

Fédération des femmes médecins du Canada



# of Women in Medicine

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See you in Hamilton for our 2016 AGM



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for our mother organization, the Medical Women's International Association





# President's Update



Dear Members;

Well, June has just ended. For those of us with children in school, the year comes to a close. And for those whose kids are grown, it still feels like the end of a semester, as we physicians have spent so many years in the school system.

Thus, I think it is time to reflect on this year's achievements. As we plan our summer and look to the exciting Annual General Meeting (AGM) scheduled for Sept 23<sup>rd</sup> - 25<sup>th</sup>, 2016 in Hamilton, ON, I am happy to share that Dr. Niec and her team have a fantastic program planned. The theme is *Pride and Prejudice: Setting the Agenda for Women's Health* and we are honoured to partner with McMaster University.

When we last met in Toronto for our 2015 AGM, the theme was Power in Partnership. We have focused on that theme and maintained our vision.

Let me share with you some of our achievements.

- We formally requested a position on the Board of Immune Canada whose role it is to educate, advocate and promote immunization to the Canadian public. We were accepted as a full voting member and Dr. Janet Dollin, Past President of the FMWC and Chair of Communication has agreed to be our representative.
- We have met with Amnesty International (AI) and we are now sharing information and our newsletters. We have invited

Dr. Shobana Ananth, Al Canada's Health Network Coordinator, to speak at our 2016 AGM to educate us on how to recognize and address issues around refugee heath.

- We have partnered with the American Medical Women's Association on many very exciting projects. In one such project, Dr. Kaloty and Dr. Liao are working with others on a position paper around inter-partner violence and the need for women to have a confidential interview with their doctor. We hope this will become the standard of care taught in every Canadian medical school.
- Our partnership with the Canadian Cancer Society continues and we all celebrated the long-awaited announcement by the Ontario government that they are extending the HPV vaccine program to boys and providing equitable access. This makes six provinces who will be providing publicly-funded HPV vaccines to both boys and girls in their school system. Yes, more work to be done, but enjoying the interim successes.
- Our partnership with MD Financial Management is ongoing as we learn how to manage our practices, our futures and our professional decisions.
- We have a new partnership with Women's Brain Health Institute helping to educate and advocate on brain health.
- We have more partnerships in progress that will make us a stronger and more robust organization.
- Students in Hamilton have formed a branch and will celebrate with a "meet, greet and eat" in the fall.
   Similarly, last December students in Kingston shared an evening learning about women in medicine.

At the end of July, the FMWC will be present in Vienna for the MWIA meeting and we are proud of our members, in particular Dr. Shelley Ross, MWIA Secretary General and Dr. Gail Beck, MWIA Treasurer. I will have the honor of presenting a lecture on social media and to vote as Canada participates in this international meeting.

Finally, we congratulate the amazing achievements of some of our members:

**Dr. Judith Hall** (2015), and **Dr. May Cohen** (2016), on their induction into the Canadian Medical Hall of Fame

**Dr. Jane Philpott**, last year's keynote speaker at the AGM, now our Federal Health Minister

**Dr. Carolyn Bennett**, also an AGM speaker, now the Minister of Indigenous Affairs

Our BC colleagues, **Dr. Trina Larsen Soles** who is President-Elect of Doctors of BC and **Dr. Shelley Ross**, who is now on the CMA Board

**Dr. Marla Shapiro**, awarded the Order of Canada for her outstanding achievements in medical knowledge translation

**Dr. Wendy Norman**, last year's FMWC Reproductive Health Award winner, received the 2015 Darroch Award by the Guttmacher Institute as an emerging leader in sexual and reproductive health research internationally

**Dr. Dorothy Shaw**, recipient of the Leadership Award by the Canadian Society of Physician Leaders

And we celebrate You, our member. Working hard at our profession, seeing patients, sharing our knowledge, mentoring, and supporting each other and our colleagues. You are what makes this organization powerful and exciting.

The Federation of Medical Women of Canada is the voice of women doctors and I am proud to help spread our voice, share our message and work, to improve the health of all Canadians.

Thank you for sharing this journey with me.

See you in Hamilton!

Ar Vivien Brown

Dr. Vivien Brown President, Federation of Medical Women of Canada



# 2015 AGM Highlights

Sep 25-27, 2015

Summary highlights from the 91<sup>st</sup> FMWC Annual General Meeting (AGM) & Educational Sessions Women Physicians: Power in Partnership || Toronto, ON

Shared information and recent updates from experts across many spheres of medical disciplines served to strengthen partnership and collaboration for attendees at the 91st AGM of the Federation of Medical Women of Canada in Toronto. Some of the comments expressed by participants were that the event was "inspirational" and "exciting" as well as "effectively boosting" global health initiatives.

The opening event was the Board's invitational Reception on Thursday evening for the International attendees from Europe, Africa, Central America and India. Spirited conversation and networking established the tone for the conference.

On Friday, September 25, two preconference workshops were held. The first, conducted by immediate Past-President Dr. Mamta Gautam, Psychiatrist and Expert in Physician Health and Leadership, titled "Quit Being Good, Be Great!" urged participants to build on their strengths and shared the mantra of the Five "C's" of Resilience: Control; Commitment; Connection; Calmness and Care for Self. The second Pre-Conference workshop presented by MD Financial Management covered Financial Planning for Female Physicians.

