THE SQUARE

raduate research training in surgery has traditionally been served by the Experimental Surgery Research Masters and PhD thesis programs that have run successfully and more or less unchanged since the early 1960's when the Surgical University Clinic was created by Dr. Rocke Robertson. It has served the Department well having trained generations

Innovating Changes to the Experimental Surgery **Graduate Program**

of surgeon scientists and basic scientists who have gone on to make outstanding contributions in the field of surgical research.

Over time, the emphasis of surgical



Prof. Jake Barralet

research has expanded from basic science to include the development of new surgical techniques, the development of new tools and devices, the biology of repair and regeneration, surgical training, education and simulation and outcomes research. As such, the skills required within the realm of surgical research can no longer only be met by the present curriculum in Experimental Surgery. Although all Surgical Research is ultimately linked to minimizing the effects of surgical trauma and improving patient outcome, research training must be tailored to the content of the research endeavor. Surgical research itself now captures a wide range of activity spanning application of software, learning and education theory, outcomes, health economics and global surgery. In order to bridge this gap, we have focused on

Lachapelle, Tarek Razek and Dan Deckelbaum and Prof. Jake Barralet have established three additional Masters Degree concentrations in Surgical Education, Surgical Innovation and Global Surgery to augment the original Experimental Surgery Program, directed by Dr. Anie Philip. Future articles will discuss Surgical Education and Global Surgery; here we discuss the Surgical Innovation Program in some detail.

creating three new training areas within the Division of Experimental Surgery. Drs. Kevin

SURGICAL INNOVATION DIRECTORS: DR. KEVIN LACHAPELLE AND PROF. JAKE BARRALET

Can innovation be taught? After all, creativity, imagination and the entrepreneurial spirit are thought to be inherent personal qualities. Certainly there are attempts to categorise and predict these qualities. Risk taking for example has been correlated with

(See continuation on page 5)

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DEPARTMENT OF SURGERY NEWSLETTER

McGILL UNIVERSITY

SPRING/SUMMER 2016



Dear Editor,

I recently came upon this winter newsletter and was so pleased to see Dr. Mulder's picture and the dedication of the Trauma Center in his



name. I trained with Dr. Mulder at MGH in the mid-1990s. Although I never became a surgeon, I work very closely

with surgeons with our geriatric-surgery co-management programs. In all my interactions with surgeons, I always think of Dr. Mulder as the model of the best surgeon and physician. He was always a perfect gentleman in addition to being an excellent clinician, empathic communicator, and fabulous technician. It is so fitting that MGH dedicated their trauma center in his name.

Please pass on my sincere congratulations to Dr. Mulder and thank him for having been one of my most treasured role models as a physician. I never truly had a chance to thank him personally.

Lynn McNicoll, MD, AGSF

Geriatrician, Director of Education, Division of Geriatrics and Palliative Medicine Director of Quality Management and Outcomes, Department of Medicine Hospital Geriatrics Consultant, Rhode Island Hospital

> Consultant, Healthcentric Advisors of Rhode Island

Associate Professor of Medicine, Department of Medicine Warren Alpert Medical School of Brown University Rhode Island Hospital

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Dear Editor,

We were happy to receive the correspondence from Dr. Hsu, who served as a General Surgery Assistant Resident (1962-64) informing us about his retirement:

Former Royal Victoria Hospital intern (1961-62), General Surgery Assistant Resident (1962-64) who left Montreal to complete his residency in Orthopaedic Surgery at Johns Hopkins Hospital, Baltimore, being Chief Resident, Orthopaedics, 1966-67, relocated in the Los Angeles area in 1971 following clinical and graduate studies via a US Public Health service Fellowship in Basic Sciences and Neuromuscular disorders.



Dr. John Hsu, MDCM

In 1971, John joined the orthopaedic staff at Rancho Los Amigos Hospital, Downey, California; an institution known worldwide for the treatment of the severely physically disabled and injured person and was an Attending Orthopaedic Surgeon. He established the Muscular Dystrophy of America (MDA) clinic at that institution and helped develop surgical methods to improve the function and lifespan of neuromuscular patients. In 1972, Rancho became a teaching hospital of the University of Southern California, School of Medicine (USC). The Department of Orthopaedic Surgery required him to be the Attending Surgeon for one of the Los Angeles County General Hospital (LACGH) trauma teams, whose service commitment was 3 months of each year. In 1980 he achieved the rank of Clinical Professor, Department of Orthopaedic Surgery, USC School of Medicine.

John was able to enter the Whittier, California community and establish a part-time Pediatric Orthopaedic and Trauma surgery practice in addition to his academic commitments, 1974-1995.

1988, he became the 3rd Chairman of the Department of Surgery and Chief of Orthopaedics at Rancho Los Amigos Medical Center, an academic position which required a nationwide search at that time.

This involved his supervision of a staff of 120 surgeons, 50 half-year rotating orthopaedic residents and 7 annual fellows in orthopaedic subspecialties. His academic career at that institution continued until his formal retirement from the County of Los Angeles Department of Health service in 2003, at the age of 65. He held membership in many national and prestigious academic organizations including the Candian Orthopaedic Assoc., American Orthopaedic Assoc., World Muscle Society, Scoliosis Research Society, Pediatric Orthopaedic Society, NA and

Orthopaedic Research Society. He was one of the founding members of the Orthopaedic Rehabilitation Association.

During his career in Southern California, John has 125 scientific publications. Between 1974 and his retirement, he accepted a visiting professorship or lectureship one time/ year. His travels which included operation demonstrations were in New Zealand, Hong Kong, Cyprus, Italy, Turkey, Switzerland, Germany, Great Britain, and Tunisia. Grant review for the National Institute of Health (NIH) on Physiology and Rehabilitation study group; Trauma research projects and trauma center applications for the Communicable Disease Center, (CDC) were some of his 'outside' academic activities. He was the editor of the American Academy of Orthopaedic Surgeons Atlas of Orthotics and Assistive Devices, 3rd and 4th editions.

John is grateful for his McGill and Royal Victoria Hospital teachings and training. Together, with his wife, Francine, who came from Joliette, Qc., they had 3 children. Despite the good weather and many Southern California attractions, they all achieved doctorates: Ming (MD-Vanderbilt); Anne (DMD-Harvard) and John K. (PhD, Maryland + JD, Maryland).

Some staff and alumni at RVH may remember John as a competitive sailor, a sport which he continued and excelled at until 1995, participating in regattas both in USA, Canada and Great Britain, winning several Southern California championships. ◆



to comment on the passing scene without being invited to do so. In the case of the Square Knot, it allows

me the opportunity to choose the topics to

Editor's Note

By Harvey Sigman, CD, MSc, MDCM, FRCSC, FACS present to our readers. If one were to read the local newspapers one would see little beyond gloom and doom. There is no question that budgetary restraints have challenged our ability to provide world class care for our patients. This is particularly frustrating since the state of the art facilities at the Glen Site and the recently opened K Pavillion at the Jewish General Hospital provided us with all the means to do so. I have thus been delighted to read the Letter from the Chair and the activities described by Jake Barralet which have been



Dr. Harvey Sigman

inspiring and have convinced me that the future of the Department of Surgery at McGill will remain bright. Certainly the accomplishments of our residents who were presented at Fraser Gurd Night were outstanding and the spirit of camaraderie was tangible. We have over the years overcome many hurdles to earn the "Triple Crown" in Patient Care, Teaching, and Research and I have confidence that we will continue to do so. Have a great summer. ◆



midst the reorganization of the Quebec Health Care system, reduction in beds in teaching hospitals, and a substantial decrease in operating budget, it is clear that, as the

great philosopher Yogi

Berra put it, "The future

ain't what it used to be".

Our challenge is to look to

the future with optimism

and to get ahead of the

Words from the Chair

The McGill Department of Surgery Looks to the Future

> curve so that we can continue to provide excellence in patient care and fulfill our academic mandates of teaching, discovery and leadership. It is not fruitful to rue the way things used to be. Our goal is to take leadership in defining the future.

As surgeons, our primary goal is to provide optimal patient care. Quality must be our primary aspiration since, by improving quality, we achieve the desired cost savings and efficiency. The costs of managing complications are enormous compared with the costs of managing patients who sail through their surgical experience. Not only that, it's what both the patient and the surgeon want. The way to improve quality is first to measure it with a credible metric then introduce measures to address areas for potential improvement. Look for "low hanging fruit" and direct efforts first at addressing those obvious areas. The McGill teaching hospitals have adopted the American College of Surgeons NSQIP program as a measure of surgical outcomes that takes into account the complexity and co-morbidity of



Dr. Gerald M. Fried

patients in a well-validated riskadjusted measure.

