

CANADIAN NEUROLOGICAL SCIENCES FEDERATION
NEURO NEWS
ANNUAL EDITION
2018





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The Canadian Neurological Sciences Federation (CNSF) The Neurological Sciences Foundation of Canada (NSFC)



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CNS & CSCN Member



Richard Riopelle
CNSF Advocacy Chair
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Shobhan Vachhrajani
CNSF CPGC Chair
CNSS Member

2017 / 2018 Society Boards of Directors

Your 2017 / 2018 Society's Board of Directors are listed below. Take some time to thank them for their dedication, commitment and efforts on behalf of you and your Society.



2017 / 2018 CACN Board of Directors

President.....Cecil Hahn
 Vice-President.....Simon Levin
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 Residents' Representative.....Thiviya Selvanathan
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 CEO.....Dan Morin



Canadian Neurological Society / Société canadienne de neurologie

2017 / 2018 CNS Board of Directors

President.....Fiona Costello
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 Secretary-Treasurer.....Steven Peters
 Past President.....Colin Chalk
 Director #1 ManitobaReza Vosoughi
 Director #2 NewfoundlandMarsha Eustace
 Director #3 Alberta.....Gerald Pfeffer
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 Director #8 BC.....Alex Henri-Bhargava
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 Jr. Resident Rep.....Adil Harroud
 CEO.....Dan Morin



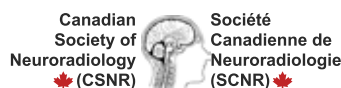
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President.....Stephen Lownie
 Vice-President.....Pat McDonald
 Secretary-Treasurer.....Dhany Charest
 Past President.....Ian Fleetwood
 Director #1 QuebecDavid Mathieu
 Director #2 Nova Scotia.....Sean Christie
 Director #3 Newfoundland & LabradorRoger Avery
 Director #4 Alberta.....John Wong
 Director #5 British Columbia.....Gary Goplen
 Director #6 SaskatchewanLissa Peeling
 Director #7 New BrunswickRobert Adams
 Director #8 OntarioEric Massicotte
 Director #9 ManitobaColin Kazina
 Residents' Representative.....Mark Bigder
 Jr. Resident Rep.....Michael Taccone
 CEO.....Dan Morin



2017 / 2018 CSCN Board of Directors

President.....J. Tellez-Zenteno
 Vice-President.....Fraser Moore
 Secretary-Treasurer.....Michelle Mezei
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 Vice-President.....Donatella Tampieri
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CNSF Vision, Mission, Values and Priorities

CNSF Vision

An organization's vision conveys what impact is desired, and for whom. It should capture the altruistic outcome that reflects a profession's higher purpose.

The improved wellbeing of children and adults with diseases, disorders and injuries of the nervous system and the prevention of these conditions.

CNSF Strategic Priorities

To ensure the achievement of its Vision and Mission, the CNSF has **three strategic priorities**: Continuing Professional Development; Membership Value; and Advocacy. The main **objectives** of these three priorities are listed in this section. In addition, responsibility for expanding and putting these elements into operation has been assigned to one or more of the CNSF constituent societies, committees or staff.

1. Continuing Professional Development:

The **goal** of this priority is to review, refine, improve and expand the overall CNSF CPD plan to meet the evolving needs of Society members while continuing to focus on the CNSF's priorities, i.e. the Congress and the Journal.

- 1) Identify and document emerging perceived and unperceived educational needs of members.
- 2) Continually evaluate the Congress through periodic assessments of its effectiveness in meeting member needs.
- 3) Develop and implement a Journal Operational Plan that will increase the impact factor and ensure the Journal prospers and is managed to thrive in a digital world.
- 4) Promote the development of Clinical Practice Guidelines.

2. Membership Value: The **goal** is to build a strong organization that provides value to the constituent Societies and their membership.

- 1) Increase the Constituent Society membership.
- 2) Encourage the participation of residents.
- 3) Review and, if necessary, revise governance and operational capabilities to assure they achieve the CNSF Vision and Mission.
- 4) Maintain ongoing and reliable measurements of current professional resources.
- 5) Provide other added value for members to encourage increased Society membership.

3. Advocacy: The **goal** is to increase awareness of the impact and burden of diseases, disorders and injuries of the nervous system in Canada on affected individuals, their families, and communities, and the health-care system. The targets of this priority are the policy-makers at all levels of government, the general public and affiliated health care providers.

- 1) Work and/or partner with Affiliate and Associate Societies and other related organizations to increase awareness of neurological conditions.
- 2) Influence public policy decisions on matters related to the CNSF Vision concerning the prevention, diagnosis and management of neurological conditions.
- 3) Advocate for support for basic neuroscience and applied research, including strategies for prevention of neurological conditions.

CNSF Mission

An organization's mission conveys its chosen approach to achieving the vision. It describes the broad scope of work the Federation will undertake.

To support the neuroscience professions in Canada, and particularly those members of the CNSF's Societies, through education, advocacy, membership services and research promotion.

Notes about the Mission:

- **Education** includes the annual CNSF Congress, The Canadian Journal of Neurological Sciences (The Journal), and all other continuing professional development (CPD) activities.
- **Membership Services** include services delivered to the five constituent societies of the CNSF and their individual members, the services offered to Society members, the research to identify member needs, and other related activities.
- **Advocacy** includes activities such as building public awareness about diseases, disorders and injuries of the nervous system, and advocacy for improved public policy and increased medical research. Such advocacy may be direct or in collaboration with other organizations.



Message from the CNSF President

Dear friends, colleagues and mentors

It is a pleasure to be able to write a summary note of the activities of CNSF since mid 2017. CNSF is a rather complex Federation of individual societies. The complexity has increased with the addition of the Canadian Society of Neuroradiology to our organization. The CSNR leadership and growing membership has been very active. They will participate in various courses this year, with a view to total integration the following year. It is exciting to be in the middle of major changes within the organization. This has been a very interesting time for me and indeed a thrill to be able to meet and interact with so many bright and dedicated individuals.

I would firstly like to thank all the Society leaders for their collegial cooperation with each other and the umbrella organization. The Chairs and Vice Chair of the Scientific Program Committee (Drs. Alex Henri-Bhargava and Joseph Megyesi respectively), Professional Development Committee (Drs. Alex Mineyko and Dr. Cian O'Kelly) have done a phenomenal job with organizing this meeting in Halifax. The SPC and PDC leadership needs to be specially acknowledged for the bold and innovative changes made to the program.

We are exploring the possibility of a focused second Congress at a different time period in the year. Already there are various MS related educational events taking place across the country under the auspices of the CNSF. For the first time in recent history surgical device companies are going to be participating in "Lunch and Learn" events. Overall the industry sponsors have been extremely generous in their support. We simply can not ignore the active participation and contribution of all the resident representatives in all the societies. The role these individuals have played bodes well for our organization's future well being. There is new session at the Halifax meeting that specifically addresses long range planning of the Congress. We also have a social evening at the Congress for the second consecutive year. One of our strengths and unique characteristics is in fact the ability for several varieties of clinical neuroscientists to be able to meet and interact with each other.

Overall, the program for the Halifax Congress and activities surrounding it promise to make this a very successful meeting.

Dr. Robert Chen has also worked hard to improve the Journal and manages it's affairs very ably. Our other major Committee Chairs and members continue to contribute to our success. Special thanks are extended to Membership Committee co-Chairs Bev Prieur and Jeanne Teitelbaum, Clinical Practice Guidelines Chair Shobhan Vachhrajani and Advocacy Chair, Rick Riopelle.

Finally, thank you to the staff at the CNSF Secretariat for all of their hard work on behalf of our Societies and our Federation. This includes Marika Fitzgerald, Donna Irvin, Nicole Rozak and CEO Dan Morin.

Of course nothing is possible without the active participation of all of you, our members and volunteers. Thank you for all you do.

Kesh Reddy, CNSF President



Novartis Pharmaceuticals



Connecting in the fight against MS

Novartis Pharmaceuticals Canada Inc. is proud of its continuing legacy in multiple sclerosis research and support.



