



# Saskatoon Ostomy Association Bulletin

Internet web page - > <http://members.shaw.ca/saskatoonostomy>

Mailing Address ----> 1610 Isabella Street, Saskatoon, SK, S7J 0C1 Nov. 2007

## SASKATOON MEETING INFORMATION

**Location:** NorDon Drugs, Medical Center -

Louise Avenue & Isabella Street

- Wheelchair accessible
- Convenient washrooms
- Refreshments and visiting period during each meeting
- Spouses, family members and other visitors welcome

**November 5, 2007 at 7:30 pm-** Coloplast Night - Shelly Luhnning from Coloplast will have a presentation on some exciting new products

**December 3, 2007 at 7:30 pm -** Christmas Social - As in previous years, please bring a wrapped present worth between \$5 and \$10 for a gift exchange.

There will NOT be a meeting in January.

## Saskatoon Ostomy Association

### Dates to remember....

**Bingo tickets must be purchased by Saturday**

**October 27.**

**Saturday November 3, 2007**

The Saskatoon Ostomy Association 4th Annual Bingo and Supper. At the Nutana Legion 3021 Louise Street.

Begins with Cocktails 5 - 6 p.m., then Supper 6 p.m. and Bingo to follow. This event is always a great night out and the prizes are great. All funds support kids going to camp and members attending the national ostomy conference.

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# SASKATOON OSTOMY ASSOCIATION

## (A Chapter of the United Ostomy Association of Canada)

The Saskatoon Ostomy Chapter is a nonprofit mutual support society for the benefit of people who have had, or are about to have, Ostomy surgery. The purpose of our chapter is to:

- Assist the medical profession in the rehabilitation of ostomates by providing, at the request of the physician, reassurance and emotional support.
- To promote up-to-date information concerning Ostomy care and equipment to ostomates, and those involved in their care.
- To educate, develop, and promote public awareness and understanding of ostomies.

### MEMBERSHIP & DONATIONS

The annual membership fee of \$25.00 entitles you to the chapter newsletters and a subscription to the Ostomy Canada Magazine, a U.O.A. Canada publication. Bequests and donations over \$10.00 will receive an official income tax receipt.


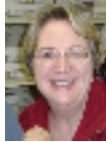


### VISITING SERVICES

We provide lay visitation service, at the request of the physician, either preoperative or postoperative, or both. The visitor is chosen according to the patient's age, sex and type of surgery. A visit may be arranged by calling the Stoma Clinic therapists at 655-2138. They will contact the Visiting Chairperson of the local Ostomy Association.




### ENTEROSTOMAL THERAPISTS AND STOMA CLINIC

**STOMA CLINIC:** Room 5706 A Wing, Royal University Hospital  
Saskatoon, Saskatchewan S7N 0X0 ..... 655-2138

#### THERAPISTS:

	Phyllis Stephens, R.N., E.T. Prince Albert SK		Teri (Smith) Schroeder, R.P.N.,R.N., B.Sc.N., E.T., IIWCC. Saskatoon SK
	Kathy Guina, B.Sc.N., E.T. Saskatoon SK		Sandy Roberts, R.P.N.,R.N., B.Sc.N., E.T. Saskatoon SK

#### MEDICAL ADVISORY BOARD

	Dr. Provash C. Ganguli, Gastroenterologist Saskatoon SK		Dr. Lawrence Taranger, Urologist Saskatoon SK
	Dr. Brian Colquhoun, Surgeon Saskatoon SK		Phyllis Stephens, R.N., E.T. Prince Albert SK

**THE SASKATOON OSTOMY ASSOCIATION ADVISES ALL OSTOMATES TO CONSULT THEIR PHYSICIAN OR E.T. BEFORE USING ANY PRODUCT OR METHOD REFERRED TO IN THIS BULLETIN OR ANY OTHER PUBLICATION**

## SASKATOON OSTOMY ASSOCIATION



President's Report - November 1, 2007  
Greetings,

It is with great sadness that I received word of the passing of Marg Chastakoff. Pat Crilly had visited her just a few days before she died in the hospital and reported to the members at the October meeting. I don't think any of us realized that God was calling her this time. Rest in peace, Marg. My wife Donna and I attended Marg's funeral. It was so nice to see so many of you there as well. Marg was well known and the funeral chapel was full to overflowing. So, once again, we are looking to fill an executive position. If you would like to take on the position of treasurer, please contact me. We will ask for nominations at the November meeting.

