VISITING PROFESSORS TO GENERAL SURGERY

On September 22nd and 23rd, 1993, the Division of General Surgery welcomed Dr. John L. Cameron, Surgeon-in-Chief at the Johns Hopkins Hospital and Professor and Chairman of the Department of Surgery, The Johns Hopkins University School of Medicine. Dr. Cameron who has for a long time had a special interest in surgery of the pancreas and biliary tree met with Drs. J.L. Meakins, Jeff Barkun, and L. Rosenberg. In addition, he had special meetings with Drs. John Yee and Peter Metrakos. At the MGH, he spoke at Grand Rounds on “Current Management of Pancreatic Cancer”. At the RVH later on in the day, his topic was “Current Management of Klatskin Tumors”. That evening there was a special dinner given by the Division of General Surgery in the Founders’ Room of the University Club.

On November 18th, 1993, Dr. Douglas W. Wilmore, Frank Sawyer Professor of Surgery at Harvard Medical School visited McGill as the 6th Annual L.D. MacLean Visiting Professor. Dr. Wilmore is the Medical Director, Nutrition and Support Service and Director of the Laboratory for Surgical Metabolism and Nutrition at the Brigham and Women’s Hospital in Boston. In 1966, he worked with Dr. Harry Vars and, together with Drs. Stanley Dudrick, Jonathan Rhoads and Vars, developed the method of Total Intravenous Nutrition as it is generally practiced today. Drafted into the army in 1971, he served as the Chief of the Burn Study Branch and Surgical Study Branch of the U.S. Army Institute of Surgical Research in Fort Sam Houston, Texas. Dr. Wilmore is Editor-in-Chief of Care of the Surgical Patient, the definitive text on continued on page 2...
LETTERS
to the editor

Letter received from Dr. Dag Munro in which he indicates his appreciation in receiving "The Square Knot". He and his wife Micheline are now enjoying retirement at Ste-Agathe-Sud.

Letter received from Dr. Bill Gammie and his wife Vren from Clymping, England. Bill came to the RVH to train in the London Hospital-RVH Exchange in 1959-1960. He visits Rachel and Dr. Harry Morton in Nova Scotia almost every year. Bill has retired as a surgeon, and has recently travelled to Singapore, Sydney, Adelaide and Hong Kong. He wishes to be remembered to Fraser Gurd, Eddie Tabah, Tony Dobell, Jonathan Meakins, Lloyd MacLean, John R. Moore, Maureen and Peter Capello of Ottawa, Carol and Fred Inglis of Saskatoon, and Betty Lou and Bernard Perey of Halifax.

There is a letter to Dr. J.L. Meakins received from F. Jakab, Professor of Surgery, Semmelweis University Medical School, Surgical Department, Budapest, Hungary. Here are some selected excerpts:

Recalling the time I spent in your Department seems to me one of the best and most pleasant periods of my life.

I enjoyed very much the atmosphere you created for your people. In this atmosphere as far as I saw the creativeness of a surgeon, a resident, or a medical student can develop, ascend and bloom without limits. I have recognized the real freedom of the criticism, the thoughts, and debate, and I have never observed any fear or limits in the soul of your people. I am deeply convinced that such extent of freedom can be due to your great sense of a democracy.

I admired the way you and your people taught the youngers for the art of the surgery. I frankly claim, that experience was extraordinary for me, who have been dealing with the education and teaching since 25 years.

Summarizing I am deeply convinced that my visit at McGill has a great effect on my further activity in the field of surgery, and teaching, for this reason I am very grateful for your hospitality.

Letter received from Dr. Harry S. Morton of Monk Point, Lunenbcrg, Nova Scotia.

(innerText) Letter received from Dr. Morton and his wife Rachel in their beautiful country estate last August along with Betty Lou and Bernard Perey, Vren and Bill Gammie, and John R. Moore. The Mortons are getting on all very fine, thank you and have a beautiful garden.)

The text of Dr. Morton's letter addresses the issue of the tying of a square knot; the invention of catgut at his former hospital, the London Hospital; and that it is his friend and colleague, Sir Henry Souttar who invented the Eyeless Atraumatic or Swedged needle for suture material.

Letter received from Betty Lou and Bernard Perey who live at the head of St. Margaret's Bay in Nova Scotia. Bernie's surgical practice is at the Victoria General Hospital in Halifax. In addition to their lovely home on the bay, they have purchased a 34 foot motor cruiser. They are now grandparents (baby Katherine, daughter of son Philippe and wife Judith). Son Bert is in his fourth year residency in orthopedic surgery at the UBC.

Letter received by Dr. Ray Chiu from Dr. Fivos Gahhos from Florida. With his best regards to McGill, Dr. Gahhos has generously donated $20,000 over the past three years for surgical research.

Visiting Professors
continued from page 1

perioperative care, sponsored by the American College of Surgeons. Dr. Wilmore was welcomed at the MGH by Drs. D. Mulder, G. Fried and R. Brown. His topic at Surgical Grand Rounds was Use of Growth Hormones in Surgical Patients. In the afternoon at the RVH, he was welcomed by Drs. J.L. Meakins and M. Wexler. His topic at Surgical Grand Rounds was Nutrients and the Bowel. That evening, he attended the annual Department of Surgery black tie banquet.
McGill University Hospital Centre

In May 1993, a preliminary report of the Steering Committee looking at the feasibility of the potential creation of a McGill Health Sciences Academic Centre was published (Green Book in English, Blue Book in French). After a wide consultation process, two scenarios were being contemplated - Scenario A and Scenario B.

In essence, Scenario A is that in which the participating institutions remain organizationally independent and in their current locations. The cost of investments required over a twenty year period to bring needed improvements to the physical facilities was estimated.

Scenario B is defined as the creation of a new McGill University Hospital Centre and includes the entire Faculty of Medicine and the activities of the five participating hospitals including research.

After numerous further consultation meetings, the Steering Committee has produced a new document which proposes new options aside from A or B. One of these options would transform the current hospital network into a McGill University Hospital Centre. Another option, the idea of common governance, would necessitate a common campus. The final option would be the creation of a Super Board or an Executive Administrative Committee which would replace the current multi-board structure.

On March 1, 1994, the Steering Committee made its final recommendation to go with Option B; that is, the creation of a new facility for 1,100 beds at cost 1 billion dollars in 10 or 15 years. This final report will now be studied by Mme. Lucienne Robillard, Minister of Health as well as by the Boards of the five Hospitals.

At a special faculty meeting in the Palmer Howard Amphitheater on March 7th, the Final Report was discussed. With Dean Cruess chairing the well attended meeting, Dr. Sarah Pritchard presented a summary of the report. Dr. Phil Gold outlined the major resolutions. Many aspects were discussed including the costs, the down-sizing in number of beds, the move of the faculty including the Basic Scientists to the new facility, the eventual use of the present hospitals and finally, the time for all this to be realized. Dean Cruess underlined that this was one of the most important decisions in the history of the McGill Medical Faculty. The tone of the meeting was generally supportive and the resolutions as presented in this final report were approved by faculty.

