A luncheon celebrating women, health and equality

Obstetrical Content Review Committee showcased at Cochrane symposium

Aboriginal health: Youth voices for change

CFWH Mother’s Day card campaign
Upcoming clinical practice guidelines

Below is a tentative schedule for upcoming guidelines that will be published by the SOGC. Please note that the publication dates listed are subject to change. All guidelines are published in the Journal of Obstetrics and Gynaecology Canada (JOGC) and are available on the Society’s website, www.sogc.org.

April
• Substance Use in Pregnancy

May
• Ultrasonographic Cervical Length Assessment in Predicting Preterm Birth in Singleton Pregnancies
• Magnesium Sulphate for Fetal Neuroprotection

FDA warns against certain uses of asthma drug for preterm labour

The U.S. Food and Drug Administration has warned that terbutaline administered by injection or through an infusion pump should not be used in pregnant women for prevention or prolonged (beyond 48 to 72 hours) treatment of preterm labour, due to the potential for serious maternal heart problems and death. In addition, it says that oral terbutaline tablets should not be used for prevention or treatment of preterm labour. In the US, a boxed warning and contraindication to the drug prescribing information will be used to warn against these uses.

2011 AD CAMPAIGN for public education websites

The SOGC has recently launched a new advertising campaign to promote its popular sexualityandu.ca and hpvinfo.ca websites. Targeted at young adults, ads will appear online and on posters in youth-frequented locations.

This year’s campaign focuses on encouraging young adults to take their sexual health seriously and seek reliable, evidence-based resources when they have questions.

Keep your eyes peeled for our new ads, and encourage your patients to make use of sexualityandu.ca and hpvinfo.ca.

National Immunization Awareness Week
APRIL 23–30, 2011

New resources

Updated ‘Understanding STIs’ flipchart

The SOGC’s popular ‘Understanding Sexually Transmitted Infections’ flipchart, a physician desk reference intended to facilitate conversation during patient consultations, has recently been updated. The content of this 2nd edition reflects the latest evidence-based guidelines, and the design has been revised to improve ease-of-use.

This flipchart is available free of charge from www.sexualityandu.ca.
Women’s health: THREE CHALLENGES FOR THE ROAD AHEAD
By Dr. André Lalonde, SOGC executive vice-president

In 1911, having a baby in Canada was very dangerous for both mother and newborn. All families lost loved ones – mothers, brothers and sisters. Last month, on the 100th anniversary of International Women’s Day, we celebrated progress in Canada. However, that progress is still uneven. Women in many communities still do not have access to quality care and suffer the consequences of severe health inequities.

Whereas in the 1990s Canada was ranked number one in terms of prevention of maternal and neonatal mortality, we have fallen behind in the last 10 years. We applauded Canada’s government for recognizing this significant decline in world status and the need to refocus its attention on the health and welfare of mothers and newborns.

As a physician who has been involved in national and international work for many years, I have seen first-hand the kind of impact that individuals and professional societies can have on women’s health and development. Within our membership, we have the power to make a difference through personal and professional actions in our everyday lives and in our communities throughout Canada. I call your attention to three challenges that require our immediate attention.

The first is to increase our work with the Canadian government to make life better for the women of Haiti. The SOGC was on the ground within three days of the 2010 earthquake. We provided financial support to reopen and expand the maternity centre at Croix-des-Bouquets, which serves the southwest area of Port-au-Prince. Within three months, we expanded the maternity unit with a new operating room and delivery room, postpartum beds and medical and surgical supplies. We also repaired the electrical system, dug a well and provided support to the midwifery, nursing and medical staff. All this was funded by donations from Canadian physicians and some international partners. This initiative was an excellent example of what can be achieved when Haitians are given the tools and support that they need to resume health-care operations and serve their own communities. We must keep supporting this maternity unit for the next five years, when it is expected to achieve stability and sustainability. Our goal is to maintain the centre’s operations and expand its reach into the outlying communities and displacement camps over the next few years. Thank you for supporting our efforts to ensure all women have access to safe motherhood and free quality care.

The second challenge we face is the need to unite men and women to fight against violence, especially violence against women. Greater awareness and prevention, as well as innovative solutions, are needed to make progress in this daunting area. It is a problem here in Canada and abroad. It happens at all levels in our society and particularly affects women in our Aboriginal communities.

Our third challenge is to address the issues faced by Aboriginal people. The SOGC has proposed a national and Aboriginal birthing initiative that could reduce inequalities between urban and rural Aboriginal communities. The Mamawi Centre in Ottawa, which we support, will be an excellent example of how to provide culturally-safe health services which respect the Aboriginal community’s beliefs and traditions while providing quality care.

