

Believe

A color photograph of a young woman with long brown hair, smiling warmly at the camera. She is holding a baby boy in her arms. The baby has light-colored hair and blue eyes, and is wearing a green and white plaid shirt. They are both sitting in what appears to be a hospital or medical setting, with a green chair visible on the left and a yellow wall in the background.

Spring/Summer **2019**

ISSUE 8.1

A publication of
St. Boniface Hospital Foundation

The Family
Room **that**
love built

On air for health care:
Joe Aiello gives back

Katelyn Wideman and her son, Ascher



Hôpital St-Boniface Hospital

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Believe

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at autism."*



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A beacon shines over the city's skyline — steadfast, familiar and beloved.

The newly installed cross at the highest point of St. Boniface Hospital symbolizes the Grey Nuns' legacy of love, compassion and healing care. 2019 marks the 175th anniversary of the arrival of these courageous women who eventually founded St. Boniface Hospital. I cannot imagine a more inspiring way to begin the year than to acknowledge the power of that symbol and to thank the Foundation and its committed donors and partners, for always *Believing* in our organization's *raison d'être*.

The Sisters knew that sustainable healing requires rejuvenating the mind and spirit, and healing the body. With the installation of a contemplative garden in the spring, patients, family members and staff will experience the powerful benefits of pausing to connect with Mother Nature. Thank you to our generous donors who continue to value opportunities to invest in beautification projects like this, as well as improvements to spaces where some of the most sensitive healing takes place — in our emergency and mental health care facilities. A large, busy Hospital campus needs ongoing maintenance and we are grateful for gifts that allow us to keep our facilities in good working condition — *merci!*

Your generosity also supports the minds that drive innovation, discovery and excellence in patient care. St. Boniface Hospital continues, through its Albrechtse Research Centre, to hold a leadership position in basic science research, translational research and world-class collaborations with universities and research programs around the world.

In the heart of the Hospital, a space renamed the "Mission Room", is dedicated to daily gatherings ensuring we continue to be leaders in transformation efforts. The space is being renewed to foster a hub of innovation, where our leaders have access to key performance metrics in a most conducive environment. Here is just another example of how our donors nurture our capacity to lead.

I thank you for walking this transformative path with us, helping our patients and our Hospital community, thrive in all aspects of their lives. The year ahead will no doubt bring us great joy and many challenges, but with our donors behind us, I believe there is nothing we cannot accomplish. ☺

Martine Bouchard
President & CEO
St. Boniface Hospital



Thousands of people pass through St. Boniface Hospital's doors annually, each bringing with them a story of their own.

The Hospital is a special place where people are healed. We at the Foundation don't get to hear everyone's story, of course — but we do have the honour and privilege of sharing a few of them with you, here in *Believe*, on our redesigned website and on social media.

If anyone deserves to be called a special person, it would be the late Dr. Gerard McCarthy, who sadly passed away last year. For 47 years, McCarthy — a legendary obstetrician, who delivered literally tens of thousands of babies — provided the best possible care to his patients, especially Indigenous families in the Island Lake region. We pay tribute to Dr. McCarthy on page four.

Beyond Dr. McCarthy's legacy, the health and wellness of all First Nations and Métis communities across Manitoba is a key focus of the Hospital. On page 10 you can read about the *Debwewin* research project — a five-year study that aims to reveal unique insights and understanding into heart disease and inequities among Indigenous cardiac patients. Findings from the study will be released later this year, and they promise to have a significant impact on our health care community.

The Hospital will continue to change as we fulfil our important role in improving our health care system. Our new Mental Health Campaign will be a major focus for us in 2019. I know many more people, with special stories to share, will pass through the hospital doors and impact our lives in new and exciting ways. Let's hear from you! ☺

Vince Barletta
President & CEO
St. Boniface Hospital Foundation

PS: St. Boniface Hospital Foundation's Mental Health Campaign is underway! Help us raise funds to improve the McEwen Building, and mental health programs. We support 300 patients admitted annually. Call us at 204-237-2067 or visit saintboniface.ca/foundation/donate.

