Celebrating 30 Years of Excellence in Education, Research and Patient Care

McGill Oncology

Traveling through time, looking back and seeing the future

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December 10, 2020
Acknowledgements

We thank the following people for taking the time to be interviewed: Dr. Richard Cruess, Dr. Brian Leyland-Jones, Dr. Henry Shibata, Dr. Carolyn Freeman, Dr. Phil Gold, Dr. Richard Margolese and Mrs. Sheila Kussner. We also thank all Department faculty and administrative staff past and present for their invaluable contributions to the success of the Department. In addition, we greatly appreciate the support we have received from the AEC-7 team. We are profoundly grateful to all our donors over the years whose contributions have helped the Department fulfill its mission to the university and to those impacted by cancer. Finally, we are deeply indebted to the Faculty of Medicine (now the Faculty of Medicine and Health Sciences) for creating the Department of Oncology and for its tremendous support over the last 30 years.
Introduction
The McGill University Department of Oncology, now called the Gerald Bronfman Department of Oncology (www.mcgill.ca/oncology) has greatly expanded and diversified since its creation in 1990. Thirty years later the Department is the fifth largest in the Faculty of Medicine and Health Sciences, with over 200 members whose activities include cancer-related research, teaching, clinical care, policymaking and public engagement. With the Department of Oncology as their academic home, our faculty members are based at various sites including the Rosalind and Morris Goodman Cancer Research Centre, the McGill University Health Centre (MUHC) including the Cedars Cancer Centre and the MUHC Research Institute, the Jewish General Hospital (CIUSSS du Centre-Ouest-de-l’île-de-Montréal) including the Segal Cancer Centre (Lady Davis Institute), St. Mary’s Hospital Centre (CIUSSS de l’Ouest-de-l’île-de-Montréal) and at the Department’s headquarters adjacent to the MUHC.

Research activities include: (i) Basic research focusing on understanding at the molecular, cellular, and tissue levels the development and growth of tumours and their resistance to therapy; (ii) Translational research for the development and testing of novel therapeutics; biomarkers, and molecular signatures as targets for cancer detection or treatment; (iii) Phase I, II and III clinical research studies testing the efficacy of new cancer treatment therapies; (iv) Radiation physics studies to improve the delivery and efficacy of radiotherapy; (v) Genetic studies of inherited susceptibility to cancer; (vi) Epidemiological studies of the etiology, prevention, screening, and prognosis for several cancers; (vii) Psychosocial research aimed at improving the emotional well-being and quality of life of cancer patients and their families, and managing pain and other symptoms of the disease; and (viii) Health systems research aimed at improving the quality of cancer care and clinical outcomes.

The Department is involved in teaching oncology to medical students, some of whom have gone on to do their residency training in oncology. The Department also has medical, radiation and surgical oncology residency and fellowship training programs, its former trainees having gone on to highly successful careers at McGill and around the world. Our faculty members are involved in teaching and training of undergraduate and graduate students enrolled in different McGill Departments, and this year we launched our own Graduate Diploma in Oncology as well as six new courses, the first phase of our planned comprehensive graduate program in oncology.

In this article, we have traveled back in time to look at where we started, how we evolved, and what we can improve so that we can use this knowledge to further build and enhance the Department taking into account the latest innovations in medicine, science and education.

Cancer-related activities at McGill before 1990
Before the Department of Oncology was created, cancer research, teaching and clinical care were continually evolving across McGill and its affiliated hospitals, albeit in silos without a unifying structure. In the 1960s, the subspecialties of medical and surgical oncology did not yet exist. At the time it was general surgeons who did cancer surgery and administered chemotherapy, if required. The first two surgical oncologists at McGill were Dr. Edward Tabah and Dr. Henry Shibata. In honour of their contributions, the Cedars Cancer Foundation created the Edward J. Tabah Visiting Professorship in Surgical Oncology in 1990 and the Henry R. Shibata Fellowship award in 2006. The sub-specialty of medical oncology was officially recognized in the US and Canada in the early 1970’s, and in 1975 Dr. Michael Thirlwell became the first medical oncologist to be recruited at McGill. However, it was not until the early 1990s that medical oncology became a recognized subspecialty in Quebec. Prior to that time medical oncology was linked with hematology-oncology as many hematologists also treated malignancies.

Radiotherapy has a very long history at McGill dating back to the early part of the 20th century. The appointment in 1972 of radiation oncologist Dr. John Webster as new Chief of Radiotherapy, resulted in expansion of radiotherapy with the recruitment of radiation oncologists, medical physicists and technologists, as well as the creation of the McGill Department of Radiation Oncology. In 1979, Dr. Carolyn Freeman was appointed as Chair of the Department of Radiation Oncology, and later was one of the champions for the creation of the Department of Oncology with Radiation Oncology as one of its Divisions. She continued as Director of the Division until 2011. At the same time, medical physics was reorganized with Dr. Montague Cohen becoming Director of the McGill-based Medical Physics Unit and Dr. Ervin Podgorsak becoming the Director of the hospital-based Medical Physics departments. Dr. Podgorsak went on to become the Director of the McGill Medical Physics Unit until 2008.

Dr. Balfour Mount is considered the father of palliative care in Canada. In 1974 he coined the term “palliative care” and created the Palliative Care Service at the Royal Victoria Hospital. Subsequently, in 1976 he and his colleagues hosted the first North American international conference on palliative care. This biennial conference continues to this day as the International Congress on Palliative Care. By the early 1980’s other McGill-affiliated hospitals had followed suit and had set up their own palliative care services. This resulted in the creation of Palliative Care McGill, which incorporated clinical care, research and teaching. Dr. Mount continued leading Palliative Care McGill until 1999.
In the late 1970’s Dr. Samuel Freedman, Dean of Medicine at the time, approached Dr. Phil Gold regarding the creation of the McGill Cancer Centre on the seventh floor of the McIntyre Building and serving as its inaugural Director. The Centre was to be the focal point for cancer research at McGill. In 1988, the McGill Senate officially recognized the success of the centre, endorsed further development of its research efforts and appointed Dr. Clifford Stanners as the new Director, a position he held until 2000.

