New Institute Promises Social Change

3. Preventive Medicine at the Simulation Centre
4. New Institute Promises Social Change
6. Big Results for Mini-Med School
7. McGill Luminaries: Michael Meaney and Moshe Szyf
8. New Option for Cancer Care
9. McGill… Building for the Future
10. News from Development and Alumni Relations
15. Faculty Update
DEAR ALUMNI AND FRIENDS,

I hope the latest issue of the Faculty of Medicine newsletter finds you in good health and celebrating the advent of spring.

Inside you will find a report on the impact of our Mini-Med School program, which was introduced to McGill through the efforts of Kappy Flanders, Melvin Schloss and Yvonne Steinert. This program has been hugely successful, bringing people of all ages from the Montreal area to learn about new developments in various fields of medicine.

Among the past year’s significant events was December’s groundbreaking ceremony for the Francesco Bellini Pavilion. The Pavilion will be a cardinal element of the Life Sciences Complex, and a mainstay for the recruitment of outstanding young talent to life sciences research.

You will read about the Institute for Health and Social Policy, under the leadership of founding director, Professor Jody Heymann. The Institute will be an important research and training facility for those working on international health and social change.

There is much more, including an article on the work of Dr. Zeev Rosberger and Dr. Gerald Batist, whose project will help integrate a number of new approaches to cancer care, and a story about an unusual collaboration between two professors from very different disciplines.

The contents of this newsletter indicate what a very exciting and fruitful time it is for the Faculty of Medicine and, in fact, the University as a whole. I would like to reiterate my invitation to all alumni and friends to come and visit and see the wonderful projects that have been brought to fruition with your help, encouragement and support.

With all good wishes for a happy and healthy summer season,

With collegial regards,

Abraham Fuks, BSc’68, MDCM’70
Dean, Faculty of Medicine
The McGill Medical Simulation Centre promises state-of-the-art training for health care professionals at the University, and construction is now underway at its new location in the LaCité complex near the downtown campus – a change from the original plans that had the Centre at the former Queen Elizabeth Hospital.

Dr. Kevin Lachapelle, MDCM’88, Director of the McGill Medical Simulation Centre, says that bringing all the different types of simulation modalities under one roof, as McGill is doing, is a concept that’s getting a lot of attention. “There’s a large push, and we feel the crest of the wave now in terms of designing these centres throughout North America.” The Mayo Clinic recently completed their own centre, and the model is now popping up at most Canadian medical schools.

Lachapelle sees simulation-based training as multi-layered. Educators can start with basic issues like communication and diagnosis, and then add on, layer by layer, as the students gain experience. The training progresses from treatment through ER scenarios to complete team training exercises with nurses and therapists that recreate complex clinical situations. Teaching methods will incorporate patient actors as well as simulators that range from inanimate models for basic surgical skills to virtual reality that recreates a specific procedure. There are even sophisticated, computer-based mannequins that can be programmed to respond physiologically to medication, or to tasks being performed. Every aspect of the training can be recorded and analyzed in the simulation labs, so that when it comes time to treat real patients, the likelihood of error is greatly reduced.

The new methods are “a way of introducing a very different culture to medical training,” says Lachapelle. “You can make mistakes in a simulation centre. It’s OK to make mistakes there, because we want to learn from them. At the end of the day, we’re doing all of this because we want to improve patient safety. Simulation-based medical training is like preventive medicine.”

Construction is due to finish in July 2006, and the Medical Simulation Centre will open its doors in September.

“In the great Oslerian tradition of improving clinical training and patient care, McGill is taking a large step into the future of medical education.”

Kevin Lachapelle, Director of the McGill Medical Simulation Centre.

“At the end of the day, we’re doing all of this because we want to improve patient safety. Simulation-based medical training is like preventive medicine.”
Dr. Jody Heymann’s journey to McGill as the founding director of the Institute for Health and Social Policy began, at least in part, in Tanzania.

“My first job out of college was working there as a fish farmer, teaching people how to raise fish,” she says. “It was the fourth poorest country in the world and protein malnutrition was severe. Fish farming was a way to address the most basic of health conditions: nutritional needs.”

Heymann was living in a small rural hospital and saw first-hand the connection between health and social conditions. Whether it was through the villager down the road in a leaky thatched hut who contracted malaria and got sicker and sicker as the rain poured in, or in the children with no access to milk, fruits or vegetables. The grim interaction between health and social conditions was unavoidable. “It was clear in our daily lives,” says Heymann.

It’s also the core idea behind McGill’s institute, a joint project established by the Faculties of Medicine and Arts. Poverty, education, neighbourhood conditions, support networks, family and community – “all of those have a bigger impact on your health than medical care,” says Heymann. “Medical care may take care of you once you’re sick, but it is not the major determinant of whether you get sick.”

Heymann comes to McGill from Harvard, where she was Director of Policy at the Harvard Center for Society and Health. She graduated from the Harvard Medical School in 1989 and received her PhD in Public Policy from Harvard University in 1992. Part pediatrician and part policy analyst, she is now the Canada Research Chair in Global Health and Social Policy at McGill and feels the University is exactly the right place for her and the Institute. “McGill has enormous strength in medicine and in the social sciences. And the University is so good at working across faculties. An initiative like this absolutely requires that.”

The Institute will tackle a wide variety of social policies and conditions from a public health perspective. Labour standards, the social effects of AIDS, and child poverty are just some of the issues that will be the focus of research by institute members, locally and around the world. “We have a real mandate around Canada and Quebec but we also have a very big global mandate,” says Heymann.

