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   1. Division of Allergy and Clinical Immunology
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   6. Division of Genetics
   7. Division of Geriatric Medicine
   8. Division of Hematology-Oncology
   9. Division of Infectious Diseases
  10. Division of Internal Medicine
  11. Division of Medical Biochemistry
  12. Division of Nephrology
  13. Pulmonary Division
  14. Division of Rheumatology
  15. Clinical Epidemiology
1. ACADEMIC HIGHLIGHTS / OBJECTIVE AND PRIORITIES 2009-2010

1.1 ACADEMIC HIGHLIGHTS

I. Introduction

The Department continues to provide excellent clinical care and teaching as well as carry out substantial translational, clinical and epidemiological research which attracts new recruits to the JGH. Although recruitment is limited by government restrictions of the “effectifs médicaux”, we have managed to add 4 full-time members during the year 2009-2010 and nine associate members. One full-time member will start in July 2010. Potential and confirmed GFT-H recruits as well as changes in staffing are listed below.

Our research activities have been supported by both external funding agencies and by our own Clinical Research Awards, to which will be added this year the contribution of the Auxiliary of the hospital donated at the time of the Gala of the Department of Medicine. The first annual Academic Excellence Award of the Auxiliary was awarded to Dr. Vicky Tagalakis in the fall of 2009.

The Department has had a cordial relationship with Dr. Hartley Stern, the CEO at the Jewish General Hospital.

The progress and challenges of the Department during this last academic year are summarized below.

Faculty

A. Recruits

The following physicians have been recruited into the Department:

GFT members:

Endocrinology - Dr. Agnieszka Majdan (July 2009)
Gastroenterology - Dr. Jonathan Wyse (July 2009)
Hematology - Dr. Nathalie Johnson (July 2010)
Nephrology: Dr. Sharon Nessim (July 2009)
Rheumatology - Dr. Sabrina Fallovolita (May 2010)

Associate Members:

Cardiology - Dr. Shawn Bonny (March 2010)
Cardiology - Dr. Renee Schiff (March 2010)
Dermatology - Dr. Kendall Billick, (January 2010)
Geriatric Medicine - Dr. José Morais (June 2009)
2010-2013:

Cardiology - Dr. Jonathan Afilalo (July 2011)
Cardiology - Dr. Ronen Durst (September 2010) Professeur sélectionné – withdrew application
Cardiology – Dr. Vartan Mardigyan (September 2010)
Cardiology - Dr. Themistocles Assimes (Potential candidate)
Dermatology - Dr. Osama Roshdy (September 2010) Professeur sélectionné
Geriatric / Internal Medicine - Dr. Andrea Lalonde, Andrea (July 2011)
Geriatric Medicine - Dr. Isabelle Vedel (Associate Member) (July 2011)
Geriatric Medicine – Dr. Elise Levinoff (July 2013)
Geriatric Medicine - Dr. Samir Sinha (Potential candidate)
Hematology - Dr. François Mercier (July 2013)
Hematology - Dr. Jean Sebastien Delisle (Potential candidate)
Internal Medicine – Dr. Jennifer Nguyen (Associate Member (August 2010)
Pulmonary - Dr. Lama Sakr (January 2011)
Rheumatology – Dr. Geneviève Gyger

B. Changes of Status

The following changes in staffing are noted:

Cardiology:
- Dr. Mark Eisenberg returned from his sabbatical as of August 2009.
- Dr. Sven Wassmann has announced his return to Germany as of September 2010.

Endocrinology
- Dr. Gabor Komaromi retired in May 2009.

Geriatric Medicine
- Dr. Shek Fung resigned in February 2010 to join St. Mary’s Hospital and will be appointed as an associate member of the Department.

Hematology:
- Dr. Jacques Galipeau’s leave of absence has been extended until September 2011

Internal Medicine:
- Dr. Susan Kahn returned from her sabbatical leave as of August 2009.
- Dr. Luc Trudeau returned from his leave of absence as of January 2010.
Dr. Joel Fox resigned as full-time member in May 2010 to become a consultant.

Rheumatology
-Dr. Morton Kapusta resigned as full-time member in May 2010.

C. Promotions

Dr. Susan Kahn was promoted to Full Professor (GFT-U).
Dr. Marie Hudson secured a tenure track position.

