

MEDICINE MATTERS

DoM | DEPARTMENT
of MEDICINE
Improving Lives

[HTTP://MEDICINE.DAL.CA/DOM](http://medicine.dal.ca/dom)

HALIFAX, NOVA SCOTIA, CANADA

No. 22, SUMMER 2016 NEWSLETTER

CARDIOLOGY • CLINICAL DERMATOLOGY & CUTANEOUS SCIENCE • DIGESTIVE CARE & ENDOSCOPY • ENDOCRINOLOGY & METABOLISM •
GENERAL INTERNAL MEDICINE • GERIATRIC MEDICINE • HEMATOLOGY • INFECTIOUS DISEASES • MEDICAL ONCOLOGY • NEPHROLOGY •
NEUROLOGY • PALLIATIVE MEDICINE • PHYSICAL MEDICINE & REHABILITATION • RESPIROLOGY • RHEUMATOLOGY

DEPARTMENT HEAD MESSAGE

In many ways, the beginning of summer is the New Year for academic departments because of the end of one academic year and the start of another. At this time then, it is fitting to recognize the accomplishments of faculty and residents, and to take stock of the department's strategic plan. The leads for each of the streams in the strategic plan provided updates at recent department meetings, and at our Spring Party, we celebrated the accomplishments of some outstanding faculty members and residents, and the achievements of many others highlighted here.

We will very soon welcome several new faculty members, a full class of PGY1s in Halifax and in Saint John, and our new chief and associate chief residents, Drs. Keigan More, Kate MacEachen, Andrew Caddell and Aimee Noel to their roles. Also, we recently received the results of the Department of Medicine Survey and have begun implementing recommendations, a new AFP proposal has been approved, and Dalhousie is actively searching for a new Department Head. There is much happening within the Department and within its partner organizations, which signals many opportunities for the Department and its members.

As a final note, I encourage you to take time to enjoy our all too short summer season. Be sure to relax or revel and rejuvenate with family and friends.

Simon Jackson, MD, FRCPC (C), MMedEd

*Interim Head, Department of Medicine, Dalhousie University
District Chief, Department of Medicine, Nova Scotia Health Authority
Professor of Medicine, Dalhousie University*

WELCOME!

Please welcome the following department members who will officially join the department on July 1st:

Name	Academic Rank	MD / Residency
Dr. Nabha Shetty, Division of General Internal Medicine	Assistant Professor	MD: University of Ottawa, 2011 Residency: Western University (PGY1-3), 2014 Dalhousie, 2016
Dr. Stephanie Woodroffe, Division of Neurology	Assistant Professor	MD: Dalhousie, 2010 Residency: Dalhousie, 2016
Dr. Monique MacFarlane-Conrad, Division of Physical Medicine & Rehabilitation	Assistant Professor	MD: Dalhousie, 2008 Residency: Dalhousie, 2015

RESIDENTIAL HOSPICE IN HALIFAX

Dr. Rob Horton, fellow Hospice Halifax board members, and their supporters recently celebrated the latest milestone in a bid to establish a residential hospice in Halifax. In May, the Nova Scotia Health Authority agreed to fund 50 per cent of the annual operating costs of the planned 10-bed residential hospice. We turned to Dr. Horton, Division of Palliative Medicine and Vice-Chair of Hospice Halifax, to describe what will be Nova Scotia's first free-standing residential hospice, and to update us on its current status, the lead up to the present, and the next steps. Dr. Horton joined Hospice Halifax's board of directors in 2008 and led the QEII Palliative Care Service's efforts to establish a residential hospice as part of a joint committee dedicated to the project in 2013.

What's happening now and how we got here



Hospice Halifax has committed to renovating adjacent properties on Francklyn Street in Halifax to create and open a residential hospice and academic centre of excellence for end-of-life care in 2017. The society is launching a capital campaign to fund the design, construction and development of the \$3M project. Annual operating costs are estimated to be \$1.72M, 50 per cent of which will be funded by the Nova Scotia Health Authority through reallocation of a portion of resources currently used to support palliative care patients in hospital. The remainder of the operating costs will be the responsibility of Hospice Halifax. "This is a significant commitment but the funding model is working in other provinces and we have many long-time community supporters, including Metro Rotary Clubs and the QEII Foundation, both of whom have committed significant start-up funds allowing Hospice Halifax to hire a CEO, obtain property and develop preliminary construction plans," says Dr. Horton. →



What is a residential hospice and why we need it

Part of the NSHA QEII redevelopment plan, Halifax's residential hospice will be a home-like residence with 10 private rooms where 24-hour end-of-life care is provided to individuals with terminal illness who need their symptoms assessed and treatment changed regularly. Currently, when the capacity for end-of-life care in the person's home has been exceeded, the only option for Nova Scotians is admission to an acute care hospital – most often the last place patients and their families want to be. It is also the costliest place to provide end-of-life care. Residential hospice is a more supportive and cost-effective setting for those who are unable to remain at home to die. Residential hospices have been established in all Canadian provinces west of Nova Scotia.