They’ll also be working to translate the research into programs that have a real impact, by reaching out to policy-makers and international bodies like the World Trade Organization (WTO) and the World Health Organization (WHO). Building on existing contacts in organizations such as the WHO and UNESCO, as well as creating new ones, will be a crucial part of getting the research into the hands of those who can act on it.

The research is as broad as it is detailed. Heymann offers one example from her previous work on a study with the Canadian Institute for Advanced Research and the Project on Global Working Families, a program she founded at Harvard and has brought with her to McGill. The largest study of its kind on the problems working-poor families and their children face worldwide, it included exhaustive survey research on 55,000 households in eight countries and five continents, and policy analysis of 170 countries around the world.

She tells a harrowing story of a 19-year-old mother she interviewed for the study in Honduras who lived with her baby in a hut made of scrap wood and cardboard and who worked 19- to 22-hour shifts, seven days a week, for a multinational that paid her $26 every two weeks – and kept $14 for the one meal it fed her each day.

“It’s a classic story of how social conditions impact on health. The woman lived in this house with no walls, her child had regular infections, and when the child got sick she couldn’t bring her to the hospital because she couldn’t take time off from work. Otherwise,
she’s nineteen, her kid’s eighteen months, there’s no reason they couldn’t be in perfect health.”

Stories such as these are found in Heymann’s new book: Forgotten Families: Ending the Growing Crisis Confronting Children and Working Parents in a Global Economy (http://www.mcgill.ca/ihsp/publications/). It paints a portrait of growing global squalor amid ill-conceived economic and social policies. But lest we think the problems are confined to developing countries, Heymann and her colleagues have research, and will be conducting more, that takes a hard look at our own societies.

Take the United States: Heymann’s research on labour conditions affecting health has shown the U.S. ranks near the bottom of a list of more than 160 countries when it comes to policies like paid maternity leave, paid sick leave and maximum work hour legislation.

“So there absolutely are needs in industrialized countries as well, and there are lessons to be learned across countries.”

Some of those lessons will be topics in a teaching case series the Institute is developing, a worldwide first in the public health arena. Business schools, law schools and medical schools feature teaching cases regularly, Heymann points out. “But public health schools, by and large, don’t have public health cases. Certainly not any that would be both North American and global in scope.”

She has studies of companies in Canada and around the world that are bucking labour policy trends, improving conditions for their workers while succeeding economically, and they’ll be among the Institute’s first case studies. While a common complaint from business lobbies is that labour protections will drive jobs away and leave only high unemployment, Heymann argues, “It’s just not true. We looked at countries that protect paid sick leave, paid vacation leave and maximum hours, and we looked at their unemployment rates. No relationship.” The relationship between labour practice and health, however, is much more clear, as Heymann’s studies have shown, and the research has been used successfully to advocate for paid sick leave in California, and again in legislation that’s now been drafted for the U.S. as a whole.

Another important initiative for the Institute will be working on the AIDS orphans issue, in collaboration with the Faculty of Education. There are 15 million children worldwide who have been orphaned by AIDS and a UN/WHO report predicts the number will rise to 18 million by 2010. There will be countries, says Heymann, where a devastating 20 to 40 per cent of all children will be orphans. “This completely changes the fabric of those societies. It completely changes the lives of the kids but it also changes what can go on in terms of getting the job of a society done, economically surviving, and communities having social networks. So that’s a central issue for us to be working on.”

The Institute only opened its doors in September 2005 but by October they had already co-hosted an international conference at McGill with the WHO, which focused on how trade affects health in a wide range of ways: the availability of medicines, the impact on poverty and inequality, the accessibility of doctors and nurses in a community. Out of that grew presentations at the WTO meetings in Hong Kong in December.

Heymann and her colleagues – a team of seven, so far, that includes research associates and assistants and will expand with more research chairs as the Institute grows – are busy making connections across the University. Heymann mentions many, including Gilles Paradis, MSc’87, from the Department of Epidemiology and Biostatistics, who is an advisor physician for the Institut national de santé publique du Québec and Amélie Quesnel-Vallée, whose research in medical sociology dovetails perfectly with the Institute’s mandate. Heymann points to McGill alumni as well. “There are undoubtedly many of them working on very salient issues, on poverty in urban areas in Canada, on AIDS, on global health and social policy and we’d love to hear from them.”

That networking is an inextricable part of the Institute’s mission. “Most of the world’s biggest problems that are at the intersection of social conditions and health are going to require a wide range of resources,” says Heymann. “And that means you have to be a university that really knows how to build well across its strengths. And McGill does that. I wouldn’t have come otherwise. They do it for real here.”
McGill’s Mini-Med School has been the hottest ticket on campus since its inauguration in 2001. The program, initiated at McGill by Kappy Flanders, a member of McGill’s Board of Governors, features presentations by the top medical minds in the Faculty.

“We’ve been selling out each session and have a waiting list of hundreds,” says Dr. Melvin Schloss, who was Associate Dean of Continuing Medical Education when Mini-Med fever began. Flanders learned of the concept while attending a conference in Dublin. She flew to Denver to hear Mini-Med creator Dr. J. John Cohen, BSc’59, MSc’60, PhD’64, MDCM ’68, speak to a branch of the McGill Alumni Association and, by the time it was over, she knew McGill had to launch its own program.

“I took this big binder to Yvonne Steinert, Associate Dean, Faculty Development, and plunked it on her desk,” she says, “I told her I thought it was sensational.”

Steinert did too. “I’ve always been a strong proponent of community outreach,” she says. “To me that’s the most important part of Mini-Med,” she says. She presented the idea to Dean Abraham Fuks, who threw his full support behind the program.

