

THE SQUARE KNOT





Department of Surgery

McGill University

NEWSLETTER

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CHAIR PASSES FROM J.L. MEAKINS TO D.S. MULDER



Dr. Jonathan L. Meakins

On June 1st of this year, Dr. Jonathan L. Meakins will hand over the Chairmanship of the McGill Department of Surgery to Dr. David Mulder. Dr. Meakins succeeded Dr. Lloyd MacLean to the Chair and as Surgeon-in-Chief at the Royal Victoria Hospital in 1988.

As Chairman, Dr. Meakins strove to integrate the McGill Department of

Surgery and promoted greater cooperation among the McGill teaching hospitals. He established a university Division of General Surgery, furthered the causes of transplantation surgery, laparoscopic surgery and surgery of the head and neck and created the forward planning task force. He also expanded the activities of Fraser Gurd Day, established the Lloyd D. MacLean Visiting Professorship, introduced the McGill Department of Surgery tie and scarf and instituted the SQUARE KNOT.



Dr. David S. Mulder

The Chairmanship is an onerous task. Aside from general administrative duties, the Chairman oversees the academic aspects of the care of patients, the training of residents and students, research activities and appointments and promotions of faculty.

Currently, the Executive Committee of the Department of Surgery, chaired by Dr. Meakins, is comprised of Drs. David Mulder, Max Aebi, Ray Chiu, Mostafa Elhilali, Bruce Williams, Gerald Fried, E.D. Monaghan and Madeleine Beaulne, Secretary of the Committee.

Dr. Mulder is familiar with the demands of the position as he was Chairman of the Department of Surgery in the past, from 1982 to 1987. He intends to further productive cooperation among hospitals, establish a university office for the department independent of hospitals, and consolidate and expand the department's research activities.

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1993 Fraser Gurd Visiting Professor Dr. Ward O. Griffen, Jr. May 27, 1993

On May 27, Dr. Ward O. Griffen, Jr. will visit McGill as the Department of Surgery Fraser Gurd Visiting Professor.

Dr. Griffen took his undergraduate education at Princeton University and graduated from Cornell University Medical College in 1953. He did his surgical internship at the Bellevue Hospital in New York. His subsequent residency in Surgery with Dr. Owen Wangensteen at the University of Minnesota was interrupted by two years of service in the United States Navy.

Dr. Griffen was on the staff of the University of Minnesota from 1962 to 1965 then went on to the University of Kentucky where he was Chairman of the Department of Surgery from 1967-1984. Having always been interested in the education of surgeons, in 1984 he became Executive Director of the American Board of Surgery. He is recognized as an outstanding leader, both as a clinician and as a surgical scientist.

Dr. Griffen will be most welcome at McGill. On Thursday, May 27, he will give Surgical Grand Rounds at both the Montreal General and the Royal Victoria Hospitals as well as preside at the Resident Research Seminars which will take place in the Osler Amphitheatre at the MGH from 09:00-15:30. The Fraser Gurd Day banquet, held in the Oval Room of the Ritz-Carlton Hotel, is fast becoming a tradition with both residents and staff.

Dr. Griffen's predecessors as Fraser Gurd Visiting Professors are: Dr. Richard J. Finley, 1990

Dr. Donald S. Coffey, 1991

Dr. J. Alex Haller, Jr., 1992

This professorial visit is named after Dr. Fraser Gurd, one of North America's leading surgeons, who graduated from the Faculty of Medicine at McGill in 1939. Dr. Gurd is presently Emeritus Professor of Surgery at McGill.

Thank you to Davis + Geck for once again sponsoring the event and to the sponsors of the McGill Department of Surgery — Ethicon Endo-Surgery and Merck Frosst. ■

General Surgery Visiting Professor Dr. Arthur Aufses February 1993

Dr. Arthur Aufses, at the invitation of Dr. Marvin Wexler, visited the McGill University Division of General Surgery February 3-4, 1993. Dr. Aufses is a world authority on Crohn's disease and inflammatory disease in general.

Dr. Aufses has been Chairman of the Department of Surgery of the Mount Sinai Medical Center in New York City since

1974 and holds the Surgery Chair at the Mount Sinai School of Medicine. He earned his medical degree from Columbia University and served his residency at Presbyterian Hospital. He is a member and Fellow of numerous medical organizations. He is Past President of the Association of Program Directors in Surgery and Past President of the American College of Gastroenterology. He recently completed terms as Secretary of the Board of Governors of the American College of Surgeons and now serves a a member of its Advisory Council for Surgery. In addition, he has been Vice President and Chairman of the Program Committee of the Society for Surgery of the Alimentary Tract.

Dr. Aufses arrived in time to spend Wednesday Protected Teaching Time with the junior and senior residents where a wide range of topics were covered including: inflammatory bowel disease, working hours for residents, and life and practice of surgery in New York. In addition he attended Morbidity and Mortality Rounds, heard Case Presentations by the residents and participated in ICU Rounds. However, the highlight of his visit was an address at Surgical Grand Rounds at the Montreal General Hospital entitled 60 years of surgery for Crohn's disease. Dr. Aufses was a close associate of Dr. Crohn and has inherited all of the original patients, manuscripts and memorabilia from the time the disease was initially described. His address was a masterful blend of history, personality and science.

Rendez-vous in Pediatric Urology February 1993

The Montreal Children's Hospital and Hôpital Sainte-Justine 3rd Annual Rendez-Vous in Pediatric Urology took place February 4-5, 1993. Organized by Dr. Yves L. Homsy and Dr. Anne-Marie Houle, the theme was "Evaluation and Management of Neonatal Hydronephrosis."

Dr. Robert M. Weiss, Professor and Chairman, Department of Urology, Yale University and Dr. Max Maizels, Associate Professor of Urology, Northwestern University, Chicago were the invited speakers. The meeting was well attended by pediatric urologists, pediatric radiologists and nuclear medicine specialists from both hospitals as well as residents and fellows from all four Quebec medical schools. A multicentre protocol for the prospective study of neonatal hydronephrosis is being implemented.

