

CANADIAN ANESTHESIOLOGISTS' SOCIETY



COMMITTEE & SECTION REPORTS 2024

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COMMITTEE REPORTS

ANNUAL MEETING SCIENTIFIC PROGRAM

Chair: Dr Jason Chui

Initiatives/Projects:

The CAS Annual Meeting Scientific Program Committee (AMSPC) was established in 2023 with the responsibility of planning and executing the scientific program for the Annual Meeting. As a newly formed committee, we built all processes from the ground up.

From September 2023 to June 2024 (1st year), we established the committee, developed a standardized review matrix and process, graded and ranked submitted proposals using a committee-based approach, introduced a new presentation format—the *CAS Discovery Talk*—and finalized the scientific program. The Annual Meeting was successfully held in June 2024 in Victoria, BC.

From July 2024 to present (2nd year), we have undertaken significant reforms to enhance the structure and organization of the CAS Annual Meeting:

1. **Conference Format Revamp:** We transitioned from a four-day format (Friday to Monday) with half-day sessions on Friday and Monday to a more efficient three full-day conference. Historically, Friday and Monday had low attendance despite incurring high venue costs. The revised format dedicates Friday exclusively to RCPSC CME Section 3 activities to meet the high demand for these sessions among community anesthesiologists.
2. **Open Call for Content:** Historically, the CAS Annual Meeting faced criticism for featuring repetitive content with the same group of speakers. Previously, only internal volunteer groups (committees, sections) and CAS affiliates could submit proposals, limiting broader participation of CAS members. To address this, we have extended the call for content to all CAS members, allowing fresh expertise and new perspectives to enrich the meeting.
3. **Enhanced Engagement of Community Anesthesiologists:** We expanded RCPSC CME Section 3 activities by introducing *CAS Expert Insights* (formerly *Test-Enhanced Learning (TEL)*). This 45-minute format retains the successful TEL structure, incorporating pre-tests and post-tests to reinforce long-term knowledge retention through retrieval practice. Proposals must focus on practical, clinically relevant topics for community anesthesiologists. Sessions featuring challenging cases, commonly encountered conflicts, and "How I Do It" or "How I Manage It" approaches led by experienced clinicians are especially encouraged.

4. **Resident Engagement and Exam Preparation:** We launched a new educational initiative, *Ace It! Royal College Examination Preparatory Course*, to address a gap left by the discontinued *Making a Mark* program, which was suspended due to the COVID-19 pandemic. In July 2024, we conducted a national survey among senior residents (256 resident) across Canada, receiving a 17% response rate, indicating strong interest. We have appointed two co-chairs, secured support from ACUDA and the past chair of the RCPSC Anesthesia Section, and formed a CAS Resident Section subcommittee to provide resident perspectives. This workshop is set to launch in June 2025.
5. **Internal Organizational Improvements:** We have implemented multiple measures to strengthen the CAS Annual Meeting, including:
 - Updating the *Conflict of Interest (COI)* policy.
 - Reviewing the *Equity, Diversity, and Inclusion (EDI)* policy in consultation with the EDI Committee.
 - Revising the *reimbursement policy* and *Swag policy*.

These initiatives reflect our ongoing commitment to enhancing the CAS Annual Meeting by optimizing content, broadening participation, and addressing the evolving educational needs of anesthesiologists across Canada.

Key milestones from July 2024 to present:

- July 2024: Evaluate the Needs assessment of the CAS 2025 Annual Meeting and establish key learning objectives for the meeting
- July 2024: Needs assessment for *Ace It: Royal College Examination Preparatory Course*.
- August 2024: Collaboration with the CAS Residents Section and ACUDA to evaluate the appeal of the preparatory course and identify two co-chairs.
- August 2024: Launched the *Call for Content* with new initiatives, enabling all CAS members to submit proposals. Updated the submission system and reviewed the reimbursement policy to accommodate these changes.
- September 2024: Ongoing communication with content submitters following the *Call for Content*.
- November 2024: Assignment of reviewers and review of the *Conflict of Interest (COI)* policy.
- December 2024: AMSPC review period.
- January 2025: AMSPC meeting to adjudicate submissions.
- January 2025: Finalization of the scientific program and notification of acceptance/rejection decisions.
- January to February 2025: Further program refinement and speaker confirmations.
- April 2025: Initial planning for *CAS Annual Meeting 2026*.