Its popularity may lie in the convergence of a smart idea and a public eager to learn more about human health, but developing the first session at McGill was also a lot of work. Steinert, Schloss and Flanders developed the curriculum, choosing topics and preparing speakers. “The concept is to deliver a lecture series that’s comparable to a first-year medical class,” says Schloss. “We don’t want to talk down to the audience—we want to challenge them.”

Selecting lecturers was a rigorous process. “It was important that they present the material in a way the audience would understand, and that they would be passionate about their topic,” says Steinert.

During the first years, lectures covered basic science topics like anatomy, physiology, microbiology and pathology. Mini-Med II, launched last year, focused on the clinical side of medicine and how physicians and other health care professionals think, with presentations supplemented by audiovisual materials custom-developed by the McGill Molson Medical Informatics Student Project. “There’s a considerable amount of interaction between the lecturer and audience,” says Schloss, “and there have been videos of procedures such as heart surgery, endoscopic surgery and interventional techniques in radiology—they see exactly what goes on.”

Student participation has been important, too. Approximately 100 places are reserved for high school and CEGEP students. “We want to introduce students to both the University and the Faculty of Medicine early,” says Steinert, who has received letters from students who decided to pursue careers in medicine after attending Mini-Med.

The Mini-Med phenomenon has also spread across the City of Montreal under the administrative eye of Dr. Schloss, who launched similar programs at the Montreal Children’s Hospital. The McGill lectures have been broadcast to Macdonald Campus, and those at the Children’s Hospital were transmitted live via computer to small towns in northern Quebec.

And the mini-contagion continues to spread. Last year, Kappy Flanders, whom Schloss calls “the Dean of Mini-Med School,” started an equally successful Mini-Law School, and now has a Mini-Music School in the works. “I’m having good fun doing all of it,” she says. Rave reviews suggest participants are too.
What brings together a cancer expert in epigenetics and a professor of psychiatry and neurology, with results that seem to have opened a very wide door to the future of medical research and clinical care?

“Serendipity,” says Dr. Moshe Szyf. “Sometimes it’s being in the right place at the right time that creates scientific ideas.”

The right place, as it turns out, was a conference in Madrid. The resulting partnership between Szyf and Dr. Michael Meaney created quite a scientific ripple, when their findings regarding the environmental regulation of gene expression, based on experiments on maternal care in rats, were published in *Nature Neuroscience* in 2004.

Szyf, a James McGill Professor in the Department of Pharmacology, had long been working on the principles of DNA methylation – in which chemical tags called methyl groups attach to DNA and affect gene expression – and its effects on cancer. In 1999, he discovered an enzyme called demethylase and showed that DNA methylation was a reversible signal, a kind of DNA on/off switch that has potential for anticancer therapies. He was one of the earliest researchers in the still-emerging field of epigenetics. The genome may get most of the press, but the epigenome seems to be doing a lot of the work. Epigenetic markings on the genome work something like punctuation, explains Szyf. Change punctuation and you potentially change the expression and meaning. With DNA, that grammar exercise could mean the difference between health and disease.

Michael Meaney, Associate Director of Research at the Douglas Hospital Research Centre had received awards for his work on stress, and was an expert in maternal care and early development – not the usual domain of scientists like Szyf. Meaney says, “I could have met 100 cancer biologists, absolutely none of whom would have been in the least bit interested in collaborating on anything as far-fetched as maternal regulation of the epigenome.”

In 2000, the two began combining Meaney’s research into the behavioural effects of rats licking and grooming their offspring with Szyf’s expertise in epigenetics. The results were radically new, showing that a mother’s nurturing of her young modified them at the epigenetic level. Well-nurtured rats showed better responses to stress; less nurtured rats were more anxious and fearful. The scientists then induced the behavioural and epigenetic differences chemically with Trichostatin A: nervous rats became more confident. Introducing the amino acid methionine caused the well-adjusted rats to become anxious. The changes were stable and permanent: DNA methylation had altered the glucocorticoid receptor gene in the hippocampus of the rats’ brains. The scientists had tripped the epigenetic mechanism that affected the expression of the rats’ genes.

“That’s really a major leap,” says Meaney. “Because what it means is that these cells have the ability to change in ways that we never anticipated.”

“Sometimes, it’s being in the right place at the right time that creates scientific ideas.” – Dr. Moshe Szyf

Moving from changing the epigenetic markings that release stress hormones in rats to figuring out equivalent epigenetic changes in humans will be one of the next big leaps. Environmental effects that cause the changes can be maternal care, as they’ve shown, but also food, or drugs that could potentially be used to manipulate gene expression. In addition to the epigenetic potential in cancer therapies, Szyf and Meaney point to examples of diseases they believe have an epigenetic cause and for which the research could eventually prove a boon: asthma, obesity, arteriosclerosis, multiple sclerosis, depression and other mental illnesses.

Tools to map epigenetic profiles are not far off either, Szyf says. “The technology is there. If we could map it, then compare patterns, we could for instance say, ‘these methylation profiles are diagnostic of suicidal depression, or of cardiovascular risk.’ And the tools will be important to following treatment as well. Are you changing the right genes or wrong genes?”

The challenges will keep Szyf and Meaney busy into retirement and now have them dreaming of building a world-class epigenetics centre at McGill, where their unusual collaboration has flourished.
A new option for cancer care

As a discipline that has only been around a short while, psychosocial oncology is likely not the first thing that leaps to mind when talking about cancer care. But according to Dr. Zeev Rosberger, BSc’70, it’s becoming a critical part of the treatment process.

“We like to think of it as the fourth arm of care in oncology, up there with medical, surgical and radiation oncology,” says Rosberger, the Director of the new Psychosocial Oncology option for doctoral students, offered through the Department of Oncology. It’s an area of health care that’s traditionally under-resourced: funding for cancer research often goes into high-tech intervention, chemotherapy and drugs. But this overshadowed component is playing a bigger and bigger role in oncology.

