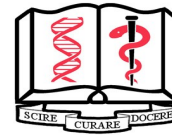


VITAL SIGNS



THE NEWSLETTER OF MCGILL UNIVERSITY DEPARTMENT OF MEDICINE

Volume 10. Number 1

March 2015

LET'S KEEP OUR EYES ON THE TARGET

Dr. James Martin
Chair, Department of Medicine



Presently we are at more cross-roads in our professional lives than we have encountered before. All of our hospital sites are undergoing change or major renovations, bringing with them inevitable complexity adapting to their new configuration. Although an obvious opportunity for a re-think, the promise of modernization and creative practice is drowned in considerations about how to make ends meet. However there are many aspects of patient care, and the highly correlated day-to-day clinical experience of the healthcare workers providing that care, that may be ameliorated without added cost and perhaps with savings. In these times where budget considerations rule we (as institutions) should not lose our humanity. In the last editorial I wrote about patient safety which is rightfully ranked among the top considerations. In addition to safety which, when there are near misses, is not necessarily perceived by the patient, issues of compassion, cleanliness and clarity are obvious and are vexatious. I would like to draw our attention to the concept of patient-centred care which is gaining traction in many countries and hopefully also in Canada. A recent BMJ editorial commented that we know what it is and how it should be delivered but "the challenge is

overcoming system inertia and paternalism". We need to engage patients in the process of planning the delivery of services, which should be designed to minimize disruption of patients' lives. Frequent surveys of the (dis)satisfaction of patients concerning their interactions and service in hospital could provide almost real-time information on where we (the institution) can improve.

I am also aware that the wellness of physicians (and other healthcare workers) affects the care they deliver, which means that the problem of burnout is also directly relevant to our clinical mission. The problem of burned out physicians has reached alarming proportions in Canada. We need to assess and address this problematic issue in our Department. For many of us our academic interests and commitments may contribute to our resilience. As part of a renewed MUHC we also need to address our dated approach to continuing medical education, perhaps replacing our Grand Rounds format with other educational forums. To assist in this endeavour the Department of Medicine will engage someone as director of continuing professional development in the coming year. As we move through the annual evaluation exercise it is apparent that we have enormous talent in our institutions and levels of commitment to excellence that would be hard for uninvolved persons to comprehend. There are many external factors that we cannot influence but I

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would suggest that we keep our eyes on the targets of relevance to us as physicians in university associated hospitals, namely the delivery of excellent patient-centred care in an academic context.

(With thanks to Tom Hutchinson for his thoughts.)



HEALING AND WHOLE PERSON CARE

Dr. Mark Smilovitch

Associate Professor, Division of Cardiology

Faculty, McGill Programs in Whole Person Care

On January 30, I had the privilege of facilitating a panel discussion with patients treated at the MUHC as part of a teaching session on Physicianship for third year medical students. During this session, our patients have the opportunity to share their stories with the class, which offers a deeper view of the experience of illness than usually occurs during clinical encounters. In the course of a very interesting discussion involving both students and patients, one of the patients suggested “Healing Specialists” as an appropriate motto for the work of physicians. This fits well with Atul Gawande’s thesis in his latest book “Being Mortal”. Medicine needs to go beyond ensuring health and survival and must also enable well being. The motto also fits well with the *raison d’être* of McGill Programs in Whole Person Care.

McGill Programs in Whole Person Care was established in 1999 (Dr. Balfour Mount, founding director) in recognition of the need to promote well being, specifically to better appreciate the experience of illness as well as the biology of disease, and to facilitate the potential for healing. With the leadership of current director Dr. Tom Hutchinson (editor of the book “Whole Person Care: A New Paradigm for the 21st Century” published in 2011), the scope of activities includes a wide variety of teaching, research, and community programs.

We are involved in the teaching of Physicianship throughout the four years of medical school, examining the role of the physician as healer and professional, including whole class lectures, panel discussions, small group work, simulation sessions promoting resilience (Dr. Mark Smilovitch) and helping with conflict negotiation (Dr. Joanna Caron), and a new experiential course on mindful medical practice for all medical students prior to clerkship (Dr. Stephen Liben).

In October 2013, we hosted the First International Congress on Whole Person Care in Montreal, and the International Journal of Whole Person Care was established with editorial direction by Dr. Steven Jordan and Dr. Patricia Dobkin. All activities are coordinated with the administrative assistance of Angelica Todireanu and are highlighted on our website: <http://www.mcgill.ca/wholepersoncare/whole-person-care>

Too often we have assumed that in order to focus on the human aspects of medicine we must loosen our grip on scientific rigor and expertise. Our experience is exactly the opposite – what both patients and doctors want is the highest level of technical brilliance combined with an approach that taps the deep human resources that patients and physicians can bring to the challenge of dealing with serious illness. As we prepare for change at the MUHC, it is clear our new facilities are well equipped to provide excellent technical care. The challenge, and opportunity, is to combine that with a culture and a process of care that promotes healing and the well-being of both patients and healthcare workers - whole person care.

