

# CAS

## ANESTHESIA NEWS

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CANADIAN ANESTHESIOLOGISTS' SOCIETY



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[www.cas.ca](http://www.cas.ca)

## CANADIAN ANESTHESIOLOGISTS' SOCIETY PRESIDENT



**Dr. Giuseppe Fuda,**  
CAS President

As we gather for an important week at the Canadian Anesthesiologists' Society, we look forward to welcoming many of you to Ottawa for the 2026 CAS Annual Meeting. Whether you are attending in person or virtually, this year's program reflects the strength, expertise, and engagement of our community. There is still time to register, and I encourage you to [review the program preview](#) for a look at what is to come. I would also like to extend sincere thanks to the many volunteers whose dedication and expertise have made this meeting possible.

The Annual Meeting is also an opportunity to recognize excellence across our profession. The 2026 award recipients including those honoured through the Honour Awards, Research Program, Best Abstracts, and Medical Student Prize represent an exceptional group of clinicians, researchers, educators, and learners. Their contributions speak to the depth of talent and commitment within our membership. Award recipients will be announced on our social media channels and by email following the conference, with full recognition featured in our September issue.

This commitment to excellence is also reflected in our broader education program, which continues to grow. As we look ahead to the fall, I invite members to revisit the many sessions and initiatives already delivered this year through our education recap. These offerings reflect our shared commitment to lifelong learning, professional development, and the continued advancement of anesthesia care in Canada.

Advocacy remains a central priority for CAS, and 2026 has already brought meaningful progress. A key focus of this work is the [CAS Anesthesia Delivery Taskforce](#), which continues to examine how anesthesia care is delivered across the country. Several important themes are emerging. Anesthesia delivery is more complex than it is often portrayed, with access closely tied to safety, quality, accountability, and workforce sustainability. Experiences vary significantly across regions and practice settings, reinforcing the need for national leadership while recognizing that solutions must reflect local realities.

The Taskforce has also emphasized that implementation matters. New or evolving models of care must be supported by role clarity, appropriate training,

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regulatory oversight, and strong accountability structures. Important data gaps remain, and better evidence will be needed to guide decision-making. Throughout this work, one principle remains clear: anesthesiologists must remain central to shaping the future of anesthesia care, ensuring that change is thoughtful, evidence-informed, and grounded in patient safety.

There continues to be significant activity across the organization. We are proud of the progress being driven through our foundations, CARF and CASIEF, as well as through the *Canadian Journal of Anesthesia* and the many CAS sections and committees. This collective effort strengthens our community, broadens our impact, and reflects the depth of member engagement across the Society. This issue highlights much of that work in greater detail.

I also encourage CAS members to consider becoming more involved. Volunteering with CAS is a meaningful way to contribute to the profession, develop leadership skills, and help shape future priorities. Current opportunities can be found at [www.cas.ca/volunteer](http://www.cas.ca/volunteer).

Finally, I would like to share a few organizational updates. We are pleased to welcome Dr. Mateen Raazi as incoming Vice President, who will be sworn in at the Annual Business Meeting on June 7 in Ottawa. Dr. Raazi has been a longstanding and active contributor to CAS, most recently serving in a leadership role with ACUDA. We look forward to his leadership and to the perspective he will bring to the organization.

At the same time, we extend our sincere thanks to Vanessa Foran as she concludes her tenure as CEO after four years of dedicated service. During this time, Vanessa has played a pivotal role in advancing the Society's strategic priorities, strengthening our advocacy efforts, and guiding CAS through a period of meaningful growth and transformation. Her leadership has helped position the organization for continued success, and she leaves behind a strong foundation on which to build. We are grateful for her commitment, vision, and lasting contributions to CAS.

### THANK YOU VANESSA



Thank you for your continued engagement and support. I look forward to connecting with many of you this week and to the continued progress ahead.

Sincerely,



**Dr. Giuseppe Fuda,**  
CAS President



## BOARD OF DIRECTORS

AS OF JUNE 2026

### EXECUTIVE COMMITTEE

**Dr. Giuseppe Fuda**, President  
**Dr. James Kim**, Vice President  
**Dr. Vivian Ip**, Secretary  
**Dr. Hilary Grocott**, Treasurer  
**Dr. Lucie Filteau**, Past President

### DIVISIONAL REPRESENTATIVES

**Dr. Matthew Banasch** (Alberta)  
**Dr. Darcy Bishop** (Nova Scotia)  
**Dr. Joseph Desreux** (Prince Edward Island)  
**Dr. Yannick Duguay** (New Brunswick)  
**Dr. Thomas Hall** (Manitoba)  
**Dr. Jadon Harding** (Newfoundland & Labrador)  
**Dr. Nikola Joly** (Quebec)  
**Dr. Melanie Orvold** (Saskatchewan)  
**Dr. Soniya Sharma** (Ontario)  
**Dr. Annika Vrana** (British Columbia)

### EX-OFFICIO MEMBERS

**Dr. Mateen Raazi**, ACUDA President  
**Dr. Alex Bak**, Resident Representative

[CLICK HERE TO VIEW ONLINE](#)

# ADVOCACY UPDATE

## Elevating Our Voice

CAS continues to strengthen its advocacy work on behalf of anesthesiologists and the patients we serve. Over the past several months, we have been engaging with governments, policymakers, and partners on issues that directly affect anesthesia care, including workforce mobility, surgical access, system capacity, and environmental sustainability.

## Reducing Barriers to practice

On March 24, CAS President, Dr. Giuseppe Fuda and CEO, Vanessa Foran met with representatives from Ontario's Ministry of Red Tape Reduction. The discussion focused on practical ways to reduce administrative barriers that affect anesthesiologists who wish to practice across provincial borders, as well as those already in Ontario who may face challenges obtaining privileges in local hospitals.

The meeting was productive and as a follow-up, CAS will work with the Ontario Anesthesiologists to provide concrete recommendations that could improve physician mobility, reduce administrative burden, and support access to anesthesia services where they are needed.

## Environmental Sustainability

CAS received a response from Environmental and Climate Change Canada regarding our CAS' submission under the Canadian Environmental Protection Act (CEPA) related to Desflurane. While the Minister of the Environment has declined to review Desflurane separately, the response confirms that desflurane is included within the broader PFAS category. This category has been found to meet the criteria under section 64(a) and (c) of CEPA and is proposed to be added to Part 2 of Schedule 1 to CEPA.

This is an important development. Addition to Schedule 1 provides a mechanism for the Government of Canada to propose future instruments, including regulations, for substances that are part of the class of PFAS (excluding fluoropolymers). The government indicated that it will be taking a multipronged approach when addressing chemicals in the PFAS category and it will be imperative for CAS to continue to be an active part of these consultations moving forward.

Our goal remains clear: to support evidence-informed, clinically practical approaches that reduce the environmental footprint of anesthesia care while protecting patient safety and ensuring that policy decisions are grounded in the realities of perioperative practice.

## CAS On The Hill

CAS is grateful that Liberal MP Éric St. Pierre, a strong advocate for environmental sustainability, has kindly agreed to co-host the CAS parliamentary reception which will take place in June following the Annual Meeting in Ottawa.

The event will be led by Dr. Fuda and will provide an audience of MPs and political staffers, with an overview of the current challenges and opportunities in anesthesia, including workforce pressures, surgical access, system capacity, and environmentally sustainable care and highlight how anesthesiologists can be partners to developing practical solutions for Canada's health system.

## Learn More About CAS Advocacy at the Annual Meeting

CAS members are invited to attend a dedicated session on the [strategic plan](#) with a specific focus on advocacy at the Annual Meeting on Sunday, June 7, following the President's symposium. Dr. Fuda will be co-hosting the session with GPA, CAS' government relations firm.

The session will provide an overview of the current political landscape, highlight CAS advocacy achievements to date, and outline our priorities for the future. Members will also have an opportunity to ask questions and share perspectives on how CAS can continue to strengthen its advocacy efforts.

Mark your calendars, we look forward to seeing you in Ottawa and continuing this important conversation together.



# FROM REFLECTION TO DIRECTION: EMERGING LESSONS FROM THE CAS ANESTHESIA DELIVERY TASKFORCE



*By Dr. Giuseppe Fuda, MD, FRCPC President, Canadian Anesthesiologists' Society Chair, Anesthesia Delivery Taskforce*

In the March edition of *Anesthesia News*, I wrote that the work of the CAS Anesthesia Delivery Taskforce was not simply to observe change, but to help our profession anticipate it and shape it thoughtfully. Since then, our discussions have continued, and several important lessons have become clearer.

First, anesthesia delivery in Canada is more complex than simplified narratives often suggest. Access pressures are real, but access cannot be considered in isolation from safety, accountability, quality of care, training, and workforce sustainability. If the conversation is reduced to a question of case coverage alone, we risk missing the broader realities that define our practice.

Second, there is no single Canadian reality. The Taskforce has heard and discussed markedly different experiences across regions and institutions. Rural and remote communities, tertiary academic centres, community hospitals, and jurisdictions with different mixes of anesthesiologists, Family Practice Anesthetists, and Anesthesia Assistants all face distinct pressures and constraints. This reinforces an important point: National leadership is needed, but one-size-fits-all solutions are unlikely to serve Canada well.

Third, as models of care evolve, implementation matters as much as structure. Role clarity, professional respect, training implications, local culture, regulatory oversight, and the pace of change all influence whether a model supports or undermines patient care and professional cohesion. These are not secondary details. They are central to whether change is safe, credible, and sustainable.