The number of cancer cases is going to increase by approximately 70 per cent in the next 10 to 12 years, as the baby boomers reach later life, Rosberger points out. “And people are living longer with cancer: it’s become a chronic and manageable disease for about 50 per cent of newly diagnosed patients. There will be many more issues to deal with around survivorship, treatment and access.”

“A program like this is responding to an emerging medical need,” says Dr. Gerald Batist, MDCM’77, Chair of the Department of Oncology. “We’re not sure that this exists anywhere in the world – certainly not in Canada. It brings something very special to McGill, and puts it at the forefront internationally.”

Psychosocial oncology encompasses the many psychological, social, existential and even spiritual aspects of cancer care. Dealing with issues such as quality of life or psychological distress are fundamental problems in patient treatment and psychosocial oncology research is offering guidance.

“Just as we need basic and clinical scientists to study the interventions, diagnoses and preventions, we also need to deal with the patient as an integrated whole,” Rosberger explains. “We need to deal with their families, with their context in their communities and culture, in order to understand how we can intervene and support them in the best ways possible.”

The option is designed to bolster and centralize research in the field, and “develop a critical mass of people at McGill who are working on various aspects of these problems,” says Batist. With trainees coming from nursing, psychology, social work and other disciplines, he notes that “We’ve got everyone aiming at the same target but from different perspectives.”

Dr. Gayle A. Shinder, BSc’84, is the coordinator who led the option through the University approval process, and she also stresses the importance of bridging the departmental gap. “There are all kinds of departments that do research relevant to psychosocial oncology – it’s just a matter of them realizing it. Research areas in religious studies or sociology, for instance, could be very relevant.”

So far, doctoral students in Psychology and Nursing are eligible for the option, and links are being forged with the School of Social Work, along with areas like epidemiology. Candidates will focus both their studies and dissertation on psychosocial oncology, and will take two required courses.

The first graduate seminar, Psychosocial Oncology Research, designed by Dr. Carmen Loiselle from McGill’s School of Nursing, is also the core component of PORT, a research training program in psychosocial oncology, funded by the Canadian Institutes of Health Research (CIHR) and the National Cancer Institute of Canada (NCIC). Loiselle explains that the seminar’s main focus is to “expose students to experts in the field of psychosocial oncology, to discuss state-of-the-art theorizing, research methods and innovative intervention programs from a variety of perspectives backed by solid evidence-based knowledge.”

The second graduate seminar, Palliative Care in Cancer, is offered by Dr. Robin Cohen, BSc’81, MSc’83, PhD’86, the Director of the CIHR-NCIC Strategic Training Program in Palliative Care Cancer Research. The course focuses on the study of theory and research evidence regarding whole-person care in oncology, and compares the impact of the standard health care approach with the whole-person care approach. In addition to the two seminars, students choose one of several complementary courses offered through the Department of Psychology and School of Social Work, covering subjects like the psychology of pain, stress and emotional factors in illness, and end-of-life issues and bereavement.

Dissertations can reflect a supervisor’s program or a student’s unique ideas. Loiselle, for example, looks at patients’ information-seeking behaviour over the Internet. Rosberger examines risk information transmission and how information goes from health care professional to patient. Cohen does work in palliative care, quality of life of both the patient and family caregiver, and the development of classification systems for cancer pain. “There’s a broad spectrum of research areas,” says Rosberger. “It’s really limitless.”

Batist thinks that, ultimately, the approach taken with the new option represents the future. “We’re seeing that the changing face of the University is going to be described by themes and problems, by research and social questions. That’s a different way of thinking about learning, but it may be more relevant.”

Owen Egan

Zeev Rosberger and Gerald Batist
A beautiful, snowy December morning in 2005 witnessed the first shovel-tosses of dirt that kicked off McGill’s most significant life-sciences building project since the construction of the McIntyre and Stewart Buildings in the late 1960s. “Just as those buildings marked the start of new era at McGill, today we reach another milestone in our journey of success,” said Dean of Medicine Abraham Fuks, BSc’68, MDCM’70, at the December 9 groundbreaking ceremony for the new Bellini Life Sciences Building and the Pavilion for Cancer Research. “These new facilities provide not only an expansion of space for researchers and faculty, but a new way of doing science, bringing groups of scientists with various areas of expertise and from different disciplines, and joining them in a common quest: to understand how molecules mingle and mutate, how cells cycle and coalesce, and how organisms develop and diversify.”

Until 2002, the project was little more than a twinkle in the eyes of Fuks, former dean of Science Alan Shaver, and researchers such as Michel Tremblay, director of the McGill Cancer Centre, David Thomas, Chair of the Department of Biochemistry, and Paul Lasko, Chair of the Department of Biology. “Several years ago, this building existed only as a shared vision, an idea,” says Dean of Science, Martin Grant. “And, as when mixing a chemical reaction, you need a catalyst; Francesco Bellini, DSc’04, who is himself an organic chemist, has been that catalyst.” Bellini’s donation of $10 million, in 2002, helped the vision to take a firmer shape, with grants from the Canada Foundation for Innovation (CFI), the Quebec government, and the necessary financial support. This spring, the backhoes will begin digging on the site of the new facilities which will connect McIntyre with Stewart to form the McGill Life Sciences Complex. Between them, the Bellini Building and the Pavilion for Cancer Research – connected but separate facilities – will house approximately 650 researchers, including 60 chief researchers leading projects. Cellular imaging centres and high-speed screening and data analysis technology will occupy some of the space, with about 50 per cent being dedicated to labs and 20 per cent to instrumentation rooms. Construction is scheduled for completion in 2008.

