



Message from the President and Chief Executive Officer

Greetings to everyone,



Photo: Yves Barrière

This year, Héma-Québec had the privilege to organize, in collaboration with Health Canada and Canadian Blood Services, World Blood Donor Day. The event was in its fourth edition and this year's theme was "Safe Blood for Safe Motherhood." Thus,

last June 14th, the organization took the opportunity to thank voluntary blood donors for their show of solidarity not only towards thousands of mothers and newborns around the world but also towards persons suffering from illnesses that require blood products. On pages two and three is a summary of the most important events of this very special day, which took place in Ottawa as well as in several locations across Québec.

This year, Héma-Québec's Management Committee focused on strategic planning. To such a degree that it became the leading consideration for the *2006-2007 Annual Report*. I am quite pleased to present you a preview of the results of our annual activities, which we plan to make public in September. Entitled "From Vision to action," this major publication highlights the organization's eight pivotal strategic elements and the concrete actions that support them. To promote commitment, support and recognition of its employees, maintain the trust of its clients and partners, and ensure safe and sufficient supply of our three lines of products remain at the heart of our focus.

In order to be well-prepared for the challenges that await us, Héma-Québec has planned to upgrade as of now its systems and technologies. For this, PROMINI, the blood management software suite upgrade project has been a major undertaking. It mobilized many resources, as much human as material. Once implemented and the necessary transition period over, this system will undoubtedly lead to several improvements.

Héma-Québec sees far ahead. It is determined to achieve a greater efficiency while becoming greener, continue to innovate notably through the work of its researchers, and to continue corporate outreach by establishing more international partnerships. Looking towards the future also involves ensuring continuity and transfer of knowledge and know-how to prepare qualified next generations. And this continuity must also maintain promoting blood donations and recruiting future donors and volunteers.

Awakening others to this profession, as well as increasing public awareness to the importance of selflessness and civic duty, is of utmost importance. Once again this year, several events provided the opportunity to give recognition to our donors and volunteers. You will find in this issue texts referring to various recognition evenings, as well as information about the 2007-2008 Regional Public Meetings held throughout Québec to allow discussions to take place between blood drive organizing committees, the media and the general public.

I wish to highlight the commitment of the volunteers working for the cause of blood donation. Among these, we must thank the members of the Board of Directors and our advisory committees who have significantly contributed to achieving Héma-Québec's mission. This year, the Board of Directors adopted various practices for good corporate governance, which can only benefit the organization.

Without intending to cause worry, I wish to conclude on a more serious note. The threat of an influenza pandemic is still in the air. Héma-Québec is prepared to face such eventualities so as to minimize its effects on the procurement of our services should it arise. Through its contingency plan, the updating of its Business Continuity Plan and various specific action plans, the organization has already implemented measures that will ensure an adequate procurement of blood products to the population.


Dr. Francine Décarie



**2006-2007
ANNUAL
REPORT**
A FEW
STATISTICS p. 6

**INFLUENZA
PANDEMIC**
HÉMA-QUÉBEC
GETS READY p. 12

Canada hosted the world

“Safe Blood for Safe Motherhood” was the theme this year for World Blood Donor Day, celebrated on June 14, 2007. Indeed, the World Health Organization (WHO), the International Federation of Red Cross and Red Crescent Societies, the International Society of Blood Transfusion and the International Federation of Blood Donor Organizations chose Canada to serve as host country for World Blood Donor Day. Celebrated in more than 80 countries, World Blood Donor Day was instituted in 2005 by the World Health Assembly. It was first hosted by the United Kingdom, then Thailand. June 14 commemorates the birth of Professor Karl Landsteiner, the Nobel Prize winner who developed the ABO system of blood typing.

Organized by Héma-Québec in collaboration with Health Canada and Canadian Blood Services, the event aimed to highlight how voluntary blood donors can help save the lives of thousands of mothers and newborns around the world. It should be noa3wbor



Short sleeves honoured

Héma-Québec has launched its summer campaign with the theme "This summer, wear your short sleeves." From June 18 to September 9, 2007, as a way to encourage Quebecers to give blood, even during the summer, even on vacation, Héma-Québec will be travelling to all regions of Québec to reach vacationers, wherever they are.

Dr. Francine Décar, Héma-Québec's President and Chief Executive Officer, with Dr. Graham Sher, Chief Executive Officer at Canadian Blood Services, during the celebrations in Ottawa.

The blood products supply situation around the world

According to the WHO, approximately 60% of the world's blood supply is collected in industrialized countries, where less than 20% of the world's population lives. This means that numerous countries are facing serious blood shortages. In addition, less than one quarter of countries succeed in operating exclusively with volunteer blood donors. In numerous countries, patients still depend—to varying degrees—on blood donations from friends or family members, and in some places, donors are still sometimes paid to donate blood.

Although blood cannot cross borders, knowledge and leadership can. Part of Héma-Québec's role also consists in making other countries benefit from its expertise by taking an active part in training activities.



A GRATEFUL YOUNG MOTHER

An adopted Quebecer since 1999, born in Gabon, Africa, Merryl Nteme is an old hand at blood transfusions, as she suffers from drepanocytosis. Commonly called sickle-cell anemia, this hereditary disease affects how red blood cells are shaped and the way they function. This disease requires regular blood transfusions.

"I have known two very different realities. Indeed, in Gabon, blood was quite frequently simply not available. I want to thank all blood donors. Their generosity has allowed me to live and fulfill a dream that is now six months old: Willyam! All mothers and children around the world should have the same opportunity."



HÉMA-QUÉBEC SHINES!

Once again this year, Héma-Québec won a number of awards, a testament not only to its vitality but also of how much stakeholders from a variety of settings appreciate it. Among the prizes received, an honour was given to the entire organization: The 2006 Prix de la Santé.