At the annual general meeting – September 26, Dr. Vivien Brown, Toronto Family Physician and Assistant Professor at the University of Toronto Medical School was installed as President of the FMWC for the 2015-2016 term. In her inaugural remarks she quoted the conference theme: "If you want to go fast, go alone. If you want to go far, go together." In the day's afternoon plenary, Dr. Brown delivered a spirited presentation on the need to improve vaccination coverage rates of the Canadian adult population and the need to improve uniformity of vaccine delivery across all of the provinces of Canada.

The conference's opening address was delivered by Dr. Jane Philpott whose topic was "Upsize your Outputs by the Power of Partnership" and she discussed why partnerships make sense and need to be cultivated. She urged participants to listen first, to give credit to others, to conduct outreach to young leaders, and to look out for the interests of others as their own reputations become enhanced.

The first plenary of the day was given by Dr. Claudia Morrissey whose focus was on Global Health, Saving Mothers, Giving Life. She described UN studies of maternal mortality in Uganda and in Zambia and the organizational partnering, which was designed to reduce maternal mortality in those countries. What was learned was that zero tolerance for preventable maternal and newborn deaths is the foundation upon which all political, public health, and community commitments and actions must build.

The Awards luncheon recognized the exceptional efforts of 5 outstanding professionals. Dr. Janice Stein received the Honorary Member award, Dr. Wendy Norman was given the Enid Johnson Macleod award, the May Cohen Award was presented to Dr. Jennifer Blake; the



Reproductive Health Award was given to Dr. Praseedha Janakiram and the Student Leadership Award went to Ms. Raisa Kanji.

Afternoon highlights from the first day included cardiologist Dr. Randi Rose's persuasive presentation that Lifestyle Interventions may be the best medicine that cardiologists are not using! She urged participants to learn tips on increasing their own "nutrition literacy" and summarized the literature on the cardiovascular impact of lifestyle modification.

Saturday night offered attendees a chance to network and socialize at our GALA and Silent Auction held at the Royal Ontario Museum.

The second day started with a presentation by Dr. Margery Glass, who spoke about the value of organizational partnerships. She said that progress may be slow on big issues, but that leads need to be pursued no matter how small. She urged persistence and that dead ends are to be expected, but it was important NOT TO GIVE UP!

The day and conference concluded with a presentation on the impact that social media is having on the practice of medicine by Dr. Marla Shapiro. She said that medicine does not work well in sound bites, and that with the internet, perception is so fast that the definition of "risk" has changed. She concluded by instructing the audience that "People are disturbed not by the things, but by the view they take of them" and rumors and misinformation spread virally in social media. Doctors need to be literate on how to respond to patients' questions, which have been generated by internet information.



September 23 – 25, 2016

The Federation of Medical Women of Canada (FMWC) presents:

### Pride & Prejudice: Setting the Agenda for Women's Health

Annual General Meeting & Educational Sessions (AGM)

Sheraton Hamilton Hotel, Hamilton, ON



More information: fmwc.ca/2016agm





# Financial Planning Considerations for Female Physicians

What is unique about a female physician? From a professional or intellectual perspective, nothing. But from a financial perspective, there are some differences to consider when it comes to long-term planning.

In general, women are more likely to take time out of their careers for leave following the birth or adoption of their child, resulting in fewer earning years than for their male counterparts.

Additionally, statistics show that women generally can have a longer lifespan than men<sup>1</sup>. These two factors can mean that female physicians need to plan for greater savings or retirement funds.

"To help achieve and sustain financial independence over the long term, it's essential for female physicians to get comfortable with financial decision-making," says Bridget Paton, a Senior Financial Consultant with MD Management Limited. "Investing your time in learning basic money management and investing principles, as well as creating a long-term financial plan, can help."

Here are some financial guidelines to consider at different stages of your career:

# **Medical Students: Develop Good Financial Habits**

It is never too early to start organizing your own finances. Start with your goals (short-, medium- and long-term) and develop a plan.

Sketch out a budget before the beginning of each medical school year. Estimate your costs and potential income. Be mindful of what you own and owe, even though you may not be earning a salary or saving funds.

If you need to borrow funds to pay for medical school, a budget will also help you determine how much you need to borrow and help you manage your money better.

### Residents and Maternity Leave: Know What Benefits Are Available

Many medical residents who are thinking about having children find that residency is the perfect time. Regardless of when you decide to take that step, planning for the financial impact of having a child is an important part of becoming parents.

While most practising physicians are selfemployed, as a medical resident you are considered an employee. Maternity leave benefits vary by province and territory.

For example, in British Columbia, medical residents who give birth are entitled to 52 consecutive weeks of unpaid maternity leave. In addition to being granted this time away from work—including uninterrupted health benefits—residents get a certain amount of compensation.

In Ontario, a resident may receive up to 17 consecutive weeks of pregnancy leave at her discretion. In no case will she be required to return to her duties sooner than six weeks following delivery. And she may extend the leave for up to 12 months, inclusive of any parental leave.