Fourth, significant data gaps remain. Across several domains, including emerging delivery models, workforce planning, training implications, and outcomes, the profession still lacks the kind of robust Canadian data that should ideally inform major policy and practice decisions. One of CAS' important roles in this space is to help strengthen national dialogue while advocating for a more evidence-informed approach.

What has also become increasingly clear is that **anesthesiologists must remain at the centre of this conversation**. Innovation, evolving team structures, and new technologies may all become part of the future landscape of care. But none of these replace the need for clinical judgment, physician leadership, strong standards, and a clear commitment to patient safety.

The goal of the Taskforce is not to force premature consensus where it does not yet exist, or is it to defend the status quo reflexively. Our role is to help bring clarity to a complex national issue, identify principles that can guide future decisions, and ensure that the voice of Canadian anesthesiologists remains thoughtful, credible, and constructive.

This work will continue, and I look forward to engaging further with members at the CAS Annual Meeting, where these themes will be explored in greater depth. As always, **member input** remains essential. The future of anesthesia delivery in Canada should not be shaped for our profession. It should be shaped with it.

# CAS ANNUAL MEETING SCIENTIFIC PROGRAM COMMITTEE (AMSPC) – 2026 CAS ANNUAL MEETING

On behalf of the AMSPC, it is our great pleasure to share an update on the upcoming 2026 Canadian Anesthesiologists' Society (CAS) Annual Meeting in Ottawa, Ontario.

The AMSPC is delighted to present an outstanding academic program for #CASAM2026, featuring a diverse range of workshops, engaging CAS Discovery Talks, and sessions designed to reflect the evolving landscape of anesthesiology practice, education, and research. This year's program highlights innovation, practical learning, and meaningful dialogue across all career stages.

We are especially grateful for the remarkable support from CAS members, sections, and committees. This year, we received more than 100 exceptionally high-quality submissions. The breadth and depth of these proposals reflect the strength, creativity, and scholarly commitment of our community.

Selecting the final program was both a privilege and a challenge. The process involved rigorous peer-review by AMSPC members, combined with a thoughtful needs assessment informed by feedback from previous CAS meetings. This

approach ensures that the program is not only academically robust but also closely aligned with the interests and needs of our membership.

We are excited to welcome you to Ottawa and look forward to your active participation and feedback. Your insights are essential as we continue to refine and enhance future meetings.

In keeping with our guiding principle, *"by the CAS members, for the CAS members,"* the AMSPC is already looking ahead to the 2027 meeting in Winnipeg—where we aim to build on this year's success and deliver an even stronger program.

We thank you for your continued engagement and support and look forward to connecting with you at #CASAM2026.

Sincerely,



**Dr. Virendra Arya**  
Chair, Annual Meeting  
Scientific Program  
Committee (AMSPC)

**Ottawa 2026**  
*Insight. Innovation. Impact*

**#CASAM2026**

**CAS 2026**  
ANNUAL MEETING  
**JUNE 5-7**  
THE WESTIN OTTAWA

[CLICK HERE to check out our CAS Annual Meeting Preview in this newsletter](#)

CANADIAN ANESTHESIOLOGISTS' SOCIETY  
SOCIÉTÉ CANADIENNE DES ANESTHÉSIOLOGISTES

# YOUR VOICE, COLLECTIVE ADVOCACY: WHY MEMBERSHIP MATTERS

Each year, membership dues directly support CAS' advocacy activities to advance the practice of anesthesia—in Canada and globally. As a Society, we exist to champion you and the specialty, which means that we rely on your input to make a meaningful impact in your workplaces and for your patients. **Here's a breakdown of how member voices enable us to be effective advocates on your behalf:**

## Anesthesia Taskforce:

This **new team** is made up of 13 anesthesia leaders who represent diverse geographical, cultural, and specialty backgrounds, and practice across a broad spectrum of clinical and non-clinical environments. They work with the CAS Board and national office to identify practical, evidence-informed solutions to key workforce challenges and enhance our ability to influence change at the national level.

## Five-Year Strategic Plan:

Feedback pulled directly from member surveys and discussions was used to determine the priorities for the 2025–2030 **CAS Strategic Plan**. This approach is designed to ensure we remain accountable to members and are prepared to respond quickly as your needs evolve.

## Government Relations:

CAS has steadily invested more time in discussions with federal and provincial governments—and 11 took place in 2025. As requested by members, we will continue expanding our relationship with Health Canada to provide input for essential resources like Canada's Critical Vulnerable Drug List, while engaging policy makers with key issues, such as transitioning to greener anesthesia best practices.

## Position Statements:

All statements are written by or in collaboration with CAS members directly involved with the issue being addressed. Last year's **statement in response to Quebec's Bill 2** was developed by anesthesiologists and allied healthcare professionals currently practicing in the province.

## Public Awareness Campaign:

Since the start of 2026, CAS has promoted our new **public-facing website section** on social media weekly. In the second half of the year, we will measure and report on campaign impact, and members will be invited to provide feedback on further increasing public awareness of your roles and the challenges you face.

## Join Us for 2026 and Beyond

Throughout the year, forums such as member surveys, the CAS Annual Meeting, volunteer leadership opportunities, and newsletter updates will be leveraged to collect data on how we can better uplift our community through advocacy. **Renew your membership** or **join CAS** now to be part of this journey, as we transform our specialty together. **Click here** to read this issue's Advocacy Update.



## **IN MEMORIAM 2025 - 2026 EN SOUVENIR**

**John Wade**  
Winnipeg, MB

**Brian Metcalfe**  
Peterborough, ON

**Lucy Entwistle**  
Edmonton, AB

**Richard Baxter**  
Heriot Bay, BC

**Trevor Lobb**  
London, ON

**John Earl Wynands**  
Ottawa, ON

**Terrence Waters**  
Vancouver, BC

**Alison Froese**  
Kingston, ON

**Myrle Gard**  
Winnipeg, MB

- as of May 2026

# 2026 EDUCATION RECAP

Our education program kicked off the year with an impressive lineup of four **winter webinars**. The momentum continues this Spring, leading to the highly anticipated **2026 CAS Annual Meeting**, taking place June 5–7 in Ottawa, Ontario. All events are free for CAS members and available online.

This year also marks the return of the **CAS SAMBA Ambulatory Anesthesia Collaborative Rounds Series** and the **CAS Pinnacle Rounds Series**.

Stay informed about these and other educational opportunities by visiting [www.cas.ca/upcoming-events](http://www.cas.ca/upcoming-events).

## WINTER WEBINARS

**Intraoperative Management for Major Liver Resection: An Update**  
JANUARY 21, 2026  
8 PM ET

Dr. Stuart McCluskey  
Moderator

Dr. Ryan McGinn  
Presenter

Dr. Guillaume Martel  
Presenter

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[WWW.CAS.CA/LIVER-RESECTION](http://WWW.CAS.CA/LIVER-RESECTION)

### **Intraoperative Management for Major Liver Resection: An Update** January 21, 2026

This webinar reviewed evidence-based approaches to perioperative blood conservation in major liver resection, focusing on an increasingly comorbid patient population. The session highlighted the impact of transfusion on outcomes and examined recent trial evidence on hypovolemic phlebotomy and tranexamic acid to support optimal intraoperative care.

[View Recording](#)

**3<sup>rd</sup> Annual World Regional Anesthesia Day Webinar**  
January 31, 2026  
10 am ET

Dr. Abraham Niaz  
Presenter

Dr. Joanna Filles  
Presenter

Dr. Tim Jan  
Presenter

Dr. Vivian Ip  
Presenter

Dr. Peter Bone  
Moderator

ESRA The European Society of Regional Anesthesia & Pain Therapy  
Creating knowledge, transforming care

In celebration of:  
WDRAPM  
WORLD DAY OF REGIONAL ANESTHESIA AND PAIN MEDICINE

[WWW.CAS.CA/REGIONAL-2026](http://WWW.CAS.CA/REGIONAL-2026)

### **3<sup>rd</sup> World Day of Regional Anesthesia and Acute Pain Medicine Webinar** *Equity, Access, and Relief – Get the Best Out of Regional Anesthesia* January 31, 2026

World Day of Regional Anesthesia and Pain Medicine (WDRAPM) was marked globally and brought together anesthesiologists, trainees, nurses, researchers, and allied health professionals to highlight the essential role of regional anesthesia and pain medicine in patient care. The observance raised awareness of safe, effective, and evidence-based pain management, promoted multidisciplinary collaboration, and celebrated advances such as ultrasound-guided regional anesthesia, while reinforcing the importance of education in acute and chronic pain management.

[View Recording](#)

**OBSTRUCTIVE SLEEP APNEA IN ADULT AMBULATORY ANESTHESIA WEBINAR**  
February 25, 2026  
8 pm ET

An Examination of the latest CJA CPD Module

Dr. Donald Young  
Presenter

Dr. Kathryn Sparrow  
Moderator

CANADIAN ANESTHESIOLOGISTS' SOCIETY

[WWW.CAS.CA/APNEA-WEBINAR](http://WWW.CAS.CA/APNEA-WEBINAR)

### **Obstructive Sleep Apnea in Adult Ambulatory Anesthesia Webinar** February 25, 2026

This webinar addressed perioperative management of patients with obstructive sleep apnea (OSA) undergoing ambulatory surgery. It reviewed evidence-based strategies for reducing anesthesia-related risks, guiding preoperative planning, and ensuring safe same-day discharge for OSA patients.

[View Recording](#)

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## ONGOING SERIES

### CAS Pinnacle Rounds

Our member-exclusive education program, **CAS Pinnacle Rounds: Celebrating National Anesthesia Education**, continues in 2026 and features new anesthesia teaching rounds submitted by Canadian universities across the country.

