

SUMMER/FALL 2007

# VoxMeDAL

THE VOICE OF DALHOUSIE MEDICAL ALUMNI



## THE CLASS OF 2007

Dalhousie welcomes a new generation of doctors







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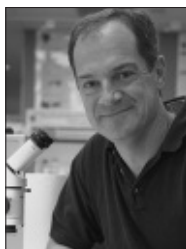
Every year, the Molly Appeal  
funds critical research like Colin's.  
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## A few more faces of Molly...

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Jyl knows this research  
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### Meet Steve.

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Institute in Dalhousie's Faculty  
of Medicine, Dr. Steve Barnes is  
grateful for the critical  
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**On our cover:**  
On May 25, the Faculty of Medicine graduated the Dalhousie Faculty of Medicine's newest generation of doctors.  
*Photo: Calnen Photography.*

## VoxMeDAL

Mailed under Canada Post Publications  
Mail Agreement #1442260

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VoxMeDAL is publishing twice a year  
by Metro Guide Publishing

**Publisher:** Sheila Blair-Reid

**Associate Publisher:** Patricia Baxter

**Managing Editor:** Trevor J. Adams

**Graphic Design:** Gwen North, Reuben

**Advertising Sales:** Mary Jane Copps



Metro Guide Publishing

1300 Hollis Street

Halifax, Nova Scotia B3J 1T6

Tel: 902-420-9943

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# GIVING BACK



**By Dr. Margaret Casey, '68**  
*President, Dalhousie Medical Alumni Association*

The Dalhousie Medical Alumni Association has been supporting its community for 50 years

Welcome to the second issue of *VoxMeDAL* for 2007. I want to offer an especially warm welcome to the newest members of the Dalhousie Medical Alumni Association: the graduates of 2007. We congratulate them on their achievements and contributions to the life of the medical school and wish them well as they embark on their residency programs. We look forward to working with them as the DMAA moves to increase support for medical students and residents.

During the past year, we have been in the process of renewal and refocusing our energies. The past 10 months have been extremely productive. In April, we hosted a dinner with speaker Dr. Vincent Lam, the 2006 winner of the Giller Prize in Canadian literature. This sold-out event allowed us to donate more than \$30,000 to the Medical Humanities program.

We have also made significant progress towards realizing the DMAA Chair in Medical Education, an initiative of the late Dr. George Flight, to which many alumni have donated. Working with the University Development office, we are now in a position to seek the major funding necessary to inaugurate the chair. We are currently reviewing the constitution and will expand the base of the DMAA board.

Also, the largest number of reunions ever is being held this year at various sites throughout the Maritimes. We are most appreciative of the presence of Dean Cook at many of these and for his work in providing a "state of the union" profile of the faculty.

How does one measure the impact of a

volunteer driven association such as the DMAA? We know that there are intangible measures and that the volunteer contributions of medical alumni to the Faculty of Medicine have been vast. For 50 years, thousands of alumni have come together to fundraise, spearhead student endowments and bursary programs, volunteer to mentor and teach and welcome students. The active board, which has directed the association, has involved hundreds of alumni whose work has affected several areas of the Medical School.

The most powerful statements are from the students, like this letter we recently received from the Dalhousie Medical Students' Society. "Thank you for your continued support," wrote Margie Wheelock, DMSS Treasurer, Class of 2009.

"Dalhousie Medical Alumni Association funds play an integral role in student life and allow students to organize, implement and take part in the many activities that represent the breadth of medicine beyond classroom and hospital walls... Funds are also allocated to the annual Dal-MUN conference. This conference is a chance for medical students to attend seminars, hear guest speakers and make connections with students from another medical school. Each year, DMAA funds also pay for gold and silver D's, a Dalhousie tradition that celebrates student contributions to the DMSS and student life. This year the finance committee allocated \$2,500 to projects including the Global Health Conference on Malaria, Tuberculosis and HIV, a Reproductive Choices conference, an alternative-medicine conference, Medical Students for Mental Awareness, just to

## VoxMeDAL

Dr. Vonda Hayes, '71,  
Executive Vice-President, DMAA

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**Special Projects Website:**

**[www.dalmedicalalumni.ca](http://www.dalmedicalalumni.ca)**

name a few..." Although it's hard to quantify the influence of the DMAA, the millions of dollars given over the years reflect the same loyalty and sense of privilege that are our cornerstones. As we approach our 50th anniversary, it's clear that the DMAA is a valuable dimension of the medical school. We have the responsibility to continue and broaden our support.

In other news, we're sorry to announce that Kathy Murphy is pursuing another career opportunity and has left the DMAA. She and her staff have done outstanding work in developing the potential of the DMAA, increasing its scope of activity and interacting with students and faculty. We will miss her creativity and hard work. We thank her for all she has brought to our association and wish her well. The office will be open as usual and we'll inform you of new developments. □



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# POWERED BY PEOPLE



By Kathy Murphy  
DMAA Executive Director

## Volunteers give a priceless gift to Dalhousie's medical community

According to Volunteer Canada "the Canadian voluntary and nonprofit sector is made up of more than 161,000 organizations, almost 12 million volunteers." Its website ([www.volunteer.ca](http://www.volunteer.ca)) outlines why people give their time, expertise and services: to enrich their lives, for personal and professional development and to give back to their communities.

In my short time at the DMAA, I have witnessed volunteerism at its finest in the efforts of the medical alumni, students, and faculty, and the medical community in general. Members of the medical community respond to the needs of Dalhousie's Faculty of Medicine in many ways—such as taking residents and students into their practices as family physicians and fundraising to reach \$2.5 million in an effort to endow a Chair in Medical Education. These are just two small examples. The university reaches a significant portion of its fundraising budget through the efforts of our supporters, so the impact reverberates through the organization.

Here at the DMAA, we see a consistent outpouring of support as the volunteer board of directors works tirelessly to support the Faculty of Medicine. Reunion groups do a lot of work to the benefit of medical students, such as class projects for bursaries, international health electives, lectureships and dozens of other unique funding opportunities.

The Economic Impact Of Volunteers Calculator ([www.pointsoflight.org/](http://www.pointsoflight.org/)

[resources/research/calculator.cfm](http://resources/research/calculator.cfm)) values volunteer time based on the work performed and the value of specific tasks according to market conditions as reported by the federal labour department. You can use the calculator to search hundreds of professions. "Physician/surgeon" shows a wage of \$65.91 per hour for volunteers from the profession. It's easy to see that the contribution of medical alumni tallies thousands of dollars, to the benefit of Dalhousie's Faculty of Medicine. Volunteers involved with medical reunion planning each contribute at least \$3,500 of their time and effort. Annually, DMAA board members contribute efforts worth more than \$7,500 each (multiplied by over a dozen members).

This is important because it's easy to overlook contributions when there is no exchange of fees for services. We easily forget volunteers. Their gifts of time, energy, expertise and service can be difficult to track, unless we lose those efforts. That is when the value of volunteering hits home for organizations that are left with diminished resources, expertise and "people power" when volunteers are un-nurtured and under-appreciated.

So a heartfelt "Thanks!" to the volunteer students, the board of directors and alumni who allow us to achieve our goals. Through your continued creativity and commitment to the medical community, we are successful—and only through your support can we continue. □

# REACHING OUT



by Dr. Harold Cook  
Dean, Faculty of Medicine

The Faculty of Medicine embarks on an exciting new partnership with the University of New Brunswick

Armed with a new strategic vision, our Faculty of Medicine is looking forward to meeting one of the most exciting challenges in our 140-year history: the development of a new four-year medical education program in New Brunswick.

In June 2006, Dalhousie medical school embarked on the strategic plan *Charting Our Course; Strategic Planning Initiative 2006–2016*. This highly participative and consultative process culminated in a strategic vision centred on the overarching goal of improving the health of our Maritime community. We will achieve this goal through three key objectives.

We'll educate and train physicians and researchers who are curious, creative, adaptive and collegial lifelong learners. Through the learning environment, we will instill knowledge that's particularly relevant to the Maritimes.

We'll build on our foundation of broad research excellence and increase focus and capacity in early detection and intervention (encompassing the spectrum from molecular to population health).

We'll improve our fiscal position and align our institutional structure to support our strategic directions, strengthen our collaborations with alumni and partner organizations and become more deeply engaged with our Maritime community.

View the strategic vision document on the Faculty of Medicine's website, at <http://strategicplan.dal.ca>.

Recently, I took part in a New

Brunswick government announcement giving the green light to negotiate an agreement with Dalhousie to train 30 English-speaking New Brunswick students annually at the University of New Brunswick's Saint John campus. A four-year Dalhousie MD program in New Brunswick is a natural evolution in our long history of distributed undergraduate and postgraduate medical education in the province. It supports New Brunswick's health human-resource planning and it fits our strategic vision.

We have a substantial amount of work to do over the next few months to put together this new program. We need to develop it in a way that ensures the integrity of our entire medical education curriculum, meeting and maintaining full accreditation standards. Also, the funding package must provide us with sufficient resources to carry out the new program without compromising the quality of our existing program. It will be a challenge but we're committed to working with our New Brunswick partners to achieve our shared goal.

I'll report our progress on both the strategic planning and New Brunswick medical education fronts in the next issue of *VoxMeDAL*. Meanwhile, I want to say how much I enjoyed meeting those of you who attended reunion and DMAA events this year and I hope to meet more alumni at upcoming reunion events throughout the summer and fall. □

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# MEET THE NEW DMSS COUNCIL

Last year's DMSS council organized many successful events. The Everest Project and the implementation of the new Fifty for Life bursary program were highlights of the year. The new DMSS council hopes to build on the achievements of last year and is already working to make the 2007/2008 year a success.

