



DEPARTMENT OF MEDICINE

ANNUAL REPORT

2010 -2011

Submitted by Dr. Ernesto L. Schiffrin Physician-in-Chief

DEPARTMENT OF MEDICINE - JEWISH GENERAL HOSPITAL

2010-2011

TABLE OF CONTENTS

- 1. ACADEMIC HIGHLIGHTS / OBJECTIVE AND PRIORITIES
- 2. GRAND MEDICAL ROUNDS & INVITED SPEAKERS
- 3. UNDERGRADUATE AND POSTGRADUATE TEACHING REPORTS
- 4. EXTERNAL RESEARCH GRANTS & AWARDS
- 5. NEW HONORS, AWARDS AND APPOINTMENTS (SEE APPENDIX A)
- 6. PUBLICATIONS
- 7. APPENDIX A.DIVISIONAL REPORTS
 - 1. Division of Allergy and Clinical Immunology
 - 2. Division of Cardiology
 - 3. Division of Dermatology
 - 4. Division of Endocrinology
 - 5. Division of Gastroenterology
 - **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. Division of Clinical Epidemiology

1. ACADEMIC HIGHLIGHTS / OBJECTIVE AND PRIORITIES

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 recruit during the year July 2010-June 2011 five full-time members and four associate members. 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.

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:

Dermatology - Dr. Osama Roshdy (September 2010) Professeur sélectionné

Hematology - Dr. Nathalie Johnson (July 2010)

Pulmonary - Dr. Lama Sakr (January 2011)

Rheumatology - Dr. Sabrina Fallovolita (May 2010)

Rheumatology - Dr. Geneviève Gyger (January 2011)

Associate Members:

Cardiology - Dr. Gizelle Popradi (July 2011)

Geriatric Medicine - Dr. Francine Gaba Idiamey (June 2010)

Geriatric Medicine - Dr. Francine Larente (June 2010)

Internal Medicine - Dr. Jennifer Nguyen (August 2010)

2011-2013:

Cardiology - Dr. Jonathan Afilalo (July 2013)

Cardiology - Dr. Annabel Chen-Tournoux (July 2011)

Cardiology - Dr. Vartan Mardigyan (July 2011)

Endocrinology - Dr. Oriana Hoi Yun Yu (July 2012)

Geriatric Medicine - Dr. Isabelle Vedel (Associate Member) (July 2011)

Geriatric Medicine - Dr. Elise Levinoff (July 2013)

Hematology - Dr. François Mercier (July 2013)

Hematology – Dr. Cristiano Ferrario (July 2012)

Internal Medicine / ICU - Dr. Jed Lipes (July 2011)

Nephrology - Dr. Marie Briet (July 2012) Professeur sélectionné

Pulmonary - Dr. Deborah Assayag (July 2013)

Pulmonary - Dr. Nathalie Saad (July 2012)

B. Changes of Status

The following changes in staffing are noted:

Cardiology:

- -Dr. Kim Boutet resigned as Associate Member in May 2011.
- -Dr. Sven Wassmann resigned from the JGH in September 2010.

Endocrinology

-Dr. Amnon Kahn passed away in November 2010.

Internal Medicine:

-Dr. Michael Gold passed away in April 2011.

Pulmonary

-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. Andrew Hirsch, whose principal academic interest is pulmonary hypertension and thromboembolic disease, **Dr. Stéphanie Lehoux**, who holds the Canada Research Chair in Cardiovascular Physiology and is investigating the fundamental biology of major cardiovascular diseases including hypertension and atherosclerosis, **Dr. Chen Liang**, whose research is aimed at elucidating the molecular events that take place during the assembly process of human immunodeficiency virus type 1 (HIV-1), **Dr. Igal Sebag** whose work is focused on clinical and research applications of advanced techniques in echocardiography, **Dr. Michael Tamilia**, whose research centers on parathyroid disorders, thyroid tumors and thyroid cancer and **Dr. Marc Tischkowitz**, whose work focuses on the molecular genetics of breast cancer and other common cancers, were promoted from Assistant to Associate professor. Besides, **Dr. Lehoux, Dr. Liang** and **Dr. Tischkowitz** were granted tenure.

