

**Annual Report**  
**Pulmonary Division, Department of Medicine**  
**Sir Mortimer B. Davis - Jewish General Hospital**  
**April 1, 2006 - March 31, 2007**

**I. Highlights**

This past year has been an extremely active one for the Pulmonary Division in all aspects. Our clinical and research programs continue to grow at an exponential rate. Some of the highlights are the following:

Dr. Carmela Pepe has completed her work in Toronto with Dr. Francis Shepherd, a world leader in the treatment of lung cancer and has joined our pulmonary group as of July 2006. Her expertise is in clinical research and the treatment of lung cancer. In addition, she is working on her Masters in Epidemiology.

Our Pulmonary Oncology program remains the major site in the McGill system with over 250 visits per month, a 30% increase compared to last year. In fact, the Pulmonary Oncology Division at Jewish General Hospital(JGH) has become a referral centre throughout the province of Quebec and outside. We deliver comprehensive care from initial diagnosis through all stages of treatment as well as palliative care,

The Division of Pulmonary Oncology has launched its first Lung Cancer Awareness Month in November 2006, with numerous activities such as a presentation at Nurses Grand Rounds, and a public information booth, manned by our physicians, pulmonary oncology nurses, and others to educate and sensitize the public about lung cancer and its prevention. In addition, information on the JGH non-smoking program was distributed.

As part of this program a mailing was sent to family physicians and CLSCs in the Montreal region with the intent to familiarize the physicians, patients and their family members about the numerous resources available at the JGH.

The culmination of the whole month's program was the First Annual Patient Appreciation Party in honour of the courage, dignity, and dedication of our patients and their families organized in partnership with Hope and Cope and the Cancer Prevention Centre. It was the first event held in the newly opened Wellness Centre and it was a resounding success.

The work of our Tumor Board continues to be one of the most important tools in the comprehensive approach to the treatment of our oncology patients. Tumor Board includes the participation and detailed discussion by physicians from surgery, radiotherapy, nuclear medicine ( reviewing PET CTs), pathologists (presenting and reviewing pathology slides), in addition to our pulmonary oncology team (physicians, nurses,) and our Cancer Nutrition and Rehabilitation group.

Construction on our state of the art Interventional Bronchoscopy suite has been completed and is now operational. This project was made possible by the Berall family. This is a new service at the JGH and patients no longer have to be referred to Hôpital Notre Dame.

**Cancer Nutrition-Rehabilitation Program:(CNRP)** The program has developed considerably with three clinics weekly. Patients with anorexia-cachexia secondary to lung cancer are seen in CNRP. This program remains unique in offering a combined nutrition-rehabilitation opportunity for patients with lung cancer. Currently, all newly diagnosed lung cancer patients are screened for nutritional and functional problems at first presentation. Guidelines are in place for referral of patients with problems in these areas to the CNRP. In the CNRP patients and families work with an interdisciplinary team including physiotherapists, a dietitian and a physician. One on one counseling and patient and family education is the major aim of CNRP. After evaluation, patients receive nutritional counseling, nutrient supplementation and based on their physical capacity, are enrolled in an exercise program. If needed they are prescribed selected pharmaceuticals for appetite stimulation and or gastric emptying.

Our research program in different aspects of pulmonary oncology has led to the hiring of additional support staff to maintain the quality care we are known for. Research continues as well in obstructive lung disease and asthma with a number of studies ongoing at any given time.

Pulmonary vascular and thromboembolic diseases, with the collaboration of Dr. Andrew Hirsch and the Divisions of Internal Medicine, Haematology and Cardiology has become a premiere clinical program within the hospital with over twenty referrals monthly.

TB clinic continues to grow under the co-leadership of Dr. Mark Palayew and Dr. Chris Greenaway, of the Division of Infectious Diseases. There have been approximately 25-40 visits weekly to this clinic in the past year.

The collaboration between our Division and the Mt. Sinai pulmonary rehabilitation and asthma education programs has been very beneficial to our patients. In addition, the Mt Sinai Sleep Clinic, coordinated by Dr. Norman Wolkove, caters to patients with sleep problems. Both Dr. Palayew and Dr. Small see patients with sleep pathology there. There are approximately twenty-one sleep studies ordered each and every week. In addition they also run a very successful stop smoking program.

ASCO – We were fortunate in that five abstracts were presented at ASCO, June 2006 in Atlanta.