EDM


Dr. Jack Roth will be the Third Edward J. Tabah, M.D. Visiting Professor in Surgical Oncology at McGill University from March 22nd to 24th, 1994. McGill will be honored to welcome Dr. Roth who is Professor of Tumor Biology, the Bud Johnson Professor and Chairman of the Department of Thoracic and Cardiovascular Surgery at the University of Texas MD Anderson Cancer Center. In 1993, he was presented the W.B. Cosbie Lectureship of the Canadian Oncology Society (1993) at the Royal College of Physicians and Surgeons of Canada in Vancouver, B.C. On March 23rd at the Meakins Amphitheater, the title of his E.J. Tabah Lecture will be “Gene Therapy of Cancer”. At the RVH Surgical Grand Rounds on March 24th, the title of his topic will be “Multi-modality Therapy for Esophageal Cancer”.

EDM
Dr. Paul Belliveau presented a paper at the meeting of the A.C.S. in San Francisco in October on “Pouchitis”. In December, he was Visiting Professor of Surgery at the University of Ottawa.

Dr. Ray C.-J. Chiu was appointed to the editorial boards of PACE and Clinical Electrophysiology as well as to that of the Journal of Cardiac Surgery. He was a visiting professor at Wayne State University in May and at the National Taiwan University in December. Ray has travelled widely, chairing sessions at the World Symposium on Cardiomyoplasty in Paris last year, as well as chairing the Asian Pacific Association for Pacing and Electrophysiology in Japan and at the International Vascular Surgery Conference in Beijing, China.

Dr. Mason Couper has sold his home in Grove Park, Westmount and moved with his wife Dorothy to Central Park Lodge in St. Lambert. They have been married for fifty-four years. Mason who is 88 years young has had to give up his art work, but still does the occasional medico-legal expertise. He joined the RVH Surgical Department in 1939. His mentality and health are quite fine, thank you.

Dr. Ahmed El-Abbady was awarded the First Prize of the Northeastern Section of the American Urological Association for his essay on mechanisms of development of diabetic impotence under the direction of Dr. Magdy Hassouna.

Dr. Mostafa Elhilali was elected President-Elect of the Northeastern Section of the American Urological Association. He will become President at the Annual Meeting in September 1994.

Dr. David Fleiszer in his capacity as Assistant Dean of Medical Informatics, has been working on establishing a process to convert classroom lectures to interactive multimedia computer based teaching. Canadian Aviation Electronics (CAE) is interested in his team’s ideas and they are concluding the details of a 3.1 million dollar joint project. He is also working on an interactive multimedia teaching module for patients on the topic of breast disease. A “Monte Carlo Gala Evening” was organized by the Montreal Racket Club which raised $48,000. for this project.

Dr. Fleiszer has been named by the American College of Surgeons as Chairman of the A.C.S. Quebec Trauma Committee.

Dr. Claude Gagnon was elected Vice-President of the Canadian Fertility and Andrology Society in October 1993 and will become President in October 1995. In addition, Dr. Claude Gagnon has been appointed Associate Editor of the following journals: Référence en Gynecologie Obstétrique, and The International Journal of Andrology. He has also been appointed to the Editorial Board of the Journal of Andrology.

Dr. Philip H. Gordon was named President-Elect of The American Society of Colon and Rectal Surgeons in Chicago in May of 1993. This is the first time in the almost 100 years of its existence that a Canadian - indeed a non-American - has been extended that honour.

Dr. Frank M. Guttman was the author of What’s New in Paediatric Surgery in the January Bulletin of the American College of Surgeons.

Mr. Pierre Karakiewicz (M.D. C.M. 1994) was awarded the Best Clinical Presentation at the Quebec Association of Urologists Meeting in 1993 for work performed under the supervision of Dr. Michel Bazinet which means that the four top awards were given to one of our people.

Dr. Carolyn Kerrigan and Dr. John Sampalis of the RVH have received a grant from 3M for a study entitled “Endoscopic versus Open Carpal Tunnel Relasease”.

Dr. Jean-Martin Laberge has been appointed Program Director for Pediatric Surgery as of February 1st, 1994. He wrote the chapter on Embryology of the Esophagus for the textbook Congenital Anomalies in Otolaryngology currently in press. Along with Dr. Frank Guttman, he contributed the chapter on Congenital Diaphragmatic Hernia for the 4th edition of Hernia (Nyhus and Condon) to be released soon, as well as the chapter on Esophageal Atresia and Gastroesophageal Reflux for a new Paediatric Surgery textbook (Donnellan).

Dr. Ron Lett, surgeon at the QEH, is presently on a three month visit to the McGill Project in Jimma Ethiopia. His project deals with the development of a curriculum for the training of Family Physicians. He returns to Montreal in April.

Dr. Antoine Loutfi was named Director of the RVH’s Cedars Breast Centre. Also, in December in Antwerp Belgium, Dr. Loutfi presented a paper on the Training of General Practitioners in Surgical and Obstetrical Emergencies in Ethiopia. This was at an International Colloquium on How to Train General Practitioners in Third World Countries. Dr. Loutfi was able to discuss this following his experience of two years in Ethiopia.

Dr. Lloyd D. MacLean assumed his function as President of the American College of Surgeons at the Clinical Congress in San Francisco in October of 1993. On December 5, he addressed the Alberta Chapter of the A.C.S. on The Role of the American College of Surgeons in Canada. Also in November, he attended the Florida Chapter meeting of the A.C.S. in Palm Beach and was the moderator of a panel for chiefs-of-surgery entitled Effective Management in the 1990’s. In January 1994, he addressed the Louisiana Chapter of the A.C.S. in New Orleans on The College Participation and the Debate on Health Care Reform. This spring, he intends to
attend other meetings in Orlando Florida, Sugarloaf Maine, New Orleans Louisiana, Athens Greece, San Antonio Texas, Washington D.C., Detroit Michigan, Morgantown West Virginia, Winnipeg Manitoba, Iowa and Iowa City Iowa.

Dr. Peter H. McLean addressed the 69th Annual Meeting of the Auxiliary of the Royal Victoria Hospital on June 1st. Along with Dr. Joyce Pickering (the wife of Dr. Antoine Loufi). They spoke about the deliverance of health care in Ethiopia. It is noteworthy that the Dean of Medicine at the university at Addis Ababa was a medical student from Ethiopia studying at McGill in 1965.

Dr. Jonathan L. Meakins has been busy. First of all, he was named as Regent of the American College of Surgeons. In addition to being the co-editor of the Canadian Journal of Surgery, he has been named to the editorial boards of the following journals: HPB Surgery, Surgery, the British Journal of Surgery, and Journal of the American College of Surgeons (old S.G.O.'s). In addition, he has been the co-editor of a new textbook entitled Host Defense Dysfunction in Trauma, Shock and Septis (Springer-Verlag) and is the principal editor of Surgical Infections - Diagnosis and Treatment (Scientific American, Inc., New York).

He was named a Commander of the Order of Malta, a historic order founded at the time of the Crusades. In this society, he joins a number of other McGill medical personnel, Dames Lorine Besel and Sylvia Cruess and Drs. R.L. Cruess, Phil Gold, E.D. Monaghan, and Jean Morin. Dr. Menkins chaired a session on the Surgical Treatment of Hernias last August in Hong Kong at a meeting of the 35th World Congress of International Society of Surgery.