Model of care

Hospice Halifax will be responsible for the delivery of care within the residential hospice. The QEII Palliative Care Service will be a partner, providing access to palliative care expertise on a consultative basis. "Specific details about service delivery will be determined as discussions take place over the next year. We do know, however, that the residential hospice will fill a significant gap in the continuum of palliative care service and improve the quality of care for those who would benefit from end-of-life care outside of hospital, and that the QEII Palliative Care Service will take a leadership role in supporting the academic mandate of the hospice," notes Dr. Horton.

For more information on the residential hospice, visit the Hospice Halifax website: <http://hospicehalifax.org/>

RESIDENT ROTATION DRAFT



Few residents imagined themselves participating in a national league sports style draft to decide their rotation schedule until one day this spring when first- and second-year residents filed in or logged on to the Department of Medicine's orderly but excited Resident Rotation Draft. Residents in their respective years of study faced an Excel spreadsheet projected for all to see that contained the rotations for the 2016-2017 academic year. One by one residents selected the pending rotation until that rotation was filled and they moved on to the next. Each of the drafts (one for PGY1 and the other for PGY2) took just under three hours to complete, and upon their completion, residents knew their tentative schedules for the coming year.

"Our draft was done NFL-style and modeled after a similar draft started at the University of Calgary a few years ago. For us, it's the answer to what was a cumbersome, labour-intensive resident scheduling process, and so far, residents seem to be satisfied with the solution," says Dr. Ian Epstein, internal medicine residency program director. "Previously, the postgraduate education coordinator would devote more than 150 hours over a couple of months to navigate a maze of resident and service needs and wants and develop a resident rotation schedule. The process, though effective, wasn't ideal because of the required resources but also because it lacked transparency."

There are several pre- and post-draft steps that take place to deliver a final resident rotation schedule, but Dr. Epstein notes that even accounting for preparation, verification and finalization of the schedule, the draft is a more streamlined, time-conscious process, and resident satisfaction seems to be improved over the previous process.

MEET OUR 2016-2017 CHIEF RESIDENTS

Dr. Keigan More, Co-Chief Medicine Resident, hails from Kamloops, British Columbia, and earned his MD at the University of British Columbia.



Why?

"Because I want the opportunity to act as a representative for my colleagues and advocate for changes that improve the already strong Dalhousie internal medicine program."

What?

"I think the role of the chief resident is to be an ambassador for the internal medicine program and to represent the interests of the resident body with a goal of improving resident well-being, education and experience."

How?

"...by taking feedback from residents about matters important to them and using the information to create opportunities that will improve the overall resident experience in areas like administrative tasks, education, work-life balance and sense of community."

Dr. Kathleen (Kate) MacEachen, Co-Chief Medicine Resident, hails from Halifax and earned her MD at Dalhousie.



Why?

"To continue to develop our amazing resident-focused program. I am also passionate about helping my fellow residents to navigate the challenges of residency."

What?

"I think the role of the chief resident is to work as a facilitator between the resident body and the program. We also work to promote and market our program on the national stage. Finally, together with the program, we work to develop the educational programming of the internal medicine residency here at Dal."

How?

"One of my goals is to develop a resident resiliency training program. Residency training can be challenging and striking a healthy work life balance can be difficult. As a new mom and resident, I also know the importance of having a support network that enables you to fulfill your myriad of roles and responsibilities, and to stay healthy. This support can come from family and friends, but also from resident peers. My aim is to work with our residents to help them develop strategies and skills to become resilient and successful future physicians."

Dr. Aimee Noel, Associate Chief Medicine Resident (Saint John Site), hails from Moncton, New Brunswick, and earned her MD at the Université de Sherbrooke.



Why?

"I believe the Dalhousie Saint John IM program provides a unique and wonderful training opportunity, and this role allows me to promote excellence in our program."

What?

“A good chief resident is a dependable leader who inspires their peers to reach and achieve their residency goals. A chief resident is also a good listener, supportive and a promoter of resident wellbeing. The role allows us a rewarding experience as collaborator, not only with other learners but also with faculty and program administrators.”

