Our 2nd Annual “Lungevity Walk” took place on November 18, 2009 and we take pleasure in sharing some of our “Hall of Fame” with you.

Wendy Vigil, Colorado
10 min. 10 sec. Amazing after her recent “Hospital” experience!!

Virginia Sasser, Andalusia, Alabama
Increased her speed and distance by 62% for the Lungevity Walk. Wow!!

Antoinette Bolduc, Pennsylvania
30 minutes. Well done!!

Brian Vandurme, Greater Mossbank Area, Saskatchewan.
His goal was to beat 1.5 miles. Brian and trusty friend “Gizmo” managed an astounding 2.5 miles!!

Carolyn Hains, Alberta
2.5 miles. Way to go Carolyn!!

Congratulations to all who took part. See prize winners on Page 3.
**Another giant passes . . .**

**A Tribute by Mark Mangus**

It is with great sadness and a heavy heart that I convey the news of the passing of one of the last giants of pulmonary medicine and Respiratory Care. On Saturday, 12/12/2009, at 12:10 AM, Dr. Thomas L Petty departed this earth with his best friends, Louise Nett and Dr Jim Good holding his hand.

Dr Petty had "been suffering with chronic anaemia and pulmonary hypertension for a long time in addition to several other debilitating diseases. He had maintained a positive attitude despite all his problems for such a long time. He was actually nearing completion of a new book. He had lots of aches and pains due to a bad back and also polymyalgia rheumatica. He was suffering a lot and life had become a big struggle for him. Friday he took a turn for the worse and just did not have it in him to fight any longer. His lungs basically gave out and he went calmly and quietly into the next world knowing he was loved by many people", wrote Louise Nett in her message sent to a number of us who knew him and worked with him in his various endeavours.

Dr Petty spent his career creating milestones in pulmonary medicine from early work identifying and developing treatment approaches for ARDS. He spring-boarded off the work of the great Dr Alvin Barach to bring oxygen therapy to the patient outside the hospital for the support of advanced lung diseases, validating and standardizing it through the NOTT. This evolved into what we know today as Long Term Oxygen Therapy (LTOT). Dr. Petty was also a pioneer in both devising and developing practices in pulmonary rehabilitation, but also extensivly researched the intervention, documenting its benefit and economy while proving that patients with advanced COPD did NOT simply have to park themselves in a corner and wait for the grim reaper while sucking on a 'Bennett machine'.

Dr Petty's tireless efforts to push for continued advancement in oxygen therapy led us through the days of dragging H-cylinders of oxygen into folks' homes to provide their supply to the development and advancement of liquid systems and concentrators for the home with ever-improved portable oxygen capacity.

As an outcome of the 6th Oxygen Consensus Conference, Dr Petty challenged the medical device industry to devise a portable oxygen concentrator that would provide 5 liters, for 5 hours on a battery charge and weigh 5 pounds. Today, we have as many as 10 portable oxygen concentrators that, while they don't necessarily provide exactly 5 liters, are close. While they don't last 5 hours, without a couple of batteries, they can plug into A/C and D/C as well as 12-volt, for good portability and versatility of power source. Some are near the 5 pound weight, but those that perform the best are closer to 20 pounds and require a cart on which to transport them during times of mobility.

Dr Petty was a champion of good lung health, best treatment for those with chronic lung diseases, a mentor and proponent for Respiratory Care and an advocate for increased patient autonomy and activity in their own behalf with regard to chronic lung disease management. He was a loud and supportive voice along with many of us who push for patient ownership and use of oximetry to ensure appropriate and adequate self-treatment with oxygen.

Dr Petty's latest and now last project was a collaborative effort to produce a second edition to his book: "Adventures of an Oxyphile." I am honored to be one of the invited contributors in that effort which will go on to be published in a few months and entitled: "Further Adventures of an Oxyphile"

In his 'spare time', Dr Petty loved the outdoors and was an avid fisherman, living and playing in the Denver area the vast majority of his life. He was truly an inspiration to/for many of us who had the good fortune to know him. We will miss him very much, though we know he is now enjoying a well-deserved, hard-earned and peaceful rest. Dr Petty would have been 77 years old on Christmas Eve.

Mark W. Mangus, Sr., BSRC, RRT, RPFT, FAARC
Pulmonary Rehabilitation Coordinator
Christus Santa Rosa, Medical Center
San Antonio, TX
Lungevity Walk Winners Congratulations!!

