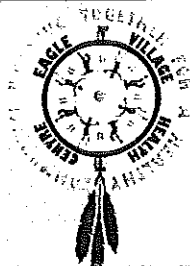


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Health Centre Newsletter



VOLUME 1 - ISSUE 7

ADIKAMEK KIZIS / NOVEMBER 2002

Eagle Village Health Centre
3 Ogima Street
Eagle Village First Nation
Kipawa, Quebec
J0Z 2H0
Tel: (819)627-9060/7021
Fax: (819)627-1885

Director of Health
David McLaren

Community Nurse
Pascale Huard

Homecare Nurse
Jackie Dorval

Clerk/Receptionist
Cecile McKenzie

Community Health Representative
Tina Chevrier - Raymond

NNADAP
Vicky Constant

Mental Health & Wellness Program
Virginia McMartin

Environmental Health Officer
Terry Perrier

Daycare & Brighter Futures
Patty Hunter

Personal Care Worker
Lois Hunter

News from the Director The Health Plan

We are now entering the phase of analysing the data we have collected in regards to the health related aspects of our community. We will attempt a realistic approach on how we can prioritize our needs while keeping in mind that adjustments will be made after consulting with you the members. Your input has been crucial up to this point and your continuing support will ensure a tailored health plan to specific needs.

As for the NNADAP maternity replacement, I am pleased to announce that Mrs. Noella Fortin will be assuming the prevention activities of the program while Vicky is enjoying her time off with her new baby. The experience and background that Noella brings to our team will ensure that this year's program goals and objectives will be attained.

The Brighter futures program (injury prevention) is please to support the local Fire brigade by presenting them with an emergency Fire Blanket. This important first aid equipment is a front line tool to assist brigade members or rescued victims who suffered major burns. Pictured here is myself and Patty Hunter with the Fire Department Chief George Grandlouis Jr.

David McLaren



Inside this issue:

| | |
|--|---|
| <i>Your Health ...All about the Osteoporosis</i> | 2 |
| <i>10 Super Foods Health Survey</i> | 3 |
| <i>Your Health ...All about Diabetes</i> | 4 |
| <i>Elder's Field Trip Foot Care Update</i> | 5 |
| <i>PD Day Fun Risk Watch Workshop</i> | 6 |
| <i>Miscellaneous News Other words for Sugar</i> | 7 |
| <i>Health Centre Miscellaneous</i> | 8 |



REMINDER

IF YOU WOULD LIKE TO RECEIVE A FLU SHOT PLEASE CALL CECILE AT THE HEALTH CENTRE TO SCHEDULE AN APPOINTMENT. FLU SHOTS WILL BE GIVEN DURING THE LAST WEEK OF NOVEMBER, THE 25TH - 29TH. (PICTURED HERE IS DEBBIE HUNTER RECEIVING HER FLU SHOT FROM PASCALE.)

YOUR HEALTH ALL ABOUT OSTEOPOROSIS

November is osteoporosis month.

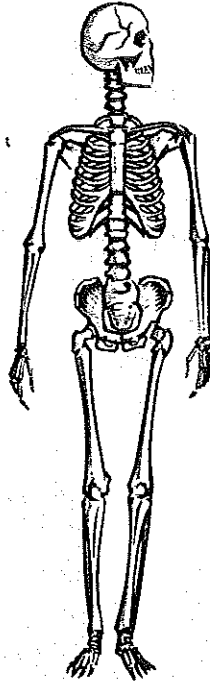
The following is information on this disease and how it can be prevented.

WHAT IS OSTEOPOROSIS?

Osteoporosis is a disease in which bones become fragile and more likely to break. If not prevented or if left untreated, osteoporosis can progress painlessly until a bone breaks. These broken bones, also known as fractures, occur typically in the hip, spine, and wrist.

Any bone can be affected, but of special concern are fractures of the hip and spine. A hip fracture almost always requires hospitalization and major surgery. It can impair a person's ability to walk unassisted and may cause prolonged or permanent disability or even death. Spinal or vertebral fractures also have serious consequences, including loss of height, severe back pain, and deformity.

A large number of Canadians are at risk. While women are four times more likely than men to develop the disease, men also suffer from osteoporosis.



OSTEOPOROSIS CAN BE PREVENTED

Building strong bones, especially before the age of 30, can be the best defense against developing osteoporosis, and a healthy lifestyle can be critically important for keeping bones strong.

