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Sunday, May 20, 2012

WS #1

Novel Office-Based Procedures in the Treatment of Chronic Sinus Disease – A. Janjua, Francois Lavigne, D. Micomonaco, Sault Ste Marie, ON

Learning Objectives

1. By the end of the workshop, the audience will be familiar with novel technologies and devices used in the office-based treatment of chronic sinus disease. 2. By the end of the workshop, the audience will understand appropriate indications and patient selection for each of these novel therapeutic options. 3. By the end of the workshop discussion, the audience will have gained an understanding and familiarity with the required instrumentation, operative technique, and surgical challenges in the employment of these novel, minimally-invasive treatment options.

An era of increasingly limited operative resources and societal/patient interest in 'non-surgical' treatment options has fostered the development of minimally-invasive, office-based treatment option for the management of chronic sinus disease. These techniques may be specifically applicable to the treatment of 'early' or 'mild' chronic sinus disease prior to embarking on definitive endoscopic surgery, or aimed at patients with chronic rhinosinusitis refractory to prior standard endoscopic surgery and ongoing medical treatment. This workshop will provide an overview of the armamentarium of office-based treatment options in the management of the chronic rhinosinusitis patient. This will include the use of indwelling catheters/drug-delivery system placed into the maxillary and/or ethmoid sinuses for the prolonged delivery of topical medications (by majority, topical steroids and/or topical antibiotics), drug-eluting stenting devices, balloon sinusotomies in the office setting, in-office mechanical treatments to address biofilms and "mini-FESS" procedures performed under local anesthetic in an out-patient clinic. Discussion will include a complete overview of the theory, devices and procedures. This will include a discussion about proper patient selection, patient preparation, operative technique, appropriate utilization of these novel technologies and how to anticipate and address specific challenges in the office setting.

WS #2

Difficult Upper Airway Cases – T. Brown, Halifax, NS; K. Fung, London, ON; M. Allegretto, Edmonton, AB; D. Bosch, Calgary, AB; K. Kost, Montreal, QC; L. Johnson, Halifax, NS

Learning Objectives

By the conclusion of this workshop on the management of difficult upper airway cases, participants will be able to: 1. Accurately identify and appropriately triage for management the patient presenting with upper airway obstruction from a variety of causes, including but not limited to subglottic, posterior glottic or supraglottic stenosis, and bilateral vocal cord immobility. 2. Be able to appreciate the importance of balancing airway with other laryngeal functions including voice and airway protection. 3. Be aware of the appropriate investigations required prior to embarking on any surgical intervention. 4. Consider both endoscopic and open surgical corrections for difficult upper airway cases.

Objectives: By the conclusion of this workshop on the management of difficult upper airway cases, participants will be able to: 1. Accurately identify and appropriately triage for management the patient presenting with upper airway obstruction from a variety of causes, including but not limited to subglottic, posterior glottic or supraglottic stenosis, and bilateral vocal cord immobility. 2. Be able to appreciate the importance of balancing airway with other laryngeal functions including voice and airway protection. 3. Be aware of the appropriate investigations required prior to embarking on any surgical intervention. 4. Consider both endoscopic and open surgical corrections for difficult upper airway cases. Methods: Case presentation and management options discussed by panelists with active audience participation encouraged. Conclusion: Patients presenting with upper airway obstruction secondary to scarring in the larynx/trachea or due to bilateral vocal cord immobility can be challenging to manage. Treatment is often surgical but a wide variety of techniques and modifications are available depending on the specific cause of obstruction. A delicate balance must be struck between all of the functions of the larynx, including its role in respiration, protection and phonation. Difficult cases will be introduced and then discussed by panel members with audience participation highly encouraged.

WS #3

The Emerging Role of Biomarkers in the Evaluation and Treatment of Head and Neck Squamous Cell Carcinoma – S. Chandarana, J. Dort, A. Nichols, F.-F. Lui, Calgary, AB

Learning Objectives

1. By the end of this session, the learner will have an understanding of the role biomarkers play in the evaluation of patients with head and neck squamous cell carcinoma. 2. By the end of the session, the learner will have an understanding of the techniques used to discover biomarkers and evaluate their expression in head and neck squamous cell carcinoma. 3. By the end of the session, the learner will have an understanding of how biomarkers can stratify patients based on prognosis, and help to guide tailored treatment. 4. By the end of the session, the learner will be introduced to some the work that is underway at respective Canadian centres, in an attempt to foster collaboration.

Due to the complexity of the tumour biology, two tumours, although clinically similar, may behave very differently. Biomarkers expressed by head and neck squamous cell carcinoma can serve as an adjunct to current staging systems, and can be predictive and prognostic. Further, these biomarkers may enhance the ability to tailor treatment to the individual patient. While biomarker investigation is in its infancy, significant advances have been made in the areas of marker discovery and utilization of technology. Prospective multi-centre trials using biomarkers to select for treatment are currently in the planning phase. This workshop will provide an overview of the emerging role and clinical utility of biomarkers in the contemporary management of head and neck cancer. Expert panelists will share some of the work done at their respective centres. Specific candidate markers, advances in the technology that enable high-throughput analysis, and preliminary findings that can lead to clinical trials will be discussed. Finally, as biomarker investigation relies extensively on infrastructure and resources, a model for collaboration between Canadian centres will be highlighted.