Rendez-Vous in Pediatric Urology was supported by a grant from Procter & Gamble Pharmaceuticals Canada Inc.

Yves L. Homsy, M.D. Pediatric Urology Montreal Children's Hospital THE SQUARE KNOT



Dr. Edward J. Tabah

The Edward J. Tabah Visiting Professor in Surgical Oncology

Dr. John M. Loré, Jr. was the second Edward J. Tabah Visiting Professor in Surgical Oncology at McGill University on March 10-12, 1993. His visit was sponsored by the Cedars Cancer Institute which was founded by Dr. Tabah who has served as Chairman of its Medical

Advisory Committee with dedication and devotion for the past 27 years.

Dr. Loré is an outstanding clinical surgeon with broad experience in surgery of the head and neck. At one time he was Dr. Tabah's resident in New York. In 1962, he published "An Atlas of Head and Neck Surgery"; it is now in its third edition and considered a modern classic in surgical oncology.



Dr. John M. Loré

On March 10, Dr.

Loré gave Oncology Grand Rounds on Adjuvant chemotherapy in advanced head and neck carcinoma. On the morning of March 11, he spoke at Surgical Grand Rounds at the MGH on Superior mediastinal surgery.

Later that day, his topic at Surgical Grand Rounds at the RVH was Diagnosis and management of well-differentiated carcinoma of the thyroid. Dr. Loré related his experience with 700 thyroidectomies. In this series, he has had only two severed recurrent laryngeal nerves. His advice is to identify the RLN at the superior thoracic inlet and then follow it by dissection in a caudo-cephalad direction. The inferior thyroid artery is not a landmark for the RLN. There are approximately 25 variations in its anatomy; however, a common feature is that it ducks behind the posterior suspensory ligament. Generally speaking, the inferior parathyroid is superficial to the RLN and the superior parathyroid is deep to the RLN. He avowed that there is no function after any attempt at reanastomosis of the RLN.

Regarding the external branch of the superior laryngeal nerve, he has only seen it in about 10% of the cases. It is important

to ligate the superior pole vessels very close to the thyroid lobe parenchyma so as not to damage the SLN as it enters the cricothyroideus. Using a low amperage probe, one can stimulate the nerve so as to cause a spasm of the cricothyroideus.

Postoperatively he always has a look at the larynx. As an aggressive surgeon in the treatment of well differentiated carcinoma of the thyroid gland, he enunciated the following five principles:

- 1) Remove all thyroid tissue including the pyramidal lobe
- 2) Administer I¹³¹ for non resectable tissue
- 3) If at all possible, remove any anaplastic tissue
- 4) Remove the lymph nodes
- 5) Try to avoid the administration of I¹³¹

During his visit to McGill, Dr. Loré had the opportunity to confer with both Dr. Brian Leyland-Jones, Chairman, Department of Oncology, and Dr. Martin Black, Director of the Program in Head-and-Neck Surgery and Oncology.

Radiation Therapy Visits Surgery

In recent months, the Department of Surgery benefitted from three excellent presentations from the world of Radiation Oncology.

On January 28, Dr. Bruce Minsky of the Memorial Hospital for Cancer and Allied Diseases in New York gave a presentation on *Pre-operative and post-operative radiation therapy for adenocarcinoma of the rectum*. He also discussed the radiation treatment of epidermoid carcinoma of the anus along with adjuvant therapy with five FU and Mitomycin C.

On March 3, Dr. David Donath discussed *Radiation therapy* for carcinoma of the thoracic esophagus at Oncology Rounds at the RVH. Dr. André Duranceau, thoracic surgeon at Hôtel-Dieu de Montréal, was also an invited speaker at this seminar.

On March 18, Dr. Lou Harrison, Chief of the Brachytherapy Service at the Memorial Sloan-Kettering Cancer Center in New York, spoke on the *Innovative approaches to intraoperative radiotherapy*. They have an operating room in the radiation therapy suite and have worked out a very ingenious method of delivering intraoperative radiation therapy. Because it is so awkward to administer intraoperative radiation therapy with a linear accelerator, they developed a high dose rate remote after-loader. This machine renders I.O.R.T. to the area during surgery whilst all the surgical and anesthesia staff are out of the operating theatre. The anesthetist, therefore, has to monitor the patient by remote control. A video camera in the overhead lamp permits them to keep a constant eye on the operating room!



KUDOS

Dr. A.R.C. Dobell visited Taiwan March 23-April 1, 1993. He was visiting professor at the Tri-Service General Hospital at Taipei as well as invited lecturer at the Surgical Association of the Republic of China (Taiwan).

Dr. David Fleiszer has just completed one year in charge of the Montreal General Hospital Diagnostic Breast Clinic. As a result of his endeavours, the charting system is completely computerized and this has resulted in a fine database suitable for research projects. David is also the Assistant Dean responsible for Medical Informatics. He is working with the Undergraduate and Postgraduate Deans in the planning of new curricula for 1994. Dr. Fleiszer has been appointed Program Director for the 1993 Royal College meeting in September by the Trauma Association of Canada (TAC).

Dr. Gerald Fried has been very busy in a number of areas. He has completed a chapter on *Technique of Laparoscopic Cholecystectomy* that will be published in Scientific American - Care of the Surgical Patient. He has also submitted, on behalf of the McGill Laparoscopic Surgery Group, an abstract to the Society of Surgery for the Alimentary Tract entitled *Determinants of conversion in laparoscopic cholecystectomy*.

Dr. Fried will be Chairman of the Program Committee for CAGS annual meeting, September 1994. He has been elected to membership in the Society of University Surgeons and is currently working on his third SESAP Committee of the American College of Surgeons for 1996-97. He will also be chairing a meeting of the Canadian Association of General Surgeons Residency Research Conference to be held in Banff June 17-19. This annual conference invites top resident researchers in General Surgery.

Here at home, as the McGill General Surgery Program Director, he organized, with the help of Drs. Harvey Sigman and Carl Nohr, a laboratory in surgical techniques at the JGH last March. A second such laboratory was held in April.