THE TECHNOLOGY ASSESSMENT UNIT OF THE MUHC

Dr. Nandini Dendukuri

Associate Professor, Clinical Epidemiology Division, MUHC

Director, Technology Assessment Unit, MUHC

In an era of escalating health care costs, choices must be made to prioritize health services. The Technology Assessment Unit (TAU) was created in 2001 to advise the MUHC in specific resource allocation decisions using a scientific approach and a transparent decision-making process.

TAU consists of research staff and a policy committee. TAU researchers with expertise in epidemiology, biostatistics and health economics prepare health technology assessment reports (HTAs). The policy committee, including health-care professionals, researchers and patients, formulates policy recommendations for the MUHC based on the HTAs. An MUHC staff member with relevant clinical expertise assists in preparation of the HTA and becomes a temporary voting member on the policy committee. TAU is attached to the Division of Clinical Epidemiology of the Department of Medicine.

TAU has published over 75 reports covering a range of health technologies, including devices, drugs and procedures. Reports may address advisability of adopting a new technology or continued use of an established one. For example, in 2009, though percutaneous radiofrequency ablation (PRFA) treatment for liver cancer was available at the MUHC, most patients were treated surgically. A TAU report found that survival rates following surgery and PRFA were comparable; complications were more frequent following surgery; cost of PRFA was approximately \$7000 less per case; and reduced surgery would liberate facilities for other procedures. Accordingly, it was recommended that the MUHC fully fund this technology.



TAU Staff (from the left): Eva Suarathana, Nandini Dendukuri, Maurice McGregor, Nisha Almeida and Lorraine Mines

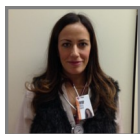
Often, decisions have to be made concerning new technologies in the absence of adequate evidence. An example was transcatheter aortic valve insertion (TAVI) for treatment of aortic stenosis in inoperable patients. A 2009 review by TAU found evidence from uncontrolled, non-randomized studies suggesting the procedure would prove to be effective. This limited evidence, taken together with availability of the necessary clinical expertise and participation in a special access program of Health Canada, led TAU to recommend limited approval of TAVI and creation of a local registry. An updated evaluation in 2012 found that evidence from a randomized trial supported the superiority of TAVI compared to medical management leading to recommendation of its continued availability. Other promising technologies that have recently received a recommendation for conditional approval include intra-operative radiation therapy for breast cancer and islet transplantation as an alternative for whole-organ pancreas transplant.

Not all evaluations result in a recommendation for approval. In a 2011 review of 63 recommendations, 40% recommended approval on the basis of adequately proven benefits at justifiable cost, and 60% recommended rejection or strictly limited use while awaiting further evidence.

TAU reports have occasionally informed Quebec government recommendations, e.g. regarding funding for drug eluting coronary stents. HTA units have now been incorporated in all Quebec university hospitals. Please consult the TAU website for more information including all past reports: <http://www.mcgill.ca/tau>

RECRUITMENT

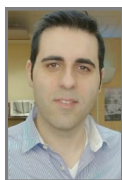
We welcome the following members to our Department.



Dr. Natalie Dayan, Assistant Professor to the Division of General Internal Medicine and Attending Staff at the MUHC. Dr. Dayan obtained her M.D. from McGill University, where she also completed residency training, a clinical fellowship in general internal medicine and subsequently, a MSc degree in epidemiology. She also pursued a post-doctoral research fellowship in obstetric medicine at the University of Toronto and a clinical fellowship in the same field at Hôpital Ste-Justine. Dr. Dayan has developed the Maternal Cardiovascular Health clinic, which is part of the General Internal Medicine Women's Vascular Program at the MGH. Also, she is a founding member of the in- and out-patient Medical Obstetrics Consult Service. Dr. Dayan will be active in the training of medical students and supervision of residents and fellows at various McGill-affiliated teaching sites, including the MUHC.



Dr. Fares Kalache, Assistant Professor to the Division of Rheumatology and Attending Staff at the MUHC. After obtaining his M.D. from St. George's University, Grenada, West Indies, Dr. Kalache completed residency training in internal medicine at the University of Pennsylvania Health System, followed by a research fellowship in rheumatology at the Université de Montréal. He subsequently did his residency training in rheumatology at McGill University. Most recently, he obtained training in musculoskeletal (MSK) ultrasound for rheumatology and a Certificate in Medical Education. Dr. Kalache will be active in the training of medical students and supervision of residents and fellows at various McGill-affiliated teaching sites, including the MUHC and St. Mary's Hospital. He will be responsible for developing and incorporating a MSK ultrasound curriculum into the Rheumatology residency training program at McGill.