Additionally, we have held regular committee and abstract subcommittee meetings to monitor progress and address various issues. Throughout the planning process, we have resolved numerous challenges, including EDI considerations, workshop and speaker logistics, and conflict-of-interest management. The committee has worked closely with the CAS National Office and Bayley Group to successfully execute these initiatives.

Top 3 Achievements:

The CAS Annual Meeting has been criticized for: 1) A single-chair-driven decision-making process lacking transparency, 2) A lack of new scientific content, with repeated speakers and talks for years, often heavily focused on academic topics rather than clinical practice, resulting in disengagement of community anesthesiologists and trainees. 3) High registration costs, primarily due to low participation leading to a high shared cost per attendee.

The top three achievements directly address these long-standing issues:

- 1) Established a new committee with a structured, team-based decision-making approach and an organizational framework that ensures a long-term sustainable annual meeting.
- 2) Enriched the scientific content of the meeting by 1) enabling independent CAS member participation in proposal submissions, and 2) introducing new formats such as CAS Expert Insights (focusing on practical, clinically relevant topics for community anesthesiologists) and CAS Discovery Talks.
- 3) Increased attendance at the annual meeting and enhanced membership engagement through initiatives such as expanded RCPSC Section 3 activities, the "Ace It: Royal College Exam Prep workshop", and greater involvement of independent CAS members. This will also bring down the costs in long-run.

Goals for 2025:

- Continue refining the organizational structure of AMSPC to establish a long-term systematic approach for future meetings. This includes improving the current submission process (which has been used for many years), refining the speaker selection and reimbursement policies, and broadening committee membership to include more expertise.
- Facilitate a smooth transition to a new Chair, ensuring leadership continuity within the committee.
- Increase participant engagement in the annual meeting, with a long-term goal of exceeding 1,000 attendees per year (currently ~700 participants, including exhibitors and staff).

ARCHIVES & ARTIFACTS

Chair: Dr Michael Wong

Initiatives/Projects:

- Canadian Medical Hall of Fame (CMHF)
 - A nomination package was submitted for CAS Past President Dr Angela Enright, but she was not selected in 2024. The nomination package will remain in consideration for another two years, after which a new nomination would need to be prepared.
 - If successful, the esteemed Dr Enright will be the first anesthesiologist to become a CMHF Laureate. Drs Harold Griffith and John Wade, among others, have been previously nominated over the years but have been passed over by the CMHF Selection Committee.
- Interviews/Oral Histories
 - Remaining transcripts will be uploaded to the CAS website when finalized.
 - Dr Lucie Filteau will be the next Past President to be interviewed, likely in 3 to 4 years, to provide adequate time to elapse after completion of official duties at CAS.
 - Former CJA Editors-in-Chief Drs Don Miller, Hilary Grocott, Jean Francois Hardy were interviewed. Once finalized, their transcripts will be uploaded to the CAS website.
 - Plans are underway for living CAS Gold Medal recipients to be interviewed in the coming year.
- *Anesthesia News* History Corner
 - We have been maintaining a column in the quarterly *Anesthesia News*, highlighting aspects of Canadian anesthesia history, written both by committee members and trainees.
 - We welcome contributions from CAS members, including trainees!
- CAS Archives & Artifacts social media presence
 - Twitter, Instagram, and Mastodon accounts are no longer maintained, for various reasons.

Events:

- 12th CAS Annual Scientific Meeting History Symposium
- 2nd World Anesthesia Day Webinar

Top 3 Achievements:

1. 2nd World Anesthesia Day Webinar

2. Expansion of Interviews / Oral History project
3. 12th Annual History Symposium

Goals for 2025:

- Continue collecting oral histories from CAS Gold Medal recipients, key members of the CAS, as well as Canadian anesthesiologists at large;
- Organize the 13th History Symposium at the Annual Scientific Meeting, in St. John's;
- Organize the 3rd Annual World Anesthesia Day Webinar;
- With input from leaders of the CAS Sections, produce an academic manuscript, tentatively titled "A Bibliography of Canadian Anesthesia," highlighting key anesthesia publications from the past 40 years either authored by Canadians or based on work performed in Canada;
- Promote the preservation (including digitization) of important and foundational documents relating to the history of the CAS and anesthesiology in Canada;
- Evaluate novel means of documenting the living history of CAS and anesthesiology in Canada;
- Increase awareness of individuals and groups who have made significant contributions to Canadian anesthesiology, particularly those who have been previously overlooked or under-studied;
- Explore options for long-term management and stewardship of the CAS' artifacts, currently in storage at Iron Mountain and inaccessible to the membership and researchers.