Each one of us has a mother who, today, would be proud of our achievements and our commitments to the future. At our recent Celebrating Women, Health and Equality luncheon, the SOGC, the Canadian Foundation for Women’s Health, the White Ribbon Alliance for Safe Motherhood and the Wabano Centre for Aboriginal Health pledged their commitment to promote women’s health and equality by addressing these three key challenges. I encourage each of you to look at how you can help us make a difference in women’s lives, at home and abroad.
**Upcoming meetings**

**SOGC meetings**

**Ontario CME Program: Update in Gynaecology and Mature Women’s Health**
April 14–15, 2011
Toronto, ON

**67th Annual Clinical Meeting**
June 21–25, 2011
Vancouver, BC

**Quebec CME Program: Update in Obstetrics and Gynaecology**
September 15–17, 2011
Montréal, QC

**Recent studies authored by SOGC members**


**Program schedule**

<table>
<thead>
<tr>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toronto, ON</td>
<td>April 16-17, 2011 (in conjunction with the Ontario CME Program)</td>
</tr>
<tr>
<td>Toronto, ON</td>
<td>April 18, 2011 (Instructor’s Course)</td>
</tr>
<tr>
<td>Vancouver, BC</td>
<td>June 19-20, 2011 (in conjunction with the Annual Clinical Meeting)</td>
</tr>
</tbody>
</table>

**Other meetings**

**8th Singapore International Congress of Obstetrics and Gynaecology 2011**
Raffles City Convention Centre, Singapore
August 24 to 27, 2011
www.sicog2011.com

**International Society for the Study of Vulvovaginal Disease XXI World Congress**
September 3-8, 2011, in Paris, France
Any practitioner interested in vulvar disease is welcome to attend as a guest or apply to become a fellow by presenting an abstract at the meeting. Please note that abstract submissions were due April 1, 2011.

**International Postgraduate Course on Vulvar Disease**
September 9-10, 2011, in Paris, France
www.issvd.org

**Members’ corner**
OCR Committee showcased at the Cochrane symposium

The processes and achievements of the SOGC’s Obstetrical Content Review (OCR) Committee were recently showcased in an oral presentation at the 9th Annual Cochrane Canada Symposium, held in Vancouver.

This year’s conference theme was “accessible, credible, and practical” – all concepts that aptly describe the work of the OCR Committee. This 14-member, multidisciplinary group is responsible for developing the clinical core content for the SOGC’s three flagship education programs: ALARM, ALARM International Program (AIP), and MORE™. In existence now for almost five years, the committee has been integral in ensuring content is up-to-date, evidence-based and consistent across these three important programs.

The output from this committee is impressive. Using methods based on those used by the Cochrane Collaboration, systematic literature searches are carried out for obstetric topics featured in the ALARM, AIP and MORE™ programs. Each year, members review over 3,000 new references as well as select and critically appraise approximately 500 of these in full text. Proposed changes based on the appraisals of the current year’s evidence-based literature are discussed and finalized by consensus at an annual meeting in February. All materials, including search documentation, Reference Manager databases, full-text articles, critical appraisals and manuscripts are maintained on site at the SOGC’s head office.

The impact of this committee on both its members and on the education programs it serves is significant. Feedback from program participants is overwhelmingly positive. Peter O’Neill, co-chair of the ALARM program, summarized the feedback he had received with the comment, “The data is so up-to-date that it has become the core educational material for many residency programs across the country.”

The 2011 Cochrane symposium

Inclusion of the OCR Committee’s work at this year’s Cochrane symposium is a testimony to the highly credible and important contribution of the group to evidence-based obstetric practice. Cochrane Canada is part of the Cochrane Collaboration (www.cochrane.org), an international, independent, non-profit organization/network aimed at helping health-care practitioners, providers, policy makers, patients, and patient advocates make well-informed decisions about human health care. Cochrane is best known for its systematic reviews, available through the Cochrane Library (www.thecochranelibrary.com). Systematic reviews are considered to be a highly reliable source for health information and decision-making. Many of these reviews have had a real and significant impact on clinical practice, policy and research.

The full SOGC presentation from the symposium can be viewed at http://ccc-symposium.org/Presentations/Skidmore__OCR_CochraneSymp2011_Distribution.pdf.

