



Partners: The cycle of hope



Left to right, Dr. Diane Lacaille, Dr. Dorcas Beaton and Dr. Linda Li; Catherine Hofstetter; Dr. Charles Peterfy; Emily McWalter, Dr. Mark Hurtig, and Dr. Jim Dickey

WHEN THE CANADIAN ARTHRITIS Network (CAN) was established in 1998 as a part of the Networks of Centres of Excellence, one of its goals was to transform scientific discoveries into therapies to improve the lives of people with arthritis. Although a challenging goal, CAN is poised for success with its partnership program, which is being weaved throughout its Strategic Research Initiatives.

The current research process is one that encourages investigators to build new knowledge and present and publish their findings. The published part of the study is then considered complete and the next project is identified. Most of the time, valuable new information sits in a publication gathering dust. Moreover, research often does not address the key needs of the patient.

This approach to research can be a tremendously wasteful, undirected

process that hinders the creation of much-needed new knowledge and its translation into valuable therapies and devices for consumers with arthritis. Industry partners that may have helped develop therapies are not interested in discoveries once they are in the public domain as they are not eligible for patent protection.

A better process is one that involves consumers and other partners from the research planning stage. Consumers help identify research needs, and external partners, such as industry, can promote the application of new knowledge. With this approach, key partners are engaged from the beginning which can maintain the momentum following the discovery. The process starts with the investigator consulting with consumers for research relevance and seeking external partners to transform the research into products that can be put into the hands of the consumers. Consumers can then offer feedback on effectiveness and a perspective on the next generation of research. This creates a cycle of hope that can generate powerful results that ultimately ease the challenges that individuals living with arthritis face everyday.

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Message from the Scientific Co-Directors



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Dr. Robin Poole and Dr. Jane E. Aubin

One of the most interesting aspects of the Canadian Arthritis Network (CAN) is how we continue to evolve as an organization, committed to developing research initiatives that help patients with arthritis. The creation and growth of our Strategic Research Initiatives reflect our evolution as a

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Consumers help focus research

While the involvement of external partners at the planning stage is a new initiative, the strength of consumer partnerships has been demonstrated repeatedly since patients first asked to be included when CAN was created. “At first, the research community was not sure about us,” says Catherine Hofstetter, one of the longest-standing members of CAN’s Consumer Advisory Council. “We just kept asking questions because we wanted to be heard. We are the ones living with arthritis and we knew we could help. It is a credit to CAN that our passion for helping find a cure and new therapies has been embraced. We are at the planning table and have a voice throughout CAN. We can see that progress toward an easier life is being made.”

The benefits of consumers’ contributions were highlighted in 2002 at the OA Consensus Conference. Consumers joined discussions as equal partners with researchers and representatives from industry and government helping to identify the six research priorities. They were asked to consult with other arthritis patients to confirm the priorities and report back in 60 days. The consumers went to work. In one month, they determined their approach, developed the survey, worked with The Arthritis Society to post the survey on the Society’s website and created links to other organizations to encourage participation. Within two weeks, the group had an overwhelming response from over 350 arthritis patients who clearly identified the two most important issues: pain and fatigue. The response was an eye-opener. Relief from pain was commonly cited as a research priority, but fatigue was not. For the first time, fatigue was identified and included as a priority. Research initiatives related to pain now read “pain and fatigue.”

Now, in 2006, consumers drive strategy and influence research projects. The Consumer Advisory Council offers a reality check that is appreciated by investigators like Dr. Marc Pouliot, a CAN researcher with the Centre de recherche en rhumatologie et immunologie who attributes his change in attitude toward

research to listening to consumers.

“I research how inflammatory cells communicate with nerves in joints,” explains Dr. Pouliot. “I can choose one of several molecules to study. By understanding how consumers feel pain, I can target my research to the specific area that will help the most. When consumers consistently ask questions like ‘How will that help me get out of bed in the morning?’ or ‘How will that help me go back to work?’, you want to make sure your research is focused and relevant.” Dr. Pouliot’s passion for appreciating consumers’ experiences prompted him to join forces with Dr. Jason McDougall, from the University of Calgary, to plan the Workshop on Pain and Arthritis that took place in January in Calgary, Alberta.

