

62nd



ANNUAL SCIENTIFIC ASSEMBLY

MANITOBA COLLEGE OF FAMILY PHYSICIANS

APRIL 23-24, 2020

LIVE STREAMING

**THIS IS
YOUR ASA:**

INTERNAL MEDICINE
WOMEN'S HEALTH
MEN'S HEALTH
DERMATOLOGY
OFFICE-BASED AND ACUTE CARE
TRACKS ...AND MUCH MORE

REGISTRATION FOR WEBINAR ACCESS NOW OPEN!

THE FULL PROGRAM AND ONLINE REGISTRATION FORM
AVAILABLE AT WWW.MCFP.MB.CA/ASA/

THE MANITOBA
COLLEGE OF
FAMILY PHYSICIANS



LE COLLÈGE DES
MÉDECINS DE FAMILLE
DU MANITOBA

A CHAPTER OF THE COLLEGE OF FAMILY PHYSICIANS OF CANADA
UNE SECTION DU COLLÈGE DES MÉDECINS DE FAMILLE DU CANADA

TIMELY AND RELEVANT CPD • MAINPRO+ CERTIFIED



Welcome to the 62nd Annual Scientific Assembly Live Streamed Webinar.

On behalf of the Manitoba College of Family Practitioners (MCFP) Board of Directors, and our staff, we want to thank you for all your hard work surrounding the COVID-19 virus pandemic.

We recognize how challenging this is and commend you for your diligence, commitment to patient care, and the endless sacrifices that you are making during this time. It really highlights the crucial role of the Family Physician in the response to this global pandemic.

As a Provincial membership organization with over 1400 family physicians serving and treating patients in their communities across Manitoba, MCFP takes our leadership role in the system very seriously. We are working diligently to address the rapidly evolving situation posed by the COVID-19 virus.

The Manitoba College of Family Physicians is committed to providing a safe and healthy environment for all staff, colleagues, members, Board, contractors, and the general public. Therefore, to reduce the risk that anyone might contract or inadvertently spread the virus, **we have decided to proactively move the Annual Scientific Assembly from an in-person event to a virtual event.**

While the ASA Planning Committee has often discussed offering live webinars of the ASA, we have always deferred because of expense or the uncertainty of trying new technology. Well, this year is the time!

The educational program is second-to-none and knowing that your schedule may vastly change in the coming weeks, you can now register for any combination of mornings and afternoons.

The Annual Members Meeting will take place on Friday April 24th from 1:30 – 2:30 pm. All members are invited to attend via webinar, and a separate meeting link will be sent out to the membership. There is no cost to attend the AMM.

Finally, we are grateful to the speakers who have agreed to present their educational sessions for our membership. Their commitment to the success of the Annual Scientific Assembly is unparalleled.

Please watch your inbox for more announcements and details on the ASA.

Dr. Ganesan Abbu
ASA Planning Committee

Dr. Ian Alexander
President

2019/2020 ASA Planning Committee

Committee Chair

Ganesan Abbu, MD.Chb CCFP FCFP
C.W. Wiebe Medical Centre, Winkler

Committee Members

Shilpa Loewen, MD
PGY2, Family Medical Centre, Winnipeg

Tamara Buchel, MD CCFP,
Kingsbury Family Medical Centre, Winnipeg

Robert Kruk, MD CCFP
Carman Medical Clinic, Carman

Julie Lamb, MD CCFP FCFP
Autumnwood Medical Centre, Winnipeg

Sourabh Maiti, MD MME CCFP
ACCESS Fort Garry, Winnipeg

Luisa Menjivar Ponce, R2, Family Medicine, Bilingual stream,
University of Manitoba

Richard Rusk, DVM MD CCFP MPH
Manitoba Public Health, Winnipeg



ANNUAL SCIENTIFIC ASSEMBLY

PHILOSOPHY & LEARNING OBJECTIVES

The Family Physician will:

- gain knowledge about new concepts in the delivery of medicine,
- gain knowledge and skills to apply to his or her everyday practice,
- be given an opportunity to discuss concepts that are controversial and innovative,
- be challenged by new innovations in medicine and continually apply these to his or her practice,
- leave the program with confidence in new skills and gain tools to explore new ways of obtaining information and expanding his or her knowledge.

