



**The Heart of the Shriners Hospital
Beats to the Child's Rhythm**

The Orthopedik

Volume 2, Number 2

Summer 2007

At 1529 Cedar Avenue, in Montreal, miracles happen every day. Whether it is giving hope to a young boy from a remote town in Belarus, Shriners from across the country banding together to help children in need, or our researchers making yet another breakthrough in the fight against osteogenesis imperfecta, wonderful things happen here!

Our successes stem from the extraordinary dedication of the Shriners and

the hospital staff. As a team we continually strive to find ways to offer the best possible treatment and care to our children and youth, and their families. Vital to our achievements are the communities which support and trust our expertise in delivering state of the art orthopedic care.

In this issue of *The Orthopedik*, you will have the opportunity to witness the results of cooperative efforts in everyday life at the Shriners Hospital. Working together with

Board members, Shriners from around North America and their Ladies' groups, such as Daughters of the Nile and LOSNA, is essential in supporting the work that the hospital staff, research and medical personnel do to make extraordinary things happen. Together we strive towards excellence with one goal in mind: the health and well-being of children and youth.

Sharon Brissette
Interim Administrator

Research at Shriners Hospital – Canada has a Worldwide Impact

Frank Rauch

Osteogenesis imperfecta (OI) is a heritable bone disease that affects 1 in 10,000 children around the world. It is usually caused by mutations in one of the two collagen type I genes. Collagen type I is the most abundant protein in the body and is present in a wide variety of tissues, such as bone, tendon, skin and teeth. Traditionally, four different types of OI have been distinguished on the basis of clinical appearance and disease severity. However, over the past 10 years, studies at the Shriners Hospital in Montreal have shown that a number of OI patients do not fit into one of these four types. This was the starting point for our description of the "new" OI types, which we called OI types V, VI, and VII.

In 2002, we published the description of OI type VII, which for the time being is the latest of these new OI types. OI type VII patients have fragile bones, but do not have blue sclera or tooth abnormalities as many other OI patients do. The distinctive feature of OI type VII is that patients have a short humerus and femur. We discovered this disorder in a large family in northern Quebec, where several children and adults were affected. None of these patients had a collagen mutation and therefore the cause of the disease was unclear. We could exclude that any of the genes with a known link to

bone diseases was involved in OI type VII, but still did not know where exactly the problem was.

In the meantime, researchers in Houston, Texas, had examined a mouse where a gene called CRTAP was destroyed. It turned out

It's a fact: Shriners Hospital - Canada researchers are responsible for many of the advancements in the classification, diagnosis and care of children with OI. Apart from the distinction of OI types V, VI and VII, the quality of life for children with severe OI has been improved remarkably through the introduction and administration of cyclical intravenous pamidronate, in conjunction with multi-disciplinary care. In addition to pamidronate, studies of other bisphosphonates, including oral agents, are ongoing with the aim to provide a variety of treatment options for patients with OI of differing severities.

that this mouse had brittle bones as well as a short humerus and femur, just as our patients with OI type VII. This observation made it quite likely that the same gene was affected in the patients and in the mouse. Indeed, when we sent samples from our OI type VII patients to the Houston laboratory, it was found that all patients had the same mutation

in the CRTAP gene. This discovery makes it possible to offer genetic testing to family members of OI type VII and inform them whether they have a risk of transmitting the disease to the next generation. The same test can also be used to establish the diagnosis in newborn infants even before any symptoms arise.

Even though we detected OI type VII in a single Quebec family at first, CRTAP mutations have now also been found in severely affected children with OI living in Europe, Africa and Asia. It is easy to forget it in everyday life, but this example shows how the work that we are doing here can affect the lives of people worldwide.

In this Issue...



- Our Outreach Clinics
- Helping Kids from Near and Far
- Jean Béliveau Scores for the Shriners

It is with great pleasure and enthusiasm that the Genetics Unit of the Shriners Hospital for Children - Canada welcomes its newest recruit, **Dr. Pierre Moffatt**.