The man from Portaferry

**St. Boniface Hospital colleagues
remember a legend**



Dr. Gerard McCarthy never forgot any of his patients. Likewise, they never forgot the obstetrician with the great sense of humour, who always acted in their best interests.

St. Boniface Hospital lost a special friend and teacher last year, when McCarthy died in August at the age of 77.

Many of the 47 years he worked in obstetrics were split between St. Boniface Hospital and Misericordia Health Centre. But he found his true calling in the Island Lake region of Manitoba – on obstetrical outreach to the Indigenous communities of Garden Hill, St. Theresa Point and Wasagamack. McCarthy also traveled often to the Red Sucker Lake and Berens River northern reserves.

Raised in the small village of Portaferry in Northern Ireland, McCarthy never lost touch with where he came from, nor what it meant to live in a remote community.

"He really liked the people there and going up north. He just wanted to help them," said his daughter, Fiona McCarthy, who is an endocrine nurse. "He wanted to protect his patients. Part of that was remembering details about them – each of their names and who their children were."

Her dad could relate to his patients from the North. "He saw what their lives were like; he saw they didn't have as many resources as we do in the city. He became extremely protective of them," she said.

McCarthy found common ground with his patients and put them at ease with witty remarks, she said. "He was really funny and loved to make everyone laugh. People from small towns and communities like his often shared his sense of humour."

If he had any ability to make it even a little bit better for someone, he would do that.

— Karen Isbach, Program Team Manager for ACF Women's Health

A passion for the North

Fetal assessment nurse Irene Blank traveled frequently and for many years with McCarthy to Island Lake. He was an advocate for people in the region, she said, and he wanted to provide care for pregnant mothers where they were living, to reduce their need for travel to Winnipeg while expecting.

He was passionate about people, and the North. "He genuinely wanted families up there to be healthy, to exist and be well. He recognized the challenges for them up north...He really and truly wanted them to have good lives and if he could help, he would," said Blank. "He watched those communities grow up."

Karen Isbach, Program Team Manager for ACF Women's Health (out of which McCarthy worked), Fetal Assessment and ACF Pediatrics, said it was his unwavering dedication to his profession and to the populations he looked after that made him special.

He was a doctor who acted from the heart, she said. "He had a strong intuition and the courage to follow it, too, in a lot of his clinical decision-making."

McCarthy once told Isbach he had been sent away to boarding school as a boy in Ireland. Familiar with the feelings of being removed from his family, isolated and lonely, he empathized with the characteristics held in common by some northern and marginalized people, she said.

"He was sympathetic and empathetic to those challenges. If he had any ability to make it even a little bit better for someone, he would do that. He treated everyone equally, regardless of race, religion or otherwise. None of those labels meant anything to him," she said.

Dr. Nigel MacDonald, a retired pediatrician who worked with Dr. McCarthy, said his old friend will be sorely missed. "Gerry (as he was affectionately known) had an interest in the disadvantaged people. He was so dedicated, he would track down his patients if they were in the city and he was worried about them, or if they were missing appointments," he said.

A memory for names and faces

Residents who went through the five-year obstetrical program had great respect for Dr. McCarthy and absorbed everything that they could learn. He really did have a gift for his trade, said Isbach. As a mentor, he instilled confidence in the residents.

Likewise, McCarthy's patients appreciated his remarkable and detailed memory of them. "He often delivered two, even three generations," she said. "He had memories of exactly whom else he had delivered, and he would mention that. He'd say, 'I remember I delivered your aunt, or your cousin, or your sister.' He made it personal for his patients."

He had a gift for working with women. "His practice stretched far and wide, and he had this immense skill in being able to assist women. He loved his work up north and was glad to travel regularly to northern reserves to provide care in his patients' home communities," said Blank.

