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ABOUT THE COVER
The cover photo appears courtesy of medical alumnus, Fred MacInnes ’58, who, in his retirement from Pathology at the Mayo Clinic, serves as Coordinating Pathologist with the Blantyre Malaria Project in Blantyre, Malawi. When he is not bringing smiles to the endearing faces of these Malawi children or training Malawian, British and American medical professionals in the study and treatment of cerebral malaria, Fred can be found farming asparagus in beautiful Pictou County, N.S. His perspective on Global Health is included in our cover story, “Going Global”.

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THE TIDE OF CHANGE

This will be my final editorial for VoxMeDal. If it seems like just last issue that I took over as editor; you are quite perceptive. I agreed to assume the position to help this publication over the transition to an electronic version. However, I planned from the outset that my tenure would be a short one as I have been arranging a sabbatical for several years.

A sabbatical is an interesting academic tradition. The word derives from Greek and Hebrew antecedents and carries the connotation of a period of “rest”. While it refers to the seventh day in its form as “Sabbath”, it has been traditional in academic circles to take a year in every seven for self development. Contemplation, assessment and renewal are integral parts of the process, which is really about change. “Rest” does not seem to figure much in most academic sabbatical plans, unless you believe that “change is as good as a rest”.

Change is a particularly apt theme for this edition of your alumni magazine. Your medical alma mater is in the throes of sweeping evolution. Almost no department of the medical school is unaffected by the uncertainty that accompanies such wide ranging change. New labs and research centres are being established. We are on the verge of a large addition to the infrastructure of the medical school in the planned “research village”. Multiple search processes are underway to replace an unprecedented number of leadership positions, right up to the dean’s office.

The tide of change is also affecting your alumni organization. The DMAA is working hard to continue its support of alumni activities: fostering education, supporting students, and facilitating alumni affairs, while trying to develop a new model of funding. Your board of directors and executive have been working hard to guide your organization in the face of drastic changes in our financial model. We remain committed to maintaining our mission while preserving our independence.

I have been a board member for several years now, and I have been continually impressed with the devotion and energy of your leadership. Under the guidance of president Margaret Casey (whose contribution to Dal was recently recognized with an honorary degree) the DMAA has had to re-invent itself. Dr. Casey, along with executive director Dilly MacFarlane, have invested a huge amount of thought and work into the process. It involves a lot of introspection, planning and consultation. However, like a sabbatical, it should pay off in creating a stronger, revitalized organization.

It has been a privilege for me to play a small role in this process. Even though my formal participation will now come to an end, I will always be ready to come to the support of the DMAA. We hope you will as well.

Watch for the Fall/Winter ’04 issue of VoxMeDal coming to you electronically via www.dalmedicalalumni.ca

Send us your current email address today!
On behalf of all Dalhousie Medical Alumni I would like to salute our new colleagues, the Class of 2004. This has been an outstanding class whose members have contributed in significant ways to the culture of the Medical School. The array of talent in music, art, literature and athletics which they have brought to their medical studies has enhanced life for all of us and has underlined the importance of humanities in medical practice. Congratulations to all who received prizes and graduated with distinction and to those who in recognition of outstanding contributions were awarded a Gold or Silver D. Members of this class will represent Dalhousie with remarkable ability and we wish them well as they begin their residency programs.

The Board would like to extend thanks to interim Dean Harold Cook whose support of the Medical Alumni Association has resulted in greater opportunities for our organization to be involved with the Faculty of Medicine. It is clear that Alumni have great potential to enhance the Faculty in a number of ways. We are at a juncture in the evolution of the Medical School which is both exciting and challenging. Maintaining the goal of excellence in education, research and clinical medicine is the focus of the Faculty and there is a sense of excitement around recent developments in research, the establishment of new Chairs and prestigious recruitments. However, the demands posed by increased enrolment and educational revision are among major challenges facing the new Dean in addition to the problem of overwhelming student debt load. There are areas where the experience of Alumni can be helpful and we are exploring some of the ways in which members can become involved.

Our electronic issue of Vox MeDal was successful and well received and we plan to continue the publication of one on-line version each year. We have also proposed an extra edition next year which will feature current areas of research at Dalhousie.

As outlined elsewhere in this volume, we are now embarked on a project which has the potential to generate enough funds for us to eventually be financially self-sufficient. This is an extremely important development and we are indebted to Executive Director Dilly MacFarlane for her initiative and expertise. In concert with this project is upgrading of our web-site and the establishment of a site dedicated to the revenue raising project.

We owe particular thanks to Dr. Stewart Cameron, out-going Editor of Vox MeDal for his innovative approach to these publications, and the expert knowledge he brought to the electronic version. As always, we owe a debt of gratitude to Dilly MacFarlane and her staff, Lindsay Aziz and Lee Perrin.

As a Board, we are enthusiastic and energized about the progress which has been made towards more productive collaboration with the Faculty. We are contributing to work closely with the DMSS and are supportive of the positions of both DMSS and PARI-MP. We will be in touch with you all as events of the summer and fall develop, and urge you to contact us with any suggestions or comments you may have.

We look forward to seeing many of you during our October reunion celebrations at the Westin Nova Scotian. Meanwhile, enjoy the summer!
THE SHAPE OF THINGS TO COME

Editor’s Note: As we go to press, University President Tom Traves formally announced the five-year appointment of Dr. Harold Cook as Dean of Medicine. Congratulations and best wishes from VoxMeDAL!

This past academic year brought its share of memorable events, some of them extraordinary. In that category were a mega-sized snowstorm and a full-blown hurricane, both of which made the national news, triggered states of emergency and shut down the University. The hurricane caused some disruption to classes and to several research projects. The snowstorm we took in stride.

There was cause for celebration too. We improved our standings as a result of the performance of our medical students and residents in the standardized exams of the Medical Council Canada. Our researchers had success rates in grant competitions that exceeded the national average. Many of our faculty garnered special awards and recognition. New facilities opened in the CRC to accommodate several administrative teams and, in the Tupper Building, a new lab associated with the Brain Repair Centre was commissioned and a superb new lab for Dr. Patrick Lee and his cancer research was also completed.

Then came the challenges. In September we welcomed 90 new students, eight more than last year, and the biggest first-year class in more than a decade. We managed our way through yet another round of budget cuts, and we began to fill a series of top-level administrative vacancies. As the academic year ended, news of Dr. Tom Ward’s resignation as Nova Scotia’s Deputy Minister of Health came our way, and we now await the announcement of his successor.

No one could describe these highlights as dull. Happily, we survived all of them, and I might say, we did so with some grace, even, in some cases, with aplomb.

Apart from vagaries of weather, it’s possible to see in some of these recent happenings the shape of things to come. It’s this future focus that I really want to discuss here. The Faculty of Medicine is facing broad challenges now in funding, leadership, education and infrastructure.

In line with progressive new ideas, we need to secure a broader funding base and search for good leaders to fill an unusually large number of senior administrative positions that are coming vacant. As well, we need to demonstrate good leadership in our dealings with government, and with our

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Notice of Annual General Meeting 2004 and Recognition Luncheon

Friday, October 22nd
12:30 Noon
Westin Nova Scotian Hotel

Tickets $35
Reserved seating only
RSVP before October 15th
(902) 494-8800 or medical.alumni@dal.ca

DMAA President, Margaret Casey ’68 extends a warm invitation to all medical alumni, and friends of the medical school to join the DMAA Board for this 46th annual meeting of the DMAA, and learn more about our work and the people who make it all possible.

Honored guests will include reunion celebrants of the past 60 years, outstanding students and faculty and alumni VIP’s.

Please contact the DMAA Office at (902) 494-8800, or medical.alumni@dal.ca to reserve your seats for these favourite annual events.

Invitation

Dr. Casey also invites you to join reunion classes and local alumni for the DMAA All Class Harbour Tour, Pub Night and Piano Bar at the Westin Nova Scotian on Thursday, October 21st, beginning with the boat tour at 4:00 p.m. and continuing with a pub supper at 6:00.

Musical entertainment will include performances by outstanding student musicians and our own Dugger Roy ’48 “tickling the ivories”. Reservations are required, so contact the DMAA Office for further details, and confirm that you will join in the fun!
Here at the Med Students’ Society, we’re looking forward to an amazing year as we plan to build on the strong foundation laid for us by our predecessors. We’d like to extend great thanks to the ’03-’04 Council and their President, Lori Connors, for the excellent work they did in improving all aspects of student life here at Dal.

We would like to extend the deepest gratitude to the DMAA for their support of student projects and initiatives over the past year. This year we were able to host the Atlantic Medical Students’ Conference (Dal-MUN) to great success in part due to the support of the DMAA. In addition, your support enables the recognition of outstanding graduates with Gold and Silver D’s, supports the Lifestyles in Medicine program, and funds various other student initiatives aimed at expanding the horizons of our educational experience. Your support helps create a better atmosphere for all to learn in: funding for Link and Lounge improvements, in conjunction with your contributions to the Medical Humanities here at Dal, enabled us to produce two beautiful murals in our Lounge which were featured in a recent issue of the CMAJ. We are excited to work with the DMAA in the upcoming year, and to continue this tremendous relationship.

We’re looking forward to great alumni support and attendance at a number of our events next year, so mark these dates in your calendar:
- DMSS Annual Ball and Banquet: November 20, 2004 at the Lord Nelson Hotel
- Euphoria 2005: January 29, 2005 at the Rebecca Cohn Auditorium

Also in the works are a big meet-and-greet between current students and alumni and the annual Charity Auction in the fall. We’d love to see the alumni come out, so we’ll keep you updated on our many events as the details become available—it’s going to be a busy—and amazing—year!

As the official voice of medical students, the DMSS is here to represent their interests and ensure that their education experience is the best it can be. Our major goals for next year are to increase our visibility and presence within the student body, the university, the community through the Everest Project, the medical community through the provincial medical societies, and at the governmental level, through the Canadian Federation of Medical Students. We will continue to support student initiatives, fight differential tuition increases, continue the battle on debt repayment, and strive to increase the number of residency positions offered. This year’s DMSS Executives are committed to improving student life at Dal, and their contagious enthusiasm is sure to permeate each and every medical student we serve.

We’re excited for the upcoming year, and we hope you are, too! If you want to find out more about what’s going on with the DMSS, feel free to email Joey at jcrmcdn@dal.ca. Also, keep checking for our new and improved website (dmss.medicine.dal.ca) coming in the fall.

JOEY & CHRIS

DMSS Council 2004-2005

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<th>Position</th>
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<td>President</td>
<td>Joey McDonald</td>
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<td>Chris Geddes</td>
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<td>Anna Coolen</td>
<td>Class of 2006</td>
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<td>VP Med Ed</td>
<td>Matthew Boyd</td>
<td>Class of 2007</td>
<td>Antigonish, NS</td>
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<td>Treasurer</td>
<td>Thalia Field</td>
<td>Class of 2007</td>
<td>Calgary, AB</td>
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<td>CFMS Jr.</td>
<td>Megan Hiltz</td>
<td>Class of 2007</td>
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<td>Secretary</td>
<td>Jen Durber</td>
<td>Class of 2007</td>
<td>Bridgewater, NS</td>
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<td>Sports Rep</td>
<td>Nathan Urquhart</td>
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<td>Dundee, NS</td>
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<td>Paul Maloney</td>
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<td>Past-President</td>
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Out-going DMSS President, Lori Connors ’05 and In-coming DMSS President, Joey McDonald ’07 shared the pleasant duty of presenting Gold and Silver D’s to outstanding student leaders at the Convocation Gala.
The Professional Association of Residents in the Maritime Provinces (PARI-MP) is happy to announce the creation of a new program devoted specifically to helping resident physicians find practice opportunities in Nova Scotia.

The Maritime Physician Recruitment Initiative (MPRI) program is designed to act as a centralized source that resident physicians can use to confidentially seek out permanent and locum opportunities in Nova Scotia.

Recognizing a communication gap existed in the recruitment of Maritime residents, in 2001 PARI-MP residents and staff tossed around the notion of creating a self-run recruitment initiative aimed at improving information Maritime residents received about practice opportunities.

In early 2002 a proposal detailing the necessity and benefit of a coordinated, resident driven recruitment initiative was submitted to the government officials from the three provinces where PARI-MP residents completed rotations; Nova Scotia, New Brunswick and Prince Edward Island. Thus far, the Nova Scotia Department of Health has fully committed to the project in terms of funding and support.

What is innovative about the MPRI project is that it was designed entirely by residents, for residents. Resident physicians have had a say in designing every aspect of MPRI, from the look and feel of the logo to the colours on the web site. This was done to ensure that MPRI entirely met the unique wants and needs of physicians training in Maritimes.

MPRI provides numerous services to physicians including the main drive behind the project, our interactive Website, www.mpri.ca. Through extensive internal communications activities within PARI-MP, residents have begun to use www.mpri.ca as their main resource for searching for permanent and locum positions.

Residents receive e-mail updates about new opportunities specifically in their field.

Maritime communities have also enjoyed the benefits of increased access to residents, utilizing the MPRI Website to post their vacancies.

Although the focus of the MPRI program is on Maritime residents, MPRI services are available to all former Dalhousie graduates or physicians who are considering practicing in Nova Scotia.

Please feel free to contact me if you have any questions at (902) 473-7367 or jody@parimp.ca.

JODY CROWE, BA, ADIP PR
RECRUITMENT COORDINATOR, PARI-MP
One year ago, in the Summer 2003 issue of *MedAL*, DMAA members were presented with a copy of a Memorandum of Understanding between the DMAA, the Faculty of Medicine and the University. This document described an interim agreement designed to prepare the way for collaborative efforts to improve overall alumni support for the faculty and the university. It also laid out a new funding model for DMAA operations that would see more emphasis on revenue raising by the DMAA.

As we go to print, the DMAA is on the verge of implementing an exciting Marketing Revenue Project that will serve the needs of our members and reduce and recover the cost of producing and distributing VoxMedAL. The concept for this project originated in the DMAA Office, but has been developed by a team of alumni and student volunteers with the advice of faculty and staff. It is based on e-commerce and traditional advertising concepts already successfully at work raising revenue for other Canadian universities.

In effect, the DMAA will use the success of its bi-annual publication along with a new project-based website to recover the costs of its production. Here is how the project will work.

A survey of active alumni will identify general demographic statistics and a list of preferred suppliers required to define the marketing opportunity to potential advertisers. This information will be presented to a target group of businesses who, in return for an advertising fee, will be offered an advertising opportunity in the magazine and a hyperlink to their corporate websites on the new project-based DMAA website.

