80 Jewish General Hospital

# JGH News

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## THE NEW "NEW THING"

## NEW EXECUTIVE DIRECTOR

## NEW EMERGENCY DEPARTMENT

## NEW MOLECULAR PATHOLOGY CENTRE

Dr. Lawrence Rosenberg, Executive Director

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# Nursing: My guiding light

Joanne Côté

When I was 16, I wondered whether I would become a nurse or an accountant. Interestingly, not only am I a nurse today, but I manage a budget of several million dollars.

Back then, I didn't know that my professional journey would require determination and perseverance, which have been among the guiding principles of my life. Before beginning my nursing studies, I had an opportunity to work as an orderly in a long-term care facility, where I realized I wanted to help people. Why? Pure instinct! I loved the elderly patients, whose existence was often difficult and lonely, and I realized I could make a difference in their lives. Coming into close contact with them allowed me to get to know myself better and to grow as a person.

The route ahead was anything but straightforward: at 17, my self-esteem was shaken by an advisor who told me I was not intelligent enough for university. More determined than ever, I did become a nurse! I achieved my goal in the 1980s which, unfortunately, was a time of budgetary cutbacks, when permanent positions were extremely hard to come by. I was lucky to join the Jewish General Hospital in June 1981 and was assigned to a medical ward. And what a road I've travelled since then!

It was my good fortune to have supportive mentors, the first of whom strongly recommended that I return to my studies. At the time, I was happy at the bedside, where I felt I could impact the lives of the most vulnerable patients. After some thought, I decided to upgrade my education, despite occasional interruptions for pregnancies, transfers and the like. Without my husband's support, I would never have crossed the finish line. But three children later, and after a move to Ottawa for my husband's career, I returned to the Montreal area, where I finally earned my Bachelor's degree in 1999, my self-esteem restored.

Opportunities soon came my way: assistant head nurse, head nurse, nursing coordinator—always the same passion, except that it was no longer a question only of helping patients, but of supporting the team members whom I supervised. My ultimate goals were always to deliver care of superior quality, while offering services that met patients' needs. That meant paying close attention to people, whether they were patients or employees. I always enjoyed my work!

Then one day, I arrived at another crossroads and, against all expectations, made the leap to a new adventure: participating in the development of Pavilion K, the JGH's new critical-care wing, where an improved Emergency Department has just been launched. Was I ready? Difficult to say. Nothing can prepare you for the journey of a lifetime. My role in Pavilion K goes beyond what I learned in my 30-year career, but it makes use of knowledge and skills from my time as an orderly, bedside nurse and manager. It facilitated my involvement with Pavilion K's teams, as I supported them in defining their needs and developing the architectural plans. I realized that my winding professional road was actually an apprenticeship for what was to come. Every piece of the puzzle was falling into place.

So, have I strayed from nursing? Hardly! Participating in developing a new pavilion is a privilege, where nursing makes complete sense. Florence Nightingale, the founder of modern nursing, is still on hand, and the same principles apply—listening carefully to people and teams, building on their strengths and helping them to reach their goals. The only difference is my tool kit, which now includes work organization, change management and project management. I'm called upon to focus on the future, so that the teams will be ready for their new environment.

I always have been and still am passionate about nursing. Would I have chosen anything else? Never! I firmly believe that a nurse can make a real difference in people's lives, often through small, everyday gestures. Nursing has no limits, only opportunities, as long as you consistently believe in yourself, are willing to listen and are prepared to dare. It makes me truly proud to declare: I'm a nurse!

Joanne Côté, B.Sc. CCNC (C)
*Director of Transition, Pavilion K*

# Embarking on a new healthcare "adventure"

## Dr. Lawrence Rosenberg reflects on his appointment as Executive Director of the Jewish General Hospital

**Whether recalling his earliest days as a surgeon or reflecting on his recent appointment as Executive Director of the JGH, Dr. Lawrence Rosenberg carefully chooses a single significant word to express his feelings about the milestones of his career: "adventure".**

It was "adventure"—an eagerness to help patients by challenging the unknown—that first piqued his interest in surgery mere weeks after entering medical school at McGill University. "It became clear to me that if I really wanted to do something meaningful in medicine, being a surgeon was the way to go," Dr. Rosenberg says during a wide-ranging conversation about his background and his new position, which he has officially held since mid-November.

"I was especially drawn to emergency general surgery, because every case felt like an adventure and you never really knew what you were going to find. The choice of general surgery was a gut feeling and I follow my gut, because it's usually right."

That same word—and the enthusiasm behind it—pops up again as Dr. Rosenberg discusses his latest role. To an outsider, heading one of Canada's largest and most renowned teaching hospitals might seem like a task fraught with headaches and difficulties. While Dr. Rosenberg acknowledges the complexity of his responsibilities, he hastens to add, "Every day is a new adventure. And that's a good thing, because I don't like to think I'm on an assembly line doing the same thing, day in, day out.

"So far, it's been an exhilarating experience. As long and as busy as the days are, I continue to be excited by working with so many talented people, so that patients benefit from what we all accomplish together."

On a personal level, Dr. Rosenberg feels pride in his professional achievements, having come from what he calls "rather modest beginnings" in Montreal. Economic necessity forced his parents to end their formal education after completing high school—his father becoming a textile salesman, and his mother a homemaker. That made young Lawrence the first person in his immediate family to attend university. "Medicine was a natural fit," he notes, "because I was imbued at an early age with traditional Jewish values in terms of service to the community and social responsibility."

*"So far, it's been an exhilarating experience. As long and as busy as the days are, I continue to be excited by working with so many talented people, so that patients benefit from what we all accomplish together."*

It also led to a Master's degree and a doctorate in experimental surgery from McGill, followed by post-doctoral studies and a surgical fellowship in transplantation at the University of Michigan. Armed with this expertise, Dr. Rosenberg became Director of the Multi-Organ Transplant Program at the Montreal General Hospital, inaugurating McGill's Pancreas Transplant Program and leading the team that performed the first successful liver transplant at McGill. He remains the only Canadian to have received the prestigious American Surgical Association Foundation Fellowship.

Since transplantation is not practiced at the JGH, Dr. Rosenberg has not been active in this field since joining the hospital as Chief of Surgical Services in 2007. Nevertheless, he says, "In hindsight, it was a very useful experience, because there isn't anything in medicine that's more systems-related than a transplant program. It gave me a particular perspective on how various elements need to fit together to work efficiently for the patient.

"Transplantation is also a very multi-disciplinary specialty, and you have to be really good at working in a team, where trust, respect and integrity are all essential. That translates more broadly into how one works within groups in the hospital."

In addition, Dr. Rosenberg's growing interest in systems and organizations—later to be a necessity as Executive Director—motivated him to take the somewhat unconventional step of enrolling at the University of Waterloo from 2004 to 2006, where he earned a Master of Engineering degree, which at the time was the equivalent of an MBA for scientists and engineers.

"I was interested in learning more about how systems work and how they don't work, and then perhaps to learn how to make them better in a healthcare context," he explains. "It certainly gave me a good understanding of the fundamentals of entrepreneurship, accounting, IT and knowledge management, as well as the tools to deal with the kinds of situations that I'm dealing with now."

As JGH Chief of Surgical Services, Dr. Rosenberg was instrumental in launching initiatives for upgrading the quality of surgical treatment (for instance, Quebec's first use of the Surgical Safety Checklist and the American College of Surgeons' National Surgical Quality Improvement Program) and deploying medical resources more efficiently (an award-winning program in which JGH surgeons operate on certain JGH patients in the under-used facilities of another hospital).

Starting in 2009, he also oversaw the crucial development of Transformational Change, an intensive, multi-year program that has gone on to improve the quality of care, streamline patient services, boost efficiency and cut costs in clinical and non-clinical areas.

Today, despite his heavy workload as Executive Director, Dr. Rosenberg continues his involvement in Transformational Change; he also plans to stay in touch by visiting every part of the hospital at least once or twice a year. On the surgical side, he intends to keep his skills sharp by being on call for general surgery two nights a month, returning to his passion of emergency surgery.

On the whole, though, Dr. Rosenberg will be spending more time behind a desk, rather than having hands-on contact with patients. Even so, as Executive Director, he feels he can "help the hospital provide an exceptional patient experience by virtue of what we do and how we do it—and what we don't do, which is probably equally important."

To ensure that patients get the best that the JGH can offer, Dr. Rosenberg wants to see the hospital evolve from a volume-based into a more value-based organization, with certain procedures and services provided more efficiently and cheaply outside the JGH by CSSSs, general practitioners or nurse practitioners. This entails supporting and encouraging a move from hospital-based care to community-based care—for example, better management of the needs of the elderly beyond a hospital setting. Also high on the list of priorities is making the hospital and its staff even more patient-centred, with care provided where, when and how patients want it.

What reassures Dr. Rosenberg about the future is the legacy and history of the JGH, especially its proven ability to cope with economic constraints, the demands of new medical technology and the changing needs of patients. "It's such an extraordinary institution. The culture of inclusiveness and tolerance is incredible. The sense of responsibility that everybody has for doing the best possible job is amazing.

"That's not to say we can't be better; we can always strive to be better. It makes me think of a quote from Vince Lombardi, the celebrated football coach: 'Perfection is not attainable, but if we chase perfection, we can catch excellence.'"


JGHTV

**Now there's another way for the JGH to come alive! Tune in to JGH TV for informative and entertaining video news on such topics as robot-assisted surgery, readiness for emergencies, and Dr. Clown. It's yours to enjoy at jgh.ca/jghtv.**

## JGH brief criticizes Bill 60 as an affront to civil rights

In a brief to the Quebec National Assembly, the Jewish General Hospital has reaffirmed its opposition to Bill 60—which seeks to ban overt religious clothing and symbols worn by employees in hospitals and other public-sector institutions—as an affront to universal civil rights and values.

In the 45-page brief (available at **jgh.ca/bill60**) which was submitted in December, the JGH says it strongly opposes the bill, whose measures are profoundly discriminatory and deeply insulting. Similarly, the JGH rejects the government's premise that restrictions on certain types of clothing are necessary in order to reassure patients that healthcare services are being provided in a non-discriminatory manner.

"As long as health care is delivered with professional competence, courtesy and respect, no legislation should be permitted to override the freedoms of religion or expression that are guaranteed by the Quebec Charter of Human Rights and Freedoms, the Canadian Charter of Rights and Freedoms, and the United Nations' Universal Declaration of Human Rights," said Dr. Lawrence Rosenberg, JGH Executive Director.

For 80 years the JGH has upheld these universal rights and prided itself on the fact that its staff—from a wide diversity of faiths, some of whom wear conspicuous religious symbols—has provided care of superior quality to Quebecers of all backgrounds. As such, the JGH believes that Bill 60 is attempting to reverse decades of achievement in which all Quebecers take pride—namely, a society where the rights of minorities are honoured and protected at all times and in all circumstances.

Therefore, the hospital says in its brief that its Board of Directors can not in good conscience implement a policy that conforms to the requirements of the proposed legislation. Rather, the JGH, in partnership with other like-minded institutions, would mount a legal challenge to the bill's implementation.

## Office of Patient Experience will further enhance care

An Office of Patient Experience is being planned at the JGH, Executive Director Dr. Lawrence Rosenberg announced in December. The goal is to develop an exceptional patient experience, in which staff pay especially thoughtful attention to every step of an individual's treatment and care.

Introduced at the Cleveland Clinic in the U.S., the concept is being researched to determine how it can best be designed to suit the particular needs of JGH patients and integrated into the hospital's management structure.

This move fits squarely into the the JGH's tradition of placing the highest priority on safety, the quality of care and the compassionate, dignified and respectful treatment of patients. It is also aligned with the goals of the Transformational Change program, which has been led by Dr. Rosenberg since 2009.

The Office of Patient Experience will satisfy Transformational Change's objectives of integrating clinical services to enhance the continuity of care, and of increasing efficiency in organizing patient services. In addition, it will address such areas as access to care and the engagement of patients and families in their treatment.

"First, we are looking at the patient's trajectory through the hospital," says Alan Maislin, Chair of the JGH Users' Committee. "Then we want to identify improvements that can be introduced to make patients' experiences more comfortable and alleviate some of the anxiety and stress that they may feel." Based on internal research, a plan will be submitted, leading to implementation.

"We are going to prioritize our goals and then build a realistic and achievable timeline," says Rosalie Johnson, Coordinator of the Nursing Resource Centre and Co-Chair of the JGH Humanization of Care Committee. "We want to make sure that, once implemented, this Office significantly enhances the value of services to our patients."

With Transformational Change continuing indefinitely, the JGH Foundation is seeking an imaginative and generous donor to support and empower this program. For more information, please call the JGH Foundation at 514-340-8222 ext. 3252.

## JGH named a top employer – again!

For the second year in a row, the Jewish General Hospital has been named one of Montreal's top employers in Mediacorps Canada's annual competition, organized by the editors of *Canada's Top 100 Employers.*

Among the reasons that the JGH was chosen are its maternity and parental leave top-up payments for new mothers and fathers (including adoptive parents); assistance to employees in achieving work-life balance through various alternative work arrangements; four weeks' paid vacation for new full-time employees; and contributions to a defined benefit pension plan.

