

**Alcohol and Select Medications as Fall Risk Factors In Community
Dwelling Older Adults in Canada**

Appendices

by

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**Appendix A: Anti-Psychotics, Anti-Depressants
and Anti-Hypertensives Medications**

Medication (Generic Name)	Treatment	Side Effects	Brand Name
Short-acting benzodiazepines		Effects are typically felt within in 1 hour of administration and stay in the body for less than 24 hours (Tamblyn et al., 2005) Common side effects across all short-acting benzodiazepines: sedation, dizziness, decreased neuromuscular function; cognitive impairment.	
Lorazepam	Anxiety	Drowsiness, dizziness, fatigue, blurred vision, muscle weakness, poor balance, forgetfulness, trouble concentrating, nausea, vomiting, constipation	Ativan
Oaxzepam	Anxiety	Drowsiness, dizziness, forgetfulness, trouble concentrating, slurred speech, headache, nausea, vomiting, constipation	Serax
Temazepam	Insomnia	Dizziness, daytime drowsiness, forgetfulness, muscle weakness, poor balance, headache, blurred vision, depression	Restoril
Alprazolam	Anxiety	Drowsiness, forgetfulness, slurred speech, muscle weakness, poor balance, depression	Xanax
Triazolam	Insomnia	Dizziness, daytime drowsiness, poor balance, headache, depression, forgetfulness	Halcion
Long-acting benzodiazepines		Effects are felt typically within 1 hour of administration and stay in the body for longer (> 48 hours) (Tamblyn et al., 2005). Common side effects across all long-acting benzodiazepines: sedation, dizziness, decreased neuromuscular function; cognitive impairment.	

Clonazepam	Anti-seizure	Drowsiness, fatigue, dizziness, loss of memory, slurred speech, dry mouth, nausea, constipation, diarrhea, blurred vision, Headache	Rivotril
Flurazepam	Insomnia	Dizziness, day time downiness, headache, confusion	Dalmane
Diazepam	Anxiety Alcohol withdrawal	Memory loss, drowsiness, dizziness, muscle weakness, nausea, constipation, dry mouth, slurred speech, blurred or double vision	Valium
Nitrazepam	Insomnia	Day time sleepiness, reduced alertness, dizziness, confusion, headaches, muscle weakness, poor balance	Nitrazadon
Chlordiazepoxide	Anxiety Alcohol withdrawal	Dizziness, drowsiness, nausea, vomiting, constipation, blurred vision	Librium
Anti-depressants		Common side effects across all anti-depressants: may cause orthostatic hypotension	
<i>Selective Serotonin Reuptake Inhibitors (SSRI)</i>			
Citalopram	Depression	Drowsiness, dizziness, anxiety, feeling shaky, nausea, constipation, changes in weight	Celexa
Escitalopram	Depression	Drowsiness, dizziness, sleep problems, anxiety, feeling shaky, nausea, constipation, heartburn, changes in weight, decreased libido	Ciprallex
Fluoxetine	Depression Obsessive Compulsive Disorder (OCD)	Sleep problems, headache, dizziness, feeling shaky, anxious, nausea, upset stomach, vomiting, loss of appetite, dry mouth	Prozac

Sertraline	Depression Anxiety OCD Panic disorder	Drowsiness, dizziness, nausea, upset stomach, constipation, dry mouth, sleep problems, changes in weight or appetite, decreased libido	Zoloft
<i>Tricyclic Anti-depressants</i>		Confusion, drowsiness, blurred vision, can cause orthostatic hypotension	
Amitriptyline	Depression	Constipation, diarrhea, nausea, vomiting, upset stomach, changes in appetite and weight, decreased libido	Elavil
<i>Anti-hypertensives</i>		Common side effects across all anti-hypertensives: postural hypotension, sedation	
ACE Inhibitors	Relax blood vessels, allowing for blood to flow through	Postural hypotension, persistent dry cough, dizziness, fatigue, skin rash, headaches	
Fosinopril		Postural hypotension, less urination	Monopril
Ramipril		Dizziness, fatigue, cough, nausea, vomiting	Lopace
<i>Thiazide Diuretic</i>	'Water pills' to eliminate excess bodily fluid	Hyperglycemia, increased urination, feeling thirsty, dizziness, orthostatic hypotension	
Hydrochlorothiazide		Light headedness, dizziness, loss of appetite, nausea, vomiting, muscle spasms	Microzide
<i>Beta Blockers</i>	Relax blood vessels, allowing for blood to flow through	Postural hypotension, dizziness, fatigue, cold hands or feet, low heart rate, diarrhea, nausea	
Atenolol		Constipation, cold hands or feet, blurred vision, dizziness, fatigue	Atenolol
Metoprolol		Blurred vision, confusion, dizziness, fatigue	Metoprolol

<i>Calcium Channel Blockers</i>	Relax blood vessels, allowing for blood to flow through	Postural hypotension, swollen ankles, constipation, dizziness or tiredness, headaches	
Diltiazepam		Dizziness, headaches, nausea, skin rash	Diltiazepam
Amlodipine		Dizziness, fatigue, stomach pain, nausea, flushing	Amlostine
<i>Angiotensin-II Receptor Antagonists</i>	Relax blood vessels, allowing for blood to flow through	Patients do not typically experience side effects, but those who do experience: Dizziness, headaches, cold and flu-like symptoms	
Candesartan		Cold and flu-like symptoms, back and joint pain, stomach pain, diarrhea, fatigue, dizziness	Amias
Olmesartan		Dizziness, diarrhea, weight loss, cold and flu-like symptoms	Olmotec

Personal Information

1. What is your age?_____

2. What is your gender?

Male

Female

Transgender FTM (female-to-male)

Transgender MTF (male-to-female)

Non-binary/gender fluid/genderqueer

Prefer not to say

Prefer to self-describe (please specify):

3. Do you identify as a member of the LGBTQ community?

Yes

No, but I am an Ally

No

Prefer not to say

4. Are you a member of an organization catering to older adults (e.g., Canadian Association of Retired Persons, Royal Canadian Legion)?

Yes_____ No_____

5. What City and Province do you live in?

City_____

Province_____

11. Do you find your job is mentally tiring? Yes _____ No _____

12. Are you currently volunteering? Yes _____ No _____

13. What type of accommodation are you living in?

House _____ Apartment/Condo _____

Retirement Home _____ Long-Term Care _____

14. How long have you been living in your accommodation?

15. Do you live....

___ alone

___ with spouse or partner

___ with family members

___ with roommates (not related)

Mobility, attitudes and behaviours

16. How often do you use these modes of transportation for each of the following trip purposes?

	As a passenger (all types of vehicles), cyclist or pedestrian			As a driver of a car or other four-wheel motor vehicle			As a driver of a two-wheel motor vehicle		
	Never	Occasionally	Once a week or	Never	Occasionally	At least once to	Never	Occasionally	Once a week or
Visit your family or your friends									
To do your family or friends a favour (accompany someone)									
To get to your leisure activities: athletic clubs, cinema, seniors clubs									
To get to your political or associative activities									
To do your errands, your administrative tasks									
Do a long drive (more than 2 hours)									
To get to work									

17. How many kilometers a week do you do by **bike**? (enter 0 if you do not use the means proposed)

_____ km/week

18. Do you use an electric bike? Yes No

19. When you are traveling by bike do you wear a fastened helmet on your head?

- Never Occasionally Fairly often Always
 I never bike

20. Over the last 10 years, have you had a **physical injury** by bike? (a **physical injury** is an accident which required at least one medical consultation for you; a road traffic **accident** implies at least one moving vehicle: bike, motorcycle, car;)

- Yes No

If yes,

How many accidents? _____

What kind of accident(s)? (check all that apply)

- Road traffic
 Falling off a bike
 Pedestrian collision

Other: _____

In which year did the latest accident occur? _____

21. How many kilometers a week do you travel on **foot**? (enter 0 if you never walk)

km/week

22. Over the last 10 years, have you had a **physical injury** while you were a **pedestrian**? (fall on a sidewalk)

- Yes No

If yes, How many accidents? _____

In which year did the latest accident occur?

23. Do you have a driver's license? Yes No

If yes, are you currently driving? Yes _____ No _____

24. What year did you obtain your license? _____

25. You currently drive (mark all that apply)

- A car
- A van
- A truck
- A motorbike

Other :

I no longer drive

└─→ Please specify the year you stopped driving:

If you answered « I no longer drive », please go directly to the "Health" section on page 6. Thank you.

If you drive a commercial vehicle, please continue. Otherwise, please go directly to question 35. Thank you.

26. Have you ever had a commercial driver's license?

Yes _____ No _____

If yes, what type of commercial truck do, or did you drive?

27. Do you currently work or have you worked for a truck company?

Yes _____ No _____

28. Are you working as a self-operating/independent owner?

Yes _____ No _____

29. If you are currently driving a truck, how many hours do you drive per day? _____

30. In the last month, how many days did you sleep overnight away from home, excluding vacation days? _____

31. How would you describe your financial resources to meet the costs of operating a commercial, or your own personal vehicle (maintenance, parking, tolls, insurance)?

Very insufficient Insufficient Sufficient

32. In the last 12 months, how many kilometers have you driven in your occupation as a driver? As a help, you can estimate the mileage of a typical week, multiply by 52 and subtract any vacation weeks taken (enter 0 if you do not use the vehicle type listed).

Car, truck, van _____ km per year

Motorbike _____ km per year

33. Do you currently drive to work? Yes _____ No _____

34. Do you drive to work during morning rush hours (7 to 9am)?

Yes _____ No _____

40. Check the box that best corresponds to your **level of skill** when driving:

- I drive very **poorly** I drive very **well**

41. Check the box that best corresponds to your **level of caution** when driving:

- I do **NOT** drive carefully I drive very **carefully**

42. In the **past 12 months**, have you driven after drinking too much alcohol?

(diminishing your driving ability)

- Never
- Yes, a few times a year
- Yes, about once per month
- Yes, about once per week
- Yes, more often than once a week
- Prefer not to answer

43. In the **past 12 months**, have you driven while tired?

- Never
- Yes, a few times a year
- Yes, about once per month
- Yes, about once per week
- Yes, more often than once a week
- Prefer not to answer

44. Compared to other drivers, do you think that you have:

- A **greater** risk of having a traffic accident
- An **equal** risk of having a traffic accident
- A **lower** risk of having a traffic accident

45. Have you had any crashes in the past year (in which you were the driver)? Yes_____ No_____

a) If yes, how many? _____

b) How have the crash(es) affected you?

- Physically (e.g., required physiotherapy or massage)
- Mentally (e.g., saw a counsellour)
- Financially (e.g., increased insurance)
- Scared to drive
- More cautious driver
- Required hospitalization
- Unable to drive for a few months' after
- No affect

46. To date, how many demerit points do you have on your driver's license (maximum 12)?

Points

47. In the **past 12 months**, have you had at least one ticket for:

- | | | |
|-----------------|--------------------------|--------------------------|
| i. Speeding ? | <input type="checkbox"/> | <input type="checkbox"/> |
| | No | Yes |
| ii. Parking ? | <input type="checkbox"/> | <input type="checkbox"/> |
| | No | Yes |
| iii. Alcohol ? | <input type="checkbox"/> | <input type="checkbox"/> |
| | No | Yes |
| iv. Cellphone ? | <input type="checkbox"/> | <input type="checkbox"/> |
| | No | Yes |

- v. Signage (traffic light, white stripes)? No Yes
- vi. Other ? No Yes

Specify : _____

48. If you have received a ticket for speeding, cell-phone use etc. ? Did the police officer reduce the fine at the scene ? Yes
No

49. If you received a ticket and attended a court of law, was your fine reduced ?
Yes No

If yes, which ticket was the reduced fine related to?

50. Do you drive **faster** than other drivers?

Never Sometimes Often Always

51. Do you drive **slower** than other drivers?

Never Sometimes Often Always

52. Does speed scare you? Yes No

53. Are you the victim of other drivers poor behaviour when you're driving?

Never Sometimes Often Always

If yes, does this affect you? Yes No

a) How have the crash(es) affected you?

