ARTHRITIS RESEARCH CANADA

2025 2026

IMPACT REPORT



OUR RESEARCH MOVES PEOPLE









MISSION STATEMENT

Our Mission is to transform the lives of people impacted by arthritis through patient-centred research and engagement.

ARTHRITIS RESEARCH CANADA

VISION STATEMENT

A world where people living with arthritis can thrive.

ABOUT US

More than 6 million Canadians live with arthritis, making it one of the country's most common chronic diseases. Yet arthritis remains one of the least-funded areas of health research.

Arthritis Research Canada/Arthrite-recherche Canada is a national non-profit and a leader in clinical arthritis research. We bring together scientists, clinicians, trainees, patients, and partner institutions across Canada to conduct patient-centred research that improves the prevention, treatment, and care of arthritis and other rheumatic diseases.

Patients are active partners throughout the research process, helping ensure our work addresses real-world priorities and leads to practical solutions that improve the lives of people living with arthritis

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ÉNONCÉ DE MISSION

Notre mission est de transformer la vie des personnes touchées par l'arthrite grâce à la recherche et l'engagement des patients.

ARTHRITE RECHERCHE CANADA

ÉNONCÉ DE VISION

Un monde où les personnes atteintes d'arthrite peuvent vivre pleinement.

QUI NOUS SOMMES

Plus de 6 millions de Canadiens vivent avec l'arthrite, ce qui en fait l'une des maladies chroniques les plus fréquentes. Pourtant, l'arthrite reste l'un des domaines de la recherche en santé les moins financés.

Arthrite-recherche Canada/Arthritis Research Canada est un organisme national à but non lucratif et un chef de file en recherche clinique sur l'arthrite. Nous réunissons des scientifiques, des cliniciens, des stagiaires, des patients et des institutions partenaires à travers le Canada, afin de mener des recherches centrées sur les patients qui améliorent la prévention, le traitement et les soins pour l'arthrite et d'autres maladies rhumatismales.

Les patients sont des partenaires actifs tout au long du processus de recherche, contribuant ainsi à garantir que nos travaux répondent aux priorités concrètes et engendrent des solutions pratiques qui améliorent la vie des personnes vivant avec l'arthrite.

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Arthritis Research Canada's scientists and staff respectfully acknowledge the First Peoples on whose traditional territories they live and work across Canada. We express our gratitude to the keepers of the land and our commitment to learning, reflecting and taking actions towards Truth and Reconciliation.



Message from the Board Chair

JORDAN LANGLOIS
Partner, Kornfeld LLP

This past year was one of purposeful growth for Arthritis Research Canada/Arthrite-recherche Canada, as we strengthened our leadership in arthritis research while building the foundation for long-term success. The Board's focus extended to ensuring the structures were in place to support continued growth and impact.

Recognizing the importance of philanthropy to research, the Board established a new Fundraising Committee to guide our fundraising strategy, bringing together diverse expertise to expand philanthropic partnerships. We also welcomed new members to our Finance Committee, bringing fresh perspectives while maintaining strong financial stewardship and risk oversight.

These initiatives reflect our commitment to strong governance and confidence in Arthritis Research Canada's future. Combined with our refreshed brand and renewed focus on engagement, we are well positioned to broaden our impact across Canada.

On behalf of the Board, thank you to everyone who makes our work possible. Together, we are advancing discovery and bringing hope to over six million Canadians living with arthritis.

Board of Directors

JORDAN LANGLOIS
Chair

NORMA BILN
Vice-Chair and Fundraising Chair

KRIS DATTANI
Director

KEVIN JOY
Director

RODRIGUE LUSSIER
Finance Chair - Outgoing

JOY MACPHAIL
Director

SAMANTHA ROGERS
Arthritis Patient Advisory Board (APAB) Chair

WILLIAM SAPPHIRE
Finance Chair - Incoming

ANNA SHOJANIA
Nominations Chair

JATINDER SIDHU
Director

ERICK ZANKER
Director



Message from the Executive Director

MICHELLE TICE

This past year marked an important chapter for Arthritis Research Canada/Arthrite-recherche Canada, as we advanced research that improves lives while strengthening the organization behind it.

As the burden of arthritis grows, so does the need for research to improve prevention, treatment, and care. Meeting this challenge requires scientific excellence and the ability to engage the people and partners who make discovery possible.

This year, we launched a refreshed brand and a new website that reflect who we are today, giving us a stronger platform to share our impact and connect donors, partners, and the community with our research.