The competition, which involves rigorous comparisons to other organizations in their respective fields, focuses on eight key areas: physical workplace; work and social atmosphere; health, financial and family benefits; vacation and time off; employee communications; performance management; training and skills development; and community involvement.

"The Jewish General Hospital is delighted and honoured, yet again, to be named one of Montreal's top employers," says Dr. Lawrence Rosenberg, JGH Executive Director. "In viewing the JGH as an especially satisfying and welcoming place to work, staff are able to better care for their patients and to enhance the hospital's partnerships across Quebec to strengthen the healthcare system. As has always been the case, we will continue to find new ways of keeping staff satisfaction levels rising."

Hospital President Rick Dubrovsky added that the award "acknowledges the JGH's desire and dedication to taking good care of its employees and the innovative approaches it puts into place in order to attract and retain the brightest and best in the city."

"This competition speaks volumes about the JGH's commitment to its staff, in that they are provided with a healthy, supportive, and productive work environment," says Beverly Kravitz, JGH Director of Human Resources and Legal Affairs. "The JGH undertakes numerous initiatives focused directly on employees' well-being and this award is in recognition of these efforts and will hopefully serve as a beacon to those looking to work in the healthcare industry."

# JGH to play collaborative role in mental health research

The creation of the Ludmer Centre for Neuroinformatics and Mental Health was announced by Irving Ludmer (seated) and (from left) Freema Ludmer; Myer Bick, President and CEO of the JGH Foundation; Lynne McVey; Dr. Michael Meaney, Scientific Director of the Ludmer Centre for Neuroinformatics; and Dr. Hartley Stern.

A $4.5 million donation from the Irving Ludmer Family Foundation has been pledged toward the creation of a new mental health research centre, in which the Jewish General Hospital will play a signficant role. The JGH will collaborate with the Douglas Mental Health University Institute and other institutions in Montreal and around the world. The impetus for its creation was Mr. Ludmer's strong belief in the importance of this research.

At the Ludmer Centre for Neuroinformatics and Mental Health, whose development was announced last September, researchers hope to learn, for example, how the development and risk of mental illness in a child's brain are affected by the way genes interact with favourable and unfavourable environments. Scientists also want to know why some children are adversely affected by high-risk environments, while others are more resilient.

To answer these questions, the Centre will use an innovative and unprecedented multidisciplinary approach that incorporates such areas as neuroscience, computational biology, mathematics, genetics, epigenetics, bioinformatics, epidemiology and computer science. The Centre will also analyze and process complex amounts of data from research projects around the world.

"This collaborative approach has the capacity to transform the way we think about mental health," said Dr. Hartley S. Stern, who delivered his remarks before stepping down as JGH Executive Director last fall. Lynne McVey, Executive Director of the Douglas, called the announcement "historic", since the donation from the Irving Ludmer Family Foundation "represents true hope for preventing mental illness. In the end, the lives of thousands of children, teens and adults around the world—and the lives of their families—will be spared from the devastation of mental illness."

To support the Centre, the JGH Foundation and the Douglas Mental Health University Institute Foundation have each agreed to contribute a total of $1 million dollars over four years. Thus, donors have an exceptional opportunity to help lead and shape the future of mental illness prevention, care and research. For more information or to make a donation, please call the JGH Foundation at 514-340-8222, extension 3252.

# JGH's advice sought on digital technology

As a national leader in real-time, 3D echocardiography, the JGH has become a focal point for education in cutting-edge, non-invasive cardiac imaging. This technology enables cardiologists to provide more accurate diagnoses and better guidance for heart surgeons by depicting heart structures in views that were not previously possible with traditional 2D echocardiography. Among the visitors last fall was a five-member delegation from the University of Toronto's Mount Sinai Hospital, headed by Dr. Zion Sasson (left), Director of Echocardiography. Conducting one of the demonstrations were Harvard-trained Dr. Igal Sebag, Fellowship Director and Associate Director of Echocardiography at the JGH, and Chief JGH Sonographer Marie-Josée Blais. Dr. Sebag says that while many hospitals now have this equipment, they often turn to the JGH for training in conducting these advanced studies for day-to-day applications.

# Living proof of insulin's power

Mervyn Mendelson, who has used insulin for more than 50 years, receives a commemorative print from Joyce Arsenault (left), JGH nurse and Certified Diabetes Instructor, and JGH endocrinologist Dr. Tina Kader. Mr. Mendelsohn was among 10 individuals who were recognized at a hospital ceremony on Nov. 14 (World Diabetes Day) for having been on insulin for more than half a century—and in some instances, for more than 60 years. Each received a framed print, provided by Novo Nordisk Canada, showing the London, Ont., museum dedicated to Sir Frederick Banting, the co-discoverer of insulin. This was the first such ceremony at the JGH, which Ms. Arsenault called "a celebration of resiliency and self-care."

## Visitors of note

In working with all levels of government to strengthen the public healthcare system, JGH leaders regularly meet with political visitors from across Quebec and Canada. Because of the wide social repercussions of health care, the visits often involve a broad cross-section of dignitaries, especially those at the provincial level, which has primary responsibility for health care.

Jean-François Lisée (right), Minister of International Relations, was welcomed by Dr. Hartley Stern shortly before he stepped down as JGH Executive Director.

During his mayoral campaign Denis Coderre, toured the JGH construction site for Pavilion K.

## *JGH News* turns 50…sort of

As the JGH marks its 80th anniversary this year, another milestone has also been reached: With this issue, *JGH News* begins its 50th volume. However, the publication has actually been around for more than half a century. The first issue of *Your Hospital* magazine appeared in 1959. It was renamed *News* after a 1963 redesign, and then *JGH News* in 1965.

What does it all mean? Just this: More than five decades after the first issue rolled off the presses, the landmark 50th volume of *JGH News* will once again be your prime source of in-depth coverage about the milestones and personalities that make the JGH a healthcare leader.

## Nursing graduates bring JGH's heritage to life

The JGH School of Nursing closed more than 40 years ago, but its spirit lives on in its graduates, many of whom gathered for a reunion in the hospital last fall. The alumnae also used the event, organized by graduate Mimi Goldenberg, to make a generous donation to nursing education. The JGH school was launched in 1951, but closed in 1972—along with similar schools in other hospitals—after Quebec standardized nursing education. Although the JGH's school was the first in Canada in a hospital with a Jewish heritage, it admitted students of all backgrounds. Its dormitories, lecture hall, laboratories, lounges and other facilities were located in what is now Pavilion A, built especially to house the School of Nursing.

# Don't overlook distributions

Investors, whether thoroughly versed or entirely inexperienced, often have a simplistic tendency to evaluate the performance of their individual security holdings by merely comparing present market value against past purchase cost. By altogether disregarding the less marked effect that cash dividends, interest payments, special distributions, and other disbursements have on supplementing the price return, an incomplete representation of performance can result in dissatisfaction with many income paying products that would be regarded far more favourably if appropriately considered in the context of total return.

Distributions, mainly accrued in the form of cash deposits, are commonly used as a source of income and withdrawn to fund personal spending, or used as the capital to make new investment purchases. Income is rarely left to accumulate untouched as cash in an account, making their weight easily undervalued when statements are given a quick glace. Be sure to always consider total return when reviewing the securities in your investment portfolio. Some positions that appear to have incurred little to no gain over time, may have properly met return expectations. This may all seem quite obvious as written here, but in practice is often overlooked.

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## To promote better health care, patients are urged to...

# SpeakUp!

**As a patient, it's your right and responsibility to speak up if you have questions or concerns about your medical treatment or care. To help make your healthcare experience the best it can be, the Jewish General Hospital has launched a Speak Up! campaign.**

**Why and how should you Speak Up? Find out more at a free public presentation by Bernie Weinstein, a JGH community representative, at 1:00 p.m. on April 29 at the Cummings Jewish Centre for Seniors, 5700 Westbury Ave.**

**If you would like Mr. Weinstein to bring his Speak Up! presentation to your organization or community group, please contact him at bweinstein@jgh.mcgill.ca.**

# A giant step forward for the Emergency Department

**After years of intensive and meticulous planning, the Emergency Department is up and running in its new home in Pavilion K. Just before sunrise on Sunday, February 16, the last major step was taken when the old facility was closed and its final five patients were moved by stretcher into their new quarters.**

**"If you want to create a group with a strong sense of collective identity, get them to build something together, and that's what we've done," Dr. Lawrence Rosenberg, JGH Executive Director, told a gathering of the departments participating in the move in the Atrium, minutes before the patients were moved.**

**"We are the staff of the JGH, the inheritors of a proud tradition of care for all, and today we take up the torch once again to extend that legacy into the future. Let us do so with pride, with confidence and with the knowledge that this is definitely a job well done!"**

Around 5:00 a.m. on Feb. 16, members of the Emergency Department gather in the registration area of the old facility, before preparing to move patients to Pavilion K.

The countdown to the move continues for Cathy Douglas, a Radiology Technologist, and Dr. Bernard Unger, Associate Director of the Emergency Department.

Altogether, five stretcher patients are moved to the new Emergency Department, the last one arriving at 6:45 a.m. Total transport time for all patients: 12 minutes.

↑ At 6:30 a.m., Jacqueline Revah is the first patient to be transported out of the old Emergency Department, through a link to Pavilion K.

Jacqueline Revah arrives in Pavilion K, becoming the first stretcher patient in the new Emergency Department. →

Staff in the Emergency Department are in high spirits as the time for the move approaches.

Volunteers are on hand to assist newcomers to Pavilion K.

The excitement of completing the move to Pavilion K is felt by Johanne Boileau, Director of Nursing, and Dr. Stephen Rosenthal, Director of Information Technology and an Emergency physician.

↑ Back in the old Emergency Department, Information Technology staff disconnect and prepare to transport digital equipment

← Although patients begin to receive care in Pavilion K on Feb. 16, some medical equipment still needs to be cleaned and transported before being pressed into service.

Joanne Côté, Director of Transition, is delighted with the move.

Gone are the folders of medical records from the racks in the old Emergency Department. In the new facility, paper documents are being replaced with their digital equivalents.

By 8:00 a.m., everyone has left the old Emergency Department, except for IT staff. They work in the central hub, surrounded by deserted corridors.

# A helping hand for a moving experience

Long before the JGH Emergency Department (one of Quebec's busiest) entered its new home on February 16, it was clear that the move would be no small feat. That's why Health Care Relocations (HCR) was hired in April 2013 to assist in making the jump to Pavilion K.

HCR has racked up considerable expertise, having moved more than 300 hospitals around the world, including the Ronald Reagan UCLA Medical Center in Los Angeles, the Gold Coast University Hospital in Queensland, Australia, and Sick Kids in Toronto.

Accomplishing such a major transition means looking at the move from every angle and making provision for the varied needs of patients and staff, training, orientation, packing and the logistics on the day of the move.

In providing specialized packing equipment, such as trolleys and packing crates, HCR ensures that each item to be moved is treated with care. For instance, something as simple as a computer keyboard must be cleaned, packed in a plastic HCR bag, tagged with its new location and then loaded onto one of the trolleys. The same care is provided for all items being moved, whether it's a patient stretcher or an office chair.

Now that the move is done, Health Care Relocations will continue to work with the JGH, which has begun planning for the relocation of the critical-care units to the tower of Pavilion K in 2015.

Dr. Réjean Hébert (left), Minister of Health and Social Services and of Aging, tours the new Emergency Department at its official launch on Feb. 4, accompanied by (from left) Dr. Marc Afilalo, JGH Chief of Emergency Medicine, Dr. Stephen Rosenthal, Director of Information Services, and Valerie Schneidman, Head Nurse in Emergency.

# Just go with the (patient) flow

**The moment you step into the new Emergency Department in Pavilion K, the changes are apparent: there's an atmosphere of brightness and spaciousness, as well as an air of cleanliness that complements the superior quality of emergency care that patients have come to expect at the JGH.**

However, the facility also incorporates many substantial improvements that may not be obvious at first glance. One of the most significant is the streamlining of patient flow—in other words, categorizing patients more effectively by the type and severity of their illnesses, so that the appropriate treatment can be provided more promptly and efficiently. The ultimate objective is to have patients assigned to a hospital bed more quickly or, if their problems are relatively minor, to be seen and discharged more rapidly.

**The basic concept:** Patients are initially assessed as being "vertical" or "horizontal"—that is, able to get around on their own, or ill enough to have to lie down on a stretcher. This evaluation is made by a Quick-Look Greeter, a nurse who is the first point of contact for all patients at the front door of the Emergency Department.

Those whose condition is serious are triaged and taken by stretcher to one of the three pods. Patients with less serious problems are directed to the Rapid Assessment Zone or to the Blue Unit. Every effort is made to avoid bottlenecks and delays.

**Triage and registration:** Stretcher patients are triaged to determine the nature and severity of their illness. Then a registration clerk promptly prepares the patient's chart, while ensuring that the patient has an accurate identification bracelet. Next, the patient is quickly taken to a room in one of the pods to be seen by an emergency healthcare team.