Dr. Carolyn Kerrigan was promoted to Full Professor of Surgery as of February, 1993. Head of the Division of Plastic Surgery at the RVH and a respected teacher, she runs a productive lab and is known for her microsurgical skills and efficiency and effectiveness as an administrator. Her fourth son, Samuel, was born last November.

Dr. David A. Latter was appointed Director of the C.V.T. Research Laboratory at the Royal Victoria Hospital effective March 1, 1993. In operation since 1962, the laboratory has been the site of extensive research on myocardial perfusion, heart and heart-lung transplantation, and, more recently, atherogenesis. The laboratory was originally the

responsibility of Dr. A.R.C. Dobell, then Dr. James F. Symes. With surgical research fellows, Dr. Latter intends to pursue investigations on atherosclerosis development as well as on myocardial protection for heart transplantation.

Dr. Jonathan L. Meakins has been very active during April and May. He was Visiting Professor to the Department of Surgery at Wright State in Dayton, Ohio where he also gave the David and Helen Bernie Lecture. He was the Professor Pro Tempore at Harvard and Francis D. Moore Visiting Professor at Brigham and Women's Hospital in Boston. He also gave the Excelsior Surgical Society/Edward Churchill Lecture at the American College of Surgeons Spring Meeting on Determinants of infection: Sepsis in the surgical patient. In May he visited the Department of Surgery at the University of Toronto as the Gordon Murray Lecturer and Gallie Day Visiting Professor and in Washington he gave the Distinguished Professor Lecture to the Uniformed Services University of the Health Sciences.

Dr. Jean E. Morin received the title of Knight of the Sovereign Military Order of St. John of Jerusalem, otherwise known at the Knights of Malta. Dr. Morin was one of two members of the McGill staff elected to this singular honour, along with Dr. Sylvia Cruess who was titled Dame Commander.

Dr. David Mulder discussed video-assisted thoracoscopic surgical procedures at Surgical Grand Rounds at the RVH in April. He related his experiences during his sabbatical last summer when he visited the United Kingdom, Germany and France.

Dr. Lawrence Rosenberg's activities fall into the traditional areas of research, patient care and education.

The Pancreas Research Group under his direction has received major funding from the Medical Research Council of Canada. The PRG has recently presented scientific papers at the following meetings: the American Pancreatic Assocation, the Society of University Surgeons, the Cell Transplantation Group and the International Pancreas Iowa Transplant Congress. As well, Dr. Rosenberg was guest speaker at the Japan Surgical Society and a Visiting Professor at Sendai University in April.

With regards to patient care, he formed the Montreal General Pancreatic Diseases Centre which has been functioning as an independent clinic since October 1992. Further, his group has received funding to carry out the first clinical study on the efffectiveness of enzyme therapy in the treatment of pain associated with chronic pancreatitis.

In the area of education, Dr. Rosenberg has received a major equipment grant from the Apple Education Foundation to set up two multi-media laboratories at the MGH, one in the Department of Surgery and one in the Audiovisual Department. This will be used to develop a product called "Odyssey", an interactive multi-media atlas of operative surgery which will also include the history of surgery.

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Dr. Henry Shibata was appointed Director of Oncology Services at the Royal Victoria Hospital effective January 1, 1993. In this role, he co-ordinates all cancer related services in the hospital to optimize the care of patients with cancer and the teaching of oncology to medical students and residents.

Dr. Jean Tchervenkov is the recipient of a FRSQ Chercheurboursier clinicien "Junior 2" award for a period of three years.

Dr. Marvin Wexler discussed *Trans-jugular intrahepatic* portosystemic shunts (TIPS) as Visiting Professor at a course given at the University of Saskatchewan in Saskatoon in May. He has been appointed to the Editorial Board of the American Journal of Laparo-Endoscopy.

Dr. Bruce Williams has just received the Distinguished Service Award from his alma mater, Acadia University in New Glasgow, N.S.

Congratulations to **Drs. Carl Nohr** (General Surgery, RVH), **Christo Tchervenkov** (C.V.T., MCHC) and Orest Blaschuk (Urology Research Laboratories, RVH) who have been promoted to Associate Professor with Tenure.

The Department of Oncology at McGill has given joint appointments to the following members of the Department of Surgery: Drs. Michel Bazinet, Mostafa Elhilali, Philip Gordon, Antoine Loutfi, Catherine Milne, Hani Shennib, Roger Tabah, Judith Trudel, Carol-Ann Vasilevsky and Marvin Wexler. The criteria for the appointments were a definable academic commitment on the part of the candidate to the field of oncology as demonstrated by research and other academic activities, peer-reviewed funding, publications and career path and, additionally, a willingness to actively contribute to the academic life of the Department with regard to teaching, collaborative research and administrative duties.

McGill Gallstone Treatment Group

The advent of laparoscopic surgery has brought about the assessment of new approaches to the gallbladder and the bile duct. The McGill Gallstone Treatment Group, comprised of general surgeons, gastroenterologists, radiologists and epidemiologists from the Royal Victoria, Montreal General, Queen Elizabeth and Jewish General Hospitals, has accomplished much in this area recently. It is a good example of how concerted effort across McGill can lead to impressive results. Two papers have recently been published by the group: one in The Lancet in October, 1992 and the second in the April issue of the American Journal of Surgery. A third will be published in the Annals of Surgery this coming September. Dr. Jeffrey Barkun is first author on all three papers. Along with this, Dr. Barkun has made two keynote presentations: at the NIH Consensus Conference on Gallstone Diseases and most recently at the American Surgical Association.



Dr. Gitte Jensen joined the staff of McGill and the Royal Victoria Hospital as a basic scientist in January 1993. She came to us from the University of Alberta where she had been on a postdoctoral research fellowship. An immunologist who obtained her Ph.D. at the University of Aarhus in Denmark (1986), she has established a lab at the RVH where she will pursue her own research on B-cell lymphoma and collaborate with Drs. Nicolas Christou and Julius Gordon in the study of anergy.

