

EDITORIAL

Eye To Eye With Abuse

By Nan Schuurmans, MD, FRCSC, SOGC Past President (1996-1997)

It is clear that violence against women is a serious problem in Canada. Daily we are reminded of this painful reality by the media and within our medical practices. As health care providers, we are uniquely positioned to identify abuse and to intervene.

The *1993 Violence Against Women Survey* found that, in Canada, 21% of women abused by their marital partners were assaulted during pregnancy; 40% of the women who were abused during pregnancy reported that the abuse *began* when they were pregnant; the women who were abused during pregnancy were four times as likely as other abused women to say they experienced very serious violence (beatings, chokings, gun/knife threats, sexual assaults); just over 100,000 women who were assaulted during pregnancy suffered a miscarriage or other internal injuries as a result of the abuse. A subsequent Canadian study found that 95% of women who were abused in the first trimester of their pregnancies were also abused in the three-month period after delivery. For these women, the abuse also increased after the baby was born.

Because many abused women are socially isolated and may not have networks of friends and family to turn to, the contacts with her health care providers are crucial.

Although there are a number of ways to discover that a woman has been abused, asking her directly if she has been harmed remains the most important tool for identifying abuse.

Many cases of abuse during pregnancy are overlooked. Pregnant women should be asked about abuse as early as possible in their pregnancies. There are many abuse screening tools available. Health care providers must select the tool that is most appropriate for their work setting. Screening tools and methods of interventions can be found in the enclosed publication by Health Canada entitled *A Handbook for Health and Social Service Professionals Responding to Abuse During Pregnancy*. As a Member of the Expert Advisory Group who developed this publication, I trust you will find it helpful and informative. This publication and others – “*A Handbook for Health and Social Service Providers and Educators on Children Exposed to Woman Abuse/Family Violence*” and “*A Handbook Dealing with Woman Abuse and the Canadian Criminal Justice System: Guidelines for Physicians*” – may be obtained by contacting:

**National Clearinghouse
on Family Violence
Health Canada
Tel: (613) 957-1291 /
1-800-267-1291**

Fax: (613) 941-8930

Web site: www.hc-sc.gc.ca/nc-cn

Abuse against women, especially during pregnancy, is a widespread concern. I call upon all health care providers to be alerted to this problem and to promote awareness among their colleagues.

Source: A Handbook for Health and Social Services Professionals Responding to Abuse During Pregnancy - Minister of Public Works and Government Services Canada, 1999. H72-21/165-1998E ISBN 0-662-27295-1

Alternative to Hysterectomy

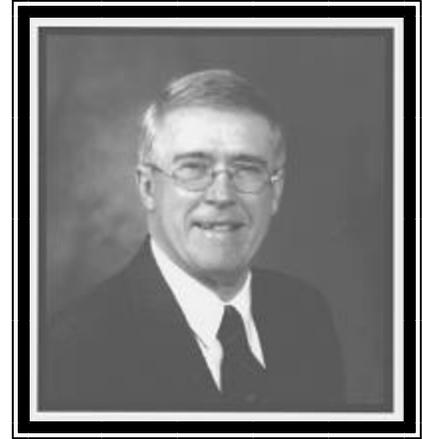
Governments throughout Canada still question the number of hysterectomies performed in Canada. Our hysterectomy rate is higher than in Europe but lower than that in the USA. The number of hysterectomies has decreased markedly in the last few years and with the advent of better treatment for menorrhagia, the rates should fall further in the next few years if hospitals provide the necessary technology, and physicians trained in their use.

The SOGC has made representation to governments to allow for the purchase of equipment in the field of endometrial ablation. The SOGC is interested in hearing about your experience in securing this equipment for your hospital. We will transmit your requests and observations to the provincial governments and continue to provide them with information about endometrial ablation and the necessity to fund adequate equipment in obstetrics and gynaecology.

Each hospital department of gynaecology should review its

hysterectomy rate and develop a quality assurance program which should assess whether proper documentation is in the patient's chart prior to a hysterectomy. Recently, a large university hospital in reviewing its practice of hysterectomy, found that close to 40% of cases were not properly documented and it was difficult to justify the hysterectomy in reviewing the chart. It is imperative that we bring to the hospital copies of all pertinent laboratory tests and information from our office. In preparing a request for hysterectomy, I have established a routine of copying all important information from my chart and attaching it to the hospital requisition and admission slip. Some hospitals also provide the opportunity for dictation of the history and physical prior to admission. This can easily be done from the office and would provide better documentation in the chart.