The official DMAA website (www.alumni.medicine.dal.ca) will continue to house the official and archival documents of the association, annual reports, constitution and bylaws, formal announcements, etc. The new project-based website (www.dalmedicalalumni.ca) will feature the annual electronic issue of MeDAL, along with regular Dean’s Desktop notes describing important, current faculty issues and projects. The new site will also be used by alumni to update contact information; access information on reunions and class projects; register for reunions; and nominate classmates and colleagues for awards. Through this site, alumni will be able to learn more about DMAA-supported projects at the medical school (Medical Humanities, International Health Office, Healthy Living Program, etc.), and access a list of preferred suppliers identified by alumni as sound corporate partners.

The potential for the growth of this revenue program is excellent. However, the DMAA Board supports a modest beginning, aiming first at cost-recovery of the one hard-copy issue of MeDAL (produced in the summer) and the electronic issue (currently distributed in December via DalMedix and the existing DMAA website).

Eventually, the revenue program may be extended to include corporate sponsorship opportunities during annual reunions, and may provide revenue for an additional research-focused issue of VoxMeDAL and other enhanced communications projects that will benefit our members and the students and faculty we are mandated to serve.

This project is the result of our DMAA Board answering the challenge presented to us by the faculty and the university in the Memorandum of Understanding to find a new way of doing business. So far, it appears to be working well for us. There is a definite feel of success about this project which is shared by the alumni, students, faculty and staff who have stepped up to the plate and volunteered to steer it.

Hats off to Drs. Margaret Casey, Denny Johnston, Vonda Hayes of the DMAA Board; to DMSS reps Joey McDonald and Chris Geddes; staff members Charmaine Gaudet and Cindy Bayers of the Communications Office and Susan Spence Wach, Associate Dean of Health Systems and Policy. Our own DMAA Commerce Co-op Workterm Student, Lee Perrin will design and build the new website, implement the survey and report to the board on the progress of the project.

If you have questions or concerns regarding this project, or any other matters relating to DMAA operations, please contact me at the DMAA Office (902) 494-8800 or email me at dilly.macfarlane@dal.ca. It would be great to hear from you anytime!
Innovative research in the Cell Restoration Laboratory will centre on stem cell restoration strategies, with special attention to adult-source stem cells. Stem cells are cells that have the ability to divide for indefinite periods of time and give rise to specialised cells that may replace those that die as a result of aging, disease, or injury. Repairing neuronal circuitry in patients with disorders such as Parkinson’s disease, ALS (Lou Gehrig’s disease), Huntington’s disease, multiple sclerosis, spinal cord injury, and optic nerve injury will be the focus of cell restorative strategies.

Located in the Sir Charles Tupper Medical Building, the lab includes state-of-the-art equipment for stem cell and animal behavioural testing systems, including an electrophysiological imaging module (Multi-photon Microscope). It’s the cornerstone of the “Stem Cells for Brain Repair Project,” which is part of the Brain Repair Centre (BRC), the largest research collaboration in Atlantic Canada.

“The Cell Restoration Laboratory is an important milestone in the unprecedented growth of the life sciences sector in Nova Scotia,” said Dr. Harold Cook, Dean (Interim) of Dalhousie Medical School and host of the official opening. “Through collaboration, Dalhousie and other partners are building new research infrastructure, which enables high calibre research that directly affects the health, economy, and social well-being of the region.”

The official opening included a news conference, ribbon cutting, and tours of the lab. As well, researchers Drs. Steve Barnes (Ophthalmology, Physiology & Biophysics, Director of the Dalhousie Neuroscience Institute); Robert Brownstone (Anatomy & Neurobiology, Neurosurgery, Director of Motor Control Laboratory); David Clarke (Anatomy & Neurobiology, Neurosurgery); Ivar Mendez
(Anatomy & Neurobiology, Head of Neurosurgery, Chair of the Brain Repair Centre); and Harold Robertson (Head of Pharmacology) gave presentations on the work they will do in the new lab.

“The Cell Restoration Laboratory is a world-class resource for the region and for Canada, which will help us bring to reality new innovations in brain repair using stem cell technology,” said Mendez. “The lab will also play a key role in helping us attract and retain the brightest research scientists in this field.”

The Cell Restoration Laboratory was made possible through the collaboration of its funding partners: the Atlantic Canada Opportunities Agency’s (ACOA) Atlantic Innovation Fund contributed $2.1 million to the project; contributions of $1.1 million from the QEII Foundation’s Working Miracles Capital Campaign and $500,000 from the Dalhousie Medical Research Foundation (DMRF) were pivotal in leveraging AIF funding; and Dalhousie University’s Faculty of Medicine provided space for the lab.

“We must consciously raise the bar on self-imposed limitations,” noted Mr. Rod MacLellan, Vice-Chair of the Dalhousie Medical Research Foundation. “We do this by investing in innovation and potential, like what we see at the Brain Repair Centre. Through collaborative funding partnerships, we must seek to recognise and support these kinds of opportunities in our region.”

Researchers at the Cell Restoration Laboratory will build on existing stem cell and molecular biology expertise and enhance the brain repair research cluster in Halifax and Atlantic Canada. The Laboratory complements the existing neural transplantation program, which is unique in Canada and one of only four worldwide. The investigators collaborate closely with laboratories across Canada, the United States, and Europe in search of ways to improve cell survival, safely transplant cells into the brain, and discover new types and sources of cells.

“Building a strong economy and restoring Canada’s role in the world are among the federal government’s top priorities. Investments into world class research, such as the work done by the Brain Repair Centre, not only advance these priorities, but further our ability to improve the lives of Canadians,” said the Honourable Geoff Regan, Minister of Fisheries and Oceans, who represented the Government of Canada at the event.

“It has long been an important role of the QEII Foundation to put into the hands of its medical experts the tools they need to bring change to research, diagnosis, and treatment,” said Ms. Gwen Haliburton, Chair of the QEII Foundation Board of Trustees. “We are honoured to provide our Cell Restoration Lab with a key piece of research equipment—a Multi-photon Microscope, which is considered the gold standard in the work that our medical scientists will carry out.”

We must consciously raise the bar … by investing in innovation and potential.
On May 5th, 2004, the Faculty of Medicine and the Dalhousie Medical Research Foundation recognized these outstanding individuals with Community of Scholars Awards.

Back row (l – r) Mr. Carl Stevens, Award for Professional Excellence; Dr. Andrew Issekutz, Max Foreman Research Prize; Dr. John Ross, Award for Excellence in Medical Education; Dr. Tong-Jun Lin, Award for Excellence in Basic Medical Research; Dr. Arnold Mitnitski, Award for Excellence in Clinical Medical Research.

Front row (l – r) Mr. Wes Robertson, Award for Professional Excellence; Dr. Robert LaRoche, Award for Excellence in Clinical Practice; Her Honour, the Honorable Myra Freeman, Lieutenant Governor of Nova Scotia; His Honour, Lawrence Freeman; and Dr. Alan Purdy, Award for Excellence in Clinical Practice.

HEAD FOR A CURE

My involvement with the medical student Head for a Cure cancer research fundraiser has been an overwhelming experience for me. At first, I was reluctant to say the least about the thoughts of shaving my head bald and after discussing the idea with my wife and daughters, it was decided that I should set a goal to raise $2,000, and if I did, I would shave it bald. With this in mind, I started my campaign with only two weeks to fundraise… I was quickly inundated by the support that I received from family and my colleagues, reaching and surpassing my personal goal in only a few days.

What has this meant to me? Well, it means many things. I am always amazed at our medical students and how they are tireless in not only their studies, but in how much they give back to and support our community. To me personally – well, my oldest daughter Brieanna was so moved by the event that she decided to donate her hair to be made into wigs for the children and me, I was able to contribute a total of $4,375.11 to the cause and that will send many sick children to camp, something that many of us simply take for granted. I have truly been moved by this experience – thank you!

Hi Dilly,
I just received a cheque today for a donation towards the Head for a Cure event. The total amount of my donations is now $4,450.11!!!

Thanks,
Carl
BY JOANNE WARD-JERRETT

If Stan Kutcher (McMaster '79) has his way, Dalhousie Medical School will soon lead the nation as an innovator in global health. “We live in a global village and the promise of globalization has not materialized in the manner that many hoped it would,” says Kutcher, Associate Dean, International Medical Development and Research. “Serious inequalities abound in the world and these inequalities are often played out in health. Most of the world does not enjoy the same health as we do in Canada and in much of that world, Canada can make a great difference in health.”

As Kutcher points out, Dalhousie is in a unique position to contribute to an important role globally that fits into Canada’s international mission as outlined in the Speech From The Throne. As alumni are well aware, the Dalhousie Faculty of Medicine has a long history of international connections, projects and involvements. Less well known, perhaps, is the fact that these international activities are coordinated through our very own International Health Office (IHO), which reports to Dr. Kutcher. In fact, Kutcher, who was appointed to his position by Dean Dr. Noni MacDonald in 2001, holds the first and only Decanal international position at any medical school in Canada.

This is truly leading-edge stuff and we at VoxMeDal wanted to explore the IHO further. To that end, we spoke with faculty, students and alumni who have been involved with global health at Dal, seeking out their stories and gaining their perspectives on the real issues and challenges and why international health should play a bigger role in medical education. We think you’ll find it interesting.

DALHOUSIE’S INTERNATIONAL HEALTH OFFICE RAISES THE BAR

VIEW FROM THE TOP

STAN KUTCHER OPENS UP ABOUT THE IHO AND HIS FIRST THREE YEARS AS ASSOCIATE DEAN OF THE NEW DEPARTMENT

VoxMeDal: Your position with the International Health Office is the first and only Decanal international position at any medical school in Canada. Why do you think that is?

Stan Kutcher: Both Dr. John Ruedy and Dr. Noni MacDonald as Deans of the medical school saw and understood the value of international health to the medical school. It is the way of the future. No school which does not embrace this challenge will be a leader in medicine as the global aspects of medicine will dominate the next half century — especially on the human rights and global security dimensions. So this is a visionary and innovative step.

VM: Do you see a role for Dalhousie in encouraging other Canadian medical schools to take this direction in medical education?

SK: Many other schools are already doing this and although they do not have this at the Decanal level yet, it is in their strategic plans and I would not be surprised to see Decanal positions pop up in other schools in the near future. When the Association of Canadian Medical Colleges (ACMC) meeting was held in Halifax in April, medical students from other schools were polled about what they would put into the modern medical school and international health was in the top three.

VM: As Associate Dean and head of the IHO, what do you see as being your most important role?

SK: To internationalize the faculty and move Dalhousie into the international arena. We can accomplish this by bringing more international linkages (including students and faculty) to Dal and by helping individuals and departments develop international projects. Most importantly, we want to help our medical students and residents have the experience and understanding of global health by introducing new curriculum and elective experiences abroad. We now need to really grow the undergraduate activities, begin the postgraduate activities and encourage departments to develop their own international programs (as Psychiatry and Pediatrics are doing).

VM: What kind of reaction do you find coming from students, faculty and alumni with respect to the emphasis that is being placed on global health at the medical school?

SK: We’ve had great positive response from the students and from many of the faculty. Admittedly, there has been some negative response, mostly from faculty who do not understand the importance of global health yet. I expect that to change as they see the value of the internationalization of the school and its activities. Dalhousie has an important role to play in moving towards the realization of global health. This will be good for all of us. In addition, Dalhousie will benefit greatly from the interaction of international health professionals.

VM: What do you see as the greatest challenge for you and the IHO in the coming years?

SK: Our biggest challenge is to have international health recognized as a priority within the faculty and within the university. Once that has happened, we are off to the races. We have done so much with so little in such a short time that I think we have already proven ourselves. I really expect that the faculty and the university will soon prioritize international work just as the University of Toronto, Harvard, Johns Hopkins, and other medical schools have done.
Global Snapshot
Destination: Malawi

AS TOLD BY: FRED MACINNES ’58

Pathologist Fred MacInnes ’58 may be officially retired, but he still finds time to run his asparagus farm in Pictou County, Nova Scotia, while also volunteering each year for six weeks to three months for the Blantyre Malaria Project in Blantyre, Malawi, a journey he has made for the last eight years. “The terrible living conditions and how Malawians deal with them are lessons we all should experience,” he says. “They put so much in context when one returns to the affluence and consumption of North America.” Here he describes the project and the valuable life lessons it offers to medical students and residents.

International health has always been an interest of mine, so when the opportunity came up to work as the Coordinating Pathologist with the Blantyre Malaria Project in Malawi, I just jumped at the opportunity. The project, among other things, operates a ward at Queen Elizabeth Central Hospital in Blantyre for the treatment and study of cerebral malaria in children. This is a severe form of the disease which usually quickly renders the children comatose and has a mortality rate of approximately 20 percent. The Project operates January through June (i.e. the rainy season) when mosquitoes are out and malaria rampant.

In addition to the study of cerebral malaria, the Project trains Malawian health care professionals such as nurses, lab technicians, medical students, and PhD candidates. This is a very important, if not the most important, part of the Project.

Malawi (population: 10 million) is the 5th or 6th poorest country in the world. HIV prevalence is difficult to accurately quantify because of the weak public health infrastructure, but it is approximately 38 to 40 percent of the general population and about 80 percent in the QECH wards.

We have a lot of students from the United States and Britain and the experience really turns them around. They see first-hand the devastation, the poverty, the lack of supplies – it’s so different from what they’re used to. Money and material possessions are simply not an issue in a country like Malawi. Yet, despite it all, Malawians are the most gracious and dignified people. You see a lot more smiling there than you do here!

Our students rotate right in the hospitals so they get an excellent grounding. It really opens their eyes and minds. You get very used to people dying around you day and night. The average life expectancy is only 38 years and there’s a 20 percent mortality rate. Most families will have eight kids and expect to lose at least one or two of them. All the same, Malawi mothers are the best mothers in the world. They never leave their children and when they are in hospital they stay by their bedside 24 hours a day until they get better.

For me, the greatest reward is meeting local people who have been trained to do what we are doing there. Over half our doctors are now from Malawi, having completed their training in the US and Canada. My boss is working herself out of a job and this is a good thing! □
AS TOLD BY: ANITA MOUNTAIN ’04
A freshly minted MD (she graduated from Dalhousie Medical School this year), Anita Mountain starts her residency in Physical Medicine and Rehabilitation at Dalhousie this summer. She recently participated in an International Health elective at a healthcare project in Port au Prince, Haiti. Here she describes some of her experiences.