Dr. Reza Mehran who graduated from McGill in 1986 and who finished his training in general surgery at McGill in 1991 is a surgeon on staff at the Queen Elizabeth Hospital. In his rank as a Major in the Royal 22nd Regiment of Canada, he was called to duty in war torn Yugoslavia and carried out his duties at the military camp in Visoko. Dizdarevic.

Dr. Lawrence Rosenberg is the recipient of many kudos this year. Dr. Rosenberg was selected by Apple Canada as their Innovator in Education Program for his work on the development of a multi-media atlas of surgical procedures. Dr. Rosenberg was appointed to the Medical Advisory Committee of the Alberta Foundation for Diabetes Research and to the Research Committee of the Canadian Association of General Surgeons. He was the recipient of a grant from Organon Canada for the study of Pancreatic Enzyme Supplementation in the Management of Patients with Pain and Chronic Pancreatitis and of an MRC operating grant to study Factors Regulating Islet Cell Proliferation and Differentiation. Dr. Rosenberg was also the Japan Surgical Society Travelling Fellow for 1993.

Dr. Hani Shennib was awarded an FRSQ Senior Scholarship Award. Recently, he was appointed to the Editorial Board of Journal of Heart and Lung Transplantation. In January of 1993, in San Antonio Texas, he presented a paper entitled Lung Transplantation in Ventilated Patient with Cystic Fibrosis at the Society of Thoracic Surgeons 29th Annual Meeting. In Chicago in April of 1993 at the American Association for Thoracic Surgery, he presented a paper entitled Determinants of Outcome for Lung Transplantation. In Boca Raton in the spring of 1993, he chaired a session on Obliterative Bronchiolitis and gave a talk on the same subject.

Dr. John Sampalis has been named Provincial Registrar of the Quebec Trauma Registry. The MGH is the lead hospital and our Computerized Trauma Registry has been accepted by Quebec as the provincial standard. In addition, Dr. Sampalis, with Dr. Carolyn Kerrigan, have received a grant from 3M entitled “Endoscopic versus Open Carpal Tunnel Release”.

Dr. Harry Sigman has been appointed Assistant Dean for Undergraduate Affairs at McGill University.

Dr. Edward John Tabah was appointed a Member of the Order of Canada. This news delighted not only the Montreal community and the Department of Surgery, but also the Cedar’s Cancer Institute at the RVH.

Dr. Christo Tchervenkov with Drs. Dao Nguyen and Marie Beland presented a paper on Taussig-Bing Heart with Severe Subaortic Stenosis and Aortic Arch Obstruction. Together with Dr. Mackenzie A. Quantz (resident) and Dr. A.R.C. Dobell he presented a poster on Institutional Experience with Early Primary Repair of Tetralogy of Fallot at the annual meeting of the Society of Thoracic Surgeons, January 31 to February 2, 1994 in New Orleans.

Dr. Marwin Wexler was a Visiting Professor at the Memorial Sloan-Kettering Cancer Center in New York last March; at the University of Saskatchewan in May 1993; at the New Brunswick Surgical Society in June 1993; and at the University of Rochester in New York last December. His interest in the Future of General Surgery as manifested by his Presidential Address to the Canadian Association of General Surgeons in Vancouver in September resulted in a Guest Lectureship to the A.C.S. Spring Meeting in Montreal last April. Marwin is Chairman of the Subcommittee on Minimal Access Surgery of the A.C.S. He is Organizer, Director and Moderator of the Post-graduate Course at this year’s Spring Meeting of the A.C.S. in Washington entited “New Approaches to Old Problems in General Surgery - Minimal Means More-Maybe.”

Dr. Bruce Williams, Chief of Surgery at the Montreal Children’s Hospital, is the first recipient of the Sessenwein Academic Award. Along with Dr. Ronald Barr, Director of Child Development, Dr. Williams received this prestigious award in recognition of past achievements and to promote further research into development disorders in children.
This year, the Royal Victoria Hospital celebrates its 100th anniversary and the Montreal Children's Hospital its 90th. What was it like in Montreal in 1894? What was it like to be a resident in surgery in 1894? At that time, Queen Victoria was still on the throne. The icons of the time were Lillie Langtry, Sarah Bernhardt, the Prince of Wales, the Vanderbilts, the Astors and the Rothschilds. Sir John A. Macdonald had died in 1891 and after John Abbott, the Prime Minister of Canada was John Thompson. Wilfred Laurier was the leader of the Liberal Opposition. Lord Stanley was the Governor General (of Stanley Cup Fame) and the Premiers of Quebec were de Boucherville who was replaced by Taillon. The Chateau Frontenac in Quebec had just been completed as had Windsor Station in Montreal. June Callwood in her history of the period wrote “The nineties witnessed the sunset of the Victorian ethic, the passing of a time when the role and importance of God, the Queen, the flag, duty, honour, virtue and family life were all clearly defined. It was an era of great contrasts, of chastity and brothels, censorship and pornography ... of crippling poverty and bounteous windfall; tough bosses and violent labour disputes; an age of cesspools and sterilization, plagues and dramatic medical advances; French-English conflict; prairie droughts and booms; gold rushes and emigration; puritanical men and militant women, sporting houses and Klondike hurdy-gurdy girls”. The favourite sports in Canada were tennis, golf, snowshoeing clubs, hockey and baseball.

Two Scotsmen and cousins George Stephen and Donald Smith who had made their fortunes with the Canadian Pacific Railway and the Hudson’s Bay Company contributed enormously to the development of Montreal. Donald Smith became Baron Strathcona and Mont-Royal and George Stephen became Baron Mount Stephen. His home is now the Mount Stephen Club in the center of Montreal's Golden Square Mile. They founded the Royal Victoria Hospital. It represented the last word in hospital design. Dr. William Osler hired as a Professor by McGill in the 1870's had left for Johns Hopkins.

Peter C. Newman writes that “Montreal in 1892 was the capital of Canadian medicine”. McGill University had the country's foremost medical school. It demanded four years of study. The primary subjects were medicine, chemistry, materia-medica, botany, zoology, anatomy, pathology (morbid anatomy), forensic medicine and clinical surgery.

When the RVH was opened in 1894 by Lord Aberdeen, the other hospitals in Montreal were The Montreal General (1817), the Hotel Dieu (opened by Jeanne Mance in 1644), Notre Dame Hospital (considered the Montreal branch of Laval University) and the Western Hospital (affiliated with the Faculty of Medicine of Bishop's College).

The view of the hospital from Pine Avenue “was decidedly pleasing”. There were three buildings: the central portion was called the Administration Block. The east wing contained three medical wards with a lecture theater and the west wing contained three surgical wards with an operating theater. The latter had a seating capacity to accommodate up to 300 students! These buildings combined “grace, solidity, aesthetical effect and suitability to their purpose”. Upon entering through the main door, there was a huge staircase ascending to the second floor. There was a large doctor’s dining room (“the Mess”). One was not called a resident yet; one was called a house officer and you lived in the officers’ quarters. Residents started being called residents only in the era of William Halsted in the late 1890's. The orientation was very much towards the United Kingdom and the Royal College of Surgeons of England. Our Canadian Royal College of Physicians and Surgeons was not to come into being until 1929. Medical students were called “dressers” and when one did a history and physical on the patient, this was called “clerking” the patient.

