



Learning to adapt, the road to well-being

Vol. 2, No. 2

In this issue:

Fresh Beginnings p. 1
Spring Summer Activities 2020
p. 2

News from Arthritis South Shore p. 3

How might Cannabinoids be Useful as Medicine p. 3 The Benefits of Adapted

Fitness Exercises p. 4

Recommendations from our Experts p.4

Does the Weather Affect Arthritic Joint Pain? p. 5 Slice of Life p. 6

Invitation to Share a Slice of

Life Related to Arthritis p. 7 Osteoarthritis p. 8

Osteoarthritis p. 8
Heartfelt Thanks p. 9

Upcoming Guest Speaker p. 10 Membership, Donation p. 11

Flash Arthritis is published three times a year, in winter, spring and fall.

You can reach us at all times by email

arthriterivesud@gmail.com

Do you know that:

An estimated one in four Canadians will have osteoarthritis by 2035, with a new diagnosis every 60 seconds.

FRESH BEGINNINGS

Hope and Help

Arthritis South Shore is slowly budding and blossoming like nature in spring. It is emerging through all difficulties like a plant pushing through the cold grounds of spring. We are all well aware of the present situation: a virus has become a worldwide issue and has brought the world to a standstill. So many are putting their lives in jeopardy in caring for others! We are all concerned about our loved ones both far and near. Everything has changed. It has made us realize that there is no greater wealth than health. We are all one in this. There will be fresh beginnings for all of us. The goodness in us will help us get through this together.

We are all confined to our space and it is a complete shutdown for many activities including all those of Arthritis South Shore planned for this spring. We must do everything to keep ourselves fit even at home - eat well, exercise, sleep well and do things that make us laugh and have fun. We must keep our spirits up. Together, from a distance let us also take care of our fellow human beings. A phone call, an email, a video call (Skype, FaceTime, Facebook/Messenger, Zoom, Google Duo, etc.) may help keep the spirit alive. Cheer others up and do a good deed per day.

Arthritis South Shore is offering a page to members who wish to share their stories in our newsletter. We will select one to publish per issue. Perhaps it is a good time to write an inspiring one page story about your arthritis, how you deal with it and how you wish to inspire others.

We thank all the members, volunteers, supporters, donors, collaborators, participants, and many government officials who contribute to the fresh beginnings of Arthritis South Shore. Their continual support and implication help us in carrying out our mission and vision. We hope to continue offering you the adapted exercises, coffee support groups, workshops and conferences and the soon to come pool exercises and perhaps dance exercises. It is our pleasure and an honour to work as volunteers for such a life-changing cause.

Take care all. May you and your loved ones be safe.

Have a Top of the World day no matter what for all things come to pass.

Have a Happy Spring and A Happy Summer. Hope to see you all soon.

Premela Pearson, president



Free presentations in collaboration with the Bibliothèque de Brossard Georgette-Lepage

Lectures (in French)

Wednesday, April 15 at 7:90 p.m.: Dr. Rym Haouari, rheumatologist, will talk about Medication and Arthritis Friday, April 24 at 1;30 p.m.: Ms. Caroline Berthiaume, kinesiologist, will talk about the Benefits of Physical Activity for Arthritis.

Wellness Workshops (from 1:30 p.m. to 3:30 p.m.)

Trained volunteers give the wa Energy. Each workshop includes a presentation and a question period in both English and French.

Other activities offered in Brossard

Please register for the following activities by email at arthriterivesud@gmail.com or by phone at 438 630-7215

Adapted Fitness Exercises

On every Tuesday for 10 weeks, from March 14 to May 26 (from 10 a.m. to 11 a.m.)
At the Nathalie-Croteau Community Center (1210 André Street) – Maximum 15 participants.
Warm-up, aerobic activities, stretching, relay aton 6 mess, sitting or standing exercises.
Fees: \$55 for members/\$65 for non-members payable in cash or by cheque at the first meeting. Brossard Bciti pass is mandatory.

Coffee Support Group

On Friday, April 10 and May 8, from 1:30 p.m. to 3:00 p.m.

At the Nathalie-Croteau Community Center. Informal meetings talk about arthritis, share experiences and questions, in a friendly supportive environment. Fees: 50 cover the cost of tea, coffee and snacks. Brossard Bciti pass is mandatory.

Sunday Brunch

On Sunday, April 26 at 12:30 p.m.