The council's main goal for the year is to increase communication on all fronts. Communication is the key to success for any organization and the DMSS is no exception. The council wants to increase its profile among members, particularly the incoming medical school class. It also wants to increase its exposure within faculty, among other faculties and in the community and continue to work closely with the Dalhousie Medical Alumni Association. The DMAA supports many activities of the DMSS and has had a long-standing partnership with students. Keep your ears open for word of DMSS council events coming up throughout the year. To contact the DMSS, e-mail: DMSS@dal.ca. □

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Incoming DMSS President, Sarah Lea, '09, and outgoing DMSS president Mike Ripley, '08 (right), present Dr. Jeremy Beck, '07 with a Silver D award of excellence from the DMAA on May 26th at the Gala Convocation Dinner.

All the Best Mike—you served the DMSS well — and best of luck to Sarah as new incoming president!



# A Family Tradition

The Medical History Society of Nova Scotia looks at the Webster family's legacy

>> By Dr. Allan Marble

The Medical History Society of Nova Scotia acquired one of its most significant collections in 2006 from the Webster family physicians of Yarmouth. Dr. David Webster, practising family physician there, provided an exquisite reflection of his forefathers—a family of seven physicians dating back to Isaac Webster, who began practising medicine in Nova Scotia around 1791.

The society is currently having the collection accessioned so that it can display it during the summer. Dr. Marie Elwood is leading the project with her expertise in medical history. A large room will be converted into a doctor's office in the Yarmouth County Museum to highlight the outstanding contributions of the Webster family to Nova Scotia medical history.

Within its goal to “promote the medical heritage of Nova Scotia,” the society has now succeeded in providing medical history displays in Halifax, Dartmouth, Truro, Sherbrooke Village and soon to come, Yarmouth. In the next year, it will develop a display for Cape Breton, customized to the island's medical history.

The main collection has now been accessioned and the master manual will be augmented with photographs of the artifacts. With two new part-time assistants, the society's activities are increasing rapidly. Over the coming years, it will continue to seek a permanent space for the artifacts and libraries in its collection.

This spring, Halifax mayor Peter Kelly honoured the society's chairman, Dr. Allan Marble, with an award at a dinner for Outstanding Volunteers. The society was pleased to see him acknowledged for his commitment to the History of Medicine in our province. For more information, contact Beth MacPherson ([medicalhistoryns@ns.sympatico.ca](mailto:medicalhistoryns@ns.sympatico.ca)) or Dr. Allan Marble ([allan.marble@ns.sympatico.ca](mailto:allan.marble@ns.sympatico.ca)). □



The Medical History Society of Nova Scotia preserves the province's heritage of healing.

# Beyond the call of duty



Dr. Richard Goldbloom discusses how volunteering strengthens communities

>> By Janice Hudson

**D**r. Richard Goldbloom thinks it's shortsighted to define doctors exclusively as medical professionals. It's the work they do outside of their profession that captures who they are. "Everybody who is a member of a community owes something to that community," he says. "Doctors are no different... except that they have special knowledge and skills that can help them contribute."

He speaks from experience. He's now in his sixth year as chancellor of Dalhousie University and continues to wear many hats. A professor of pediatrics at Dalhousie's Medical School, he has served as director of research, head of pediatrics and physician-in-chief at the IWK Grace Health Centre. His volunteer work is also broad-reaching: former president of the Atlantic Symphony Orchestra, past vice-president of Symphony Nova Scotia and founding president of the Discovery Centre. He also edits *Pediatric Notes*, a review of pediatric literature. Read on as he discusses how doctors can improve the communities they serve.

#### **Do most medical students volunteer while at Dalhousie?**

Many of them do. Some volunteer in this community, some go abroad. A number of medical students read to children in the Read to Me program. There's another community program in which I've been involved for several years called Love, which stands for Leave Out Violence. The program is designed to help youth whose lives have been affected by violence. In a community like Halifax there's no shortage of volunteer opportunities for students—there are more opportunities than there are volunteers.

#### **What are the benefits of volunteering?**

Number one, you get huge satisfaction out of even the smallest successes. I remember the day the first alumna of the Love program became a university graduate. I had the honour of capping her when she got her degree at Dal. That thrill was hard to beat.

#### **Does volunteering bridge the gap between doctors and their communities?**

There shouldn't be any gap between doctors and their commu-

nities if physicians have the right attitude. In any community there's no shortage of good causes. For instance, Dr. Andrew Lynk, a graduate of Dal and a pediatrician in Sydney undertook a successful one-man campaign to bring in the most stringent anti-smoking bylaw in Nova Scotia.

#### **What role should doctors play in dealing with the aftermath of a community crisis?**

About 11 years ago in Port Arthur, Australia there was a mass shooting in which 35 people were killed and 18 seriously wounded by a single gunman. After the shooting, the Australian government passed new anti-gun legislation that is the most stringent in the world. The government bought back over 700,000 guns at market value and made it next to impossible to own a revolver... Since Australia changed the law, there's not been a single mass shooting in Australia and the homicide rate dropped 6 per cent per year. It's a striking example of what real gun control can go. One of the things doctors can do is to become active in calling for gun legislation that is at least as restrictive as Australia's.

#### **How can doctors help the healing after a traumatic event?**

I'm not sure that we can apply a formulaic approach to helping people in such a situation. Having your best friend shot in front of you is incredibly traumatic and different individuals deal with it in different ways. For many, the support and comfort of family, friends and teachers may be appropriate and helpful. Others may benefit from professional help. But for most people, there's no substitute for the healing effects of time and reflection. It's appropriate for people to be upset in the aftermath of a catastrophe.

#### **How do medical students prepare for situations like that?**

Partly by experience. But the most important part of the preparation is picking the best people as medical students. Most people bring their best qualities to medical school—medical school doesn't infuse them... If you pick young people who have a true sensitivity to the human condition and empathy for people in trouble, most will deal with difficult situations pretty effectively. □





# Growing Together

## An update on the George Flight Chair in Clinical Medical Education

>> By Dr. David Young, Dr. Bob Anderson, Dr. Margaret Casey and Dr. Alan Purdy

*"The fundamental business of Dalhousie Medical School is to educate. The point of this Chair is to give alumni the chance to recognize the excellent medical education Dalhousie Medical School has provided across many decades, and to support the continuation of that tradition of excellence. It's an investment that means something."*

—Dr. George H. Flight, 1925–2005

Simply put, the Chair in Clinical Medical Education will enhance the practice of our graduates; how they relate to, work with and treat patients. The Dalhousie Medical Alumni Association (DMAA), with the leadership of the late Dr. George Flight, conceived of the Chair in Clinical Medical Education as a millennium project. The goal is to complete this \$2-million campaign by the DMAA's 50th anniversary celebrations in October 2008.

Since this project was launched during the Reunion 2000, where Dr. Flight and his classmates of 1950 were celebrating their 50th anniversary, donations from medical alumni have been steady. It is evident that alumni and others have a deep appreciation of the importance of clinical education and the enhancement of physician-patient relationships. Today, some 534 donors have contributed. As of March 31, the market value of the fund was \$596,178.18.

In order to complete this campaign in 2008, we need to increase both the pace and level of our donations as 2.5 million is required to endow a chair. "Even though he was Dean of Medicine at McMaster, the founding centre of evidence-based medicine, he believed that how we work with the patient and family was more important," says Dr. Allan Purdy.

This is especially important, explains Dr. Bob Anderson, because rapid scientific advances changed the medical profession in many ways. "This has enabled us to treat conditions more specifically but has fuelled an increased focus on technological

methods," he says. "This, however, has overshadowed other core aspects of our practice, and one can argue, changed our approach to medicine. It is time to shift the focus so as to have a more balanced approach between the technological and clinical methods."

Teaching the science of medicine is relatively straightforward, as is the teaching of technology. Teaching students the art of medicine is a much greater challenge. There is a need for greater focus on "clinical education," to teach students how to establish and manage a positive healing relationship with patients and families. Monthly, 16 representatives of our various divisions meet to review, discuss and address issues relating to clinical medical education. This indicates our need for a Chair to lead advancement of this essential aspect of our education. The Chair in Clinical Medical Education will help educate students in clinical settings with a focus on the fundamentals of the doctor-patient relationship.

Clinical medical education is intended to enhance all aspects of the doctor-patient relationship. This Chair is designed to act with modern medical education teaching regarding the practice and research of medicine.

The Chair will interface in all aspects of hospital and academic units. This individual will be cross-appointed between his/her clinical department and the Division of Medical Education and will be actively in clinical practice.

The outcome of their work will advance the objectives of:

- Improving diagnoses,
- Improving clinical skills,
- Improving the overall care of patients, and
- Improving the use of resources across professions.

Central to this is the enhancement of trust in the doctor-patient relationship. The Chair will create an atmosphere where the person is seen as an advocate and mentor for all aspects of medical education. Over time, the example, leadership and work of the Chair will inspire both faculty and students and effect a fundamental culture shift within Dalhousie Medical School. □

# One Library's Legacy

The Kellogg Health Sciences Library  
celebrates 40th Anniversary this year

>> By Patrick Ellis, Health Sciences Librarian

**1967** was a big year. It was the year of Canada's Centennial, Expo '67 in Montreal, the creation of the Order of Canada, the designation of "O Canada" as our national anthem, the Toronto Maple Leafs apparently winning a Stanley Cup (although we now think this is an urban myth) and the Queen Mother opening the Tupper Building on July 14, 1967.

And thanks to that opening, the Kellogg Health Sciences Library also marks July 1967 as its birthday. Unlike your author, the Kellogg is a young 40 years. The Tupper Building was deemed Nova Scotia's Confederation Memorial Project by the federal government. For more information about the Tupper Building, visit the Buildings of Dalhousie digital archives ([www.library.dal.ca/duasc/buildings/Tupper.htm](http://www.library.dal.ca/duasc/buildings/Tupper.htm)).

