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CANADIAN COLLEGE OF
NATUROPATHIC MEDICINE

NATUROPATHIC CARE IN RURAL COMMUNITIES | CONVOCATION 2014
CCNM RECEIVES DEGREE-GRANTING APPROVAL
FOCUS ON THE CLASS OF 2002 | MEET OUR NEW RESIDENTS

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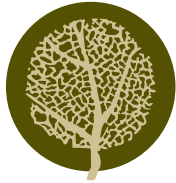
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MIND|BODY|SPIRIT

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on our cover

CCNM graduates pose backstage at Convocation Hall. In May, the College received degree-granting status for its naturopathic program from the Government of Ontario.

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College Roundup

When we think of getting away for a summer vacation, we often head to the water or countryside to enjoy Canada's abundant wild, remote locales. But it's an entirely different experience to live and work in the country's most rural and underserved communities. What's it like to build a practice when you're simultaneously working to change policy and legislation in an untapped location? What role does naturopathic medicine play in bringing primary health care to remote populations?

We'll speak to Nicole Redvers, ND, CCNM Class of 2010, about her experiences in bridging gaps between conventional medicine and traditional forms of healing in the Northwest Territories.

This year's convocation – our 34th – was particularly exciting, given that the College received degree-granting status less than 48 hours before the ceremony. Check out the highlights and photos on pages 8–10.

And do you ever wonder where your classmates ended up? A new regular feature will highlight the efforts and achievements of our graduates from far and wide. This issue we're focusing on the Year of 2002, featuring interviews with naturopathic doctors David Lescheid, Iva Lloyd and Nora Pope. We'd like to hear from you – would you like to read about your year next? Or do you have questions you'd like to ask your professional peers?

This is the annual report issue, delivering snapshots of the key CCNM events and achievements of the past year. Highlights include degree granting, a seven-year accreditation from the Council on Naturopathic

Medical Education, and a first-ever published study in the Canadian Medical Association Journal. This past year, we were even mentioned by the Wall Street Journal!

If you haven't yet checked us out, look for us on Facebook, Twitter, YouTube and LinkedIn so that you'll always have the latest College news. Remember, this is your magazine... is there a comment you'd like to share, or a story you'd like to hear? Drop Sana Abdullah, assistant editor, a line at sabdullah@ccnm.edu.

Catherine Kenwell
Editor



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NATUROPATHIC CARE IN *rural communities*



On March 10, Class of 2010 graduate Nicole Redvers, ND, visited CCNM to deliver a lecture on health-care options for rural communities and how NDs can bridge the gaps between conventional medicine and traditional forms of healing.

Nicole's talk is part of the Metagenics Visiting Professional Series, in which NDs share their challenges, experiences, and successes with students and faculty. The following are brief segments from her presentation.

Why is this important?

This is not a topic that we speak or hear about often in naturopathic medicine, but caring for rural populations is an important area of health care.

In terms of numbers, the rural Canadian population is just over six million and they are spread out over thousands and thousands of kilometres. Less than 10% of physicians – and less than 3% of specialists – actually practice in rural areas, even though 20% of the population reside here.

A study, coauthored by Kieran Cooley, reports that 35–61% of rural residents face difficulties in accessing a physician – either due to travel or long wait times in some of the smaller communities. So even when there is a physician present, a patient might still not have access. In Yellowknife, there is a six–nine week wait time to see a family physician.

We do know that, from the studies that have been done, rural Canadians seek naturopathic care for the same reasons that urban ones do. From what I've seen from colleagues and in my own practice, a higher number of patients are accessing naturopathic medicine for primary care reasons. This is a huge opportunity for NDs.

What are the challenges?

A lot of the small communities with less than 5,000 people have a nurse but lack a family doctor. Sometimes there is a regulatory barrier regarding funding for nurse practitioners, so there is only a nursing station. In the communities that do have a physician, it is mainly on a rotational basis. They might fly in once a week or once every couple of days, each month, for a few years. There is a large turnover rate in the rural areas which means that patients don't receive consistent care and they're frustrated by it. This is one of the main complaints that I hear!

I'm always shocked when I hear of communities that have nobody. We take it for granted in Canada, that there are places that have no basic medical care. And it can be for something as simple as a dental or eye check-up. A patient might have to travel for two–three days for a 10 minute appointment.

Another challenge in the Aboriginal and rural communities is IT support. Electronic medical records are great and can improve care for patients, but the IT infrastructure is often non-existent and the internet service in some areas is spotty at best. Tele-health care is also looked at as this glorious initiative that will solve our problems, but patients in the community don't want this. They want to see somebody! Patients are frustrated that this is viewed as the endpoint, the obvious solution for care. Tele-health care is a fantastic opportunity, and it will save the health-care system millions of dollars, but in the case of an emergency or a physical examination, for example, patients do need to see a health-care practitioner.

There is also a lack of knowledge about naturopathic medicine in Aboriginal communities. It's vital to clarify the difference between NDs and traditional healers. Traditional medicine is old, spiritual, and respected, with many rules surrounding its practice. And you don't pay for it! Lumping naturopathic and traditional medicine together actually does a disservice and is off-putting to members of the community.

Where do NDs fit in all of this?

Now, knowing all the challenges that face the rural and Aboriginal population, it is easy to say, "How many issues are there anyway and how can we possibly help to support the community?" But NDs can help in a lot of places, and I don't believe in setting limits for ourselves. We have to keep our options open and be smart about where the gaps are and where we fit. If we don't do it, someone else is going to! If we take the initiative, NDs will be part of the solution.

One of the biggest challenges that we have as a profession is how to engage

conventional health-care practitioners. In speaking to my colleagues in other rural communities, NDs have a much better chance of having a positive relationship with the medical community than you would in a big centre.

When I first started practicing in the NWT, I probably wrote hundreds of medical letters in my first six months! It was a pain, but without that communication, I knew I wouldn't be able to create those relationships. In my letters, I didn't ask for anything from the medical doctors – with permission from my patient, I would just send them a "short and sweet" update on my treatment plan and care. There will always be physicians who are resistant, but that, in my mind, is not enough to stop the process of communication or even be bothered by it. As long as patients continue to get better and I keep requesting their medical records, physicians will refer to NDs.

In terms of primary care, medical records often contain a decent amount of information that is not communicated to the patient. Usually, doctors will tell their patients only when it becomes a serious issue. Patients appreciate when you tell them their blood glucose is a little high or that their ultrasound showed a fatty liver.

Where does a recent graduate even start?

I had a vision for how I wanted to practice. We don't have the opportunities to have the same services as the bigger cities but I still wanted to provide that. Financially, I looked into grants and was surprised to see how many were available to people working with ethnic, cultural, and political groups with a specific goal and vision in mind. So within a two–three month period, I managed to garner a \$100,000 grant, buy a building, and start a practice with six other practitioners. It was stressful and busy, but I could've said "no" at any time. I felt that this was something that needed to be done.

Growth happened quickly. On March 3, we celebrated our two-year anniversary. We went from six practitioners to 10, with one more joining us in the fall. We're looking at expansion of the building to accommodate another three-four practitioners in the next year.

As an ND in a rural area, you have much more exposure than you do in a city. The amount of patient education and referrals happen on such a quick pace because everybody knows everybody in these areas. Word-of-mouth is huge. When it comes to advertising, I've probably spent around \$200 in three years.

There are differences in overhead between practicing in a rural area versus a city. The government jobs in the north start at around \$30 for admin – competing with these wages can be a challenge. A huge amount of your revenue will go to payroll and electricity. It's also expensive to build offices from the ground up.

You are able to get away with a higher appointment fee, though. Most of my patients have extended health care plans. Yellowknife is dominated with government agencies and they offer comprehensive health care coverage. Our statistics show that we get about 10-12 new patients per week and in a town of 18,000, these numbers show me that people value our service.

You have to do your own labs and be comfortable doing blood draws. Shipping samples can take 24 hours and delivery costs can be high. So what we've done is ship out packages twice a month with the NDs covering the cost of the shipping, which usually works out to about \$28 per box. The closest dispensary is probably more than 1,000 kilometres away so we've gotten used to being selective as to which products we carry and we order them online.

What lessons can you share with us?

What I've learned throughout this process is that if you identify the gaps in your locality, go from there and you'll do fantastic! It's really as simple as that. If patients that can't get acute care, or are unsatisfied with their pap smears, focus on that. Identify the types of specialists absent from the area, like gastroenterologists or dermatologists. If patients can see you for answers instead of travelling thousands of kilometres, fill those gaps. Talk to members of the community and find out what is lacking in the area.

Another idea is to participate in a traditional sharing circle. People gather, literally in a circle, and discuss current matters. Each community has a facilitator who will go through the issue; sometimes it's cancer, chronic medicine or diabetes, and everyone shares their experiences. They can help an ND see from a bird's-eye view what the community needs, where the gaps are, and how naturopathic medicine can fill them.

