

THE SQUARE

T

hirty years of *The Square Knot* is an opportunity to reflect on the evolution of the McGill department of surgery over that time. This also falls at a time of reflection as McGill starts the celebration of its 200-year anniversary with Medicine as its initial faculty.

Finally, it is also my own personal opportunity to reflect on my 10 years as department chair as I prepare to step down at the end of this year and hand over the reins to my successor.

30 YEAR ANNIVERSARY
1989 – 2019

McGill has the tradition of being a

By Gerald M. Fried, MDCM, FRCS(C), FACS, FCACS

true international university, particularly with respect to its medical school. When one looks at the department of surgery, I am proud that it reflects the vitality and diversity of Montréal. Our trainees who have left Montréal have risen to important leadership positions in Canada, and around the world. Of that, I am exceedingly proud.

One role of an academic surgical department is to provide outstanding care to the community we serve, introducing innovative and better treatments to meet current needs. Over the past decade, the Quebec government has invested extensively in the infrastructure of its hospital system. We have seen the opening of the **new McGill University Health Centre (MUHC) campus at the Glen Yards**, housing the Royal Victoria Hospital, Cedars Cancer Centre, Children's Hospital, Research Institute and Centre for Innovative Medicine, as well as a new Shriners Hospital. During the same time the **Jewish General Hospital (JGH)** expanded into a new and modern pavilion. The **Lachine Hospital** was incorporated into the MUHC as a community hospital and site of our bariatric surgery program. New construction allowed us to build hybrid operating rooms bringing imaging technology into the OR environment. We have designed and introduced integrated OR suites at all sites over the last decade enabling us to practice minimally invasive surgery in well-designed rooms. More investment is needed at the **Montreal General Hospital (MGH)** site and at **St. Mary's** to update the clinical environment to optimal modern standards. Planning is ongoing to build new operating rooms and a new emergency room for the MGH and budget has been allocated by the Ministry of Health. We hope to see this project come to fruition over the next decade. ▶

(See continuation on page 3)

Inside

Letters to the Editor	2	Plastic Surgery	32
Editor's Note	5	Urology	33
Designing the Square Knot	7	Kudos	36
30th Fraser Gurd Day	10	Jewish General Hospital News	39
Divisional News	15	ITC4-2019: Medicine Without Doctors?	41
General surgery	15	Obituary	46
Orthopedic Surgery	23		
Pediatric Surgery	30		

KNOT



DEPARTMENT OF SURGERY

NEWSLETTER

McGILL UNIVERSITY

FALL 2019



Dear Editor,

Recollections from my Vascular Fellowship year at McGill 1987-88



Letters to The Editor

In 1987 as a general surgeon in the US Navy I had applied as a candidate for it's own peripheral vascular program. The US Navy program was discontinued but I was told that

I was "cleared hot" for any certified program should I get accepted. I looked at the ABS

list of board certified programs and sent out several letters. A few weeks later I was underway in the Pacific on the USS Constellation aircraft carrier and the XO said a call came and I needed to call a "Captain Symes in Montreal". I called several days later from California and learned it was Dr. James Francis Symes answering my letter. I flew to Montreal shortly and was hosted by Dr. Alan Graham who himself had recently finished vascular training in Chicago. He and his delightful wife Mikki showed me the warmest of hospitality. I met Jim the next day.

Upon arrival I exited the taxi that December and looked up at the "Royal Vic" hospital and it reminded me of Dracula's castle. Alan could not have been nicer and I saw he had a sense of humor. As we toured he introduced me to the faculty of the CV & T Dept. We went to the hockey game that night and I found myself drinking a 32 oz ice cold beer, outside the arena standing in the ice cold snow. The beers continued throughout the raucous game and I realized that this experience was to be a bit different.

We arrived on 2 July 1988 & found lodging in Westminster. I distinctly recall meeting a former Canadian Forces Sgt, the manager of the faculty parking lot below the Royal Vic research lab where my desk was. The kind fellow never bothered to ask for authorization and allowed me to park my snappy 911SC Porsche in that lot all year. There was a Postal strike going on but I saw the mail men would open the door for you, smiled and were polite. A strike in

US usually involves baseball bats. Another thing I noticed about Montreal I instantly liked. Very friendly.

It snowed in November. I remember our impressive Chief Resident Benoit DeVarences laughing at us yanks saying this snow was merely a "picnic". In any case, I was taking no chances so I took out my car cover from the boot to protect my Porsche. I noticed my new best friend in the pkg lot looked quite puzzled. No others had bothered to cover up. I did not know why. Early that evening I returned and noticed the car cover was 100% frozen and firmly attached to my car's body. It would not come off. It was totally stuck to my car. I looked up and noticed every window on that side of the "Vic" had at least two faces in it and all were laughing hilariously. I looked toward Ave des Pins and then towards Montreal General to see what may have happened that could have got their attention. I finally removed the frozen cover which now was the same shape as my car. It was hard as a rock. I jumped on it and it gave way but also fractured in pieces. It was destroyed. I knew then who they were all laughing at. I drove home once again saying this place is going to be a bit different.

My first day on clinical rounds I was invited by Dr. Albert Guerraty, Cardiac Transplant Surgeon to do an aortic reconstruction. Whoa ! I did not know the patient and honestly felt unprepared. I waved off and asked if I could kindly just assist this time. I had been a busy general surgeon for three years so life in the human retroperitoneum needed a reset. He was great about it and I assisted him, watching his every move. As the last knot was secured he unclamped the aorta with the biggest pulsatile squirting of blood exiting the anastomosis as I watched the wall clock 8 feet away almost disappear as the blood hit. My first reflex was to call general quarters and ask for STAT medevac. As I vasodilated and felt quite helpless I hear Albert quite calmly say... "Ooh-h-h... such a pity..!" He proceeds to quickly throw in a few sutures and all bleeding cessates.

It was an auspicious start to a long year. I still laugh about that day with Albert and can still hear his words.

It was a great year. I was 38 and became a grandfather in January, thus removing any chance that follow on Fellows could whine about being tired. Jim and Alan said they would remind them "the first Fellow was a grandfather and he didn't complain!"

I thoroughly enjoyed the large volume and array of cases, the Vascular team and the superb teaching of Jim Symes and Alan Graham. Also, Dr. Norman Poirier and the CV & T Fellows. The residents were excellent. I distinctly recall a tall thin Oren Steinmetz as a one of our PGY- 2's.

I also learned in January 1988 that pulling the hose from the garage and hosing down your car's front window at 0500 hrs in the snow was not advisable. It was weeks before the 50 pound mass of ice melted. A Southern California idea for sure. Made sense to me I had to live that one down also.

It was a great year at the "Royal Vic" and I still today feel Montreal is the finest city I have ever lived in with the best people. As I left in July 1988 the CV&T Dept gave me a new Porsche car cover, signed by the department. Thanks to all.

I returned to Naval duty and practiced vascular surgery until my retirement in 2013. I don't recall ever having such a spectacular a suture line leak as the one Albert and I had on my first day. I suspect if I did I would remember to say "Oh such a pity..!"

May You Rest IN Peace James F. Symes, M.D. Thanks for everything, old friend. ♦

Stephen Francis McCartney, MD, FACS
CAPT U.S. Navy Medical Corps (ret)
Cape Carter, North Carolina

30th Anniversary

Continued from page 1

► In the past few years the Quebec Health Minister has reorganized healthcare into networks. Now, St Mary's is grouped with the Lakeshore and Lasalle Hospitals under one administrative structure. This should bring the Lakeshore and Lasalle hospitals closer to the McGill department, providing us quality sites for training and giving us input into recruitment of surgeons.

Equally important are our responsibilities for scholarship, to advance the knowledge of our profession and to educate the generation that will succeed us. In each of these roles we have accomplished a great deal over the past 30 years.

Over that period of time surgery has evolved to become increasingly subspecialized. We, like most other academic institutions, have followed that trend. Many of our surgical divisions have specialty programs within them and many, if not most, of our faculty have focused their clinical practice in specific areas of expertise. This model is very useful for keeping up to date. As the amount of new knowledge increases exponentially, it allows us to provide the highest quality care to patients with complex surgical problems. Further, it provides individuals with the high level of expertise to optimally teach our students at all levels and focuses their attention on improving care through innovation and research. However, patients frequently have more than one problem; having a breadth of knowledge and expertise is also important to provide optimal care. Over the past 30 years we have developed an acute-care surgery program in general surgery, aligned with our trauma mission that allows specialists in these fields to have a broad expertise in patient care and in the operating room. This paradox reflects the challenge that we face in providing optimal care to our population. Two unifying areas of expertise across all our specialties are our programs in Prehabilitation (to prepare patients optimally for surgery through physical, nutritional and psychological interventions and optimization of their medical co-morbidity) and **Enhanced Recovery After Surgery (ERAS)** which creates and implements evidence-based care pathways to optimally manage patients after surgery. These programs are tied to our research in metrics of recovery, generation of validated patient-reported outcomes and healthcare economics.

Education has become one of the priority areas for the McGill department of surgery. Over the past 30 years we have established ourselves as a leading department for Surgical Education. We are proud of our dedication to training surgical educators who have assumed leadership in surgical education nationally and internationally. We recognize excellence in surgical teaching at all levels and have incorporated a number of teaching awards for excellence in teaching medical students and residents. The very best resident educators are encouraged to pursue a career as surgeon-educators. We have established a vice-chair position in

Surgical Education; this is supported through an endowed Chair funded by the Adair family. **Dr. Kevin Lachapelle** currently holds the **Adair Family Chair** in surgical education at McGill.

The **Harvey Sigman Visiting Professorship in Surgical Education**, The **Flanders Family Visiting Professorship in Simulation**, and the **Class of 1975 Visiting Professorship in Simulation** have allowed us to invite world experts in education to visit our department each year to inspire our faculty and trainees and to build collaborations with our surgeon-educators. Under the leadership of Dr. Lachapelle, we have introduced a concentration in surgical education within our experimental surgery graduate program. Our recruitment plan has been influenced by our desire to be a leading department in Surgical Education. As a result of the rapid growth of our graduate programs we were able to establish a tenure track faculty position for a PhD educator for our department. We have recruited a number of clinical faculty who have earned Master's degrees in education. McGill has built a world-class medical simulation centre, now known as the **Steinberg Centre for Simulation and Interactive Learning**. Throughout its entire history this simulation centre has been headed by a surgeon and was originally designed and led by Dr. Kevin Lachapelle.

The McGill department of surgery has had a very special role in developing surgeon scientists. This is a long tradition, but over the past 10 years we have expanded our program greatly; currently more than 160 graduate students are pursuing their master's or PhD degrees in our McGill program. This is one of the fastest growing graduate programs in the university and, despite its rapid growth, the mean GPA of those entering the program continues to rise, reflecting the quality of students in our program.

Early on in my mandate as department chair, we held a retreat to define our goals in surgical research and, out of this retreat, we initiated the strategic plan which has been implemented, almost in its entirety. In 2013 **Dr. Jake Barralet** was appointed vice chair for research and Alan G. Thompson Chair of Surgical Research. This was a big change in direction. For the first time we had a basic scientist whose background is in engineering to lead our research mission. **Dr. Anie Philip** took over as the program director for our experimental surgery program and, under their leadership, the program has truly blossomed. Our strategic plan identified certain areas that we wanted to focus on as we expand our research mission and we developed concentrations in these areas as part of our offerings. These include global surgery, surgical education, and surgical innovation. A fourth concentration in surgical outcomes has not yet come to fruition but remains in our plans. We have successfully piloted a distance learning offering for clinicians and other graduate students to complete most of their course requirements outside Montreal through online interactive approaches. We hope to expand this ►

► aspect of our program. Other initiatives introduced recently are non-thesis master's degrees and diploma programs.

Our global surgery master's program is an exciting offering. It prepares clinicians interested in working in the developing world through an academic framework. They are asked to develop a baseline assessment of the environment they will work, and then a plan that can be implemented that will provide enduring impact on the community by empowering and increasing the capacity of those permanently there. This intervention is followed by an impact assessment. This body of work forms their thesis.

The Surgical Innovation Concentration brings clinicians together with MBA students and a team of engineers (e.g. mechanical, electrical, materials scientists, computer sciences). They learn business skills, intellectual property law, patent searching, market analysis, regulatory and compliance regulations. They are placed in the clinical setting with a clinical tutor and are charged with identifying an unmet need and ultimately to develop a solution to that need. They are mentored by successful entrepreneurs and industry partners. At the end of the academic year they participate in an award competition and the top teams are funded and coached to commercialize their ideas. This program is enhanced by a recently completed Surgical Innovation platform built at the MGH site (which also functions as a resource for prototype creation and testing), by the new Experimental Operating Suite for first in man procedures at the Royal Victoria site, by the Simulation Centre and by access to 3D printing and machine shop facilities to build prototypes.

Our most important resource, as in all top departments, is our faculty. We are privileged to have outstanding clinical faculty dedicated to optimal patient care while also advancing our responsibility for scholarship. Over the past 30 years our faculty have remained remarkably stable with extraordinarily few leaving McGill for better opportunities. In the past decade we

have introduced a leadership development program to support faculty aspiring to leadership and allowing them to develop the skills to do so successfully.

Our alumni continue to proudly wear their McGill heritage proudly and to be extremely successful wherever they now call home. During my term as Chair I have had the privilege to travel and visit many of our graduates and to observe their success and influence firsthand. I hope the Square Knot succeeds in its goal and gives them the information they want about our current activities and news of the faculty and alumni. I encourage each of you to contribute to the SK by sending in an article or a letter to let us know what you are doing and how your experience at McGill served you in your career.

I am very very proud to have had the privilege of leading the Department of Surgery over the past decade and I know that the future of our department is very bright. The department is blessed to have excellent administrative support headed by **Sonia Nardini** on the McGill side and I am extraordinarily thankful to **Maria Cortese** who administers affairs for me at the hospital as well all my personal clinical, societal and professional responsibilities.

In closing I want to express my deepest appreciation to **Dr. Harvey Sigman** for his stewardship as Editor of the Square Knot for the last 6 years and to those who did so before him. I also want to thank **Ekaterina Lebedeva** who has put together each edition and managed the transition from print to electronic format, to **Ildiko Horvath** from Medical Multimedia Services for designing and formatting our work to be published and to **Michael Leitman** who reviews and copy edits each article. ♦

Gerald M. Fried, MDCM, FRCS(C), FACS, FCAHS
Edward W. Archibald Professor and Chair
McGill Department of Surgery

Support the McGill Department of Surgery !



The McGill Department of Surgery is recognized nationally and inter-nationally for its excellence in surgical education, research and innovation, and high quality patient care. Graduates of our surgical training programs have become our ambassadors around the world; many have risen to prominent leadership positions in their institutions.

The future of The McGill Department of Surgery as a truly great department depends more than ever on gifts from private sources. Such donations can be made ONLINE by credit card via The Montreal General Hospital Foundation at :

<https://www.mghfoundation.com/donate/make-donationonline-form/>



Enter your donation amount and check the box "Other", and type in McGill Department of Surgery Alumni Fund. Fill in the "Donor information" as appropriate. Charitable receipts for Canadian tax purposes will be issued by the MGH Foundation. ♦

Gerald M. Fried, MD
Chairman, McGill Department of Surgery

30 YEAR ANNIVERSARY 1989 – 2019



Editor's Note

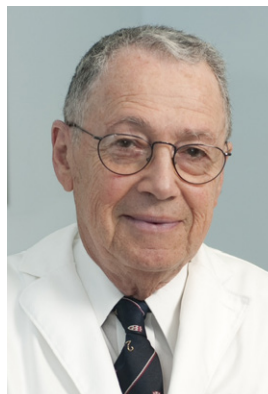
By Harvey Sigman,
CD, MSc, MDCM, FRCS, FACS

I am proud to present this 30th anniversary issue of *The Square Knot*. I have been asked how the name Square Knot arose. **Dr. Jonathan Meakins**, started *The Square Knot* 30 years ago when he became Chair of the Department of Surgery. He introduced several new measures, some symbolic and others more substantive, to indicate a unified department of surgery. One was his design of a new tie and scarf, pictured at the back of this issue with McGill and surgical symbols. One of these was the square knot that every surgical student and resident learned to tie with alacrity and accuracy. It does not slip and is simple to undo. It is also known as a reef knot and according to Wikipedia is at least 4000 years old and was first used by sailors to reef sails. Hence, our name *The Square Knot*.