MCFP’s Annual Scientific Assembly: *You miss a year; you miss a lot!*

The 62nd Annual Scientific Assembly has been certified for 1 credit per hour, for a maximum of 12.75 Mainpro+ credits.

WEBINAR ACCESS FEES

2 DAYS: Thursday April 23 & Friday April 24, 2020		
EARLY BIRD DEADLINE EXTENDED TO APRIL 10TH		
FEE DOES NOT INCLUDE GST	EARLY BIRD RATE Registrations received BEFORE APRIL 10th, 2020	LATE BIRD RATE Registrations received AFTER APRIL 10th, 2020
<input type="checkbox"/> CFPC Member Physician	\$385	\$485
<input type="checkbox"/> Non-Member Mainpro Participant	\$535	\$635
<input type="checkbox"/> First 5 Years in Practice Physicians	\$285	\$385
<input type="checkbox"/> Allied Health Care Professional	\$285	\$385
<input type="checkbox"/> Resident & Medical Student	\$50	\$50

HALF DAY REGISTRATIONS

- Thursday AM (3.0 credits) **\$175**
- Thursday PM (3.75 credits) **\$175**
- Friday AM (3.25 credits) **\$175**
- Friday PM (3.0 credits) **\$175**



ANNUAL SCIENTIFIC ASSEMBLY PROGRAM SUMMARY

internal medicine • men’s health • women’s health • pediatric • oncology • office-based track • acute care track • hot topics

Since its inception, the MCFP has recognized the importance of providing members with CPD opportunities and a forum where primary care physicians can learn and network with their peers and colleagues.

Plenary Sessions via Webinar

With the exceptional cooperation of our presenters, the MCFP will continue to deliver the educational component of the Annual Scientific Assembly via webinar. This means that you can attend all or portions of the conference from wherever you are most comfortable. You will be able to ask your questions to the speakers via the chat function. Your questions will be sent to the session moderator, who vet and ask the questions on your behalf. The presentation is streamed LIVE.

If you have a computer, laptop, cellphone or tablet and reliable internet, you will be able to watch the presentations and participate. **More details on how to get ready to join the meeting will be coming**

Optional Certified Mainpro+ Workshops

Postponed until Fall 2020. Watch your inbox for details.

Annual Members Meeting via Webinar

The MCFP Annual Members Meeting provides members with an opportunity to review and learn about College activities in the last year. Presided by Dr. Ian Alexander, MCFP President, the AMM delivers a summary of the financial health of the College, announces award recipients, and introduces the Executive Committee and Board to the membership.

All members of the College are welcome to attend the Annual Members Meeting, even if you are not registered for the education sessions.

The Annual General Meeting is held over lunch on Friday, April 24, 2020 from 12:30 – 1:30 pm.

Registration links and webinar access will be issued before the AMM. This is your College – make time to log in!



