

# HEADLINE NEWS

Focused on Today's Care, Tomorrow's Cure

Vol. XXXVI, No. 4 Fall, 2006

## Let Your Voice Be Heard

By Kathleen Roach

For over 30 years, Great Lakes Hemophilia Foundation (GLHF) has been dedicated to advocating on behalf of the bleeding disorder community. In the spring of 2005, the GLHF Board of Directors and staff created a strategic plan that recommitted advocacy as one of the Foundation's top five priorities over the next several years.

Through this commitment, an advocacy committee was formed. This group of consumers, board members and staff has spent the last year developing strategies to address key issues at the state and national levels. Strategies such as letter writing to legislators; publishing articles in Hemaware and Headline News; attending Washington Days in Washington D.C.; creating a new advocacy web page on the GLHF web page ([www.glhf.org](http://www.glhf.org)) and focusing on consumer advocacy at the recent family ACCESS conference.

With a year under its belt, the advocacy committee members agree the most important strategy is to make sure the bleeding disorder community can advocate on their own behalf as well as a community. This can seem daunting if you have never made a phone call to your local legislator or written a letter to your state senator or attended a policy related rally. But, it is crucial to let your voice be heard. As the advocacy committee begins its second year, it is our goal to

- 1) Get Organized
- 2) Get educated
- 3) Develop a compelling message
- 4) Communicate our message to our representatives
- 5) Set up face to face meetings
- 6) Keep the momentum going

The committee will need your help to complete the six crucial steps. There are plans under way to hold a legislative day in Madison, WI next spring. We need you there, we need your voice, we need you to tell your story so the bleeding disorder community will be heard and not forgotten. Likewise, when a bill is being voted on at the state or national level that will affect the bleeding disorder community, we need your voice, we need you to tell your story because truly you can make a difference by letting your voice be heard.

GLHF will continue to dedicate the next thirty years to information, advocacy and programs services for the bleeding disorder community. Join us with your voice.



## Poinsettias are Back!

The Holiday Poinsettia and Wreath Fundraiser is returning by popular demand!

Look for your order form on page 11 of this newsletter. You can also order online at [www.glhf.org](http://www.glhf.org) or by calling the Foundation at 414-257-0200.

# Understanding Sibling Issues

By Mary Anne Schall

Every family member, including siblings, is affected by the diagnosis of a bleeding disorder. Siblings, regardless of age or birth-order, experience a wide range of feelings regarding their siblings... any sibling... and perhaps especially a sibling with bleeding disorders. In talking about their feelings, these sibs have admitted to embarrassment, anger, guilt, and jealousy. At the same time, sibs of children with a bleeding disorder show how protective, loving, and surprisingly wise they can be.

It is important to be honest with siblings. It is helpful to explain the bleeding disorder in ways that the sibling can understand adding information as the child matures. Your Hemophilia Treatment Center can help with this. Siblings generally go through a period of adjustment, just like parents. When much attention focuses on the child with a bleeding disorder, the other siblings may feel left-out or ignored. Siblings may also feel confused and worried especially if they have no explanations for what is happening.

How can you address these feelings? What can you do to help the sibling better understand what's happening within the family? What do siblings want parents to know? The following list was developed by the *Sibling Support Project*. The website for this terrific group is included at the end of this article.

## Ten Things Siblings Want Parents to Know

1. Sibling's experiences are close to parent's experiences.
2. Siblings need information about their brother or sister with a bleeding disorder. Not knowing can create greater fear.
3. Siblings need open communication with both parents and other siblings.
4. Siblings need parents to listen. Listening is just as important as talking.
5. Siblings need celebration and recognition for their accomplishments.
6. Siblings need quality time with parents.
7. Siblings need time away to relax.
8. Siblings need support and guidance to help care for,

teach, and play with their brother or sister with a bleeding disorder.

9. Siblings need the same expectations (when possible) as their brother or sister with special needs.
10. Siblings need a support network. Find ways for siblings to meet other siblings and families with a bleeding disorder. Going to family events sponsored by Great Lakes Hemophilia Foundation or your treatment center will help the sibling to talk with other siblings of children with bleeding disorders to get their views and input. Parents often find it helpful to talk with someone who understands, so will siblings. Please check out these websites [www.fvssn.org/fvssn.htm](http://www.fvssn.org/fvssn.htm) and [www.thearc.org/siblingsupport](http://www.thearc.org/siblingsupport) to get more information.

