Annual Report Division of Geriatric Medicine April 1, 2005 - March 31, 2006

The Division of Geriatric Medicine is a division of the Department of Medicine as well as of the Department of Family Medicine of the Sir Mortimer B. Davis – Jewish General Hospital (JGH). The Division has some shared activities with Psychogeriatrics of the Department of Psychiatry. The Division's activities are multidisciplinary, working very closely with Nursing, Physiotherapy, Occupational Therapy, and Social Work as well as with the Center for Epidemiology and Community Studies, the Bloomfield Center for Research and Aging, the Department of Neurology and the Department of Oncology. Division members are actively involved in the McGill Division of Geriatric Medicine, have appointments in the Departments of Medicine and Family Medicine respectively (in some cases both) as well as in other departments mentioned above. Some members have cross appointments with the McGill University Health Center (MUHC).

Clinical Activities

The Division continues to maintain a high clinical profile throughout the hospital that grows yearly. The Division's areas of activity include the Acute Geriatric Ward 6 North West, Long-Term Care (LTC) Wards 6 West and 6 North, the In-Hospital Geriatric Consult Team and the Emergency Room Consult Team. In addition, the Division's Out-Patient activities include the Geriatric Assessment Unit and the tertiary care Memory Clinic. Many Division members sit on planning committees in the hospital, CSSS, long term care facilities, and at the Régie Régionale. Dr. Ruby Friedman is the Medical Director of the Long Term Care Service. (See clinical statistics)

In January 2006, long term care ward 6 West was relocated to the Lindsay Rehabilitation Hospital. This was in order for the hospital to carry out much needed renovations on other hospital wards. These patients were still cared for by Division of Geriatrics nursing and medical staff.

The Acute Geriatric Ward 6 North West continues to play an important role in the Hospital. As in previous years, over 80% of admissions are from the Emergency Room. The remainder is transfers to the Ward from other Acute Care Wards in the Hospital. These transfers are complex cases with multiorgan system disease, behavioral disorders and psychosocial issues that have been identified and followed by the Geriatric In-Hospital Consultation Team. In order to respond to the high needs of the hospital, the Ward capacity increased by 4 acute care beds. In addition, due to the temporary relocation of Long Tem Care Ward 6 West to the Lindsay Hospital, 4 long term care beds were added onto the Ward. Patients that are transferred to the Ward tend to have prolonged lengths of stay and the transfer to the Acute Geriatrics Ward enables Acute / Surgical beds to be freed-up. In addition, the Ward has taken on the mandate of being a transition ward for screening of infectious diseases (clostridia difficile, vancomycin resistant enterococcus) prior to patients being transferred to the Long Term Care Ward. As always, patients who have failed at their course of rehabilitation at rehabilitation hospitals are brought to the Acute Geriatric Ward for evaluation to explore all possible discharge options prior to initiating placement procedures for Long Term Care. Overall length of stay on 6 North West for all these categories of patients is 25 days, which is consistent with data from previous years.

As in previous years, for about 1/3 of the year, access to Long Term Care institutions in the community was severely limited. At times, over 50% of the Ward was occupied by patients requiring long term care. This severely limits our ability to respond to the Emergency Room and to accept transfers from

other Wards in the Hospital. During the months when the Ward was not occupied by Long Term Care patients, admissions and discharges increased by 60%.

In spite of the continuing context of a persistent nursing shortage, the Acute Geriatric Ward remains fully staffed at all times. The addition of 4 acute care beds and 4 long term care beds to the Ward was challenging. Beds have never been closed for any reason. Recruitment and retention of staff is an ongoing process and has been very successful. The efforts of Head Nurse, Judy Bianco are most appreciated. The addition of Clinical Nurse Specialist, Cynthia Dalton has provided much needed support and education for the nursing staff. Continuing thanks to Physiotherapist, Janie Veneziano and Occupational Therapist, Felice Wise who are important members of the multidisciplinary team. Dietician, Sarah Quint maintains a high presence on the Ward meeting the important issues of patient nutritional status which are closely monitored.

Relocation of patients to public and private foster homes and residences is a complicated process that requires careful matching with the patient's medical/psychosocial needs. Close coordination with the CSSS is often essential. All efforts are made to prevent institutionalization. The efforts of the Social Work Department, directed by Allan Ptack, are acknowledged, especially, Social Workers, Moish Bronet, Christina Iorio, Pina D'Orve and Terry Fishman.

We are most fortunate to have a dedicated group of Clinical Nurse Specialists who coordinate activities and consultations throughout the Division. In order to enhance their professional development, the nurses rotate their positions between Consultant Nurse in the Emergency Room, Consultant Nurse for the In-Hospital Consult Team, and Nurse Coordinator for the Geriatric Assessment Unit. Our thanks to Brenda Pelton, Joyce Certosini, Georgia Papadopoulos and Sara Leblond.

The Emergency Room Consult Team maintains a daily presence in the Emergency Room. Frail, elderly patients are screened and referred for evaluation. In order to ensure rapid patient evaluation and disposition, the Division provides a staff physician and a resident whose sole responsibility is to provide consultation in the Emergency Room.

In a continuing response to the needs of the Emergency Room, the Division of Geriatric Medicine agrees to have patients admitted Off-Service when there are no beds available on the Ward. Last year, there were 15 Off-Service admissions. Every effort is made to transfer these patients as soon as possible to the Ward so that they do not occupy acute surgical beds. Length of stay is 3 days. By and large, the protocols established with the Emergency Room for direct admissions are working well.

Both the Memory Clinic and the Geriatric Assessment Unit continue to provide a high level of multidisciplinary care that is acknowledged provincially and nationally. Residents in Family Medicine, Geriatric Medicine, Neurology and Internal Medicine rotate through the clinics. In addition, Geriatric Medicine Residents from the Université de Montréal, Université de Laval and Université de Sherbrooke, rotate through the clinics.

Referrals to the Geriatric Assessment Unit are accepted from community-based physicians, CSSS and from attending staff at the hospital. Patients who are discharged from the Geriatrics Ward or having been followed by the Consultation Team are often referred to the clinics. These are often complex medical cases with significant psychosocial issues. Close coordination between the clinic, CSSS and the community physicians is required. The Division welcomes the addition of Occupational Therapist Vandna Sethi, who is replacing a long time member of the Division, Caryn Nash, as she completes her Master's degree. Physiotherapist Mimi Leibovitch and Occupational Therapist Vandna Sethi provide

rapid home assessments and interventions for frail elderly in the community who would otherwise require hospitalization. Our thanks to Dr. Shek Fung under whose guidance the Geriatric Assessment Unit responds quickly and efficiently to the need of this frail population.

The Memory Clinic continues to provide a high level of tertiary care under the Co-Directors, Dr. Howard Bergman (Geriatric Medicine) and Dr. Howard Chertkow (Neurology and Geriatric Medicine). The Clinic remains at the forefront of research in cognitive impairment. In attendance are Geriatricians and Neurologists from the Sir Mortimer B. Davis – Jewish General Hospital, Geriatricians, Dr. Gary Inglis and Dr. Yves Bacher from the MUHC, Dr. Gabriel Leger from the CHUM, Dr. Christian Bocti from the Maisonneuve Rosemont Hospital, Dr. Ziad Nasreddine from the Centre Neurologie Rive Sud and Psychologists, Dr. Lennie Babins and Dr. Nora Kelner. Dr. Hyman Schipper's (Neurology) work on blood markers for the early diagnosis of Alzheimer's disease has received International recognition. Since 1995, visits to the Memory Clinic have more than doubled. Our thanks to Renée Kaminski and Chris Hosein who co-ordinate the Clinic.

The In-hospital Geriatric Consult Team has increased its activity considerably over the years. The frail, elderly patients at risk for decompensation due to complex medical and psychosocial problems are rapidly identified before they can deteriorate to the point where they would require chronic care. The Consult Team works closely with the staff on acute medical/surgical wards to insure appropriate discharge planning. Patients who require the expertise of the multidisciplinary team on the Acute Geriatrics Ward are transferred there. All requests for long term care are evaluated by the Geriatric Consult Team. Approximately 5% - 6% of elderly patients over 75 year of age admitted to any hospital bed through the Emergency Room ultimately attain long term care status. This is the best performance criteria of any hospital on the Island of Montreal. All alternatives to long term care are explored in depth.

The Division of Geriatrics has been actively preparing for evaluation this year by the Canadian Council of Hospital Services Accreditation. As in previous assessments, we continue to expect that we will receive an excellent evaluation and continuing recognition of our role as leaders in geriatric care.

The Division of Geriatric Medicine continues to confront serious issues relating to physical space limitations for our clinics and offices. It continues to be difficult to have sufficient examining rooms to operate our clinics efficiently. In consultation with the hospital administration and architectural firms, we are in the process of relocating our outpatient clinics and offices to a newly renovated floor in a recently acquired new pavilion of the hospital. We expect that this will allow us to care for our patients and their families in a more efficient and professional manner.

Report of the Long Term Care Service

The Division of Geriatric Medicine cares for 65 long term care patients on Wards 6 West and 6 North. Compared to five years ago admissions have gone up by 65%. Length of stay has also decreased from 169 days to 83 days. The increased turnover on the Wards results in considerable demand on the entire nursing and medical staff. The multidisciplinary team has worked very diligently to ensure that patients have a safe and comfortable environment. There is an on-going process to reduce and eliminate the use of physical and chemical restraints. Our thanks to Head Nurse, Estelle Kalfon and the entire nursing staff for their devoted care. It should be emphasized that in the context of a severe nursing shortage, the Long Term Care Wards remain with few exceptions fully staffed. In addition,

despite increased acute medical illnesses in these patients, they are cared for on the Long Term Care Wards and are not transferred to the already over-stressed Acute Care Wards.

In conjunction with renovations in other wards of the hospital Ward 6 West was renovated in 2004. In order to carry this out, 25 long term care patients were transferred through an unoccupied ward at the Lindsay Rehabilitation Hospital from May until December 2004. These patients were completely cared for by the medical and nursing staff at the Jewish General Hospital. In January 2006, further renovations had to be carried out at the Jewish General Hospital and again 25 long term care patients from Ward 6 West were transferred to the Lindsay Hospital under the care of the Division of Geriatric Medicine. To date, for the last five months, only 5 patients have been sent to the Jewish General Hospital for medical evaluation. Only 2 have required admission to hospital. This reflects the excellent co-coordinated multidisciplinary care that these patients have received while at the Lindsay Hospital. The entire medical staff and nursing staff of 6 West are congratulated for their devoted care during this second period of patient relocation. Special thanks to head nurse Estelle Kalfon and the Director of Social Services Allan Ptack, who ensured that patients are cared for in a safe and respectful environment. A continuing issue this year was the wide fluctuations in the number of long term care patients throughout the hospital. Randomly and unexpectedly, our discharge rate to long term care facilities would fall with a consequent buildup of long term care patients occupying beds on acute care wards. At any given time, 10-25 acute care beds would be occupied by long term care patients. This impacts on the functioning of the emergency room and restricts access to acute care beds throughout the hospital. In 2004, we were successful in our efforts to have the Ministry of Health reduce our long term care permit to 60 patients. However, we rarely approach this number. We continue to meet with the "Agence de la Santé et des Services Sociaux de Montréal" to develop protocols whereby we can attain our permit number of 60 long term care patients in a more consistent manner. To that end, we have developed a comprehensive database to analyze admission and discharge patterns to long term care. The situation will continue to be closely monitored.

Teaching Activities

The Division continues to have a heavy teaching load which continues to expand. An increasing number of clinical clerks in 3^{rd} and 4^{th} year medicine from McGill rotate through Geriatrics. This means we have 4-6 students per month throughout the year. This is an additional heavy responsibility for the attending staff on the floor that is already carrying a heavy clinical and teaching load. As of 2007, all 4^{th} year medical students will do their clerkship in Geriatric Medicine over 7 periods, increasing the number of students at the Jewish General Hospital to 7 - 10/period.

All Medical, Neurology and Family Medicine residents do a 1 month rotation in Geriatric Medicine, which includes a combination of ward and ambulatory care. As well, some Family Medicine residents do additional geriatrics mainly as an outpatient educational experience. Geriatric Medicine Specialty fellows, as well as Family Medicine fellows doing an extra year of training in Geriatric Medicine, rotate through our hospital.

6NW, the Acute Geriatric Ward, is recognized as a CTU of the Jewish General Hospital Department of Medicine.

Dr. Susan Gold is the McGill Geriatric Medicine Education coordinator and collaborates with Dr. Gustavo Duque, the undergraduate teaching coordinator for the McGill Division of Geriatric Medicine. Dr. Paul Heilpern is in charge of teaching of the medical students at the Jewish General Hospital site. Dr. John Kirk is the new responsible for the Care of the Elderly fellows at McGill as well as the Jewish

General Hospital. Dr. Susan Gold coordinates the teaching of the Geriatric Medicine specialty fellows, as well as the medical residents and is on the McGill Geriatric Medicine Specialty Training Committee.

Dr. Susan Vaitekunas coordinates the Jewish General Hospital Geriatric Journal Club and is on the McGill Geriatric Medicine CME Committee.

Our thanks to Judy Bianco, Head Nurse on 6NW, who leads the McGill Interdisciplinary Geriatric Seminar (MIGS) held once/year. In 2005, the theme was Mental Health and in 2006 will be End of Life Care. All the major health care disciplines from many institutions in Montreal actively participate.

The other members of the multidisciplinary team are actively involved in the teaching of all these students, residents and fellows, as well as in the teaching of students and their respected professions. Their expertise and efforts are invaluable and are much appreciated.