EARLY BIRD REGISTRATION

**REGISTER BEFORE APRIL 2ND
APRIL 10TH**



THURSDAY, APRIL 23, 2020

SCHEDULE AT-A-GLANCE

8:25	Welcome and Announcements
8:30 – 9:15 2 X 15 Min + Q & A	1) CHILDHOOD MURMERS: WATCH AND WAIT, ECHO OR REFER? Dr. Reeni Soni 2) HOW DO I MANAGE FUNCTIONAL ABDOMINAL PAIN, Dr. Jennifer Griffin
9:15 – 10:15 1 X 20 Min 2 X 15 Min + Q & A	3) TREAT, WATCH OR REFER: WHATS APPROPRIATE WHEN CONSIDERING SKIN CANCER? Dr. Shane Silver (20 min) 4) PROVINCIAL CENTRAL INTAKE PROCESS FOR HIP AND KNEE ARTHROPLASTY & REVIEW OF THE NON-OPERATIVE MANAGEMENT OF HIP AND KNEE OSTEOARTHRITIS, Dr. Eric Bohm (15 min) 5) WHAT IS CURRENT BEST PRACTICE IN CANCER SCREENING? Dr. Kelly Bunzeluk (15 min)
10:15 – 10:45	BREAK
10:45 – 12:00 3 X 15 Min + Q & A	6) HOW DO I MANAGE THE PRE-DIALYSIS PATIENT IN CONJUNCTION WITH NEPHROLOGY? Dr. Navdeep Tangri 7) HOW DO I WORK UP THE PATIENT WITH POTENTIAL INFLAMMATORY JOINT DISEASE? Dr. Ceri Richards 8) HOW DO I MAKE SENSE OF ABNORMAL LIVER ENZYMES? Dr. David Peretz
12:00 – 12:45	LUNCH
12:45- 1:45 3 X 15 Min + Q & A	9) HOW DO I USE EVIDENCE AND COST TO PRESCRIBE EFFECTIVELY? Dr. Daniel Hunt 10) HOW DO I USE THE E-CONSULT SERVICE OPTIMALLY? Dr. Alex Singer 11) WHAT IS PCRN AND HOW CAN THEY HELP WITH THE WORK-UP OF SUSPECTED CANCER? Dr. Tunji Fatoye & Ms. Kate Woods
1:45 – 2:30 2 X 20 Min + Q & A	12) WHICH OF MY PATIENTS WITH DENSE BREASTS ON MAMMOGRAPHY, NEED MORE INVESTIGATION? Dr. Paula Gordon → Presenting from BC 13) HOW DO I WORK UP A MONOCLONAL ANTIBODY? Dr. Mark Kristjanson
2:30 – 3:00	BREAK
3:00 – 4:00 3 X 15 min + Q&A	14) WHAT'S NEW IN THE MANAGEMENT OF MIGRAINE & HEADACHE? Dr. Satnam Nijjar 15) KIDNEY STONES: HOW OFTEN DO I NEED A CT AND WHEN DO I REFER TO UROLOGY? Dr. Sabeer Rehsia 16) HOW DO I MANAGE HYPERKALEMIA ON A HOSPITALIST WARD? Dr. Aaron Jattan
4:00 – 5:00 2 X 20 min + Q & A	17) HOW DO I HELP BRIDGE THE GAP IN FIRST NATIONS HEALTHCARE? Dr. Mandy Buss 18) CLEARING THE AIR: UNDERSTANDING VAPING ASSOCIATED LUNG INJURY AND THE RISK TO MY PATIENT Dr. Andrew McKinnon

Mainpro+ Credits:

Full Day (8:30 – 5:00) **6.75**

Morning (8:30 – 12:00) **3.0**

Afternoon (12:45 – 5:00) **3.75**

Register Online Now!



THURSDAY, APRIL 23, 2020

MORNING SESSIONS

8:30 – 10:15

CHILDHOOD MURMERS: WATCH AND WAIT, ECHO OR REFER?

DR. REENI SONI, Head, Section of Pediatric Cardiology; Department of Pediatrics and Child Health

Max Lady College of Medicine, Rady Faculty of Health Sciences; Associate Medical Director, Winnipeg Children's Hospital

This presentation will review common Pediatric Cardiology presenting complaints and cardiac diagnoses that pertain to Family Practice including current prognosis. A general review of diagnostic and management approaches for these conditions will be outlined. Indications and mechanism for formal Pediatric Cardiology referral will also be discussed.

Learning Objectives:

1. To develop an approach to common pediatric cardiac presentations such as new murmur, syncope, chest pain and palpitations.
2. To clarify indications for referral to a Pediatric Cardiology service for further assessment

HOW DO I MANAGE FUNCTIONAL ABDOMINAL PAIN?

DR. JENNIFER GRIFFIN

TREAT, WATCH OR REFER: WHATS APPROPRIATE WHEN CONSIDERING SKIN CANCER?

Dr. SHANE SILVER, Dermatologist

PROVINCIAL CENTRAL INTAKE PROCESS FOR HIP AND KNEE ARTHROPLASTY & REVIEW OF THE NON-OPERATIVE MANAGEMENT OF HIP AND KNEE OSTEOARTHRITIS

DR. ERIC BOHM, Professor of Surgery, University of Manitoba; Director, Health System Performance, Centre for Healthcare Innovation; Primary and Revision Hip and Knee Arthroplasty

MS. MELISSA GIBSON, Physiotherapist; Wait List Coordinator, Central Intake

A review of provincial central intake process for hip and knee arthroplasty, as well as an update / review of the non-operative management of hip and knee osteoarthritis.

WHAT IS CURRENT BEST PRACTICE IN CANCER SCREENING

DR. KELLY BUNZELUK, Director, CancerCare Manitoba Screening Programs

This learning session will explain the evidence-based cancer screening guidelines for populations at average and increased risk of cancer. New technologies to be implemented in Manitoba will be described complete with practical application for clinical practice.