Fiona McCarthy recalls a moment when she was a young nursing student. "A supervisor stopped me in the hallway and said, 'You know, your dad has saved so many lives. He can get a baby out faster than anyone. He knows what's happening with a mother faster than anyone'."

"He knew that he affected a lot of people," said McCarthy. "The week before he died, he and I went to a swimming pool. A couple approached us with their kids and said, 'Hi, Dr. McCarthy. Do you remember us?' Honestly, that sort of thing happened at least once a week when I was with him." ☺

**Donate in memory of someone special.
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Through darkness comes **light**

“Even though the Family Room provided a place to rest and comfort each other, the family thought the area could be improved for visitors in the future.”

The Roehls honoured their late husband, father and grandfather, Allan, by improving St. Boniface Hospital's Intensive Care Medical/Surgery Family Room.

With a broken yet gracious heart, Ann Roehl and her family stood – longing for one family member to remain with them, but ready to give hope and healing to other families that would have to endure what they just had.

The Roehl family is a close one. Ann and her husband, Allan, had been married almost 37 years, and had grown their family to include two children, Scott Roehl and Katelyn Wideman.

Allan worked for Jeld-Wen Windows and Doors most of his career and took pride in his work as a purchaser. While he enjoyed what he did, Allan had been happily retired for almost four years when, as he put it, life threw him a speed bump. Many would see Allan's newfound freedom from the nine-to-five grind as starting the next chapter, but his golden years were quickly and dramatically cut short after he got sick.

There were several dreaded days, and trips to St. Boniface Hospital. Allan had received an unfortunate diagnosis of terminal pancreatic cancer and he was being treated at the Hospital.

In late January 2018, Allan came to the Hospital for an outpatient surgical procedure to help relieve some of the complications of his cancer. After the procedure, Allan was sent home and was doing quite well. By the end of the week, however, it became clear that Allan's health was deteriorating. Ann, Scott, and Katelyn decided he needed to go back to St. Boniface Hospital.

Allan was brought into the Emergency Department on Saturday, January 27

last year and the news was not good. The doctors said Allan had an infection in his body, and his kidneys were in distress. Ann recalls the Emergency Department was buzzing “with Code Blues”, making it difficult for her to absorb the information relating to Allan's health.

When the family visited him in the Hospital the next day, Allan was having some trouble breathing. He asked them to go home, to take care of themselves and so he could also sleep. It would be the last time they spoke.

In the early morning hours of January 29, Ann received a call from an Intensive Care Unit (ICU) doctor explaining that Allan had been moved to the Hospital's ICU, and that, while he was comfortable, it was time to call the family.

Allan spent twelve hours in ICU and throughout that day, Ann and her family spent time in the Intensive Care Medical/Surgery (ICMS) Family Room, during Allan's final hours.

Even though the Family Room provided a place to rest and comfort each other, the family thought the area could be improved for visitors in the future. Katelyn noticed there wasn't a baby changing station nearby, for her newborn son, Ascher. There was one they knew of on the main floor, but the family was hesitant to leave even for a moment, as Allan was unstable.



Indeed, he lost his life that January day.

Foundation helped find solutions

Overcome with grief, Ann and her children wanted to fill the emptiness they felt in their hearts, to honour Allan's memory.

Members of their extended family and friends had started asking about donating in Allan's name, so the family decided St. Boniface Hospital, specifically the ICMS Family Room they had used, would be the recipient of their own donations as well as gifts from family and friends.

Ann and Katelyn went to the St. Boniface Hospital Foundation offices the week Allan passed - they were welcomed kindly by receptionist Michèle Kern, who connected them with a Foundation gift officer to discuss how they could honour their husband, father and grandfather.

With the help of Garth Johnson, Gift Officer, the family decided to make some improvements to the ICMS Family Room in Allan's memory. With Johnson's guidance and assistance from Hospital staff – specifically Rhonda Findlater, then Director of Critical Care and Education Services (now Chief Nursing Officer) – they determined the next steps to make it a reality.

Soon after, Johnson and Findlater met with Ann and her family to visit the space and get a visual of the room, and what it could look like with their suggestions for improvement.

