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## NOTICE to all voting members

**SOGC Annual Business Meeting**  
June 26, 2006 from 7:00 am to  
8:00 am at the Westin Bayshore Hotel,  
Vancouver, British Columbia

The SOGC will be tabling changes to the SOGC bylaws during the SOGC Annual Business Meeting June 26, 2006 at 7:00 am at the Westin Bayshore Hotel in Vancouver. We request that all voting members attend the meeting. A hot breakfast will be served.

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## SUMMER Hours

From July 3<sup>rd</sup> until September 1<sup>st</sup>, the SOGC national office will be open:

- Monday to Thursday - 7:30 am until 6:00 pm;
- Fridays - 7:30 am until 12:00 pm.

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## CORRECTION

Incorrect information appeared in the article *The 19<sup>th</sup> International CME – A truly exotic experience in Turks and Caicos* (March 2006) regarding the winner of the ICME Women's Singles Tennis Tournament. Charmaine Roye was the winner of this category, not Kelly Anderson. We would like to express our sincere apologies to Charmaine Roye and Kelly Anderson.

Mr. Theodore M. Pasinski is the CEO of St. Joseph's Hospital Health Center in Syracuse, New York. An incorrect spelling appeared in the article *MORE<sup>OB</sup> Program breaks ground in the US!* (February 2006).

## NURSING COLLEAGUES NEWS: Task force to explore redefinition of AWHONN Canada

Working with its Canadian Section, the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) has assembled a task force to explore the governance structure of the Canadian Section and its relationship within the AWHONN organization.

Under existing AWHONN structure, Canada is classified as a single Section of the organization,

similar to the way each American state is classified, rather than as an affiliate organization with Sections in each province.

The new task force is charged with exploring and ultimately selecting a new partnership model for the Canadian Section, one that is designed to better meet the needs of Canadian nurses while retaining a strong identity with AWHONN.



## MORE<sup>OB</sup> PROGRAM welcomes APOG endorsement



The SOGC is proud to announce that the Association of Professors of Obstetrics and Gynaecology of Canada (APOG) has lent their endorsement to the Managing Obstetrical Risk Efficiently (MORE<sup>OB</sup>) program.

In just three years, SOGC's MORE<sup>OB</sup> program has gained widespread implementation in five Canadian provinces, and has recently been implemented in hospitals in the United States.

So far, over 6000 healthcare professionals have been involved in the program.

APOG offered a letter of support endorsing the MORE<sup>OB</sup> program following a report presented by the SOGC at APOG's Annual General Meeting in Toronto in late 2005. The SOGC would like to thank APOG for their endorsement of the MORE<sup>OB</sup> program and for their continuing partnerships with the SOGC.

## CCOHTA becomes CADTH

On April 3<sup>rd</sup>, the Canadian Coordinating Office for Health Technology Assessment (CCOHTA) officially changed its name to the Canadian Agency for Drugs and Technologies in Health (CADTH). An independent, not-for-profit agency, CADTH provides evidence-based information and

advice on the effectiveness of drugs and other health technologies to Canadian healthcare decision makers.

The name change is part of a larger rebranding initiative to better reflect the agency's expanding mandate.

# NEW GOVERNMENT, new opportunities

By Dr. André B. Lalonde  
Executive Vice-President, SOGC



With the advent of a new Government, the SOGC and its partners need to take a fresh look at government policy. Problems still exist in our health system, and we will need to address these challenges together. As we finalize our new strategic directions for 2006-2011, it is imperative that we look at the policy issues that will dominate Canadian public policy in coming years.

1. **Aboriginal Issues:** SOGC has adopted this as a new strategic direction. We are looking at major partnerships with local governments and Health Canada to address the issues that aboriginal communities have identified as priorities.
2. **International Health:** The new Minister will want to drive this issue which is so important for the developing countries, an issue on which Canada has much to offer. We need a clear policy that will support initiatives to reduce maternal mortality worldwide. Canadians are poised to volunteer their knowledge and expertise in less fortunate countries. Government must help them do that.
3. **Sexual and Reproductive Health:** Faced with increasing rates of STIs in Canada, we urgently need policy, resources, and action to tackle this issue. We need to focus our attention at prevention and treatment. Innovative programs such as [www.sexualityandu.ca](http://www.sexualityandu.ca) are needed and should be widely available.
4. **Reproductive Technologies:** The law was passed but the new agency is still not set up. We need concrete, urgent actions.
5. **Risk Management and Patient Safety:** Where are we going with this issue? Will we finally see the day when we witness a culture change?
6. **Mother-Child Care:** We need policy to address mother and child health together, not merely child health alone. A policy that forgets the mother in the dyad will not succeed.
7. **Human Resources:** Canada currently does not have the human resources to provide adequate maternal care across Canada. This is a critical problem. While we have increased the number of medical students, we have not increased the training of more specialists.
8. **The Health Information Highway:** This is another area where Canada lags behind. Our systems are archaic and need urgent attention.
9. **Advocacy for Women's Health:** This is crucial in the face of privatization and ongoing challenges, such as violence against women.
10. **Advocacy for a Better Working Environment:** Our members face tremendous challenges in providing excellent care everyday.

These examples constitute merely a few of the areas we need to address through constructive collaboration with our new Government. To succeed, the SOGC will need to rely on your help, energies and contacts as SOGC members.

It is my hope to present a strategy on these issues to SOGC Executive and Council. I am confident that we can work with the new Government to move forward this agenda.