Our Faculty is actively involved in all the teaching activities organized by the McGill Division of Geriatric Medicine: McGill Geriatric Medicine Grand Rounds, McGill Geriatric Interdisciplinary Seminar (MIGS) and the Continuing Medical Education activities.

Research Activities

This past year the Division has been very active in research training of young geriatricians from other countries, including Argentina (Dr. Manuel Odasso Montero, who finished his 2 year clinical/research fellowship in December 2005; his fellowship was supported by the Maimonides/Jewish General Hospital/McGill Geriatric Medicine Fellowship) and Singapore (Dr. Chek–Hooi Wong, completed in November 2005). This year, 3 fellows with interest in oncology and frailty have found our group: Dr. Frédérique Retornaz, a geriatrician and oncologist from Université de Marseille; Dr. Véronique Girre, an oncologist from Institut Marie-Curie in Paris, and Martine Puts, PhD from Amsterdam, who has joined as a postdoctoral fellow in Epidemiology for 2 years.

Dr. Marcel Arcand, Professor of Family Medicine at Université de Sherbrooke, joined us for a one year sabbatical with a Maimonides/McGill/Jewish General Hospital Geriatric Medicine Fellowship. As well, Doreen Wan-Chow-Wah and Joyce Lee, Geriatric Medicine and Health Care for the Elder fellows, respectively have spent considerable time with us developing their research. All this is supported by the terms of investigation and research associates (Sathya Karunananthan, Michèle Monette and Nadia Sourial) providing a collegial, academic supportive atmosphere.

Members of the Division, along with cross-appointed members and associate members, are involved in several important areas of research. A research project on the role of lamins during mesenchymal stem differentiation was pursued at Dr. Duque's laboratory by Yi Xing, a dental student at McGill University. She received a CIHR Health Professional Student Research Award to develop a small project identifying both the role of lamins in a normal model of differentiation and also looking at the effect that lamin inhibition may have in this model. This project was continued this year by a summer research student, Mr. Ian Hammond-Martel, sponsored by the CIHR Skeletal Training Program.

Additionally to this project, Dr. Duque has received sponsorship from the CIHR Skeletal Training program for two summer research students. One project looking at the changes in bone marrow adiposity under caloric restriction in rats is being pursued by Sara Saliem, a medical student at McGill University. This project is developed in collaboration with the Universities of Sherbrooke and Laval and has been financed by the FRSQ Réseau Québécois de recherche sur le viellissement.

Finally, a translational research project looking at the non-invasive quantification of bone marrow adiposity and its predictive value for osteoporosis is being developed in collaboration with the Framingham Osteoporosis Study by Hanane Benbarkat, a graduate student at McGill University.

This year we were very successful in obtaining grants from peer-reviewed funding agencies. We are also supported by the Levinschi Foundation, the Dr. Joseph Kaufmann Chair in Geriatric Medicine and the Ron Oberlander Research Training Fund.

Howard Bergman is Director of the Réseau Québécois de recherche sur le vieillissement (FRSQ) and is Chair of the Advisory Board (IAB) of the CIHR Institute of Aging. He is also President of the Canadian Geriatrics Society. He was recently nominated Chair of the Board of Directors of the National Initiative for the Care of the Elderly (NICE) funded as a new Initiative by the Networks of Centres of Excellence (NCE).

- 1. **Dementia** research is mainly based in the Anna & Louis Goldfarb Jewish General Hospital/McGill Memory Clinic. Dr. Howard Chertkow leads the cognition axis of the FRSQ Réseau Québécois de recherche sur le vieillissement. Howard Chertkow and Howard Bergman are past Presidents of the Canadian Consortium for Clinical Cognitive Research (C5R). The Memory Clinic and Cognitive Disorders Research Program has been focusing on the early diagnosis of dementia led by Dr. Howard Chertkow, who is also the Director of the Bloomfield Centre for Research in Aging. The research involves cognitive testing, neuroimaging, clinical markers, as well as biological markers in collaboration with Drs. Hyman Schipper of the Department of Neurology, and Andrea Leblanc of the Lady Davis Institute. The Memory Clinic and Cognitive Disorders Research Program also comprises an important clinical trials research program. Drs. Sylvia Windholz and Susan Vaitekunas have acted as PI's in a number of the clinical trials. The geriatricians are actively involved in the research in the Memory Clinic.
- 2. **Health Services Research** has developed particularly through Solidage: McGill/Université de Montréal Research Group on Integrated Services for the Elderly (www.solidage.ca), which is led by Drs. Howard Bergman, Johanne Monette, Christina Wolfson and François Béland from the Université de Montréal. The Group is established on a permanent basis and is based in the Epidemiology Centre at the Jewish General Hospital and is an important focus for collaboration with the Université de Montréal. The Group holds a major Canadian Institutes for Health Research grant (3.5 million dollars over 5 years) for an international interdisciplinary research team on *The Challenge of Understanding and Meeting the Needs of the Frail Elderly in the Canadian Health Care System*. Together with the PRISMA research group (Université Laval/Université de Sherbrooke), the Group is applying for a renewal of its team grant.
- 3. **Frailty.** The Canadian Initiative on Frailty and Aging (www.frail-fragile.ca) with support from the Max Bell Foundation, the Gustav Levinschi Foundation, the FRSQ and other groups in Canada and Europe brings together researchers from Canada, USA, Europe, Japan and Israel. The group has already published several papers and hosted an international invitation working meeting in March 2006. This group leads an international study with collaborations from USA, Mexico, Israel, U.K., Italy, Holland etc. utilizing databases from major longitudinal studies on aging to study frailty characteristics and their ability to predict adverse outcomes. This work is supported by two excellent research associates: Sathya Karunananthan and Nadia Sourial.

4. **Bone.** The goal of the Aging Bone Research Program (www.med.mcgill.ca/geriatrics/research/agingbone.htm) is to elucidate the mechanisms and potential treatment of the age-related bone loss. The most significant contributions of our investigations are:

From a basic sciences approach, we look at the potential trans-differentiation of bone marrow adipocytes into mature osteoblasts with a subsequent gain in bone mass. We demonstrated that adipogenesis within the bone marrow could be replaced by active osteoblasts with a gain in bone mass and bone quality.

We have also assessed the changes that happen with aging in the main transcription factors that determine the fate of mesenchymal stem cells. We have found that the levels of PPAR γ 2, a determinant factor for bone marrow adipogenesis, are increased during the aging process and that the inhibition of PPAR γ 2 has a potential to increase bone mass in aging bone as we demonstrated by using 1,25(OH)2D3. Additionally, we have developed a new research line looking at the role that lamins (proteins of the nuclear envelope) may have in the differentiation of mesenchymal stem cells.

From a clinical approach, we have assessed the levels of vitamin D and PTH in a population of old adults in Quebec. We reported that a significant proportion of ambulatory elderly population in Quebec (35%) suffers of either deficiency or insufficiency in vitamin D levels with a subsequent increase in their levels of parathyroid hormone.

Finally, our program has been recently accepted as affiliated with the Framingham Osteoporosis Study in collaboration also with Harvard Medical School-Division of Aging. A project aimed to develop an innovative assessment of fracture risk looking at bone marrow adipogenesis using CT-scan has been started. Using the Framingham study database we have been able to correlate bone marrow adipogenesis with serum levels of vitamin D, bone mineral density and incidence of fractures.

5. **Long Term Care.** Dr. Johanne Monette is the scientific director of the Collaborative Research Network in Long-Term Care (http://www.solidage.ca/e/CRNLTC.htm), which consists of 17 institutions, representing a total of 3,763 beds. A group of researchers, clinicians and administrators from the Centre for Clinical Epidemiology and Community Studies at the Jewish General Hospital, and from the Maimonides Geriatric Centre (MGC) are involved in the Network. The MGC Foundation provides financial support for the Network's activities and funding to complete research projects is obtained from both governmental and nongovernmental funding agencies and hospital foundations. The main objective is to elaborate and to complete research projects developed by Network members which may involve any clinical field of geriatrics, with an emphasis on an interdisciplinary approach.

Four studies were carried out in the last year within the context of the Network. Dr. Joyce Lee, a clinical fellow in the health care of the elderly, recently completed a study at MGC entitled: The Use of Cholinesterase Inhibitors in the Long-Term Care Setting. Dr. Marcel Arcand, MD, MSc, a visiting Professor, Division of Geriatric Medicine, Jewish General Hospital, McGill University is the principal investigator of an ongoing study entitled: Evaluation of an educational program about comfort care in advanced dementia: a collaborative quality improvement project with Maimonides Geriatric Centre.

Dr. Johanne Monette leads an ongoing study entitled: Interdisciplinary educational program to optimize the management of behavioral and psychological symptoms of dementia in nursing home carried out at and with the Veterans Affairs Canada Ste-Anne's Hospital and the Centre d'hébergement Idola St-Jean. A research grant was obtained from The Canadian Patient Safety Institute. Dr. Johanne Monette is also a collaborator of an ongoing study entitled: Delirium in nursing home patients with severe cognitive impairment, directed by Dr. Jane McCusker from Ste-Mary's Hospital, and Philippe Voyer, Faculty of Nursing Sciences, Laval University. A research grant was obtained from the Canada Alzheimer's Society.

- 6. **Oncology and Older Persons.** The McGill Geriatric Oncology interest group, in collaboration with Gerry Batist at the Department of Oncology, has been created and is based at the Jewish General Hospital. With the fellows from Europe (Frédérique Retornaz, Véronique Girre and Martine Puts) and with Dr. Doreen Wan-Chow-Wah, a McGill geriatric fellow under the leadership of Dr. Johanne Monette and with the important contribution of Michèle Monette, Research Associate, an interesting research program is underway with 2 studies looking at the health and functional status of older patients presenting to Oncology (cross-sectional) and attitudes toward older patients by oncologists (survey). A longitudinal study is in preparation. This group will also be launching a geriatric oncology consulting service and will be developing education activities.
- 7. **Education Research.** Under Dr. Gustavo Duque, as Coordinator of Undergraduate Medical Education for McGill Geriatric Medicine, this year's undergraduate education program has established and evaluated several teaching programs as part of the Transcurricular Teaching of Aging And Geriatrics (TTAG project). The first program was implemented during the first year as an introduction to the older patient. For the second year a blended model of education combining lectures and web-based interactive case constructs was implemented to teach students basic hospital skills. A poster presenting the results of this experience received the award as best poster presentation at the Meeting of the Canadian Association of Faculties of Medicine, and an article assessing this program was accepted in the journal *Medical Teacher*. Finally, the clerkship content and evaluation methods were evaluated and two abstracts were presented during the meeting of the American Geriatrics Society. A paper showing the assessment of our electronic portfolio as an assessment tool was published at *BMC-Medical Education*.

See Publications and Abstracts and Research Projects

Committees

Dr. Howard Chertkow, a cross-appointed member of our Division, is Director of the Bloomfield Centre for Research in Aging.

Dr. Christina Wolfson, a cross-appointed member of our Division, is Director of the Jewish General Hospital Centre for Clinical Epidemiology and Community Studies.

Dr. Sylvia Windholz is active on the hospital Ethics Committee.

Dr. Paul Heilpern is Chair of the Mortality and Morbidity Committee of our Division of Geriatric Medicine.

Dr. Susan Vaitekunas works with the Collège des Médecins in surveying long term care institutes in Quebec.

See Awards and Committee Work.

ACKNOWLEDGEMENTS

As can be noted in this report, there is a tremendous effort in clinical work, teaching and research from a relatively small group of physicians and other healthcare professionals, clinicians and researchers as well as support staff, including research coordinators, assistants and secretaries. This is a testimony to their dedication and commitment, which has helped make our hospital a centre of academic excellence in Geriatric Medicine and Aging.