There are several steps you can take to help prevent osteoporosis:

Osteoporosis is largely preventable for most people. Prevention of this disease is very important because, while there are treatments for osteoporosis, there is currently no cure. There are four steps to prevent osteoporosis. No one step alone is enough to prevent osteoporosis but all four may. They are:

- A balanced diet rich in calcium and vitamin D
- Weight-bearing exercise
- A healthy lifestyle with no smoking or excessive alcohol use
- And bone density testing and medications when appropriate

CALCIUM

Calcium is needed for the heart, muscles and nerves to function properly and for blood to clot. Inadequate calcium is thought to contribute to the development of osteoporosis. National nutrition surveys have shown that many women and young girls consume less than half the amount of calcium recommended to grow and maintain healthy bones.

Depending on your age, an appropriate calcium intake falls between 1000 and 1300 mg a day. If you have difficulty getting enough calcium from the foods you eat, you may take a calcium supplement to make up the difference.

VITAMIN D

Vitamin D is needed for the body to absorb calcium. Without enough vitamin D, you will be unable to absorb calcium from the foods you eat, and your body will have to take calcium from your bones. Vitamin D comes from two sources: through the skin following direct exposure to sunlight and from the diet. Experts recommend a daily intake between 400 and 800 IU per day, which also can be obtained from fortified dairy products, egg yolks, saltwater fish and liver.

EXERCISE

Exercise is also important to good bone health. If you exercise regularly in childhood and adolescence, you are more likely to reach your peak bone density than those who are inactive. The best exercise for your bones is weight-bearing exercise such as walking, dancing, jogging, stair-climbing, racquet sports and hiking. If you have been sedentary most of your adult life, be sure to check with your healthcare provider before beginning any exercise program.

MEDICATIONS FOR PREVENTION AND TREATMENT

Although there is no cure for osteoporosis, there are medications for the prevention and/or treatment of this disease. These medications slow or stop bone loss, increase bone density and reduce the risk of fractures. Your doctor can prescribe these if you are at risk or suffer from osteoporosis.

BONE MINERAL DENSITY TESTS

A Bone Mineral Density test (BMD) is the only way to diagnose osteoporosis and determine your risk for future fracture. Since osteoporosis can develop undetected for decades until a fracture occurs, early diagnosis is important.

A BMD measures the density of your bones (bone mass) and is necessary to determine whether you need medication to help maintain your bone mass, prevent further bone loss and reduce fracture risk. A bone mineral density (BMD) test is a special type of test that is accurate, painless and non-invasive.

It is never too early or late to start your prevention program. If you do not think you are getting enough Calcium or Vitamin D in your diet, you can get a supplement at the Health Centre.

10 SUPER FOODS YOU SHOULD EAT!

- 1 ORANGES**
Great tasting and rich in vitamin C, folic acid and fiber.
- 2 WHOLE-GRAIN BREAD**
It's higher in fiber and about a dozen vitamins and minerals than enriched white bread or "wheat" bread.
- 3 CANTALOUPE**
A quarter of a delicious melon supplies as much vitamin A and C as most people need in an entire day.
- 4 BROCCOLI**
Lots of vitamin C, carotenoids and folic acid.
- 5 SWEET POTATOES**
A nutritional all-star, it is one of the best vegetables you can eat. They're loaded with vitamin A, carotenoids, vitamin C, potassium and fiber. Mix in unsweetened applesauce or crushed pineapple for extra moisture and sweetness.
- 6 SKIM OR 1% MILK**
Excellent source of calcium, vitamins and protein, with little or no artery clogging fat and cholesterol.
- 7 BEANS**
Inexpensive, low in fat and rich in protein, iron, folic acid and fiber. Choose garbanzo, pinto, black, navy, kidney or lentils. Eat them as a side dish or snack, in a tortilla with salsa or in a soup.
- 8 WATERMELON**
Excellent source of vitamin C and carotenoids and it tastes great! Perfect for a snack, dessert or picnics.
- 9 SALMON OR OTHER FATTY FISH**
The omega 3 fats in fish, especially fatty fish like salmon, sardines and rainbow trout, can reduce the risk of sudden-death heart attacks.
- 10 SPINACH OR KALE**
Loaded with vitamin C, carotenoids, calcium and fiber.

UPDATE

2002 FIRST NATIONS & INUIT REGIONAL LONGITUDINAL HEALTH SURVEY

The Longitudinal Health Survey will begin on November 19th, 2002. Fifty-six persons (adults, youth and children) will be randomly chosen from the community to participate. The adult interview will take approximately one hour to complete. The youth and children survey will take approximately one half-hour.

