Dr. Tehmina Ahmad, one of several Schulich Scholarship recipients, volunteers to help the disadvantaged negotiate social impediments.
A Scientific Artist: Seeing the World Through a Camera Lens

After a full and meaningful career as chair of Biochemistry, Ted Lo has found a new passion in photography – capturing award-winning images around the globe.
Schulich School of Medicine & Dentistry

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Dean's Message

Recently, I was walking through the streets of Oxford and came across a person wearing a T-shirt saying “I am more confused than a chameleon in a bowl of Skittles.” And this in the city that houses the number one ranked University world-wide. If they are confused there, we’re in trouble. But it set me off to thinking about how confusing it must be to look at the exciting myriad of changes happening at Schulich Medicine & Dentistry and trying to keep track of our progress and achievements on the many topical issues of the day.

Much has been said about Canada’s 150th birthday celebrations this year and whether it is even appropriate to celebrate given the history of First Nations treatment. I’ve listened to many discussions on the issue, some informed, some not so informed, and some so heartfelt it hurts to listen. For me the issue is not whether we celebrate or not – that is an individual’s decision. But it set me off to thinking about how much has been said on this many fronts... We’re a dynamic collection of individuals striving to drive our School to great heights, innovating on many, many fronts...

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For me the issue is not whether we celebrate or not – that is an individual’s decision. As a medical and dental school, the issue is how we became a nation in which the delivery of health care is predicated on being an Indigenous Canadian or not and, more critically, how do we address this in a meaningful way? How do we take our microcosm of the world and work to abolish health inequities? How do we get past our mistakes as a nation, get past the fear that we might make mistakes again, and move forward?

At Schulich Medicine & Dentistry, we’ve elected to start the long journey of understanding all of this, and work to develop sustainable curricula in partnership with our First Nations neighbours and colleagues that address the key calls to action of the Truth and Reconciliation Commission, and see meaningful change that will outlive our time.

This will not happen overnight. However, in the course of this upcoming year we will be deeply engaged in a process that has already begun to identify a course of action for our School. At the same time, we have risen to the challenge of introducing competency based medical education in our residency training programs. However, we are not just changing our residency training, we are critically looking at the entire lifespan of a physician as one of continuous learning, of constant attainment of new competencies, and of striving during a career to gain a mastery in one’s chosen expertise.

No other school in Canada, and truly only a few in North America, have chosen to tackle it from the moment an individual enters medical school to the moment they leave practice. It means fundamentally rethinking who enters medical school and how we educate for a broad range of competencies.

We will need to nurture the next generation of clinician teachers and researchers who will deliver on our social contract as a school of medicine and dentistry. It also means becoming a national centre for continuing medical education that drives change in our concepts of what competency means across a career.

This past year, we introduced sweeping advances in Schulich Dentistry, which are designed to place it amongst the top 10 dental schools in North America. This year begins the hard work of designing the new clinical training program that will fundamentally shift the teaching paradigm within just a few short years. This shift to a system of intensive mentorship following a dental learner throughout their four years will mandate a fundamental redesign of the teaching program. To build on this, we will be addressing the needs of our current faculty while focusing on recruitment and building an infrastructure that will drive a new faculty model and enhance our graduate training programs.

By the end of this year, we will open a new level 2/3 viral research facility in the heart of Western’s campus. One of only three such centres in North America, this multi-million dollar research facility will become home to one of North America’s leading virology research centres with a focus on HIV/AIDS, at a time when the rates of HIV/AIDS are climbing again.

Our investment in research continues at a breath-taking pace. The past several years have seen the most aggressive period of recruitment of new researchers in the history of our School.

This recruitment has touched every aspect of how we deliver our core mandate of becoming a national and international leader. The excitement is palpable as each of these individuals carves out their niche within their areas of expertise while collectively we build a critical mass in areas of research that are going to optimize lifelong health. It is an exciting transformation of the School that is fuelled by, and is complementary to, an ambitious University plan to establish a wide range of endowed chairs to support these individuals, by strategic investments across the University in Western Research Chairs, and by success in supporting incredibly skilled new leaders across all aspects of our programs.

With intellectual renewal comes infrastructure renewal, and we are in the early discussion and planning stages for renovations and new construction of spaces that will support and house research and education facilities for the School. We look forward to sharing more details of these plans with you in the coming months.

So, are we chameleons living in a bowl of Skittles? Not at all. While it is indeed a bowl of Skittles that we live in right now – a rich, vibrant, multi-coloured mix of tremendous initiatives – we are not chameleons. We’re a dynamic collection of individuals striving to drive our School to great heights, innovating on many, many fronts, and carefully finding our place leading change in Canada.