Physically (e.g., required physiotherapy or massage)

- Mentally (e.g., saw a counsellour)
- Financially (e.g., increased insurance)
- Scared to drive
- More cautious driver
- Required hospitalization
- Unable to drive for a few months' after

54. When you are driving, do you ever:

	Never	Sometimes	Often	Prefer not to answer
Answer a phone call?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Call someone?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compose a text message?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Surf the internet ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handle the GPS ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

55. Check the box above the driving situations you find **difficult** (multiple answers possible)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City	Bad weather	Overtaking	Changing lanes	Night
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glare	Left turns	Heavy traffic	Large intersection	Long trip
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driving alone	Unknown route	Tight parking space	Estimating distance	Roundabout
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other (please specify):		
Highway	Reverse gear			

56. If possible, do you try to avoid any of these driving situations? (Check all that apply).

1. Night	<input type="checkbox"/>
2. Dawn or dusk	<input type="checkbox"/>
3. Bad weather conditions (in general)	<input type="checkbox"/>
4. Heavy rain	<input type="checkbox"/>
5. Fog	<input type="checkbox"/>
6. Nighttime driving in bad weather (e.g., heavy rain)	<input type="checkbox"/>
7. Winter	<input type="checkbox"/>
8. First snow storm of the season	<input type="checkbox"/>
9. Trips lasting more than 2 hours (one way)	<input type="checkbox"/>
10. Unfamiliar routes (different areas) or detours	<input type="checkbox"/>
11. Heavy traffic or rush hour in town	<input type="checkbox"/>
12. Heavy traffic or rush hour on the highway (or expressway)	<input type="checkbox"/>
13. Making left hand turns with traffic lights	<input type="checkbox"/>
14. Making left hand turns with <u>no</u> lights or stop signs	<input type="checkbox"/>
15. Parking in tight spaces	<input type="checkbox"/>
16. Highways with 3 or more lanes and speed limits of 100km/h or more	<input type="checkbox"/>
17. Changing lanes on a highway with 3 or more lanes	<input type="checkbox"/>
18. Two-lane highways	<input type="checkbox"/>
19. Rural areas at night	<input type="checkbox"/>
20. Driving with passengers who may distract you	<input type="checkbox"/>
21. No : I don't try to avoid any of these situations	<input type="checkbox"/>

57. What is your driving comfort level when driving at night and in the rain (on a scale of 0, 25, 50, 75, 100%)?_

 0% 25% 50% 75% 100%

58. Have you ever considered stopping driving? Yes
No

59. If yes, for what reason(s)? (multiple answers possible)

- Moving
- Job loss
- Retirement
- Financial problems
- Health problems
- Decrease in driving skills
- Fear of driving
- Following an accident
- Family pressure
- Doctor's recommendation
- Accumulating demerit points
- Removal of driver's license
- Other, specify :

Health and driving

60. On a scale of 1 to 10, indicate to what extent stopping driving due to a health problem would be a relief or disaster?

Relief

Disaster

61. Do you have a **health condition** that makes driving **difficult or strenuous**?

Yes No

If yes, specify :

- 1.
- 2.
- 3.

62. Have you ever felt that some of your **medications** affected your driving?

I do not take medications I do not know No Yes

If yes, what medication(s)?

- 1.
- 2.
- 3.
- 4.

63. Have you ever talked with a **doctor or someone close to you** (friends or family) of your potential future **difficulties to drive?** (multiple answers possible)

- I do not have difficulties
- I have difficulties, but I do not wish to talk about them
- I spoke with my doctor about difficulties to drive
- I spoke with someone close about difficulties to drive

64. Are you affected by the following **difficulties** when **driving?**

- Blurred vision, unclear Yes
 No
- Decrease in visual field Yes
 No
- Diminished reflexes Yes
 No
- Limited neck movement Yes
 No
- Limited arm movement Yes
 No
- Limited leg movement Yes
 No
- Decrease in muscular strength Yes
 No

The next questions are intended for all.

Health

65. Can you assign a score from 1 to 10 to your physical and mental health, on average, during the past week?

a. Evaluation of your physical health (Have you felt in good shape? Have you had pains or illnesses?)

Very bad

Excellent

b. Evaluation of your **mental health** (Have you had joys or disappointments? Were you happy, preoccupied, anxious, depressed?)

Very bad

Excellent

66. Compared to before (when you were 40 years old) then
compared to people your age:

	Less ↓	More ↓	No Difference ↓
(1) <u>Do you need "more" or "less" time to accomplish your daily activities (cooking, gardening)?</u> Compared to before?			
Compared to people your age?			
(2) <u>Do you have "more" or "less" trouble concentrating?</u> Compared to before?			
Compared to people your age?			
(3) <u>Do you have "more" or "less" difficulty planning and organizing your daily activities?</u> Compared to before?			
Compared to people your age?			
(4) <u>Are you "more" or "less" distracted by noise and activity around you?</u> Compared to before?			
Compared to people your age?			
(5) <u>Do you have "more" or "less" difficulty adjusting to unforeseen events (e.g. someone you know arrives at your home unexpectedly)?</u>			

Compared to before?			
Compared to people your age?			

67. When was your last eye exam?

- Less than 2 years ago More than 2 years ago

68. Do you have problems with your memory?

Yes _____ No _____

69. Do you have any of the following problems?

- a) forgetting how to do current activities (shopping, use household appliances)? Yes _____ No _____
- b) difficulty remembering new information? Yes _____ No _____
- c) difficulty remembering old information? Yes _____ No _____
- d) difficulty calculating numbers? Yes _____ No _____
- e) difficulty finding the right words when talking Yes _____ No _____
- f) problems navigating around the city? Yes _____ No _____

If you said yes to any of the above, have you talked to your Doctor about them?

Yes _____ No _____

70. Do you smoke? Yes _____ No _____

If yes, do you smoke:

- a) cigarettes Yes _____ No _____ If yes, how many do you smoke per day? _____
- b) pipes Yes _____ No _____ If yes, how many do you smoke per day? _____

- c) cigars Yes_____ No_____ If yes, how many do you smoke per day? _____
- d) cannabis Yes_____ No_____ If yes, how many do you smoke per day? _____

71. Approximately how many alcoholic drinks do you have per week? _____

72. On how many days each week do you usually drink alcohol?

73. Which of these types of alcoholic beverages do you drink, and how many do you drink per week?

- a) Beer _____ (how many-number)
- b) Wine _____
- c) Vodka _____
- d) Whiskey _____
- e) Rum _____
- f) Gin _____
- g) Liquors: _____
- h) Other: _____

74. Are you currently diagnosed with any of the following?
(check all that apply)

___ arthritis, rheumatism or osteoporosis

___ Multiple Sclerosis

___ Parkinson's disease

___ stroke

___ dementia

___ high blood pressure, cholesterol or heart problems (**circle**

which ones)

___ diabetes

___ asthma or other breathing problems

___ back problems or ___ foot problems

___ hearing problems

___ cataracts, glaucoma or macular degeneration (**circle** which ones)

___ sleeping disorders (e.g., insomnia, sleep apnea, restless leg syndrome)

___ depression

___ other(s)

(specify: _____)

75. Please list any current medications you are taking and what they are for.

Example:

Medication	Use	Dosage	Time per day
Prozac	Anti-anxiety	20miligrams	2

76. Usually, how much sleep do you get in 24 hours (including sleeping at night and during the day)

	Les s than 5 hrs	5.5 hrs	6 hrs	6.5 hrs	7 hrs	7.5 hrs	8 hrs	8.5 hrs	9 hrs	9.5 hrs	10 hrs or mor e
Chec k the box that appli es											

77. How likely are you to doze off or fall asleep unintentionally in the following situations, in contrast to feeling just tired? This refers to your usual way of life in recent times. Even if you have not done some of these things recently try to work out how they would have affected you. Use the following scale to choose the most appropriate number for each situation:

	0 Would never doze	1 Slight chance of dozing	2 Moderate chance of dozing	3 High chance of dozing
a) sitting and reading				
b) watching tv				
c) sitting, inactive in a public place (e.g. a theatre or meeting)				
d) as a passenger in a car for an hour without a break				
e) lying down to rest in the afternoon when circumstances permit				
f) sitting and talking to someone				
g) sitting quietly after a lunch without alcohol				
h) in a car, while stopped				

for a few minutes in traffic				
------------------------------------	--	--	--	--

Safe mobility and environment

78. Do you receive home delivery services (e.g. bread, groceries)?:

Yes No

If not, why?

It's expensive

It does not exist in my
community

I do not need it

Other,
specify:

79. Do you have public transportation within walking distance from your home (bus, coach, subway, street car, LRT, train)?

I do not know No, none Yes, at least 1

If yes, do you use it?

No, Never

Yes, I use it occasionally about a **few times a year**

Yes, I use it about **once a month**

Yes, I use it about **once a week**

Yes, I use it **2 to 3 times a week**

Yes, I use it **everyday**

80. Have you fallen in the past 2 years? Yes _____ No _____

a) If yes, how many times? _____

b) What event or circumstance led to you falling (e.g., icy sidewalk, uneven surface, poor balance)?

c) Did you require hospitalization? Yes _____ No _____

81. During the last 7 days, on how many days did you do **vigorous** physical activities such as heavy lifting, aerobics, or fast bicycling?

_____ days per week

No vigorous activities → Skip to question 81

a) How much time did you usually spend doing **vigorous** physical activities on one of those days?

_____ hours per day

_____ minutes per day

Don't know/Not sure

82. During the last 7 days, on how many days did you do **moderate** physical activities such as carrying light loads, fast walking, or gentle swimming?

_____ days per week

No moderate activities → Skip to question 82

a) How much time did you usually spend doing **moderate** physical activities on one of those days?

_____ hours per day

_____ minutes per day

Don't know/Not sure

83. During the last 7 days, how many days did you **walk** for at least 10 minutes at a time?

_____ days per week

No walking → Skip to question 83

a) How much time did you usually spend **walking** on one of those days?

_____ hours per day

_____ minutes per day

Don't know/Not sure

84. During the last 7 days, how much time did you spend **sitting** on a week day?

_____ hours per day

_____ minutes per day

Don't know/Not sure

Day Dreaming

87. For each statement, please indicate the answer that best describes you in general, by checking the appropriate box.

	Almost never 0	Very rarel y 1	Rarely 2	Frequentl y 3	Very frequentl y 4	Almost always 5
I have trouble staying focused on a simple or repetitive task						
When I read, I realize that I am not thinking about the text and I have to read it again						
I do things without paying complete attention						
I realize that I listen with one ear, while thinking of something else at the same time						
I daydream or I get lost in my thoughts while watching TV or during a conference, an oral presentation, a course						

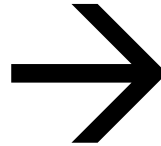
Activity

88. Over the last 6 months, how frequently have you:

	Never 0	Rarely 1	Sometimes 2	Often 3	Very often 4
Had difficulty going to the end of a project when the most exciting part is done?					
Had difficulty sorting things when a task requires organization?					
Had problems remembering your appointments or obligations?					
Avoided or procrastinated doing a task that requires a lot of thought?					
Squirmed or fidgeted your hands or feet when you have to stay seated for prolonged periods?					
Felt hyper active?					

Executive duties

89. These questions are designed to assess your cognitive functions that we call executive function, which is your ability to face new or complex situations (dealing with a car breakdown, planning an itinerary or trip or playing a puzzle game for example). It is also asked that you indicate the change of these capabilities over the past 5 years.



	Current frequency					Evolution (Past 5 years)		
	Never	Rarely	Sometimes	Often	Very often	More than before	No change	Less than before
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. I have difficulty understanding what others want to say if they do not speak simply and directly	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I act without thinking and do the first thing that goes through my head	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Occasionally I talk about events or details that I think happened when they never did	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I have difficulty thinking about what comes next and organizing the future	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I confuse different events and mix up the correct order of the events	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I have difficulty realizing the extent of my problems and I am not realistic about the future	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I am sluggish or have little enthusiasm for doing things	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I say or do embarrassing things in front of other people	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I really want to do something one minute but then I'm indifferent the next	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I have difficulty expressing my emotions	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I get irritated by the smallest things	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I am indifferent about the way in which I should behave in certain situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I find it hard to stop myself from saying or doing something once I've started	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I tend to be restless and cannot sit quietly for a minute	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
15. I have difficulty stopping myself from doing certain things even though I know I should not (i.e. eating treats)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
16. I can say one thing but do another	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
17. I have trouble maintaining my focus and am easily distracted	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
18. I have difficulty making decisions or deciding what I want to do	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
19. I am not aware or do not feel concern about what others think of my behaviour	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

The questionnaire is completed; we thank you for participating.

Appendix C: Recruitment Materials

Letter of Information

Examining the Prevalence and Associations of Health and Mobility in Canadians

Principal Investigator: Dr. Alexander Crizzle, School of Public Health and Health Systems, University of Waterloo

Graduate Student Researcher: Sarah Laberge, School of Public Health and Health Systems, University of Waterloo

Project Description: Why are we conducting this study?

This study will examine the effects of health on mobility among Canadians. We are hoping to determine how health as well as physical, cognitive and social factors influence injury rates including driving and fall related accidents. Findings from this project will lead to program and service development that address the needs of Canadians. We will also ask to follow-up with you 5 years from now to see how your health, mobility, attitudes and behaviours, driving practices, environment, activity levels, and cognitive function have changed. In comparing data every 5 years, we will have a greater understanding of health and mobility trends amongst Canadians, enabling us to develop injury prevention strategies and raise awareness about road safety. Additionally, findings from this study will be compared to residents of France, who have completed the same survey. International comparisons between France and Canada will provide an opportunity to improve road safety and injury prevention practices, as well as increase our understanding of why groups of people are different.

