

# FOCUS ON EPILEPSY



THE NEWSLETTER OF THE EDMONTON EPILEPSY ASSOCIATION The Epilepsy Association of Northern Alberta - Our 56<sup>h</sup> Year of Service

(This Newsletter can be viewed in full colour on our website.)

### Member Outings & Activities

### July

Historic Old Tram Ride Strathcona Terminal Gateway Blvd. & 84th Avenue Sunday, July 17th, 1:00—3:00 p.m. (Pre-register by July 13th)

Fun BINGO for Prizes Friday, July 29th, 1:00 – 3:00 pm EEA Office



## August

Annual Members' BBQ, Games & Social

Saturday, August 13th, 11:00 - 2:00 pm Leaving EEA Office 10:40 am SHARP (Preregistration deadline August 10)

Fun BINGO for Prizes

Friday, August 26th, 1:00 – 3:00 pm EEA Office



### FREE MEMBER ACTIVITIES



### **Historic Old Tram Ride**

Sunday, July 17th 1:00 - 3:00 pm

Annual Members'
BBQ, Games & Social

Saturday, August 13th, 11 am – 2 pm "Social Room" in ACT Centre, Rundle Park (See page 4 for details.)



# A Well-Deserved Recognition for Gary Sampley And His Wife Sharon



On Saturday, July 9<sup>th</sup> from 1:00PM to 4:00 PM you are invited to be a part of "Gary Sampley Tribute Day" honoring the Edmonton Epilepsy Association's Executive Director, Gary Sampley. Gary's extraordinary contributions to the association have made it one of Canada's foremost and most successful providers of supports and services to individuals and families impacted by epilepsy.

It is our wish to show our appreciation for his devotion, passion, vision, and the unselfish contributions and sacrifices made by Gary and his wife, Sharon, to achieve these outcomes.

This event will be held at the home of current EEA president, Cheryl Renzenbrink, 20007-128 Avenue NW Edmonton. We need to know your confirmation so that we may adequately prepare refreshments for the afternoon. Please register by following this link: <a href="https://www.eventbrite.ca/e/sampley-tribute-tickets">https://www.eventbrite.ca/e/sampley-tribute-tickets</a>, or by calling Cheryl directly @780-909-4006 or Sharon @ the EEA Office @780-488-9600.

### **Adult Support Group Schedule**

(Group meets from 1:00 - 3:00 p.m. in the EEA office.) Please call the Office to advise if you will be attending.

Wednesday, July 13, 2016

Wednesday, August 10, 2016



# Edmonton Epilepsy Association The Epilepsy Association of Northern Alberta



Focus on Epilepsy is published 6 times annually by the Edmonton Epilepsy Association. Articles appearing in Focus on Epilepsy do not necessarily reflect the opinions of the Association.

### We welcome your contributions:

Do you have a poem or maybe a short story (1/2 page) that you would like to share with others. Or maybe you have read a book from our library and want to share a review with others. If you would like to share your wisdom, please submit your items to Sharon at our office or e-mail her at info@edmontonepilepsy.org

### **BOARD OF DIRECTORS**

President...Cheryl Renzenbrink Vice President...Ann Gillie Treasurer...Anna Tymoszejko Secretary...Cameron Reid

**Executive Director...**Gary Sampley

**Directors-at-Large:** 

Tammy Anast Szymon Bamburak

**Guy Doucette** Erin Duke

Doug Griffiths Craig Heyland

Tim McCallen Anne Starreveld

Brian Wilkie

#### STAFF

Gary Sampley... Executive Director & Chief Operating

gary@edmontonepilepsy.org

Sharon Otto... Program Manager & Education Coordinator

sharon@edmontonepilepsy.org

Dr. Sunny Kim...Counsellor sunnv@edmontonepilepsv.org

Cam Reid...Volunteer Coordinator cam@edmontonepilepsy.org

### **Edmonton Epilepsy Association** The Epilepsy Association of Northern Alberta

11215 Groat Road NW Edmonton, AB T5M 3K2



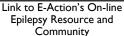
(780) 488-9600 (780) 447-5486 fax I-866-EPILEPSY



