



research | advocacy | awareness | education | continuing medical education

lung.ca

THE  LUNG ASSOCIATION™
When you can't breathe, nothing else matters.

Improving lung health for all is at the heart of everything we do.

ON THE COVER: Brett Favaro, a 23-year-old varsity team swimmer from Burnaby, British Columbia has had asthma since he was four. “Too often, asthmatics are characterized as delicate and frail. I want people living with asthma to understand that they are not condemned by their condition to be sick and weak through the rest of their lives.”



We rely on the passion, vision, and hard work of our volunteers to help us achieve our vision – all people free of lung disease.

Our many volunteers, like Brett Favaro, are committed to helping Canadians breathe easier and ultimately making a difference. Volunteers are the backbone of our organization, which started in 1900 when a group of concerned citizens joined together to fight tuberculosis.

For over 100 years, we have been dedicated to our mission of promoting and improving lung health for all Canadians. As a federation of 10 provincial associations with our medical partners, the Canadian Thoracic Society and the Canadian Respiratory Health Professionals, and all our volunteers, staff and donors, we are the Canadian Lung Association.

Together we help you breathe easier.

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Message from the Chair of the Board of Directors

Thank you for giving me the great honour of being able to serve as Chair of the Canadian Lung Association's national board of directors. This report highlights many outstanding achievements – all made possible by the tireless dedication of volunteers, staff, health professionals, individual donors and corporate partners who are making a difference in communities across the country.

As a non-profit and volunteer-based health charity, we remain committed to supporting world-class research, education, prevention and advocacy. I'm confident we will continue to build on this year's achievements as we enter the first year of our ambitious new three-year strategic plan.

Together, we are helping Canadians breathe easier every single day.

Elizabeth Duff

Board of Directors 2008-09			
EXECUTIVE:	MEMBERS:		
Elizabeth Duff (Chair) NEWFOUNDLAND & LABRADOR	Keith Murray BRITISH COLUMBIA	Jane Wallingford ONTARIO	Dr. Margaret Munro (Interim) PRINCE EDWARD ISLAND
Keith Murray (Vice-Chair) BRITISH COLUMBIA	Richard Shuhany ALBERTA	Lucie Bourgouin QUÉBEC	Mary Basha NEWFOUNDLAND
Brian Connick (Treasurer) NOVA SCOTIA	Dr. Frank Scott SASKATCHEWAN	Dr. Dennis Furlong NEW BRUNSWICK	Dr. Michel Rouleau CANADIAN THORACIC SOCIETY
Carmelle Mulaire (Past-Chair) MANITOBA	Curt Smith MANITOBA	Brian Connick NOVA SCOTIA	Bertha Schofield CANADIAN RESPIRATORY HEALTH PROFESSIONALS

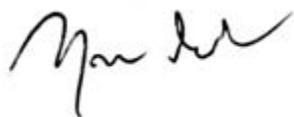
Message from the President and Chief Executive Officer

The year 2008 was one of both reflection and celebration. The Association marked a major milestone with the 100th anniversary of the Christmas Seal – an enduring symbol of the grassroots support of Canadians that helped win the fight against TB. A century later, the Christmas Seal continues to be our most important fundraiser.

With the launch this year of our historical video: *The Lung Association Story* we were reminded that although we have made incredible progress in advancing lung health in Canada, we still have much work to do. Every 20 minutes one Canadian will die of lung disease. First Nations, Inuit and Métis carry a heavier burden of lung disease than the rest of Canadians. The need is great, but I remain hopeful of the future.

Hundreds of stakeholders are rising to the challenge of lung disease with the development of the Lung Health Framework. This “made in Canada” action plan – the first health plan to include an emphasis on health and environment – is a coordinated effort to improve prevention, detection and management of lung disease, through increased awareness, best practice programs, dedication to research and increased professional capacity. The federal government’s funding commitment of \$10 million to the framework represents a major step forward.

Our achievements this year would not have been possible without the unparalleled dedication and passion of our volunteers, staff, sponsors and donors. I thank you for your support and for helping us to bring hope to millions of Canadians.