The Division of Cancer Epidemiology was the youngest of the Divisions that coalesced to form the Department of Oncology. It had been created thanks to a generous endowment from the Cancer Research Society, and Dr. Gerry Hill became its first Director in 1988-1989 prior to the creation of the Department. He was followed by Dr John Bailar III in 1989-94.

Creation of the McGill Department of Oncology

In the mid 1980’s a request was made to Dr. Richard Cruess, Dean of Medicine at the time, to consider creating a Department of Oncology at McGill. The rationale was that the creation of such a Department would (i) provide a unifying academic home to cancer clinicians across the McGill-affiliated hospital sites, (ii) bring cancer research closer to clinical care, and (iii) provide cutting-edge cancer treatments by facilitating multi-institutional clinical trials across the McGill hospital network. The vision was to create a new Department that would be comprised of Divisions of Clinical Oncology (incorporating both medical and surgical oncology), Radiation Oncology (including medical physics), Palliative Care, Basic Cancer Research and Cancer Epidemiology. A rough sketch was drawn up which was endorsed by the Vice-Principal, Academic, Dr. Samuel Freedman, and the McGill Principal, David Johnston. The proposal was well-received by the various McGill committees and was given final approval within six months. It would be the first university Department of Oncology in Canada. The inaugural Department Chair, Dr. Brian Leyland-Jones, wrote the following in the Department’s first annual report of 1990/1991: “The vision of Dean Cruess in establishing a comprehensive Department of Oncology within a prestigious university setting to cover all aspects of cancer patient care, teaching and research is perhaps unique. Hence, this Department must serve as a model for similar Departments to be set up in the future.”

McGill approval was premised on the understanding that there would have to be a major campaign to raise funds for the new Department, therefore an advisory committee was created for this purpose. Mrs. Sheila Kussner was a major force in the fundraising campaign as she was responsible for securing over 25 million in donations. In a letter to Mrs. Kussner dated April 19, 1989, Principal Johnston wrote: “Clearly, your inspired leadership, dedication and infectious enthusiasm towards the creation of what will become one of the world’s foremost centres for cancer care, teaching and research must be those same special qualities of McGill’s original benefactors and leaders, notably McGill, Dawson, Osler and Penfield to name a few. Ten million dollars and counting inspired by your tireless devotion to the Department of Oncology is a remarkable achievement.” In 1991 McGill University conferred an honorary Doctorate of Laws degree to Mrs. Kussner for her leadership and commitment in building the Department of Oncology.

Minda de Gunzburg (née Bronfman), eldest daughter of Samuel and Saidye Bronfman and wife of Baron Alain de Gunzburg, had passed away from cancer in 1985. To honour her memory, the family wished to donate money for a cancer cause and invited McGill University to submit an application. McGill received the donation for its proposal to create the Minda de Gunzburg Chair in Oncology tied in with the creation of the Department of Oncology. Fundraising efforts also secured donations to create the Herbert Black Chair in Surgical Oncology, the Mike Rosenbloom Chair in Radiation Oncology, the Louis Lowenstein Chair in Hematology & Oncology, the Evelyn Steinberg Alexander & Rita Steinberg Goldfarb Chair in Medical Oncology, the Eric M. Flanders Chair in Palliative Medicine and more recently, the Christine and Herschel Victor/Hope & Cope Chair in Psychosocial Oncology. Other major donations included the Gertrude & Stanley Vineberg Clinical Scientist Award, the Ruth & Alex Dworkin Scholarship Fund, the Helen & Sam Steinberg Family Cancer Career Scientist Award, the Rita Steinberg Goldfarb Scientist Award, the Janine Riesman Research Scientist Award, the Ron & Irving Levitt Family Foundation Scholarship, the Lynda Turner Memorial Fund, the Webster Family Foundation, the Birks Family Foundation, the Schouella Family and the Cedars Cancer Institute at the Royal Victoria Hospital.

Building the Department – 1990-2001

In 1988 Dr. Brian Leyland-Jones was heading the Developmental Chemotherapy section at the National Cancer Institute (NCI) in the United States when he was approached by Dr. Cruess to consider being the inaugural Chair of the McGill Department of Oncology. After several interviews he was appointed as Chair in June 1989 and moved to Montreal to assume the position in January 1990. His mandate was to build a Department of Oncology comprised of oncologists from the McGill-affiliated hospitals, and encourage unity and collaboration across hospital sites, thus over the next three years he spent long hours in his office, building the department. To this end, there also were independent efforts from the Royal Victoria Hospital, Montreal General Hospital, Jewish General Hospital and St. Mary’s Hospital to recruit their oncology clinicians to join the new McGill department. Improving accrual to cancer clinical trials at the McGill hospitals was also a very important mandate of the inaugural Chair. When Dr. Leyland-Jones came on board he found examples of the same clinical trial being conducted separately at two McGill-affiliated hospitals. He convinced the clinicians that accrual could be improved if the trials were consolidated...
and managed centrally at McGill. During the summer of 1990 Dr. Cruess, with the support of the stakeholders at the hospitals, created a McGill Institutional Review Board (IRB) to centralize research ethics assessment of oncology protocols. Also in 1990, the Marjorie and Gerald Bronfman Foundation gave a generous donation to found the Gerald Bronfman Centre for Clinical Research in Oncology which officially opened its doors in May 1992. The Centre, located at 546 Pine Avenue West and comprised of two connected Victorian homes, was ideally situated adjacent to the downtown McGill campus, across the street from the Royal Victoria Hospital and within walking distance of the Montreal General Hospital, while the Jewish General Hospital and St. Mary’s Hospital were a short distance by car. The Centre served as the central coordinating body for clinical trials across hospital sites and was the home base for the Department, housing its administrative offices. As the Department developed in the early 1990s, McGill-affiliated hospitals followed suit with the creation of an oncology department at the Montreal General Hospital, and an oncology program at the Royal Victoria Hospital. The Jewish General Hospital already had a parallel structure. By 1997, St. Mary’s Hospital had created a Department of Oncology thus completing the circle.

