PRESIDENT'S MESSAGE

As we approach the start of the AAAAI Annual Scientific Meeting, and our own Society’s mid-term reception and board meeting, it is ironic that much of our recent focus has had to be on some decidedly unscientific developments on our field.

I am of course referring to the startling announcement late last fall that several Rexall and affiliated drug stores would begin offering blood testing through their pharmacies, under the “guidance” of a naturopath, for “food allergies and intolerances”. The test being offered, at a bargain rate of $450, is known as the HEMOCODE™, and presumably measures specific IgG to 250 different “foods and additives” (including 11 different types of cheese!). I say presumably, because it is actually very hard to pin down the precise details behind the HEMOCODE™, and it’s possible that the assay incorporates a combination of food-specific IgE as well, as some labs have in the past.

This announcement was met with a good deal of interest by the mass media, with stories on local and national news broadcasts across the country, interviewing pharmacists, naturopaths, and several sufferers of food “intolerance” who were miraculously cured once their HEMOCODE™ was “cracked”. Unfortunately, few of these reporters bothered to speak to an actual Allergist, or frankly anyone with even a modicum of expertise in food allergy or intolerance, and of course no one seemed to notice the test’s disclaimer “HEMOCODE™ is not intended to diagnose, treat, or prescribe any health condition”, the exact opposite of the role of the Allergist/Immunologist!

Specialists in Allergy & Clinical Immunology have long struggled with encroachment from “alternative” practitioners, offering a wide range of unproven or frankly unscientific diagnostic and therapeutic options for our patients. Our Society actively expressed serious concerns with the College of Physicians and Surgeons of Ontario’s (CPSO) recent draft document on non-conventional therapies in medical practice, and despite some expected negative feedback on the issue from “interested parties”, I’m pleased to say that the CPSO abandoned most of the controversial aspects of their draft, and have adopted a more rational and scientific approach.

The CSACI has been vocal on this issue previously, sending a letter to Gamma Dynacare registering our surprise and displeasure that they had begun offering food-specific IgG testing last year, although the recent developments through the Rexall family of drug stores is on an entirely different scale.

Our Society’s mission is the advancement of the knowledge and practice of allergy, clinical immunology, and asthma for optimal patient care, and this includes patient advocacy. We need to be vocal in this discussion, we need to make sure that we are viewed as the voice of reason and science, but we need to recognize that the proponents of these unscientific claims are crafty, well-financed, and enjoy almost unlimited time and energy on which to stake their misleading but profitable claims.

.../2
We will discuss strategies to address this growing problem in Orlando, and I would greatly welcome any suggestions from the membership in this regard.

In the meantime, if you are looking for an excellent summary of the research on the role of food-specific IgG, either for yourself or your patients, I would direct you to the recent post by Scott Gavura, a pharmacist who is utterly aghast that his professional colleagues would offer such nonsense:


I look forward to seeing you all in Orlando at the CSACI Reception on Saturday, March 3 at the Westin Imagine Hotel.

Stuart Carr, MD, FRCPC, FAAAAI
President, Canadian Society of Allergy and Clinical Immunology

CSACI MANAGEMENT UPDATE

Those of you who attended our AGM in Quebec City will recall that your Board of Directors has been actively considering a variety of practical measures to curb our Society’s ever-increasing expenses and help balance the CSACI budget.

The Board discussed the budget at length, and the following recommendations were ratified:

- an ad-hoc committee was struck to explore novel revenue and sponsorship opportunities
- for the first time since 2005, the CSACI will increase its annual membership dues for full fellow and member categories, from $150 to $225
- rather than host a formal dinner during the AAAAI Annual Meeting, the CSACI will instead hold a reception for members and corporate colleagues, offering a more cost-effective opportunity for networking and socializing

By far, our single largest budget item each year has been our Management fees with RCAM, and these fees have increased dramatically over the past several years. As a result in increased management fees the board decided to actively consider other potential management options.