Welcome to the Skittles bowl. It’s a wonderful place to be.
Check-Up

**MPH Accreditation Increases Opportunities for Students**

The Master of Public Health program received its accreditation for five years from the Council on Education for Public Health (CEPH). It is the first program in Ontario to receive this accreditation, and only the fourth in Canada. Graduates from the program benefit from the accreditation as it opens up more employment opportunities, considering some employers and NGOs will only hire those who have degrees from a CEPH-accredited program. It also provides them with the opportunity to write exams for the National Board of Public Health Examiners in the United States.

**Campus Collaboration Continues**

Western University and the University of Windsor extended their affiliation agreement for the operation of the Schulich School of Medicine & Dentistry – Windsor Campus for a 10-year period. The first agreement led to the opening of the Windsor Campus in September 2008. Since then, the Campus has expanded to include postgraduate residents who train in Windsor, the first stages of the development of a research program, an enhanced role in helping to improve health care delivery in the community and a greater role in faculty affairs.

**#ILookLikeASurgeon**

Female surgery faculty and residents from Schulich Medicine gathered in operating rooms at London hospitals to add their voices to a global rallying cry for women surgeons. They did so by taking a photo and sharing it for the world to see. Their photo was in response to an illustration on *The New Yorker* cover depicting four female surgeons peering down below an operating light. Female surgeons from around the globe had been replicating the magazine cover and sharing their photos on social media using the hashtag #ILookLikeASurgeon.

**GlobalMINDS Summer Institute**

Michelle Quaye and Gunjan Mhapankar, Medicine Class of 2020, were chosen as two of the 10 Western University students taking part in the first-ever GlobalMINDS Summer Institute in Machakos Town, Kenya. Quaye, Mhapankar and their peers spent three weeks working with a team of students and faculty from Africa and Western University to evaluate and implement new solutions for mental disorders and related issues. Dr. Arlene McDougall, a Schulich Medicine professor, oversees the GlobalMINDS program and joined the students for the inaugural Institute.
World Health Organization Collaborating Centre Comes to London

Drs. Davy Cheng and Janet Martin are co-leading a new WHO Collaborative Centre through the Centre for Medical Evidence, Decision Integrity & Clinical Impact at Schulich Medicine & Dentistry. They will be studying access to safe surgical and perioperative care on the global stage. The Centre was established following the 68th World Health Assembly passing a resolution on strengthening emergency and essential surgical care and anesthesia, as a component of universal health coverage. The resolution designated surgery as an emerging pillar, based on the knowledge that five billion people around the world don’t have access to essential life-saving surgery and 30 per cent of the global burden of disease would be preventable through adequate access to safe essential services like c-sections and orthopaedic procedures in trauma.

Largest-ever University Research Grant to Reduce Burden of Brain Disorders

Western University’s BrainsCAN initiative received a $66-million investment from the Canada First Research Excellence Fund – the largest research grant in the University’s history. It provided a major boost to the ongoing research in cognitive neuroscience and imaging at Schulich Medicine & Dentistry and Robarts Research Institute, as well as the Brain & Mind Institute, and the faculties of Social Science, Science, Health Sciences, Engineering, Arts & Humanities, and the Ivey Business School at Western. BrainsCAN’s goal is to reduce the burden of brain disorders, which affect nearly 3.6 million Canadians, diminishing quality of life and creating an enormous burden on society and the health care system.

The Next Level in Simulation Training

The new Dentistry Simulation Laboratory opened its doors to first- and second-year students, replacing the older clinic constructed in 1968. The Laboratory is equipped with the latest teaching and dental technology and allows for enhanced training opportunities. The newly-renovated space features more than 5,000 square feet of leading-edge simulation technology, including true-to-life models, dental mannequins, digital x-rays and teaching cameras, all designed to develop the skill and precision vital to the practice of dentistry.
A unique educational session focusing on the much debated assisted-dying Bill C-14, was added to the undergraduate medical school curriculum in the fall of 2016. Medical students were joined by their peers in nursing, law, and philosophy, as well as medical residents. Bringing together legal, medical, theological and ethical experts, as well as policy leaders to engage in case discussions and panel interviews, learners had an opportunity to understand the complexities of the medical assistance in dying (MAID) legislation, the difference between palliative care and MAID, ethical duties of health care providers, informed consent, practical application, legal responsibilities and potential barriers to care. The interactive sessions also offered attendees the opportunity to explore their own views through discussion.