Links:

1. History Corner articles: <https://www.cas.ca/en/practice-resources/anesthesia-news>
2. Presidential Interviews Project: <https://www.cas.ca/en/about-cas/history/archival-resources/cas-presidential-interviews-project>

CLINICAL PRACTICE GUIDELINES

Chair: Dr Gregory Dobson

Initiatives/Projects:

The primary responsibility of the CAS Clinical Practice Guidelines Committee is to provide substantive annual updates to the CAS *Guidelines to the Practice of Anesthesia* including the accompanying Appendices as electronic supplementary material. These updates may reflect additional material to the content of existing sections of the Guidelines as new, evidenced-based or expert consensus medical evidence emerges or they may be entirely new sections created due to the ever-expanding scope and complexity of anesthesia practice.

The work done by the committee during the calendar year of 2024 is primarily showcased in the Guidelines to the Practice of Anesthesia – Revised Edition 2025. Key areas that have been addressed in the revised edition include:

- Acknowledgement of the need for a safe, private space in hospitals for the needs of lactating anesthesiologists who require expression.
- Further strengthening of existing guidelines related to all aspects of medication safety but specifically addressing standardization of medication labelling and best practice across all perioperative areas.
- More specific recommendations pertaining to the use of real-time ultrasound guidance when placing vascular catheters particularly jugular venous central venous catheters.
- Clarification that a physician directly supervising an Anesthesia Assistant (AA) can be a family practice physician anesthesia provider (FPA) if the scope of practice is within that of both the FPA and the AA.
- Videolaryngoscopy equipment, including a hyperangulated blade option, must be available in all areas where general anesthesia is performed or may be required.
- Additional content to the sections pertaining to non-operating room anesthesia (NORA) and anesthesia in non-hospital operating rooms such as private clinics and single OR facilities. Specific examples of content include patient selection/booking criteria, support for attending physicians who decide that a patient does not meet criteria on the day of surgery and the development of policies to ensure reliable communication with and the timely availability of a physician for patients remaining in the recovery phase in these locations.
- Appendix 2: American Society of Physical Status Classification table has been updated to reflect the most recent iteration, including specific clinical examples for each level.

An accompanying editorial, written by the Committee Chair, is published annually with the release of the Guidelines. The 2025 editorial pointed out that the CPG committee has responded to feedback from our readers of the French translation version of the Guidelines. As a gendered language the French translation had presented difficulties created by interpunct (e.g., un.e, patient.e). Corrections have been made as a result of the much-valued feedback.

It also pointed out that it was an active decision by CPG to not add any new content to the Guidelines for 2025 related to managing patients taking GLP-1 agonist medications. The CAS and the CPG committee acknowledge the significant patient safety concerns that these medications can have. Several anesthesia societies both alone, and in collaboration with other medical societies, have published practice guidelines but they vary considerably and are not strongly evidence-based. There is insufficient evidence, as of yet, to produce high quality, evidence-based or even expert panel consensus guidelines that would apply to all possible clinical scenarios. The CPG committee will continue to follow the issue closely and be prepared to offer more specific guidance to augment the existing CAS Practice Alert in the near future.

Top 3 Achievements:

1. Adding new members to the committee to support our goal for wide national representation.
2. Collaboration with the Quality and Patient Safety Committee, Executive and the *CJA* editorial staff during preparation of the Guidelines to the Practice of Anesthesia – Revised edition 2025.
3. Moving our guideline development process further forward in the direction of evidence-based and improved expert panel consensus methodology.

Goals for 2025:

- Add additional committee members to strengthen our subspecialty representation.
- Continue to work hard on improving our development methodology.
- Produce a quality document related to GLP-1 agonists.
- Take the work and recommendations that will be done by the CAS Anesthesia Task Force working group to create Guidelines content or a Position Paper Appendix.
- Continue the process to identify a potential future committee Chair and to steer supportive succession planning efforts.