Respectively submitted,

Howard Bergman, MD

The Dr. Joseph Kaufmann Professor and Director Division of Geriatric Medicine McGill University

Director Division of Geriatric Medicine Jewish General Hospital Ruby Friedman, MD

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CLINICAL STATISTICS

ADMIS	ADMISSIONS								
ACUTE	ACUTE GERIATRICS (combined 6NW & Off Service) STATISTICS								
	ADM.	E.R.	WARDS	TOTAL	HOME	F.H.	OTHER		
		(%)	((%)	HOSP.(%)	(%)	(%)	INST. (%)		
2001	466	381	70	451	1	4	10		
		(81.8)	(15.0)	(96.8)	(0.2)	(0.9)	(2.1)		
2002	334	254	72	326	1	1	6		
		(76)	(21.6)	(97.6)	(0.3)	(0.3)	(1.8)		
2003	380	314	55	369	0	1	10		
		(82.6)	(14.5)	(97.1)		(.3)	(2.6)		
2004	409	317	76	393	1	0	15		
		(77.5)	(18.6)	(96.1)	(.2)		(3.7)		
2005	391	335	36	371	3	0	17		
		(85.7)	(9.2)	(94.9)	(.8)		(4.3)		

OFF SERVICE								
ADMISSIONS								
	ADM.	E.R. (%)	OTHER (%)					
2001	23	23 (100%)	0					
2002	62	62 (100%)	0					
2003	31	31 (100%)	0					
2004	10	10 (100%)	0					
2005	15	15 (100%)	0					

OFF S	OFF SERVICE										
DISCH	DISCHARGES										
	D/C	Home (%)	F.H. (%)	6NW (%)	LTC JGH (%)	Other Ward (%)	Rehab Hosp.	LTC Inst. (%)	Death (%)	Other (%)	LOS Days
2001	23	7 (30.4)	0	15 (65.2)	0	1 (4.4)	0	0	0	0	2.1
2002	62	11 (17.8)	1 (1.6)	43 (69.4)	0	1 (1.6)	3 (4.8)	3 (4.8)	0	0	3.4
2003	31	3 (9.7)	0	26 (83.9)	0	2 (6.4)	0	0	0	0	3.9
2004	10	2 (20.)	0	5 (50.0)	1 (10.0)	2 (20.0)	0	0	0	0	2.7
2005	15	2 (13.)	0	10 (67.0)	1 (7.0)	2 (13.0)	0	0	0	0	2.3

6NW												
A CITY	A CHITTE CLEDIA TEDICO WA DD CTA THOTHOC											
ACUI	ACUTE GERIATRICS WARD STATISTICS											
DISCI	HARGI	ES										
	D/C	HOME	APT-	F.H.	TOTAL	REHAB	OTHER	OTHER	LTC	DEATH	OTHER/	LOS
		(%)	HOTEL (%)	(%)	COM.	(%)	LTC INST.	WARDS	JGH	(%)	Unknown	DAYS
					(%)		(%)	(%)	(%)			
2001	458	221	19	44	284	27	26	6	77	36	2	17.5
		-48.3	-4.1	-9.6	-62	-5.9	-5.7	-1.3	- 16.8	-7.9	-0.4	
2002	315	111	17	24	152	22	33	3	69	35	1	26
		-35.2	-5.4	-7.6	-48.2	-7	-10.5	-1	21.9	-11.1	-0.3	
2003	375	125	11	27	163	23	25	5	133	26	0	23.3
		-33.3	-2.9	-7.2	-43.4	-6.1	-6.7	-1.3	35.5	-6.9		
2004	404	132	4	20	156	31	40	7	141	27	2	22.2
		-32.7	-1	-5	-38.7	-7.7	-9.9	-1.7	34.9	-6.7	-0.5	
2005	386	115	4	18	137	28	34	1	162	23	1	25.2
		-29.8	-1	-4.7	-35.5	-7.3	-8.8	-0.3	-42	-6	-0.3	

LTC									
LONG TERM (CARE GERIATRIC W	ARD STATISTIC	CS						
ADMISSIONS	ADMISSIONS								
	ADMISSIONS	6NW (%)	OTHER (%) WARDS	SOCIAL ADM FROM ER (%)					
2001	142	70 (49.3)	72 (50.7)	0					
2002	139	57 (41.0)	78 (56.0)	4 (3.0)					
2003	231	124 (53.6)	105 (45.4)	2 (1.0)					
2004*	201								
2005	256	150 (58.6)	103 (40.2)	3 (1.2)					

^{*} The data for LTC admission/discharge was difficult to evaluate this year. LTC ward 6 West was temporarily closed for 9 months and 27 patients were relocated to the Lindsay LTC Ward. In addition 8 LTC patients were cared for on Acute Geriatric Ward 6NW, thus for 9months there was a net loss of 5 LTC beds. All LTC admissions had to first be evaluated and screened for infectious diseases (VRE, MRSA) on the Acute Geriatric Ward 6NW prior to transfer to LTC wards.

LTC	LTC										
LONG	LONG TERM CARE GERIATIC WARD STATISTICS										
DISCI	HARGE	ES									
	D/C	HOME	APT-	F.H.	TOT D/C	REHAB	LTC	WARDS	DEATH	OTHER	LOS
		(%)	HOT	(%)	TO	(%)	INST.	(%)	(%)		DAYS
			(%)		COM.(%)		(%)				
2001	142	10	2	3	15	0	87	0	38	2	139.8
		(7.0%)	(1.4)	(2.1)	(10.5)		(61.3)		(26.8)	(1.4)	
2002	139	9	0	2	11	0	89	0	34	5	142.0
		(6.5%)		(1.4)	(7.9)		(64.0)		(24.5)	(3.6)	
2003	231	10	1	8	19	0	173	0	35	4	99.3
		(4.3%)	(.4)	(3.5)	(8.2)		(75)		(15.1)	(1.7)	
2004	196	10	0	11	21	0	153	0	22	0	
		(5.1)		(5.6)	(10.7)		(78.1)		(11.2)		
2005	256	17	0	1	18	0	203	0	23	12	85.6
		(6.6)		(.4)	(7.0)		(79.3)		(9.0)	(4.7)	

IN-HOSPITAL GERIATRIC CONSULTATION TEAM STATISTICS							
	NEW PATIENTS	RE- REFERRALS	TOTAL CONSULTS	F/U VISITS	TOTAL VISITS		
2001	209	192	401	1503	1904		
2002	182	166	348	879	1227		
2003	263	152	415	1707	2122		
2004	243	196	439	2150	2589		
2005	263	173	436	1680	2116		

New patients: New consultation on a patient never previously seen in any program of the Division of

Geriatrics.

Re-referrals: New consultation on a patient previously seen in a program of the Division.

E.R. GERIATRIC CONSULTATION TEAM STATISTICS							
	NEW PATIENTS	RE- REFERRALS	TOTAL CONSULTS	F/U VISITS	TOTAL VISITS		
2001	299	434	733	85	818		
2002	333	361	694	68	762		
2003	374	387	761	339	1100		
2004	366	347	713	299	1012		
2005	389	352	741	420	1161		

New Patients: New consultation on a patient never previously seen in any program of the Division of

Geriatrics.

Re-referrals: New consultation on a patient previously seen in a program of the Division.

COMMUNITY GERIATRIC ASSESSMENT UNIT CLINIC STATISTICS								
	NEW	HOME	RE-	TOTAL	F/U	TOTAL		
	PATIENTS	EVAL.	REFERRALS	CONSULTS	VISITS	VISITS		
2001	134	16	28	178	242	420		
2002	134	54	34	222	308	530		
2003	131	49	28	208	342	550		
2004	167	23	17	207	375	582		
2005	160	19	23	202	429	631		

New patients: New consultation on a patient never previously seen in any program of the Division of

Geriatrics.

Re-referrals: New consultation on a patient previously seen in a program of the Division.

MEMORY CLINIC STATISTICS							
	NEW	RE-REF.	TOTAL	F/U	TOTAL		
	PATIENTS		CONSULTS	VISITS	VISITS		
2001	209	14	223	505	728		
2002	233	5	238	603	841		
2003	189	8	197	647	844		
2004	182	4	186	694	880		
2005	187	11	198	658	856		

PUBLICATIONS, BOOK CHAPTERS AND ABSTRACTS JANUARY – DECEMBER, 2005

Peer Reviewed Papers

Bourque P, Pakzad S, Barriault J, Forget H, <u>Béland F</u>: La consommation de benzodiazépines chea les personnes âgées ayant recours au médecin pour un problème de santé mentale, Revue québécoise de psychologie, 2005; 26:259-272.

Touati, N, Denis, JL, Contadriopoulos, AP, <u>Béland F</u>: Introduire le changement dans les systèmes de soins au Québec: comment tirer profit de l'expérimentation sociale? Sciences sociales et santé, 2005;23:75-102.

<u>Béland, F</u>, Zunzunegui, MV, Alvarado, B. Otero, A. & Del Set T: Trajectories of cognitive decline and social relations. Journals of Gerontology: Psychological Sciences, 2005:60B:P320-330.

Bourque, P., Puskar, D., Bonneville, L. & <u>Béland, F</u>: Contextual effects on life satisfaction of older men and women. Canadian Journal on Aging, 2005, 24:31-44.

C. Sarasqueta, O. Gabaldon, I. Iza, <u>F. Béland</u>, P.M. Paz: Cross-cultural adaptation and validation of the NASS oucomes instrument in Spanish patients with low back pain. European Spine Journal. 2005,14:586-94.

Savard, J., Lebel, P., Leduc, N., <u>Béland</u>, F., & <u>Bergman</u>, H. Caregiver satisfaction with support services: Influence of different types of services. Journal of Aging and Health. (2006) 18(1):3-27

<u>Béland F</u>, <u>Bergman H</u>, Lebel P, et al. A System of Integrated Care for Frail Older Persons (SIPA) in Canada: Results from a Randomized Controlled Trial. J of Gerontol A Biol Sc, Med Sci. 2006, vol 61A, No. 4, 367–373

<u>Béland F</u>, <u>Bergman H</u>, Lebel P, Denis JL, Contadriopoulos AP, Tousignant P, Dallaire L, Fletcher J. Integrated Services for Frail Elders (SIPA): A trial of a Model for Canada. Can Jour on Aging. 2006; vol. 25, (1): 25-42. Also published in French: Des services intégrés pour les personnes âgées fragiles (SIPA): expérimentation d'un modèle pour le Canada. Revue canadienne sur le vieillissement. 2006; vol. 25 (1): 5-24.

Wong CH, <u>Bergman H</u>. A Review on Models and Perspectives on Frailty in Older Persons. SHG Proceedings. 2005; vol 14, no 2:121-127

Rockwood K, Song X, MacKnight C, <u>Bergman H</u>, Hogan D, McDowell I, Mitnitski I. A global clinical measure of fitness and frailty in elderly people. CMAJ. 2005; vol 173, no 5: 489-495

Bullock R, Touchon J, <u>Bergman H</u>, Gambina G, He Y, Rapatz G, Nagel J, Lane R. Rivastigmine and donepezil treatment in moderate to moderately-severe Alzheimer's disease over 2 years. Current Medical Research and Opinion. 2005; vol 21, no 8: 1317–1327

Touchon, <u>Bergman H</u>, Bullock R, Rapatz G, Nagel J, Lane R. Response to rivastigmine or donepezil in Alzheimer's patients with symptoms suggestive of concomitant Lewy body pathology. Current Medical Research and Opinion. 2006; vol 22, no 1: 49-59

Bullock R, <u>Bergman H</u>, Touchon J, Gambina G, He Y, Nagel J, Lane R. Effect of age on response to rivastigmine or donepezil in patients with Alzheimer's disease. Current Medical Research and Opinion. 2006; vol 22, no 1: 483-494

Bergman H, Hogan D, Karunananthan S, et al. Frailty. <u>The Encyclopedia of Aging</u>. 2006; vol. 1: 423-426

Nasreddine, Z. S., Phillips, N. A., Bédirian, V., Charbonneau, S., Whitehead, V., Collin, I., Cummings, J.L., & <u>Chertkow, H.</u>, (2005) The Montreal Cognitive Assessment, MoCA: A brief screening tool for Mild Cognitive Impairment. Journal of the American Geriatrics Society. 53 (4), 695-699.

Levinoff, E.J., Phillips, N.A., Verret, L., Babins, L., Kelner, N., Akerib, V., & <u>Chertkow</u>, (2006). Cognitive estimation impairment in Alzheimer disease and Mild Cognitive Impairment. Neuropsychology, 20 (1), 123–132.

Feldman, H., Gauthier, S., <u>Chertkow, H.</u>, Conn, D. K., Freedman, M., & MacKnight C. R. for the 2nd Canadian Conference on Antidementia Guidelines. (2006). Canadian Guidelines for the Development of Antidementia Therapies: a Conceptual Summary. Canadian Journal of Neurological Sciences, 33 (1), 6-26.

Gauthier, S., Reisberg, B., Zaudig, M., Peterson, R., Ritchie, K., Broich, K., Belleville, S., Brodaty, H., Bennett, D., <u>Chertkow, H.</u>, Cummings, J. L., De Leon, M., Feldman, H., Ganguli, M., Hampel, H., Scheltens, P., Tierney, M., Whitehouse, P., & Winblad, B., on behalf of the participants of the International Psychogeriatric Association Expert Conference on MCI. (2006). Mild Cognitive Impairment. Lancet, 367,1262-1270.

Jotkowitz AB, <u>Clarfield AM</u>, Faust G, Wartman SA. Screening for carotid artery disease in the general public. Eur J Int Med 2005;16:34-6.

Jotkowitz AB, <u>Clarfield AM</u>, Glick S. The care of patients with dementia: a modern Jewish ethical perspective. J Amer Geriatr Soc 2005; 53:881-884.

Jotkowitz A, <u>Clarfield AM</u>. The physician as comforter: the imperative to visit the sick. Eur J Int Med 2005; 16: 95-96.

<u>Clarfield A. Mark</u>. The Strange Case of Miss E. C. Carlill versus the Carbolic Smoke Ball Company [flu]. <u>Ann Long-term Care</u> 2005;13(1):46-47. [reprinted in The Medical Post 2005 (Feb 15); 41(7):32-3]

<u>Clarfield A Mark.</u> Enteral feeding tubes in end-stage dementia patients: to insert or not to insert? Administrative and financial aspects [editorial]. Isr Med Assoc J 2005;7:467-469.

<u>Clarfield AM</u>. Reversible dementia – the implications of a fall in prevalence [editorial]. Age and Ageing 2005; 34:544-545.

Clarfield AM. Fathers and Sons [Old Lives Tales]. J Amer Geriatr Soc 2006;54:365-6.

<u>Clarfield A Mark</u>. Stalin's Death. Annal sof Long-term Care 2005; 13(3): 52-4 (reprinted in Medical Post 2005)

<u>Duque G</u>, Dion N, Macoritto M, Ste. Marie LG, Kremer R; 1,25(OH)2D3 acts as a bone forming agent in the hormone independent Senescence Accelerated Mouse (SAMP6) model of Osteoporosis. The American Journal of Physiology: Endocrinology and Metabolism 2005 Apr; 288(4):E723-30.

Joseph C, Kenny A, Lorenzo, <u>Duque G</u> and Kuchel G. Role of Endocrine-Immune Dysregulation in Osteoporosis, Sarcopenia, Frailty and Fracture Risk. Molecular Aspects of Medicine 2005; 26(3):181-201.

Montero-Odasso M, <u>Duque G</u>, Vitamin D in the aging musculoskeletal system: an authentic strength preserving hormone. Molecular Aspects of Medicine 2005; 26(3):203-19.

