

CSAPS ANNUAL GENERAL MEETING
September 17th, 2011 Calgary
MINUTES

The meeting was called to order by President, Dr. Elizabeth Hall-Findlay. In attendance: Dr. Abdul Atiyah, Dr. Gilles Beaugregard, Dr. Lorne Brown, Dr. Bryan Callaghan, Dr. Earl Campbell, Dr. Lloyd Carlsen, Dr. Wayne Carman, Dr. Nicholas Carr, Dr. Robert Dubois, Dr. Ezat Hashim, Dr. John Hasell, Dr. Normand Houle, Dr. David Kester, Dr. Anthony Lockwood, Dr. Peter Lennox, Dr. Frank Lista, Dr. Sandra McGill, Dr. Hugh McLean, Dr. Livia Montalin, Dr. Wayne Perron, Dr. Brian Peterson, Dr. Sandy Pritchard, Dr. Sammy Sliwin, Dr. Felix Tetu, Dr. Robert Tokaryk, Dr. Hanif Ukani, Dr. Stan Valnicek, Dr. Nancy Van Laeken, Dr. Greg Waslen

According to the bylaws, quorum constitutes 25% of the voting membership. With only 30 members present, it was decided to proceed with the meeting and send ballots to the entire membership for voting.

No further items were added to the agenda for discussion.

Motion to approve minutes of AGM 2010 by Dr. Lista, Seconded by Dr. Kester.

Business arising from the minutes AGM 2010 -

Foundation Update. To date there has been no progress. The executive will contact Dr. Steve Morris who recently started the Ross Tilley Foundation to see what his experience was and how it was accomplished and what his experience was.

Beauty for Life We are getting 2-3000 hits per month and 50-70 requests for referral coming from that web site. ASPS /ASAPS have withdrawn their financial support. The site will remain up, but won't be optimized. Starting in August the site will not incur any costs to the Society..

Legal registration of Logo. The legal registration of the logo has been finalized. We currently have an application for new trade name, without the (Cosmetic).

Agreement with ASJournal- We now have an official agreement with the ASJ to give our members discounted subscription rates and offer free advertising of our meeting. Journals were to be handed out to all registrants at our meeting, but weren't shipped. CSAPS will supply Sage Publications with a list of registrants and they have agreed to mail copies of the journal to them.

President's Report - Dr. Hall-Findlay's

Every year presents new challenges and mine this year were ALCL (anaplastic large cell lymphoma), advertising of prescription drugs such as Botox and Latisse, and Canadian Immigration rules preventing our visiting surgeons from coming into the country without having undergone an immigration medical and receiving an appropriate visa.

I would like to thank Wayne Perron for (again) providing his surgical facility for the meeting and for doing the lion's share of the work in setting up the program, arranging the patients, and making sure that all the details were in order.

My job would have been impossible without the help and direction of Pat Hewitt. She always keeps a low profile, but don't let that be misleading – she is the person who keeps the Canadian Society for Aesthetic Plastic Surgery functioning. Not only does she handle the website, organize the finances and coordinate each annual meeting, but she ensures that the visiting surgeons have the appropriate licences and malpractice insurance in place. Pat coordinates requests from reporters so that our specialty can be properly represented in the media.

1. Anaplastic Large Cell Lymphoma:

This unusual lymphoma found in breast implant capsules was first announced officially by the Food and Drug Administration in the United States in January 2011. We had heard about some cases associated with aggressively textured implants as presented by Dr Garry Brody over the last few years, but now the problem was being announced to the public by the FDA but without a real understanding of the issue and without clear guidelines for us as practising plastic surgeons. David Jewer, President of CSPS, and I approached the CMPA for help but unfortunately the result was actually more confusion. Of course they took a view that covered all the bases but one which we thought was impractical for dealing with patients in our practices.

David and I decided to act together in coordinating the advice to give to both our member societies. I met with the CSPS Board at the IPRAS meeting and CSPS meeting in Vancouver and we worked out a joint statement that was sent to all members.

It was important that we keep open-minded and not dismiss the problem of ALCL. At the same time we did not want to see a repeat of the public hysteria that occurred around breast implants and auto-immune diseases in the 1990's. Fortunately, the FDA statements were helpful in saying that breast implants are safe when used as directed and that there is no association between silicone implants and autoimmune diseases. We should all be vigilant and have any unusual findings in breast implant capsules tested and have any late seromas analyzed for cytology if indicated.

2. Advertising of Prescription Drugs (Botox and Latisse):

Health Canada wrote to all the provincial Colleges asking them to remind physicians that advertising of prescription drugs is prohibited in Canada. It had not occurred to me that some of us were in violation of the law – but what actually is the law? It is

not clear. Botox and Latisse are prescription drugs. Injectables and fillers are “space occupying products” and are not regulated as drugs but fall into the same category as breast implants. We can advertise these latter products on our websites.

My talk with the College Registrar in Alberta was not particularly helpful and I was told that they would only respond to complaints. It would make no sense for a society like ours to ask our members to follow certain rules when others (normally not members of any specialty group) were still advertising in contravention of the law.

