

Ask The Professionals

Send your questions for any of these professionals:
"Ask the Professionals"
 Independent & Free Press,
 280 Guelph St., Unit 29, Georgetown L7G 4B1

GEORGETOWN PHYSICAL AND SPORTS THERAPY CLINIC

(905) 877-8668



83 Mill St., Suite B
 Georgetown, Ont.
 L7G 5E9



Marta Masley
 B.Sc.(PT), M.C.P.A.

Q: I took a fall while downhill skiing, resulting in a serious knee injury. I've been told that I have a partial-to-complete tear of the ACL. Will I require surgery for this?

A: The anterior cruciate ligament (ACL) is a relatively weak structure that runs from the thigh bone (femur), to the shin bone (tibia), preventing the tibia from displacing forwards from the femur and preventing hyper-extension of the knee joint. ACL injuries are common in skiing, due to the high and stiff nature of the ski boot and the propensity for falling while skiing. Depending on the extent of damage to your knee, surgery may or may not be indicated. Often other structures in the knee are also damaged during such an injury. Ultimately, pain, stability and function are the determinants of the necessity of surgery. The stability of the knee joint depends upon the strength of the surrounding muscles and ligaments. This is why the initial course of treatment after a knee injury is to decrease swelling and increase stability, possibly with a brace or just strengthening. The most important muscle to strengthen in the knee with ACL damage is the hamstrings, since this group of muscles act to stabilize the knee in a similar way as the ACL. If sufficient stability cannot be attained with an aggressive strengthening program, then surgery is usually required.

ROSS PHYSIOTHERAPY SOLUTIONS

Practical solutions for peak performance
905-873-7677

318 Guelph St., Georgetown
 Indoor Mall next to Harveys



GERALD ROSS
 H.B.Sc. PT, MCPA, res.CAMT

Q: Since my kids have gotten a bit older I have tried to get back into shape but I can't stay on a routine because I keep getting injuries. Why?

A: The pain and disability of injuries sometimes goes away on their own, but sometimes the healing is only good enough for basic day to day activities and if by coincidence life does not require more than basic movements the symptoms will lie dormant. In these cases the pain will resurface the first time you work the old injury in a new way. In addition the body will automatically adjust how it moves in such a way that the sensitive area doesn't have to work as hard. This causes the pain to lessen or go away, but the injury isn't completely healed either. Not only that but the joints and muscles that are compensating often become painful from overuse. Sorting out these problems takes training and practice. By taking a detailed history and conducting a thorough orthopedic examination we sort out what is sore, why it's sore and what needs to be done to allow you to reach your goals. Relating this information to you in easy to understand terms will help to put you in control of your health and get your life back on track.

Elayne Tanner & Associates Inc.



Elayne M. Tanner

Elayne M. Tanner
 B.A., B.S.W., M.S.W., R.S.W., DIP. SOC. ADM.
Counselling & Psychotherapy

Milton **905-854-0801**
www.etasolutions.com

Q: I just noticed cuts on my daughter's arm and upper thigh. She admits to self-harming. Is this a mental illness or a suicide attempt? What should I do?

A: While self-harm is neither a mental illness nor a suicide attempt, it can cause serious problems. The root causes should not be ignored. Self-harm can take many forms such as burning or cutting and can result in shame or guilt, serious accidental injuries or even suicide. The behaviours, if not treated can become very entrenched. Self-harm behaviours are unhealthy coping mechanisms for overwhelming feelings. Sometimes the person doing it doesn't seem to feel the pain. Sometimes the pain makes them feel alive. Whatever the reason, it is not a good way to deal with life and is best stopped as soon as possible. It is often very difficult to stop self-harming without help. Treatment includes psychotherapy (talk counselling), medication for the anxiety and depression that often triggers self-harm, and rarely, psychiatric hospitalization to provide temporary safety. As the parent of a self-harming child, do not threaten or try to understand how to stop this behaviour, but rather, help your daughter find someone she can trust with this secret. This person will help her understand the behaviour, get to the bottom of why she is doing this and explore healthy coping techniques that will replace the dysfunctional ones. This person can be a family doctor who will likely recommend counselling or a counsellor such as myself, who will work with the practitioner if desired. Although self-harming behaviour is not usually life threatening, it should not be ignored. At the same time, you must remain calm in your approach and not turn this into a crisis so that your daughter goes back into hiding.