Duties of treasurer:

- Have the care and custody of all monies and securities of this association.
- Disburse funds of this association as directed by the membership.
- Maintain a detailed account of receipts and disbursements and make periodic reports to the membership.
- Render a financial report at the end of the fiscal year or upon request of the association.
- Be responsible for forwarding the annual UOA - Canada dues to the UOAC office according to the UOAC dues procedure.

Two youth from Saskatoon were able to attend the Ostomy Youth Camp this year. Reports were made at the October meeting. Great presentation on DVD by Jenine Boser!

Thanks to Brian Trainor who talked to us at the October meeting about Frauds and Scams. Five lucky people received door prizes of his book.

Our November 5 meeting will feature a presentation by Coloplast. Shelly Luhnig will be here. Also Coloplast has again 3

agreed to be a major sponsor at our bingo night. Not to be outdone, Convatec (Jan) will also be a major sponsor. And Hollister is on board. Nordon Medical is again sponsoring the supper. And Ed Palchinski is again donating a doll's cradle as one of the prizes.

Our December 3 meeting will be a Christmas social. As in previous years, please bring a wrapped present worth between \$5 and \$10 for a gift exchange.

Sandy and Kathy attended the first Pediatric Ostomy Conference in Canada in Montreal Oct. 1-3, 2007. I've asked their manager, Charlotte Filipchuk to come speak to our chapter meeting in February on the topic of "Changes to the Saskatoon Stoma Clinic".

A reminder that the meetings are open to anyone, you do not have to be a paid-up member to attend the meetings. Feel free to bring a family member or a friend.

Peter Folk,  
President, SOA  
Phone: (306) 384-6059  
**e-mail: peter.folk@shaw.ca**

## MEETING MINUTES



By Prem Dhir  
SASKATOON OSTOMY ASSOCIATION  
On Monday October 1, 2007

The meeting was called to order by Peter Folk at 7:35 P.M. Ray Ramage accepted the position of SASO representative. Terry and Evelyn will look after the coffee and goodies for the meetings and Sandy will be their helper.

Ricky Schmidt/Terry Schroeder accepted the minutes of Sept. meeting.

Marg Chastakoff is in St. Paul Hospital for hernia surgery. Every member introduced himself with his name, type of ostomy surgery and the area of his residence.

Esther Peechow newest member attended her first meeting.

Saskatoon chapter sponsored two children to the July Youth Camp. Youth - Jenine presented her experience with CD video.

Anybody capable of obtaining gift for the Bingo function should contact Marlyne Wight to send a letter to the donator. Further anybody interested in helping should submit his name to Marlyne.

People interested in attending Bingo function should obtain their ticket at \$25.00 each from Pat Ramage. \$20.00 donation receipt for income tax will be issued. Peter Folk received a "Thank You" card UOAC for our chapter contribution at the annual august conference in Calgary. Auction and raffle fetched \$3045 and \$860 for a total of \$3905. "WHAT A HONOR"

December meeting will consist of exchanging gift for Christmas. Every member will buy one gift for a modest amount.

Kathy has reviewed the manual which if decided will be provided to anyone prior to his/her ostomy surgery.

Evan will contribute from youth perspective.

Regina chapter will be contacted to find if it is interested in Ostomy manual so that it can be prepared jointly as Saskatchewan Ostomy manual. Further , it will be explored to find who will bear the cost of publishing it.

Laurie Beaulieu informed that the monthly news letter will be ready by the end of month.

Pat Crilly informed that members should pay their membership fee as soon as possible or at least before the end of year so that she can send their names to UOAC for magazine.

Don Adams received an inquiry for the information on ileostomy and pelvic pouch surgery.

Brian Trainor of First Sask Credit union gave a talk on "Fraud Safety Tips". It was very informative.

Motion to adjourn: Ray Ramage/Cliff Nickel.

## EDITOR'S MESSAGE Laurie Beaulieu



Hi all,

Please feel free to inform me of any errors or omissions. If there are items you would like to see in the newsletter feel free to submit them via e-mail [rlfarms@sasktel.net](mailto:rlfarms@sasktel.net) or via snail mail at box 35, Vonda, Sask. S0K 4N0



## WEB SITE UPDATE



**Webmaster's Report - August 30, 2007**

Greetings,

Our website is: <http://members.shaw.ca/saskatoonostomy/> Our website has had 21,500 visitors since December 1, 2004. You can read the obituary of Marg Chastakoff on our website as well as click on the link to view or sign the guest book. We have many links on our website to other chapters in Canada. Check them out! Happy surfing!