After a great deal of discussion, including consultation with other specialty societies, who have gone through the same process, the Board has come to the conclusion that continuing our current course with RCAM is no longer tenable, and accordingly, we have given notice once our current contract expires March 31, 2012 and will make alternate arrangements for the day-to-day administration of the CSACI. The Board of Directors of CAAIF, facing similar financial pressures, has elected to follow suit, and we are actively considering our options for ongoing administrative and management support.

The Board of Directors is committed to ensure a seamless transition, one that should not in any way adversely impact the membership or the Society’s ongoing activities, including our Annual Scientific Meeting in Calgary October 11-14, 2012.

Stuart Carr, MD, FRCPC, FAAAAI
President, Canadian Society of Allergy and Clinical Immunology
FELLOWS-IN-TRAINING REPORT

It has been an honour serving as the Fellow-in-Training Representative for the CSACI, and also a lot of fun! The Fellow-in-Training Workshop in Quebec City was very well received and many appreciated the practical nature of the sessions arranged. For all of us, especially those who are about to finish their training, transitioning to practice can be anxiety-provoking. The annual CSACI meeting, with the Fellow-in-Training Workshop and networking events, continues to be a valuable experience for all trainees, not just for keeping up-to-date with developments in the field, but also for career preparation.

I would strongly encourage current PGY-4 trainees to consider the position of Fellow-in-Training Representative, as it is a very rewarding experience. If you are interested in this position, please contact Louise Tremblay. I would also be happy to speak with any who are interested in this role. (See announcement below)

Dr. Chet Wong
FIT Representative

Dear Fellows-in-Training:

One of the Canadian Society of Allergy and Clinical Immunology (CSACI)’s key priorities is to give Fellows-in-Training (FIT) influence over the Society’s agenda by opening up opportunities for them to provide input and by using their input in the CSACI’s strategy development process.

As a FIT representative for the CSACI, you will be asked to discuss FIT activities to the Executive at least four times a year (this report is also published in the CSACI Newsletter); attend the Board of Directors meeting at the annual scientific meeting and at the mid-term meeting each year; and participate in CSACI teleconferences as needed. One of the major responsibilities for this position is to organize the FIT Workshop that is held during the Annual Scientific Meeting. A co-chair will assist you in developing the FIT program. (Please note that all expenses to attend the mid-term and annual meeting are covered.)

Do you or someone you know have a passion for making a difference? It’s time to nominate a FIT member.

The Nomination Process
Only active CSACI associate fellow members can be nominated.

To nominate a colleague or yourself, please submit:
• Your name and contact information;
• Your nominee’s name and contact information; and
• A brief CV of the nominee, and why he/she/you would make a great FIT representative.

If you nominate a fellow member, please contact them first to ensure they agree. Email your nomination to the csaci@royalcollege.ca by April 15, 2012. The next CSACI Program Committee teleconference will be held in mid-April and the Board of Directors meeting will be held on Thursday, October 11 at 6:00 p.m. in Calgary, Alberta (Westin Hotel).

Your contribution will have an important impact on our society.
Thank you for your willingness to serve.

Dr. Stuart Carr, President, CSACI

The Canadian Society of Allergy and Clinical Immunology would like to acknowledge Nycomed, a Takeda Company, for their sponsorship in printing the 2012 Winter Newsletter.
**INTEREST SECTION REPORTS**

**RHINITIS AND SINUSITIS**

At the Section Meeting in Quebec, Mark Greenwald delivered a most interesting review of the evolution of Immunotherapy from its inception to practice today, entitled:

"Immunotherapy 100 Years Old: The Original Papers by Noonan and by Freeman."

The audience learned about the relevance of initial work to current knowledge. It was a surprising example of how "the more it changes..."

These are some recent contributions of the Rhinosinusitis Section members to the advancement of knowledge in our main area of interest.