During this past January I had the unique opportunity to be a member of a New Brunswick-initiated healthcare team on their second volunteer project to Port au Prince, Haiti.

This team consisted of 30 people in total including doctors, nurses, OTs, PTs, SLP, a massage therapist, several support workers and 3 students—myself and 2 nursing students. Our team was lead by Dr. Colleen O’Connell who is a physiatrist and currently works at the Stan Cassidy Center for Rehabilitation in Fredericton, NB.

I initially found out about this opportunity through an article Dr. O’Connell had written and given my interest in rehabilitation medicine, the opportunity to help those with disabilities in a developing country was the incentive I needed to prompt action on my interest in international health.

Haiti is a poor country with greater than 80% of the population living below the poverty line. There are areas of this country that are as beautiful and breathtaking as any tropical destination, however the lack of infrastructure and political instability has lead to scenes of incredible poverty and mounds of garbage.

Our team was part of the international initiative Healing Hands for Haiti which is a non-profit, non-governmental organization, dedicated to providing quality rehabilitation services to disabled adults and children in Haiti.

Our team part of the international initiative Healing Hands for Haiti which is a non-profit, non-governmental organization, dedicated to providing quality rehabilitation services to disabled adults and children in Haiti.

While in Haiti our team provided hands-on interdisciplinary care to approximately 400 children and adults in clinics, orphanages and the abandoned children ward of the General Hospital.

Haiti currently has no national rehabilitation services or support of any type for people or families with disabilities. A disabled child is a financial burden that most families cannot bear—as a result many of these children end up in orphanages.

Our main base of operations in Haiti was a small understaffed, under-equipped clinic - Clinic Kay Kapab. The patients we saw were disabled children and adults with amputations, cerebral palsy, stroke, spinal cord injuries, leprosy, polio and many other diseases.

Teams from all over the world visit on volunteer missions to help provide treatments at this clinic but also more importantly to provide education to the student rehabilitation technicians and nurses on how to provide appropriate medical care, physical, occupational, and speech therapy to their disabled patients. The students also learn how to fabricate and fit prosthetic limbs for those with amputations.

The rehabilitation technician training program ensures follow-through when a team is not in Haiti and provides a supply of trained workers who will be the most important resource of any future sustainable national rehabilitation program.

From this experience, my first foray into international health, I learned many things. Aside from a greater appreciation of the importance of national healthcare services, infrastructure, and public health, —the things we take for granted in Canada—and the challenges of cross-cultural communication, I also gained an appreciation of the necessity of working within cultural norms and values to empower and provide people with the tools and knowledge necessary to attempt to make change.

One of the rewarding things about an international elective is knowing that the skills you have gained through medical school are truly helping people who may otherwise not have access to medical care. The experience and impact that you can make as a fourth year medical student during three weeks in a developing country versus three weeks at a Canadian hospital seems exponential. 

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IHO Factoid

The IHO hosted its first annual Rich Man/Poor Man fundraising dinner for international health education programs on March 25, 2004 to raise needed funds to send students all over the world. The dinner also honored the commitment of 14 Dalhousie faculty members — three of whom are former Deans — who have agreed to donate $1000 per year over five years, totaling $70,000 in support of international health education programs for medical students. They will receive a named award in international health.
Squeezing in a phone interview between classes, Chloe McAllister is one busy medical student. Aside from her first-year courses, she has thrown herself into multiple voluntary positions with a particular emphasis on international health. And while it’s a little soon to be thinking about a specialty, Chloe already knows that whatever career path she chooses, international health will be an important component.

“International health is such a new thing — at least talking about it is new,” says Chloe, who prefers to refer to it as global health. “The idea of global health broadens the picture beyond simply going abroad to do development work. That is a large part of it but it’s not everything. Global health also includes cross-cultural relationships within Canada, encompassing cultural diversity and our health care system and understanding the differences among our many communities who seek health care.”

In one short year Chloe already has a good grounding in global health issues, thanks in large part to her position as International Health Liaison for the medical school. An elected position, the International Health Liaison is one of two students who represent Dalhousie on the International Health Program Committee of the Canadian Federation of Medical Students. The group meets twice a year.

Always thinking ahead, Chloe plans to continue with her interest in global health. “I think surgery would be a good specialty for me,” she says. “It’s a skill that lends itself well to international work. You can go into a country for a week, perform dozens of surgeries and fly out back to your regular practice.”

Stay tuned!

THE ROLE OF THE MEDICAL EDUCATOR

FACULTY MEMBER DR. COLLEEN O’CONNELL IS COMMITTED TO INTEGRATING INTERNATIONAL HEALTH INTO THE MED SCHOOL EXPERIENCE

Physiatrist by training, Colleen O’Connell [ALMA MATER?] works at the Stan Cassidy Center for Rehabilitation in Fredericton, NB. She has been involved in multiple international health projects in developing countries around the world, since she first caught the bug at the tender age of 18, when she had the opportunity to volunteer at a medical clinic in Kenya. That experience, she says, helped her “to look beyond our borders and recognize our responsibility in ensuring access to health care throughout the world.” As a member of the Faculty of Medicine, Dr. O’Connell has inspired countless students to recognize the value of global health by encouraging them to participate in international electives or to learn more about Canadian foreign policy and international health issues and development projects. She has also taken medical students, nursing students and residents on projects she has conducted and has assisted many students in setting up international electives. In an interview with VoxMeDal, she spoke about the importance of global health studies to the med school curriculum.

VoxMeDal: Why, in your experience, is the field of international health important to medical education?

Colleen O’Connell: Health care professionals should have the opportunity to experience the challenges and successes in delivering health care in areas different than our own; learning new approaches to old problems, witnessing the devastation that poverty, conflict, and disaster reap on the health of people, and appreciating the link between health and economic survival. We need to understand how global actions impact on the day to day lives of people we otherwise may never meet. Medical professionals need to see and live the reality of how most of the world lives — both so we can learn and be better prepared to serve our own communities and our global neighbors.

VM: What kind of international health projects (particularly those where you have acted in a mentoring role) do you find to be the most rewarding?

COC: I believe the most rewarding are those where one has the opportunity to meet and spend time with local health care workers and community members while participating in sustainable programs. Students who have the chance to be involved in the planning process and evaluation of development initiatives will learn more about the principles of sustainable development. Working directly with patients will always leave lasting impressions, and the best project would ideally incorporate a bit of all the above. The key to improving health and quality of life in any developing community is through education—we must find sustainable ways to train the teachers by providing assistance in developing programs for trainers, medical schools, therapy schools and so on. This is an important area for groups like the International Health Office. I know it is cliché, but if you give a man a fish he’ll eat for the day, but if you teach him to fish, he’ll eat forever.

VM: How would you like to see international health incorporated in a formal way into the med school curriculum?

COC: I would be beside myself if: a) a few sessions of formal lecture/workshops were incorporated into the mandatory curriculum, potentially in Community Medicine and b) during clerkship there were a distinct international elective where students can work with an ongoing project in an international setting or develop their own project in conjunction with an NGO in the field.

continued on page 32
‘A CULTURE OF ADVANCEMENT’
Dal Medical School embraces the big picture

BY JOANNE WARD-JERRETT

There’s a new buzz word in the medical school lexicon — advancement.
“We need to create a culture of advancement to support medical education,” says Dilly MacFarlane, Executive Director of the Dalhousie Medical Alumni Association (DMAA).

“Expectations for development in medical schools have never been greater and there is a corresponding level of interest in private funding. We need to find innovative ways to support those hard-to-fund programs that make a measurable difference to the quality of medical education that our students expect at Dalhousie and to the knowledge generated through our research programs.”

Fresh from this year’s ACMC (Association of Canadian Medical Colleges) meetings, which were held in Halifax at the end of April, MacFarlane is enthusiastic about the future of the medical school and its approach to institutional advancement. As Chair of the ACMC Working Group on Institutional Advancement, which held concurrent meetings with the ACMC meetings, she met with advancement staff from10 major medical schools from coast to coast, under the 2004 theme of Best Practices & Leadership.

Among the attendees was keynote speaker, Dr. John G. Kelton, Dean of Health Sciences at McMaster University, whose medical school recently obtained a $105 million gift from businessman and philanthropist Michael G. deGrote. “This is the largest private gift in the history of Canadian institutional advancement,” says MacFarlane. “We were all fascinated to learn about the leadership role taken by Dean Kelton in facilitating a donation of this magnitude, and imagined how our team at Dalhousie might perform, presented with the same opportunity.”

With major presentations given by advancement staff from Canadian medical schools such as the University of Toronto, the University of Alberta and the University of Ottawa, as well as a fundraising forum led by consulting firm Ketchum Canada, ACMC participants were given plenty of food for thought, with a large dollop of inspiration.

“After the meetings, Dean Howard Cook met with Dr. Casey and I to discuss the ways in which we at Dalhousie might implement some of the ideas that came up during discussions,” says MacFarlane. “We have the full support of the Dean’s office in regard to advancement, and look forward to moving ahead in step with the faculty’s objectives.”

Dean Cook agrees that the time is right to move ahead with advancement initiatives.

“Moderate-sized and small-scale help, thoughtfully provided, can be amazingly effective,” he wrote in a recent newsletter. “The recruitment of donors, big and small, is certainly one area on which we need to focus more attention.” As Dean Cook puts it, we need to use novel approaches to meet tomorrow’s demands on our academic environment. “I am confident that we will rise to the challenge, fortified by the unity of purpose we bring to our individual efforts: namely the unending quest for excellence in the service of medicine,” he writes.

Meanwhile, in taking those first steps toward the creation of a culture of advancement at Dalhousie, the DMAA will continue to work closely with both the fundraising professionals of the University’s External Relations team and dedicated faculty leaders to support fundraising efforts.

“The DMAA is opening doors to a new way of doing business and new ways of fundraising, thus maximizing alumni support for the medical school,” says MacFarlane. “These are exciting times.” □
Each year, the Dalhousie Medical Alumni Association names an Honorary President for outstanding service to the alma mater and the alumni, and an Alumnus/a of the Year, recognizing outstanding contribution to the profession.

NEW DMAA AWARD ESTABLISHED
Young Dalhousie medical graduates are seen every day to be making their mark professionally. Because the Awards Committee of the DMAA Board would like to see these young achievers recognized by our members, a new award has been established. The broad intent of The DMAA Young Alumnus/a Award is to recognize graduates in the first two decades of their medical careers who have already attained outstanding records in the wide spectrum of medical practice.

Three important aspects of high quality medical practice are good patient care, by caring about and for that patient, inquisitive pursuit of clinical investigation of disease, teaching Medical Practices to others in the same community and to medical students, (e.g. preceptorships).

Integral to excellent practice is real empathy for each patient’s illness, and its multiple effects on them and related others. Candidates for the Young Alumnus/Award are role models of good medicine, either as specialists, or family practitioners, especially those with great numbers of patients, who in spite of long and hard work, are still faithful models.

Among your classmates and colleagues, there are probably individuals who should be considered for these awards. The DMAA Board of Directors asks that you nominate a classmate or colleague by completing the form on the reverse and returning it by FAX to (902) 494-2033, or simply email medical.alumni@dal.ca to nominate a classmate or colleague online.

Below is a list of alumni recognized in previous years by the DMAA. Recipients of the 2004 awards will be honored at the DMAA Recognition Luncheon and Annual Meeting 2004 on Friday, October 22nd at 12:30 p.m. at the Westin Nova Scotian Hotel, Halifax, N.S.

Deadline for Nominations is September 1st, 2004. For further information, contact the DMAA Office.

† deceased
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www.alumni.medicine.cal.ca

Setting the record straight...

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What’s New? For the record … (to appear in Class Notes)
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Saluting the Best: Please accept my nominations (s) for DMAA Awards.

☐ Honorary President:
Names (s): ____________________________________________ Class Year MD ______ PGM ______
____________________________________________________ Class Year MD ______ PGM ______

☐ Alumnus of the Year:
Names (s): ____________________________________________ Class Year MD ______ PGM ______
____________________________________________________ Class Year MD ______ PGM ______

☐ DMAA Young Alumnus/a Award:
Names (s): ____________________________________________ Class Year MD ______ PGM ______
____________________________________________________ Class Year MD ______ PGM ______

Contact me for further details at the following phone or email address: __________________________

Someone you are wanting to contact? Let us try to put you in touch....
(Please include name, class year and last known address if possible - we’ll do our best!)
_______________________________________________________________________________________
_______________________________________________________________________________________

A note to the DMAA Board/Editor of Vox MeDAL:
_______________________________________________________________________________________
_______________________________________________________________________________________

Thanks for taking the time to be in touch…it’s always a pleasure to hear from you. Please use the enclosed postage paid reply envelope with our compliments OR fax your Keeping in Touch form to the DMAA Office at (902) 494-2033. Thanks!

16 SPRING/SUMMER 2004
Gold and Silver D’s were awarded to these outstanding student leaders at the Convocation Gala. (l-r) Back row: Dr. Ben Isserlin; Dr. Kannin Osei-Tutu; Dr. Jonathan MacLean; Dr. Shannon Colohan; Dr. Jeremy Moeller; Dr. Adam Power; Dr. Vanessa Cardy; Front row: Dr. Erika Tanner; Dr. Michele Murray; Dr. Megan Miller; Dr. Shannon Hanna; and Dr. Lindsay MacMillan.

Dr. Robert Anderson, a member of the Golden Anniversary Class of ’54 was called upon to toast the Graduates of 2004. Dr. Anderson and his class will celebrate their 50th Anniversary Reunion during DMAA Reunion 2004 activities in October at the Westin Nova Scotian in Halifax.

Dr. Chris Gray ’01, Recipient of the Resident Teaching Award; Dr. Benjamin Schelew ’89, Recipient of the Silver Shovel Award; Dr. Jonathan MacLean and Dr. Megan Miller, Class of 2004 Co-Presidents; and Mr. Carl Stevens, Honorary Classmate Award Recipient are shown here during the Convocation Gala program where these medical alumni awards were presented.
Twenty-one members of the Class of 2004 gathered following the ceremony for this photo of academic award winners. Pictured (l-r) in the Top row: Dr. Laura d’Quinzio, Dr. Brian Clarke, Dr. Ingrid Savasi, Dr. Colin Harris; Dr. Jill Lawless; Dr. Jonathan MacLean; Middle row: Dr. Scott Wotherspoon; Dr. Aylin Alemdar; Dr. Jeremy Moeller; Dr. Brian Moses; Dr. Nicholas Power; Dr. Nancy Clarke; Dr. Peter Hooley; (Interim) Dean Harold Cook; Front row: Dr. Megan Miller; Dr. Allison Clarke; Dr. Crystal Doyle; Dr. Chad Williams; Dr. George Foussias; Dr. Erika Tanner; Dr. Sara MacDonald; Dr. Janneke Gradstein; Dr. Ben Schelew, Silver Shovel Recipient.