Peter Folk,

Webmaster, SOA



## FRIENDS OF OSTOMATES WORLDWIDE



FOW is a nonprofit organization operated solely by volunteers. Since 1986, FOW Canada has collected and sent over 50,000 KG of ostomy supplies and literature to more than 52 needy countries. Some of the countries receiving these donations are: Algeria, Bulgaria, Chili, China, Croatia, Cuba, Dominican Republic, Ecuador, Egypt, Hungary, India, Indonesia, Iran, Iraq, Jamaica, Malaysia, Mexico, Nigeria, Pakistan, Panama, Philippines, Romania, Russia-Belarus, Santo Domingo, Thailand, Vietnam and Yugoslavia.

Donations of ostomy supplies for F.O.W. can be brought to Nordon Medical Supplies or a meeting of the Saskatoon Ostomy Association.

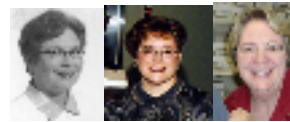
To learn more about he F.O.W., or to make a charitable donation visit their web site at: <http://www.fowcanada.org/history.htm>

**DONATIONS AND BEQUESTS**

Donations and bequests are gratefully accepted and are used to support chapter activities. Tax receipts are provided for all donations to the Saskatoon Ostomy Association.



**REGIONAL STOMA AND WOUND CLINICS**



**VISITATION REPORT**



The visitations coordinator is Don Adams. You can phone Don at 374-4965

	Aug	Sept	Oct.	Nov
Ileostomy	1	3		
Colostomy	4	1		
Urostomy				
Pelvic Pouch				

**IMPORTANT UPDATE:**

Update from the Ostomy Clinic - October 2007

It has been a busy summer and fall for the staff at the ostomy clinic. The department has undergone some changes and we would like to share the news with everyone.

The main ostomy clinic at RUH (Royal University Hospital) has changed locations! We are no longer on the main floor in room # 1610. Our office is now located on the 5<sup>th</sup> floor, in the old part of the hospital in room # 5706. All patients are seen by appointment only and when they register at the admitting desk prior to their appointment they will be given clear and simple directions so you'll have no problem finding us.

Of course, with any move there comes some chaos, but it is also an opportunity to sort through things and do some house cleaning. We are still rearranging things and getting settled but it is coming along quite nicely.

The ostomy nurses' office at SPH (St. Paul's Hospital) also made a move over the summer. Hopefully this will be the end of office moving for a few years at least.

Another change to the department is the service realignment we are undertaking. We are now the Ostomy Clinic instead of the Ostomy/Wound Clinic. The nurses will only be seeing ostomy patients, which will reduce their work load. With that reallocation of service there has also been a staffing change. Covering the inpatients at RUH is Sandy Roberts and covering the inpatients at both SPH and SCH is Kathy Guina.

Appointments for the nurses will be on designated days only to increase the time they can spend with inpatients on the wards. Please call the office to book an appointment and we will be happy to give you their availability for outpatient appointments. We regret that patients dropping by without an appointment cannot be accommodated. However, if there is an emergency please call our office and we will do our very best to see you as soon as possible.

All patients need to register at the admitting desk upon

**WELCOME TO OUR NEW MEMBERS**



Memberships for 2007 are almost all collected. We do have some memberships that have not been paid. It is important that

this is taken care of immediately to continue receiving the bulletins and the Ostomy Canada publications. Welcome to our new members. Hope to see you at the meetings soon!

Marjorie Bissett. . . . . Saskatoon

In memorial

**We extend our heartfelt sympathies to the families of**

- Bill A. Phillips. . . . . Saskatoon
- Maurice J. Houle . . . . . Saskatoon
- Arnold Knaus . . . . . Leroy
- Marg Chastakoff. . . . . Saskatoon



Marg we will miss your sunny personality and your dedication to your job as the treasure of the Saskatoon Ostomy Association.

arrival at the hospital. The registration process usually takes at least 15 minutes so please arrive early. Please bring a set of the supplies that you are currently using. It would also be helpful to bring any other specialty items that you may require - e.g. dressings, insulin, etc. Any patients who have been identified as being positive for MRSA, VRE or C. Diff please let the secretary know when you are booking your appointment so we can ensure that the nurse is aware.