Within the first 18 months much progress was made in building the Department, including the development of its structure, the creation of different educational and community outreach programs, the recruitment of over 30 faculty members and the assembling of a team of administrative staff. Considerable funding from the Martinex Public Funding Project enabled the Department to develop and begin eight new research and development projects. The Division of Radiation Oncology was led by Dr. Carolyn Freeman and she became the first recipient of the Michael Rosenbloom Chair in Radiation Oncology. The Division continued building its residency training program, plans were underway to renovate the radiation oncology facilities at the Montreal General Hospital, and new and expanded facilities opened up at the Jewish General Hospital. The Division of Clinical Oncology, led by Dr. Richard Margolese, first recipient of the Herbert Black Chair in Surgical Oncology, continued to play a major role in clinical research studies from the National Surgical Adjuvant Breast and Bowel Project (NSABP). Department members who were very active in conducting NSABP trials included Drs. Richard Margolese, Henry Shibata and Michael Thirlwell, and they impressed upon medical students that conducting clinical trials was the crucial path to progress in cancer treatment.

In 1995 the Division of Clinical Oncology was split into the Division of Medical Oncology (Inaugural Director, Dr. Michael Thirlwell) and the Division of Surgical Oncology (Inaugural Director, Dr. Henry Shibata). The Division of Surgical Oncology included General Surgical Oncology, Urologic Oncology, Gynecologic Oncology, Orthopedic Oncology, Head and Neck Oncology, Thoracic Oncology and Neurosurgical Oncology. The Division of Palliative/Supportive Care (Palliative Care McGill) was led by Dr. Balfour Mount, with Dr. Harry Shizgal coming on board as Director of Research. Mrs. Kappy Flanders, a formidable advocate for palliative care, established the McGill-based Council on Palliative Care in 1994. Furthermore, in memory of her late husband, she established the Eric M. Flanders Chair in Palliative Medicine, with Dr. Mount becoming the inaugural Chair holder.

Dr. Clifford Stanners, Director of the McGill Cancer Centre was the natural choice to also lead the new Department’s Division of Cancer Research. The mandate of the Division was to foster innovative cancer research throughout the McGill network, transfer research findings to the clinical oncologist and provide training to the next generation of cancer researchers. By 1995, the Division had grown with the establishment of the Molecular Oncology Laboratories at the Royal Victoria Hospital, the Montreal General Hospital Oncology Laboratories and the Terry Fox Laboratories at the Jewish General Hospital. In 1996, McGill approved the creation of the McGill Centre for Translational Research in Cancer, led by Dr. Gerald Batist and headquartered at the Jewish General Hospital. Dr. John Ballar became the acting Director of the Cancer Research Society Division of Epidemiology (Division of Cancer Epidemiology) and began identifying areas for development in cancer epidemiology. Since 1995, Dr. Eduardo Franco has been Director of the Division, with its administration and research offices located at the Department headquarters.

Although the original plan was to have five divisions, Dr. Leyland-Jones expanded this to include other divisions and sections. The Division of Pediatric Oncology, directed by Dr. Michael Whitehead, was based at the Montreal Children’s Hospital and was an active participant in Pediatric Oncology Group (POG) clinical trials. The Division of Pharmacokinetics, led by Dr. Irving Wainer, was tasked with drug development, bringing basic cancer research discoveries to the clinic and the latest anticancer therapies to Montreal. By 2001, this Division had been discontinued. The Division of Clinical Trials Operations was created to maximize McGill’s participation in oncology clinical trials by serving as the focal point for trial management and data monitoring. To achieve this goal, the first Director, Ms. Janet Burghardt, established a data management unit and a protocol office, and recruited 19 staff members. The transdivisional Experimental Therapeutics Section, directed by Dr. Gerald Batist, was created in order to develop and run early phase clinical trials to test new treatment strategies for major tumour types. By mid-1991 there were 22 active protocols covering all disease sites. This section was discontinued in 1992 following the restructuring of the Division of Clinical Oncology into eleven multi-disciplinary disease site sections which were to incorporate McGill-initiated clinical research studies as well as those from cooperative groups such as the National Surgical Adjuvant Breast and Bowel Project (NSABP), National Cancer Institute.
of Canada (NCIC), Radiation Therapy Oncology Group (RTOG) and Pediatric Oncology Group (POG), and those sponsored by the pharmaceutical industry. By 1993, the Clinical Research Unit at the Jewish General Hospital under the direction of Dr. Gerald Batist, had opened.

Dr. Leyland-Jones created an Executive Committee comprised of each of the divisional directors, hospital directors and two external members to discuss new appointments, promotions and tenure issues in addition to other Department-related matters. In 1993, a departmental retreat was held to assess issues and priorities of the growing Department. He also created a Medical Education Committee, originally chaired by Dr. Henry Shibata and subsequently by Dr. Jane Skelton, in order to unify cancer-related basic science and clinical education for McGill undergraduate medical trainees and the oncology residency training programs. In the mid-1990s, the committee drafted a syllabus to teach cancer-related material during the first two years of the undergraduate medical education curriculum, with the basic science component being taught during the Basis of Medicine portion of the curriculum, and clinical oncology topics being taught during the Introduction to Clinical Medicine (ICM) portion. Dr. Shibata, who became Associate Chair in 1995 and then Interim Chair from 2000 to 2001, was committed to ensuring that medical students gain a better understanding of oncology and to this end, asked Dr. George Shenouda to develop an undergraduate medical education oncology curriculum. Dr. Shenouda created a two-week oncology course for second year students during ICM whereby students would rotate in pediatric, medical and radiation oncology clinics and would have sessions on palliative care and communication skills.