<u>Duque G</u>. Taking musculoskeletal aging out of the bench: Do we finally understand frailty? Molecular Aspects of Medicine 2005; 26 (3):141-3.

<u>Duque G</u>, Rivas D. Age-related changes in lamin A/C expression in the osteoarticular system: laminopathies as a potential new aging mechanism. Mechanisms of Aging and Development 2005 Apr; 127(4):378-83.

Montero-Odasso.M, Schapira. M, Soriano ER, <u>Duque G</u>, Riccio.P, Camera.L and Kaplan. R. Proving the classification of falls: an operative approach to the unexplained falls. BMC-Geriatrics BMC Geriatr. 2005 Dec 1; 5:15.

Xavier Roucou and <u>Andrea LeBlanc</u>. Cellular Prion Protein Neuroprotective Function: Implications in Prion Diseases. J. Mol. Med. 2005 83(1) p3-11.

<u>LeBlanc AC</u> (2005) The role of apoptotic pathways in Alzheimer's disease neurodegeneration and cell death. Current Alzheimer Research 2005, 2(4), 389-402

Roucou X, Giannopoulos PN, Zhang Y, Jodoin J, Goodyer CG, <u>Leblanc A</u>. Cellular prion protein inhibits proapoptotic Bax conformational change in human neurons and in breast carcinoma MCF-7 cells. Cell Death Differ. 2005, 12(7):783-795.

Hinyu N. Nedev, Guy Klaiman, <u>Andrea LeBlanc</u>, Uri Saragovi. Synthesis and evaluation of novel dipeptidyl benzoyloxymethyl ketones as caspase inhibitors. Biochem. Biophys. Res. Comm., 2005 336(2):397-400

Huishan Quo, Darlaine Petrin, Yan Zhang, Catherine Bergeron, Cynthia G. Goodyer, and <u>Andrea LeBlanc</u>. Caspase-1 activation of Caspase-6 in human apoptotic neurons and in Alzheimer's disease. Cell Death and Differentiation, 2006, 13(2):285-92.

Landreville P, Bédard A, Verrault R, Desrosiers J, Champoux N, <u>Monette J</u>, Voyer P. Non pharmacological treatment of agressive behaviors related to dementia. Accepted for publication in Journal of International Psychogeriatrics, 2006

Diaz Z, Colombo M, Mann KK, Su H, Smith KN, Bohle S, <u>Schipper HM</u>, Miller WH. Trolox selectively enhances arsenic-mediated oxidative stress and apoptosis in APL and other malignant cell lines. Blood 105: 1237-1245, 2005

Diaz-Heredia Z, Assaraf MI, Miller WH, <u>Schipper HM.</u> Astroglial cytoprotection by erythropoietin pre-conditioning: Implications for ischemic and degenerative CNS disorders. J Neurochem 93: 392-402, 2005

Song W, Su H, Song S, Paudel HK, <u>Schipper HM</u>. Over-expression of heme oxygenase-1 promotes oxidative mitochondrial damage in rat astroglia. J Cell Physiol 206: 655-663, 2006

<u>Schipper HM</u>, Bennett DA, Liberman A, Bienias L, Schneider JA, Kelly J, Arvanitakis Z. Glial heme oxygenase-1 expression in Alzheimer disease and mild cognitive impairment. Neurobiol Aging 27: 252–261, 2006

McCusker J, Cole M, Dufouil C, Dendukuri N, Latimer E, Windholz S, Elie M. (2005) The prevalence and correlates of major and minor depression in older medical patients. JAGS. 53(8):1344-53

Ehrensperger E, Minuk J. Durcan L, Mackey A, <u>Wolfson C</u>, Fontaine A-M, Côté R (2005). Predictive value of soluble intercellular adhesion molecule - 1 for risk of ischemic events in individuals with cerebrovascular disease. Cerebrovascular Diseases, 20(6):456-62.

Oremus M, Cosby JL, <u>Wolfson C</u> (2005). A Hybrid Qualitative Method for Pretesting Questionnaires - The Example of a Questionnaire to Caregivers of Alzheimer Disease Patients. Research Nursing in and Health, 28:419-430.

Demers L, Desrosiers J, Ska B, <u>Wolfson C</u>, Nikolova R, Pervieux I, Auger C. (2005). Assembling a toolkit to measure geriatric rehabilitation outcomes. American Journal of Physical Medicine and Rehabilitation, 84(6):460-472.

Chamandy N, <u>Wolfson C</u>. (2005). Underlying causes of death in demented and non-demented elderly Canadians. Neuroepidemiology, 25:75-84.

Champoux N, <u>Monette J</u>, Monette M, Galbaud du Fort G, <u>Wolfson C</u>, Le Cruguel J-P. (2005) Use of neuroleptics. Study of institutionalized elderly people in Montreal, Que. Canadian Family Physician, 51:696-697.

Book Chapters, Reviews

<u>Béland F</u>, Le financement privé de la santé: coûts plus élevés, accès inégal, pages 403-416, Michel Venne (éditeur), L'annuaire du Québec 2004, Montréal, Fides, 2005.

<u>Clarfield AM</u>, Brodsky J, Leibovitz A .Care of the elderly in Israel:old age in a young land, In Pathy JMS, Morley JE, Sinclair A (eds): Principles and Practice of Geriatric Medicine, 4th edition . John Wiley & Sons ,UK 2006:1947-52.

<u>Clarfield AM</u>. The use of enteral feeding tubes in end-stage dementia: administrative and financial aspects in Niv Y. (ed) Feed or Cease: Artificial Nutrition in End-of-Life Care. Heiliger, Tel Aviv, 2006: 67-70 (Hebrew version of IMAJ 2005; 7:467-9)

<u>Clarfield A.</u> Mark of Groopman J. The Anatomy of Hope. Jerusalem Post Magazine 2005; Jan 7:26.(reprinted in Medical Post 2005; Jan 25: 30.

<u>Clarfield AM</u>.of Maurer K, Maurer U. Alzheimer: the Life of a Physician and the Career of a Disease. JAMA 2005;293:745-6.

<u>Clarfield AM</u>. of Welch H Gilbert. Should I Be Tested for Cancer? <u>Jerusalem Post Magazine 2005</u>; Aug 19:25. (reprinted in Medical Post 2005; Nov 8:39)

<u>Clarfield AM</u> of Oshinsky David M. Polio:an American Story. Jerusalem Post Magazine 2005; Sept 2:27.(reprinted in Medical Post 2005; Oct 11:29)

<u>Clarfield AM</u> of Nuland S. Semmelweis [Cleanliness is next to Godliness] Medical Post 2005; Oct 11:27.

<u>Clarfield AM</u> of Bliss M. Harvey Cushing: a Life in Surgery. NEJM 2006;345:534-5.

<u>Clarfield AM</u> of Shephard B. After Daybreak: The Liberation of Bergen-Belsen, 1945 JAMA 2006;295:567.

<u>Clarfield AM</u> of Nuland S. Maimonides.Jerusalem Post Magazine 2006; Mar 10:26-7. (reprinted in Medical Post 2006;)

Abstracts

<u>Bergman H.</u> Vieillissement et Impact sur la Société : Mythes et Réalités. Vieillir? Plus qu'une question d'âge. 26^e Congrès annuel de la Société québécoise de biologie clinique. Drummondville, QC (20 octobre, 2005). Ann Biol Clin Qué 2005; 42(3) : 3-28 p10

Naglie G, Comrie J, Bacher Y, Beattie L, <u>Bergman H</u>, Black S, Borrie M, Byszewski A, Freedman M, Hogan D, Irvine J, Krahn M, MacKnight C, Patterson C, Ritvo P, Silberfeld M, Streiner D, Tomlinson G. Quality of Life in Alzheimer's Disease by Severity Level: Preliminary Results from the Canadian Alzheimer's Disease Quality of Life (CADQOL) Study. Canadian Geriatrics Society Annual Scientific Meeting, Vancouver, BC. (April 20-22, 2006) The Canadian Journal of Geriatrics 2006; 9:66

<u>Bergman H</u>, Wolfson C, Sourial N, Zhu B, Karunananthan S, <u>Béland F</u>, Hummel S, Quail J, Weiss D. Frailty Data (FrData): Examining Candidate Domains of Frailty in the Elderly. Canadian Geriatrics Society Annual Scientific Meeting, Vancouver, BC. (April 20-22, 2006) The Canadian Journal of Geriatrics 2006;9 (2): 70

Wong C, <u>Bergman H</u>, Sourial N, Karunananthan S, Montero M, Quail J, Weiss D, <u>Wolfson C</u>. Fried's Frailty Data (FrFrData): Prevalence of Frailty and the Association with Socioeconomic Status, Disability, and Co-morbidity from a Database in Montreal. Canadian Geriatrics Society Annual Scientific Meeting, Vancouver, BC. (April 20-22, 2006) The Canadian Journal of Geriatrics 2006;9 (2): 70

Montero-Odasso M, <u>Bergman H</u>, Philips NA, Wong C, Sourial N, <u>Chertkow H</u>. The Effect of Executive and Memory Dysfunction on Gait Performance in a Mild Cognitive Impairment Population.

Canadian Geriatrics Society Annual Scientific Meeting, Vancouver, BC. (April 20-22, 2006) The Canadian Journal of Geriatrics 2006;9 (2): 82

Bocti, C., Whitehead, V., Fellows, L., and <u>Chertkow, H</u>. Characterictics of patients with Mild Cognitive Impairment who do not progress to dementia. (2005). Neurology, 64(Suppl 1), A365.

Duong, A., <u>Chertkow, H.</u>, Whitehead, V, & De Sousa, K. Time-course of the beneficial effects of repetitive transcranial magnetic stimulation on picture naming in Azheimer's Disease. (2005). Neurology, 64(Suppl 1), A365.

<u>Chertkow, H.</u>, Bocti, C., <u>Bergman, H.</u>, Whitehead, V., Verret, L., & McKelvey, R. MCI progressors and non-progressors: neuropsychological profiles fail to guarantee the prognosis. (2005). Alzheimer's & Dementia, 1, S21.

Hudon, C., Belleville, S., Lepage, E., Gauthier, S. & <u>Chertkow, H.</u> (2005) Characterization of the episodic memory impairment in Alzheimer's disease and mild cognitive impairment. International Psychogeriatric, 17(suppl. 2), p. 248.

<u>Chertkow, H., Schipper, H.M.</u>, Whitehead, V., & Sherwin, B. (2006). Estrogen treatment fails to improve cognition in men with Mild Cognitive Impairment. Neurology, 66, No 5, (suppl. 2), A118.

Retornaz F, Monette J, Monette M, Sourial N, Wan-Chow-Wah D, Batist G, Bergman H. Characterization of the Health and Functional Status of Cancer Patients Aged 70 Years and Older Referred to Oncology Clinic for Chemotherapy. Canadian Geriatrics Society Annual Scientific Meeting, Vancouver, BC. (April 20-22, 2006) The Canadian Journal of Geriatrics 2006;9 (2): 72

Lee J, Monette J, Sourial N, Monette M, Larouche G, Bergman H. The Use of Cholinesterase Inhibitors in the Long-Term Care Setting. Canadian Geriatrics Society Annual Scientific Meeting, Vancouver, BC. (April 20-22, 2006) The Canadian Journal of Geriatrics 2006;9 (2): 84

Assaraf MI, Liberman A, Bennett D, Miller WH, <u>Schipper HM</u>. Up-regulation of erythropoietin receptor expression in AD and MCI astroglia. 9th International Conference on Alzheimer's Disease and Related Disorders, Philadelphia, July 17-22, 2004, Neurobiol Aging 25: S546; 27th International Symposium on Neuron-Glia Interactions, Montreal, June 20-22, 2005

McCusker J, Cole M, Latimer E, <u>Windholz S</u>, Ciampi A, Belzile E. History of depression modifies the effect of risk factors for 16-month survival in older medical patients, Oct. 2005, Canadian Association on Gerontology (CAG) 34th Annual Scientific and Educational meeting, Halifax, p 140 #197

McCusker J, Cole M, Latimer E, <u>Windholz S</u>, Ciampi A, Belzile E. One Year Trajectories of Depressive Symptoms In Older Medical Inpatients, Orlando, Florida, May 11-15, 2005, American Geriatric Society Annual Scientific Meeting, # C-38

RESEARCH

2005-2006 Organisation des soins communautaires pour les personnes âgées souffrant de démence, <u>Béland F.</u> (co-chercheur), IRSC, 70 251\$

