapestry Foundation for Health Care has been chosen as one of three featured charities for the Scotiabank Vancouver Half Marathon & 5K on June 26, 2011. The foundation's Tapestry Trailblazers Team will be raising funds for one of Providence Health Care's important populations of emphasis – People with Specialized Needs in Aging.

Funds raised by the team will support dementia care research through the Centre for Health Aging at Providence (CHAP). Since 2008, Tapestry Foundation has donated more than \$300,000 to CHAP to support this cause.

Interested in joining the Tapestry Trailblazers Team? Contact Carolyn Thornton at 604-877-8187 or cthornton@providencehealth.bc.ca.

Heartfelt Support for MSJ Benefits Cardiac Patients

Guests attending Tapestry Foundation for Health Care's Scotiabank Feast of Fortune event on January 28 wholeheartedly pledged their support for improved cardiac care at Mount Saint Joseph Hospital (MSJ).

More than \$387,000 was raised to purchase an echocardiography machine (ECHO) and Holter monitor analysis unit needed to establish new cardiac diagnostic and ambulatory clinics at the site.

Now in its fourth year, the Scotiabank Feast of Fortune has become a signature fundraising event for the foundation,

supporting priority needs at MSJ. Proceeds from successful past events have supported high-tech equipment for the radiology, emergency and surgery departments including a digital mammography machine, respiratory equipment for emergency care and surgical video systems for minimally invasive surgery.

Tapestry Foundation continues to raise funds to support additional equipment and renovations needed to establish the site's new cardiac care services.



Members of the Scotiabank Feast of Fortune Fundraising Committee presented a cheque to Tapestry Foundation in support of new cardiac care services at MSJ. (L – R) Mark Spelliscy, board chair, Tapestry Foundation; Chris Stepien, director, Foundation Board, and co-chair, event fundraising committee; Mrs. Anita Law, co-chair, event fundraising committee; Ann Corrigan, Foundation CEO; Sing Yeo, director, Foundation Board, and honorary chair, event fundraising committee.

Donations can be made online at www.tapestryfoundation.ca.

Thank You For Making the Lights of Hope Campaign a Success

St. Paul's Hospital Foundation is proud to announce that the 2010 Lights of Hope campaign raised \$2.23 million for St. Paul's Hospital's greatest needs, surpassing our campaign goal of \$1.95 million. Thank you to everyone who helped light the way to a brighter future for our hospital by making a gift to support world-leading care, research and teaching.

Members of the St. Paul's Hospital Family (including caregivers, researchers, physicians, staff and board members) played a vital role in contributing to the success of the campaign. The 2010 Lights of Hope campaign saw 180 members of the

St. Paul's Hospital Family pledge a total of more than \$250,000.

Since 1998, when the Lights of Hope first illuminated the exterior

of St. Paul's Hospital, the campaign has raised more than \$16 million.

To view a list of donors to the 2010 campaign or to relive the lighting of the

display, please visit www.helpstpauls.com.

St. Paul's Hospital's Lights of Hope display.





Strategic Direction: Lead Through Exceptional Care, Service,
Teaching and Research

It's a Busy Spring for Researchers at the Providence Health Care Research Institute



Dr. Yvonne Lefebvre, VP Research and Academics, PHC, and president, PHCRI during a past research week.

The Providence Health Care Research Institute (PHCRI) will be participating in the University of British Columbia's Celebrate Research Week, March 4 to 11, 2011. Celebrate Research Week is held each year to showcase the research being done on the university campus and its affiliated teaching hospitals.

PHCRI Research Day

Taking place at St. Paul's Hospital on March 7, the theme of this year's Research Day is "Nursing Research: Impacting Lives." PHCRI will be presenting a guest speaker. For more details visit www.providenceresearch.ca.

In addition, there will be a presentation of the highly anticipated 2011 Research and Mission Award, presented to a Providence Health Care (PHC) researcher. Last year there were two recipients – a senior investigator award to Dr. Bruce McManus and an investigator award to Dr. Sam Wiseman.

Free Public Lecture

PHCRI is also organizing another special event during Celebrate Research Week—a free public lecture co-sponsored with the Vancouver Coastal Health Research Institute, the Child and Family Research Institute and the UBC Faculty of Medicine. The title of this public event is "Move it! The Latest in Mobility Research." The lecture will be held at the New Lecture Theatre in the Providence Conference

Centre on Tuesday, March 8 at 7 p.m. This event is free, but space is limited. Please email research@providencehealth.bc.ca or phone 604-806-9464 to register.