II. Clinical Activities

Our CTU’s continue to be well regarded by housestaff but the latter also note that the workload is very heavy. The ever-increasing demand from our Emergency Room has led the Department to be proactive and is now compiling data in this regard and devising plans to tackle the issue. The Department has created a 3rd CTU that receives the consults in Internal Medicine of the ER, sees most of the rapid turnover patients and offers a kind of training that medical students and residents require but which we did not offer in the past, different from that which can be acquired in the 7th floor CTU’s. The feedback from residents and attendings has been very positive to date. It will also be part of our effort to improve our ability to move patients from the Emergency to the wards as rapidly as possible. As well, the Department is engaged in an exercise attempting to improve turnover in its units by initiating discharge planning the day patients are seen for the first time, ensuring rapid access to radiology including CT and MRI, making sure patients receive adequate physiotherapy and mobilization, so they do not lose autonomy while hospitalized. All these measures will contribute to reduce the length of stay and help in reducing Emergency congestion. Despite the heavy clinical workload the Department continues to maintain high standards for teaching and clinical care.

CTU bed complement for 7W and 7NW is significantly greater than those located at the MUHC and will have to be downsized as a consequence of the Internal Review report of the Internal Medicine Training Program. This will proceed in phases, the first phase to begin in August 2010. The attending staff on the CTU will become responsible for providing primary care to a subset of patients on the CTU ward. As well residents’ call schedule now includes a night float system, in contrast to the current system.

Renovations were completed for the Divisions of Cardiology and Endocrinology. Significant new space has been added and the facilities modernized and upgraded.

Program 68 is the initiative of the Agence de Montreal launched in September 2009 to bring our hospital’s LTC population down to zero. After an initial period of success there has been a slowdown in discharges under this program, but more recently the program’s speed of discharge of chronic patients from the hospital has accelerated, reducing waits for discharge of LTC patients from CTU’s.

The clinical activities of the individual Divisions are summarized in the Divisional reports which
III. Teaching Activities

The Department continues its role in the teaching of both undergraduate medical students and resident physicians in general medicine and the subspecialties. Our members’ dedication to teaching is well known and much appreciated by both medical students and residents.

Within the Department, the following staff and residents received awards:

Dr. Vicky Tagalakis received the first JGH Department of Medicine Auxiliary's Academic Enhancement Award in September 2009. The award recognizes the ongoing contribution to research that immediately impacts patient care. This award is destined to provide an opportunity for learning skills for teaching, research and leadership that should eventually result in improved quality of patient care.

Dr. Avshi Leibowitz was the first recipient and Dr. Avi Shimony the second recipient of the Azrieli Fellowship. This fellowship provides opportunities of passing clinical, academic and research excellence as well as new approaches to medical diagnosis, treatment or research to young physicians and scientists of Israel in Canadian academic centers.

Dr. Andrea Kermack received the Dave Feder award. This award is presented to the resident who practices medicine with most compassion and sensitivity, displays kindness, respect and camaraderie towards colleagues and educators and carries a positive outlook enabling him/her to enjoy a meaningful balanced life beyond his/her profession.

Dr. Deborah Assayag was the recipient of the Sheldon Zemelman Memorial Award given to for academic excellence and outstanding contribution to patient care.

Dr. Anwar Murad received the Dr. Allen Spanier Internal Medicine Award. This award is given to the resident who exhibits an enduring passion for the practice of medicine, through the enjoyment of solving challenges of patient care and sharing solutions with others, while maintaining a high level of professionalism.

Dr. Cindy Varga was the recipient of the Medical Resident Research Award. This award is given to the medical resident who has achieved excellence with regard to intellectual curiosity, initiative, originality and accomplishment in medical research performed during residency.

Dr. Anita Au was awarded the Harold Frank Prize for Excellence for her Clinical Vignette Case Presentation in May 2010.

Dr. April Shamy was voted as Teacher of the Year by the residents.

In 2009 - 2010 we recruited into our teaching program 14 R3, 14 R2, and 13 R1 housestaff and 7 other program R1 residents. There were two Chief Residents, Dr. Thierry Toledano and Anita
Au (July 2009-June 2010).