“By understanding how consumers feel pain, I can target my research to the specific area that will help the most.”

Dr. Marc Pouliot
Centre de recherche en
rhumatologie et immunologie

The goals of this workshop were to identify pertinent needs in pain research and to foster a collaborative environment with a view to establishing new research initiatives with consumers and external partners.

To achieve the goals, the organizers took a unique approach. Five research questions were distributed to participating scientists, consumers and industry partners. The questions, including “What is the origin of arthritis pain?” were reviewed by each group. The presentations of their answers brought out each group’s distinct perceptions. They also highlighted both the commonalities and the gaps between them. Breakout sessions fostered further evaluation of the responses and opened new discussions about solutions.

For the Workshop Chair, Dr. Jason McDougall, the benefits of the event were both immediate and long term. Right away, the breadth and scope of current research became evident. Never

before had scientists researching joint pain been together with consumer and industry representatives. For many, they had never had so much access to the consumers they are trying to help. “Participants shared a new appreciation for the perspective each other has of the disease and the realities each face day-to-day,” says Dr. McDougall. He cites the example of the group responses to the question, “What is the origin of arthritis pain?”. Researchers described the mechanisms of joint pain while consumers described the sensation and location of their pain. “The impact was visible,” he says. “The groups wanted to learn more about each other.”

The long term benefits will show through the resulting research which will see everyone’s contribution come together. The consumers’ input will be integrated into the scientists’ research and the new therapies created by the research will be integrated into the external partners’ considerations for new consumer products.

While the white paper on the Workshop will be released in late summer/ early fall, one thing Dr. McDougall can say for sure, “Whatever research we do, it should be grounded by consumer participation and feedback.”

The application process evolves again

CAN’s partnership with consumers is evolving again as the Strategic Research Initiative in Bioengineering for the Restoration of Joint Function begins to accelerate and involvement of other partners takes shape. CAN’s commitment to making partnerships work is a salute to the added value consumers offer. Consumers have proven that the planning stage is the catalyst for long-term partnerships with them and other stakeholders such as pharmaceutical and biotechnology companies, non-government organizations (NGOs) and government agencies.

To that end, CAN is changing a key element in its grant application process. Under the auspices of the Research Management Committee, CAN is inviting external partners to the planning table with the intent to accelerate and enlarge research programs. The value of this move is manifesting itself within the

Strategic Research Initiatives.

With the SRI in Osteoarthritis, connecting to external partners traditionally came after the initial grants were secured and work had begun. Now, scientists will be asked to include a partnership component in any new grant applications in the same ways that consumer involvement starts early in the research process.

The success of the SRI for Inflammatory Joint Disease shows that CAN is moving in the right direction. Partnership discussions that CAN facilitated at the Network's 2005 Annual Scientific Conference are beginning to flourish. The Research Management Committee recognizes there is more to be done. It has incorporated new partnership-building in its programs and will provide services to help investigators meet the challenge of partnership creation. Developing partner relationships will be a key part of the agenda of the Bioengineering for the

Restoration of Joint Function Workshop on June 8 and 9 in Vancouver, British Columbia.

The SRI for Bioengineering for the Restoration of Joint Function holds great promise to maximize CAN research dollars. With partners at the planning table, Network Investigators will now not only understand the scientists' priorities but will also have input on them. This, along with consumer input, will enable investigators to identify exactly what the next steps in research should be and maximize the resources available.

By developing sustainable long-term relationships with industry partners in particular, the commercialization of research becomes a viable and vital outcome with clear direction for R&D. The transfer of knowledge into practical applications will support further research, create jobs and contribute to the Canadian economy. However, it also creates a need

for the timely protection of intellectual properties through patents and for a systematic approach to ensure the value of new discoveries is realized.

CAN to help scientists

While requiring the introduction of partners at the planning stage will have powerful results, CAN is not asking scientists to do this alone. CAN recognizes that investigators are scientists first, more familiar with the pursuit of knowledge than with partnerships and patents. By bringing partners and consumers in at the planning stage, CAN is bringing research full circle as investigators see their ideas guided by consumer input, supported by partners in the arthritis community and moved into the clinic to help consumers. More importantly, as Catherine Hofstetter recently said, "CAN is giving arthritis patients something we have never had before – hope." ■

Message from the Scientific Co-Directors

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research network. Our research programs are progressing to best address how we can build on and expand these research programs. This will enable us to not only develop new discoveries and meet unmet needs by bringing different expertise together, but also apply new knowledge in a timely manner with our partner organizations such as industry, universities, institutes and governments.