Remember that for most siblings, hemophilia or other bleeding disorders are just a regular fact of life, especially if parents treat it that way.

## It's Workplace Giving Time, Once Again!

If your workplace has a giving campaign (usually it is through United Way), please consider designating your charitable dollars to GLHF. In the United Way campaign, you must ask for the **Donor Choice** brochure. Then find **Community Health Charities**, and then find us! If you encounter any problem with this, please call GLHF at 414-257-0200 or 888-797-4543 and ask for the Executive Director.

When you do make a pledge, remember to indicate that you **want an acknowledgement**. You might have to check a box to do this, or do it in some other way—read the fine print. This will ensure that we get your name. Then we can track your gift and **make sure it gets to us**.

Thanks for remembering GLHF!

# Medigap Access Improvement Act of 2006 to be Introduced 22 This Week

from NHF eNews

As a result of the dedicated efforts of hundreds of members of the bleeding disorders community, a bill to improve healthcare coverage for people on Medicare is about to become reality when the Medigap Access Improvement Act of 2006 is introduced in the House of Representatives the week of September 25th. The bipartisan bill will be introduced by Representatives Philip English (R-PA) and Bobby Rush (D-IL). In addition, Representative English will conduct two media events in Pennsylvania to announce the legislation, with participation by members of the Western Pennsylvania Chapter of NHF. A similar event in Washington, D.C is also in the works.

The legislation is the result of efforts that began a year and a half ago with a meeting in Washington, D.C. initiated and hosted by the National Hemophilia Foundation (NHF), with the participation of representatives from patient groups, treaters and industry. The purpose of the meeting was to address the ongoing problem of the 20% co-payment required by Medicare. This co-payment is particularly onerous for people with bleeding disorders and other high-cost conditions. The problem had been further exacerbated by the lower reimbursement formula for factor established as a result of the Medicare Modernization Act of 2003 (MMA).

Since that first meeting, community groups that have included NHF, the Hemophilia Federation of America (HFA), the Committee of Ten Thousand (COTT), representatives of industry and other groups we have worked in coalition to devise an appropriate and politically feasible solution to this problem. The approach that was eventually decided upon was to seek Federal legislation that would mandate access to Medigap policies for all persons on Medicare. Medigap policies are a form of supplemental insurance that pays for expenses not covered by Medicare. Currently, all persons who qualify for Medicare because of age may purchase these policies, but in 26 states, they are not available to persons who qualify because of a disabling condition. The concept gained additional momentum when NHF made it one of our key “asks” in meetings with legislators during annual Washington Days events in March of this year. All of the coalition groups have been similarly active in engaging members and their representatives in this important issue.

Although a great deal of additional effort will be needed to advance and secure passage of this legislation, this represents an important milestone and is a significant affirmation of the community’s efforts. NHF will be sending out additional information on this bill in the coming days, including ways for community members to encourage their representatives to sign on as cosponsors. For more information, please contact your state representative.

**Wisconsin has eight districts:**

- First District: Paul Ryan  
Janesville, Kenosha and Racine areas  
[www.house.gov/ryan](http://www.house.gov/ryan)  
202-225-3031
- Second District: Tammy Baldwin  
Beloit and Madison areas  
[www.tammybaldwin.house.gov](http://www.tammybaldwin.house.gov)  
202-225-2906
- Third District: Ron Kind  
Eau Claire and La Crosse areas.  
[www.house.gov/kind](http://www.house.gov/kind)  
202-225-5506
- Fourth District: Gwen Moore  
Milwaukee area.  
[www.house.gov/gwenmoore](http://www.house.gov/gwenmoore)  
202-225-4572
- Fifth District: Jim Sensenbrenner  
Brookfield area.  
[www.house.gov/sensenbrenner](http://www.house.gov/sensenbrenner)  
202-225-5101
- Sixth District: Tom Petri  
Fond du Lac and Oshkosh areas.  
[www.house.gov/petri](http://www.house.gov/petri)  
202-225-2476
- Seventh District: David Obey  
Superior and Wausau areas.  
[www.obey.house.gov](http://www.obey.house.gov)  
202-225-3365
- Eighth District: Mark Green  
Appleton and Green Bay areas.  
[www.house.gov/markgreen](http://www.house.gov/markgreen) and  
202-225-5665

