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ANESTHESIA NEWS

PRESIDENT'S MESSAGE



In today's medical environment, organizational relevance demands tangible benefits and outcomes. For CAS, it means being relevant to our members — anesthesiologists who are providing excellence in patient care and who are also pursuing personal and professional growth and development.

At different times in our careers, we need CAS for different reasons — mentoring, education and learning, networking, recognizing excellence among our peers, and building professional relationships and networks, to name a few. CAS offers many tangible benefits and an important one coming up is our "must attend" Annual Meeting that you can't afford to miss. **Mark your calendar for June 24 – 27, 2016 in Vancouver, BC!**

This year's theme is "**Improving Perioperative Outcomes**". The dynamic program will feature sessions that will challenge your thinking and stimulate discussion, including:

- Plenary Symposium: Postoperative Cognitive Dysfunction – Noise or Signals?
- Dr John Wade CPSI-Patient Safety Symposium: Better Communications for Safer Transfer of Care.
- President's Symposium: The Role of CAS in Anesthesiologists' Health and Well-being.

As we think about lifelong learning, a key goal is for us to **take** time away from our busy practices and to **make** time for pursuing our personal continuing education goals.

What's on Members' Minds?

Recently, I wondered what forum would invite members to think about the role of the CAS in the health and well-being of anesthesiologists. Our CAS educational consultant, Jane Tipping, proposed the idea of holding a "town hall" meeting. Yes, it's an infrequently used term in our profession and if you have never been to one, let me first provide a broad definition: it's an informal and open meeting or event typically held in a venue where attendees can voice their opinions, present ideas, and ask questions. This year, the President's Forum at the CAS Annual Meeting will be a 90-minute "town hall" style event and I look forward to welcoming you!

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To generate dialogue and hear what's on people's minds, I propose to engage some expert panelists to help drive the discussion through some broad objectives that would enable participants to:

- Reflect on and engage in discussion of the role of the CAS in physician wellness — is there a role and what does it look like?
- Compare physician health services offered by other provincial and national medical organizations — are there gaps CAS could be filling?
- Consider if physician health and well-being is an area in which members want CAS to explore — what are the opportunities and benefits?

I believe it is an opportune time for both the profession and CAS. The profession will benefit from frank and direct dialogue, possibly opening new doors of opportunity. The CAS — under the leadership of our Board of Directors and Executive Director, Debra Thomson — will benefit because it is imperative that it remain both relevant and forward-thinking in the best interests of its members and their professional responsibilities.

Watch for more details about our town hall meeting. I'm looking forward to our members' participation and watching as we collectively translate the feedback into tangible actions for CAS to take forward.

Dr Susan O'Leary, FRCPC

CANADIAN ANTI-SPAM LEGISLATION:





We need your permission



Remember to give us your consent when we ask your permission.

SOCIAL MEDIA AT YOUR FINGERTIPS

Stay current, informed and on track with the latest discussions.... Sign up and take advantage:

-  Dr O'Leary on Twitter at @Susanolearynl
-  CAS on Twitter at @CASupdate
-  Join the conversation with #CAS_SCA2016
-  CAS on Facebook:
facebook.com/CanadianAnesthesiologistsSociety

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You may contact Board members through the CAS central office.



Canadian Anesthesiologists' Society

www.cas.ca



VANCOUVER
CAS ANNUAL MEETING 2016

JUNE 24 – 27, 2016

IMPROVING PERIOPERATIVE OUTCOMES



NOTICE OF 2016 CAS ANNUAL BUSINESS MEETING OF MEMBERS

PLEASE JOIN US...

CAS members are invited to attend the Annual Business Meeting (ABM) of Members to be held on **Saturday, June 25, 2016** at 12:00 noon in the Vancouver Convention Centre. Members in good standing have the right to vote on all items that come before the Meeting. Your vote is important to CAS and we encourage you to attend the ABM and exercise this right.

