

CANADIAN OPHTHALMOLOGICAL SOCIETY

# ANNUAL REPORT

# 2018



Canadian Ophthalmological Society | Société canadienne d'ophtalmologie

EYE PHYSICIANS AND SURGEONS OF CANADA | MÉDECINS ET CHIRURGIENS OPHTALMOLOGISTES DU CANADA

# MESSAGE FROM THE PRESIDENT AND EXECUTIVE DIRECTOR/CEO

**COS is the recognized medical authority on eye and vision care in Canada, and the go-to resource for government, the media, the public, as well as other eye and healthcare providers. Annual reports provide us with an opportunity to reflect on the accomplishments of the past year.**

In late 2013/2014, COS undertook a five-year strategic planning exercise to ensure careful alignment of goals and objectives with available resources. The strategic plan identified six key strategic directions: Financial Resource Management; Governance; Education; Membership; Advocacy; and Communications and Media Relations. All resources and efforts are aligned to ensure that we are meeting/exceeding expectations and deliverables within each of the strategic pillars. As the responsible steward of member dollars, ensuring the effective, transparent, and responsible use of resources is a top priority for COS. Using a performance management system, outputs and outcomes in each area are measured against key strategic objectives and deliverables.

## FINANCIAL RESOURCE MANAGEMENT

- COS continued to focus on partnership development and to strengthen its ties with key stakeholder groups in order to provide high-value, high-impact, and relevant programs for our members.
- COS achieved a balanced budget for the ninth year in a row, with contributions to reserves. Over the course of the last several years, COS has continued to diversify its revenue streams.
- Ties with industry were strengthened, as our partners in the pharmaceutical and medical device sectors continued to support our activities with higher levels of educational grants. In particular, co-developed accredited symposia held in conjunction with our Annual Meeting were an important source of income for COS.



**YVONNE BUYS, MD, FRCSC**  
*President*



**JENNIFER  
BRUNET-COLVEY, MA**  
**(Medical Sociology)**  
*Executive Director/CEO*

## GOVERNANCE

- Dr. Yvonne Buys assumed the position of President at the June 2018 COS Annual Meeting.
- Dr. Phil Hooper, Chair, Council on Advocacy, was unanimously re-elected in this position for another three-year term.
- Dr. Mona Harissi-Dagher was elected Chair, COS Annual Meeting for a three-year term.
- Dr. Setareh Ziai was elected to the COS Board as Board Liaison, Residents and Young Ophthalmologists for a three-year term.

**COS is committed to highlighting the skill and innovation that ophthalmologists bring as the medical specialists of the eye healthcare team.**

## FINANCIAL STATEMENTS

January 1, 2018 to December 31, 2018

COS successfully balanced the budget for the ninth consecutive year with contributions to reserves year over year. Complete financial statements and the auditor's report for the 2018 fiscal year are available to any COS member upon request.

### Strategic Planning

- Over the summer and fall of 2018, the COS Board of Directors began the process of updating its Five-year Strategic Plan. In order to ensure stakeholder engagement, key informant interviews were conducted with 18 key stakeholders and opinion-leaders, and a survey was circulated to all members. The COS Board and staff met in late November to review the findings and to build the next strategic plan.

### MEMBERSHIP STRATEGIC PLANNING SURVEY

- In September 2018, an invitation to complete the *Canadian Ophthalmological Society Strategic Planning Survey* was sent via email to 1,155 COS members. A total of 327 (28.3%) members responded to the survey. The majority were in full-time practice (78%), were male (71%), and were from Ontario (39%). About half indicated they practiced comprehensive ophthalmology (47%), with the remainder (53%) practicing in a variety of subspecialties. One-third of respondents indicated working in a blend of academic and community environments, while 31% were predominantly academic, and 37% worked mainly in a community practice.
- When asked where COS should focus its advocacy efforts, respondents indicated in large numbers that "Increasing awareness about the value and impact of ophthalmology among decision-makers like elected officials" and "Supporting our provinces in building relationships with provincial elected officials and policymakers" were important (96% and 95%, respectively). The vast majority (94%) also believed in the importance of "Working with governments on policy and legislative changes to help strengthen vision care and patient care in Canada." When asked which advocacy issues were of greatest concern, a variety of issues were raised including: employment, especially the challenges new graduates face finding work or resources to practice; financial concerns such as compensation, fee cuts, and pensions; access to resources (e.g., operating rooms); accessibility to care (including factors such as wait-lists; operating room access; access to medications, technology and subspecialty care; costs of medication; geography etc.); public awareness and education (including defining scopes of practice highlighting the difference between ophthalmology and optometry; the costs of eye care; and disease prevention).
- About two-thirds (69%) of respondents felt that COS membership was helpful in meeting their continuing professional development (CPD) requirements, while the remaining third (31%) were unsure or did not believe their membership was helpful in this area. Nevertheless, the vast majority (95%) indicated that face-to-face group learning activities (such as the COS Annual Meeting, Sally Letson Symposium, etc.) were somewhat or very important to their CPD needs. Journal articles were similarly considered important to 81% of member respondents, and 73% valued small-group activities (journal clubs, INSIGHT program, etc.). The comments left by respondents suggested support for more online educational opportunities, as well as more ways to earn Section 3 credits.
- When COS CPD strategic priorities were outlined, 94% of respondents believed that the COS Annual Meeting and Exhibition was somewhat or very important. Accreditation and the Practice Resources Centre were similarly valued by 85% and 80% of respondents, respectively.



Dr. Yvonne Buys is sworn in as new COS President. Dr. Guillermo Rocha passes down the COS Chain of Office.

Alex Webster/Pinpoint  
National Photography



Alex Webster/Pinpoint National Photography

Skills Transfer Courses at the COS Annual Meeting provide intensive instruction leading to new knowledge and/or skills.

