The Clinician Scientist: Bridging the Gap Between Medical Research and Clinical Practice

NEW AT THE JGH The Psychiatry Outpatient Day Hospital: Ensuring the timely provision of specific care and treatment to patients in crisis

RESEARCH & DEVELOPMENT Applying artificial intelligence to cancer diagnosis

COMMUNITY ACTION Inspiring events and initiatives with a big impact
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Medical science is constantly evolving through research, and health care is constantly improving when research progresses from the laboratory to the clinic.

“Clinic scientist scientists bridge the gap between research and clinical practice by identifying novel and clinically relevant questions at the patient’s bedside that inspire and inform their research,” said Dr. Mark Eisenberg, Director of the Cardiovascular Health Services Group at the Jewish General Hospital, Senior Investigator at the Centre for Clinical Epidemiology, and Director of the MD & PhD Program at McGill University. “Our clinician scientists have made remarkable contributions to health care innovation in Canada and abroad.”

Research accounts for why cancer patients are living longer today than ever before; why AIDS has gone from a fatal affliction to being treatable as a chronic illness; why, according to Statistics Canada, life expectancy at birth increased from 57 years in 1921 to almost 82 years in 2011.

Playing a crucial role in furthering advances in medicine are clinician scientists, those physicians with additional training to perform basic and translational research, as well as clinical trials and epidemiological studies. The Jewish General Hospital, through the Lady Davis Institute, is endowed with an exceptional roster of clinician scientists who care for patients while seeking solutions to some of the most vexing problems they encounter in order to improve outcomes and enhance quality of life.

“At a hospital such as the Jewish General patients have the opportunity to participate in clinical trials of the most promising therapies—a significant benefit of being treated at a research hospital,” said Dr. Roderick McInnes, Director of the Lady Davis Institute, and, himself a clinician scientist. A noted geneticist, Dr. McInnes is renowned for discoveries related to the genetics of retinal disease and learning disabilities. “Our clinicians and researchers work in close proximity and collaboration to deliver the best and most innovative care.”

Over the following pages you will meet just a few of the clinician scientists at the JGH, learn about their specialties and what inspires their constant striving for better care for all.
medical student at McGill and collaborators within the LDI that I can approach with questions to refine research ideas. This has enabled me to bring in over $2 million as principal investigator and over $30 million in research collaborations to support research in obstetrics gynecology and women’s health. As well, I’ve had the privilege to supervise medical students, residents, fellows, and graduate students on research projects as they embark on their careers.”

**DR. JONATHAN A/F/ILALO**

Dr. Jonathan Afilalo is a cardiologist specializing in the care of older adults with heart disease. His research focuses on developing and implementing accurate measures of frailty in order to improve outcomes for high-risk patients requiring cardiac surgery or transcatheter procedures.

“Research is a vehicle to ask and answer scientific questions for the betterment of our patients’ health, longevity, and quality of life.

“The end goal is always to apply the fruits of our research to patient care, and I have seen frailty evolve from an esoteric research concept to a mainstream clinical concept that cardiologists and cardiac surgeons rely on to help make difficult treatment decisions.

“To deliver individualized patient-centered care, it is important to diagnose and treat the heart, but it is equally important to consider muscle mass, strength, nutrition, cognition, and mood. The resiliency of the individual is often driven by the latter, which we collectively call their level of ‘frailty.’ Our research is seeking to discover new ways to assess, prevent, and even reverse frailty in older adults with heart disease in order to promote successful aging and improve physical and cognitive functioning.

“The JGH encourages and supports research, has a nationally-recognized integrated cardiovascular unit, and serves one of the oldest patient populations in Montreal, so it is an ideal setting to pursue the field of geriatric cardiology’. Among my colleagues, I’ve been fortunate to have excellent collaborators, whether cardiologists, surgeons, geriatricians, nurses, physiotherapists, nutritionists, or bench researchers. This multi-disciplinary team-based approach provides a fertile environment for combining research and patient care.”

**DR. LYSANNE CAMPEAU**

Dr. Lysanne Campeau is a McGill trained urologist with a Ph.D. in Pharmacology and Physiology from the Wake Forest Institute for Regenerative Medicine in North Carolina. In her clinical practice, she specializes in female pelvic medicine, incontinence and urogenital reconstructive surgery. Her research lab studies the physiology and pharmacology of the lower urinary tract and the underlying mechanisms of voiding dysfunction.

“As a medical student, I discovered early on my interest in pelvic and abdominal surgery and chose urology because it gives me the best of both worlds—it allows me to build long term relationships with patients of all ages and both genders, and I can offer them medical and surgical options that vastly improve their quality of life.

“I have the distinction of being the first woman urologist who completed her entire residency at McGill University. When I did my residency, few women worked in the field but today, approximately 20% of urologists in North America are women and that number is expected to increase.

“I’ve always had a research mindset. I enjoy the challenge of asking the right questions that will directly impact patient’s lives, and strive to answer these questions in my lab. My research training gives me a well-rounded perspective—I can see the forest and not just the trees.

“I enjoyed working at the JGH during my residency, and was thrilled to accept a position in its Urology Department after completing my specialty training in the United States. I also was particularly pleased to have the opportunity to build my research laboratory in a collegial and stimulating environment at the Lady Davis Institute. It’s profoundly rewarding and humbling to treat and research urinary incontinence—an often neglected condition that affects a vulnerable population. Being a surgeon-scientist allows me to be in a position to translate these research results into better patient care.”
Dr. William Foulkes is a molecular geneticist whose research focuses on inherited susceptibility to cancer, with particular emphasis on breast, colorectal and ovarian cancers. He is also a clinician, who has been in charge of the Cancer Genetics Clinic in the Stroll Family Cancer Prevention Centre of the Segal Cancer Centre since 1996.

“If I did only fundamental research in the lab, without seeing patients in the clinic, I wouldn’t know if a question was worth investigating from a clinical point of view. While, if I were only a clinician, I would know what question to ask, but could not begin answering it in the laboratory. Being both a clinician and scientist gives me a fuller picture and allows me to try to make meaningful advances in all aspects of cancer management, particularly relating to prevention.

“For example, I was able to identify founder mutations in genes such as MSH2, which is an important cause of hereditary colon cancer in the Ashkenazi Jewish population, and PALB2, which is linked to an increased risk of breast cancer, because I had noticed that several patients who were seen in our clinic, reporting origins from the same population group, had the same mutations. This opened the door to developing genetic testing to identify individuals at risk, and to treatments that specifically target the mutant genes, hopefully improving the odds for patients to survive their cancer and enhancing their well-being by giving them a measure of control over their disease.

“The reason I am at the JGH and LDI is the openness to the clinician scientist combination. Dr. Gerald Batist who is Director of the Segal Cancer Centre, Dr. Rod McInnes who is Director of the Lady Davis Institute, Stroll Cancer Prevention Centre Chief Dr. Michael Pollak, and Surgical Oncologist Dr. Richard Margolese have long recognized the value of translational research—that is, research that aims to translate findings in fundamental research into medical practice and meaningful health outcomes—and pushing you to do more. As soon as we discover something in the lab that is solid, we are able to offer it to patients.

“I became interested in oncology because of early clinical exposure when I was a medical student, while my focus on the history of patients and their families, taken together with the molecular aspects, led me to study genetics. Combining medical care and lab research is the best way to ensure that patients benefit from any new knowledge as quickly as possible.”

Dr. Marie Hudson is a rheumatologist and epidemiologist who treats patients with systemic inflammatory diseases such as scleroderma (a chronic autoimmune disease that hardens connective tissue throughout the body) and myositis (inflammation of the muscles). As co-founder of the Canadian Scleroderma Research Group, a multi-centre, pan-Canadian cohort of 1,500 patients, she has conducted ground-breaking research in this area. Her additional research interests include rheumatoid arthritis and lupus.

“Rheumatology appealed to me in part because of the complexity of treating challenging diseases that often affect multiple organs such as the lungs, skin and gastro-intestinal tract, and in part because it’s a specialty that allows me to establish long-term relationships with my patients. In addition, the ability to ask and answer questions is what has always attracted me to research. As a clinician, I take care of my patients with existing knowledge, and as a researcher, I generate new knowledge to take better care of them.

“As I was completing my residency, Dr. Murray Baron, Chief of the JGH Division of Rheumatology, invited me to help set up and launch the Canadian Scleroderma Research Group (CSRG), funded by the Canadian Institutes of Health Research. It’s often difficult for those of us working in the field of rare diseases to obtain research funding, so this was an exciting opportunity to have a positive impact, and it motivated me to do a three-year post-doc in epidemiology in order to obtain the necessary training to conduct high level research.”
“Through the CSRG, I contributed to landmark studies on various aspects of scleroderma, including health related quality of life. We showed that, on average, people with scleroderma have health related quality of life scores that are in the bottom 15% of all scores. This sort of information provided strong impetus to develop ways to improve their health related quality of life. Since my patients report that hand problems have a huge negative impact on their health related quality of life, we are now developing a self-help tool to improve hand function in scleroderma.

“My patients are a constant source of inspiration, providing me with the questions that need to be answered, and always enthusiastic to participate in my research projects. I am tremendously grateful to them. At the same time, they know this disease first-hand and understand that we need to do things better. Research is essential for progress.”

As a clinician scientist I get involved in bringing cutting edge treatments to our patients, which also often gives faster access to care. For example, 75% of the seniors waiting for psychotherapy services in our catchment area’s CLSCs (which can be a 6-12 month or longer wait), were able to benefit from our recent clinical trial of mindfulness-based cognitive therapy (MBCT). The study found that MBCT significantly improved late-life depression and anxiety, and is now being offered throughout our CIUSSS as a clinical service to patients.

“People don’t like the idea of having a mental health issue because our mind is so central to our perceptions of who we are. I would say that over the past five years we are starting to see some of the stigma associated with mental health fade. Mental illness is common and it’s essential to treat. Geriatric psychiatry, in particular, has been under-served, with 50% of people with mental illness expected to be aged 60+ by 2030.

“Our psychiatry department has a real family feel to it, based on kindness and empathy. The JGH Foundation has been instrumental in supporting our efforts to offer trials to our patients. I believe our meditation trials have a huge potential for promoting wellbeing. It’s a very exciting new method for giving people the resilience for better mental and physical health.”

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“Here at the Jewish General Hospital, there is tremendous collaboration with colleagues from other departments who have a high level of expertise in their respective fields and who are equally invested in research. The hospital’s Lady Davis Institute is very supportive as well. It’s the perfect environment to push the boundaries of science. I strongly believe that what’s good for science is good for patients. I encourage all my students to consider research. I tell them that the sky is the limit! I think combining clinical care and research is the best way to help our patients.”

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Dr. Brent Richards is an endocrinologist whose research program focuses on identifying the genetic determinants of common age-related diseases, including osteoporosis, type 2 diabetes, and coronary artery disease.

“In the clinic, I have the opportunity to help thousands of people over my career, which is immediately rewarding. Research, however, holds the promise of helping millions of people by opening doors to new avenues for treatment. For example, our team has identified new genes associated with osteoporosis, which can now be studied for their potential as drug targets.