As we listen to consumers' daily challenges and watch our investigators make new discoveries and innovations, we know we have to do more to maximize research opportunities, not only through initiatives in osteoarthritis and inflammatory joint disease, but also in the field of bioengineering for the restoration of joint function.

For years, joint replacement has been considered the only way to give arthritis patients improved mobility and relief from pain. The advent of bioengineering research has led to future opportunities to create alternatives to joint replacement that will ensure quality of life and reduce or eliminate the need for surgery. This relatively new field of research draws on a wide spectrum of expertise to help determine and develop the most effective technologies and techniques to detect and control arthritis and repair the damage it causes. To promote and meet the need for this research and prepare the next generation of scientists to explore its possibilities, CAN will hold a workshop on Bioengineering for the Restoration of Joint Function in Vancouver, British Columbia, on June 8 and 9.

The workshop is designed to bring Network Investigators together with potential industry partners to promote the

development of research groups and external partnerships to maximize opportunities for research and its translation into new products and devices. Our success in working with consumers from the early planning stage has pointed us to the benefits of inviting outside partners to join investigators early on, as research priorities and programs are set.

Around the world, preclinical studies are being conducted to help understand the effects of new therapies for osteoarthritis. While each is done responsibly and carefully, scientists struggle in identifying appropriate models and technologies for use in the assessment of new potentially disease modifying drugs and devices that may then be used in human clinical studies of osteoarthritis. CAN recognized that fact and, in consultation with industry, government and consumers, is proud to take a leadership role in hosting a conference that will address these challenges. It is a unique Consensus Conference on Preclinical Models of Osteoarthritis to be held May 18 and 19 in Montreal, Quebec. We will be bringing together experts in the preclinical fields to evaluate and make recommendations as to which models and technologies should be used in preclinical assessments.

For more information, please visit the CAN website at www.arthritisnetwork.ca or contact Johnathan Riley at 416-586-4770 or at jriley@arthritisnetwork.ca.

CAN continues to evolve and demonstrate leadership within the research community in Canada and around the world. Our future is strong as an organization. We remain dynamic and innovative in our approach to research and vibrant with our rich blend of passionate consumers, dedicated investigators and partners and talented staff. Yes, 2006 is off to a great start! ■

Thinking ahead, acting now

By 2016, more than 6 million Canadians will be living with arthritis, according to The Arthritis Society of Canada.

IT IS ESTIMATED THAT arthritis will remain the highest socio-economic cost of disability in Canada with the cost to the Canadian economy increasing significantly from the current \$16 billion.

The statistics are indeed staggering and underline the need for succession planning in research leadership. This issue is constantly under review by the Canadian Arthritis Network's (CAN) Training and Education Committee, headed by Dr. David Wilson of the University of British Columbia. "There is a demand from consumers for answers right now and a need for talented investigators to continue innovative research in the future. A vibrant training program is the key to blending the two," said Dr. Wilson.

CAN's approach is three-pronged, focusing on leadership, practical experience and career growth.

The approach recognizes that investigative leadership comes from understanding the practicalities of the research process, a willingness to invest in new projects and a commitment to develop the skills of the next generation of investigators. Since its inception in 1998, CAN has funded over 100 student-coordinated research projects, supervised by veteran researchers and aimed at giving students practical experience. "The goal is to provide the future leaders in arthritis research with firsthand experience in learning environments that promote collaboration and networking," said Dr. Wilson. "We know that there are many researchers who have projects they want to develop but who do not have the time or manpower to do them. We also know there are students who want to learn about arthritis research. Through training initiatives, we can create a win-win for the investigator and the student, with the individuals living with arthritis being the ultimate benefactors."



"CAN helps students at the critical stage when they are eager to learn about research but do not have a research profile to support requests for project funding. It gives them critical seed money that is not available anywhere else. CAN's credibility in funding circles in turn helps students leverage other funding to supplement research costs."