- 2005-2008 Développement d'un système informatisé de gestion de la pratique et de la dotation en soins infirmiers et en milieux d'hébergement, <u>Béland F</u>. (co-chercheur), CIHR (projet de recherche), 33 600\$ The Canadian longitudinal study of aging: Developmental Activities - Phase 1, Béland F, 2004-2008 (chercheur principal), IRSC (projet de recherche), 436 000\$ 2004-2006 Banque de données Solidage-Prisma, Béland F, (chercheur principal), RORV-FRSO, 25 000\$ 2004-2006 Pérennité Solidage-Prisma, <u>Béland F</u>, (chercheur principal), RQRV-FRSQ (projet de recherche), 35 000\$ 2004-2006 FRÈLE: Fragilité: Une étude longitudinale de ses expressions, <u>Béland F</u>, (chercheur principal), RQRV-FRSQ (projet de recherche), 35,000\$ 2005-2006 Understanding frailty and frail older persons' needs to design innovative models of care. Béland F & Bergman H (PI). CIHR Institute of Aging: \$10,000 2004-2007 Rôle des organismes communautaires en santé et dynamique partenariale, Béland F, (cochercheur), CRSH (projet de recherche), 42 000\$ 2002-2006 Partenariat Solidage-Initiative canadienne sur la fragilité, Béland F, (co-chercheur), **RQRV-FRSQ**, 58 207\$ 2002-2008 Programme de formation en analyse et evaluation des interventions en santé pour la prise de decision et les politiques, <u>Béland F</u>, (co-chercheur), IRSC, 979 370\$ 2001-2006 The challenge of meeting and understanding the needs of frail older persons in the Canadian health care system. Béland F, Bergman H (PI); co-investigators: Wolfson C, Monette J, Lebel P, et al. Canadian Institutes of Health Research/Interdisciplinary Health Research Team (CIHR/IHRT) \$3,443,812. An 80-week, randomized, multi-center, parallel-group, double-blind study of the efficacy 2003-2006 and safety of atorvastatin 80 mg plus an acetylcholinesterase inhibitor versus an acetylcholinesterase inhibitor alone in the treatment of mild to moderate Alzheimer's disease. PI: Howard Bergman, M.D. Co-investigators: Howard Chertkow, MD, Sylvia Windholz, M.D., Susan Vaitekunas, M.D., Susan Gold, M.D., Yves Bacher, MD Gary Inglis, MD and Hyman Schipper, MD. Pfizer/aricept & Lipitor. 2003-2006 A Phase II Multicenter, Randomized, Double-Blind, Placebo-Controlled Study of the Effect of Daily Treatment with MPC-7869 on Measures of Cognitive and Global Function in Subjects with Mild to Moderate Dementia of the Alzheimer's Type. (PROTOCOL:
- 2002-2006 Canadian Alzheimer's Disease Quality of Life Study. Naglie G (PI); co-investigators: Beattie B, <u>Bergman H</u>, Black S, Borrie M, Freedman M, Hogan D et al. Canadian

M.D., Gary Inglis, MD and Hyman Schipper, MD. Myriad/Fluribuprofen

MPC-7869-03-003). PI: Yves Bacher, M.D. Co-investigators: <u>Howard Bergman</u>, MD, <u>Howard Chertkow</u>, MD, <u>Sylvia Windholz</u>, M.D., <u>Susan Vaitekunas</u>, M.D., <u>Susan Gold</u>,

- Institutes of Health Research (CIHR). \$565,419; Alzheimer Society of Canada (2004-2006) \$113,752
- 2003-2008 Quebec Network for Research on Aging. <u>Bergman H</u> (Director). FRSQ. (2003-2004) \$570,000; (2004-2005) \$760,000; (2005-2006) \$760,000; (2006-2007) \$760,000; (2007-2008) \$760,000
- 2003-2006 The Canadian Initiative on Frailty and Aging. <u>Bergman H</u> (PI), <u>Wolfson C</u> (Co-PI), Hogan D (Co-PI), <u>Béland F</u> (Co-PI); co-investigators: Macknight C, Patterson C, Hébert R, Feightner J, Fernie G, Paccaud F, Michel J-P. The Max Bell Foundation. \$400,000; FRSQ Quebec Research Network in Aging: (2002-2003) \$43,207 (2005-2006) 15,000; (2003-2004) CIHR Institute of Aging: \$20,000
- 2003-2006 La transformation du Réseau de soutien d'aidants de personnes âgées atteintes de démence de type Alzheimer. Carpentier N (PI), Ducharme F, Kergoat MJ, <u>Bergman H.</u> Canadian Institutes of Health Research. \$100,525
- 2005-2006 Longitudinal Canadian Alzheimer's Disease Quality of Life Study. Naglie G (PI); co-investigators: Beattie B, <u>Bergman H</u>, Black S, Borrie M, Freedman M, Hogan D et al. Canadian Institutes of Health Research. \$50,000
- Frailty Data (FrData): Examining candidate domains of frailty in the elderly. Bergman H & Wolfson C (PI); co-investigator: Béland F. Dr. Joseph Kaufmann Chair in Geriatric Medicine; Canadian Initiative on Frailty and Aging; Solidage research Group: \$50,000
- 2001-2006 Multi-level evaluation in the early diagnosis of Alzheimer's disease. <u>Chertkow H</u> (PI); co-investigators: <u>Bergman H</u>, Kabani NJ, <u>Wolfson C</u>. Canadian Institutes of Health Research (CIHR). \$113,166 per year.
- Neurochem/Alzhemed A Phase III Study of the Efficacy and Safety of Alzhemed TM in Patients with Mild to Moderate Alzheimer's Disease. (Study#: CL-758007) P.I.: Howard Chertkow, MD Co-Investigators: Howard Bergman, MD, Yves Bacher MD, Gary Inglis MD, Susan Vaitekunas, MD Sylvia Windholz, MD, Gary Inglis, MD, Yves Bacher, MD, Gabe Leger, MD and Susan Gold, MD.
- 2003-2008 Diagnosis, localization, and treatment of semantic memory impairment in Alzheimer's Disease. <u>Chertkow, H.</u> (P.I.), Arnold,D, CIHR (Canadian Institutes of Health Research), operating grant of \$113,350/year:
- 2004-2005 Enteral feeding in end-stage dementia: a comparison of religious and cultural differences.

 <u>A. Mark Clarfield, MD, FRCPC</u> (IP), <u>Johanne Monette, MD, MSc</u>, H Bergman, MD.

 The Israel National Institute for Health Policy and Health Services Research, Tel Aviv, Israel. 16 000\$
- Axe Nutrition. PI: <u>Duque G.</u> Réseau Québécois de Recherche sur le vieillissement (FRSQ) \$10 000/year x 1 year.
- Operating grant. PI: <u>Duque G</u>. Canadian Institutes for Health Research. \$100,000/year x 3 years.

- 2004 Procter and Gamble, Unrestricted educational. PI: Duque G. \$27,000. 2004-2005 Merck USA - Medical School grant. PI: <u>Duque G</u> \$16,000/year. 2001-2005 Role of caspases in human neuronal cell death and in Alzheimer's disease, Principal investigator: Andréa LeBlanc, CIHR, operating grant. \$109,525 per year. 2001-2005 Role of prion protein against Bax mediated apoptosis, Principal investigator: Andréa LeBlanc, CIHR, operating grant, October 1 2001- September 30, 2005, \$69, 254 per year. Equipment \$9,000. Role of prion protein in neuronal survival. Principal investigator: Andréa LeBlanc, NIH, 2002-2007 Operating grant, 2002-2007. \$200,000 US per year (plus 8% overhead to McGill). Isolation and identification of 17-β-estradiol induced Caspase Inhibitory factor (CIF). 2002-2006 Principal Investigator: Andrea LeBlanc, NIH, Operating grant, 2002-2006., \$118,950 US per year (plus 8% overhead to McGill). 2002-2007 Multi-User Equipment and Maintenance Grant for the Electron Microscopy Center. Coapplicant: Andrea LeBlanc, Principle Investigator: John Bergeron, Dept. Anatomy and Cell Biology, CIHR, \$134,206.00/year. Programme d'interventions visant l'optimisation de la prescription des neuroleptiques en 2003-2005 milieu d'hébergement. Johanne Monette M.D., M.Sc. (PI), Nathalie Champoux M.D., M.Sc. (PI). Funded by the Comité Aviseur pour la Recherche Clinique (CAREC), Institut Universitaire de Gériatrie de Montréal: 34,992\$. 2004-06 Delirium on long term care settings: occurrence, modifiable risk factors and outcomes. Jane McCusker, PhD (PI), Martin Cole, MD, Philippe Voyer, PhD, Nathalie Champoux, MD, MSc, Johanne Monette, MD, MSc, K. Berg, pt, PhD, A. Ciampi. Institute of Aging Priority: 325 812\$. Optimization of the quality of antibiotics prescribing in long-term care facilities J. 2004-2005 Monette, MD, MSc (PI), Mark A. Miller, MD, MSc, Jean-François Boivin, MD, PhD, C. Laurier, Pharm B, PhD, Canadian Institutes of Health Research (CIHR). 107,943\$ 2004-2005 Programme éducatif interdisciplinaire visaint l'optimisation de l'aproche thérapeutique des symptômes psychologiques et comportementaux de la démence. Johanne Monette M.D., M.Sc. (PI), Groupe Solidage, 10 000\$. Delirium in nursing home patients with severe cognitive impairment Jane McCusker, PhD 2006-2008 PI, Philippe Voyer RN co-investigator, Martin Cole MD, Nathalie Champoux MD, MSc, Johanne Monette MD MSc, Antonio Scampi PhD Canada Alzhemer's society. 114 041 \$.
- 2006-2007 Optimisation de la gestion des symptômes psychologiques et comportementaux de la démence (SPCD) en centre d'hébergement et de soins de longue durée (CHSLD). <u>Johanne Monette</u>, MD, MSc (PI), Maryse Savoie, Inf. MSc, Nathalie Champoux MD, MSc,

- <u>Christina Wolfson</u>, PhD, Johanne Lafleur, inf MSc. Canadian Patient Safety Institute. 162,303\$
- 2003-2005 Discovery of biomarkers of Alzheimer's disease. Phase I PI: <u>Hyman Schipper</u> Caprion Pharmaceuticals Inc. \$10,500
- 2004-2005 Study of T cell proliferation in patients with Alzheimer disease. Phase I PI: Tamas Fulop Co-investigators: <u>Hyman Schipper</u>, Graham Pawelec (Tubingen), Denis Taub (NIA/NIH), Jacek Witkowski (Gdansk) Canadian Institutes of Health Research (CIHR) \$25,000
- 2004-2005 Heme oxygenase-1/tau interactions in the pathogenesis of Alzheimer disease, Consortium Cognition et Vieillissement: Traitement des Troubles Cognitifs dans les Maladies Neurodegénératif (VRQ No. 2200-099), PI : <u>H. Schipper Co-investigator</u>: Hemant Paude, Valorisation-Recherche Québec (VRQ), \$38,000
- 2004-2005 Cyclin-dependant kinase 5 and neurofibrillary pathology of AD, Consortium Cognition et Vieillissement: Traitement des Troubles Cognitifs dans les Maladies Neurodegénératif (VRQ No. 2200-099), PI: Hemant Paudel Co-investigator: <u>H. M. Schipper</u> Valorisation-Recherche Québec (VRQ), \$38,000
- 2004-2005 Role of polymorphic variants of manganese superoxide dismutase (MnSOD) and methylenetetrahydrofolate reductase (MTHFR) in sporadic AD and MCI, Consortium Cognition et Vieillissement: Traitement des Troubles Cognitifs dans les Maladies Neurodegénératif (VRQ No. 2200-099), PI: George Chong Co-investigators : <u>H. M. Schipper, H. Cherkow, H. Bergman</u> Valorisation-Recherche Québec (VRQ), \$14,000
- A pilot, multi-centre, open label, one-group study to explore the efficacy tolerability and safety of the combination of glatiramer acetate and N-acetylcysteine in subjects with relapsing-remitting multiple sclerosis, I PI: <u>H.M. Schipper</u> Co-investigators: C. Melmed (JGH), F. Moore (JGH), D. Arnold (MNI), F. Grand'Maison (Charles Le-Moyne Hospital, Montreal), TEVA Neurosciences, \$427,560
- 2004-2006 Laboratory Arm of the Phase II Clinical Trial assessing the efficacy, tolerability and safety of the combination of glatiramer acetate (GA) and N-Acetylcysteine (NAC) in subjects with Relapsing Remitting Multiple Sclerosis: Redox assays for measuring the systemic antioxidant effects of GA plus NAC vs. GA alone in relapsing-remitting MS, PI: H.M. Schipper, TEVA Neurosciences II, \$42,332
- 2004-2007 Role of heme oxygenase-1 in aging and parkinsonian neural tissues, PI: <u>Hyman Schipper</u>, Canadian Institutes of Health Research (CIHR), \$324,933
- 2004-2006 Reverse-phase protein microarrays for the validation of novel tumor markers and post-translational modified proteins in serum and other biological fluids from cancer patients, Genome Quebec (\$523,000), PI: Mark Basik Co-investigators: <u>Hyman Schipper</u>, et al. (6 co-investigators), HMS share: \$40,800
- 2004-2005 Brain erythropoietin expression in Alzheimer disease-II,Co-PIs: <u>Hyman Schipper</u>, Wilson Miller Ortho Biotech, \$10,700