“After fully understanding the Roehls' vision, and meeting this lovely family, I was inspired to take this project back to my team and have them work their magic, and make this dream a reality,” said Findlater.

In addition to repainting and adding a baby changing station and quiet area, the Roehl family had also noticed the area could benefit from a cell phone charging station, which would have been useful in the hours on end they stayed close to Allan. They also purchased two sleeper chairs - for families to put their feet up and find some comfort during dark nights.

Last December, the family came back to the place where it had begun, the ICMS Unit, to reunite with the staff that tirelessly helped Allan during his final days.

What Ann Roehl remembers most about her husband Allan, is he was a warrior - the strong, silent type. “Allan had a fun side; although he was quiet, he didn't like people making a big fuss over him.” She feels these improvements made in his name would suit him just right. ☺

**Donate in memory of someone special.
Call 204-237-2067 or visit
saintboniface.ca/foundation/donate.**

The long and winding road to healing

It took Melissa Gowryluk over a year to feel comfortable enough to share her story with others.

“Now that I have, it’s changed me. I feel more positive,” said the former St. Boniface Hospital patient.

In January 2017 while she was away on a business trip, heavy, wet snow piled on a storefront sign fell onto Gowryluk’s head and shoulders.

The initial shock masked just how bad the impact was. Days later, Gowryluk’s symptoms didn’t go away – instead, they became more severe. In addition to a sore head and neck, Gowryluk began to experience nausea, faintness, and trouble with speech, vision, and walking.

Over the course of six months, Gowryluk saw different specialists who found it difficult to find a diagnosis that fit her symptoms. She had CT scans, ultrasounds, and a colonoscopy. Some thought it was a stomach flu or gall stones. One doctor was worried it might be multiple sclerosis.

And then, the worst thing that could happen, did. Gowryluk was struck on the head a second time. She immediately sought help at St. Boniface Hospital’s Emergency Department.

It was there that ER physician Dr. Tamara McColl gave Gowryluk the diagnosis she had been missing for months: she was suffering from post-concussion syndrome.

Once diagnosed, Gowryluk was on the road to recovery. She took up LoveYourBrain Yoga, nature photography to correct vision complications, therapy for vision and dizziness, and started speaking to others about concussions. She also returned to St. Boniface Hospital as a grateful patient, to thank McColl for giving her hope and healing. ☺



A healthy start

The spirit of generosity is a Manitoba hallmark.

Our community is among the most charitable in the country, and this fact is no better captured than through the hundreds of Safeway employees in the province who support the critical health needs of children and infants.

With help from Safeway and its employees, St. Boniface Hospital’s Neonatal Intensive Care Unit (NICU) now has an advanced food preparation area, giving sick and premature babies a healthy start and a fighting chance.

“Spending extended periods of time in the Hospital can be difficult for families, especially when it comes to ensuring proper nutrition,” said Renee Hopfner, Director, Corporate Social Responsibility. “Safeway and its employees take great pride knowing that the funds raised through the Safeway Employee Payroll Donation Program over the past three years are supporting the food preparation areas in the NICU, ensuring babies are getting the food they need and giving families peace of mind.”

Nutrition plays a critical role in the NICU, helping babies grow stronger. With more than \$97,770 contributed by Safeway employees over the past few years, the NICU is now equipped with electric food heaters and heat detectors, an alarm system to support the freezer and ensure both the quality and shelf-life of breast milk and formula, and cutting-edge technology to guarantee the highest level of sanitation and cleanliness. ☺



Safeway Sobeys Inc. executives, on behalf of Safeway employees, present cheque for completed NICU food prep area to St. Boniface Hospital and Foundation staff, and Hospital Board Chairperson, Tom Carson.

Slices of kindness

Sale of specialty pizzas supported Palliative Care



Joe Aiello sharing a laugh with Foundation supporter Kim Clermont at the 2018 Radiothon of Hope and Healing, sponsored by Vickar Automotive Group.