ATS – In addition three abstracts were presented at ATS in San Diego, in May of 2006.

## **II. Evaluation of Past Academic Year**

The initiation of many new research projects and the significant increase in clinical activities has resulted in a very active year. Teaching remains of the highest caliber. Research studies have been undertaken in pulmonary oncology, obstructive lung disease, asthma, thromboembolism and pulmonary hypertension.

## 1) Teaching Activities

The JGH Pulmonary Division of the Department of Medicine is very involved in teaching at all levels. Four members spent one month as attending staff on the medical wards. While there, they are responsible for supervising a medical team consisting of medical students and junior and senior residents and conducting daily teaching rounds.

The consult service is always extremely active, and medical students, residents and pulmonary fellows all participate throughout the year. While on their pulmonary rotation the residents and students have daily teaching rounds around the cases they have seen, participate in outpatient clinics as well as having weekly didactic rounds and case conferences. Fellows and residents are also taught invasive procedures such as bronchoscopy and thoracentesis. During the course of the year pulmonary fellows also participated in their continuing outpatient clinic under the supervision of Dr. Small, and in sub-specialty clinics in pulmonary oncology, pulmonary hypertension and tuberculosis.

In addition to the clinical teaching, all members of the division regularly participated in lecture series to family physicians at the TELS lecture series, the pulmonary fellows at their core teaching rounds, and to the medical residents and students at their CXR teaching sessions and Core medicine lectures. Dr. Andrew Hirsch won the residents Teacher of the Year award in 2006.

With the ongoing success of the Experimental and Clinical Oncology Course 56-635D, undergraduate students continue to participate in our Pulmonary Tumor Board meetings (held weekly) as part of the workshop portion of their course. This year again, the students greatly appreciated the opportunity to attend the Tumour Board meetings and thereby gain a unique experience in participating in the work of this multi-disciplinary, innovative team.

Divisional weekly pulmonary rounds take place throughout the academic year. This involves presentations by our own staff, including fellows, residents and physicians from other divisions of the Jewish General, as well as many visiting professors. This year, guest speakers have included: Drs. Mark Blostein, Peter Ellis, Pittsburgh, Pennsylvania, Paul Glare, Sydney, Australia, Andy Karaplis, Karen Kost, MUHC, Eddy Lang, Barbara Melosky, Vancouver, B.C., Param Nair, Hamilton, Ont., Ron Olivenstein, MUHC, Gaston Ostiguy, CSST, Madhukar Pai, MUHC, Peter Small, Avi Spira, Boston, MA, Vicky Tagalakis, Antonio Vigano, MUHC

A weekly Clinical/X-Ray conference is held in conjunction with the Radiology and Thoracic Surgery Departments.

Members of our Respiratory Physiology Department are also active in the ongoing clinical teaching of Vanier College Respiratory and Anesthesia students, including HOP students.

**Dr. Jason Scott Agulnik**

Interventional Bronchoscopy Course, CHUM –Hopital Notre Dame, Montreal, May 2006

CXR teaching, Introduction to Internal Medicine, McGill University, March - April 2006

Attending Staff Internal Medicine Clinical Teaching Unit, JGH, McGill University, Aug. 2006, Dec. 2006, January 2007

Respiratory Physiology Small Group Tutor, Faculty of Medicine, McGill University  
Sept 2006

Respiratory Physiology Small Group Tutor, McGill University, Sept. 2006

**Dr. Dennis Laporta**

Instructor, Acute Critical Events Simulation (ACES) course - Canadian Resuscitation Institute (CRI)

**Dr. Neil MacDonald**

Education in Palliative and End-of-Life Care (EPEC) – Selected Trainer

Shared supervision of a Master's student (Ms Swinton) and continuing interaction with physiotherapy colleagues who are studying the role of exercise activities in NSCLC patients

**Dr. Carmela Pepe**

CXR Rounds for Internal Medicine Residents

Internal Medicine Rounds presentation March 29, 2007

Examiner for medical student exams (POM) Jan 10 and July 4, 2007

**Dr. Norman Wolkove**

Courses organized: Respiratory Palliative Care – Key Issues, New Initiatives, 16<sup>th</sup> International Congress on Care of the Terminally Ill, September 26-29, 2006, Montreal, Quebec

**Goulnar Kasymjanova**

The Pulmonary Oncology Experience with EGFR-TKI inhibitors, Lung Cancer Perceptorship, January 2007, JGH

## **Esther Dajczman RN**

McGill School of Nursing, Master's program: "Advanced Physical Assessment: Chemotherapy Course-Lung Cancer

In-Service Education-Lung Cancer 101

Lung Cancer - Preceptorship, January 2006, 2007, JGH

Interdisciplinary workshop for students of various health departments within the Faculty of Medicine.