Tucked into the main and second floor of the Tupper is the WK Kellogg Health Sciences Library. Named after William Keith Kellogg (Kellogg Corporation of Battle Creek), the library received a generous grant in 1967 from the WK Kellogg Foundation in support of the library's ongoing outreach to the Maritime health community. (For more information about the foundation, visit [www1.library.dal.ca/kellogg/about/kellogiana.htm](http://www1.library.dal.ca/kellogg/about/kellogiana.htm)).

The Kellogg Library replaced the old Medical-Dental Library, a handsome Carnegie library that sat on the site of the Tupper lobby. And the Medical-Dental library was a successor to previous medical libraries on the Carleton campus dating back to 1876.

The Kellogg library has probably changed since your last visit. Our online catalog, Novanet, has replaced familiar tools like the card catalog and the journal printout. The print Index Medicus



The Medical/Dental Library at its original site, prior to the construction of the Tupper Building in 1967.

that occupied so much of our reference collection is gone. Paper journal subscriptions are shrinking quickly. Journal subscriptions are almost wholly electronic now. In 1890, the library was open from 10 a.m. to 1 p.m. and 2:30 p.m. to 6 p.m. Today, the library's collection of journals is almost entirely available to Dalhousie faculty and students at any time. The library's book collection is evolving to electronic format.

With all these changes, you might expect the library to be a lonely spot. But in fact, we're busier than ever. Our gate counts rise annually. The Boniuk Reading room is full throughout the academic year.

We are planning a small celebration of our anniversary in the early fall of 2007 to celebrate the past 40 years of the Kellogg Health Sciences Library. Contact the library for details closer to the event. In the meantime, please pop by for a visit. □



# Book Review: In our Hands

Writings by recent graduates take a thoughtful look at the patient-doctor relationship

>> By Dr. Ian Cameron

**I**n *Our Hands* is a collection of writing by medical students from across the country, edited by Linda Clarke of Halifax (a writer and storyteller who works in health care and medical education) and Dr. Jeff Nisker (of the Schulich School of Medicine and Dentistry at the University of Western Ontario).

The compilation features three recent Dalhousie medical graduates from the class of 2007: Andrew Howlett of Lower Sackville, Nova Scotia; Dylan Blacquiere from North Rustico, P.E.I. and Jennifer de Jong from Fredericton, New Brunswick.

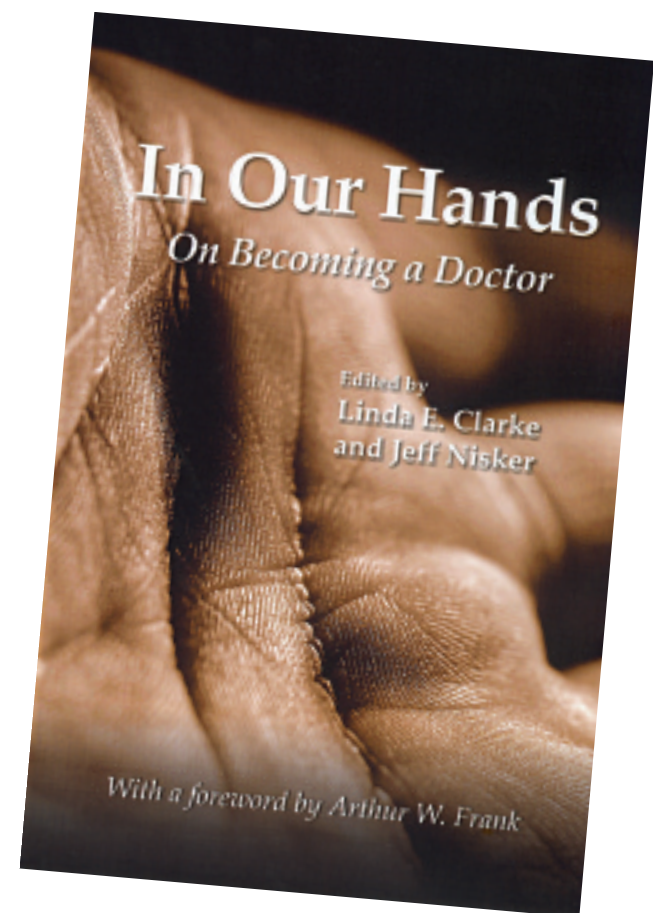
Are you familiar with the notion of liminal? No? Then that's just one more reason why you should read *In Our Hands*, a thoughtful compilation of rite-of-passage stories by Canadian medical students. These stories might have been lost without the collaboration of editors Linda Clarke and Jeff Nisker.

These stories are important because every patient has a story and to acknowledge someone's story is, as Clarke points out, "an act of hospitality." Hospitality is a form of caring—and caring in today's medical world is endangered. As Joshua Landy's character Randal says in "Morning Grounds," "the science evolves and the care devolves." Storytelling in medical schools can help balance that equation.

Told with compassion, anonymity and attention to detail, the stories reveal that the medical students have listened, observed and respected privacy. That's potentially a very good way to assess clinical acumen, caring and professionalism.

The stories aren't perfect but unevenness is a given in any collection of writing. The trade-off is diversity and if you read carefully you will find some gems: personification ("La Gata Enojada"), trivia ("The Bulbocarvernus Reflex"), insight ("The Luxury To Get To Know My Patients on a Level Beyond Their Illness"), injustice ("Eight Miles Down the Road... Eight Miles Out"), metaphor ("El Fuentes") and enabling disability ("Consider Compassion"). There is even a gothic take on the Good Samaritan.

The therapeutic power of incongruity provides some magical moments in the collection. Andrew Howlett's story, "The Assassin," uses it as a gripping form of communication while in Priyadarshani Raju's poem, "3 a.m.," incongruity results in the triumph of delight over clinical weariness. Another effective tech-



nique in writing involves the voices of the third-year medical student and the staff person in "One Night in the E.R." This piece brings a refreshing perspective to the sometimes tired cynicism of emergency-department portrayals.

Hands recur as a theme in the book. Three of my favorite references are Jeffrey Burns's cover illustration, Monica Kidd's story "Ed's Right Hand" and the non-subliminal implication in the title that future medical care will be in the hands of these medical students. Read this book and you will get a much better idea of whose hands you want to be in. □

Everest Project 2007 Update

# Medical students teach local youth about healthy living

By Evelyn Schlosser

This year, the DMAA worked closely with medical undergraduate students to enhance the profile of Dalhousie Medical School's educational program, the Everest Project. The project is designed to educate Grade 4 students about healthy lifestyle choices. Dalhousie University medical students visited local schools and played games with the children, teaching them tips about healthy eating and promoting the benefits of

physical activity.

The curriculum emphasizes the importance of being healthy by getting your heart rate up and staying active. Students learned about various organs and body parts and were taught how to take their pulse. The program is designed to be interactive and engaging.

At the end of the project, the medical students gave the elementary students a take-home kit that included a guide that

helps kids learn how to eat well, be active and make healthy choices. They also received stickers to monitor their progress on a take-home poster.

The students and teachers are grateful for the program. "The impact of getting our youth excited about healthy living will be far-reaching, and it is great to be a part of this as medical students and have fun at the same time," says David LaPierre, a first-year medical student who participated in the project.



Medical students teach youth about healthy living in the Everest Project.

## THE PROGRAM HAD MANY HIGHLIGHTS THIS YEAR.

- More than 170 medical students from first and second year participated.
- Medical students visited classrooms in 76 local schools.
- Medical students gave away more than 100 soccer balls and skipping ropes to the students to encourage physical activity.
- For the first time, the medical students provided the children with take-home-kits that encouraged healthy eating and active living beyond the classroom setting.

To learn more about the project, print a copy of the Everest Challenge and see more photos, visit <http://dmss.medicine.dal.ca/everest.php>.

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## Supporting the cause

The DMAA rallies the community to raise over \$30,000 for the Medical Humanities program



From left to right: Maureen Shaw; Dr. Merv Shaw, event chair; Dr. Vincent Lam; Ruth Goldbloom; Rob Sobey, CEO Lawton's Drugs; Dr. Richard Goldbloom and Dr. Margaret Casey, President, DMAA.

Giller Prize winning author Dr. Vincent Lam was the main event at Pier 21 on April 18 at a special evening to raise funds for the Dalhousie Humanities in Medicine program. Lam read from his novel *Bloodletting and Miraculous Cures* and spoke about how his experiences in medicine influence his writing. The event also featured art and music by medical students and others in the field. There were also musical performances by the jazz trio Lost Vagus and the Testostertones (an a cappella

group, arranged and led by Dr. Ron Stewart, director of the medical humanities). An exhibition included art by alumni and medical students.

The highlight came when Lam spoke about the history of humanities in medicine, the role of healers and his experiences as both a doctor and author. Rob Sobey, CEO of Lawtons Drugs (the naming sponsor for the event), presented him with a brick on the Sobey's Wall of Honour at Pier 21 to thank him. The wall honours Canada's immigrant heritage.

**Thanks to our sponsors for making this event possible.**

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 Capital Health

Although Lam grew up in Canada, that was of particular interest to him because his family immigrated from the Chinese community in Vietnam. After dinner, he signed books and spoke with attendees.

The event netted \$30,000 to support programs and bursaries for the program. Thanks to committee chair Dr. Merv Shaw and committee members Dr. Bill Acker, Dr. Margaret Casey, Dr. Ron Stewart, Shawna Burgess, Allison Gerrard, Evelyn Schlosser, Lynda Rosborough and Kathy Murphy. □

  
**LETSONCOURT**  
 CONDOMINIUM RESIDENCES

# SAVING HISTORY

## The Alumni Photo Gallery Project has a new look

By Evelyn Schlosser, DMAA

The Dalhousie Medical Alumni Association, the Alumni Photo Gallery committee and the MedIT department have collaborated to preserve Dalhousie Medical School's rich history through an online database filled with class composites and other historical photographs and information.