Dr. Alexander Tsoukas, Assistant Professor to the Division of Rheumatology and Attending Staff at the MUHC. Dr. Tsoukas received his M.D. from McGill University in 2008, where he completed residency training in internal medicine and rheumatology. He pursued additional post-graduate clinical training through a fellowship in the area of sero-negative spondyloarthropathies at the University of Glasgow. Dr. Tsoukas will be active in the training of medical students and supervision of residents and fellows at various McGill-affiliated teaching sites and will be responsible for the spondyloarthropathy component of the Rheumatology residency training program at McGill.

PROMOTIONS

Congratulations to our Faculty members for their achievements!

FULL PROFESSORS

Dr. Russell Hepple: Primarily in the Department of Kinesiology and Physical Education, Dr. Hepple is an Associate Member in Critical Care Medicine at the MUHC and a member of the Meakins-Christie Laboratories. He is known for his research work in biology and physiology of aging skeletal muscle.

Dr. Vera Hirsh: An Associate Member in the Division of Medical Oncology and based at the MUHC, Dr. Hirsh's clinical focus is on lung cancer.

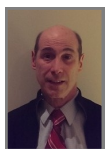
ASSOCIATE PROFESSOR

Dr. Sarit Assouline: Based at the Jewish General Hospital in Oncology, Dr. Assouline's research interest is in the development of new drugs for the treatment of leukemia and lymphoma.

GSK/CIHR RESEARCH CHAIR

Dr. Jean Bourbeau, Professor in the Respiratory Division and Director of the Respiratory Epidemiology and Clinical Research Unit at the Montreal Chest Institute, has been awarded a **GSK/CIHR Partnered Research Chair "Better Understanding of COPD, and Intervention Guides"**. His research chair will focus on chronic airways diseases, with a particular focus on COPD, and recognizes his longstanding interest and leadership in this area. Research Chairs have been established at many of Canada's medical schools (or affiliated research institutes) in disciplines where specific universities are particularly strong, and where GlaxoSmithKline and CIHR both have clear scientific interest.

APPOINTMENTS



We are pleased to report that **Dr. David Blank** has been appointed as **Director of the Division of Medical Biochemistry, Department of Medicine, MUHC** effective March 1, 2015 for a four-year term. Dr. Blank has been the Interim Director of the merged RVH/MGH Divisions since July 2012 and, prior to that time, garnered significant experience as the chief of the RVH site. We wish him continued success in this role.

The Faculty of Medicine has appointed **Dr. Mark Eisenberg** as **Director of the MD/PhD Program** at McGill, effective December 1, 2014. Professor in the Division of Cardiology and based at the Jewish General Hospital, Dr. Eisenberg brings extensive experience as a medical practitioner, scientist and graduate research supervisor to the position.

FOUR OF OUR MEMBERS APPOINTED LEADERS FOR SITE TEAMS OF THE ROSSY CANCER NETWORK

The Rossy Cancer Network is a partnership of the McGill University Faculty of Medicine, the McGill University Health Centre, the Jewish General Hospital and St. Mary's Hospital Center. Its mission is to improve quality, effectiveness and efficiency across the continuum of cancer care.

Dr. Victor Cohen, jointly appointed in Medicine and Oncology and based at the JGH, and **Dr. Scott Owen**, medical oncologist based at the MUHC, will co-lead the Lung Disease Site Team.

Dr. John Storrington, Division of Hematology and based at the MUHC, will lead the Hematologic Malignancy Disease Site Team.

Dr. Thierry Alcindor, jointly appointed in Medicine and Oncology and based at the MUHC, will lead the Gastro-Intestinal Disease Site Team.

HONOURS

Congratulations to our members for their achievements !

Dr. Brian Chen, Assistant Professor in the Departments of Medicine and Neurology & Neurosurgery is one of 5 award winners of the **NIH's Follow that Cell Challenge**. The goal of the challenge is to stimulate the development of new tools and methods that will enable researchers to predict the behavior and function of a single cell in complex tissue over time. [Read more on this story.](#)



Photo: Patrick Vespa



Dr. Joseph Cox, Associate Member in the Division of Infectious Diseases (primarily appointed in the Department of Epidemiology and Biostatistics), is a recipient of the **Canadian Association for Medical Education's 2015**

Certificate of Merit. The aim of this award is to promote medical education in Canadian medical schools and to recognize and reward faculty's commitment to medical education.