Dr. Ronald Lett (Alberta '76) has joined the General Surgery staff at the Queen Elizabeth Hospital. Since completing his residency at the University of Alberta, Dr. Lett has worked in Nigeria, Cameroon and British Columbia. While working on his Masters degree in Epidemiology and Biostatistics (in Trauma) at McGill over the past two years, Dr. Lett was involved in the teaching of medical students rotating in Surgery. He is also interested in International Health and has just obtained a grant from CIDA to go to Ethiopia where he will work on the development of a surgical curriculum for Ethiopian general practitioners.



ACHIEVEMENTS Residents and Fellows

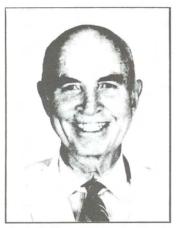
Patrick Ergina (C.V.T.) and wife Susan are the proud parents of a second child, Sophia.

Julio Faria (General Surgery) was awarded the 1992 Lederle Surgical Fellowship in Colorectal Surgery Research at the last meeting of the Royal College. This fellowship is granted in association with the Canadian Association of General Surgeons. Working with Dr. Judith Trudel of the MGH, Julio's research focuses on hormonal manipulations of colon cancer.

Maria Li of the McGill Neurosurgical Program was the winner of the clinical prize for original research-in-training at the Royal College meeting. This prize is sponsored by Merck Frosst. The title of her winning presentation was Non penetrating carotid trauma - 5 cases and review of 100 cases in the world literature.

Peter Metrakos (General Surgery), along with S. Yuan, D. Agapitos and L. Rosenberg, presented a paper entitled Intercellular communication and maintenance of islet cell mass-potential implications for islet cell transplantation at the February meeting of the Society of University Surgeons held in Seattle, Washington.

Dr. L.G. Hampson retires



Dr. L.G. Hampson

Born in Ottawa, Ontario in 1923, Dr. Lawrence Garth Hampson attended Forest Hill High School in Toronto and St. Andrew's College in Aurora, Ontario. Upon completion of his premedical education at McGill in 1942, he enlisted in the Royal Canadian Navy and served as a lieutenant (navigator) from 1942 to 1945. He served on a Corvette in the North Atlantic providing escort for convoys of ships sailing

from North America to Europe. He returned to McGill after the war and graduated in Medicine in 1949. He began his residency training in the McGill Diploma Program and was one of the first of a new breed of specially trained academic surgeons. He spent a full year as a research fellow in the Division of Experimental Surgery and went to the Lahey Clinic in Boston for a year as a surgical fellow. This was an exciting time in surgery and Dr. Hampson came to know the greats of technical surgery of this era such as Drs. Frank Lahey and Richard Cattell. After completing his residency in 1955, he was appointed to the staff of McGill and the Montreal General Hospital.

Dr. Hampson has influenced generations of surgical residents and fellows, setting a very high standard of excellence in clinical care. He has always been very active in research, both in the laboratory and as a clinical investigator. He provided an excellent role model of what an academic surgeon should be. He was appointed Full Professor of Surgery in 1975. At the MGH he functioned as Director of the 9 East Surgical Service and was the Surgeon-in-charge of the General Surgical Tumor Board.

Dr. Hampson has been a very active supporter of a number of prestigious surgical associations, particularly the Central Surgical and the American Surgical. He has had special interest and expertise in the surgery of portal hypertension, the biliary tract and cancer of the colon. His major contribution, however, has been the tremendous positive influence he has had on the young people who have had the good fortune to train with him. Many of us owe him a debt which will be impossible to repay.

L.G. HAMPSON CLINICAL SURGICAL DAY

A Clinical Day was held on May 13 in honour of Dr. Lawrence Garth Hampson who will retire this summer as Professor of Surgery at McGill and from the staff of the Montreal General Hospital. Many of Dr. Hampson's former colleagues came from far and wide to honour him and present at the Clinical Day.

The Montreal General Hospital Council of Physicians and Dentists sponsored a reception for Dr. and Mrs. Hampson in the Livingston Hall Lounge. Many current colleagues in nursing and medicine came by to visit with the Hampsons.

More than 125 friends gathered for a dinner at the Mount Stephen Club at which Dr. David Mulder was the master of ceremonies. Colleagues in the Department of Surgery presented Dr. Hampson with a portrait to be hung in the 9th floor Livingston Hall Conference Room. Dr. Jack Pickleman closed the evening with a tribute to McGill University.

Presentations:

History of surgery in the Province of Quebec - Dr. M. Rhéault Pancreatic adventures - Dr. L. Rosenberg

Posterior myotomy in the treatment of functional constipation in children - Dr. M. Alawadhi (Bahrain)

Bedside determination of left atrial pressures: Pulmonary 'wedge' revisited - Dr. G. Fitzpatrick (Boston)

Total pelvic exenteration - a 50 year experience - Dr. M. Lopez (Boston)

OSCE in the training of surgical residents - Dr. D. Sloan (Lexington)

Use of left atrial pressures in monitoring critically ill surgical patients - Dr. P. Toussaignant (Maine)

The pathophysiology of aspiration pneumonitis - Dr. R. Lewis Surgery in the 'North' - Dr. D. Mutch (Val d'Or)

Rectal cancer - Is surgery enough in Duke's B + C carcinoma? - Dr. J.K. MacFarlane (Vancouver)

Does transfusion therapy increase oxygen consumption in elderly critically ill septic patients? - Dr. J.R. Marti (New York)

The function of an artificial ileo-cecal valve - Dr. Shirley Chou (Ottawa)

Acute cholecystitis - Dr. E.J. Hinchey Surprise - Dr. H. Klein (Sacramento)

DR. JACK PICKLEMAN GIVES ROUNDS

Dr. Jack Pickleman of Chicago and his wife Brenda visited McGill on the occasion of Dr. Hampson's retirement. Dr. Pickleman was invited to give Surgical Grand Rounds at the MGH on *Controversies in small bowel obstruction*. He also gave Rounds at the RVH on *Psychoneurological testing of surgical residents*.