How?

“I would like to build on the work of my predecessors and continue to make our program an enjoyable and rewarding experience for all learners.”

Dr. Andrew Caddell, Associate Chief Medicine Resident (Medical Teaching Unit, HI Site, QEII), hails from Halifax and earned his MD at Dalhousie.



Why?

“To act as an advocate for the resident program and to improve teaching for the MTU/MTU-ED, emphasizing whiteboard talks on core IM topics.”

What?

“Chief residents have a role to advocate for the resident group, while balancing service and department needs.”

How?

“I’m aiming to establish stronger, more standardized MTU/MTU-ED teaching with a morning report model, and to increase attendance with residents on other core general internal medicine rotations.”

2016 NSHA RESEARCH FUND COMPETITION (MARCH RESULTS)

Congratulations to the Department of Medicine members who were successful in the March NSHA research fund competition.

PI	Title / Amount
Josh Armstrong, research fellow (Supervisor: Ken Rockwood), Geriatric Medicine	Constructing a Measure of Frailty in the Canadian Longitudinal Study on Aging Database – \$3,000
John Hanly, faculty, Rheumatology	Cognitive Dysfunction in Systemic Lupus Erythematosus: A pilot neuroimaging study – \$15,000
James Kiberd, undergraduate student (Supervisor: Sudeep Shivakumar), Hematology	A Prospective Observational Study Assessing the Impact of Oral Anticoagulation on Menstrual Blood Loss in Women of Child Bearing Age with Venous Thromboembolism Disease with the PBAC Score – \$4,680
Arnold Mitniski, faculty, DoM Research	Biological Age in Relation to Frailty – \$15,000
Olga Theou, research scientist, Geriatric Medicine	Testing of the Pictorial Fit Frail Scale in the Geriatric Day Hospital – \$14,949
Ben Whatley, PGY3 (Supervisor: Bernd Pohlmann-Eden), Neurology	Measuring Cognition and Cognitive Reserve in Patients with First Seizure or New Onset Epilepsy – \$4,552

CONGRATULATIONS!

There is a tremendous amount of expertise and leadership among members of this department. The number of department members who deserve our congratulations for recent accomplishments is outstanding!

Dr. Laurie Mallery and **Dr. Paige Moorhouse**, Division of Geriatric Medicine, have been awarded the Governor General’s Meritorious Service Medal (Civil Division) for their work with frailty and end-of-life care. The honour recognizes outstanding accomplishments that set an example for others to follow, improve the quality of life of a community and bring benefit to Canada. Dr. Mallery also received the Diabetes Care Program of Nova Scotia Leadership Award in April.

Dr. Kenneth Rockwood, Division of Geriatric Medicine, has received China’s highest award for foreigners. The China Friendship Award was presented to Dr. Rockwood at a meeting in Beijing on Tuesday, May 17. Dr. Rockwood received the award for his role in helping to establish new methods of medical care for older adults.

Dr. Gordon Gubitz, Division of Neurology, and **Dr. Shelly McNeil**, Division of Infectious Diseases, have been recognized with the Dr. Lea C. Steeves Award, which highlights continuing medical education teachers who consistently provide an exceptionally high quality of education to their students.

Dr. Caitlin Lees, PGY3, recently received a Scotia Scholars (Masters level) award (\$10,000) from the Nova Scotia Health Research Foundation, and fellow resident, **Dr. Alexandra Legge**, PGY3, received a Dalhousie Faculty of Medicine Killam Scholarship (\$15,000). Drs. Lees and Legge are entering the Dalhousie’s Clinician Investigator Program this year.

Dr. Ian Epstein, was honoured in June with a Program Directors’ Award from the Dalhousie Faculty of Medicine for his leadership in postgraduate medical education.

Dr. Ravi Ramjeesingh, Division of Medical Oncology, is the recipient of this year’s Teacher of the Year Award in Medical Oncology, which was awarded at the 14th Annual Department of Radiation Oncology / Division of Medical Oncology Resident Research Day.

Dr. Ahmad Alkharaza, PGY2, and **Dr. Matt Miles**, PGY2, were each named Resident of the Month for April and May, respectively. The peer-nominated award recognizes outstanding resident performance in clinical, professional or leadership domains.

Dr. Chris MacKnight, Head, Division of Geriatric Medicine, recently accepted the role of Chair, NSHA Research Ethics Board, after having served as co-chair for 14 years. Dr. MacKnight will undoubtedly provide exceptional leadership to the Board, which now has a provincial mandate and has implemented a number of changes in the last year to best support the expanded research community.