The next step is to put in place processes of care that will improve efficiency and quality. Under the leadership of **Dr. Liane Feldman**, Director of the McGill Division of General Surgery and **Dr. Franco Carli**, former McGill Chair of Anesthesiology, we have become the North American leader of the successful ERAS program (Enhanced Recovery After Surgery) developed in Europe. This program looks at the

entire trajectory of patient care throughout the episode of surgery, from the initial consultation with the surgeon until complete recovery after surgery. Based on evidence-based best practices, where evidence is available, we construct a clinical pathway, involving a multi-disciplinary team that involves surgeons, anesthesiologists, internal medicine specialists, family practitioners, nurses, dieticians, physical therapists, and psychologists. That care pathway becomes the "default" for all patients undergoing a specific procedure, unless the responsible physician, for a particular reason, overrules it. The process of developing these care maps breaks down silos, enhances collegiality and respect, and makes everyone invested in the care of the patient. Essential to this process is education of the patient in a language he/ she can understand to ensure that the patient is invested in his or her healing. The ERAS program has proven spectacularly successful in improving outcomes, decreasing resource

utilization, improving patient satisfaction, and ultimately enhancing value in surgical care.

ERAS is also consistent with our academic mission, resulting in an area of funded research, multiple publications, and has enhanced our teaching opportunities at home and around the world. It has also provided McGill surgeons an opportunity to rise to leadership in their fields, as everyone is interested in adopting initiatives that enhance the value of surgical care. We were ahead of the curve!

Enhancing the value of surgery is also consistent with our leadership in Minimally Invasive Surgery. Whether it is in laparoscopic surgery, robotics, flexible endoscopy, or catheter-based therapies, all these approaches have in common the goal of limiting the injury of access. Combining the use of MIS techniques and enhanced recovery practices, we can leverage the benefits of less invasive surgery more fully and yield savings from in-patient costs that more than compensate for the expense of the devices used to accomplish our procedures in the OR.

The MUHC and JGH have finished spectacular upgrades to their infrastructure in the past year. This affords us new opportunities for change. At the JGH, a new multi-disciplinary cardiac care unit has broken down barriers between the traditional realms of cardiologists and cardiac surgeons. They now work together with their sole motivation being to provide their patients optimal care with the whole gamut of therapeutic options available to the team.

At the RVH site of the MUHC, at the new Glen Yards facility, we have constructed an Interventional Platform rather than the typical OR floor. On this platform we have integrated surgical suites, hybrid ORs, interventional cardiology suites, interventional radiology suites, cystoscopy, and flexible GI endoscopy into a single platform sharing a common PACU. This proximity promises to help break down traditional barriers and foster novel collaborative techniques. This is adjacent to our experimental operating suite where we can do "first-in-human" procedures and monitor a plethora of information during surgery. We also have, on the same interventional platform, a simulation suite that can be used for preop warm-up, to bench-test prototypes of new devices, and where we can host engineers working with us as part of our surgical innovation program. Nearby we have a 3D printing facility allowing us to generate prototypes of devices or to reconstruct high fidelity replicas of tissues for training purposes.

On the research side, our application to develop a new program entitled "Injury, Repair and Recovery" has been approved by the Quebec Foundation for Health Research. This program will foster the integration of research efforts in device development, processes of care, simulation, outcomes and healthcare economics research, techniques to enhance tissue regeneration and scar modulation, materials development, etc. Under the leadership of **Dr. Jake Barralet**, our Vice-Chair for Research, we have won an NSERC CREATE grant to bring engineers and clinicians together with the goal of transforming surgical care. Our new Surgical Innovation concentration in the Experimental Surgery Program has been extremely successful, attracting 24 graduate students (clinicians, business students and engineering students) in its first year. We have recently been approved to offer non-thesis diploma and certificate programs for those who wish to learn the skills of surgical innovation, such as intellectual property issues, business planning and market analysis, regulatory and compliance issues for new devices, biomaterials, etc.

Under the leadership of **Dr. Kevin Lachapelle**, the Adair Chair and Vice Chair of Surgical Education, the new concentration in Surgical Education/Simulation has proven very popular and marks our first success in distance learning. He has organized the program to enable **Dr. Dmitry Nepomnayshy**, a surgeon from the Lahey Clinic and Tufts Medical School, to undertake his Master's degree from home with occasional visits to Montreal. Applications to both these new graduate programs have been brisk for the upcoming academic year.

Recently we have also been approved to offer a new concentration in Global Surgery, under the direction of **Drs. Tarek Razek** and **Dan Deckelbaum**. This is an opportunity for those wishing to pursue a Master's degree and to learn about how to provide a sustainable plan to enhance surgical capacity and quality, with enduring impact, in the developing world or in disaster struck regions. We have also much to learn from practices in the developing world to improve our own efficiency and the value of surgical care. Some call this "reverse innovation".

Despite the many constraints around us, these pressures have sparked our collective imagination, have brought people together, and motivated us to maintain our position as surgical leaders. We are certainly living a time of great change, but change stimulates opportunity.

► many factors, such as an absent paternal influence in childhood, guilt, deprivation and other rather vague and intangible gualities and exposures. A better guestion might

Innovation

Continued from page 1

es and exposures. A better question might be to consider what we mean by teaching innovation. Is it a study of entrepreneurialism, project planning, multidisciplinary team work, market analysis or prototype validation? In fact while it comprises ele-

ments of all of these and more, the main taught message is that, unlike invention, innovation is a process and Surgical Innovation specifically is a process anchored in a need to improve patient care. The complex regulatory and legal framework in which medical devices are developed make an appreciation of the process more vital than perhaps most other forms of innovation. Our main philosophy is to teach by allowing residents and other trainees the opportunity to actually undertake this process themselves so that an innate appreciation of the process is instilled.

It is not uncommon that surgeons come up with innovative ideas that could and should improve patient care. However, the journey from new idea to marketable product is a complex one, requiring the skills of not only surgeons but also engineers and businesspeople as well as regulatory, IP, finance, marketing, and so on. Following on from **Dr. Tom Krummel's** lecture as the **2009 Fraser Gurd Visiting professor**, where he described the Biodesign program at Stanford, it was apparent that McGill Department of Surgery could be greatly enriched by a similar approach. Shortly after, Drs. Barralet and Lachapelle began planning a 6-student - team pilot project in cardiac and orthopaedic surgery, under the clinical leads of **Drs. Paul Martineau** and **Kevin Lachapelle**. With medical device experts **Drs. Duchaine** and **Nuño** from Ecole Supérieure de Téchnologie and **Sandra Betton** Head of Concordia's John Molson School of Business and Faculty of Engineering they ran the prototype for delivering a program focussing on the innovation process in surgery. In three months they ran an accelerated pilot developing prototypes of an umbrella design minimally invasive tool for reshaping humeral compression fractures, and a CPR assist device. Products of this pilot program, **Drs. Amin Madani** and **Justin Drager** have continued training as clinician scientists, **Mr. Steve Arless** went on to form part of Soundbite Medical and **Mr. Alain R. Valiquette** is now Head of Startup Programs and Entrepreneur in Residence at District 3, Concordia.

This experience gained us rapid approval for an official concentration in surgical innovation that launched in 2015 with 20 students. It teaches the basic process of innovation by putting students in multidisciplinary teams to identify hospital needs, then screen them from the clinical, business, regulatory and technological perspective to identify a top-priority need and from there develop potential solutions and ultimately a prototype and potential business model. Just as the scope for clinical innovation goes well beyond the operating theatre, the Surgical Innovation program is by no means limited to the development of new surgical devices. Indeed, a key component is the inclusion of programming and software in light of the huge growth of mobile devices in the surgical arena. Innovations in both hardware and software for surgeon training (including the flourishing field of simulation), risk reduction, diagnosis, patient tracking, healing monitoring and rehabilitation all fall within the gambit. This first official cohort that completed the innovation cycle in May this year included Orthopaedics' Dr. Max Talbot and the clinical leads



The first official Surgical Innovation Class of 2016 at their final product pitch

► were **Drs. Kevin Lachapelle, Mirko Gilardino** and **Ed Harvey**. They developed ScaRaser, a portable scar reduction technology, Ariane, a patient tracking software tailored by and for the medical staff and the patient's families that underwent beta-testing at the Glen site of MUHC, SurgiPoint a hands-free control unit that enables the surgeon or resident to point or draw on the existing surgical monitors and HawkEye, a fracture fixation targeting device that uses radio frequency instead of x-rays, to locate intra-medullary nail implants inside the bone for fracture treatment. Already one of these students, (**Maxime Bourbonnais**) is Chief Executive Officer at Variense, a robotics start-up in Montreal, and another, **Alexis Theriault**, is Head of Medical Technology Cluster, Health Venture Services in the MaRS Discovery District.

The Surgical Innovation program turns the model of isolated graduate research work on its head by building multi-disciplinary teams that equip graduates to become the kind of innovators that can actually put their ideas into practice and lead the Canadian healthcare industry forward. This clear unique strength was the focus of a successful \$1.65M CREATE grant application to train some 70 engineers and scientists in the field of surgical innovation. News of the award came the very day our first Innovation Teams completed in April this year. (http://bit.ly/28YxnOc). This training grant essentially establishes the Montreal General Hospital as the epicentre of a Montreal-wide graduate program in Clinical Innovation, along with some 20 industrial partners who both

teach in the program, offer workshops and provide internships for the graduate students. Partners include Medtronic, CAE, SAP, Emcision, EOS, and Ubisoft and the Department of Surgery is currently recruiting support for expansion of this activity.