Dr. Marat Slessarev, PhD Candidate, and Charles Yin, MD/PhD Candidate are the 2017 Vanier Scholarship recipients at Schulich Medicine & Dentistry. They will each receive $50,000 annually for up to three years to support their research. Dr. Slessarev is researching the impact of critical illness and the therapies delivered during treatment to identify how this impacts long-term outcomes in intensive care unit survivors, and Yin is focusing on atherosclerosis and researching how macrophages differentiate between bacteria and host debris, as they help to clear cellular debris and internalize and kill bacteria.

From developing state-of-the-art techniques to image bones and joints while in motion, to helping more people receive a kidney transplant, researchers at Schulich Medicine & Dentistry were awarded close to $30 million in funding from the Canadian Institutes for Health Research (CIHR), with nearly half awarded to five projects through CIHR’s new foundation grants designed to provide long-term support for the pursuit of innovative, high-impact programs led by Stefan Everling, PhD, Dr. Amit Garg, David Holdsworth, PhD, Ravi Menon, PhD, and Andrew Pruszynski, PhD.
Dr. Bertha Garcia’s scientific and curious mind, combined with her student-centred approach, has led her on a journey to becoming one of Canada’s most revered medical educators and leaders.

By Jennifer Parraga, BA’93
The Scientific Mind

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Dr. Bertha Garcia
At 13, Dr. Garcia started teaching children in some of Lima, Peru’s poorest neighbourhoods. This humanitarian act, which brought her to the slums of her hometown, became her first foray into teaching and helped define an incredible career. Now she is one of Canada’s most revered medical educators and clinician leaders, and unquestionably one of Schulich Medicine & Dentistry’s most beloved faculty members.

Throughout Dr. Garcia’s journey to becoming an award-winning, renowned educator, she’s remained hungry for more knowledge about educational processes, and become increasingly more passionate about teaching and mentorship. Above all, her curiosity has remained constant, as has her principle that, when in doubt, ask a student.

Dr. Garcia began testing the medical teaching waters as a young resident in Calgary and quickly realized the more she taught the more she loved it. When an opportunity offering more teaching came up at Western University, Dr. Garcia and her young family packed up and headed east. Within a month of arriving at Western, Dr. Garcia was teaching pathology to dentistry students.

Comfortable and confident in the classroom, Dr. Garcia’s curiosity about how people learn and how best to deliver an engaging curriculum began to grow. She enrolled in a summer program focused on perspectives in teaching. It was here that she really began to understand that a good teacher is made and not born.

“After that week, I became much more aware of everything that I was doing in the classroom,” she said. “I also came to realize that there were a lot of good people around me who I could learn from.”

“I knew then, that I could not only just change the way I taught and interacted with students. I realized that I could influence curriculum, assessments and programs.”—Dr. Bertha Garcia
While she continued to learn from classroom experiences, Dr. Garcia also took advantage of an initiative by the Ontario government offering advanced degrees in education to physicians and completed her master’s degree in education.

Dr. Garcia says that after completing her master’s she realized she could do more; she could change the way things are done.

“I knew then, that I could not only just change the way I taught and interacted with students. I realized that I could influence curriculum, assessments and programs,” she said.

She began doing this through her roles as the Chair/Chief of the Department of Pathology and Laboratory Medicine at the School, a position she held for 10 years, and as the School’s Vice Dean of Education.

During the past nine years, the education program has achieved significant success under Dr. Garcia’s guidance. She is very proud of the launch of the Master of Public Health Program.

“A few years ago, Dr. Strong asked me and Jack Bend to develop the model and map out the feasibility of a master of public health program, which led to what we have today,” she said. “Now we have three years of graduates from this signature Program.”

She’s also very proud of the most recent accreditation process for the Doctor of Medicine (MD) Program and the work that has since ensued.

Dr. Garcia believes that the education teams at the School are the reason for all that success.

“I have a terrific team in medical education,” she said. “I think that my most significant contribution has been picking the right people for each of the portfolios. These leaders aren’t just administrators; they are scholars who are changing how students learn while being prolific in all areas of education research from admissions and student affairs to distributed education.”

Of all the achievements during her tenure as Vice Dean, Dr. Garcia is most proud of the ASPIRE award the MD Program received. The international award recognizes the School’s commitment to student engagement and the valuable role students play in shaping teaching and learning experiences within the MD Program.

Sponsored by the Association for Medical Education in Europe, Schulich Medicine & Dentistry is the only medical school in Canada to receive the award.

With much success, the past few years have also not been without challenges.