You are cordially invited to share lunch with members and friends of Arthus South Shore. Each participant pays for the cost of his/her meal. Please contact us by email to book your place before the 15th of each month. You will be then given the name and address of the restaurant.

Centre Socioculturel Alphonse Lepage

7905 San Francisco, Brossard

Conference (French)

Friday, May 29, 2020: Mr. Jean-Louis Brazier, Professor emeritus, University of Montreal. Title: And if all rheumatisms were not the same ... Osteoarthritis, Arthritis...



News from Arthritis South Shore

An annual general meeting must be held before the end of June for the Arthritis South Shore members. The Board of Directors is considering postponing the meeting if the current physical distance period was to extend beyond the month of June. Members will receive notice of the meeting by email at least 14 days prior to the scheduled date.

Conferences scheduled for April and May will be rescheduled for the fall. Mr. Jean-Louis Brazier will be our special guest of honour sometime this fall, and we will need volunteers for this very unique event.

Thank you to all those who came to greet us on February 8 at the Building Community together event organized by the Assistance and Referral Centre (ARC) and the Regional Health and Social Service Partnership Table.

How might cannabinoids be useful as medicine?

The two main cannabinoids from the marijuana plant that are currently of medical interest are THC (Delta-9-tetrahydrocannabinol) and CBD (cannabidiol). THC can increase appetite and reduce nausea. It may also decrease pain, inflammation (swelling and redness), and muscle control problems. Unlike THC, CBD is a cannabinoid that doesn't make people "high". It may be useful in reducing pain and inflammation, controlling epileptic seizures, and possibly even treating mental illness and addictions.

Many researchers, including those funded by the National Institutes of Health (NIH), are continuing to explore the possible uses of THC, CBD, and other cannabinoids for medical treatment. For instance, recent animal studies have shown that marijuana extracts may help kill certain cancer cells and reduce the size of others. Evidence from one cell culture study with rodents suggests that purified extracts from whole-plant marijuana



can slow the growth of cancer cells from one of the most serious types of brain tumours. Research in mice showed that treatments with purified extracts of THC and CBD, when used with radiation, increased the cancer-killing effects of the radiation.

Scientists are also conducting preclinical and clinical trials with marijuana and its extracts to treat symptoms of illness and other conditions such as

- diseases that affect the immune system, including HIV/AIDS and multiple sclerosis (MS), which causes gradual loss of muscle control,
- inflammation,
- pain,
- substance use disorders, and
- mental disorders.



Source: Joint Effort, AWISH, Winter 2020, p. 5



The Benefits of Adapted Fitness Exercises by Jean Proulx

Do you have osteoarthritis? Move it!

Recent studies show that people with osteoarthritis exercise less than the general population.

How can you blame them? Do you want to move your elbow when it hurts?

However, research shows that regular, moderate physical activity can work wonders for many forms of arthritis, including osteoarthritis and rheumatoid arthritis. In fact, it can help reduce the deterioration of the cartilage, mobilize joints, tone and soften muscles.

Exercise reduces symptoms, especially those of pain and stiffness, improves joint function and delays the process of joint deterioration. Also, exercise increases the pain threshold and energy.

There is no age to start moving and movement is health.



Who is Jean Proulx?

Jean has been teaching adapted fitness exercises offered by Arthritis South Shore since October 2019. He has a bachelor's degree in physical activity and has been a fitness specialist for the 50+ age group for over 30 years.

Recommendations From Our Experts

It is not necessary to have access to a large lounge or gym to exercise. Often, the space needed for a chair is enough. The Youtube web site provides access to all kinds of exercise videos. We should choose the exercises according to our condition, and especially go at our own pace, not force if there is pain, use a chair to avoid falls, and use our common sense. The important thing is to move not try to become a "ninja warrior"!



Jean suggests watching the "Vieillir musclé" capsule on Youtube (www.youtube.com then do a search with the keywords vieillir musclé). It explains that problems with falls can be related to the inevitable loss of muscle mass as we age. The good news is that exercise can help reduce this loss.

Our guest speaker initially scheduled for April, Ms. Caroline Berthiaume, kinesiologist, has prepared short capsules available on Youtube. Some of them are gentle and adapted to arthritis sufferers. You can access them on youtube.com when typing: Caroline Berthiaume kinesiologist. Some capsules target muscle tone, others, stretching exercises and cardio (standing or sitting on a chair).