**CAS PINNACLE ROUNDS SERIES**

**Unseen Vectors and the Sterile Truth: Rethinking Infection Control for the Anesthesiologist**

February 4, 2026  
8 pm ET

Moderator:  
Dr Maha Al Mandhari

Presenter:  
Dr Hui Yu (Betty) Zhang

[www.cas.ca/pinnacle-rounds](http://www.cas.ca/pinnacle-rounds)

### Unseen Vectors and the Sterile Truth: Rethinking Infection Control for the Anesthesiologist

February 4, 2026

**This presentation** examined infection control practices in the perioperative setting, reviewing best-practice guidelines from professional associations and the evidence supporting common techniques such as disposable surgical caps, MRSA gowning, and vial stopper disinfection.

[View Recording](#)

**CAS PINNACLE ROUNDS SERIES**

**Time Is Brain: Stroke Management and Review of Nova Scotia EVT Process Times From an Anesthesia Perspective**

April 15, 2026  
8 pm ET

Moderator:  
Dr Kan Ma

Presenter:  
Dr Kristin Ko

[www.cas.ca/pinnacle-rounds](http://www.cas.ca/pinnacle-rounds)

### Time Is Brain: Stroke Management and Review of Nova Scotia EVT Process Times From an Anesthesia Perspective

April 15, 2026

With over 97,000 strokes occurring annually in Canada, this session explored the evolving role of anesthesiologists in EVT care. Attendees reviewed stroke management guidelines, anesthetic considerations, and insights from Nova Scotia's provincial data, alongside the impact of global trials on practice.

[View Recording](#)

[More Pinnacle Rounds](#)

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## CAS SAMBA Ambulatory Anesthesia Collaborative Rounds Series

This education program, developed by the CAS Ambulatory Section and the **Society for Ambulatory Anesthesia (SAMBA)**, offers a series of rounds to advance knowledge and skills in ambulatory anesthesia.

**CAS SAMBA AMBULATORY ANESTHESIA COLLABORATIVE ROUNDS SERIES**

**"Bad Outcomes in Strange Times" Mitochondrial DNA Mutation in Specific Patient Population**

March 25, 2026 - 7 pm ET

Moderator: Dr. Carlos Ibarra Moreno

Presenter: Dr. Claudia Bruguera Torres

Presenter: Dr. Luis Rodriguez

[WWW.CAS.CA/AMBULATORY-ROUNDS](http://WWW.CAS.CA/AMBULATORY-ROUNDS)

### Bad Outcomes in Strange Times: Mitochondrial DNA Mutation in a Specific Patient Population

March 25, 2026

This session examined rare but severe neurologic complications linked to patients with Venezuelan ancestry following routine anesthesia. Experts discussed screening considerations and strategies to support safer anesthetic planning.

[View Recording](#)

**CAS SAMBA AMBULATORY ANESTHESIA COLLABORATIVE ROUNDS SERIES**

**What's New in Anesthetic Pharmacology: Emerging Agents and Practical Applications in Ambulatory Anesthesia**

May 6, 2026 - 8 pm ET

Moderator: Dr. Sanjiv Gupta

Speaker: Dr. Kumar G. Belani

[WWW.CAS.CA/AMBULATORY-ROUNDS](http://WWW.CAS.CA/AMBULATORY-ROUNDS)

### What's New in Anesthetic Pharmacology: Emerging Agents and Practical Applications in Ambulatory Anesthesia

May 6, 2026

This session provided a focused update on contemporary pharmacology in ambulatory anesthesia, with particular emphasis on remimazolam, a novel ultrashort-acting benzodiazepine with growing clinical applications in procedural sedation and general anesthesia.

[View Recording](#)

[More SAMBA Rounds](#)





CANADIAN ANESTHESIOLOGISTS' SOCIETY  
SOCIÉTÉ CANADIENNE DES ANESTHÉSIOLOGISTES

## 2026 CAS ANNUAL MEETING JUNE 5-7, OTTAWA

Get ready for an unforgettable gathering of anesthesiology and allied professionals at the **Canadian Anesthesiologists' Society (CAS) Annual Meeting**, happening **June 5-7, 2026** in Ottawa, Ontario.

This premier event offers:

- Innovative and engaging educational sessions, problem-based learning discussions (PBLDs), CAS Expert Insights sessions, and hands-on workshops.
- Unique opportunities to connect with colleagues and experts from across Canada and beyond through dedicated networking events, including the annual CAS Soirée.
- Dynamic competitions, including the Richard Knill Research Oral Competition and the Residents' Oral Competition.
- Resident-focused programming, including the Ace It! exam prep course, the annual Residents' Panel, and the Resident SIM Olympics.

**Reminder – CAS offers an extensive virtual program available for those not attending in-person.**

[Program](#)

[Register](#)

**At the 2026 meeting,**

**18.75 Section 1**

**and over 40 hours of**

**Section 3 Credits**

**are available**

### **Expansive Scientific Program**

Attendees of the 2026 CAS Annual Meeting can expect engaging workshops and expert-led sessions that deliver the latest insights and real-world applications in anesthesiology.

Our 2026 theme is **"Shaping the Future of Anesthesiologists: Strong Voices, Skilled Hands."** It highlights the leadership, expertise, and collaboration that define the specialty of anesthesiology. By amplifying strong physician voices and recognizing the essential role of skilled anesthesia care teams, the Meeting celebrates the collective commitment to advancing patient care, professional excellence, and the future of the profession.

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## Opening Keynote – Dr. Balachundhar Subramaniam

### Access the Pause: The Cognitive Edge in Modern Anesthesiology

June 6, 2026, 8 am ET,  
In-person/virtual



Dr. Subramaniam is an anesthesiologist at Beth Israel Deaconess Medical Center and Professor at Harvard Medical School. A NIH- and PCORI-funded researcher, his work focuses on postoperative cognition and brain health after surgery. He also founded the Sadhguru Center for a Conscious Planet and is a TEDx speaker known for bridging neuroscience, resilience, and performance.

Dr. Subramaniam will deliver “Access the Pause: The Cognitive Edge in Modern Anesthesiology,” a compelling keynote exploring how stress regulation, cognitive endurance, and physiologic resilience enhance clinical performance and leadership. Grounded in neuroscience and tailored to Canadian healthcare realities, this session will provide practical micro-tools that strengthen decision-making, steady skilled hands, and empower strong professional voices in today’s highly demanding perioperative environment.



## Hands-on Workshops and Problem-Based Learning Discussions (PBLDS)

The Annual Meeting is designed for hands-on participation, where delegates can engage directly with expert faculty and peers while refining their skills in real time. Explore practical sessions across a wide range of topics, including gastric ultrasound, POCUS, TCI and TIVA, and regional blocks. PBLDs offer an immersive, case-based experience where delegates work through evolving scenarios, explore multiple clinical pathways, and apply their expertise to make informed decisions. Sessions span key areas such as neuroanesthesia, perioperative medicine, equity, diversity, and inclusion (EDI), obstetric anesthesia, and pediatrics.

Workshops

PBLDS

## CAS Expert Insights Program

CAS Expert Insights delivers ten focused 45-minute sessions designed to reinforce long-term knowledge retention through pre- and post-session testing. Covering key areas of practice, topics include infection prevention and environmental sustainability, placenta accreta spectrum, difficult spinal anesthesia, quality improvement in obstetric anesthesia, artificial intelligence in perioperative medicine, perioperative transfusion, and more. Interactive, practical, and outcomes-driven, Expert Insights is designed to translate learning into meaningful impacts in everyday clinical practice.

Program



Resident Simulation Olympics Group Photo From the 2025 CAS Annual Meeting.

## Competitions and Ace It!

A variety of competitions bring energy to the 2026 Annual Meeting—including the Richard Knill Competition, which recognizes top submitted abstracts, and the Residents Oral Competition, which showcases outstanding resident research. The Resident SIM Olympics also returns, with teams from across Canada competing in critical event simulations. Finally, “Ace It! A Prep Course for the Royal College Exam” is back as part of the resident program, offering exam preparation support through mock tests, lectures on key topics, and structured oral exam PBLDs with expert feedback.

Ace it!

SIM Olympics



### Annual Business Meeting

The Annual Business Meeting provides members with key updates on the Canadian Anesthesiologists' Society, including financial performance and highlights from the year's achievements. Attendees will also hear updates from the *Canadian Journal of Anesthesia (CJA)*, CARF, CASIEF, ACUDA, and the World Federation of Societies of Anesthesiologists.



### Exhibit Hall

The Exhibit Hall showcases the latest advances in anesthesia, with industry partners presenting new technologies, products, and solutions that support clinical practice and innovation. It also serves as a central gathering space for delegates and hosts during many of the meeting's social events.

## CAS Annual Meeting Social Events: Experience Ottawa!

### Welcome Reception

Friday, June 5 | 6:00 p.m. – 7:30 p.m.

### CAS Soirée

Saturday, June 6 | 7:00 p.m. – 10:00 p.m.

| Fairmont Château Laurier

**Tickets: Active/Associate Members, Non-Members - \$120**

**Discount tickets for Retired, Resident, Fellow, Medical Student and Anesthesia Assistant Members – \$60**

Delegates are invited to unwind and celebrate at the annual CAS Soirée. This year features live music by JW Jones at the gorgeous Fairmont Château Laurier in Ottawa. Delicious food and a lively atmosphere are designed to bring colleagues and friends together outside of the formal program.



