



MEDICINE

edition



Celebrating **Students**

THIS ISSUE

- 3** Dr. Richard Schreiber gets the Class of '81 into the Fundraising Spirit
- 4** Student Life in the Faculty of Medicine
- 6** Marylise Boutros: Resident Educator
- 7** Helping Hands: Graduates Funding Student Bursaries
- 8** McGill Luminary: David Thomas
- 9** Global Health Programs
- 10** School of Nursing Bringing Hope to the Tanzanian Highlands
McGill's Nursing Alumni Association
- 11** McGill Alumni present at CME Symposium in Trinidad and Tobago
Update on FMSQ dispute
- 12** News from the Office of Development, Alumni and University Relations
Homecoming 2007
- 13** Alumni Physician Program
- 14** McGill 1821 Society Members
Remembering former Dean of Medicine Patrick Cronin
- 15** Faculty Update
McGill hosts Medgames

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*Cover Photo - Students and
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The central and centripetal force of academic health centres is the school of medicine. And our Faculty focuses on educating our students, a formidable group from undergrads to post-docs to Continuing Medical Education students.

The importance of this focus was described by Osler, “The work of an institution in which there is no teaching is rarely first class. There is not that keen interest or the thorough study of the cases...” This and the research which arises from their constant inquiry makes the care provided by academic health centres the best available and the literature now documents this amply. To uphold its outstanding reputation, McGill attracts the best and brightest students each year – individuals who have the ability to make significant contributions to the arts and sciences and to leave a lasting impression on the world.

Another piece of our education puzzle is the ongoing need for funding, since without it, the foundation on which our university is built would be simply forethought. Everyday, McGill faculty, staff and students benefit from the generous support of so many of our alumni and friends – support that enables us to prosper and exceed our academic and research goals.

This issue of *In Focus* recognizes but a handful of the hundreds of students who are leaving their indelible mark on the Faculty of Medicine and the many private donors who are enabling them to pursue their scholastic dreams. Through student bursaries, scholarships, fellowships and awards, our alumni and friends are making a direct and life-long impact on the students who will benefit from a world-class education of the highest quality.

This edition also highlights medicine’s shift to a global dynamic that is naturally affecting the way public health care is addressed worldwide. The School of Nursing’s Highlands Hope project in Tanzania, Dr. David Thomas and his new project addressing orphan and neglected diseases, and finally, McGill’s Global Health Programs, which manages educational, clinical, developmental and research programs both in Canada and internationally, all demonstrate McGill’s commitment to broaden our understanding of major international health issues and take steps to ensure that knowledge gained is used to improve care and enhance the well being of our global society.

I hope that this issue inspires you to examine your own contributions to the medical profession; be they to a small community in rural Quebec, a foreign population in need in a developing nation, or the scientific advancement of your field as a whole. I also hope that you share my pride in the outstanding achievements of our students, whose idealism, innovation and commitment to care is clearly a sign of positive things to come for medicine in the future.

Richard I. Levin, MD
Vice-Principal (Health Affairs)
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Dr. Richard Schreiber gets the Class of '81 into the fundraising spirit

Twenty-five years after graduation, most of us are secure and stable, with careers in full swing. It's a good time to reflect on all that our McGill education has allowed us to accomplish," says Richard Schreiber, BSc'77, MDCM'81, a pediatric gastroenterologist based at the University of British Columbia and the B.C. Children's Hospital in Vancouver.

"We had an excellent education that allowed us to become experts in our fields." Today, he notes, medical schools are coming under greater financial pressure, and education expenses are rising significantly. With that in mind, the Class of '81 embarked on its 25th reunion project: raising money to create a bursary for a student in financial need. "We thought this idea was important," says Schreiber, "because we had been taught in one of North America's oldest and finest medical schools, and had benefited from that education." The bursary, he explains, will enable more students to share in that privilege.

In the quarter-century since the Class of '81 graduated from McGill, Schreiber, with former classmates Simon Wing, BSc'77, MDCM'81, a professor of Endocrinology at McGill, and Nancy Epstein, MDCM'81, an ophthalmologist based in Toronto, have kept their graduating class connected through newsletters and regular reunions. When their 25th anniversary rolled around, Epstein and Wing, along with Andrew Douglas, MDCM'81, and Douglass Dalton, BSc'77, MDCM'81, planned the Homecoming Medical Seminar and a reunion class dinner. Schreiber, the third member of what he nicknames "the triumvirate," became responsible for the fundraising drive. In August 2006, he drafted his cross-continental committee: James Torosis, BSc'77, MDCM'81, and Linda Waters, MDCM'81, both in California; David Leffell, MDCM'81, based at Yale; and Montreal's Arthur Swift, BSc'77, MDCM'81. They set a lofty goal of \$80,000, and set about phoning, emailing and writing to their classmates to drum up support. The Class of '81 proved more than equal to their challenge. As of press time, they have raised close to \$100,000 – a McGill record for 25th anniversary class gifts. "It's a terrific achievement, and a testament to people's feelings about their experiences at McGill," says Schreiber. "The enthusiasm generated, and the response, was extraordinary."

A Montreal native, Schreiber has a deep and longstanding connection to McGill and was awarded the Scarlet Key in recognition of the energy he put into leadership activities during his years of



Class of '81 Reps (From left to right): Drs. Richard Schreiber, Nancy Epstein and Simon Wing.

study. These included, among other things, organizing and running McGill's Open House program, (then known as *Entre Nous*), when he was a student. "I was involved in a lot of extracurricular activities, which expanded my scope beyond scholastic endeavours and helped me to recognize the importance of working with people from all walks of life," he says. "McGill is an international university, so I met people from everywhere. That was very important for my own development, and has done well for me in my career."

In addition to his undergraduate degree in general science, and his medical degree, he carried out an internal medicine internship at the Montreal General Hospital before switching to pediatrics and completing his residency at the Montreal Children's Hospital. Following another residency specializing in pediatric gastroenterology at Harvard, Schreiber returned to Montreal and taught for several years in McGill's Department of Pediatrics, where he also ran the pediatric liver transplant program. "Over the long term, I've found it tremendously rewarding to work with children," he says. "In a given day of work, you're dealing with young families and kids of all ages. It makes for a tremendously dynamic professional experience." In 1997, Schreiber moved to Vancouver to become a professor in Pediatrics at UBC – "which some people call 'McGill West,'" he laughs. "There are a lot of alumni here. And I still feel very attached to McGill."

"We had an excellent education that allowed us to become experts in our fields."

Student life

Living the *Vita da studioso*



Lois Finch, recent PhD graduate in rehabilitation

Student life in the Faculty of Medicine: *It is the stuff of memories recounted at class reunions far into the future. It involves countless hours of work, often under high pressure, but it can also be a stimulating and creative time. Here we profile three students whose activities have enhanced knowledge, education and student life in the Faculty of Medicine.*

Lois Finch: *The Measure of Knowledge*

Lois Finch, BSc'72, MSc'86, PhD'07, understands the variable nature of student life better than most. After completing her undergraduate degree in physiotherapy, she worked at the Montreal General Hospital and the Montreal Neurological Institute before coming back to McGill to study for her master's in rehabilitation. She then repeated the process, working at the McGill University Health Centre (MUHC), and returning in 1998 to begin her doctorate, also in rehabilitation.