info@edmontonepilepsy.org www.edmontonepilepsy.org











### **EEA Employabilities Programs**

- ⇒ Employment Counselling
- ⇒ Assistance with Resumes
- ⇒ In-office Skills Training
- ⇒ Referrals to Select EEA Partners In Employability For Further Information contact EEA Executive Director, Gary Sampley, 488-9600 or gary@edmontonepilepsy.org

### Bus Tickets Available for Members in **Reduced Circumstances**

Please note that we now have our 2016 allotment of tickets available in the EEA Office. These can be accessed by MEMBERS with limited financial resources who need help getting to medical appointments, EEA events, food shopping, etc., and who do not have an AISH bus pass.

Call 780-488-9600 or drop by to pick them up.



### Now you can Donate to the EEA online!

If you would like to make either a lump sum Donation or a monthly donation contribution to the Association by credit card, please visit our website, www.edmontonepilepsy.org, and click on the **Canada Helps** Logo. This donation program gives you the ability to instantly print off a donation receipt.

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# News from the **EEA** Office



### CLOBAZAM UPDATE - June 20, 2016

Clobazam is in short supply, but is still available at some pharmacies. If inventories have become low or depleted at your pharmacy, ask your pharmacist to recheck the status of clobazam and Frisium with their suppliers.

The next few days will continue to be challenging for people, due to the depletion of the clobazam inventory at many pharmacies. However, some replenishment of generic clobazam (Apo-clobazam, Apotex Inc.) is expected at the end of this week or early next week. The new stock will be spread across the country with limited amounts to individual pharmacies.

A second replenishment of generic clobazam (Apo-clobazam, Apotex Inc.) is expected to arrive at pharmacies by late June or early July. It is expected that there will also be periodic shipments of the brand name product, Frisium, over the coming weeks as well. Health Canada will be working with pharmaceutical manufacturers and other stakeholders to monitor status over the summer.

#### I take clobazam, what should I do?

- Continue to take clobazam as indicated by your healthcare provider
  - o do not skip doses
  - o do not take less than the prescribed amount
  - o do not make any changes in your treatment without medical advice
  - Develop a management plan with your pharmacist and your healthcare provider in case clobazam is not available. You can share the following clinical management suggestions with your healthcare team:
  - If your pharmacy is unable to refill your prescription ask your pharmacist
    - o have they exhausted all avenues to try and find clobazam for you?
    - o have they searched for generic clobazam and brand name clobazam (Frisium)?
  - If it is necessary to make changes to your treatment plan due to the shortage
    - o ask for a copy of the new treatment instructions in writing
    - o go over the information with your pharmacist
    - o ask your pharmacist to explain the information again if the instructions are not clear
  - Contact your local Canadian Epilepsy Alliance agency if you need help by calling I-866-EPILEPSY (I-866-374-5377)

Update: June 20, 2016

Canadian Epilepsy Alliance Drug Shortage Committee

### Many Thanks!



The EEA had its first ever Garage Sale on May 13th and 14th. The grand total after two days was \$2174.05. Thank you to all the donors and volunteers who worked the two days.

We will be having our second Garage Sale on September 16th and 17th. Volunteer assistance and donations of saleable items would again be appreciated!



Thank you as well to our 38 Casino Volunteers who worked our Fundraising Casino on June 5th and 6th. We will know how much we made in mid-August.

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## **News from the EEA Office**



### 2016 Collective Kitchen Wraps Up

The 2016 Collective Kitchen ended with a celebratory Potluck Luncheon on June 17th. This year's Kitchen started in January and was held monthly, from January to June 2016.

There were a total of four participants who were led by Sharon Otto and helper Cheryl Gillie. This year's focus was on eating a balanced meal and food safety. Each month we prepared a balanced meal. The 2017 Collective Kitchen will begin in January, 2017.

