The Quarterly Newsletter of Epilepsy Newfoundland and Labrador

Fall 2005

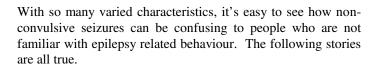
THOSE SNEAKY NON-CONVULSIVE SEIZURES

When Epilepsy gets Mistaken for Other Things

adly, many people still think that a seizure is only a seizure when it involves falling to the floor with convulsions, muscles stiffened and shaking all over.

This can pose a bit of an issue for people who don't have this type of seizure, but instead have non-convulsive seizures such as absence (petit mal), or complex partial.

Non-Convulsive Seizures, as the name suggests, are a whole class of seizures that do not involve any sort of convulsive activity. They can look like so many different things that it can be a little harder to identify them, unless you know what to look for. They can include behaviours such as staring off into space, appearing dazed and disoriented, exhibiting random repetitive, and sometimes odd movements such as lip smacking, picking at things, or pulling at clothes, and walking aimlessly, or even running in apparent fear.



Mistaken for Anti-Social or Illegal Behaviours

"Mary, a 36 year old housewife, was shopping at a department store. She was just reaching up to put a toy in her cart when she went into a complex-partial seizure. As a typical characteristic of these seizures is repetitive actions, she continued to pile her cart high with toys. When she regained consciousness, she was out in the parking lot surrounded by store security guards. The police were called and she was arrested for shoplifting. As she had no previous record for theft, the charges were subsequently dropped after discussion with her neurologist and family."



"Dave, a 42 year old musician once suffered a seizure outside a club after hours, during which he was robbed of his money and guitar, and beaten as a drunk. The police who arrived rousted him for appearing drunk in public and eventually arrested him for protesting and belligerence. This tragedy is even more ironic because Dave does not consume alcohol. He learned in his early years that even a small amount of alcohol would trigger seizures."

Mistaken for Other Disorders or Medical Conditions

"Sarah, a 28 year old student, first started having partial seizures as a teenager. Misdiagnosed as a paranoid schizophrenic, for years she suffered more from inappropriate medical treatment than from her seizures. Despite repeated incarcerations in institutions and the toxic effects of drugs, it was only after she was assigned a new psychiatrist did they start looking into the possibility that she may actually be having seizures. The psychiatrists never thought to rule out epilepsy first."



"Fred is a 78 year old retiree. Two years ago he started displaying odd behaviours on occasion, such as rocking or mumbling and picking at things. Living in a seniors facility, the staff and doctors assumed that he was developing signs of dementia and was treated accordingly. It took several months and the insistence of one of Fred's granddaughters to convince the doctors to test for seizures. Six months after Fred was placed on anti-epileptic medication, he was seizure free."

What Can You Do?

- X If you have seizures, let people know ahead of time. That way, if confusing behaviour should happen, people will be able to understand and act appropriately.
- X If you believe that behaviour you are experiencing may be seizures but they have not been diagnosed, insist on tests to find out for sure. The more you know, the better you can take control of your own seizure management.

Pamela Anstey, Information Officer, ENL, October 21, 2005

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NOTES FROM PAM

Greetings Everyone!

I've had something on my mind lately that's been bugging me a great deal. It has to do with political correctness. Sure we all try to not offend anyone with the things we say, but don't you think that perhaps things have gone a little too far sometimes?

It can be an interesting challenge to keep a fine line between wanting to be as open and understanding as possible, and being just plain silly. Those of us who live or work with epilepsy and seizures get very upset when someone says that a person is epileptic. Epilepsy is what a person has, not who they are. We far prefer the term "person with epilepsy". Things like that go a long way to help people realize that epilepsy is not the whole of someone's life.

That sort of political correctness is great, and actually helps everyone, but I was reading an article the other day about a study to determine whether the word "brainstorm" was offensive to people with epilepsy. Now the word brainstorm, which you probably know, has nothing to do with epilepsy or seizures. Yet this little word seems to have caused quite a stir.