"My master's work made me a better physiotherapist," she says. "I looked at patients differently; it was the equivalent of 10 years added experience." But after being in clinical practice for several years, Finch realized she needed to reconnect with academia. "When you are working you don't have time to think and learn," she says. Fortunately, she points out, McGill has eased the way for clinicians to return to school, offering evening and part-time courses.

Finch's research, carried out under Nancy Mayo, MSc'78, PhD'86, who holds joint appointments in Epidemiology and in the School of Physical and Occupational Therapy, focused on developing a physical therapy program to help stroke victims recover. For her master's degree, she designed a therapy for supporting patients in treadmill exercises as they learned how to walk again, but then began to wonder how to export this therapy to clinical practice. That question set the stage for her doctoral research, which eventu-

ally involved developing a measure to identify who would benefit from such therapy. "If you cannot measure something, you cannot understand or change it. But now we have so many tests that we risk simply measuring people rather than treating them," she says. In response, Finch developed a method of assessing post-stroke physical and neurological functions that is both compact and comprehensive.

Currently, she is carrying out postdoctoral research on post-stroke depression as part of Mayo's team in clinical epidemiology. "We have already measured function, and the logical next step is to examine mood and emotions," she says. "So we're looking at depression, and while doing that, we'll also test my measure on function to see whether function influences how patients feel."

Tim Lussier: *Practical Energy*

Currently entering his third year of medical school, outgoing president of the Medical Students' Society (MSS), Tim Lussier learned about health care at an early age. "As a kid I had food allergies and respiratory problems, so I spent a lot of time in the hospital," he says. "So now I feel comfortable when I see an ambulance or walk down a hospital corridor." His experiences also gave him a taste for the doctor's role. "From a very early age I empathized with people and wanted to do medicine," he says.

Despite this precocious realization, though, Lussier has followed a winding route to his medical studies. He didn't feel ready to enroll in medicine after his undergraduate studies in the United States and instead studied massage therapy in New York City. But the events of 9/11 prompted him to move. After working as a waiter for about a year, he found himself teaching high school anatomy and biology in Maine. During this three-year stint, he finished his remaining prerequisites for medical school and prepared to pursue his dream. McGill was an obvious choice, for both academic and personal reasons. "I'm from Maine, but my father's side of the family comes from Quebec," he explains. "I wanted to come here and learn French because of that familial tie."

Once at McGill, Lussier quickly found himself in a position of responsibility. "From the start I began doing the things commonly associated with being a president, so taking on that role was a natural transition for me." But leadership is demanding, especially with last fall's Fédération des médecins spécialistes du Québec disruptions, and Lussier estimates he devotes over 20 hours a week to various MSS duties: answering e-mails, but also advocating for student interests, consolidating web resources for teaching and clubs, arranging to have grades and audio files of lectures posted online, renovating the

Tim Lussier, medical student



Medical students' annex, and countless other activities. His dedication was acknowledged last spring with the Students' Society of McGill University's 2006 President of the Year award and McGill's 2007 Gretta Chambers Student Leadership Award. "I'm really very practical: I just want to make things work better for people," he says.

Sam Vaillancourt: *Changing the Future*

Sam Vaillancourt, BA'04, has already begun to change the world of his fellow medical students. In his first year of medical school, he and a group of friends began to think that "the reasons that brought us to medical school were becoming distant from our first-year experience – which was a lot of biomedical sciences, but very little contact with real people," he says. So they formed the Community Health Action Partnership (CHAP), creating partnerships with community organizations and contacting faculty members who were involved with social aspects of health. This past year McGill picked up on the idea and launched a pilot program that sent first-year medical students to work for several hours a week with one of CHAP's community partners. Each month, the students participated in a seminar with a faculty member. The experiment has been a resounding success, and next year the Faculty will introduce this community health elective as a credit course in the curriculum. The idea may be exported to other medical schools as well, as CHAP has been invited to present a workshop to The Association of Faculties of Medicine of Canada (AFMC).

Vaillancourt, who will be starting his fourth year of medical school, has an extensive history in community and global health projects. He has worked as a summer intern in Haiti with a Canadian organization devoted to treating tuberculosis and with the Missionaries of Charity in Cité Soleil, the biggest slum in Haiti's capital, Port-au-Prince. As an undergraduate student in International Development studies, he and

*Sam Vaillancourt,
medical student*



two others started Horizons, an initiative that pairs inner-city elementary school kids with teenagers who serve as mentors. "I learned a lot about taking on responsibilities," he says of the experience. Horizons is now administered by Big Brothers Big Sisters of Greater Montreal.

In 2003, just before beginning medical school, Vaillancourt served as an intern with an international development program in Burkina Faso, and after his first year of medical studies he went to Ecuador to help conduct a survey on violence against children. And last year, as VP, International Health Liaison of the MSS, he and several other students helped to develop an online database of global health electives available to medical students. Vaillancourt also organized a series of talks on global health throughout the year as part of the McGill International Health Initiative and he co-authored a document on integrating global health in medical education for McGill's Global Health Programs, which was presented to members of the AFMC. The energy he directed to these various projects was recognized in 2006 with a prestigious Forces Avenir award (university student awards sponsored by federal and provincial governments as well as members of the business community) for himself as "undergraduate personality" and for CHAP as the top health project.

"Now I'm doing rounds in the hospital, and it's great: there is nothing like being part of a team and having an impact on patient care," he says. "You learn a lot about life at different stages. It's a very special, very privileged position to be in."

Marylise Boutros: Resident Educator



General surgery resident, Dr. Marylise Boutros

A medical resident's life is fast-paced, occasionally even frantic. As young physicians, residents are intent on mastering their specialties.

Marylise Boutros, BSc'98, MDCM'04, knows this well, both as a resident in general surgery – she has completed three years – and as the president of the McGill General Surgery Residents' Committee. “For the first two years, you adjust to performing the best you can in the hospital, and it can become your life,” she says. “And then you learn to balance things a bit better.” Her residency education is also providing material for studies with the Centre for Medical Education, where she has been awarded a year-long Fellowship in Medical Education. “As residents, we do a lot of work but very little reflecting on how we are being educated. But here you can reflect on the last three years of education and on how you can improve the next three years,” she says. “It's a haven.” In addition to following courses in the Faculty of Education, Boutros will complete two research projects during her fellowship year.