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Message from the CNSF CEO

Neuro|News is the bi-monthly electronic newsletter of the CNSF which is used to: communicate relevant CNSF and member Society activities; provide highlights of the Congress, member profiles, information on the Journal and activities of our major Committees such as Continuing Professional Development, Scientific Program, Advocacy, Membership and Clinical Practice Guidelines. We also utilize the Neuro|News to promote Membership services and benefits, and acknowledge our sponsors' support.

The annual hard copy issue of Neuro|News is intended to more clearly and succinctly detail CNSF activities and how the volunteers comprising the CNSF and Society Boards and the numerous Committees are working hard on the members' behalf to provide the many benefits of joining one, or more, of the five Societies which comprise the Federation. We are so appreciative of the total dedication, hard work and creativity of our 'volunteers'.

Our volunteer physicians make it all come together and contribute to our success. Members of the CNSF owe a debt of gratitude to their fellow members who take on these vital and sometimes onerous responsibilities. Our Board members, chairs, vice-chairs and committee members are listed throughout this year's Neuro|News. Why not stop them and say thanks.

The Secretariat, manned so professionally by Marika, Donna and Nicole, does wonderful work to keep the administrative aspects of the Societies, the CNSF and Journal on track. They are vital to those aspects; and more. They, too, deserve a great deal of thanks.

It is also a fact that without members and non-members attending our Congress, the CNSF would have difficulty remaining viable. We work hard every year, all of us, to make the experience and CME credits you earn for attending the Congress worth the 'trip'. We appreciate your dedication and attendance and loyalty to our uniquely Canadian Congress. Thank you.

Similarly, a great deal of thanks and gratitude is extended to our 'industry' supporters. All of them are, collectively, vital to our success. Our sponsors and exhibitors are listed throughout this Neuro|News; please take the time to visit them in the exhibit hall and thank them for their support.

Thank you.

Dan Morin, Chief Executive Officer
Canadian Neurological Sciences Federation

2019 CNSF Congress

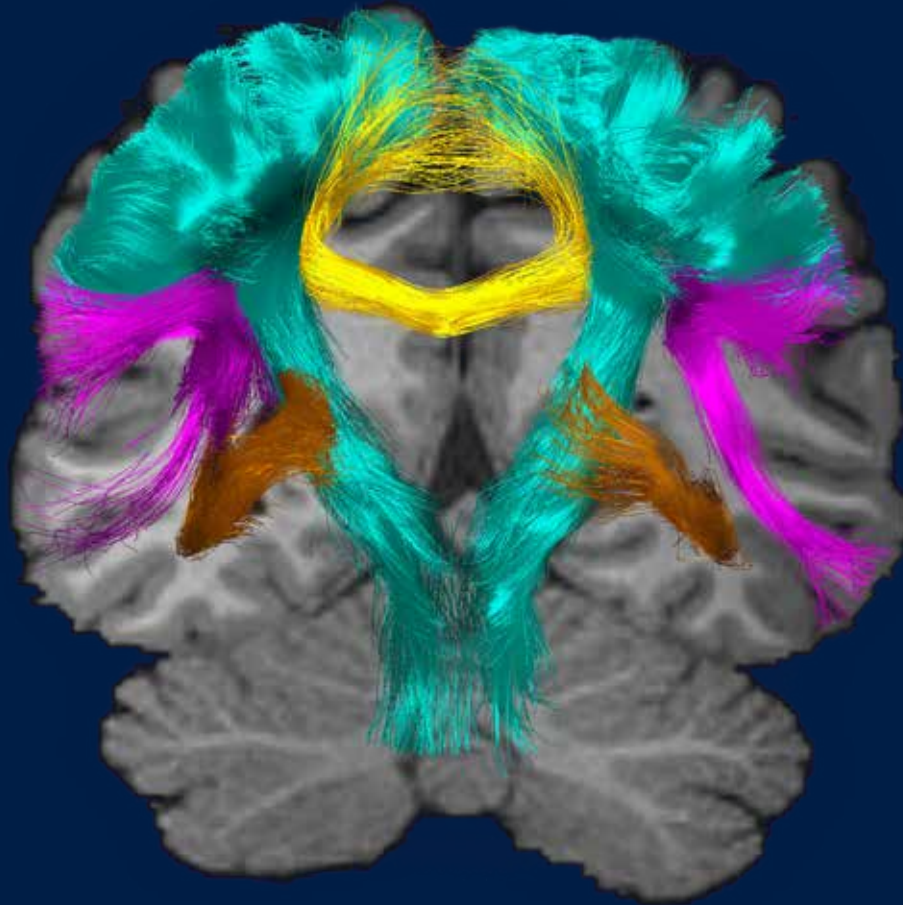
We will be in beautiful Montreal, Quebec
Sunday, June 16 – Wednesday, June 19

congress.cnsfederation.org



© Tourisme Montréal, Stéphan Poulin

TRANSFORMING NEUROLOGICAL HEALTHCARE.



YOUR EXPERTISE. OUR TECHNOLOGIES.

Together, we confront the challenges of neurological disorders and diseases:

- Acute ischemic stroke
- Brain tumors and lesions
- Cranial trauma
- Dystonia
- Epilepsy
- Essential tremor
- Hemorrhagic stroke
- Hydrocephalus
- Parkinson's disease
- Spinal disorders
- Subural hematomas

The Canadian Neurological Sciences Federation's Distinguished Service Award

This is an award given to a senior member of the CNSF who has made an outstanding, notable or special contribution to the Canadian Neurological Sciences Federation, and to one or more of the Federation's Societies and/or the CJNS (Journal); either through participation in the CNSF's committees, involvement in the Congress, the performance of administrative duties, or involvement in promoting the CNSF and its member societies.

2018 recipient Dr. Ian Fleetwood

Ian joined the CNSS in 1996, while still a Resident in Winnipeg. He has regularly attended and participated in the annual CNSF Congress ever since. He served on the CJNS Editorial Board for 5 years and has also been an occasional reviewer of submissions to the Canadian Journal of Neurological Sciences. He currently sits as a CNSF Board Member. Above all, he enjoys the camaraderie of the Canadian meeting and has helped organize several social functions over the years!

Ian joined the CNSS Executive Committee in 2010, graduating through the positions of Secretary-Treasurer, Vice-President, President and Past-President. During his time on the Executive, he addressed the issue of Membership by focusing on creating value for membership and building a comprehensive membership database. He implemented a social reception for Canadian neurosurgeons at American conferences. During his presidency, additional awards were introduced for neurosurgery resident presentations at the Congress and funding for support of national resident-level courses was expanded. Working with Steve Lownie, the CNSS Lifetime Achievement Award was revitalized, including recognition of his long time colleague, Renn Holness. He explored issues surrounding neurosurgeon employment and represented CNSS at national



conferences dealing with these issues. He researched and archived the history of the CNSS in an attempt to restore a sense of longevity and pride in the Society. He helped focus the organization on the emerging issue of Medical Assistance in Death, organizing a symposium at the CNSF Congress and co-authoring the CNSS Position Paper published last year.

In addition to the duties associated with these positions, he has also served regularly as a reviewer of neurosurgical abstracts to the Congress and was on the selection committee for the K. G. McKenzie Prize for six years.

Outside of the CNSF, Ian has been involved with the Royal College Neurosurgery Examination Committee, serving as an Examiner for six years and was on the nucleus committee for four years, before recently transitioning to the Written Exam committee. He has also participated in the process of developing milestones for Competency by Design, led by Cian O'Kelly.

Beyond neurosurgery, Ian is a passionate minor hockey coach and has been on the bench for 17 teams in the last 12 years. He has participated administratively in the community as a minor hockey Board member in Victoria and also here in Halifax for Bedford Minor Hockey Association! His current project is to establish an all-Female hockey association in Victoria, the only major city in Canada that lacks appropriate infrastructure for girls hockey. He serves on the BC Hockey Safety Committee as a subject matter expert in brain and spinal injury and is currently involved in reviewing the playing rules surrounding head contact in minor hockey in BC. He laments his inability to initiate an annual Neurosciences hockey game during the Congress after 5 consecutive attempts!