Nora Sobolov



Why We Matter

**LUNG
CANCER**

IS THE LEADING
CAUSE OF CANCER
DEATHS IN CANADA.

**EVERY 20 MINUTES,
ONE CANADIAN DIES OF
LUNG DISEASE.**

**ALMOST 3 MILLION
CANADIANS HAVE ASTHMA**

**COPD IS THE FOURTH LEADING CAUSE OF DEATH IN CANADA.
TREATMENT AND PULMONARY REHABILITATION CAN IMPROVE QUALITY OF LIFE.**



Mary Stewart, of Ottawa, Ontario, is a former nurse who has been living with chronic obstructive pulmonary disease (COPD) for 18 years. "I've seen people who have been diagnosed with COPD take to their chairs. I saw that happen with my mother. You have to keep moving. The less you do, the less you can do. Pace yourself and don't give up."

IN 2008, 21,000
CANADIANS DIED
PREMATURELY FROM
THE EFFECTS OF
AIR POLLUTION.

ONE OUT OF 25 CANADIAN MEN
AND ONE IN 50 WOMEN SUFFER
FROM SLEEP APNEA.

5 MILLION CANADIANS SMOKE. 90% WANT TO QUIT BUT NEED
HELP, ACCORDING TO OUR 2008 GROUND-BREAKING REPORT,
MAKING QUIT HAPPEN.