"HELPING YOU HELP YOURSELF."

Halton Hills Speech Centre

211 Guelph St., Suite #5
 Georgetown L7G 5B5

905-873-8400 www.haltontspeech.com



Karen MacKenzie-Stepner

Q: I am a teacher and have been having difficulties with my voice lately. I was told that voice problems are common in the teaching profession. Is this true and what can you do for it?

A: Elementary and secondary school teachers represent the largest group of professionals who use their voice as a primary tool of trade. Recent epidemiological evidence from the US has confirmed that voice disorders are a common occupational hazard of teaching school, with 11% of teachers reporting a current voice disorder and 58% experiencing a voice disorder during their career. Furthermore, these voice disorders adversely affect job performance and attendance, with 43% of teachers having to reduce classroom activities and 18% of teachers missing work on a yearly basis because of voice-related problems. One explanation for the increased frequency of voice disorders in teachers relates to the voice demands of teaching school. Our voice is made when our two vocal cords come together and vibrate making sound. The louder the voice, the stronger the vocal cords come together. Think of clanging cymbals. Vocal cord injury can occur if a critical "vibration dose" is exceeded. Many teachers speak loudly for long periods without sufficient time for the vocal cords to recover. Randomized clinical trials over the last 4 years in the US with voice researchers from several institutions found that teachers who received resonance therapy and/or used a portable voice amplification system had much better results. Resonance therapy involves training the teacher to produce voice with a "forward/frontal tone focus" which accentuates mid-facial vibratory sensations and helps the teacher achieve a strong voice with minimal vocal cord impact stress. For more information and / or to inquire about resonance voice therapy, please call Halton Hills Speech Centre at 905-873-8400.

RBC Dominion Securities

905-450-1850

Email: barbara.byckowski@rbc.com



Barbara Byckowski
 Investment Advisor, BBA,
 PFP, CFP

Q: Every year at this time, I look to reduce my tax payable. What ideas do you have?

A: Maximizing your unused RSP contribution will assist in reducing your tax payable. We have some additional ideas to reduce tax payable which must all be actioned by December 31, 2007 for the 2007 tax year.

- Making charitable donations before year-end can create tax savings of approximately 25% on the first \$200 donated and up to 50% on the remainder of the donations in the year. Strategies involving the donation of securities "in kind" are very tax efficient. Feel free to give me a call for more details or an information article.
- An investment tax shelter i.e. limited partnership or flow-through shares can create tax deductions to significantly reduce your taxes payable, however not all tax shelters are created equal so you need to do your homework. Quality offerings are available now in the early part of the year and you need to assess the upside of the tax deduction against the downside potential of the investment. Again, feel free to give me a call to discuss further 905-450-1850.

RBC Dominion Securities Inc.* and Royal Bank of Canada are separate corporate entities which are affiliated. *Member CIPF, @Registered trademark of Royal Bank of Canada. Used under licence, RBC Dominion Securities is a registered trademark of Royal Bank of Canada. Used under licence. ©Copyright 2007. All rights reserved. Barbara Bickowski is an Investment Advisor with RBC Dominion Securities Inc. Member CIPF
 This article is for information purposes only. Please consult with a personal advisor before taking any action based on information in this article.
 Barbara can be reached at 905-450-1850.



ACCOUNTANT on MAIN

52 Main St. S., Georgetown
 905-877-7200

Email: jgh@accountantonmain.ca
 Website: www.accountantonmain.ca



Judith L. Grant-Horner, CA

Q: I operate a daycare business from our home and my husband is an employee for a company earning a commission with his salary. We know that we have deductions that we could be taking to reduce our income tax liability, but the tax rules seem so confusing to us. There must be an easier way or are we just destined to be burdened because we simply don't know how to manoeuvre through the tax entanglement.