“We tend to learn surgery through apprenticeship, and technical skills that are vital to surgeons are evaluated by a check-mark at the end of three months,” says Boutros. Her team, led by Associate Dean, Postgraduate Medical Education and Professional Affairs, Sarkis Meterissian, MDCM'85, MSc'90, has created a feedback card to be filled out by surgeons at the end of every operation, which will give residents information about their strengths and weaknesses. “We've polled expert teachers in making this card, and will launch it with residents to see if it is a valid and helpful way of assessing their skills,” Boutros says. The second project addresses the decision-making element of surgery. “Surgeons make decisions all the time,

but often you don't have all the variables you need,” she adds. “However, if you wait until you do, the patients will either die or leave the hospital.” There is currently no formal way of testing these crucial skills, so the team has created a written test in which residents are given situations for which there are no clear-cut correct responses; instead, the answers are based on an analysis of the responses given by a pool of expert general surgeons from across Canada. McGill residents have given the test a “thumbs up” (it was shown to be a valid and user-friendly instrument), so now a nation-wide study will ensure its validity. “I didn't come into surgery saying I wanted to be an educator, but as a resident you learn on the go, and you are also teaching others along the way,” says Boutros of her interest in medical education. “Once you know something, it's a lot of fun to share it. And teaching something also helps you learn it better. I realized that teaching is a way to grow, self-reflect and help others grow.”

Learning is clearly a pleasure for the energetic, effervescent Boutros. She is also taking advantage of the Department of Surgery's research option to carry out an 18-month research project, funded by an endowment to the Surgical Scientist program, that will earn her a master's degree in experimental surgery (she already has a master's in human genetics to go with a bachelor's degree in biology). Working with Jeffery Barkun, MDCM'83, MSc'94, Chief of General Surgery in the Department of Surgery, Boutros has previously studied the impact of the virulent bug *clostridium difficile* on transplant patients, who, being immuno-suppressed, are particularly vulnerable to infection. “We wanted to determine what hints are predictive of a bad outcome, so you can treat the patients at risk right away,” she says, of this recently published work. Now, she is examining outcomes in liver transplant surgery. At present, outcomes are reported from a physician-centred viewpoint which looks at the organ rejection rate, the infection rate and so forth. “I am proposing a new way of reporting outcomes termed ‘clinical benefit,’ which looks at outcomes from the patient's point of view – how many patients are rejection-free and infection-free, with a good quality of life? It sounds straightforward but sometimes we don't know how many people really benefited,” she says. “If you get cured but still have a lot of painful complications, this is not a very good outcome. So I'm developing a model in which outcomes are more patient-centred.”

Boutros's fellowship and master's research, carried out side-by-side, will add another 18 months to her residency, but she has no regrets on that score. “This year has been a pleasure,” she emphasizes. “And working with people is really wonderful. When I'm in the hospital I forget myself. You learn a lot talking to people. You learn from patients, from the cleaning crew, from your bosses – you learn from everyone.”

Three generations of graduates fund student bursaries



**Lawrence Hutchison, BSc'49,
MDCM'53**

"Medicine is changing much faster than it used to," says Lawrence Hutchison. "I suspect the difference between my time and my grandfather's is much less than from my time to the students today. As an oncologist I treated cancer and leukemia. When I started, most of the time cancers were only cured surgically. Drug treatments were in their absolute infancy, but now many of those diseases I treated are frequently cured, which is quite revolutionary." Since 1959, Hutchison has been an associate professor in the Departments of Medicine and Oncology, and he remains involved with the Faculty's Institutional Review Board. And there are many other McGill links: his grandfather, Alexander Hutchison, MDCM 1883, (for whom Hutchison's bursary is named) was a full professor at McGill and head of Surgery at the Montreal General Hospital, while his uncle Keith Hutchison was an assistant professor on staff at the Royal Victoria Hospital. His son Stuart, MDCM'86, is an associate professor at the University of Toronto, while his daughter Nancy, MSc'96, is a nurse in the Oncology Day Centre of the MUHC.

Hutchison's graduating class has remained close over the years, regularly attending reunions. "Our record is quite impressive," he says. "My class had a lot of war veterans, so many of them are older than me." Despite the number of years that separate Hutchison from his days at McGill, he has many fond memories of student life. He hopes that the bursary he has established will help to enrich the lives of future medical students who will inevitably follow in his footsteps.

Remembering their own student years, many alumni reach out to offer a helping hand, in the form of bursaries, to students in financial need. Here we meet three such alumni.



Robert Rothwell, MDCM'71

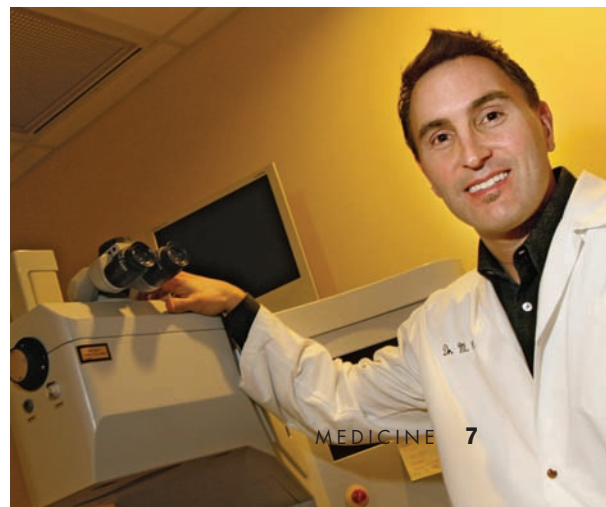
"The anatomy lab was like something from a 19th-century etching," recalls Robert Rothwell of his early learning environment. But while the lab may have evoked an earlier era, the teaching was exemplary. "Professors Banfill, Clermont and Leblond were outstanding and seminal in the influence they had on me," he says. In addition to his practice, Rothwell, now a rheumatologist with a private practice based in New Westminster, B.C., enjoys gourmet food, wine and his Harley-Davidson motorbikes, and regularly appears as a medical specialist in the courtroom. "I love testifying and being cross-examined," he says. "It's a leisure-time activity for me." Recently, he established the G. Sheldon Rothwell Bursary for students in financial need. The bursary is named after his father, a 1937 graduate. "I want to return something to the University that was so helpful in advancing my career," he says. "I've calculated the cost of my education for the university and taxpayers and converted it into current dollars, and I want to repay that fund while I can still appreciate my philanthropic efforts."

Rothwell remains in touch with many fellow graduates. "I feel closer to my classmates nowadays than when we were students focused on learning," he says. "I also like going back to Montreal, now that I don't face the need to pass exams."

Mark Cohen, MDCM'92

When Mark Cohen began his medical studies in 1988, laser vision correction was a theoretical subject; today 140,000 are carried out annually in Canada. "My timing was fortuitous because Lasik surgery, a type of laser surgery, started gaining popularity right when I graduated," he says. "But very few people had the training needed." Between 1998 and 2001, he and Dr. Avi Wallerstein were national medical directors for Lasik Vision. In 2001, they bought many of that company's locations and launched Lasik MD. Today, Cohen is the company's president, and about 40 per cent of all laser vision correction procedures in Canada are done in one of Lasik MD's clinics, which currently number 18.

In addition to these professional activities, Cohen also teaches laser eye surgery to ophthalmology residents from McGill, the Université de Sherbrooke and the Université de Montréal. "I had a lot of fun at McGill," recalls Cohen. In addition to playing basketball, softball and flag football, he was responsible for organizing social affairs for the residents' association. He was also winner of the Holmes Gold Medal, awarded to the student with the highest academic standing after four years of medical school. "I was quite active on the social scene," he says, "but I studied hard too." Having received financial aid as a student, Cohen is proud to be in a position to give back to his alma mater.