**Resuscitation:** In some instances, a stretcher patient's condition may be so severe that immediate treatment must be administered in one of the five resuscitation rooms or in the procedural room—all located near the triage area, the ambulance bay and the three pods. Activity is monitored at a central work station, which has a view of all of the rooms.

**Pods:** Depending on their condition, patients on stretchers are taken to one of three colour-coded pods—green, yellow or orange. A pod is a large treatment unit where staff confer and use computer terminals in a central administrative area that is ringed by patients' rooms. Visitors enter the patients' rooms from

an exterior hallway and do not set foot in the staff's administrative zone.

In each pod, certain patients may need to be placed in one of two types of room whose air pressure and flow are specially regulated. The first is a negative-pressure room, in which outside air is sucked into the room and ventilated to where it can be disinfected. Patients with airborne contagious illnesses use this type of room, because the air is removed before it can be breathed by any unprotected person. (Healthcare personnel in this room are gowned, masked and gloved.)

The other type of room is a positive-pressure room, in which the pressure is carefully regulated and the air flows out of the room. Maintaining stable pressure is necessary for patients with certain lung and heart ailments. And since the air flows outwards, the air current acts as a buffer to protect patients whose immune systems are compromised.

The green pod has 19 patients' rooms, including:

- two for psychiatric patients (if the need exists), with a special locking feature
- two with negative pressure
- three with positive pressure

The yellow pod has 16 patients' rooms, including eight with negative pressure.

The orange pod has 17 patients' rooms, including:

- four for psychiatric patients
- one with negative pressure

**The Rapid Assessment Zone:** Previously, some patients with particular medical conditions—for instance, troubling but not dangerous symptoms of a chronic illness—would have been assigned a stretcher in order to receive treatment. In the new Emergency Department, they are first seen in a private examination room and then treated in one of 20 padded reclining chairs, each in its own cubicle. Patients awaiting treatment (and their family members) sit in one of the adjacent lounges.

**The Blue Unit:** Patients come to this unit with relatively light problems—for example, a mild asthma attack or a persistent nosebleed. They wait in a general lounge or, if necessary, an isolation lounge until they are seen in an examination room by a member of a healthcare team. Then they are sent for treatment and are discharged.

## Notes from down under

Besides upgraded treatment in the JGH's newly opened Emergency Department, Pavilion K offers patients and visitors something that was previously unavailable: underground parking. That's a welcome addition for anyone reluctant to leave the comfort of a warm car on a chilly winter day.

To get to the underground lot from Légaré Street, turn onto Bourret Street, and then left into the entrance of the parking garage. Once you've taken a ticket at the booth, head down the ramp and park on one of the three colour-coded levels—S4 (green), S5 (blue) or S6 (yellow). When the next phase of Pavilion K is completed in 2015, a fourth parking level will also be available.

After you've parked, you can use either of the two elevators (#5 or #6) at the west end of the garage to go straight to the Emergency Department on level S2. To reach any of the hospital's other pavilions, take the single elevator in the east corner (#12). And don't worry about gettng lost: plenty of signs and extra security guards have been placed throughout the new lot.

Parking is free for 10 minutes or less, $6 for 11 to 30 minutes, $12 for 31 to 60 minutes, $18 for 61 to 90 minutes, and $20 for 91 minutes until the end of that 24-hour period.

When you're ready to leave, payment is fully automated by credit card or cash. However, an attendant is also on hand to help you.

On the day of the move, Emergency staff prepare to treat patients in the Rapid Assessment Zone.

## Critical-care wing has critical need for private support

The new Emergency Department is the first phase of Pavilion K, a $393 million acute-care wing that will benefit significantly from support by the JGH Foundation's current Capital Campaign. Pavilion K will require more than $50 million from private donors to equip the new surgical suites and intensive care units, furnish the private rooms with sophisticated beds, and meet many other needs not funded by the government.

Pavilion K's $26 million indoor parking lot will feature 450 much-needed spaces for staff and patients—to be funded privately in its entirety. As emergency and critical care services relocate to Pavilion K, additional funds will be needed to renovate and equip the vacated areas to allow existing services to be expanded or new services to be added.

For more information or to make a donation, please contact the JGH Foundation at jghfoundation.org/sections/vpavk.html or 514-340-8251.

# Up close and personal in the war against cancer

In the Dubrovsky Molecular Pathology Centre, Dr. Alan Spatz discusses the facility's operations with Katerina Ntapolias, Department Manager for Pathology.

## Treatment advances in new Molecular Pathology Centre

**The era: the first decades of the 20th century. For years, scientists had known of the existence of harmful microbes, but no one was quite sure how to fight them. Then penicillin was discovered—and suddenly, everything changed.**

Now leap ahead to the war against cancer in the 21st century, where history seems poised to repeat itself. By the early 2000s, researchers had successfully catalogued many of cancer's genetic mutations and characteristics, but there was no way to take full advantage of this precious information.

Then molecular pathology began to blossom—and suddenly, a world of possibilities opened up. Today, excitement is building as clinicians and scientists press ahead in a full-scale, genetics-based attack on cancer in advanced facilities like the Jewish General Hospital's new Dubrovsky Molecular Pathology Centre.

The strategy is to use molecular pathology to create the unique genetic profile of a cancerous tumour in a specific patient (see article on page 16). Based on this "portrait", treatment is custom-designed for that patient, who receives the drug most likely to exploit the genetic weaknesses in that particular tumour.

The down-side is that there are still relatively few custom-tailored drugs that can effectively combat the many types of cancer. That's why one of the top priorities of the Molecular Pathology Centre is to play an active role in developing those personalized treatments, says Dr. Alan Spatz, the Centre's Director and the JGH Chief of Pathology.

"At this Centre, activity that is oriented to clinical care is integrated with research—and, in fact, it's impossible to split these two closely connected cancer activities," says Dr. Spatz. "Our objective is to provide cutting-edge molecular testing to allow patients to receive the most effective therapy for their disease. We also aim to discover new biomarkers that will eventually lead to new treatments against cancer, and to educate and retain the best students in Quebec."

A further advantage of personalized therapy is that the tumour is no longer fought with an all-purpose treatment that may not be suitable for everyone. As a result, patients avoid toxic exposure and the debilitating side-effects of drugs that may later prove to be ineffective.

"We have to recognize that the way we practiced medicine and oncology during the last 40 years was sub-optimal," says Dr. Spatz. "We had no choice but to give toxic treatments to everybody, even if we got the desired effect only in a minority of them. We also know from various studies that sparing patients from getting unhelpful treatments saves them a lot of discomfort, while saving the healthcare system considerable expense."

Another hallmark of the airy, light-filled Centre is its spaciousness. As well as being a convivial place to work, the 12,000-square-foot, $8 million facility was designed to heighten efficiency and save time, says Dr. Leon Van Kempen, the Centre's Chief Operating Officer. "This layout finally allows enough room for tissue samples to follow a logical route from station to station through the lab, instead of going back and forth between various areas."

Appropriately, the Molecular Pathology Centre is located on the sixth floor of Cummings Pavilion E. That puts it smack in the middle of the Segal Cancer Centre, whose research labs occupy the pavilion's fourth and fifth floors, while the seventh and eighth

are used for clinical activities. At the moment, 20 employees and 20 students are based in the Molecular Pathology Centre, but Dr. Van Kempen expects their ranks to grow to 30 employees and 30 students in 2015.

Even in the short time since the Centre's launch last November, it has become a focal point for education, attracting students from McGill University, as well as partner institutions in the United States, France and the Netherlands. Not only might these talented students eventually become Quebec's doctors and scientists of the futrure, their presence adds to what Dr. Spatz calls "the innovative and dynamic thinking that we're generating in this facility."

He adds that "the strengths of the Molecular Pathology Centre are reinforced by the unique culture of this hospital, where everyone works together in a fully integrated manner to push the limits of medical progress and to translate medical innovation to directly benefit patients."

"Our long-range goal is to profile every single patient who comes through here," says Dr. Gerald Batist, JGH Chief of Oncology and Director of the Segal Cancer Centre. "It's a continuous process of improving and accelerating a process that has already begun."

That process got a big push this past January, with a $15 million award by the federal Minister of State for Science and Technology to help build a Business-Led National Centre of Excellence in Precison Therapeutics (personalized medicine), in which the Dubrovsky Molecular Pathology Centre will play a central role. The Centres of Excellence program encourages the private sector to tackle major challenges in research and development by drawing on the expertise of research organizations and post-secondary institutions in a not-for-profit collaboration.

Dr. Batist also notes that the JGH has been playing a prominent role as one of the academic organizers of the WIN Consortium—Worldwide Innovative Networking in Personalized Cancer Medicine—along with global experts from leading institutions in such cities as Paris, Houston, Stockholm, Jerusalem, Munich and Mumbai. "We're among a very small group of people in the world who have the capacity to do these kinds of things."

For Dr. Spatz, the anti-cancer developments of the past several years amount to "a revolution in medicine. And the Molecular Pathology Centre is the mandatory cornerstone for this hospital to play an extremely influential role."

# Personalized medicine: a prescription for hope

**In a laboratory in the new Dubrovsky Molecular Pathology Centre, patient Michel Slakmon (right) chats with Dr. Leon Van Kempen, the Centre's Chief Operating Officer.**

**Michel Slakmon is living proof of how much can be achieved through personalized cancer treatment—but also how much more remains to be accomplished in the struggle to overcome the disease.**

When Mr. Slakmon, a 64-year-old resident of Côte St-Luc, was diagnosed in June 2012 with non-small-cell lung cancer, he underwent conventional treatment that did not take into account the molecular profile of his particular tumour. And so, over a six-week period that autumn, he soldiered his way through 12 sessions of chemotherapy and 30 of radiation.

"That seemed to do it," he recalls today. "I had follow-up scans every three months, and at first, it looked as if my cancer had settled down. But in May and June of 2013, I began to experience pain in my abdomen." A PET scan, ordered by Mr. Slakmon's JGH oncologist, Dr. Victor Cohen, revealed that the cancer, which initially had been located between his lungs, had metastasized and travelled to his abdomen and to the lymph nodes in his neck.

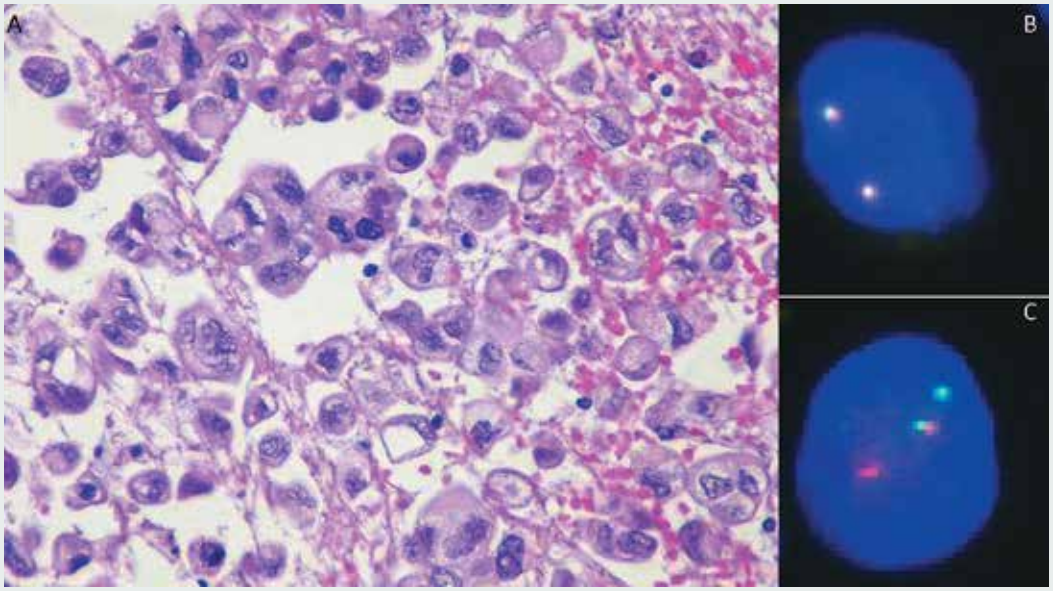
The saving grace, revealed by a detailed analysis of his tumour using molecular pathology, was that Mr. Slakmon's cancer was ALK-positive—that is, it had a specific type of genetic defect that made it susceptible to the drug Crizotinib. A mere two days after he began treatment last October, his abdominal pain disappeared and for the next two months, his condition remained stable.

Mr. Slakmon says he's grateful that Dr. Cohen and the multidisciplinary healthcare team at the JGH "were determined to go the extra mile for me with the new drug." Those feelings have not diminished, he says, even after the shock of learning in December that new nodes had appeared in his lungs.

By late January, Mr. Slakmon was still on Crizotinib and was awaiting a February consultation that he hoped would lead to treatment with an even newer drug that is specifically targeted at his form of cancer.

"Twenty or thirty years ago, someone in my position would have been given a death sentence," he says. "Now if I get a new drug that's ideal for me, at least I've got a chance. I've got hope, which makes all the difference."