A good quality assurance program for hysterectomy procedures, should include a checklist which would be available in the office and at the hospital. This will serve as a



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FSOGC, FACOG*

reminder for the physician to adequately document the reasons for this surgery.

I would like to receive copies of hysterectomy quality assurance programs that are in effect in your hospital so that we can ask our Clinical Practice - Gynaecology Committee to formulate a standard quality assurance evaluation document for hysterectomies.

ICME Recap

By Sylvie Paquette, Associate Director, CPD Division, SOGC

This year's ICME was a tremendous success. 100% of evaluations received claimed "they would recommend this meeting to colleagues". Thanks to all who took the time to respond to the evaluation forms. Winners from the evaluation form draws were: S. Klam, Marcel Jodoin and S. Kaye. Congratulations! All comments will be reviewed by the ICME Program Planning Committee and suggested topics will be used for next year's program planning

initiatives. Again we do encourage suggestions, so if you still have comments, please forward them to the Continuing Professional Development Division at the SOGC.

The Allegro Resort was an excellent meeting venue and the service and food was excellent. Delegates did take time to enjoy some favourite water sports such as snorkelling and diving.

The SOGC's 7th tennis tournament

was held and again, there was a great turnout. Everybody had a lot of fun and we would like to thank Dr. F. Pauls and C. Roye for facilitating the tournament (see pictures). The prizes included a t-shirt for all and was supplied by Novo Nordisk. The championship trophies by Duchesnay (given by Dr. Robert Gauthier and Éric Gervais from Duchesnay). Runners-up received sun glasses donated by Wyeth-Ayerst. Congratulations to all winners. We look forward to seeing you next



Ladies singles

Winner: Charmaine Roye (trophy given by Ferd Pauls; runner-up: Kelly Anderson)



Men singles

Winner: Mark Omoto (runner-up: Ahmed Ezzat)



Mixed doubles

Winners: Kelly Anderson and Michael Bow (runners-up: Camille Bacchus and Ahmed Ezzat)

(continued on page 4)



Ladies doubles

*Winners: Charmaine Roye and Sylvie Dodin
(runners-up: Kelly Anderson and Yvette Baskett)*



Men doubles

*Winners: Ahmed Ezzat and John The
(runners-up: Michael Bow and Ferd Pauls)*

Next year, look out! We are going to Costa Rica to the beautiful Los Suenos Marriott Hotel. If you want to see more, visit our web site for pictures and updates. With Ecotours galore this promises to be a stimulating experience both on a travel and educational level. Oh yes, and let's not forget golf - there is a beautiful course designed to meet the needs of the avid golfer.

Thank you to the ICME Program Planning Committee for all of their hard work and dedication. You did an excellent job and the SOGC is

very grateful for your continued support.

Finally, the SOGC also wishes to thank all of their sponsors for this event. Without their generous contributions and support, this meeting would not be possible.

By Robyn Harris, Executive Director, Canadian Foundation for Women's Health

Your correct answers could help raise thousands for the Foundation

By visiting the Novo Nordisk booth at the SOGC/AOGQ ACM between June 19 and 20, you could help the Foundation raise funds for research in women's health. All funds will be donated by Novo Nordisk, all you have to do is come up with the correct answers to questions related to hormone replacement therapy. Hope to see you there!

Duchesnay Fund – Grants Competition 2000

The recipient of the \$30,000 grant from the *Duchesnay Fund for better use of drugs during pregnancy and lactation* will be announced in May. The presentation of this award will take place on Wednesday, June 21, 2000 at 11:15 a.m. during the 56th annual SOGC/AOGQ ACM in Montréal. It is due to the ongoing support of Duchesnay and their commitment to research in women's health, that the Foundation is able to provide grants through this fund. In 2001 the Foundation will once again open the competition to all research projects related to women's health issues—deadline March 1, 2001. If you would like to set up a fund for a particular area of women's health research, the Foundation welcomes your considerations.