Grand Rounds: Of the 34 Grand Rounds given by the Department 16 featured speakers from outside the JGH, of whom 12 were from outside Quebec (see attached list).

Divisional Rounds: In addition to the above each Division manages its own teaching and research rounds as summarized in the attached reports.

**IV. Research**

The Department has had a Clinical Research Award Program since 2007 in order to support and compensate full-time members of the Department involved in clinical research activities. The awards to the 2009 recipients, Drs. Tina Kader, Mark Miller and Lawrence Rudski, were renewed for an additional year in light of their productivity in their fields so were the awards to Drs. Sarit Assouline, Murray Baron, Morris Schweitzer. The 2010 recipients of this award are Drs. Jason Agulnik, Mark Blostein, Nessim Sharon and Christina Greenaway. The Department now supports ten (10) research projects by GFT-H staff.

The Department of Medicine has fared well in the FRSQ competition with Dr. Susan Kahn being awarded chercheurs nationaux, Dr. Christina Greenaway and Dr. Vicky. Tagalakis, chercheur-clinicien Junior 2 awards and Dr. Sarit Assouline, Chercheur-Clinicien Junior 1.

Dr. Ernesto L. Schiffrin received the 2010 Bjorn Folkow Award and Lecture of the European Society of Hypertension in recognition of his contribution to hypertension research. Dr. Schiffrin presented the lecture during the plenary session in Oslo on June 19th, 2010. The Bjorn Folkow Award has been established since 1987 by the European Society of Hypertension with the collaboration of AstraZeneca in recognition of the contribution made by Bjorn Folkow to cardiovascular physiology and pathophysiology. The award is given to a person or persons who have carried out important original research on the pathogenesis of hypertension.

Dr. Ernesto L. Schiffrin was appointed Member of the Order of Canada on June 30, 2010 for his contributions to the study of hypertension, notably through his research on the mechanisms underlying high blood pressure, as well as for his leadership roles in scientific committees and societies.

Dr. Natalie Dayan, a 2008-2009 resident, was the recipient of the Canadian Association of Professors of Medicine Residents Research Competition award for her research entitled “the risk of venous thrombosis among women with thrombophilia and oral contraceptive use: a meta-analysis” presented at the Canadian Society of Internal Medicine Annual meeting in October 2009.

A detailed survey of research activities of the departmental members as indicated below for the period April 1, 2009 to March 31, 2010 is attached.

$ 1,510,485     Clinical Investigator (including PhD) salary awards
In the calendar year 2009, departmental members produced 242 peer reviewed original publications (excluding abstracts, reports, and other articles).

V. Departmental Activities

The Department continues to reinforce democratic and transparent management in all areas.

VI. MUHC and McGill

Our relationship with the MUHC has been characterized by collaboration and collegiality. Our commitment to excellence in teaching at both the undergraduate and postgraduate level continues to be valued by McGill University. There has been an increase in the number of medical students as well the funding from McGill University for undergraduate education for which the Department is grateful to Dr. David Eidelman.

Within the hospital progress has been made. The Divisions of Endocrinology and Cardiology have moved into renovated facilities, but there continue to be strains with regard to space in the Division of Gastroenterology. The Department continues to work towards maintaining its academic mission with improved staffing and resource allocation.

The Department gratefully recognizes the support of the Hospital Administration in its recruitment efforts.

1.2 OBJECTIVES AND PRIORITIES

Within the province, the Department of Medicine continues to play a key role with Dr. Ernesto L. Schiffrin’s term as President of the Société québécoise d’hypertension artérielle and as President of “la Table régionale des chefs de médecine spécialisée de l’Île de Montréal.”

The recruitment of Dr. P. Ernst has widened the scope of interest in matters non-oncologic within the JGH Pulmonary Division. In particular, the Airway Centre that offers a program in obstructive lung disease, including dedicated nurse practitioners, has been launched. An important aspect of the program is the partnership with Mt Sinai Hospital.

The Department is actively pursuing to recruit an international leader in aging. The chosen
candidate will be offered the Kaufman Chair which was held by Dr. Howard Bergman.