WS #4

Early Glottic Cancer: Radiate or Operate? – K. Kost, Montreal, QC; K. Fung, London, ON; M. Allegretto, Edmonton, AB; D. Bosch, Calgary, AB; D. Eibling, Pittsburgh, PA; T. Brown, Halifax, NS

Learning Objectives

At the end of this workshop on early glottic cancer, participants will: 1. Review the staging and management options. 2. Appreciate the effects of treatment on voice. 3. Understand how site of lesion affects choice of treatment. 4. Appreciate the controversies regarding management through interactive case presentations.

Objectives: At the end of this workshop on early glottic cancer, participants will: 1. Review the staging and management options. 2. Appreciate the effects of treatment on voice. 3. Understand how site of lesion affects choice of treatment. 4. Appreciate the controversies regarding management through interactive case presentations. Methods: Patients with glottic cancer often present early with dysphonia. In the early stages, this disease is both highly treatable and curable with unimodality therapy consisting of either surgery or radiotherapy. Vocal quality may be affected by the location of the lesion as well as by the choice of treatment. There exists ongoing and heated debate over which treatment to select in particular cases. The workshop will be introduced with a brief review of the literature. Controversies in decision-making will be highlighted and discussed through case presentations. Audience participation will be both welcome and encouraged. Conclusions: The treatment of early glottic cancer continues to be debated in the literature and amongst surgeons and radiation oncologists. Both modalities have their place but deciding which to use in any one particular situation is not always clear. In this workshop, the results of both will be reviewed with respect to treatment morbidity, voice and cure. Case presentations will be used to generate discussion and highlight these major issues.

WS #5

The Best Articles of the Last Year in Otolaryngology for the General Otolaryngologist – J.P. Vacanni, M. Corsten, S. Kilty, D. Schramm, Ottawa, ON

Learning Objectives

By the end of the session, the audience member will be able to identify three new and important publications which have been published during the last year in the subspecialty domains of oncology, rhinology, otology and pediatrics. By the end of the session, the audience member will be able to understand how the findings of these published articles can impact their clinical practice.

Objective: To provide a review of the most recent literature for the general otolaryngologist by reviewing the best practical articles published during the last year (between May 2010 to May 2011) in four subspecialty domains of Otolaryngology-Head & Neck Surgery: oncology, rhinology, otology and pediatrics. Methods: All articles published in a particular domain will be reviewed by one academic surgeon practising in this subspecialty. From the initial Medline search the top three to four articles per subspecialty will be chosen for presentation. The articles presented will be chosen in part based on their general applicability for an Otolaryngologist-Head & Neck surgeon with a general practise. Results: The panel of experts will provide a review of the most relevant articles in the subspecialties of oncology, rhinology, otology and pediatrics. Conclusions: The audience member will be well informed about the most relevant practical publications in each of the 4 subspecialties in the past year.

WS #6

An Evolution in Endoscopic Skull Base Surgery – T.L. Smith, Portland, OR

No abstract available.

WS #7

Northern Otolaryngology Out-Reach Across Canada – B. Blakley, Winnipeg, MB

Learning Objectives

After this presentation attendees will: 1. have a better understanding of the extent and difficulties encountered in providing otolaryngology care to northern and remote communities and 2. be able to discuss ways of improving otolaryngology health in these communities.

Canada is a large country with unique experience in northern medicine. Smaller surgical specialties such as Otolaryngology experience particular challenges in providing care to northern environments. This presentation will summarize Canadian efforts to provide otolaryngology services to sparsely populated, northern communities. Speakers from across the country will describe where and what services are provided, advantages and shortcomings of various approaches with a view to improving services. Format: Each of six speakers (6 minutes each) will describe the situation in their province, followed by questions from the audience – 6 minutes.

WS #8

Pitfalls of Endoscopic Sinus Surgery - Avoiding and Managing Complications – D.D. Sommer, Hamilton, ON; E. Massoud, Halifax, NS; J. Lee, B. Rotenberg, London, ON

Learning Objectives

1. Determine the important features on pre-operative imaging that predispose patients to complications in endoscopic sinus surgery. 2. Determine preoperative patient factors which may predispose patients to increased risk of intraoperative bleeding in endoscopic sinus surgery. 3. Counsel patients regarding risks of endoscopic sinus surgery. 4. Establish a management approach to specific complications encountered during endoscopic sinus surgery.

This is a Rhinology focused workshop discussing risk avoidance and management in endoscopic sinus surgery. The presenters will present a case with a complication or impending complication and then discuss this with the other presenters and audience. Suggested cases include excessive bleeding intra-operatively, orbital injury and CSF leak. Presentations will include intraoperative photos, videos and CT/MRI as appropriate. Discussion will be aimed at complication avoidance/prevention as well as operative and peri-operative steps to manage the situation. The workshop is aimed at general otolaryngologist as well as residents.

WS #9

Testing a Research Hypothesis: A Biostatistics Primer – D. Schramm, T. Ramsay, Ottawa, ON

Learning Objectives

Relevance and Purpose: This course will allow otolaryngologists to understand the fundamentals of biostatistics necessary to conduct and interpret clinical research. Objectives: At the conclusion of the workshop, participants will be able to: Describe methods used to present and depict continuous and discrete data. Point out assumptions made with the use of inferential statistics. Utilize the “synopsis of statistical tests” provided to be able to consider which statistical test is most appropriate for a particular set of data.