## **2) Research Activities**

### **Dr. Andrew Hirsch**

Clinical research projects in pulmonary vascular disease including primary pulmonary hypertension, scleroderma associated pulmonary disease and venous thrombo-embolism.

### **Dr. Neil MacDonald**

Relationship of inflammation to chemotherapy response

Impact of CRP on early dropout rate in clinical trials

Relationship of PET intensity to inflammatory markers

### **Dr. David Small**

Co-Investigators: Drs. Jason Agulnik, Andrew Hirsch, Harvey Kreisman, Mark Palayew, Carmela Pepe and Norman Wolkove

**London Regional Cancer Centre XRP6976B/6034** A Phase I Study of Cisplatin/Docetaxel Chemotherapy with Concurrent Thoracic Radiotherapy in Advanced Loco-Regional Non-Small Cell Lung Cancer from the LRCP

CTI (Cell Therapeutic) PPD **PGT305** Paclitaxel Poliglumex (CT-2103) vs. Paclitaxel for the Treatment of Women with Chemotherapy-Naïve Advanced Non-Small Cell Lung Cancer (NSCLC) Who Are Performance Status 2

Novartis Xolair CIGE025A2425, **HERMES**, A randomized, open label, parallel-group, international, multicenter study evaluating persistency of response to omalizumab during 32 weeks treatment given as add on to optimized asthma therapy, in adult and adolescent patients with severe persistent allergic asthma. Who remain inadequately controlled despite GINA (2004) step 4 therapy

Novartis Xolair CIGE025ACA02, **XCEED**, A post-registration evaluation of long term Xolair Therapy on patient-relevant outcomes, medical resource use and asthma medication requirements, in a prospective cohort of asthma patients treated under real world medical practice conditions

Abbott **M05-782** A Phase ½ Study Evaluating the Safety and Efficacy of ABT-751 in Combination with Docetaxel Versus Docetaxel Alone in Subjects with Advanced or Metastatic Non-Small Cell Lung Cancer

Novelos **NOV-002** A Randomized, Open-label, Phase 3 Trial of NOV-002 (Oxidized glutathione based compound) in Combination with Paclitaxel and Carboplatin vs. Paclitaxel and Carboplatin Alone for the Treatment of Advanced Non-Small Cell Lung Cancer

Pharmacyclics **PCYC-0229**. Phase II Trial of Motexafin Gadolinium and Docetaxel for Second Line Treatment of Patients with Advanced Non-Small Cell Lung Cancer

**Functional Capacity:** Study of Exercise Capacity and Functional Status in Patients Receiving Chemotherapy for Advanced Stage 3A, 3B and 4 Non-Small Cell Lung Cancer

Bayer **11961** A Phase III Study Comparing Safety and Efficacy of Carboplatin and Paclitaxel Plus or Minus Nexavar (Sorafenib Tosylate) in First Line Treatment Patient with Stage IIIB-IV Non-Small Cell Lung Cancer(NSCLC) of All Histology

Ortho Biotech **LEAD** A Prospective Study to Evaluate Anemia and Transfusion Requirements in NSCLC Patients with Completely Resected Tumors Undergoing Adjuvant Chemotherapy

**Co-Investigator: Dr. David Small**

Merck **SAHA** A Phase II/III Randomized, Double-Blind Study of Paclitaxel plus Carboplatin in Combination with Vorinostat (MK-0683) or Placebo in Patients with Stage IIIB (with pleural effusion) or Stage IV Non-small-Cell Lung Cancer (NSCLC), 056-01

**Dr. Jason Scott Agulnik**

Roche Canada 2006-07 Project: Use of denaturing high performance liquid chromatography (dHPLC) for detection of epidermal growth factor receptor (EGFR) mutations in patients with non-small cell lung cancer (NSCLC) and clinical correlation.