"The word has been used since the 1940s to describe the method of problem-solving or generating ideas where all present at a meeting make spontaneous suggestions. In the last year, it has been reported in the press that both the Welsh Development Agency and the Department of Enterprise, Trade and Investment in Belfast have deemed the word brainstorming to be politically incorrect, with 'thought-showers' suggested as a suitable replacement." (Epilepsy Action News, September 15th, 2005)

Thought-showers? Oh please! So the powers that be set about to research whether or not the word brainstorming really was offensive to folks with seizures. Not surprisingly, the response to this detailed research found that no one thought brainstorming was the least bit offensive at all, and thought the whole research was pretty pointless..

What bothers me the most about this, is that several groups spent lots of time and money first to determine the word was offensive, and then to research further to find out it was not. What an incredible waste of funds and resources. Surely they could have found something better to spend their money on, like education or supports for people who actually have epilepsy, or perhaps some real research into causes and new treatments for seizures.

Then again, maybe I'm just not politically correct enough.

Pamela Anstey Information Officer

DISCLAIMER

The materials contained in the Epilepsy Newfoundland and Labrador newsletter are to provide general information about epilepsy to the public. The information presented is not intended as medical or legal advice. Epilepsy Newfoundland and Labrador, its employees, board members, medical advisors, volunteers, agents and sponsors do not assume responsibility for inaccuracies or omissions or for the consequences from the use of the information obtained in this newsletter. Epilepsy Newfoundland and Labrador is not liable for any outcome or damages resulting from information in either a direct or indirect form. We recognize that each individual' s experience of epilepsy is different. Consult your physician and/or neurologist with any questions you have.

People with epilepsy should never discontinue anti-epileptic medications or make changes in activities unless specifically advised to do so by an attending physician.

THEY SAY I'M DIFFERENT, BUT YET I'M NOT

s I begin to tell my story, it's sad to say but I am one of the people who has lived her life hidden in the shadows, and it is only these past few years that I have actually spoke openly of my seizures and what it was like for me growing up.

You see, I grew up in a home where there were five of us; me and my two sisters, along with my parents. Growing up with epilepsy was not always easy for me where I was the only one in the house with a medical problem. With me having all these problems, I found it very hard at times, where I was always pitied and never allowed to enjoy life the way that I should have.

There would be times when I would get sick with a seizure and go to a clinic or a doctor's office and if the person sitting next to me asked what was wrong, my mother would be sitting and staring at me, and if I told the person what had happened, she would always say, 'Now Chris, there's no need to tell them that."

Yet it was the truth, I was there because I had a seizure. My mother always seemed in denial; she could never accept the fact that I do have epilepsy and that I could live a normal life like any other child.

My sisters never understood either. There were times at the dinner table that they would say, "Here she goes again. We can't eat a meal to this table without her being retarded and spoiling dinner or supper."

But I wasn't 'retarded'. I had a brain disorder caused by a stroke that I suffered when I was a baby, which left me with a blood clot on my brain. This caused me to have seizures from time to time, but yet my sisters never seemed to understand. To this very day they seem to think the same way and know very little about the disease.

My youngest sister seems to think that all people who have seizures are the same way, whereas we all know that no two people in the world are alike.

Because of my parents, and mostly my mother, I was always made to feel ashamed of my seizures. Here I was a little girl who knew no better at the time.

Years later as I grew older I continued to be ashamed of my seizure disorder. It wasn't until my two children were seven and eight years old before they were told that what was happening to their mother was a seizure and that when she wakes up she will be all right. Even though my children seemed to understand, I still couldn't. There was a part of me that still felt that shame, and believed society would look at me differently.

Things are different now. I am a grown woman who has overcome many things.

In June of 1998 I ended up having a stroke due to having so many seizures in a row. I had to learn to read and write and do many things all over again.



Today I am on Neurontin, phenobarbital, and Dilantin which keeps my seizures under control. I am happy to say that I only seizure now if I have an infection.

Otherwise I am doing well. I can read and write pretty well and most of my learning has come back. I still need some help with the words from time to time, but I can hold my head up high and be proud of all that I have accomplished.