II. Clinical Activities

- The Clinical Teaching units (CTU's) have been downsized. The strategy of a ratio system has been adopted because it creates less non-CTU beds throughout the academic year. However, when a CTU team is short-staffed by residents the beds default to the attending physician. In the event that this represents too excessive a workload for the physician he/she must secure a "buddy" to help out.
- 2) The Flex Unit remains at the end of the hall on 2M and a new nursing station has been created to serve these beds. There continues to be a census of 12 patients on this unit. The criteria for transfer to this unit include medical stability and discharge arrangements that are pending.
- Renovations will be made to the rest of 2M and the former MHA to accommodate GI lab functions while the actual GI lab undergoes renovations.
- 4) Plans are in place to create an 8-bed unit to serve interventional radiology where patients will be monitored post-procedures and may also receive peri-procedure, hydration, medications, etc.
- 5) The Neurology Unit has been functioning on 4W where neurologists are providing primary care for the first time in many years. There is an average of approx. 12 patients on this service.
- There have been substantial problems with Program 68 with many patients far exceeding the promised 72-hour time frame before transfer to a chronic care facility. Due to manpower limitation, Geriatrics is no longer the sole arbitrer of Program 68 eligibility and CTMSP paperwork.
- 7) There have significant challenges with C. difficile outbreaks in the past few months.
- 8) Pavilion K is on schedule.
- 9) There is a major initiative developing to decrease ER congestion sanctioned by the Minister. There are financial incentives and prestige to be garnered if the hospital can deliver tangible results. We will be initiating some novel changes to reduce ER congestion and we will require the support and cooperation of the membership. This is part of the Transformational Change initiative initiated in the hospital by the CEO, Dr. Hartley Stern, and led by Dr. Lorrie Rosenberg and Ms. Lynn McVey. The Department is actively involved in this initiative with the objective of improving the patient experience and accelerating flow of patients out of the ER, to either home, other institutions or wards. The main goal is a reduction of length of stay, waiting times and unnecessary diagnostic or therapeutic procedures.

The clinical activities of the individual Divisions are summarized in the Divisional reports which are attached.

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. The Department is grateful to Dr. Elizov for her dedicated services as Director of Postgraduate Medical Education from July 2055 to June 2011, and welcomes Dr. Ruxandra Bunea as the new Director as of July 1, 2011.

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

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.

In 2010 the Board of Governors of the Jewish General hospital selected Dr. Ernesto L. Schiffrin as the recipient of the 2010 Award for Excellence in Basic Research.

In June 2011, Dr. Michelle Elizov, Assistant Professor in the Division of General Internal Medicine and Site Director of the McGill Core Internal Medicine Residency Training Program at the JGH, was presented with the Faculty Honour for Educational Excellence Award in recognition of her outstanding contributions to teaching in the Faculty of Medicine.

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. Amjad Al Rajhi received the <u>Dave Feder</u> 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. Pernilla D'Souza was the recipient of the <u>Sheldon Zemelman Memorial Award</u> given to for academic excellence and outstanding contribution to patient care.

Dr. Michael Palumbo received the <u>Dr. Allen Spanier Internal Medicine Award.</u> 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. Bennett Haynen was the recipient of the <u>Medical Resident Research Award</u>. 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. Sharon Nessim was voted as <u>Teacher of the Year</u> by the residents.

In 2010-2011 we recruited into our teaching program 15 R3, 13 R2, and 12 R1 housestaff and 9 other program R1 residents. There were two Chief Residents, Dr. Dan Liberman and Dr. Michel Palumbo (July 2010-June 2011).

<u>Grand Rounds</u>: Of the 35 Grand Rounds given by the Department 12 featured speakers from outside the JGH, of whom 6 were from outside Quebec (see attached list).

<u>Divisional Rounds:</u> 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 2010 recipients, Drs. Jason Agulnik, Mark Blostein, Nessim Sharon, Christina Greenaway Tina Kader, Mark Miller, Lawrence Rudski, Sarit Assouline, Murray Baron and Morris Schweitzer, were renewed for an additional year in light of their productivity in their fields. The 2011 recipients of this award are Drs. M. Elizov, G. Gyger, N. Hilzenrat, L. Sakr, R. Sheppard and G. Tagalakis. The Department now supports 16 research projects by GFT-H staff.

For 2010-2011, 11 Departmental members are recipients of prestigious Career Awards, Fellowship Awards or Research Chairs from various granting agencies, totaling \$532 501.

A detailed survey of research activities of the departmental members as indicated below for the period April 1, 2010 to March 31, 2011 is attached.