FUTURE VISION

This expansion enables Surgery to formalise many previously isolated applied research, innovation and entrepreneurial activities in the department around a core graduate training program and thereby improves the quality of graduate training in terms of content, delivery and overall student experience. We plan that the program will slowly double in size despite the current reduction in resident numbers by having this and other multidisciplinary offerings attractive to creative and driven residents. The recent establishment of the RI-MUHC program in Injury, Repair and Recovery will help us integrate this training program into surgically related and other clinical trainee programs across all the McGill Hospital sites in Montreal. We are working with Dr. Vassilios Papadopoulos Executive Director of the Research Institute of the MUHC and Dean David Eidelman and the Faculty of Medicine to ensure this is a supported process that brings excellent students and the required resources to what is one of the key departments of McGill University.



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.

Support the McGill Department of Surgery !

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/makedonationonline-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





Day

May 26, 2016

raser Gurd Day was held May 26th and remains the academic highlight of the academic year for the McGill Department of Surgery. Fraser Gurd Day began in 1978 as a Montreal General Hospital event, prior to the merging of the McGill surgical



Dr. Gerald Fried

residency programs between the teaching hospitals. This was the 27th annual McGill Fraser N. Gurd Day but the 39th annual Fraser Gurd visiting professorship. This end of academic year event is an opportunity for us to celebrate excellence in patient care, discovery, and education across all McGill teaching hospitals. It is also our chance to formally thank our graduating fellows, residents and graduate students for their contribution to our institution. We remind our graduates, as they go out to pursue their professional goals around the world that they will always remain an ambassador for the McGill department of surgery. Our visiting

professor was Dr. John D. Birkmeyer, executive Vice President of the integrated delivery system and the chief academic officer at Dartmouth-Hitchcock Health, an academic health system that stands as a model of quality and excellence in New England. Dr. Birkmeyer gave two wonderful talks related to guality and surgical outcomes and emphasized the interrelationship between quality and financial efficiency. At the banquet, held that evening at The Ritz Carlton Hotel, we had an opportunity to reflect back on an historic year, marked by the physical redevelopment and modernization of our teaching hospital network, having moved into the new pavilion K at the Jewish General Hospital and the new Royal Victoria Hospital and Cedars Cancer Center at the Glen yards. This public event provided me a chance to publicly thank Dr. Simon Bergman for his leadership implementing the new medical school curriculum on behalf of the department of surgery and for addressing issues critical to the accreditation of the medical school.

MCGILL UNIVERSITY DEPARTMENT OF SURGERY 🤯 🐻

27[™]ANNUAL FRASER N. GURD VISITING PROFESSOR



JOHN D. BIRKMEYER, M.D. MAY 26, 2016

www.medicine.mcgill.ca/surgery



Dr. Gerald Fried and Dr. John D. Birkmeyer

► This has been an extraordinarily successful research year thanks to the leadership of **Dr. Jake Barralet**, the Alan G.Thompson Chair for surgical research, and **Dr. Anie Philip**, the program director for our experimental surgery graduate program.

This year the scientific presentations were aligned around those four topic areas, with each session leading off with a scientific presentation given by a faculty member who is a clinician-scientist. This was followed by a series of oral research presentations in each topic area. This reorganization was very well-received and the talks stimulated very positive constructive comments and questions. After lunch we had an interactive symposium on maximizing surgical quality during times of serious resource constraints. After a leadoff talk by **Dr. Birkmeyer, Dr. Liane Feldman** spoke on the value of enhanced recovery programs, and **Dr. Raj Aggarwal** spoke on the opportunities presented by simulation training to improve quality and ultimately reduce costs.

AWARD PRESENTATIONS

At the Fraser Gurd banquet **Dr. Barralet** presented research awards to the 4 students. For research on interventions, devices, and novel therapies, the best research award went to **Dr. Georges Makhoul**; for surgical education to **Dr. Marina Ibrahim**; for basic science to Dr. Claire Nash; and for surgical outcomes to **Dr. Julio Fiore**.



Dr. Jake Barralet with Dr. Claire Nash, Dr. Marina Ibrahim and Dr. Georges Makhoul

At the evening banquet I had the pleasure of representing the LD MacLean distinguished achievement award to **Dr. David Mulder,** The H. Rocke Robertson Professor of Surgery at McGill. This award is given to an individual who, over a career, made substantial contributions to the success of the department of surgery and who served as an ambassador on our behalf bringing pride and recognition to McGill. It is hard to imagine someone who fulfills these considerations better than Dr. Mulder.



Dr. Gerald Fried and Dr. David Mulder

Dr. Simon Bergman, the director of undergraduate surgical education presented the Harvey H. Sigman undergraduate teaching excellence award to **Dr. David Fleiszer**.

Dr. Kevin Lachapelle, the Adair Chair of Surgical Education presented the Ross Adair Memorial Award to a surgical resident for excellence in teaching medical students. This was given to **Dr. Phil Vourtzoumis**.



Dr. Kevin Lachapelle with Dr. Phil Vourtzoumis

Dr. Alexis Rompre-Brodeur presented the post graduate teaching excellence award (to a faculty member chosen by the residents) to **Dr. Gabriela Ghitulescu**.

Dr. Fried presented the Eddy, the Edmund D. Monaghan principles of surgery award to **Dr. Alexis Rompre-Brodeur** in recognition of his highest score on the national POS exam.

Dr. Fried presented the 2016 Katherine Rolph award to **Ms. Ann Lynch** in recognition of her outstanding achievements

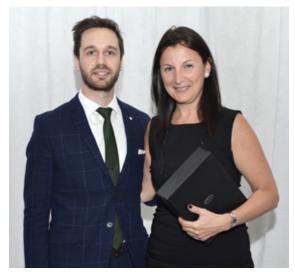
Please see the rest of the photos in our online Flickr album http://bit.ly/29ly1PH



Standing from L to R: Dr. Olivier Court, Dr. Talal AlQaoud, Dr. Amin Andalib, Dr. Carmen Mueller, Dr. Mohammed Al Mahroos. **Sitting from L to R:** Dr. Paola Fata, Dr. Sara Najmeh, and Ahd AlKhunaizi.

• in leadership contributing to the advancement of the McGill department of surgery.

The graduating residents, fellows and graduate students were then honoured by their individual program directors and the best teachers in each surgical division were recognized among their peers. The door prize from the evening of a complimentary night's stay for two at the Ritz Carlton Hotel was awarded to **Ms. Donna Stanbridge**, last year's winner of the Katherine Rolph Award. At the end, Dr. Fried congratulated **Maria Cortese**, **Sharon Turner** and their team for all their efforts in making the research day a wonderful success and the evening at the Ritz something to remember. ◆



Dr. Gabriela Ghitulescu with Dr. Alexis Rompre-Brodeur



Dr. Fried and Ms. Ann Lynch



Please see the rest of the photos in our online Flickr album http://bit.ly/29ly1PH

Divisional News, JGH

The Impact of Technological Change on the Surgical Profession 2016: Evidence Based Practices

This event was organized by the McGill University, Faculty of Medicine, the Department of Surgery, the Department of Social Studies of Medicine and the Jewish General Hospital Foundation. It took place on March 23rd and 24th at the JGH. ◆



Back row L to R: D. Mulder, D. Jones, U. Trohler, A. Fuks. Front row L to R: C. Crenner, S Snow, T. Schlich, H. Sigman, G. Weisz, A. Cambrosio, S. Frampton. Photo credit Felipe Argaez

Practices of Evidence

By Thomas Schlich, MD, PhD

hroughout history, and, in particular, over the past 200 years, doctors and scientists have used different strategies to find out which techniques and procedures lead to the best results. They have used various tools to obtain accurate and reliable evidence for the usefulness and safety of surgical innovations, among them case reports, animal experiments, as well as clinical studies of different kinds, up to the most sophisticated Randomized Clinical Trials (RCTs). What counted as valid evidence, however, and by which means it was obtained has changed over time and is still changing at present. Examining these various techniques of creating and evaluating evidence and investigating their use in different contexts can provide valuable insights for dealing with the precarious and elusive nature of evidence in surgery and in medicine more generally.

PROGRAM EVENT

Jonathan Kimmelman, McGill University Evidence in Translational Research and Surgery

George Weisz, McGill University Body Counts: The History of Statistics in Medicine

Ulrich Tröhler, University of Bern, Switzerland The Numerical Method in Surgery in 18th and 19th Century Britain

Stephanie Snow, University of Manchester, UK Re-Calculating Risk: Patients, Surgeons and Early Anaesthesia

Sally Frampton, University of Oxford, UK Statistics and Abdominal Surgery: Ovariotomy

Christopher Crenner, University of Kansas The Ups and Downs of Sham Surgery

David Jones, Harvard University The History of Clinical Trials in Surgery

Gerald Fried, McGill University Case Histories, Registers, RCTs – Various Kinds of Evidence and Their Uses in Surgery

Session Chairs included Drs. G. Batist, A. Cambrosio, A. Fuks, D. Mulder, H. Sigman.