A: First of all, it does not have to be confusing and if it is, then your tax preparer has not taken the time to explain it in laymen's terms. Generally, all business expenses incurred with an expectation to generate a profit are tax deductible. This means for the daycare business, items such as food, toys, and supplies for the children are deductible. A portion of the home expenses is tax deductible for certain. I recommend tracking your mortgage interest expense, property taxes, utility costs, repairs and maintenance, and insurance. Remember to include mortgage insurance as well as property insurance. These expenses are taken as a percentage of business use versus personal use. It is how you calculate this usage that determines the tax deduction you will take against the daycare income. There are a number of ways to calculate this and an experienced chartered accountant will maximize the deduction for you. With respect to your husband, generally he can take advantage of deductions for vehicle expenses such as fuel, insurance, maintenance and repairs, and interest expense or lease payments. He could deduct cell phone use related to business, supplies, and meals and entertainment expenses. There are more deductions available depending on his specific situation. A knowledgeable tax expert should be discussing with you deductions such as this and much more.

SUSAN S. POWELL

BARRISTER & SOLICITOR

FAMILY LAW

350 Rutherford Rd. South, Suite 320
 BRAMPTON, ON L6W 3M2
905-455-6677



Susan S. Powell

Q: My husband and I have decided to separate. Our 15 year old son wants to live with my husband but our younger daughter wants to live with me. My husband says he doesn't have to pay me child support if we each have one child living with us. Is this true? His income is much higher than mine.

A: Split custody is where one child lives with each parent and the other parent has access. In these cases the Child Support Guidelines set out the amount a person would pay for child support for one child based on their income. These amounts are then set off against each other to determine the set amount, for example, if your husband's income is \$50,000 per year, he would pay you \$429.00 per month. If your income is \$25,000 per year, you would pay him \$222.00 per month. These amounts are set off so you would receive from your husband \$207.00 per month.

move

Activity & Motion Clinic

Chiropractic Care - Massage Therapy
 - Personal Fitness Training

116 Guelph Street,
 Georgetown Ontario
 Telephone (905) 702-1072



Q: Now that the warmer weather is here, I would like to start a fitness program. How do I get started?

A: Spring is on its way. With warmer weather and longer days, spring is a great time to renew your commitment to a healthy lifestyle and exercise is one of the components of a healthy lifestyle. A great way to start is to make some promises to yourself and set some goals. You will need some long term goals to keep you motivated. These could be: I want to walk for 3 miles without stopping, or I want to walk up a flight of stairs without becoming winded, or I want to be able to play soccer with my kids this summer. Find one that works for you. Spring is a great time to put exercise into your day to day activities. Gardening, a wonderful form of exercise is rewarding on many levels. Start to walk the kids to school, get your bike out this spring along with the kids and learn to ride again. Park your car and walk farther to the grocery store. Start a walking group with some friends. Small changes in your daily routines will help with the big picture. Enjoy the spring and get outside and get moving.

HERITAGE
 orthodontics
 103-83 Mill Street, Georgetown Ontario L7G 5E9
 905-873-1066 drselnes@heritageorthodontics.com
www.heritageorthodontics.com



Dr. J. Eric Selnes
 Orthodontist

Q: When do my children have all their teeth?

A: Dental eruption times vary considerably between children and particularly between boys and girls. The "baby teeth" are 20 in number and should start to erupt at 8-10 months of age. The front teeth (incisors) will erupt first with the second primary molars erupting by 27-29 months of age. The "adult teeth" begin erupting with the first permanent molar at 6 years of age. The front teeth (central and lateral incisors) start to erupt into the mouth between 6-8 years of age. At this point, the children will have 12 permanent teeth and 12 baby teeth. Very little tooth eruption takes place now until about 10-12 years of age when the kids will sequentially lose their remaining baby teeth until there are 28 permanent teeth present. The wisdom teeth (3rd molars) usually appear at 16-20 years of age. Often, because of the timing of the pubertal growth spurt, you may see two or more years difference between girls and boys of the same age, with the girls developing earlier. Many children have delayed eruption of their teeth. This can be normal or problematic but it does NOT make their teeth stronger. Earlier eruption of teeth may require earlier treatment while late eruption may postpone treatment until more adult teeth have erupted. We always advise you to see your Dentist and Orthodontist to monitor tooth eruption along with growth and development of your kids.