“My clinical work is a source of information that enables me to ask better questions, and I can then go about seeking the answers that will be impactful in the clinic. We’re always looking to complete that loop of going from bedside to bench and back to bedside.

“We are in a privileged position at the JGH and LDI to be able to feed off the intellectual curiosity of one another and take advantage of an exceptional range of talent, pursuing innovative collaborations with people who have different expertise and diverse interests. This makes our work better and more creative.

“The course of my research has been determined by those things that inspire me and the mentors who have shaped my career. In terms of aptitude, I gravitated to endocrinology because it is a type of practice that allows you to follow a patient over time. I enjoy quantitative methods, so I was drawn to those studies that employ big data. In that regard, I’ve been fortunate to match my interests with my skill sets.”

Dr. Alexander Thiel is a neurologist who treats stroke patients and conducts research on novel therapies to enhance their recovery.

“I always wanted to do biomedical research, and neuroscience was one of the most fascinating specialties in which to pursue this interest. Being able to see how the living human brain responds to treatments and reorganizes itself to improve its function inspired me to search for better ways to boost this incredible potential and help stroke patients to recover faster and better.

“Science has developed very effective treatments to save stroke victims when they are brought to the hospital in time. However, they are often left with severe deficits. My clinical research employs the most advanced imaging techniques to localize the regions of the brain that have suffered damage and to apply non-invasive stimulation techniques to form new pathways that could help the patient regain motor and speech skills.

“Our stroke unit at the Jewish is the only facility in Canada to have a trans-cranial magnetic stimulator and rehabilitation facilities right on the ward. This allows us to do clinical trials in the very early phase after stroke, which is a huge advantage for our patients.

“I strongly recommend that patients who are eligible for clinical trials consent because they will benefit from the additional monitoring that accompanies scientific studies. Every participant receives the highest standard of care plus, potentially, an intervention that will prove more effective. Even those who are randomized into the group that does not receive the active treatment benefit because they are being so closely observed and we may pick up changes in their condition that might be missed in routine exams. And, of course, future patients will profit from the
Dr. Té Vuong is a radiation oncologist who conducts cutting-edge research to find targeted therapies for cancer—colorectal and gastrointestinal cancers in particular. She is also Chief of the Segal Cancer Centre’s Division of Radiation Oncology.

“Radiation oncology is a very technical specialty that involves the controlled use of radiation to treat cancer either for cure, or to reduce pain and other symptoms caused by cancer. It leaves plenty of room for creativity and imagination to develop novel approaches and new protocols that will help deliver the radiation to patients in the most efficient and safest way possible.

“From the perspective of a medical professional, the main goal is to cure illnesses. For patients, it goes beyond that. They want to be cured with as few side effects as possible to preserve their quality of life. Doing what is best for patients and finding solutions to the issues they raise is what motivates me to conduct research.

“For example, working with a team of engineers and researchers from Polytechnique Montréal, we are developing a new way of administering cancer-fighting drugs directly into tumours—where they will be most effective and produce fewer or no side effects—, using bacteria-based nanorobots guided by magnetic resonance. The technology was there, but the engineers did not know how it could be exploited for medical purposes. Acting as a bridge between the lab and the patient, I was able to see how the technology could be of help to patients and guide research efforts accordingly.

“I am also conducting a pilot study on a new protocol for stage 2 rectal cancer patients. Called Morpheus, after the god of dreams, it aims to optimize the delivery of radiation by combining standard chemo-radiation with brachytherapy which delivers radiation internally to remove the tumour without patients having to undergo surgery. This would benefit very elderly patients, for whom surgery is too risky, as well as younger patients who want to avoid the potential negative effects of surgery on their quality of life.

“Doing research also means being part of an international network of like-minded individuals who contribute a different perspective, share knowledge and collaborate with one another, making it possible to achieve tangible results more rapidly.

“I work the same number of hours as a regular physician, which means I have to devote much of my personal time to actually conducting research. The outstanding level of support afforded to me by the Lady Davis Institute, the Segal Cancer Centre and the JGH Foundation allows me to do so, and it’s well worth it. Because when the day comes for me or my family to need care, I would want them to be able to benefit from the very best.”

Talking to Children about Cancer

We are pleased to introduce this great new Hope & Cope resource for young families in which a parent has cancer.

To download your free copy, visit our web site: hopeandcope.ca/young-adults-young-families/en-famille

For more information, call Sandy Lipkus, 514 340-8222, ext. 22591
NEW AT THE JGH

The Psychiatry Outpatient Day Hospital
Ensuring the Timely Provision of Specific Care and Treatment to Patients in Crisis

Dr. Zoë Thomas

The newly expanded and restructured Psychiatry Outpatient Day Hospital, previously located in the windowless basement of the Institute for Community and Family Psychiatry building, and now on the sixth floor of Pavilion B, is enabling the JGH Department of Psychiatry to immediately treat patients who are experiencing a mental health crisis, instead of having them wait in the Emergency Department.

An estimated 20% of Canadians will experience mental illness at some point in their lives, and two-thirds of these will never receive treatment. Mental illness is the leading cause of hospital admission among Canadians between 15 and 34 years of age, and the second-leading cause of hospital admission for those 35 to 44. With an aging population and the rise of chronic diseases, mental illness will also likely increase.

The Day Hospital is an intensive treatment program for acute psychiatric illness for young, adult and geriatric patients. Treatment is oriented toward helping patients resolve acute mental health problems, in order to return to their prior level of functioning. This is accomplished through intensive psychiatric management, individual and group therapy, and occupational and physical therapy activities. The goals of Day Hospital treatment are to promote recovery, help patients regain autonomy and social functioning, and assist them in avoiding or shortening inpatient admissions.

The new Day Hospital plays a key role by offering an alternative to inpatient treatment for those who come to the Emergency Department, and by providing an opportunity for the earlier discharge of patients who require only a brief hospital stay.

“The Day Hospital fills an important gap in our mental health services by providing a transition between the community and the inpatient unit,” says Dr. Zoë Thomas, a graduate of the McGill psychiatry residency program, who is currently completing a fellowship in trauma-focused therapy at the University of Toronto and has been the Day Hospital’s psychiatrist since September 2018. “Our clinical goal is to enable people in acute distress to swiftly regain a solid footing without compromising their independence. The brand-new facility will allow us to do this in a warm, healing space. I believe that by offering an intensive, holistic treatment program to the people who need it, at the opportune time, we can have a positive impact on their well-being and their future.”

With more space, natural lighting and the addition of appropriate activity areas and a gym, the new Day Hospital provides an environment that promotes active recovery, allowing for a treatment approach that engages mind and body. It also includes a Peer and Family Support Centre, established in partnership with AMI-Quebec Action for Mental Illness. This Centre provides a space for peer workers—people who have recovered from mental illness who act as role models and coaches for patients in active treatment—as well as for families to receive education on mental illness and how to support family members who are affected by psychiatric problems. Peer support can help to reduce hospitalization and symptoms, offer social support and improve the quality of life for people living with mental health problems and illnesses.

“Most people with mental illness recover well and are able to lead fulfilling lives, provided they are diagnosed and receive appropriate, ongoing treatment and support as early as possible,” says Dr. Karl Looper, Chief of Psychiatry at the JGH. “Timely intervention is of the essence to facilitate the prevention of mental illness and for recovery, before difficulties escalate to more serious negative outcomes. For that to happen, the appropriate mental health services must exist and be accessible to affected people and their families when and where they need it most. Hence, the vital importance of the new Day Hospital. We are deeply grateful to the chairs, committee members, participants and sponsors of the Mindstrong fitness event and Peace of Mind initiative, as well as to the other private donors, whose generosity and commitment have made this new facility possible.”
New System Shortens Hospital Stays by Streamlining Discharge Process

Patients in several units at the JGH are now able to leave the hospital earlier, thanks to an innovative, interdisciplinary project that has significantly streamlined the discharge process.

This means patients can return home or be transferred elsewhere—for example, to a rehabilitation hospital or an intermediate residence—at the appropriate point in their recovery, and not remain at the JGH any longer than necessary. As a result, beds become available sooner to accommodate new patients, and optimal use is made of healthcare funding.

Statistics compiled by Isabelle Aumont, Chief of Information Management, show that the average patient who returned home from one of the JGH Internal Medicine Units in December 2017 had spent 10 days in that unit—down substantially from the 13.7 days spent by patients in that unit in December 2016.

The positive results were achieved by implementing a variety of initiatives, including the creation of an interdisciplinary lead team that redesigned the discharge process under the co-leadership of Mary Lattas (Associate Director of Multidisciplinary Services) and André Poitras (Associate Nursing Director).

The following figures compare the average length of hospital stays for patients who returned home in December 2017 and those who went home the previous February:

- 13 days in the Family Medicine and Oncology Unit, a sharp drop from 22.6 days
- 3.6 days in the Orthopedics Unit, a reduction from 6 days
- 7.1 days in another Internal Medicine Unit, a decrease from 13.7 days

Ms. Lattas notes that hospital stays are also shorter among patients who are transferred from the JGH to other healthcare facilities.

She adds that in some units, the average length of stay may sometimes increase, owing to the types and severity of the illnesses that are treated. Nevertheless, she says, the general trend is toward shorter stays.

The improvements were achieved mainly by revising and restructuring the roles and responsibilities of certain nurses and allied health professionals, such as the Assistant Chief of Physiotherapy, the Coordinator of Occupational Therapy and the Coordinators of Social Services, Ms. Lattas says.

Maxine Lithwick, Coordinator of Social Services and Professional Practice, explains that the project “has improved the whole trajectory of care, starting at admission. For example, instead of finding out a day or two before a patient’s discharge that we should be considering a transfer to a rehabilitation facility, this option is discussed much earlier, so that the right plan is in place well in advance of discharge.”

A major benefit of these changes is that clinicians at the bedside are left with more time for patient care, explains Lynn Gillespie, Assistant Chief of Physiotherapy. “Previously, some of the clinicians either weren’t dealing with the barriers at all, or they were dealing with the barriers by taking time away from the patient’s direct care.

“Now if a bottleneck appears, it’s managed for them, instead of the therapist or nurse having to leave the bedside and go off to call a CLSC or a rehab facility or a doctor, or to ask a lab why a test hasn’t been performed.”

Before being discharged from the JGH Medical Day Hospital, Helen receives advice and encouragement from Kathryn Baldwin (right), a Discharge Planning Nurse, and from Occupational Therapist Vanessa Fedida.
New Leadership Re-energizes Hope & Cope

Two-thousand-and-eighteen has been a year of leadership transition at Hope & Cope as Suzanne O’Brien retired after 21 years with Hope & Cope, the past 15 as Executive Director, and settled into her new role as Chair of Hope & Cope’s Executive Advisory Committee.

At the same time, the organization welcomed Danielle Leggett, who was appointed Executive Director in May, 2018. A human resources professional, Ms. Leggett is passionate about motivating people to perform at their best with a focus on collaboration, discipline, evaluation and continuous improvement. As she elaborates, “I am excited to grow and evolve the skills and capabilities of our team of volunteers and staff so that, together, we can implement effective work practices, align our services with the needs of the community and enhance our external visibility, all while ensuring that we remain financially viable.”