Currently in development, the new database will allow students, faculty, alumni and the community to search past class composites and make future class photos accessible. Anyone will be able to use the website.

The Alumni Photo Gallery Project began in 2001 as an extension of the Tupper Building Link Aesthetic Project. Staff noticed a gap after visiting other faculties within Dalhousie, which displayed the graduation composites within their facili-



The new Alumni Photo Gallery Project makes the medical school's rich history available to all.

ties. Now you can see class composites in the link, plus they will be accessible online once the website is complete. There is limited physical space to display graduation collections, so it's important that these photographs are also accessible and preserved through a "virtual gallery"

([www.dalmedicalalumni.ca/projects.php](http://www.dalmedicalalumni.ca/projects.php)). There will be a search engine so users can look for specific people based on their name or graduation year.

This project is meaningful to current medical students because it allows them to connect with alumni who walked the halls and studied before them. The project fosters feelings of pride, achievement and belonging. Students enjoy searching for family members, professors, acquaintances and mentors who attended Dalhousie. Similarly, alumni enjoy looking at their class composites and remembering their time at Dalhousie.

The new site should be online by fall 2007. The long-term goal is to create an interactive space in the Charles Tupper Building where students, faculty and visitors can search the database. "We hope to build a kiosk or computer station where people can peruse the online photo gallery here at the medical school," says Kathy Murphy, executive director of the Dalhousie Medical Alumni Association. "People often stop to look at the composites in the link and come to the DMAA office inquiring about photos. This will ensure the history here is preserved and accessible to anyone interested."

Class composites date back as early as 1901, although graduating class photographs are missing for 1981, 1991 and 1992. If you have a yearbook and think you can help, contact the Dalhousie Medical Alumni Association office at (902) 494-8800 or [medical.alumni@dal.ca](mailto:medical.alumni@dal.ca). □

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If you know of anyone to note in this section, forward the information to the DMAA by mail or e-mail [medical.alumni@dal.ca](mailto:medical.alumni@dal.ca).

**Dr. Ian Edwin Lawman Hollands Rusted '48** passed away on July 14, 2007 at the age of 86. He was the founding dean of Memorial University of Newfoundland's medical school. He was named an officer of the Order of Canada in 1985.

**Robert Franis O'Driscoll '50** died February 12, 2007 at the age of 80. He lived in Grand Falls-Windsor, Newfoundland. He practiced general surgery.

**Ernest Gordon Lawson '51** died on November 6, 2004 at the age of 82. He was living in North York, Ontario.

**Patricia Matheson O'Neil '58** passed away Sept. 7 2006. She died suddenly in her residence in Salt Lake City, Utah at age 72. She lived most of her life in California and specialized in anesthesiology. She moved to Utah in 2005 after she retired to be close to her family.

**James Alexander "Sandy" Lawrence '58** was a family physician in Annapolis Royal for 36 years. He passed away on April 25, 2007.

**Donald Robert Patton '60** died on February 13, 2007 at the age of 74. He practiced diagnostic radiology and lived in Montreal.

**John Winston Purdy '77** passed away on December 28, 2006 at the age of 66. He lived in Island View, New Brunswick. His specialty was ophthalmology.

**Alan Blinn '84** was tragically killed in a boating accident on March 29, 2007 in Sydney, Australia. He immigrated to Australia in 1991 and was Team Leader and Team Doctor with many Australian Teams for ISU World Championships. He was also an accomplished ice dancer in Canada.

**John Hanwell Cooper '88** died on January 3, 2007 at the age of 84. He was a professor emeritus at Dalhousie University.

**Dr. Robert F. Scharf** recently passed away at the age of 83. He graduated in medicine from McGill in 1948 and was a pioneer university emergency department director in Halifax. He was also a serving brother of the Order of St. John of Jerusalem.

## A FRIEND OF OUR COMMUNITY

The medical community mourns the loss of **Dr. Margaret (Peggy) Hansell**, who passed away on May 2, 2007. She taught in the anatomy department for 35 years, serving as acting head of the department of anatomy and neurobiology, acting associate dean of undergraduate medical education and a member of the board of governors. □



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### On the Move

**Dr. Cathy MacLean ('85)** has been appointed head of the family medicine department at the University of Calgary. Her duties will involve working to increase the profile of family medicine with the goal of enticing more students to choose it as a career post-graduation.



**Dr. Gaynor Watson-Creed '99** is Halifax's new medical officer of health. Watson-Creed is an active volunteer with youth and medical students and on the political front. She is the eldest daughter of Jamaican immigrants and her father became a sociology professor at UPEI.



**Dr. Nigel Rusted** with **Dr. James Rourke**, dean of medicine (R) and **Dr. Axel Meisen** (L), president of MUN.

Dr. Nigel Rusted marked his 100th birthday on July 1 with a gathering at the Faculty of Medicine. The president of Memorial University, Dr. Axel Meisen, presented him with plaque honouring his contributions. It said "Your friendship, mentorship and continuous support have helped our province's university become an outstanding institution."



Halifax family physician, **Dr. William C. Acker '68** retired from practice in April. His work in the medical community included serving as

president of the College of Physicians and Surgeons of Nova Scotia, president of Medical Society of Nova Scotia and president of the DMAA. He's currently on the board of the DMAA and involved in various volunteer groups. He has given a lot and passed on the traditions of medicine, as is seen with his daughter Amy, who passed the Royal College exams in pediatrics in June.

**April 18:** Picchione Lecture Series: Research and the Future of Health Care presented **Rasheda Ali**. The Integrated Health Research Training Program (IH RTP) presented Ali (daughter of boxer Muhammad Ali) as featured guest speaker on Parkinson's Disease. Understanding her father's Parkinson's has allowed her to spread awareness of the neurodegenerative disease.

**April 18:** DMAA fundraising event with **Dr. Vincent Lam**. See the feature on page 15.

**April:** Twin brothers **Dr. Adam Power** (Dalhousie alumnus) and **Nicholas Power** (PGY3—Urology) invented a device that lifts the abdominal wall to facilitate an experimental, "scarless" surgical technique called Natural Orifice Transluminal Endoscopic Surgery (NOTES). To view the article from the *National Review of Medicine*, visit: [www.nationalreviewofmedicine.com/issue/2007/04\\_15/4\\_advances\\_medicine01\\_7.html](http://www.nationalreviewofmedicine.com/issue/2007/04_15/4_advances_medicine01_7.html).

**April:** **Dr. Tong-Jun Lin** (microbiology, immunology and pediatrics) won the New Investigator Award of the Canadian Society of Immunology. **Dr. David Mahony** (microbiology and immunology) won the Distinguished Microbiologist Award of the Canadian College of Microbiologists. **Dr. Andrew Roger** (biochemistry and molecular biology) won the 2007 EWR Steacie Memorial Fellowship from the Natural Sciences and Engineering Research Council of Canada. **Dr. Richard Langley** (medicine) won the DSU Teaching Award.

**May 9:** Launch of the **Cochrane Library** at the WK Kellogg Health Sciences Library in the Tupper Medical Building. The Cochrane Library provides summaries of the most clinical trials. It's an ongoing project of the Atlantic Health Knowledge Partnership.

**May:** **Dr. Donald Weaver** was awarded one of two \$1-million Centennial Awards from the Maryland-based Alzheimer's Disease Research (ADR). For more, surf to: [communications.medicine.dal.ca/newsroom/weaver.htm](http://communications.medicine.dal.ca/newsroom/weaver.htm).

**May 17 to 20:** Halifax hosts the **First Annual International Conference on The Humanities in Medicine**, celebrating the "human face of medicine." For more, click on [humanities.medicine.dal.ca](http://humanities.medicine.dal.ca).

**May:** Cancer researchers doctors **Patrick Lee** (microbiology, immunology and pathology), **Kirill Rosen** (pediatrics, biochemistry and molecular biology and Atlantic Research Centre) and **Brent Johnston** (microbiology, immunology and pediatrics) will share more than \$1 million in funding from the National Cancer Institute of Canada.

**May:** "Medicine on the Move" is a project from the Department of Psychiatry to improve Guyana's health services. For more, visit: [communications.medicine.dal.ca/newsroom/guyana.htm](http://communications.medicine.dal.ca/newsroom/guyana.htm).

**May:** Graduating medical students, **Dylan Blacquiere**, **Jennifer De Jong** and **Andrew Howlett**, were interviewed in local media about their evolution as doctors-in-training. They also read from their stories, which are part of *In Our Hands: On Becoming a Doctor*.

**Dr. Nuala Kenny** (Bioethics) recently attended a Vancouver conference where she said the medical profession is becoming demoralized as it faces many treatment options and an emphasis on a for-profit model. To view an article from the *Vancouver Sun*, visit: [www.canada.com/vancouver/news/westcoastnews/story.html?id=d78cdd82-998c-4c42-bcb2-3ad7ee69abe6](http://www.canada.com/vancouver/news/westcoastnews/story.html?id=d78cdd82-998c-4c42-bcb2-3ad7ee69abe6).

**May: Medicine on the Move.** Three Dalhousie physicians are bringing innovative new eye treatment to Halifax. For more visit: [communications.medicine.dal.ca/newsroom/eye.htm](http://communications.medicine.dal.ca/newsroom/eye.htm).

**May 17:** The local TV news show *Live at Five* featured the **Everest Project**, an interactive, hands-on program where medical students teach Grade 4 classes about the importance of healthy lifestyle choices.

**May:** *The Chronicle Herald* featured **Ellen Vessie '08**, who ran her first

women's half marathon at the Blue Nose International Marathon and won.

