I am pleased to present the 2015 Annual Report for the Society of Anesthesia and Sleep Medicine (SASM), which has now been operating for over four years. Again, this last year has many major undertakings. The SASM is grateful to the Svinicki Association Management, Inc. (SAMI) in Wisconsin for their professional administrative services. This has been of great support to the SASM in its growth, expansion and success. The two important initiatives that the SASM undertook in 2014 have flourished in 2015. SASM is in affiliation for the second year with the International Anesthesia Research Society (IARS). The new section on “Respiration and Sleep” in Anesthesia and Analgesia (A&A) is one year old. The implementation of an Obstructive Sleep Apnea Death and Near Miss Registry started in May 2014 and is being continued in 2015.

Affiliation with IARS and New Section on “Respiration and Sleep” in Anesthesia and Analgesia Journal is now one year old

The affiliation between the two organizations, IARS and the SASM, is now one year old. Each has a mutual goal to increase the amount of published literature addressing respiration and sleep medicine. David Hillman, MD, the Immediate Past President of the SASM, a Clinical Professor at the University of Western Australia, Immediate Past President of the Australasian Sleep Association, and founding chair of Australia’s Sleep Health Foundation, has been appointed as the Section Editor for Respiration and Sleep for one year now.

The goals of the SASM align with the mission and vision of the IARS in terms of research and education. The SASM has achieved the principal goal to increase the number of sleep related articles published in the A&A journal, thereby increasing exposure of the readership to the field of sleep medicine.

There have been 25 papers submitted to the Respiratory and Sleep section of the IARS A&A Journal since its inception in 2014. Twenty-one assessments have been completed and out of these, 6 were accepted, including 2 editorials. Of the remaining 4, 3 have been sent back to the authors for revisions.
We would like to encourage SASM members to submit their scientific work on respiration and sleep to *Anesthesia and Analgesia*. The SASM is also encouraging members to submit reviews, commentaries and CME materials as well.

**The Obstructive Sleep Apnea Death and Near Miss Registry**

SASM has also partnered with the Anesthesia Quality Institute to launch a new Registry. The Registry started to accept cases in May 2014. Norman Bolden, MD, leads the Obstructive Sleep Apnea Death and Near Miss Registry. This project involves collaboration with Karen Posner, PhD, of the ASA Closed Claims Project at the University of Washington in Seattle. The goal of this OSA registry is to identify perioperative recurring patterns or themes underlying death or adverse events suspected to be related to OSA, with the goal of risk stratification and mitigation to improve patient safety during anesthesia. The Registry seeks to obtain a large number of case reports to achieve these goals. Any medical provider can submit anonymous cases, however patients are not allowed to submit cases. Currently, there are 46 submissions in the OSA Registry. The goal is to collect 100 cases before analysis would be started.

The SASM Pediatric Committee is also interested in establishing a Pediatric Obstructive Sleep Apnea Registry and discussion is underway between the SASM Pediatric Committee and OSA Death and Near Miss Registry Committee. I would greatly encourage SASM members to submit case reports to the Obstructive Sleep Apnea Death and Near Miss Registry. Case report instructions and forms are available on the OSA Death and Near Miss Registry website: [http://depts.washington.edu/asaccp/projects/obstructive-sleep-apnea-osa-death-near-miss-registry](http://depts.washington.edu/asaccp/projects/obstructive-sleep-apnea-osa-death-near-miss-registry)

**Finance**

Our financial affairs are in good order with continuing enthusiastic support from our many sponsors, who are listed in the meeting syllabus and on our website. We have worked hard to ensure that our administrative costs remain modest, allowing us to re-invest our funds in our educational program, outreach activities and in supporting research. In 2013 and 2014, we were very pleased to give out an annual research award, and at our Annual Meeting in October of 2015 we will announce the recipient of a third research award recipient.