### **Annual Members' BBQ, Games & Social**



(Pre-registration required by Wednesday, August 10th)

"Social Room" in the ACT Centre, Rundle Park

★ Games ★ Door Prizes ★ Paddle Boat Rides



(FREE transportation for those who do not drive leaves the EEA office at 10:40 a.m. SHARP)

Call the Office to register! 780-488-9600

### Next EEA Computer Training Program Begins in October 2016

EEA members who wish to learn the basics of how to use a computer and have the opportunity to obtain a free laptop computer are invited to register now.

- ◆ The training program will run for four consecutive Mondays, from 1:00-2:45 p.m., commencing October 3rd;
- Registration is limited to 4 participants;
- Education Coordinator, Sharon Otto, will deliver the training;
- This program is a partnership of the EEA and the United Way InKind Exchange.

To register, call Sharon at 780-488-9600 or e-mail info@edmontonepilepsy.org



# Nominate your Employer as the EEA Employer of the Year



### Do You Have Epilepsy???

Do you have a <u>great and supportive</u> Employer that recognizes and encourages the many contributions people with Epilepsy offer their fellow employees and workplace?

Nominate them for the 2016 Edmonton Epilepsy Association Employer of the Year Award. Contact us to find out how: 780-488-9600 or gary@edmontonepilepsy.org

Nomination Deadline is September 1st, 2016





# News from the **EEA** Office





# Odd Fellows & Rebekahs of Edmonton Donate \$3500 to EEA

Diane Bettcher, member of Jewel Rebekah Lodge #25, presents the donation cheque to EEA Executive Director Gary Sampley during the Rebekahs' June 18th, 104th Anniversary Dinner at the Odd Fellows Temple.

EEA sincerely thanks you!



### May Member Bowling at Bonnie Doon Lanes









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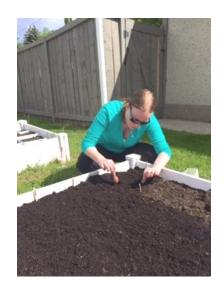
# **EEA Collective Garden Program**















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# June 12th Visit to the Valley Zoo



























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### **Antiepileptic Drugs May Slow Growth Rate in Children**

A new study published in the scientific journal BMC Pediatrics suggests that the common antiepileptic drugs (AEDs), valproate (VPA) and oxcarbazepine (OXC) may slow growth in children when taken together or on their own. According to the researchers, this could be due to the effect of these drugs on bone metabolism.

The team, based at the National Defense Medical Centre in Taiwan, evaluated the growth velocity of 73 children with epilepsy aged between one and 18 years. They divided the children into three groups according to their age to account for normal variations in growth rate.

The researchers used two markers of bone growth; one measuring bone formation and the other measuring bone breakdown, which is a normal part of bone growth. They saw that the activity of the bone formation marker increased while the bone breakdown marker decreased. In other words the bone metabolism was impaired in children taking one or both AEDs.

The scientists also noticed that the speed at which the children with epilepsy grew significantly decreased after one year of treatment with valproate and/or oxcarbazepine, compared to the period before therapy was started. This was especially pronounced in early childhood and less significant during and after puberty, probably due to the fact that growth slows naturally at these points.

It is known that children and adolescents with epilepsy usually have a lower bone density and greater risk of fracture. This has been associated with the use of AEDs. However, the exact mechanism by which AEDs influence bone density remains unclear.

The authors note that in the future, studies involving more children and that span over a longer period of time will be necessary to better assess the effect of AEDs on growth. Such studies would need to evaluate the growth velocity and bone metabolism, taking into account genetic, hormonal and nutritional factors that may have an influence on the speed at which children grow.