Please join your fellow members for a year-end review and to hear about upcoming initiatives.

It's your association and your support matters.



AWARD WINNERS TO BE RECOGNIZED AT 2016 ANNUAL MEETING

Each year, CAS formally recognizes its award winners' accomplishments and contributions to anesthesiology during the CAS Annual Meeting. In 2016, the ceremony will take place in Vancouver on Monday, June 27 at 14:00.

Recipients of the following awards will be recognized:

- 2016 Membership Honour Awards
- 2016 Research Program Awards
- Residents' and Richard Knill Competitions
- Medical Student Award



Gold Medal Award:

Dr Donald Miller, Ottawa, ON

The Gold Medal is the highest award given by CAS. It is a personal award consisting of an inscribed medal given in recognition of excellence and leadership in anesthesia.



Research Recognition Award:

Dr Richard Hall, Halifax, NS

The Research Recognition Award honours a senior investigator who has contributed to and sustained major contributions in anesthesia research in Canada.



Clinical Teacher Award:

Dr Gordon Whatley, Halifax, NS

The Clinical Teacher Award recognizes excellence in the teaching of clinical anesthesia.



Clinical Practitioner Award:

Dr Michael Bourke, Ottawa, ON

The Clinical Practitioner Award recognizes excellence in clinical anesthesia practice.



John Bradley Young Educator Award:

Dr Joel Hamstra, Hamilton, ON

The John Bradley Young Educator Award recognizes excellence and effectiveness in education in anesthesia.



Emeritus Membership:

Dr Angela Enright, Victoria, BC

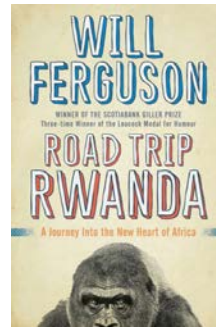
Emeritus Membership recognizes retired individuals who during their long-standing practice made a significant contribution to anesthesia.

INVITATION TO CAS IEF'S GALA DINNER: CELEBRATING 10 YEARS IN RWANDA



Dear CAS Members and Families,

In celebration of the Canadian Anesthesiologists' Society International Education Foundation's (CAS IEF) **Ten Years in Rwanda**, we would like to invite you to our gala dinner on Sunday, June 26, 2016. Your donations enabled CAS IEF to send over 100 volunteers to teach anesthesia in Rwanda, and to increase the number of staff anesthesiologists in Rwanda more than threefold since 2006!



Our guest speaker this year is Will Ferguson, three-time winner of the Leacock Medal for Humor, and in 2012 winner of the Scotiabank Giller Prize for his novel 419. His most recent book *Road Trip Rwanda* has been described as "Funny, engaging, poignant, and at times heartbreaking, *Road Trip Rwanda* is the lively tale of two friends, the open road, and the hidden heart of

a continent." Mr. Ferguson's description of this beautiful country makes you feel the warm breezes, smell the charcoal fires, and opens your eyes to the remarkable progress made since the genocide 22 years ago. For more information, see his website at <http://www.willferguson.ca>.

Not only does this dinner serve as celebration of past accomplishments, but what makes this dinner different from previous CAS IEF annual dinners is that proceeds from this evening will be used to launch new and exciting projects such as anesthesia residency partnerships in Guyana and Ethiopia as well as Safe Obstetric Anesthesia and Lifebox courses.

In a world where there is so much human suffering, where the news is filled with stories of war and crises, this evening celebrates positive change, where your contributions make a difference.

Dr Dylan Bould
Chair, CAS IEF

ATTENTION: ANNUAL MEETING ATTENDEES

The CAS IEF Gala Dinner will be held during the CAS Annual Meeting in Vancouver. Please join us on Sunday, June 26, 2016 at the Pinnacle Hotel Vancouver Harbourfront — reception at 19:00 and dinner at 19:30. Tickets are \$150 for physicians, \$75 for students, residents and non-physicians. To register for the event, go to: www.casconference.ca/en/registration.



