

**POLICE BEAT**



**Numbers To Note  
EMERGENCY**

Police, Fire or  
Ambulance ..... Dial 911  
Fire (Information) ..... 877-1133  
Police (Non-Emergency) .. 878-5511  
Hospital ..... 873-0111  
Distress Centre ..... 877-1211

**Slippery roads**

Halton Regional Police report a Mississauga man severely damaged his 1989 Ford sedan after he collided with a 1976 Jeep on 9th Line and 25 Side road Sunday. Police say due to slippery road conditions, neither the driver of the Ford or the Jeep could stop and they collided after the Jeep driver, an Erin man, lost control of his vehicle after striking a snow drift. The Jeep was moderately damaged. There were no injuries and police laid no charges.

**Tavern break-in**

A Georgetown tavern was broken into Friday night and unknown thieves stole thousands of dollars worth of televisions, liquor and games. Police report unknown suspects first tried to pry open the front door of the establishment and when that failed, removed a window pane to gain entrance. Once inside, they stole a \$1200 Mitsubishi color TV, a \$600 Electrohome color TV, \$676 worth of open liquor bottles from the bar and a \$75 dart board. Police are continuing their investigation.

**Domestic dispute**

A Georgetown man has been charged with assault by police after

he was caught pinning down a screaming woman at his Georgetown apartment Friday. Police were called to the scene and when they arrived, the accused was on top of the screaming woman and holding her down. When police approached, he let her go and was placed in the cruiser. The 26-year-old man will appear in Milton court Feb. 10.

**Wanted suspect**

Police are looking for a man who was seen stealing money from a woman's purse in the Miracle Mart grocery store in Georgetown Friday. Police say the suspect was observed standing around shopping carts with purses in them. A woman confronted the suspect who then fled but when another woman checked her purse, she discovered her eel skin wallet containing \$110 cash and all her credit cards and identification stolen. The man has been described as a non-white, approximately 25-30 years-old, weighing 82 kilograms and about 183 centimetres tall. He has no facial hair and was dressed in a dark winter jacket, brown checked dress slacks and black dress shoes. If you have any information on the suspect, call Detective Sergeant Michael Eacrett at 878-5511, ext. 2115.



**Fun during the storm**

Debra Cock of Terra Cotta took son Jeffrey, 7, and daughter Jessica, 10, to the Halton Hills Public Library for some reading time during last week's storm. (Herald Photo by Steven LeBlanc)

**Robbie Burns month**

January is Robert Burns month at The Arthritis Society. From the first strains of "Auld Lang Syne", the Burns song that traditionally ushers in the New Year, through the festivities of Burns Night celebrated world-wide to commemorate the poet's birth on January 25, 1759, The Arthritis Society honours Scotland's national bard.

During The Arthritis Society's Blitz to raise money for arthritis research, patient care, and public education, Robbie Burns is remembered as the poet whose genius was cut short at the age of 37 by rheumatic heart disease, a form of arthritis.

Today close to four million Canadians -- one in seven -- have some form of rheumatic disease and tens of thousands of additional cases are diagnosed each month. Rheumatic disease, more commonly known as arthritis, is a general term for acute and chronic conditions characterized by inflammation, soreness and stiffness of muscles, and pain in joints and associated structures.

Rheumatoid arthritis alone affects as many as 500,000 people and more than a million Canadians have osteoarthritis serious enough to warrant the care of a physician. As well, thousands of children under the age of 16 have arthritis or an arthritis-related problem.

The costs of arthritis are enormous and include far more than just hospitalization, physicians' visits and therapeutic services. Current estimates put the costs of the various forms of arthritis to Canada at nearly \$2 billion annually. Impossible to assess are the social and emotional costs to people with arthritis and to their families.

Well aware that he had rheumatic disease, Burns wrote in January of 1796, the year of his death, "I have late drunk deep of the cup of affliction...the victim of a most severe rheumatic fever. For the last three months I have been tortured with an excruciating rheumatism which has reduced me to nearly the last stage. Pale, emaciated, so feeble as occasionally to need help from my chair, my spirits fled!"

It was to be, however, 130 years after his death, before the poet's affliction was publicly recognized. Sir James Crichton-Browne of Dumfries, Scotland, where Burns died, first suggested in 1926 that death was caused by the complications of chronic rheumatic heart disease. In the ensuing 65 years various medical professionals have debated the posthumous diagnosis.

Doctors W.W. Buchanan and W.F. Kean, both rheumatologists in the Department of Medicine at McMaster University Medical Centre in Hamilton, Ontario, discuss the poet's terminal illness and possible causes of death in a paper written by them in 1982 for the Scottish Medical Journal.

"A careful review of Robert Burns' terminal illness, especially as documented in his correspondence," observe Buchanan and Kean, "supports the widely held contention that death may have been due to subacute bacterial endocarditis secondary to chronic rheumatic heart disease."