Francesco Bellini is familiar with the University’s culture and community. He founded BioChem Pharma in 1986 and, working with the late Bernard Belleau, a former McGill chemistry professor, and Dr. Gervais Dionne, developed the anti-HIV drug 3TC – a cornerstone of HIV/AIDS treatment – in the late 1980s; “While I did not attend McGill, the University has a special meaning to me,” says Bellini, “Bernard Belleau had a rich career as a professor, and both my sons study here. My family has come to feel very much a part of the McGill family, and this is a welcome opportunity to help build the University of tomorrow.”

In the Life Science Complex, researchers in life sciences and physical sciences will meet in labs, corridors and over coffee, sharing ideas and conducting research side by side. The hothouse culture will stimulate new avenues of research and discovery, and the conjunction of pure and clinical researchers should lead to a quick transfer of knowledge from lab bench to hospital bedside.

As Carmen Charette, Senior Vice-President of Science, Francesco Bellini, Chairman of the Board, Alan Shaver, former Dean, Faculty of Science, Michel Tremblay, Director, McGill Cancer Centre, Denis Thérien, Vice-Principal, Research and International Relations, Roberto Bellini, Marisa Bellini, Alan Shaver, former Dean, Faculty of Science, Francesco Bellini, Chairman of the Board, President and Chief Executive Officer, Neurochem, Chairman of the Board, Picchio Pharma Inc., Paul Lasko, Chair, Department of Biology, Heather Munroe-Blum, Principal and Vice-Chancellor, McGill University, Janyne Hodder, Vice-Principal Inter-Institutional Relations, McGill University and Martin Grant, Dean, Faculty of Science, from left to right: Carmen Charette, Senior Vice-President, Canada Foundation for Innovation, Abraham Fuks, Dean, Faculty of Medicine, Anthony Masi, Provost, McGill University, Jacques Chagnon, Départe de Westmount-Saint Louis, Michel Tremblay, Director, McGill Cancer Centre, Denis Thérien, Vice-Principal, Research and International Relations, Roberto Bellini, Marisa Bellini, Alan Shaver, former Dean, Faculty of Science, Francesco Bellini, Chairman of the Board, President and Chief Executive Officer, Neurochem, Chairman of the Board, Picchio Pharma Inc., Paul Lasko, Chair, Department of Biology, Heather Munroe-Blum, Principal and Vice-Chancellor, McGill University, Janyne Hodder, Vice-Principal Inter-Institutional Relations, McGill University and Martin Grant, Dean, Faculty of Science, honour awarded by his native Italy. But even more eyes will be turned this way in the future, predicts Principal Heather Munroe-Blum. “Thanks to the inspired leadership and enormous generosity of Francesco Bellini,” she says, “the world will take notice of the research taking place in Montreal and at McGill.”
On the Road

In November, Dean Fuks and Development Office staff resumed their travels, making a stop in Seattle for the first time. W. Brandt Bede and Leslie Bede hosted a reception at their home, where Dean Fuks brought guests up to date on the latest news from the Faculty and McGill. A warm “thank you” to the Bedes for their hospitality!

In February, they returned to the West Coast where Dean Fuks spoke at a McGill Alumni Association of Southern California event in Long Beach. He also met with alumni in Los Angeles. The Branch event was attended by more than 50 alumni who came to hear Alan Tenenhouse speak on the topic of osteoporosis research at McGill. Dean Fuks gave a talk on the new Physicianship curriculum. Our special thanks go to Branch president, Hyman Bernstein and Donna Sexsmith who organized this great event.

We will soon be sending invitations to events in Toronto and Montreal.

Special Gifts

Once again our alumni and friends have shown tremendous generosity to the Faculty. We extend heartfelt thanks to all those who continue to support us with their donations. An anonymous donor has endowed the Dorothy Williams Chair in Pediatric Surgery. The Chair was named in memory of Dr. H. Bruce Williams’ late wife. Dr. Williams is the head of pediatric surgery at McGill University and at the Montreal Children’s Hospital.

The Nat Christie Foundation has endowed the Nat Christie Scholarships which will provide financial support to medical students. The Foundation made the donation thanks to a gift from Dr. Clara Christie Might, MDCM’25, the youngest sister of Nat Christie, and first woman to practice obstetrics and gynaecology in Alberta.

Doris Nunes Collins, MDCM’44, MSc’49, is supporting excellence in the clinical and surgical training of doctors and allied health professionals. She established an endowment to support the ongoing activities of the McGill Medical Simulation Centre, which will open in September 2006.

A grateful patient and an alumni of McGill, BA’94, have recognized leadership in the Department of Obstetrics and Gynecology’s residency program. The donor’s physician, Dr. Alice Benjamin, has been honoured by the creation of a new award in her name. The Dr. Alice Benjamin Leadership Award will be presented annually to the chief resident in the Department of Obstetrics and Gynecology.

Lawrence G. Hampson, BSc’47, MDCM’49, MSc’53, DIPSURGERY’55, has established a bursary in memory of his late wife, Marjorie Hampson. The bursary will provide support to medical students in good academic standing who demonstrate financial need.

Kappy, Susan, Judith, Steven and Ellen Flanders wanted to encourage and promote the use of medical simulation as an important educational and research tool for teaching health care professionals. To this end, they have established an endowment to fund an annual visiting professorship at McGill. The endowment has the flexibility of sending a McGill faculty member, student or staff member to a simulation centre elsewhere, as required, enabling greater opportunities for colleagues in medicine to share their expertise.