David Thomas



Dr. David Thomas

When Dr. David Thomas arrived at McGill in 2001 as the new Chair of Biochemistry and the Canada Research Chair in Molecular Genetics, he “hit the ground running.”

His first task was to prepare the Canada Foundation for Innovation grant proposal that earned \$78-million for the construction of the Francesco Bellini Life Sciences Building and Cancer Pavilion, which are set to open in spring 2008. In the years before taking on this role, Thomas, who was based at the National Research Council of Canada’s Biotechnology Research Institute in Montreal, was well known in the McGill community for his collaboration with the Department of Anatomy and Cell Biology’s Dr. John Bergeron, BSc’66. Together, these two scientists published groundbreaking work on the role of the “chaperone” protein calnexin in the biochemical process of protein-folding. “If your proteins are not folded in the correct manner, you can’t respond to viruses or infections, or your body starts to reject itself,” says Thomas. “This problem forms the basis of lots of diseases. Calnexin works as a part of a quality-con-

trol mechanism that destroys proteins that are not folded properly.” Since he has been at McGill, Thomas has worked with many other McGill researchers, including Dr. Kalle Gehring in Biochemistry and Professor Mike Hallett at the McGill Centre for Bioinformatics on the fundamental problems of protein folding.

Today, Thomas is focusing his energies on a particularly troubling consequence of rogue proteins: the degenerative disease cystic fibrosis. “It is the poster child of genetic diseases, with the gene having been discovered by Canadian and US researchers in 1989, so we know what the defect is – the protein is functional, but is in the wrong place in the cell,” he

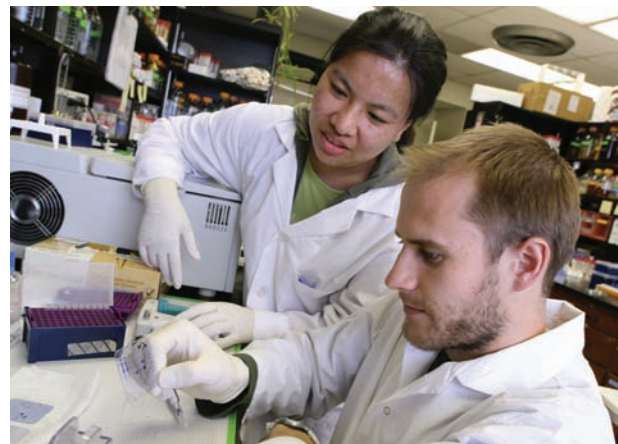
says. Cystic fibrosis is the simplest of monogenic diseases, the mutation is known, and consequently, the scientific community believed that a cure would be found quickly. But the obvious approaches didn’t work and with a comparatively small target market of 60,000 to 80,000 patients worldwide, drug companies have been reluctant to invest the time and money necessary to find a cure. Time is in short supply for people with cystic fibrosis, who can expect to live, on average, about 35 years with the disease. And while the target market may be too small for drug-company interest, that is of little comfort to Quebecers, who have a high prevalence of cystic fibrosis.

While academic researchers can usually only dream of the resources used by drug companies, Thomas has a knack for translating dreams into reality. He leads the Canadian Chemical Biology Network, created to build the kind of massive drug libraries that provide investigators access to the banks of known compounds – often off-patent drugs – that are normally the domain of industry giants. With funding from various government bodies and foundations supporting

a coordinated research effort, he has organized the screening of 100,000 compounds to see which ones might move the protein from one part of the cell to another. Working closely with researchers such as Dr. John Hanrahan in the Department of Physiology and Dr. Bob Nadon at the McGill University and Genome Quebec Innovation Centre, as well as graduate students and postdoctoral fellows, Thomas feels that they may have found a synergistic combination of compounds that could have the desired impact on the mutant protein. “I think we are onto something really exciting,” he says, also adding a note of caution. “We’ll know more in time.”

The research fits well with Thomas’s new project – the McGill Orphan and Neglected Diseases Enterprise, or MONDE, which began to take shape in fall 2006. The project was driven by the idea of focusing on those diseases that receive less attention from pharmaceutical companies. “Philosophically, the biomedical enterprise is failing in its treatment of these diseases. We’re failing to deliver on promises,” he says. “MONDE brings together people working on diseases like cystic fibrosis and Parkinson’s, to share ideas and resources. So far, it is an informal chat club, but people are incredibly enthusiastic.” Thomas is currently working within MONDE to establish a translational centre for cystic fibrosis research, bringing together research and clinical resources. “We could have many of these sorts of goals existing within this very informal network,” he says. “It is our duty to make sure our research translates into some benefit for society.”

Dr. Thomas currently has 14 students in his Biochemistry lab, at the undergraduate, graduate, doctoral and post-doctoral level. (From left to right) - master’s student, Elaine Wei-Fun Tan, BSc’06, and doctoral student, Veli-Pekka Määttänen, working in the lab.



Global Health Programs Offer International Perspective to Research

Second-year medical student Rasa Izadnegahdar came to McGill because of the Faculty of Medicine's reputation for its international perspective, an especially alluring quality to someone whose undergraduate studies in international development had taken him to Cambodia and Burkina Faso.

"But in first year," he says, "I realized that the curriculum didn't give much exposure to these issues." As Izadnegahdar was settling into Montreal, however, so was Dr. Tim Brewer, recruited from Harvard to become director of the Faculty's International Health Office. He came with impressive credentials: a senior fellow on Harvard's International Committee, dedicated to developing international opportunities for medical students, and program director for the 12,000-member International Society for Infectious Diseases – in addition to being a tuberculosis clinician and researcher. One of his first steps was to change the name of his office to Global Health Programs. "When most people think of international health they think of problems that occur to poor people far away," he says. "When you talk about global health, you are talking about problems that affect all of us." One example is Severe Acute Respiratory Syndrome (SARS), which rapidly spread from southern China across the world and claimed victims in Toronto and Vancouver.

"My job when I came here was to figure out how to improve McGill's global health profile internationally," he says. "What separates us from Harvard or Johns Hopkins or Toronto, and how do we translate these unique features into programs that allow us to address the major health concerns of our time?" To this end, Brewer and research assistant Nicole Saba, BSc'01, MSc'04, are creating a database of all the international projects carried out by Faculty members, and identifying them on a web site. "We have never centralized this kind of information, which has been a big problem," says Saba. "It is difficult to have McGill recognized internationally for global health, when we ourselves don't know what is going on." Interestingly, the database has revealed a significant number of collaborations with Peru's Universidad Peruana Cayetano Heredia in Lima, and Brewer would like to

develop the relationship more formally, in addition to building links with institutions in Africa, Asia and the former Soviet Union. Ultimately, the information will help to build professional collaborations among colleagues within and outside of McGill that include coordinating grant applications. This information could also guide future discussions about the Faculty's direction in global health projects. "We need to identify areas where we can build a program that represents our strengths," he says. "And the timing is right. Government and foundations are interested in supporting global health projects."