Valedictorian, Dr. Erika Tanner is congratulated following the ceremony by her sister and her fiance. Erika, who thrilled the convocation audience with a farewell vocal performance, will train in Family Medicine at the University of Ottawa.

Former Dean of Medicine, Dr. T.J. “Jock” Murray ’63 and proud father, Dr. A. H. Murray ’70, Dept. of Medicine were pleased to pose with the most recent Murray family medical graduate, Dr. Michele Murray ’04 following the convocation ceremony.
DR. R. O. JONES PRIZE IN PSYCHIATRY
for highest standing in psychiatry during the entire medical program
Nancy Clarke

KIDNEY FOUNDATION OF CANADA DR. ALLAN COHEN MEMORIAL PRIZE IN NEPHROLOGY
for demonstrating the greatest aptitude in clinical nephrology
Brian Moses

LANGE BOOK PRIZE
for high achievement
Shannon Hanna

DR. FRANK G. MACK PRIZE
for showing excellence of care in urological patients
Shannon Hanna

DR. HAROLD ROSS MCKEAN AWARD IN OPHTHALMOLOGY
for demonstrating the highest skills in Ophthalmology
Laura DiQuinzio

DR. J. W. MERRITT PRIZE
for highest standing in surgery in all four years
Scott Wotherspoon

MICHAEL BROTHERS PRIZE IN NEUROSCIENCE
for demonstrating an aptitude in the area of Neuroscience
Aylin Alemdar

NOVA SCOTIA COLLEGE OF FAMILY PHYSICIANS
in recognition of contributions to Undergraduate activities of the Department of Family Medicine
Erika Tanner

COLLEGE OF FAMILY PHYSICIANS OF CANADA STUDENT LEADERSHIP AWARD
Megan Miller

to recognize exemplary medical students who have demonstrated a commitment to, or an interest in, a career in Family Practice

EMERSON AMOS MOFFITT PRIZE.
for excellence in undergraduate research in anaesthesia
Crystal Doyle

DR. CLARA OLDING PRIZE
for highest standing in the clinical years, character and previous scholarship being taken into consideration.
Shannon Hanna

DR. CARL K. PEARLMAN PRIZE IN UROLOGY
for greatest aptitude and interest in urology
Nick Power

POULENC PRIZE
for the highest standing in psychiatry
Shannon Hanna

THE EDWIN F. ROSS PRIZE IN PEDIATRIC SURGERY
for demonstrating an aptitude and interest in pediatric surgical care
Janneke Gradstein

DR. ROBERT F. SCARF AWARD IN EMERGENCY MEDICINE
for outstanding combination of clinical ability, motivation and professionalism in Emergency Medicine
Chad Williams

DR. C. B. STEWART GOLD MEDAL
for the highest standing in the regular medical course
Scott Wotherspoon

DR. J. C. WICKWIRE AWARD
for demonstrating highest competence in patient contact during the four year program
Janneke Gradstein

GRADUATION WITH DISTINCTION
Awarded to students, who have, on graduation, reached a high standard set by the Faculty of Medicine.
Scott Wotherspoon
Ingrid Savasi
Andrew Barker
Sara MacDonald
Janneke Gradstein

Nancy Clarke
Ellen Goldbloom
Shannon Hanna
Brian Clarke
Anita Mountain

These university and faculty VIP’s gathered to celebrate the day with the Class of 2004: University President, Dr. Tom Traves; LLD Laureate, Dr. Margaret Casey; University Chancellor, Dr. Richard Goldbloom; MD04 Class Co-President, Dr. Jonathan MacLean; LLD Laureate, Dr. Nathan Epstein; MD04 Class Co-President, Dr. Megan Miller and Dean of Medicine, Dr. Harold Cook.

Former Dean, T.J. Murray ’63 and Mrs. Kathleen Stewart congratulated Dr. Scott Wotherspoon ’04 on receiving the Dr. C.B. Stewart Gold Medal for highest standing in the regular medical course, along with four other convocation awards.

Proud father, Dr. Alan Goldbloom, Dept. of Pediatrics and grandfather Dr. Richard Goldbloom, University Chancellor were pleased to welcome Dr. Ellen Goldbloom ’04 into the ranks of alumni. Dr. Ellen’s entrance into a pediatric residency at the University of Ottawa represents four generations of the Goldbloom family in pediatrics.
Good evening Honorable Guests, family and friends, and fellow classmates. As I begin, I would like to thank my classmates for bestowing on me the honor of speaking on their behalf; I’m thrilled to be up here and hope that I will be able to communicate to you some of the feelings and experiences that we have shared during the past four years.

Tonight is a very special night. Tonight, as I stand before you, the graduating Class of 2004 from Dalhousie University’s Faculty of Medicine, we celebrate the victories and the failures of the past four years and reflect on our newfound status as doctors. Whoa! Who would have thought? It seems like only yesterday we were anxiously walking up to the Tupper building for that first barbeque of Orientation Week. I remember, I was so scared that I actually walked past the Tupper and circled the block twice before I could muster the courage to go in! What was I afraid of? What were we afraid of that night four years ago: the pressure and workload of becoming a doctor? The vast knowledge we would be expected to gain over the next four years? The stigma associated with being a doctor? Maybe we were afraid of the anticipated wrath of our surgery resident if we accidentally slept through 6am rounds. Regardless, all the smart and well-rounded type A personalities I was about to meet surely didn’t ease my mind. There were so many intimidating factors that night as we walked into the Tupper building and into the start of our medical careers. It’s hard to believe that we have met and overcome many of those challenges and today, have earned our MDs after years of hard work and dedication. Congratulations graduates; you have done well.

Back in Med 1 life was a blast. Sure we were spending hundreds of dollars on textbooks, working long hours in the smelly anatomy lab and trying to figure out why our tutorial leaders wouldn’t actually teach us anything, but once we figured out COPs and communication skills, how to fife and how to stay awake in the sauna-like heat of Theatre D, we were well on our way to becoming doctors. Or at least looking like doctors! We got our pristine white lab coats, our “student doctor” name tags, our blood pressure cuffs, our ophthalmoscopes and otoscopes (mine’s never been used, by the way, in case anyone is looking to buy one), and most importantly, our stethoscopes. We put on our costumes and ventured into the hospital wards experiencing and absorbing as much as we could.

Those first years were challenging. Through tutorial groups, lectures, labs and electives we began to figure out what to learn, how to learn it, and how to retain it. With so much information thrown our way so quickly, many small study groups began to form and people started to work together. There was always
one to ask for help in anatomy or histology lab. Thank goodness, because I couldn’t tell the lung from the liver on those slides! Soon notes and old exams started to circulate through the class. Sometimes even exam questions circulated, but we won’t talk about that!

Through school and social events, each of us began to figure out how we fit into the melting pot that was our class. We had come from varied circumstances: some of us right from undergrad and some of us ten years out; some of us from the Maritimes, some of us from other provinces across Canada, and some of us and our families from Malaysia, India, Ghana or Trinidad. Some of us had PhDs and Masters, some of us had backgrounds in Neuroscience, Biochemistry or Physiology and some of us had degrees in English or Music. Regardless of who we were or where we came from, together we became the Class of 2004. We started to get to know each other through retro parties, monthly buddy dinners and volunteer groups such as Food for Thought, the Foot Clinic, Student Wellness in Medicine, Students for Choice, Orientation Committee, and Society. Many of us participated in intramural sports including basketball, soccer, hockey, and the infamous squash ladder, while other class members took up drinking as a sport, though I won’t mention any names! We got involved in art, storytelling, and choir and traveled to Med Games, Dal Mun, and Los Angeles, California. We even replaced the floor good call karma, and those of us with scheme of call, there are those of us with hours of the morning. In the whole QEII and wandering back to the cell-like about the cold, desolate call rooms of the other than to commiserate with you all more time to comment on clerkship horrible licensing exams. I will take no of clerkship, CaRMS, interviews, and the bathroom, but the stresses and strains inducing us to raise our hands if we had to go exams of Med 1 and 2 and Alberta surviving orientation week and Mo, the we have gone through together: not only the familiar faces of our classmates, we sit here tonight and look around at reminisce and form new memories. As we have come together again as a class to split into smaller groups. This past week we have come together again as a class to reminisce and form new memories. As we sit here tonight and look around at the familiar faces of our classmates, we can’t help but smile to remember all that we have gone through together: not only surviving orientation week and Mo, the exams of Med 1 and 2 and Alberta teaching us to raise our hands if we had to go the bathroom, but the stresses and strains of clerkship, CaRMS, interviews, and the horrible licensing exams. I will take no more time to comment on clerkship rather than to commiserate with you all about the cold, desolate call rooms of the QEII and wandering back to the cell-like chambers in the psychiatry ward of Abbey Lane during the dark, quiet, wee hours of the morning. In the whole scheme of call, there are those of us with good call karma, and those of us with bad. Let’s just say I was never more jealous than to see Lisa McKnight carrying a continued on page 34
A FAMILY AFFAIR

Dr. Sara MacDonald ’04 and Dr. Allan S. MacDonald ’63, Dept. of Surgery

Dr. Kaveri Gupta ’04 and Dr. Yash Gupta, Chemical Engineering

Dr. Hyacinth John ’04 and Dr. Omana John, Psychiatry (SJRH)

Dr. Marissa Joseph ’04 and Dr. Paul Joseph, Radiation Oncology

Dr. Edie Baxter ’04 and Dr. John Baxter, Professor of English

Dr. Andrew Barker ’04 and Dr. David Barker, Anaesthesiology

Dalhousie Vice-President External, Dale Godsoe and Dr. Suzanne Godsoe ’04

Dr. Kevin Christie ’04 and Dr. Garth Christie ’86, OB/GYN, Frederiction, NB

Dr. Joanne Langley, Paediatrics and Dr. Janneke Gradstein ’04

SPRING/SUMMER 2004
There are many models for excellence in medicine, but Dr. Margaret Casey represents the best tradition of the dedicated and effective family physician, committed not only to her patients but also to her community.

Dr. Casey earned her medical degree at Dalhousie in 1968 and has remained actively connected to the University for many years. Throughout her career she has been dedicated to the notion that health care in Canada, and abroad, is everyone’s right. From 1972 to 1997 she lived that ideal strenuously, providing medical services to a neglected part of our community as Director of the Halifax North End Community Health Centre. In the same spirit she has worked actively in the Caribbean region to deliver health care in countries such as Haiti and Saint Lucia.

Dr. Casey has worked closely with medical colleagues in our Faculty of Medicine to advance medical education, perhaps most significantly as committed to developing programs to support the recruitment of minorities from both our aboriginal and indigenous black communities. She has also worked with international medical students to assist them in the adjustment process of studying and living in Canada.

Dr. Casey’s involvement with Dalhousie reaches still further into our community and her profession. Currently she is President of the Dalhousie Medical Alumni Association and she serves as a member of the Advisory Committee for the James Robinson Johnston Chair in Black Canadian Studies. She is also engaged with the College of Physicians and Surgeons of Nova Scotian to introduce a physician achievement review program.

Mr. Chancellor, in recognition of her exemplary professional service, community activism and inspiring contributions to the practice of medicine, I ask you, the name of the Senate, to bestow upon Dr. Margaret Starr Casey the degree of Doctor of Laws, honoris causa.
r. Nathan B. Epstein is one of Canada’s most distinguished psychiatrists with an academic and professional reputation acknowledged throughout North America. Originally from New Waterford, Nova Scotia, he attended Mount Allison University before earning his medical degree from Dalhousie University in 1948. He subsequently continued his medical education at McGill and Columbia universities.

Upon his appointment as Psychiatrist-in-Chief at the Jewish General Hospital in Montreal in 1960, Dr. Epstein developed innovative clinical programs that, for the first time, linked the hospital with various community-based social agencies. In 1967 he joined McMaster University, where, as the Chair of Psychiatry, Associate Dean of Clinical Affairs and Director of a Family Research Program, he initiated collaboration between the University and provincial health services. As a result, mental health services were delivered to under-served or not-served populations in the community. A decade later, he became Chair of the Department of Psychiatry and Human Behavior at Brown University in Providence, Rhode Island, where he continues as Director of Family Research Program and Professor Emeritus.

Dr. Epstein is noted as a pioneer and innovator in the field of family therapy, developing problem-centered systems approaches to family therapy, as well as developing working examples of community-based, psychiatric treatment services. He is considered one of the pioneers of Clinical Family Study throughout the world and has been described as the Father of Family Therapy in Canada.

His record of achievements, awards and publications is distinguished. Notably, he has provided leadership in developing the McMaster System for Investigation of Family Function.

In honour of his outstanding contributions, he was made a Life Fellow of the American Psychiatric Association in 1985 and he was awarded an honorary degree from Guelph University in 1994. One of our most distinguished graduates, Dr. Epstein has been an inspiration to several generations of physicians, psychologists and social workers, and a faithful and very generous supporter of Dalhousie University during his illustrious career.

In recognition of his pioneering work in Family Therapy and his contributions in linking psychiatry and the community for the benefit of humanity, I ask you, Mr. Chancellor, in the name of Senate, to bestow upon Nathan Epstein the degree of Doctor of Laws, *honoris causa*. □
The second CME session was held on the morning of May 4. These two sessions were accredited by the Continuing Medical Education Department at Dalhousie for 6.5 hours of CME credits. The calibre of presentations was deemed to be outstanding, judging from the evaluation forms. It should be noted that these CME sessions were considered a gift from the Class to the local physicians of St. Kitts and Nevis. There was a presentation by one of the local physicians, which was extremely well done. Later that evening, the Governor General hosted a cocktail party at Government House. One of our Classmates, Dr. Ross Myers, who travelled with his bagpipes, piped in the Class as they entered Government House. It was full moon on that night and the outdoor event was highlighted by a delicious menu and a dance performance by a local group of dancers.