I want to take this opportunity to thank our loyal alumni who continue to support the Faculty with annual gifts or special contributions to their reunion class projects. You play a vital role in helping the Faculty pursue its current research and teaching activities. It is thanks to your commitment that we are able to carry out new initiatives and build on established programs.
Announcements

The fifth annual Sam and Sadie Roth Family Lecture was held on October 19, 2005. This year’s distinguished lecturer was Dr. Daniel Porte Jr., professor of medicine at the University of California San Diego and the VA San Diego Health Care System. Dr. Porte’s lecture was entitled “Is it Beta-cell Dysfunction or Loss in Type 2 Diabetes?” The Faculty thanks the Roth family for its support of this lecture.

On December 9, 2005, McGill University celebrated the groundbreaking of the Francesco Bellini Life Sciences Building and the Pavillon for Cancer Research. This is a joint project of the Faculties of Medicine and Science. With this addition to McGill’s existing medical research facilities, the University will boast one of the largest groups of life sciences researchers in Canada, further enhancing the University’s – and indeed Montreal’s – position as a major centre for biotechnology research and development. Montreal currently ranks in the top ten North American cities for employment in the biopharmaceutical industry, with the need for qualified personnel expected to double in the next few years.

A Final Note

Our office has once again been through some major staffing changes since last fall, and I want to take this opportunity to present to you the new members of our team. Michèle Joanisse joined our Development and Alumni Relations team in January as Executive Director of Development. Brought on to lead the Faculty in McGill’s ambitious comprehensive campaign, she will be focused on raising important funds for research chairs, graduate and undergraduate students support, the Simulation Centre and many more expansive projects. Before joining McGill, Michèle was director of fundraising at Médecins Sans Frontières (Doctors

Without Borders) in Canada. She is looking forward to engaging alumni in this important endeavour, and will be meeting many of you in the coming months. Michèle can be reached directly at (514) 398-8314 or at michele.joanisse@mcgill.ca.

Melanie Lane arrived in November, where she took over the Development and Alumni Relations Associate position formerly held by Paula Navratil, who decided to return to her home town of Vancouver. Good luck to you Paula, and thank you for your great work on behalf of our alumni and the Faculty. Melanie comes to us from the McGill Cancer Centre, where she was the fundraising coordinator. She brings additional experience from a former position in McGill’s First Year Office. Melanie is responsible for coordination of the annual giving and alumni relations programs. If you have any questions about these programs, don’t hesitate to contact her at: (514) 398-1299 or melanie.lane@mcgill.ca.

Melanie Derynck also joined our team in November. Melanie is our Stewardship Administrator. We are pleased to have her on board, playing a key role in liaison with donors, as well as ensuring that they are properly recognized for their contributions. Before coming to the Faculty of Medicine, Melanie worked in the DAR Homecoming Office. You can contact Melanie at (514) 398-5304, or at melanie.derynck@mcgill.ca.

Please join me in welcoming our new recruits to our office.

With best wishes for a warm and pleasant summer,

Nadine Saumure
Associate Director, Development

New staff members in the Development and Alumni Relations Office
(From left to right): Melanie Derynck, Stewardship Administrator, Michèle Joanisse, Executive Director, Development and Melanie Lane, Development and Alumni Relations Associate
This year’s Homecoming Weekend will be October 19–22.

Save the date in your calendars and plan to visit your faculty, colleagues and friends while you’re in Montreal.

As usual, a host of activities are being planned for Homecoming Weekend, among them the popular Leacock Luncheon (with renowned attorney Edward Greenspan as this year’s Leacock Lecturer), the Beatty Memorial Lecture and the Milestone Anniversary dinners.

We also look forward to our own faculty events, including the Medical Seminar (presented this year by the class of ’81) and the Dean’s reception, on Friday, October 20th.

To learn more about the weekend’s schedule of events, be sure to visit the Faculty of Medicine’s alumni website at www.medicine.mcgill.ca/alumnicorner or McGill’s own Homecoming webpage at: www.mcgill.ca/homecoming. On the Faculty website, you will find a link to your class page, with a wealth of information on events and activities that are being planned.

This year, we will celebrate the milestone reunions of alumni who graduated in 1941, 1951, 1956, 1961, 1966, 1971, 1976, 1981, 1986, 1991 and 1996. Your class representative will send you updates and itineraries as plans unfold. The classes listed below have already begun to plan their reunion events.

If your class is not listed below, and you would like to help organize your class reunion, please contact Melanie Lane at (514) 398-1299 or at melanie.lane@mcgill.ca.

The Faculty looks forward to welcoming you home!

---

1821 Society Members

The Faculty of Medicine would like to thank those alumni who are 1821 Society members and have provided for McGill in their estate plans.

Peter Benjamin, BSc’51, MDCM’55
J. Robert Bowen, MDCM’45
Janet E. Campbell, MDCM’51
Daniel Funderburk, MDCM’56
George William Hays, MDCM’64
Patricia A. Innis, MDCM’65
Ruby G. Jackson, MDCM’50
Joanne H. Jepson, MDCM’59
Arthur D. Kracke, MDCM’58
Kalman C. Kunin, BSc’41, MDCM’43
Samuel B. Labow, BSc’58, MDCM’62
Carroll A. Laurin, OC, MDCM’52
Andrew Q. McCormick, MDCM’60
Donald G. Moehring, MDCM’65
Margot R. Roach, MDCM’59
Winifred M. Ross, MSc’48, MDCM’52
John M. Rothschild, BSc’67, MDCM’69
Frank H. Russ, MDCM’39
Myron I. Segal, BA’45, MDCM’49
Joseph Stratford, BSc’45, MDCM’47, BSc’51, GRAD DIP MEDICINE’54
Jacques E. Sylvain, MDCM’74
Alan D.M. Turnbull, BSc’57, MDCM’61, MSc’65
Frederick E. Whiskin, MDCM’48
W.W. Wilson, MDCM’43

