

MAY - JUNE 2017



FOCUS ON EPILEPSY



THE NEWSLETTER OF THE EDMONTON EPILEPSY ASSOCIATION
The Epilepsy Association of Northern Alberta - Our 57th Year of Service

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

Member Outings & Activities

May

Fun BINGO for Prizes
Friday, May 19th, 1:00 - 3:00 p.m.
(Pre-register by Noon, May 17th)



June

Visit to the Valley Zoo
Sunday, June 11th, 2:00 - 5:00 p.m.
Valley Zoo,
13315 - Buena Vista Road
(Pre-register by June 7th)

Fun BINGO for Prizes
Friday, June 30th, 1:00 - 3:00 p.m.
(Pre-register by Noon, June 28th)



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.**

**May 9th, 2017
June 13th, 2017**

FREE MEMBER ACTIVITY



Visit to Edmonton Valley Zoo

Sunday, June 11

2:00 - 5:00 pm

Pre-register by June 7th)

EEA Garage Sale

The EEA will be having its Garage Sale out of the garage behind the Office at 11215 Groat Road on Friday and Saturday, May 26th and 27th. Donations of clean, saleable goods for the sale will be much appreciated. If you wish to donate, please contact us and let us know. No clothing or books please.



Sale Hours are:

Friday, May 26th,

10:00 a.m. - 7:00 p.m.

Saturday, May 27th,

9:00 a.m. - 5:00 p.m.

Collective Garden/Vegetable Gardening Tips



Please join Master Gardener and EEA Member, Irene Szkambara, for a "Garden Talk and Work Bee on May 29 @ 1:00 p.m. at the EEA Office. We will be working the raised plots in the backyard, preparing the soil, then laying out and planting according to the Square Foot Gardening Method, developed by gardener and author Mel Bartholomew. The idea is that growing food in squares instead of rows allows for growing more food in a smaller space.

The concept of interplanting—where the growing habits of each vegetable are considered so neighbouring plants are not hindered will be considered. Even if you're not interested in maintaining a garden plot this year, you are welcome to participate in the Square Foot Gardening Talk. Just call the EEA Office to let us know you're coming.

We still have one garden plot available. Please call the EEA Office to reserve this last plot, and to register for our Planting Bee.



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...Cameron Reid
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Erin Duke	Craig Heyland
Colleen Matvichuk	Tim McCallen
Anne Starreveld	Katrina Van Den Berg
Brian Wilkie	

STAFF

Gary Sampley... Executive Director & Chief Operating Officer
gary@edmontonepilepsy.org

Sharon Otto... Program Manager & Education Coordinator
sharon@edmontonepilepsy.org

Dr. Sunny Kim... Counsellor
sunny@edmontonepilepsy.org

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

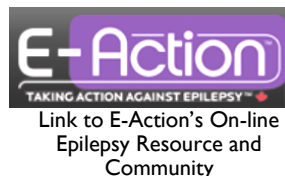
Edmonton Epilepsy Association The Epilepsy Association of Northern Alberta

11215 Groat Road NW
Edmonton, AB T5M 3K2



(780) 488-9600
(780) 447-5486 fax
1-866-EPILEPSY

info@edmontonepilepsy.org
www.edmontonepilepsy.org



Edmonton Epilepsy Association

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

Our 2016 allotment of Donate-A-Ride bus tickets is now depleted. We expect to receive our 2017 ticket allotment the first week in May. 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 qualify for 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.