Who is funding this study?

The study is funded by the University of Waterloo International Research and Partnership Grant.

How do we plan to recruit participants for this study?

We will recruit participants through various avenues including organizations (e.g. Canadian Association of Retired Persons (CARP); the Royal Canadian Legion). We will contact representatives of these large organizations through telephone and/or e-mail, and if they agree, will disseminate the online survey through their member list-serve (via email). This email is being sent on behalf of the researchers.

Who is participating in this survey?

We hope to recruit over 50,000 Canadians who are aged 45 or older. An e-mail will be sent to each CARP Chapter Chair and Executive Branch Legion Member containing the letter of information, informed consent form, survey,

and permission form for follow-up in five years. Upon receiving this e-mail, leaders will disseminate the survey to their chapter members. The aim is to disseminate this survey throughout Canada for inter-provincial and country comparisons.

What would the survey be like?

The survey will be completed through SurveyMonkey, an online website. There will be approximately 90 questions that will ask questions about your health, attitudes and behaviours, mobility, social demographic factors, driving, falls and a few questions on memory, sleepiness and distraction. The survey should take between 45 minutes to 1 hour to complete. You can stop, save, and return to the survey if you cannot complete the survey at one particular time. The survey is available in both English and French.

What information would be collected in the survey?

Personally identifiable information such as e-mail address, gender, age, cities and provinces participants live in will be collected. We are collecting contact information (e.g. name, e-mail, address) for the purposes of follow-up with participants in five years. Contact information will be stored separately from the survey data on a secure system at the University of Waterloo to ensure confidentiality. Prior to analyzing any data, personal information will be removed from the database. Data will be stored for a minimum of 7 years for research purposes.

What do you do with the information you collect?

Information from the survey will be downloaded to a statistical software program where we will analyze data on an aggregate/group level. All identifying information will be removed prior to downloading and analyzing the data to ensure anonymity.

How do you protect my confidentiality?

Your name and any other identifying information will be removed from the database prior to analysis. You will be referred to only by an assigned study ID (or number). All findings from the study will be reported anonymously and secured on password-protected computers at the University of Waterloo.

Do I have to participate?

Participation in this study is completely voluntary. You are not required to participate and if you do decide to participate you may withdraw from the study without having to give a reason by closing your web browser and not submitting your responses. You are allowed to skip questions throughout the survey should you choose.

What are the risks and benefits of participating in this study?

It is unlikely that there will be any direct benefit to you. However, sharing your experiences with us will help us design injury prevention programs targeted for those over the age of 45 and understand changes in driving habits, health and

mobility as people age. Organizations who choose to participate can learn about of their members (e.g., demographics). This information may lead to the development of new programs or initiatives based on survey findings. There are no known risks associated with participating in this study. However, when information is transmitted over the internet privacy cannot be guaranteed. There is always a risk your responses may be intercepted by a third party (e.g., hackers). University of Waterloo researchers will not collect or use internet protocol (IP) addresses or other information which could link your participation to your computer or electronic device without first informing you.

Is there compensation?

There is no monetary compensation. However, in appreciation of the time you have given to this study, you can enter your name into a draw for 1 of 5 prizes. The prizes include a \$25 Tim Hortons gift card. Your odds of winning one of the prizes is based on the number of individuals who participate in the study. We expect that approximately 50,000 individuals will take part in the study within the first year. Information collected to draw for the prizes will not be linked to the study data in any way, and this identifying information will be stored separately, then destroyed after the prizes have been provided. The amount received is taxable. It is your responsibility to report this amount for income tax purposes.

Conflicts of Interest: There are no conflicts of interest to declare related to this study.

Rights of Participants in a Research Study: You have the right to receive all information that could help you make a decision about participating in this study. You also have the right to ask questions about this study and to have them answered to your satisfaction, before you make any decision. You also have the right to ask questions and to receive answers throughout this study.

How can I find out more about this study before I decide?

If you have any questions or there is anything you would like to discuss before you decide whether you'd like to participate, please contact Sarah Laberge at **519-878-1637** or selaberg@uwaterloo.ca.

If you have any questions about this study you may also contact the Principal Investigator: Dr. Alexander Crizzle, University of Saskatchewan at **306-966-2773** or via email at alex.crizzle@usask.ca.

What is the next step if I want to participate?

If you would like to participate please complete the online survey. If you have any questions about this study, please contact Sarah Laberge at **519-878-1637** or selaberge@uwaterloo.ca.

ARE YOU OVER THE AGE OF 45 AND WANT TO CONTRIBUTE TO FURTHER UNDERSTANDING OF HEALTH AND PREVENTION OF INJURIES IN CANADIAN SENIORS?

Researchers at the University of Waterloo are conducting a research project for which you may be eligible!

We would like to learn about:

- Health and mobility related impairments
- Chronic disease prevalence rates
- Injury prevention
- Lifestyle choices of those over the age of 45 and how they affect one's health over time

You may be eligible to participate in this research that aims to learn about health and mobility related impairments in Canadian seniors, if you meet the criteria:

- Over the age of 45

If you choose to participate in this study, you have the option of being entered into a draw for a prize! You will be e-mailed a link with a survey to complete.

If you would like more information, please contact:

Sarah Laberge: selaberg@uwaterloo.ca

Melissa Roetcisoender: mlroetci@uwaterloo.ca

This study has been reviewed by, and received ethics clearance through a University of Waterloo Research Ethics Committee.



E-mail Script

Hello _____ (enter person's name)

Introduction:

My name is Sarah Laberge and I am a Masters student in the School of Public Health and Health Systems at the University of Waterloo. I am currently conducting research under the supervision of Dr. Alexander Crizzle on effects of various determinants of health on mobility among Canadians. As part of my thesis research, I am conducting an online survey with Canadians aged 45 and over to determine how health status and various other determinants of health are related to accidents and injuries.

Background Information:

As mentioned, this survey will capture information on health status, as well as various other determinants of health to get a better understanding of how these factors are related to accidents and injuries. The survey is completed online using SurveyMonkey. There will be approximately 90 questions that will ask about your health, attitudes and behaviours, mobility, social demographic factors, driving, falls and a few questions on memory, sleepiness and distraction. The survey should take between 1 and 2 hours to complete. You can stop, save, and return to the survey if you cannot complete the survey at one particular time. The survey is available in both English and French.

Participation in this study is completely **voluntary** and there are no known or anticipated risks to participating in this study. **None of the information** you provide will be shared. You **may decide** whether you want to complete any aspect of the study or withdraw at any time. All of the information you provide is confidential. **To maintain confidentiality**, no individual will be identified by name in my thesis or resulting publications. The data collected will be kept on a secure computer with proper firewall and protection software.

If you have any questions regarding this study, or would like additional information to assist you in reaching a decision about participation, please feel free to contact me through email at selaberg@uwaterloo.ca. You can also contact the Principle Investigator, Dr. Alexander Crizzle at 306-966-2773. I would like to assure you that this study has been reviewed and received ethics

clearance through a University of Waterloo Research Ethics Committee. However, the final decision about participation is yours.

If you are interested in participating, please contact me at selaberg@uwaterloo.ca and I will send you the URL to the online survey.

Sincerely,
Sarah Laberge

Telephone Script

Initial Greetings:

My name is Sarah Laberge and I am a Masters student in the School of Public Health and Health Systems at the University of Waterloo. I am currently conducting research under the supervision of Dr. Alexander Crizzle on effects of health factors on mobility among Canadians. I am conducting an online survey with Canadians aged 45 and over to determine how health status and other factors are related to accidents and injuries.

Is this a convenient time to give you further information about this survey? Yes _____
No _____

If no: Sorry to disturb you and thank you for letting me know. When is a better time?
_____ Thank-you and I look forward to talking to you then. Good-bye.

If yes: *Interested and good time to talk.*

(If yes) Great. I will tell you more about the survey and how you can participate.

Background Information: As mentioned, this survey will capture information on health status, as well as various other health related factors to get a better understanding of how these are related to accidents and injuries. The survey is completed online using SurveyMonkey. I will send you the URL if you want to participate by email. There will be approximately 90 questions that will ask about your health, attitudes and behaviours, mobility, social demographic factors, driving, falls and a few questions on memory, sleepiness and distraction. The survey should take between 45 minutes to one hour to complete. You can stop, save, and return to the survey if you cannot complete the survey at one particular time. The survey is available in both English and French.

Participation in this study is completely **voluntary** and there are no known or anticipated risks to participating in this study. **None of the information** you provide will be shared on an individual level. You **may decide** whether you want to complete any aspect of the study or withdraw at any time. All of the information you provide is confidential. **To maintain confidentiality**, no individual will be identified by name in this national survey or resulting publications. The data collected will be kept on a secure computer with proper firewall and protection software. At the end of the survey, you will have the option to be entered in a draw for a prize. If you are selected as a winner, we will contact you.

If you have any questions regarding this study, or would like additional information to assist you in reaching a decision about participation, please feel free to contact me through email at

selaberg@uwaterloo.ca. You can also contact the Principal Investigator, Dr. Alexander Crizzle at 306-966-2773. I would like to assure you that this study has been reviewed by, and received ethics clearance through a University of Waterloo Research Ethics Committee. However, the final decision about participation is yours.

With your permission, I would like to email/mail/fax you an information letter which has all of these details along with contact names and numbers on it to help assist you in making a decision about your participation in this study. Yes_____ No_____

If No. Thank-you for your time.

OR

If Yes, record contact information from potential participant i.e., email address.

Email to Organizations



UNIVERSITY OF WATERLOO
FACULTY OF APPLIED HEALTH SCIENCES
School of Public Health and Health Systems

Date:

Dear _____ :

This letter is a request for the “Name of Organization” assistance with a project I am conducting in the School of Public Health and Health Systems at the University of Waterloo (Waterloo, Ontario) under the supervision of Dr. Alexander Crizzle. The title of the research project is “Examining the Prevalence and Associations of Health and Mobility in Canadians.”

The purpose of this study is to determine how health status and various other determinants of health are related to accidents and injuries. Findings from this study will help clarify cohort differences (e.g., age groups, gender) related to health and their association with accidents and injuries. Ultimately, the goal is to modify or create policies related to injury prevention and help Canadians maintain mobility into old age.

I hope to connect with “Name of Organization” members to invite them to participate in this research project. I believe that the members of your association have unique understandings of the importance of health, mobility, driving and injury prevention. During the course of this study, I will be disseminating the survey to Canadians aged 45 and over to complete the survey. I am writing this letter to request support from “Name of Organization” to send an e-mail about this study to your members on behalf of the researchers. Participation of any member is completely voluntary and no information will be shared with any party (including “Name of Organization”). All participants will be informed and reminded of their rights to participate or withdraw before commencing the survey, or at any time in the study. Members will receive an information letter including detailed information about this study, as well as informed consent forms.

As this project entails an online survey, all electronic data will be stored on a secure computer with updated security and firewall software. There are no known or anticipated risks to participants in this study.

I would like to assure you that this study has been reviewed and received ethics clearance by the Office of Research Ethics at the University of Waterloo. However, the final decision about participation belongs to the “Name of Organization” and its members.

If you have any questions regarding this study or would like additional information to assist you in researching a decision about your organization’s role in the project, please contact me at 519-878-1637 or by selaberg@uwaterloo.ca. You may also contact my supervisor and Principal Investigator, Dr. Alexander Crizzle at 306-966-2773, or by email alex.crizzle@usask.ca.

I hope that the results of this study will be beneficial to “Name of Organization” members and to Canadians more generally. I very much look forward to speaking with you and thank you in advance for your assistance with this project.

Yours sincerely,

Sarah Laberge
Master’s Candidate
School of Public Health and Health Systems
University of Waterloo

Informed Consent Form

Title of Project: Examining the Prevalence and Associations of Health and Mobility in Canadians

Principal Investigator: Dr. Alexander Crizzle

Graduate Student: Sarah Laberge

Consent to Participant

By indicating your consent, you are not waiving your legal rights or releasing the investigator(s) or involved institution (University of Waterloo) from their legal and professional responsibilities. With full knowledge of all foregoing, I agree, of my own free will, to participate in this study.

- "Yes, I agree to participate."
- "No, I do not wish to participate (please close your web browser now)."

Thank-you Letter

Dear Participant:

I would like to thank you for participating in our national health and mobility study. As a reminder, the purpose of this study is to examine the prevalence and relationships of health and mobility related impairment in Canadians.

The data collected through the online survey will contribute to a better understanding of how health, as well as physical, cognitive and social factors influence injury rates including driving and fall related accidents. Survey results will be available by the end of 2017. If you're interested in learning of the results, please contact Dr. Crizzle (contact information is below).