### Executive Committee

- **President:** Dr. Michael Helewa, Winnipeg, MB
- **Past-President:**  
Dr. Gerald W. Stanimir, Mont-Royal, QC
- **President-Elect:**  
Dr. Donald B. Davis, Medicine Hat, AB
- **Executive Vice-President:**  
Dr. André B. Lalonde, Ottawa, ON
- **Treasurer:**  
Dr. Douglas Moreton Black, Ottawa, ON
- **Vice-President, Atlantic:**  
Dr. Scott Alexander Farrell, Halifax, NS
- **Vice-President, Ontario:**  
Dr. Guylaine Gisele Lefebvre, Toronto, ON

### Regional Chairs, Alternate Chairs and Other Representatives

- **Chair, Western Region:**  
Dr. Nicole Racette, New Westminster, BC
- **Alternate Chair, Western Region:**  
Dr. Sandra de la Ronde, Calgary, AB
- **Chair, Central Region:**  
Dr. Margaret Burnett, Winnipeg, MB
- **Alternate Chair, Central Region:**  
Dr. Annette Epp, Saskatoon, SK
- **Chair, Ontario Region:**  
Dr. Catherine MacKinnon, Brantford, ON
- **Alternate Chair, Ontario Region:**  
Dr. Richard Johnston,  
OSOG representative, Orillia, ON
- **Président, région du Québec:**  
Dr. Philippe-Yves Laberge, Ste-Foy, QC
- **Président suppléant, région du Québec:**  
Dr. Diane Francoeur, Montréal, QC
- **Chair, Atlantic Region:**  
Dr. Terry O'Grady, St. John's, NL
- **Alternate Chair, Atlantic Region:**  
Dr. Ward Murdock, Fredericton, NB
- **Public Representative:**  
Ms. Jane E. Caskey, Toronto, ON
- **Junior Member Representative:**  
Dr. Tiffany Wells, Edmonton, AB
- **Associate Members (MD) Representative:**  
Dr. Owen Hughes, Ottawa, ON
- **Associate Members (RN) Representative:**  
Ms. Sandra Gwen Christie, RN, Halifax, NS
- **Associate Members (RM) Representative:**  
Ms. Michelle Kryzanasuskas, RM, Stayner, ON
- **APOG Representative:**  
Dr. Wylam Faught, Edmonton, AB
- **Corresponding Member:**  
Lucie Pépin, Senator, Ottawa, ON

*The SOGC News is produced and published monthly by the SOGC. Comments and contributions are welcome and should be forwarded to the SOGC News, 780 Echo Drive, Ottawa, ON K1S 5R7; tel: 1-800-561-2416 or 613-730-4192 ext. 330; fax: 613-730-4314; e-mail: [nbickford@sogc.com](mailto:nbickford@sogc.com) or [mhaymes@sogc.com](mailto:mhaymes@sogc.com)*



# Upcoming Meetings

## SOGC Meetings

### 62<sup>nd</sup> Annual Clinical Meeting

June 22–27, 2006, Vancouver, British Columbia

### 18<sup>th</sup> Québec CME

September 28–30, 2006, Mont Tremblant, Québec

### 2<sup>nd</sup> Québec CME in Obstetrics

November 16–17, 2006, Montréal, Québec

### 25<sup>th</sup> Ontario CME

November 30–December 2, 2006, Toronto, Ontario



## Program Schedule 2006

Location .....	Date
Vancouver, BC .....	June 21–22 (in conjunction with ACM)
Sudbury, ON .....	September 29–30
Woodstock, NB .....	October 13–14
Cranbrook, BC .....	October 27–28
Toronto, ON .....	December 3–4 (in conjunction with ON CME)

## Other Meetings

**14<sup>th</sup> Annual Symposium - New Developments in Prenatal Diagnosis and Medical Genetics**, May 17, 2006 at the J.J.R. MacLeod Auditorium - University of Toronto. For more information contact Elizabeth Gan (416) 586-4800 ext. 2489. For more information visit [www.mtsinai.on.ca/seminars/ce](http://www.mtsinai.on.ca/seminars/ce)

La Leche League Canada presents “**What Newborns Know About Breastfeeding**” Seminar Series:  
 - June 12, Cambridge, Ontario  
 - June 14, Pembroke, Ontario  
 - June 16, Calgary, Alberta  
 For more information visit [www.LLCC.ca](http://www.LLCC.ca)

**Australasian Society for Ultrasound in Medicine 36<sup>th</sup> Annual Scientific Meeting**, September 15–17, 2006, Melbourne Australia [www.icms.com.au/asum2006](http://www.icms.com.au/asum2006)

The Foundation for Medical Practice Education, McMaster University, Ontario. **Accredited Small Group/Individual Learning Program**, ongoing. Contact Dina D’Ermo (905) 525-9140 ext. 22381 or 1-800-661-3249. For more information visit [www.fmpe.org](http://www.fmpe.org)

# JOIN US IN VANCOUVER for SOGC’s 62<sup>nd</sup> Annual Clinical Meeting

On June 22-27, the SOGC heads to Vancouver for its 62<sup>nd</sup> Annual Clinical Meeting (ACM). As SOGC’s flagship event of the year, the 2006 ACM promises six days of enlightening symposia, interactive debates and discussion, and fantastic social events in one of Canada’s most beautiful cities. **Highlights will include:**

**A Leading-Edge Scientific Programme:** Featuring expert speakers and faculty from around the globe, the 2006 ACM offers Symposia, Post Graduate Courses, Interactive Best Practice Sessions, Abstract presentations, Sub-Specialty sessions and more. These sessions explore a diverse field of relevant and current topics, including the newest developments in medicine and technological knowledge. Take the opportunity to network with colleagues and old friends, and participate in discussions with some of the world’s foremost experts in women’s health issues. Don’t miss this year’s President’s Symposium, “Hypertensive Disorders of Pregnancy: The New Horizons”.