Each ward consisted of 32 white cots and beside each one, there was a table of iron and glass. These wards had high ceilings and broad windows. Bathrooms were in the towers at the south end. The RVH had the most modern facilities including ventilation and heating, telephones, elevators, laundry, large kitchens and sanitation including drainage, plumbing and water supply. The building was fireproof.

The Medical Board consisted of Dr. Robert Craik, Dean of Medicine; Dr. T.G. Roddick, Professor of Surgery; Dr. James Stewart, Professor of Obstetrics; and Dr. John George Adami, Professor of Pathology.

“Resident” staff appointed that year were Drs. Brown (Gold Medalist) and Deeks in Medicine and Dr. Scane in Surgery. They were really apprentices to their Chiefs. The Flexner Report did not come out until 1910.

Though the MGH was the first to establish a training school for nurses in the city, the RVH added another one under Ms. Draper, a graduate of Bellevue Hospital in New York who had subsequently worked at the Cook County Hospital in Chicago.

As the house surgeon in those days, your journal was the Annals of Surgery. In 1892, the American Textbook of Surgery was published. Dr. F.J. Shepherd, surgeon at the RVH was one of the contributors. Though the Listerian era had arrived, you did not wear a face mask during operations.
until Professor J. von Mikulicz invented these in 1897. Regarding anesthetics, ether was commonly used following its discovery by an American surgeon Crawford Long (1815-1878), although most credit over the years has been given to the dentist William Morton in the mid-1840’s. Chloroform was also available following its introduction by Marie Flourens of Paris and James Young Simpson of Edinburgh.

The number of admissions to the RVH in 1894 was 1,570. The Medical Board complained that though The Montreal General Hospital was of equal size, it required only 10 resident medical officers while the Royal Victoria already had 12 and the Medical Board was asking for more! The total capacity of the hospital was 206 beds, one of the long wards in the medical wing (ward A) being kept in reserve and only used for isolation purposes.

In the 90’s, the house surgeon had to rely upon himself (there were no female surgeons as yet) to make a diagnosis; he had few of the adventitious aides upon which his successor of today depends. The only help he could get from biochemistry was the information as to the presence of hydrochloric acid and pepsin in the stomach; of albumin and sugar in the urine and the output of urea. The discovery of x-rays was announced to the world in 1895. The first apparatus for producing these rays at McGill was installed by Professor John Cox in the physics building and was first used in 1896 to examine a patient with an injured hip. A few days later, Cox was successful in localizing a bullet in the leg of a patient sent to him from The Montreal General Hospital.

Operations were rare events in those days; there was one every 10-12 days. A student who saw more than a dozen operations during one session must have considered himself fortunate indeed. Certain operations that were common in the 90’s are now rarely performed. Extensive dissections of the neck for the removal of tuberculous glands then formed part of the surgeon’s routine work. Cancers of the tongue and of the upper and lower jaws were treated by excision. To open the abdomen for any purpose, even for the removal of the appendix, was a step only to be taken after the most serious consideration, for the peritoneum was supposed to be peculiarly susceptible to infection. Even more rare, were resections of the bowel. Theodore Bilroth had already published his gastrectomies in 1881.

Many operations of short duration were done without anesthetic. It was not thought worthwhile to subject a patient to all the distress of taking an anesthetic and to the nausea and vomiting afterwards, after anesthetic, just to open a felon, boil or an abscess or even to reduce a Colles’ fracture or a dislocated humerus. Cocaine was the only local anesthetic, but was not used extensively because of its toxicity.

Patients in the 90’s did not submit to operations as willingly as they do now. The very word “operation” had about it sinister associations which belonged to the days, not long past of septic surgery. Moreover, there was still a considerable element of danger. The infection of clean cases was not uncommon, for the days of rubber gloves, operating caps and masks had yet to come.

Even in those days, there was competition for the operating rooms. The superintendent of the operating room, Ms. B.K. Felter reported to the Medical Board that a surgeon, Dr. J. Clarence Webster, had such a very large practice that he
commenced “to post his cases at times when he was not supposed to be in the theater”. Dr. Harvey Smith refused to give an anesthetic one Saturday afternoon. The Chief, Dr. William Gardner, had to settle the dispute.

“Plus ça change, plus c’est la même chose!”

Congratulations to the Vic.

E.D. Monaghan, M.D.

REFERENCES


centennial pavilion opens at the rvh

This is the 100th anniversary of the foundation of the Royal Victoria Hospital. It is fitting, therefore, that the new Centennial Pavilion was officially opened on September 28th, 1993. A special ceremony was held attended by federal and provincial government representatives as well as by Montreal Mayor, Jean Dore. After the ceremony, guests were able to circulate through the pavilion which has four floors. Many RVH employees had already had the opportunity to tour the new building in the few days prior to the official opening by Mr. W.I.M. Turner, Jr., the Chairman of the Development Program which raised the funds.

The realization of this building fulfills a long held dream by many in the RVH. The planning and design actually began in 1978! The effort was well worthwhile as this pavilion is the latest in modern architecture, engineering and technology.

The first floor is the Emergency Department (Centennial 4). A new enclosed ambulance entrance facilitates entry even though the main emergency entrance is at the back of the hospital. This state of the art new emergency facility under Dr. James Ducharme was opened on November 23rd. It connects to the 4th Floor of the RVH main surgical pavilion which is the Radiology Department.

The second floor (Centennial 5) holds the Medical and Surgical Intensive Care Units. It connects with the 5th Floor of the main hospital where the operating rooms and recovery room are located.

The third floor (Centennial 6) is the location of new laboratories and connects with the 6th Floor of the main hospital.

The top or fourth floor (Centennial 7) holds the Birthing Centre and NICU. It connects with the 7th Floor of the hospital where antenatal services will eventually be located. Eventually the Post-Partum, the Co-operative Care, and the Gynecology In-Patient Units will move to surgical 7-West.

EDM
ACHIEVEMENTS
Residents and Fellows

Dr. Ghassan Baslaim and his wife Dina are happy to announce the birth of their first child Sara in July of 1993.

Dr. Annie Fecteau presented a work on bowel transplantation at the Surgical Forum section of the American College of Surgeons in San Francisco. Dr. Fecteau is to begin training in Pediatric Surgery at the MCH July 1st, 1994.

Dr. Peter Metrakos and his wife Amalia are the proud parents of a baby girl, Eleni, born January 21st, 1994.

Dr. Dao Nguyen has received a Fellowship and will be travelling to the MD Anderson Cancer Center in Houston where he will do two years in surgical oncology for lung cancer.

Dr. Mark C. Preul, along with Drs. Joseph Stratford, Gilles Bertrand, and William Feindel have published a paper in the October issue of the Journal of Neurosurgery entitled Neurosurgeon as Innovator: William V. Cone (1897-1959) - Historical Vignette.

Dr. David Sigalet who trained in Pediatric General Surgery has joined the Faculty of Medicine of the University of Alberta in Edmonton in July of 1993.

Dr. T. Takara along with Drs. Jean Tchervenkov and F.M. Guttmann presented a paper at the Symposium on Bowel Transplantation in Paris in November 1993.

Dr. Joe Tector and his wife Kelly who gave birth to a 7 lbs 2 oz baby boy, David Joseph, on January 26, 1994.

DEPARTURES

Dr. Ken Brown to Oakridge Center Vancouver.

Dr. Robert Gledhill and Susan to Dallas Texas.