Building on this momentum, we expanded our fundraising efforts, launching MOVE with Arthritis Research, an initiative that encourages Canadians to get active and connects them to the research they support. We also advanced the Arthritis Future Fund, including the Dr. John Esdaile Professorship in Arthritis Research at UBC, securing research leadership for generations.

Thanks to our donors, volunteers, and partners, we will keep accelerating discoveries toward a better quality of life for people with arthritis.



Message from the Scientific Director

DR. DIANE LACAILLE

As I reflect on the scientific achievements this past year, I am extremely proud of the impactful work of our scientists, trainees, and patient partners. It has been another very successful year for grants amidst a highly competitive environment where research funding is scarce. We continue to invest in the next generation of scientists, as they are the future of arthritis research!

We expanded further our scientific team with four new scientists and clinical investigators, broadening our expertise and the scope of our research. We are tackling problems of utmost importance, including back pain, the leading cause of disability and work loss.

Our scientists continue to push boundaries with innovative research, such as using AI to improve care, investigating novel treatments using cell therapies, and discovering biomarkers to improve early detection and predict disease and treatment response. All with one goal in mind: better care for better health outcomes, so people with arthritis can live without limitations.

This was possible thanks to the support of our donors and partners.

Arthritis Research Canada at a Glance

THE PEOPLE BEHIND THE RESEARCH

Working across five provinces, we bring together some of the brightest minds in the country.

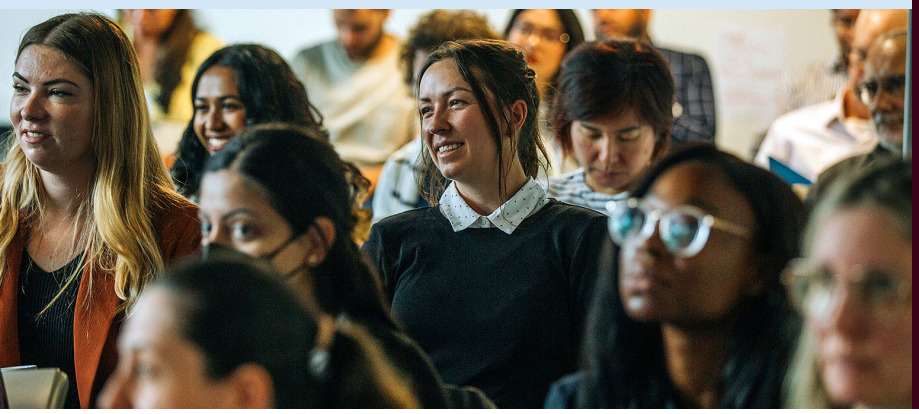
100+ Scientists, Trainees and Staff

OUR ANNUAL SCIENTIFIC RETREAT

For the 12th year, our Scientific Retreat brought trainees, scientists, and patient partners together to learn, connect, and grow.

52 Researchers, trainees and patient partners attended

- **20** Researchers
- **28** Trainees
- **6** Patient Partners



RESEARCH DISCIPLINES

Our expertise spans a range of disciplines related to living with arthritis.

- RHEUMATOLOGY
- PHYSIOTHERAPY
- OCCUPATIONAL THERAPY
- KINESIOLOGY
- PSYCHOLOGY
- PHARMACEUTICAL SCIENCES
- HEALTH ECONOMICS
- BIOSTATISTICS
- HEALTH SERVICES RESEARCH
- EPIDEMIOLOGY
- PUBLIC HEALTH
- IMPLEMENTATION SCIENCES
- KNOWLEDGE MOBILIZATION



ARTHRITIS RESEARCH CANADA

RESEARCH AWARDS & GRANTS

This year's funding supported the people on our team driving arthritis research forward through research project grants and salary awards.

Salary Awards:	**$1.7M**
Research Project Grants:	**$6.1M**

A total of $7.8M in foundational funding is leveraged for additional impact.

RESEARCH PUBLICATIONS

Our research findings were shared widely, advancing knowledge and shaping care for people living with arthritis

313 Papers

176 Abstracts

PATIENTS AT THE CENTRE OF OUR RESEARCH

Volunteers living with arthritis bring their firsthand experience directly into our research through our Arthritis Patient Advisory Board (APAB) and Citoyens partenaires intéressés par la recherche sur l'arthrite (C-PIRA).

20 APAB members

5 C-PIRA members







Patient Engagement in Research



ARTHRITIS PATIENT ADVISORY BOARD

Patients are at the centre of our research because the people who live with arthritis every day understand it best.