Clinical Investigator (including PhD) salary awards
Competitive Operating Grants (excluding associate members)
Contracts from Industry
Department of Medicine Clinical Research Awards
TOTAL
Postgraduate Fellows
Endowments & other
GRAND TOTAL

In the calendar year 2010, departmental members produced 314 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

Within the hospital progress has been made. The Division of Gastroenterology will move into new facilities in the near future while the current location undergoes renovations. The Cardiovascular Prevention Centre provided the facility for the CARTAGENE project during the past year and a half. This project's goal is the genotyping, and the phenotyping of certain characteristics, of the Quebec population.,. 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 "la Table régionale des chefs de département de médecine spécialisée de l'Île de Montréal" and as President of the Société québécoise d'hypertension artérielle up until January 2011, and internationally as Vice-President and President-Elect of the International Society of Hypertension.

The Department is actively pursuing to recruit an international leader in aging. The chosen candidate will be offered the Kaufman Chair previously 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. The second Department of Medicine Doctors' Gala on November 18, 2010 was a great success both from the financial and cooperation point of view thanks to the efforts of departmental staff and the executive team comprising of Mr. A. Rubin, Ms. Annette Goldman and their excellent work in raising the profile and funds for the Department of Medicine and provide it with means to achieve the objectives of high quality and safe care, excellent teaching and a highly competitive clinical and translational research environment despite current bureaucratic and funding constraints.

Respectfully submitted,

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

2. GRAND MEDICAL ROUNDS & INVITED SPEAKERS

0 1 12		NC 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
•	The New Cancer Endocrinology	Michael Pollak, MD
September 20		Andrew C. Karaplis, MD, PhD
September 27		Howard Chertkow, MD
October 4	McGill/Merck-Schering Lipid Lectureship 2010: Management of Atherogenic	Ronald M. Krauss, MD, University of California,
	Dyslipedemia of the Metabolic Syndrome	San Francisco
October 18		André Denault, MD, CHUM
October 25	Lung Cancer: New Advances	Jason Agulnik, MD
November 1	Quality Program Annual Patient Safety Week: Patient Safety and Acute Care	Denny P. Laporta MD
	Medicine: Lessons for the Future, Insights from the past	
November 8	Rare Forms of Diabetes: What Can Genetics Teach Us about the Endocrine Pancreas?	
November 15	II-17 Activates the Endothelium Increasing Adhesion of Circulating Tumour Cells; Potential Implication for Metastasis Formation	Simon Rousseau PhD, MUHC
November 22	Diffuse Large B Cell Lymphoma: One Diagnosis, Many Diseases	Nathalie A. Johnson, MD, PhD
November 29	Endoscopic Ultrasound at the JGH	Jonathan Wyse, MD
December 6	23rd Annual Nachum & Bertha Mizne Memorial Lecture: Fatty Liver: a Silent Target of the Obesity Epidemic	Nir Hilzenrat, MD
December 13		Paul Warshawsky, MD
January 10	Autologous Hematopoietic Stem Cell Transplantation for Multiple Myeloma: the JGH	• *
,	Experience	, , ,
January 17	Update on Recent Clinical Trials: Do Results Support Conclusions?	Jan A. Staessen, MD, PhD, Leuven, Belgium
January 24	Infectious Diseases & Immunodeficiencies: Where the Rubber of Immunology Hits the Road of Life	Donald C. Vinh, MD, MUHC
January 31	Updates in Interventional Cardiology: Focus on Coronary Occlusions	Dominique Joyal, MD
February 7	Fifteenth Annual Humanization of Care Awareness Program: Clinician-patient	Michele Nanchoff-Glatt, PhD, University of
,		Calgary
February 14		Catherine Talbot-Hamon, MD, Internal Medicine
,	Wards: Challenges in Application of the "Acove" Quality Indicators	Resident, McGill University-JGH
February 21	Postgraduate Internal Medicine Residency Training: Future Directions and Challenges	•
February 28	Pulmonary Arterial Hypertension - Emerging Therapeutic Targets	David Langleben, MD
March 7	An Evidence-based Approach to Improving Hospital Care of Older Persons	Steven R. Counsell, MD, Indiana University
	11 1 5 1	School of Medicine, Indianapolis
March 14	Dicer1: the Link Between Micrornas, Multinodular Goitre and Rare Tumors	Marc Tischkowitz, MD, PhD
March 21	Virtual Reality: a New Realm in Rehabilitation	Joyce Fung, PhD, MUHC
March 28	•	Aidan Halligan, MA, MD, London, UK
April 4		Jeff Williamson, MD, Wake Forest University
1		School of Medicine, NC
April 11	Rhinitis/sinusitis: How Do We Treat Upper Airway Disorders	Saul Frenkiel, MD & Peter Small, MD
April 18		Guilherme Brandao, MD, Andrew Hirsch, MD &
1	, c	Mark Palayew, MD
May 2	New Data in Cutaneous Melanoma: a Light in the Dark	Alan Spatz, MD
May 9		Geneviève Gyger, MD
May 16	• • • • • • • • • • • • • • • • • • • •	Carolyn Ells, PhD
	JGH Researchers	
May 30	Life-long Learning and the New Mainport System	Sam Daniel, MD, MUHC
June 6	Opportunity Knocks: Early Physiotherapy And Spontaneous Awakening Trials In	Amjad Al-Rajhi Third Year Internal Medicine
		Resident, McGill University-JGH
June 13	Erythropoietin Use in Kidney Disease: Intent to Treat	Gershon Frisch, MD
June 20	Advances in the Treatment of Peritoneal Carcinomatosis: Hyperthermic	,
•	Intraperitoneal Chemotherapy (Hipec)	
	Tsafrir Vanounou, MD, MBA	