In reflecting on a career filled with many highlights, achievements and milestones, Mrs. O’Brien is particularly proud of Hope & Cope’s Cancer Wellness Centre (the first hospital-affiliated centre of its kind in Quebec); the organization’s influence on palliative care volunteerism both here at the JGH and at a national level; its unique programming for young adults with cancer (a highly vulnerable, often neglected demographic) and the generation of scientific knowledge through its expanded research division.

As Chair, Mrs. O’Brien’s primary goal is to keep donors, volunteers and lay leaders engaged while recruiting new Board members who will champion our cause in the broader community. “Hope & Cope has a stellar reputation as a leader in peer based support for those living with cancer. We make an impact and we make a difference.”

Career Awards for Two Medical Leaders

Two of the JGH’s leading physicians, Dr. Saul Frenkiel and Dr. David Rosenblatt, have received career awards from their respective professional associations.

Dr. Frenkiel, former JGH Chief of Otolaryngology - Head & Neck Surgery, was given a Lifetime Achievement Award by the Canadian Society of Otolaryngology - Head & Neck Surgery, while Dr. Rosenblatt, JGH Chief of Medical Genetics, has received the 2018 Founders’ Award for Career Achievement from the Canadian College of Medical Geneticists.

Dr. Frenkiel, who joined the JGH in 1976 and led his department from 1992 to 2011, is a Full Professor in the Faculty of Medicine at McGill University, where he was Chairman of the Department of Otolaryngology - Head & Neck Surgery from 2002 to 2017. He also served as President of the Canadian Society from 2006 to 2007.

In addition, Dr. Frenkiel made international headlines in 2010 for having correctly diagnosed the throat cancer of movie star Michael Douglas after other physicians had missed it.

“This recognition is unexpected, but very welcome,” says Dr. Frenkiel. “Many people have contributed to our specialty, so I feel touched to have been chosen for this honour.”

Dr. Rosenblatt, who is a Professor at McGill University in the Departments of Human Genetics, Medicine, Pediatrics and Biology, also holds the Dodd Q. Chu and Family Chair in Medical Genetics at McGill.

In making its announcement, the College noted that Dr. Rosenblatt’s distinguished career encompasses medical practice, research, teaching, administration and scholarly activity. He has also raised awareness about medical genetics across Quebec and throughout Canada.
At the JGH, Dr. Rosenblatt was instrumental in the creation of the Department of Medical Genetics in 2005, making it the first such department in a hospital in the McGill teaching system.

Dr. Rosenblatt was Chair of McGill’s Department of Human Genetics from 2001 to 2013. He has also served as President of the Society for Inherited Metabolic Disorders, the Canadian Society for Clinical Investigation, and the Association of Medical Geneticists of Quebec. He is a Fellow of the Canadian Academy of Health Sciences and Correspondant étranger of France’s National Academy of Medicine.

Dr. David Rosenblatt

PATIENT EXPERIENCE

Free TV Services for Patients in Hemodialysis, Oncology and Palliative Care

For the past year-and-a-half, patients who make regular visits to the JGH for treatment and those who are in the hospital for a prolonged stay have had access to free basic television services at the bedside, thanks to an innovative partnership with the Mosino Corporation, a hospitality platform for healthcare, hotels, long-term care centres and condominiums. This includes patients who have to undergo hemodialysis three times a week at the Steven & Sandra Mintz Nephrology Centre, those who receive regular treatments on the eighth floor of the Segal Cancer Centre, and those in Palliative Care.

The bedside terminals can be configured to offer much more than basic TV services. They provide patients with entertainment and patient education functions on demand, such as access to Wi-Fi, the internet, Netflix, video-on-demand, mobile games, radio and other features that help pass the time at a reasonable price. The technology can also be used for healthcare purposes, providing doctors and nurses with quicker and safer access to vital medical and personal information about patients right at the bedside, including medications and imaging results. The terminals will also enable patients to control the lights in their room, open or close window blinds, order food from the hospital’s kitchen, call a nurse or perform other actions that contribute to their comfort and security.

“We are a private company and, as such, we are driven by profit,” says Zeeshan Butt, Vice-President at Mosino. “However, when you find yourself in a situation where you are able to provide something that does not cost very much, but has a huge impact, then you have to do it. You strike a balance, with a company making positive change and giving back to the community. Patients in Dialysis, Oncology and Palliative Care are not like regular patients; they have no choice but to come repeatedly or remain constantly at the hospital. TV provides these vulnerable patients with a much-needed diversion and it enhances their comfort. It’s the least we can do.”
A government-subsidized day care centre will soon be launched at the Jewish General Hospital, with 80 spaces for the children of staff of CIUSSS West-Central Montreal.

Much of the renovation has already been completed to the interior of Pavilion N, a stand-alone building on Côte-des-Neiges Road, just south of de la Peltrie. Information about registration and a launch date is expected in the coming weeks.

At a news conference at the JGH on June 4, Luc Fortin, Minister of Families, called the new facility “a win for parents, a win for the employer, a win for the residents of this neighbourhood and, in general, a win for all of us in Quebec.”

Pierre Arcand, Minister responsible for Government Administration and Ongoing Program Review, Chair of the Treasury Board, and MNA for Mount Royal, said he is “very pleased with the announcement today, which will enable us to ensure the well-being of the employees and of the citizens mainly in Côte-des-Neiges, and to respond to what has been requested by a lot of citizens.”

Beverly Kravitz, Director of Human Resources, Communications, Legal Affairs and Global Security for the CIUSSS, said the announcement demonstrates “what can be achieved when we all work together as partners.”

Ms. Kravitz and Dr. Lawrence Rosenberg, President and CEO of the CIUSSS, also stated: “The well-being of staff, which includes work-life balance, is a priority of our CIUSSS. “Since this day care centre will be located near the workplaces of many of our CIUSSS’s employees, it will undoubtedly contribute to improving the quality of life of the families whose children will be enrolled.”

Two views of the renovated space in Pavilion N that will serve as a day care centre for the children of staff of CIUSSS West-Central Montreal and neighbourhood families.

A Quick Guide to Some Jewish Customs and Traditions at the JGH

From the day it opened in October 1934, the JGH has welcomed patients and staff of all religious and cultural backgrounds. So why was it necessary to build a Jewish General Hospital?

The unfortunate fact is that during the earliest decades of the 20th century, Quebec society was less enlightened than it is today. Religious and social prejudice prevented Jewish patients from being treated in most Montreal-area hospitals, while Jewish doctors and nurses who faced job discrimination had no choice but to leave Montreal.

To alleviate these difficulties, the leaders of Montreal’s Jewish community, backed by the people they represented, formally decided in 1929 to provide a great deal of the funding (along with government support) to build a hospital that would honour Jewish traditions, customs and ethical principles. At the hospital’s core would be Jewish values, including a reduction of pain and suffering, compassion for all, and respect for the dignity of each individual and for the sacredness of life itself.
At the same time, the founders pledged that the JGH would be open to patients and staff of all backgrounds—a principle that served as an example of religious tolerance and was eventually accepted in healthcare institutions throughout Montreal and Quebec.

Since the JGH continues to embrace many Jewish customs and traditions, it may leave some people scratching their heads. To clear the air, here are the answers to a few of the most frequently asked questions.

**Why can’t I get a ham sandwich in any of the food outlets? Why won’t anybody sell me cheese with my hamburger?**

The JGH adheres to “kashrut”, a broad and sometimes complicated set of Jewish religious dietary laws. These include prohibitions against consuming certain types of animals (e.g., pork, shellfish), plus a ban on serving dairy and meat foods at the same meal (or even cooking them with the same utensils). However, these practices apply mainly to the availability and preparation of food in the JGH’s kitchen and food outlets.

**Why are the gift shops and food outlets closed on Saturdays and on certain other days?**

Sabbath, which begins at sundown on Friday and ends one hour after sundown on Saturday, is a sacred day of rest and prayer among observant Jews. Most forms of work are not allowed, including driving, shopping and handling money, with similar rules for several of the Jewish festivals. However, none of these rules applies when medical care must be delivered.

**What are some of the main Jewish festivals?**

- **Rosh Hashanah**: New Year, also considered the birth of creation (usually in September)
- **Yom Kippur**: the Day of Atonement, a sombre day of penitence that includes a 25-hour fast (September)
- **Sukkot**: commemorating the biblical sheltering of the Israelites in the wilderness after their exodus from slavery in Egypt (October)
- **Chanukah**: candles are lit to remember the rededication of the Jewish Temple in 165 BCE after its desecration (December)
- **Purim**: a joyous occasion, with costumes and an abundance of food, that commemorates the defeat of a plot to massacre the Jews of ancient Persia (March)
- **Passover**: celebrating the biblical exodus from slavery in Egypt and the birth of the Jewish nation (April)
- **Shavuot**: commemorating the giving of the Torah—i.e., Jewish religious law (May)

**Why do these festivals fall on different dates every year?**

The Jewish calendar follows a lunar cycle, in which a month is 28 or 29 days long. As a result, the lunar year (roughly 354 days) and the commonly used solar year (365 days) don’t match up. To keep the two types of years aligned, one of every several Jewish years is lengthened to 13 months. This “fine-tuning” means, for example, that a Jewish festival that begins in late March in one year may begin in mid- to late April the following year.

**What is a mezuzah?**

A mezuzah is a small, hollow box—made of wood, plastic, metal, ceramic or glass—that contains a hand-written scroll inscribed with brief biblical passages. This item is affixed, usually by nails or tape, to the doorpost of every room (except washrooms) of Jewish homes and institutions. It reminds those who live or work there of their connection to God and their heritage.

**I noticed a chapel in the hospital. Who can use it?**

Anyone. The chapel resembles a small synagogue, but it’s open to people of all faiths. Located on the sixth floor of Pavilion B, the chapel is open 24 hours a day. It is also used on most weekdays for the Jewish afternoon prayer service.

To contact Rabbi Nissim Barak Hetsroni, the hospital’s Chaplain and Spiritual Advisor, call 514-340-8222, ext. 25677.


![JGH's Spiritual Advisor, Rabbi Nissim Barak Hetsroni, lighting the Hannuka candles during a staff celebration in the main lobby.](image)

Small jars of honey are distributed by the JGH to its staff on Rosh Hashanah to wish them a sweet Jewish New Year.
Quantum Physics Meets Jewish Mysticism

Though their approaches differ, science and religion share the aspiration of uncovering the truth about how the universe came to be, where it is going, and what our place is within it.

“Religious insight derives from interpretation of sacred texts and revelation; scientific truths from experimentation,” points out Dr. Hyman Schipper, a clinical neurologist at the Jewish General Hospital and researcher at the Lady Davis Institute. An Orthodox Jew, he has been studying the convergence of teachings found in the Kabbalah, the body of mystical Jewish texts, and quantum mechanics, a discipline at the cutting edge of physics capable of glimpsing the very origins and fabric of the Universe.