# The key to a new era in cancer treatment




**At the far left is a micro-photograph showing cells from an adenocarcinoma of the lung. This image alone does not give doctors enough information to determine whether this lung-cancer patient is likely to respond to the drug Crizotinib, which is effective only against tumours with a specific genetic aberration. This is where molecular pathology adds crucial details. Photo B shows the blue-stained nucleus of a tumour cell, in which the pair of yellow spots (formed when red and green spots overlap) indicates that the specific genetic aberration is absent. By contrast in photo C, which shows a tumour cell from a different patient, the red and green spots do not overlap. This means the genetic aberration is present and that this patient is likely to respond to Crizotinib.**

**Scientists used to talk about finding "a cure for cancer." Not any more. That outdated phrase makes cancer sound like a single, uniform disease, which it isn't. Experts now understand that cancer is actually what Dr. Gerald Batist, JGH Chief of Oncology, calls "a collection of rare or uncommon diseases."**

Despite their many similarities, tumours in different parts of the body—the lungs, skin or colon, for example—have been shown to possess their own unique traits. Even cancer in a particular spot, such as the breast, may not be exactly the same in a teenager as in an elderly woman.

The quest, therefore, is not necessarily to find an all-encompassing cure. Rather, a leading priority is to clearly identify the special characteristics of various types of cancer, and then to custom-design a series of cancer-fighting drugs, each of which exploits the weaknesses in different forms of the disease.

Thus, it's crucial to be able to detect the tiny but tell-tale characteristics (known as biomarkers) that contribute to the genetic profile or signature in each type of cancer. This is achieved by examining the tumour's genetic mutations at the molecular level—precisely what the JGH's Dubrovsky Molecular Pathology Centre is now so well equipped to do under the auspices of the Department of Pathology.

If cancer is viewed as a single disease (as was once the case), all patients get pretty much the same treatment. While some patients respond well to this one-size-fits-all therapy, a great many do not. That's why the latter patients need the personalized treatments that the Molecular Pathology Centre is involved in developing.

Encouragingly, the era of customized cancer treatment is already under way. Results have been excellent when, for instance, patients receive drugs that are specifically targeted at metastatic melanoma, a certain type of lung carcinoma, and some forms of lymphoma. But these cases are still in the minority. The challenge for researchers is to develop drugs that will be similarly effective against dozens of other cancers, each with its own set of genetic mutations.

At what point does a facility like the Molecular Pathology Centre come into play? Here's a simplified breakdown of the process.

1. A physician—perhaps a family doctor or gynecologist—suspects the presence of cancer and arranges for the patient to have a small tissue sample taken from the affected area.

2. The sample is sent to Surgical Pathology where it is examined, usually under a microscope. If cancer is diagnosed, the tumour's general characteristics are identified. In the meantime, the patient is referred to an oncologist.

3. A portion of the sample is also sent to Molecular Pathology, where its genetic components—DNA and RNA—and proteins are extracted and analyzed by high-tech equipment which can evaluate hundreds of genes at once.

4. Mutations in the defective genes are identified and a detailed profile of the tumour is developed. Steps 3 and 4 usually take six working days, but the Molecular Pathology Centre aims to cut the time to five days.

5. Based on the tumour's molecular characteristics, the patient's oncologist can prescribe the treatment that is most effective against that specific type of cancer.

# Donors pave the way for personalized medicine at the JGH

**It was an article in the New York Times that first caught Eileen Dubrovsky's eye and made her wonder how the breakthroughs of personalized medicine could be brought to Montreal. Soon afterward, Mrs. Dubrovsky, who would later provide the lead gift for the Dubrovsky Molecular Pathology Centre, knew she was on the right track when she spoke with Dr. Gerald Batist, JGH Chief of Oncology and Director of the Segal Cancer Centre at the JGH.**

"He described the vision of a molecular pathology centre as part of the Segal Cancer Centre," she recalls. "I was proud to support this groundbreaking initiative and, in doing so, to honour my late, beloved husband, Louis, in a way that can have so much meaning and impact."

The dreams of Mrs. Dubrovsky and other generous donors were realized at last November's opening of the Centre, which plays a key role in enabling patients to receive the customized, genetics-based treatments that most effectively fight particular forms of cancer.

Although construction took place last year, the full journey lasted nearly a decade. As early as 2004, the JGH was one of Canada's first hospitals—if not *the* first—to use molecular analysis to help guide diagnosis and treatment. But it was the 2009 arrival of Dr. Alan Spatz, to become JGH Chief of Pathology, that served as a catalyst in the development of a state-of-the-art molecular pathology centre.

Key support fell into place in October 2010, when the JGH Foundation launched a fundraising campaign led by Dr. Spatz; Robert Wiseman, owner of Hudson Advisors Canada and President of Econo-Malls Management Corp.; and Maor Amar, Managing Director at BMO Financial Group.

"I'm not a doctor or researcher and I can't do anything about treating or finding a cure for cancer," says Mr. Wiseman, who has seen too many relatives and friends affected by the disease. "What I *can* do is raise money so that JGH physicians, researchers and staff have the facilities and tools they need." This same spirit motivated Joelle Adler, President and CEO of Diesel, to join the fundraising team in 2012.

By early 2011, Dr. Spatz's reputation and pioneering vision had attracted nearly $2.5 million in pledges. Included was a major gift by the Adelis Foundation, a non-profit organization from the Principality of Monaco, whose founder and President, André Deloro, strongly believed in the crucial role of the Centre to create a breakthrough for cancer patients in Quebec and beyond. This was followed by the lead gift from Mrs. Dubrovsky and a major contribution from the National Bank.

"National Bank has been a partner of the JGH Foundation since 1988, contributing to the health and well-being of the entire community through its longstanding support of the JGH and its mission of providing continued excellence in patient care, research and teaching," says Diane Giard, Executive Vice-President of Personal and Commercial Banking at the National Bank. "Considering the prevalence of cancer and cardiovascular diseases, we are proud to participate in the development of a centre that will save and extend thousands of lives by matching therapy to each patient, and increasing knowledge about these diseases through innovative research."

**From left: Dr. Roderick McInnes, Director of the Lady Davis Institute, Diane Giard, Dr. Alan Spatz, Myer Bick and Dr. Gerald Batist.**

Myer Bick, JGH Foundation President and CEO, agrees that the creation of this Centre "bears witness to the vital role that upstanding individuals and corporate citizens can play in paving the way for better treatment and outcomes not only for JGH patients, but for all Quebecers. Together, we do have the power to heal!"

Dr. Spatz adds that the benefits which patients reap through the Dubrovsky Molecular Pathology Centre will be delivered "thanks to the confidence and support bestowed upon us by deeply committed individual and corporate citizens who have, at heart, the well-being of us all."


## Keep up to date with *JGH News*!

***The world of the Jewish General Hospital is yours to discover in JGH News***

Working with its many partners in Quebec, throughout Canada and around the world, the Jewish General Hospital continues its proud, 80-year tradition of providing treatment and care of superior quality to patients of all backgrounds.

At the same time, the JGH is pioneering innovative ways of improving efficiency and cutting costs for the benefit of the entire healthcare system.

To get the inside story about the programs, personalities and breakthroughs at the JGH, be sure to turn to *JGH News*. It's yours to discover at

**jgh.ca/jghnews**

# Elite international scientists form LDI advisory board

For the first time since the Lady Davis Institute (LDI) was launched at the JGH 45 years ago, a permanent International Scientific Advisory Board, composed of eminent scientists from around the world, has been established to advise and guide the LDI in defining its overall strategic directions, focusing its programs, and addressing challenges to its operations.

"The LDI is tremendously fortunate to have an advisory board of the stature that we have assembled," say Dr. Roderick McInnes, Director of the LDI. "Their counsel will be invaluable in maintaining our position as one of Canada's leading research institutes."

Chairing the board is **Sir John Bell**, Regius Professor of Medicine at Oxford University, President of the Academy of Medical Sciences, and Chair of the UK's Government Office for Strategic Coordination of Health Research. Prof. Bell has developed research programs into genetics and genomics; is the founder of the Wellcome Trust Centre for Human Genetics; and he has led the significant expansion in biomedical research activities in the Clinical School in Oxford.

Prof. Bell's own research has contributed to a clearer understanding of genetic determinants of susceptibility in Type 1 diabetes, rheumatoid arthritis, and certain molecular interactions associated with activation of the immune system. He has pioneered many high-throughput genomic methodologies applied to biomedical science.

Sir John Bell

### Also on the LDI's International Scientific Advisory Board:

**Dr. Valerie Beral** is a Professor of Epidemiology at Oxford and, since 1988, Director of the Cancer Epidemiology Unit. Her research interests include the role of reproductive, hormonal and infectious agents in cancer. As Principal Investigator for the Million Women Study, she leads international collaborations on breast, ovarian and endometrial cancer.

**Dr. Alan Bernstein** is President and CEO of the Canadian Institute for Advanced Research, connecting the world's best minds through research networks. Dr. Bernstein has contributed extensively to the study of stem cells, the production of blood cells, and cancer. From 2000 to 2007, he led a transformation in health research as founding President of the Canadian Institutes for Health Research. From 2008 to 2011, he served as Executive Director of the Global HIV Vaccine Enterprise, charged with accelerating the search for an HIV vaccine.

**Dr. Paul Frenette** is Director and Chair of the Ruth L. and David S. Gottesman Institute for Stem Cell and Regenerative Medicine Research at the Albert Einstein College of Medicine in New York. His research interests are the stem cell microenvironment in the normal production of blood cells and cancer. His laboratory has uncovered distinct functions of the two branches of the autonomic nervous system in regulating prostate cancer progression. Dr. Frenette is Vice-President of the International Society of Experimental Hematology, and will become President in 2015.

**Dr. Thomas Hudson** is President and Scientific Director of the Ontario Institute for Cancer Research (OICR), focusing on translational research in preventing, detecting, diagnosing and treating cancer. He was instrumental in creating the International Cancer Genome Consortium and is the Chair of the Consortium's Executive and Scientific Steering Committees. Dr. Hudson's OICR laboratory is involved in studying genome variation that affects cancer predisposition, progression and response to therapy.

**Dr. David Naylor**, President Emeritus and Professor of Medicine at the University of Toronto, has published scholarly work on social history, public policy, epidemiology and biostatistics, health economics, and clinical and health services research in most medical fields. He was involved in the initiation and early governance of the CIHR, and led Canada's National Advisory Committee on SARS and Public Health in 2003. In 2009-10, Dr. Naylor was a member of the Global Commission on the Education of Health Professionals for the 21st Century. Afterwards, he was an expert panelist on the Review of Research & Development Spending in Canada.

**Professor Dame Linda Partridge** is Director of the University College London Institute of Healthy Ageing, and Founding Director of the Max Planck Institute for Biology of Ageing in Cologne. Her research tries to understand how the rate of aging evolves in nature and the mechanisms of extending a healthy lifespan. Her aim is to develop pharmacological treatments that ameliorate the aging process to produce a broad improvement in health during aging.

**Dr. Michael Simons** is an RW Berliner Professor of Medicine and Cell Biology at Yale University, where he serves as Director of the Cardiovascular Research Center and Chief of Cardiovascular Medicine. Dr. Simons' research, which focuses on basic, translational and clinical investigations of arterial vasculature, has provided a sound theoretical foundation to design clinical trials for the therapeutic enlargement of arteries to bypass blocked arteries.

**Sir Patrick Sissons** is interested in the development of illness and persistent virus infections. From 2005 to 2012, he was Regius Professor of Physic and Head of the School of Clinical Medicine at Cambridge, and since 2009, Director of Cambridge University Health Partners, one of five designated Academic Health Science Centres in the UK. His research has focused on human cytomegalovirus, a common infection that can cause, among other things, herpes, chicken pox, shingles and mononucleosis.

**Sir Simon Wessely** is Head of the Department of Psychological Medicine and Vice-Dean for Academic Psychiatry at the Institute of Psychiatry, King's College London. He founded the King's Centre for Military Health Research, with a direct impact on public policy and treating military personnel. Prof. Wessely became Director of the Chronic Fatigue Research Unit at King's in 1994 and of the Gulf War Illness Research Unit in 1996. He is Civilian Consultant Advisor in Psychiatry to the British Army, a member of the Defence Scientific Advisory Council, and a senior investigator at the National Institute for Health Research.

**Dr. Jeff Wrana** is a Senior Investigator at the Lunenfeld-Tannenbaum Research Institute at Mount Sinai Hospital and Professor of Molecular Genetics at the University of Toronto. He is Director of the SMART High Throughput Biology Centre, with research interests encompassing the generation and analysis of large diverse biological datasets to define molecular networks of importance in cell fate determination and cancer.

The International Scientific Advisory Board will conduct its first visit to the LDI in March for intensive meetings with Dr. McInnes and senior researchers, with consultations at regular intervals thereafter.

## Investing in a healthy future for all

Private support is vitally important to the LDI and its leading-edge research into the causes and potential treatments for the most common illnesses. Donations supplement the funding that public granting agencies provide. This enables the LDI to ensure the continued excellence and growth of existing research programs; recruit first-rank researchers and support their research in priority areas; pursue key areas of research that would not otherwise be funded; and provide critical support to foster new ideas and speed the development and access to novel treatments and therapeutics.