With my grand mal seizures under control, I can live a normal life. Although there are times I do have small seizures where I am still aware of what's going on around me. I am told I will say things like, "What are you looking at?" yet I have no control over this. I wonder if I say things like that because I grew up in denial all those years and I still carry some of the shame that I was taught through my parents and sisters. That's really a question no one knows.

A few years back Epilepsy Newfoundland and Labrador used the slogan 'Out of the Shadows and Into the Light." It wasn't until then that I really sat back and began to realize that I am one of those people, and that I no longer have to stand alone.

Through reading newsletters and becoming a member I began to realize that I am no longer alone and it is time for me to come out of the shadows and finally face the light.

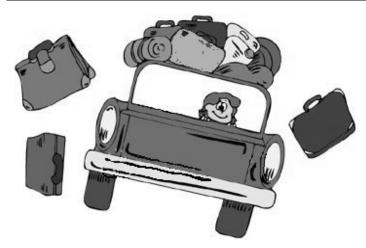
After all, they say I am different, but really I'm not. I never let my medical condition get the better of me. I take each day as it comes and no matter what, I fight!

Christina Keough ENL Member

~ A woman who spent most of her life hidden in the shadows, and now today, thanks to my husband and friends, along with my doctors and Epilepsy Newfoundland and Labrador, that I can finally see the light.

Don't ever take a fence down until you know why it was put up. --G.K. Chesterton

EXCURSION 'ROUND THE BAY - ENL HITS THE WEST COAST!



even hundred and forty - that's the total number of people who attended the sessions and school presentations during the third 'Excursion 'Round the Bay". This year, I piled the car full of boxes, bags, posters and all manner of information stuff and set out for the mountains of the west coast of Newfoundland for seven days. I couldn't have picked a prettier time of year as all the trees were in full blazing colour. Throughout the visit I made stops in Deer Lake, Corner Brook, Stephenville, and all over the Port au Port Peninsula. What a trip!

One of my very first stops was a meeting with the staff of the Newfoundland Insectarium just outside Deer Lake. For those of you not familiar with the place, it is a insect interpretation centre, with live displays of all manner of bugs and creepy crawlies.

Folks, I have a confession. I am terrified of beetles - not spiders or bees or anything like that. Beetles, and all things beetle-ish just make me panic and run. So upon my visit to the Insectarium I was apprehensive enough. With a deep breath I go in and strike up a conversation with the tour guide about seizures and epilepsy. As I am talking I notice out of the corner of my eye this **thing** peeking out from under the baseboards. Glancing down, I expect every bit of blood drained from my face, for quickly scurrying across the floor at my feet is a four inch long cockroach, a Madagascar Hissing Cockroach to be precise, the sort they make people eat on those reality shows.

I screamed, the tour guide ran, the manager appeared from somewhere and scooped the thing up into his hands, reassuring me that they have never before had a bug get loose in all the years the Insectarium has been there, and the little guy must have escaped from the lab. He then proceeded to offer me a complimentary tour, as if being offered the opportunity to see even more of these things would be a nice and special treat. Needless to say, I gracefully declined his offer! (

The rest of the trip was mercifully cockroach free as I visited a wide range of different organizations, community groups, medical services and schools. My sessions included

X 25 different K-12 School classroom

X 6 Community Groups

X 5 Law Enforcement - including both RCMP and RNC

X 5 Health Care - Hospitals/Health & Community Services

People were incredibly enthusiastic and so willing to share their own experiences with epilepsy and seizures no matter where I went. The trip far exceeded my expectations in almost every way.

My one disappointment with the whole trip actually came before I even left St. John's. During the planning and preparations for the trip, I called every single K-12 school in the Corner Brook area. Even after an explanation how important it would be for their staff and students to understand more about seizures, in the end only one school out of the nine that were contacted scheduled a presentation. One other school actually had the "courtesy" to respond with a message saying that they saw no need for any such presentation at their school, even though I was told by the health nurse that there were students with epilepsy who attended there.