Isabelle Boulay Gala Performance

This fundraising gala event is sure to be a highlight for all those attending the annual clinical meeting. The Foundation is pleased to report the sponsorship of BERLEX CANADA INC., SCHERING CANADA INC., SUPERIOR MEDICAL LIMITED and the SOCIETY OF OBSTETRICIANS AND

GYNAECOLOGISTS OF CANADA. The Foundation is also grateful to have the support of the ASSOCIATION DES OBSTÉTRICIENS ET GYNÉCOLOGUES DU QUÉBEC for their sponsorship of the post-performance reception. It is not too late to add your name for sponsorship of this event, please contact Robyn Harris at 1-800-561-2416. Tickets may be ordered through the SOGC/AOGQ ACM registration form or through the Foundation—American Express, Visa, MasterCard and personal cheque are accepted to purchase your tickets.

University Support

The Foundation is fortunate to have the support of the Departments of Obstetrics and Gynaecology from Universities across Canada. The most recent appeal has resulted in generous donations from - University of Calgary, University of Saskatchewan, University of Manitoba, McGill University, *Université de Sherbrooke*, *Université de Montréal*, Ottawa General Hospital - Civic and General Campus, Queen's University, University of Western Ontario and Memorial University.

The Canadian Foundation for Women's Health is a national charitable organization dedicated to raising funds for research in all aspects of women's health. Our funds come from individuals and corporations, including the generous support of the Society of Obstetricians and Gynaecologists of Canada. Our goal is to ensure that women's interests and concerns are represented in medical research and in the search of scientific knowledge.

For further information please contact:

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Executive Director
780 Echo Drive
Ottawa, Ontario K1S 5N8
Tel: (613) 730-4192 ext. 238
Fax: (613) 730-4314
E-mail: rharris@sogc.com
Website: www.cfw.org
Charitable Registration Number:
88688 4089 RR0001

National and International Meetings

VIII European Congress on Pediatric and Adolescent Gynecology

June 7 to 10, 2000
Prague, Czech Republic
Information:
Czech Medical Association JEP
Fax: +420 2 294 610
E-mail: senderova@cls.cz
Website:
www.congress.cls.cz/pediatricgynecology

V European Congress on Menopause

July 1st to 5, 2000
Copenhagen, Denmark
Information:
International Congress Services
Phone: +45 39 460 500
Fax: +45 39 460 515
E-mail: emas2000@ics.dk
Website: www.emas2000.ics.dk

XVIIth Asian and Oceanic Congress of Obstetrics & Gynaecology

July 9 to 14, 2000
Singapore
Information:
AOCOG 2000 Secretariat
Phone: (65) 737 0275
Fax: (65)737 6439
E-mail: gmcs@parkway.com.sg

8nd International Conference on Pelvic Floor

September 9 to 12, 2000
London, England
Information:
Conference Secretariat
Phone: + 44 (0) 208 725 1302
Fax: + 44 (0) 208 725 3611
E-mail: kdavis@sghms.ac.uk

Lamaze International 2000 Annual Conference

September 22-24, 2000
Memphis, Tennessee, USA
Information:
Phone: (202) 857-1128 / (800) 368-4404
E-mail: lamaze@dc.sba.com
Web Site: www.lamaze-childbirth.com

"When Pregnancy Becomes Complicated"

September 28, 2000
Hospital for Sick Children
Toronto, Ontario
Information:
Denise Avery
Maternal Infant and Reproductive Health
Research Unit
University of Toronto
Phone: (416) 351-3781
Fax: (416) 351-3771
E-mail: miru@swchsc.on.ca

10th World Congress on Ultrasound in Obstetrics and Gynecology

October 4 to 7, 2000
Zagreb, Croatia
Information:
Congress Secretariat
Phone: + 385 1 3745537
Fax: + 385 1 3745534
E-mail: asim.kurjak@public.srce.hr

An Update of SOGC's International Women's Health Projects

By Liette Perron, Program Officer, International Women's Health, SOGC

The past six (6) months have been extremely busy and active within the Society's International Women's Health Program. Several members have recently been called upon to contribute both time and expertise in a number of activities related to the Society's international development projects. What follows is an update of the program's main activities during this period.

