



Canadian Association of Gastroenterology

# 2007 ANNUAL REPORT



## President's Message

Welcome to the annual report of the Canadian Association of Gastroenterology (CAG), a publication intended to provide a view to the structure and activities of the Association. Inside we review the accomplishments and plans of the CAG committees and governing board. Highlights for 2007 are outlined below, and you are encouraged to review the appropriate committee report for details of various initiatives.

### Key Activities & Accomplishments in 2007

- CAG and the Canadian Association for the Study of the Liver (CASL) re-united to co-host **Canadian Digestive Diseases Week (CDDW) and the 3<sup>rd</sup> Annual CASL Winter Meeting**. The conference drew over 800 delegates and offered new educational programs including the American Society for Gastrointestinal Endoscopy Learning Center, live endoscopy, small group sessions, evening events and an educational passport.
- A **consensus conference** on the use of cyclooxygenase-2 inhibitors and conventional non-steroidal anti-inflammatory drugs including ASA was held in February; the manuscript is under preparation.
- A complete **redesign of the CAG website** is underway which will enhance functionality, content and ease of navigation.
- A proposal for **restructuring of the governing board** to streamline operations and meet CAG's changing needs was tabled and will be voted on at the 2008 Annual General Meeting.
- A **position statement on use of proton pump inhibitors and increased risk of hip fractures** is under development and will be released in the near future.
- Later this year a **position statement on sedation (propofol)** will be developed.
- A **quality assurance program in endoscopy**, mirrored after the successful U.K. effort, will be piloted during Q3/4.
- **Endoscopic Research Operating Grants (3)** were introduced this year in partnership with Olympus and the Canadian Institutes of Health Research (CIHR). This brings the total number of awards for 2007 to 5 grants, 14 fellowships, 18 summer studentships and 7 resident research awards.
- CAG paper **archives have been digitized** on DVD for easy storage and record searching.

### Advocacy

In recent years the CAG has moved beyond its traditional roles in education and research to explore patient access to healthcare. Wait time benchmarks for gastroenterology care were established (Can J Gastroenterol 2006;20:411-23), actual wait times across Canada determined, and current and future human resources needs for gastroenterology assessed (Am J Gastroenterol 2007;102:478-81). This formed the basis of advocacy efforts, which have begun to yield results. In 2006 CAG Liaison Committee Chair, Dr Susan Natsheh, joined the board of directors of the Federation of National Specialty Societies of Canada (FNSSC), and CAG Executive Director, Paul Sinclair, became part of the FNSSC Management Committee. **In April 2007 the CAG was one of five groups welcomed into the extended Wait Time Alliance.** On behalf of its members the CAG is pleased to be at the Wait Time Alliance table and will continue to keep the membership apprised of progress in this area.

We look forward to the year ahead and the many challenges and opportunities it promises for the CAG and gastroenterology in Canada.



William Paterson, MD, FRCPC



William Paterson  
CAG President

*“On behalf of its members the CAG is pleased to be at the Wait Time Alliance table”*

# Canadian Association of Gastroenterology Executive Committee

The executive committee charts the course of the organization on a daily basis, responding to issues as they arise. The group 'meets' through quarterly teleconferences, though the majority of matters are dealt with via email discussions. Like other board and committee members the executive does not receive payment for service, despite the significant amount of time invested in running the Association. The executive welcomes your comments and suggestions which you may forward either to the national office ([cagoffice@cag-acg.org](mailto:cagoffice@cag-acg.org)) or via the email contacts given below.



**President, 2006-2008**  
**William G Paterson, MD, FRCPC**  
Professor of Medicine  
Queen's University  
Kingston, Ontario

**President Elect, 2006-2008**  
**Ronald J Bridges, MD, FRCPC**  
Clinical Professor of Medicine  
University of Calgary  
Calgary, Alberta



**Past President, 2006-2008**  
**Desmond J Leddin, MB, FRCPC, MRCPI, MSc**  
Professor of Medicine  
Dalhousie University  
Halifax, Nova Scotia

**VP Clinical Affairs, 2007-2012**  
**Daniel C Sadowski, MD, FRCPC, ABIM**  
Assistant Professor of Medicine  
University of Alberta  
Edmonton, Alberta



**VP Finance, 2005-2010**  
**Carlo A Fallone, MD, FRCPC, AGAF**  
Associate Professor of Medicine  
McGill University  
Montreal, Quebec

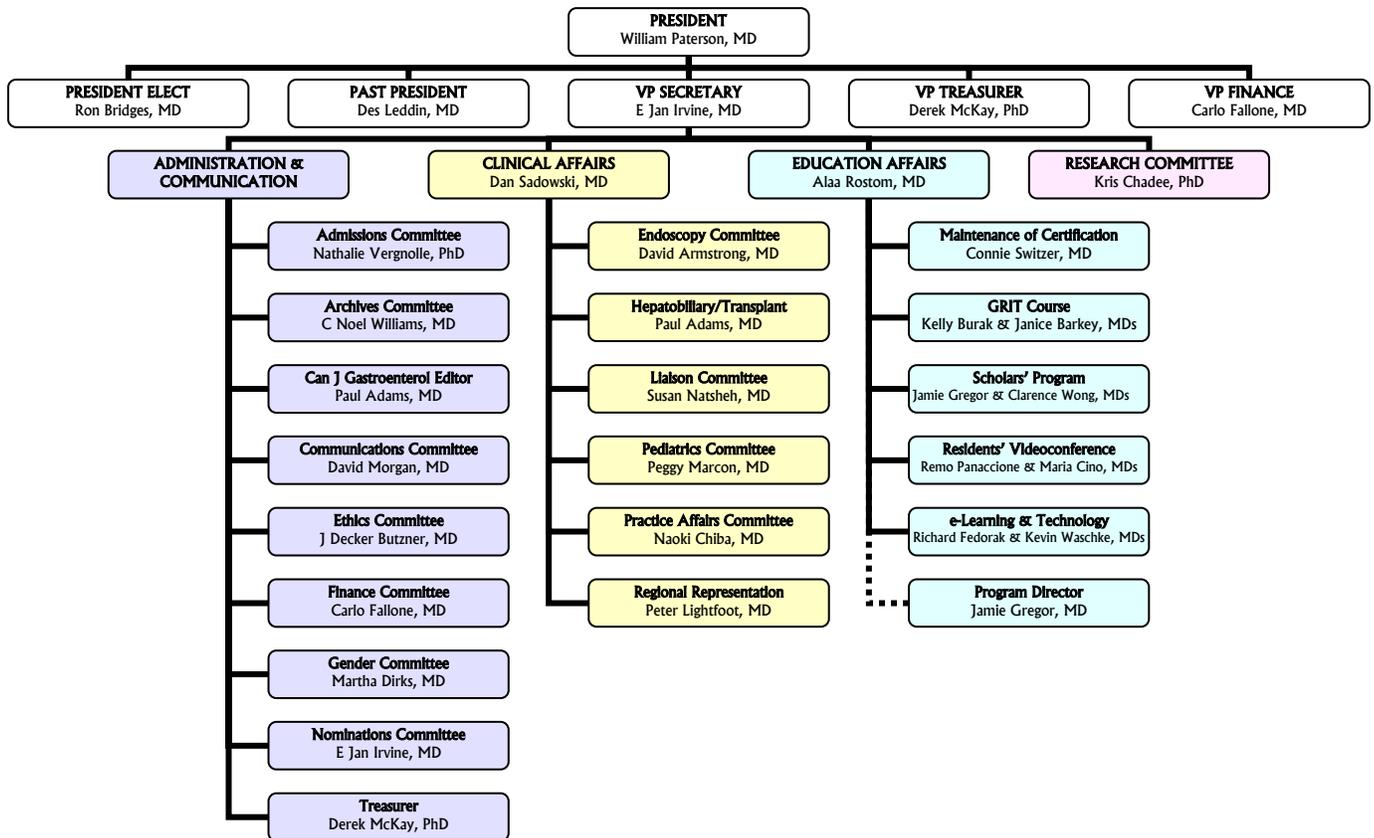
**VP Secretary, 2007-2012**  
**E Jan Irvine, MD, FRCPC, MSc**  
Professor of Medicine  
University of Toronto  
Toronto, Ontario



**VP Treasurer, 2006-2011**  
**Derek M McKay, PhD**  
Canada Research Chair in Intestinal Immunophysiology  
in Health and Disease, University of Calgary  
Calgary, Alberta

# Canadian Association of Gastroenterology Governing Board

The governing board includes the executive, the chairs of the various CAG committees, and the editor of the Canadian Journal of Gastroenterology. The board meets twice a year – at the annual CDDW meeting and again in the autumn – to review developments in the organization, coordinate efforts on projects, and plan the future.



## CAG at a glance

**Established:** 1962

**Goals:** To support and engage in the study of the digestive tract in health and disease  
To promote the advancement of the science and art of gastroenterology by providing leadership in patient care, research, teaching and continuing professional development  
To promote and maintain the highest ethical standards

**Members:** 1125 members and growing

**Constituency:** Gastroenterologists, surgeons and other physicians, basic scientists, nurses, technicians, research fellows, residents, medical and other students, government and industry

# Canadian Association of Gastroenterology Website

The CAG website is the communication portal to the membership and beyond, offering an extensive amount of information and a high level of functionality. Some of the many services available include:

- ❖ Online abstract submission and registration for CDDW and other meetings
- ❖ Online creation of maintenance of certification certificates for attendees of CAG-sponsored and accredited events
- ❖ Access to over 250 educational lectures, workshops, and symposia sessions with a free CD-ROM
- ❖ Applications for and information regarding accreditation of educational events
- ❖ Information on the gastroenterology residents' monthly basic science videoconference series
- ❖ Links to key national and international professional sites and congresses, and online journals and journal searches
- ❖ Postings of jobs offered and jobs wanted for members
- ❖ What's New section and CAG News Pages keep members apprised of developments and opportunities
- ❖ CAG clinical practice guidelines and consensus statements in gastroenterology and hepatology
- ❖ Opportunities for members to post their own research surveys or take part in those of others
- ❖ Members' side provides access to a directory and information specific to the membership
- ❖ Contact information for CAG executive and a listing of board members
- ❖ Applications for, and information on, numerous research awards including fellowships, grants and student scholarships

This year the website is being completely redesigned to be more user-friendly, provide additional functionality and better serve the changing needs of members. New functionality will include the ability for members to pay their yearly membership fee online and for CAG staff to directly make updates to the site in real-time, thus removing the cost and delay in working through a webmaster. We are excited about the new website and look forward to launching it later in 2007.

