

Combined Clinical and Research Movement Disorders Fellowship

Name of institution

McGill University Health Centre (MUHC)

Primary locations

Montreal Neurological Institute and Hospital, 3801 Rue University, Montreal, Quebec
Montreal General Hospital, 1650 Cedar Avenue, Montreal, Quebec

Type of Fellowship

This is a combined 2-year clinical (20-40%) and research (60-80%) fellowship. Both clinical and basic research opportunities are available.

Duration

2 years

Number of positions

1 fellow

Program director

Madeleine Sharp MDCM MSc

Assistant Professor, Department of Neurology and Neurosurgery, McGill University

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Program Information

Mission statement

To foster evidence-based, comprehensive and effective diagnosis and management for patients with Parkinson's disease, parkinsonian syndromes and other movement disorders.

To foster the development of independent research skills.

Requirements

This program accepts applications from specialists who have obtained Royal College of Physician and Surgeons (or equivalent) certifications in Neurology or Geriatric Medicine. The fellowship will be awarded based on the applicant's letter of intent, CV, past performance and online or in-person interview, depending on the circumstances. Applicants must have identified and entered into discussions with a potential research supervisor prior to application (see list of faculty below).

Funding

Candidates must secure funding. Potential sources for fellowship funding include the FRQS, CIHR, Parkinson Canada, and opportunities at the MNI (see here:

<https://apps.mni.mcgill.ca/clinicalawards/awards-unlocked.php>). Additional funding opportunities may be available through <https://www.cnsfederation.org>.

Funding should be discussed with the proposed research supervisor.

Clinical activities

- The clinical activities will primarily take place at the multidisciplinary Movement Disorders clinics of the Montreal General Hospital and of the Montreal Neurological Hospital.
- Fellows will work under the supervision of the attending neurologists (Lafontaine, Fon, Dagher, Postuma, Sharp, Huot, Sidel). They will be responsible for evaluating and treating patients with Parkinson's disease, parkinsonian syndromes and other movement disorders. They will also be responsible for working in collaboration with the members of the multidisciplinary team (physiotherapist, occupational therapist, speech and language therapist, social worker, nutritionist, neuropsychiatrist) in addition to the two clinical nurse specialists.
- Clinic attendance is expected to be 1-2 days/week in the general movement disorders clinic (MGH and MNH).
- The intended percentages of the varieties of cases: 55% Parkinson's disease, 15 % parkinsonism, 30% other movement disorders (Tremor, dystonia, chorea, myoclonus, ataxia)
- Fellows are also expected to be responsible for returning phone calls to patients, and to work in collaboration with the two movement disorder clinical nurses
- In addition, fellows will be expected to complete in-patient consults (MGH or MNH), which occur on average 2-4 times per month.
- There are also possibilities for additional clinical exposure in relevant sub-specialty areas such as botulinum toxin injections for dystonia, neurosurgery, geriatric psychiatry, neurogenetics and cognitive neurology, to be determined on a case-by-case basis based on interest and availability.
- The fellow will also be expected to assist in clinical evaluations as part of ongoing clinical trials.

Research and other academic activities (60-80%)

- Applicants are expected to have entered into discussions with a potential research supervisor prior to applying for the fellowship.
- Fellows will be expected to be the primary lead on one or two research projects and to contribute, as needed to other research activities in the lab of the research supervisor.
- Research output: Fellows in the combined clinical and research fellowship will be expected to publish two manuscripts and to present their research at national or international conferences.
- In addition to these research activities, all fellows will be expected to help plan and contribute to weekly movement disorders rounds, which consist of:
 - Journal Clubs, which occur on average 3 weeks per month. Fellows will be expected to present a minimum of once per month.
 - Rotation of Neuroradiology rounds, Neurogenetics rounds, and Neurosurgery rounds, which occur once per month. Fellows will be expected to help prepare and present cases for these clinical case-based rounds
- All fellows will also be expected to make contributions to the resident teaching (minimum 2 hours/year)

Conference and weekly schedules

As described above, the fellow is expected to help plan, prepare and attend the weekly Movement Disorder rounds. Other weekly rounds include: Neurology Grand Rounds, Killam Seminar series and the Feindel Brain and Mind Seminar series.

Evaluation and feedback

Clinical: Fellows will be evaluated quarterly on their performance at both the clinical and scholarly levels. Clinical evaluations and feedback will be provided by the attending movement disorders neurologist (Fon, Lafontaine, Dagher, Postuma, Sharp, Huot, Sidel) and feedback will also be solicited from the other clinicians on the team (RN, SW, OT, PT, SLP). Evaluations will be discussed with Dr. Sharp on a quarterly basis.

Research: research evaluations will be conducted with the research supervisor as part of regularly scheduled weekly meetings.

Training expectations

At the end of this fellowship, the fellow is expected to have gained the following competencies:

- **Medical expert:** Demonstrate expertise in the investigation, diagnosis and management of common and rare movement disorders.
- **Communicator:** Establish therapeutic relationship and provide effective and empathetic counseling to patients and families, communicate effectively with other health care professionals, effectively document clinical interactions.
- **Collaborator:** Interact effectively with multidisciplinary team and with community health care teams.
- **Leader:** Effectively use health care resources, effectively manage time.
- **Health advocate:** Recognize and effectively respond to situations which require advocacy on the part of patients with respect to the social, educational, and economic aspects that may adversely impact their health and their access to health care.
- **Scholar:** Demonstrate expertise in conducting clinical or basic research
- **Professional:** Demonstrate integrity, dependability, and a desire for continuous learning and improvement.

Teaching Faculty

- **Anne-Louise Lafontaine**
Role: Director Movement Disorders Clinic
Major Strengths: Movement disorders, expertise in botulinum toxin injections clinical trials, epidemiology
- **Ron Postuma**
Roles: Research and clinical
Major Strengths: Clinician-scientist with expertise in Parkinson's disease and prodromal Parkinson's disease, clinical trials
- **Edward Fon**
Roles: Research and clinical
Major Strengths: Clinician-Scientist with expertise in molecular biology of Parkinson's disease
- **Alain Dagher**
Roles: Research and clinical
Major Strengths: Clinician-Scientist with expertise in neuroimaging of Parkinson's disease

- **Madeleine Sharp**
Roles: Research and Clinical
Major Strengths: Clinician-scientist with expertise in Cognitive Neuroscience
- **Philippe Huot**
Roles: Research and Clinical
Major Strengths: Clinician-scientist with expertise in animal models and pharmacology
- **Michael Sidel**
Roles: Clinical, Movement Disorders and General Neurology
Major Strengths: Neurologist with expertise in movement disorders, general neurology, botulinum toxin injections