Héma-Québec was awarded this prestigious mark of recognition at the Fondation Armand-Frappier's Fête Champêtre to honour the success of an organization that operates in the field of human health, and the role it plays in its field. Here are some other prizes and distinctions earned in 2006-2007:

- On April 7, 2006, on the 30th anniversary of her graduation, Suzanne Rémy, Vice President, Quality and Standards, was honoured by the Université de Montréal's Association des diplômés et des professeurs de la Faculté de médecine. She was presented with a medal for her outstanding professional work.
- The GLOBULE concept boutique was awarded a Laurier d'argent at the Assemblée annuelle des marchands de Place Laurier, June 19, 2006 in Québec City.
- Dr. Francine Décary received the title of the Université de Sherbrooke's honorary ambassador at the institution's 12th Outreach Gala on November 17, 2006.
- Dr. Francine Décary was among the "40 personnalités qui font bouger le Québec" (40 Québec movers and shakers) in the Research, Science and Innovation category. A short article entitled "Le don de soi" (Giving of yourself) appeared in *Magazine Québec*, Vol. 5, No 2, March-April 2007, p. 29.
- Nominated by SAP AG, Héma-Québec was a finalist in the 2007 Computerworld Honors Program Award in the Government and Non-Profit Organizations category, a distinction given to organizations that have improved society through remarkable use of information technology, Washington, D.C. in April 2007. In addition to the Laureates medal, the organization also received a finalist trophy for ranking among the five best candidates in its category (See photo above).



This fall, a number of members of Héma-Québec's management will be meeting with partners in several Québec regions during the Regional Public Meetings. This provincial tour takes place on two consecutive years. The itinerary of the first part of the tour, in 2007, includes ten cities.

The meetings will, in particular, allow Héma-Québec to thank members of mobile drive organizing committees and engage in discussion on the topics that affect them.

Héma-Québec representatives provide participants with a report on the activities done this year, as well as the organization's plans. We will also be discussing blood donation awareness measures and the conditions for blood drive success.

It is an excellent opportunity to inform partners in the community about the organization's achievements. Consider yourselves invited!



Dr. Francine Décary, Héma-Québec's President and Chief Executive Officer, with Suzie Lamontagne, Fleurette's daughter, who receives blood to treat her condition, during a regional public meeting in St. Georges-de-Beauce.

2007 REGIONAL PUBLIC MEETINGS

Date	City	Place	Time
September 18	Sept-Îles	Hôtel Sept-Îles	7:30 pm
September 19	Chicoutimi	Centre de congrès Le Montagnais	7:30 pm
September 25	Montréal	Marriott Château Champlain	at lunchtime*
October 4	Boucherville	Hôtel Mortagne	7:30 pm
October 10	Drummondville	Centre des congrès	7:30 pm
October 30	Shawinigan	Auberge Gouverneur	7:30 pm
November 6	Sherbrooke	Hôtel Delta	7:30 pm
November 21	Québec	Hôtel Québec	7:30 pm
November 28	Montréal-Est	Centre Renaissance	7:30 pm
December 5	St-Ferdinand	Manoir du Lac William	7:30 pm

* Meeting time to be determined.

Dates and locations are subject to change without notice.

HÉMA-QUÉBEC HIGHLIGHTED NATIONAL ORGAN AND TISSUE DONATION WEEK

National Organ and Tissue Donation Week took place from April 22 to 29, 2007. Within the framework of that week, Héma-Québec emphasized that donating tissue is an act of immense generosity on the part of the donor and takes great courage on the part of their family. Human organs and tissues intended for transplantation can improve the quality of life of thousands of children and adults. Those who are waiting for transplants depend on this type of generosity.

In addition to its role as a supplier of blood products for Québec, Héma-Québec acts as supplier of human tissues intended for transplant. "It may seem like an abstract concept when we are in good health and alive, but it is quite significant when it comes to saving a life or even improving the quality of life of a patient waiting for a transplant," stated Dr. Francine Décary, President and Chief Executive Officer of Héma-Québec. "Following the example for blood products, Héma-Québec will apply the highest standards and use leading-edge technology to ensure the safety and adequacy of human tissues. Our commitment is to ensure that the public and patients in Québec hospitals have access to safe products for the transplant of human tissues," explained Dr. Décary.

There are different categories of human tissues, including bone grafts and heart valves. Héma-Québec collects, treats and distributes bone grafts to Québec's hospitals.

Anyone who meets the criteria may consent to a tissue donation by signing the consent sticker that is distributed with all new health insurance cards in Québec and affixing it to the back of the card. Potential donors can also write to the Chambre des notaires du Québec's Organ and Tissue Donation Consent Registry (Registre des consentements au don d'organes et de tissus). In any case, it is important that the potential donor notifies his or her loved ones about the consent.

For further information on human tissue donation, visit the Human Tissues section of the Héma-Québec Web site at:

www.hema-quebec.qc.ca



CORD BLOOD: A PRECIOUS RESOURCE!

Diane Roy, Stem Cell Donor Registry Director

Since the Public Cord Blood Bank began operations, we have taken more than 2,000 registrations. Of this number, 400 units of umbilical cord blood were treated and placed in the bank for future use in patients with serious illnesses like leukemia.

To promote this service, we produced a video with accounts by cord blood recipients and couples that donated their newborns' cord blood. From March 29 to April 1, we had an exhibit at the Parents and Kids Fair at Place Bonaventure. Our information booth was busy with lots of moms-to-be. Moreover, the Mères & Cie event will help us increase our visibility among future mothers through its website (www.meresetcie.com).

We also met with some hospitals to discuss a future partnership for cord blood donations to the bank: CHUQ, in Québec city, and Sacré-Coeur and Royal Victoria, in Montréal. Other hospital centres also showed interest but to date only Sainte-Justine and St. Mary have joined as partners.

2006-2007 ANNUAL REPORT...