3. UNDERGRADUATE AND POSTGRADUATE TEACHING REPORTS

A. REPORT OF UNDERGRADUATE TEACHING - JUNE 2011

There continues to be exciting progress in the undergraduate education program.

- 1. Clerkship & LCME/CACMS Accreditation Issues
 - The current structure has each student doing 4 weeks of either 7W or 7NW, 2 weeks of CCU/2NE, 2 weeks of ER Consults, and a weekly outpatient clinic. The JGH rotation generally receives excellent evaluations.
 - The oral examination in clerkship has been eliminated for the 2011-2012 year. Instead, all students will be required to complete one observed focused history and one observed focused physical examination. These are now part of the logs of minimal clinical exposures that students must complete and log in one45 before the end of the rotation. If they are having difficulty seeing these cases, they are supposed to discuss with you so that it can be arranged.
 - McGill Faculty of Medicine accreditation standards also require:
 - i. Face-to-face specific, constructive, and individual midway feedback from the attending: This must occur after 2 weeks and at the end of the 4 week rotation on 7W & 7NW, and at the end of each week and at the end of the 2 week rotation in CCU & ER Consults.
 - ii. Adherence to the workload policy: Students can work no more than 60 hours per week excluding on-call (i.e. leave by 8 pm or ideally 6 p.m. when not on-call). When on-call, they must leave by 10 pm. There is no post-call day.
 - iii. The core clerkship lecture series: The sessions are going very well thanks to our dedicated teachers from across many divisions. The objectives for these sessions are available on WebCT and are sent out by Malka when requesting participation from each Division in the teaching sessions. For students who miss the sessions, the alternatives are available on WebCT.
 - iv. Prompt evaluation of students by attendings in the One45 system: Final evaluations must be submitted promptly to the Faculty of Medicine. This requires that your clinical evaluations be completed within 2 weeks of the end of your time with time on the clinical service.
 - v. Orientation of the faculty members to the structure and objectives of the rotation: Dr. MacNamara and Dr. Cummings have developed a pocket card that will be distributed to all attendings at the beginning of their CTU weeks. This contains information about the learning objectives for the clerkship, as well as accreditation-related issues of mistreatment, midway feedback, and the workload policy.

- vi. Information to faculty members about mistreatment: In the 2009-2010 academic year, 45 clerks were assigned to the JGH for Internal Medicine. Of these students, 4 reported mistreatment. So far in 2010-2011, we have had 2/35clerks in Internal Medicine at the JGH report mistreatment.
- New clinical evaluation forms and guidelines for clinical assessment have been developed at the level of the Faculty of Medicine to be used in all clerkship rotations in all disciplines at all training sites starting 2011-2012.

2. Professional skills (ICS)

• The Professional Skills (ICS) course in January 2011 was very successful. The reduction to 4 students rather than 6 students per group was better for the students and the tutors and we will do the same in January 2012. There are no major changes to the course predicted for January 2012.

3. IIM

• For 2011 the course remains very successful at the JGH. Thanks to the participation of physicians from across the Department of Medicine, the tutors and the teaching sessions remain very highly rated. There are no major changes to the course predicted for 2012.

The Undergraduate Education is grateful to all staff for their enthusiasm, ongoing commitment to teaching and dedication to medical students.

