

2006-2007
Annual Report



THE SOCIETY OF OBSTETRICIANS AND GYNAECOLOGISTS OF CANADA



**Our mission:
To promote excellence
in the practice of
obstetrics and
gynaecology and to
advance the health
of women through**

**leadership,
advocacy,
collaboration,
outreach and education.**

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Cover photo:
International Women's Health Photo Contest
First Place: Dr. François Couturier
"Matin Calme"



President's Message

Dr. Donald Davis



For many reasons, the 2006-2007 year has been a particularly exciting year for the SOGC. For one, the society has made some bold additions to its strategic directions. At our 2006 Annual Clinical Meeting, the SOGC adopted a new set of strategic directions to guide our development into 2011. This adoption followed an extensive consultation process with members and stakeholders, which helped to both reaffirm our members' commitment to our existing strategic goals and to identify new avenues for the work of SOGC.

In particular, the society adopted two new strategic directions in 2006: Advocacy and Improving Aboriginal Health. For any organization, there can exist a long and arduous learning curve associated with such an expansion of organizational goals. Thankfully, the SOGC has been welcomed with overwhelming support and acceptance from our new partners in these areas, and I am pleased to say that we have made some important progress in the past year.

Through our advocacy work, the SOGC has brought the issue of human resources in obstetrics to the public eye. This is an important issue, which continues to dramatically affect the way we practice and the level of care that Canadian women receive. We will continue to work with our partners and governments to address this looming issue for our specialty. We will continue to promote the adoption of *A Birthing Strategy for Canada*, for which we have made tangible progress. Collaboration continues to be a springboard for these efforts.

In addition, the SOGC also strived to provide the public with accurate and trustworthy information on another major public health issue of the past year — the approval of a vaccine to prevent human papillomavirus infection. To this end, the society developed a comprehensive clinical practice guideline, as well as the complementing *HPVinfo* public education campaign.

Health inequities remain an unfortunate reality for Canada's Aboriginal populations. This is simply unacceptable. The challenge is large, but concerted efforts can bring about substantial gains. Over the past year, the SOGC has forged new partnerships and initiatives to employ its strengths in CME, public education and collaborative care to help close gaps in access and quality of care.

I shall finish by saying what an extreme personal honour it has been to serve as President of the SOGC. Furthermore, it is a great pleasure to pass this title to our new President, Dr. Guylaine Lefebvre. I know Guylaine will flourish in her new role. I would also like to thank the SOGC Council, Executive and staff for their invaluable support over the past year. Dr. Helewa, who preceded me, was a great mentor. I cannot conclude without offering a special thank you to SOGC's very capable and dynamic vice-presidents, Drs. André Lalonde, Vyta Senikas and Ken Milne. This year has been both a very rewarding experience and a great pleasure. I humbly thank you all.

Sincerely,

A handwritten signature in black ink that reads "D. Davis". The signature is fluid and cursive.

Donald Davis, B.Sc., M.D., FRCS(c), FACOG

Executive Vice-President's Message

Dr. André B. Lalonde

This past year we have seen some major developments to SOGC programs. In particular, our Patient Safety division has been substantially redefined. From the very onset, the Managing Obstetrical Risk Efficiently (MORE^{OB}) obstetrical patient safety program has been a remarkable success. Each and every SOGC member can be proud, as I am, of the progress we have made in this field. This year, our MORE^{OB} program has reached a new and exciting milestone. Under a partnership developed with the Healthcare Insurance Reciprocal of Canada (HIROC), the program will now exist under the new corporate identity of the Salus Global Corporation. In its new form, the program will be expanded beyond obstetrics, to include patient safety training in additional areas of healthcare. For its part, the SOGC will continue to play an important role in the future development of this program.

On this note, I would like to take this opportunity to offer my most heartfelt thanks to the SOGC's outgoing Associate Executive Vice-President Dr. Ken Milne. Ken has been the driving force behind the SOGC's patient safety division and our stalwart champion of the MORE^{OB} program, and will be taking on a new position as CEO of the newly formed Salus Global Corporation. From everyone at the SOGC, I wish him the best in the new position and we look forward to our continued work with Ken and with Salus.

Other SOGC programs have also undergone some important developments over the past year. Our International Women's Health Program continues to make a tangible difference to the lives of so many women around the world. The program continues to grow and evolve, much thanks to the selfless volunteerism of our members. In December 2006, the Canadian International Development Agency renewed its funding commitments to the program for an additional five years, further reaffirming the importance of the international mandate.

In closing, I would like to stress the important contributions of the SOGC membership to each and every facet of our work. In reading this report, which highlights the progress and challenges of the past year, it is of utmost importance to remember the hundreds of men and women who donate their time, their passion and their expertise to the work of our society. These individuals embody the true core of what the SOGC represents. I humbly thank you all.

Sincerely,



André B. Lalonde, MD, FRCSC, FSOGC, FACS, MSc



Associate Executive Vice-President's Message

Dr. Vyta Senikas



As SOGC's Associate Executive Vice-President, it is my pleasure to highlight some of the changes and progress of the SOGC's Continuous Professional Learning (CPL) Division over the past year.

Very notably, this year our CME events received renewed accreditation from the Royal College of Physicians and Surgeons of Canada. For this, I must thank all of the members, volunteers and staff who work tirelessly to achieve this level of excellence. Though the final product may appear seamless, the time and expertise contributed by these individuals is nothing short of inspiring.

But there is always more that can be done. This is why the SOGC has committed itself to the continued refinement of our CME formula. We have explored alternative mediums, such as the development of accredited online CME activities, and we will continue our work in these areas. In this coming year, in particular, the SOGC will host events and solicit ideas on how to further increase the value of our CME events. In this effort, the suggestions and feedback of our members will remain of paramount importance.

In addition to our events, a very important role of the CPL division is the coordination and development of the SOGC's clinical practice guidelines. These guidelines bridge the gap between evidence and practice, and help ensure that Canadian women receive care based on the best and most current science available. It was also in this spirit in late 2006 that we decided to offer the complete text of past issues of the Journal of Obstetrics and Gynaecology Canada (JOGC), free of charge, on our website.

Over the past year, we have developed several precedential guidelines on topics such as the human papillomavirus, prenatal diagnosis, and assisted human reproduction, to name only a few. Again, I must thank the many talented individuals who graciously contribute their expertise to the development of these guidelines, one of the most important facets of our work here at the SOGC. These guidelines help establish the standard of care in Canada, and directly translate to improved care for Canadian women.

Sincerely,

A handwritten signature in blue ink that reads "Vyta Senikas M.D." The signature is fluid and cursive.