Valid clinical research is the foundation of Evidence-Based Medicine. An understanding of the fundamentals of biostatistics is essential for conducting and interpreting clinical research. This workshop will provide an overview of the proper use of statistical tests to analyze continuous and discrete data in order to draw valid conclusions. Descriptive statistics are used to summarize data. This workshop will discuss common techniques to present and describe data such as the distribution, central tendency, and dispersion or spread of values. Methods to determine if a data sample has a normal (Gaussian) distribution are outlined. Techniques to present and describe categorical data are reviewed. Development of a clear testable hypothesis is central to any research study. Inferential statistics are typically used to make predictions based on a data sample and test research hypotheses. Assumptions made with the use of inferential statistics will be discussed. Statistical tests to compare the mean or median of a data sample to a hypothetical value are described. Common parametric and nonparametric statistical methods used to compare two or more paired and unpaired groups will be reviewed. The rationale for the need to adjust for multiple statistical comparisons will be presented. Statistical tests used to compare samples of binomial data are described. Management of “time to event” (survival) data will be summarized. The workshop will conclude with a “synopsis of statistical tests” generally utilized with various types of data in order to guide participants in the correct choice and interpretation of statistical tests.

WS #10

Using Ultrasound to Make Yourself a Better Surgeon – M. Coltrera, Seattle, WA

No abstract available.

Monday, May 21, 2012

Mini WS #1

A Guide to the Diagnosis and Management of Occupational Rhinitis – R. Castano, Montreal, QC

Learning Objectives

Upon completion of this mini-workshop, participants will be able to describe the current concepts of OR with regard to its early recognition, the recommended diagnostic approach and the management of this condition

Objectives: Occupational rhinitis (OR) is becoming a highly prevalent occupational disease in developed countries. There is a raising interest in OR because it is more frequent than occupational asthma, it has important impact on work productivity and it is regarded as a risk factor for occupational asthma. The diagnosis of OR is still a challenge because it is based on a stepwise approach in which depth of investigative methods may vary depending on available resources. This mini-workshop is designed to raise awareness on OR by discussing current concepts to familiarize otolaryngologists with this important but often neglected upper airway condition. Methods: The presenter will address general aspects of OR but the main focus will be on the early recognition, the diagnosis and the management of OR based on current published guidelines. The presentation will be supplemented with practical examples illustrating the specific inhalation challenge methodology used at a tertiary referral hospital with international recognized expertise in the evaluation of occupational respiratory diseases to confirm a suspected case of OR. Results: The participants should come away from the session with a better understanding on the importance of OR; the steps required to make an accurate diagnosis, and the recommended approach to management. Conclusion: OR is a type of rhinitis that should be considered for the differential diagnosis in patient complaining of rhinitis symptoms. In this presentation we give direction on the steps required for its suspicion as well for the proper investigative approach.

Mini WS #2

Assessing and Recording the Ear in 3-D – D. Pothier, Toronto, ON

Learning Objectives

At the end of the workshop, attendees will be able to better understand the anatomy of the middle ear space in three dimensions. After the workshop, attendees will understand the way 3-D images can be constructed from 2-D images / photographs. After the workshop attendees will be able to produce stereograms and anaglyphs of ear images. 3-D anaglyph red/blue glasses will be provided for each attendee. Attendees will be able to understand the role of 3-D documentation in improving the clinical record of patients' pathologies.

The tympanic membrane and the middle ear are complex structures with variations in anatomy that can be difficult to properly appreciate, particularly by those new to Otology. The auriscope affords us a quick look at these structures, but only in two dimensions. The microscope allows a three dimensional assessment, but this cannot be recorded easily and gives a limited view. It is possible to use digital photography to construct a three dimensional view of the ear using a number of possible techniques. These include

anaglyphs, stereograms and animated GIF technology. The advent of new technology incorporating 3D ready inputs allows the otologist to photograph the ear in such a way that the complex three dimensional structures of the ear can be appreciated pre and post operatively as well as during otologic surgery. This workshop will demonstrate the techniques that can be used to achieve these goals and will provide glasses that will allow attendees to view stereograms and anaglyphs.

Mini WS #3

Incidence, Over Diagnosis and Lead Time Bias: Epidemiology Meets Thyroid Cancer – S. F. Hall, Kingston ON

No abstract available.

WS #11

“Dizzy Gillespie to Hitchcock”: A Clinical Approach to Dizziness & Vertigo – B. Westerberg, D. Nunez, Vancouver, BC; J. Rappaport, Montreal, QC; D. Pothier, Toronto, ON; M. Bance, Halifax, NS

Learning Objectives

At the conclusion of the talk, the General Otolaryngologist-Head and Neck Surgeon should be able to: 1) recognize the symptoms of dizziness (vertigo) attributable to conditions affecting the ear; 2) recognize that dizziness can also be a manifestation of underlying neurological, cardiovascular or psychiatric pathology; 3) recognize psychopathology that can be associated with dizziness.

