

VITAL SIGNS



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Chair, Department of Medicine*



“It was the best of times, it was the worst of times”. The ironic opening line of Dickens’ novel of the French Revolution, *A Tale of Two Cities*, could serve as an apt description of our current situation in the Department of Medicine.

It is the best of times. We’ve just been ranked as one of the best universities in the world and we continue to find ourselves at the top of the Maclean’s list of Canadian universities. Even if a bit overstated, we can’t help but rejoice that we are consistently rated as one of the best universities despite very limited resources. More practically, we were recently told that the Quebec government has finally given formal approval to the functional and technical plan for the MUHC Redevelopment Project. Two consortia have already been qualified to bid on the contract for a public-private partnership to build the new installations at the Glen site. Moreover, the arrival of Dr. Papadopoulos as Director of the MUHC Research Institute is starting to bear fruit with increased involvement of individual researchers in the administration of the RI, a change that helps assure its future success. At

the JGH, Dr. Hartley Stern has been appointed as the incoming Director General. Dr. Stern, a surgeon who served as Vice-President of the Ottawa Hospital Regional Cancer Centre, will take on his new role in the spring of 2008. We hope this change will help the Jewish continue its development as a leader among Quebec’s health care institutions. Finally, McGill has just launched

, Assistant Professor in the Division of Infectious Diseases, has been recognized by the CIHR with the

, for his important contribution to the

its comprehensive campaign, which will help us build on the excellence and international reputation of our university.

It is the worst of times. While the announcement of progress in the MUHC development plan is welcome, we still have to put up with outdated facilities for many more years. Similarly, while the arrival of a new Director General at the JGH is encouraging, up to now the construction of new buildings has taken priority over the support and development of academic faculty there. In particular, the Lady Davis Institute is in need of attention. Let's hope that the incoming JGH administration will prioritize the renewal of this important research centre. Our greatest challenges relate as always, to our efforts to renew the department's faculty. We have become used to the PREM, which frequently hinders us from developing our clinical services in a way that ensures both clinical and academic excellence. Unfortunately, we now have to deal with limits on University hiring. Eight years and almost 800 professors later, the University has decided that it has grown enough. From now on, the Provost will require proof of a departure before allocating a recruitment number; a "jumelage" system almost identical to that we have enjoyed with the PREM. Moreover, it turns out that before the freeze was announced, the Faculty of Medicine had already committed itself to hire professors for the Life Sciences Complex located adjacent to the McIntyre building. In effect, this means that departures from the Department of Medicine are not guaranteed to be replaced; the Faculty plans to use positions freed up by departures to meet its pre-existing hiring obligations.

No doubt, the coming year will bring both opportunities and problems, like all years do. Happily, we are not living during the Terror and, as far as we know, there is no Robespierre in the MSSS. Indeed, a glance at this issue of *Vital Signs* shows just how much success we have managed despite our constraints. We will continue to capitalize on the opportunities that present themselves and will look for ways to minimize the negative impact of limits imposed by the government and the University. We will push forward, ensuring that the Department of Medicine maintains its role as leader of the Faculty of Medicine and McGill University.

Dr. Vicky Tagalakis
GIM Program Director

In June 2006 the Division of
General Internal Medicine
(GIM) launched the Clinical Scholars Program

translational research within the McGill RUIS. For its part, the McGill University GIM program has long recognized that its trainees are well positioned to become clinical research leaders given their extensive knowledge base and insight into health care issues. The Royal College of Physicians and Surgeons of Canada report, *Working Group in General Internal Medicine*, identified internists as specialists uniquely equipped to make a significant impact in health services research. The program has always encouraged its trainees to devote the eleven flexible periods of their fellowship toward formal training in critical thinking and quantitative and qualitative research methods, through coursework in the Departments of Epidemiology, Biostatistics and Occupational Health, Medical Education, and Economics and completion of a scholarly project. The creation of the CSP continues the tradition of clinical research training in GIM but in addition, provides a formal and structured curriculum and exposes its residents to clinician scientist role models and mentors.