The Canadian Anesthesiologists' Society

SEEKS CANDIDATES FOR THE POSITION OF CHAIR OF THE ANNUAL MEETING COMMITTEE

The Chair of the Annual Meeting Committee (AMC) works with the Chair of the Continuing Education and Professional Development Committee and the CAS Education Consultant, to ensure that the educational content of the Annual Meeting is planned in accordance with requirements for accredited CME/CPD activities. The Chair will strive to ensure the scientific validity, objectivity, and completeness of all Annual Meeting sessions and assess and manage any potential conflicts of interest.

The role of Chair is to provide leadership to the AMC, and to ensure that the Committee fulfills its mandate. The Annual Meeting Committee Chair is expected to provide independent, proactive, and effective direction, guided by the Committee Terms of Reference. In addition, the Chair will manage the operation of the Committee balancing effective performance of duties with maintaining the agreed-upon budget.

Candidates must be members of the CAS. The term of this position is two years, beginning September 1, 2016. It is hoped that the successful candidate will begin to participate in meeting planning as soon as appointed, including the June 2016 Annual Meeting. The current Chair will remain on the AMC as Past Chair to provide mentoring and historical perspective. Given the importance of this role and the required time commitment, the position is now remunerated.

Please submit a cover letter outlining your interest and related experience to the attention of the Selection Committee, by no later than Friday, April 15, 2016. Submissions must be sent electronically to anesthesia@cas.ca.

THE SELF ASSESSMENT PROGRAM FROM THE **CANADIAN JOURNAL OF ANESTHESIA** – CPD ONLINE

CPD MODULE: Local anesthetic systemic toxicity
March 2016

ALSO AVAILABLE

- Potential strategies for preventing chronic postoperative pain: a practical approach
December 2015
- Managing the challenging pediatric airway
September 2015
- Reversal of warfarin anticoagulation for urgent surgical procedures
June 2015
- Step-by-step clinical management of one-lung ventilation
December 2014
- Bedside clinical and ultrasound-based approaches to the management of hemodynamic instability: Part II: bedside ultrasound in hemodynamic shock
November 2014
- Bedside clinical and ultrasound-based approaches to the management of hemodynamic instability – Part I: focus on the clinical approach
September 2014
- Cesarean delivery under general anesthesia
May 2014

HOW TO ACCESS THE MODULES

Instructions can be found on the Canadian Anesthesiologists' Society website at:

cas.ca/members/cpd-online

Successful completion of each module of the self-assessment program will entitle readers to claim four hours of continuing professional development (CPD) under section 3 of CPD options, for a total of 12 maintenance of certification credits. Section 3 hours are not limited to a maximum number of credits per five-year period.

Publication of these modules is made possible through unrestricted education grants from the following industry partners:

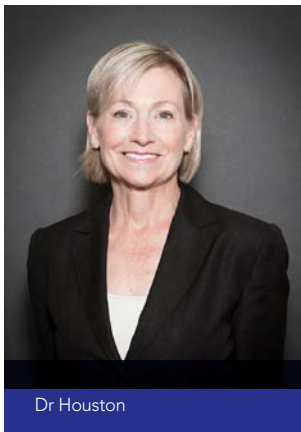
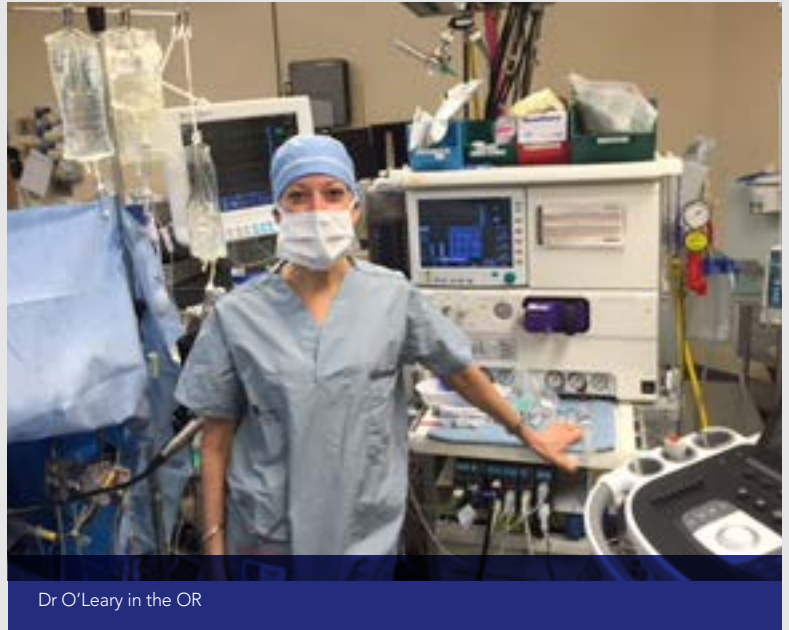


