

## **PRESIDENT'S MESSAGE**

**JULY 2013** 

I would personally like to acknowledge the significant efforts on behalf of many people who have played a role in the preparation for the 2013 Annual Meeting and the aftermath of the cancellation. This was a trying time for all of us.

As I mention in my video that is posted on the CAS website (http://www.cas.ca/English/Update-on-Calgary-July-5), the decision to cancel the meeting was regrettable but inevitable. We are all too familiar with the devastation that occurred in the downtown Calgary core and understand that it was not possible to proceed with the Annual Meeting because of the complete closure of the area. To everyone who was involved in any way with the pre-meeting planning and preparation – session organizers, speakers, committee members, exhibitors, sponsors and staff – I extend a sincere "thank you" for your collective efforts.

Like all CAS member delegates, I am pleased that the gradual re-building of lives, homes and entire communities is unfolding at a slow but deliberate pace.

CAS is moving forward with its administrative "clean-up" and many member delegates have heard that CAS is fully refunding all fees for ticketed events – including 100% for social events – and 85% of the registration fee. Fifteen percent is being withheld from the basic registration fee to cover registration costs incurred by CAS in order to partially recover some direct costs related to the annual meeting registration process, which include online registration and housing services, credit card processing and accounting fees, registration program development/distribution and delegate bags. I stress that this decision was not taken lightly and, I believe, underscores our goal in ensuring the financial health of CAS.

I am pleased to report that each member of the CAS Executive has agreed to join me in leaving their registration fee with the CAS and I thank Dr Susan O'Leary, Dr Salvatore Spadafora, Dr Douglas DuVal and Dr Richard Chisholm for this gesture.

#### Table of Contents

Tuble of contents	
President's Message	.1
Volunteers Answer the Call	.2
Social Media: An Effective Communications Tool	
Appreciation and Thanks	.2
Personal Ad	.3
CAS at Work	.4
American Society of Anesthesiologists	.5
Treatment thresholds in PBM: How Can We Get it Right?	
Congratulations To CAS Award Winners	.7
Best Paper and Medical Student Winners	-
CAS Membership Honour Awards	
CAS Research Program, Operating Grants and Career Scientist Award	
The Self Assessment Program from the <i>Canadian Journal of Anesthesia</i>	
— CPD Online	10

I urge member delegates to consider leaving their registration fees with CAS to cover numerous non-registration expenditures. If we find that CAS has more income than expenses for the Annual Meeting, CAS will turn over all proceeds to support the Calgary relief efforts. It is not intended that CAS make



any profit from the kindness of member delegates who decide to leave their fees with CAS.

#### **ABOUT THE 2014 ANNUAL MEETING**

Annual Meeting attendees have indicated that they would prefer that CAS streamline the scheduling of educational events in order to enable more people to take advantage of more events. In the past, Annual Meeting sessions were scheduled at staggered times, which prevented a significant number of attendees from being able to participate in some sessions that were of interest to them. This was changed in 2012 so that all sessions now begin at common times and resulted in significantly improved evaluation results for the Annual Meeting. The next phase of streamlining will occur in 2014, when we will work to reduce the number of concurrent sessions to improve the overall experience for delegates by gaining the fullest advantage of the educational offerings available.

In closing, I would like to acknowledge the support shown by member delegates from across the country and encourage all CAS members to turn their attention to our 60<sup>th</sup> anniversary in 2014. I look forward to welcoming everyone to St. John's, Newfoundland – it promises to be a huge celebration!

Dr Patricia Houston, FRCPC CAS President



2014 CAS ANNUAL MEETING **ST. JOHN'S, NEWFOUNDLAND** JUNE 13 – 16 St. John's Convention Centre and Mile One Centre



**JULY 2013** 

# VOLUNTEERS **ANSWER THE CALL**

As the people of Calgary, High River and the other ravaged areas in Alberta pick up the pieces after the devastating floods, news reports confirm the progress of the massive clean-up operations and the slow resumption to normal life. In particular, the efforts of tireless volunteers, community groups and city and municipal employees have greatly enabled the massive cleanup operations.

The road to rebuilding lives, homes, buildings and businesses will, of course, continue for some time and the opening of the Calgary Stampede on schedule was certainly welcome news!





**REMINDER:** Watch for post-Annual Meeting updates on the CAS website, Twitter and Facebook The updates are posted on the CAS website and can be found here:

http://www.cas.ca/English/AM-2013

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## APPRECIATION AND THANKS

CAS recognizes the significant contribution made by many people in advance of the June 21 Annual Meeting start date - the Annual Meeting Committee, the Local Arrangements Committee in Calgary, the speakers, presenters, organizers, hotel and convention centre personnel, exhibitors, suppliers and the CAS staff team. Everyone's dedication is sincerely appreciated, particularly in light of how much was prepared well in advance of opening day.