# **Practising Physicians: Minimize Your Taxes**

Taxes are one of the most significant expenses that physicians will incur during their career. Up to 50 per cent of your taxable income could be paid in income taxes (depending on your province or territory of residence and income level).

Your financial plan should include ways to minimize taxes and maximize your cash flow. For example, relocating for residency may mean you can deduct your travel and moving costs. Or if your employer requires you to use your car for work, you may be able to claim carrelated expenses.

Incorporating a practice is a strategy that many physicians use to minimize taxes, since the small business tax rate is much lower than the personal tax rate in many circumstances. This move offers both income-splitting and tax deferral advantages as well.

Depending on your financial situation, other tax-optimization strategies may be available to you as well, Ms. Paton notes.

# Retirement Phase: Plan for a Long Retirement

As the average life expectancy increases, females generally should consider the financial implications of a potentially longer life. Saving for retirement becomes particularly important.

Among the retirement savings options are:

A registered retirement savings plan (RRSP). This is an investment account with tax benefits to help you maximize your retirement savings. Contributions to your RRSP grow unaffected by taxes and reduce your taxable income. RRSP withdrawals are treated as taxable income.

A registered retirement income fund (RRIF). This is used to withdraw retirement income. The investments inside the RRIF continue to grow tax-deferred like they do in an RRSP. You can continue to manage your RRIF the same way you manage your RRSP, but you can't contribute to a RRIF.

Individual pension plans (IPPs). These are alternative retirement savings vehicles that allow for enhanced tax relief and increased pension benefits beyond those available through RRSPs and other retirement plans. They can be set up for one person or for a group of employees in the same company.

"Taking control of your finances means taking control of your future well-being," says Ms. Paton. "Working with a financial advisor who understands the needs specific to female physicians can help ensure that you're planning as effectively as possible."

<sup>1</sup>According to Statistics Canada, from 2007 to 2009, life expectancy for men was 79 years, while for women it was 83 years of age. This compares with 59 years for men and 61 years for women from 1920 to 1922 (<a href="www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/health26-eng.htm">www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/health26-eng.htm</a>).

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# A Focus on Intimate Partner Violence in Toronto

May 3, 2016

Dr. Roopinder (Robin) Kaloty, Resident Representative, FMWC Board

The Toronto branch lends focus to the health consequences and provider considerations when working with survivors of intimate partner violence (IPV). The Toronto event "Caring for Women Who Are Victims of Violence... What Can We Learn" organized by branch president Dr. Kathee Andrews took place on May 3, 2016 and was attended by medical students, residents, and practicing physicians from the local area.

Dr. Robin Kaloty, a family medicine resident based out of Women's College Hospital with a special clinical and research interest in IPV, spoke about the prevalence and health consequences of IPV, and highlighted various avenues that clinicians can take to support IPV victims.

But the most valuable learning happened from the first-hand account of a survivor. Audience members listened carefully as Sarah Morgan recounted her experiences with sexual assault and psychological abuse. She discussed her various encounters with the healthcare system over the years, highlighting both the positive and negative experiences she had during her journey to finally disclosing abuse and seeking help. The audience engaged in a discussion on strategies to maintain an open and non-judgmental atmosphere in the healthcare setting. Sarah has a bachelor's degree in social sciences and is now working as a crisis worker at a women's shelter in Toronto.

Attendees described the event as educational and eye-opening. "Her story was so touching and will have a lasting impact on me" said Amanpreet Brar, a second year medical student from the University of Toronto.

Several members of the Toronto branch have been working hard to address barriers to IPV, having recently joined forces with the American Medical Women's Association (AMWA) to create The Confidential Interviews Task Force. This task force advocates for medical schools in North America to train medical students to maintain a confidential environment during patient visits (i.e., asking the patient's partner to leave the room for the physician



Pictured (L-R) – Dr. Kathee Andrews (President, FMWC Toronto Branch), Dr. Robin Kaloty (National Resident Representative, FMWC), Ms. Sarah Morgan (Guest Speaker), Dr. Vivien Brown (President, FWMC)

encounter). The goal is for confidential patient interviewing to become standard practice, which will in turn address a common barrier to abuse disclosure. Toronto members of this initiative include Dr. Vivien Brown, Dr. Robin Kaloty, Dr. Pamela Liao, Amanpreet Brar, and Aya Abdou.

Visit the following link for more information about The Confidential Interviews Task Force:

https://fmwc.ca/confidential-interviewtask-force- launched/

# Medical Women of Canada Foundation Update

Dr. Shajia Khan, Chair, Medical Women of Canada Foundation

The Executive and Committee members of the Federation of Medical Women of Canada Foundation (MWCF) are pleased to report that the Awards and Finance committees have been formed from volunteer members of the Federation of Medical Women of Canada (FMWC).

MWCF encourages you to donate to the Maude Abbott Student Scholarship Fund and Maude Abbott Research Fund.

Your generous contributions help to build these funds allowing us to give awards to students and researchers. To apply for an award, the application and criteria can be found on the FMWC website <a href="https://fmwc.ca/awards/">https://fmwc.ca/awards/</a>

The MWCF Annual General Meeting will be held during the 2016 Annual General Meeting of the FMWC, September 23-25 in Hamilton, Ontario.