Astra Zeneca **Zactima 57** A phase III, randomized, Double-Blind, Multi-Center Parallel-Group Study to Assess the Efficacy of ZACTIMA (ZD6474) Versus TARCEVA (Erlotinib) in Patient With Locally Advanced or Metastatic (Stage 3B-4) NSCLC after Failure to at least One Prior Chemotherapy

**Dr. Denny Laporta**

Agency: Canadian Patient Safety Institute, Title: Implementation of a web-entry system for a National ICU Scorecard

**Co-Investigator:**

Canadian multicenter clinical trial, Agency: Canadian Institute for Health Research (CIHR) (peer-reviewed), Title: **PROphylaxis of ThromboEmbolism in Critical Care Trial**

**Dr. Harvey Kreisman**

Co-Investigators: Drs. David Small, Jason Agulnik, Andrew Hirsch, Mark Palayew, Carmela Pepe and Norman Wolkove

Pfizer **A3671015** A Phase 2 Randomized, Non-comparative Study of Ticilimumab or Best supportive care Immediately Following First-LINE, Platinum-Based Therapy in patients with Stage IIIB (with effusion) or Stage IV Non-small Cell Lung Cancer that HAS responded or remained stable.

**Dr. Carmela Pepe**

Ongoing Thesis project « Chemotherapy in Elderly NSCLC Patients : A Quebec Cancer Center Experience”

Awarded CIHR Fellowship award (accepted) and FRSQ Master’s Training Award (declined)

**3) Clinical Activities**

Patients visits (new patients and follow-ups)	9,323
Pulmonary oncology visits	2,937

Laboratory Investigations:	
Pulmonary function tests, Histamine challenge studies, Cardio-pulmonary exercise studies	3,217

Procedures:	
Bronchoscopies	370
Thoracocentesis	91

**4) Academic Staff**

Dr. Carmela Pepe came on staff in the Division of Pulmonary in July 2006. She has expertise in clinical research and the treatment of cancer.

5) **Consulting Activities:** None reported

6) **Honors, Awards and Prizes**

**Dr. Andrew Hirsch**

Awards : Resident Teacher of the Year 2006

**Dr. Carmela Pepe**

ASCO Merit Award (2006)

Novartis Oncology Young Canadian Investigator Award (2006)

CIHR Institute of Aging Fellowship, May 2007 to April 2009

FRSQ Master's Training Award (declined)

7) **Service to Academic Community and other contributions**

**Dr. David Small**

Lung Cancer Preceptorship, April 7, 2006, Montreal

Réunion du Groupe de travail en santé respiratoire(GlaxoSmithKline), 21 avril, 2006, Montreal

Xolair Advisory Board Meeting, May 4, 2006, Toronto

Altana Pharma Regional Consultative Forum IV, May 27, 2006, Ottawa

ASCO Georgia World Congress, June 2 -6, 2006, Atlanta, USA

7th International Lung Cancer Congress, June 26-July 3, 2006, Hawaii, USA

Réunion du Groupe de travail en santé respiratoire, September 29, 2006, Montreal

TORCH Investigator Meeting, October 14, 2006, Vancouver, Canada

AstraZeneca Conseil consultatif régional sur Symbicort, November 10, 2006, Montreal

Eli Lilly Advisory Board Meeting, November 27, 2006, Montreal

**Dr. Jason Scott Agulnik**

16th International Congress on Care of the Terminally Ill, Dyspnea: Management in Cancer and Non-Cancer Terminal Diseases, Montreal, Canada, Sept, 2006

Pulmonary Rounds, Post – ASCO – Lung Cancer, (JGH), McGill University Montreal, Canada, July 2006



McGill Post - ASCO Conference, What's New in Lung Cancer, McGill University, Montreal, Canada, July 2006

Grand Medical Rounds: New Treatment Modalities for Lung Cancer: Adjuvant Therapy, JGH, McGill University, Montreal, Canada, March 2006

Pulmonary Fellows Conference, Interventional Bronchoscopy, MCI – McGill University, Montreal, Canada, March 2006

**Dr. Andrew Hirsch**

Invited Speaker: SSVQ: (Société des sciences vasculaires de Québec), nvestigation/Imagerie de l'embolie pulmonaire, 2006

**Dr. Neil MacDonald**

“Cancer Cachexia: The Argument for Early Palliative Care Intervention”. The 16<sup>th</sup> Annual Ontario Provincial Conference on Palliative and End-of-Life Care. Toronto Ontario. April 23 and 24, 2006.