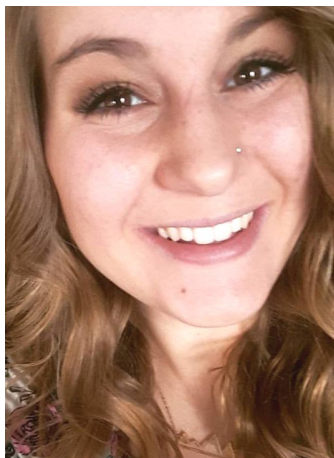




Congratulations to our 2017 \$1000 EEA Continuing Education Scholarship Winners



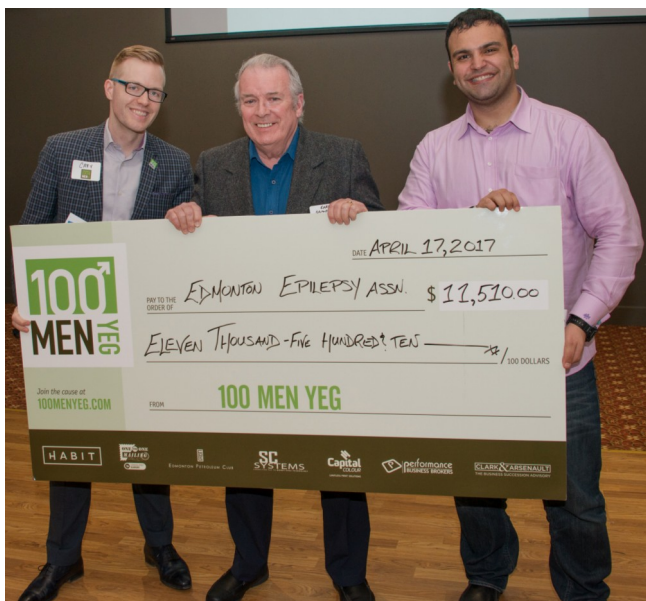
Meghan Hodgson



Katie Tilbury



Michelle Chin



100 Men YEG Donation

On April 17th, EEA Executive Director Gary Sampley was invited to speak at 100 Men YEG, along with two other non-profit organizations. 100 Men YEG is a group of 100+ men who meet quarterly. At each meeting, every member donates \$100 to a non-profit organization. After hearing each of the three charities make a 5 minute presentation on their work, the 100 Men YEG take a vote. The winning charity wins that night's donations. EEA was awarded the Spring 2017 Donations which amounted to \$11,510. Gary is shown accepting the cheque from 100 Men YEG. Way to go Gary!

Anne Gillie, World Traveller

Pictured is Ann Gillie, long time EEA Board Member. Ann was invited to speak at the World Congress on Neurology and Therapeutics held in March in Madrid, Spain.





News from the EEA Office

Purple Day News



Marcel Allen (Guest from Ottawa), Dr. Elout Starreveld, EEA Executive Director Gary Sampley and Board President Cheryl Renzenbrink watch as Health Minister Sarah Hoffman proclaims the first ever Epilepsy Awareness Day in Alberta. On the right is the actual wording of the Declaration.

Declaration

WHEREAS epilepsy can affect Albertans at any age, as a condition present at birth or developing naturally later in life, or as a consequence of accidental head injury, stroke or other causes; **WHEREAS** Albertans with severe epilepsy live in circumstances of economic insecurity, and be subject to discrimination based on misunderstanding of their condition; **AND WHEREAS** programs of assistance offer hope and support for Albertans with epilepsy and their families through public education, fundraising, recreational activities and research; **THEREFORE I, SARAH HOFFMAN, MINISTER OF HEALTH, DO HEREBY DECLARE MARCH 26, 2017 AS EPILEPSY AWARENESS DAY IN THE PROVINCE OF ALBERTA.**

Dated this 23rd day of March 2017.



Purple Day at the Strathcona Farmer's Market

Pictured is Cam Read, long-time EEA Volunteer standing in front of the EEA Information Table at the Strathcona Farmer's Market on Saturday, March 25th.

High Level Bridge

Once Again the High Level Bridge was lit up in purple for Purple Day on the evening of March 26th.





A Message From Dr. Elout Starreveld, Now Retired

28 April 2017

Dear Patient,

After forty years, my time has come to retire from my Neurology Practice as per May 31, 2017. Your medical records will be transferred from our present computer system to an external hard drive in my custody. The physicians who referred you to see me have all the consultation reports that I sent after your visits. Additional records such as laboratory and radiology records are also available on Netcare which can be accessed by your family physician.

If you require copies of your records saved in our computer data system after May 1, 2017, you have to request this in writing as required by the College of Physicians and Surgeons of Alberta. The mailing address will be Hys Centre, Suite 207, 11010-101 Street, Edmonton, AB T5B-4H9.

