

2014

Canadian Association
of Gastroenterology



L'Association Canadienne
de Gastroentérologie



A black and white portrait of Derek McKay, a man with dark hair, wearing a checkered shirt. He is looking directly at the camera with a slight smile. The background is a plain, light color.

Derek McKay, CAG President's Message

“Comparative analyses show that publications supported by the CAG research program had a greater impact than other Canadian and international comparators”

I am pleased to share with you the key accomplishments of the Canadian Association of Gastroenterology (CAG) from 2013-2014, as well as a look ahead to the next 12 months.

CAG has been increasingly busy with producing clinical practice guidelines (CPGs) on therapeutic issues identified by members as requiring guidance, or requiring an update to older guidelines. Recently, the CAG-led Consensus Statements on the Risk, Prevention, and Treatment of Venous Thromboembolism in Inflammatory Bowel Disease was published, and a manuscript is in preparation on the CPG for the medical management of ulcerative colitis. In addition, a poster on surveillance intervals for individuals at average risk for colorectal cancer following colonoscopy is now available to support endoscopy clinics. More CPGs are in development or being discussed, related to inflammatory bowel disease and pregnancy, dysphagia, dyspepsia, wireless endoscopy and colon cancer screening.

One of the most exciting developments this year in Clinical Affairs has been the burgeoning interest in CAG's quality in endoscopy programs. One such program is the Canada-Global Rating Scale® (C-GRS®), a web-based questionnaire tool for continuous quality improvement in the delivery of patient-centred endoscopy services in Canada. The C-GRS® began as a pilot in 2008 based on the U.K. GRS and was supported by the Canadian Partnership Against Cancer. Over the last year the C-GRS® has been adopted as a quality tool by British Columbia and Newfoundland health authorities, with expansion to nearly 90 Canadian hospitals and clinics. Building on the success of the above, discussions are now underway to begin a quality program in inflammatory bowel disease management.

Spanning Clinical Affairs and Education Affairs, CAG's Skills Enhancement for Endoscopy® (SEE®) encompasses two courses. Train-the-Colonoscopy-Trainer is designed to improve teaching skills and procedural 'conscious competence' needed to teach colonoscopy. Master Classes in Colonoscopy are intended to provide upskilling and improvement of colonoscopy skills for practicing endoscopists. Inquiries and registrations for these programs have drastically increased as popularity grows by word of mouth from those partaking in the courses.

In Research Affairs maintaining funding for gastrointestinal research continues to be a challenge. In support of the importance of Canadian research, the Canadian Institutes of Health Research (CIHR) and CAG collaboratively published data on the CAG/CIHR/Industry Research Program for the years of 2000-2008. Comparative analyses show that publications supported by the CAG research program had a greater impact than other Canadian and international comparators.

Finally, under the Administrative Affairs portfolio, in response to concerns of members over the lack of gastroenterology positions for new trainees, CAG has assembled a task force to investigate this and other human resource issues.

The above are just a sampling of the many projects of the Association. In 2015 CAG will again set its strategic plan for the next five years. We invite you to stay tuned to the website (www.cag-acg.org) for more details and new developments.

Sincerely,

A handwritten signature in black ink that reads "Derek McKay".

Derek McKay

Derek McKay, PhD

Current and Upcoming Initiatives

SEE©

The SEE© program is rapidly expanding and receiving exceptional reviews. In the past 12 months 20 programs have been held; 13 Train-the-Colonoscopy-Trainer courses and seven Master Classes in Colonoscopy, for a total of 107 endoscopists trained. Based upon the demand thus far, it is anticipated that the number of courses and participants in the 2014-2015 time period will increase significantly. These courses are accredited for Royal College of Physicians and Surgeons of Canada (RCPSC) Section 1 credits and participants may also claim Section 3 credits if they complete the Section 3 Credit Assessment.

"The SEE program was the best CME program I have participated in, since my graduation, 24 years ago. Despite having performed more than 20,000 colonoscopies, this dramatically changed my technique, amount of sedation used and overall satisfaction of all parties involved in the colonoscopy process. I have said that I learned how to scope under supervision, but this is the first time I have been taught how to scope. Great experience that should be mandatory for all endoscopists" Dr. Michael Gould, Etobicoke

CAG acknowledges Olympus Canada Inc. for their generous support of the SEE© program during 2015-2016 through an unrestricted educational grant.