Learning Objectives:

1. Identify average risk individuals for cancer screening.
2. Identify patients who need increased surveillance for cancer.
3. Describe new technologies used in cancer screening.



THURSDAY, APRIL 23, 2020

MORNING SESSIONS

10:45 – 12:00

HOW DO I MANAGE THE PRE-DIALYSIS PATIENT IN CONJUNCTION WITH NEPHROLOGY?

DR. NAVDEEP TANGRI, Associate Professor, Dept of Medicine and Community Health Sciences; Scientific Director, Chronic Disease Innovation Center, Seven Oaks Hospital – University of Manitoba

We will review key aspects in the management of patients with high risk CKD in partnership with nephrology care. We will discuss the nephrology referral criteria, and current best practices for management of late stage CKD

HOW DO I WORK UP THE PATIENT WITH INFLAMMATORY JOINT DISEASE?

DR. CERI RICHARDS, MD, FRCPC (Rheumatology); Lecturer, Department of Rheumatology, University of Manitoba

I will discuss the initial workup of and interpretations of the results in each of the following three different situations:

1. Poly-arthritis presentation
2. Back pain
3. Lupus-like presentation

HOW DO I MAKE SENSE OF ABNORMAL LIVER ENZYMES?

DR. DAVID PERETZ, Assistant Professor and Director, Liver Transplant Program, University of Manitoba



THURSDAY, APRIL 23, 2020

AFTERNOON SESSIONS

12:45 – 2:30

HOW DO I USE EVIDENCE AND COST TO PRESCRIBE EFFECTIVELY?

DR. DANIEL HUNT, Rural Family Physician

My presentation makes an argument for choosing a specific agent within each class, mainly for cost reasons, as well as other reasons in the case of beta blockers. Also review the clear evidence that docusate is no better than placebo and should not be used.

Learning Objectives:

1. Understand that docusate is useless
2. Understand the differences amongst beta blockers
3. Know the relative costs of common drugs

HOW DO I USE THE E-CONSULT SERVICE OPTIMALLY?

DR. ALEX SINGER, Associate Professor, Family Physician, eConsult MB Measurement and Evaluation Lead

This presentation will cover two main topics related to the roll out of eConsult Manitoba. First, we will share some of the early success and challenges of implementing the eConsult Manitoba service. These include such achievements as: decreased wait times for specialist advice, decrease need for in-patient specialist visit, decreased costs to individuals and the system, and improved experience of care for patients and providers. Secondly, we will share some of the de-identified content related to eConsult questions and responses that have been rated by PCP users as having high value for continuing medication education sessions, providing attendees with the opportunity to learn from the questions already answered by our eConsult Manitoba specialists.

Learning Objectives:

1. Describe the eConsult Manitoba to family physicians.
2. Demonstrate how the eConsult Manitoba service works and its benefits.
3. Explore common questions family physicians pose to high volume specialty services and their responses.



THURSDAY, APRIL 23, 2020

AFTERNOON SESSIONS

WHAT IS PCRN AND HOW CAN THEY HELP WITH THE WORK-UP OF SUSPECTED CANCER?

DR. TUNJI FATOYE, Head, Department of Primary Care Oncology, CancerCare Manitoba

MS. KATE WOODS, R.N. B.N. Nurse Navigator, CancerCare Manitoba

This presentation will use a case-based approach to demonstrate what a patient referral to PCRN looks like and will highlight the benefits and impact to both the patient and the primary care provider.

Learning Objectives:

1. Describe how PCRN helps to bridge the gap between primary care and cancer services by working closely with Primary Care Providers to assist in the coordination of diagnostic testing and Oncology referrals
2. Describe the role PCRN plays in supporting patients, identifying gaps and barriers to care, finding solutions and moving patients forward in the system, thereby enhancing the patient experience
3. Outline the recent and ongoing evolution of services provided by the PCRN
4. Describe how to access PCRN Services in Manitoba

WHICH OF MY PATIENTS WITH DENSE BREASTS ON MAMMOGRAPHY, NEED MORE INVESTIGATION?

DR. PAULA GORDON, Clinical Professor, University of British Columbia

Breast density can only be determined on mammography, and screening programs are beginning to tell women their breast density category. This presentation will explain the risks of dense breasts and the benefits and potential risks of supplementary screening, to prepare family physicians for conversations with their patients.