We remain dedicated to ensure that the department continues to provide the excellent care to the patients of the hospital for which it is renowned, while at the same time maintaining its goals of excellence in teaching. The recruitment of highly qualified and competitive physician scientists has reinforced the research capacity of the department and has had a transformative effect on the ability of the hospital to serve as a translational science center. It has been challenging to provide conditions that are competitive with the best North American centers due to constraints in funding for personal support, operating monies and up-to-date equipment, as well as difficulties in ensuring adequate space allocation and support services. Despite these difficulties and constraints, we have been successful as can be seen above in already recruiting a considerable group of young physician-educators and physician-scientists in the areas of internal medicine, cardiology, endocrinology, hematology, pulmonary medicine, rheumatology and nephrology, all of who have a good chance of success in scientific competition for the scarce resources currently available locally, provincially and nationally. We have put in place a program that will also help support the research by GFT-H physicians. Our fund raising events such as the Gala of May 2008 will be repeated in November 2010, and we are already planning for this to help provide the Department the means to accomplish the goals of excellence in care, teaching and research that we strive for. We believe that we can, despite current bureaucratic and funding constraints, achieve our objective of providing high quality and safe care, excellent teaching and a highly competitive clinical and translational research environment within the JGH Department of Medicine.

Respectfully submitted,

Ernesto L. Schiffrin, MD, PhD, FRSC, FRCPC
Physician-in-Chief

2. GRAND MEDICAL ROUNDS & INVITED SPEAKERS 2009-2010

September 14
Brave New World 2009
Mark Trifiro, MD

September 21
Neurodegenerative Diseases: Are We on the Tipping Point?
Howard Chertkow, MD

October 5
Quality Program Week: Breaking Bad News: the Physician's Obligation to Disclose
Lorraine Legrand Westfall, MD, Canadian Medical Protective Association

October 19
McGill/JGH/Merck-Schering Lipid Lectureship 2009: Diabetic Heart Diseases
Ira Goldberg, MD, Columbia University, New York

October 26
Richard Wehrman Memorial Lecture: How to Lose 10 Pounds in 3 Days: the Ultrafiltration Diet
Richard Sheppard, MD

November 2
A Modern Interdisciplinary Approach to Asthma
Pascale Rioux, RN & Pierre Ernst, MD

November 9
Eighth Annual McGill-JGH-GlaxoSmithKline Lecture in Metabolism: Novel Paradigms in the Pathogenesis of Type 2 Diabetes
Minna Woo, MD, University of Toronto

November 16
Developing New Targets and Drugs for Psoriasis: Lessons Learned
Kim Alexander Papp, MD, PhD, Waterloo, ON

November 23
Phase I Drug Development in Oncology
Sarit Assouline, MD

November 30
Update on the Role of Taxanes in Early Breast Cancer
Stephen E. Jones, MD, US Oncology Research, Houston, TX

December 7
22nd Annual Nachum & Bertha Mizne Memorial Lecture: Hormonal Regulation of Renal Sodium Excretion and Clinical Implications
Robert M. Carey, MD, University of Virginia

December 14
Delays in ICU Admissions: the Good, the Bad and the Ugly
Jed Lipes, MD, Chief Resident, Critical Care, McGill University

January 11
Myeloproliferative Neoplasms: New Classification, New Mutations, New Diagnostic Approaches, New Treatment
Ayalew Tefferi, MD, Mayo School of Medicine, Rochester

January 18
Livers R Us
Mazen Hassanain, MBBS, PhD, MUHC

January 25
H1N1 Influenza A: Update on a Global Pandemic
Andre Dascal, MD

February 1
Does Depression Screening Benefit Patients? Should We Expect Benefits in the Absence of Evidence?
Brett D. Thombs, PhD

February 8
14th Annual Humanization of Care Awareness Program: Minimally Disruptive Medicine
Victor M. Montori, MD, MSc, Mayo Clinic, Rochester

February 15
The Effectiveness of Tuberculosis Screening Programs in Foreign-born Populations
Deborah Assayag, MD, Internal Medicine Resident, McGill University & JGH

February 22
Brave New World: Advances in Anticoagulation Management
Susan R. Kahn MD MSc

March 1
Do Pacemakers Just Pace? New and Evolving Technologies in Electrical Stimulation of the Heart
Bruno Benzaquen MD, CHUM

March 8
Minimally and Maximally Invasive Approaches to Metastatic Colorectal Cancer
Tsafrir Vanounou, MD, MBA, JGH

