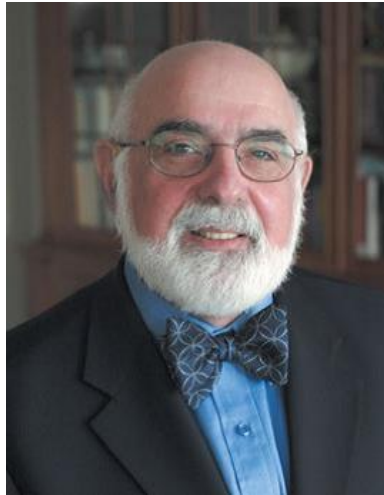


Focus on Faculty #89

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Looking back over the diverse phases of my career in medicine, I realize that they are characterized by good fortune, wonderful opportunities, outstanding colleagues, quixotic connections, and serendipity.

My journey began in a displaced persons camp in Germany where I was born in the aftermath of World War II. My family immigrated to Canada in 1948 and I spent my second birthday crossing the Atlantic to settle in Montreal. The awesome presence and demeanor of our pediatrician, Dr. Fred Wiener, during his house calls led to my early and abiding interest in medicine as a profession. A consultation and house call by the very wise Dr. Alton Goldbloom, who appeared in our home as a prophet from the Old Testament, strengthened my resolve.

The happenstance of geography led me to Baron Byng High School, a legendary Montreal institution, and the encouragement and dedication of its teachers paved the way to a combined BSc-MD program at McGill. This immigrant kid - at the age of seventeen and a mere fifteen years 'off the boat' - was given a key to the campus! McGill had hosted an open house the year prior, and the opportunity to wander the laboratories of the old Biology and the Strathcona Medical Buildings and meet individuals engaged in biomedical research opened a new window onto medicine rooted in research and, in retrospect, shaped my later decisions.

While the common lore was that medical school was hard work and a dismal experience, we were blessed with extraordinary professors in the basic science courses in the first two years, including such luminaries as C.P Leblond, Yves Clermont, Murray Saffran, Mark Nickerson and Charles Sriver. Clinical learning took place in small group tutorials with experienced clinical fellows, and clerkships placed final year students as members of clinical care teams on inpatient services. The opportunity to be involved in the direct care of patients was an important formative experience and offered an exciting and deeply impressive understanding of clinical medicine and its reliance on fundamental work in biological science. Elective rotations with a number of charismatic teachers including Bram Rose and Len Moroz at the Vic and Sam Freedman, David Hawkins, Phil Gold and Joe Shuster at the MGH sparked my choice of internal medicine and clinical immunology for residency and post-graduate training. These extraordinary clinicians communicated a sense of intellectual curiosity and joy while welcoming trainees to their family of colleagues.

One of the attractions of immunology was its linkage to laboratory and clinical research. After initial training in Montreal, I moved to the laboratory of Jack Strominger at Harvard where I benefited from an intense and stimulating research environment. Grad students and post-docs worked long days, most weekends and many nights, and daily discussions over hurried lunches were all about the latest issues of PNAS and JBC. There was a deep and abiding commitment to science and research, and seminars were packed with eager, and sometimes skeptical, attendees. My work revolved around the structure of proteins of the major histocompatibility locus and prompted my initial projects when I returned to McGill in the Department of Medicine and the nascent McGill Cancer Centre. I used the recently developed methodology of monoclonal antibodies to probe the members of the CEA gene family and collaborated with Cliff Stanners and Nicole Beauchemin in isolating genetic clones and demonstrating the role of CEA in cell adhesion. In parallel, my lab worked with Ron Guttman and Eleanor Cole to examine the role of the major histocompatibility complex in type I diabetes in the BB rat. I served as a member of the Division of Clinical Immunology and Allergy at the Montreal General Hospital and enjoyed a balance between laboratory work and clinical care, the former at the McIntyre, the latter at the MGH.

An unexpected invitation to chair a newly created Institutional Review Board (IRB) led to a new academic direction in ethical aspects of clinical trials involving human subjects. My involvement began as a service contribution and led to a collaboration with Professor Benjamin Freedman and the creation of the Clinical Trials Research Group and publications on the design of trials that responded to ethical norms and regulations.

The unexpected and extraordinary opportunity to serve as Dean of the Faculty of Medicine for eleven years and work with wonderful academic and administrative colleagues at the University, Faculty and teaching hospital network afforded me a chance to participate in the development of new facilities on campus and the MUHC at the Glen. However, the most important initiative was the recruitment of young, talented researchers, clinicians and teachers who are now the next generation of leaders at the Faculty and its clinical sites. These successful professors are the intellectual bricks and mortar of our future!

The following year I spent a sabbatical at the Department of Social Medicine at Harvard taking courses in philosophy and attending seminars in anthropology. This shift from the lab and the clinic afforded an immersion in aspects of medicine that had always been of interest, namely the discourse of medicine and the relationship between patients and their physicians. When I returned to McGill, an office became available adjacent to Biomedical Ethics and Social Studies of Medicine. I landed in a wonderful environment and learnt a great deal from colleagues in domains that were previously strange and arcane but offered a setting for work on medical education, language, and the clinical environment as a locus of teaching and care. This led to a book entitled *Physicianship and the Rebirth of Medical Education* with Don Boudreau and Eric Cassell, a monograph on *The Language of Medicine*, and a series of papers with Don Boudreau and Michael Saraga. This last initiative came about through a serendipitous choice by Michael Saraga, a psychiatrist at the University Hospital of Lausanne to spend a sabbatical at McGill and pursue a research project examining the nature of clinical excellence. I learned a great deal about qualitative research and continental philosophy and sociology and enjoyed this new (to me) way of doing research. Our work that began in 2015 continues today.

My current teaching roles, which provide a great deal of learning and enjoyment working with medical and graduate students, are also linked to my recent academic work. Thus, I am involved in a Med IV selective as well as Med II lectures on the Language of Medicine, on research involving human subjects in two courses in Oncology and research integrity in Experimental Medicine. Besides teaching, what currently provides the greatest academic joy is the time to read and write and immerse myself in the study of language and philosophy and work collaboratively with students and colleagues.