Funding Supports Research into SUDEP

Stuart Cain, PhD, Michael Smith Laboratories & Djavad Mowafaghian Centre for Brain Health University of British Columbia

In June 2014, I received a two-year research fellowship from the BC Epilepsy Society. This \$130,000 grant will be used in its entirety to study the mechanisms involved in initiating generalized convulsive seizures and Sudden Unexpected Death in Epilepsy (SUDEP). In 2011, I was awarded a joint post-doctoral fellowship from the BC Epilepsy Society and the Michael Smith Foundation for Health Research partnership program to investigate the cause of seizures in a genetic rodent model of absence epilepsy. This led to the publication of several scientific manuscripts, including the discovery of a new treatment for seizures [4] and identification of altered single nerve cell activity in rodents with genetic seizures [1]. The funding I have received from the BC Epilepsy Society is decisive for my research in furthering our understanding of epilepsy in the process of developing new and better drug therapies.

Our new project, funded by the BC Epilepsy Society, involves the study of a new mouse model of convulsive and potentially lethal seizures. These mice have a mutation in a protein used to allow calcium ion flow across the cell membrane, called a calcium ion channel. This specific calcium channel is called $\rm Ca_{\rm V}2.1$ or PQ-type, and is known to be particularly important in allowing communication between nerve cells in the brain. Calcium flow into cells can cause over-excitability with the potential to promote seizures. Furthermore, we believe that the mutation in the calcium channel is allowing excessive communication between nerve cells, which may be responsible for the seizures and movement defects that we have observed in these mice.

Our research strategy is to monitor brain activity in these mice while simultaneously videorecording their movement. We intend to capture the occurrence of seizures and determine what brain regions are involved in starting and propagating seizures. This information will allow us to better understand what occurs in the brain during some types of generalized convulsive seizures and identify the regions involved, with the aim of comparing this to data from patients.

These mice also die at a young age, and so we want to find out if they are dying due to fatal and severe seizures. Alternately, death may occur during a seizure-free period, which would be valuable information in understanding the cause of SUDEP, which is defined as sudden, unexpected, witnessed or unwitnessed, non-traumatic, and non-drowning death in a patient with epilepsy [3]. SUDEP is likely the most common cause of epilepsy-related death, affecting approximately 1 in 1000 people with epilepsy every year [2]. Despite this rate of occurrence, the mechanisms underlying SUDEP are poorly understood, with few accurate animal models of the disorder available for research. If these mice are dying in seizure-free periods, they may provide a highly valuable model for studying the cause of SUDEP, which we could use to find drugs that prevent it.

Once we have determined the brain regions involved in, and the timing of, seizures in these mice, we intend to find out which new and existing drugs can suppress or prevent seizures and attempt to prolong their life. We will start by testing Z944, a new epilepsy therapy in early-stage clinical trials, known to affect calcium channel activity. Another drug to be studied is pregabalin (Lyrica) that is currently used as an add-on therapy for focal epilepsy

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"We intend to capture the occurrence of seizures and determine what brain regions are involved in starting and propagating seizures."



in patients and is believed to affect $\mathrm{Ca_v}2.1$ calcium channel function. While this is a starting point for our drug therapy investigations, we hope to continue to test other new and existing therapies using this model.

To conclude, the funding provided by the BC Epilepsy Society will be put to good use in our efforts to better understand the causes of epilepsy and find new drugs to treat seizures. I hope that over the next few years the research that we're undertaking at the University of British Columbia will continue to provide new insights and targets in the fight to cure epilepsy.

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Grant to Vancouver General Hospital Epilepsy Program

In June, our Board of Directors approved and disbursed the largest grant in our history: \$150,000 to the Vancouver General Hospital (VGH) Epilepsy Program in support of the placement of a Clinical Psychologist in their clinic for two years.



BC Epilepsy Society Board Chair Cyrus Irani presents the cheque for \$150,000 to Stephanie Forgacs from the VGH/UBC Hospital Foundation.