An Oncology Residency Training Committee was formed to coordinate the radiation oncology, medical oncology, surgical oncology and hematological oncology training programs, the latter eventually falling under the purview of the Department of Medicine. The longstanding radiation oncology training program had been accredited by the Royal College since the mid-1970’s and the medical oncology training program since 1985. Dr. Shibata had created the first General Surgical Oncology Training Program in Canada in 1978 and between 1978 and 1994 nine residents completed this one-year program including Dr. Antoine Loutfi as the program’s first trainee. Dr. Loutfi went on to have a highly successful career at McGill as a surgeon and was the first director of the Direction de la lutte contre le cancer of the Quebec Ministry of Health and Social Services where he implemented a 5-year cancer control plan that led to several improvements in cancer care. In 1994, under Dr. Shibata’s lead, the training program became a two-year Royal College-recognized program that was accredited without certification. Between 1994 and 2000, four additional trainees completed the program and subsequently the program became fully certified. Dr. Shibata also was the driving force behind the creation of the Medical, Surgical and Radiation Oncology Course which was developed as a way for trainees in the three residency programs to come together every two weeks to listen to lectures given by faculty members on a range of topics in oncology. This was the foundation for today’s Multidisciplinary Oncology Residents Education (MORE) series.

In 1979, Medical Physics education programs were created, however under the leadership of Dr. Ervin Podgorsak, in 1993 the Medical Physics Unit successfully obtained its first accreditation by the Commission on Accreditation of Medical Physics Education Programs (CAMPEP) for its MSc and PhD programs. For the first ten years these were the only such programs in Canada. The Residency Program in Radiation Oncology Physics has been accredited since 2000.

Oncology Grand Rounds, a joint initiative with Université de Montréal, started off with local speakers and then over time, thanks to the efforts of Dr. Adrian Langleben, was able to secure pharmaceutical sponsorship so that the lecture series could host over 10 visiting professors. This was to be the foundation for today’s Visiting Speakers Program in Oncology (VSPO). Dr. Henry Shibata played a very important role in fostering the relationship between the Cedars Cancer Foundation and the McGill Department of Oncology. This included funding for researchers to go abroad, funding for research projects and the organization of visiting surgical oncologist lectures. Within the first 18 months, of the formation of the Department, the Cedars Cancer Institute inaugurated its bi-annual Visiting Professorship in Surgical Oncology. The Department developed a monthly Public Lecture Series; however this was terminated due to lack of attendance. A workshop in Clinical Trials was created for basic science graduate students in the Division of Cancer Research, however this eventually was terminated. An Educational Support Office was created to respond to enquiries from patients and their families on matters related to patient support, guidance on obtaining a second opinion and information on treatment and research. In addition, a library was created at the Gerald Bronfman Centre which included cancer-related reading, audio and video material for the general public. The Office also supported the psychosocial and educational needs of the healthcare providers by organizing relevant symposia and workshops. Furthermore, in 1992 they hosted the Mickey Stein Symposium and Skiathon, the symposium focusing on collaborative work on cancer prevention between McGill and Université de Montréal and the ski-a-thon at Mont Habitant raising money for the two universities. The Educational Support Office and the library no longer exist as these needs are now met by hospitals, cancer support groups and a plethora of online information.

As the inaugural Chair between 1990 and 2000, Dr. Leyland-Jones was responsible for taking the idea of a Department of
Oncology and turning it into a fully functional and thriving unit within McGill. He built a critical mass of Department faculty members, appointing both well-established and up-and-coming clinicians and cancer researchers, strived to make the Department a unifying body for cancer activities across McGill and its affiliated hospitals, centralized oncology clinical trials paving the way for increased accrual, and played a key role in the creation of a number of Chairs and Fellowships for the Department.

Enhancement of Interdisciplinary Activities – 2001-2010

By 2001, the Department was firmly established and the appointment of Dr. Gerald Batist as Chair ushered in a new phase of growth and the fostering of a wide variety of interdisciplinary partnerships. The Oncology Management Committee was created as the Department’s new governing body. Departmental scientific retreats held in 2001, 2002, 2004, 2005, 2006, 2008 and 2009 were opportunities for Department faculty members in various cancer-related disciplines to interact and find common ground for their research activities. At the 2006 retreat, the highlight was the exercise break featuring an exciting floor hockey game with the Red Team winning the “Oncology Cup” which resides at the Departmental headquarters.

New programs were created as a result of alliances with other Departments at McGill. The Department allied with Psychiatry and appointed Dr. Zeev Rosberger as Director of the newly created Psychosocial Oncology Program, and in collaboration with the School of Nursing, the Department created Oncology Nursing and appointed Dr. Carmen Loiselle as the Director. The Psychosocial Oncology Option (PSO), developed to train a critical mass of future psychosocial oncology researchers, included faculty members in the fields of psychosocial oncology, palliative care, nursing and psychology. The expectation was that interested PhD students in the School of Nursing and the Department of Psychology would take the courses required for this Option while fulfilling the degree requirements of their specific program.

Oncology linked with the Department of Human Genetics to create the Cancer Genetics Program, led by Dr. William Foulkes. The Adolescent and Young Adult Oncology Program, directed by Dr. Petr Kavan, was established in 2003 as a joint venture between the Department of Oncology and the Department of Medicine. The Cancer Nutrition-Rehabilitation Program was co-founded in 2002 by oncologist and palliative care physician, Dr. Neil MacDonald and physiotherapist, Ms. Mary-Ann Dalzell. This multidisciplinary program joined together physicians, nurses, dietitians, physiotherapists, neurologists and pulmonologists in the common goal of developing and administering nutritional and rehabilitation programs for cancer patients suffering from anorexia/cachexia, as well as conducting research aimed at better understanding why some cancer patients develop this condition.

