

VITAL SIGNS



THE NEWSLETTER OF MCGILL UNIVERSITY DEPARTMENT OF MEDICINE

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BE WELL



*Dr. James Martin
Chair, Department
of Medicine*

Here's hoping you are all having a nice summer. Even though work continues, it is an opportunity for renewal. I am betting that most of you are checking your emails regularly, even when on holidays. Sometimes it is part of your addiction, but often it is the fear of the barrage of emails that one faces on return. The problem is most acute for those engaged in administrative roles. At the Canadian Professors of Medicine semi-annual meeting in April 2019, we had the opportunity to have a workshop entitled "Physician, heal thyself; learning to focus on what really matters" run by Dr. Joseph Kim, a professor of Psychology, Neuroscience and Behavior at McMaster University. He had some practical suggestions about handling email. First, don't look at your inbox too frequently. Set aside periods for this. Second, do not have notifications interrupt

everything you are doing. Third, answer emails right away if they take less than two minutes to do. Those that take longer, file for action at a later time and schedule time in your agenda for them. Fourth, do not have too many folders but have a folder for action, for follow-up and for archiving. His suggestions help us avoid repeated reading of the same messages. It all requires organizing one's time and being disciplined, but there are obvious benefits to be derived. We can only hope that the culture of sending emails to everyone about everything will eventually change.

Among medical leadership there is growing concern about physician wellbeing. Surveys suggest that physicians are experiencing significant work-related distress, but it appears that we are not very good at acting to palliate this. Exercises in mindfulness, taking time to breathe and brief periods of meditation may help the day go better. While I am no expert in any of these domains I can recommend one. The Department sponsored the Wellness Program run by Dr. Patricia Dobkin and which some of you have followed. It is still available for those wishing to participate. We will initiate more workshops in the Fall, but the online program with the University of Arizona is still available to us. If you wish to participate, please stay tuned for more information to follow.

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McGill initiative for personalized medicine and big data sciences (MIPRECISE); the new frontier?

Dr. Louise Pilote, James McGill Professor, Divisions of General Internal Medicine & MUHC Clinical Epidemiology
 Dr. Robyn Tamblyn, James McGill Professor and Interim Director, MUHC Division of Clinical Epidemiology

[Voir page suivante pour la version française de cet article](#)

Canada has emerged as an international leader in Artificial Intelligence (AI) research, attracting an impressive talent pool of AI researchers, government funding, and large and small AI investors (e.g. Google) settling in Canadian AI research hubs. Defined as any machine approach that performs tasks that are characteristic of human “intelligence”, the potential applications of AI have accelerated with the increasing digitalization of many industries including health care. Vast quantities of data (Big Data) from the genomics to real-time patient monitoring systems are being mined by AI methods to create new solutions for more precise health care delivery with the fastest growth being in applications in cancer and the nervous system. It is highly probable that AI will be ubiquitous in the coming years and included as a tool in both service delivery and research, in the same way computing and the internet have revolutionized all industries since their introduction. But what are the opportunities for health care?

Just consider the following example from pioneering leaders. “Early Sense” (<https://www.earlysense.com>) is an example of a successful, Israeli-based company that coupled a contact free non-invasive sensor that monitors respiratory rate, heart rate and motion producing more than 100 readings per minute, with big data analytics using machine learning methods, to provide early detection of patient deterioration in the hospital setting. A US-based controlled trial in medical and surgical units showed that this intervention was associated with a significant reduction in length of stay, intensive care unit days, and code blue events, with an estimated saving of \$244-\$710 per patient.

Are McGill and its affiliated academic health centers poised to seize the opportunity to improve health care through AI-enabled precision analytics? We are conducting an environmental

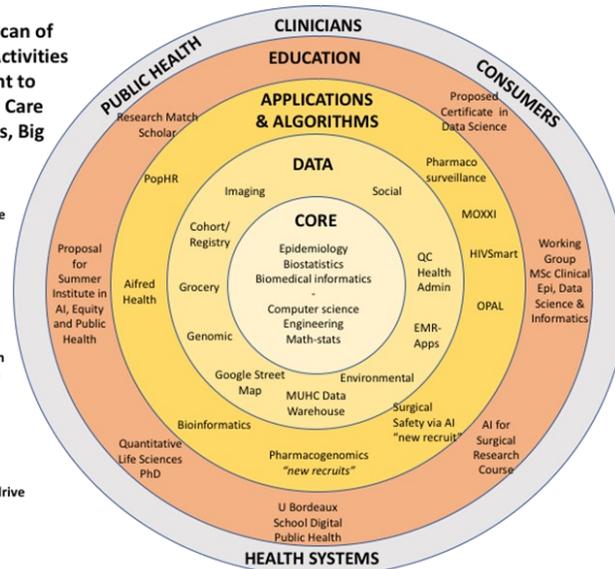
scan to investigate the assets and opportunities campus-wide. As illustrated in the figure below, McGill has emerging strength in the major components needed to implement AI-enabled precision analytics into the health delivery environment to improve patient outcomes. Core capacities in computer science, engineering, epidemiology, biostatistics, and bioinformatics exist to foster the development of AI methods and innovative devices. Access to structured, useable and linked longitudinal health, social and environmental data is shaping up with the soon-to-be launched MUHC data warehouse. These data will allow new innovative applications and algorithms to be developed. Rapidly building human capacity, key to establishing and maintaining international leadership through strategic faculty recruitment, graduate program development, and attracting top faculty and

Environmental Scan of Resources and Activities at McGill relevant to Precision Health Care using Informatics, Big Data, and AI

McGill Initiative Computational Medicine
 Research Match Grants
 CFI - Bourque

Psychiatry-Brain Imaging (HBHL) Measurement-based Care

Oncodrive



Department of Medicine
 CFI - Tamblyn
 CFI - Marelli

Division Clinical Epidemiology, Data Science and Informatics

McGill Genomics Initiative

Institute Surgical Innovation
 Surgical Innovation Centre

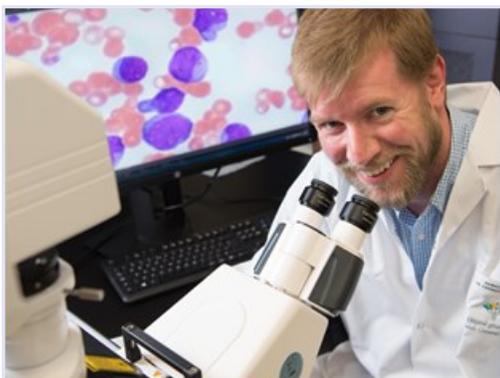
trainees through attractive funding packages is emerging in various departments. Finally, the engagement of clinical faculty from all departments is essential to identify clinically important gaps where AI-enabled analytics and devices may be useful, and to test new innovations in real world settings. Already we see considerable strengths at McGill, which if harnessed could accelerate McGill’s international leadership in this area. A McGill-wide strategy and concerted effort to leverage these assets will be needed.

L'initiative de McGill pour la médecine personnalisée et les sciences de données massives (MIPRECISE); la nouvelle frontière?

Le Canada est devenu un chef de file international dans la recherche sur l'intelligence artificielle (IA), attirant un bassin impressionnant de talents en chercheurs en IA, des fonds publics et de petits et grands investisseurs (tels que Google) qui s'installent dans des pôles de recherche canadiens en IA. Définies comme toute approche qui exécute des tâches caractéristiques de «l'intelligence» humaine, les applications potentielles de l'IA se sont accélérées avec la numérisation croissante de nombreux secteurs, y compris celui de la santé. De grandes quantités de données (Big Data) allant de la génomique aux systèmes de surveillance des patients en temps réel sont exploitées par les méthodes d'IA afin de créer de nouvelles solutions pour une prestation de soins de santé plus précise, avec la croissance la plus rapide dans les champs du cancer et du système nerveux. Il est fort probable que l'IA sera omniprésente dans les années à venir en tant qu'outil pour améliorer les services et la recherche, de la même manière que l'informatique et Internet ont révolutionné tous les secteurs d'activité depuis leur introduction. Mais quelles sont les opportunités pour les soins de santé?