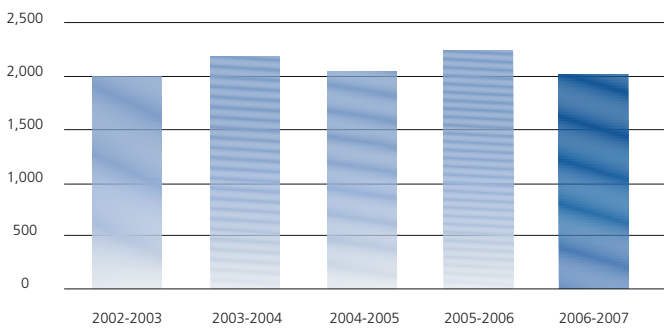
Héma-Québec's future relies on the elements of its strategic planning. The new annual report will tell you about these elements of planning. Strategic planning covers eight major issues. Among them, ensuring a safe, adequate supply of blood products, human tissue, cord blood and stem cells is, without a doubt, one of the organization's constant concerns. The following statistics are taken from the *2006-2007 Annual Report* for the three lines of products.



Blood Products
Stem Cells
Human Tissues

BLOOD PRODUCTS

Number of days of mobile blood drives*



Héma-Québec was never short on blood products even though the number of mobile blood drive days is lower than last year, with only 2,013 drives in 2006-2007 compared with 2,236 the preceding year. This 10% drop can be attributed to greater efficiency.

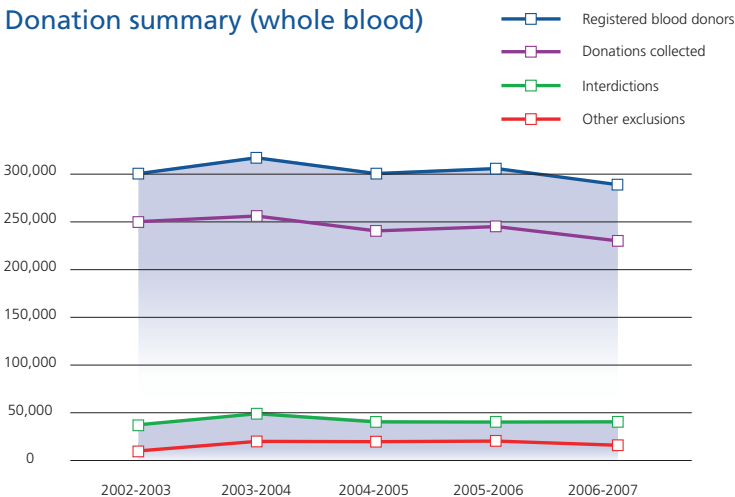
* The total of events in a day equals the number of collection days.

Average number of donations per blood donor



The number of donations per donor fell slightly this year to 1.58. This represents a 4.2% decrease. The difference is due to the transfer of around 650 high-frequency whole blood donors to the apheresis platelet program.

Donation summary (whole blood)



Improvements to the supply strategy and stabilization in demand have resulted in a decrease in donors registered, with 287,199 compared with 304,026 the preceding year.

Number of new whole blood donors registered



In 2006-2007, the number of new blood donors went up to 35,872, for a 5.1% increase from 2005-2006. New donors represent 12.9% of the total number of whole blood donors. Among them, 6,020 were recruited, due to ABDV's promotional efforts, among other things, at drives held at cégeps and universities. Blood drives organized in elementary schools also attracted more new donors, i.e., 38% compared with 12% for regular blood drives.

A FEW STATISTICS

Labile blood products delivered to hospitals

Products	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007
Packed red cells	221,659	223,723	220,215	221,256	223,100
Platelets from whole blood	107,612	98,114	71,284	55,295	46,446
Equivalent-platelets by apheresis*	21,170	33,875	56,950	80,945	100,390
Total platelets	128,782	131,989	130,234	136,240	147,166
Plasma from whole blood	39,324	46,090	46,999	45,535	47,457
Equivalent-plasma by apheresis**	16,400	16,462	14,340	14,998	15,454
Total plasma	55,724	62,552	61,339	60,533	62,911
Cryoprecipitate	12,685	12,888	11,568	13,451	15,793
Cryoprecipitate supernatants	6,593	10,866	8,768	8,910	7,792
Total	425,443	442,018	432,124	440,390	466,762

In total, the organization delivered more products to hospitals than it did last year. The increase in products shipped is due to plasma products, with products shipped up by 11,000, and to a lesser degree to the 1,840 increase in packed red blood cell products.

*One bag of platelets by apheresis is equivalent to the quantity of platelets derived from five bags of whole blood.

**One bag of plasma by apheresis is equivalent to the quantity of plasma from two bags of whole blood.

HUMAN TISSUES

Number of tissue donors collected from

	2004-2005	2005-2006	2006-2007
Musculoskeletal tissue donors	25	32	46
Heart tissue donors	13*	22*	26
Donors of both types of tissue	30	29	49
Cutaneous tissue donors	s / o	s / o	2**
Total	68	83	123

*For these two years, cardiac tissues were sent to Halifax for treatment.

**Cutaneous tissue donations began at the end of the year.

Number of grafts distributed to hospitals

	2004-2005	2005-2006	2006-2007
Morcelized bone	s / o	128	249
Head of femur	24	55	35
Other	43	60	67
Valves*	s / o	s / o	13
Total	67	243	364

A total of 364 grafts were distributed this year compared with 243 last year; of this number, 13 were valve grafts, a new product this year.

*Previously, valves were collected, but these were distributed by the Halifax centre.

STEM CELLS

Number of people registered in the Unrelated Stem Cell Donor Registry*

	2002	2003	2004	2005	2006
Québec	36,867	36,445	35,227	34,547	29,653
Canada	223,430	218,500	217,521	221,836	222,672
Worldwide	8,500,000	9,000,000	9,600,000	10,300,000	11,089,000

In Québec, 640 new donors were added, but 1,035 were removed, mostly due to the age limit. Although 10,000 new donors were added in 2006 across Canada, 9,000 donors had to be removed from the Registry, for the same reason.

*Please note that the Registry is counted by calendar year.

Activities of the Public Cord Blood Bank

Activities from the beginning of the program until March 31, 2007	
Registered mothers	2,335
Qualified mothers	1,821
Cords collected	1,383
Cords frozen	402

The difference between the number of qualifications (eligible registered mothers-to-be) and the number of cords collected is due to a number of factors that arise during labour.

Difference between the number of cords collected and the number of cords frozen:

- Insufficient volume collected (< 120 mL, including the anticoagulant solution);
- Insufficient number of nucleated cells (< 1.0×10^9 , according to the international standard).