The Community Oncology Program, led by Dr. Jaroslav Prchal, includes community doctors, oncologists, palliative care physicians and nurses. The Cancer Prevention Program, led by Dr. Michael Pollak is a multidisciplinary program that was inaugurated in the fall of 2002. The Head and Neck Oncology program and Geriatric Oncology program were also created during the mid-2000’s. The coordinating activities for the Cancer Genetics and Cancer Nutrition-Rehabilitation Programs were located at the Department’s headquarters. Furthermore, the McGill Programs in Whole Person Care which was established in 1999 by Dr. Balfour Mount and Dr. Abraham Fuks (Dean of Medicine at the time), moved to the location of the Department’s headquarters in 2001.

Soon after Dr. Batist became Chair, he hired Dr. Gayle Shinder as Research Grants Coordinator in Oncology. In this position she played an important role in the Department from working with the various divisions and programs on special projects to oversight and guidance of young faculty and new recruits in the area in funding opportunities.

The McGill RUIS (Réseau universitaire intégré de santé), later changed to RUISSS (Réseau Universitaire Intégré de Santé et Services Sociaux) encompasses a large sector of Western Quebec from parts of Montreal to the northern region of the province. The Department became the focus of the oncology activities of the McGill RUIS and the “table d’oncologie” was established to advise the McGill RUIS Executive Committee on oncology matters, carry out the RUIS responsibilities in this area, and connect with other health care centres across the McGill RUIS territory. The objective was to develop a process of integration of clinical services and academic activities across McGill with respect to clinical care, teaching, research, material and financial resources, telehealth and addressing manpower shortages. This multidisciplinary committee, chaired by Dr. Batist, included physicians in various oncology related disciplines, nurses, pharmacists and patient representatives, and met regularly between 2005 and 2010.

During this time the Department continued to grow as new faculty members were appointed in various cancer-related research and clinical care disciplines. In 2005 the Department established a website and for several years a newsletter was printed twice a year to keep members informed of the latest news from the Department. The Department had an Oncology Summer Scholarship Program, providing one or two undergraduate students in the Faculty of Science the opportunity to spend the summer conducting cancer research under the supervision of a Department faculty member. In addition, thanks to the efforts of Dr. Lawrence Panasci, in the mid-2000s the Department of Oncology received $40,000/year for two years for a Bayer Fellowship in Oncology, the first recipient being Dr. Cristiano Ferrario.
A major turning point for the Department’s researchers and clinicians at the Jewish General Hospital was the move, in late 2005 and early 2006 to the hospital’s brand new, state-of-the-art Segal Cancer Centre, bringing together research (basic, translational and clinical) and clinical care in one location. Also in the mid-2000’s, the Department’s clinicians were very busy working with multidisciplinary teams at their respective hospitals as they prepared for the Programme Québécois de lutte contre le cancer’s assessment of how the different components of cancer services are run in hospitals across Quebec.

The previously established Medical, Surgical and Radiation Oncology Course was revamped and became Multidisciplinary Oncology Rounds which typically featured one in-house speaker on a topic. In addition, a Multidisciplinary Oncology Journal Club, run by Dr. Eduardo Franco, was created to allow residents in the three training programs to engage in a multidisciplinary discussion about a selected journal article. By the mid-2000s the Multidisciplinary Oncology Rounds had been restructured to become the Multidisciplinary Oncology Residents Education (MORE) series where sessions focused on a particular disease site would have lectures from two to three in-house teaching staff representing medical, radiation and surgical oncology. The MORE series has been praised by the Royal College during accreditation of the Department’s residency training programs. The Oncology Grand Rounds speaker series was revamped, becoming the Visiting Professors in Oncology Program and subsequently the Visiting Speakers Program in Oncology (VSPO).

Interdisciplinary is the word which aptly sums up Dr. Batist’s term as Department Chair. From the creation of new programs, fostering collaborations among Department members, the development of an Option in Oncology for PhD students in Nursing and Psychology, the development of the MORE series, and the Table d’ontologie for the McGill RUIS, Dr. Batist helped bring Department members out of their silos so that they can learn and capitalize on the vast array of cancer-related expertise at McGill. Following the publication in Current Oncology of the invited paper, The McGill University Department of Oncology: Structure depicts the shape of evolving knowledge, by Gerald Batist and Gayle Shinder, (Current Oncology 15(3): 28-35, 2008), Dr. Batist wrote the following in the 2007/2008 annual report: It describes the changes that we’ve all made in how we function, which reflects the rapid evolution of both cancer care and research to interdisciplinarity….I believe that the leadership McGill held in first creating the Department persists in the innovations we’ve created since its inception.

Enriching the academic life of the Department - 2011-Present

In 2011, Dr. Eduardo Franco became Acting Chair and then Interim Chair and was appointed as Department Chair in 2013, a position that continues to date. Dr. Franco’s goals for his term as Chair were to enhance the educational profile of the department, nurture the career trajectory of its faculty members, enhance the visibility of the department, its members and its academic activities and foster a sense of connection to the department as the central hub for cancer-related activities across the McGill network. Dr. Franco’s vision is that of “strategic pragmatism” which he explains in the 2012 Annual Report: “The goal is to derive strength from the existing multi-silo structure of the oncology network at McGill, with its centres and hospital units that have much to gain in maintaining their independence and direct representation in the Faculty of Medicine. The Chair of the Department of Oncology should build on the strengths of this robust network, catalyze the academic and research interactions, nurture the careers of its faculty members, and ensure that the department meets its mission within McGill and provides a useful service to society.”

Dr. Franco made several changes to governance and administration in order to facilitate achievement of his goals. He created the position of Associate Chair, Clinical Affairs to tie in with the Clinical Lead of the Rossy Cancer Network (see below), with Dr. Wilson Miller as the inaugural appointee. Furthermore, he created the position of Director of Education, appointing Dr. Joanne Alfieri as the inaugural Director, to provide oversight for the Department’s undergraduate and postgraduate medical education programs. He greatly expanded the role of Dr. Gayle Shinder, now Chair’s Senior Advisor for Academic Programs, who is uniquely positioned to work on a wide range of departmental initiatives due to her in-depth knowledge of the broad scope of academic activities of the department and its members.

He also hired Dr. Farzin Khosrow-Khavar to serve as a Senior Data Analyst assisting Department members and their trainees with the design, execution, analysis, and reporting of their cancer research studies. The Departmental Leadership Council (DLC) replaced the longstanding Oncology Management Committee in order to provide a governance voice to division and program directors at the various sites of academic and clinical activity. Furthermore, Dr. Franco created the Chair’s Executive Committee comprised of four Senior Advisors, one each for Academic Programs, Educational Affairs, Clinical Affairs and Administrative Affairs.

Dr. Franco began his mandate with a comprehensive report on the long-standing Clinical Research Program (previously named Clinical Trials Operations), directed at the time by Drs. Wilson Miller and Catalin Mihalciou and managed by Ms. Penny Chipman. The report concluded that from 2000 to 2010 the program had participated in close to 500 clinical trials, enrolling over 3600 patients, and that for some of these trials, the investigational products provided by industry are now considered standard of care for particular tumour sites. In 1990, the idea of McGill-based centralized coordination of clinical trials across hospital sites was enthusiastically
embraced, however, in 2015 things were about to change. Due to new Quebec regulations that trials be coordinated within hospitals, the Clinical Research Program began winding down its operations by continuing to manage its ongoing trials but not taking on any new ones. Over time, management of the ongoing trials was transferred to the hospitals and the Program officially closed in spring 2018.

Inaugurated in March 2012, the Rossy Cancer Network (RCN) (https://www.mcgill.ca/rcr-rcn/) is an initiative that was sparked by the vision and generous donation from the Larry and Cookie Rossy Family Foundation. The Department Chair sits on the RCN Executive Committee as does the RCN Clinical Lead and the Oncology leads from the McGill University Health Centre, the Jewish General Hospital and St. Mary’s Hospital Center. The goal of the RCN is to unite the cancer care programs in the McGill-affiliated hospitals, developing common practices and improving cancer care across all hospitals. To this end, disease site groups were created for breast, gastrointestinal, genitourinary, gynecology, head and neck, hematology, lung and sarcoma cancers, and a number of quality indicators were chosen for monitoring in the categories of patient experience, effectiveness, accessibility and safety, with continuity and efficiency to come. With the closure of the Department’s Clinical Research Program, the Rossy Cancer Network has played an important role in harmonizing clinical trials across hospital sites. In 2013, Dr. Ari Meguerditchian was appointed Director of the Quality Cancer Care Initiative of the RCN. He was responsible for the design and implementation of three funding programs: Cancer Quality and Innovation (CQI) Research Fund, Cancer Quality and Innovation (CQI) Education Fund, and the Quality Improvement Initiatives (QI2) Fund. Since 2014, the CQI Research Fund has supported a wide range of research projects aimed at improving the quality of cancer care at the McGill-affiliated hospitals. The CQI Education Fund includes the Skills Enhancement Program for healthcare professionals and the Kuok Fellowship (in partnership with the McGill Department of Oncology) for graduate students. The QI2 Fund supports quality improvement initiatives of hospital teams across the McGill network. In 2020 the Gerald Bronfman Department of Oncology assumed management of the CQI Research and Education Funds with the ongoing support of the RCN’s Executive Committee.

In 2012, the Faculty of Medicine was in the process of restructuring its undergraduate medical education (UGME) program. In order to ensure the presence of a strong oncology component in this new curriculum, Dr. Franco asked the Director of Oncology Undergraduate Medical Education at the time, Dr. Jamil Asselah, to draft a proposal for submission to the planning committee. When the new UGME curriculum was launched, the oncology portion which would be taken in third-year clerkship, comprised of an academic half-day focusing on diagnosis and staging of cancer (90 minutes) and treatment of cancer (90 minutes), a second academic half-day on clinical cases (colorectal cancer – 90 minutes; breast cancer – 90 minutes), two half-days of medical oncology clinic rotations and two half-days of radiation oncology clinic rotations. Furthermore, Department faculty members have served as research mentors for medical students interested in cancer research.

Enhancements also were made regarding the oncology residency training programs (medical, radiation and surgical oncology). The Department allocated funds to provide an academic allowance (a fixed amount) to each resident in order to promote educational activities. This allowance could be used for attending conferences, purchasing relevant educational material, or for other program-relevant educational activities. In addition, in response to suggestions made by residents when they were surveyed, the MORE series was modified to replace some lectures with mock tumour board sessions, thus encouraging active participation. The radiation oncology residency training program, under the direction of Dr. Joanne Alfieri, developed a Quality Improvement program for their residents and this proved to be so successful it is now included in the surgical and medical oncology residency training programs.

When Dr. Franco took on the role as Chair, the Department had neither a graduate program nor any courses. Although Department faculty members have always played an active role in training graduate students and teaching courses, they did so under the auspices of other university departments. Dr. Franco was determined to augment the education portfolio of the Department and with the help of Dr. Gayle Shinder the Graduate Diploma in Oncology and six new courses were developed and officially launched in 2020. The Graduate Diploma in Oncology is a one year, 30-credit program that gives students the opportunity to gain exposure to the principles and practice of oncology as well as its research domains while exploring in more detail one of four areas of focus, namely, population and global cancer control; psychosocial oncology/palliative care; clinical cancer research; or cancer care services and quality. The full-year course, Fundamentals of Oncology and Cancer Research, was created to provide a comprehensive survey of the entire field of oncology and cancer research. The other new courses include Best Practices in Biomedical Research, Principles and Practice of Clinical Trials, Quality Improvement Principles and Methods, Qualitative and Psychosocial Health Research, and Oncology Practicum. The creation of the Graduate Diploma in Oncology is just the first phase in the development of the Department’s Graduate Program as proposals for a Master’s thesis program and a PhD program are in the works.

While it is important to grow the faculty, keeping it vibrant with fresh perspectives on research and teaching, it is equally important to nurture the careers of its members and showcase and acknowledge their accomplishments. The mentorship committee comprised of senior academic staff
was created to provide, on an as needed basis, guidance to junior faculty members. Moreover, the Chair’s Office now offers a unique service to faculty members applying for tenure and promotion whereby the Chair’s Senior Advisor for Academic Programs critically reviews each dossier and provides guidance to the applicant to ensure that the dossier is highly polished before submission to the Departmental Tenure/Promotions Committee. Furthermore, the Chair provides the applicant with detailed assessment of his/her research productivity and impact in comparison to others in the Department at their rank to offer a perspective on research expectations as they continue their career trajectory.

While the Department has had a website since the early 2000’s, it has been recently revamped and modernized. Moreover, the Department now has a social media presence (Facebook, Instagram, Twitter and LinkedIn). The accomplishments and accolades of department members are celebrated with announcements on our website and social media pages. However, these announcements only give a small glimpse of the academic and clinical work of our faculty members. The Focus on Faculty Series, begun in June 2015, profiles a different faculty member every month and showcases who they are and what they do in the realm of cancer-related activities. Furthermore, since 2011 the Department has recognized members who have shown excellence in the following categories: Research or Clinical Service; Teaching and Mentorship; Academic, Clinical or Research Support. One award in each of these categories, as well as a Lifetime Achievement Award, is announced during a yearly ceremony held in the fall (see below).

As a way to honour our benefactors, Marjorie and Gerald Bronfman, the Department, with the support of the Faculty of Medicine, held the Gerald Bronfman Centre Symposium and Awards Ceremony in the fall from 2011 to 2015. Each year the symposium focused on a different theme: Cancer Control, Basic Cancer Research, Psychosocial Oncology, Advances in Cancer Therapy and Advances in Cancer Genetics. There was a hiatus in 2016, and in 2017 the annual fall event was restructured as the Gerald Bronfman Department of Oncology Distinguished Lecture and Awards Ceremony. Thus far the distinguished lecture topics have been new cancer therapeutics, history of the field of medical oncology, history of breast cancer treatment and most recently, history of palliative care at McGill and in Quebec.

Over the last decade the Department has seen a lot of changes and has celebrated milestones. In 2014, the Faculty of Medicine abolished departmental level management of human resources and finance in favour of shared centralized management through its Administrative Excellence Centres (AEC). Our Department is covered by AEC-7 which also covers the Departments of Pathology and Diagnostic Radiology, with Oncology being the largest of the three. One of the biggest changes occurred in 2015 when our research and clinical faculty working at the Royal Victoria Hospital and Montreal General Hospital moved to the brand new McGill University Health Centre, Glen Site. Other major changes occurred in June 2016 when the Department of Oncology was re-named the Gerald Bronfman Department of Oncology and in February 2017, when the Department’s headquarters moved from its longstanding home close to campus to its current home closer to the location of its hospital-based faculty members. The Department underwent its first cyclical review in 2012, and was the first clinical Department to do so for that round of cyclical reviews. A second cyclical review took place in 2018. A noteworthy occasion was the celebration of the Department’s 25th anniversary in 2015 which included a trifecta of events: (i) a symposium (done in collaboration with the Rosalind and Morris Goodman Cancer Research Centre) honouring Drs. Phil Gold and Samuel Freedman which celebrated the 50th anniversary of their discovery of Carcinoembryonic Antigen (CEA) and its role in colorectal cancer; (ii) a one-day symposium organized by the residents in our three training programs which featured two internationally renowned keynote speakers, in-house speakers and a poster session; and (iii) the annual symposium and awards ceremony.

On a final note the Department of Oncology headquarters is currently the Editorial Office of the public health journal, Preventive Medicine and its daughter journal Preventive Medicine Reports with Dr. Eduardo Franco as Editor-in-Chief, Dr. Gayle Shinder as Deputy Editor and Dr. Franco’s graduate students as Assistant Editors (currently Karena Volesky, Samantha Shapiro and Aaron MacCosham); previously Dr. Joseph Tota and Dr. Sandra Isidean). The submissions to Preventive Medicine have dramatically increased over the years since we began in 2013, from 1019 submissions in 2013 to 2066 submissions in 2019. Similarly, Preventive Medicine Reports had 109 submissions in 2014, the year it was created and 372 submissions in 2019.

Looking to the Future
“Life is divided into three terms - that which was, which is, and which will be. Let us learn from the past to profit by the present, and from the present, to live better in the future.”

William Wordsworth

(https://www.brainyquote.com/topics/future-quotes_3)

In April 2019, the Department held a very productive one-day strategic planning retreat which attracted over 70 Department members and provided many ideas on how we can further build and strengthen the Department. Although we have implemented some of the suggestions, others will require a bit more thought and ingenuity as we face the current and post COVID-19 pandemic reality of financial constraints and the short- and long-term modifications to
how teaching, learning, research and functioning in the workplace are conducted.