WELCOME, new members

The SOGC is pleased to welcome some of the newest members to our society:

International member: Ivona Anghelache Lupascu

Junior member: Dr. Isabelle Malhame; Dr. Chris Nash; Dr. Yasser Saleh Sabr

Junior member (FP): Dr. Emilie Boisvert; Dr. Nicole LaBrie

Associate member (Students in health-care training): Mrs. Karen E.J. Fordham; Ms. Kaitlin Hamner; Ms. Stephanie Hieber; Ms. Karine Juneau; Miss Noha Kadhom; Ms. Tasha Kula; Ms. Xinyu (Cathy) Liu; Ms. Julie My Van Nguyen; Ms. Deirdre Patricia O’Connor; Ms. Kelley Scott; Ms. Jennifer Danielle Struble

Associate member (FP): Dr. Mustafa Salem Aboelnour; Dr. Alina D. Constantin; Dr. Minette Barbara Erlank; Dr. Laniee K. Jones; Dr. Aporna Kali; Dr. Foose Onsongo; Dr. Elizabeth G. Rivington; Dr. Louise Mary Sewell; Dr. Renee Tremblay Trempe; Dr. Florence Tremblay

Associate member (RM): Ms. Christine J. Paradis, RM; Mrs. Ozra Pashmi, RM; Ms. Tia Sarkar, RM

Associate member (PHD): Dr. Awatif Almubarak; Dr. Sandeep Raha

Associate member (RN/NP): Ms. Maureen Anne Devolin, RN

Associate member (Allied health-care professional): Ms. Sherree Lucas

Sunset on another successful SOGC ICME

Spectacular sunsets, such as the one seen in the image to the left (compliments of Mr. Benoit Côté) could be witnessed from most every room at the Las Brisas resort where the International CME was held from 28 February to 4 March 2011. But these were not the only views attendees benefited from during the conference. Many views and ideas were exchanged throughout the various sessions that composed this year’s insightful scientific program.

To enjoy more photos taken by attendees of this year’s ICME, visit the CME section of the SOGC website, www.sogc.org.
The SCC invites you to join us in Vancouver

Postgraduate Course 1 – Colposcopy Update
Society of Canadian Colposcopists
June 22, 2011
08:30 – 17:00

The Society of Canadian Colposcopists (SCC) has organized an exciting Postgraduate Course 1 – Colposcopy Update, to be delivered on June 22 at the SOGC’s Annual Clinical Meeting in Vancouver.

This year, we have two guest speakers. The first is Dr. Diane Harper, a professor of obstetrics and gynaecology, of biomedical and health informatics, and of community and family medicine at the University of Missouri in Kansas City. Dr. Harper has assumed a prominent role in the prevention of cancers associated with HPV, and will be speaking about HPV vaccines—shared decision making implementation-options for cervical cancer protection and a review of data supporting cervical cancer screening.

Our second guest speaker is Dr. Walter Prendiville. Dr. Prendiville is chairman of the department of gynaecology at AMNCH (Tallaght Hospital) and director of the colposcopy services there. As well, Dr. Prendiville is the secretary general of the International Federation of Colposcopy and Cervical Pathology and is president elect of the Irish Society for Colposcopy and Cervical Pathology. Dr. Prendiville will be speaking about the Evolution of colposcopy and optimizing treatment of CIN.

At the end of the session, you will be able to:
- Outline a decision approach for the two types of HPV vaccinations.
- Better understand the controversies of cervical screening.
- Understand how to best follow patients who have had fertility sparing treatment for cervical cancer.
- Understand the changing role of colposcopy and optimal treatment of CIN.
- Better recognize vulvar dermatosis.
- Recognize common colposcopic patterns of dysplasia.

We hope to see you there!

Patti Power, MD
SCC Program Director

Sign-up for these courses while registering for the ACM. Visit www.sogc.org.

2011 Course Dates

Toronto, ON
April 16-17
(Offered in English)

Instructor’s Course
Toronto, ON
April 18
(Offered in English)

Vancouver, BC
June 19-20
(Offered in English)

Kingston, ON
August 26-27
(Offered in English)

Montréal, QC
November 12-13
(Ofert en français)

Toronto, ON
December 4-5
(Offered in English)

This intensive two-day course serves as a review and update for obstetricians, family physicians, midwives and nurses, enabling them to renew and maintain their competencies. The program is developed by obstetricians, family physicians, midwives and nurses, and includes case-based plenary sessions, hands-on workshops and a comprehensive examination process. All content is evidence-based and follows Canadian clinical practice guidelines.

The course is limited to 40 participants, register NOW at www.sogc.org!