Please remember that any data pertaining to you as an individual participant will be kept confidential. If you have any questions about the study, please do not hesitate to contact us by email or telephone as noted below. As with all University of Waterloo projects involving human participants, this project was reviewed by and received ethics clearance through a University of Waterloo Research Ethics Committee. Should you have any comments or concerns resulting from your participation in this study, please contact Dr. Maureen Nummelin, the Director, Office of Research Ethics, at 1-519-888-4567, Ext. 36005 or maureen.nummelin@uwaterloo.ca.

Thank you for participating in the survey. As a token of appreciation for your participation, would you like your name to be entered in a draw for a gift card to a restaurant?

Yes
No

Dr. Alexander Crizzle
University of Saskatchewan School of Public Health
104 Clinic Place
Saskatoon, SK S7N 2Z4
306-966-2773
alex.crizzle@usask.ca

Permission for Future Contact Form

Dr. Alexander Crizzle and his research team would like to contact you in 5 years to complete the same survey. Agreeing to be contacted does not obligate you to take part in the study at a future time. Your name and contact details will be available only to members of the research team. This information will be securely stored in Dr. Crizzle's office on a password protected computer for a period of five years, at which point the information will be deleted. You may change your mind at any time and request that your name and contact details be deleted from our records. Please note that before any of our studies are conducted, they are reviewed and receive ethics clearance through a University of Waterloo Research Ethics Committee.

I agree to be contacted about possible participation in five years associated with Dr. Crizzle. I am aware that my agreement now does not obligate me to take part in any studies, and that at any time I may request that my name and contract information be deleted.

YES NO

Name: _____

Telephone Number: _____

Email address: _____

Appendix D: Participant Recruitment List

Alberta				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Edmonton Lions Club July 2016	harryand@telusplanet.net	E-mail, Facebook message	No, recontacted January 2017	N/A
Calgary North Hill Lions Club July 2016	N/A	Online form, Facebook message	No, recontacted January 2017	N/A
Retirement Plus 50 July 2016	Zone 1-8 members	E-mail	No	N/A
The Alberta Retired Teachers Association August 2016*	Chyrisse Dekker cdekker@arta.net	E-mail	Yes	Yes, put advertisement in December 2016 newsletter
Alberta 55 Plus August 2016	N/A 1(855) 955-7587 alberta55plus@outlook.com; info@alberta55plus.ca	E-mail, telephone	No, landline out of service, recontacted January 2017	N/A
Alberta Center for Active Living July 2016	lynda.matthews-mackey@ualberta.ca	E-mail	No	N/A

Medicine Hat Strathcona Centre July 2016	veiner@medicinehat.ca	E-mail	No, out of office	N/A
Alberta Square Dance Association September 2016	waylow@telusplanet.net	E-mail	No	N/A
Caregivers Alberta January 2017	N/A	Facebook message	No	N/A
District 5360 (Western Saskatchewan and Southern Alberta) Rotary Club July 2016	Charlene@Rotary5360.ca	E-mail	No	N/A
Medicine Hat Sunrise Rotary Club July 2016	Dan Kammerer	Online form	No	N/A
Rotary Club of Edmonton August 2016	(780) 429-3256 admin@edmontonrotary.com	E-mail	No	N/A
Rotary Club of Calgary August 2016	(403) 398-9969 admin@rotaryclubofcalgary.ca	E-mail	No	N/A

*Indicates the organization would like a copy of the results

British Columbia				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
BC Retired Teachers Association February 2017*	Kristi: kristi@bcrrta.com, JoAnn Lauber jlauber@shaw.ca	Facebook, E-mail	Yes	Yes, will put advertisement in March newsletter
Fernie Senior Citizens Society February 2017*	fernieseniors@gmail.com	Facebook - MR, asked to be emailed.	Yes	Yes - added the survey and info to our FB page and will mention it in our newsletter as well
Alzheimer's Society of BC December 2016	Eva Boberski eboberski@alzheimerbc.org	E-mail	Yes	Yes- need to tell her when recruitment period is finished
Gerontological Nurses Association of British Columbia August 2016	Victoria Chapter, Keery Chalmers k-pchalmers@telus.neton Media Chairperson, Maneet Samra- maneet.samra@fraserhealth.ca	E-mail	No	N/A
Centre for Hip Health and Mobility July 2016	info@hiphealth.ca, http://www.hiphealth.ca/connect / (604) 675-2575	E-mail, online form, telephone	No, e-mail researchers on the team (Morgan Barber, Christa Hoy, Alison Chan)	N/A
British Columbia Centre of Excellence for Females July 2016	N/A http://bccewh.bc.ca/contact-us/	Online form, telephone	No, recontacted August 2016	N/A

Chilliwack BC YMCA July 2016	chilliwack@gv.ymca.ca	E-mail	Yes	Yes
Langara Family YMCA July 2016	langara@gv.ymca.ca	E-mail	No	N/A
Council of Senior Citizens Organization of British Columbia July 2016	VP: Gudrun Langolf (604) 266- 7199 glangolf@telus.net	E-mail, telephone	Yes, recontacted in August 2016	Yes
British Columbia Retired Teachers Association July 2016	http://www.bcrrta.ca/contact	Online form, telephone, Facebook message	No, recontacted August, October 2016 and January 2017	N/A
BC Seniors Living Association July 2016	executivedirector@bcsla.ca 604-689-5949	E-mail, telephone	Yes	No, not suitable for residents
*Seniors Hub Vancouver July 2016	http://www.theseniorshub.org/c ontact-us.html	Online form	Yes	Yes
Westend Seniors Network August 2016*	Anthony Kuperschmidt executivedirector@wesn.ca 604-669-5051	E-mail	Yes	Yes, will put advertisement in October newsletter
South Vancouver Seniors Arts and Culture Society September 2016	svsacs@gmail.com	E-mail	No, recontacted October 2016	N/A
BC Health Coalition July 2016	info@bchealthcoalition.ca	E-mail	Yes, recontacted August 2016, Terry will speak to staff	N/A

BC Interior Health January 2017	Kelly Wilson kelly.wilson@interiorhealth.ca	E-mail	No	N/A
BC Island Health January 2017	info@viha.ca	E-mail	Automatic response 'not monitored every day'	N/A
Vancouver Coastal Health January 2017	Allison Muniak allison.muniak@vch.ca	E-mail	No	N/A
Northern Health January 2017	Denise Foucher denise.foucher@northernhealth. ca	E-mail	No	N/A
Volunteer Grandparents January 2017	604-736-8271 info@volunteergrandparents.ca	E-mail	No	N/A
Vancouver Rotary Club July 2016	Carolyn	E-mail (from admin page)	Yes	Yes
Victoria Rotary Club July 2016	N/A	Online form, E- mail failure	No	N/A
Oak Bay Rotary Club July 2016	Wendy Townsend Wendy.Townsend@csc- scc.gc.ca	E-mail	No	N/A
West Shore Victoria Rotary Club July 2016	Skip Triplett skiptrip@gmail.com	E-mail	Yes	Yes
Sidney Rotary Club July 2016	Cosmo Pessoa cosmo@wendonyachts.com	E-mail	No	N/A

Sooke Rotary Club July 2016	info@sookerotary.com	E-mail	No	N/A
Royal Oak Centennial Rotary Club July 2016	Jim Hicke	Online form	No	N/A
Victoria Harbourside Rotary July 2016	Peter Baillie	Online form	Yes	Yes

*Indicates the organization would like a copy of the results

Manitoba				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Manitoba Retired Teachers Association July 2016	office@rtam.mb.ca 1-204-889-3660	E-mail, telephone	Yes	Will consider at board meeting
Active Living Coalition for Older Adults Manitoba August 2016	info@alcoamb.org	E-mail	Yes	Yes
Barrier Free (belongs to ALCOA) September 2016	barrierfreemanitoba@shaw.ca	E-mail	Yes	Yes
Manitoba Association of Senior Citizens September 2016	Connie Newman info@manitobaseniorcentres.com 1-204-792-5838	E-mail, telephone	Yes	Yes, will distribute to Senior Centres in MB as well as the MB Seniors Coalition
Age and Opportunity September 2016	info@aosupportservices.ca 1-204-956-6440	E-mail, telephone	Yes	Yes
Winnipeg Seniors February 2017	N/A	Facebook message	No	N/A
Creative Retirement Winnipeg September 2016	Richard Denischuck denesiuk@crm.mb.ca (204) 949-2565	E-mail, telephone	Yes, recontacted November 2016	N/A
Lions Club of Winnipeg January 2017	N/A	Facebook message	No	N/A

Downtown Winnipeg Rotary Club July 2016	Atanu Chaudari atanu1000@gmail.com	E-mail	Yes	Yes
Rotary Club of Winnipeg Transcona August 2016	transconarotary2012@gmail.com	E-mail	No, recontacted January 2017	N/A
City of Thompson Rotary Clubs February 2017	N/A	Facebook message	No	N/A

New Brunswick				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
New Brunswick Society of Retired Teachers July 2016	Mildred Urquhart mjurqu@gmail.com 506-849-2662	E-mail, telephone	No, recontacted August 2016	N/A
Moncton Lions Club January 2017	N/A	Facebook message	No	N/A
Rotary Club of New Brunswick August 2016	Sharan Jain	Online form	No	N/A
Fredericton Rotary Club August 2016	Eric Cook eric.cook@rpc.ca	E-mail	No, recontacted January 2017	N/A
Saint John Rotary Club August 2016	Robert L. Boyce	Online form	No	N/A

Bathurst Rotary Club August 2016	N/A	Online form	No	N/A
Dieppe Rotary Club August 2016	Daniel Bélair- English Claude Bourgeois- French	Online form	No	N/A
Valerie McLaughlin, Edmunston and Moncton October 2016	evm4867@umoncton.ca	E-mail	Yes	Yes

Newfoundland and Labrador				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Waterford Hospital Lions Club January 2017	N/A	Facebook message	No	N/A
Lions Club Eastern Newfoundland January 2017	N/A	Facebook message	No	N/A
Rotary District 7820 July 2016	rotarydistrict7820@gmail.com	E-mail	No, recontacted January 2017	N/A
The Retired Teachers Association of Newfoundland and Labrador July 2016	Don White don.white01@bellaliant.net (709) 368-7269	E-mail, telephone	Yes	Yes, post on website and in December newsletter
St. John's Northwest Rotary August 2016	info@northwestrotary.org	E-mail	No, recontacted January 2017	N/A

Newfoundland and Labrador Teachers' Association August 2016	Miriam Sheppard msheppard@nlta.nl.ca (709) 726-3223 ext. 230	E-mail, telephone	Yes, will forward to communications department	N/A
Seniors Resource Centre September 2016	info@seniorsresource.ca (709) 737-2333	E-mail	No, recontacted January 2017	N/A
The St. John's Retired Citizens Association September 2016	709-753-5821 mgbennett@nl.rogers.com	E-mail	Yes	Yes, hung poster
Public Sector Pensioners' Association September 2016	pensioners@nlpspa.ca (709) 754-5730	E-mail	No, bounce back e-mail	N/A
Mount Pearl Seniors Independence Group September 2016	mtpearlseniors@hotmail.com	E-mail	No, recontacted January 2017	N/A

Northwest Territories				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Yellowknife Seniors Society September 2016	ykseniorssociety@theedge.ca 867-873-9475	E-mail	No	Getting responses on SM

Northwest Territories Teachers Association July 2016	Amanda Mallon 867-873-5759 (Office) amanda.mallon@nwttta.nt.ca	E-mail, telephone	Yes	No, "NWTTA does not have an association of retired teachers, most of our teachers return to their homes in southern Canada when they left their jobs."
NWT Seniors Society September 2016	Bard Hood ed@seniorsnwt.ca 1-800-661-0878 or 867-920-7444	E-mail, telephone	No, recontacted late September 2016	N/A
Enterprise Seniors' Society September 2016	Amy Mercredi enterpriseseniorsociety@northwestel.net 867-984-3000	E-mail	No, e-mail bounce back	N/A

Nova Scotia				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Nova Scotia Gerontological Nurses Association July 2016	Susan Savage smsavage@bwr.eastlink.ca	E-mail	No, recontacted November 2016	N/A
Nova Scotia Retired Teachers Association July 2016	Katie Logan reception@staff.nstu.ca bbberryman459@gmail.com	E-mail	No, recontacted October 2016	N/A

Chebucto Links (Community Outreach Association) July 2016	Charles Anderson chebucto.links@ns.sympatico.ca (902) 422-3525	E-mail, telephone	No, recontacted January 2017	N/A
Cape Breton Seniors Fitness Outreach September 2016	Ashley Eisan at aeeisan@cbrm.ns.ca	E-mail	No, recontacted November 2016	N/A
Cape Breton Recreation September 2016	recreation@cbrm.ns.ca	E-mail	No, recontacted November 2016	N/A
Community Links January 2017	Executive Director: Anne Corbin director@nscommunitylinks.ca	E-mail	No	N/A
Dartmouth Senior Centre Network January 2017	Executive Director: Anne Corbin director@nscommunitylinks.ca	E-mail	No	N/A
Ocean View Nova Scotia January 2017	ovnp@oceanv.ca	E-mail	No	N/A
Eastern Passage Cow Bay Lions Club January 2017	N/A	Facebook message	No	N/A
Saskville Seniors Advisory Council January 2017	kenmark20@hotmail.com	E-mail	No	N/A
Halifax North West Rotary Club July 2016	N/A	Online form	No	N/A
Kentville District 7820 July 2016	info@kentvillerotary.org	E-mail	No, recontacted January 2017	N/A