In accepting this award, Ian wishes to acknowledge numerous clinical and administrative mentors who also contributed significantly to the CNSS and CNSF including Norman Hill, Terry Myles, Mark Hamilton, Chris Wallace, Max Findlay, Renn Holness, and especially Derek Fewer.



CNSS Lifetime Achievement Award (Charles Drake Medal)

2018 recipient is Dr. Falah B. Maroun

The Canadian Neurosurgical Society is delighted to announce the 2018 recipient of the Lifetime Achievement Award / Charles Drake Medal,** Dr. Falah B. Maroun. Born in Lebanon, Dr. Maroun obtained his medical training at the French Faculty of Medicine in Beirut. He completed residency in Neurology and Neurosurgery at the Neuro in Montreal. Following this, he planned a brief period of work in St. John's, enroute back to Lebanon. But as things turned out it was the beginning of a long and fulfilling neurosurgical career spanning 50 years serving the people of Newfoundland and Labrador. During part of this period he also served as Chair and Chief of Surgery. Among his many accomplishments and awards, perhaps the most significant is that in addition to serving as the only neurosurgeon of his region for many years, he consistently recorded his clinical and surgical observations and kept a steady output of clinical scientific publication activity during all of his career. Dr. Maroun served as President of the Canadian Congress of Neurological Sciences in 1998. In 2001, Dr. Maroun was invested into the Order of Canada, and remarkably the same year was awarded the Chevalier de l'ordre National du Mérite (France). Most recently, he was invested into the Order of Newfoundland and Labrador, an award that recognizes individuals who have demonstrated excellence and achievements in any field of endeavour benefiting in an outstanding manner the Province and its residents. The investiture took place at Government House on January 31, 2018. Dr. Maroun is married to Bonita, and they have a daughter, Rindala. Congratulations, Dr. Maroun!



***The Charles Drake medal was conceived in 2013 as a memorable enhancement to the luminary Award of the Canadian Neurosurgical Society for Lifetime Achievement. Prior awardees include Dr. R.O. Holness (2016) and Dr. M.C. Wallace (2017).*

Inaugural CACN Henry Dunn Lifetime Achievement Award



2018 recipient Dr. Alan Hill

The Canadian Association of Child Neurology is pleased to announce that Dr. Alan Hill has been selected to receive its inaugural Henry Dunn Lifetime Achievement Award.

Like Dr. Dunn, who was a founder of Child Neurology in Canada, Dr. Hill has played a major role in the development of Child Neurology within Canada and around the world. He has supervised and trained 16 child neurologists currently practicing in Canada, and many of his former trainees are practicing in leadership roles in the UK, Ireland, Australia, New Zealand, Argentina and the United States.

Dr. Hill was the first neonatal neurologist in Canada and over the course of his career he has made seminal contributions to our understanding of the patterns of brain injury in preterm infants and term infants with hypoxic ischemic encephalopathy. Always a consummate clinician, his scientific work has always been deeply rooted in precise clinical observations.

Dr. Hill served as the Head of Paediatric Neurology at the University of British Columbia and British Columbia Children's Hospital for 16 years, during which time he built up a large and successful Division that has served countless children with neurological disorders across the province. Dr. Hill has also made significant national and international leadership contributions as a past CACN Secretary-Treasurer and CACN President, and as a longstanding member of The Professors of Child Neurology.

Dr. Hill's extraordinary career achievements echo those made by Dr. Henry Dunn, and make him a most deserving inaugural recipient of this award, which will be presented during the annual CACN Dinner on June 25th in Halifax.

2018 Society Prize Winners

Congratulations to the following CNSF members that have been awarded 2018 Society Prizes.

Be sure to attend the Grand Plenary session on Monday morning when they will present their work alongside our prestigious Plenary Guest speakers

Canadian Neurosurgical Society (CNSS)

K.G. McKenzie Memorial Prize for Basic Neuroscience Research

Christopher Ahuja

SMaRT Human Neural Stem Cells to Degrade Scar and Optimize Regeneration after Traumatic Cervical Spinal Cord Injury

K.G. McKenzie Memorial Prize for Clinical Neuroscience Research

Amparo Wolf

The Risk of Malignancy after Stereotactic Radiosurgery

Canadian Association of Child Neurology (CACN)

President's Prize

Abdulla Alawadhi

Immune Deficiencies/Dysregulations Underpinning Childhood Limbic Encephalitis: a case series and literature review

Canadian Neurological Society (CNS)

Andre Barbeau Memorial Prize for Basic Research

Saud Alhusaini

The Relationship Between Carotid Stenosis, Cerebral Cortex Structure and Cognitive Function at Age 73

Francis McNaughton Memorial Prize for Clinical Research

Natalie Parks

A Population-based Study of "No Evident Disease Activity" (NEDA) in Multiple Sclerosis

Benefits of CNSF Membership

Our Member Societies

CNSF members belong to one, or more, of our five constituent Societies:

Canadian
Neurological
Society
(CNS)

Canadian
Association of
Child Neurology
(CACN)

Canadian
Neurosurgical
Society
(CNSS)

Canadian
Society of Clinical
Neurophysiologists
(CSCN)

Canadian
Society of
Neuroradiology
(CSNR)



CNSF Membership includes the following benefits:

Membership in the Community of Canadian Clinical Neuroscientists

The community of clinical neurologists, neurosurgeons, pediatric neurologists, neurophysiologists and neuroradiologists is a robust and growing family that has made a long-standing, international, and ongoing contribution to clinical neuroscience. The community provides continuing medical education for its members, teaching for residents, students and clinical fellows. There is strong clinical and discovery-based research in Canada. Networking in this group provides opportunity for training (e.g. fellowships), for collaboration across the country and for mutual learning.

Annual Congress

Our Federation, assisted by the Professional Development and the Scientific Program Committees, hosts an Annual Canadian Congress geared towards the continued professional development learning needs of Neurologists, Neurosurgeons, Pediatric Neurologists, Neurophysiologists, Neuroradiologists and Neuroscientists.

Our Congress is an accredited learning activity; therefore you earn Continuing Maintenance of Certification credits.

Gather with your colleagues and friends from across the country.

Learn, Mentor, Share, Teach, Collaborate, Advocate.

Members attend the CNSF Annual Congress at a generously discounted registration fee.

Annual Society Prizes

Members have the opportunity to win valuable Society prizes by submitting Abstracts to the Congress and expanded abstracts to the Society competitions. There are 6 first place prizes available to Junior members or an Active member within two years of receiving their certificate. Each valued at approximately \$2500. Winners have the privilege of presenting their work at the Congress.

There are \$500 second place prizes which may be awarded as well as on-site poster and abstract awards.

Details and submission information are available in the *Call for Abstracts* congress.cnsfederation.org/congress/call-for-abstracts

Canadian Journal of Neurological Sciences

The Canadian Journal of Neurological Sciences is the official publication of our five member Societies. The Journal is an internationally recognized, peer reviewed medical journal, published through Cambridge University Press – Cambridge Core.

Members receive an online subscription to the Canadian Journal of Neurological Sciences (CJNS).

CNSF Members and Journal subscribers have exclusive access to the most current year of this publication.

If an author requests immediate open access for an article, in accordance with CIHR Granting requirements, the repository upload fee is \$2000 / article for first open access repository upload. CNSF Members pay only \$1000 for this service if requested.



Benefits of CNSF Membership

Members have access to additional information on our CNSF website using their password login

Our website contains Congress information, Advocacy information and general Society information. The site includes: access to CJNS Journal articles back to Issue 1 in February 1974. View Neuro Careers postings, Society Newsletters, Society Prize information, access for annual dues payments, Society Governance items (such as council representatives and their responsibilities), Member Directories, Society bylaws, resource links, calendar of events, and more.

Residents

First-year residents can apply for complimentary first-year membership, paid by their member Society. Membership dues for subsequent years of residency are only \$80/year.

Congress registration fees for resident members are \$250 for both pre and post Early Bird. This registration fee includes access to all Congress Courses/sessions, course notes, luncheons, breaks and the Residents Social. Non member resident rates are \$775, so this benefit of membership is substantial.