The complete *2006-2007 Annual Report* will soon be available on our website:

www.hema-quebec.qc.ca

TRIBUTE TO DONORS...

Under the "Partner for Life" recognition program, Héma-Québec annually showcases the commitment and importance of its thousands of volunteers. Last March and April, as part of National Volunteer Week, sixty-three award winners were honoured during four recognition evenings held in Montréal and Québec City.

These award winners, chosen from among a group of particularly illustrious 2006 finalists, had all made an exceptional contribution to Héma-Québec's mission as volunteers (young volunteers, volunteers, regional volunteers and members of the Association of Blood Donation Volunteers) or as members of various blood drive organizing committees (community, corporate, government, school, provincial, cultural communities and media).

Since maintaining Québec's collective blood supply rests primarily on the generosity of volunteers, of individuals who give blood for free, donors were also honoured for their outstanding contribution.

DONOR RECOGNITION

Great Blood Donation Ambassadors

Each year, Héma-Québec organizes recognition activities to highlight the exceptional contribution of selfless people who have made the act of giving blood a civic duty. Up to now, 2,600⁺ blood donors in Québec have passed the 100-donation mark and have earned the title of "Great Blood Donation Ambassador".

These practiced donors were conferred honours during four recognition evenings held in Laval, Québec City (including Trois-Rivières), Montréal and Boucherville. This year, 560 major donors were invited. Dr. Francine Décary, President and Chief Executive Officer of Héma-Québec, handed out honorary certificates to these heroes, who have generously contributed to saving thousands of lives of Quebecers.

Unrelated Stem Cell Donors

Héma-Québec organizes each year a special recognition evening for unrelated stem cell donors, to honour their extraordinary generosity and selflessness, for these people have consented to allogeneic stem cell donation.

The sixth edition of the unrelated stem cell donors recognition evening was held last September 30, 2006. The evening was an occasion for donors,



1st row: Falène Dorméus, Lyse Tremblay, Lucas Di Tecco (cord blood recipient), Luc Bernier (2nd donation). 2nd row: Lucie Goderre (2nd donation), Antoine Paquet, Marie France Langlet (Lucas' mother), Annie St-Gelais (bone marrow recipient), Richard Gauvin, and Danielle Laurin. Not shown on the photo: Nicole Saint-Laurent, Godefroy Clément and Daniel Tardif could not be present, unfortunately.

recipients and Héma-Québec personnel to meet. Eleven donors were honoured for bone marrow puncture and apheresis. Young Lucas Di Tecco, a cord blood transplant recipient, and Annie St-Gelais, recipient of bone marrow, both thanked their donors for their own sakes and that of all the ailing who have received transplants thanks to unrelated donors.

"As far back as I remember, I've always dreamed that one day I would become a police officer, a soldier, a firefighter, or a physician, to be able to save lives and become a hero. However, I didn't believe that I had the right stuff, but thanks to you, I've become one. One among thousands of others, an anonymous hero, but a hero in the very finest sense."

**Denis Marsolais
Repentigny, 100 donations**

Just a reminder: those who are interested in having their name added to the Stem Cell Donor Registry or who wish to receive an information kit, can communicate with the personnel in charge by calling the following number: 1-800-565-MOEL (6635), extension 279 or 280.

Donors for Operational Research

Another way to become a donor and contribute to the improvement of the quality of blood products for illnesses and the efficiency of the services we supply hospitals and the Québec population: sign up to the R&D Donor Registry.

This registry contains the names of people who can no longer or cannot donate blood due to failing to meet qualification criteria, or who do not wish to give blood, but feel the urge to contribute in some way. These people can volunteer for research projects for our Operational Testing Group (OTG).

For the first time in Héma-Québec's brief history, this category of donors was given recognition in Sainte-Foy, May 30. One hundred twenty-seven donors were invited to this honorary evening.

For more information or to register in the R&D Donor Registry, we invite you to consult the OTG brochure or communicate with Claudine Côté, 418-780-4362, extension 3256 or 1-800-267-9711, extension 3256. Please note that this program is mostly for residents of the Montréal and Québec City areas.

AND VOLUNTEERS

MONTRÉAL AND WESTERN QUÉBEC FINALISTS



Organizing Committees

First row, from left to right: A guest, Johanne Landry from Pensionnat des Sacrés-Cœurs, Lise Perreault from Caisses Desjardins de l'Estrie, Sylvie Chalifoux from Rolls Royce Canada Ltd., Jenifer Rivard from Parc-Extension Youth Organization P.E.Y.O., Lyne Jolin from Collège Charles-Lemoyne Longueuil Campus II and Gaston Martin, a heart recipient.

Second row: Guy Lefrançois from Pensionnat des Sacrés-Cœurs, Dr. Francine Décary, Héma-Québec's President and Chief Executive Officer, Nancy Laverdure from École Anne-Hébert, Nathalie Simon-Guay from Oerlikon Contraves Inc., Normand Masse from M 103,5 and Germain Bonneau from Club Optimiste Iberville.

Third row: Marie-Anne Bruyère from Corps de Cadets 3062 Sainte-Annes-Plaines, Émilien Pelletier from Club Optimiste Douville-Saint-Hyacinthe and Marie Caron from Place Ville-Marie.

Fourth row: Pierre Tardif from Mouvement Desjardins, Chaouki Abou-Malhab from Les Kataeb Libano-Canadiens, Jasmyn Beauséjour from Collège St-Sacrement, Jean Cardinal from CFCF on the occasion of Salon de l'Auto and Michel Cantin from National Defence – Montréal Garrison.



Volunteers

From left to right: Réjeanne Pelchat, Claude Germain, Lise Larocque, Suzanne Dumaine, Lamia Harraz, Meriem Hammou, Dr. Francine Décary, Héma-Québec's President and Chief Executive Officer, Anita Tataru, Teresa Arena-Bishai, Jean-Noël Doucet, Vilma Bermudez and Ninon Harnois.