Today, thanks to research, rheumatic heart disease no longer poses the danger that it did to Burns. However, rheumatic diseases, including rheumatoid arthritis, osteoarthritis, systemic lupus erythematosus, and gout, are common. So too are juvenile arthritis, ankylosing spondylitis, psoriatic and scleroderma.

The Arthritis Society is the only non-profit organization in Canada devoted solely to funding and promoting arthritis research, care, and education. The Society was established in 1948 to search for what causes, and what will cure, arthritis. Since then, dependent almost exclusively on the public for the necessary funds, we have channelled some \$60 million in donations toward finding the solutions.

Annually, in Ontario, The Arthritis Society budgets just over two thirds of our public funds to support research and manpower development. Program development, education and information, and fund raising consume 28 per cent of public funds, and administration accounts for five per cent.

**Kick the habit during national non-smoking week**

By BARBARA RIEGER  
Adapted from material developed by the New Brunswick Department of Health and Community Services

National Non-smoking Week is January 20-26, 1992 so what better a time for us to reflect on our attitudes and knowledge about tobacco usage and tobacco sales to minors.

We all know how hard it is to quit smoking. That is why an important key to solving the smoking problem is cutting it off at the beginning, before young people start. Virtually all smokers start smoking before the age of 20. By the time young people get into their 20's, between 40 and 50 per cent of them are smoking. A quarter of a century after health authorities officially proclaimed that smoking kills, cigarettes are still popular among Canada's youth.

Why are health messages not getting through to some young people? For one thing, teenagers generally feel so healthy that illness is far from their minds. As well they can not look far enough ahead to think of being ill or dying in middle age. This is not something that will happen to them. Teenagers also want to fit in, to be accepted. For some of them, smoking makes them feel more like part of the group. If their friends smoke, they are more likely to smoke.

Many adolescents believe that most adults smoke and they want to be seen as "cool", more adult. Tobacco advertising hits at this adolescent need. Cigarette advertisements, which are still found in some stores, make smoking look sexy, glamorous and even healthy. Another reason is addiction. Many young people start to smoke thinking that they will be able to quit when they get older. In fact many become thoroughly hooked while teenagers, then when they leave school and have

more time on their hands when they can smoke, find their cigarette consumption increasing rather than decreasing. The addiction grows.

Most smokers plan to quit but many never get around to it. Because of a youthful mistake many smoke all their lives. Their lives are often cut short by a heart attack, cancer or other smoking related diseases. Every year 35,000 Canadians die prematurely because they smoked. And every year, despite the best efforts of many people, the cigarette clock starts ticking for thousands of young people.

So this is what we are up against, we will call it the four "A's".

Adolescence: This is the stage when teens feel the need to take risks, to rebel a bit, a stage where they cannot see the consequences.

Acceptance: Adolescents seek acceptance and approval from their friends and they will do some strange things to get this, including smoking.

Advertising: Ad's in stores, and still some magazines, tell kids that smoking is a "cool" thing to do.

Addiction: Dependence on cigarettes can develop very quickly.

To the big four A's, we add a fifth- Availability. For over a century cigarettes have been widely available. Our casual way of selling tobacco began in the days when it was not known to be harmful. Today, despite a growing body of knowledge about smoking and illness, society has not changed its way of treating tobacco products. Cigarettes and tobacco products are sold in stores with wholesome products like milk and bread. This makes it very difficult to think of tobacco as a drug product. In addition, tobacco products are prominently displayed and hard to escape.

Traditionally, they are sold to children buying for adults and too often to young people buying for themselves. No other dangerous, addictive drug is treated in this casual manner. Preventative information and programmes are not enough. We need to change the environment; we need more community involvement if our children are to grow up smoke free.

The challenge is to heighten the awareness in the community to the point where smoking is understood to be a dangerous drug addiction, where smoking is seen to be something done by the minority of adults and where cigarettes are finally treated as a drug product. In doing this, we will create an atmosphere in which children are strongly supported in a non-smoking decision.

Many parents feel somewhat powerless, as their children become teenagers, in affecting their decisions. But parents do have influence. Whether a smoking or non-smoking parent here are ideas on how to influence your children.

- If you smoke, adjust your smoking habits to help educate your children, for instance, by creating smoke-free areas of your home.

- Never send children to the store to buy cigarettes.

- Support stores that do not sell tobacco products.

Parents need to be aware that the Federal Tobacco Restraint Act prohibits anyone under the age of sixteen from smoking or chewing tobacco on a street or in a public place or have in his/her possession whether for his/her use or not tobacco products.

Along with raising awareness among parents and creating support for curtailing sales to young people, it is important to create an awareness among retailers about the Provincial Minor's Protection Act and about the addictiveness of tobacco.