SOGC Partnership Project 1999-2002

SOGC in Uganda

In November 1999, a delegation of SOGC members travelled to Uganda to offer the second ALARM in Kampala Course. The course was offered in partnership with the Association of Obstetricians and Gynaecologists of Uganda (AOGU) who assumed the responsibility for the organization of the course on site. The course's faculty members included, from Canada, Dr. J. Chamberlain, Dr. M. Cox, Dr. D. Cochen and Dr. L. Honey, and From Uganda, Professor F. Mirembe, Dr. J. Byamugisha, Dr. R. Byaruhanga, Dr. C. Byraberama, Dr. H. Mbazira, Dr. P.

Okong, Dr. I. Namagembe and Dr. J. Wandabwa. The course was offered to 37 health professionals from Kampala and its surroundings and included obstetricians, general practitioners and midwives.

During this same period, Dr. Dianne Miller also travelled to Kampala for the purpose of offering expert counsel and training on the issue of cervical cancer screening and colposcopy.



AOGU Annual General Meeting, official opening at the AOGU office (Kampala, Uganda)



ALARM International Course, participants and faculty members (Kampala, Uganda)

SOGC in Haiti

In January 2000, the *Société Haïtienne d'Obstétrique et de Gynécologie* (SHOG) organized both a GESTA and GESTA's Instructors course in Port-au-Prince, Haiti. The Canadian faculty members included Dr. R. J. Gauthier, Dr. H. Muggah, Dr. D. Blouin and Dr. R. Laliberté. They were assisted on site by two Haitian colleagues: Dr. M. d'Alexis and Dr. R. Coriolan. Thirty-two (32) ob/gyn participated to the GESTA course which was held over four

half days, while 12 participants attended the ALERTA Instructors' course. While in Port-au-Prince, SOGC members also had an opportunity to visit both public university hospitals and give lectures to the hospitals' residents.

While in Port-au-Prince, the above-mentioned delegation was also accompanied by L. Bocage, a nurse from St. Justine's Hospital. Ms. Bocage provided clinical training to obstetrical nurses from different public and private

hospitals in Port-au-Prince. Her lectures focused on the support and follow-up of patient during labour, maternal fetal monitoring, emergency situations, basis cardiopulmonary resuscitation and perinatal bereavement.

SOGC in Guatemala

In April 2000, Dr. K. Milne, Dr. T. Baskett and Dr. R. Cepeda travelled to Guatemala City to offer the first ALARM International course and Instructors' course in

(continued on page 11)



GESTA International Course, participants and faculty members with Dr. Robert Gauthier (Port-au-Prince, Haiti)

Spanish. Known as the ALERTA course, this program was scheduled to be offered to approx. 40 health professionals from the Capital. Like in Uganda and Haiti, the activity is being organized in partnership with the *Asociacion de Ginecologia y Obstetricia de Guatemala* (AGOG).

SOGC's Partnership Project 1999-2002 is funded by the Partnership Branch of the Canadian International Development Agency (CIDA).

FIGO Save the Mothers Uganda-Canada Project

The FIGO Save the Mothers Uganda-Canada Project is presently entering its second year of activities. The work conducted to date within the district health dispensaries and referral hospital, as well as in the community at large lead the Society and its partner, the Association of Obstetricians and Gynaecologists of Uganda (AOGU), to believe in the feasibility, impact and sustainability of the project.

The latest Canadian Volunteer Physicians assigned to the project have included Drs. L. Honey, D. Cochen, F. Loisselle and J. Hébert. Dr. R. Cooke who has recently left Canada for his second assignment to Kiboga where he will stay until this coming June.

SOGC in Kosovo

Finally, the Society has recently been invited to participate to a joint initiative which aims the revitalization of the health system in Kosovo. This CIDA funded initiative is headed by the Canadian Public Health Association (CPHA) and will bring together a number of different health partners of which the SOGC, the Canadian Nurses Association (CNA), the Ontario Laboratory Proficiency Testing Program (LPTP) and others. The SOGC's contribution will be in the field of obstetrics and gynaecology and is to include the upgrade of skills and knowledge of health professionals working in the country's main hospitals and health houses and support for the development of ongoing medical

education activities.

The Society is recruiting obstetricians and gynaecologists interested in contributing time and expertise to those projects. If you are interested, please see the following ads.