The ACM has been accredited for 39 (RCPSC) Maintenance of Certification® credits and 39 MAINPRO-M1 credits. The American College of Obstetrics and Gynaecology has also assigned 39 COGNATE credits to this program.

**International Women’s Health Symposium:** A day-long event examining the challenges and

opportunities of providing Safe Motherhood and Newborn Health in the face of the HIV pandemic. Don’t miss keynote speaker Dr. David McCoy, Director of Global Health Watch.

**Cannell Lecture:** This year, we are honoured to welcome Dr. Robert Reid of Kingston General Hospital. Dr. Reid will be presenting this year’s Cannell Lecture “Doctors without Borders: Stewardship for Sexual and Reproductive Health in the Electronic Age”.

**President’s Award:** Join us in honouring Dr. Sid Effer, who will be recognized for his tremendous contributions to the Discipline of Maternal Fetal Medicine in Canada.

**A Superb Social Programme:** Explore and enjoy beautiful Vancouver. Our ACM Host Committee members have been busy year round arranging an exemplary lineup of social events for participants and their families.

**Much, much more:** Offering an extensive, customizable schedule of events, the 2006 ACM has something to offer everyone. The above highlights are just a small glimpse of the great program lineup the SOGC has prepared this year. For more information, including a complete 2006 ACM schedule, please visit [www.sogc.org](http://www.sogc.org) or contact the SOGC by phone at 1-800-561-2416 or by email at [events@sogc.com](mailto:events@sogc.com).

# THANK YOU! from the SOGC

The SOGC 62<sup>nd</sup> Annual Clinical Meeting is just around the corner and the SOGC has been hard at work to put together another fantastic program. At this time, we would like to acknowledge the financial support (the form of unrestricted educational grants) of our sponsors (as confirmed at time of printing):

## Diamond

- Wyeth Pharmaceuticals

## Platinum

- Berlex Canada, Inc.
- GlaxoSmithKline Inc.
- Janssen-Ortho
- Merck Frosst Canada Ltd.
- Organon Canada Ltd.

## Gold

- Duchesnay Inc.
- Eli Lilly Canada Inc.
- Procter and Gamble Pharmaceuticals Canada Inc.

## Bronze

- Ferring Canada Inc.



## PAST-PRESIDENT wins B.C.'s Community Achievement Award



Dr. Jan Christilaw, an active member and 58<sup>th</sup> President of the SOGC, was presented with a prestigious community service award by the Government of British Columbia.

Dr. Christilaw was one of 44 British Columbians selected from hundreds of nominations to receive the third annual B.C. Community Achievement Award.

Presented on April 26<sup>th</sup> at Government House in Victoria, B.C., the awards recognize the efforts and accomplishments of British Columbians who are making a difference in their communities.

"It is our privilege to recognize the work of the

individuals whose efforts and accomplishments help make British Columbia's communities better places to live," said B.C. Premier Gordon Campbell in a release promoting the awards. "We can all be inspired by their leadership, selflessness and determination."

In addition to her work on numerous SOGC committees, the tireless Dr. Christilaw has been involved in a wide spectrum of endeavors and initiatives. These include her work with Vancouver's Women's Hospital, the University of British Columbia, the Canadian Institute for Health Information, Planned Parenthood, the Collaboration for Maternal and Newborn Health,

and her practice in Little Rock, B.C.

The SOGC would like to congratulate Dr. Christilaw on this prestigious award, and thank her for her lifetime dedication to women's health and the practice of ob/gyn.

## IN MEMORIAM

The SOGC would like to honour a few of our members, colleagues and friends who have recently passed away:

- Dr. Morrie Gelfand, Quebec;
- Dr. André B. Marquis, Quebec;
- Dr. David Vaughan, British Columbia;
- Dr. Uma Viswalingam, Alberta;
- Dr. Harold Woolley, British Columbia;
- Dr. Jack Walters, Ontario.

## Congratulations DR. DIANE FRANCOEUR!

The SOGC would like to congratulate Dr. Diane Francoeur on her recent appointment as President of the Association des obstétriciens et gynécologues du Québec (AOGQ). Dr. Francoeur, who is also an active member of SOGC and SOGC Council, will replace outgoing AOGQ President Dr. Claude-A. Fortin.

The SOGC would like to thank Dr. Fortin for his dedicated efforts throughout his term, and also congratulate Dr. Francoeur on her appointment.

The SOGC looks forward to working with Dr. Francoeur in her new role and continuing to build on its strong relationship with the AOGQ.