Objective: to review appropriate approaches to manage patients with complaints of subjective dizziness. Participants: this workshop is designed to meet the requirements of General Otolaryngologists who evaluate and manage patients with dizziness. Workshop Outline: A) Using clinical vignettes and informal discussion, case examples of patients with common and uncommon causes of dizziness will be discussed; B) The panel will be presented clinical examples of patients with dizziness and asked to recommend a clinical approach, to include clinical assessment, appropriate use of investigations (audiovestibular and imaging), and medical and surgical management options; C) Attendees will have the opportunity to ask questions of the panelist regarding patients under their care with challenging complaints of dizziness.

WS #12

Expanded Endonasal Surgery of the Skull Base: Indications, Approaches and Reconstructive Options – M. Corsten, A. Kassam, Ottawa, ON

Learning Objectives

By the end of the session, the Otolaryngologists attending will be able to consider the appropriate treatment algorithm for comprehensive management of skull base lesions, including the indications for endoscopic skull base surgery vs. open approaches. By the end of the session, the Otolaryngologists attending will be able to understand the standard endonasal maneuvers that create a surgical corridor for expanded endonasal skull base surgery. By the end of the session, the Otolaryngologists attending will be able to consider appropriate options for reconstruction of the skull base after expanded endonasal skull base surgery, including grafts, local vascularized flaps, and free tissue transfer.

OBJECTIVES: A wide variety of benign and malignant lesions of the ventral skull base can now be treated using expanded endoscopic endonasal approaches. These procedures require close cooperation between Otolaryngologists-Head and Neck Surgeons and our Neurosurgical colleagues. This workshop will be presented by a Neurosurgeon/Head and Neck Surgeon team who collaborate on these expanded endonasal surgeries. The presenting Neurosurgeon has personal experience of over 1200 of these cases. The objectives of the presentation are: 1. To review the indications for expanded endonasal skull base surgery, and discuss the decision algorithm for treatment of benign and malignant lesions of the pituitary fossa, anterior skull base, petrous apex, nasopharynx, orbit, clivus, and cranio-cervical junction. 2. To review the techniques for providing endoscopic access of expanded endonasal skull base surgery. 3. To review the reconstructive options for extended endoscopic skull base surgery, including grafts, vascularized nasoseptal flaps, and free tissue transfer. METHODS: A 90 minute didactic workshop incorporating clinical cases, including surgical videos will be presented.

WS #13

Facial Aesthetics: A Comprehensive Review of Aesthetic Facial Plastic Surgery – M. Brandt, Toronto, ON; C. Moore, London ON; S. M. Taylor, Halifax, NS; D. A.F. Ellis, Toronto, ON

Learning Objectives

Participants will understand the complexities associated with aesthetic facial analysis. Participants will appreciate the various methods of forehead lifting and their respective benefits, limitations, and complications. Participants will become familiar with the principles of orbital and eyelid rejuvenation. Participants will gain a fundamental understanding of the various rhytidectomy and neck rejuvenation techniques including their benefits and limitations. At the completion of this session, participants will be prepared to evaluate the aging face and better equipped to formulate a comprehensive surgical treatment plan.

Objectives: Facial Plastic & Reconstructive Surgery is a vital component of Otolaryngology – Head and Neck Surgery. Although facial plastic surgery is prominent within our specialty, aesthetic facial analysis and rejuvenation procedures are both anxiety provoking and unfamiliar to Otolaryngology – Head and Neck Surgery trainees and some practicing Otolaryngology – Head and Neck Surgeons. A specialist panel will present a comprehensive review of aesthetic facial plastic surgery. Methods: A panel of specialists will present a comprehensive review of facial analysis, upper facial rejuvenation, and rhytidectomy/lower facial rejuvenation. Complications associated with these techniques, their practical limitations, and “tricks of the trade” will be discussed. Conclusions: Aesthetic facial procedures are challenging, rewarding, and valuable components of Facial Plastic & Reconstructive Surgery and Otolaryngology –

Head and Neck Surgery as a whole. This practical workshop will endeavor to equip Otolaryngology – Head and Neck Surgery trainees and practicing Otolaryngology – Head and Neck Surgeons with the fundamentals of aesthetic facial surgery.

WS #14

The M-Arch Model and Managing the Crooked Nose – P. Adamson, Toronto, ON

Learning Objectives

• To describe the dynamic anatomy of the nasal tip by applying the M-Arch Model concept such that rhinoplasty surgeons can diagnose tip deformities and select appropriate techniques to create an ideal tip. •To illustrate the application of the M-Arch Model through video clips and patient results. • To challenge the participants' diagnostic and therapeutic acumen following the presentation through a select number of cases for interactive discussion.

This course presents a holistic approach to understanding the anatomy and dynamics of the nasal tip in rhinoplasty. The major aesthetic parameters of the nose are defined, the traditional tripod concept presented, and The M-Arch Model described in detail. Emphasis is placed on accurate analysis of the length of the M-Arch, which is constituted by the medial, intermediate and lateral crura, and the various methods by which the M-Arch can be lengthened, shortened, or refined. The surgical techniques are described in detail, along with video clips, to show how the major tip parameters of length, rotation and projection can be altered and the lobule refined in an accurate and reproducible manner. Special emphasis is placed on vertical division of cartilage, tip suturing and cartilage grafting techniques. Illustrative diagrams of representative patients will show the results of integrating these manoeuvres. An eclectic approach, utilizing the surgeon's personal experience with the open approach, will be emphasized.