The ITCSP 2016 workshop brought together practitioners, ethicists, social scientists and historians to discuss the various kinds of evidence and the methods to create and assess them. These experts discussed how such practices of evidence were introduced in the past, how they are being used now, and how one could use them in the future.

During the event a number of themes and recurrent questions came up. A central issue concerns the specificity of surgery. In which way is surgery different from other treatment modalities in medicine, in particular drug treatment? And more specifically, to which degree can the methods of evaluating therapy with pharmaceuticals be used for evaluating surgery?

The surgical act as such is often seen as being very different from the simple administration of a pill. Among other things, surgery requires a higher degree of individualization at various levels: Every patient's anatomy is different; related to this, every surgical operation can run into different kinds of obstacles that the surgeon has to react to in the situation. In many ways, one can even claim that the same surgical operations are

► done differently each time, not least because surgeons work on improving them. Especially new operations are thus often subject to a process of ongoing innovation. On the part of the surgeon, every practitioner is different too. Surgeons have different styles, different levels of skill, and different degrees of experience. When new operations are introduced their performance follows a learning curve – as individual surgeons learn to perform new techniques, the results improve, which again is something that happens at a different rate for different operators.

These are all factors that make it difficult to standardize surgery and they present obstacles for using the most acknowledged methods of evaluation on surgical treatment. A case in point is the RCT. For RCTs, all the mentioned individual factors - on part of the patient as well as the surgeon - need to be taken into account. In the last couple of decades surgeons have developed ways of doing that, but the difficulties of standardizing surgery still limit the potential benefits of performing RCTs in this field of activity. In discussing these problems, it is important to consider that, historically, RCTs were first developed for drug treatment. Therefore they reflect the special conditions of innovation in drug treatment: the possibility of standardization, the regulation of drug licensing, the existence of pharmaceutical companies to organize and fund trials, a certain degree of public distrust towards the drug industry, etc. However, despite these specificities, the RCT has become the gold standard for other areas of medicine too, even though the conditions there might be very different. Especially surgery seems to be one of the few fields in which RCTs are not consistently used. However, if we think of where RCTs come from they might be very specifically suited for assessing drug therapy, and less so for surgery (or, for that matter, for other treatments that require individualization such as psychotherapy).

Surgery has traditionally employed a whole gamut of evaluation methods. In particular, case histories and collections of case histories have been used in the field since the eighteenth century. In the form of registries, which include every single case of the use of a new technology, this approach is still a very powerful means of evaluation since it is capable of capturing even relatively rare complications.

Even the use of placebos has had its place in the evaluation of surgical innovation. Placebos, which are already quite controversial in drug therapy, have been even more contentious in surgery – another phenomenon that points to the specificity of surgical evaluation.

In the light of investigation of social science and history, it makes sense to state that surgery has a special culture of evidence. This has to do with the fact that the immediate consequences of a surgical intervention are often quite obvious – a change in an anatomical structure is usually visible right away. Moreover, the success of fixing a problem as well as the consequence of a mistake in surgery can be ascertained relatively easily. However, the immediate repair of anatomical structures is only part of the story. Many examples in recent and not so recent history show that the impact of a treatment measure can - and often needs to - be evaluated in a longer-term perspective. Cancer treatment, for example, is rated by survival rates over a number of years (5-year survival, for example). Thus, the evaluation of a new surgical technique depends very much on the end point being measured – whether it is anatomical or functional reconstitution, or mortality and morbidity over longer periods of time.

We can see how another common theme in these discussions about evaluative evidence in surgery is the criteria for success and the question of who determines them. Here, patient expectations and choices can be an important factor. Often patients privilege guick and clean solutions to their medical problems, such as minimally invasive surgery (MIS) for gall bladder removal or osteosynthesis for bone fractures. Both innovations can be interpreted as cases of patient-driven innovation. However, at closer examination, even these examples turn out to be more complex than expected. Patient choices are often influenced by the way the various therapeutic alternatives are framed by the doctors or the ways they are presented by the mass media, not to mention the effects of direct-to-consumer advertisements as they are common in the United States. The investigation of patient preferences by social scientist and historians can expose these complexities and thus question and complicate narratives of patient-driven innovation. They can also show that, also in this respect, surgery is a special case. In surgery the end-user's – the patient's - choices are mediated by the influence of another user - the surgeon, who has a special position in relation to the selection and use of new techniques.

All of these examples demonstrate the usefulness of an interdisciplinary discussion of the topic. Such a wider discussion makes it possible to look at the issue of evidence in surgical innovation from very different angles and gain a more complete and realistic picture of the impact of technological change in surgery more generally.

Thomas Schlich, MD, PhD

James McGill Professor in the History of Medicine, McGill University, Department of Social Studies of Medicine

(Reprinted with permission from Aspire - Department of Surgery Newsletter, Jewish General Hospital)

Upcoming Events

Deadline: Steinberg Fund for Interdisciplinary Global Health Research Applications

Event

Deadline to apply: July 15, 2016 5PM (EST)



The Arnold and Blema Steinberg Family Foundation has recently given support to establish the Steinberg Fund for Interdisciplinary Global Health Research. This new Fund will support \$25,000 or \$50,000 non-renewable seed grants for McGill Faculty working in the global health field. These grants will be awarded to 12-18 month-long non-previously funded collaborations between McGill Global Health Researchers that address emerging global health issues to make these projects competitive for sustained external funding.

Click here to read more...

DEFINITIVE SURGICAL TRAUMA CARE (DSTC) ® COURSE

September 19-20, 2016

Montreal, Canada

We are offering a unique educational opportunity in advanced Trauma Surgery. The DSTC Course®, designed exclusively for Surgeons, is being held from September 19-20, 2016. The International Association for Trauma Surgery and Intensive Care (IATSIC), part of the International Society of Surgery, has since 1991 been an international forum for trauma surgery. The course was developed for qualified surgeons with trauma as an integral (although possibly infrequent) part of their practice and designed to assist in their decision-making and operative approach relating to serious trauma. DSTC is a response to the lack of written material and teaching on strategic issues of resuscitation, early definitive care, and surgical priorities. It assumes all of the ATLS® principles and builds on them.

REGISTRATION IS NOW OPEN.

SPACE IS LIMITED, SO SIGN UP TODAY!

To register, please contact: Sonia Primeau, DSTC Course Coordinator by email at

traumacourses.muhc@gmail.com

Click here to read more...

Divisional News, MUHC Division of Pediatric Surgery

video featuring the first minimally invasive repair of pectus carinatum in Canada was presented at the annual meeting of the American Pediatric Surgical Association in San Diego, California in May.

A **paper** on the Division's unique fellow exchange program with Kijabe Hospital in Kenya has recently been accepted by the Journal of Pediatric Surgery after many accolades from the reviewers, who felt that this model can be used by many other North American programs. The program's funding has been further solidified following an academic endowment from the Zoe Saskin Ski for the Children's Fund.

The first surgical resident to dedicate her research to global pediatric surgery has just joined the Division for one year. Her projects have received funding from CIHR

and FRSQ. The Division is in the process of working with McGill and the Montreal Children's Hospital to establish the first global pediatric surgery research fellowship in North America. On June 7-9, the Division hosted **Dr. Marjorie Arca**, Professor of Pediatric Surgery and Pediatrics at the Medical College of Wisconsin as the 20th annual **Frank M. Guttman Visiting Professor**. The 20th anniversary of the program also celebrated the endowment of this program at the highest level of any lectureship or visiting professorship at the Montreal Children's. The \$150,000 endowment by the Zoe Saskin Fund will support this major event at the conclusion of each academic year in perpetuity.

In February and March 2016, **Dr. Sherif Emil** joined the crew of the Africa Mercy docked in Tamatave Madagascar.

This was the first pediatric surgical mission to the Ship, which is the largest civilian hospital ship operating today. Dr. Emil shared his experiences through a series of short essays, Dispatches from the Africa Mercy. The dispatches can be read at: http://bit.ly/28C3eNj

Dr. Emil's pre-mission interview on CBC Radio can be heard at: http://bit.ly/1ro0u4x

Dr. Dan Poenaru attended the founding meeting of the The Global Initiative for Children's Surgery (GICS) held in London, England May 27 and 28. This new group is composed of children's surgical providers who

passionately believe that every child deserves the best surgical care when they need it, without causing the impoverishment of their families. The founding meeting included 27 providers of surgical and perioperative care for children from 18 low- and middle-income countries.