Serving Seniors Alliance Co-Operative January 2017	weserve@servingseiors.info	E-mail	No, bounce back e-mail	No
Good Neighbour Club January 2017	Susan Wood susanqrst@hotmail.com	E-mail	No	N/A
Spencer House January 2017	(902) 421-6131	Telephone	Yes	No, users are not computer literate
Kings County Senior Citizens Council January 2017	Rita Tibert 1-902-678-1658, ritatibert@gmail.com	E-mail, telephone	Yes	Yes

Nunavut				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Nunavut Employees Union July 2016	Bill Fennell, President bill@neu.ca 867-979-4209 or toll-free 1-877-243-4424	E-mail	No, recontacted January 2017	N/A
Ilisaqsivik Society September 2016	N/A	Online form	No, bounce back	N/A
Iqualuit City Recreation September 2016	Jeremy Debicki, j.debicki@city.iqualuit.nu.ca , 867-975-8508, general phone # 867-975-8544	E-mail, telephone	No, recontacted later in September 2016	N/A
Qikiqtani Inuit Association September 2016	info@qia.ca, 867-975-8400	E-mail	No	N/A

Nunavut Elders and Youth September 2016	Joanna Quassa, Director jquassa@gov.nu.ca 867-934-2032	E-mail, telephone	No, recontacted later in September 2016	N/A
Cambridge Bay Wellness Centre September 2016	Janet Stafford jstafford@cambridgebay.ca	E-mail, telephone	Yes	N/A
Whale Cove Community September 2016	Eloise Noble cedo@whalecove.ca	E-mail	No	N/A

Ontario				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Waterloo Region Alzheimer's Society August 2016	Barb barbeastmanlewin@alzheimerrw.ca	E-mail	Yes	No, over researched
The Multicultural Council for Ontario Seniors August 2016	416-464-4691	Telephone	Yes	No
Ontario Seniors Games Association November 2016	info@osga55plus.ca	E-mail	No, recontacted November 2016	N/A
The Caribbean Canadian Seniors Club (CCSC) December 2016	info@jcaontario.org	E-mail	No	N/A
Care First December 2016	info@carefirstseniors.com	E-mail	No	N/A

GTA Toronto YMCA Research July 2016	https://ymcagta.org/about-us/research research@ymcagta.org	E-mail	No	N/A
Ontario Research Coalition July 2016	info@sagelink.ca List of Partners: http://www.sagelink.ca/ontario_research_coalition	E-mail	No, recontacted October 2016	N/A
Seniors Health Knowledge Network July 2016	Sue Cragg suecragg@seniorshealthknowledgenetwork.com 416-422-2228 ext. 217	E-mail	No, recontacted October 2016	N/A
Miles Nadal Jewish Community Centre August 2016	Fallon Butler fallonb@mnjcc.org 416-924-6211 ext.118	E-mail, telephone	No	N/A
North York Senior Centre August 2016	N/A	Online form	No	N/A
PARC/OPHEA July 2016*	Kristin Berflez kristin@ophea.org	E-mail	Yes	Yes, will put link in e-newsletter
Ontario Neurotrauma Foundation July 2016*	Helene Gagne helene@onf.org	E-mail	Yes	Yes, will forward information to Ontario Injury Prevention Resource Centre
Parachute Canada October 2016	Matt Aymar maymar@parachutecanada.org Distributing: apiunno@parachutecanada.org	E-mail	Yes	Yes
Falls Loop Community of Practice July 2016	N/A	Posted on discussion wall	Yes	Yes

Association of Ontario Health Centres July 2016	Jennifer Rayner jennifer.rayner@aohc.org	E-mail	No, recontacted November 2016	N/A
The Fire Fighters Association of Ontario July 2016	secretary@ffao.on.ca	E-mail	No	N/A
Ontario Retirement Communities Association July 2016	charlotte@orcaretirement.com info@orcaretirement.com	E-mail, Facebook message	No, recontacted December 2016 and January 2017	N/A
Thornhill Senior Club January 2017	Wanda (905) 944-3781	Telephone	No, left message	N/A
Older Females's Network July 2016	416-214-1518, info@olderfemalesnetwork.org	E-mail, telephone	No, recontacted October 2016	N/A
United Seniors Citizens of Ontario July 2016	voice@uscont.ca	E-mail	Yes	No
Hamilton Council on Aging August 2016	kielys@hhsc.ca, (905) 777-3837 ext. 12238	E-mail, telephone	Yes	Will present at board meeting, unsure of result
Ottawa Seniors December 2016	info@ottawaseniors.com	E-mail	No	N/A
South Western Ontario Square Dancers Associations September 2016	swosdasecretary@gmail.com; http://swosda.ca/contact/	E-mail, Facebook message	No, recontacted January 2017	Yes
Murray Alzheimer's Research and Education Program September 2016	Lisa Loiselle loiselle@uwaterloo.ca	E-mail	Yes	Yes

Windsor Ontario Life After 50 September 2016	info@lifeafterfifty.ca (519) 254-1108	E-mail	No, recontacted January 2017	N/A
Etobicoke Rotary Club July 2016	Ivy Venier, ivy.venier@gmail.com	E-mail	No	N/A
Clarington Rotary Club July 2016	Marie Visser, marievisser94@yahoo.ca	E-mail	No	N/A
Oakville Rotary Club July 2016	Rudy Habesch, District Governer rudy.habesch@gmail.com	E-mail	No	N/A
Oakville West Rotary Club February 2017	David Abboud, President, http://portal.clubrunner.ca/163/SingleEmail/Send?MemberId=ncUtClRphJ7Qm14Dei6LEg%3D%3D	Online form	No	N/A
Oakville-Trafalgar Rotary Club February 2017	George Stern, george.stern@minutemanpress.com	E-mail	No	N/A
Toronto Rotary July 2017	office@rotarytoronto.on.ca	E-mail	No, recontacted February 2017	N/A
Toronto Beach Rotary January 2017	info@torontobeachrotary.com, https://www.facebook.com/torontobeachrotary/?hc_ref=SEARCH&fref=nf	E-mail, Facebook message	Yes, passed on to president	N/A
Toronto area Rotary Clubs District 7070 July 2016	rwallace000@sympatico.ca, https://www.facebook.com/LondonRotary/	E-mail, Facebook message	No, recontacted January 2017	N/A
London South Rotary Club January 2017	stephen.knox.2016@gmail.com, https://www.facebook.com/Rotary-Club-of-London-South-452997521410667/	E-mail, Facebook message	Yes	Yes

London area Rotary Club District 6330 July 2016	nottewell@gmail.com	E-mail	No	N/A
Ottawa Rotary Club July 2016	admin@rotaryottawa.ca, 613-860-1521	E-mail, telephone	No	N/A
Council on Aging July 2016	information@councilonaging.ca	E-mail	No, recontacted November 2016	Yes
Thunder Bay Public Health Unit July 2016	Julie	Telephone (she called)	Yes	Yes
UW Well-Fit July 2016	Caryl Russell crussell@uwaterloo.ca	E-mail	Yes	Yes, but only post a poster around gym due to ethics
Senior Pride Network December 2016	spntoronto@gmail.com	E-mail	No	N/A
Retired Females Teachers of Ontario July 2016	info@rwto.org, 1-877-607-6696	E-mail, telephone	No	N/A
Retired Teachers of Ontario July 2016	Wilma Pereira info@rto-ero.org	E-mail	No, recontacted October 2016	Will see results from CRTA
Ottawa Retired Firefighters Association July 2016	managingeditor@roffa.ca	E-mail	No	N/A
Ontario Truck Drivers Association July 2016	marco.beghetto@ontruck.org 416-249-7401	E-mail, telephone	Yes	Yes, will put in newsletter but do not expect responses

Owner-Operator's Business Association of Canada November 2016	Joanne Ritchie jritchie@obac.ca	E-mail	No	N/A
Seniors Helping as Research Partners (SHARP) July 2016	Jacobi Elliot jacobi.elliott@uwaterloo.ca, 519-888-4567 ext. 38982	E-mail, telephone	No, recontacted August 2016	N/A
York University Centre for Aging Research and Education July 2016	Linda Moradzadeh, yu_care@yorku.ca (416) 736-2100 x22896	E-mail	No	N/A
Canadian Centre for Aging and Activity July 2016	Shannon Belfry https://www.uwo.ca/ccaa/research/recruit_participants_form.html	Online form	Yes	Yes, will post flyer and put in e-communication
KW Seniors Day Program January 2017	Deanne Gillies deanne@k-wseniorsdayprogram.ca	E-mail	Yes	Yes
Oakridge Presbyterian Church January 2017	Kathy MacDonald kmacdonald@oakridge.london.on.ca	E-mail	Yes	Yes, will post flyer
Coburg Legion January 2017	Scott Powell, scott.powell@investorsgroup.com	E-mail	Yes	Yes
London Pickleball Club January 2017	N/A	Online form	No	Getting responses on SM

Huff N' Puff London January 2017	huffnpuff.sfa@gmail.com	E-mail, online form	No	Yes, members have participated
Amica London January 2017	Emily Skelly e.skelly@amica.ca	E-mail	No	N/A
Windermere on the Mount London January 2017	Emma Cookson, Director of Recreation 519-432- 9863	Telephone	No, left message	N/A
Waverly Mansion London January 2017	Rouchelle Gooden, General Manager gm.waverley@verveseniorliving.com 519-667-1381	E-mail, telephone	Yes, sent further information after phone call	
Riverside Retirement Residence Chartwell London January 2017	Sarah, Lifestyles Coordinator 519-667-8061	Telephone	No	N/A
Cherryhill Healthy Ageing Program January 2017	Delia Huitema delia.huitema@von.ca, 519-675- 1355	E-mail, telephone	Yes	Yes, will post flyer around center
The Village of Arbour Trails Guelph January 2017	ainsley.snowe@schlegelvillages.com	E-mail	No	N/A

Amica Barrie January 2017	Rebecca Sim, r.sim@amica.ca	E-mail	Yes	Yes, will pass onto residence in building with computers
London Legion Branch 317 January 2017	519-455-2331	Telephone, went in-person	Yes	Yes
Lambeth Legion January 2017	Tom Shields lambeth501@outlook.com, 519-652-3412	E-mail, telephone	No	N/A
London Legion Branch 533 January 2017	519-472-3399	Telephone	Yes	Yes
Baycrest Hospital Volunteer Services February 2017	Roshan Guna rguna@research.baycrest.org	E-mail	Yes	Yes, will post flyer, need ORE approval letter
Blyth Lions Club July 2016	steve@howsonandhowson.ca	E-mail, Facebook message	No, e-mail bounce back; recontacted January 2017 through Facebook message	N/A
Clinton Lions Club July 2016	mprowat@cabletv.on.ca	E-mail	No, recontacted January 2017	N/A
Kincardine and District Lions Club January 2017	N/A	Facebook message	No	N/A

Niagara Falls Lion Club July 2016	clubsecretary@niagarafallslions.net	E-mail	No, recontacted January 2017	N/A
Thunder Bay Metro Lions Club January 2017	N/A	Facebook message	No	N/A
London Central Lions Club July 2016	N/A	Online form	Yes	Yes
London Hyde Park Lions Club July 2016	N/A	Online form, Facebook message	No, recontacted January 2017	N/A
Lions Club of Goderich July 2016	davemcdo@cabletv.on.ca	E-mail	No, recontacted January 2017	N/A
Waterloo Rotary Club August 2016	Garth Cressman, President	Online form	No	N/A
Ontario Rotary Club July 2016	Donald Driftmier, Bulletin Editor	Online form	No	N/A
Windsor Rotary Club 1918 July 2016	info@rotary1918.com, 519-253-6382	E-mail, telephone	No, recontacted August 2016	N/A
3rd Age Learning December 2016	admin@thirdagelearningguelph.ca, info@3alb.org, info@thirdagenetwork.ca	E-mail	Yes, Burlington group	Yes, Burlington group will post poster
Bluewater Association for Lifelong Learning December 2016	Howard Newman, info@bluewaterlearns.com	E-mail	No	N/A