Dr. Garcia believes one of the most serious issues medical schools across the country are facing is the number of unmatched medicine graduates. The Association of Faculties of Medicine of Canada reported that in 2017, there were 68 unmatched current year Canadian medicine graduates after the second iteration of the match. In 2009, the total number was 11. Dr. Garcia says that medical schools are working together on this, along with their associations, provincial ministries of health, the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada.

“T’m optimistic that we’ll figure this out,” said Dr. Garcia. “For the first time there is a national effort to look at this, which is very positive. In the meantime, however, we have to determine how best to support our students, and look at alternate career paths for medical graduates.”

It’s this optimistic spirit that Dr. Garcia has carried with her throughout her career – especially as a senior leader. She admits that it can be somewhat lonely as one of only a handful of female leaders, but it has definitely been an interesting learning experience.

It’s this optimistic spirit that Dr. Garcia has carried with her throughout her career – especially as a senior leader. She admits that it can be somewhat lonely as one of only a handful of female leaders, but it has definitely been an interesting learning experience.

She’s grateful to her many mentors, most of whom have been men, who have always been supportive and provided advice.

“I remember advice I received when I was starting my career. It was a man who told me that you can’t be as good as the men; you have to better.”

While this can be tough to hear, she believes that those women who do move up through the ranks are truly extraordinary. And once they have become a leader, their opportunities only seem to increase.

Dr. Garcia finds herself serving as a mentor to many young women in medicine as she strives to enrich the diversity and strengthen the medical education program at the School.

Dr. Garcia’s term as Vice Dean of Education will end in 2017. And she’s ever more reflective on her greatest learnings from the past nine years. Of all the lessons learned, there is one that seems to have stood the test of time; when in doubt about a curriculum or policy change or even a leadership matter, ask a student.

“We can sit around a table and discuss an issue trying to fix a problem,” she said. “And we keep coming up short to find a practical solution. Then we’ll realize that we don’t have students included in the conversation; we have forgotten the very people who are central to the matter at hand.”

For Dr. Garcia, it’s a humbling experience, because more times than not, once the students join the conversation, the solution is close at hand.

“Students are an amazing fountain of information and knowledge,” she said.

Dr. Garcia is a firm believer in new beginnings and is mapping out the next phase of her career. On tap will be some writing and taking the Writing Master Class hosted by the Centre for Education Research & Innovation at the School. She’s also looking at engaging with more humanitarian work. And of course, she’ll keep teaching.

“I love what I do,” said Dr. Garcia. “I look forward to coming to work every day. I don’t think I could ever stop teaching, and there are so many ways I can contribute to medical education and society that is not the traditional classroom. I’m definitely going to be looking for opportunities to do that.”
Social media is a very powerful tool. It has the power to highlight our professional values, and the power to degrade our professionalism.” With this view, Dr. Barry Schwartz, assistant professor, Schulich Dentistry sets out a 21st century dilemma for health care practitioners and educators.

In 2017, social media is no longer a new phenomenon, but its influence on professional standards, pedagogy and the academic environment remains uncertain and contested.

As Schulich Medicine & Dentistry’s social media community continues to grow, it’s worth examining what this digital disruptor can teach us about professionalism and education.

Is social media a professional responsibility?

“If professionalism is a social contract between medicine and society, and society is increasingly using social media, is it a professional responsibility of physicians to consider the rewards and risks of social media in the care of patients, society and themselves, as well as the education of learners?”

This question is posed in a 2015 research paper published in the Postgraduate Medical Journal, “Thou shalt not tweet unprofessionally: an appreciative inquiry into the professional use of social media.”

Research shows that an increasing number of professionals of all stripes are relying on social media as an information source and communication tool. The Matters of Opinion 2017 report on Canadian media consumption habits found that social media’s status as a primary source of news and information has more than doubled in two years.

“Society is on social media, which means it’s essential to have a voice in terms of leadership, education and awareness,” said alumna Dr. Sara Taylor, MD’98, a physician practising in British Columbia after a recent move from Alberta. Dr. Taylor has written and presented on the topic of professionalism in social media for several years.

And it’s not just individuals like Dr. Taylor who are realizing the importance of social media in a professional context. Professional bodies are now formally addressing it as well. Groups such as the Canadian Medical Association and the Canadian Dental Association have adopted policies and guidelines for members. Most academic institutions, including Western University, also have social media policies in place for faculty, staff and learners, and codes of conduct now extend to behaviour in the digital world.

Challenging the values of professionalism

If such a responsibility does exist, what does this mean for the long-standing cornerstones of professionalism in medicine, dentistry and academia? Respected and established values like boundaries, privacy and confidentiality present unique challenges on social media.