## EDUCATION

- COS is committed to maintaining the highest ethical standards, following guidelines established by the Royal College of Physicians and Surgeons of Canada (RCPSC). COS has received commendation for its submission to renew its status as an accredited CPD Provider with the RCPSC. COS has been granted an accreditation period of eight years (the maximum granted).
- In 2018, COS accredited 29 group learning activities, seven Simulation courses, and four Self-Assessment Programs. Accredited activities spanned subspecialty areas and took place across Canada and online.

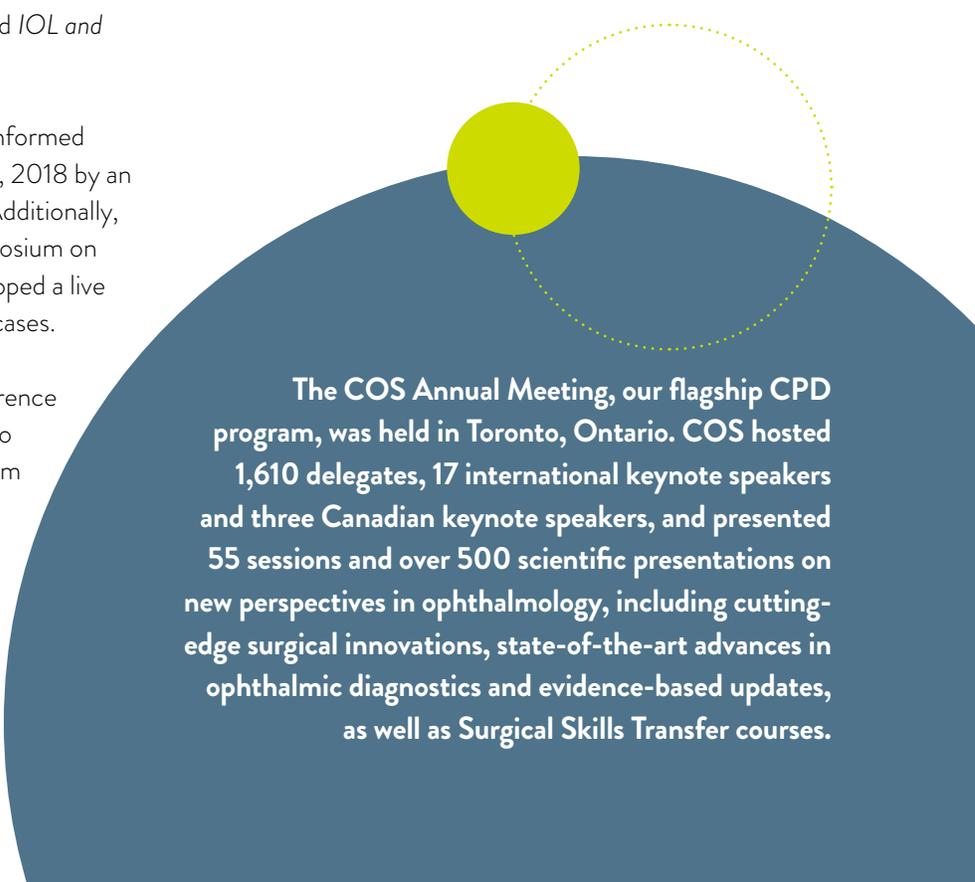
### 2018 COS Annual Meeting

- The 2018 COS Annual Meeting was held in Toronto, Ontario from May 31 to June 3, 2018 at the Metro Toronto Convention Centre. The theme for the meeting was *Advocating for Evidence-based Eye Health*.
- As the premier event for knowledge transfer in the field, the Annual Meeting hosted 1,610 delegates and 17 international keynote speakers, three Canadian keynote speakers, and included 55 sessions and over 500 scientific presentations on new perspectives in ophthalmology. Additionally, 122 posters were presented and we hosted six Surgical Skills Transfer courses (STCs).
- Dr. Steven Bellemare from the Canadian Medical Protective Association (CMPA) spoke on the topic

of change in team-based practice and medicolegal implications. Dr. Gigi Osler, now President of the Canadian Medical Association (CMA), was invited to speak on the topic of physician wellness.

- The COS partnered with the University of Toronto to host the Toronto Eye Review Course. This half-day session included engaging presentations from 20 Canadian ophthalmologists on a variety of topics, some subspecialty-focused, others highlighting leadership skills. Immediate Past-President of the COS, Dr. Guillermo Rocha, delivered a talk entitled “How to be an innovator.”
- COS co-developed two accredited symposia. COS, the Canadian Retina Society (CRS), the Canadian Uveitis Society (CUS) collaborated to co-develop an accredited symposium with AbbVie entitled “Non-infectious uveitis: What’s best for my patient—local or systemic treatment?” In addition, COS delivered a co-developed accredited symposium with Alcon entitled “CSI: Cataract Surgery Investigation.”
- Special thanks to the Eye Physicians and Surgeons of Ontario for their support of the 2018 Annual Meeting, and to all session chairs and physician volunteer leaders for their contributions to its great success. Thanks as well to all of our industry supporters.