# Three Generations

Dr. Muriel Solomon (right) taught Dr. Behirokh Raissi (left) in the IMG program at the University of Calgary, who in turn mentored Dr. Elaine Poon (centre) when she was a medical student. We belong to the family of medicine!! AND to our FMWC-Calgary family



# Member Accomplishments

### **CANADIAN MEDICAL HALL OF FAME INDUCTEE 2015**

An exemplary clinical investigator and passionate international thought leader in her field, Judith G. Hall is a pediatrician and geneticist, specializing in the genetic factors that affect children's growth. With more than 325 publications, Dr. Hall has been at the international forefront of genetics and pediatrics for more than four decades. As head of paediatrics at UBC and BC Children's Hospital, Dr. Hall worked with physicians to develop guidelines for care of common disorders, and with lay groups to explain genetic disease that helped parents choose among the available care options.



### CANADIAN MEDICAL HALL OF FAME INDUCTEE 2016



A pioneer for positive change in women's health, May Cohen graduated at the top of her class in 1955 at a time when fewer than seven percent of medical students in Canada were women. Following a twenty year career as a family physician in Toronto, Dr. Cohen joined the department of family medicine at McMaster University in 1977 and served as associate dean of health services from 1991 to 1996. She co-founded the first faculty of medicine Women's Health Office in 1991, triggering several medical schools to follow suit, which lead to the creation of the Women's Health Inter School Curriculum Committee for Ontario's medical schools.



Congratulations to two of our Honorary members on their recent appointments – **Hon. Dr. Jane Philpott** as Minister of Health, and **Hon. Dr. Carolyn Bennett** as Minister of Indigenous and Northern Affairs in Justin Trudeau's first cabinet on November 4, 2015.





In 2015, **Dr. Shapiro** was named a member of the Order of Canada, for her contributions as a family physician and trusted source of health information.



**Dr. Samantha Nutt**, Founder of War Child Canada and USA, was nominated for DVF's prestigious People's Voice Award, which is granted to a trailblazing leader by fashion icon Diane Von Furstenberg.

The awards were created to honor and support extraordinary women who have had the courage to fight, the power to survive and the leadership to inspire. Women who have transformed the lives of others through their commitment, resources and visibility. Dr. Nutt is a tireless advocate for vulnerable children, and she truly embodies the values of the People's Voice.

Although Dr. Nutt was not selected, the FMWC is extremely proud of its Honorary Member and the important work that she does.





The Guttmacher Institute announced the selection of *Dr. Wendy Norman* as their 2015 Darroch Award recipient. This prestigious honour is bestowed once every two years honouring an emerging leader in sexual and reproductive health research internationally.



You are invited to come celebrate our 2016 FMWC award winners at the Award luncheon on Saturday, September 24, 2016.



**Dr. Dorothy Shaw** received the 2015 Canadian Society of Physician Leaders' Excellence in Medical Leadership Award for her outstanding contribution to the development and mentorship of medical leaders in the field of health services leadership and management.

# Dr. Mary A. Murphy

October 16, 1918 to January 10, 2016

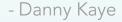
Mary was born in Calgary and grew up in Vancouver, receiving Bachelors and Masters degrees from the University of British Columbia, then going on to receive her M.D. from University of Western Ontario, one of three women in her class. The Anatomy Professor scowled at the three of them and said "You will be getting no favors from me". So I wonder how he felt, when in 1948, she graduated at the top of her class.

She met her husband, Edwin Markowski, while interning at Vancouver General Hospital and they began their practice together in Hedley, BC. The Nickel Plate mine was still in operation at the time, and sometimes Mary made the harrowing trip up the mountain in an ore car to tend to a worker.

After a short stint in Seattle, she and Edwin settled in Cloverdale B.C. where she practiced family medicine for decades, finally retiring in 1998 at the age of 80. She got to know her patients - taking the time to listen. She delivered many, many babies and cared for generations of family members.

She had three children of her own as well as many other interests. She played the bagpipes at her daughter's wedding and danced the Highland Fling during her 25<sup>th</sup> wedding anniversary. She loved to travel, visiting many parts of the world. Her other love was for flower gardening - digging holes in the dirt, and planting bulbs, collecting seeds, from wherever she was, just to see if they would grow - and many of them did. The gardens she planted are some of her legacies. So are the lives she touched through her long and rich life.

Life is a great big canvas, and you should throw all the paint on it you can.







# 10 Reasons To Join the Federation of Medical Women of Canada

Whether you are a medical student, resident, physician, retired physician or an associate, FMWC provides many professional development and educational opportunities to complement your clinical expertise with practical leadership and networking platforms. We honour and celebrate women in medicine, and even provide you with fun discounts.

### Awards & Grants

Get recognition. Fund your dreams.

All FMWC Student, Resident and Physician Members are invited to apply or nominate someone for renowned FMWC awards, as well as grants through the Canadian Medical Women's Foundation (CMWF). You know so many deserving women in medicine quietly revolutionizing our world. Let the rest of Canada and the world know! Contact the national office for more information.

### Leadership Opportunities

Join a committee and gain nonprofit engagement experience and recognition in the healthcare workforce.