The achievements of an organization are the results of the combined effort of each individual. Vince Lombardi, American football coach (1913 – 1970)

# **SOCIAL MEDIA: AN EFFECTIVE COMMUNICATIONS TOOL**

In addition to the website, CAS members who use Twitter and Facebook were able to keep up-to-date with the news on the status of the CAS 2013 Annual Meeting in advance of the scheduled opening day. If you're not on Twitter or Facebook, please consider joining. It's well worth it!



Follow CAS on Twitter: http://www.twitter.com/ CASUpdate



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#### **JULY 2013**

# **ANESTHESIA NEWS**



## **CAS AT WORK**

#### **POST-ANNUAL MEETING UPDATE**

Since the cancellation of the 2013 Annual Meeting, CAS has been responding as quickly as possible to members' and delegates' questions and concerns, including posting updates on the CAS website, Twitter and Facebook. Many situations and circumstances require attention and, as decisions are made, are communicated to meeting delegates as expeditiously as is possible. Following is an update on a number of initiatives:



#### **Richard Knill and Residents' Oral Competitions**

This year, there will be virtual Richard Knill and Residents' Oral Competitions. This means that the individuals who were scheduled to present at the CAS Annual Meeting have been invited to submit their presentations. The winners of these two competitions will be determined by mid-August and announced in the next issue of *Anesthesia News*.

#### **Publication of abstracts**

CAS will publish and acknowledge all the abstracts that were reviewed and selected by the Scientific Program Committee. No re-submissions of this year's submissions will be requested and new research abstracts will be considered in 2014.

**Note:** As in previous years, abstracts that were accepted for the 2013 Annual Meeting will be published in an online supplement to the *Canadian Journal of Anesthesia*.

#### **Re-Scheduling of Board of Directors' and Committee Meetings**

With the cancellation of the Annual Meeting, numerous committee meetings and the CAS Board of Directors' meeting did not take place. The CAS President, staff and committee chairs are reviewing each committee's situation and determining how and when a meeting can be convened. Committee members will be advised once the details have been confirmed.







# ANESTHESIOLOGY 2013

GLOBAL PARTNERS IN QUALITY OUTCOMES AND PATIENT SAFETY



ASA would like to express its condolences to those affected by flooding in Alberta, Canada, which prompted a state of emergency in Calgary and surrounding areas in mid-June.

While, we realize that severe weather necessitated the cancellation of the CAS 2013 Annual Meeting, we wanted you to know that ASA will continue to honor your intentions to attend.

ASA will extend a special discount to all CAS Active members who registered to attend the 2013 CAS Annual Meeting.

Watch for your exclusive promo code via email from CAS. Visit www.anesthesiology2013.org to register.



# **TREATMENT THRESHOLDS IN PBM:** HOW CAN WE GET IT RIGHT?

**JULY 2013** 

In 1997, the Krever Commission Report stated that "blood components and blood products will never be without risk. The best way to reduce that risk is to reduce their use." Despite important advances to reduce transfusion risks, this statement remains true today. Whilst blood transfusion can be life-saving, it is evident that many administered transfusions are unnecessary or inappropriate. Increasing literature shows that blood transfusions may be associated with increased patient morbidity, mortality and length of stay, increased costs and potential for blood shortages.

We need to ask: Does your patient need blood? When should you transfuse? How can you avoid transfusion? What are the benefits to the patient of avoiding transfusion? Patient blood management, or PBM, is the use, based on scientific evidence, of safe and effective medical and surgical techniques designed to prevent anemia and decrease bleeding in an effort to improve patient outcomes. With mounting evidence that allogeneic transfusions are associated with adverse patient outcomes, the concept of PBM is increasingly more relevant to patient safety and care.

We invite you to attend the Second Annual Symposium in PBM: An Idea Whose Time has Come – **Treatment thresholds in PBM: How Can We Get it Right?** 

#### When: Saturday, October 26, 2013 (08:00-16:00 h) Where: The Li Ka Shing Knowledge Institute, St. Michael's Hospital, Toronto

This multidisciplinary symposium will help participants understand the current basics of PBM, including the rationale for implementing a PBM program, identify components of a PBM program, address potential barriers and identify quality indicators for promoting clinical practice improvements in the hospital setting. In particular, the program, involving distinguished international and local speakers, aims to:

- Provide an understanding of the risks associated with anemia and its treatments including transfusion of blood products.
- Discuss the physiological adaptations to acute anemia and the hemoglobin thresholds at which these adaptive mechanisms are overwhelmed, leading to increased patient morbidity.
- Review what current transfusion trials have taught us with respect to optimal thresholds for transfusion in different patient populations.
- To review methods of assessing peri-operative coagulation and platelet function with the goal of optimizing patient management and reducing unnecessary transfusions in patients who experience acute blood loss.