CANADIAN VOLUNTEER PHYSICIANS NEEDED IN UGANDA AND IN KOSOVO

FIGO Save the Mothers Uganda-Canada Project

Canadian obstetrician/gynaecologist volunteers are needed to assist SOGC and AOGU in a district-based project in Uganda. Main responsibilities include upgrading of skills, monitoring and supervision activities at the district hospital and in the health dispensaries as well as participation to community education activities.

Terms of the Assignment

Location:

Rural Uganda, District of Kiboga (situated approx. 2 1/2 hours drive

(continued from page 12)

from Kampala)

Duration:

Minimum of three (3) months per volunteer (non negociable)

Living Conditions:

Basic - 3 bedroom guest house, vehicle and driver provided.

Expenses Covered:

Air fare, accommodation and all costs related to the preparation for the departure and for project activities while on site. A small per diem is also offered.

Requirements:

Ob/gyn with previous work experience in a developing country. Must be able to work in English.

Renewal and Strengthening of Public Health in Kosovo

Canadian obstetrician/gynaecologist volunteers are needed to assist the SOGC in the delivery of a Continuing Medical Education program for ob/gyn in Kosovo. The main responsibilities of the volunteers remain to be determined.

Terms of the Assignment

Location:

Mostly in Prishtinë, Kosovo.

Duration:

2 - 3 weeks per volunteer (possibility of returning more than once per year)

Living Conditions:

To be determined.

Expenses Covered:

Air fare, accommodation, meals, incidentals and expenses related to the project.

Requirements:

Ob/gyn with training and with previous work experience in difficult and unstable communities. Knowledge of Serbo-Croat and/or Albanian, an asset.

If interested to any of these opportunities, please contact Liette Perron, Program Officer, International Women's Health Program at 1-800-564-2416, ext. 223 or by email at lperron@sogc.com.

The Society on the International Scene

First Inuit Health Policy Forum

By Dr. Erica Eason, Member of the Aboriginal Issues Committee, SOGC



On behalf of the Aboriginal Issues Committee of Society of Obstetricians and Gynaecologists of Canada (SOGC), I attended the Inuit Health Policy Forum on Feb 9 and 10. The agenda of this ground-breaking meeting was to collectively determine the Inuit people's health priorities, establish a national Inuit health policy, and explore a new model for working with Health Canada. As Bill Lyall, of the Inuit Tapirisat of Canada (ITC) pointed out, there has been a dissonance between Ottawa's policies and Inuit needs. The new model must reflect the right and responsibility of the Inuit themselves to identify their most pressing health problems and decide what solutions are needed to address them. Attending the meeting were leaders of Inuit organizations - national, territorial and regional - and Health Canada staff. The importance accorded by Health Canada to this meeting and new way of doing things was evidenced by the attendance of Allan Rock, Minister of Health, Marie Fortier, Associate Deputy Minister of Health and Paul Cochrane, Associate Deputy Minister for the Medical Services Branch of Health Canada.

Pressing health issues repeatedly

identified over the 2 days of the forum included suicide, mental illness, drug and alcohol abuse, conjugal violence, sexual abuse, teenage pregnancy and fetal alcohol syndrome. Sexually transmitted diseases including HIV infection, and complications such as infertility and cervical cancer were also major concerns. Barriers facing the North include unemployment, the high cost of food and housing, and the lack of a cohort of trained Inuit - and lack of Inuit in training - to assume health care functions. There are limitless demands on those educated and dedicated Inuit who are currently shouldering so much of the burden. There is an acute shortage and rapid turnover of professionals such as doctors and nurses, and the cost of patient transport is in itself disabling to the health care budget. The need for a public health approach was made abundantly clear by most of the Inuit speakers.

It was especially exciting to see the prominent role assumed by women at this policy forum. The president of the ITC, Okalik Eegeesiak, spoke cogently about the need for a public health approach to illness, for example improved housing to relieve the tensions from overcrowded conditions.