- The 2019 COS Annual Meeting will be held June 13–16, 2019 at the Quebec City Convention Centre, Quebec City, Quebec. COS will host a joint symposium with the *Société Française d’Ophtalmologie* (the French Society of Ophthalmology). This initiative is part of the COS Board’s vision to expand our reach globally and to encourage a higher level of participation from international delegates.
- The 50<sup>th</sup> Sally Letson Symposium, *Neuro-ophthalmology*, took place from September 13–15, 2018 in Ottawa, Ontario. The Symposium was chaired by Dr. Anthony C. Arnold (University of California Los Angeles) and co-chaired by Dr. Rustum Karanjia (University of Ottawa). Welcoming 15 Canadian and international speakers and nearly 700 delegates, the meeting was an overwhelming success.
- In 2018, eight INSIGHT glaucoma and cornea modules (co-developed with Allergan) were delivered across Canada, reaching over 40 ophthalmologists. The program offers interactive cases in cornea and glaucoma topics that consider diagnoses, investigations, and treatment options by exploring the work-up, initial management, surgical options, and when to refer.
- Two Section 3 accredited Self-Assessment Programs were co-developed by COS and the Canadian Cataract Institute (CCI) and are available as online modules: *Managing Complicated Cataract Surgeries* and *IOL and Cataract Cases*.
- COS and CCI co-developed a webinar on informed consent that was delivered on November 14, 2018 by an ophthalmologist and a member of CMPA. Additionally, in conjunction with the Walter Wright Symposium on December 1, 2018 COS and CCI co-developed a live group session focusing on difficult cataract cases.
- COS co-developed the Retina Case Conference Canada 2018, which was delivered in Toronto on October 12–13, 2018, and offered a forum for Canada’s retina subspecialist community to engage with each other and discuss current and emerging strategies in the imaging, diagnosis, and management of retina disorders via surgical and medical interactive case studies.
- COS embarked on a multifaceted co-developed program focusing on dry eye disease with Shire Pharma ULC. This program included a webinar series (173 participants), a chart-audit brochure, a small-group learning session (seven events reaching 49 participants), and an interactive game that will be delivered in 2019.
- COS worked with a multidisciplinary planning committee, including ophthalmologists and family physicians (FPs), to develop a program entitled *Update on Diabetes and the Eye for the Primary Care Provider*, which was certified by the College of Family Physicians of Canada for 1.5 Mainpro+ credits. The program was co-developed with Bayer. This initiative aims to assist FPs in diagnosing, referring, and encouraging ongoing monitoring of the eyes of patients with diabetes. The program has reached over 200 FPs.
- In 2018, the *Canadian Journal of Ophthalmology (CJO)* received 1,053 manuscript submissions, which was a modest increase from the previous year. The rejection rate was 75.6%, and *CJO*’s impact factor decreased slightly—from 1.543 in 2016 to 1.314 in 2017. According to Elsevier, this type of decrease is normal when a journal increases its number of articles, which *CJO* has done over the last two years.



**The COS Annual Meeting, our flagship CPD program, was held in Toronto, Ontario. COS hosted 1,610 delegates, 17 international keynote speakers and three Canadian keynote speakers, and presented 55 sessions and over 500 scientific presentations on new perspectives in ophthalmology, including cutting-edge surgical innovations, state-of-the-art advances in ophthalmic diagnostics and evidence-based updates, as well as Surgical Skills Transfer courses.**

- In June 2018, after working in tandem with Dr. Hooper for several months to ensure a seamless transition, Dr. Varun Chaudhary officially took over the role of Editor-in-Chief of *CJO*. Along with shepherding the second half of the *CJO Innovation in Ophthalmology* series, which showcased some of the important and innovative ophthalmology research in which Canadian researchers are engaged, Dr. Chaudhary also spearheaded the creation of the *CJO Resident Advisory Council*, which will directly involve Canadian residents in developing new and innovative ways to engage with *CJO*.
- For 2019, the *CJO* Editorial Board will continue to highlight innovation in ophthalmology. They are also exploring the possibility of producing a sponsored supplement on teleretina screening, and the new *CJO Resident Advisory Council* will be launching several initiatives, including *CJO Resident Digests*, which will highlight articles from each *CJO* issue and discuss how they are relevant to Canadian residents.
- COS has identified the many benefits for the academic community, subspecialty societies, and provinces of being associated with COS. These Affiliate Services are outlined in the document entitled *What is the Value of Being Affiliated with COS?* Maintaining a strong relationship between organizations helps to elevate the respective brands. As the unified voice for ophthalmology in Canada, COS works with all of its subspecialty societies, its provinces, and the academic community to position the expertise and skill of ophthalmology to government, the media, the public, and other medical and eye healthcare providers. Provinces, subspecialty societies, and the academic community have access to accredited CPD, and receive advocacy, communications, media, and government relations support. In addition, subspecialty societies and the academic community benefit from communication via listservs. Subspecialty societies that are linked to COS benefit from insurance coverage through COS's insurance program, complimentary management of annual membership renewal services, and links to other major national and international affiliated organizations.

## MEMBERSHIP

- COS exists because of and for its members, and retaining and attracting members is fundamental to our ability to be the unified voice of ophthalmology in Canada. In 2018, COS had 1,162 members.
- COS maintains strong ties with the academic community (through the Council on Advocacy), with the subspecialty societies (through the Annual Meeting Planning Committee and the Editorial Board of *CJO*), and with the provinces.
- In November 2018, COS began managing the joint annual membership program for the Canadian Association of Pediatric Ophthalmology and Strabismus (CAPOS) and the Canadian Society of Oculoplastic Surgeons (CSOPS) at no cost. COS will continue to manage the joint Canadian Retina Society (CRS) annual membership program at no cost.



COS Lifetime Achievement Award winner, Dr. Graham Trope with COS Immediate Past-President Dr. Guillermo Rocha and Dr. Eddie Moss.

- Engagement of residents and young ophthalmologists is critical to the future of the Society and COS highly values its 231 resident members. A resident physician leader serves on the Annual Meeting Planning Committee and COS provides numerous benefits to residents and young ophthalmologists, including a half-day symposium at the Annual Meeting and a webpage, which includes information on resident events, research initiatives, fellowships, and job opportunities.