John Freedman, MD FRCPC Professor Emeritus, Medicine, University of Toronto





(registration at http://pbms13-eorg.eventbrite.com/#)



## **CONGRATULATIONS TO CAS AWARD WINNERS**

Each year, the CAS Awards Ceremony recognizes the accomplishments of members across a spectrum of research, operating grants, competitions and other categories. The cancellation of this year's Annual Meeting means that some winners have been announced but not formally recognized. For awards that are adjudicated on-site, a decision about how to identify award winners will be communicated once it has been finalized.

**BEST PAPER AND MEDICAL STUDENT PRIZE WINNERS** 



**Dr Yuri Koumpan** 2013 Ian White Patient Safety Award



**Dr Nhathien Nguyen-Lu** 2013 Award for Best Paper in Obstetric Anesthesia



**Dr Waleed Riad Soliman** 2013 Award for Best Paper in Ambulatory Anesthesia



**Dr Terri Sun** 2013 Award for Best Paper in Pediatric Anesthesia



**Dr Yu-Chun Hung** 2013 Award for Best Paper in Regional Anesthesia and Acute Pain



Jayden Cowan 1<sup>st</sup> Prize 2013 Medical Student Paper



**Dr Li Wang** 2013 Award for Best Paper in Perioperative



**Dr Jigesh Mehta** 2013 Award for Best Paper in Neuroanesthesia



**Nadine Lam** 2<sup>nd</sup> Prize 2013 Medical Student Paper



Brittany Barron 3<sup>rd</sup> Prize 2013 Medical Student Paper

## CAS MEMBERSHIP HONOLIR AWARDS

#### GOLD MEDAL AWARD

In recognition of outstanding contributions to anesthesiology and leadership in advancing the area of chronic pain management

Dr Patricia Morley-Forster London, ON

#### **RESEARCH RECOGNITION AWARD**

In recognition of excellence in research and sustained contributions to the knowledge base and practice of anesthesiology

Dr Andrew Baker Toronto, ON

#### CLINICAL TEACHER AWARD

In recognition of outstanding commitment and dedication to the teaching of clinical anesthesia in simulation-based medical education initiatives Dr Viren Naik Ottawa, ON



#### CLINICAL PRACTITIONER AWARD

In recognition of his commitment to anesthesiology and exemplary work ethic in day-to-day clinical practice

Dr Ashraf Fayad Ottawa, ON



#### JOHN BRADLEY YOUNG EDUCATOR AWARD

In recognition of significant accomplishments in medical and research education and excellence as a clinician and role model

Dr Deven Chandra Toronto, ON









**JULY 2013** 





# THANK YOU

The Canadian Anesthesiologists Society gratefully acknowledges the support of the Canadian Anesthesia Research Foundation (CARF) and Abbvie, Adrienne Cheng Fund of CARF, Baxter Corporation, Bayer, Canadian Journal of Anesthesia, Fresenius Kabi Canada, Neuroanesthesia Section of CAS and Teleflex Medical.

The Research Awards are made possible through generous donations to the CARF from CAS members, institutions and industries that are committed to anesthesia research.

# Research Program, Operating Grants and Career Scientist Award

CAS Career Scientist Award in Anesthesia Dr Mrinalini Balki

Abbott/Abbvie New Investigator Award in Anesthesia Dr Sylvain Boet

Baxter Corporation Canadian Research Award in Anesthesia Dr Hance Clarke

Canadian Anesthesiologists' Society Research Award Dr Jason Maynes CAS Research Award in Neuroanesthesia in memory of Adrienne Cheng Dr Stephan Schwarz

Dr Earl Wynands/Fresenius Kabi Research Award Dr Duane Funk

Dr R A Gordon Research Award Dr Mrinalini Balki

The Canadian Journal of Anesthesia Research Award Dr D Norman Buckley

CAS/LMA-Teleflex Medical Residents' Research Grant Dr Daniel McIsaac

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

**CPD MODULE:** Residual paralysis: a real problem or did we invent a new disease? (available after July 31)

### ALSO AVAILABLE

- Ultrasound-guided regional anesthesia for upper limb surgery (March 2013)
- Massive transfusion in the trauma patient (December 2012)
- Competency-based professionalism in anesthesiology (September 2012)
- Fluid and vasopressor management for Caesarean delivery under spinal anesthesia (June 2012)
- Postoperative delirium: risk factors and management (March 2012)
- Airway management in the patient with potential cervical spine instability (**December 2011**)
- Anesthetic management of patients with an anterior mediastinal mass (September 2011)

## HOW TO ACCESS THE MODULES

Instructions can be found on the Canadian Anesthesiologists' Society website at: http://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 educational grants from the following industry partners:







