

One morning in July 2019, Colin Dowler was returning to his boat parked near a logging camp in Ramsay Arm east of Campbell River. While cycling down the trail he came across a grizzly bear.

"The bear looked into the bush a couple of times, and I was hoping that it was just going to step off into the forest, but it didn't," says Colin.

What happened next was the single most terrifying experience of his life — the bear charged Colin.

Colin threw his bike at the bear, but the bear barreled through it and into him, biting into the side of his torso. The bear gripped Colin in its jaws and tossed him. Colin then found himself being crushed underneath the weight of the bear as it chewed on his legs and foot.

"I was kind of at a loss of what to do," says Colin.
"Then I remembered my pocketknife."

Mustering all the strength he had, he dragged his arms from underneath the bear, reached into his pocket, pulled the knife out and opened it. He drew back his arm and stabbed down.

"Amazingly, the bear immediately let go of me and retreated back," says Colin.

Colin watched, knife still in hand, as the bear scrambled into the woods. Left lying in the dirt, Colin was bloody, beaten and exhausted. He didn't know if he could get up.

"I thought, You've got one chance to do this," says Colin. "Time to muster what you have."

Colin pulled himself onto his bicycle and rode until he reached the nearby logging camp where he yelled for help. The camp workers immediately called 9-1-1.

BC Air Ambulance arrived and flew Colin to the only place that could treat the severity of his wounds — Vancouver General Hospital (VGH).

World-class coordinated and specialized care

At VGH, Trauma Surgeon Dr. David Ko assessed the extent of Colin's injuries: multiple puncture wounds with the most extensive damage on his left side. Dr. Ko and the specialized vascular team at VGH worked together to surgically repair Colin's badly mauled body.

To prevent infection, Dr. Ko examined, sterilized, cleaned and sutured all of Colin's many puncture wounds. Colin also required extensive assessment to ensure he had no unidentified intra-abdominal or kidney damage. The complexity of Colin's injuries required expert and coordinated care from many specialized teams at VGH, including infection control.

Three weeks after the attack, Colin was happy to return home to complete his recovery after surviving the most terrifying encounter of his life.

"I feel so grateful to Dr. Ko and the teams at VGH," says Colin. "They were there for me when I needed it most, and returned me home to my wife and children."

Help patients like Colin on their journey to recovery. Learn more at **vghfoundation.ca/surgery**

Trauma Care at VGH

- VGH and UBC Hospital are centres of surgical excellence caring for 60% of all adult trauma cases in BC.
- Major trauma is the principal cause of death for people under the age of 45 in Canada.
- Over 700,000 people are injured in BC annually.
 Of these, approximately 27,000 are hospitalized and 9,000 suffer permanent disability.
- Our Future of Surgery campaign is raising funds to:
 - · Reduce wait times.
 - Acquire groundbreaking technology.
 - Optimize recovery.



"I just couldn't get better. I tried to go to work, but I couldn't concentrate. Everything was too bright, too noisy, and it was all very overwhelming. I didn't know what was wrong with me — I was scared."

Thalia Otamendi loved soccer. Ever since she moved to Canada from Mexico when she was 10 years old she was always on the field, playing, practicing and competing.

But over the years the sport took its toll on her body, and shortly after completing her undergrad she suffered a serious concussion while playing.

At first, Thalia thought the symptoms would go away on their own. But they only grew worse. After a few weeks she went to see local care providers for help, who told her to stay indoors in dark rooms until the symptoms subsided. This went on for months.

"I was feeling so overwhelmed, anxious and depressed," says Thalia.

Thalia's mental and physical health was steadily declining. She felt increasingly isolated and had no idea how to recover. That is until she was referred to clinician-scientist Dr. William Panenka, a leading traumatic brain injury and concussion expert at VGH and UBC Hospital.

Modern problems require modern solutions

Dr. Panenka examined Thalia and determined that while her physiological concussion was healed,

she was experiencing concussion-associated psychological symptoms. A treatment plan was created for Thalia based on the latest research. The goal was to give Thalia the tools she needed to return to society without the overwhelming anxiety and fear she was experiencing.

It took time, but slowly Thalia started to feel better. As her psychological symptoms subsided, she began seeing friends and family again, and above all she stopped living in fear. Once her mental health fully recovered, Thalia no longer required medication.

From patient to researcher

Thalia was so grateful for Dr. Panenka's care that she has since gone on to acquire a Master's in Kinesiology from UBC. Thalia is now a PhD student studying psychological effects in concussion patients.

"I don't want other people to live through what I had to live through," says Thalia. "That's why my research is focused on the psychological component of concussion treatment. It's a piece we're missing right now, and I want to change that."

Help patients and researchers like Thalia by supporting concussion care, treatment, research and recovery. Learn more at vghfoundation.ca/brain

Concussion Facts

- Brain injury is the leading cause of death and disability for Canadians under the age of 40.
- Sports and recreational activities are important risk factors for concussion. Cycling, playground activities and hockey are the greatest contributors.
- Signs of a concussion can vary from sensitivity to light or noise, nausea, headaches, confusion and more.