**Allergic rhinitis.**
Small P, Kim H.

**Pediatric chronic rhinosinusitis: the old, the new, and the reasonable.**
Silviu-Dan F.

**Canadian clinical practice guidelines for acute and chronic rhinosinusitis.**

Good proof of an active bunch in our Section!
(N.B. Please let us know if we missed anyone!)

**Dr. Fanny Silviu-Dann**
Section Head

**PEDIATRIC INTEREST SECTION**

The Pediatric Interest section meeting was very well attended in Quebec City. Thank you to all who attended for your ideas and contributions. I look forward to seeing you again at the 2012 mid-term and annual meetings.

For all CSACI members, please use the following link to download a handout you can give to parents and colleagues. The CSACI has officially endorsed the document entitled “Reducing Risk of Food Allergy in Your Baby”, which has current advice on introducing food proteins to infants at risk of development of food allergy: [www.healthlinkbc.ca/dietitian/pdf/reducing-risk-of-food-allergy-in-your-baby.pdf](http://www.healthlinkbc.ca/dietitian/pdf/reducing-risk-of-food-allergy-in-your-baby.pdf)

We are continuing with our efforts to link with the CPS (Canadian Pediatric Society) to create a statement on allergy prevention aimed directly at physicians and other health professionals, which would be the first ever official “Canadian Guidelines” on the subject.

**Dr. Edmond Chan**
Section Head
ANAPHYLAXIS AND ADVERSE REACTIONS INTEREST SECTION REPORT

Thank you to everyone who participated in the Interest Section Meeting in Quebec City. I'm pleased to report we have a formal listing of Interest section members who will be specifically copied on distribution list mailings with each CSACI newsletter.

We discussed many areas of concern which are summarized below.

Areas of Interest for Discussions/Presentations

- Venom allergy - discussion about yield from ImmunoCAP when skin tests are negative – Johns Hopkins laboratory more sensitive than Canadian labs (should this be plural? I used plural in French – more logical;)
- Work up of idiopathic anaphylaxis – practical issues – is it cost effective? Tryptase ~$80, ImmunoCAP $32 each antigen; tryptase is only available in certain province – in BC need prior approval;
- Priority referrals from ER post anaphylaxis – encourage MDs to contact ER offering to see patients in 2 month time frame – challenge to receive copies of lab tests ordered by ER if clinic is not affiliated with the treating hospital - encourage allergists to be visible in the ER, consider pre-printed referral forms;
- Contact local Pfizer reps to provide sample EpiPens and trainer devices to have available in the ER.

Plans: Position Papers

- Post-care plan for ER – duration of observation, prescription of auto-injectors, referral to allergy;
- General belief that this will be more well received than a management paper, could be used by GPs as well;
- Interested participants – Susan Waserman, Mary Messieh, Laura Bantock, Carol Sleeth, Chip Bantock, David Fisher, Doug Mack;

If anyone else is interested in participating in the final write up of this position paper please do not hesitate to contact me.

Dr. Anne Ellis, Section Head

ASTHMA SECTION REPORT

GOALS FOR 2012

1. Reposition CSACI as a partner with the CTS in the generation of asthma guidelines. No or very little CSACI presence in recent iterations of Canadian asthma guidelines.

2. Participation in the World Asthma Congress, Quebec City, August 18-21, 2012. Interasma invited CSACI last year to participate in WAC 2012 by organizing a symposium.

3. Section activities for the CSACI 2012 meeting.

The Asthma Section will host the usual Interest Section Breakout Meeting on the Saturday of our annual congress. The Section also participates in the Plenary IV session on Sunday morning.

PROGRESS TO DATE

1. After several attempts, the CSACI has been offered to participate as reviewers of the CTS 2012 Asthma Guidelines for preschoolers, children, and adults. Dr. Francisco Noya and Dr. Harold Kim will be the CSACI reviewers, representing pediatric and adult perspectives.

2. Dr. Stuart Carr, Dr. Richard Warrington, and Dr. Francisco Noya are involved in this endeavour. More news to follow...