This partnership is built into how we work. Our Arthritis Patient Advisory Board (APAB) and Citoyens partenaires intéressés par la recherche sur l'arthrite (C-PIRA) form a national network of patient partners who bring expertise from their lived experience to the research teams, and who participate in all levels of decision-making at Arthritis Research Canada, including our Board of Directors. Patient partners provide invaluable insights into the design of studies, are involved every step of the way as the research unfolds, and play a key role in getting the right message to the people who can benefit from our research. They help turn complex findings into plain-language resources patients can actually use. Their voice ensures every project stays grounded in what matters most: real improvements in daily life for people with arthritis.

> As a lifelong learner, it's been amazing to contribute to knowledge while also being a recipient of it. Researchers are genuinely eager to hear our perspective. It's a space where a single comment can spark a new idea or direction. After a decade on the Arthritis Patient Advisory Board, I've seen how the 'nothing about us, without us' credo has improved the research and helped make real change in the lives of those living with it.

Shanon McQuitty
Arthritis Patient Advisory Board Member

> In studies I have worked on with our patient partners, the collaboration shifted our research from what we thought mattered to what actually mattered. It's a non-negotiable. If our work is going to matter, we have to involve the people it's meant to help.

Jasmin Ma, PhD, P.Kin
Arthritis Research Canada Clinician Investigator

2400+ People registered for Education Series webinars in the past year

ARTHRITIS RESEARCH EDUCATION SERIES

Innovative research has real impact the moment it reaches the people living it.

For the past six years, with the support of Educational Grants-In-Aid from pharmaceutical partners, Arthritis Research Canada/Arthrite-recherche Canada has delivered three annual Education Series webinars for people affected by arthritis. The purpose is to provide timely, evidence-based information and opportunities to engage with leading experts in arthritis research and care.

Each session translates our latest research into accessible, practical education, covering the everyday realities of living with arthritis and related autoimmune rheumatic diseases. Past topics have included pain management and exercise, sleep, fall prevention, mental health, staying employed, and navigating medication changes.

In fiscal year 2025, we brought people together around the following topics:

- Arthritis and Weight
- Osteoporosis and Bone Health
- How AI can Support Your Health

More than 2,400 people registered across the series, with an average of over 250 viewers joining each live session and thousands more reached through website views and on-demand viewing.

The series has become a trusted bridge between research and daily life, helping individuals with arthritis, caregivers and healthcare professionals better understand advances in treatment, self-management strategies and emerging areas of research. Through live webinar sessions, on-demand replays and knowledge-sharing opportunities, it connects people directly with the experts advancing arthritis care.







The generosity of our education partners makes the Education Series possible, helping us turn research into real understanding for the people who need it most.

Research Connected Across Canada

Arthritis Research Canada/Arthrite-recherche Canada brings together researchers, clinicians, trainees, and patient partners from leading universities across Canada. Headquartered in Vancouver and connecting scientists from coast to coast, we operate as one unified research network, accelerating discovery and advancing research that improves prevention, treatment, care, and quality of life for millions of people living with arthritis and other rheumatic diseases.

9 CITIES

Vancouver (Head Office)
Calgary
Edmonton
London
Toronto
Montreal
Sherbrooke
Quebec City
Halifax



6M+ Canadians of all ages living with arthritis

200+ Research studies

11 MAJOR UNIVERSITIES

- University of British Columbia
- Simon Fraser University
- University of Calgary
- University of Alberta
- University of Western Ontario
- University of Toronto
- Université de Montréal
- McGill University
- Université de Sherbrooke
- Université Laval
- Dalhousie University





Arthritis Trainee Network

Arthritis is a lifelong, complex disease. Finding the answers that help people live well takes generations of researchers, each building on the discoveries before them and asking new questions.

Arthritis Research Canada/Arthrite-recherche Canada recognizes mentorship as critical to that continuity, and has made it a deliberate part of our strategic mission. Led by Dr. Mary De Vera, Associate Director of Training and Senior Scientist, our Arthritis Trainee Network supports Master's, Ph.D., and postdoctoral students across the country, giving them hands-on mentorship from our multidisciplinary team of world-renowned researchers.

This network gives trainees the opportunity to work collaboratively across disciplines and research centres, to build the skills that will carry them through their future careers, and to strengthen a robust training pipeline for arthritis research in Canada.