The Clinical Psychologist being recruited to the Epilepsy Program will help improve the quality of life of people with epilepsy and their families by providing psychological treatment to those who struggle with mental health issues such as anxiety, depression, or adjustment issues related to their epilepsy.

In addition, the Clinical Psychologist will work with people who have been diagnosed with psychogenic non-epileptic seizures to help them and their families understand and manage the diagnosis through exploration and treatment of the possible psychological causes of these events.

Eight New Scholarships Awarded

In August, the BC Epilepsy Society awarded eight \$1,000 scholarships to BC students studying at a post-secondary institution.

All eight scholarships were awarded in memory of Jaymie-Lynn Robertson, whose family and friends donated thousands of dollars to support our scholarship program.

The scholarship recipients range in age from 17 to 28. They'll be entering or continuing their post-secondary studies in a range of fields, include writing, business administration, machinist technician, music, and early childhood education.

We've awarded 60 scholarships over the past eight years. Application forms for our 2015 scholarships will available through our website in March. They will also be available through our e-newsletter coming out in March or April.

Here are some of the quotes from our scholarship recipients' application essays:

Melissa

"Even though my epilepsy and cerebral palsy have made my life difficult at times throughout the years, I believe that my challenges have only made me stronger. I have become more determined and empathetic because of my epilepsy and my disability. I have also learned that no matter how disabled you are, you still have something to offer society and that we are all an important part of the community. It has also made me realize that almost everyone has something to overcome and that life can be a struggle for all of us."

Mackenzie

"I want to be able to live a life that acknowledges my epilepsy, but is not limited because of my epilepsy."

Fletcher

"Although my diagnosis came as a shock to my family, both they and my teachers created a supportive and safe environment for me. I have been taught to accept that epilepsy will always be part of my life and to approach the challenges that it imposes without embarrassment or shame regardless of society's preconceived notions or the reactions of those around me during a seizure-related episode."

Denise

"While looking in the rear-view mirror of the life I once had, it's easy for me to continuously grieve what I have lost. However, I have realized, more and more, that I need to be looking forward to the future. If I was to be awarded this scholarship, I feel that it would open a new door in my life. It would encourage me to seek what I felt to be lost. It would give me the financial help and stability to unlock that door, turn that page in my story and start a new chapter in my journey."

Annual Lecture Series Continues

2014 continues to be another great year in the delivery of our annual lecture series with five lectures scheduled throughout the year.

We've already had a first-ever lecture on sleep issues led by Dr. James Lee, and a well-attended lecture on women's issues facilitated by Dr. Tiffany Townsend. Dr. Lee's lecture was recorded and is available in streaming video and PowerPoint on our website.

- September 30: genetics and epilepsy, led by Dr. Michelle Demos
- October 20: memory issues for people living with epilepsy, led by Dr. Jing Tan
- November 18: anti-epileptic medications, led by Dr. Sia Michoulas

All lectures start at 7:00 pm and usually last about an hour and a half including time for questions from the audience. We anticipate that all lectures will be held in room 2108 at the Child & Family Research Institute at BC Children's Hospital.

Look for further details in our September, October, and November e-newsletters. There is no charge for current members and a \$10 charge for guests of the Society.

If you have suggestions for future lecture topics, please contact any of the Society staff with your ideas.

Jaymie-Lynn Robertson Scholarships

Speaking of Epilepsy





Family Education Day

In mid-April 2015, staff from the BC Epilepsy Society and the members of the neurology clinic team at BC Children's Hospital will host a Family Education Day in support of anyone living with a seizure disorder.

The day will be divided into two parts. The morning sessions will be applicable to both adults and children living with epilepsy. After the lunch break, there will be separate sessions on adult and child issues.

The event will be held on either April 11 or 18, and the date will be finalized sometime this fall. Registration will be about 8:30 am with a 9 am start. It is scheduled to finish at 4 pm.

The fee will be \$30 or less per person depending on final budget costs. The fee includes lunch and all provided resources.

We will post further information about the event in our e-newsletters in February and March 2015. If you have any questions, contact any of the Society staff at 604-875-6704 or at info@bcepilepsy.com.