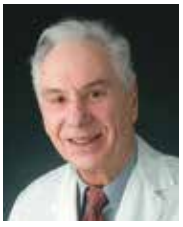
A new feature of the Foundation's Capital Campaign enables donors to target a particular area of LDI research, such as aging, cancer or HIV/AIDS, to support specific researchers and their infrastructure for a specified period. For more information or to make a donation, please visit jghfoundation.org and click on the Campaign tab, or call the JGH Foundation at 514-340-8251.

# NEWSMAKERS

## CONGRATULATIONS!

**Dr. Stephan Probst** has been appointed Chief of the Division of Nuclear Medicine. Dr. Probst received his M.D. from McGill University, where he also completed his residency in Nuclear Medicine. After a PET/CT fellowship at New York University, he returned to Montreal in 2010 to become an attending physician at the JGH. Dr. Probst has participated in numerous research studies and has written extensively on oncologic FDG PET/CT. He also has a strong interest in the education of residents and medical students. Dr. Jerry Stern, the former Chief, remains a valued member of the Division's staff.

Two major honours were bestowed last October upon **Dr. Ernesto Schiffrin**, who is JGH Physician-in-Chief, Director of the JGH Cardiovascular Prevention Centre, and Professor and Vice-Chair (Research) of the Department of Medicine at McGill University. In addition to being elected President of Hypertension Canada, Dr. Schiffrin was chosen by the Canadian Cardiovascular Society to receive one of its most prestigious honours, the 2013 CCS Research Achievement Award, for his contribution to Canadian cardiovascular health and care. A leading expert in his field, Dr. Schiffrin is also President of the International Society of Hypertension and an editor of *Hypertension*, the journal of the American Heart Association.



**Dr. Mervyn Gornitsky**, Emeritus Chief of the Department of Dentistry, has received the 2013-2014 Micheline-Blain Award, presented by Quebec's Network for Oral and Bone Health Research. In her letter of congratulations, Dr. Arlette Kolta, Director of the Network, said the award recognizes Dr. Gornitsky's "promotion of research and education in dental medicine through clinical and epidemiological studies using saliva and other means to search for markers for a number of diseases, including scleroderma, diabetes, facial pain, cancer and periodontitis." Dr. Gornitsky, JGH Chief of Dentistry from 1971 to 1988, was named Professor Emeritus in McGill's Faculty of Dentistry in 2002, and JGH Emeritus Chief in 2009.

Howard Kay Photography

**Sheila Kussner**, O.C., O.Q., founder and former Chair of Hope & Cope, has been named Outstanding Volunteer of the Year by the Quebec chapter of the Association of Fundraising Professionals. The award, bestowed during National Philanthropy Day in Montreal last Nov. 15, salutes Mrs. Kussner as "an outstanding motivator who has mobilized hundreds of volunteers and thousands of donors, raising millions of dollars for the development of psychosocial oncology in Quebec."

A study headed by **Dr. Haim Abenheim**, a staff physician in the Department of Obstetrics and Gynecology, has received a $1.5 million grant from the Canadian Institutes for Health Research (CIHR) to investigate the use of progesterone to prevent miscarriage in women with first-trimester bleeding. The grant application was ranked first among the 28 considered by the CIHR.

**At a soirée of the Heart and Stroke Foundation last October, Dr. Lorraine Chalifour (second from left), was honoured with the John J. Day Award of Excellence by (from left) David Sculthorpe (Foundation CEO), Martin Thibodeau (Quebec Regional President of RBC), Edmée Métivier (the Foundation's Quebec CEO) and Marc Filion (Chair of the Foundation's provincial board). Dr. Chalfour received the $10,000 award in recognition of her research into cardiovascular disease in the Lady Davis Institute at the JGH.**

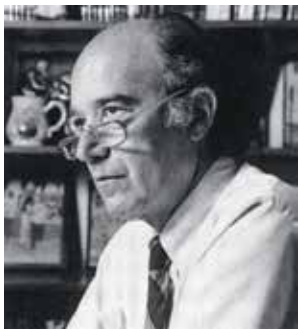
**Bessy Bitzas**, Head Nurse in Palliative Care since 2000, has been appointed Chair of the JGH Research Ethics Committee. She has been active on this committee, as well as on the hospital's Science Review Committee, since 2007. Ms. Bitzas has a Master's degree in Nursing and is a Ph.D. candidate at McGill University's School of Nursing.

## WELCOME

**Dr. Oriana Hoi Yun Yu** has joined the JGH Division of Endocrinology and will be an Assistant Professor at McGill University. Dr. Yu is participating in studies at the JGH to assess the association between abnormalities in metabolism and the risk of cancer. She is also involved in projects to assess management therapies for Type 2 diabetes, and genetic studies that explore the causes of cardiovascular disease in diabetic patients. Dr. Yu received her M.D. from the University of Calgary in 2006, followed by postgraduate training in endocrinology and general internal medicine at McGill, where she completed a Master's degree in epidemiology and biostatistics.

**Dr. Blair Schwartz** has joined the JGH Division of Internal Medicine; he will also work in Intensive Care and will pursue the development, implementation and research-based evaluation of improvements to safety and the quality of care of hospitalized patients. Dr. Schwartz completed his residency in internal medicine at the JGH, followed by training in general internal medicine and critical care medicine at McGill University. He went on to complete a Master's of Health Science degree in clinical investigation at the Johns Hopkins Bloomberg School of Public Health, where he focused on patient safety.

## IN MEMORIAM



The Jewish General Hospital mourns the loss on Aug. 1, 2013, of **Dr. Harold Frank**, a veteran respirologist in the Division of Pulmonary Diseases, as well as JGH Physician-in-Chief from 1978 to 1990 and Director of Professional Services from 1993 to 1998. Dr. Frank, who joined the hospital in 1963, was praised in a statement by Dr. Ernesto Schiffrin, JGH Physician-in-Chief, as "a true scholar and a gentleman, revered for his clinical acumen and beloved for the warmth and personal touch that characterized his relationships with his patients, students and colleagues. He was an exceptional teacher and mentor who, during his long tenure, shaped the careers of a generation of JGH physicians." In recognition of his clinical wisdom and dedication to teaching, McGill University's Department of Medicine created the annual Harold Frank Prize for the best clinical vignettes presented by a resident.

It is with sadness that the Jewish General Hospital notes the passing on Sept. 28, 2013, of **Dr. Esther Lamoureux**, a beloved member of the the Department of Pathology. Dr. Lamoureux joined the JGH in 1988 and was instrumental in bringing a high level of proficiency to the hospital's activities in gastro-intestinal pathology. She was also an Associate Professor of Pathology at McGill University, and Program Director of McGill's Pathology Residency Program from 1999 to 2003. In an announcement to staff, Dr. Alan Spatz, JGH Chief of Pathology, described Dr. Lamoureux as "an extraordinary teacher who received numerous prestigious teaching awards and mentored numerous pathologists and clinician-students. She was a brilliant surgical pathologist, an outstanding teacher and a loved and respected colleague."

HOPE&COPE

# Lifting patients' spirits on the high notes

The patient wanted gospel music, and that threw Steven Azoulay for a loop.

To comfort and help lower the stress of hospitalized cancer patients, Mr. Azoulay had developed a project to provide them with free iPods loaded with their favourite music. Finding a pleasing selection of pop, classical, country and other genres had been a snap. But gospel was a request he never expected.

"That's why we launched it as a pilot project," says Mr. Azoulay, recalling the trial period in late 2012 for the MusicSoonLife program which is now up and running. "We wanted to be ready for any situation, like this gospel request." So after he and his partner, David Levy, completed some quick musical research, "we were able to give the patient exactly what she wanted. That made her really happy and it reinforced our belief in the power of music to make a significant difference in people's lives."

MusicSoonLife, undertaken at the JGH in cooperation with Hope & Cope, aims to give patients pre-loaded iPods—some of them new, others used and refurbished, and all of them donated. Each iPod contains about 50 songs (acquired through paid downloads), which are based on preferences that the patient describes to a Hope & Cope volunteer.

Although Mr. Azoulay and his partner volunteer their time to get, load and deliver the iPods, they are looking to donors to defray the cost of the new iPods and the music. "The price per song isn't much," he notes, "but you can easily spend $50 to provide someone with a good selection of music." Donations can be made at www.musicsoonlife.com, where information is also available on donating used iPods.

The project had its roots in 2007, as Mr. Azoulay's 23-year-old cousin, Sandra Harroch, was being treated for cancer at the JGH. In the last month of her life, he began to play recorded music for her in her hospital room, a gesture that noticeably lifted her spirits.

**Steven Azoulay relaxes with some recorded music which he listens to on an iPod that will be passed along to a hospitalized patient.**

After her passing, a modest amount was raised by a foundation that had been started in her memory. However, Mr. Azoulay wanted to do something more ambitious to honour his cousin and help other cancer patients. Recalling the pleasure that music had given to Ms. Harroch, he decided to do the same to brighten the lives of others who were fighting the disease.

Although individuals of all ages can benefit from MusicSoonLife, Mr. Azoulay says he's particularly keen on putting iPods in the hands of young adults, in whose lives music often plays an especially prominent role. He's also working with Hope & Cope's CancerFightClub to spread the word about MusicSoonLife to other Montreal hospitals, where he hopes the program will take root.

"For many of us, music is so deeply ingrained into our daily lives that we often don't give a conscious thought to how much it sustains us," Mr. Azoulay says. "But when you're ill, music can play an even more crucial role. I want to help make it available to as many people as possible when they need it most."

LE CYCLO-DÉFI ENBRIDGE CONTRE LE CANCER
au bénéfice de L'HÔPITAL GÉNÉRAL JUIF

ENBRIDGE RIDE TO CONQUER CANCER
benefiting the JEWISH GENERAL HOSPITAL

# Committed to the Ride, despite a personal loss

For Alexandra LaRue, the hardest part of the Enbridge Ride to Conquer Cancer this July will not be the two-day bike trek from Montreal to Quebec City, but the memory of the passing of her young cousin, Nic, since she last participated in the event in 2013.

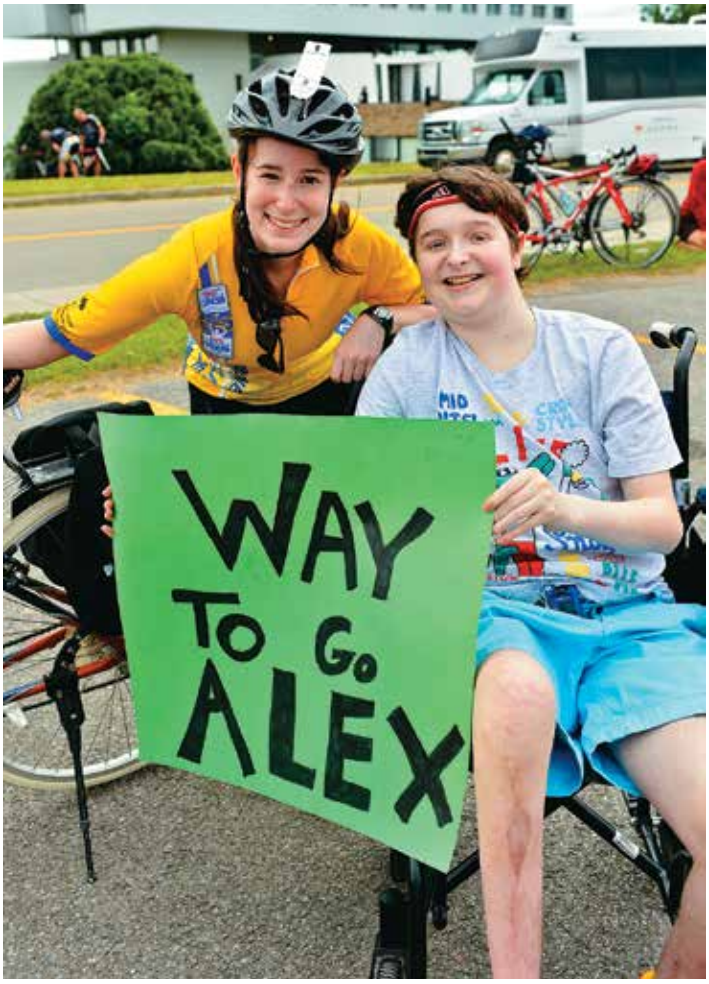
It was Nic who inspired Ms. LaRue to join the Ride for the first time in 2012 after he was unexpectedly diagnosed at the age of 13 with osteosarcoma, a cancerous bone tumour. Uplifted by his courage, she hit the road again last summer, noting that "he suffered every complication during his rounds of chemo. I told Nic that it was for him and that I was committed to riding every year until they found a cure."

That's a promise Ms. LaRue intends to keep, even though the native Montrealer now lives far away. For the 2013 Ride, she travelled to Montreal from her home in Calgary, where she narrowly avoided calamity when the city was hit by flooding just before the event. "I was worried I wouldn't be able to make it," she recalls, "but luckily my apartment was on the fourth floor, so my bike and gear weren't touched."