Providence Health Care Research Institute

PHCRI was established in October 2004 to organize research efforts and support researchers working at PHC in affiliation with UBC. PHCRI focuses on research that pursues real life health solutions for the patients and residents cared for at Providence Health Care and across the province of British Columbia. PHCRI has over 150 principal investigators and continues to grow.

If you would like to join the Research Institute's email distribution list to receive their monthly newsletter and research-related updates, please email research@providencehealth.bc.ca.

Story of a Metabolic Health Patient

My first day at St. Paul's Hospital's Metabolic Syndrome Clinic was the beginning of a journey that would ultimately save my life. On the first day, I was weighed and measured, and from that day on, I somehow found the courage to begin saving my life with the help of family, friends and program staff.

Before beginning at the Metabolic Clinic, I had tried every diet out there. I don't think this is unusual, nor was the fact that none of the diets had been all that successful. When I stepped on the scale on that first day at St. Paul's Hospital, I was relieved to finally be somewhere where people seemed to want to help me.

On that day, at 5'2", I weighed 285 pounds. I had out of control diabetes, metabolic syndrome, arthritis, sleep apnea, asthma, depression, hypothyroidism, irritable

bowel syndrome, and gall stones. I could hardly walk, and I was living a life that had very little quality. I was too heavy to have surgery to correct my sleep apnea, and I was considering having stomach stapling surgery. I needed help, or I wouldn't live much longer.

Looking back, as a formerly morbidly obese woman, I have thought a lot about why the diets did or didn't work for me, and why I was so obese. It would be nice if there was an easy answer, but then there would be an easy solution. Was I active enough? Absolutely not. Did I eat right? Nope. Were there genetic components? I think so. Was it psychological? You bet. Did I know all of this before I started the program? Yes, I did. I just wasn't very effective at doing anything about it.

So why did the program at the Metabolic Syndrome Clinic work? It

really attempted to deal with the problem in a holistic way – exercise, nutrition, medical issues, and psychologically. The staff at the Metabolic Clinic were very non-judgemental. When you are extremely obese you judge yourself every day. The last thing you need is anyone doing it for you.

The information that the program offered was solid and helpful, but I think the true merits of the program were the one-to-one and group support sessions, combined with medical treatments. Of course my doctor was right - the better I ate, the more I exercised and the healthier and slimmer I got, but I also needed the assurance that my medical needs weren't being brushed aside. All of the staff at the clinic were very clear that the aim was not so much to help me lose weight, but to learn to live a healthy lifestyle.

I lost 150 pounds in about a year. Sixteen months after I started the program I had surgery to get rid of a significant amount of skin. I went from a bulging size 28/30 to a size 6. It was an emotional journey filled with fear, doubt, and finally confidence and elation.

Since leaving the program, I have gained some weight back, but I

as well as I should and I struggle to find the time to exercise, I am still not back to pre-program behaviours.

I am grateful for the help and encouragement I received during my time at the Metabolic Clinic. It saved my life, and it gave me the tools to keep saving it day by day.

Thank you, name withheld.



am trying to be healthy. I haven't given up, and I will get back to where I want to be. My diabetes and metabolic syndrome markers are all still good, and while I am not eating

WE WANT TO HEAR FROM YOU

Send in your stories, ideas, photos, thank-yous and events (to a maximum of 200 words please) to share with staff across Providence Health Care.

Your submission may be edited for length.

You can mail material to:
Jennifer Laidlaw
Communications
4th floor, Hornby
Ph: 604-806-8350
or email:
d'vine@
providencehealth.bc.ca

Bruce McManus Receives Sarrazin Award

On Friday, February 11, the Canadian Physiological Society recognized the scientific and leadership contributions to cardiovascular biology and medicine of Dr. Bruce McManus, director of the James Hogg Research Centre and the PROOF Centre of Excellence, and co-director of the Institute for Heart + Lung Health, awarding him the

prestigious Sarrazin Award Lecture at their Annual Meeting in Saint-Adele, Quebec.

The Sarrazin Lectureship was initiated in 1976 by the Society in recognition of Doctor Michel Sarrazin, "the first Canadian Physiologist", a remarkable physiologist, physician, and botanist who was born in France but lived most of his

life, from 1659 to 1734, in the French colonies of what would evolve to be Canada. Among many distinctions, Doctor Sarrazin served as physician to the King of France. The first Sarrazin Lecturer was Dr. Harold Copp, who presented his lecture at the Winter Meeting of the Society in 1977.



Dr. Bruce McManus.