“Although the lexicons invoked are radically different, I’ve been struck by how mainstream Kabbalistic concepts dating back many hundreds of years often anticipated discoveries of 20th century quantum physics,” he insists. In one such example, Dr. Schipper published evidence of a remarkable congruence of meaning between an ancient Kabbalistic construct (translated from the Hebrew as the ‘Unknowable Head’) and Heisenberg’s Uncertainty Principle (1927), a pillar of quantum mechanics. More recently, Dr. Schipper demonstrated striking parallelisms between the “holographic universe” theory of the renowned physicist, David Bohm (1917-1992) and the principles of Hitlabshut (en-sheathment) and Hitkallelut (inter-inclusion) which lie at the heart of Kabbalistic doctrine.

Dr. Schipper believes that science, especially quantum physics and recent consciousness studies, is rapidly converging with ancient mystical truths. “I believe that the Torah contained this fundamental, albeit hidden, knowledge all along. But only in recent times did we achieve the capability to support these aspects of the Torah through scientific inquiry. In a sense, scientists have begun verifying what the mystics have been saying about the nature of reality for millennia.”

Dr. Schipper’s research on this topic was initially published in Yeshiva University’s Torah u-Madda Journal (16/2012-13) and more recently in Unified Field Mechanics II (RL Amoroso et al. (eds.), World Scientific, 2018), demonstrating its interest to religious and scientific scholars.

Applying Artificial Intelligence to Cancer Diagnosis

A pioneering research program at the JGH is connecting the power of artificial intelligence (AI) and radiomics—to heighten the effectiveness of cancer treatment by gleaning as much information as possible from radiological imaging technology.

The goal of the program, directed by Dr. Reza Forghani in the Segal Cancer Centre at the JGH, is to improve diagnostic accuracy, better predict which treatment will work best, and possibly even reduce the need for invasive biopsies, which are expensive, time-consuming and uncomfortable for the patient.

AI takes advantage of machines’ capacity to learn by using dynamic algorithms to enable new data to be assimilated on top of existing data to continuously refine knowledge. Radiomics is a growing field of medical study, in which greater amounts of information are extracted from medical images and the patient’s electronic medical record, with the potential to uncover deeper layers of disease characteristics.

Used together, AI and radiomics aid in personalized cancer treatment by providing more information about an individual patient’s tumours, thereby helping oncologists to develop a customized course of treatment with a much better chance of success.

“In preliminary studies, the algorithms that we are formulating in radiomics allow us to elucidate molecular
and other important features of the tumour with great precision,” says Dr. Forghani, a JGH radiologist and clinician scientist. “This provides us with information beyond what the most skilled physician can accomplish with the naked eye. We believe these models may enable us to better predict what is the most appropriate and least invasive treatment for an individual patient.”

Dr. Forghani says AI is also very exciting, because “it is helping us deal with a significant problem: physicians are finding it increasingly difficult, if not impossible, to integrate the large amount of information in a patient’s medical chart and scans in a way that is tailored to the individual patient’s care.

“Machine learning offers an opportunity to compare information that is derived from one patient’s tumour with all of the data that has been accumulated from a vast array of tumours, in order for us to predict how a comparable tumour is likely to progress.”

Eventually, he says, the JGH should serve as a hub for radiomics and other medical applications of machine intelligence, in collaboration with other academic institutions inside and outside Quebec.

Dr. Forghani adds that while the current focus of this program is on cancer diagnosis, many of the AI tools that are developed in this process have potential for broader applications—extending to non-oncological diagnostic and therapeutic prediction models, quality, safety and the cost-effective use of healthcare resources, in which the JGH can also play a pioneering role.

$10 Million Gift Strengthens McGill’s Commitment to Brain Research, Young Researchers and Faster Results for Patients

A transformative gift of $10 million from the Irving Ludmer Family Foundation in support of the Ludmer Centre for Neuroinformatics & Mental Health will expand the Centre’s internationally renowned role in brain research and establish a Global Brain Consortium of leading research institutions. The consortium will focus on sharing research methodologies and results, with the goal of accelerating the finding of novel and ground-breaking solutions to mental health and neurodegenerative diseases.

The $10-million Ludmer Centre Heritage Fund will also support the Ludmer Centre’s mandate to advance a big-data approach to brain research, and to boost the work of emerging young researchers at the Centre. The gift brings the Ludmer Family Foundation’s total support of the Ludmer Centre to $18 million.

The Ludmer Centre for Neuroinformatics & Mental Health was established in 2013 as a partnership between the Montreal Neurological Institute and Hospital (The Neuro), the Douglas Mental Health University Institute, and the Jewish General Hospital’s Lady Davis Institute to improve the prevention, diagnosis and treatment of mental disorders through innovative research.

According to the Canadian Mental Health Association, in any given year, one in five Canadians will experience a mental health problem or illness.

“Today the world is ready to do things for those struggling with mental health and neurodegenerative disorders. There isn’t a family that hasn’t been touched by this issue,” said Irving Ludmer, BEng’57, president of the Irving Ludmer Family Foundation, and a long-time supporter of McGill.
“Through our philanthropy, my family and I want to help broaden input to the Ludmer Centre and also share its research with scientists around the world who are working toward the same goals. The power of computers is growing exponentially and the Ludmer Centre has the tools and expertise to leverage that potential for the benefit of patients – today, and tomorrow.”

“This gift will allow us to build strong collaborative research teams with constant input from many perspectives to ensure the work is realistic, grounded, necessary and innovative,” said Celia Greenwood, an expert in quantitative-life-sciences statistics, senior scientist at the Lady Davis Institute and a scientific director at the Ludmer. “The creative, risk-taking ideas of young researchers will be supported through the Ludmer Family Foundation gift, allowing these ideas to be tested and to develop.”

Meaning-Making for Patients with Advanced Cancer

Dr. Melissa Henry

The challenges of mortality and determining the meaning of one’s life must eventually be faced by everyone. A cancer diagnosis forces this reckoning unexpectedly, and often prematurely. Dr. Melissa Henry, a psychologist with the Louise Granofsky Psychosocial Oncology Program at the Segal Cancer Centre, and Dr. Robin Cohen, a senior investigator at the LDI, are recruiting patients newly diagnosed with advanced cancer for a clinical trial of a meaning-making intervention to test its effect on their adjustment to, and coping with, end of life issues.

“We want to determine what helps patients adapt to the life changes brought about by an advanced cancer diagnosis,” said Dr. Henry. “Health care generally focuses on the physical needs brought on by disease, but the emotional, social, and spiritual dimensions also require attention. As people deal with new limitations on their bodies, they become anxious over existential concerns and making sense of what it means to have lived, their legacy, regrets, relationships.”

Meaning-making—that is, to discover the meaning of one’s life in the face of a difficult prognosis—can afford the skills necessary to take advantage of the moments one has in the present while readjusting to the idea of a future that may be attenuated.

Dr. Henry is recruiting 471 patients at the JGH and MUHC to participate in a randomized controlled trial. To qualify, one must be over 18, diagnosed within the preceding two months with a stage 3 or 4 cancer, and still be able to care for most of one’s personal needs, with occasional assistance if required. Participants will either be assigned to usual care (the control group), meet with an empathic listener, or receive the intervention from a trained psychotherapist or social worker (exact details of the intervention are withheld to prevent bias).

“We expect that people meeting the empathic listener will benefit as well,” she said. “It can be difficult to find an objective, empathic listener in one’s life because those closest to the patient become, themselves, emotionally involved and don’t always quite know how to react.”

Psychosocial support is a vital aspect of cancer care. It can provide the skills to enhance quality of life and help a person get the most out of their lives even as they deal with the reality of illness and mortality.

To participate in the trial or refer a patient, please contact Maggie Costa at 514-340-8222 ext. 26756 or margarida.costa@mail.mcgill.ca.
The McGill Cancer Nutrition-Rehabilitation Program

A Vital New Dimension in Cancer Care

Established in 2002, the McGill Cancer Nutrition-Rehabilitation (CNR) Program is a key component of the JGH’s Segal Cancer Centre. Led by Dr. Thomas Jagoe, the program provides treatment for patients suffering from cancer-related loss of appetite, weight and function, as well as increased fatigue. Left unchecked, these problems can lead to malnutrition, progressive muscle wasting, compromised immune function, potential therapy intolerance and, ultimately, death.

Approximately 120 new patients are enrolled in the program each year, with the majority suffering from lung or gastrointestinal cancers and, increasingly, from hematological cancers, advanced breast cancer and other cancers. Patients are referred by their treating oncologists, and a minority come from outside the JGH’s catchment area, as the CNR clinic is classified by the Quebec Program for the Fight Against Cancer as a supra-regional centre providing the highest level of care and treating the most complex cases.

Treatment at the CNR clinic is provided by a multidisciplinary team that includes a physician, nurses, dietitians and physiotherapists. It focuses on personalized nutritional assessment and counseling and on customized rehabilitation programs, as well as symptom management strategies. These approaches are designed to complement any anti-cancer therapies that directly attack the tumour.

The program is unique in that it is integrated with cancer care. “While the oncology team focuses on cancer, we concentrate on addressing nutritional deficiency and improving physical function, as well as other issues, such as overall patient well-being and helping the patient navigate the healthcare system,” Dr. Jagoe says. “It enables cancer patients to participate more extensively in their treatments, reduces the impact of cancer on them and their families, and allows them to maintain dignity and daily function, while enjoying a better quality of life.”

“Without this program, my rehabilitation would be much harder and take much longer,” says Marc F. Tremblay, a patient with advanced lung cancer who is undergoing immunotherapy and has benefited from the CNRP since October 2017. “It is helping me to get back in shape and build energy, so that I can continue receiving my treatments. I have also regained a measure of autonomy and self-confidence, which boosts my morale and allows me to take care of myself to a greater extent. This means one less thing to worry about for my family, which is great.”

The CNR clinic has close ties with many other departments, as well as with Hope & Cope, a volunteer-based organization which provides a wide range of psychosocial support and educational programs for cancer patients and their families. The CNR team also conducts research aimed at understanding the underlying reasons behind the nutritional and functional difficulties of patients with cancer. Its goal is to enhance or improve outcomes for these patients.

“I don’t think we can deliver high-quality cancer care without the services provided by the CNR,” says Dr. Jagoe. “We make a vital contribution to overall care and the success of treatment. However, there is still work to do to ensure that cancer patients are automatically directed to us when problems arise from the effects of their condition and treatment.”

As cancer treatments improve, the number of patients needing active rehabilitation after treatment is increasing. Furthermore, many factors that cause weight loss in cancer patients are also present in a wide variety of other serious chronic illnesses, such as advanced heart disease, chronic lung disease, chronic renal failure, AIDS, and wasting syndromes associated with aging. As a result, any successful therapies that are introduced by the CNR may have broader implications for improving the well-being of patients and families who face challenges associated with other chronic illness.

