

Perioperative Cognition PIA Business Meeting Summary

Location:	ExCel London (Platinum Suite 4)
Date:	Saturday, July 15, 2017
Time:	4:30 - 5:30 p.m.
PIA Chair(s)/Meeting Facilitator(s):	Lis Evered and Esther Oh (Co-Chairs)

Chairs: Lis Evered (Outgoing Co-Chair), Esther Oh (Chair)

Present:

Brendan Silbert

Andreas Monsch

Haroon Burhanullah

Huafeng Wie

Emma Cunningham

Keith Fargo

I: Welcome and Introductions

It was confirmed that Lis Evered will relinquish Co-Chair status at the end of this year's AAIC meeting. Esther Oh continues as Chair.

II&III: Current PIA Membership Roster and ISTAART/PIA Membership Data

Overall increase in ISTAART membership (to approximately 4000) and further increase in this PIA's membership (to almost 200) noted. **Members were encouraged to become involved in other PIAs.** We encourage members of other PIAs to join our group too.

IV: PIA elections

Transition to more formal PIA Executive Committee election process discussed. Elections likely to be in September. **Members encouraged to put themselves forward for election. Email/newsletter to outline vacant positions.**

V: Review Annual Report

Report reviewed.

VI: Improve Communication and Collaboration among PIA Members

a) There has been one conference call in the past year. Monthly conference calls within other PIAs noted, quarterly calls felt to be the most appropriate frequency for our group. Two conference calls to be organised before the end of this calendar year to facilitate organisation of FRS proposals for AAIC 2018. **Conference calls to be held in September 2017/November 2017/Spring 2018.**

b) Newsletter was submitted to ISTAART ahead of AAIC but was not sent out to members – **Keith to follow up.** Appointment of new PIA project manager April Ross noted.

c) Opportunities for Twitter communications discussed. Use of PerioperativePIA# in general and AAIC2017# during the current AAIC meeting encouraged by Keith. Example of European Delirium Association's highlighting of relevant articles using Twitter noted. **Members encouraged to tweet links to interesting articles using PerioperativePIA# and follow PerioperativePIA# on Twitter.**

VII: Future Featured Research Symposium (FRS) ideas

Failure of three FRS proposals for AAIC 2017 noted. High volume of FRS submissions and subsequent low success rate in general this year (1/3) outlined by Keith. Potential collaborative submissions with Neuropsychiatry (Atticus Hainsworth newly-elected Chair) and Vascular PIAs discussed. **Suggestions for FRS collaborations with other PIAs welcomed.** To facilitate timely submissions for next year these need to be decided upon in the near future.

VIII: Increase membership

a) Raising of Perioperative Cognition PIA awareness within other relevant organisations discussed. **Emma to forward details of BGS POPS and Trainees Weekends.** Crossover with psychiatry and anaesthetic groups given multidisciplinary nature of this PIA's membership noted.

b) Travel Award for 2017 awarded to Dr Emma Cunningham. Reduced student ISTAART rates and potential for students to present at PIA meetings discussed, and to be encouraged. Members' experiences of effective mentoring relayed. **Esther and Keith to further discuss existing mentoring models with a view to setting up programme.** Collaborative utilisation of the shared PIA pages discussed including summary of relevant articles and grant calls. If seminal papers are outlined it could be of benefit to those entering the field. Links could be set up to those articles freely available. Similar set-ups already exist within ISTAART. Alzforum provides a good example of how this could work. Regular literature review would be necessary. References to funding calls could include contact details for researchers with experience of the relevant processes. **Shared pages to be discussed during next conference call.**

IX-XI: Papers

Provenance of Consensus Recommendations for the Nomenclature of Cognitive Change Associated with Anaesthesia and Surgery recapped – multidisciplinary input organised at AAIC 2015. The document outlines a proposed change to postoperative dysfunction nomenclature framed around DSM-V and is intended to align with pre-existing descriptions in the wider community. The second

reviews are complete and comments returned. The original article and/or comment will be published across journals including Journal of Alzheimer's Disease, Annals of Surgery and anaesthetic journals shortly. **Open Access status to be clarified.**

Following on from the literature round up suggested for the shared group PIA pages a paper outlining common challenges in the perioperative cognition research field and considerations for those setting up studies was discussed. **Potential collaborative papers with responsible authors to be discussed during next conference call.**