

DIVISION OF GERIATRIC MEDICINE  
DIVISION DE GÉRIATRIE

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**ANNUAL REPORT**

**DIVISION OF GERIATRIC MEDICINE**

**SIR MORTIMER B. DAVIS - JEWISH GENERAL HOSPITAL**

**2006-2007**

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**JUNE 2007**

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. In addition, the Ministry of Health is requesting program development for rapid access to Geriatric Consultation in the community. The Division's areas of activity include the Acute Geriatric Ward (6 NW), Long-Term Care (LTC) Wards (6 W and 6 N), 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 (See [Appendix I](#) for clinical statistics). Many Division members sit on planning committees in the hospital, McGill University, CSSS, long term care facilities, and at the Agence Régionale. Dr. Ruby Friedman is the Medical Director of the Long Term Care Service.

A major highlight this year was the Division of Geriatrics receiving an excellent evaluation from the Canadian Council of Hospital Services Accreditation. In January 2006, long term care ward 6 W 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 are still being cared for by Division of Geriatrics nursing and medical staff.

The Acute Geriatric Ward 6 NW continues to play an important role in the Hospital. As in previous years, almost 80% of admissions are from the Emergency Room. The remainder are transfers to the Ward from other Acute Care Wards in the Hospital. These transfers are complex cases with multi-organ 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 to 36 beds. In addition, due to the temporary relocation of Long Term Care Ward 6 W 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 in previous years, 30 - 40 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 NW for all these categories of patients is 20 days, which is consistent with data from previous years.

As in previous years, for about 1/3 of the year, access to LTC 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 addition, admissions were restricted for two months due to outbreaks of gastroenteritis and Vancomycin resistant enterococcus infection.

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 due to staffing issues. Recruitment and retention of staff is an on-going process and has been very successful. The efforts of Head Nurse, Judy Bianco are most appreciated.

The efforts of the entire multidisciplinary team including, physiotherapy, occupational therapy and dietetics is most appreciated.

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, Louna Kadoch 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, Sara Leblond, Linda Alfonso and Stephanie Allain.

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 11 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 4 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.

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.

This year saw the initiation of a pilot project whereby a consultation service for senior oncology patients was established. This Clinic is under the guidance of Geriatric Fellow, Dr. Doreen Wan Chow Wah, Dr. Johanne Monette and Dr. Carmela Pepe (Division of respirology). Elderly patients with multi-organ system disease and cognitive impairment in addition to active oncological issues are assessed. We hope to further develop this much needed program as part of a large Oncology and Aging Program including education and research.

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. We expect to move our offices and out-patient clinics by the fall 2007.

The challenge for the Division of Geriatric Medicine in the coming years will be to expand our care network to include local CSSS within the context of the RUIS (Réseau universitaire interdisciplinaire en santé) as mandated by the Government, while continuing to respond to the increasing clinical / administrative demands of the Hospital.

### **Long Term Care Service**

For over 15 years, the Division of Geriatric Medicine has cared for 65 elderly Long Term Care Patients on Wards 6 West and 6 North. Since January 2006, Ward 6 West has been closed as a Long Term Care Ward and The Division of Geriatrics has cared for 27 Long Term Care patients at a renovated Ward at the Lindsay Rehabilitation Hospital. This has enabled the Hospital to renovate several Wards throughout the Hospital. We anticipate being at the Lindsay Hospital until at least January 2008. The entire medical and nursing care of these patients is provided by The Division of Geriatrics. During the course of the entire year only 8 patients had to be transferred to the Emergency Room for evaluation. The entire multidisciplinary team is to be commended for the excellent and comprehensive care that these patients are given. Special thanks to Head Nurse, Estelle Kalfon.

In a major development this year, after several years of negotiation with the Ministry of Health, we have succeeded in having our Long Term Care Permit reduced from 100 to 60 patients. However, the number of Long Term Care Patients throughout the Hospital continues to vary widely, sometimes exceeding 90 patients. We have made convincing arguments that these fluctuations are unacceptable. We continue to be in close contact on an almost daily basis with the Agence so that our numbers are kept in the 60 to 70 range. Reflecting these efforts, since the year 2000, discharges from the Long Term Care Wards have doubled and length of stay has been diminished by ½ to 75 days. In conjunction with the Director of Social Services Department, Allan Ptack, the situation will be closely monitored.

In March 2007 Long Term Care Ward 6 North was closed and the patients were relocated to the Griffith McConnell Residence as transitional placement. These patients continued to be followed by the Social Service Department of the Jewish General Hospital but medical and nursing care is provided by the Griffith McConnell Residence. Ward 6 North will be renovated and its vocation will be changed to that of Family Medicine.

As a result of these changes there is no longer a Long Term Care Ward physically present in the Hospital. The challenge will continue to be to ensure efficiency of transfer of patients to the Lindsay Ward and to continue to provide comprehensive care and minimize transfer to the Emergency Room for an increasingly frail and medically complex population. The excellent management of the Long Term Care patients is recognized by the Ministry of Health. Dr. Ruby Friedman is a member of a Committee at the Agence that evaluates care in Long Term Care Institutions and how that impacts on Emergency Room and Acute Care Hospitals.

## **Teaching Activities**

The Division continues to have a heavy teaching load which continues to expand. An increasing number of clinical clerks in 3<sup>rd</sup> and 4<sup>th</sup> year medicine from McGill rotate through Geriatrics. 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 August 2007, all 4<sup>th</sup> 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 per 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 End of Life Care. This September 2007, the theme will be Health Promotion and Prevention. 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.

[A list of invited lectures by the members of the Division is available in Appendix IV. Teaching activities are listed in Appendix VII.](#)

## Research activity

Please see [Appendix II](#) for publications, book chapters and abstracts, [Appendix III](#) for the list of research projects, [Appendix IV](#) for lectures, [Appendix V](#) for honors and awards, [Appendix VI](#) for committee work and [Appendix VII](#) for graduate students. Research in neurobiology and dementia, health services, frailty, pharmacoepidemiology, bone, long term care, and education continue to represent the existing strengths of the Division with programs that cross hospital, department and university lines and in some cases integrate bench to bedside to population. Oncology and older persons, as well as end of life care are emerging interests. There is increasing collaboration with colleagues from Quebec, Canada and internationally. Members of the Division lead major research programs with funding from the Canadian Institutes on Health Research (CIHR), the FRSQ and the Canadian Foundation for Innovation (CFI). These major research teams bring together investigators from Quebec, Canada and internationally.

Howard Bergman with Christina Wolfson and François Béland leads a major international initiative to further our understanding of frailty as a research and clinical concept of vulnerability. The Canadian Initiative on Frailty and Aging ([www.frail-fragile.ca](http://www.frail-fragile.ca)), which includes other McGill investigators such as José Morais and Stéphanie Chevalier, is presently completing a large scale systematic review which will include approximately 10 papers looking at the present state of research and evidence on frailty. In March 2006 an international meeting brought together leading investigators from around the world was initiated and led by the McGill group in Montreal. This group also leads The International Database Inquiry on Frailty (FrData) bringing together principal investigators of 15 longitudinal studies from Canada, United States, Latin America, Europe and Israel examining how the frailty components cluster together and predict adverse outcomes. Under the leadership of François Béland, this group is preparing a protocol for a longitudinal study on frailty. The Canadian Initiative on Frailty and Aging has received major funding from the Max Bell Foundation, the Gustav Levinschi Foundation, the CIHR Institute on Aging, the Réseau Québécois de recherche sur le vieillissement (FRSQ) and major research groups in Canada and Europe.

François Béland and Howard Bergman lead Solidage, the joint McGill/Université de Montréal research group on older persons with funding as a CIHR team. This group in collaboration with groups from Université de Laval and Université de Sherbrooke was awarded this year its second \$3.7 million 5 year CIHR Team Grant (2007-2012).

Drs. Johanne Monette and Howard Bergman with Dr. Gerry Batist (Oncology) have set up the McGill Geriatric Oncology Interest Group in collaboration with the McGill Department of Oncology with the objective of developing a research, teaching and clinical program. A geriatrician/oncologist from the Université de la Méditerranée in Marseille (Frederique Retornaz) and Véronique Gire) an oncologist from the Paris Institut Curie spent a year with our Division as research fellows. As well, Doreen Wan-Chow-Wah, our geriatric fellow, is completing a fellowship in Oncology. She is carrying out a research project surveying attitudes of oncologists in Quebec towards older persons. Martine Puts, PhD from Amsterdam, has joined the group for a 2 year postdoctoral fellowship. A cross-sectional research project on the health and functional characteristics of older persons with cancer has been completed and a pilot longitudinal study is

presently being carried out. Dr. Carmela Pepe, a respirologist with training in oncology and interested in lung cancer in older persons has joined the group.