Learning Objectives:

1. Learn the categories of breast density
2. Learn the risks of having dense breasts
3. Learn the benefits and potential risks of supplementary screening beyond mammography, for women with dense breasts

HOW DO I WORK UP A MONOCLONAL ANTIBODY?

DR. MARK KRISTJANSON, Medical Lead, Primary Care, Community Oncology Program

Monoclonal antibodies detected in serum can (e.g. during investigation of a peripheral neuropathy, unexplained osteoporosis, renal disease or anemia) signify the presence of: a plasma cell dyscrasia such as multiple myeloma or Waldenstrom macroglobulinemia; a lymphoma; or most often, a monoclonal gammopathy of undetermined significance, which needs to be monitored for progression to a plasma cell dyscrasia. Family physicians can confidently diagnose MGUS, and identify those patients who require referral to a hematologist if they: 1. know how to interpret serum protein electrophoresis (SPEP) and free light chain (FLC) results; 2. by taking and performing a careful history and physical examination to look for evidence of lymphoma or CRAB criteria for myeloma, and 3. are aware of the three criteria for distinguishing low- vs. high-risk MGUS.

Learning Objectives:

1. Explain the results of an SPEP and free light chain analysis
2. List the CRAB criteria for multiple myeloma
3. Diagnose and monitor low-risk MGUS
4. List the criteria for identifying high-risk MGUS



THURSDAY, APRIL 23, 2020

AFTERNOON SESSIONS

3:00 – 5:00

WHAT'S NEW IN THE MANAGEMENT OF MIGRAINE & HEADACHE?

DR. SATNAM NIJJAR, Neurologist

KIDNEY STONES: HOW OFTEN DO I NEED A CT AND WHEN DO I REFER TO UROLOGY?

DR. SABEER REHSIA, Urologist

Learning Objectives:

1. What is a urological stone emergency?
2. When is it appropriate to get an X-ray vs a CT scan?
3. Approach to managing the patient in a clinic setting

HOW DO I MANAGE HYPERKALEMIA ON A HOSPITALIST WARD?

DR. AARON JATTAN, Education Director, FM-CTU, St. Boniface Hospital; Lecturer, Department of Family Medicine, University of Manitoba

Learning Objectives:

1. Consider pseudohyperkalemia when evaluating a lab suggesting hyperkalemia
2. Recognize EKG limitations in the diagnosis of hyperkalemia
3. Understand the potential etiologies of true hyperkalemia
4. Manage acute hyperkalemia if clinically indicated

HOW DO I HELP BRIDGE THE GAP IN FIRST NATIONS HEALTHCARE?

DR. MANDY BUSS, Assistant Professor, Postgraduate Faculty Lead - Indigenous Health, Department of Family Medicine; Undergraduate Medical Education Course Director- Indigenous Health, Max Rady College of Medicine, Rady Faculty of Health Sciences, University of Manitoba

In order to address increasing health gaps that are faced by First Nations, Metis, and Inuit people you need to understand how racism exist in our health care system and how this perpetuates the discrepancy in health between Indigenous people and the rest of Canada. The Truth and Reconciliation report represents thousands of Indigenous voices. These voices have given a way forward in closing the gaps. But this must be done in collaboration with First Nations, Metis and Inuit people giving them respect, autonomy and self-determination.

Learning Objectives:

1. Describe Institutional, personal mediated and internalized racism and how it applies to health care.
2. Review the Truth and Reconciliation health calls to action.
3. Describe the development of a TRC working group at a primary clinic and what are some successes and challenges being encountered.

CLEARING THE AIR: UNDERSTANDING VAPING ASSOCIATED LUNG INJURY AND THE RISK TO MY PATIENT

DR. ANDREW MCKINNON, FRCPC, PGY5 Respiriology Fellow

E-cigarettes are non-combustible tobacco products that generate an inhaled aerosol containing nicotine. They have been marketed and proposed as a "safer" alternative to smoking. However, since August 2019, thousands of e-cigarette consumers have presented with respiratory symptoms requiring hospitalization, resulting in considerable scientific investigations and media attention throughout North America. This lecture attempts to clarify to physicians the acute risks associated with e-cigarette consumption, or vaping, and the advice they should communicate to their patients.