This summer, Ms. LaRue will be coming in from San Diego where she's pursuing her studies. As she cycles between cities in Quebec, she says she'll be thinking of her cousin, who died this past Christmas Eve. "This will be the first year that Nic won't be at the finish line to greet me, and that will be the toughest part."

Nevertheless, she remains committed because of the strong support that friends and family have shown in the past, before and during the Ride. "What's most motivating is receiving the donations and realizing that all of these people are behind me," she explains. "And then, during the Ride, when you look at all those people encouraging you along the way, you stop focusing on the negative and you make it to the next pit stop."

During her training—cycling 20 to 25 kilometres two or three times a week—Ms. LaRue is also buoyed by the thought of raising money and making a unified effort with others. "The most incredible thing is to see so many people from all over, coming together in the fight against cancer."



Alexandra LaRue and her cousin, Nic.

## Nuts and bolts

The 2014 Enbridge Ride to Conquer Cancer hits the road on July 5 and 6 to help fund cancer research and care at the Segal Cancer Centre at the JGH. To take part, each rider pays a $75 registration fee and raises at least $2,500.

After the uplifting opening ceremonies on Saturday morning, riders spend Saturday and Sunday pedalling between Montreal and Quebec City, rain or shine. At the half way point in Trois-Rivières, they gather at camp to eat, relax, enjoy entertainment and sleep overnight in tents set up by volunteers. Then on Sunday, the ride resumes. Throughout the trip, all meals, drinks, tents, medical aid and mechanical assistance for bikes are available.

Individuals who are unable to ride can get involved as crew members who serve meals, assist riders or perform other necessary tasks. Crew members pay a $25 registration fee, and are encouraged but not required to raise $500.

For more information about the Enbridge Ride to Conquer Cancer—including registration, joining or forming a team, fundraising, training or any aspect of the event—please visit the website at www.conquercancer.ca or phone 1-866-996-8356.

**www.conquercancer.ca 1-866-996-8356**

# Walkers looking forward to the landmark 10th Weekend

When Penny Levine says she's "in it for the long haul," she's speaking literally, and in a double sense. In general, "it" is her commitment to do whatever she can to support the fight against cancer. More specifically, "it" is also Penny dedication to the Pharmaprix Weekend to End Women's Cancers, having participated in all nine editions since 2005. This August, for the Weekend's landmark 10th anniversary, she'll be back on the streets of Montreal for two more rewarding days of blisters, laughter and tears.

"I'm determined to do what I can to honour the memory of my mother, my father and a dear friend who all died of cancer," she explains. "I'm committed to this cause, so for me it's a no-brainer. It's non-negotiable—I'm in it for the long haul."

When Penny, a real estate broker, first heard about the event in late 2004, she was certain she wanted to participate and immediately got to work recruiting members for her team, Pennies from Heaven. "Along with 30 of my friends, we raised over $100,000 in that first year alone," she recalls. While many teammates have come and gone since 2005, several core members from that original group still get together each year to walk.

"Each year I think I know exactly what to expect, but the Weekend always has such an impact on me," she says. "This is still an emotional issue for me and I'm always touched by how generous and gracious people are when I ask them to donate to this important cause."

Also infectious is the support of people during the Weekend itself—people honking their car horns as they drive by or even passers-by in the street offering words of support. "It never ceases to amaze me," Penny adds. "This is an absolutely wonderful event and I'm so happy with the progress that we've seen in the last nine years."

Nevertheless, Penny is not giving up her fight, and is dedicated to participating in the Weekend for years to come. "Although I can't avoid the blisters, my rate of recovery has really improved," she says. "Despite that, I still have to walk, and my plan is to walk as long as it takes to find a cure."

Penny Levine at the 2013 Pharmaprix Weekend to End Women's Cancers.

## The essentials

The 2014 Pharmaprix Weekend to End Women's Cancers, Aug. 23 and 24, will raise funds for treatment, prevention and research into all types of women's cancers at the Segal Cancer Centre at the JGH. Participants have the option of walking one day or both, with everyone paying a nominal registration fee. Those who sign up for the full weekend make a commitment to raise at least $2,000, while one-day walkers must raise at least $1,250.

Participants will walk a total of 60 kilometres over the two days through the streets of Montreal, rain or shine, starting at Villa Maria school in NDG. The school will also host the Saturday evening entertainment and dinner, and the camp will be set up there for two-day walkers. The walk resumes Sunday morning. All meals, drinks, tents and washroom facilities are provided throughout the entire weekend.

Anyone who is unable to walk the route but wants to get involved can be a crew member who serves meals, assists walkers or performs other necessary jobs. Crew members also pay the registration fee, and are encouraged but not required to raise $500. Opportunities are also available for volunteers.

For more information about the Pharmaprix Weekend to End Women's Cancers—including registration, joining or forming a team, fund-raising and training—please visit the website at www.endcancer.ca or phone 514-393-WALK (9255).

**www.endcancer.ca 514-393-WALK (9255)**

# AUXILIARY NEWS

## New projects, new excitement

Linny Blauer

Phyllis Karper

A new year brings renewed vitality, with The Auxiliary geared up to support the JGH, while energizing, inspiring and involving its many members and volunteers.

- Want a peek at the Emergency Department's amazing, new facilities in Pavilion K? Join one of our tours in June, hosted by several of The Auxiliary's past presidents.
- As announced in November on World Prematurity Day, The Auxiliary is making a special push to support the Neonatal Intensive Care Unit. Our ongoing commitment is to purchase 20 specialized incubators at $65,000 each.
- New educational content is now available in our adult CPR and prenatal classes.
- Good health—yours and the JGH's—is the top priority at our first annual fitness event in October, a joint project of The Auxiliary's Next Generation Group and the JGH Foundation.
- Patients are sure to be delighted by the new humour cart, staffed by a professional laughter therapist who will also train Auxiliary volunteers in this specialized field.

This is just a sample of what awaits. Come along and be part of the excitement.

*– Linny Blauer and*
*Phyllis Karper, Co-Presidents*

### ON THE HORIZON

**April 30 – Screening of *No Place on Earth***
by The Auxiliary's Next Generation Group
7:00 p.m., Block Amphitheatre, Pavilion B

**May 5 – Bridge & Mahjongg Luncheon and Tournament**
11:00 a.m., Congregation Shaar Hashomayim

**May 14 – Menus for the Mind Series**
Petit souper and movie screening of *Pour une femme*

**May 28 – Photographic art exhibition and sale**
by The Liane & Danny Taran Foundation
5:00 - 7:00 p.m.
Art for Charities Gallery

**June 11 – Luncheon and tour of new ER in Pavilion K**
Hosted by Auxiliary past presidents
Samuel S. Cohen Auditorium, Pavilion A
Guest speaker: Dr. Lawrence Rosenberg, JGH Executive Director

**October – Fitness event**
More information to come

## A plethora of popular pastimes

Dr. Nir Hilzenrat (centre) of the JGH Division of Gastroenterology joined Auxiliary volunteers at the annual Fall Fair and Raffle, whose proceeds helped buy a Fibroscan Unit for the Division. Co-Chairs of the fair were Chantal Bourque, Barbara Victor and Tova Zentner, while Linda Goodman and Shelley Guttman co-chaired the raffle.

As Montreal shivered in January, hot topics blazed at the Snowbird Lunch and Lecture, co-chaired by Reisa Lerner (left) and Beatrice Lewis (right) at the Florida home of Auxiliary Past President Sheilah Greenberg. Author Barbara Braunstein, the guest speaker, led the discussion on the theme of "Make Your Mind Up, Not Down".

On Nov. 17 (World Prematurity Day), The Auxiliary launched its Tiny Miracle Fund, with a commitment to purchase 20 new incubators at $65,000 each for the JGH Neonatal Intensive Care Unit. Of the 4,500 babies born each year at the JGH, about 700 require incubator care in the NICU, which is supervised by Dr. Apostolos Papageorgiou, Chief of Pediatrics and Neonatology. Among the NICU's successes is Amanda Bergeron, born 10 years ago. This project is being developed by Hela Boro, Rona Daitchman, Roz Rinzler and Lucy Wolkove.

Jewish General Hospital
Foundation

# People who make a difference

**We all know that it is people who make a difference, who turn dreams into reality and make important things happen. At the Jewish General Hospital, for nearly 80 years, people of vision and entrepreneurial spirit have created a model medical centre, serving the people of Montreal and Quebec.**

In our current and most ambitious Capital Campaign to date—with an objective in excess of $250 million—it is a diverse group of devoted and generous individuals who continue this proud and novel tradition.

Harvey Levenson, a long-time community activist, not only co-chairs the current Campaign, but demonstrates leadership through his own personal contribution in support of the Miriam and Sydney Pinchuk Dermatology/Oncology Centre. This Centre allows Dermatology-Oncology to address the pressing need for research, prevention and treatment of skin cancer, the most common and fastest growing form of cancer in Canada.

Harvey Levenson

Sheryl Rosen Adler, Susan Lavy, Maureen Tajfel and Julie Wiener, who envisioned and established the Pink Lady Fund that is aligned with the Israel Cancer Research Fund, not only created the exciting Women-of-Action annual event, but have raised hundreds of thousands of dollars for cancer research and equipment at the Segal Cancer Centre at the JGH over the years.

Dorothy Reitman, C.M.

Dorothy Reitman, C.M., a distinguished leader of many organizations over numerous years, has led a significant campaign to fund research into Alzheimer's disease not only as a passionate advocate, but as a generous donor. Supporting research into this insidious disease is increasingly vital, as the number of Canadians living with Alzheimer's or dementia is expected to swell to epidemic proportions within a generation.

The Gabriel Bitton and Elliott Aintabi families joined together again not only to lead a fundraising effort for the Hospital's new Emergency Department in Pavilion K—the new critical-care wing currently under construction—but committed their families to a major financial contribution. The new Emergency Department will contribute to the improved delivery, coordination and continuity of patient care, reduced waiting time and lower overall lengths of stay, leading to better quality of care and a significant increase in access to emergency services.

Elijah Flomen, a young man celebrating his bar mitzvah, insisted on contributing all his gifts to the Hospital's cancer mission, a disease which has touched his family and affected so many others. His gifts are also being directed to the JGH Airways Centre, a clinical and research facility that provides state-of-the-art, multidimensional and multidisciplinary care for patients with asthma and chronic obstructive pulmonary disease.

Elijah Flomen with Myer Bick

These are just a few examples of the very many people with heart and mission, who play an essential role in ensuring that their community and fellow citizens will have the opportunity to receive high-quality, compassionate medical care when they need it. We invite you to join us in our common journey towards better health and better health care for the people of Montreal and Quebec, now and in the future. You do have the power to heal!

*— Myer Bick*
*President and CEO*

## JGH Foundation's new Chair

The JGH Foundation is pleased to announce the election of Howard W. Dermer as its Chair. A long-time supporter of the JGH, Mr. Dermer joined the Foundation Board of Directors in 2009, chairing the Foundation's Corporate Governance and Strategic Planning Committees, as well as serving as an ad-hoc member of its Executive Committee. He also served as Secretary of the Board, Legal Coordinator and Vice-Chair for the Foundation, and as an active member of the Human Resources and Nominating Committees. He was given the Distinguished Service Award by the Foundation in 2011. He currently sits at the Board of Directors of the Hospital and is a member of its President's Advisory Council.

Mr. Dermer has also taken an active role in various Foundation events, including serving as Co-chair for the Ride to Conquer Cancer in 2010 and 2011 where his organizational ability, his input of time and effort, and his devotion to this unique event were truly remarkable, standing as a model of the passion and inspired partnerships that are at the core of the Foundation's continued success. He was also a member of the 2013 Golf Classic Organizing Committee.

"As Chair of the Foundation, my priority will be to fully engage the members of the Board to participate actively in the Foundation's fundraising objectives," states Mr. Dermer. "These include making their own personal financial commitment, opening doors to potential donors in their respective communities, identifying leading personalities to lend their names to important causes of the Foundation, heading up committees or chairing fundraising events and, finally, to assure the future of our organization, introducing and mentoring new volunteers. I also intend to encourage the widest possible input and participation by all our Board members in defining the strategic directions and conditions for continued success of our organization as part of the strategic planning process that was initiated earlier this year and which will culminate in a special retreat to take place in the spring. Key strategic directions will include broadening the base of donors beyond our current target markets and understanding that a different approach may be required as well as building the capabilities of the Foundation based on best talent and deploying best practices in all our fundraising activities. I know that if the passion and commitment of our volunteers and staff are any indication of our potential to succeed, then we are well on our way."

Born in Montreal, Mr. Dermer retired in 2010 from active practice as a lawyer with expertise in leasing, real estate and commercial litigation matters. He currently serves as Counsel to Lapointe Rosenstein Marchand Melançon L.L.P., one of the largest independent law firms in Quebec, where he headed up the Litigation Practice Group until 1996 and was Managing Partner until 2008.

