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## Support for Ontario's doctors

Editorial note: Following is a letter addressed to the Premier of Ontario.

Dear Mr. (David) Peterson,

It is with great concern and after considerable thought that I feel it necessary to inform you of my opposition to your attempts to stop extra-billing by the doctors of our province.

This is, and I suspect most will agree, not a question of finances but rather your government's attempts to bring the medical profession into the realm of the civil service. I have come to this conclusion based on several unexplained and misrepresented facts upon which you have organized your argument to gain the support of the uninformed public.

Firstly, upon what statistics has the amount of \$50 million been based? It is my understanding that this money is not reported by the patient? How unbelievable it would be to think that this commotion and time has been devoted to an issue involving comparatively very little. It is my suspicion that this figure has been "pulled out of a hat".

Secondly, in your attempts to undermine the public's faith in their physician and question the integrity of this profession, you have misled them into believing that it is only a matter of time before health care will be denied if you can't "pay cash up front". To my knowledge, and I would be very surprised if you had evidence to the contrary, no person in Ontario, or Canada for that matter, has been denied necessary health care because of personal finances.

Thirdly, if only 12 per cent of the doctors do extra-bill, I have a choice to pay the additional amount or to find another physician. The "amounts" in question are not usually more than the cost of smoking a pack a day for one month. Our population is in no way threatened by this situation and it is a very irresponsible government which would use their position and power to threaten people's security and well-being by creating unsubstantiated fears and doubts.

Finally, is it not also a matter of selective discrimination when one group is denied choice of action permitted by another?

To ensure easy votes, your government has chosen to attack a group which is small in number but highly visible to the public. As you are well aware your claim to reduce health care costs by this action is simply not true.

We, in Ontario, must not stand by and with our silence give support to any government which plans to withhold basic civil rights and freedom to a selected group. Must I remind you Mr. Peterson of the similarity of your government's selective propagandizing with other notorious governments in history?

If this bill is passed, you will certainly go down in Canadian history as the man who instigated the collapse of one of the best health care services in the world. This is not a legacy I wish to leave my children and their children after them.

I strongly urge anyone who has ever felt a moment of gratitude to their physician to write or call your office to voice their support for the fight against oppression and discrimination.

With Greatest Concern,  
Lynn Wilson,  
R.R. 2,  
Midland, Ont.

## Wilfred Quesnelle

The late Wilfred (Puss) Quesnelle of Seventh Street, Midland, died in Penetanguishene General Hospital on March 24, 1986, following a lengthy illness, at the age of 65 years.

Mr. Quesnelle was born, and lived most of his life, in Penetanguishene. He had been a resident of

Midland for the last 20 years.

His funeral mass was held in St. Ann's Memorial Church, Penetanguishene, on March 26, with Rev. L. Dignard as the celebrant, assisted by Rev. W. Manne. Spring interment will be in St. Ann's Cemetery, Penetanguishene.

Sons Paul, John and James Quesnelle, sons-in-law Bob and Don Armstrong, and brother Bernie Quesnelle were his pallbearers.

His wife Lena (Pauze)

### \$50,000 grant request received

Austin Matthews and James Worts, representing the Midland YMCA, have been told by the Town's finance and general government committee that the YMCA request for \$50,000 will be considered when the 1986 municipal budget is being assembled.

Minutes of the meeting of the YMCA representatives with the committee include the information that 63 percent of the YMCA's members live in Midland, and that Collingwood,



## Just another four goal game

Wally Boyer of the Midland Over 45's Old Timers was awarded the player of the game award after Midland's final game victory in their Oldtimers

tournament held last weekend at Centennial Arena. Boyer tallied four times to help Midland capture the D Division title.

## Lung cancer not fiction

Medical experts predict that by 1987, lung cancer will be the leading cause of cancer death among women, and that by the year 2000, lung cancer death rates for women may equal those for men.

In the past 10 years, women's death rates have doubled for lung cancer and the reason is smoking - which is attributed to approximately 85 percent of all lung cancer cases.

Twenty-eight percent of Canadian women smoke. Since 1970, the percentage of women considered heavy smokers (consuming over 25 cigarettes per day) has increased 57 percent.

**Health Risks to Women**  
According to the Canadian Lung Association, women who are heavy smokers have nearly three times

as much emphysema and bronchitis, about 75 percent more chronic sinusitis, 50 percent more peptic ulcers, and lose almost twice as many days from work or school compared to women who do not smoke.

But women also face different health risks than men. For example, the combination of smoking and oral contraceptives increases the risk of coronary heart disease 10 times and the risk of stroke 20 times. Manufacturers of oral contraceptives now put warning about the potential dangers on their packages inserts.

In addition, women who smoke not only jeopardize their own health but that of their unborn child. The risk of miscarriage, stillbirth, and premature delivery are significantly higher when a woman smokes. Furthermore, babies born of smokers are, on the average, lighter at birth and tend to develop more complications during the early weeks following birth.

**Fear of Weight Gain**

One of the most common excuses used by women who smoke is the fear of weight gain. Research shows that weight gain does not have to go hand-in-hand with quitting smoking. "In fact, among persons who give up smoking, only one-third gain weight," says Dr. Peggy Russell, a leading health educator and smoking cessation expert from the University of Pittsburgh. "Another third maintain the same weight while the remaining third actually lose weight because they feel better and exercise more."

Dr. Russell believes that smoking is one of the most difficult health

habits to change - but that women may face a particularly hard challenge. "Women smoke to regulate negative affect - that is reduce anxiety and anger - while men tend to smoke for pleasure and stimulation," she says.

### Overcoming Nicotine Addiction

Numerous smoking cessation treatments are available but Dr. Russell feels they do not address a central issue for many smokers - nicotine dependence.

"Few people realize that cigarette smoking is considered a form of addiction and that nicotine is an addictive substance. The addictive nature of cigarettes can cause considerable difficulty for heavily dependent smokers trying to quit," she explains.

The solution for heavily dependent smokers is to slowly wean themselves away from nicotine without developing withdrawal symptoms. smokers can then deal with the psychological problems associated with their smoking habit.

According to Dr. Russell, help is available in the form of Nicorette, a nicotine chewing gum. Nicorette is available by prescription only and can help smokers cope with the symptoms of nicotine withdrawal such as headaches, irritability and sleeplessness.

If you are having difficulty in quitting, consult your family physician. He or she can advise you on the best smoking cessation treatment to suit you. Or, contact your local cancer society, lung association or heart foundation. They each have programs designed to help people quit smoking.

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