**COS is the recognized and “go-to” authority on eye care and vision care.**

- The number of female ophthalmologists in Canada has continued to increase year over year. In recognition of the unique issues that female ophthalmologists face, COS has hosted a Women in Ophthalmology symposium at the COS Annual Meeting since 2012.

## ADVOCACY

- The Council on Advocacy brings together representatives from all of the provinces, subspecialty societies, and the academic community through the Chair of the Association of Canadian University Professors of Ophthalmology (ACUPO).
- Advocacy remains a key strategic priority for COS. In order to fulfill its mission to be the national, recognized authority on eye and vision care in Canada, COS implemented a \$75.00 increase in dues and asked members to each voluntarily contribute a minimum of \$700.00 to an Advocacy and Public Awareness Fund. In 2018, COS reached over 90 percent of its target and continues to see great support. The monies gathered from the Fund, along with a significant investment from COS, will be used to support COS’s strong advocacy and public awareness work at the national level, and to empower the provinces, subspecialty societies, and academic community with advocacy tools, training, and resources to help raise the profile of the profession.
- Dr. Len Levin, Chair of ACUPO stepped down in November 2018, with Dr. Karim Damji assuming this role.
- In December 2017, COS completed Chapter 1 of the COS Advocacy Toolkit: *How to Work with Government*. In the summer of 2018, COS completed Chapter 2 of the COS Advocacy Toolkit: *How to Work with Media*. The Advocacy Toolkit contains information on how to work with government and media, as well as templated materials that can be customized by individual provinces and subspecialty societies. This is a members-only benefit and can be accessed on the COS website.
- The Council on Advocacy has created four new Regional Physician Representative roles. In order to help COS identify pan-Canadian advocacy trends, these representatives will work with the provincial physician representatives to identify, evaluate, and/or report issues of importance at multi-province or regional levels.
- COS developed an Advocacy Engagement Framework and Measured Response Process to ensure clarity on the roles of COS and the provincial association/subspecialty society when responding to critical issues.
- To ensure better communication on advocacy-related issues, COS launched its advocacy listserv.
- Members of the Council on Advocacy participated in COS’s first-ever accredited Advocacy and Media 101 training session at the 2018 COS Annual Meeting and Exhibition in Toronto. The session featured a talk by an advocacy relations expert on how physicians can effectively communicate with governments at all levels. The session included two interactive role-playing exercises designed to mimic real-life meetings between an ophthalmologist and a government official on a relevant topic, as well as a Media 101 Session with a speaker from COS’s public relations firm who talked about media relations as an effective advocacy tool.
- COS continued to issue its quarterly *Advocacy in Action* e-newsletter summarizing COS’s national, provincial, and subspecialty advocacy and lobbying initiatives.
- In January 2018, an editorial written by Dr. Phil Hooper on the unemployment and underemployment of new graduates in ophthalmology was published in *Politics* magazine and profiled in *Sixth Estate*. The primary audiences are government, opposition members, and bureaucrats at the federal level.

- In September 2018, COS received a request from Health Canada to provide clinical input regarding the risk of limbal stem cell deficiency (LSCD) in individuals using contact lenses. This request came from a recent literature review conducted by Health Canada that suggested that the use of soft contact lenses may put users at risk of LSCD. Special thank you to Dr. Clara Chan for leading COS's response.
- Health Canada is currently in the process of renewing tobacco product labels, which include health warnings and health information messages. COS has been working with Health Canada to provide medical images that graphically depict the risks of tobacco on eye health for the new labelling.
- In October 2018, in conjunction with the federal *Cannabis Act* coming into effect, COS updated its position statement on the *Medical Use of Cannabis for Glaucoma*, which was also endorsed by the Canadian Glaucoma Society (CGS). The final statement was published in *CJO*, and also provided to the CMA, which shared it through their national network and their provincial and territorial medical associations. COS is also working with the Canadian Cornea, External Disease & Refractive Surgery Society to finalize a position statement on the *Medical Use of Cannabis for Dry Eye Disease*.
- COS continues to collaborate with the Canadian Association of Optometrists (CAO) in areas of mutual interest: the two organizations meet annually and are currently working together on the development of a Joint Clinical Practice Guideline for the Periodic Eye Examination in Canada (0–5 years).
- COS actively engages with its subspecialty societies in working with the Canadian Agency for Drugs and Technologies in Health (CADTH) to address gaps in healthcare delivery in Canada. COS President, Dr. Yvonne Buys, and key members of the COS staff team met with CADTH on November 19, 2018 to discuss opportunities for collaboration and how COS could work with CADTH to help inform future therapeutic areas.
- COS collaborated with the CGS to prepare responses to CADTH's draft recommendations on *Optimal Use of Minimally Invasive Glaucoma Surgery*. While innovation is absolutely critical in healthcare to ensure the best patient outcomes, it can sometimes be challenging to manage costs within a government-funded healthcare model, and to determine efficacy of innovations in treatment, specifically when long-term studies are required, as in the case of chronic diseases such as glaucoma.
- Dr. Guillermo Rocha attended the Canadian Retina Society (CRS) meeting in March 2018 to update CRS on COS and to discuss CRS's application for a Royal College Area of Focused Competence (AFC) diploma in retina. As COS represents the interests of all of ophthalmology, COS worked with the Council on Advocacy—which includes representation from all of its provincial associations, subspecialty societies, and the academic community—to solicit feedback on the proposed application. COS agrees that the formalization and standardization of training are of great value to both the ophthalmology and the patient communities. It was agreed that it would be important to clearly spell out the shared retina competencies, specifically those pertaining to medical retina, which are part of the core competencies to become an ophthalmologist, and to include that information in the AFC documentation. This will ensure that comprehensive ophthalmologists and ophthalmologists from other subspecialties can continue to offer their patients the care that they have been trained to provide, and will also ensure that Canadians in rural and remote communities do not experience reduced access to retina care.
- COS continues to work closely with the American Academy of Ophthalmology (AAO), including regular calls with key physician leaders to discuss issues of importance, including advocacy. Dr. Ken Roberts completed the AAO Leadership Development Program in the fall of 2018.
- COS would like to congratulate Dr. Stephanie Dotchin for her acceptance into the Pan-American Association of Ophthalmology (PAAO) Leadership Development Program.