Medtronic

NEW APPOINTMENTS FOR CAS PRESIDENT, SUSAN O'LEARY

Effective January 2016, CAS President, Susan O'Leary, has been named as Chief of Anesthesia at Hamilton Health Sciences. Dr O'Leary will also be Associate Professor in the Department of Anesthesia, Faculty of Health Sciences, McMaster University. This exciting venture means she has re-located to Ontario from Newfoundland, and continues with a "business as usual" approach to her responsibilities as CAS President.

"My commitment to working with our members and representing our profession's interests is as strong as before," said Dr O'Leary. "And I'm just as accessible!"



DR PATRICIA HOUSTON APPOINTMENT ANNOUNCED

CAS Past-President (President 2012 – 2014), Dr Patricia Houston, has been appointed Vice-Dean, MD Program, of the Faculty of Medicine, University of Toronto, for a five-year term beginning July 1, 2016. Prior to this, Dr Houston has served in a number of leadership roles both at the University and at St Michael's Hospital, where she is currently Vice President, Education.

Dr Houston joined the Department of Anesthesia at U of T in 1984 and was appointed full Professor in 2006. She is an active member of a number of international and national organizations and associations.

CELEBRATING MEMBER ACHIEVEMENTS

When we think of an achievement, we tend to imagine it as something out of the ordinary or exemplary, but it could be something that is low key or a simple change in a member's life.

We would like to promote and celebrate members' successes and good news stories. If you or a colleague has something to share, please send it to us. Periodically, we will share stories on the CAS website and through social media. Brevity is good (items may be edited!) and photos are welcome!



Forward your announcement and photo(s) to webservices@cas.ca



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[†]Source: Group progress report, September 2015.

No purchase necessary. Contest ends on December 31, 2016 and the draw will take place on January 16, 2017. There is one (1) prize to be won: the winner may select an amount of \$30,000 (CAN) awarded in the form of gift vouchers to a home renovation or building supplier, exchangeable for eco-friendly products or eco-friendly renovations; or a cheque for \$30,000 (CAN). The winner will be responsible for selecting suppliers — upon approval by The Personal — and coordinating all work. Chances of winning depends upon the number of quotes received and the number of policies in force with The Personal on December 31, 2016. The winner must correctly answer a skill-testing question to receive the prize. Full contest rules and details available at thepersonal.com/mywinningquote.



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2015 RA GORDON PATIENT SAFETY AWARD

Dr Daniel McIsaac and collaborators

University of Ottawa/Ottawa Hospital Research Institute/Institute for Clinical Evaluative Sciences
Ottawa, ON

Optimizing the Care of Frail Elderly Patients in the Perioperative Period (Phase 1): A Population-based Analysis of Structures and Processes of Care to Inform the Design of a Perioperative Surgical Home for Frail Elderly Patients

Progress to date: With the support of the Canadian Anesthesiologists' Society and the Canadian Anesthesia Research Foundation, we are using health administrative data to study structures and processes of care that may improve the outcomes of frail elderly surgical patients. The knowledge gained through this project will inform current clinical care, as well as the future design of a perioperative surgical home for the frail elderly.