**Dr. Mark Palayew**

Update on TB Investigation, Presentation at the annual conference, Medical Services Bureau CIC, May 11, 2006, Ottawa

Chest Radiographs with Case Presentations, International Palliative Care Conference September 28, 2006, Montreal

**Dr. Carmela Pepe**

Grand Medical Rounds, JGH, Oct 16, 2006

SIOG conference presenter and session moderator, Nov 3, 2006

Geriatric Oncology Seminar Series presentation, Dec 8, 2006

Pulmonary Rounds, Nov 9, 2006 and Feb 8, 2007

Lung Cancer Awareness Month, Patient Appreciation Reception Speaker, Nov 29, 2006

**Dr. Norman Wolkove**

Effects of Second Hand Smoke, Mt. Sinai Hospital, Montreal, 2006

Lung Cancer Update, 16<sup>th</sup> International Congress on Care of the Terminally Ill, Sept 26-29, 2006, Montreal, Canada

**Goulnar Kasymjanova**

Prognostic Value of Baseline Inflammatory Markers in Inoperable Non-Small Cell Lung Cancer, Pulmonary Research Rounds, November 2006

The Pulmonary Oncology Experience with EGFR-TKI inhibitors, Lung Cancer Perceptorship, January 2007, JGH

**Esther Dajczman RN., M.Sc.A**

Families in Crisis and Interdisciplinary Care Management, Humanization of Care Week, JGH, February 2007

Interdisciplinary Care of Patients with Lung Cancer, Nursing Grand Rounds, November 2006

**Tracy Steinberg, RN, B.ScN**

“Information Seeking Behaviors”, presented twice at Hope and Cope’s Lung Cancer Support Groups

**Nelda Swinton, Pdt. ( Dietitian:)**

**Hope and Cope, JGH, Montreal.** Evening lectures on Nutrition and Breast Cancer given to women with newly diagnosed breast cancer; topics include side effects of chemotherapy, use of phytoestrogens, fat content of diet, alcohol and weight control. April, Oct. 2006. Feb, 2007.

**16<sup>th</sup> International Congress on Care of the Terminally Ill, Montreal.** Assessing and Managing Cancer Cachexia: What’s Up? The role of the dietitian on the CNR team. September,2006.

**McGill University, Department of Dietetics and Human Nutrition.** Macdonald Campus, Ste. Anne de Bellevue. Presentation on the Role of the Dietitian in the CNR, and CAM and Oncology Nutrition. September,2006.

**Department of Physiotherapy, McGill University, Montreal.** Lecture presented to 3<sup>rd</sup> year physiotherapy students on the Oncology Dietitian’s Role and Nutritional Intervention in the Cancer Nutrition Rehabilitation Program. October, 2006.

**McGill University, Department of Graduate Studies, Department of Dietetics and Human Nutrition.** Macdonald Campus. Ste. Anne de Bellevue. Using the PG-SGA’s nutritional triage and cut off scores help identify advanced lung cancer patients in need of nutritional intervention. Master’s Proposal. December, 2006

**JGH. Luttre Contre le Cancer.** Presentation to CSSS and various luttre contre le cancer teams on the role of the CNR in the Department of Pulmonary Diseases and the Department of Oncology. December,2006.

**Hope and Cope, Jewish General Hospital, Wellness Center** Montreal. Lung Cancer Support Group. General Lecture to lung cancer patients and their families about nutrition. February, 2007

## 8) Publications

--S. L. Faria, L. Souhami, L. Portelance, M. Duclos, T. Vuong, **D. Small**, C. R. Freeman. Absence of toxicity with hypofractionated 3-dimensional radiation therapy for inoperable, early stage non-small cell lung cancer. *Rad Oncol.* 2006;1:42 1748-1754

--**G Kasymjanova, H Kreisman, JA Correa, E Dajczman, D Small.** Does Granulocyte Colony Stimulating Factor (G-CSF) Affect Survival in Patients with Advanced Non Small Cell Lung Cancer? *J Thorac Oncol.* 2006;1: 564-570

--**Cohen V, Agulnik JS,** Jarry J, Batist G, **Small D, Kreisman H,** Adriana Tejada N, Miller WH Jr, Chong G. Evaluation of denaturing high-performance liquid chromatography as a rapid detection method for identification of epidermal growth factor receptor mutations in non-small cell lung cancer. *Cancer.* 2006 Dec 15; 107(12):2858-65.