Dr. Moffatt obtained his Ph.D. in pharmacology at *Université de Montréal*, and furthered his training with post-doctoral studies in Quebec City and Montreal. Upon completion of his training, Dr. Moffatt joined young biotechnology firm where he played a key role in developing a technology that allows to identify and isolate the proteins secreted by a given cell type. The technology was patented and successfully licensed to other pharmaceutical companies. Dr. Moffatt used the technology himself to examine



the secreted proteins (the 'secretome') of mineralized tissues, teeth and bone. After a successful stint at the Faculty of Dentistry of *Université de Montréal* where he further studied the newly identified

secreted proteins from the tooth, he joins us to characterize novel proteins secreted by the bone-forming cell, the osteoblast. Since his recent arrival, he and his team have already obtained the phenomenal evidence that one of the proteins that he is studying is involved in the control of mineralization by bone cells. Secreted proteins represent extraordinary targets for pharmacological intervention as they are accessible from outside the cell. For children treated in Shriners Hospital, medication that could increase osteoblast activity would be advantageous for use in the treatment of anti-inflammatory induced osteoporosis, distraction osteogenesis (Ilizarov technique), fracture repair or following orthopaedic surgery.

Preparing the Next Generation...

Emmanuelle Rondeau

Under the presidency of Dr. François Fassier, the Sainte-Justine Pediatric Orthopedic Review Course (SPORC) celebrated its 20th anniversary this year. This course was launched by the CHU Sainte-Justine in 1988 at the request of Dr. John Fowles, who was then director of the *Programme d'orthopédie Edouard Samson* at *Université de Montréal*. The Shriners and The Montreal Children's Hospital began working together in 1994. "Over the years, the course has grown and is now recognized as the preparation course in orthopedics for Canadian residents and those from the north-eastern United States," says Dr. Fassier. The teaching body now includes members of the faculties of medicine of *Université de Montréal* and McGill University and eminent guest lecturers, including this year, Dr. John Fowles and Dr. Peter Armstrong.

Since the beginning, the objective of the course has been to pass on advanced knowledge about traumatology and pediatric orthopedic surgery to prepare students for their exams. Workshops provide students with the opportunity to perfect some of their surgical techniques. A symposium and group meetings allow them to discuss controversial subjects and complex cases.

"Being an academic pediatric orthopedic surgeon, my commitment has always been to training the young surgeons coming up. This course is a perfect example of an initiative that provides intensive training for pediatric orthopedists. It is good to have an opportunity to learn from the best orthopedist surgeons and the hope is to influence some of these young orthopedic surgeons to choose pediatric orthopedics as a career," says Peter F. Armstrong, Chief Medical Officer, Shriners Hospital for Children.

The next generation of doctors is taking its place, and in 2008, Dr. Thierry Benaroch will continue the work as president of the organizing committee, with the support of Dr. Marie-Andrée Cantin, Dr. Chantal Janelle and Dr. Stephan Parent.

"This course makes it possible to review the basics, but with a strong emphasis on the art of medicine. A pediatric orthopedist has three patients instead of just one: the child and the parents," says the course founder, Dr. John Fowles.

The Orthopedik

is a quarterly publication of the
Shriners Hospital for Children - Canada

1529 Cedar Avenue, Montreal, QC, Canada, H3G 1A6

Editor

Guylaine Ouellet

Co-Editor

Emmanuelle Rondeau

Art Direction and Design

Mark Lepik

Photography

Denis Alves

Guylaine Bédard

Editorial Board

Sharon Brissette

Rose-Marie Chiasson

Dr. François Fassier

Donna Fitz-Gerald

Kathryn Fournier

Nancy Gionet

Dr. Francis Glorieux

Kathleen Montpetit

Susan Takahashi

We want to hear from you! If you would like to ask us a question or suggest a topic for an article in an upcoming edition of the *Orthopedik*, please contact us at gfoellet@shrinersnet.org or (514) 282-6990.