The Canada Arthritis Society offers the top 10 exercises on https://arthritis.ca/getmedia/4b72d442-8644-4aaa-8adb-51b3041ad4ac/EN-top-10-exercises.pdf



Does the Weather Affect Arthritic Joint Pain?

The participants in the recent February's Coffee Support Group discussed this issue. They were almost unanimous: they were sensitive to variations in atmospheric humidity. The weather could have a different impact on everyone. Our group was not large enough to draw scientifically valid conclusions! So, what does the scientific literature say?

A very recent study published in Nature Digital Medicine (1) teaches us that wet weather, rain and cold temperature worsen joint pain. The study highlights the link between chronic pain and wet weather when atmospheric pressure is low. The data used in the study came from 2,658 British patients suffering from chronic conditions such as fibromyalgia, arthritis, migraine or neuropathy. On humid and windy days with low air pressure, the pain felt was 20% more. No link between precipitation and pain or between temperature and pain could be observed. However, the temperature could worsen the pain caused by a wet, windy and cold weather.

Not all studies are equally conclusive. An Australian study conducted in 2017 found no link with humidity, atmospheric pressure, wind direction or precipitation (2). Another study (3) involving 200 people with knee osteoarthritis showed that a 10-degree drop in temperature combined with a drop in pressure increased the pain. More recently, a Dutch study (3) led with 222 patients over 2 years rather concluded that the pain and stiffness worsened when the pressure and humidity increased.

There are many hypotheses that seek to explain the phenomenon (4). Does the weather affect the nerves in the synovial membrane? Would the muscle tremors initiated by the body to warm up itself exert traction on diseased joint structures? Or is it more simply related to our way of life: when it rains or it is cold, we usually stay inside; would inactivity be the cause of the increase in pain?

It's up to you to experiment!

References:

- (1) Arthrite: la météo a bien une incidence sur la douleur (Angleterre 2019) https://www.pourquoidocteur.fr/Articles/Question-d-actu/30626-Arthrite-meteo-incidence-la-douleur
- (2) Douleurs chroniques : la météo n'a aucun impact https://www.pourquoidocteur.fr/Articles/Question-d-actu/19264-Douleurs-chroniques-la-meteo-n-a-aucun-impact
- (3) Weather & Joint Pain: Why Your Joints Hurt When It's Raining or Cold https://www.webmd.com/pain-management/weather-and-joint-pain#1
- (4) Les rhumatismes sensibles à la météo ? Plutôt faux http://www.scientifique-en-chef.gouv.qc.ca/impacts/ddr_rhumatismes-sensibles-a-meteo-plutot-faux



Slice of Life

by Johanne Fortier

The illness took me by surprise. It started with pain in my hands, fingers that I had trouble bending, and also in my feet. I thought it was to pass as quickly as it had happened. But it was not. Despite over-the-counter pain relievers at the pharmacy, nothing worked. I talked about it with my family doctor who seemed to think that it was probably osteoarthritis and that with "Tylenol arthritis", it should eventually pass.

In 2008, my husband and I went on a trip to Puerto Rico with my "Tylenol arthritis" in my suitcase. When I arrived at our destination, sitting in our room, I observed that my ankles were swollen, my fingers were stiff, hard, swollen and I felt like being trapped in molasses. I still hoped that my pills work, but in vain. The next day, it is impossible for me to put on my new sandals that I bought for the trip. Impossible to take a utensil to help myself at the buffet, impossible to put on flippers to go snorkelling at sea, impossible to get off the tour boat to go back to land. Needless to say, I poured all the tears of my body in my diving mask and I cried my panic underwater. The helplessness, the incomprehension and the fear overwhelmed me. I had become completely dependent on my husband for all I wanted to do and even for my most intimate care. Misery, I who have always been independent, I found it really difficult to accept what was happening to me.

On my return to the country, the getting off the plane to my vehicle was in a wheelchair. I saw my family doctor who sent me to a rheumatologist in an emergency: I was suffering from rheumatoid arthritis. I had to receive large doses of cortisone to calm down my immune system that was panic-stricken, without really knowing why. Then I took the Plaquenil medication that has worked well for a while.