--**S Néron, E Dajczman, G Kasymjanova, H Kreisman, D Small.** Screening for Depressive Symptoms in Patients with Unresectable Lung Cancer" *J Sup Care Cance,* January 2007. JSCC-06-0244.

--Nguyen A., Baltzan M., **Small D., Wolkove N.,** Guillon S., **Palayew M.** Clinical Reproducibility of the Epworth Sleepiness Scale. *Journal of Clinical Sleep Medicine* 2006 2(2) 170-74.

--Baltzan M., Kassissia I, Elkholi O, **Palayew M,** et al. Prevalence of Persistent Sleep Apnea in Patients Treated with Continuous Positive Airway Pressure. *Sleep* 2006 29(4) 557-63.

--Ellen R., Marshall S., **Palayew M.,** et al. Systemic Review of Motor Vehicle Crash Risk in Persons with Sleep Apnea. *Journal of Clinical Sleep Medicine* 2006 2:193-200.

--Aaron SD, Vandemheen KL, FitzGerald M; **Canadian Thoracic Society/Canadian Respiratory Clinical Research Consortium.** Tiotropium in combination with placebo, salmeterol, or fluticasone-salmeterol for treatment of chronic obstructive pulmonary disease: a randomized trial. *Ann Intern Med.* 2007 Apr 17;146(8):545-55.

--Langleben D, Dupuis J, Langleben I, **Hirsch AM,** Baron M, Senecal JL, Giovinazzo M. Etiology-specific endothelin-1 clearance in human precapillary pulmonary hypertension. *Chest.* 2006 Mar;129(3):689-95.

--**Pepe C**, Hasan B, Winton TL, Seymour L, Graham B, Livingston RB, Johnson DH, Rigas JR, Ding K, Shepherd FA; National Cancer Institute of Canada and Intergroup Study JBR.10. Adjuvant vinorelbine and cisplatin in elderly patients: National Cancer Institute of Canada and Intergroup Study JBR.10. J Clin Oncol. 2007 25(12):1553-61.

### **Book Chapters:**

--Alimentation/hydration. Chasen M and MacDonald N. In: ESMO Handbook of Advanced Cancer Care. Catane R, Cherny NI, Kloke M, Tanneberger S and Schrijvers D (eds). Oxford: Taylor & Francis 2006: 71-79.

--The Development of Palliative Care in Canada. MacDonald N. In: Palliative Medicine. Bruera E, Higginson I, Ripamonti C and von Gunten C. (eds). London: Hodder Arnold Publishers. 2006: 22-29.

### **Abstracts:**

--Sergio L. Faria, **D. Small** et al. Pre and Post-treatment PET/CT to Evaluate the Response of Non-Small Cell Lung Cancer (NSCLC) Treated with Curative Radiotherapy Alone (RT) ESTRO May 2006

--D. Levy, V. Tagalakis, MD MSc, **V. Cohen, MD3, J. Agulnik, MD, G. Kasymjanova and D. Small, MD**. The Risk of Deep Vein Thrombosis in Lung Cancer Patients. ATS 2006 · San Diego International Conference. Abstract: 951207

--V. Tagalakis, **D. Small** et al. Determining Incidence and Predictors of Deep Vein Thrombosis in Patients with Non-small Cell Lung Cancer, ATS 2006 San Diego International Conference, Abstract #4676

--V Tagalakis, D Levy, **J Agulnik, V Cohen, G Kasymjanova, D Small**. High risk of deep vein thrombosis in patients with non-small cell lung cancer: a cohort study of 493 patients. JCO, 2006 ASCO Annual Meeting Proceedings, June 2006; 5(18S0, p.403

--**A. M. Hirsch**, S. R. Kahn, et al. **PEDS** (Pulmonary Embolism Diagnosis Study) : A Randomized Controlled Trial of CT Pulmonary Angiography and V/Q Scanning in Patients with Suspected Pulmonary Embolism. ATS 2006 San Diego International Conference

--L. Srour, C.A. Greenaway, P. Plaisir and **M. Palayew**. Completion of Isoniazid Therapy for Treatment of Latent TB Infection. Poster presentation at ATS. May 2006, San Diego international Conference

--D. Levy, V Tagalakis, V. Cohen, **J. Agulnik, G. Kasymjanova, D. Small**. The Risk of Deep Vein Thrombosis in Lung Cancer Patients. ATS 2006, San Diego International Conference. Abstract: 951207

--**N MacDonald, G Kasymjanova, S Dobson, H Kreisman, V Cohen, JS Agulnik, D Small.** Prognostic value of baseline inflammatory markers in inoperable non-small cell lung cancer. Meeting: 2006 ASCO Annual Meeting Abstract No: 17035

--**Agulnik JS,** Cohen V, Jerry J, Batist G, **Small D, Kreisman H,** Tejada A, Chong G, Miller WH Jr. Use of dHPLC for Detection of EGFR Mutations in Patients with NSCLC. Abstract 10068. ASCO 2006, Atlanta.