Dr. Pickleman graduated from McGill in 1964 and interned in surgery at the RVH from 1964-1965. After serving in the United States Coast Guard, he did his residency in surgery at the University of Chicago Hospitals from 1967-1972. Currently, he is Professor of Surgery and Chief of the Division of General Surgery at the Loyola University Stritch School of Medicine. He has just stepped down after one year as President of the Central Surgical Association. Jack gained some fame as Project Director of the American College of Surgeons Surgical Education Self-Assessment Program (SESAP).

Les C.H.U.'S, les C.A.U.'S, les C.H.A.R.'S, les C.H.A.'S

For years now, the Quebec Government has had as a major social objective the equitable distribution of family physicians and specialists throughout the province. Its decrees have reflected this mission. For example, there have been contractual residency positions. In this category, trainees must, upon completion of their training, spend four years in a remote region. There have been incentive clauses so that family physicians can bill 115% to the Régie when they settle in a non-university area to practice; likewise, a specialist may bill 120%. There have been disincentive clauses so that a physician settling to practice in an urban university area (Centre Hospitalier Universitaire - C.H.U or Centre Affilié Universitaire - C.A.U.) can only bill 70% of his or her fees. Further, international medical graduates, when allowed to practice in the province after examination and training, must spend four years in a non-university area. These "politiques" have been moderately successful.

Recently, however, the Ministry of Health and Social Affairs has mandated the Faculties of Medicine to do more. Each medical school in Quebec is to develop at least one C.H.A.R. (Centre Hospitalier Affilié Régional). For McGill, a liaison has been set up with the Centre Hospitalier Régional de l'Outaouais in Hull. Each Faculty of Medicine has been charged with the task of sending a number of residents for rotations to this "twin". The specialties involved are General Surgery, Internal Medicine, Pediatrics, Anesthesia, Psychiatry and Obstetrics/Gynecology. Family Medicine residents are also involved in this plan but the latter have already been sent to non-university areas for training for some time now, most of them to Centres Hospitaliers Affiliés (C.H.A.).

The Conference of Deans has recommended that we therefore send our residents a minimum of two months to a maximum of six months. Deliberations are ongoing with the M.E.S.S. (Ministère de l'Education Supérieure et de la Science). It is the government's hypothesis that if trainees spend more time in Community Health Regions they will be more prone to settle outside the university areas. For General Surgery, it appears that senior residents will spend one or two three-month periods there.

Though deliberations are still going on, as we go to print the following designations seem likely: the RVH, the MCH and the JGH will be C.H.U.'s. The Montreal Children's Hospital will also likely become a C.H.U. The Douglas and the Montreal Neurological will be I.U.'s (Institution Universitaire). St. Mary's and the Queen Elizabeth Hospitals will be C.A.U.'s.

E.D. Monaghan, M.D.

Dr. L.D. MacLean hosts American Surgical Association in Montreal

On Saturday, January 9, 1993, the American Surgical Association met in Montreal. That evening, Dr. Lloyd MacLean presided as host at the Presidential Dinner at the Four Seasons Hotel. The Officers of the Association present were Drs. Keith Reemtsma, Rainey Williams, George Sheldon, Lazar Greenfield, Clyde Barker, John Mannick, Robert Zeppa and James C. Thompson.

The atmosphere was congenial at the pre-dinner reception at the oyster and shrimp bar. Renewing acquaintances were Drs. Henry Bahnson, Gerald Austen, J. Bradley Aust, Harlan Root, Edward Mason and Ronald Baird. Dr. Marvin Wexler chatted with Dr. Arthur Aufses and Drs. Anthony Dobell and David Latter welcomed Dr. Norman Shumway of Stanford who had been best man at Dr. MacLean's wedding. Dr. Ray Chiu paid his respects to his former boss, Dr. Clarence Dennis, and Dr. Malcolm Veidenheimer related his past experiences in Canada. Dr. George Block and Dr. Jerome DeCosse were chatting with Drs. Barb Mueller, Francis Moore and Claude Welch. Dr. Harry Shizgal sat at the same table with Drs. Edward Woodward and Frank Moodey. Also present were Drs. Samuel Wells, Frank C. Spencer, Ralph Straffon, Murray Brennan, John Cameron, Louis Del Guercio, Josh Jurkiewicz and George Jordan, Jr.

Dr. MacLean related some humorous anecdotes between courses and enjoying the comradeship were Seymour Schwartz, Richard Egdahl, Wilbert Keon, Bernard Langer, Hirman Pol, Basil Pruitt, Jr., William Drucker, Isidore Cohn, David Sabiston, George Johnson, Jr., John Madden, Ronald Malt, Lasalle Leffall, John Braasch, John Burke, Robert Hermann, Griff Pearson, Marshall Orloff, Lloyd Nyhus, Marcel Rheault, Paul Russell, Benjamin Rush, Jr., Felicien Steichen, James Thompson, Donald Trunkey, William Blakemore and Jeremiah Turcotte.

Also in attendance were McGill alumni: Drs. Jonathan L. Meakins, Balfour Mount, Ed Monaghan, Bernard Perey, Lawrence Hampson, John Hinchey, Rocke Robertson, Alan Thompson, David Mulder, Rea Brown, Nathan Sheiner, Bruce Williams, John Gutelius, Robert Macbeth, Henry Shibata and Peter McLean.

The keynote speech was given by our Dean, Dr. Richard Cruess, who spoke on *The Effects of Government on McGill University's Academic Life*.

A great deal of time and energy went into organizing the meeting and dinner, as evidenced by the phenomenal success of the event. It is a credit to Dr. MacLean that so many luminaries came from all over North America to attend on such a cold January day. In all, one hundred and six surgeons from Canada and the United States were present at the dinner.