# Give GLHF a Call With Your Insurance and Billing Questions- We Can Help

By David Linney

- “I lost my job. What should I do about insurance?”
- “I’ve got a new job. /I’m thinking of applying for a new job. Will the new insurance cover factor products?”
- “My son/daughter with a bleeding disorder just graduated from college- Can he/she get insurance?”
- “Our insurance doesn’t pay for \$3,000 in bleeding disorder costs- Are there other resources that can help pay for these costs?”
- “My portion of insurance premiums at work keeps going up and I’m having trouble affording to pay the premium- Can the Foundation help?”
- “I don’t understand what benefits my insurance plan covers and doesn’t cover. How can I find out?”
- “Is it important to know what my home care vendor charges for factor product? How can I find out? How do I know if I’m paying too much for factor product?”
- “Our son uses \$300,000 in factor products each year and his lifetime limit is getting used up. What should we do?”
- “Should I apply for the Wisconsin Hemophilia Home Care Program? What are the benefits? Are there any *cons*?”
- “Should I apply for Supplemental Security Income (SSI) for my son/daughter with a bleeding disorder? What are the eligibility requirements? What are the benefits? Are there any *cons*?”
- “We have a pile of medical bills for our son’s/daughter’s bleeding disorder. We’re having trouble sorting them out. How can we better organize these bills?”
- “One of our medical bills was sent to collection. What should we do?”

David Linney, GLHF’s Medical Financial Counselor, is available to answer these and other questions you might have about insurance, factor product coverage, available payment resources, the Wisconsin Hemophilia Home Care Program and the GLHF Patient Financial Assistance Program. Give David a call at the Foundation offices @ (414) 257-0200 or toll free @ (888) 797-4543 or E-mail David @ [Dlinney@glhf.org](mailto:Dlinney@glhf.org)

## Individual Class Scholarship

GLHF now offers scholarships to provide funding assistance for tuition and enrollment fees relevant to continuing education in a non-traditional or non-degree format for members of the Wisconsin bleeding disorder community. This scholarship is intended to enable people affected by bleeding disorders or their immediate family members to enhance career advancement. For more information, contact the Foundation at 414-257-0200 or 888-797-4543



### Facts First

Sponsored by GLHF and Baxter

Saturday, November 4  
1:00pm – 4:00pm

Bring the whole family and learn about:

- Nutrition Management
- Preserving Joint Health
- Balancing Your Exercise Routine

Also, learn how to use different exercise equipment from a personal trainer.

At the WI Athletic Club  
8700 Watertown Plank Road

Registration required.

Please call (414) 257-0200 or (888) 797-4543.

## Family Fun Day at Betty Brinn Children's Museum

Children age 10 and under,  
Come have some fun at Betty Brinn Children's Museum on Saturday, January 20 from 11:00 am-12:00 pm

Topic and speaker for adults to be determined.

Enjoy FREE admission to the museum and parking.

Families can stay and explore all afternoon!

Registration required by December 20.

## Did you know.....

**Betty Brinn Children's Museum has a FREE membership program called Family Focus, available to families in need.**

**Call Lisa Balster at 414-390-5437 ext. 271 for more information.**

# Fun, Education and Some Sun at Zoo Event

By Tammy Molter

Over 100 people from the bleeding disorders community in Wisconsin, along with their families and friends, came to the zoo Saturday, September 23 for education, fun and food. For a while, it looked like the rain would hold off till later in the afternoon as the weatherman predicted, but people still had fun learning about bleeding disorders, talking with vendors and meeting new friends.

The morning started with carnival themed educational activities based on the NHF message, *Do the 5!*.

### Table #1 – Penny Pitch

Families had to find the *Do the 5!* messages among the eight statements listed. They were given five pennies and had to “pitch” them on the squares with the *Do the 5!* messages. Everyone, age 12 and over, received a pedometer for their efforts.

### Table #2 – Ring Toss

Each water bottle on the table was assigned a vaccination and families were asked to throw a ring over the two bottles with the vaccinations that are recommended by the *Do the 5!* messages. Each member of the family received a bottle of water.



### Table #3 – Ice Cream Bucket Toss

At this table, families had to determine when a bleed should be treated. There were three ice cream buckets; each assigned a time limit – immediately, within a few hours and by the end of the day. Each family was given a poker chip and told to toss the chip in the bucket which held the correct time. Children in each family were given animal erasers for their efforts.