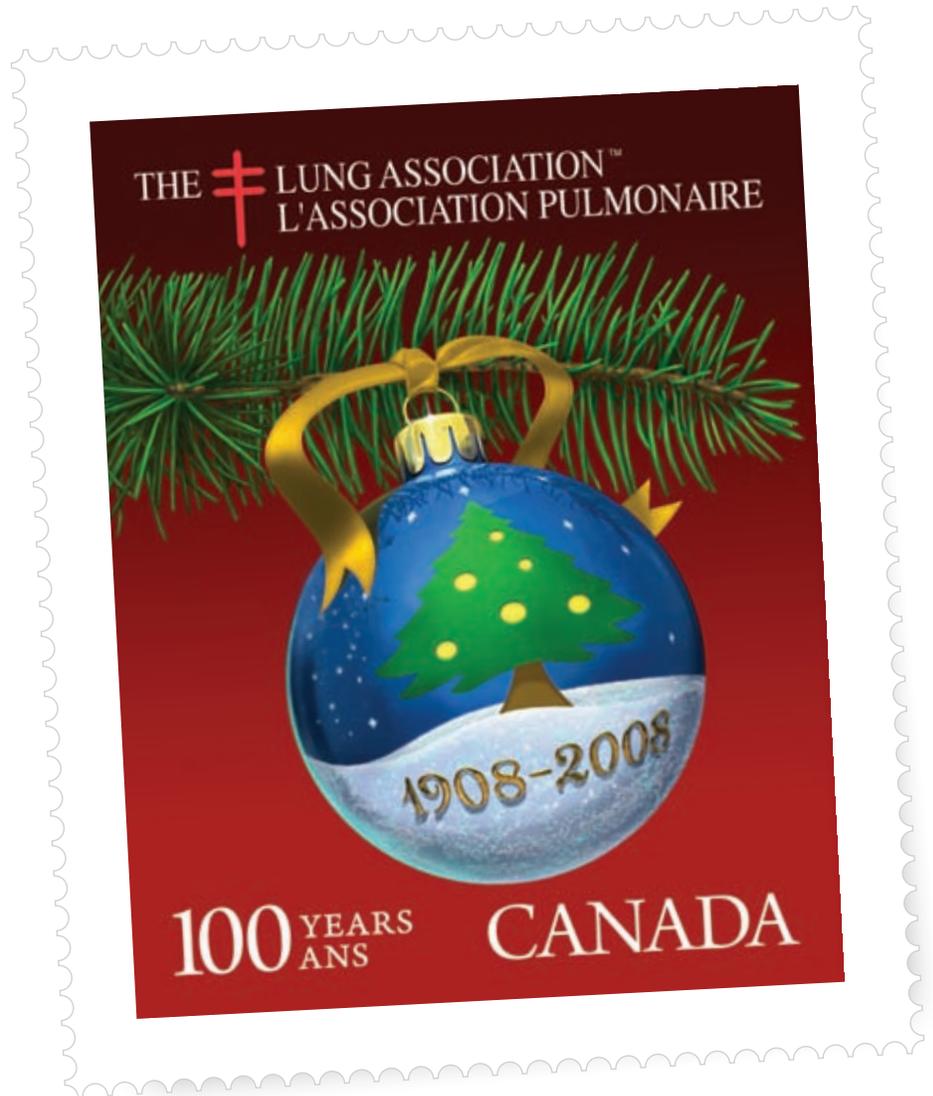


Eugennie and Reginald Mercredi of Cross Lake, Manitoba, are inspiring others to quit smoking like they did. "There are a lot of people smoking in our community. And there's a lot of cancer, too. So that really motivated us to do something," says Eugennie. "That's why we started The Blue Light Project. It's brought a lot of awareness about smoking in our community. We hope other communities will adopt the project, too."

What We Do

Since 1908, we've had a rich history of providing a broad range of vital lung health services to Canadians. We lead national and international initiatives in lung health and remain a trusted source for lung information.

We work at the national, provincial and community levels to improve and promote lung health. We focus on chronic lung disease, such as asthma, chronic obstructive pulmonary disease (COPD); infectious diseases (TB, flu and pneumonia); and breathing disorders, like sleep apnea.



We provide reliable and trusted information to Canadians about lung health, disease awareness, prevention and treatment. Our website, www.lung.ca, received more than 1.5 million unique visitors and 1.4 million lung health education pamphlets were downloaded last year.

We advocate to governments at every level to create laws and policies that promote clean air and protect our lungs. In early 2009, our “smoke-free cars for kids” campaign gained further momentum when Ontario joined Nova Scotia and British Columbia to enact legislation that will ban smoking in vehicles with children.

We help smokers who are trying to quit and provide educational material and programs to make sure fewer people take up smoking. Our ground-breaking national report on tobacco, entitled “Making Quit Happen”, released in May 2008 has influenced policy and decision makers to invest in three key areas: training for family physicians and other health-care professionals; improved access to medications; and the provision of culturally sensitive cessation support and programs for First Nations, Inuit and Métis peoples.

We fund world-class medical research in Canada to find treatments and ultimately cures for lung diseases. Our national scientific programs and provincial grant-in-aid programs funded more than \$1.5 million in grants, awards, fellowships and studentships. One of the ways we’re making an impact is by supporting researchers to find ways to help people with COPD and their caregivers cope better. This not only empowers them, it also reduces hospital visits.

We help doctors and health professionals set the highest standards in patient care and continue to expand knowledge about lung diseases and treatments. In 2008, new professional guidelines for the treatment of sleep apnea and tuberculosis were established.

We support other countries in their efforts to prevent lung disease. We provide technical support for the national tuberculosis and tobacco control programs in Ecuador. Our partnership with several Canadian non-governmental and international organizations in organizing two tobacco control workshops has helped Caribbean and Latin American countries to implement an international framework convention for tobacco control.



The National Lung Health Framework

The National Lung Health Framework is a “made in Canada” action plan developed by and for a wide range of stakeholders working to improve lung health. Its coordinated approach to the prevention and management of respiratory diseases will have a significant positive impact on the state of lung health in Canada.

Because respiratory disease encompasses many illnesses, any attempt to reduce its impact requires the involvement of many different levels of government, agencies and industry players. It is complex and a number of approaches are needed to find and implement a solution. Only a coordinated effort can succeed.

Over the past year, we worked very hard to ensure that the National Lung Health Framework was a major priority in the 2008 federal election. In early 2009, the federal government committed \$10 million to take action on lung health. This funding represents an important – and necessary – initial investment in the goals and objectives of the Framework.

We look forward to using this initial investment to continue to develop our action plan and begin critical projects which will bring us one step closer to achieving excellent respiratory health for all in Canada.