Mini WS #4

Surgical Management of the Aging Forehead – P. Adamson, Toronto, ON

Learning Objectives

•To describe the various surgical techniques to rejuvenate the aging upper face. •To compare the indications for each technique to enable selection of the most appropriate procedure. •To illustrate results and discuss current philosophy.

This presentation describes the surgical anatomy of the forehead and pertinent signs of aging. Various surgical techniques are organized into the coronal forehead lift and modifications, direct brow lift and modifications, and endoscopic forehead lifting. The trichophytic forehead lift, endoscopic and direct brow lifts are illustrated with video. Patient results are discussed and indications for procedure selection are determined. A review of our application of these various procedures is presented.

Mini WS #5

Progressive Facelift – P. Adamson, Toronto, ON

Learning Objectives

•To review the major types of face lift procedures being performed today. •To compare the various procedures with respect to surgical technique, indications, contraindications and outcomes. •To demonstrate the application of these concepts and techniques through patient results.

This course describes the various minimal and extended facelift procedures being performed today, outlining their advantages, disadvantages and applications. Surgical video illustrates several of these techniques, and pre- and post-operative patient results allow an evaluation of their efficacy. A review of the instructor study of results achievable with the plication, imbrication and deep plane face lift techniques is presented.

WS #15

Facial Reconstruction: A Specialist Panel on the Contemporary Reconstruction of the Face – M. Brandt, Toronto, ON; S. M. Taylor, Halifax, NS; C. Moore, London, ON; K. Higgins, Toronto, ON; K. Ansari, H. Seikaly, Edmonton, AB

Learning Objectives

Participants will appreciate the functional and aesthetic considerations required to achieve a successful facial reconstruction. Participants will appreciate the array of techniques possible in repairing cutaneous and soft-tissue defects of the face. Participants will be prepared to evaluate the benefits, limitations, and complications of different facial reconstructive options. At the completion of this workshop, participants will be better equipped to reconstruct cutaneous and soft-tissue defects presenting to their Otolaryngology – Head and Neck Surgery practice.

Objectives: From local-flaps to microvascular free-tissue transfer, the reconstruction of facial defects is both complex and creative. Although the Otolaryngology – Head and Neck Surgeon has a thorough understanding of the options available for reconstruction, choosing the best option can be challenging. A specialist panel of reconstructive surgeons from across Canada will individually discuss their approach to the reconstruction of a variety of cutaneous and soft-tissue defects of the face. Methods: A panel of specialists will submit a series of common and challenging cutaneous and soft-tissue defects of the face. Members of the panel will individually discuss the approach they would take in reconstructing each presented defect. Once all panelists have had a chance to discuss the defect, the submitting panelist will then take the audience and the remaining panelists through the steps of their reconstruction. The panel will focus on common defects applicable to any Otolaryngology – Head and Neck Surgery practice. Benefits, limitations, and "tricks of the trade" for reconstructive options will be discussed. Conclusions: The head and neck is a vital body region that requires consideration of both function and aesthetics when selecting the most appropriate reconstruction for a cutaneous and/or soft-tissue defect. This practical workshop will endeavor to present a variety of common, yet challenging defects, familiarizing its attendees with the knowledge, understanding, and practical advice to approach these problems in their own practice.

Tuesday, May 22, 2012

WS #16

Endoscopic Surgery of the Orbit and the Lacrimal System – E. Massoud, Halifax, NS

Learning Objectives

Attendees will become familiar with: - The endoscopic anatomy of the orbit and the lacrimal system.- the various indications for endoscopic orbital and lacrimal surgery. - The endoscopic orbital and lacrimal surgical techniques. - The potential pitfalls and difficulties that may be encountered and ways to avoid them.

Introduction: The scope of endoscopic sinus surgery has long expanded beyond its earlier indications for the surgical management of inflammatory sinus diseases. Many Otolaryngologists are faced with patients referred for other problems related to the sinonasal complex including orbital and lacrimal pathology. Orbital decompression for periorbital sepsis, thyrotoxic orbitopathy or extraconal orbital tumors require the endoscopic surgical expertise of the Otolaryngologist. Endoscopic dacryocystorhinostomy (DCR) and conjunctivodacryorhinostomy are starting to be favoured by many referring physicians and patients not only because of the incisionless approach but also because of the better visualization of the intranasal portion of the procedure. Surgical skills in this area are becoming more and more expected of the Otolaryngologist performing endoscopic sinus surgery. Workshop Outline: This is an interactive workshop. We will start by a brief introduction of the anatomy and review various indications for endoscopic orbital and lacrimal surgery. A description of the operative techniques will be accompanied by video demonstrations of several cases. This will be an opportunity to share expertise with the audience and discuss possible pitfalls and ways to avoid them. It is our hope that, by the end of the workshop, attendees will become more comfortable with the basic concepts of orbital decompression and with various surgical techniques in endoscopic lacrimal surgery.