The CNR is funded, in large part, by private donations. The continued generosity of donors is crucial to supporting the research, education, training and administrative activities of this unique program. Donations can be made at jghfoundation.org or by calling the JGH Foundation at 514-340-8251.
Giving Fragile Infants the Chance of a Lifetime

Former JGH Preemie on Track to Becoming a Physician

Several years ago, Dr. Lajos Kovacs, a JGH neonatologist, noticed an anxious-looking mother at the Karen & Murray Dalfen Neonatal Intensive Care Unit. She was peering at her prematurely born infant who was in an incubator and connected to a ventilator.

Instinctively, Dr. Kovacs understood the woman’s nervousness and made his way toward her, trailed by a high school student who was shadowing him for the day. Grinning and pointing at the 16-year-old student, Dr. Kovacs said to the mother, “You see this guy? He was born at 24 weeks in our NICU at 625 grams, and look at him now! He’s going to be a doctor some day.” A gentle smile crossed the woman’s face and the sparkle returned to her eyes, comforted that a baby in distress could grow up to be healthy and strong. Dr. Kovacs was right about the teenager at his side. Today Angelo Rizzolo is 24 years-old and in his third year of medical school at McGill University.

Earlier this year, Angelo completed rotations in numerous departments as part of his training. But his heart lies with Pediatrics and Neonatology, since he naturally looks up to his role models, Dr. Kovacs and Dr. Apostolos Papageorgiou, JGH Chief of Pediatrics and Neonatology, who cared for him 24 years ago. However, he remains open to gaining experience in every medical specialty as he continues his training. It was at a JGH reunion of former preemies who had “graduated” from the NICU, that Dr. Papageorgiou presented Angelo with a neonatal stethoscope to congratulate him on his decision to become a doctor and to encourage him in his studies.

In 1999, after having witnessed first-hand the care at the NICU and to help enhance the status of the NICU as a centre of excellence for high-risk neonatal care, the grateful Rizzolo family joined with the JGH Foundation to establish the Vivo Fund. Its motto is “Giving fragile infants the chance of a lifetime”, and it takes its name from the Latin phrase “in vivo”, referring to the analysis of cells or tissues “within the living”.

By August 2018, the Vivo Fund had raised more than $100,000 through events such as fashion shows and jazz performances. It was Angelo Rizzolo’s involvement with the fund as a teenager that made him realize he could contribute to Neonatology not only through fundraising, but as a clinician.

Now that he’s back at the JGH, he’s taking advantage of this opportunity to get involved with the JGH Auxiliary’s Tiny Miracle Fund, which provides life sustaining equipment for the NICU. “As I go through medical training, I’ve learned a lot about how small changes can make a meaningful impact on parents’ and babies’ lives. Vivo and the Tiny Miracle Fund are vehicles to implement some of those changes.”

Angelo is particularly interested in the Tiny Miracle Fund’s newest project, Books for Babies, offering volunteer readers as well as providing parents with a new children’s book to take home after their child is discharged from the NICU. Angelo explains that “often when infants are in incubators, the parents are not able to touch them or hold them for a long time and encouraging parents to read to them can be a coping mechanism and improve bonding”.

“Some of the babies don’t have parents visiting on a regular basis, so having Auxiliary volunteers read to them, is very special,” says Nancy Rubin, Auxiliary Director. The doctor-in-training hopes to take this project a step further. “My goal is to have a committee of former preemies to serve as volunteers helping to improve the lives of families who are going through a very difficult time and to pay it forward by giving infants the same chance we were given,” he says. Angelo expects to begin his residency in 2020. “I really do think that life comes full circle, so I just might end up coming back to the hospital where I was born.”
On July 7 and 8, the Enbridge Ride to Conquer Cancer marked its 10th anniversary by attracting 1,308 riders who raised over $4.8 million. The riders started their 200-kilometre ride from Repentigny near Montreal on Saturday, July 7 and arrived in Saint-Augustin-de-Desmaures on Sunday, July 8.

Over the past 10 years, the Ride has raised nearly $56 million benefiting the JGH’s Segal Cancer Centre and its partners across Quebec. The funds are essential to providing support for vital cancer research, treatment, care and prevention. It is Quebec’s largest multi-day cycling fundraiser and Canada’s largest peer-to-peer fundraising event.

“This weekend, we celebrate 10 epic years of commitment and passion,” said Myer Bick, outgoing President and CEO of the JGH Foundation. “Over the last decade, 15,351 participants have cycled with us. These numbers are impressive and, clearly, so are the results. On behalf of the JGH Foundation, I want to thank each participant, volunteer, crew member, donor and sponsor. You are the ones who fuel the life-changing outcomes made possible by the Ride.

“Funds raised through the Ride support our world-leading doctors, researchers and scientists. They, in turn, develop new technologies in the areas of molecular diagnostics, functional imaging, biomarkers, molecular target discovery and validation, and advanced targeted radiation therapy. The Jewish General Hospital is a trailblazer in Quebec when it comes to its focused and comprehensive approach to fighting cancer. Thanks to funding from the Ride, we are able to put in place the most promising cancer research programs and treatments. We are making great strides towards conquering cancer.”

“My brother passed away in 2017, shortly after receiving a brain cancer diagnosis,” says Michel Houle, a first-time participant from Laval, QC. “Only a few months later after losing him, I learned my other brother was diagnosed with prostate cancer. It was surreal. I could not help but feel discouraged, seeing how cancer had stricken the two strongest men. I felt helpless. There was nothing I could do—or so I believed in that moment.

“Soon after, I was able to get myself together, and that is when I decided I had to do something that would allow me to remain hopeful and be strong for my brother. I made a decision to join the Ride. I didn’t look back and I focused on my training. I am so proud to have been able to raise almost double my initial goal in only a few short months. In the Ride’s 10th year, I am riding for the first time. I am riding to honour my late brother and keep my other brother’s hope alive while he deals with his cancer. I dream that one day he and I will do the Ride together!”

Since 2011, Enbridge has been the title sponsor of the Ride to Conquer Cancer. Over 2,500 Enbridge employees, their friends and their families have raised almost $8.8 million for the Ride across Canada. “We are proud of our role as title sponsor for the Ride to Conquer Cancer. We’re committed to supporting the life-changing work that is taking place at the Jewish General Hospital, and we are pleased to announce that we’ve renewed our sponsorship agreement for the Ride. Congratulations to everyone involved in the success of the Ride’s 10th anniversary here in Quebec,” said Scott Dodd, Team Captain and Director of Business Development at Enbridge Gas Distribution.
Teaming Up to Conquer Cancer

Edith Cloutier, Regional Vice-President, Enterprise & President of Quebec for Rogers, and Mario Rigante, Senior Vice-President, Quebec Division, Canadian Personal & Business Banking at BMO, were the co-chairs of the 10th anniversary of the Enbridge Ride to Conquer Cancer. Each of them fielded a sizeable corporate team in the event, not only raising vital funds for the Segal Cancer Centre, but encouraging team-building among the employees of their respective corporations.

“I took part in last year’s Ride,” says Mrs. Cloutier. “It was such a wonderful experience and the cause is so important. When asked to become a co-chair, I didn’t hesitate. Cancer affects all of us and I wanted to make a difference.”

“Being a member of BMO’s team last year was a life-changing experience,” agrees Mr. Rigante. “Riding side by side with people who have cancer and who lived through it, knowing how much the funds help patients and their families, and the importance of finding a cure for cancer, inspired me to become a co-chair of this fabulous event.”

Mrs. Cloutier and Mr. Rigante actually challenged each other, and as a result, the Rogers and BMO teams doubled their number of participants compared to last year, with each raising over $100,000 for the cause.

Forming corporate teams to participate in the Ride also greatly benefits the corporations themselves. It showcases a company’s commitment to the health and well-being of the communities it serves and that of their employees. It also promotes teamwork and team-building, leading to improved morale, productivity, motivation and collaboration in the workplace. It also provides an opportunity to involve partners and customers in supporting a worthwhile cause and have them share in a collective success that benefits the entire community.

“Having a team in the Ride to Conquer Cancer has been great for BMO,” says Mario. “As a large bank with multiple departments, branches and services, having a Ride team enabled us to bring together employees who did not interact with one another on a regular basis, and have fun working together as a team to train, raise funds and complete the ride.”

“It’s incredibly rewarding to feel part of something bigger, to realize that we can achieve great things as a team and make a real difference in the lives of people,” adds Mr. Cloutier. “We loved the Ride!”

For more details, visit www.conquercancer.ca or call 1-866-996-8356.
Young or Old, Anyone Can Ride Against Cancer

At 16 years of age, Alexandra Vas was the youngest cyclist to take part in the Enbridge Ride to Conquer Cancer. For the first time, she accompanied her father who has been participating in the Ride for the eighth time. While she found fundraising and the 200 kilometre ride to be quite a challenge, Ms. Vas learned a great deal from the experience. She is very proud of what she achieved and of the impact it will have on others. “I had to be creative,” she says. “I hung posters to raise awareness about the cause and I sold home-made sweets in school for a month. Students were very generous when they knew the money was not for me, but to help people with cancer. I raised part of my $2,750 that way.”

For Ms. Vas, the Ride is truly a special event, in that it helps build awareness about the importance of regular exercise and a healthy lifestyle in the fight against cancer, while also raising essential funds for research and treatment. “Seeing so many people I don’t know cheering me on, screaming and supporting me along the way, was such a surprise. It made me realize how everybody is touched by cancer and that by getting involved, I can make a positive impact in the lives of others.”

Armand Cymbalista took part in the Ride for the seventh time and, at 84, was the oldest rider. “I am still riding because I like it and I know how to do it,” he says. “I am really riding for my wife, my brother, my father, my sister-in-law, my friends and for Cecil, who got me started biking in 1981—all of whom passed away from cancer.”

Mr. Cymbalista thinks he will continue riding because he feels that progress is being made in treating cancer and because if he stops others might, too. He is an inspiration for other riders on his team, which consists of 33 people who raised an impressive grand total of $185,000.

“To go through cancer treatment is much harder than a ride like this,” Mr. Cymbalista notes. “It’s relaxed. Everybody is into it. It’s not a race. You can take six hours to do it, if you wish. It doesn’t matter. What’s important is that you collect the funds, so that they can continue to do the research to find a cure. And if I can pass it on to younger people, I’ll be happy.”

Ms. Vas and Mr. Cymbalista are proof that anyone, regardless of age, can participate in the Ride, and that the actions of a single individual can make a big difference in the lives of many others.
The Jewish General Hospital Foundation’s 26th Annual JGH Silver Star Mercedes-Benz Golf Classic took place on May 28, 2018, at Elm Ridge Country Club. Co-chaired by Howard Dermer and Ted Matthews, the event attracted over 220 of Montreal’s foremost business and community leaders from all backgrounds. It was a splendid day and the people in attendance enjoyed a full day of exceptional golfing conditions and good food and drink.

This year we had the privilege of honouring our Hospital’s presidents, past and current, and we were fortunate that nine of our honourees joined us at the tournament. These dedicated volunteers have been the backbone of this great institution and we were proud to honour them.