Dr. Ann Clarke
Co-Director of the McGill
University Health Centre Lupus
Clinic and CAN Board member

Dr. Ann Clarke, Co-Director of the McGill University Health Centre Lupus Clinic and a CAN Board member, reviews grant applications for student funding for CAN and applauds the Network's approach. "CAN helps students at the critical stage when they are eager to learn about research but do not have a research profile to support requests for project funding. It gives them critical seed money that is not available anywhere else. CAN's credibility in funding circles in turn helps students leverage other funding to supplement research costs."

CAN's approach to training was one reason for the success of Dr. Sasha Bernatsky who recently began her career as an independent investigator. A rheumatologist with a PhD in epidemiology and biostatistics, Dr. Bernatsky was the recipient of a CAN fellowship award in 2001 that enabled her to embark on postdoctoral work with Dr. Clarke.

Dr. Bernatsky started as a trainee, involved in a research project initiated by Dr. Clarke in 1999 on the link between

cancer and lupus. Under Dr. Clarke's mentorship, Dr. Bernatsky not only honed her skills as a researcher, but also identified new research opportunities and gained her own funding to support these new initiatives. Now, as an independent investigator and assistant professor at McGill University, she looks forward to training others.

"CAN opened doors for me and this was critical to my success as a researcher in training. It allowed me to begin my work with Dr. Clarke, tap into her experience and wisdom, and connect with other leaders in my field. It has also allowed me to present my work at conferences, share new discoveries with other researchers and learn from my interactions with members of CAN and other research networks," commented Dr. Bernatsky.

Ruben Tavares, a PhD candidate at the University of Toronto's Institute of Medical Science, agrees. He has found CAN's training program both practical and inspiring. Mr. Tavares became a CAN trainee at the recommendation

of his project supervisor, Dr. Claire Bombardier, Senior Scientist at the Toronto General Research Institute. Wanting to pursue a PhD in clinical epidemiology, he sourced funding from CAN's scholarship program and saw the benefits immediately. "CAN investigators comprise the gambit of disciplines, and the breadth of support for my development as a researcher was encouraging from day one." Mr. Tavares credits Dr. Bombardier, CAN's network of members and its educational conferences for his success in making connections he could not have otherwise made. At CAN's 2005 Annual Scientific Conference, he was able to link with Dr. Diane Lacaille, a rheumatologist at the University of British Columbia who is doing research similar to Mr. Tavares' in the province of British Columbia. Mr. Tavares was able to learn how Dr. Lacaille conducted her study, helping him understand how to carry out his research more effectively and efficiently. "That opportunity simply would never have existed if it had not been for CAN," he said.

Mr. Tavares also appreciates the freedom of research that the CAN program allows, which he had not enjoyed in his previous position as Research Associate and Project Manager at a pharmaceutical company. "Through CAN's training, I have more autonomy and flexibility in approach to research. It is a difference that is important to me at this stage in my career and one afforded by CAN's emphasis on practical experience and career growth."

CAN's training program is funded by The Arthritis Society of Canada (TAS), which provides \$500,000 annually. Through partnerships, CAN is able to leverage TAS's contribution to \$1 million in training funding. "It is impressive how CAN has been able to spread those dollars to cover so much research," said Bonnie Thorn, TAS's Chief Science/Medical Officer. "When it comes to raising dollars for arthritis and attracting new researchers, it is a very competitive marketplace," she said. "CAN's approach to training helps us demonstrate to donors how wisely their donations are being spent and how new discoveries will continue with each new generation of CAN investigators." ■

CAN leads the world in defining new standards

ALTHOUGH ABOUT 12% of the western population suffers from osteoarthritis, surprisingly, there are currently no disease modifying treatments. At present, R&D is focused on identifying early onset of arthritis, predicting rates of progression and identifying targets and developing new drugs to control the pain and progression of osteoarthritis. To move on to creating disease modify-

human outcomes, and the technologies that can be used at both the preclinical and clinical stages of development. The Consensus Conference on Preclinical Models of Osteoarthritis, to be held May 18 and 19, in Montreal, Quebec, will bring together experts in models and analytical technologies from academia and industry, with the involvement of governmental regulatory agencies.



ing treatments, definitive guidelines are needed to standardize preclinical studies. The challenge is to identify, from the array of models and technologies that are now available, which models and technologies may best serve as likely indicators of clinical outcomes in human trials.