The SOGC gratefully acknowledges the financial support of (confirmed at time of print): 
Duchesnay Inc., Ferring Pharmaceuticals
Aboriginal youth shoulder a disproportionately large burden of disease and risk; for example, the mortality rate of cervical cancer for Aboriginal women is 33.9 per 100,000, compared to 8.1 per 100,000 in the general population. It is these types of potential health burdens that these youth are faced with and must overcome every day.

It is in part to counter the barrage of negativity from being constantly confronted with statistics like these that Aboriginal youth leader and advocate Jessica Yee founded the Native Youth Sexual Health Network (NYSHN), an organization run by Aboriginal youth for Aboriginal youth across North America. Its five main areas of focus are youth empowerment, cultural competency, reproductive justice, healthy sexuality and sex positivity.

“Youth are always presented with the negative,” says Ms. Yee. “We know the statistics; we’ve heard about the risks. The network is about focusing on the positive. Talking about what’s right. Meeting the youth where they’re at and providing them with the appropriate tools and pathways to face this reality. It is about reclaiming the right over our bodies and spaces.”

Ms. Yee has been involved in the reproductive justice movement since the age of 12. She is a strong believer in the power of the youth voice. Considering that over 50 per cent of Canada’s Aboriginal population is under the age of 25 (and as high as 60 to 70 per cent in the north), this population has a strong voice that needs to be heard.

The NYSHN’s council is made up of 20 youth under the age of 25. The organization is peer-staffed and peer-run, facilitating the work of many youth project coordinators. The network is not interested in band-aid solutions but rather in long-term, sustainable change.

“Youth are always presented with the negative,” says Ms. Yee. “We know the statistics; we’ve heard about the risks. The network is about focusing on the positive. Talking about what’s right. Meeting the youth where they’re at and providing them with the appropriate tools and pathways to face this reality. It is about reclaiming the right over our bodies and spaces.”

Ms. Yee has been involved in the reproductive justice movement since the age of 12. She is a strong believer in the power of the youth voice. Considering that over 50 per cent of Canada’s Aboriginal population is under the age of 25 (and as high as 60 to 70 per cent in the north), this population has a strong voice that needs to be heard.

For change to be long-term and sustainable, it needs to be driven by youth,” says Ms. Yee. “Youth organizations need to be taken seriously and not tokenized.”

The NYSHN is focused on actualizing peer-to-peer education, the effectiveness of which has been documented and proven time and time again. Following these principles, the network has put into place many education initiatives, one of which is to reclaim coming of age ceremonies through integrating current knowledge of sexual and reproductive health. Also, in collaboration with the Assembly of First Nations and the SOGC, the NYSHN produced a culturally-sensitive public education video on HPV prevention and cervical cancer screening, currently posted on YouTube.

The network offers a variety of mentorship programs and workshops for allies interested in expanding their knowledge of cultural competency in matters concerning Aboriginal youth.

For more information on the Native Youth Sexual Health Network and its programs, please visit www.nativeyouthsexualhealth.com. SOGC members can also learn more about Jessica Yee’s work by attending the International Indigenous Women’s Health Symposium on June 21st, where Ms. Yee will participate as a guest speaker.

<table>
<thead>
<tr>
<th>Risk factor for HPV infection</th>
<th>Aboriginal reality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of first sexual encounter</td>
<td>Aboriginal girls become sexually active as young as 11; by the age of 16, 62% are sexually active.</td>
</tr>
<tr>
<td>Contraceptive use</td>
<td>In a survey conducted in British Columbia, 31.4% of males and 40.5% of females reported not using a condom at last incident of sexual intercourse. 13.8% of males and 30.6% of females reported using a method of contraception other than condoms at last incident of sexual intercourse (ages 12-20). 24% of youth under the age of 19 have been involved in a pregnancy. Drugs and alcohol are a major factor in the sexual practices of youth and the high incidences of teen pregnancy.</td>
</tr>
<tr>
<td>Smoking</td>
<td>53.9% of First Nations youth aged 18-29 are daily smokers, compared to 28% in the general population.</td>
</tr>
<tr>
<td>Number of sexual partners</td>
<td>In a survey conducted in British Columbia, 63.3% of males and 56.1% of females reported having more than one sexual partner (ages 12-20).</td>
</tr>
<tr>
<td>Sexual behaviour of sexual partners</td>
<td>24% of Aboriginal women suffer violence. 61% of females and 35% of males reported having experienced some sort of sexual abuse.</td>
</tr>
<tr>
<td>Low socioeconomic status</td>
<td>57% of First Nations children in urban areas are living in low-income families, compared to 21% of the general population. 39% of Aboriginal single mothers earn less than $12,000/year, compared to 22% of single mothers in the general population.</td>
</tr>
</tbody>
</table>

“I strongly believe that when so many motivated and gifted minds come together at our Annual Clinical Meeting each year, the result is a meaningful, positive impact on both the health of our patients and the health of our profession. This is how we will continue to move forward. I hope to see you in Vancouver.”
— Dr. Ahmed Ezzat, SOGC president

We have several in-depth symposia and sessions covering an issue that is becoming/continues to be a high-priority for many health-care professionals in Canada and their patients. And, as always, I think that many of us will be particularly interested in learning more about emerging trends in both hyperv.