Vyta Senikas, BSc, MDCM, FRCSC, FSOGC, CSPQ

SOGC Executive and Council

2006-2007

President: Dr. Donald B. Davis, Medicine Hat, Alberta
Past President: Dr. Michael E. Helewa, Winnipeg, Manitoba
President Elect: Dr. Guylaine G. Lefebvre, Toronto, Ontario
Executive Vice-President: Dr. André B. Lalonde, Ottawa, Ontario
Treasurer: Dr. Mark Heywood, Vancouver, British Columbia
Vice-President, Atlantic Region: Dr. Scott A. Farrell, Halifax, Nova Scotia
Vice-President, Québec Region: Dr. Michel P. Fortier, Québec, Quebec

Regional and Alternate Chairpersons

Chair, Western Region: Dr. Nicole Racette, New Westminster, British Columbia
Alternate Chair, Western Region: Dr. Sandra de la Ronde, Calgary, Alberta
Chair, Central Region: Dr. Margaret Burnett, Winnipeg, Manitoba
Alternate Chair, Central Region: Dr. Annette Epp, Saskatoon, Saskatchewan
Chair, Ontario Region: Dr. Catherine MacKinnon, Brantford, Ontario
Alternate Chair, Ontario Region: Dr. Richard Johnston, Orillia, Ontario
Chair, Québec Region: Dr. Diane Francoeur, Montréal, Quebec
Alternate Chair, Québec Region: Dr. Philippe-Yves Laberge, Ste-Foy, Quebec
Chair, Atlantic Region: Dr. Terry O'Grady, St. John's, Newfoundland
Alternate Chair, Atlantic Region: Dr. Ward Murdock, Fredericton, New Brunswick

Other Representatives

Public Representative: Ms. Jane Caskey, Toronto, Ontario
Junior Member Representative: Dr. Kimberly Butler, Hatchet Lake, Nova Scotia
Associate Members (MD) Representative: Dr. Owen Hughes, Ottawa, Ontario
Associate Members (RN) Representative: Ms. Sandra Christie, RN, Halifax, Nova Scotia
Associate Members (RM) Representative: Ms. Michelle Kryzanasuskas, RM, Collingwood, Ontario
APOG Representative: Dr. Patrick Mohide, Hamilton, Ontario
Corresponding Member: Lucie Pépin, Senator, Ottawa, Ontario

While attending the SOGC Council meetings as President of the AOGQ, I was impressed by all the support we received last fall from across Canada during our tough negotiation with the Quebec government. I was proud to realize that among the SOGC's main preoccupations, the quality of the practice in ob/gyn and the future of this profession were listed as one of their important goals.

As the French media representative at the SOGC Council, I am always proud to defend the position endorsed by the SOGC in our guidelines. Apart from its scientific basis, one can feel the SOGC's "pole position" in all aspects of women's health, especially in women's rights to access and freedom of choice.

— Diane Francoeur, MD, FRCSC

Committees 2006-2007

Aboriginal Health Initiatives Committee
ALARM Committee
ALARM/GESTA International AGIC
Annual Clinical Meeting - Statutory Scientific Committee
Annual Clinical Meeting Host Committee
Archives & History Committee
Atlantic Regional Committee
Breast Disease Committee
Canadian Foundation for Women's Health CANPAGO
Central Regional Committee
Clinical Practice - Gynaecology Committee
Clinical Practice-Obstetrics Committee
Council - SOGC Committee
Diagnostic Imaging Committee
Education Committee
Ethics Committee
Executive Committee
Finance Committee
Genetics Committee
Infectious Disease Committee
International CME Planning Committee (ICME)
International Women's Health Committee
JOGC - International Editors
JOGC Canadian Editors
Journal - Editorial Advisory Board Committee
Junior Member Committee
Junior Member Executive Committee
Maternal Fetal Medicine Committee
MD Advisory Committee
Medico-Legal Committee
Membership Committee
Nomination Committee
Obstetrical Content Review Committee
Ontario Regional Committee
Promotion of the Specialty Committee
Public Affairs Committee
Québec Regional Committee
Reproductive Endocrinology Infertility Committee
RM Advisory Committee
RN Advisory Committee
Social & Sexual Issues Committee
Society of Gynaecologic Endoscopy of Canada
Society of Investigators of Ob/Gyn of Canada
SOGC Informatics Committee
SOGC/GOC/SCC Policy & Practice Guidelines Committee
Sub-Committee on Urogynaecology
Western Regional Committee
Women's Health Policy Committee

SOGC's Strategic Plan 2006-2011

In its 2005-2006 annual report, the SOGC published an overview of the ambitious vision that will guide its activities over the course of the next five years. Our strategy is now well underway and there are already many achievements to report. The following list is a sampling of our accomplishments so far under those themes previously introduced.

As a member of Council for the last three years and of the West-Central committee for several years before that, I have been most impressed by the society's role of advocate for women. For me this encompasses all the other strategic pillars. I believe that SOGC is an unrecognized hero in its work to improve the status and health of women, both nationally and especially internationally.

— Dr. Sandra de la Ronde,
Clinical Associate Professor,
University of Calgary

Aboriginal Health

- Director of Aboriginal Health Initiatives hired
- developed partnerships and Memorandums of Understanding with NAHO, Pauktuutit, NIICHR0, Health Canada, Indian and Northern Affairs, provincial and territorial governments, the Wabano Centre for Aboriginal Health, the Canadian Association of Midwives, and ITK

Advocacy

- retained the Public Affairs Counsel two days per week to focus on federal advocacy and gaining support for the *Birthing Strategy*
- conducted training sessions on advocacy for Executive and Council spokespersons

Continuous Professional Learning

- obtained funding from the Public Health Agency of Canada to provide continuous professional training

Human Resources

- actively recruited medical students into the practice of obstetrics and gynaecology
- started an HHR Project to identify gaps in the specialty of obstetrics that SOGC will find ways to address with APOG. We anticipate data formulation in June 2008

International Women's Health

- increased awareness and support of international women's health among the SOGC membership by publishing articles with an international focus in each issue of *SOGC News*, distributing IWHP promotional folders at events and starting the development of promotional materials for the ten-year anniversary
- increased the number of sustainable partnerships with professional associations, non-governmental organizations and universities
- integrated the Sexual and Reproductive Rights Framework in the fourth edition of the AIP manual

Patient Safety

- expanded the patient safety program
- educated members at regional meetings and the ACM on how to promote patient safety

Women's Health Issues

- promoted health determinants
- developed and promoted the SOGC website and related public education initiatives, such as STI, and the Contraception and HPV Awareness projects

Membership

Over the past year, the SOGC membership has grown to over 3000 valued supporters. Currently, the society's principal recruitment focus is on nurses, midwives, family physicians, and obstetricians and gynaecologists. The society also welcomes health professionals and medical students from a diverse range of disciplines. New members include general practitioners, researchers, nurses, nurse practitioners, midwives, Canadian and international specialists in ob/gyn, and other healthcare providers.

SOGC awarded honorary memberships to two individuals for their dedication to increasing collaboration and the improvement of women's health:

- Dr. Lauré Adrien, CEO of SHOG in Port au Prince, Haiti
- Dr. Luc De Bernis, Senior Maternal Health Advisor, Africa Div. UNFPA, in Addis Ababa, Ethiopia

Online Membership Directory Now Live

To better serve our membership, the SOGC is proud to present our new online membership directory. The new members-only service is a great way to locate colleagues in ob/gyn or related fields, or to just stay in touch with old and new friends. Inclusion in the new directory is free and completely voluntary.

Junior Member Programs

There are a total of 363 Junior Members (residents) within SOGC's membership. Every year 95 to 100 per cent of ob/gyn residents become SOGC members, making this one of the society's most successful outreach activities. The Junior Member programs at the SOGC attract residents from across the country thanks to special features in our SOGC newsletter, the Junior Member Elective Grants Program and the Canadian Junior Member Leadership Program. Other activities, such as the popular "Stump the Professor" feature during the ACM, are organized by the SOGC Junior Members Committee.