Why are heart attacks happening to healthy women?

One morning in November 2012, Birte Hunter was out for a jog with her dogs. Halfway through her run, Birte felt a tightening in her back and a pain in her chest.

"I had a dog on each arm, and suddenly it felt like there was a knot in the middle of my back, and then that knot went right from the middle of my back into my heart," says Birte. "I stopped running, thinking, Oh my gosh, I think I'm having a heart attack."

Birte managed to walk back home and call an ambulance. She was taken to a hospital where she received an angiogram and was told her heart muscles were likely weakened from a virus she caught abroad. She was then sent home.

At this moment, Birte became another woman with a misdiagnosed heart problem.

Answering questions of the heart

At VGH, Dr. Jacqueline Saw is researching Spontaneous Coronary Artery Dissection (SCAD) — a rare heart condition that primarily affects women under 50. Dr. Saw was studying case files of women who had experienced heart issues when she opened Birte's file. After reading the report, she suspected Birte didn't have a virus.

Dr. Saw performed additional tests on Birte and confirmed her suspicion: Birte had SCAD.

SCAD is not fully understood and this is what drives Dr. Saw to find answers.

Through her years of research, Dr. Saw's expertise has grown, transforming her into a world leader in SCAD research, rehabilitation and treatment. Dr. Saw established the world's first SCAD rehabilitation clinic at VGH, began a registry for SCAD patients and initiated a genetic study to collect invaluable, long-term data. Dr. Saw's clinical research and knowledge transfer into the medical community is improving treatments and saving lives of women in BC.

SCAD rehabilitation is saving lives

Birte suffered from two more heart attacks after her first incident, each caused by a different artery in her heart. However, since she joined the SCAD rehabilitation clinic in February 2018, Birte has not experienced any recurrences.

"I'm so blessed that the SCAD 'head honcho' in the world is here in Vancouver and is my doctor," says Birte. "How lucky am I?"

Support Dr. Jacqueline Saw's vital research and world-leading clinic at VGH to directly impact care for women just like Birte. Learn more at **vghfoundation.ca/heart-lung**

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Or contact: 604 875 4676 info@vghfoundation.ca



Brain aneurysm survivor leaving a legacy for all

In 2012, Kathy Jenkins suffered a terrifying burst brain aneurysm. It was quickly determined she needed the kind of complex care only available at VGH, and she was flown out from Vancouver Island to Vancouver.

VGH Neurosurgeon Dr. Gary Redekop and his medical team ran a series of brain scans, assessed Kathy's condition and performed the brain surgery that saved her life.

"If it wasn't for VGH I wouldn't be here," says Kathy. "So when we got home I just thought, We've got to get a will drawn up. My husband Scott and I talked and decided we're leaving our entire estate to VGH & UBC Hospital Foundation."

Kathy and Scott, who don't have children, want to use their estate to make a positive impact on future generations.

"We have a bunch of nieces and nephews and we could divide everything up amongst them, but we felt we would accomplish a lot more by doing it this way," says Kathy. "It just made perfect sense to give back, and I don't just mean to the hospital, I mean to everybody who's out there."

For Kathy and Scott, leaving a legacy was as simple as drafting a will and notifying VGH & UBC Hospital Foundation of their intent.

"This is our legacy," says Kathy. "To know that our estate will be used to help people in need is the greatest gift of all."

Join donors like Kathy and Scott by leaving a gift in your will to VGH & UBC Hospital Foundation and help make a difference for patients, today and into the future.

Learn more at vghfoundation.ca/legacy



Behind the scenes with Dr. Jacqueline Saw

Where did you grow up?

I was born and raised in Singapore. We immigrated to Vancouver when I was 16.

How long have you worked at VGH?

I started working as a resident at VGH in 1996 after graduating from medical school at the University of Ottawa. I did both my internal medicine and cardiology residencies at UBC. After completing my interventional cardiology fellowship at the Cleveland Clinic, I returned to VGH to be on faculty in 2004.

Why are you so interested in SCAD/heart health?

SCAD affects mostly young women who are otherwise healthy, without traditional cardiac risk factors. Being in the same age group, I feel connected to these women like sisters and friends. I find it incredibly rewarding to be able to help these women find answers for this relatively rare and poorly understood disease.

What do you like most about your job?

I love working with my hands. Doing complex procedures is a passion. I am also very inquisitive, and love doing research to uncover new findings. I also enjoy analyzing data and writing in solitude.

Explore how your support can help doctors like Dr. Saw research and discover new treatments for people with heart conditions. Learn more at **vghfoundation.ca/heart-lung**

VGH & UBC Hospital Foundation partners with donors to drive innovation and sustainable health care at VGH, UBC Hospital, GF Strong Rehab Centre, Vancouver Coastal Health Research Institute and Vancouver Community Health Services.

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