Quebec Association of **General Surgeons**

In the April issue of the SCALPEL, Dr. Grégoire Bégin of Gatineau bemoans the plight of General Surgery in the Province of Quebec. It is expected that by 1996 there will be a severe shortage of general surgeons which will last from 5-10 years, despite the recent increase in the number of residency posts in the four faculties of medicine. Currently, there is an immediate requirement for 26 additional general surgeons throughout the province but only five hospitals are able to recruit for the following reasons:

- · lack of beds
- · lack of material resources
- · lack of O.R. time
- · lack of anesthetists

Conditions are not conducive to the recruitment of young graduates into our training programs in Surgery: long hours, frequent night calls and the poorest remuneration of all the surgical specialties.

There seems to be a paradox in ministerial policies. On the one hand, there is an increase in the number of posts given to surgery but there is not a parallel increase in posts for anesthesia!

The President of the Q.A.G.S., Dr. Michel Talbot, collated some interesting data from the results of a special survey. Twenty-seven general surgeons over the age of 75 are still in active practice. Twenty percent of the general surgeons (108) are over the age of 65 and 33% (178) over 60.

General practitioners have an annual ceiling of \$185,000 whereas 68% (374) of surgeons earn less than that. The average gross revenue of 473 surgeons in the Province of Quebec is \$170,508 (revenues inferior to \$45,000 per annum are excluded).

In the same issue of the SCALPEL, Dr. Steve Morgan argues the case for general surgeons. He pleads that the Federation of Medical Specialists of Quebec obtain a fairer deal from the Ministry.

E.D. Monaghan, M.D.

The Meeting for **General Surgeons - ACS** Montreal, April 25-28, 1993

The 21st Annual Spring Meeting of the American College of Surgeons was held at the Queen Elizabeth Hotel, April 25-28. It was sponsored by the Advisory Council for Surgery and dedicated to the practice of general surgery. Seven McGill surgeons were on the programs which were all rather well attended.

Jonathan L. Meakins gave the Excelsior Surgical Society/Edward D. Churchill Lecture Determinants of Infection/Sepsis in the Surgical Patient. He was introduced by Lloyd D. MacLean who informed the Square Knot that this formal lecture had been very well received indeed.

Marvin J. Wexler not only chaired a Panel Discussion on the Surgery of Hernia in 1993 but also presented a paper entitled Laparoscopic Transabdominal Preperitoneal Repair (TAPP). The room was packed indicating the current interest in the various herniorraphies available.

Richard G. Margolese presented an excellent paper on The Role of Primary Surgery in Invasive and Non-Invasive Breast Cancer.

Gerald M. Fried outlined the Canadian Experience in the education of surgical housestaff and medical students.

An entire day was given over to a special course on Trauma. David Fleiszer discussed the Diagnosis and Treatment of Blunt Hollow Viscus Injuries. He and David S. Mulder were members of an expert panel which presented difficult cases and an overview of New Frontiers in Trauma Care. They were accompanied by David Feliciano of Atlanta, Donald Trunkey of Portland, Steven Shackford of Burlington and Ernest Moore of Denver.

David Mulder discussed the Initial Priorities and Decision Making in Multiple Trauma and, in another session, outlined Difficult Airway Management. He was given a difficult case by William Schwab in which he had to manage a stab wound in the neck which lacerated the right innominate artery.

Trainees Entering Surgical Programs 1993-1994

GENERAL SURGERY:

Abdulwahab Al-Jubab * Abdullah Al-Namlah * Vinay Badhwar Muna Baslaim * Jody Bothwell Carlos Cordoba Liane Feldman Brett Ferdinand Kent MacKenzie Laurie Morrison Abdulelah Murshid *

Tarek Razek

GENERAL SURGERY cont'd:

Wadi bin Saddig * Eirik Svennevik Kayvan Taghipour-Khiaba Stephen Tahta

OTOLARYNGOLOGY:

Ahmed Al-Ammar Ashraf Al-Benavan Mohammed Elhai Erin Wright

Saverio La Francesca

ORTHOPEDIC SURGERY:

Khalid Al-Quwayee * Abdullah Baslaim * Wojiech Bulczynski Jennifer Fletcher

Paul Manner (Shriners Fellow) Rudolf Reindl Gonzalo Valdivia

UROLOGY:

Ahmed Mohamed Al-Kandari Roman Jednak Wei Zheng

NEUROSURGERY

Kamal Balkhovor * William Choi Gordon Chu Raquel Dureza (R2) Caroline Joly

CORE PROGRAM FOR SURGERY IN GENERAL: 33 TRAINEES IN 1993-94

^{*} Trainees from Saudi Arabia

McGill Prominent at Meeting of American Surgical Association

Dr. Lloyd MacLean presided both the scientific sessions and the social events at the 113th Annual Meeting of the American Surgical Association held in Baltimore, Maryland April 1-3, 1993.

Introduced by Dr. Keith Reemtsma, Dr. MacLean compared the health care systems of Canada and the United States in his Presidential Address entitled Health care delivery and the training of surgeons. Dr. MacLean concluded "From my perspective as a surgeon, I envision an ideal system which would cover all citizens, would maintain choice of surgeon by patients, would provide mechanisms for cost containment with active and continuous participation of the medical profession, and would provide for research and development. Any alteration in health care delivery in the United States that compromises biomedical research and development will be a retrogressive, expensive step that could adversely affect health of nations everywhere. Finally, a continuing priority of our training programs must be to ensure that the surgeon participating in this system continues to treat each patient as an individual with concern for his or her own needs."

Professor Witold Rybczynski was Dr. MacLean's guest speaker at the Annual Banquet. He spoke on *The delights of domesticity*.

Dr. Nick Christou was admitted as a new member.

Dr. Joe Meakins discussed a paper entitled *Impaired recovery of strength following major abdominal surgery in older patients.* The paper by Dr. Jim Watters of Ottawa was sponsored by Dr. Douglas Wilmore, Frank Sawyer Professor of Surgery at Harvard Medical School, who will be the L.D. MacLean Visiting Professor at McGill, November 18, 1993. Dr. Meakins also discussed *Neutrophil and non-neutrophil mediated injury in intestinal ischemia-reperfusion*.