WS #17

Zenker's Diverticulum: An In-depth Review of Current Treatment Options and Outcomes. Open vs Endoscopic CO2 Laser, GIA, Harmonic Scalpel and Gastroscopic Needle Knife – E. Zhang, M. Hier, E. Sela, A. Mlynarek, M. Black, R. Payne, Montreal, QC

Learning Objectives

1) Participants will understand the pathophysiology, anatomy, and treatment of Zenker's diverticulum. 2) Attendees will appreciate current treatment options including open versus endoscopic: stapling, CO2 laser, harmonic scalpel techniques, gastroscopic needle knife. 3) Participants will become aware of the advantages and pitfalls of each technique, as well as associated complications. 4) Attendees will explore the possibilities of using flexible endoscope in treating Zenker's diverticulum.

Objectives: The treatment of Zenker's diverticulum has evolved over the years and ranges from open diverticulectomies to endoscopic approaches. The purpose of this workshop is to review the current management of Zenker's diverticulum and to look at the pros and cons of each approach. Methods: A discussion of different treatments for Zenker's diverticulum will take place. There will be a review of anatomy and pathophysiology. A study performed on 27 patients in our institute will be presented comparing open versus endoscopic techniques. An in-depth analysis will take place looking at open diverticulectomy, and the modern endoscopic methods involving the GIA stapler, CO2 laser, the harmonic scalpel and the gastroscopic needle knife. These methods will be further explained through the use of video footage. A discussion will take place regarding the benefits and pitfalls of each method, with emphasis on time of surgery, hospital stay, costs, recurrence rates and complications. Differences between rigid and flexible endoscopes will also be highlighted. Conclusion: The workshop will attempt to better familiarize attendees about Zenker's diverticulum and current day treatment. The attendees of the workshop should come away with a better understanding of the various treatment options for Zenker's diverticulum, the benefits and pitfalls of each approach, and the possible complications.

WS #18

Advances in the Management of the Patient with Chronic Rhinosinusitis?: An Expert Approach to Common Problems – M. Desrosiers, Montreal, QC; I.Witterick, Toronto, ON; E. Wright, Edmonton, AB; S.Kilty, Ottawa, ON; A. Janjua, Vancouver, BC

Learning Objectives

Upon completion of this workshop, the participating otolaryngologist clinician will: 1) Have a better understanding of the pathogenic mechanisms in CRS and understand how research findings may or may not influence clinical care. 2) Know how to incorporate novel biomarkers and imaging modalities into routine clinical care. 3) Choose among available and emerging management options to select the optimal therapy for the patient with routine and complicated CRS.

The patient with chronic sinusitis remains a challenge for the otolaryngologist-head and neck surgeon. Both disease and technology have evolved, and the community practitioner is now routinely confronted with both patients with CRS refractory to medical and surgical therapy, and a dizzying array of technologic advancements for diagnosis and therapy. Investigation of the patient is rapidly evolving, with both "personalized medicine" using biomarkers and office-based CT scans proposed as diagnostic tools. Emerging evidence on the pathophysiology of chronic rhinosinusitis suggests an increased role for bacteriologic factors in disease and wide variety of novel therapeutic options are now available. Surgery continues to evolve, with both minimally invasive techniques and maximally invasive surgeries recommended as potential surgical options. With such an impressive variety of resources to draw upon, the practitioner may have difficulty identifying and selecting optimal, cost-effective options for the individual patient. Particular issues of concern are whether basic research findings actually impact clinical care, and which technological advances truly represent advantages for the patient in the Canadian healthcare environment. In this interactive, case-based discussion panel, an expert group discuss two common clinical scenarios commonly seen in ENT practice. Drawing on both evidence-based recommendations for management and their combined clinical expertise, they discuss how to incorporate emerging knowledge of pathophysiology and advances in technology into the management of the patient with "routine" sinus disease. In order to maximize interaction, this entire panel will be devoted to discussion between panelists and the audience.

WS #19

Contemporary Management of Acoustic Neuromas – J. Hochman, Winnipeg, MB; J. Chen, V. Lin, M. Schwartz, Toronto, ON;

Learning Objectives

1. By the end of the panel presentation the attendee will have been exposed to the common presentation of acoustic neuroma as well as requisite typical investigations. 2. By the end of the panel presentation the attendee will be familiar with a) the common strategies employed in acoustic neuroma management and b) possible adverse consequences associated with each option. 3. By the end of the presentation the attendee will have been exposed to controversies and divergent opinion with respect to the utility of radiosurgery in management of acoustic neuromas.

Developments in the fields of micro-surgical resection and stereotactic radiosurgery during the past decade have redefined the classic treatment algorithm. Radiosurgery has now become a therapeutic preference for many and the historic surgical emphasis on preservation of life and total tumor excision evolved with increasing degrees of precise functional preservation. As a corollary, many neurologists are now trained in both conventional micro-surgery and radiosurgery. We aim to undertake a case based, interdisciplinary panel presentation, addressing indications for treatment as well as morbidity of therapy and ultimate tumor control. Specific focus will be directed at the role of radiosurgery in tumor management.