During this time of transition there will not be any rural clinics.

If you have any questions or concerns please call the office at 655-2138. We look forward to greater availability and service to ostomy patients when this time of change is complete.

## If you aren't IN it's just B—GO!!

**The Saskatoon Ostomy Association**

**4th Annual Bingo and Supper**

**Saturday November 3, 2007**

**Nutana Legion 3021 Louise Street**

**Cocktails 5 - 6 p.m.**

**Supper 6 p.m.**

**Bingo to follow**

**Supper Sponsor: Nordon Drugs and Medical Supplies**

**Tickets: \$25.00 (\$20.00 tax receipt)**

Tickets available at Nordon Medical

Deadline to purchase tickets: **Saturday October 27**

All proceeds used to sponsor members wishing to attend the UOAC national conference or Ostomy Youth Camp



## Ostomy support group for kids and their parents



Canadian Ostomy Camp is a place where your child can meet others from all over Canada. The children love the freedom that comes with hanging out with others who can understand. If you have a child that has an ostomy of any kind or a continent alternative surgery for bowel or bladder emptying this is the camp for them. Interested in attending camp please call Marlyne at 249-5731 or Laurie at 258-2016.

We may be able to help with with costs for your child.

## Calgary conference report

by Peter folk

### Wednesday, August 15

Meet and greet - we were treated to a warm welcome by the Calgary chapter. There was entertainment by a guitarist and his wife who both sang. They had fresh fruit and chocolates and salmon for snacks. There were plenty of door prizes.

### Thursday, August 16

Opening ceremonies - I got to carry the Saskatchewan flag  
Keynote address - Dr. Donald Bule talked about Ostomy Surgery - Past, present and future.

Support groups - I attended the colostomy support group meeting. It was facilitated by Donna Weise, the "Ask the ET" from the Ostomy Canada magazine. The discussions were really good with participants providing most of the answers and suggestions.

Exhibit Hall - the exhibitor booths this year were all used. It was great to stop at each booth and talk to the suppliers and to the host team from Hamilton for the 2008 conference.

Coloplast evening - Western BBQ theme, hamburgers, potatoes and salads for the meal, though they ran out of burgers and some people had to wait 20 minutes while they made more. They had a fill-in quiz during supper and the answers were somewhere on posters put up around the hall. Then prizes for the winners.

### Friday, August 17

Stampede Breakfast - pancakes and sausages for breakfast in the Exhibit hall.

Webpage workshop - very good workshop with the webmaster for the UOAC website giving some pointers.

Buffet Lunch - sandwiches and anniversary cake

Raffle, Auction - Our Corner Gas donation was raffled off.

Ed's cribs fetched \$200 and \$250 each. He had an extra two that he was able to sell later to interested individuals.

DSS workshop - Sheelah Zaph lead the one workshop that I attended on newsletters and program ideas. Very well done and lots of ideas.

Chapter president's workshop - Doug Graham lead the workshop with other chapter presidents. Some of the problems that our chapter has had are also common with other chapters across Canada. Many suggestions were put forth. Further meetings might be held in future years.

Convatec Banquet - Renaissance Award. They had a "Love Boat" theme for the banquet and guest "Captain Stubby" kept us entertained and laughing all night. My cheeks hurt from laughing so much. The five renaissance award winners were announced and the overall winner was Debra Rooney.

### Saturday, August 18

National Council meeting - The meeting started promptly just after 8 a.m. and four new board members were elected from the five nominations. We passed the application from Cape Breton to host the 2009 conference. A motion to

allow nominations from the floor at national council meetings was defeated. A motion to consider having conferences every other year was passed. A motion to consider employing a convention organizer was passed after much discussion.

Free afternoon - My family and I went to the Calgary zoo. Farewell Banquet - Hollister - awards and passing of flag. Joel Jacobson was the MC and kept us laughing all the time. The four new board members were formally sworn in and the Calgary host team was introduced and thanked. The President's, Maple Leaf and ET of the Year awards were presented. The banner was passed from Calgary to Hamilton. "Just for Laughs" comedian, Derick Lengwenus kept us laughing, especially when he took on the character of "Doctor Advocato" and tried to do a skin transplant from a lemon to a banana.