Sixth Annual 5K Poker Walk

On May 25 we hosted our Sixth Annual 5K Poker Walk through the beautiful streets of Shaugnessy in Vancouver, in collaboration with Lions Gate Road Runners.

We were priviledged to have our Patron, The Honourable Judith Guichon, Lieutenant Governor of BC, once again attend and participate in the event. Her Honour had the opportunity to speak with all of the participants and volunteers after the event.



Geoffrey Buttner of Lions Gate Road Runners presents a cheque to the Honourable Judith Guichon (left) and BC Epilepsy Society Board member Cindy Devlin.

Our pledge collectors for the event raised thousands of dollars in support of our programs and services. Congratulations and thank you to all those who collected donations.

The Seventh Annual Walk will be hosted on Sunday, May 31, 2015 starting at 8:30 am. It's not too early to start recruiting your team and donors for the event.

Thank you to Lions Gate Road Runners, all the event sponsors, and the volunteers for hosting another great event.

Third Annual Cycle Trek Fund Raiser

On September 6 and 7, BC Epilepsy Society Board member Steven Fruitman led his team of riders on a 200 km cycle trek from White Rock to Cultus Lake in the Fraser Valley and back.



Steven (third from the left) with his teammates at the starting line.

This was the third year that Steve has led his team. He and the team have collected pledges from donors in support of the services and programs of our Society.

You can still make a pledge to the via our website through to the end of September: at www.bcepilepsy.com go to the link at the bottom of the You Can Help column.

More Kids Go to Camp

For the 11th consecutive year, the BC Epilepsy Society supported the cost of sending kids with epilepsy to fully-accessible camps in BC. The available camps include any of the three Easter Seals camps, Camp Eureka, and the Zajac Ranch.

We thank the CKNW Orphans' Fund for financially supporting this program for the fifth consecutive year.

If you are interested in having your child attend a camp in 2015, please contact any of our staff at the BC Epilepsy Society in March or April to get details on camp fee subsidies that will be available.

Start Planning Your 2015 Purple Day Event

Purple Day is an international grassroots effort dedicated to increasing awareness about epilepsy worldwide. On March 26 annually, people around the world wear purple and host events in support of epilepsy awareness.

Across BC, children and adults hosted fund raising and awareness events on March 26 to educate the public and help support the programs we deliver.

Please check our e-newsletters and website starting in January to find out about our 2015 Purple Day contest; we will award great prizes for the best Purple Day ideas and best media coverage of your event.

We thank everyone who participated this year and welcome your ideas for Purple Day events for March 26, 2015. For more information on Purple Day, go to www.purpleday.org.

Our Website Adds New Function and Content

We've made further improvements to our website since we updated you last spring. We've added new and updated information sheets, new translated resources, and new videos and PowerPoint presentations. Please check out the new look and features of our homepage.

We welcome your feedback on both the content and navigation. If you have suggestions, please contact Shawn Laari at laari@bcepilepsy.com.





www.bcepilepsy.com

Genetic Testing in Childhood Epilepsy

by Dr. Sarah Buerki, MD, Swiss Board Certification FMH Pediatrics, (Pediatric Neurology) Visiting Scientist, BC Children's Hospital & University of British Columbia and Dr. Michelle Demos, MD, FRCPC (Pediatrics, Neurology) Clinical Assistant Professor, BC Children's Hospital & University of British Columbia

"Genetic testing is a type of medical test that identifies changes in chromosomes or genes." Epilepsy is one of the most common disorders seen by the pediatric neurologist. Up to 50% of patients in a neuropediatric clinic are followed for epilepsy. The approach to diagnosis and management of children with epilepsy can be challenging for both health care providers and families, particularly if the epilepsy is treatment resistant and of unknown cause (failure of two or more appropriate anti-seizure medications) as it often involves multiple assessments (history and physical by consultants), hospitalizations, investigations, medication trials and even surgical approaches. Investigations include neuroimaging such as magnetic resonance imaging (MRI) and electroencephalography (EEG), and neuro-metabolic testing of blood, urine, and cerebrospinal fluid, but in many cases a cause may not be identified.