### Provincial Advocacy Activities

- On May 17, 2018, the British Columbia Society of Eye Physicians and Surgeons (BCSEPS) and COS participated on a call with the BC Ministry of Health (MOH) regarding initial research the Ministry is

undertaking for an appropriateness in surgery study (which would also include cataract surgery). As a next step, BCSEPS has agreed to participate in a consultation with the BC MOH on the development of the appropriateness strategy for cataract surgery with the assertion that the intent is to improve patient care.

- BCSEPS continued its efforts to reverse the cataract fee code cut through an internal review with Doctors of BC. Since the October 1, 2018 government initiative to crack down on private fee codes billed with public services, there has been no clarification on how this affects charging fees for premium lenses. BCSEPS has a point person with the MOH and is looking for a clear statement with guidelines that are not open to individual interpretation.
- In September 2018, Eye Physicians and Surgeons Association of Alberta (EPSAA) representatives met with Alberta Health Service's Infection, Prevention and Control group to present them with an EPSAA position statement on higher level disinfection of ultrasound probes and ultrasonic pachymetry probes. COS significantly assisted with this by providing a letter of support and also helping to initiate consultations with CADTH. CADTH is working on an exhaustive literature review that will be circulated to COS and EPSAA.
- The Adjusted Net Daily Income (ANDI) process continued to make its way through the Alberta Medical Association, with the possibility for significant cuts to ophthalmology and many other specialties through this process.
- Expanded scope of practice for optometry continues to be an issue in Alberta.
- In June 2018, the Eye Physicians and Surgeons of Manitoba (EPSOM) met with the Deputy Minister of Health and her staff to discuss recommendations from a 2017 provincial wait times report, including the introduction of a single-queue system and a request-for-proposals system for cataract surgery. As a result of feedback provided at the meeting, the government agreed to continue to consult with ophthalmology on these ideas.



Alex Webster/Pinpoint National Photography

The 2018 COS Annual Meeting included six Surgical Skills Transfer Courses. These hands-on wet labs are accredited Section 3 Simulation activities.

- In response to an enquiry from Manitoba Public Health, EPSOM and the Manitoba Association of Optometrists developed a position statement on scleral tattooing, with the goal of having the practice banned in the province, as it has been in Ontario. In September 2018, this position statement was submitted to the provincial government.
- The Eye Physicians and Surgeons of Ontario (EPSO) spearheaded a project, with endorsement from the Vision Strategy Task Force of Ontario, to develop new hospital positions for young ophthalmologists, with any new monies provided by the government to be used to tackle the growing cataract wait list. The government is very interested in the project and EPSO is hopeful that it will be endorsed by hospitals and provide a number of new positions.



Alex Webster/Pinpoint National Photography

Dr. Gigi Osler, now President of CMA, and Dr. Jurij R. Bilyk participated on a Current Concepts panel with Dr. Colin Mann and Dr. Yvonne Buys.

- The Comparison of Adjusted Net Daily Income (CANDI) model—the economic formula used by the Ontario Medical Association to calculate the value of a day’s work in any medical specialty—continues to create many uncertainties for ophthalmology, many relating to the difficulty in obtaining relevant data such as true overhead, after-hours worked, and overall daily hours worked.
- The *Association des médecins ophtalmologistes du Québec (AMOQ)* are evaluating the new political landscape following the election of the *Coalition Avenir Québec (CAQ)* government on October 1, 2018. CAQ has proposed significant healthcare cuts, specifically targeting specialties like ophthalmology and radiology (both perceived to be higher paid).
- In July 2018, Atlantic Provinces Ophthalmological Society representatives worked with COS to profile the arrival of a new glaucoma surgeon in New Brunswick to local provincial reporters.
- New Brunswick ophthalmologists continued to work with the government to ensure that ophthalmology is recognized as unique in terms of its overhead costs.
- In July 2018, COS worked with PEI Ophthalmology to submit comments regarding an expanded scope of practice for optometry in the area of prescribing rights for oral antibiotics, anti-inflammatories and anti-allergics. With the help of COS, letters were sent to the provincial antibiotic stewardship committee and Minister of Health.
- PEI continues to have manpower issues, with long waits for consults and surgery. PEI Ophthalmology is working with the Health PEI on potential solutions. A locum for a six-month period has been helpful. Consultations with Health PEI continue and approval is expected for a new graduate in the summer of 2019.
- In Nova Scotia, there is a significant manpower shortage on Cape Breton Island, which has gone from having

four to one practicing ophthalmologist. There is also a shortage of OR nursing staff in Halifax, which may lead to rotating closures. Hospital-based no-fee medical retina care is lacking due to recent retirements with no appetite from the province to cover tray fees or office-based equipment.

- Currently, there is a significant need for ophthalmologists in Newfoundland and Labrador. Operating room time, as well as hospital resources, are available for new recruits. There are a few Memorial University graduates in various residency programs and it is hoped that some of them will return to the province. Locums are welcome for ophthalmologists who are looking for some experience and a chance to see another part of the country.