**May: Dr. Nuala Kenny** (bioethics) commented on how health reporting needs the QALY (Quality Adjusted Life Year) treatment. To view the article, visit: [www.cbc.ca/news/viewpoint/vp\\_strauss/20070517.html](http://www.cbc.ca/news/viewpoint/vp_strauss/20070517.html)

**May 23: Faculty of Medicine Resident Research Day.** The best resident research projects will be presented in competition for FOM Research prizes. For more, visit the PGME website at [postgraduate.medicine.dal.ca/](http://postgraduate.medicine.dal.ca/).

**May 25:** The Rebecca Cohn Auditorium hosted the **2007 Medical Convocation**. Following that on May 26 Convocation Gala dinner and awards night at the Halifax Harbourfront Marriott hotel.

**May 29:** Dean Harold Cook announced that **Dr. Blye Frank**, head of the medical education division, has accepted the additional position of head of the bioethics department. The appointment is for a term ending in June 2009.

**May 30 to June 6: Dr. Harold Cook**, dean of the Faculty of Medicine, attended the Academic Council in Brunei from May 30 to June 6.

At a recent faculty development workshop hosted by Dalhousie, **Dr. George Carruthers** (family medicine) was awarded the Preceptor of the Year Award for Prince Edward Island.

**A news release** concerning a four-year Dalhousie medical education program based in New Brunswick is available at [communications.medicine.dal.ca/newsroom/nbmedschool.htm](http://communications.medicine.dal.ca/newsroom/nbmedschool.htm).

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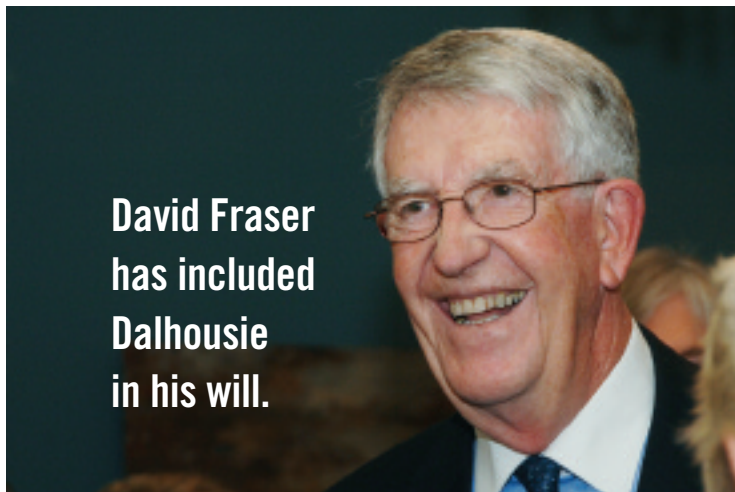


From left: Ya Fatou Samba, Ciong Yien (Vickie), Dr. Gita Sinha, Ong Wai Voon, Siddharth Kogilwaimath, Lai Sueyi, Ooi Wei Boon, Dr. Margaret Casey, Kathy Murphy

## Newest Malaysian Students Join Dalhousie Medicine Undergraduate Program:

Dr. Gita Sinha, Dr. Margaret Casey, and Kathy Murphy, (executive director of the DMAA) hosted the International Medical University students as they arrive to complete their medical undergraduate training in Halifax, Nova Scotia this past May. And although faced with very un-spring like weather during their first visit to Nova Scotia, the students have been enjoying the maritime hospitality. Site-seeing, barbeques, outings, food and fellowship abound as their classmates and members of the medical community host events and outings and roll out a warm maritime welcome.

Since 1994, Dalhousie University in partnership with other medical schools and Sesama Medical College Management created a medical college known as the International Medical College (now the International Medical University (IMU). Dalhousie is one of the partner schools of IMU, contributing to oversight of the evolution of the pre-clinical curriculum, pedagogy, faculty development and establishment of a Learning Resource Centre at IMU. The Dalhousie contribution to this ongoing project also involves 2 years of clerkship training at Dalhousie for IMU students, as well as curriculum development and teaching at IMU by Dalhousie faculty members. Dalhousie has designed a successful pre-clerkship training program for the IMU students to assist in the transition to the Dalhousie clerkship training model, communications skills and orientation to the Canadian health and medical education contexts. Key results include 44 medical doctors trained at Dalhousie to date who can return to practice medicine and manage health care programs and facilities in Malaysia.



**David Fraser  
has included  
Dalhousie  
in his will.**

"It's a natural outcome of having been fortunate in life," says David. "The quality of education I received at Dal and my association with outstanding professors and mentors were major prerequisites for my career."

True to the passions of the Fraser family, David and his wife Jean's bequest will support the Department of Radiology Research Foundation, established by David in 1983, as well as future Dalhousie athletes.

By remembering Dalhousie in your will you too can play your part in supporting Dalhousie's students and the Faculty of Medicine. Bequests can establish scholarships, support faculty priorities and generate financial resources.

**Please remember Dalhousie's Faculty of Medicine  
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Contact Wendy McGuinness:  
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## A Call For Nominations for 2007/08

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, as well as Young Alumnus of the Year. Among your classmates there may be individuals who should be considered for these awards. The **DMAA Award for Family Medicine** (awarded to a family physician who exemplifies the spirit of medicine in family practice) is new this year. The DMAA Board of Directors asks that you consider nominating a classmate by calling our office to request the nomination form or accessing the form at [www.dalmedicalalumni.ca/awards.php](http://www.dalmedicalalumni.ca/awards.php).

### Honorary President

Awarded annually to a Dalhousie medical graduate to recognize outstanding contribution to the excellence and prestige of our alma mater, and signifies a special loyalty and affection for the medical alumni of Dalhousie University.

### Alumnus of the Year

Honouring a graduate of Dalhousie Medical School who has made a significant contribution to medicine either through clinical expertise, teaching, research or administration. Areas taken into consideration while selecting the recipient include: activities while at the medical school; professional activity (locally, nationally and internationally); patient care; research; teaching; overall activity in the local community; publications; any military involvement; recognition by others; ongoing support of the university, of the medical school and of the Alumni Association; and leadership and example they set for others.

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# LUNCH WITH A PRESIDENT

## President George W. Bush seeks out Blaise Baxter to learn about his innovative surgical technique

By Ethelyn Mosher

American president George W. Bush recently had lunch with Dalhousie medical alumnus Blaise Baxter, a neuroradiologist at Erlanger Centre, in Chattanooga, U.S.A.

Baxter received his MD from Dalhousie University in 1988. Prior to moving to the United States, Baxter was employed at the Queen Elizabeth II Health and Science Centre in Halifax where he was known for his specialty of clamping off brain aneurysms with non-invasive surgery. This interventional neuroradiology procedure, MERCI, done following a stroke, removes the blood clot from the brain by non-invasive surgery and leaves no paralysis. He was the only surgeon east of Montreal who conducted this unique procedure.

In 1999, he accepted a position at Erlanger Centre in Chattanooga. Recently the Chattanooga neuroradiologists have formed a group and are responsible for intervention radiology in the city and surrounding area. Baxter heads the group. This MERCI method surgery was the main reason Bush wanted to visit Erlanger Centre. Baxter gave the president a tour of the centre and a detailed account of this unprecedented type of surgery. After the tour, they exchanged personal words before the president left. About 20 minutes later, a Secret Service agent returned to the centre to tell the doctor that the president wanted to have lunch with him. They continued to chat over BBQ ribs and beans.



President Bush recently lunched with Dalhousie medical alumnus Dr. Blaise Baxter.

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# EXPANDING TO NEW BRUNSWICK

By Dr. Harold Cook, dean of the  
Faculty of Medicine

I travelled to New Brunswick this morning to take part in an announcement by the New Brunswick government concerning the proposed English-language medical education program in the province. Today's announcement in Saint John by post-secondary education, training and labour minister Ed Doherty and health minister Michael Murphy gives a green light to negotiate an agreement to train 30 New Brunswick undergraduate medical education students at the University of New Brunswick's campus in Saint John. The provincial government indicated that it wants to have the agreement finalized by the fall of 2008, so that the first students will commence their studies in September 2009. Our stance has consistently been that we will strive to be efficient and expedient in this process but will only agree to an implementation date when all necessary components are aligned.


The ministers also announced that the Province of New Brunswick, Dalhousie University and the University of New Brunswick will partner to create two working committees—a management committee to direct the development of the program and a negotiating committee. Under the proposed program arrangement, Dalhousie would adapt and deliver the curriculum while UNB Saint John would house the program and provide key components of infrastructure. The Province of New Brunswick has committed to hiring 27 new physicians over the next four years, who would spend about one-third of their time teaching students.

A four-year English-language MD

program in New Brunswick is a natural evolution in a long history of Dalhousie undergraduate and postgraduate education in this province. It represents a next step in our distributed learning model and supports New Brunswick's health human resource planning. The proposed program also fits with the medical school's strategic vision launched last month. This vision renews our mission as a Maritime medical school and our commitment to improving the health of our Maritime community. Clearly we want the people of New Brunswick to proudly regard this new campus and regional medical school expansion as a development that more closely identifies the Dalhousie Faculty of Medicine as their medical school.

However, we also recognize that we have a lot of work to do over the next few months. We know that we need to develop this program in a way that ensures the integrity of our entire medical education curriculum so that full accreditation standards are met and maintained. As a medical school, we need to ensure that the funding package provides us with sufficient resources to carry out the new program without compromising quality in our existing program. It will be a challenge but we are committed to working with our New Brunswick partners to achieve our shared goal for this new program.

This is a significant milestone in our long and successful partnership with New Brunswick and I will keep you updated as the process moves forward.

For more information, please visit the Academy of Medicine website at:  
<http://academy.medicine.dal.ca/> 

## Dalhousie Academy of Medicine Lecture Schedule 2007–2008

All lectures are in Theatre C,  
Tupper Link 4:00–5:00 PM

Lectures are open to faculty,  
students and members.  
Spouses/partners are welcome to  
attend.