Students are also interested. In fall 2005, Izadnegahdar organized a group of almost 25 other first- and second-year students to work with Global Health Programs in defining how global health medicine was taught in medical schools across Canada, giving the Faculty a better sense of where McGill stands. "We talked to different schools about what they were doing, compiled that information and did a very thorough background search of why it is important to provide global health education," says Izadnegahdar. The group, known as the McGill International Health Initiative (MIHI), produced a document that was approved as a position paper by the Canadian Federation of Medical Students and was presented at the May 2006 AGM of the Association of Faculties of Medicine of Canada (AFMC). In addition, Brewer is drawing on the MIHI report as he chairs the AFMC committee on what aspects of global health education should be considered fundamental for today's students, especially as more young physicians move into the field. "We must decide what knowledge and skills students should have when they graduate," says Brewer. "So far, the students have been way ahead of faculties on these issues." Studies show that somewhere between 50 and 75 per cent of North

American medical students are interested in global health, and currently about 25 per cent of them travel overseas for an elective at some point in their schooling. However, most arrange these electives themselves with little input from their faculties. "In addition to capacity building and education, another priority area would be to create opportunities for students and provide them with information on learning objectives and supervisors," says Saba. Izadnegahdar, for one, would be pleased. "I'm becoming a physician because I want to contribute in places where there are too few to serve the need," he says. "I hope to be working predominantly overseas."

For more information, please visit the McGill Global Health Programs' website at www.mcgill.ca/globalhealth, or the McGill International Health Initiative's website at <http://mihi.treatthepeople.com>

Dr. Timothy Brewer, director of McGill's Global Health Programs, with research assistant Nicole Saba.





School of Nursing

Bringing Hope to the Tanzanian Highlands

Christina Clausen, member of the School of Nursing's International Advisory Council and the first McGill Nurses for Highlands Hope Fellow.

Betty Liduke is a local legend in Njombe, Tanzania. She's an experienced nurse leading the battle against HIV/AIDS at the Tanwat Hospital, where perhaps 20 per cent of the population carries the virus. "She's a very powerful, committed person," says Christina Clausen, MSc'02, who should know, having lived with Liduke from September until mid-November 2006, as the first McGill Nurses for Highlands Hope Fellow. Clausen's two-and-a-half months

with Liduke involved visiting the three sites associated with the Highlands Hope project in Njombe, Ikonda and Bulongwa, learning about the specific challenges of providing care in the region, and brainstorming with Liduke to determine how McGill could build relationships and help support health care in the southern highlands of Tanzania. "We're trying to develop our relationship so that students can become involved in projects that will benefit the people of Tanzania, while giving students an enriching experience learning about nursing in an entirely different social and cultural context," Clausen says.

Clausen, a member of the School of Nursing's International Advisory Council, was initially intrigued by the project after one of the School's Assistant Directors, Madelaine Buck, BSc'79, MSc'87, took an exploratory visit to Tanzania in January 2006 with Montreal journalist and filmmaker, Royal Orr. Orr created Highlands Hope after seeing the ravages of HIV/AIDS in the region, while filming a documentary. In summer 2006 the organization helped bring a Tanzanian team, including Liduke, to the International AIDS Conference in Toronto. "I think the conference helped Betty confirm that the work she was doing made a lot of sense," Clausen says.

Since Clausen's visit, McGill has continued to develop the relationship. Alison Doucet, chair of the international committee in the Department of Family Medicine, and fellow Family Medicine faculty member Rick Mah, visited for a month in early 2007, having discussed the need for primary care with the Tanzanian group at the 2006 AIDS conference. While in Africa, they met hospital administrators, medical personnel and health care providers, and other groups and local leaders connected to Highlands Hope, including the community support group Piuma. "A large part of the fight against the HIV epidemic involves building contacts at the community level,"

stresses Doucet. "We worked on identifying the primary care issues, notably with respect to HIV, malaria, gastrointestinal illnesses and basic nutrition among many." The McGill delegation also brought educational resources for their Tanzanian counterparts and followed up on Clausen's discussions about designing overseas placements for McGill students and residents.

The Highlands Hope project is still in the early stages of its evolution. "We need to give students enough support so that they know why they are going there, what their expectations are, and what problems they might confront," Clausen says. Many students have already taken the initiative to organize electives overseas (although not necessarily in Tanzania), so the School of Nursing held its first pre-departure orientation workshop in March, helping prepare them for international work. As Doucet points out, "Whenever you do work in another country, you learn from the differences and return enriched by that experience." Her observation is confirmed by Clausen, who notes that the medical resources available to Tanzanians are vastly different than those enjoyed by practitioners in the Western world. "But they are extremely conscientious about making sure they get the maximum utility out of these resources," says Clausen. "I learned so much by seeing nursing in this context."

Meanwhile, work continues on the development of a plan to send students to Tanzania. "It is important to nurture our relationship with Highlands Hope and continue to offer support," says Clausen. "There are also many possibilities for interprofessional initiatives." And once exchanges are underway, there is already a clear choice for a mentor and supervisor for students. In an innovative move that is well-suited to this exciting new project, the School of Nursing has proposed creating the position of McGill International Clinical Instructor – with Betty Liduke as the first appointee.

For more information, please visit Highlands Hope's website at www.highlandshope.com

Nurse Betty Liduke (far right) gives sugar to an HIV-positive girl who was orphaned by AIDS.



Dr. Hélène Ezer BSc'68, MSc'77 (left), director of the School of Nursing, with Rachel Boissonneault, president of the McGill Nursing Alumni Association.

McGILL'S NURSING ALUMNI ASSOCIATION

Are you a McGill Nursing graduate?

The McGill Nursing Alumni Association is pleased to offer Nursing graduates exciting opportunities to reconnect with fellow alumni, to participate in professional development opportunities, to attend special events and to collaboratively give back to their alma mater and its current students.

The McGill Nursing Alumni Association welcomes as its

newest president, Rachel Boissonneault, BScN'04. Under her leadership, the Association aims to: develop a loyal and involved base of alumni and friends of McGill Nursing; organize various social activities to bring together former graduates; and create fundraising opportunities in support of current Nursing students.

Become a connected part of alumni life by joining the McGill Nursing Alumni Association.

For more information on becoming a member or to contribute to Nursing Alumni News, please contact Rachel Boissonneault at rachel.boissonneault@elf.mcgill.ca
For general information on the School of Nursing, please visit www.nursing.mcgill.ca

Medical Symposium

McGill Alumni present at CME Symposium in Trinidad and Tobago



On February 25, 2007, eight McGill alumni participated in a multi-specialty, international Continuing Medical Education (CME) conference that, for the first time, was held in Trinidad and Tobago. Sponsored by Medcorp Limited, the largest private health care facility in the Republic, the conference welcomed 200 local physicians and served as a forum for enhancing the practice of the local physician community by providing insight into the latest advances in medical care and surgery. It also marked the opening of the Brian Lara Cancer Treatment Centre in Trinidad.

The day opened with a warm introduction by Kongshiek Achong Low, BSc'71, MDCM'75, Chairman of Medcorp Limited, and an official opening address from the Honourable Mr. John Rahael, Minister of Health for Trinidad and Tobago. Renowned experts in health care practice, including McGill alumni and current McGill faculty members, gave lectures. The invited McGill speakers were Saul Frenkiel, BSc'67, MDCM'71, Chair of the Department of Otolaryngology at McGill; Dr. Melanie Israelovitch, BSc'98, a fellow at the Beth Israel Medical Centre in New York; Andrew C.