Tuesday, June 21
Join us for the International Indigenous Women’s Health Symposium in celebration of National Aboriginal Day.

“This is a great opportunity for us to address common health inequities that indigenous populations face, both abroad and within Canada, while also improving our ability to provide high-quality medical care that respects traditional beliefs and customs around health and wellbeing.”
— Dr. André Lalonde, SOGC executive vice-president

Wednesday, June 22

- Choose from 20 post-graduate sessions, for a more in-depth look at issues surrounding sub-specialties.
- Don’t miss our NEW video abstract category within the research and innovation program, presenting unusual cases or demonstrations of new instruments, techniques and procedures.
- Visit over 50 exhibitors and complete your Exhibitor Passport for a chance to win a free registration to a Regional CME of your choice in 2011 or 2012!

Thursday, June 23

- Take part in 3 international and 1 luncheon symposia.
- Attend any of our 12 best practice sessions, small group workshops conducive to an open discussion platform, free of industry participation, with delegates encouraged to bring and discuss challenging clinical cases.
- Get updated on the latest research and innovations at the oral abstract presentations.
- Last chance to visit the exhibitors and complete your Exhibitor Passport.
Register by Friday, May 20, for a chance to WIN a free registration to a regional CME of your choice in 2011 or 2012.

Friday, June 24
- Attend 4 international symposia.
- Choose among 12 more best practice sessions.
- Visit over 100 abstract poster presentations exploring cutting edge research and discuss outcomes with authors, one-on-one.

Saturday, June 25
- Take part in 2 international and 1 breakfast symposia that will be presented in association with CIHR, AHRC and GOC.
- Don’t miss the popular “Stump the Professor” challenge.

Pre- and post-conference courses
- ALARM: June 19-20
- SMIG Laparoscopic Course: June 25-26

Erratum: On page 5 of the print-version of the Preliminary Program for the 67th Annual Clinical Meeting, incorrect dates were printed for the pre-conference ALARM course. The correct dates for the course are June 19 and 20.

Book early as Vancouver sells out

Hotel Reservations:
Westin Bayshore
1601 Bayshore Drive
Vancouver, BC
- Tel: 1 800 937-8461 or 604-682-3377
- Standard room: $215 single/double occupancy
- Reservation deadline:
  Friday, May 20, 2011

Flight Bookings:
Official airline carriers – Save 10%
Air Canada
- Promotion code: XFQUK6Q1
- Website: www.aircanada.com
West Jet
- Booking account #: CC 4303
- Tel: 1 877 952-4696

Visit www.sogc.org to:
- Register for the meeting
- See the full scientific program
- Find information on discounted travel
- Learn more about what Vancouver has to offer
Canadian lawyer honoured on list of 100 people who ‘deliver for women’

In celebration of the 100th anniversary of International Women’s Day on March 8, Women Deliver released a list of the one hundred most inspiring people who have delivered for girls and women – the “Women Deliver 100.” This list recognizes women and men, both prominent and lesser known, who have committed themselves to improving the lives of girls and women around the world. Women Deliver works globally to generate political commitment and financial investment for fulfilling Millennium Development Goal 5, reducing maternal mortality and achieving universal access to reproductive health.

Among this year’s list is Canadian lawyer Rebecca Cook, a legal scholar and leading voice on women’s human rights and reproductive health. Ms. Cook is professor and faculty chair in international human rights in the University of Toronto’s faculty of law, and co-director of its international program on reproductive and sexual health law. She also holds positions in the faculty of medicine and the Joint Centre for Bioethics at the University of Toronto. Many SOGC members may know her for her work as ethical and legal issues co-editor of the International Journal of Gynecology and Obstetrics and on the editorial advisory boards of Human Rights Quarterly and Reproductive Health Matters.