A Clinic Website in a Few Clicks

MyObClinic.ca is a simple-to-use service that SOGC offers to members who want to create their own websites. Members can incorporate Google Maps, upload documents, distribute newsletters, create photo galleries and develop a scheduling centre to support multiple clinics. *MyObClinic.ca* was launched at last year's Annual Clinical Meeting and has already garnered considerable interest as 70 members have created accounts. A French version is currently in development.

“I was fortunate enough to attend the ACM in Ottawa this year. This scientific meeting provided great insight into the world of obstetrics and gynecology. The ACM was a great opportunity for medical students. We were able to gain many great tools that will help us both academically and clinically in the upcoming years. I look forward to my future membership in the SOGC, both as a resident and as a physician.”

— Katherine Gasparini,
University of Ottawa

Member Communications

www.sogc.org

The SOGC Website

The practice of medicine is constantly evolving at an incredible pace, meaning trustworthy, up-to-date information is critically in demand. SOGC's website, www.sogc.org, offers Canadian health professionals easy access to our library of Clinical Practice Guidelines, Continuing Medical Education events and specialty news. New enhancements include an online membership directory and podcasts of news coverage and CME events.

SOGC Newsletter

Our monthly newsletter, the *SOGC News* keeps members in touch with the latest news and events from the SOGC. The content of the newsletter is in a continual state of refinement, and includes editorials, member profiles, project updates and relevant news in obstetrics and gynaecology.

E-Delivery News Service

Each month, the SOGC produces and distributes an electronic clippings service, a compilation of recent health stories in the media. This service provides members with access to timely women's health information, offering a quick and easy way for them to stay on top of the health news that their patients are reading.

E-Learning Courses

The SOGC offers a series of rotating online courses. New courses are added each year and are available to members for the duration of one year. In addition to meeting the accreditation criteria of the College of Family Physicians of Canada, each course is also an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of the Royal College of Physicians and Surgeons of Canada. Visit the website to learn more about these exciting opportunities in professional development.



SOGC Awards

President's Award

Dr. Garry Krepert, one of Canada's first gynaecological oncologists, accepted the SOGC President's Award at the ACM in Ottawa earlier this year, for his outstanding commitment to women's health in Canada and abroad.

Affectionately regarded by Manitobans as the "father of oncology," Dr. Krepert played a pivotal role in founding and developing oncology as a gynaecological sub-specialty in Canada. He was also instrumental in founding the Society of Gynecologic Oncologists of Canada in 1980, and has trained many well-respected gynaecological oncologists over the course of his career.

An SOGC member since 1976, Dr. Krepert is currently president of the Medical Staff Association at Cancer Care Manitoba.

Western Regional Award — Dr. Irene Colliton

When she isn't tending to patients at the Edmonton's Grey Nuns Community Hospital, you'll find Dr. Irene Colliton active in one of her many medical leadership roles in the Alberta Capital Health Region, including maintaining one of the largest family medicine obstetrics practices in the city.

A role model for students and family doctors, Dr. Colliton's SOGC involvement is equally impressive — she's a long-time member of the Clinical Practice Obstetrics Committee, a contributor on the Healthy Beginnings Book and a six-time ALARM course instructor, among other commitments.

Ontario Regional Award — Dr. Melvyn E. Petersiel

Responding to women's needs in an area that wasn't well served at the beginning of his career, Dr. Petersiel relentlessly worked to become a respected authority on the management of vulvar diseases. Thanks to his foresight in developing knowledge in this area, women with chronic conditions such as pelvic pain could get care.

Dr. Petersiel was also a stellar teacher, often sought out by residents looking for electives. In them he instilled an enthusiasm for their careers that knew no bounds. He is now retired from active practice, but continues to teach.

Journalism Awards

The SOGC and the Canadian Foundation for Women's Health present Journalism Awards at the ACM every year to recognize outstanding Canadian reporting on women's reproductive health issues in print and in broadcast. This year's award winners were:

Lena Sin — "An African Mother's Agony" published in *The Vancouver Province*

In this touching piece, Lena Sin sheds light on the hurdles faced by many young women in eastern Africa who must travel long distances to get treatment for obstetric fistula, a debilitating birthing injury that has been eradicated in North America, but is still common in the developing world.

Robin Smythe and Jim Handman — "The Perils of Premies" broadcasted on CBC Radio's *Quirks and Quarks*

Through engaging interviews with clinicians and parents, Ms. Smythe and Mr. Handman tell a fascinating story about the ethical and medical questions surrounding extremely premature babies. Examining the potential long-term problems these babies face later in life because of the technological advances that allowed their survival, the journalists are not afraid to address the difficult moral question of whether such babies should be saved in the first place.

The 2007 Research and Innovation Day Winners

OBSTETRICS

Best Paper: Eileen Hutton

Late Versus Early Clamping of the Umbilical Cord in Full-Term Neonates: Systematic Review and Meta-Analysis of Controlled Trials

Best Paper – Junior Members:

Annie Lamontagne

Validity of the Protein-to Creatinine Ratio in an Obstetrical Population at Risk of Proteinuria

Best Paper – Junior Members – First Runner-Up:

Shuqin Wei

Nutrition-Gene Interactions in Preeclampsia: Correlation between Folate Levels, MTHFR C677T Polymorphisms and Homocysteine Status

Best Poster: Thomas Baskett

Method of Delivery in First Pregnancy and Cumulative Maternal Morbidity

Best Poster - Junior Members:

Belina Carranza-Mamane

Prevalence and Predictors of Diabetes Mellitus Screening in the First Year Post-Partum of Women With Gestational Diabetes: A Retrospective Study

Best Poster – Junior Members – First Runner-Up: Joanne White

Maternal and Fetal Complications of Obesity in Obstetrics

GYNAECOLOGY

Best Paper: Magali Robert

Post Operative Urinary Incontinence Following Total Abdominal Hysterectomy or Supracervical Hysterectomy: A Meta-Analysis

Best Paper - Junior Members:

Andrée Sansregret

Is There a Good Physician Simulator to Teach Gynaecologic Laparoscopic Surgery? LTS2000-ISM60 Compared to Mistels: Validation, Correlation and User's Satisfaction

Best Paper – Junior Members – First Runner-Up: Ingrid Kristensen

Complications of the Tension-Free Vaginal Tape Procedure for Stress Urinary Incontinence

Best Urogynaecology Paper:

Roxana Geoffrion

Assessment of the Impact of Urinary Incontinence in the Pelvic Floor Clinic: The Brief Urinary Incontinence Form (BUF)

Best Poster: Sarah McDonald

In Utero Nicotine Exposure and Postnatal Diet: Implications for Future Health

Best Poster – Junior Members:

Anjali Aggarwal

Methotrexate in the Management of Adolescents With Ectopic Pregnancies: A Physician Survey

Best Poster – Junior Members – First Runner-Up:

Shaun Ferguson

A Prospective Cohort of Women Presenting With Early Pregnancy Complications

Continuous Professional Learning

The strength of SOGC's Continuous Professional Learning programs lies in the quality of their events and the scope of their educational coverage. Between July 1, 2006, and June 30, 2007, the society presented seven educational events, including five regional CME programs, one international event and the annual clinical meeting.