3. The content of the Asthma Interest Section Breakout Meeting during the 2012 Annual Meeting has not been determined. A possible topic is reviewing the upcoming CTS Asthma Guidelines. The Section leader is open to suggestions for this year’s content.

Dr. Harold Kim, Dr. Fanny Silviu-Dan will co-chair the Plenary IV session. Dr. Noya will participate in this session in a debate about intermittent versus maintenance inhaled steroids for preschool wheezers. Dr. Noya will defend maintenance and Dr. Mark Anselmo (pediatric respirologist, Calgary) will argue for intermittent.

Presented by Dr. Francisco Noya, Section Head
INTEREST SECTION REPORTS - continued

IMMUNOLOGY INTEREST SECTION

Work is progressing on the C-PRIMES initiative, garnering support from our industry partners and the first manuscript in preparation. We are actively acquiring new sites with 3 sites having obtained IRB approval, 4 sites under review and 2 sites preparing IRB proposal. The goal is to have cross Canada enrollment by the next CSACI meeting. Congratulations to all. Any center wishing to participate in this Canadian Registry for patients with primary immunodeficiency should contact D Lejtenyi at duncan.lejtenyi@muhc.mcgill.ca.

Don't miss the CIS meeting on PIDD this May 17-20 in Chicago – a great meeting for all those who manage these complex patients.

Dr. Christine McCusker
Section Head

ALLIED HEALTH SECTION REPORT

Depending on where you live across our country you may be celebrating spring or shovelling your driveway; whatever you are doing, please save this date... Saturday October 13, 2012. This year the CSACI Annual Scientific Meeting in Calgary held October 12-14, will offer an all-day Allied Health Symposium. Our goal is provide a one-day interactive, evidence based symposium that provides the latest information and current guidelines on the management of allergic disease. Our Canadian experts in the field of asthma, allergy and immunology will discuss allergic disease from cell, pregnancy, infancy, childhood and adulthood. Here is a preview of the program offered:

- IMMUNOLOGY 101 – Ground your understanding in the basics of the mast cell and the immune response.
- THE MAKING OF AN ALLERGIC INDIVIDUAL - Nature versus Nurture...What does current evidence tell us?
- INFANTFEEDING GUIDELINES in 2012 - What do we know and what do we tell families.
- THE ALLERGIC MARCH IN CHILDHOOD
- A COMMUNITY APPROACH TO ASTHMA CARE
- ANAPHYLAXIS in the community
- FOOD ALLERGY IN THE MEDIA- Discussion and Panel
- ASK THE ALLERGIST-Informal opportunity to ask questions.

CSACI Allied Health members and non-members (nurses, community pharmacists, family physicians and pediatricians, dieticians, respiratory therapists) have the opportunity to attend and receive credit for this symposium (Pending accreditation).

We look forward to seeing you at CSACI in Calgary in October 2012. Please email your ideas, concerns or helpful information to the CSACI Allied Health Section at rchooniedass@mich.ca and nlross@hsc.mb.ca.

Rishma Chooniedass & Nancy Ross
Allied Health Section Co-Chairs
JOURNAL NEWS: ALLERGY, ASTHMA & CLINICAL IMMUNOLOGY

The Journal continues to look forward to submissions from members of CSACI. I would remind you that we have a sharing agreement with BioMed Central that covers 50% of the publication costs. Some of you may also have University Agreements with BioMed Central that will reduce your payment costs.

If we are to obtain an impact factor, we must achieve a minimum of 2-3 manuscripts published each month. We are not doing this and so I would ask you again to consider AACI for the publication of your manuscripts.

I sincerely thank those members who have made the effort to submit to their Journal.