In October 2025, 28 of our trainees came together with 20 researchers and 6 patient partners for the Annual Scientific Retreat in Vancouver, which featured a dedicated Trainee Day, trainee research presentations, a three-minute thesis competition, and a one-on-one mentoring breakfast pairing trainees with scientists.

47 Trainees in our network

> The Trainee Network has been valuable for my training as a graduate student because it offers meaningful and diverse research opportunities for professional development, networking, and practical skill building. What I gained from attending the Arthritis Research Canada conferences prepared me and other students for our future careers, while providing tangible achievements that can strengthen a CV.

Jocelyn Thomas BSc (Hons), PhD student
University of Calgary



TRAINING FUTURE LEADERS

Behind Arthritis Research Canada's work is a new generation learning to lead. Each year, our Trainee Network welcomes graduate students at the master's, Ph.D., and postdoctoral level working across a range of disciplines relevant to living with arthritis.

Meet a few of the trainees contributing to this work.



Nicole Anderson, MA

PhD student, Psychology
McGill University

Understanding the realities of raising young children while living with inflammatory arthritis to develop mental health resources to support parents.



Ildephonse Nduwimana, MSc, PhD

Postdoctoral Fellow, Physiotherapy
Université Laval

Testing novel interventions and models of care for treating chronic musculoskeletal pain and chronic low back pain among Canadian veterans.



Juel Chowdhury, Public Health MD

PhD student, Medicine
University of Alberta

Digital health and AI use in healthcare: validating and implementing an AI chatbot to support patient education and clinical decision-making in rheumatology.



Barath Ramanathan

MD-MSc student, Immunology
Université de Sherbrooke

Translational research: understanding the immune characteristics and role of B cells in a newly described type of myositis, an inflammatory muscle disease.



Daniel Gillespie, PT, PhD

Postdoctoral Fellow, Medicine
University of Calgary

Telehealth strategies to enhance access to physiotherapy services for people with disabilities, particularly in remote communities.



Alicia Tran

MSc student, Medical Sciences
University of Toronto

How sex- and gender- differences shape disease presentation and treatment outcomes in psoriatic arthritis.



Nejat Hassen, MSc

PhD student,
Rehabilitation Sciences
University of British Columbia

Designing culturally relevant strategies to support strength training in Muslim women with rheumatoid arthritis.



Dwayne Tucker, MSc, PhD

Postdoctoral Fellow,
Pharmaceutical Sciences
University of British Columbia

Applying machine learning to real-world health data to study treatment patterns and health outcomes, informing care for people with rheumatic diseases.

Innovation with Purpose



Arthritis is Canada's most common chronic disease, and the tools we have to address it are changing faster than ever before.

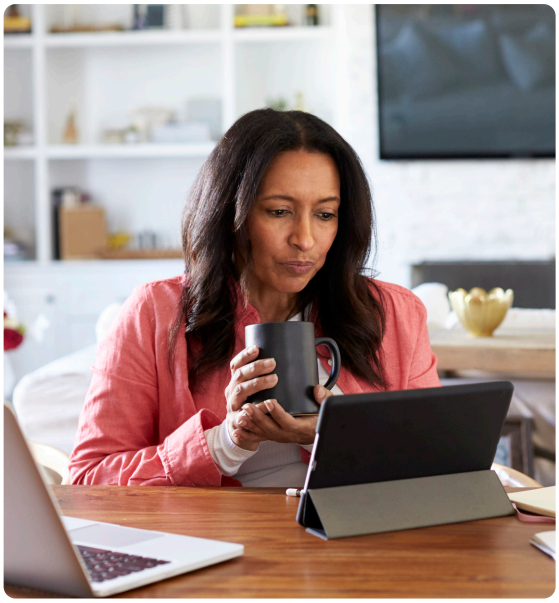
At Arthritis Research Canada/Arthrite-recherche Canada, our scientists are combining bold thinking with scientific rigour to solve problems in innovative ways, from using artificial intelligence to improve care to leading-edge science using the body's own stem cells to fight scarring in vital organs, always in pursuit of one question: how can we improve the lives of people living with arthritis?

Read on to see what innovation with purpose looks like, in practice.

CHATRHEUM – A NEW AI CHATBOT FOR RHEUMATOLOGY PATIENTS

The Problem

Many people in Canada struggle to receive timely rheumatology care because there are not enough specialists to meet rising demand. Long wait times make it hard for patients to deal with new health issues or concerns that arise between appointments. We need new tools that improve timely access to reliable rheumatology information and answer patients' questions.