The Anna and Louis Goldfarb Jewish General Hospital/McGill Memory Clinic is the tertiary care cognitive clinic of our Division and brings together geriatricians and neurologists as well as clinicians and investigators from both the Jewish General Hospital and the MUHC, as well as from Hôpital Maisonneuve-Rosemont, le Centre hospitalier de l'Université de Montréal (CHUM), l'Institut universitaire gériatrie de Montréal and Concordia University. Dr. Howard Chertkow leads the research programs of the Memory Clinic, which include programs on early diagnosis of dementia and studies on patients with Mild Cognitive Impairment, the basic mechanisms of memory and language impairment in Alzheimer's disease and the program on therapy: cognitive changes and experimental approaches. A multi-disciplinary team is looking at the natural history of the MCI individuals along with approaches to predict which MCI individuals will progress. This long term collaborative effort has resulted in a new screening tool for MCI, the Montreal Cognitive Assessment (MoCA) developed by Dr. Ziad Nasreddine and Natalie Phillips, and which is now being used worldwide. Other methodologies include neuroimaging with MRI's, spectroscopy, PET scanning and electrophysiological measures. Trainees from various disciplines including Neurology, Geriatric Medicine and Psychology continue to come through the Memory Clinic. Both Dr. Chertkow and Dr. Bergman are past-Presidents of the C5R (Consortium of Canadian Centres for Clinical Cognitive Research). Dr. Chertkow hosted in 2006 a Canadian Consensus Conference on Dementia, leads the effort in the publication in a series of papers which should be coming out in the coming months.

The goal of the Aging Bone Research Program ([www.med.mcgill.ca/geriatrics/research/agingbone.htm](http://www.med.mcgill.ca/geriatrics/research/agingbone.htm)) led by Dr. Gustavo Duque is to elucidate the mechanisms and potential treatment of the age-related bone loss. The most significant contributions of their investigations are: potential trans-differentiation of bone marrow adipocytes into mature osteoblasts with a subsequent gain in bone mass; that adipogenesis within the bone marrow could be replaced by active osteoblasts with a gain in bone mass and bone quality. A new research line has been developed looking at the role that lamins (proteins of the nuclear envelope) may have in the differentiation of mesenchymal stem cells. his program has been given access to part of the database of the Framingham Osteoporosis Study in collaboration with the Division of Aging at Harvard. A project in collaboration with Dr. José Morais aimed to develop an innovative assessment of fracture risk looking at bone marrow adipogenesis using CT-scan has been started. Dr. Duque holds a chercheur-clinicien junior award from the FRSQ and a CIHR Operating grant.

Dr. Duque also leads our education research program. This research program includes the evaluation of the impact that the undergraduate teaching program (Transcurricular Teaching of Aging and Geriatrics-TTAG project) has in medical students throughout their four years of medical school. An innovative component of this project, teaching medical students how to develop their hospital skills, has been recently published in the Journal *Medical Teacher*. Dr. Duque has developed a video game to teach students how to perform geriatric home visits. This computer game was recognized by the Canadian Association for Medical Education as the best oral presentation during its annual meeting in Victoria, BC ([www.riskdom.com](http://www.riskdom.com)).



Dr. Johanne Monette is a geriatrician, with an MSc in epidemiology. She is the scientific director of the Collaborative Research Network in Long-Term Care ([www.solidage.ca/e/CRNLTC.htm](http://www.solidage.ca/e/CRNLTC.htm)). She is currently the principal investigator of an ongoing longitudinal cohort study entitled: “Interdisciplinary educational program to optimize the management of behavioral and psychological symptoms of dementia in nursing homes”. She has also collaborated on a series of other studies in long term care on delirium, on the use of cholinesterase inhibitors and on the evaluation of an end-of-life program for advanced dementia. Dr. Monette is a leading member of the McGill Geriatric Oncology Interest Group, and has provided the leadership in the cross-sectional study, usefulness of frailty markers in the assessment of health and functional status in older cancer patients referred for chemotherapy, and to a retrospective chart review study on the comparison of the health and functional status between older inpatients with and without cancer admitted to a geriatric/internal medicine unit; a census of cancer physicians in the province of Quebec, and two qualitative studies looking at the clinical experience of oncologists on the one hand and geriatricians on the other hand in the care of older patients. She is the PI in a prospective pilot study on a novel way of assessing health and vulnerability in older newly diagnosed cancer patients. Dr. Monette, in this work, has supervised 2 fellows from France (Dr. Frederique Retornaz and Dr. Veronique Girre), a fellow in the health care for the elderly program (Dr. Dagmar Peters-Mainville), as well as a fellow in Geriatric Medicine (Dr. Doreen Wan-Chow-Wah). Her work with fellows, residents and medical students and supervising their research training has been, and continues to be invaluable.

See Appendix VI for the graduate students supervised. In addition, our division was very active in contributing towards the research training of a very significant number of McGill medical students, residents (particularly in Medicine) and fellows not only in Geriatric Medicine but also in cardiology, respirology, and neurology. This past year the Division has been very active in research training of fellows from other countries. 3 fellows with interest in oncology and frailty were trained in our Division: Dr. Frederique 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.

## **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,

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**APPENDIX I**

**DIVISION OF GERIATRIC MEDICINE  
JEWISH GENERAL HOSPITAL**

**CLINICAL STATISTICS**

<b>ADMISSIONS</b>							
<b>ACUTE GERIATRICS (combined 6NW &amp; Off Service) STATISTICS</b>							
	<b>ADM.</b>	<b>E.R. (%)</b>	<b>WARDS (%)</b>	<b>TOTAL HOSP.(%)</b>	<b>HOME (%)</b>	<b>F.H. (%)</b>	<b>OTHER INST. (%)</b>
2000	461	373 (80.9)	71 (15.4)	444 (96.3)	6 (1.3)	2 (.4)	9 (2.0)
2001	466	381 (81.8)	70 (15.0)	451 (96.8)	1 (0.2)	4 (0.9)	10 (2.1)
2002	334	254 (76)	72 (21.6)	326 (97.6)	1 (0.3)	1 (0.3)	6 (1.8)
2003	380	314 (82.6)	55 (14.5)	369 (97.1)	0	1 (.3)	10 (2.6)
2004	409	317 (77.5)	76 (18.6)	393 (96.1)	1 (.2)	0	15 (3.7)
2005	391	335 (85.7)	36 (9.2)	371 (94.9)	3 (.8)	0	17 (4.3)
2006	457	347 (76.0)	85 (18.5)	432 (94.5)	2 (.5)	0	23 (5.0)

<b>OFF SERVICE</b>			
<b>ADMISSIONS</b>			
	<b>ADM.</b>	<b>E.R. (%)</b>	<b>OTHER (%)</b>
2000	28	28 (100%)	0
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
2006	11	11 (100%)	0

<b>OFF SERVICE</b>											
<b>DISCHARGES</b>											
	<b>D/C</b>	<b>Home (%)</b>	<b>F.H. (%)</b>	<b>6NW (%)</b>	<b>LTC JGH (%)</b>	<b>Other Ward (%)</b>	<b>Rehab Hosp. (%)</b>	<b>LTC Inst. (%)</b>	<b>Death (%)</b>	<b>Other (%)</b>	<b>LOS Days</b>
2000	28	5 (17.9)	0	17 (60.7)	1 (3.6)	2 (7.1)	1 (3.6)	2 (7.1)	0	0	4.2
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
2006	11	1 (9.0)	0	10 (91.0)	0	0	0	0	0	0	4.3

**6NW**

**ACUTE GERIATRICS WARD STATISTICS**

**DISCHARGES**

	D/C	HOME (%)	APT-HOTEL (%)	F.H. (%)	TOTAL COM. (%)	REHAB (%)	OTHER LTC INST. (%)	OTHER WARDS (%)	LTC JGH (%)	DEATH (%)	OTHER/Unknown	LOS DAYS
2000	450	174 (38.7)	27 (6.0)	62 (13.8)	263 (58.5)	34 (7.6)	40 (8.9)	4 (0.9)	71 (15.8)	37 (8.2)	1 (0.2)	18.8
2001	458	221 (48.3)	19 (4.1)	44 (9.6)	284 (62.0)	27 (5.9)	26 (5.7)	6 (1.3)	77 (16.8)	36 (7.9)	2 (0.4)	17.5
2002	315	111 (35.2)	17 (5.4)	24 (7.6)	152 (48.2)	22 (7.0)	33 (10.5)	3 (1.0)	69 (21.9)	35 (11.1)	1 (0.3)	26.0
2003	375	125 (33.3)	11 (2.9)	27 (7.2)	163 (43.4)	23 (6.1)	25 (6.7)	5 (1.3)	133 (35.5)	26 (6.9)	0	23.3
2004	404	132 (32.7)	4 (1.0)	20 (5.0)	156 (38.7)	31 (7.7)	40 (9.9)	7 (1.7)	141 (34.9)	27 (6.7)	2 (0.5)	22.2
2005	386	115 (29.8)	4 (1.0)	18 (4.7)	137 (35.5)	28 (7.3)	34 (8.8)	1 (0.3)	162 (42.0)	23 (6.0)	1 (0.3)	19.7
2006	459	132 (28.7)	16 (3.5)	20 (4.3)	168 (36.5)	26 (5.7)	36 (7.9)	19 (4.1)	165 (36.0)	45 (9.8)	0	19.6

<b>LTC</b>				
<b>LONG TERM CARE GERIATRIC WARD STATISTICS</b>				
<b>ADMISSIONS</b>				
	<b>ADMISSIONS</b>	<b>6NW (%)</b>	<b>OTHER (%) WARDS</b>	<b>SOCIAL ADM FROM ER (%)</b>
2000	147	75 (51.0)	71 (48.3)	1 (0.7)
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)
2006	257	130 (50.6)	123 (47.9) <sup>1</sup>	4 (1.5)

\* 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 9 months 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.