Leading initiatives. Bringing experts together. Galvanizing action.



Government Affairs

It was a banner year for The Lung Association on the federal scene as we successfully gained a commitment from the Government of Canada to take action on the prevention, treatment and management of lung disease.

"My Lungs Need Your Vote", our intensive cross-Canada advocacy campaign, called for strong action on three critical issues: cleaner air to help Canadians breathe easier at home, at work and at play; additional funding for research into lung disease; and, start-up funding for the National Lung Health Framework – Canada's first-ever action plan on lung health.

Four of the five major political parties committed to taking action on lung disease, and the Conservative Party of Canada pledged to fund a national action plan on lung health. That commitment was then enshrined in the 2008 Throne Speech outlining the government's priorities for Parliament.

On cleaner air, we continue to make our voice heard as part of a high-level group of stakeholders working together with Environment Canada on developing real solutions to reducing industrial emissions and cleaning up dirty air.

We also continued our campaign to ban smoking in cars where children are present – what started as a grassroots initiative in Wolfville, Nova Scotia, has grown into a nationwide push for smoke-free vehicles for our young people. Ontario, Nova Scotia, British Columbia and the Yukon all have enacted laws to ensure smoke-free cars for children, while New Brunswick and Prince Edward Island have signaled their intentions to introduce legislation.

Research continues to be a priority for the Association. We'll continue – on behalf of Canadians of all ages and backgrounds – to advocate for more investment in research to ensure Canada is a world leader in the global fight against lung disease.

Working with decision makers. Offering solutions. Effecting change.



Research and Knowledge Translation

We fund world-class medical research in Canada to find treatments – and ultimately a cure – for lung diseases. Through the Canadian Thoracic Society and Canadian Respiratory Health Professionals, we help doctors and allied health professionals set the highest standards in patient care, and continue to expand their knowledge about lung diseases and treatments.

Our national scientific programs, financed by annual contributions from each provincial lung association, funded more than \$1.5 million in grants, fellowships, studentships and awards. Collaborations and partnerships with government, leading health-care companies, and health charities have been fundamental in leveraging more research dollars and building additional capacity in our respiratory community.

Our volunteers are the key to the success of our research programs. In particular, we would like to thank our outgoing committee and panel chairs for all their hard work and leadership throughout their terms: Dr. Irvin Mayers, Chair of the CTS Research Committee; Dr. François Maltais, Chair of the Clinical Science Panel for the National Grant Review; Dr. David Proud, Chair of the Basic Science Panel for the National Grant Review; and Nancy Garvey, Chair of the CRHP Research Committee.

Collaboration and partnership with the Canadian Institutes of Health Research and leading health-care companies and non-government organizations have been fundamental in leveraging more research dollars and building additional capacity in our respiratory community.

Funding world-class research. Promoting excellence. Setting priorities.



**Donna Goodridge,
Ph.D., RN**

Associate
Professor,
University of
Saskatchewan
College of
Nursing

“ I'm working with a team of researchers who are looking at ways we can improve support for people with COPD and their caregivers, so that we can reduce hospital visits and help them manage their diseases better. ”



**Dr. Louis-Philippe
Boulet**

Chair of
the Canadian
Respiratory
Guidelines
Committee

“ We are leading the way in translating clinical practice guidelines into practical tools for the diagnosis and management of respiratory disorders in Canada. ”

Awareness

Chronic lung disease can sometimes go undetected until it has reached later stages. Early detection of lung disease means earlier treatment. And that can help improve on the outcome for the patient. That's why raising awareness about chronic lung disease is so important. Here is a selection of some of the awareness campaigns we worked on this past year.

Our Faces of COPD campaign continued to bring a first-person perspective to chronic obstructive pulmonary disease through web-based profiles, print-based advertising and radio public service announcements. Faces of COPD featured patients with COPD and health-care professionals, like Dina Brooks, a research scientist with the Toronto Rehabilitation Institute and a member of the leadership council for the Canadian Respiratory Health Professionals.