Dr. David Mulder discussed a paper from Dr. R. Sherman's group in Atlanta entitled *A new approach to rectal wounds - Same admission colostomy closure*. He also discussed a presentation by Henry Bahnson and his group *A decade of lung transplantation*.

Dr. Jeff Barkun presented *Cholecystectomy without operative cholangiography: Implications for common bile duct injury and retained common duct stones.* The co-authors are Drs. A.N. Barkun, G.M. Fried, H.H. Sigman, J. Mamazza, E.J. Hinchey and J.L. Meakins. He related the experience at McGill of 1300 laparoscopic cholecystectomies over 16 months. The paper was well received and discussion bountiful.

Drs. D. Mulder, H. Shennib, R. Landreneau and M. Mack presented a work entitled *Video assisted thorascopic wedge resection of T1 lung cancer in high risk patients*. They conclude that video assisted thorascopic wedge resection is a safe and reliable procedure for the treatment of peripheral T1

lung cancer in high risk patients. The authors were congratulated by the discussants for their endeavours in this new field.

Dr. MacLean presented the Medallion for Scientific Achievement to his friend, Dr. Norman Shumway of Stanford. In a private conversation with the editor of the SQUARE KNOT, the latter made laudatory comments about Drs. Tony Dobell, Ray Chiu, David Latter and Tom Burdon.

Also present at the meeting were Drs. John Hinchey, Larry Hampson and Ed Monaghan as were McGill Surgical Alumni Drs. Alan Graham, Jack Pickleman, Bernard Perey and John Gutelius.

Dr. Ward Griffen is looking forward to his visit to the McGill Department of Surgery for Dr. Fraser Gurd Day on May 27.

At the end of the meeting, Dr. MacLean introduced the new President of the A.S.A. - Dr. Seymour I. Schwartz of Rochester, New York.

E.D. Monaghan, M.D.



Dr. Lloyd MacLean, introduced by Dr. Reemtsma (left), delivers his Presidential Address to the American Surgical in Baltimore

ROYAL COLLEGE CERTIFICANTS 1992

Congratulations to the following McGill Residents in General Surgery who were certified by the Royal College in November 1992:

Kevin Degnan Christopher Myint Oung
Mark Healey Ian Rubins
Andrew Hill Abdel Salem
Steven Jackson Baird Smith
Daniel Marelli Oren Steinmetz
Dao Nguyen

Congratulations also to Dr. Patricia Sheiner who graduated from McGill in 1984 and trained in New York.

MGH'S World Recognized Elemental Diet Marks 25 Years



From left to right, Dr. Hope McArdle, Dr. Fraser N. Gurd and Dr. Gustavo Bounous. Dr. Bounous presented his new book to Dr. Gurd in recognition of his leadership and support in surgical research.

Twenty-five years ago, Dr. Gustavo Bounous and his associates published the first research paper which showed that the feeding of a special pre-digested diet could protect the intestine from the severe injury caused by hemorrhagic shock. At that time, Dr. Fraser N. Gurd was Surgeon-in-Chief at the MGH and Director of the University Surgical Clinic, where these research studies were carried out. Since that time, the "elemental diet", as it was named, has undergone many transformations. It is now used world-wide to treat a wide variety of intestinal diseases, and continues to be important in preparing the intestine before a procedure that is known to produce damage, such as pelvic radiotherapy and chemotherapy. To mark this silver anniversary of his first publication, Dr. Bounous has edited a new book entitled "Use of Elemental Diets in Clinical Situation".

Reprinted with permission from "Generally Speaking", MGH, Winter '92 \blacksquare

Update on NSABP Activities

The 37th group meeting of the NSABP was held in Orlando, Florida from January 10 to 13, 1993.

Indicative of the current emphasis on the molecular biology of cancer, the two guest speakers at the scientific session were: Dr. Mark Israel of the Department of Surgery at the University of California, San Francisco who talked on the Impact of molecular biology on clinical oncology, and Dr. Mary Clare King of the University of California, Berkeley, who spoke on the topic Genetics and breast cancer: Can genetics help alleviate breast cancer as a threat to women's lives.

In the near future we will understand more clearly the genetic changes that can take place in breast cancer cells and this may help us to identify more specifically an individual's prognosis and lead to improvement in therapy.

The next main topic for the scientific session was on the new drug Taxol which has shown great promise in the management of ovarian cancer. The NSABP is contemplating using this drug in a randomized clinical trial for curable breast cancer in the near future.

An update was given on all the NSABP protocols, from B-04 to B-25. So far there have been no surprises in any of the breast cancer protocols.

Beginning with ductal carcinoma in situ (DCIS), B-17 showed that the radiation therapy arm was better than the notreatment arm, and therefore this has led to B-24. In this trial, patients are randomized to two groups, lumpectomy and radiotherapy, plus or minus Tamoxifen.

In Stage I breast cancer, chemotherapy with or without Tamoxifen has been shown to be of use, and further studies are being conducted along this line. The latest protocol accruing patients for Stage I breast cancer is B-20 for ER positive breast cancer patients, and B-23 for ER negative breast cancer patients. There is also a minimal breast cancer protocol, B-21, with patients being randomized after lumpectomy and axillary lymph node dissection to radiation plus or minus Tamoxifen.

For **Stage II breast cancer**, the present active protocol is B-25, the objective of which is to determine whether dose intensification of Adriamycin and Cyclophosphamide will result in improved survival. This trial is the first in which GCSF is being utilized to prevent infections resulting from bone marrow depletion.

B-18, a protocol comparing preoperative chemotherapy with postoperative chemotherapy, is still active, and patients will be accrued until the end of April, 1993.

The Royal Victoria Hospital ranks sixth in terms of patient accrual to breast cancer protocols within the NSABP organization, with 372 institutions participating. Due to the excellent work of our data managers, Grace Seltmann, Josie Pepe and Rosie Tavares, we have been awarded certificates of excellence for the past two years.