Epilepsy Research UK

https://www.epilepsyresearch.org.uk/antiepileptic-drugs-may-slow-growth-rate-in-children/

### **New Drug Being Trialled for Dravet Syndrome**

The pharmaceutical company, Zogenix, has announced the start of a new clinical trial for a drug compound called ZX008, which it has developed for the treatment of Dravet syndrome.

### **About Dravet syndrome**

Dravet syndrome is a rare and severe form of epilepsy that usually begins at approximately six months of age. It is characterised by seizures that are triggered by fever and do not respond to standard antiepileptic drugs (AEDs).

Dravet syndrome can cause severe cognitive and developmental impairments and it is associated with a higher risk of sudden unexpected death in epilepsy (SUDEP).

More information about Dravet Syndrome can be found here.

#### About the trial

This is a second phase three clinical trial that will test both the safety and efficacy of two different doses of ZX008, compared with an identical-looking placebo. The trial will be randomised and 'double-blinded', meaning that neither the clinicians nor the participants will know who is taking the drug and who is taking the placebo.

The company aims to recruit 105 subjects for the study in Western Europe and Australia. The first phase three study is currently enrolling participants aged between two and 18 years old, at a number of sites in North America.

Both trials will assess the frequency of convulsive seizures in participants taking ZX008 and compare this with seizure frequency seen in people taking placebo.

In a press release distributed by Zogenix, Dr Lieven Lagae, Principal Investigator on the trial, said: "We are excited to begin this clinical trial, as we view ZX008 as an important potential new treatment option for children and adolescents with Dravet syndrome. This is a devastating epilepsy syndrome and a severely under-served patient population. The open-label clinical data generated to date for ZX008 have been compelling and we look forward to conducting this Phase three clinical trial."

#### About ZX008

ZX008 is an investigational product candidate for the treatment of Dravet syndrome. It is a low-dose fenfluramine liquid solution that acts as an indirect stimulator of the sympathetic nervous system, which triggers the body's 'fight or flight' response. ZX008 stimulates the release of serotonin, a chemical messenger thought to contribute to feelings of wellbeing and happiness.

ZX008 received orphan drug designation (ODD) in the United States and Europe, meaning that it will undergo an accelerated assessment process due to its potential to address an unmet medical need.

> June 10, 2016 Epilepsy Research UK

ttps://www.epilepsyresearch.org.uk/new-drug-being-trialed-for-dravet-syndrome/

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### Links Between Autism and Epilepsy Deepen

Over recent years, medical research has uncovered a number of links between autism and epilepsy. The latest study investigating this relationship demonstrates that having a relative with epilepsy is a risk factor for autism.

Epilepsy and autism are known to be linked, but why this is the case is open for debate.

Autism is a mental condition characterized by difficulty in communicating, forming relationships, and an altered way of perceiving the world.

Epilepsy is characterized by bursts of intense electrical activity in the brain and seizures.

At face value, the two conditions do not necessarily look like they are related. However, the relationship between them is now well documented.

Around 20-30 percent of children with autism develop epilepsy by the time they reach adulthood, and autism is present in an estimated 15-50 percent of individuals with epilepsy.

Why the link exists is not known, but the latest research, conducted at University Hospital in Linköping, Sweden, solidifies them further.

### Family links between autism and epilepsy

The new study, published this week in Neurology, investigates whether having a relative with epilepsy might increase the risk of an autism diagnosis.

"Other studies have linked the two conditions, however, our study looks specifically at the brothers and sisters and sons and daughters of people with epilepsy to determine a possible autism risk in these relatives."

Lead author Dr. Heléne E.K. Sundelin

The researchers delved into the data registry and identified 85,201 people with epilepsy, along with their siblings (80,511 individuals) and offspring (98,534 individuals).

Each person with epilepsy was compared with five other people of the same sex, similar age, and from the same country. The siblings of the people with epilepsy were compared with siblings and offspring of people without an epilepsy diagnosis.

Over the course of the 6-year follow-up, 1,381 of the participants with epilepsy and 700 of the people without epilepsy were diagnosed with autism.