Ms. Cook is credited with laying the foundation for treating access to maternal health care as a human right. Her most recent work investigates the ways in which gender stereotypes warp women’s treatment under the law, arguing that such stereotypes violate women’s human rights and proposing ambitious strategies for recognizing and eradicating them worldwide. Cook draws upon her knowledge of the law not only to spotlight gender discrimination, but also to provide practical solutions to overcome it.

As Women Deliver president Jill Sheffield describes, “This list recognizes those who successfully navigated the corridors of power, along with those on the front lines, who have worked to expand rights and choices for girls and women everywhere.”

The SOGC extends warm congratulations to Ms. Cook and applauds her dedication to ensuring the right of women to control their own bodies.

MENOPAUSE FORUMS
coming to a meeting room near you!

This month the SOGC goes back out on the road for another round of its very successful Menopause Public Forums. Events are being planned in April and May for the following locations across the country:

- Abbotsford, BC – April 18
- Richmond, BC – April 19
- Calgary, AB – April 27
- Winnipeg, MB – April 28
- Brampton, ON – May 17
- London, ON – May 18
- Ajax, ON – May 19

Dates are also being confirmed for the following locations:

- Kingston, ON
- Ottawa, ON
- Laval, QC (in French)
- Montreal, QC (in English)
- Quebec City, QC (in French)
- Halifax, NS

This will be the third series of forums sponsored by the SOGC, to provide Canadian women with the information they need about menopause and mid-life wellness, enabling them to make good decisions about their health. Presented by expert SOGC physicians, each presentation looks at all aspects of the menopause transition – its symptoms, diagnosis and treatments that are safe and effective. It also focuses on what women can do to help themselves to avoid heart disease, breast cancer, osteoporosis and other conditions that often arise as women age.

For a complete list of forum dates, locations and details, please go to www.menopauseandu.ca.
CFWH MOTHER’S DAY CARDS
Now available to purchase!

Order your beautiful cards today, just in time for Mother’s Day—Sunday, May 8.

A mother, a friend, a sister, a mentor… a woman!

We all have powerful women in our lives that we want to thank. This year on Mother’s Day, support the Canadian Foundation for Women’s Health by purchasing our acknowledgment cards and by making a generous donation to honour all the special women in your life.

Send the cards yourself, or let us send them for you!

Order now, before it’s too late. We have a limited quantity and we cannot guarantee timely arrival of cards ordered after May 2, 2011.

To place your order, contact us by email at csarkisian@cfwh.org or visit us online at www.cfwh.org.

There is a minimum $25 donation per card.

2011 ANNUAL FUND CAMPAIGN
Education is power, knowledge is health

Dear donor,

We at the Canadian Foundation for Women’s Health (CFWH) would like to thank you, our loyal supporter. We appreciate all of your encouragement and trust that you will continue to show your confidence in the CFWH – the only national women’s sexual and reproductive health charity representing obstetricians, gynaecologists and sub-specialists in our field.

First comes research, then comes education

The CFWH funds much-needed research that supports women who are affected one way or another by their sexual and reproductive health. This year, we are highlighting the power of education and the role of knowledge in women’s health. The more a woman is educated about her health, the better choices she can make. The more informed a woman is, the healthier she will be. We are proud to say that the education we provide to women is a direct translation of the results obtained from the research that we support.

When you make a donation to CFWH research, your gift keeps on giving

The CFWH is proud to support leading physicians, researchers and residents in their research, from obesity in pregnancy to controlling symptoms in menopausal women. These individuals are not only dedicated to women’s health in Canada, but also to women’s health around the world. We are pleased to support and fund projects of the International Women’s Health Program administered by the SOGC, founder and proud partner of the CFWH. Last year, we helped train health-care professionals all around the world through the Society’s ALARM International program. We were there to help Haiti after a devastating earthquake, and we provided immediate financial support to Pakistan after massive flooding. We pride ourselves on helping these women and children in some of the most vulnerable regions of the world.

In 2011, contribute to meaningful change for women, and be a part of the Canadian Foundation for Women’s Health’s success by making a generous donation to the programs of your choice. On the reverse side of this page, you will find a donation form that you may complete and send back to the CFWH’s head office.

We would like to thank you again for being a loyal supporter of the CFWH, and we look forward to your contribution this year. We sincerely hope that you will continue to believe in our cause as much as we do.

Warmest regards,

Dr. Jennifer Blake
Chair

Denyse Campeau
Executive Director
2011 Annual Fund Campaign

Education is power, knowledge is health

Donation Form

Please complete the following information and return to the CFWH office at your earliest convenience.