### JW Jones

JW-Jones is a Billboard Top 10 Blues artist, 2020 International Blues Challenge winner, and JUNO-nominated Canadian singer and guitarist known for his high-energy live performances. With a career spanning global tours and acclaimed collaborations, he continues to earn recognition for both his searing guitar work and deeply personal, story-driven songwriting.

### Closing Social Hour

Sunday, June 7 | 5:00 p.m. – 6:00 p.m.

### Explore Local Adventures

Attending the Annual Meeting in Ottawa offers more than world-class learning. Explore Canada's capital, from the Rideau Canal to museums and local dining, all while combining professional development with memorable experiences.

Help support our foundations

**CARF and CASIEF**

by buying a 50/50 raffle ticket!

**Winners will be announced  
at the Soirée!**

**SUPPORT HERE**

[Register for Social Events](#)

[Excursions](#)

# CAS AT WCA2026 APRIL 15-19, 2026 MARRAKECH, MOROCCO

CAS was proud to represent Canada at the **World Congress of Anaesthesiologists 2026** in Marrakech, where Canadian expertise was showcased across the scientific program. Contributions from leaders such as Dr. Adam Law (Airway Management), Dr. Ron George (Obstetric Anaesthesia), Dr. Jason McVicar (Pain Medicine), Dr. Duminda Wijeyesundera (Perioperative Medicine), and Dr. Hilary Grocott (Circulation) highlighted the strength and impact of Canadian research and clinical leadership on the global stage.



CAS Staff and volunteers at the CAS booth about WCA Vancouver 2028

A proud moment for the Canadian community came during the opening ceremony, in which Dr. Angela Enright and Dr. Adrian Gelb were honoured with the inaugural Distinguished Service Award in recognition of their outstanding contributions to the specialty.



Dr. Adrian Gelb (second from the right) accepts his award.

CAS staff and Board members were also on site, connecting with colleagues from around the world and fostering meaningful international relationships. The dedicated CAS booth served as a hub for engagement and collaboration, reinforcing Canada's presence within the global anaesthesiology community.

This strong showing reflects Canada's leadership in anaesthesiology and builds momentum as CAS looks ahead to hosting the **2028 World Congress of Anaesthesiologists in Vancouver**.



(left to right) – CAS Vice-President Dr. James Kim; Ashley Smith, CAS Director, Programs and Membership Engagement; CAS President Dr. Giuseppe Fuda; Dr. Andrew Nice, former CAS Board Secretary; Dr. Jennifer Landry, former CAS Divisional Rep.



CAS Vice-President Dr. James Kim and CAS Treasurer Dr. Hilary Grocott.



(left to right) Ashley Smith, CAS Director, Programs and Member Engagement; Dr. Giuseppe Fuda, CAS President; Vanessa Foran, past CAS CEO.



(left to right) Ashley Smith, CAS Director, Programs and Member Engagement; Dr. Hilary Grocott, CAS Treasurer; Dr. Viren Naik; Dr. Dolores McKeen, past CAS President; Dr. Doreen Yi, Past CARF Chair; Vanessa Foran, past CAS CEO; Dr. James Kim, CAS Vice-President; Dr. Jordan Tarshis, Past Chair, CEPD Committee.

# RESEARCH REVIEW – DR. CONNOR BRENNNA

## TARGETING A5GABAA RECEPTORS TO TREAT DEPRESSION WITH NITROUS OXIDE



By Dr. Connor T. A. Brenna, Departments of Anesthesiology & Pain Medicine, Physiology, Clinician Investigator Program, University of Toronto, Toronto, ON, X: [@CTA\\_Brenna](#)

Roughly one in every five patients we care for in the operating room has a history of major depressive disorder, placing it among the most common perioperative comorbidities. Perioperative depression has been linked to a range of adverse outcomes, including acute and chronic postsurgical pain, postoperative delirium and longer-term cognitive deficits, prolonged hospital length of stay, and reduced overall quality of life and recovery. However, in contrast to other common comorbidities, there is relatively limited high-quality evidence to guide tailored perioperative care for patients with depression. In fact, except for anesthesia administered for electroconvulsive therapy, anesthesiology and mood disorders have traditionally belonged to largely separate domains of medicine.

The care of depression is evolving, and so is its relationship with the anesthesiologist. Over the past two decades, a new class of rapid-acting antidepressants has emerged, and unlike traditional therapies, these drugs can produce clinically meaningful effects within hours rather than weeks. Some of these drugs have demonstrated efficacy even for treatment-resistant depression, defined as disease not responsive to multiple adequate trials of conventional therapies. Notably, the founding members of this novel class of antidepressants are rooted in anesthetic pharmacology, positioning anesthesiologists at the forefront of next-generation care for depression.

The first rapid-acting antidepressant to enter mainstream therapy was esketamine, an enantiomeric form of ketamine. Esketamine was approved for use in conjunction with conventional antidepressants for treatment-resistant depression by the U.S. Food and Drug Administration (FDA) and European Medicines Agency (EMA) in 2019, and by Health Canada in 2020. The FDA and EMA have subsequently granted regulatory approval for esketamine for the treatment of major depressive disorder with acute suicidal ideation in 2020 and 2021, respectively. The limits of esketamine's therapeutic potential are still being tested, and in 2025, the FDA granted further approval for its use as a monotherapy for treatment-resistant depression.

Our team recently reviewed evidence suggesting that many other general anesthetic drugs have similar, rapid-acting antidepressant potential. For example, there have now been seven randomized controlled trials examining nitrous oxide for major depressive disorder or treatment-resistant depression, generally reporting signals consistent with rapid antidepressant effects. Other preliminary studies have explored the antidepressant potential of drugs like propofol and isoflurane. Anesthesiologists have played a central role in this work, from early mechanistic studies to the development of clinical infrastructure such as outpatient ketamine treatment programs.

Despite this progress, an important piece of the puzzle is still missing: How anesthetic drugs work as antidepressants is not yet well-understood. Determining their mechanisms of action is essential to distinguishing authentic and sustained physiologic effects from placebo responses, to inform rational trial design (anticipating which anesthetics might be most effective and what doses and dosing schedules are optimal for the induction and maintenance of antidepressant effects), and to guide the development of new antidepressant drugs that can engage the same biological targets with fewer side effects and lower abuse potential. This mechanistic insight will also provide a first step in understanding how anesthetics may influence mood in the perioperative setting, where inflammation, physiologic stress, and pharmacologic exposures interact to complicate clinical investigation.

Addressing this gap has been the major focus of my PhD training at the University of Toronto, supervised by Dr. Beverley Orser. With the support of the Ontario's Anesthesiologists – CAS Residents' Research Grant, our work examines the sustained effects of ketamine and nitrous oxide on GABAergic signaling, a central inhibitory system in the brain that is closely linked to both anesthesia and depression. Using electrophysiology, molecular biology, and biochemistry in tractable preclinical models such as cultured neurons, we study how these drugs trigger alterations in the number and function of GABA

...continued on page 16

receptors that last long after the drugs are eliminated, with the broader goal of identifying changes that may underlie their antidepressant effects.

In ongoing (unpublished) work supported by this grant, we have found that pro-inflammatory signaling—commonly observed in depression—induces a persistent increase in key components of GABAergic transmission, including increased activity of a specific population of extrasynaptic GABAA receptors. A single exposure to a clinically relevant dose of ketamine or nitrous oxide prevents this change and preserves baseline receptor function, offering a plausible mechanistic link to their antidepressant actions. Interestingly, the two anesthetics appear to engage different cellular pathways to converge on a similar functional outcome. We are continuing this work to better understand the complete story and its relationship with depression.

As our understanding of anesthetics' antidepressant mechanisms evolves, so do inroads between anesthesiology, neuroscience, and psychiatry. We hope that this multidisciplinary work can support opportunities to improve the care of surgical patients with depression, promote interdisciplinary training models, and continue defining a leadership role for anesthesiologists in a new era of psychopharmacology.

A detailed overview of the new frontier for anesthesiologists in neuropsychiatric care is presented here:

[pubmed.ncbi.nlm.nih.gov/38856663/](https://pubmed.ncbi.nlm.nih.gov/38856663/)

*Funding Acknowledgement: This work was funded by the 2024 Residents' Research Grant awarded by the Canadian Anesthesiologists' Society, **Canadian Anesthesia Research Foundation (CARF)** and Ontario's Anesthesiologists, as well as the Canadian Institutes of Health Research Vanier Canada Graduate Scholarship. Dr. Beverley Orser is supported by the Canadian Institutes of Health Research Foundation Grant.*

### **Award name:**

**2024 ONTARIO'S ANESTHESIOLOGISTS – CAS RESIDENTS' RESEARCH GRANT**

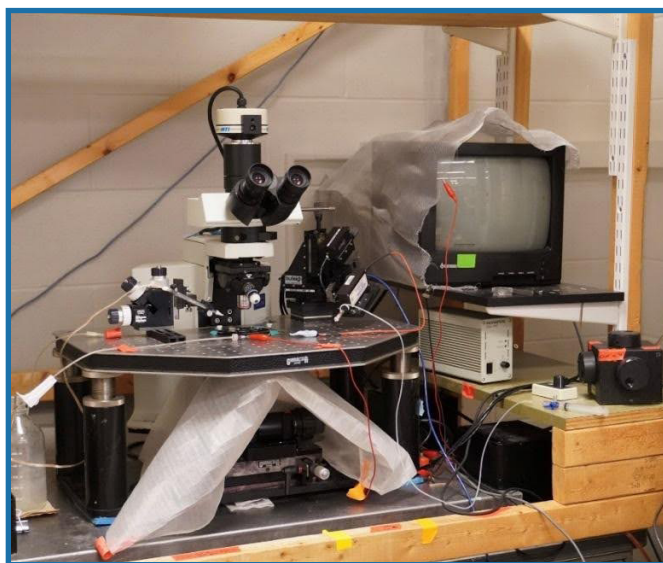
**Award amount:** \$10,000

**Institution:** University of Toronto

**Title:** Targeting  $\alpha 5$ GABAA Receptors to Treat Depression with Nitrous Oxide



**The Orser Lab team.** Left to right: MeiFeng Yu (PhD student), Lilia Kaustov (Lab Manager), Dr. Beverley Orser (Principal Investigator), Dr. Connor Brenna (anesthesia resident), Dian-Shi Wang (Senior Research Associate). Not pictured: Howell Fang (PhD student), Yalun Zhang (research assistant).