I believe in team-based health. I've learned that trying to do everything is inefficient and doesn't help to grow your practice. You can't be everything to everybody. Develop a focus and build a team that can take care of the other areas that aren't your expertise. Your patients' health-care options are also more complete and they're able to access excellent treatment from people they trust.

If you're fearful of practicing in a rural area, especially if you're born and raised in a city, I encourage you to visit. People are often surprised how urban Yellowknife feels. You're never really moving to the middle of nowhere – these days, you have access to most things and services. You can also try preceptoring in a rural area. When it comes to practice, however, it's up to NDs to set their limits – but for me, it's nice to have the opportunity to utilize my full training.

You'll be busy in a rural area, but if you manage your time effectively and have confidence in your abilities you'll do great!



Nicole owns and operates Gaia Integrative Clinic in Yellowknife, Northwest Territories.

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CCNM's 34th annual convocation
was held on Thursday, May 22, 2014
at University of Toronto's
Convocation Hall.

*Following are excerpts
from CCNM President
Dr. Bob Bernhardt's
convocation address:*

"Welcome to the 34th Convocation of The Canadian College of Naturopathic Medicine ... and ... the very first convocation in which CCNM will be bestowing degrees.

Today's graduates have all spent four or, for those who did a portion part-time, five intensive years of education at CCNM. What has changed during this period?

When they started in 2009/2010, if anyone had asked me whether it would be possible to establish a naturopathic teaching clinic within a hospital in Ontario, I would have replied, "no way". And yet today, we operate the Brampton Naturopathic Teaching Clinic within Brampton Civic Hospital, and are hosting well over 600 visits per month.

In 2009/10, if you had asked me whether we could get an article examining the effectiveness of naturopathic medicine in Canada's premier medical journal, the



Canadian Medical Association Journal, I would have said, “not a chance”. And yet, last April the CMAJ published an article demonstrating the efficacy of naturopathic treatments in the reduction of risk of heart attacks and strokes.

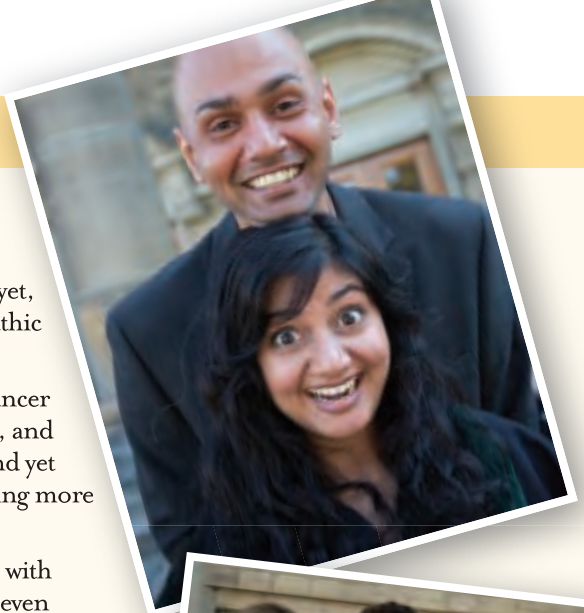
At that time, if you had asked me if CCNM would be operating an integrative cancer centre involving a broad range of practitioners providing adjunctive cancer care, and receiving patient referrals from oncologists, I would have been very skeptical. And yet today, the Ottawa Integrative Cancer Centre exists, and, bit by bit, we are receiving more referrals from oncologists.

In 2009/10, if you had asked me if our accrediting body would provide CCNM with a seven year period of re-accreditation I would have explained that none of the seven accredited naturopathic colleges across North America had ever received such a vote of confidence from our accreditor. And yet CCNM is now the first, and only, institution to receive a re-accreditation of seven years. This is a tremendous vote of confidence in the College and the program, and we are all very proud of this achievement.

Four to five years ago, if you had suggested that CCNM would receive positive mention in the Wall Street Journal, I would have laughed. And yet our recent structured delivery format for international medical graduates was considered to be such an important step in allowing these highly trained individuals to earn an income in Canada, that the Wall Street Journal ran our press release announcing the start of the delivery.

At the times these graduates started at CCNM, would we have expected that The Toronto Star would feature one of our patients of the dedicated fibromyalgia shift in an ongoing series about improving health? Or for that matter, would we have anticipated a clinic shift dedicated to fibromyalgia? And yet now it is a reality.

However, when these graduates started the program if you had asked me if CCNM was close to receiving degree granting status, I would have said “Yes”. I would never have imagined that it could take so long. The granting of degrees today represents the culmination of a process that





started in 2003. It has been a very long journey, and the recent perambulations have been challenging.

Several months ago we received notice from the Minister of Training, Colleges and Universities of his intent to grant us degree granting authority. The College only had to provide a number of items that were evidence of compliance and then final approval would be given. Unfortunately, as the Ministry staff completed their review of our materials, an election was imminent and everything ground to a halt. The calling of the election meant that the ultimate approval we required was now caught in a government quagmire, as an assessment was made as to whether or not the final consent would be considered a political action, that would not be permitted to proceed, or a house keeping matter that could.

Given this uncertainty, for today's ceremony we printed both diplomas and degrees personalized for each graduate. We printed two versions of the programs that sit in your lap, and we printed two honorary credentials for our guest speaker. Senior Policy Advisor Leah Daniels and I hounded the staff in the Minister's Office, all of whom were very pleasant, but unable to move the application to completion. When did I learn we could grant degrees? 46 hours ago I received a call from Deputy Minister Deborah Newman

indicating that it was determined that she had the authority to sign the final permission, and she had just done so. Deputy Minister Newman was very supportive of our application and I was delighted to receive her call informing me that the decision had met the deadline for our Convocation.

The significance of granting degrees is not really about the credential that individuals receive, it is another indicia of the growing acceptance of the profession in Canada. My hope is that we can garner many more such indications in the years ahead.

Naturopathic doctors are uniquely positioned to deal with the many significant challenges that exist in health care, particularly with respect to the avoidance and management of chronic conditions. The entire nature of their practice is set around ongoing visits in which a patient is taught, or coached, back into health. The graduates in front of you have had the experience of treating the same patients over a period of up to 12 months. This form of training is, unfortunately, very unusual in health care and it is critical if one is to acquire skills in guiding patients to avoid, or reduce, the impact of chronic illness. 2500 years ago the Chinese poet, Kuan Tzu, wrote:

If you are thinking a year ahead, sow a seed,
 If you are thinking ten years ahead, plant a tree
 If you are thinking 100 years ahead, educate the people.

As you listen to our graduates recite the naturopathic oath today, you will hear them pledge *"To teach the principles of healthy living and preventive medicine."* I know of no other set of medical practitioners who are so skilled at doing so."

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Bites + Stings for kids

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Cough + Cold Night for kids

Digestion

Digestion for kids

Dry Cough

Dry Cough for kids

Earache for kids

Eczema

Eczema for kids

Fever for kids

Focus

Focus for kids

Gallbladder

Gout

Grief

Jet Lag

Kidney Stones

Libido for Men

Libido for Women

Menopause

Migraines + Headaches

Nausea + Vomiting

Nausea + Vomiting for kids

PMS + Cramps

Sinus

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Sleep Tight for kids

Stress + Calm

Teething for kids

Wet Cough

Wet Cough for kids

Worry + Fear for kids

[more on the way!](#)



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FOCUS ON the Class of 2002

As *MIND|BODY|SPIRIT* is the magazine serving more than 2,200 CCNM alumni from the past 34 years, we've decided to feature interviews and updates from one particular year in each issue. This issue's focus: CCNM Class of 2002.

We asked naturopathic doctors and Class of 2002's Nora Pope, Iva Lloyd and David Lescheid what they remembered from their years at CCNM, what they've been up to since then, and what they'd share with recent grads. Here's what they had to say:

What do you recall about your time at CCNM? What's changed at the College since then?

NORA: The time flew by, especially second year. It was beefy, academic-wise. I had a study group which met for four or five hours every Saturday. That group got me through the high volume of work that year.

Now there are specialty shifts in clinic. This is an excellent idea

because eventually your practice will lend itself to specialties (neurology and ob/gyn) and sub-specialties (for me, epilepsy and infertility).

IVA: We had great class spirit, strong opinions and a lot of academic recommendations for the school. Our class not only had a lot of opinions, we were active in helping them come to fruition. The school has come a long way since then.

DAVID: The most outstanding thing I recall from my time at CCNM was the incredible quality and depth of people in my class. It amazed me to see that there were so many different backgrounds of people drawn to naturopathic medicine.

It's my understanding that now there are more restrictions on what's being taught, i.e., more limitations to the standard model of 'evidence-based' medicine and less on the more traditional levels of evidence. In my opinion, this is a pity considering much of the current science is supporting more traditional naturopathic medical practice and illuminating the limitations of a system of medicine that focuses primarily on evidence from randomized controlled trials.

What was your first professional role after graduation? Where has the profession taken you?

IVA: Since I graduated, I have been a naturopathic doctor and clinic owner, chair of the Canadian Association of Naturopathic Doctors for four years, and the editor of its *Vital Link* for the past 10 years.

I've also written three books – *Messages from the Body*, a guide to the energetics of health; *The Energetics of Health*, *A Naturopathic Assessment*; and *History of Naturopathic Medicine*, a Canadian perspective. I have written more than 40 professional articles, and have spoken at more than 30 conferences all over the world.

NORA: I began my practice in November 2002, two months after passing NPLEX. For 10 years, I worked with chiropractors and RMTs in Rosedale (Toronto). We would cross-refer. Then, in 2012, I joined a clinic owned by a naturopathic doctor near Yonge and St. Clair in Toronto. Over the years, I've built up a network of allopaths (family physicians, endocrinologists, neurologists) with whom to collaborate. This is an ongoing part of building my practice.

I am also a contributing author for *Complementary and Alternative Therapies for Epilepsy*, a textbook edited by neurologists at New York University and Harvard. I wrote the chapter on naturopathic medicine.

DAVID: I became a professor at CCNM, teaching microbiology and infectious diseases, physiology...I then became a member of the Council on Naturopathic Medical Education, evaluating the education of naturopathic medical schools across North America. I was also part of the expert group consulting with the National Health Products Directorate for Health Canada. I also practiced for a number of years. I'm now in Europe working, and speaking and participating in congresses around the world.

I've written a considerable number of articles as well as having been asked to speak in many different conferences in a number of countries. I'm also really pleased to have been asked to be one of the authors of the Foundation Project and contributed significantly to a chapter in the book. I'm currently working on a book and hope to have it ready for publication soon.

NORA: Nadia Bakir, ND. She mentioned in our second-year homeopathy class that many of her patients with seizures responded very well to homeopathy. That got me thinking about what to expect in clinic. I grew up with not one, but two friends who each had a sibling with epilepsy. As a result of seeing and hearing about seizures during my childhood, I was able to deal with them in clinic in a detached yet empathetic way. On a 2001 homeopathy shift, I recall we treated an autistic boy with seizures. After one dose of

a remedy, not only did he improve but his mother actually was able to sleep through the night without his screams waking her up. Epilepsy became a practice focus for me since then.

IVA: Dennis O'Hara, ND – his understanding of naturopathic philosophy and his dedication to the naturopathic profession provided me with a tremendous foundation at the start of my career. Dr. O'Hara's keynote at the Health Fusion conference in 2009 is still, to this day, the most impactful presentation that I have ever heard.

DAVID: There are several instructors that I remember – first, Pat Rennie. She helped instruct the anatomy lab and taught pediatrics as well. She stands out for me as a person of integrity and authenticity who really believes in naturopathic medicine and as a result, she served the profession in a number of different capacities. I was really inspired by her passion and commitment. I also remember Keith Pownall, not only because of his fascination with TV's "The Amazing Race" but also because of his commitment to spreading the message of the importance of ethical conduct as a naturopathic doctor. I really appreciated his support for the profession.

If you could share your wisdom or thoughts with a recent grad, what would you tell her/him?

DAVID: What you've learned at CCNM is only a foundation and a means to an end. The real learning happens outside the building walls with colleagues, with elders and with the historical texts sharing the wisdom of naturopathic doctors.

Furthermore, I would remind you of something that was told to me: The hand that gives the medicine is half the medicine; one of the most important parts of being a doctor is listening, empathizing and being present with your patients. Remembering the details about what RCTs tell you about NHPs is really only a small part of the healing process.

Finally, I would recommend you learn about systems medicine and some of the recent scientific discoveries associated with this exciting field. There are remarkable recent changes in our scientific understanding that are completely validating traditional naturopathic medical concepts. It is an exciting time to be an ND – I hope we don't miss this opportunity to be part of these cutting-edge advances in medicine.

IVA: I encourage you to really embrace the history and philosophy of naturopathic medicine. It will provide you with a strong framework for the rest of your careers.

NORA: Include public speaking and writing in your professional life. They both keep your clinical skills sharp because the research involved keeps you current.

Accept preceptors. They need the hours to graduate. In the beginning of my practice, I would accept them, even if I only had one or two patients booked that day. It was always a positive experience because you begin to realize how much you know.

Visit an ND twice a year, like you would a dentist. I've been seeing an ND since 1995 – I feel it's the best preventative medicine out there.

Refer to colleagues: I don't treat friends or family. I don't treat several conditions – anorexia, chronic fatigue, fibromyalgia – and I'm happy to refer to colleagues. And practice business hygiene: when someone refers to me, I thank them immediately. When someone refers to you, thank that person quickly.

Anything else you'd like to share?

NORA: I still enjoy red wine (Merlot from Bordeaux!), Belgian beer, the Lindy Hop and I'll be visiting cousins in Brazil this summer!

DAVID: I am so grateful for the people that I met at CCNM, especially for those who have remained true friends. Naturopathic medicine is a profession filled with many incredible and inspirational people.

I like to travel and explore the history and architecture of Europe. France is a 10-minute drive away; Switzerland 1.5 hours, Italy three hours and Belgium four hours. I feel so lucky to live where I am now!

CCNM RECEIVES *degree-granting approval*

This May, CCNM received final approval from the Government of Ontario to grant a degree for its naturopathic program, and the graduates who were recognized at Convocation Hall on May 23 were the first in the College's history to receive a degree credential. This is very good news for the College and the profession. Nonetheless, as for any change, it has produced questions and concerns from some of our alumni who are unclear as to the implications this may have for them. In response, we asked CCNM President Bob Bernhardt, PhD, to explain the details:

What is the degree called?

The degree is called a Bachelor of Naturopathy.

Why is it "naturopathy" as opposed to "naturopathic medicine"?

The Ontario Government decided that naturopathy would be the official term used within the Province. That is why we have the College of Naturopaths of Ontario and the *Naturopathy Act*. The nomenclature CCNM requested was Bachelor of Naturopathic Medicine and the Ministry approved Bachelor of Naturopathy. This was not the choice of CCNM; however, we recognize the title is in line with other official provincial documentation related to the profession.

Why is it "Bachelor" instead of "Doctor"?

Within academia, a first-level health-related professional degree is often considered to be the same level as a bachelor, regardless of whether or not the term doctor is included in

the title. We have been informed that we are not eligible to apply for consent to move to the title "Doctor of Naturopathy" until the Naturopathy Act is proclaimed and the profession gains the right to use the restricted title of doctor.

Will the fact that the degree does not say "Doctor" have any implications for my right to use the doctor title in Ontario, or in any other jurisdiction?

No. The right to use the doctor title is either permitted, or not, through legislation. In Ontario, all graduates of CCNM (or of the Ontario College of Naturopathic Medicine prior to that) who become members of the College of Naturopaths of Ontario will be able to use the doctor title, as permitted by the *Naturopathy Act*. This can only occur after proclamation.

Will the name of the credential have any impact on my ability to enter further studies?

Although I can't speak for all institutions, I sincerely doubt it. If any graduate has difficulty in this regard CCNM would be pleased to provide them with an official letter attesting to the level of the program.

If I have a Bachelor of Naturopathy can I upgrade later to a "Doctor of Naturopathy"?

Since, the two credentials are at an identical level, "upgrading" doesn't make sense. We will continue to investigate if there is any possibility of credential change.

I graduated in 2010 and have a diploma in naturopathic medicine. Is it possible to have a Bachelor of Naturopathy instead?

No, the Ontario Government is not permitting retroactivity of that nature.

If I received a diploma in naturopathic medicine, would it be ok to write on a CV that I have a bachelor of naturopathy?

No, it is very important to always be exact about any credentials that have been earned. You could add in parenthesis (subsequently approved as a degree program).

Are the diploma and the bachelor degree viewed as the same type of credential?

They are considered the same for entrance-to-practice purposes, but they would not be considered the same by academics. If this ever becomes an issue for a graduate we are pleased to provide a letter to the institution questioning the credential explaining that the program was assessed in 2005, and again in 2013, and in both cases determined by the Post-secondary Education Quality Assessment Board to be of a degree level.

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INTRODUCING CCNM'S FIRST-YEAR RESIDENTS

**They're bright,
capable, enthusiastic,
and ready to make
their mark on the
profession.**



Stefanie

Stefanie Trowell, ND

As an undergraduate student at the University of Saskatchewan, Stefanie Trowell, ND, found herself at a crossroads. Although certain that health care was her calling, Stefanie was uncertain about her future in the field as she entered her final year. In the hopes of narrowing down a focus, she took courses ranging from nutritional science to neuropsychology and worked as a trainer and physiotherapy assistant for the varsity teams.

"Fortunately, I had a couple of friends introduce me to naturopathic medicine and that was it – I was sold!" she recalls. "I'm not sure that I ever planned to leave Saskatchewan for my education, but since there was no option close to home, I decided to attend CCNM due to its reputation as a leader amongst naturopathic institutions."

After completing the ND program, Stefanie felt that a residency position at the College was the natural next step. She is provided with opportunities to grow as a clinician, learn more about the profession, and network with other NDs and conventional health-care practitioners. In addition, her schedule is full, teaching Traditional Chinese

Medicine and primary care, supervising interns at the RSNC, and completing an independent research assignment.