The results show that people with epilepsy have an increased risk of being diagnosed with autism - 1.6 percent compared with 0.2 percent. The highest increased risk was seen in those diagnosed with epilepsy while in childhood (5.2 percent).

When the relatives of individuals with epilepsy were studied, they found a 63 percent increased risk of developing autism for siblings and offspring. The effect was most marked in the offspring of mothers with epilepsy, who had a 91 percent increased risk; offspring of fathers with epilepsy had a 38 percent increased risk.

#### Why the link between autism and epilepsy?

The findings mark another step toward understanding the relationship between the two disorders. By uncovering the similarities and links between them, researchers hope to gain a stronger understanding of the mechanisms at play in both conditions and, eventually, how they can best be treated.

As Dr. Sundelin says: "The goal is to find out more about how these two diseases may be linked so that treatments may be developed that will target both conditions."

Why autism and epilepsy share common ground is not yet understood. Some scientists theorize that they might have a shared genetic basis. For instance, there has been some interest in the roles of GABA receptor genes and sodium channel genes in both epilepsy and autism. Other mutations in synapse-forming genes, including neuroligins, neurexins, and SHANK-3, have also been investigated as possibilities.

Alternatively, some researchers think that there might be a causal relationship; perhaps the seizures, in some way, produce the autistic features by damaging particular parts of the brain. This opens up the possibility that by treating epilepsy more effectively, autism diagnoses might be reduced. However, the results of the current study show that if there is a causal relationship, it is not the whole story.

Whether epilepsy drugs might reduce autism or vice versa is another question awaiting an answer. The relationship, as welldocumented as it is, still holds a raft of mysteries.

> June 16, 2016 Tim Newman, Medical News Today http://www.medicalnewstoday.com/articles/310983.php

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# Happy Ending for 'Britain's Loneliest Dog' After She Lands a Top Role in the Next Transformers Film After Being Rejected More Than 18,000 Times at Animal Shelter

Britain's loneliest dog is to star in the fifth Transformers movie. Freya, a six-year-old Staffordshire bull terrier cross, has been over-

looked by more than 18,000 potential families who have visited her rescue centre. It led to a Facebook page being set up which gained a rapid following and was noticed by the movie's director Michael Bay.

The animal loving film-maker has now cast her in the fifth instalment of the franchise, which is due to start shooting this summer. And if he can't find a home for Freya, who suffers from epilepsy, he has promised to take her in to his home in Miami. The shelter has welcomed the intervention from Bay, who has two bull-mastiffs, Bonecrusher and Grace - named after characters in his own movies Transformers and Armageddon.

A spokesman for Freshfields Animal Rescue Centre told <u>The Mirror</u>: 'We have had a fantastic response to our appeal for a new home for Freya, with lots of interest shown from around the world as well as closer to home in the UK.' 'We are thrilled at the opportunity of a movie deal for Freya and at such interest and support from a major film director who is also a dedicated animal advo-



cate.' Freya was brought in as a young stray but was recently been diagnosed with epilepsy, leaving her carers more anxious than ever that she will never find a loving home. Deputy kennel manager Kate Jones, 35, said: 'She has been here many years now and is constantly overlooked, which breaks our hearts as we adore her. 'We do not understand why she has been overlooked for so long. "Every year we update her age on the website and it absolutely breaks our hearts to see her getting older and has never had a home. 'She is a beautiful girl, so loving and friendly. She is our big baby."

Kate worried that Freya's epilepsy, which requires medication to manage and blood tests every three months, would put off potential owners. Freya was previously seeking an adult-only home with no other furry friends, so it is unclear if Mr Bay's home - which his other dogs - will suit. The shelter said she will require an owner with patience while she adapts to being in a home for the very first time.