# Canadian Association of Gastroenterology National Office



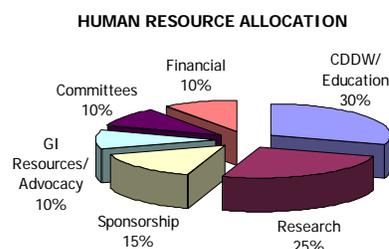
2902 South Sheridan Way  
Oakville, Ontario

Welcome to 2902 South Sheridan Way in Oakville, the home of the CAG National Office. National office staff includes executive director Paul Sinclair (left), manager Sandra Daniels (left centre), project coordinator Louise Hope (right centre) and administrative assistant Karen Moricz (right).



## What Does the CAG National Office Do?

The national office works with the 22 board members and related committees to support initiatives and achieve the goals of the Association. Central to the organization is the executive director, whose roles include strategic planning and fundraising, advising the executive on a daily basis on key issues, 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.



### CDDW/Education

For 2007 CDDW and 3<sup>rd</sup> Annual CASL Winter meeting approximately 279 accepted abstracts were sorted and laid out for final program, and office staff liaised with the approximately 200 speakers and co-chairs to solidify the program. The staff works behind the scenes to direct the conference planner and manage details on a weekly basis between the kickoff of planning each spring and the close of meeting finances the following May.

As a Royal College of Physicians and Surgeons of Canada-approved national provider of accredited gastroenterological education the CAG annually accredits many local meetings such as the Kelowna Digestive Diseases Weekend. In addition, RCPSC co-sponsored events - in which the 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 Committee.

### Research

In 2007, 19 fellowships or grants of predominantly two to three years duration (42 funding years) were awarded. The executive director liaises with government agencies such as the CIHR and manages the over 50 ongoing fellowships, grants and studentships.

### Sponsorship

Since the CDDW is run as a minimal profit event, funds to run the Association are raised through corporate sponsorship. In 2007, 18 companies, including 10 benefactor sponsors, fund the CAG.

### Gastroenterology Resources/Advocacy

The Human Resource Planning Project has quantified the number of practising gastroenterologists in Canada, along with actual and medically-acceptable maximal wait times for digestive health care, as the basis for advocacy initiatives.

### Committees

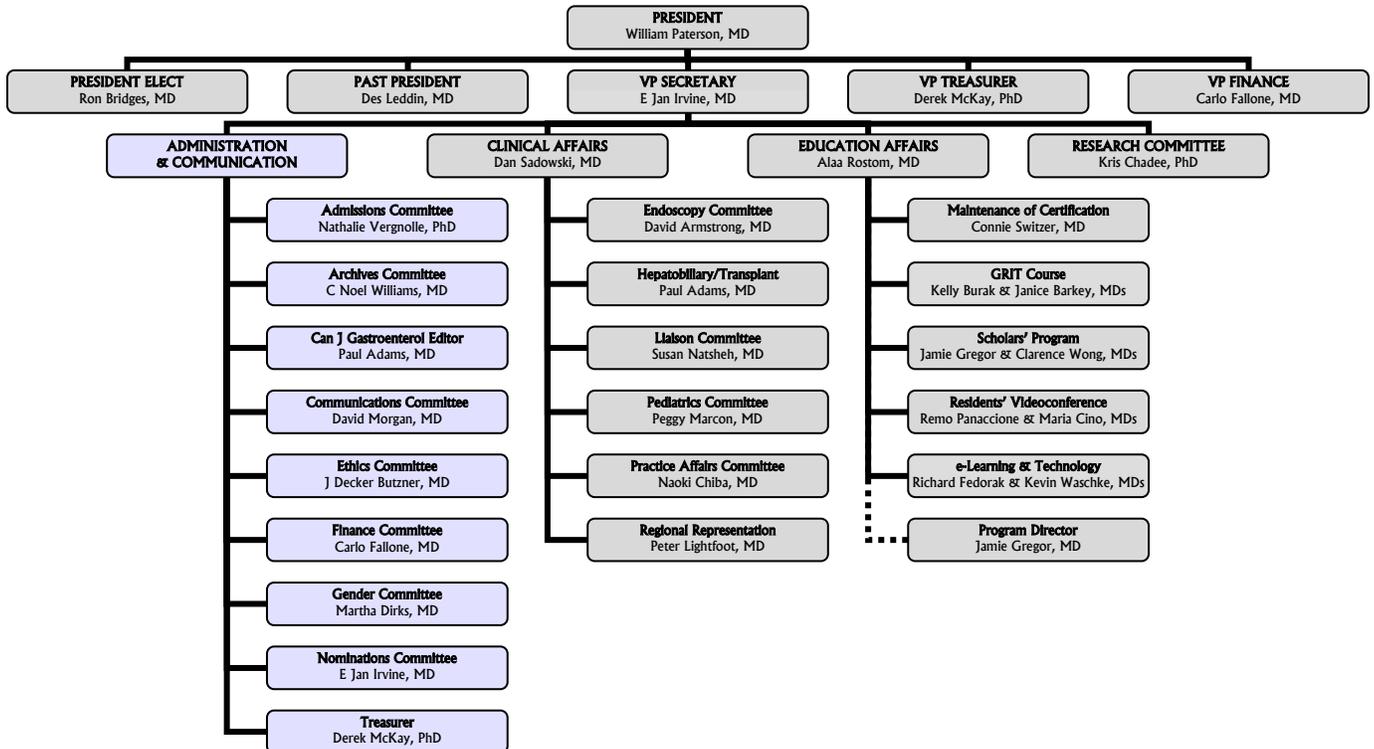
The national office provides continuous guidance and support to the 22 board members and their committees, and plays an active role in 40 on-site meetings (board, executive, committees, sponsors, etc.) held during the week of CDDW. On behalf of the Admissions Committee, 143 applications were processed in 2006.

### Financial

Strategic planning and fundraising efforts of the executive, executive director, and finance committee have succeeded in raising \$3.4 million in revenue in 2006 (up from \$1.5 million in 2000).

# Canadian Association of Gastroenterology Administration and Communication

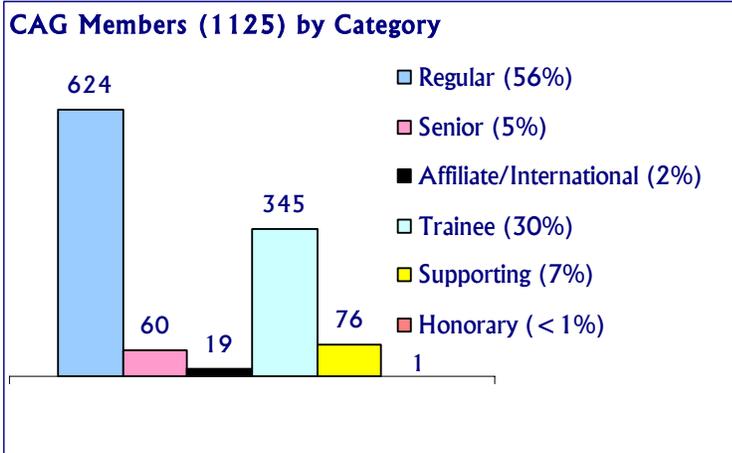
The administrative aspects of the Canadian Association of Gastroenterology (CAG) are some of the most critical, supporting the structure and ensuring the viability and growth of the organization. The nine committees or positions that comprise Administration and Communication reflect the Association’s philosophy of accountability, transparency and effective communication. These include the committees of Archives, Admissions, Communications, Ethics, Finance, Gender and Nominations, and the positions of Treasurer and Canadian Journal of Gastroenterology Editor. A brief description of each committee or position is given below.



- Admissions**    Reviews and approves applications for membership from professionals in gastrointestinal health and disease.
- Archives**     Maintains the records and history of the CAG.
- CJG Editor**    Reviews and promotes submissions to the Canadian Journal of Gastroenterology, the official journal of the CAG and the Canadian Association for the Study of the Liver (CASL).
- Communications**    Reviews and advises on print and electronic publications of the Association including the website.
- Ethics**        Establishes guidelines for ethical standards in patient care, research, education, and industry interactions.
- Finance**        Together with the national office and executive strategizes and implements fundraising for corporate sponsorship and key initiatives such as Canadian Digestive Diseases Week (CDDW) and research.
- Gender**        Examines issues of gender as they relate to gastroenterology in Canada.
- Nominations**    Annually recommends replacement committee members and councilors for consideration by the governing board and membership. Members are strongly encouraged to become involved in their organization.
- Treasurer**     Together with the accountant is responsible for reporting details of annual revenues and expenditures.

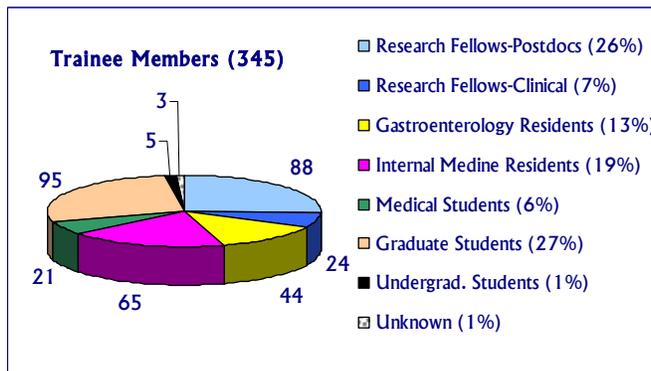
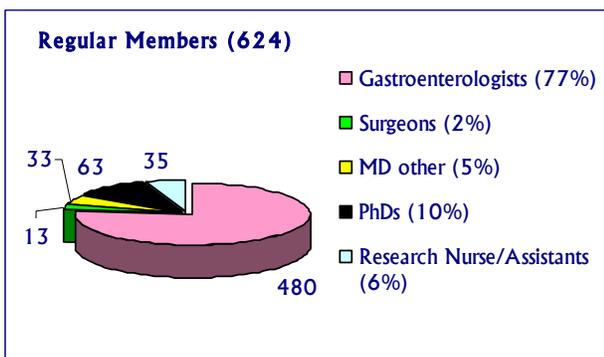
## Who is the Canadian Association of Gastroenterology? Admissions Committee Report

The CAG is a multi-disciplinary organization comprised of varied health professionals and expertise including physicians and basic scientists. Six categories of membership exist to meet the differing needs of those with an interest in gastroenterology, gastrointestinal sciences and digestive health.