Respectfully,

Drs. B. Cummings & E. MacNamara Director and Associate Director of Undergraduate Education

B. POSTGRADUATE TEACHING REPORT - JUNE 2011

Resident Numbers

There will be 12 incoming R1's in 2011-2012 resulting in a total of 37 residents over the three years.

The chief medical residents for the 2011-2012 academic year will be John Angelopoulos and Mathew Hannouche. Many thanks to the outgoing chiefs Dan Liberman and Michael Palumbo for their hard work and dedication to improving all aspects of the program.

Program Changes

Night Float

Since July 2010, there has been a night float system in place for coverage of the 7W and 7NW CTUs and the non-teaching medical patients. A consistent team is covering by shift work 10 of 14 nights in a 2-week and deals with all emergencies and any potential admissions not done during the day.

Overall, the feedback from residents and attendings has been positive. While the rotation itself can be difficult, the residents recognize the very positive trade-off of never being post-call as a senior on the wards and the continuity this provides to the patients has been welcome by all.

Issues we are still working on are how to provide staff feedback to this night float team, as well as more formal AM teaching or feedback around management decisions made by the night float team.

To help address some of the concerns about increased errors due to increased number of handovers, there was a workshop for the residents on safe handover practices that was overall well appreciated and will likely be repeated annually.

Academic 1/2 Day

The Thursday afternoon videoconferenced lecture series for the residents has been well appreciated and seem to work well. Residents consistently report that they are being released appropriately from service to attend these rounds.

The curriculum for this series undergoes regular review at the McGill Training Committee level.

CTU size

Much discussion has occurred around this topic over the course of the year. Our CTUs were much larger than those at the MUHC and this was cause for concern about service to education ratios across the 3 training sites.

Ultimately, it was decided that the CTU size would be proportional to the number of patients-to-resident (student) maximums that had been established and agreed upon at the McGill level. The excess numbers of patients would be looked after the attendings directly and would necessitate a "buddy system in which attendings would pair up to assist each other so as not to make the

balance of patient care, supervision and teaching more manageable and appropriate. This was approved at the Policy Committee.

Looking ahead

Royal College accreditation for the McGill Internal Medicine Training Program will occur in March of 2012.

The biggest issue that still remains and can have a significant impact on our accreditation status is that of the ER consult service. While many positive changes have been made, and the general feedback from out-going residents is that this remains one of the most useful rotations of their training, there are still several issues that affect morale of the residents enough to negatively impact the perception of the rotation, and thus to negatively impact the accreditation process as a result.

Change to the template of the rotation to three 8-hour shifts from two 12-hour ones, recruitment of full-time nursing help (Nurse Practitioner or Clinical Nurse Specialist initially) and the number of patients, that the team is responsible for are being explored.

End of Year Party

The end of year party was held on June 2nd at Le Living Room. It was well attended and staffs were appreciative of the residents' contribution to the Department of Medicine.

Respectfully submitted,

Michelle Elizov, MD Director, Postgraduate Medical Education

GENERAL INTERNAL MEDICINE HOUSESTAFF LIST 2010-2011

CHIEF RESIDENTS

Dr. Michael Palumbo (July 1 – Dec 31, 2010)

Dr. Dan Liberman (Jan 1 – June 30. 2011)

R3

Dr. Waleed Al-Harbi

Dr. Amjad Al-Rajhi

Dr. Ramy Antar

Dr. Pernilla D'Souza

Dr. Jennifer Friedmann (end date period 5)

Dr. Philippe Le

Dr. Elise Levinoff (end date period 11)

Dr. Dan Liberman

Dr. Savoula Nickas

Dr. Michael Palumbo

Dr. Mandana Rasti

Dr. Nadia Sant

Dr. Line Srour

Dr. David Wasserman

Dr. Marie-Diba Eid

<u>R2</u>

Dr. Daniel Amzallag

Dr. John Angelopoulos

Dr. Marie-Pierre Dallaire

Dr. Alaa Dekis

Dr. Oscar Diaz Noriega

Dr. Michael Goldfarb

Dr. Mathew Hannouche

Dr. Daniel Kaud

Dr. Nessrine Sabri

Dr. Catherine Talbot-Hamon

Dr. Bennett Haynen

Dr. Ahd Al-Khunaizi

Dr. Yousif Bahbahani

R1

Dr. Khalid Al Johani

Dr. Kevin Chan Tai Kong

Dr. Emilie Chan

Dr. Yen-I Chen

Dr. Kaethe Clarke

Dr. Yannick Emond

Dr. Anna Khananian

Dr. Darius Lazarus

Dr. Yidan Lu

Dr. Brent Ohata

Dr. Kristin Popiel

Dr. Tanya Skamene

OTHER PROGRAMS

Dr. Rayan Abdulghani Alkhoidair

(Dermatolgoy)