Depending on your neurological condition, arrangements will be made for continuing care as much as possible. If your condition has been stable you should continue seeing your family physician. If your condition is not stable (ongoing epileptic seizures or a diagnosis of multiple sclerosis or Parkinson's disease) attempts will be made to refer you to another neurologist.

Thank you for the opportunity to participate in your medical care. I extend my best wishes to you.

Kind regards,

E. Starreveld, MD FRCP(C)

A Special Presentation At Calmar Elementary School

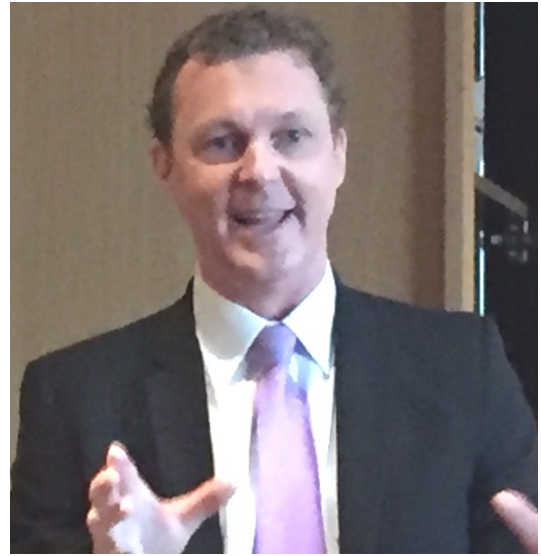
In November of 2016, the Kids on the Block Puppet Troupe performed at Calmar Elementary School. After the presentation, the school decided to do a fundraiser to raise awareness of epilepsy within the school community. For Purple Day, the students sold purple cupcakes and raised \$665.66 for the EEA. Gary and Gio travelled to Calmar on May 3rd to thank the students and staff and were given the cheque during their monthly school assembly. Thank you Calmar Elementary!



Gary and Gio with representatives from each class in the school.



"Help Seize The Day"





EEA Fundraising Event, March 23rd, 2017





Stimulating The Brain With Electricity Could Help People With Dementia And Epilepsy To Store New Memories

Stimulating the brain with electrical signals could help people suffering from memory loss to remember new events. Researchers found deep brain stimulation with electrodes helped people who usually struggle to remember things to create new memories. The discovery could one day be used to help people suffering from conditions such as dementia and epilepsy, the researchers claimed.

The researchers, from the University of Pennsylvania studied the brains of 102 patients being treated for drug-resistant epilepsy. Epileptic people often suffer from memory problems as a result of frequent seizures. Scientists recorded electrical activity from electrodes implanted in the patients' brains. They found electrical stimulation that is delivered when the brain is likely to fail can improve memory function. But stimulation stops the brain from recording new memories when it is working normally.

'We found that, when electrical stimulation arrives during periods of effective memory, memory worsens,' said Professor Michael Kahana, who led the study. 'But when the electrical stimulation arrives at times of poor function, memory is significantly improved.' This suggests electrical stimulation can jolt the memory process of the brain into action, he said. "In showing that stimulation improved memory in low encoding states and disrupts memory in high encoding states, the findings suggest that stimulation alters the ongoing course of memory processing in the brain," the scientists said in their research paper. As part of their study, the scientists isolated parts of the brain that are thought to be associated with storing memories. They used artificially intelligent software to analyse the behaviour of cells in the brain.

"By applying machine-learning methods to electrical signals measured at widespread locations throughout the human brain we are able to identify neural activity that indicates when a given patient will have a lapse of memory encoding," said Dr. Youssef Ezzyat, who also worked on the study. They used their results to decide which parts of the brain to stimulate with electrical signals.

The researchers hope gaining insight into the memory process could improve the lives of patients with traumatic brain injury or neurological diseases, such as Alzheimer's. Professor Daniel Rizzuto, who also worked on the study, said: "Technology based on this type of stimulation could produce meaningful gains in memory performance, but more work is needed to move from proof-of-concept to an actual therapeutic platform."