Sunday, August 19

Drive home

**Submitted by Peter Folk to SOA at the September 2007 meeting**

## **UOA CONFERENCE CALGARY 2007**

### **Ten Schroeder**

What a wonderful opportunity to attend this conference. For myself, I found meeting folks that I had seen 10 years earlier was awesome. Thinking about those who were no longer with us and those who were new to the group. I think UOA has exciting times ahead.

As Albertans usually do, we were graced with western hats. 10 years ago this conference was a world UOA event in Calgary, it was also the time when UOA Canada was formed. I had the hat I received autographed by those interested who were at the conference. This time I brought my hat and had it autographed once again in a different color. This hat will be my UOA growth hat. It is interesting to note that folks searched to find their signature from 10 years ago.

Speaker highlights incorporated with my comments:

### **Dr. W. Donald Bute (general surgery, surgical oncology)**

1 -discussed the future of stomas. He identified the concept of biodegradable pouches. I caution anyone who uses what is termed 'disposable' pouches, as they may in fact not be 'flush able'. The terms biodegradable, flush able, and disposable are not interchangeable. Biodegradable means that after many years in a landfill, products should fall apart in a sense to become part of the biosphere. Disposable means that the item is not to be used again, as pouches that are thrown away when changing to a new appliance once weekly or so. Flush able should mean that you are able to dispose of items in the toilet and flush. I caution anyone doing this as the disposable of anything in a toilet and its ability to actually 'flush' is dependent on the

size of the pipe in the plumbing and the status of the underground piping connected to main water lines as well as the ability of the flusher on the toilet to actually create enough pressure for the flush. I shall use an explicit example: Women's menstruation products commonly flushed are 'tampax'. Many plumbers would relate the number of times they have had to unplug drains far under the yards of even private homes due to tampax blocking the pipes. Well if this is so, then what about pouches, or even some pouch liners. Places such as restaurants and parks often have problems such as this. This is a topic that could be elaborated in future discussions.

2-Much of his talk focused on surgery options for the future that avoided the need for ostomies. I do not think this means that we will no longer need UOA or ET's. It seems that we should need more support towards early diagnosis and prevention so that people have more options. Of course an ET's position is to advocate for prevention/diagnosis and treatment, rather than to just avoid an ostomy. We are concerned about the quality of life a person has the opportunity to live, whether that means with or without a stoma.

3- The small intestine is the immune controller of the body. In my opinion this means that we need to take care of our small intestine, so that we keep our immune system strong. I think this also affords an opportunity for renewed research into long term effects of surgery on the small intestine. Perhaps there is an area of prevention of long term problems that medically and nutritionally we have not yet explored.

3-Treatment of hernias. This continues to be a problem. He discussed absorbable mesh. Techniques were offered as to how the mesh would be inserted. He also offered that this is not a total answer as the types of mesh matter as well as how the persons body will adapt to them. He offered that every time a person has a surgery there is muscle damage or a potential for hernia. ET nurses could offer much discussion regarding questions they have for the problems of hernia development and the need for renewed research. Laparoscopic surgery does not decrease the incidence of hernia, there is still a defect in the abdominal wall where the stoma is formed.

4-Discussion on the benefits of 'biologic' aids such as remicaid or humera. We have come far with medication assistance of symptoms, particularly for those with crohns disease. There is much study to follow the long term effects and benefits.

5. How the UOA assists surgeons to make things better for patients. Communication between UOA, physician, ET and patient is vital.

### **Dr. Thomas Mainprize (Women's Health, Urology, Gynecology)**

7-1. Pelvic floor changes with aging. He also related changes

with pelvic muscle surgery such as would occur from having the rectum removed as well as other surgeries in the pelvic area. He discussed issues of bladder control and their causes. Areas he touched on were issues such as not being able to reach the bathroom, large urine loss with temperature change such as cold or hot. Nighttime urine loss while asleep. Having to urinate urgently and not being able to reach the bathroom.

2. For women, hormone changes and other assaults on the pelvic area may result in vaginal weakness issues such as prolapse (the vagina coming out) which as well as resulting in much discomfort, would result in difficulty holding urine.