To date, we have identified two procedural cohorts of non-cardiac surgery patients in Ontario. Members of the first cohort are adults having elective, intermediate- to high-risk surgery (n=557,000), while the second cohort is composed of emergency surgery patients (n=376,000). We have identified the frailty status of patients in each cohort using the validated Johns Hopkins Adjusted Clinical Groups Frailty-Defining Diagnoses Indicator. We have also compiled

or are compiling analytic data sets to answer each of six specific research questions.

Preliminary analysis is underway. We will be submitting an abstract to the CAS meeting in June 2016 in Vancouver. The results of our first analysis indicate that frail patients who have surgery in hospitals that care for a higher number of frail patients have improved post-operative survival. This result appears to be due, at least in part, to a lower rate of failure to rescue at high-volume hospitals, i.e., frail patients who have a complication at a high volume hospital are less likely to subsequently die than are frail patients who have a complication at a low volume hospital. Preliminary analysis also supports a positive impact of geriatric co-management on outcomes, although this intervention does not appear to be routinely employed at a population-level.



ANESTHESIA FOR GLOBAL OUTREACH COURSE OFFERED IN OCTOBER 2016

We are pleased to announce that registration for the 2016 9th Annual Anesthesia for Global Outreach Course is now open. This year's course will be hosted at Boston Children's Hospital in Boston, Massachusetts from October 7 – 9, 2016.

In 2008, the Dalhousie Department of Anesthesia, Pain Management and Perioperative Medicine launched *Global Outreach: Anesthesia in Challenging Environments*, a training program that prepares anesthesiologists from Canada and the U.S. for global missions.

The current *Anesthesia for Global Outreach Course* is an annual three-day course that focuses on novel techniques and equipment for delivering anesthesia care in underserved environments — the conditions under which 80% of the world's anesthesia care is delivered.

The first of its kind in North America (and one of only three offered worldwide), the course boasts a cadre of world-renowned experts in global health and anesthesia.

By the end of the course, *Anesthesia for Global Outreach* participants can expect to:

- Recognize and demonstrate the knowledge of anesthetic techniques likely to be encountered in low resource settings.
- Identify the preparations needed to safely work in austere conditions specific to the practice of anesthesia including intellectual, technical, ethical, and attitudinal factors.
- Discuss and demonstrate various means of delivering educational programs in resource poor environments such as the use of simulation to practice clinical and technical skills and care delivery.
- Discuss the psychological and ethical adaptations that occur when working in an austere practice environment.



Amelie Pelland (PGY4 Anesthesia Resident at Dalhousie University) examining equipment for providing general anesthesia for cesarean delivery in an Armenian operating theatre

For more information on the 2016 *Anesthesia for Global Outreach Course* and to register, please visit:
www.AnesthesiaGlobalOutreach.com