Dr. Faisal Mohammed Al-Subhi

(Dermatology)

Dr. Mihaylova Yanka (Med Biochem)

Dr. Arnold Radu (Diag RX 1-6)

Dr. Joseph Peltz (Diag RX 7-11)

Dr. Hanni Bouma (Neuro)

Dr. Alina Webber (Neuro)

Dr. Youjia Shen (Ophth)

Dr. Ahmad Alali (Ophth

4. EXTERNAL RESEARCH GRANTS & AWARDS

A. Career Awards - July 2010 - June 2011 (Clinician-Scientists)

Name	Agency	Expiry Date	Amount
ASSOULINE, Dr. S.	FRSQ	June 30, 2014	33 708
EISENBERG, Dr. M.	FRSQ	June 30, 2012	30 000
GREENAWAY, Dr. C.	FRSQ	June 30, 2013	40 832
HUDSON, Dr. M.	CIHR	June 30, 3012	60 000
JOHNSON, Dr. N.	Canada Research Chair	June 30, 2016	16 667
KAHN, Dr. S.	FRSQ	June 30, 2013	30 000
KARAPLIS, Dr. A.	McGILL DAWSON	June 30, 2012	10 000
RICHARDS, B.	CIHR	June 30, 2012	140 000
SCHIFFRIN, Dr. E.	Canada Research Chair	December 31, 2012	125 000
TAGALAKIS, Dr. V.	FRSQ	June 30, 2012	34 627
WASSMAN, Dr. S.	Canada Research Chair	June 30, 2013	<u>11 667</u>
TOTAL:			532 501

B. Grants & Bursaries 2010-2011

See attached Excel File

5. NEW HONORS, AWARDS AND APPOINTMENTS

(SEE APPENDIX A)

6. PUBLICATIONS (January – December 2010)

Alaoui-Jamali, Moulay

- --Xu Y, Bismar TA, Su J, Xu B, Kristiansen G, Varga Z, Teng L, Ingber DE, Mammoto A, Kumar R, **Alaoui-Jamali MA.** Filamin A regulates focal adhesion disassembly and suppresses breast cancer cell migration and invasion. J Exp Med. 207:2421-37, 2010
- --Alaoui-Jamali M, Toliopoulos P, and Krikor B. Focal adhesion protein trafficking signalling in invasive cancer cells and therapeutic implications. In "Signal Transduction in Cancer Metastasis". Cancer Metastasis Biology & Treatment Series, Springer Life Sciences, 2010
- --Alternative and Complementary Therapies for Cancer: Integrative Approaches for Discovery of Conventional Drugs. Editor: **M Alaoui-Jamali**; Springer, NY, 2010
- --Lougheed NC and **Alaoui-Jamali MA.** Herbal products-chemotherapy drug interactions from a pharmacological perspective. In "<u>Alternative and Complementary Therapies for Cancer:</u> <u>Integrative Approaches for Discovery of Conventional Drugs</u>. Editor: M Alaoui-Jamali, Springer, NY, 2010
- **--Alaoui-Jamali MA** and Pinto D. Proteomic profiling of tyrosine kinases as pharmacological endpoints for clinical response to targeted therapy. In: <u>Progress In Cancer Proteomics</u>, Editor: S. Daoud (Washington State University), Humana Press NJ, 2010

Agulnik, Jason

- -- Agulnik J, Cohen V, **Miller WH Jr**. EGFR Mutations Detected by Denaturing High-Performance Liquid Chromatography in NSCLC: Impact on Response to Therapy with EGFR-Tyrosine Kinase Inhibitors. Cancer, 116(18):4309-17, 2010
- --Kasymjanova G, Macdonald N, **Agulnik JS**, Cohen V, Pepe C, Kreisman H, Sharma R, and Small D. The predictive value of pre-treatment inflammatory markers in advanced non-small-cell lung cancer. Current oncology, 17:52-58, 2010

Autexier, Chantal

--Fakhoury J, Marie-Egyptienne DT, Londoño-Vallejo JA and **Autexier C.** Telomeric function of mammalian telomerases at short telomeres. J. Cell Science, 123:1693-704, 2010

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7. APPENDIX A. DIVISIONAL REPORTS