<sup>1</sup> Including re-admissions from rehabilitation hospitals of patients originating from acute medical/surgical wards.

LTC											
LONG TERM CARE GERIATRIC WARD STATISTICS											
DISCHARGES											
	D/C	HOME (%)	APT-HOT (%)	F.H. (%)	TOT D/C TO COM. (%)	REHAB (%)	LTC INST. (%)	WARDS (%)	DEATH (%)	OTHER	LOS DAYS
2000	147	4 (2.7%)	1 (.7)	8 (5.4)	13 (8.8)	0	99 (67.4)	0	30 (20.4)	5 (3.4)	160.4
2001	142	10 (7.0%)	2 (1.4)	3 (2.1)	15 (10.5)	0	87 (61.3)	0	38 (26.8)	2 (1.4)	139.8
2002	139	9 (6.5%)	0	2 (1.4)	11 (7.9)	0	89 (64.0)	0	34 (24.5)	5 (3.6)	142.0
2003	231	10 (4.3%)	1 (.4)	8 (3.5)	19 (8.2)	0	173 (75)	0	35 (15.1)	4 (1.7)	99.3
2004	196	10 (5.1)	0	11 (5.6)	21 (10.7)	0	153 (78.1)	0	22 (11.2)	0	
2005	256	17 (6.6)	0	1 (.4)	18 (7.)	0	203 (79.3)	0	23 (9.0)	12 (4.7)	85.6
2006	257	10 (3.9)	0	1 (.4)	11 (4.3)	1 (.4)	167 (65.0)	0	23 (8.9)	55 (21.4)	75.3



<b>IN-HOSPITAL GERIATRIC CONSULTATION TEAM STATISTICS</b>					
	<b>NEW PATIENTS</b>	<b>RE-REFERRALS</b>	<b>TOTAL CONSULTS</b>	<b>F/U VISITS</b>	<b>TOTAL VISITS</b>
2000	213	233	446	2509	2955
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
2006	247	129	376	1824	2200

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.

<b>E.R. GERIATRIC CONSULTATION TEAM STATISTICS</b>					
	<b>NEW PATIENTS</b>	<b>RE-REFERRALS</b>	<b>TOTAL CONSULTS</b>	<b>F/U VISITS</b>	<b>TOTAL VISITS</b>
2000	318	436	754	100	854
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
2006	414	355	769	317	1086

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.

<b>COMMUNITY GERIATRIC ASSESSMENT UNIT CLINIC STATISTICS</b>						
	<b>NEW PATIENTS</b>	<b>HOME EVAL.</b>	<b>RE-REFERRALS</b>	<b>TOTAL CONSULTS</b>	<b>F/U VISITS</b>	<b>TOTAL VISITS</b>
2000	128	23	54	205	277	482
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
2006	163	32	26	221	448	669

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.

<b>MEMORY CLINIC STATISTICS</b>					
	<b>NEW PATIENTS</b>	<b>RE-REF.</b>	<b>TOTAL CONSULTS</b>	<b>F/U VISITS</b>	<b>TOTAL VISITS</b>
2000	218	4	222	481	703
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
2006	144	13	157	648	805

**APPENDIX II**

**DIVISION OF GERIATRIC MEDICINE  
JEWISH GENERAL HOSPITAL**

**PUBLICATIONS, BOOK CHAPTERS AND ABSTRACTS**

**JANUARY – DECEMBER  
(2006)**

- \_\_\_\_\_ **Division member**
- **Cross-appointed to the Division**
- ===== **Adjunct member**

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Chertkow H, Massoud F, Belleville S, Nasreddine Z, Joannette Y, & Bergman H. Canadian Consensus Recommendations on Mild Cognitive Impairment. Neurology, 2007; 68, (suppl. 1), A235

Chertkow H, Panisset M, Inglis G, Massoud F, Nasreddine Z, Phillips N, & Belleville S. (2007). Contrasting patterns of neuropsychiatric and functional impairment in Lewy Body dementia and Frontotemporal dementia. Neurodegenerative Diseases, 4(suppl 1), 199

Chertkow H, Phillips N, Belleville S, Nasreddine Z, Verret L, Panisset M, Massoud F, & Inglis G. (2007). Anomia and its origins in Lewy Body dementia and Frontotemporal dementia. Neurodegenerative Diseases, 4(suppl 1), 199

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Duque G, Henderson J, Goltzman D. Computer Assisted Long Distance System for Inter-professional Education: Solving the Translational Research Gap. Submitted to the Meeting of the Canadian Association of Medical Education, Victoria (AB), March 2007. (Selected for Oral Presentation)

Duque G, Posel N, Fleiszer D. Learning while having fun: the use of a video game to teach medical students to perform a geriatric home visit. Submitted to the Meeting of the American Geriatrics Society, Seattle, May 2007. (Selected for Presidential Poster Session)

Duque, Picard F, Grenier G, Reboul P, Ferland G, Gaudreau P. The effect of caloric restriction on bone marrow adipogenesis in aging rats. Submitted to the Meeting of the American Geriatrics Society, Seattle, May 2007. (Selected for Oral Presentation)



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Retornaz F, Monette J, Batist G, Monette M, Sourial N, Wan-Chow-Wah D, Puts M, Small D, Caplan S, Bergman H. Usefulness of Frailty Markers in Older Cancer Patients Referred for Chemotherapy. The 27<sup>th</sup> Annual Meeting of the Canadian Geriatrics Society, Banff, AB (April 19-21, 2007). The Canadian Journal of Geriatrics 2007;10(1):8

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Wan-Chow-Wah D, Monette J, Retornaz F, Monette M, Sourial N, Puts M, Batist G, Bergman H. A Census of Cancer Physicians in the Province of Quebec: Clinical Experience with Elderly Patients. The 27<sup>th</sup> Annual Meeting of the Canadian Geriatrics Society, Banff, AB (April 19-21, 2007). The Canadian Journal of Geriatrics 2007;10(1):22

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Monette J, Cotton-Montpetit M, Sourial N, Vandal A, Le Cruguel J-P, Boivin J-F, Laurier C, Monette M, Miller MA. Optimisation de la prescription des antibiotiques en soins de longue durée. VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, QC. La Revue canadienne du vieillissement 2006;25 (Suppl. 1) : 182

Monette J, Champoux N, Monette M, Fournier L, Melançon G, Galbaud du Fort G, Wolfson C, Le Cruguel JP. Optimisation de la gestion des symptômes psychologiques et comportementaux de la démence (SPCD). VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, QC. La Revue canadienne du vieillissement 2006;25 (Suppl. 1) : 272

Hotte D, Monette J, Gold S, Monette M, Champoux N. A Memo Reminding Physicians to Reassess the Indication for Antipsychotics Among their Nursing Home Patients with Dementia. The 27<sup>th</sup> Annual Meeting of the Canadian Geriatrics Society, Banff, AB (April 19-21, 2007). The Canadian Journal of Geriatrics 2007;10(1):9

Wan-Chow-Wah D, Monette J, Retornaz F, Monette M, Sourial N, Puts M, Batist G, Bergman H. A Census of Cancer Physicians in the Province of Quebec: Clinical Experience with Elderly Patients. The 27<sup>th</sup> Annual Meeting of the Canadian Geriatrics Society, Banff, AB (April 19-21, 2007). The Canadian Journal of Geriatrics 2007;10(1):22