FMWC's commitment to the empowerment and professional, social and personal advancement of women in medicine includes both developing leaders and providing leadership opportunities within the organization. Volunteer opportunities exist for FMWC Members who would like to participate on one of the FMWC's committees. These committees focus on aspects ranging from communication (including subcommittees: newsletter, website, social media, advocacy), to membership, PAP campaign, nominations and awards. Becoming a FMWC Director, or even being involved with your local chapter, will provide amazing opportunities to strengthen your relationships with other women in medicine while working on a specific initiative.

### Public Health Campaigns & Initiatives

Be heard.

FMWC initiates and participates in national campaigns on critical public health issues. Members get the opportunity to advocate via campaigns such as the Annual Cervical Cancer Prevention and Advocacy Program (PAP campaign), meant to increase awareness of the importance of prevention, vaccination and screening to help reduce the number of women dying needlessly from this largely preventable cancer. Consider gaining amplification for your own work to advance women's health through FMWC.

### International Opportunities

Explore your interest in global health.

Become a FMWC physician member and you are automatically a member of an international network of women physicians called the Medical Women's International Association (MWIA.net). The MWIA is an international non-governmental organization representing women doctors from all five continents of the world. Understand Canadian issues in an International context, and expand your reach.

### Networking

Take part in FMWC's extensive network of women in medicine both locally and nationally.

With these friends and professional contacts in FMWC, you will have a powerful local and national network for personal and professional growth. Connect online, locally, nationally or internationally to build relationships and strengthen your career. Find teachers and experienced practitioners in your field of interest.

### Mentoring

Learn from the women who blazed trails before you.

Effective mentorship is likely one of the most important determinants of career success. FMWC realizes training women physician leaders requires communication of "unwritten rules" of successful career advancement. As a member of FMWC you have access to an extensive network of women physicians willing to offer more than career advice. Your FMWC relationships will lead to career advancement opportunities including public speaking engagements, author opportunities, residency positions and job opportunities.

### Education & Expertise

Obtain the skills necessary to advance your career.

Whatever your vision is for your future we are here to support your efforts. FMWC connects women through national, regional and local conferences, seminars, lectures, networking/mentoring events, teleconferences and skills training workshops. Our emphasis on leadership training will help you to reach your own goals.

### Advocacy

Let us be your microphone. Join our voices.

FMWC is an active participant in national and international health care discussions, and has always stood for advocacy for women in medicine, and health promotion for our women patients. Our members have been key leaders since FMWC's start. For example, we advocate to prevent violence against women and girls. We have a long track record of supporting equitable access to reproductive services across the country. FMWC provides you with the opportunity to support and learn about timely research and legislation on such issues and advocate for healthy change.

### **Publications**

Stay informed

As an FMWC member, you receive a subscription to several publications, including the semi-annual FMWC Newsletter, monthly advocacy eBlasts, President's updates and regular events eBlasts. In addition, our Members also receive the MWIA Newsletter and are often forwarded other interesting topical news from the national office.

# But that's not all...we're working hard to save you money too!

### The new FMWC Affinity Program

Benefit from our partnerships.

Through corporate partnerships, FMWC Members are entitled to special benefits and discounts from select providers. FMWC has partnered with MD Financial Services, Flight Centre and Telus, and is negotiating car rentals and many more to thank you for your loyalty. Tell us what else you would like to see in the Affinity Program (Member's Only) section of our website.

# Flight Centre VIP Club



The Federation of Medical Women of Canada has arranged for its members to be part of Flight Centre's VIP Club — a dedicated club which gives you access to amazing holiday deals and discounts to destinations all over the world.



### **Uniquely Tailored Offers**

As a member of the Flight Centre VIP Club, you will have access to specially negotiated holidays, products and services as well as being able to access all our great year-round holiday deals. These offers have been tailor-made for you and represent outstanding value.

# **BONUS – all VIP Club** members receive the following exclusive offers:

**Save \*100\*** on select escorted tour & air packages. Quote code: FCLSMLP100TA

**Save \*75^** on cruise & air packages. Quote code: FCLSMLP75CA

**Save** \$50° on international air & hotel packages. Quote code: FCLSMLP50AH

**Save** \*15<sup>±</sup> on USA & Canada flights with Air Canada. Quote code: FCLSMLP15AAC

### A Total Travel Solution

As a member of the Flight Centre VIP Club, you will get access to the global negotiating strength of Flight Centre Travel Group. This means you will have access to the widest range of airfares, tours, cruises, hotels and holiday packages at the very best prices.

### **A Dedicated Travel Team**

Your own personal travel team will help you plan, book and organize all your travel arrangements, sourcing your ideal holiday and taking care of the smallest details, saving you time and money.

### Our Flight Centre VIP Club Price Promise†

Our price promise means we won't be beaten on flight price. In fact, if you happen to find a cheaper available flight price, we will beat it.<sup>†</sup> That's how committed we are to ensuring you have the best value experience every time you travel.

Contact your dedicated Flight Centre VIP Club booking team today.