Daisy Dunne

April 20th, 2017

<http://www.dailymail.co.uk/sciencetech/article-4429064/Brain-electric-stimulation-help-people-create-memories.html>

Young Adults With Uncomplicated Epilepsy Fare As Well As Their Siblings

A 15-year follow-up study of young adults with epilepsy found that those with uncomplicated epilepsy who were seizure-free for five years or more did as well as their siblings without epilepsy in measures of education, employment, family arrangements and driving status. Youth with complicated epilepsy had worse social outcomes and were less likely to drive, even if living without seizures. Results were published in the journal *Epilepsia*.

"So far there has been conflicting data on whether adults with uncomplicated childhood-onset epilepsy have worse social outcomes compared to people without epilepsy," said senior author Anne T. Berg, PhD, from Stanley Manne Children's Research Institute at Ann & Robert H. Lurie Children's Hospital of Chicago. "Our study provides further evidence that children growing up with uncomplicated epilepsy who stay seizure-free have a favorable prognosis. However, if they do not achieve five-year seizure remission, young adults with uncomplicated epilepsy are less likely to drive and graduate high school. They also tend to be less productively engaged and not live independently. These results show how critically important it is to control seizures." In the study, patients with epilepsy were designated as having "uncomplicated" disease if they had no other neurologic impairments, no intellectual disability and no history of conditions such as meningitis or stroke that might have caused epilepsy. Researchers conducted structured interviews with 361 individuals with epilepsy and 173 siblings without epilepsy to compare their social outcomes. Participants were enrolled in the Connecticut Study of Epilepsy, a community-based study of individuals with childhood-onset epilepsy who were followed since diagnosis.

"The fact that teens with uncomplicated epilepsy who were seizure free finished high school at rates comparable to their siblings might be a reflection of the special education services many of them have received," said Berg, who is also a Research Professor of Neurology at Northwestern University Feinberg School of Medicine. "These services can have tremendous impact."

April 24, 2017

<https://www.sciencedaily.com/releases/2017/04/170424172138.htm#WP-IXI7ufY.email>





Epilepsy: Another Potential Zika Threat To Babies

Beyond its known links to birth defects and other problems, the Zika Virus may also trigger cases of epilepsy in infants, warn experts from the U.S. Center for Disease Control and Prevention. Among 48 babies from Brazil with probable congenital Zika infection, "50 percent reportedly had clinical seizures," said Dr. Daniel Pastula, Dr. Marshalyn Yeargin-Allsopp and Rosemarie Kobau. All three have studied Zika at the CDC, and co-wrote an essay on the Zika-epilepsy connection, published online April 17 in *JAMA Neurology*.

The Zika virus is transmitted via mosquito bites, and its most devastating effects occur when pregnant women are infected. In those cases, Zika can trigger severe neurological birth defects such as microcephaly, where infants are born with underdeveloped skulls and brains. Thousands of such cases have occurred in South America, most notably in Brazil. And other pediatric defects and illnesses linked to Zika are emerging. According to the CDC team, besides the group of 48 babies cited above, seven of another group of 13 Zika-exposed babies in Brazil were also diagnosed as having epilepsy. The finding isn't overly surprising since the types of brain abnormalities seen in Zika-affected newborns have been linked to seizures and epilepsy in the past, the team noted.

In a prior study, babies exposed to another common virus, called cytomegalovirus, had higher rates of epilepsy as well—and showed brain abnormalities that were similar to those associated with Zika. All of this points to "the need to examine how and to what extent congenital Zika virus infection and resulting brain abnormalities are associated with seizures and/or epilepsy," the CDC authors wrote.

Early diagnosis of affected babies is crucial, the researchers added, and may lessen "some adverse outcomes associated with developmental delay." Right now, parents and health care professionals may not be aware of the Zika-epilepsy link, the CDC researchers said, so cases "may be misdiagnosed or under-reported." The researchers believe that heightened awareness will be key to spotting cases of epilepsy linked to fetal exposure to Zika and helping babies. In a statement, the CDC said that "better recognition, diagnosis, and reporting of seizures and epilepsy in infants and young children will help guide interventions to make sure families receive the right support and treatment."