## WELCOME new members!

The newest members into the SOGC family:

**Member ob/gyn:** Dr. Sana Tawati; Dr. Hassan Latifah; Dr. Kamal Elmallah

**Medical Student Member:** Momoe Hyakutake; Ms. Nerissa Tyson; Miss Alison Henry; Ms. Oluwatola Afolabi; Miss Ana Florescu; Ms. Sherry Yang; Mr. Dan Nayot; Mr. Darrien Rattray; Ms. Jeanelle Sabourin; Miss Nancy Dzaja; Miss Jacqueline Kraushaar; Mr. Adam Weathermon; Mr. Justin Khetani; Miss Jane Oh; Miss Christine Pickering; Ms. Susan Lee; Ms. Vanessa Bell; Miss

Michelle Lau; Ms. Michelle Jacobson; Ms. Brenda Sohn; Ms. Caitlin Dunne; Miss Salikah Iqbal; Dr. Louise Knowles; Ms. Taryn Woolsey

**Junior Member:** Dr. Salwa Neyazi; Dr. Sony Sierra; Dr. Erica Phelps; Dr. Astrid Christoffersen-Deb; Dr. Marie-Eve Carette; Dr. Andrew Stewart; Dr. Nermean Abdelrazek; Dr. Berenice Goorah; Dr. Ayman Abdulraheem Al-Talib

**Junior-Family Practice Resident:** Dr. Imane Bidari; Dr. Sivakumar Nagamuttu

**Associate Member RN:** Ms. Melanie Pastuck; Mrs. Charlene Yli- Juuti; Ms. Catherine Whiting

**Associate Member PhD:** Dr. Lori Brotto

**Associate Member MD:** Dr. Arlene Chan; Dr. Celine Gannon; Dr. Elizabeth Sawyer; Dr. Jennifer Moore; Dr. Jean-Francois Rostoker; Dr. Golbarg Araghi

**Associate Allied Health Care Member:** Mr. Tim Osland



## REFLECTING on a great year at the University of Alberta

By Dr. Carmen Young, PGY 2 Obstetrics and Gynecology, University of Alberta

Greetings from the University of Alberta Obstetrics and Gynecology program. It has been another fun and productive year here, both academically and socially.

We have had many recent additions to our program. We are excited to welcome Innie Chen, Natasha Sabur, Graeme Brassard, Sheila Caddy, Ariana Daniel, as well as Erin Bader who has joined our R2 year. Our faculty has also grown this year with the addition of former U of A graduates Drs Helen Steed (Gyne Onc), Sandra Baydock (Uro Gyne) and Tarek Motan (REI). We would like to welcome and thank them for their enthusiasm for teaching and involvement in our academic and extracurricular activities!

We have had an exciting academic year as well. Our year began with the appointment of our new program director, Dr. Sue Chandra, who has restructured our academic half-day program to involve a two-year seminar series involving a comprehensive review of obstetrics and

gynecology, an anatomy course, laparoscopic simulation, and increased staff involvement. Our research curriculum has also been revised by Dr. Schulz to conform with the new APOG research guidelines.

Our residents have also been excelling individually. Congratulations to Jillian Coolen who presented at the CREOG/APGO ACM in Orlando, Florida and who won the U of A Gold Humanism Excellence in Teaching Award. Kjerstin Gustafson presented at SMFM Reno and the SOGC ACM in Quebec City, winning 2<sup>nd</sup> place at SOGC. Kim Liu won the ACOG District VII Junior Fellow Essay contest "How my Ob/Gyn Mentor Influenced Me". Amanda Romanovsky completed an elective in Kenya after winning an SOGC Junior Member Elective Grant in International Health, and Tiffany Wells has been successfully leading the SOGC Junior Members Committee with a number of new initiatives as Chair. Congratulations everyone!

Despite our busy academic schedules, we have had some time for fun and social activities throughout the year. February brought us to Lilly Lake Resort for our annual Resident Retreat. We also look forward to our annual Research Day in May with visiting professor Dr. Graeme Smith, from the Division of Maternal Fetal Medicine at Queen's University.

Our chief residents are busy preparing for their Royal College examinations. We wish them good luck on their exams and in their future careers. Kim Liu will be pursuing a REI fellowship in Toronto, Kjerstin Gustafson will be practicing in White Rock, and Jill Griffiths, Hajira Danial and Dwaine Larose will be kicking off their career as general ob/gyns here in Edmonton.

We anticipate that the upcoming year will be as exciting and successful as this past year. On behalf of the U of A residents, we wish you all the best in your programs.

## NEWS from McGill

By Dr. Stephanie Bakare, PGY 3, Obstetrics and Gynecology, McGill University

With spring in the air and as another academic session nears its end, the buzzword here at McGill is change. In July, we welcomed Drs. Genevieve Lavois St. Gelais, Berenice Goorah, Beatrice Cormier, Ahmed Mousa, Abdul Al-Farsi and Abdul Al-Anjari to the fold and quickly got down to the business of learning.

Here at McGill, we are privileged to have weekly academic half-days – topics this year included a surgical skills workshop and certification in neonatal resuscitation. We also held Wyeth academic half-days in conjunction with Université de Montreal – this year, Drs. William Fraser and David Young were invited to talk on amnio-infusion and induction of labor, respectively.

This year, several residents were given the opportunity to present their work at various conferences – Drs. Shauna Reinblatt, Evelyne

Caron and Haim Abenheim each presented their work at the SOGC Annual Clinical Meeting in Quebec City and the AOGQ research day. Dr. Stephanie Bakare presented at the European Society of Gynecological Oncology meeting in Istanbul. Although McGill conceded defeat to Laval at this year's Quebec Inter-University debate, the idyllic surroundings of Lac Sacacomie and the opportunity to boogie the night away with Quebec's finest residents more than made up for our loss!

There will also be some anticipated changes to the upcoming academic year, including a 10-week research block during our academic half-days that has been designed by Dr. Helen MacNamara. In addition, we plan to institute a night float team to take over call duty each month. This will ensure that coverage of our various service units will not be disrupted by

residents being off post-call. Sadly, we will be saying goodbye to Dr. Lucie Morin as program director at the end of this year. Under her direction, our yearly residents' retreat was instituted, our program became more open to dialogue between residents and staff, and several residents were supported in their pursuit of additional academic qualifications during residency. We feel we have a strong program that fosters individual growth and we look forward to a favorable outcome at the upcoming Royal College accreditation.