I talked with Advertising Standards Canada (one of the two self-regulatory bodies offering pre-clearance review on marketing materials for the Pharmaceutical industry). The regulatory framework is different when we deal with “patients” versus “consumers”. Once a patient has entered our offices (and not just sitting in the waiting room) we can give them all the information that we want. But we cannot “advertise” to a consumer until they are a real “patient”. Generally we are only allowed to present certain information on prescription drugs to the public – specifically a name, a price, and a quantity. We cannot have brochures that say that we use Botox to treat wrinkles (for example) in the waiting room, but we can have them in the patient examination rooms. We can, however, send information to our patients. There are ways to “gate” our websites so that we only allow “patients” to proceed to areas with information advertising drugs such as Botox. They may need a codeword to enter the site as a “patient” and not as a “consumer”.

Any direct-to-consumer information must be balanced with all options presented. It must consist of information and not advertising. *A full balanced discussion* is important with all the different ways presented to treat certain problems. This information needs to include pros and cons of treatment along with risks. ASC suggested that an example such a balanced website is www.faceinstitute.ca It is important to remember that advertising of any off-label uses are prohibited.

3. Relationship with ASAPS (American Society for Aesthetic Plastic Surgery):

We have had to work to maintain a relationship with ASAPS. We had established that we would be able to give welcome remarks from CSAPS at the ASAPS meeting, but we were left off the schedule this year. Wayne Perron helped to re-establish this relationship at the ASAPS members meeting and I asked Wayne to participate as our liaison until we could formally vote someone into the position. We also asked that Monte Eaves be the ASAPS representative to our society. This may take ongoing work to remind them of our existence.

We have an opportunity to work with ASAPS for obtaining both CME and patient safety credits as well as being able to tap into their Visiting Professor program.

4. Videotape Library:

I would – again – like to thank Ezat Hashim for all his hard work on updating our video library and improving access for members. We are truly fortunate to have him both for his knowledge and for his hard work in putting it all together.

5. Live Surgery:

Our live surgery program is the highlight of the meeting and it is definitely the aspect of our society that is unique and highly valued and it is something that we should work hard to promote. It is, however, very expensive and I propose that we discuss the possibility of having it run in alternate years – or somehow change the format. I have no definite ideas of how this should be done, but it is something that we should discuss.

We can take advantage of the ASAPS Visiting Professor Program to help. They do have requirements for a definite resident teaching component and we would need to incorporate that into our program.

6. Membership Benefits:

Other membership benefits are also critical to our Society. The Canadian Journal of Plastic Surgery is the official journal for CSAPS in Canada and the Aesthetic Surgery Journal is the official journal of CSAPS in the United States. The Aesthetic Surgery Journal offers substantially discounted subscriptions to members of affiliate societies. The subscription rates for 2012 have changed slightly, as outlined below. These changes will go into effect on September 1, 2012.

Print + Online Subscription: \$184 – *a 35% discount from the regular individual price!*

Online-Only Subscription: \$93 – *a special offering only available to members of affiliated societies!*

Orders can be placed online by clicking on the following link: <http://secured.sagepub.com/asj.html>.

Beauty for Life website. There was a cost per member over the past trial year, but as of August the site will not have the sponsorship of ASAPS/ASPS and we will not incur further costs.

7. Policy on Teaching Non-Cores:

ASAPS is working on a policy on teaching “non-cores” plastic surgery procedures. We should coordinate our policy with theirs and we are working on developing a policy for the ethics bylaws.

8. Malpractice Insurance for US residents:

American Benefits Inc. would like to develop a program for malpractice insurance for US patients. The first step is to determine if there is an interest for CSAPS members for this coverage so they could potentially and safely increase their business by soliciting US patients. To this end they have developed a very brief and concise survey. There was enough response from the membership to warrant developing a program.

I leave my position as President somewhat surprised at how quickly the year has gone, but confident in the knowledge that Felix Tetu will set a higher standard and run an excellent program next year in Quebec – as long as he stays away from errant cars while on his bicycle!

Vice-President's Report – Dr. Felix Tetu reported that the 2012 meeting will be in Quebec City at Place de la Cite, which is a private clinic with 2 large O.R.'s. Dr. Normand Houle will be the local host and the host hotel will be the Chateau Frontenac. We are going to take advantage of the ASAPS visiting professor program, which will pay for the travel expenses for the surgeon as long as we have a portion of the program designated to resident teaching

Secretary's Report – Dr. Waslen presented the following list of candidates for membership

Dr. Michael Kreidstein Toronto, Ontario	Sponsors :	Dr. Lloyd Carlsen Dr. Nouri Shammass
Dr Kris Ledding Regina Saskatchewan	Sponsors :	Dr. Peter Chang Dr. Blair Mehling
Dr. Stephanie Olivier Winnipeg, Manitoba	Sponsors :	Dr. K. Dolynchuck Dr. Robert Turner
Dr. Richard Robinson Nanaimo, British Columbia	Sponsors :	Dr. Leslie Kerluke Dr. David Kester

No objections were received following circulation of this list to the membership for consideration. It was moved by Dr. Lista, Seconded by Dr. Hashim to accept the candidates for membership.