There is a participation draw for all participants that take part in this Health Survey, which includes 23 regions within the province of Quebec. The draw is as follows:

- 4 Adult Prizes - \$500.00
- 4 Youth Prizes - \$250.00
- 10 Children Prizes - \$100.00

There will be 6 local draws for the book "Kipawa: a portrait of a people" by author Kermot A. Moore.

Those who are chosen to participate in this survey will be contacted by phone to choose a time suitable for the interview.

All interviews will be conducted by Noella Fortin, who is the person responsible for conducting this Health Survey for our community, Eagle Village First Nation.

For more information contact Noella at the Health Centre, 627-9060.

NOVEMBER IS DIABETES MONTH

There are three types of diabetes:

Type 1 Diabetes occurs when the pancreas no longer produces any or very little insulin. The body needs insulin to use sugar for energy. Approximately 10 percent of people with diabetes have type 1 diabetes.

Type 2 Diabetes occurs when the pancreas does not produce enough insulin or when the body does not use the insulin that is produced effectively. 90 percent of people with diabetes have type 2.

Gestational Diabetes is a temporary condition that occurs during pregnancy. It affects two to four percent of all pregnancies with an increased risk of developing diabetes for both mother and child.

Is diabetes serious?

Diabetes is a leading cause of death by disease. If it is left untreated or improperly managed, the high levels of blood sugar associated with diabetes can slowly damage both the small and large blood vessels in the body, resulting in a variety of complications:

- heart disease is two to four times more common in people with diabetes than without;
- diabetes is a leading cause of adult blindness;
- in Canada, people with diabetes account for 28 per cent of all new cases of serious kidney disease;
- worldwide, half or more of all non-traumatic limb amputations are due to diabetes; and
- diabetes is a major cause of erectile dysfunction.

With careful management, these complications can be delayed and even prevented. The first step in preventing the onset of these complications is recognizing the symptoms that may indicate you have diabetes.

Risk factors for developing diabetes include:

- being age 45 or over
- being overweight (especially if you carry most of your weight around your middle)
- being a member of a high-risk group (Aboriginal peoples, Hispanic, Asian or African descent)
- having a parent, brother or sister with diabetes
- having given birth to a baby that weighed over 4 kg (9 lbs) at birth, or have had gestational diabetes (diabetes during pregnancy)
- having high cholesterol or other fats in the blood
- having higher-than-normal blood glucose levels
- having high blood pressure or heart disease

Signs and symptoms of diabetes include the following:

- unusual thirst
- frequent urination
- unusual weight loss
- extreme fatigue or lack of energy
- blurred vision
- frequent or recurring infections
- cuts and bruises that are slow to heal and
- tingling or numbness in hands or feet.

It is also important to recognize that many people who have type 2 diabetes may display no symptoms.

How is diabetes treated:

Today, more than ever before, people with diabetes can expect to live active, independent and vital lives if they make a lifelong commitment to careful management of the disease. Diabetes is managed in the following ways:

Education: Diabetes education is an important first step. All people with diabetes need to learn about their condition in order to make healthy lifestyle choices and manage their diabetes.

Meal Planning: What, when and how much you eat plays an important role in regulating how well your body manages sugar levels.

Exercise: Regular exercise helps your body lower blood sugars, promotes weight loss, reduces stress and enhances overall fitness.

Healthy Weight: Maintaining a healthy weight is especially important in the control of type 2 diabetes.

Medication: Type 1 diabetes always requires daily injections of insulin. Type 2 diabetes is controlled through exercise and meal planning and may require medications and/or insulin to assist the body in making or using insulin more effectively.

Lifestyle Management: Learning to reduce stress levels in day-to-day life can help people with diabetes better manage their disease.

Early diagnosis of diabetes is extremely important. The earlier it is diagnosed, the sooner steps can be taken to manage the disease and prevent or delay complications.

Call the Health Centre for more information

AN ENJOYABLE VISIT TO TEMISKAMING FIRST NATION

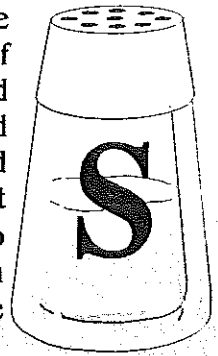


On Wednesday October 30th, 2002 Virginia McMartin and Noella Fortin organized a trip for our elders to visit the Anishnabe Long Term Care Centre in Temiskaming First Nation, (Notre Dame du Nord). During their visit to the Centre they participated in many activities including carving pumpkins, bingo and karaoke. They enjoyed a lunch with some friends who are currently residents of the Centre including Leo Hunter, Emma Robinson and Josie Rodgers.