The first year of the CSP has been a success largely due to highly motivated trainees and committed research supervisors and mentors. In 2008, six new GIM trainees will enter the program. This critical mass sets the stage for the establishment of formal links between the CSP and other departments, the expansion of the seminar series and the development of special interest workshops.

For more information, please visit: www.mcgill.ca/internalmed/teachingactivities/clinicalscholarsprogram/

*Dr. Jean-Jacques Lebrun
Associate Professor and
Director, HCRU*

, within the MUHC Division of Endocrinology and Metabolism, is located at the Royal Victoria Hospital. With five principal investigators, three associate members and their teams, the Unit is an important research group in the Department of Medicine. Members of the Unit are the recipients of numerous awards

and play key roles in Canadian and International research organizations.

Our work is aimed at understanding the molecular mechanisms by which cytokines, hormones and growth factors transduce their signals in living cells through the assembly of signaling networks. Defining these signaling complexes is critical as their alteration is knmpment ofPro8 Tw 10elarch Ugh cells through n

We are pleased to welcome _____ as Assistant Professor in the Departments of Oncology and Medicine and as the Director of the [Cancer Nutrition and Rehabilitation Program](#). Dr. Jagoe is a pulmonologist who has engaged in both clinical and laboratory research into the problem of muscle wasting in the cancer context. He will be based at the JGH.

We are happy to welcome _____ as Assistant Professor to the Division of Infectious Diseases of the SMBD-JGH. Dr. Zaharatos is a Montrealer and a graduate of McGill. He is certified in Internal Medicine, Infectious Diseases and Medical Microbiology. He underwent post-doctoral training in HIV research at the Aaron Diamond AIDS Research Center in New York. His return to the JGH will allow him to meld his basic science HIV expertise with his clinical proficiency in order to improve patient care and promote research into HIV and related viruses.

It is with great pleasure that we announce the arrival of _____ a newly awarded Tier 2 CRC recipient, as an Assistant Professor in the Division of Cardiology of our Department. Dr. Lehoux obtained her PhD in Pharmacology at the University of Sherbrooke. She pursued postdoctoral training in intracellular signaling in Rochester, NY and in vascular research at the INSERM unit of Lariboisière Hospital where she worked for the past 6 years. Dr Lehoux's arrival enhances the vascular biology research team at the Lady Davis Institute, where she is based, and strengthens cardiovascular research within McGill University.

We are pleased to announce that _____ has joined the Division of General Internal Medicine. Dr. Daskalopoulou did her medical training at the University of Athens Medical School and went on to complete her MSc in vascular technology and medicine at the Imperial College of London, UK, and her PhD in vascular biology at the University of Athens. She recently completed a post-doctoral fellowship in clinical epidemiology at McGill. She will be based at the MGH.

Congratulations to the members of our Department who were recently promoted to Full Professor.

Dr. Clarke studies epidemiologic aspects of systemic inflammatory disorders and allergic diseases. More recently Dr. Clarke has extended her work to examine the societal impact of peanut allergy in children and has been coordinating an international effort to investigate the risk of malignancy in systemic lupus erythematosus patients.

Dr. Goldberg's research has covered many different aspects of clinical and environmental epidemiological studies, with current work focused on clinical epidemiological issues in cancer care.

Dr. Petrof studies disorders of the respiratory muscles including the application of gene therapy to the treatment of Duchenne's muscular dystrophy. Dr. Petrof has also made significant contributions to the field of sleep medicine.

Dr. Pilote's research is focused on the clinical epidemiology of cardiovascular diseases. She and her group have contributed to a number of important observations in the areas of quality of life, outcomes research, and health care delivery.

Dr. Richard studies signal transduction, with particular attention to specialized domains in a variety of kinases. His recent work has focused on arginine methylation as a mechanism regulating protein-protein interactions and he has applied his work to the fields of HIV, multiple sclerosis and cancer.

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