Focus on Faculty #59 **Zeev Rosberger**



I pursued my B.Sc. in Psychology and Genetics at McGill, where I was exposed to such eminent teachers as Charles Scriver, D.O. Hebb and Ron Melzack. After obtaining an MA in Applied Psychology at Concordia, I worked as a budding psychologist at the Jewish General Hospital Department of Psychiatry for 5 years before embarking on my ultimate goal of obtaining a PhD. Serendipitously, Prof Melzack and Prof. Campbell Perry agreed to co-supervise my research at a lunch meeting in 1980 at Toe Blake's Tavern on St. Catherine Street (now long gone). With a wonderful, supportive wife, Gabi, two very young children (and a new mortgage), I carried out my doctoral work on the highly prevalent and distressing side effects of cancer chemotherapy-induced nausea and vomiting. We developed the first measure of nausea using the McGill Pain Questionnaires as a template. In addition, we evaluated the impact of teaching patients hypnotic skills to mitigate the symptoms. Concurrently, I initiated and developed a consultation service in the oncology clinic at the Jewish General Hospital at a time when such specialized services for patients barely existed. Ultimately, in partnership with Social Work and other disciplines, this evolving work led to the formation of the Louise-Granofsky Psychosocial Oncology Program at the Segal Cancer Centre in 2007, one my proudest achievements.

From 1995-2017, I was Chief of the Psychology Service at the JGH. As a Senior Investigator at the LDI and Associate Professor at McGill in Psychology, Psychiatry and Oncology, I have focused most of my research career on efforts to help improve patients' abilities to cope with emotional and physical distress across the cancer trajectory. I was co-PI on a series of early studies of a coping skills intervention named 'NuCare', which was funded by a series of grants from NCIC. Working with colleagues and students from across the country, I have recently been a lead and co-lead on implementation studies of e-based collection of patient-reported outcomes to support clinical interventions 'in real time' at point of care. The iPEHOC and e-IMPAQc projects are both funded by grants from the Canadian Partnership Against Cancer (CPAC). For the past 15 years or so, my research lab has focused on the psychosocial factors associated with uptake of the Human Papillomavirus vaccine and HPV testing in the prevention of cervical cancer (funded by CIHR and the Canadian Cancer Society). My current CIHR-funded project involves a national survey of women's understanding of the changes in cervical cancer screening from

Pap to Human Papillomavirus (HPV) testing. Furthermore, I bring my skills to advocacy by participating with an NGO, HPV Awareness, in evaluating and supporting sexual health education in Canada and more recently, HPV prevention practices in sub-Saharan Africa.

My passion has been to do whatever it takes to improve the cancer patient experience-whether through clinical research, teaching and training, practice or working at provincial and national levels to influence policy towards this goal. I participated, while President of the Canadian Association of Psychosocial Oncology, in the advocacy movement-the Canadian Strategy for Cancer Control-that ultimately resulted in the founding of CPAC by the federal government. As co-chair of the Advisory Committee on Research of the CCS (ACOR) for psychosocial and behavioural research, I strived to elevate this area's profile and importance, as well as lobby for increased funding.

If I could not achieve my adolescent dreams of either becoming a left-handed surgeon and/or a stand-up comedian (my hero is Billy Crystal), I also have no regrets about my continuing and well-traveled odyssey to this point, nor the multitude of friends and colleagues I have made across the globe, whose infectious generosity of spirit and collaboration has made it all a great, joyous and memorable voyage.

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