Dr. Qutayba Hamid, James McGill Professor of Medicine and Director of the Meakins-Christie Laboratories, has been awarded the **Distinguished Scientist Award from the Canadian Society of Clinical Investigation**. Dr. Hamid is recognized internationally for his contributions to research on asthma, chronic obstructive pulmonary disease, and airway inflammation.



Leading Alzheimer's researcher **Dr. Judes Poirier**, Professor in the Departments of Medicine and Psychiatry, is amongst the prestigious annual list of the **10 Discoveries of the Year 2014** selected by the magazine **Québec Science**. [Read more on this story.](#)

Dr. Robyn Tamblyn, Professor in the Departments of Medicine and of Epidemiology and Biostatistics and Director of the Clinical & Health Informatics Research Group, has been named to the **Order of Canada**. Dr. Tamblyn is a leader in the development of e-Medicine and was named Member for her significant contributions to patient safety, notably through her research on physician training, health system monitoring and prescription drug management.



IN MEMORIAM

By: Dr. Ian Malcolm



Dr. Allison David MacDonald, well known and respected cardiologist and internist, passed away on February 7, 2015 after a brief illness.

"A. D." as he was known around the RVH, was of the "Old School". When I was training in Internal Medicine he was already many years a Senior Physician at the Royal Victoria Hospital.

Although soft-spoken and unassuming, he presented an impressive and professional appearance. He was dignified, and was always impeccably attired. He was a man of few words but was always unfailingly polite. He was a very private person and could rarely be coaxed into a prolonged conversation. However he had an active mind and eclectic interests, and on occasion would lapse into animated conversation. I always found what he had to say was interesting. He was a traditionalist but was also very much an individualist. Indeed he had the ability to think "outside of the box", before such thinking was all the vogue.

He had come from Prince Edward Island where as a child he attended some of what must have been the last church services conducted in Scottish Gaelic. He had served in the War but like so many of his peers of the "Great Generation", he spoke little of it.

He was the "Executive Health" doctor at the RVH and he projected the appropriate image to fill that role. He had a genuine admiration for the captains of industry that he served. He found them interesting. He manifested a quiet confidence which allowed him to treat a group of patients who were neither used to, nor prone to taking instructions. His experiences were of course never shared. A. D. was a paragon of discretion.

Dr. MacDonald endured loss and pain but never succumbed to despair. He never burdened others with his problems. He dealt with life's challenges with strength and patience. He exemplified the old-fashioned virtues: loyalty, attention to duty, integrity. In these ways his example is to be noted.

By: Dr. Nadia Giannetti



Dr. Luc Bilodeau passed away accidentally and tragically on January 29, 2015. He was a highly respected

interventional cardiologist, teacher and innovator, as well as a dear friend and colleague to many of us. He was well loved by his many patients. His passing is a huge shock and loss for the Division of Cardiology.

Dr. Bilodeau's career began at the Montreal Heart Institute in the early 1990's, before being recruited to the MUHC in 2010 as Director of Interventional Cardiology. Dr. Bilodeau was also a well-established clinical investigator. He had over 100 publications and participated in some of the world's most important clinical trials related to coronary artery treatment. His work focused on novel technology for coronary interventions in collaboration with international colleagues. He traveled widely to present his work and mentored numerous residents and students.

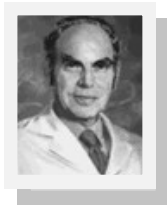
He leaves behind his wife and two young children. Our thoughts are with Luc's family and his many friends.

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IN MEMORIAM

By: Dr. William Gerstein



Dr. Roy Forsey
passed away
peacefully at home
on January 13, 2015
at the age of 99.

A graduate of the University of Toronto and a Surgeon Lieutenant in the Royal Canadian Navy during World War II, Dr. Forsey was the long-time Chief of Dermatology at the Montreal General Hospital and one of the outstanding leaders in Canadian dermatology in the second half of the 20th century. The dermatology program that he developed and led at Montreal General Hospital and McGill trained many of the leading figures in Canadian dermatology from coast-to-coast as well as elsewhere in the world. After his official retirement as Dermatologist-Chief in 1981, he continued his clinical and teaching activities for many more productive years. He will be missed by all those who knew him.

Donations can be made to the Canadian Dermatology Foundation, 1385 Bank Street, Suite 425, Ottawa ON K1H 8N4, or to the charity of your choice.

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to josee.p.cloutier@muhc.mcgill.ca.

The Department of Medicine's number of successes is prolific. Although every attempt is made to acknowledge them all at the time we go "to press", some announcements may be delayed. Do not hesitate to contact us to let us know of your successes.