Finally, I want to take this opportunity to wish our outgoing residents the best of luck in their exams and careers. We thank Drs. Haim Abenheim, Tamima Al-Dughaiishi, Tareq Ashour, Evelyne Caron, Souzan Kafy, Violaine Marcoux and Emad Sagr for their mentorship over the years.



## RESIDENT LIFE

### Fun in Residency: It is Possible!

As ob/gyn residents, we often invest so much time and energy into work and study that we neglect the very part that helps to keep our lives balanced - FUN! Resident social activities provide us with a chance to recharge our batteries, so our clinical and academic time is optimally productive. The SOGC Junior Members Committee asked residents what they do for fun within their programs. Here's what residents told us they do to unwind:



**Scholarly activities, with a social twist:** journal clubs, evidence-based medicine evening rounds, and visiting speaker presentations. These are usually

held at a faculty member's home, a restaurant or occasionally in a hospital meeting room. Other great ideas include research day banquets, resident retreats, sub-specialty social events, and wine and cheese during CaRMS.



**Organized sporting events:** residents vs. residents or staff vs. residents, sports give us a chance to exercise and work out some of our frustrations! In some departments, residents and staff members participate as team entries in events such as the NOCA Walk, Run for the Cure, or the Weekend to End Breast Cancer. Other great ideas include annual golf tournaments, curling

bonspiels and regular hockey games or bowling nights.



**Holiday festivities:** part of virtually all departments and programs across the country. Most organize a Christmas party, dance or banquet where residents and staff prepare and present skits. Some programs host a resident gift exchange or secret santa.



**Food and drink:** lunch on half-days, dining out, potlucks, birthday parties, and pub nights are popular and informal events that you wrote about. Welcome barbecues for incoming residents and farewell banquets for outgoing chiefs are also a tradition in many Canadian ob/gyn programs.

We are all working long and hard hours... so remember to make time for fun too. We hope we've given you and your program some strategies for contributing to resident well-being through informal and formal social events. So get out there, play safe, and have fun!

## Congratulations elective grant winners!

The SOGC would like to congratulate the winners of our Spring Junior Member Elective Grants: **Dr. Colleen McDermott** - Berlex Junior Member Elective Grant; **Dr. Louai Jony** - Duchesnay Junior Member Elective Grant

Our winners will be recognized at the 62<sup>nd</sup> SOGC Annual Clinical Meeting in Vancouver, as part of the 2006 SOGC Awards Ceremonies. The Awards Ceremonies will be held on June 26, 2006.



## 5<sup>th</sup> Annual Run for Her Life™ REGISTER NOW!



**What is Run for Her Life™?** It is a 5 km run/ 3 km walk organized by the Society of Gynecologic Oncologists of Canada (GOC). It is held during the Annual Clinical Meeting of the Society of Obstetricians and Gynaecologists of Canada. Proceeds from registration fees will be donated to benefit a local initiative for cancer patients.

**Goals of the Run for Her Life™:** to increase awareness of ovarian cancer • to demonstrate commitment to wellness and fitness • to enjoy the local environment with our GOC & SOGC colleagues

**When and where is the Run for Her Life™?** On Sunday, June 25, 2006 at 7:00 am at the Westin Bayshore Hotel in Vancouver. We will enjoy scenic Stanley Park, be refreshed to start a day of professional development, and take away a useful and attractive souvenir.

**How do I register? (Pre-registration is requested)**

- download the registration and waiver forms from [www.g-o-c.org](http://www.g-o-c.org)
- request the forms by calling our National Office at 1-800-561-2416 ext. 250 or by email at [hsoubliere@sogc.com](mailto:hsoubliere@sogc.com)
- register on-site at the Westin Bayshore Hotel on

June 23<sup>rd</sup> from 13:00 – 15:00; June 24<sup>th</sup> from 7:45 to 16:30 (at the GOC registration desk); or June 25<sup>th</sup> from 6:30 to 7:00.

**Registration fee:** There is a \$25 registration fee.

**"Collector" souvenir to the first 100 registrants!** Pre-registration is strongly advised as there is a limited supply of "collector" gifts for registrants!

This is a GOC initiative and is supported by GlaxoSmithKline - but the most important support will come from you - our members and friends. Families and friends welcome.



## HIGHLIGHTS from the 2<sup>nd</sup> Gynaecology Ontario CME

By Linda Kollesh, Scientific Programme Officer; Isabelle Denis, Meeting and Event Planner; and Dr. Charmaine Roye



Left to right: Cheryl Main, Jennifer Blake and Ellen Greenblatt

Back by popular demand, the SOGC hosted the 2<sup>nd</sup> Gynaecology Ontario CME Programme at the Toronto Marriott Downtown Eaton Centre on April 7-8, 2006.

Event participants were given the opportunity to attend leading-edge presentations on a wide-range of updated procedural techniques, new practice guidelines, clinical dilemmas, and more. Highlights included presentations on uterine artery embolization, new practice guidelines for HSV and STIs, and menstrual suppression.

A presentation by Dr. Wendy Wolfman on the management of asymptomatic endometrial

thickening was also very well received by participants, and a request for a new clinical guideline on this topic was suggested.