Under the excellent fiscal stewardship of our Treasurer, Girish P. Joshi, MBBS, MD, our governance arrangements ensure appropriate oversight. Most importantly, there is a monthly financial reporting structure in place to the President and the Treasurer. We have worked hard to increase our membership and sponsorship from various sources to ensure a strong financial position.
Organizational Structure

Our organizational structure has evolved over the last year, reflecting expansion of our activities and changing emphasis. Two new initiatives in the organization structure occurred in 2014 with the formation of the SASM Sleep Medicine Clinical Practice Group and SASM Obstetric Group.

In North America and Great Britain, there are a number of anesthesiologists with dual specialties: anesthesia and sleep medicine. Tracey Stierer, MD, from John Hopkins University is leading the SASM Sleep Medicine Clinical Practice Group. The goal of this group is to have formal networking and exchange of practical ideas.

Sleep-disordered breathing during pregnancy can have a major effect on the health of the newborn, otherwise resulting in prematurity or stillbirth. Alexandra Bullough, MD, from Loyola University organized a SASM Obstetric Group in 2014-15. This group has been most productive resulting in collaborative efforts in US, Canada and Europe.

Administration

The Wisconsin based Svinicki Association Management, Inc. (SAMI) provides SASM with management and administrative services. Their systems have supported the Board and the SASM committees with individualized service. Most importantly, SAMI provides support to our members. Their support has enabled the SASM Board and the different committees to function at a high level. Marie Marinello, SASM Account Director, has been most valuable to the success of SASM in the past year.

Membership

We have introduced innovations in our membership drive to broaden our membership base due to the splendid efforts of Stavros Memtsoudis, MD, PhD, and his committee. One of the new initiatives is departmental membership. In 2015, we have added reduced rate for foreign members and also European departmental membership as well. The drive has been extremely successful with a significant increase in our membership, which now totals 1,189 members with individual members, gold patron members and departmental members.

Communication

Our website continues to flourish under the leadership of Michael Pilla, MD, and his committee.
The website has been redesigned to better conform to the IARS website following affiliation. The Scientific Update Subcommittee, under the outstanding guidance of Susana Vacas, MD, PhD, provides continuing educational material to our members via the website. There are regular, bi-monthly featured articles and scientific updates of recently published literature. Satya Krishna Ramachandran, MD, and his diligent committee, produce excellent newsletters at a regular interval of three times a year. The SASM newsletter is a rich source of information and is posted on the SASM website. The circulation of the SASM newsletter is an important task due to our connection to the IARS and the World Anesthesia Network. The newsletter is posted on these websites as well.

**Educational Programs**

In October at our Annual Scientific Meeting, before the American Society of Anesthesiologists (ASA) Annual Meeting, we will showcase all of our educational activity. This year, it has been magnificently organized under the direction of Peter Gay, MD, and Girish P. Joshi, MBBS, and their committee. We have continued our one and a half day format with a Thursday half-day and a Friday full day meeting of invited papers and poster presentations. This year’s theme, *Practical Magic: Optimizing Resources for Best Outcomes*, has important implications during financial restraints and the need for increased safety for patients.

Abstracts are an important component of the meeting. The SASM meeting provides a perfect opportunity to exchange ideas with an expert group focused on the sleep-anesthesia interplay. Anthony Doufas, MD, PhD, ably lead the Abstract Subcommittee. This year we have 40 abstracts with 6 preclinical and 34 clinical abstracts.

**Research Award**

The Research Committee, under the wonderful guidance of Roop Kaw, MD, adjudicates our third research award from a number of submissions. The award attracted an outstanding field of applicants from both clinical and basic science and we will be announcing the result at the Annual Meeting. Roop Kaw, MD, is also leading the effort of preparing a white paper on research areas of interest to the SASM.

**Clinical Committee**

Our Clinical Committee, under the superb leadership of Dennis Auckley, MD, and Bhargavi Gali, MD, has led our first steps in developing clinical standards and promoting education about sleep apnea amongst anesthesiologists and about anesthesiology amongst sleep physicians. They are most productive and have completed the following:
1) Clinician Educational Documents:
   - OSA Perioperative Help Sheet for Providers
   - OSA, Anesthesia and Surgery Patient Education Brochure

2) Clinician Slide Sets:
   - A) OSA: An Overview
   - B) Evaluation and Management of OSA in the Perioperative Period

Nursing Education: Current plans are to produce a nursing-directed white paper on OSA in the perioperative setting for the ASPAN newsletter.