Schipper HM, Kwok CS, Rosendahl S, Bandilla D, Maes O, Melmed C, Rabinovitch D, Burns DH. Vibrational spectroscopy of blood plasma for diagnosis of idiopathic Parkinson disease. American Academy of Neurology, Boston, April 28-May 5, 2007. Neurology 68 (Suppl 1): A112, 2007

Henri-Bhargava A, Melmed C, Glikstein R, Schipper H. Neurological impairment due to vitamin E and copper deficiencies in a patient with celiac disease. American Academy of Neurology, Boston, April 28-May 5, 2007. Neurology 68 (Suppl 1): A145-146, 2007

Vaya J, Song W, Khatib S, Geng G, Schipper HM. Heme oxygenase-1/sterol interactions in Alzheimer disease. American Academy of Neurology, Boston, April 28- May 5, 2007. Neurology 68 (Suppl 1): A309-310, 2007

Schipper HM. Heme oxygenase-1: transducer of pathological iron deposition in human CNS disorders? American Academy of Neurology, Boston, April 28-May 5, 2007. Neurology 68 (Suppl 1): A310, 2007

Zukor H, Song W, Liberman A, Mui J, Vali H, Bennett DA, Schipper HM. Mitochondrial damage and corpora amylacea formation in mild cognitive impairment. American Academy of Neurology, Boston, April 28-May 5, 2007. Neurology 68 (Suppl 1): A311, 2007

Sourial N, Zhu B, Steele R, Wolfson C, Bergman H. An Ad-hoc Solution to Using Multiple Imputation for a Multivariate Graphical Method. The 27<sup>th</sup> Annual Meeting of the Canadian Geriatrics Society, Banff, AB (April 19-21, 2007). The Canadian Journal of Geriatrics 2007;10(1):20

Karunanathan S, Sourial N, Oremus M, Wolfson C, Bergman H. Agreement Between Quality Assessors for Longitudinal Studies. The 27<sup>th</sup> Annual Meeting of the Canadian Geriatrics Society, Banff, AB (April 19-21, 2007). The Canadian Journal of Geriatrics 2007;10(1):24

Yu AYK, Keezer MR, Wolfson C, Zhu B, Côté R. Effect of Pre-stroke Use of Antihypertensives, Antiplatelets, and Statins on Ischemic Stroke Severity and Early Outcome in a Geriatric Population. 12th Annual Research Day. McGill University, Division of Geriatric Medicine. Montreal, April 27, 2007.

Keezer MR, Yu AYK, Wolfson C, Zhu B and Côté R. "Blood Pressure and Antihypertensive Therapy as Predictors of Short-term Outcome in Acute Ischemic Stroke in a Geriatric Population" 12th Annual Research Day. McGill University, Division of Geriatric Medicine. Montreal, April 27, 2007.

Yaffe MJ, Lithwick M, Wolfson C., Weiss D. Development and Validation of a Suspicion Index for Physician Use to Detect Elder Abuse: the EASI. World Elder Abuse Awareness Day. School of Social Work, University of Melbourne, Victorian Association of Health and Extended Care. Melbourne, Australia. June 15, 2006.

Yaffe MJ, Lithwick M, Wolfson C., Weiss D. A Canadian Perspective: Elder Abuse Identification and the EASI. World Elder Abuse Awareness Day. School of Social Work, University of Melbourne, Victorian Association of Health and Extended Care. Melbourne, Australia. June 15, 2006.

Yaffe MJ, Lithwick M, Wolfson C. Elder Abuse. The role of the GP. World Elder Abuse Awareness Day. School of Social Work, University of Melbourne, Victorian Association of Health and Extended Care. Melbourne, Australia. June 15, 2006

**APPENDIX III**

**DIVISION OF GERIATRIC MEDICINE  
JEWISH GENERAL HOSPITAL**

**RESEARCH**

**2006 - 2007**

- \_\_\_\_\_ Division member**
- Cross-appointed to the Division**
- ===== Adjunct member**

**RESEARCH**  
**2006 – 2007**

- 2006 Pérennité Solidage-Prisma. Beland F (PI). RQRV-FRSQ. \$15,000
- 2005-06 Organisation des soins communautaires pour les personnes âgées souffrant de démence. Beland F: co-investigator. Canadian Institutes of Health Research (CIHR). \$70,251
- 2004-06 Banque de données Solidage-Prisma. Beland F (PI). RQRV-FRSQ. \$60,000
- 2003-06 FRÈLE : Fragilité : Une étude longitudinale de ses expressions. Beland F (PI). RQRV-FRSQ. \$83,750
- 2004-07 Rôle des organismes communautaires en santé et dynamique partenariale. Beland F: co investigator. CRSH. \$126,000
- 2002-08 Programme de formation en analyse et évaluation des interventions en santé pour la prise de décision et les politiques. Beland F: co investigator. Canadian Institutes of Health Research (CIHR). \$979,370
- 2007-2012 CIHR Team in Frailty and Ageing. Understanding frailty and frail older persons' needs, to design innovative models of care. Béland F & Tourigny A (PI); co-applicants: Bergman H, Bonin L, Couturier Y et al. Canadian Institutes of Health Research. \$3,729,120 (\$745, 834/year)
- 2001-2006 The challenge of understanding and meeting the needs of frail older persons in the Canadian health care system. Béland F, and Bergman H, (PI). Interdisciplinary Health Research Team Program, funded by Canadian Institute of Health Research (CIHR): 709 783\$ per year. Total amount: 3 443 812\$, amount allocated to Johanne Monette M.D., M.Sc. \$347,825.
- 2002-2009 Canadian Alzheimer's Disease Quality of Life Study. Naglie G (PI); co-investigators: Beattie B, Bergman H, Black S, Borrie M, Freedman M, Hogan D et al. Canadian Institutes of Health Research (CIHR): (2002-2006) \$565,419 (2006-2009) \$211,955; Alzheimer Society of Canada (2004-2006) \$113,752
- 2003-2008 Quebec Network for Research on Aging. Bergman H (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. Bergman H (PI), Wolfson C (Co-PI), Hogan D (Co-PI), Béland F (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'aïdants de personnes âgées atteintes de démence de type Alzheimer. Carpentier N (PI), Ducharme F, Kergoat MJ, Bergman H. 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, Bergman H, Black S, Borrie M, Freedman M, Hogan D et al. Canadian Institutes of Health Research. \$50,000
- 2005-2007 Understanding frailty and frail older persons' needs to design innovative models of care. Béland F & Bergman H (PI); co-investigators: Duque G, Monette J, Carpentier N, Wolfson C. CIHR Institute of Aging: (2005-2006) \$10,000; (2006-2007) \$10,000
- 2006- 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
- 2007-2009 Health of work after retirement age and impact on worker health management in industries - Comparing Canada and Japan. Theriault G & Yoshiharu A (PI); co-applicants: Bergman H, Fuhrer R, Kakuma R, Sato Y. Canadian Institutes of Health Research. \$65,000 (\$32,500/year)
- 2001-2006 Multi-level evaluation in the early diagnosis of Alzheimer's disease. Chertkow H (PI); co-investigators: Bergman H, Kabani NJ, Wolfson C. Canadian Institutes of Health Research (CIHR). \$565,830 (\$113,166 per year).
- 2003-2008 Diagnosis, localization, and treatment of semantic memory impairment in Alzheimer's Disease. Chertkow, H. (P.I.), Arnold, D. CIHR (Canadian Institutes of Health Research) operating grant of \$113,350/year
- 2007-2012 Establishing prognostic subgroups in mild cognitive impairment. Chertkow, H. (P.I.), Kabani, NJ, Diksic M. CIHR (Canadian Institutes of Health Research) operating grant of \$114,007/year
- 2006-2008 The role of impaired cerebral autoregulation and chronic cerebral hypoperfusion in patients with Alzheimer's disease. Chertkow H, Schondorf R. Alzheimer Society of Canada. \$149,690