By mail  Attention: Chantal Sarkisian, Development Coordinator
The Canadian Foundation for Women’s Health, 780 Echo Drive, Ottawa, ON, K1S 5R7

By fax or electronically Fax: 613-730-4314 or Email: csarkisian@cfwh.org
Online  www.cfwh.org (“How You Can Help” > “Annual Fund Campaign”)

Yes! I would like to support the CFWH’s initiatives by making a monetary contribution in the amount of $__________________.

Please select the project(s) or fund(s) that you would like your contribution to support:

☐ 2011 Annual Fund Campaign: Education is power, knowledge is health. Help support education and awareness for “Sexual and Reproductive Health Awareness Day” - ($_____)

☐ Dr. André B. Lalonde Endowment Fund - ($_____)

☐ CFWH General/Research Fund - ($_____)

☐ International Women’s Health Program (IWHP) - ($_____)

☐ Haiti Relief – Mothers and Newborns of Haiti Donation Campaign (IWHP) - ($_____)

☐ Burkina Faso - Cervical Cancer Prevention Campaign (IWHP) - ($_____)

Please note that official tax receipts will be issued for contributions greater than $20.00.

Name: ____________________________
Organization: ____________________________ Title: ____________________________
Address: ____________________________
City: ____________________________ Province: ________ Postal Code: ____________________________
Telephone: ____________________________ Email: ____________________________
Total Amount: $ ____________________________
Method of Payment:  ☐ Visa ☐ Master Card
☐ Cheque - Payable to The Canadian Foundation for Women’s Health
Credit Card Number: ____________________________ Expiry Date: ____________________________
Name on Card: ____________________________ Signature: ____________________________

National Office
780 Echo Drive, Ottawa, ON K1S 5R7 Tel.: 613-730-4192 Fax: 613-730-4314
info@cfwh.org www.cfwh.org
Registered charitable number 88688 4089 RR0001
On March 8, the SOGC joined the Canadian Foundation for Women’s Health and the White Ribbon Alliance for Safe Motherhood in a celebration of women, health and equality to mark the 100th anniversary of International Women’s Day. The three organizations hosted a special luncheon at the National Arts Centre in Ottawa, which brought together prominent Canadians who are committed to improving the health and wellbeing of girls and women throughout the world.

There were a total of 250 people who joined the celebration, including many distinguished guests: Mrs. Laureen Harper, wife of Prime Minister Stephen Harper; Her Excellency Mrs. Sharon Johnston, wife of Governor General David Johnston; the Honourable Bev Oda, Minister of International Cooperation; the Honourable Leona Aglukkaq, Minister of Health; the Honourable Rona Ambrose, Minister responsible for the Status of Women; the Right Honourable Michaëlle Jean, former Governor General; the Right Honourable Madam Justice Beverley McLachlin, Chief Justice of Canada; as well as numerous members of Parliament and the Senate.

The energy in the room was extraordinary, as participants were proud and delighted to participate in a milestone event which allowed for reflection on the past 100 years of progress that has been gained for women. As we celebrated the numerous accomplishments for women in Canada, there were also key messages resonating throughout the event on the fact that much work still remains to ensure women’s health and equality in other countries around the world.

“Over the past century, Canada has made great achievements in acquiring the tools and knowledge needed to save women’s lives. Where we have fallen behind is in sharing these medical advances with the populations who need it most,” said Dr. André Lalonde, executive vice-president of the SOGC, as he spoke to the luncheon guests about the SOGC’s work and the road that lies ahead for improving the health of women in low-resource countries.

Guests enjoyed their lunch, while simultaneously taking in the important messages that were eloquently presented by each speaker, as well as through the presentation of three short videos. There was also time for guests to mingle and recount stories of women who have touched their lives, to network with like-minded individuals, and to respond to media requests for interviews.

On March 8, the SOGC joined the Canadian Foundation for Women’s Health and the White Ribbon Alliance for Safe Motherhood in a successful fundraiser and a momentous event for Safe Motherhood and Public representative of the SOGC Council; the Honourable Rona Ambrose; Dr. Huguette Labelle, Chancellor of the University of Ottawa; Dr. Jennifer Blake, Chair of the Canadian Foundation for Women’s Health; and Allison Fisher, Executive Director of the Wabano Centre for Aboriginal Health.

Ms. Christine Stevens of TD Canada Trust also addressed the group and presented the CFWH with a cheque for $10,000 to be used for the training of midwives and nurses at the Croix-des-Bouquets Maternity Centre in Haiti and the Wabano Mamawi Centre in Ottawa, which will open later this year.