Back row L to R: Dr. Hayden Stagg, first year fellow, Dr. Dan Poenaru, Dr. Kenneth Shaw; **Middle row L to R:** Dr. Jean-Martin Laberge, Dr. Sherif Emil, Division Director, Dr. Frank M. Guttman, Dr. Robert Baird; **Front row L to R:** Dr. Pramod Puligandla, Program Director, Dr. Kartik Pandya, graduating fellow, Dr. Marjorie Arca, Frank M. Guttman Visiting Professor, Dr. Luong T. Nguyen



Dr. Sherif Emil

r. Armen Aprikian, M.D., Professor and Head, McGill Division of Urology and Dr. Simone Chevalier, McGill Director of Urology Research were pleased to host the 26th Annual McGill Urology Research Day on Wednesday May 18th, 2016 at the Glen site of McGill University Health Centre Research Institute (MUHC-RI). The central theme this year was on Bladder Dysfunction. We were delighted to welcome visiting professor **Dr.** Margot S. Damaser, Professor of Molecular Medicine from the Cleveland Clinic Lerner College of Medicine at Case Western Reserve University, invited by Dr. Lysanne Campeau, Assistant Urology Professor and Clinical Researcher at Lady Davis Institute. Among the 19 scientific presentations given by graduate students, urology residents, research fellows and associates, it was a privilege to hear Dr. Damaser who gave two state-of the art presentations, entitled Future of Regenerative Medicine for Pelvic Floor Disorders and The UroMonitor: An Innovative Approach to Ambulatory Urodynamics. With over 125 people in attendance, the research day gave a glimpse of the quality and breadth of research being done at the McGill Urology Division. The day concluded with a cocktail and a celebratory dinner held at the Glen-RI Atrium where



Dr. Margot S. Damaser, Visiting Professor of Molecular Medicine, Cleveland Clinic Lerner College of Medicine

awards were presented for the best three presentations received by **Dr. Turki Altaylouni, Dr. Alice Yu** and **Ms. Mona Wu**. Dr. Campeau concluded the event by presenting Dr. Damaser a gift on behalf of an appreciative McGill Division of Urology, where she would also give a talk the following

morning at Montreal's Jewish General Hospital's Lady Davis Institute for Medical Research entitled *Regenerative Medicine versus Tissue Engineering, which is best?* The evening concluded with closing words by **Dr. Cristian O'Flaherty**, who has been successfully moderating the event and abstract submissions for the past several years and by congratulating everyone who participated. Our selected McGill Urology Faculty Jury Members consisted of the guest speaker and **Drs. Roman Jednak, Maurice Anidjar, Teruko Taketo**. The continuous and generous support of our Pharmaceutical partners who support the event was acknowledged, the involvement particularly of **Ms. Chrysoula Makris** whose indispensable contribution throughout the years has made the McGill Urology Research Day's annual event successful and memorable. ◆



Dr. Simone Chevlaier, McGill Director of Urology Research



Urology Research Day Attendees



Back row L to R: Dr. Aprikian, Dr. Jednak, Dr. Damaser, Dr. Campeau, Dr. Anidjar and Dr. O'Flaherty; Front row L to R: Dr. Taketo, Dr. Yu, Dr. Chevalier, Ms.Wu, Dr. Altaylouni and Dr. Kassouf



L to *R*: Dr. Elhilali, Dr. Campeau, Dr. Damaser, Dr. Chevalier, Dr. O'Flaherty and Dr. Aprikian

Divisional News, MUHC

Division of Urology: 10th MUHC Men's Health Day, 2016

> n June 17, 2016 of this past Father's Day week, the Division of Urology of the MUHC organized the **10th Annual MUHC Men's Health Day**, a full day public health awareness event, at Carrefour Angrignon. **Drs. Armen Aprikian** and **Peter Chan** and **Ms. Lina Ordonselli** of the Division of Urology, the organizers of this event, were joined by a team of volunteers and healthcare professionals to promote various health issues pertaining to men.

WHAT IS MEN'S HEALTH?

The goal of this event was to educate the general public on various health issues either more commonly, or exclusively found in men. Common conditions such as prostate cancer, benign prostatic hyperplasia, voiding dysfunction, overactive bladder, erectile and sexual dysfunction, testis cancer, infertility, cardiac and respiratory diseases, and kidney and bladder cancers, were some of the key areas highlighted during the event. Increasing the public's awareness of these conditions, through educational events like the MUHC Men's Health Day, is the first step in achieving disease prevention and early diagnosis, the best strategies in combating diseases.

ACTIVITIES ON THE MUHC MEN'S HEALTH DAY

The public in attendance learned about various men's health issues from a team of skilled MUHC healthcare professionals. Additionally, all men were encouraged to participate in a free-of-charge healthassessment program, which included on-site consultation with an MUHC Urologist for a prostate examination, blood tests, urine analysis, and fitness and blood pressure measurements. This 10th MUHC Men's Health Day held the highest record of attendance in all years, with over 200 men participated in the free health-assessment program on site and close to a thousand men participated in the education activities.

Several patient support groups, including Prostate Cancer Network Canada-Montreal West Island, Quebec Cancer Foundation and Procure also provided information on the various support systems available to the public. The organizers were grateful to the team of MUHC nurses, lab technicians, secretaries, medical









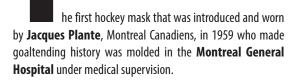
► and nursing students, residents, and fellows, who volunteered their free time the entire day to help promote public health awareness. Everyone benefited from the experience. The volunteers found the time they spent helping extremely rewarding, and the participants, who often have a hard time finding a doctor or who are too embarrassed to talk about men's health conditions, were able to have all their questions answered. The event was well publicized locally and nationally by CTV, Global news, Breakfast TV, the Montreal Gazette, La Press, CJAD, TSN and Jewel radio stations.

FINAL WORDS ON THE MEN'S HEALTH DAY

Since our first annual MUHC Men's Health Day in 2005, promotion of men's health has gradually become a global health and social

movement. The Division of Urology at the MUHC for years has taken a leading role in the promotion of men's health issues, both nationally and internationally. We are committed to promoting early detection and disease prevention to our population. Men, in general, are less health-conscious than women. They often ignore the early signs and symptoms of diseases, and neglect to follow-up with their doctors. It is therefore important for healthcare professionals to adopt a pro-active role in bringing public awareness to health-related issues through activities such as the Men's Health Day. It is our hope that the MUHC Men's Health Day will continue educating the public each year for many years to come. ◆

Did You Know?



Plante's mask was the product of a Canadian company called Fiberglass Canada. Bill Burchmore, a 35-years sales and promotional manager for the company, envisioned the mask. One evening he had gone to watch a game in which Plante was goaltending. He witnessed Plante getting hit in the forehead with a puck, resulting in a 45 minute delay of game while he was being stitched up. While at work the next day, Burchmore was looking at a fiberglass manneguin head when he realized the he could design a contoured,



Montreal Canadians hockey player Jacques Plante with his highimpact fiberglass mask

lightweight fiberglass mask that would fit the goalie's face like a protective second skin. Burchmore gave Plante his idea, and Plante was persuaded by his trainers to give it a try. A mold was taken of Plante's face. He had to put a woman's stocking over his head, cover his face with Vaseline, and breath through straws stuck in both nostrils while his head was covered with plaster. Burchmore layered sheets of fiberglass cloth saturated with polyester resin on top of the mold. The result was the flesh toned 0.125 in (52 mm) thick mask that weighed only 14 oz (397 g).

An innovator himself, Plante later began mass-producing his own masks of high-impact fiberglass and epoxy resin at Fibrosport, a company he established in Magog. His 1970s models retailed

for \$12 to \$18, while he sold a pro style, similar to what he wore, for \$22.50. ◆

Reprinted with permission from BY THE GAZETTE (MONTREAL) MARCH 4, 2006 "Molding an NHL legend" by Dave Stubbs http://bit.ly/29Vbglx

Photos source: http://bit.ly/29s2GVW



The Montreal Gazette, Saturday, December 12, 1959

Congratulations Orthopaedic R5 Graduates 2016



Dr. Khalid Alkhelaifi completed his Medical School at Weill Cornell Medical College after which he joined the Orthopaedic Surgery Training Program at McGill. During his residency, Dr. Alkhelaifi was known for his strong leadership traits and his dedication towards teaching. Being in the Resident Teaching Committee and some others has greatly enhanced his skills.

Dr. Alkhelaifi was also known for his contribution in research in the Orthopaedic Department. His investment in research has mainly focused on Trauma, Pediatrics, Spine and Sport.

Dr. Alkhelaifi will be doing his fellowship training in Detroit, USA at Henry Ford Hospital, in the Sport Surgery field. Once he is done, he will be returning to Qatar, his home country, and will be working at the prestigious Sports Medicine Hospital, Aspetar. He will be a part of the Medical Team covering many sport events in Qatar and the World Cup 2022. Dr. Alkhelaifi will also be fulfilling an academic role at Weill Cornell Medical College in Qatar.

Dr. Alkhelaifi is a proud father of two beautiful girls, Alya and Hissa. He owes all of his success to his supportive wife and family.



Dr. Asim Makhdom obtained his Medical School Degree with first honor from King Abdulaziz University in Jeddah, Saudi Arabia and received a Master Degree in Experimental Surgery at McGill University. Throughout his residency, Dr. Makhdom received multiple research awards including the Rising Star Award, Med Star Award, William Bruce Prize and the 1st place New Investigator Research Award (ACPOC, USA). He was recognized by the program to receive

the American Orthopaedic Association Leadership Award, and to Co-Chair the Annual Meeting of the Canadian Orthopedic Resident Association in 2014. He published 20 peer-reviewed articles with more than 36 abstracts accepted for presentation in National and International meetings. Asim will pursue a Fellowship in Hip and Knee Arthroplasty at Rothman Institute, Thomas Jefferson University in Philadelphia, USA. He will further his training with a second Fellowship in Limb Lengthening and Advanced Reconstruction Techniques at Hospital for Special Surgery, Weill Cornell Medical College in New York, USA. Asim is a proud father of Miryam and owes all his success to his supportive wife Dr. Ghada Abbas (Neurology Resident at McGill) and his parents.