In addition, participants were also given the opportunity to engage in thought provoking sessions on topics such as privacy issues, ethics, and the latest updates on genetic profiling and its implications.

Another highlight for attendees, as indicated by course evaluations filled out by participants, were the event's interactive breakout sessions, where attendees discussed the management of difficult cases.

The SOGC wishes to extend its sincere gratitude to the Ontario Regional Committee members, faculty, sponsors and delegates. Your dedicated support and contributions are integral to the success of SOGC's CME programmes.

Remember to mark your calendars for the 25<sup>th</sup> Ontario CME Programme, which will be held at the Toronto Marriott Downtown Eaton Centre on November 30 – December 2, 2006.

Please visit our website, [www.sogc.org](http://www.sogc.org), for updates on all of our CME events.

## RM REPORT: Supporting misoprostol use for postpartum hemorrhage

By Michelle Kryzanauskas, RM

The RM Advisory Committee has continued to work on a number of initiatives that we would like to report to the membership of the SOGC.

The committee is currently developing a letter to the Canadian Midwifery Regulators Consortium and provincial regulators in support of the availability of misoprostol (cytotec) as a second-line drug for postpartum hemorrhage for midwives across Canada. The committee has taken on this work in light of the available scientific evidence supporting the use of misoprostol for this purpose, as well as the loss of availability of ergonovine maleate in Canada. Most midwives in Canada work in both hospital and out-of-hospital settings. Misoprostol is in a stable tablet form, easily administered, financially accessible, and would enhance the management of postpartum hemorrhage by Canadian midwives.

The RM Advisory Committee is also pleased to announce that it has recently completed the SOGC Registered Midwife Advisory Committee Manual. The manual was approved at SOGC Council in March and will assist newly nominated and current associate members in their roles on the Registered Midwife Advisory Committee.

The manual details the history of the SOGC and the Associate Midwife membership, the RM Advisory Committee and the evolution of the midwifery profile at the SOGC. It also provides an overview of the SOGC's governance structure and organizational details of the SOGC's national office staff. The manual defines the RM Advisory Committee's terms of reference, and also defines the Associate Midwife membership based on SOGC bylaws. In addition, the manual details the chair's responsibilities to the Council of the SOGC

and to the midwifery membership throughout Canada.

The RM Advisory Committee would also like to report that it is now providing regular contributions to the Canadian Journal of Midwifery Research and Practice. The brief articles will highlight midwives and their work at the Society.

Finally, committee members continue to support the work of the western and central midwife representatives as they fine tune their work on the RM sub-specialty presentation on birth centers. Please join us for this presentation, which will be delivered as part of the SOGC Annual Clinical Meeting in Vancouver this June. The presentation will also be followed by a joint discussion with the RN sub-specialty group on Multidisciplinary Education of the Future.

# The 16<sup>th</sup> West Central CME

By Linda Kollesh, Scientific Program Officer, and Isabelle Denis, Meeting & Event Planner



*The SOGC was pleased to welcome this year's youngest participant, three-week old Katherine Anne Lavery*

It is hard to imagine a better setting for this year's West Central CME, held in Banff from March 30<sup>th</sup> to April 1<sup>st</sup>. Between our superb hotel, the fantastic weather conditions ideal for skiing, and, of course, the friendly atmosphere surrounded by friends and family, Banff certainly did not disappoint.

Highlights of the scientific programme included sessions on Umbilical Cord Blood Banking, the SOGC's new menopause and osteoporosis

guidelines, updates on experimental HPV vaccines, and PHAC's highly anticipated STI guidelines.

The always-popular and interactive Best Practice Sessions also provided participants an opportunity to share their thoughts and experiences on topics such as endometriosis management and a case discussion on medical-legal importance.

The SOGC was also pleased to welcome special guest speaker Mr. Michael Epp, Director of Policy & Planning for the BC Medical Association. Highlight presentations were also made by Dr. Douglas Bell, Dr. Victoria Allen and Dr. Deborah Money, to name but a few of the events wonderful speakers.

*"The West Central Regional Meeting is a wonderful venue, offering lots of opportunities to meet new friends and socialize with long time colleagues, while enjoying the natural beauty of the Canadian Rockies. The scientific program covered a wide variety of contemporary topics which was suitable for all women's health care providers, from medical students to the experienced obstetrician gynaecologist."*

*Nicole Racette  
Chair of the Western Regional Committee*

*"This meeting is one of the best kept secrets in women's health and ob/gyn, held in one of the*

*finest hotels in Canada deep in the beautiful Rockies. The warm friendly atmosphere, great education, the meeting of old friends and new friends brings me back year after year."*

*Thomas Corbett  
Secretary of ASOG*

At the request of the participants, the WC CME will be returning to Banff's Rimrock Hotel next year. Tentative dates for the 17<sup>th</sup> West/Central CME are March 29-31, 2007. These dates are yet to be confirmed.



*Annette and Michael Epp*

## MORE<sup>OB</sup>, benefits schedule discussed at ASOG meeting

By Martine Roy, MD, SOGC Representative, ASOG

In conjunction with the SOGC's 16<sup>th</sup> West/Central CME, the Alberta Society of Obstetrics and Gynaecology (ASOG) held their annual meeting in Banff, Alberta, on March 31, 2006.

Twenty-one members of the Society from all corners of the province met to review concerns and progress in the provision of care to Alberta's women. ASOG was also pleased to welcome Drs. Vyta Senikas and Michael Helewa of the SOGC, as well as SOGC President-Elect and ASOG member, Dr. Don Davis.