RESEARCH ADVISORY

Chair: Dr Diem Tran

2024 was a transition year for our committee – after one term as Chair of the RAC and one as Vice-Chair, Dr Philip Jones stepped down from the position and was succeeded by Dr Diem Tran on Sept 1st. We thank him for his six years of service and the many years before that serving as a committee member. During his time as Chair, Dr Jones ensured equitable representation on the committee in terms of language, geography, sex and areas of expertise. He removed the limit of time served on the committee, recognizing that the Canadian research community is small and welcomed anyone who wished to remain involved beyond their initial 3-year term. Most importantly, he navigated the committee's transition to using project success scores instead of applicant scores to improve access to grants for mid-career researchers and remove the applicant scores in resident competitions.

In the fall of 2024, we called for nominations for the position of Vice-Chair of the RAC. Two members were nominated and the full RAC committee voted by virtual ballot in October 2024. Dr Imelda Galvin received the majority vote and assumed the position of incoming Vice-Chair. Despite the changing of the guard in the leadership, one important team member remains constant; Ms Cristina Mita from the Society remains the tireless expert administrative supporter of the Committee. Without her vital contributions, we would not be able to report on the following for 2024.

1) Grant Awards - 2024

The RAC's Grant Standing Subcommittee met on April 20, 2024, to adjudicate the annual research awards. After approval from the Board, the CAS-CARF annual research awards were awarded in June 2024 to the following investigators.

New Investigator Operating Grants

- **Canadian Anesthesiologists' Society Research Award - \$30,000**
Dr Akash Goel, University of Toronto, Toronto, Ontario
Methohexital for Intractable Depression – An Active-Placebo Controlled, Blinded, Pilot Randomized Controlled Trial (RCT) 'The MIND Trial'
- **Dr James Beckstead Award - \$20,000**
Dr Stephen Yang, Jewish General Hospital, Montréal, Québec
Utilization of machine learning technology for the surveillance of intraoperative and postoperative hypotension in surgical patients – A prospective observational cohort study (PACU-HPI study)

Open Operating Grants

- **Dr R A Gordon Research Award - \$30,000**
Dr Hance Clarke, University Health Network, Toronto, Ontario

The Effectiveness of Oral Cannabis Extracts for Osteoarthritic Pain: An Internal Pilot, Placebo-Controlled, Blinded Randomized Trial

- **Ambulatory Section Research Grant - \$10,000**
Dr David Sussman, St Michael's Hospital, Toronto, Ontario
Contralateral Corticosteroid Injection in Total Knee Arthroplasty A Double Blinded, Randomized Controlled Trial (COSTI Trial)
- **Obstetric Anesthesia Section Research Grant - \$20,000**
Dr Naveed Siddiqui, Mount Sinai Hospital and University of Toronto, Toronto, Ontario
Quality of labor epidural analgesia with intrathecal morphine as a component of combined spinal epidural: A double-blinded randomized control trial.
- **Section for Education and Simulation in Anesthesia Research Grant - \$10,000**
Dr Gianluca Bertolizio, McGill University Health Centre, Montréal, Québec
Virtual Reality Versus High-Fidelity Simulation to Train Anesthesia Residents.
- **The Su Ganapathy Regional Anesthesia Research Award - \$ 10,000**
Dr Garrett Barry, Royal Jubilee Hospital, Victoria, British Columbia
Determination of optimal dexamethasone use and brachial plexus block type to reduce rebound pain after peripheral nerve block for ambulatory surgery
- **CAS Career Scientist Award in Anesthesia - \$60,000**
Dr Kazuyoshi Aoyama, The Hospital for Sick Children, Toronto, Ontario
No Laughing Matter: The Perinatal and fertility outcomes after maternal sepsis, with an EDI perspective

Ontario's Anesthesiologists – CAS Residents' Research Grant - \$10,000

Dr Connor Brenna, University of Toronto, Toronto,
Targeting $\alpha 5$ GABAA Receptors to Treat Depression with Nitrous Oxide

2) Grant Standing Subcommittee (GSS)

The annual adjudication and awarding of research grants is held in April or May of each year before the Annual Meeting. Both the main Research Advisory Committee and the Adjudication Subcommittee have excellent linguistic and geographical diversity as well as a roughly even gender balance.