QUÉBEC AND EASTERN QUÉBEC FINALISTS



Organizing Committees

First row, from left to right: Guy Blais from Chevaliers de Colomb de Montmagny, conseil 2634, Françoise Caouette, distinguished volunteer, Valérie Mathieu from Association des étudiants du Cégep de Sainte-Foy and Claude Claveau from Sûreté du Québec, MRC Lac-Saint-Jean-Est.

Second row: Marie-Pier Charest from Département d'éducation physique, Université Laval, Lucie Vachon from L'Union Canadienne, Dr. Francine Décary, Héma-Québec's President and Chief Executive Officer, Richard Dufour, recipient, Guy-Noël Vachon from Ambulance Saint-Jean and Chevaliers de Colomb de Saint-Prospère, Marie-Claude Gauthier from École l'Escalade and Richard Ferland from Mouvement Desjardins.

Third row: Michel Filion from Pompiers de Lambton, Guimond Breton from Chevaliers de Colomb de Saint-Bernard, conseil 12751, René Breton, Jocelyn Gagnon from Département d'éducation physique, Université Laval, Serge Bégin from École l'Escalade, François Grenier from ING, Frantz Cator from Rock Détente 94,7 Mauricie and Antoine Bossinotte from CHOI Radio X.



Volunteers

From left to right: Marie-Lise Pagé, Irène Ouellet-Plante, Patricia Dion, recipient, Geneviève Simard, Josette Hamel, Georges Hamel (seated), Dr. Francine Décary, Héma-Québec's President and Chief Executive Officer, Simone Berge, Sylvio Chaîné, Ginette Bourgoïn, Rodrigo Peña and Lucien Leblanc.

TESTIMONIES

Two exceptional sisters!

We received a touching and inspiring email that reminds us how important our cause is. But to begin with, here is some background.

In March 2006, Jasmine Courteau-Ahmed was diagnosed with acute myeloid leukemia. In January of the following year, she died at the age of 21 after a cord blood transplant at Hôpital Maisonneuve-Rosemont. Jasmine received a lot of blood prior to her transplant and she was a great spokesperson for giving blood. On February 14, 2007, Jasmine's mother contacted Diane Roy, director of the bone marrow registry, in order to organize a drive in her memory.

France Boutin, a blood drive advisor, had the pleasure of organizing this initial drive in Jasmine's memory on May 5, 2007. They set a lofty goal for the NDG neighbourhood: 125 donors.

The drive in Jasmine's memory brought together not only Jasmine's family, friends and university colleagues, it also brought in 127 donors, 60% of whom were making their first donation, an exceptional number for a drive not held in an academic setting.

A booth on stem cell donation was put up with help from the daughter of one of our spokespeople. This paid off with an additional 8 names, including Jasmine's sister Eva Michelle Courteau-Ahmed.



Eva Michelle Courteau-Ahmed, Jasmine's sister, with her mother, Mary-Lynne Courteau.

Hello France,

It gives me great pleasure to announce that my daughter Eva Michelle Courteau-Ahmed (19) has just received a call from Johanne Marcotte at Héma-Québec, to say that Eva Michelle has been selected from the stem cell bank. She has four compatibility factors with someone who is waiting for a transplant. She will have to take a blood test to determine whether she is a perfect match (6 factors out of 6).

Eva Michelle was not compatible enough to give stem cells to Jasmine but who knows, maybe she will for someone else.

Irony of ironies, the nurse caring for [a patient receiving a graft today] is the one who looked after Jasmine when she was hospitalized at Maisonneuve-Rosemont.

France, I'd like to take this opportunity to thank the entire Héma-Québec team, which contributed to the success of our drive in memory of Jasmine on May 5. I want to emphasize the outstanding work done by Nathalie Bouchard, the nurses, volunteers,

truck drivers and technicians who have shown real compassion and patience toward our family and Jasmine's friends. It is our first drive and we were all impressed by the organization and the professionalism of your entire team.

Mary-Lynne Courteau, mother of Jasmine Courteau-Ahmed

A big thank you!

We received this touching email on January 29, 2007, from someone who had been gravely injured and wanted to thank Héma-Québec and its numerous, generous volunteers.

Hello,

I would like to wish you a heartfelt thank you!

In May, 2001, I was riding my motorcycle when I was struck from the side by a car. The impact threw me about 100 feet. The reckless driver didn't even stop to help me. My body—what was left of it—was only found 30-45 minutes later.

My diagnosis? Multiple fractures: pelvis, thigh, sacrum, sacroiliac and dorsal spine. Not to mention brain shears, temporary paralysis of the right arm, a right eye that came partially out of the socket, and a dislocation of the right wrist! This is in addition to numerous scratches all over my body. So operations...I've had a few!



Sylvain Rioux, a warehouse employee. At all times, Héma-Québec ships blood products in order to meet hospitals' needs.

I needed a lot of help, care and love from those around me. But most of all, I needed a lot of blood, without which I wouldn't be here today.

I never gave blood before because I was afraid it would hurt. If it does, then I can say that a lot of people suffered so that I could continue to live.

After nine months in the hospital, and three and a half years off work, I'm functional again, despite a few lingering symptoms. I now realize that those who give blood give life.

Once again, thank you!

I can't give blood right now as I'm on too many medications. But knowing now what I do now, I will give.

Sylvain Tardif
Sainte-Foy

What's better than giving blood?

Peter Ratcliffe

In 1978 I suffered a sudden bleeding ulcer and was given eight units of blood that probably saved my life. I have never taken our blood system for granted since. Before and after that event I have given blood usually several times per year. About eighteen months ago I was asked by Héma-Québec if I would consider donating platelets instead.

First some simple layman explanations: Platelets are that very critical part of our blood that clumps together to help stop bleeding. They have a very short useful life in or out of the body; so healthy people continually make enough platelets to replace all of them approximately every five days.

Why has the need for platelets risen so much recently? Platelets are required by many different types of patients including cancer and blood disorder patients whose treatment can cause bleeding problems, also heart surgery and many other illnesses and complex treatment regimes. If you are on some newer anti-clotting medications and require emergency surgery you will probably need platelets in a hurry to quickly allow the surgery.