This whole situation saddened and frustrated me, because even if there were no children with seizures in their schools, there is **always** a need for seizure awareness and education. If you are a parent of a child with epilepsy that goes to one of the schools in Corner Brook, and you would like to have someone from our organization talk with your child's school, ask them why they did not want a session, and let us know, we may be able to arrange another time for them.

But the disappointment regarding that issue in no way put a damper on the week. I was welcomed so warmly, and had such an amazing time. I went from sharing tears with a mom who not only had a child recently diagnosed with epilepsy, but her father as well; to sharing hugs with a teen, who for the first time admitted to her class that she has epilepsy; to sharing deep belly laughs with the young kids who got so excited that they would now know what to do when their classmate had a seizure.

People in this province are kind, understanding, and incredibly giving. To everyone that I met along the way - THANK YOU, for sharing your stories, for sharing your supper (, and for helping each other understand more about seizures every single day.

Pamela Anstey Information Officer, Epilepsy Newfoundland and Labrador October 24, 2005



STAND UP - SPEAK OUT! - LACEY'S MESSAGE

he morning of September 29th, 2004 seemed like any other day. I woke up, ate my breakfast and headed off to school, not knowing what was about to happen to my life.

I was standing in the girls bathroom while my friend glared up and down at herself in the mirror - making sure her hair and make-up was just perfect. I often wonder why people judge others by their looks or style but to her it meant the world to look good for others.

It seemed as though not one second passed by but I was on the floor feeling faint. To this day I remember not another word but my best friend's voice saying "Someone get help!"

I woke up several hours later, weak and lying in a hospital bed with my family and friends surrounding me. Tears discarded my shocked body as I could not claim the answers to the many questions the nurses were asking me. I had later been informed that had I took a seizure and shortly after that I was diagnosed with Epilepsy.

My life as an epileptic has changed my views on many things in life, but has not changed me or the way that I act. It has changed my attitude and perspective of every moment and decision I' ve had to make in my life. My friends and teachers at Holy Spirit High School have stood behind me 100 percent throughout my illness.

To this day they have been extremely caring and understanding towards the situation I am in and I thank God every day for those

who have helped me look at Epilepsy in every positive way possible. I don't have to worry about being made fun of and I don't think others look at me different. I'm still the same girl who walked through those school doors that morning. People may think I am different now, but I'm not, and I will not let anyone tell me otherwise.



My name is Lacey and I am a 16 year old female completing grade 11 at Holy Spirit High School in Manuels, Conception Bay South. I have had epilepsy for almost a year now and I have quickly come to realize throughout this year that not only do we take our good health for granted, but also that

anything could happen to anyone. It happened to me. I am an extremely strong person in the sense that I have not let my diagnosis create a negative affect on my life. I carry on with the many same activities and hobbies as I would have before I was diagnosed.

I love to help others and I would be more than happy to help to make a better tomorrow.

Lacey Scoville

Grade 11 Student Holy Spirit High, Manuels

BLOOD TEST CAN HELP DETERMINE TYPE OF SEIZURE

sing a blood test to measure the level of the hormone prolactin can help determine, in certain clinical settings, whether an epileptic seizure has occurred, according to a guideline developed by the American Academy of Neurology.



The guideline authors reviewed all of the scientific evidence available

on use of the prolactin blood test to diagnose seizures and developed evidence-based recommendations.

The blood test, which must be used within 10 to 20 minutes after a seizure, can identify the types of seizures called generalized tonic-clonic seizures and complex partial seizures in both adults and older children. The level of prolactin in the blood increases after these types of seizures occur.

The release of prolactin from the pituitary gland is controlled by the area of the brain called the hypothalamus. Researchers have hypothesized that epileptic seizures may affect the hypothalamus, altering the release of prolactin.

The guidelines found that a prolactin test can be useful in differentiating epileptic seizures versus psychogenic seizures, or seizures caused by mental problems.

There was not enough evidence to determine whether the prolactin test is useful in evaluating status epilepticus, repetitive, or neonatal seizures.

The guidelines state that the test is useful as an adjunct test, especially in cases where video EEG (electroencephalography) monitoring is not readily available. Future research needs to be done to determine whether the test is valid for younger children.