--MA Dalzell, **H Kreisman, S Dobson, G Kasymjanova, E Roudaia, JS Agulnik, D Small, N MacDonald.** Exercise in patients with advanced non-small cell lung cancer (NSCLC): compliance and population characteristics of patients referred to the McGill Cancer Nutrition-Rehabilitation Program (CNRP). Meeting: 2006 ASCO Annual Meeting Abstract No: 8631

--**Swanson T,** Dalzell MA, **Small D, Kreisman H, MacDonald N,** St-Pierre DMM. Physiological correlation of cancer fatigue in advanced non-small cell lung cancer (NSCLC) patients. Abstract #8525. ASCO 2006

--**C. Pepe,** B. Hasan et al. Adjuvant chemotherapy in elderly patients: an analysis of National Cancer Institute of Canada Clinical Trials Group and Intergroup BR.10. Abstract 7009, ASCO 2006, Oral Abstract Presentation

--D. Levy, V Tagalakis, V. Cohen, **J. Agulnik, G. Kasymjanova, D. Small,** Determining incidence and predictors of vein thrombosis in patients with non-small cell lung cancer. Meeting: 2006 ASCO Annual Meeting Abstract No: 7159

--Langleben D, Dupuis J, Langleben I, **Hirsch AM,** Baron M, Senécal JL, Giovinazzo M. Etiology-specific endothelin-1 clearance in human precapillary pulmonary hypertension. Chest. 2006 Mar; 129(3): 689-95

--Afilalo M., Lang E., Tselios C, Guttman AI, Colacone A., Kahn SR, **Hirsch A,** Xue X, Pleasance S, Anderson D. Length of Stay Considerations when Selecting an Imaging Strategy for High-Risk Patients with Suspected PE: An analysis of the PEDS study. Oral presentation Annual Meeting Society for Emergency Medicine, May 6, San Francisco, USA

--Aaron SD, Vandemheen KL, **Hirsch A,** et al. Tiotropium in combination with placebo, salmeterol, or fluticasone-salmeterol for treatment of chronic obstructive pulmonary disease: a randomized trial. Ann. Internal Medicine 2007 April 17;146(8): 545-55

--What in the Nocturnal Continuous Positive Airway Pressure (CPAP) Polysomnographic Titrations Leads to Persistent Sleep Apnea on CPAP? Baltzan, M, **Wolkove, N,** Kassissia, I, **Palayew, M.** Presented at the Annual Meeting of the American Thoracic Society, San Diego, California, May 2006

--Polysomnographic Characterization of Mouth Leak Events in Patients Treated with Nasal Continuous Positive Airway Pressure. Garcia-Asensi A, Baltzan MA, Sully J, Tanzimut G, Kassissia I, **Wolkove N**. Presented at the Association des Pneumologues de la Province de Quebec: Reseau En Santé Respiratoire du FRSQ Quebec City, December

--**Swinton N, Chasen M, MacDonald N**. Cancer Cachexia. Simple nutritional screening in clinical practice. *Oncology Exchange* October 2006; 5 (4): 34-37

### **III. Objectives and Priorities:**

Overall this has been an extremely successful year for the Pulmonary Division. Our clinical and research activities have increased and continue to increase at an extremely productive rate. We look forward to continued collaboration with the Divisions of Cardiology, Internal Medicine, Haematology, Oncology and Mt. Sinai Hospital.

We are excited by the addition of Dr. Carmela Pepe. Dr. Pepe is currently completing her Masters in Epidemiology and Biostatistics and conducting research in lung cancer in geriatric patients.

Currently too many positions are being funded by donations and some of these must be picked up by the hospital budget if we are to maintain the quality of our programs and continue our successful clinical research programs.

Respectfully submitted,

David Small, MD, FRCPC  
Chief, Pulmonary Division