Task Force on Human Resource Issues

The CAG Operations Committee is appointing a task force to address the shortage of jobs for gastroenterology trainees and other human resource issues. CAG last undertook such an inquiry back in 2004, thus a renewed look at this area is greatly needed.

Survey of Access to GastroEnterology (SAGE)

SAGE is CAG's periodic survey of wait times for gastroenterology consultations and procedures. Since 2005 three wait time surveys have been conducted, with a fourth planned for 2015. While wait times do not appear to be improving markedly it is critical that CAG continues to monitor wait times to arm the Association and our affiliates with these current data. For key findings from past surveys please see <http://www.cag-acg.org/special-projects/wait-times>.

CAG Strategic Planning

The Association conducts strategic planning approximately every five years. Building on the 2002 and 2009 surveys and focus groups involving the membership, CAG will be renewing its strategic plan for 2015. The opinions of our members and meeting their needs are of primary importance. Look for further details of the plan during 2015 and results to be distributed thereafter.

Forthcoming Guidelines/Consensus Statements

A number of areas of clinical practice are being delved into in order to develop CPGs.

These include:

- Inflammatory bowel disease and pregnancy
- *Helicobacter pylori*
- Dysphagia
- Wireless endoscopy
- Colon cancer screening

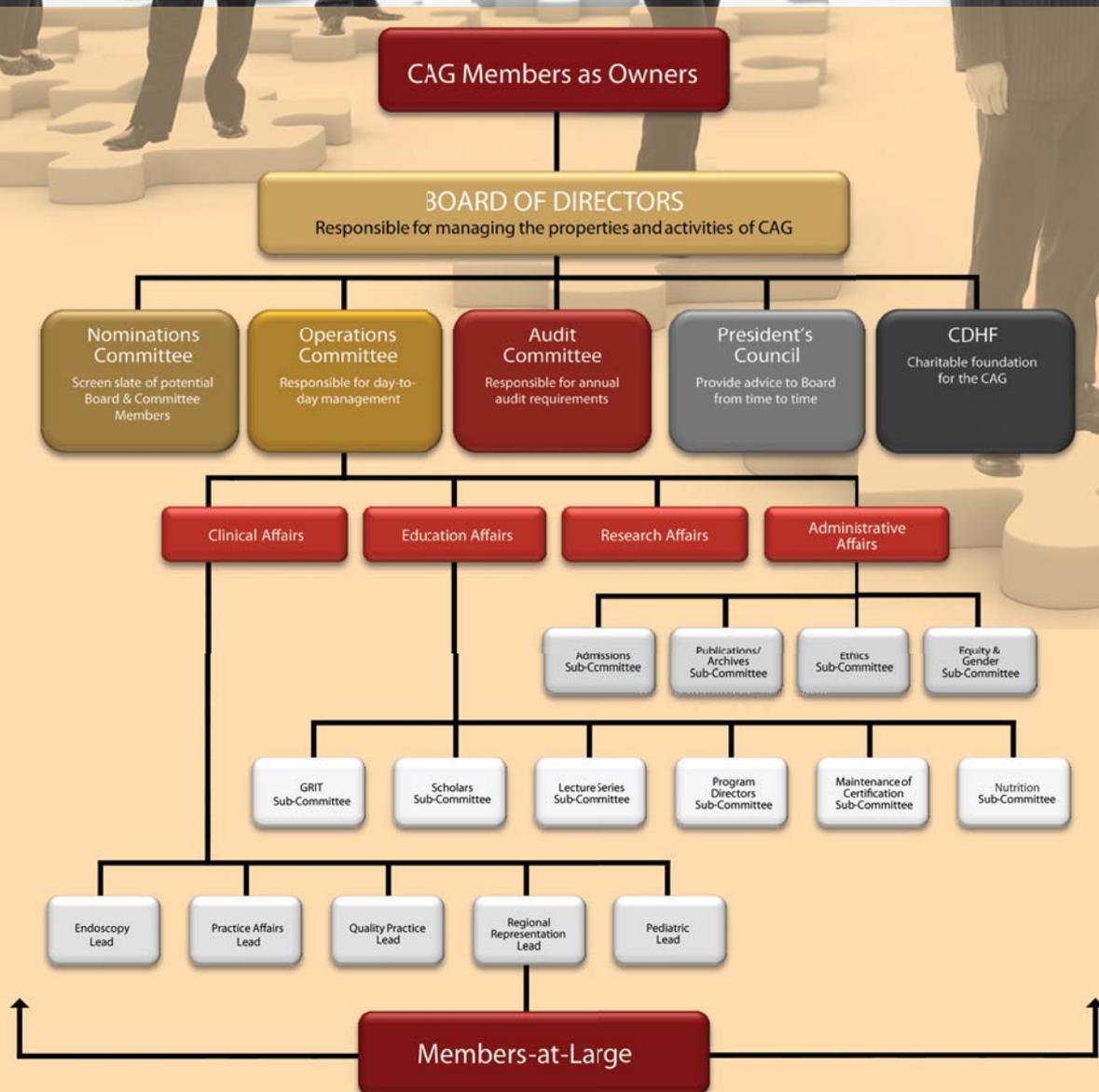
CAG Forum