The American Academy of Neurology, September 14, 2005

Fall 2005 **Epilepsy News**

LAVENDER WRISTBAND PROJECT



e' rebringing epilepsy into the light with our new lavender wristband. With OUT OF THE SHADOWS o n e side, a n d our website. www.epilepsymatters.com on the other, we want to share with all Canadians that we will no longer hide in the shadows surrounding the disorder of epilepsy.

For too long people with epilepsy and their families have been hesitant to speak of their disorder publicly due to misconceptions that surround the disorder. Because no one spoke out, it was often difficult for the public to understand that individuals with epilepsy are no different than you or I, and that anyone who has a brain, has the potential to have a seizure. And so the circle of secrecy and shadows continued for a long time.

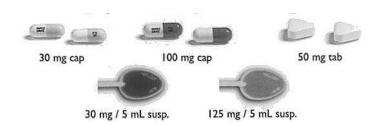
Why Lavender? Well, lavender is not only the internationally recognized colour associated with epilepsy and seizures, but the lavender flower has traditionally been a symbol for things that are hidden or isolated, much like epilepsy. Because epilepsy is often controllable with medications, it becomes invisible to most people, becoming something scary and unknown. It is by stepping out of the shadows that epilepsy will be understood, the stigma eliminated, and people who live with seizures more accepted.

Purchase a Lavender wristband for only \$3.00 from Epilepsy Newfoundland and Labrador Every penny stays right here in our province to help individuals and families dealing with epilepsy and seizures everyday.

Show your support and understanding on your wrist for all who live with epilepsy and seizures

MEDICATION PROFILES

Dilantin (phenytoin)



What is Dilantin (phenytoin)

Phenytoin is an anti-epileptic - it is used to control seizures. It works by slowing down impulses in the brain that cause seizures.

Phenytoin is used in the control of simple partial, complex partial and secondarily generalized seizures. It works less well for grand mal or tonic clonic seizures.

What are the most important things to know?

Do not stop taking phenytoin even if you feel better. It is important to continue taking the medication to prevent seizures from recurring.

Do not change brands of phenytoin without first talking to your doctor or pharmacist. Some brands of phenytoin are interchangeable while others are not. Your doctor and/or pharmacist know which brand/generic formulations may be substituted for another.

Do not crush, chew, or break the capsules. Swallow them whole. They are specially formulated to release the drug slowly into the body.

Carry or wear a medical identification tag to let others know that you are taking this medicine in the case of an emergency.

Side effects of Dilantin (phenytoin)

If you experience any of the following serious side effects, stop taking phenytoin and seek emergency medical attention or contact your doctor immediately:

- X an allergic reaction (difficulty breathing; closing of the throat; swelling of the lips, tongue, or face; or hives);
- X hallucinations;
- X slurred speech or staggering walk;
- a rash;
- X X changes in vision;
- agitation:
- X X X low blood pressure;
- slow or irregular heartbeats;
- X abdominal pain, dark urine, light colored stools, or jaundice
- X easy bruising or bleeding; or
- swollen or tender gums.

Other, less serious side effects may be more likely to occur. Continue to take phenytoin and talk to your doctor if you experience

- nausea, vomiting, constipation, or diarrhea;
- mild dizziness or drowsiness;
- X X tender or swollen glands;
- X swollen or painful gums;
- X headache;
- X muscle twitches;
- X increased facial hair;
- X swelling of breasts, or
- X insomnia.

EARN WINTER CASH

e' relways thinking at Epilepsy Newfoundland & Labrador and we' vefound a way to offer you some Winter Cash, no matter where you live in our Province.

For the past 20 years we have been hiring people in our St. John's office to call various communities asking people to collect for us during our March Door to Door Campaign. This year we want to send the materials to our members, staff, volunteers and friends and have you get paid for working from your own home.