We wish them well!

DATES TO REMEMBER
Upcoming events - 1994

March 23-24
E.J. Tabah Cedar’s Cancer Centre
Visiting Professor
Dr. Jack Roth,
Chairman and Professor,
Dept. of CVT Surgery,
M.D. Anderson Hospital & Tumour
Institute, University of Texas.

April 18-22
Royal College and CPMQ Accreditation
Visit

April 24-27
American College of Surgeons 22nd
Annual Spring Meeting,
Washington, D.C.

May 18-19
Fraser Gurd Days
Visiting Professor - Dr. Martin Robson
Professor of Surgery,
University of South Florida College of
Medicine, and Chief of Surgical Services,
Department of Veteran Affairs Medical
Center.

June 2-3
Stikeman Visiting Professor
Sir Madgi Yacoub,
British Heart Foundation Professor of
Surgery

June 11-12
RVH Centennial Celebration

September 28-30
General Surgery Visiting Professor
Dr. Keith Kelly

September 30 -
October 1
Postgraduate Course in General Surgery

November
L.D. McLean Visiting Professor in
Urology

BACTERIA:
Back door to the cafeteria
Dr. Armen G. Aprikian is a graduate of the University of Sherbrooke and the McGill Urology Residency Training Program. Dr. Aprikian did a three year fellowship at Sloan Kettering-Memorial doing two years of basic research in immunopathology and molecular biology of urologic malignancies and one year of clinical training exclusively in urologic oncology including clinical research projects. Dr. Aprikian returned to McGill as an Assistant Professor of Surgery (Urology) on July 1, 1993 with cross-appointments at the Montreal General, Royal Victoria, and Jewish General Hospitals. His office and laboratory are located at the Montreal General Hospital. He was granted a Research Award by the Canadian Urological Association Scholarship Foundation for the year 1993-1994.

Dr. Thierry Benaroch has recently joined the staff at the Montreal Children's Hospital in the Department of Orthopaedics following a very extensive Residency and Fellowship Program. He is a graduate of McGill, both from medical school as well as the Orthopaedic Program and Fellowships at the University of Montreal and Hôpital Ste-Justine and at the Scottish Rite Hospital in Paediatric Orthopaedics at the University of Texas. He has been a Fellow at the Boston Children's Hospital with specialization in Paediatric hip disorders.

Dr. Gerald Brock graduated from McGill University and the McGill Urology Residency Training Program. He then did a two year M.R.C. Fellowship at the University of California - San Francisco under the direction of Dr. Emil Tanagho and Dr. Tom Lue in the area of sexual dysfunction, neurotransmitters and neurostimulation of the lower urinary tract. He was also supported by a Frank McGill Travelling Fellowship. Upon his return to McGill as an Assistant Professor of Surgery (Urology) on July 1, 1993 Dr. Brock was successful in obtaining both a Kidney Foundation of Canada Operating Grant and Scholarship. With cross-appointments at the three major McGill Teaching Hospitals, Dr. Brock has offices both at the Jewish General and the Royal Victoria with his laboratory located at the Jewish General. He was the recipient of the First Prize in the Prize Essay Contest of the Canadian Urological Association in June 1993 and the Best Research Paper for the Annual Meeting of the Quebec Association of Urologists in November 1993.

Dr. Simone Chevalier graduated from the University of Montreal with a Ph.D. in Biochemistry in 1974. During her studies she was funded by the Medical Research Council of Canada and by the Ministère de l'Éducation du Québec. She then did a three year postdoctoral fellowship in the Department of Biochemistry at the University of British Columbia; and another three years at the Centre de Recherche at Hôpital Maisonneuve-Rosemont. She joined the Faculty of Medicine of the University of Montreal in 1981 and on her departure in January 1994 she had the rank of Associate Professor with Tenure. From 1982 to 1988 she was a Chercheur-boursier junior I and II from the FRSQ and from 1990 to 1995 she is a Chercheur-boursier sénior I and II. On February 1, 1994 Dr. Chevalier was appointed Associate Professor of Surgery (Urology) with Tenure at McGill University. Her laboratory is located at the Montreal General Hospital.

Dr. Stéphane Dion graduated from the University of Sherbrooke in 1989 with a Ph.D. in Pharmacology. He then did three and a half years of post-doctoral training; November 1989-1991 with an FRSQ Fellowship in the field of molecular pharmacology at the University of Texas and Temple University, and 1991-1993 with a Canadian Heart and Stroke Foundation Fellowship also in molecular pharmacology at Thomas Jefferson University. On July 1, 1993 Dr. Dion joined the McGill Urology Faculty as an Assistant Professor. His area of research is molecular pharmacology of the genitourinary system and his laboratory is located at the Lady Davis Institute of the Jewish General Hospital.

Dr. Patrick Ergina joined the Division of C.V.T. Surgery at the Royal Victoria Hospital in July 1993. A graduate of the University of California, San Diego, Dr. Ergina is a cardiac surgeon fully trained in internal medicine and critical care with a background in epidemiology and biostatistics and who completed his general surgery residency at McGill.

Dr. François Fassier has been appointed as Orthopedist-in-Chief at the Montreal Children's Hospital as of September 1, 1993. Dr. Fassier is an outstanding academic Orthopedic Surgeon. He was raised in France and graduated from the University of Grenoble and completed his orthopedic training in Grenoble and at the University of Montreal. Dr. Fassier has been a active member of the Orthopedic Department at Hôpital Ste-Justine since 1982 with major contributions in the management of children following trauma, those with congenital anomalies, in spinal surgery, sports medicine and the Ilizarov bone lengthening techniques. Dr. Fassier is also very active in a number of national and international surgical societies and is the current President of the Scoliosis Society of Quebec.

Dr. Robert Goodman is a staff surgeon in C.V.T. at the JGH and was appointed Lecturer in C.V.T. A graduate of the University of Saskatchewan, Dr. Goodman completed his residency training in General Surgery at the University of Alberta and later was a Clinical Fellow in C.V.T. at the University of Ottawa. Dr. Goodman has conducted research in the areas of Bronchoscopic YAG Laser and Excimer Laser Coronary Angiosurgery.
Dr. C.R.C. Hamdy is a graduate from the Faculty of Medicine, University of Alexandria, Egypt. Dr. Hamdy did a pre-internship at McGill and was a rotating intern at the MGH. Having done fellowships at Toronto's Hospital for Sick Children and at Brown University School of Medicine, Rhode Island Hospital, Dr. Hamdy is presently a Fellow in Paediatric Orthopaedics at Ste-Justine Hospital. He will be appointed at the MCH with some activities and at the Shriners Hospital for Sick Children.

Dr. Andrew Hill will return to The Montreal General Hospital on July 1st, 1994 as a vascular surgeon. Dr. Hill is a McGill graduate who did his general surgical training at The Montreal General Hospital. He then went to Toronto and did a one year Fellowship in Vascular Surgery and a second year in Epidemiology as part of the Toronto Training Program in Vascular Surgery. Dr. Hill will return to the MGH and to McGill University as a surgical scientist with a special interest in the clinical studies of the population with vascular pathology. He also has a secondary interest in the Surgical Intensive Care Unit.