Introduced in 2012, the CAG Fall Forum provides an opportunity for leadership and committee members to discuss projects and receive training from top educators. Professor Janice Stein (Munk School of Business, University of Toronto) returns in 2014 to lead a workshop on getting to know your conflict style, making a diagnosis of a conflict situation, adapting your conflict style for a positive outcome, and learning when to intervene.



Organizational Structure

The mandate of the Board of Directors is to chart the strategic direction of the Association while day-to-day management resides with the Operations Committee and its four portfolios. The Nominations and Audit Committees fill essential administrative roles while the President's Council provides the Board with guidance based on the experience and wisdom of past leadership. Finally, the Canadian Digestive Health Foundation (CDHF), as CAG's charitable foundation, also reports to the Board.



Board of Directors

The Board directs the overall course of the organization through quarterly teleconferences and twice-yearly meetings. The mandate of the Board includes developing policies, monitoring operations, identifying and managing risk and the financial position of the Association, establishing members' dues, electing officers, and appointing committees.

Like the various committees and sub-committees the Board does not receive payment for service, despite the significant amount of time invested. The Board welcomes your comments and suggestions which you may forward via the national office (general@cag-acg.org).

President, 2014-2016

Derek M McKay, PhD

Professor of Physiology and Pharmacology
Canada Research Chair in Intestinal
Immunophysiology in Health and Disease
University of Calgary
Calgary, Alberta