March 15
Plasma Homocysteine and Coronary Heart Disease
David S. Rosenblatt, MD, MUHC

March 22
Inflammation and Recovery of Function Following Trauma in Older Adults: Lessons Learned from Observational Studies of Hip Fracture
Ram R Miller MD, University of Maryland School of Medicine

March 29
Trastuzumab and Vinorelbine in Early Stages of HER2-positive Breast Cancer
Annick Wong, MD, Internal Medicine Resident, McGill University & JGH

April 12
The Role of National Registers in Drug Safety Assessment: Experience from the British Society for Rheumatology Biologics Register
William Gregory Dixon, MRCP, PhD, University of Manchester, England
April 19
Autologous Peripheral Blood Stem Cell Transplantation (APBSCT) for High Risk Lymphoma
Eman Abdou, MD, MSc & Martin Gyger, MD

April 26
Oncogeriatrics: Optimizing the Treatment of Older Cancer Patients
Riccardo A. Audisio, MD, University of Liverpool, England

May 3
Revolution in the Sarcoma Field: Impact of Molecular Pathology
Nathalie Stock, MD

May 10
Breathing Fresh Air into a Chronic Lung Disease
Mark Palayew MD & Esther Dajczman RN

May 17
"What Kind of Doctor Are You?" The Philosophy and Practice of Clinical Ethics
Hillel Braude, MBBCH, PhD

May 31
Inflammation in Atherosclerosis and Other Chronic Diseases
Peter Libby, MD, Brigham and Women's Hospital, Boston, USA

June 7
A Multicultural Approach to Patients at the JGH: How Many Languages Do I Need to Speak?
Christina Greenaway, MD

June 14
CT Scans on Your Iphone and Everything Else Too: How the JGH is Leading Canada in Implementation of New IT Technologies
Elizabeth MacNamara, MD
3. UNDERGRADUATE AND POSTGRADUATE TEACHING REPORTS

A. REPORT OF UNDERGRADUATE TEACHING - JUNE 2010

The Professional Skills (physical diagnosis) and Introduction to Internal Medicine courses have gone well. There were 39 Professional Skills, 53 Introduction to Internal Medicine students and 46 Practice of Medicine clerks.

Over the last year, there have been some exciting developments in undergraduate education.

1. Clerkship (POM)
   - The new ER Consults rotation allows our clerkship students to experience front-line Internal Medicine consultation in the ER in a CTU-like environment. Evaluation of this rotation by the medical student demonstrates that this rotation is highly valued by the students.

   - The One45 evaluation system has been successfully introduced by McGill across all teaching hospitals. One45 makes it is easier for students to anonymously evaluate their rotations and the attending staff. Evaluation of students by attending staff is similar to evaluation of the residents. Most staff do fill them out with in two weeks of the end of the students’ rotation for the rest please do get them finished early.

2. LCME/CACMS Accreditation Issues.

   - McGill Faculty of Medicine accreditation standards require students to be given midway feedback during their rotations. This means that at the end of the 2 weeks for CCU and ER Consults rotation and at the end of the 4 week rotation on 7W & 7NW, the attending staff must meet face-to-face with each student to provide specific constructive feedback on their performance.

   - Also to comply with McGill Faculty of Medicine accreditation standards, students will no longer work 24 hours on-call. Medical students will be sent home at 10 pm BUT will be present the next day.

   - Other Accreditation Issues.

Formal presentations will be made to the Department of on the following:

   a) required clinical exposures
   b) core teaching topics
      - with the objectives of each session
      - how students will cover the material if they are post-call etc.
   c) workload policy
   d) mistreatment statistics for Department of Medicine
   e) feedback policy and mechanisms
f) requirement to log exposure to cases, and steps if a student has not seen or logged a required clinical exposure.
g) statistics on adequate facilities for students

3. Professional skills / IIM

- The professional skills (physical exam course) in January went well. New this year, the final examination was an OSCE at the Simulation Centre. This was a success and will be repeated in future years.

- The IIM course was also a success. Our tutors and teaching sessions are well received and highly rated by the students. Our system of assigning teaching slots to each division ensure that the teaching is evenly distributed and we appreciate everyone’s ongoing cooperation with responding to requests to teach in a timely fashion.