### October 18, 4:00 PM

Speaker: Dr. Jean D. Gray.  
Topic: Drug prices in Canada: Are  
they really cheaper?  
Chair: Dr. Robert N. Anderson

### November 15, 4:00 PM

Speaker: Dr. Simon D. Jackson.  
Topic: Congestive Heart Failure.  
Chair: Dr. Gerald A. Klassen

### March 20, 4:00 PM

Speaker: Dr. David C. Barnes  
Topic: Positron Emission  
Tomography (PET): History,  
Current Use and Future Potential  
Chair: Dr. David Fraser

### April 17, 4:00 PM

Speaker: Dr. R. Lee Kirby  
Topic: Wheelchair skills training  
& its relevance to improving your  
golf swing  
Chair: Dr. Arthur H. Shears.

### May 15, 4:00 PM.

Speaker: Dr. Ward D. Patrick.  
Topic: Critical Care Medicine:  
Recent Advances.  
Chair: Dr. J. Michael MacSween.

For more information, visit:  
<http://academy.medicine.dal.ca>



**Dr. Lisa Bonang** is Nova Scotia's Family Physician of the Year.

### Nova Scotia's Family Physician of the Year: Dr. Lisa Bonang

**Dr. Lisa Bonang '93** has been nominated by the Nova Scotia College of Family Physicians as Family Physician of the Year 2007/2008. "It is truly a great honour and pleasure to nominate Dr. Bonang," says Cathie Carroll, executive director of the NSCFP. "Her patients, staff, and members of the community, as well as the selection put forth by the Honours and Awards Committee, are a reflection of the high

esteem in which she is held."

The College of Family Physicians of Canada will also honour Dr. Bonang as one of the 11 provincial recipients at the annual College of Family Physicians Reg L. Perkin Award, Family Medicine Forum 2007. This event will take place in Winnipeg in October.

**Dr. Terrence Gillespie, class of '57**, was named as a Member of the Order of Canada in a recent announcement by Governor General Michaëlle Jean. Dr. Gillespie, for many years the director of the IWK Cystic Fibrosis Centre, was responsible for instituting aggressive treatment for Maritime children with cystic fibrosis, which has resulted in marked prolongation of life and improvement in symptoms. He is recognized for his dedication and skill, his determined commitment and his kindness.

## Serving Her Community

**Dr. Margaret Casey** (class of '68, retired family physician and former director of admissions at Dalhousie

University Faculty of Medicine) received the Dr. Gerald and Gale Archibald Faculty Award in the Medical Humanities on May 17. Otherwise known as the Gold-headed Cane, this award is presented each year to a faculty member who combines scholarly attainments, humanism and professional skills and serves as an effective role model for students in the medical humanities. The award is made possible through the generosity of Dr. Gerald and Gale Archibald of Toronto.

## The End of an Era

**Dr. Winston Parkhill '68** retired in June 2007 after more than three decades of practice as a senior plastic surgeon in Halifax. He had a particular expertise in hand surgery and reconstructive plastic surgery. He was also recognized as an excellent teacher. Hundreds of family, colleagues, friends, former students and grateful patients gathered at the the Dalhousie University Club to honour his achievements, hard work and enthusiasm for life.

## OPENING OUR EYES



One of Dalhousie's most distinguished medical graduates, **Dr. Roderick R. McInnes '70** was awarded an honorary degree at the 2007 Spring Convocation for Medicine and Dentistry. His research has greatly advanced understanding of human genetics, particularly inherited causes of blindness. A graduate of Dalhousie and McGill universities, he is a

university professor and professor of pediatrics and of molecular and medical genetics at the University of Toronto. In 2000, he was appointed inaugural scientific director of the CIHR Institute of Genetics. He was the head of the developmental biology program at the Research Institute of the Hospital for Sick Children in Toronto and an international research scholar of the Howard Hughes Medical Institute and now serves as a senior scientist at the Hospital for Sick Children. He's made many important contributions to the understanding of the molecular basis of retinal and eye development and to the identification of genes and processes associated with inherited retinal degenerations. His research team has revised our understanding of stem cells in retina, with major implications for the treatment of human blindness. As co-author of the 5th, 6th and 7th editions of Thompson and Thompson's *Genetics in Medicine*, his impact on education is global. Among other honours, he is a Fellow of the Royal Society of Canada and the Canadian Academy of Health Sciences and received the Samuel Rosenthal Award from the Rosenthal Foundation of Cleveland in 2002. □

# RESEARCH DAY

## Building on success

By Dr. Martin J Gardner,  
Associate Dean,  
Postgraduate Medical  
Education

The Faculty Resident Research Day 2007 was a great success. We would like to build on that success by encouraging more programs to participate and by having more residents and faculty attend. As you may know, we changed the day this year to allow each program an opportunity to have a resident from that program present, as well as continuing to have several presentations from graduate students in our faculty. It is my hope that every training program at Dalhousie will be represented next year.

The Faculty Resident Research Day next year (May 22, 2008) will be one of the PGME regularly scheduled academic days. It will take place at the Holiday Inn Select on Robie Street. We plan on including a specific research workshop for PGY1s during this day and look forward to seeing all PGY1s in attendance for at least a half day. I know that all residents will be as impressed with the work of their colleagues as I was this year.

We want to thank both the Dalhousie Medical Alumni Association and Dalhousie Medical Research Foundation for sponsoring numerous awards. Their support has made the FOM Resident Research Day an extremely successful and well recognized event.

In addition, because this year's event moved from a half day to a full day, we want to thank the following sponsors for their contributions. Our sponsors include: Dalhousie Medical Alumni Association (DMAA), Dalhousie Medical Research Foundation (DMRF) and Medtronic. Hopefully next year, we can add to this list of sponsors. □

## 2007 Faculty of Medicine Resident Research Day Winners

### CSCI/CIHR/Postgraduate Award of \$1,500 for best overall presentation

*\$1,000 cash and \$500 travel expenses  
to the CSCI Annual Meeting*

**Lisa Barrett**, Internal Medicine

TOPIC: The Character of anti-HCV T cell responses differs between spontaneous treatment-induced viral clearance

### Postgraduate Medical Education Award of \$1,000

*for best overall clinical presentation*

**Chris Lightfoot**, Diagnostic Radiology

TOPIC: Survey of Radiologists' Knowledge for the Management of Severe Contrast-induced Allergic Reactions: Support for the Use of Epinephrine Auto-injectors in Radiology Departments

### 2 Dalhousie Medical Research Foundation Awards of \$1,000 each

*DMRF Resident completing a full year  
of research.*

**Lisa Barrett**, Internal Medicine

TOPIC: The Character of anti-HCV T cell responses differs between spontaneous treatment-induced viral clearance

*DMRF resident who has  
incorporated research into  
the year of training.*

**Katrina Hurley**, Emergency Medicine

TOPIC: Why are Emergency Departments holding back on holding chambers for children? Facilitators and barriers to change.

### 4 Dalhousie Medical Alumni Association Awards of \$1,000 each

**Greg Trottier**, Urology

TOPIC: Ureteral Obstruction

**Justin French**, Ophthalmology

TOPIC: Culture of Corneal Transplant Material

**Lara Williams**, General Surgery

TOPIC: Molecular pathogenesis of esophageal adenocarcinoma

**Janet Sommers & Marie Josie Klett**,

Family Medicine Northumberland

TOPIC: Troponin I assessment of middle-aged adults in the emergency department: Factors associated with troponin elevation and patterns of use.

### NSHRF Best Poster Award of \$1,000

*for best overall Poster presentation*

**Darren Costain**, Orthopedic Surgery

TOPIC: Osteolysis in cancer: A role for the genetic manipulation of RANK expression





# SPECIAL CONVOCATION FEATURE



Dr. Ian Mobbs with Steve Morley, computer services manager at Med IT.

## 2007 Convocation AWARDS GALA

The **Dalhousie Medical Alumni Association** again sponsored its annual convocation awards at the Medical Graduate Class of 2007 Gala Convocation event at the Halifax Marriott Harbourfront. The **Resident Teaching Award** was presented to **Dr. Chris Murphy** for teaching excellence as a resident physician. The class of 2007 presented **Steve Morley** with the **Honourary Class Member Award**. **Dr. Ian Mobbs** received the **Silver Shovel Award**, also known as the "Professor of the Year Award." For more information, visit [www.dalmedicalalumni.ca/awards/silver\\_shovel.htm](http://www.dalmedicalalumni.ca/awards/silver_shovel.htm)



Dr. Ross Langley, '57 toasts the Class of 2007.

## TOAST TO 2007 GRADUATING MEDICAL SCHOOL CLASS

**Dr. Ross Langley '57** offered this toast to the graduating class on May 26, 2007.



Convocation day is a special moment for graduates and their families alike.

Thank you Dr. Gupta for your generous and gracious introduction. I also want to thank the convocation committee for the honor of offering this toast to your class.

Dr. Gupta mentioned I graduated in 1957, 50 years ago. I reflected on those 50 years and wondered: what I might say that would be of interest. I decided on one comment and one observation.

I selected the comment for two reasons: because of an activity the class undertook at convocation yesterday and because I have been working in it and on it for some time. That is the patient-physician relationship.

Medical science and clinical practice have changed dramatically over the past 50 years. But so have the values expected of the physician in the patient-physician relationship.

Yesterday you solemnly pledged the Hippocratic Oath. But we were told you adapted that ancient oath. Interesting!

President Traves told me this week that oaths were not administered at any other Dalhousie convocation. Actually, medicine is the only profession that consistently administers an oath.

The original Hippocratic Oath had this sentence: "Into whatever houses I may enter, I will come for the benefit of the sick..."