Learning Objectives:

1. Briefly review the introduction to market, mechanisms and youth epidemic of e-cigarettes in Canada.
2. Define the e-cigarette, or vaping, product use-associated lung injury (EVALI) and its characteristics.
3. Review the proposed culprits of EVALI.
4. Review the CDC recommendations and the advice you should give to your patient.



FRIDAY, APRIL 24, 2020

SCHEDULE AT-A-GLANCE

8:15	Welcome and Announcements
8:30 – 9:30 3 X 15 Min + Q & A	1) HOW DO I TALK TO PARENTS ABOUT CHILDHOOD VACCINATION? Dr. Jen Potter 2) HOW DO WE ADVISE PATIENTS ABOUT HERBAL MEDICATION AND SUPPLEMENTS? Dr. Shandis Price 3) CAN MY HEALTH TEAM DEVELOP COMMUNITY PARTNERSHIPS THAT WILL IMPROVE YOUR FAMILY MEDICINE PRACTICE? Dr. Michael Hochman & Dr. Arle Jones
9:30 – 10:30 2 X 20 Min + Q&A	4) LOW TESTOSTERONE: WHEN, HOW, & WHAT TO DO? Dr. Premal Patel 5) HOW SHOULD A PRIMARY CARE PROVIDER APPROACH PSA TESTING IN MANITOBA? Dr. Premal Patel
10:30 – 11:00	BREAK
11:00 – 12:00 1 X 20 Min + Q&A	6) WHAT IS THE BEST TREATMENT FOR ACNE ROSACEA? Dr. Victoria Taraska <i>Due to a last-minute speaker cancellation, we may be breaking early for lunch.</i>
12:00 – 12:30	LUNCH
12:30 – 1:30	ANNUAL MEMBERS MEETING
1:30 – 2:30	7) HOT TOPICS: COVID-19 Update Panel UPDATE ON PUBLIC HEALTH, Dr. Joss Reimer UPDATE AND REVIEW ON DIAGNOSTICS, Dr. Philippe Lagasse-Wiens UPDATE ON TESTING AT CADHAM Dr. Jared Bullard
2:30 – 3:30 (3 X 15 Min) + Q&A	8) WHAT ARE THE OPTIONS FOR TREATING ATRIAL FIBRILLATION IN A YOUNG ADULT? Dr. Christopher Parr 9) HOW DO I MANAGE THE ACUTE ASTHMATIC ATTACK IN A CHILD? Dr. Karen Gripp 10) HOW DO I USE TROPONIN AND RISK STRATIFICATION TO SAFELY DISCHARGE PATIENTS WITH SUSPECTED ACS? Dr. Roger Suss
3:30 – 4:00	BREAK
4:00 – 5:00 (2 x 20 Min) + Q&A	11) WHICH OF MY PATIENTS WITH DEPRESSION ARE SUITABLE FOR ECT, IV KETAMINE OR rTMS? Dr. Murray Enns 12) PSYCHOTROPIC MEDICINES? HOW DO I SAFELY SWITCH OR ADD-ON WHEN EMPIRIC TREATMENT IS SUB-OPTIMAL? Dr. Grace Frankel

Mainpro+ Credits:

Full Day (8:30 – 5:00)	6.0
Morning (8:30 – 12:00)	3.0
Afternoon (1:30 – 5:00)	3.0



FRIDAY, APRIL 24, 2020

MORNING SESSIONS

8:30 – 10:45

HOW DO I TALK TO PARENTS ABOUT CHILDHOOD VACCINATION?

DR. JEN POTTER, Assistant Professor, Department of Family Medicine, University of Manitoba

The anti-vaccination movement has been identified by the World Health Organization as one of the top ten threats to global health. This presentation will describe the nuances of vaccine hesitancy and why traditional approaches have not been effective in countering the anti-vaccination message. I will then discuss practical communication approaches to use in the office when communicating with parents about childhood vaccination.

Learning Objectives:

1. Describe the spectrum of vaccine hesitancy.
2. Discuss why traditional "knowledge gap" approaches haven't helped address vaccine hesitancy.
3. Demonstrate useful communication strategies when discussing vaccination with vaccine-hesitant parents.

HOW DO WE ADVISE PATIENTS ABOUT HERBAL MEDICATION AND SUPPLEMENTS?