Society Resident Representatives help organize a resident social event. At this event, senior staff discuss their careers, fellowship directors with positions to fill are looking to meet interested residents and will be available to discuss fellowship options and career opportunities. This is a major networking event, specifically designed for CNSF residents.

Resident members also receive the 'benefits' listed in the sections explained above.

The CNS, CNSS and CACN, all have a resident representative that sits on the CNSF Professional Development and Scientific Program Committees, which determine the scientific program for each year's Congress. The resident representative attends the CNSF Board of Directors meetings, as well as their respective Society Board meetings.

Resident members are welcome to contact their society resident representative with any issues, concerns or ideas that they would like to see discussed.

Not a member of the CNSF (CNS, CACN, CNSS, CSCN, CSNR)?

Would you like to become a member of one of the CNSF Societies? Would you like to take advantage of these Benefits of Membership?

Just download the appropriate Society Application form by choosing your society of interest at: www.cnsfederation.org or contact Donna Irvin at donna-irvin@cnsfederation.org

Associate and Affiliate Societies

The CNSF Associate Societies of the CNSF

are professional societies that have similar goals to the CNSF. They are:

- Canadian Association of Neuroscience Nurses
- Canadian Association of Electroneurophysiology Technologists Inc.
- The Association of Electromyography Technologists of Canada
- Canadian Association for Neuroscience
- Canadian Association of Physical Medicine & Rehabilitation

The CNSF and the Affiliate Societies

The CNSF and its Affiliate Societies work collaboratively whenever possible throughout the year. The CNSF values and appreciates these partnerships.

One of the most important tasks the Affiliates undertake is to assist the CNSF, when requested, in providing leadership and planning for Congress sessions which fall within their area of expertise.

They are:

- Canadian ALS Trials and Research Network
- The Canadian Brain Tumour Consortium
- The Canadian Headache Society
- The Canadian League Against Epilepsy
- The Canadian Movement Disorders Group
- The Canadian Network of MS Clinics
- The Canadian Neurocritical Care Society
- The Canadian Neuromuscular Group
- The Canadian Stroke Consortium
- The Consortium of Canadian Centres for Clinical Cognitive Research



Committees

Advocacy Committee

The Advocacy Committee is chaired by Richard Riopelle.

The Neurological Health Charities Canada (NHCC) is made up of organizations that represent specific neurological diseases/disorders from across Canada and attempts to serve as one voice to provide a stronger sense of community and influence for positive change for those persons affected by Neurological Diseases. Much of the CNSF's Advocacy initiatives are in partnership with the NHCC.

In addition, Dr. Riopelle represents the CNSF and other organizations on various initiatives such as: the Canadian Health Services and Policy Research Alliance, Research Canada, the Social Development Partnership Program and several others.

Membership Committee

Membership retention and growth is vital to the continued success and stability of each of the Federation's Societies. As such, each Society has members on the CNSF Membership Committee: Bev Prieur and Jeanne Teitelbaum, Co-Chairs, Sharon Whiting, Ian Fleetwood, Fiona Costello, Tejas Sankar, Jodie Burton, Michael Hill, Parichita Choudhury, Ilana Hanes, Adil Harroud, Michael Taccone, Thiviya Selvanathan and Mark Bigder.

Increased Society membership is an objective every Society has expressed as a high priority. Increased membership is reflected in higher revenues for the Societies, the CNSF and ideally for the Congress through increased member registrations. Increased membership makes us stronger and even more relevant.

The issue of expanding membership numbers in every Society has never been as important as it is today.

Clinical Practice Guidelines Committee

The Clinical Practice Guidelines Committee is Chaired by Shobhan Vachhrajani with Draga Jichici as Vice Chair. Committee members include: Lyle Weston, Jeanne Teitelbaum, Michael Hill and Richard Riopelle.

The goals of the Clinical Practice Guidelines Committee are to:

1. Encourage the development, dissemination and implementation of clinical practice guidelines by our Member and Affiliate Societies, and other Canadian groups that would be of benefit to Canadian neurologists and neurosurgeons.
2. Establish a framework and processes for the promotion and endorsement of clinical practice guidelines so that current evidence-based guidelines meet the needs of, and can be communicated effectively to, the membership of the CNSF.
3. Evaluate and adopt for use by the CNSF membership, with appropriate context-specific provisions, Clinical Practice Guidelines developed outside Canada, particularly in the United States and Europe.

May I help you?



Do you have questions regarding your society membership, CNSF services or Congress program and facility information?

Just stop by the Member Services counter for help finding the answers.

The **Canadian Journal of Neurological Sciences** (CJNS) is owned by the CNSF member societies and features many articles submitted by your colleagues and fellow CNSF members.



Dr Robert Chen

Our Editor-in-Chief, Dr Robert Chen, dedicates numerous hours towards the science, the professionalism and the improvements of our Journal publication. He has built a strong Editorial Board and Associate Editors team and we thank them all for their time and dedication.

The Journal is hosted on Cambridge Core, the new academic platform from Cambridge University Press. Cambridge Core is a robust upgrade from the previous Cambridge Journals Online, and was developed specifically with researchers' needs in mind.

CNSF members currently receive full access by logging in as a member on the CNSF website. Cambridge Core is working on our single sign on feature which will allow you to login directly on the Cambridge site using your CNSF member ID# and your last name as username and password.

The CJNS Journal has been publishing peer reviewed, scientific articles since 1974 and these are all available for viewing online. Check out the multiple features including "Magazine View".

You are invited to learn more about the CJNS Journal and Cambridge Core by visiting the Cambridge booth in the Exhibit Hall.

Editor-in-Chief: Robert Chen; **Associate Editors:** Robert Hammond, Hans Katzberg, Tejas Sankar, Jeanne Teitelbaum, Manas Sharma, Mahendranath Moharir, Philippe Huot



NEURO CAREERS

Looking for a new career opportunity?
Looking to advertise a position at your center?

Check out Neuro Careers!

Neuro Careers is an online classified advertising resource on the CNSF website and linked on the CJNS page within Cambridge Core. Direct links to classified ads are also included in the CNSF members' newsletter, the Neuro|News.

Classified ads are posted online for 2 months, for less than \$500. They open as a full page PDF complete with color, graphics and company logos.

Neuro Careers is a great way to advertise job opportunities and fellowships to Neurologists, Neurosurgeons, Pediatric Neurologists, Neurophysiologists and related health care professionals.

To find out more, contact Donna at donna-irvin@cnsfederation.org.

▶ www.cnsfederation.org/careers

BANZEL. Effective adjunctive therapy to help patients and their families affected by seizures associated with LGS.



Demonstrated powerful, broad spectrum efficacy in the reduction of total seizures

32.7%

median reduction in mean total seizure frequency with BANZEL vs. 11.7% reduction with placebo ($p=0.0015$)^{†*}

53.4%

of patients treated with BANZEL reported improved seizure severity vs. 30.6% with placebo ($p=0.0041$)^{†*}
(Global evaluation of the patient's condition)[†]

- Continued improvement up to 3 years in tonic-atonic and total seizures^{2†}
- Within 6 months, 47.7% of BANZEL patients reduced their daily dose of other concomitant AEDs^{2†}

Only 9.7% of patients discontinued as a result of AEs during the 3 year extension study.²

Make BANZEL a part of your treatment plan.

* Data adapted from the BANZEL Product Monograph. A double-blind, multicentre, randomized, placebo-controlled, parallel group trial evaluated the efficacy and tolerability of BANZEL (rufinamide) adjunctive therapy for the treatment of seizures associated with LGS. Male and female patients (4–37 years of age) were included if they had a diagnosis of inadequately controlled seizures with 1–3 concomitant AEDs. Primary efficacy endpoints were median percent change in total seizure frequency per 28 days, median percent change in tonic-atonic (drop attack) seizure frequency per 28 days, and seizure severity based on a global evaluation of the patient's condition.

† A 7-point assessment performed at the end of the double-blind phase. A score of +3 indicated that the patient's seizure severity was very much improved, a score of 0 indicated that the seizure severity was unchanged, and a score of -3 indicated that the seizure severity was very much worse.