The following CAS members comprised the GSS for the grant adjudication meeting:

Philip Jones (London, FR/EN)
Diem Tran (Ottawa, EN)
Véronique Brulotte (Montréal, FR/EN)
Albert Moore (McGill University, FR/EN)

Harsha Shanthanna (McMaster University, EN)
Donald Griesdale (Vancouver, EN, regrets)
Gregory Hare (Toronto, EN)
Melissa Shears (Resident, Edmonton, EN)

3) Committee Membership

The committee consists of members nominated by the academic university departments across the country, a resident representative and individuals invited by the chair to ensure subspecialty representation. The committee meets annually and also invites the Chairs of PACT (Perioperatively Anesthesia Clinical Trials Group) and CARF to attend. In 2024 this meeting was held in person on June 7 in Victoria, BC at the Annual Meeting.

We would like to thank the following committee members who have finished their terms in 2024: Drs Sylvain Boet, Étienne de Médicis, Derek Dillane, Laura Duggan, Jonathan Gamble, Philippe Richebé, Kathryn Sparrow, and Vishal Uppal. These outstanding individuals have committed many hours to supporting Canadian research in anesthesia and advocating for equitable access to funding.

Our new members include Drs Neville Burke, Simone Derzi dos Santos, Imelda Galvin, Pascal Laferrière-Langlois, and Stuart McCluskey (CARF Chair). Lastly, Dr Shears will be transitioning from the role of resident representative to a full RAC member, and a new resident representative will be recruited.

4) Changes to Research Program Guidelines

a) Section Grant eligibility – In 2024 one section grant was not awarded due to lack of applicant although there was a grant application that would have qualified in a different category. Currently applicants are only allowed to apply to one grant. At the annual GSS meeting, individuals who do not win the new investigator grants will have their application shifted to eligible open grant categories. This year the RAC voted to allow the GSS to shift grant applications to the new section grants as long as they are section members and qualify to contend for the award. This shift is intended to maximize the number of competitions entered per applicant and also to ensure that all available grants are awarded.

b) Minimum grant scores – In the situation where there is only one applicant for a grant competition. To ensure that the award is given to a scientifically viable project, the award can not be acclaimed unless the minimum score is 3 for the resident's grant and 6 for all other grants (project success core + proposal score).

c) Budget listing – the RAC voted to accept the inclusion of Open Access application fees as a line item on proposed grant budgets.

5) Goals for Next Year

It is recognized that continued dependence on CARF fundraising is not a viable long-term option to maintain support for our research grants. This was why matched funding was offered to

Sections to access section member fees to support subspecialty specific grants. Next year we would like to ask CARF to revisit sponsorships from industry, under the appropriate safeguards.

SECTION REPORTS

CRITICAL CARE

Chair: Dr Faisal Siddiqui

Initiatives/Projects:

We are actively engaging with section members, prominently featuring our participation in the CAS Annual Meeting. The CAS conference serves as a primary platform for collaboration and knowledge exchange. Furthermore, we are dedicated to advancing critical care research. To this end, we actively encourage innovative research by sponsoring the Award for Best Abstract in Critical Care for the Abstract competition at the CAS Annual Meeting. This award not only recognizes excellence but also incentivizes groundbreaking work in the field.

Events:

- Perioperative TTE Course prior to the CAS 2024 Annual Meeting
- Critical Care Review at the CAS 2024 Annual Meeting

Top 3 Achievements:

1. Successful CAS Critical Care Review lecture
2. Awarding the Award for Best Abstract in Critical Care
3. Engagement with additional faculty across Canada

Goals for 2025:

Looking ahead to 2025, our strategic goals are centered on leadership transition, continued engagement, and educational excellence:

- A primary focus will be the smooth and effective transition of leadership within the section executive team, ensuring continuity and fresh perspectives.
- We aim to foster ongoing engagement with colleagues from across Canada, further strengthening our national network and collaborative spirit.
- Finally, we are committed to delivering a highly impactful and successful Critical Care Update, ensuring our members remain at the forefront of critical care advancements.

Link:

CAS Awards - <https://www.cas.ca/en/awards-grants/best-abstract-winners/current-winners>

ENVIRONMENTAL SUSTAINABILITY

Chair: Dr Vivian Ip

Initiatives/Projects:

In 2024, the Environmental Sustainability Section continued to drive meaningful change through targeted initiatives aimed at fostering education, awareness, and implementation of changes. Our key initiatives included:

Engagement: expanded our reach to different groups of CAS membership in terms of education, as well as guiding support for our initiatives in the section.