Richard Warrington Editor-in-Chief, AACI

Innovative online anaphylaxis course receives national training awards
An online training course to increase anaphylaxis education among school personnel is being recognized today with two prestigious awards from the Canadian Society for Training and Development (CSTD). A national professional association focused on training, learning and performance in the Canadian workplace, CSTD annually recognizes effective, well-designed training programs. The How to C.A.R.E. for Students at Risk of Anaphylaxis: What Educators Need to Know (C.A.R.E.) course is being honored with “Gold” for Training Excellence in E-Learning and “Winner” of Best Practices in Workplace Learning. The course was developed by Leap Learning Technologies Inc. and partners Anaphylaxis Canada and the Canadian Society of Allergy and Clinical Immunology.

“C.A.R.E. is a web-based course designed to prepare educators for an anaphylactic reaction in their school. The course provides consistent, medically-based information which teachers and administrators can access from any location and time at their own pace to learn about anaphylaxis, the most severe form of allergic reaction. As anaphylaxis is a growing health concern, ongoing education is the key to better protecting allergic students and staff. The course helps to standardize information being provided to educators with recommendations based on current anaphylaxis-related research,” said Dr. Stuart Carr, President, Canadian Society of Allergy and Clinical Immunology.

For more information, please visit www.csaci.ca

IMPORTANT UPCOMING DATES - 2012

- **CSACI Canadian Reception - Orlando, Florida - Westin Imagine Hotel - March 3, 2012**
- **AAAAI Meeting - Orlando, Florida - March 2 to 6, 2012**
- **April 21, 2012 - Anaphylaxis Canada Community Conference in Winnipeg, Manitoba - More information is available at www.anaphylaxis.ca (Events)**
- **World Asthma Congress, Quebec City, August 18-21, 2012**
SILENT AUCTION - QUÉBEC CITY

2011 SILENT AUCTION
On behalf of the Canadian Allergy, Asthma and Immunology Foundation (CAAIF), I would like to thank you for your generous donations to the CAAIF Silent Auction, which raised over $6000.

AAIA
I would also like to thank Ms. Mary Allen, CEO, and her AAIA team for their support through numerous fundraisers, including the “AAIA Run Walk” which sustains partnership grants.

Thank you!
Dr. Eric Leith, Chair, CAAIF

FROM WINNIPEG MANITOBA TOURISM
THERE ARE TWO MORE SILENT AUCTION ITEMS UP FOR BIDDING. THE FIRST IS 2 NIGHTS IN AN EXECUTIVE STUDIO SUITE AT PLACE LOUIS RIEL (EXPIRES APRIL 22, 2012) AND THE SECOND IS DELTA WEEKEND DELIGHT (2 NIGHTS) (EXPIRES MARCH 22, 2012) - BOTH INCLUDE PARKING.
BOTH BIDDING ITEMS START AT $75.
LET THE BIDDING BEGIN!

EMERGING CLINICIAN-SCIENTIST RESEARCH FELLOWSHIP 2012-2013 * REQUEST FOR APPLICATIONS

The goal of the AllerGen Emerging Clinician-Scientist Research Fellowship 2012-2013 is to enable Canadian Clinical Immunologists and Allergists to pursue allergy, asthma and/or anaphylaxis academic research training immediately following their Clinical Immunology and Allergy sub-specialty clinical training in order to:
• Strengthen the academic capacity of Canadian Clinical Immunology and Allergy sub-specialists
• Increase Canadian capacity for translational Clinical Immunology and Allergy research
• Facilitate enhanced patient care through excellence in basic and clinical Allergy and related immune disease research.

Eligible academic foci include basic and/or clinical research related to allergy, asthma and/or anaphylaxis.
FOR MORE INFORMATION VISIT www.allergen-nce.ca

DEADLINE FOR APPLICATIONS IS APRIL 13, 2012

JOIN US!
WALK TO AXE ANAPHYLAXIS

Cedarvale Park Ravine
TORONTO, ONTARIO

FOR FURTHER INFORMATION PLEASE VISIT
www.walktoaxe.ca

EpiPen® TAKE ACTION

Take Action Event invites people to walk (or walk/run in some cities) in support of anaphylaxis research and education. The fundraising events will take place in several cities across Canada and the proceeds will go to support anaphylaxis research and education in Canada.