Karaplis, BSc'77, MDCM'84, PhD'87, a professor in Endocrinology at McGill; Alan Livingstone, BSc'69, MDCM'71, MSc'74, professor and Chair of Surgery at Jackson Memorial Hospital in Florida; Dr. Gerard Mohr, faculty member in McGill's Neurosurgery Division; Peter Small, BSc'67, MDCM'71, Chief of Allergy and Clinical Immunology at the Jewish General Hospital; and Robert Yufe, BEng'68, MDCM'73, assistant professor in Neurology at the University of Toronto. One of the key organizers, Boris Yufe, BSc'67, MDCM'71, Director of the St. Clair Medical Centre in Trinidad, offered his vote of thanks to all in attendance in his closing remarks.

This event marks the beginning of what will hopefully be an ongoing knowledge exchange and skills transfer between McGill physicians and faculty members and those under Medcorp's group of companies in Trinidad.

Participants in the Continuing Medical Education Symposium in Trinidad (from left to right): Dr. Melanie Israelovitch, Dr. Gerard Mohr, Mrs. Christiane Mohr, Dr. Saul Frenkiel, Dr. Boris Yufe, Dr. Peter Small and Dr. Robert Yufe.

Tensions between medical specialists and the Quebec government gradually diminish

A dispute between the Fédération des Médecins spécialistes du Québec (FMSQ) and the Quebec government disrupted medical education last fall. Fortunately, the conflict was resolved in time to allow students to resume clinical clerkships without jeopardizing their entire academic year. On October 12, 2006 responding to Law 37, which called for wage increases far below the agreement previously reached in principle, as well as significant penalties for any protest to the law, Quebec's specialists refused to perform teaching and committee work that was unremunerated or remunerated at inadequate levels. As a result, while residents continued to treat patients under the supervision of specialists, most formal teaching was suspended. In addition, specialists refused to fill out evaluations, essential for proving that residents have completed their rotations, and residents were unsure they would have the documents necessary for admission to write exams.

Students were much more severely affected. Most specialists refused not only to teach medical students, but also to supervise third- and fourth-year students who were in the

hospitals doing clinical rotations. This essentially brought their curriculum to a halt.

"We had no idea how long this would go on for, and in mid-December still didn't know if we would be losing a year of our training or if we would be able to write exams on time," says Yael Kushner, MDCM'05, vice-president of the Fédération des médecins résidents du Québec (FMRQ) and president of the Association of Residents of McGill (ARM), which represents McGill's 600 medical residents.

On December 15, 2005, because of Law 43 (Bill 142), resident salaries were frozen for three years, with two per cent annual increases starting on April 1, 2006. "We were between a rock and a hard place," says Kushner. "We didn't want to lose a year of training and were very upset, but also understood that the specialists' manoeuvrability was very limited."

The Dean of Medicine, Dr. Richard Levin, and then Associate Dean, Postgraduate Medical Education and Professional Affairs, Jean-Pierre Farmer, BSc'79, MDCM'83, met with Kushner and Martin Bernier, MDCM'03, President of the FMRQ (and also a McGill resident), to assure them that

specialists would prepare evaluations, even if they did not submit them to the Faculty, and that residents would have the requisite documents to write exams. The administration, in collaboration with Quebec's other faculties of medicine, encouraged government representatives to resolve the dispute quickly.

On December 22, 2006, the government agreed to suspend Law 37 and to resume negotiations with the FMSQ; evaluations were submitted, and no exams were missed. Following this conflict, negotiations resumed on behalf of the residents and, on March 21, 2007, the FMRQ finalized a new collective agreement on monetary clauses and non-monetary clauses with a monetary incidence with the Quebec government, the most important of which supplements resident salaries with a monthly call stipend.

The students who were more affected are still in the process of making up missed time by using vacation and elective time to ensure that they meet graduation requirements.

Thanks to Joyce Pickering, MDCM'80, MSc'88, Associate Dean, Medical Education and Student Affairs, for contributing to this article.



Celebrating the establishment of the Dorothy Williams Chair in Pediatric Surgery (from left to right): Nicolas Steinmetz, BSc'59, MDCM'63, Chair of MCH Foundation; Principal and Vice-Chancellor Heather Munroe-Blum; Dr. H. Bruce Williams, professor of Surgery; Dean Richard Levin; and Dr. Jean-Pierre Farmer, professor of Neurosurgery and Oncology.

The Development, Alumni and University Relations Office is proud to once again share with you the latest news on the past year's achievements and celebrations that honoured our generous alumni and friends.

Congratulations to the classes of '56, '61, '66, '71, '81, '86 and '96 who, in recognition of milestone anniversaries, raised \$300,000 for the Faculty of Medicine! Special mention goes to the Classes of '56 and '81, who each surpassed their fundraising goals in support of the

McGill Medical Simulation Centre and a new student bursary, respectively.

Indeed, many alumni and friends have shown their generosity to the Faculty through their admirable philanthropic efforts in recent months. This issue of *In Focus* is all about students, and we are especially proud to report that, in the last year, 15 new scholarships, bursaries, fellowships and prizes have been established to assist medical students in need, and to recognize their academic and community achievements. Some of these awards include:

- the Cole Foundation Fellowships – a multi-million dollar fellowship program to support graduate and postgraduate students researching leukemia and related illnesses;
- the Charles E. Frosst/Merck Fellowship in Pharmacology to support research and scholarship in the area of aging and neurodegeneration; and
- student bursaries from the Classes of '64, '79 and '81 as well as from several individual donors.

The Faculty was also fortunate to receive other significant gifts this past year. In December, the Fondation François Bourgeois created the Monique H. Bourgeois Chair in Pervasive Developmental Disorders. This prestigious Chair will allow McGill to recruit and retain a world-class expert who will conduct translational research in autism.

In April, the Faculty joined members of the Montreal Children's Hospital (MCH) to pay tribute to H. Bruce Williams, MDCM'55, who recently retired as MCH Surgeon-In-Chief. In recognition of his many years of service, a number of donors came together, with the assistance of the Montreal Children's Hospital Foundation, to establish the Dorothy Williams Chair in Pediatric Surgery, named in honour of Williams's late wife. The Faculty is proud to announce that Dr. Jean-Pierre Farmer, former Associate Dean of Postgraduate Medical Education and Professional Affairs, has been named the Chair's first incumbent.

Other noteworthy events have united graduates and friends this past year. A small gathering of the San Francisco alumni branch had the opportunity to meet Dean Richard Levin and his wife, Jane, for the first time in April at a luncheon held in his honour. In May, events in both Vancouver and Victoria enabled our West Coast alumni to come together to reminisce about their cherished time at McGill.

Stay tuned for more news and information on opportunities to connect with your classmates.



Alumni Event in Vancouver (from left to right): Michael Angus, MDCM'51, Marion Angus, Jane Levin, Anne Minovitz and Osher Minovitz, MDCM'47.