The Shriners Hospital in Montreal offers orthopedic services to children from across Canada and the northeastern U.S. (the states of New York, Vermont and New Hampshire). In fact, more than 40% of our patients come from outside the Montreal area, and as a result, the hospital began to look for innovative ways to serve its vast territory. The solutions found were outreach clinics and telemedicine.

What is an outreach clinic?

It is a clinic held by a medical team (a pediatric orthopedic surgeon and a nurse) at a location outside the hospital. These clinics are coordinated in Montreal in cooperation with the outreach site's medical community and Shrine Centre.

A lot of work happens behind the scenes of an outreach clinic. A Shriners Hospital nurse, Nathalie Thauvette, makes sure that each child is able to attend the clinic, works with the local Shriners and the physician who will attend the clinic, and ensures that

x-rays and other tests are completed prior to the clinic so that everything is on hand for the doctor's visit.

The Shriners are essential to the efficient functioning of these clinics. Their roles are many, as they greet the families, explain the clinic process, help with the paperwork and may be involved in transporting the families to their appointment.

What happens after a clinic?

Once examined in our outreach clinic, the patients are referred back to the Shriners Hospital in Montreal only if medically necessary. Otherwise, they are scheduled for an appointment during the next outreach clinic or with a local health care provider. Reasons for a trip to Montreal may include surgery or a specialty clinic visit with a physician who is an expert in the child's condition.

What are the outcomes of outreach clinics?

There are many advantages to holding outreach clinics. For example, children

with orthopedic conditions can now receive care in areas where this expertise does not exist; we are now able to see more children; the care provided by the Shriners doctors can be used to complement local medical care; and local Shriners can save on the cost of transporting children and their parents to Montreal by plane. Shrine Centres that host outreach clinics have noted transportation savings of \$10,000 to \$30,000 per clinic and now use this money to support the Shriners Hospital and other children in need of assistance. The most important benefit, however, is that children can receive care closer to home. For many families, a trip to Montreal requires juggling home responsibilities, and work and school absences. Families have reported high satisfaction with the clinics. As well, clinics bring the Hospital to the local Shriners, allowing them to see first hand how valuable their work is and the impact they have on the lives of children and their families.

In 1996, the Shriners Hospital in Montreal conducted its first outreach clinic in Sudbury, Ontario. In addition, there are now regular clinics in Gander (Newfoundland), Bathurst (New Brunswick), and Halifax (Nova Scotia). There are 20 to 75 children seen at each clinic by Chief of Staff, Dr. François Fassier or Assistant Chief of Staff, Dr. Reggie Hamdy. New outreach sites are being explored.

Nurses (top row): Donna Fitz-Gerald, Nathalie Thauvette, Guylaine Courchesne, Judy Costello, Claudette Bilodeau, Sarah Mondoux, Hélène Gauthier, Mario Rinaldi. Seated: Dr. François Fassier and Dr. Reggie Hamdy.



New on the Web

The Shriners Hospital for Children in Montreal is now present on the World Wide Web in English and in French. Up to date news and photos of events that occur at the Montreal Hospital will be posted on a regular basis allowing us to acknowledge donations and special visitors.

Now on-line, read this feature story:

Third and Fourth graders from Courtland Park School in St-Bruno, Québec, came to the Shriners Hospital for



Sharon Brissette accepts the donation and good wishes of the Courtland Park School students.

a very special annual visit on April 26. They had prepared a selection of three songs dedicated to our heroes: the patients, their families and the staff who care for them. The group of 60 students was very proud to present a donation to Sharon Brissette, Interim Administrator. Among the group, 10 year-old Camille was a former Shriners patient who shared her story and her vision of charity. More on Camille and this story at www.shrinershq.org/Hospitals/Canada

My Story, Growing Up with the Shriners

Isabelle Giard, Montreal

I was born with spina-bifida on September 18, 1986. My family was referred to the Shriners Hospital when I was 6 months old. Ever since, the Hospital and the special people here have become our source of support and hope; they have helped us cope with illness and move beyond it.



I am sharing my story as a tribute to all the incredible people who have helped me along the way from childhood to adulthood.