Bottom line: anyone who needs platelets is really very sick will be much worse off or may die without an immediately available supply. Since platelets have a maximum five-day usefulness, the blood system requires continual donation, and the demand is increasing rapidly. It's a critical juggling act to have platelets always ready.

The longstanding way to supply platelets has been to separate whole blood donations into component parts. It takes five donation units of whole blood to yield one unit of platelets. You can donate whole blood every 56 days, or about 6.5 times per year. So a reliable really dedicated whole blood donor can only provide enough blood for barely over one unit of platelets per year.

The modern way of donating platelets is through apheresis. Basically, your blood is processed and centrifuged by this automated machine, and only the platelets are kept, everything else is returned to you. A normal single platelet donation takes about 45-60 minutes hooked to the machine, and if your platelet count and other parameters are within safe ranges, a double donation takes about 75-90 minutes on machine.

The real magic is that because they only take the platelets and not the slower to replace parts, you can donate as often as every 14 days up to a maximum of 24 times per year. Also, really sick patients who may have compromised immune systems get a single donor per single or double unit and that avoids some possible complications.



A TRIMA device, used for platelet collection.

In the past year I have donated platelets approximately fifteen times, all but one of those has been a double donation. Using the five units of whole blood equals a single unit of platelets formula; I have donated the equivalent platelets to 145 units of whole blood in the last year. It would take me over twenty years of giving whole blood to equal my last twelve months of platelet donations.

As long as you choose to donate platelets, you must stop giving whole blood. I've never had any complications, pain or problems, and spend the time there relaxed and either napping or reading one handed. In one case I got an emergency call asking if I could come in to donate for a specific patient because I was a particularly close match. It felt very special that I could donate something important for someone who was in dire need of something I had.

How can I make a platelet donation?

If you're in good health and you have the interest and can make the time you can do something that's really important for people who are really sick.

The GLOBULE Blood Donor Centres Côte-Vertu, Place Versailles and Place Laurier offer platelet donation. If you wish to consider donating platelets, first call Héma-Québec:

- Montréal region, 514-832-5000, Ext. 408
- Québec region, 418-780-HEMA

They will happily send you all the information you will need to decide if donating platelets is something you might want to do.

Total time there is about two hours for a single donation including the preliminary blood test, the questionnaire answers and the actual donation.

INFLUENZA PANDEMIC

The influenza pandemic—a subject much talked-about in the media and one which also raises many questions. And justifiably so! According to a plausible worst-case scenario, an influenza pandemic could affect 35% of Quebecers, leading to approximately 1.4 million doctor's visits, up to 34,000 hospitalizations and approximately 8,500 fatalities.

How would such a pandemic affect our daily lives? Would schools be closed? Would public transit continue to operate? These questions are difficult to answer. For the moment, the only certainty is that operations would be coordinated by the Public Security authorities, as in the case of natural disasters.

For Héma-Québec, like several other companies, the time has come to start preparing. Even though it is virtually impossible to prevent all the situations that could occur during an influenza pandemic, we can try to lessen the impacts by being adequately prepared.

Avian flu, influenza, pandemic... Three very different things!

Discussions about an influenza pandemic often go hand-in-hand with talk of avian flu and seasonal influenza. Although related, these conditions are different, and it is important to understand their distinguishing factors.

Avian flu

Avian flu is an animal disease that has existed for a very long time and which, as its name suggests, generally affects only birds. Infected birds show varying signs of illness depending on the virus strain, ranging from no symptoms in some cases to death in others.

Avian flu is spread between birds through contact with their secretions or excrement (droppings). Contact is especially frequent between wild birds that live in large flocks and on poultry farms. The disease is spread between wild birds and farm-raised poultry generally in areas where the poultry are allowed to roam free outdoors.

Albeit rarely, in specific conditions, a strain of the avian flu virus can also spread to mammals, including humans.

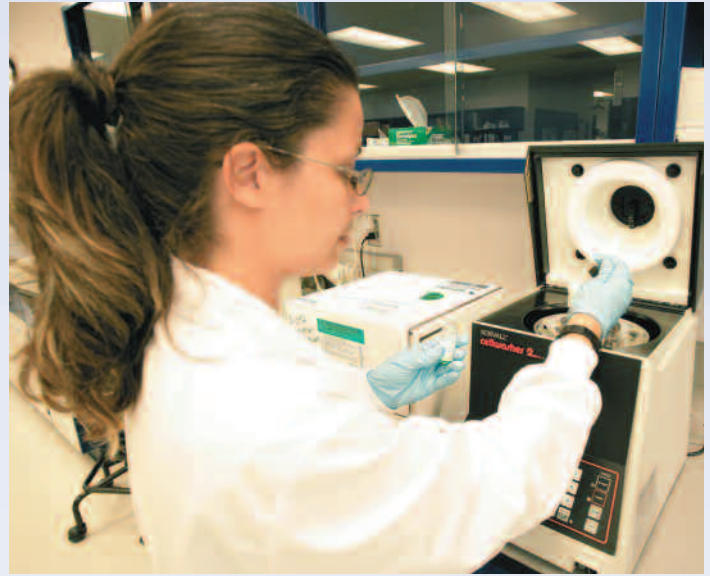
Generally, humans contract the virus only by direct contact with infected poultry. There is no risk of contracting the virus from eating properly cooked poultry.

Seasonal influenza

Seasonal influenza, commonly called the flu, is a respiratory tract infection caused by the influenza virus. In Québec, the flu season generally extends from November to April.

The influenza virus is highly contagious, with an estimated 15-20% of the population affected annually. Influenza is responsible for thousands of hospitalizations, and approximately 1,500 Quebecers die from complications of the virus every year.

Vaccination, hand washing and respiratory hygiene are effective means of protecting against seasonal influenza.



Influenza pandemic

An influenza pandemic is a planet-wide pandemic caused by a new strain of the virus having the following five characteristics:

- 1) it is capable of multiplying in the human body;
- 2) it causes serious illness or serious—even fatal—complications;
- 3) it spreads easily between humans, leading to sustained transmission and outbreaks across entire populations;
- 4) it is new, therefore the population has no immunity against it;
- 5) there is no effective, readily available vaccination against it.