We have moved from its humble beginnings to this professionally produced edition. This could not have happened without team work and I am grateful for the expertise of **Ekaterina (Katia) Lebedeva** and **Ildiko Horvath**, who have brought the latest technology in a seamless way to our readers of today. I wish to express, as well, my gratitude to **Michael Leitman**, who on a voluntary basis has proofread all the text for the past six years. It is his dedicated efforts that have contributed greatly to the professional appearance of the publication.

When **Dr. Gerald Fried** asked me to take on the *Editorship of The Square Knot*, he did not know that he had struck a chord that had been my first love. As an undergraduate, I had worked on the McGill Daily, edited the McGill Handbook and as a senior, had edited the 1953 McGill Yearbook. I had toyed with the thought of a career in Journalism and not Medicine. I am grateful to have had the opportunity to participate in this venture with a wonderful team.

Katia spontaneously, has archived all the publications since the first one 30 years ago. They are readily [accessible online](#). I recommend referring to these old *Square Knots* because they provide us with a history over the past 30 years, of our successes and challenges, as well as the profiles of the wonderful talent



Dr. Harvey Sigman

we have been able to attract, that have resulted in the great department we have today.

Antedating the [initial issue of *The Square Knot*](#), I had an earlier 30th anniversary in that I was an R1 in the McGill surgical residency program in 1958-59. I can recall my first day on the General Surgery service at the MGH. The senior resident informed me that I was the one who would put hip fractures into traction and that I had to learn to do this quickly

because he did not wish to be awakened at night. I was introduced to the orderly who brought a box full of rope, pulleys and weights. I was taught how to drill a wire through the tibial tubercle and then spent the next 2 hours learning how to put the ropes and pulleys together. In those days, almost all fractures were handled by General Surgery at the MGH. The orthopedic surgeons only did "cold" reconstructive surgery. The orthopedic team was allowed to admit fractures one day a week in order to silence their complaints.

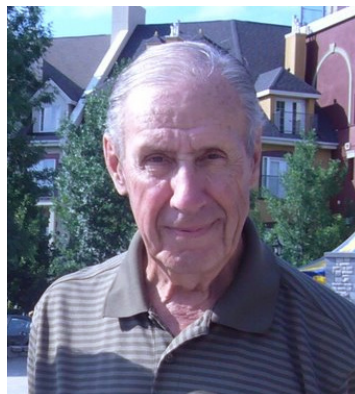
I now began to realize how the MGH trauma service had its origins. One day I asked the ambulance driver why, the patient lying on a stretcher with a broken hip, who had fallen at the entrance of the old RVH, was brought to the MGH Emergency Department. He replied "I never bring patients to the Vic. The parking area is too small, and it takes too long to turn an ambulance around. I only bring patients here." An anecdote but true.

I am delighted to share this column with my dear friend and colleague, **Ed Monaghan**. He and I were co-residents through the residency program and therefore always worked in different hospitals and never at the same time. We each spent our fourth year in London, he at the London Hospital, and, I at the Royal Postgraduate Medical School, Hammersmith (now part of the Imperial Medical College) before returning to Montreal, as Chief Residents. We remained close over all the years. He was a great educator, at McGill and nationally. He is an important part of the history of *The Square Knot*. ♦



Note From a Past Editor

The *Square Knot* was a big part of my life especially when I was Editor for a number of years. Such good memories and I was always happy and proud to work on it with such great faculty and staff. I have not missed reading an issue since my retirement and I treasure keeping them in my archive to browse. For 30 years *The Square Knot* was an important factor in the Department of Surgery's Team Spirit.



Dr. E.D. Monaghan

Congratulations to you and Harvey with whom I was very close during our training here and in London. These good memories become very dear as I approach my 90th year in September. ♦

Yours sincerely and gratefully,
Ed Monaghan
*Emeritus Professor, McGill Surgery
Mont Tremblant*

'Tis the human touch in this world that counts,
The touch of your hand and mine,
Which means far more to the fainting heart
Than shelter and bread and wine.
For shelter is gone when the night is o'er



And bread last only a day,
But the touch of the hand
and the sound of the voice
Sing on in the soul alway.

—*Spencer Michael Free, MD
(1856–1938)*
The Human Touch

30 YEAR
ANNIVERSARY
1989–2019

30 YEAR ANNIVERSARY 1989 – 2019

Designing The Square Knot

The *Square Knot* newsletter has been a familiar fixture of the McGill University Surgery community for 30 years. Stories, including divisional narratives, news and events, announcements and appointments, and some sad departures, have all contributed to the newsletter's popularity. For the last 25 of those 30 years, Ildiko Horvath (B.A., Medical Illustrator/Graphic Designer) of the McGill University Health Centre's Medical Multimedia Services, has been the one to give the newsletter the look-and-feel that we have grown to enjoy. In honour of *The Square Knot*'s 30th anniversary, we sat down with Ildiko and asked her to share some of her recollections and favourite moments over the years. Here's what she shared with us..

The Square Knot (SK): When did you start collaborating on *The Square Knot*?

Ildiko Horvath (IH): My first issue was published in the Summer of 1994. Dr. David S. Mulder and John Kinghorn, his young assistant at the time, approached my colleague Ann Hubert and me in the then Audio-Visual Department, offering us the opportunity to work on *The Square Knot* newsletter. He wanted a fresh new look for the newsletter and hoped to continue its production, with quarterly issues, from his base at The Montreal General Hospital (MGH). We of course jumped at the chance. The newsletter had already enjoyed popularity for five years and was produced at the Royal Victoria Hospital under Dr. Jonathan L. Meakins who wrote most of the material himself. Dr. Edward D. Monaghan was the editor, and John Kinghorn would become assistant editor. Ann and I were stepping into a well-established publication, a popular and well-oiled machine, so to speak. It was a bit intimidating. We did feel however that a strong, totally new design—a modern, adaptable and professional looking design would appeal to the readers. The content material was interesting, informative and sometimes personal in nature. It could lend itself to a less formal design. We strongly felt that a new look and feel for the newsletter would elevate the newsworthy and



Ildiko Horvath

informative material in it. Surgery is a tactile discipline so the paper choice was important for us too. We took all this into consideration as we delved into the design process. That is how our first issue was born. Ann and I worked closely together on all issues for the next year or so. She went on to other projects and I continued laying out the newsletter for the next 24 years—it became my baby.

SK: How different was it to prepare the SK newsletter 20 or 10 years ago compared to how it is produced today?

IH: Actually, not much different in terms of design and layout from the first issue to this latest one. I have been preparing *The Square Knot* by computer since our first issue in 1994. This design works so well and was so adaptable at the outset that any addition or new section was and continues to be easy to work out; and as each Editor brings with them their own style in terms of content focus there is always a reorganization of sections to establish. The one major difference from then and now is that *The Square Knot* went virtual in 2013. The newsletter is now an on-line issue only—no paper. As hard as it was for some to adapt to a digital reading experience, I do think that in this day and age paper-less is still the way to go.

SK: Is there anything you miss from the earlier days of working on the SK by contrast to modern days?

IH: I miss the people I have worked with along the way. I would have to say that I am the only constant in the life of *The Square Knot* in the 25 years since it has been produced at the MGH. I have worked with several highly organized and dedicated contributors/assistants/editors. Every team has their own working style but all were highly efficient and very sensitive to the material. I have learned a lot from each of them.

SK: Do you remember past editors, assistants?

IH: I remember everyone! Dr. Mulder and I have worked on several projects over the years and I must say, he has always given me such latitude and trust with every design idea I have proposed. It was a pleasure to take on *The Square Knot* for him and I was honoured that he trusted us (me) to take on the task. John Kinghorn, who first brought *The Square Knot* to us with Dr. Mulder was also very pleasant to work with. He left soon after the first issue. Dr. Monaghan was the first Editor I worked with when we came ►

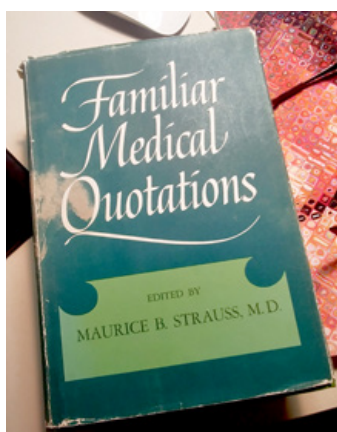
► on board and I collaborated with him for the next eleven years. Marie Cimon was his Copy Editor. Dr. Monaghan injected a collegial style to his material and included historical group photos of his peers and predecessors. The *Were You There* group photo feature was a favourite with readers. He also included many New Yorker cartoons which were so timely and *a propos* to the content—they gave a welcome comical pause between articles. Working with Dr. Monaghan was a bit of a rocky road at first but I eventually gained his trust. It was an honour to work with him.

Emma Lisi came on board as Dr. Monaghan's Copy Editor on the first MGH issue of *The Square Knot*. She became Assistant Editor from the following issue on. My collaboration with her was the longest—from 1994 to 2013. We had such a good groove Emma and I. We could read each other very well and anticipated each other's needs. I knew how to solve a placement problem she was facing and she always knew how to prepare material for me. We had so many wonderful conversations and her insight was invaluable. No one could proof-read like Emma.

Dr. Ray C-J Chiu took over the editing from Dr. Monaghan with the Winter 2006 issue. This was the first Editor change for me and we would collaborate for the next seven years. It was a smooth change-over and Dr. Chiu was very interested in the design process. He would come down to my office from time to time to discuss his vision for *The Square Knot*. We would chat about many things related to the material he was providing especially when he would include articles about the

history of surgical techniques from around the world. This was really interesting to me. He was keen on ponderables and philosophical quotes and questions—always related to medicine and surgery in particular. If ever I needed a filler for empty spaces between articles he would invite me to pick quotes from the *Familiar Medical Quotations** tome he would lug down with him to my office. I requested this book often. This is how the

interspersed quotes began in each issue. They started as fillers but I liked them so much that it became a challenge for me to actually create spots in the layout for them.



In the summer of 2007 Emma passed on the torch of Assistant Editor to Minh Duong. Minh was a lab technician from Surgical Research and a long-trusted worker with Dr. Chiu and the Surgical Research team. Minh was demure but whip smart and she brought a certain sensitivity to her work. She was a pleasure to work with and we collaborated very well.

In the Fall 2013 issue, *The Square Knot* went virtual and interactive. This exciting and innovative direction for the newsletter was ushered in by our new Editor Dr. Harvey H. Sigman, from the Jewish General Hospital—another esteemed surgeon with whom I had the honour to work. His wonderful Assistant Editor, Katia (Ekaterina) Lebedeva, was already an Academic Associate, Coordinator and Research Assistant for the Department of Surgery and knew the material very well. The adjustment period was short and our working relationship became very strong. This was a whole new team for me and a technological upgrade for *The Square Knot*. Not only was the newsletter going paperless, but we could now include color photos and direct hyperlinks to websites from within the articles. Not a new technology by any means but new for *The Square Knot* as this brought great cost savings for the Division. No need for printing or mailing the newsletters anymore. Each issue would now be available on *The Square Knot* website and back issues would be readily available to anyone. Dr. Sigman's openness to technology is a wonderful (and necessary) evolution for *The Square Knot*—he is forward thinking but very much a humanist as the material that he collects for each issue highlights the significant contributions to surgery while also promoting the humanitarian initiatives of surgeons and their global work. We have collaborated on six years worth of issues so far and I am looking forward to many more!

SK: What is it that you most like about working on every SK issue?

IH: I enjoy the collaborations and of course I find the content very interesting... I have learned so much! I don't come from a scientific background but as I prepare each issue, I gain immensely from what I am reading.

SK: Do you have a favorite chapter (section) in the SK? if yes, what makes it interesting for you?

IH: I would have to say that I don't really have a favourite section. It's wonderful to see how the theme develops throughout each issue as it is laid out. Assembling the many disparate stories and announcements into sections and those into a whole issue is challenging but is what I find most interesting. ►

►
SK: Do you remember any stories from any of the SK issues that somehow affected your opinion, prompted you to learn (read) more about its personages or events?

IH: Among the many articles and features I have had the pleasure of laying out in *The Square Knot* over the years, I am most taken by the articles on surgical education and crisis work in developing countries. Principally the stories of surgeons such as Dr. Antoine Loutfi and his wife Dr. Joyce Pickering and their work in Ethiopia (Fall 1989, Fall 2014), Dr. Lucie Lessard's cleft lip surgeries by flashlight in the Philippines (Winter 1990), and Drs. Hinchey and Hreno's important work in the far North in Iqaluit (Fall 2000). One of my favorites is the article on the *World Society for Pediatric and Congenital Heart Surgery* (Spring 2008), the brain child of Dr. Christo I. Tchervenkov. The Society's mission is to bring medical and surgical care to children from around the world born with congenital heart disease, no matter their economic means. I have had the pleasure of working with Dr. Tchervenkov on many projects related to this Society. More recently I enjoyed reading about the Orthopedic Humanitarian Mission in Haiti (Winter 2018) lead by a multidisciplinary team of healthcare professionals and featuring the experience from a resident's perspective as they are confronted with the harsh realities of the Haitian crisis. The important work of Drs. Sherif Emil and Yasmine Yousef's Pediatric Surgery Mission to Africa (Winter 2018) is another good read. The entire Fall 2014 issue focuses on global partnerships in medicine and surgery. *Building Bridges in Global Surgery* in particular, another favorite article of mine (Fall 2014) highlights the brain child and collaboration of Drs. Franco Carli, Sender Liberman, Jean-Martin Laberge. Drs. Tarek Razek and Dan Deckelbaum's Global Surgical Initiatives in Africa includes the creation of the not for profit Centre for Global Surgery at the McGill University Health Centre. There are so many more interesting articles but too numerous to mention here.

SK: Do you remember any anecdotes relating to the SK that you could share with our readers?

IH: Hmmm.. I don't personally know the majority of the people mentioned in *The Square Knot*. It is amazing however, how much I do know about what's going on in many surgeons' lives at McGill. I've followed them throughout the years and quietly applauded their achievements and life milestones. It often happens that I walk past certain people in the hallways of the MGH and am about to congratulate them on the birth of their child, their wedding or their appointment to a new post, or want to chat about their professional experiences abroad. I have to catch myself...they don't know me!! That's my shy side.

Working on *The Square Knot* has given me the opportunity to be part of a community that I would never have been exposed to unless I had this career, at this place. Many of the surgeons featured in the issues have become familiar to me even though they do not know I exist. They exist for me however...and I am terribly proud to be in silent company of this prestigious community of dedicated medical professionals.

SK: You created the paper design of the newsletter and never stop to improve it all these years. Its logo and style became recognizable and identifiable. And recently you helped us to create its online signature for a new web site of the SK. We appreciate your work very much! How busy you are now with all this work? What helps to drive your creativity and motivation when working with the SK issues?