Things such as decreased activity, dietary changes constipation, and use of medications affect the pelvic muscles and the ability to hold urine. Many people both men and women are on medications to treat medical issues and then are at risk of ending up with other problems as a result. Attending to issues such as increasing exercise under the guidance of a trained person and proper nutrition may have good effects on the ability of the bladder to hold urine.

-vaginal dryness, may cause significant problems for women who have had surgery or other problems. This could result as well from medications needed for other medical conditions.

Women may have such difficulty with dryness that intercourse or the thought of it becomes extremely painful, medically this is called 'dysparunia'. Many lives are affected due to the impact on relationships of this. There are treatments available that deal with these issues that do not involve complicated medications. For many women, interesting lubricants will help and totally decrease their pain as well as perhaps increase their pleasure. (Now that's another area for a good discussion)

3. It seems that women may experience improvement for much of their bladder frustrations from the following:

-decrease caffeine and alcohol consumption (what mn is that)

-improve dietary intake

-change their patterns of actually going to the bathroom to urinate ( for example, going to the bathroom before you actually have the urge)

-manage times that cause stress both physically and emotionally (well this is easier said than done.

-increase sleep time including quality of sleep, (this is a huge problem for many)

-improve exercise and flexibility with a focus on pelvic floor muscle exercises. (finally something that could be fun, especially if you go to a gym with a friend)

-decrease smoking,

-increase the intake of cranberry juice

- Heads up folks! Increase intercourse and all the components that revolve around it such as good feelings and comfort with each other. This actually assists in keeping the vagina healthy.

Of course that means that vaginal pain must be dealt with first. It is really important that a woman should not have to have painful intercourse. This is not on of those areas to assume that pain is good.

-keep body weight at a manageable level, (this is also harder than it seems)

4. Discussion on hormone therapies. There are a variety of hormone therapies available. What seems important is that the therapy should be appropriate to the individual needing it. This may involve medications in the form of patches, tablets or for some, creams.

### **Joan Heatherington (Nurse Practitioner Inflammatory Bowel Disease)**

1. Discussion on autoimmune diseases. Bowel diseases are autoimmune conditions. There is no known cure other than surgical options that is known at this time.

2. With such conditions she stressed the need to seek medical attention early so as to Avoid the need for surgery when able. She supported the ET's opinion that early diagnosis and treatment are important, especially with Crohns and Ulcerative Colitis.

3. Discussion on the positive effects of remicaid in preventing the need for early surgery for Crohns disease. Remicaid is also being used for many persons with Ulcerative Colitis to improve the status of the bowel. In the case of Ulcerative Colitis the need for surgery as curative is still correct.

4. Discussion on the risk of bowel cancer for those with untreated ulcerative colitis as well as crohns.

5. Discussion on persons with disease to speak with their specialists such as gastroenterologists and I would add ET nurses. She did say that sometimes patients speaking with patients may not give the best information. This, in her opinion leads many physicians etc to not call for visitors, in my mind this reminds us of the importance of well trained visitors. There is danger in a "cookie cutter" approach to illness as not all people are the same and not all illnesses result in the same needs for treatment. As well, she shared that patients at this time in their diagnoses need hope not horror stories of illness, once again stressing the need for trained visitors.

6. Discussion on erectile (erection for men) concerns for men after surgery. She suggested that if there is a problem, she recommends treatment early following surgery. I am not sure how long she actually would suggest waiting to deal with this issue. I am sure that there would be variety of opinions on when sexual activity should be resumed or corrected. This is also an interesting ( as well as perhaps exciting) area to discuss further.

7. She actually discussed sexuality a lot. Now don't get any wild ideas folks, but she did discuss the use of vibrators to deal with anal strictures (tightness of the anus), as well as vibrators with lubricants (I hope so) to maintain vaginal flexibility. Well my opinion is that if needed this area could also use an interesting discussion.

8. Websites shared:

IAP surgeons group, [WWW.ipouchcalgary.ca](http://WWW.ipouchcalgary.ca), [Jpouch.com](http://Jpouch.com), [www.teenibd.co.uk](http://www.teenibd.co.uk)



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**Saskatoon meetings for 2007 - 2008**

September 10, 2007  
(2nd Monday because Labour Day is September 3)  
October 1, 2007  
November 5, 2007  
December 3, 2007

(No meeting in January)  
February 4, 2008  
March 3, 2008  
April 7, 2008  
May 5, 2008  
(No meetings in June, July or August)