“Social media is seen as disruptive to tradition and convention, particularly related to patient communication and relationships,” explained Dr. Javeed Sukhera, assistant professor in Psychiatry.

Maintaining professional boundaries on social media is complicated – patients, co-workers and students can access personal information and engage in inappropriate or uncomfortable interactions.
“It’s easy to transcend into too casual a relationship with patients,” said Dr. Schwartz. Dr. Sukhera agrees. “We’re giving the world a window into ourselves beyond our clinical duties more than tradition has permitted in the past, which can be problematic,” he said.

Privacy is ambiguous even with a growing number of personal settings and options available to users – which can lead to a false sense of security.

“When there is ambiguity about privacy, that’s when trouble can arise,” said Dr. Taylor. “We can be fooled into thinking we’re having a conversation among friends, but our messages can really be shared anywhere.”

Patient confidentiality is also a concern, even if posts or images are considered non-identifying.

Despite the challenges, the traditional values of professionalism continue to reign supreme in the digital realm. “Social media highlights the importance of professional values that we already have in place,” explained Dr. Schwartz.

Social media adopters and supporters at Schulich Medicine & Dentistry are proving that when faculty and learners are trained to recognize and adhere to these professional considerations, being connected online can be an extremely useful and positive tool.

**Expanding education and training**
The complex and dynamic digital world emphasizes the need to integrate social media training into teaching at all levels, including continuing education.

As the faculty lead for the ethics portfolio in Schulich Medicine’s psychiatry residency program, Dr. Sukhera is taking steps to bridge the knowledge gap by incorporating discussions around digital professionalism.

Formal discussions with residents cover a range of topics, from the nuances of specific social media platforms to ethical issues with Googling patients to navigating potential defamation or slander on physician rating websites.

“We need to have these discussions with learners in a proactive way to diminish fear and equip them with guidance and facilitation,” said Dr. Sukhera. “We talk about how to navigate these complexities while remaining anchored to professionalism and clinical best practice, as well as seeking emotional support if needed.”

Schulich Medicine & Dentistry students in the Doctor of Medicine and Doctor of Dental Surgery (DDS) programs are introduced to professionalism from the outset of their education, beginning with the professional oaths at the White Coat Ceremony.

“It gets the students thinking in this direction, about upholding the values of the School while they’re here and maintaining and building upon those down the road,” said Dr. Schwartz.

Dr. Schwartz teaches a unique curriculum in ethics and professionalism for dentistry students in each of their four years in the DDS program, exploring social media and interpersonal communication through a variety of activities and assignments.

His approach focuses on critical thinking and self-reflection. “I try to instill that being a reflective practitioner is integral to being professional,” he said. “We’re less likely to make mistakes if we reflect before hitting the send button.”

Dr. Taylor says finding role models is crucial for navigating unfamiliar territory. “Before you dive in and get active, the best thing you can do is observe first,” she explained. “Look up people in your field, your community and find examples of what good professional behaviour online looks like and mirror that.”

It’s difficult to anticipate what the next 20 years of social media will look like. But the professional values learned and practised at the School will help the next generation navigate the murky waters ahead.

“The professionalism bar is now set very high and there is a tremendous responsibility moving forward,” said Dr. Schwartz. “I give students the tools and resources, and I try to inspire them to be the best professional they can be.”

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**Why should you consider social media?**

- **ADVOCACY**
  “I’m of the opinion that social media is a very positive, powerful force for physicians and physicians-in-training to embrace the health advocate aspect of their identity, and to engage in new forms of communication that bring physicians and patients together to reinforce that on both sides of the conversation is a human being,” said Dr. Sukhera.

- **COMMUNITY**
  The potential to connect with a community of like-minded professionals and experts greatly appeals to Dr. Taylor. “Some of the people I’ve met through social media have translated offline,” she said. “There are real opportunities that can come from these connections.”

- **PROFESSIONAL REPUTATION**
  Dr. Taylor points to the opportunities for reputation building and management. “People are going to be looking you up online and writing reviews,” she explained. “Social media, whether that takes the form of a blog post or a Twitter profile, allows you to be more in control of how you’re seen and portrayed.”

- **EDUCATION**
  Social media is also becoming increasingly accepted as a valuable tool for teaching and learning. A commentary piece in the *Canadian Medical Association Journal* suggests the user-generated and collaborative aspect of social media introduces “a new dimension of participatory learning.”

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“We’re giving the world a window into ourselves beyond our clinical duties more than tradition has permitted in the past, which can be problematic.”