With the help of CARF, our section is participating in the research award. We hope to encourage applicants to submit their grant applications on environmental sustainability initiative that help improve patient outcomes.

Events:

- Earth Day webinar: an engaging virtual event that brought together experts and attendees to discuss strategies for a sustainable future in anesthesia.
- Our Delphi project on resource utilization in the clinical practice in regional anesthesia has been accepted by *CJA* and pending publication.
- At the Annual Meeting in Victoria, we successfully held a panel session, Discovery Talks and a PBLD (problem-based learning discussion) which was the first PBLD to be sold out.
- There is a podcast on greening regional anesthesia at the 2nd World Day of Regional Anesthesia hosted by ESRA.

Top 3 Achievements:

1. *CJA* acceptance of the Delphi consensus study which is a collaborative project across many high-income countries to provide guidance on resource utilization in regional anesthesia.
2. Position statement on environmentally sustainable anesthesia practice.
3. To participate in the best abstract award and collaborate with CARF.

Goals for 2025:

- Looking ahead, we are strengthening partnerships with other societies to continue producing education material and ramp up research opportunities.
- To continue having webinars and impactful presentations at the Annual Meetings.

- Advocate for policy change by publishing the position statement in *CJA* for broader reach and drive actionable changes at the policy level.

Links:

1. [Greening the OR Position Statement](#)
2. [Greening the OR Position Statement Background Paper](#)

OBSTETRIC

Chair: Dr Lorraine Chow

The executive of the OB section would like to start this report by thanking all of our members for their ongoing support for our OB anesthesia section and community. Our membership continues to remain stable and solid. This year the OB section welcomed Dr Allana Munro to the role of secretary/treasurer. Dr Anton Chau is our current Vice-Chair, and Dr Lorraine Chow has moved into the role of Chair. We sincerely thank Dr Wesley Edwards for his role as Chair for the past 2 years and look forward to having his continued guidance on the OB section executive as the Past-Chair.

Initiatives/ Projects:

The OB section continues to support the \$20,000 OB Anesthesia Section Research Grant in partnership with CARF. Dr Naveed Siddiqui (Mount Sinai Hospital, University of Toronto) was the winner of the 2024 research grant for his study on *Quality of labor epidural analgesia with intrathecal morphine as a component of combined spinal epidural: A double-blinded randomized control trial*.

The OB section presented a very successful program at the CAS Annual Meeting. Some highlights included:

- 2 problem-based learning discussions: “Managing difficult or failed epidural analgesia in obstetrics”, presented by Dr Ilana Sebbag, and “Managing patients with high BMI”, presented by Dr Juliana Barrera.
- The Clinical Conundrums Expert Panel moderated by Dr Anton Chau was both highly educational and extremely entertaining. During this session, we got to hear about the clinical management of complex obstetric scenarios from three OB anesthesia experts (Dr Dolores McKeen, Dr Roanne Preston and Dr Paul Wiecezrak). The interactive aspect of this session was extremely well-received, and we aim to have a similar session in the 2025 program.
- In the obstetric general anesthesia best practice panel, Dr Katie Seligman, Dr David Maclean and Dr Lorraine Chow provided some updated evidence to dispel some myths regarding general anesthesia management for Cesarean section. Dr Giselle Villar provided an informative update on the management of obstetric patients with substance use disorder, and Dr Hilary McCormack continues to advocate for inclusive care of all obstetric patients.
- The OB section debate remains one of the highlights of our program. This year, Dr Valerie Zaphiratos and Dr Anne Lavoie went head-to-head comparing the use of fentanyl versus remifentanyl PCA for labour analgesia. The conference ended on a high note with

a test-enhanced learning session on POCUS in obstetric anesthesia. This session featured talks by Dr Ana Sjaus, Dr Juliana Barrera, and Dr Christian Arzola.

The CAS conference continues to showcase obstetric anesthesia research across the country. The award winner for the Best Abstract in Obstetric Anesthesia (Anesthesiologist) was **Dr Juliana Barrera** (BC Women's Hospital, University of British Columbia), for her study: *Anesthesia Practice During Elective Cesarean Delivery Under Spinal Anesthesia: A Prospective Observational Study*. The Award for Best Abstract in Obstetric Anesthesia (Medical Student) went to **Noah Reaume** (Royal University Hospital) for her study on: *The incidence of spinal anesthesia failures during elective Caesarean sections: A comparison of two different suppliers*.