International CME, Paradisus Varadero Resort in Cuba

The winning combination of sun, sand and scientific learning made the 20th International CME conference in Cuba a memorable week for over one hundred delegates, family and friends. Health professionals attended many scientific sessions that included discussions on menopause and cancer, twin pregnancies, folic acid usage and overactive bladders. SOGC would like to thank the ICME planning committee, session speakers, delegates, sponsors and staff for their invaluable contributions. Please join us March 10 to 14, 2008, in La Antigua, Guatemala for our 21st International CME.

Annual Clinical Meeting, Ottawa, Ontario, June 21-26, 2007

The 63rd Annual Clinical Meeting in Ottawa was a wonderful success. Delegates had the opportunity to pursue professional development at more than sixty sessions during the six-day retreat. Leading experts in various fields shared their knowledge with attendees and the media.

The conference kicked off with a symposium featuring lectures on the global efforts to reduce maternal and newborn mortality. SOGC was also proud to help support a gala to raise funds for Aboriginal children and youth programs, in keeping with one of the themes established in the strategic plan to improve Aboriginal health. Other popular sessions included "The Vagina Dialogues," a discussion of language and approaches to putting patients at ease about discussing their sexual organs, and the popular Cannell Lecture, which featured a special presentation by University of Toronto's Dr. R. Michael Shier on cervical cancer prevention and the future of the HPV vaccine.

ALARM Program

The ALARM program continues to succeed with 450 nurses, midwives, family physicians and ob/gyn participating in 13 ALARM courses (seven regularly scheduled courses; four special request course; two resident courses). The two-day ALARM program examines all aspects of intrapartum and immediate post-partum practice in Canada and is comprised of case-based plenary sessions, hands-on workshops and a comprehensive examination process. The ALARM program is designed to review, update and maintain professional competence in obstetrics and to ensure the most progressive, effective standard of maternity care possible to Canada's mothers and their newborns.

The 14th edition of the ALARM course syllabus was completed and published in early March 2007.

Maintenance of Certification Program

The SOGC is an Accredited Continuing Professional Development (CPD) provider of the Royal College of Physicians and Surgeons of Canada. The SOGC received a total of 20 applications that were reviewed and approved within the framework of the Royal College's Maintenance of Certification Program.

Regional CME Events

18^e FMC QC-2006
(Sept 28-30) Tremblant, QC **175**
participants

2^e FMC QC OBS-2006
(Nov. 16-17) Montréal, QC **174**
participants

23rd ON CME-2006
(Nov. 30–Dec 2) Toronto, ON **317**
participants

20th ICME-2007
(March 5-9) Cuba **115**
participants

17th WC CME-2007
(March 29-31) Banff, AB **139**
participants

3rd GYN ON CME-2007
(Apr 20-21) Toronto, ON **179**
participants

63rd ACM-2007
(June 21-26) Ottawa, ON **808**
participants

ACM... by the numbers!

808	Registered Delegates
127	Abstract Presentations
155	Media Interviews
62	Conjoint/Committee Meetings
48	Sponsors/Exhibitors
22	Best Practice Sessions
12	Past Presidents in Attendance
17	Post Graduate Courses
10	International Symposia
19	Sold-Out Sessions
5	Subspecialty Sessions
5	Receptions
2	Luncheon Symposia

Millennium Technology

The SOGC offered the Millennium Technology Course as a two-hour breakout session at both Ontario CME and West Central CME events. The Millennium Technology Course is designed to help SOGC members gain the technological skills they need for the optimal use of computer technology. The course content is reviewed at regular intervals to ensure it encompasses the most recent advances in technology. As the technology continues to evolve, this breakout session will continue to be a very popular element of CME events.

The Journal of Obstetrics and Gynaecology Canada

The Journal of Obstetrics and Gynaecology Canada is the SOGC's professional publication and is widely distributed to over 9,010 health care professionals and relevant stakeholders. The journal is an important knowledge dissemination tool with the publication of the recent advances in ob/gyn research, clinical guidelines, policy statements, committee opinions and other relevant scientific information. During the period of September 2006 to September 2007, 17 guidelines, over 300 editorial pages, were published in the Journal, including the following four supplements:

- Abstract Supplement – Research and Innovation Day, ACM2007
- Canadian Consensus Guidelines on Human Papillomavirus
- Canadian Consensus Guideline on Continuous and Extended Hormonal Contraception, 2007
- Fetal Health Surveillance

SOGC Guidelines September 2006 to September 2007

Number	Title	Committee Responsible
194	Mid-Trimester Amniocentesis Fetal Loss Rate	Genetics
193	Laparoscopic Entry: A Review of Techniques, Technologies, and Complications	Clinical Practice Gynaecology
192	Fetal Sex Determination and Disclosure	Diagnostic Imaging
191	Non-Medical Use of Fetal Ultrasound	Diagnostic Imaging
190	Postpartum Maternal and Newborn Discharge	Clinical Practice - Obstetrics
189	Diagnosis and Management of Placenta Praevia	Maternal Fetal Medicine
188	A Report on Best Practices for Returning Birth to Rural and Remote Aboriginal Communities	Aboriginal Health
187	Prenatal Screening for Fetal Aneuploidy	Genetics-Diagnostic Imaging
186	Conservative Management of Urinary Incontinence	Urogynaecology
185	HIV Screening in Pregnancy	Infectious Disease
184	Induced Abortion Guidelines	Clinical Practice-Gynaecology and Social and Sexual Issues
183	The Physician Expert in Legal Proceedings	Medico-Legal
182	Guidelines for the Number of Embryos to Transfer Following In Vitro Fertilization	Reproductive Endocrinology and Infertility - Maternal Fetal Medicine

SOGC Programs

MORE^{OB}

Within just four years, the success of the SOGC's Managing Obstetrical Risks Efficiently program (MORE^{OB}) has skyrocketed so quickly that it has already reached a new and exciting milestone in its evolution.

The goal of MORE^{OB} is to improve patient safety in obstetrics by creating a model of care that emphasizes patient safety as everyone's responsibility. MORE^{OB} helps patient care teams create a community of practice (COP) rich in knowledge and experience that motivates health professionals to achieve a culture of safety in clinical practice.

First implemented in 33 pilot hospitals, its reach has now expanded to include over 6,100 Canadian participants within 141 hospitals in Canada, and 145 American participants in two hospitals in the United States.

The Healthcare Insurance Reciprocal of Canada will expand the success of the MORE^{OB} model to new levels. The new partnership includes the creation of a new company, the Salus Global Corporation, which will expand the MORE^{OB} program and begin the introduction of a broader hospital patient safety program to Canadian hospitals with Dr. J.K. Milne at the helm in his new role of President and CEO of the new corporation.

Salus will operate under a board of governors made up of representatives from both the SOGC and HIROC, among other groups. The MORE^{OB} program will continue to be the Salus' primary obstetrical program product. SOGC will continue to develop the clinical content for MORE^{OB} and safeguard and manage all participant data related to the program.

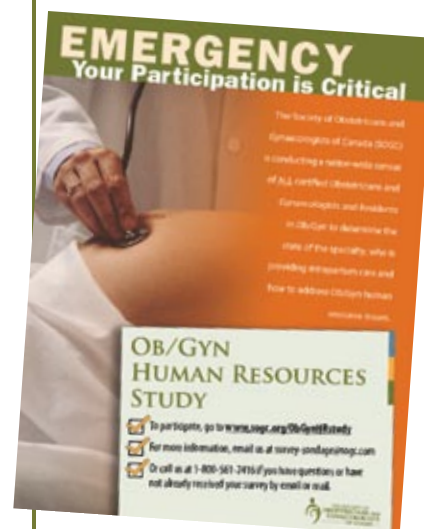
SOGC's Ob/Gyn Human Resources Study

One of SOGC's ongoing commitments is to improve maternal and infant health at home and abroad. Proper human resources and infrastructure are requisite in achieving this goal, but the ever-changing landscape of healthcare in Canada and needs of Canadian women makes it a challenging one.