### Membership Categories

- Regular:** Physicians, scientists, nurses, technicians
- Senior:** Members 65 years of age or older
- Affiliate/International:** Those outside Canada
- Trainee:** Research fellows, residents, graduate & undergraduate students
- Supporting:** Industry & government
- Honorary:** Physicians & scientists who have attained pre-eminence in gastroenterology



Membership offers exceptional value including free registration for CDDW\*, a complimentary subscription to the Canadian Journal of Gastroenterology and notices of educational events and research funding opportunities.

If you have an interest in digestive health and disease and are not already a member, consider joining your colleagues in the CAG. More information on membership can be found on the website ([www.cag-acg.org](http://www.cag-acg.org)).

\* Affiliate/International Members pay reduced CDDW registration



Dr Nathalie Vergnolle  
Chair, Admissions Committee

### Admissions Committee 2007-2008

Nathalie Vergnolle, PhD (Chair)  
University of Calgary  
Term: 2005-2008

Edmond-Jean Bernard, MD, MSc  
Université de Montréal  
Term: 2005-2008

Suraj Unniappan, PhD  
York University  
Term: 2007-2010

Veronica Swystun, PhD  
University of Calgary  
Trainee member

## Archives Committee Report

### Milestones in the CAG and Canadian Gastroenterology

- 1962** Incorporation of the CAG as a multi-disciplinary organization of 55 members
  
- 1967** CAG officially requests that the Royal College of Physicians and Surgeons of Canada (RCPSC) establish gastroenterology as a recognized subspecialty of internal medicine
  
- 1971** First RCPSC examination in gastroenterology
  
- 1984** First CAG Postgraduate Course
  
- 1992** First CAG Gastroenterology Residents-in-Training course
  
- 1996** First CDDW is held in Banff, Alberta
  
- 2000** CAG National Office established
  
- 2001** CAG becomes the RCPSC-approved national body accrediting gastroenterological educational events
  
- 2004** Membership exceeds 1000
  
- 2007** CAG joins the Wait Time Alliance

The Archives Committee is charged with an important responsibility – that of maintaining the history and continuity of the organization. As one of the founding members of the Association, Dr Ivan T Beck was well placed to provide this service, which he faithfully did for many years. Dr Beck has also shared his knowledge of the Association and its sister organization, the Canadian Digestive Health Foundation, by documenting their histories as published in the Canadian Journal of Gastroenterology.

Since February 2004 Dr C Noel Williams has chaired the Committee and has been instrumental in converting the paper records of the CAG to electronic form. All of the archives have now been digitized and are stored on DVD in an easy-to-search format. During 2007 the Committee will be fine-tuning the content and access to the archives, and deciding on the selected key documents to be retained in hard copy.



### Archives Committee 2007-2008

C Noel Williams, MB FRCPC, MRCS, LRCP, FACG, FACP (Chair)  
 University of Alberta  
 Term: 2004-

Aubrey Groll, MB, ChB, FRCPC, FRCP  
 Queen's University  
 Term: 2006-2009

## Canadian Journal of Gastroenterology Editor

The official journal of the CAG and CASL, the Canadian Journal of Gastroenterology (Pulsus Group Inc.) showcases Canadian research and issues relevant to gastroenterologists in this country. The CAG News Page is a standing element in each issue and keeps members in touch with initiatives of the Association. The Editor-in-Chief of the Journal is also a member of the CAG governing board, a position currently held by Dr Paul Adams of the University of Western Ontario.

Since Dr Adams has been Editor he has revitalized the Journal. An electronic submission system has been instituted and new features introduced including an endoscopy article in every issue and an interview with the Editor on a topic of broad appeal. Key strategic directions involve a greater clinical focus (non-human research studies are no longer accepted) and outreach to the readership. The average timeline for an accepted article is 33 days, and for a rejected submission is 14 days. Dr Adams is supported by Associate Editors Drs Marc Bilodeau, Rob Enns, Jamie Gregor, Paul Marotta, Jack McDonald and Eric Yoshida.

The Dr ABR Thomson/Dr CN Williams Award was established by the Journal in 2001 to recognize the best original article published in the previous year. The Journal also publishes supplements and proceedings of various scientific symposia that are of interest to the gastroenterology community, and abstracts for the annual meetings of its two major societies. In 2006 Pulsus redesigned their website and the look of the Journal.



Dr Paul Adams  
Editor, Canadian Journal of Gastroenterology

## Communications Committee Report

The Communications Committee oversees all paper and electronic publications of the Association, including the Canadian Journal of Gastroenterology, and the CAG website.

The CAG website is the key vehicle for communication between the governing board and its committees and the membership. The website continues to be strongly supported by members and receives a large number of hits each month from visitors around the world. It is clearly an important tool since it provides an opportunity for the CAG to promote its activities and receive support from interested parties.

Given its importance to members and as the face of the Association, the board in 2006 made redesign of the website a priority. The Communications Committee and national office staff are currently working with a website design firm to build the structure, functionality and look of the new site.



Dr David Morgan  
Chair, Communications Committee

### COMING SOON – A fresh new website!



New functionality will include a system for secure, online payment of membership fees, and the ability for national office staff to directly update web pages instead of incurring webmaster fees. The latter feature is especially attractive, not only from a cost savings perspective but also in allowing for real-time postings. In addition, the site will more logically group related information and will be easier to navigate with the drop-down menus and a site map.

Members may look forward to exploring their updated and enhanced website later this year when it is launched.

### Communications Committee 2007-2008

David Morgan, MD, FRCPC, MSc (Chair)  
McMaster University  
Term: 2005-2008

Jacob Louw, MBChB, PhD, MMed, FRCSA, FRCPC  
Queen's University  
Term: 2005-2008

Leanna McKenzie, MD, FRCPC  
Alberta Children's Hospital  
Term: 2007-2010

Philip Wong, MD, FRCPC, CSPQ  
University of Toronto  
Term: 2005-2008

Keith Tsoi, MD  
University of Toronto  
Trainee member

Paul Adams, MD, FRCPC, ABIM  
University of Western Ontario  
Ex-Officio member as the editor of the  
Canadian Journal of Gastroenterology

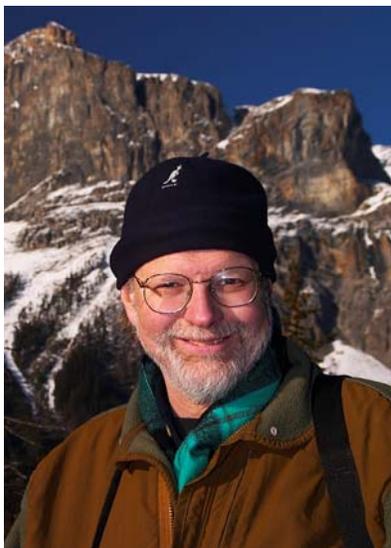
Ann Leblanc  
Pulsus Group Inc.  
Ex-Officio member, VP Pulsus Group Inc.  
(Can J Gastroenterol publisher)

## Ethics Committee Report

The Ethics Committee establishes guidelines for ethical standards pertaining to patient care, research, education, industry, the public, government and society.

In 2004 this involved reviewing and revising CAG procedures and forms in light of new privacy legislation that requires organizations to keep confidential all personal information provided by its members unless authorized otherwise, and to disclose how this information will be used. The Ethics Committee developed the CAG Privacy Policy (posted on the CAG website) related to personal information collected through membership applications and renewals.

In 2005, the issue of disclosure of speakers' potential conflicts of interest came to the fore. In February the New England Journal of Medicine published a Perspective on the new standards to ensure the independence of continuing medical education activities that were established by Accreditation Council for Continuing Medical Education (ACCME), which requires relevant financial relationships within the last 12 months to be disclosed and for conflicts of interest to be resolved before the educational activity occurs. Conflict of interest may be resolved in one of three ways: finding another speaker, assigning the speaker to a different topic or having an effective peer review of the content of the talk or written material.



Dr J Decker Butzner  
Chair, Ethics Committee

A survey conducted and published in October 2005 by the journal Nature noted that of more than 200 prescription guidelines only 90 contained details about authors' conflicts of interest, and of those, just 31 were free of industry influence.

In November 2005 the Canadian Medical Association Journal announced that it will not accept for publication consensus statements, narrative reviews, commentaries and similar types of articles that recommend drugs, devices, laboratory tests or other interventions for which at least one of the authors has a significant financial conflict of interest. It remains to be seen if the RCPSC moves to adopt a similar policy.

The Ethics Committee has drafted disclosure guidelines for CAG members and speakers at CAG events along with a revised financial interest disclosure form. These documents will be finalized later this year and used in conjunction with the 2008 CDDW and other CAG educational events.

### Ethics Committee 2007-2008

J Decker Butzner, MD, FRCPC (Chair)  
University of Calgary  
*Term: 2004-2008*

Annie Beaudoin, MD, FRCPC  
Centre Hosp. Universitaire de Sherbrooke  
*Term: 2007-2010*

Philip Blustein, MD, FRCPC  
University of Calgary  
*Term: 2007-2010*

Sylviane Forget, MD, FRCPC, PhD  
McGill University  
*Term: 2005-2008*

Penina Krongold, MD  
University of Calgary  
*Trainee member*

## Finance Committee & Treasurer's Report

The Finance Committee, in collaboration with the national office, is responsible for raising funds from corporate partners to support CDDW costs, research awards, and the day to day running of the organization (corporate sponsorship). The Treasurer works with the Association's accountant to review and report the details of annual revenues and expenditures. The CAG's fiscal year is July 1<sup>st</sup> through June 30<sup>th</sup>, thus financial statements are available to the board in the autumn and are subsequently presented to the membership at the February annual general meeting for review and approval.

The CAG's Corporate Sponsorship program was created in response to the recommendation from industry partners to separate organizational costs from those of CDDW, so that the latter is run as a minimal profit event. The corporate sponsorship levels of BENEFACTOR, PARTNER and SUPPORTER support daily operation of the national office (rent, website, staff, operating expenses) and important initiatives, such as educational programs and guideline development, that are not funded by other sources.