Flight Centre Business Travel Kanata | I 855 638 1856 Email: 2E4E@flightcentre.ca

\*Conditions apply. Limit one (1) per booking. Escorted tour must be 7+ nights and include roundtrip airfare originating in Canada, valid on tours with the following companies: Collette Vacations, Contiki, Cosmos, Exodus, G Adventures, Geckos Adventures, Globus, Insight, Intrepid, On The Go, Peregrine Adventures, Topdeck and Trafalgar. Not valid in conjunction with any other offer. Quote code: FCLSMLP100TA. Offer expires April 15, 2017. ^Conditions apply. Limit one (1) per bookings paid in full. Booking must include roundtrip airfare originating in Canada and cruise must be a minimum of 7-nights. Quote code: FCLSMLP75CA. Offer expires April 15, 2017. Conditions apply. Limit one (1) per booking. Not valid in conjunction with any other offer. Valid on new bookings paid in full. Booking must include roundtrip airfare originating in Canada and a minimum of 5 nights accommodation, not valid on charter packages including, but not limited to:Transat Holidays, Air Canada Vacations, Sunwing Vacations, Nolitours, Signature Vacations, WestJet Vacations. Quote code: FCLSMLP50AH. Offer expires April 15, 2017. Conditions apply. ±Limit one (1) per booking. Not valid in conjunction with any other offer. Valid on new bookings paid in full. Booking must include roundtrip airfare originating in Canada for travel domestically or to the USA with Air Canada. Base rate for the Air Canada flights must be a minimum of \$500CAD. Quote code: FCLSMLP15AAC. Offer expires April 15, 2017. †We will beat any written quoted airfare by \$1. Additional important conditions apply. For full terms and conditions visit www.flightcentre.ca/lowestairfareguarantee. Head office address: 1 Dundas StW Suite 200, Toronto, ON. Call for retail locations. ONT. REG #4671384



### **Indications and clinical use:**

Estragyn Vaginal Cream is indicated for the treatment of the symptoms of vulvovaginal atrophy due to estrogen deficiency. Estragyn Vaginal Cream should be prescribed with an appropriate dosage of a progestin for women with intact uteri to prevent endometrial hyperplasia/carcinoma. Estragyn Vaginal Cream is intended for short-term use and is not indicated for use in children (<16 years of age).

### **Contraindications:**

- Liver dysfunction or disease as long as liver function tests have failed to return to normal
- Known or suspected estrogendependent or progestindependent malignant neoplasia (e.g. endometrial cancer)
- · Endometrial hyperplasia
- · Known, suspected, or past history of breast cancer
- · Undiagnosed abnormal genital bleeding
- Known or suspected pregnancy
- Active or past history of arterial thromboembolic disease (e.g. stroke, myocardial infarction, coronary heart disease)
- Active or past history of confirmed venous thromboembolism (such as deep vein thrombosis or pulmonary embolism) or active thrombophlebitis
- Partial or complete loss of vision due to ophthalmic vascular disease
- Classical migraine
- Breastfeeding
- Not compatible with the latex rubber found in most condoms

### **Most serious warnings and precautions:**

### Risk of myocardial infarction (MI), stroke, invasive breast cancer, pulmonary emboli and deep vein thrombosis:

The estrogen plus progestin arm of the WHI trial (mean age 63.3 years) indicated an increased risk in postmenopausal women receiving treatment with combined conjugated equine estrogens (CEE, 0.625 mg/day) and medroxyprogesterone acetate (MPA, 2.5 mg/day) for 5.2 years compared to those receiving placebo.

### Risk of stroke and deep vein thrombosis:

The estrogen alone arm of the WHI trial (mean age 63.6 years) indicated an increased risk in hysterectomized women treated with CEE alone (0.625 mg/day) for 6.8 years compared to those receiving placebo. Therefore, the following should be given serious consideration at the time of prescribing:

- Estrogens with or without progestins should not be prescribed for primary or secondary prevention of cardiovascular diseases
- Estrogens with or without progestins should be prescribed at the lowest effective dose for the approved indication
- Estrogens with or without progestins should be prescribed for the shortest period possible for the approved indication

### Other relevant warnings and precautions:

- Patient should have a complete physical examination including a blood pressure determination before Estragyn is administered
- The first follow-up examination should be done within 3-6 months after initiation of treatment

- · Breast cancer
- Endometrial hyperplasia & endometrial carcinoma
- · Ovarian cancer
- · Blood pressure should be monitored
- Patient with otosclerosis
- · Glucose and lipid metabolism
- · Heme metabolism
- · Calcium and phosphorous metabolism
- · Hypothyroidism
- · Vaginal bleeding
- · Uterine leiomyomata
- Endometriosis
- · Venous thromboembolism
- Gallbladder diseases
- · Hepatic hemangioma
- Jaundice
- · Liver function tests should be done periodically
- Angioedema
- Systemic lupus erythematosus
- Cerebrovascular insufficiency
- · Dementia
- Epilepsy
- Fluid retention

### **For more information:**

Please consult the product monograph at www.searchlightpharma.com/monograph/ estragyn\_en.pdf for important information relating to adverse reactions, drug interactions, and dosing information, which has not been discussed in this piece. The product monograph is also available by calling our medical information department at 1-855-331-0830.