Many changes are forcing us to reevaluate the way we serve Canada's mothers and infants: The role of urban family physicians in intrapartum care is declining, and the profession of obstetrics is facing funding changes and department closures as we move towards a regionalization of services. At the same time, Canadian women have never had a greater need for care, as they are waiting until they are older to give birth to their first child, meaning that multiples and Cesarean sections are getting more common.

To rise to the challenge of making obstetric care the best it can be in Canada, SOGC has proposed the adoption of a *National Birthing Strategy for Canada* to help address human resource shortages in intrapartum care. The potentially devastating effects of a shortfall have provided the impetus for us to act now to develop an answer. Our goal is for Canada to have a multi-stakeholder, consultative approach to obstetrical care through inter-professional, inter-governmental and inter-jurisdictional cooperation.

To aid us in this goal, we are gathering information with the help of federal funding on the existing state of intrapartum care and its providers in Canada.



SOGC's International Women's Health Program

Renewal of the Partnership Program (2007-2011)

Since 1998, SOGC has been involved in partnership initiatives designed to increase the organizational capacity of ob/gyn associations in lower income countries, such as Guatemala, Haiti, Kosovo, Uganda and Ukraine. In January 2007, the Canadian International Development Agency approved funding for the renewal of the Partnership Program, which will provide support to four ob/gyn professional associations in Burkina Faso, Guatemala, Haiti and Uganda over the next five years. The program will work to strengthen the organizational capacities of these associations in keeping with nationally-owned and directed efforts to improve health systems in an effort to reach the Millennium Development Goals related to HIV/AIDS and child and maternal health. Partnership agreements have been signed with the participating ob/gyn associations, and development of annual work plans and budget forecasts has begun. A leadership workshop for Executive Committee Members and Junior Members was held in Kampala, Uganda, in March 2007, and country-specific audit training took place in Guatemala and Uganda in March and June respectively.

Revision of ALARM International Education Material (4th edition)

This year SOGC updated significant amounts of material for the ALARM International Program. The fourth edition of the manual was available by the end of October in English. French, Spanish and Russian translations will be completed during the first trimester of 2008. A Course was organized in October for members and international partners interested in volunteering as program instructors.

Revision of Organizational Capacity-Building Methodology and Tools

Over the past year, SOGC revised and strengthened its capacity-building methodology related to professional associations. This work has allowed the society to develop a comprehensive framework for assessing the organizational capacity of professional associations that will inform a future organizational development. The framework, which is called the Organization Capacity Improvement Framework (OCIF), is supported by other tools, such as the Organization Capacity Assessment Tool (OCAT) and the Organization Capacity Self-Assessment Tool (OCSAT). SOGC anticipates that this framework and methodology will allow the society to better monitor and evaluate its work within the SOGC Partnership Program.

Research Project QUARITÉ

SOGC signed an agreement on May 14, 2007, with the Centre hospitalier universitaire de Ste-Justine, to demonstrate the impact of the ALARM International Program (AIP) on maternal mortality in referral hospitals in western Africa. The partnership will conduct a clustered randomized control trial called QUARITE (QUALité des soins, gestion du Risque et TEchniques obstétricales dans les pays en développement). In this project, SOGC has committed to implement the AIP in selected health care centers in Senegal and Mali over three years to evaluate the efficiency of the program. Pre-intervention phase activities will start this fall with the creation of ALARM subcommittees in both countries. These groups will be responsible for facilitating the implementation of the AIP in the hospitals selected to be part of the intervention group. The Canadian Institutes of Health Research (CIHR) will fund the four-year research initiative.

As professionals, our privileged position in society obliges us to advocate for improvement of health services for women and to reflect on how best to collaborate with others to bring about the necessary changes so that women will be valued equally to men, and will be able to exercise their sexual and reproductive rights as enshrined in human rights laws.

— Dr. Dorothy Shaw,
President Elect, FIGO

MSPP (Haiti) – a UNICEF Subcontract Related to the AIP

From September 2006 to August 2007, SOGC, in collaboration with la Société Haitienne d'Obstétrique et Gynécologie (SHOG), completed a subcontract from the Ministère de la Santé Publique et de la Population (MSPP) and UNICEF related to the AIP. The initiative was part of a four-year CIDA-funded UNFPA/UNICEF intervention that aimed to improve quality of maternal and infant health services in three priority districts of the country – the Artibonite, North and North West. It included an evaluation of the capacity of selected health centers to provide emergency obstetrical care. Two AIP courses were delivered and support supervision activities followed the training component of the program. The SOGC has agreed to continue the collaboration initiated with the MSPP-UNICEF and will participate in a new phase to be carried out between October 2007 and December 2008. Two AIP workshops will be implemented this year, one in November and one in December. A third training workshop will take place in January 2008. Support supervision activities will be carried out in all three districts.

FIGO's Save the Mothers and Newborns Projects

In 2005, the International Federation of Gynecology and Obstetrics (FIGO) launched its second generation of national projects aimed at reducing maternal and newborn mortality and morbidity, in order to contribute to the achievement of the Millennium Development Goals related to infant and maternal health. The national projects seek to build and strengthen the organizational capacity of ob/gyn and midwifery associations in lower-resource countries so that essential projects relevant to the promotion of safe motherhood and the improvement of maternal health can be carried out. Of the 12 projects currently funded within this FIGO initiative, SOGC has committed to act as a "twinning society" with the projects conducted in Haiti, Kosovo, Uganda and Ukraine. SOGC's support in this capacity includes the identification of mentors — an ob/gyn and a midwife — for each project, as well as technical support during the implementation in each country.

In Ukraine, SOGC's support included developing the capacity of the Ukraine ob/gyn association to conduct the ALARM International Plus program, and to promote it as an effective tool for improving the quality of emergency obstetrical care in the country. Since June 2006, SOGC volunteers have been training a core group of 50 instructors who have since assumed leadership in rolling out the AIP Plus program in two regions, Donetsk and Vinnytsya. To date, AIP Plus has been offered eight times to more than 300 health professionals (specialists and midwives). The support offered to the Ukrainian society also includes services to members, other organizational capacity interventions relating to governance, and promotion of the association's activities and programs to other national stakeholders.

In Kosovo, the FIGO SMNH initiative aims to increase the capacity of both the ob/gyn and midwife associations to increase their contribution to the development and implementation of national standards and protocols related to maternal and newborn care in selected health centers in the country. Similar to the Ukrainian initiative, the Kosovo project builds on the work conducted earlier in the country related to the AIP.

In both Uganda and Haiti, the FIGO-supported initiatives are designed to help health centers in selected regions improve the quality and accessibility of emergency obstetrical care. Both interventions will use the three delay model to train health professionals at different levels of care to access emergency obstetrical care when dealing with life-threatening complications.



