



Canadian Association of General Surgeons Statement on Endoscopy

The provision of diagnostic and therapeutic endoscopy and colonoscopy is essential to the health and well being of the Canadian Public. In continuing to address this healthcare need, the Canadian Association of General Surgeons (CAGS) supports and promotes access to endoscopic resources for General Surgeons as well as for the training of General Surgery Residents in Endoscopy and Colonoscopy. For the healthcare of Canadians, it is critical that access to endoscopic resources are securely available throughout training and into practice.

Preliminary investigation into endoscopic services provided by General Surgeons in Canada was recently undertaken by the ten provinces represented on the CAGS Provincial Affairs Committee. Due to the variety of data gathering methods in each province, the purest common measurable available was colonoscopy billing data by specialty. All Provincial Representatives requested colonoscopy billing totals from their respective provincial medical services branch. The data table is below:

Figure 1

Colonoscopy procedures by Province and Specialist - 2010

Province	% Performed by General Surgeon	% Performed by Gastroenterologist	% Performed by Other Specialist*
BC	63	32	5
AB	34	53	13
SK	72	28	0
MB	73	15	12
ON**	49	23	28
QC**	36	59	5
NB	66	34	0
NS	56	10	34
PEI	81	19	0
NL	48	52	0

* Other Specialists performing colonoscopies that have been recorded by some provinces and can include: Pediatric Gastroenterologists, General Internists and Family Physicians.

**Data is from 2009

Currently in Canada, General Surgeons are delivering fifty percent or more of all colonoscopies. The remainder is provided by both Gastroenterologists, and “other” health care providers (see figure 1). In addition, the table also demonstrates that General Surgeons perform the majority of endoscopic

procedures in provinces that do not have large urban centres. This confirms that General Surgeons are the primary providers of endoscopy services for rural areas.

The Canadian population requiring endoscopy and colonoscopy is increasing with the advancing age of our population. In addition, due to the nature of the patient health issues that General Surgeons diagnose and treat, CAGS maintains that General Surgeons are an essential component of any health care strategy, local, provincial or national, to provide safe and timely endoscopic services. A practicing General Surgeon requires a minimum of one half to one full day of Endoscopy time per week. The variation takes into account those General Surgeons whose practice may have an increased focus on the GI tract, such as Colorectal Surgeons and Hepatobiliary Pancreatic surgeons requiring ERCP resources.

It is the opinion of the Canadian Association of General Surgeons that quality endoscopy training for all Canadian General Surgery Residents is in the best interest of the Canadian Public. The Royal College objectives of training for General Surgery include Endoscopy and Colonoscopy; General Surgery training programs and their faculty must have access to Endoscopy resources in all hospitals where Residents train.

General Surgeons in Canada have been and remain committed to providing safe and quality endoscopy services. CAGS members are encouraged to participate in quality assurance programs and continuing medical education to provide the best possible care for patients. The ongoing training of surgical residents in the skill of endoscopy is absolutely essential, as is the continued involvement of General Surgeons in the provision of endoscopic services. *CAGS firmly believes that any attempts to exclude surgical residents from receiving training in endoscopy, or any attempts to hamper a trained surgeon's provision of endoscopic services can only lead to inadequate care for the Canadian Public.*

This Statement is endorsed by:

The Canadian Society of Colon and Rectal Surgeons

The Canadian Society of Internal Medicine

Society of American Gastroenterologists and Endoscopic Surgeons