Dr. Dante Marchesi was born in the Italian speaking section of Switzerland. He attended medical school at the University of Lausanne followed by three years of General Surgery in the same institution. During this time, he published a thesis on "Surgical Treatment for Extra Hepatic Tumours of the Biliary Tract." In 1986, he moved to Berne for Orthopaedic training under the direction of Professor M.E. Mueller and Professor R. Ganz. During his training, he spent 15 months at the Institute for Biomechanics at the University of Berne (Professor S. Perren) where he was involved in Anatomical and Biomechanical studies of a new fixation system for the anterior stabilization of the thoraco-lumbar spine. In 1989 and 1990, he completed a Fellowship in pelvic traumatology in Los Angeles with Professor J. Matta and in Paris with Professor E. Letournel followed by a Spine Fellowship with Professor D. Bradford in Minneapolis and Professor J. Dubousset in Paris. Since 1994, he has held a staff position for spine surgery as Assistant Professor with the Department of Orthopaedics in Berne Switzerland. He is a member of most prestigious European and North American Spinal Societies. He is the author of many articles written mainly about surgical treatment of spinal disorders published during the last five years in major international spine journals. He is also in charge of the Training Program of the AO Principles for Spinal Surgery in South America. Dr. Marchesi is at the Jewish General Hospital.

Dr. A. Sculptoreanu graduated from the University of Sherbrooke with a Ph.D. in Biophysics (cardiac electrophysiology) in May 1991. He then did a two year postdoctoral fellowship in the Department of Pharmacology at the University of Washington - Seattle. From 1987 to 1993 he was funded by the Heart and Stroke Foundation of Canada. He also spent some time in the laboratory of Dr. W.C. de Groat in bladder neurophysiology at the University of Pittsburgh. On July 1, 1993 Dr. Sculptoreanu joined the McGill Urology Faculty as an Assistant Professor. His area of research is neurophysiology and his laboratory is located at the Lady Davis Institute of the Jewish General Hospital.

Dr. Oren Steinmetz joined the C.V.T. Service of the Royal Victoria Hospital in July 1993 to practice and teach vascular surgery. He returned after one year of Fellowship in Vascular Surgery at the Ottawa Civic Hospital. In the fall, he obtained his F.R.C.S.C. Dr. Steinmetz is a welcome addition to the C.V.T. Service of the RVH.

Dr. John R. Sutton is currently Director of Orthopaedic Surgery at St. Mary's Hospital Center.

Dr. Robert Turcotte is a graduate of the University of Montreal. After completing his residency training in orthopaedic surgery at the University of Montreal affiliated hospitals, Dr. Turcotte did post-residency fellowships in orthopaedic oncology at Cohin Hospital in France and later at the Mayo Clinic. Dr. Turcotte was appointed Chief of Orthopaedic Tumor Services in the Division of Orthopaedic Surgery at the MGH.

Dr. David R. Williams is certified by the Royal College in Emergency Medicine. His appointment as a lecturer in the Department of Surgery at the MGH will permit him to function in the Emergency Department on the Trauma Team and teach A.T.L.S.

Société Internationale d'Urologie

The Société Internationale d'Urologie which meets every three years will be meeting in Montreal between September 7 and 13, 1997 at the Palais de Congrès. Dr. Mostafa M. Elhilali is the Delegate of the Canadian Section of the Société. He, along with Doctors Normand Sullivan and Luc Valiquette from the University of Montreal, worked very diligently negotiating and bidding to have Montreal accepted as the site for this meeting. Dr. Elhilali will be the President for this Meeting with an expected attendance of 4000-5000 urologists from around the world.

CAESARIAN SECTION:
District of Rome
Dr. Fraser Gurd  
May 27

1st Place: Dr. Peter Metrakos - Intercellular communication and maintenance of islet cell mass - Potential implications for islet transplantation.

2nd Place: Dr. Patrick Meere - Single cut 3D osteotomy.

3rd Place: Dr. John Yee - Exudative neutrophils: modulation of microbicidal function in the inflammatory microenvironment.
Research Day
1993
The MONTREAL CHILDREN’S HOSPITAL

Celebrating its 90th Anniversary

Named a Level I Pediatric Trauma Center

This year the Montreal Children’s Hospital celebrates its 90th birthday. Since the beginning of this century, it has provided exemplary care to sick children. It moved to the Tupper Street location in 1956 from St. Antoine Street.

In June of 1993, the MCH qualified as a First Level Provider of tertiary care to traumatized children in south western Quebec along with Hôpital Ste-Justine. The trauma team under Dr. Jean-Martin Laberge applied for this status in 1990. Says Dr. Laberge..."We’ve been treating serious injuries for a long time and we will continue to do so. The difference is that from now on patients with multiple injuries will be sent directly to us, or to Ste-Justine, instead of to a local hospital which would then have to send them on to a better equipped centre. The designation of Trauma Centre will reduce delays in treatment". Ms. Carol Common is the Head Nurse in the MCH Emergency Department.

EDM

TRAUMA ASSOCIATION OF CANADA

Trauma System Accreditation Guidelines

The Trauma Association of Canada under the aegis of former President, Dr. Rea Brown of Montreal, struck a committee chaired by Dr. Charles Burns of Winnipeg. The mandate was to prepare “Trauma System Accreditation Guidelines”. This Committee which includes our Chairman, Dr. David Mulder, commenced its work in February of 1991 and completed it in September of 1993.

Up until now, there has been the three levels of trauma care as promulgated by the Committee on Trauma of the American College of Surgeons and another gradation prepared by the Province of Quebec Ministry of Health which includes five levels of care.

This is the first time that Canada will have such guidelines. The Executive of the T.A.C. (which includes Dr. David Fleiszer) has requested the support of the Specialty Committee of the Royal College in General Surgery as well as that of the Canadian Council on Hospital Facilities Accreditation, and has obtained this with enthusiasm.

The Trauma System is a detailed description of trauma centres. The components of the Trauma Centre are as follows:

A. Coordinating Committee for Trauma Services
B. Pre-Hospital Phase
C. Hospital Phase: Tertiary Trauma Centre (TTC)  
  District Trauma Centre (DTC)  
  Primary Trauma Centre (ITC)
D. Rehabilitation
E. Trauma Registry
F. Prevention
G. Education

EDM

St-Mary’s Hospital Surgical Oncology Fund

was launched in 1992 through the efforts of patients, friends, and St. Mary’s Hospital Foundation. Its specific mission is to enhance the care of cancer patients requiring surgery by supporting clinical research, staff education and providing the acquisition of new equipment and technology. This fund will help offset decreasing availability of government funding. A generous seed funding provided by the C. Durand Foundation, The Easter Seal Foundation, and the West Island Harmony Barbar Shoppers helped establish an Oropharyngeal Endoscopy and Voice Laboratory, enhancing the ability to make an earlier diagnosis of laryngeal cancer and to monitor those patients treated with radiotherapy or conservative surgery. This clinical laboratory serves as a training centre for speech pathology students from the Université de Montréal.

Dr. J. Keyserlingk
THE CANADIAN ASSOCIATION OF GENERAL SURGEONS

The meeting of the Executive and Board of Directors of C.A.G.S. was held on February 5th and 6th, 1994 in Toronto. Members of the Executive include Dr. Fred Inglis of Saskatoon (formerly of McGill) who is President, Dr. Marvin Wexler (immediate Past-President), Dr. E.D. Monaghan (representing the Specialty Committee in General Surgery of the Royal College), Dr. Gerry Fried (Program Committee), and Dr. Paul Belliveau (Colorectal Committee).