New strains capable of causing a human influenza pandemic generally develop from an avian virus which mutates, a phenomenon that occurs several times every century.

In addition to this phenomenon, influenza viruses are constantly evolving. Usually, they mutate only slightly, which is what causes the seasonal flu epidemics that we see every year, but which are controlled by vaccination. If a virus were to mutate in such a way that we could not quickly protect ourselves with a vaccine, a pandemic could occur.

Why should we fear an influenza pandemic?

There were three influenza pandemics in the 20th century, all of avian origin: The Spanish flu of 1918-19, the Asian flu of 1957-58 and the Hong Kong flu of 1968-69.

Historical data show that a new pandemic strain of the influenza virus can emerge in the space of a few decades. While it is impossible to predict the exact moment of this happening, certain conditions, when combined, increase the probability. Today's experts now agree that such an event is increasingly likely.

Currently, there is no avian flu pandemic (global epidemic of a human disease). Since 2003, there have been only 315 isolated cases of zoonosis (animal disease occasionally contracted by humans) attributable to the avian flu virus, according to WHO data as at press time.

HÉMA-QUÉBEC GETS READY

Better intervention through prevention

Today's improved knowledge and scientific instruments, global efforts by researchers and governments, and high-speed communications enable a constant epidemiological and genetic watch of the spreading and mutation of the influenza virus. Yet, despite these advances, a pandemic is still possible, which is why public health authorities around the world are preparing action plans.

We can act now!

Halting the spread of the seasonal influenza virus or a pandemic virus starts with adopting healthy habits. Individually, we can start now with a few simple, everyday actions, such as frequent hand washing, hygiene and cough etiquette.

Héma-Québec gets ready

The aim is not to cause alarm, but rather to take the probability of influenza pandemic in the near future very seriously. This is exactly what we are doing at Héma-Québec. Accordingly, a committee of representatives from almost all divisions within Héma-Québec was created in August 2005 to draft a contingency plan in the event of a pandemic and evaluate likely consequences on our operations. This year, already, specific actions have been put in place, among others to face a potential donor shortage and employee leaves.

The continuity plan's aim is to maintain the blood products supply and to establish a proper coordination with Québec's Ministry of Health and Social Services and hospitals in order to manage shortages in the event of influenza.

Impact on Héma-Québec

While the spread of the virus through blood remains a theoretical consideration, in practice, the risk that a strain of influenza, even a new one, could be spread through transfusion is extremely limited. Note that during the 1957 and 1968 pandemics, no case was reported of the virus spreading through transfusion. The risk that a similar virus, even if it is more virulent, would also acquire the ability to spread through transfusion is extremely low.



However, we must expect a shortage, not only of donors but also of volunteers and staff. There are several reasons for this: The high attack rates of the virus, the unavailability of people caring for infected family members, the closure of schools and daycares, the implementation of quarantine or public health measures, and the fear of being exposed to the influenza virus.

Consequently, we should also expect a decrease in the demand for blood products, specifically packed red cells. In fact, in the event of an influenza pandemic, several elective surgeries would be cancelled, and influenza is not a disease that requires large amounts of blood products.

We do not expect a significant decrease in the need for platelets since these products are used in emergency situations. However, if some chemotherapy treatments were postponed, we could see a slight drop in the demand for platelet products.

We do not expect major changes in the use of plasma and other frozen labile products, or stable products, in the event of an influenza pandemic.

Given these observations, the committee devised various scenarios for a drop in product demand and production capacity. Hospitals were also surveyed to determine the potential impact of an influenza pandemic on their use of packed red cells and platelet products. The model of inventory fluctuations shows one thing: The higher the initial inventory, the longer it takes to reach a critical inventory level.

This is why the influenza pandemic committee is still hard at work and colleagues "in the field" are taking action. Subcommittees and taskforces are already at work or will be created in the coming weeks and months. On a day-to-day basis, union groups, Héma-Québec volunteers and the Association of Blood Donor Volunteers will have a very important role to play in this crisis. Once the feared influenza pandemic hits Québec, we will all be called upon to assume our responsibilities, and our civic duty will no doubt be tested.

"Although it is impossible to predict when, where and to what extent, it is possible to prepare for an eventual influenza pandemic."

Dr. Philippe Couillard,
Minister of Health
and Social Services

Sources and references

- Québec government, 2006
"Pandémie Québec" website
(www.pandemiequebec.ca)
- Ministère de la Santé et des Services sociaux, 2006
Plan québécois de lutte à une pandémie d'influenza
Mission santé (PDF version available)
- World Health Organization, 2007
"Avian Influenza" section of the website
(www.who.int)

NEW TO THE BOARD OF DIRECTORS

Good governance

In 2006-2007, governance was an important concern for Héma-Québec's Board of Directors. Even though the Québec government's Énoncé de politique sur la gouvernance dans les entreprises d'état (statement of policy on governance in state corporations) does not apply to the organization, it chose to follow certain recommendations.