The OB section is working closely with the CAS Clinical Practice Guidelines Committee to provide an update to the OB section of the Guidelines to the Practice of Anesthesia. Dr Anton Chau is liaising between both groups to provide a multi-year update on oral intake during labour, thrombocytopenia and PDPH management.

Our section is eagerly awaiting the publication of the *Canadian Journal of Anaesthesia* CPD module on the management of post-dural puncture headache. The module is in the final stages of editing and will hopefully be published soon.

Events:

- New CAS interactive experts panel discussion at CAS Victoria
- POCUS in obstetric anesthesia TEL session at CAS Victoria

Top 3 Achievements:

1. Alana Munro joined the executive team.
2. Multi-year updates to OB Section of the CAS Clinical Practice Guideline.
3. Partnership with CAS Neuroanesthesia Section for combined neuro-OB panel at CAS 2025.

Goals for 2025:

1. Developing/formalizing a national social network of OB Anesthesiology experts
2. Developing further Inter-section and Inter-society collaboration. (Dr Rachel Kearns, OAA executive committee member, will be one of the featured speakers in our 2025 CAS program).
3. CJA CPD module on spinal cord stimulator management in OB patient coming 2025
4. Continued collaboration with other CAS sections at the Annual Meeting. We have collaborated with regional anesthesia in 2024 and neuroanesthesia in 2025. We aim to continue this for future meetings

PERIOPERATIVE MEDICINE

Chair: Dr Amélie Pelland

Executive Committee Membership:

Dr Amélie Pelland (North Vancouver, BC) served as Chair for the Executive and will continue in this role for one more year. Dr Daniel McIsaac (Ottawa, ON) began his term as Associate Chair. Dr David MacDonald (Halifax, NS) was recruited to the Executive as Secretary/Treasurer. Dr MacDonald has a fellowship in perioperative medicine from the University of Ottawa and is currently the Medical Director of Perioperative Medicine for the Department of Anesthesiology at Dalhousie University.

Section Membership:

Section membership has remained stable in 2024, at 89 members country wide. Section finances are likewise stable.

Initiatives/ Projects:

The Section is currently supporting two large perioperative research projects, based at the University of Ottawa.

1. Virtual vs In person comparative effectiveness evaluation of Anesthesiology consultations (VIRTUAL) study
2. Advancing Cognition and Cognitive reserve before Elective surgery to Enhance cognitive Recovery And Trajectories (ACCELERATE) Trial

The Section has also proposed a partnership with the British Columbia Anesthesiologists' Society to support a yearly perioperative research award. Planning is underway to offer the BCAS Dr Pieter Swart Perioperative Research Operating Grant starting in 2026.

Events:

The Section hosted four events for the 2024 Annual Meeting. This included a large plenary session hosted in conjunction with the Ambulatory Section and Acute Pain Section.

Plenary sessions:

1. Optimizing Anesthesia for Patients on GLP-1 Therapy: Managing Fasting, Full Stomachs, and Regional Techniques
Moderators: Dr Amélie Pelland, Dr Vishal Uppal, Dr Mandeep Singh
Speakers: Dr Peter Inglis (Winnipeg, MB), Dr Bhargavi Gali (Rochester, MN), Dr Hari Kalagara (Jacksonville, FL)
2. It's Postoperative Day 1, Do You Know how Your Patient's Doing? An Overview of Models of Anesthesia-Led Postoperative Care in Canada
Moderator: Dr Amélie Pelland

Speakers: Dr Peter Inglis (Winnipeg, MB), Dr Tony Badh (Vancouver, BC), Dr Sylvie Aucoin (Ottawa, ON)

Problem-based learning discussions:

3. Methamphetamine Use in the Perioperative Setting
Facilitator: Dr Manpreet Banghu (Winnipeg, MB)
4. Perioperative Delirium: An Update on an Old Problem
Facilitator: Dr Leandra Amado (Ottawa, ON)

The Section Chair also joined Dr Giuseppe Fuda to attend the CPMed Perioperative Medicine Stakeholder Summit at the 2024 ASA Meeting, on invitation. A short overview of the state of perioperative medicine in Canada was presented and we participated in discussions identifying priorities and focus areas for future direction.