In addition to routine items such as budget and treasurer's reports, program planning, M.O.C.O.M.B., and reports from the various provinces, the following were some of the subjects of interest on the agenda:

- Special training in surgical skills for family physicians who practice in rural areas without immediate consultant support.

- Surgical research fund and the resident's research conference.

- Impact of provincial government regionalization strategies.

- Canadian general surgery.

- Proposal for the training of general surgery residents for community experiences.

- What to do with general surgeons forced out of practice by the closing of certain hospitals by government.

- Clinical practice guidelines.

- Quality management issues.

- The C.A.G.S. in-training examination No. 15.

- Policies for endoscopic and laparoscopic surgery.

- Liaison with the Operating Room Nurses Association of Canada (ORNAC)

Dr. Bob Blanchard of Winnipeg reported that as of February 6th, 1994, there are 1,569 members of C.A.G.S.

PGY1 GENERAL SURGERY C.I.M.S. 1994

There are certainly a lot of candidates interested in training in General Surgery throughout Canada for July 1st of 1994. There is a pool of 258 applications for 67 General Surgery PGY1 positions offered by the 13 English medical schools. The universities of Montreal, Sherbrooke and Laval do not participate in C.I.M.S. McGill has 10 posts for General Surgery.

Ms. Sandy Banner, Executive Director of C.I.M.S., informs us of the following totals of PGY1 positions for Canada in 1994:

Total PGY1 Positions Available
Canada-wide 1994 1255

Applications: 
Graduating Class 1301
Canadian Medical Schools
Foreign Medical Graduates 240
USA 17
Previous Year's Graduates 50

Total Applicants: 1608

The Priority List deadline is February 15th, 1994, and the Match Date is Wednesday, March 16th, 1994.

GENERAL SURGERY ONCOLOGY - MCGILL

Recently, the Royal College has accepted the McGill Training Program in General Surgery Oncology under Dr. Henry R. Shibata for accreditation without certification. The McGill program is the first such program to be recognized by the Royal College since this possibility was established in 1989.

The pre-requisite for training is five years of a general surgery residency or equivalent. Subsequently, fellows spend two years in the program. Of this, 18 months are spent in general surgery oncology, 3 months in medical oncology, and 3 months in radiation oncology. In addition, during their rotations, they also spend some time in epidemiology and statistics, palliative care, and they are encouraged to carry out a research project.

Other surgeons participating in this program are Dr. Roger Tabah of the MGH, Dr. Richard Margolese of the JGH, Dr. John Keyserlingk of St. Mary's Hospital.

EDM
Dr. A.R.C. Dobell Awarded Emeritus Professorship

Dr. Dobell was recently appointed Emeritus Professor of Surgery by McGill University. This award was presented to him by Dr. J.L. Meakins. This is in recognition of his many years of leadership in C.V.T. and for his exemplary care of patients and service to the University.

Tony was Visiting Professor at the Tri-Service General Hospital in Taipei, Taiwan, R.O.C. last March and was a guest lecturer at the Annual Surgical Congress of the Republic of China, speaking on “Cardiac Transplantation at McGill”. He was treated to outstanding hospitality and had the opportunity to visit several medical centres as well as beautiful scenic areas.

Once again, he was struck by the uniformity of operating rooms around the world and by the profusion of high-tech equipment as well as the complete familiarity of the Taiwanese surgeons with the latest surgical advances throughout the world - further proof of the "global village" concept. Surgical accomplishments are on a par with North America in every way with the sole exception of research.

He has submitted the following data regarding his trainees.

SURVEY OF MCGILL CVT TRAINEES 1993*

Period covered: 1965-1993
Number completing training: 37
Died: 3
Currently taking fellowships: 2
Number in active practice: 32 (data following are on these 32)

LOCATION

U.S.A. 16
Massachusetts 1
Connecticut 2
New York 1
New Jersey 1
Pennsylvania 1
Nebraska 1
Texas 1
Utah 1
California 7

VENEZUELA 1

CANADA 15
McGill 5
U de M 1
Sherbrooke 1
Toronto 2
London 1
Calgary 2
Edmonton 1
Saskatchewan 1
Victoria 1

CURRENTLY DOING RESEARCH 16 (50%)
IN TEACHING CENTRES 21
DOING TRANSPLANTATION 12
CHIEF OF A UNIT 15 (47%)

NUMBER OF OPERATIONS IN 1992 BY 27 RESPONDENTS 6528 (av. 241)
ADDITIONAL HONOURS:
- Chairman of university department
- Editorial board membership
- Important national, provincial committee
- & examining board memberships

*Courtesy of Dr. A.R.C. Dobell

G.I. SERIES
Soldier's baseball game
Liver Transplantation at McGill

Liver transplantation is an accepted treatment modality for patients suffering from end stage liver failure. As of 1993, over 28,000 liver transplants had been performed worldwide in just under 160 medical centers. It is a real “coup de force” by surgeons that liver transplants should work so well as a treatment modality. When one remembers that the field of solid organ transplantation only began 40 years ago with the first successful kidney transplantation between identical twins. Many factors are responsible for the good results (about 80% 1 year survival) that most transplant centers report at present. Better and more potent immunosuppressants, better preoperative and postoperative and anesthesia care, and a more careful and earlier patient selection prior to liver transplantation. Liver transplantation has become an essential tool for any medical center caring for patients with liver disease.

The Royal Victoria Hospital and McGill University have several distinguished accomplishments in the field of transplantation. The first successful kidney transplant in the British Commonwealth was performed in 1958 at the Royal Victoria Hospital, and we were one of the first centers in Canada and the world to perform a heart and liver transplant in the late sixties and early seventies. In Canada, liver transplantation began in earnest in 1986 and presently there are 7 centers that perform this operation with regularity. Last year 295 liver transplants were done in Canada, 73 in Quebec. Our program at McGill was revived in May 1990. Since then we have done 52 liver transplants in 43 patients ranging in age from 18 to 69 years. We follow a similar status of urgency for organ allocation that is used in the US (UNOS). Status 1 = home stable, Status 1A = home unstable, Status 2 = hospitalized, Status 3 = ICU, Status 4 = Fulminant liver failure or on Life Support. Since the program was started we have not backed away from difficult or advanced cases. Some of our colleagues in fact may accuse us of being somewhat aggressive. Of the 43 patients we have transplanted to date 6 were Status 4, and 3 were Status 3 for an overall 26% of patients being critically ill at the time of transplantation. By contrast in Canada only 10% of patients transplanted are Status 3 and 4. We have also taken several patients that were challenging operatively, such as those with a portal vein thrombosis, giant sub hepatic varices, and previous hepatobiliary surgery. Since the start of the program, our 1 year survival is 77%. From March 2, 1993, to February 15, 1994, we have done 24 liver transplants in 20 patients with an 85% actuarial 1 year survival. Currently we have at a pace to do 40 to 50 liver transplants a year. By American standards this seems little but by Canadian standards we are becoming a major transplant program.