Prenons juste l'exemple suivant de leaders pionniers. «Early Sense» (<https://www.earlysense.com>) est un exemple d'entreprise prospère basée en Israël qui a couplé un capteur non invasif sans contact qui surveille la fréquence respiratoire, le rythme cardiaque et les mouvements produisant plus de 100 lectures de données par minute, avec analyse de données volumineuses utilisant des méthodes d'apprentissage automatique, pour permettre une détection précoce de la détérioration du patient en milieu hospitalier. Un essai contrôlé mené aux États-Unis dans des unités de médecine et de chirurgie a montré que cette intervention était associée à une réduction significative de la durée du séjour, des journées d'unité de soins intensifs et des arrêts cardiaques, réalisant ainsi une économie estimée de 244 \$ à 710 \$ par patient.

McGill et ses centres universitaires de santé affiliés sont-ils prêts à saisir l'occasion de pouvoir améliorer les soins de santé grâce à des analyses de précision basées sur l'IA? Nous effectuons actuellement une analyse de l'environnement pour examiner les atouts et les opportunités sur l'ensemble du campus. Comme l'illustre la figure (page 2), McGill dispose désormais d'une force émergente dans les principales composantes nécessaires à la mise en œuvre d'une analyse de précision basée sur l'IA. Les capacités de base en informatique, l'ingénierie, l'épidémiologie, la biostatistique et la bioinformatique existent pour favoriser le développement de méthodes d'IA et de dispositifs innovants. L'accès à des données de santé sociales et environnementales longitudinales, structurées, utilisables et liées s'annonce possible avec le lancement prochain de l'entrepôt de données du CUSM. Ces données permettront de développer de nouvelles applications et des algorithmes innovants. Un renforcement rapide des capacités humaines, essentiel pour établir et maintenir un leadership international par le recrutement stratégique d'enseignants, le développement de programmes d'études supérieures et le recrutement de professeurs et stagiaires de premier plan grâce à des programmes de financement attrayants, fait son apparition dans divers départements. Enfin, il est essentiel que les membres du corps professoral de tous les départements cliniques s'engagent à identifier les lacunes importantes sur le plan clinique là où des analyses et des dispositifs activés par l'IA peuvent être utiles, et à tester des innovations dans des conditions réelles. Nous voyons déjà des atouts considérables à McGill qui, s'ils sont exploités, pourraient accélérer le leadership international de McGill dans ce domaine. Une stratégie à l'échelle de l'Université et des efforts concertés pour exploiter ces atouts seront nécessaires.



Une carrière de médecin-chercheur : perspective d'une nouvelle recrue

*Dr François Mercier
Divisions d'hématologie, HGJ et médecine expérimentale*

La décision de faire de la recherche médicale est une orientation de carrière qui implique plusieurs facteurs. Personnellement, mon choix de faire de la recherche en laboratoire, en parallèle avec la clinique, s'est développé au gré de rencontres avec des mentors formidables.

Étant revenu à McGill il y a deux ans, je me considère encore comme un "jeune" chercheur! C'est donc en toute modestie que je décris mon expérience récente de clinicien-chercheur fondamental.

Tel un explorateur, le chercheur doit se doter de certains outils. J'estime que les outils nécessaires sont: les connaissances théoriques et pratiques, la productivité démontrée au cv et le réseautage. Pour un chercheur débutant, il est essentiel d'avoir acquis ce "bagage" sans compromis durant un fellowship, qui démontrera à l'institution d'accueil et aux organismes subventionnaires le potentiel de succès. Personnellement, mon fellowship en recherche à Harvard a duré six ans, donc je peux attester que cette étape de préparation prend parfois du temps.

La planification des projets nécessite: la connaissance des ressources techniques et en personnel, l'accès à du financement, l'accès à des données préliminaires ou échantillons cliniques, et des collaborateurs engagés. Cette planification permet de départager les projets qui sont "faciles d'accès" et ceux qui nécessitent un investissement de temps plus important, si un des éléments sur la "liste" est manquant. Pour les demandes de financement, il est crucial de connaître des mois à l'avance les exigences du programme (lettres de l'établissement, de collaborateurs, etc.) Durant mes deux premières années, les projets que j'ai débutés ont été déterminés en grande partie par l'accès à des collaborateurs et des protocoles déjà établis dans mon institution.

Il est aussi important de souligner l'importance de la préparation "psychologique". La reconnaissance en recherche est moins immédiate qu'en clinique. Compte tenu du temps et de l'effort investis, il est facile de percevoir les difficultés comme des échecs personnels. Ceci peut paraître évident, mais il est important d'avoir des activités valorisantes autres que le travail (la famille, l'activité physique, ou un hobby qui permet de "déconnecter"). La recherche est une course de fond, rarement un sprint.

Mon dernier point vise à reconnaître l'importance du mentorat. Je suis reconnaissant envers plusieurs mentors qui ont su développer mon intérêt pour la recherche en laboratoire. Ceux-ci m'ont permis de publier des articles durant ma formation médicale et de comprendre la structure des programmes de financement adaptés. Notons l'excellent "Programme FRQS/MSSS de formation pour les médecins résidents en médecine spécialisée visant une carrière en recherche". Je vous enjoins, chers collègues, de guider la prochaine génération de chercheurs.

En résumé, la recherche biomédicale, telle une expédition, trouve sa satisfaction dans le parcours autant que la destination. Le chemin peut être parsemé d'embûches, mais représente une occasion de se dépasser. Je vous souhaite un bon été et du succès dans vos projets de recherches!

Quelques suggestions de lecture :

McInnes, Andrews, Rachubinski, "Guidebook For New Principal Investigators"
<http://www.cihr-irsc.gc.ca/e/27491.html>

Howard Hughes Medical Institute : "Making the right moves"
<https://www.hhmi.org/developing-scientists/making-right-moves>



A skinternist with passion for innovation through research

Dr. Ivan Litvinov
Assistant Professor, Division of Dermatology, MUHC

Skin in many ways is a window into our internal self. “Many times, in dermatology we are able to diagnose an important disease before it causes any other symptoms. For instance, Dermatitis Herpetiformis could be the sole manifestation of a celiac disease while Dermatomyositis can be a harbinger for an internal malignancy or an interstitial lung disease”, says Dr. Ivan Litvinov, an Assistant Professor and Director of Research in the Division of Dermatology. “While everyone is aware of common skin diseases such as melanoma, eczema and psoriasis, there is so much more to dermatology. This diversity of conditions and a unique ability to make a diagnosis by simply observing the skin is what attracted me to this specialty.” Dr. Litvinov was trained as a tumor biologist and received a PhD degree from The Johns Hopkins School of Medicine (2006). He completed his medical (2010) and dermatology residency (2015) training at McGill University. After briefly working as a clinician-scientist at the University of Ottawa (2015-2017) he was recruited back to McGill. He received a prestigious FRQS Chercheur Boursier award, which enables him to devote >70% of his time to research.

“I chose to focus my clinical and research efforts on diseases that overlap dermatology and hematology specialties such as cutaneous lymphomas, mastocytosis, Graft-versus-host disease (GVHD), and complex drug eruptions that are seen in hematology-oncology patients. I also co-direct a clinic for solid organ transplant recipients. At the Royal Victoria Hospital, a designated Centre of Excellence for Adult Stem Cell Transplantation, we serve a lot of gravely ill patients, who develop intractable pruritis and severe skin eruptions. We are also one of the few centers in the province that offers Extracorporeal photopheresis (ECP) to cutaneous lymphoma patients. In my practice I work closely with my colleagues in hematology, oncology and radiation oncology to address skin care needs of our patients. In the lab and in the clinic, I study Cutaneous T-Cell Lymphomas (CTCL), a skin cancer where patients develop red scaly, itchy plaques and tumors. In severe cases, skin can become completely erythrodermic due to their lymphoma.