We launched the Coast to Coast Challenge, a virtual walk to raise awareness about COPD. Canadians from across the country kept track of the minutes they walked, the kilometers they jogged and the distance they cycled to raise awareness about COPD.

This award-winning campaign united health-care professionals, people with COPD, caregivers, family and friends – all to spark awareness about a disease that's the fourth leading cause of death in Canada.

Connecting with Canadians. Sparking awareness. Making a difference.



2008 Team COPD
members: Andrea Louise
Smith, Carol Mickey,
Phyllis Kaspar

Canadian Respiratory Health Professionals

Rodel Padua,
respiratory therapist
and CRHP member



The Canadian Respiratory Health Professionals (CRHP) is our allied health professionals section. CRHP advises The Lung Association in the promotion of lung health, and the prevention and management of lung disease through its expertise in practice, education and research related to respiratory health care in Canada. CRHP is proud of its growing capacity and scope. Among our key accomplishments this past year:

- Increasing involvement and representation of our members in the advocacy and health education initiatives of The Lung Association;
- Awarding of six grants and six research training fellowships to CRHP members for master and doctorate level studies;
- Participating actively in the development of the National Lung Health Framework Action Plan;
- Co-organizing the second Canadian Respiratory Conference in partnership with the Canadian Thoracic Society, the Canadian COPD Alliance and The Lung Association;
- Recognized academic excellence through the provision of eight Student Excellence Awards, a partnership initiative with the Cardio-Respiratory Division of the Canadian Physiotherapy Association.

We look forward to further consolidating our achievements, engaging in collaborative partnerships that serve our members, and growing in strength and number.

Sharing scientific knowledge. Managing lung disease. Collaborating together.

Canadian Thoracic Society

Founded in 1958, The Canadian Thoracic Society (CTS) is our medical section. The CTS promotes lung health by supporting the respiratory community through leadership, collaboration, research, learning, and advocacy, and by promoting the best respiratory practices in Canada. The CTS also advises us on scientific matters.

In its Jubilee Year, CTS membership rose to more than 500. With the help of its members, CTS continued advancing respiratory health and medicine in Canada by:

- Delivering the first annual Canadian Respiratory Conference (Montréal, June 2008) in collaboration with its partners, the Canadian Respiratory Health Professionals, the Canadian COPD Alliance and The Lung Association;
- Ensuring excellence in the development of evidence-based respiratory guidelines and knowledge translation, and establishing an annual process for guidelines review through the Canadian Respiratory Guidelines Committee;
- Supporting the development of the National Lung Health Framework through the provision of medical and scientific expertise;
- Strengthening the CTS infrastructure and membership base through innovative administrative and communication measures as well as through the initiation of a governance review;
- Delivering outstanding continuing medical education to specialists in respiratory medicine through the annual CTS Scientific Program at the 2008 CHEST Conference.

The CTS is proud of its achievements and of its continuing collaboration with The Lung Association. Together, we're helping Canadians breathe easier!

Medical expertise. Advancing knowledge. Establishing standards.



Dr. Jeremy Road,
a CTS member, with
patient Joe Terheide

Corporate Recognition

We gratefully acknowledge the support of our corporate partners.

These corporations have demonstrated their commitment to lung health by aligning with the Canadian Lung Association. Companies who support our work are not only good corporate citizens, but they are sending out a message to their employees, customers and communities that their lung health is important, too.

Every donation makes a difference. We'd like to thank our national corporate donors who are making lung health their business.

[Abbott Laboratories Ltd.](#)

[Actelion Pharmaceuticals Canada Inc.](#)

[AstraZeneca Canada Inc.](#)

[Bayer HealthCare Pharmaceuticals](#)

[Boehringer Ingelheim Canada Ltd.](#)

[Encysive Pharmaceuticals](#)

[GlaxoSmithKline Inc.](#)

[Graceway Pharmaceuticals](#)

[Janssen-Ortho Inc.](#)

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[Novartis Pharmaceuticals Canada Inc.](#)

[Nycomed Canada Inc.](#)

[Olympus Canada Inc.](#)

[Pfizer Canada Inc.](#)

[Talecris Biotherapeutics Ltd.](#)

[Unither Biotech Inc.](#)

[VitalAire Canada](#)

[West Park Healthcare Centre](#)

We would also like to gratefully acknowledge the support of the Public Health Agency of Canada and the many other businesses who have contributed to our provincial and local offices.