The Canadian Arthritis Network (CAN) is one group in an international community that is very active in model and technology development as part of its preclinical Strategic Research Resources. The Network recognizes an unmet need in reviewing and critically discussing recent research in this area from around the world. From these deliberations, it will be important to come up with recommendations to help guide future studies in this area.

To facilitate these discussions, CAN is bringing together an international interdisciplinary team to identify models that are likely to provide indications of

Dr. Robin Poole, Scientific Co-Director of CAN, chairs the organizing committee. "We see this meeting of minds as an important opportunity as part of our Strategic Research Initiative in osteoarthritis," says Dr. Poole. "This aspect of R&D is a critically important part of the development of new treatments and technologies to help the patient with arthritis."

The outcome of the conference will be the publication of recommendations for the use and analysis of models in the development of new treatments and diagnostics for osteoarthritis. These will include histology, the measurement of pain, use of biomarkers, imaging and mechanical testing, safety considerations and statistical analyses.

Visit the CAN website for more information on the conference and how to apply to attend – (www.arthritisnetwork.ca). ■

2005 Annual Scientific Conference: Perspectives

Participants came from around the world to learn of new discoveries, exchange ideas and network.

THEY WALKED AWAY WITH new understandings, different perspectives and a further appreciation for the Canadian Arthritis Network's (CAN) commitment to the four million Canadians with arthritis and countless others worldwide that its research touches. It was the CAN 2005 Annual Scientific Conference, part of the "Rock This Joint" series held October 27 to November 2. The series, combining the International Meeting of the Bone and Joint Decade, CAN's 2005 Annual Scientific Conference and the Summit for Arthritis Prevention and Care, was designed to bring together trainees, professors, investigators, government and industry representatives and consumers to learn, network, share and develop new ideas.

The 2005 Annual Scientific Conference highlighted the latest advances and innovations in CAN's Strategic Research Initiatives through discussion groups and plenary, poster and workshop sessions. Topics ranged from new advances in osteoarthritis research to bioengineering for the restoration of joint function to transdisciplinary training opportunities to translating research into practice.

A consumer, a trainee, an investigator and a scientist who has just moved to Canada from the United States were asked to write their perspectives on the conference.

Consumers. They are CAN's guiding light, the reason investigators forge ahead daily looking for a cure for a disease that challenges them daily. Yet they enthusiastically and modestly say "I get more out of it than I give."

Flora Dell, a member of CAN's Board of Directors and a Consumer Advocate, is appreciative of being engaged in the research that helps her.



Flora Dell – a member of CAN's Board of Directors

"As a consumer I found this conference to be a learning opportunity," she wrote. "I was better able to understand the extensive time, energy and expertise that constitutes a 'research project.' Despite the fact that I had to search for the meaning of some acronyms, the medical terminology and the depth and mystery of the search for a cure were palliative when I listened to the questions that physicians and scientific researchers asked of each other in order to clarify many aspects of the research being presented. Those questions and the responses were very helpful to me."

"One of the highlights of the conference," she added, "was listening to Dr. Claire Bombardier and Dr. Linda Li during the Knowledge Translation Exchange Workshop. They stressed the importance of building communication channels and relationships with all stakeholders and the need to create partnerships with and

between the research community, the consumer and all those who relate and impact on the quality of life of the end user."

Trainees. They are the next generation of investigators. With the support of the Arthritis Society, CAN's commitment to develop their skills includes providing a venue for interaction with other investigators, scientists and consumers.

Emily McWalter, a PhD candidate in mechanical engineering at the University of British Columbia, attended the conference for the first time and noticed a marked difference from other conferences.

"I thoroughly enjoyed my first experience as a new trainee attending CAN's 2005 Annual Scientific Conference," she wrote. "I have attended other conferences and found aspects of them intimidating, for example the poster sessions. The CAN meeting had a different atmosphere;

The 2005 Annual Scientific Conference highlighted the latest advances and innovations in CAN's Strategic Research Initiatives through discussion groups and plenary, poster and workshop sessions.

all delegates were very approachable and willing to spend time discussing research endeavours and providing career advice.”