"My week starts bright and early on Monday, teaching minds eager to learn clinical skills. Three days of the week, you will find me in the clinic, where I get exposure to numerous pathologies and varying approaches to care. Between my teaching and supervising roles, I organized the OSCE II diagnostic station, which expanded my role as a resident into a whole new realm of curriculum and coordination. For the hours left in the week, I squeeze in some time to work on my research project on breast cancer care at the RSNC and complete administrative tasks," she says.

Stefanie also sees patients one day a week in her private practice. Her primary goal is to expand her practice into a haven for women affected by breast cancer, so that they have a community and support system strengthened by a medical care team that encourages optimal wellness.

"From there," she reflects, "we will see where the path leads!"

Amber Moore, ND

Having always had a keen interest in the sciences, Amber Moore, ND, completed her undergraduate degree in kinesiology from Wilfrid Laurier University. After graduation, she was first introduced to naturopathic medicine while working at a wellness clinic in Waterloo and later became a student at CCNM.

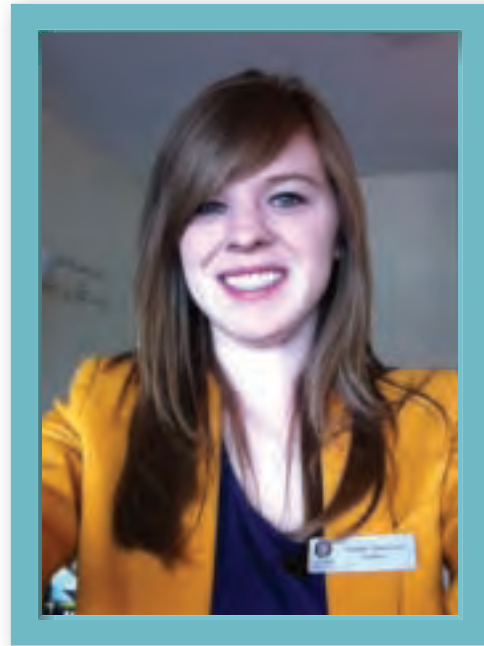
Now, as a resident, Amber is driven to help the naturopathic profession – and herself – grow.

"I have so much to be thankful for going through the program at CCNM, and the residency program was a logical fit in this regard," she says of her wish to give back to the College and profession. "I see the residency as an opportunity for accelerated personal and professional growth through mentorship, teaching, research involvement, and clinical exposure to a vast patient population."

On a personal level, Amber also wanted to confront her own perceived limitations and discover her true capabilities as a practitioner and as an individual. With that in mind, it's not surprising to learn that her most rewarding aspect of residency is "witnessing that spark of insight" from a patient or student.



Amber



Nadine

"I love to see an individual's growth, and when I get to be a part of that it is so gratifying. Although academic development is very important to me, I am even more fulfilled to be part of an individual's personal growth. Working with a patient or student who can grow from challenging their beliefs and giving in to their vulnerabilities is special," she explains.

Outside of being a resident, Amber practices at the Wylde Natural Health Team in Vaughan where she promotes wellness to the broader community. The role of "doctor as teacher" is one she takes to heart.

"One of the most powerful tools we have in our profession is the ability to educate. I would like to continue to teach patients and future NDs to be part of the growth of the profession," she says.

Nadine Gavin, ND

Describing the residency program as "too good to be true," Nadine Gavin, ND, embodies all of the roles expected of a resident: educator, clinician, researcher, and leader.

"I have always been passionate about teaching and I developed a love for

naturopathic medicine over my four years," she explains. "Residency was an opportunity to develop for two years alongside some of the most impressive colleagues in the field while giving back through teaching and research. It just seemed like a no-brainer."

Because of her unique position of being a resident and a recent graduate, students will often approach her with their thoughts, questions, and troubles.

"I will have students tell me that I was able to explain a concept they never quite grasped before or during an exam they knew the correct answer to because of something I taught.

"The more hard work you put into the residency the more competent you feel as a practitioner and the more you give back to the students," she continues. "You realize that you are helping others on their journey while you still move forward on your own."

Not too long ago, Nadine was in a comparable situation as an undergraduate student at McMaster University. Seeking guidance about how to combine her interest in health care with the desire to serve the community, she met with Rita Patel, ND (Class of

2004), and other local NDs. After learning more about the philosophy and principles of naturopathic medicine, she realized that the profession – and CCNM – were the right fits.

"Being a part of the CCNM family has allowed me to see just how important we all are to the progress and success of the school. The College is always looking for ways that we can grow and evolve. Residency is demanding but rewarding and I couldn't be happier with it. It also doesn't hurt that for all those challenging days, you have an amazing team of colleagues ready to support you however they can," she says.

Growth – both on a personal and profession level – is certainly a powerful motivator for CCNM graduates who enter the College's residency program. It is rigorous and taxing, exhilarating and gratifying. Nadine sums up the journey thusly: "It's exciting to be in a career where you are encouraged to make something your own and give back. Over my four years as a student and my first year as a resident, I have witnessed some exciting changes materializing in myself and I look forward to further development in the upcoming years."



Anthony Godfrey Memorial

One of the naturopathic profession's most loved and respected elders, Dr. Anthony Godfrey, ND, passed away on May 3, 2014.

Dr. Godfrey began his career as a veterinary surgeon in his native England. He moved to the US in the 1960s, where he received a PhD in human anatomy at UCLA, then continued his advanced research in biology at Harvard. In 1990 he became a naturopathic doctor. Dr. Godfrey was an adjunct professor at CCNM and a former member of the Board of Governors of the Institute of Naturopathic Education and Research. He was a highly regarded teacher, author, mentor, practitioner, friend and inspiration to CCNM and the naturopathic community.

On May 30, CCNM celebrated Dr. Godfrey's life with a special memorial which brought together students, patients, faculty and leaders in the naturopathic community. The event featured tributes from Dr. Godfrey's colleagues, friends and family.

FOLLOWING ARE EXCERPTS FROM SOME OF THE TRIBUTES:

"We both loved words. I loved his wise and gentle way – gentle as he was, he was quietly and fiercely clear about the essential aspects of life, and thus, as clear about naturopathic medicine, a medicine which grows from the nature of life itself. He was comfortable with both its mystery and knowledge.

In 2011 I attended the CCNM Gathering as a speaker and was transformed by Dr. Godfrey's extraordinary opening presentation. Spirit palpably filled the room and us in the room, as he spoke. We were deeply moved to rise, many of us weeping, with the simple clarity of his words and feelings. I will never forget that presentation. It marked a turning point for me as an educator in sharing at a new level of spiritual openness, personally, with my students, the deeply spiritual experiences, some inexplicable, which I have and continue to have as a naturopathic physician."

Pamela Snider ND, on behalf of the Foundations Senior Editors and FNM team: Jared Zeff, ND, LAc, Joe Pizzorno ND, Jim Sensenig ND, Don Warren, ND (Can), Stephen Myers ND, BMed, PhD (Au), Roger Newman Turner ND, DO, LAc (UK), David Sando MA, Tanya Alter MPA and Amy Neil MS, MAP

"He believed strongly in giving back to his profession supporting both the CAND and the OAND not just by being a member but by rolling up his sleeves and getting involved. In 1988 Anthony was a member of Health Canada's Herbal Advisory Panel educating the government on botanical medicines and helping to guide the creation of what would become the Natural Health Products Directorate.

One day not long after I became Executive Director in 2002, Anthony appeared in my office pulling a trolley loaded with file boxes. Now I knew that he tended to hang on to things so if he was showing up in my office with a bunch of boxes it was important. And it was, the file boxes contained his entire work product with the Herbal Advisory Panel. He congratulated me on my new position and stated that as I was going to be representing the profession with the federal government I had better read up on a few things and his files were as good a place as any to start.

Our office was in the College at that time and on many occasions and without warning Anthony would quietly appear in my office doorway, smile, ask how my reading was coming along and did I have any questions. I always did and have fond memories of the many interesting discussions we had about the trials and tribulations of working with government."

Shawn O'Reilly, Executive Director, Canadian Association of Naturopathic Doctors

"Anthony was devoted to teaching and mentorship. I am so grateful that he entrusted Rebekah Blok and me in our second year at CCNM to transcribe and translate his hand-scrawled botanical monographs into work that would later become a textbook. I am even

more honoured that I had the opportunity to work closely with him over many years of co-teaching bot med.

Soon after he was diagnosed with cancer, he asked me to tell the first year class at the time about his illness. He was concerned about the questions that students might have about how someone with such a strong connection to spirituality could get so sick without knowing it. "Please direct them to Gabor Maté's work 'When The Body Says No'," he said. It struck me as both profoundly insightful and an affirmation of his own weakness: selflessness. His request was emblematic of his dedication to teaching – even in moments of personal tragedy, he was still focused on acting as a guidepost for others.