But after a few years, the attacks became more and more frequent and I had to add Methotrexate that was effective until last November. By that time, I received another stunning diagnosis just before the holidays, that of liver cirrhosis. And yes, my genetics and Methotrexate ruined my liver. I am about to change this medication for a new one, "Rituxan" given as an infusion. Another mourning to do and a lot of stress to deal with. Am I going to be relieved, will there be side effects, or any other disturbances? Ups and downs, I've experienced them. When the diagnosis was announced, I went from denial to anger and finally to acceptance.

I am still the same person as before 2008: dedicated, active in my community, mother of 3 children, athletic, loving life, positive in nature, with the same sense of humour and retired. I'm still moving forward and having all kinds of projects. I am still the same person, with my new conditions and my limitations caused by the disease. I have learned to respect myself more, I have taken care of myself in a different way and I am doing everything in my power to live better with the disease. Despite what the disease makes me experience, I have chosen to be at peace with it and life remains, for me, as good as ever.

I accept what is, I let go off what was and I trust what will be. (Buddha)



Invitation to Share a Slice of Your Life Related to Arthritis



Writing is therapeutic according to many (1). It helps the left brain to reconnect us to our creativity. To write a diary, to put down on paper our emotions, our fears, our pains could relieve us, set us free, let off steam. Whether you are a caregiver or an arthritis sufferer, Arthritis South Shore invites you to write and especially share this writing in the form of a "slice" of life, a description of a moment in your journey with this disease.

If you feel like writing and don't know where to start or if you lack inspiration, here are some suggestions concocted by Johanne Fortier. Do not hesitate to get in touch with her.

- Tackle a theme inspiring you or a particular moment.
- Talk about how you feel on a daily basis (pain, limitation, anxiety, fatigue, helplessness, depression, discouragement, frustration, awareness of the power you have over it, loneliness, isolation, etc.) with your spouse, family, those around you or at work (the way others look at you, their worries about you, their feeling of helplessness, sex life, etc.).
- How did you deal with the announcement of the diagnosis (the impacts and emotions felt) and the period of adaptation (the time it took you to finally digest the thing and the jagged emotions that it may have caused you to experience), and acceptance of it (peace, resilience, etc.)?
- What are the physical and psychological effects of your medication? How do you teach or inform people around you about your illness, food discoveries and the impact on your health and general wellbeing? What benefits do you get from physical exercise?
- Does music or reading help you? Does your pet make you feel good and comfort you? Is your healthcare team efficient? Tell us how.

End your story on a positive note by talking about your successes, your pride, what you have chosen to learn, and/or do to overcome difficulties, live better, be better. Talk about your tips and tricks to help you function better every day (the purchase of a cane, a special tool to open cans or how to put on your stockings, etc.). Don't forget to tell us about yourself, who you are (job, personality, interests, qualities, nature) and name the disease you are suffering from.

Whether you write only a few lines, one or two paragraphs, or a page, tell yourself that your precious sharing will undoubtedly help, inspire or touch someone. We thank you in advance for your great generosity of heart and for the gift of self that you are giving us by sharing YOUR SLICE OF LIFE.

We can't wait to read your true story!

References and readings:

(1) Écrire son journal intime pour aller mieux, Aurore Aimelet, mis à jour 20 février 2020 https://www.psychologies.com/Therapies/Developpement-personnel/Epanouissement/Articles-et-Dossiers/Ecrire-son-journal-intime-pour-aller-mieux



Osteoartritis

steoarthritis is the most common type of arthritis. It affects more Canadians than all other forms of arthritis combined. Although it was once thought to be a disease caused by normal deterioration and "wear-and-tear", recent research redefined it as the body's inability to repair damaged joint tissue. While joint damage can occur as a result of the deterioration associated with aging, it can also result from injury.



Osteoarthritis leads to the deterioration of cartilage (the tough elastic material that covers and protects the ends of bones). This results in the bones rubbing against each other, causing symptoms such as pain, stiffness, swelling, crackling, instability, joint dysfunction and reduced range of motion. The joints most often affected by osteoarthritis are the knees, hips, big toes as well as the joints of the hands and spine.

Osteoarthritis manifests itself differently from person to person. Other non-articular symptoms include disturbances in sleep and mood. The symptoms of some people with osteoarthritis are made worse by a process called pain sensitization, which is caused by an abnormal pain processing by the central nervous system. It's as if the "volume knob" of your pain system has been left turned up like a radio stuck on "loud". You may therefore feel exaggerated pain in response to a painful or even non-painful trigger, such as a light touch. You may even feel constant pain without a trigger. Pain awareness, or persistent pain, can invade a person's life. Your pain sensations may become generalized (e.g., throughout the affected leg). You may also experience neurological symptoms, such as tingling and sensations resembling an electric shock. It is very important to understand that you can "turn the volume down" as you progress through self-management strategies such as regular exercise, optimal sleep and stress-reduction techniques, but it often takes time and effort. Medications that target the central nervous system may also be beneficial.