4. Education Grants

- Dr. Michael Gold has arranged for a substantial donation to undergraduate education through his friend and patient, Mrs. Benjamin. These funds will be used for an annual $25,000 research bursary for each of the next four years, to support a meaningful research project that will improve the quality of medical education at the JGH.

- With support from the BMO donation to the Department of Medicine, Dr. Cummings is completing her MSc (Master of Health Professions Education) from the University of Maastricht in the Netherlands. Her thesis examined the acceptability and utility of the oral examination being used in our clerkship. As a result of her findings, Dr. Wiseman, the chair of the McGill Internal Medicine Undergraduate Education Committee, is considering replacing the exam with a new method of evaluation. This will be discussed further by the Education Committee.

- There are BMO Education funds available for the next 6 years. These funds must be used for education within the Department of Medicine. Criteria for their allocation will be worked on under the guidance of Dr. Schiffrin and the Policy Committee

Respectfully,

Drs. E. MacNamara and B. Cummings
Director and Associate Director of Undergraduate Education
B. POSTGRADUATE TEACHING REPORT - JUNE 2010

Resident Numbers

There will be 12 incoming R1’s this year, as projected, resulting in a total of 39 residents over the three years.

Our chief medical residents for the 2010-2011 academic year will be Dan Liberman and Michael Palumbo. Many thanks to the outgoing Thierry Toledano and Anita Au chiefs for their hard work and dedication to improving all aspects of the program.

ER Consults Rotation

This continues to be a very good rotation with improved teaching and more manageable case load with the bigger team. Minor changes will be made based on residents’ feedback but will not alter the current structure of the rotation, which will continue to be evaluated.

There have been some concerns that, in the purported effort to keep better track of the flow of consults in the ER, there would be mechanisms put in place that would add to the number of needless administrative calls and pages that the residents receive while in ER. This continues to be worked on by the Department of Medicine, the Division of Internal Medicine, and the ER.

Internal Review (as per the minutes from Policy Committee May 10th, 2010)

The McGill Internal Review followed the exact same procedures as the Royal College accreditation process. The results were disappointing with the program having received an overall result of Provisional Approval with External Review. None of the significant improvements made to the program were highlighted.

There were issues pertaining to the whole McGill program, and then issues specifically related to each site. For the JGH, the main issues were:
- service-to-education ratio, particularly on the CTU
- a sense of intimidation, particularly related to leaving post-call

CTU size:

Given that the CTUs at the MUHC are 22 beds with the same number of residents, it was felt that CTUs at the JGH that range between 35-38 were unacceptable, and the agreed upon number of beds at the McGill level was a maximum of 25.

It was discussed that we would go to 30 beds in period 2, 28 beds in period 5 and 25 beds in period 8 and that we would evaluate the process all along.

Night Float:

In response to the issue of post call, it was brought to the members’ attention that for the CTUs we would be moving to a night float system, which would eliminate most post-call issues for the
wards.

The critical care units are not yet incorporated into the night float system, though that will likely be worked on in the coming year. For those units, and other times when there are post-call residents, it was re-emphasized that these residents must be released by 8am with no exceptions, and that the services needed to reorganize the structure of the rounding and teaching to accommodate this rule.

**Protected Teaching Time:**

There will be an Academic Half-Day on Thursdays from 1-4pm, and all services and CTUs needed to make alternate coverage arrangements for that time period in order to liberate the residents for their teaching. Residents who are part of the Code Blue team would continue to respond to the codes when called, and the residents also recognized that if there is a crashing patient on the ward, the staff can call then as well.

As follow up to the Internal Review report, there will be an external review in the spring of 2011. The purpose of this review is to ensure that the necessary changes were made and to identify any ongoing modification of the program required in preparation for the Royal College Accreditation in the spring of 2012. More details about the external review will be provided when they are available.

**End of the Year Party**

The end of the Year Party took place on June 10th at Le Living Room. It was well attended and staff thanked for the residents’ contribution to the Department of Medicine.