**An electrophysiology rig.** A finely-tuned device used to record electrical signals from cells, used by our team to study the effects of general anesthetic drugs on neural activity related to antidepressant effects.



# CAS MEMBERSHIP

CAS puts members first. We strive to provide the right support for members at all stages of their respective journeys in anesthesia. For over 80 years we've acted as a collective voice for the profession. Find out what CAS membership can do for you.

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# CASIEF SUMMER UPDATE

## VOLUNTEER TEACHERS NEEDED FOR OUR OVERSEAS PROGRAMS!



Many dozens of Canadian anesthesiologists have travelled to our programs in Rwanda, Ethiopia and Guyana, and found these trips exciting, rewarding, and fun! Our partners need the experience of our anesthesiology educators to move their medical systems forward. Travel costs and accommodations are reimbursed, so this is also a great opportunity to see the world! Please contact us at [info@casief.ca](mailto:info@casief.ca) if you'd like to get involved – you will never regret it!

Please visit our [website](#), and if you haven't yet seen the fantastic [videos](#) about CASIEF's partnerships, or visit our YouTube channel [HERE](#).

Through CASIEF and its partners, Canadian anesthesiologists are known around the world for their charity and dedication to promoting safe anesthesia for all. Please consider providing your expertise and [donations](#) to support our very worthy cause.



DONATE

## CASIEF AWARDED FUNDING TO SUPPORT RESEARCH EDUCATION AND MENTORSHIP

CASIEF is pleased to announce that we have been awarded a three-year International Development, Aid, and Collaboration (IDAC) program grant on behalf of Royal College Canada International (RCCI). We are grateful for the opportunity to represent RCCI worldwide through a research education and mentorship model that will bring together researchers across many of the countries CASIEF collaborates with—including Burkina Faso, Ethiopia, Guyana, Papua New Guinea, and Rwanda. The aim of the project is to support the delivery of research methodology education in anesthesia through the Acute Care Operational Research (ACOR) course. CASIEF wishes to acknowledge our international colleagues as well as Canadian researchers who will mentor early career investigators in both English and Francophone speaking partner countries over the coming three years. We look forward to writing about future updates of the program.



...continued on page 19

### CASIEF-LIFEBOX RESIDENT CHALLENGE

The CASIEF-Lifebox resident challenge is a national fundraising initiative that invites Canadian anesthesiology residency programs to compete to raise funds to support the purchase of capnographs for low-resource settings. The funds raised will help send capnographs to hospitals in need around the world and provide training for their usage. Though capnography is critical for keeping patients safe during anesthesia, and has been standard in high-income countries for decades, it remains almost entirely absent across low- and middle-income countries. Many anesthesia providers Lifebox works with had never even seen a capnograph before we supplied one!

Teams have collectively raised over \$5,000 and University of British Columbia (UBC) holds first place as of April. The Challenge will run up until the CAS Annual Meeting. During the **CAS Soirée** on June 6, this year's winners will be announced, along with next year's challenge. Please consider donating generously to residents raising funds in your community to support a great cause!



Lifebox capnograph and oximeter in use in an operating room in Harar, Ethiopia.

Make a donation by contacting a resident in your department—each one is tax-deductible through the CanadaHelps platform.

[www.lifebox.org/support-us/fundraise-for-us/casief-lifebox-resident-challenge/](http://www.lifebox.org/support-us/fundraise-for-us/casief-lifebox-resident-challenge/)



Dr. Terri Skelton  
Chair, CASIEF  
[terriskelton@casief.ca](mailto:terriskelton@casief.ca)

Ottawa 2026

CANADIAN ANESTHESIOLOGISTS' SOCIETY  
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**SUPPORT OUR GLOBAL INITIATIVES!**

**Winners announced at the CAS Soirée, June 6, Ottawa.**

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(January 1 - March 31, 2026)

(1er janvier - 31 mars 2026)



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Canadian Anesthesia Research Foundation  
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# SUMMER UPDATE

CLICK HERE TO  
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### Investing in Our Future: A Message from the CARF Board

As we enjoy the summer months, the **Canadian Anesthesia Research Foundation (CARF)** is already hard at work preparing for the 2027 grant season. We would like to extend our warmest congratulations to all our 2026 Award recipients—winners will be announced at the 2026 CAS Annual Meeting. The future of the CAS is being shaped by your dedication, and we are proud to support such transformative work.

### Evolving to Meet the Moment

Research is the lifeblood of our specialty, but the landscape is shifting. To ensure our support remains impactful in these inflationary times, the CARF Board is considering a strategic shift toward **fewer grants with greater individual value**. While our grants serve as vital "seed funding," we recognize that launching a modern research program requires more resources than ever before.

Our goal is simple: to provide the maximum possible support to our researchers today while rigorously safeguarding the foundation's ability to fund the pioneers of tomorrow.



### Your Impact, Your Choice

Your support is the engine of this progress. To make giving more meaningful, we have expanded our dedicated funding streams. You can now direct your contribution to the areas that resonate most with your professional values:

- **The CARF General Fund:** The bedrock of our annual operations and grant cycles.
- **The Career Scientist Award:** Currently, we can only afford to fund this prestigious award every two years. **With your help, we can make this an annual award** and provide consistent momentum for young clinician-scientists to change practice and improve patient outcomes.
- **The Environmental Sustainability Fund:** Empowers research to reduce our ecological footprint without compromising patient care.
- **The BCAS Dr. Pieter Swart Perioperative Research Award.**

### New Ways to Give

At CARF, every dollar matters. That's why we've made giving back just as simple—and affordable—as ordering a latte. Supporting the future of anesthesia has never been easier or more tax-efficient. In addition to donating via **CanadaHelps**, when you **renew your CAS Membership**, or during the **CAS Annual Meeting**, we are excited to highlight two high-impact options:

1. **Transfer of Publicly Traded Securities:** This is a sophisticated way to give that benefits you and the foundation. By transferring stocks directly, you **eliminate capital gains tax** while receiving a charitable tax receipt for the full market value. Our partners at Jarislowsky Fraser make this process seamless—**simply complete the form**, and they handle the rest.
2. **Legacy Funding:** We are in the early stages of building a Legacy Giving program that will offer you the opportunity to create a lasting testament to your career through a planned gift. We look forward to sharing more about how you can be part of this important initiative soon.

...continued on page 22

## Leading by Example

We are profoundly grateful for the generosity shown through your annual CAS dues. In 2026, these funds jumpstarted vital research in **Postoperative Wellness, Clinical Innovation, and Health Systems**.

To lead by example, several community members—including myself—have committed to a **legacy gift of \$1,000 annually for five years** to anchor the Environmental Sustainability Fund. I personally utilized the stock donation option this past year and plan to do so again. We invite you to join us in this commitment.

Your donation will have an impact on future research and there are many appreciative academics to hear from. **Take a look for yourself.** There are more testimonials coming in every day.

## Strengthening Our Leadership

CARF is growing and we want you to grow with us. We are currently updating our **bylaws** to ensure our governance reflects our nationwide footprint, from the Atlantic to the Pacific.

If you are passionate about the future of our specialty, **we are looking for new voices to join the CARF Board.** Please reach out to any **current Board member** to discuss how you can help us champion research and fundraising.

## Join Us in Ottawa!

We can't wait to see you at the **CAS Annual Meeting in Ottawa.** This year promises to be unforgettable and feature a **silent auction**, a **lively Soiree**, and a **50:50 draw**. You might just head home from the meeting in a better financial place, as well as being enriched intellectually and professionally!

The future of Canadian anesthesia research is bright because of you. Let's secure it together. If you're ready to make a difference, find a Board Member in Ottawa—we'd love to have a conversation about how to start your legacy today.



Sincerely,

**Dr. Stuart McCluskey, MD, PhD**  
Chair, Canadian Anesthesia  
Research Foundation

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Canadian Anesthesia Research Foundation  
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**(January 1 - March 31, 2026)**  
**(1<sup>er</sup> janvier - 31 mars, 2026)**

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Eric You-Ten



**Dr. Mrinalini Balki (left), 2025 Obstetric Anesthesia Section Research Grant Winner**



**Dr. Michael Verret (left), 2025 Dr. James Beckstead Award Winner**

# CJA ON THE CUTTING EDGE SUMMER UPDATE

**MISSION STATEMENT:** “Excellence in research and knowledge translation in anesthesia, pain, perioperative medicine, and critical care.”

The *Canadian Journal of Anesthesia (CJA)* looks forward to connecting with colleagues from across the country at the upcoming **Canadian Anesthesiologists’ Society Annual Meeting this June**. We are pleased to be hosting a featured panel exploring one of the most rapidly evolving areas in our field.