*International Women's Health Photo Contest
Third Place: Dr. Paul Thistle's
"Mothers Anticipating Labour"*

Highlights of SOGC's International Women's Health Program at the FIGO World Congress, Kuala Lumpur, Malaysia

The society's IWH Program was highlighted through several activities and special events during the FIGO World Congress.

These included:

- The participation of representatives from SOGC and partner associations from Haiti, Guatemala and Uganda at the FIGO Pre-Congress Workshop on "Access to Sexual and Reproductive Health Care: Impact on Emerging Issues."
- A meeting between representatives of the SOGC Partnership Program and those belonging to ob/gyn associations of Haiti, Guatemala and Uganda.
- The presentation of two abstracts — "Professional Association's Contribution to Global and National Initiatives to Reduce Maternal and Infant Death and Injury" by Dr. A.B. Lalonde, and "Building Capacity in EOC through the AIP in nine countries" by Dr. F. Beaudoin.
- A Global AIP Network meeting that brought together all the ob/gyn associations that have been involved in the promotion of the AIP to date.

During the Congress, SOGC was also involved in the coordination of FIGO's activities relating to the launch of the FIGO joint statement on Post Partum Hemorrhage.

- **Unsolicited Proposal Presented to CIDA Bilateral Haiti**
The SOGC joined a consortium of five institutions to prepare and present a joint project proposal to CIDA, to develop the capacity of health professionals in Haiti. The proposal was sent to CIDA on June 15th. The other members of the consortium are McMaster University, the Association des infirmières et infirmiers du Canada, le Collège régional de Lanaudière and the Cégep de St-Jérôme.
- **IWH Program's Activities in Canada**
On September 26, 2006, SOGC presented a brief to the House of Commons Standing Committee on Finance that called on the federal government to invest in measures which will ensure that mothers and babies in Canada and abroad receive the health care services they need during pregnancy and childbirth.
- **Tenth Anniversary of the IWH Program**
Throughout 2008, SOGC will be celebrating the ten-year anniversary of IWHP. All scheduled activities will be designed to increase awareness about international issues related to obstetrical care and safe motherhood in developing countries among SOGC's members. These will include training activities, articles in the *SOGC News*, a special report to be distributed with a JOGC issue, seminars and conferences that will all report on the past ten years and look at the challenges for the coming years.
- **Expanding the IWH Program Team**
In reflection of an expanding international mandate, SOGC's IWHP has grown with the creation of a program manager position for the Partnership Program. Changes have also occurred within the staff, a new director has joined the team, as well as two new program managers in communication and QUARITÉ.

Public Education and Advocacy

Public education and awareness are important cornerstones of women's health. To this end, SOGC has continued its focus on public education initiatives, including initiating the new *HPVinfo.ca* website, and further enhancing the award-winning Contraception Awareness Project. The society has also embraced new technologies, such as streaming online video, to convey public education messages to its audience. Menopause awareness also continues to be an important facet of SOGC's public education and media relations work.



Sex Sense

This book, written by SOGC's medical experts, provides a comprehensive ABC of sex while answering all the questions people are afraid to ask, or hope they will never have to answer. *Sex Sense* is a call to Canadians, parents and their children in particular, to start talking about sexual health and get better informed about safe sex practices.



Healthy Beginnings

This book is based on the clinical guidelines for care during pregnancy and childbirth established by the society, the leading authority in the field of obstetrics-gynaecology. These are the guidelines that Canadian doctors use in their practices to make decisions based on the most current research.

“The Best Start Resource Centre is pleased to partner with the Society of Obstetricians and Gynaecologists to offer *Healthy Beginnings*. This book provides credible information and links to key programs, services and sources of information. It highlights many things that men and women can do before, during and after pregnancy, to help their children have the healthiest start possible.”

— Barb Willet, Best Start: Ontario's Maternal, Newborn and Early Child Development Resource Centre

PUBLICATION SALES

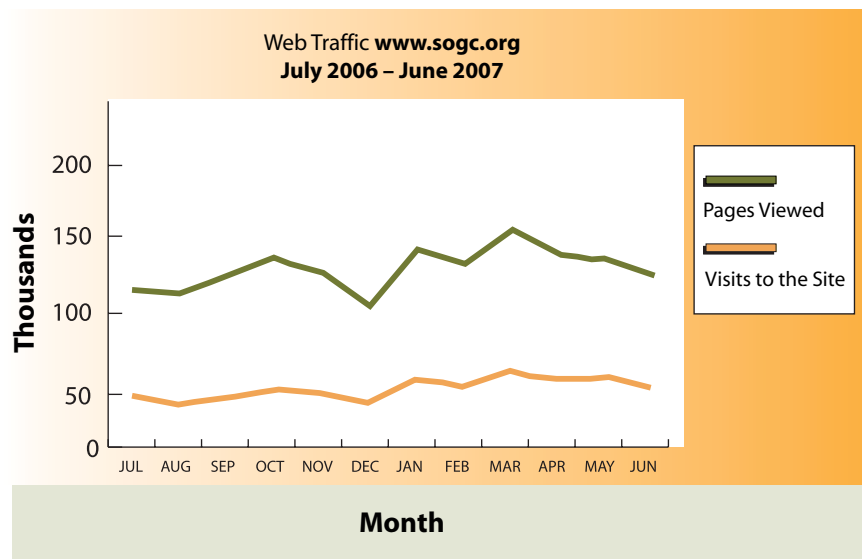
Publications Sales
July 1, 2006, to June 30, 2007

Product	Quantity
Pamphlets	413
Healthy Beginnings 3rd edition	13 708
Partir du bon pied 3e édition	3 022
Sex Sense 2nd edition	2836
Au-delà du plaisir 2e édition	563

SOGC Website – www.sogc.org

Trusted information...just a click away.

For the general public, www.sogc.org provides a direct portal to SOGC's extended suite of public education materials. Following a redesign in late 2005, traffic to the site rose substantially. The site continues to experience a gradual upward trend in visitors despite reaching a subsequent plateau. The Women's Health Information and Clinical Practice Guideline sections remain among the most heavily trafficked areas of the site.



Advocacy July 2006 – July 2007

The focus on advocacy, a new strategic pillar for SOGC, has been to dedicate resources towards leading, teaching and creating strategies for SOGC to improve advocacy and government relations. With a public affairs professional in place, the SOGC Council and other members received orientation workshops at the ICME in Cuba. The focus of the sessions was on the role of advocacy in advancing women's health in Canada and abroad, as well as a discussion of tactics and techniques appropriate to the society.

Promoting *A National Birthing Strategy for Canada* has been the focus of a grassroots advocacy outreach by SOGC members, as well as National Office staff. A "How-To" guide to grassroots advocacy is in development under the leadership of SOGC's Public Affairs Committee. Once completed, this resource will be made available to all SOGC members as a user-friendly, hands-on guide for those who wish to get in touch with elected officials in their regions to advance the priorities of women's health.

Media Relations

SOGC remains a leading voice in the media on women's health issues. In responding to hundreds of media requests each year, SOGC's expert spokespeople help enable journalists to provide accurate and trustworthy information to millions of Canadians. Over the past year, the society's media outreach has garnered national media coverage with over 137 hits on issues such as menopause, prenatal diagnosis, human resources in obstetrics, the human papillomavirus, and new research appearing in the JOGC.