## Sheila Kussner, O.C., O.Q., appointed Director Emerita

In appreciation of her long service, commitment and generosity to the Jewish General Hospital and of her tireless efforts and unique vision in founding and nourishing Hope & Cope, Sheila Kussner, O.C., O.Q., was unanimously elected Director Emerita, the second such designation by the JGH Foundation Board of Directors, at the Foundation's Annual General Meeting on October 17, 2013.

A healthcare activist, consummate volunteer, fundraiser extraordinaire and pioneer in the field of cancer support, Mrs. Kussner has profoundly shaped the development of cancer care in Montreal. In 1981, she founded Hope & Cope, an innovative psychosocial support program designed to meet the complex emotional and practical needs of cancer patients and their caregivers, which has been and continues to be emulated in cities across Canada, the United States and as far away as Australia. In her more than three-decades-long tenure as Chair of Hope & Cope, she distinguished herself as a courageous and visionary leader, capable of mobilizing hundreds upon hundreds of volunteers, encouraging and supporting thousands of cancer patients and survivors and, together with her late husband, Marvyn, and the many volunteers and supporters she recruited, raising millions of charitable dollars for her passionate cause. Her efforts culminated in 2007 with the opening of Quebec's first Wellness Centre—the JGH Hope & Cope Wellness Centre (Lou's House)—where anyone recovering from cancer can come for fitness training, yoga and meditation, cooking lessons, art therapy, or to join a self-help group, all at no cost. In addition, Mrs. Kussner played an instrumental role in establishing the Christine & Herschel Victor/Hope & Cope Chair in Psychosocial Oncology at McGill University in 2008, the first of its kind in Quebec. Although she stepped down as Chair of Hope & Cope last year, she continues to serve on its Board.

As a result of her outstanding contributions and exceptional commitment to the welfare of cancer patients, Mrs. Kussner has earned numerous accolades and awards. She is an Officer of the Order of Canada, Officer of the Order of Quebec, Governor Emerita of McGill University, which also awarded her an LL.D. degree (honoris causa) in 1990, and the recipient of many other honours and tributes. She also holds an honorary degree from the Faculty of Nursing at the Université de Montreal attesting to her broad influence in health care.

**"Her passion and lifelong efforts will be felt in our community and beyond for many future generations …"**

"Thanks to Sheila's incredible determination, cancer patients and their families today have access to an abundance of support programs to assist them in their fight against this terrible disease," said Foundation President Myer Bick. "Her passion and lifelong efforts will be felt in our community and beyond for many future generations and will continue to be an inspiration for others to follow in her footsteps."

## Dynamic trio keeps improving the lives of patients

Aaron Fish and his wife, Wally, have been friends and colleagues of Ethelyne and Mortimer Fruchter and Manya and the late David Stendel for 60 years. Together, driven by their unwavering interest in and passion for health care, they have played a key role in empowering the JGH to provide superior care to thousands of patients, year after year. The PET/CT scanner in the Division of Nuclear Medicine, the state-of-the-art 64-slice CT scanner in the Department of Radiology, the digitized electron microscope in the Department of Pathology, the ultrasound machine in the Emergency Department, and the 3D digital echocardiography machine in the Division of Cardiology (the first in Canada) are among the numerous achievements and impressive advances resulting from their joint efforts just in the past 10 years.

This year, as part of the Power to Heal capital campaign, the trio made another combined major gift to supplement government funding and help the JGH Division of Radiation Oncology become the first site in Quebec to have a state-of-the-art Truebeam linear accelerator, the most advanced radiotherapy technology in the world. The Truebeam offers greater speed and precision and enhanced patient safety and comfort, as well as new imaging and treatment capabilities that allow for faster and more efficient treatments, improved treatment capacity and delivery workflow, and new possibilities in treating complex cases that would not have been considered treatable before, such as some cancers in the lung, breast, abdomen, and head and neck.

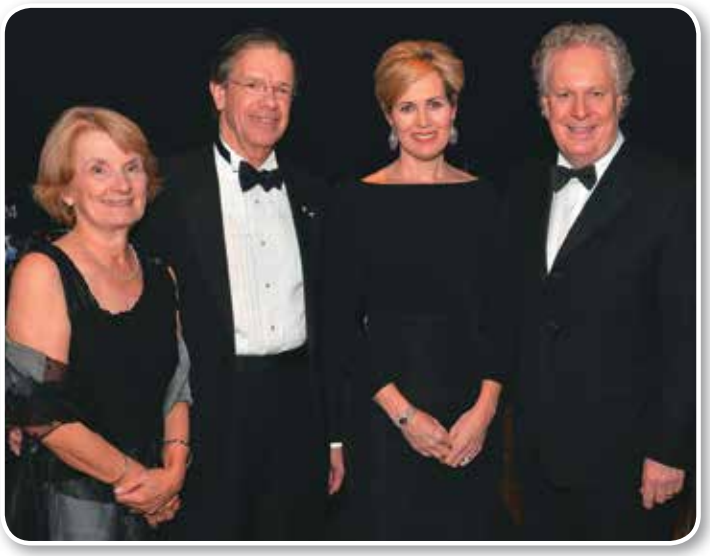
From left: Aaron M. Fish, Dr. Te Vuong, Director of Radiation Oncology, Ethelyne and Mortimer Fruchter, Manya Stendel, Wally Fish and JGH Foundation President and CEO, Myer Bick.

"The need for medical facilities and equipment is always there, regardless of the state of the economy, and even more so when budgets are tight," notes Mr. Fish. "Contributing to the purchase of a specific, highly specialized and technologically advanced piece of equipment such as the Truebeam is a most rewarding experience," adds Mrs. Fruchter, "because you know it is going to help improve the treatment of cancer which will, in turn, markedly improve the lives of patients suffering from this deadly disease." "Considering that about 50% of people with cancer will be treated with and benefit from radiation therapy, the Truebeam linear accelerator is truly a gift of immeasurable benefit to the JGH and the entire community,"says Myer Bick, JGH Foundation President and CEO. "The Fish, Fruchter and Stendel trio keeps on inspiring the people who labour within these walls. Their level of commitment and generosity is nothing short of extraordinary. The JGH family is truly grateful and very fortunate to be able to count on such stalwart benefactors."

## Cola family rises to the challenge

The Colas—brothers Jack and Philip and their cousin Louis, together with their respective spouses, Brenda, Randi and Susan—are a tightly knit family which is well known throughout Montreal for its longstanding commitment, generosity and support of many causes and institutions, including the Jewish General Hospital. Throughout the years, the Colas have taken part in various fundraising events benefiting the JGH and have made significant contributions to many areas of the hospital as part of the Foundation's past capital campaign, with a focus on psychiatry, pulmonary diseases, medical imaging and research on ovarian cancer and Alzheimer's disease. When the family learned a new MRI was the JGH Foundation's highest fundraising priority, and that it could have an enormous impact on the health of thousands of Quebecers, they moved into action. Indeed, the Colas outdid themselves by making their largest combined gift ever to the hospital for the acquisition of the latest MRI technology for the Department of Radiology. MRI is indispensable for the early detection and accurate diagnosis of a number of conditions, notably cancer. It is particularly important at the JGH, owing to our very busy Segal Cancer Centre and its designation by the Quebec government as a Breast Referral and Investigation Centre for breast cancer detection. Furthermore, the single MRI currently in operation—acquired over 14 years ago, thanks to the generosity of private donors—is showing its age and is insufficient to meet the growing demand. The new, state-of-the-art MRI will help to provide faster, safer diagnosis and care to more patients, when it is installed in early 2015.

# 4th Doctors' Gala raises $1.1 million for medical research



From left: Danièle and Roderick R. McInnes with Michèle Dionne and the Honourable Jean Charest.

The JGH Foundation held its 4th Doctors Gala honouring Michèle Dionne and the Honourable Jean Charest and benefiting the Lady Davis Institute of the JGH on November 19, 2013, at ARSENAL, Montreal.

Co-chaired by Sonny Gordon (Dundee Corporation), Tony Loffreda (RBC) and Joan Prevost (Groupe Sutton, Westmount), the elegant, black-tie dinner/dance drew a sell-out crowd of 600 guests, including JGH physicians, researchers, nurses and community and hospital leaders, as well as generous supporters and friends of the Jewish General Hospital.

The soirée, coordinated by Annette Goldman of the JGH Foundation, and beautifully produced and designed by the incomparable Michael Caplan (Sensix Communications and Events), along with Danielle Bitton (Seal Productions), Lorne Levitt (Total Entertainment) and Ruth Hubermann (CommDesign), began with an upscale cocktail hour in the fabulous Art Gallery of the ARSENAL, featuring various food stations, as well as hors d'oeuvres galore by Chefs Daina and Kim (RYU) and Chef John Winter Russell. Guests were then ushered into the spectacularly decorated ballroom for a delicious dinner by chefs Mo and John Winter Russell.

Following the words of welcome from Howard Dermer, Chair of the JGH Foundation, and the three event chairs, guests were wowed by an impressive performance of "Joy to the World" by singers Rick Hughes and Nancy Lane (lead singer of the evening's dance band, Night Shift), accompanied by the young dancers from Dans Atout. On a centre stage, Tocadeo (four tenors and a violinist) performed three moving songs as guests experienced an immensely inspiring video of patient testimonials, created by Neil Oakshott (Eclipse Productions). Rounding out the evening was a unique, outstanding video featuring insightful observations about medical research from many personalities, including LDI Director Dr. Roderick McInnes and LDI Deputy Director Dr. Gerald Batist, followed by moving words from Ms. Dionne and Mr. Charest.

The Gala raised $1.1 million, the proceeds of which will be allocated to medical research at the Lady Davis Institute. We thank our Lead Sponsor, Desjardins Group—which had many representatives from the head office and various branches attending the event—the SAQ and the many individuals, companies and groups whose generosity and commitment have contributed to making the Gala one of the most memorable and successful fundraising events of the year.

**We acknowledge with gratitude all of the sponsors for their support, with a special thank you to the following major sponsors:**

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## Desjardins Group honoured for its commitment

From left: JGH Foundation President and CEO Myer Bick; Dr. Gerald Batist, Director of the Segal Cancer Centre and Deputy Director of the Lady Davis Institute; JGH President Rick Dubrovsky; Dr. Ernesto Schiffrin, Physician-in-Chief and Chief of the Department of Medicine; JGH Foundation Chair Howard Dermer; Stéphane Achard, Senior Vice-President and General Manager, Business and Institutional Services, and Card and Payment Services, Desjardins Group; the Honourable Jean Charest; JGH Executive Director Dr. Lawrence Rosenberg; and Dr. Roderick McInnes, Director of the Lady Davis Institute.

On November 6, 2013, a special reception was held to acknowledge and celebrate the $1 million commitment by the Desjardins Group to the JGH. With this significant contribution, Desjardins Group becomes the lead sponsor of the Foundation's annual gala for a period of 10 years, starting in 2012. "It is thanks to the ongoing support and commitment of corporate citizens like Desjardins Group that the JGH can continue to provide superior medical treatment and compassionate care to patients from all backgrounds in Montreal, across Quebec, and beyond," said Foundation Chair, Howard Dermer. "On behalf of the JGH and especially its patients, I would like to thank Desjardins Group for its outstanding efforts and for playing such a key role in helping the JGH to realize its dreams of providing the best care for all."

## *Ain't Misbehavin'* preview raises $110,000 for leukemia and lymphoma research

On September 29, 2013, 296 guests attended an exclusive preview showing of the Tony Award-winning Broadway production of the Fats Waller musical, *Ain't Misbehavin'*, at the Segal Centre for Performing Arts, courtesy of Copa de Oro Productions and its CEO, Allan Sandler. The evening was a celebration of the uniquely fruitful partnership between the Jewish General Hospital's devoted medical staff and its many friends and supporters within the community—a partnership which has and continues to empower the team of the JGH Division of Hematology to perform miracles and save lives every day. The event raised $110,000 net from sponsorships, thanks in no small part to the generosity of Allan Sandler, who covered all of the costs associated with the exclusive preview. These funds will support the Hemovascular Research Axis in the Lady Davis Institute at the JGH, and the groundbreaking research of Dr. Nathalie Johnson, in particular. Her research focuses on understanding how to overcome resistance to chemotherapy in patients with hematological cancers. She uses novel sequencing technology to identify genes that may contribute to therapeutic resistance, and she validates this information by using cell lines and mouse models. Her models are then used to test which alternatives are most effective in these different biological settings. This research may pave the way for more personalized cancer care and directly help patients with leukemia and lymphomas.

From left: Mrs. and Mr. Tony Broccoli, JGH Foundation President and CEO Myer Bick, Dr. April Shamy, attending staff member, and Dr. Stephen Kaplan, Director, JGH Division of Hematology, and Mr. and Mrs. Allan Sandler.

## Justin Trudeau inspires the JGH's next generation of leadership

Liberal Party of Canada Leader Justin Trudeau was the guest of honour at a cocktail and networking event focusing on leadership, active citizenship and youth empowerment, held by the JGH Foundation's Next Generation Committee on October 4, 2013.

From left: Next Generation Committee Co-chair Giancarlo Salvo with Justin Trudeau, Leader of the Liberal Party of Canada.