‡ Data adapted from the Kluger G *et al.*, 2010. An open-label, multi-center, extension study that evaluated the long-term efficacy and tolerability of BANZEL in patients with LGS who had previously completed a 12-week double-blind study of the original randomized controlled study for the adjunctive treatment of patients with LGS. In total, 124 patients (aged 4–37 years), receiving 1–3 concomitant antiepileptic drugs, were treated with BANZEL ~25–60 mg/kg/day. The treatment phase included a double-blind conversion phase followed by an open-label treatment lasting up to 3 years.

Indication and clinical use:

- BANZEL is indicated for adjunctive treatment of seizures associated with Lennox-Gastaut syndrome (LGS) in children 4 years and older and adults.
- Not indicated for the treatment of any other seizure disorder.
- There is limited information in subjects >65 years of age.
- The safety and efficacy of BANZEL in children under 4 years of age with LGS have not been studied and it is not indicated for use in this patient population.

Contraindications:

Patients with Familial Short QT syndrome; family history of short QT syndrome; presence or history of short QT interval.

Warnings and precautions:

- Cardiovascular: QT interval shortening. Caution should be used when administering BANZEL with other drugs or products that may shorten the QT interval (e.g., digoxin, mexiletine, phenytoin, magnesium sulfate).

- Endocrine and metabolism: BANZEL contains lactose and should not be used in patients with galactose intolerance, Lapp lactase deficiency or glucose-galactose malabsorption.
- Neurologic: Dizziness and ataxia; somnolence and fatigue; considerations when withdrawing BANZEL or concomitant AEDs; risk of status epilepticus. Patients should be advised about the potential for somnolence or dizziness and advised not to drive or operate machinery until they have gained sufficient experience on BANZEL to gauge whether it affects their mental and/or motor performance.
- Ophthalmologic effects: Diplopia, dry eye, eye infection, eye irritation, eye pruritus, blurred vision.
- Suicidal behaviour and ideation: All patients treated with antiepileptic drugs should be monitored for signs of suicidal ideation and behaviour, and appropriate treatment should be considered.
- Multi-organ hypersensitivity reactions: If an AED hypersensitivity reaction is suspected, BANZEL should be discontinued and alternative treatment started.
- Use in special populations: Women of childbearing potential, pregnant or nursing women, children under 1 year of age, patients over 65 years of age.

For more information:

Please consult the Product Monograph at <http://ca.eisai.com/pdf/new/BANZEL%20Product%20Monograph-19April2017-English.pdf> for further important information relating to adverse reactions, drug interactions and dosing information that have not been discussed in this piece. The Product Monograph is also available by calling Eisai at 1-877-873-4724.

References: 1. BANZEL Product Monograph. Eisai Limited. April 19, 2017. 2. Kluger G, Glauser T, Krauss G *et al.* Adjunctive rufinamide in Lennox-Gastaut syndrome: a long-term, open-label extension study. *Acta Neurol Scand.* 2010;122(3):202-208.

[†]BANZEL is a registered trademark of Novartis Pharma AG, used under licence.

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 **BANZEL**[®]
(rufinamide) 100mg, 200mg, 400mg TABLETS



hvc
human health care

We asked two CNSF members for their views on work and life . . .

Fiona Costello

Was there a defining moment that led you to choose the neurosciences as your career, and why?

I knew I wanted to be a neurologist during my second year of medical school. One of my clinical skills preceptors was Dr. Bill Pryse-Phillips (Memorial University), and after watching him perform the bedside examination on a neurology patient, I was completely hooked. He seemed to genuinely love what he did, and he was able to demonstrate clinical findings that truly awed me. I was also quite intrigued by his “pimped out” briefcase, which he had customized to hold all his neurology tools. I wanted to be just like him when I grew up! I have had many defining moments, and many defining mentors since, but Dr. Pryse-Phillips was a catalyst for me!

What was the greatest piece of advice you have received?

You’re never too junior to have the best idea in the room.

What do you do when you have down time?

I’ll let you know when I have down time.

What do you think of when you hear the words brain health?

It’s complicated.

What is your favorite book and why?

It varies by the week. Today, it is anything by Tana French. I love a good wordsmith.

Which technology could you do without?

My pager ;-)

What one thing could everyone do to stay brain healthy?

Use it. Don’t abuse it. Okay, those are two things. I think we need to challenge our brain and keep our mind active to optimize functionality. I also think we need to avoid modifiable risk factors that negatively impact the brain, to the best of our abilities. Finally, I think we have to acknowledge that health is a transient state, and accept the rest. Agonizing about health is fundamentally unhealthy.

How has your career in medicine created value in your life?

Medicine has taught me about the frailty of life. Every moment we have is a gift.

What advice would you give to someone aspiring to be successful?

I would first ask this individual what defines success for him or her. My advice would vary, depending on the response provided.



Fraser Moore

Was there a defining moment that led you to choose the neurosciences as your career, and why?

For me it was a grade 12 science enrichment project. A neuroscience project was actually my second choice, but I found the anatomy and physiology fascinating (and haven’t looked back!)

What was the greatest piece of advice you have received?

The most accurate piece of advice I ever received was that my life will only get busier every year. The most useful piece was to read and learn about time management skills.

What do you do when you have down time?

On a regular workday it is reading and exercise. On the weekend it is getting outside (hiking, canoeing, skiing, gardening, etc...). For prolonged down time it is traveling.

What do you think of when you hear the words brain health?

The ability to maintain an active mind. I think of prevention, healthy choices, and quality of life.

What is your favourite book and why?

You want me to pick just one?!? I love to read. Perhaps my recent favorite is *All the Light We Cannot See* by Anthony Doerr, for the beauty of the writing, the father-daughter relationship, and the reminder that life is precious.

Which technology could you do without?

Social media. Not that it is bad, but if it didn’t exist I wouldn’t miss it.

What one thing could everyone do to stay brain healthy?

Exercise.

How has your career in medicine created value in your life?

In two ways. Seeing people struggle with illness has made me appreciate and value everything in my own life more. Being able to provide some help to people makes me want to get up and go back to work on Monday morning.

What advice would you give to someone aspiring to be successful?

Learn to manage your time. Identify the situations where you do not do this well and learn how to do it better.



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Continuing Professional Development

The CNSF is committed to providing relevant Continuing Professional Development (CPD) opportunities to its members and to neurologists and neurosurgeons, in general.

We thank the Professional Development (PD) and Scientific Program (SP) Committees for their time, effort and energy in working collaboratively to develop the 2018 CNSF Congress Program and other external programs throughout the year.

2018 Congress Planning Committee

The Canadian Neurological Sciences Federation (CNSF) is composed of 5 Societies: Canadian Neurological Society (CNS), Canadian Association of Child Neurology (CACN), Canadian Neurosurgical Society (CNSS), Canadian Society of Clinical Neurophysiologists (CSCN) and the Canadian Society of Neuroradiology (CSNR).

Members from each of the 5 Societies have representation on our Congress planning committee(s). 2018's Congress Planning Committee is comprised of:

- Aleksandra Mineyko, CNSF PDC Chair
- Cian O'Kelly, CNSF PDC Vice Chair
- Alexandre Henri-Bhargava, CNSF SPC Chair
- Joe Megyesi, CNSF SPC Vice Chair
- Athen Macdonald, CACN PDC
- Helly Goez, CACN SPC
- Michael Esser, CACN SPC
- Shannon Venance, CNS PDC
- Amy Yu, CNS SPC
- Gerald Pfeffer, CNS SPC
- Philippe Couillard, CNS SPC
- David Mathieu, CNSS SPC
- Michelle Mezei, CSCN PDC
- Seyed Mirsattari, CSCN SPC
- Richard Aviv, CSNR SPC
- Thiviya Selvanathan, CACN Resident
- Ilana Hanes, CACN Jr. Resident
- Mark Bigder, CNSS Resident
- Michael Taccone, CNSS Jr. Resident
- Parichita Choudhury, CNS Resident
- Adil Harroud, CNS Jr. Resident
- Kesh Reddy, CNSF President
- Sharon Whiting, CNSF Vice President
- Tejas Sankar, Vice President

Informed by feedback from attendees at the 2016 and 2017 Congress, the Membership Survey completed in the fall of 2016 and other related information and feedback, the PDC and SPC met on a regular basis to develop the program for the 2018 Congress.

