

your colleagues nationally, please contact Christine Charnock at christine@rheum.ca.

The CRA has established a Practice Reflection Award to encourage CRA members to develop CPD self-assessment/practice reflection programs that can be used to improve rheumatology practice in Canada. If you are interested in applying for the Award, please go to the Awards section on the CRA website for further information (www.rheum.ca/en/the_cra/Awards).

The Patient Partners In Arthritis subcommittee continues to search for a way to fund Patient Partners at the national level. The CRA turned down our request for support. We are currently negotiating with The Arthritis Society (TAS). If you have any suggestions, please contact me at penney@ucalgary.ca.

We welcome any CRA member with a special interest in CPD or other aspects of rheumatology education to join the committee. Dr. Jodie Reis, Dr. Aurore Fifi-Mah, and Dr. Dharini Mahendira have joined us this past year. We especially need members from Quebec. The CRA will pay your out of pocket expenses for training if you choose to become an accreditation reviewer. If you have a special interest in undergraduate or postgraduate education, you can join the CanREAL subcommittee. Please email me for further information.

Christopher Penney, MD, FRCPC

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Therapeutics Committee

By Shahin Jamal, BScPT, MD, FRCPC, MSc

The CRA's Therapeutics Committee has had another busy and productive year. We have been actively involved in the development of guidelines and consensus statements across therapeutic areas. We currently have groups working on dissemination and translation of rheumatoid arthritis (RA) and fibromyalgia (FM) guidelines, development of consensus statements for vasculitis and systemic lupus, and updates on guidelines for management of spondyloarthropathies. There is also discussion on the development of Canadian guidelines for pregnancy in rheumatic diseases and osteoarthritis (OA). Through the Therapeutics Committee, the various groups have been able to work together to share resources, methodology, and manpower. In September 2013, we held a successful stakeholders meeting to discuss development of a unified framework for disseminating and measuring uptake of guidelines in rheumatology; this was funded by a Canadian Institutes of Health Research (CIHR) small-group-meeting grant and chaired by Dr. Claire Bombardier. We have also approached expert Canadian epidemiologists from McMaster University to assist in the development of unified guideline development methodology.

The CRA RA guidelines were published in the *Journal of Rheumatology (JRheum)* in August 2012. These are currently in the process of translation into French. An E-Recommendations Program has now been developed in

conjunction with mdBriefcase. There are also multiple dissemination activities underway including a question-and-answer series in the *CRAJ*. A slide deck is available through the CRA to any individuals interested in presenting the guidelines to their local colleagues.

The Canadian Systemic Lupus Erythematosus (SLE) Consensus Working Group had their first face-to-face meeting following the CRA Annual Scientific Meeting (ASM) in Ottawa in February 2013; this too was funded by a CIHR small-meeting grant. The meeting was very successful and brought together rheumatologists and lupologists from across Canada. Priority topics and questions were identified based on a needs assessment that was distributed to the CRA membership in December 2012. The SLE Working Group is now conducting a systematic literature review, hoping to be completed in early 2014. With this, they will develop a Canadian Consensus statement on SLE management.

The Canadian Vasculitis Research Network (CANVASC) is working on recommendations for the management of anti-neutrophil cytoplasmic antibody (ANCA)-associated vasculitis. A needs assessment of the CRA membership was completed in spring 2013, followed by a systematic literature review and production of a first two drafts of recommendations. The final draft, with involvement of a broad spectrum of specialists, should be completed by the second quarter of 2014.



The genial members of the Therapeutics Committee.

The Canadian FM Guidelines (endorsed by the Canadian Pain Society and CRA) have received great international interest and accolade. They are available in both English and French. Multiple manuscripts have been prepared and submitted, including a publication in the *Canadian Medical Association Journal (CMAJ)* in May 2013. Dr. Mary-Ann Fitzcharles presented the FM guidelines at the American College of Rheumatology (ACR) Meeting in San Diego in October 2013. There is a slide kit available for use by any individuals interested in presenting the guidelines to their local colleagues.

The Spondyloarthritis Research Consortium of Canada (SPARCC) held a meeting in May 2013 to begin the process of updating the CRA/SPARCC Treatment Recommendations for the Management of Spondyloarthritis, which were published in 2007. The group identified topics for update and is currently engaged in a systematic literature review. They are hoping to have a completed manuscript in early 2014.

In addition to guidelines, the Therapeutics Committee has been engaged in acquisition of data to improve patient access to appropriate therapeutics. Over the past few years, there has been increasing difficulty accessing subcutaneous methotrexate due to its listing as a cytotoxic agent,

particularly in institutional environments. A systematic review was conducted on the safety of subcutaneous methotrexate administration at the low doses common in rheumatology. The results were presented in poster form at the CRA ASM and full paper publication is in progress. At our meeting in Ottawa in February 2013, we were fortunate to have a special guest, Agnes Klein from Health Canada, in attendance. With her guidance and expertise, we continue to work towards changing the listing for low-dose methotrexate at the Health Canada level. We are also actively engaging other relevant professional societies, such as nursing, pharmacy, and occupational health.

The Therapeutics Committee has been involved in multiple other emerging issues. We are working with the Pediatrics Committee of the CRA to try to improve access to triamcinolone hexacetonide for intra-articular injection. We have been actively involved in defining the role of cannabinoids in rheumatic diseases. A needs assessment was distributed to the membership in spring 2013, which has since been summarized; a policy/consensus statement is in progress. We have also been keeping up to date with the progress of subsequent-entry biologics and their potential arrival in Canada.

Based on activities of the past year, I have no doubt that Therapeutics will continue to be an exciting and interesting committee to chair. I feel fortunate to have such amazing and enthusiastic colleagues who continue working hard to improve rheumatology in Canada. Sincere thanks to all of our passionate members for their time and dedication; I would also like to thank Christine Charnock, the CRA Board, and the Executive for their support. We are always looking for new members to become involved. Please email me at shahin.jamal@vch.ca if you are interested.

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Nominations Committee

By Jamie Henderson, MD, FRCPC

The Nomination Committee is composed of Past-Presidents of the CRA. It is chaired by the immediate Past-President, a role I presently occupy. Its traditional role has been to identify prospective board

members and invite them to join the board of the CRA. Every two years the Committee must identify an individual to join the executive committee as Vice-President for a two-year term. This individual would assume the presidency in