Joe Aiello is, as he himself has said of others, the kind of person who makes this big small town the best.

When he's not pulling double duty at Power 97 as Program Director and a co-host of *Power Mornings*, the veteran of Winnipeg's airwaves is giving back to his beloved "big small town."

He champions and supports Palliative Care at St. Boniface Hospital through the Aiello Endowment Fund, which he established in 2011. The fund honours the memories of Aiello's late mother, Fiorina Aiello, and his late wife, Alanna Hogue Aiello.

When Alanna was brought into the Hospital's Palliative Care Unit after a lengthy battle with cancer, Aiello said he was "thankful there was a facility like this, that's able to take care of her. Because I couldn't take care of her anymore, and that's the worst feeling in the world for anybody."

Pizza promotion raised \$7,500

Aiello encourages his listeners and the public to support Palliative Care in any way they can.

"I've been blessed to have a wonderful career, it's something I've wanted to do since I was a kid. But I always say, radio people and local celebrities, we have a voice. It happens to be a big voice and thank God that it's heard by a lot of people, and generous people who will come to bat for you."

Aiello partnered with Santa Lucia Pizza and his colleague, 680 CJOB's Hal Anderson, to put the Hal and Joe Pizza on the menu.

"Greg Simeonidis at Santa Lucia had asked if we would put our names to the pizza. And when you hear something like that, with somebody willing to write a nice cheque at the end of it, I have no problems with that," he said.

It took between four and six months for the promotion to raise \$7,500 for Palliative Care, which Aiello, Simeonidis and their colleagues donated through St. Boniface Hospital Foundation in October.

"I think my mom and Alanna would be happy to know that there's a lot of people out there who are willing to help others, especially knowing what they went through," he said.

"When you see firsthand what that staff does up there, dealing with chronic pain that these patients are going through. It's amazing how they can magically help them feel better and at least at ease and give them peace of mind in a lot of ways."

"It's the most remarkable thing I've ever witnessed, to be honest." 

Support Palliative Care by calling 204-237-2067 or visiting saintboniface.ca/foundation/donate.



The Truth of Our Hearts

Study looks at healing from different perspectives

Mary Wilson, Healer and Elder, and Dr. Annette Schultz, Principal Investigator.

Why do Indigenous cardiac patients in Manitoba get sicker and tend not to recover as well as the rest of the population, even after receiving medical treatment?

A team of contributors and researchers at St. Boniface Hospital and from the University of Manitoba have tried to find answers to that and other difficult questions related to a known health disparity among urban and rural members of First Nations communities.

Debwewin – The Truth of Our Hearts is a study that was started in October 2014 and will come to an end this year. It is funded by the Canadian Institutes of Health Research (CIHR): Institute of Indigenous Peoples' Health.

Rates of heart disease among First Nations people were recorded to be roughly the same as the general population until about the late 1970s. Since then, there has been a growing divide.

"Indigenous people today are sicker, at younger ages, with higher rates of heart disease and they're more likely to die," explained Dr. Annette Schultz, Principal Investigator, Health Services & Structural Determinants of Health Research at St. Boniface Hospital.

For a long time, Western medicine was the only perspective that was brought into the dialogue. "This study invites us to consider a dialogue that is bigger than that: how some of

these disparities we see today are a result of historical and ongoing colonialism and colonial practices," said Schultz.

"The common explanation was about access and lifestyle. The fallback was always those narratives," said Karen Throndson, MN, RN, Clinical Nurse Specialist, Cardiac Sciences Program, who initiated the study at St. Boniface Hospital.

"But I think when you're around First Nations people enough, you begin to understand that's not the full story, and you start looking beyond those easy explanations," she said. "And that's the beauty of research."

"Our heart is the voice of spirit. When the heart is damaged, what does that tell you about the spirit?" asked Mary Wilson, a healer and elder who was invited to contribute to the *Debwewin* study.