**Pediatric Committee**

The goal of the Pediatric SASM Committee is to promote and take part in scholarly activity (e.g. clinical and bench research, guideline development, systematic review/meta-analysis) as it relates to the medical or surgical management of children and adolescents up to the age of 18 years with sleep disordered breathing, and to interpret what it means for the health care provider responsible for their care and ensure this knowledge reaches them.

The SASM Pediatric Committee, under the marvelous guidance of Kimmo Murto, MD, FRCPC, has worked hard in the past two years. The Pediatric Committee is performing a North American survey of pediatric anesthesiologists and otolaryngologists on the “admission practices for children under adenotonsillectomy”. The survey will address the variation in the procedure and hope to improve safety and address patients’ needs.

The committee presented a SASM pediatric symposium at the IARS March 2015 Annual Meeting in Hawaii on the topic: “OSA in Children and its Perioperative Management.”

The committee is also using Delphi approach to identify topics for systematic reviews among national and international experts. In addition, SASM, under the leadership of Kimmo Murto, MD, and SAMBA (Girish Joshi, MBBS, and Steve Butz, MD) is developing a consensus guideline to answer questions on children and adenotonsillectomy.

**SASM Obstetric Subcommittee**

SASM Obstetric Subcommittee, under the leadership of Alexandra Bullough, MD, has been most active. The group has multiple teleconferences to work on a number of issues that are of
interest to obstetricians, anesthesiologists and neonatologists. An international group has been formed in the past year with members from the US, Canada and Britain.

The group has worked on developing questions for educational purposes in obstetric antenatal clinics. This includes screening questions for obstructive sleep apnea. A survey on recognition of obstructive sleep apnea in pregnancy has been completed and the abstract will be presented at the SASM Annual Meeting this year.

SASM Guideline Task Force

In recent years, there have been significant advances in knowledge as it relates to anesthesia and sleep disordered breathing. Recently, the ASA published their 2014 Practice Guideline on the issue. There is still a need to develop this further regarding the preoperative screening of patients with sleep-disordered breathing. Frances Chung, MBBS, and Dennis Auckley, MD, are leading the effort in this area. The SASM Guideline Task Force has worked diligently with the literature review and met face-to-face on October 9, 2014, at the SASM Annual Meeting, and held multiple teleconferences in 2015 to work on developing the guideline for preoperative screening and preparation of patients with OSA for surgery. This guideline aims to be completed by the end of 2015.

Involvement in Activity of Other Professional Societies

For the third year, the SASM provided a panel session at the IARS Annual Scientific Meeting earlier this year. The SASM Board, committee chairs and committee members were invited to speak at numerous national and international anesthesia meetings, and at many sleep medicine meetings as well. The American Academy of Sleep Medicine has formed a new committee of “Anesthesia and Sleep Medicine” under the direction of Tracey Stierer, MD. The SASM has also had panel sessions at the meeting of American College of Chest Physicians for the last few years. David Hillman, MD, has successfully organized a full day educational session on “Anesthesia, Sleep and Obstructive Sleep Apnea” at the American Thoracic Society in May 2015. The session was very well attended.

Conclusion

We have had a year of solid growth with many important initiatives from different SASM chairs and Board Members. It has been an honor and a very rewarding experience to be President of the SASM. I am very grateful for the hard work of the Board Members, the committee chairs and committee members who contribute to the immense success of the SASM.
Nonetheless, the SASM needs more help from its members. If you would like to serve in any capacity, please submit your request on the SASM website (www.sasmhq.org) with your CV.

Frances Chung, MBBS

President, Society of Anesthesia and Sleep Medicine, October 23, 2015