Treasurer's Report - The treasurer's report is attached. Of note, the decrease in income for educational sponsorship is due to the fact that the conference planners are now looking after all exhibitor registrations and collecting fees on our behalf, and will reconcile with CSAPS post meeting. We received \$60,000.00 in sponsorship from Mentor and Allergan. Dr. Waslen also pointed out that our office operating expenses (total expenses less the meeting expenses) are higher than our income from annual dues and proposed an increase of \$100.00 per member for 2012 for a total of \$500.00 per year. We will try to expand our corporate sponsorship levels and actively solicit new corporate sponsors. Treasurer's report moved accepted by Dr. Sliwin, seconded by Dr. Peterson. Motion to reappoint accounting firm Wade and Partners by Dr. Sliwin, seconded by Dr. Hasell.

Historian's Report – Dr. Pritchard sadly reported the death of three colleagues in the past year. In April Dr. Nelson Gauto died suddenly as the age of 46. This September Dr. Ken Clarke one of the 6 original founding members of CSAPS passed away at his home in Toronto. More recently, Dr. Leith Douglas passed away on Thursday September 15th at the age of 80. Although not a member of CSAPS he was a well recognized and respected by the plastic surgery community.

Parliamentarian's Report – Dr. Carr reported that an additional role of parliamentarian will be to review the website, and he has agreed to assist with this for the coming year.

Committee Reports:

Education – ACLS course April 2011 in Toronto / Sept. 15th Calgary. Dr. Mark Mensour now organizing on his own (collaboration with CSAPS on appropriate dates)

Ethics /Judicial– Dr. Hall-Findlay – Dr. Hall Findlay reported two issues that needed to be dealt with through the year. Dr. Yazdanfar cited Dr. Jugenberg for unethical behaviour for his comments regarding the liposuction death case.

Dr. Mahmood Kara's name was attached to a skin care website contest, which he said he had no knowledge about. Both cases were dismissed as not being in violation.

The proposed amendment to by-law to vote on composition of judicial council and ethics committees is attached.

This is a joint bylaw with the CSPA and has been approved by them at their past AGM and requires ratification by our society as well. Move to approve amended bylaw by Dr. Sliwin, seconded by Dr. Lockwood.

Public Relations - Dr. Tetu, Dr. Waslen and Dr. Pritchard – will continue act in official capacity as spokespersons for the society, representing across Canada.

Nominating - Dr. Carman presented the following slate of officers for the next term:

President –	Dr. Felix-Andre Tetu
Past President –	Dr. Elizabeth hall-Findlay
Vice-President	Dr. Greg Waslen
Secretary/Treasurer	Dr. Sandy Pritchard
Historian-	Dr. Nicholas Carr
Parliamentarian	Dr. Julie Khanna
Judicial council	Dr. Thomas Bell and Dr. Richard Warren (Three year term)
Ethics Committee	Dr. Scott Barr, Dr. Tim Sproule, Dr Ezat Hashim and Dr.Elizabeth Hall-Findlay (three year term)

Motion to approve by Dr. Sliwin, Seconded by Normand Houle. All present approved.

13. New Business

- a) Collection of ballots for Ralph Millard Award for best presentation at the meeting as well as best Canadian presentation.
- b) Member at large: to keep collaborative involvement of ASAPS with the CSAPS, a member of ASAPS to be invited to CSAPS board meeting and meeting (no charge) If this delegate is unable to attend, we will ask the visiting professor to sit in at the meeting. Dr. Wayne Perron currently is our liaison on the ASAPS board and has agreed to stay on in this position.
- c) The executive decided that we would institute CSAPS Distinguished Service Award, the first recipient to be Dr. Lloyd Carlsen. This award will be presented at the President's banquet. This award will not be an annual award, but will be presented to members as felt warranted.
- d) Dr. Hashim updated us on the status of our video library. The current format is difficult to maintain as securities must be tested on windows/mac and all search engines. Flash is now being banned and our web site is flash based, so it did not make sense to redo the web site, but recreate it in an iOS format. Dr. Hashim demonstrated a mock up of an iOS app that would be on an ipad that you would click on and go directly to the surgery library. It would be secure in that only members with registered licenses could get into the site. Various methods of generating some additional income from the library were discussed, but we have to be mindful of privacy issues. Sample videos must not have face identification.
- e) Local host report. Dr. Waslen reported on the live surgery portion of the meeting which was held at his facility. This was a huge production with tremendous AV quality. We have worked hard to get the live surgery production to this standard and we should continue this every year. It was suggested that we try to use head cams for those procedures where we need to see the tunneling., but need ones that can be switch on and off as necessary as they are difficult to control. The offset the huge expense for the AV, we will try to maximize our attendance by applying to ASPs for endorsement and accreditation (which they would not do this year as we were too close to their meeting) and as members being proactive and encouraging colleagues to attend.
- f) **Future meetings will be held** 2012 Quebec City - September 14, 15
2013 Vancouver- Sept. 20, 21
2014 Toronto – date TBA

There was not further business to discuss and the meeting was moved adjourned by Dr. Peterson, seconded by Dr. Kester