Derek M McKay

President Elect, 2014-2016

David Armstrong, MA, MB, BChir, FRCPC, FRCP(UK), FACG, AGAF

Professor of Medicine
McMaster University
Hamilton, Ontario

David Armstrong

Past President, 2014-2016

Dan Sadowski, MD, FRCPC, ABIM

Associate Professor of Medicine
University of Alberta
Edmonton, Alberta

Dan Sadowski

VP Treasurer, 2012-2017

Wallace MacNaughton, PhD

Professor of Physiology and Pharmacology
University of Calgary
Calgary, Alberta

Wallace MacNaughton

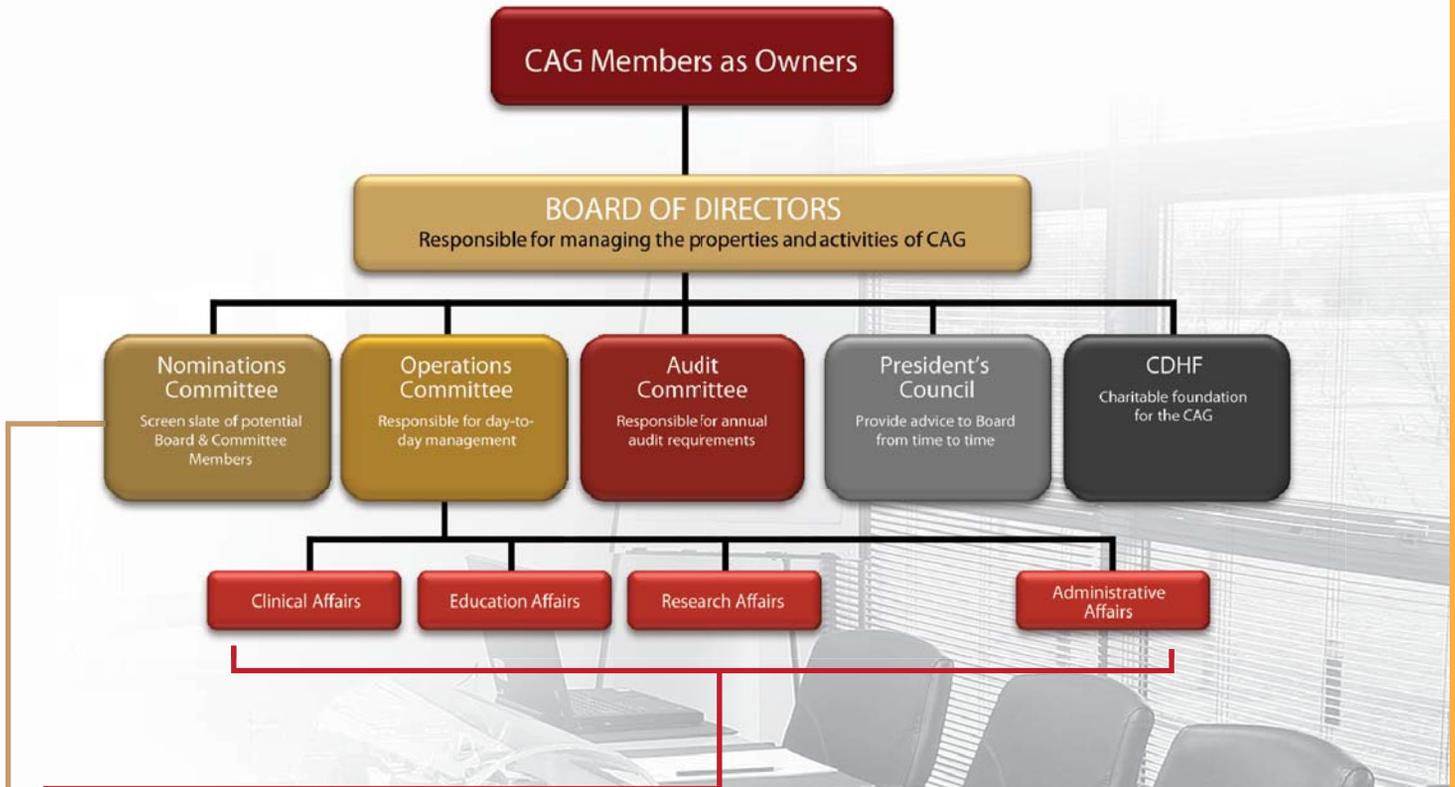
VP Secretary, 2012-2017

Nicola L. Jones, MD, PhD, FRCPC

Professor of Pediatrics
University of Toronto
Toronto, Ontario

Nicola L. Jones

Committees



Nominations Committee

Chair: Nicola Jones

Operations Committee

Chair: Paul Sinclair
Executive Director, CAG

Audit Committee

Chair: Wallace MacNaughton

President's Council

Chair: Derek McKay

Canadian Digestive Health Foundation (CDHF)

President: Richard Fedorak

VP Clinical Affairs

Lawrence Hookey, Queen's University

VP Education Affairs

Kevin Waschke, McGill University

VP Research Affairs

Francois Boudreau, Université de Sherbrooke

VP Administrative Affairs

Lana Bistriz, University of Alberta



Nicola Jones



Paul Sinclair



Wallace MacNaughton



Derek McKay



Richard Fedorak



Lawrence Hookey



Kevin Waschke



Francois Boudreau



Lana Bistriz

Clinical Affairs

With gastroenterologists and their trainees comprising the largest group within the membership, Clinical Affairs is at the core of the Association. Clinical Affairs and its Leads enhance CAG's ability to respond quickly to the concerns of practitioners, such as lobbying governmental agencies for additional funding of new medications, new interventions, and new screening protocols.