### Table #4 – Ball Toss

Here families were asked if the following statement was true or false, Patients who receive care in HTCs have a lower hospitalization rate for bleeding complications than non-HTC users. Families were asked to toss a ball in one of two baskets, “true” or “false”. Children in each family were given an animal slide puzzle.

### Table #5 – Tic Tac Toe

On the table were nine statements about nutrition and exercise. Families had to toss a beanbag on the true statements to form tic tac toe. Children in each family were given hamburger yoyos for their efforts.



There was also one more table for GLHF families to complete an evaluation. GLHF families who successfully completed all six activities were eligible for a **\$50 Wal-Mart** gift card. Grady Anderson was the lucky winner of this drawing.

Families also had the opportunity to meet with vendors during the morning. At each vendor table a family stopped at, they received a stamp on their "passport". Families who visited all eight exhibit tables were also eligible for **Wal-Mart** gift cards. Neil Zellner and Dwight Morgan were the lucky winners of these drawings.

During the zoo walk, families not only looked at animals, but also tried to find two GLHF tables located somewhere on the zoo grounds. The first 25 people to find each table received a ticket good for a ride on the train, carousel, zoo mobile or seal show. These tables also served to educate the public about GLHF and bleeding disorders.

At lunch, families had the opportunity to meet and talk with Jackie Rebek, physical therapist at Children's Hospital, about the importance of exercise and starting and keeping up an exercise routine.

Thank you to everyone who helped out at the event, **GLHF staff, the zoo planning committee, Jackie Rebek, the Forester's Juneau Branch 1508 volunteers, and Wisconsin Lutheran College psych club volunteers.** Thank you also to sponsors **Wal-Mart** and **Kinex**. The next zoo event is scheduled for **Saturday, September 29, 2007**, so mark your calendars!



### Save the Date

**Saturday, November 4**  
**1:00pm – 4:00pm**

Facts First  
Learn about healthy nutrition and exercise.  
WI Athletic Club

**Saturday, January 20**  
**11:00am – 12:00pm**

Family Day at Betty Brinn Children's Museum  
Topic and speaker to be determined.

**February**  
Date and place to be determined.

Men's Get Together

**Saturday, March 31**

Monte Carlo Gala 2007  
Hilton Milwaukee City Center

**Registration required** – watch your mail for registration and more information  
or call the Foundation at 414-257-0200 or 888-797-4543.

## Medical News

From NHF eNews

### U.S. HCV Trial Favors Weight-based Dosing of Combination Therapy

Adapted from NHF eNews June 2006

Results from the largest hepatitis C virus (HCV) trial ever conducted in the U.S. were presented at the Digestive Disease Week (DDW) Annual Meeting, May 20-25, 2006 in Los Angeles. The purpose of the trial was to study the efficacy of PEG-INTRON® (peginterferon alfa-2b) and REBETOL® (ribavirin, USP) combination therapy in HCV-infected patients.

The study took into account predictive factors such as patient genotype (genetic makeup) and viral load (concentration of virus in blood), degree of liver fibrosis and cirrhosis, cigarette smoking and prior exposure to HCV treatment. Among the more notable findings was that patients who were treated using a weight-based dosing of ribavirin in combination with peginterferon alfa-2b achieved considerably better outcomes than those given the combination therapy based on a flat dose.

### MicroRNA a Key Component of Gene Therapy Study

Adapted from NHF eNews June 2006

A team of scientists from the San Raffaele Telethon Institute for Gene Therapy (HSR-TIGET) in Milan, Italy reported a potential breakthrough using a set of genes that is regulated by a molecule known as microRNA (tiny fragments of ribonucleic acid). The use of these molecules in gene therapy delivery is especially advantageous because they are able to “turn off” the identity of the therapeutic gene in cells, effectively “hiding” that gene from an immune system that would otherwise destroy it. A healthy immune system will often attack genetic material delivered into the body as a foreign substance, thereby thwarting its intended therapeutic functions.

### FDA Approves Three-In-One hHIV Combination Therapy

Adapted from NHF eNews July 2006

On July 12, 2006 the U.S. Food and Drug Administration (FDA) approved the first once-a-day, three-drug combination tablet for the treatment of HIV. The new tablet combines the antiretroviral drug Sustiva®, manufactured by Bristol-Myers Squibb, with drugs Viread® and Emtirva®, manufactured by Gilead Sciences, and Truvada®.