Respectfully submitted,

Michelle Elizov, MD
Director, Postgraduate Medical Education
GENERAL INTERNAL MEDICINE HOUSESTAFF LIST 2009-2010

CHIEF RESIDENTS
Dr. Thierry Toledano (July 1 – December 31, 2009)
Dr. Anita Au (January 1 – June 30, 2010)

R3
Dr. Deborah Assayag
Dr. Anita Au
Dr. Michael Bielinski
Dr. Jennifer Friedmann (mat leave-return period 6)
Dr. Andrea Kermack
Dr. Aaron Leong
Dr. Elise Levinoff (mat leave-return period 8)
Dr. Anwar Murad
Dr. Karen Okrainec
Dr. Hoi Ying Shiu
Dr. A. Tisseverasinghe (end date Dec 09)
Dr. Cindy Varga
Dr. Annick Wong

R2
Dr. Waleed Al-Harbi
Dr. Amjad Al-Rajhi
Dr. Ramy Antar
Dr. Pernilla D’Souza
Dr. Marie-Diba Eid
Dr. Philippe Le
Dr. Dan Liberman
Dr. Savoula Nickas
Dr. Michael Palumbo
Dr. Mandana Rasti
Dr. Nadia Sant
Dr. Line Srour
Dr. David Wasserman

R1
Dr. Ahd Al-Khunaizi
Dr. Daniel Amzallag
Dr. John Angelopoulos
Dr. Yousif Bahbahani
Dr. Marie-Pierre Dallaire
Dr. Alaa Dekis
Dr. Oscar Diaz Noriega
Dr. Michael Goldfarb
Dr. Mathew Hannouche
Dr. Bennett Haynen  
Dr. Daniel Kaud  
Dr. Nessrine Sabri  
Dr. Catherine Talbot-Hamon  

**OTHER PROGRAMS**  
Grunbaum, Ami – Med Bio (com pd 11)  
Buhlaiga, Najwa – Med Bio (1-13)  
He, Gang- Med Bio (1-13)  
Al-Bahhar – Radiology (1-6)  
Illescas, Karina- Radiology (7-11)  
Al-Mohideb – Dermatology (1-13)  
Al-Busaidi- Ophthalmology (1-11)  
Miedzybrodzki- Dermatology (1-13)  

### 4. EXTERNAL RESEARCH GRANTS & AWARDS

#### A. Career Awards - July 2009 - June 2010 (Clinician-Scientists)

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<tr>
<th>Name</th>
<th>Agency</th>
<th>Expiry Date</th>
<th>Amount</th>
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<tr>
<td>EISENBERG, Dr. M.</td>
<td>FRSQ</td>
<td>June 30, 2011</td>
<td>30 000</td>
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<td>GALIPEAU, Dr. J.</td>
<td>CIHR</td>
<td>June 30, 2010</td>
<td>21 876</td>
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<td>GREENAWAY, Dr. C.</td>
<td>FRSQ</td>
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<td>HUDSON, Dr. M.</td>
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<td>KAHN, Dr. S.</td>
<td>FRSQ</td>
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<td>30 000</td>
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<td>KARAPLIS, Dr. A.</td>
<td>McGill DAWSON</td>
<td>June 30, 2011</td>
<td>10 000</td>
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<td>RICHARDS, B.</td>
<td>CIHR</td>
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<td>SCHIFFRIN, Dr. E.</td>
<td>Canada Research Chair</td>
<td>December 31, 2012</td>
<td>125 000</td>
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<td>TAGALAKIS, Dr. V.</td>
<td>FRSQ</td>
<td>June 30, 2012</td>
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<td>WASSMANN, Dr. S.</td>
<td>Canada Research Chair</td>
<td>December 2013</td>
<td>70 000</td>
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**TOTAL:** 560 956
B. Grants & Bursaries 2009-2010

See attached Excel File

5. NEW HONORS, AWARDS AND APPOINTMENTS
   (SEE APPENDIX A)

6. PUBLICATIONS (January – December 2009)

Autexier, Chantal


Baron, Murray


—Baron M, Hudson M, Canadian Scleroderma Research Group, Steele R. Malnutrition is common in systemic sclerosis: results from the Canadian scleroderma research group database. J Rheumatol, 36:2737-43, 2009

—Fan X, Pope J, Baron M. What is the relationship between disease activity, severity and damage in a large Canadian systemic sclerosis cohort? Results from the Canadian Scleroderma Research Group (CSRG). Rheumatol Int 2009


Bergman, Howard


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7. APPENDIX A. DIVISIONAL REPORTS