In my lifetime, I have had more than 15 surgeries. I underwent major hip surgery at the age of 4 and was fitted with a special body cast. At the age of 10, when I could no longer walk with the help of crutches, I learned how to use a wheelchair. The next year I underwent a spine fusion. In 2000, I had my first Botox injection to help control my bladder. Yet, these medical milestones are only part of my story. They show the expert care offered at the Shriners - but here, care goes beyond expertise; it has more to do with giving each child wings to fly.

Making the impossible...possible

For example, the difficult process of integration into the regular school system was facilitated by the team at the Shriners. With their support my family and I worked hard to meet these challenges with humor and perseverance.

I believe in being active and living life to the fullest. I was always pushed to my limits at the Shriners, and my parents always taught me that where there is a will, there is a way. I found freedom in skiing and cycling.



Making a bright future possible

Today, I am in college. It may take me longer to study or to get through my personal care activities, but I always accomplish what I set out to do. I have the full support of my family, especially my mother who is my hero and warrior, and the team at the Shriners.

A physically challenged adult must learn to function in a very demanding world. Any difference is not easily tolerated. It is a challenge I will meet head on because I have been well prepared. It is now time for me to say good-bye to the Shriners as I am currently in transition to the adult system for support care. I will dearly miss the Shriners, but thanks to the care here, I am ready to leave the nest in order to lead an autonomous and productive adult life.

Thank you for giving me wings to fly my way!

Hope of A New

It was revealed to us in August 2006, that our eldest, Shae, had a cyst within her spinal cord at the junction of her neck and the base of her skull. The cyst was caused by her spine protruding into her cranial cavity. If it had not been detected the results would have been catastrophic.

Shae was diagnosed with type 5 Osteogenesis Imperfecta (OI) at 8 months of age, she is now 11. Shae became one of the youngest recipients to receive Dr. Francis Glorieux's treatment for brittle bone disease. At the Shriners, Dr. Glorieux's team and Dr. François Fassier gave us hope of a better quality of life than we could ever have dreamed for Shae.

The new challenge for Shae is called a Basilar Impression with a Syrinx which was originally diagnosed by our local doctors here in Saskatoon and with their cooperation we were referred to Dr. Jean-Pierre Farmer, a neurosurgeon at The Montreal Children's Hospital. When we met him, he gave us a sense of security with



Shae with Dr. Jean Ouellet while in traction.

his calming demeanor and he explained the complexity of the procedure. After conferring with the unflappable Dr. Jean Ouellet, the orthopaedic surgeon whose resources and talent would be challenged as no precedent existed; the team formed a game plan. The hope was to disengage her skull from her spine via "halo traction", in essence to pull her head away from her spine; an extremely delicate process because of the OI. After a month in traction Dr. Ouellet announced we were ready.

Shriners Hospital Beats to the Child's Rhythm

Day for Shae

Lorna & Gerry Bezaire, Saskatoon

Leaving our "family" at the Shriners Hospital, we were transported to The Montreal Children's Hospital for the 11 hour operation.

Dr. Farmer inserted a shunt in the base of the Syrinx to drain into the spinal column. Then, Dr. Ouellet used bone from Shae's hip, the bone bank, synthetic putty, titanium rods and screws to rebuild Shae. First, Dr. Farmer appeared in his surgery greens to inform us that his portion of the procedure was complete and a success. Hours later, Dr. Ouellet emerged with his infectious positive energy. Things couldn't have gone much better! We hope and pray the lengthy recovery goes as well. Three days later, Shae was fitted for a Minerva Brace; a light weight body cast which she will wear for six months.



Shae shows off her pretty body brace with her mom Lorna Bezaire.

Shae was a champion throughout the ordeal. With loved ones 2000 miles away, our friends at the Shriners and then The Children's made it somewhat bearable. Enough cannot be said about the little ways the staffs gave us a sense purpose and hope.

Our heartfelt thanks goes to the courageous Drs. Ouellet and Farmer and their teams for giving us the hope of a new day.