2018 CONGRESS

The CNSF Congress is a very collegial meeting providing opportunities to reconnect with colleagues from across the country. We provide an eclectic mix of multidisciplinary courses relevant to all neuroscience specialties.

Highlights:

- 4 full days of **accredited** sessions.
- **Diverse program** and Courses of interest for members of all neuroscience specialties.
- **Excellent speakers** including our special **Grand Plenary Speakers**: Dr Jean Raymond, Dr Mark S Freedman, Dr Robert S Fisher, Prof Thomas Opladen and Dr Wouter I Schievink.
- We offer **Lunch 'n Learns** to expand on specific topics of interest. This year's featured sessions are: Thinking Ahead, New Treatment Options for Migraine Prevention; Innovative Approaches to Surgical Resection Utilizing Modern Ultrasonic Tissue Ablation, A Case Series Discussion; The Spectrum of MS from Pediatric Data to SPMS; Sudden Unexpected Death in Epilepsy (SUDEP) and Innovation in OR Technology.

Welcome to Halifax and the 2018 CNSF Congress



WE HOPE THAT YOU ENJOY YOUR TIME HERE AND FIND VALUABLE LEARNING OPPORTUNITIES WITHIN OUR 2018 PROGRAM.



2018 Grand Plenary Speakers

Monday June 25 from 8:00 a.m. – 12:00 noon
Featuring the following special guest lecturers!



CSNR Terbrugge Lecture

Problems with the Introduction of Innovations in Neurovascular Care

Dr. Jean Raymond, MD, FRCPC

Neuroradiologist at the Centre hospitalier de l'Université de Montréal (CHUM, University of Montreal Hospital Centre) and Director of the Interventional Neuroradiology Research Laboratory, Dr. Raymond is also Full Professor in the Department of Radiology, Radiation Oncology and Nuclear Medicine at the University of Montreal.

Very active in the field of interventional neuroradiology research since 1994, Dr. Raymond has published over two hundred articles in scientific journals. He has also given numerous conferences around the world. His clinical and experimental publications have earned him international recognition among his peers and the scientific community. In 2004, he received the 'Innovation and Excellence Prize Dr Jean A. Vezina' from the Société Canadienne Française de Radiologie. In 2015, he was awarded the Canadian Association of Radiologist Gold medal for his career achievements. In 2016 he received the Luessenhop Lecturer Award.



CNS Richardson Lecture

Does Replacing the Immune System Fix Multiple Sclerosis?

Dr. Mark S. Freedman, HBSc MSc MD CSPQ FANA FAAN FRCPC
Professor of Medicine (Neurology)

Mark Freedman is Professor of Medicine (Neurology) at the University of Ottawa, Senior Scientist at the Ottawa Hospital Research Institute and Director of the Multiple Sclerosis Research Unit at the Ottawa Hospital-General Campus.

His extensive research includes molecular neurochemistry, cellular immunology, and clinical studies in MS. His basic science interest concerns immune mechanisms of damage in MS, with a particular interest in the role of the innate immune system such as gamma-delta T-cells. His main clinical interests are cell-based therapies for MS. He was the lead investigator of the Canadian Bone Marrow Transplant Study in MS and he co-heads an international study of mesenchymal stem cells for the treatment of MS. He is the current Treasurer of ACTRIMS.



CSCN Gloor Lecture

Devices for Treating Epilepsy

Dr. Robert S. Fisher, MD, PhD

Robert S. Fisher, MD, PhD is Maslah Saul MD Professor and Director of the Stanford Epilepsy Center and EEG lab.

He had research awards from the Klingenstein Foundation, Epilepsy Foundation, CURE, NIH and NSF. He has published about 225 peer-reviewed articles and 3 books. He was named every year from 1996 to 2017 in Best Doctors in America. He received the Ambassador Award from the International League Against Epilepsy, the 2005 American Epilepsy Society Service Award and the 2006 Annual Clinical Research Award. Dr. Fisher is Past-President of the American Epilepsy Society, and has served on the Board of the International League Against Epilepsy and as Editor-in-Chief of the Journal, *Epilepsia*.

He is past Editor-in-Chief of the world's most visited website about epilepsy, epilepsy.com. Dr. Fisher led the projects to develop a formal definition of who has epilepsy and an update of seizure type classification. His recent research is on new devices to detect and treat seizures. He led the clinical trials on deep brain stimulation for epilepsy and on the next-generation (heart-rate-sensing) vagus nerve stimulation device. Dr. Fisher has additionally won several teaching awards and cares for epilepsy patients in the Stanford Epilepsy Clinics and inpatient epilepsy unit.



2018 Grand Plenary Speakers

Monday June 25 from 8:00 a.m. – 12:00 noon
Featuring the following special guest lecturers!



CACN Tibbles Lecture

Neurotransmitter Disorders — Classification, Clinical Presentation and Treatment Options

Prof. Thomas Opladen, M.D.

University Children Hospital - Heidelberg Germany
Division of Child Neurology and Metabolic Medicine

Dr Opladen is a specialist Pediatric and Adolescent Medicine with specific focus in Pediatric Neurology.

Dr Opladen received his degree in Pediatrics in 2008 and went on to specialize in Pediatric Neurology, which developed to include paediatric intensive care medicine and paediatric metabolic medicine.

He was responsible for the Coordination of the iNTD network (International Working Group on Neurotransmitter related Disorders) in 2014.

He has also acted as Consultant for Child Neurology and Inborn Errors of Metabolism and was appointed Associate Professor at the University of Heidelberg in 2017.



CNSS Penfield Lecture

Spontaneous Intracranial Hypotension: Lessons Learned from the First 1000 Patients

Dr Wouter I. Schievink, M.D.

Wouter I. Schievink, MD is professor of neurosurgery at Cedars-Sinai Medical Center in Los Angeles, where he directs the vascular and CSF leak programs. After obtaining his medical degree at the University of Amsterdam, he completed his neurosurgery residency at the Mayo Clinic in Rochester, Minnesota, and a vascular fellowship at the Barrow Neurological Institute in Phoenix, Arizona.



Virtual Exhibit Hall

The online Virtual Exhibit Hall allows you to peruse the current year of CNSF Sponsors and Exhibitors.

This is an opportunity to have a closer look at all of their products and services and decide who you would like to visit in person in our Exhibit Hall on site during the 2018 Congress.

The CNSF is proud to showcase these CNSF Supporters and their contributions to the Canadian Neurological community.

veh.cnsfederation.org

2018 Congress Sessions Supported by Industry

These sessions are an opportunity for registered delegates to attend specific topics of interest and are developed by the CNSF and “Industry”. A light lunch will be served.

Pre-registration is required for each activity through the Congress registration process.

Sunday, June 24, 2018 • 12:30 pm – 2:00 pm

Lunch ‘n Learn

Thinking Ahead: New Treatment Options for Migraine Prevention

Course Co-Chairs: Suzanne Christie, Richard Leckey

Course Description: This session will discuss the burden of migraine for patients and the healthcare system, current treatments and challenges and unmet needs that exist. A review of the pathophysiology will follow to set the stage for an introduction to a new class of migraine therapy, calcitonin gene-related protein (CGRP) antagonists. To inform on this new class of therapy, we will review its mechanism of action and provide an overview of data in both episodic and chronic migraine across various outcomes including headache response and quality of life. This program will include interactive questions throughout the presentation as well as an open Q&A discussion at the end.

This program is 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, and approved by the Canadian Neurological Sciences Federation for 1.5 credits.

This program was co-developed by the Canadian Neurological Sciences Federation, Hc3 Communications and Novartis and was planned to achieve scientific integrity, objectivity and balance.