IH: I make time for *The Square Knot*. No matter how loaded my schedule is with projects, *The Square Knot* newsletter always takes precedence for me...I clear my schedule and dive in! The McGill medical/surgical community is so dynamic, involved, humanistic, progressive and well respected. The articles reflect this, issue after issue. I am proud and honoured to have worked on the newsletter for so many years and am thankful to have had the privilege of working with amazing collaborators. On to the next issue! ♦

* Strauss, M. B. (Ed.). (1968). *Familiar Medical Quotations*. Boston, Massachusetts: Little, Brown and Company, Inc.

Ildiko Horvath, BA
Medical Illustrator/Graphic Designer
Medical Multimedia Services
The Montreal General Hospital
McGill University Health Centre

30th

Fraser Gurd Day

June 13, 2019

By Dr. Gerald M. Fried



O

ur 30th Annual Fraser N. Gurd Day was held on June 13th 2019 and remains a highlight of the department of surgery's academic year. It is our opportunity to showcase our best research across specialties and to honor our graduating residents, fellows, and graduate students. We also take this day to reward outstanding scientists and teachers.



Dr. Gerald M. Fried

This year our Fraser Gurd visiting professor was **Dr. Barbara Bass**, Chief of Surgery at Houston Methodist Hospital and the immediate past president of the American College of surgeons. Dr. Bass was truly an outstanding visiting professor. In her Grand Rounds talk *The Immersive Life of Surgery: Sustaining yourself, supporting your colleagues and building our profession together* she emphasized the importance of

well-being among members of the department of surgery, integrating our professional lives with our personal lives to the betterment of both. Dr. Bass is not only an outstanding academic surgeon but a wonderful role model. She was extremely accessible to our students and residents and discussed many of their scientific presentations, providing valuable feedback. We had a session in the afternoon on "Surgical Wellness" and heard the perspectives of **Drs. Liane Feldman** and **Dr. Ruth Chaytor**, two of our surgical leaders who reflected on their own success and challenges.

The scientific program was organized by our vice-chair of research, **Dr. Jake Barralet**. Like the previous year, the day was divided into 4 sections. The first section was on ►



McGILL UNIVERSITY
DEPARTMENT OF SURGERY

30th ANNUAL FRASER N. GURD VISITING PROFESSOR



BARBARA LEE BASS, MD, FACS
JUNE 13, 2019

www.medicine.mcgill.ca/surgery



Dr. Barbara Lee Bass

► Surgical Education, led off by a talk on *Competency Based Education for Surgeons* by **Dr. Melina Vassiliou**, Associate Professor of Surgery and Director of the Surgical Foundations Program. The next section on Surgical Outcomes was introduced with a presentation by **Dr. Julio Fiore**, Assistant Professor and outcomes scientist on *Opioid-Free Analgesia After Surgery*. **Dr. Ed Harvey**, Professor of Surgery and Director of the Injury, Recovery and Repair program of the Research Institute of the MUHC gave the opening talk for the section of Interventions, devices and novel therapies. Finally, **Dr. Jonathan Spicer**, Assistant Professor in the Division of Thoracic Surgery presented his work on *Surgery for Locally Advanced Lung Cancer: a Platform for Discovery at the Section on Fundamental Research*. Each topic area included a series of original scientific presentations in both the traditional long format as well as brief reports. The

quality of the presentations and the poise of the people who presented their work were truly admirable.

Research Award winners were **Dino Zammit** (Education), **Roshini Alam**, (Outcomes), **Aslan Baradaran** (interventions) and **Surashri Shinde-Jadhav** (Basic Sciences). A list of all our clinical graduates and the residents and the teaching awards winners are listed.

Finally, Dr. Liane Feldman presented on behalf of the Department of Surgery faculty (to my complete surprise) a gift in appreciation for my 10 years as Chair of Surgery. This was a trip to Paris and tickets for the French Open Tennis Championship for May 2020. What an incredible and generous surprise! I will send pictures for the Square Knot next year. ♦

NEW RECRUITS		
BOUGIE, Alexandre	General Surgery	PT Faculty Lecturer (Clinical)
PÉRODIN, Farah	General Surgery	PT Faculty Lecturer (Clinical)
HAYDON, Christopher Michael	Orthopaedic Surgery	PT Faculty Lecturer (Clinical)
THIBAudeau, Pascale	Orthopaedic Surgery	PT Faculty Lecturer (Clinical)
KNIGHT, Richard Stuart	Orthopaedic Surgery	PT Faculty Lecturer (Clinical)
SEPEHRARAE, Arash	Orthopaedic Surgery	PT Faculty Lecturer (Clinical)
ORTAASLAN, Sevan Gregory	Orthopaedic Surgery	PT Faculty Lecturer (Clinical)
LIBMAN, Jamie	Urology	PT Faculty Lecturer (Clinical)
LORIOT, Marie-Hélène	Surgery	PT Faculty Lecturer (Clinical)
COOLS-LARTIGUE, Jonathan	Thoracic Surgery	Assistant Professor (Clinical)
HART, Adam	Surgery	Assistant Professor (Clinical)
AUBÉ-PETERKIN, Mélanie	Urology	Assistant Professor (Clinical)
PAUYO, Thierry (Joint)	Pediatric Surgery/ Orthopaedic	Assistant Professor (Clinical)
KOZLICK, Stuart Brahm	Surgery	Professor of Practice
MCKENDY, Kate	General Surgery	Assistant Professor (Clinical)
UPCOMING RECRUITS		
HARLEY, Jason	Surgery	Assistant Professor Tenure Track
WONG, Evan	General Surgery	Assistant Professor (Clinical)
WONG, Stephanie	General Surgery	Assistant Professor (Clinical)
XU, Liqin	Plastic Surgery	Assistant Professor (Clinical)
PROMOTIONS		
LACHAPELLE, Kevin	Professor	
BASIK, Mark	Professor	
DRAGOMIR, Alice	Associate Professor	
MITMAKER, Eliot	Associate Professor	
LEE, James	Assistant Professor	

KUDOS**GENERAL SURGERY**

Dr. Paola Fata	President CAGS
Dr. Larry Lee	FRQS Junior 1
Dr. Sender Liberman	Faculty Honor roll for educational excellence
Dr. Gerald Fried	Chair, Board of Regents of the American College of Surgeons and Recipient of Meritorious Service Cross by Governor General of Canada

PLASTIC SURGERY

Dr. Lucie Lessard	Stepping down after 10 years of commitment as Division Chief
Dr. Mirko Gilardino	New Director of Plastic Surgery and Stephanie Thibodeau has taken over the reins as PD
Dr. Anie Philip	CIHR multi-year research grant
Dr. Jake Barralet	CIHR multi-year grant (together with Drs. Harvey, Makhoul, Gilardino)

ORTHOPEDICS

Dr. Robert Turcotte	Osseointegration Program for LE Amputees
Dr. Ruth Chaytor	Names Chief of Surgery at JGH
Dr. Monica Volesky	Chair of CPD AOQ and President of the COFAS
Dr. John Antoniou	President COA
Dr. Jean Ouellet	Named to Faculty Honour List for educational excellence
Retirement	Dr. Fisher/Dr. Marien

UROLOGY

Dr. Sero Andonian	Chair of the Young Urologist Committee for the American Urology Asso.
Dr. Armen Aprikian	Elected Vice President of the Canadian Urology Association
Dr. Maurice Anidjar	New Chief Division of Urology JGH
Dr. Lysanne Campeau	Obtained FRSQ clinician Junior 2 and selected as the 2019 Young Urologist of the year from the American Urological Association

THORACIC SURGERY

Dr. Jonathan Spicer	ASA Foundation Scholarship
----------------------------	----------------------------

DEPARTMENT AWARDS

THE L.D. MACLEAN DISTINGUISHED ACHIEVEMENT AWARD
Dr. Eric Lenczner

KENT MACKENZIE AWARD FOR EDUCATIONAL LEADERSHIP AND EXCELLENCE IN SURGERY
Dr. Qasim Alabri

HARVEY H. SIGMAN UNDERGRADUTE TEACHING EXCELLENCE AWARD
Dr. Dan Poenaru

ROSS ADAIR MEMORIAL AWARD FOR TEACHING EXCELLENCE BY A RESIDENT
Dr. Theodora Dumitra

POST-GRADUATE TEACHING EXCELLENCE AWARD
Dr. Melina Vassiliou

"THE EDDY": EDMOND D. MONAGHAN PRINCIPLES OF SURGERY AWARD
Dr. Olivier Vaillancourt

KATHRYN ROLPH AWARD FOR RECOGNITION OF A WOMAN WHO MADE IMPORTANT CONTRIBUTIONS TO THE DEPARTMENT OF SURGERY
Dr. Marylise Boutros

GEORGE GURUNIAN MEMORIAL PRIZE
Dr. Yifan Wang





To view more photos: <https://tinyurl.com/y5o64jdz>



To view more photos: <https://tinyurl.com/y5o64jdz>

Division of General Surgery

In June 2019, **Dr. Jonathan Cools-Lartigue** and **Dr. Carmen Mueller** completed a two-week traveling fellowship in gastroesophageal surgery. They chose to visit the Department

Visiting the Academic Medical Centre (AMC) in Amsterdam, the Netherlands

of Upper Gastrointestinal Surgery at the Academic Medical Center (AMC) in Amsterdam, The Netherlands, one of the highest volume gastroesophageal surgical units in Europe. This site visit aimed to expand local techniques in minimally-invasive gastric and esophageal cancer resections, inform the organizational structure of the MGH Upper GI Surgery program and enhance research collaborations between the two sites.

Drs. Cools-Lartigue and Mueller were graciously hosted by internationally-recognized gastroesophageal surgeons **Drs. Mark van Berge Henegouwen** and **Suzanne Gisbertz**, and their extensive team of colleagues, students and allied health staff. The visitors were welcomed to morning sign over rounds,

weekly Upper GI tumour board conferences, ward rounds, research meetings and, of course, the operating room. AMC staff and faculty went out of their way to show and explain the functioning of their unit, the core projects of their highly productive research program, their decision-making around challenging cancer cases and their surgical approach.

Several direct outcomes of this visit have already begun to influence local practice. These include the implementation of en bloc esophagectomy in the prone position, a novel approach anticipated to enhance mediastinal lymph node retrieval for esophageal cancer resections. Two cases have been performed already thanks to great support from the MGH Anesthesia Department and OR nursing staff, and more cases are planned in the future. Other advanced approaches to radical abdominal lymphadenectomy and foregut reconstruction after gastroesophagectomy have also been adopted. In addition, a daily "morning report" involving trainees and staff on the Thoracic and Upper GI Surgery team has been implemented, with an aim to enhance the educational experience of trainees on the service. Finally, steps have been taken to move forward with several exciting research collaborations involving the AMC group, specifically in the realm of outcomes after esophagogastrectomy for cancer.

Drs. Cools-Lartigue and Mueller wish to sincerely thank the Mary Stikeman and MGH Foundation for their generous support of this unique learning opportunity. ♦



Drs. Carmen Mueller and Jonathan Cools-Lartigue at the Academic Medical Center (AMC) in Amsterdam, The Netherlands.



Dr. Mark van Berge Henegouwen (left; Director, Upper GI Surgery) and Dr. Weitse Eshuis (right; Staff Surgeon) performing a laparoscopic subtotal gastrectomy at AMC



Dr. Suzanne Gisbertz (centre; Staff Surgeon) and Wytze Laneris (right; Upper GI Surgery Fellow) performing a laparoscopic esophagectomy in the prone position at AMC.



Drs. Cools-Lartigue and Mueller performing the first laparoscopic prone esophagectomy at the Montreal General Hospital.

LD MacLean Visiting Professor

The McGill Division of General Surgery celebrated the **17th Annual LD MacLean Visiting Professorship** on May 15-16, 2019. We were pleased to welcome **Dr. John R.T. Monson**, Executive Director of Colorectal Surgery at AdventHealth, Professor of Surgery at the University of Central Florida, College of Medicine as this year's visitor. Dr. Monson's clinical expertise is on the use of minimally invasive technologies in colorectal cancer treatment. His research encompasses a broad range of cancer-related areas, including the development of national standards in cancer care and qualitative assessments of decision-making in cancer care.

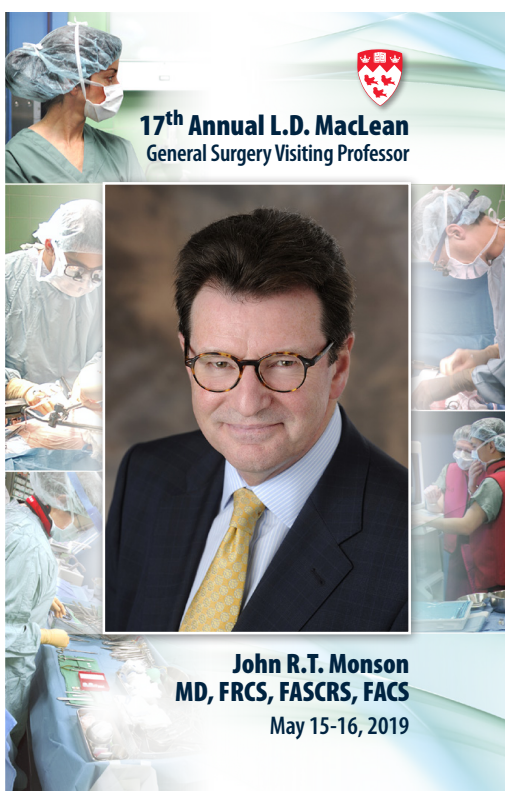
After a morning spent with some of our research residents and graduate students, Dr. Monson, spoke to us about his insights in getting work published from his perspective as co-editor of the journal *Diseases of Colon and Rectum*. The afternoon's event included 15 research presentations from medical students and graduate students, across a wide range of topics and research techniques. There were also two clinical debates about the use of antibiotics for uncomplicated diverticulitis (featuring **Drs. Safiya Al-Masrouri vs Faisal Al-Rashid**), and the role of mesh prophylaxis to prevent incisional hernia (featuring **Drs. Juan Mata vs Abdulaziz Alnumay**).

Our annual banquet honouring our 5 graduating chief residents was held later at the Hotel Sofitel Golden Mile. It was well attended by 90 faculty and residents from the McGill teaching hospitals. **Dr. Feldman** welcomed everybody and moderated the evening's festivities. She summarized some of the major milestones in the division over the year, congratulating **Dr. Mitmaker** on his promotion to associate professor and **Dr. Liberman** for being named to the faculty honour roll for educational excellence. She congratulated division members who received FRQS career and training awards, including **Dr. Lawrence Lee** (junior 1) and residents **Drs. Dumitra, Wang** and **Eustache**. She also

congratulated residents who completed Master's degrees in the past year including **Drs. Garfinkle, Dumitra** and **Mata**.

Dr. Feldman then spoke of the chiefs, emphasizing the enormous accomplishment of completing General Surgery residency, which requires enormous grit, stamina and commitment. She acknowledged all the people who were part of that accomplishment including family, spouses, friends, teachers and mentors. She also hoped that the chiefs will always consider McGill home and the members of the division as family.