—Dr. Javeed Sukhera
Alumna Dr. Jennifer Gunter made international headlines this past year for her pointed and passionate criticism of a celebrity lifestyle and wellness website, calling it out on social media and her blog for promoting the myths that bras cause breast cancer, tomatoes cause obesity and condoms are carcinogenic.

Dr. Gunter, an obstetrician/gynaecologist and pain medicine specialist practising in San Francisco, California, was born in Winnipeg and completed her residency training at Schulich Medicine & Dentistry. That high-profile post is just one example of her mission to be a voice for science and evidence-based medicine online.

When the front-page of a well-known Canadian newspaper prominently featured a controversial article outlining the stories of women who claimed to have experienced catastrophic negative side-effects, including developing autoimmune disorders, as a result of the HPV vaccine, she immediately sat down at her keyboard to write a response.

On her blog, aptly titled ‘wielding the lasso of truth,’ she reflected on her own tragic loss of one of her triplets, and how her husband grappled to understand what she might have done in the week leading up to the loss to cause her to go into premature labour. She likened this experience to that of the women featured in the article.

“This is very important when we understand vaccine fears,” she wrote, “because bad things do happen to people and many, many people get vaccines. So catastrophic things will sometimes happen to people shortly after they get vaccinated and it is the job of science to figure out if this is cause and effect or not.”

The article, she said, missed reporting key scientific studies showing absolutely no difference in the number of women who developed autoimmune disorders after receiving the vaccine, versus the control group.

“After I wrote that blog post, other scientists spoke up; other journalists spoke up. And it solidified for me that if everyone just stays quiet, then nothing happens,” she said.

Wielding the Lasso of Truth
How scientists and medical professionals are crusading against ‘alternative facts’ and the rise of scientific skepticism

By Crystal Mackay, MA'05
Her blog post was republished by CANADALAND, a news site whose primary focus is on media and media criticism, and was shared widely on social media. Soon after, a group of scientists also penned a letter to the newspaper denouncing the article, and it was eventually pulled.

Dr. Gunter has been writing her blog and tweeting about pseudoscience for almost a decade – it is all in an effort to quell the tide of scientific skepticism and distrust of medical experts that seems to be infiltrating the mainstream.

Earlier this year, the Edelman Trust Barometer (a survey that measures the population’s trust in business, government, non-governmental organizations, and media), showed that Canadians’ trust in institutions was at an all-time low. The survey results indicated that more than half of Canadians don’t listen to people or organizations they disagree with and that they are more than 3.5 times more likely to ignore information that supports a position they don’t believe in.

Edelman called it, “an echo chamber effect which is magnifying the crisis in trust.”

“We are in a time when academics and the press are talking a lot about this idea of the ‘death of expertise,’” said Savita Dhanvantari, MSc ’92, PhD, a professor in Medical Biophysics who encourages her colleagues to speak to the public about their work in a way that the average Joe can understand. She tweets about interesting research using the hashtag #coolscience.

“Some of this distrust of experts is our fault. During the past several decades, increasingly the experts started talking amongst themselves and didn’t transmit that to the public. And the public got the idea that these professors and experts did whatever they did and it was irrelevant to their world.

“We are missing the boat if we are not communicating what we are doing, why we are doing it, why it’s so important, and how it directly impacts people’s lives,” Dhanvantari said.

And the impact on people’s lives can be profound. Mark Speechley, BA ’79, MA ’82, PhD ’87, a professor of Epidemiology and Biostatistics and an educator in the Schulich Interfaculty Program in Public Health, outlines some ways that distrust in science has had a direct impact on

“We have a hugely successful human invention called ‘science’ that some people reject outright, or believe in only selectively according to their ideologies and self-interests.”

—Mark Speechley, BA ’79, MA ’82, PhD ’87
human health. Dwindling vaccine-compliance, changing views on fluoride in our water and the rise of poorly evaluated natural health products are some of the most obvious examples.

“We have a hugely successful human invention called ‘science’ that some people reject outright, or believe in only selectively according to their ideologies and self-interests,” said Speechley. “My view is that the validity of scientific findings exists apart from whether we hope they are true or false, or how well we understand science because viruses do not have political views; vaccination prevents diseases in conservatives and liberals equally. And a molecule will treat a disease whether or not a patient agrees with the laws of chemistry or physics. Science makes mistakes, but scientists are trained to identify errors.”

The fact that science makes mistakes, and that part of the scientific method involves testing, retesting and revising theories, might be part of the reason why some people distrust it, but Speechley says it’s also what makes it work. “Every time we have to refine the scientific record, some people think we don’t know what we’re talking about. But science is designed to be self-correcting,” he said.