Sunday, June 24, 2018 • 12:30 pm – 2:00 pm

Lunch ‘n Learn

Innovative Approaches to Surgical Resection Utilizing Modern Ultrasonic Tissue Ablation; A Case Series Discussion

Course Chair: Gerry Grant

Course Description: Dr. Gerry Grant, will present the latest technologies in ultrasonic tissue ablation and how the adoption of advanced technologies has allowed him to optimize tissue resection in his practice. Attendees of this seminar will be educated on pathology prevalence and burden of disease, diagnosis, and available treatments with a focus on utilization of advance ultrasonic tissue ablation in novel surgical procedures. A review of cases will also be presented and discussed.

*This program was developed by the CNSF and Integra and was planned to achieve scientific integrity, objectivity and balance. It is an unaccredited learning activity and **not eligible for MOC credits.***

Monday, June 25, 2018 • 12:15 pm – 1:45 pm

Lunch ‘n Learn

The Spectrum of MS from Pediatric Data to SPMS

Course Co-Chairs: Mark Freedman, Daniela Pohl

Course Description: Pediatric multiple sclerosis and Secondary Progressive Multiple Sclerosis (SPMS) represent two particular MS subgroups with unique diagnostic challenges and many unanswered questions. Due to the narrow window of environmental exposures and clinical disease expression, they represent important groups to discuss to gain a better understanding of MS pathogenesis and optimal disease management in routine clinic practice.

*This program was developed by the CNSF and Novartis Canada and was planned to achieve scientific integrity, objectivity and balance. It is an unaccredited learning activity and **not eligible for MOC credits.***

Don't miss the Moderated Poster Sessions!

Authors with abstracts selected for electronic posters, will have an opportunity to showcase their work to CNSF Congress delegates at multiple large screen viewing stations.

At the Moderated sessions, Authors are given the opportunity to present their concepts, methods and research findings and attendees have the opportunity to ask questions.



2018 Congress Industry Supported Sessions

Monday, June 25, 2018 • 12:15 pm – 1:45 pm

Lunch 'n Learn

Sudden Unexpected Death in Epilepsy (SUDEP)

Course Chair: Seyed Mirsattari

Course Description: People living with epilepsy, who continue to experience seizures, are at greater risk of suffering serious complications. Sudden Unexpected Death in Epilepsy Patients (SUDEP) is the most common cause of death attributed to uncontrolled seizures. Neurologists play a critical role in identifying and managing patients with associated risk factors for SUDEP. During this Lunch 'n Learn, you will be exposed to some of the latest SUDEP related science and practice guidelines.

*This program was developed by the CNSF and Eisai and was planned to achieve scientific integrity, objectivity and balance. It is an unaccredited learning activity and **not eligible for MOC credits.***

Tuesday, June 26, 2018 12:00 pm – 1:30 pm

Innovation in OR Technology

Course Chair: David Clarke

Course Description: This Lunch & Learn session will focus on new and emerging OR technologies that are — or soon will be — relevant to the practice of most neurosurgical groups. The focus of the session will be on technologies that will have a significant impact on current practice patterns. Specific topics to be addressed include a new cranial robot, the Stealth Autoguide, laser ablation, as well as novel applications to spine and cranial surgery in the new O-arm.

*This program was developed by the CNSF and Medtronic and was planned to achieve scientific integrity, objectivity and balance. It is an unaccredited learning activity and **not eligible for MOC credits.***

Halifax Fast Facts

- Halifax was founded in 1749 by the Honourable Edward Cornwallis of England.
- The Old Town Clock has been keeping time since 1803.
- Halifax rents 75 hectares of oceanfront property from the British Government for Point Pleasant Park at a cost of 10 cents per year on a 999 year lease.
- Halifax has an average of 171 wet days per year.
- There are more pubs per capita in Halifax than in any other Canadian City.
- The biggest Halifax sporting event is the Scotiabank Blue Nose Marathon held each May.





Exhibitor Listings

Abbvie

Booth 212

Abbvie combines advanced science, expertise and passion to solve serious health issues and have a remarkable impact on people's lives.

Blueprint Genetics

Booth 400

Blueprint Genetics delivers quality genetics testing to the global clinical community. We provide clinicians, and their patients, with comprehensive and high-quality tools and resources for diagnostics of genetic conditions.

Cambridge University Press

Booth 411

We further the University's mission by disseminating knowledge in the pursuit of education, learning and research at the highest international levels of excellence. Cambridge University Press is the proud publisher of Canadian Journal of Neurological Sciences.

Eisai

Booth 206

Gold Sponsor

Eisai Limited (pronounced ā-zī) is the Canadian pharmaceutical subsidiary of Tokyo-based Eisai Co. Ltd, manufacturers of FYCOMPA and BANZEL. Eisai is a human health care (hhc) company seeking innovative solutions in disease prevention, treatment and care for the health and well-being of people worldwide.

GE Healthcare

Booth 303

GE Healthcare provides expertise in medical imaging and IT, medical diagnostics, patient monitoring systems, drug discovery, biopharmaceutical manufacturing technologies to help deliver better care to more people around the world at a lower cost.

GeneDx

Booth 102

GeneDx, a leader in genomics with expertise in rare genetic disorders, offers one of the broadest menus of sequencing services available and provides testing to patients in more than 55 countries.

Grifols

Booth 404

Silver Sponsor

Grifols is a global pharmaceutical company that develops and produces plasma-derived therapies and manufactures hospital pharmacy products, intravenous solutions, diagnostic tools and medical devices.

Hoffmann-La Roche Limited

Booth 301

Gold Sponsor

Roche is a leader in the research and development of pharmaceutical and diagnostic solutions that look beyond today's horizons and make a profound difference in people's lives.

Horizon Health Network

Booth 402

Horizon Health Network has an annual budget of approximately \$1.1 billion and has more than 12,600 employees, 1,100 physicians and 5,200 volunteers, auxiliary and alumnae members.

Integra LifeSciences

Booth 100

(Codman Specialty Surgical)

Silver Sponsor

Codman Specialty Surgical, a Division of Integra LifeSciences, is a global leader in neurosurgery that combines the renowned brand of Codman with Integra's leading advanced technologies and broad surgical instruments and lighting portfolio.

Invitae

Booth 106

Invitae, a genetic information company, is aggregating the world's genetic tests into a single service with better quality, faster turnaround time and a lower price than most single-gene diagnostic tests today.

KEGO Corporation

Booth 408

KEGO is your Canadian Source for Neurodiagnostic and Sleep Supplies. We are proud to offer our customers a One Stop Solution for all your product needs.

LifeLabs Genetics

Booth 208

LifeLabs is a Canadian-owned company with over 50 years of experience providing laboratory testing services to help healthcare providers diagnose, treat, monitor and prevent disease.

Medtronic of Canada Ltd.

Booth 202

Gold Sponsor

Tech Suite 203

Through innovation and collaboration, Medtronic helps to improve the lives and health of millions of people each year. Learn more about our technology, services and solutions at Medtronic.ca.

MNG Laboratories

Booth 300

MNG Laboratories is an internationally recognized clinical diagnostic leader specializing in neurogenetic and complex biochemical testing.



Exhibitor Listings

Natus Neuro Booth 210

Natus Neuro provides leading solutions for the neuro-diagnostic, neurosurgery, and neurocritical care markets.

NeuroSource Medical Booth 207

We are a Canadian-owned neurodiagnostic distribution company made up of clinical professionals with combined expertise in EMG, EEG, IONM, SEEG and Sleep.

Novartis Booth 205

Platinum Sponsor

Novartis is a global healthcare company based in Switzerland that provides solutions to the evolving needs of patients worldwide.

Recordati Rare Diseases Canada Booth 309

Recordati Rare Diseases develops high-impact therapies for devastating rare diseases. At Recordati, we focus on the few — those affected by rare diseases.

Renishaw Healthcare Inc Booth 304

Renishaw's Frameless Gen II stereotactic robot provides a platform solution for functional neurosurgical procedures. It is used for SEEG, DBS, neuro-endoscopy, biopsy, and R&D applications.