The evening then continued with the research presentations winner by presented **Dr. Paraskevas**, director of research for the division:



BEST LONG PRESENTATION:

ROSHNI ALAM (supervisors **Drs. J. Fiore** and **L. Feldman**), *A Conceptual framework of recovery after abdominal surgery*

BEST QUICK SHOT PRESENTATION:

ARAZ KOUYOUMDJIAN (supervisors **Drs C. Mueller** and **L. Lee**), *The effect of preoperative anemia and perioperative transfusion on surgical outcomes after gastrectomy for gastric cancer – An ACS-NSQIP analysis*

PEOPLE'S CHOICE AWARD:

RICHARD GARFINKLE (Supervisor **Dr. Marylise Boutros**), *Compliance with preoperative elements of the American Society of Colon and Rectal Surgeons – Rectal Cancer surgery checklist improves pathologic and postoperative outcomes.*

Dr. Phil Vourtzoumis, President of the McGill General Surgery Residency Committee, presented the following teaching awards, as voted by the residents:

OUTSTANDING GENERAL SURGERY TEACHER AWARD:

DR. JEFFREY BARKUN

ROGER TABAH RESIDENT TEACHER AWARD:

DR. MOHSEN ALHASHEMI

CAGS RESIDENT TEACHER AWARD:

DR. ABDULAZIZ ALNUMAY

► OUTSTANDING FELLOW TEACHER AWARD:
DR. MOHAMMED AL-ABRI

MARVIN WEXLER CLINICAL EXCELLENCE AWARD (FACULTY):
Dr. Sebastian Demyttenaere

MARVIN WEXLER CLINICAL EXCELLENCE AWARD (RESIDENT):
DR. HUSSAM ALAMRI

Dr. Simon Bergman, Director of Undergraduate Education, presented the David Owen Undergraduate Teacher Award to Dr. Steven Paraskevas and the Outstanding Resident Undergraduate Teacher Award to Dr. Phil Vourtzoumis.

Dr. Steve Paraskevas presented this year's Julius Gordon Award to Dr. Richard Garfinkle.

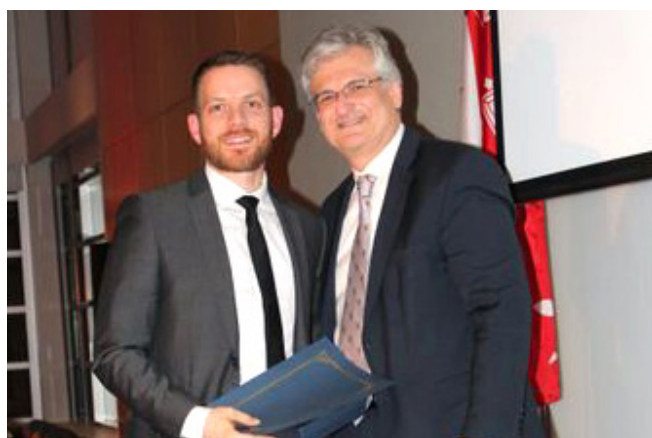
Dr. Sarkis Meterissian presented the Resident Leadership Award to Dr. Phil Vourtzoumis.

Dr. Meterissian then introduced the 5 graduating chief residents, **Drs. Yaseen Al Lawati, Hussam Alamri, Phil Paci, Mohsen Alhashemi** and **Phil Vourtzoumis**. He emphasized each of their backgrounds, personalities, interests, families and career plans as they pursue fellowships in thoracic, bariatric, transplant and minimally invasive surgery. The residents then presented a hilarious video about the chiefs.

The following morning **Dr. Monson** spoke at Departmental Grand Rounds on *Rectal Cancer in the 21st century – Accreditation is here*.

The division thanks **Domenica Cunzo** for her work organizing the event, to **Rita Piccioni** and **Jessica McCaffrey** for help and photography, and to the sponsors, including The Division of General Surgery Academic Fund as a gold sponsor, ConMed and Pfizer as silver sponsors, and Merck, Karl Storz, Abbott and Medtronic as bronze sponsors. ♦





Division of General Surgery



Welcome New Staff

The Division of General Surgery is thrilled to welcome **Dr. Katherine McKendy**, who is joining the Trauma and Acute Care Surgery group at the MUHC. Dr. McKendy completed medical school and General Surgery residency at McGill. During her residency, she completed a Masters degree in Educational Psychology under the supervision of **Dr. Melina Vassiliou**. She then completed fellowships in Trauma and Acute Care Surgery at the University



Dr. Katherine McKendy

of Toronto, under the supervision of **Dr. Najma Ahmed** and **Dr. Avery Nathens**, followed by a fellowship in Critical Care Medicine at McGill. Dr. McKendy will be based both at Lachine and at the MGH, where she will pursue her academic interests in surgical education, building on her work on developing meaningful tools for formative feedback to improve learning and patient care. ♦

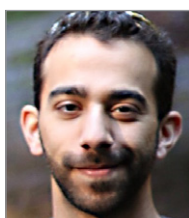
Division of General Surgery



Welcome General Surgery Chief Residents, 2019-2020



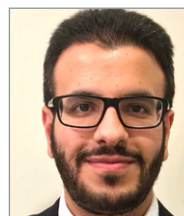
DR. AZIZ ALNUMAY completed his medical degree from King Saud University in Riyadh, Saudi Arabia. He is currently employed there as a teaching assistant. In 2015 he joined the McGill General Surgery Program. After completing his residency, he will pursue further training in Trauma and acute care surgery and minimally invasive surgery as well as a Masters of Business Administration.



DR. FAISAL AL RASHID obtained his medical degree from the University of Dammam, Saudi Arabia. After completing his Masters degree at the University of San Diego, California, he joined the McGill University general surgery program and is now pursuing a career in colorectal surgery.



DR. JUAN MATA was born in Mexico City and graduated from Universidad Autonoma del Estado de Morelos medical school in 2010. He moved to Montreal in 2011 and worked as volunteer at the old Royal Victoria Hospital on the Transplant unit. He was then hired as a research assistant in the Minimally Invasive Surgery research lab. He started his residency at McGill in 2014. He completed a Master of Science degree in Experimental Surgery evaluating outcomes of Enhanced Recovery Pathway implementation under the supervision of Dr. Liane Feldman and Dr. Julio Fiore. He served as president of the McGill General Surgery Residents Committee for 2 years, and as the CAGS resident representative for 2 years. He plans to pursue Bariatrics/MIS fellowship following completion of his General Surgery residency.



DR. NAWAF ALSHAHWAN received his medical degree from King Saud University in Riyadh, Saudi Arabia. Shortly after that he joined the McGill division of General Surgery as a resident in the summer of 2014. During residency, he was blessed to marry his lovely wife Njood. Nawaf completed a masters of science in experimental surgery under the supervision of Dr. Shannon Fraser looking into the costs of surgical complications. He will be pursuing a combined trauma and critical care medicine fellowship after his residency training and will join the King Saud University hospital's trauma and acute care surgery unit afterwards.



DR. SAFIYA AL-MASROURI obtained her MD degree from Sultan Qaboos University - Oman. She then moved to Vancouver - BC where she obtained a Masters of Science (Surgery) at the University of British Columbia. She joined McGill General surgery residency program in 2015 during which she worked closely with Dr. Boutros on several research projects focusing on management and outcomes of acute diverticulitis. After completing her general surgery training, Safiya will pursue a fellowship in Bariatrics/MIS at McGill University. ♦

How Elif Bilgic's Research is Contributing to Laparoscopic Surgery Training

She didn't know it at the time, but when **Elif Bilgic** answered a McGill classified ad in 2012 looking for participants to take part in a skills acquisition study led by **Dr. Melina Vassiliou**,



Elif Bilgic, PhD

this marked the beginning of her longstanding relationship with **the Steinberg-Bernstein Centre for Minimally Invasive Surgery (MIS Lab)** at the Montreal General Hospital. Elif was studying anatomy and cell biology at McGill University; she had a strong interest in medicine and was looking for opportunities to get involved in areas of research that extended beyond basic science. When the study ended, Elif contacted Drs. Melina Vassiliou and Liane Feldman, expressing a desire to do research at the MIS Lab. "They were very open and encouraged me to learn more about what they were doing,"

says Elif. "I think I just kind of fell in love with the research I was doing and the people I was surrounded by. It meant a lot to me."

Elif continued to be involved in many educational research projects at the MIS Lab and the **Henry K.M. de Kuyper Education Centre** in the ensuing years. She finished her Bachelor's degree and then completed a PhD in Experimental Surgery where her research focused on the assessment of laparoscopic suturing skills.

As she explains, "Medical students first learn open suturing. This method offers a pretty good range of motion, with your hands and wrist providing 360° maneuverability. But this is limited in laparoscopic surgery, which involves using long instruments and looking through a camera that shows on the monitors. You're working with a 3D area but looking at a 2D monitor, so there are issues with depth perception. There is a lack of dexterity that requires more experience and exposure to master."

There are many different simulation tools and models that can be used to practice laparoscopic suturing—including ex vivo animal tissues, augmented virtual reality with added haptics, cadavers and live anesthetized animals—but inanimate models are often the most cost-effective. "You don't always need a high-fidelity model to teach the skill," emphasized Elif. "Simulation training

is an adjunct to their exposure, designed to help the learners, not to replace their clinical exposure. If, in simulation, they can be exposed to advanced laparoscopic surgery techniques, we can help them learn when to change the angle of a needle, how to penetrate a tissue properly, how to do suturing when the tissue is under tension. If they already know how to do this in the OR, they can focus on other aspects of the operation that are more difficult to teach through simulation."

ASSESSMENT DRIVES LEARNING

"A lot of our focus has been on suturing because that was identified as one of the main skills required in the OR that could benefit from simulation training. As part of the McGill team, we developed advanced suturing tasks to better reflect the complexities of the current operations. Our goal is to use these platforms for assessment and training purposes. The tasks are one component, an instrument to teach and learn, but if you don't know how to assess or what to look for within the performance, it's hard to actually improve," stresses Elif. "Assessment is a big part in all simulation work. The more proof we have that something works, the more likely it is that people are going to understand the value of it. That's where research comes in, and it takes years to build this."

EVOLVING NEEDS REQUIRE UPDATED TRAINING METHODS

Elif is currently completing a postdoctoral fellowship at McGill's Steinberg Centre for Simulation and Interactive Learning under the supervision of MIS pioneer Dr. Gerald Fried, Edward W. Archibald Professor and Chairman of the Department of Surgery at McGill,



and Surgeon-in-Chief of the McGill University Health Centre. Dr. Fried established minimally invasive surgery as a clinical and academic program at McGill in 1990. Over the years, he and his colleagues have made significant advances towards the training of surgeons and the process of introducing innovation into clinical practice. ►

► As Dr. Fried explains, “For over a century, surgery was taught by the apprenticeship model whereby surgeons learned by practicing on patients. The introduction of minimally invasive surgery not only transformed clinical care but allowed us to redesign our educational paradigm. The use of simulation-based training and verification that the learner has actually achieved the learning goals through reliable and valid measures of performance have improved the efficiency of learning and enhanced patient safety. Elif has identified an unmet learning need, advanced laparoscopic suturing, and developed a simulation curriculum and performance measures to address this need. Her work will be extremely valuable by ensuring that all surgeons will be capable of suturing using laparoscopic tools and can apply these skills in challenging situations.”

RESEARCH TAKES TIME

For anyone who is interested in pursuing a career in research, Elif wants them to know that research takes time: “You need time to learn, to figure out your objectives and the area you want to focus on, to figure out your methodology, to talk to the right people, to conduct the study. Residents, faculty and students all have big time constraints; it’s not easy to get them to participate. You need to build a connection with them, to encourage participation. It takes a lot of time and work before you can publish. Some people feel down because it takes a long time, but that’s normal. Eventually it will happen. You just have to be patient. That’s what I learned. I think also you need to like what you’re doing, the area you’re working in. You’ll work more passionately and do a much better job if you like what you do.” ♦

Upcoming Events

Emotional Is Not Irrational: Rethinking the Role of Emotions in Learning & Clinical Skills

**October 24th, 2019
from 16h00-17h30**

Presenter:

Dr. Vicki Leblanc
University of Ottawa

Meakins Amphitheatre (521)
McIntyre Medical Sciences Building

[Registration](#)

Interdisciplinary Perspectives on Becoming a Health Sciences Education (HSE) Researcher

**November 28th, 2019
from 16h00 to 17h30**

Presenters:

Geoffroy Noël (Anatomy & Cell Biology),
Fraser Moore (Neurology & Neurosurgery),
Suzanne Mak (School of Physical and
Occupational Therapy)

Institute of Health Sciences Education, Faculty
of Medicine, McGill University

Meakins Amphitheatre (521), McIntyre Medical
Sciences Building

[Registration](#)

Division of Orthopedic Surgery

Annual McGill Orthopaedic Bike Ride 2019

For the fourth consecutive year, the **McGill Orthopaedic Residency Program** hosted its annual Bike Ride. This consists of distances anywhere between 40 to 80 kilometres. The ride starts from Atwater Market to the St. Catherine Locks and to the Southshore farms in St-Michelle. As usual, we had great participation with Staff and Residents joining the ride, followed by a brunch. ♦



Division of Orthopedic Surgery

Inaugural McGill Orthopaedic Alumni Reunion 2019

This past June, the Orthopaedic Surgery Department held its first Residency Alumni Reunion. Spear-headed by **Dr. Thierry Benaroch**, Program Director, and **Dr. Greg Berry**, Chair of Orthopaedics, the day's events were attended by staff, current residents and our alumni. We had the great pleasure of welcoming back several of our past graduates, from 1967 up until 2018.

The day's event started at the Shriners' Hospital for Children with opening remarks by both Dr. Benaroch and Dr. Berry. The division invited former and current residents, as well as staff, to give a series of brief TEDTalks on a variety of subjects related to Orthopaedics and surgery, such as the particular challenges female surgeons face in their surgical field, the McGill Orthopaedics Global Health mission in Haiti, Evidence Based Medicine in Orthopaedics, the current job crisis for graduating residents and various talks on arthroscopic methods. Our invited guest speaker, **Dr. Kelly Vince** (class of 1985), gave the first inaugural **Dr. John Hsu Lecture**. The morning's activities concluded with a networking lunch that gave current residents and past residents the chance to mingle. Dr. Benaroch also took the opportunity to give a tour of the new Shriners Hospital to past residents.

Later on in the evening, we welcomed all attendees for cocktails and dinner at the Ritz Carlton Hotel. Our guest of honour, **Dr. John Hsu**, gave an informative speech on the origins of Orthopaedics at McGill, as he experienced it as an intern at the Royal Victoria Hospital in 1962. This past year, we also saw the retirement of **Dr. Robert Marien** (class of 1985), who gave a moving and emotional retrospective on his time as a teacher and surgeon. We were also very proud to welcome **Mr. Chris "Knuckles" Nilan** to celebrate the evening with us. Mr. Nilan graciously accepted our invitation while recovering from a total knee replacement and entertained the room with his life anecdotes and words of wisdom. Overall, the feedback we've received from our alumni has been overwhelmingly positive. Everyone enjoyed the opportunity to catch up with old friends, and Dr. Benaroch and Dr. Berry are so thankful that people took the time away from their practices and families in order to make it such a special event. ♦



Division of Orthopedic Surgery

Once again, the McGill Orthopaedic Residents gathered for their annual retreat in Mont-Tremblant. This protected time was designed to encourage resident wellness and advance team bonding.

McGill Orthopaedic Resident Retreat Day 2019

This year, they had the joy of riding on Pontoons in the Mont Tremblant lake followed by cool dips in the water. After this, the residents got to demonstrate

their physical prowess and teamworking skills in an Orthopaedic themed obstacle course set out for them at a beautiful chalet. They were then able to wind down with a barbecue, music and outdoor firepits. Resident retreat day has become a crucial part of our curriculum as it promotes physical and psychological wellbeing. The residents always comment on how revitalizing these retreats are and reminisce about the good times they enjoyed together. Where will they go next year? We will have to wait and see! ♦



Division of Orthopedic Surgery



Orthopedic Surgery Graduates



DR. THAMER ALRAIYES is a graduate of King Saud University in Riyadh, Saudi Arabia. He joined the McGill Orthopaedic Residency Program in 2014 and completed his residency in June 2019 where he obtained his Royal College of Surgeons and Physician of Canada Board Certification (FRCSC) in Orthopaedic Surgery. Throughout his training, Thamer was known for being a very organized, proactive, and hardworking resident. He will be doing the prestigious Upper Extremity fellowship (at the HULC) in London, Ontario and will later be doing the Sunnybrook Upper Extremity & Trauma fellowship at the University of Toronto. Upon his return to Saudi Arabia, Thamer will be joining the Orthopaedic department at King Faisal Specialist Hospital & Research Centre in Riyadh. His wife Meshael and his family are the reason for all his success.