While we are very successful in treating patients with severe psoriasis, lichen planus and drug eruptions using a combination of ultraviolet light, creams and systemic therapies, we often fail in treating CTCL. I find that malignant inflammation in CTCL is far more difficult to control than the benign inflammatory processes of psoriasis and other skin diseases. In my experience, advanced CTCL and Sezary Syndrome patients, despite available therapies, have dismal quality of life. Furthermore, they are often confined to their own home due to severe erythroderma of their skin. Many of them don't survive longer than 2-4 years and are frequently hospitalized due to infectious complications. It is often heartbreaking to follow these patients since we don't have effective therapies to fight their cancer. Even new immunomodulatory therapies like Pembrolizumab seem to actually worsen the disease in a subset of these patients by stimulating malignant T cells. Hence, I often can't tell my patients that the cure is around the corner like for other deadly cancers including melanoma and Merkel cell carcinoma. Our efforts in the lab focus on understanding the molecular pathogenesis of this cancer, while in the clinic we study the epidemiology and putative extrinsic risk factors for this disease.”

Outside McGill, Dr. Litvinov serves on the Board of Directors of the Canadian Dermatology Association (www.dermatology.ca); he is also an Associate Editor of the *Journal of Cutaneous Medicine and Surgery* and *Frontiers in Medicine* and co-chairs the Skin Research Group of Canada (www.skinresearchgroup.org).



Retirement: Highlights of a new sunset

Dr. George Fantus, McGill and MUHC Director of the Division of Endocrinology and Metabolism, shares stories of different approaches to retirement from the physicians who never retired to those who did so enthusiastically, noting that there is no one rule for the approach to retirement.

Dr. Non-Retirement

When Dr. Non-Retirement was brought into my office, I realized it was time to think about the “retirement issue” myself. He was a family physician dedicated and responsive to his patients for many years. Now he was in his nineties with advanced congestive heart failure, reasonably controlled diabetes and moderate renal impairment. His daughter wheeled him into my office. She was actually bringing him from his office where he had just completed his morning clinic.

“You are still practising?” I asked with an obvious stare of incredulity.

“Yes,” he answered. “I have only a few older patients left who still want to see me.”

I looked at his wheelchair, at his daughter and noted his shortness of breath at rest.

“How do you get to work and manage?” I asked.

“I take him to and from work two to three half days per week and help him out,” his daughter answered smiling.

“Have you thought of retiring? Is there something you would rather do with your time?” He knew his prognosis was guarded. “Do you think it is wise to take responsibility for your patients’ health at this point?”

I asked these questions without waiting for answers, clearly building up to a recommendation.

“I have no hobbies and never did anything else but work,” he responded. “But I know it is time and I will stop.”

About six months later, shortly after he missed a follow-up appointment, he died.

Dr. Reluctant to Retire

A bit later I ran into a colleague, an academic surgeon who had been prominent and respected in his field for over 40 years. He looked upset and a little sad.

“How are you? What’s going on?” I asked.

“I have been told that it’s time to give up surgery. My OR time is being rapidly decreased and will be terminated. I can still perform the surgery,” he said looking at the ceiling. “My complication rates are the same...I have to make room for the younger generation. It’s disappointing.”

Dr. Reluctant to Retire was in his 70s and in reality, not as sharp a surgeon as before. He continued an office practice for another nine months, then entered full-time retirement spending his winters in the south. When I saw him three years later, he still looked depressed.

“I’m bored. Only so many books I can read, so many movies to watch, no hobbies, but I manage to enjoy life as much as I can.”

Mr. Happily Retired

I have an acquaintance who is not a physician who retired at 65. He is comfortable with a small cottage on a lake and a low rise one-bedroom condo in Florida, splitting his time between the two. He likes to do his own home improvements and last summer he built a treehouse for his grandchildren. In Florida, he takes art classes and is painting again, something he did many years ago. He and his retired spouse spend time with friends and are both happy despite no longer “contributing to society” or being recognized by a title. Mr. Happily Retired tells me he loves the lifestyle and wants to continue this as long as his health permits.

Dr. Enthusiastic to Retire

A few years before my own retirement, a colleague, a successful clinician scientist suddenly announced that she would close her lab and retire. I was quite surprised as she was relatively young (under 60), had peer-reviewed funding and was publishing.

(Continued on page 7)

(Continued from page 6 / Retirement)

“I’ve enjoyed my academic research career but there is more to life,” she told me. “I want to travel, read and spend time with my family who live away. Besides, Toronto is not where I want to spend the rest of my life. It is too congested and busy. I will be happier living in a smaller city.”

What could I say? I felt it took courage to make such a decision that would be unexpected by her community of academics, but Dr. Enthusiastic to Retire made sense and followed through with it.

Dr. Not Really Retired

I myself would be called *Not Really Retired*. My family influenced my retirement from the University of Toronto, Department of Medicine. I motored east on the 401 to Montreal and McGill University to take on the task of Division Director for Endocrinology and Metabolism at the McGill University Health Centre. After almost a year, I can confidently state that “not really retired” fits. There is enough work to keep me occupied and challenged full-time for the next few years. At that point, it will be time to look in the mirror, have talks with family, friends and colleagues and plan for the real deal.

These caricatures of retirement raise many issues. Is there a rule for everyone? Clearly not!

Our rate of aging, emotional needs, demands of our specific fields of medicine, and external or unexpected events such as illness or family demands will all influence our retirement track. An added challenge for many physicians, whether community or academic, is that the practice of medicine is traditionally a calling rather than a 9-to-5 job. This is not just a lifestyle issue, but often it defines our place in the world and even provides the meaning of our lives. This psychological barrier to retirement must be addressed in order to arrive at a rational retirement decision.

A first principle would be to follow the old dictum: *do no harm*. As we age our skills and stamina falter. Thus, it is important to recognize when these diminish and risk suboptimal patient care, less effective teaching and/or decreased quality of research and administration. We must be honest with ourselves and, at the same time, we must be open to and require evaluation by our peers. The latter must be transparent and evidence-based.

Retirement need not, and probably should not, be an all-or-nothing transition. Skills and stamina being fluid require flexibility in job demands and thus in job descriptions. This is now the challenge for our leaders; those in the hospitals, the University and the government. As mandatory age-based retirement has disappeared, the individual variability and multiple factors influencing retirement outlined above have been brought to light. In our Department “reverse” or late career mentorship, combined with partnering with a younger colleague to share clinical, teaching and /or research activities, would be an innovative approach to not only provide senior faculty with gradual retirement options, but also to pass on their years of experience, expertise and institutional memory. The time is ripe for us to create fair and robust policies combined with flexible retirement plans matched as closely as possible to the profile of each individual.

This article is based on a previous publication for the University of Toronto Department of Medicine.

Readers are referred to the following references:

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2019 McGill Department of Medicine Research Symposium

Dr. James Martin

The Symposium was held on April 24th at the McGill New Residence Hall on Park Avenue. It was excellently attended with more than 130 registrants. The audience was treated to outstanding talks, from the keynote speakers Professor **Joelle Pineau** and Lucian Award winner **Dr. Daniel Roden** and our own departmental members.

Dr. Pineau gave us a primer on machine learning and artificial intelligence. For most, this was the first in depth explanation we were exposed to and it provided an intuitive sense of how it all works. It was also apparent that it will not solve all the problems of medical practice in the near future. As a field in evolution, its applications are potentially many, but Dr. Pineau's own ground-breaking work put to rest the idea of immediate application to medicine. **Dr. Marcel Behr**

gave a scholarly talk on vaccination for tuberculosis, including his own work in this area. **Dr. Marta Kaminska** described the sleep disordered breathing in Parkinson's disease and the impact on cognition and mood. **Dr. Ariane Marelli**

described the impact of congenital heart disease in adults, a growing group of affected persons. **Dr. Maziar Divangahi** described the complex reactions to BCG administered intravenously to mice and its protective effect on the animals. **Dr. Natalie Dayan** reported on her work on maternal health and associated pregnancy-related factors. **Dr. Anne Gatignol** described her work on the human

immunodeficiency virus and the potential for novel therapeutic approaches by regulation of its replication. **Dr. Andrew Karaplis** discussed his work on the role of the unfolded protein response and its implications in renal disease. **Dr. Susan Kahn** exposed the results of clinical trials that she has undertaken in the management of the long-term consequences of major deep venous thrombosis. **Dr. François Mercier** described his work on leukemia and the application of single cell sequencing to understanding the evolution of disease. Finally, **Dr. Roden** gave an outstanding talk on his work in the merging of data from electronic medical records and gene sequencing, illustrating beautifully the capacity for discovery of novel risks.