As an educator who is instrumental in imparting critical thinking skills to the 60 Master of Public Health graduates each year, Speechley is certain that education will go a long way in restoring trust in evidence-based health care and health policies. It’s a concept that Susanne Schmid, PhD, associate professor in Anatomy and Cell Biology, calls ‘scientific literacy.’

She stood shoulder-to-shoulder alongside hundreds of her colleagues at London’s local event as part of the global March for Science this past year, speaking out about the importance of science.

She said if the public better understands how science works – the peer review process and how to discriminate between what is a good study and what isn’t – it will help to solidify what the March was trying fervently to communicate: that science matters.

She points out that the scourge of information online can often be difficult to navigate through, and the rise of ‘alternative facts,’ fake news and bogus scientific journals are only confusing things further.

“That’s why all of these marches for science started to emerge and I think people should be aware that it’s not about scientists; this is about all of us,” she said. “If we don’t base our policies and decisions on science, and base them instead on some made-up alternate facts then we are all in trouble.”

But even with all of these crusaders for science, the issue remains a complex one because of the innate and built-in human interplay between evidence and emotion.

“It seems to boil down to if you read something that aligns with worldview or cultural philosophy you will believe that,” said Dhanvantari. “And no matter how much we as scientists try to refute these arguments and say ‘here are the facts,’ it often backfires.”

She says this is actually a documented psychological phenomenon called ‘the backfire effect.’ It is described as the process by which people argue against information that challenges their beliefs in order to bolster their pre-existing views, and by doing so, it leads them to opinions that are more extreme than they otherwise would have had.

Despite that, scientists, doctors and truth-wielders will continue to make their voices heard, with the firm hope and belief that science will prevail.

“One of the solutions to pollution is dilution,” says Dr. Gunter. “Everyone is talking about medicine online, except doctors. That’s why I keep on doing what I’m doing with my blog and social media. The more good information we put out there, the more we can push down the bad information.”

“We are in a time when academics and the press are talking a lot about this idea of the ‘death of expertise.’ We are missing the boat if we are not communicating what we are doing, why we are doing it, and why it’s so important, and how it directly impacts people’s lives.”

—Savita Dhanvantari, PhD

“...
A Scientific Artist: Seeing the World Through a Camera Lens

Following a full and meaningful career focused on science and academic administration, Ted Lo has discovered a passion for photography in his retirement, allowing him to see the world in a whole new way

By Crystal Mackay, MA’05
The sun is high in the sky, and a bead of sweat rolls down his forehead and into his eye as he squints through the viewfinder of his camera. The guttural roar of dirt bikes in the distance gets louder and more intense as the pack of riders draws closer.

He checks his settings again; the shutter speed is high to capture the action. The aperture is wide, to make the subject pop from the blurred background. The lens he has chosen for this shoot was carefully pondered and selected from a spreadsheet of equipment. The location is deliberate for the perfect backdrop. Much like his work as a scientist and administrator, his approach to photography is methodical, careful and precise.

The first dirt bike rounds the corner of the motocross track and mounts the dirt hill, spraying dust and pebbles into his face, the deafening roar of the engine crowding his eardrums.

Smiling, he can taste the dirt on his tongue as he hears the satisfying click-click-click of the shutter on his camera rapid-firing to capture every fraction of the action before the bike is quickly out of sight again.

For Ted Lo, PhD, this isn’t a profession or a hobby. This is a passion. And one that he only discovered in the past eight years after taking on a professor emeritus title and retiring from his position as a scientist and chair of Biochemistry at Schulich Medicine & Dentistry.

Sitting in his living room in London, the wall behind him displaying a collection of his award-winning photographs – hummingbirds frozen in an effortless dance, a kayaker challenging the rapids, and a quiet fisherman casting his net from his boat – he talks about the ways photography has allowed him to see the world in a brand new way.

“Normally, I would tell you that I hate noise, and I hate dust. But when I was out there taking pictures of motocross racing, it was noisy and dusty and risky, and after I took those pictures, I realized that if they had crashed, I would have been the first one they hit,” he laughed. “But I didn’t mind at all when I was taking the pictures.”

Ted and his wife, Mimi, MLIS’86, began taking photographs when they retired in 2009 as a way to continue to learn and grow. At the time, they didn’t even own a digital camera. They joined the London Camera Club and began going on photography walks through the city discovering parks and trails that they had never seen before. In the evenings, they sat huddled in front of computer screens learning together from online webinars, and reading photography blogs.