Follow us on Twitter @ANESTH_GO

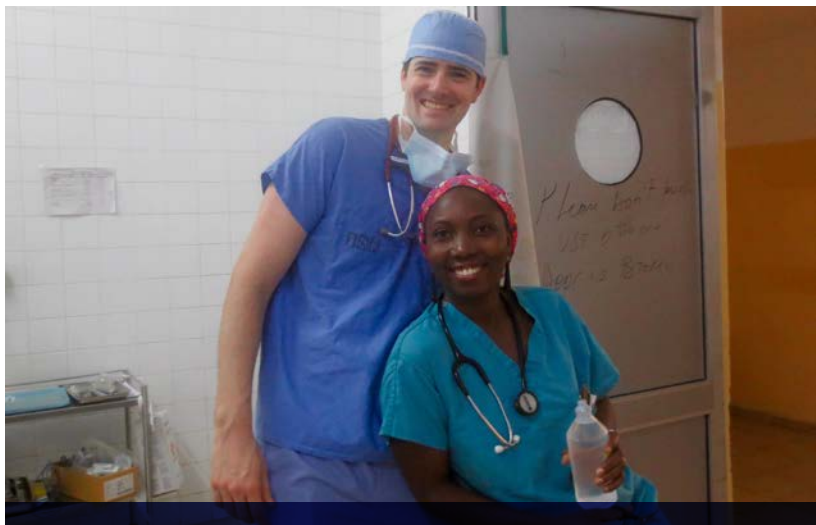


TEACHABLE MOMENTS IN RWANDA

BY: DR TRISTAN DUMBARTON, PGY4, DALHOUSIE UNIVERSITY



Dr Tristan Dumbarton (on the right) in a Rwandan operating room



Dr Tristan Dumbarton with Dr. Francoise Nizeyimana, a Rwandan senior anesthesia resident

My month in Rwanda was everything I hoped for. I've known of CAS IEF since medical school and observed a CAS IEF team in Rwanda as a second year medical student. The build-up for my own CAS IEF trip was, therefore, six years in the making. It did not disappoint.

From speaking with previous volunteers and residents, and from my involvement on the CAS IEF board, I was aware of the state of anesthesiology in Rwanda. I knew I would learn as much, or more, from our hosts as I hoped to teach. I knew that sustainability required holding back in the ORs and encouraging safety rather than giving anesthetics myself. I knew to expect challenges and heartbreaks.

During anesthesia residency, we spend the majority of our clinical time one-on-one with staff anesthesiologists. While excellent for resident learning, we have few opportunities to teach junior trainees. This elective was the most substantial teaching experience I've ever had. There was clinical teaching, classroom lectures, simulation scenarios and even a teaching and learning course, each of which offered a fresh teaching perspective.

I initially feared I would not be able to find teachable moments in the operating room, or on the fly. This proved unfounded, as the operating theatres are rich with opportunity; learners are engaged and excited to soak up teachable moments. It was rewarding to discuss key considerations for cases with residents, while ensuring patient safety and OR efficiency. These skills will be essential throughout my career.

The value of simulation training in anesthesia cannot be overemphasized. I was lucky to be part of introducing a sustainable and comprehensive simulation curriculum into the Rwandan anesthesia program. The residents have had some exposure to simulation, and they have a beautiful sim center, but utilization has been sporadic. It felt as if the curriculum we developed, and the simple, sustainable tools we used to implement simulation, will make a big difference in the long term. We identified simulation champions, who will hopefully carry the torch and continue to offer this vital teaching tool on a weekly basis (a more detailed sim curriculum than even we get here at Dalhousie!). My own experience, creating realistic scenarios, thinking through all the details of a sim in advance, running the sim and adjusting to the participants' actions on the fly and finally debriefing the learners afterwards, was as much a learning experience for me as I hope it was for them. I have seen the enormous value of sim first-hand, and will continue to push for its use throughout my career.

Finally, this elective affirmed my commitment to global health and to a practice that allows time for travel and teaching. Apart from having to leave my family behind for a month, every single experience in Rwanda was positive and full of value. Rwanda has left a permanent etching on my life, both professionally as an anesthesiologist and personally — the students, the culture, the food, and the geography. Why wouldn't everyone get involved in global health?

CHOOSING WISELY® CANADA INITIATIVE: WATCH FOR INFORMATIONAL VIDEO

CAS is currently developing an informational video about the Choosing Wisely® Canada campaign to highlight the “Top 5” list of recommendations relating to tests and procedures that anesthesiologists should question as well as the key features of this important initiative.

The Choosing Wisely® Canada campaign was developed to help physicians and patients engage in conversations about

unnecessary tests, treatments and procedures, and to make smart and effective choices to support the delivery of high-quality care. The good news is that initial dialogue has already sparked productive conversation among anesthesiologists about what are appropriate and necessary tests, treatments, and procedures.