Dr. Feras Waly comes from the beautiful city of Jeddah, Saudi Arabia. He obtained his Medical Degree from Umm AlQura University after which he fell in love with Orthopaedic Surgery. Dr. Waly joined McGill's Orthopedic Surgery Program in 2011. During his residency, he managed to publish multiple manuscripts and presented at multiple national and international meetings.

He found a true passion in Lower Extremity Reconstruction. After graduation, Dr. Waly will move to Vancouver, British Columbia to pursue a fellowship in Adult Foot and Ankle Reconstruction followed by a fellowship in Adult Hip and Knee Reconstruction at the University of British Columbia.

He is the proud father of Qussay and Jumanah. He owes all his success to the tremendous support of his wife and family.



Dr. Isabelle Mousseau entered the Medical Profession after a decade in the Canadian Armed Forces Reserve as a Paramedic and a Health Care Administrator, where she specialized in Trauma Team Deployment and received the Canadian Decoration. Her work took her to all corners of Canada and Europe, especially during her time with NATO.

After a degree in Biopharmaceutical Sciences and Genomics from the University of Ottawa, she completed a Master of Science in Molecular Biology at the University of Alberta. She attended Medical School at McGill University before entering the Orthopaedic Surgery Residency Program where she received a bursary from the Quebec Sports Medicine Association for her research in Arthroscopy Training.

Her proudest accomplishment is her son Olivier, born just in time to study for the Royal College Exam with her. Isabelle will then be heading to Toronto with her family for a Fellowship in Upper Extremity and Trauma at Sunnybrook Health Sciences Centre.



Dr. Maxime Beaumont-Courteau obtained his Medical Degree from McGill University before joining the Orthopaedic Surgery Residency Program. As a Medical Student and eventually as a resident, he competed in the pole vault as a member of the McGill Track & Field varsity team. A podium finish at the National Championships highlighted his athletic career

and he was twice named MVP of the Redmen Track & Field team. Upon graduating, he will be pursuing a Fellowship in Lower Extremity Reconstruction down under,

in Melbourne, Australia before returning to Canada to start a community practice.



Dr. Thierry Pauyo obtained his Medical Degree from Harvard Medical School before joining the Orthopedic Residency Program at McGill University. He played a very important role as Chief Resident during the Royal College accreditation process. Dr. Pauyo is also very involved in research and has won multiple awards for his great work during residency. He also is involved in International Aid

in Orthopedics in Haiti and other underserved areas.

He will be pursuing a Fellowship in Sports Medicine at Pittsburg University and a second Fellowship at Harvard's University in Pediatrics.

Apart from being an excellent physician and leader, Dr. Pauyo is also a talented hockey player playing for Harvard NCAA Varsity Team. He has been one of the key players in the Brown Cup at McGill for the past 4 years. He is also a father to his baby boy named Noah.



Dr. Ryan Coughlin graduated from McGill University Medical School to pursue his Residency in Orthopedics at McGill University. Prior to Medicine, Dr. Coughlin received a Bachelors of Science in Biology. Dr. Coughlin is interested in Sports Orthopedic Surgery and has had multiple publications in these topics during residency. Dr. Coughlin served as an Executive Board Member of the McGill Residents Association (ARM), as VP of the Physicians Resource Committee.

Dr. Coughlin will be pursuing a fellowship in Sports Medicine at Duke University.

Apart from Medicine, he has competed in intercollegiate golf at Canadian Nationals and has been a key hockey player in the Brown Cup at McGill University for the past 4 years.



Dr. J. Carl Sutton III received a bachelor's degree in Mechanical Engineering from Mississippi State University, where he played NCAA golf. He graduated from Medical College of Georgia, and then attended McGill University for his orthopaedic residency. During his residency he was published in orthopaedic journals and developed an interest in adult reconstructive and

sports medicine surgery. Dr. Sutton will be pursuing a fellowship in those areas at Detroit Medical Center. Upon completion of his fellowship, he plans to join his father's orthopaedic practice in Atlanta, GA.

Welcome to the New Surgery Chief Residents 2016-2017

DIVISION OF PLASTIC SURGERY PROGRAM DIRECTOR: **DR. MIRKO GILARDINO**



Dr. Anne-Sophie Lessard is a plastic resident. Born and raised in Quebec, she completed her M.D. degree at Université de Sherbrooke in 2012, and will complete Plastic Surgery training at the combined Sherbrooke/ McGill University program.

Having played the piano for 12 years before studying medecine, her passion for the hand and the creativity that she developped in plastic surgery made her pursue a renowned Hand Surgery fellowship in Miami, Florida, United States with Dr. Panthaki. Following her training, she will be working as a plastic surgeon, at Trois-Rivières while fulfilling her lifelong dream.



Dr. Hani Shash graduated from Al-Dammam University and completed his internship year in Al-Dammam, Saudi Arabia by 2010. He joined McGill Plastic Surgery in 2011. During his time at McGill, he earned his Master's of Science Degree in Experimental Surgery while working with Dr. Jake Barralet and Dr. Mirko Gilardino. Hani's notable efforts to enhance the

education of surgical residents distinguished him as leader in postgraduate education. For instance, he was able to lead and establish the McGill Plastic Surgery cadaveric flap course. He also won the McGill outstanding resident teacher award in 2016 next to other national meetings awards. During his residency he has managed to publish multiple manuscripts and present at multiple meetings. He will be pursuing a year of fellowship here at McGill in Craniofacial Surgery. Hani will then return to his home country Saudi Arabia as a Craniofacial Surgeon with the plan of establishing a Craniofacial Unit in the eastern province of Saudi.



Dr. Abdulrahman Alamri graduated from Taibah University in Madina, Saudi Arabia in 2009, then joined the plastic and reconstructive surgery program at McGill in 2012 and will be finishing his training program in 2017.

Abdulrahman was involved in research and publications throughout his training program as well as being interested

in improving his knowledge and skills in the field. He is proud to be from the McGill family and he appreciates the support of his family and colleagues during the training

DIVISION OF UROLOGY PROGRAM DIRECTOR: **DR. WASSIM KASSOUF**



Dr. Karim Courtemanche was born and raised in Ottawa, Ontario. He completed a bachelor's degree in electrical engineering at the University of Ottawa before completing his medical degree at Sherbrooke University. Since then, he has been training in the McGill urology residency program. After graduation he will be practicing as a community urologist. When he's not at work he enjoys

travelling and sailing.



Dr. Mohannad Alharbi graduated from Qassim University, Qassim, Saudi Arabia. He joined the urology residency program at McGill University in 2012. Upon completion of the residency, he will be pursuing a two-year fellowship in infertility and Andrology at McGill University. Mohannad Alharbi married his lovely wife, Maha Alharbi, in April 2012 and he is the proud father of son Abdullah. Following the completion of his training Mohannad will start his

academic career at Qassim University , Qassim, Saudi Arabia. He enjoys spending time with family and he's a soccer's fan.



Dr. Olivier Heimrath is from Toronto, Ontario. Upon completing his undergraduate degree in Kinesiology at Dalhousie University, he went on to complete his medical degree at the University of Ottawa. He then went to the McGill University Urology residency program where he is currently the academic chief resident for the urology residency program. Upon completion of his

residency, he will pursue a fellowship in Endourology in Toronto.



Dr. Mélanie Aubé-Peterkin grew up in Ottawa, where she graduated with a French Baccalauréat in Science from the Lycée Français Paul Claudel. She moved to Quebec City in 2007 to complete her medical degree at Université Laval. As part of a joint program, she completed the first three years of urology residency at Université de Sherbrooke, before joining McGill

for her final two years of training.

Mélanie's involvement in research has enabled her to present in conferences around the world, in cities such as Vancouver, San Diego and Nice, France. Last November, she was chosen by the Canadian Urological Association to represent her country in an international exchange program, located in Brisbane, Australia.

Aside from travelling the world for work and for pleasure, Mel is also an accomplished alpine skier and a horrible cook. Next year, she will be pursuing a fellowship in genitourinary reconstructive surgery, at the Eastern Virginia Medical School in Norfolk, VA. ◆

FOR YOUR INFORMATION

PODCASTS form the Simnovate International Summit

"Innovations in global health care" held in May 2016 in Montreal are available on the Sim Centre web site: http://bit.ly/28ZKW0z

Visiting Professors

26th Cedars Cancer Foundation EJ Tabah Visiting Professor in Surgical Oncology

n March 9 and 10, the Department of Surgery and the Department of Oncology welcomed **Dr. Ronald P. De Matteo** as the 26th Cedars Cancer Foundation - EJ Tabah Visiting Professor in Surgical Oncology at the MUHC and McGill University. Dr. De Matteo is currently Head of the Division of General Surgical Oncology and Leslie H. Blumgart Chair in Surgery at the Memorial Sloan-Kettering Cancer Center in New York. In addition to his clinical interests in the treatment of HPB malignancies and gastrointestinal stromal tumors, Dr. De Matteo runs a fully funded NIH research laboratory which focuses on immune responses and tumor immunology.