The CAG executive and board have charged the Finance Committee with expanding and diversifying financial support beyond pharma and medical instrumentation companies. The Association has taken the first step in this direction with the Corporate and CDDW sponsorship from Edward Jones, and other non-pharma partnerships are currently under discussion.

We would like to take this opportunity to recognize and thank our corporate sponsors, as listed on page 31, for their continued support of the Association.



Dr Carlo Fallone  
VP Finance & Chair, Finance Committee



Dr Derek McKay  
VP Treasurer

### Finance Committee 2007-2008

Carlo Fallone, MD, FRCPC, AGAF (Chair)  
McGill University  
*Term: 2005-2010*

Don Daly, MD, FRCPC, FRCPC  
Victoria, British Columbia  
*Term: 2005-2008*

Anthony Nestel, MB, ChB, FCPSA, FRCPC  
Bridgewater, Nova Scotia  
*Term: 2006-2009*

Herbert Brill, MD  
McGill University  
*Trainee member*

## Gender Committee Report



Dr Martha Dirks  
Chair, Gender Committee

The Gender Committee examines issues of gender within gastroenterology in Canada, and specific issues faced by women affected by gastrointestinal and liver diseases. Currently, approximately 34% of CAG members are women. The proportion of women varies by membership category as shown below.

| Membership Category     | Women (%) |
|-------------------------|-----------|
| Trainees                | 46%       |
| Supporting              | 45%       |
| Regular                 | 28%       |
| Senior members          | 3%        |
| Affiliate/International | 23%       |

As indicated by the statistics above, the demographic profile of the membership will likely change over the coming years as more trainees complete their training and enter into practice. In turn, membership needs and issues may change to include more gender-related issues. A survey of the membership was conducted in 2001 by the committee chair at the time, Dr Jenny Heathcote. The Committee plans to analyze the results and conduct an electronic survey in the near future to identify gender-related issues deemed important by the membership. This will serve to guide future initiatives and directions for the committee.

At CDDW 2006 the Gender Committee organized a symposium titled 'Issues and Challenges for Women in Gastroenterology' that examined the Canadian landscape of women in gastroenterology, gender equity in academic medicine and the community perspective on women in gastroenterology. A subsequent cocktail reception provided an opportunity for networking, and was found to be informative by attendees. For CDDW 2007 the Committee organized a small group session on 'Gender Issues in Gastroenterology'.

### Gender Committee 2007-2008

Martha Dirks, MD, FRCPC (Chair)  
Université de Montréal  
*Term: 2007-2010*

Johane Allard, MD, FRCPC  
University of Toronto  
*Term: 2007-2010*

Helga Witt-Sullivan, MD, FRCPC  
McMaster University  
*Term: 2005-2008*

Sapna Makhija, MD  
University of Calgary  
*Trainee member*

## Nominations Committee Report

Members of the Association are encouraged to become involved in their organization to help promote its development and gastroenterology in Canada. Any CAG member may put his or her name forth or may nominate another member to serve on a committee for a three-year term. Candidates are reviewed by the Nominations Committee, which considers expertise, geographic location, gender, seniority and constituency (hepatology, basic science, etc.) in order to balance these factors. The Committee recommends candidates to the governing board and the names of those approved by the board are circulated to the membership. Candidates are officially approved at the annual general meeting and thereafter begin their three-year term. Individuals who actively contribute as members may subsequently be nominated to chair a committee. In 2006 the governing board moved to include a trainee member on each CAG committee, as a means of growing the next generation of CAG leadership.



Dr E Jan Irvine  
VP Secretary and  
Nominations Committee Chair

### Role of the VP Secretary

In addition to chairing the Nominations Committee, the VP Secretary takes part in quarterly executive teleconferences to help decide both the day-to-day and long-term directions of the organization. The VP Secretary is responsible for reviewing and approving minutes from board meetings and annual general meetings, and correspondence to new and exiting committee members. The VP Secretary also secures awards for CAG award winners (e.g., McKenna Memorial Lecturer, CAG Research and Education Awards) and outgoing governing board members as presented in the yearly Award Ceremony at CDDW.

### Nominations Committee 2007-2008

E Jan Irvine, MD, FRCPC, MSc (Chair)  
University of Toronto  
*Term: by position as VP Secretary*

Ron Bridges, MD, FRCPC  
University of Calgary  
*Term: by position as President-Elect*

Martha Dirks, MD, FRCPC  
Université de Montréal  
*Term: by position as Gender Chair*

Peter Lightfoot, MD, FRCPC  
Moncton, New Brunswick  
*(Regional Representation representative)*

William Paterson, MD, FRCPC  
Queen's University  
*Term: by position as President*

Maida Sewitch, PhD  
McGill University  
*Term: 2007-2008 (member at large nominated from floor of AGM)*

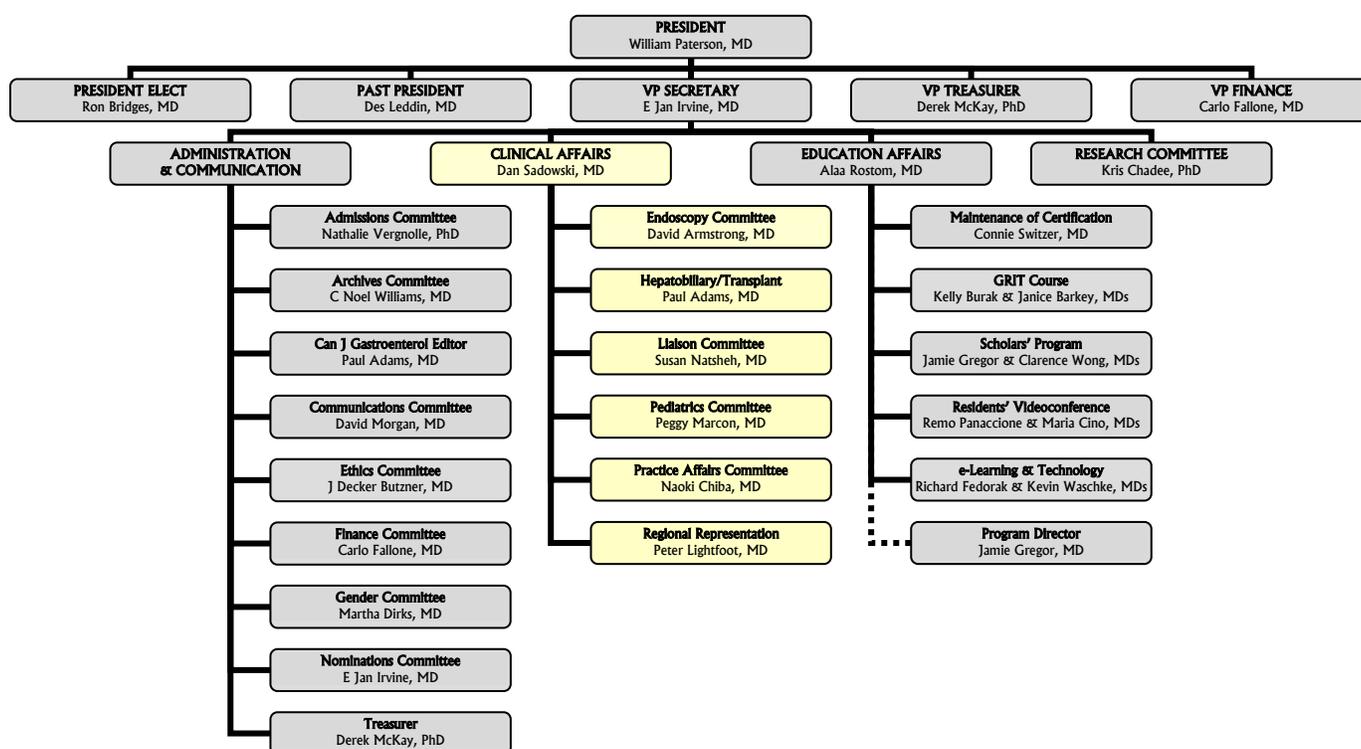
# Canadian Association of Gastroenterology Clinical Affairs



Dr Dan Sadowski  
Chair, Clinical Affairs

With gastroenterologists and their trainees comprising the largest group within the membership, Clinical Affairs and its various committees are at the core of the Association. Focused on issues related to patient care, Clinical Affairs encompasses the Endoscopy, Hepatobiliary/Transplant, Liaison, Pediatrics, Practice Affairs and Regional Representation Committees.

The role of the Chair of Clinical Affairs is to enhance the ability of the Canadian Association of Gastroenterology (CAG) 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. In this role Dr Dan Sadowski facilitates communication between the various committees and coordinates special initiatives.



**Endoscopy** Represents the CAG on matters relating to endoscopists and promotes competence and training in endoscopy.

**Hepatobiliary/Transplant** Addresses issues and medical education related to the hepatic and biliary systems and transplantation. The committee also liaises with the Canadian Association for the Study of the Liver (CASL) and related societies.

**Liaison** Communicates and collaborates with national and international organizations.

**Pediatrics** Represents the interests of pediatric gastroenterologists to the CAG board and membership.

**Practice Affairs** Addresses issues relevant to practising gastroenterologists.

**Regional Representation** Facilitates communication with provincial and regional gastroenterology organizations.

# Endoscopy Committee Report

Representing the Association on matters relating to endoscopists and promoting competence and training in endoscopy summarizes the mandate of the Endoscopy Committee. The Committee has been extremely active in 2006/2007, with its major focus being on quality assurance.

## Quality Assurance (QA) in Endoscopy – Pilot Program

The U.K. has been at the forefront of the quality movement, having implemented a nationwide QA program in gastrointestinal endoscopy which encompasses training for endoscopists and for endoscopy trainers, and a comprehensive, web-based endoscopy service evaluation tool – the Global Rating Scale (GRS). The GRS evaluates multiple components of endoscopy service delivery, emphasizing patient-focused aspects including patient satisfaction, successful completion of endoscopy, complication rate monitoring, outcomes and resource utilization as it relates to improving access.