DR. SHANDIS PRICE, Family Physician; Faculty Lead Integrative Medicine, University of Manitoba

Patients commonly use natural health products for a variety of conditions, and often without consultation from a physician or other health professional. This session will discuss an approach to patients using natural health products, how they are regulated in Canada, as well as some resources available to review evidence for their effectiveness and safety.

CAN MY HEALTH TEAM DEVELOP COMMUNITY PARTNERSHIPS THAT WILL IMPROVE YOUR FAMILY MEDICINE PRACTICE?

DR. MICHAEL HOCHMAN, Assistant Professor, Department of Family Medicine, Rady Faculty of Health Sciences, Family Physician and WRHA DT/PD MyHT Medical Lead, ARLE JONES, WRHA MyHT DT/PD Team Manager

My Health Teams are built around strong partnerships. Teams of care providers who work together to plan and deliver services for a geographic area or specific community or population. My Health Team are less about physical space, and more about leveraging and building on existing services and enhancing them so that patients are offered more coordinated and comprehensive care. Most of all, My Health Team are about providing excellent service to populations and meet community needs. Once well-established, all My Health Team should be able to provide a common set of services to their communities: 1. Improving access to primary care. 2. Demonstrating quality and safety in Primary Care. 3. Increasing the focus on the patient and patient-centered primary care. 4. Connecting care providers within and across geographic boundaries to provide seamless transitions in care. 5. Enhancing efficiency in primary care and supporting sustainability of the health system.

Learning Objectives:

1. Review WRHA My Health Team development.
2. Share experiences on determining partnerships and developing services that have served local populations across Winnipeg.
3. Identify best practices to engage physicians and determine community needs.
4. Discuss strategies and learnings from WRHA My Health Team development.



FRIDAY, APRIL 24, 2020

MORNING SESSIONS

LOW TESTOSTERONE: WHEN, HOW, & WHAT TO DO??

DR. PREMAL PATEL, Assistant Professor, Urologic Surgery; Male Infertility, Microsurgery & Sexual Medicine, University of Manitoba

Testosterone deficiency can present with a variety of symptoms and with several definitions of a deficiency, it can often be challenging to diagnose and treat. This topic aims to discuss when testosterone deficiency should be treated, how it should be treated with an overview of available testosterone formulations and what to do when a patient is on testosterone replacement therapy. Several case studies will be presented to provide a review of discussed topics.

Learning Objectives:

1. Understand the etiology of testosterone deficiency
2. When and how to treat testosterone deficiency
3. How to monitor patients on testosterone replacement therapy

HOW SHOULD A PRIMARY CARE PROVIDER APPROACH PSA TESTING IN MANITOBA?

DR. PREMAL PATEL, Assistant Professor, Urologic Surgery; Male Infertility, Microsurgery & Sexual Medicine, University of Manitoba

Many family physicians continue to use prostate specific antigen (PSA) test for prostate cancer screening despite evidence that harms frequently outweigh the benefits. Our team conducted a study to understand the factors that influence the ordering of PSA testing in Manitoba. Engaging family physicians to be more judicious with the use of PSA testing for screening needs to take into consideration the variation in how PCPs approach PSA testing and how they make decisions around the benefits, risks and overall value of prostate cancer screening.

Learning Objectives:

1. To highlight current guidelines around the use of PSA testing as a screening tool for prostate cancer
2. To explain the variation in approaches to using PSA testing for prostate cancer screening among Manitoba family physicians
3. To discuss how these results can influence knowledge translation strategies

11:00 – 12:00

WHAT IS THE BEST TREATMENT FOR ACNE ROSACEA

DR. VICTORIA TARASKA, MD, FRCP Dermatology, The Derm Center



FRIDAY, APRIL 24, 2020

AFTERNOON SESSIONS

HOT TOPICS COVID-19 PANEL 1:30 – 2:30

UPDATE ON PUBLIC HEALTH, Dr. JOSS REIMER, Medical Officer of Health – Population & Public Health – WRHA; Medical Officer of Health – STBBI/CDC – Manitoba Health (15- 20 min)

UPDATE AND REVIEW ON DIAGNOSTICS, Dr. PHILIPPE R. S. LAGACÉ-WIENS, Medical Microbiologist, Diagnostic Services Shared Health (15 – 20 min)

UPDATE ON TESTING AT CADHAM, DR. JARED BULLARD, Associate Medical Director at Cadham Provincial Laboratory and Section Head and Associate Professor, Pediatric Infectious Diseases, Departments of Pediatric & Child health and Medical Microbiology & Infectious Diseases. (5 -10 min)

2:30 – 3:30

WHAT ARE THE OPTIONS FOR TREATING ATRIAL FIBRILLATION IN A YOUNG ADULT?