Kate added: 'She loves a fuss and getting her belly tickled. 'Her bursts of love when she sees someone is just pure excitement as she loves people so much. Once she has calmed down she will happily lie next to you getting fussed for as long as you will stroke her for. 'Freya has so much potential, she just needs someone to give her that chance. She may take a few weeks to settle and calm down, but that is understandable after her poor start to life. 'We are sure that she will make the most wonderful friend if only someone will give her the chance she so desperately needs and deserves.'

James Dunn for Mail Online

http://www.dailymail.co.uk/news/article-3624052/Happy-ending-Britain-s-loneliest-dog-lands-role-Transformers-film-rejected-18-00-times-animal-shelter.html

# Rapper Lil Wayne Suffers 2 Epilepsy Seizures During Cross-country Flight, Causes Emergency Landing of Plane

Similar to what happened to Prince who had a medical emergency during a flight, rapper Lil Wayne had two seizures which made it necessary for his private plane to make an emergency landing on Monday. The jet made two emergency landings in Omaha, Nebraska so the rapper could be rushed to a hospital for treatment.

TMZ reports that Wayne had an epileptic seizure minutes after the airplane took off. He initially refused medical treatment during the first seizure, but the flight crew decided to land and rush him to the hospital after the second seizure when he passed out. Lil Wayne says he had numerous seizures in the past due to his epilepsy, he just kept his medical condition private. "This time it got real bad because I got three of them in a row, and on the third one, my heart rate went down to, like, 30 percent. Basically, I could've died soon. That's why it was so serious," the rapper says, quotes Mashable.

According to the Epilepsy Foundation, seizures – which take different forms and affect patients in different ways – could be caused by interruption of blood supply, high fever, sleep deprivation, lack of oxygen, trauma, infection of the brain and poisons. The 33-year-old musicians was traveling to California from Milwaukee when he blacked out. In 2012, his plane had also to make an emergency landing because of a seizure, while in 2013, Lil Wayne was hospitalized for one week due to back-to-back seizures. Lil Wayne said a few years ago that due to his medical condition, he quit drinking, but on Sunday night, he was seen double cupping in Milwaukee. But his representative, in a statement, claimed that the rapper suffered only a minor seizure, and he is now in a stable condition. "Under the guidance of his own doctors, he is now in stable condition and good spirits. He thanks his fans for their everlasting support, prayers and well wishes."

Vittorio Hernandez, International Business Times

http://www.ibtimes.com.au/rapper-lil-wayne-suffers-2-epilepsy-seizure-during-cross-country-flight-causes-emergency-landing

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### Discussing The Impact of Epilepsy on Sexual Function

Doctors should be pro-active in discussing the impact of epilepsy on sexual function and gender-related issues, said Gerhard Luef at the 2nd congress of the European Academy of Neurology in Copenhagen.

People with epilepsy tend to be reluctant to discuss sexual health problems during their neurology appointment and will instead seek medical advice from other healthcare professionals who may not have the knowledge to recognise and deal with the problem. 'Women who are having problems related to sex may seek the advice of their gynaecologist. But the gynaecologist may not have knowledge about, for example, temporal lobe epilepsy or the relationship between anti-epileptic drugs and hormone levels,' said Dr Luef of the Medical University Innsbruck, Austria.

'Men will say nothing. It is only when we put flyers in the waiting room that patients pick them up and bring them into their appointment. Then we know to start a conversation.'

Epidemiological studies show little difference in the incidence of epilepsy in men and women, but there are significant differences in the impact on the two different sexes, Dr Luef told delegates. Differences arise due to biological differences between the sexes, epilepsy drug interactions due to hormonal levels and also the social impact of the condition.

'Women with left temporal lobe epilepsy tend to have a higher rate of polycystic ovary syndrome. This is particularly so if there are also issues around being overweight, with a higher hip to waist ratio. This may also impact on fertility. 'In some men, epilepsy may contribute to erectile dysfunction and changes in the structure of sperm.'

Dr Luef said that when treating women, doctors should screen for menstrual cycle irregularities, checking seizure diaries for the occurrence of seizure clusters. They should also measure progesterone levels in the serum. Increased progesterone levels can increase hyperactivity in the brain and lead to seizures.