Staff and trainees participated through poster presentations that reached a record high of 47 this year.



In past years, I provided a more detailed description of the various scientific presentations. This year, I mislaid the meticulously gathered notes on the symposium and, relying on memory, have reconstituted my memory of the day.

Apologies to speakers if I have not captured their valuable and interesting presentations. I am grateful as always to the many members that made the day so interesting. Our thanks to the presenters and to Ms. Caroline Alcaraz for the work done in organizing the event.

PROMOTIONS & TENURE

Congratulations to our Faculty members for their achievements !

FULL PROFESSOR PROMOTIONS

Dr. Kaberi Dasgupta : A clinician-scientist in the Divisions of General Internal Medicine and Clinical Epidemiology, Dr. Dasgupta runs a research program on prevention and control of diabetes, including gestational diabetes and diabetes after pregnancy. She has served as the Director of Clinical Epidemiology and the Associate Director of the Center for Outcomes Research and Evaluation (CORE) at the MUHC. She is currently the Director of the CORE.

Dr. Vidal Essebag: A clinician-scientist in the Division of Cardiology, Dr. Essebag is an internationally recognized researcher in the field of cardiac electrophysiology. He has a strong research program that pertains to the medical management of atrial fibrillation and implantable pacemaker and defibrillator therapy and has made outstanding contributions in the domain of clinical innovation.

Dr. Stéphanie Lehoux : Based at the Lady Davis Institute, in the Division of Cardiology, Dr. Lehoux directs a research program in mechanotransduction and vascular biology. Her work is relevant to understanding the mechanisms underlying the vascular remodeling associated with hypertension and atherosclerosis.

Dr. Peter Siegel: A member of the Goodman Cancer Centre, Dr. Siegel has a well-funded program on cancer. His current research program has contributed greatly to our knowledge of the molecular and cellular mechanisms that promote cancer metastasis. He served as interim Director of the Goodman Cancer Research Centre from 2012 to 2013 and since 2013, has been the Associate Director.

Dr. Kevin Waschke: A member of the Division of Gastroenterology, Dr. Waschke's innovation lies in the development of internationally recognized training programs in gastrointestinal endoscopy. An outstanding teacher, he has focused his academic career on the identification and implementation of effective and novel methods for teaching and training in endoscopy.

ASSOCIATE PROFESSOR PROMOTION WITH TENURE

Dr. Kristian Filion: Based at the Lady Davis Institute and jointly appointed in the Departments of Medicine and Epidemiology, Biostatistics & Occupational Health, Dr. Filion runs a remarkably well-funded research program studying the real-world impact of prescription drugs using advanced methods applied to large health record databases, focusing on drugs used for treating cardiovascular disease and diabetes.

FRQS SALARY AWARDS

Congratulations to our members !

Chercheur Boursier Senior

◆ **Dr. Maziar Divangahi**

Chercheur Boursier Clinicien Senior

◆ **Dr. Suzanne Morin**

Chercheur Boursier Clinicien Junior 2

◆ **Dr. Giada Sebastiani**

◆ **Dr. Benjamin Smith**

◆ **Dr. Rita Suri**

Chercheur Boursier Clinicien Junior 1

◆ **Dr. Deborah Assayag**

◆ **Dr. Amal Bessissow**

◆ **Dr. Nicole Ezer**

◆ **Dr. Nadine Kronfli**

◆ **Dr. Abhinav Sharma**

◆ **Dr. François Mercier**

DISTINGUISHED JAMES MCGILL PROFESSORSHIPS

◆ **Dr. Sabah Hussain**

◆ **Dr. Ernesto Schiffrin**

◆ **Dr. Ernest Seidman**

◆ **Dr. Samy Suissa**

JAMES MCGILL PROFESSORSHIP

◆ **Dr. Sasha Bernatsky**

WILLIAM DAWSON SCHOLAR

◆ **Dr. Peter Siegel**

NEW CANADA RESEARCH CHAIRS

◆ **Dr. Marcel Behr**

◆ **Dr. Marina Klein**

DEPARTMENT OF MEDICINE AWARDS

Congratulations to this year's recipients !

JEWISH GENERAL HOSPITAL Department of Medicine Staff and Residents Year-End
Party held June 3, 2019

Dave Feder Award

Resident who practices medicine with most compassion and sensitivity

- ◆ **Dr. Nicolas Meti**

Sheldon Zemelman Memorial Award

For academic excellence and outstanding contribution to patient care

- ◆ **Dr. Marc Nicolas Bienz**

Dr. Allen Spanier Internal Medicine Award

Resident who exhibits an enduring passion for the practice of medicine.

- ◆ **Dr. Camille Simard**

Teacher of the Year voted by the residents

- ◆ **Dr. Maral Koolian**

Fellow of the Year Award

- ◆ **Dr. Khaled Isselmou**

MUHC Departmental Annual Dinner held June 13, 2019

[Photo gallery](#)

Physician-in-Chief Award

For highly distinguished service to the MUHC
Department of Medicine

- ◆ **Dr. Andrey Cybulsky**

Department of Medicine Physicianship Award

Exemplary Physician

- ◆ **Dr. Laurence Green**
- ◆ **Dr. Michael Libman**

Outreach Award

Attending Staff, Teams or Residents who enhance links between the MUHC and the community

- ◆ **Dr. Paul Cleland**

Clinical Impact Award (new award)

For medical or societal impact by a Faculty member

- ◆ **Dr. Mary-Ann Fitzcharles**
- ◆ **Dr. Sara Meltzer**

Department of Medicine Award

For Innovation in Clinical Care or Quality

- ◆ **MUHC Inflammatory Bowel Disease (IBD) Center**

Department of Medicine Award

For Research by a Subspecialty Resident

- ◆ **Dr. Omid Zahedi Niaki**

Department of Medicine Staff Research Award

- ◆ **Dr. Donald Sheppard**

- ◆ **Dr. Alan Barkun**

Department of Medicine Early Career Staff Research Award

- ◆ **Dr. Évelyne Vinet**

The Louis G. Johnson Award

For excellence in Teaching by a Medical Resident
- selected by RVH Residents

- ◆ **Dr. Sara Wing**

The Lorne E. Cassidy Teaching Award

For Excellence in Teaching by a Medical Resident
- selected by MGH Residents

- ◆ **Dr. Claire Lee**

The Douglas G. Kinnear Award

Outstanding Clinician-Teacher at the MUHC
- selected by MGH Residents

- ◆ **Dr. Amal Bessissow**

The W.H. Philip Hill Award

Outstanding Clinician-Teacher at the MUHC
- selected by RVH Residents

- ◆ **Dr. Stéphane Beaudoin**

ST. MARY'S Family Medicine Annual
Physicians' dinner held June 5, 2019

Physician-in-Chief Award

Family Medicine Resident (R2) who demonstrates excellence in Internal Medicine

- ◆ **Dr. Sarah McBoyle**

Mervyn James Robson Memorial Award

For Excellence in Internal Medicine during first year of residency

- ◆ **Dr. François Roux-Leblanc**

**MCGILL RESIDENCY TRAINING
PROGRAM AWARDS**

Residency Research Evening Award

For Research by a Core Internal Medicine Resident

- ◆ **Dr. Ismail Raslan**
- ◆ **Dr. Marcel Tomaszewski (2)**
- ◆ **Dr. Marie-Philippe Saltiel (3)**

THANK YOU TO OUR TUTORS!
Department of Medicine
Tutors 2018 – 2019

Teaching clinical skills to the next generation of physicians is one of the key functions of an academic medical department such as ours. We have a particularly large contribution in teaching clinical skills in the second year of medicine, a very time intensive endeavour. We would like to acknowledge the following members of our Department who acted as Tutors this past academic year.