The Innovation

Generative AI, like ChatGPT, offers new opportunities to support patients in real-time. Rheumatologist Dr. Carrie Ye and her team at the University of Alberta are developing an AI-powered chatbot, ChatRheum, that will provide high-quality answers to patient questions. Providing reliable information requires identifying trusted information sources, using them to train the chatbot, and then testing its answers against those from rheumatologists.

The Impact

A chatbot like ChatRheum will provide more timely answers to patients' questions and by freeing up some of the rheumatologists' time, will shorten rheumatology wait times. This will improve access to care, ease pressure on the healthcare system, and give patients clear and reliable information when they need it.

CAN STEM CELL THERAPY PREVENT SCARRING OF THE LUNGS AND SKIN?

ARTHRITIS RESEARCH CANADA

The Problem

Fibrosis is a process where persistent, abnormal healing causes scarring and loss of function in different organs of the body. When affecting vital organs, like the lungs, it often leads to death. This occurs, for example, in the lungs and skin of people with scleroderma. There is no cure for fibrosis.

The Innovation

McGill University scientist Ines Colmegna and her team found that a type of stem cell called mesenchymal stromal cells, or MSC, interferes with the development of fibrosis and may even reverse it when tested in cultured cells. They will now test whether treatment with MSC, and the products they secrete, can prevent fibrosis in an animal model of lung and skin fibrosis. They will also test whether MSC are effective at improving fibrosis in skin and lung tissue from patients with scleroderma.

The Impact

By shedding light on the mechanisms involved in lung and skin fibrosis, this study will provide crucial knowledge for the development of novel therapies to prevent and treat fibrosing diseases, such as scleroderma.



IDENTIFYING NOVEL BIOMARKERS TO IMPROVE ACCESS TO CARE IN REMOTE SETTINGS

The Problem

Systemic lupus erythematosus (lupus) is a complex autoimmune disease that can affect almost any organ of the body. Diagnosing it in the early phases and monitoring how active the disease is can be tricky and often relies on blood testing of antibodies. When lupus affects the kidneys, repeat biopsies are often needed to assess response to treatment or disease flares. This limits access to diagnosis and disease monitoring in remote and low-resource settings.

The Innovation

Rheumatologist Dr. May Choi and her lab at the University of Calgary have identified an easier way to test for lupus antibodies, using saliva instead of blood. They have also identified novel biomarkers in the urine of patients with active renal involvement from lupus that could help monitor the activity of the renal disease, eliminating the need for repeated kidney biopsies.

The Impact

Testing antibodies and other biomarkers in saliva and urine offers more accessible and safer alternatives. This breakthrough technology has the potential to improve access to screening and monitoring for lupus for everyone, including in settings where blood tests, specialized lab technicians, and kidney biopsies are not available.

Our Featured Studies

A closer look at the studies making an impact

Across hundreds of studies, we are advancing research and addressing critical health challenges. Three studies highlighted below demonstrate the impact we are making.

MAKING IT WORK™ - A PROGRAM TO HELP PEOPLE WITH ARTHRITIS REMAIN EMPLOYED

The Problem

Arthritis is the most common health reason why Canadians stop working. One in five living with rheumatoid arthritis leaves the workforce within five years of receiving a diagnosis. And almost half of working-age Canadians with osteoarthritis report not working.

Stopping work early affects people not only financially, but also socially and emotionally. Work is a priority for patients; yet, it is rarely addressed by their health care team.



The Research

Making it Work™ was designed by rheumatologist Dr. Diane Lacaille (UBC) and her team to fill this gap in arthritis services. It is an online program providing workers with arthritis the tools they need to deal with challenges encountered at work and to adapt their jobs to their disease.

A randomized trial testing the program's effectiveness with 500 workers with inflammatory arthritis across Canada showed that people who took the program were better able to do their job, missed 11 fewer workdays per year, were 20% less likely to take a sick day, and 30% less likely to have to stop working temporarily or permanently than people receiving usual care.

The Impact

This is the first such program worldwide. It addresses a crucial unmet need that people living with arthritis value as important. By focusing on early intervention while people are still working, the program aims to prevent work disability and all the impact it has on a person's life and their family's.

Given that arthritis costs the Canadian economy an estimated $33 billion per year in lost productivity and health care, this program has potential for substantial economic impact.