Here's how it works:

- 1. You chose the community you would like to call (communities are distributed on a first come, first served, basis)
- 2. We send you a street map and phone book of the area, along with a list of names NOT to call...if there are any.
- You may call as many or few hours as you wish during the month of January only. (There are no minimums or maximums)
- At the end of each week, you send us the names of the people willing to collect (paper and return envelopes will be provided)
- We list your people in our computer, with your name attached to each. We send out the kits and have them returned to our office, as always.
- 6. At the end of our campaign we send you a check for \$5.00 for each of your people who collected. (10 people = \$50, 100 people = \$500)

Return the form below to:

Gail Dempsey, Executive Director, Epilepsy Newfoundland & Labrador, 261 Kenmount Road, St. John's, NL, A1B 3P9.

Remember the earlier you apply the better chance you have of getting your first choice of communities.

YES! I WOULD LOVE SOME WINTER CASH Name:______ Mailing Address:______ Phone # (day)_____ (evening)_____ Community I would like to call: First choice Second choice_____ Don' t care, you choose

CHRISTMAS TEA FOR EPILEPSY

Walk-a-thons have you going in circles? Canvassing leave you cold? Here's a charitable event that just might be your cup of tea.

am delighted to invite all groups, organizations, businesses, and members to partner with Epilepsy Newfoundland and Labrador in our *Second Annual Christmas Tea for Epilepsy* project

All you need to do is sit back, relax and enjoy a cup of tea on us, any time during the week of December. In return, we're asking if you would donate the money you might have spent on your break to Epilepsy Newfoundland and Labrador.

We will provide a basket of epilepsy stories, puzzles and information, and your tea and goodies - you provide the good will and community spirit.

If you are interested in participating in this event and helping to further epilepsy awareness and services, just give me a call at 1-866-EPILEPSY or locally at 722-0502 and let me know how many tea packages you will need and we will do the rest.

Bonnie Green, Special Events Coordinator



If you were going to die soon and had only one phone call you could make, who would you call and what would you say? And why are you waiting? --Stephen Levine

ANNOUNCEMENTS AND APPRECIATIONS

Annual General Meeting

All eligible members are invited to attend the 2005 Annual General Meeting of Epilepsy Newfoundland and Labrador on November 23, 2005 at 7:30 p.m.

"All members whose membership fees have been paid 30 days prior to the meeting shall be entitled to attend such meeting and to vote thereat."

For members in the St. John's area, the meeting will be held at the Epilepsy Newfoundland and Labrador offices

For members outside the city, we are pleased to provide a teleconference connection to anywhere in the province so that everyone who wishes to participate can do so. Please let us know by November 8th if you wish to be connected by teleconference.

If you have any questions, or would like to find out about the nominations process for electing board members please contact:

Gail Dempsey, Executive Director 709-722-0502 or Toll Free: 1-866-EPILEPSY (374-5377)



Announcing the Connections Program!

Sometimes it can be lonely living with epilepsy when no one around seems to know exactly what you' re going through.

Here at Epilepsy Newfoundland and Labrador we do our best to help and listen in any way we can, but we realize that there may be times when people might need someone who has been there, or are still there, just to share experiences, challenges, frustrations and successes with.

So we are introducing our new *Connections* program.

Some of you may remember our PAL program from years ago. It will be similar but will operate in a different way. We will be accepting names and contact information from any of our members who might be willing to talk with other people in similar circumstances. Then, when someone calls looking for a person with whom they can talk, we will know just who to contact.

Even if you have registered, we will contact you first and let you know that there may be someone who could use your friendly ear, and get your ok to give them your contact information. To let me know that you would be willing to be a *Connection*, call or email Pam at the Epilepsy offices.

Special Events Update

I can't believe I'm actually talking about our Christmas Tea for Epilepsy again already. Where has the year gone?

During the Month of December we will be delivering baskets filled with tea, cookies and surprises to many businesses in the Mount Pearl and St. John's area. If you are interested in coordinating a Christmas Tea at your office, please give me a call.

We are currently selling epilepsy awareness wristbands for \$3.00 each. You can find out more about them in the article in this newsletter. We have very limited amounts available and when they are sold, we will not be getting more. Please call me at the office and we can arrange to have them sent to you.