Dr David Armstrong  
Chair, Endoscopy Committee

A pilot QA program, based on a Canadianized version of the GRS will be piloted during 2007-2008 at 10-20 community- and academic-based endoscopy units across Canada. The success of the pilot will determine the feasibility of a broader roll-out of the QA program as a means of achieving several key goals:

1. To develop a mechanism for continuous quality improvement in the delivery of endoscopy services in Canada.
2. To demonstrate that gastroenterologists provide quality care and quality endoscopy with available resources.
3. Based on the above, to advocate for additional resources and increased numbers of gastroenterologists.
4. To allow gastroenterologists to obtain a 'quality endorsement' for their endoscopy practice or for their endoscopy unit.
5. To support communication/liaison between gastroenterologists and endoscopy nursing staff and endoscopy unit managers, to improve the overall quality of endoscopy service delivery.
6. To demonstrate that a global assessment of endoscopy services can lead to improvements in specific outcome measures such as patient satisfaction, wait-times and resource utilization.

## Credentialing Guidelines on Endoscopic Privileges

The Endoscopy Committee is close to finalizing six publications: one on general credentialing principles and five relating to credentialing for sigmoidoscopy, colonoscopy, endoscopic ultrasound (EUS), endoscopic retrograde cholangiopancreatography (ERCP) and esophagogastroduodeno-scopy (EGD). The guidelines encompass previous studies and guidelines from other countries, providing an up-to-date summary of recommendations that institutions, organizations, and departments may use as a framework to assess the training and competence of physicians as part of the credentialing process for the granting of privileges

### Endoscopy Committee 2007-2008

David Armstrong (Chair), MB, BChir, MA,  
FRCPC, FACP, FRCP(UK), AGAF  
McMaster University  
Term: 2006-2009

Anil Bedi, MD, FRCPC  
University of Saskatchewan  
Term: 2005-2008

Michael Byrne, MD, FRCPC, MRCP, MA  
University of British Columbia  
Term: 2006-2009

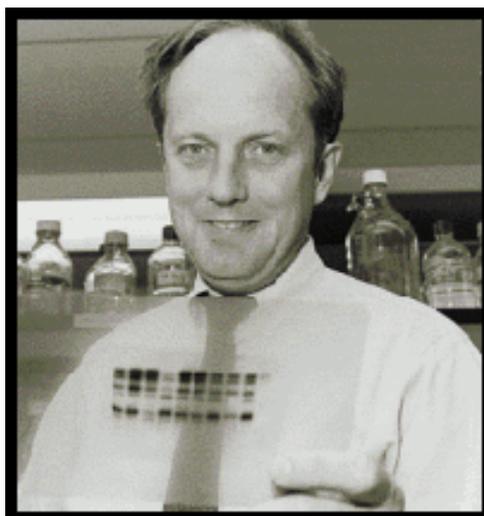
Sylvie Gregoire, MD, FRCPC  
University of Ottawa  
Term: 2005-2008

Gary May, MD, FRCPC  
University of Toronto  
Term: 2006-2009

Jamie Newman, MD, BA, FRCPC  
McMaster University  
Trainee member

## Hepatobiliary/Transplant Committee Report

The Hepatobiliary/Transplant Committee has not met in the last year. Its mandate is to provide advice and guidance to the governing board in issues related to its activities in education, research and political/public education as they relate to the field of hepatobiliary medicine, surgery, and transplantation. The chair has attempted to ensure that there are no conflicts in this area with the activities of the sister organizations, the Canadian Association for the Study of the Liver, and the Canadian Transplant Society. Although the structure of hepatology representation amidst the CAG may change in the next 12 months, the role of this committee has taken a more formal co-ordinating function with these sister organizations.



Dr Paul Adams  
Chair, Hepatobiliary/Transplant Committee

### Hepatobiliary/Transplant Committee 2007-2008

Paul Adams, MD, FRCPC, ABIM (Chair)  
University of Western Ontario  
*Term: 2006-2009*

Winnie Wong, MD, FRCPC  
University of Alberta  
*Term: 2005-2008*

Rania Rabie, MD  
Queen's University  
*Trainee member*

## Liaison Committee Report

The strategic aims of the Liaison Committee are to increase the CAG's national and international exposure, to have a voice among other national organizations, and to facilitate educational opportunities through affiliation with other organizations.



Dr Susan Natsheh  
Chair, Liaison Committee

### International Activities

For the past few years the International Gastroenterology Fellows Initiative has enabled fellows from developing countries to apply for one of two travel grants of up to \$3000 to facilitate attendance at Canadian Digestive Diseases Week (CDDW) and the Gastroenterology Residents-in-Training (GRIT) course. To date trainees from China, Nigeria, India and the Ukraine have benefited from this program.

As part of a continuing collaboration, the CAG was pleased to welcome the American Society for Gastrointestinal Endoscopy (ASGE) to the 2007 CDDW. The ASGE kindly staffed the six rotating modules of their learning centre thus providing delegates with additional educational opportunities.

### National Events

The Federation of National Specialty Societies of Canada (FNSSC) is a formal organization established in 2003 and composed of the majority of national specialty societies (<http://fnssc.ca/>). Thirty-nine different medical specialties, including the CAG, comprise the FNSSC and provide representation at the level of the Royal College of Physicians and Surgeons of Canada (RCPSC). The Liaison Committee provides a link to The FNSSC, which has begun to establish its identity and is increasingly gaining stature with the RCPSC. In 2006 the CAG's prominence within this organization expanded with the appointment of Liaison Chair Dr. Susan Natsheh to the FNSSC board of directors and Executive Director Paul Sinclair to the FNSSC management committee.

The Liaison Committee also participates on the Canadian National Medical Organization's Committee, an organization that obtains input from affiliated societies on Canadian Medical Association (CMA) activities. Through these two organizations, the CAG can bring up issues it feels are important to other medical organizations in the country and together try to achieve common goals.

During 2005/2006 the Liaison Committee lobbied the CMA and the FNSSC to expand the Wait Time Alliance and any potential funding to include gastrointestinal health care and wait times. These efforts, along with those of other FNSSC members, have been successful. In 2006 the CMA invited CAG President Dr William Paterson to be part of a task force to examine access to care in other medical specialties beyond the original five priority areas. In April 2007 the Wait Time Alliance welcomed the CAG as one of five new society partners – the so-called 'Wait Time Alliance Plus'.

### Liaison Committee 2007-2008

Susan Natsheh, MD, FRCPC (Chair)  
Saint John Regional Hospital  
*Term: 2005-2008*

Kathie Koziol, MD, FRCPC, MSc  
Saanich Peninsula Hospital  
*Term: 2005-2008*

Peter Rossos, MD, FRCPC  
University of Toronto  
*Term: 2005-2008*

Yvette Leung, MD  
University of Calgary  
*Trainee member*

## Pediatrics Committee Report

The Pediatrics Committee represents the interests of pediatric gastroenterologists and researchers on the CAG board and membership. The vision of the Committee has been to improve the health of Canadian children with gastrointestinal and liver disorders by the enhancement and support of internationally-recognized expertise in clinical care, education and research.

### Liaison with the Canadian Pediatric Society (CPS)

The CPS is an organization of 2500 pediatricians and pediatric trainees whose mandate is to support the health and well-being of Canadian children. Given shared interests in advocacy, education, research and health and wellness, the CAG Pediatric Committee has drafted a proposal for collaboration with the CPS which will be explored further during 2007/2008.



Dr Peggy Marcon  
Chair, Pediatric Committee

### Human Resource Report: Pediatric Gastroenterologists in Canada

Findings from the Committee's workforce study indicates that Canada has 64 pediatric gastroenterologists or 42 clinical full-time equivalents (FTEs) representing luminal gastroenterology (77%), hepatology (15%) and clinical nutrition (8%). The mean age of this workforce is 45.6 years and 50% is female. Comparison of adult workforce data with the number of pediatric gastroenterology fellows completing training in 2005, 2006, and 2007 has raised some concerns. Survey results show that most pediatric gastroenterologists do not feel there are enough specialists and given the high projected retirement rates the current supply is only expected to maintain the status quo. The aim of the human resource project is to predict the number of pediatric gastroenterologists required, based on actual clinical FTEs rather than absolute numbers, to ensure adequate recruitment of high-quality trainees to fill future positions.

### Wait Times for Pediatric Care

Plans are underway to examine wait times in pediatric gastroenterology, similar to what was done in the Practice Audit in Gastroenterology (PAGE) Wait Times audit in adult gastroenterology. New potential survey platforms are currently being evaluated by the PAGE committee, and with the identification of an appropriate medium the pediatric committee hopes to survey actual wait times at 10-20 centres across Canada.

### Pediatrics Committee 2007-2008

Peggy Marcon, MD, FRCPC (Chair)  
University of Toronto  
*Term: 2005-2008*

Susan Gilmour, MD, FRCPC  
University of Alberta  
*Term: 2006-2009*

Mohsin Rashid, MB, FRCPC  
Dalhousie University  
*Term: 2005-2008*

Veronique Morinville, MD  
McGill University  
*Trainee member*

## Practice Affairs Committee Report

The Practice Affairs Committee (PAC) provides a forum to address issues relevant to clinical members of the Association and thus is comprised of community-based practising clinical gastroenterologists or university-based gastroenterologists with a major clinical focus.

### Clinician's Professional Enrichment Grant

The PAC is pleased to annually offer an award designed to assist clinically-based gastroenterologists who are CAG members, take advantage of special educational and professional skill upgrading opportunities. The grant provides up to \$20,000 to offset travel, living and overhead expenses while awardees train to develop skills in areas such as endoscopic techniques and endoscopic ultrasound, capsule endoscopy, motility testing, inflammatory bowel disease clinical care, hepatology, clinical trials and nutrition.



Dr Naoki Chiba  
Chair, Practice Affairs Committee

### Terminology for Guidelines

Clinical Affairs has defined three types of CAG publications:

- 1) Consensus Guidelines
- 2) Position Statements (CAG opinion pieces about specific topics; one to two pages in length), and
- 3) Background Reviews (reviews the relevant literature which may or may not accompany a position statement; similar to American Gastroenterological Association technical reviews).

### Non-Steroidal Anti-Inflammatory Drug (NSAID) Consensus

Held in February 2007, the CAG Consensus Conference on the Use of Cyclooxygenase-2 Inhibitors (COX-2) and Conventional NSAIDs Including ASA involved 21 voting participants representing gastroenterology, rheumatology, cardiology and family practice, and the CAG Committees of Practice Affairs, Clinical Affairs and Education. A manuscript is currently being prepared for submission later this year.