DR. EMILIE-ANN DOWNEY completed her Medical School training at McGill University before joining the Orthopaedic Surgery Residency Program in 2014. She will be pursuing a first fellowship in Foot and Ankle Adult Reconstruction at the University of British Columbia, and a second fellowship in Limb Lengthening and Complex Reconstruction at the Hospital for Special Surgery in New York. She would like to thank her passionate mentors at McGill for their dedication to teaching, as well as her friends and family for their continued support.



DR. CHRISTOPHER PEDNEAULT is truly proud to have graduated from such an excellent surgical program. He was equally honoured to have been the Chief Resident of the McGill Orthopaedic program for 2018-2019. Some of his fondest memories from residency include his medical mission trip to Haiti, the inauguration of the new anatomy program at the Shriner's simulation center, awesome resident retreats and the countless interesting surgical cases and teaching sessions. He leaves behind his wonderful mentors at McGill to pursue a fellowship at the University of British Columbia in Adult Hip and Knee Reconstruction.



DR. MASHAEL MUWANIS' medical journey was quite diverse across three different countries. King Abdulaziz University in Jeddah, Saudi Arabia marked the first step of that journey where Mashaël earned her medical degree (MBBS). Mashaël then obtained a master's degree in advanced studies; clinical research (MAS) from University

of California, San Diego, and she subsequently raised the bar by wanting to be the first Saudi Arabian female completing her residency training as an orthopaedic surgeon in North America. In 2014, her dream came true. Mashaël was accepted into the Orthopaedic residency training program at McGill University. In June 2019, Mashaël successfully completed the Royal College of Surgeons and Physician of Canada Board Certification (FRCSC) in Orthopaedic Surgery. Challenges make you stronger, and giving birth and raising a wonderful son, Abdulrahman, who is now three years old, during her residency program was Mashaël's biggest challenge. Mashaël is going forward with her journey and she will start her Pediatric Orthopaedics fellowship in Vancouver at the BC Children's Hospital. After she finishes her training, Mashaël will go back to work as a Faculty member at Tabiah University, Almadinah, Saudi Arabia. Mashaël owes all of her success to her supportive and loving husband, Hosam Alarabi, and to her son, Abdulrahman.



DR. MOTAZ ALAQEEL completed his medical training at King Saud University, Riyadh, Saudi Arabia in 2012. Driven by his passion and immersion in basic sciences, he completed his MSc in Experimental Surgery at McGill University and began his residency training in Orthopaedics at McGill in 2014. During his time as a resident, Motaz served as Assistant Chief Resident in 2017 - 2018, and in June 2019 he obtained his Royal College of Surgeons and Physician of Canada Board Certification (FRCSC) in Orthopaedic Surgery. He will be pursuing a fellowship at the prestigious Memorial Sloan Kettering Cancer Center at Cornell University in New York. Motaz owes his success to his supportive and loving wife, Arwa, and his family. ♦

.....

**"The only weapon with which
the unconscious patient
can immediately retaliate upon
the incompetent surgeon
is hemorrhage".**

—William Stewart Halsted
(1852–1922)
*Bulletin of the Johns
Hopkins Hospital*
23:191, 1912

.....



Orthopedic Surgery Visiting Professor



n May 1st to May 3rd, 2019, the McGill Orthopaedic Surgery Department was pleased to host **Professor Robert McCormack** as its Annual Visiting Professor.

Dr. McCormack is a Professor and the Associate Head for the Department of Orthopaedics at New West Orthopaedic & Sports Medicine Centre, British Columbia, Canada. He is active in sports medicine and cares for athletes at the university, national and professional levels. Dr. McCormack was appointed as the team physician for several national teams, in both summer and winter sports and has been part of the medical team at numerous international multi-sports events (including ten Olympic Games). He has been the head physician for the Canadian Olympic team since 2004, and most recently was the Chief Medical Officer at the 2018 Olympic Winter Games in Korea. Between Games he is the Medical Director for the Canadian Olympic Committee and on the PASO Medical Commission for the Pan Am Games.

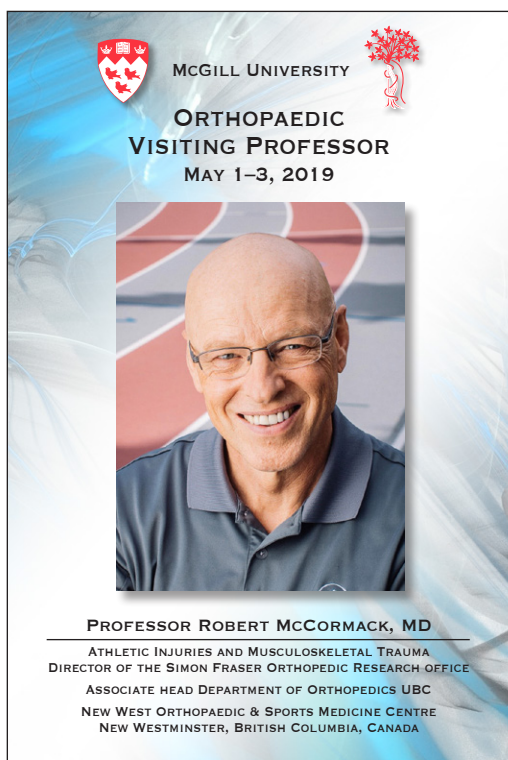
Soon after arriving in Montreal, Dr. McCormack had dinner with the residents and attending staff. He was introduced to the Orthopaedic

Residency Program at McGill University, in addition to the Orthopaedic Sports Medicine & Arthroscopy Clinical Fellowship.

On the following day, Dr. McCormack started the day by presenting his talk entitled *Medical Care at the Olympics* at McGill Orthopaedic Grand Rounds. This was followed by case-based discussions with the residents, and another lecture by Dr. McCormack entitled *Injection Therapy for DJD – Magic or Myth?* to end the morning session. In the afternoon, our residents participated in the resident research paper competition. A total of 21 papers were presented involving clinical and basic science studies.

The day was then concluded with the division's annual dinner at the St-James Club. Prizes and awards were presented, including best clinical and basic science research papers, best resident/attending teacher, and the Julie prize for compassionate care.

On the third day of Dr. McCormack's visit, the activities started with case-based discussion with the residents, including a variety of sports conditions. Dr. McCormack then concluded his visit with a lecture entitled *Cartilage Regeneration. Where are we in 2019?* The entire team of the Division of Orthopaedic Surgery enjoyed having Dr. McCormack as our Visiting Professor. ♦



Division of Orthopedic Surgery



Over the years since I completed training at RVH before entering Orthopaedic residency at Johns Hopkins Hospital, which was my career choice, I had recently returned to Montreal

News from Dr. Hsu

during the Canadian Orthopaedic Association (COA) meeting at the Palais de Congres. It gave me great pleasure to see the gathering of Orthopaedists from around the world, trained through the McGill residency programs. I was able to sponsor a lecture given by a former McGill graduate, Kelly Vince, MD,CM

and attend the evening program seated with our former Dean, Richard Cruess, M.D. and his wife.

My McGill class (1961) had a number of us interning at the RVH. Alan Turnbull and I were the residents who chose to go into a Surgical specialty. We had excellent teachers, with solid leadership of the various specialty services including a very active trauma service headed by Dr. H.F. Moseley. He appointed Fellows who had previous European training in Orthopaedics and trauma and they set good examples. ♦

John D. Hsu, MDCM 1961

Former Royal Victoria Hospital intern and Surgery resident



Canadian Orthopaedic Association (COA) meeting at the Palais de Congres.

Upcoming
Events

YOU ARE INVITED TO THE 2ND ANNUAL
**ORTHOPAEDIC
RESEARCH
NIGHT**

WINE & CHEESE

Monday
October 28, 2019

5PM - 7PM

Bellini Life
Sciences Complex
3649 Promenade
Sir-William-Osler

 Orthopaedic Research Wine and Cheese
 www.mcgill.ca/orthopaedics/news-events



Division of Pediatric Surgery

Dr. **Jean-Martin Laberge** has been honored by the Royal College of Physicians and Surgeons of Canada through receiving the 2019 Royal College Mentor of the Year Award. The award will be formally bestowed upon Dr. Laberge at the annual banquet of the Canadian Association of Pediatric Surgeons in Quebec City on September 21, 2019.

On June 5, 2018, **Dean David Eidelman** hosted a Faculty reception to announce the appointment of **Dr. Sherif Emil** as the Mirella and Lino Saputo Foundation Chair in Pediatric Surgical Education and Patient and Family-Centered Care. The event was attended by many including the Saputo family, **Mme Renee Vezina**, President of the MCH Foundation, **Dr. Jean-Pierre Farmer**, Chair of the Department of Pediatric Surgery, and many current and former patients of Dr. Emil and their parents. The Chair will launch a new era in pediatric surgical education and patient-centered care at the Montreal Children's, including new educational programs and new clinical programs in pediatric enhanced recovery and patient reported outcomes.

In May, **Dr. Sherif Emil** and **Dr. Pramod Puligandla** traveled to Boston to represent the Division of Pediatric Surgery at the 50th anniversary celebrations of the founding of the American Pediatric

Surgical Association. A tribute to **Dr. Harvey Beardmore**, the first Canadian pediatric surgical fellow who went on to establish specialty certification in North America was shown <https://www.youtube.com/watch?v=InvKBrcVwWg&t=57s>

Dr. Hussein Wissanji completed his pediatric surgical fellowship on July 31, and plans to join the pediatric surgical faculty at Laval University this fall. **Amanda Hall, MD, PhD**, a graduate of the University of Saskatchewan general residency program started her pediatric surgery fellowship on August 1.

In June, **Dr. Dan Poenaru** succeeded in receiving a chercheur boursier grant from the Fonds de la recherche en santé du Québec. This prestigious grant will provide Dr. Poenaru with 50% protected research time to launch a major new research program in shared decision making in pediatric surgery. ♦



Dean Reception



Dean Reception

Frank Guttman Visiting Professor

O

n June 19 and 20, 2019, the Division hosted the 23rd annual **Frank Guttman Visiting Professor in Pediatric Surgery**. The VP was **Dr. Kurt Heiss**, Professor of Surgery and Pediatrics at Emory University School of Medicine and Medical Director of Quality, Surgical Services, Children's Healthcare of Atlanta. Dr. Heiss gave a number of thought-provoking presentations, and was a guest of honor at the annual divisional banquet. ♦



Dr. Kurt Heiss, 23rd Frank Guttman Visiting Professor



*Top Row: Dr. Luong T. Nguyen, Visiting Professor Kurt F. Heiss, Dr. Kenneth Shaw, Dr. Sherif Emil, Dr. Dan Poenaru, Dr. Frank M. Guttman.
Bottom Row: Dr. Jean-Martin Laberge, Dr. Hussein Wissanji (graduate), Dr. Pramod Puligandla*

Division of Plastic Surgery

Dr. **Robert Stephen Mulholland** is a plastic and reconstructive surgeon, who has dual certification in Plastic Surgery and Head and Neck Surgical Oncology certified by the Royal College of Physicians and Surgeons of Canada and by the American Board of Plastic Surgery.

Dr. Mulholland graduated from the University of Toronto Medical School as the Homer Silver Medalist. He went on to complete his specialty training at the University of Toronto in Plastic Surgery, followed by two years of fellowship training in Facial Trauma and Otolaryngology- Head and Neck Oncology and is certified by the American Joint Societies in Head and Neck Oncology Surgery.

Dr. Mulholland was formerly a consultant at the Hamilton Regional Cancer Center and St. Joseph's Hospital, where he concentrated his talents on treating complex tumors of the face, head, and neck, as well as, the repair of traumatic facial injuries. He currently restricts and focuses his practice solely to Cosmetic Plastic Surgery.

Dr. Mulholland is a member of the Canadian Society of Plastic Surgeons and the American Society of Plastic Surgeons. He had been named one of Canada's top plastic surgeons by Flare Magazine and SpaMedica has topped Toronto Life's list of top cosmetic surgery, laser skin care clinics.

Dr. Mulholland has been the guest expert plastic surgeon on CityLine for over 20 years and has appeared regularly on every major U.S. and Canadian radio, newspaper, magazine and television network including the Today Show, The Doctors, Entertainment Tonight, etalk and LA Today.

Most recently, Dr. Mulholland received a Gemini award for the reality TV Surgical Makeover show, Skin Deep and he and wife Ann Kaplan starred in Real Housewives of Toronto.

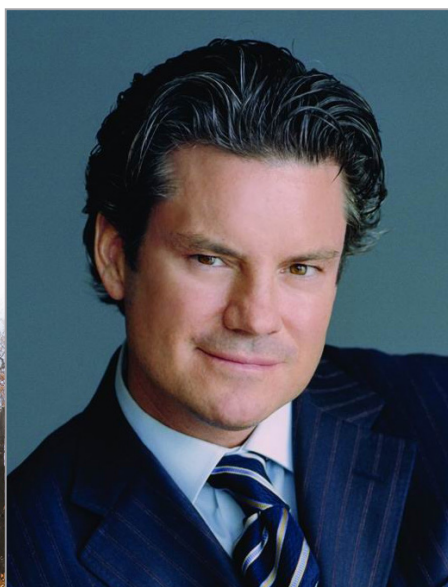
On Friday June 14th Dr. Mulholland gave a talk on *The Spectrum from Reconstructive to Cosmetic Surgery: Is There a Difference?* He also participated and commented on the scientific presentations by the Plastic Surgery residents and fellows. In the afternoon Dr. Mulholland led the cadaver lab at the Shriners Pediatric Simulation Centre. The entire team of the Division of Plastic Surgery appreciated having Dr. McCormack as our Visiting Professor and thanked him for his visit! ♦



McGill University
Division of
Plastic Surgery



2019 PLASTIC SURGERY VISITING PROFESSOR



Dr. Robert Stephen Mulholland
June 14th 2019

"The Art of Detachment, the Virtue of Method, and the Quality of Thoroughness may make you students, in the true sense of the word, successful practitioners, or even great investigators; but your characters may still lack that which can alone give permanence to power—the Grace of Humility".

—Sir William Osler
(1849–1919)

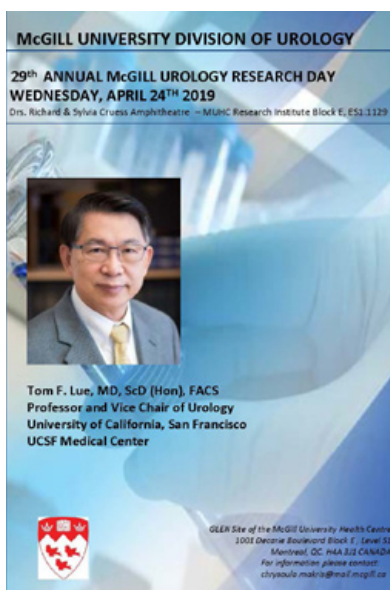
Aequanimitas, with Other Addresses, "Teacher and Student"



Division of Urology

Since 1990, the Division has hosted an annual research gathering allowing graduate students, residents, post-doctoral fellows, research associates and assistants to present their research endeavors.