The following morning, May 5, the Class travelled by a chartered ferry to the neighbouring island of Nevis, where we were greeted at the ferry dock by the Deputy Governor General and his wife. We were then taken on a tour of historic sites and museums, and culminated the tour with a lavish buffet luncheon at the beautiful botanical gardens. We were joined at this luncheon by the deputy Governor General and his wife, the Deputy Premier of Nevis and his wife, and the Minister of Health of the Nevis Island Administration.

On May 6, the Class was taken on a bus tour around the island of St. Kitts, making stops at a number of strategic and historic sites including the fortress of Brimstone Hill, a UNESCO site. We stopped for lunch at one of the most elegant plantation inns (Ottley’s Plantation), and once more the menu was outstanding.

The final day, May 7, was highlighted by a closing banquet at another famous resort hotel, the Ocean Terrace Inn. This place is famous for its weekly buffet dinner, with a menu that covers just about every West Indian dish. Among the dignitaries who joined us for this closing event were the Governor General, the Deputy Governor General, the prime Minister, the Minister of Health, the Managing Director of the National Bank and some of the local physicians. Background music was provided by local orchestras including a local steel band.

On this occasion a Pachymeter was presented to the Minister of Health for use in the Tertiary Eye Clinic which was a joint project between Dalhousie University, the Government of St. Kitts-Nevis and Alcon Canada Inc. Alcon Canada also made a presentation of some pharmaceuticals to the Minister of Health for the Eye Clinic.

The following day, most of the class departed for their respective homes, after having enjoyed a week filled with fond memories.
Back to Where it All Began

WEDNESDAY, OCTOBER 20

6:30–9:30  Registration/Welcome Reception
Harbour Suite A, Westin Nova Scotian

City Sites Then and Now/
Dean's Lunch

THURSDAY, OCTOBER 21

8:15 – 9:15 Top O’ the Morning Boardwalk Stroll
A brief tour of the boardwalk along the Historic Halifax Harbour.

9:15 – 11:15 Medical History Tour of Halifax
Take the Dal Double Decker to sites of medical and historic interest, including commentary by local medical historian.

12:00 – 2:00 Dean’s Luncheon
Harbour Suites, Westin Nova Scotian

2:00 – 4:00 Free Time
See our helpful list of recommended activities in your Welcome Kit upon arrival.

4:00 – 6:00 Harbour Cruise
Embark on the M/V Haligonian for an all class cruise of Halifax Harbour and the beautiful Northwest Arm.

6:30 Pub Supper and Piano Bar
Tradewinds Bar, Westin Nova Scotian

Dalhousie Open House/
Saluting the Best

FRIDAY, OCTOBER 22

9:00 – 11:30 Dalhousie Open House
Transportation to and from the Sir Charles Tupper Bldg. to participate in an Open House – the 1st at Dal in 15 years!

12:30 – 2:30 DMAA Reunion Recognition Luncheon
Medical alumni saluting the best!
Honored guests will include outstanding faculty, students, and alumni VIPs.

2:30 – 5:00 Free Time
See our helpful list of recommended activities in your Welcome Kit upon arrival.

5:00 All Class Cocktail Reception
Harbour Suites, Westin Nova Scotian

6:00 Private Class Dinners
Westin Nova Scotian/Local Restaurants
(Details at registration)
Classmates toast present company and absent friends.

Off and Running!

SATURDAY, OCTOBER 23

8:00 – 10:00 All Class Coffee Party
Tradewinds Bar, Westin Nova Scotian

9:00-5:00 Sites Along the Shore (Day trip to Lunenburg, Peggy’s Cove)
Meet in Westin Lobby – bring cozy sweaters and cameras!

Dinner on Your Own
Choose from a list of highly-recommended local dining establishments.

9:00 Nightcaps/Evening Brandy and Liqueur
Eve’s, Westin Nova Scotian

Fond Farewells

SUNDAY, OCTOBER 24

11:00–2:00 Brunch at your Leisure
Elements, Westin Nova Scotian
**Count me in! Please register me for the following events:**

<table>
<thead>
<tr>
<th>Event Description</th>
<th># in party</th>
<th>Amount</th>
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<tbody>
<tr>
<td><strong>WEDNESDAY, OCTOBER 20 – Back to Where it All Began</strong></td>
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<tr>
<td>6:30 - 9:30 Registration/Welcome Reception</td>
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<td>Cash Bar</td>
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<tr>
<td><strong>THURSDAY, OCTOBER 21 – City Sites Now and Then/Saluting the Best</strong></td>
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<tr>
<td>8:15 - 9:15 Top o’ the Mornin’ Boardwalk Stroll</td>
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<td>9:15 - 11:15 Medical History Double Decker Tour of Halifax</td>
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<td>12:00 - 2:00 Dean’s Luncheon</td>
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<td>4:00 - 6:00 Harbour Cruise aboard the M.V. Haligonian</td>
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<td>6:30 Pub Supper and Piano Bar</td>
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<tr>
<td><strong>FRIDAY, OCTOBER 22 – Dalhousie Open House and Dean’s Lunch</strong></td>
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<tr>
<td>9:00 - 11:30 Dalhousie University Open House</td>
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<tr>
<td>12:30 - 2:30 DMAA Reunion Recognition Luncheon</td>
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<td>5:00 All Class Cocktail Reception</td>
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<tr>
<td>6:00 Private Class Dinners</td>
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<td><strong>SATURDAY, OCTOBER 23 – Off and Running!</strong></td>
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<tr>
<td>8:00 - 10:00 All Class Coffee Party</td>
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<td>Compliments of the DMAA</td>
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<tr>
<td>9:00 - 5:00 Day trip to Lunenburg, Peggy’s Cove</td>
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<tr>
<td>Dinner on Your Own at Local Halifax Restaurants*</td>
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<tr>
<td>9:00 Nightcaps/Evening Brandy and Liqueurs*</td>
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<tr>
<td><strong>SATURDAY, OCTOBER 23 – Off and Running!</strong></td>
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<tr>
<td>11:00 - 2:00 Brunch at Elements</td>
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*Events with an asterisk require no registration with the DMAA and must be arranged by individuals as required.

| Enclosed is my cheque in Canadian funds, payable to the DMAA for events indicated above. |

**TOTAL**

*It will be great to see everyone together again!*


Medical Humanities

Dr. Ron Stewart was recently appointed the Division of Medical Education’s Director of Medical Humanities. It would be hard to imagine a better fit for Stewart—or for the Medical School. His name in recent years has been inseparably linked with the popular Dalhousie Medical School Chorale that he founded. Until his appointment has medical humanities director, he was Executive Director of Music-in-Medicine within Medical Humanities. In recognition of his work, he received the 2002 Archibald Gold-Headed Cane Award.

Stewart’s credentials in the area of emergency medicine are, of course, well established. He is a member of the departments of Anaesthesia, Emergency Medicine, and Community Health & Epidemiology. Throughout the province, Stewart is widely known as a former Nova Scotia Minister of Health.

Clinician and scientist, teacher, sculptor and humanitarian, Dr. Ivar Mendez was presented with the Gold Headed Cane for service to the Medical Humanities by past-recipient, Dr. Ronald Stewart ’70 at the Convocation Gala.

Bioethics

The Faculty of Medicine is extremely pleased to announce that Dr. Douglas Sinclair has accepted the appointment of Interim Head of the Department of Bioethics, effective July 1, 2004. Dr. Sinclair brings to the position a very strong skill set spanning academic, administrative, research and clinical experience.

Of particular note, Dr. Sinclair has significant leadership experience here at Dalhousie and beyond. He is currently the Associate Dean of Continuing Medical Education for the Faculty of Medicine and Chief of Emergency Medicine at the IWK Health Centre. He also served as Head of Emergency Medicine at Dalhousie, Chief of Emergency Medicine at Capital Health and President of the Canadian Association of Emergency Physicians.

Dr. Sinclair is committed to teaching and research. He has been actively involved in CME teaching and program development and, as Head of Dalhousie’s Department of Emergency Medicine, he led the development of two high quality Emergency Medicine residency programs. As a researcher, he has focused on medical error and program development of home care programs involving emergency patients. He is also currently a member of the Association of Canadian Medical Colleges Working Group on Social Accountability.

Emergency Medicine

John Anthony Ross (UWO’86) has been appointed Chief of the Department of Emergency Medicine at Capital Health and Professor and Head of the Department of Emergency Medicine at Dalhousie University’s Faculty of Medicine. The appointment is effective for an initial five-year term.

A proven leader in clinical and academic environments, Dr. Ross brings broad experience, enthusiasm and a readiness to accept the opportunities and challenges of the positions. He joined what was then Victoria General Hospital in 1990 following his residency in emergency medicine at Queen’s University in Kingston, Ont., and medical school at the University of Western Ontario. Most recently, Dr. Ross was attending staff at the QEII Health Sciences Centre’s emergency department as well as attending staff at the IWK Health Centre’s emergency department.

Prior to this appointment, Dr. Ross held the position of assistant professor in Dalhousie’s Division of Emergency Medicine, Division of Medical Education and Department of Anesthesia. He has been honored several times by his students for teaching excellence, and earlier this month he received the Faculty of Medicine Community of Scholars Award of Excellence in Medical Education. His academic commitment has taken him to the other side of the globe: in the mid-1990’s, he spent a school year at the University of Malaysia Sarawak where he was a lecturer in the Faculty of Medicine and Health Sciences. During part of that year, he was also a consultant physician at Sarawak General Hospital.

Capital Health and Dalhousie University extend thanks to Dr. Mary-Lynn Watson for the leadership she provided as Interim Chief of Emergency Medicine at Capital Health and for her continued commitment to providing high-quality patient care. We also thank Dr. George Kovacs who provided leadership as Interim Head, Department of Emergency Medicine, Dalhousie University.
The Humanities Program is pleased to announce the recipients of the 2004 Summer Studentship Program: **Roetka Gradstein, Class of 2006**, received the Robert Pope Summer Research Studentship for her project entitled “Population Health as Popular Art.” **Dylan Blacquiere, Class of 2007**, received the Gosse Summer Research Studentship for his project “Metaphor in the Narratives of People Who have Recovered from Cancer”, and **Nadia Alam, Class of 2006**, received the Humanities Summer Studentship. Nadia is writing a fictional account of three generations of women as they individually and as a group navigate the shaping of an identity in the space between two disparate cultures; the tension between familial loyalty and obedience, and the dreams of the individual; coping with suffering and depression, especially in light of a culture that refutes the existence of such an illness; the construction and deconstruction of gender roles; and finally, the immigrant experience.

**The Music-in-Medicine** initiative continues to thrive and expand as the largest participant program within the Medical Humanities. With the influx of a wonderful array of musical talent in the Class of ’07 and the returning “veterans” of years II to IV, Music-in-Medicine has never had a better year. In fact, because of the growing interest and the talent within the School, several new groups have formed and contribute to the vibrant environment of Dal Med. We now have several vocal and instrumental performance groups active on a weekly basis:

- **THE DALHOUSSIE MEDICAL SCHOOL CHORALE** - made up of 130 members from all medical student classes, post-graduate students in the basic sciences, alumni, community physicians, faculty members/staff and a core group of faithful community friends of the medical school;
- **THE ULTRASOUNDS** - growing out of the Chorale is a core of approximately 30 first and second-year students performing modern chamber music as well as the occasional classic;
- **THE TestosterTONES** - a sextet of male singers from the Class of ’07 coming from THE ULTRASOUNDS;
- **THE LAB NOTES** - Masters and PhD candidates who specialize in folk songs, particularly of Newfoundland and Labrador;
- **THE DAL MED QUINTET** - an instrumental group of first and second-year women performing the classical repertoire;
- **THE TRIAGE TRIO** - a piano, a flute and a violin played by three first-year medical students.

Highlight of our year is always the annual musical revue, **MUSIC - THE BEST MEDICINE** held at the Cohn Auditorium of the Dalhousie Arts Centre, this year featuring the Lieutenant-Governor’s Reception for patrons and the announcement of the TJ “Jock” Murray Musician-in-Residence- the first of any medical school- anywhere.

Among the most promising developments associated with the Music Initiative and with significant implications for the Humanities include the establishment of the **Margaret and John Savage Endowment for the Medical Humanities**, building on a bequest from their estate.

The annual service of interment and remembrance of those who donated their bodies and tissue for the advancement of the medical sciences is held every June at St. John Vianney church in Sackville. Sponsored by the Department of Anatomy and organised by Pastoral Care of Dalhousie, the Dalhousie Medical School Chorale is privileged to provide leadership in music for the service.


The Medical Humanities salutes and celebrates **The Tupper Concert Band** in its 25th year of making music on the campus and beyond under the committed and dedicated leadership of its conductor, Dr. Bernie Badley. Their Spring concert is a highlight on the medical campus calendar, especially meaningful in this, its silver anniversary year.

The St. Luke’s Day Service held at First Baptist Church on Oxford Street will be held on Sunday, October 24 at 10:30 am. We are pleased to have **The Dalhousie Medical School Chorale** as the choir for this annual service. Dr. Ian Cameron will deliver the annual St. Luke’s Day oration.

**Jeffrey Burns**, Associate Professor of Fine Arts at Mount Allison University has just completed his appointment as Artist-in-Residence in the Medical Humanities Program. This was an extremely successful visit. Along with meeting informally with students, faculty and staff throughout his stay to discuss the interrelationships of art, science and medicine, Jeff gave presentations on his own work as well as on contemporary artists’ explorations of the body and illness. One of the highlights of his visit was the coordination of a 14-hour “Art Marathon” during which 14 medical students from all levels of study conceived and painted two large murals on braced plywood panels. These wonderful pieces can be seen in the Medical Student Lounge, 2nd Floor, Tupper Link. The residency was made possible through a grant from the Canada Council for the Arts.

The 2004 **Dr. TJ Murray Visiting Scholar in Medical is John Walton** (Lord Walton of Detchant). He was formerly consultant neurologist to the Newcastle upon Tyne Hospitals, Professor of Neurology, and Dean of Medicine. He also served as Warden of Green College and he became a Knight Bachelor in 1979 and was awarded a Life Peerage as Lord Walton of Detchant in 1989. He was President of the British Medical Association, The Royal Society of Medicine, the General Medical Council and the World Federation of Neurology. He Chaired the House of Lords Select Committee on Medical Ethics and was for 10 years a member of its Select Committee on Science and Technology. Lord Walton will visit the medical school September 21-23. Watch for details.

The **Upcoming Medical Humanities Autumn Readers Weekend** will take place at Ledgehill, just outside Middleton, October 15-17. This year’s themes are autism, existentialism, medical conditions and physicians. To receive information about the weekend and the required readings, contact Roxy.Pelham@Dal.Ca.

