

President's report

If there were a theme to the past year, it would have to be 'consolidation'. The Canadian Association of Gastroenterology (CAG) has undergone considerable growth and change over the past five years, with a significant increase in membership, the development of the Canadian Digestive Diseases Week (CDDW), the introduction of a range of research funding programs, a complete rewriting of the Association's bylaws and the creation of the Canadian Digestive Disease Foundation (CDDF).

As with any such growth, there have been growing pains. In the past year, we have made significant progress in attending to those pains, and in doing so, the Association is in a much better position to fulfill its prime objective – namely, serving the needs of its members.

About 11 months ago we established a permanent home for the CAG – the National Office in Oakville, Ontario. This office has the necessary infrastructure to facilitate the operations of our association. We have a full-time receptionist to handle inquiries by members and others who require information related to the art and science of gastroenterology (such as the media). Of course, the central person in the National Office is our Executive Director, Paul Sinclair. While a member of CAG for many years, Paul took on the challenge of being our Executive Director in June of 2000. He has done an amazing amount of work in the short time that he has held this position, and it will pay dividends for the membership in the years to come. Paul initially focused on getting our membership list up to date and ensuring that dues were paid in a timely manner. Paul has also revamped the way in which we handle several aspects of our financial transactions, such as our invoicing and documentation of expenses, as well as playing a very important role in the fundraising process itself. Paul has been able to provide valuable advice to the Executive on several issues

related to the pharmaceutical industry. One of the other tasks that Paul has taken a lead in handling is the move of the CAG Web site to a professional service provider.

The new Web site came online in late December. In its first full month of operation, there were in excess of 65,000 'hits'. The new member area, with password protection, is now operational. You will soon be able to do all of the following online: pay your annual dues, register for CDDW and submit your abstract, consult the membership list, access various continuing medical education (CME) programs and keep track of your CME credits. Moreover, there will be a link to the Web site for *The Canadian Journal of Gastroenterology*, where you can submit and review manuscripts online.

Speaking of CME, one of the major challenges on the immediate horizon is the increased role of the CAG in providing opportunities for our members to earn CME credits, as well as assisting in the tracking of credits. It is our goal that there will be sufficient accredited materials during the five-day core of each CDDW such that a member can attain up to 60% of their annual requirement. Moreover, through a project spearheaded by Dr Richard Fedorak, members will be able to access additional materials on the CAG Web site (that will permit them to fully meet their annual requirements). Indeed, Dr Fedorak has been acting as the liaison with CD-Pharma Multimedia Productions (Canada), a company that produces CD-ROMs on behalf of pharmaceutical companies and on behalf of the CAG. These are state-of-the-art interactive programs that many of you may have already had the opportunity to use.

With the introduction of the CDDW and the research funding programs, we have become more reliant on financial support from the pharmaceutical sector. This brings with it a whole range of logistical and ethical issues. At last

year's CDDW, we established a CAG-Industry Relations Committee to provide a forum for discussion and resolution of some of these issues. The committee has met several times over the past year and was instrumental in the development of the 'sponsored symposia' that we had at this year's CDDW, instead of the satellite symposia that had been problematic in the past. Moreover, we are working on a new funding mechanism for the CAG that will benefit us in terms of long term funding, but also be helpful to industry – the corporate sponsorship.

I previously referred to the funding programs that CAG has introduced in recent years. These are funded through partnerships between the CAG, its industrial sponsors, the Crohn's and Colitis Foundation of Canada and the Canadian Institutes of Health Research. This consists mainly of research and endoscopy fellowships, clinical training fellowships and research grants. Significant improvements to the process of reviewing the applications for these awards have been introduced in the past year that will greatly accelerate the review process, as well as making it more consistent.

I would like to close by touching on two very important initiatives. The first is the Canadian Digestive Disease Foundation. The CDDF is now 'off the ground' and moving ahead rapidly as a partner with CAG. The CDDF will focus

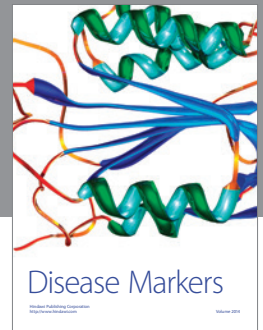
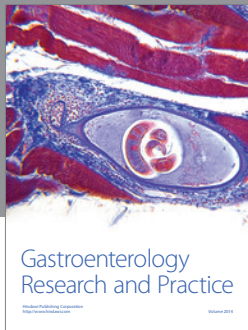
on public education and advocacy related to digestive health and disease, as well as on fundraising for research grant support. The CAG is fully committed to the success of the CDDF and, to this end, will be providing assistance in various forms, including financial.

The second initiative is the World Congress of Gastroenterology. Dr Richard Fedorak is chairing the bid committee that will endeavour to win the right to host the World Congress in Montreal in 2005. That vote will take place a year from now in Bangkok. Not only would hosting the World Congress put Canadian gastroenterology on the world stage, but there would also be significant financial dividends for our Association that could provide a legacy for future generations of Canadian gastroenterologists and researchers.

In summary, much of the past year has been devoted to addressing some of the problems that have been encountered as a result of the rapid growth of our Association over the past few years. In the next year, the efforts of the Executive will be directed mainly toward delivering an increased array of services and benefits to the members of the Association.

John L Wallace PhD

President, The Canadian Association of Gastroenterology



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