29th Annual McGill Urology Research Day



Dr. Simon Tanguay, Professor and Head, McGill Division of Urology and **Dr. Simone Chevalier**, Professor and McGill Director of Urology Research were pleased to host the **29th Annual McGill Urology Research Day** on Wednesday April 24th, 2019 at the Drs. Richard & Sylvia Cruess Amphitheatre Glen site of McGill University Health Centre Research Institute. The central theme was Andrology-Reproduction under the direction of **Dr. Peter Chan**, McGill Professor and Director of Male Reproductive Medicine and **Dr. Serge Carrier**, Professor,

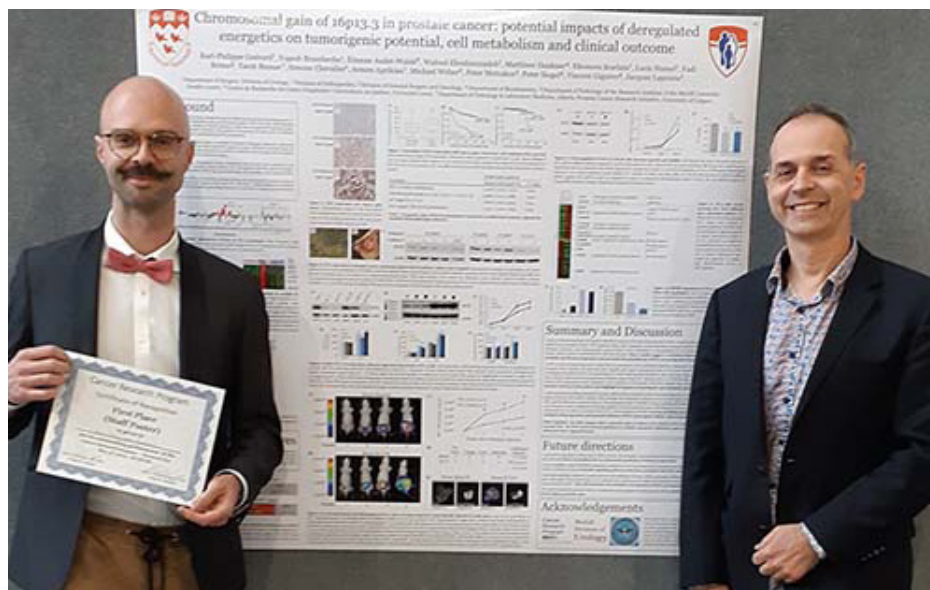
McGill Department of Surgery. We were delighted to welcome our visiting professor, **Dr. Tom F. Lue**, from University of California. It was a privilege to hear Dr. Lue who gave a state-of-the-art presentation entitled, *A Noninvasive Stem Cell Therapy*. This was followed by the 27 scientific presentations, moderated by **Dr. Cristian O'Flaherty**, Associate Professor, McGill Department of Surgery. With over 115 people in attendance, the research day gave a glimpse of the quality and breadth of research being done on various themes related to urological disorders. The research day was continued by a cocktail and a congratulatory dinner held at the Glen Atrium where awards were presented for the best presentations to PhD student **Ms. Surashri Shinde-Jadhav** (**Dr. Wassim Kassouf**), PhD student **Mr. Walead Ebrahimizadeh**, (**Dr. Simone Chevalier** and **Dr. Jacques Lapointe**), Post-Doctoral Fellow **Dr. Anna de Polo** (**Dr. David Labbé**) and Medical Student **Mr. Nawar Touma** (**Dr. Lysanne Campeau**). The jury was composed of **Dr. Lue**, **Dr. Teruko Taketo** (Professor of Urology), **Dr. Melanie Aubé-Peterkin** (Assistant Professor of Urology) and **Dr. Tanguay**. **Dr. Chan** presented Dr. Lue a gift on behalf of an appreciative McGill Division of Urology. The evening concluded with closing words by **Dr. Tanguay** and **Dr. Chan** congratulating everyone who participated by thanking the organizers **Drs. O'Flaherty** and **Chevalier**, Pharmaceutical partners for their continuous and generous support, and **Ms. Chrysoula Makris** whose indispensable contribution throughout the years has made the McGill Urology Research Day a successful and memorable event. ♦



Awards were presented for the best presentations. (Front left to right) Dr. Peter Chan, Dr. Tom Lue, Mr. Nawar Touma, Dr. Anna de Polo, Mr. Walead Ebrahimizadeh, Ms. Surashri Shinde-Jadhav and Dr. Teruko Taketo (Row behind left to right) Dr. Cristian O'Flaherty, Dr. Simon Tanguay, Dr. Melanie Aubé-Peterkin and Dr. Roman Jednak



Urology Research News



Mr. Karl-Philippe Guerard and Dr. Jacques Lapointe

Congratulations to all the McGill Urology Research winners who participated at the Cancer Research Program (CRP) Research Day held May 3, 2019. This event was an opportunity to showcase our quality research and progress made by Urology research members. Kudos to **Dr. Anna de Polo (Dr. David Labbé)** who was awarded for best Post-Doc Poster and to **Mr. Karl-Philippe Guerard (Dr Jacques Lapointe)**.

Welcome New Urology Chiefs

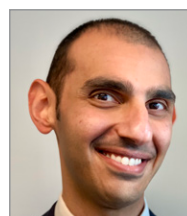


DR. FADL HAMOUCHE was born and raised in Lebanon. Fadl started his medical education in Paris France (Université Paris XI, 2009-20011). He completed his MD and graduated from the University of Sherbrooke in 2015. After that Fadl joined McGill Urology in 2015 to do the research in infertility and testis cancer. Fadl is going for an Endo-Urology fellowship at the University of California, San Francisco that starts in July 2020 with the focus on Laparoscopy/ Minimally invasive stone and BPH surgeries. Apart from this Fadl is a Reader, Traveller, foodie and Soccer Fan (PSG for life). His famous quote is "No man shall ever be in retention".



DR. ALEXIS ROMPRÉ-BRODEUR was born and raised in Montreal. Though his first aspiration was to become an astronaut and focus on the immensity of the universe, he completed a bachelor with honors in the microscopic world of biochemistry at Université de Montréal. Alexis then completed his medical school at the same faculty before joining McGill University for his residency training in urology. He has been the junior representative of the program and currently holds the position of academic chief resident. Outside of the hospital, he can be found trying new restaurants with his

wife Marie-Michèle and friends, with his family at the country house or riding his bike. Alexis is renowned for his puns and his sense of humor, however, his peers largely remain doubtful of their quality. During residency, he worked on and presented a variety of research projects in uro-oncology, namely with Dr. Kassouf on novel immunotherapy combinations in bladder cancer and received many prizes including the Edmond D. Monaghan award. Alexis will go on to pursue a fellowship of the Society of Urologic Oncology at the National Cancer Institute / National Institutes of Health in Washington, D.C.



DR. AHMAD ALMARZOUQ is from Kuwait. Graduated from Cardiff University, UK where he also completed one year of internship. He obtained a Master of Science from Queen Mary University in London, UK. After returning to Kuwait as a junior doctor in general surgery and urology, Ahmad was awarded a scholarship and joined

the McGill urology program in 2015. Since joining he has been actively involved in surgical simulation research and presented his work in multiple national and international meetings. Upon completion of residency training, he plans to pursue a fellowship in Uro-oncology in University of British Columbia, Vancouver. Outside work, Ahmad enjoys travelling, fine dining, exercising and is an avid follower of European soccer. ♦

Urology Research Achievement

Congratulations to **Dr. David P. Labbé** (Assistant Professor), FRQS Research Scholar – Junior 1, who recently secured highly competitive tri-council funding to pursue his research on the role of diet in prostate cancer development and progression.

2019

Early Career Award in Cancer Canadian Institutes of Health Research

One of four awards given to new investigators with highly ranked applications in the Project Scheme competition \$25,000 (CAD)

2019-2024

Canadian Institutes of Health Research Project Grant

Molecular basis to diet-dependent chromatin dependencies in prostate cancer
\$967,725 (CAD) over 5 years / Role: PI

2019-2021

Canada Research Coordinating Committee (CIHR, NSERC, SSHRC, CFI)

New Frontiers in Research Fund – Exploration (inaugural competition)

Role of sugar-dependent extracellular matrix stiffening in driving prostate cancer metastasis

\$200,000 (CAD) over 2 years / Role: PI



Dr. David Labbé

Upcoming Event Discovery Day in Health Sciences on Wednesday, December 4, 2019

Discovery Day in Health Sciences presented by MD Financial Management is being hosted by McGill University Faculty of Medicine and The Neuro, in partnership with the Canadian Medical Hall of Fame. Offered at 14 sites across Canada, this event encourages young people to explore exciting career options in the health sciences. Over 250 students from secondary schools in Montreal and surrounding area are expected to attend. The objective of the day is to

spark students' interest in considering a future career in the health sciences. Workshop presenters coordinate and lead up to two 90-minute interactive sessions (am and/or pm) that stimulate learning and interest in their field for students in grades 10 to 12 who are interested in science. The session should include a brief description of the academic path to the current position and an interactive activity or simulation in the respective health field.

Deadline for submissions is Friday, October 25th

- ▶ Workshops times are 10:00 – 11:30 am and 12:30 – 2:00 pm in a location chosen by the presenter
- ▶ The Career Panel discussion will be held from 2:15 – 3:15 in the Martin Amphitheatre, McIntyre Building

Event day agenda, workshop and career panel forms are available at:
<http://www.cdnmedhall.org/mcgill-neuro>

Earlier this year, the Canadian government announced the inaugural cohort of 157 early career researchers who will receive funding from the New Frontiers in Research Fund. McGill will receive \$3 million

KUDOS !!

shared among 13 researchers, including two from the Research Institute of the McGill University Health Centre (RI-MUHC). Each will receive up to \$250,000 over the next two years. Congratulations to the two RI-MUHC representatives selected: **David**



Labbé, PhD, Cancer Research Program, RI-MUHC, and assistant professor, Department of Surgery, McGill University and **Géraldine Merle, PhD**, Injury Repair Recovery Program, RI-MUHC, and assistant professor, Department of Surgery (Division of Orthopedic Surgery), McGill University.

We are pleased to report a very successful year for the department of surgery this year: faculty members **Drs. Lawrence Lee, Dan Poenaru, and Lyssanne Campeau** received chercheur boursier awards. **Drs. Teodora Dumitra and Yifan Wang** were successful in the *Formation de recherche pour les médecins résidents - Résidence complémentaire en recherche* category.



Four graduate students from the RI-MUHC are among the 16 from McGill to win 2019 Vanier Scholarships, the federal governments' most prestigious program recognizing doctoral research excellence. The announcement was made on May 15 by the **Honourable Kirsty Duncan**, Minister of Science and Sport. Congratulations to **Drs. Matthew Dankner, Kashif Khan, Anastasios Maniakas and Yifan Wang!**

OUR 2019 VANIER SCHOLARS:

MATTHEW DANKNER, MD
PhD Student, Experimental Medicine
 SUPERVISORS: Peter Siegel, PhD, Cancer Research Program; Kevin Petrecca, MD, PhD, Montreal Neurological Institute researcher and member of the BRaIN Program, RI-MUHC
Project: Identifying and targeting functional mediators of leptomeningeal metastasis

KASHIF KHAN
PhD Student, Experimental Surgery
 Supervisors: Adel Schwertani, PhD and Renzo Cecere, MD, Cardiovascular Health Across the Lifespan Program
Project: The clinical significance of Wingless signalling in atherosclerosis: a new player in an old disease

ANASTASIOS MANIAKAS, MD
PhD Student, Experimental Surgery
 Supervisor: John Sampalis, PhD, Cancer Research Program
Project: Azithromycin as add-on therapy in patients failing medical and surgical treatment for chronic rhinosinusitis: a double-blind, randomized, placebo-controlled trial

YIFAN WANG
PhD Student, Experimental Surgery
 Supervisor: George Zogopoulos, MD, PhD, Cancer Research Program
Project: Targeting distinct therapeutic vulnerabilities in homologous repair-deficient pancreatic adenocarcinoma

Congratulations to **Richard Garfinkle** (Gen Surg R3) who has been selected to receive an ACS Resident Member scholarship award to attend the [Designing and Running a Prospective Surgical Clinical Trial Didactic Course](#) (DC06) at Clinical Congress 2019 in San Francisco, CA

The Third Annual **Garzon Teaching Award** was presented at the Harvey Sigman Academic half day to **Dr. Ebram Salama**. The award recognizes the



best junior resident teacher, as identified by his colleagues and medical students. Past recipients have been **Dr. Mostafa Alhaboubi, Dr. Yifan Wang, Dr. Phil Vourtzoumis and Dr. Maria Abou Khalil**.

Salama has distinguished himself as an excellent teacher and role model, exemplifying the same qualities of Dr. Jacob Garzon for whom the award is named. This year the award was presented at the LD. McLean dinner, as our visiting professor was unable to travel, but will join us as this year's Sigman Day visiting professor October 2, 2019. Please join me in congratulating Dr. Ebram Salama on his well deserved award!

Baird Mallory (Smith), '92 and pediatric surgeon, became the interim Chair of Surgery at Maine Medical Center September 2019 in addition to current responsibilities as Chairman of the Board of Maine Medical Partners for which he is also the Director of Surgical Practices (~120 surgeons, their APP's and offices). French-speaking Mainers seem pleased and perplexed to hear the dexterity with which he unknowingly continues to mutilate their mother-tongue.



Jean-Martin Laberge, MD, FRCS, is this year's **recipient** of the Mentor of the Year award. Congratulations! ♦

Upcoming Events



McGill



STEINBERG CENTRE FOR
SIMULATION AND INTERACTIVE LEARNING
CENTRE DE SIMULATION ET
D'APPRENTISSAGE INTERACTIF STEINBERG

15TH ANNUAL FLANDERS FAMILY VISITING PROFESSOR IN MEDICAL SIMULATION

Robert Sweet MD, FACS



Dr. Sweet is a Professor of Urology at the University of Washington and Medical Director of the University of Washington Medicine Kidney Stone Center at Northwest Hospital.

He is the Principal Investigator of numerous simulation research and development projects, and serves as Executive Director of the Washington Wyoming Alaska Montana Idaho (WWAMI) Institute for Simulation in Healthcare (WISH) and the UW Center for Research in Education and Simulation Technologies (CREST).

He has served in leadership positions in simulation and education within the American College of Surgeons, the Society for Laparoendoscopic Surgeons, the Endourology Society and the American Urological Association. Dr. Sweet helped develop the Surgical Simulation Fellowship Accreditation Program for the American College of Surgeons (ACS) Division of Education. He was involved in the founding of the University of Minnesota's SimPORTAL and the University of Washington WISH (formerly the Institute for Simulation and Interprofessional Studies).

In October 2018, Dr. Sweet was inducted as a Member of the American College of Surgeons Academy of Master Surgeon Educators™ Inaugural class. Dr. Sweet was also the recipient of the 2019 American Urological Association Distinguished Contribution Award.