The last time I saw Anthony he was still getting accustomed to living horizontally as he put it, laying on his hospice bed. We talked about nature documentaries, his birthday, and the process of dying. "I'm working on letting go of the wrong ideas I have about myself," he told me. And that was how I remember Anthony best – wise and inspiring, candidly talking about the joys and challenges of walking authentically on one's own spiritual journey."

Cyndi Gilbert, ND, assistant professor, botanical medicine and co-author, Principles and Practices of Naturopathic Botanical Medicine.

The Dr. Anthony Godfrey Memorial Bursary has been established to assist future students achieve their goal of becoming naturopathic doctors. Information is available at <https://safe.ccnm.edu/anthony-godfrey-memorial-tribute>

To read more or to offer your own tribute to Dr. Anthony Godfrey, visit <https://www.facebook.com/groups/GodfreyTribute/>

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Partnerships are a com

This adage has been evident through the lifespan of the Research Department, but also no more apparent than in shaping the future, and most recent season of research at CCNM.

March featured the launch of the IN-CAM Naturopathy Special Interest Group (SIG) co-led by NDs Kieran Cooley and Teresa Tsui. The Naturopathy SIG was formed to continue to build an interdisciplinary, collaborative research community, and foster excellence in research into naturopathic medicine to enhance the health of Canadians. The group supports a case report completion ([url: http://www.incamresearch.ca/content/naturopathysig-case-report-competition](http://www.incamresearch.ca/content/naturopathysig-case-report-competition)) meant to stimulate the production and publication of outstanding patient care that epitomizes naturopathic practice in an effort to increase the evidence base surrounding the profession. It also acts as a network of researchers with diverse interests and expertise relating to naturopathic medicine who are able to support excellent research and help develop burgeoning researchers and research opportunities. NDs, students and researchers interested in joining the Naturopathy SIG can find out more here: <http://www.incamresearch.ca/node/213>

April featured news of the receipt of a prestigious Canadian Institutes of Health Research (CIHR) Knowledge Synthesis grant to conduct a series of systematic reviews of the literature on the role of three key natural health products (NHPs) in prostate cancer. Led by Heidi Fritz, ND, the project is



Research News

Common key to success and growth

a collaboration with a number of institutions and partners including: the Ottawa Integrative Cancer Centre, the University of British Columbia, McMaster University, the Ottawa Hospital Research Institute, the Ottawa Regional Cancer Foundation, Prostate Cancer Canada and the Canadian Cancer Society. The group will focus on natural health products that are controversial, based on media reports as well as on commonly held medical opinion, but nonetheless have a fair amount of existing evidence. The focus of the reviews will be to assess existing data to try to draw conclusions about effectiveness in the treatment or prevention of prostate cancer, as well as the safety

of these agents in combination with conventional therapies.

CCNM continues to partner with William Osler Health System on evaluation projects relating to the first ever hospital-based ND teaching clinic in Canada – the Brampton Naturopathic Teaching Clinic headed by Jonathan Tokiwa, ND. Ongoing evaluation of the clinic is revealing key opportunities for collaborative care, with the most recent being presentation of findings on naturopathic care for diabetes at the clinic. These results have led to a number of exciting research funding opportunities for projects that will advance the understanding of collaborative and whole practice naturopathic care.

Last, but not least, CCNM's partnerships with industry sponsors continue to provide wonderful opportunities to advance knowledge and inform clinical decisions of naturopathic doctors. CCNM has just completed its second study examining the safety and effectiveness of probiotics, this time in severe IBS alongside a partnership with Wakunaga Inc. The department is also set to embark on its first ever study in osteoarthritis alongside a partnership with Seroyal, Portland's Helfott Research Institute, and Dalhousie University.

Stay tuned to the Alumni e-news as well as at upcoming conferences for exciting announcements and presentation of findings.

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Letter from Michael Prytula, ND Class of 1988

Greeting, my fellow grads!

It's been 25 years since I walked the halls of CCNM (then OCNM) as a student. It was a time of struggle, challenge, risk and an idealistic future. My son was born at the beginning of 4th year, and I had to work full time to support myself and my family while attending naturopathic college. And that is what set me up for success!

You see, I couldn't afford to fail in my chosen career. I had too much riding on this. I owed \$60,000 upon graduation, and loan interest rates were at 14% (and not tax-deductible). Creative financing was a gift I inherited from my father. So, over the next five years, as my practice slowly grew, I continued full time at my old job to pay my loans off and avoid interest.

Not all of my colleagues were so fortunate in paying off their debts or in private practice. I wasn't the most academically gifted student, but I had curiosity, and I understood calculated risk-taking. I also had an intense passion for my chosen profession and - much to the chagrin of the members of the BDDT-N - persistence. I fought a four-year legal battle with the Ontario College of Nurses for nurses to be able to take orders from naturopathic doctors; fought a ten-year legal battle with the BDDT-N for ozone and chelation; and I served for two years with the transition council trying to advance our scope of practice in Ontario.

The moral of this story isn't about whether or not I followed the accepted rules, but about how all of us can - and must - support our colleagues and our profession, whether through sharing our knowledge, time, wisdom, skills, creativity, outside-the-box thinking, or finances. I have been blessed with opportunities for all the above, and I would like to challenge all CCNM grads to rise to the occasion to set an example for our young aspiring future colleagues by helping them get over the financial obstacles they face while they are in college.

My own giving has, with God's blessing, set me up to soar higher than even I thought possible. I recently found myself flying around in BC, Alberta and Saskatchewan with the likes of Dr. Joe Pizzorno and a number of our talented Albertan colleagues at 40,000+ feet in the fastest non-military aircraft in the world. We were working with the world's largest health and wellness program that serves over 25,000 people! (If I sound like I am bragging, it is not my intent, it is merely a by-product of my point). The old adage of sowing and reaping is true: if you sow abundantly, you will reap abundantly. Help others, sow seeds in their minds and imaginations, and who knows what opportunities might come your way, their way and our profession's way?

Sincerely yours,
Michael



Dr. Michael A Prytula ND of St Catharines, Ontario front left at 40,000 feet with Dr. Bruce Lofting ND (CCNM 1995) of Calgary, front right. Flying private rocks!

“What we have done for ourselves alone dies with us; what we have done for others and the world remains and is immortal.”

— Albert Pike

FOOTNOTE:

Dr. Prytula has supported the CCNM Bursary Fund since 1998. He was also the largest single non-corporate donor to CCNM's capital campaign and has sponsored rooms at both CCNM and BINM.

Lines of credit to our students have recently been drastically reduced by the major banks, so we are aiming to double the number of \$1,000 bursaries available our students. If you would like to take up Dr. Prytula's challenge by contributing to the CCNM Student Bursary Fund, please call me any time.

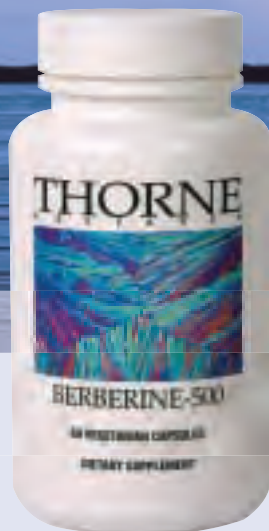


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Pioneering Change.

Our theme for this year's annual report reflects growth, success, and innovation.

For CCNM, 2013 marked a series of firsts for the entire profession:

The only naturopathic bridge delivery for internationally trained doctors in North America. Seven-year accreditation.

A naturopathic teaching clinic located within a hospital. Research published in a leading medical journal.

Our stories highlight the achievements of the past year and show us a glimpse of the future of health-care in Canada.

**Discover how CCNM
is pioneering change.**



MESSAGE FROM THE CHAIR

This has been a wonderful year of success for the Canadian College of Naturopathic Medicine (CCNM), and I am proud to be associated with the College as it pioneers the changes that, through the enhanced utilization of naturopathic medicine, will make health care so much better in the future.

During the past year, CCNM's 2,000th graduate crossed the stage in Convocation Hall to receive her credential. CCNM successfully launched the Brampton Naturopathic Teaching Clinic (BNTC), the first naturopathic teaching clinic within a hospital in North America. The College became the first, and so far the only, institution to receive a seven-year reaccreditation period from the Council on Naturopathic Medical Education (CNME). Our final research study with the Canada Post Corporation and the Canadian Union of Postal Workers was published in the Canadian Medical Association Journal (CMAJ), Canada's most impactful medical journal. Although the process is still underway, CCNM received two very positive reviews with respect to its degree granting quest.

The Ottawa Integrative Cancer Centre (OICC) is developing a strong relationship with the cancer care community in Ottawa and an increasing number of oncologists are willing to correspond regarding the integrative care of patients. CCNM launched the special program delivery for International Medical Graduates (IMGs), so that they could complete the courses they require in two years. The chance for these highly trained individuals to re-align their medical skills with naturopathic care was considered to be sufficiently noteworthy such that the Wall Street Journal posted the news release celebrating the start of the delivery.

Life can be challenging as a pioneer, but success achieved can be incredibly fulfilling. Fiscal 2013 has been a truly exceptional year for CCNM.