Highlights of the meeting included the recognition of the MORE<sup>OB</sup> program, which has been launched throughout the province with the support of Alberta Health and Wellness. (The program also provides CPD credits, particularly for Sections 3 and 4 of the new cycle of the Royal College Maintenance of Certification Program).

Other issues discussed at the meeting were EHR developments and schedule of benefits changes. Motions were passed that encourage

the involvement of sub-specialists in the society, and support was given for a proposal to add single-embryo-transfer IVF as an insured service. Following the meeting, our group also enjoyed a lovely meal and conversation at the hotel's delightful Primrose Restaurant.

The next meeting will take place on October 19, 2006, in Red Deer. All Alberta ob/gyn specialists are invited to attend. For more information, please contact Dr. T. Corbett, Secretary of the ASOG, at [tfxcorbett@hotmail.com](mailto:tfxcorbett@hotmail.com).



# YASMIN

## Different by design

**The only oral contraceptive that combines 30 µg ethinyl estradiol and 3 mg drospirenone\*†**

† Comparative clinical significance is unknown.

YASMIN:

- Contains drospirenone, a spironolactone analogue with antimineralocorticoid activity<sup>1\*</sup>
- Effective contraception with demonstrated excellent cycle control<sup>1-3†§</sup>
- Generally well tolerated, with a low incidence of discontinuation reported due to adverse events (6-10.7%)<sup>1-4§¶\*\*</sup>

‡ Pearl Index of 0.41-0.71. Incidence of intermenstrual bleeding for YASMIN vs. ethinyl estradiol/desogestrel (Cycle 1, 22.96 vs. 21.37; range for Cycles 2-12, 4.9-8.5 vs. 4.99-10.38; p=ns.)

Pr **YASMIN**® with  drsp/ee

drospirenone/ethinyl estradiol

\* YASMIN contains 3 mg of the progestogen drospirenone that has antimineralocorticoid activity, including the potential for hyperkalemia in high-risk patients, comparable to a 25 mg dose of spironolactone. YASMIN should not be used in patients with conditions that predispose to hyperkalemia (i.e. renal insufficiency, hepatic dysfunction and adrenal insufficiency). Women receiving daily, long-term treatment for chronic conditions or diseases with medications that may increase serum potassium, should have their serum potassium level checked during the first treatment cycle. Drugs that may increase serum potassium include ACE inhibitors, angiotensin-II receptor antagonists, potassium-sparing diuretics, heparin, aldosterone antagonists, and NSAIDs.

YASMIN is indicated for conception control.

YASMIN is contraindicated in patients with renal insufficiency, hepatic dysfunction, or adrenal insufficiency and in patients with known or suspected pregnancy, history of or actual thrombophlebitis or thromboembolic disorders, cerebrovascular disorders, myocardial infarction or coronary arterial disease, liver disease or liver tumour, known or suspected carcinoma of the breast, known or suspected estrogen-dependent neoplasia, undiagnosed abnormal vaginal bleeding, any ocular lesion arising from ophthalmic vascular disease, such as partial or complete loss of vision or defect in visual fields.

Please refer to Product Monograph for complete contraindications.

The following adverse reactions have been reported in patients receiving oral contraceptives: nausea and vomiting, usually the most common adverse reaction, occurs in approximately 10% or fewer of patients during the first cycle.

Adverse reactions reported with the use of oral contraceptives are seen less frequently or occasionally: abdominal cramps and bloating, breakthrough bleeding, spotting, change in menstrual flow, dysmenorrhea, amenorrhea during and after treatment, breast tenderness, breast enlargement and a change in weight.

Cigarette smoking increases the risk of serious adverse effects on the heart and blood vessels. This risk increases with age and becomes significant in birth control pill users over 35 years of age. Women should be counselled not to smoke.

Oral contraceptives **do not protect** against sexually transmitted diseases (STDs) including HIV/AIDS. For protection against STDs, it is advisable to use latex condoms in **combination with oral contraceptives.**

§ A randomized, open-label, 13-cycle study, evaluating contraceptive reliability, cycle control and tolerability of YASMIN (30 µg ethinyl estradiol/3 mg drospirenone) compared to 30 µg ethinyl estradiol/150 µg desogestrel in 2,069 women aged 18-35 years.

¶ Open-label, multicentre study over 13 treatment cycles evaluating the efficacy, safety and cycle control of YASMIN in 326 women.

\*\* Open-label, multicentre trial over 26 treatment cycles evaluating 900 healthy women between 18-35 years of age on the efficacy, cycle control and tolerance of 30 µg ethinyl estradiol and 3 mg drospirenone with 30 µg ethinyl estradiol and 150 µg desogestrel.

Product Monograph available upon request.  
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# ALARM INTERNATIONAL IN UGANDA: Perspectives from a first-time volunteer

By Ann Lovold

In late January, I was grateful to be given the opportunity to work with the SOGC to support the Association of Obstetrician and Gynaecologists of Uganda (AOGU) in providing education and outreach to obstetrical care providers in Uganda.



Uganda has one of the highest maternal mortality rates in the world, and hospitals and health centres desperately lack resources. Women often lack even the most basic levels of care. In rural areas, over 60% of women have no access to health services at all, and receive care from an untrained birth attendant or family member. On a regular basis women are dying of the “big five” causes: hemorrhage, sepsis, unsafe abortion, hypertensive conditions and obstructed labour. Yet, among this all, I was encouraged to work with a dedicated team of ob/gyns and midwives willing to learn and work hard to improve the situation.