The conversation now is that something valuable has been missed and needs to be corrected, said Wilson. "It's an opportunity to take some time to heal the wrongs that are in the institutional landscape," she said.

As an Indigenous woman, Project Coordinator Moneca Sinclaire, PhD, has focused her career on the health of her people. "My own family members have Type 2 diabetes and



Karen Throndson, MN, RN.

Food for thought at CCARM reception

If you believe poor health simply comes down to bad genetic luck, the Canadian Centre for Agri-Food Research in Health and Medicine (CCARM) has food for thought.

“Food is medicine” was among the takeaways at an informational evening reception held in October at St. Boniface Hospital Albrechtsen Research Centre, which houses CCARM. The event was generously sponsored by Canadian Pacific.

Representatives of the agricultural sector and St. Boniface

Hospital Foundation donors were among attendees who enjoyed one-on-one conversations with CCARM researchers and graduate students about the role of food in preventing and treating chronic disease. ☺



Moneca Sinclair, PhD.

various health issues. I've wanted to know why that was happening,” she said.

“We have our own way of seeing what health means to us, as Indigenous people. There’s a lot of history of people entering hospitals. In our language, ‘hospital’ means ‘a place to die,’ ” she said. “That’s how our community has talked about the health care system.”

“Often, people feel like they aren’t welcomed into this environment,” continued Sinclair. “Many of our people’s hearts have been broken because of residential schools and tuberculosis clinics. But none of that’s ever acknowledged in the health care system.”

“For me, I’ve approached this project...working toward the goals of making a place better for Indigenous people to enter and for non-Indigenous people to learn to welcome us into the health system. This doesn’t just help Indigenous people, it helps all people coming to the Hospital.”

Study compared patients, treatments and outcomes

Debwewin (the Ojibwa word for “truth”) looked at patients who landed in the Hospital’s Cardiac Catheterization Laboratory (Cath Lab) and had an angiogram, a diagnostic tool doctors use to get a clear picture of the heart. The research team’s first question was, “Who are these Indigenous people in the Cath Lab?”

The differences were striking. “The Indigenous patients were younger. There was an even male/female split getting angiograms, which was unusual. And they were sicker – rates of additional diseases or disorders were higher than in the rest of the population,” said Schultz.

“Then we asked, ‘What’s going on with treatment after the angiogram?’ We saw differences in mortality and in rates for re-hospitalization. The one that was the most concerning to me – you would assume that after that you had an angiogram, you would expect to have a follow-up visit with a cardiac specialist or at least a family doctor. What we found was, if you’re a status First Nations person, the likelihood of you having that follow-up is less,” she said.

“The cardiologists on the team thought, ‘Well, maybe there’s something different happening with medications that were prescribed for these patients.’ So, we did an additional study, and we didn’t see a huge difference in prescriptions, as well as the filling of the prescriptions.”

“Reporting all these differences is useful,” said Schultz. “However, what’s important now are the questions we ask to explain the differences. Where do we look for answers?”

While questions remain, Wilson believes the study itself has started the healing process by virtue of seeking input from the Indigenous population. “It has brought healing already to anybody that’s touched it. It’s already brought connection. There has to be a place where you can let go of your pain, and where you can heal from the injuries of the past.”

Listen with your heart

Watch for a new series of 15-min. radio documentaries and a feature documentary by Code Breaker Films – all related to *Debwewin* – The Truth of Our Hearts – coming soon! ☺

To help support excellence in research at St. Boniface Hospital, call us at 204-237-2067.



Gift for autism research honours daughter and son

Life is what happens to you while you're busy making other plans. So goes an oft-repeated saying.

Kali Dyck had plans. She was pursuing a master's degree in Psychology, with an eye on a career in health care, maybe nursing. As a volunteer with McDonald Youth Services and many other charitable organizations, Kali was kind, caring, and eager to learn.

These traits were evident in the special bond she formed with her brother, Chad, who has Autism Spectrum Disorder (ASD).

A car accident claimed Kali Dyck's life at age 25 in 2011.