McGill University
Combined Surgical and Anesthesia Grand Rounds

It's Alive! Creation of the Advanced Modular Manikin for Healthcare Simulation Training

Thursday, November 14, 2019 | 7:30 to 8:30 am

Montreal General Hospital

1650 Cedar Avenue
Sir William Osler Amphitheatre, A6.105

Videoconferencing sites:

MUHC Glen site, Room DS1.1427
Jewish General Hospital, Room B.106
St-Mary's Hospital, Room 1501E
Barrie Memorial Hospital, Room 3

For more information, please contact: Lucy.vicenzo@mcgill.ca 514-398-1523

Upcoming Events



McGill



STEINBERG CENTRE FOR
SIMULATION AND INTERACTIVE LEARNING
CENTRE DE SIMULATION ET
D'APPRENTISSAGE INTERACTIF STEINBERG

15TH ANNUAL FLANDERS FAMILY VISITING PROFESSOR IN MEDICAL SIMULATION

PANEL DISCUSSION WITH THE EXPERTS

Emerging Technology for Simulation and Education

Thursday, November 14, 2019 | 2 to 4 pm

Steinberg Centre for Simulation and Interactive Learning

3575 Parc Avenue, Suite 5640

Montreal, Quebec H2X 3P9

FREE PARKING



Dr. Robert Sweet, MD, FACS

Flanders Family Visiting Professor in Medical Simulation

Executive Director, WWAMI Institute for Simulation in Healthcare (WISH) and

UW Center for Research in Education and Simulation Technologies (CREST)

Lead Investigator, Advanced Modular Manikin



Dr. Rolando Del Maestro, MD, PhD, FRCS(C), FACS, DABNS

William Feindel Professor Emeritus in Neuro-Oncology

Director, Neurosurgical Simulation and Artificial Intelligence Learning Centre

Montreal Neurological Institute and Hospital



Mr. Erick Fortin, eng. PMP

Director Engineering, Innovation, and Project Management

CAE Healthcare



Dr. Susanne P. Lajoie, BA, MA, PhD, FRSC, FAPA, FAERA

Professor and Canadian Research Chair Tier 1, Advanced Technologies

for Learning in Authentic Settings (ATLAS)

Department of Educational and Counselling Psychology

McGill University



Dr. Edward J. Harvey, HBSc, MSc, MDCM, FRCS

Professor of Surgery, Michal and Renata Hornstein Chair in Surgical Excellence

McGill University

Leader of Injury Repair and Recovery Program

McGill University Health Centre Research Institute

OPEN TO ALL!

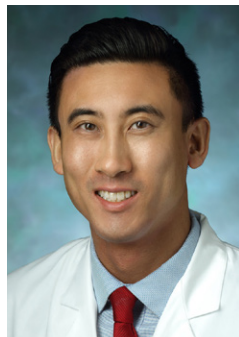
To reserve your spot, please contact Lucy.vicenzo@mcgill.ca | 514-398-1523

Jewish General Hospital News



The **Division of General Surgery** is pleased to announce that **Dr. Evan Wong** has joined the Jewish General Hospital-CIUSSS CODI. Dr.

Welcome New Recruits



Dr. Evan Wong

Evan Wong completed his residency in General Surgery in 2017 and his clinical fellowship in Critical Care Medicine in 2018, at McGill. In addition, he completed an MPH in Epidemiology and Biostatistics at Johns Hopkins Bloomberg School of Public Health in 2014 where he published 25 peer-reviewed articles, mainly in the domain of global surgery. Most recently, Dr. Evan Wong completed a fellowship in Trauma and Acute Care Surgery at Johns Hopkins, in July 2019. Dr. Evan Wong's specialty clinical interests are focused on the surgical management of trauma and acute care patients, as well as those requiring critical care. As such, Evan will be perfectly positioned to strengthen ties within the CIUSSS across specialties, as well as with other sites within the McGill RUISSS. We look forward to adding his expertise to the JGH Acute Care Surgical Group in our Division. Please join us

in welcoming Dr. Evan Wong to the Division of General Surgery at the JGH and McGill.



Dr. Stephanie Wong

The **Division of General Surgery** is pleased to announce that **Dr. Stephanie Wong**, a surgical oncologist, has joined the Jewish General Hospital – CIUSSS CODI. Dr. Wong is a graduate of the McGill General Surgery residency program, during which she obtained an MPH in Clinical Effectiveness at Harvard in 2015. She completed her surgical oncology fellowship at Dana-Farber/Brigham and Women's Cancer Center and Massachusetts General Hospital in July

2019. During her MPH and Fellowship Dr. Stephanie Wong had a prolific research experience with several first author publications in high level journals within her academic interest of breast oncology through the lens of population-level data. Her clinical interests are focused on the surgical management of patients with newly diagnosed breast cancer, oncoplastic techniques of breast conservation, as well as the complex monitoring and care of high-risk populations. We look forward to adding her expertise to the JGH Breast Oncology Group in our Division. Please join us in welcoming Dr. Stephanie Wong to the Division of General Surgery at the JGH and McGill. ♦



The Origins and Evolution of the ITC Workshops

In 2010, **Drs. Lawrence Rosenberg** and **Thomas Schlich**, of the Department of Social Studies of Medicine, met to discuss to what extent new minimally invasive surgical techniques had

been changing the profile of surgery over the previous two decades; with the new procedures and technologies, surgery was not what it used to be; even the specialization of individual practitioners in surgery, as opposed to organ systems or diseases, was up for grabs. Many interventions that once seemed to belong solely to the surgeon's natural field of activity could now, in principle, be carried out by others without any surgical training. Gastroenterologists and radiologists, for example, were able to conduct therapeutic interventions in the gastrointestinal tract with the use of endoscopes or by other minimally invasive means. Many treatments normally carried out as surgical procedures could even be performed by

technicians alone. Facing such a fundamental reorientation in its technical purview made it necessary for the surgical profession to rethink its role in modern health care in fundamental ways.

At McGill, such questions are being examined at the Department of Social Studies of Medicine (SSoM). With its interdisciplinary orientation, SSoM brings together historians, anthropologists and social scientists to examine fundamental issues of modern medicine. Scientists and scholars at SSoM look at practices, knowledge, and social contexts of medicine with an eye on its past, present and future. As a historian of medicine, with a qualification as a physician, Dr. Schlich had worked on different aspects of the recent history of surgery. One of them was the history of organ transplants from the 1880s to the 1930s. Over these five decades, the idea emerged that transplanting living organ tissue could potentially cure complex internal diseases. However, the practical application of this idea failed due to the unexpected, and for a long time even unnoticed, biological limitations of transplants between different individuals. Only after WW II was organ transplantation taken up again and after another two decades finally developed into a successful treatment option. ►

► Another major topic was the spread of the surgical repair of broken bones with metal implants from the 1950s onwards. This technology, called osteosynthesis, had existed for a long time, but failed to be widely accepted throughout the medical community. Only the coordinated dissemination of ethically approved standardized instruments and implants, together with the controlled spread of the necessary practical skill, the comprehensive control of treatment results, and the establishment of a scientific knowledge-base, made it possible to successfully introduce this technology on a global scale. In sharing perceptions of the impact of technological change on the surgical profession and treatment options, Drs. Rosenberg and Schlich decided that one strategy of examining this process was to focus on its most prominent example: minimally invasive surgery. Funding from the CIHR in 2013 was awarded for a project titled: *Disrupting Surgical Practice: The Rise of Minimally Invasive Surgery, 1980-2000*. This was so successful that in 2018 the CIHR-funded another project "Medical Innovation and the Patient Consumer: Explaining the Rise of Minimally Invasive Surgery".

To gain a broader perspective of the effect of new medical technologies over time, an initial workshop was organized to invite international researchers and experts in both the social sciences and surgery to share findings and stimulate active intellectual exchanges with speakers and attendees from the academic and professional communities. Throughout, these think-tank events have been supported by the JGH Foundation, the Faculty of Medicine, the CIHR as well as the SSoM.

The first ITC1 workshop was entitled *The Impact of Technological Change on the Surgical Profession: Past, Present, Future* and was held at the Jewish General Hospital in 2015. It drew a full house of residents, students, surgeons, department heads and was a tremendous success. Inspired by the outcome of this interdisciplinary event, it was followed in 2016 with another workshop titled: *The Impact of Technological Change on the Surgical Profession: Evidence-Based Practices*, which examined what procedures and instruments are involved in obtaining evidence, how the data is then analyzed, used and then what steps are taken to put findings into actual practice, a time consuming and seldom a direct or immediate process.

The ITC3-2018 workshop discussed the Contexts of Technological Change in Medicine: Centers & Margins, which looked at the role of major funded research centers and the not so obvious social/professional margins in medical innovation.

The ITC4-2019 looked at the very current issue of *Medicine Without Doctors? Disintermediation and Patient Agency*. This session focused on the dwindling role of physicians in today's health care resulting from the rapid development and release onto

the market of easily accessible mHealth technology - mobile apps for general health and fitness tracking, remote patient monitoring, consultations, disease management, and so on, all of which enable patients to assume a more active role in and responsibility for their own state of health. Mobile apps empower patients to self-educate and monitor themselves, previously the domain of the medical professional only.

While technological change has provided more education, control and responsibility to patients, it has also freed doctors to spend more quality one-on-one time with each patient - which is what patients actually want but has not always been possible due to shortages of resources.

The workshop discussions around disintermediation inspired the focus for the 2020 workshop which will look at what role the "patient consumer" plays in medical innovation. Increasing global population sizes, better informed patients and better equipped doctors, point to continued evolution in the democratization of patient agency and healthcare delivery. Implementing highly digitized technology requires both healthcare providers and users to be vigilant about personal information and who has access to it. Freedoms come with responsibilities for both healthcare providers and patients.

Since 2015 the thematic orientation of the ITC workshops has moved beyond surgery to now include medical innovation overall. This interdisciplinary cross-over reflects the impact technological change has on society today. These workshops are now annual CPD accredited events in the calendar of both the JGH and the McGill Department of SSoM. All researchers, practitioners, residents and students, from all departments, with an interest in the global impact of technological change are invited to contribute to the growing knowledge base. ♦

Thomas Schlich, MD, PhD and Barbara Reney
MEd Technologist

.....
"A blind man works on wood the
same way as a surgeon on the body,
when he is ignorant of anatomy".



.....
—Guy de Chauliac
(1300–1370)
Chirurgia Magna,
Treatise I, Doctrine I,
Ch. 1
.....



ITC4-2019: Medicine Without Doctors? Disintermediation and Patient Agency

The 4th edition of the annual Impact of Technological Change series of think-tank sessions titled “Medicine Without Doctors? Disintermediation and Patient Agency” centered on what appears to be a change in the medical practitioner’s role in healthcare as modern technology has provided society the tools to self-educate on all manner of ailments and possible treatments before they even arrive at the doctor’s office. Once

a diagnosis is confirmed and an informed decision on treatment is agreed upon, through digitized mobile apps, patients can self-monitor, self-treat, remotely interact with their healthcare provider - patients have a control over their own health through the easily accessible tools of technology. Not only by becoming better informed, patients can now take more responsibility in

became recognized as having more knowledge, resources and skills and the individual citizen turned their attention and trust to the recognized medical professional when in need.

Unlike other industries, disintermediation in healthcare does not necessarily take the doctor out of medical care, but rather refigures the distribution of knowledge, functions and power. Seeing the patient as consumer reframes the relationship of doctors and patients according to a market model. This is a ubiquitous model in many modern societies, but it is by no means the only possible option. The final discussion identified a critical discussion of the topic of the patient consumer as one promising theme for a future workshop. Another such theme would be the role of technologies in a global context, especially considering the present and future lack of qualified health care practitioners. There’s also the important issue of education and training of healthcare professionals - both current as well as future.

The ultimate benefit of this decentralization of both power and responsibility, through the use of digitized technology, will be more meaningful relationships between practitioners and patient clients,



Guest Speakers, Chairs, Host and Organizers of the ITC4-2019

*Top standing: Rachel Elder, Kristen Gardner, Thomas Schlich, Karl Weiss, André Dascal, Jeanna Haley, Jeremy Greene, Olivia Weisser
Front sitting: Andrea Tone, Kelly Holloway, Faith Wallis, Lawrence Rosenberg, Barbara Reney*

their health as well as the relationship they have with their healthcare provider. This empowerment is also the result of corporate business interests (Jenna Healey, PhD).

Disintermediation reflects the ongoing decentralization of the practitioner’s control and the patient’s empowerment resulting from the redistribution of access to technology and expert knowledge. Historical evidence revealed that patient control over their own health, their own perceptions of ailments and treatments, is not a new concept nor practice, as evidenced through personal journals dating as far back as the Middle Ages (Faith Wallis, PhD). Somewhere between then and now healthcare professionals

the ability of practitioners to see and establish treatments for more patients, better treatment outcomes due to easier self-treatment management by patient, which will lead to better distribution of resources to where they are needed to most needed to achieve optimal patient outcomes quickly and efficiently. ♦

Thomas Schlich, MD, PhD and Barbara Reney
MEd Technologist



FEEDBACK FROM ITC4 PARTICIPANTS

The symposium underscored the difficulty of disentangling definitions such as patients/customers/stakeholders within the current multiply-mediated medical-marketplace. Indeed, both physicians and patients can act as mediators and recipients of both portable technologies and specific therapeutic approaches according to specific marketing strategies. Furthermore, the physicians' central position within the network of care has been highly problematized providing a much needed long historical perspective beginning with the Middle Ages. This in turn resulted in a better understanding of the historical intermittency that characterizes the physicians' role as one of centrality, peripheral and even complete absence.

For future symposiums it would be highly beneficial to extend the perimeter of investigation to Global Health (something also mentioned by Professor T. Schlich during his closing remarks). A deeper focus on diverse healing environments together with a more tangible investigation on patients' active agency, will allow for a better understanding of those decisional mechanisms that ultimately could better define disintermediation, thus resulting in a further nuancing of the positions of both healers and patients.

Cosimo Calabro, PhD

This was a great event and should be promoted as a unique AI meeting in the medical world in Montreal. At the present time, there is nothing comparable and there is an ample opportunity to position this unique meeting as the annual medical meeting in AI in the province and based and centred at the JGH. The JGH can therefore become the beacon in this field.

To increase the audience significantly, we should get other organisations onboard; the fact that the CEO of the CHUM was present was a great initiative. We should also involve the FMSQ knowing that Diane Francoeur (the president) has an interest in this. The College of Physicians of Quebec should also be involved and we should have French sessions in the future.

I am sure that companies such as the Canadian branches of Apple, Google, electronic medical records companies, etc., and the Israeli consulate (as well as other countries should be participants: China, France, Germany) and obviously the US. There is here again a unique opportunity to have the JGH as the Central Player. Once, all these players are in place, the MSSS will jump on board not to be left on the sideline.

Karl Weiss, MD

This is the only inclusive forum I know of to tackle such relevant topics to health care service delivery. I think the main advantage of such a forum is the accessibility of the information - complex constructs are broken down into its component elements in a way that is easily understandable.

After attending only one day of this event, I learned a great deal about disruptive technologies, though I still struggle with whether or not they have made the impact they're intended to make. I also enjoyed the historical perspective (not a field that I know much about) in relation to how clinical interactions are still very similar at their core. It can maybe even be argued that technological advances have somewhat threatened the collaborative patient-physician relationship that seemed to be so ubiquitous in historical times.

I'm not sure if I grasp the full meaning of disintermediation in the context of healthcare - but I do think this event has sensitised me to the concept.

Rachi Khara, PhD

Our desired future state is to achieve interoperability of our information resources and fully integrate automation into our daily tasks in order to achieve our strategic goals and our mission. Improved patient outcome is of essence, and optimising the healthcare worker's time and use of his/her potential would greatly add to the recruitment and retention of our professionals. Value-added tasks allow the professionals to apply their strengths and demonstrate professionalism all within removing the tedious, low-satisfaction jobs and decreasing the frustration due to lack of accessible, accurate information.

Planning for implementation requires efficient coordination of work between humans and technology. Enterprises are seeing success not because they are replacing people, but because they are freeing up humans to innovate, to explore new opportunities and to improve efficiencies.

Offering a comprehensive digital health system to our staff and to our patients will greatly impact positively on the health outcomes, as well as work satisfaction, efficiency, health care costs, human resources need and/or work-related stress.