Antripla®, the three-in-one drug, has several potential advantages. Many believe that by simplifying the treatment regimen to one pill a day, this new “cocktail” could significantly improve patient adherence. In the past, it was common for patients battling HIV to take a dizzying succession of pills, often 20 to 30 tablets daily. In addition, single pill prescription would help HIV patients avoid multiple co-payments at the pharmacy.

### Report on Long-Term Factor VIII Expression from Gene Therapy

Adapted from NHF eNews July 2006

An advance in the field of gene therapy for hemophilia has recently been reported in the July 1, 2006 issue of *Blood*. The article, “Multiyear Therapeutic Benefit of AAV Serotypes 2, 6, and 8 Delivering Factor VIII to Hemophilia A Mice and Dogs,” described the first study showing the production of Factor VIII (FVIII) at physiologically significant levels for several years using varying types of adeno-associated virus vectors (AAV). Study authors Dr. Haiyan Jiang and colleagues have reportedly developed a method that has essentially “cured” the mice and dogs with hemophilia A within the duration of the study.

Previous AAV studies revealed only short-term success with AAV-induced FVIII production in mice. Contributing to the difficulties of developing a successful form of gene therapy for hemophilia A treatment is the fact that FVIII is an immunogenic protein, a substance that readily induces the body’s immune response, causing it to form inhibitor antibodies that prevent clot formation. By mutating the

gene for FVIII (or significantly deleting the B-domain of canine FVIII), Jiang and colleagues were able to induce dogs and mice with hemophilia to produce a mutant form of FVIII that was not hindered by the immune response. They successfully overcame a barrier that has traditionally hampered previous therapy trials in hemophilia.

### **Operation Platelet: Covert Approach to Clot Formation**

Adapted from NHF eNews July 2006

Source: *Journal of Clinical Investigation*, July 2006

The immune response in our blood normally serves an important function—preventing foreign agents, such as bacteria, fungi and viruses, from causing us harm.

However, our immune response can also become a detriment. In the case of hemophilia A – where factor VIII (FVIII) is infused into the blood – the immune system can produce inhibitory antibodies and prevent clot formation. Scientists have now developed a method of gene therapy to induce the body to produce mutant forms of FVIII – such as those with the molecule’s B-domains deleted – altering the protein’s molecular “fingerprint” while retaining its physiological function. In theory, this mutant FVIII should evade or “trick” the immune response and allow for normal hemostasis, or blood clotting, to occur.

The strategy of this new gene therapy is to induce platelets, cells that are not only integral to healthy blood-clot formation but are present wherever a clot needs to be formed, to produce, store and release FVIII wherever it is needed. Simultaneously, these platelets were also induced to express the genes for von Willebrand factor. This protein is not only important to homeostasis, but is able to preserve the integrity of FVIII even in the immune response.

Scientists implemented this new approach in mice with hemophilia A. The gene therapy not only successfully corrected the symptoms of hemophilia A, but was capable of doing so despite the presence of inhibitors against FVIII. Although scientists have only observed success with this gene therapy in mice, they are quickly developing methods and technologies that may soon be applicable to humans.

Robert R. Montgomery, MD is a co-author of the study and a member of the National Hemophilia Foundation’s Medical and Scientific Advisory Council.

### **Gene Therapy, Golden to the Core**

Adapted from NHF eNews July 2006

A major focus in gene therapy research for hemophilia is the development of new technologies that mitigate the immune response, simultaneously delivering genes to target cells in order to help host cells manufacture life-saving proteins, such as clotting factors. A team of researchers from the Department of Bioengineering at the University of Washington recently reported the development of a novel technology to transport drugs into hepatocytes, or liver cells, using gold nanoparticles as the agent of delivery. Although the focus of the study was broad – on drug delivery, in general – it revealed a unique means of delivering gene therapy to treat hemophilia that literally includes a little bit of gold.

Nanoparticles are no larger than a billionth of a meter in size. After coating the pieces with gold, researchers began to experiment with nanoparticles of varying size and different coatings. The researchers were able to identify that the liver preferentially absorbs gold nanoparticles 50 nanometers in diameter coated with pegylated-galactose\* over gold nanoparticles of any other size.