## **CJA Panel: Artificial Intelligence and Anesthesiology Research: Balancing Innovations, Risks, and Responsibilities**

**June 6, 2026 | 2:45 pm – 4:15 pm**

Artificial intelligence is transforming anesthesiology research and clinical care, bringing both exciting opportunities and important risks. This symposium, co-moderated by *CJA* Editor-in-Chief Dr. Stephan Schwarz and Deputy Editor-in-Chief Dr. Philip Jones, will examine how clinicians and researchers can thoughtfully engage with AI.

The session will cover:

- Practical insights into the use of AI in anesthesiology research, including common pitfalls and how to critically appraise findings
- A forward-looking discussion on the future of AI in medicine, including ethical considerations, bias, and equity
- Key distinctions between prediction and causation in AI studies, with guidance for interpreting and designing research

Featuring expert perspectives from Dr. Pascal Laferriere-Langlois, Dr. Leo Celi, and Dr. Janny Xue Chen Ke, the session will conclude with an interactive panel discussion on AI-related topics most relevant to anesthesiology today.

We look forward to seeing you there.

**Full AM program**



**Canadian Journal of Anesthesia**  
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*Excellence in research and knowledge translation in anesthesia, pain, perioperative medicine, and critical care / L'excellence en recherche et en transfert des connaissances en anesthésie, en douleur, en médecine périopératoire et en soins critiques*

## **Resources to Support Your Practice and Learning**

The **CAS Guidelines to the Practice of Anesthesia** are available online at: [www.cas.ca/guidelines](http://www.cas.ca/guidelines)

To support your continuing professional development, explore the latest **CPD modules** at: [www.cas.ca/cpd-modules](http://www.cas.ca/cpd-modules)

Stay current, earn CME credits, and continue advancing your practice with these valuable resources.

**View Guidelines**



# ANESTHESIA HISTORY CORNER – FRASER SWEATMAN (1913-1991)

By Dr. Michael Wong

As is sometimes said, the past is the foreign country. For this year's cohort of newly minted anesthesiologists, the specialty of anesthesia 50 years ago would seem to be far cry from our current practices, and the craft of anesthesia 100 years ago would be practically unrecognizable. Some of the most valuable advances in our specialty have been the revolutionary leaps in equipment design and reliability from the post-war period onward. **Mr. Fraser Sweatman** was one of the most influential Canadian figures in this space. Though not medically trained, as an entrepreneur in the dynamic world of medical device design and distribution, he helped to shepherd the modern era of anesthesia care.

Sweatman was born on October 14, 1913, in Winnipeg. During his youth, he had gained some renown as a figure skater, winning a silver medal at the 1935 Canadian Figure Skating Championships with partner Audrey Garland. In 1936, the pair competed in the fourth Winter Olympiad in Garmische-Partenkirchen, Germany, placing 12th. Incidentally, Sweatman had previously also been invited to compete on the Canadian fencing team for the 1928 Olympic Games in Amsterdam, but had been unable to join the team for personal reasons.

After the 1936 Olympics, Sweatman withdrew from high-level athletics but then started a long and fruitful career in medical equipment. He was first hired by the J.F. Hartz Company, then one of the largest device distributors in Canada. There, he first developed an interest in the tools of anesthesia. During the formative years of his early career, he also gained experience with other industry leaders such as the Ohio Chemical & Surgical Equipment Company, as well as Fisher & Burpe Limited. In the ensuing decades, he would found several companies of his own, including Canam Surgical Services Ltd. and Fraser Sweatman Inc. Some of his companies would later be acquired by the British Oxygen Corporation.

In the 1950s, early reports described a promising new medication named Fluothane (halothane), with many favourable characteristics as a volatile anesthetic. Unlike many agents such as cyclopropane and diethyl ether, halothane was non-flammable and non-explosive. Additionally, halothane was non-irritating and rapidly reversible, rendering it ideal as an induction medication.

It was described favourably as being very similar to chloroform. However, halothane was also seen as a perilous medication due to its high potency. Its initial introduction into clinical practice was deliberately very slow, with distributors purposefully restricting its sale to carefully selected anesthesiologists who were regarded as adequately skilled to safely administer the new drug. It was thought that successful widespread adoption of halothane would only be possible with a new, sophisticated method of delivery beyond the vaporizer technology that was available at the time.

As it turns out, Sweatman had previously introduced the Cyprane trichloroethylene (Trilene) inhaler to the Canadian market, and he was aware that the company had been actively designing a robust anesthetic vaporizer to precisely control output concentration over a wide range of temperatures and flow rates. Through his contacts in the company, Sweatman procured one of the first Fluotec vaporizers, which were specially calibrated for halothane. He brought this cutting-edge device to anesthesiologist Dr. Iain MacKay at Toronto General Hospital for testing. This work, involving about 200 patients, was later published in the Canadian Anaesthetists' Society Journal. This study attested to the desirable qualities of halothane and also demonstrated the safety of the Fluotec vaporizer. In time, halothane grew to be a dominant volatile anesthetic agent, ending the era of older, hazardous, combustible, and explosive anesthetics.

Additionally, Sweatman had a role in personally introducing many other safety innovations in anesthesia delivery. He worked on the development of the Quantiflex Gas Machine, which improved patient safety with an innovative flowmeter system protecting against oxygen supply failure, and also placed oxygen downstream of other gases—an arrangement that had not yet become industry standard. Moreover, he devised a pin-index system for vaporizers as well as Selectatec, a pioneering "key-fill" system to prevent filling a vaporizer with the wrong volatile drug. He was responsible for improvements in the Stephen-Slater non-breathing valve used in pediatric anesthesia. Sweatman also distributed anesthesia delivery systems for veterinary and dental settings, and for military use in the field.

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During his career he was active in the creation of anesthesia equipment standards within the Canadian Standards Association and International Standards Organization. He was a founding member of the Canadian Standards Association Committee on Anaesthetic Equipment and Respiratory Technology in 1975, chaired by former CAS President Dr. Gordon Wyant (1971-1972).

In 1988, CAS President Dr. Peter Duncan (1988-1989) honoured Sweatman for his contributions to advancing anesthesia safety. At a ceremony also presided by representatives of the Canadian Standards Association and industry leaders, Fraser was presented with a gold-plated Fluotec vaporizer and Cyprane Mark III vaporizer lamp.

Fraser Sweatman died in May 1991, remembered not only for his influential professional deeds but also for his charisma, integrity, perseverance, and vision.



Fraser Sweatman with skating partner Audrey Garland, 1936. Courtesy of the Polish State Archives.

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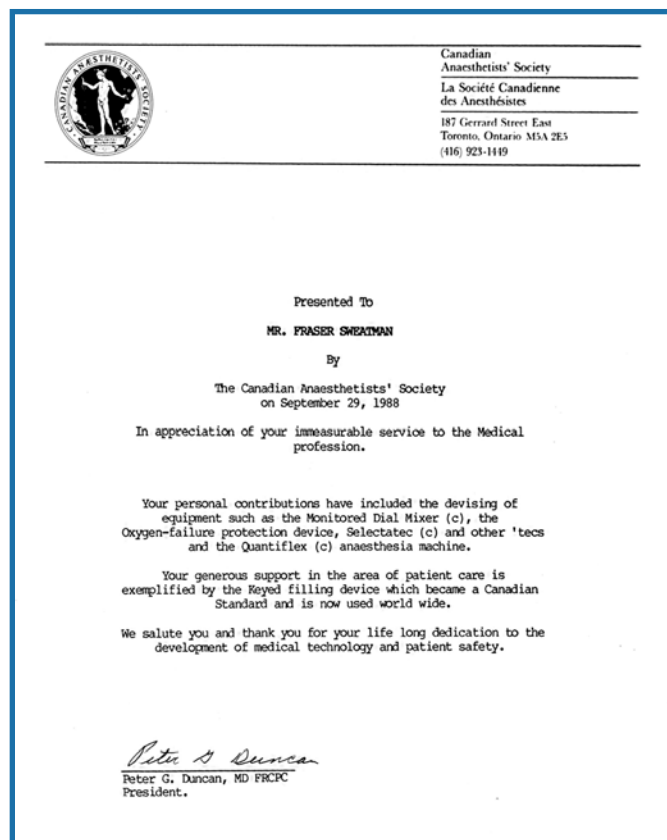
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CAS commendation, signed by President Dr Peter Duncan.

# CAS ENVIRONMENTAL SUSTAINABILITY SECTION: ADVANCING CLIMATE-READY ANESTHESIA

The CAS Environmental Sustainability Section continues to build momentum toward reducing the environmental footprint of perioperative care while maintaining the highest standards of patient safety. Over the past year, the Section has focused on clinician-relevant education, national collaboration, and representing anesthesiology in broader healthcare decarbonization efforts.

## Earth Day Education: From Evidence to Action

A key educational initiative this year was the Earth Day webinar on April 22, 2026, entitled “Small Changes, Big Impact: The Science of Sustainable Anesthesia.” Developed in response to CAS needs assessment data highlighting strong member interest in practical sustainability strategies, this interactive national webinar explored how anesthesia practice contributes to environmental and pharmaceutical waste across the perioperative setting.

The session brought together expert perspectives on evidence-based approaches to reducing resource use, minimizing medication waste, and understanding the environmental and financial impacts of perioperative pharmaceuticals.

### Infographic

## CAS Annual Meeting Programming

The Environmental Sustainability Section will also be well represented at the upcoming CAS Annual Meeting, with programming integrated across subspecialty interests:

- “Sustainable Shift: Climate-Ready Anesthesia in a Warming World” will explore innovative strategies to advance environmental sustainability in perioperative care as climate-related health risks continue to grow.
- “Infection Prevention in Regional Anesthesia and Our Planet,” will examine the dual imperative of maintaining rigorous infection prevention standards while minimizing environmental impact. This collaborative session highlights how patient safety and ecological responsibility can be aligned in regional anesthesia practice.