Finally, Section Executive Members moderated three of six CAS Pinnacle Rounds for the year.

Goals for 2025:

1. Ensure full approval at the CARF/CAS level of the Dr Pieter Swart Perioperative Research Operating Grant so that it may start to be awarded with Section support in 2026.
2. Continue to increase the Section's education offerings in addition to those of the Annual Meeting, including the CAS Pinnacle Rounds.
3. Continue to support local and national research and clinical care projects that seek to advance Canadian contribution to Perioperative Medicine.

REGIONAL AND ACUTE PAIN

Chair: Dr Vivian Ip

Initiatives/ Projects:

In 2024, the Regional Anesthesia Section continued to drive meaningful change through targeted initiatives aimed at fostering education, and collaboration with the other regional anesthesia societies.

Our key initiatives included:

Engagement: expanded our reach to all groups of anesthetic providers with our free for all educational webinar in January as part of the celebration of the 1st World Day of Regional Anesthesia.

With the help of CARF, our section is participating in the research grant award. We hope to encourage applicants to submit their grant applications on innovative projects in regional anesthesia that help improve patient outcomes.

Events:

World Day Regional Anesthesia celebration webinar: an engaging virtual event that brought together experts and attendees to discuss strategies for incorporating regional anesthesia in different types of surgery.

Our CPD module Ambulatory total hip and knee arthroplasty: a literature review and perioperative considerations is published in *CJA* (PMID: 38504037). This was a collaborative narrative review of all interested committee members with extensive literature search to summarize the latest evidence in ambulatory hip and knee arthroplasty in terms of perioperative considerations and management.

At the Annual Meeting in Victoria, we successfully held a panel session, Discovery Talks and PBLD. Furthermore, the best abstract award as well as the Research Grant award were presented at the Annual Meeting in Victoria.

Top 3 Achievements:

1. Publication of the CPD module in the *CJA* regarding the current topic of ambulatory joint perioperative consideration and management, incorporating regional anesthesia.
2. To be able to collaborate with important and well recognized regional anesthesia society, such as ESRA, to host a global event for broader reach of our education material and put CAS into the global arena.
3. To collaborate with CARF and be able to present a research grant award which elevates the value of our section to our members.

Goals for 2025:

1. Looking ahead, we are strengthening partnerships with other societies such as ASRA and ESRA.
2. To continue having webinars and impactful presentations at the Annual Meetings.
3. Produce clinically meaningful and impactful CPD articles and position statements.

Link:

[Ambulatory total hip and knee arthroplasty: a literature review and perioperative considerations | Canadian Journal of Anesthesia/Journal canadien d'anesthésie](#)

RESIDENTS

Co-Chairs: Drs Alex Bak & Kyra Moura

Initiatives/ Projects:

1. SIM Olympics
2. Royal College Exam Prep Course
3. Annual Meeting Panel Session
4. Ambassador Program

Events:

Annual Meeting Resident Section stream.

Top 3 Achievements:

1. **Successful re-launch of the SIM Olympics at the 2024 Annual Meeting in Victoria.** The Resident Section held the first Simulation (SIM) Olympics since COVID-19, which was very well received by attendees. We further supported resident participation at the CAS Annual Meeting by providing free resident tickets to the CAS Soirée, as well as a panel session on: Careers Outside the Conventional OR.
2. **Recruitment of a full team.** We recruited the largest team in CAS Resident Section's history, with 12 highly motivated residents that represent various schools from coast to coast. This expanded team will help us reach our goal of increasing programming geared towards residents across Canada for 2024-2025.
3. **Increased communication/social media acknowledgement.** With the help of the CAS National Office, we were able to continue to provide engaging communication and promotion of residents through our social media platforms.

Goals for 2025:

Royal College Exam Prep course. This full-day course with an optional workshop during the conference will be geared towards residents preparing for the Royal College exam and will cover various subspecialty topics. Content and focus have been curated based off the results of a nation-wide survey of anesthesia residents in 2024. Notably, it will be included as a free add-on for residents registered for the CAS conference.

Resident promotion and engagement. We hope to further increase the promotion and marketing of resident section opportunities to residents across Canada. Our plan involves a multi-pronged approach, through front office communication, social media, and the eventual establishment of Resident Ambassadors in each residency program.