### Drug-related Issues

- On August 14, 2018, Novartis/Alcon confirmed that they would no longer be discontinuing the production of Isopto Atropine 1%. On September 24, 2018, Novartis/Alcon confirmed that Isopto Atropine 1% was now available across Canada. Special thanks to Dr. Jamie Taylor (COS Board member, former CGS President, and COS's Lead Physician for National Ophthalmic Drug Shortages and Drug Discontinuations) for his leadership on this issue. Atropine is also available through COS's industry partners, who worked diligently to ensure that it would continue to be available to COS members throughout this process.

## COMMUNICATIONS AND MEDIA RELATIONS

- Canadians were exposed to the positive impact ophthalmologists have on their lives through COS's *See The Possibilities* public awareness campaign. From St. John's to Victoria, COS members appeared in the media and in social media blogs to tell Canadians more about ophthalmology. In 2018, the campaign generated 17 million media impressions (a 60 percent increase over 2017), produced three patient videos resulting in more than 740,000 video views, and partnered with five hyper-targeted micro-influencers, leading to nine blog posts and more than 229,000 impressions. From 2017 to 2018, the number of available physician COS spokespeople increased by 500 percent, ensuring that many COS members were available to respond to media requests.
- COS highlighted specific subspecialty disease days and months through a combination of earned and paid media opportunities. Highlights included: interviews for World Glaucoma Week in March; articles in *Global News* regarding AMD Awareness Month; a paid supplement in *Maclean's* magazine for National Diabetes Awareness Month (with an audience reach of 2.4 million readers); and COS and CAO's Joint Position Statement on the *Effects of Electronic Screens on Children's Vision and Recommendations for Safe Use* (which earned more than 8 million media impressions).
- COS launched Facebook ([facebook.com/seethepossibilitiesCA](https://facebook.com/seethepossibilitiesCA)) and Instagram (@seethepossibilitiesCA) accounts to support the *See The Possibilities* campaign.
- For Vision Health Month (May) 2018, COS conducted its National Eye Health Survey that looked at the varying levels of awareness of the big four eye diseases affecting Canadians, if and when Canadians go for regular eye exams, and if they know whom to see if they are experiencing serious changes in their vision. In March 2018, the online bilingual survey was conducted by Fuse Insights, on behalf of COS, among 1,004 adults in Canada aged 18+ years. The study revealed that the majority (59%) of Canadians experienced symptoms of potential eye disease, yet only half (54%) reported they had seen a healthcare professional. On May 1, 2018, to mark the start of Vision Health Month, COS distributed a news release featuring the results of the national survey in English and French to news desks across the country.
- In addition to the *See The Possibilities* campaign, COS responded to hundreds of media requests on a variety of vision and eye health-related topics.
- COS participated in the AAO/Centers for Disease Control and Prevention Contact Lens Health Week (August 20–24, 2018) and as a partner in Canada Health Infoway Digital Health Week (November 12–18, 2018).

## SPECIAL PROJECTS

- **International Ties.** Internationally, COS has strengthened ties with the American Academy of Ophthalmology (AAO), the International Council of Ophthalmology, the Pan-American Academy of Ophthalmology (PAAO), and the International Joint Commission on Allied Health Personnel in Ophthalmology (IJCAHPO). A formal process has been developed to select a potential candidate for the AAO Leadership Development Program and for the PAAO Leadership Development Program.
- **2018 World Ophthalmology Congress in Barcelona.** COS held a special symposium at the 2018 World Ophthalmology Congress in Barcelona, entitled *Light, Sound and Imagination in Canadian Ophthalmology*. Participants were treated to an array of Canadian innovations and applications of ultrasound and wavefront technology, presented by Drs. Rand Simpson, Guillermo Rocha, George Beiko, Raymond Stein, and Catherine Birt.

## MAJOR INITIATIVES FOR THE YEAR AHEAD

- COS is working hard to engage all of our provinces, subspecialty societies, and the academic community to ensure that we meet our goal to be the one unified voice for ophthalmology in Canada, and to continue to position ophthalmologists as the recognized medical and surgical leaders of the eye and vision care team.
- COS will continue to move forward with the development of a new Five-year Strategic Plan with a goal to implement the new plan in January 2020.
- The COS Annual Meeting will continue to be the focal point for CPD activities.
- COS is committed to maintaining the highest ethical standards, following guidelines established by RCPSC.
- COS must embrace RCPSC's Competence by Design in 2019. This will require widespread stakeholder engagement in the process to ensure that the ophthalmology community is fully on board with the new direction.
- COS will continue the roll-out of the co-developed programs on dry eye disease across Canada.
- COS will continue the roll-out of the national continuing medical education program for FPs entitled *Update on Diabetes and the Eye for Primary Care Providers*.
- *CJO* is continuing to make changes to improve the reviewer experience and to recognize the valuable work that reviewers contribute to *CJO* every year.
- *CJO* is researching new ways to engage readers and expand its national and global audience, which include reviewing its print and online designs and exploring different options to draw people to the website.
- COS will continue to support a number of subspecialty society annual membership drives at no cost, provided the two programs are linked.
- COS will move forward with the implementation of its Advocacy and Communications and Media Relations Plan, including Year Three of the *See The Possibilities* public awareness campaign, ongoing meetings with key contacts within the federal government, and more. Year Three of the campaign will continue to focus on national and regional media relations, patient video testimonials, and influencer engagement, but with the addition of a more grassroots approach that will help engage ophthalmologists in their own communities. New initiatives will include a Physician Toolkit, which will feature campaign materials, such as waiting-room posters, videos for physician waiting-room screens, advertisements that can be placed in local media outlets, and more.
- COS will be redesigning and launching its new public-facing website.
- A new online Practice Resource Centre will be launched, providing members with access to a hub of tools and resources related to the ophthalmologist's practice, including CPD opportunities and events, accredited and unaccredited activities, position statements, and much more.