In the last two decades major advances in genetic research on the epilepsies have determined that a large proportion has a genetic cause. Rapid progress in identifying genetic causes of epilepsies as well as advances in laboratory techniques has increased the availability of clinical genetic testing in the epilepsies.

What is meant by genetic testing?

Genetic testing is a type of medical test that identifies changes in chromosomes or genes. The results of a genetic test can confirm or rule out a suspected genetic condition or help determine a person's chance of developing or passing on a genetic disorder.

Before a child has a genetic test, the patient and/or his/her parents need to make an informed choice. This involves understanding the testing procedure and its limitations, the benefits and risks of the test, and the possible consequences of the test results. It is important to emphasize the likelihood of a positive test result and potential influence (may be limited) that a genetic diagnosis could have on treatment and outcome.

For certain genetic tests (discussed below: chromosome microarray, whole exome sequencing and whole genome sequencing) the family should also be informed about the possibility of incidental findings unrelated to epilepsy (such as a breast cancer gene). Appropriate information and counselling about testing issues are essential to the decision making process of the family. This often requires the expertise of a genetic counsellor, clinical geneticists or other physician with expertise in genetic testing and the disorder.

The primary risks of genetic testing relate to the potential challenges in interpretation of genetic results along with ethical, social, or legal consequences of genetic testing. This may include the possibility of genetic discrimination with some insurers.

Genetic tests in connection with epilepsy are usually performed on a small sample of blood, or sometimes saliva. Most genetic tests in epilepsy are performed on DNA which is a complex molecule that is the hereditary material in humans and makes up the genes. Post-test genetic counselling is equally important and the test results are usually explained to the patient and/or to his/her parents by the ordering physician and often it is followed by a post-test counseling session with a genetic counselor or clinical geneticist.

Genetic Background of Epilepsies

There are different partly-overlapping categories that describe the genetic background of epilepsy. At one extreme of the spectrum of genetic epilepsies are the monogenic syndromes, in which a single gene mutation or variant (= specific change) either inherited or arising spontaneously (de novo) accounts for the patient's epilepsy features. Today, up to 300 genes are suspected to be so-called epilepsy genes, and this number is steadily increasing. An example for a monogenic epilepsy disorder is Dravet syndrome, which is a severe epilepsy disorder of infancy caused by alterations or mutations in a sodium channel gene, namely SCN1A. On the other exteme the continuum evolves into the complex epilepsies,

including those caused by variants in several genes and little or no environmental contribution. This group includes the common electroclinical syndromes of genetic generalized epilepsy such as childhood absence epilepsy and juvenile myoclonic epilepsy [1]. Copy number variants (CNVs), a form of alteration of the DNA which results in the variation in the number of copies of one or more sections of the DNA, are another important cause in the epilepsies [2].

Modern genetic technologies applied in pediatric epilepsies

In addition to traditional Sanger sequencing, which is used to identify mutations in individual genes linked to epilepsy and related disorders, clinicians are now presented with an expanded repertoire of testing modalities that are able to examine the whole genome (complete set of DNA, including all of its genes). Chromosomal microarray analysis (CMA) is now often the first genetic evaluation conducted in patients with epilepsy, and epilepsy-specific gene panels using the newer technology of next generation sequencing, have also become available to test for sequence variants in multiple epilepsy genes.

The advantage of modern genomic technologies such as next-generation sequencing (NGS), allow for simultaneous sequencing of many genes or exons (coding region of DNA) all at one time. Whole-exome sequencing (WES) is also clinically available is some areas and can provide information about possible disease causing variants in the coding portions (exome) of most genes in the human genome. Whole-genome sequencing, widely used in the research setting, will also probably be available on a clinical basis in the future. It allows examination for possible disease causing variants in the whole genome [3].

Finally, future advances in pharmacogenomics, or the study of how genes affect the person's response to drugs, and part of a new field called personalized medicine, will offer the promise of predicting whether a medication is likely to help or hurt you before you ever take it.