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Unlimited local Weekend Calling
Unlimited Nationwide TELUS to TELUS calling
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# A New Triennium is About to Begin

June 3, 2016

Dr. Shelley Ross, Secretary General, MWIA

The current triennium of the Medical Women's International Association is drawing to a close and the Presidency will be handed over from Dr. Kyung Ah Park of Korea to Dr. Bettina Pfleiderer of Germany at the 30<sup>th</sup> International Congress of MWIA in Vienna. If you have just realized that a trip to Vienna would be a nice way to spend a week or two in Europe during the summer, it is not too late to register. (www.mwiavienna2016.org).

The theme for the current triennium is *Prevention and Elimination of Domestic* and Sexual Violence. MWIA has written an on-line training module using cases to illustrate important information for physicians when treating patients who present with a history of violence. This will go live at the time of the Vienna congress and has international input.

This is a living document and once you access it, if you feel you would like to add cases and learnings please contact the MWIA Secretariat at <a href="mailto:secretariat@mwia.net">secretariat@mwia.net</a>. Many thanks go to Dr. Pamela Liao, Dr. Pretty Verma and Dr. Shyama Das for their role in this work.

There will also be a change of the Vice President for North America at the time of the congress. Thank you to Dr. Carole Williams for taking on this role this triennium. Welcome to Dr. Mini Murthy of the USA who will be the VP for both Canada and the USA. I want to remind you that the National Coordinator is the liaison between the national organization and MWIA, so thank you to Dr. Nahid Azad for her work for the Federation.

Each triennium, the eight regions hold a regional meeting. The first to be scheduled for the next triennium is the Central European Regional Meeting in Moscow in November of 2016. This will be followed by the Northern European Region which is combining its regional meeting with the Centennial Meeting of the Medical Women's Federation of the United Kingdom in May of 2017. The Western Pacific will then follow in August, 2017.

MWIA continues to partner with Zonta to send birthing kits to areas where there is little in the way of maternity care. The kits are basic with a plastic sheet, gloves, cord tie, razor and soap but go a long way to decreasing infection. One of the destinations has been the camps for displaced persons surrounding Kabul, Afghanistan. If you have connections that would benefit from such kits please let the Secretariat know.

MWIA has official relations with the World Health Organization and Category II status with the Economic and Social Council of the United Nations. In March each year, MWIA is represented at the Commission on the Status of Women at the United Nations in New York and holds a parallel event. Similarly, MWIA is represented at the World Health Assembly in Geneva each May, where members have a chance to work with WHO staff. Should you wish to attend either of these events, please contact the Secretariat.

Please remember that your membership in the Federation automatically gives you membership in MWIA. Should you wish to serve on a committee in the new triennium, please contact the Secretariat.

Shelley Ross, MD Secretary General MWIA



### 2016

# July 28-31, 2016, Vienna, Austria 30th International Congress of MWIA

Theme: Generation Y: Challenges of the Future for Female Medical Doctors www.mwiavienna2016.org

### September 23-25, 2016, Hamilton, Ontario, Canada

Annual Meeting of the Federation of Medical Women of Canada

# November 23-25, 2016, Moscow, Russia

Central European Regional Meeting Information will be on <a href="https://www.mwia.net">www.mwia.net</a> when available

### 2017

# March 8, 2017 (tentative date), Panama

Latin American Regional Meeting of MWIA.

Information will be on <u>www.mwia.net</u> when available

### March 13-24, 2017, New York, US

Commission on the Status of Women Contact <u>secretariat@mwia.net</u> if you wish to be registered

### March 30-April 2, 2017, San Francisco, US

American Medical Women's Association Annual Meeting

### May 10-13, 2017, London, UK

Northern European Regional Meeting Theme: 100 years of Medical Women: Past, Present and Future. In Celebration of 100<sup>th</sup> Anniversary of Medical Women's Federation www.medicalwomensfederation.org.uk

### May 21-26, 2017, Geneva, Switzerland

World Health Assembly at WHO Contact <u>secretariat@mwia.net</u> if you wish to be registered

### **August 25-27, 2017, Hong Kong**

Western Pacific Regional Meeting Information will be on <a href="https://www.mwia.net">www.mwia.net</a> when available

### 2019

Centennial Meeting of MWIA—venue to be decided



"When I was a medical student at McMaster University, I was introduced to the Federation of Medical Women of Canada by Dr. May Cohen.

I was taken aback by the warm welcome we received and the support for us 'lowly' (as we saw ourselves) medical students by the inspirational and successful women present. Over the years I have had the pleasure of attending wonderful educational events that helped me grow both personally and professionally and to network with other like-minded women in my medical community. It is a gift I felt very strongly about passing on to the next generation of medical women. As I see the passion and keen intelligence in these young Women, I know that the profession will continue to be in good hands,

Family Physician at the Rosemount FHO Assistant Professor, Dept of Family medicine

at the University of Ottawa.

and that the Federation will continue to grow."





# **Prevention** & Awareness **Program**

For Cervical Cancer

# **New FMWC Mentorship Program Launched**

June 11, 2016

Author: Zeenia Aga, University of Toronto, FWMC National Student Representative

For nearly 100 years, the Federation of Medical Women of Canada has been connecting Canadian women in the medical profession with one another and with the community. Through these connections, the organization provides a unified public voice for female physicians, advocating for women's health issues, promoting the interests of women physicians and providing forums for networking at the local, national and international levels.