EVALUATING A DECISION AID FOR ADJUSTING BIOLOGIC MEDICATIONS

ARTHRITIS RESEARCH CANADA

The Problem

Rheumatoid arthritis affects each person differently. This makes treatment decisions complex as they need to be tailored to each person's situation. A question people often have is whether they can try reducing their medications. It is an option that can be considered when their arthritis has been well controlled for a long time on their current medications. But reducing medications carries a risk of the arthritis flaring and losing the good control that has been reached. So, these decisions are not straightforward. Decision aids are tools designed to help people make informed decisions that are better aligned with their priorities.

The Research

This study, led by rheumatologist Dr. Glen Hazlewood (University of Calgary), will test the usefulness of a tool designed to help rheumatoid arthritis patients and their doctors make informed choices together about whether to reduce their biologic medications. Participants currently doing well on advanced therapies, called biologics, will be divided into two groups: one using the decision aid tool, and one receiving usual care. The goal is to see whether the tool helps people talk with their doctors about tapering their medications and whether it leads to better-informed decisions about treatment choices.

The Impact

By supporting shared decision-making between patients and their healthcare teams, this research aims to make arthritis care more patient-centred. Specifically, a tool like this decision aid will help patients better understand their treatment options, make choices aligned with their values, and foster stronger collaboration with their doctors.

CAR-T CELL THERAPY FOR PEOPLE WITH AUTOIMMUNE DISEASES

The Problem

Systemic sclerosis and systemic lupus erythematosus (lupus) are serious autoimmune diseases, where the immune system starts attacking the self and this can cause damage to many organs, such as the skin, joints, lungs, kidneys, or nerves. Currently available treatments do not work well for everyone, which means that some people continue to experience worsening disease, which causes permanent damage to organs, impairing people's ability to function in their day-to-day activities. This not only reduces people's quality of life; it also increases their risk of death when vital organs are affected. New treatments that specifically target malfunctioning immune cells are greatly needed.

The Research

This project brings together experts across Canada, under the leadership of rheumatologist Dr. Marie Hudson (McGill University), to study a novel treatment that offers exciting new opportunities: CAR-T cell therapy. This involves using a patient's own immune cells and modifying them so they target and destroy the immune cells that are malfunctioning in autoimmune diseases. The goal is to stop inflammation and prevent organ damage. This treatment may even "reset" a patient's immune system so it no longer reacts against the self and people no longer need long-term immune-suppressing medications.

This clinical trial will test whether a Canadian-developed CAR-T cell treatment is safe and effective in children and adults with systemic sclerosis and systemic lupus erythematosus.

The Impact

This novel therapy offers hope for a new effective treatment option that stops severe disease from attacking vital organs and may even prevent the need for future immune-suppressing medications.

This study will facilitate future access to these advanced therapies for Canadians living with severe autoimmune diseases.

This Year in Research

Research is always moving forward. And every year, our researchers share new findings, advance ongoing studies, and begin laying the foundation for future research.

Here are some examples of work we have completed, what we are working on, and what new studies are coming up next.

FINDINGS THAT MATTER

Reducing the Risk of Falls: Enhancements to the Otago Exercise Program

One in five older adults falls each year in Canada. This often leads to injuries and fractures, hospitalizations, and a persistent fear of leaving home. Yet remaining physically active reduces the risk of future falls and is essential for preventing frailty.

Physiotherapist Dr. Linda Li and her team at the University of British Columbia tested a new way of implementing the Otago Exercise Program, in which coaching by a physiotherapist trained in brief action planning and the use of an exercise-tracking app was added to the usual program. The coaching intervention improved both adherence and outcomes: 81% of participants were still doing their exercises a year later, and falls were reduced by one-third.

For older adults with arthritis, this means access to better strategies to prevent falls, fewer hospitalizations, more confidence getting outside, and more years living independently at home.



Testing CBT for Insomnia

Sleep difficulties affect 70% of people living with arthritis and autoimmune rheumatic diseases; three to four times higher than the general population. And poor sleep can worsen other symptoms of arthritis, such as joint pain and fatigue.

Psychologist Dr. Deborah Da Costa, McGill University, and her team tested the effectiveness of an online cognitive behavioural therapy (CBT) program, originally developed for cancer and adapted for people with rheumatic diseases with insomnia. Participants who took the program showed significant improvements in sleep, whereas the control group did not.

By providing accessible, self-directed online treatment for insomnia, this research addressed a critical unmet need in supporting the mental health of people living with arthritis.

WHAT ARE WE WORKING ON?