Ms. McWalter, like other trainees who attended, found it easy to interact with professors, peers and consumers, with the mentorship session being one of the most popular venues for interaction.

“The activity I most enjoyed was the mentorship breakfast (despite the fact that it was held at 7:00 a.m. on a Sunday morning!)” she added. “It is not often that a graduate student has the chance to sit down and discuss research with other investigators in the field. For those of us who have carried out graduate work with only one supervisor, it was very helpful to receive some insight into how research is conducted elsewhere.”

Learning from others was not the only activity for trainees. They shared their discoveries through poster presentations and learned how to best present their work in a meaningful way.

“As a mechanical engineer and being aware of the demographic at the conference, I knew that I could not assume that all the judges would know what ‘patellar kinematics’ was,” Ms. McWalter continued. “I thought this presentation was an excellent exercise as it was very difficult to give a short, clear and concise presentation to a general audience. It is a skill that is essential when conducting interdisciplinary research.”

Investigators. For a scientist doing fundamental research on inflammation, the CAN national meeting is an annual high point for Dr. Marc Pouliot, a CAN researcher with the Centre de recherche en rhumatologie et immunologie. He appreciates the unique way CAN brings people together. “All sorts of different people are involved, for one reason or

another, with arthritis,” he wrote. “The multidisciplinary dimension of the event has simply no equal in regular scientific meetings. Like so many others, I enjoyed being involved with trainees in the meeting this year. I particularly enjoyed the trainees’ dinner and workshop. These events were, in my opinion, really useful for welcoming new people in the field. The enthusiasm shown by trainees is always a great source of energy for me.”

Dr. Pouliot credits CAN with helping him appreciate the need to help one another as a research community. “For me, this year’s meeting will be remembered as a breakthrough in terms of realizing that, in order to advance, all of us have to work together, by sharing our professional expertise as well as our personal experience. For many of us, this concept has long been difficult to grasp, but it has finally appeared this year as the cornerstone for progress.”

Guest investigator. Canada’s prominent place in arthritis research around the world draws interest in and attendance at the scientific conference. Dr. Hyon Choi is the newly appointed Mary Pack Arthritis Society Chair in Rheumatology and Associate Professor of Medicine, Division of Rheumatology, Vancouver General Hospital, The University of British Columbia, Arthritis Research Centre of Canada. His background includes a physician scientist position at the Harvard Medical School and epidemiology research in the rheumatology unit of Massachusetts General Hospital in Boston. He offers the perspective of an experienced newcomer to research in Canada.

“I felt that the meeting was well organized and focused, and the key target themes were well represented,” he wrote

in his perspective. “Furthermore, I agreed that the three CAN Strategic Research Initiatives of osteoarthritis, inflammatory arthritis and joint restoration represent current key issues in the musculoskeletal field. The meeting nicely summarized the recent progress in each respective area with appropriate highlights of the progress of CAN investigators.”

From his point of view, CAN offers a unique conference. Dr. Choi continued, “Two fascinating differences I found between the U.S./international meetings and CAN were the active participation of consumers and the organized efforts for knowledge translation and exchange. Although both were entirely new to me as an investigator who has just relocated from the United States, as the meeting progressed I was able to appreciate the clear need for both in our field. In particular, it was a very valuable learning experience to hear the viewpoints of the many consumers present regarding ongoing research. Furthermore, the emphasis and time allotment for knowledge translation and exchange were very helpful and opened my eyes to some potential new research areas for myself.”

Only in Canada, eh? ■

Mark your calendar for CAN's 2006 Annual Scientific Conference in Winnipeg, Manitoba, from November 30 to December 2.

Registry to help arthritis consumers for life

She is only 24 and yet every day is a challenge.



ELENA BALLANTYNE HAS rheumatoid arthritis that took her body hostage quickly and suddenly just three years ago. Since her third year of university, she has experienced crippling pain that has prevented her at times from even walking up a flight of stairs. In addition, Elena experienced related disorders sometimes seen in rheumatoid arthritis, including pyoderma gangrenosum and pericarditis. Now her plans for the future always include a Plan B.

