THE VOICE OF DALHOUSSIE MEDICAL ALUMNI

WINTER 2022

VOX MeDAL

MENTORSHIP PROGRAM

REMEMBERING DR. LORNE MARSH

CLASS REUNIONS

CURRICULUM REFRESHED

BY DALHOUSSIE MEDICAL SCHOOL
The 2022 DMAA Alumni Recognition Award Recipients: Dr. Stephanie Snow, Dr. Matt Lowe, Dr. Cyril Moyse, Dr. Mike MacGillivary, Dr. Rob Liwski, and Dr. Frances Moriarty
FEATURES AND STORIES

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As we look towards 2023, I would like to offer my sincere gratitude to the Dalhousie Medical School alumni community for all you do to support the healthcare of Canadians, and for inspiring the next generation of physicians in their medical school journey.

ON November 25 we celebrated the annual Dalhousie Medical Alumni Association (DMAA) Awards at the Halifax Convention Centre. Our alumni are striving to improve the health of the people in our communities and accomplishing great things in the medical field. The event recognized their incredible contributions and honoured their impactful work. My sincere congratulations to all those who received awards.

Earlier in the fall, I was delighted to join the medical alumni classes of ‘85 and ‘72 at their reunions and shared my congratulations via video to MD ‘76, MD ‘74 pre-internship, MD ‘02, MD ‘17, and MD ‘73. Unfortunately, post-tropical storm Fiona led to the cancellation of reunions for both the MD class of ‘62 and ‘77, events I had hoped to attend. A class reunion is a great time to think back to your time at Dalhousie and the many meaningful connections with classmates, professors, mentors, and supporters that helped launch you into an amazing career in medicine. Congratulations to all those who celebrated together these past few months.

Beginning in September, and following a multi-year review and refresh, the undergraduate medical school curriculum was updated to ensure medical students at Dalhousie continue to receive a world-class education. The changes were motivated by the changing realities of the world, by the practice of medicine in Canada, and by the growing acceptance of the Medical School’s responsibility to better address equity, diversity and inclusivity in both the education of physicians, as well as the care of patients. We are extremely proud of the medical education we provide, and the refreshed curriculum will help our future physicians meet the healthcare needs of the communities they serve.

In September we announced that Dalhousie University and the Dalhousie Medical Research Foundation (DMRF) would be integrated effective October 3, 2022. The two entities have shared a vision for health research excellence in the Maritimes for over 40 years, and this integration will lead to the creation of an expert team focused on raising even greater funds for medical research at the university.

For more than a year we have consulted broadly with all areas and employment groups in the Faculty of Medicine, as well as with external stakeholders, and you, our alumni, to refresh the our strategic plan, #DalMedForward. Your input has been valuable and has allowed us to better understand your unique perspectives and how we can better support you. I am pleased to say we are nearly ready to disseminate the new strategic plan. With your help, we look forward to continuing the tradition of training scientists and medical professionals with a commitment to lifelong learning, excellence in patient care, high ethical standards, and accountability to communities we serve.

Lastly, I would be remiss not to mention the passing of Dr. Lorne Marsh on September 2, 2022. Dr. Marsh practiced for 44 years as a family physician and left a practice of three thousand patients. The Dr. Lorne Marsh Award has been established to honour his contribution to family medicine in Nova Scotia and supports deserving family medicine residents who plan to practice in the province.
Celebration & Recognition
By Dr. Cindy Forbes (MD ’85), DMAA President

Dear friends and fellow alumni,

As I step into the role of president of the DMAA, I can’t help but reflect on lessons the past two years of the pandemic have taught us. One of them must be the importance that our relationships with family, friends and colleagues play in our overall health and quality of life, and the health of our communities.

During our time at Dalhousie Medical School, we were provided with a rich education and the clinical skills necessary to launch us into practice and on the path of lifelong learning. But the people I met at Dalhousie — my classmates, the faculty, students, and mentors — were the real gift I was given. It is the DMAA’s commitment to helping develop, maintain, and support these relationships among Dal Med alumni and with the Faculty of Medicine that I found to be a compelling reason to get involved.

I was reminded of this in September when I attended my 37th class reunion of MD ’85, which was really our 35th having been postponed twice during the pandemic. We have had a reunion every 5 years since graduation but there was something very special about this one as we acknowledged the joy of meeting in person.

I was thrilled to see that many other classes have been successful in resuming their class reunions. From the 5-year reunion for MD ’17 to 56 years for MD ’66. Unfortunately, post tropical storm Fiona forced the Class of ’77 and ’62 to postpone their reunion plans. The DMAA board will be looking for ways we can improve our support of class reunions and plan to consider new initiatives to connect alumni going forward. If 2023 is an anniversary year for your class, please reach out to medical.alumni@dal.ca to learn how the DMAA can support your reunion activities.

On November 25th, during an intimate dinner at the Halifax Convention Centre, the DMAA honored six deserving alumni with Alumni Recognition Awards. I hope you will take a moment to learn more about the recipients on Page 6 and watch out for the next round of nominations in early 2023.

In this issue we wanted to shine a light on distinguished alumni who are graduates of the Faculty of Medicine’s graduate program. Page 26 we speak with Dr. Paola Marcato, Interim Assistant Dean, Graduate and Postdoctoral Studies to learn about the innovative programs and impactful research happening outside of the MD program.

I’m also very happy to announce that the Dal Med Gala 155 is set for October 14, 2023, at the Halifax Convention Centre, with the band Big Fish set to entertain. Mark your calendars!

Finally, a very special thank you to Dr. Kathy O’Brien (MD ’87) for her leadership over the past two years. She championed the DMAA through uncharted territory and thoughtfully guided our alumni activities as we transitioned to the virtual world. We look forward to her valuable input and involvement as past president as we move forward.

In closing, I’d like to wish you and your families health, comfort and joy during the upcoming holiday season!

Sincerely,

Dr. Cindy Forbes (MD ’85)
President, Dalhousie Medical Alumni Association
Looking ahead to Growth

Dr. Jennifer L. Hall, Associate Dean,
Dalhousie Medicine New Brunswick

It’s been an exciting time at Dalhousie Medicine New Brunswick over the last several months. We began the 2022-2023 academic year in-person, and closely resembling our pre-pandemic days. It’s been so refreshing seeing everyone on campus.

In early October, the Government of New Brunswick announced that 10 medical school seats which are currently offered to New Brunswickers through Memorial University in St. John’s, Newfoundland, are moving to DMNB. This move is part of a plan to increase the number of seats for New Brunswick medical students within the province. DMNB plays an important role in developing highly trained physicians and scientists who can help address health priorities specific to New Brunswick, and we are excited to have further opportunities to meet the province’s healthcare needs.

In postgraduate education, beginning in 2023, resident learners in the NB regional stream of the Internal Medicine Program will complete up to six blocks each year at The Moncton Hospital. The hospital is a level 2 trauma centre that includes tertiary care in neurosurgery, neurology, maternal-fetal medicine, and active advanced stage oncology (cancer) services. It is also home to the NB Child and Adolescent Psychiatric Unit, the NB Organ and Tissue Program, and the Perinatal NB Program. This is a very exciting opportunity for Internal Medicine residents, and we are thrilled to collaborate with our colleagues in Moncton.

Planning will begin soon for the new Dalhousie Family Medicine residency site in Miramichi. This will be the fourth family medicine residency training site in New Brunswick. Miramichi was the first site in the Faculty of Medicine to introduce the concept of a longitudinal integrated clerkship and provide core and elective resident rotations. The introduction of a Family Medicine Residency program based in Miramichi will further engage physicians in teaching and provide a valuable education experience for the learners. The site will begin accepting residents in 2024.

We continue to see great developments from our New Brunswick students and programs, and internationally competitive medical research happening right here in New Brunswick. We also have an exceptional team of faculty, staff, and facilities here at DMNB to provide a world-class education for our students. For more than 10 years, Dalhousie Medicine New Brunswick has been producing world-class New Brunswick physicians who meet the evolving needs of their fellow New Brunswickers.

As we look towards 2023, guided by the Faculty of Medicine’s renewed strategic plan, we can expect a period of growth and incredible achievement from our faculty, staff, students, and alumni. I am excited to see what the New Year will bring.

Sincerely,

Dr. Jennifer Hall
Associate Dean, DMNB
DMNB Welcomes Class of 2026
By Elizabeth Conrad

The start of a new academic year is always special at Dalhousie Medicine New Brunswick (DMNB), as a new cohort of students are welcomed into the study of medicine in New Brunswick with one of DMNB’s flagship events: the annual First Light Ceremony. A tradition that began when DMNB first opened its doors in September 2009, this year’s First Light Ceremony took place on September 9 and celebrated the arrival of the Saint John campus’ fourteenth cohort, the Class of 2026. Held at the Marriott Saint John Royal Ballroom, the First Light Ceremony centred around the DMNB Asklepion Torch whose light symbolizes the incoming class’s commitment to a lifelong journey in the practice of medicine.

Presided over by Dr. Lisa Sutherland (Assistant Dean, DMNB Student & Resident Affairs, MD ’92), this year’s ceremony featured remarks by Dr. David Anderson (Dean, Faculty of Medicine, MD ’83) and Dr. Jennifer Hall (Associate Dean, DMNB), as well as a New Brunswick Campus Site Video Tour led by Dr. Robert Boulay (Assistant Dean, DMNB Clinical Education, MD ’89).

Dean Anderson, on his part, spoke to the unique advantage of attending Dalhousie Medicine New Brunswick. “Having a medical school with strong bases in two sites offers fantastic advantages and opportunities,” he said. “For our students in New Brunswick, it is like having a class within a class. You will see the benefits of working with and getting to know your peers in Saint John. At the same time, you have access to the entire Dalhousie community. It is the best of both worlds.”

The ceremony also included a performance by DMNB Choir, Heartbeat!, as well as a keynote by DMNB alum Dr. Lyndsay Russell (MD ’14), who shared some of her well-earned wisdom with the incoming class.

All in all, it was another poignant First Light Ceremony that brought the Class of 2026’s family and friends together in-person with DMNB leadership, faculty, and staff to celebrate the beginning of the newest cohort’s journey into the world of medicine in their home province of New Brunswick.

Asklepion Torch
Asklepios, the Greek god of medicine, was gentle, caring, and giving. To him, the torch and serpent were sacred. The serpent’s healing power was also recognized by Hippocrates, the Father of Medicine, and has since been adopted as the physician’s emblem.

The serpent symbolizes the double-edged challenge of decision-making in healthcare: through its ability to shed an old skin for a new and healthy one, the serpent can represent the potential of renewal just as easily as it can represent the potential of illness with its poisonous bite.

On the DMNB Asklepion Torch, the serpent’s power rises from the base (lower instincts) to the crown of the enlightenment (higher consciousness), reminding physicians of their higher calling to care for the physical, emotional, mental, and spiritual well-being of their patients.

The crown of the DMNB Asklepion torch is ringed with the New Brunswick provincial flower, the violet.

Sculpted by Philip Savage www.savagesculpture.com
After producing virtual events for both 2020 and 2021, the Dalhousie Medical Alumni Association was pleased to host the 2022 DMAA Alumni Recognition Awards in person at the Halifax Convention Centre on Friday, November 25th, 2022.

An intimate dinner to honour the six award recipients, the evening was presided over by Dr. Darrell White (MD ’91), Associate Dean, Medical Education, Dr. Cindy Forbes (MD ’85), DMAA President, and Dr. Patrick Holland (MD ’20), Maritime Resident Doctors. Guests included friends and family of the recipients, DMAA board members, and staff and faculty.

The DMAA is looking forward to once again hosting the next awards celebration during the Dal Med Gala weekend in October 2023.

Congratulations to the 2022 Recipients! Read about their incredible accomplishments over the next few pages.

Nominations for the 2023 DMAA Alumni Recognition Awards are now open.

We’re proud of everything that our alumni have accomplished. Whether they’ve made national contributions to clinical practice, shown a strong level of commitment to family practice, maintained an exceptional lifelong career, or demonstrated exceptional care and commitment within the first couple of years of their career—our alumni are consistently working to make an impact in our communities and our health system.

The DMAA Alumni Recognition Awards not only recognize these outstanding achievements in research and clinical practice, but they also showcase the contributions that are made to the faculty of medicine, students, and the community.

To nominate someone for a 2023 DMAA Alumni Recognition Award, please fill out the 2023 NOMINATION FORM and submit it to medical.alumni@dal.ca.
2022 Alum of the Year recipient, Dr. Robert Liwski (MD ’03)

INTERNATIONAL IMPACT

The Dalhousie Medical Alumni Association is proud to bestow the 2022 Alum of the Year award upon Dr. Robert Liwski (BSc ’94, PhD ’99, MD ’03), Head of the Division of Hematopathology at the QEII Health Sciences Center and professor in Dalhousie’s Department of Pathology.

Awarded annually since 1958, this honour recognizes unique and major contributions made by a retired or still active physician to clinical practice, teaching, and/or research at a national and international level.

As Medical Director of the Human Leukocyte Antigen (HLA) Laboratory in the Department of Pathology and Laboratory Medicine at the QEII, Dr. Liwski has contributed enormously to optimizing the care of solid organ and bone marrow transplantation patients in Atlantic Canada.

Dr. Liwski and his HLA Laboratory team have cut the time it takes to confirm an organ match by an astonishing 70 percent. While dramatically increasing the speed of the HLA crossmatch testing process, they’ve also made it more accurate, ensuring patients receive good matches, in record time.

“Our protocol takes two hours, even though the standard protocol is done in five hours,” explains Dr. Liwski. “And when you look at our data, the sensitivity and specificity is much better than the standard assay that’s used out there.”

Known worldwide as the Halifax Protocol, it has been adopted internationally and is becoming the standard of care in most transplant centers in North America, and numerous centres in countries including Australia, the U.K., Brazil, Poland, Germany, Portugal, Italy, Sweden, South Korea, and Saudi Arabia.

Dr. Liwski is the Co-Chair of the Canadian HLA Advisory Committee and the President of the American Society for Histocompatibility and Immunogenetics, and continues to teach his research internationally.

DAL PROUD

As an undergrad, Dr. Liwski worked in Dr. Tim Lee’s lab, where he became fascinated with transplant immunology and bench research. Instead of heading straight into medical school after his BSc, he pursued a PhD with Dr. Lee.

It was his mentor, Dr. Irene Sadek (PGM ’97), Head of the Department of Pathology, who ultimately encouraged him to pursue a residency in hematology.

“Pathology and Laboratory Medicine is not one of these areas that is really on anybody’s radar,” explains Dr. Liwski. “I think you know, learning about pathology and seeing the importance of diagnostic medicine and how it can impact patient care — a patient’s life — was something that I really learned during Dr. Sadek’s lectures and that inspired me to go into this area.”

Dr. Liwski encourages medical students not to disregard previous experience that may seem unrelated to a particular field or specialty, and shares that being an expert in two seemingly separate fields can have a big impact.

“It was the perfect fit, to apply my background in immunology and techniques like flow cytometry to the clinical analysis of blood and HLA antibodies,” Dr. Liwski says. “This integration of all my experiences is what’s made it possible for me to lead the development of new protocols for HLA crossmatch testing to confirm an organ’s suitability for transplant into the proposed recipient.”

We may see another Dr. Liwski named Alum of the Year in the future. His two sons have both pursued medicine at Dalhousie, something he is extremely proud of.

Dr. Daniel Liwski, Class of 2022, is currently an internal medicine resident at Dalhousie, and his younger son Chris will be graduating with the Class of 2023.
Honorary President

Dr. Cyril Moyse (MD ’70)

NEVER ONE TO SAY NO

When asked what advice he had for current Dalhousie Medical School students, Dr. Cyril Moyse — who recently celebrated a 50th anniversary milestone reunion with his MD ’72 classmates — responded succinctly: keep your options open.

“If an opportunity presents itself, try and take it,” advises Dr. Moyse. “Keep your eyes open for opportunities to broaden your experience.”

After completing his undergraduate studies at Mount Allison, he looked to combine his interests in science, research, and working with people. Following in his father’s footsteps — a Dal Med alum from Class of 1933 — Dr. Moyse attended Dal Med before returning to his hometown of Summerside, PEI to take over his father’s practice, who had unfortunately passed three months prior to Dr. Moyse’s graduation.

“I do like a challenge and if an opportunity presents itself, I don’t like to turn it down,” states Dr. Moyse.

In addition to his father’s influence, Dr. Moyse chose family medicine because he liked variety and didn’t want to be narrowed down.

“All of us who practice on PEI have to wear different hats. It’s a small place — you end up with a fair number of friends who are patients. You learn very quickly how to separate your social life from your practice, because treating friends can be problematic if you don’t set certain limits.”

The DMAA Honourary President Award is given to an alum who is highly respected in the community, and whose career and service in the practice of medicine has been outstanding. Dr. Moyse was nominated by his colleagues to recognize and celebrate an outstanding commitment to family medicine throughout a nearly 50-year career in Summerside, which included serving as clinical instructor and preceptor at Dalhousie’s department of family medicine, and as the medical examiner for the RCMP for 25 years, among others.

PREVENTATIVE MEDICINE

In addition to an active practice, Dr. Moyse served as Coroner for Western PEI, and has been involved with the PEI College of Family Physicians, the PEI College of Physicians and Surgeons (with 20 years as Registrar), the Medical Council of Canada, the Federation of Medical Regulatory Authorities of Canada, the PEI Medical Society, and the Canadian Medical Association. He says that while the most enjoyable part of his career was working with individual patients, an important theme that has emerged is preventative medicine.

“As a coroner, the whole role is to try to prevent something from happening again,” explains Dr. Moyse.

“Having an opportunity to encourage government regulations or to change policy, chairing inquests to try to prevent mishaps from happening to other patients, promoting quality care and standardization with physician examinations and licensing — it’s all the same thing. Everything revolves around preventative health care in the end. It wasn’t by design but looking back, that’s what I have done. It all falls in that category.”

In 2012, Dr. Moyse was a distinguished recipient of the Queen’s Diamond Jubilee Medal in recognition of his contributions to the discipline of family medicine in Canada. Despite his many honours and accolades, Dr. Moyse considers the highlight of his career to be family — whom he calls his greatest influences and role models.

“Practising medicine is a family affair,” explains Dr. Moyse. “What I did as a physician affected what went on in the family.”

There are now three generations of Dal Med graduates in the Moyse family — Dr. Heidi Seaborn Moyse (MD ’01) continued in her father and grandfather’s footsteps and practises family medicine in Virginia.
Family Physician of the Year

Dr. Mary Frances Moriarty (MD ’77)

COMMUNITY DOCTOR

When she sat down to choose a career, Dr. Mary Frances Moriarty (MD ’77) made a list of all the jobs she knew she didn’t want to do and was left with a choice between medicine and administration. Luckily for the community of Dartmouth, Nova Scotia, medicine won out.

Raised by Scottish immigrants, Dr. Moriarty credits her parents for her desire to serve the community.

“I always had a sense that I wanted to help people and make a difference,” recalls Dr. Moriarty. Having initially considered pursuing nursing, she opted for Dalhousie Medical School and completed her degree with the Class of 1977.

Dr. Moriarty is the recipient of the 2022 Family Physician of the Year Award — an honour that recognizes the impact of the lifetime work of family physicians who are advocates for the health of their communities, exemplify good medical care, and who act as role models in the practice of family medicine. Dr. Moriarty has been a family doctor in Dartmouth for her entire career. She has cared for patients through her own family practice, as well as patients at the Woodlawn Medical Duty Clinic, and at Oakwood Terrace, a nursing home in Dartmouth where she was Medical Director.

“When I first started, we did everything — obstetrics, hospital shifts, nursing homes — you followed your patient wherever they went,” explains Dr. Moriarty. “Dartmouth General was terrific. Although it was in the city, it was basically a community hospital like you would find in rural Nova Scotia.”

Dr. Moriarty began practicing before physicians had access to routine ultrasounds, CAT scans, and MRIs.

“A lot of your diagnosis and treatment was based on a good history and physical. It made for a wonderful sense of community in the end, to understand your patients because you knew what was happening with them all the time.”

LEADER AND ADVOCATE

Currently, Dr. Moriarty is the Dartmouth Network Lead for the NSHA Department of Family Medicine in the Central Zone. She is seen as a leader among her peers and is frequently called upon to mentor and teach both the art and science of family practice in Dartmouth, a challenge she is always willing to accept.

“Fairly early on, I got involved in committees in the hospital and then I always seemed to be doing something,” recalls Dr. Moriarty. “Quality care was always one of my interests, palliative care was another one. I was lucky to hear some of the real gurus of palliative care talk early on about how we could do a much better job dealing with dying patients and people in pain.”

Dr. Moriarty has served as an advocate for patients and family physicians in Dartmouth for decades, through involvement in various committees and medical advisory positions with the Dartmouth Medical Staff Association, the inaugural Capital District Health Authority board (before it became Nova Scotia Health), and with Doctors Nova Scotia.

“I think if you want to make change, you just can’t sit there and complain. You have to put your money where your mouth is and put the time and the effort into trying.”

She considers the highlight of her career to be the privilege of being able to practice for so many years and being able to share in her patient’s lives in a different way.

“It’s the trust they put in you, to tell you things that they wouldn’t tell someone else,” explains Dr. Moriarty. “That’s why I believe medicine so important—it gives you the opportunity to help and to understand people.”
Young Alum of the Year

Dr. Stephanie Snow (MD ‘05)

ALLSTAR ALUM

The Young Alum of the Year award honours an alum who has made a significant contribution to the Dalhousie Medical School community in the first two decades of their career — through clinical practice, teaching, research, or public service.

Dr. Stephanie Snow (MD ’05) checks every box.

As staff Medical Oncologist at the QEII Health Sciences Centre, Dr. Snow says it’s a very exciting time to be an oncologist.

“When I started in 2010, I was predominantly prescribing chemotherapy. Now I treat a lot of patients with targeted therapies — medications that work on molecular alteration of a cancer cell — and immunotherapies, which are drugs that help the body’s immune system fight the cancer”, explains Dr. Snow. “Huge paradigm shifts in treatments, so I am constantly learning, and I love that.”

Dr. Snow, who treats thoracic and GI malignancies, is seeing huge improvements in her patient’s quality of life.

“You see these big changes and not just in helping people live longer and live better with incurable cancer, but we’re curing more people which is amazing.”

An associate professor in Dalhousie’s Department of Medicine, Dr. Snow has a strong interest in medical education. She currently serves as Vice Chair of the Royal College Medical Oncology Examination Board, and from 2010–2021, ran the Dalhousie Undergraduate Medical Oncology portfolio.

PATIENT ADVOCACY AND CARE

Dr. Snow balances her clinic, research and academic commitments with various volunteer positions and is quick to say that patient advocacy has been the highlight of her career so far.

“It was never anything that I had on my to do list for my career,” explains Dr. Snow. “It wasn’t something that I had necessarily planned and actively sought out.”

Her commitment to the work and ability to speak passionately on camera have allowed her to reach a greater audience, which she says is the real benefit.

“You get to touch so many more patients and you can make an impact at a national level for things like access to screening, or drugs, or providing educational tools that can be used across the country — it’s incredibly rewarding.”

Currently serving as President of Lung Cancer Canada, Dr. Snow also sits on the medical advisory committees of several other patient advocacy groups in colorectal and gastric cancer.

Dr. Snow calls her father, a retired United Church minister, her greatest influence, and shares that making house calls with him as a child was her initial “kitchen table education.”

“I became very comfortable doing hospital visits, going to visit people who were dying at home,” explains Dr. Snow. “That’s an area that a lot of people don’t feel comfortable going into, but I really understood that importance right from the beginning, and I learned that from my dad.”

She incorporates this approach into her teaching, often bringing medical students with her for difficult conversations with patients — from the initial diagnosis to the uncertainties of treatment, to the final discussions where there is nothing left to do for a terminal patient.

“I want my students to witness those moments because that’s not something you can teach or learn in a textbook, that’s the kind of softer curriculum you learn from experience.”

Dr. Snow says her greatest challenge is balancing her various professional commitments with her family life, but that ultimately patient care is not something she’s willing to cut.
2022 Resident Leadership Award – Family Medicine recipient, 
Dr. Matt Lowe (MD ’19)

FAMILY MEDICINE ADVOCATE

Following a degree in Neuroscience from Dalhousie, Dr. Matt Lowe (MD ’19) was ready to escape the lab.

“I always joke that the best job I ever had was as a tour guide on the Harbour Hopper,” laughs Dr. Lowe. “So, I knew I wanted more interaction with people.”

After being encouraged by a former teacher to pursue medicine, Dr. Lowe found his home at Dal Med and quickly emerged as a student leader, serving as a Doctors Nova Scotia representative with the Dalhousie Medical Student’s Society.

Following convocation, Dr. Lowe matched to family medicine residency training at the North Nova Family Medicine teaching site in Truro and followed a non-traditional “longitudinal curriculum” where he spent two years following a group of patients consistently — gaining skills and experience in areas requiring good continuity of care, including maternal care, mental health, and senior care — an experience that has shaped his advocacy for the importance of family medicine.

“Good primary care prevents a lot of the issues we are seeing in hospitals right now,” explains Dr. Lowe.

“It prevents people going to emergency departments, it prevents people from being admitted — it’s a trickle-down effect that makes our system run more smoothly.”

He adds that this is especially true in rural areas where there isn’t as much access to primary care physicians. “Knowing they have a family doctor gives a patient a great sense of comfort.”

Dr. Lowe credits his preceptor at North Nova, Dr. Masoumi, with helping him understand the value of caring for patients and showing them you have their best interests at heart.

MAiD COMMITTEE

The Resident Leadership Award – Family Medicine was established to recognize residents who demonstrate outstanding leadership in areas including advocacy, research, community engagement, and/or mentorship.

In addition to serving on the Maritime Resident Doctors Board of Directors, Dr. Lowe has continued his advocacy efforts on a provincial level as a member of the Nova Scotia Health Committee that created the Medical Assistance in Dying protocol. When asked what he is most proud of in his career to date, the answer was clear.

“I was on the MAiD steering committee for Nova Scotia Health, one of the lead point-people on developing the oral protocol,” Dr. Lowe explains. “There are two methods — a method where the physician gives the medication and another where the patient takes it themselves, and I helped develop the latter. It’s important that the patient has autonomy and control over the situation.”

Following a year of enhanced competency training in Emergency Medicine, Dr. Lowe is currently working in emergency departments in Dartmouth, Truro, and at the IWK. “I like being able to keep my practice general, treating patients of different ages and backgrounds”

Dr. Lowe also recently served with Maritime Resident Doctors as Well-Being Chair, where he coordinated many wellness events across the Maritimes and has been a strong advocate for work-life balance and staying active outside of clinical duties.
Resident Leadership Award – Royal College Specialties and Subspecialties

Dr. Michael MacGillivary (MD ’18)

FIVE YEARS IN

No stranger to a packed schedule, Dr. Michael MacGillivary (MD ’18) is in his fifth year of a busy dermatology residency at the QEII Health Sciences Centre, training that he says has given him a great education and a great steppingstone into the next phase of his career.

“I am a PGY5 in Dermatology right now, so this is the year of excruciating minutia in studying for exams to go with the usual daily activities associated with patient care,” explains Dr. MacGillivary. “My residency has thus far been spectacular. I’m so fortunate to find myself in this specialty.”

Dr. MacGillivary finds the day-in, day-out of his work really interesting, and appreciates the breadth of experience and world-class clinicians that he works with as part of the Dalhousie Dermatology Division.

“We get to see medicine cases, surgical cases, and a few head-scratchers in the hospital that we try to solve by working with colleagues from other specialties.”

When discussing career challenges thus far, Dr. MacGillivary says that not always being able to make a diagnosis, especially for those patients who have been struggling for years, has been the hardest part.

“I think, inherently, as a physician, you want to diagnose and help your patients as best you can,” and being able to do that is the most rewarding part of his job, according to Dr. MacGillivary.

“The day-to-day experience of interacting with patients, providing great care and being part of an incredible team are things I look forward to each day. I look forward to those aspects as future cornerstones of my career.”

SIGHTS SET ON LEADERSHIP

The Resident Leadership Award – Royal College Specialties and Subspecialties, recognizes a Dalhousie Medical School resident who demonstrates outstanding leadership in their field and among their colleagues. A familiar face to many in the Faculty of Medicine, Dr. MacGillivary is no stranger to tackling leadership roles.

Dr. MacGillivary has taken on countless volunteer opportunities in his residency including involvement with Resident Doctors of Canada committees, the College of Physicians and Surgeons of Nova Scotia, and Doctors Nova Scotia.

Dr. MacGillivary counts his grandfather, and two fellow alumni Dr. Leo Fares (MD ’16), and Dean of Medicine, Dr. David Anderson (MD ’83), as his personal and professional influences. Dr. Ron Stewart (MD ’70), a fellow Cape Bretoner, has also been a mentor in medical leadership for Dr. MacGillivary.

“Ron and I would go to coffee and bounce ideas off each other about the future landscape of medical leadership,” explains Dr. MacGillivary. “In hearing about his experiences and his long list of accomplishments on the leadership front, he became an inspirational figure to me.”

Dr. MacGillivary credits his various leadership roles for his successes thus far.

“I think I’ve been made a better clinician by some of the skills that I’ve learned in these leadership opportunities.”

He advises current students to straddle the fine line between taking on too much and getting every experience that you can out of medical school, a balance he admits is challenging.

“Try to take every opportunity that comes your way for further development of yourself, either as a person or as a provider to the public.”
DALMЕD
GALA
OCTOBER 14 2023

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Becoming a doctor at Dalhousie looks a bit different in 2022 than it did in years past. The changes, which were evident during orientation week in August, stem from a multi-year review and refresh of the undergraduate curriculum.

Last extensively reviewed in 2009, the consistent evaluation and modification of the undergraduate curriculum is part of ensuring students receive a world-class education and is an accreditation requirement of the Committee on Accreditation of Canadian Medical Schools (CACMS).

“We are extremely proud of the medical education we provide, and the outstanding yearly success of our graduates in licensing exams and the CaRMS match is a testament to the quality of the education our students receive,” says Dr. David Anderson, Dean of Medicine.

A responsibility to change

The new changes were motivated by several elements, some informed by the changing realities of the world, some by the practice of medicine in Canada, and others by the growing acceptance of the Medical School’s responsibility to better address equity, diversity, and inclusivity in both the education of physicians, as well as the care of patients.
Through extensive internal and external consultations, nine key areas of focus were identified: equity, diversity, and inclusivity (EDI); public health; planetary health (including climate crisis); priority communities; generalism; addictions medicine; movement competency-based learning for UGME; health systems; and student wellness. Working groups, comprised of faculty, residents, medical students, and staff were established to focus on each theme. They began their work in the summer and fall of 2020, with recommendations presented to the Undergraduate Medical Education Curriculum Committee (UMECC) in January 2021. Feedback was then sought from faculty, residents, students, staff, and the community, through town halls, one for each theme, held over a five-week period between February and March 2021.

Recommendations were compiled and presented to administration in undergraduate medical education in April 2021. Encouraged initially to ‘dream big,’ the working groups were aspirational, and not all recommendations could be accommodated within the existing structures of the undergraduate program.

Dr. Evelyn Sutton is the associate dean of undergraduate medical education, and curriculum refresh project leader. She says the gaps that were identified have been addressed, and the new curriculum will position students to meet to the demands of a changing world.

“We’ve got a very strong curriculum. Our students are doing very well in the national regulatory examinations, they’re doing well in terms of matching. But there is a changing world that we have to keep responding to, and that’s what the refresh is doing.”

Diversity in case-based learning

The architecture of the undergraduate curriculum has not changed, with most of the transfer of knowledge continuing through small group discussions, and case-based learning. What is changing is the quality of those cases. Medical students in their first and second year of study work through nearly 200 tutorial cases that feature fictional patients. All 200 cases will be edited to present students with a more diverse array of patients. This will more accurately represent the diversity of patients that interact with the healthcare system, and also disrupt normative assumptions about who is served and what values are upheld by health care in Canada.

To assist in this enormous task, the Curriculum Refresh Committee (CRC), a subcommittee of the UMECC, seconded Leanne Picketts from the Centre for Collaborative Clinical Learning and Research. Leanne, who has worked as a simulated patient educator for 11 years, has a master’s degree in education with a focus on curriculum development for health professions education.

“We are writing in several different dimensions of diversity for every patient — a full name, pronouns, racialized identity, sexual orientation, sex/gender identity, family structure, and socio-economic status, to name a few,” she says. “When details about a person’s identity are omitted from a case, it suggests that their experience is unimportant or assumed.”

Working in collaboration with the Case Diversification Committee, subject matter experts, and clinicians, Leanne is ensuring patients aren’t merely presented as a disease or medical condition, but more realistically as an integral part of their healthcare experience — where they react to a diagnosis, are part of the decision-making, and may have aspects of their identity affect their health. She says from a de-colonizing and anti-oppressive perspective, the goal isn’t adding information to cases, but removing normative assumptions about the ‘standard’ patient.

Historically, medical research and medical education have studied and taught students to consider the 70 kg male who is assumed to be white, cis-gender, heterosexual, without a disability or a mental health condition, and of medium-high education and income. This does not reflect reality.

Leanne and her team have specific targets to reach. The previous case load included only four cases with Indigenous patients. That number will increase to 20 under the curriculum refresh, and a concerted effort has been made to better represent communities in Nova Scotia and New Brunswick, as well as communities that are growing nationally.

“We are also paying particular attention to language use, to avoid perpetuating stigma, bias, and harm,” she says. “We are using person-first language, eliminating pejorative terms, and aiming to make patient-centeredness a key component of every case.”

The Faculty of Medicine has been gathering ideas from students and tutors about diversifying the tutorial cases for several years, so many of the ideas for both the overall project, and the specific cases were provided before the work of editing the cases even began.

Med 1 cases have been implemented this academic year, and Med 2 cases will be ready for 2023/24.

Interest in broad-based practice

Though the most material changes to the undergraduate curriculum will be found in the updated tutorial cases, all elements of the curriculum were reviewed, and many changes have been made. Learners will see a greater focus on health systems, addictions medicine and the overdose crisis, and a growing field
in health sciences, planetary health, which concentrates on the human health impacts of the earth’s natural systems. Lectures and case studies have been added on generalism, reflecting the increased need for family physicians and surgeons in this field who have core abilities characterized by a broad-based practice across a range of settings.

“One of the things we’re giving more emphasis to is that patients don’t come in with labels, in terms of ‘here’s what’s wrong with me,’ says Dr. Sutton, “They come in with a headache and the student’s job is to start developing a differential diagnosis, and how challenging and how interesting that process is.”

Focus has also been given to student wellness, and the medical school is working to ensure students are supported throughout their four years of training and have developed the skills and healthy habits to serve them through their careers.

“Training doctors is one thing, but retaining our doctors is just as important,” says Dr. Sutton.

The way forward

Students were first introduced to the changes in the curriculum during orientation week. Whereas activities in the past were focused on policies and procedures, 2022 orientation set the tone for Dalhousie’s focus on inclusivity with a 60-minute lecture on anti-oppressive practice, an opening lecture on public health, and a framing lecture on Indigenous and Black health.

Dr. Sutton is hopeful the medical school will be in a different place because of the updates, but says it isn’t going to happen in one academic cycle.

“It’s going to be our medical students going through and educating their teachers and then teaching those who come behind them as well,” she says. “What I think this is going to do long term, and it’s going be a process, is really change how we think about ourselves, our patients, our society, and what we have taken to be truths. And once you uncover one stone, you start looking at others and you’re finding all kinds of things that require change.”

And change they will, because if one thing is certain it’s that change is constant. Going forward, the medical school will continue to ensure the undergraduate curriculum is constantly renewed to meet the needs of our future physicians and the communities they serve.

Learn more about the undergraduate curriculum refresh.
Event Organizers: Marihan Farid (SDIC Co-Chair 2021-2022), Ahmed Hussin (Med 1 SDIC Representative 2021-2022), and Zoe Abraham (SDIC Co-Chair 2021-2022).

The Student Diversity and Inclusion Committee (SDIC) is a group at Dalhousie Medical School that advocates for equity, diversity, and inclusion (EDI). The value of the SDIC is that it is run for students, by students. Our mission is to ensure all students are welcomed and supported and feel like an equal part of the Dalhousie Medicine community. The committee discusses and raises awareness on several EDI topics and advocates for improved diversity and inclusion within our school, medical education, and leadership. Prioritizing the student voice and seeking to make positive actionable change in the Dalhousie Medicine community have always been a focus of the SDIC.
Every year, the SDIC hosts an event on diversity and inclusion in medicine and health care in partnership with several diverse community leaders. This event was first created in 2019 by the SDIC to increase awareness of EDI early in the medical curriculum and has been running every year since. The 2022 event took place on April 5th. Our keynote speakers, Dr. Theresa Rajack-Talley, Dalhousie’s first Vice-Provost of Equity and Inclusion, and Dr. Timothy Christie, discussed the importance of diversity in health care, related barriers and challenges, as well as strategies to improve the system on both an individual and community-based level. Dr. Christie also educated the audience on the history and current impacts of medical racism in Canada.

These keynote presentations were followed by a panel discussion on EDI in health care, where several incredible individuals shared their personal and professional experiences. Maddie Sherman (MSc ’18), an occupational therapist at the Regional Residential Services Society, shared her experience working with and for people with intellectual disabilities. Jeffrey McInnis (BSc ’02) discussed his experiences with the health-care system as both an advocate and a person with an intellectual disability. An Internal Medicine resident, Dr. Hayam Hamodat (MD ’20), brought a unique perspective on patient advocacy. Professor Doyle-Bedwell (LLM ’02), a proud Mi’kmaq woman and law professor at Dalhousie University, spoke about Indigenous health and anti-indigenous racism in health care. Carmel Farahbakhsh, Executive Director and Support and Advocacy Coordinator at The Youth Project, spoke about how to support the 2SQTBIPOC community in health care. Lastly, Michelle Mahoney, an advocate for disability rights and a person with a physical disability, spoke about the challenges and barriers she has faced when accessing health-care services.

The SDIC has received extremely positive feedback from students who have attended this event and see it as a valuable introduction to important EDI topics that facilitates fruitful discussion. Given that this is an attendance-optional student-run event, the SDIC is advocating to make this a required part of our medical curriculum in future years. We would like to thank Ahmed Hussein and Sadaf Anjum for organizing this year’s event along with the broader SDIC team. Thank you to all our wonderful speakers for sharing their knowledge with us.

Please reach out to the SDIC (sdic@dal.ca) if you are interested in learning more about what the committee does or if you would like to work with us in the future.
The Heart of the Community: Gaum Family Legacy

By Elizabeth Conrad

Following in the footsteps of his father and uncles before him, retired pediatric cardiologist Dr. Winston Gaum (MD ’65) continues to champion his family’s legacy of giving back to his home community of Cape Breton through philanthropy.

A family legacy

Along with his uncles, Dr. David Gaum (MD ’43) and Dr. Cyril Gaum (DDS ’48), his father, Dr. Abraham (Abe) Gaum (MD ’34), was a prominent Cape Breton physician and pillar of the community in Sydney, Nova Scotia. For many years, Dr. Abe Gaum was Chief of Surgery at both Sydney City Hospital and St. Rita’s Hospital. A progressive force in modern surgery and hospital care, he helped bring about many improvements in local medical services, often by introducing new techniques and equipment that he would purchase and donate himself.

Dr. Winston Gaum grew up watching his father devote his life to the health of his community, often accompanying him on house calls and even helping to answer the office phone from their home on the weekends.

“My father would be up all hours,” remembers Dr. Gaum. “I remember when I was a teenager there was an office phone in the house, so any time there was a call to the office, even on weekends, the phone rang and my father who had a phone at his side even during meals, would pick up the receiver just to listen to what house calls were coming in. If a patient needed emergency advice, he would break into the conversation.”

Dr. Gaum remembers one particularly memorable house call.

One weekend, while his father was away and his uncle David was on-call, the home phone rang and the woman on the other end exclaimed that her water had broken. “Well, shouldn’t you call a plumber?!,” answered a young Dr. Gaum.

Dr. Abe Gaum’s service to his community extended beyond medical care. If he knew a patient couldn’t afford their medication, he penned a special symbol on the prescription and the pharmacists knew to charge the full amount to his office.

“He often would carry around two dollars bills,” recalls Dr. Gaum. “Patients would ask if he could give them a couple of bucks, and he would be ready to give them the money.”

Upon his death in 1985, the Cape Breton Post wrote: “Many residents of Cape Breton owe a personal debt to Dr. Abe Gaum — because of his efforts, they were able to regain good health. He worked tirelessly, devoting long hours to his profession, and setting an example for his younger colleagues.”

Listening to the heart

Hoping to pursue a great love of music and the violin, Dr. Winston Gaum visited the University of Rochester during a summer of his undergraduate studies at McGill but “learned very quickly there was no way I was going to be anywhere near professional.”

Following his BSc in Montreal, Dr. Gaum enrolled in Dalhousie Medical School where he found his stride during his clinical years. He credits the late Dr. Robert Anderson (MD ’54), who had recently joined Dalhousie’s faculty after training at the London Heart Institute, with his interest in cardiology.

“He taught how to diagnose the heart by listening to it,” explains Dr. Gaum. “Believe it or not, the scientific basis of heart noise and rhythm was just being established.”

After 4 years at Dalhousie Medical School and influenced by his dear, life-long friend Dr. Richard Goldbloom, Dr. Gaum continued his training in pediatrics at Montreal’s Children’s Hospital — where, in his spare time, he enjoyed listening to the great classical musicians the city had to offer.

His interest in pediatric cardiology led him to a fellowship at Cincinnati Children’s Hospital in Ohio, where the Chief of Pediatric Cardiology, Dr. Samuel Kaplan, had also trained at the London Heart Institute.

“As fate would have it, I arrived in Cincinnati using the same stethoscope as both Dr. Anderson and Dr. Kaplan,” recalls Dr. Gaum.

An interest in the electrocardiogram took Dr. Gaum to the Kranzler Institute of Cardiology in Indiana, where with the support of a Canada Council grant, he studied electrophysiology under the direction of Dr. Charles Fisch.

“I brought along a few electrocardiograms that I had puzzled over, and I gave them to Dr. Fisch,“ recalls Dr. Gaum. “He recognized the images immediately and said he hadn’t seen them in a while.”

In 1990, Dr. Gaum was invited to become Chief of Pediatric Cardiology at Suny Health Science Centre in Syracuse, and then in 2005 landed back in Rochester as Chief of Pediatric Cardiology.
at the University of Rochester Children’s Hospital, where he once again enjoyed the perks of living in a vibrant music community. “I took advantage,” explains Dr. Gaum, “not to be a violinist, but to attend all of the world-class concerts.”

Dr. Gaum retired in 2012 and relocated to Florida with his wife, a nurse by trade — who, along with Dr. Gaum, also earned her MBA while the two were living and working in Cincinnati.

Giving back

Supporting his community philanthropically was something that Dr. Gaum witnessed early on in his life. His father and uncle financed Sydney’s City Hospital’s renal dialysis unit in memory of their parents, Pearl and Louis Gaum.

Upon Dr. Abe Gaum’s death in 1985, the Sydney Medical Society established a scholarship fund in his memory at Dalhousie Medical School.
Leader. Advocate. Mentor. Inspiration. Dr. Jean Gray, CM (LLD’05), Professor Emeritus, Medical Education, Medicine, and Pharmacology at Dalhousie University, is renowned worldwide for her pioneering work in clinical pharmacology, women’s health and the promotion of women in medicine.

Yet Jean’s stellar career might have taken an entirely different trajectory, had it not been for the financial support that funded her university education.

After the death of her Canadian Army father in 1956, money was tight. Jean’s mother fought long and hard for her to qualify for educational benefits from Veterans’ Affairs. Meanwhile, the top student applied for every scholarship available.

“Without financial assistance, I wouldn’t have been able to afford my education,” says Jean.

So in her estate, Jean is creating a permanent source of support for future medical students. Through a life insurance policy that names Dalhousie as the owner and beneficiary, she has established a scholarship, named for a beloved aunt.

“My financial advisor pointed out that any gift left in my will would be taxed off the top once it goes through probate,” she explains. “The proceeds of the life insurance policy, however, will go directly to Dalhousie, meaning the funds can be put to work for the students right away. And by saving on taxes, I’ll be leaving a larger gift.”

The next generation

Dr. Gaum says a career highlight was working with children, especially teenagers, and feels he had a particular knack for it — one that he learned from his pediatric role model, Dr. Richard Goldbloom.

“Children are honest, and you can have a little fun with them,” explains Dr. Gaum. “4 to 5-year-olds, for example, once they know you aren’t going to stick a needle into them, they never shut up!”

As for current Dalhousie medical students, Dr. Gaum advises them to keep an open mind.

“Today, to be a physician you have an enormous number of choices,” states Dr. Gaum. “I would say when you do go into medicine, don’t pick one area or specialty or subspecialty and exclude everything else. Keep your options open, you may change your mind.”

LEGACY DONOR JEAN GRAY

Faculty of Medicine

Leader. Advocate. Mentor. Inspiration. Dr. Jean Gray, CM (LLD’05), Professor Emeritus, Medical Education, Medicine, and Pharmacology at Dalhousie University, is renowned worldwide for her pioneering work in clinical pharmacology, women’s health and the promotion of women in medicine.

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Visit dal.ca/donors/gray to read more about Jean’s story.
A lasting gift:
Dr. Lorne Marsh’s legacy lives on through a new award

By Jane Doucet

When Dr. Lorne Marsh (MD ’77) left his medical practice in January 2022 after being diagnosed with terminal cancer, his fellow physicians and friends Dr. Howard Conter (MD ’84) and Dr. Kelly Kitamura wanted to do something to pay tribute to the 44 years he practiced family medicine in Nova Scotia, while also serving the health needs of the broader community in myriad ways.

Drs. Conter and Kitamura decided to create the Dr. Lorne Marsh Family Practice Award to support deserving final-year Family Medicine Residents who plan to practice in Nova Scotia. “There are lots of financial pressures on residents, so anything we can do to help alleviate some of them is a good thing,” says Dr. Kitamura.

When they broached the idea about the award with Dr. Marsh, however, he was hesitant to allow them to proceed. “Lorne was extremely humble, so it did take a bit of convincing that he was worthy of it,” says Dr. Kitamura, who worked with Dr. Marsh for 25 years and considered him a mentor. “He wondered why we’d want to have an award named after him, and what it would mean.”

Humble beginnings

Dr. Marsh was born on Nov. 14, 1950, in Glace Bay, N.S., the 11th of 13 siblings. He became Warrant Officer First Class in the 45th Squadron Air Cadets, where he played trumpet in the marching band and led his precision drill team squad to win the Nova Scotia championship. According to his family, Dr. Marsh fondly remembered playing the “Last Post” at the Remembrance Day ceremonies, feeling chills from the sombre notes piercing the cold November air. The Glace Bay Rotary Club sent him on a trip to Europe—a big deal for a boy from a small place—but nothing made him happier than winning the Cape Breton public-speaking contest, judged by well-known radio-and-TV personality Ann Terry MacLellan.

At Reserve District High School, he was president of the student council and editor of the yearbook, and he played hockey and soccer. He received a McConnell Scholarship to McGill University and later the National Research Council (NRC) Scholarship to study his own theory on the origins of cleft palates.

Varied interests

After graduating from McGill, Dr. Marsh was admitted to the Dalhousie Faculty of Medicine in 1974, where he was a member of the Phi Chi fraternity. During internship, on a routine outpatient assessment, he found a vague abdominal mass on a four-month-old infant. Contrary to resistance from the resident staff, a further imaging test was performed and confirmed the assessment.

Dr. Marsh rarely had a prouder moment than when the staff turned to him and said, “You saved that baby’s life.”

Dr. Marsh practiced medicine for eight years in Cheticamp, N.S., followed by 36 years in Halifax. He opened the first four walk-in clinics in Halifax, and later joined Family Practice Associates in the city’s north end. At the IWK Health Centre, he was Occupational Health Physician for 12 years.

In 2021, Dr. Marsh and some colleagues founded Novas Medical Clinic in Halifax. In addition to a robust family practice, over the years, Dr. Marsh provided medical services to the Port of Halifax, film and television productions, and sporting events. Outside of medicine, his personal interests included playing guitar and singing in a band, and running marathons.
Bearing witness

To announce that he was leaving his practice due to illness, Dr. Marsh posted a letter on his clinic’s website, which reads in part: “I want to thank my patients for the privilege of being involved in their medical care. I have learned so much from every patient and have witnessed your incredible resourcefulness, ingenuity and bravery in the face of significant challenges. I have empathized with my patients’ suffering, including physical, emotional and issues involving social and economic concerns. I will hold my patients up as models and try to emulate their amazing character, resilience and bravery in my own journey.”

Dr. Marsh died on Sept. 2, 2022, in Halifax, with his family by his side. “He was a very special guy, and he left us way before his time,” says Dr. Conter. “His type of practice is what we’d like to see for family doctors in the future—not just seeing patients behind their desks, but doing what you really enjoy and what you’re passionate about. That’s what keeps you going.”

Recognizing community medicine

In June of 2022, Dr. Sebastian Copp (MD ‘20), the inaugural recipient of the 2022 Dr. Lorne Marsh Family Practice Award, finished his residency in a unique, rural-based residency program in Tatamagouche, N.S. He has been working there as a family doctor since August. Dr. Copp plays in a band and is helping raise funds to build a rock-climbing wall in the community.

“Receiving this award is quite meaningful to me,” says Dr. Copp. “It’s an affirmation that practicing community medicine is valuable and important, and I greatly value the recognition for that. It also helps solidify my decision to stay and work here in Tatamagouche after I finish residency.”

“We wanted the candidates for this award to be family medicine residents who are practicing in Nova Scotia, preferably in a small town, with a lot of varied interests like Lorne had,” says Dr. Kitamura. “Dal made an excellent choice with Dr. Copp.”

Before Dr. Marsh died, he filmed a short clip for a video about the award named after him. In it, he said, “Anytime friends and colleagues recognize someone or something they feel is good, and it’s a repetitive recognition that benefits someone else, it’s especially meaningful.”

Dr. Kitamura said her friend’s life work was a calling. “He never forgot it was a privilege to share in his patients’ journeys, and he was grateful and gracious to his patients and colleagues until the very end,” she says. “He was prescient in that he knew the value of the patient’s ‘lived experience’ before it was a buzzword—whether it was a movie star or a person who couldn’t feed their family, he could relate to them, and that let him heal them.”
A united effort: Dalhousie welcomes DMRF in milestone integration set to grow fundraising success

By Jason Bremner

For more than 40 years, Dalhousie University and the Dalhousie Medical Research Foundation (DMRF) have shared a vision for health research excellence in the Maritimes.

To continue this work, and to better support research fundraising efforts at Dalhousie, DMRF and Dalhousie have joined forces. This partnership will see the two entities combine efforts to create an expert team with a vision of raising even more funds for research at Dalhousie for the benefit of the broader communities served.

A history of philanthropic support

One contributing factor to Dal’s growth and success in medical research is the longstanding tradition of funding and support for scientists and students that DMRF established over 40 years ago.

When Dr. J Donald Hatcher was appointed Dean of Medicine at Dalhousie University in 1976, he immediately recognized that the lab equipment in the Sir Charles Tupper Medical Building (opened in 1967) was approaching the decade mark and was in desperate need of replacement. He was determined that something should be done.

At the same time, philanthropist and prominent Halifax community member Nora Balders desired to make a substantial donation to medical research in Nova Scotia. Notably, Dalhousie was the only medical school in the country at the time that had not received provincial or regional funding for research.

Mrs. Balders explained to Mr. H. Reuben Cohen, chair of the Dalhousie University Investment Committee, that she would like to make this considerable donation, provided that a goal be set to reach an endowment of $10 million for local medical research, and provided that William (Bill) Sobey be involved in the initiative. After follow-up discussions with Dean Hatcher and Bill Sobey, Cohen later returned to visit Mrs. Balders with the news that a group led by Sobey was committed to achieving this ambitious goal, marking the beginning of an important journey.

Dalhousie Medical Research Foundation was officially established in 1979, with Bill Sobey as the first elected chair and Nora Balders as vice-chair.

Operating as the only independent charitable organization in Canada to provide services directly to a medical school, DMRF has been critical in advancing medical research into real life outcomes. In a time where the competition for public research dollars is challenging, resulting in many of our researchers devoting precious time to filling out grant applications that often don’t come to fruition, the focused philanthropic approach this integration provides will be crucial for our continued success.

“DMRF has a proud history that demonstrates the true spirit of this region: generosity, grit, and determination,” says Janet MacMillan, DMRF Board Chair. “Thanks to our dedicated staff, steadfast volunteers, exceptional research talent, and committed donors, DMRF has helped position our region on the world health research stage. Moving forward, donors can look forward to many more successful years supporting this important work through Dalhousie University’s Faculty of Medicine.”

Moving forward together

With this new and exciting change, several members of the DMRF team will be bringing their expertise in fundraising, administration, and philanthropic communications and marketing to the Faculty of Medicine under the direction of Cathrine Yuill, Executive Director, Advancement. This newly integrated team will be working to build strong relationships with both donors and researchers, helping to raise funding for important medical research that has the potential to transform lives.

“As we welcome DMRF to this full integration with Dalhousie, I look forward to seeing what new accomplishments will be possible through an even more united, collaborative approach to research excellence,” says Dal President Deep Saini.

“I would like to express my gratitude to all current and past staff and board members, and numerous donors to DMRF, for their passion, leadership and generosity throughout the years. Their dedication has played a pivotal role in advancing scientific discoveries, attracting and retaining brilliant scientists, and improving the health outcomes of the people here in our community.
and around the world. I look forward to what can be accomplished at Dalhousie with our collaborative approach to research excellence."

With its fundraising focused solely on medical research at Dalhousie, DMRF and its donors have provided more than $70 million to Dal researchers over the years. Fuelled by this incredible generosity, DMRF has raised more than $110 million and established an $85 million endowment, securing funds to bolster medical research at Dalhousie for many years to come.

The amalgamated team will be looking at how to continue the positive momentum of successful DMRF fundraising initiatives like the Molly Appeal, which raised $470,000 in community donations for local health research in the last fiscal year, and more than $6 million total since 1980. You can read more about the Molly appeal and its namesake, Molly Moore, on the next page.

"I want to sincerely thank the DMRF donors who have played an essential role in growing the medical research portfolio here at Dalhousie University," says Dr. David Anderson, Dean of the Faculty of Medicine. "We look forward to strengthening these important relationships as we welcome and celebrate this milestone integration."

Like Dr. Hatcher over 40 years ago, Dalhousie is marking the beginning of an important journey to grow the medical research portfolio at the university and is committed to achieving our ambitious goals. With better funding opportunities and support for faculty and students, and with focused and aligned strategic research priorities, the future is bright for the medical research community.
Who was Molly? A look back on the origins of the Molly Appeal and medical research philanthropy in Nova Scotia

By Erin McKenna and Cathrine Yuill

The Molly Appeal is widely recognized across the Maritimes. This annual community fundraising appeal aims to raise much needed funds to fuel locally grown medical research and discovery. Over its 40-year history the Molly Appeal has raised over $6 million dollars and been connected to research discoveries in cancer, cardiology, immunotherapy, genomics and more, right here in our own backyard.

Meet Molly Moore

Born at the turn of the century in a rural Nova Scotia farming village, Molly Moore came from a family of little means but big heart. She lived a life of hardship, raising children as a widow, nursing children and friends through the devastating illnesses of the times. From diphtheria and meningitis to infantile paralysis, Molly was no stranger to a time of incurable and often fatal disease.

It was in her later years that Molly was first inspired to the idea of philanthropy. As the story goes, she was visiting her family doctor when he shared some of the exciting medical discoveries that would change the outcomes of many of the illnesses that Molly and her friends and family had lived through. Molly expressed that she wished she could somehow support this exciting work but like many she felt sure she could not make a practical difference given her limited means. When her doctor replied that even a dollar could help researchers purchase a dozen test tubes — and ‘nothing could be more practical than that’. Molly was inspired to a mission.

And so the grassroots community campaign, fondly named The Molly Appeal, was born. And for more than 40 years community members have come together with donations of all sizes to fuel local medical research.

The 2022-23 Molly Appeal

The 2022-23 Molly Appeal: Supporting researchers in developing better cancer diagnosis and treatments through precision technology

The 2022-23 Molly Appeal is all about supporting our cancer researchers with a critical piece of equipment: the Aperio AT2 Bright Field Digital Pathology Scanner and Software.

Researchers in the areas of breast, lung, blood, ovarian, and skin cancers are waiting for this critical tissue imaging equipment to assist them in finding less invasive and more individualized diagnosis, treatments, and cures.

In addition to finding treatments and cures, the Aperio Pathology Scanner will also enable a deeper dive into the pathology of cancers which can also unlock much needed cancer prevention strategies.

While our campaign will not be hitting mailboxes until early in the new year, donors can begin supporting this exciting research development today! 100% of your gift will be directed to the Aperio Scanner and cancer research.

Visit us online to make your gift at giving.dal.ca/molly or contact us to learn about other impactful and tax efficient ways to give such as gifts of shares and securities or estate gifts: 902-494-3502
Higher learning: Graduate programs offer world-class supervisors and facilities

By Jane Doucet

Nine departments and programs within Dalhousie’s Faculty of Medicine offer MSc and PhD programs, and the graduate studies opportunities within them number in the hundreds. Jordan Lukacs, who is earning a Doctor of Philosophy in Microbiology and Immunology, has benefited from many of those opportunities—and, as president of the Faculty of Medicine Graduate Student Society (FMGSS), he has created even more opportunities to help unite his fellow graduate students.

While studying biology at Lakehead University in Thunder Bay, Ont., Lukacs worked in the Zehbe Lab investigating virus-related cancers. “I originally wanted to study plant biology and be an ecologist, but I found my home in cancer at the Zehbe Lab,” he says. When he decided to pursue a graduate degree, he searched online for a supervisor in his area of interest and found Dr. Brent Johnston, a professor and department head in Microbiology and Immunology.

A visit to Dal followed, along with a tour of the lab and the city by current graduate students. “The facilities were amazing, I could see that the work was collaborative, and the students were really welcoming,” says Lukacs. In 2019, he began his research project at Dal investigating the use of oncolytic viruses to target lung cancer, with Dr. Johnston as his supervisor.

Faculty expertise

Dr. Paola Marcato, the Faculty of Medicine’s Interim Assistant Dean, Graduate and Postdoctoral Studies, is excited to see how Lukacs’ research will advance immunotherapy as a cancer treatment—and his work is just one example of innovative graduate student projects. “One thing all of the PhD programs have in common is that they are faculty supervised research-based projects advancing medical and health knowledge,” she says. “Students are attracted to pursue graduate degrees here because our faculty are world-renowned researchers who are experts in their fields.”

Dal’s Faculty of Medicine is a member of The Association of Faculties of Medicine of Canada. “Our goal is to advocate for issues that are important across the country, like increasing graduate student stipends, so our students can achieve excellence,” says Dr. Marcato. “We are part of a larger community of advocacy—nationally, we have a stronger case for needed change across the country.”

Jordan Lukacs, PhD candidate in Microbiology and Immunology, and President, Faculty of Medicine Graduate Student Society
Lukacs is doing his part to strengthen the graduate student experience at Dal. As president of FMGSS, he helps plan and organize orientation sessions and activities like rollerblading, kayaking and virtual paint nights to promote community and offer social supports. “These are great ways to destress and to get to know fellow students in a different setting,” he says.

Support is key

Lukacs is also a member of the newly established Peer Support Network (PSN) within the Faculty of Medicine. This network was formed in 2020 to address the needs of graduate students and postdoctoral fellows who may be struggling in their programs. PSN hosts casual coffee get-togethers and one-on-one support sessions to answer questions provide assistance and connect students with various services.

The Faculty of Medicine provides funding for the coffee gatherings organized by the PSN because their value is recognized. “It’s a place for students to meet so they don’t feel isolated, and to provide a network of support, camaraderie and friendship,” says Dr. Marcato. “I’m amazed at all of the initiatives that are being organized and led by students, it’s great.”

There are many other ways for graduate students to make a difference, offer input into their programs and gain experience. For example, Lukacs has been chosen as the graduate student representative for the Department of Microbiology and Immunology Undergraduate Studies Committee. “Through this role, I’m helping professors better cater to the students’ different learning styles,” he says.

Opportunities abound

Dipping a toe into teaching is something else that benefits graduate students. Lukacs, who aspires to be a professor one day, has been a guest lecturer in MICI 3115 immunology, where he presented a lecture on anti-pathogen immunity to third- and fourth-year undergraduate students through the Certificate in University Teaching and Learning program. He was also a MICI 2400 lab teaching assistant, where he directed and assisted students with aseptic and bacterial lab techniques and graded weekly lab reports and practical exams.

In November, Lukacs attended a North American Society for Immunotherapy Conference (SITC) in Boston, where he presented his research findings indicating that triple therapy can prolong mice with lung cancer significantly. “SITC was absolutely incredible,” he says. “The amount of new immunotherapies being developed by other researchers across North America and their preclinical success showed me that there are great things to come in the next few years for cancer therapy. It truly inspired me to continue in this field.”

Shining a spotlight on students

Graduate Student Research Day has been an annual event since 2005, when it began in the Faculty of Medicine through the Professional and Research Education Program (PREP). Now, this event invites participation from graduate students from across Dal who are involved in health research.

Usually held in May, it receives over 80 abstracts, which are presented during the full-day of platform and poster presentations. Presentations are adjudicated by experienced researchers, in the spirit of helping students further develop their presentation and research skills.

“It’s important to recognize the research excellence of our trainees through awards and platforms like Graduate Student Research Day,” says Dr. Marcato. “The Faculty of Medicine recognizes trainee research as critical to the research success of the faculty.”

Lukacs is the recipient of a 2022 BHCRI DMRF Rosetti CRTP Studentship worth $35,000 from the Beatrice Hunter Cancer Research Institute and the DMRF Rosetti Endowment at Dalhousie. “This incredible endowment will help fund several new experiments using advanced technologies to uncover the relationships between lung-cancer cells and the immune cells that infiltrate the tumour,” he says. “The information we gather from this research will be crucial to our understanding of how our combination immunotherapy fights cancer and will give us clues on how to further improve it.”

Dr. Marcato points to the importance of the diverse research projects taking place—in neuroscience, cancer, infection and vaccinology, and rare genetic diseases, among many other areas. “Dal is investing in training the next generation of leaders, policymakers, researchers and scientists,” she says. “We’re providing them with the best training so they can carry the torch.”
Faculty of Medicine launches Micro Mentorship Program

By Elizabeth Conrad

Following a successful pilot project in 2021, the Faculty of Medicine is proud to formally launch its Micro Mentorship Program. Co-created by the Faculty of Medicine Alumni Office and Student Affairs, the Micro Mentorship Program is the cornerstone of the Dalhousie Medical Alumni Association’s student-to-alumni strategy. The DMAA believes alumni support starts when you’re still in medical school, and this program is a fantastic way for learners to connect with MD alumni in a one-on-one conversation.

“It’s an opportunity to gain insight into the practice of medicine and to grow their professional network,” explains Dr. Cindy Forbes (MD ’85), DMAA President. “Above and beyond exploring a specific specialty or sub-specialty, the mentorship program helps students build a meaningful professional relationship with an experienced physician.”

As for Alumni mentors, the Micro Mentorship Program is an excellent volunteer opportunity that helps you stay connected to Dalhousie Medical School, keeps you up to date on current trends in medical school curriculum, and allows you to share knowledge and experience with future medical professionals.

Application & Matching Process

Alumni interested in participating in the program must complete the online application form. Commitment on the part of mentors will be minimal, consisting of 1-3 x 30-minute virtual conversations. Since it is a virtual program, alumni from all over the world can participate.

REGISTER TODAY or email medical.alumni@dal.ca for more information.
Parent Tot program engages Dalhousie’s young employees: Dalhousie program exposes learners to pediatric patients and their parents

By Kate Rogers

When Shaylor Austin and their children, Sagey and Ruari, arrived last month to see a doctor about Sagey’s nagging cold, it wasn’t your typical appointment. They entered an exam room at the Centre for Collaborative Clinical Learning and Research (C3LR) at Dalhousie and were greeted by two second-year medical students, and a supervising pediatrician. The nagging cold is part of a script provided to Shaylor in advance of the session, and in fact, Sagey doesn’t have a cold at all.

The Austin’s are part of a group of approximately 25-50 families who participate in the Parent Tot program at Dalhousie University each year. One of the many programs developed and implemented by the C3LR in collaboration with the Faculties of Medicine and Health, the Parent Tot program provides learners with the opportunity to learn, develop, and practice critical pediatric skills by working with real children, adding authenticity to simulated pediatric experiences and interactions that learners may face in clinical practice.

Developed more than 15 years ago, the Parent Tot program sees medical students in their second year of training, and both nursing students, and audiology and speech-language pathology students in their first year of training, complete mandatory appointment-style sessions with a parent or guardian and their child, in a simulated clinical setting. As the only pediatric training in medical school before entering clerkship, the goal is for learners to increase their comfort level working with children and parents.
guardians. Medical students are required to participate in four sessions that include children of differing ages and complaints, ensuring they gain the necessary skills to obtain different histories and complete the appropriate physical exam based on age and situation.

Medical students in the program are guided and supported by a pediatrician through each session. Prior to the arrival of the child and parent/guardian, the student and pediatrician discuss expectations and objectives, and any questions or concerns the student may have. The tutor pediatricians know to prepare the students to expect the unexpected. Kids will be kids.

Once the child and parent/guardian enter the room, it becomes less like a simulated situation, and more like a real appointment, with children who are typically too young to follow the brief script provided to their parent/guardian.

Emily Armstrong is a Simulated Patient Educator at the C3LR and alongside her colleague Christine Daniels, has been coordinating the program since 2014.

“This program falls somewhere between our simulated patient program and our volunteer patient program because we can somewhat simulate the parents/guardians, although they’re coming with a lot of their own volunteered information and history, but children are coming just as themselves,” says Emily. “We don’t dictate what happens and that’s where we prep the learners.”

Unmatched real-world experience

Dominique Salh, who is soon entering her third year of medical school, participated in the Parent Tot program during the 2021-2022 academic year and says learning to provide patient-centred care for children is a skill that would be much more difficult to develop with a manikin.

“Children have busy minds, are energetic, and require our full attention to keep them engaged during a clinical exam,” she says. “For example, there is a difference between listening to the heart sounds of a manikin, versus listening to the heart sounds of a tot who likes to wiggle around in their parent’s arms or on the exam table.”

Dominique and her fellow medical students faced the additional challenge of completing part of the program virtually, as COVID-19 disrupted regular in-person sessions. Despite this, students were able to fulfill all the program requirements and gain significant virtual care experience. Students who missed in-person sessions were invited back in April to complete physical exams with parents and children, an experience that Dominique is grateful for.

“It is a great privilege to work with children from our local community. The Parent Tot program exposes medical students to a diverse range of children and their families, reflective of the population we will be working with as medical clerks in our third and fourth years of medical school.”

Recruiting Dal’s youngest employees

The Parent Tot program has a database of approximately 100 families with children in the zero-five age-range. This number is always changing, with children graduating out of the pediatric program, making recruitment ongoing. Considered some of Dalhousie’s youngest employees, the families of the children involved receive $20 per hour for sessions that range from one to three hours, with a minimum payment of two hours.

Shaylor and their family got involved in the program in 2015 after hearing about it through a local Parents of Multiples group. The Austin’s, who have four children, including eight-year-old twins, Peregrine and Larkin, six-year-old Sagey, and three-year-old Ruari, have been involved in an incredible 78 Faculty of Medicine-specific sessions, which is equal to approximately 200 individual interactions and a little over 400 medical student encounters. This doesn’t include their sessions with the Faculty of Health.

“When we started, it really felt like an incredibly important and valuable thing to do,” says Shaylor. “As parents we can recognize how hard it can be to interact with kids without experience. When you add the complications that arise in a medical environment it’s something you really want to prepare people for as much as possible and so we’re happy to help with that however we can.”

The program has also benefitted the children by helping them to become familiar and comfortable in medical settings, easing the stress of their own appointments. Encouraged by the experience, one of the Austin twins, Peregrine, is even aspiring to become a doctor.

“It’s been an overwhelmingly positive experience for us,” says Shaylor. “It’s great knowing that we’re giving potential new doctors a valuable learning experience that may help them be better when dealing with kids in the future.”

If you are a parent or guardian interested in participating, contact the Parent Tot program at ptot@dal.ca for more information. For those in New Brunswick interested in getting involved, contact dmbnlrc@dal.ca.
Class Notes

1960s
DR. DAVID COGSWELL (MD ’60) has recently published his memoir, with a central theme of three generations of country doctors working in the same community, all Dalhousie Medical School alumni.

2000s
DR. RAKESH ARORA (PHD ’03, PGM ’03) was recruited by UH Harrington Heart & Vascular Institute to lead cardiac intensive care units and cardiac surgery research. Dr. Arora serves as Director of UH Harrington HVI Perioperative and Cardiac Critical Care and as Research Director in the Division of Cardiac Surgery.

DR. IAN EPSTEIN (MD ’04) has been appointed Assistant Dean of Professional Affairs (DMNS) in the newly established Office of Professional Affairs (OPA.)

DR. SARAH COOK (MD ’05) has been appointed as Chief, IWK Department of Family Medicine – Maternal Newborn Care, a shared position with Dalhousie Department of Family Medicine.

DR. SAMANTHA GRAY (MD ’07) has been appointed Assistant Dean of Professional Affairs (DMNB) in the newly established Office of Professional Affairs (OPA.)

2010s
DR. LEAH JONES (MD ’18) was appointed Academic Director of Black Health in the Faculty of Medicine.

DR. BERNARD BURGESSON (MD ’18) has won a year-long orthopedic surgery fellowship at Harvard University that will begin in August 2023. Burgesson will work mainly at Massachusetts General Hospital, doing foot and ankle reconstruction, ankle replacements, full foot deformities and correction, and some trauma.

Have a professional accomplishment you’d like to share with the alumni community? Please contact medical.alumni@dal.ca.

In Memoriam
The DMAA acknowledges the passing of our alumni and faculty with sincere sympathy and gratitude for their contributions to medicine. If you know of anyone to note in this section, please contact medical.alumni@dal.ca.

DR. BILL PARSONS (MD ’70) passed away February 9th, 2022.
DR. RYAN BUYTING (MD ’22) passed away July 26, 2022.
DR. STANLEY TEALE (MD ’49) passed away August 19, 2022.
DR. LORNE MARSH (MD ’77) passed away on September 2, 2022.
DR. MATTHEW FOSS (MD ’18) passed away on September 18, 2022.
DR. DEBORAH EVELYN GODSOE (MD ’77) passed away on September 23, 2022.
DR. ERIC FREEDMAN (PGM ’92) passed away September 25, 2022.
DR. ALAN HEBB (MD ’59) passed away on September 26, 2022.
DR. EDISON BRUCE SKINNER (MD ’59) passed away September 28, 2022.
DR. PAUL GARDINER (MD ’74 POST INTERNSHIP) passed away October 1, 2022.
DR. ROBERT CAMPBELL (MD ’74 PRE INTERNSHIP) passed away November 5th, 2022.
DR. PRESTON LEAVITT (MD ’66) passed away November 11, 2022.
DR. SEAN GRONDIN (MD ’90) passed away November 15, 2022.
2022 **Class Reunions**

Congratulations to all those Dalhousie Medical School alumni who were able to celebrate anniversary milestones this year! Many of you had waited years to finally get together, while some of you needed to postpone your festivities once again.

The Dalhousie Medical Alumni Association is always here to help support your class reunion plans, contact Elizabeth at [medical.alumni@dal.ca](mailto:medical.alumni@dal.ca) to get connected and learn how we can help.

**Class of 2001**

**TOP ROW:** Robbie Stewart, Peter Bienkowski, Andrea Kew, Elizabeth Stringer  
**BOTTOM ROW:** Ben Addleman, Satyendra Satyanarayana, Jason Archibald, Brent Howley, Charlotte Calnen, Julia Carroll, Ryan Henneberry, Heather Redstone, Shelley O’Neill, Christopher Gray

**Class of 1974**

**Pre-Internship**

**TOP ROW:** Jane Findlater, Gerry Reardon John Clarke, Wayne Silivan, Ian Slayer, Drew Bethune, Steve Hertzig, Cathy Falvy, Dave Blagrave, Heather Wellwood, Dave Smith, John Black, Blair Nichols, Dana Hanson, Lawrence Jewitt, John Steeves  
**BOTTOM ROW:** Bob Miller, Peter Jeffrey, Mike Reardon, George Davis, Art Davies, Art Zilbert, Bessie Bartlett, Ed Doherty, Paul Murphy
Class of 1985

**TOP ROW:** Cindy Forbes, Colin Mann, Sylvia Kaptein, Ross Thomas, Joe Horan, Ian Dempsey, Alf Morias, Terry Magennis, Blaine Beaton, Ian Campbell

**BOTTOM ROW:** Cathy MacLean, Mike Armitage, Liz Massarelli, Karen Anderson, Renee Lutwick, Suzanne O’Hanley, Mary Doyle

Class of 1972

**TOP ROW:**
Steve Hart, Joe Harrison, Ken Murray, Wayne Bell, Cyril Moyse, Spencer Barclay, Rudy Hyles, Russ King, Paul Kelly, Jim Fitzgerald, Bill Taylor, Marc Goldberg, Tom Peters, Greg Barban

**BOTTOM ROW:**
Barry Norris, Ian MacDonald, Doug Maynes, Phil McFarlane, Michele Murphy, Alan Freeman, Carolyn Rideout, John Crumley, Rick Anningson

**MISSING FROM PHOTO:** Paul Hickey, Paul MacDonald

Class of 1966

**TOP ROW:** Neil Harvey, Harold Wight, Garth Christie, Ross MacKenzie, Bill Covert, Barry Yoell

**MIDDLE ROW:** Ray Tong, Doug Inglis

**BOTTOM ROW:** Harry Pollett, Sandy MacDonald, Ron Stuart, Bob Roberts, Pete Blackie

**MISSING FROM PHOTO:** Bob Brake and Graham Finch
Explore your Alumni Benefits!

Enjoy exclusive perks, offers and discounts with some of your favourite international brands, Dalhousie services, and alumni-owned businesses.

Learn more and **sign-up for free** today!

Class of 1973

**TOP ROW:** Jal Hosein, Syd McKnight, Derek Yeadon, Tony Jong, Ed Phillips, Dave Keating, Fred Carpenter (invisible person behind him is Brian Wheelock), John Carson, Ken Sutherland, Lonzel Button, Rod Bird, Dave Young, Jim Sloan, John Franklin (just behind Jim), Angus Gardner, Ewart Morse, John Keddy, Alf Bent;

**BOTTOM ROW:** Murray McQuigge, Paul Doane, Tony Yee Young, Luella Smith, Rollie Chiasson, Sylvia Simpson, Tony Wade, Pat McKenna Smith, Bill Barton, Bill Macgillivray behind Bill Barton, Dennis Bowie, George Ferrier.
Class of 2017
Top row: Cinera States, Erin Maguire, Meghan (MacDonald) Bourget, Carly (Langley) McLellan, Alyssa Roy, Margaret Sheridan, Mariissa LeBlanc, Ellen MacDonald
Middle row: Leo Fares (class of 2016), Martina De Sousa, Jaclyn Ferris, Kate Curtis, Tommy Brothers, Emily Fraser
Bottom row: John Wright, Sean Hurley, Ericka Leck, Amy Gough, Morgan MacDonald

MD 1974 Pre-Internship
The class of 1974 (Pre-Internship) held its 48th reunion at the Algonquin Hotel in St. Andrews by the Sea this September. Thirty-one classmates had a chance to connect and mingle.

Update from Dr. Art Zilbert: “There were some classmates who have not seen each other since our graduation in 1974. We are planning our 50th in September 2024. If you read this and are not on our contact list, drop me a note at arthurzilbert@gmail.com.”

MD 1966
The class of 1966 held its 56th reunion at Crowne Plaza hotel in Fredericton, days before Hurricane Fiona hit the Maritimes. Fifteen classmates and their partners gathered to celebrate.

Update from Dr. Garth Christie: “The academic program under chairman Ross Mackenzie featured talks on China, the current health care crisis, growing up in Fredericton, and insights into the careers of two of our members. A significant donation will be forwarded to the DMAA office to be added to our Class of ’66 North of 60 Bursary. We have established a very strong bond of friendship among a core group of classmates and their partners and look forward to meeting in Wolfville in 2023.”

MD 1972
The class of 1972 celebrated its 50th Reunion at the Inverary Inn in Baddeck in September. Forty-five people, including 25 class members, enjoyed a memorable weekend together.

Update from Dr. Ian MacDonald: “Everyone present expressed great satisfaction and pleasure in their many years of medical practice. The class also made a strong commitment for ongoing support for our MD Class of 1972 Health Education Endowment. This fund has already assisted 24 fourth year medical students to have a medical and cultural experiences in developing countries.”

MD 1973
The class of 1973 met at the Algonquin Hotel in St. Andrews-by-the-Sea to kick-off their 50th year.

Update from Dr. Alfred Bent: “This reunion was held during our 50th year mostly to get everyone together after a tough couple of years. Several us plan to attend the Dal Med event in October 2023 at which time our class will be the 50th year reunion class of record and I will make an effort to get as many people out as we can.”
## 2023 Reunions

Plans are already underway for many 2023 reunions. If you are celebrating a milestone reunion (grad years ending in 3 and 8), reach out to medical.alumni@dal.ca and we can help support your event!

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## Leave a Lasting Mark for the Next Generation, Together

Whether you’re celebrating a milestone anniversary, coming together for a reunion or just want to pay it forward, we can help make it happen.

Find out more about Class Giving Projects at 902.494.6862 or dalhousie.fund@dal.ca.

giving.dal.ca