Academically the program is also advancing. We have had a mini success story with Hepatitis B (HBA-DNA positive) patients. Currently most programs do not actively transplant these patients because of a high rate of recurrence, approaching 100% in HBV-DNA positive patients. However, we have managed to prevent recurrence of Hepatitis B in 4 patients transplanted in the last 2 years. Two of these patients (10 most to 20 most follow-ups) were HBcAg/HBV-DNA positive pre-transplant and were also of Asian origin, a subgroup of patients with a 100% recurrence in the 1st year post transplant. Currently both patients have a normal liver enzyme profile and are HBV-DNA/ and HBcAg negative. From the beginning the liver program has been managed by myself with active participation of J. Barkun, N.V. Christou, and C. Nohr. Others that have participated in several operations have included J.L. Meakins, L. Rosenberg, M. Wexler, J.M. Laberge. The future holds bright and we have a strong government commitment and hospital support to do even better.

Jean Tchervenkov, M.D.

ROYAL COLLEGE CERTIFICANTS 1993

Congratulations to the following McGill residents who were certified by the Royal College in November of 1993.

General Surgery

Dr. Riad Adoumie
Dr. David Clas
Dr. Maureen Chung
Dr. David Evans
Dr. Helene Flageole
Dr. Andrew Gyopar
Dr. Rea Brown as Chairman of the Examining Board in General Surgery of the Royal College of Physicians and Surgeons of Canada is especially proud that so many residents passed both their oral and written examinations.

Dr. Teanoosh Hosseinzadeh
Dr. Kevin Lachapelle
Dr. Paul Wizman

Orthopedic Surgery

Dr. Eric Laxer
Dr. Patrick Meere
Dr. Gary Schmidt
Dr. Todd Stein
Dr. Allan Tissenbaum

Urology

Dr. Abdullah Al-Malki
Dr. Denise Arsenault

Pediatric Surgery

Dr. David Sigalet
JO MILLER ORTHOPAEDIC RESEARCH LABORATORY

The Jo Miller Orthopaedic Research Laboratory has received two prestigious awards in the past year. In June 1993 at a combined meeting of the Canadian Orthopaedic Association and the Canadian Orthopaedic Research Society, Dr. Bobyn and his group were awarded the Founder’s Medal for a paper entitled: “The Effect of Noncemented Implant Surface Geometry on Polyethylene Debris Migration and Peri-implant Histogenesis”, J.D. Bobyn, R. Aribindi, E. Mortimer and M. Tanzer. The paper was presented by Dr. R. Aribindi, a research fellow in the laboratory at the time. At present, he is enrolled in the Orthopaedic Surgery Programme. The Founder’s Medal is awarded annually for the best research paper presented at the meeting in Canada.


This is an extremely prestigious award which is given annually at the American Academy of Orthopaedic Surgeons Meeting. A large number of international submissions are made for this award which is one of only three such awards given out annually by the Hip Society, thus indicating its importance in the area of constructive surgery about the hip.

Dr. Bobyn and his group are to be congratulated for these two awards as they represent significant basic science research as it relates to the clinical practice for orthopaedic surgery in the area of implant fixation.

C.E. Brooks, M.D.

QUEBEC ASSOCIATION OF GENERAL SURGEONS

Some new developments in General Surgery in the Province of Quebec need special emphasis. As you may have read in the “Scalpel” over the past year, we were involved with a litigation with the government and a Board of Directors of a hospital in Gaspé which was trying to impose a very strict call schedule on a 62 year old surgeon. This case was judged in our favor and the Government appealed the decision. Recently the appeal has been withdrawn which now makes this legal. The judgement stipulates that: “Only the professional knows his own capacity. If what he considers to be too great a workload is imposed upon him, he has the right and the duty to turn it down”. This judgement will certainly have an impact in manpower planning and other provinces in Canada are very interested in what is going on in Quebec.

A second important development includes the result of negotiations which have gone on over the last year regarding a global 3% increase in the amounts allotted to specialists in the Province. During these negotiations, it was stressed that specialists be compensated more than those who do not have such duties. This principle was accepted and general surgeons’ fees were increased more than fees in other specialties; indeed some specialties had a negative adjustment in their fees. I would suggest that you consult the “Scalpel” and wait for the directives from the Régie to claim the new benefits. In general, I would also suggest that all surgeons should continue reading the tariff’s book to make sure that optimal billing is occurring.

The Association through its President and a task force at the Minister’s level has drafted a document outlining the ideal general surgical practice. This is the first time that a group attempts to describe what the daily activities of surgeons should be and the ministerial committees will at least have a working document.

The Quebec Association is always open to receive correspondence or communications from the general surgeons concerning problems they may have with their administration or with imposed budgetary restrictions which will influence the length of our waiting lists. We have attempted to maintain a pro-active role in the negotiations with the Federations and with Governments and we look forward to your support.

C.E. Brooks, M.D.
Member of the Executive
Quebec Association of General Surgeons
The McGill Department of Surgery invites you to tie one on for the old school! The McGill blue silk tie with crest, square knot and fleam is available for purchase from the Alumni Office as follows:

McGill Dept. of Surgery Alumni
Montreal General Hospital
Room C9 126
1650 Cedar Avenue
Montreal, P.Q. H3G 1A4

Telephone: (514) 937-6011 ext. 2028
Fax: (514) 937-5522

Please send me the McGill Dept. of Surgery tie.

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MCQUEEN DEPARTMENT OF
SURGERY ALUMNI

Dr. David Mulder, Chairman of the McGill Department of Surgery, recently formed a committee to develop an alumni organization. The principal goal is to bind former trainees with current faculty and to foster communications both academic and social. The committee will prepare current mailing lists of former trainees in CVT, General Surgery, Orthopedic Surgery, Pediatric Surgery, Plastic Surgery, and Urology. For example, the reception at the annual meeting of the American College of Surgeons organized by Dr. Marvin Wexler will come under the aegis of this committee. The McGill surgery tie for men and scarf for women will be available from the Alumni Office.

The Fraser Gurd Annual Day will continue to focus on research and training of residents and fellows, and the L.D. MacLean Day in November will be oriented towards alumni functions and used to encourage the return to McGill of former trainees.

Contributions of $25.00 are requested from each alumnus to allow continued publication of The Square Knot and support other special activities. A receipt will be provided.

Alumni Committee:
Dr. A.R.C. Dobell
Dr. A. Hreno
Dr. C. Laurin
Dr. Y. Taguchi
Dr. A. Turnbull
Dr. H.B. Williams
Dr. E.D. Monaghan (Chairman)
Mr. John Kinghorn (Administrative Assistant)
The Montreal General Hospital, Room C9.126
Tel.: 937-6011 local 2028
Fax: 934-8289 or 937-5522

Submissions Welcome!

We can't do it without you — if you have any information you want published in The Square Knot, comments about our newsletter or suggestions, we want to hear from you!

Send submissions to:
John Kinghorn
Assistant Editor
The Square Knot
The Montreal General Hospital
1650 Cedar, D6 129
Montreal, Quebec
Canada H3G 1A4

Moving?
If you change your address, or if you know someone who would like to receive this newsletter, please drop us a line.

The Montreal General Hospital, Room C9.126
Tel.: 937-6011 local 2028
Fax: 934-8289 or 937-5522

THE SQUARE KNOT
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LAYOUT, DESIGN AND PRINTING
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