Roxon Medi-Tech Ltd. Booth 104

Roxon is an established distributor of Neurology diagnostics systems for EEG/EMG/ICU/IOM, and TMS equipment as an aid to diagnosis and monitoring of neurological diseases.

Spectrum Health Booth 302

Spectrum Health is a not-for-profit integrated health system dedicated to improving the health of the communities we serve. We provide high-quality, high-value health experiences for individual, families, employees and members.

Stryker Booth 105

Stryker is one of the world's leading medical technology companies and is dedicated to helping healthcare professionals perform their jobs more efficiently while enhancing patient care.

Sunovion Pharmaceuticals Booth 407

Sunovion Pharmaceuticals Canada Inc. is focused on the commercialization of prescription products in Canada. We are focused in the areas of central nervous system and infectious disease.

Surgi-One Medical Technologies Inc. Booth 409

Surgi-One Medical Technologies Inc. is dedicated to supplying our Canadian Hospital customers with unique and innovative Neurosurgical, Neuro Critical Care, and Spinal Products to enhance the clinician's ability to provide the best patient care available.

Synaptive Medical Booth 403

Synaptive, a medical device and technology company, pursues connections that transform the process of care. Designed in collaboration with leading clinicians, Synaptive products break down silos in and beyond the operating room.

Terumo BCT Booth 413

Terumo BCT, a global leader in blood component, therapeutic apheresis and cellular technologies. We believe in the potential of blood to do even more for patients than it does today. This belief unites our organization, inspires our innovation and strengthens our collaboration with customers.

Teva Canada Innovation Booth 401

Bronze Sponsor

Our Purpose: Improving health, making people feel better. Our promise: Understanding the many ways health impacts your life inspires us to discover new possibilities to bring medicines and more, enabling you to live better days.

Trudell Medical Marketing Limited Booth 103

With a proven history of leading customer service, clinical expertise, and innovative product offering, TMML continues to be a premier supplier of choice for Canadian hospitals and healthcare providers.

UCB Canada Booth 305

Bronze Sponsor

We have a shared ambition to transform the lives of people living with severe diseases. We focus on CNS and immunology disorders — putting patients at the center of our world.

ZEISS Canada Booth 308

Experience the innovative technologies from ZEISS that are helping neurosurgeons worldwide to expand the boundaries of care.



PARKINSON'S DISEASE

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It causes a **progressive loss of dopamine in the brain**, which can cause symptoms that include resting tremor, slowness of movement, stiffness or rigidity of muscles, difficulty with balance and walking, difficulty with fine motor movements.

*Statistics from Parkinson Canada.

First imaging agent of its kind now approved in Canada to help physicians in the diagnosis of patients with a suspected parkinsonian syndrome

DaTscan™ (Ioflupane (123I) Injection) is a radiopharmaceutical indicated for visualization of functional striatal dopamine transporter using single-photon emission computed tomography (SPECT) brain imaging. In adult patients with suspected parkinsonian syndromes (PSs), DaTscan SPECT imaging may be used as an adjunct to other established evaluations to help differentiate essential tremor from tremor due to PS related to idiopathic Parkinson's disease (PD), multiple system atrophy (MSA) and progressive supranuclear palsy (PSP). DaTscan is unable to discriminate between PD, MSA and PSP.

“The timely and accurate diagnosis of movement disorders is the first step toward optimal patient management and treatment. We are glad to bring to physicians in Canada an additional tool that can help them address the challenges associated with movement disorders, and help patients get an earlier diagnosis.”

– Marco Campione, Core Imaging General Manager of Americas at GE Healthcare

For more information, please contact 800 387 7146.

Please see additional Important Risk and Safety Information on page 27.

The Product Monograph is available by calling 1-800-654-0118 (option 2, then option 3) or visiting <http://www3.gehealthcare.com/~media/Documents/MarketoPDFsnogating/ProductMonographCanadaControlNo201481December72017>.



DaTscan™
Ioflupane I123 Injection

DaTscan™

Ioflupane I 123 Injection

Indication for Use

DaTscan (Ioflupane (123I) Injection) is a radiopharmaceutical indicated for visualization of functional striatal dopamine transporter using single-photon emission computed tomography (SPECT) brain imaging. In adult patients with suspected parkinsonian syndromes (PSs), DaTscan SPECT imaging may be used as an adjunct to other established evaluations to help differentiate essential tremor from tremor due to PS related to idiopathic Parkinson's disease (PD), multiple system atrophy (MSA) and progressive supranuclear palsy (PSP). DaTscan is unable to discriminate between PD, MSA and PSP.

Important Risk and Safety Information About DaTscan™ (Ioflupane I 123 Injection)

CONTRAINDICATIONS: DaTscan is contraindicated in patients who are hypersensitive to this drug or to any ingredient in the formulation or component of the container. **WARNINGS AND PRECAUTIONS** —

Radiopharmaceuticals should be used only by those health professionals who are appropriately qualified in the use of radioactive prescribed substances in or on humans. As in the use of any other radioactive material, care should be taken to minimize radiation exposure to patients consistent with proper patient management, and to minimize radiation exposure to occupational workers.

Hypersensitivity Reactions: Hypersensitivity reactions have been reported following DaTscan administration. Prior to administration appropriate resuscitation equipment should be available. **Thyroid Accumulation of I-123:** The DaTscan injection may contain up to 6% of free iodide (iodine 123). Accumulation of radioiodine in the thyroid gland may result in long term risk for thyroid neoplasia. To decrease thyroid accumulation of iodine 123, administer a thyroid blocking agent at least 1 hour before administration of DaTscan. **ADVERSE REACTIONS:** In clinical trials, headache, nausea, and dizziness were commonly reported as adverse events. Less commonly reported adverse events included vertigo, increased appetite, dry mouth, formication, dysgeusia and injection site pain. In postmarketing experience, serious and nonserious hypersensitivity reactions as well as reports of injection-site pain, headache, dizziness, formication (paresthesia), dysgeusia, nausea and dry mouth have been reported. **DRUG INTERACTIONS:** Drugs that bind to the dopamine transporter with high affinity can interfere with DaTscan binding, therefore may affect the images obtained. The impact of dopamine agonists and antagonists has not been established. **SPECIFIC POPULATIONS** — **Pregnancy:** Since adequate reproduction studies have not been performed in animals to determine whether DaTscan affects fertility in males or

females, has teratogenic potential, or has other adverse reactions on the fetus, this radiopharmaceutical preparation should not be administered to pregnant women unless it is considered that the benefits to be gained outweigh the potential hazards to the fetus.

Nursing Mothers: It is not known whether ioflupane (123I) is secreted in human milk, therefore, if administration is considered necessary, breast-feeding should be interrupted for 3 days and substituted by formula feeding. During this time, breast milk should be expressed at regular intervals and the expressed feeds should be discarded. **Pediatric Use:** The safety and efficacy of DaTscan in children aged 0 to 18 years has not been established, therefore DaTscan is not recommended in children. **Renal and Hepatic Impairment:** Formal studies have not been carried out in patients with significant renal or hepatic impairment. DaTscan is not recommended in cases of moderate to severe renal or hepatic impairment.

OVERDOSAGE: In cases of overdose of radioactivity, frequent micturition and defecation should be encouraged to minimise radiation dosage to the patient. Care should be taken to avoid contamination from the radioactivity eliminated by the patient using such methods. **Reporting Side Effects:** You can help improve the safe use of health products for Canadians by reporting serious and unexpected side effects to Health Canada.

Report:

- Online at MedEffect;
- By calling 1-866-234-2345 (toll-free);
- By completing a Consumer Side Effect Reporting Form and sending it by:
 - Fax to 1-866-678-6789 (toll-free), or
 - Mail to: Canada Vigilance Program Health Canada, Postal Locator 0701E Ottawa, ON K1A 0K9

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Postage paid labels and the Consumer Side Effect Reporting Form are available at MedEffect.

For more information

please consult the product monograph at <http://www3.gehealthcare.com/~media/Documents/MarketoPDFsnogating/ProductMonographCanadaControlNo201481December72017>.

The DaTscan product monograph is also available by calling 1-800-654-0118 (option 2, then option 3).



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