Bonnie Green Special Events Coordinator



Epilepsy Express Secret Word Contest

Each quarter we will be drawing for a winner in our *Epilepsy Express Secret Word* contest. You may have seen it. If not, drop us a line and we will gladly send you a copy of the *Epilepsy Express* which will tell you just how you can enter and win.

The fall winner of the Secret Word for Understanding Contest is:

B. Glenn Marche
of Stephenville

Glenn wins a special prize pack, filled with goodies and information about epilepsy.



I ain't saying the customer service in my bank is bad, but when I went in the other day and asked the clerk to check my balance...she leaned over and pushed me.

-- Anonymous

Foot: A special device for finding furniture in the dark.
-- Unknown

TIME OUT

Soldiers

Soldier A has a brother B who was wounded in a battlefield.

This brother B, who is also a soldier, claims that he does not have any brother!!!

How can this be?



Box Full of Kisses

Some time ago, a man punished his 3-year-old daughter for wasting a roll of gold wrapping paper. Money was tight and he became infuriated when the child tried to decorate a box to put under the Christmas tree. Nevertheless, the little girl brought the gift to her father the next morning and said, "This is for you, Daddy."

He was embarrassed by his earlier overreaction, but his anger flared again when he found the box was empty. He yelled at her, "Don' t you know when you give someone a present, there' s supposed to put something inside it?"

The little girl looked up at him with tears in her eyes and said, "Oh, Daddy, it's not empty, I blew kisses into the box. All for you, Daddy."

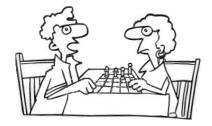
The father was crushed. He put his arms around his little girl, and he begged for her forgiveness. It is told that the man kept that gold box by his bed for years and whenever he was discouraged, he would take out an imaginary kiss and remember the love of the child who had put it there.

In a very real sense, each of us as humans, have been given a gold container filled with unconditional love and kisses from our children, friends, family.

~Author Unknown

How Puzzling

Two people played chess. They played five games. There were no tied games, and each won the same number of games. How?



Dinner's Ready!

One Sunday morning when my son was about 5, we were attending church in our community. It was common for the preacher to invite the children to the front of the church and have a small lesson before beginning the sermon. He would bring in an item they could find around the house and relate it to a teaching from the Bible.

This particular morning, the visual aid for his lesson was a smoke detector. He asked the children if anyone knew what it meant when an alarm sounded from the smoke detector.

My child immediately raised his hand and said, "It means Daddy' s cooking dinner."



The Test

Two men, Robert and James, applied for a job at Mile One Stadium. Both applicants having the same qualifications were asked to take a test by the department manager.

Upon completion of the exam both men only missed one of the questions. The manager went to Robert and said, "Thank you for your interest, but we' ve decided to give James the job."

Robert replied, "Why? We both correctly answered nine questions. I believe I should get this job, especially since I' ve grown up in St. John's and James just moved here."

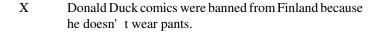
The manager said, "We made our decision not on the correct answers, but on the question you missed."

'How could one incorrect answer be better than the other?," asked Robert. 'Simple," said the manager. "James put down on question #5, ' I don' t know', and you put down, ' Neither do I.'

BITS AND PIECES

Did you Know?

- X A rat can last longer without water than a camel.
- X Your stomach has to produce a new layer of mucus every two weeks or it will digest itself.
- A duck' s quack doesn' t echo. N X one knows why.
- X A 2 X 4 piece of lumber is really 1-1/2 by 3-1/2.
- X On average, 12 newborns will be given to the wrong parents daily.



- X There are no words in the dictionary that rhyme with orange, purple, and silver.
- X The phrase "rule of thumb" is derived from an old English law which stated that you couldn't beat your wife with anything wider than your thumb.
- X Celery has negative calories. It takes more calories to eat a piece of celery than the celery has in it to begin with.
- X Charlie Chaplin once won third prize in a Charlie Chaplin look-alike contest.

Puzzle Answers

Soldier A is a woman, his sister.

each other.

How Puzzling - The two people were not playing against



"Has anyone claimed responsibility yet?"

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