Contraception Awareness Project

The Contraception Awareness Project (CAP) continues to be a leader in sexual and reproductive health promotion by expanding its public education and CME initiatives.

Website *sexualityandu.ca*:

The enhancement of interactive elements and dynamic resources, balanced with regular content updates further enhances the site's standing as an informational tool aimed at a variety of audiences.

Such initiatives include the recent addition of video testimonials for youth, teaching and learning modules for educators and health-care professionals, teacher self-assessment tools, and an upgraded visual identity of the site.

New resources added this year included a counselling tool called "Understanding Sexually Transmitted Infections (STIs) Flipchart," a related teaching presentation on understanding STIs and "Choosing Wisely," a user-friendly software application to facilitate the selection of an appropriate contraception method, as well as the Modern Contraceptive Challenges CME workshop.

Here are some statistics that highlight the success of *sexualityandu.ca*:

- **Statistics:** 240,000 visitors on a monthly basis who view 6.3 pages on average, and spend over 6 minutes browsing the site per visit.
- **Web ranking:** First page ranking in search engine results (ex: Google) for a number of sexual health topics.
- **Awards:** *sexualityandu.ca* was presented with an Aesculapius Award of Excellence (2006) in recognition of excellence in communicating health information to the public.



Partnerships:

- Funding was obtained from Health Canada's First Nations Branch to develop the framework for an aboriginal version of *sexualityandu.ca* in partnership with NIICHR.
- Collaboration and endorsement from the Public Health Agency of Canada to publish and distribute the "Understanding STIs" flipchart.
- A five-year agreement with Church & Dwight to provide 60,000 free Trojan condoms per year to schools, clinics and special events.
- A partnership with the National Speakers Bureau, the agency representing the Sue Johanson campus tour to distribute specially branded *sexualityandu.ca* educational resources to an estimated 25,000 students nationwide.

Advertising and Promotion:

A national advertising and public service announcement (PSA) campaign targeting the general public was launched in September 2006, with a secondary flight running January to March 2007.

The integrated campaign combined television, radio, online, and out-of-home (movie



The national and international recognition of *sexualityandu.ca*, including major awards, indicates that it has set a very high standard indeed among sites that seek to provide authoritative engaging, and up-to-date sexual health information and resources to the public, educators and health professionals. Collectively, the impact is encouraging.

I think the message is getting out in this and other areas of sexual health. CAP and *sexualityandu.ca* have been a strong, sustained force for public and professional education and service in helping to achieve and maintain such trends. Having been a member of the Core Working Group almost from the inception of the project, I am encouraged by CAP's achievements but also by the continued search for innovative ways to do more and better.

— Michael Barrett,
Executive Director, SIECCAN

www.sexualityandu.ca is a terrific source for accurate sexual health information for teachers, students and parents. The content is well-researched, well-written and easy to understand. Everyone who teaches this subject or who has questions about sex should visit this site. I recommend it to all my students!

— Stephanie Mitelman, MA, CCFE, CSE, President of Sexpressions, President, Instructor at McGill and Concordia universities

Thanks for the promotional materials. We find your resources and website to be very valuable and extremely useful. Keep up the great work!

— Bill Sherlock, Program Manager, Sexual and Reproductive Health, Hastings and Prince Edward Counties Health Unit

A big thank you!!!! What an awesome site you have. I am grateful that my 15-year-old daughter talked to me about her seriousness with sex tonight. We went over the pros and cons and the importance of protection....I wanted to find information on the subject that supported our discussion. Thanks so very much.

— Mom and daughter

theatre, bus/subway) advertising to drive additional web traffic to sexualityandu.ca, as well as to promote contraceptive choices and adherence. Another innovative component of the campaign was a pilot project designed to engage youth in peer to peer dialogue on contraception. Universities and colleges were invited to plan, locate funding and launch a micro campaign in their own communities with a grand prize of \$5,000 as incentive. Media reports confirm that:

- Online placements resulted in over 120,000 direct click-throughs.
- The Sex-Fu Challenge Contest Edition generated 16,200 contest entries over a four-week period.
- The Grassroots Campaign Challenge, a marketing competition between universities to get more youth to visit the site, generated 38,275 visits to the sexualityandu.ca site over a four-week period. This represents close to 1/5th of the average traffic to the site on a monthly basis.

Promotional items and educational resources

Mainstream advertising is supplemented with promotional items distributed to schools, colleges, universities, sexual health clinics, and physicians' offices. Over 200 orders are processed monthly.

In addition to such requests, a joint sexualityandu.ca and hpvinfo.ca outreach activity resulted in a direct mail campaign targeting over 10,000 high-school principals. A special mailout also took place in April to 1,200 Public Health Offices, Youth Services Bureaus and sexual health clinics across Canada to put sexualityandu.ca contraception and STI prevention resources in the hands of key educators in sexual health promotion.

Exhibits

SOGC also exhibited sexualityandu.ca at many trade and public conferences in Ontario and Quebec.

The Foundation for the Promotion of Sexual and Reproductive Health (FPSRH) underwrites four other key initiatives.

Contraception, Advice, Research and Education (C.A.R.E.) Fellowship

CAP financially supports Canada's only post-graduate fellowship in contraception and family planning. The 2006/2007 Queen's University CARE Fellow sits on the CAP Core Committee, authors the e-bulletin, answers questions from the website, writes/edits contraception content and facilitates contraception workshops.

Compassionate Contraceptive Assistance Program

The program, which provides samples of contraceptives to women who cannot otherwise afford contraception, continues to thrive with collaboration of the four major contraceptive manufacturers. Close to 700 requests are filled monthly, for a total of approximately 4,000 scripts. In 2006, 6273 requests were received resulting in over 30,000 scripts delivered.

College of Family Physicians of Canada Scholarships in Women's Health

CAP has provided a \$50,000 contribution for the 2007 CFPC traineeship grants. A dozen recipients will obtain funding for their continued education in women's health on topics ranging from menopause to the prevention and screening of gynaecological diseases.

Next Steps

CAP has a number of ongoing and planned projects focused on enhancing its resources, creating partnerships with like-minded organizations, and continued sponsor relations.

Human Papillomavirus (HPV) Public Awareness Campaign

In the summer of 2006, the SOGC launched a national public awareness campaign on HPV that would increase the level of understanding of HPV and of the risk of infection and its consequences, among other goals.

Campaign Results

The development and promotion of a website on HPV

SOGC developed and launched a bilingual website called hpvinfo.ca / infovph.ca that targets teens, parents, adults, teachers and health professionals, based on the SOGC's award-winning sexualityandu.ca platform.

SOGC used many different media types in both national languages to promote the sites, such as banners on Websites such as MSN.ca and Hotmail, flyers in online communities such as Facebook and MySpace, ad placements on MuchMusic and MusiquePlus, radio spots in major youth markets as well as print ads in three magazines and daily newspapers in four major cities.

The next steps for the SOGC hpvinfo.ca / infovph.ca include a comprehensive web optimization strategy.

The development and distribution of college campus initiatives

SOGC's college campus initiatives included the production and distribution of 243,000 magnetic bookmarks that drew attention to HPV, the hpvinfo.ca websites, and the importance of annual Pap testing to 109 universities and colleges across Canada.

In addition, 135,000 public education brochures in English and in French were distributed in 83 campus health clinics in colleges and universities across Canada.

Lastly, campus bathroom posters were installed in male and female bathrooms on over 90 campuses across Canada.