For Elena, medications have helped get her life back. They have helped her remain mobile, pursue full-time work as a Research Co-ordinator and focus on her goal of postgraduate studies in a healthcare discipline. They have helped her deal with her new, chaotic world of rheumatoid arthritis.

Her experience is what she draws upon in her role as one of the young patients on the Ontario Biologics Registry Stakeholder Advisory Committee.

For patients with rheumatoid arthritis, the Ontario Biologics Registry is a newly proposed, welcomed addition to the healthcare system. The need for the Registry was highlighted when COX-2 drugs were withdrawn from the market in 2004 because of a risk of cardiovascular events. Public awareness called for post-marketing surveillance of these and other Biologic Response Modifiers (BRMs).

The purpose of the Ontario Biologics Registry is to monitor the effectiveness, safety, tolerability and sustainability of

BRMs. The registry will document both the benefits and the adverse qualities of BRMs, and will study practice patterns, healthcare utilization and compliance with evidence-based guidelines.

Catherine Hofstetter, Chair of the Registry's Consumer Advisory Committee and a member of the Canadian Arthritis Network's (CAN) Consumer Advisory Council, welcomes the concept of the Registry and the help it will provide to individuals living with rheumatoid arthritis. "For consumers, it

does not stifle manufacturers' interests in creating new therapies and that tracks results over time."

Biologic registries are relatively new to the healthcare field, with Europe leading the way in the past two years and Alberta being the first province in Canada to establish one. The Ontario Biologics Registry was developed through partnerships among rheumatoid arthritis organizations including the Ontario Rheumatology Association, which plays a critical role on the



"It is about creating a balance between patient access to therapies and ensuring patients have all the information they need to make informed decisions."

Dr. Claire Bombardier
Senior Scientist at the Toronto General Research Institute.

is about quality of life," she said. "When you cannot help your children get off to school because of arthritis, you want to try the new therapies developed. We want to know the risks of side effects and how they will affect us over the number of years we will be taking these therapies."

The Ontario Biologics Registry will provide that information over time. "It is about creating a balance between patient access to therapies and ensuring patients have all the information they need to make informed decisions," says Dr. Claire Bombardier, Senior Scientist at the Toronto General Research Institute.

"We have to find a common ground that

Stakeholder Advisory Committee.

The Registry is still in its planning stage as the protocol is being reviewed by the Ministry of Health. CAN has been a strong contributor to the development of the Registry and the Stakeholder Advisory Committee.

At this point, it is unknown when the Registry will begin but Elena is prepared to wait. While some of the drugs she was using are no longer available, she and her doctor have found other solutions to ease her discomfort. "This Registry is important," concludes Elena. "I want to be in control of my life." ■

Mark your calendar!

The Canadian Arthritis Network (CAN) is planning a series of initiatives in areas of research for which it has established Strategic Research Initiatives. These workshops and conferences offer an opportunity for potential partners to learn more about the Strategic Research Initiatives and to become involved at an early stage, shaping the direction of research and obtaining maximum benefit from the partnership.



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**Consensus Conference on
Preclinical Models of Osteoarthritis**
May 18 – 19, 2006
Montreal, Quebec

R&D in osteoarthritis relies on the use of preclinical studies to assess efficacy and toxicity of new treatments. Where there is an array of models and technologies available, the challenge for researchers, industry and regulatory agencies is to determine which model and technology would be the best indicator of clinical outcomes in human trials.

This conference will examine the use of models for the development of new treatments and diagnostics, as well as analytical methods used in the analyses of these models, including measurement of pain, use of biomarkers, imaging and mechanical testing. It will also address safety considerations and statistical analyses.

Attendance is by invitation only. Visit www.arthritisnetwork.ca for details and the Application/Registration form. Space is limited so apply now!

For more information, please contact:
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**Workshop on Bioengineering for
the Restoration of Joint Function**
June 8 – 9, 2006
Vancouver, British Columbia

The human body does not have the ability to repair or replace damaged or lost articular cartilage. When articular cartilage is destroyed by arthritis, joint replacement surgery is often the only way to restore joint function and relieve pain. The Network established a Strategic Research Initiative in Bioengineering for the Restoration of Joint Function because novel approaches are needed to treat joint disorders.