- 2005-2006 Spectroscopic analysis for the diagnosis and management of Alzheimer's disease, Co-PIs: David Burns, <u>Hyman Schipper</u>, Canadian Institutes of Health Research (CIHR), \$150,000
- 2005-2009 Development of heme oxygenase-1 suppressor (HOS) technology for the diagnosis, prognosis and therapy of neurodegenrative diseases, PI: <u>Hyman Schipper</u>, Osta Biotechnologies, Inc., \$TBA
- 2005 Discovery of biomarkers of Alzheimer's disease. Phase II, PI: <u>Hyman Schipper</u>, Caprion Pharmaceuticals Inc., \$13,000
- 2006 Discovery of biomarkers of Alzheimer's disease. Phase II-Extension, PI: <u>Hyman Schipper</u>, Caprion Pharmaceuticals Inc., \$4,000
- 2006-2007 Development of novel HO-1 inhibitors for treatment of neurodegenerative diseases and cancers, PI: <u>Hyman Schipper</u>, Osta Biotechnologies Inc., \$31,000
- A Randomised, Double-Blind, Parallel Group Study Examining the Efficacy and Safety of Memantine on Behavioural Symptoms in Patients with Moderate to Severe Dementia of the Alzheimer's Type. P.I.: Susan Vaitekunas, M.D. Co-investigators: Howard Bergman, MD, Howard Chertkow, MD. Sylvia Windholz, M.D Susan Gold, M.D., Gary Inglis MD, Yves Bacher MD, and Hyman Schipper MD. Lundbeck/Memantine
- Sanofi-Synthelabo/Xaliproden A randomized, multi-center, double-blind, placebo-controlled, 18-month study of the efficacy of Xaliproden in patients with mild-to-moderate dementia of the Alzheimer's type. (Study # EFC2946). P.I.: Sylvia Windholz, M.D. Co-investigators: Howard Bergman, MD, Howard Chertkow, MD. Susan Vaitekunas, M.D Susan Gold, M.D., Gary Inglis MD, Yves Bacher MD, and Hyman Schipper MD.
- 2000 The Living Will Evaluation Research Project: Dworkind M, Windholz S, Erban J.
- 2004-2006 Canadian Longitudinal Study on Aging: Developmental Activities Phase I. Co-Principal Investigators: <u>C. Wolfson</u>, S. Kirkland, P. Raina.140 Co-Investigators. Canadian Institutes of Health Research. \$1,744,000.
- 2004-2006 Economically and statistically efficient design of prevalence and incidence studies using capture-recapture methods, with an application to multiple sclerosis prevalence estimation in Québec. Co-Principal Investigators: A. Vandal, <u>C. Wolfson</u>.Co-Investigators: P. Duquette, Y. Lapierre, F. Moore. Canadian Institutes of Health Research. \$182,885.
- 2001-2006 Subproject Longitudinal study of the frailty process and of unmet needs in the community dwelling elderly. Principal Investigator: <u>C. Wolfson</u>.Co-Investigators: L. Levesque, <u>H. Bergman</u>, <u>F. Béland</u>, L. Trahan, J. Podoba. Canadian Institutes of Health Research. Interdisciplinary Health Research Team. \$515,782.
- Evaluation multicentrique de la sensibilité au changement d'une batterie d'instruments de mesure du statut des aînés suivis en réadaptation. . L. Demers (PI). Co-Investigators: G. Bravo, J. Desrosiers, LA Robichaud, B. Ska, <u>C. Wolfson</u>. Canadian Institutes of Health Research. \$213,487.

2003-2009 Integrated Training Program in Basic and Clinical Aspects of Neuroinflammation. . J. Antel (PI). Co-Investigators: T. Owens, A. Bar-Or, J. Nalbantoglu, P. Duquette, P. Talbot, <u>C. Wolfson</u>, S. David, D.L. Arnold, G.N. Luheshi. Canadian Institutes of Health Research. \$ 1,320,000.

INVITED LECTURES

BÉLAND François

Garantir l'accès: le diable est dans les détails! Implementing Chaoulli v. Québec: Opening the door to private health care? McGill Health Law Publication, Faculty of Law, Université McGill, 2006.

Progama de Serveis Integrats per a la gent gran, 1ier Fòrum d'actualizacio i valoracio dels projectes demostratius del Programa ProdeP, Université de Vic, Vic, 2006.

Galloping away with the Court appeal, Delivering Private Healthcare, The Canadian Institute, Toronto, 2006.

Factors Associated to Inappropriate Hospitalizations for Medical Elderly People, Including Acute Geriatric Units (AGUs), Using the Appropriateness Evaluation Protocol (AEP). in La 6e Conférence internationale sur les fondements scientifiques des services de santé. 2005. Montréal.

Validity of the "Appropriateness Evaluation Protocol" for Patients Admitted in Acute Geriatric Units. in La 6e Conférence internationale sur les fondements scientifiques des services de santé. 2005. Montréal.

Frailty: can it provide rich hypothesis for the study of the ageing process? Invited Symposium, The 18th Congress of the International Association of Gerontology, Rio de janerio, Brésil, 2005.

Frailty: A little help from a fuzzy idea, The 18th Congress of the International Association of Gerontology, Rio de janerio, Brésil, 2005.

Dynamique des incapacités chez les personnes âgées françaises vivant à domicile : analyse de l'enquëte handicap-incapacité-dépendance (HID), 4ième Journée du Réseau québécois de recherche sur le vieillissement, Montréal, 2005

Mobility profile as a predictor of adverse events in community frail elderly, 4ième Journée du Réseau québécois de recherche sur le vieillissement, Montréal, 2005

Étude de l'utilisation des centres de jour par les personnes agées 4ième Journée du Réseau québécois de recherche sur le vieillissement, Montréal, 2005

Typologie des réseaux d'aide et personnes âgées, 4ième Journée du Réseau québécois de recherche sur le vieillissement, Montréal, 2005

Le rapport entre la cognition et la deterioration du statut fonctionnel: résultats dérivés de l'étude SIPA, 4ième Journée du Réseau québécois de recherche sur le vieillissement, Montréal, 2005

Clustering and association of ADLs limitations: The effect of age and level of difficulty, 4ième Journée du Réseau québécois de recherche sur le vieillissement, Montréal, 2005

Roundtable: Developping & managing integrated care projects, The Sixth International Conference on Integrated Care, Dublin, 2005.

BERGMAN Howard

International

Workshop: Elderly Health in Cuba: Impact in the Life Expectancy. Ministry of Public Health of Cuba and the PAHO/WHO. Havana, Cuba, January 7-10, 2006

The Agony and the Ecstasy of Integrated Care for Older Persons: Results of a 22-month RCT. Visiting Scholar. University of Maryland, Baltimore, March 2, 2006

Frailty, Co-Morbidity and Disability: Optimizing Health and Function in Older Persons. Nineteenth Annual Continuing Education Program on Issues in Aging. Institute of Gerontology, Wayne State University, May 15-16, 2006

How Age is Important in Therapeutics. Medicine for an Ageing Population. Joint meeting of the Royal College of Physicians and British Geriatrics Society. London, England, June 8, 2006

Frailty in the Elderly. UCLA Multicampus Program in Geriatric Medicine and Gerontology Seminar Series. Los Angeles, California, 2005

Soins intégrés pour les personnes âgées fragiles. Un défi pour les soins médicaux de première ligne. Colloque Médecine Générale & Gérontologie. Lyons, France, 2005

Mild Cognitive Impairment (MCI) – du Concept à la réalité. Centre Mémoire de Ressources et Recherches Grenoble Arc Alpin. Grenoble, France, 2005

The Agony and the Ecstasy of Care for Older Persons. Quo Vadi, Geriatrics-An Open Discussion. Maccabi Healthcare Services. Israel. June 5, 2005

Complexity of Care for Older Persons. The 5th Bessie and Louis Stein Geriatrics Lecture. Israel Geriatrics Society. Israel, 2005

La vieillesse, c'est le decline, on n'y peut rien. Forum franco-québécois : vieillissement et santé. Québec, Québec. Round table discussions, September 26-27, 2005

A System of Integrated Care for Older Persons with Disabilities in Canada: Results from a Randomized Controlled Trial. Integrated Care Symposium. The 18th Congress of the International Association of Gerontology. Rio, Brazil, June 26-30, 2005

Chronic Disease Care in Canada. Principles of Chronic Disease Symposium. The 18th Congress of the International Association of Gerontology. Rio, Brazil, June 26-30, 2005

National

Frailty and Long Term Care. University of Calgary Annual LTC meeting. Calgary, Alberta, February 3, 2006

The Complexity of Care for Older Persons: Challenges facing Healthcare Systems in Japan and Quebec. Sharing experiences on aging societies: A Japan-Quebec Dialogue. McGill University Faculty Club, May 31, 2006

Integrated Service Delivery and the Elder Care Gap. The Elder Care Imperative: Challenges and Successes. Ontario Hospital Association. Toronto, Ontario, April 6, 2005

Primary Care Reform for Older Patients: Chronic Disease Management & Prevention. Primary Health Care in Canada Seminar: Reinventing Primary Health Care. Toronto, Ontario, December 8-9, 2005

CHERTKOW Howard

Symposium: The Neural Bases of Language: From Evolution to Treatment. Centre for Research on Language, Mind & Brain. Montreal: June 3, 2005.

Update in Dementia Treatment. Geriatric Medicine for Practitioners. Montreal: March 17, 2006.

Can we predict the prognosis of MCI patients? 40th Meeting of the Canadian Congress of Neurological Sciences. Ottawa: June 16, 2005.

Early Diagnosis and Treatment of Dementia Specialist Consultancy Meeting: Early Diagnosis. Toronto: September 15, 2005.

Guest speaker. Alzheimer's disease. St. Leonard's Anglican Church. Barbados Alzheimer's Association Inc. Bridgetown, Barbados: September 18, 2005.

Guest speaker. Alzheimer's disease. Barbados Alzheimer's Association Inc. Bridgetown, Barbados: September 24, 2005.

New developments in early diagnosis of Dementia and Mild Cognitive Impairment Alzheimer Society 6th Annual Commitment to Care. London, Ontario: October 14, 2005.

Should Cholinesterase Inhibitors be used to treat patients with MCI? Debate with Dr. Ron Peterson. 3rd Canadian Colloquium on Dementia. Ottawa: Oct. 29, 2005.

Off label use of psychoactive medications for the elderly. Interactive Panel Debate with Dr. Nathan Herrmann. Canadian Academy of Geriatric Psychiatry, 2005 Annual Scientific Meeting, Vancouver: November 3, 2005.

Mild memory loss in the elderly. Canadian Academy of Geriatric Psychiatry, 2005 Annual Scientific Meeting, Vancouver: November 3, 2005.

Semantic Memory Loss in Alzheimer Disease. Grand Rounds, Dept. of Neurology, University of Pennsylvania. Philadelphia: February 1, 2006.

Semantic Memory loss in Alzheimer Disease: Where it comes from, where it goes, and what to do about it. Department of Geriatric Academic Rounds, Dalhousie University. Halifax: February 8, 2006.

Semantic Memory loss in Alzheimer Disease: Where it comes from, where it goes, and what to do about it. Department of Neurology Rounds, University of Michigan Health System. Ann Arbor: Feb.15, 2006.

Assessing and treating dementia: Results of the 3rd Canadian Consensus Conference. McGill Neurology Conference. Jewish General Hospital. Montreal: March 24, 2006.

DUQUE Gustavo

Osteoporosis in the Elderly. European Society of Clinical Pharmacy. Vilnius, Lithuania, 2006

Vitamin D beyond bone: A hormone in disguise. American Geriatrics Society meeting. Chicago, Illinois, 2006

New potential model for the prevention of falls and fractures in long term care institutions. American Medical Directors Association Annual Symposium. Dallas, Texas, 2006

As a matter of fat: New insights in the pathophysiology and treatment of senile osteoporosis. Hebrew Rehabilitation Hospital, Harvard Medical School. Boston, Massachusetts, 2006

Senile osteoporosis, Does it really exist? Meeting of the Gerontological Society of America. Orlando, Florida, 2005

Aging and senile osteoporosis: Mechanisms and new treatments. Meeting of the Gerontological Society of America, Orlando, Florida, 2005

An innovative approach for Falls and Fractures in Geriatrics. World Congress of Gerontology, Rio de Janeiro, Brazil, 2005

Teaching Geriatrics in Second Year Medical School. World Congress of Gerontology, Rio de Janeiro, Brazil, 2005

An integral approach for falls prevention. World Congress of Gerontology, Rio de Janeiro, Brazil, 2005

Osteoporosis in the Elderly, a Geriatric Syndrome. Meeting of the Societe Quebecoise de Geriatrie, May 2005

Osteoporosis in the Elderly, a Geriatric Syndrome. Division d'Endrocinologie, Centre Hospitalière de l'université de Montréal, March 2005

FISHER Gillian

End of Life Decisions, Ethics Rounds, Jewish General Hospital, 15 December 2005

FUNG Shek

Geriatric Home Assessment – Home Edition, Geriatric Medicine for Practitioners, March 17, 2006

LEBLANC Andrea

Caspase-6 activation and function in neurodegeneration and neuronal cell death. University of North Texas Health Science Center at Forth Worth, Dept Pharmacology and Neuroscience, April 12, 2005.

Implications de l'activation de la caspase-6 dans la maladie d'Alzheimer. Reseau en sante mentale et en neuroscience du Quebec. FRSQ. Reunion annuelle. Maladies Neurodegeneratives. Le 6 mai, 2005.

Prion protein protects cells against pro-apototic Bax protein. Joint Cold Spring Harbor Laboratory/Wellcome Trust Conference Prion biology, Wellcome Trust Genome Campus, Hinxton, UK September 7-11, 2005

The anti-death function of prion protein. Dept. Physiology, McGill U. October 28, 2005.

MONETTE Johanne

Optimisation of antibiotics prescribing in long term care facilities. Center of Epidemiology and Community Studies, Jewish General Hospital, January 19, 2005

Interventions non pharmacologiques pour gérer les comportements agressifs en centre d'hébergement. Bédard A, Landreville P, Verrault R, Desrosiers J, Champoux, <u>Monette J</u>, Voyer P, McGill Division of geriatric Medicine, 2005 Research Day Conference. (Poster) April 29, 2005

Optimization of antibiotics prescribing in long term care facilities. Centre of Epidemiology and Community Studies, Jewish General Hospital. January 19, 2005

SCHIPPER Hyman

McGill

Disorders of brain iron metabolism. McGill Neurology Rounds, Jewish General Hospital, May 13, 2005

Of gut and gait and wasting quokkas: vitamin E deficiency and the nervous system. McGill Neurology Rounds, Jewish General Hospital, Feb. 10, 2006

Provincial/National/International

Heme oxygenase-1 (HO-1) expression in glaucomatous human eyes (M. Mydlarski, L. J. Katz, H. M. Schipper). Wills Eye 57th Annual Alumni Conference. Wills Eye Hospital, Philadelphia, March 11-12, 2005

Alzheimer disease and oxidative stress. International meeting on "Immune Response, Oxidative Stress, Cholesterol and Alzheimer disease". JGH, Montreal, March 17-18, 2005

Does heme oxygenase-1 promote mitochondrial iron sequestration in human CNS disorders? First Congress of the International BioIron Society, Prague, Czech Republic, May 26, 2005

Heme oxygenase-1 suppressor factor: A novel biomarker of sporadic AD. Ortho-Diagnostics, Raritan , NJ, June 23, 2005.