Review, Assess, Consolidate Course

Jewish General Hospital

Staff

Dr. Ruxandra Bunea
Dr. Lama Sakr
Dr. Genevieve Gyger
Dr. Tricia Peters
Dr. Polymnia Galiatsatos
Dr. Leighanne Parkes
Dr. Hoi Yun Oriana Yu

Residents & Fellows

Dr. Theodore McConnell
Dr. Marc-Alexandre Gingras
Dr. Jessica Salituri
Dr. Parvaneh Fallah

Royal Victoria Hospital

Staff

Dr. Ilan Azuelos
Dr. Andrea Blotsky

Residents & Fellows

Dr. Sanela Music
Dr. Ketaki Rawal
Dr. Aly Kanji
Dr. Stephanie Aloe
Dr. Nora Hutchinson
Dr. Guillaume Butler-Laporte
Dr. Catherine Groleau
Dr. Omid Zahedi Niaki
Dr. Boyang Zheng

Montreal General Hospital

Staff

Dr. James David Shannon
Dr. Laurence Green
Dr. Ratna Samanta

Residents & Fellows

Dr. Kelita Singh
Dr. Thiriyampaki Vethanayagam
Dr. Jill Pancer
Dr. Ruiyao Huang
Dr. Alex Aziz Al Khoury
Dr. Sunny Shah
Dr. Moez Tajdin
Dr. Guillaume Lepage-Mireault

St. Mary's

Staff

Dr. Michael Bonnycastle
Dr. Robert Diez d'Aux
Dr. Domenic Ferrarotto
Dr. Margaret Hughes
Dr. Zoe Mamalingas
Dr. Todd McConnell
Dr. Sean Pallay
Dr. Laura Pillozzi-Edmonds
Dr. Benjamin Schiff
Dr. Tien Nguyen

Transition to Clinical Practice Course

Jewish General Hospital	Royal Victoria Hospital	Montreal General Hospital	St. Mary's
<i>Staff</i>	<i>Staff</i>	<i>Staff</i>	<i>Staff</i>
Dr. Lama Sakr	Dr. Shaifali Sandal	Dr. James David Shannon	Dr. Andrea Blotsky
Dr. Hoi Yun Oriana Yu	Dr. Benjamin Shieh	Dr. Laurence Green	Dr. Bruce Campbell
Dr. Ruxandra Bunea	Dr. Peter Lakatos	Dr. Constantine Soulellis	Dr. Julia Chabot
Dr. Leighanne Parkes	Dr. Ning-Zi Sun	Dr. Catherine Weber	Dr. Shek Fung
Dr. Elizabeth MacNamara	Dr. Jeffrey Wiseman	Dr. Ratna Samanta	Dr. Gail Goldman
Dr. Samuel Mamane	Dr. Henri Jay Biem	Dr. Emilie Trinh	Dr. Todd McConnell
Dr. Jesse Schwartz	Dr. Maria Rubino		Dr. Suzanne Morin
Dr. Matthew Oughton	Dr. Emily McDonald	<i>Residents and Fellows</i>	Dr. Nathalie Ng Cheong
Dr. Stavroula Christopoulos	Dr. Sameena Iqbal	Dr. Sunny Shah	Dr. Benjamin Schiff
Dr. Elise Levinoff		Dr. Thiriyampaki Vethanayagam	Dr. Jeffrey Segal
Dr. Agnieszka Majdan	<i>Residents & Fellows</i>	Dr. Alex Aziz Al Khoury	Dr. Farzaneh Shamekh
Dr. Maral Koolian	Dr. Ketaki Rawal	Dr. Guillaume Lepage-Mireault	Dr. Michael Stein
Dr. Mark Palayew	Dr. Bhairavi Balram		Dr. Mathieu Walker
Dr. Gershon Frisch	Dr. Guillaume Lepage-Mireault		
Dr. Jason Agulnik	Dr. Maxime Gosselin		
	Dr. Alexander Lawandi		
	Dr. Achuthan Aruljothy		
	Dr. Sanela Music		

RESIDENCY TRAINING PROGRAM DIRECTORS

Cardiology: **Dr. Annabel Chen-Tournoux**, Assistant Professor based at the JGH, has been reappointed as Program Co-Director effective July 1, 2019. **Dr. Natalie Bottega**, Assistant Professor based at the MUHC, has been reappointed as Program Co-Director as of July 1, 2019 until November 30, 2019 while a search for a new Co-Director is being conducted.

Critical Care: **Dr. Dev Jayaraman**, Associate Professor based at the MUHC, has been reappointed as Program Director effective July 1, 2019.

Geriatric Medicine: **Dr. Julia Chabot**, Assistant Professor based at St. Mary's, has been appointed as Program Director effective July 22, 2019. Thank you to **Dr. Elise Levinoff** who previously held the shared Co-Director position with Dr. Chabot.

Internal Medicine: **Dr. Elise Levinoff**, Assistant Professor in the Division of Geriatrics, has been appointed as JGH Site Director for the Core Internal Medicine Residency Training Program effective July 1, 2019. Thank you to **Dr. Ruxandra Bunea** who previously held this position.

Nephrology: **Dr. Catherine Weber**, Assistant Professor based at the MUHC, has been reappointed as Program Director effective September 1, 2019.

DIVISION DIRECTOR APPOINTMENTS & RENEWALS

Congratulations to our members !



Dr. David Blank has been reappointed as **Director** of the **Division of Medical Biochemistry of the MUHC Department of Medicine**. Dr. Blank continues in his role as the

MUHC site chief of Biochemistry, a division led by Dr. Julie St-Cyr within the Department of Clinical Laboratory Medicine. Dr. Blank has steered the Division through major re-organization resulting from the establishment of OptiLab, for which the Department is very appreciative.



Dr. Hans Knecht has been reappointed as **McGill University Director** of the **Division of Hematology** effective April 1, 2019 for a five year term. The Department is very

appreciative of the work Dr. Knecht has done as McGill Director to represent the interests of all sites and in particular the leadership he has shown at the Jewish General Hospital.



Dr. Robyn Tamblyn has been appointed as **Interim Director of the Division of Clinical Epidemiology** of the **MUHC Department of Medicine** effective

February 1, 2019. Dr. Tamblyn brings a wealth of experience in the promotion and execution of research in her most recent role as Director of the Institute of Health Services and Policy Research at the Canadian Institutes of Health Research. The Division has a long history of excellence in a variety of domains and in mentoring new faculty members in the discipline. We would like to express our appreciation of the work of **Dr. Kaberi Dasgupta** who has led the Division with diligence over the past years.

NEW LEADERSHIP MUHC Clinical Practice Assessment Unit



Dr. Emily McDonald has accepted the position of **Director** of the **MUHC Department of Medicine Clinical Practice Assessment Unit (CPAU)** effective July 1, 2019. Dr. McDonald is an Assistant Professor in General Internal Medicine and brings expertise

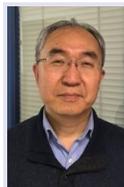
in the areas of quality and appropriateness in the practice of medicine. She has already achieved substantial recognition in Canada for her work in these areas. We would like to thank **Dr. Todd Lee** for his leadership of the CPAU over the past three years, guiding the unit from its infancy to its current level of maturity. We look forward to seeing the CPAU further evolve in the coming years.

FACULTY APPOINTMENTS

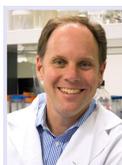


Dr. Samuel Benaroya, Associate Professor in the Division of General Internal Medicine, has been reappointed to the positions of **Associate Vice-Principal** and **Vice-Dean of Health Affairs** in the Faculty of Medicine. Dr. Benaroya, recognized within McGill's health network

for his collaborative leadership, continues to advance the Faculty's academic mission with distinction. Congratulations!



Dr. Chen Liang, Professor of Medicine based at the LDI-JGH, has been extended as the **Interim Director of the McGill AIDS Centre (MAC)**. A leading figure in international HIV research, Dr. Liang has been serving in this role since June 2018. Congratulations!



Dr. Donald Sheppard, Professor in the Departments of Medicine and Microbiology & Immunology and former Division Director of the Division of Infectious Diseases, has been appointed to the position of **Chair** of the **Department of Microbiology and Immunology** in the Faculty of Medicine. Dr. Sheppard is an internationally renowned expert in invasive fungal infections and Director of the McGill Interdisciplinary Initiative in Infection and Immunity (MI4). Congratulations !