This sentence has led to extensive analysis and the conclusion is that it is all about the patient-physician relationship. And from that relationship can be derived the ends of medicine.

In that sentence there is the physician's commitment to put the patient's welfare first. "I will come for the benefit of the sick."

In most professional codes the first article ordinarily expresses that obligation. For example Article one in our professional code, that of the CMA is: "Consider first the well-being of the patient."

In ethical analysis, this is considered the internal morality of medicine. This internal morality has agreed value in helping to define the virtues required of a good physician, including: beneficence, respect for patients, social justice, competence, commitment, compassion and communication skills. In our current understandings however it requires the individual patient's voluntary judgment as to what is in their best interests.

An ethics scholar at the Kennedy Institute of Ethics explained to me a few years ago: "People come to law for sanctuary. They come to medicine for healing."

Can we imagine how reassuring this is? In the patient's hour of need of healing, in knowing that their physician, will put their interests, as determined by them, through mutual understandings, first?

Other professionals, in health, in law, in teaching, in ministry also derive an ethic from the specific ends of their profession, which like medicine, are focused on a special type of human relationship.

We are grateful, through the oath you took yesterday that you have made that commitment to medicine's ethic, to its special relationship to the patient.

Now an observation. I am one of the many who believe that today's physicians and today's new graduates are unsurpassed in history. You, for example, are a distinguished group. You were at the top of your arts and science undergraduate classes. You underwent a rigorous selection process. You successfully completed the most up-to-date curriculum. During clerkship, you

successfully completed a demanding supervised practice in one of the highly recognized academic and clinical centers. You have worked hard. You have been successful.

You are to be congratulated. And now you will celebrate.

So, I would like to acknowledge, those who are celebrating your success with you. Your parents, who from the very beginning and through the years, recognized your potential. Your partners who have been steadfast and influential. And many others, family and friends, who love you, and recognize your achievements; many of whom are unable to be here tonight. This is an important, a memorable, a historic event for them.

I want to add another group who are celebrating your accomplishments tonight: your teachers. They had the good fortune to work with you over the years and were enriched by those opportunities. And so, I ask you to please rise, to toast the graduates of the Class of 2007.



While convocation day is the culmination of years of study, it's also a special moment for graduates to share with their classmates, with whom they've experienced so much.

## Graduation with Distinction

The following students, graduating in the class of 2007, reached a high standard set by the Faculty of Medicine.



Shannon Bradley  
Alison Clifford  
Janet Edwards  
Jodi Enright  
Lorri Keefe  
Andrea Lantz  
Chryssa McAlister  
Elizabeth McCaw  
Heather Rigby  
Jenny Robertson

## Class of 2007 DMAA Awards



**Gold D's**  
Thalia Field  
Chris Geddes  
Joey McDonald

**Silver D's**  
Jeremy Beck  
Dylan Blacquiere  
John Brandesma  
Matthew Boyd  
Shubha De  
Jennifer Durber  
Megan Hiltz  
Saima Husain  
Nathan Urquhart



# DALHOUSIE MEDICAL CLASS OF 2007

## Valedictory Address

By Joey McDonald



Good evening ladies and gentlemen, honourable guests, friends, family, and most importantly, my fellow classmates, the members of the Class of 2007. It is my distinct honour, and a most humbling privilege, for me to be able to stand before you tonight and deliver this address.

Please don't feel the need to take notes, as I've been assured that this lecture will be posted promptly on Medix—along with all of the outstanding LMCC review lectures. Before we get started, could Jeremy Beck please confirm that he can hear me, as I'm not sure that there are any other microphones available to put on. Also, if I could ask Ajiri to hold all of his questions until the end, it would be greatly appreciated.

A special welcome tonight goes to Dr. Richard Goldbloom, chancellor of the university, and to Dr. Harold Cook, the dean of the Faculty of Medicine. For those who don't know, Dr. Cook's first year as dean coincided with our first year of medical school. Unfortunately, Dr. Cook still has some outstanding and unsigned ITERs and is unable to graduate with us this evening.

It is hard to believe that this day has been four years coming. Many of you have remarked, quite rightly, that it feels like only yesterday that we first came together in the halls of the Tupper for the first night of Orientation Week. I'm sure

we all can recall standing around nervously, asking each other the same questions over and over, and ultimately deciding that if you couldn't remember a person's name or what they did for their undergrad after the third try, well, then, you just did your best to fake it. But after spending weeks—OK, who am I kidding, months for some of us—saying “is that person in my class?” we eventually got it.

Learning each other's names, however, was just the first challenge of many to be presented to us in medical school. It was not long before our first exam was upon us. Despite the gentle guidance of Dr. Mobbs and Dr. Sinha, it was not difficult to see that the stress of our first ever exam of medical school was beginning to take its toll. An intervention was required. And Dr. Sinha stepped up to bat. In a desperate attempt to assuage our fears, and to reassure us of the joys of the pass/fail system, she delivered words that I will never forget: “I doesn't matter if you get 99 per cent or 96 per cent.” Not exactly what everyone who was feeling just a touch below a 96-per-cent performance was hoping to hear. No wonder some of us began sleeping in the tutorial rooms.

But we survived. And slowly, we adjusted. Albeit some better than others.

I distinctly remember saying out loud after that first exam, “That's it—I'm never procrastinating again!” Well, a clean apartment, a tidy desk, and a laundry basket sorted alphabetically later, and I found myself writing this speech last night. I guess old habits do die hard.

There were many other challenges along the way. Another early challenge to overcome was something I'm sure all of us, and, certainly, each and every physician in the room has struggled with at times: the uncanny ability to convince yourself that your random assortment of symptoms do, indeed, constitute a slightly atypical case of whatever obscure disease it is you're reading about at the time. Speaking for myself, I thankfully was able to convince the voices in my head that I was a figment of their imaginations and we've been getting along fine ever since.

But as we progressed from Med I and II into clerkship, the challenges only grew. Who can forget their first night on call? I'm sure no page will ever be returned faster, or with more of a sense of dread, than the first time your pager went off in the wee hours of the morning. Or the first time you had to see a patient on your own and not only come back to your staff with a history and physical but somehow put



Dalhousie medical students have formed friendships that will last a lifetime.



together a diagnosis and management plan. I'm sure we all remember struggling through our first dictation, when you were proud just to get through the "patient name" without stopping once or twice. Or, finally, telling a staff surgeon that yes, you do indeed see whatever

mate professed how great it was to drink for free all night, and that all he had to do to get that privilege was leave his credit card behind the bar, we have never shied away from getting together for a bit of fun. Even exams brought about good times, as with every exam came the in-

because it featured Matrix Ping-Pong, quite possibly the world's greatest Euphoria skit ever. But because that was the first time I felt our class, our whole class, ever truly coming together and I feel that we have been inseparable since.

Yes, the past four years have provided

## **"Through each of these challenges, we learned a little, and we grew as people—and as future physicians."**

structure it is they're currently pointing out from your vantage point of retracting at arm's length while facing the other way and then praying to God that you don't get asked any questions about it (or, at the very least, for God to strike you dead before you have to answer).

However, as evidenced by us being here today, we've met these challenges and we've overcome them. Over the years, we've had many successes, as well as many failures. But regardless of outcome, through each of these challenges, we learned a little, and we grew as people—and as future physicians. And it is holding on to that virtue, not in never failing, but in learning from your mistakes and in rising each time you fall, that will help us succeed as physicians.

Although med school has certainly been a challenge, it has most definitely provided its share of good times and great memories. From lounge parties of unparalleled themes to repeatedly converging on Matty Smith's cottage to Med Balls, including one at which an unnamed class-

evitable after-party. It still amazes me to this day that you all trusted me to put you on a bus that you couldn't see out of and deliver you safely to an unknown location—namely, the wilds of Dartmouth.

Our level of participation in events has always been astounding. From the year we won MedGames (okay, everyone from Dal won MedGames that year, but we were definitely the driving force) to our commitment to Dal-MUN (including this year's performance, ensuring that George Street will never be the same), we have always turned out in record numbers.

However, it is the Euphoria experience every year that I cherish most. This melting pot of our many talents, from singing to dancing to comedy—OK, raunchy comedy—has always provided an opportunity for everyone to come together in a very unique way and show what they've got (with some showing a little more than others). Yet of all the Euphoria experiences, it was our performance from first year that I feel means the most. And, no, not because we won it. And, no, not



**Convocation day was a time to reflect on years of shared efforts.**

us with more than enough amazing memories of our time here at Dal. And although it seems like only yesterday that we started this journey, it also feels like we have spent a lifetime together. I feel that I mean this in two ways. The first is the closeness we share, both as a class, and between each other. The friends I've made here are some of the best I have, and at times it feels like I've known them forever. (OK, Gavin, you're the exception—I pretty much have known you forever). I think this speaks not only to



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## SPECIAL CONVOCAION FEATURE



**Studies aside, students discovered many shared interests.**

the bond we've developed with each other over time, but it also speaks to the type of people who aspire to become doctors. And that's what's so great about med school—I've never met a collection of people that I felt were so like me, in terms of sensibility, ideology, and, of course, striking good looks. I truly can't imagine a better group of people being brought together.

The second way is that it feels like we have shared a lifetime of experiences together. Many of us have been together to share in each others' most joyful and most precious moments. From weddings to the birth of a child to being there when we finally found out what we were going to do with our lives, we have been there with each other to help celebrate. (Although I must say, for certain classmates, the frequency with which you've had us celebrate has been truly astounding.)

Yet it has not only been moments of joy that we have shared. We have supported each other through some of our most painful times. Who can forget the pain we all felt after a certain classmate's bachelor party, and the "sympathy" hangovers we all had that fateful morning in Dr. Forward's class. But we have also been together through times of real pain and heartache, through agony and sorrow, through the death of a loved one and through personal struggles. But we all have been there, to rally around each other, to come together in times of need, and to help each other through. We stuck together and we got through it.