1st Pl – Top Walker, Best Performance – C. Hains
1st Pl – Walker – Highest $ Amt of Pledges – B. Quesnel
1st Pl – Non Corp Sponsor – Higest Single Amt Pledged – R. Keenan
1st Pl – 1st Walker to get Pledge Forms In – V. Sasser
2nd Place – Top 2nd Walker with Highest $ Amt of Pledges – G. Scott
2nd Place – 2nd Best Walker Overall Peformance – W. Vigil
2nd Pl - Non COPD Patient/Walker – J. Elkow

3rd Place – Overall :
J. Hutchinson  C Weadon  C. Johnson  T. Cushing  S. Fulton  V. Corgichek  R. Peterson
The Fyfe’s  K. Worsley  A. Scott  The Kelly’s  H. Reese

Many, Many Thanks To our Prize Donors
**Member Discounts**  
www.copdcanada.ca

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**GREAT Product & Prices!!**  
and  
a 10% Discount!!!

For COPD Canada Patient Network Members

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Finger Pulse Oximeters  
(FDA & Health Canada Approved)

See Special Page at  
http://www.fact-canada.com/Sportstat/COPD-pulse-oximeters.html

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Medonyx “gelfast” Hand Disinfectant offers a substantial discount to our members.

http://www.medonyx.com/cprod023.html

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Jameson Medical, Inc.  
Special pricing for COPD Canada Patient Network Members  
Oxygen Concentrators, Summitt Stairlift, Quick Test Liter Meters ..

http://www.jamesonmedical.com/COPD-CA.htm

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10% OFF  
OxyView Frames

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Rose’s Home Medical Specialties  
Rose’s offers our members a minimum of 10% OFF such items as Accapella Vibratory PEP therapy system.  
Check her store via http://tinyurl.com/krtp49  
and then contact her direct atrosem@rmosmedspec.com

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A Very Big Thank You To

For Their Generous Donation

This will be of great assistance to us with the reproduction of an Exercise DVD, which we hope to have available in the New Year.

For those folks who do not have access to Pulmonary Rehab programs we believe this will be a big help in improving the quality of life.
**Chronic Disease “Self-Management”**

In our first article we will provide an overview of “Self-Management” and what it involves, then follow in our next issue with, hopefully, some good constructive advice on developing the skills needed to cope with our challenges.

Nobody wants to have a chronic long-term illness. Unfortunately many of us will have two or more of these conditions during our lives. These articles are intended to help people with chronic disease learn a healthier way to live with it. Now this may sound like a strange concept but we can dramatically improve the quality of our lives if we learn to manage the disease instead of allowing it/them to manage us.

All chronic diseases, be they heart disease, diabetes, COPD, liver disease or any one of a host of others, cause most people to lose physical conditioning and experience fatigue. In addition, this may cause emotional distress such as frustration, anger, depression or helplessness. Health is soundness of body and mind, and a healthier life is one that seeks to achieve the best balance of both that one is capable of.

In the following articles we hope you will find helpful tips and ideas to make your life easier. We have researched advice from physicians, other health professionals, and, most importantly people like you who have learned to positively manage their illness. Please note the “positively” manage. There is no way you can avoid managing a chronic condition. If you do nothing but suffer, this is a management style. If you only take medications, this is another management style. If you choose to be a positive self-manager and take all the best treatments available to you along with being proactive in your day-to-day management. This will lead you to a healthier life.

The first responsibility for any chronic disease self-manager is to understand your disease. This means more than learning about what causes the disease and what you can do. It also means observing how the disease and its treatment affect you. Disease is different for each person and what works for one may not be right for you. You need to observe and make accurate reports to your health care provider so they can help you make the right choices.

It is helpful to understand the natural rhythms of your illness. In general symptoms should be checked out with your doctor if they are unusual, severe, persistent, or occur after starting a new medication. You know your body best and you need to listen to it.

What you do about something is largely determined by how you think about it. For example, if you think that having a chronic illness is like falling into a deep pit, you may have a hard time motivating yourself to crawl out, or you may even think the task is impossible. The thoughts you have can greatly determine what happens to you and how you handle your health problems.

Some of the most successful self-managers are people who think of their illness as a path. This path, like any path, goes up and down. Sometimes it is flat and smooth. At other times the way is rough. To negotiate this path one has to use many strategies. Sometimes you can go fast, other times you must slow down. There are obstacles to negotiate.

Successful managers are people who have learned skills to negotiate this path. These skills fall into three main categories:

* **Skills needed to continue your normal life**

Just because you have a chronic illness does not mean that life does not go on. There are still chores to do, friendships to maintain, jobs to perform, and a multitude of family relationships that continue. Things that you once took for granted can become much more complicated in the face of chronic illness. You may need to learn new skills in order to maintain your daily activities and to enjoy life.