Osteoarthritis usually progresses slowly and can last for months or years. Initially, symptoms tend to be intermittent. Over time, the damage worsens and symptoms become more constant, and may even occur at rest and disrupt sleep. The good news is that treatment can reduce symptoms, even if it doesn't interrupt the disease process. There are treatment options that can reduce risk, relieve pain and improve function. These options include self-management strategies (e.g., exercise and weight management), drug therapy and - in severe cases - joint replacement.

Many risk factors are thought to contribute to the development of OA, such as age, gender, family history, occupation, excess weight, participation in certain sports, joint injuries or operations, muscle weakness, joint misalignment/deformity and sedentary lifestyle.

This information is from The Arthritis Society's Osteoarthritis pages:

https://arthritis.ca/About-Arthritis/Types-of-Arthritis-(A-Z)/Types/Osteoarthritis.aspx; https://arthritis.ca/getmedia/a497c97c-5da1-44f9-b28d-b759d01382e9/18-390 Brochure OSTEOARTHRITIS-EN 32 R15 READING Oct4 Small.pdf



Heartfelt Thanks

- ➤ To our Members, Supporters and Volunteers
- > To our Donors
 - Jean Roger, friend and supporter
- > To our Partners
 - o The City of Brossard **Stores**
 - o The Arthritis Society, Québec Division Diane de Bonville
 - The Arthritis West-Island Self-Help Association (AWISH) Paulette Zielinski and Ginette Gagné
 - o The Montérégie-Centre Integrated Health and Social Services Centre Danielle Auclair

> To our Collaborators

- o Bibliothèque de Brossard Georgette-Lepage Magda Zemmou and Michelle Tibblin
- o Chartwell residences, Greenfield Park Deborah Humphrey and Marilou Caron
- o The GSSAA Julie Felx
- La Résurrection Parish
- Alliance Carrière Travail
- o La Corporation de développement communautaire (CDC) de l'agglomération de Longueuil
- To our Community Organization Collaborators
 - o Centre Sino-Québec de la Rive-Sud XiXi Li
 - o The South Shore Black Community Association Diane Alexander, Ketlyn Maitland-Blades

Thank you so much



Upcoming guest speaker

Mr. Jean-Louis Brazier - Professor Emeritus of the Université de Montréal and graduate in Pharmacy, Chemistry and Toxicology.



An important part of Jean-Louis Brazier's career was spent at the Université de Montréal, where he began in 1997 as a full researcher at C.H.U. Sainte-Justine, and then became, in 2001, a full professor in the Faculty of Pharmacy. Professor Brazier was trained in chemistry and pharmacology, a rare combination that allowed him to teach difficult and varied courses. His innovative pedagogical contribution has aroused unanimous admiration among students and influenced the evolution of the Faculty.

In addition, he has trained many teachers and has acted as a science popularizer in programs appreciated by the general public. Designated Pharmacist of Heart and Action in 2002, he received the Minister of Education Award in 2003, the National Award of Excellence in Education from the Association of Faculties of Pharmacy of Canada in 2004, and the Excellence in Teaching Award from the Université de Montréal in 2005.

In his lecture, which has been postponed to the fall, Mr. Brazier will highlight the differences between major joint pathologies. Based on the actual knowledge of the biochemical, immunological and genetic mechanisms that govern these pathologies, he will explore with us therapeutic avenues and future therapies.

Arthritis South Shore Board of Administrators

- Premela Pearson, President
- Virginia Cisneros, Vice-President
- Johanne Boisvert, Secretary
- Danielle Jacob, Treasurer
- André Faucher, Administrator

Happiness can be found even in the darkest of times, if one only remembers to turn on the light.

Dumbledore

The articles in this newsletter, whether translated or modified, are for informational purposes only. They do not necessarily represent the opinion of Arthritis South Shore.

They cannot in any case substitute for a medical opinion or diagnosis. You should consult your doctor if you have questions about a diagnosis or treatment.



Together we help by becoming a member, donor or volunteer

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