Philip Gordon Visiting Professorship

he 6th of April marked the debut of Colorectal academic half day and the first annual **Philip Gordon visiting**

The visit began with a tour of McGill's famous Osler Library and was followed by a visit of the Research Institute's new facilities at The Glen where Dr. De Matteo heard presentations by researchers from both **Dr. Ferri** and **Dr. Zagopoulos**' laboratory staff. On the afternoon of March 9th, Dr. De Matteo updated us on the role of surgery and targeted therapy in the management of gastrointestinal stromal tumors. This was followed by a series of case presentations from the Surgical Oncology and HPB fellows. Many thanks to **Drs. Oz Yakir, Radhakkrihnon Ganesh, Eve Simoneau** from the HPB Service and to **Drs. Ali Samkari** and **Nora Trabulsi** from Surgical Oncology for helping to make the afternoon both stimulating and informative. On March 10, Dr. De Matteo lectured at the McGill wide Surgical Grand Rounds on current principles of targeted therapy.

The Department of Surgery is grateful to Dr. De Matteo for having taken the time to visit McGill as this visit furthered our international academic and research links. The Department is also grateful to the Cedars Cancer Foundation for funding of this program in honor of one of its founders, the late Edward Tabah, MDCM. ◆

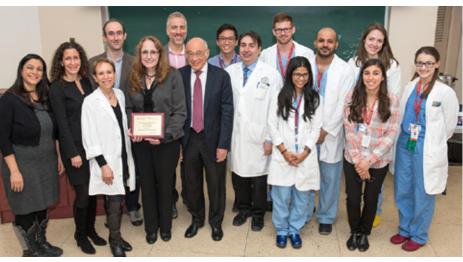
professorship. We were honoured to have **Dr. Tracy Hull**, Professor of Surgery in the Department of Colorectal Surgery at Cleveland Clinic Ohio as our first visiting professor. The first morning of her 2 day visit was spent with the JGH Colorectal research group during which time she lectured to the students & residents on the importance of mentoring. In addition she commented on the wide array of research projects that they presented. In the afternoon, she spoke to the residents on lessons

> learned in colorectal surgery and chaired a series of colorectal debates on interesting & controversial topics in colorectal surgery. She also challenged the senior residents with colorectal exam scenarios in preparation for their upcoming Royal College exams. At Thursday morning's Grand Rounds, Dr. Hull gave an excellent talk on re-operative pelvic surgery in which she provided very valuable pointers on how to tackle complex enterocutaneous fistulas and other redo nightmares that we encounter in the pelvis.

> Excellent feedback was received from the residents and attending staff following these sessions. \blacklozenge







Visiting Professors Stikeman Visiting Professorship 2016

n May 5th, 2016, **Dr. David S. Mulder**, H. Rocke Robertson Professor of Surgery, McGill University and Senior Surgeon, Division of Thoracic Surgery, Montreal General Hospital, McGill University Health Centre, was the **48h Stikeman Visiting Professor** to the Divisions of Cardiac and Thoracic Surgery. At Surgical Grand Rounds in the Osler Amphitheatre of the Montreal General Hospital, Dr. Mulder spoke on *An Airway Odyssey.* This was followed by laboratory and clinical research presentations by the residents of both Divisions. After lunch, there were presentations by alumni who came back to pay tribute to Dr. Mulder.



Dr. David Mulder

This special occasion was well attended by staff and the former staff who attended were **Drs. Jean E. Morin** and **M.S. Chughtai**. The alumni from out of town who attended this year's event were **Drs. Vinay Badhwar, Tom Burdon, Michael Dewar, James Dutton, Lee Errett, Samantha** Hill, David Latter, Stephane Leung, Fahd Makhdom, Reza Mehran, Muhieldin Muhieldin, Dao Nguyen, Marc Pelletier, Salim Ratnani, Alan Turnbull, and Garrett Walsh.

The annual banquet was held at the Mount Royal Club in honour of the Visiting Professor and our graduating residents – **Drs. Jennifer Chung** and **Mazin Fatani.**

It was a pleasure to honor Dr. Mulder as the 2016 Stikeman Visiting Professor to the Divisions of Cardiac and Thoracic Surgery.

Orthopaedic Department Visiting Professor 2016

he McGill Orthopaedic Department was pleased to welcome **Dr. Robert Trousdale** as its Annual Visiting Professor May 11 to 13th, 2016. Dr. Trousdale is an accomplished clinician and researcher who is currently the Chair of the Adult Reconstructive Division at Mayo Clinic in Rochester, Minnesota. Shortly after arriving in Montreal, Dr. Trousdale met several residents and staff on the squash courts for a friendly round-robin followed



Dr. Robert Trousdale playing squash with residents and staff



Recipients of the 2016 Eugene Rogala Research Awards from L to R: Dr. Robert Trousdale (Visiting Professor), Dr. Maxime Beaumont-Courteau (Third Prize), Dr. Magadalena Tarchala (Second Prize), Dr. Adam Hart (First Prize).

by dinner with the residents. The following day, Dr. Trousdale gave Multidisciplinary Surgical Grand Rounds at the Montreal General Hospital on Orthopaedic Practice at the Mayo Clinic. The day continued with case presentations and the Resident Research Paper Competition, highlighting thirteen projects from our department. The day concluded with the Annual Department Dinner at the St-James Club where we achieved a record attendance of 147 members of the department. The events concluded the following morning at the Jewish General Hospital where Dr. Trousdale participated in more case discussions and lectures. The entire department was left with plenty of food for thought and was honored to have Dr. Trousdale visit our institution. ◆

Visiting Professors Flanders Visiting Professorship 2016

he Flanders Visiting Professorship took place on March 24th, 2016 with **Dr. Elie Fadel**, Professor and Head of the Department of Thoracic and Vascular Surgery and Heart Lung Transplantation, Marie Lannelongue Hospital and the Université Paris-Sud, France as this year's Visiting Professor. Dr. Fadel's talk at Surgical Grand Rounds was titled *Extended Resections for T4 Lung Cancer*. There were case presentations as well as research presentations at both the MGH and the Glen sites with the Thoracic Surgery Group. Dr. Fadel then gave a second talk at Lung Cancer Tumour Board entitled *Treatment of N2 Disease* – *The Marie-Lannelongue Experience*.

That evening, a dinner hosted by **Mrs. Kappy Flanders** was held at the Mount Royal Club in honour of the Visiting Professor.

14th Annual L.D. MacLean Visiting Professor

he McGill Division of General Surgery celebrated the **14th Annual L.D. MacLean Visiting Professor** on May 18th and 19th, 2016. This Visiting Professor Program honours Dr. L.D. MacLean's years of leadership and promotion of excellence in academic surgery.

This year the division welcomed **Dr. Rebecca M. Minter**, the Alvin Baldwin Jr. Distinguished Professor of Surgery at the University of Texas Southwestern Medical Centre.



Drs. Feldman and Fried with the L.D. MacLean visiting professor Dr. R.M. Mitner

Dr. Minter is the Vice Chair of Clinical Operations and Finance and Chief of Hepatopancreatobiliary Surgery Section. Her academic interests centre on surgical education, particularly the development of autonomy. She is the president of the Society of University Surgeons and President-elect of the Americas Hepato-pancreato-Biliary Association (AHPBA).

After a visit to the Osler Library in the morning and lunch with the residents, Dr. Minter opened the activities Wednesday afternoon with a



Graduates

talk entitled *Contemporary Management of Borderline and Locally Advanced Pancreatic Cancer.* This was followed by 15 research presentation chosen from almost 20 abstract submissions. The mixture of clinical, education and laboratory presentations well represented the range of research in the division.

Once again, the debates were a highlight. In the first debate, **Dr. Noura Alhassan** faced off against **Dr. Eve Simoneau** in the controversial topic of management of incidental side branch IPMNs: should the AGA guidelines be followed? This was a close decision but the audience sided with Dr. Simoneau. The second resolution addressed whether the new competency based models will improve residency training, with **Dr. Kate McKendy** arguing for the resolution and her colleague **Dr. Sara Najmeh** arguing against. The audience sided with Dr. Najmeh for this one. All four debaters had cogent, thoughtful, logical arguments and managed these difficult topics with aplomb.

The banquet celebrating our 13 graduating chief residents was held later that evening at Hotel Sofitel Golden Mile and was well attend by faculty and residents for all the McGill teaching hospitals.

Dr. Feldman welcomed everybody and moderated the evening's festivities.