DR. CHRISTOPHER PARR, PGY-5 Adult Cardiology, Associate Chief Resident, Adult Cardiology Residency Training Program, Max Rady College of Medicine, University of Manitoba

Atrial fibrillation is the most common arrhythmia. It is mostly found in older patients due to age-related structural changes to the heart. But when seen in the young, it may be a harbinger of more serious disease. Does my young patient have undiagnosed congenital heart disease? Is there a channelopathy or cardiomyopathy? Is my patient at risk of sudden cardiac death? Do I commit my otherwise healthy patient to a lifetime of anticoagulation and beta-blockade? In this talk: learn when to be worried (and when not to be), and when to access to the Adult Congenital Heart Disease Clinic or Inherited Arrhythmia Clinic.

Learning Objectives:

1. Understand the pathophysiology of atrial fibrillation
2. Review the present guidelines for the management of atrial fibrillation
3. Recognize disease patterns in young patients with atrial fibrillation that would prompt further diagnostic work-up
4. Focus on pharmacotherapy for young patients with atrial fibrillation

HOW DO I MANAGE THE ACUTE ASTHMATIC ATTACK IN A CHILD?

DR. KAREN GRIPP, Section Head, Pediatric Emergency Medicine; Medical Director, HSC Children's Hospital Emergency Department Department of Pediatrics and Child Health; Associate Professor, Rady Faculty of Health Sciences; Max Rady College of Medicine, University of Manitoba

HOW DO I USE TROPONIN AND RISK STRATIFICATION TO SAFELY DISCHARGE PATIENTS WITH SUSPECTED ACS?,

DR. ROGER SUSS, Lecturer, Department of Family Medicine, University of Manitoba

Chest pain is one of the most common presentations to Emergency and since acute coronary syndrome (ACS) is both common and dangerous, physicians need to rule out ACS quickly and reliably. Fortunately, a troponin provides them with an excellent tool for this task. Learners will leave this session with strategies for how to accurately and defensibly rule out ACS and send low risk patients home - usually within two hours.



FRIDAY, APRIL 24, 2020

AFTERNOON SESSIONS

4:00 – 5:00

(1) WHICH OF MY PATIENTS WITH DEPRESSION ARE SUITABLE FOR ECT, IV KETAMINE OR rTMS??

DR. MURRAY ENNS, Staff Psychiatrist and Medical Director, Operational Stress Injury Clinic, DLC; Professor, Department of Psychiatry, University of Manitoba

The most standard and commonly used treatments for major depressive disorder include specific psychological treatments and antidepressant pharmacotherapy. Many patients do not respond fully to standard treatment interventions and there is a need for alternative treatment options for these individuals. Dr. Enns' presentation will outline the evidence and indications for three alternative depression treatments: Electroconvulsive therapy, intravenous ketamine and repetitive transcranial magnetic stimulation (rTMS).

Learning Objectives:

1. To be aware of the evidence base for rTMS, ECT and intravenous ketamine in the treatment of major depressive disorder
2. To be able to identify patients who are suitable candidates for rTMS, ECT or intravenous ketamine for depression.

(2) PSYCHOTROPIC MEDICINES? HOW DO I SAFELY SWITCH OR ADD-ON WHEN EMPIRIC TREATMENT IS SUB-OPTIMAL?

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Switching antidepressants can be quite confusing both for the practitioner and the patient. An understanding of pharmacology and pharmacokinetics of antidepressants can help with switching and can also aid in the addition of appropriate add-on therapy. The purpose of this session is to provide a strategic overview including relevant resources on how to switch antidepressant therapies safely. A discussion regarding recommended antidepressant augmentation strategies will also be included.

Learning Objectives:

Summarize important principles (i.e. half-life and mechanism of action) of antidepressants when considering a switch of therapy.

1. Describe scenarios when add-on therapy is appropriate for partial-responders to antidepressants.
2. Choose reliable clinical resources to aid in switching antidepressant therapies.