### CAG Position Statements

In November 2006 Clinical Affairs published a position paper on the efficacy, tolerability, and safety of commonly used preparations for colonoscopy (Can J Gastroenterol 2006;20:699-710) and two more position statements are planned over the coming year. Given questions from physicians and patients on use of proton pump inhibitors (PPIs) and increased risk of hip fractures, a position statement prepared by Drs. Paul Moayyedi and Ann Cranney (Rheumatology & Geriatric Medicine, University of Ottawa) is being prepared. In addition, a position statement on sedation with particular focus on propofol will be developed this year.

### Primary Care Physician Triage Forms

The Practice Affairs Committee is currently creating standard forms to guide family practitioners in referring patients for gastroenterology care.

### Practice Affairs Committee 2007-2008

Naoki Chiba, MD, MSc, FRCPC (Chair)  
Guelph, Ontario  
Term: 2006-2009

John Morse, MD, FRCPC  
Stanton Yellowknife Hospital  
Term: 2004-2007

Harminder Singh, MB, BS  
University of Manitoba  
Term: 2007-2010

Rob Enns, MD, FRCPC  
University of British Columbia  
Term: 2007-2010

Carla Nash, MD, FRCPC  
University of Calgary  
Term: 2006-2009

Gad Friedman, MDCM, FRCPC  
McGill University  
Term: 2007-2010

Pierre Paré, MD, FRCPC  
Université Laval  
Term: 2006-2009

## Regional Representation Committee Report

Members of the Regional Representation Committee include the president of each provincial or regional gastroenterology society or designate, and a representative from each province without a formal gastroenterology association. The Committee provides a venue for collective policy development and encourages the sharing of provincial practice guidelines and organizational policies. As a member of the governing board, the Committee Chair serves as a channel of communication between the CAG and the provincial gastroenterology associations.



Dr Peter Lightfoot  
Chair, Regional Representation Committee

The Committee met in November 2006 in Toronto and again at CDDW 2007 in Banff, with key issues for discussion being those outlined below.

### Human Resources in Gastroenterology

Next steps regarding the CAG's advocacy initiatives and the role of Regional Representation in taking the public relations message forward locally have been deliberated.

### Fee Schedules

The Committee discussed the usefulness of collecting data related fee schedules as a basis for understanding where each province sits, as well as obtaining data on procedures and other key statistics. The possibility of the CAG National Office becoming a repository for this information will be considered.

### Quality Assurance in Endoscopy

The Regional Representation Committee met with Endoscopy Committee representatives to discuss in detail the Global Rating Scale (GRS) and the feasibility of conducting a quality assurance program in endoscopy across Canada based on the GRS. Regional Representation provided useful feedback and was highly supportive, with members agreeing to participate in the pilot program (see Endoscopy Committee report for more details).

### Regional Representation Committee 2007-2008

Peter Lightfoot, MD, FRCPC (Chair)  
*Representing:* Atlantic Association of Gastroenterology and  
New Brunswick

David Goldenberg, MD, FRCPC  
*Representing:* Manitoba

James Gray, MD, FRCPC, ABIM  
*Representing:* BC Society of Gastroenterology

James McHattie, MD, FRCPC  
*Representing:* Saskatchewan

Connie Hoare, MD, FRCPC  
*Representing:* Prince Edward Island

Michael O'Brien, MD, FRCPC  
*Representing:* Atlantic Association of Gastroenterology and  
Nova Scotia

Victor Plourde, MD  
*Representing:* Association des Gastro-Entérologues du Québec

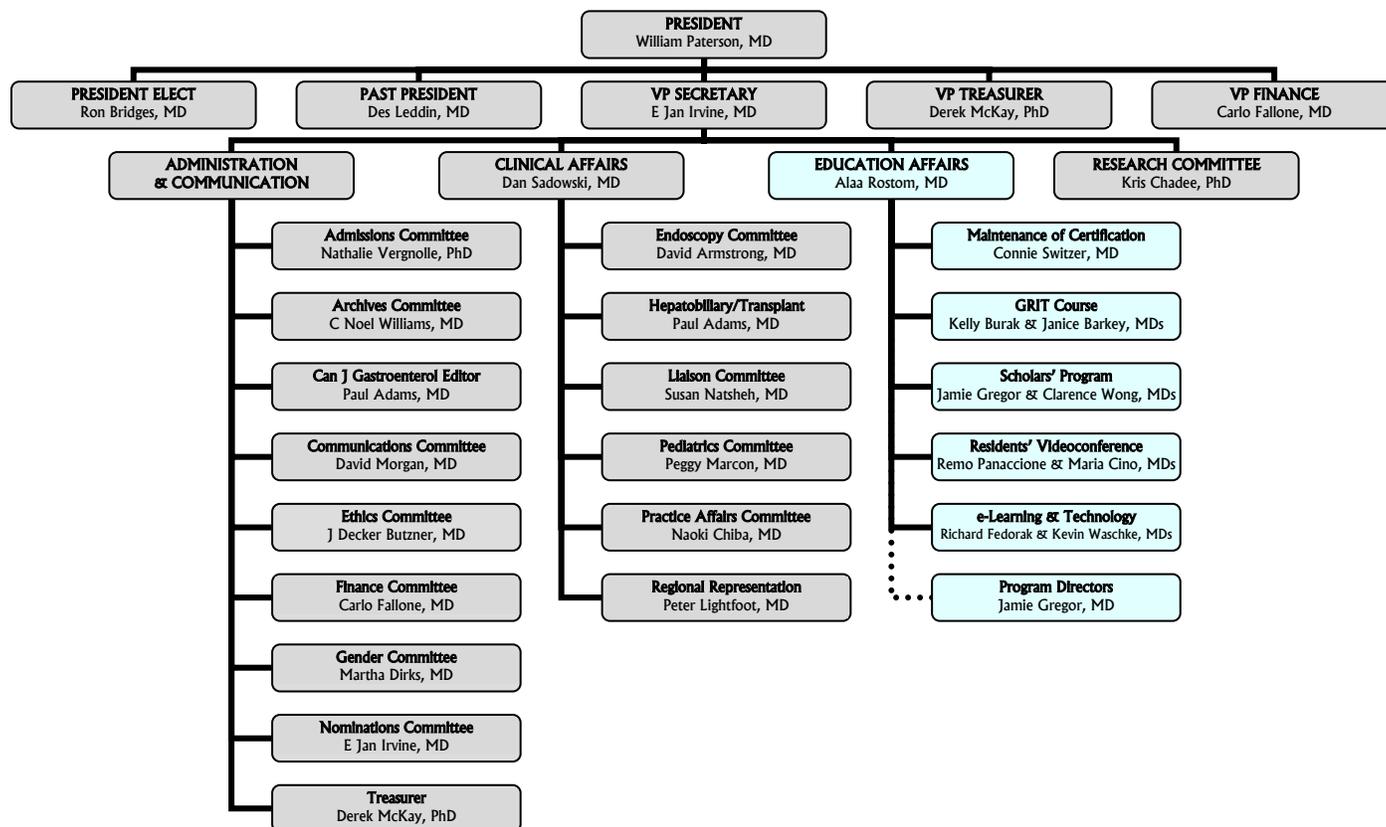
Ted Ptak, MD, FRCPC  
*Representing:* Ontario Association of Gastroenterology

Sylvain Coderre MD, FRCPC, MSc  
*Representing:* Alberta Society of Gastroenterology

Tony Tavenor, MD, FRCPC  
*Representing:* Newfoundland

Faisal Abaalkhaial, MD  
University of Western Ontario  
*Trainee member*

# Canadian Association of Gastroenterology Education Affairs



## Maintenance of Certification Committee

Reviews and approves submissions for Category 1 Royal College of Physicians and Surgeons of Canada (RCPC) accreditation of educational events.

## Gastroenterology Residents-in-Training (GRIT) Course Committee

Organizes a high caliber, internationally recognized annual training program for gastroenterology/hepatology residents held in association with Canadian Digestive Diseases Week (CDDW).

## Scholars' Program Committee

Organizes an annual course in association with CDDW that encourages third and fourth year medical students, and PGY1 and PGY2 internal medicine residents, to consider a career in gastroenterology/hepatology.

## Residents' Videoconference Committee

Organizes a monthly national videoconference with presentations from national and international experts.

## e-Learning & Technology Committee

Provides online/electronic educational materials for the general membership.

## Program Directors Committee

is appointed by the RCPC. Dr. Jamie Gregor is the Chair of the Specialty Committee in Gastroenterology.

## Education Affairs Report



Dr Alaa Rostom  
Chair, Education Affairs

Professional education has long remained a priority and strength of the Canadian Association of Gastroenterology (CAG) – a fact well recognized by the membership. A strategic planning survey showed that members rate CDDW as the most important CAG service, on par with Digestive Disease Week regarding its usefulness. Given the scope and importance of its activities, Education Affairs is divided into several committees, each with a specific mandate. Dr Alaa Rostom oversees CAG Education Affairs, providing direction to the various committees to facilitate educational program development for the Canadian gastroenterology community.

The CAG is the national body approved by the RCPSC to accredit gastroenterological continuing professional development activities. This is an increasingly important role as members turn to the CAG for assistance in fulfilling the maintenance of competency obligations set forth by the RCPSC. To this end, Education Affairs continues to work with various partners to develop and accredit educational programs that span RCPSC categories. New and innovative experiences, such as the Practice Audit in Gastroenterology (PAGE) program have been introduced, to further enhance learning opportunities for CAG members. The Interactive Lecture Series and Gastroenterology Residents' Videoconference provide ongoing educational opportunities with international experts.

The Gastroenterology Residents-in-Training (GRIT) Course, held in association with CDDW, continues to receive international acclaim and serves as a model for similar programs around the world. The Scholars' Program is designed to encourage trainees in the formative stages of medical training to consider a career in gastroenterology/hepatology.

Education Affairs recognizes education innovation and excellence. This year's Education Excellence Award was presented to Dr Alan Thomson, and the Young Educator Award was presented to Dr Jamie Gregor.