But her extraordinary capacity to help others lives on, with her family's founding of the Kali Dyck Foundation in 2018 and its \$300,000 donation for an ASD research collaboration between St. Boniface Hospital and Ben-Gurion University (BGU) in Beer-Sheva, Israel.

"Kali believed strongly in helping people who were disadvantaged, especially those with mental challenges," said Kali's mother Jackie Dyck, speaking on *The Health Report*, the weekly program on CJOB 680 profiling patient care and medical research at St. Boniface Hospital. "When we learned about new research into ASD, we felt it was true to what Kali believed."

A 2018 Public Health Agency of Canada report estimates one in every 66 Canadian children and youth aged five to 17 has ASD. A challenge for those living with ASD is that current diagnoses don't distinguish between different subtypes of the disorder.

"So many conditions fall under ASD that people with vastly different capabilities are often lumped into the

same category," says Dyck. "There wasn't a prescription diagnosis for Chad to help him live the best life he could. We just had to figure it out all along the way."

The research between St. Boniface Hospital and BGU will focus on differences among lipids – a biomarker found in blood – for individuals who have been diagnosed with autism, explained Dr. Amir Ravandi, Research Director, Section of Cardiology and Principal Investigator, Cardiovascular Lipidomics at St. Boniface Hospital Albrechtsen Research Centre. Dr. Ravandi is a co-investigator on this project, which is led by Dr. Harold Aukema.

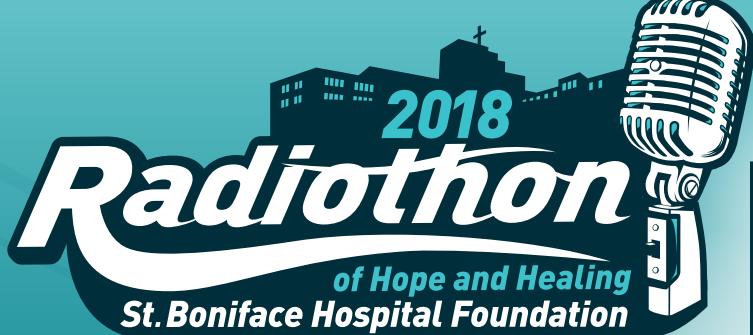
"Our goal is that by looking at a large set of blood samples housed at BGU, we can use our expertise here at St. Boniface Hospital to see how patterns of lipids might signal whether a person has autism and even what type. Then a family and their health care supports could prepare for what life might be like for a child if they show certain markers."

"Then, are there interventions, medications, or potentially diets that can affect a person's autism? This is a new way of looking at autism," he said.

For the Dyck family, owners of Winnipeg-based agribusiness BrettYoung Seeds, such insights will be a great benefit to those living with ASD and a fitting tribute to Kali.

"Kali was a champion for Chad. Today he holds a job and no longer lives at home. He loves music and movies and being physically active. He volunteers. We want families to have more solutions to better cope with ASD." 

To help support excellence in research at St. Boniface Hospital, call us at 204-237-2067.



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Thank you to our many compassionate donors who have chosen to make gifts to St. Boniface Hospital Foundation in honour of those listed below.

Gifts recognized were made from June 1, 2018 to November 30, 2018.

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Doreen May Guenette
George Guenette
Joan Gyde
Dr Philip F Hall
Denis François Marcel
Hamonic
Charles Alexander
Hebert
Greta Marie Helgason
Douglas Brian Hertzog
Ken Herzog
Ronald Hidlebaugh
Terry Lou Hnatiw
Eric Hornung
David M Howarth
Edward Philip Hudek
Dr John F S Hughes
Gerry L Ilchyna
Thomas Ireland
Gloria Iwanoczko
Gary Brian Jacob
William Jansen
Katie Janzen
Joseph Jarigen
Alan Johnstone
Gerarda Marie-Anne
Jonson