---

Homecoming 2006

Class Representatives and Volunteers

<table>
<thead>
<tr>
<th>YEAR</th>
<th>CLASS REP(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1941</td>
<td>Henry Scott, MDCM</td>
</tr>
<tr>
<td>1951</td>
<td>Hugh Brodie, MDCM</td>
</tr>
<tr>
<td>1956</td>
<td>Peter Macklem, MDCM, and Joy Macklem</td>
</tr>
<tr>
<td>1961</td>
<td>John Little, MDCM</td>
</tr>
<tr>
<td>1966</td>
<td>Peter Humphreys, MDCM</td>
</tr>
<tr>
<td>1971</td>
<td>Saul Frenkiel, MDCM, and Peter Small, MDCM</td>
</tr>
<tr>
<td>1981</td>
<td>Nancy Ellen Epstein, MDCM</td>
</tr>
<tr>
<td></td>
<td>Richard A. Schreiber, MDCM</td>
</tr>
<tr>
<td></td>
<td>Doug Dalton, MDCM</td>
</tr>
<tr>
<td></td>
<td>Simon Sipen Wing, MDCM</td>
</tr>
<tr>
<td>1986</td>
<td>Suzanne Felise Levitz, MDCM</td>
</tr>
<tr>
<td>1996</td>
<td>Sam Joseph Daniel, MDCM</td>
</tr>
</tbody>
</table>
Evan Blauer’s Cancun vacation last October began as a break in the sunshine, but that’s not how it ended. Blauer, a fourth-year medical student at McGill, was canoeing through the Mexican jungle with a friend on October 19 – so he didn’t know that a tropical storm heading his way had turned into the class-five Hurricane Wilma, and that Air Canada was evacuating Canadians. As a result, when Hurricane Wilma bore down upon Cancun with her 280 km/hr winds, Blauer was sheltered in an elementary school, huddling with other displaced tourists. “Around two in the morning, I was awakened by someone saying ‘That guy’s a medical student,’” he recalls. There were no doctors around, and a woman was having trouble breathing. “Someone had given her a plastic bag to breathe into, but I could tell that she wasn’t hyperventilating, and asked her husband questions about her medical history.” The woman’s symptoms suggested an asthma attack, although she had no previous history of the condition, so Blauer asked around the room for a ventilator. “Luckily, someone had one, so we gave her two shots from it,” he says. It was the right call, and soon Blauer’s patient was breathing freely. “This was the first time I’ve treated anyone without reviewing with a professor,” he says. “I was nervous, but it felt good.”

That afternoon a doctor visited the shelter and discovered that Blauer was entering his final year of medical school. “He said, ‘That will have to be good enough,’” and I thought he was joking, but I never saw him again.” Blauer spent much of the next two days teaming with a paramedic and two emergency room nurses from Tennessee to help their fellow hurricane refugees. Luckily, some supplies were delivered from the local hospital, and the impromptu medical team jerry-rigged a makeshift infirmary where they treated people – many with cuts, one serious concussion, and even a severely dehydrated patient with diarrhea who needed intravenous fluids. The experience fed Blauer’s interest – already strong – in emergency room work. “I had no medication and figured I couldn’t make anyone worse – so I just did my best to make them better,” he says of his extemporaneous internship. “I expected my vacation to be a week off call, but I was wrong.”

McGill takes great care to acknowledge and show its appreciation to everyone who makes a donation to the University. Planned gifts, however, often go unrecognized while the donor is alive because the University is not aware of the gift.

If you have made a provision for McGill in your estate plans, we invite you to join the McGill University 1821 Society. Bequests and other planned gifts have always played a vital role in helping McGill remain strong. The society’s name recognizes the very first such gift, made by fur merchant James McGill, which resulted in the creation of the University itself in 1821.

Members of the 1821 Society receive a certificate of membership signed by the Principal, a commemorative pin and access to special seminars and lectures on estate planning.
Volunteer to Help the Next Generation of Physicians

A new joint initiative from the Offices of Student Affairs and Development and Alumni Relations.

Are you a McGill Medicine graduate interested in assisting medical students with their specialty or residency decisions? Do you have some time to dedicate to mentoring one or more of our students? If so, this volunteer opportunity may be for you!

We invite you to share your experiences, skills and professional networks with our undergraduate students in Medicine. Your level of commitment to this program is at your discretion – any amount of time invested will produce benefits for all concerned. Volunteer and make a difference; you’ll be glad you did!

To participate in this program, visit the Medicine alumni website at: www.medicine.mcgill.ca/alumnicon and fill out the Volunteer Information Form, which can be returned to us by fax, email or regular mail.

Or, for more information on this volunteer opportunity, please contact Melanie Lane at (514) 398-1299 or by email at melanie.lane@mcgill.ca.

McGILL ALMA MATER FUND  Your gift does so much

Gifts from graduates designated to the priorities of the Faculty of Medicine ensure that our students can participate in and learn from exciting projects that provide excellent educational opportunities and foster friendships that endure beyond the years spent here. If you have not made your 2005-2006 Alma Mater Fund gift – or if you have never given – please take this opportunity to send a gift with this form. With your help, we will continue to offer an education that is well beyond the ordinary. Thank you!