The marquee event raised $620,000, thanks to the extraordinary commitment and hard work of the co-chairs, the organizing committee and the many people and institutions who demonstrated their respect and admiration for the JGH’s presidents. Proceeds from this year’s edition will be allocated towards establishing an endowment fund for recruitment to the Karen and Murray Dalfen Neonatal Intensive Care Unit, headed by Dr. Apostolos Papageorgiou. The generous support of our donors is what helps keep the NICU at the cutting edge, so that the Hospital can continue to deliver extraordinary life-saving care to hundreds of premature babies each year.

Since its inception, the Jewish General Hospital Foundation has raised over $20 million, thanks to the Golf Classic. These funds are needed to improve medical care, life expectancy and quality of life of the people of Montreal, Quebec and beyond.

The key to this success has been strong partnerships with Montreal’s corporate and financial services communities. More specifically, it is the leadership of these communities whose efforts ensure an impressive outcome. Past co-chairs and honourees include such pre-eminent Quebec and Canadian personalities as Morton Brownstein (Browns Shoes), Charles Larente (Scotia McLeod), the Broccolini Family (Broccolini Construction), the Honourable E. Leo Kolber (Claridge), Mel Ellen (G A Grier), Mark Smith (Pandion Limited), Michael Roach (CGI), Jacques Menard (BMO), the Schwartz and Segel families of Dorel, our friends from the Bruce Kent Group and RBC, last year’s four fabulous women—Claudine Blondin Bronfman, Diane Dunlop Hebert, Emmelle Segal and Lillian Vineberg, and the list now includes the Hospital presidents.

A very special thank you goes to the long-standing event host Silver Star Mercedes-Benz, Desjardins, this year’s Lead Sponsor, our dedicated co-chairs and our dynamic and ever-helpful partners at the JGH Auxiliary.
On July 12, 2018, grade 2 children attending Camp Allegria—a bilingual summer camp for children 5 to 16, run by the Leonardo da Vinci Centre in Saint-Léonard—organized a penny drive as part of the Cents of Hope charity, raising $252.44 in a single day for the Adolescent and Young Adult Oncology Program (AYAOP) at the Jewish General Hospital. Allegria was the first English camp in Montreal’s east end to integrate with the East Foundation for children with special needs, and strives to foster an atmosphere of caring and teamwork. It welcomes over 100 children each summer.

“Each week, we have a theme that most of our activities will revolve around,” says Assistant Coordinator Pamela Pagano. “That week the theme was heroes, but not comic book heroes or superheroes. Instead, we wanted to focus on real-life heroes. When the grade 2 monitors heard about the Cents of Hope campaign that my father, Biagio Pagano, has been organizing for close to 10 years, in support of the AYAOP, they related to the cause and were keen on helping adolescents and young adults with cancer.”

The AYAOP, created in 2003 and directed by Dr. Petr Kavan, is the first oncology program in Canada specifically designed to address the distinctive issues and needs of cancer patients aged 18 to 39, who have survival rates lower than those of children of pediatric age or mature adults. The program is mostly funded by private donations.

“My mother and father had cancer,” says Pamela. “So my father established a fund at the JGH Foundation and started the Cents of Hope charity as a way to give back. The goal was to collect spare change to donate to the AYAOP by placing containers at various points across the city, such as churches and schools, and by hosting fun events.”

The Camp Allegria grade 2 campers brought pennies from home and went around the camp with noisemakers to collect even more change. Even though promotion of the initiative was limited to a memo and word of mouth, children from other grades, their parents and a host of others stepped forward and their generosity ensured the success of the penny drive.

“That day, when we counted the pennies, everyone was cheering and crying at the same time,” recalls Pamela. “We were so proud! Grade 2 camp monitors Saverio Filippelli, Yolanda Gualdieri and Olivia Lieggi later visited the JGH with my father and me to present the cheque. They also had an opportunity to take pictures and understand why it is so vital to support such a program. Best of all, the children learned hands-on that their small change can make a big difference and that you’re never too young to start giving back to your community!”
On June 18, close to 500 guests gathered at the Marché Bonsecours for an elegant gala in honour of the Azrieli Family and the Azrieli Foundation.

The Azrieli Family and Foundation’s $20 million gift enabled the JGH to inaugurate the Azrieli Heart Centre in September 2017. It is providing best-of-class heart care for the people of Quebec. The Azrieli Foundation also provided a gift to the JGH: resources for a new intensive care facility and a fellows’ program to train young physicians. The combined $26 million gift ranks as one of the most generous acts of philanthropy in the history of the JGH.

The gala’s guests included JGH leaders, physicians and surgeons, as well as generous supporters, friends of the hospital and members of the Azrieli Family.

During the evening, the JGH Foundation gave guests some insight into the Azrieli family and its Foundation’s amazing philanthropic journey as well as its enormous impact here in Canada, in Israel, and around the world.

The Azrieli Foundation has empowered and assisted tens of thousands of people, thanks to its generous support of many initiatives in education, architecture and design, Holocaust education, developmental disabilities, scientific and medical research, and the arts.

Myer Bick, outgoing President and CEO of the JGH Foundation, delivered the evening’s opening remarks.

Sharon Azrieli, a world-renowned soprano, dedicated a beautiful rendition of Hebrew songs to her father, the late David Azrieli. Dr. Kieran O’Donnell, Assistant Professor at McGill University and the Canadian Institute for Advanced Research Azrieli Global Scholar, shared his insights into fascinating brain research. Naomi Azrieli, Chair and CEO of the Azrieli Foundation, thanked everyone for their attendance and generosity.

Rounding out the evening was a spectacular performance by the Montreal Symphony Orchestra with very special guests, the Atelier lyrique de l’Opéra de Montreal.

The gala raised over $1 million, with the Azrieli Foundation matching the funds. The JGH Foundation will use the over $2 million to establish the Azrieli-Lady Davis Institute Director’s Research Fund. It will support stem cell research at the JGH/LDI Director’s research laboratory, a field of research that is the key to understanding and curing disease.

The JGH Foundation is grateful for the support of its sponsors and contributors. We cannot provide enough thanks to Stephanie, Sharon, Rafi, Naomi and Danna Azrieli, as well as the evening’s lead Sponsor, Richard Pilosof (RP Investments Advisors). Special thanks also go to the many individuals, companies and groups whose generosity and commitment contributed to making the annual JGH Foundation gala a wonderful event.
Tell Cancer to Take a Hike
New Hope & Cope Fundraiser Reaches Great Heights

Seven enthusiastic mountain climbers with a thirst for adventure tested their physical and mental endurance as they took up the challenge of climbing Mount Kilimanjaro. Participants paid their own way, committed to raising a minimum of $6,000 each for Hope & Cope, and spent several months training individually and as a group under the expert guidance of expedition leader Terry Soucy.

Keeping their spirits up through several days of intermittent to heavy rain, the group faced their greatest challenge when they awoke at 1 a.m. on March 17th to make their final ascent to the summit. After seven hours of pushing through huge snow drifts, high winds and limited visibility, they reached Gilman’s Point at 18,650 ft. only to find that the path to the summit had been closed. Despite their initial disappointment at not being able to reach the very top of Mount Kilimanjaro, the climbers were justifiably proud of how far they had come. “The entire team realizes and appreciates the incredible job that they did. Reaching Gilman’s point on any day is to be celebrated; doing it in a full-on blizzard is remarkable,” commented Terry.

Here in Quebec, the first Kili chez nous hike took place that very same day on Mont-Tremblant. As Howard Stotland noted, “Although we were continents apart, we were together in spirit.” Kili chez nous was the brainchild of hiking enthusiasts Alice Lehrer, Lisa Boucher and Sharyn Katsof, who, as co-chairs, were responsible for scouting and choosing possible locations, ensuring that trails were offered for various fitness levels, and creating a sense of community on the trails. The fundraising commitment was set at a minimum of $2,000 per individual and $3,000 per household, with many people exceeding this amount. Participants have been attracted by the lure of hiking together in the great outdoors and enjoying breathtaking scenery, all in solidarity with those battling cancer.

When a group of Montrealers with homes in Stowe, Vermont found out about the hikes, they proposed a fundraiser of their own, Kili chez Stowe. Featuring a morning hike on beautiful Mount Mansfield followed by an afternoon pool party, this fun, family-oriented fundraiser was co-chaired by Elaine Dubrovsky, Janice Heft Sheiner and Sheryl Miller Adessky.

Mr. Stotland, who served as Sponsorship Chair and participated in several of the hikes, notes that the campaign will continue until the end of 2018. “We are deeply grateful to the many individuals, families, companies and foundations who have responded with such generosity to Tell Cancer to Take a Hike. It’s not too late to join us and help ensure that Hope & Cope can continue to have a positive impact on so many people in our community.”

In April 2017, staff and parents joined forces to organize an emergency bake sale to purchase much-needed eyeglasses for a grade 2 child attending the JGH Child Psychiatry’s Childhood Disorders Day Hospital Services, a program for children 5 to 12 who suffer from complex and severe behaviour disorders.

“I noticed that the child did not like the glare of the lights,” says Anna Pietrobruno, Special Education Teacher with the English Montreal School Board (EMSB), who acts as liaison between schools and the program. “He seemed perplexed by people’s responses. He was very anxious and clumsy, even just walking. He did not like to play games. He also had serious academic issues and displayed unacceptable social behaviour.”

The child was sent for a visual examination to the Children’s Hospital, where he was diagnosed with severe myopia and astigmatism. “The eyeglasses he needed were costly, well above what could be afforded by his single mother,” says Ms. Pietrobruno. Even though a Foundation called Bonhomme à lunettes was found that would make the eyeglasses for a lower cost, a sizeable amount was still needed. That’s when a family member suggested holding a bake sale at the Centre for Child Development and Mental Health.

A notice was sent out only 48 hours before the bake sale was to take place. “All of the parents got involved, either to bake or buy,” says Monica Arnaldi, an educator working in the program. “It happened so naturally, so quickly. Most of the 28 families of children treated on the same floor as the child...
One week later, the child received his eyeglasses. After the initial shock of suddenly being able to see properly, his progress has been phenomenal. “Being able to see people’s reactions to his behaviour has helped him to develop empathy and improve his social skills,” says Dr. Ashley Wazana, a psychiatrist who has been treating the child since he started the program a year ago. “He is much less anxious, more physically engaged and more confident. He is enthusiastic about learning and actually sees himself as part of the classroom for the first time.”

“The child is now integrated in a school—his first school ever!—with a curriculum tailored to his stage of development,” exclaims Anna. “It is truly a testament to the power of kindness to change lives.”

“Not being used to kindness and having felt unwanted and rejected for so long, the realization that so many people cared enough to be kind to him and help out boosted his self-esteem,” says Monica. “The mother also felt empowered by this. Because of her son’s problems, she had put her life on hold. The support she received inspired her to pursue her dreams and projects, and she is a more productive and happier person today. It was also very empowering for the children in the program, who experienced first-hand the principles and values we want to teach them.”

Nineteen employees representing various departments of CIUSS West-Central Montreal took part in the Mindstrong fitness event as part of the appropriately named CIUSSS Staff Stigma Fighters team. Together, with the help of family, friends and other staff members who organized fundraising activities or pooled their money, they raised $12,175. This amount will be matched by the JGH Foundation, and the total will be used to establish a special fund to create a dedicated mental health program for all CIUSSS employees.