To connect more Canadian physicians and students, we are excited to announce the beginning of a new mentorship program at the FMWC. The program aims to create effective oneto-one partnerships between medical students, residents and physicians to facilitate personal development, career exploration and to empower young female medical professionals to maximize their individual potential.

The program will have three core goals: 1) build intergenerational and interprofessional ties within our medical community, 2) provide trainees with a support network that promotes resiliency and encourages development of ideas, interests and skills in a safe space, and 3) provide mentors with opportunities to develop their skills in mentoring and to share their knowledge and experience.

The Program will create partnership triads, each consisting of a physician, resident and medical student. Matches will be made based on location and career goals/interests. After a match is made, the group is to remain fixed for a twelve-month duration, at which time a re-match can occur.

If you are interested in taking part, please complete and submit the registration form below. For any questions or concerns, feel free to contact the National Student Representatives at

fmwcstudents@gmail.com

Intake form for Mentors Intake form for Mentees

Brittany Smallegange (University of Ottawa), Pretty Verma (University of BC), Zeenia Aga (University of Toronto) National Student Representatives

In conjunction with National Cervical Cancer Awareness Week, the FMWC runs its annual PAP Campaign. An initiative that began 9 years ago, its ultimate goals have remained unchanged since the program's inception - to reach out to women across Canada to increase awareness, to encourage women to have a Pap test and/or HPV vaccination done, and to provide access to health care services.

Our 2016 PAP Campaign will run from October 17-21, 2016. Clinics can participate by registering through our website and participating clinics will receive a Participant E-kit via email or downloadable from our website.

The Participant kit contains a printable poster, a tip sheet, a press release template, HPV vaccination information sheet, a pap testing brochure and how to address abnormal results, and a bilingual questionnaire for evaluation.

Last year's campaign had 80 clinics from 54 cities, across 10 provinces registered to provide service in 11 languages. Out of the 80 clinics that participated, the FMWC received feedback from 15 clinics that were able to confirm the number of patients they saw -360 women!

To help fight cervical cancer, we ask that you consider participating and supporting this worthwhile campaign by either hosting a clinic or helping to spread the word!



# Women in Surgery

August 31, 2015

Author: Erika Schmitz, MD 2017, FMWC Ottawa Representative

In March 2015, the University of Ottawa medical student representatives (Erika Schmitz; Kristin Ambacher - MD 2017 and Brittany Smallegange - MD 2016) of the Federation of Medical Women of Canada (FMWC) hosted their second annual Women in Surgery panel in partnership with the Surgery Interest Group. Distinguished female surgeons and trainees of various surgical specialties of The Ottawa Hospital and the Children's Hospital of Eastern Ontario were invited to speak. The panel was comprised of Dr. Carolyn Nessim (General Surgery), Dr. Jacinthe Lampron (General Trauma Surgery), Dr. Laura Nguyen (Urology resident), Dr. Kathleen Gartke (Orthopaedic Surgery) and Dr. Mary Jean Duncan (Plastic Surgery). The aim was to assist medical students in their career decision-making early on in their medical training. The surgeons spoke to a wide range of topics, notably career decision-making processes and professional experiences that led to their election to pursue surgical careers, as well as how research commitments, work satisfaction, work environment, family structure and

support, and other considerations have factored into their life choices. Essentially, the surgeons shared their unique life story and personal circumstances that enabled them to become the people and surgeons they are today.

The process of choosing a medical speciality is a topic frequently discussed amongst medical students. There is a relatively short time period between admission to medical school and applying to a Residency program; defining career choices as early as possible maximizes the time available to medical students to build professional profiles tailored to desired residency positions. Although career choices are often solidified during clerkship years where students have clinical duties while rotating through the major disciplines, many begin actively contemplating their options the moment they enter medical school. Most students explore opportunities in various disciplines of interest through preclerkship electives and research projects. Some seek guidance via career councillors and mentors to assist with identifying and prioritizing personalized factors that are likely to affect career satisfaction and future happiness. It is not uncommon for student-lead interest groups to organize

career-oriented events for their colleagues throughout the academic year, in which physician(s) deliver presentations at informal lunch meetings or formal career panels.

At this year's Women in Surgery event, over 50 medical students, both male and female, listened on as the renowned surgeons and surgeons-in-training detailed their life events. Their exemplification of passion, dedication and love for their patients, careers, and lives was inspiring. The physicians, perhaps inadvertently, influenced and enlightened many students that evening with the sage advice offered in response to questions asked. For example, as an aspiring surgeon myself, the panel certainly addressed my fears and beliefs that a career in surgery must be chosen over a balanced life. Rather, these women demonstrated that the complete opposite is true; that both an excellent career and balanced lives were possible with the help of self-confidence, key support systems, perseverance and hard work. Regardless of whether the listeners were swayed towards a career in surgery that evening, it is certain that all students made their way home with a wealth of new knowledge, feelings of empowerment and a valuable experience to reflect upon as they lay the bricks of their career path.

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Submissions for the next issue must be sent to the National Office via fmwcmain@fmwc.ca before Tuesday, November 1st, 2016