During my short trip, ALARM International Program (AIP) Assistant Director John Smith and I delivered two courses: an instructor’s course for 17 ob/gyns and one midwife in Kampala, and an AIP course for 35 midwives in the more rural

district of Masaka. Our goal for these courses was to allow AOGU members to lead in the training, and to offer assistance and evaluate the AOGU’s capacity to offer the program on their own.

For a Canadian healthcare professional in Uganda, the differences in adult learning are readily apparent — Uganda’s deeply embedded hierarchies offer a sharp contrast to the interactive, multidisciplinary nature of training courses offered in Canada. In this respect, courses like ALARM International can provide a strong model for developing ob/gyn societies such as the AOGU. In Uganda, midwives perform most of the deliveries, so it makes sense that they should play a central role in training. For this reason, it was a great pleasure for me to witness the first Ugandan midwife graduate from the ALARM instructors’ course.

The AOGU performed fantastically, but those of you who have taught in a developing country will know the unique challenges it presents. Traveling two days to Kampala and two days home, we had only six jet-lagged days to deliver two courses. (John says the Ugandans must laugh as they put up with us “type A” personalities flying over from Canada and wanting everything to be done fast and efficiently). Once there, we faced power outages, the breakdown of the course’s only printer, and an 8:30 am starting time that might actually mean something more like 9:30 am.

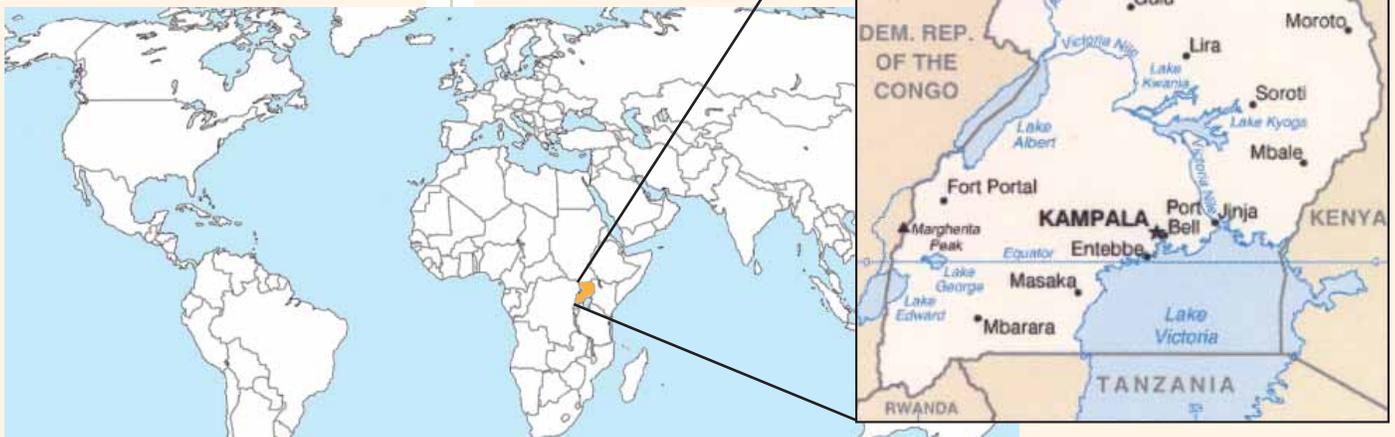
One of the biggest challenges was that the participants



lacked the resources to integrate what they were learning into their daily work. Many of the health centres represented by the participants are not equipped with oxytocin, magnesium sulfate, infant resuscitation equipment or even electricity or running water. Also, many of the emergency situations we discussed require a transport to the district hospital, but the health services lack an ambulance system.

My favorite memory of my trip — aside from doing the OSCEs outside under the palm trees — is marking the exams during our three-hour drive from Masaka. We crossed the equator pushing through 35 exams — all the while our van careened over potholes and swerved around the cows, goats and children dotting the road. We also caught glimpses of the most beautiful sunset over the gorgeous East African landscape.

My main thought when I recall this? I can’t wait to go back.





## NEW from the SOGC!

The SOGC is adding to its collection of patient education brochures. In April, we added new brochures on Vaginal Birth After Caesarean

Section (VBAC), Breast Pain, and Umbilical Cord Blood Banking. Visit [www.sogc.org](http://www.sogc.org) for ordering information or to view our full line of printer-friendly brochures.



## IJGO NAMES new editor

The International Federation of Obstetrics and Gynecology (FIGO) has appointed Dr. Tim Johnson from the University of Michigan as the new editor of the International Journal of Gynecology and Obstetrics (IJGO).

Dr. Johnson will commence his six-year term as editor beginning Sept. 1, 2006, replacing current editor Dr. John J. Sciarra. To ensure a suitable handover period, Dr. Sciarra will continue in his role at the IJGO until August 2007.

# 62<sup>nd</sup> Annual Clinical Meeting

June 22-27, 2006

How to register? Register on-line at [www.sogc.org](http://www.sogc.org)

**Book your hotel soon**  
**Deadline Date: Monday, May 15, 2006**

Hotel Reservations by phone: 1-800-westin1  
Group Code: SOGC

- Main Building - Standard Room:  
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- Tower Building - Deluxe Room:  
\$215 single/double occupancy

**NOTE:** SOGC cannot guarantee availability and room rates after the deadline has passed and the reserved room block has been sold out.

For more information regarding the scientific programme, please visit our website [www.sogc.org](http://www.sogc.org) or email us at [events@sogc.com](mailto:events@sogc.com)



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