“We want to do more for employees who are experiencing a mental health crisis,” says Staff Stigma Fighters team member Isabelle Bisaillon, who is also Planning, Programming and Research Officer in the Mental Health and Addiction Program Directorate. “We also want to focus on prevention and put forward initiatives to tackle the issue of stigma in the workplace.”

“We are not doing enough for our staff,” agrees team captain Beverly Kravitz, Director of Human Resources, Communications, Legal Affairs and Global Security. “We need to take action. Having worked at the JGH Foundation in the past, I know about fundraising and I thought that participating in the Mindstrong event would be a fun and meaningful way to raise the funds, help eliminate the stigma associated with mental illness and do something meaningful for our valued employees, who dedicate their lives to helping others.”

“Considering that we started promoting and building our team only a few months before Mindstrong actually took place and that the event was on a Sunday, we are very pleased with the results,” says Director of Finance Carrie Bogante. “As senior personnel, we have to lead the way and take part in initiatives that promote the mental health and wellness of CIUSSS staff. We are all in it together. Next year I intend to participate in the event again and to get more people involved.”

“The stigmatization of people living with mental health problems is all too common, including within a healthcare environment,” concludes Mrs. Bisaillon. “To get rid of this stigma, you need normalization. Events such as Mindstrong and one-on-one conversations help sensitize people to the idea that mental illness is not a fault or a weakness, but an illness. It is the way to reduce the stigma, which prevents so many people from seeking appropriate treatment.”

The Staff Stigma Fighters will be participating in the 2019 Mindstrong event and are looking to build an even bigger team, raise more money and make a significant difference in supporting our staff through these challenges.
Elm Ridge Golf Course held its 11th annual Ladies in Pink Golf Tournament on July 3, 2018. Decked out in pink, 120 golfers enjoyed a beautiful morning on the links, followed by a delicious lunch and bridge in the afternoon.

Chaired by Tina Abbey and Deanna Godel, the event raised close to $20,000 in support of cutting-edge research and clinical practice in women’s cancers at the Segal Cancer Centre at the JGH. “Women from all over our community joined together to support this great cause,” stated Ms. Abbey and Ms. Godel. “We would like to thank the members of the organizing committee and our sponsors for their hard work and generous support. We also thank the volunteers, as well as the staff of Elm Ridge, who ensured everyone had a fantastic time and remained comfortable in very hot and humid conditions.”

Since 2011, the Ladies in Pink Tournament has provided participants with a beautiful fun day, including many exciting games and prizes, while raising vital funds for much needed equipment and research into women’s cancers at the Segal Cancer Centre.

Women interested in taking part in the 12th edition of Ladies in Pink next summer are invited to contact Elm Ridge Country Club in spring 2019 for more details at 514-626-3992 (extension 0) or to visit the Club’s Facebook page or website (www.elmridgecc.com).

The event was co-chaired by Dr. Harriet Greenstone and Dr. Rachel Goodman, both psychologists and Associate Directors of the Alzheimer’s Risk Assessment Clinic (ARAC) at the JGH, in addition to their private sector work. It featured cocktails and a fun competition in which teams of participants ranging in age from 48 to 72 were tested on their physical and mental fitness and trivia/knowledge.

“The 5B event was aimed at raising awareness, as well as much-needed funds to prevent and treat Alzheimer’s and related diseases,” says Dr. Greenstone. “It was a unique and exciting way to empower people to take their brain health into their own hands and make a difference,” adds Dr. Goodman.

The event raised $52,000 in support of ARAC and the Anna & Louis Goldfarb JGH/McGill Memory Clinic—and the donations are still ongoing. ARAC’s primary objectives are to ascertain and mitigate the risks of developing Alzheimer’s disease in cognitively intact middle-aged adults, and to conduct scientific research that addresses these concerns in this population. At its launch, it was the first clinic of its kind in North America. The Memory Clinic, the largest such facility in Canada, provides internationally recognized expertise in the early diagnosis and treatment of memory disorders and dementia. It is also at the forefront of research efforts to achieve a better understanding of Alzheimer’s disease, its causes, what makes people susceptible, and how it can be prevented.

For more information or to make a donation and contribute to advances against one of the most debilitating conditions of advanced aging, please visit jghfoundation.org or call the JGH Foundation at 514-340-8251.
Resilience the Theme of Hope & Cope’s Cancer Survivorship Day

When two-time cancer survivor Susan Wener grew her left lung from 45% capacity to 90% capacity after having her right lung surgically removed due to lung cancer, her doctors were stunned, telling her that what she had done was anatomically impossible. She responded, “Impossible just means it hasn’t been done yet.”

Resilience, the title of Mrs. Wener’s 2014 memoir describing how she dealt with cancer on her own terms, was also the theme of her spellbinding talk as guest speaker at Hope & Cope’s 31st Annual Cancer Survivorship Day. “Resilience is our ability to bounce back no matter how many times we fall,” she explained.

Mrs. Wener shared details of her harrowing journey, describing the unconventional choices she made in order to heal and feel whole. She encouraged those battling cancer to be patient with themselves, to surround themselves with people who are non-judgmental and supportive, and to avail themselves of organizations such as Hope & Cope. “It’s O.K. to go down the rabbit hole—just don’t live there.”

In the JGH lobby, Bram Freedman, the new President and CEO of the JGH Foundation, stands beside a display case containing archival materials about his grandfather, Dr. A. O. Freedman. On October 15, 1934, one week after the JGH officially opened, Dr. Freedman admitted the first patient to the hospital.

When Bram Freedman speaks about the family feeling that he experiences at the JGH, he’s echoing generations of praise for the hospital’s compassionate approach to care. But he’s also speaking literally.

As the new President and CEO of the JGH Foundation, Mr. Freedman says he is impressed, first and foremost, by “the strength of feeling that people have for the hospital and the Foundation.

“It really does feel like a community, and people who are involved, whether as donors or volunteers, have a real sense of ownership. That’s pretty remarkable for a big public institution. I continue to be impressed every day by the sense of attachment that people have.”

On a more personal level, Mr. Freedman has now become the third generation of his family to make the JGH a key element in his career. His father, Dr. Samuel O. Freedman, O.C., C.Q., served from 1991 to 2000 as Director of Research for the Lady Davis Institute. And his grandfather, Dr. A. O. Freedman, the hospital’s founding Chief of Otolaryngology, had the distinction of admitting the first patient to the JGH on October 15, 1934, one week after the hospital officially opened.

“I’ve always considered the hospital to be one of the jewels of the city,” he says. “To me as a patient, it feels different from other hospitals. There’s something about the way people are treated that makes it special—that patient-centered approach. And it doesn’t matter who you are or what your background is, the atmosphere is unique.”

Born in Montreal, Mr. Freedman earned his law degrees at McGill University and then launched his career in 1992 at Concordia University, first as Assistant Legal Counsel and later as Assistant Secretary General and General Counsel.

MEET...

Bram Freedman
New Head of JGH Foundation Seeks Expanded Opportunities
During the ’90s, he also began volunteering at local non-profit Jewish organizations, as well as those in the healthcare sector. With pride, he notes that he served as Chair of the Board of CLSC Metro before the age of 30.

From 2003 to 2008, Mr. Freedman worked at Federation CJA as Chief Operating Officer and Director of External Relations, positions that brought him into frequent contact with the provincial government. Through his interaction with the healthcare system, he also became involved with the Jewish Eldercare Centre, eventually joining its board and serving as its Chair.

Then came a return to Concordia from 2008 until 2018, with Mr. Freedman serving in a number of senior roles, culminating in the position of Vice President of Advancement and External Relations. In that role from 2013 to 2018, he oversaw all fundraising and alumni-relations activities, including the launch of Concordia’s $250 million fund-raising campaign.

“I was not actually looking for something new, because I was very happy with my job at Concordia, which was very stimulating,” he says. Nevertheless, he was intrigued by the notion of leading the JGH Foundation which, in the level of donations that it receives, is among Canada’s most successful hospital foundations.

“There were very few jobs that could have enticed me to leave Concordia, but this was one of them. I see it as one of the top professional positions, not just in the Jewish community, but in the fundraising and philanthropic communities in general.”

Mr. Freedman says that he was also aware of the exemplary achievements of Myer Bick, who was recently named President Emeritus of the JGH Foundation after having led the organization since 2001. “Myer is a highly respected professional, and the thought of succeeding him was something that really appealed to me.

“What I admire most is the passion and commitment that Myer and his team have brought to the Foundation and the hospital. I’m hoping to build on their excellent work and explore new opportunities for growth.”

Although Mr. Freedman is still planning the details of his strategy, he says he hopes to add to the current momentum in appealing to donors beyond the Jewish community—in other words, the many people from a wide range of backgrounds who receive treatment and care at the JGH.

As well, he would like to attract younger individuals to become active in leading or supporting Foundation events—a challenge currently faced by many charities and similar non profit organizations.

“What’s clear,” Mr. Freedman says, “is that you need different kinds of events and engagement for different parts of the community, whether it’s by age, ethnicity, gender or other factors. The one-size-fits-all approach is not a sustainable long-term strategy, and exploring new opportunities is something I’m really looking forward to.”

Gabrielle Rosberger is among a special group of retired hospital employees who decided to channel their passion for the health and well-being of patients, their families and the community into volunteering.

After a 43 year career as an Occupational Therapist at the JGH, Gabi, as she is affectionately known, returned to the institution she loves in a new role as a fashionista. She now volunteers two full days a week at the Milly Lande Boutique, a thriving gift shop in the main lobby of the JGH. Money raised through the boutique’s sales contributes to the purchase and upgrading of hospital equipment and supports projects overseen by The Auxiliary.

A past recipient of the Caring Beyond Award, which rewards service above and beyond the call of duty by staff of the JGH, Gabi also undertakes a guidance role as a mentor for a number of secondary V high school students over a twelve week session in The Auxiliary’s Hospital Opportunity Program for Students (HOPS). These teens receive an educated insight on occupational therapy as an option for a future healthcare career.

Gabi is also a volunteer on the Patient Advisory Committee. This committee meets a few times a year to discuss patient advocacy and ensure that the highest standard of care and safety is provided to patients, their families and the community.

Most recently she has agreed to co-chair the Humanization of Care Committee (HOC), a volunteer committee dedicated to improving the hospital environment for patients and families. The role of HOC is to identify, design, develop, and implement Humanization of Care projects within the hospital.

“I meet new people all the time and stay in contact with staff that I loved and worked with,” says Gabi.

Mrs. Rosberger is a wonderful example of the important role played by volunteers for the benefit of the Hospital, its patients and the entire community.
LYETTE SOUCY

A reception at the JGH on June 22 honoured Lyette Soucy for her thoughtfulness in choosing the JGH to be the beneficiary of a gift in her will in support of medical research. Mrs. Soucy (centre), who was accompanied by her friend, Me Joan Clark, O.C., Q.C., Ad.E, (second from right) was warmly thanked by (from left) Claude Krynski, Director of Philanthropic Development at the JGH Foundation; Tiffany Belliard, Director of Planned Giving at the JGH Foundation; and the Hon. Denis Coderre, JGH Ambassador.