Henry R. Shibata, M.D. Director, Oncology Services, RVH

King Edward VII: Appendectomyby Frederick Treves

Following the death of Queen Victoria on January 22, 1901, her son the Prince of Wales was to be crowned as King Edward VII on August 9, 1902. Preparations were being made for this ceremony and invitations had been sent all over the world.

In June 1902, Sir Francis Laking, Physician-in-Ordinary to the Prince, discovered a royal illness severe enough to postpone the coronation due to be held in Westminster Abbey. When peritonitis set in, the King still refused to postpone the ceremony. Eventually, the surgeon, Frederick Treves, confirmed the diagnosis of acute appendicitis. He recommended an operation. One can imagine the deliberations between the young surgeon and the portly king. After much resistance, a room was prepared for the operation at Buckingham Palace. The King was laid out on a billiard table and finally gave way and the anesthetic was administered. His wife, Queen Alexandra, and three strong men helped to hold him down as he struggled and threw his arms about, growing "black in the face."

The operation was completed in 40 minutes and so successful was it that on the following day the King was sitting up in bed smoking a cigar. On July 29, Frederick Treves wrote to Dr. James Reid (who had been the Physician to Queen Victoria) from the royal yacht *H.M.S. Victoria and Albert* where the King was convalescing: "The King is doing well in every respect. The wound is now equal in length (on the surface) to the diameter of a 2 shilling piece, and its depth is just equal to the diameter of a 6 penny piece. He walked today for the first time and did marvelously well."

Their King recovered so well that the coronation was able to take place as scheduled on August 9, almost seven weeks to the day after his operation.

The physicians were treated badly. Sir James Reid was never consulted until the operation was over and Sir Francis Laking was never elected as a Fellow of the Royal College of Physicians. Mr. Treves was made a Baronet and subsequently was called Sir Frederick Treves. He is remembered also for his anatomical description of the "avascular fold of Treves about the appendix."

Adapted from Ask Sir James. Michael Reid, Hodder and Stoughton, 1987. \blacksquare



DATES TO REMEMBER

- Québec Association of General Surgeons, May 28-29, 1993, Chicoutimi. Guest speaker: Professeur Henri Joyeux, Institut Curie, Paris
- Canadian Orthopaedic Association, May 30-June 3, 1993, Montreal
- Canadian Urological Association, June 20-24, 1993,
 Montreal (Dr. M. Elhilali, President)
- Canadian Society of Cardiovascular and Thoracic Surgeons, September 10-11, 1993, Vancouver
- Royal College of Physicians and Surgeons of Canada, September 10-13, 1993, Vancouver
- American Association for the Surgery of Trauma, September 23-25, 1993, New Orleans, Louisiana
- ◆ Royal College Exams in General Surgery, November 9-11, 1993, Toronto
- American College of Surgeons, October 10-15, 1993, San Francisco, California
- Association for Academic Surgery, November 10-14, 1993, Hershey, Pennsylvania



Upcoming McGill Surgical Events

- 26th Annual Stikeman Visiting Professor in Cardiovascular and Thoracic Surgery, Dr. Aldo R. Castaneda, June 3-4, 1993
- McGill Division of General Surgery Annual Visiting Professor, Dr. John L. Cameron, September 30, 1993
- General Surgery Postgraduate Course, October 29-30, 1993
- L.D. MacLean Visiting Professor,
 Dr. Douglas W. Wilmore, November 18, 1993
- Royal College Accreditation Visit,
 Department of Surgery, April 18-22, 1994



Anniversary at the Children's

Last December Raphaella Rubino celebrated her 8th birthday and the 7th anniversary of a liver transplantation which she underwent at the Montreal Children's Hospital on December 4, 1985 for Criglar-Najar Disease. She is an active healthy girl doing will at school on low dose immunosuppression.

IT COULDN'T BE DONE

Somebody said that it couldn't be done, But be with a chuckle replied That "maybe it couldn't," but he would be one Who wouldn't say so till be'd tried. So be buckled right in with the trace of a grin On his face. If he worried he hid it. He started to sing as he tackled the thing That couldn't be done, and be did it.

Somebody scoffed: "Ob, you'll never do that; At least no one ever bas done it"; But he took off his coat and he took off his hat, And the first thing we knew he'd begun it. With a lift of his chin and a bit of a grin, Without any doubting or quiddit, He started to sing as be tackled the thing That couldn't be done, and be did it.

There are thousands to tell you it cannot be done, There are thousands to prophesy failure; There are thousands to point out to you one by one, The dangers that wait to assail you. But just buckle in with a bit of a grin, Just take off your coat and go to it; Just start in to sing as you tackle the thing That "cannot be done," and you'll do it.

Edgar A. Guest

WALTER C. MACKENZIE JOHNSON & JOHNSON/ETHICON FELLOWSHIP

The Royal College invites applications for this award from Fellows of the Royal College who wish to acquire surgical research or clinical surgical training.

The fellowship is named after Dr. Walter C. MacKenzie, a renowned Canadian surgeon and a past president of the Royal College. It is totally supported by Johnson & Johnson Medical Products and administered by the Royal College in accordance with its stated objective to encourage, assist and promote continuing medical education. One fellowship is awarded each year with a value of \$15,000 for programs of six months or longer.

The deadline date for receipt of applications is September 30, 1993, for awards to be granted in 1994. Applications can be obtained from the Chairman's office, McGill Department of Surgery.



Submissions Welcome!

We can't do it without you — if you have any information you want published in THE SQUARE KNOT, comments about our newsletter or suggestions, we want to hear from you!



Send submissions to:

Madeleine Beaulne Administrative Assistant Department of Surgery Royal Victoria Hospital 687 Pine Avenue West, Rm S10.36 Montreal, Ouebec Canada H3A 1A1

a. call us at (514) 842-1231 local 5544 ..fax us at (514) 843-1503

Moving?

If you change your address, or if you know someone who would like to receive this newsletter, please drop us a line.

THE SQUARE KNOT

J.L. Meakins, M.D. CHAIRMAN McGill Department of Surgery

> E.D. Monaghan, M.D. EDITOR

Madeleine Beaulne ASSISTANT EDITOR

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