Barb Weiss, ND
Chair



MESSAGE FROM THE PRESIDENT

As Board Chair Barb Weiss, ND, has outlined, the last year has been a truly remarkable period of pioneering progress for the Canadian College of Naturopathic Medicine (CCNM). The achievements are a tribute to the very fine faculty, staff and students that we have at the College. I am approaching 40 years of experience in post-secondary education and I can say without a word of hesitation that CCNM is the most impressive institution with which I have been associated. Our students constitute the brightest, most socially conscious and environmentally concerned student body I have seen, and... they are incredibly nice individuals to know and work with!

I will not reiterate all of the achievements that Chair Weiss has identified, but I do want to highlight the significance of several of them. The seven-year reaccreditation approved by the Council on Naturopathic Medical Education (CNME) is an incredible vote of confidence in the quality of our program and the strength of our institution. Thank you to the faculty, staff and students who contributed to, and participated in, the review. This is an achievement of which the entire institution can take great pride. In the same vein, CCNM received two strong reports from the review teams for the Post-Secondary Education Quality Assessment Board, which again reflected confidence in our institution and our program.

The launch of the Brampton Naturopathic Teaching Clinic reflects confidence among the progressive leaders of the William Osler Health System, that their patients can be aided through convenient access to naturopathic care. Initial surveys among the patients indicate an extremely high level of satisfaction with their care, and an indication that since receiving the care they have drawn less on other resources at the hospital. I believe that this clinic may represent the future of health care.

Finally, thank you to the members of the Board of Governors of the College for their vision and their support. Our pioneering journey would not be possible without them.

Bob Bernhardt, PhD
President and CEO

OUR VISION CCNM will make naturopathic medicine an integral part of health care through pre-eminent education, research and clinical services.

OUR MISSION The Canadian College of Naturopathic Medicine will:

Demonstrate excellence in education to our students, supporting them throughout their careers;

- >> Provide a working environment that allows our faculty and staff to excel;
- >> Expand our knowledge of naturopathic medicine through high quality research;
- >> Excel in delivering naturopathic medicine to our patients;
- >> Forge a strong relationship between allopathic and naturopathic medicine with a focus on affordable, accessible and effective health care; and so make the practice of naturopathic medicine widely acknowledged as key to maintaining patient health.

THE FIVE ENDS

1. Excellence in Education

Educate naturopathic doctors on the basis of clear and focused curriculum, delivered by the most competent faculty, and graduate high-quality naturopathic doctors.

2. High-Quality Clinical Services

Provide high-quality naturopathic care in a clinical setting, resulting in positive educational experiences for students and positive outcomes for patients and clients.

3. Excellence in Research

Conduct and disseminate research relevant to naturopathic medicine and help develop skills among faculty, students, and graduates that foster research activity and a culture of evidence-informed clinical practice.

4. Prominent National Profile

Increase the awareness and respect of the College among the profession, other health practitioners, government and the public.

5. Change Agent

Foster positive change in our health, our environment, and our health-care system through the promotion of the principles and practices of naturopathic medicine.

“I believe the IMG bridge delivery helps to position CCNM as a leader in medical education in Canada.”

**PATTI SCOTT,
ASSOCIATE DIRECTOR OF STUDENT SERVICES**

“The support, knowledge and expertise of a naturopathic doctor to create an individualized approach to health and wellness achieves real, positive dietary and lifestyle changes, ultimately saving lives, improving quality of life, and preventing harmful diseases from manifesting.”

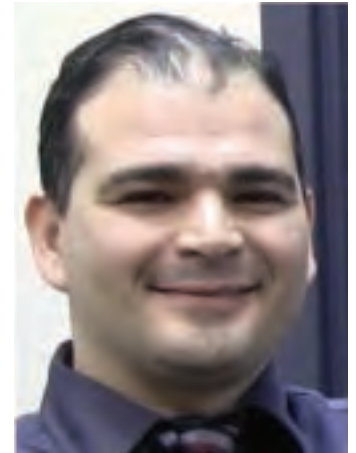
**KIERAN COOLEY, ND,
ASSOCIATE DIRECTOR OF RESEARCH**

IMG BRIDGE DELIVERY

Canada is home to 10,000 foreign trained medical graduates with over 7,000 in Ontario alone. The majority of these highly trained individuals are working lower skilled jobs that make little or no use of their medical expertise. Those who do wish to pursue a career in medicine have to deal with costly evaluating and licensing exams and get backlogged in their attempts to secure and complete a hospital residency. In May 2013, CCNM launched the first-ever naturopathic medicine program delivery for international medical graduates (IMGs). The IMG bridge delivery offers foreign-trained professionals an opportunity to further their health care careers in Canada. The first cohort, consisting of 22 students

includes surgeons, oncologists, pediatricians and a medical geneticist and comprises medical professionals from countries including Egypt, Iran, China and Colombia.

The six-term (two-year) program allows for sequencing of required courses and early clinic exposure. IMGs are being supervised through 1032 hours of primary clinic experience – the same number required for the four-year program and are serving as interns in the seven clinics run by CCNM, including five community health centres and the Brampton Naturopathic Teaching Clinic in Brampton Civic Hospital.



SEVEN-YEAR ACCREDITATION



In March 2013, representatives from the Council on Naturopathic Medical Education (CNME) visited CCNM to assess the extent to which the College fulfilled its requirements for accreditation. After reviewing hundreds of pages of documentation, evaluating the strength of the program, meeting with staff and faculty, and examining whether CCNM itself is a financially sound and well-managed institution, the CNME awarded the College with a seven-year reaccreditation – the first for any naturopathic medicine school in North America.

With the accreditation, the CNME expressed praise for

the College's continuous improvement of the curriculum and the commitment of the faculty and administrative staff to better the outcomes of the program for students. There are no requirements for interim visits and any areas of improvement need only be reported in CCNM's annual report.

The CNME also recognized and approved CCNM as a sponsor for clinical residencies. In addition to CCNM's eight residents – six in the clinic and two in research positions – the College opened residency opportunities at two external sites last year.

INTEGRATIVE, WHOLE-PERSON HEALTH CARE

When the Brampton Naturopathic Teaching Clinic first opened its doors at Brampton Civic Hospital in early 2013, it was met with some skepticism from the medical doctors and health-care practitioners. There is no such precedent in Canada – the BNTC is the first of its kind – but as more patients have seen their health improve, the attitude at the Hospital has shifted toward acceptance and cooperation.

According to the BNTC's lead supervisor Jonathan Tokiwa, ND, creating an open communication policy between the medical doctors and the NDs – including

regular meetings and detailed correspondence regarding patient progress – has helped to create a more collaborative environment.

The word about naturopathic medicine and the BNTC is spreading. In the period between January and December 2013, the number of shifts increased from four to 12 and appointment numbers skyrocketed. Both new and returning patients combined to produce a remarkable 344 per cent increase in visits between January and December.



OICC WELCOMED WITH OPEN ARMS



The Ottawa Integrative Cancer Centre (OICC) continues to build relationships with local health organizations and community partners to bring awareness and support to integrative oncology.

In 2013, the OICC further cemented its collaboration with the Ottawa Hospital through grand rounds presentations and a string of speaking engagements with some of the Hospital's researchers, oncology nurses, and other health-care practitioners and staff. The OICC also offered testimony regarding its model

of health care to the Standing Committee on Health at the House of Commons.

Additionally, the OICC improved its digital profile by launching a new and improved website and boosting its social media presence. The new site houses a blog, a series of video clips extolling complementary cancer care, and a comprehensive media archive containing links to all of the OICC's radio, television, newspaper, and magazine appearances.

EXPANDING OUR EVIDENCE BASE

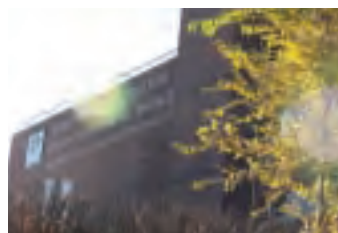
With each passing year, CCNM's research department continues to expand the evidence base of naturopathic medicine through ongoing studies in a variety of areas. This past year was no different as we started a cohort study looking at the impact of intravenous vitamin C on various types of cancer, secured funding for a substudy exploring the use of melatonin in non-small cell lung cancer, are investigating the safety and efficacy of a probiotic in treating severe irritable bowel syndrome, and completed a series of papers on the use of natural health products in cancer.

One of the most significant achievements for our research

department this past year was the publication of the results of our randomized control trial on the use of naturopathic medicine for the prevention of cardiovascular disease in the Canadian Medical Association Journal. The multi-centre study was supported by a joint project between the Canada Post Corporation and the Canadian Union of Postal Workers. Researchers screened 1125 workers at Canada Post, admitted 246 who showed the highest risk of cardiovascular disease and had 207 complete the year-long study. Participants in both groups received care from their family physicians; those in the naturopathic group also received health promotion

counselling, nutritional medicine and/or dietary supplementation from regulated naturopathic doctors seven times during the year.