Kingsville Community - Friendly Club December 2016	tiacobelli@kingsville.ca Phone: 519-733-2305	E-mail	No	N/A
Ottawa Knitters Club December 2016	newsletter@ottawaknittingguild.ca	E-mail	Yes	No
Toronto Knitters Club December 2016	info@torontoknittersguild.ca	E-mail	Yes	Yes
Windsor Elder College December 2016	Catherine Fettes, Manager fettesc@uwindsor.ca	E-mail	No	N/A
Toronto Trillium Lions Club January 2017	N/A	Facebook message	No	N/A
Kitchener Lions Club July 2016	lionsclubkitchener@rogers.com	E-mail, Facebook message	No, recontacted in January 2017	N/A
Halton Health Unit January 2017	Cathy Dykeman cathy.dykeman@halton.ca	E-mail	Yes	Yes, posted on internal employees website
National Institute on Ageing Ted Rogers School of Management, Ryerson November 2016	Stephanie Woodward, stephanie.woodward@ryerson.ca	E-mail	Yes	N/A
Canadian Seniors January 2017	N/A	Facebook message	No	N/A

Canadian Pickelball Federation January 2017	N/A	Facebook message	No	N/A
Riverdale Lanes January 2017	N/A	Facebook message	No	N/A
Seniors in Motion Canada January 2017	N/A	Facebook message	No	N/A
Canadian Seniors Tennis January 2017	N/A	Facebook message	No	N/A
Caregiver Solutions January 2017	N/A	Facebook message	No	N/A
Ontario Dementia Advisory committee January 2017	ontariodementia@gmail.com	E-mail	No	N/A
Sudbury Rising Stars Theatre Group January 2016	Pat Parks, theatrep@t@gmail.com	E-mail	Yes	Yes
Owen Sound Scenic City January 2017	N/A	Facebook message	No	N/A
York West Active Living Centre January 2017	info@ywalc.ca	E-mail	No	N/A

BRAVO Toronto (Baycrest Research Among Volunteering Older Adults) August 2016	Tehila Tewel ttewel@baycrest.org	E-mail	Yes	Yes, but will need ethics approval letter
Ontario Society of Senior Citizen's Organization August 2016	Elizabeth Macnab ocsco@ocsco.ca, 1-800-265- 0779	E-mail, telephone	Yes, asked for e-mail with flyer	N/A
Prince Edward Island				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Prince Edward Island Retired Teachers Association July 2016	Joyce McCardle, President joyce.mccardle@pei.sympatico.ca, Ruth Sudbury, Secretary southfieldsuds@gmail.com 902-436-6664	E-mail, telephone	Yes, will e-mail president to discuss about putting it in newsletter	Yes
Hillsborough- Charlottetown Rotary Club August 2016	Dawn Alan, President	Online form	No	N/A
East Prince Seniors Initiative September 2016	902-888-2177 eastprinceseniors@live.ca	E-mail	No, recontacted October 2016	N/A
PEI 55+ Games January 2017	vvuillemot@sportpei.pe.ca	E-mail	No	N/A

Canadian Hard of Hearing Association of PEI January 2017	annmerdon@pei.sympatico.ca	E-mail	No	N/A
Seniors College UPEI January 2017	seniorscollege@upei.ca	E-mail, Facebook message	No	N/A
PEI Senior Citizens' Federation Inc. January 2017	peiscf@pei.aibn.com 902-368-900	E-mail	No	N/A

Quebec				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Club Rotary de Quebec July 2016	N/A	Online form	No	N/A
Quebec Network of Action for Females's Health (website was all in French) July 2016	rqasf@rqasf.qc.ca	E-mail	No	N/A
FADOQ Provincial Office December 2016	info@fadoq.ca	E-mail	No	N/A
Quebec Provincial Association of Retired School Educators July 2016	http://www.qparse-apperq.org/contact.htm	Online form	Yes	Yes, will post on website and Facebook

Montreal West Island Lions Club January 2017	N/A	Facebook message	No	N/A
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Saskatchewan				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Saskatoon Rotary Club July 2016	Jack Brodsky	Online form	Yes	Yes
Regina Rotary Club July 2016	N/A	Online form	No	N/A
Regina Beach and District Lions Club July 2016	president@reginabeachlions.ca	E-mail	No, recontacted January 2017	N/A
Superannuated Teachers of Saskatchewan July 2016	Fred Herron sts@sts.sk.ca 306-374-7265	E-mail, telephone	No, recontacted and October 2016	N/A
Saskatoon Health Region November 2016	general.inquiries@saskatoonhealthregion.ca	E-mail	No	N/A
Saskatoon Bowling League December 2016	canadianbowling@sasktel.net	E-mail	No	N/A
Saskatchewan Retirees Association July 2016	info@saskretirees.org, 306-584-5552	E-mail, telephone	No, recontacted and left voicemail August 2016	N/A

Saskatoon Council on Aging February 2017	admin@scoa.ca	E-mail	No	N/A
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Yukon				
Organization	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Yukon Teachers Association July 2016	Douglas Rody gensec@yta.yk.ca (867) 668-6777	E-mail	No, recontacted February 2017	N/A
Marsh Lake Community Center September 2016	marshlake@gmail.com, 867-660-4999	E-mail	No	N/A
Tagish Community Hall September 2016	recreation@tagishyukon.ca 867-399-3407	E-mail	No	N/A
Yukon Legion Branch September 2016	branch254@northwestel.net 867-667-2802	E-mail	No	N/A
Whitehorse Community Recreation Centre-Canada Games Centre September 2016	linda.rapp@whitehorse.ca 867-668-8329	E-mail	No, recontacted January 2017	N/A
Yukon Council on Aging September 2016	ycoa@yknet.yk.ca, 867-668-3383	E-mail	No, recontacted February 2017	N/A
Whitehorse General Hospital	Ashlyn Baer (no longer an employee)	Facebook message	Yes	Yes

September 2016				
Yukon Health Promotion Unit September 2016	Ian Parker Ian.Parker@gov.yk.ca, 867-456-6576	E-mail, telephone	Yes	Yes
ElderActive Recreation Association September 2016	elderactive@sportyukon.com 867-456-8252	E-mail, telephone	Yes	No
Golden Age Society September 2016	goldenagesociety@gmail.com, 867-668-5538	E-mail, telephone	Yes	No
Council of Yukon First Nations September 2016	lori.duncan@cyfn.net, (867) 393-9200	E-mail, telephone	Yes	No

National Organizations	Who we Contacted	Method of Contact	Response (Yes/No)	Permission to Recruit
Canadian Association of Retired Persons (CARP) September 2016*	E-mail	Email	Yes, e-mail blasted all members	Yes
Royal Canadian Legions July 2016	info@on.legion.ca	Online form	N/A	N/A
Parkinson Canada December 2016	Julie Wysocki, julie.wysocki@parkinson.ca	E-mail	Yes	Yes
Brain Tumour Foundation of Canada December 2016	Susan Ruypers sruypers@braintumour.ca	E-mail	Yes	Will check with marketing team to post on website

Multiple Sclerosis December 2016	Online form	Email	No, recontacted in February 2017 through Facebook message	N/A
Canadian Association of Retired Teachers (English and French) January 2017*	President, Brian Kenny bnkenny@gmail.com	E-mail	Yes, will send to each chapter leader in each province	Yes
Heart and Stroke Foundation December 2016	Online form	Online form	No, recontacted in February 2017 through Facebook message	N/A
College and University Retiree Associations of Canada December 2016	Kenneth Craig, President kcraig@psych.ubc.ca or Secretary Ed Williams: edgarwilliams@nl.rogers.com	E-mail	No	N/A
Canadian Association of Community Health Centres July 2016	http://www.cachc.ca/contact-us/	Online form	No	N/A
Canadian Gerontological Nursing Association July 2016	CGNA.office@gmail.com	E-mail	No, recontacted October 2016	N/A
National Association of Federal Retirees July 2016	info@fsna.com	E-mail	No, recontacted October 2016 and January 2017	N/A

Canadian Pensioners Concerned Inc (CPC) July 2016	canpension@gmail.com	E-mail, telephone	No, recontacted October 2016	No, closed down
Third Quarter Club July 2016	info@thirdquarter.ca	E-mail	No, recontacted October 2016	N/A
ParticipACTION July 2016*	info@participaction.com	E-mail	Yes	Yes
Active Living Coalition for Older Adults July 2016	alcoa@uniserve.com, 519-925-1676	E-mail, telephone	Yes	Yes
Canada 55+ Games July 2016	infoc55plusgames2016@brampton.ca	E-mail	Yes	No
Canadian Medical Association July 2016	memberservicecentre@cma.ca https://www.cma.ca/En/Pages/contactus.aspx	E-mail, online form	No, recontacted October 2016	N/A
Canadian Snowbird Association July 2016	Evan Rachkovsky Evan.rachkovsky@snowbirds.org, csastaff@snowbirds.org, 1-800-265-3200	E-mail, telephone	No, recontacted October 2016	N/A
Canada Square Dance Association September 2016	info@squaredance.ca, peterpiazza1948@gmail.com, 1-866-206-6696	E-mail	No, recontacted October 2016	N/A
Canadian Truck Driver's Association August 2016	info@canadiantruckersassociation.com, members@canadiantruckersassociation.com	E-mail	No, recontacted October 2016	N/A
Osteoporosis Canada November 2016	Kori Osher kosther@osteoporosis.ca	E-mail	No	N/A

Aboriginal Professional Association of Canada July 2016	executivedirector@aboriginalprofessionals.org	E-mail	No, re-contacted October 2016	N/A
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*Indicates the organization would like a copy of the results

Appendix E: List of Prescribed Medications Participants are Using

Medication Class	Individual sub-class	ATC Code	Defined Daily Dose (as per WHO)
Stomatological	Minocycline	A01AB23	1mg
	Epinephrine (EpiPen)	A01AD01	Not listed
Antacids	Aluminium hydroxide	A02AB01	Not listed
	Aluminium Hydroxide/ Magnesium Carbonate	A02AD01	10 tablets or 50ml
Drugs for peptic ulcer and gastro-oesophageal reflux disease *peptic ulcer/gastro-oesophageal reflux (PPI)	Cimetidine (Tagamet)	A02BA01	800mg
	Ranitidine (Zantac) (not PPI)	A02BA02	300mg
	Nizatidine (Axid)	A02BA04	300mg
	Omeprazole (PPI; Losec)	A02BC01	20mg
	Pantoprazole (Tecta; pantoloc) (PPI)	A02BC02	40mg
	Lansoprazole (Prevacid) (PPI)	A02BC03	30mg
	Rabeprazole (Pariet) (PPI)	A02BC04	20mg
	Esomeprazole (Nexium) (PPI)	A02BC05	30mg
	Dexlansoprazole (Dexilant) (PPI)	A02BC06	30mg
Gastrointestinal disorders	Sucralfate	A02BX02	4000mg
	Trimebutine	A03AA05	600mg
	Pinaverium (Dicetel)	A03AX04	150mg
	Butylscopolamine (Buscopan)	A03BB01	60mg
	Metoclopramide	A03FA01	30mg
Antiemetics and anti-nauseants	Domperidone	A03FA03	30mg
	Nabilone (Cesamet)	A04AD11	Not listed
Bile and liver therapy	Ursodeoxycholic acid (Ursodiol)	A05AA02	750mg
Drugs for constipation	Docusate sodium (Soflax; stool softener)	A06AA02	150mg
	Bisacodyl	A06AB02	10mg

	Senna glycosides (Senokot) Ispaghula (psylla seeds; Psyllium Husk) Lactulose Macrogel (polyethylene glycol)	A06AB06 A06AC01 A06AD11 A06AD15	Not listed 7000mg 6700mg 1000mg
Intestinal antiinflammatory agents	Diphenoxylate (Lomotil) Budesonide (Pulmicort; rhinocort) Sulfasalazine Mesalazine (Mezavant; Asacol; Pentasa; Salofalk)	A07DA01 A07EA06 A07EC01 A07EC02	15mg 9mg 2000mg 1500mg
Antiobesity preparations *anti-obesity (exlcu. diet)	Lorcaserin (Belviq) Orlistat (Xenical)	A08AA11 A08AB01	Not listed 360mg
Digestives Incl. Enzymes	Multienzymes (Cotazym; Pancrelipase)	A09AA02	Not listed
Antidiabetics: insulins and analogues *anti-diabetes (insulins)	Insulin lispro (Humalog insulin) Insulin aspart (NovoRapid) Insulin isophane NPH (human) Insulin Humulin R (human) Insulin glargine (apidra; Lantus; Toujeo) Insulin detemir (Levemir)	A10AB04 A10AB05 A10AC01 A10AD01 A10AE04 A10AE05	40units (injection) 40units (injection) 40units (injection) 40units (injection) 40units (injection) 40units (injection)
Antidiabetics: blood glucose lowering drugs, excl. Insulins *anti-diabetes (NOT insulins)	Metformin (Glucophage; Glumetza) Glibenclamide (Glyburide) Gliclazide (Diamicon) Metformin and sitagliptin (Janumet) Metformin and saxagliptin (Komboglyze) Metformin and linagliptin (Jentadueto) Metformin and Canagliflozin (Inovkana, Sulisent) Acarbose (Glucobay) Rosiglitazone (Avandia)	A10BA02 A10BB01 A10BB09 A10BD07 A10BD10 A10BD11 A10BD16 A10BF01 A10BG02	2000mg 7mg or 10mg 60mg Not listed Not listed Not listed Not listed 300mg 6mg