**The Medical Writers’ Roundtable** is an informal meeting of physicians and those who write on medical themes. Meetings are held at the Dalhousie University Club under the direction of Dr. Stephen Workman. If you would like to receive information about upcoming meetings, contact Roxy.Pelham@Dal.Ca.

The **schedules for the Brown Bag Lunch Series** and the **Dalhousie Society for the History of Medicine presentations** will be updated over the summer months and will be available on the humanities website (http://humanities.medicine.dal.ca) early in the Fall.
MEETING THE CHALLENGE ... AND THEN SOME

BY DILLY MACFARLANE
EXECUTIVE DIRECTOR, DMAA

For the past 10 years, graduating classes of the Dal Med School have been invited to participate in the Grad Class Challenge. This highly successful Annual Fund initiative sees grads choose a project that will represent their legacy to their alma mater. They fund their project by making individual gifts designated to the project of their choice. Once the class accepts the challenge, every dollar received from grads before the end of March in the following year is matched dollar for dollar by the University President.

This year we have seen the Class of 2004 step up to the plate in fine style, designating their individual gifts of $100 to the Medical Humanities Theatre A Project. This initiative will see the 37-year-old classroom theatre space renovated to provide a much-needed performance and lecture space for the ever-expanding Music in Medicine Program and other facets of the Medical Humanities focusing on the performing arts. Watch for an update on the MD Class of 2004 Theatre A Project in the December issue of MeDAL, coming to you electronically via the DMAA Website.

Meanwhile, here is breaking news on the MD Class of 2003 Grad Class Challenge! Thanks to an outstanding 40% participation rate and a generous average gift of $100, this class raised approximately $3,500 for the Alumni Photo Gallery Project. Once matched by the University President, their gift doubled to $7,000. Interim Dean Harold Cook then saw fit to provide another matching gift from the Faculty of Medicine, bringing the project total to a neat $10,500! Because the Class of 2003 met the Grad Class Challenge, we proudly announce the official launch of the Alumni Photo Gallery Project. Well done, MD 2003! Read on for more details on this project. You may be able to help us ensure your place in the history of the Dalhousie Medical School.

Preserving Our History
Alumni Photo Gallery Project On its Way to Completion!

TRACEY THORNE
CLASS OF 2007

There is an important initiative underway at the medical school—an initiative that seeks to preserve the history of the medical school and to bring the future together with the past. The Alumni Photo Gallery Project began three years ago with the objective of collecting and publicly displaying the graduation portraits of each of our graduating classes of the past 120 years and we are now closer than ever to that goal.

The Dalhousie Medical School has a rich tradition and a storied history, and no group better represents the excellence, energy, and dedication of our medical school than the graduating class of each year. In their last year of undergraduate training, our next generation of Dal MD’s perfectly reflect what medicine is all about—hope for the future. The aim of the Alumni Photo Gallery Project is to preserve that special time in our graduates’ lives, and at the same time show new students that they are now part of a large and time-honored medical school community.

When the Gallery is in place new students will be able to identify friends, professors, preceptors, and in some cases family members, by picture and class. The Gallery will link new students with those who came before them, and allow our students to develop a sense of their place in the bigger history of the medical school, to begin to appreciate our proud legacy.

The first phase of this project is well underway. Building on the volunteer efforts of a committee representing every facet of the medical school community, this summer will see the Alumni Photo Gallery Project take a giant leap. The APGP Committee joined forces with the Dalhousie Medical School Humanities Program and created a summer studentship to further project development. This summer will be dedicated to identifying missing photographs, acquiring original grad portraits from graduates and community photographers, coordinating the mounting of the composites, and producing a demographic registry in order to help examine the changing face of the Medical School.

A branch of the Link Aesthetics Project, the Photo Gallery Project will see our history honored and the Tupper Link improved by the addition of the smiling faces of the past. The committee aims to have Phase 1, class portraits from 1984 to 2004, collected and on display by January 2005 on the north wall of the Tupper Link. Phase 2 – The Tupper Years 1967 to 1983, and Phase 3 - The Historical Collection will follow.

We welcome any assistance that alumni are able to offer in this first phase of the project. If you graduated within the last twenty years and have an original grad photo or a copy of your class yearbook that you are willing to share, or if you would like to support the project with a financial donation please be in touch! You can contact Tracey via email at tthorne@dal.ca or phone (902) 494-2033. Contributors to this project include the Dalhousie Medical School Class of 2003, the Medical Humanities Program, the Medical Alumni Association, the Medical Student’s Society, Medical Computing and Media Services, and the Dean’s Office, Faculty of Medicine. We thank these groups for their support and look forward to their continued assistance as the realization of the Gallery draws nearer.
THE GAUM LEGACY
A Legacy of Giving, Living a Legacy

Dr. David Gaum, M.D. ’43 knew two important things: what to value in life and how to live every day to the fullest.

He felt blessed to have a career that stirred his passion and a family that made him proud. He loved music and was an avid reader, interests that sustained him later in his life. He quietly dedicated himself to his community and philanthropic interests. David Gaum lost his battle with cancer in December 2003, fittingly surrounded by family and friends.

His philanthropic spirit will thrive at Dalhousie University. Each year, a first-year medical student will benefit from Dr. David Gaum’s generosity through a bursary made possible by an endowment for Dalhousie he created through his estate. It will be called the Dr. David Gaum Memorial Bursary in the Faculty of Medicine.

This gesture reflects the beginning of a strong connection between the Gaum family and Dalhousie University. Two of Dr. Gaum’s brothers also became Dalhousie graduates: Dr. Abraham Gaum, BSc ’30 and MD ’34, and Dr. Cyril Gaum, MD ’48 (Dental Surgery). Several of the next generation followed their uncle’s lead. Of David’s nine nieces and nephews, seven are Dalhousie alumni: Mrs. Judy Chernin Budovitch (’69), Mr. Martin Chernin, Ms. Carol Ann Davidson (’69), Mr. Howard Davidson, Mr. Thomas Gaum (’67) and Dr. Winston Gaum (MD ’65).

Though David specialized in surgery at the Maimonides Medical Centre in New York, he returned to Sydney to join his brother, Abraham, in his medical practice. Together they served the Sydney community for 50 years. (Abraham Gaum was also honoured with a Dalhousie University endowment called the Dr. Abe Gaum Student Assistance Fund.)

During his career, Dr. David Gaum was Chief of Staff and Chief of Surgery for both the Sydney City Hospital and the St. Rita’s Hospital. In his efforts to advance modern surgical techniques in Cape Breton, Dr. Gaum’s focus was in the area of orthopedic surgery. With his brother Abe, he also developed and funded the first dialysis unit in the Sydney City Hospital, which was named in honour of their parents.

Always prepared and willing to give to others, Dr. Gaum (David) was a war veteran. As a Captain in the Medical Corps of the Canadian Armed Forces, he served overseas during World War II for four years.

A physician for 42 years, Dr. Gaum retired in 1985 and started a whole new chapter in his life. After recovering from a heart attack suffered in his sixties, he had a renewed enthusiasm for life and took up skiing, horseback riding and golf for the first time.

While Dr. Gaum resided in Sydney all of his life he had a deep commitment to the State of Israel, where he owned a home for 20 years and welcomed many visiting Canadians – always memorable visits.

His respect for his colleagues and his commitment to his patients brought him many friends, which was never more evident than in his last years, as he battled cancer.

Dr. Gaum’s zest for life inspired everyone he met and will continue to motivate students who benefit from his bursary.
The Global Stage
How Canadian physicians can contribute to international health

BY DES PERNICA ’03
PGY1 EMERGENCY MEDICINE

While it’s not uncommon for medical students to do electives in developing countries, the truth is that few continue with international projects after graduation. This reflects the fact that few medical students and residents are aware that it is possible to have a viable career in international health.

The good news is that the established paradigms are now changing, although for those who don’t reside in Canada’s major centres, there are very few role models for those interested in pursuing global health as a specialty. I myself did not realize that it was really possible for physicians to devote a significant amount of their time to international health issues until I heard Dr. Sam Nutt, a Canadian community-health specialist, speak. She founded War Child Canada, a non-governmental organization dedicated to helping at risk from armed conflict and she basically said, “if I can do it, it must be possible for some of you to do it.” I’ll never forget how I felt upon hearing that and since that time I’ve sought out others who have made global health an integral part of their lives and practices. There are a number of different roles Canadians can play on the global stage, including:

RESEARCHER — Most developing countries know where they need help; they may simply not know what form that help should take. It is a well-known fact that 90% of the world’s research activities and funding go to 10% of the world’s population. There is definitely a need for research applicable to international health problems. This is the direction I see myself going. I am currently investigating risk factors predisposing to pedestrian road traffic injury among Peruvian youth.

ADVOCATE — There are numerous forces at work in today’s world that perpetuate inequities and impede attainment of good health by the majority of the world’s inhabitants. There are countless opportunities for physicians to involve themselves in organizations and activities that work to remedy this situation.

TEACHER/FACILITATOR — Most developing countries do not suffer from a lack of intelligent physicians, but many have few resources with which to train them. There is not a day that goes by that I don’t benefit from having quick, available and ready access to both the Internet and a wealth of e-resources. There will be many opportunities in the future to facilitate the fair distribution of knowledge by liaising with physicians in developing countries and by going abroad to teach students.

For more information on IHO programs, projects and people, contact Katie Orr at korr@dal.ca or phone (902) 494-1517. 

Dr. Colleen O’Connell and “Lazar” in Haiti.
Student Profile: Fiona Kouyoumdjian ‘05

When you get right down to it, compassion is what motivates Fiona Kouyoumdjian. “I’ve always been drawn to tragic histories and how people cope,” says the third-year medical student, who has loads of international health experience, particularly in India and South Africa. “I’ve been interested in international health since childhood. My mother instilled a sense of compassion in me from a very early age.”

A brilliant student (she just returned from a year at Johns Hopkins, where she completed a Masters in Public Health), Fiona plans to put her considerable intellect to work helping the less fortunate in the arena of global health. And that doesn’t mean exclusively that she will be spending all her time in developing countries. “International health is not just about travelling overseas,” she says. “There are lots of opportunities here in Canada, for example in the area of


IHO Factoid

Studies have shown that medical students who have studied international health are more enthusiastic about their medical training, have an understanding about interdisciplinary approaches to health, have increased understanding of the values of diversity and social justice, and physicians with overseas experience are more likely to choose careers in general medicine and rural practices.

Student Profile: Sameen Ahmed ‘06

With parents from Pakistan, Sameen Ahmed has been travelling since she was a child. “I’ve always had a general desire to seek out new things and have a continuing interest in poverty and nutritional interests,” says the second-year medical student who was just about to leave for Africa (Tanzania and Kenya) at time of our interview for a four-week AIDS and international health study tour and field trip.

Sameen’s primary interest, she says, is the manner in which international health and social health are intertwined, something she hopes to explore on her trip to Africa. “We will be getting firsthand exposure to health issues and how they’re dealt with at the local level. There is a parallel with inner city issues here in Canada, especially with respect to resources and supplies.”

Eight students in total (all first and second-year) will participate in the pilot project, which was initiated by the IHO, in partnership with Dal’s International Development Studies Department. They will spend two weeks in each of Kenya and Tanzania, primarily working with NGOs on an observational basis. Students are providing some of the funding for their travels from their own pockets. They have also received funding through the International Health Education Program Committee and the Dalhousie SWIF fund, along with other individual donations.

“I guess that we’re so hungry for experience that it’s just worth it,” says Sameen. “If we didn’t have to pay for it ourselves, there would probably be more than eight of us going.”

Besides, she adds, the group will come up with creative ideas for sharing their experiences with other students and faculty. “I also have an interest in narrative medicine, using such media as stories, photo projects and drama. We affect so many more people by coming back and sharing our experiences in a creative way with them. It’s not like we go and then just keep it to ourselves.”

Ultimately, Sameen says she would like to see international health formally introduced into the curriculum. “We’ve come a long way, but we’re not there yet. It would be great to have some core courses in International health or a specialty toward which interested students could work.”

She’s not alone.

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Student Profile: Fiona Kouyoumdjian ‘05

When you get right down to it, compassion is what motivates Fiona Kouyoumdjian. “I’ve always been drawn to tragic histories and how people cope,” says the third-year medical student, who has loads of international health experience, particularly in India and South Africa. “I’ve been interested in international health since childhood. My mother instilled a sense of compassion in me from a very early age.”

A brilliant student (she just returned from a year at Johns Hopkins, where she completed a Masters in Public Health), Fiona plans to put her considerable intellect to work helping the less fortunate in the arena of global health. And that doesn’t mean exclusively that she will be spending all her time in developing countries. “International health is not just about travelling overseas,” she says. “There are lots of opportunities here in Canada, for example in the area of


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BY DENNY JOHNSTON ’58

I met Kevin Tompkins in September of 1953 when we both started Med School. A nice solid friendship developed. He introduced me to his home turf in Dominion, Cape Breton, and we had several wonderful visits to East Bay where his sister had a cottage. I did my Obstetrical internship in the Sydney City Hospital in the autumn of 1957. His parents Dr “M.G.” and Annie looked after me while I was there.

During the last months of internship we planned an extensive trip to Europe. We were both unattached and wanted to see a bit of the world before settling down. Remember that at this time when one really could see “Europe in five dollars a day.” This, indeed, was the title of one of our travel books.

Starting in Montreal, we boarded a Saguenay terminal ship (a former “liberty ship”) and sailed across the Atlantic, landing in Avonmouth in the Bristol Channel. We booked a train across England to London. Kevin purchased a Ford Anglia, which he would later use in his practice back home, and that was our transportation for the summer.

We toured England, Wales, Ireland, and Scotland, then sailed across the North Sea to Norway. By mail boat we sailed up the Norwegian coast to Aalesund to visit some friends. We slowly worked our way down through Europe, getting as far east as Vienna, South to Baros and across Italy’s Amalphi Drive to Sorrento, north via Rome and Pisa, across the French Riviera to Barcelona, and Madrid. Then north through the Basque Country to France and to England. We returned and sailed home to Halifax from Plymouth on the M/S Maasdam.

We both did General Practice for a year, and then started residencies in Obstetrics and Gynecology, Kevin at Oxford in England and I in Halifax. I resumed a courtship with my future wife, Lalia Dauphinee, and we introduced Kevin to my wife’s only ‘catholic’ girlfriend, Mary Sheppard. The relationship ‘stuck’ and they were married before Lalia and I.