- 2006-2009 Identification of the role of lamins in the pathogenesis of age-related bone loss Duque G (PI). Canadian Institutes for Health research (CIHR). Operating Grant. \$300,336
- 2004-2007 Molecular changes in the aging osteoblast. Duque G (PI). Fonds de la Recherche en Sante du Quebec-Health Professionals Research Grant-Junior I. Career Award-6305. \$160,000 (Salary award) \$50,000(Operating grant)
- 2004-2006 The potential anabolic effect of Alendronate in differentiating mesenchymal stem cells. Duque G (PI). Merck USA. Medical School grant. \$ 20,000
- 2006-2009 Emerging team grant program Beland F (PI). Duque G (Co-Investigator). Canadian Institutes for Health research (CIHR). Operating Grant. \$1,200,000
- 2007 Effect of Risedronate on bone marrow adipogenesis in vivo. Duque G (PI). Procter and Gamble USA. Operating Grant. \$ 36,700
- 2006-2007 Réseau de Recherche en vieillissement - axe nutrition. Duque G (PI). Operating Grant. \$ 12,450
- 2006-2011 Role of caspases in human neuronal cell death and in Alzheimer's disease. Principal investigator: A LeBlanc. CIHR. operating grant, \$123,418 per year
- 2006-2007 Criblage de petites molecules inhibitrices de la caspase-6. Principal investigator: LeBlanc A and co-PI Blondel M. Fonds France-Canada pour la recherche. \$10,000
- 2004-2006 Delirium on long term care settings: occurrence, modifiable risk factors and outcomes. McCusker J (PI), Cole M, Voyer P, Champoux N, Monette J, Berg K, Ciampi A. Institute of Aging Priority: \$325,812
- 2006-2008 Delirium in nursing home patients with severe cognitive impairment. McCusker J, PI, Voyer P co-investigator, Cole M, Champoux N, Monette J, Scampi A. Jointly funded by the Alzheimer's Society of Canada, the the Canadian Nurses Foundation, the Nursing Care partnership, the Institute of Aging and the Institute of Gender and Health. \$171,061 (Alzheimer's Society of Canada: \$114,041; Institute of Aging: \$28 510; Institute of Gender and Health: \$28,510)
- 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). Monette J, (PI), Savoie M, Champoux N, Wolfson C, Lafleur J. Canadian Patient Safety Institute. \$162,303



- 2004-2006 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. PI: Schipper H Co-investigators : C. Melmed, F Moore, D Arnold, F Grand'Maison. TEVA Neurosciences I. \$427,560
- 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: Schipper H. TEVA Neurosciences II. \$ 42,332
- 2004-2007 Role of heme oxygenase-1 in aging and parkinsonian neural tissues. PI: Schipper H. 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. PI: Basik M Co-investigators: Schipper H, et al. (6 co-investigators). Genome Quebec. \$523,000. HMS share: \$40,800
- 2005-2006 Spectroscopic analysis for the diagnosis and management of Alzheimer's disease. Co-PIs: Burns D, Schipper H. Canadian Institutes of Health Research-Proof of Principle I (CIHR-POP I). \$150,000
- 2005-2009 Development of heme oxygenase-1 suppressor (HOS) technology for the diagnosis, prognosis and therapy of neurodegenerative diseases. PIs: Schipper H, Gupta A. Osta Biotechnologies, Inc. \$TBA
- 2005- Discovery of biomarkers of Alzheimer's disease. Phase II. PI: Schipper H. Caprion Pharmaceuticals Inc. \$13,000
- 2006 Discovery of biomarkers of Alzheimer's disease. Phase II-Extension. PI: Schipper H. Caprion Pharmaceuticals Inc. \$4,000
- 2006-2007 Development of novel HO-1 inhibitors for treatment of neurodegenerative diseases and cancers. PIs: Schipper H, Nakatsu K, Szarek W, Gupta A. Osta Biotechnologies Inc. \$31,000
- 2007 Spectroscopic analysis for neurodegenerative disease biomarker discovery. PI: Schipper H. Molecular Biometrics LLC. \$50,000
- 2001-2006 Longitudinal Study of the frailty process and of unmet needs in the community dwelling elderly. Wolfson C (PI); co-investigators: Bergman H et al. Canadian Institutes of Health Research (CIHR). \$515, 782

- 2004-2006 CLSA Developmental Activities Phase I. Wolfson C, Kirkland S, Raina P (PI's). Bergman H et al (co-PI's). Canadian Institutes of Health Research. \$1,744,000.
- 2006-2008 CLSA Developmental Activities Phase II. Wolfson C, Kirkland S, Raina P (PI's). Bergman H et al (co-applicants). Canadian Institutes of Health Research. \$2.1 million
- 2006-2008 Canadian Institutes of Health Research. Canadian Longitudinal Study on Aging: Phase II Feasibility Study Proposals. Co-Principal Investigators: Wolfson C, Kirkland S, Raina P. \$2,162,342
- 2006-2007 Parkinson Society of Canada. A Framework for Parkinson's disease research in Canada. Co-Principal Investigators: Wolfson C, Postuma R \$20,000
- 2003-2009 Canadian Institutes of Health Research. Integrated Training Program in Basic and Clinical Aspects of Neuroinflammation. Antel J (PI). Co-Investigators: Owens T, Bar-Or A, Nalbantoglu J, Duquette P, Talbot P, Wolfson C, David S, Arnold DL, Luheshi GN. \$1,320,000
- 2006-2007 FRSQ Réseau québécois de recherche en vieillissement. The Canadian longitudinal Study on Aging – A strategic Initiative. Principal Investigator: Wolfson C. \$45,000
- 2004-2006 Canadian Institutes of Health Research. Canadian Longitudinal Study on Aging: Developmental Activities Phase I. Co-Principal Investigators: Wolfson C, Kirkland S, Raina P. 140 Co-Investigators. \$1,744,000
- 2004-2006 Canadian Institutes of Health Research. 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: Vandal A, Wolfson C. Co-Investigators: Duquette P, Lapierre Y, Moore F. \$182,885
- 2004-2007 Canadian Institutes of Health Research. Evaluation multicentrique de la sensibilité au changement d'une batterie d'instruments de mesure du statut des aînés suivis en réadaptation. Demers L (PI). Co-Investigators: Bravo G, Desrosiers J, Robichaud LA, Ska B, Wolfson C. \$213,487

**APPENDIX IV**

**DIVISION OF GERIATRIC MEDICINE  
JEWISH GENERAL HOSPITAL**

**INVITED LECTURES**

**2006 - 2007**

- \_\_\_\_\_ Division member**
- Cross-appointed to the Division**
- ===== Adjunct member**

**INVITED LECTURES**  
**2006-2007**

**BÉLAND François**

Evidence-based lies: Estimating health care expenditures in Canada, Centre for Health Economics and Policy Analysis, McMaster University, 19 avril 2007

Health differences in later life: gender perspective on health and function in LAC urban elderly, Ageing in Developing Countries: Building Bridges for Integrated Research, Organisé conjointement par le CELADE, l'Union internationale pour l'étude scientifique des populations et l'UNFPA, Santiago de Chili, 23-24 avril 2007

Le privé concilie mieux que le public performance économique et qualité?, Deuxième Forum franco-québécois, Maîtrise des dépenses de santé ou qualité : faut-il choisir? Paris, 5-6 mars 2007

Les alliances recherche/action gestion: peut-on vivre ensemble? Chaire FCRSS/IRSC Gouverne et transformation des organisatoinis de santé, Institut national de santé publique du Québec, Montréal, 1 février 2007, Québec, 8 février 2007

Diferencias de genero en sintomas depresivos en adultos mayores en latino america y el caribe, II congreso mercosur de Gerontologia y Geriatria y III congreso Uruguayo de Gerontologia y Geriatria, Punta del Este, Uruguay, 29-31 octobre, 2006

Les dépenses de santé : mieux garder pour perdre, 1ier Sommet sur la privatisation des soins, l'Institut Canadien, Montréal, 22 Novembre 2006

Catastrophic cognitive decline and functional status, 35th Annual Scientific and Educational Meeting, Québec, 26-28 October 2006

Studying Adult Development and Aging: Planning for the Canadian Longitudinal Study on Aging, 35th Annual Scientific and Educational Meeting, Québec, 26-28 October 2006

Health care spending : Winning the number game, Association médicale canadienne, Conférence nationale 2006 sur les politiques de santé et les négociations, Ottawa, 29-30 octobre 2006

Les profils de fragilité dans une population âgée fragile en ménage privé, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Le déclin cognitif rapide précipite la détérioration du statut fonctionnel, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Problèmes relies à la pharmacothérapie comme cause d'hospitalisation chez la personne âgée fragile, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Facteurs associés à l'évolution de l'état fonctionnel des personnes âgées vivant à domicile, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Validatin d'une grille d'évluation de la qualité des processus de soins au service de gériatrie, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

L'utilisation des services de centre e jour par les personnes âgées avec incapacités fonctionnelles, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

La fragilité: l'initiative canadienne sur la fragilité et le vieillissement, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Une stratégie pour l'étude de la fragilité auprès de populations, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

La fragilité: de sa définition à son étude, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

La mobilité des membres inférieurs chez les hommes et les femmes de sept villes d'Amérique latine, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Différences sociales entre hommes et femmes âgés sur les symptômes dépressifs en Amérique latine, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Différences hommes et femmes en santé : qu'y a-t-il à expliquer?, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