	Pioglitazone Sitagliptin (Januvia) Saxagliptin (Onglyza) Linagliptin (Tradjenta) Liraglutide (Saxenda; Victoza) Dapagliflozin (Forxiga) Canagliflozin (Invokamet; Invokana) Empagliflozin (Jardiance) Repaglinide (Prandin)	A10BG03 A10BH01 A10BH03 A10BH05 A10BJ02 A10BK01 A10BK02 A10BK03 A10BX02	30mg 100mg 5mg 5mg 1.2mg 10mg 200mg 17.5mg 4mg
Vitamins and Minerals *vitamins	Alfacalcidol Calcitriol (rocaltrol) Cholecalciferol (Vitamin D; colecalciferol) Thiamine (vit B1; renavite/replavite) Calcium carbonate Potassium citrate	A11CC03 A11CC04 A11CC05 A11DA01 A12AA04 A12BA02	1mcg 1mcg 20mcg 50mg 3000mg 4000mg
Antithrombotic agents	Warfarin (Coumadin) Heparin Plavix (clopidogrel bisulfate) Acetylsalicylic acid (ASA; Aspirin; Entrophen; Asaphen) Ticagrelor (Brilinta) Dabigatran etexilate (Pradaxa) Xarelto/ Rivaroxaban Apixaban (Eliquis)	B01AA03 B01AB01 B01AC04 B01AC06 B01AC24 B01AE07 B01AF01 B01AF02	7.5mg 10 TU (thousand units) 75mg 1 tablet-independent of strength 180mg 300mg 20mg 10mg
Antihemorrhagics	Tranexamic acid (Cyklokapron)	B02AA02	2000mg
Antianemic	Ferrous Fumate Ferrous gluconate Ferrous sulphate (Iron)	B03AA02 B03AA03 B03AA07	200mg 200mg 200mg

	Folic acid	B03BB01	0.4mg or 10mg
Blood substitutes and perfusion solutions	Sodium bicarbonate	B05CB04	Not listed
	KCL (potassium chloride)	B05XA01	Not listed
	Lysine	B05XB03	Not listed
Cardiac therapy	Digoxin (Toloxin; Lanoxin)	C01AA05	0.25mg
	Propafenone	C01BC03	300mg
	Flecainide	C01BC04	200mg
	Amiodarone (Cordarone)	C01BD01	200mg
	Glyceryl trinitrate (nitroglycerin)	C01DA02	5mg
	Isosorbide-5-mononitrate (Apo-ISMN)	C01DA14	40mg
	Camphor	C01EB02	150mg
Ubidecarenone (CoQ10)	C01EB09	Not listed	
Antihypertensive	Methyldopa (levorotatory)	C02AB01	1000mg
	Clonidine	C02AC01	0.45mg
	Prazosin	C02CA01	5mg
	Doxazosin (Cardura)	C02CA04	4mg
	Hydralazine	C02DB02	100mg
	Minoxidil (Rogaine)	C02DC01	20mg
Cardiovascular Agents diuretics *anti-hypertensive (diuretics)		C03AA03	25mg
	Hydrochlorothiazide (plain; hydrodiuril)		
	Diuretics (thiazides; hydrochlorothiazide and potassium; spironolactone hctz; novo-triamzide, Aldactazide)	C03AB03	25mg
Chlortalidone	C03BA04	25mg	
Indapamide (Lozide)	C03BA11	2.5mg	

	Furosemide (Lasix; Edema; Novosemide) Spironolactone (Aldactone) Amiloride Triamterene (Dyazide) Hydrochlorothiazide and potassium sparing agents (hydrochlorothiazide and amiloride; hydrochlorothiazide and triamterene-e.g. triazide) Altizide and potassium sparing agents (Teva -Spirozine)	C03CA01 C03DA01 C03DB01 C03DB02 C03EA01 C03EA04	40mg 75mg 10mg 100mg Not listed Not listed
Peripheral vasodilators	Pentoxifylline	C04AD03	1000mg
Cardiovascular Agents beta-blockers (BB) *anti-hypertensive (BB)	Pindolol Propranolol Timolol Sotalol Nadolol (Corgard) Metoprolol (Lopressor) Atenolol (Tenormin) Acebutolol Bisoprolol fumarate Nebivolol (Bystolic) Carvedilol (Coreg)	C07AA03 C07AA05 C07AA06 C07AA07 C07AA12 C07AB02 C07AB03 C07AB04 C07AB07 C07AB12 C07AG02	15mg 160mg 20mg 160mg 160mg 150mg 75mg 400mg 10 mg 5mg 37.5mg
Cardiovascular Agents (angiotensin converting enzyme inhibitors) *anti- hypertensive (ACE)	Captopril Lisinopril (Prinivil) Perindopril (Coversyl) Ramipril (Altace) Quinapril (Acupil)	C09AA01 C09AA03 C09AA04 C09AA01 C09AA02	50mg 10mg 4mg 2.5mg 15mg

	Cilazapril Fosinopril Trandolapril (Mavik) Lisinopril and diuretics (Zetoretic; Prinzide)	C09AA03 C09AA04 C09AA05 C09AA06	2.5mg 15mg 2mg Not listed
	Perindopril and diuretics (+HCTZ; Coversyl plus HD) Ramipril HCTZ Quinapril and diuretics (Accuretic/Accupril) Cilazapril and diuretics Perindopril and amlodipine (Viacoram)	C09AA08 C09AA09 C09AA10 C09BA03 C09BA04	Not listed Not listed Not listed Not listed Not listed
Cardiovascular Agents angiotensin II receptor antagonist (A2RA) *anti-hypertensive (A2RA)	Olmesartan (olmesartan medoxomil; Benicar; Olmetec)	C09CA08	20mg
	Losartan (Cozaar)	C09CA01	50mg
	Valsartan (Diovan)	C09CA03	80mg
	Irbesartan	C09CA04	150mg
	Candesartan (Atacand; Cilexetil)	C09CA06	8mg
	Telmisartan (Micardis)	C09CA07	40mg
	Losartan HCTZ (A2RA and diuretic)	C09DA01	Not listed
	Valsartan and diuretics (HCTZ)	C09DA03	Not listed
	Irbesartan and diuretics (Avalide; Avapro)	C09DA04	Not listed
	Candesartan and diuretics (HCT) (candesartan plus)	C09DA06	Not listed
	Telmisartan and diuretics (Sandoz; Micardis Plus)	C09DA07	Not listed
	Olmesartan and diuretics (Olmetec Plus)	C09DA08	Not listed
	Valsartan and amlodipine (Exforge)	C09DB01	Not listed
Telmisartan and amlodipine (Twynsta)	C09DB04	Not listed	
Candesartan HCTZ (candesartan and amlodipine; A2RA and CCB)	C09DB07	Not listed	

Cardiovascular Agents calcium-channel blocker (CCB) *anti- hypertensive (CCB)	Amlodipine (Norvasc; amlodipine besylate)	C08CA01	5mg
	Felodipine (Plendil; Renedil)	C08CA02	5mg
	Nifedipine (Adalat; Mylan)	C08CA05	30mg
	Nitrendipine	C08CA08	20mg
	Verapamil	C08DA01	240mg
	Diltiazem (Tiazac XC; Cardizem)	C08DB01	240mg
	Amlodipine and diuretic	C08GA02	Not listed
Cardiovascular Agents *lipid modifying agents (statin)	Simvastatin (Zocor)	C10AA01	30mg
	Lovastatin	C10AA02	45mg
	Pravastatin	C10AA03	30mg
	Fluvastatin (Lescol XL)	C10AA04	60mg
	Atorvastatin (lipitor; lipid modifying)	C10AA05	20mg
	Rosuvastatin (Crestor)	C10AA07	10mg
	Bezafibrate (Bezalip; fibrate)	C10AB02	600mg
	Gemfibrozil (Lopid)	C10AB04	1200mg
	Fenofibrate	C10AB05	200mg (micronised)
	Cholestyramine / Colestyramine (Olestyr)	C10AC01	14000mg
	Nicotinic acid (Niaspam, Niacin)	C10AD02	2000mg
Ezetimibe (teva ezetimibe; ezetrol)	C10AX09	10mg	
Amlodipine and atorvastatin	C10BX03	Not listed	
Dermatological (topical)	Clotrimazole	D01AC01	Not listed
	Fluconazole	D01AC15	Not listed
	Ciclopirox (Loprox)	D01AE14	Not listed
	Hyaluronic acid	D03AX05	Not listed
	Diphenhydramine	D04AA32	Not listed
	Calcipotriol, combinations	D05AX52	Not listed
	Hydrocortisone	D07AA02	Not listed
	Betamethasone	D07AC01	Not listed

	Fluocinonide (Lyderm) Taro-Mometasone Fluticasone (Propaderm; Flonace) Clobetasol Minoxidil (Rogaine)	D07AC08 D07AC13 D07AC17 D07AD01 D11AX01	Not listed Not listed Not listed Not listed Not listed
Gynecological antiinfectives and antiseptics *antiinfectives gynecological	Lactobacillus Fermentum (Align) Metronidazole	G01AX14 G01AF01	Not listed 500g
Sex hormones	Medroxyprogesterone Testosterone (Delatestryl) Estradiol (estrogel; vagifem; estradot; estrogen) Estiol Premarin: conjugated estrogens Progesterone (progesterone prometrium) Raloxifene (Evista)	G03AC06 G03BA03 G03CA03 G03CA04 G03CA57 G03DA04 G03XC01	1.67mg 18mg (injection); 120mg (oral) 0.5mg (nasal); 2mg (oral) 2mg 0.625mg 300mg (oral) or 5mg (needle) or 200mg (rectal) or 90mg (vaginal) 60mg
Urologicals	Tolterodine (Detrol) Oxybutynin Solifenacin (Vesicar) Trospium (Trosec) Darifenacin (Enablex) Fesoterodine (Toviaz) Mirabegron (Myrbetriq) Sildenafil (Viagara) Tadalafil (Cialis)	G04BD07 G04BD04 G04BD08 G04BD09 G04BD10 G04BD11 G04BD12 G04BE03 G04BE08	4mg 15mg 5mg 40mg 7.5mg 4mg 50mg 50mg 10mg

	Pentosan polysulfate sodium (Elmiron) Alfuzosin (Xatral) Tamsulosin (Flomax) Terazosin (Hytrin) Silodosin (Rapaflo) Finasteride (Proscar) Dutasteride (Avodart)	G04BX15 G04CA01 G04CA02 G04CA03 G04CA04 G04CB01 G04CB02	Not listed 7.5mg 0.4mg 5mg 8mg 5mg 0.5mg
Systemic hormonal preparations, excl sex hormones and insulins *systemic hormones (NOT sex or insulins)	Desmopressin Triamcinolone Prednisone Hydrocortisone (anusol; cortef) Cortisone Cinacalcet (sensipar)	H01BA02 H02AB08 H02AB07 H02AB09 H02AB10 H05BX01	0.4mg 7.5mg 10mg 30mg 37.5mg 60mg
Thyroid hormones	Levothyroxine sodium (synthetic; eltroxin; synthroid; thyroxin) Liothyronine (Cytomel) Thyroid gland preparations Methimazole (Tapazole)	H03AA01 H03AA02 H03AA05 H03BB02	0.15mg 0.06mg Not listed 10mg
Antibacterials for systemic use	Doxycycline (Periostat) Amoxicillin Cefalexin Trimethoprim/sulfamethoxazole (Septra) Erythromycin Ciprofloxacin Metronidazole (Metrocream) Nitrofurantoin (Macrobid) Rifampin	J01AA02 J01CA04 J01DB01 J01EE01 J01FA01 J01MA02 J01XD01 J01XE01 J04AB02	100mg 1000mg 2000mg Not listed 1000mg or 2000mg tablets 1000mg 1500mg 200mg 600mg