RETIREMENTS

By: Dr. Andrey Cybulsky



After a distinguished 50-year career in Nephrology, **Dr. Mortimer Levy** retired on July 1, 2019. Dr. Levy's training and faculty/staff appointment at McGill have spanned most of the important developments in Nephrology at the Royal Victoria Hospital (RVH). Following completion of clinical training at the RVH and

research training at Boston University, Dr. Levy was recruited to the RVH in 1969 by Dr. John Dirks. At the time, Nephrology was just starting to become established as a discipline. Dr. Levy evolved into a remarkable clinician-scientist – he took care of renal patients and was an active researcher for more than 30 years. In the laboratory, he made seminal discoveries into the pathogenesis of cirrhosis. Using experimental models of cirrhosis in dogs and the micropuncture technique, Dr. Levy characterized the mechanisms of sodium reabsorption in the nephron responsible for edema and ascites formation. He showed that intrahepatic hypertension is the critical determinant in urinary sodium retention early in cirrhosis, and that intrahepatic baroreceptors play a key role in this process. Dr. Levy was the director of Nephrology at the RVH from 1984 until 1998. During his directorship, there was substantial expansion of chronic kidney disease and dialysis services. He was a mentor to many nephrologists who trained at the RVH and a number of these individuals then moved to centres across Canada to become integral members and leaders of other Nephrology programs. Dr. Levy promoted solid academic values and throughout his career, was a highly respected teacher of renal physiology among McGill students and trainees. His remarks at Nephrology academic conferences consistently revealed a sharp mind and analytical skills, as well as inquisitiveness and a good sense of humor. Dr. Levy was also well-read and very interested in history, as witnessed by several recent authoritative presentations on the history of dialysis, coinciding with the celebration of the 70th anniversary of dialysis at the RVH. Finally, Dr. Levy was respected and was a friend to all of those around him, including physicians, nurses, nutritionists, secretaries, and other coworkers.

By: Dr. Marcel Behr

Dr. Hugh Robson has announced his retirement from the Division of Infectious Diseases (ID) after many decades of distinguished service. A graduate of the McGill medical class of 1960, Dr. Robson trained in medicine at the Royal Victoria Hospital (RVH) and then pathology and infectious diseases at Johns Hopkins. Following a Medical Research Council (MRC) fellowship, Dr. Robson joined the RVH in 1968 as Assistant Professor, and Founding Chief of Infectious Diseases. Dr. Robson served as Chief of ID from 1968 to 2001, taking a sabbatical leave in 1985-86 to complete training in medical microbiology at Hôpital St-Luc. Dr. Robson went on to serve as the Microbiologist-in-Chief at the RVH from 1986-2004.

Dr. Robson conducted research on several topics that remain close to the ID community even today – the pathogenesis of septic shock, sexually transmitted infections and antimicrobial resistance. In all, he contributed over 100 articles and abstracts in a variety of journals, beginning with a single-authored publication in the McGill Medical Journal in 1960. Dr. Robson was an MRC scholar and served as the Scientific Officer on the Microbiology and Infectious Diseases committee of the MRC from 1979-1983. He was President of the Canadian Infectious Diseases Society in 1977.

Among his colleagues, Dr. Robson was often sought for his clinical expertise, based on his years of outpatient clinic exposure and his longstanding service on the medical wards. His unwavering support of Infectious Diseases and Medical Microbiology marked many who worked with him, including those who ultimately succeeded him in his leadership roles. We are all most fortunate to build upon the foundations that Dr. Robson laid for us and wish him an enjoyable time away from the RVH, with his wife Marilyn and his prize show dogs, Sky and Gala.

RETIREMENT

By: Dr. Phil Gold and Dr. David Blank



After a long illustrious career of 50 years at the MUHC, **Dr. Joseph Shuster** has retired. Joe worked almost exclusively at the

Montreal General Hospital. He held many posts, including those of Deputy Physician-in-Chief, Director of the MGH/MUHC Research Institute, Director of Medical Biochemistry, and Director of the Adult Division of Clinical Immunology and Allergy.

A native Montrealer who obtained his medical degree at University of Alberta, Joe then came back to McGill for medical residency. Following that, he spent a year as a research fellow at the Child Research Center of Michigan and then another three years in Immunology at the University of California at San Francisco.

His immunology research made major contributions to the basis of modern immunology. Joe's grasp of medicine, in general, and immunology/allergy in particular were outstanding. In addition, he was a superb teacher. He also worked closely with the MGH Foundation.

He is a statesman. He endured. He weathered storms, optimistically always encouraging those around him.

But Joe's major attributes were his humanity and humility. His kindness and good humor extended to all those with whom he worked, whether colleagues, laboratory technologists, nurses, residents or students. And Joe was a good friend, upon whom one could count at all times.

We will miss him and wish him all the best in his future.

RECRUITMENT

Welcome to our new Faculty members !



Dr. Daniel Blum, Assistant Professor to the Division of Nephrology and Attending of the JGH. Dr. Blum earned his M.D. at McGill University and then completed his post-graduate training in internal medicine during which time he served for one year as Chief Medical Resident. Subsequently, he pursued his nephrology fellowship training at the University of Toronto teaching hospitals followed by an additional year of training as the Marc Goldstein inaugural fellow in advanced dialysis at St. Michael's Hospital in Toronto. Dr. Blum will have clinical duties at the JGH, where he will be involved in teaching students as well as supervising medical residents and nephrology fellows. He will continue to advance his research in both quality improvement initiatives and clinical trials in hemodialysis.

Dr. Matthew Cheng, Assistant Professor to the Division of Infectious Diseases and Attending of the MUHC. Dr. Cheng earned his M.D. at McGill University and subsequently completed post-graduate training in internal medicine at the University of British Columbia. He then returned to McGill to pursue a fellowship in infectious diseases and medical microbiology, where he served as the program's chief resident for two years. Dr. Cheng then pursued additional training in transplant infectious diseases at the Harvard Medical School affiliated Brigham and Women's Hospital and Dana-Farber Cancer Institute. He conducted clinical and translational research into improving the diagnostics and treatment of infectious complications after transplantation, with a focus on BK and other DNA viruses. Dr. Cheng will have clinical duties at the MUHC, where he will be involved in teaching students and supervising medical residents. He will continue to advance his research in the field of Transplant Infectious Diseases, with a specific interest in understanding the factors governing susceptibility to viral infections after hematopoietic cell transplantation (HCT).



(Continued on page 16)

(Continued from page 15 / Recruitment)



Dr. Maxime Cormier, Assistant Professor to the Division of Respiratory Diseases and Attending of the MUHC. Dr. Cormier earned his M.D. at *Université de Montréal*. He subsequently completed residency

training in internal medicine and respirology at McGill University. He then completed additional clinical and research training in severe asthma and in occupational lung diseases at *Hôpital du Sacré-Coeur de Montréal - Université de Montréal*. Dr. Cormier will be based principally at the Montreal General Hospital, and will have outpatient and inpatient duties at both the MGH and Montreal Chest Institute/Royal Victoria Hospital sites. His clinical practice will focus on asthma, interstitial lung diseases, and other areas of respirology. He will teach and supervise medical students and residents and will continue his involvement in clinical research, addressing asthma and interstitial lung diseases.

Dr. Julian Huertas Garcia, Assistant Professor to the Division of General Internal Medicine (GIM), based at the Lachine Hospital, and attending of the MUHC. Dr. Huertas Garcia earned his M.D. at the University of El Bosque, Bogota, Colombia. He subsequently completed his core internal medicine and general internal medicine residency training at McGill University, and an echocardiography fellowship at the Jewish General Hospital. Dr. Huertas Garcia will have clinical duties at the MUHC, participating in GIM consults in the Lachine ER and ICU, working in the outpatient activities at Lachine, and performing echocardiography in the McGill RUIS, as well as participating in teaching activities.



Dr. Ghislaine Isabwe, Assistant Professor to the Division of Allergy and Immunology and Attending of the MUHC. After earning her M.D. at the University of Rwanda, Dr.