Watch for details!



PETITION TO MINISTER OF HEALTH RE: INCREASING THE LEGAL AGE TO BUY TOBACCO TO 21

BY: DR JOHN OYSTON, CHIEF, DEPARTMENT OF ANESTHESIOLOGY, THE SCARBOROUGH HOSPITAL

As anesthesiologists, we witness the damage smoking does to the human body as we provide smokers with anesthesia for their cancer surgery, vascular procedures, lung resections, and amputations. We know that even routine surgery is more dangerous and more likely to involve complications in patients who smoke.

In Canada, despite many effective public health measures, 19% of the population still smoke. Our 4.6 million smokers puff their way through 31 billion cigarettes every year. As a result, 37,000 of them die prematurely each year.

Up to 95% of smokers start before the age of 21. At that age, their brains are not fully developed, and they are more prone to develop a nicotine addiction. They think that they will be able to quit before they suffer permanent health damage, but in fact, one-third of them will die from smoking-related diseases.

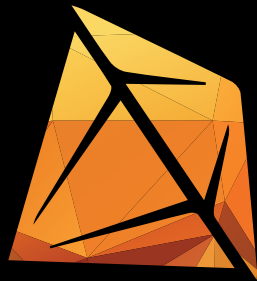
In the United States, people realize that 18 or 19 is too young to allow people legal access to a known carcinogen, an addictive substance that can never be used safely. The State of Hawaii and several American cities, such as New York and

Cleveland, have already increased the minimum legal age for smoking to 21. Other cities and states are considering making the same change.

Further afield, Singapore and Tasmania have proposed increasing the smoking age by one year every year to create a smoke-free generation. People born after a specific year would never become old enough to be allowed to buy tobacco legally.

In some parts of Canada, the legal age for buying tobacco is 19. These provinces have a smoking prevalence of 20%. The other provinces and territories have an age limit of 18, and a prevalence of 30%.

Raising the minimum legal age for purchasing tobacco is a logical next step to further reduce deaths from tobacco use. Please visit www.tobacco21.ca and sign the petition to the Health Minister, The Honourable Jane Philpott, PC, MP, asking her to protect Canadian teenagers from tobacco by increasing the minimum legal age to 21.



MELBOURNE 2016

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OF ANAESTHETISTS**
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SCIENTIFIC CONGRESS

SATURDAY 17 - TUESDAY 20 SEPTEMBER 2016

EARLY BIRD REGISTRATION OPENS 31 MARCH

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Carolyn Canfield collaborates as an independent citizen-patient internationally with clinicians, patients, managers, researchers and educators to embed the patient voice in improvement processes. Patient expertise can drive creativity and sustain system-scale transformation to meet the aspirations of both clients and practitioners for care excellence.



PROFESSOR OLLE LJUNGVIST

Professor Olle Ljungqvist received his medical degree and obtained his PhD on glucose metabolism in hemorrhage at the Karolinska Institutet in Sweden. He completed his residency and held several clinical positions in gastrointestinal surgery at the Karolinska Hospital and was appointed Professor of Surgery, Nutrition and Metabolism in 2005 at the Karolinska Institutet.



DR DAVID CANTY

Dr David Canty is an anaesthetist and Director of simulation and senior lecturer for the Ultrasound Education Group, Department of Surgery, University of Melbourne, where he researches and teaches a wide range of ultrasound techniques, with a particular interest in echocardiography.



PROFESSOR STANTON NEWMAN

Professor Stanton Newman is Professor of Health Psychology and Dean of the School of Health Sciences at City University London. He has published over 350 research papers and chapters as well as 18 books. One of his areas of specialisation is the impact of surgery and anaesthesia on the brain.

www.asa2016.com.au

*** Early bird registration closes 8 July 2016.**

THANK YOU



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