Antiinfectives for systemic use *antivirals	Aciclovir	J05AB01	4000mg	
	Famciclovir	J05AB09	750mg	
	Valaciclovir (Valtrex)	J05AB11	3000mg	
Endocrine therapy	Medroxyprogesterone	L02AB02	1000mg	
	Goserelin (Zoladex)	L02AE03	Implant	
	Tamoxifen (Nolvadex)	L02BA01	20mg	
	Anastrozole (arimidex-breast cancer)	L02BG03	1mg	
	Letrozole	L02BG04	2.5mg	
Antineoplastic and immunomodulating agents (immunosuppressants)	Etoposide (Placid)	L01CB01	Not listed	
	Nilotinib (Tasigna)	L01XE08	Not listed	
	Bortezomib	L01XX32	Not listed	
	Rebif (interferon beta-1a)	L03AB07	0.0043mg	
	Glatiramer acetate (Copaxone)	L03AX13	20mg (injection)	
	Mycophenolic acid (Cellcept; Myortic)	L04AA06	2000mg (as mycophenolate mofetil)	
	Leflunomide (apo-leflunomide; Arava)	L04AA13	20mg	
	Abatacept (Orencia)	L04AA24	27mg (injection)	
	Apremilast (Otezla)	L04AA32	60mg	
	Etanercept (Enbrel)	L04AB01	7mg (injection)	
	Infiximab (remicade)	L04AB02	3.75mg (injection)	
	Adalimumab	L04AB04	2.9mg	
	Golimumab	L04AB06	1.66mg (injection)	
	Ciclosporin (cyclosporine; restasis)	L04AD01	250g	
	Tacrolimus (Prograf; Advagraf)	L04AD02	5mg	
	Antiinflammatory and antirheumatic	Azathioprine (Imuran)	L04AX01	150mg
		Methotrexate	L04AX03	2.5mg
Lenalidomide (Revlimid)		L04AX04	10mg	
Antiinflammatory and antirheumatic	Indomethacin	M01AB01	100mg	

products, non-steroids *NSAID	Diclofenac (Voltaren; Cambia) Ketorolac (Maxalt) Diclofenac combinations (Arthrotec/misoprostol) Meloxicam (Mobicox) Ibuprofen (Advil) Naproxen (Naprosyn) Naproxen and esomeprazole (Vimovo) Celecoxib (celebrex) Glucosamine Chondroitin sulfate	M01AB05 M01AB15 M01AB55 M01AC06 M01AE01 M01AE02 M01AE52 M01AH01 M01AX05 M01AX25	100mg 30mg 100mg 15mg 1200mg 500mg 500mg (refers to naproxen) 200mg 1500mg Not listed
Muscle relaxants	Methocarbamol Baclofen Cyclobenzaprine (Flexeril) Hydroquinine	M03BA03 M03BX01 M03BX08 M09AA01	3000mg 50mg (oral); 0.55mg (injection) Not listed 200mg
Antigout	Allopurinol (Zyloprim) Febuxostat (Uloric) Colchicine	M04AA01 M04AA03 M04AC01	400mg 80mg 1mg
Drugs for bone disease	Etidronic acid Alendronic acid (Fosomax) Risedronic acid (mylan-risedronic; Actonel) Zoledronic acid (Aclasta) Etidronic acid and calcium (Didrocal) Alendronic acid and colecalciferol (Fosavance) Denosumab (Prolia)	M05BA01 M05BA04 M05BA07 M05BA08 M05BB01 M05BB03 M05BX03	400mg 10mg 5mg 4mg (injection) 400mg (refers to etifronic acid) 10mg (refers to alendronic acid) 330mg
Analgesics	Morphine	N02AA01	100mg

	Hydromorphone (Dilaudid)	N02AA03	20mg (oral); 4mg (injection)
	Oxycodone (Supeudol; Oxyneo)	N02AA05	75mg
	Oxycodone and naloxne (Targin)	N02AA55	75mg (refers to oxycodone)
	Codeine (combinations with psycholeptics, non opioid)	N02AA79	Not listed
	Fentanyl	N02AB03	0.6mg (nasal or sublingual/buccal); 1.2mg transdermal
	Buprenorphine (Butran)	N02AE01	1.2mg
	Codeine and paracetamol (Empracet)	N02AJ06	Not listed
	Tramadol and paracetamol	N02AJ13	Not listed
	Tramadol (Ralivia)	N02AX02	300mg
	Acetylsalicylic acid, combination (excl psycholeptics)	N02BA51	Not listed
	Tylenol (acetaminophen/paracetamol)	N02BE01	3000mg
	Tylenol 2 (with codeine)	N02BE51	Not listed
	Tylenol 3 (with codeine) (Emtec)	N02BE51	Not listed
	Sumatriptan (Imitrex)	N02CC01	50mg
	Zolmitriptan (Zomig)	N02CC03	2.5mg
	Rizatriptan	N02CC04	10mg
	Almotriptan (Axert)	N02CC05	12.5mg
	Eletriptan (Relpax)	N02CC06	40mg
	Percocet (oxycodone and paracetamol)	N02AJ17	Not listed
Anti-epileptics	Phenobarbital (also used as a sedative)	N03AA02	100mg
	Primidone	N03AA03	1250mg
	Phenytoin (Dilantin)	N03AB02	300mg
	Clonazepam	N03AE01	8mg

	Carbamazepine (Tegretol) Valproic acid (Epival; Divalproex) Lamotrigine Topiramate (Topamax) Gabapentin (Neurontin) Levetiracetam (Keppra) Lyrica (Pregabalin)	N03AF01 N03AG01 N03AX09 N03AX11 N03AX12 N03AX14 N03AX16	1000mg 1500mg 1500mg 300mg 1800mg 300mg 300mg
Nervous System *anti-parkinson	Benzatropine Levodopa Apo-levodopa (levodopa and decarboxylase inhibitor; levodopa/carbidopa/Sinemet) Stalevo (Carbidopa, Levodopa, and Entacapone) Amantadine Pergolide Ropinirole Pramipexole (Mirapex) Rotigotine Selegiline Rasagiline (mesylate; Azilect)	N04AC01 N04BA01 N04BA02 N04BA03 N04BB01 N04BC02 N04BC04 N04BC05 N04BC09 N04BD01 N04BD02	2mg 3500mg 600mg (refers to levodopa) 450mg (refers to levodopa) 200mg 3mg 6mg 2.5mg 6mg (TD patch) 5mg 1mg
Psycholeptics	Lurasidone (antipsychotic; Latuda) Olanzapine (antipsychotic) Quetiapine (seroquel; anti-psychotic) Lithium (antipsychotic) Aripiprazole (Abilify; anti-psychotic) Diazepam (anxiolytic; Valium) Oxazepam (anxiolytics) Potassium Clorazepate (anxiolytic)	N05AE05 N05AH03 N05AH04 N05AN01 N05AX12 N05BA01 N05BA04 N05BA05	60mg (as hydrochloride) 10mg 400mg 24mmol 15mg 10mg 50mg 20mg

	Lorazepam (anxiolytics; Ativan)	N05BA06	2.5mg
	Alprazolam (anxiolytics; Xanax)	N05BA12	1mg
	Hydroxyzine (anxiolytics)	N05BB01	75mg
	Bupirone (anxiolytics)	N05BE01	30mg
	Nitrazepam (hypnotics & sedatives; Mogadon)	N05CD02	5mg
	Temazepam (hypnotic & sedative)	N05CD07	20mg
	Zopiclone (Imovane; hypnotic & sedative)	N05CF01	7.5mg
	Zolpidem (Ambien; hypnotic & sedative)	N05CF02	10mg
	Melatonin (hypnotic & sedative)	N05CH01	2mg
Anti-depressants	Desipramine (Norpramin; TCA)	N06AA01	100mg
	Imipramine (Tofranil; Non-selective monoamine reuptake inhibitors)	N06AA02	100mg
	Clomipramine (MRI)	N06AA04	100mg
	Trimipramine (TCA)	N06AA06	150mg
	Amitriptyline (Elavil; TCA)	N06AA09	75mg
	Nortriptyline (TCA)	N06AA10	75mg (oral); 30mg (injection)
	Doxepin (TCA)	N06AA12	100mg
	Fluoxetine (Prozac; SSRI)	N06AB03	20mg
	Citalopram (Celexa; SSRI)	N06AB04	20mg
	Paroxetine (SSRI; Paxil)	N06AB05	20mg
	Sertraline (Zoloft; SSRI)	N06AB06	50mg
	Fluvoxamine (Luvox; SSRI)	N06AB08	100mg
	Escitalopram (CipraleX/Lexapro; SSRI)	N06AB10	10mg
	Tryptophan	N06AX02	Not listed
	Trazodone (SARI)	N06AX05	300mg
	Mirtazapine (Remeron; NaSSA)	N06AX11	30mg
	Bupropion (Wellbutrin; Zyban NDRI?)	N06AX12	300mg

	Venlafaxine (Effexor; SSNRI) Duloxetine (Cymbalta; SSNRI) Desvenlafaxine (Pristiq; SNRI) Vortioxetine (Trintellix; Brintellix; atypical)	N06AX16 N06AX21 N06AX23 N06AX26	100mg 60mg 50mg 10mg
Psychoanaleptics	Amfetamine (Adderall) Dexamfetamine Methylphenidate (Ritalin; Concerta) Modafinil (Altertec) Lisdexamfetamine Donepezil (anti-dementia) Menmantine	N06BA01 N06BA02 N06BA04 N06BA07 N06BA12 N06DA02 N06DX01	15mg 15mg 30mg 300mg 30mg 7.5mg 20mg
Other nervous system drugs	Pyridostigmine Bromide (Mestinon) Naltrexone Bethahistine (antivertigo) Riluzole Tecfidera (Dimethyl fumarate)	N07AA02 N07BB04 N07CA01 N07XX02 N07XX09	180mg (oral); 10mg (injection) 50mg 24mg 100mg 480mg
Antiparasitic	Hydroxychloroquine (Plaquenil) Quinine sulphate Pentamidine Isethionate	P01BA02 P01BC01 P01CX01	516mg 1500mg 280mg
Corticosteroids *nasal preparations	Xylometazoline (Ortivin) Betamethasone Beclometasone dispropionate (QVar) Mometasone (Nasonex) Fluticasone furoate (Flovent; Avamys; Flonase) Ipratropium bromide	R01AA07 R01AA06 R01AD01 R01AD09 R01AD12 R01AX03	0.8mg 0.4mg 0.4mg 0.2mg 0.11mg 0.24mg
Drugs for obstructive airway diseases	Salbutamol (Ventolin; apo-salvent)	R03AC02	0.8mg (aerosol, powder); 10mg (solution)

*adrenergics, inhalants	Terbutaline (Bricanyl turbohaler)	R03AC03	2mg (inhale aerosol; powder); 20mg (inhale solution)
	Salmeterol (Serevent)	R03AC12	0.1mg (inhale aerosol)
	Salmeterol and fluticasone (advair diskus)	R03AK06	Not listed
	Formoterol and budesonide (Symbicort)	R03AK07	Not listed
	Formoterol and mometasone (Zenhale)	R03AK09	Not listed
	Vilanterol and fluticasone furoate (Breo)	R03AK10	Not listed
	Vilanterol and unmeclidinium bromide (Anoro)	R03AL03	Not listed
	Indacaterol and glycopyrronium bromide	R03AL04	Not listed
	Formoterol and aclidinium bromide (Genuair Duaklir)	R03AL05	Not listed
	Olodaterol and tiotropium bromide (Spiolto respimat)	R03AL06	Not listed
	Ciclesonide (Omniair/Omnaris/Alvesco)	R03AB08	0.16mg
	Ipratropium bromide	R03BB01	0.24mg
	Tiotropium bromide (Spiriva)	R03BB04	10mcg (inhale powder); 5mcg (inhale solution)
	Aclidinium bromide (anticholinergics; tudorza genuair)	R03BB05	0.644 mg inhale powder
Glycopyrronium bromide (Seebri)	R03BB06	0.044mg	
Cromoglicic acid (Sodium Cromoglycate)	R03BC01	40mg (inhale aerosol)	
Montelukast (Singulair)	R03DC03	10mg	
Cough and cold suppressants	Codeine	R05DA04	100mg
Antihistamines	Dimenhydrinate (Gravol)	R06AA04	2mg
	Alimemazine (Panectyl)	R06AD01	30mg
	Cetirizine (Reactine)	R06AE07	10mg
	Loratadine (Claritin)	R06AX13	10mg

	Ketotifen (Zaditor)	R06AX17	2mg
	Fexofenadine (Allegra)	R06AX26	120mg
	Desloratadine (Aerius)	R06AX27	5mg
Ophthalmological	Loteprednol	S01BA14	Not listed
	Brimonidine (Alphagan)	S01EA05	Not listed
	Pilocarpine (Salagen)	S01EB01	0.4ml
	Acetazolamide	S01EC01	750mg
	Dorzolamide (Dorzotimolol)	S01EC03	0.3ml
	Brinzolamide (Azopt, Befardin)	S01EC04	0.2ml
	Timolol	S01ED01	Not listed
	Timolol, combinations (Cosopt; Xalacom; Duotrav; Combigan; timolol maleate; Azarga)	S01ED51	Not listed
	Latanoprost (Xalatan)	S01EE01	Not listed
	Bimatoprost (Lumigan; Luminex)	S01EE03	Not listed
	Travoprost (Travatan)	S01EE04	Not listed
	Nedocromil (Alocril)	S01GX04	Not listed
	Olopatadine	S01GX09	Not listed
Ranibizumab (Lucentis)	S01LA04	Not listed	
Otologicals	Dexamethasone (Decadron)	S02BA06	Not listed