“It was wonderful. We went back to school; it was like being students again,” he said. “All my life I had been focused on science and academic administration. I had a full and meaningful career, but when it was time to retire, I knew I had to find other opportunities to challenge myself and continue to grow.”

Lo’s impressive CV includes the establishment of the flourishing Bachelor of Medical Sciences program at Schulich Medicine & Dentistry, of which he served as founding director for five years. The highly sought-after program now boasts one of the highest entrance averages in the country. Under his leadership as chair of Biochemistry from 1996 to 2006, he is credited with the recruitment of a long list of key faculty members and the cultivating of a robust research program in the department.

His own work as a scientist led to the discovery of two different processes for transporting glucose into muscle cells, providing important clues into muscular diseases.

When asked how he sees his career as a scientist and his new identity as a photographer coexisting, Lo, in his methodical way, thoughtfully presented a prepared spreadsheet outlining all of the transferable skills he sees and the ways in which the two intersect.

The spreadsheet lists critical thinking and analysis, experimentation, time management, planning, and visualization. He talks of scouting out locations for shoots, analyzing lighting, background and camera settings, preparing spreadsheets of equipment, and planning for the unexpected; much the same way a scientist would analyze a problem, plan an experiment and test a hypothesis.

When Lo takes a photograph, he doesn’t approach it as a creative art form; he approaches it like a mystery to be solved. What focus, contrast, lighting and exposure are optimal for the shooting environment? What colour and tonal contrasts will make the photo pop? What about the composition of the photo will elicit an emotional response?

All of these considerations and analyses lead to breath-taking results.

“Ted’s unique passion is in catching the moment,” said Dr. Albert Mok, MSc’71, MD’75 a friend, colleague and past-president
of the London Camera Club. “He can record the agonizing expression of a kayaker about to be swallowed up by the rapids or the elation of a bicycle racer about to win at the finish line. His use of light and composition in his photographs bears the breath of fine art.”

Lo’s collection of photographs has won him numerous accolades, including 11 gold medals and the Master Photographer Award from the Canadian Association of Photographic Arts, and title of ‘Best in Show’ in several photo exhibitions.

His photography has also given him licence to explore the world, from Alaska to Peru to China. Most recently he and Mimi were photographing wildlife in Florida.

“We might still have travelled to these places, but we would have said ‘oh that’s nice’ and walked away. Now we are waiting, watching and listening. We are really appreciating the environment that we are in.”

On their most recent trip to Florida, Ted and Mimi woke up in the muddy darkness of pre-dawn and carefully packed their equipment into their bags, checking and double-checking, reviewing their settings, and counting their memory cards. Their plan was to capture horses on the water’s edge as the sun rose.

They crouched in the wet sand as the sky began to lighten and the heat of the coming day caused mist to swirl off the waves as they rolled onto the sand. The quiet click of their shutters captured the riders and their horses as their hooves made deep impressions in the damp sand.

“When you are out in the midst of nature just before the sun comes out, it is so beautiful and it only lasts a few minutes, so you really have to pause and enjoy it,” he said. “Photography has allowed me to do that.”
Dr. Marina Salvadori says when it comes to treating children, clean water and vaccinations are the two most important public health interventions on the planet. Throughout her career as an infectious diseases paediatrician, she has had an intimate window to the effects of both, having spent time on the front lines during the Walkerton water crisis and, in recent years, becoming a passionate advocate for vaccine policy and vaccine compliance.

“It’s hard to get clean water, education, and food to every person on the planet, but we can actually vaccinate everyone and eradicate disease, so that even in the most miserable of circumstances, every child has a chance to live,” she said.

As a medical resident in the early 1990s in Winnipeg, Dr. Salvadori saw one in 200 children younger than the age of five come into the hospital with meningitis as a result of Haemophilus Influenza (Hib or H-flu), a disease that often caused brain damage, deafness and death.

In 1992, her second year of residency, a vaccine became publicly available for Hib. Since that time, Dr. Salvadori says she has never seen another case of it again in someone who is fully immunized.

“Even in the course of my short career, I have seen vaccines completely change the face of paediatric medicine,” she said. “When I was a resident, meningitis was common; that’s what paediatric residents did. Now you can have cohorts of 20 residents going through the program and none of them have ever seen a case of real meningitis.”

After witnessing first-hand the incredible effect of vaccines on public health, Dr. Salvadori believes that vaccines should be free and available to anyone who wants them.

As a faculty member in Paediatrics at Schulich Medicine & Dentistry, she mentors and trains residents and students to be advocates for vaccinations and she dedicates a large portion of her time advocating for national and provincial vaccine policy to make immunizations equitable and accessible for all.

For a little more than a decade, