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Multiple facets of aging... A challenge of the 90's and beyond

Services to the elderly, because of their diversity in nature, have to be well integrated and guarantee a continuum of services. Experience has shown that the best investment to ensure good quality of life and well being must be in the prevention aspect. This involves ensuring that people are kept healthy and well for as long as possible in their environment, by doing everything possible to stop any kind of deterioration that will lead to loss of autonomy.

Preamble

by Henri Elbaz, Executive Director

A comprehensive health care system for the elderly is mainly centred in the community, with health care institutions being used only when the system breaks down or the patient requires temporary admission into an institution because of his/her condition.

Our community is under-resourced in long-term care beds and in home care resources. At a time when significant increases in resources cannot be expected, our experience suggests that the present system of care is not responding adequately to the needs of the elderly. Despite serious attempts, interventions are often parallel, fragmented, with poor coordination and integration.

The elderly have a wide range of needs, from the well and totally independent to the frail elderly living in the community and the very dependent elderly in institutions. Our experience points to the need for an integrated system of care that takes into account their different needs. It must be patient and family centred, rather than institution driven, and should mobilize the strengths of the public, community and private organizations towards common goals of maintaining elderly in the community in a dignified and caring manner while offering appropriate care in the right setting for those elderly who have become too dependent to live in the community, and this in the most cost efficient manner.

The system must be based on education and promotion of "wellness", detection, prevention and rehabilitation in order to prevent or delay, when possible, loss of autonomy and dependence. For those who become frail there must be an integrated and coordinated model of care offering quick intervention as well as continuity of care for the full spectrum of health and social services.

We live in a unique time in history, when the average life expectancy is higher than it has ever been. As a result, the percentage of elderly over the age of 75 in the general population continues to increase. Understanding their specific and diverse needs and finding the best ways to meet these needs, is perhaps one of the greatest challenges facing our health care system today.

The impact of a rapidly aging population is felt particularly strongly at the Jewish General Hospital. According to Statistics Canada, 22.4% of the Montreal Jewish population is over the age of 65. Compounding this situation, the largest percentage of seniors aged 75 and over in Montreal reside in the DSC Ste. Justine, the territory serviced by the JGH. Given these figures, it is not surprising that, compared to all other university teaching hospitals in Montreal, the JGH has over two and a half times the number of patients aged 75 and over coming to the Emergency Room and the highest number of hospital admissions for this same age group (at least one and a half times more than other hospitals).

to the stress this causes for the patients, the deficit of long term care beds is a strain on hospital resources. As an acute care hospital, the Jewish General should devote no more than 10% of its beds to long term care. The reality is that, on average, more than 20% of our beds are occupied by patients awaiting placement in a nursing home.

Fragmented care: a community challenge

As medical and teaching director Dr. Harold Frank points out, the rest of Canada will not be facing similar demographics until the year 2020. This means that the JGH has had to develop innovative systems and solutions to the problems inherent in caring for the frail elderly. However, the hospital can no longer cope with this situation on its own, nor should it have to. "We see this as a larger problem than just a hospital problem," maintains Dr. Frank.

Defining the elderly and their needs

To understand the significance of these figures, it is important to note that the "elderly" is not a monolithic group, and that the needs of a healthy, independent 65 year old are very different from those of a frail 85 year old. In general, the groups can be divided into those aged 65-75 who are healthy and independent, aged 70-80 who are faced with the potential or actual loss of autonomy, and over 75

who may have significant geriatric problems such as decreased mental capacity, decreased mobility, difficulty with continence, complex medical problems and poor social support. The last two categories are considered the frail elderly.

Dr. Howard Bergman, chief of the Division of Geriatric Medicine, explains that frail elderly patients admitted due to an acute health care problem often have other problems as well. Thus, they require a longer hospitalization period and are at risk of deteriorating to the point where they cannot be sent home. "After a week in bed, an 80 year old might not be able to walk at all," notes Dr. Bergman. They then have a longer stay and many become long term care patients, remaining in the hospital until a bed becomes available in a nursing home.

Unfortunately, because there is a severe shortage of 300 long term care beds in the Jewish community, this can be a very long wait. In addition

Demographic Data for Elderly, Age 65+ in the Jewish Community

AGE	1981		1986		1991	
	NUMBER	% TOTAL	NUMBER	% TOTAL	NUMBER	% TOTAL
65-74	13,030	12.8	11,680	12.0	12,195	12.1
75+	6,355	6.3	8,025	8.3	10,380	10.3
65+	19,385	19.1	19,705	20.4	22,575	22.4
Total*	101,365		96,710		100,755	

*Total Jewish population - all ages
Source: Statistics Canada

JGH Executive Director Henri Elbaz explains that while the community does offer a variety of services to the elderly, they tend to be fragmented. "The health care system is too complex to let people go through it on their own. It is up to the leadership in the Jewish community and the public establishments to combine their efforts to optimize the care for our elderly."

Accordingly, Mr. Elbaz and Mrs. Sheila Zittler are co-chairing a sub-committee of the Jewish Public Establishments Commission that is working on the development of a comprehensive health care system model for the frail elderly. The objectives of such a system are to promote wellness, to detect, prevent and/or delay the loss of autonomy, to maintain the elderly in the community in a caring and dignified manner, to reduce inappropriate acute hospital admissions and to reduce long term care admissions. **Aging... continued on page 9.**

Nurses respond generously to toy drive



Left to right: Veronica Locquio, Heidi Lipas, Suzanne Béliveau, Halina Bomersbach, Edith Valenzuela, head nurse Adele Ferrante, Betty Foz, Christina Doré.

Congratulations to the nursing staff on 8 West who responded quickly and generously to an appeal for toys in time for the holidays. The Nursing Department's Centre for Staff Development, directed by Valerie Frunchak, offered a Bagel Bash to the first nursing unit to bring in one toy per staff member. While every unit was quick to respond, the nurses on 8 West were the first, with 80 toys filling three big boxes. Altogether, over 300 toys plus food and clothing were collected by our nurses and sent to the Women's Centre of Montreal, which provides support and resources to 1,000 families, mostly headed by single mothers, and from a variety of cultural and religious backgrounds.

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News In Brief

Hypertension Clinic opens at the JGH

The Division of Internal Medicine is pleased to announce the opening of a Hypertension Clinic. Directed by Dr. Luc Trudeau, the clinic will treat patients who require special consultation for the management of this multi-system disease. Patients must be referred to the clinic by their own doctor. For more information, please call 340-8222, local 5783.

Hillel honors Dr. Batist

The Hillel Students Foundation is planning a special evening in honor of Dr. Gerald Batist on Monday, May 8, 1995, in recognition of his activities in aid of Soviet Jewry. He acted as an advocate for Refuseniks in the Soviet Union, particularly for those suffering from cancer and other illnesses. Refuseniks were Soviet Jews who were denied their request to leave the country and subsequently were harassed and persecuted by the government.

Dr. Batist created an international committee of physicians and human rights advocates, and travelled throughout North America and Europe to encourage support for patients behind the Iron Curtain.

Currently, Dr. Batist is director of Experimental Pharmacology at the JGH and professor of Medicine and Oncology at McGill University.

Funds raised through this event will be used by Hillel for special programming focussing on Jewish continuity.

For more information concerning the evening in honor of Dr. Batist, please call Mark Zarecki at 845-9171.

Dr. Sidney Feldman honored

"La motivation au changement chez les toxicomanes" was the topic of a two day symposium held at the JGH, organized by the Centre de réadaptation Alternatives in collaboration with the Fédération québécoise des centres de réadaptation pour personnes alcooliques et autres toxicomanes. Dr. Sidney Feldman, a physician and team leader at the Herzl Family Practice Centre and Department of Family Medicine, was honored during the symposium for his dedicated efforts as a medical resource person for Alternatives.

Dr. Malus' book gets rave reviews

In addition to his busy practice as a member of the JGH Department of Family Medicine and the Herzl Family Practice Centre, Dr. Michael Malus is the author of a book just published.

"Before the End of the Day: Stories from a Doctor's Journal" is a collection of tales drawn from his experiences working as a physician in Montreal and rural Quebec, and with native peoples in the Northwest Territories, Hudson's Bay and New Mexico.

Dr. Malus' serious insights are presented with humour, and his book has received excellent reviews. It is published by Véhicule Press, and is available at Montreal bookstores and the hospital Gift Shop at a cost of \$15.95.

Special promotion to benefit JGH Department of Family Medicine

Nautilus Plus in the Cavendish Club is offering a special promotion which will raise funds for the JGH Department of Family Medicine and the Herzl Family Practice Centre.

From February 15 to March 30, 1995, for a \$25 donation to the Herzl, you will be able to use all the Nautilus Plus facilities for a three week trial period. If, after this period, you wish to join the club, you may do so for another \$25 instead of paying the regular \$195 enrollment fee.

The monthly fee at Nautilus Plus is between \$30 and \$45, depending on the services chosen.

For further information, please contact Michael Zinman at 489-7543.

JGH Nursing director invited to AHA committee

Mrs. Marilyn Monk, JGH Associate Executive Director - Nursing, has been asked to serve on the American Organization of Nurse Executives (AONE) Commission on Practice.

The AONE, a corporate subsidiary of the American Hospital Association, is a professional leadership organization for nurse executives and managers.

The mandate of the Commission on Practice is to monitor trends in nursing practice and structures within health care organizations across the country, examine changes and events that affect the quality of nursing practice and care, and develop initiatives for advancing clinical and management practice.

Cardiologist wins medals



Participating in the team triathlon, left to right: Drs. François Marcotte, Ann Walling, George Honos.

JGH cardiologist Dr. Ann Walling struck gold and silver, winning a total of four medals at the Masters Swimming Championships held in Montreal last summer. Dr. Walling competed against 500 swimmers in her age category to win the gold medal in the 100 metre breaststroke and also won the gold for the relay race. She placed second in the 200 metre breaststroke and the 50 metre breaststroke, adding two silver medals to her impressive collection.

Between the ages of 10-25, Dr. Walling swam competitively, training five hours per day. She now swims for 90 minutes, three mornings per week, before her day begins as a cardiologist at the JGH.

Over 3000 people of all age levels participated in last year's Masters Championships, which attracts competitive swimmers from around the world.

Dr. Walling also found the time to participate in a triathlon held in St. Jovite, where she swam as part of a JGH cardiology team that included Dr. François Marcotte on the bicycle and Dr. George Honos as the runner. Their competitors included a team with Dr. John McCans, chief of the JGH Division of Cardiology, who is a runner, and cyclist Dr. Jean Diodati.

JGH neonatologist wins award



Dr. Claudette Bardin (second from left) receives her award.

Jewish General Hospital neonatologist Dr. Claudette Bardin was one of the winners of an Organon Poster Award at the 14th World Congress of Obstetricians and Gynecologists. The award, a joint venture between Organon, the World Congress of Obstetricians and Gynecologists, and the Canadian Society of Obstetricians and Gynecologists, is designed to recognize young upcoming scientists, and to emphasize the importance of posters in research presentations. This year, four out of the ten award recipients are Canadian.

Dr. Bardin won the award for a group study, co-authored by Drs. Apostolos Papageorgiou and Phyllis Zolkowitz, entitled "Additional Risks for Severe Retinopathy of Prematurity (ROP) in Infants Less Than 1000 grams."

Autologous transfusion program to benefit cardiac surgery patients

Eligible patients will be able to donate their own blood prior to heart surgery through the creation of a new JGH autologous transfusion program for cardiac surgery.

There are several advantages to this program, explains cardiac surgeon Dr. Robert Goodman. Autologous transfusion reduces the risk of viral transmission. Since screening for viral diseases such as Hepatitis B and HIV is being done in Montreal, this risk is already negligible; giving one's own blood reduces it to almost zero. Another benefit is a lower incidence of adverse reactions to transfusion. In addition, this program will help reduce the pressure on the hospital's Blood Bank.

Dr. Goodman estimates that between 30-40% of the hospital's cardiac surgery patients will be able to take advantage of the autologous transfusion program. It will be up to the cardiac surgeon to decide whether a patient is eligible. For example, patients must be in good general health aside from their heart condition, must not have any active viral infections, and must have stable angina at the time of entry into the program. Patients scheduled for elective cardiac surgery will be eligible to participate.

Patients who are selected must first undergo a blood test to determine whether they can continue. The results of these tests will be available

within 3-4 days. If accepted into the program, patients will be required to give one unit of blood, once per week, to a maximum of three units. The cardiologist on call will be available for consultation should a patient experience any problems during the procedure.

The autologous transfusion program relies on close collaboration with the Red Cross. Patients will come to the JGH to have their blood taken by a nurse from the Red Cross. The blood will be tested by the Red Cross and then sent back to the JGH Blood Bank for storage. There is no cost to the patient.

Patients who would like more information are advised to speak to

their own cardiologist.

Currently at the JGH, an autologous transfusion program is available only for orthopedic surgery.

In the case of elective orthopedic surgery, eligible patients are sent to the Red Cross to have their blood tested. If accepted, they then go to the Red Cross once a week, for a maximum of three weeks, to have their blood drawn. The blood is then sent back to the JGH for storage.

30-40% of the hospital's cardiac surgery patients will be able to take advantage of the autologous transfusion program.

Rooming-in: better care for mothers and babies

A rooming-in policy was introduced on the obstetrics unit (5 West) in December 1994. Mothers and their babies are admitted into their rooms together, and the baby remains with the mother for the duration of their stay. All nursing and medical care takes place in the room. Newborns requiring closer supervision and infants of ill or tired mothers will be cared for in a smaller nursery.

Head nurse Lise Pouliot explains that there are several benefits to this model of care, which is being adopted by obstetrical units across North America. Rooming-in promotes early parent-infant contact and facilitates the development of parenting skills and competency within the context of continuous nursing support. By providing care in the mother's room, nurses will be better able to teach parenting skills, answer questions and observe mother-infant interaction.

The new system will lead to more effective use of the nursing staff. Previously, more nurses were assigned to the nursery at night, and there were fewer nurses available on the floor. Now, the number of nurses on the floor has increased, enabling nursing staff to respond to mothers' needs more quickly and efficiently.

As is the practice at hospitals in the United States and parts of Canada including Montreal, the length of stay following a normal delivery with no complications will be 24-36 hours. A major research study carried out at the JGH comparing early with regular discharge showed that healthy mothers discharged early fared just as well as those who remained in hospital, and in some cases, did even better. Based on these findings, the hospital

decided to institute an early discharge program (24 hours postpartum).

This carefully designed program will involve only healthy mothers and babies who meet strict medical criteria. If there are any health problems or it is clear that a mother needs more time to learn proper infant care skills, she will not be sent home early. The program includes a follow-up call by an obstetrics nurse on the day after discharge, and a visit by mother and baby on day three to the 5 West Clinic for a complete nursing assessment.

These innovations should be viewed in the context of changes in the health care system and severe budgetary constraints. For example, one-day surgery is becoming more and more common throughout the western world. Cancer treatments such as chemotherapy are often done on an out-patient basis. These changes are not just cost-effective, but have proven to be more beneficial to patients.

The nursing staff in obstetrics are dedicated to the well being of their patients, and are available to address any concerns.

Samuel Cohen receives hospital's first Distinguished Service Award

Throughout its 60 year history, the Jewish General Hospital has been fortunate to rely on the support of thousands of people in the community.

This year, the Jewish General Hospital Distinguished Service Award was created to recognize and honor extraordinary individuals who have had a profound impact on the development of the hospital. The award was presented at the 60th Annual Meeting to Samuel S. Cohen, who served as the hospital's first executive director from 1933-1967.

Honorary President Leo Goldfarb, chairman of the Distinguished Service Award Committee, introduced Mr. Cohen as an obvious choice. "What puts Samuel Cohen in a class by himself are the qualities that make him a worthy recipient of the Distinguished Service Award: his genuine concern for the welfare of others, his commitment to easing human suffering, and his devotion to this hospital and to its goals."

In accepting the award, Mr. Cohen joked that "the 25 years that have elapsed since my retirement have exaggerated my importance." He recalled the challenges of the early years, when, together with the Board of Directors and the medical and technical staff, he set about building a hospital that could be ranked with the best in the country. "Significant achievements are rarely attained by people acting alone. The late Mr. Allan Bronfman [first hospital president] was my inspiration... I accept this award on behalf of so many individuals who have created, built and supported the hospital and I treasure it as a reminder of my 60 year association with this hospital and this remarkable Jewish community."



Leo Goldfarb presents the award to Samuel Cohen.



Dr. Bernard Shapiro

The presentation of the Distinguished Service Award was followed by an address by Dr. Bernard Shapiro, Principal and Vice-Chancellor of McGill University. He spoke about the challenges that lie ahead for both McGill and the JGH. These include the tremendous growth of knowledge, the rising costs of doing research, the reduction of government funding and the increased expectations from a larger, ever changing community. "The competence required to be at the forefront in absolutely every area is impossible to obtain. The future is in recognizing where we are good or better than others and developing networks with other institutions to fill in the gaps," he said.

Dr. Shapiro emphasized that the JGH is a vital part of the McGill network. "We will not tolerate anything but the most imaginative relationship with the Jewish General. Together we will build a model of education, patient care and research."



3rd Annual JGH Golf Classic

...an unprecedented early success

The 3rd Annual JGH Golf Classic, hosted once again by Mercedes-Benz Silver-Star Sam Eltes Automotive Group, will take place on June 19, 1995, at Elm Ridge Golf and Country Club.

Under the capable leadership of Mel Ellen, chairman, and Charles Larente, vice-chairman, 39 sponsorships were sold by mid-December!

Not to be outdone, The Auxiliary is hard at work preparing the Golf Classic Souvenir Book. Co-chairmen Rona Miller and Joan Chisling are doing an outstanding job.

We'd like to thank the following corporate sponsors for their support:

20/20 Group Inc., AGF Management Limited (2 holes), Astral Communications, Aventure Electronique, B.P.I. Capital Management, Bank of Montreal, Canadian International Group (2 holes), Consoltex Inc., Dynamic Fund Management Ltd., Ernst & Young, Fidelity Investments Canada Limited (2 holes), G.T. Global Canada Inc., Gestion Financière Talvest Inc., Guardian Group of Funds Limited, Guess Jeans, Lapointe Rosenstein, Mackenzie Financial Corp., Madacy Music Inc., Marleau Lemire Inc., Midland Walwyn (2 holes), Nesbitt Burns, Peerless Clothing Inc., Power Corporation du Canada, Republic National Bank of New York (Canada), Richter, Usher & Vineberg, ScotiaMcLeod Inc. (2 holes), Spectrum Bullock, Swiss Bank Corporation, Templeton Funds (2 holes), Toronto Dominion Bank, Trimark Investment Management Inc. (2 holes), United Financial, Wood Gundy Inc.

Proceeds will benefit the Department of Radiology.

Players are signing up fast. Space is limited, so be sure to register soon. Information: 340-8251.



Chairman Mel Ellen and Vice Chairman Charles Larente are delighted with the early response.



Golf Committee for 1995

Standing left to right: Joan Chisling, Frank Leboff, Milly Lande, Rona Miller, Rose Yaffe, Jeff Fleisher, Leonard Kantor, Jackie Margolese, Michael Shapiro, Leo Goldfarb, Edouard Schouela, Leonard Ellen, Morton Brownstein, Steven Favor, Ron Waxman, Betty Rozovsky, Melanie Frank, Al Regenstreif. Seated left to right: Arthur Diamond, Charles Larente, Vice Chairman; Mel Ellen, Chairman; Brahm Gelfand, Hospital President. Absent from photo: Sam Eltes, Leo Granofsky, Jacques Nadeau, Stephen Vineberg, Eddy Wiltzer.

JGH "twins" with hospital in Latvia

A special twinning ceremony between the Jewish General Hospital and Bikur Cholim Hospital in Riga, Latvia was held in October when Dr. Arkadijs Gandzs, director general of Bikur Cholim, visited the JGH. The partnership will enable both hospitals to create links and exchanges from the clinical, scientific and technical point of view.



Left to right: Henri Elbaz, Dr. Arkadijs Gandzs, Brahm Gelfand, Herbert Marx.

Bikur Cholim is the only Jewish hospital in the former Soviet Union and a source of great pride for the Jewish community of Latvia. Built in the early 1920's, the hospital was returned to the Jewish community in 1992 after Latvia gained its independence from the Soviet Union.

In expressing his appreciation to the JGH, Dr. Gandzs said, "We hope to have an exchange of specialists, that our doctors will visit Montreal and you will come to us." He described the state of disrepair in which Bikur Cholim was returned: there were no linens, no furniture and little in the way of supplies and medications. Economic hardships and a declining standard of living have resulted in more illness, especially amongst children and the elderly. Although the hospital has been modernized, the main problem is a shortage of medical equipment and supplies.

Both JGH Executive Director Henri

Elbaz and Brahm Gelfand, president of the hospital, welcomed Dr. Gandzs to Montreal and assured him of their collaboration. "What I envision," said Mr. Elbaz, "is permanent collaboration with every department and discipline, and a free flow of information on every level." Mr. Gelfand noted that both hospitals were celebrating milestones—the 60th anniversary of the JGH and the 70th anniversary of Bikur Cholim. He compared the relationship between the two hospitals to that of siblings who help each other as a family.

Also present at the twinning ceremony were Dr. Guntis Silins, Consul General of Latvia, Stephen Springfield, president, Jewish Survivors of Latvia, and the Honorable Mr. Justice Herbert Marx, who was responsible for initiating contact between Bikur Cholim and the JGH after a visit to Riga last spring.

Louis Gross - Harold Segall Memorial Lecture



Dr. Valentin Fuster (second from right) is pictured here with members of the organizing committee, left to right: Dr. Marcus Martin, Dr. David Langleben and Dr. Brahm Hyams.

"Heart Attacks: What We Know About How They Happen" was the topic of the Annual Louis Gross - Harold Segall Memorial Lecture, held at the JGH in October. The guest speaker was Dr. Valentin Fuster, a renowned expert on vascular biology. Dr. Fuster is a professor of Medicine and director of the Cardiovascular Institute, Mount Sinai School of Medicine, New York.



Dr. David Langleben (left) presents the Montreal Clinical Society Book Award to Dr. Lawrence Rudski, chief resident in Internal Medicine.

Aisenstadt Clinical Day focusses on cancer

"Prospects for Cancer Prevention" was the theme of the 31st Annual André Aisenstadt Clinical Day when experts from across North America gathered at the Jewish General Hospital to share their latest research findings. Topics included "Understanding the Causes of Aging and Cancer", "The Role of Tamoxifen in Breast Cancer Prevention", "Prospects for Cancer Prevention by Dietary Interventions" and "Prevention Interventions in Colorectal Cancers".



Inset: Conference coordinator Dr. Michael Gold.

Speakers, left to right: Dr. David Hunter, associate professor of Epidemiology, Harvard School of Public Health, Boston; Dr. Stanley Hamilton, professor of Pathology and Oncology, The Johns Hopkins University School of Medicine, Baltimore; Dr. André Aisenstadt; Dr. Philip Gordon, chief, JGH Division of Colon and Rectal Surgery, professor of Surgery and Oncology, McGill University; Dr. Richard Margolese, chief, JGH Department of Oncology, Herbert Black Professor of Surgery, McGill University. Absent from photo: Dr. Bruce Ames, professor of Biochemistry and Molecular Biology, director, National Institute of Environmental Health Sciences Centre, University of California; Dr. Scott Lippman, associate professor of Medicine, M.D. Anderson Cancer Centre, Department of Thoracic/Head and Neck Medical Oncology, Houston.

Epidemiologists study disease patterns

According to Dr. Christina Wolfson, a member of the JGH Centre for Clinical Epidemiology and Community Studies, the best word to describe epidemiologists is "skeptical".

As a result of their extensive training in designing studies that try to eliminate bias and collect accurate, useful information, they tend to be careful about drawing conclusions, and read everything with a critical eye. "We look for several alternative explanations. And we never say 'x' causes a certain disease, we say 'x' is associated with this disease."

Whereas physicians examine and treat individual patients, epidemiologists study the risk factors and potential causes of disease in groups of individuals. More specifically, they look for patterns of risk factors and try to determine if these patterns differ between large groups of people who do and do not have the disease in question.

Working closely with neurologists and geriatricians, Dr. Wolfson's focus is on study design, helping physicians decide who to select, what characteristics to include, and who to include in the control (comparison) group. As she explains, one of the most difficult tasks is to design effective measurements that are as objective as possible. "We have to deal with biases inherent in studying real people. Although it is not possible to totally eliminate all bias, we try to prevent it, to tell if bias exists in the study, and if so, to predict the impact of such bias on the results."

A specialist in neuro-epidemiology, (the study of neurological disorders), Dr. Wolfson is an associate professor of Medicine and of Epidemiology and Biostatistics at McGill University. She heads a research team in the epidemiology of dementia, coordinated from the JGH. Funded by the Fonds de la recherche en santé du Québec, this team consists of researchers from the Jewish General Hospital, the Montreal General Hospital, Hôpital Hôtel Dieu, and the Centre Hospitalier Côte des Neiges.



Drs. Christina Wolfson and Howard Bergman.

Alzheimer's Disease studied

At the JGH, Dr. Wolfson is involved primarily in collaborative studies with the Division of Geriatric Medicine's Memory Clinic, directed by Drs. Howard Bergman and Howard Chertkow. For example, one research project, funded by Health and Welfare

Canada, is to assess the time of onset of Alzheimer's Disease. Currently, there is no questionnaire that can determine the length of time that a patient has had the disease. It is hoped that by designing a standardized, uniform interview, researchers will be able to more reliably ascertain when the disease started in these patients. This is important because drug trials are most effective with

patients who are in the earlier stages of Alzheimer's. Dr. Wolfson believes that involving the caregivers will yield a great deal of information.

Illustrating how easy it is for bias to creep into the study of dementia, Dr. Wolfson said that an association had been made between the disease and education, i.e. people with higher education were found to be at less risk for developing Alzheimer's. However, the screening test for dementia is educationally biased, in that people who are better educated also know how to answer more test questions

correctly. This is where interviewing the caregiver can help tremendously. Spouses, for instance, are qualified to talk about the changes the patient has undergone and any recent deterioration in behaviour and ability. On the other hand, a sibling is probably better equipped to answer questions about the patient's childhood.

Dr. Wolfson also is involved in a feasibility study examining the hypothesis that general anesthesia may be a risk factor for Alzheimer's.

It has been shown that elderly patients are at risk of becoming delirious after surgery, and this risk is especially high in people who have cognitive problems. The question that intrigues Dr. Wolfson is whether post-surgical delirium is a marker for dementia in later years. She is trying to plan a long term study that would monitor patients post surgery, to see how long memory problems persist, which symptoms last and which disappear. Finding the right tools for picking up delirium, measurements that all physicians and nurses can agree on, is the first step.

Recent findings seem to indicate that people with arthritis are at lower risk of developing Alzheimer's, and it has been suggested that the anti-inflammatory agents taken by arthritis sufferers may protect patients against dementia. Although the evidence to support this theory is sparse, the question is intriguing. Dr. Wolfson is conducting a small exploratory study, funded by the American Alzheimer's Association, linking patient data to prescription data of anti-inflammatory drugs.

By using existing data, looking back over old records and conducting efficient, smaller scale feasibility studies before launching into larger scale, expensive projects, epidemiologists like Dr. Wolfson help save money. And by taking great care to design studies that are as objective as possible, they make sure that the results are valid and useful.

JGH centre receives one million dollar university-industry grant

Dr. Lucien Abenhaim, Scientific Director of the Jewish General Hospital Centre for Clinical Epidemiology and Community Studies, has received a one million dollar university-industry grant, approved by the Medical Research Council of Canada to coordinate an international study involving 230 health centres in five countries (France, Belgium, the United Kingdom, Switzerland and the Netherlands). Dr. Abenhaim is scientific director of this research project studying primary pulmonary hypertension, and is working closely with JGH cardiologist Dr. David Langleben, an expert in the study and treatment of this disease.

Pulmonary hypertension is a lung circulation disorder which occurs because the arteries in the lung have narrowed, causing high blood pressure in the lungs. Since the right side of the heart is designed to pump blood to the lungs at low pressure, the heart can fail when forced to pump at such high pressure. Pulmonary hypertension affects primarily young women in their 30's and 40's. Unfortunately, symptoms of the disorder do not appear until there has been significant damage.

Since the disease is rare, it is necessary to do the study on an international level to collect enough data to draw scientifically valid conclusions. The goal of this study is to determine the role of age, gender, medical history, medication usage (oral contraceptives, amphetamine-like agents, anorectic drugs and others), behavioural and environmental factors in the development of the disease.

National study of electromagnetic interference

An explosion of advanced technology has emerged in medical care in recent years. Countless types of electronic and often computerized devices are now common throughout all hospitals. Recently, concerns have begun to emerge about the effect of radio wave transmissions—emanating from sources ranging from powerful TV or FM broadcast antennas that might be located near hospitals, to portable cellular telephones—on some of these devices.

A Canada wide McGill University study, based at the Jewish General Hospital, has been looking into the effects of radio-frequency wireless transmissions on medical equipment. The cellular service provider industry, seeking to promote the safe usage of wireless communication within hospitals, is providing the initial year's funding through such companies as Bell Mobility and Rogers Cantel. The study's principal investigator is Dr. Bernard Segal, who earned his Ph.D. in neurophysiology, and is director of research for the JGH Ear, Nose and Throat Department.

Radio wave signals increasing

In an interview, Dr. Segal explained that predictions estimate that the growth of signals from various types of radio wave transmissions will increase by a factor of one thousand between the years 1990 and 2000. At the same time, the use of various types of medical equipment is also increasing rapidly. Furthermore, much of the equipment is becoming more complicated, and therefore more susceptible to interference and malfunction. Thus, with the great increase in both radio wave transmissions and the use of sensitive equipment, the potential for malfunctions of equipment, caused by radio waves, increases. Dr. Segal also stressed that there are other sources of potential interference including nearby power lines, electro-static discharge and magnetic coupling.

According to Dr. Segal, this explosion of radio wave transmission "is a pollution problem and we have to

know how to handle it." Dr. Segal also stressed that the problems caused by radio wave transmissions are not limited to medical equipment. For example, there have been cases of automobile accidents and military airplane crashes that have been linked to the problem.

To demonstrate the potential for problems within the health care field, Dr. Segal pointed out a recent article by Jeffrey Silverberg of the United States Food and Drug Administration. Silverberg documented a large number of apnea monitor malfunctions in 1987 in an area of Omaha, Nebraska. It is believed that these malfunctions may have contributed to an unusual number of babies' deaths. It was later shown that this area of Omaha was receiving high levels of signals from FM radio stations and that some apnea monitors would malfunction under those circumstances. Silverberg also documented cases of power wheelchairs going out of control when subjected to powerful radio-wave transmissions.

Dr. Segal described a situation where broadcasting antennae are located in relative proximity to a hospital. There have been cases of medical equipment in rooms facing the antennae that would not work properly. "When moved to a room away from the antennae, the same devices would function normally."

In 1993, a number of reports from several Canadian groups demonstrated that operation of cellular telephones within centimetres of medical equipment caused such equipment to malfunction. As a result, some

institutions—including the Montreal Children's, Montreal General and Royal Victoria Hospitals—have restricted the use of cellular telephones in areas near critical-care equipment.

There are many possible sources of electromagnetic interference. These range from fixed sources like broadcast antennae to a wide range of portable sources including walkie talkies, cellular phones and even wireless local area networks for computers that function with radio waves. Dr. Segal stressed that some portable transmitters are low power devices so their potential for interference is generally confined to the very immediate area: as opposed to fixed sources like a broadcasting antenna whose range of interference is potentially much greater.

Five McGill hospitals involved

Dr. Segal's study is therefore geared to finding out what kind of critical care devices are susceptible to malfunction, and under what sorts of conditions these malfunctions can occur. The study involves the heads of biomedical research at five McGill teaching hospitals. They include Michel Lorange and Alex Sebe at the JGH, Steven Retfalvi at the Montreal Children's Hospital, Arshedir Zafar at the Royal Victoria Hospital, Pierre Caron at the Montreal General Hospital and Richard Neto at St. Mary's Hospital. Also involved are Tomas Pavlasek, formerly associate dean of McGill's Faculty of Engineering, David Townsend, a lawyer at the University of New Brunswick and Maria Stuchly, an expert on biological hazards at the University of Victoria.

The study will require input from many groups and individuals, and Dr. Segal particularly stressed the importance of those who are actually using the medical equipment. In addition to checking results that they get from machines, he said, doctors and nurses must look closely at their patients because there is always the

possibility of a machine malfunctioning.

Dr. Segal emphasized that malfunctions due to electromagnetic interference are rare. However, his study is working on ways to prevent all malfunctions.

Until the results of the study are known, Dr. Segal suggests—as a precaution—that cellular phones, walkie talkies and other transmitters not be used in critical care areas of the hospital or in the immediate vicinity of medical equipment. Because cellular phones can transmit, even when on standby, it is important that they be turned off when in such areas.

— M.R.

Update

- A policy for dealing with telecommunication devices is being developed at the JGH.
- According to Dr. Segal, the total banning of these devices from hospitals is both unnecessary and unrealistic. Instead, each hospital must take its own environment into account when developing an appropriate policy to manage radio-frequency sources.
- Doctors and nurses must be vigilant when using medical equipment, and should be aware of the possibility of malfunctions due to electromagnetic interference.
- There is a need for more education in this area.
- In a presentation to Telemedicine Canada, Dr. Segal concluded, "Ensuring electromagnetic compatibility between wireless sources and medical devices will require the cooperative efforts of engineers, hospital personnel, medical professionals, researchers, lawyers, standards and regulatory agencies as well as manufacturers."

Anti-coagulant Clinic – A busy place

When patients take Coumadin, an anti-coagulant (medication that thins the blood), they must be monitored on a regular basis to make certain that their blood is therapeutically "thin" but not so thin that they will bleed. The only way to monitor this state and adjust the dosage accordingly is through a blood test, and this is why the Anti-coagulant Clinic is such a busy place.

Lynne Turgeon describes the phenomenal growth of the Anti-coagulant Clinic since it first opened. "The late Dr. Arthur Cooperberg, who was then chief of the Division of Hematology, started the clinic over 35 years ago. At the time, it served approximately 20 patients. Today, we have 1000 patients and see an average of 160 patients per week." She attributes this growth to two factors: the increased number of people who are taking Coumadin, and the fact that the clinic provides excellent service. "Our team, which consists of doctors, lab technicians and blood takers, is very efficient and we work well together."

The clinic operates on Wednesday mornings. Patients come in any time between 7:00-10:00 a.m. to have their blood taken by one of the three phlebotomists (blood takers) on the team. Patients then return to the waiting room where they are seen by a hematologist. Dr. Arthur Rosenberg, chief of the Division of Hematology and director of the clinic, and hematologist Dr. Wahbi Hammouda



Mrs. Janet Shapiro (seated), has her blood taken by phlebotomist Joanne Rodriguez, while Lynne Turgeon asks the patient questions about her Coumadin dosage.

both provide coverage for the clinic. By 10:30 a.m., the results of the tests have been completed and dosages are adjusted accordingly. Patients are phoned that very day with their dosage instructions. "We ask them to repeat back the instructions. If they are worried about remembering how many pills to take each day, we give them helpful hints such as writing the information down on a large wall calendar, or buying pill dispenser boxes. We often invite family members to the clinic so we can

explain the instructions to them," says Ms. Turgeon. As part of an international system, patients who travel are given a letter that includes the results of their last blood test, the current dosage and recommendations.

New patients attend a teaching session, held on Monday mornings, where they are told what to expect from the medication and the clinic procedure. The clinic welcomes 30-40 new patients per month. Initially, patients must return on a weekly or bi-weekly basis, but once their dosage is stable, they return every six to eight weeks.

Coumadin is prescribed for patients who are at risk for strokes, patients with heart problems, phlebitis, metallic valves. The medication is also given as a precautionary measure to prevent clotting in patients who are temporarily immobilized following hip and knee surgery.

Donation for Alzheimer's research



Left to right: Dr. Howard Chertkow, neurologist, Marilyn Rosenbloom, Dr. Bergman, Dr. Eugenia Wang, director, Bloomfield Centre for Research in Aging, Mrs. Marlene Levine, nurse coordinator, Henri Elbaz.

Mrs. Marilyn Rosenbloom, president of the Alzheimer's Groupe, presented a cheque to the JGH Division of Geriatric Medicine in memory of Shirley Brownstein. The gift will be used for research on Alzheimer's disease.

Dr. Howard Bergman, chief of the division, thanked the Alzheimer's Groupe and members of the Brownstein family for their generosity. "This gift represents the hope that through research, we will find better ways to treat this disease, and it is also another example of the Brownstein family's dedication to the hospital."

JGH Executive Director Henri Elbaz praised the family and the Alzheimer's Groupe for their commitment to easing the suffering of others. "It is thanks to people like you that we are able to fulfill our mission of providing excellent patient care."

Schouela gift to benefit the Department of Oncology



Front row left to right: Sheila Schouela, Gamil Schouela, Esther Rawas, Isaac Rawas, Sheila Schouela, Cely Schouela, Ezekiel Schouela, Simone Schouela, Edouard Schouela.
Back row left to right: Brahm Gelfand, Dr. Richard Margolese, Henri Elbaz, Executive Director.

The Schouela family gathered at the Jewish General Hospital in September for a plaque dedication and reception, celebrating a generous gift to the Department of Oncology in memory of Maurice Schouela.

Hospital President Brahm Gelfand said that the JGH was grateful to the Schouela family for their long-standing financial, intellectual and moral support of the hospital. He went on to describe the special relationship between the hospital and the Montreal Jewish community. "The Jewish community is the lifeblood of this hospital. At the same time, this hospital is the mainstay of the community. We want to see younger members of the community take an active interest."

Dr. Richard Margolese, chief of the Department of Oncology, explained how important the Schouela gift will be to the department. He introduced the physician/scientists in the department, Drs. Lawrence Panasci, Michael Pollak, Gerald Batist and Steven Karp, who divide their time

between treating patients and conducting research. "This is the best way for a modern clinic to work. Research and clinical work validate each other. It is to support this effort that the Schouela family gift will be used."

Dr. Margolese also acknowledged the presence of Drs. Max Palayew, André Lisbona and Arthur Rosenberg, who "had a special place in Maurice's heart. On behalf of all of us, thank you. We will do our best to make you proud."

Speaking on behalf of the family, Lillian Schouela Mauer said, "We learnt the gift of giving from our father. This gift represents his love for the community and for this hospital."

Auerbach donation benefits Division of Infectious Diseases



Standing, left to right: Dr. Jack Mendelson, Dr. Mark Miller, Mr. Morton Brownstein. Seated: Mrs. Auerbach.

In appreciation for the care given by Dr. Jack Mendelson to the late Abe Auerbach, the Auerbach family made a generous donation to the hospital.

At a dedication ceremony, Honorary President Morton Brownstein recalled the "goodness" of Mr. Auerbach. He thanked the family for their gift, explaining that, "these kinds of gifts are important to the hospital, especially since the government is unable to provide the funding necessary to upgrade our equipment. It is only through generous gifts such as this that we are able to offer so much more to our patients."

Dr. Mendelson, then chief of the Department of Microbiology and the Division of Infectious Diseases, echoed this theme. "This generous contribution allowed us to update services to our patients in a field where there are new developments every day."

Mrs. Auerbach explained that she decided to support the work of Dr. Mendelson because of his commitment to patient care. "When Abe was ill, I leaned on Dr. Jack Mendelson—I know how hard he works."

Leopold fund for AIDS research



Left to right: Sheila Kussner, C.M., Robert Leopold, Ingrid Gold (mother of Douglas Leopold), Neri Bloomfield, Dr. Mark Wainberg.

The Douglas Leopold Memorial Fund for AIDS Research will help ensure that the McGill AIDS Centre, based at the JGH, remains at the forefront in the battle against this disease. At a dedication ceremony, Dr. Mark Wainberg, director of the McGill AIDS Centre, thanked the family for establishing the fund. "Through the donations made in this room today we ensure that research into AIDS will result in important strides so that we can come to grips with HIV."

Dr. Wainberg pointed out that media reports claiming that hundreds of millions of dollars have been wasted on AIDS research are completely false. "True, there is no cure. True, we haven't stopped the spread of AIDS, but we have turned the corner. Thousands of HIV positive individuals are living longer and enjoying a better quality of life."

Neri Bloomfield, President of the JGH Lady Davis Institute for Medical Research, (LDI) commended the family for establishing an AIDS research fund, and Robert Leopold spoke about the legacy of his brother Douglas and the inspiration he provided to others. "He died at 49 but lived at twice the speed of all of us. I thank everyone here for your presence and for your contributions."

Dr. Hyman Mendelson remembered



Left to right: Mark Mendelson, Ilsa Mendelson-Burns, Dr. Michael Dworkind, Mrs. Lynne Mendelson, Hazel Zemel.

Members of the Herzl Family Practice Centre gathered to unveil a plaque in honor of Dr. Hyman Mendelson, a family physician who was associated with the Herzl for 53 years.

Dr. Michael Dworkind, who knew Dr. Mendelson on a professional and personal level, called him a "symbol of what family medicine is about. He was a fixture in our department and in this hospital for many years." Dr. Dworkind also praised Mrs. Mendelson for sharing her husband's goals: "Behind every successful doctor is a spouse who takes care of everything else. This is a dedication to a supportive family."

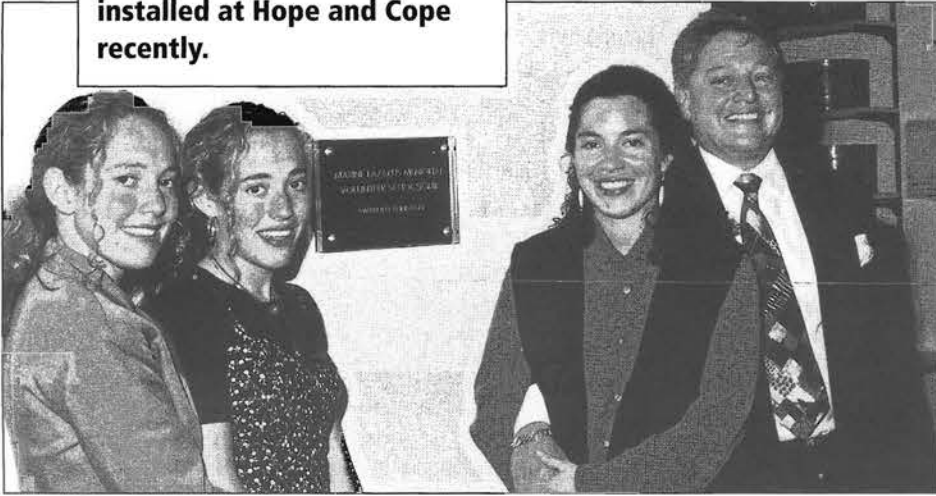
Mrs. Mendelson expressed her appreciation and gratitude for the recognition given to her husband, who began his association with Herzl

when it was still known as the Herzl Dispensary. Located in the heart of Montreal's Jewish district at the time, the dispensary provided medical and dental care, offering services on a sliding fee scale for those who were unable to pay.

Rabbi Myer Schecter, JGH director of Pastoral Services, spoke about the positive impact Dr. Mendelson had on many of his patients. "Families were touched by him. He was an institution in Montreal."

Maxine Lazarus scholarship

A memorial plaque dedicated to Maxine Lazarus was installed at Hope and Cope recently.



Morden Lazarus and daughters, left to right: Robbie, Jennifer and Lisa.

Founding chairman Sheila Kussner recalled that Mrs. Lazarus was a dedicated Hope and Cope volunteer, who touched the lives of many patients. "The plaque we dedicate to her beloved memory only confirms what has become a tradition among us—Maxine lives in the spirit of service."

The Maxine Lazarus Memorial Volunteer Scholarship is awarded annually to further the education of volunteers.

Remembering Bessie Margolese

In memory of the late Bessie Margolese, her family generously established a donation fund which was used to purchase a much needed electrocardiograph monitor.



Pictured here are, left to right: Lynn Margolese, Bina Ellen, Stanley Margolese, Arlene Gilman.

Special plaque honors physician

For the family of the late Mario Troianelli, establishing a fund for cancer research in his memory was important, but not enough.



Domenica Troianelli (centre) presents plaque to Dr. Patenaude. With them are Dr. Stephen Caplan (far left) and Dr. Arthur Rosenberg (far right), of the Hematology Division.

They also wanted to express their appreciation and gratitude to Dr. François Patenaude for his kindness during their father's illness.

Their solution was to present Dr. Patenaude with a plaque commending him for his "dedication and availability during this difficult period." Dr. Arthur Rosenberg, chief of

the Division of Hematology, said that such presentations are rare, and "a beautiful expression of gratitude."

Dr. Patenaude was touched by the thoughtfulness of the Troianelli family. "When patients put their lives in our hands, we should do our best for them," he said.

Celebration Funds

— a great gift idea

Anita and Alvin Jacobs, Reuben Croll, Charlotte and Stanley Gold all have something in common: a desire to help others.

In the past few months, each of them celebrated a special occasion, and each chose to mark the event by asking family and friends to contribute to a celebration fund.

Foundation Director Al Regenstein maintains that celebration funds are ideal for people who do not need yet another cufflink or set of pots and pans. "What better way to celebrate than by contributing to the care of our patients and helping our researchers continue their vital work?"

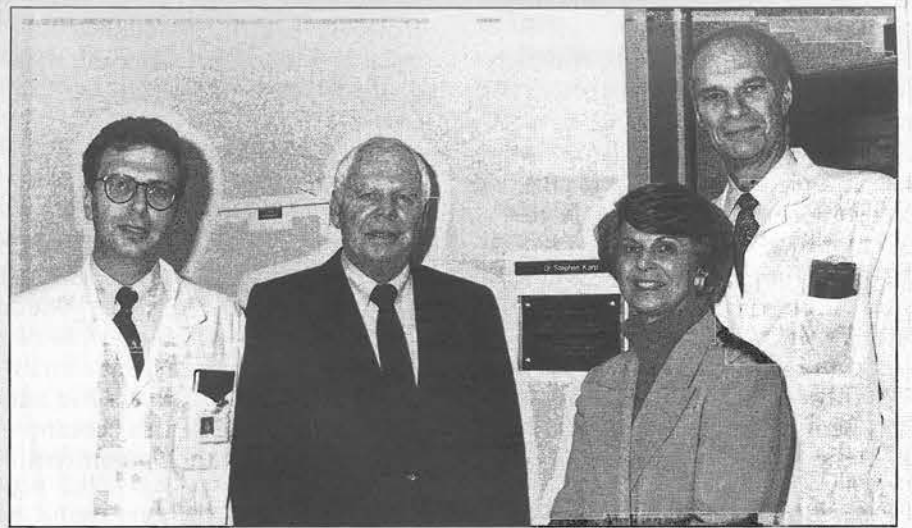
Establishing a celebration fund for birthdays, anniversaries or other

special occasions is simple. Whether you have a favourite cause you wish to support or would like the proceeds to support an area of great need, the Foundation office will be happy to guide you. Once the details have been ironed out, you will receive a certificate in honor of your special occasion, as well as a list of everyone who contributed to the fund.

If you would like more information about celebration funds, please call Al Regenstein at 340-8251.



Alvin Jacobs, Q.C., and Anita Jacobs established a fund for cardiac surgery.



Dr. Steven Karp, oncologist specializing in gene therapy, Stanley and Charlotte Gold, who established a fund for gene therapy, Dr. Richard Margolese, chief of the Department of Oncology.



Reuben Croll, who established a fund for gene therapy, Dr. Richard Margolese, Dr. Steven Karp, Leo Goldfarb, Honorary President.

Dr. Gelfand addresses conference on hormone replacement therapy

The 14th World Congress of Gynecology and Obstetrics, which took place at the Palais de Congrès, had an important Jewish General Hospital connection: Dr. Morrie Gelfand, chief of the JGH Department of Obstetrics and Gynecology, was the chairman of the committee responsible for bringing this conference to Montreal. The conference, held last September, attracted 8,500 registered delegates from around the world.

Dr. Gelfand chaired the plenary session on menopause, where he spoke on "Quality of Life Issues in the Management of Menopause", chaired a symposium on Hormone Replacement Therapy and spoke on "Compliance and Hormone Replacement Therapy".

He presented results of a recent research study involving 100 post-menopausal women who were treated with the hormones estrogen and androgen. Results showed that their quality of life had improved, they had more energy, less depression, and an increase in sexual fantasies and desire. At the same time, he cautioned that this particular combination of hormones can have negative side-effects in women who have had hysterectomies.

According to Dr. Gelfand, hormonal replacement therapy provides post-menopausal women with substantial health benefits, including greater protection against heart disease, osteoporosis (bone loss) and Alzheimer's disease. This view was reiterated by other physician-scientists at the conference.

Dr. Gelfand was the winner of the Best Gynecology Paper Award for the 1994 SOGC Abstract Award Program for his abstract submission entitled "Double-Blind Randomized Comparison of Dydrogesterone or Medroxyprogesterone Acetate (Provera®) Combined with Conjugated Estrogens (Premarin®) for Twelve Months." This paper was presented at a meeting on menopause—compliance and delivery.

Allocation of scarce resources discussed during Ethics Week

When resources in a society are scarce, how do we decide how much is spent on health care and who benefits? What is the level of health care for which we will settle, given that we do not have unlimited amounts of money?

These questions were posed by Dr. Raymond G. Frey, guest speaker and visiting professor during Ethics Week, held at the JGH in October. Dr. Frey is an ethicist and professor at Bowling Green State University in Ohio.

As Dr. Frey pointed out, the costs of health care have sky-rocketed. For example, it costs an average of half a billion dollars to develop a new drug. The cost of developing more effective medications is one of many factors contributing to the growth of health care costs. Yet, despite the vast expenditure on health care in the United States, that country ranks 24th in the world in terms of infant mortality. "Countries in the Western world have serious deficits. We no longer have the money to provide the best," Dr. Frey said.

The options facing governments are either to raise taxes, borrow even more or cut costs. According to Dr. Frey, society must begin to make prioritizing decisions when it comes to rationing health care services. However, prioritizing is difficult because it involves measuring standards of care and rationing medical care.

A highlight of Ethics Week was the Sheila Diamond Memorial Lecture, supported by the Dr. Abe Mayman and Dr. Paul Niloff Endowment Fund. The presentation was entitled "Decision Making Regarding Medical Resources, A Mock Inquiry: The case of fibrinolysis in acute heart attacks". Physicians, judges, lawyers and ethicists appeared before this "commission", presenting their arguments.



Participants in the commission of inquiry, left to right: Dr. Maurice McGregor, emeritus professor, McGill University, Conseil de l'évaluation des technologies de la santé; Dr. André Dascal, JGH associate medical and teaching director, associate professor of Medicine, McGill University; Dr. Raymond Frey; Dr. David Langleben, JGH cardiologist, associate professor of Medicine, McGill University; Me. Derek Jones, Visiting Fellow, Centre for Public Law and Research, Université de Montréal; Dr. Benjamin Freedman, JGH clinical ethicist, professor, Centre for Medicine, Ethics and Law, McGill University; Me. Patrick Molinari, dean of the Faculty of Law, Université de Montréal; Dr. Harold Frank, JGH medical and teaching director, professor of Medicine, McGill University; Dr. Abe Mayman; Dr. Jocelyn Dupuis, cardiology researcher, Institut de cardiologie, associate clinical professor, Université de Montréal.

JGH receives visitors

A group of physicians from Hungary spent several days in Montreal last summer, visiting McGill University teaching hospitals to learn more about our health care system. They are pictured here with the JGH management team.



Front row, left to right: Dr. Andras Szekely, Dr. Judit Tarosi, Dr. Lenke Gyarmati, Dr. Gyorgy Szatmari. Back row left to right: Betty Rozovsky, Dr. Harold Frank, Jean-Marie Mallet, Joe Kleinman, Charles Kaplan, Executive Director Henri Elbaz, Gary Stoopler, Jeff Gold, Jack Benzaquen, Marilyn Monk, Lynne McVey.

Dr. Apostolos Papageorgiou was appointed by the Canadian Ministry of Health to represent Canada as part of a bilateral scientific exchange between Canada and Poland. In October, the JGH welcomed a delegation from Poland studying maternal-child health. Physicians and nurses from Poland and from the Jewish General Hospital enjoyed a day long scientific conference organized by Dr. Papageorgiou, chief of the JGH Department of Neonatology and Pediatrics. The conference featured discussions on organizational aspects of perinatal medicine as well as clinical and research presentations.



Left to right: Anita Gagnon, Marilyn Monk, Dr. Bogdan Chazan, Dr. Jacob Aranda, Aleksander Wasiutynski, Dr. Apostolos Papageorgiou, Dr. Wanda Kawalec, Dr. Jan Wilczynski, Grazyna Wojcik, Dr. Grzegorz Breborowicz, Dr. Ewa Helwich, Henri Elbaz, Dr. Ryszard Lauterbach, Jean Larivière.

In September, Dr. Eu Leong Yong of the Department of Obstetrics and Gynecology at the National University Hospital in Singapore paid a visit to the Cell Genetics Laboratory at the JGH. Co-directed by Dr. Leonard Pinsky, chief of the Division of Genetics, and Dr. Mark Trifiro, the laboratory is at the forefront of genetic research. Dr. Yong spent a month at the JGH, learning techniques for studying the molecular basis of genetic defects in sensitivity to the male sex hormone.



Left to right: Erika Haase, Lenore Beitel, Dana Shkolny, Abdulah Abdulah, Dr. Pinsky, Dr. Yong, Dr. Mark Trifiro, Marie Vasiliou.

Critical care nurse honored

A reunion was held in December to honor Ms. Francine Walsh, a critical care nurse who worked for eight years in the JGH Surgical Intensive Care Unit (ICU), devoting her energies and talents to caring for critically ill patients as well as educating critical care nurses. Dr. Al Spanier, medical director of the ICU, and Mrs. Marilyn Monk, associate executive director-nursing, presented Ms. Walsh with a plaque naming her the first recipient of the Francine Walsh Award for Excellence in Critical Care Nursing. They were accompanied by 35 ICU nurses, physicians, orderlies, unit agents, close friends and family, who gathered to honor Ms. Walsh, a patient at Mount Sinai Hospital.



Left to right: Francine Walsh, Marilyn Monk, Dr. Al Spanier, ICU head nurse Joanne Letourneau.

News from the Auxiliary

Fall Fair and Raffle

The Fall Fair and Raffle, held in October, was an overwhelming success. The money raised from this event will purchase a Computerized Evoked Potential Audiometry Unit for the hospital's Department of Otolaryngology (ear, nose and throat). This equipment is used to diagnose tumors of the inner ear.

Health Awareness Seminar

In honor of the hospital's 60th Anniversary, the Auxiliary organized a special Health Awareness Program featuring noted American author, columnist and humorist Judith Viorst. Her presentation, "Adulthood - A Work in Progress", was an amusing, optimistic view of how we grow and change through the inevitable losses that are part of life.



Pictured here are members of the program committee, left to right: Rosalie Gordon, guest speaker Judith Viorst, Rona Small, Auxiliary President Marilyn Golfman, Annette Goldman, Franceen Finesilver, Rachel Hyams. Absent from photo: Rona Miller, Ruth Costin, Lucy Wolkove.

Blood Donor Clinic

The semi-annual Blood Donor Clinic, held on November 7, collected 135 pints for the Canadian Red Cross. The next clinic will take place May 1.

Annual Meeting

The Auxiliary's Annual Meeting will be held on March 29, 1995, at 12 noon in the East Wing Auditorium. The installation of officers for 1995-96 will take place at this time.

Unique dental program for intellectually handicapped

Thanks to a unique program offered by the JGH Department of Dentistry, intellectually handicapped individuals are able to receive emergency and routine dental care in the operating room (O.R.).

Dr. Mel Schwartz, director of the program since 1989, explains that because of their disabilities, many of these patients are unable to sit calmly and quietly in a dentist's chair. "Initially, we were treating patients who had not seen a dentist in years and years, so we were dealing with acute and emergency cases. Now, patients are put on a regular recall list, where they are seen every 18 months."

Created by Dr. Bernard Slimovitch in 1978, the program was developed in response to an obvious need coming from institutions such as the Miriam Home. Today, the program receives referrals from nursing homes and hospitals such as Maimonides as well as centres d'accueils in the Catholic sector. "To the best of my knowledge, there is no other similar program for adults in Montreal. Our referrals come from all over the city," notes Dr. Schwartz.

The program treats an average of 50 patients per year. Treatment includes extractions, dental surgery, routine cleaning, dental fillings and restorations. Dr. Schwartz works with an anesthetist and a dental assistant. Dental residents also participate as part of their training program.

Treating intellectually handicapped patients can be a challenge, admits Dr. Schwartz. "From a clinical point of view, I'm taking care of someone who will probably be unable to practice efficient oral hygiene. So I have to anticipate problems 18 months down the line."



Then there are the challenges of trying to keep the patients calm before they go into the operating room. At the outset, this was difficult, as many of the patients were terrified and uncontrollable, resulting in behaviour that was disruptive to other patients and the O.R. staff. Recalls Dr. Schwartz, "I've learned to make the experience as easy as possible for everyone. Now a parent or other attendant accompanies the patient to the O.R. suite, talking to them, distracting them and keeping them calm. Some patients cannot be sedated or sit in a bed waiting, so I'll walk with them into the O.R."

Clearly, the program provides a valuable service to patients who would otherwise be unable to receive good dental care. "We've cut down on the emergencies and acute episodes and are able to maintain their natural dentition. It's been a very positive experience," concludes Dr. Schwartz.

Ageing... continued from page 1.

Dr. Howard Bergman echoes this theme. "We can only prevent or delay inappropriate hospital admissions by working towards a comprehensive and integrated system in the community."

Caroline Burman, director of the JGH Department of Social Service, points out that not only are services fragmented, but it is up to the individual to access these services. "For example, Mrs. Schwartz visits her doctor, goes to the clinics, receives home visits from a nurse and 'meals on wheels.' But there is not one establishment that sees to it that all these services are delivered to Mrs. Schwartz' door in a timely way."

Creative JGH projects

The Social Service Department, with the Division of Geriatric Medicine, is coordinating two innovative projects that help ensure proper care for the elderly in the community. The first involves training "meals on wheels" volunteers who deliver food to the elderly to develop observation skills that will help flag potentially risky situations. Signs of trouble may include individuals who are not dressed, loose wires and a house in disarray. The idea here is that early detection can prevent a problem from becoming a crisis.

A recent approach has been the identification of private foster homes for the elderly that meet the hospital's established criteria for the delivery of excellent care. "This represents another avenue of

discharge for patients who cannot be sent home," states Dr. Frank. By lending our expertise in geriatrics, and providing nursing consultation and intervention as well as social service support, the hospital is helping to enhance the levels of care. These foster homes provide a more suitable environment for patients who cannot be discharged home yet do not require heavy nursing care and therefore, do not belong in a hospital setting.

The JGH administration is maintaining continuous contact with the Regional Council to ensure that they recognize the urgency of the hospital's situation vis-à-vis the frail elderly. Building and reinforcing links with organizations such as the CLSC Côte des Neiges and René Cassin, who provide important home care support to the frail elderly, is another priority for the hospital.

New systems of care in the hospital

While several committees are addressing ways to reduce fragmentation in the system as a whole, efforts are being made to improve the care of the frail elderly within the hospital itself.

A Working Committee on the Care of the Elderly in the Hospital has identified various priorities including early detection in the Emergency Room of patients at risk, better management of the discharge of elderly patients, close coordination with private foster homes, and community education concerning the importance of family and community participation in the care for the elderly.

The hospital has adopted a three pronged approach to caring for the frail elderly who come through our doors. Each day, a social worker and

geriatric nurse identify the needs of frail elderly in the E.R. Emergency Room staff also are being trained to identify elderly patients at risk of losing their autonomy. Once these patients are identified, methods to prevent this loss of autonomy will be instituted, allowing the hospital to discharge a larger number of patients back into the community.

The hospital is planning to establish a quick response team in the Emergency Room, providing access to medical, nursing and social support to the elderly patients who can continue their treatments at home rather than being hospitalized. A coordinator will decide the level of care required by each patient. As Dr. Frank points out, an 80 year old who comes to the Emergency with an acute infection requiring treatment with antibiotics for 48 hours is better off continuing this treatment at home. "When you remove an 80 year old from his environment, it puts him at risk for further deterioration."

Prevention... It can make a difference

The prospect of one's own aging seems very remote when one is in their 30's, 40's, or even fifty. But, it's coming, for most people. According to Dr. Howard Bergman, chief of the JGH and McGill University Division of Geriatric Medicine, while the effects of aging cannot be eliminated, prevention can play a key role for the elderly of tomorrow. "We know that in younger adults, diet and exercise can help prevent some of the problems associated with aging. For people over 65, exercise, diet and an active lifestyle can make a difference in promoting a more meaningful, active and independent life in later years".

The Division of Geriatric Medicine participates in the management of the care of elderly patients not only on the geriatrics wards but throughout the hospital. A multi-disciplinary approach, involving physicians, nurses, social workers, physiotherapists etc., ensures proper case management and follow-up.

The third aspect concerns a restructuring of the way in which long term care patients are treated. The objectives are to enhance the care of these

patients as well as ensure that proper mechanisms are in place to discharge them as safely and quickly as possible to the most appropriate level of care.

The Nursing Department is making important contributions to the care of the frail elderly through an approach called case management. Lynne McVey, nursing director for Geriatrics, Medicine and Psychiatry, explains that this process involves mapping an individualized care plan for each patient from the time of admission, through hospitalization, discharge and follow-up. This approach has been shown to promote autonomy, reduce the length of stay and decrease the number of readmissions to the hospital. Project Director of Case Management Constance Shein developed and is actively promoting the use of autonomy care maps, assisted by nurse Alice Macedo.

Sharing the responsibility

Clearly, caring for the frail elderly is a complex task that involves the cooperation of many services and organizations, both public and private.

At the same time, families and the elderly themselves must recognize that they are also responsible for their care. "Families must be careful not to see the hospital as taking over the responsibility for the patient. Ultimately, the patient is better off being taken care of in the community," observes Dr. Bergman.

Ageing as gracefully as possible is a realistic and necessary goal, insists Henri Elbaz. "From a health point of view, people should be aware of how they can prevent or delay some of the problems associated with aging."

Publications

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Sherker, A.H., Robinson, W.S.: Hepatitis B and hepatitis D (delta agent). In: Infectious Diseases, 5th Edition (Hoepflich, P., Jordan, C., Ronald, A., eds), Harper & Row, Philadelphia, 801-820, 1994.

Sherwin, B.B.: Sex hormones and psychological functioning in postmenopausal women. Experimental Gerontology 29: 423-430, 1994.

Shirazi-Adl, A., Dammak, M., Zukor, D.J.: Fixation pull out response measurement of bone screws and porous-surfaced posts. Journal of Biomechanics 27: 1249-1258, 1994.

Sidler, B., Alpert, L., Henderson, J.E., Deckelbaum, R., Amizuka, N., Silva, J.E., Goltzman, D., Karaplis, A.C.: Abstract. Overexpression of parathyroid hormone-related peptide following gene amplification in colonic carcinoma. Proceedings of the 76th Annual Endocrine Society Meeting, Abst: 519, 1994.

Silverman, A.H., Black, M.J.: Efficacy of primary tracheoesophageal puncture in laryngectomy rehabilitation. Journal of Otolaryngology, V23, No 5, 370-377, 1994.

Small, P.: Nonspecific nasal reactivity and smoking. Annals of Allergy, Vol 73, 114-116, Aug. 1994. Effects of intensity of early response to allergen on the late phase of both the nose and skin. Annals of Allergy, Vol 73, 252-258, Sept. 1994.

Smidt, W.R., Hadjipavlou, A., Lander, P., Dzioba, R.: An algorithmic approach to the treatment of Paget's Disease of the spine. Orthopedic Review, Vol 23:9, 715-724, 1994.

Stringham, D., Hadjipavlou, A., Dzioba, R., Lander, P.: Percutaneous transpedicular biopsy of the spine. Spine, 19: 1985-1991, 1994.

Trifiro, M.A., Kazemi-Esfarjani, P., Pinsky, L.: X-linked muscular atrophy and the androgen receptor. Trends in Endocrinology and Metabolism 5: 22-27, 1994.

Tubert-Bitter, P., Bégaud, B., Moride, Y., Abenhaim, L.: Sample size calculations for single group cohort studies in pharmaco-surveillance. Journal of Clinical Epidemiology 47: 435-439, 1994.

Tulandi, T.: The role of laparoscopy in the management of leiomyomata uteri. SOGC Journal 16: 1903-8, 1994. Medical and surgical management of ectopic pregnancy. In: Current Opinion in Obstetrics and Gynecology 6: 149-52, 1994. Peritoneal instillates. In: Infertility and reproductive medicine clinics of North America on Adhesions. Ed. RE. Leach, W.B. Saunders Co., Philadelphia, 479-83, 1994. Do fertility drugs cause ovarian cancer? Consumer Journal on Ovulation Induction in Canada, Special Edition, No. 1, Oct. 1994. Atlas of Laparoscopy Technique (Ed. Tulandi, T.), W.B. Saunders, London, 1994.

Tulandi, T., Chan, K.L., Arseneau, J.: Histopathologic and adhesion formation study after incision using ultrasound vibrating scalpel and regular scalpel. Fertil Steril 61: 548-550, 1994.

Tulandi, T., Corcos, J., Rochon, L.: Laparoscopic orchiectomy in a woman with androgen insensitivity syndrome. J. Gynecol Surg 10:99-101, 1994.

Van Staa, T.P., Abenhaim, L., Leufkens, H.: A study of the effects of exposure misclassification due to the time-window in pharmacoepidemiologic studies. Journal of Clinical Epidemiology 47: 183-189, 1994.

Van Staa, T.P., Abenhaim, L.: Utilization dynamics and risk comparisons in studies that use prescription information. Pharmacoepidemiology and Drug Safety 3: 191-197, 1994. The quality of information recorded on a UK database of primary care records: A study of hospitalizations due to hypoglycemia and other conditions. Pharmacoepidemiology and Drug Safety 3: 15-21, 1994.

Vasilou, M., Lumbroso, R., Alvarado, C., Kaufman, M., Trifiro, M.A., Pinsky, L.: Abstract. Single amino acid substitutions at 2 of 14 positions in an ultraconserved region of the androgen receptor yield an androgen-binding domain that is reversibly thermolabile. American Journal of Human Genetics, 55(Suppl): A 179, Abst: 1033, 1994.

Verger, P., Cordier, S., Le Thi Bich Thuy, Bard, D., Le Cao Dai, Pham Hoang Phiet, Gonnord, M-F., Abenhaim, L.: Correlation between dioxin levels in adipose tissue and estimated exposure to Agent Orange in South Vietnamese residents. Environmental Research 65: 226-242, 1994.

Vyoral, D., Schulman, H.M., Ponka, P.: Abstract. Control of heme synthesis in erythroid cells: the synthesis of erythroid -aminolevulinic acid (ALA) synthase requires iron. Cell Biology International 18: 421, 1994.

Wainberg, M.A.: Abstract. New antivirals. AIDS 8(Suppl 1) Abst. 7.5, 1994.

Wainberg, M.A., Gu, Z., Arts, E., Li, X., Parniak, M.A.: Abstract. Mechanistic studies of nucleoside resistance involving recombinant purified HIV reverse transcriptase. AIDS 8(Suppl 1) Abst. 6.4, 1994.

Wainberg, M.A., Montaner, J.S., Rachlis, A., Gill, J., Beaulieu, R., Schlech, W., Tsoukas, C., O'Shaughnessy, M., Raboud, J., Thorne, A., Smaldone, L., Schechter, M.T., et al.: Abstract. Canadian HIV Trials Network (Canada) and Bristol-Myers Squibb (USA). AIDS 8(Suppl 1) Abst: 4.6, 1994.

Wainberg, M.A., Montaner, J.S.G.: After the Concorde Trial: Where do we go from here? Grand Rounds in Infectious Diseases 4: 9-10, 1994.

Wang, E., Lee, M-J., Pandey, S.: Control of fibroblast senescence and activation of programmed cell death. Journal of Cellular Biochemistry 54: 432-439, 1994.

Warrell, R.P. Jr., Maslak, P., Eardley, A., Heller, G., Miller, W.H. Jr., Frankel, S.R.: Treatment of acute promyelocytic leukemia with all-trans retinoic acid: an update of the New York experience. Leukemia 8: 929-933, 1994.

Wolfson, C., and the Canadian Study of Health and Aging Workgroup: The prevalence of dementia in Canada. Journal of the Canadian Medical Association 150: 899-913, 1994.

Zeitouni, A.G., Frenkiel, S., Mohr, G.: Endoscopic repair of anterior skull base cerebrospinal fluid fistulas: an emphasis on postoperative nasal function maximization. Journal of Otolaryngology 23: 225-227, 1994.

Zweig-Frank, H., Paris, J., Gudzer, J.: Psychosocial risk factors for dissociation in female patients with borderline and non borderline personality disorders. Journal of Personality Disorders 8: 203-209, 1994. Dissociation in male patients with borderline and non borderline personality disorders. Journal of Personality Disorders 8: 210-218, 1994.

Nominations / Appointments

Batist, G.: Full Professor, Departments of Medicine and Oncology, Faculty of Medicine, McGill University.

Bégin, L.R.: Editorial consultant. The American Journal of Surgical Pathology. Member, The International Society of Urological Pathology.

Chertkow, H.: Member, Medical Research Council Behavioral Sciences B Committee. Member, Psychosocial Grants Committee, Alzheimer's Society of Canada.

Feldman, R.: Member of the Provincial Ethics Committee - Fonds de la recherche en santé du Québec.

Fichten, C.S.: Research Grants Jury Member: Fonds pour la formation de chercheurs et l'aide à la recherche (FCAR). Research Grants External Expert: Fonds de la recherche en santé du Québec (FRSQ), Social Sciences and Humanities Research Council (SSHRC).

Gordon, P.H.: Corresponding member of Specialty Committee in Colorectal Surgery, Royal College of Physicians and Surgeons of Canada. Recertified by the American Board of Colon and Rectal Surgeons.

Hiscott, J.: Associate Professor, Department of Oncology, McGill University.

Huk, O.L.: Assistant Professor of Surgery (GFTU) McGill University. Associate Member, Groupe de Recherche Biomécanique et Biomatériaux, École Polytechnique, Université de Montréal. Jury member, Research Students' Competition. Association Québécoise des Fabricants de l'Industrie Médicale (AQFIM).

Just, N.: Member Strategic Planning Committee.

Lander, P.: Member of Research Committee, Department of Radiology, McGill University. Member of Admissions Committee, Faculty of Medicine, McGill University.

Levitt, C.: Elected co-chair, National Expert Working Group for Breastfeeding, Health Canada.

Libman, E.: Member, National Health Research and Development Program Peer Review Committee.

Lisbona, A.: Member Strategic Planning Committee. Equipment Prioritization Committee.

McVey, L.: Re-appointed Faculty Admissions Committee, Faculty of Medicine, McGill University.

Orenstein, P.: Vice President, Montreal Chapter of CHICA-Canada. Vice President, Jewish Support Services for the Elderly and is currently Chair of the Advocacy Committee.

Paris, J.: Full Professor, McGill University.

Parniak, M.A.: Chercheur-boursier senior. Fonds de la Recherche en Santé du Québec.

Ponka, P.: Member, Executive Committee of the Division of Experimental Medicine, McGill University.

Rosberger, Z.: Assistant Professor, Department of Psychiatry, McGill University. Assistant Professor, Department of Psychology, McGill University. Chair, Behavioral Research/Cancer Control Personnel Panel, National Cancer Institute of Canada. Canadian Cancer Society.

Rosignol, M.: Organization Committee. Inter-provincial workshop on Research Methods in Musculoskeletal disorders. Institut de recherche en Santé et Sécurité du Travail.

Sherwin, B.B.: Appointed by the McGill Senate to the Faculty of Medicine Tenure and Promotions Committee, McGill University.

Silva, J.E.: Member of the Council, Canadian Society of Endocrinology and Metabolism.

Stein, B.: Certified by the American Board of Colon and Rectal Surgeons.

Steinert, Y.: Associate Dean, Faculty Development, Faculty of Medicine, McGill University

Torchinsky, A.: Adjunct Professor, Department of Oncology, Faculty of Medicine, McGill University. 1st such appointment at McGill.

Tulandi, T.: President, The Canadian Fertility and Andrology Society. Scientific Director, Annual Meeting of the American College of Obstetricians and Gynecologists, District 1 and V11, Canadian Fertility and Andrology Society and American Fertility Society. Chairman, Advanced Laparoscopic Workshop, Beirut, Lebanon.

Wainberg, M.A.: Fellow, American Academy of Microbiology.

Wang, E.: Ad hoc member, National Advisory Council, National Institute on Aging.

Zukor, D.J.: Chairman, Royal College of Physicians and Surgeons of Canada.

Honors / Awards

Brock, G., Zvara, P., Sioufi, R., Schipper, H.M., Bégin, L.: Jean Paul Giestie Prize. VI World Meeting on Impotence (Singapore). "Nitric oxide mediated erectile activity is a testosterone dependent event: A rat erection model".

Gelfand, M.M.: Best Gynecology Paper for the 1994 SOGC Abstract Award Program during the XIVth FIGO World Congress. "Double-blind randomized comparison of dydrogesterone or medroxyprogesterone acetate (Provera) combined with conjugated estrogens (Premarin) for twelve months".

Margolese, R.: O. Harold Warwick Prize, National Cancer Institute of Canada.

Papageorgiou, A., Bardin, C.: First Prize for best Poster Presentation, World Congress of Obstetrics and Gynecology (FIGO), Montreal.

Schondorf, R.: Clinical Assistance Award, The Parkinson Foundation of Canada.

Steinberg, M.: Miguel Prados Essay Prize by the Canadian Psychoanalytic Society.

Veinisch, J.: Woman of the Year Award. Montreal Council of Jewish Women.

Conférences / Presentations

Abenhaim, L.: Primary pulmonary hypertension. International Symposium on Pulmonary Circulation V1, Prague, June 1994.

Abenhaim, L., Moride, Y., Bégaud, B., Kaufman, D., Wiholm, B.: Workshop on international case-control studies in pharmacoepidemiology. 10th International Conference on Pharmacoepidemiology, Stockholm, Aug. 1994.

Alaoui-Jamali, M.A.: Mechanisms of intrinsic resistance to chemotherapy in lung cancer. Laval University, Hotel Dieu du Québec, June 1994.

Alarifi, A., Beitel, L.K., Alvarado, C., Farid, N.R., Pinsky, L., Trifiro, M.: Phosphorylation of human androgen receptor expressed at high levels using the baculovirus system. The Endocrine Society, Anaheim, CA, June 1994. (76th Annual Meeting, The Endocrine Society, Program & Abstracts, Abst 1423, p.556).

Alguacil-Garcia, A., Bégin, L., Howarth, D., Sengupta, S., Taylor, G.: The pathologic diagnosis of soft tissue tumours: a slide seminar. 63rd Annual Meeting of the Royal College of Physicians and Surgeons of Canada/45th Annual Meeting of the Canadian Association of Pathologists, Toronto, Sept. 1994.

Amihod, B., Orenstein, P., Miller, M.: Poster session. Establishing an IV catheter adverse event reporting system for determining incidence rates. Canadian Community and Hospital Infection Control Association (CHICA) National Conference, June 1994.

Amsel, R., Fichten, C.S., Creti, L., Libman, E.: Scale values in cognitive assessment. American Psychological Association Annual Convention, Los Angeles, CA, Aug. 1994.

Amsel, R., Fichten, C.S., Creti, L., Wright, J., Libman, E.: Evaluation of the States-Of-Mind (SOM) model: Is positive monologue really dysfunctional? Canadian Psychological Association Annual Convention, Penticton, BC, July 1994. Abstract: Canadian Psychology 35(2a) 191, (#50).

Aranda, J.V.: Use of cardiovascular drugs in neonatology. Polish Pediatric Society, Poland, July 1994. Pharmacokinetics of ibuprofen in the newborn. 5th European Workshop on Neonatology, Viterbo, Italy, Oct. 1994. Pain and stress control in the newborn. Neonatology Congress, Fate Bene Fratelli Hospital, Palermo, Sicily, Oct. 1994. Developmental physiology and pharmacology of pain in the newborn. Italian National Research Centre (CNR), Rome, Oct. 1994. NSAID and cyclooxygenase inhibition in the perinatal period. Società Italiana Medicina Perinatale, V Congresso Nazionale, Venice, Nov. 1994.

Aranda, J.V., Varvarigou, N., Beharry, K., Mondanlou, H., Bottolli, I., Bardin, C., Papageorgiou, A.: Pharmacokinetics of intravenous (IV) ibuprofen in premature newborns. 5th European Workshop on Neonatology, San Martino di Cimino, Italy, Oct. 1994.

Bardin, C., Papageorgiou, A.: Comparison of outcomes of SGA and AGA infants born between 24-27 weeks gestation. Annual Meeting of the XIV FIGO World Congress, Montreal, Sept. 1994.

Bardin, C., Zolkowitz, P., Papageorgiou, A.: Poster presentation. Additional risks for severe ROP in infants <1000 gms. Annual Meeting of the XIV FIGO World Congress, Montreal, Sept. 1994.

Baumgarten, M., Wolfson, C., Bergman, H., Clarfield, A.M., Kleiman, S.: Validity and reliability of surgical history obtained by interview from proxy respondents in epidemiologic studies of Alzheimer's disease. Fourth International Conference on Alzheimer's Disease and Related Disorders. Minneapolis, July 1994.

Bégaud, B., Moride, Y., Haramburu, F.: Quality improvement and statistical calculations made on spontaneous reports. Drug Information Association Meeting, Barcelona, Spain, April 1994.

Beitel, L.K., Sabbaghian, N., Alvarado, C., Pinsky, L., Trifiro, M.: Functional analysis of mutant human androgen receptors expressed using the baculovirus system. The Endocrine Society, Anaheim, CA, June 1994. 76th Annual Meeting, The Endocrine Society, Program & Abstracts, Abst. 1706, p 627.

Bergman, H.: Prévention des risques iatrogènes. Chairman of symposium, 5ième Congrès International Francophone de Gériologie, Strasbourg, France, 1994.

Bergman, H., Chertkow, H.: Recherche sur le diagnostic précoce de la maladie d'Alzheimer. 5ième Congrès International Francophone de Gériologie, Strasbourg, France, Oct. 1994.

Bergman, H., Leduc, N., Tannenbaum, T., Clarfield, A.M., Champagne, F., Kogan, S.: L'Intention des personnes âgées en perte d'autonomie d'utiliser des services de santé prescrits au moment du congé d'une unité de courte durée gériatrique. Sième Congrès International Francophone de Gériatrie, Strasbourg, France, Oct. 1994.

Brien, S., Just, N., Glikstein, R., Mohr, G.: Localisation préopératoire tomographique de petites lésions de la convexité pour microcraniotomie. 3^{ème} Congrès Conjoint Annuel des Sciences Neurologiques du Québec, Vaudeuil, Oct. 1994.

Chan, K., Marino, T., Tulandi, T., Qu, W.: Effects of intraperitoneal Ringer's lactate instillation and infusion on postsurgical adhesion. Chicoutimi, June 1994. Annual Meeting of District 1 and V11, The American College of Obstetricians and Gynecologists, Montreal, Sept 1994. (Best Junior Fellow Paper Award).

Chance, G., Levitt, C., Hanvey, L., Avard, D., Kaczarowski, J.: Poster presentation. Survey of routine care in Canadian maternity units. Canadian Pediatric Society. St. John's, Nfld, July 1994.

Charloux, A., Rossignol, M., Purohit, A., Wolkove, N., Small, D., Pauli, G., Quoix, E., Kreisman, H.: International differences in the epidemiology of lung adenocarcinoma (ADC). 7th World Conference on Lung Cancer, University of Colorado Cancer Centre IASLC Denver, June 1994. Epidemiologie comparative de l'adenocarcinome bronchique (ADC) à Montréal et à Strasbourg. Congrès de Pneumologie de langue Française, Nancy, France, June 1994.

Charloux, A., Fu, L., Alpert, L., Brisson, M.L., Small, D., Wolkove, N., Pauli, G., Quoix, E., Kreisman, H.: Immunocytochemistry (ICC) and bone marrow metastases of small cell lung cancer (SCLC). 7th World Conference on Lung Cancer, University of Colorado Cancer Centre, Colorado Springs, June 1994. Immunocytologie (IC) et métastases médullaires (MM) osseuses du cancer bronchique à petites cellules (CBPC). Congrès de Pneumologie de langue Française, Nancy, France, June 1994.

Chen, Z.P., Mohr, G., Schweitzer, M., Robert, F.: Acromegaly with normal growth hormone levels: a case report. 29th Canadian Congress of Neurological Sciences, Saint John's Nfld, June 1994.

Chertkow, H.: 1) Methodological considerations in language activation. 2) Semantic processing in Alzheimer's disease. World Federation of Neurology, Budapest, Hungary, June 1994.

Creti, L., Libman, E., Brender, W., Weinstein, N., Amsel, R., Fichten, C.S.: Cognitive refocusing in the treatment of insomnia in older individuals. American Psychological Association Annual Convention, Los Angeles, CA, Aug. 1994. Cognitive behavioral strategies for the management of insomnia in older individuals. Association for Advancement of Behavior Therapy, San Diego, Cal., Nov. 1994. Summary in AABT Convention Proceedings, 340, N.Y., AABT

Creti, L., Libman, E., Fichten, C.S.: A non pharmacological treatment of insomnia in older individuals: cognitive refocusing. Association of Professional Sleep Societies Annual Convention, Boston, MA, June 1994.

Dureza, C., Mohr, G., Dufour, J., Just, N., Entis, S.: Poster presentation. Pre operative MRI findings in acoustic neuroma surgery: topographical and pathological correlations. 29th Canadian Congress of Neurological Sciences, St. John's, Nfld, June 1994.

Dworkind, M.: Poster presentation. Palliative care curriculum for family medicine residents. 10th International Congress on Care of the Terminally Ill, Palais de Congrès, Montreal, Sept 1994.

Edgar, L., Rosberger, Z.: Psychosocial research nursing: Exploring new horizons. 8th International Conference on Cancer Nursing, Vancouver, BC, Aug. 1994. A psychosocial intervention to improve quality of life in persons with cancer and HIV infection. 3rd International Congress of Behavioural Medicine, Amsterdam, Holland, July 1994.

Elhaili, S., Lasry, J.C.: Adaptation of Moroccan immigrants in Montreal: Psychological stress and marital satisfaction. International Association of Cross-Cultural Psychology Meeting, Pamplona, Spain, July 1994.

Elkaim, B., Lasry, J.C.: Mourning and psychological distress in North African Jewish immigrants. 2nd International Conference on Bereavement as a Healing Process, Montreal, Sept. 1994.

Enepekides, D.J., Haddad, A., Manolidis, S., Black, M.: Adenoid cystic carcinoma of the head and neck: a clinicopathologic study of 37 cases. 48th Annual Meeting, Canadian Society of Otolaryngology-Head and Neck Surgery, Ottawa, June 1994.

Faust, E.A.: The HIV-1 integrase: a new target for antiviral therapy in AIDS. Institut Armand Frappier, Laval, Quebec, Nov. 1994.

Fichten, C.S.: 1) Keynote address. What's next? 2) Breaking down the invisible barriers: challenges for the 21st century/Éliminer les barrières invisibles: le défi du XXI^e siècle. Annual Convention of the National Educational Association of Disabled Students (NEADS)/Partners in Education/Partenaires en éducation, Montreal, Nov. 1994. What makes a research proposal successful in the Joint Program Competition? Planning Meeting of the Higher Education and Research on Disability (H.E.A.R.D.) Network, Montreal, Nov. 1994. Invited panel member. Sources de subvention. Séminaires de formation Association pour la recherche collégiale (ARC), Cegep André-Laurendeau, Montreal, April 1994.

Fichten, C.S., Creti, L., Amsel, R., Brender, W., Sabourin, S., Libman, E.: Thoughts in stressful situations. Canadian Psychological Association Annual Convention, Penticton, BC, July 1994. Abstract: Canadian Psychology 35(2a) 192, (#51).

Fichten, C.S., Creti, L., Amsel, R., Lennox, H., Libman, E.: Self statement test: 60+. Association for Advancement of Behavior Therapy, San Diego, Cal. Summary in AABT Convention Proceedings, 341, N.Y.: AABT.

Fichten, C.S., Creti, L., Libman, E.: Personality and lifestyle in older good and poor sleepers. Association of Professional Sleep Societies Annual Convention, Boston, MA, June 1994.

Figourov, A., Benguira, A., Sculptoreanu, A.: Voltage-dependent phosphorylation of L-type Ca channel currents in MPG neurons due to cAMP-dependent protein kinase phosphorylation. XIIth International Congress of Pharmacology, Montreal, July 1994.

Fletcher, C., Kirmayer, L.J., Malus, M.: Risk factors for attempted suicide among Inuit youth. Inuit Studies Conference, Iqaluit, North West Territories, June 1994.

Fletcher, R.S., Syed, K., Blain, N., Taylor, N.J., Mithani, S., Mooibroek, S., Brauer, W.G., Dmitrienko, G.I., Parniak, M.A.: Oxathion carbonyl analogs: new nonnucleoside inhibitors of HIV-1 reverse transcriptase. 4th Annual Canadian Conference on HIV/AIDS Research, Toronto, June 1994.

Gagnon, A.J., Edgar, L., Kramer, M.S., Papageorgiou, A., Waghorn, K., Klein, M.: Poster presentation. Un essai clinique randomisé d'un programme de congé précoce de l'hôpital après l'accouchement/A randomized trial of an early postpartum discharge program. Annual Meeting of the Ordre des infirmières et infirmiers du Québec, Montréal, Nov. 1994. A randomized trial of an early postpartum discharge program (EPDP). Annual Meeting of the American Public Health Association, Washington, D.C., Oct. 1994.

Gagnon, A.J., Waghorn, K., Covell, C.: The effect of continuous one-to-one intrapartum nurse labour support upon labour and birth. Annual Meeting of the American Public Health Association, Washington, D.C., Nov. 1994.

Gelfand, M.M.: The endometrium. First International Update in Gynecology. Casa de Campo, Dominican Republic, Feb. 1994. 1) Cardiology and postmenopausal women. 2) Cardiovascular disease and the role of hormone replacement therapy in aging women. Marion Merrell Dow (Canada) Inc. Cardiovascular Weekend Medical Seminar. Mont Tremblant, April 1994. Clinical guidelines for the use of E-A HRT in menopausal women. Novo Nordisk Fifth International Symposium on HRT Impact on Menopausal Changes. Copenhagen, May 1994. Course director. Hormone therapy use in the aging female. 42nd Annual Meeting of the American College of Obstetricians and Gynecologists. Orlando, Fla, May 1994. 1) General program chairman of a meeting of District 1 and V11. 2) Current treatment of menopause from estrogen and androgen, from pill to patch. American College of Obstetricians and Gynecologists, Sept, 1994. 3) Chaired plenary session on menopause. 4) Quality of life issues, the management of the menopause. 5) Chaired a symposium on hormone replacement therapy. 6) Compliance and Hormone replacement therapy. 7) Double-blind randomized comparison of hydrogesterone or medroxyprogesterone acetate (Provera) combined with conjugated estrogens (Premarin) for twelve months. Conference on Menopause-compliance and delivery. FIGO World Congress, Montreal, Sept. 1994. Guest speaker. Hormonal needs of the perimenopausal woman. Society of Obstetricians and Gynecologists, Toronto, Oct. 1994.

Glikstein, R., Novak, P., Mohr, G.: Significance of the aneurysmal neck size on the intraneurysmal circulation in experimental saccular aneurysms. American Society of Neuroradiology Nashville, Tenn, May 1994. Aneurysmas experimentales. V1th Congrés de l'Ibero-Latin-American Society of Neuroradiology (SILAN), Madrid, Spain, June 1994.

Goldzmid, M., Levitt, C., Duarte-Franco, E., Kaczarowski, J.: Complementary health services and the family doctor: a survey of prior training, referral practices, knowledge, attitudes and beliefs. North American Primary Care Research Group, Toronto, Oct. 1994.

Gomolin, J.: 1) Tamoxifen in the management of choroidal neovascularization. 2) Visual loss in age related macular degeneration: patterns of referral and compliance in seeking low vision aids. Symposium on Macular Degeneration, Montreal, June 1994. Retina symposium. International Congress on Cataract and Refractive Surgery, Montreal, July 1994.

Gordon, P.H.: Guest lecturer. Fundamental research in genetics and potential application of findings in patient care. Pennsylvania Society of Colon and Rectal Surgery (Dr. Harry E. Bacon Memorial Lecture), Philadelphia, PA, June 1994. Invited participant. Management of fistula-in-ano. 3rd European Gastroenterology Week. Oslo, Norway, June 1994. Moderator. Laparoscopic surgery of the colon. World Congress of Coloproctology. Los Angeles, Cal, Oct. 1994. Guest speaker. The 1994 Edward Wilson Lecture. Stapling in colorectal surgery: results, pitfalls, and complications. Ambulatory anorectal surgery - what can be done? Rectovaginal fistula. Tenth Annual Scientific Meeting of Sydney Colorectal Surgical Society, Sydney, Australia, Nov. 1994. Visiting Professor. Emerging research in colorectal cancer. University of New South Wales, Sydney, Australia, Nov. 1994. Visiting professor. University of Sydney, Sydney, Australia, Nov. 1994. Visiting professor. St. George Hospital, Sydney, Australia, Nov. 1994.

Gu, Z., Arts, E., Li, X., Parniak, M., Wainberg, M.A.: Mechanism of ddC resistance of K65R substitution in HIV-1 reverse transcriptase. X International Conference on AIDS, Yokohama, Japan, Aug. 1994. Molecular basis of human immunodeficiency virus-1 drug resistance to anti-viral nucleosides. Seventh International Conference of Comparative and Applied Virology, Montreal, Oct. 1994.

Gu, Z., Fletcher, R.S., Holleschak, G., Arts, E., Li, X., Wainberg, M.A., Parniak, M.A.: Decreased in vitro sensitivity to ddCTP and ddATP by the K65R mutant reverse transcriptase from ddi/ddC-resistant HIV-1. 4th Annual Canadian Conference on HIV/AIDS Research, Toronto, June 1994.

Hadjipavlou, A., Lander, P., Dzioba, R., Stringham, D.: Percutaneous biopsy of the thoracic and lumbar spine through the pedicle. 49th Annual Meeting of the Canadian Orthopedic Association, Winnipeg, Man, June 1994.

Hananel, N., Garzon, J., Gordon, P.H.: Poster presentation. Hepatic resection for colorectal liver metastases. 3rd United European Gastroenterology Week. Oslo Norway, June 1994.

Hier, M., Sadegi, N., Chan, H., Black, M., Karp, S.E.: A murine model for the immunotherapy of head and neck squamous cell carcinoma. Annual Meeting of the Association of the Oto-rhinolaryngology and Maxillo-facial Surgery of Quebec. Quebec City, Oct. 1994.

Hiscott, J.: Regulation of cytokine gene expression in HIV-1 infected myeloid cells. Instituto Superiore de Sanita, Rome, Italy, Sept. 1994. Transcriptional activation of interferon B regulatory domains by NF- κ B/Rel and IRF proteins. Annual Meeting of the International Society for Interferon and Cytokine Research. Budapest, Hungary, Oct. 1994. The NF- κ B/I κ B transcription complex: a regulatory target HIV-1 and HTLV-1. Septièmes Entretiens de Centre Jacques Cartier, HIV-1 and other Retroviruses, Lyon, France, Nov. 1994. Control of interferon gene expression. Laboratory of Eukaryotic Gene Expression. Université de Paris V, Rene Descartes, Paris, France, Nov. 1994.

Huk, O.L.: Valgus osteotomy of the hip. AO/ASIF Cours de Base Symposium des Fractures Complexes. Montreal, Oct. 1994.

Karvonen, R.L., Das, P., Mayton, L., Wang, E.: Chondrocytes in osteoarthritic articular cartilage express a senescent phenotype. Annual Meeting of the American Society of Phematology, Minneapolis, Minn, Oct. 1994.

Katzav, S.: Role of the *vav* proto-oncogene in transformation and hematopoietic signal transduction. Inserm U119. Marseille, France, June 1994. Proto-vav as a protein that plays a role in hematopoietic signal transduction and transformation. Hadassah Medical School, Jerusalem, Israel, Nov. 1994.

Kazemi-Esfarjani, P., Beitel, L.K., Kaufman, M., Gottlieb, B., Alvarado, C., Trifiro, M., Pinsky, L.: Evidence for transcriptional superactivity of human steroid receptors by interaction with DNA-binding-deficient androgen receptors. The Endocrine Society, Anaheim, CA, June 1994, 76th Annual Meeting, The Endocrine Society Program & Abstracts, Abst. 738, p 385.

Kirmayer, L.J.: Invited discussant. Les aspects transculturels et trans-générationnels de la psychiatrie. Québec Psychiatric Association Annual Meeting, Hull, Québec, June 1994. Keynote speaker. Psychotherapy and the cultural concept of the person; somatization: languages of the body in suffering and healing; culture, families and help seeking. National Conference on Psychiatric Rehabilitation, Oslo, Norway, Aug/Sept 1994. Integrating quantitative and qualitative research methods in psychiatric epidemiology. Population Health Conference, Canadian Institute for Advanced Research. Oct. 1994. Keynote address. History of research in cultural psychiatry. 15th Annual Meeting. Society for the Study of Psychiatry and Culture, Asilomar, CA, Oct. 1994. Culture, families and health beliefs. Clinical-Research Conference. American Family Therapy Association. Captiva Island, Fla, Oct. 1994.

Lander, P.: Invited lecture. Cost effective back care. ABS Spinal Imaging clinics on Interventional Radiography of the Spine. American Back Society Meeting, Université de Montréal, Faculty of Medicine, June 1994.

Lasry, J.C.: Assimilation or acculturation: a review of models. International Association of Cross-Cultural Psychology Meeting, Pamplona, Spain, July 1994. NSABP Quality of Life Committee (National Cancer Institute USA) working session to plan joint research activities. Nashville, TN, June 1994.

Leblanc, A.C.: Prion protein in human neurodegenerative diseases. Department of Biology, Concordia University, Montreal, Oct. 1994. Molecular biology of human prion diseases. Department of Neurology, University of Sao Paolo, Brazil, Oct. 1994.

Leduc, N., Tannenbaum, T.N., Champagne, F., Bergman, H., Clarfield, M., Kogan, S.: Elderly compliance to health services prescribed at discharge from an acute care geriatrics ward. American Public Health Association 122nd Annual Meeting, Washington, D.C., 1994.

Lerouge, S., Huk, O.L., Yahia, L'H., Sedel, L.: Characterization of particulate debris from pseudo-membranes of ceramic bearing total hip arthroplasties. Third Inter-Meeting, Société Internationale de Recherche Orthopédique et de Traumatologie (SIROT). Boston, Mass, Oct. 1994. Ceramic-ceramic vs metal-polyethylene: compared histological analysis of pseudomembranes from loosened total hip arthroplasties. The Scientific Regulatory Interface Symposium, Montreal, Oct. 1994. Céramique-céramique vs métal-polyéthylène: histologie et biochimie comparées de pseudomembranes de prothèses totales de hanche aseptiquement descellées. Journée de la Recherche 1994. Département de Chirurgie, Université de Montréal, Nov. 1994.

Levitt, C.: Submission to the Québec sous-ministère (santé publique). Enquête sur les soins de routine dans les unités de maternité au Canada. Breast-feeding results for Quebec, Montreal, Aug. 1994. Invited keynote speaker. Ligue La Leche, 7e Symposium sur l'allaitement maternel. De nouvelles données sur l'allaitement maternel: Québec et les autres provinces. Oct 1994. Executive Summary, Task Force on Child Health. Our strength for Tomorrow: valuing our children. Board of Directors, CFPC, Toronto, Nov. 1994. Course director. Advanced life support in obstetrics. Collaborative course, Department of Family Medicine, McGill University with the SOGC, Toronto, Nov. 1994.

Levitt, C., Freedman, B., Wilson, R., Kaczarowski, J.: Ethics in family medicine: a survey for curriculum development. North American Primary Care Research Group, Toronto, Oct. 1994.

Levitt, C., Hanvey, L., Avard, D., Chance, G.: Poster presentation. Survey of routine care in Canadian Maternity Units. Canadian Pediatric Society, St. John's, Nfld, July 1994.

Levitt, C., Outerbridge, E., Connolly, B., Jimenez, V., Slapko, B.: Neonatal resuscitation program (NRP): improvement in knowledge following course for family practice residents. International Conference on Pediatric Resuscitation. June 1994.

Li, X., Mak, J., Arts, E., Wainberg, M.A., Parniak, M.A.: Alteration of the HIV-1 primer binding site to interact with different tRNA greatly affects replication of HIV-1. 4th Annual Canadian Conference on HIV/AIDS Research, Toronto, June 1994.

Libman, E., Creti, L., Tagalakis, V., Amsel, R., Fichten, C.S.: Psychosocial aspects of good and poor sleep in older individuals. American Psychological Association Annual Convention. Los Angeles, CA, Aug. 1994. Relations of psychosocial factors and sleep parameters in older individuals. Association for Advancement of Behavior Therapy, San

Diego. Nov. 1994. Summary in AABT Convention Proceedings, 340, N.Y.: AABT.

Libman, E., Levy, R., Creti, L., Fichten, C.S.: Comparison of polysomnographic and self report measures of sleep parameters in older individuals. Association of Professional Sleep Societies Annual Convention, Boston, MA, June 1994.

Lin, R., Mustafa, A., Nguyen, H., Gewert, H., Hiscott, J.: Transcriptional control of interferon B by NF- κ B and IRF proteins. Cold Spring Harbor Symposium Molecular Genetics of Cancer, Cold Spring Harbor, June 1994.

Lin, P., Falcone, T., Tulandi, T.: Excision of ovarian dermoid cyst. Laparoscopy vs. laparotomy. Annual Meeting of the American Fertility Society, San Antonio, Texas, Nov. 1994.

Ludemann, J.P., Black, M.J., Shenouda, G., Rochon, L., McClure, D.: Acinic cel carcinoma: principles of management. 48th Annual Meeting, Canadian Society of Otolaryngology-Head and Neck Surgery, Ottawa, June 1994.

Margolese, R.G.: The future of surgery in primary breast cancer management. 2nd European Congress on Senology, Vienna, Oct. 1994. Breast cancer treatment for the 1990's. Comprehensive Cancer Institute, Hunstville, Ala. Nov. 1994. Tamoxifen prevention of breast cancer. Chairman, Plenary Session. American Society of Clinical Oncology, Atlanta, Georgia, Nov. 1994.

McKelvey, R., Chertkow, H., Bergman, H., Stern, J.: Predictive value of single photon emission computed tomography (SPECT) scanning in elderly subjects with borderline cognitive impairment. 29th Canadian Congress of Neurological Sciences, St. John's Nfld, June 1994.

Mizerny, B., Lessard, M.L., Black, M.: The transverse cervical artery (TCA) - its suitability as an optimum vessel in free flap head and neck reconstruction. 48th Annual Meeting, Canadian Society of Otolaryngology-Head and Neck Surgery, Ottawa, June 1994.

Mohr, G., Dufour, J.J., et al.: Visiting Professor. Management of acoustic neuromas in 1994. Dartmouth Hitchcock Medical Centre, Lebanon, N.H., Oct. 1994.

Mohr, G., Gorczyca, W., Gans, M., Bourgouin, P.: Acute apoplexy in pituitary macroadenomas: pathophysiologic and therapeutic implications. American Association of Neurological Surgeons, San Diego, Cal, April 1994.

Mohr, G., Maleki, M., Black M., et al.: Visiting Professors. Transoral skull base approaches for lesions of the cranio-vertebral junction. Surgical Grand Rounds, Dartmouth Hitchcock Medical Centre, Lebanon, N.H., Oct. 1994.

Murtha, S., Chertkow, H., Bourgouin, P., McKelvey, R., Bergman, H.: MRI hippocampal volumetric shrinkage in memory-impaired elderly without dementia. Proceedings of the 4th Annual Rotman Institute Conference, Toronto, 1994.

Novak, P., Glikstein, R., Mohr, G.: Experimental models of giant aneurysms in animals. American Society of Neuroradiology, Nashville, Tenn, May 1994. Pulsation-pressure relationship in experimental saccular aneurysms. 29th Canadian Congress of Neurological Sciences, St. John's Nfld, June 1994.

Orenstein, P.: Guest speaker. Infection control in acute care. Canadian Community and Hospital Infection Control Association (CHICA) National Conference, June 1994.

Palayew, M.J., Bégin, L.R., Brower, A., Dussault, R.G.: Osteoblastoma of the rib. The Canadian Association of Radiologists (CAR) 57th Annual Scientific Meeting, Toronto, June 1994.

Papageorgiou, A.: Invited guest speaker. 1) Identification and management of high risk pregnancy. 2) Diabetes in pregnancy. 3) Organization of perinatal care and training in neonatal/perinatal medicine. 4) Perinatal statistics as a tool for the improvement of perinatal care. (Round table discussion). 5) Stabilization and transport of newborn. (Round table discussion). 6) Perinatal asphyxia. 7) Prevention and therapy of RDS. 8) Management of very low birthweight infants. 9) Short and longterm follow up of very low birthweight infants. 10) BPD - Preventive and therapeutic strategies. 11) Nutritional needs of premature and term newborns. (Round table discussion). 12) Management of newborn with suspected infection. (Round table discussion). 13) Management of jaundice in 1994. (Round table discussion). 14) Participant in a "Meet the Professors" session: case presentations. 15) Ethical issues in perinatology (Round table discussion). Polish Pediatric Association Advanced Course in Neonatology, Lodz, Poland, July 1994. Chairman of a free communication session on Neonatology. Annual Meeting of the Canadian Pediatric Society. St. John's, Nfld, July 1994. Le traitement des Grands Prématûres: Ses particularités et son pronostic. Mini-Symposium on Neonatology, Department of Pediatrics, University of Laval, Quebec City, Sept 1994. Chairman of the 16th Canada Poland Medical Week on Maternal-Child Health, Montreal, Oct. 1994. Organization of perinatal care and training in Canada. 16th Canada-Poland Medical Week on Maternal-Child Health, Montreal, Oct. 1994. Chairman of session. Lung oxygenation. 5th European Workshop on Neonatology. San Martino di Cimino, Italy, Oct. 1994. Caring for the very small infant: medical and social implications. 3rd Congress on Humanization and Prevention of Pain in Neonatology and Pediatrics. Palermo, Sicily, Oct. 1994. 1) Contribution of modern technology to the outcome of babies with very low birthweight. 2) Organization of perinatal care in Canada. Postgraduate Seminar on Pediatrics and Neonatology. Crete, Greece, Oct. 1994.

Paris, J.: A multidimensional model of the personality disorders. Atlantic Provinces Psychiatric Association. St. John's, Nfld., June 1994. Course leader. The treatment of borderline personality disorder. 5th Annual Summer Session of the American Association of Suicidology, Santa Fe, N.Mex., Aug. 1994. Psychological risk factors for Borderline Personality Disorder. Symposium "Borderline Personality Disorder: Current Diagnostic and Treatment Perspectives for the Practicing Clinician". The New York Hospital-Cornell Medical Centre, White Plains, NY, June 1994. Risk factors for borderline personality disorder in males. Canadian Psychiatric Association, Ottawa, Sept. 1994.

Parniak, M.A.: Role of reverse transcriptase in HIV-1 drug resistance. Walter Reed Army Institute of Research, Rockville, MD, June 1994. Mechanisms for synergistic inhibition of HIV-1 reverse transcriptase by combinations of carboxanilide derivative nonnucleoside inhibitors. Uniroyal Chemical Company Research Laboratories, Guelph, Ont., Sept. 1994.

Perry, J.C.: Defense mechanisms in personality disorders. Psychiatry Grand Rounds, Massachusetts General Hospital, Boston, MA, June 1994. A pilot study of defenses in long term psychotherapy. 1) Society of Psychotherapy Research Annual Meeting, York, England, July 1994. 2) Department of Medical Psychotherapy, Ospedale San Raffaele, University of Milan, Milano, Italy, Sept 1994. 3) Vinderen Psychiatric Hospital Department of Psychiatry, University of Oslo Medical School, Oslo, Norway, Sept 1994. Psychotherapy of borderline personality disorder according to the trauma model. 1) Conference on the Borderline Patient, Torino, Italy, Sept 1994. 2) Department of Medical Psychotherapy, Ospedale San Raffaele, University of Milan, Milano, Italy, Sept 1994. 3) Vinderen Psychiatric Hospital Department of Psychiatry, University of Oslo Medical School, Oslo, Norway, Sept 1994. 4) Workshop, Conference on Problems in Treating Patients with Abuse Histories, Palais de Congrès, Montreal, Nov. 1994. The study of defense in long term psychotherapy: the development of four sets of hypotheses. Psychiatric Outpatient Department, University of Lausanne, Switzerland, Nov. 1994.

Pinsky, M., Lendon, G., Cramer, B., Rochon, L., Pinsky, L.: An atypical ultrasonographic sign of autosomal recessive polycystic kidney disease: hyperechoic renal medullary pyramids. The New England Clinical Genetics Society, Montreal, May 1994.

Pollak, M.: Invited speaker. Rationale for combining antiestrogens and somatostatin analogs in breast cancer treatment. Tamoxifen-Sandostatin Multinational Trial Meetings, London, England and Montreal, June 1994. Academic Visitor, IGF binding proteins as candidate tumor markers for breast cancer and prostate cancer. Karolinska Institute, Stockholm, June 1994. Plenary session speaker. Improving response to tamoxifen-addition of somatostatin analogs. National Surgical Adjuvant Breast Project (NSABP) Group Meeting, Nashville, June 1994.

Ponka, P.: Iron metabolism: implications for iron chelation therapy in iron overload: round table discussion on PIH class of iron chelators, CIBA-Geigy, Basel, Switzerland, July 1994. Development of new iron chelating agents. Ciba-Geigy, Basel, Switzerland, July 1994.

Provencal, C.: Origin and treatment of tinnitus. 1) Acoustic Neuroma Society of Canada, May 1994. 2) Communicaid for Hearing Impaired Persons, Montreal, Oct. 1994.

Provost, L.: Invited professor. Human resources management. Six day seminar for World Bank - Université de Montréal, Bucharest, Romania, July 1994.

Quisilbash, A., Bedard, Y., Alpert, L.: Workshop. Quality assessment in cytopathology. Canadian Association of Pathologists, Toronto, Sept. 1994.

Rossignol, M.: Longitudinal and cross-sectional estimates of lung function decline in workers exposed to welding fumes. Society for Epidemiologic Research, Miami, 1994. The prognostic value of the initial physician's diagnosis of work related injuries. Association de médecine du travail et environnementale du Canada. Montreal, 1994. Formation du deuxième cycle en médecine du travail. Congrès Annuel de l'Association Canadienne de la médecine du Travail et de l'Environnement. Montréal, 1994. Update of the Spitzer's report 1994: the diagnosis of back pain and health services utilization for back pain in Quebec. American Back Society, Montreal 1994. International differences in epidemiology of lung adenocarcinoma (ADC). 7th World Conference on Lung Cancer. Colorado, Springs, Col. 1994. 1) Aetiology of carpal tunnel syndrome (CTS): quantification of medical versus occupational factors. 2) A portrait of compensated work related disorders of the neck and upper limb in the Montreal region in 1991. American Public Health Association 122nd Meeting, Washington, D.C., Oct. 1994. Back prevention programs in Quebec. Lebanese Inter-Ministerial meeting on Occupational and Environmental Health Beirut, Nov. 1994.

Ruddy, J., Price, S., Frenkiel, S., Segal, B.: Rhinomanometric pressure measurements studied with a physical model of the nose. 48th Annual Meeting, Canadian Society of Otolaryngology - Head and Neck Surgery, Ottawa, June 1994.

Sioufi, R., Brock, G., Zvara, P., Schipper, H.M.: Nitric oxide synthase is testosterone dependent. American Urological Association, Lake George, N.Y., Sept 1994.

Schondorf, R.: 1) Neurotransmitters in the ANS. 2) Syncope. 29th Meeting of the Canadian Congress of Neurological Sciences, St. John's, Nfld, June 1994.

Shenouda, G., Langleben, D., Khoury, J., Gosselin, M., Stewart, D., Souhami, L., Podgorsak, E.B.: Increase in endothelin-1 gene expression and endothelin-1 after x-ray exposure *in vitro*. Gene Induction and Adaptive Responses Conference, Montreal, June 1994.

Sherwin, B.B.: Invited keynote speaker. The use of combined estrogen-androgen preparations in the postmenopause. Annual Meeting of the Belgian Menopause Society. Brussels, Belgium, June 1994. Invited speaker. Estrogen and cognitive functioning. 1) 8th Annual Symposium on the Long-Term Effects of Estrogen deprivation. Santa Barbara, Cal. July 1994. 2) Work Group on Hormones, Brain, Depression and Cognition. Sponsored by the NIA and the NIMH, Rockville, Maryland, Sept. 1994. Invited speaker. Hormonal actions on the brain and cognitive functions. Symposium on the Endocrinology of Women. Department of Epidemiology and Preventive Medicine, The University of Maryland, Baltimore, Maryland, Oct. 1994. Combined estrogen-androgen replacement therapy: effects on clinical symptoms and lipoprotein lipids. Academic Grand Rounds. Department of Obstetrics and Gynecology, Washington University School of Medicine, St. Louis, Missouri, Oct. 1994.

Sidler, B., Alpert, L.C., Henderson, J.E., Deckelbaum, R., Amizuka, N., Silva, J.E., Goltzman, D., Karaplis, A.C.: Overexpression of parathyroid hormone-related peptide following gene amplification in colonic carcinoma. 76th

Annual Meeting of the Endocrine Society. 1994. Abstract: Endocrinology 113:330, 1994.

St. Jacques, R., Schipper, H.M., Gorczyca, W., Mohr, G.: Mapping of the basal forebrain cholinergic system of the dog: a choline acetyltransferase immunohistochemical study. Canadian Congress of Neurological Sciences, Saint John's, Nfld, June 1994.

Steinberg, M.: Entre l'auto mutilation et la quête d'identité: la thérapie "analytique" d'un adolescent en milieu hospitalier. Huitième Colloque de l'Association des psychothérapeutes psychoanalytiques du Québec, Montreal, May 1994.

Steinberg, M., Brahm, E.: A day in psychoanalysis, dimensions of the clinical dialogue. A day in psychoanalysis, essential space and therapeutic process: Key issues in interpretation, Montreal, Nov. 1994.

Steinert, Y.: Invited workshops. 1) Developing national guidelines for faculty development. 2) Effective feedback. Annual Meeting of the Section of Teachers, College of Family Physicians of Canada, Winnipeg, Oct. 1994.

Steinert, Y., Goertzen, J.: Invited consultation. Developing successful workshops. Annual Meeting of the Section of Teachers, College of Family Physicians of Canada, Winnipeg, Oct. 1994.

Steinert, Y., Lawn, N., Nasmith, L.: Orientation workshops for new faculty: a program description. 6th Ottawa Conference on Medical Education, Toronto, June 1994.

Tan A.K., Frenkiel, S.: A one stage reconstruction of large nasal-alar defects. 48th Annual Meeting, Canadian Society of Otolaryngology - Head and Neck Surgery, Ottawa, June 1994.

Tewfik, T., Black, M.: Poster presentation. Schwannomas presenting as a thyroid mass. 48th Annual Meeting Canadian Society of Otolaryngology - Head and Neck Surgery, Ottawa, June 1994.

Tubert-Bitter, P., Bégaud, B., Moride, Y., Haramburu, F.: Confidence interval approach to compare toxicity between drugs using spontaneous reports. 10th Conference of the International Society for Pharmacoeconomics, Stockholm, Sweden, Aug. 1994.

Tulandi, T.: Invited presentation. Laparoscopy and surgical modalities. First Annual Meeting, The Middle East Fertility Society, Broummana, Lebanon, May 1994. Myomectomy and adhesion formation. Current Topics in Gynecology, New York, NY, May 1994 and Chicago, Ill, June 1994. **Invited presentations:** Operative laparoscopy: cold knife, electrosurgery, laser or ultrasound scalpel? 10th Annual Meeting of the European Society of Human Reproduction and Embryology, Brussels, Belgium, June 1994. 1) Endoscopy: its different modalities of treatment: laser. Meet the Experts. 2) Ectopic pregnancy: medical, minimally invasive or traditional treatment. Debate session. 3) The role of operative laparoscopy in the treatment of endometriosis. Meet the Experts. XIV World Congress of Gynecology and Obstetrics, Montreal, Sept. 1994. Technique of laparoscopic suturing. Workshop of the Annual Meeting of the American Fertility Society, San Antonio, Texas, Nov. 1994. Ectopic pregnancy: various techniques at laparoscopy (salpingotomy, sutures, salpingectomy). International Congress of Gynecologic Endoscopy, AAGL 23rd Annual Meeting, New York, Oct. 1994. Myomectomy and adhesion formation. An evening of clinical discussion on Current Topics in Infertility Surgery. Trumbull, Conn., Nov. 1994.

Tulandi, T., Corcos, J.: Laparoscopy orchiectomy in a woman with androgen insensitivity syndrome. Annual Meeting of the American Fertility Society, San Antonio, Texas, Nov. 1994.

Tulandi, T., Vilos, G.: Laparoscopic removal of cornual ectopic pregnancy. Annual Meeting of the American Fertility Society, San Antonio, Texas, Nov. 1994.

Tulandi, T., Rock, J., Rowe, G., Murphy, A.A., Kettel, M., Haney, A., Franklin, R.: Effects of expanded polytetrafluoroethylene, Gore-Tex surgical membranes on post myomectomy adhesions. Annual Meeting of the American Fertility Society, San Antonio, Texas, Nov. 1994.

Tummon, I., Asher, L., Yuzpe A.A., Tulandi, T.: Enhanced fecundity using enriched follicle stimulating hormone (FSH)/Intrauterine insemination for endometriosis-associated infertility: randomized, controlled trial of 319 cycles. 4th World Congress on Endometriosis, Salvador-Bahia, Brazil, 1994.

Varvarigou, N., Beharry, K., Bardin, C., Chemtob, S., Papageorgiou, A., Aranda, J.V.: Early closure of patent ductus arteriosus (PDA) by intravenous (IV) Ibuprofen in premature newborns. 5th European Workshop of Neonatology. San Martino di Cimino, Italy, Oct. 1994.

Vasiliou, M., Trifiro, M., Pinsky, L.: Mutations in the N-terminal domain of the human androgen receptor associated with androgen resistance syndrome. The Endocrine Society, Anaheim, CA, June 1994. Abstract 1179, p 495.

Waghorn, K., Gagnon, A.J.: Poster presentation. Supportive care in an intrapartum unit. Annual Meeting of the Ordre des infirmières et infirmiers du Québec, Montreal, Nov. 1994.

Wainberg, M.A.: Participant in symposium on "Building the Partnership: Community and researchers develop research priorities". Canadian Association for HIV Research, Toronto, June 1994. 1) Chairman, HIV reverse transcriptase and drug resistance to antiviral nucleosides. 2) HIV drug resistance: molecular basis and clinical significance. X International Conference on AIDS, Yokohama, Japan, Aug. 1994. Molecular basis and clinical significance of HIV drug resistance to antiviral nucleosides. Senri Life Science Symposium on AIDS: from molecular biology to treatment. Osaka, Japan, Aug. 1994. The problem of HIV drug resistance: lessons from cancer chemotherapy. Chiba Cancer Centre Research Institute. Chiba, Japan, Aug. 1994. HIV drug resistance and the treatment of AIDS. Department of Microbiology, Kyoto Prefectural University of Medicine, Kyoto, Japan, Aug. 1994. Mechanism of nucleoside resistance of recombinant purified HIV reverse transcriptase. Annual Meeting of the Laboratory of Tumor Cell Biology, Rockville, MD, Sept. 1994. Issues of treatment and drug resistance in AIDS. Seventh International Conference of Comparative and Applied Virology, Montreal, Oct. 1994. 1) Clinical significance of HIV resistance to antiviral drugs. Grand Medical Rounds. 2) Mechanistic

studies of HIV drug resistance. St. Paul's Hospital and Canadian HIV Trials Network, University of British Columbia, Vancouver, B.C., Oct. 1994. New antivirals. 2nd International Congress on Drug Therapy in HIV infection. Glasgow, U.K., Nov. 1994. Functional aspects of anti-retroviral drug resistance. Canadian Association for Clinical Microbiology and Infectious Diseases, Montreal, Nov. 1994.

Wang, E.: Fibroblast aging in programmed cell death. American Federation for Aging Research, Harriman, New York, June 1994. A hitchhiker's guide to cellular senescence and programmed cell death. American Society for Virology 13th Annual Meeting, Symposium on Viruses, Apoptosis, Cell Cycle and Nuclear Transport. Madison, Wisc., July 1994. Programmed cell death for cellular longevity. New York Blood Centre Lindsley F. Kimball

Research Institute, New York, N.Y., Sept 1994. Molecular control of programmed cell death in fibroblasts. Canadian Society on Gerontology 23rd Annual Meeting, Winnipeg, Man, Oct. 1994.

Wolfson, C.: Studies of the latency period of multiple sclerosis. Centre for Advanced Studies, Oslo, Norway, Sept 1994.

Zelkowitz, P., Bardin, C., Papageorgiou, A.: 1) A comparison of outcomes of SGA and AGA infants born between 24 and 27 weeks gestation. 2) Additional risks for severe ROP in infants ≤ 1000 gms. 14th World Congress of Gynecology and Obstetrics. Montreal, Sept 1994.

Zukor, D.J.: Arthrodesis et arthroplastie de genoux pour fractures. AO/ASIF Symposium des fractures complexe. Montreal, Oct. 1994.



Le nom de M. Louis Salomon (rangée arrière, au centre), aurait dû apparaître dans le dernier numéro de Nouvelles de l'HGJ.

The name of Mr. Louis Salomon, a director of the first Jewish Hospital Campaign Committee (back row centre) should have appeared in the last issue of the JGH News.

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The JGH News is published by the Sir Mortimer B. Davis - Jewish General Hospital to inform the community about hospital developments, and to promote mutual understanding between the hospital and those whom it serves.

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Les célébrations de notre 60^e anniversaire : chacun y a trouvé son compte

Les membres de la grande famille de l'HGJ et de la communauté y ont pris part en grand nombre.

Président / Chairman - Steven Cummings Coordonnatrice / Coordinator - Betty Rozovsky



Organisateurs des activités – à l'arrière, de gauche à droite / **Activities chairmen**, back row, left to right: Gregory Ginzberg, Coffee Shop Manager; Len Charles, co-chair, Staff Variety Show; Wolf Bronet, co-chair, L'Chaim Run; Sheldon Caplan, Coffee Shop chef; Jan Barrow, Open House Chairman; Rabbi Myer Schechter, chairman, Hospital Sabbath; Sharon Rubin, communications; Chairman Steven Cummings; Norma Ishayek and Anastasia Roubas, co-chairmen, Ethnic Lunches; Betty Rozovsky, 60th Anniversary coordinator; Arpy Kuyumjian, Nursing Lunch; Executive Director Henri Elbaz; President Brahm Gelfand. À l'avant / Front row: Jean-Marie Mallet, chairman, Staff Holiday Party; Dr. Michael Dworkind, chairman, Herzl Family Practice Centre 20th Anniversary; Rhona Stern, speaker, Community Education Lecture Series; Caryn Nash, co-chair, L'Chaim Run; Arlene Greenberg, co-chair, Staff Art Exhibition; Pierrette Hamel, co-chair, Ethnic Lunches; Sareeta Ganesan, speaker, Community Education Lecture Series; Sabrina Lutchman, co-chair, Staff Variety Show; Hena Kon, communications. N'apparaissent pas / Absent from photo: Archie Deskin, coordinator, Medical Lecture Series.



Quelques membres du comité organisateur – à l'arrière, de gauche à droite / **Some members of the organizing committee**, back row, left to right: Rabbi Myer Schechter, Jackie Margoese, Lucy Wolkove, Norma Ishayek, Leo Goldfarb. À l'avant / Front row: Bina Ellen, Barbara Fiederer, chairman Steven Cummings.



Participants à l'exposition d'artisanat du personnel – de gauche à droite / **Participants in the Staff Art and Handicrafts Show**, left to right: Dr. Mel Shore, Moira Bettinville, Avisar Jacob, Lise Gareau, Mona Rutenberg, co-chairman, Dr. Ernest Burman, Dr. Emile Berger, Marilyn Berson, Laura Campanelli, Laurence Chriqui, Arlene Greenberg, co-chairman. N'apparaissent pas / Absent from photo: Ronna Katz-Zeitlin, Sophia Wolkowicz, Rosy Jakubowicz, Melinda Glantz, Shelly Solomon.



Organisateurs du marathon L'Chaim / L'Chaim Run organizers Wolf Bronet (2^e de la gauche / 2nd from left) Caryn Nash (centre), Allan Nash (droit / right). Deux policiers du poste 31 veillaient à ce que tout se passe bien. / Two police officers from Station 31 who made sure the run went smoothly.



Marathon L'Chaim – de gauche à droite / **L'Chaim Run**, left to right: Caryn Nash, Drs. Jerrald Dankoff, Stephen Caplan, Harold Frank.



Portes ouvertes – la salle d'opération. / **Open House** – The Operating Room.

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Genetic Medicine: 2004.



Rhona Stern, Sareeta Ganesan
What Physiotherapy has to Offer for Backaches.



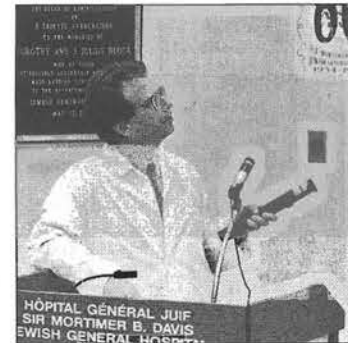
Dr. Eugenia Wang
Programmed Cell Death for Longevity.



Dr. David Langleben
Lung Circulation: the Haves and Have Nots.



Dr. Benjamin Freedman
New Perspectives on Judaism-Medical Ethics.



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Dr. Mark Wainberg
The Future of AIDS-HIV Therapy.

Our 60th anniversary featured something for everyone

Many members of the hospital family and the community joined us in our celebrations.

Retrouvailles des anciennes de l'École de nursing Nursing Alumnae Reunion



Membres du comité et représentantes de classes – Rangée arrière, de gauche à droite
Committee members and class representatives – Back row left to right: Pearl Orenstein, Franceen Finesilver, Shirley Entis, Isabel Shuster, Zelda Adesky, Elsa Wendman, Naomi Epstein, Ethel Kagan, Myrna Bercovitch, Ruth Miller, Barbara Amihod.
Rangée avant, de gauche à droite / Front row left to right: Kathy Zukerman, Eileen Shalit, Marlene Levine, Chairman, JGH School of Nursing alumnae reunion Mimi Goldenberg, Fryda Goldfinger, Harriet Robbins, Joyce Ross, Doreen Darabaner, Marsha Ptak.

Réception en l'honneur des nombreuses années de service du personnel médical Long Service Reception for Medical Staff



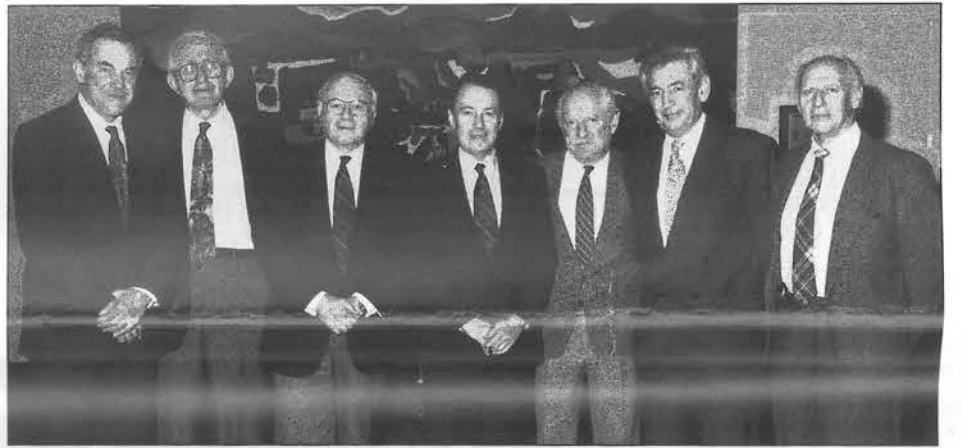
Plus de 50 ans
Over 50 years –
Dr. Albert Simon.



Plus de 50 ans / Over 50 years – Dr. David Halperin (g./l.).
Plus de 40 ans – de g. à d. / Over 40 years – left to right:
Drs. Issie Tannenbaum, Sidney Segall, Moses Siminovitch.



Plus de 40 ans – de gauche à droite / Over 40 years – left to right: Drs. Harry Magder, Lyon Lapin, Simon Gold, Oscar Herscovitch, Abe Mayman, Harold Goldfarb, Paul Ittkin.



Plus de 30 ans – de gauche à droite / Over 30 years – left to right: Drs. Isaac Weintraub, Reuben Schucher, Morris Sabin, Harvey Sigman, Bernard Slimovitch, Nathan Sheiner, Maurice Schwartz.



Plus de 30 ans – de gauche à droite / Over 30 years – left to right: Drs. Morrie Gelfand, David Elkin, Arthur Freedman, Phillip Brownstein, Marvin Clayman, Ernest Burman, Shulom Freedman, Allan Feldman, Harold Frank, Herbert Blumer.



Plus de 30 ans
Over 30 years –
Dr. Naomi Lowi.



Plus de 30 ans – de gauche à droite / Over 30 years – left to right: Drs. Hyman Reisler, Harry Grauer, Marvin Kwitko, Irwin Margolese, Brahm Hyams, Benjamin Mitmaker, Bernard Rothstein, Jack Ratner, Mervyn Gornitsky, Leonard Pinsky, Norman Nadler.



Pharmaciens – plus de 25 ans
Pharmacists – over 25 years – Messrs.
Maurice Ghazal, Gilbert Dagher,
David Rinzler.



Plus de 25 ans – de gauche à droite / Over 25 years – left to right:
Drs. Stephen Jacobson, Isaac Fried, David Bercovitch, Phil Beck, Gary Freedman, Morad Kimia, Stephen Fichman, Morton Kapusta, Karolina Goldberg, Ronald Feldman.



Plus de 25 ans – de gauche à droite / Over 25 years – left to right: Drs. Maynard Shapiro, Victor Sayegh, Gabor Komaromi, Jack Mendelson, André Lisbona, Arthur Rosenberg, Richard Shtatz.

Le Centre Herzl de médecine familiale célèbre aussi son anniversaire... Plus de détails dans le prochain numéro...
Herzl Family Practice Centre also celebrated its anniversary... details in next issue.