After qualifying in our specialties, Kevin and Mary settled in Welland, Ontario and later Hamilton. Producing 1 son and 3 daughters. Lalia and I settled in Halifax and had 2 sons and a daughter. We maintained our friendship over the years, getting together at some medical meetings and for some downhill skiing in Switzerland and Austria.

Forty-five years later, in mid May 2003, I suggested something that I had always wanted to do and Kevin was very quick to agree! We met in the Toronto Airport, and continued on to Las Vegas. From there we flew 300 miles up the Colorado River to Lee’s Ferry, just below the Glen Canyon dam. We met up with our 30 other travel mates and received our instructions and were assigned to two rafts. For the next 6 days and 5 nights we rafted down the Colorado River through the Grand Canyon for 187 miles, shooting many challenging rapids. The weather was perfect. We slept on shore wherever we happened to be, and didn’t even need tents.

At mile 187 we left the rafts and were taken out of the Canyon by helicopter to the north rim, where a small plane was waiting to take us back to Las Vegas. We had a day to rest there and saw the Cirque de Soleil show “O” before heading back home. We said goodbye in the Toronto Airport.

Just a month later, on June 19th, Kevin and a friend went for a hike in the Niagara Gorge. He lost his footing on the trail and fell several feet into a rocky area, sustaining severe head injuries. After several hours and failed surgery and transfusions, he died.

Goodbye to a dear friend and sympathy to his family.
partners in the University and at our affiliated health care institutions. At the same time we have to explore the possibilities of enhanced inter-professional education and expand our infrastructure to accommodate future growth in research and education.

The fiscal capacity of the Nova Scotia government seems always to be restricted in its ability to support the Faculty of Medicine and to aid Dalhousie University, on which we depend for funding. The reality is that the Faculty of Medicine will soon have to choose whether to shrink its mission, expectations and activities or broaden its funding base and adopt proactive measures to fulfill its mandate. I intend to push the Faculty of Medicine toward the latter course and in this I see a major role for our alumni. What that role will be is hard to define specifically at this point. Some brainstorming with experts will likely be required to flesh out the answer and come up with a plan.

Certainly securing more donors is part of the solution. Beyond that, we need to think in more creative terms. Perhaps we need to consider the fees we charge for services to the local and international communities or look at sponsorships for some of our activities.

Within the Faculty itself, it is imperative that we be judicious in filling a range of top-level administrative positions now becoming vacant. Searches are under way for an associate dean and two department heads, while similar processes for another five department heads are pending. The demographically-driven turnover we are about to see in Faculty leadership is the biggest of its kind in recent times. Keeping to this leadership theme, we must also be ready to quickly reaffirm and re-establish our relationship with the Nova Scotia Department of Health through Dr. Ward’s successor.

On the education front, the team is equipped to carry out our mission. Certainly securing more donors is part of the solution. Beyond that, we need to think in more creative terms. Perhaps we need to consider the fees we charge for services to the local and international communities or look at sponsorship for some of our activities.

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Valedictory

cozy sleeping bag back to her locker looking refreshed and chipper after a full night’s sleep during MTU! Lucky girl.

In the midst of all the learning, studying, practicing and partying, some of our classmates took life to the next level. People got engaged, married, and had babies (some even had two)! That’s a lot to add to a busy medical education and sometimes I wonder, “how did we get through it all?” The answer is clear tonight as I look around the room and see the faces of those people who love us so much. Our family and friends have helped us more than we realize, even those who can’t be with us tonight. From the home-cooked meals and laundry services to the handouts and hugs, these are the people who kept us going when things got rough. For your love, your patience, your phone calls, and your understanding and acceptance of our absence and distraction, we thank you and we want you to know just how much we appreciate all that you have done.

The only thing constant is change and tonight, life is changing. In orientation week, our hardest task was trying to recognize Adam from Nick; tonight we face the daunting task of practicing medicine. Though apprehensive like the night we first entered the Tupper, we should now feel assured of our knowledge, skills and abilities. We can find the answer even when we don’t know it! We have worked hard to get here, we have arrived, and while we don’t know what lies ahead we are not alone. Our families, friends, fellow residents, and palm pilots are here to help us along the way. Have courage, go forth and share your knowledge and yourselves with those who need you.

I’d like to end with a passage that I found while sorting through my mom’s papers. My mother died in January but continues to teach me in weird and wonderful ways. I would like to dedicate this thought from her to you, the Graduating Class of 2004:

Come to the edge
It’s too high.
Come to the edge
We might fall.
Come to the edge
And they came
And he pushed them
And they flew.
FROM THE 40’S

James William (Bill) Moreside ’49 retired from ophthalmology five years ago. He still plays music and enjoys golf. His health is greatly improved following by-pass surgery 2 years ago.

FROM THE 50’S

Benjamin Goldberg ’55 was awarded the Order of Ontario by Lieutenant-Governor Bartleman, Chancellor of the Order on March 31st, 2004. This honor recognized his service to mentally handicapped children and adults over the past 43 years, along with his teaching and research.

Lawrence Green ’59 recently retired from Orthopedic Surgery and now assists on some surgery medical evaluations. He sends best regards to old Clearwater and notes that Ken Gladwin has visited.

FROM THE 60’S

Franklin H. Sim ’65 recently received the Distinguished Mayo Clinician Award, the highest honor a clinician at the Mayo Clinic can receive and is awarded by fellow peers.

Harold Touchie ’67 has been awarded the Dr. Garfield Moffatt Medal (MD ’67). The award is given each year to a New Brunswick physician by the New Brunswick Medical Society. This award is presented to a physician who reflects the outstanding qualities of Dr. Moffatt: excellence of patient care; profound interest in continuing medical education; commitment to the education of patients and other members of the health team; outstanding community leadership and service; a devotion to the quality of family life; and the joy of living.

William Wrixon ’67 Associate Dean of Postgraduate Medical Education at Dalhousie, has just retired from the Faculty of Medicine after a very distinguished career dedicated to excellence in medical education, research and patient care. Bill’s contribution over the years has been significant and his leadership in the area of Postgraduate Education has been enormous. Under his lead, the Postgraduate Education Office (PGE) has developed an excellent and rigorous system for internal program review. He has been instrumental in introducing many new programs to benefit residency training, including Health Law Day, Communication Skills programs, Medical Errors workshops and Faculty/Resident Research Day.

FROM THE 70’S

Tom Barry ’74 Pre is now married to Carolyn O’Connor (MD ’74). With 6 children (3 boys, 3 girls), the oldest is now starting 3rd year medical school at Dal. Both Dr. Barry and Dr. O’Connor teach 3rd and 4th year medical students.

Steven A. Herzig ’74 Pre writes that their daughter, Shoshana (Shani) Herzig, graduated from the New York Medical College in May 2004.

Phil Muirhead ’75 and Wendy Muirhead are still practicing in Musquodoboit Harbour and are happy to announce a new granddaughter, Abigail Catherine Muirhead. The proud parents, Matthew (MD ’98) and Stephanie, and maternal grandparents Grant (MD ’68) and Donna Llewelyn, are ecstatic over the new arrival.

John E. Scouil ’77 is currently in his 2nd term as president of the Canadian Anesthesiologist’s Society.

George M. Burden ’78 was recently appointed regional chairperson of the Atlantic Canada branch of the Explorers Club. This Manhattan-based organization founded by early polar explorers is celebrating its one hundredth anniversary this year.

Frank Ervin’79 passes on best wishes to all of his classmates. He says, “I will never forget the terrific sense of camaraderie that pervaded in our class. I have the feeling that I couldn’t have done it without you all.”

Carol Joyce ’79, writes, “Three years ago in May my husband (Jim Corscadden) and I adopted our daughter Elizabeth from Guatemala. She is now 3 7 years old and is the light of our lives!”.

Ralph Matthews ’79 and wife Beth have been living aboard a 57 foot yacht in Beaumont, TX for the last two years – cruising the Gulf of Mexico. They hope to return to the Maritimes in the next 3 years.

Tom Crawford ’79 is now doing addiction medicine in Sydney, NS.

Bruce Foster Lockhart ’79 is currently married to Susan Cassidy (BN ’75 UNB). They have four children ages 15 - 23: one graduated from UNB, one from Renaissance College, one entering science at UNB, and one entering grade 11.

Friederica Spencer Nechtow ’79, is living in Knoxville, TN and working for the state. Her husband retired last year.
FROM THE 80’S

F.J. (Jim) Muller ’81 is now the Chief Specialist and Metropolitan Head of Pietermaritzburg’s Department of Medicine, KwaZulu/Natal, South Africa.

Karen Joughin ’84 recently moved to Brisbane, Australia and is working on a PhD but still doing some clinical work.

Cathy Johnston ’84 moved to Sackville, NB in July 2000.

Alison Brand ’84 writes to say that she is “expecting baby #2 in early June. Baby #1 (Fiona, age 2 ?) definitely needs the competition. She cannot wait to see you all in 2009!”.


Cathy McManus ’84 and Dave Kells are still happily married with 3 kids, Meaghen, 10, Katie, 8, and Patrick, 3. Dave works with Nesbitt Burns as an Investment Advisor and Cathy is a Professor of Medicine (Cardiology) at Dalhousie and the QEII in Halifax.

Brit Linda Mathisen ’84 has been married for the past 17 years to Dr. Greg Jansen, with whom she also shares an office, living just outside of Bridgewater in Hebbville on “Fancy Lake”. They are the proud parents of a 9 year old daughter “Lisa” who is about to enter grade 5, and a cat named Caddle.

Cathie Slaunwhite ’84, has been with the Canadian Forces since medical school. Currently a senior staff officer to the Surgeon General, she has two children, Michael age 17, Sarah age 15, and lives in Kanata, ON.

Bruce Jones ’86 is doing a general internship at the Aberdeen Hospital in New Glasgow, NS. He has 2 children both university-age and says he “does karate for kicks”. Getting connected by email soon, he will be contacting classmates to say hello.

FROM THE 90’S

Steven Massoeurs ’91, is currently living in Moncton, NB and has a practice and two children, a 7 year old son and 5 year old daughter.

Tony Traboulee ’94 and Valerie have 3 children now: Alex (3), Olivia and Lauren (twins). They are now very busy with babies, travel and M.S. research.

Neena Abraham ’94 left Canada for sunny Texas. She extends an offer of invitation to any of you who are in Houston to look her up! Currently on faculty at Baylor College of Medicine, she is cross-appointed in Health Services Research and Gastroenterology.

Christine Short ’94 writes that she is “still married and very happy”. Three children (ages 8, 5, and 18 months) and not counting on more, she notes “that you never know”! She is currently a full time academic physiatrist with Dalhousie Department of Medicine doing research in spinal cord injury.

Heather Keizer ’94 and Stirling Keizer ’97 have moved to Stratford, ON. Heather is a psychiatrist and Stirling is a family physician. They both teach, and children Katie and Ben are now 7 and 30 months respectively.

Mary MacKenzie ’94 and Mark Watling ’94 are currently living in Hamilton, ON. Mark is working at an anxiety disorders clinic. Mary is completing a fellowship in Investigational New Drugs in Medical Oncology. They are in the process of adopting twin girls from China.

Mary has been a volunteer physician in Zimbabwe. They are currently traveling alphabetically (Argentina, Botswana, China, Dead Sea (Israel/Palestine and Jordan), Equador….On to “F” next).

Sarah Dyalk ’94 is back in Halifax after 6 years away and is now working at the IWK.

Michelle Sapp ’94 has just moved back to Toronto and is getting married August 21.

Brian Patrick Coyle ’94 has 2 children, Hannah and Aidan, 3.5 and 1.5 years respectively, and is living in Minnesota.

Sunita Vohra ’94 has recently moved to Edmonton, AB and is now the proud parent of two boys, Alex and Tate.

Farah Kapur ’94 is now working in Fall River as a family physician and has two daughters aged 7 and 4.

John Sapp ’94 and Heidi Sapp ’94 both came on staff in Halifax two years ago in Pathology and Cardiology. Their three boys, Alexander, Robert and David are now ages 8, 6 and 4.

Kim Miller ’94 will be doing a fellowship in psycho-oncology at Memorial Sloan-Kettering in New York, starting July 1, 2004.

Jeanette Dionne ’94 is married to Matthew Dionne (MD ‘95) and has three kids - Adrian, Joelle and Luke ages 7, 5 and 1 respectively.

David Williamson ’94 now has a 4 year old boy, Matthew and a 9 month old girl, Emma. He would like to proudly proclaim that “Derrick does not live with me”!

Sunita Vohra ’94 and Sean Travers (MD Ottawa ’95) are delighted to announce the birth of their son, Jack Dennis Travers, 10 lbs, 4 oz on June 24th, 2004 in North Bay General Hospital, North Bay, ON. Proud grandparents are Lalia (Dauphinee) Johnston ’62 and Dennis Johnston ’58.

Andrew Trenholm ’96 and his wife Helena Altass are proud to announce the birth of their first child, Ryan Alan Keith on May 21, 2003. Andrew, Helena and family now live in Saint John, NB where Andrew has started practice as an orthopaedic trauma and upper limb surgeon.
Robert Green '96 and wife Tracy (DeWolf) Green celebrated the birth of their first child, Gavin Lewis Henry on April 25, 2003 in Halifax, NS.

Laura-Lea McKay '98 has moved with her husband to the Fredericton area and has taken a position with the new Gibson Health Clinic.

Jacob Pendergrast '99 and Sarah Doig '99 would like to introduce Rowan James Pendergrast! To keep with the modern times we live in, this baby was born with his own webpage ready and waiting for him and welcomes you all to check it out for pics and updates: http://homepage.mac.com/jacob.pendergrast/baby/ Jacob and Sarah would like to thank all of you who have sent positive thoughts throughout the pregnancy—it must have worked!

Michael Shimizu '99 and Kristen Hickey '00 are pleased to announce the birth of daughter Brenna Emi Shimizu on May 16, 2003; a sister for Aidan (2 years).

FROM THE 00’S

Sarah Thompson '00 and Rob Hayes '00 were thrilled to be married on April 18, 2004 in Venice, Florida. They will be completing their residencies in Psychiatry and Dermatology at the University of Toronto in 2005.

Dominic Allain '03, was recently featured in Maclean’s magazine in the Best & Brightest Category. Dominic is a PGY1 in pediatrics at the University of Alberta in Edmonton.