## National Collaboration and Representation

Beyond education, the Section is actively engaging at a systems level through collaboration with The Transition Accelerator’s Healthcare Problem-Solving Working Group, in partnership with Environment and Climate Change Canada’s Net-Zero Challenge. This initiative brings together healthcare leaders to address shared barriers to

decarbonization and develop practical, scalable solutions. Through this work, the Section helps ensure anesthesiology perspectives are represented in national discussions on healthcare sustainability.

## Looking Ahead

The CAS Environmental Sustainability Section remains committed to supporting anesthesiologists with practical, evidence-informed tools and national advocacy. We look forward to continued collaboration with CAS members as we work toward environmentally responsible, climate-ready anesthesia care across Canada. We also look forward to meeting you at the CAS Annual Meeting in Ottawa from June 5-7, 2026!

## Section Member Get-Together at the CAS Annual Meeting

The CAS Environmental Sustainability Section invites members, and anyone interested in sustainable anesthesia, to join us for an informal coffee break and get together at the CAS Annual Meeting this June. Stop by, say hello, and meet fellow members and Section leadership just outside the exhibit hall during a scheduled coffee break. No agenda—just a chance to connect, share ideas, and build community. Details were mailed to members in late May.

Sincerely,

CAS Environmental Sustainability Section Executive



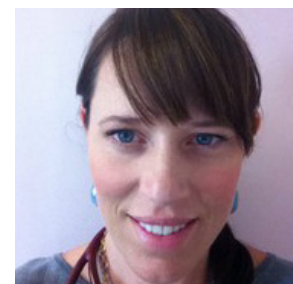
**Dr. Joanna Fifen**  
Chair



**Dr. Asim Iqbal**  
Vice Chair



**Dr. Vivian Ip**  
Past Chair



**Dr. Genevieve McKinnon**  
Member at Large

# CRITICAL CARE SECTION SURVEY – VOICES OF OUR MEMBERS

The CAS Critical Care Section conducted a membership survey in the Fall of 2025 to better understand who we are, how we practice, and what challenges we face. The responses offer a useful snapshot of the current state of anesthesiology-led critical care in Canada.

## A Mixed Training Background

Just over 60% of respondents reported formal critical care training, while nearly 40% did not. This highlights that a significant proportion of Section members contribute to critical care practice without formal certification, despite often substantial clinical experience. This may also reflect less consistent recognition of that experience, as well as reduced access to structured continuing professional development (CPD) and career development opportunities.

The implication is clear: the Section is not defined solely by certification, but by participation in critical care practice. It is therefore uniquely positioned—and must continue to evolve—to provide training and educational resources for anesthesiologists with both formal and informal critical care training.

## Engagement in Critical Care Practice

Results indicated that 46% of respondents are engaged in full-time critical care practice, while 23% provide part-time or occasional ICU coverage. The remaining respondents are not currently engaged in ICU practice but have either done so in the past or expressed interest in doing so in the future.

Notably, none reported being both disengaged from and uninterested in critical care practice. This likely reflects the nature of Section membership but also highlights sustained interest even among those not currently practicing.

## Proportion of Time Spent in Critical Care Practice

Nearly 60% of respondents spend 26% to 50% of their clinical time in critical care, with 17% spending more than half their time in ICU practice. This underscores how actively engaged the section membership is in delivering care to critically ill patients.

## Nature of Critical Care Practice

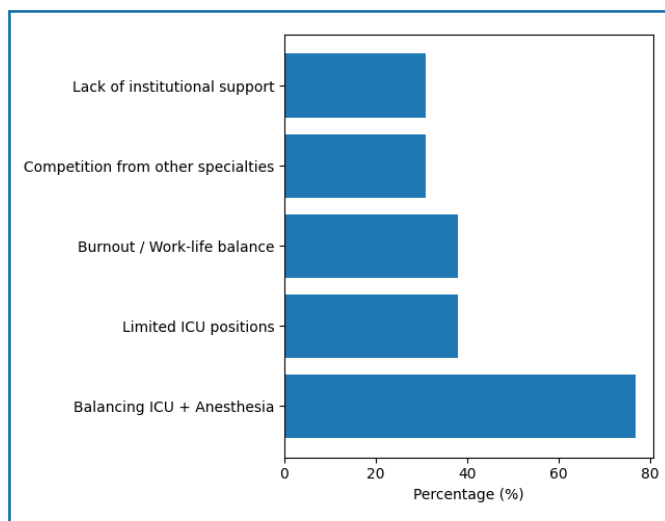
Out of the respondents, 70% practice in a mixed/general ICU, with 30% and 20% working in cardiac and surgical ICUs respectively, and only 10% in dedicated neuro ICUs. These responses reflect both the generalist nature of anesthesiology-led critical care and the breadth of expertise required. They also emphasize the need for broad educational programming across multiple ICU domains.

## Engagement in Non-Clinical Roles

Postgraduate/resident teaching and undergraduate teaching are undertaken by 77% and 46% of respondents respectively. In addition, 62% are engaged in quality improvement and patient safety, 46% in administrative or leadership roles, and 31% in research. Most respondents fulfil multiple roles concurrently, reflecting consistently high engagement in academic and professional activities.

## Challenges in Establishing, Maintaining, and Expanding Critical Care Practice

Balancing the demands of critical care and anesthesiology practice was the most significant challenge, identified by 77% of respondents. Other major challenges included limited ICU positions (38%), burnout and work-life balance concerns (38%), competition from other specialties, and lack of institutional support (31%). These challenges are often experienced simultaneously rather than in isolation.



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### Meeting Topics and Section Direction

Suggested Critical Care topics for the CAS Annual Meeting included quality and safety, airway management, sepsis, ARDS, and training pathways with an interest in engaging international speakers. These priorities reflect a desire for both academic relevance and practical support.

Respondents highlighted several priorities for the section, including increased critical care representation at CAS meetings, greater access to research funding, advocacy with the Royal College and provincial bodies, support for rural physicians and non-intensivists, and the development of guidance on ICU staffing models.

### Challenges in Academic Advancement

Lack of protected academic time was the most significant barrier, cited by 62% of respondents. Limited resources and access to funding were also important constraints (38% each). Given the high level of engagement in non-clinical roles, this reflects both the commitment of members and the risk of overextension and burnout.

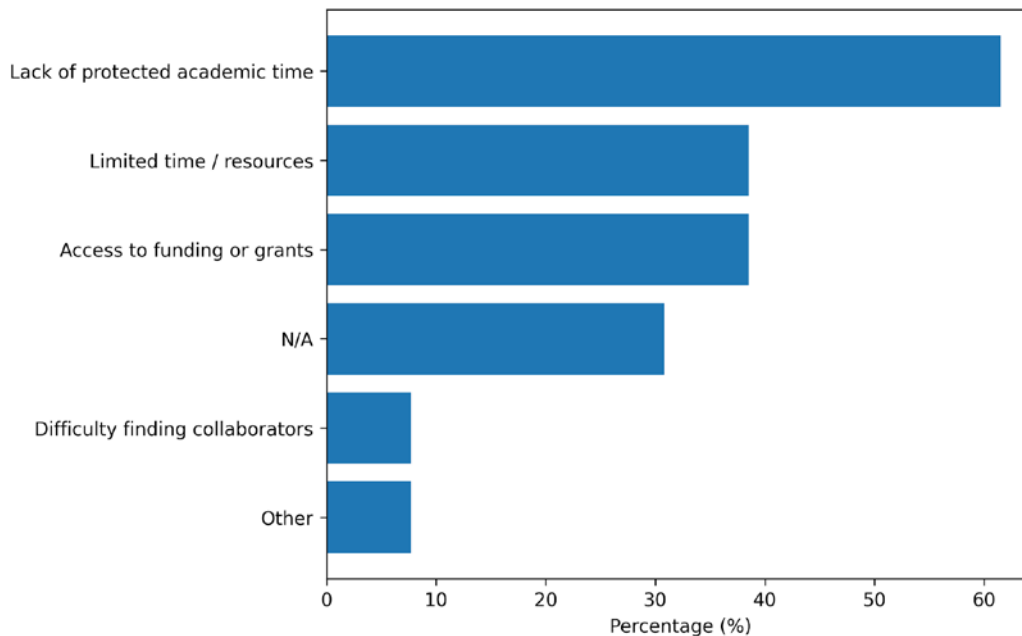
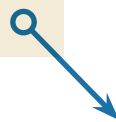
### Conclusion

This survey highlights a section in transition. The CAS Critical Care Section represents a diverse group of clinicians united by engagement in critical care, often within hybrid roles spanning anesthesiology and ICU practice.

However, this flexibility comes at a cost. Competing clinical demands represent the central structural challenge, with downstream effects on burnout, academic productivity, and sustainability of practice.

At the same time, the membership remains highly engaged across clinical, academic, and leadership domains. The message is clear: Members are not asking for reinvention, but for recognition, support, and representation.

Addressing these structural tensions will be critical if anesthesiology-led critical care is to remain sustainable and continue to contribute meaningfully to the evolving landscape of critical care in Canada.



# HELP SHAPE RECOGNITION IN ANESTHESIOLOGY: JOIN THE CAS AWARDS COMMITTEE

The Canadian Anesthesiologists' Society (CAS) is currently seeking **new members to join its Awards Committee**, a key group that helps recognize and celebrate excellence within our profession.