It is that compassion for one another that I feel is the most important bond we share. Whether we come together to celebrate, to mourn, or to help a classmate in times of trouble, we have always been there for each other and we will



**During their studies, med students matured together.**

always be there.

Earlier when I spoke, I said that this day has been four years coming. I chose my words carefully because I certainly cannot say that this day has been four years in the making. The fact is, this day represents a culmination of a lifetime's work. For each of us, we have worked very hard to get here. This day represents everything we have strived for, and, hopefully, everything we have wished for.

But despite our own hard work, the fact is that we could not have done this on our own. To speak honestly, we could not have done this without all of you, our friends and family, and tonight we honour you and the support you have given us, as well as those we have lost along the way. You have been there for us in our times of need, offering us your love, your sympathy, and your patience. You have even put up with how difficult we can be at times.



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## GRADUATING CLASS PRIZE LISTS

**Dr. C. B. Stewart Gold Medal**  
Janet Edwards

**Dr. John F. Black Prize**  
Janet Edwards

**Meera Gupta Memorial Prize**  
Dr. Ram Singari Boodoosingh

**Dr. S. G. Burke Fullerton Award**  
Jodi Enright

**Jaime Snowdon Memorial Medal**  
Andrew James Cowie, MD

**Dr. Robert C. Dickson Prize**  
Janet Edwards

**Dr. Richard B. Goldbloom Award**  
Fiona Liston

**Dr. Frederick S. Goodine Scholarship**  
Jennifer de Jong

**Dr. Mabel E. Goudge Prize**  
Janet Edwards

**Dr. Lawrence Max Green Memorial Award**  
Alex MacLean

**Dr. Carl Perlman Prize**  
Shubha De

**Dr. Graham Gwyn Memorial Prize**  
Heather Rigby

**Dr. J. Donald Hatcher Award**  
Heather Rigby

**Dr. W. H. Hattie Prize**  
Matthew Boyd

**Dr. Leo Horowitz Prize**  
Beth Furey

**Hunter Humanities Award**  
Chryssa McAlister

**Dr. N. N. Isa Achievement Award**  
Eva Barkova

**Dr. R. O. Jones Prize in Psychiatry**  
Jodi Enright

**Kidney Foundation of Canada**  
Vineet Bhan

**Lange Book Prize**  
Janet Edwards

**Dr. Frank G. Mack Prize**  
Rick Jaggi

**Dr. Harold Ross McKean Award**  
Ken Roberts

**Dr. J. W. Merritt Prize**  
Matthew Rigby

**Michael Brothers Prize**  
Thalia Field

**Dr. Clara Olding Prize**  
Janet Edwards

**Poulenc Prize**  
Janet Edwards

**Dr. Robert F. Scharf Award**  
Lorri Keefe

**The Albert A. Schwartz Prize**  
Nathan Urquhart

**Society for Academic Emergency Medicine**  
Christopher McCrossin

**Dr. J. C. Wickwire Award**  
Brendan O'Neill

**Dr. Lourdes I. Embil Award**  
Alex MacLean

**Dr. I. M. Szuler Award**  
Ryan MacDougall

For that, we are eternally grateful.

I feel it also appropriate to thank the teachers and mentors who helped us get here. Be they doctors, residents, basic scientists, or whomever, they did their best to instill in us only the most positive of traits and the most evidence-based of knowledge. They, too, have helped shape the doctors we have become.

It has been four years since we first entered the doors of Dalhousie Medical School. Four years since we came together calling each other classmates and colleagues. We leave today, however, calling each other friends and, better still, family. We leave here with the knowledge, the confidence, and the ability to take this next step in our journey towards our goals and dreams. We leave here with memories. Although we'll now become separated by distance, by time, and by the choices we have made, we will always have the memories of the time we have spent at Dalhousie to keep us together. True, these have been four years of our life, but for me at least, they have been the

best four.

Now, I would be remiss if I delivered a valedictory address and didn't include some sort of advice for the future. However, I've also heard that whatever you're trying to say, chances are, someone has already said it better. Luckily enough, there is an esteemed history of doctors who are also writers. I would like to leave you with the best advice I've ever received, the words of one of the most literary doctors who ever existed—one who has undoubtedly touched and left a lasting impression on most, if not all, of our lives. And, no, I'm not talking about Osler.

Oh, the Places You'll Go! by Dr. Seuss.

I know for a fact that we're all destined for great things. However, in those moments of hard times, we can always remember that we have each other, and the memories of our time here at Dal, to get us through.

Enjoy the rest of the evening.

Congratulations Class of 2007! We finally made it!

Thank you. □



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## Dalhousie 1959 Medical Class Interim Reunion

Seven classmates of 1959 had an interim 48th reunion at Stuart and Elsie Soeldner's home in Sacramento, California on January 19 and 20, 2007. Attendees included Randy and Jackie Buchanan, Barry Lawrence Green and Rona, Patrick and Doris Kavanagh, Sam and Mildred York and Don and Eleanore Brown. Also, Evelyn Lightbourne came all the way from Puerto Rico.

The event included a wine-and-cheese reception with hors d'oeuvres and a variety of California fine wines. A class memorabilia table displayed items including Pharos 1959, containing graduating pictures with a brief notation on each classmate. We all had a wonderful time in such gracious surroundings including a library and reading room. Our Saturday night class dinner at a local restaurant was also a great success

with an excellent choice of menu, organized by Stuart and Elsie.

It was tremendous to see our classmates in such good health and renew old friendships. Memories were easily recalled, often

with a bit of humour. A number of us took this opportunity to visit art museums and other interests in the area. We would like to thank Stuart and Elsie for being such gracious hosts.



From left to right: Lawrence Green, Sam York, Evelyn Lightbourne, Pat Kavanagh, Randy Buchanan, Don Brown, Stuart Soeldner

### Upcoming Reunions

Is your class reunion coming up? Planning is underway for the reunions listed below. Contact the DMAA office at [medical.alumni@dal.ca](mailto:medical.alumni@dal.ca) for further information.

**Class of 1957**  
September 6–9  
Charlottetown, Prince Edward Island

**Class of 1962**  
October 4–5  
Halifax, Nova Scotia

**Class of 1965**  
March 23–29, 2008  
St. Kitts, West Indies

**Class of 1977**  
April 6–18, 2008  
Caribbean Cruise

**Class of 1982**  
August 10–12  
Keltic Lodge, Nova Scotia

**Class of 1987**  
August 10–12  
Halifax, Nova Scotia

**Class of 1997**  
August 3–5  
Digby Pines, Nova Scotia



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Join us for lunch, dinner and weekend brunch! Recommended with 2 stars "Where to Eat in Canada", and "Wine Spectator Award"

## 35+ Reunion for the Class of '71

Some 24 members of the class of '71 (and their significant others) spent the weekend of June 22 to 24 in Halifax marking their 35+ Reunion. Class members came from as far away as Brazil, New Hampshire, Ontario and New Brunswick. The group initially met at the home of Harold and Myrna Yazer for a welcome BBQ. The gracious hospitality of the hosts and the informal and welcoming environment set a delightful tone for the entire weekend.

On Saturday morning, Dr. Harold Cook, Dean of Medicine, hosted a breakfast and gave an in-depth overview of Dalhousie Medical School today. The group appreciated learning of the advancements made by our alma mater as well as the challenges that the school is presently facing. We were delighted to have Barbara Blauvelt, honorary class member, join us.

This session was followed by a series of fascinating presentations by four of our classmates, Joel Kirsh, Lee Kirby, David King and Tom Horan. They covered such wide-ranging topics as radiological scanning, wheelchair skills, the impact of the illness of George I and humanism in health care delivery in Brazil.

Lunchtime provided additional opportunity for catching up and reminiscing. Over the weekend, classmates fondly remembered the nine members of our class who are deceased. Afternoon activities were influenced by torrential rain but a number braved a harbour cruise and a city tour.

All those attending were treated to gourmet food presented with flair at Chives on Saturday evening. The atmosphere, delicious food and camaraderie combined to make a memorable and enjoyable evening.

The reunion wrapped up on Sunday morning with a breakfast and conversation session. Conversation included planning for the next reunion in four years time.



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## Dalhousie Medical Class of 1972 Reunion

The class of 1972 held its graduation party at the Oak Island Resort with entertainment by Ryan's Fancy. Thirty-five years later, 35 class members (plus spouses, partners and family) returned to the Oak Island Resort for a wonderful and very memorable weekend reunion. Getting together with each other was all the entertainment we needed as we enjoyed sharing our stories and experiences over all these years.

The July 1 weekend brought fine weather to this ideal location. Activities included some CME from class members, great meals together and cruising on Mahone Bay. Without exception everyone raved about the reunion experience, as each get-together seems more important as the years go by. While some are retired, most of us are still working and enjoying medical life as much as before. We had great weather, great location, great company and a great reunion. It was such



**Back row, left to right:** Steve Hart, Joe Harrison, Wayne Bell, Wayne O'Brien, Jim Fitzgerald, Rudy Hyles, Jim Izzard, Bill Taylor, Cyril Moyse.

**Middle:** Ian MacDonald, Jim MacNeil, Marc Goldberg, Phil McFarlane, John Jenkins, Mary Lynk, Heinz Scholz, Rick Anningston, Mike Daly, Ken Murray, Russ King.

**Front:** Tom Peters, Alan Freeman, Janet Speight, Mike Antle, Steve Cook, Carolyn Rideout, Cecil Sturge, Jim Fitzgerald, John Crumley, Nuala Kenny, Howie Parsons, Paul Kelly.

a tremendous experience that already we look forward to the 40th Dal Med '72

reunion, planned for Baddeck, Cape Breton in 2012.



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