Endoscopy

Represents CAG on matters relating to endoscopy and promotes competence and training in the field, including development of credentialing guidelines in endoscopic procedures.

Practice Affairs

Provides a forum to address issues relevant to clinical members of CAG including ongoing training, knowledge dissemination, practice-related issues and consensus guidelines.

Quality Practice

Directs initiatives related to quality assessment relevant to endoscopic and clinical practice.

Regional Representation

Serves as a channel of communication between CAG and provincial/regional gastroenterology associations.

Pediatric

Represents the interests of pediatric gastroenterologists and researchers.

Education Affairs

Professional education has long remained a priority and strength of CAG - a strategic planning survey showed that members rate Canadian Digestive Diseases Week (CDDW) as the most important service provided by the Association. Given the scope and importance of its activities, Education Affairs is divided into several sub-committees, each with a specific mandate.



Gastroenterology Residents-in-Training (GRIT) Course

A high-caliber, internationally-recognized, annual training program for gastroenterology/hepatology residents held in association with CDDW.

Scholars' Program

Annual course preceding CDDW that encourages medical students and internal medicine residents to consider a career in gastroenterology/hepatology.

Lecture Series

Monthly national videoconference for gastroenterology residents with presentations from national and international experts.

Program Directors

Elected via a process established by the RCPSC, with the mandate of overseeing the standardization and maintenance of the quality of gastroenterology training programs in Canada.

Maintenance of Certification

Currently reviews and approves submissions for Section 1 RCPSC accreditation of educational events.

ePortal

Online continuing professional development learning for members which includes a variety of tools and the ability to automatically collect and track Maintenance of Certification credits.

Nutrition

Maintains a census of Canadian nutrition experts and programs, links clinical nutrition fellowships with formal academic training, and encourages nutrition fellows to consider a career in community practice.

Research Affairs

In contrast to Clinical, Education and Administrative Affairs, Research Affairs encompasses only one sub-committee chaired by VP Research Affairs, Francois Boudreau PhD, but is responsible for overseeing a number of key initiatives.

CDDW

Research Affairs reviews the approximately 300 abstracts submitted to the CDDW scientific conference, and plans the basic science symposia and paper and poster sessions.

CAG/CIHR/Industry Partner Research Program

The CAG/CIHR/Industry Partner Research Program is the pride of CAG, its industry partners, and CIHR, providing one to five years of funding to junior clinicians and PhD scientists studying gastrointestinal health and disease. The significant impact of this program on research training and advancement of gastroenterology in Canada has been published in two key papers (McKay DM *et al. CJG&H* 2003;17:437-9 & Sherman PM *et al. CJG&H* 2013;27:717-20). CAG appreciates the generous support from our research partners AbbVie, Actavis, Crohn's and Colitis Canada, Ferring, PENTAX Medical, and Takeda, which allows this critical research program to be made available.

Summer Studentships and Resident Research Awards

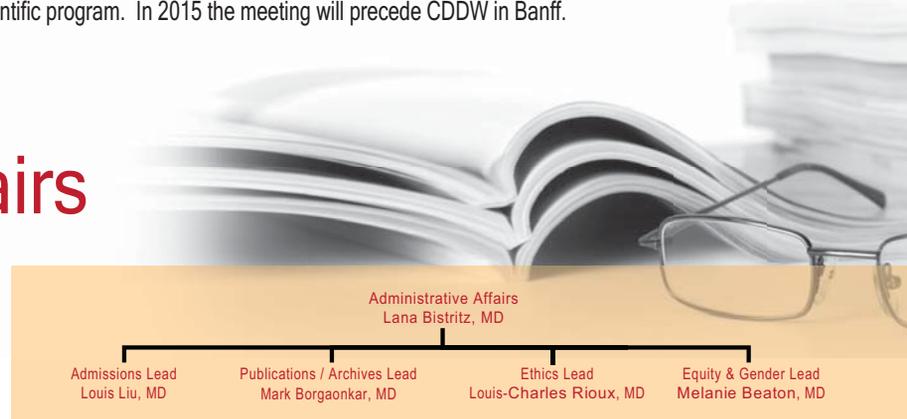
The summer studentship and gastroenterology resident research award programs provide very important opportunities for trainees to gain research training and experience with the aim of establishing new gastrointestinal researchers. CAG appreciates the generous support from Crohn's and Colitis Canada for the summer studentship program and Actavis, Procter & Gamble, and Shire for the resident research award program.