The CAS Awards Committee is responsible for adjudicating the CAS Honour Awards Program, ensuring that recipients are individuals who have truly distinguished themselves through their contributions to CAS, the specialty of anesthesiology, and the broader community. Committee members play an important role in shaping how excellence is defined and recognized across the Society.

Beyond selecting award recipients, the Awards Committee helps establish and refine the foundation of the program itself. This includes reviewing award categories, setting eligibility

criteria, defining nomination requirements, and developing scoring guidelines. Through this work, the Committee ensures a fair, transparent, and meaningful selection process that reflects the values and priorities of CAS.

Serving on the Awards Committee is a unique opportunity to help highlight the achievements of colleagues whose work advances clinical care, education, research, and service. Committee members contribute to decisions that honour those who have made a lasting impact on the profession—helping to shape the legacy of CAS recognition programs for years to come.

If you are interested in contributing to this important work and supporting the recognition of excellence within anesthesiology, we encourage you to consider joining the CAS Awards Committee.

Contact the CAS National Office to apply

Check out a full list of Volunteer Opportunities



2025 CAS Honour Award Winners in St. John's Newfoundland, at the 2025 CAS Annual Meeting - (left to right) - Dr. Jason McVicar, Dr. Jacobo Moreno, Dr. Anita Rao, Dr. Farrukh Munshey, Dr. Alexis Turgeon with CAS President Dr. Giuseppe Fuda

# CARDIOVASCULAR AND THORACIC SECTION (CVT) SUMMER UPDATE

The CAS CVT Section continues to advance its mission of education, collaboration, and innovation in perioperative cardiovascular care. Over the past year, the section has focused on delivering high-impact educational programming, strengthening national and international partnerships, and supporting sustainable growth for future initiatives.

## Educational Leadership and Impact

The CVT Section delivered a comprehensive and highly engaging program at the 2025 CAS Annual Meeting in St. John's, Newfoundland and Labrador. The program reflected the increasing complexity of cardiovascular and thoracic anesthesia and emphasized practical, case-based learning.

Highlights included POCUS workshops, plenary sessions such as "Sounds that Save Lives: POCUS in Anesthesiology" and "Perioperative and Critical Care Resuscitative TEE," as well as interactive sessions like Echo Jeopardy. Additional panels addressed challenging clinical scenarios in the thoracic operating room and perioperative echocardiography interpretation for non-cardiac anesthesiologists.



CVT Section members and POCUS workshop faculty at the Canadian Anesthesiologists' Society Annual Meeting, St. John's, NL (2025).

These sessions reinforced the growing role of point-of-care ultrasound and perioperative echocardiography in contemporary anesthetic practice and demonstrated the section's leadership in advancing ultrasound education across Canada.



CVT Section executive members, speakers, and collaborators during the CAS Annual Meeting, St. John's, NL (2025), highlighting the strong sense of community and collaboration within the section.

## Recognition and International Presence

The CVT Section is proud to highlight the international achievements of Canadian cardiovascular anesthesiologists.

Dr. David Mazer (St. Michael's Hospital, University of Toronto) was awarded the Distinguished Service Award by the Society of Cardiovascular Anesthesiologists (SCA) at its 2026 Annual Meeting. This prestigious award recognizes exceptional contributions to research, education, and service in cardiovascular anesthesiology. Notably, Dr. Mazer is the only Canadian recipient since Dr. Earl Wynands, the inaugural awardee in 2002.

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*Dr. David Mazer (St. Michael's Hospital, University of Toronto) receiving the Distinguished Service Award at the Society of Cardiovascular Anesthesiologists Annual Meeting 2026. He is only the second Canadian to receive this distinction since its inception in 2002.*

Canada was also strongly represented at the SCA 2026 Annual Meeting in Nashville, with participation from Drs. David Mazer, Jessica Spence, Hilary Grocott, Jonathan Ho, Tarit Saha, Alain Deschamps, and Patrick Hecht. This presence highlights the strength, collaboration, and international leadership of Canadian anesthesiologists in the cardiovascular field.



*Canadian representatives at the Society of Cardiovascular Anesthesiologists Annual Meeting 2026, Nashville—showcasing national collaboration and international engagement.*

### **Strengthening Collaboration and Engagement**

Over the past year, the CVT Section has expanded its collaborations with key national and international

organizations, including EACTAIC and the International Academy of Cardiac Anesthesia (IACA). These partnerships facilitate knowledge exchange, promote educational innovation, and position Canadian anesthesiologists within a broader global network.

The section also continues to foster engagement among members across Canada, supporting both established leaders and early-career clinicians. Initiatives include enhanced communication, educational outreach, and opportunities for involvement in national and international projects.

### **CVT Section at the 2026 CAS Annual Meeting**

The Section brings a dynamic, hands-on program to the 2026 CAS Annual Meeting, happening June 5-7 in Ottawa, blending practical skill-building with thought-provoking discussions. Kicking off with two in-demand workshops, delegates can sharpen their perioperative ultrasound expertise through the Perioperative POCUS Workshop and a focused session on gastric ultrasound for aspiration risk assessment.

The program continues with engaging plenaries, including a multidisciplinary CAS Discovery Talk and the ever-popular Echo Jeopardy, offering an interactive way to test and expand your echocardiography knowledge. Clinically focused sessions on mechanical cardiac assist devices will provide essential insights for non-cardiac anesthesiologists, while a forward-looking discussion on goals of care in major surgery invites reflection on decision-making in the OR.

Whether you are looking to refine technical skills or explore evolving clinical challenges, the CVT program delivers practical value across all career stages. Check out the [AM preview here](#).

### **Research and Sustainability**

The CVT Section remains committed to supporting research and innovation. Ongoing efforts include strengthening the Earl Wynands Research Fund and collaboration with the Canadian Anesthesia Research Foundation (CARF) to establish a sustainable model for recurring research funding.

Strong financial stewardship and active member engagement continue to support the section's long-term sustainability and ability to invest in high-value initiatives.

### **Conclusion**

The CVT Section continues to play a central role in advancing cardiovascular and thoracic anesthesiology in Canada through education, collaboration, and research. As perioperative care evolves, the section remains committed to delivering high-quality, evidence-informed, and clinically relevant programming that supports anesthesiologists across the country.

# RESIDENTS' CORNER

## Residents' Corner – What's New at the Annual Meeting

We are thrilled by the response to the **Residents' Program** planned for the 2026 CAS Annual Meeting. Catch up on exciting updates to this year's events program and what you can expect from June 5–7 in Ottawa:

### Ace It! A Prep Course for the Royal College Exam – Sophomore Year Subcommittee

Following the incredible success of last year's event, an Ace It! subcommittee made up of current and recently graduated residents was formed. This team organized expert presenters for the 15 Ace It! Written Exam Course lectures on June 5, as well as facilitators for the Oral Exam PBLDs on June 6— while ensuring all course content is optimized for residents and International Medical Graduates (IMGs). We are confident that this fantastic group will enable *Ace It!* to become the leading Royal College exam preparation course for anesthesia residents in Canada.

### Resident SIM Olympics – New Hybrid Format

Last year's event introduced a fun-focused escape-room-style competition that challenged teams to score points by rotating through a series of stations inspired by various clinical scenarios. Due to the strong reception from participants, the 2026 event will repurpose this set-up, while incorporating a traditional simulation to determine the winners of the \$1,000 shared grand prize. We can't wait to see you and your team on June 6 at the Ottawa Hospital Civic Campus!

## Residents' Oral Competition – Announcing This Year's Finalists

A big congratulations to this year's finalists: Dr. Huzaifa Saeed (University of Saskatchewan), Dr. Tracey Rice (University of Manitoba), Dr. Victoria Chan (University of Toronto), Dr. Yasmin Valji (University of Alberta), Dr. Ines Zuna (University of British Columbia), and Dr. Dar'ya Semenova (University of Ottawa). The competition will take place on June 7—be sure to come cheer your peers on!

## Not Another Wellness Talk: What Can Residents Actually Do to Maintain Their Wellness?

Even though conversations around physicians' mental and physical health have expanded considerably, developing realistic long-term personal wellness strategies is still no easy task. That's why this year's Residents' Panel will focus on actionable, evidence-based wellness recommendations from practicing physicians who specialize in areas such as sleep medicine, fitness and sports, academic mentorship, and more. Don't miss this important discussion about solidifying sustainable wellness habits you can carry forward into full-time practice on June 7.

## Thank You to Our CAS Resident Ambassadors

Our newly formed Resident Ambassador team, based at 16 different Canadian anesthesia programs, were tasked with regularly updating classmates on resident programming at the 2026 Annual Meeting. We are very grateful to these volunteers for facilitating more opportunities for us to connect with you—Canada's future anesthesiologists.

We look forward to sharing an unforgettable weekend in Ottawa at #CASAM2026!

the  
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 annual meeting  
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- Ambulatory total hip and knee arthroplasty: a literature review and perioperative considerations - **February 2024**
- Equity, Diversity and Inclusion in Anesthesiology: a Primer - **May 2023**

## How to Access the Modules:

Instructions can be found on the Canadian Anesthesiologists' Society website at: [www.cas.ca/cpd-online](http://www.cas.ca/cpd-online)

All modules are an Accredited Self-Assessment Program (Section 3) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada, and approved by the Canadian Anesthesiologists' Society.

Successful completion of a module entitles readers to claim up to four hours (credits are automatically calculated), for a total of 12 maintenance of certification credits.



**CANADIAN  
ANESTHESIOLOGISTS'  
SOCIETY**

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