Here’s my gift of $ _______  □ CDN$  □ US$  

Please direct my gift to the following area of need:
□ The Priorities of the Faculty of Medicine (02113)  
□ McGill’s Greatest Need (00100)  
□ Scholarships and Student Aid (02100)  
□ Libraries (02119)  
□ Athletics (02121)  

name

home address
city/state postal code/zip code
phone
email

PERMISSION:
McGill welcomes the opportunity to thank donors by printing their names in University publications.
□ I permit McGill to include my name in such lists.  
□ I do not permit McGill to include my name in such lists.

□ My cheque payable to McGill University is enclosed.  
□ You may charge my gift to my credit card: □ Visa  □ MasterCard  □ American Express

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Expiry Date: ______ / ______

MATCHING GIFTS:
If you are a current employee, retired or the spouse or widow(er) of an employee, or a member of the Board of Directors for a company with a matching gift program, the company could be waiting to match your gift to McGill. Please write the name of your employer below.

EMPLOYER:
Visit www.mcgill.ca/alumni-support/match to see if your employer is a matching gift company.

PLEASE RETURN THIS FORM TO:
McGill University, Gifts Services
1430 Peel Street
Montreal QC  H3A 3T3
Phone: (514) 398-4436
**Teaching Scholars for 2004-2005**

The 2004-2005 cohort of Teaching Scholars is: Dr. Joseph Rochford, BA’79, (Psychiatry), Madeleine Buck, BScN’79, MSc’87 (Nursing) and Dr. Francesco Ramadori, BSc’92, MDCM’96, (Anesthesia).

The Teaching Scholars Program is designed to promote the educational expertise of faculty members interested in pursuing their professional development as educators. The Scholars made presentations at Medical Education Rounds on Thursday, December 1, 2005.

**Kudos**

- **Samuel O. Freedman**, BS’49, MDCM’53, DIP INT MED’58, received the James H. Graham Award from the Royal College of Physicians and Surgeons of Canada.
- **Jean Gotman**, BA’76, received the American Epilepsy Society (AES) Research Recognition Award for 2005 for his contribution to understanding and conquering epilepsy.
- **Kenneth Hastings**, BSc’74, PhD’79, was appointed the McGill delegate to the Canadian Institutes of Health Research (CIHR).
- **Mimi Israel**, BSc’78, MDCM’83, Dip Psych’87, was awarded the Grand Prix 2006 du Collège des médecins du Québec.
- **Ann C. Macaulay** was named to the Institute of Medicine of the National Academies of the United States. Dr. Macaulay is one of five individuals recently named as a foreign associate member and one of two elected from Canada. Dr. Macaulay, a McGill faculty member since 1983, has made significant contributions to community-based participatory research and to the study and prevention of type 2 diabetes in aboriginal populations.
- **Louise Nasmith**, MDCM’78, MEd’94, was named president of the College of Family Physicians of Canada.
- **Robert Platt**, BSc’90, was awarded the Prix d’excellence 2005 by the Foundation for Research into Children’s Diseases in recognition of his outstanding contributions to the field of child health research.
- **Bernard Robaire**, PhD’74, has been elected by the Conseil supérieur de l’édification of the Quebec Ministry of Education to serve as both the President of the Commission de la recherche et de l’enseignement universitaire and as Vice-President of the Conseil supérieur de l’édification. He was also honoured with the Distinguished Academic Award from the Canadian Association of University Teachers.

**Key Dates**


**Faculty Development**

**May 18, 2006**
Workshop
Leadership Skills for Health Care Professionals: Strategies for Managing Change

**June 8, 2006**
Symposium on Education in the Health Sciences
Please consult the Faculty Development website at [www.medicine.mcgill.ca/facdev/](http://www.medicine.mcgill.ca/facdev/) for more information on these events.

**Faculty Dates to Remember**

**Tuesday, May 30, 2006 at 3:00 pm**
Health Sciences Convocation

**Friday, June 9, 2006 at 2:30 pm**
Commemorative service in gratitude to those who have given the gift of their bodies to health sciences studies at McGill.

**Tuesday, June 27, 2006 at 10:00 am**
Charles F. Martin Amphitheatre
Collège des médecins du Québec’s swearing-in ceremony for residents who have chosen to practice in Quebec.

**October 19-22, 2006**
Homecoming 2006
If you graduated in a year that ends in 1 or 6, mark these dates on your calendars. Also, anyone from milestone anniversary classes who would like to help plan special events and get-togethers, please feel free to contact Melanie Lane at (514) 398-1299 or melanie.lane@mcgill.ca.
Attention, Medical Alumni! We are collecting data on each class and making it available on the Web. Your information will be password-protected, so only you and your fellow classmates can access it. Hundreds of profiles have been added already! Don’t forget to send us your digital and/or print photos. We post those too!

To view your classmates’ profile or to add your own, visit [www.medicine.mcgill.ca/alumnicorner](http://www.medicine.mcgill.ca/alumnicorner).

You may also choose to complete the section below and return it to us by fax or mail.

### Your Alumni Profile

<table>
<thead>
<tr>
<th>Name</th>
<th>Specialty</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Home Address</td>
<td>Office address</td>
</tr>
<tr>
<td>Home Phone</td>
<td>Office Phone</td>
</tr>
<tr>
<td>Fax</td>
<td>Email</td>
</tr>
</tbody>
</table>

Highlights since graduating from McGill:

What I remember most about McGill:

Individuals who were most influential during my time at McGill:

I authorize the Faculty of Medicine, McGill University, to post the above information on the Web:

(Signature) NS06

Return to: Faculty of Medicine (Web Development Project), 3605 de la Montagne Street, Room 315, Montreal, Quebec, H3G 2M1. Fax: (514) 398-1753

Please return undeliverable mail to:
Retour des envois non-livrés à:
In Focus Editor
1430 Peel Street
Montreal, Quebec, Canada
H3A 3T3