Research Topics in Gastrointestinal Disease

Since 2001 Research Topics has been an annual event where basic science and clinical trainees, including Masters and PhD students, gastroenterology residents, and postdoctoral fellows, come together for two days to present their research and meet and network with fellow students and faculty. Research Affairs reviews the 40 abstract submissions and organizes the scientific program. In 2015 the meeting will precede CDDW in Banff.

Administrative Affairs

The administrative aspects of CAG are some of the most critical, supporting the structure and ensuring the viability and growth of the organization. The four Leads that comprise Administrative Affairs reflect the Association's philosophy of accountability, transparency and effective communication.



Admissions

Encourages membership and reviews/approves applications for membership from qualified professionals.

Publications/Archives

Responsible for all CAG publications including the website. Oversees the Archivist, who maintains the organization's records/history, and advises the editor of the CAG journal.

Ethics

Establishes/updates guidelines for ethical standards in patient care, research, education, and industry interaction, and increases understanding of biomedical ethics in gastroenterology.

Equity & Gender

Identifies important issues related to gender and visible minorities for discussion and action.



National Office

We invite you to drop by the home of the CAG National Office - 1540 Cornwall Road in Oakville.

National office staff includes (from left to right) executive director Paul Sinclair, project managers Sandra Daniels, Louise Hope, Palma Colacino and Janet Rochemont, and office administrator, Kim Dixon.



Paul Sinclair



Sandra Daniels



Louise Hope



Palma Colacino



Janet Rochemont



Kim Dixon

What Does the CAG National Office Do?

The national office works with board members and committees to support initiatives and achieve the goals of the Association. Central to the organization is the executive director, whose roles involve chairing the Operations Committee, advising the Board, strategic planning and fundraising, and overseeing office staff and activities. National office responsibilities may roughly be divided into six broad categories as shown in the figure at right and described below.



Annual Conference

For the 2014 CDDW and Canadian Association for the Study of the Liver (CASL) Winter Meeting over 350 accepted abstracts were sorted and laid out for the final program, and office staff liaised with the approximately 200 speakers and co-chairs to solidify the program which offered 88.5 hours of Section 1 accredited learning and up to 28 credits per delegate. The staff works behind the scenes to direct the conference planner and manage details on a weekly basis between the kick-off of planning each spring and the close of meeting finances the following May.

As an RCPSC-approved national provider of accredited gastroenterological education CAG annually accredits many local meetings. In addition, RCPSC co-developed events - in which CAG works with industry to develop the educational program - have become increasingly popular. Coordinating these many educational programs demands significant time from national office staff and the members of the Maintenance of Certification Sub-Committee.

Research

In 2014, fourteen fellowships and two grants were awarded. The executive director liaises with government agencies such as CIHR and our research sponsors, and oversees the over 35 ongoing fellowships, grants and trainee research awards.

Sponsorship

Since CDDW is run as a minimal profit event, funds to run the Association are raised through corporate sponsorship. In 2014, 13 companies, including six BENEFACTOR sponsors, support CAG.

Gastroenterology Resources/Advocacy

The office coordinates activities related to CAG's digestive healthcare initiatives, which in 2013-2014 included the Quality Program-Endoscopy.

Committees

The national office provides continuous guidance and support to the board and operations, their committees and projects, and plays an active role in 40 on-site meetings (board, committees, sponsors, etc.) held during the week of CDDW.

Financial

Strategic planning and fundraising efforts of the executive, executive director, and VP Treasurer have succeeded in raising over \$2.7 million in revenue in the 2012/2013 financial period.

Annual Scientific Meeting

CAG CANADIAN DIGESTIVE DISEASES WEEK and the CASL WINTER MEETING

February 27 - March 2, 2015
Fairmont Banff Springs, Banff, Alberta

CAG and CASL look forward to welcoming you to CDDW and the Winter Meeting in Banff. Drs David Armstrong and Richard Schreiber are co-chairs of the Implementation Committee and are supported by a CAG and CASL core program committee in creating the conference program.