This Year's Homecoming Weekend

From October 18 to 21, 2007, thousands of McGill alumni will arrive on campus to celebrate this year's Homecoming. Save the date in your calendars, and join us for a weekend of fun and reminiscing with old friends, colleagues and faculty members. We look forward to welcoming you home!

Many traditional activities are planned for this special weekend, including the popular Leacock Luncheon, featuring guest speaker George Bowser of the musical comedy duo Bowser & Blue, and the not-to-be-missed milestone anniversary dinners: Red & White (25th), Martlet (30th, 35th, 40th & 45th), Jubilee (50th) and James McGill (55th and beyond). A Homecoming brochure detailing these and other activities will be mailed to all alumni from milestone classes in August.

The Faculty of Medicine will also be hosting its own events, including a medical seminar

presented by the Medicine Class of '82 and the Dean's cocktail reception, which will both take place on Friday, October 19. A new addition to this year's Homecoming line-up are two one-hour lectures on Saturday, October 20, featuring two of McGill's outstanding faculty members, Dr. Donald Boudreau, Director of the Office of Curriculum Development & Physicianship Program, and Dr. Michel Tremblay, Director of the McGill Cancer Centre. These professors will discuss the new and exciting academic and research initiatives unfolding in the Faculty. For more details on these and other Homecoming activities, please visit the Faculty of Medicine Alumni Corner website at www.medicine.mcgill.ca/alumni-corner. Take note that the website will be receiving a new look in the coming months to make it more user-friendly and visually appealing for alumni.

In addition to the events mentioned above, there will be special activities for alumni who graduated in a year that ends in 2 or 7. Graduates from these classes are encouraged to visit their class webpages posted on the Alumni Corner website for a full schedule of events and other Homecoming details. Your class representative(s) will also be mailing your itineraries and other pertinent information as plans unfold throughout the summer. Be on the lookout for correspondence from the Homecoming Office and your class representative(s) and don't forget to return your questionnaires! Your collaboration will help make this year's Homecoming reunion the best one yet!

If you would like to help organize your class reunion or require additional information, please contact your Faculty Representative, Melanie Lane, at 514-398-1299 or melanie.lane@mcgill.ca.



Alumni Physician Program *Connecting Students to Graduates*

Medical students confront plenty of career choices, and sometimes these can be baffling. To help them make more sense of their future, in spring 2005 the Faculty launched a mentoring program that connects students to graduates who are willing to talk about their experiences of residency and the profession beyond.

Andrea McDaniel and Dr. Pierre-Paul Tellier, Director of Student Affairs

“Students were asking us for names of practicing physicians to find out what their lives were like, so we established this program,” explains Dr. Pierre-Paul Tellier, Director of Student Affairs. Interested students contact personnel in Tellier’s Office, who then consult a database to suggest appropriate resource people. The majority of the database’s almost 200 members are new alumni, who are asked at graduation if they would be willing to participate. In 2005, almost half of the graduating class was willing; last year, it was a clear majority.

“First-year students ask questions like, ‘Can I spend half a day with you to see what this job is about?’ while more advanced students have more specific questions,” says Tellier. When second-year student, Lucas Chartier, met with career advisor Andrea McDaniel, who manages the database with Tellier, he was interested in general surgery. Of the list of names McDaniel gave him, one, Tim Heeley-Ray, MDCM’06, was already a passing acquaintance, so Chartier contacted him. “The mentoring program made it easy to get in touch and inquire about the general surgery program,” says Chartier. “Having a bank of people who

are willing to help makes it much easier to take the first step and contact them.”

The database will inevitably grow as students like Chartier will feel more inclined to add their names after they graduate. Tellier also anticipates enhancing the mentoring program by pairing students with physicians for a longer period of time, to enable students to gain further knowledge about life in the profession. He hopes to develop this idea with McGill’s new Physician Apprenticeship Program, which brings together students and chosen faculty members, or Osler Fellows as they’re known, to openly discuss and review the course curriculum offered. “We’d like to provide our Osler Fellows with more comprehensive information to help students make solid career choices,” he says.

Tellier is hopeful that the initial acclaim for the Alumni Physician Program will encourage more and more graduates to pass on their wisdom and experience to those who will inevitably follow in their footsteps on their medical career paths. Interested mentors are welcome to contact Tamara Lutz at 514-398-5557 or tamara.lutz@mcgill.ca.

List of Class Representatives

The Faculty of Medicine wishes to recognize all reunion class representatives who are currently working hard to plan a memorable weekend of Homecoming events for their classmates. Our heartfelt thanks for your efforts!

1942	Rita Shane	1957	Deane Hillsman	Sydney Price-Sparling	W. Keith Engel
1947	James Baxter		John Lough	Howard A. Rottenberg	Jewel Gold
	Robert Brodrick		A. Peter McLean	Eliot Scull	Mary Anne Huggins
	Sean Murphy		Harvey Sigman	Myer M. Shimelman	David Latter
	Joseph Stratford	1962	Harry Glick	Ken Taguchi	Debbie Letko-Josephson
1952	Mimi M. Belmonte		Michael P. Laplante	Nelson C. Ubani	Alice Lytwyn
	Marvin Clamen		James D. Sullivan	Lawrence F. Wasser	Richard Mimeault
	J. Edwin Coffey	1967	René E. Cormier	Harvey M. Weinstein	Jennifer Ramsay
	George Fortier		Alex C.H. Crowe	1972	Philip Dawson
	Cynthia G. Hyndman		Ross Debelle	1977	Jennifer Fife-Pope
	Gordon F. Irwin		Richard J. Deckelbaum	John Kingman Carsley	Louise McNaughton-
	Doug Kinnear		Irving H. Fox	Stuart J. Connolly	Filion
	Carroll A. Laurin		Edmond B. de Koos	John Bernard Gordon	Ronald Prussick
	Arthur J. Markus		Eli Einbinder	Michele A. Turek	Charles Rohlicek
	I. W. Weintrub		Lily Hechtman	1982	Stacey Schwartz
			Anitra Mamen	Leslie Cockhill	1997
				Stephen DiTommaso	Sean Gilman
				Sandra Donnelly	

McGill 1821 Society Members

The Faculty of Medicine would like to thank those alumni who are McGill 1821 Society members and have provided for the University in their estate plans.

Peter Benjamin, BSc'51, MDCM'55
J. Robert Bowen, MDCM'45
Eileen Cambon, MDCM'51
Janet E. Campbell, MDCM'51
Daniel Funderburk, MDCM'56
George William Hays, MDCM'64
Patricia A. Innis, MDCM'65
Ruby G. Jackson, MDCM'50
Joanne H. Jepson, MDCM'59

Albert E. Keates, MDCM'44
Arthur D. Kracke, MDCM'58
Kalman C. Kunin, BSc'41, MDCM'43
Samuel B. Labow, BSc'58, MDCM'62
Carroll A. Laurin, OC, MDCM'52
Donald G. Moehring, MDCM'65
Margot R. Roach, MDCM'59
Winifred M. Ross, MSc'48, MDCM'52
John M. Rothschild, BSc'67, MDCM'69

Frank H. Russ, MDCM'39
Myron I. Segal, BA'45, MDCM'49
Joseph Stratford, BSc'45, MDCM'47, MSc'51
Jacques E. Sylvain, MDCM'74
Alan D.M. Turnbull, BSc'57, MDCM'61, MSc'65
Frederick E. Whiskin, MDCM'48
W.W. Wilson, MDCM'43

The Faculty is grateful to the many other alumni and friends who have chosen to provide for McGill in their estate plans. If you have left a provision to McGill in your will and would like to inform us about it, please contact Bequests and Planned Gifts at plannedgifts.dev@mcgill.ca or 514-398-3560.