* **Skills needed to deal with emotions**

When you are diagnosed with a chronic illness, your future changes, and with this comes changes in plans and changes in emotions. Many of these emotions are negative. They may include anger: “Why me? It’s not fair; depression: “I can’t do anything anymore, what’s the use”; frustration: “No matter what I do it doesn’t make any difference. I can’t do what I want to do”; or isolation: “No one understands, no one wants to do what I want to do”; or isolation: “No one understands, no one wants to be around someone who is sick.” Negotiating the path of chronic illness, then, also means learning skills to work with these negative emotions.

* **Skills needed to deal with illness**

Any illness requires that you do new things. They may include taking medicine, using an inhaler, or using oxygen. It means more frequent interactions with your doctor and health care system. Sometimes there are new exercises or a new diet. All of these constitute the work you must do to just manage your illness.

In our next edition we will be focusing on developing the skills needed to “self manage” our disease.
**Seasonal Hints**

You don’t have to succumb to illness and poor health during the cold winter months. By taking a few proactive measures, you and your family can help reduce the instances of illness while staying in shape.

An ounce of prevention is worth a pound of cure. The first step is to take a proactive stance against illness — you’ll want to keep your body strong and healthy during the winter months when more viruses tend to circulate. To avoid catching the cold and flu, try the following basic steps:

* get plenty of rest
* eat a healthy, balanced diet full of fresh fruits and vegetables, lean meats, whole grains and low-fat dairy products. You can check out Canada’s Food Guide online for more information
* get in at least three 45-minute exercise sessions a week
* dress properly and protect your body from the bad weather

There are also easy steps you can take to help prevent catching — and the spread of — the winter bugs. Be sure to:

* get the flu shot
* wash your hands often using very warm water and antibacterial soap
* cover your mouth when you cough, cough into your sleeve or a tissue
* keep your homes surfaces clean and wiped
* use soap and water to clean your children’s toys
* reduce your stress levels
* avoid smoking — it weakens your immune system

*if you do get sick, stay home and rest until you are well again; going to work or school will only spread the cold and flu to others.

With freezing-cold temperatures and tons of snow on the ground, getting outside and exercising may seem like an extremely unpleasant task, but it doesn’t have to be! There are many fun and social indoor and outdoor activities you and your family can take part in to stay fit and healthy — and cold and flu free — during the winter months. Your fitness level doesn’t matter — anyone can participate in some activities! Know your limitations but keep moving! Get fresh air and exercise in the process.

**Healthy Eating - Um maybe Not!!**

Tis The Season Folks. Indulge..Mmm

Okay this is one of my favourites. My daughter-in-law makes this for me and I love it!!

**SOUR CREAM COFFEE CAKE**

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Butter or hard margarine</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Granulated sugar</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>Large egg</td>
<td>1</td>
</tr>
<tr>
<td>Vanilla</td>
<td>1/2 tsp</td>
</tr>
<tr>
<td>Low fat sour cream</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>All-purpose flour</td>
<td>1 cup</td>
</tr>
<tr>
<td>Baking Powder</td>
<td>1/2 tsp</td>
</tr>
<tr>
<td>Baking soda</td>
<td>1/2 tsp</td>
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<tr>
<td>Salt</td>
<td>1/8 tsp</td>
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</table>

**Filling and Topping**

Add 1/2 cup batter in greased 8x4x3 inch glass pan.

**Sauce**

<table>
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<th>Ingredient</th>
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<tr>
<td>Brown sugar packed</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>All-purpose flour</td>
<td>1 tbsp</td>
</tr>
<tr>
<td>Salt</td>
<td>1/8 tsp</td>
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<tr>
<td>Water</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>Vanilla</td>
<td>1/4 tsp</td>
</tr>
<tr>
<td>Butter or hard margarine</td>
<td>1 tsp</td>
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Mix sugar, cinnamon and nuts in a small bowl. Sprinkle 1/2 over batter in pan. Cover with second 1/2 of batter by putting dabs here and there over topping. Spread as best you can. Cover with second 1/2 of topping.

Bake in 350 F oven for about 30 minutes until inserted wooden toothpick comes out clean.

Cut Coffee Cake in squares, pour a little sauce on top and enjoy!!
Laughter the Best Medicine!!

If you think you’re leaving me in the kennel think again!!

1 package of permanent magic markers $4.79
Babysitter 4 hours $20.00
Babysitter’s Phone Bill $31.09
The results of leaving unsupervised kids while talking on the phone while you are babysitting PRICELESS!

Lord, Bless My Online Friends Amen!
I can’t believe another year has gone by and so quickly!! I wish you all a wonderful holiday season and hope all will stay well. Make sure friends and family give you the best gift of all by staying away if they are sick!

As always I encourage you to submit your ideas, suggestions or requests for upcoming additions. Your input is always greatly appreciated.