Roda Grey, also of ITC, pointed out the issues of lack of communication between the multiple organizations and levels of government involved in health policy and care delivery. Veronica Dewar, president of Pauktuutit, the Inuit Women's Association, gave a hard-hitting and focused speech of particular interest to SOGC members. She called resoundingly for Canada to fulfil its responsibility to enforce the equality of women in all parts of Canadian society, including Inuit communities. She stressed the need for greater political participation by women at all levels, particularly in health policy development. She highlighted health needs of Inuit women such as violence prevention, breast and cervical cancer screening, and dealing with imported diseases such as STD's, including HIV. Ms. Dewar explained the importance of traditional midwifery in maintaining the integrity of the Inuit family, and called for its integration into programs for local care of pregnancy and childbirth within the communities. In response to the Federal initiative for home care, she was particularly concerned by the lack of a cogent gender analysis.

She said that the driving force of this initiative is cost containment, devolving

(continued on page 13)

(continued from page 12 - National News)

the burden of care onto unpaid or poorly paid women. Here again, the obvious need for caregivers to be at the policy-making table was emphasized. Patient education and prevention are the least costly approach to decreasing the burden of disease, she pointed out, but the role of socioeconomic issues in causing the major health problems must be addressed for real solutions to emerge.

Conference workshops were focused on identifying the strengths and weaknesses of recent experiences in developing health policy, so as to formulate a more effective approach for the future. The energy, devotion and courage shown by both the Inuit and Health Canada conference attendees, in the face of enormous obstacles lacking obvious solutions, was truly impressive. Inuit control of their own health care system, supported by the patience, generosity and sense of humour in evidence during this Health Policy Forum, will ensure their eventual success in tackling these enormous health problems.

Industry News

PR Preven® at Reduced Cost for Emergency Contraception

Shire Canada Inc. has announced that since May 1st, 2000, it has reduced the cost of their Preven Emergency Contraception Kit to \$5.00. "The medical community has spoken and we have listened", said Joseph Rus, CEO of Shire Canada Inc. "Affordable and accessible emergency contraception is crucial to reducing the number of unintended pregnancies and abortions in Canada. We are committed to assisting the SOGC and other medical associations in their efforts to provide the public with emergency contraception. We feel that we can make an enormous contribution by making

the Preven Emergency Contraception Kit readily available at the most affordable price".

By decreasing the cost of the Preven Emergency Contraception Kit to \$5.00 (not including dispensing fees), Canadian women will have access to an affordable, approved product. In addition to the pharmacies, Preven will be made available to sexual health clinics, Public Health, Planned Parenthood and student health clinics. By ordering directly from Shire Canada Inc. These clinics will be able to purchase Preven for \$5.00 per kit. These clinics will be able to pass the reduced costs

along to their patients.

"Emergency contraception really is one of the best kept secrets," commented Joseph Rus. Shire Canada Inc. Strongly believes that Canadian women should not be denied this socially responsible contraceptive option because of price, accessibility, or a lack of awareness.

Source: Shire Canada Inc.

National News

Winners of the Junior Member Electives in International Women's Health

Congratulations to the winners: Dr. Marie-Josée Dubé (*Université Laval*); Dr. Geneviève Fauconnier (*Université de Sherbrooke*); Dr. Wade Robert Mitchell (University of British Columbia); Dr. Geneviève Roy (*Université de Montréal*) and Dr. Melodye Rajasingham (McMaster University). More information in the upcoming issues of the *News*.

Member in the News

The Society is pleased to learn that Dr. V. Cecil Wright received in March the American Society for Colposcopy and Cervical Pathology Distinguished Scientific Award. Dr.

Wright is Professor of Obstetrics and Gynaecology, Division of Gynaecologic Oncology at the University of Western Ontario, Director and principal colposcopist of the Abnormal Pap Smear Clinic at the St. Joseph's Health Centre and a past president of the Society of Canadian Colposcopists. Dr. Wright has lectured across the world and is author or co-author of nine books and editor or co-editor of three others. Congratulations to Dr. V. Cecil Wright.

The Canadian Pharmacists Association (CPhA) issues a statement on Internet Pharmacy

The CPhA recently issued a statement outlining the association's

position with respect to the increasing consumer interest in Internet pharmacy.

The statement includes information about the potential benefits and risks of Internet pharmacies and provides advice to consumers about protecting their health and privacy when accessing pharmacy and medical information sites. The statement also includes five recommendations.

For more information, you may view the CPhA's *Statement on Internet Pharmacy in Canada*, on the CPhA Web site at www.cdnpharm.ca.