DR. FERRI ANNOUNCED THE RESEARCH PRESENTATION WINNERS, INCLUDING:

- **Dr. Phil Vourtzoumis:** Best Laboratory Science Presentation. The role of CEACAMI in neutrophil extracellular trap mediated cancer metastasis.
- **Dr. Amin Madani:** Best Clinical Science Presentation. What are the Principles that Guide Behaviors in the Operating Room? Creating a Framework to Define and Measure Performance.
- **Dr. Maria Abou Khalil:** People's Choice award, Impact of Immunosuppressants on Post-Operative Complications following colectomies for Crohn's Disease: Results from ACS-NSQIP Database.
- **Dr. Amin Andalib** received the Division Faculty Research Award for his project *Single Anastomosis Duodenal-ileal Bypass with Sleeve Gastrectomy (SADI-S): A prospective cohort study.*

Dr. Maria Abou Khalil, President of the McGill General Surgery Residency Committee, recognized the following people for their teaching contributions, as voted by the residents.

- Dr. Jean-Francois Boileau received the Outstanding General Surgery Teacher Award
- Dr. Jody Bothwell won the Outstanding General Surgery Community Teacher Award
- Dr. Mohammed Shaheen won the Roger Tabah Resident Teacher Award
- Dr. Sara Najmeh won the CAGS Resident Teacher Award
- **Dr. Nora Trabulsi** (Surgical Oncology Fellow) won the Outstanding Fellow Teacher Award.

Dr. Simon Bergman, Director of Undergraduate Education, presented the David Owen Undergraduate Teacher Award to



Dr.Turnbull and Dr. Fried

Dr. Sebastian Demyttenaere and the Outstanding Resident Undergraduate Teacher Award to **Dr. Tanya Castelino**.

The following graduating Fellows were presented by their Program Directors: Dr. Mohammed Al-Mahroos (MIS), Dr. Aly Elbahrawy and Dr. Saeed AlShwli (Bariatrics), Dr. Oz Yakir (Hepatobiliary), Dr. Mooyad Ahmed, Dr. Philippe Parent and Dr. Saud Al Zaid (Trauma) and Dr. Nora Trabulsi (Surgical Oncology).

Dr. Phil Vourtzoumis gave us a quick overview of his experience travelling to the Netherlands thanks to the 2015 Julius Gordon Travel Award. This year's recipient will be **Dr. Etienne St-Louis.**

Dr. Paola Fata recognized **Dr. Hussam Alamri** as the winner of the Resident Leadership Award.

Dr. Fata then introduced our 13 graduating chief residents, Drs. Jad Abou Khalil, Haytham Al Abbas, Ahmed Al Khamis, Husain Al Mahmeed, Abdullah Al Oraini, Ioana Antonescu, Jonathan Cools-Lartigue, Stephen Hanley, Lawrence Lee, Armen Parsyan, Mohammed Shaheen, Marc Dakermandji and Monisha Sudarshan. The audience was impressed with their many individual achievements and success in obtaining prestigious fellowships. The residents presented a humorous video they prepared in honour of the graduates.

Dr. Fried closed the evening thanking everyone for attending. He also thanked Dr. Minter on behalf of the Division for her participation. She was a superb and inspiring visitor.

The following morning Dr. Minter spoke at Departmental Grand Rounds on *Would I Trust You to do my Whipple? Progressive Entrustment in the Operative Room,* concluding an inspiring LD MacLean Day.

The division thanks **Domenica Cunzo** for all her work organizing the event, to **Rita Piccioni**, **Jessica McCaffrey** and



Dr. Jean Tchervenkov and residents Drs. AlMahmeed, AlMahroos and AlKhamis

Bruna Salhany for help and photography, and to the sponsors, including The Division of General Surgery Academic Fund



Drs. Bergman, Tabah, Lee, Paci, Cools and Fata



At the banquet

as a gold sponsor, ConMed as our silver sponsor, and Medtronic and Karl Storz as bronze sponsors.



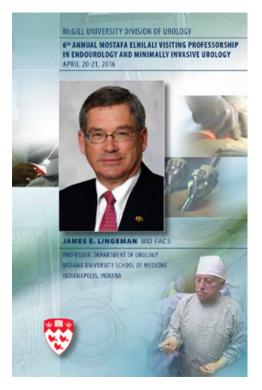
Drs. Fried, Turnbull, Minter and Fleiszer



Residents Drs. Trabulsi, Alhassan, Lamees and Almana

6th Annual Mostafa Elhilali Visiting Professorship

he Division of Urology held its 6th Annual Mostafa Elhilali Visiting Professorship in Endourology and Minimally Invasive Urology on April 20-21, 2016 with **Dr. James Lingeman**, Professor, Department of Urology, Indiana University School of Medicine as the guest speaker. Dr. Lingeman gave two lectures, one at the McGill Urology Grand Rounds on The Renal Papillae: Ground Zero for Stone Formation and the other at the McGill Surgical Grand Rounds on *The Ascendency of Ureteroscopy in the Management of Stone Disease*. Both lectures were very well attended and appreciated. ◆



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disciplinary approach



Baird Mallory (Smith)

has become the Director of Surgical Services for an employed group of more than 90 surgeons and 50 APP's

KUDOS !!

at Maine Medical Center in Portland. He is also Associate Director of the

Surgery Service line which manages the OR's and the Pre-operative Readiness and Education Program (PREP). This is balanced with ongoing clinical activities in a group of 5 Pediatric surgeons, 3 of whom trained at McGill (Neilson, Mallory, Pandya). He also became Chairman of the Board of Maine Medical Partners, a group of 500 physicians and 200 Advanced Practice Professionals.

Dr. Simon Bergman would like to congratulate Drs. Tassos Dionisopoulos and Chantal Janelle who received Faculty of Medicine Excellence in Teaching awards for the TCP students (2nd year students). He would also like to thank Dr. Sebastian Demyttenaere and his assistant Michael **Glisserman** for their continued stewardship of the extremely successful TCP program.



Drs. David Eidelman, Tassos Dionisopoulos and Chantal Janelle

Dr. Saber Ghadakzadeh, PhD candidate at Experimental Surgery who works with Dr. Reggie Hamdy at Shriners Hospital and Dr. Maryam Tabrizian at Biomedical Engineering was selected as one of the 5 international recipients (the only Canadian candidate) of The Young Investigator Award from ASBMR (American Society of Bone and



Dr. Saber Ghadakzadeh

et biologie orofaciale).

Mineral Research) in April 2016. This award also sponsors the travel to attend the European Calcified Tissue Society (ECTS) Ph.D. Training Course in Oxford University, United Kingdom. In March 2016 he



to the study of male reproduction, and exists to promote scientific interchange and knowledge of the male reproductive system.

Dr. Cristian O'Flaherty was awarded a Chercheur-boursier Junior 2 from the "Fonds de la Recherche du Ouébec, Santé (FRO-s)" on his project "Regulation of redox signaling in male reproduction".

Dr. Wassim Kassouf was awarded a "Senior Chercheur-Bousier Clinicien", from the Fonds de la Recherche du Québec, Santé (FRQ-s). His research focuses to improve the prognosis of patients with invasive bladder cancer.

Dr. Alice Dragomir was awarded a Scholarship (Junior 1) funded from "Fonds de la Recherche du Québec, Santé (FRQ-s)" an "Établissement de jeunes chercheurs" Junior 1 for her research program aimed at "Creating the best clinical and economic evidence to support decision-making in prostate cancer".

Dr. Amin Madani, R4 General Surgery, McGill University had successfully passed in June the oral defense for his PhD in experimental surgery. The title of his thesis was Thinking and Behaving Like an Expert Surgeon: Understanding, Teaching and Assessing Advanced Intra-Operative Cognitive Skills.

Dr. Stephanie Thibaudeau, Plastic Surgery, is happy to return to McGill after two years of Hand and Upper Extremity Fellowship at University of Pennsylvania, with a new addition to her family, Nicolas, born May 31st, 2016! Congratulations!

also received The Best Poster Presentation

Award (ePrix de la meilleure présentation

par affiche) from RSBO (Network for Oral and

Bone Health Research) Basic Research and Technological Developments in Health and

Oral-facial Biology (Recherche fondamentale

et développements technologique en santé

Dr. Vivian Stavrakos, Dr. Ferri's Master's student, received the prestigious Frederick

Banting and Charles Best Canada Graduate

Dr. Ferri's Master's student, Dr. Phil Vour-

tzoumis' work on The Role of Ceacam-1 and

NETS was accepted for poster presentation

at American Association of Cancer Research

2016, New Orleans, LA. He also traveled to

Utrecht, Holland and spent a week with

collaborators researching abdominal Imaging

Window Technique made possible by his

Julius Gordon Research Travel Award 2015.

Phil also presented his work relating to the

Role of Ceacam-1 and NETS at Stikeman Visiting Professor Day 2016, as well at LD

MacLean 2016 Podium presentation where

he received the Best Laboratory Science

Dr. Peter Chan was promoted to Full

Professor with tenure in the Department

This year's Everett C. Reid Award for Excellence

Dr. Cristian O'Flaherty PhD, DVM, Urology

Division, Associate Professor, Department of

Surgery, has been elected member of the

Executive Council of the American Society

in Teaching went to Dr. Nader Fahmy.

Presentation Award.

of Surgery (Urology).

Scholarship-Master's Award from CIHR.



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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:

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