- COS will continue its work with CAO to finalize the joint Clinical Practice Guideline for the Periodic Eye Examination in Canada (0–5 years).
- COS will work with the Canadian Dermatology Association to continue to raise awareness of the importance of sun protection for the eyes and the risks of sun damage to the eyes.
- COS will continue to work with its partners to address key areas of advocacy, including: expanding scopes of practice for optometry; Human Resources for Health; and strategies that will help enhance patient care for specific patient populations, such as children.
- COS will further enhance programs and initiatives that are focused on physician wellness. COS is the recipient of targeted funding from MD Financial Management

Inc. for physician wellness initiatives and will receive \$200,000 over three years for CPD activities that address physician wellness, specifically geared toward the ophthalmologist. Dr. Lisa Gould will Chair the COS Physician Wellness committee with members Dr. Lorne Bellan, Dr. Colin Mann, and Dr. Rishi Gupta.

- COS will continue to engage its membership in new and innovative ways to ensure that the organization remains nimble, relevant, and responsive to the needs of its members.

COS could not fulfill its mandate without its dedicated staff and the tireless efforts of our many volunteers who give their valuable time to improve eye care for all Canadians and to advocate for the profession. We look forward to continuing to work with our members and other key stakeholders to strengthen the eye care community in Canada.

In the 2018 membership survey, the vast majority (95%) of respondents indicated that face-to-face group learning activities (such as the COS Annual Meeting, Sally Letson Symposium, etc.) were somewhat or very important to their CPD needs.

Alex Webster/Pinpoint National Photography



## BOARD OF DIRECTORS 2018/2019

Yvonne Buys, MD, President

Guillermo Rocha, MD, Immediate  
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Setareh Ziai, MD, Board Liaison,  
Residents and Young Ophthalmologists

Mona Harissi-Dagher, MD, Chair,  
Annual Meeting

## COUNCILS, COMMITTEES AND THEIR CHAIRS 2018/2019

**Nominating Committee:** Guillermo  
Rocha, MD

**Council on Advocacy:** Phil Hooper,  
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**Annual Meeting:** Mona Harissi-  
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**Council on Continuing Professional  
Development:** Colin Mann, MD

**Maintenance of Certification:** Colin  
Mann, MD

**CJO Editorial Board:** Varun  
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**Board Liaison, Residents and Young  
Ophthalmologists:** Setareh Ziai, MD

**Eye Bank Committee:** Patricia  
Laughrea, MD

**Clinical Practice Guideline on the  
Periodic Eye Examination:** Walter  
Delpero, MD

## KEY PARTNERS/LIAISONS

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**Professors in Ophthalmology**

(including chairs and program  
directors): Karim Damji, MD, Chair

**American Academy of**

**Ophthalmology:** Andrew Budning, MD

**International Council of**

**Ophthalmology:** E. Rand Simpson, MD

**Pan-American Association of**

**Ophthalmology:** Allan Slomovic, MD

**Royal College of Physicians and**

**Surgeons Specialty Committee in  
Ophthalmology:** Lorne Bellan, MD

## AFFILIATED SOCIETIES AND SPECIAL INTEREST GROUPS

Atlantic Provinces Ophthalmological  
Society

Canadian Association of Pediatric  
Ophthalmology and Strabismus

Canadian Cornea, External Disease &  
Refractive Surgery Society

Canadian Glaucoma Society

Canadian Neuro-ophthalmology  
Society

Canadian Ophthalmic Pathology  
Society

Canadian Retina Society

Canadian Society for Public Health  
and Global Ophthalmology

Canadian Society of Oculoplastic  
Surgeons

Canadian Uveitis Society

Canadian Vision Rehabilitation Society

Cataract Surgery

Council of Canadian Ophthalmology  
Residents

Ocular Regenerative Medicine Society

## ALLIED HEALTH

Canadian Orthoptic Society

Canadian Society of Ophthalmic  
Medical Personnel

Canadian Society of Ophthalmic  
Registered Nurses

## STAFF TEAM

Jennifer Brunet-Colvey, Executive  
Director/CEO

Rita Afeltra, Manager, Membership  
and Meeting Logistics

Maxine Brown, Coordinator,  
Continuing Professional Development

Christine Bruce, Coordinator, Meeting  
Logistics and Exhibits

Olivia Cleaver, Coordinator,  
Continuing Professional Development

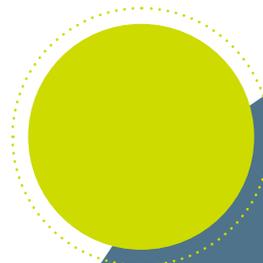
Joyce Davis, Bookkeeper/Accountant  
(part-time)

Gail Faddies, Governance Coordinator

Suzanne Purkis, Managing Editor,  
Canadian Journal of Ophthalmology  
(part-time)