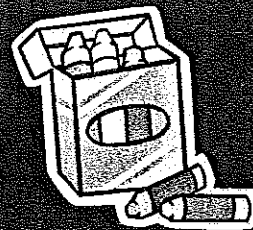


WHERE DO WE GET SODIUM (SALT)?

Most foods in their natural state are low in sodium (salt). Most of the sodium in our diet is added when we choose preserved and processed foods or when we add salt while cooking or when we sit down to eat. You should have no more than 2000 mg of sodium per day. (One teaspoon of table salt is equal to 2000 mg.)



Halloween Coloring Contest Winners



- Trysta Young
- Kacie McLaren
- Danielle Joly
- Kasha Johnson

A big thank you to all the kids that participated in the coloring contest.

FOOT CARE

We would like to inform everyone that Bonnie Brown will no longer be providing foot care services in the community. Jackie Dorval recently completed the required training and will be providing foot care services from now on.

For more information or to set up an appointment please call Jackie at the Health Centre beginning the week of November 25th, 2002.

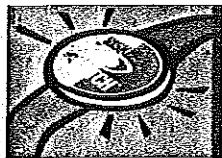
Risk Watch Workshop for young children

Friday November 22nd, 2002

Grade 3 Children

10:00 am - 4:00 pm

at the Eagle Village Community Hall



Risk watch is an injury prevention program for children. It is designed to help children and families create safer homes and communities by teaching them the skills and knowledge they need to make choices about their personal safety and well-being.

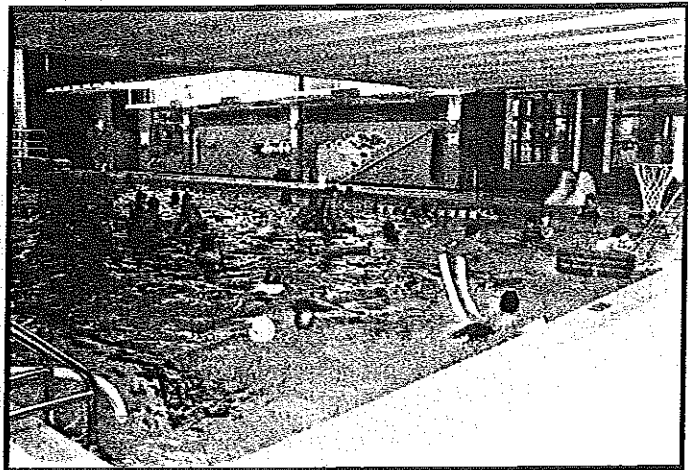
Risk watch seeks to prevent major unintentional injuries that threaten children in this age group. The following topics will be addressed:

- ♥ Motor vehicle safety
- ♥ Fire and burn prevention
- ♥ Choking, suffocation and strangulation
- ♥ Poisoning preventions
 - ♥ Falls prevention
- ♥ Bike and pedestrian safety
 - ♥ Water safety.

Lunch and snacks will be served!

Please call and reserve your spot at 627-3455 and ask for Patty or leave your name at the front desk at the Band Office. Deadline for registration is Thursday November 21st, 2002. I need to have your names to ensure that I can make arrangements for lunch for all participants.

PD DAY FUN !!

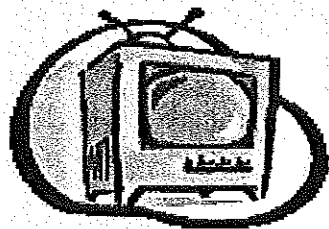


ON FRIDAY NOVEMBER 1ST, THERE WAS A PD DAY FOR THE CHILDREN AND TINA AND PATTY PLANNED AN AFTERNOON OF FUN WITH SKATING AND SWIMMING AT THE CENTER IN TEMISCAMING. THERE WERE 36 CHILDREN AND MANY PARENTS WHO CAME OUT AND ENJOYED THE FUN! A SPECIAL THANKS TO THE PARENTS FOR LENDING A HAND WITH SUPERVISION. THE CHILDREN HAD A GREAT TIME AND IT WAS NICE TO SEE PARENT PARTICIPTION. FOR SOME OF THE ADULTS SKATING PROVED TO BE QUITE THE CHALLENGE! A BIG THANKS TO LYNDA CHEVRIER FOR VOLUNTEERING HER TIME TO DRIVE THE SCHOOL BUS. WE HOPE EVERYONE ENJOYED THEIR DAY AND WE LOOK FORWARD TO DOING THIS AGAIN !! ☺