THE BECKER-NEWPOL FAMILY FOUNDATION

Representatives of the Becker-Newpol Family Foundation proudly celebrated their support of a new dialysis unit for the newly constructed Sandra and Steven Mintz Nephrology Centre at the JGH. They included (from left) Richie Scheim, Alix Newpol Scheim, Josh Newpol, Samara Padan, Mitzi Becker, Hillel Becker, Debby Becker Newpol, Matt Newpol, Joyce Becker, Jeremy Becker and Lee Becker.

“The JGH is a first-class institution and a source of pride for our family and community,” said Jeremy Becker. “From its humble beginnings as the only institution that would hire Jewish doctors, to its current status as the best regional hospital serving all races and religions, the JGH deserves our support. Although no one in our family suffers from kidney disease, we felt that helping to fund a new dialysis unit would dramatically improve the lives of those patients who are forced to spend so much time managing this disease.”

GOLDSMITHS KICK CANCER

On February 16, Tyler Goldsmith, a grade 4 student at Beechwood Elementary School in Pierrefonds, shaved his head in support of his father Lyle Goldsmith who at the time was fighting stage 4 colon cancer. The goal was to support his cancer-stricken father and raise awareness and funds for cancer research at the Segal Cancer Centre at the JGH. Students at Tyler’s elementary school each did their part by contributing $2 to the “Goldsmith Kick Cancer Fund”, and then the local Home and School Association matched those funds, raising close to $2,000 from a school with only 300 students. In all, with donations from friends, family and the school community, Tyler raised $11,000 for the JGH—four-and-a-half times more than he’d hoped.

Sadly on May 16, 2018, Lyle lost his battle with cancer, leaving behind his wife, Ann, and their three children, Haylie, Tyler and Allysen.
On July 26, the Carsley family was present in force at a reception honouring Marvin Carsley (left) for his generous support of the Department of Otolaryngology - Head and Neck Surgery at the JGH, under the direction of Dr. Michael P. Hier. The reception was also the occasion for the unveiling of a plaque acknowledging the Carsley Family Head & Neck Cancer Program.

Paul-François Cossa, General Manager of Sanofi GEM Canada, was warmly welcomed by (from left) Dr. Lawrence Rosenberg, President and CEO of CIUSSS West-Central Montreal; Edward Wiltzer, Chairman of the JGH Foundation; Dr. Susan Kahn, Founder and Director of CETAC; Dr. Andrew Hirsch, Chief of the Division of Pulmonary Medicine and Investigator at the Lady Davis Institute (LDI); Larry Sidel, Executive Vice-President of the JGH Foundation; Dr. Maral Koolian, Internist; Dr. Mark Blostein, Associate Chief of the JGH Division of Hematology and Oncology, and Senior Investigator at the LDI; and Dr. Vicky Tagalakis, Clinical Epidemiologist and Internist, and Associate Director of the Centre for Clinical Epidemiology at the LDI.

On May 9, a reception was held at the JGH celebrating the grand opening of the new Centre of Excellence in Thrombosis and Anticoagulation Care (CETAC) and honouring the CETAC’s major benefactor, Sanofi Canada. This new Centre is setting the stage for enhanced awareness, prevention, research, training, diagnosis and treatment of thrombosis and its associated complications, not only at the JGH, but across the Quebec healthcare system.

RBC Royal Bank was honoured on May 15 for its outstanding contribution in support of the JGH’s Department of Psychiatry and Division of Nephrology. The reception was attended by Dr. Mark Lipman, Chief of the Division of Nephrology; Dr. Karl Looper, Psychiatrist-in-Chief; Nadine Renaud-Tinker, President, Quebec Headquarters of RBC; Edward Wiltzer, Foundation Chair; Dr. Michael Bond, Chief of Youth Services in the Department of Psychiatry; and JGH Foundation Executive Vice-President Larry Sidel.

RBC Royal Bank’s gift will enable the JGH Department of Psychiatry to the launch RBC Transitional Care Program, a new initiative for 12- to 25-year-olds. The program aims to help youths who would otherwise fall through the cracks of the system, as they turn 18 and “age out” of traditional services that are designed for children and teens. Thus, the new program gives them a pathway to a meaningful life. Part of RBC Royal Bank’s gift will also be used to launch a program allowing nephrology patients to gain greater control of their care.
THE OLDER WE GROW, THE MORE WE GROW. THE MORE WE GROW, THE MORE WE GIVE.
Location: To be announced
Organized by: Mendel Pape
Benefiting the JGH Division of Urology (prostate cancer)
Information: Carolyne Baker, 514-340-8222, ext. 26778

JGH PULMONARY HYPERTENSION WALK
Location: Jewish General Hospital, Carrefour Lea Polansky (Pavilion K)
Organized by: Dr. David Langleben and Team
Benefiting the JGH Centre for Pulmonary Vascular Disease
Registration starts at 12:00 p.m. Registration fee is $25 per participant. Complementary indoor parking available in Pavilion K.

TONGUE IN CHEEK BALL HOCKEY TOURNAMENT
Location: Le Rinque
Organized by: Erik Heft
Benefiting the JGH Head & Neck Oncology Department at the JGH
Information: eheft@live.com

THE FIGHT TO THE FINISH
Location: Saint-Donat, Lanaudière – Montagne Noire (sentier national)
Co-Chairs: Lisa Boucher, Sharyn Katsof and Alice Lehrer
Kili chez nous fundraising hike benefiting Hope & Cope

CHRISTMAS CAROLS FOR RESEARCH
Location: Montreal Museum of Fine Arts’ Bourgie Hall
Organized by: Johanne Champoux and Me Daniel Desjardins
Benefiting the research of Dr. Mark Basik on breast cancer in the Cancer Research Axis at the Lady Davis Institute at the JGH
Information: Marie-Ève Jalbert, 514-340-8222, ext. 22027
A benefit concert by the choir of JGH surgical oncologist and researcher Dr. Mark Basik, with the special participation of Gregory Charles, that will definitely get you in the Christmas spirit!
MINDSTRONG 2019
Location: Midtown Sanctuaire
Founding Co-Chairs: Jodi Mintz and Stacey Herman Serero
Event Co-Chairs: Justin Lessard-Wajcer and Elizabeth Wiener
Sponsorship Co-Chairs: George Itzkovitz, Tyran Morris and Alan Rossy
Benefiting the Psychiatry Department of the JGH
Information: Anna Katsafouros, 514-340-8222, ext. 23069
www.jghmindstrong.com
It’s time to get ready to sweat out the stigma at MINDSTRONG 2019! Engage at your own pace in energizing exercise sessions given by top professionals. Hundreds of likeminded participants do yoga, Zumba, boot camp, spinning, high intensity interval training and play tennis. You will enjoy healthy snacks and a delicious and well-balanced lunch. There are gifts and prizes as well as a pretty fabulous auction. 2019 is our 5th year anniversary and we’re planning a great event. Sweat out the stigma by registering now for 2019. BE MINDSTRONG.

GLORIA’S GIRLS COMEDY GALA, IN HONOUR OF DR. WALTER GOTLIEB
Location: Le Windsor
Co-Chairs: Marilyn Biber, Mimi Kitner, Judy Lazar and Caryn Weltman
Benefiting ovarian cancer research and patient care at the JGH
Information: Rana Saheb, 514-340-8222, ext. 25889
MAY
17

27th ANNUAL SILVER STAR MERCEDES-BENZ JGH GOLF CLASSIC
Location: Elm Ridge Country Club
Information: Annette Goldman, 514-340-8222, ext. 24602

JUNE
11

THE PANCREATIC CANCER CHALLENGE 2019 (STAIR CASE CHALLENGE)
Location: Saint Joseph’s Oratory
Co-Chairs: Howard Dolman and Howard Kalichman
Benefiting Dr. Tsafrir Vanounou’s Hepatobiliary and Pancreatic Surgery team at the JGH Division of General Surgery
Information: Cinzia Russo, 514-340-8222, ext. 26751

JUNE
11

VINCENZO GUZZO ROAST AND TOAST
Location: Vincenzo Guzzo’s residence (Terrebonne)
Co-Chairs: Gaby Bitton, Sal Parasucco, John Ruggieri and Mark Smith
Organized by: Betty Elkaim and Anna Katsafouros
Benefiting the JGH’s Greatest Priorities Fund
Information: Anna Katsafouros, 514-340-8222, ext. 23069
or Betty Elkaim, 514-340-8222, ext. 24055

JUNE
17

THE PANCREATIC CANCER CHALLENGE 2019 (COCKTAIL)
Location: Premiere Performance
Co-Chairs: Howard Dolman and Howard Kalichman
Benefiting Dr. Tsafrir Vanounou’s Hepatobiliary and Pancreatic Surgery team at the JGH Division of General Surgery
Information: Cinzia Russo, 514-340-8222, ext. 26751

JULY
6-7

11th ANNUAL ENBRIDGE RIDE TO CONQUER CANCER
Co-Chairs: Perry Britton, Robert Frances and Andrew Torriani
Benefiting cancer research, treatment, care and prevention at the Segal Cancer Centre at the JGH
Information: Marie Sandy Etiennette, 514-340-8222, ext. 22763
www.conquercancer.ca
An epic two-day cycling journey from Montreal to Quebec City, with overnight camping in Trois-Rivières, in support of cancer programs at the JGH and its partners.
Celebrate our 5th year anniversary on May 5, 2019 at Midtown Sanctuary.

Last year we raised $1.4 MILLION for the Psychiatry In-Patient Unit and mental health programs at the JGH! Let’s make year 5 even better!

Register today! www.jghmindstrong.com

SWEAT OUT THE STIGMA AT MINDSTRONG 2019!
YOU HAVE THAT POWER.

MAP OF THE JEWISH GENERAL HOSPITAL

USEFUL PHONE NUMBERS

- JGH general line 514-340-8222
- JGH Foundation 514-340-8251
- JGH Auxiliary 514-340-8216
- Café l’Atrium 514-340-8222, ext. 25516
- Café au Coin 514-340-8222, ext. 25517
- Mildred Lande Gift Boutique 514-340-8222, ext. 25512 (Lobby)
- Collectibles – Art & Antiques Shop 514-340-8222, ext. 25949 (Lobby) 514-340-8222, ext. 23455 (Pavilion K)
- JGH Philips Lifeline 514-344-2172
- Hope & Cope 514-340-8255
- Hope & Cope Cancer Wellness Centre 514-340-3616
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And it is incredibly easy! To find out more, contact Tiffany Belliardo at 514.340.8222 x 24057 or tbelliardo@jgh.mcgill.ca.

At the JGHF, thanks to gifts like yours - we keep pushing forward, improving lives & patient care. Here in Québec, and around the world. jghfoundation.org  CRA #10487 2304 RR 0001
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As proud supporters of the Jewish General Hospital, our team will be making a donation from each transaction to the JGH Foundation for breast cancer research.

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