La santé, les femmes, les hommes et le vieillissement, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Frailty data (FRDATA) : Évaluation de 7 domaines potentiels de la fragilité chez les personnes âgées, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Fondements sociaux de la fragilité, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Les coûts des services sociaux et de santé aux personnes âgées fragiles : l'approche du décès, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Prévalence, facteurs et raisons de non-pertinence des patients âgés en médecine et en gériatrie, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

SIPA : un système intégrer pour personnes âgées fragiles, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

Des modèles intégrés adaptés aux contextes nationaux et régionaux, VIIIe Congrès international francophone de gérontologie et gériatrie, Québec, 1-4 octobre 2006

## **BERGMAN Howard**

### *International*

Frailty: Emerging Clinical and Research Paradigm. University of California San Francisco Geriatrics Grand Rounds. San Francisco, California. Mar 9, 2007

Transitions: Sharing Clinical Responsibility and Accountability Throughout the Trajectory of Care. The Greying Nation: Transitions of Care in Later Life. Edmonton, AB. Mar 22, 2007

The Challenge of Chronic Disease Management in Very Frail Older Persons. (Symposium led by Howard Bergman and Dennis Kodner) 7th Annual Conference of the International Network of Integrated Care: Models & Innovations in Chronic Disease Management & Long Term Care in association with the 1st Annual 'NHS Networks' Conference: Models & Innovations in Health & Social Care Networks. London, England. Nov 29, 2006

La Complexité des soins aux personnes âgées : défi pour les systèmes de santé. Journée scientifique 150e – Hôpital Genève : L'Hôpital de demain. Genève, Suisse. 10 oct, 2006

La Fragilité: l'initiative canadienne sur la fragilité et le vieillissement. VIIIe Congrès francophone international de gérontologie et de gériatrie. Québec, QC. 4 oct, 2006

Les soins aux personnes âgées : une complexité et une diversité à saisir. Plénière. VIIIe Congrès francophone international de gérontologie et de gériatrie. Québec, QC. 4 oct, 2006

Pertinence des hospitalisations au Canada, en France et en Suisse : de la théorie à la pratique. Symposium : Responsables : Jacques Morin & Howard Bergman. VIIIe Congrès francophone international de gérontologie et de gériatrie. Québec, QC. 2 oct, 2006

Frailty: an emerging clinical paradigm. Medicine for an Ageing Population. Joint meeting of the Royal College of Physicians and British Geriatrics Society. London, England. June 8, 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. Montreal, QC. May 31, 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, Troy, Michigan. May 15-16, 2006

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

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

### ***National***

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

An Active Mind is a Healthy Mind. Healthy Aging in Mind and Body. The Third Age Centre. Fredericton, NB. Apr 27, 2006

Understanding the Complexity of Care for Older Persons. National Initiative for the Care of the Elderly Workshop. Calgary, AB. June 22-23, 2006

### ***Provincial***

The Complexity of Care for Older Persons: Challenges Facing Modern Healthcare Systems; Frailty: An Emerging Clinical and Research Paradigm? Canadian Association on Gerontology: Acknowledging our past, Building our future. Quebec, QC. Oct 27, 2006

Towards a National Program on Chronic Diseases. Multi-partner Workshop. National Research Council Canada. Ottawa, QC. Nov 3, 2006

Frailty, co-morbidity and disability: optimizing health & function in older persons. Colloque AGIR (Arrimage de la Gestion thérapeutique, de l'Intervention et de la Recherche). Montréal, QC. Oct 16, 2006

### ***Other Health Care Institutions***

Understanding Mild Cognitive Impairment: Recommendations from the 2006 Canadian Consensus Conference on Dementia. River Valley Health Hosp Corporation. Fredericton, NB. Apr 27, 2006

### **CHERTKOW Howard**

Integrating clinic diagnosis, brief cognitive tests and brain imaging to diagnose early AD in clinical practice. 5th Annual Symposium on Mild Cognitive Impairment. Miami: April 14, 2007

New Canadian guidelines for diagnosis and treatment of dementia: Results of a consensus conference. Jewish General Hospital Department of Medicine Grand Rounds. Montreal: March 12, 2007

Recommendations from the Third Consensus Congress on the Diagnosis and Treatment of Dementia. Jewish General Hospital Geriatric Medicine/Memory Clinic Research Rounds. Montreal: Feb. 9, 2007

Research Update: Empowering people with Knowledge. A changing melody: A learning and sharing forum for persons with early-stage dementia and their partners in care. The Kenneth G. Murray Alzheimer Research and Education Program at 28th Conference of the Alzheimer Society of Canada. Toronto: November 5, 2006

Rapport de la neuroimagerie dans l'étude du vieillissement sain et des maladies neurodégénératives Symposium. CIFGG VIIIème congrès international francophone de gérontologie et gériatrie. Québec: Oct. 3, 2006

Mise à jour dans la maladie d'Alzheimer et autres types de Démences. Le Links - Journée de Médecine Familiale 4e édition. Montreal: Sept. 29, 2006

Alzheimer's Disease: What's New in Treatment and Prevention? Société Alzheimer de Montréal. Montreal: September 28, 2006

Mild Cognitive Impairment: Separating Age and early impairment. Cape Breton Neurology Update V: Lighting the way in the treatment of neurological disorders. Cape Breton: September 15, 2006

Moderator for Ken Rockwood presentation "Goal setting and attainment in dementia". Montréal: May 29, 2006

### **DUQUE Gustavo**

Vitamin D in the elderly. EUROMEDLAB Conference. Amsterdam, June 2007

Learning while having Fun: the McGill Experience. Meeting of the American Geriatrics Society. Seattle, May 2007

Osteoporosis in Older Adults. Uruguayan Association of Internal Medicine Annual Meeting. Montevideo, Uruguay. 2006

E-Portfolios. American Association of Medical Colleges annual meeting. Seattle, WA, USA. 2006

E-Portfolios. University of Miami, Centre for E-Learning in Geriatrics (CELGI). Miami, FL, USA. 2006

Osteoporosis in the Elderly. University of Miami, Division of Geriatrics Grand Rounds. Miami, FL, USA. 2006



Osteoporosis in the elderly. Meeting of the Colombian Geriatrics Society. Cartagena, Colombia. 2006

Frailty-Biological mechanisms. PAHO-Latin American Academy of Geriatric Medicine Meeting. Bogota, Colombia. 2006

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

Simulations in Medical Education. Ottawa Conference in Medical Education. New York. 2006

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

As a matter of fat, new insights on senile osteoporosis. SIG-Osteoporosis. American Geriatrics Society meeting. Chicago. 2006

E-Learning in Geriatric Medicine: E-portfolios. American Geriatrics Society meeting. Chicago. 2006

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

### **LEBLANC Andrea**

Caspase-6 activation: a novel instigator of Alzheimer disease. University of Texas Health Science Center at San Antonio. March 7, 2006

Prion protein and prion diseases. McGill University, Neurology Grand Rounds. April 2006

Activation of Caspase-6 as an instigator of Alzheimer disease. Peking University, China. November 8, 2006

The role of Caspase-6 activation in cognitive impairment and Alzheimer disease. Gladstone Institute of Neurological Disease, UCSF. December 14, 2006

La caspase-6, une instigatrice de la maladie d'Alzheimer. Université de Moncton, NB . March 23, 2007

### **MONETTE Johanne**

Optimisation de la prescription des antibiotiques en soins de longue durée. VIIIe Congrès francophone international de gérontologie et gériatrie, Québec, Québec (3 octobre 2006)

Optimisation de la gestion des symptômes psychologiques et comportementaux de la démence (SPCD). VIIIe Congrès francophone international de gérontologie et gériatrie, Québec, Québec (4 octobre 2006)

The Council of Nurses and the Multidisciplinary Council education session: Interdisciplinary educative program to optimize the quality of management of perturbing behaviors of dementia. Maimonides Geriatric Center. (December 12, 2006)

### **SCHIPPER Hyman**

#### ***McGill***

Guts, gaits and wasting quokkas: A case study in Redox Neurology. Grand Medical Rounds, Jewish General Hospital, McGill University, December 11, 2006

#### ***Provincial/National/International***

The role of heme oxygenase-1 in brain aging and neurodegeneration. Alexander Silberman Institute of Life Sciences. The Hebrew University of Jerusalem. Jerusalem, Israel. July 12, 2006

The role of heme oxygenase-1 in brain aging and neurodegeneration. ApoPharma Inc., Toronto, August 24, 2006

Heme oxygenase-1 and pathological iron deposition in brain aging and neurodegeneration. Invited symposium speaker. SPRING Symposium on Mechanisms of Iron-induced Neurodegeneration: A Focus on Parkinson's Disease. Imperial College, London, UK. January 5-6, 2007