The cholesterol and blood sugar screening clinic was a great success. It was great to see so many community members come to the Health Centre to have their cholesterol and blood sugar tested as well as have their blood pressure checked. Pictured above is Donald Lariviere being tested by Pascale. We hope to host this clinic again in the future. Thank you from Pascale & Tina



WATCH APTN

Sweetness In Life: A Diabetes Story
National TV Series Showcases
Aboriginal Communities Working
Against Diabetes
Sunday evenings at 6:30 p.m. on APTN

This is a 13 part national television series about diabetes in Aboriginal communities. Aboriginal people in Canada are three to five times more likely to have or develop diabetes, and two thirds of Aboriginal people with diabetes are women.

LOOKING AT LABELS

DO YOU KNOW

THE DIFFERENT WORDS WHICH MEAN SUGAR?

Brown Sugar - A soft sugar whose crystals are covered by a film of refined dark syrup.

Carbohydrate - Sugars and starches.

Corn Sugar - Sugar made from the breakdown of cornstarch.

Corn Syrup - A syrup containing several different sugars that is obtained by the partial breakdown of starch.

Dextrin - A sugar formed by the partial breakdown of starch.

Dextrose - Another name for sugar.

Fructose - The sweet sugar found in fruit, juices and honey.

Honey - A sweet thick material made in the honey sac of various bees, sweeter than sugar.

Invert Sugar - A combination of sugars found in fruits.

Lactose - The sugar found in milk.

Levulose - Another name for fruit sugar.

Maltose - A crystalline sugar formed by the breakdown of starch.

Mannitol - A sugar alcohol.

Maple Sugar - A syrup made by concentrating the sap of the sugar maple.

Molasses - The thick, dark to light brown syrup that is separated from raw sugar in sugar manufacture.

Sorbitol - A sugar alcohol.

Sorghum - Syrup from the juice of the sorghum grain (sorgo) grown mainly for its sweet juice.

Starch - A powdery complex sugar (carbohydrate) such as cornstarch.

Sucrose - Another name for sugar.

Sugar - A sweet carbohydrate.

Any food label that has any of these words listed in the first three ingredients means that the product is high in sugar. Be careful of words that end in "ol" and "ose" as this usually means that they are a sugar.



IT'S A BOY ...

**Cameron Bryce Conrad Pariseau
was born**

**Tuesday November 5th, 2002
weighing 7 lb 7 oz !!**

**Congratulations Jennifer and Conrad
and big brother Brandon !!**

**Eagle Village Health Centre
is open Monday to Friday
8:30 am - 12:00 pm and 1:00 pm - 4:30**

WHOS COMING TO THE HEALTH CENTRE



- * November 13th - Dr. Zivkovic
- * November 21st - Dr. Brock
- * December 4th - Dr. Brock
- * December 11th - Dr. Zivkovic
- * December 18th - Dr. Gurekas

CALL CECILE FOR AN APPOINTMENT


REMINDER

**IN ORDER TO CONTINUE HAVING THE DOCTORS
COME TO OUR HEALTH CENTRE, IT IS VERY
IMPORTANT TO CALL AHEAD AND CANCEL YOUR
APPOINTMENT IF YOU CAN'T MAKE IT SOWE MAY
RESCHEDULE SOMEONE ELSE.**

Sun Mon Tue Wed Thu Fri Sat

**HEALTH CENTRE SCHEDULE FOR
NOVEMBER 2002**

1
2
PD Day
Activities for
the kids

| | | | | | | |
|---|---|--|--|--|----|----|
| 3 Terry will not be in this week. He is on holidays. → | 4 David and Pascale are in Calgary for a meeting. | 5 David and Pascale are in Calgary for a meeting. | 6 David and Pascale are in Calgary for a meeting. | 7 | 8 | 9 |
| 10 | 11 Closed for Remembrance Day  | 12 | 13 Dr. Zivkovic will be at the Health Centre today. | 14 David is in Quebec City for meeting on the 13th and 14th | 15 | 16 |
| 17 Tina will not be in this week. She is taking training in Winnipeg. → | 18 Pascale and Jackie are in Montreal for a meeting this week. → | 19 | 20 | 21 Dr. Brock will be at the Health Centre today. | 22 | 23 |
| 24 Tina will not be in this week. She is taking training in Winnipeg. → | 25 | 26 | 27 | 28 | 29 | 30 |