IN MEMORIAM

Harold Jack Davidson '35, died peacefully at his home surrounded by his loving wife and his adoring children. Born in Brooklyn, NY, he graduated from Sydney Academy with distinction and studied medicine at Dalhousie University, where he also excelled as a star athlete – a three letter man. During the Second World War, he served as an orthopedic surgeon in Tahiti, North Africa, France and Italy, achieving the rank of Lt. Colonel. Dr. Davidson furthered his medical studies with post graduate work at Columbia University in New York City and returned to Cape Breton where he began his eye, ear, nose and throat practice. Always a visionary, he was the first to introduce contact lenses to the Maritime provinces. In pursuit of his passion for golf, he founded the Seaview Golf Course in 1950.

Harry Duncan Roberts '36, CM, MD, CM, FRCS(C), LL.D (Hon), “Dr. Harry” to his countless patients, friends and associates – died quietly and peacefully of old age on 5 June 2004 in St. John’s, NL. He was 95, enjoyed a long and productive life of service to others, and leaves cherished memories for all who enjoyed his presence.


Dr. David Gaum '43, passed away December 15, 2003. Born in Sydney, NS, April 19, 1918, Dr. Gaum graduated from Sydney Academy and furthered his studies at Dalhousie University, where he graduated in medicine in 1943.

John Allan MacCormick '43, died peacefully in St. Martha’s Regional Hospital, Antigonish, NS, January 26, 2004. John practiced medicine for 39 years in Antigonish. He also played piano with close friends known as the Velvetones, as recently as last year. He treasured these memories.

Ian Stewart Robb '43, died April 27, 2004 at the Queen Elizabeth II Health Sciences Centre in Halifax, NS. He was 87 years old. Ian spent most of his active medical career working in Europe and the Far East. His unique work took him through the Second World War, the Communist Revolution in China and into the immediate aftermath of the Korean War.

Back in Halifax, in retirement, his spirit of missionary service and devotion to duty did not falter. He became an elder at Fort Massey United Church and continued his missionary work with a special interest in Central America. In 2002, the DMAA honored Dr. Robb with a Certificate of Recognition for his contribution to international medicine.

William L. Morse '45 died on January 8, 2004 as a result of Alzheimer’s disease. He was born in Paradise, NS, April 3, 1923. Bill was educated at Pansy Patch School, King’s Collegiate, King’s College and Dalhousie Medial School, from which he graduated in 1945 with an MDCM, winning the University Medal. Having just turned 22 years of age in April, 1945, he is believed to be the youngest graduate in the history of the Dalhousie Medical School.

Henry Hatch Dent Sterrett Jr. '47, died at his home in McLean, VA at the age of 85. He had Parkinson’s disease.

John F. Boudreau '51, former courtesy staff, Victoria General, Halifax Infirmary, Grace Maternity and Halifax Civic hospitals and Izaak Walton Killam Hospital for Children, died Oct. 18, 2003, aged 81. Up to the time of his death he volunteered in pastoral care at QEII Health Sciences Centre.

James A. Lewin '51, FRCP, a Major during the Korean War, and a former head of Radiology at the Cornwall General Hospital, died January 9, 2004, aged 86. He is survived by 6 children. His daughter Laura said, “He had a lifelong interest in studying and learning.”

Clifford Edwin Jebson '55, passed away Sunday, March 28, 2004, surrounded by his loving family in the Evergreen Home for Special Care, Kentville, NS.
Kent G. Ellis ‘59, died at the Saint John Regional Hospital, Saint John, NB, on Thursday, March 4, 2004. Dr. Ellis, a long-time resident of Cavendish, PEI was the medical doctor in Hunter River and area for 43 years.

Leslie Balazs ‘59, died in March, 2004, in Florida.

Robert E. Munro ‘63, FRCP; a specialist in internal medicine, founder and medical director of the Oshawa-Whitby Nuclear Medicine Clinics, died July 3, 2003, aged 64.

Chandra Roopnarinesingk ‘64, died on September 14, 1992 while she was on holidays in Stewiacke, NS.

Robert Ploughman ‘64, died suddenly on Tuesday, September 10, 2002, at the age of 66. Dr. Ploughman was for many years, a much loved and well respected physician in Port au Choix, NL.

Diane M. Deveau ‘72, 57, Salmon River, NS, passed away June 1, 2004, at home. Born in Yarmouth, NS, she was a medical practitioner having graduated with the Dalhousie MD Class of 1972. She was an avid gardener and flower arranger, and was part of Salmon River Parish as well as La Chorale Acadienne du Sud-West de la Nouvelle-Ecosse.

Joseph D. Johnston ‘72, of Woodstock, NB, passed away on Thursday, December 18, 2003, in Dr. Everett Chalmers Hospital, Fredericton, NB. He was born November 23, 1947, in St. Stephen, NB.

Lindsay E. Myers ‘72, of Antigonish, NS, died of acute myeloid leukemia, Oct. 3, 2003, aged 57. She graduated from Dalhousie with the MD Class of 1972. An FRCP in psychiatry, she was former staff psychiatrist, St. Martha’s Regional Hospital and Community Mental Health Clinic, Antigonish. Close friend and classmate Janet Speight ‘72 stated: “In her life and work, she showed integrity, empathy and intelligence and will be greatly missed by her colleagues, the Dal MD Class of ‘72, patients, friends and family.”

Antony Owusu-Ansah ‘75, passed away in Australia.

Edward Bartlett Grantmyre ‘76, died January 7, 2004 at the age of 72. Born in Sydney, Cape Breton, he spent most of his life in Halifax but remained a Cape Bretoner at heart. He took great pride in his occupation as a pediatric radiologist and was head of the department at the IWK Hospital for Children for over 15 years. His kindness and humor will be missed.

Peter Simon Roberts ‘80, died September 16, 2003.

FACULTY AND FRIENDS

Irwin, Dr. Aden Carleton - 82, Halifax, died recently at home. Born in Meyronne, SK, he was a son of the late Walter and Leota (Carleton) Irwin. After high school graduation he served in the Royal Canadian Air Force, as did his father and brother, Nelson. Following discharge, he studied pre-med at the University of Saskatchewan and received his MD from the University of Toronto in 1952. After post-graduate studies in Edinburgh, London, and the University of Toronto, he served as a medical health officer in Northern Saskatchewan for 13 years. He joined the faculty of medicine at Dalhousie in 1966 and was professor emeritus at the time of his death. Dr. Irwin was a veteran member of the Tupper Band and was honored by the MD Class of 1985 as recipient of the Silver Shovel Award for Teaching Excellence. He is survived by sisters, Mrs. Evelyn Banks, Oxbow, SK; Mrs. Edith Stead, Salmon Arm, BC; 14 nieces and nephews; 17 grandnieces and grandnephews. He was predeceased by a brother and two sisters. Private burial ceremony was held in Gate of Heaven Cemetery, Lower Sackville, NS. E-mail condolences to: 1066@alderwoods.com

Ian David Maxwell, died Saturday, May 22, 2004. Born in Vancouver, BC, he attended the University of British Columbia, Bristol University and University of Edinburgh, obtaining his BSc in 1936 and MB, ChB in 1942. He joined the Canadian Army overseas, serving throughout the fighting in France, Belgium, Holland and Germany as Regimental Medical Officer to the 2nd Canadian Survey Regiment, R.C.A. After the war he returned with his family to his birthplace, where he undertook extensive post-graduate training in internal medicine and pathology, obtaining the FRCP(C) in 1952. From 1953-57 he was Director of Laboratories at the Royal Columbian Hospital in New Westminster, BC. In 1958, he was appointed Associate Professor of Pathology at Dalhousie University and he moved with his family to Nova Scotia. In 1963 he accepted the position of Associate Director of Pathology at the Halifax Infirmary and Consultant in Pathology to the Nova Scotia and Hants Community Hospitals, all of which posts he held until his retirement in 1984. During this period he carried out considerable research in pathology and forensic medicine and published extensively in the medical literature.

Kenneth Edward Scott, MDCM, FRCP, MSc, FSS passed away on Wednesday, January 28, 2004, in Northwood Centre, Halifax, NS after a lengthy illness. Born in Montreal, he moved to Halifax in 1964 and joined the Faculty of Medicine at Dalhousie Medical School. He was also on staff at the former Grace Maternity Hospital in the Neo-Natal Unit. Ken was a former member of the Armdale Yacht Club in Halifax, and was a member of the Society of Friends (Quakers). He loved to hike, sail and cycle.

Katharine Grace Steeves, 85, died on February 20, 2004 after a heroic battle with Parkinson’s disease. Many medical students and residents over the years will remember her generous hospitality. She married soul mate Lea Steeves, a physician and educator in 1942. She is lovingly remembered by her family whose welfare she placed above all else.
Continuing Medical Education at Dalhousie continues to offer a range of learning opportunities for physicians. Among these are community hospital programs (with both traditional and videoconference delivery), the Management Program for Clinical Leaders, Clinical Traineeships, a series of interactive on-line educational modules and an academic detailing service.

For updates on these and other Dalhousie CME activities, visit cme.medicine.dal.ca

Events are in Halifax unless otherwise indicated. Brochures are normally mailed 4 - 6 weeks before the program.

May 29, 2004  Celiac Disease: A Wake-up call  
Contact: Ivy Warren, (902) 883-2059, warreni@region.halifax.ns.ca

Jun 3 - 4, 2004  7th Annual Day in Cardiology (Sydney)  
Contact: Norma Gillis (902) 567-8001

Jun 5, 2004  Technology and Healthcare: What do we want? What do we need?  
Contact: Amanda Mombourquette (902) 422-5823, amombourquette@cpsns.ns.ca  
www.ccpsns.ns.ca

Sep 17 - 18, 2004  3rd Atlantic Canada Stroke Conference  
Contact: Elaine Marsh, (902) 494-1560, elaine.marsh@dal.ca

Dec 2 - 4, 2004  78th Annual Dalhousie Refresher Course  
Contact: Elizabeth Craig, (902) 494-1459, elizabeth.craig@dal.ca

Feb 17 - 19, 2005 (tentative)  31st Annual February Refresher: Emergency Medicine  
Contact: Elaine Marsh, (902) 494-1560, elaine.marsh@dal.ca

Apr 14 -16, 2005  10th Annual Atlantic Canada Cardiovascular Conference  
Contact: Elaine Marsh, (902) 494-1560, elaine.marsh@dal.ca
1939
October 20–24
Westin Nova Scotian
Halifax, NS

1944
October 20–24
Westin Nova Scotian
Halifax, NS
Dr. Gordon Mack
g.mack@ns.sympatico.ca

1949
October 20–24
Westin Nova Scotian
Halifax, NS
Dr. Douglas Keating
T: 902-425-0335

1954
October 20–24
Westin Nova Scotian
Halifax, NS
Dr. Robert Anderson
T: 902-422-9296
anmarbob@hfx.eastlink.ca

1959
October 20–24
Westin Nova Scotian
Halifax, NS
Dr. Don Brown
T: 902-429-7890
donandel@ns.sympatico.ca

1964
Sept. 16
Colony Resort
Kennebunkport, ME
Dr. Lou Simon
T: 506-634-6868
lcsimon@hotmail.com

1966
Sept. 9–11
Keltic Lodge
Ingonish, NS
Barry Yoell
T: 902-542-9240
b.e.yoell@ns.sympatico.ca

1974
Sept 10–12
Oak Island Resort
Western Shore, NS
Dr. Art Zilbert
T: 902-422-3886
Arthur.silbert@ns.sympatico.ca

1979
October 20–24
Westin Nova Scotian
Halifax, NS
Dr. Vance Logan
T: 902-827-5714
vlogan@accesscable.net

1984
July 9–11
Stanley Bridge Resort
Stanley Bridge, PE
Dr. Gregg McLean
T: 506-648-7246
jomark@nbnet.nb.ca

1989
October 20–24
Westin Nova Scotian
Halifax, NS
Dr. Brendan Carr
brendan.carr@dal.ca

Where It’s At!

REUNIONS TO COME IN 2004
“I am constantly impressed by the calibre of research I see here at Dalhousie Medical School,” says Dr. Cook. “Our medical researchers have made truly significant discoveries that have added to the body of scientific knowledge and improved patient care here at home and around the world.”

Among their many achievements, Dalhousie researchers have discovered:
★ a breakthrough that changed the accepted theory about the cause of chronic rejection of heart transplants.
★ the gene that causes a rare eye disease.
★ a link between healthy lifestyle and the prevention of Alzheimer disease.
★ stem cell transplants can replace brain cells killed by Parkinson Disease.
★ muscle cell transplants can repair heart attack damage.
★ a common virus can infect and kill cancer cells.

Dalhousie researchers are working on gene, cell, drug and immune therapies for cancer and heart disease, as well as neurological, genetic and autoimmune diseases. They are developing new-generation vaccines and antibiotics against superbugs. They are working tirelessly to uncover the causes, treatments and cures of disease – and ultimately to prevent disease in the first place.

In 25 years research funding in the Faculty of Medicine has grown from $3 million to $47 million and the way research is done has changed dramatically as well.

“Researchers used to work primarily on their own, with limited facilities at their disposal,” notes Dr. Cook. “Now, we are working in interactive teams across many disciplines, in state-of-the-art facilities built with crucial support from the Dalhousie Medical Research Foundation. This has quickened the pace of discovery and attracted international attention and major program funding.”

Dalhousie Medical Research Foundation has granted more than $17 million for research equipment, salaries and facilities over the past 25 years. These grants and awards have helped launch stellar careers and recruited superstars of science to Dalhousie. Today, the Foundation provides more than $2 million in research funding each year. Their support has helped leverage additional funding from national granting agencies, attracting millions of dollars to this region.

Dr. Harold Cook emphasizes, “Those who support the Foundation are the true superheroes”.

“[We] could not have built our vibrant research community and international stature without the Dalhousie Medical Research Foundation. I am absolutely convinced of that.”

Dr. Harold Cook, Dean of Medicine

Dalhousie Medical Research Foundation is celebrating its 25th Anniversary by recognizing awe-inspiring feats performed by researchers in the Faculty of Medicine at Dalhousie University. With the generous support of our donors, the Foundation is proud to assist in their efforts to treat and cure disability, illness and disease. Dr. Harold Cook, a research scientist in pediatrics and biochemistry for 34 years, now champions the cause of medical research in his new role as Dean of Medicine.

"We could not have built our vibrant research community and international stature without the Dalhousie Medical Research Foundation, I am absolutely convinced of that.”

Dr. Harold Cook, Dean of Medicine