This is YOUR newsletter.

email all suggestions or comments to: gwen@copdcanada.ca

Sincerely,

Gwen
What Is COPD? (also known as COLD or CORD)

Chronic - means it's on-going; doesn't go away

Obstructive - means it's partially blocked

Pulmonary - it's in the lungs

Disease - An illness

COPD is a progressive lung disease that affects more than 750,000 "diagnosed" Canadians.

What's It's Comprised Of? Usually Chronic Bronchitis and/or Emphysema. Many COPD sufferers may also have an asthma component.

Chronic Bronchitis affects the lining inside your bronchial tubes. They get irritated and fill with mucus resulting in a wet cough. The mucus plugs or blocks the tubes making it harder for you to breathe. With emphysema the tiny hair like air sacs called "alveoli" get irritated and stiff making it hard to transfer oxygen and carbon dioxide. The end result is shortness of breath.

What Does It Do? It blocks and narrows the airways and inflames the lungs causing obstruction.

What Are the Symptoms or Characteristics? The common characteristics of COPD are trouble breathing (shortness of breath aka SOB) and/or a cough lasting 3 or more months. You may have noticed you have to stop and catch your breath more, or perhaps you don't exercise as much because you've always thought you were "out of shape". Perhaps you are, or you were, a smoker and you have developed what many refer to as a "smoker's cough".

Note: You may have COPD even if you don't cough. You may still develop COPD even if you quit smoking some time (years) before.

How Did I Get It? It's believed that 80-90% of the cases of COPD is caused from smoking. New evidence is also showing that pollution from certain occupations, air pollution in general, certain childhood illnesses and genes may have contributed to the development of this disease. Then there's Alpha 1 Deficiency; a gene deficiency which causes emphysema even if you've never smoked or been around second hand smoke.

(Notes: New studies are being undertaken done to try and understand why not all smokers will develop this disease. Also; Alpha 1 can be identified with a blood test.)

Will It Ever Go Away or Get Better? No; it will never go away; once you have it there's no turning back the clock. The damage cannot be undone. No; it will not "get better" but the symptoms can be managed and slowed with the right medicines and lifestyle changes.

The above is a simple overview. The current "technical" definition, according to the 2006 Global Strategy for the Diagnosis, Management, (GOLD) and Prevention of Chronic Obstructive Pulmonary Disease is: "Chronic Obstructive Pulmonary Disease (COPD) is a preventable and treatable disease with some significant extrapulmonary effects that may contribute to the severity in individual patients. Its pulmonary component is characterized by airflow limitation that is not fully reversible. The airflow limitation is usually progressive and associated with an abnormal inflammatory response of the lung to noxious particles or gases."

Together we CAN !!!!C are, A dvocate, N etwork

Remember: YOU ARE NOT ALONE!
COPD Canada Patient Network Membership Form

Please fill in and mail to:

COPD Canada Patient Network
Attn: Dave Raymer
3047 Old Sambro Rd
Williamswood, NS B3V 1E6 Canada

E Mail Contact@copdcanada.ca or Membership@copdcanada.ca Ph: 902-477-1507

WebSite www.copdcanada.ca

There's no Dues or Fees. Membership is FREE.
Currently, and as time progresses, we make/ have certain things available to Members. This may be in the form of educational/information CD's (DVD's), booklets, brochures, discounts and or coupons, newsletters and more.

**Current Discounts For Members:** 10% OFF Oxyview Glasses, a Substantial Discount from gelFast (hand hygiene), Finger Pulse Oximeters, flow meters, acapellas and more! (for additional discounts and info please see our website at (www.copdcanada.ca)

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<td>Full Mailing Address:</td>
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<tr>
<td>Are You a (Please Circle One)</td>
<td>How did you Hear about COPD Canada Patient Network? (Please circle)</td>
</tr>
<tr>
<td>Patient, Caregiver, Family Member/Friend, Medical/Professional, Other (if other please specify)</td>
<td>Internet Search, Family/Friend, Pamphlet, Newsletter, Referral Other (If other or by referral, please specify)</td>
</tr>
<tr>
<td>Do You have any Comments or Suggestions?</td>
<td>As a member of the Network it is expected that if we undertake a mail campaign to legislators or other governing bodies of importance to COPDers, that you will participate in this when the request to members goes out. Usually the Maximum is twice a year. Do you agree with this? YES NO (Please circle one)</td>
</tr>
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*Please Note: All information gathered/received will be held in the strictest of confidence and WILL NOT be shared with anyone at any time (with the exception of your name (only) in the event a supplier wants to verify your membership). Your personal information will NEVER be shared or compromised.*

Once we receive your application, a welcoming note will be e mailed to you with additional information along with your Membership Number, the most recent Monthly “AIRmail” and Newsletter.

*Together We CAN !!! Care, Advocate, Network*