Speaking to the crowd of young professionals and entrepreneurs, Mr. Trudeau commended them for all of their hard work in promoting and supporting the JGH. He reminded the group of the importance of getting involved in good causes—whether local or global—since the achievements of young people today can have a tremendous impact on changing the world. "Those of you here today represent what we can achieve when we commit ourselves to community service and leadership," said Mr. Trudeau. "Together we will move this country forward."

The JGH Foundation and its Next Generation Committee would like to thank the following generous sponsors for supporting this special event: the **Greenbaum Family**, **Spiegel Sohmer**, **CBRE**, **Galleria Management Corporation**, **Aldo Group**, and **Telenuage**.

## Teenager on a mission

Jacob Grover was born weighing 964 grams (2 pounds, 2 ounces) on Dec. 12, 1997, in the Neonatal Intensive Care Unit (NICU) of the Jewish General Hospital. "For the first 10 weeks of his life, the very supportive and caring staff of the NICU not only took excellent care of our son, but became a second family to us during this critical time," says his mother, Gilla Geiger. Now 16, Jacob is a confident and healthy teenager with a mission. "For my family and me, the JGH is a very special place and we feel indebted to the hospital," he says. "I wanted to do something to give back to the hospital for what it has done for me." First he established the Jacob Grover Fund for the NICU by registering on the JGH Foundation's website, which enabled him to set up his own click-to-donate website. Then he organized a 20-kilometre cyclothon on May 26, 2013, attracting 25 cyclists and raising more than $7,600 for the NICU—well above his initial goal of $5,000. For Jacob, though, this is just the beginning, as he has big plans for the future. "I plan to make this an annual event, getting bigger every year," he said. "In a few years, we'll be closing the streets."

Jacob Grover with Dr. Apostolos Papageorgiou, JGH Chief of Pediatrics and Neonatology.

The second annual cyclothon will take place on June 15, 2014. For more information, please contact Jacob at grovercyclothon@gmail.com, or call the JGH Foundation at 514-340-8251. A donation of $25 per rider or $50 per family is all that is required to take part in this fabulous event. It is also possible to make a donation online at jghfoundation.org/donate/GJ045A.html.

Events

# Community action

**Throughout the year, the JGH Foundation hosts or benefits from a wide variety of events that call upon all of us to support initiatives that empower the Jewish General Hospital. This enables the JGH to save lives, improve patients' quality of life and provide the most vulnerable members of society with the care they need.**

## Past events

**9th Annual Lila Sigal Hockey Marathon**
September 7, 2013 – Samuel Moscovitch Arena
Co-Chairs: Farrel Miller and David Sigal
Raised over $74,000 for the JGH Cancer Nutrition and Rehabilitation Program
More information: jgh.ca/en/cancernutritionrehabilitationprogram or marathonhockey.com

**4th Annual Fall Fling**
September 19, 2013 – Chez Rosalie Restaurant
Organized by the Young Philanthropists of the JGH Foundation
Raised over $27,000 to acquire endoscopic equipment for the Division of Radiation Oncology

***The Big O* presented by Gloria's Girls Next Generation**
September 19, 2013 – Club Entourage
Co-Chairs: Hillary Freedman and Laura-Pearl Spivack
Raised over $10,000 for the Gloria Shapiro Endowment Fund for Ovarian Cancer Research

**4th annual Christine Kelly Memorial Fund for Translational Research Golf Tournament**
September 21, 2013 – Hemingford Golf Club
Organized by Jeff and Jenna Saray with friends and family
Raised over $25,000 for the McGill Centre for Translational Research, located in the Segal Cancer Centre at the JGH and aligned with the Lady Davis Institute at the JGH
More information: jgh.ca/en/translationalresearch

**Ain't Misbehavin'**
September 29, 2013 – Segal Centre for the Performing Arts
Raised $110,000 net for the Hemovascular Research Axis, particularly the research of Dr. Nathalie Johnson, at the Lady Davis Institute at the JGH
**Special thanks to Allan Sandler and Copa de Oro Productions**

**Selwyn House Gryphon Gala**
October 4, 2013 – Selwyn House School
Donated $25,000 for the VIVO Fund for the Neonatal Intensive Care Unit
**Special thanks to Selwyn House School**

**Gloria's Girls presents the 2nd "A Night at the Theatre", featuring The St. Leonard Chronicles**
October 6, 2013 – Centaur Theatre
Co-Chairs: Maxine Shapiro Rosenblatt and Susan Bercovitch
Raised over $60,000 for the Gloria Shapiro Endowment Fund for Ovarian Cancer Research

**OCT8 Fundraiser**
October 8, 2013 – O Coiffure & Spa in Ogilvy's
Raised $2,000 for the JGH Breast Cancer Centre
**Special thanks to Tony Sawaya and his team**

**4rd Annual F*** Cancer Fundraiser**
October 11, 2013 – L'Olympia
Organized by the Greenbaum family
Raised $11,400 net for the Segal Cancer Centre at the JGH

**Le Festin de Babette**
November 1, 2013 – Entrepôt Dominion
Organized by Johanne Demers and the Festin de Babette Organizing Committee
Co-Chairs: Pierre R. Brosseau and Normand Beauchamp
Raised $227,000 for the Aging Research Axis, especially research into Alzheimer's disease, at the Lady Davis Institute at the JGH

**3rd Annual Pulmonary Hypertension Walk for Breath**
November 3, 2013 – Downtown Y
Organized by Dr. David Langleben and the Division of Cardiology
Raised $20,000 for the Pulmonary Hypertension Laboratory

**4th Doctor's Gala, honouring Michèle Dionne and the Honourable Jean Charest**
November 19, 2013 – The Arsenal
Co-Chairs: Sonny Gordon, Tony Loffreda and Joan Prévost
Raised nearly $1.1 million for medical research at the Lady Davis Institute at the JGH

**15th Annual AHEPA Saint Valentine's Ball, in honour of Dr. Apostolos Papageorgiou**
February 15, 2014 – Le Château Royal
Organized by the American Hellenic Educational Progressive Association
Raised $50,700 for the acquisition of a Giraffe incubator for the Neonatal Intensive Care Unit
**Thank you to Effie Sapuridis, George Meletakos and the AHEPA Family**

**3rd Annual Bowl-O-Thon for Translational Research**
February 16, 2014 – Laurentian Lanes
Raised over $4,000 for translational research at the Segal Cancer Centre at the JGH
**Special thanks to Sharon Wolfe**
More information: jgh.ca/en/translationalresearch

**2nd LUNGevity Masquerade Party**
April 3, 2014 – WAVE Complexe Dompark
Organized by Fraida Saxe and the LUNGevity Committee
Benefiting lung cancer research
Amount raised unavailable at press time

It is immensely gratifying to know that together we can accomplish great things to help people throughout Montreal and Quebec for many years to come. To support any of the events and/or initiatives described in these pages, please contact the JGH Foundation at 514-340-8251. Donations can also be made at jghfoundation.org. If you are interested in organizing a fundraising event, please contact Mary Etzitian, Coordinator, Third Party Events, at 514-340-8222, ext. 3986.

***Thank you for making a difference!***

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## Upcoming events

**MAY 1 & MAY 3**

**JGH CIBC Athletic Day and Party**
Athletic Day: May 1 – McGill Athletic Facilities
Party Night: May 3 – 5350 Ferrier Street
Co-Chairs: Carl Bélanger, George Granata, George Itzkovitz, Demo Trifonopoulos and Gary Wechsler
Benefiting the Department of Urology and the Starlight Foundation
Contact: Rana Saheb, 514-340-8222, ext. 5889

**MAY 26**

**1st Annual Luxury Avenue**
Circuit iCar
Co-Chairs: Stéphane Bismuth, Danielle Bitton, Bernard Poulin and Natalie Voland
Benefiting the acquisition of a second MRI, the Rapid Assessment Zone of the new Pavilion K Emergency Department, and the Neonatology Intensive Care Unit
Contact: Mary Etzitian, 514-340-8222, ext. 3986
More information: luxuryavenue.org

**JUNE 2**

**22nd Annual Silver Star Mercedes-Benz JGH Golf Classic, honouring CGI**
Chair: George Sakkas
Elm Ridge Golf & Country Club
Benefiting the integration of the new Perioperative Information Management System upgrade in the new Pavilion K operating rooms
Contact: Stephanie Roza, 514-340-8222, ext. 2587

**JULY 5-6**

**6th Enbridge Ride to Conquer Cancer**
Co-Chairs: Gerald Issenman, Eric Ouaknine and Sam Scalia
Benefiting cancer research, treatment and care at the Segal Cancer Centre at the JGH
**Special thanks to our National Title Sponsor, Enbridge**
Contact: Siobhan O'Brien, 514-340-8222, ext. 3069
For more information: 1-866-996-8356 or conquercancer.ca

**AUGUST 23-24**

**10th Annual Pharmaprix Weekend to End Women's Cancers**
Honourary Chair: Sheila Kussner, O.C., O.Q.
Chair: Anne Mezei
Benefiting breast and gynecologic cancer research and care at the Segal Cancer Centre at the JGH
**Special thanks to our National Title Sponsor, Pharmaprix**
Contact: Siobhan O'Brien, 514-340-8222, ext. 3069
More information: 514-393-WALK (9255) or endcancer.ca

**SEPTEMBER 6**

**10th Annual Lila Sigal Hockey Marathon**
Samuel Moscovitch Arena
Co-Chairs: Farrel Miller and David Sigal
Benefiting the JGH Cancer Nutrition and Rehabilitation Program
Contact: Tiffany England, 514-340-8222, ext. 5467
More information: jgh.ca/en/cancernutritionrehabilitationprogram or marathonhockey.com

**SEPTEMBER 17**

**2nd Annual Auto Moda Cocktail and Fashion Show**
Les Ruelles (Intercontinental Hotel)
Co-Chairs: Angelo Rizzolo and Julia Taddeo
Benefiting the VIVO Fund for the Neonatal Intensive Care Unit
Contact: Mary Etzitian, 514-340-8222, ext. 3986
More information: vivofund.com

**OCTOBER 19**

**10th Anniversary Gloria's Girls/*It's a Girl Thing* Event**
Rialto Theatre
Benefiting the Gloria Shapiro Endowment Fund for Ovarian Cancer Research
Contact: Mary Etzitian, 514-340-8222, ext. 3986

## Lose weight while building strength

Ever notice how our first thought is "cardio" when we're trying to lose weight? "Okay, I'll have more cake, but that means 10 extra minutes of cardio tomorrow!" It's our first impulse, but should it be?

Consider strength training, which is also a good strategy for weight loss. And don't fall for the common misconception that it'll make you look like Arnold Schwarzenegger. In bodybuilding, the body is developed through diet and exercise with the goal of competing. Strength training, on the other hand, combines weights with exercise to build lean muscle tissue. In fact, strength training benefits people of all ages, as long as it's performed safely and is tailored to one's age and fitness level.

According to the Canadian Physical Activity Guidelines, adults should perform strength training exercises at least twice a week. That's because it…

- **helps prevent and manage chronic illnesses, such as diabetes, and helps lower blood sugar levels**
- **increases metabolism (which helps to lose weight), lean muscle tissue, balance and overall energy**
- **strengthens bones**

Lucy Pereira, a kinesiologist in the Herzl CRIU Walk-In Centre at the JGH, is an especially firm believer in interval training, which incorporates strength training and cardiovascular exercises, and gives you the benefits of both. So the next time you opt for a second helping, consider the alternatives to work it off.

More information on interval training is available from the Heart & Stroke Foundation; go to www.heartandstroke.com and type "interval training" in the Search field. To view the Canadian Physical Activity Guidelines, go to www.csep.ca, click on the Guidelines tab and click on "Get the Guidelines".

## Take your medication with information

Drug safety matters, which is why, as patients, it's up to us to learn all we can about our prescribed or over-the-counter medications. On the whole, we tend to be careful with our prescriptions, but even over-the-counter drugs can have side effects (such as insomnia) or contra-indications (certain natural products). So when you pick up your medication, be sure to read the information sheet, which includes details about side effects, contra-indications, the proper means of storage, the expiry date, and more.

Another place to turn is the website of the JGH Patient and Family Resource Centre (PFRC), where you'll find a list of resources about drugs—for instance, Health Canada's page on medication and health products. Visit **jgh.ca/en/pfrcmedications** for links to all of the recommended sites.

The database for the Patient Education Network Collection, which you'll find on the PFRC page (**jgh.ca/pfrc**), also contains a list of pamphlets—produced by the JGH Pharmacy Department and the JGH Psychiatry Department—about specific drugs. Use the Search field to enter the names of medications or any subject that interests you.

Finally, remember that it's very important to check with your pharmacist or doctor to be sure you're taking your medication correctly.

To make an appointment for a JGH librarian's help in finding reliable and timely information (especially on hard-to-research subjects), please call 514-340-8222, extension 2453 or 2438, or e-mail library.jgh@mail.mcgill.ca. For more information about any aspect of health, visit the Patient and Family Resource Centre at **jgh.ca/PFRC**.

Jewish General Hospital

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