### Education Affairs 2007-2008

Alaa Rostom, MD, FRCPC, MSc (Chair)  
University of Calgary  
*Term: 2006-2009*

Kelly Burak, MD, FRCPC, MSc  
University of Calgary  
*Term: 2006-2008*

Dana Farina, MD, FRCPC  
Dalhousie University  
*Term: 2004-2009*

Supriya Joshi, MD, FRCPC  
The Credit Valley Hospital  
*Term: 2007-2010*

Craig Render, MD, FRCPC  
Kelowna General Hospital  
*Term: 2005-2008*

Kevin Waschke, MD, FRCPC  
McGill University  
*Term: 2006-2009*

Janice Barkey, MD, FRCPC  
University of Ottawa  
*Term: 2004-2009*

Maria Cino, MD, MSc  
University of Toronto  
*Term: 2007-2010*

Richard Fedorak  
University of Alberta

Gabor Kandel, MD, FRCPC  
University of Toronto  
*Term: 2005-2008*

Jeff Stal, MD, FRCPC  
University of Toronto  
*Term: 2005-2008*

Andrea Faris, MD  
University of Ottawa  
*Trainee member*

Collin Barker, MD, FRCPC  
BC Women's Hospital & Health Centre  
*Term: 2007-2010*

Mary-Anne Cooper, MD, FRCPC, MSc, Med  
University of Toronto  
*Term: 2007-2010*

Jamie Gregor, MD, FRCPC  
University of Western Ontario  
*Term: 2004-2009*

Remo Panaccione, MD, FRCPC  
University of Calgary  
*Term: 2006-2009*

Connie Switzer, MD, FRCPC, FRCPC  
University of Alberta  
*Term: 2006-2009*

Jennifer Williams, MD  
University of Calgary  
*Trainee member*

## Maintenance of Certification Committee Report

The role of the Maintenance of Certification Committee is to review and approve educational programs on behalf of the CAG in accordance with RCPSC guidelines. During 2005/2006, the RCPSC reviewed in detail the CAG's accreditation records and renewed the organization's status as an approved accreditor for another 5-year term.

Applications for accreditation of events may be submitted by physicians or industry and are reviewed and addressed by the committee within two to four weeks. In 2006, 21 programs were evaluated of which 20 were approved for a total of 123 hours of Category 1 (group learning activity) credit. The CAG evaluated and approved 35 hours of Section 1 credits for the CDDW 2006 educational program. The very successful CDDW 2006 drew over 600 attendees. The CAG accredits many small, annual meetings such as those of the Ontario Association of Gastroenterology, the Atlantic Association of Gastroenterology, and the Kelowna Digestive Diseases Weekend. In addition, there has been a significant increase in applications for RCPSC co-sponsored educational events in which the CAG works with industry to develop the educational program. Seven programs are in the works to date (CAG/Nycomed Peer I Program, CAG/AstraZeneca upper gastrointestinal bleeding program, CAG/Boston Scientific endoscopic oncology and endoscopic retrograde cholangiopancreatography programs, CAG/Nestle Transition of Care Program, CAG/Nycomed Peer 2 Program and CAG/Gilead Hepatitis B: New Strategies for patient Management).

The RCPSC requires that fellows maintain their certification through the continued pursuit of knowledge and expertise. To this end, the RCPSC has mandated that all fellows must complete at least 40 credit hours of professional development every year in order to remain on the RCPSC list of approved and accredited fellows. Fellows are automatically entered into the certification program on successful completion of their Fellowship training and examinations. The RCPSC uses a five-year cycle (*400 credit hours of professional development per five-year cycle*) for reporting and recording of credit hours. Fellows must submit their hours before the end of January for the previous calendar year in order to have their credits accepted by the RCPSC.

The RCPSC tracks participation rates across its many disciplines. Data for 2006 show that gastroenterology Fellows across the country are participating at a rate of 86% for active members and 77% for active senior members. Most Fellows claim credit hours in Category 1 credit (39%) with less credit hours being claimed for Categories 2 (22%), 4 (10%), and 6 (26%). The RCPSC is keen to see more uptake of credit hours in Category 4 (Personal Learning Projects) and Category 5 (Practice Audits).



Dr Connie Switzer  
Maintenance of Certification  
Committee Chair

Dr. Connie Switzer has been a consultant gastroenterologist at a community referral hospital for over twenty years. As Clinical Professor of Medicine she enjoys training new generations of physicians and gastroenterology specialists. Over the past many years she has volunteered her time and expertise to the Canadian Celiac Association (CCA) and was awarded the Queen Elizabeth II Golden Jubilee Medallion for her work with the CCA. While her main focus is in delivering high quality gastroenterology patient care she has also been very active in local, regional, provincial and national professional associations including roles in the CAG. One of her main interests is in improving educational opportunities in gastroenterology for physician colleagues and other health care professionals. This has led her to participate actively in the CAG as Chair of the Maintenance of Certification Committee and member of Education Affairs. Dr. Switzer encourages all members of the CAG to consider participation in this dynamic and important professional organization.

### Maintenance of Certification Committee 2007-2008

Connie Switzer, MD, FRCPC, FRCPC (Chair)  
University of Alberta  
Term: 2006-2009

Dana Farina, MD, FRCPC  
Dalhousie University  
Term: 2007-2009

Supriya Joshi, MD, FRCPC  
The Credit Valley Hospital  
Term: 2007-2010

Craig Render, MD, FRCPC  
Kelowna General Hospital  
Term: 2005-2008

Jeff Stal, MD, FRCPC  
University of Toronto  
Term: 2005-2008

Andrea Faris, MD  
University of Ottawa  
Trainee member

## GRIT Course Committee Report

Established in 1992, the highly successful Gastroenterology Residents-in-Training (GRIT) Course has become a yearly event under the auspices of the CAG, the Canadian Association of the Study for the Liver (CASL) and the Gastroenterology Training Program Directors Committee. Sponsored primarily by Fairmont and held directly before CDDW, the aim of the Course is to provide Canadian trainees in gastroenterology with an opportunity to expand their knowledge of selected topics in gastroenterology in a context that allows critical evaluation, while interacting closely with a small number of recognized, effective Canadian teachers. The impact of the GRIT Course has transcended borders; the organizers of the American Gastroenterology Fellows Course have used the course as a model and dozens of GRIT graduates have gone on to prominent positions at medical schools throughout Canada. Co-chaired in 2008 by Dr Kelly Burak and Dr Janice Barkey the Course represents a significant investment in gastroenterology trainee education, costing approximately \$2200.00 per attendee.

The GRIT Course continues to evolve, providing a wide range of educational formats that has proved to be very popular with attendees. Approximately 80 adult or pediatric gastroenterology trainees from accredited Canadian programs are invited, based on acceptance of a research or clinical abstract. All attendees present their project, either in poster format or at one of the oral plenary sessions, to develop their expertise at presentation in a non-threatening environment of their peers. The best oral and poster presentations are selected by both faculty and trainees and receive Gary Levy/Alan Thomson Awards (named in recognition of the course co-founders). Clinical problems, and the thought processes involved in solving clinical problems are highlighted in case-based, small group sessions, supported by case development and relevant formal lectures, led by faculty members. Other highlights of the program include a debate between faculty members (usually highly opinionated and humorous), the Ivan T Beck Lectureship (awarded annually, in honour of Professor Ivan Beck, to a distinguished clinician-scientist and educator – this year’s recipient being Dr Alan Thomson), and a State-of-the-Art symposium which exposes the trainees to cutting edge basic and clinical research. In 2008 the course will have a focus on medical education.



GRIT Course Co-Chairs  
Dr Kelly Burak (left)  
and  
Dr Janice Barkey (right)



### GRIT Course Committee 2007-2008

Kelly Burak, MD, FRCPC, MSc (Co-Chair)  
University of Calgary

Janice Barkey, MD, FRCPC, MSc (Co-Chair)  
University of Ottawa

Nicola Jones, MD, FRCPC, PhD  
University of Toronto (Evaluation)

Gary May, MD, FRCPC  
University of Toronto

Alaa Rostom, MD, FRCPC, MSc  
University of Calgary

Jennifer Williams, MD  
University of Calgary (Trainee member)

## Scholars' Program Committee Report



Dr Jamie Gregor  
Co-Chair, Scholars' Program

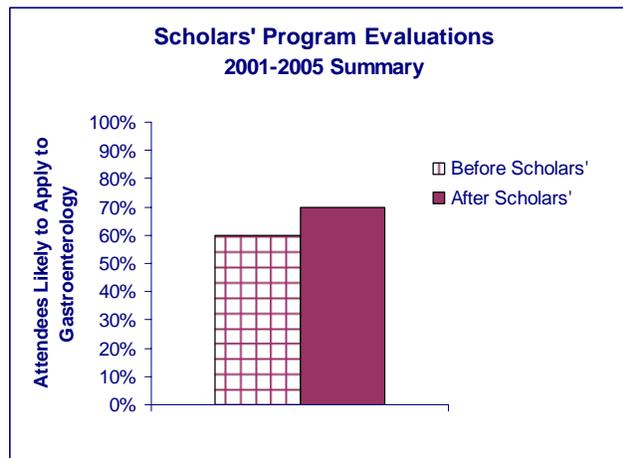


Dr Clarence Wong  
Co-Chair, Scholars' Program

The CAG Scholars' Program, co-sponsored by Nycomed, is designed to encourage third and fourth year medical students, and first and second year internal medicine residents, to consider a career in adult or pediatric gastroenterology. As with the GRIT course, the Scholars' Program is held in conjunction with and before CDDW. Participants are provided a view to the various careers that are possible in gastroenterology including basic science research, clinical research, community gastroenterology, and industry positions. The program also reviews ethical challenges in medicine, advances in gastroenterology, evidence-based gastroenterology and what it is like to be a gastroenterology fellow. Participants have the opportunity to interact in small groups and to test their skills with a simulator in the Endoscopy Challenge. The two-day intensive program allows students the chance to work with and learn from an internationally-recognized academic and clinical faculty who are respected leaders and role models in the field.

The Scholars' Program is limited to 32 participants with one to three applicants being accepted from 16 medical schools nationwide. Since its inception in 2001 the program has produced over 220 'graduates'. Feedback has been extremely positive with attendees praising both the speakers and the course content.