A Life Worth Living - Sasha's Story

Ira Makarevich, interpreter, Belarus

Twelve year-old Sasha Krasakou has brittle bone disease. He was born in Belarus where he lives with his parents Lena and Pyotr in a small community heavily affected by the Chernobyl disaster.

Following surgery in Belarus in 1998, doctors told his mom that the only hope for Sasha was care outside the country. For a family barely managing to survive, traveling and leaving the country for advanced medical care was unimaginable. Yet, they did not give up hope.

The miracle of Sasha coming to Canada in January 2007 was made possible thanks to the Brockville Shrine Club in partnership with Canadian Aid for Chernobyl and Belarusian Ministry of Health. "Hope for the future" - a Belarusian partner of the Canadian Aid for Chernobyl and the Canadian Ministry of Foreign Affairs strongly supported this initiative.

When he arrived at the Shriners Hospital for his first consultation, Sasha was very tense and frightened as he was used to the unfriendly atmosphere back home. He was so surprised to see friendly doctors.

At the occupational therapy department he shared his daily routine with Kathleen Montpetit. She suggested a customized wheelchair which was produced and adjusted at the McKay Center. He had so much fun speeding along the corridors; we could hardly keep up with him!

He also truly enjoyed the pulmonary function tests - all those new devices were very challenging. However, sadly results showed that Sasha was too weak and that his small rib cage and lungs couldn't handle the anesthesia.

When Sasha got the chance to meet Dr. Francis Glorieux he was overwhelmed with emotion - he couldn't believe that he was meeting the whole team! The day of admission brought lots of positive emotions - as did all the other days at the Hospital - mixing with staff and kids in the playroom gave Sasha hope and a new outlook on life. Sasha relaxed and watched



In order to get stronger, Sasha also got a device to improve lung capacity from the physiotherapist which he unwrapped and started using at once!

movies while receiving his treatment. Everything from temperature checks to having his meal on the funny bed table amazed him!

One day, Dr. Glorieux reported that Sasha had reacted well to the treatment and prescribed it every 4 months at home as



Sasha proudly poses with Dr. Francis Glorieux.

well as calcium and vitamin D to improve his bone density before Sasha returns to the Shriners Hospital in a year for further evaluation.

When we were on the plane home, sitting comfortably in his new wheelchair and smiling, Sasha looked into my eyes and asked: "Isn't it amazing, Ira, how all of those people made my life worth living?" There are no words that can express his gratitude more than that.

On May 18, Shriners from many of the 17 Centres that are actively involved with the Shriners Hospital for Children - Canada (12 across Canada and 5 from the North Eastern United States) met in Montreal for the Canadian Seminar. This annual event is a unique opportunity for the Shriners to get first hand knowledge of the expertise, technology and research that allows the Hospital to offer world class care to young patients.

Shriners became medical students for a day. They had the opportunity to hear speakers from a variety of Hospital sectors

including news on research in osteogenesis imperfecta and robotic surgery as well as the telemedicine and outreach programs that help patients beyond Hospital walls. Participants even had the rare opportunity to see and touch some of the specialized surgical equipment used in complex surgeries to help children with orthopedic problems. But the day is not all about technology either, it is about sharing and celebrating the special Shriners philosophy of healing centered on the child and family. To that end, participants also heard a conference on the impact of illness on the child and family. And, as usual, the

highlight of the day came when life long patient Isabelle Giard addressed the group and talked about how she grew up with the Shriners and now leads an active life despite her spina bifida.

The value of learning about the Hospital

After the seminar, Shriners return to their Centres with a wealth of information and personal knowledge and experience of the Shriners Hospital in Montreal. "The seminar allows us to become even better ambassadors for the Hospital in our awareness-raising and fund-raising campaigns because we have met the people who do the work. We have had the privilege of spending time with some of the children we help. After the seminar, we have real life stories to tell and all the facts we need to support them", explains Gary D. D. Morrison, Chairman of the Board of Governors.