The conference showcases the best of Canadian gastroenterology and hepatology research, and provides a venue for colleagues to meet. This year over 1200 delegates attended the conference.

Trademark annual sessions include:

Richard D McKenna Memorial Lecture

Named after the founder of the Association, this prestigious lecture serves as the traditional opening to CDDW and features an international leader in the area.

CASL Gold Medal Lecture

Recognizes physicians and scientists who have significantly advanced the field of liver research.

Research Excellence Award Lecture

Honours an outstanding Canadian researcher and CAG member.

Postgraduate Course: Advances in Gastroenterology and Hepatology

For this course presenters mine the literature from recent years and review the key developments and papers clinicians need to know.

Symposia

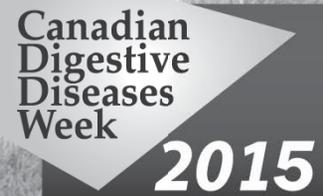
A number of basic and clinical science symposia are held on topics of interest as identified by members in the annual needs assessment survey.

Breakfast with the Experts

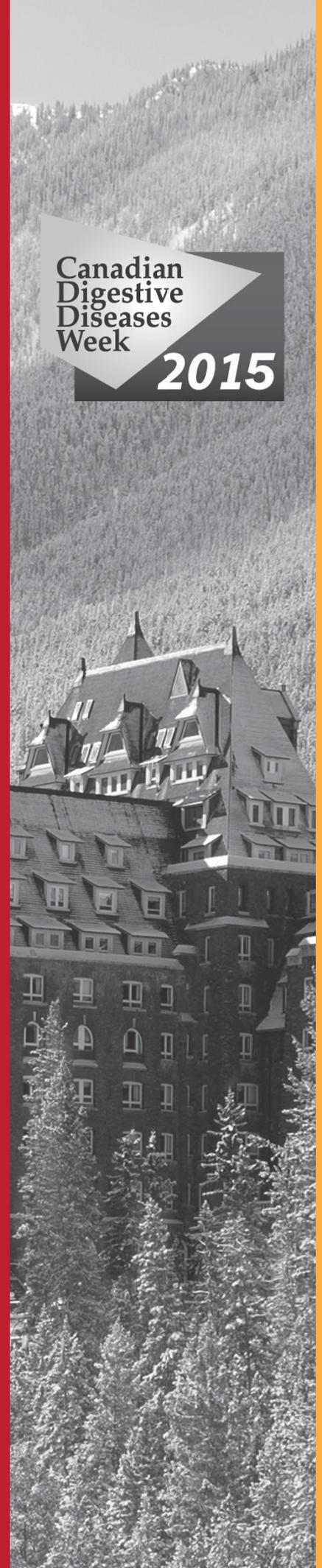
Overwhelmingly popular since their introduction in 2003 these small group sessions provide interactive time with leaders in the field.

Small Group Sessions

Following a similar interactive format as Breakfast with the Experts, small group sessions have been enthusiastically attended.



Canadian
Digestive
Diseases
Week
2015



2014 CORPORATE SPONSORS

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CAG would like to recognize and thank our Corporate Sponsors as listed above. Corporate sponsorship provides funding which is essential for the day-to-day operations, inclusive of national office expenses and support for orphan programs not funded by other sources.

Research

The CAG Research Program provides research funding at all levels including summer studentships, gastroenterology resident research awards, post-doctoral fellowship awards, new investigator awards, and operating grants. The program provides critical support to ensure a vibrant Canadian gastroenterology research community. CAG would like to thank AbbVie, Actavis, Crohn's and Colitis Canada, Ferring, Pentax, Procter & Gamble, Shire, and Takeda for their generous support towards the maintenance and growth of gastroenterology and gastrointestinal research in Canada.

CDDW

Canadian Digestive Diseases Week is the annual educational event of CAG, and one that would not be possible without financing from our partners. Partners may choose from various sponsorship options including basic science and clinical symposia, small group breakfast sessions, paper and poster sessions, the prestigious McKenna lecture, research and education award lectures and the postgraduate course. The Association would like to thank all the sponsors of CDDW 2014.