Eva Cohen, PhD

The greatest strength of the workshop was the variety of disciplinary perspectives, as well as the coverage in time period (which I found quite illuminating when considering how 'new' disintermediation might be). The workshop made me consider who exactly benefits from the promotion of 'disintermediation' and how the model of doctor-patient-healthcare leaves out a variety of other practitioners/forms of labor. It also forced me to consider the question - what exactly is a physician for? - especially at a time when the roles of patients and other care providers is shifting. It also made me think critically about the demographics of the 'empowered' patient, and who exactly gets to be empowered in a high-tech medical landscape.

Jenna Healey, PhD



► The biggest insight — although it came as no great surprise — is that disintermediation of some kind is not new but runs like a thread through the history of medicine. The importance of the early modern period for ‘disintermediation’ was not clear to me before this workshop. One question that the event occasioned for me is: must the history of medicine always be deflationary? What is the use of history as a ‘cooling down’ device when something fundamentally new is occurring?

Disintermediation, it turns out, is well illustrated by the history of medical objects and often these objects reflect specific interests. Thus advertising both for the objects and the changes they will supposedly occasion plays a significant role in our understandings of disintermediation. After the workshop the term disintermediation seemed more pernicious to me than it had previously, and it was clear that big economic players have a vested interest in influencing/controlling the power dynamics between physician and patient.

I think such workshops help shed light on present phenomena, deconstruct hype, and, by confronting different disciplinary viewpoints, make each other more aware of others’ expertise and (perhaps) better able to listen to each other. ♦

Vanessa Rampton, PhD

VIDEO PRESENTATIONS FOR ITC4 ‘MEDICINE WITHOUT DOCTORS? DISINTERMEDIATION & PATIENT AGENCY’

<https://youtu.be/QkElxGayJ5g>

Dr T Schlich & Dr L Rosenberg - ITC4-2019 -

Medicine Without Doctors? Introduction & Presentation

Title: *Disintermediation*

<https://youtu.be/6oqybtswNtl>

Faith Wallis, PhD - ITC4-2019 -

Title: *Doctors on the Borders: The Case of the Medieval Hospital*

<https://youtu.be/C33b4IWF8UI>

Olivia Weisser, PhD - ITC4-2019 -

Title: *Patient Agency and Gender in Pre-Modern Medicine in Pre-Modern Medicine*

<https://youtu.be/Yrwm842fV9Y>

Jenna Healey, PhD - ITC4-2019 -

Title: *Medicalization, Agency, and History of At-Home Pregnancy Tests*

<https://youtu.be/QoHvu3AWmxw>

Kelly Holloway, PhD - ITC4-2019 -

Title: *The Commercial Market in Non-Invasive Prenatal Screening and the Clinician as an Unstable Intermediary*

https://youtu.be/itEmHpeot_k

Kirsten Gardner, PhD - ITC4-2019 -

Title: *Diabetic Technologies: Choice, Adaptation, and Rejection*

<https://youtu.be/ipA69N8oh1M>

Yue Li, PhD - ITC4-2019

Title: *Clinical Recommendations by Means of Artificial Intelligence: The Example of MixEHR*

<https://youtu.be/rvfkLigZKTE>

Dr T Schlich & Dr L Rosenberg - ITC4-2019 -

Conclusion of Medicine Without Doctors? Wrap-up of the 2-day event, conclusions drawn from presentations and participant input, areas for future research

.....

"A hospital is a living organism, made up of many different parts having different functions, but all these must be in due proportion and relation to each other, and to the environment, to produce the desired general results. The stream of life which runs through it is incessantly changing; patients and nurses and doctors come and go, today it has to do with the results of an epidemic, tomorrow with those of an explosion or a fire, the reputation of its physicians or surgeons attracts those suffering from a particular form of disease, and as the one changes so do the others. Its work is never done; its equipment is never complete; it is always in need of new means of diagnosis, of new instruments and medicines; it is to try all things and hold fast to that which is good".

— John Shaw Billings
(1838-1913)

Address on the opening
of the Johns Hopkins Hospital,
May 7, 1889



ITC5 - 2020 - June 3 - 4, 2020

Technology and The Patient Consumer



The patient is increasingly defined as an active participant in the development of new technologies in medicine, often in the role of a consumer. This event will look at the role of both the patient consumer and the healthcare provider in driving this technological evolution to obtain optimal patient outcomes.

CALL FOR ABSTRACTS

MCGILL UNIVERSITY, MONTREAL, QUEBEC, CANADA

Recent work in the history of medicine has focused on both technology in medicine and patients as consumers. Schlich/Crenner (2017), for example, have looked at meanings and mechanisms of technological change in surgery, while Alex Mold (2015) and Nancy Tomes (2016) have explored major changes in how patients seek medical information and treatment in U.S. and British healthcare since the late nineteenth century. Such works demonstrate the broad variety of possibilities encompassed by the category of “patient consumer” and various ways of investigating technology in medicine. They also suggest a number of intersecting questions and approaches for historians of science, medicine, and technology.

This workshop aims to bring together these fields of inquiry to explore how patient consumers have influenced technology in medicine. It queries how patients have chosen between different diagnostic and therapeutic technologies (procedures, devices, substances, etc.), how they have rejected or appropriated them, and how they have prompted or supported their development and use from the late nineteenth century to the present. In addition to tracing regional and temporal variations, the workshop will consider how critical differences of race, class, gender, sexuality, age, and ability have shaped patients’ relationships to medical technologies and consumerism. Situating this history in the many places where patients appear—including, but not limited to, domestic and clinical spaces—we draw upon the broader tools available in the history of science, medicine, and technology, and science and technology studies.

Abstracts should be 300 words, with a title, name and institutional affiliation, include three keywords to describe your proposed paper. Presentations will be 25 minutes in length, with time for Q&A, over a two-day workshop in Montreal. Funding requests are in progress to help defray travel costs for national and international participating scholars.

Please send submissions with an updated CV to conf2020@mcgill.ca by November 1, 2019, 5:00pm, EST. We will reply by December 20, 2019. ♦





The Jewish General Hospital has long been known for being a centre of excellence and innovation. Over the past year, key members at our institutions have created a new paradigm in patient education using technological innovation to improve care. This is done to address a major concern.

Digital Patient Education at CIUSSS West Central Montreal

Canadian studies show that in clinical settings, patients forget up to 80% of the information related to them by the health care provider. And if this was not alarming, half of what they do remember is misremembered. Furthermore, patient education in today's format is expensive and inefficient because it stretches human resources, educators, nurses or doctors, and the printed media gets outdated quickly. In addition, language barriers remain a significant issue. Many Canadian hospitals are highlighting the shortcomings of patient education and lack of shared decision making leading to potential adverse events. Doctors, nurses, and allied health care providers at the Jewish General Hospital are working on innovative solutions to empower patients with information!

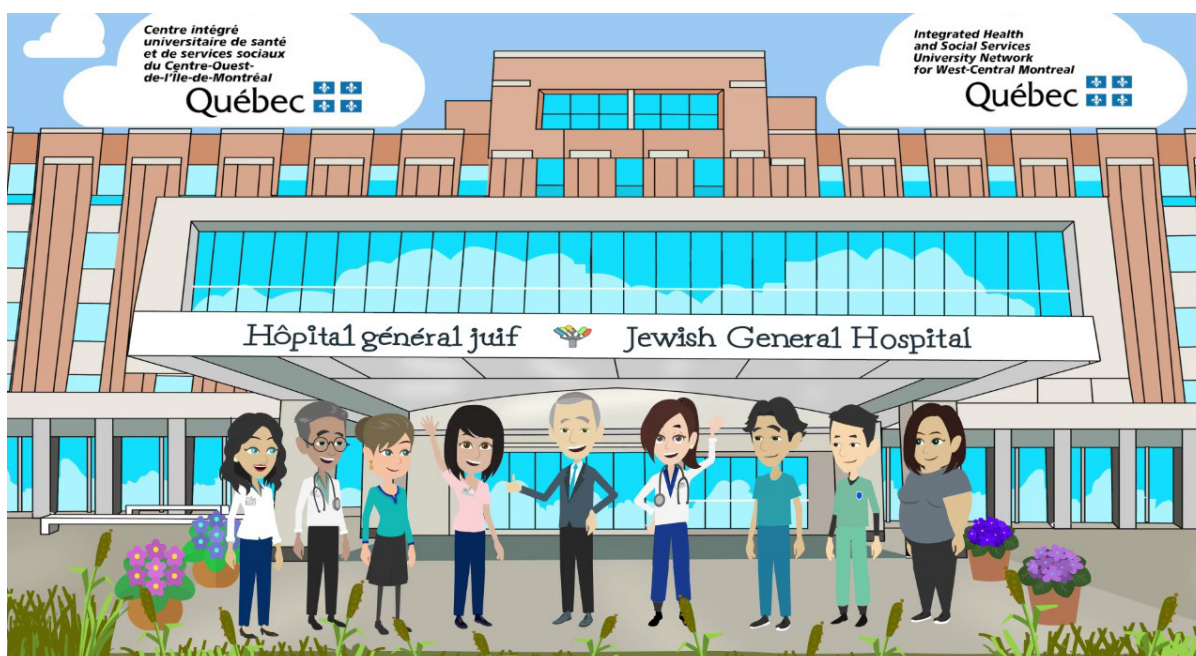
To address these issues, a new model in patient education was developed in collaboration with our CIUSSS. It is called Precare, and represents a free patient education platform providing evidence-based guides prepared by our healthcare staff, which are provided as animations (Smart Health Video™). It has been shown that

people retain up to 90% significantly more information when presented as simple, engaging audiovisuals in comparison to text. Each of the animated guides is provided in 20 common languages most spoken in Quebec and Canada, giving patients access to medical information in formats that are easy to understand, accommodating for a range of literacy levels, cultures, spoken languages, and modes of communication. In Quebec, the native language of over 1 million people is neither French nor English; in Canada, over 8 million Canadians have a non-official language as their mother tongue. Patient education programs rarely provide translated content, thus leaving a glaring gap in access to medical information for those patients whose mother tongue is not an official language. From a healthcare perspective at the JGH, we reduce the need for printed media and stretched human resources of specialized health care providers, while improving patient information retention and empowerment. The platform can create a feedback loop by engaging the patient and obtaining information (MDcisions™), that allows for more personalized and improved care, which further engages the patient. By optimizing the flow of information in our hospital, we hope to reduce complications and improve care.

Presently available animations can be previewed at www.precare.ca, including 25 surgical guides and 15 medical ones, ranging from pregnancy guides to oncology.

With this collaboration, the JGH has once more shown innovation and leadership with an impact way beyond the limits of the CIUSSS, thanks to the global and free access of the content over the Web. The work is being endorsed and shared by national medical societies and in partnership with the Canadian government's patient safety institute. ♦

Raphael Gottlieb, MSc
Experimental Surgery



C

bituary

By John Harries, MDCM

Carlos Medina, a native of Honduras, was a medical student and resident in the Department of Obstetrics and Gynecology at McGill University from 1960 to 1971. After studying medicine for 11 years in Montreal, he and his wife Esther returned to their home country of Honduras.

His entire professional career was devoted to improving the health care of the residents of this exceedingly poor country.

On returning home, Carlos joined the faculty of the Honduran Medical College. Shortly thereafter he was requested by the Nation's President to take responsibility for managing a new 500 bed Mother and Children Hospital in the capital city Tegucigalpa. Within a few years a second building was added making the total bed capacity 1200 under his administration. This became the University Hospital which established, for the first time, an institution in that country that facilitated the development of the four main specialties of medicine. This was a busy time for Carlos directing a huge medical complex, providing services in his private obstetrical practice, and serving as the volunteer Medical Director of the Peace Corps.

Carlos spent 42 years as Professor of Obstetrics and Gynecology at the University. During that time he established the School's Medical Journal and published 16 research papers one of which was presented at the FIGO Congress in Chile in 2004. Because he was recognized as an effective organizer of public services, he was asked to assemble the first environmental laws for his country and subsequently became the first ever Minister of the Environment for Honduras.

Carlos met his wife Esther, also from Honduras, while they were studying in Montreal. On returning home they both confronted the tradition, politics and bureaucracy which prevented improvements in the health care and other services available to the nation. One of Carlos' hobbies was writing a weekly editorial in the largest newspaper in the country. The content of these articles related to the social, political, and economic problems which challenged politicians to provide honest and effective government to the people of Honduras. Sensing the need for sports in the lives of children, he organized the Honduran National Swimming Federation and oversaw the funding and construction of the first Olympic swimming pool in the country.



Dr. Carlos Medina

Together, Carlos and Esther had a lifelong appreciation for the quality of education McGill had provided their family. All three of their children studied at, and graduated from, his alma mater. He was often quoted as saying that McGill taught him a love for freedom, the beauty of knowledge and, most of all, the need for equality of all people.

With his eyesight fading and advancing age he retired to the mountains of Copan where he organized area farmers in a collaborative effort to share the rewards of ownership of a coffee plantation and dairy farm. Carlos passed from this life, after an exceedingly productive career in medicine and public service, on February 3, 2017. ♦

**"Would you extend your narrow span,
And make the most of life you can;
Would you, when medicines cannot save,
Descend with ease into the grave;
Calmly retire, like evening light,
And cheerful bid the world goodnight?"**

—Nathaniel Cotton, 1705-1788
Visions in Verse, III "Health"



Tie one on for McGill !

*The McGill Department of Surgery invites you
to tie one on for the old school!*

*The McGill red silk tie and scarf with CREST,
SQUARE KNOT and FLEAM are available for purchase
from the Alumni Office as follows:*

McGill Dept. of Surgery Alumni, Montreal General Hospital
1650 Cedar Avenue, Room L9.420, Montreal (QC) H3G 1A4
Telephone: 514 934-1934, ext. 42028 Fax: 514 934-8418

PLEASE SEND ME THE MCGILL DEPARTMENT OF SURGERY TIE OR SCARF

Name		ORDER FORM	
Address		Tie \$50.00 Taxes are included	Qty _____ Sub Total \$ _____
		Scarf \$95.00 Taxes are included	Qty _____ Sub Total \$ _____
City	Province	Postage & handling add \$2.00 per item + \$ _____	
Country	Postal Code (ZIP)	Method of payment (please check one):	
Telephone		<input type="checkbox"/> Cheque <input type="checkbox"/> Money Order	Grand Total \$ _____

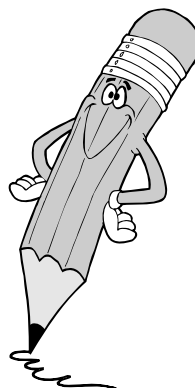
Harvey H. Sigman, MD, FRCSC
Editor

Ekaterina Lebedeva, MLIS
Assistant Editor

Ildiko Horvath, BA
*MGH-Medical Multimedia Services
Design & Layout*

*All photographs
courtesy of The McGill
Department of Surgery*

**We can't do it
without you !**



Write to us ! Send us your news !

**We want to hear from our readers !
If you have any information you want published in
THE SQUARE KNOT, comments about our newsletter
or suggestions, we want to hear from you!**

To contact the Editor:

Dr. Harvey H. Sigman • Editor • THE SQUARE KNOT • Jewish General Hospital
Pav A, A-500, 5750 Côte-des-Neiges, Montréal (Québec) Canada H3S 1Y9
Tel.: 514 340-8282, ext 24210 Fax: 514 340-7582
harvey.sigman@mcgill.ca

FOR SUBMISSIONS AND GENERAL QUESTIONS

KINDLY CONTACT US VIA OUR WEB SITE:
www.mcgill.ca/squareknot

OR BY E-MAIL:
mcgillsquareknot@gmail.com

Sponsors of the McGill Department of Surgery



Medtronic



OLYMPUS

STORZ
KARL STORZ ENDOSCOPY