Heme oxygenase-1 in brain aging and neurodegeneration. Center for Neurodegenerative Disease Research, University of Pennsylvania School of Medicine, Philadelphia, July 27, 2005.

Stroke management and the case of Ariel Sharon. Beth Israel Beth Aaron Congregation, Montreal, January 7, 2006

The role of biomarkers in the management of sporadic Alzheimer disease. Wyeth Pharmaceuticals, Collegeville, PA, Feb. 7, 2006

VAITEKUNAS Susan

La Démence Sévère: les dilemmes et les problèmes difficiles. Alzheimer Society of Laval. Sept. 21, 2005

Update on Dementia Pharmacy Dept. Lakeshore General Hospital. Jan. 25, 2006

What's New in Dementia. Greek Medical Association. Feb. 17, 2006

WINDHOLZ Sylvia

Living Wills / End-of-Life issues. Workshop. 56th Annual Refresher Course for Family Physicians Nov 28-30, 2005

Community lecture to Spanish-speaking members and staff, Alzheimer's Society Montreal. Pérdida de Memoria y el Mal de Alzheimer, March 26, 2006.

WOLFSON Christina

2nd International Working Meeting on Frailty and Aging-Longitudinal Studies on Frailty and Aging (with Dr. L. Ferruci). Challenges of Studying Frailty: Using secondary data (the FrDATA Study); Primary data collection. Organizer. Montreal, March 18, 2006.

Centre de Santé et Services Sociaux Cavendish (with Dr. MJ Yaffe and M Lithwick). New Insights: Findings from Using a Comprehensive Social Work Evaluation to Validate a Short Elder Abuse Suspicion Index for Family Physicians. Montreal, November 15, 2005.

Canadian Association of Gerontology Annual Meeting. Frailty: Evidence of an emerging clinical and research paradigm? Symposium chair and speaker. Halifax, October 2005.

Canadian Association of Gerontology Annual Meeting. Understanding healthy and successful aging: Concept, design and content for the Canadian Longitudinal Study on Aging. Workshop co-organizer and speaker. Halifax, October 2005.

The Canadian Society for Biostatistics and Epidemiology and the Society for Epidemiology Research 2005 Joint Meeting. Chair (Contributed session) Epidemiologic Research into Neurological Disorders. Toronto, June 29, 2005.

The Canadian Society for Biostatistics and Epidemiology and the Society for Epidemiology Research 2005 Joint Meeting. Chair, Symposium Epidemiology of Neurodegenerative Diseases. Toronto, June 28, 2005.

Public Population Project in Genomics (P3G), Harmonization of tools used in biobanking in Canada for Longitudinal studies. Clinical phenotypes and biomedical measures. Montreal, May 18, 2005.

Department of Clinical Epidemiology and Community Studies Seminars, St. Mary's Hospital (with Dr. MJ Yaffe and M Lithwick). What is an acceptable level for a "suspicion index" for elder abuse? Montreal, April 17, 2005.

McMaster University Population Health Research Institute Retreat. The Canadian Longitudinal Study on Aging. A work in progress. Ancaster, Ontario, April 1, 2005.

Other Presentations

CIHR International Advisory Board on Cohort Studies. The Canadian Longitudinal Study on Aging (CLSA). Toronto, Canada, December 8, 2005.

Regional Seniors' Workshop on Aging for Ontario. The Canadian Longitudinal Study on Aging (CLSA): Understanding the complexity of aging and health through interdisciplinary research. Toronto, Canada, November 5, 2005.

Canadian Association of Gerontology Annual Meeting. Exploring the Acceptability and Feasibility of Conducting a Large, Longitudinal Population-Based Study on Aging in Canada. Strople G, Kits O, Dukeshire S, Kirkland S, Wolfson C, Raina P. Halifax, Nova Scotia, October 21, 2005.

Canadian Association of Gerontology Annual Meeting. Understanding Healthy and Successful Aging: Concept, Design, and Content for the Canadian Longitudinal Study on Aging. Halifax, Nova Scotia, October 22, 2005.

Health Across the Life Course Workshop (CIHR Institute of Aging and the Canadian Population Health Initiative). The Canadian Longitudinal Study on Aging (CLSA): Using Life Course Framework to Understand the Complexity of Aging and Adult Development. Ottawa, Ontario, September 19-21, 2005.

Joint CSEB/SER Meeting. Healthy aging as more than the absence of disease: Embracing complexity in the study of aging. Toronto, Ontario, June 29, 2005.

World Congress on Gerontology. Canadian Longitudinal Study on Aging. Rio, Brazil, June 2005.

Joint CSEB/SER Meeting. Symposium: What's new with the old: Aging as the future of population epidemiology. Canadian Longitudinal Study on Aging. Toronto, Ontario June 29, 2005.

SEDAP II workshop, McMaster University. Canadian Longitudinal Study on Aging. Hamilton, Ontario, May 2-3, 2005.

Department of Community Health and Epidemiology, University of Saskatchewan, Research Day. Canadian Longitudinal Study on Aging. April 7, 2005.

AWARDS & NOMINATIONS

BERGMAN Howard

Nominated Chair, Board of Directors of the National Initiative for the Care of the Elderly (NICE) funded as a new Initiative by the Networks of Centres of Excellence (NCE)

DUQUE Gustavo

Nathan Shock New Investigator Award. Gerontological Society of America (2005) Best poster presentation. Canadian Association of Faculties of Medicine/Canadian Medical Association annual meeting, Saskatoon (2005)

FISHER Gillian

Medical Director, Residences Mance-Décary

LEBLANC Andrea

William Dawson Scholar, McGill University 2003-2008. Chercheur National, Fonds de Recherche en Santé du Québec (FRSQ) 2004-2009

WOLFSON Christina

Student Teaching Award of Excellence, Department of Epidemiology and Biostatistics and Occupational Health (for the course EPIB-607). 2004-2005

COMMITTEE WORK

BERGMAN Howard

Journals

Editorial Board

Geriatrics & Gerontology (International Editorial Board)

2005

Grant Reviews

Committees Canadian Institutes for Health Research (CIHR)	2004-present
McGill University Department of Medicine	
Executive Committee, Division of Geriatric Medicine Committee, Division of Geriatric Medicine	1991- Education 1994-
Sir Mortimer B. Davis Jewish General Hospital Department of Medicine	
Policy Committee	1990-
Hospital Committees	
Medical Advisory Committee	1987-
Professional and Learned Societies Officer	
Chair, Advisory Board of the Institute of Ageing, CIHR.	2005
Advisor, International Federation on Ageing.	2005
President, Canadian Geriatrics Society.	2005
Chair, Board of Directors of the National Initiative for the Care of the Elderly (NICE)funded as a new Initiative by the Networks of Centres of Excellence (NCE)	2006
Meeting Organizer Co-Chair, Scientific Committee, Congrès international francophone de gérontologie, October 2006	2004-
Foundations and Industry	
Board of Directors, Gustav Levinschi Foundation	2004-
Advisory Council, encircle Program, Bank of Montreal	2004-
Government and Community Committees and Consultations	
Consultation visit and summary workshop: Challenge of Implementing the Specialized Geriatric Program in Edmonton. Glenrose Rehabilitation Hospital – sponsored by Capital Health, Vancouver, BC.	2005
External Review of Baycrest Department of Internal and Geriatric Medicine. Toronto, Ontario, Oct 2005	2005

Consultation visit : Rapport sur le développement de la gériatrie universitaire à Lausanne. Nov 2005	2005
CHERTKOW Howard	
Jewish General Hospital Academic Advisory Committee	2000-present
Medical advisor, Quebec division of the Alzheimer's Society of Canada	1998-present
Member, Executive Committee, Lady Davis Institute, S.M.B.DJewish General Hospital	1999-present
Coordinator, Québec Consortium for Alzheimer's Disease and Related Neurodegenerative Disorders. (Coordinator of CFI application from same)	2001-present
Member, FRSQ (Fonds de la recherche en santé du Québec) Committee for awarding chercheur-boursier clinicien salary grants.	2001-present
President, C5R (Consortium of Canadian Centres for Clinical Cognitive Research)	2001-2005
Editorial Board, Cognitive and Behavioral Neurology	2004-2005
Scientific Officer, CIHR Biological and Clinical Aspects of Aging Committee.	2001-present
Member, NIH Study section – Adult Psychopathology and Disorders of Aging.	2004-present
Chief organizer 3rd Canadian Colloquium on Dementia, Ottawa, October 27-29	2005
Chief organizer 3rd Canadian Consensus Conference on Diagnosis and Treatment of Dementia, Montreal, March 10-11	2006
CLARFIELD Avram Mark	
Research Ethics (Helsinki) Committee, Soroka Hospital, Beer-sheva	2005-
Steering Committee, ICRAM (Int'l Committee to Revitalise Academic Medicine British Medical Journal, London, UK.	2) 2004-2005
DUQUE Gustavo	
Self study committee-Education resources sub-committee, Faculty of Medicine, McGill University.	2006
Abstract review committee American Geriatrics Society meeting	2005
Fonds de la Recherche en Santé du Quebec grant review committee-	2005-2006

Chercheur Boursier pour détenteurs d'un diplôme professionnelle en santé (Vice-president)

Fisher Gillian

Member, Corporation Board of the Catherine Booth Hospital

Fung Shek

HEII PERN Paul	
Website Committee	1999-present
Patient Satisfaction Committee, Jewish General Hospital	2004-present
Continuing Education Committee, Canadian Geriatrics Society	2005-present
Test Committee, Medical Council of Canada	2006-present
Resident Training Committee, Division of Geriatric Medicine, McGill University	2003-present

HEILPERN Paul

Chairman, Jewish General Hospital Department of Medicine Morbidity &	2001-present
Mortality Committee	

LEBLANC Andrea

University

Graduate Student Committee of the Neuroscience Department, McGill	1996-2005
Member of the Promotion and tenure committee, Dept. Neurol. & Neurosurg.	2004-present
Member of McGill review committee of CFI LEF and NEF proposals	2005

GRANT COMMITTEES

Member of FRSQ chercheur boursier senior committee.	2006
National Institutes of Health, Division of Research Grants, Appointed full	
Member of Molecular, Cellular and Developmental Neuroscience	2003-2006 Member
of National Institutes of Health Special Emphasis Panel /ZRG1	2005
MDCN-E	
Member of National institutes of Health Special emphasis Panel/ZRG1	2005
NBDG-A(09) (F)	
Member of National institutes of Health Special emphasis Panel/ZRG1	2005
NBDG-E (08) (M)	

International

Editorial Advisory Board,	2003-present
Current Alzheimer Research, Bentham Science Publishers	
Editorial Board, The American Journal of Pathology	2004-2007

Ad hoc reviews for Journals

Am J. Pathol.

J. Neurochem

J. Neuroscience

FASEB

Current Alzheimer Research

Science

Biochemical Journal

Community Involvement

Interview for L'Actualité Médicale, Alzheimer,: des recherches axées sur la compréhension des mécanismes par Gorges Costan, Chronique du prix Galien, 26(12) 2005, p50

June 21, 2005: Interview with Steve Kohn for Popular Science article on Mad Cow disease.

February 4, 2006. Interview with Christen Brownlee, Biology Writer, Science News, on article on prion protein and stem cell survival.

Advisory Committees

Student	<u>Degree</u>	<u>Department</u>	Supervisor	Year
Tara Moriarty	Ph.D.	Anatomy and Cell Biol.	Chantal Autexier	2000-2005
Catherine Belanger	Ph.D.	GPNS	Ted Fon	2004-
Zhao Yang	Ph.D.	Anatomy and Cell Biology	y Micheal Greenwood	2004-
Nektaria Nicolakakis	Ph.D.	GPNS	Edith Hamel	2004-

Examiner

<u>Student</u>	<u>Degree</u>	<u>University</u>	<u>Supervisor</u>	Year	<u>Committee</u>
Ian McKenzie	Ph.D.	McGill U	F. Miller	2005	Thesis Seminar/GPNS chair
Tara Moriarty	Ph.D.	McGill U.	C. Autexier	2005	Thesis Defense Internal examiner
Jaigi Mathai	Ph.D.	McGill U.	G. Shore	2005	Thesis Defense External examiner
Greg Walsh	Ph.D.	McGill U.	F. Miller	2005	Thesis Defense/GPNS chair
Mandana Modirrousta	Ph.D.	McGill U.	B. Jones	2005	Thesis Seminar/GPNS chair
David Barnes	Ph.D.	U. Ottawa	A. MacKenzie	2005	External Examiner Report
					and Defense
Manuelle Rongy	Ph.D.	McGill U,	J. Desbarrats	2005	External examiner, Preliminary
					Exam
Nektaria Nicolakakis	Ph.D.	GPNS	Edith Hamel	2006	Candidacy Exam

SCHIPPER Hyman

McGill

Appointment, Promotion and Tenure Committee, Dept. of Neurology and Neurosurgery 2001

VAITEKUNAS Susan

JGH Medical Records Committee 1995-present

Consultant work as expert in Long Term Care for College des 1995-present

Medecins Professional Inspection Committee

WINDHOLZ Sylvia

McGill University

Education Committee, McGill University, Division of Geriatric Medicine 1996-present

Sir Mortimer B. Davis - Jewish General Hospital

Clinical Ethics Committee 1991-present

Clinical Ethics Subcommittee: developing the SMBD Jewish General Hospital 1998-present Living

Will Project

Critical Intervention Committee 2001-present

Committee for the Assessment of Medical Acts (CAMA) 1995-present

Network Integration Committee 1999-present

Management Committee, Division of Geriatric Medicine: 1995-present

CQI Pain Management Committee 1995-present

WOLFSON Christina

Committee Chair

Comprehensive Examination Committee, Department of Epidemiology & 2005-Biostatistics, McGill University PhD

Committee Membership

Faculty of Medicine representative on McGill University Senate 2005-2008.