Bequests and other
planned gifts for
McGill University

The Gift of a Lifetime

How does a planned gift work? A planned gift is a charitable donation arranged during a donor's lifetime but not available to McGill until sometime in the future. The most common type of planned gift is a bequest, but it is just one of many types.

Is there any financial benefit to the donor who makes one? A bequest to McGill University may serve to reduce, by means of a tax credit, the income tax payable by the donor's estate. A planned gift may eliminate or reduce tax on capital gains when appreciated property is given.

For More Information McGill University, Bequests and Planned Gifts
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H3A 3T3

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tel.: 514-398-3560
fax: 514-398-8012
1-800-567-5175

www.mcgill.ca/alumni-planned



Former Dean of Medicine Patrick Cronin remembered for his contributions to humanity

A worldly scholar, R.F. Patrick Cronin, MDCM'53, MSc'60, lived a life admired by the countless people he touched. Born in England in 1927 to celebrated author and physician, A.J. Cronin and his wife, Agnes Mary Gibson, also a physician, Patrick Cronin attended Princeton University before earning his medical degree at McGill. He went on to be a gifted cardiologist and physician at the Montreal General Hospital and assumed the position of dean in McGill's Faculty of Medicine in 1972, where he remained for five years. During his time as dean, Cronin worked with the Canadian International Development Agency (CIDA) to set up student exchange programs between McGill and universities in Kenya, Kuwait, Bahrain, Qatar, Ethiopia, Pakistan and Tunisia.

Known for his organizational prowess and strong self-discipline, Dr. Cronin was recruited by the Aga Khan Health Services Foundation in 1976 to oversee the construction and operation of hospitals in Pakistan and Tanzania, and this area of work soon became his new calling. During his lifetime, he lent his skills and administrative expertise to medical projects in developing countries all over the world.

Dr. Cronin died peacefully in January of this year at his home in Montreux, Switzerland. He is survived by his wife, Sis Robertson, their son, David and their two daughters, Di and Daphne. On May 30, hundreds of family, friends and former colleagues attended a memorial service in honour of Dr. Cronin, which was organized by McGill's Faculty of Medicine, to pay tribute to an individual who meant so much to so many.

Kudos: Teaching Scholars

The teaching scholars chosen for 2005 - 2006 were:

Dr. Bruce Campbell (Internal Medicine)
Michael A. Stein, MDCM'92 (Rheumatology)
Dr. Francine Tremblay (Surgical Oncology)

The 2006 - 2007 cohort of teaching scholars is:

Linda Crelinsten (Medical Simulation Centre)
Sender Liberman, BSc'96, MDCM'00 (Surgery)
Kevin Waschke, BSc'94, MDCM'98
 (Gastroenterology)

For 2007-2008 the teaching scholars selected are:

Dr. Mark Ware (Pain Centre)
Dr. Lily Nguyen (Otolaryngology)
Dr. David Ragsdale (Neurology)
Adriana Venturini, BSc'81, MSc'01 (Physical and Occupational Therapy)
Paola Fata, MDCM'95 (Surgery)

Medical students from across Canada enjoying Medgames 2007, held at McGill.



From bedside to bleachers - McGill hosts Medgames 2007

Over a quarter of a century ago, Quebec's four medical schools decided to set aside one weekend each year to engage in a sports and social event, aptly named Medgames. Over the years since then, the event has grown in both size and stature to include universities from across the country, yet the focus still remains the same – to provide medical students the opportunity to mix and mingle outside of the academic arena. Medgames fosters the development of relationships between future medical practitioners who may one day rely on these chance meetings to form lasting professional collaborations and partnerships.

Hosting of the event is done on a rotational basis among Quebec's medical schools. This year, it was McGill's turn. From January 5 to 7, 2007, almost 2,300 medical students from all over Canada descended on Montreal to join in the celebrations. With a smorgasbord of sports events taking place throughout the week-

end, from traditional fare such as basketball, soccer and swimming to downright outrageous "parasports" like Gladiator, Sumo and Quizbowl, Medgames offers activities to please and challenge athletes and non-athletes alike. And the social scene is just as much a part of Medgames as the competition, with organized meals and parties rounding out each evening.

Medgames 2007 undoubtedly provided many fond memories for its participants – a weekend of celebrations, friendly competition and lasting connections made by thousands of medical students from across the country. Thanks to a dedicated organizing committee led by McGill medical students Nadia Primiani, BSc'05, and Nadia Roumeliotis, and a long list of generous sponsors, including Desjardins Group, McGill can pat itself on the back for making Medgames 2007 a rousing success. Next year's Medgames will be hosted by the Université de Sherbrooke.

Faculty Development Workshops

- *Role Modelling: Making the Implicit Explicit*
October 25, 2007
- *Searching the Literature for Evidence-Based Teaching and Learning*
Beginner - November 1, 2007
Advanced - November 20, 2007
- *Designing Successful Workshops*
December 6, 2007
- *Evaluating Applicants for Medical School Workshops*
December 11, 2007

For more information, please contact facdev.med@mcgill.ca or (514) 398-2698.

Medical Education Rounds for faculty members

- *Dr. Sue Brien, Director of Operations, Quebec, Eastern Canada and Nunavut*
October 18, 2007
- *Dr. Deborah Danoff, Director of Education, The Royal College of Physicians and Surgeons of Canada*
November 22, 2007
- *Teaching Scholars Program Graduates for 2006-2007*
Mrs. Linda Crelinsten (Medical Simulation Centre)
Dr. Sender Liberman (Surgery)
Dr. Kevin Waschke (Gastroenterology)
December 13, 2007

In addition to its work with the Réseau Universitaire Intégré de Santé (RUIS) and its work on Physicianship, in 2007-2008, the Faculty Development Office will be initiating an 'Outreach Program.' This program aims to support colleagues who would like assistance in delivering professional development activities targeting specific needs. Workshops or Medical Education Rounds could be organized collaboratively between the Faculty Development Office and your team, and delivered at your place of work. To find out more, please contact us at facdev.med@mcgill.ca or 514-398-2698.



This year marks the 150th anniversary of the McGill Alumni Association. Find out more at www.alumni.mcgill.ca/sites/alumni150.

Your Alumni Profile

Attention, Medicine Alumni! We are collecting data on each class and making it available on the Web. Your information will be password-protected, so only you and your fellow classmates can access it. Hundreds of profiles have been added already. *Don't forget to send us your digital and/or print photos. We post those too!*

To view your classmates' profiles or to add your own, visit www.medicine.mcgill.ca/alumnicorner. You may also choose to complete the section below and return it to us by fax or mail.

Your Alumni Profile

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ML07

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