The Event hopes to attract people of all ages — children, teens and adults — to unite to support the allergy community.

For more information and to sign up for the event in your community, visit www.aaia.ca.
And the winners are:

**Dr. Harold Kim:** David McCourtie Memorial Lectureship

**Dr. Mariana Castells:** Bram Rose Memorial Lectureship

**Dr. Jean Marshall:** CSACI Award for Research in Immunology

**Dr. Wade Watson:** Jerry Dolovich Award

CONGRATULATIONS TO THE 2011 AWARD RECIPIENTS!

### 2011 Abstracts - 1st and 2nd Place by Category

#### Allergy/Anaphylaxis:
1. Dr. Zein Faraj (Winner) - Skin prick testing with extensively heated milk or egg products helps predict the outcome of an oral food challenge: a retrospective analysis
2. Dr. Amanda Jadgis (Runner Up)

#### Basic Science/Immunology:
1. Dr. Vu Quang Van (Winner) - Reprogramming in Vivo Th17 Into Th17/Th2 By Sirp-A Dendritic Cells in the Lungs
2. Ms. Claudia Hu (Runner Up)

#### Asthma/Allergic Rhinitis:
1. Dr. Meghan Azad (Winner) - Maternal diabetes amplifies the influence of maternal asthma and smoke exposure on the development of asthma in offspring
2. Dr. Anna Drewniak (Runner Up)

#### Case Reports:
1. Dr. Philippe Begin (Winner) - A large cohort of primary familial cryofibrinogenemia originates from the Magdalen Islands
2. Dr. Matthieu Picard (Runner Up)

All Abstracts can be found on the AACI website at [www.aacijournal.com](http://www.aacijournal.com)

### 2011 ANNUAL SCIENTIFIC MEETING PLANNING COMMITTEE

| Dr. Richard Warrington, Program Chair | Dr. Harold Kim |
| Dr. David Fischer, CPD Chair | Dr. Sandy Kapur |
| Dr. Stuart Carr, CSACI President | Dr. Eric Leith |
| Dr. Greg Appelt | Dr. Bruce Mazer |
| Dr. Dean Befus | Dr. Marie-Noël Primeau |
| Ms. Rishma Chooniedass | Ms. Nancy Ross |
| Dr. Anne Ellis | Dr. Tim Vander Leek |
| Dr. Marie-Josée Francoeur | Dr. Susan Waserman |
| Dr. Charles Frankish | Dr. Wade Watson |
| Dr. Eyal Grunebaum | Dr. Chet Wong |

We would like to thank the Annual Scientific Meeting Program Committee and the dedicated CSACI staff for all their hard work in developing and planning this interesting and relevant meeting.
At the Annual General Meeting, an update was provided by Dr. David Fischer, CPD Chair. His presentation outlined the following changes in the new Royal College Framework for CPD activities; there are now three categories instead of the six. The categories are: Section 1: Group Learning, Section 2: Self Learning and Section 3: Assessment.