Margaret Jowett
Edward John Charles
Keep
Iola Kehrer
Dennis Kenny
Larry Keryluk
Max Kettner
John Kiley
Robert Charles Kipper
Yvonne Kirbyson
Edgar Klassen
Irene Germaine Klassen
Mildred Klassen
Charles George Klein
Lawrence E Klump
William Wasyl Kostelnik
Raymond Kropf
Anne Kuchma
Baby Charlotte
Kuzminski
Baby Elizabeth Juliet
Kuzminski
Paul-Emile Labossiere
Dr Charles Chi Keung
Lam
Raymond Lambert
Baby Ava Lambier
Baby Emma Lambier
Roger Lapointe
Ronald Latter
Ada Lee
Annabella Katherine Lee
Francis Lemoine
Tracy Maureen Lloyd
Baby Charlotte Anne
Elizabeth Lockhart
Stewart Low
Doris Cora Lyon
Dr Kenneth Maxwell
Joseph Maley
Paul Joseph Maley
Maureen Agnes McBride

Dr Gerard McCarthy
Charles McCormick
Stephen Walter Mical
Robert J Mitchell
Terence Montgomery
Ethel Seale Mueller
Margaret Pearl
Myshkowsky
David Negrych
Marvin Leslie Nicholls
Aidan O'Brien
Donald Odenbach
Leo Offrowich
Jim Orzechowski
Edwood Oswald
Melba Karen Parker
David Pastuck
Orest Perchaluk
Juliette Florence Pochailo
Shirley Ann Podolsky
Allan Pott
Helen Quiggin
Ray Reeve
Raymond Reeves
John Hans Regier
Rose Anne Rempel
Lucille Rivard
Lily Robak-Huth
Peter Robitaille
Julius Oswald Roeder
Allan Henry Roehl
Paul Romas
Becky Rosenberg
Gordon Rowan
Dominique Roy
Dolores Schaubroeck
George Russell Sharp
Lena & Michael
Shewchuk
MacDonald
Brenda Sipley
Paul Joseph Maley
Helena Siwak
Corrie Smeets

George St. Amant
Emil Stasiuk
Patrick Stein
William Stepaniuk
Myrna Stublings
Elaine Summers
Shirley Janet Sysak
Joe Tates
Ron Taylor
Jeannine Theoret
Lea Thibert
Ernest Todaschuk
Baby Broden Peter
Robert Trithart
Jocelyne Marie Trudeau
Allan Charles Turnock
Josephine Uskoski
Edgar Valencia
Margaret Van Raes
Thomas Van Raes
Fredrick Gerald
VanAlstyne
Louise Verheul
Armand Vielfaure
Hoa T Vuong
Andrew Watson
Ronald D Wells
Jeanine Werbeniuk
Baby Rikki Mallory
Elizabeth Wiebe
Dorothy Marion
Williams
Margaret Mary Williams
Dorothy Mable Willms
Carol Lynne Wilson
Richard Wojcik
Leonard Yachison
Zeke (Sig) Yakisch
William Yewdall
Mary Louise Young
Mary Zaporozan

In celebration

Alina Arnold
Ria & Louis Baltus
Earl Barish
Jenna & Avery Book
Dwight Botting
Bob Brown
Lauren Chandler
Bernard & Lisa Clement
Matt Courtin
Michael Erlanger
Michael Gobuty
Daniel Grandmont
Michael Gyde
Judith Hall
Charity Hansen
Sara Hoeppner
Murray A Hyman
Dimitri Kontzamanis
Maria Lucia Transi Marinelli
Ivy McGonigal
Dr Alan Menkis & Cardiac
Surgical Team
Sandi Michaw
Tom Penner
Charles Pettersen
Fay Reich
Mickey Rosenberg
Pearl Rosenberg
Norman Rothenburger
Marvin Samphir
Leniliza Sarmiento
Frank Shiffman
Heather Smith
Joanne Smith
Michelle Smith
Paul & Gail Switzer
Klaus Thies
Reva Waldman
Judy Weidman
Dr Clifford Yaffe
Lauren Yerama