SPRING PARTY 2016 RECAP

Dr. Evelyn Sutton, Division of Rheumatology, received the Department of Medicine Achievement Award. Dr. Sutton's contributions to the Department of Medicine and to the Dalhousie Faculty of Medicine as an academic leader are outstanding. She is a highly regarded, award-winning medical educator, well-respected clinician and administrator, and an active volunteer.



Dr. Sutton is a professor of medicine, head and chief of the Division of Rheumatology (2005 – June 2016), and associate dean of undergraduate medical education at Dalhousie. She is also director of the Arthritis Centre of Nova Scotia. An expert in scleroderma, an autoimmune disease that causes poor blood circulation and hardening of the skin, Dr. Sutton is an active researcher and member of the Canadian Scleroderma Research Group and the Arthritis Alliance of Canada. She has served as an advocate for fellow colleagues, learners and patients – together with the provincial Arthritis Society, Dr. Sutton led a successful initiative to have inflammatory arthritis recognized as a chronic disease by the Government of Nova Scotia, enabling the availability of benefits to patients.

Dr. Sutton has a special interest in medical education and has received many teaching awards, including the Canadian Rheumatology Association Teacher-Educator Award.

Dr. Sultan Darvesh, Division of Neurology, received the Department of Medicine Research Lifetime Achievement Award. For 20 years, Dr. Sultan Darvesh has searched for a key to unlocking the mystery of Alzheimer's disease. He and his research team have so far identified a single enzyme in the brain, butyrylcholinesterase, that is vital to early diagnosis and treatment of Alzheimer's. They are now working on the continued synthesis and further development of compounds that target butyrylcholinesterase.



Recognized internationally as a leading expert in research on brain tissue and dementia, Dr. Darvesh co-founded the Maritime Brain Tissue Bank in 1993 and founded the Behavioural Neurology Program and clinic at the QEII. Dr. Darvesh's commitment to advancing the diagnosis of Alzheimer's disease and to medical research has inspired residents and colleagues in the Department of Medicine for many years. He has served a number of roles in the research arena, including the Dalhousie Medical Research Foundation Irene MacDonald Sobey Chair in Curative Approaches to Alzheimer's Disease, a position to which he was named in 2014.

Dr. Geoffrey Turnbull, Division of Digestive Care & Endoscopy, was honoured with the Brian M. Chandler Award for Lifetime Achievement in Medical Education. A professor of medicine, Dr. Geoffrey Turnbull is a gastroenterologist and a GI motility expert. An outstanding clinician and accomplished researcher, Dr. Turnbull is a mentor to residents and colleagues and a strong patient advocate and public educator about the



impact of irritable bowel syndrome on patients' lives. Dr. Turnbull is a well-respected medical educator who has received numerous teaching awards at Dalhousie and beyond.

In 1998, Dr. Turnbull co-authored *IBS Relief: A Complete Approach to Managing Irritable Bowel Syndrome*, which is still considered the definitive patient guide to the disorder. He is a prolific researcher whose extensive research in gastrointestinal motility disorder has made him an international expert in irritable bowel syndrome. His work has been published in many of the world's top medical journals.

Faculty Excellence in Medical Education Awards were presented to:

Dr. Babar Haroon, Division of General Internal Medicine and Department of Critical Care

Dr. Stephanie Snow, Division of Medical Oncology

Resident's Choice Award for Outstanding Faculty was presented to:

Dr. Stephen Couban, Division of Hematology

Resident awards

In addition to our faculty acknowledgements, members of the resident group were recognized for their contributions over the academic year:

Dr. Stephen Walsh received the Excellence in Undergraduate Teaching Award while **Dr. Alex Legge** (PGY2) won the Excellence in Resident Research Award. Outstanding Resident Awards went to: **Dr. Leah Nemiroff** (PGY3), **Dr. Andrew Caddell** (PGY2) and **Dr. Mark Robbins** (PGY1) who also received an Outstanding Academic Performance Award along with **Dr. Alex Legge** and **Dr. Kevin Klassen** (PGY3). **Dr. Alison Dixon** (PGY3) won the Excellence in Summer Grand Rounds Award.

APPRECIATION TEA

The Department holds an annual appreciation tea to formally express our sincere gratitude to our administrative support staff for their hard work and dedication.

On June 22nd, Dr. Simon Jackson, hosted more than 70 guests in the Bethune Ballroom who enjoyed sweets, treats and the highly anticipated gift draws.

Thank you for putting patients first in all you do!