Together, we're making a difference.

Lung Champion

Shawn Strachan has only 52 per cent use of his lungs, but that hasn't stopped this 45-year-old with asthma from competing in triathlons – an activity that many with normal lung capacity would hesitate to consider.

When he was 11, Shawn Strachan was diagnosed with asthma. Up until his thirties, asthma ruled his activities and hindered his ability to participate in many sports. He decided to stop letting asthma control his life. In 2004, a colleague challenged Shawn to participate in the Stony Plain triathlon in Alberta. So he started training. "I couldn't quite keep up with everybody and I thought maybe I was just out of shape, but my lungs just weren't the same," he told an *Edmonton Journal* reporter in an interview.

Shawn visited a lung specialist and learned how limited his lung capacity was. Undeterred from his goal, Shawn worked with doctors, so he could continue to train. Armed with an asthma action plan, Shawn knew exactly what to do if he had any trouble breathing. Through dedication and relentless training, Shawn crossed the finish line of his first triathlon race with friends and family cheering him on.

Since then, Shawn has participated in several triathlons, using his puffer whenever he needs it. "It's like trying to breathe through a straw while you're running, so it's extremely hard to get air in and out."

This October, Shawn will face his greatest challenge yet when he participates in the 2009 Ironman race in Kona, Hawaii. Known as the ultimate triathlon challenge, Shawn's lungs will power him through a 42-kilometre marathon, a four-kilometre swim and a 180-km bike ride.

Shawn is not only a role model, he's a Lung Association donor. "I support The Lung Association because of the amazing work they do to improve the lives of people with asthma. The funds they raise to support asthma research, all they do to increase awareness and their education programs make a great difference. They truly help people with asthma, and all respiratory illnesses, breathe easier."

“It's like trying to breathe through a straw while you're running, so it's extremely hard to get air in and out.”



credit: Rick Macmillan, The Journal, Edmonton Journal

Shawn Strachan, donor and role model

Statement of Operations

FOR THE YEAR ENDED MARCH 31				2009	2008
	General Fund	Research Fund	International Project	TOTAL	TOTAL
REVENUE					
Provincial assessments	\$790,612	\$307,468		\$1,098,080	\$1,235,986
Program and projects	733,052	10,000	225,621	968,673	1,132,643
Sponsorship	2,010,105	63,643		2,073,748	1,497,961
Corporate donations	2,261			2,261	23,626
Bequests and memorials	51,807			51,807	21,654
Membership	63,813			63,813	45,739
Sale of materials	25,056			25,056	83,548
Recovery of prior year awards	-	15,065		15,065	42,844
Interest and investment income	109,700	82,884	568	193,152	252,907
Miscellaneous & other income	22,584			22,584	
Courses and registration fees					38,585
Conference registration	276,682			276,682	5,600
	4,085,672	479,060	226,189	4,790,921	4,381,093
EXPENSES					
Committees	92,780	118,409		211,189	131,284
Programs and projects	2,232,966	312,916	226,189	2,772,071	2,581,329
Working groups	33,535			33,535	66,525
Societies	975,248			975,248	792,455
General administration	723,093	13,015		736,108	802,357
	4,057,622	444,340	226,189	4,728,151	4,373,950
Excess (deficiency) of revenue over expenses before unrealized items	28,050	34,720	0	62,770	7,143
Unrealized gain/(loss) on investments	26,445	36,518		62,963	(6,065)
Excess of revenue over expenses for the year	\$54,495	\$71,238	\$0	\$125,733	\$1,078

"The condensed financial information above has been extracted from the Audited Financial Statements. The 2009 report of the Auditors, Collins Barrow Ottawa LLP and complete audited financial statements, which include notes and more detailed financial information, are available for examination at the office of the CEO and Director of Finance."