Isabwe received a diploma in Epidemiology at the University of Bordeaux 2 in France. She completed her internal medicine residency as

well as a fellowship in adult clinical immunology and allergy at the MUHC. She then completed her post-graduate training at Harvard University, pursuing additional research and clinical training in drug allergy and in the management of patients with adverse reaction to biopharmaceuticals. Dr. Isabwe held a position of Assistant Professor of Medicine at the Centre hospitalier universitaire de Sherbrooke (CHUS). She will have clinical duties at the MUHC, where she will be involved in teaching students and supervising medical residents. She will continue to advance her research in the field of drug allergy, more specifically in relation to biologic therapies.



Dr. Ling Yuan Kong, Assistant Professor to the Division of Infectious Disease and Attending of the JGH. Dr. Kong earned her M.D. from McGill University where she completed her post-graduate

training in internal medicine. She then completed her fellowship in infectious diseases and medical microbiology at McGill and the JGH. Subsequently, she pursued further training on "harnessing whole genome sequencing as a tool to study antibiotic resistance in *Neisseria gonorrhoeae*" at the University of Leeds. Dr. Kong will have clinical duties at the JGH, where she will be involved in teaching students as well as supervising medical residents and infectious diseases and microbiology fellows. She will continue to advance her research in hospital-acquired infections.

Dr. Vincent Larouche, Assistant Professor to the Division of Endocrinology and Metabolism and Attending of the JGH. Dr. Larouche earned his M.D. from Laval University. He completed his internal medicine residency



program and fellowship in endocrinology and metabolism at McGill University. He completed a fellowship in endocrine oncology at the University of Toronto (UHN - Princess Margaret Cancer Center and Toronto General Hospital sites). Dr. Larouche will have clinical duties at the JGH, where he will be involved in teaching students as well as supervising medical residents and

(Continued on page 17)

(Continued from page 16 / Recruitment)

fellows. He will continue to advance his research in endocrine oncology.



Dr. Isabelle Malhamé, Assistant Professor to the Division of General Internal Medicine and Attending of the MUHC. Dr. Malhamé earned her M.D. at the Université de Montréal; subsequently, she completed her internal medicine

residency and general internal medicine R4/R5 training, as well as her MSc in epidemiology, at McGill University. Her thesis explored the relationship between peripartum cardiomyopathy and preeclampsia. Dr. Malhamé has just completed a two-year clinical and research fellowship in obstetric and consultative medicine at the Warren Alpert Medical School, Brown University, Rhode Island. She obtained peer-reviewed funding to study severe cardiovascular maternal morbidity at a population level, and worked on developing tools to better diagnose heart failure in the obstetric setting. She is currently a co-investigator on the DYAMAN study, a Haitian-Canadian collaboration aimed at building capacity in caring for pregnant patients with non-communicable diseases in Haiti. Dr. Malhamé will have clinical duties at the MUHC, where she will be involved in teaching students and supervising medical residents. She will continue to develop her clinical and research interests in the field of obstetric medicine within the MUHC Obstetrical Medicine group.

Dr. Laïla Samy, Assistant Professor to the Division of Respiratory Diseases and Attending of the MUHC. Dr. Samy earned her M.D. at Université Laval. She subsequently completed residency training in internal medicine and respirology at McGill University. Dr. Samy then completed additional training in interventional respirology at the University of Calgary. During the 2019-20 academic year, she will also spend six months pursuing advanced training in non-infectious pulmonary complications of cancers and their



treatment, at Hôpital Saint-Louis in Paris. Dr. Samy will be based at the Montreal Chest Institute/RVH site, and will have outpatient and inpatient duties at both the MCI/RVH and MGH sites. Her clinical practice will focus on pulmonary interventions, as well as pulmonary complications of hematologic and solid malignancies and their treatment. She will teach and supervise medical students and residents of all levels and will contribute to clinical research and quality improvement in her areas of expertise.



Dr. Rita Suri, new **Director of the Division of Nephrology for the MUHC and McGill University** as of April 1, 2019. Dr. Suri has been appointed to the Attending Staff of the MUHC, and as Associate

Professor in the McGill Department of Medicine. Dr. Suri comes to us from her current position as Associate Professor at the Université de Montréal and a member of the Division of Nephrology at the CHUM. She graduated with a medical degree from the University of Saskatchewan in 1997. She completed residency training in internal medicine at the University of Alberta, and nephrology training, as well as MSc in Epidemiology at the University of Western Ontario. Dr. Suri was appointed to the faculty at the University of Western Ontario in 2004. In 2012, she moved to the Université de Montréal – CHUM. Dr. Suri is a clinician-researcher with research interests in chronic kidney disease and hemodialysis. Specifically, she has published extensively on frequent/intensive hemodialysis, including its physiological benefits, effects on quality of life, vascular access complications, and patient survival.

We are deeply grateful to **Dr. Andrey Cybulsky**, who served with great distinction as the MUHC and McGill Director of the Division of Nephrology for four terms. He set standards of professionalism that we should all emulate. He was an ardent supporter of academic medicine.

***NOTE: The Department of Medicine is in the process of recruiting several new members. Although every attempt is made to acknowledge them all at the time we go "to press", some announcements may be delayed and will appear in the next newsletter.*

HONOURS

Congratulations to our members for their achievements !



Dr. Chantal Autexier, Professor in the Departments of Medicine and Anatomy & Cell Biology, is the **2019 recipient of The David Thomson Award for Graduate Supervision and**

Teaching. The award was presented to Dr. Autexier during McGill University's Spring Health Sciences Convocation ceremony.

Dr. Sapha Barkati, Assistant Professor in the Division of Infectious Diseases at the MUHC, won the [Donald A. Henderson Prize for Outstanding Global Health Research](#).

This award was established in 2016 to recognize outstanding, published research in the global health field by junior faculty appointed in the McGill Faculty of Medicine.



Dr. James Brophy, Professor in the Division of Cardiology of the Department of Medicine and in the Department of Epidemiology and Biostatistics, has received the honor of the **Gold Review Recognition Award**, from *Circulation: Arrhythmia and Electrophysiology* in recognition of high quality and timely reviews of submitted manuscripts.



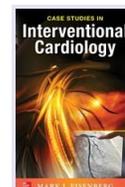
The **first research chair in Quebec focused on women's cardiac health**, propelled by Heart & Stroke and McGill University, was officially launched on July 1 via a

research project led by **Dr. Natalie Dayan**, Assistant Professor in the Division of General Internal Medicine. [More on Med e-News](#)

The [Dementia Education Program](#) - community workshops which aim to educate and support family caregivers who are looking after a loved one with Alzheimer's disease or other dementia-related illnesses, received the **Gold Medal Award from the Canadian Council for the Advancement of Education for the Best Community Outreach Initiative**. **Dr. José Morais**, Associate Professor and Director of the

Division of Geriatric Medicine at McGill University, is leading this program in collaboration with Alzheimer's Care Consultant and Facilitator Mrs. Claire Webster and with the Steinberg Centre for Simulation and Interactive Learning on this initiative.

Congratulations to **Dr. Mark Eisenberg**, Professor in the Division of Cardiology at the JGH and Director of the McGill MD-PhD Program, for the recent publication of his new e-book, "**Case Studies in Interventional Cardiology**".



The e-book includes first-hand accounts of 50 cardiac catheterization cases featuring coronary anomalies and severe complications that may occur during coronary angioplasty. This comprehensive resource provides readers with pearls necessary to understand the origin of these complications, as well as the appropriate procedures required for their management. The explanations are accompanied by over 300 videos, 165 multiple choice questions, and 250 self-review questions. The e-book can be accessed at the McGraw-Hill website (<https://accesscardiology.mhmedical.com/index.aspx>).



Dr. Gad Friedman, Assistant Professor in the Division of Gastroenterology at the JGH, was honoured at the **Gala for Crohn's and Colitis Canada 2019** for innovative and excellent patient care.

His contributions include bringing to our hospital specialized techniques, such as removal of large polyps and common bile duct stones resulting in a decreased need for surgery, as well as creating an accredited McGill-wide nurses' education program in gastroenterology.