At BC Children's Hospital all patients with treatment-resistant epilepsy or epilepsy associated with developmental delay and/or other neurological abnormalities or congenital anomalies receive CMA analysis. This test is the first-line genomic test and is funded by the provincial health insurance plan. At the patient level, CMA is a very useful clinical test, allowing for identification of causality in approximately 15% of patients [4]. The purpose of an upcoming Epilepsy Genome study at BC Children's Hospital, funded by The Alva Foundation, is to perform targeted WES in children with early onset (<5 years) epilepsy of unknown cause.

We expect the diagnostic yield of WES in this group of patients to be high; recent studies have found that up to $\sim\!20\%$ of patients with severe epilepsy are found to have disease-causing mutations [5,6]. We predict when these genomic studies are used early in the evaluation of these epilepsy patients it will simplify investigations and shorten time to diagnosis, which is important for patients/families and health providers, especially when dealing with disorders whose diagnosis have important implications for clinical management. Since this testing is not routinely available yet in British Columbia, we hope results of this study will also help support its clinical availability in our province.

What are the challenges of genetic testing?

Each genetic testing modality, including newer technologies such as CMA and WES, has its limitations related to the interpretation of molecular findings in a clinical context. A clearly positive result can provide a definitive explanation of the patient's epilepsy. A negative result must be considered within the limits and complexities of the technology and data interpretation, and does not rule out a genetic cause of epilepsy in the individual tested.

Moreover, recent genetic discoveries have demonstrated the genetic heterogeneity of epilepsy, which makes it very challenging to choose the "most likely gene" responsible in many cases [7]. The interpretation of the potential significance of a variant identified in single-gene or CNV usually requires testing of the biological parents of an affected child and possibly other family members. Despite this, results may remain uncertain.

"... offer the promise of predicting whether a medication is likely to help or hurt you before you ever take it."

"... clinicians can now determine the cause of epilepsy in an appreciable proportion of their patients."

Summary

Despite the challenges for interpretation of genetic results, its limitations and potential risks, with appropriate pre-test genetic counselling and post-test support, the benefits of genetic testing in carefully selected patients with childhood epilepsy often outweigh its risks. A positive test result can lead to clarification of the diagnosis and prognosis, keeping the child and family from unnecessary diagnostic procedures, selection of optimal treatments, and the ability to provide accurate information for family planning. With modern genetic technologies such as CMA and WES, great advances and discoveries have been made in understanding of the causes of epilepsy. Rather than the majority of epilepsies being of unknown cause, clinicians can now determine the cause of epilepsy in an appreciable proportion of their patients.

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VGH Clinic Staffing

Starting in September, our staff members Jas Lachar and Marlyn Chow will be joining the epilepsy clinic team at Vancouver General Hospital.

Their role will be to provide resource information and peer support to clients and their families attending the Vancouver Coastal Health clinic at the Hospital.

They will focus on issues such as school, active living opportunities, financial resources, and social support, as well as providing access to our Society resources and support group network.

Our Vancouver General Hospital partnership now uses the model we've been offering the clinic team at BC Children's Hospital since 2005.

Staff Member Celebrates 10 Year Anniversary

In August, Elvira Balakshin, Program and Communications Coordinator for the BC Epilepsy Society, celebrated her 10th anniversary as a staff member with the Society. Prior to joining our staff team in 2004, Elvira had been one of our program volunteers.

Since starting her Coordinator role 10 years ago, Elvira has facilitated the delivery of about 500 Partners in Teaching workshops across BC. She has managed the development and content of our great website and e-newsletter along with many other responsibilities for all the stakeholders of our Society.

We'd be lost without her. Please join us in congratulating Elvira on her service to our Society.



Shakin' Not Cured

This November 13, we will be hosting another great Shakin' Not Cured gala fund raiser in Vancouver. The event will start at 7pm.

Similar to the sold-out event we hosted in 2010, this event will also have a James Bond theme to it. Mr. Bond expected his martinis shaken, not stirred.