WS #20

Practical Application of Fibre-optic Evaluation of Swallowing (FEES) in Head and Neck Oncology – T.W. Matthews, J. Dort, A. McDonough, Calgary, AB

Learning Objectives

At the conclusion of this workshop participants will: 1. Understand the rationale, infrastructure requirements, technical components and interpretation of FEES. 2. Appreciate the advantages and limitations of FEES in swallowing assessment. 3. Understand how to implement the FEES examination in an office setting. 4. Recognize the importance of real-time data collection to generate outcomes reports suitable for quality assurance and research. 5. Understand the principles of designing and implementing a clinical data collection system for FEES.

Objective: The primary goal of this workshop is to demonstrate the practical application of Fibre-optic Evaluation of Swallowing (FEES) in the evaluation of dysphagia, swallowing rehabilitation, and dietary counselling in head and neck oncology patients. Practical and efficient data collection for quality assurance and research in this clinical setting will be demonstrated. Practical advice on designing and implementing such a system will be provided. Course Outline: FEES in an Otolaryngology- Head and Neck Surgery practice will be presented including: 1. Review of the procedure including rationale, infrastructure requirements and technical components. 2. Demonstration of the procedure, common findings, scoring of results and discussion of subsequent rehabilitation and counselling. 3. Presentation of FEES outcomes in our centre. 4. Presentation of an electronic data collection and report generation tool for quality assurance and research. Time for Questions and Discussion will be allocated.

WS #21

Corticosteroid Use in Otolaryngology: What Does the Recent Evidence Tell Us? – L. Parnes, B. Rotenberg, M. Husein, London

Learning Objectives

This seminar will provide participants with a succinct review of the most recent and relevant literature concerning corticosteroid use in otolaryngology. At the completion of this seminar, the participant will understand the inherent risks and benefits in using systemic corticosteroids in various otolaryngological conditions. The seminar will demonstrate to participants why, in certain conditions, topical steroids may be more beneficial and less risky than oral steroids.

OBJECTIVES: Both oral and topical corticosteroids are used frequently in the practice of otolaryngology. Their use is often based on historical evidence rather than clinical research. We will examine the literature for evidence that either supports or refutes their use in various otolaryngological conditions. METHODS: First, we will present a short primer in evidence based medicine. We will then overview corticosteroids' mechanisms of action and their adverse effects. We will then present short case examples in each of the subspecialty areas of otology/neurotology, rhinology, laryngology/head and neck surgery and paediatric otolaryngology. Our clinicians with expertise in each of these areas will review the recent evidence in the literature to see if there is scientific support for their use. Where possible, we will reference clinical practice guidelines. RESULTS: Representative diseases will include Bell's palsy, sudden deafness, Meniere's disease, nasal polyposis, infectious mononucleosis, acute laryngotracheobronchitis and peritonsillar abscess. We will also examine the evidence for perioperative corticosteroid use in endoscopic sinus surgery and tonsillectomy. CONCLUSIONS: We feel that this mini-seminar will be of great importance to the general otolaryngologist. By looking at the risk/benefit profile, we will improve their knowledge of when and when not to use corticosteroids in both their office and surgical practices.

WS #22

Using the Endoscope for Minimally Invasive Ear Surgery – D. Pothier, A. James, Toronto, ON

Learning Objectives

At the end of the presentation, attendees will be able to understand the endoscopic anatomy of the middle ear space. Anatomical features which have been largely forgotten as a result of relative inaccessibility will become clearly visible and clinically relevant. After discussion of the properties of a rigid endoscope, attendees will be able to understand why endoscopic ear surgery offers an alternative that is less invasive with a far superior view of the disease being operated upon. After the workshop, attendees will be able to start undertaking limited endoscopic ear surgery and understand how to expand their practice in this area.

This workshop will demonstrate the emerging technique of minimally invasive endoscopic ear surgery. This technique is relatively new, but has been growing rapidly in popularity. It offers the surgeon a less invasive, disease-defined method of controlling middle ear pathology using an endoscope to provide a superior view of the middle ear space. Using the endoscope to look around corners allows very accurate removal of cholesteatoma that can be achieved without the need for violation of healthy tissue to gain access to the middle ear. This causes considerably less morbidity to the patient and a more rapid recovery than traditional approaches. The speaker has used the technique successfully as part of a global collaboration set up to support the development of endoscopic ear surgery. We believe that the speaker will represent the interests of most surgeons who will benefit from adding this type of surgery to their armamentarium. The use of 3D endoscopy and augmented instrumentation in this context will be discussed. The workshop will describe and demonstrate how the surgery is undertaken and how surgeons can incorporate this technique into their clinical practise.

Mini WS #6

Organizing and Managing an Evidence Based Journal Club (EBJC)—H. El-Hakim, V. Biron, D. Cote, Edmonton, AB

Learning Objectives

At the end of the presentation the audience should 1. Be able to identify the main processes that guide the management of a successful EBJC. 2. Be familiar with the content of the literature regarding the effectiveness of EBJC in general. 3. Reflect on the immediate needs and objectives of their local forum.