Doctors should encourage weight reduction where appropriate and look at changing epilepsy medication if necessary. Family planning and advice around treatment and the potentially harmful effects of sodium valproate to a baby exposed to the drug during pregnancy, should also be discussed.

'If a young woman is newly diagnosed with epilepsy, I would avoid prescribing sodium valproate due to its risk of teratogenicity,' he said. 'However, sometimes we have few options. If sodium valproate is the only choice, I would try and prescribe the lowest dose possible and keep below 1000mg a day.

'Where a woman has catamenial epilepsy linked to her menstrual cycle, she should be advised that this is likely to get better after the menopause.'

June 9, 2016

Nicola Swanborough, Epilepsy Society

https://www.epilepsysociety.org.uk/discussing-impact-epilepsy-sexual-function#.V2xCmlL2aM8

### **Need Prescriptions Filled?**

We recommend the following Pharmacists, who support the programs of the EEA. For all your Pharmacy needs, visit their friendly, helpful staff today.

<u>Southside</u>

G & E Pharmacy

7326-82nd Avenue



<u>Central</u>

Royal Pharmacy

Ground Floor, 11010-101 Street

780-426-0872



# **Our Programs and Services**



- ◆ Free "Kids on the Block" puppet presentations that educate children (and their teachers, administrators, caregivers, and group leaders) about kids with Epilepsy in an entertaining manner;
- ♦ Free specially-tailored In-services about Epilepsy to schools, businesses, group homes, Public Service bodies, Colleges, etc. (includes annual training for NAIT EMT students and ETS Supervisors and Security Personnel, and on-line information about Epilepsy on the EPS Training System)
- ♦ Twice-yearly no-cost Epilepsy Educational Forums, both of interest to Health Care Professionals as well as the General Public;
- ♦ Free provision of our series of 12 Epilepsy Education Information booklets to Members, Hospitals, Clinics, Neurologists' Offices and Pharmacies;
- ♦ Website, print and video information about Epilepsy, and a free lending library for members;
- ♦ Bi-monthly newsletter for Members that includes the latest current medical information available about Epilepsy, as well as current news about the Association and our services and events;
- ◆ Scholarship Program for Post-secondary Students with Epilepsy (minimum two scholarships a year);
- ♦ Garry Hannigan Memorial Life Enhancement Scholarships for Youth, to assist young people (up to the age of 18) to participate in sports, arts, cultural or recreational activities that will enhance their development as individuals;
- ♦ No-cost Counselling on Epilepsy-related problems for people with Epilepsy and families of people with Epilepsy, with referrals to other supporting Agencies as needed;
- ◆ Monthly group sessions geared toward Adults with Epilepsy and concerned family members;
- ♦ Information and support for Parents/Caregivers of Children with Epilepsy;
- ♦ No-cost provision of assistance/advice on diverse matters, including, but not limited to, finding employment, driving and Epilepsy, potential side-effects of medication, and dealing with the complexities of Government forms and applications (AISH, Disability, housing subsidy, etc);
- No-cost advocacy on behalf of people with Epilepsy experiencing discrimination or other problems;
- ♦ No-cost social and recreational activities for Members that help reduce social isolation, free ETS Bus Training, and free "Donate-a-Ride" Program bus tickets for Members in need;
- ♦ An annual no-cost in-house Collective Kitchen Cooking Training Program, An Annual Collective Gardening Program and an annual in-house Computer Training Program for Members;
- ♦ Ongoing recruitment and screening of quality Volunteers, annual recognition of all Volunteers, and annual award of Member-nominated Volunteer-, Achiever-, and Employer-of-the-Year Awards.



Edmonton Epilepsy Association 11215 Groat Road NW Edmonton, AB T5M 3K2

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If you are planning to move in the near future please inform our office so that we can continue to ensure that you get your newsletter...