Proceeds of the luncheon event will go towards supporting the Croix-des-Bouquets Maternity Centre in Haiti and the Wabano Mamawi Centre in Ottawa. With over $25,000 raised, we are on track for starting a new century of progress towards ensuring every woman’s right to have access to quality health care, equal rights, and a life free from discrimination.
LadySystem® Pelvic Floor Therapy
A Fast-Acting, Easy and Discreet Method to Treat
Urinary Stress Incontinence

• Combines active and passive (biofeedback) pelvic floor muscle contractions.

LadySystem® Benefits as Described by Users

• It works fast
• It is easy to use
• It is discreet
• It is light/gentle/soft

Most women would use the LadySystem® therapy upon recommendation of a healthcare professional.

<table>
<thead>
<tr>
<th>% of women interviewed</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>40</td>
<td>84</td>
<td></td>
</tr>
<tr>
<td>50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>70</td>
<td></td>
<td></td>
</tr>
<tr>
<td>80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>90</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Medilnsight, Nov. 2010

It is recommended to perform the LadySystem® pelvic floor therapy 15 minutes, twice a day, for 3 months.

LadySystem® is covered by most private insurance plans.
Trip to Burkina Faso kick-starts plans for cervical cancer prevention project

During the week of January 28 to February 5, SOGC executive vice-president Dr. André Lalonde and international women’s health project manager Caroline Montpetit travelled to Burkina Faso to visit our partners at the Société des Gynécologues et Obstétriciens du Burkina Faso (SOGOB). The goal of the visit was to follow up on capacity building activities as part of the SOGC’s Partnership Program, and to continue discussions for the development of a cervical cancer prevention project to be implemented throughout the country.

SOGC staff met with key individuals and organizations who work in the field of cervical cancer in Burkina Faso to discuss the proposed project and to establish an action plan. They also visited targeted sites within the intervention zones, where services could be delivered.

The project will extend over a minimum of five years with the goal of improving and increasing access to cervical cancer screening and treatment of pre-cancerous lesions among women 25 to 50 years of age. Currently, there are over 1,230 women diagnosed with cervical cancer each year in Burkina Faso. Opportunities for screening and treatment are available only in urban centres, leaving 75 per cent of the population living in rural areas on their own.

The project will consist of four components: ensuring the equipment and necessary supplies for the health centres; training health professionals on screening methods and treatment of pre-cancerous lesions; public awareness activities; and advocacy efforts with the government of Burkina Faso.

The SOGC hopes to see the project up and running as early as April and is in the process of appealing for additional funding. SOGC members are strongly encouraged to take part in this initiative and to contribute a donation towards the reduction of cervical cancer in Burkina Faso. Visit the website of the Canadian Foundation for Women’s Health, www.cfwh.org, or complete the donation form on page 12 today to make a difference in the lives of the women of Burkina Faso.

IWHP on the go

Dr. Lalonde and Ms. Montpetit visit a potential service delivery site, accompanied by the general director of the SEMAFO Foundation, a partner and donor of the cervical cancer prevention project and by local staff at the health and social promotion centre.

AGM, LEADERSHIP & ADVOCACY WORKSHOPS
September 16-18, 2011
Vancouver Marriott
Pinnacle Downtown Hotel

Trailblazers: Catching Our Dreams
- Dr. Dorothy Shaw ~ Career advancement
- Monica Olsen ~ Engaging Others in Leadership
- Pre-con workshop: Health-care team effectiveness
- Topics include: Made in BC solutions, Physician health & balance, Media & women’s perspective, Preventative health, Immunization, Wellness in pregnancy, Contraception & osteoporosis
- Plus two networking receptions and a sunset cruise!

Learn more & register online @ www.fmwc.ca
Early-bird deadline: June 30, 2011
A Novel and Natural Approach
To Treat and Prevent Bacterial Vaginosis

Prevegyne™ controlled-release vaginal tablets:

+ Effectively release ascorbic acid to the vaginal pH level
+ Neutralize malodor following the first application
+ Treat BV by protective Lactobacilli and pathogenic bacteria
+ Prevent recurrence of BV

Treatment cycle: 1 vaginal tablet q.h.s. for 6 days.
If necessary, the treatment can be prolonged or repeated to restore or maintain the normal vaginal pH.

AVAILABLE AT THE PHARMACY COUNTER WITH OR WITHOUT PRESCRIPTION

DUCHESNAY
950, boul. Michèle-Bohec
Blainville QC Canada J7C 5E2

For medical information: 1 888 666-0611
medicalinfo@duchesnay.com
www.prevegyne.com