Previous research showed that the liver is an apt target for gene therapy because hepatocytes can express genes introduced into the genome via gene therapy at therapeutically significant levels, for prolonged periods, while circumventing the body’s own immune system.

### **Revelations on Carrier Status**

Adapted from NHF eNews August 2006

A group of scientists in the Netherlands recently published data suggesting that women who are carriers of hemophilia, regardless of type, may be at greater risk of joint bleeds and prolonged bleeding from small wounds than women who are non-carriers of hemophilia. Moreover, scientists found that carriers of hemophilia produce less factor than non-carriers when comparing the lowest factor values among groups.

**Gene Transfer to Treat von Willebrand Disease**

Adapted from NHF eNews August 2006

A group of scientists representing departments of genetic medicine and peraitrics of the Weill Medical College of Cornell University in New York City have developed a gene transfer technique that reportedly corrected the symptoms of severe von Willebrand Disease (VWD).\* VWD is the most commonly occurring bleeding disorder in the United States. The cure for a disease of this magnitude has particular significance because millions of people are affected by it.

The gene transfer technique developed by Dr. Robert G. Pergolizzi and colleagues successfully restored mice with severe VWD with the genetic material required to make VWF. Gene transfer was accomplished by injecting a solution of mouse VWF – DNA into mice affected by severe VWD.

\*Pergolizzi, Robert G. et al. “Correction of a Murine Model of von Willebrand Disease by Gene Transfer.” *Blood*. 2006; 108(3): 862-9.

**NHF and Community News**

From NHF eNews

**NHF Launches New Online Clinical Trials Resource Center**

Adapted from NHF eNews June 2006

The National Hemophilia Foundation (NHF) launched a new resource center to help consumers find out more about clinical research trials and medical therapies for people with hemophilia and related bleeding conditions. The Clinical Trials Resource Center is provided by Thomson CenterWatch, the leading publisher of information on clinical research. It has separate sections with information on frequently asked questions about clinical trials, a list of current clinical trials for hemophilia, the U.S. Food and Drug Administration’s (FDA) most recently approved hematology drugs, the results of new medical therapy trials and a patient bookstore. To access the latest information on clinical trials and related issues, visit NHF’s Clinical Trials Resource Web site.

**Bleeding Disorders Treatment Centers in Wisconsin Provide the Best Care for You and Your Family****Green Bay**

Hemophilia Outreach Centre  
1794 East Allouez Avenue  
Green Bay, WI 54311  
920-965-0606  
800-992-6026

**La Crosse**

Gunderson Clinic  
1836 South Avenue  
La Crosse, WI 54601  
608-782-7300 ext. 2905

**Madison**

University of Wisconsin Hospital and Clinics (UWHC)  
Comprehensive Program for Bleeding Disorders  
2704 Marshall Court  
Madison, WI 53705  
608-890-9493

**Milwaukee**

Comprehensive Center for Bleeding Disorders  
8739 Watertown Plank Road, P.O. Box 2178  
Milwaukee, WI 53201-2178  
414-257-2424  
800-312-2223

**GLHF Wish List**

If you can contribute any of the following items, please contact Barb at the Foundation, 888-797-44543. Every item we do not have to buy means more funds for programs.

- A multiple-drawer laser printer
- High quality scanner
- High quality color printer

# BACK BY POPULAR DEMAND... HOLIDAY DECORATING MADE EASY



ORDER FORM - Please return by November 13, 2006

Purchaser \_\_\_\_\_

Contact Person (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Work \_\_\_\_\_

Delivery Address (Only orders over \$300)  
\_\_\_\_\_

Send your order to:  
Great Lakes Hemophilia Foundation  
638 N 18<sup>TH</sup> Street  
Ste 108  
Milwaukee, WI 53233

Or call GLHF today to place your order at 414-257-0200.  
You can also order online at [www.glhf.org](http://www.glhf.org).

Delivery Date is Friday, December 1st.