For those in the naturopathic group, the risk of a cardiovascular event over the next 10 years was reduced from 10.8 per cent to 7.7 per cent. This means that for every 100 workers treated with adjunctive naturopathic care, approximately three fewer would experience a significant and potentially deadly event such as a heart attack or stroke. The prevalence of metabolic syndrome (a risk factor for heart disease) was reduced by 17 per cent.



STRENGTHENING OUR MISSION

CCNM took a step forward in its application to obtain degree granting this past year. In early 2013, we submitted a 2,000 page update of our application to the Post-Secondary Education Quality Assessment Board (PEQAB), the arm's length agency responsible for making recommendations to the Minister of Training, Colleges and Universities. In May and June, the College was visited by the organization and program review teams from the agency to assess whether the College

and our naturopathic medicine program satisfied the standards for a degree granting institution.

Through meetings and interviews with staff, faculty and students and extensive research of our program and curriculum, the reviewers found strong reasons to support our application. CCNM received final approval to grant a degree on May 20, 2014.

THANK YOU, CCNM SUPPORTERS

The Canadian College of Naturopathic Medicine is fortunate to benefit from a long list of friends and supporters. The following individuals and corporate supporters help CCNM achieve its mission to educate, develop and train naturopathic doctors through excellence in health education, clinical services and research that integrate mind, body and spirit.

By investing in research, scholarships, teaching clinics and other areas at the College, our supporters help CCNM lead the development of primary health care through education in naturopathic medicine and foster positive change in our health, our environment and our health-care system.

CCNM is a charitable educational institution, and receives no direct financial support from federal or provincial governments. Our financial health depends on the generosity and commitment of our supporters, who believe in the work we do and support naturopathic education and research. On behalf of our students, alumni, faculty, staff and clinic patients, we thank you.

The following list recognizes cumulative giving from active supporters who contributed \$50 or more between August 1, 2012 and July 31, 2013.

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IMGs: A YEAR OF PIONEERING CHANGE

CCNM launched the International Medical Graduates (IMG) bridge delivery in May 2013, welcoming 22 foreign-trained medical professionals to the program. Earlier this year, we met with four of our IMG students as they approached the midway point of the program.

Paola, Rana, Jamal and Abdullah discussed their backgrounds, what brought them to CCNM and their future plans once they become NDs. Check out some of what they had to say.

Paola: I trained as a physician in Columbia and also in Canada. The emphasis was really placed on diagnostic procedures and expensive therapeutic tools but over time I realized that this approach to health might not be enough; it was more of a disease management type of health care that I was trying to provide. I knew that there was always more that I could do so for me, coming to naturopathic medicine was a natural transition.

As an international doctor, we have to take on more of a stewardship role, be able to communicate with the conventional medical world on a one-to-one level, and create a more collaborative environment between conventional medicine and naturopathic medicine.

Rana: I'm a doctor from Jordan and graduated from Jordan University of Science and Technology 2007.

I came here to Canada shortly after graduation. I started to do the exams – the Canadian ones and the American ones as well.

And I did some courses in sleep medicine and sleep technology. I did two years of medical assistance and sleep specialist and I am still working as a registered sleep technologist.

This gave me a very good chance to be exposed to other kinds of chronic patients with fibromyalgia, insomnia, chronic fatigue – which convinced me more to seek naturopathic medicine. I've been always inspired with all the doctors who allow the integration kind of practice between the western medicine and naturopathic medicine. I was always interested in being part of this process.

Abdullah: I am an immigrant from Egypt. Just after completing my internship year, I joined the anesthesia program, got my master's degree and moved to Saudi Arabia. My involvement was in three main areas: operational room, pain management, and intensive therapy room. I found that the IMG program is convenient and

also practical because in two years you are going to have a license. For me, my greatest aspiration is to combine adjunctive naturopathic care for pre-operative surgical patients.

Jamal: After I graduated from medical school, I worked for four years as a general practitioner. It was a great experience for me and I got a picture of medicine work in different fields as a GP. Then I went for the two-year pediatrician residency.

For me I am very interested in the principles of naturopathic medicine – serving people not as a patient, but as a whole person, as a member of the community, and promote a healthy lifestyle.

View the full video featuring the IMG students at annualreport.ccnm.edu.



BOARD OF GOVERNORS

(as at July 31, 2013)

The Board's mandate is to govern the organization, that is the Corporation (Institute of Naturopathic Education and Research operating as the Canadian College of Naturopathic Medicine (CCNM)), with a strategic perspective through effective policy governance and assurance of executive performance that allows the vision and ends of the organization to be achieved with excellence.

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Standing: Aeryn Twidle (Staff Representative), Malcolm Heins, Neil Davis, Eileen Tobey, Melissa Johnson, ND, David Nostbakken, Jason Clifford (Student Governor), Mike Hoehn, Colleen McQuarrie ND

Seated: Tosca Reno Kennedy, Rudy Breda (Treasurer/Vice-chair), Barb Weiss, ND (Chair), Bob Bernhardt (President), Carol Morley, ND (Vice-chair), Zeynep Uraz, ND (Faculty Representative)

Absent: Colin Huska, ND, Arnel Beaubrun, ND, Joel Lanphear

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CCNM 2013 FINANCIALS AT A GLANCE

STATEMENT OF FINANCIAL POSITION

As at July 31

	July 31, 2013			July 31, 2012	August 1, 2011
	Operating Fund	Restricted Fund	Endowment Fund	Total	Total
ASSETS [note 7]					
Current					
Cash and cash equivalents	\$ 434,230	\$ 385,014	\$ 69,756	\$ 889,000	\$ 668,380
Accounts receivable					
Student fees	137,202	—	—	137,202	83,469
Other	183,981	—	—	183,981	366,580
Due from related parties [note 3]	167,378	—	—	167,378	182,261
Inventory	70,907	—	—	70,907	96,985
Prepaid expenses	287,335	1,032	—	288,367	325,681
Total current assets	1,281,033	386,046	69,756	1,736,835	1,723,356
Long-term prepaid expenses	15,590	—	—	15,590	25,881
Capital assets, net [note 4]	37,570,961	—	—	37,570,961	37,905,185
	38,867,584	386,046	69,756	39,323,386	39,654,422

LIABILITIES AND FUND BALANCES

Current					
Bank indebtedness [note 7]	900,000	—	—	900,000	1,700,000
Accounts payable and accrued liabilities	941,934	—	—	941,934	817,764
Interfund (receivable)/loan [note 6]	(379)	(2,315)	2,694	—	—
Current portion of long-term debt [note 7]	36,647	—	—	36,647	363,302
Deferred revenue	1,343,130	—	—	1,343,130	1,059,150
Total current liabilities	3,221,332	(2,315)	2,694	3,221,711	3,940,216
Long-term debt [note 7]	—	—	—	—	36,647
Total liabilities	3,221,332	(2,315)	1,832	3,221,711	3,976,863
Commitments [note 12]					
Fund balances					
Operating Fund	35,646,252	—	—	35,646,252	35,197,350
Restricted Fund [note 8]	—	388,361	—	388,361	413,147
Endowment Fund [note 9]	—	—	67,062	67,062	67,062
Total fund balances	35,646,252	388,361	67,062	36,101,675	35,677,559
	38,867,584	386,046	69,756	39,323,386	39,654,422

See accompanying notes

On behalf of the Board:

GOVERNOR

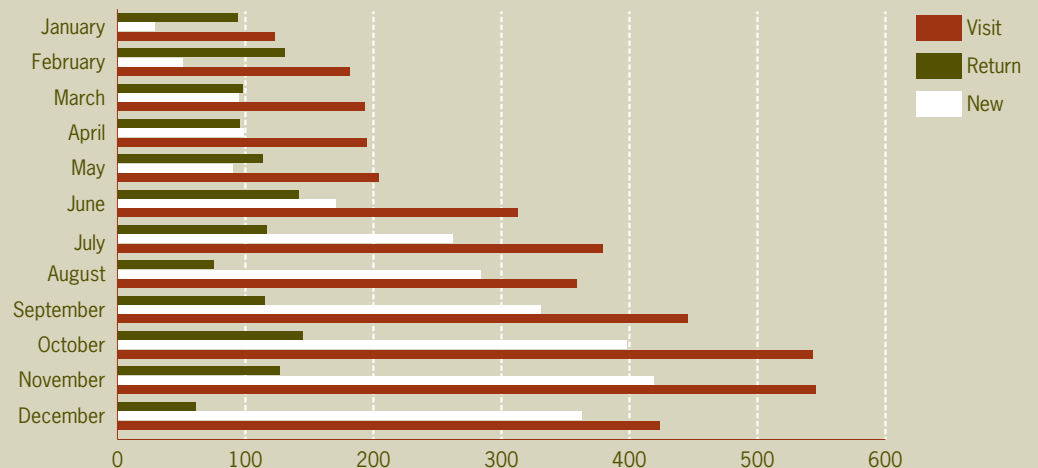
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BNTC Patient Visits, 2013