More information will be available in the next couple of months. You can look forward to great food, outstanding entertainment, and lots of auction items to bid on.

If you have suggestions for auction items, potential ticket buyers, or entertainment, please contact Shawn Laari at 604-875-6704 x 12.

More Resources Updated in Chinese

Since our last newsletter, we completed the updated translation of 13 of our information sheets in Chinese. The character to the right is the word epilepsy in Chinese.

These translations will provide families with complete resources in five languages: English, French, Punjabi, Chinese, and Korean. We also have several resources in Vietnamese.

If you would like to help sponsor the translation of our resources into Vietnamese, please contact Shawn Laari at 604-875-6704.

Vancouver Marathon Giving

Our Society has been selected again as a partnering charity with the BMO Vancouver Marathon RUN4HOPE program. The event is on May 3, 2015.

Participating runners in the full marathon, half marathon, and 8 km run, as well as the one kilometre run for kids, can add a charity component to their participation by collecting pledges for our Society. We can help you by providing fund raising tools and support.

Please consider collecting donations to help us deliver the outstanding programs, services, and resources that serve the more than 40,000 British Columbians living with epilepsy.

Contact Shawn Laari at the BC Epilepsy Society office for more details at 604-875-6704.

Donate A Car Program

We've registered our Society with the Donate A Car Canada program, where people can donate a car in our name and we receive the cash donation after its sale.

Once you submit your vehicle information to Donate A Car, they will pick up your car at no expense to you. They will sell or recycle your used car and give a cheque to us. The BC Epilepsy Society will then issue a tax receipt to you. It's as easy as that.

You can find out more at www.donatecar.ca or contact Shawn Laari at the Society office.

Kids Up Front Update

BC Epilepsy Society is entering its third year of partnering with Kids Up Front Vancouver, a charitable organization that provides access to arts, culture, recreation, and sports events for kids who otherwise would not have these opportunities.

Vancouver Giants, Vancouver Canucks, Vancouver Whitecaps, The Fair at the PNE, BC Lions, Vancouver Canadians, Playland, Vancouver International Children's Festival, and Aladdin the musical, and are just a few of the opportunities we have been able to offer families this past year.

Anyone can donate tickets to Kids Up Front, which in turn distributes them to partner agencies such as the BC Epilepsy Society to encourage mentoring and family bonding.

Childhood and adolescence are important periods from many developmental perspectives: physical, psychological, emotional, and cognitive. It's during this time that kids establish their value systems, learn to engage with others, and develop self-esteem.

Tickets are available throughout the year! If you are interested, please contact Marlyn Chow at the BC Epilepsy Society office at info@bcepilepsy.com or 604-875-6704.













Partners in Teaching Update

Most of us will remember the time that we first saw someone have a seizure. Sometimes this happened in a school setting. People say that they felt confused, distressed, and some were even scared to help because they didn't know what to do.

Now imagine if students and teachers knew how to help someone during a seizure before they witness one. This will help ensure that they know what to do in this medical situation. It also can foster understanding of some of the difficulties that people with epilepsy face in their day-to-day lives. This can help reduce that potential isolation or stigma that people with epilepsy (particularly children) may feel or experience.



Susan Clarke (right) from RBC presents Society staff Elvira Balakshin with a cheque from the RBC Foundation for \$10,000 in support of Partners in Teaching.

To ensure people know seizure first aid and to help promote understanding about epilepsy, the BC Epilepsy Society provides the Partners in Teaching program.

This program includes a variety of free services and resources to assist early childhood educators, school personnel, students, and recreation providers. These include: seizure awareness workshops, information materials, DVDs, and classroom resource kits.

Our materials and workshops provide accurate, up-to-date, clear, and concise facts about epilepsy for teachers and students. There is still a lot more work that needs to be done to raise epilepsy awareness in schools. Partners in Teaching is here to make it happen.

For more information about school outreach services, please contact Elvira Balakshin at 604-875-6704 or email outreach@bcepilepsy.com

Monthly Giving Plans

We've heard from donors who feel that it's easier for them to make a series of monthly donations rather than a single donation each year.