The development and dissemination of public service announcements

A TV public service announcement in both French and English was developed and disseminated to 80 broadcasters across Canada for periodic use at their discretion.

A radio PSA was distributed to 500 radio outlets in Canada for use at their discretion. As well, paid spots were negotiated in small city markets with post secondary institutions and a dominant rock station, that is, with a significant market share of the target audience.

The development and distribution of teacher educational kits

SOGC held discussion groups with educators to evaluate their needs as they related to teaching young people about HPV. As a result of this input, the SOGC created an online lesson plan available on hpvinfo.ca, as well as a PowerPoint presentation, a stand-alone version of the HPV web-based game, and relevant articles on HPV.

A print ad is currently in development and will appear in publications targeting teachers, sexual health educators and counselors.



The development and distribution of public education packages

SOGC created a public education brochure with high visual impact for distribution to campus health clinics in colleges and universities across Canada, which included the input of teenage female students.

A print run of 910,000 reached young women through trade shows and through inclusion in magazines such as LouLou, Glow, Pure and UR Magazine.

The brochure was also widely distributed to health professionals, via the September issue of the SOGC News, to various clinics and conferences.

An electronic ordering system was added to the project deliverables to address growing demand for the HPV brochure. An additional 25,000 brochures (to date) have been distributed as a result of these requests.

This first phase of the campaign has reached millions in the target audiences, in particular:

- 735,100 via polybagging brochures in magazines targeting **young women**;
- 6,790,000 women were reached via ads in magazines with the appropriate demographic to reach **mothers of young girls**;
- thousands of **health professionals** have received the public education material and have been provided with information to speak to their patients about HPV;
- thousands of **teachers/sexual health educators/counsellors** have received specially designed information about HPV that will help them educate students about HPV; and
- millions of Canadians have been reached via ad placement, TV and radio ads and PSA placement.

Next Steps

The HPV Public Awareness Campaign has been overwhelmingly successful. SOGC is now really beginning to see the “buzz” and momentum building as each element of the campaign rolls out.

The society looks forward to continue the important work we have begun: to ensure that Canadians are aware of HPV and are informed about what they can do to prevent the spread of the disease.

Summarized Financial Statements

Auditors' Report to the Members

The accompanying summarized statement of financial position and summarized statement of operations and changes in net assets are derived from the complete financial statements of The Society of Obstetricians and Gynaecologists of Canada as at December 31, 2006 and for the year then ended on which we expressed an opinion without reservation in our report dated April 20, 2007. The fair summarization of the complete financial statements is the responsibility of management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the summarized financial statements.

In our opinion, the accompanying financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

These summarized financial statements do not contain all the disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that these statements may not be appropriate for their purposes. For more information on the Society's financial position, results of operations and cash flows, reference should be made to the related complete financial statements.

Chartered Accountants, Licensed Public Accountants
Ottawa, Canada
April 20, 2007

Summarized Statement of Financial Position

December 31, 2006, with comparative figures for 2005

	2006	2005
Assets		
Current assets:		
Cash and cash equivalents	\$235,352	\$-
Amounts receivable	1,501,148	1,912,106
Prepaid expenses and deposits	116,520	158,810
Prepaid rent	148,918	148,918
	2,001,938	2,219,834
Portfolio investments (market value 2006 - \$4,343,706; 2005 - \$2,808,315)	3,661,398	2,078,170
Prepaid rent	1,712,558	1,861,476
Capital assets	416,613	380,427
Intangible assets	130,000	130,000
	\$7,922,507	\$6,669,907
Liabilities and Net Assets		
Current liabilities:		
Bank indebtedness	\$-	\$169,278
Accounts payable and accrued liabilities	1,652,592	1,343,189
Deferred revenue	1,613,933	1,310,543
Current portion of long-term debt	138,778	468,661
	3,405,303	3,291,671
Long-term debt	1,290,414	1,352,718
Net assets	3,226,790	2,025,518
	\$7,922,507	\$6,669,907

See accompanying note to summarized financial statements.

Summarized Statement of Operations and Changes in Net Assets

Year ended December 31, 2006, with comparative figures for 2005

	Budget (unaudited)	2006	2005
Revenues:			
Registration fees/Funding	\$7,611,038	\$9,874,677	\$8,654,374
Administrative services	521,039	525,933	514,799
Membership fees	537,400	513,304	515,862
Journal	1,062,000	1,432,475	982,870
Exhibits	225,000	143,402	237,689
Sales of books and brochures	160,000	388,582	21,352
Grants	–	25,000	–
Social programs	26,000	9,649	19,672
Miscellaneous	8,200	36,985	132,260
Interest	10,000	84,435	5,973
Rent from collaborating practice and rental units	53,761	52,261	58,183
Funding international activities	89,909	64,969	403,907
Salary management for tenants	91,887	90,511	82,893
Internal resource	50,000	103,956	75,590
Investment	–	372,029	–
	10,446,234	13,718,168	11,705,424
Expenditures:			
Salaries and benefits	3,768,995	3,944,333	4,083,599
Committee travel and accommodation	639,397	677,866	507,783
National travel and accommodation	426,924	570,272	406,901
President's	51,200	47,333	55,499
Memberships and affiliations	6,000	5,894	5,125
Consulting	1,227,566	1,732,283	1,078,453
Journal	–	–	951,171
Professional development	77,000	64,717	63,120
Development costs	235,000	349,854	558,930
Conference speakers	624,914	715,205	526,601
Translation and interpretation	48,569	52,021	42,409
Books and periodicals	24,000	19,448	17,969
Printing	465,250	1,111,040	176,224
Publicity/promotion	272,750	784,456	203,223
Prizes and awards	61,250	59,650	32,279
Equipment purchases	102,338	129,371	96,171
General office administration	426,445	523,612	391,177
Equipment rental	213,185	187,630	267,209
Rent	400,984	383,333	401,796
Legal	15,600	29,631	8,790
Audit	24,000	27,950	26,900
Insurance	33,192	29,924	38,967
Affiliated meetings	3,600	33,590	128,172
Hospitality	464,300	527,973	465,236
Amortization of capital assets	107,412	107,790	117,227
Amortization of deferred development costs	–	–	66,371
Interest on loans	80,370	84,668	107,019
Funding special projects and international activities	161,397	175,521	160,311
Miscellaneous	71,075	141,531	38,102
	10,032,713	12,516,896	11,022,734
Excess of revenues over expenditures	413,521	1,201,272	682,690
Net assets, beginning of year		2,025,518	1,342,828
Net assets, end of year		\$3,226,790	\$2,025,518

See accompanying note to summarized financial statements.

Investments:

THE SOCIETY OF OBSTETRICIANS AND GYNAECOLOGISTS OF CANADA Note to Summarized Financial Statements

Year ended December 31, 2006

Investments:

Investments have appreciated by \$126,117, which reflects an unrealized gain in market value between December 31, 2005, and December 31, 2006. If the total investment portfolio had been sold on December 31, 2006, at its full market value, the Society of Obstetricians and Gynaecologists of Canada would have excess of revenues over expenditures of \$1,327,389 for the year.



Celebrating



THE SOCIETY OF
OBSTETRICIANS AND
GYNAECOLOGISTS
OF CANADA



1998 2008 TEN YEARS OF INTERNATIONAL WOMEN'S HEALTH