Objectives-To provide a framework for the planning and execution of an EBJC, suitable for resident training and continuing medical education. Method-A literature search was conducted to identify the English language publications on the processes involved in managing EBJC, in any health disciplines. Based on organizational processes drawn from this review, a tool was constructed to evaluate the evolution of our divisional EBJC. Specifically, attendance, attendees, aims, selection of material, form, venue, role allocation, and elements of conviviality were evaluated. Results-Overall, the approach to EBJC has not changed in terms of frequency, attendance, nor in venues. There appears to be a more purposeful selection of specific facilitators for each session, with a trend towards formal power point presentations, abandoning the traditional “read aloud” format. The literature discussed tends to be selected by both surgical staff and resident trainees, while the former’s role has increased. The aims are not always clearly stated, and disagreements between the interests of staff members, and the trainees, may surface. However, the choice of material has progressed to reflect the commonly encountered types of clinical questions, and statistical tests utilized. Basic science paper inclusions continue to be rare, while there is an increasing trend to include educational research, systematic reviews and economic analyses. Conclusions-The available literature on EBJCs supports their utility for addressing various objectives in post-graduate and continuing medical learning. There are fundamental underpinnings which organizers must consider consciously for an effective forum to be established.

Mini WS #7

iPhone and iPad for Otolaryngologists: An Interactive Overview of iOS Devices and Their Role in Patient Care, Education, Research and Continuing Professional Development – S. Kohlert, M. Bromwich, A. Jalali, L. McLean, Ottawa, ON

Learning Objectives

At the end of this workshop, the participant will be able to: 1. Appreciate the potential role of the iPad and iPhone in patient care, medical education, research and continuing professional development. 2. Compose a list of iPhone and iPad apps that are relevant to their practice as an Otolaryngologist. 3. Identify iPhone and iPad productivity tools available for the Otolaryngologist. 4. Develop an effective strategy for identifying pertinent iPad and iPhone apps for use in Otolaryngology. 5. Discuss the process involved in the successful development of iOS apps.

Background-iPads and iPhones are becoming increasingly prevalent within the medical community. 75% of US physicians own an iOS device (iPhone, iPad or iPod Touch) and 80% of the top US hospitals are testing or piloting the iPad. However, with over 500,000 apps (including over 7,500 medical apps) on the iOS App Store, it can be difficult for physicians to find those that are both pertinent and reliable. Objectives-This workshop will explore the plethora of available resources and how they can be used for patient care, medical education, research and continuing professional development (CPD). Methods-To promote a high degree of attendee engagement and participation, this workshop will consist of interactive presentations, small and large group discussions and hands-on app demos. Popular features and apps, as well as creative uses for iOS devices in patient care, medical education, research and CPD will be discussed. A focus will be placed on apps facilitating productivity and collaboration. A search strategy for the efficient discovery of pertinent new apps for use in Otolaryngology will be presented. Finally, a short discussion on the app development process (including the time and cost of development) will follow. Conclusion-iOS devices have the potential to improve the quality of patient care, increase physician efficiency and act as excellent delivery methods for CPD and medical education. This workshop aims to help otolaryngologists become more productive and satisfied with their iOS device.

Mini WS #8

Strategies for Management of Severe Snoring – B. Rotenberg, London, ON; J. Chau, Winnipeg, MB; V. Forest, Montreal, QC; D. Rawson, London, ON

Learning Objectives

1) After attending the workshop, participants will understand the role of both office and operating room based procedures in managing severe snoring. 2) After attending the workshop, participants will understand options available to manage snoring with oral appliances

Objective: To review evidence based strategies for management of patients with medically or socially problematic snoring. Specific topics to be reviewed office based procedures (LAUP, implants), operating room procedures (UPPP and similar), oral appliances, and nasal surgery. Methods: Presenters will review the literature and present their findings in a systematic manner, along with pearls gleaned from personal experience. Results: N/A Conclusion: N/A

WS #23***Making Sense of CRS: Rhinology in the Era of Personalized Medicine – M. Tewfik, M. Desrosiers, Montreal, QC***Learning Objectives

Upon completion of this workshop, the participating otolaryngologist clinician will: 1) Be able to describe the current theories regarding pathogenic mechanisms for the development of CRS; 2) Be able to accurately phenotype patients into subgroups of CRS based on the clinical exam and pertinent investigations; 3) Be able to consider the most appropriate management options for the treatment of CRS by employing an individualized approach.

The management of chronic rhinosinusitis (CRS) can often be confusing to the practicing otolaryngologist, as various mechanisms may underlie the development of sinonasal disease. Proposed etiologic factors for CRS include *Staphylococcus aureus* superantigens, bacterial and fungal biofilms, allergy, defects in innate and acquired immunity, and other genetic factors. It is likely that a combination of these factors contributes to the disease process in any given individual with CRS, and an understanding of this becomes particularly important in the management of patients who have failed to respond to medical and surgical treatment. A number of clinical and biological markers can help identify specific patterns of disease in individual patients, and offer guidance in the investigation, management, and prognosis of this common illness. This workshop seeks to initiate otolaryngologist clinicians to the era of personalized medicine by providing an approach to "phenotyping" or sub-classifying patients with this heterogeneous disease. A practical and evidence-based approach, combining best available evidence with some of the more recent research, will be described with the aim of better choosing appropriate treatments and maximizing the likelihood of success. Strategies for the investigative workup will be presented with an emphasis on the clinical exam, laboratory and radiologic tests, and disease biomarkers. As the area of personalized medicine continues to evolve, the practitioner needs to be aware of methods for individualizing approaches to disease management.