Making Road Safety a Priority

Promoting safety for the volunteer drivers and families

Every year, the Social Services department organizes a Transportation Safety Review course. On May 25th 2007, topics discussed with the volunteer Shriners were: family issues and confidentiality, car seat safety, taking care of your back, nursing considerations while driving patients, and procedures and standards for driving. The objective of the course is to make the transportation program as safe as possible for the drivers and young patients. The Shriners were provided with a testimonial from a family which described the implications of comprehensive care and holistic team approach. The patient and his mother were invited to speak about their experience and gave a touching testimonial of their gratitude.

The transportation program offers a vital service

Since 1992, the Social Services Department in collaboration with Karnak Shriners (Montreal) developed a transportation program for patients and their families in order to cap the soaring costs of taxi fares for Shrine Centres.

The Karnak Shrine Centre, together with other Shrine Centres such as Tunis

(Ottawa), Luxor (New Brunswick), Mazol (Newfoundland) and Mount Sinai (Montpelier, Vermont) decided to purchase a van for this purpose. The Karnak Greeters Unit meets patients and their families at the airport. Once at the hotel, the Shriner volunteer driver uses the van to transport them to the Hospital and

various appointments around the city. The Transportation Coordinator of the Social Services Department facilitates this shuttle service. Using their own vehicles, another group of Shriners transports families from their residence to the Hospital when they cannot easily access public transportation.



With the help of volunteer transport Shiner Chico Bourgeois, Krystal Brown helps her son Chase into the Shriners van. They are being driven from the Hospital to the airport for their flight home to Nova Scotia.

Donors in Action

He Always Says "Yes" When it's for the Kids

Emmanuelle Rondeau



During a ceremony at the Bell Centre on May 17, Gary D.D. Morrison, Chairman of the Board of Governors, and Guylaine Ouellet, Public Relations Manager, accepted the generous donation of \$150,000 presented by Mr. Béliveau on behalf of the Montreal Canadiens Children's Foundation. The funds will go toward medical imaging. Plans include buying another ultrasound machine.

Jean Béliveau. A great man, a hero for generations of Quebecers, an extraordinary hockey player. Beyond his talent, Jean Béliveau is recognized as a kind-hearted man who is committed to his community, particularly when it comes to sick children.

On March 29, 2007, the Montreal Canadiens Children's Foundation celebrated the career and community work of Jean Béliveau. Like a hockey game, this gala at the Bell Centre was divided into three periods. Spectators looked back at Jean Béliveau's beginnings with the Victoriaville Tigres, the Quebec Citadelles and the Quebec Aces and his moments of glory with the Canadiens. The elegant evening raised \$1 million that was donated in Jean Béliveau's name to organizations that work with sick children. These include the Shriners Hospital for Children, the Sainte-Justine Hospital Foundation, The Montreal Children's Hospital Foundation, the pediatric departments of CHUS and CHUL and the Quebec Society for Disabled Children.

Ladies Groups Have Fund-Raising Success

Emmanuelle Rondeau



Under the leadership of Supreme Queen Alyce S. Thomas, the Supreme Temple Daughters of the Nile granted one of their largest donations to date to the Shriners Hospital Canada. A cheque for

the amount of \$143,000 was sent to the hospital in March. Mrs. Thomas visited the Shriners Hospital last summer. A visit from the new Supreme Queen is scheduled for October.

Who are the DON?

Daughters of the Nile is a benevolent international fraternal organization for women who are related by birth or marriage to a Shriner / Master Mason / Daughter of the Nile. Founded in 1913, Daughters of the Nile now counts 42,000

members in 149 Temples throughout the United States and Canada. Each year, they contribute funding for the Shriners Hospitals through the Supreme Temple's Convalescent Relief Fund and Convalescent Endowment Fund. In addition, many temples provide toys and quilts, parties for the children and log many volunteer hours in the Shriners Hospitals.

Who are the LOSNA?