ARTHRITIS RESEARCH CANADA

Arthritis Medications Used in Pregnancy

Arthritis and autoimmune rheumatic diseases often affect women during childbearing ages. Little is known about how medications taken during pregnancy affect a child's health beyond birth, or a parent's health after pregnancy. Dr. Mary De Vera (University of BC) and her pharmaceutical sciences team are using advanced statistical methods to analyze health records of pregnant British Columbians with arthritis, studying outcomes through childhood. The findings will give women with arthritis clearer, evidence-based guidance when choosing medications and planning a family.

Food, Gut Bacteria and Inflammation in Psoriatic Arthritis

People with arthritis often notice that what they eat affects inflammation in their joints, and science is catching up. People's diet affects their gut bacteria – their microbiome – which affects what the body absorbs and, in turn, the level of inflammation. Rheumatologist Dr. Lihi Eder (University of Toronto) is using data from a randomized controlled trial of dietary interventions to see how diet shapes gut bacteria and inflammation in psoriatic arthritis. Findings will inform practical dietary guidance for patients.

Understanding Chronic Back Pain

Up to 25% of Canadian adults live with chronic low back pain, a leading cause of disability and work loss. Physiotherapist Jean-Sébastien Roy (Université Laval) leads the Québec Back Pain Consortium, a network of 20 researchers that has followed over 6,600 people with low back pain since 2018 to learn why acute pain becomes chronic. The goal: personalized treatments that ease pain and improve quality of life.

WHAT'S NEXT?

Thanks to recently secured funding, Arthritis Research Canada/Arthrite-recherche Canada is embarking on several new studies. Here is a brief overview of three, all working toward a common goal: improving efficiency and access to high-quality arthritis care.

Collaborative Care for Knee Osteoarthritis

Physiotherapist Dr. Allyson Jones (University of Alberta) is testing a collaborative model of care with community pharmacies. Pharmacists will screen people with knee pain for osteoarthritis, provide medication advice, and refer them to the GLA:D exercise program, proven effective at reducing pain and improving function. The goal is to improve early diagnosis, education, and access to effective physiotherapy treatment.

Pharmacy Models for Rural and Remote Communities

Accessing pharmacy services is a challenge in remote BC communities. Some have none at all. Health economist Dr. Wei Zhang (UBC) is using simulation modelling to test which innovative pharmacy model (such as telepharmacy or not-for-profit pharmacies) is most cost-effective at improving access. Findings will guide pilot programs and inform policy.

At-Home Follow-Up Care for Rheumatoid Arthritis

Rheumatologist Dr. Laëtitia Michou (Université Laval) is piloting an e-health platform that allows patients with rheumatoid arthritis to monitor their disease from home via online health questionnaires, with nurses reviewing and providing tailored health advice, as needed. By freeing up scarce rheumatology resources and improving convenience for patients, this new model aims to support efficient and timely access to rheumatology care for everyone.

Fundraising

WHAT RESEARCH MAKES POSSIBLE

Barbara Brink's Story

It is hard to imagine Vancouver without Science World.

For Barbara Brink, it represents what can happen when people believe in an idea and work together to make it possible. As the driving force behind its creation, Barbara has spent decades strengthening her community, particularly in health and education. Her leadership has included roles with the VGH Foundation and United Way Lower Mainland, as well as continued support for organizations such as the BC Parks Foundation. Her contributions have earned her numerous honours, including the YWCA Women of Distinction Award, the Order of British Columbia and the Order of Canada.

And Barbara accomplished all of this while living with arthritis.

There were days the pain kept her from getting out of bed. It threatened the independence she'd built her entire life's work on. But treatment gave her a way forward and allowed her to keep doing the work she loved.

That's what research made possible for Barbara and what continued investment can help make possible for countless others.



"There were so many difficult days when I wasn't sure I could even put my socks on, let alone get out of bed. Through my own experience, I know how critical research is to advancing health and improving lives. In the case of arthritis, advances in treatments and medications have helped me manage my arthritis, maintain my independence and continue doing the things I love.

I am so grateful for the research Arthritis Research Canada is doing. I know firsthand what is possible when we invest in finding better treatments and answers. That is why I continue to support arthritis research. I want others living with arthritis to have the same opportunity that I had, to have more independence and the chance to live the lives they want."

Barbara Brink

With Gratitude

Thanks to your generosity, Arthritis Research Canada/ Arthrite-recherche Canada's world-class research team is advancing knowledge, improving care, and creating new possibilities for people living with arthritis.

Together, we are moving research forward.