We have donors who make gifts of \$10, \$25, or \$100 a month, but you can choose any amount that fits your budget. We accept both Mastercard and Visa. You'll receive a tax receipt for the full amount of your donations at the end of December.

You can choose to have your monthly donations designated to support any of our great programs, resources, or research grants. You can use the form on the back of this newsletter to start your monthly donations. Please contact Shawn Laari at the Society office at 604-875-6704 if you have any questions.

New Online Adult Support Group

Come and join one of our support groups! It's an opportunity to connect with friends, families, and other individuals who share your experience of living with epilepsy. It's a place to experience confidential emotional support and to share information and resources. It also provides an opportunity to exchange practical solutions to the everyday challenges associated with epilepsy.

We have two options for you to consider:

Lower Mainland: #2500-900 West 8th Avenue, Vancouver on the first Thursday of each month from 7pm-8:30pm.

NEW Online Support Group for those living anywhere in BC meets the first Tuesday of each month from 7pm-8pm.

Contact Marlyn or Jas at the BC Epilepsy Society office if you'd like to join an existing support group or would like to help start a new group in your area.

Your Planned Gifts Support Society Programs

You have the opportunity to make a legacy commitment to the BC Epilepsy Society through your will and estate planning. You can designate your gift to support epilepsy research or any of our valuable services and programs.

We've prepared a new edition of our planned giving newsletter that you can review with your family and financial planner.

We've also placed more detailed information in the Support Us section of our website at www.bcepilepsy.com/support_us. This information will help you understand your planned giving.

Planned giving supporters of the BC Epilepsy Society become members of The Auckland Society, which is named in honour of our Society's founder, Dr. Norman Auckland, and is our way of acknowledging your legacy commitment.

For more information about planned giving options in support of the BC Epilepsy Society, please contact Shawn Laari at the Society office at 604-875-6704.

Donate Your Shoppers Drug Mart Optimum Points

By donating your Shoppers Optimum Points to the BC Epilepsy Society, you'll help us purchase products and supplies from Shoppers Drug Mart.

To donate your Optimum Points to the Society, go to: www.shoppersdrugmart.ca/donate and browse the Shoppers Optimum section. Then click on DONATE NOW! and fill in the form

Many supporters have donated their points already. Any number of donated points will be greatly appreciated.

In Celebration Events

You may be familiar with the practice of asking that a donation be made to a charity of choice rather than a gift of flowers at a funeral – in memoriam gifts.

The same can apply to "in celebration" events: births, anniversaries, weddings, birthdays, graduations. We've even had people host summer BBQs as fund raisers for us.

The next time you have a special event in your family, please consider having gifts made as donations to the BC Epilepsy Society in recognition of that memorable family event.

If you wish, the gifts can be designated to epilepsy research, or one of our Society's programs or services.

Brochures, information sheets, and posters on epilepsy and our Society are available for you to give to the donors at your special event.

Please contact Shawn Laari at the Society office at 604-875-6704 or laari@bcepilepsy.com if you would like to support the BC Epilepsy Society through an "in celebration" event.





Sign Up for Our Monthly E-Newsletter

If you're interested in subscribing to our e-newsletter, go to www.bcepilepsy.com and click on Sign Up for Email News on our home page, or contact the staff at the BC Epilepsy Society office. We have over 2,100 subscribers to our e-newsletter.

The template has been upgraded to impove access to information. Since its debut over seven years ago, we've offered breaking news, event information, special offers, and many topical issues. We present a variety of topics every month, so there's always room for your suggestions.

Be a Part of Our Growing Team

We've recently completed our tenth consecutive year of significant membership growth. The more members we have, the better able we are to deliver needed programs, resources,

and services. Anyone can join, whether you are	e living with epilepsy or not.
Please complete and return the membership/cour great team. If you've been a member of the use the form below to renew your membership. General Meeting on April 7.	ne BC Epilepsy Society in the past, please
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