April 17, 2017

<https://medicalxpress.com/news/2017-04-epilepsy-potential-zika-threat-babies.html#iCp>

Higher Body Mass Index in Pregnancy Increases Child's Risk of Epilepsy

Epilepsy is a syndrome characterized by recurrent and unprovoked seizures. Although it is one of the common neurological disorders encountered by clinicians, the exact cause and pathophysiology underlying this syndrome are still poorly understood. There are several factors which are proven to increase the risk of developing this syndrome, such as preterm birth, low birth weight, genetic abnormalities, and low APGAR scores at birth. However, the association between high body mass index during pregnancy and subsequent development of epilepsy among their offspring remains to be unknown.

In a recent article published in the *Journal of American Medical Association*, a group of researchers did a retrospective study in an attempt to determine whether an increased body mass index (BMI) in pregnancy would increase the risk of developing epilepsy in newborns. Medical records from 1,441,623 live, single births delivered in Sweden at 22nd week of gestation and beyond were reviewed. Both maternal and infant data were gathered for this study. Neonatal birth weight, sex, gestational age, birth trauma and presence of other conditions or congenital malformations were included in the infant characteristics. Maternal data reviewed included BMI during pregnancy, age at delivery, country of origin, year of delivery, educational status, smoking during pregnancy, and prior diagnosis of epilepsy. Records with missing information such as maternal BMI and patient registration numbers were excluded in the study. Children who died before the age of 28 days were also excluded. In the end, a total of 1,421, 551 births were included in the statistical analysis.

The results show that being obese or overweight during pregnancy is associated with the development of epilepsy in the newborn, with greater risks related to higher body mass index. Measures designed to prevent this modifiable risk factor can subsequently lead to a decrease in the incidence of childhood epilepsy.

Karla Sevilla

April 28, 2017

<https://www.medicalnewsbulletin.com/higher-body-mass-index-pregnancy-increases-childs-risk-epilepsy/>





Treating Pediatric Epilepsy with Medical Cannabis: A Brief History

There has been a relatively recent surge of interest in using medical cannabis to treat pediatric epilepsy, which has created a firestorm between U.S. lawmakers and parents and caregivers, who are demanding access for their children. But the promise of cannabis treatment for epilepsy is nothing new – in fact, using cannabis to treat pediatric epilepsy was first brought to light thousands of years ago. Reflecting on this history may help understand the situation we've ended up in today.

Medical cannabis in ancient times

Cannabis was first used for medicinal purposes in China around 2700 BCE. Following suit, people in the Middle East, India, and Egypt also began incorporating cannabis into medical remedies. However, an Arabic physician named al-Mayusi is first credited with advocating for the use of cannabis to treat epilepsy in the 11th century.

East to West

Sir William Brooke O'Shaughnessy, considered the founder of medicinal marijuana, brought cannabis to Europe in the 19th century following his studies in India. He published a case report of a 40-day-old infant who he successfully treated with a cannabis tincture. Following O'Shaughnessy's findings, Sir William Gowers and Sir John Russel Reynolds treated epilepsy patients with cannabis as an adjunctive treatment to bromide, an anticonvulsant used at the time.

Twentieth-century pharmaceuticals

By the 20th century, cannabis had made its way to North America, and, in the 1930s and 1940s, researchers began studying cannabis compounds and isolating them for pharmaceuticals. However, in 1970, the US Controlled Substance Act prohibited cannabis use and production in response to a troubled sociocultural climate. So while science was making breakthroughs in understanding the molecular structure of cannabis compounds, those who could potentially benefit from the drug were prohibited from taking it. However, science persisted, and a few clinical trials were conducted to test the safety and efficacy of cannabis for epilepsy. Sidney Cohen published the first study on cannabis and epilepsy in 1976.

Where we stand today

In the 1990s, researchers discovered how cannabis receptors work in the brain, a tremendous advancement in our understanding of how cannabis can be used to treat epilepsy. Additional research also showed that cannabidiol (CBD) was effective in reducing seizures in animal models as well as in human clinical trials.