Department of Epidemiology & Biostatistics, McGill University. 2006-present

Academic Appointments Committee

Department of Epidemiology & Biostatistics, McGill University. PhD 2005-present

Program Committee

Department of Epidemiology & Biostatistics, McGill University. 2002-present

Committee of Full Professors

Department of Epidemiology & Biostatistics, McGill University. 2004-2005

PhD Comprehensive Examination Committee

Department of Medicine, McGill University. Executive Committee. 1994-present

Division of Geriatric Medicine

Lady Davis Institute for Medical Research. Academic Advisory Committee. 2000-present.

Lady Davis Institute for Medical Research. Research Management Committee. 2005-present.

Grant Reviews

Committee Chair, Health Research Committee, Multiple Sclerosis Society of 2005-

Canada

Member, Medical Advisory Committee, Multiple Sclerosis Society of Canada 2005-

Panel Member, Health Research Committee, The Multiple Sclerosis Society 1998-2005

of Canada

Canadian Scientific

Member, College of Reviewers: Canada Research Chairs Program 2005-

Chair, Health Research Committee, MS Society of Canada 2005-present.

Member of the Organizing Committee for the 2005 Society for 2004-2005

Epidemiologic Research and Canadian Society for Epidemiology and

Biostatistics joint Meeting Chair, Organizing Committee for Spotlight Sessions.

International Scientific

France. Comité scientifique Constances. Scientific Committee for the Development and Conduct of Cohort Constances, a cohort study of 200,000

in France. PI: Dr. Marcel Goldberg.

USA. Institute of Medicine (National Academy of Sciences): Committee on 2005-present

the Review of the Scientific Literature on Amyotrophic Lateral Sclerosis

in Veterans.

Ad hoc reviews

Fondazione Italiana Sclerosi Multipla. 2006

TEACHING ACTIVITIES

BÉLAND Francois

Exposicio del model SIPA de Canada, X Crus de Geriatria, Gent fran i Dependencia : un debat social i sanitari, Universitat de Vic, 16-17 juin 2005 (1h30).

Models de gestio de casos, X Crus de Geriatria, Gent fran i Dependencia : un debat social i sanitari, Universitat de Vic, 16-17 juin 2005 (1h30).

Nicolas Rousseau. Titre à venir. Ph. D. Santé publique, directeur, depuis 2004.

Louise Lafortune. Titre à venir. Ph.D. Santé publique, co-directeur, depuis 2003.

François Truchon. Titre à venir. Ph.D. Santé publique, directeur, depuis 2002.

Claude Galand. Titre à venir. Ph.D. Santé publique, codirection, depuis 2000.

BERGMAN Howard

McGill Courses

Undergraduate

Small group teaching and bedside teaching ICMB medical students. 1996-present

Postgraduate

Regular small group teaching at the Jewish General Hospital to Family Medicine and Medical residents as well as to Geriatric specialty fellows. 1984-present

Post-Graduate Students

Supervisor

Co-thesis director, Mark Oremus, PhD student, McGill University. "Caregivers and Treatment of Alzheimer's Disease". 2002-

Co-thesis director, Louise Lafortune, PhD student, Université de Montréal. 2003-

Director, Manuel Montero, Clinical Fellow, University of Buenos Aires. "Gait in Older Persons" 2004-

Lectures: McGill Teaching Hospitals

The Fountain of Youth: Promoting Healthy Aging and Preventing Frailty. Mini Med School, Jewish General Hospital. 2005

La fontaine de jouvence: Promouvoir la vieillesse en santé et prévenir la fragilité. Jewish General Hospital. 2005

CHERTKOW Howard

Postdoctoral Fellows

Ahn Duong, Ph.D. Bio-Medical Sciences, Option – Speech Pathology, Univé de Montréal. 2002

Jim Nikelski, PhD. Dept. of Psychology, McGill University. 2006

Dr. Dan Rabinovitch, post-graduate Neurology Fellow. 2005

Graduate students supervised

Geneviève Arsenault, Ph.D. Student, Dept. of Neurosciences, McGill University. 2006

DUQUE Gustavo

Undergraduate

Osler Fellow, Physicianship Program, McGill University, 2005-present

Introduction to Clinical Practice-Communication with geriatric patients, 1st year med students, 2004-present

Introduction to hospital practice-Introduction to the geriatric patient, 2nd year med students, 2004-present

Tutor-ICMA and B, 2nd year medical students, McGill University, 2003-present

Tutor-3rd. year medical students, Division of Geriatric Medicine Clerkship, Jewish General Hospital, 2003-present

Postgraduate

Core Internal Medicine residents, Jewish General Hospital. PTH and osteoporosis, July 2005

CME (speaker)

Osteoporosis workshop – Geriatrics for the Practitioners, Division of Geriatric Medicine, McGill University, 2006

Treatment of osteoporosis in long term care institutions, "Les soins de longue durée, une passion!" Institut Universitaire de Geriatrie, Montreal, 2005

Faculty Development (speaker/facilitator)

Teaching when there is not time to teach, FacDev workshop, Faculty Development Office, McGill University, Oct. 2005. (facilitator) Designing successful workshops, FacDev workshop, Faculty Development Office, McGill University, Dec. 2005 (facilitator) E-case design FacDev workshop, Faculty Development Office & Molson Medical Informatics, Feb. 2006. (organizer & facilitator)

Research Trainees Supervised

Linda Xing, summer student, Faculty of Dentistry, McGill University, June-August 2005.

FISHER Gillian

Medical students and residents in clinic and ER with Division of Geriatrics, Jewish General Hospital

HEILPERN Paul

Supervision and teaching medical students and residents on geriatric rotation, 1993 to present

LEBLANC Andrea

Courses

Fall 2006. 531-602A Current Topics in Neurosciences.

Number of hours: >40 hrs. Coordinated 10 units given by 10 professors and taken by 42 students (Course coordinator: Dr Andrea LeBlanc)

Winter 2006. 531-602A Current Topics in Neurosciences. Molecular Biology of Alzheimer Disease Unit

Number of hours taught:15 Unit coordination: included Drs Hemant Paudel, Edith Hamel and Steffen Albrecht for 36 hrs of teaching. (Course coordinator: Dr. Andrea LeBlanc)

Winter 2006. "Cellular and Molecular Biology of Aging" Department of Anatomy – Course # 504-541B Number of hours taught: 3 (Course coordinator: Dr. Chantal Autexier

Winter 2006: "Viral Pathogenesis and Host Defense" Course #528-466B Number of hours :2 (Course coordinator: Drs Anne Gatignol/Dr Breidis)

Winter 2006: Neurobiology of mental illness PSYT-500B Number of hours: 3 (Course coordinator: Dr Patricia Boska)

MONETTE, JOHANNE

Undergraduate

Supervision of Andrea Palumbom medical student, McGill University, granted with the summer research bursary from McGill University Faculty of Medicine. Project entitled: The Montreal Cognitive Assessment (MoCA): A Sensitive Tool to Detect Changes in Cognitive Functions among Elderly Patients Presenting Initially with Only Mild Cognitive Impairment? 2005

Supervision of Claudia Tellier, medical student, Université Laval, granted with the summer research bursary from McGill University Faculty of Medicine. Project entitled: the relationship between fear of falling and the presence of postural hypotension. 2005

Postgraduate

Supervision of Isabelle Payot-Kammermann, fellow in Geriatric Medicine, Switzerland. Project entitled: Prévalence des hospitalisations reliées à des problèmes médicamentaux. 2003-2005

Supervision of Joyce Lee, Fellow in Family Medicine, McGill University. Project entitled: The use of cholinesterase Inhibitors in the Long-Term Care Setting. 2005-06

Supervision Doreen-Whan-Chow, fellow in Geriatric Medicine, McGill University.Project entitled: A census of cancer physicians in Quebec: clinical experience with elderly patients. 2006

SCHIPPER Hyman

Coordinator of course at McGill University offered through the Dept. of Neurology & Neurosurgery and Dept. of Medicine (Div. Of Experimental Medicine) beginning January 2003. Title: **Free Radical Biomedicine** (**NEUR 550**). An interdisciplinary course on the biochemistry and cellular/molecular biology of free radicals, transition metals, oxidative stress, antioxidants and their roles in health and disease

Introduction. Free Radical Biomedicine (NEUR 550), McGill University, January 9, 2006

Antioxidant enzymes. Free Radical Biomedicine (NEUR 550), McGill University, January 23, 2006

Aging I. Free Radical Biomedicine (NEUR 550), McGill University, February 27, 2006.

Principles of redox neurology. Academic Half Day Course, Dept. of Neurology and Neurosurgery, McGill University, March 22, 2006.

Redox neurology I. Free Radical Biomedicine (NEUR 550), McGill University, March 27, 2006

Redox neurology II. Free Radical Biomedicine (NEUR 550), McGill University, March 27, 2006.

VAITEKUNAS Susan

Family Medicine Core Lecture Assessment, Management and Treatment of Dementia, Dec. 21, 2005

Co-director Geriatric Medicine for Practitioners 2 day CME raw workshops: -dementia management modules 42 presented twice during CME event, March 16-17, 2006

Supervision and teaching medical students and residents on geriatric rotation

Organization of monthly Division of Geriatrics Journal Club

WINDHOLZ Sylvia

Associate Program Director of the Health Care for the Elderly Fellowship Program, 1996-present

Coordinator for the Geriatric Rotation for Family Medicine Residents (Herzl FMU, SMBD Jewish General Hospital and CLSC Côte des Neiges), 2002-present

Teaching to medical students, family medicine residents, internal medicine residents and geriatric fellows, foreign geriatric medicine residents rotating through the Division of Geriatric Medicine, 1996-present

WOLFSON Christina

McGill Graduate Courses

Instructor. Principles of Inferential Statistics in Medicine. 4 credits (52 hours). 2005-2006

Research Trainee Supervision

CURRENT

Clinical Fellow

Dr. Alexandre Poppe. Department of Neurology and Neurosurgery. Neurology resident. Neuroscience rotation. The burden of multiple sclerosis in Canada and the potential impact of the identification of modifiable risk factors. 2005-2006.

Ph.D. Students

Jacqueline Quail. Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Title: Unmet needs and psychological distress in the community dwelling elderly. PhD candidate 2004-Source of funds: CIHR Neuroinflammation Training Grant.

Deborah Weiss. Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Title: Development of a physician-based physical activity intervention for older adults. PhD candidate 2004-Source of funds: SOLIDAGE, Faculty of Medicine Studentship.

Katia Chartland, Department of Epidemiology & Biostatistics. Thesis Co-Supervisor with Russell Steele. Thesis Title: Smoothing Models for Facilitating the Detection of Areas of Elevated or Decreased Disease Risk with an Application to Multiple Sclerosis. PhD candidate 2003- Source of funds: CIHR Neuroinflammation Training Grant, Multiple Sclerosis Society of Canada.

Elizabeth Turner. Department of Mathematics and Statistics. Thesis Co-Supervisor with Alain Vandal. Thesis Title (provisional): Economically and statistically efficient designs of prevalence studies using capture-recapture methodology. PhD candidate 2002- Source of funds: Commonwealth Scholarship.

MSc Students

Karen Roberts. Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Topic: Risk factors for nutritional risk in community dwelling seniors 75 years and over. MSc candidate. 2004-Source of funds: Faculty of Medicine Studentship.

Dr. Eric Ehrensperger. Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Title: A Systematic Review of Risk Factors for Stroke in Patients with Asymptomatic Carotid Artery Stenosis. MSc candidate. 2004-

Dr. Ron Postuma. Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Title: Seasonal variation in Parkinson's disease risk. MSc candidate. 2004- Source of funds: FRSQ.

Diploma Students

Dr. Emiko Wong. Department of Epidemiology & Biostatistics. Dissertation Title: Animal exposure as a risk factor for Multiple Sclerosis. Diploma candidate 2003-

Post Doctoral Fellows

Dr. Martine Puts. Department of Epidemiology & Biostatistics. Characterization of the health and functional status of cancer patients, aged 70 and over, referred to oncology. Co-supervision with Dr. Howard Bergman. 2006-2008.

Dr. Linda Furlini. Department of Epidemiology & Biostatistics. Attitudes about mental incapacity and long term participation in the Canadian longitudinal Study on Aging (CLSA). 2005-2006.

GRADUATED

Clinical Fellows

Dr. Paul Giacomini. Department of Neurology and Neurosurgery. Neurologist. Lead exposure and the development of amyotrophic lateral sclerosis: A systematic review of the evidence. 2004-2005.

Ph.D. Students

Mark Oremus, Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Title: Use of medications in the Alzheimer's disease population: Physician and caregiver perspectives. PhD awarded 2005. Source of funds: CIHR, Scottish Rite Charitable Foundation.

John Podoba, Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Title: Unmet needs for community services among the elderly: Impact on health services utilization. PhD awarded 2005. Source of funds: CIHR, SOLIDAGE.