A survey of the past five years' delegates suggests that the Scholars' Program has succeeded in encouraging junior trainees to choose a career in gastroenterology



### Scholars' Program Committee 2007-2008

Jamie Gregor, MD, FRCPC (Co-Chair)  
University of Western Ontario

Clarence Wong, MD, FRCPC (Co-Chair)  
University of Alberta

## Gastroenterology Residents' Videoconference

The Gastroenterology Residents' Videoconference (VC) was born in 2002 in response to a perceived difficulty in running basic and clinical science rounds of sufficient breadth and depth as part of gastroenterology training programs across the country. With the sponsorship of AstraZeneca and under the guidance of Co-Chairs Drs Remo Panaccione and Maria Cino, a monthly VC is conducted from various centres of excellence. Support by university VC sites and attendance for sessions has been excellent and feedback from residents extremely positive.

Committee Members: Maria Cino, MD, MSc  
University of Toronto

Remo Panaccione, MD, FRCPC  
University of Calgary

## e-Learning and Technology

The CAG e-Learning and Technology Committee, previously overseeing the CAG Lecture Series, will now examine the broad portfolio of CAG education from a comprehensive e-learning & technology perspective. It is clear from the needs assessment that members learn in different ways and thereby require and wish educational materials to be delivered in various formats. In collaboration with the CAG Communications Committee, this committee will consider existing CAG educational content, as well as additional educational content, with the aim of providing the membership with a user friendly comprehensive educational toolkit.

Committee Members: Richard Fedorak, MD, FRCPC  
University of Alberta

Kevin Waschke, MD, FRCPC  
McGill University

## Practice Audit in Gastroenterology (PAGE) Program

The PAGE Program is a groundbreaking approach to continuing professional development, specifically practice audits. PAGE removes the burden of developing an audit protocol, eliminates paperwork and offers the benefits of real-time collection and review of data from many participants, all while earning Category 5 RCPSC credits.

Results of the first two programs, PAGE-Endoscopy and PAGE-Colonoscopy, have been reported (Can J Gastroenterol 2006;20:405-10). The third program, PAGE – A Week in the Life of a Gastroenterologist, had specialists record the time spent on various professional activities (clinical work, administration, research, teaching, etc.) for a one-week period.



The fourth PAGE program, Improving Access to Gastroenterology Services in Canada, ran from January through October 2005 and documented details of patient referrals for gastroenterology consultation or procedures over a one-week period. Findings were presented at the 2005 World Congress of Gastroenterology and 2006 CDDW, and indicate that Canadians across the country are waiting excessively long for specialist care. The CAG continues to use these data to lobby for government to including digestive disease in initiatives and funding to improve access to health care in Canada.



## CANADIAN DIGESTIVE DISEASES WEEK and the 4th ANNUAL CASL WINTER MEETING February 29<sup>th</sup>– March 3<sup>rd</sup> 2008 Fairmont Queen Elizabeth, Montréal, Québec

The CAG and CASL look forward to welcoming you to the joint 2008 CDDW and 4<sup>th</sup> Annual CASL Winter Meeting in Montréal, Québec. Drs Ron Bridges and Marc Deschênes are co-chairs of the 2008 Implementation Committee and are supported by a CAG and CASL core program committee in creating the scientific program.

CDDW and the CASL Winter Meeting showcase the best of Canadian gastrointestinal and hepatology research and provide a venue for colleagues to meet. Held at the Fairmont Queen Elizabeth in 2008, the meeting returns to Banff in 2009 and is slated for Toronto in 2010 and Vancouver in 2011. This year over 800 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 kick-off 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 to keep.

**Education Excellence Award Lecture** – Similar to the above but focusing on outstanding national or international educational contributions from a CAG member.

**Young Investigator Award Lecture** – Recognizes basic or clinical science contributions to gastroenterology from an Association member under 45 years of age or within seven years of first academic appointment.

**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** – Overwhelming popular since its introduction in 2003 these small group sessions provide interactive time with leaders in the field.

**Small Group Sessions** – First introduced in 2007 and following a similar interactive format as Breakfast with the Experts, small group sessions proved to be a big hit and will be offered again in 2008.

## Research Committee Report

Dr Kris Chadee, Professor in the Department of Microbiology and Infectious Diseases, Chair of the Gastrointestinal Research Group at the University of Calgary and Canada Research Chair in Gastrointestinal Inflammation, heads the Association’s Research Committee. The Committee is one of the busiest as shown by the listing of activities below:



Dr Kris Chadee  
Chair, Research Committee

### Fellowships & Grants Program – Investing in Canadian Researchers

The CAG/CIHR/Industry Research Program has been an overwhelming success and the pride of the CAG, its industry partners and the government’s Canadian Institutes of Health Research (CIHR). The program provides one to three years of funding to junior clinicians and PhD scientists studying gastrointestinal health and disease processes. For every dollar provided by a corporate partner, the CIHR provides matching funds. The accomplishments from the first ten years of this program are reported in the Canadian Journal of Gastroenterology (2003; 17: 437-439) and amount to funding for 87 researchers, to the tune of more than \$8.7 million.

For the 2007-2008 term, 14 postdoctoral fellowships and 5 research grants were awarded. For the Research Committee this involved assessment of 55 applications. Submissions are reviewed in advance and are subsequently discussed and scored by the Research Committee during a full day meeting held in November. The review process conforms to the guidelines, practices and standards set by CIHR. Candidates are notified of competition results in January and awardees are presented a certificate by the funding partner at Canadian Digestive Diseases Week (CDDW). The CAG is grateful to Abbott, AstraZeneca, Crohn’s and Colitis Foundation of Canada (CCFC), Ferring, Janssen-Ortho, Nycomed, Olympus and Schering for their sponsorship of these fellowships and grants.

### Summer Student Scholarships

This spring the Research Committee reviewed 23 applications and approved 18 summer student scholarships. Scholarships provide \$6,000 to support the four-month research project of an undergraduate student who is supervised by a CAG member. The Association appreciates the CCFC’s support of these awards.

### Resident Research Awards

Offered for the first time in 2004, these awards provide a foundation (\$5,000 each) for research training during residency in order to encourage continued involvement in research as a practicing clinician. Applications are reviewed and ranked, and candidates selected by the Research Committee. The CAG would like to thank Axcan, Procter & Gamble and Novartis for their sponsorship.

**Mandate** Promote basic and clinical science at all levels of the Association

|  |   |  |
|--|---|--|
| <p><b>Members</b> Kris Chadee, PhD (Chair)<br/>University of Calgary<br/><i>Term: 2005-2008</i></p> <p>Robert Hilsden, MD, PhD, FRCPC<br/>University of Calgary<br/><i>Term: 2007-2010</i></p> <p>Donna-Marie McCafferty, PhD<br/>University of Calgary<br/><i>Term: 2005-2008</i></p> <p>Mark Silverberg, MD, FRCPC, PhD<br/>University of Toronto<br/><i>Term: 2006-2009</i></p> <p>Elena Verdu, PhD<br/>McMaster University<br/><i>Trainee member</i></p> | <p>Francois Boudreau, PhD<br/>University of Sherbrooke<br/><i>Term: 2007-2010</i></p> <p>Jan Huizinga, PhD<br/>McMaster University<br/><i>Term: 2005-2008</i></p> <p>Thomaz Michalak, PhD<br/>Memorial University<br/><i>Term: 2007-2010</i></p> <p>Bruce Vallance, PhD<br/>University of British Columbia<br/><i>Term: 2007-2010</i></p> | <p>John Brumell, PhD<br/>University of Toronto<br/><i>Term: 2006-2009</i></p> <p>Karen Madsen, PhD<br/>University of Alberta<br/><i>Term: 2005-2008</i></p> <p>Paul Moayyedi, MBChB, FRCPC, PhD<br/>McMaster University<br/><i>Term: 2005-2008</i></p> <p>Stephen Vanner, MD, FRCPC, MSc<br/>Queen’s University<br/><i>CDHF Representative</i></p> |
|--|---|--|



## CDDW – Abstracts, Program Planning and More

While overall planning for CDDW is the task of the Implementation Committee, the Research Committee is responsible for specific tasks and events as noted below.

### Abstract Review

Over 280 abstracts were submitted for the 2007 CDDW and 3<sup>rd</sup> Annual CASL Winter Meeting by the October 15<sup>th</sup>, 2006 deadline. By December 1<sup>st</sup> these had been sorted, categorized, divided amongst CAG and CASL research committee members for review, and a total of 252 luminal abstracts accepted by the CAG Research Committee for poster or oral presentation. This feat was made possible only due to the efficiency of the process as coordinated by the Research Committee and the national office.

### Paper Sessions, Poster Sessions and Basic Science Symposia

The Committee is responsible for organizing and chairing the CAG Paper Sessions including selecting candidates for the four CAG/CCFC student prizes. Supporting the two Poster Sessions and helping develop the program for basic science symposia, including securing speakers and chairing the session also fall to the Committee.

### Review and Selection of Award Lecture Winners

The Research Excellence and Young Investigator Award Lectures and the CAG Visiting Professorship are standing elements of CDDW. Nominations for these awards are reviewed and decided by the Committee.



Recipients of the CAG student research prizes accept their plaques from Research Committee Chair Dr. Kris Chadee at CDDW 2007

## Research Topics in Gastrointestinal (GI) Disease

First held in 2001, the Research Topics in GI Disease meeting has become a yearly event. Basic science and clinical trainees including M.Sc and PhD students, gastroenterology residents and postdoctoral fellows are invited to submit abstracts on specified topics in gastrointestinal health and disease. The Research Committee reviews all abstracts and selects the top 30-40 based on scientific merit and topic relevance. Delegates come together for a weekend to present their research and meet and liaise with fellow students and faculty. An initiative of AstraZeneca Canada Inc. and the Association, Research Topics in GI Disease is accredited by the latter for Category 1 credits.

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The Canadian Association of Gastroenterology (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 operation of the CAG, inclusive of national office expenses and support for orphan programs not funded by other sources.

## Research

The CAG/CIHR Industry Research Program provides research funding to promising young pre-clinical and clinical scientists working in gastrointestinal health and disease. For each dollar committed by corporate partners the Canadian Institutes of Health Research (CIHR) provides matching funds. The CAG would like to thank Abbott, AstraZeneca, Axcan, Bristol-Myers Squibb, Crohn's and Colitis Foundation of Canada (CCFC), Ferring, Janssen-Ortho, Novartis, Nycomed, Olympus, Pentax, Procter & Gamble, Shire Biochem, Schering, and UCB for their vision in growing gastroenterology and gastrointestinal research in Canada.

## CDDW

Canadian Digestive Diseases Week (CDDW) is the annual educational event of the 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 our sponsors of CDDW 2007.