Thank you / Merci

MOVE. WITH ARTHRITIS RESEARCH



MOVING FORWARD, TOGETHER

Throughout the year, we embraced new opportunities to engage our community, increase visibility, and share the impact of arthritis research across Canada. As part of this evolution, we paused our annual ARThritis Soirée to invest more directly in year-round donor engagement and explore new ways to connect supporters with our mission.

One of those new ways was developing the MOVE with Arthritis Research campaign, presented by Beachcomber Hot Tubs, a national physical activity challenge that connects Canadians with arthritis research.

We also advanced the Arthritis Future Fund, a new fundraising initiative that honours the legacy of our founder, Dr. John Esdaile, by helping establish the Dr. John Esdaile Professorship in Arthritis Research and supporting the next generation of arthritis researchers.

We focused on expanding our donor communications through digital storytelling and engagement opportunities, creating new ways for supporters to connect with our research and its impact.

Together, these initiatives will help us strengthen support for research, accelerate discovery, and turn new knowledge into meaningful progress.

Thank you to our MOVE event sponsors:

BEACHCOMBER HOT TUBS

ALAN AND GWENDOLINE PYATT FOUNDATION

Kornfeld

Macdonald Realty

PAN CITY ENTERPRISES INC

RBC

GoodLife FITNESS CANADA'S GYM

lululemon

THE PARLOUR SHOPPE

sombilon studios

Image Group Inc.

Our Research Moves People

ARTHRITIS RESEARCH CANADA





Financial Statements

THE ARTHRITIS RESEARCH CENTRE SOCIETY OF CANADA

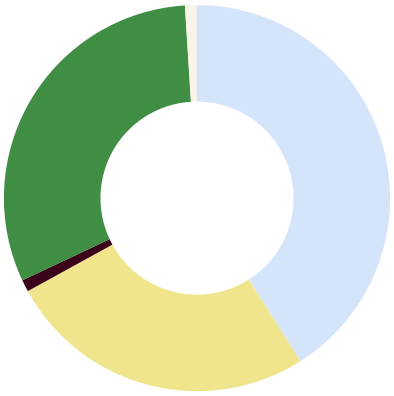
STATEMENT OF FINANCIAL POSITION AS AT MARCH 31, 2026

ASSETS

CURRENT ASSETS	
Cash and cash equivalents	$567,624
Accounts receivable and accrued	404,982
GST Recoverable	15,255
Prepaid expenses	901
	$988,762
INVESTMENTS	15,239,599
CAPITAL ASSETS	9,341,450
	$25,569,811

LIABILITIES AND FUND BALANCES

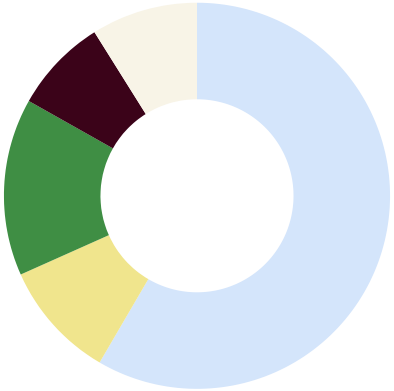
CURRENT LIABILITIES	
Accounts payable & accrued liabilities	$328,010
Payroll deductions payable	8,083
Current portion of deferred revenue	42,250
Current portion of long-term debt	195,055
	$573,398
DEFERRED REVENUE	2,201,319
DEFERRED CAPITAL REVENUE	159,064
LONG-TERM DEBT	5,512,023
	$8,445,804
FUND BALANCES	
Unrestricted	13,796,297
Internally restricted	3,327,710
	$17,124,007
	$25,569,811



REVENUE

- **41%** Research
- **26%** Fundraising & donations
- **1%** Bank interest income & other
- **31%** Investment income
- **1%** Unrealized gain/(loss) on investments

Research	$1,823,684
Fundraising & donations	1,146,367
Bank interest income & other	24,085
Gross Revenue	**$2,994,136**
Investment income	1,378,599
Unrealized gain/(loss) on investments	52,982
Other revenue	1,431,581
Revenue after Investments	**$4,425,717**



EXPENSES

- **59%** Research
- **10%** Professorship donations
- **15%** Operations
- **8%** Fundraising
- **9%** Facilities & financing

Research	$2,950,352
Professorship donations	500,000
Operations	739,480
Fundraising	408,304
Facilities & financing	439,099
Total Expenses	**$5,037,235**
Excess (deficiency) of Revenue over Expenses	**$(611,518)**

ARTHRITIS RESEARCH CANADA

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