Ladies Oriental Shrine of North America is a fun group with each court assuming an obligation to provide financial support and assistance to the Shriners for their network of hospitals, including funding for transportation, sewing for the children, purchasing special equipment, and for the support of research. To become a member, a woman must be related to a Shriner in good standing by birth, marriage or adoption. The Ladies Oriental Shrine was organized in the jurisdiction of



On behalf of Bohkara Court No 22, Edith Rawn, Past President of the Salaam Ladies Shrine Club in Collingwood, and numerous representatives of the court's Clubs and Units presented Guylaine Ouellet, Public Relations Manager at Shriners Hospital Montreal with nearly \$60,000 in donations (funds and material) for the hospital at the Bokhara Court Annual Hospital Spring Tea.

Osiris Temple in Wheeling, West Virginia, on February 14, 1903. Today, there exist 78 courts. Bokhara Court No. 22 is the only Canadian court.

Canadian Shriners “Bond in 007”

Not very long ago the three Shrine Centres on the East Coast of Canada, Mazol (Newfoundland), Philae (Nova Scotia) and Luxor (New Brunswick), were collectively spending close to \$1 million annually on transportation of children and their families to various Shrine Hospitals. Over the past few years, due to the efforts of numerous activities and the presence of outreach clinics, the cost of travel for the three Shrine Centres has diminished considerably.

Children in need

During the Application and Transportation Committee of the Board of Governors meeting in Montreal in January 2007, a request was made to help three children from Regina, who required major hip surgery. These children are part of the Saskatchewan WA WA Shrine Centre catchment area and the Noble responsible for transportation of their children informed Dr. François Fassier that the WA WA Shrine Centre would be unable to pay the air ambulance

required to transport these children back and forth. The cost of transport could reach a figure equal to 70% of WA WA's annual budget and with 97 active cases, this would be unfair to the other children in need. The three children would be in casts and therefore would be unable to be transported on commercial airlines.



Douglas Rowe (Mazol), James F. Mitchell (Philae), Darrell Munn (Luxor) were recognized for generous support of their Shrine Clubs by Randy Ball (WA WA) at the Canadian Hospital Seminar in May.

East meets West and offers a helping hand

The three Board of Governor members from the East Coast Shrine Centres who are members of the Applications and

Transportation Committee felt that if emergency funds were not available from Tampa, this would be an opportunity to show brotherly aid.

After numerous discussions among the three Potentates, it was agreed that the three Centres would contribute the \$30,000 necessary to assist with the transportation of these children. The cheque presentations were made to the Montreal Hospital Board by each Shrine Centres which were acknowledged for their fraternal assistance by the Potentate of WA WA.

The bond of brotherhood stands strong

On behalf of the children in the care of WA WA Shriners we want to sincerely thank Luxor Shriners and Ill Sir Darrell Munn, Mazol Shriners and Ill Sir William Smith, Philae Shriners and Ill Sir James Mitchell, for thinking of the Saskatchewan children and the Montreal Shriners Hospital for Children. Their leadership and act of brotherhood will always be remembered in the hearts of all Shriners.

The Tunis & Karnak Shriners – Ottawa & Montreal

Norman Morrison, John C. McDonald

On April 21st, Tunis (Ottawa) and Karnak (Montreal) Shriners and our Ladies joined with area citizens at the Wheel Support for Kids event to benefit the Montreal Shriners Hospital at the Morrisburg Meeting Centre.

Organized Krista Clauson and her husband Ken, a dairy farmer, this fundraising event set an example for hard work, dedication and determination which will be hard to emulate. The food, music and decor were excellent. Both the silent and live auction were well handled and a lot of fun.

We wish to thank all the Nobles* of Karnak and Tunis and their Ladies for attending this great event and supporting and recognizing the labor of love put forth



by Krista. The preliminary report indicates that the Hospital will be receiving about \$11,000 from this evening.

There were many Nobles involved in helping Krista and her team. We would be remiss if we did not mention Noble Armand Lono who provided advice and assistance since last fall. We should also mention the assistance that the S.D. & G. Shrine Club provided.

* Members of the Shriners fraternity are addressed as “Nobles” – their wives are called “Ladies.”

Krista Clauson orchestrated the Morrisburg event where her father-in-law, Noble George Clauson, Tunis Shriners Ceremonial Potentate, acted as Master of Ceremonies.