January – April: 4 shifts/week

May – August: 8 shifts/week

September – December: 12 shifts/week

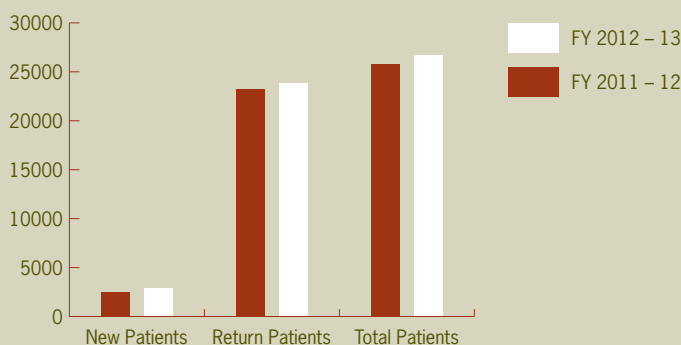


STATEMENT OF REVENUES AND EXPENSES AND FUND BALANCES

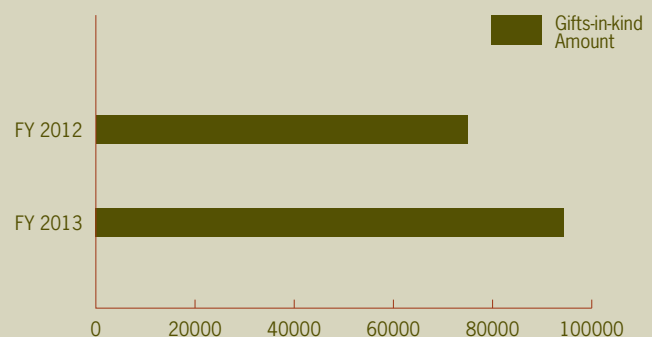
Year ended July 31	2013	2012	2013	2012	2013	2012	2013	2012
	Operating Fund		Restricted Fund		Endowment Fund		Total	Total
REVENUES								
Tuition	\$ 11,478,256	\$ 9,810,810	—	—	—	—	11,478,256	\$ 9,810,810
Clinic	1,249,549	1,118,783	—	—	—	—	1,249,549	1,118,783
Dispensary	176,800	132,932	—	—	—	—	176,800	132,932
Property	1,271,161	1,168,385	—	—	—	—	1,271,161	1,168,385
Membership fees	20,075	19,475	—	—	—	—	20,075	19,475
Student and application fees	4,392	3,230	—	—	—	—	4,392	3,230
General interest and continuing education	175,593	151,521	—	—	—	—	175,593	151,521
Donations and sponsorships [note 10]	202,823	214,165	219,034	415,484	—	—	421,857	629,649
Interest	37,111	40,221	863	961	—	—	37,974	41,182
Research	151,743	214,274	537,322	270,976	—	—	689,065	485,250
Other [note 11]	291,483	258,158	—	—	—	—	291,483	258,158
	15,058,986	13,131,954	757,219	687,421	—	—	15,816,205	13,819,375
EXPENSES								
Salaries and employee benefits	9,945,955	9,167,327	285,299	287,973	—	—	10,231,254	9,455,300
Rent	102,019	93,386	25,908	34,540	—	—	127,927	127,926
Office and general	1,132,503	989,650	204,874	84,608	—	—	1,337,377	1,074,258
Travel, promotion and advertising	709,217	526,540	41,855	33,609	—	—	751,072	560,149
Research	288,433	315,308	105,296	96,480	—	—	393,729	411,788
Books and teaching supplies	495,801	454,831	7,878	6,650	—	—	503,679	461,481
Professional services	78,691	100,496	—	—	—	—	78,691	100,496
Bursaries and awards	74,329	45,684	88,350	81,335	—	—	162,679	127,019
Graduation and student events	30,114	27,824	—	—	—	—	30,114	27,824
General maintenance	764,623	661,154	22,545	46,252	—	—	787,168	707,406
Interest on long-term debt	31,266	42,063	—	—	—	—	31,266	42,063
Amortization	957,133	819,740	—	—	—	—	957,133	819,740
	14,610,084	13,244,003	782,005	671,447	—	—	15,392,089	13,915,450
Excess (deficiency) of revenues over expenses for the year	448,902	(112,049)	(24,786)	15,974	—	—	424,116	(96,075)
Fund balances, beginning of year	35,197,350	35,309,399	413,147	397,173	67,062	67,062	35,677,559	35,773,634
Fund balances, end of year	\$ 35,646,252	\$ 35,197,350	\$ 388,361	\$ 413,147	\$ 67,062	\$ 67,062	\$ 36,101,675	\$ 35,677,559

See accompanying notes

RSNC patient visits



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- Do you have a story to tell that may interest other alumni?
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- TuZen has a Natural Product Number (NPN) 80019103.

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References: 1. Nobæk S, Johansson ML, Molin G, et al. Alteration of intestinal microflora is associated with reduction in abdominal bloating and pain in patients with irritable bowel syndrome. Am J Gastroenterol 2000;95:1234-8. 2. Nishizaki K, Koriuchi H, Benfordi SA, controlled, double-blind, randomized study on the efficacy of *Lactobacillus plantarum* 299v in patients with irritable bowel syndrome. Eur J Gastroenterol Hepatol 2001;13:1437-7. 3. Sawant PC, Venkatraman J, Durotte PR. T2030 evaluation of *Lactobacillus plantarum* 299v efficacy in IBS: results of a randomized placebo-controlled trial in 200 patients. (abstract). Gastroenterology 2010;138(Suppl 1):617. 4. Almer S, Nobæk S, Jeppesen B, Adlerberth I, Wadli AE, Molin G. The normal *Lactobacillus* flora of healthy human rectal and oral mucosa. Appl Microbiol 1998;65:854-6.



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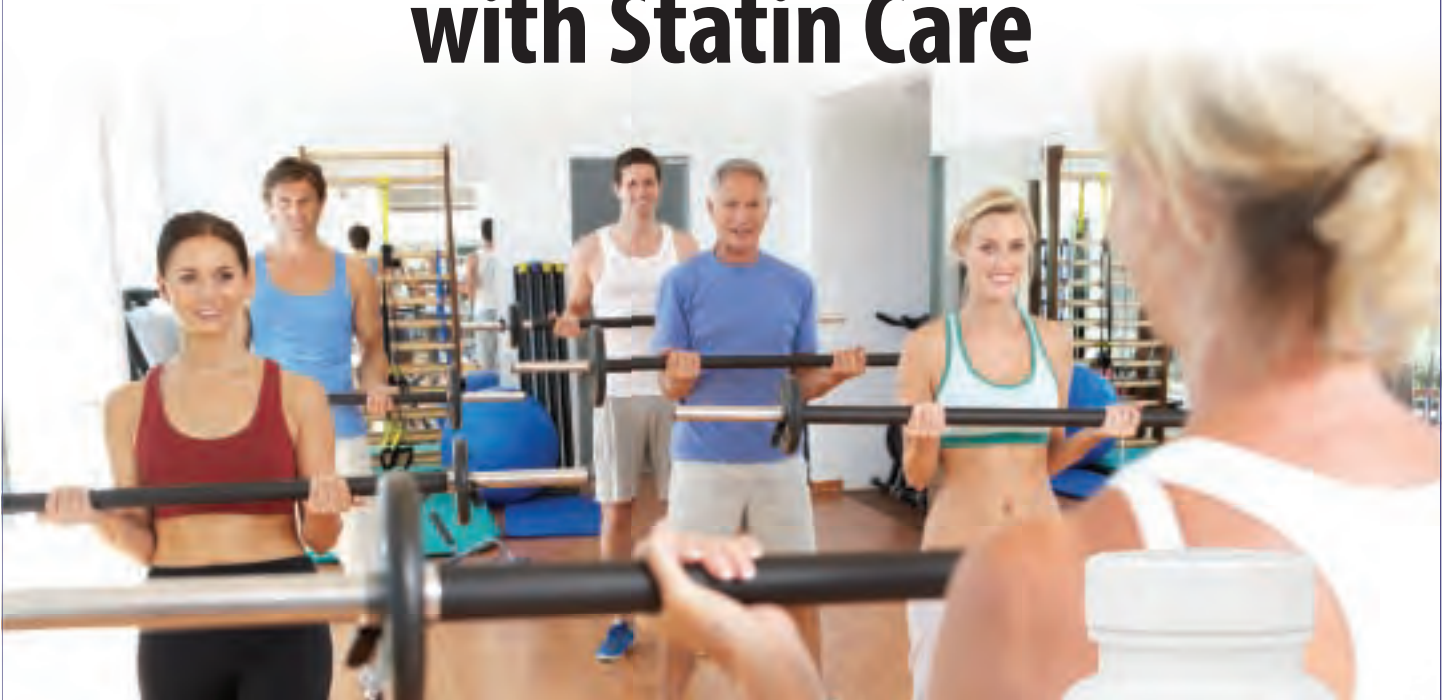


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1. NHPD Monograph on Coenzyme Q10. November 2007.

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