Spectroscopy of blood plasma for the diagnosis of Parkinson disease. MJ Fox Foundation, New York City, NY, April 26, 2007

Heme oxygenase-1 in brain aging and neurodegeneration. 5th Meeting of the Canadian Oxidative Stress Consortium, Montreal, May 3-6, 2007

### **WOLFSON Christina**

Division of Clinical Epidemiology, McGill University Health Centre. Military Service and an Increased Risk of Amyotrophic Lateral Sclerosis: Is the Epidemiological Evidence Supportive? Montreal, March 22, 2007

Workshop: Epidemiology IS a basic science. Montreal Neurological Institute, Montreal, November 15, 2006

McGill Neurology Conference, Lady Davis Institute, Jewish General Hospital. The Prevalence of Multiple Sclerosis in Québec: Higher than expected? Montreal, June 9, 2006

VIIIe Congrès international francophone de gérontologie et gériatrie. Méthodologie des grandes études longitudinales de la multidisciplinarité. Quebec City, 1-4 octobre 2006

Montreal Neurological Institute. Session Chair Symposium on basic & translational aspects of neuroinflammation. Montreal, June 18-19, 2006

**APPENDIX V**

**DIVISION OF GERIATRIC MEDICINE  
JEWISH GENERAL HOSPITAL**

**AWARDS & NOMINATIONS**

**2006 - 2007**

- \_\_\_\_\_ Division member**
- Cross-appointed to the division**
- ===== Adjunct member**

**AWARDS & NOMINATIONS**  
**2006 - 2007**

**BERGMAN Howard**

Elected Fellow of the Canadian Academy of Health Sciences

**LEBLANC Andrea**

Fonds de la Recherche en Santé du Québec. Chercheur National. A. Leblanc. Salary Award, 75% of salary/year. (2004-2009)

Ancienne de l'année, Faculté des Sciences, Université de Moncton, Moncton, NB, Canada (2007)

Nominated to the Neural Oxidative Metabolism and Death (NOMD) Study Section, NIH (2006)

**WOLFSON Christina**

Best Original Research Article Award, The College of Family Physicians of Canada. Use of Neuroleptics: Study of Institutionalized Elderly People in Montréal, Que. CFP 2005, Vol 51: 697 (2006)

Award for Teaching Excellence, Department of Epidemiology & Biostatistics and Occupational Health (for Principles of Inferential Statistics in Medicine) (2005-2006)

**APPENDIX VI**

**DIVISION OF GERIATRIC MEDICINE  
JEWISH GENERAL HOSPITAL**

**COMMITTEE WORK**

**2006 - 2007**

- \_\_\_\_\_ Division member**
- Cross-appointed to the division**
- ===== Adjunct member**

**COMMITTEE WORK  
2006 - 2007**

**BELAND, Francois**

Institut de la recherche en santé du Canada, Comité Santé et vieillissement 2006  
Michael Smith Foundation for Health Services Research, Operating Grant review 2006

**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 1991-present

Education Committee, Division of Geriatric Medicine 1994-present

**McGill University**

***Department of Family Medicine***

Chairperson, Health Care for the Elderly Committee and coordinator, Geriatric Education. 1989-present

**Sir Mortimer B. Davis Jewish General Hospital**

***Department of Medicine***

Policy Committee 1990-present

***Hospital Committees***

Medical Advisory Committee 1987-present

Chair (94-98) and member (99-present), Hospital Coordinating Committee on care of the elderly 1994-present

## **Professional and Learned Societies**

### ***Officer***

Vice-Chair, Special Interest Group on International Activities, American Geriatrics Society 1998-present

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***

## **Foundations and Industry**

Board of Directors, Gustav Levinschi Foundation 2004

Advisory Council, enCircle Program, Bank of Montreal 2004

## **Government and Community Committees and Consultations**

Medical Advisory Board, Montreal Alzheimer Group 1995-present

Chair, Committee on integrated and coordinated services for frail elderly, committee of the Jewish Public Establishments Coordinating Committee (JPECC) 1995-1996

## **CHERTKOW Howard**

Jewish General Hospital Academic Advisory Committee 2000-

Medical advisor, Québec division of the Alzheimer's Society of Canada 1998-

Member, Executive Committee, Lady Davis Institute, S.M.B.D.-Jewish General Hospital 1999-

Member, CIHR BSB Committee 2006-2007

Member, Alzheimer Society of Canada, Research Advisory Committee 2006-2007

Member, NIH ADRC Committee 2006

Past President, C5R 2007

Member, 4<sup>th</sup> CCD Executive Committee 2007



### **DUQUE Gustavo**

Board of Directors-Osteoporosis Canada	2007
Canadian Institutes of Health Research Grants Committee: Clinical Investigation B	2006-present
Canadian Institutes of Health Research Grants Committee: Emerging teams	2006-present
Fonds de la Recherche en Santé du Quebec grant review committee-Chercheur Boursier pour détenteurs d'un diplôme professionnelle en santé (Vice-president)	2004-present

### **GOLD Susan**

McGill Executive Committee
Education & Training Committee
Resident Training Committee
Undergrad Training Committee

### **LEBLANC Andrea**

Member of National institutes of Health Special emphasis Panel/ZRG1 NBDG-E (08)	2006
Member of FRSQ chercheur boursier senior committee	2006
Member of the Neural Oxidative Metabolism and Death (NOMD) Study Section, National Institutes of Health	2007

### **SCHIPPER Hyman**

#### McGill

Appointment, Promotion and Tenure Committee, Dept. of Neurology and Neurosurgery	2001-
Mentoring Program, Dept. of Neurology & Neurosurgery (Dr. Alex Thiele)	2006-
Contributed guidelines for the use of biological markers in the diagnosis of Alzheimer disease for the 3rd Canadian Consensus Conference for the Diagnosis and Treatment of Dementia (CCCDTD3). Montreal, March 9-11, 2006	2007

Internal Examiner, PhD Candidacy Exam, Dept. of Pathology, McGill University (Candidate: David Taylor) 2006

### **Other**

Journal of Neurochemistry (Journal Editorial Board) 1998-

Brain Research (Journal Ad-hoc reviews) 2006

Journal of Neuroscience Research (Journal Ad-hoc reviews) 2007

J Neurochemistry (Journal Ad-hoc reviews) 2007

Internal Examiner. Canadian Institutes of Health Research (CIHR): Biological and Clinical Aspects of Aging (BCA) Grants Committee (Grant review panel) 2006-2007

Alzheimer's Association, U.S (Grant Ad-hoc reviews) Canadian Institutes of Health Research (9 proposals) (Grant Ad-hoc reviews) 2006

Alzheimer's Association, U.S (2) (Grant Ad-hoc reviews) 2007

### **Scholarly Activities**

Contributed guidelines for the use of biological markers in the diagnosis of Alzheimer disease for the 3rd Canadian Consensus Conference for the Diagnosis and Treatment of Dementia (CCCDTD3). Montreal, March 9-11, 2006 2007

### **WOLFSON Christina**

#### **Administrative Responsibilities**

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

Member, Faculty of Medicine representative on McGill University Senate 2005-2008

Member, Academic Appointments Committee. Department of Epidemiology & Biostatistics, McGill University 2006-present

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

Member, Committee of Full Professors. Department of Epidemiology & Biostatistics, McGill University 2002-present

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

Member, Academic Advisory Committee. Lady Davis Institute for Medical 2000-2006  
Research,

Member, Research Management Committee. Lady Davis Institute for 2005-2006  
Medical Research

### **Canadian Scientific**

Member, Scientific Planning Committee for The Canadian endMS Research 2007  
Conference (endMS 2007)

Member, Steering Committee, endMS Research & Training Network 2007

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

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

### **International Scientific**

France. Comité scientifique Constances. Scientific Committee for the 2005-present  
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 2005-2006  
the Review of the Scientific Literature on Amyotrophic Lateral Sclerosis in  
Veterans

Norway. "MS Gruppen". International Working Group on the Epidemiology 1994-present  
of MS.

