The ASA Interim Board of Directors Meeting

What’s New at the ASA?

By Linda J. Mason, M.D., ASA Director for California

The interim meeting of the ASA Board of Directors was held on March 7-8, 2009, in Chicago, Illinois. Attendees from the CSA included Michael Champeau, President; Linda Hertzberg, President-Elect; Narendra Trivedi, Treasurer; Johnathan Pregler, Speaker of the House of Delegates; Linda Mason, ASA Director; Mark Singleton, ASA Alternate Director; Stan Stead, Chair, ASA Committee on Economics; and Barbara Baldwin, CEO.

Of special interest to CSA members are the following decisions:

On recommendation of the Administrative Council, the ASA will write a letter to the DEA and FDA requesting that fospropofol and propofol be classified as schedule III drugs. There is no data available yet that implicates fospropofol as a drug with abuse potential. However, because the pharmacologic actions of fospropofol are the result of its conversion to propofol, it is likely that its abuse potential will be similar to that of propofol. Factors that lead to that concern are:

1. Propofol is a powerful anesthetic agent that has been shown to have a pharmacologic profile that elevates its potential for abuse.

2. Propofol is emerging as a leading source of substance abuse among anesthesia care providers.

3. Propofol abuse is less prevalent in programs in which there is pharmacy control of propofol supplies.

4. An informal, unpublished survey demonstrates that a growing number of academic programs are independently treating propofol as a controlled substance.

5. There are a number of reports of deaths secondary to propofol abuse by anesthesiologists and nurse anesthetists.
It was also recognized that if fospropofol becomes a schedule II or III drug, then it is likely that propofol will also be re-categorized. The Administrative Council concluded that the ASA, as the voice of anesthesiology, has an obligation to the public and its membership to take a position on the introduction of this new anesthetic agent, particularly when one considers ASA's April 23, 2008, letter to the FDA stating that “Because of the similarities between propofol and fospropofol, including the potential for adverse events, we believe that both products should bear similar warnings.”

The Annual Meeting Oversight Committee has recommended a new session called “The Celebration of Advocacy” that will be held at noontime on Saturday at the ASA Annual Meeting. This special event will highlight the powerful force available to individual ASA members through becoming involved in political advocacy, and the importance of our collective voice in the coming epoch of major changes in American health care.

The afternoon board educational session began with a presentation of the new ASA branding video. It is part of the Lifeline branding campaign and can be viewed at www.lifelinecampaign.com. This video is made for ASA members to give them an idea about perception of the specialty by those outside the specialty.

There was a financial update by Treasurer John Zerwas, M.D., Assistant Treasurer James Grant, M.D., and ASA investment manager Jon Fellows of DiMeo Schneider and Associates, LLC. Although the ASA has suffered losses in its investments like the rest of the world, the financial state of the ASA is sound and under careful and responsible management.

Balance billing activities were discussed by our Alternate Director, Mark Singleton, M.D.; Deborah Creath, M.D., Texas Society of Anesthesiologists; and Scott Groudine, M.D., New York State Society of Anesthesiologists. This issue has risen to importance at the national society level.

John B. Neeld Jr., M.D., Chair of the Committee on Representation to AMA, is running in a contested election for the AMA Board of Trustees. It was requested that ASA members contact their state medical society and other subspecialty representatives to support Dr. Neeld’s candidacy and election. If elected, Dr. Neeld would be the third anesthesiologist on the AMA Board in addition to the Chair-Elect, Dr. Rebecca Patchin from California.