The workshop will address joint biomechanics and prostheses, new technologies for tissue repair and regeneration, and their assessment. It is an opportunity for researchers to engage in scientific exchange and for potential partners to become involved at an early stage of the research.

For more information, please visit www.arthritisnetwork.ca or contact:
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**2006 CAN Annual Scientific
Conference**
November 30 – December 2, 2006
Winnipeg, Manitoba

The Canadian Arthritis Network Annual Scientific Conference is the Network's premier networking opportunity to foster and enhance internal and external relationships with Network Investigators, government, industry, the international community and consumers toward continued collaboration and innovation in arthritis research. The conference program includes the latest research advances in CAN's Strategic Research Initiatives, innovations and expertise available in CAN's Strategic Research Resources, exciting opportunities for training and career development, and new commercialization opportunities.

For more information, please visit www.arthritisnetwork.ca or contact:
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CAN members in the news

DR. ROBIN POOLE was honoured as a Master by the American College of Rheumatology (ACR) at its annual meeting in October 2005. The designation, one of the highest honours bestowed on ACR members, was given in recognition for Dr. Poole's scholarly achievement and service to patients, students and his profession. Dr. Poole was acknowledged for his pioneering work in identifying new therapeutic targets to regulate cartilage resorption in disease and the development of new cartilage bio-marker immunoassays for arthritic disease.

The Board of Governors of McGill University named Dr. Robin Poole an Emeritus Professor, an appointment awarded to faculty based on academic merit and contribution to a field of study and to McGill's local environment and reputation. The designation salutes Dr. Poole's career as one of the world's outstanding cartilage investigators, attests to his leadership contribution to the Canadian Arthritis Network (CAN) and recognizes the admiration from his peers and students.

The exciting news that DR. YVES DE KONINCK, Professor at Université Laval, and DR. MICHAEL SALTER,

Senior Scientist at The Hospital for Sick Children, have identified a key protein involved in neuropathic pain was covered in the Toronto Star on December 14, 2005. The story highlighted the discovery of the role of microglia cells in neuropathic pain and the brain-derived Neurotropic Factor (BDNF).

Teamwork was key in finding answers for people living with lupus and in DR. SASHA BERNATSKY receiving the 2005 Network of Centres of Excellence Young Innovator Award.

Dr. Bernatsky, a CAN member, co-ordinated the study that clarified the cancer risk of systemic lupus erythematosus (SLE) patients. She collaborated the efforts of investigators from lupus research clinics including Dr. Ann Clarke, a CAN member who helped spearhead the initiative.

Dr. Bernatsky holds her PhD in epidemiology and biostatistics. She credits CAN with giving her the opportunity to pursue her postgraduate studies which began her research career. It helped her source other research funding and apply for fellowship with the Canadian Institute of Health Research in partnership with Lupus Canada. ■



CANADIAN ARTHRITIS NETWORK | LE RÉSEAU CANADIEN DE L'ARTHRITE

Today's arthritis research :: Tomorrow's cure

The Canadian Arthritis Network links researchers, clinicians, academia, The Arthritis Society, the Canadian Institutes of Health Research's Institute of Musculoskeletal Health and Arthritis, pharmaceutical and biotechnology companies, and government. The Network is a not-for-profit organization, funded by the Government of Canada's Networks of Centres of Excellence to support arthritis research and development and to facilitate the commercialization of its members' discoveries.

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Canadian Arthritis Network – Director of Communications

THE CANADIAN ARTHRITIS NETWORK supports arthritis R&D, facilitates the commercialization of its investigators' discoveries and is training the next generation of arthritis scientists. The Network is funded by the federal government through the Networks of Centres of Excellence program.

The Director of Communications provides strategic communications leadership to the Network, collaborates with associated industry, government and non-governmental organizations, produces the Network's publications and marketing materials to promote its successes and value, and monitors Network progress for reporting purposes.

Candidates will have a degree in communications, journalism or a closely related field; more than 10 years of progressive experience; an ability to manage multiple projects in a fast-paced, dynamic environment; an ability to translate technical decisions/strategies into business terms and implications; and an ability to produce documentation for multiple audiences. A background in medical or life sciences and written and oral English/French fluency are important assets.

For more information visit the CAN website at www.arthritisnetwork.ca/employment_opportunities.asp
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