Dr. Phil Gold, the Douglas G. Cameron Professor of Medicine and Professor of Physiology and Oncology at McGill University, has been promoted to **Grand officier of the Ordre national du Québec**, the Order's



(Continued on page 19)

(Continued from page 18 / Honours)

highest rank. [More on Med e-News](#). In addition, Dr. Gold received in May 2019, an **honorary doctorate** from the **University of British Columbia** during their convocation ceremony, recognizing his “extraordinary contributions as a physician, teacher, leader, and humanitarian.” [More on Med e-News](#)



Dr. Richard Menzies, Professor in the Departments of Medicine and Epidemiology & Biostatistics, Director of the Respiratory Epidemiology Unit at McGill and McGill’s World Health

Organization Collaborating Centre in TB Research, has been named recipient of the **2019 CIHR-ICRH/CTS Distinguished Lecturer Award in Respiratory Sciences**. [More info on Med e-News](#)

Dr. Louise Pilote, James McGill Professor of Medicine in the Divisions of General Internal Medicine and MUHC Clinical Epidemiology, was recently appointed a member of the **new Scientific Advisory Committee on Health Products for Women** by the Government of Canada. [More info](#)



Dr. Évelyne Vinet received the **50th Anniversary Young Investigator Award** at the Laurentian Conference of Rheumatology held in Estérel,

Quebec in May 2019. The award recognizes her outstanding contributions to the field of reproductive health in rheumatic diseases. [More on Med e-News](#)

Dr. Kevin Waschke, Professor in the Division of Gastroenterology at the MUHC, was named to the **Faculty Honour List for Educational Excellence** in recognition of outstanding contributions to education in the Faculty. [More on Med e-News](#). Dr. Waschke also commenced a term as **President-elect** of the **Canadian Association of Gastroenterology**.



In Memoriam

Dr. Josée Parent and Dr. Alain Bitton



It is with profound sadness that we announce the passing of **Dr. Doug G. Kinnear** on May 11, 2019, at the age of 92. Dr. Kinnear was a beloved mentor, a trusted colleague, and a cherished friend to the countless medical professionals, hospital staff, and patients who had the privilege of knowing him.

His distinguished career in medicine spanned over 50 years. In the field of gastroenterology, he was a pioneer in the truest sense of the word, co-founding the Canadian Association of Gastroenterology and establishing the Division of Gastroenterology at the Montreal General Hospital. Through his role as Chairman of the Examining Board of the Royal College of Physicians of Canada, as well as Associate Dean of Admissions for the Faculty of Medicine at McGill University, and staff physician at the MGH, his influence contributed to the superior training of countless medical students and residents, some of whom are now among the world’s most accomplished physicians. Over the course of his lifetime, Dr. Kinnear was rightfully recognized by the medical community many times; his accolades include the establishment of two tributes: a Chair in Gastroenterology and an award from the Quebec Association of Gastroenterology recognizing research excellence.

Dr. Kinnear’s passion for his profession went beyond his devoted care for patients; it extended to his teaching, which he loved, and to cultivating meaningful friendships with his colleagues, which brought him much joy.

Dr. Kinnear also left his mark on the professional hockey scene, serving as the team doctor for generations of Montreal Canadiens teams for 35 years.

Above all, “Doug” will be most remembered by all with whom he interacted for his human qualities; he was a warm, sympathetic, generous, genuine person. A real family man, he cherished above all, the time he spent with loved ones. His departure leaves an immense void in our medical community and in our hearts.

Gone but never forgotten!

In Memoriam

By Dr. David Rosenblatt



Dr. Orval Albert Mamer died suddenly at the age of 79 years, on May 23, 2019.

Professor Mamer received his PhD in the Department of Chemistry at the University of

Windsor in 1966, and continued his post-doctoral studies at Wayne State (Detroit) and the NRC (Ottawa). He joined McGill in 1969 as an Assistant Professor in the Department of Medicine and as Director of the McGill University Biomedical Mass Spectrometry Unit. He became Professor of Medicine in 1986; he also held many associate memberships in other McGill Departments and Units (Biomedical Engineering, Chemistry, Neurology and Neurosurgery, Nutrition and Food Sciences, Goodman Cancer Research Centre) and Hospital Research Institutes (MCH-RI, RVH-RI). He served four terms as President of the Canadian Society for Mass Spectrometry, and after retirement was appointed Emeritus Professor at McGill.

Dr. Mamer's major research interests included the application of mass spectrometry to clinical diagnosis and metabolic profiling, the elucidation of pathways of amino and fatty acid metabolism using stable isotope labelling and mass spectrometry, and methodologies to enhance detection at low concentrations of small molecules, peptides and proteins. He published over 200 papers and held 3 patents.

Dr. Mamer was a major advocate for mass spectrometry and a devoted scientist, and generous colleague and friend. He has had a major influence on the work of others at McGill, as well as because of his own work. He was a pioneer at bringing mass spectrometry to clinical research and practice. He will be greatly missed by his family, as well as everyone in the McGill community who had the pleasure of knowing him and working with him.

By Dr. Margaret Warner



Dr. Gwendoline Spurll, long-time member of the Department of Medicine and the Division of Hematology, died peacefully May 29th, 2019, at the Royal Victoria Hospital (RVH), surrounded by family and dedicated friends.

Gwen, born in the United Kingdom, immigrated with her family to Manitoba as a young child. She often spoke of the freedom she felt when she first saw the wide-open blue sky and prairies upon her family's arrival. Gwen completed her undergraduate degree, medicine, internal medicine training and hematology training at the University of Manitoba (1978). She went on to study hematology/immunology as a fellow at Tuft's University (1978-1981) then as a fellow at McGill University (1981-1983), supported by the Medical Research Council of Canada. She came on staff at the RVH in 1983. She was also a member of the Division of Experimental Medicine. Gwen, whose main clinical interests were in Transfusion Medicine and Women's Health, was always proud to mention she was co-appointed to the Department of Obstetrics.

Through out her career, Gwen remained committed to the study and practice of transfusion medicine. She published extensively in journals such as Transfusion Medicine and Blood and was an invited speaker at transfusion conferences around the world. She was the Director of the transfusion service at the RVH and the first director of the McGill Centre de médecine transfusionnelle. She also served as the director of the plasmapheresis unit, Hematology Laboratories and the HLA laboratories. She was one of the first to stress the need for accreditation from the Association of Histocompatibility and Immunogenetics (ASHI), a long term goal now been recognized and supported by the MUHC and the Québec Ministry.

As a professional, Dr. Spurll was thoughtful, dedicated, thorough and strong. She was respected and cherished by her blood bank team at the RVH and known well throughout the country for her contributions to the field. Shortly before

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In Memoriam

(Continued from page 20 / Dr. Spurl)

her death, in early May 2019, Gwen was recognized by the Association des médecins hématologues et oncologues du Québec (AMHOQ), with a well-deserved lifetime achievement award. Gwen was a superb mentor and teacher to generations of students, residents and fellows, many of whom are on staff now.

When Gwen received the difficult diagnosis of Parkinson's disease, she faced this new challenge with her usual analytical mind, fierce courage, and sense of humour. She participated in self-help groups, took up activities such as singing and boxing to maintain her flexibility, and wrote extensively on the disease, encouraging others facing the same challenges. In addition to her new-found talents, she enjoyed painting and was quite an accomplished artist. Gwen continued to attend Hematology Division Rounds every Wednesday morning and our social events including Christmas dinners and other special occasions. She remained a member of our Hematology family until the end.

The Division of Hematology including attending staff, administrative staff, nursing staff, laboratory technologists, particularly blood bank, and the wider MUHC community are grateful for the time she had with us and will always miss her collegiality and friendship.

By Dr. James Martin et al

Dr. James Lester McCallum, MDCM '43, passed away on January 14, 2019 at the age of 101. Dr. McCallum's career at McGill and as a family physician in the Department of Medicine at the Montreal General Hospital spans from the mid-40's to the early 80's. He was a Rutherford Caverhill fellow, demonstrator, lecturer, senior physician, assistant professor and promoted to full professor in 1972. He was at one time program director of the Internal Medicine Training Program and his interest was in teaching and supervising students and residents. Dr. McCallum retired from McGill in 1982 and later worked for the Royal College of Physicians and Surgeons of Canada as Director of Training and Evaluation, and returned to medical practice at The Ottawa General Hospital. In his will, Dr. McCallum graciously designated the Department of Medicine as the beneficiary of a monetary gift which will be used to support research as was Dr. McCallum's wish. We are deeply grateful for this gift.

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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.