Membership in Professional and/or Learned Societies World Federation of 1985-present  
Neurology, Research Group in Neuroepidemiology

Canadian Society for Epidemiology & Biostatistics 1992-present

Multiple Sclerosis Society of Canada 1986-present

Amyotrophic Lateral Sclerosis Society of Canada 1990-present

Canadian Women's Health Network 1999-present

### **Ad hoc reviews – Journals**

Chronic Diseases in Canada  
Journal of Clinical Epidemiology  
Canadian Medical Association Journal  
Canadian Journal of Neurological Sciences  
Brain  
Stroke  
Epidemiology  
Canadian Journal of Aging  
Annals of Epidemiology  
Lancet  
Journal of Geriatric Psychiatry and Neurology  
Journal of the American Geriatrics Society

### **Ad hoc reviewer – Grants**

Canadian Brain and Nerve Health Coalition.	2006
Research in Aging: Charitable Organization. (U.K.)	2006
Fondazione Italiana Sclerosi Multipla	2006
Neurological Foundation of New Zealand	2002-present
National Multiple Sclerosis Society (USA)	2001-present
American Alzheimer's Association	1998-present
Fonds de la recherche en santé du Québec	1986-present
Heart and Stroke Foundation of Canada	1989-present

**APPENDIX VII**

**DIVISION OF GERIATRIC MEDICINE  
JEWISH GENERAL HOSPITAL**

**TEACHING ACTIVITIES**

**2006 - 2007**

- \_\_\_\_\_ Division member**
- Cross-appointed to the division**
- ===== Adjunct Member**

## TEACHING ACTIVITIES

### **BÉLAND François**

#### **Courses Taught**

Trayectorias de fragilizacion y relaciones sociales, V curso ALMA, Columbia, June 18-21 2006

#### **Graduate Students**

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

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

Claude Galand, PhD. Typologie des réseaux d'aide dans deux régions francophones du Canada. Santé publique, codirection, depuis 2000

### **BERGMAN Howard**

#### **Post-Graduate Students**

Frédérique Retornaz, Clinical Fellow, Université de la Méditerranée à Marseille. Sep 05 – Aug 06

Director, Véronique Girre, Clinical Fellow, Institut Curie à Paris. Jun 06 – Dec 07

Co-director, Martine Puts, Post-doctoral student, Vrije Universiteit, The Netherlands. Apr 06 -

### **CHERTKOW Howard**

#### **Postdoctoral Fellows**

Jim Nikelski, Ph.D. Dept. of Psychology, McGill University, 2006

#### **Graduate students supervised**

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

## **DUQUE Gustavo**

### **Graduate Students and Postdoctoral Fellows**

Marco Casparrini, Undergrad, McGill, Summer Research Student Program, 2007

Jeb Ong, Pre Med McGill, Summer Research Student Program, 2007

Samuel Ohayon, Undergraduate Program, Biochemistry, McGill University, 2006-present

Alexandre Elbaz, Graduate Student (Master's) Division of Experimental Medicine, McGill University, 2006-present

Rahima Akter, Graduate Student (Master's), Division of Experimental Medicine, McGill University, 2006-present

Hanane Benbarak, Summer Student, Faculty of Medicine, McGill University, June-September, 2006

Sara Saliem, Summer Student, Faculty of Medicine, McGill University, May-August, 2006

Ian Hammond-Martel, Summer Student, Faculty of Sciences, McGill University, May-August, 2006

### **Courses Taught**

CIHR-training program in skeletal health research

Osler Fellow, Physicianship Program, McGill University

Introduction to Clinical Practice-Communication with geriatric patients, 1<sup>st</sup> year med students

Introduction to hospital practice-Introduction to the geriatric patient, 2<sup>nd</sup> year med students

Tutor-3<sup>rd</sup>. year medical students, Division of Geriatric Medicine Clerkship Jewish General Hospital

Physiology of bone, Graduate students.

Tutor, small group sessions and bedside teaching, Division of Geriatric Medicine, Department of Medicine.

Back to basics: bone metabolism. Seminars for last year medical students

Tutor, small group sessions, Division of Endocrinology, Department of Medicine

Seminars on aging, aging bone, Faculty of Graduate studies and Research, Division of Experimental Medicine

Vitamin D a hormone in disguise, Vitamin D seminar, McGill University, May 3rd.  
Osteoporosis workshop – Geriatrics for the Practitioners, Division of Geriatric Medicine, McGill University

E-case design, FacDev workshop, Faculty Development Office & Molson Medical Informatics, Feb. 2006 (organizer & facilitator)

The problem student and resident: Whose problem is it? October 2006 (Facilitator)

## **LEBLANC Andrea**

### **Graduate Students and Postdoctoral Fellows**

Julie Jodoin, Ph.D. Post-Doctoral Fellow September 2003- (FRSQ PDF award 2003-2006)

Nelly Godefroy, Post-doctoral student August 2004- 2006 (FRSQ and CIHR PDF award 2006-2008 declined – maitre chercheur IRSC in France 2006-)

Malcolm Gains, Ph.D. student March 2002-June 2006 (Graduated and now Assistant Prof., U. de Montreal)

Lily Pazand, B.Sc. student. Part-time and summer work 2005-2007

Guy Klaiman, Ph.D. student November 2002-

David Lin, M.Sc. student, McGill U. Sept. 2004-

Stephanie Laroche-Pierre, M.Sc. student, McGill U. Sept. 2005-

Saskia Srinanvathan, M.Sc. student January 2007-

### **Courses Taught**

PSYT-500B Neurobiology of Mental illness. Course coordinator: Patricia Boska. 200, 2005, 2006 4 Lecture on Alzheimer's disease: 3hrs

501-541B Molecular Biology of Aging, Course Coordinator: Chantal Autexier. Lecture on the aging neurons (2 hrs) and paper presentation by students (2hrs)



## **MONETTE, JOHANNE**

### **Postgraduate**

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

Supervision of Dominique Hotte, fellow in the Family Medicine/Geriatric Program, McGill University. Project entitled: Reducing antipsychotics prescriptions for demented patients: A simple and educational tool for physicians. 2006-

Thesis committee member for Carmela Pepe, candidate for an MSc degree in Epidemiology and Biostatistics, McGill University. Chemotherapy Treatment in Elderly Non-Small Cell Lung Cancer Patients: A Quebec Cancer Centre Experience. 2006-

## **SCHIPPER Hyman**

### **Post-doctoral**

Wei Song, MD., PhD (2002- ) (co-supervisor: Dr. Hemant Paudel). The effects of HO-1 up-regulation on downstream signal transduction pathways in cultured astroglia

Haixiang Su, MD, PhD (2002- ). Establishing antioxidant enzyme and oxidative damage assays in our institute's Biomedical Redox Laboratory

### **Graduate**

Zuanel Diaz (2002- ). PhD Program, Div. of Experimental Medicine, McGill University. Co-supervisor: Dr. Wilson Miller. Redox mechanisms of arsenic toxicity.

Hillel Zukor (2004- ). PhD Program, Dept. of Neurology & Neurosurgery, McGill University. Using biochemical, molecular biological and morphological techniques to delineate downstream cytopathological effects of HO-1 up-regulation in rat astroglia

Amar Patel (2004-2006). MSc Program, Dept. of Neurology & Neurosurgery, McGill University. Co-supervisor: Dr. Hemant Paudel. The role of HO-1/ $\alpha$ -synuclein interactions in the pathogenesis of Parkinson disease. Thesis title: "The effects of human heme oxygenase-1 (hHO-1) on wild-type and mutant (A30P) alpha-synuclein expression in human neuroblastoma cells

Jacob Hascalovici (2006- ). MSc Program, Dept. of Neurology & Neurosurgery, McGill University. Determining the impact of glial HO-1 over-expression on lipid metabolism. Awarded McGill Graduate Student Fellowship (2007-8) for high scholastic achievement

## **Undergraduate research students**

Lori Lieberman, McGill University, (co-supervisor: Dr. Mervyn Gornitsky) Spring-Summer 2006

Sagi Kaduri, McGill University, Summer 2006

Shuwei Wang, McGill University, Summer 2006

## **Course Taught**

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).

## **WOLFSON Christina**

### *Clinical Fellows*

Dr. Jasem Al-Hashel. Department of Neurology and Neurosurgery. Neurology Resident. Neuroscience Rotation, The prevalence of multiple sclerosis in the middle east. 2006-2007

### *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). 2005-2007

### *PhD 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 Charland, 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

## **MSc Students**

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-

Kimberley Coleman. Department of Mathematics & Statistics. Thesis Co-Supervisor (with Dr Alain Vandal). A New Criterion for Model Selection in Capture-Recapture Studies. MSc Candidate. 2006- Source of funds: Tomlinson Scholarship

## **Graduated**

### *Clinical Fellows*

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

### *MSc Students*

#### *Thesis*

Karen Roberts. Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Topic: Risk factors for nutritional risk in community dwelling seniors 75 years and over. MSc Awarded 2006. (Dean's Honours List). Source of funds: Faculty of Medicine Studentship.

Dr. Ron Postuma. Department of Epidemiology & Biostatistics. Thesis Supervisor. Thesis Title: Seasonal variation in Parkinson's disease risk. MSc Awarded 2006. Source of funds: FRSQ.

## **Course Taught**

Instructor. Principles of Inferential Statistics in Medicine. 4 credits (52 hours) 2006-2007