But now it's 2017, nearly 30 thirty years later. As a fallout from the infamous Drug War, medical cannabis use remains prohibited in many U.S. states; even in states where medical cannabis is legal, there are different rules and regulations that may limit access to the drug.

We are closer than ever to getting a clinically proven cannabis treatment approved by the FDA — which is its own potential controversy — but at least there are now several trials underway testing the effects of cannabis on pediatric epilepsy.

Fighting for their children

For some parents and caretakers, waiting a year or several years until drugs are FDA-approved is simply not good enough for their children who need help right now. Several anecdotal stories have emerged in the media in which parents and caretakers have traveled thousands of miles and risked legal consequences to obtain medical cannabis for their children.

A recent statement from the American Epilepsy Society (AES) offers the following for parents and caregivers: "The anecdotal reports of positive effects of the marijuana derivative CBD for some individuals with treatment-resistant epilepsy give reason for hope. However, we must remember that anecdotal reports alone are not sufficient to support treatment decisions...AES urges all people touched by epilepsy to consult with an epilepsy specialist and explore the many existing treatment options, so that they can make informed decisions with their specialist that weighs the risks and benefits of the different treatment options."

Hopefully, in a year or two, we will realize a future of cannabis and pediatric epilepsy following the approval of new, cannabinoid-based therapies.

Loren DeVito
April 13, 2017

<https://www.ganjapreneur.com/treating-pediatric-epilepsy-with-medical-cannabis-a-brief-history/>





Man Who Sent Flashing 'GIF' Image On Twitter to US Political Journalist With Photosensitive Epilepsy Has Been Charged

Last month, a man accused of sending a tweet with a flashing image to a US political journalist with photosensitive epilepsy was arrested. John Rayne Rivello, 29, was charged with criminal cyber (online) stalking. If found guilty, Mr. Rivello could face a sentence of 10 years in prison.

According to the allegations, in December 2016, Kurt Eichenwald, senior writer for *Newsweek*, received a tweet with an animated flashing image (also known as a GIF). Mr. Eichenwald said that opening the image triggered a tonic-clonic seizure. He reported the incident to the Federal Bureau of Investigation (FBI).

According to the allegations, the tweet was sent by Mr. Rivello with the intention of causing a seizure. The image reportedly contained the words 'you deserve a seizure for your posts'. It was made up of fast flashing strobe lights and bright colours on a loop. In a statement, the US Department of Justice said the FBI carried out investigations in the lead-up of Mr. Rivello's arrest. They reportedly found messages suggesting an intent to cause a seizure, information about seizures and a fake obituary for Mr. Eichenwald on Mr. Rivello's online iCloud account.

Mr Eichenwald has not hidden his epilepsy and has previously written about his experiences with the condition for *The New York Times Magazine*. While the reason has not been made clear, reports suggest that the alleged attack may have been motivated by differing political views.

Chantal Spittles, from Epilepsy Action, said: "While deliberate attacks such as this are relatively rare, people with epilepsy can still be vulnerable to potentially harmful abuse on social media. Sending someone a tweet with a deliberate intention to cause a seizure is not only awful and insensitive, but it is another form of physical assault. In the worst case scenario, it could result in someone with photosensitive epilepsy seeing the tweet and having a potentially fatal seizure.

"We would urge anyone to report immediately any abusive activity they see on social media, epilepsy-related and otherwise. Epilepsy Action is currently working with Twitter to increase safety for users and improve reporting procedures should any attacks like this occur in the future." The court case continues.

There is more information on photosensitive epilepsy on the Epilepsy Action website. You can switch off the auto-play setting on Twitter to prevent GIFs and videos playing automatically. You can do this by going into your settings and switching off the video autoplay option. Google also offers an add-on that you can download to your machine. It allows you to control GIF and moving image settings and gives the option to disable all moving images.

Jasmine Forrest
April 27, 2017

<https://www.epilepsy.org.uk/news/news/man-who-sent-flashing-gif-image-twitter-us-political-journalist-photosensitive-epilepsy>

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.

Southside

G & E Pharmacy
7326-82nd Avenue



Central

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

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...*