### Framework of Continuing Professional Development Activities

<table>
<thead>
<tr>
<th>SECTIONS</th>
<th>CATEGORY</th>
<th>EXAMPLES</th>
<th>CREDIT RATING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 1: Group Learning</td>
<td>Accredited group learning activities</td>
<td>Accredited rounds, journal clubs, small groups, Accredited conferences</td>
<td>1 credit per hour</td>
</tr>
<tr>
<td></td>
<td>Unaccredited activities</td>
<td>Unaccredited rounds, journal clubs and small-group activities</td>
<td>0.5 credits per hour (maximum of 50 credits per cycle)</td>
</tr>
<tr>
<td>Section 2: Self Learning</td>
<td>Planned learning</td>
<td>Fellowships, formal courses, Personal learning projects, Traineeships</td>
<td>100 credits per year, 25 credits per course, 2 credits per hour, 2 credits per hour</td>
</tr>
<tr>
<td></td>
<td>Scanning</td>
<td>Internet searching (Medscape, UpToDate, Dynamed), InfoPOEMs, CardioCLIPS</td>
<td>1 credit per article, 0.5 credits per activity, 0.5 credits per activity, 0.25 credits per activity</td>
</tr>
<tr>
<td></td>
<td>Systems learning</td>
<td>Practice guideline development, Quality care/patient safety committee, Curriculum development, Examination development, Peer assessment</td>
<td>20 credits per year, 15 credits per year, 15 credits per year, 15 credits per year, 15 credits per year</td>
</tr>
<tr>
<td>Section 3: Assessment</td>
<td>Knowledge assessment</td>
<td>Accredited self-assessment programs</td>
<td>3 credits per hour</td>
</tr>
<tr>
<td></td>
<td>Performance assessment</td>
<td>Simulation, Chart audit and feedback, Multi-source feedback, Educational/administrative assessments</td>
<td>3 credits per hour, 3 credits per hour, 3 credits per hour, 3 credits per hour</td>
</tr>
</tbody>
</table>

This table summarizes the learning sections under the new MOC framework. A MOC Program participant may earn up to 75 per cent of credits from any one learning section. Activities submitted via MAINPORT are converted automatically into credits.

### Highlights
- 75% maximum credits from 1 area
- 40 credits per year minimum
- 400 credits over 5 years
- 3 areas instead of 6 (not using 3 of them)
- Blackberry/Apple App to come for entering data

### New Categories
- Unaccredited activities
  - 50 hours per cycle
  - 0.5 credits/hour
- Article Reading: 1 credit per article
- Podcasts/audio programs: 0.5 credits/activity
- Internet searches: 0.5 credits/activity
- Practice Guidelines: 20 credits
- Curriculum/exam development: 15 credits
- Simulation 3 credits/hour
Planning continues to occur and all indications are for a very interesting and practical meeting for our members. There should also be plenty of entertainment. I thank the Planning Committee and especially Dr. Paul Keith for the work that has been done so far in developing the Program. We look forward to seeing you all in Calgary.

JOIN YOUR COLLEAGUES FOR THE 2012 CSACI ANNUAL SCIENTIFIC MEETING
OCTOBER 11 to 14, 2012
CALGARY, ALBERTA!
FOR MORE INFORMATION PLEASE VISIT WWW.CSACI.CA
SPONSORSHIP OPPORTUNITIES

The Calgary 2012 CSACI Annual Scientific meeting offers sponsorship opportunities to our sponsors and exhibitors who wish to increase their corporate brand and visibility and on behalf of the Canadian Society of Allergy and Clinical Immunology (CSACI), it is my distinct pleasure to invite you to support sponsorship opportunities for 2012. It is a great example of what we can achieve together.

I look forward to your involvement.

Stuart Carr, MD, FRCPC, FAAAAI
President, Canadian Society of Allergy & Clinical Immunology

FAST FACTS

VENUE:
The Westin Calgary
320 4th Ave. SW
Calgary, AB T2P 2S6

PARTICIPANTS:
Participants expected: 250 to 300

EXHIBITION:
Move-in: October 11, 10:00 - 17:00
Move-out: October 14, 11:00 - 16:00

SPACE ASSIGNMENT:
Exhibits are assigned according to booth size, exhibitor requirements and efficient use of exhibition hall space. While efforts are made to accommodate exhibitor preferences, the CSACI reserves the right to determine the final allocation of booth space.

BOOTH FEES:

$3,000 to $5,000 + applicable taxes.
A non-refundable deposit of $1,500 per booth is required to reserve your preferred location.

Payment in full is required no later than May 20, 2012.

ALL DELEGATE COFFEE BREAKS AND LUNCHES ARE HELD IN THE EXHIBITION AREA

FOR MORE INFO CONTACT THE CSACI HEAD OFFICE