Cheryl Ripley, Manager, Continuing  
Professional Development

Courtny Vaz, Coordinator,  
Communications and Public Affairs



**PAST-PRESIDENTS**

- 2016–2018** Guillermo Rocha, MD (Manitoba)
- 2014–2016** Allan Slomovic, MD (Ontario)
- 2012–2014** Paul Rafuse, MD (Nova Scotia)
- 2010–2012** François Codère, MD (Quebec)
- 2008–2010** Lorne Bellan, MD (Manitoba)
- 2006–2008** Alan Cruess, MD (Nova Scotia)
- 2004–2006** Sherif El-Defrawy, MD (Ontario)
- 2002–2004** Duncan Anderson, MD (British Columbia)
- 2000–2002** Susan Lindley, MD (Quebec)
- 1998–2000** Daniel O'Brien, MD (Nova Scotia)
- 1996–1998** Patricia K. Teal, MD (Ontario)
- 1994–1996** Frank V. Buffam, MD (British Columbia)
- 1992–1994** Raymond LeBlanc, MD (Nova Scotia)
- 1992** D. Lorenzetti, MD (Quebec)
- 1991** Ide Dubé, MD (Quebec)
- 1990** Rand Simpson, MD (Ontario)
- 1989** Ralph Schneider, MD (Saskatchewan)
- 1988** J.S.F. Richards, MD (British Columbia)
- 1987** Harold Stein, MD (Ontario)
- 1986** John Valberg, MD (Ontario)
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- 1977** John D. Parker, MD (Ontario)
- 1976** Jean M. de Margerie, MD (Quebec)
- 1975** Stephen M. Drance, MD (British Columbia)
- 1974** J. Page Harshman, MD (Ontario)
- 1973** Charles Dyson, MD (Ontario)
- 1972** William M.G. Wilson, MD (British Columbia)
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- 1970** Michel Mathieu, MD (Quebec)
- 1969** R. Gordon C. Kelly, MD (Ontario)
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- 1966** Donald M. MacRae, MD (Nova Scotia)
- 1965** Alfred J. Elliot, MD (British Columbia)
- 1964** J.A. René Charbonneau, MD (Quebec)
- 1963** Harry M. Macrae, MD (Ontario)
- 1962** Robert M. Ramsay, MD (Manitoba)
- 1961** Benjamin Alexander, MD (Quebec)
- 1960** Norman L. Elvin, MD (Manitoba)
- 1959** A. Lloyd Morgan, MD (Ontario)
- 1958** John V. Nicholls, MD (Quebec)
- 1957** John A. McLean, MD (British Columbia)
- 1956** Henri Pichette, MD (Quebec)
- 1955** Percy B. MacFarlane, MD (Ontario)
- 1954** Mark R. Marshall, MD (Alberta)
- 1953** Kenneth B. Johnston, MD (Quebec)
- 1952** A.E. MacDonald, MD (Ontario)
- 1951** G. Stewart Ramsey, MD (Quebec)
- 1950** Roger F. Nicholls, MD (Alberta)
- 1949** Jules Brault, MD (Quebec)
- 1948** Robert J.P. McCulloch, MD (Ontario)
- 1947** John A. MacMillan, MD (Quebec)
- 1946** Walter W. Wright, MD (Ontario)
- 1945** Wilbert G. Fraser, MD (Ontario)
- 1944** Robert E. Mathers, MD (Nova Scotia)
- 1943** Colin A. Campbell, MD (Ontario)
- 1942** Frederick T. Tooke, MD (Quebec)
- 1941** Joseph Vaillancourt, MD (Quebec)
- 1940** William H. Lowry, MD (Ontario)
- 1938–1939** William G.M. Byers, MD (Quebec)

**WELCOME NEW MEMBERS!**

Taha Alaidaros, MD (Saudi Arabia)	Azar Karimov, MD (Ontario)	Rehan Rajput, MD (United Kingdom)
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Aurelia Cathelin-Cardon, MD (Quebec)	Flora Lum, MD (USA)	Ana Carolina Tavares, MD (Quebec)
Brian Chan, MD (Ontario)	Joshua Manusow, MD (Manitoba)	Stephanie Tedford, PhD (USA)
Alexander Chop, MD (Ontario)	Edward Margolin, MD (Ontario)	Julia Teixeira Leite Pereira, MD (Ontario)
David Comstock, MD (Nova Scotia)	Miral Mehta, MD (Alberta)	Roger Thomas, MB (British Columbia)
Cindy Croissant, MBA (USA)	Anuradha Mishra, MD (Nova Scotia)	Melissa Tong, MD (Ontario)
Andrew Field, MB (Australia)	Juan Moreno, MD (Alberta)	Niranjan Vijay, MD (Ontario)
Mathieu Gauvin, PhD (Quebec)	Kinda Najem, MD (Quebec)	Jing Wang, MD (Quebec)
Fatimah Gilani, MD (Ontario)	Nawaaz Nathoo, MD (British Columbia)	Carol Westall, PhD (Ontario)
Yiannis Iordanous, MD (Ontario)	Galareh Nouredin, MD (British Columbia)	Alysia Zhou, MD (Ontario)
Alfonso Iovieno, MD (British Columbia)	Kaivon Pakzad-Vaezi, MD (British Columbia)	Hila Zommer Sykes, MD (New Brunswick)
Andre Jastrzebski, MD (Manitoba)	François Pépin, MD (Quebec)	
Ananda Kalevar, MD (Quebec)	Fannie Petit, MD (Quebec)	

**COS gives its members access to the latest information on ophthalmology research, surgical skills through courses at the Annual Meeting and Exhibition (special rates), the *Canadian Journal of Ophthalmology* (free print and online subscription), and access to a special newsletter from the Maintenance of Certification committee, which updates COS members on how to claim and maintain CPD credits (including Sections 1 through 3) and other important CPD news. COS members also benefit from quarterly updates on the advocacy and communications work being done by the Society. Most importantly, by being a member, you lend your voice to COS advocacy and communications work on behalf of ophthalmologists. When we stand united, we have a more powerful voice on the issues that affect our profession and the state of eye and vision health in Canada.**

**CANADIAN  
OPHTHALMOLOGICAL  
SOCIETY**

110-2733 Lancaster Road  
Ottawa, ON K1B 0A9

Tel.: 613.729.6779

Toll-free: 800.267.5763

Fax: 613.729.7209

Email: [cos@cos-sco.ca](mailto:cos@cos-sco.ca)

Website: [www.cos-sco.ca](http://www.cos-sco.ca)

Twitter: @CANeyeMDs