## POINSETTIAS – *Wrapped in holiday foil*

SIZE	PRICE	COLOR				PLANT TOTALS	TOTAL COST
5" foil	\$9.00	Red _____	White _____	Pink _____	Marble _____	_____	\$ _____
7" foil	\$16.00	Red _____	White _____	Pink _____	Marble _____	_____	\$ _____
12" jumbo	\$47.00	Red _____	White _____	Pink _____	Marble _____	_____	\$ _____
<b>TOTAL PLANTS</b>						_____	\$ _____

## HOLIDAY WREATHS – *Balsam needle with pine cones and a festive, red ribbon*

SIZE	PRICE	QUANTITY	TOTAL COST	STATIONERY	PRICE	QUANTITY	TOTAL COST
20"	\$13.00	_____	\$ _____	All Season Cards	\$7.00	_____	\$ _____
30"	\$19.00	_____	\$ _____	Pine Bough Stationery	\$10.00	_____	\$ _____
				Snowman Stationery	\$10.00	_____	\$ _____
<b>TOTAL WREATHS</b>		_____	\$ _____	<b>TOTAL STATIONERY</b>		_____	\$ _____

**Only ONE pick up location this year on  
Saturday, December 2<sup>ND</sup>, 2006 between 10:00 a.m. and 12:00 p.m. at:**

Channel 10/36 Friends, Inc.  
12560 W Townsend Street  
Brookfield, WI

## Good-Byes are Always Difficult

It has been my very great pleasure to have been a part of this outstanding organization for the past five years. It is with mixed emotions that I tell you that I am leaving GLHF for a challenging career opportunity that I could not turn down.

The decision to leave was one of the most difficult of my life. People in the bleeding disorders community have touched my life in a very special way. Parents of a newly-diagnosed child who face and overcome challenges every day... treatment center staff who give everything they have and then some, to help their patients... generous donors who make it possible for GLHF to offer services for people with bleeding disorders ... committed board members... the wonderful and caring staff here at GLHF... I will carry indelible memories of these people and others with me for the rest of my life.

I have been told that once a person is a part of the bleeding disorders community, one never really leaves it. I hope that is true. In my heart I will never really leave the community that I have grown to love, respect, and admire.

My best wishes to you all.

Kathy Herrewig  
Former Director of Donor Development

## REMEMBER

The Great Lakes Hemophilia Foundation is a benefiting agency of the **WE CARE** program through Pick 'n Save. When you sign-up for your 2006 Advantage Card, please remember to include GLHF's six-digit identification number – **293550**. Every penny helps!

## Free Money?!?

Sounds too good to be true, well it is. However, we come very close with [www.goodsearch.com](http://www.goodsearch.com). This website is powered by Yahoo, and they give approximately a penny per search to charity. All you have to do is select Great Lakes Hemophilia Foundation as the designated charity. Since when has raising money been this easy!!!

## We Won!



Every year, the Potawatomi Bingo Casino holds a promotion called *Miracle on Canal Street*, which benefits local charities. The first event is a drawing to select which charities will participate in this year's event. We are happy to tell you that GLHF was one of the fourteen charities chosen in the drawing that was held on Wednesday, August 30. Now comes the fun part! The Potawatomi Bingo Casino will put aside a part of the revenue that they collect every Wednesday from September 13 through December 13. Those funds will then be divided among the fourteen lucky charities on Friday, December 15. So

if you like bingo, come and say "hello" and play with us on Wednesday, October 4 or November 22. As you place your markers on any Wednesday through December, you will be having fun and supporting GLHF!

During the period October 1, 2005 through September 1, 2006 the following donations have been made in Honor or in Memory of the following people:

**Air Freight**

Marilyn Ristow

**Steven Arendt**

Nisa Kalambaheti  
John & Anna Klonsinski

**Thomas Balistreri**

Catherine Kelly

**Matthew Baltzell**

Sandra & Jeffrey Loftus

**Timothy Beck**

Bonnie & James Beck  
Heidi & Ronald Bilgo  
Francis & Rita Hupfer  
St. Joseph's Hospital, Synergy  
Health  
Randolph & Barbara Unertl

**Leo Brunner**

Floretta Brunner

**Michael Cieslewicz**

Robert & Sara Hawke

**Lydia Coffman**

Floretta Brunner

**Andrew Clifford Crosby**

Clifford & Carolyn Reiss

**Barbara & Steve Dittrich**

Robert & Barbara Ward  
Mary & Bob Jacobson

**Roger Dobke**

Eileen & Shannon Hanrahan  
Donald & Phyllis Mauer

**Charles J. Doria**

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## Mission Statement

We dedicate ourselves to advancing the quality of life of individuals and families affected by hemophilia or other blood disorders by providing a broad range of services and programs while supporting research to improve care and to find a cure.

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