In 2020 the Department was to celebrate its 30th anniversary with a few events, however due to the pandemic celebrations were postponed to 2021. One of the postponed events is a fundraiser organized by the Canada Pakistan Affiliated Chamber of Trade (CPACT) who, in December 2019, had signed a Memorandum of Understanding with the Department to raise funds in support of the department’s education and research activities. The theme of this event was to be female champions, and of those being honoured, three are from our department: Dr. Nicole Beauchemin, Dr. Carolyn Freeman and Dr. Anna Towers.

The pandemic has had a negative impact on other healthcare concerns including cancer prevention and care. The Department, working closely with the Rossy Cancer Network, has created the Impact of COVID-19 on Cancer Care and Control Task Force, to determine the impact of the pandemic on the McGill-affiliated hospitals and how best to overcome this impact. The Department recently created the Task Force on Global Oncology to develop and implement a vision for global oncology education, research, policy, and service.

With the help of the Senior Data Analyst, the Department is assessing equity taking into account a number of different factors, with the ultimate goal of improving pay equity and representation of minority groups.

As we look to the future, we envision a department that will have a full roster of graduate programs and courses. With COVID-19 forcing universities to fully embrace remote learning, it is possible that over time many educational programs, including our own, could adopt a hybrid model of remote and face-to-face learning.
### Table 1 - Overview of the Gerald Bronfman Department of Oncology - 2020

<table>
<thead>
<tr>
<th>Research Activities</th>
<th>Education Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic research focusing on understanding at the molecular, cellular, and tissue levels the development and growth of tumours and their resistance to therapy</td>
<td>Genetic studies of inherited susceptibility to cancer</td>
</tr>
<tr>
<td>Translational research for the development and testing of novel therapeutics; biomarkers, and molecular signatures as targets for cancer detection or treatment</td>
<td>Epidemiological studies of the etiology, prevention, screening, and prognosis for several cancers</td>
</tr>
<tr>
<td>Phase I, II and III clinical research studies testing the efficacy of new cancer treatment therapies</td>
<td>Psychosocial research aimed at improving the emotional well-being and quality of life of cancer patients and their families, and managing pain and other symptoms of the disease</td>
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<tr>
<td>Radiation physics studies to improve the delivery and efficacy of radiotherapy</td>
<td>Health systems research aimed at improving the quality of cancer care and clinical outcomes</td>
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<table>
<thead>
<tr>
<th>Graduate Diploma in Oncology</th>
<th>Oncology curriculum in undergraduate medical education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduate Courses</td>
<td>Medical Oncology Residency Training Program</td>
</tr>
<tr>
<td>❖ Fundamentals of Oncology and Cancer Research (ONCO 610)</td>
<td>Radiation Oncology Residency Training Program</td>
</tr>
<tr>
<td>❖ Principles and Practice of Clinical Trials (ONCO 615)</td>
<td>Surgical Oncology Residency Training Program</td>
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<tr>
<td>❖ Best Practices in Biomedical Research (ONCO 620)</td>
<td>Multidisciplinary Oncology Residents Education (MORE) series</td>
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<tr>
<td>❖ Quality Improvement Principles and Methods (ONCO 625)</td>
<td>Oncology Journal Clubs for Residents</td>
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<tr>
<td>❖ Oncology Practicum (ONCO 630)</td>
<td>Fellowships in Medical Oncology and Radiation Oncology</td>
</tr>
<tr>
<td>❖ Qualitative and Psychosocial Health Research (ONCO 635)</td>
<td>Visiting Speakers Program in Oncology (VSPO)</td>
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<table>
<thead>
<tr>
<th>Clinical Activities</th>
<th>Support and Recognition of Department Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Oncology</td>
<td>Annual Awards</td>
</tr>
<tr>
<td>Radiation Oncology</td>
<td>❖ Lifetime Achievement</td>
</tr>
<tr>
<td>Surgical Oncology</td>
<td>❖ Research or Clinical Service</td>
</tr>
<tr>
<td>Hematologic Oncology</td>
<td>❖ Teaching &amp; Mentorship</td>
</tr>
<tr>
<td>Gynecologic Oncology</td>
<td>❖ Academic, Clinical or Research Support</td>
</tr>
<tr>
<td>Head &amp; Neck Oncology</td>
<td>Encouraging educational activities of trainees</td>
</tr>
<tr>
<td>Pediatric Oncology</td>
<td></td>
</tr>
</tbody>
</table>

### Support and Recognition of Department Members

- Mentorship of junior faculty members
- Guidance when applying for tenure or promotion
- Data analysis support
- Focus on Faculty profile series
- Celebrating faculty achievements on our website and social media pages
- Annual Awards
  ❖ Lifetime Achievement
  ❖ Research or Clinical Service
  ❖ Teaching & Mentorship
  ❖ Academic, Clinical or Research Support
- Encouraging educational activities of trainees

### Locations of Cancer-Related Activities

<table>
<thead>
<tr>
<th>McGill University</th>
<th>CIUSS du Centre-Ouest-de-l’île-de-Montréal</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Department headquarters at 5100 de Maisonneuve Blvd West</td>
<td>- Jewish General Hospital</td>
</tr>
<tr>
<td>- Rosalind and Morris Goodman Cancer Research Centre</td>
<td>- Segal Cancer Centre</td>
</tr>
<tr>
<td>- Other areas on campus</td>
<td>- Lady Davis Institute for Medical Research</td>
</tr>
<tr>
<td>McGill University Health Centre (MUHC)</td>
<td>CIUSS de l'Ouest-de-l'Île-de-Montréal</td>
</tr>
<tr>
<td>- Glen Site</td>
<td>- St. Mary’s Hospital Center</td>
</tr>
<tr>
<td>- Montreal General Hospital</td>
<td>Rossy Cancer Network</td>
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<tr>
<td>- Montreal Neurological Hospital</td>
<td></td>
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<tr>
<td>- MUHC-Research Institute</td>
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