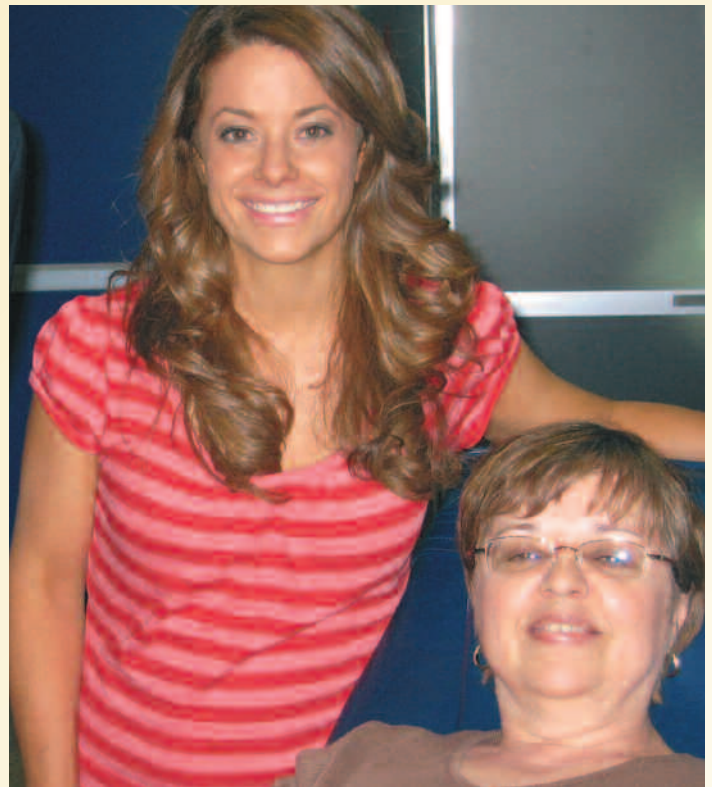
The Board of Directors also instituted a brand new committee—the Governance Committee—composed of directors who will ensure its activities are conducted appropriately. Its general rules were also modified. Lastly, governance training was offered to members of the Board.

Ethical measures

At the Board's request, a Policy on reporting financial irregularities was implemented. Staff must now report any irregularities of a financial nature, not only internally (Legal Affairs) as was previously the case, but also to an independent outside firm (KPMG).

The Code of ethics for directors was also modified and adopted in October 2006. All Directors are now required to sign it. In addition to the new Code, a Code of ethics for managers and employees was prepared by Legal Affairs at the Board's request.

Now more than ever, the Board is involved in Héma-Québec's major challenges. It is now better equipped and informed about daily activities and will be able to react promptly, if necessary.



TVA's Marie-Claude Savard, who co-presided this event with the columnist Rodger Brulotte, with a donor.

CELEBRITIES... ON OUR BLOOD DRIVES!

Each year, about 40 blood drive "happenings" are organized throughout Québec by the media, cities, major events or sports teams. These are major blood drives in terms of their donor objectives and the fact that their organizers are well-known among the general public. Celebrities show up to give blood or to thank donors for their noble deed. For instance, one of these, the Jacques-Beauchamp Journal de Montréal – TVA Blood Drive, took place on June 18.



Québec's Prime Minister, Jean Charest, during his visit to the Journal de Montréal blood drive.

Claude Pichette,
Director General of the Héma-Québec Foundation

Golf at night!

Nine years ago, Patrick Bérard was diagnosed with an aggressive form of cancer. After receiving 300 blood transfusions and many treatments, his restored health is nothing short of miraculous. Today, he is actively taking advantage of life and, over the years, has organized fundraising activities as thanks. In February 2006, he launched a fund in his own name under the Héma-Québec Foundation with a highly successful benefit concert.

This year, Patrick Bérard proposed a truly original idea. More than 140 players were invited to a night-time golf tournament. This annual tournament is organized to benefit the Patrick Bérard Fund, which is affiliated with the Héma-Québec Foundation. The tournament, which was held June 8th at Boucherville golf club, was presided over by honorary chair Mr. Guillaume Tremblay, President of RackUltra. The organizing committee, chaired by Mr. Patrick Bérard, included Nicholas-Olivier Caron from Sénik, Station M President Annie Crémont, and Claude Pichette, Director General of the Héma-Québec Fondation.

The Héma-Québec Fondation created a Chair of Transfusion Medicine at the Université de Montréal in 2005. The Chair is charged with advancing knowledge in transfusion medicine and delivering training in the field. As someone who had received many blood products, Patrick wanted to support the Chair's mission. The Patrick Bérard Fund intends to create research grants for young researchers on the Chair's team. The Héma-Québec Foundation would like to thank all of the players, sponsors and benefactors who took part in the tournament. Their priceless support will help the Héma-Québec Foundation pursue the activities of the Patrick Bérard Fund in a dynamic and engaging manner.

A Celebration of Life 2007

The Foundation will soon be organizing the Celebration of Life, 2007. This benefit celebration will enable the Foundation to create the Give Blood. Give Life. Fund to promote blood donation, and engage the next generation of donors. The celebration will commemorate the contributions made by individuals, businesses and organizations to saving lives by donating blood, stem cells or human tissue. It will also be an opportunity to express society's gratitude for their generous and selfless actions.

At the heart of this event will be a personal account by the honorary chair of the Celebration of Life 2007, former Quebec Premier Mr. Lucien Bouchard, lawyer with Davies Ward Phillips &



Vineberg. As someone who has benefited personally from the gift of blood, he will discuss the importance of that gift, of transfusion medicine, and of Héma-Québec's critical action in that respect.

The Celebration will take place on September 6, 2007 on the shores of Lake Saint-Louis at the magnificent Forest & Stream Club, located at 1800 Lakeshore Drive in Dorval.

If you would like to participate in this prestigious event, please click on the Foundation tab of Héma-Québec's website. It contains relevant information and registration forms.

For further information, visit: www.hema-quebec.qc.ca

INFO 

This publication is published by Héma-Québec's Public Affairs Department, Public Affairs and Marketing Division.

Editor: Michel Thisdel, Director of Public Affairs (by interim)
Coordination: Olivier Lagueux
Writing: Olivier Lagueux, Michel Thisdel
Collaborators: Mary-Lynne Courteau, Denis Marsolais, Claude Pichette, Peter Ratcliffe, Diane Roy, Sylvain Tardif
Graphic Design: Daniel Poirier

How to reach us:

4045, Côte-Vertu Blvd., Saint-Laurent (Québec) H4R 2W7
Telephone : 514-832-5000 • 1-888-666-HEMA (4362)
Fax: 514-832-1021
info@hema-quebec.qc.ca

Printing: 15 000 copies

Contents may be reproduced if source is identified.

Legal deposit, Bibliothèque nationale du Québec, 2007

ISSN: 1703-2253



WE VALUE YOUR COMMENTS

We would like to know your opinion on the contents of *Info Héma-Québec*.

Please send your comments and article ideas to the following address:

info@hema-quebec.qc.ca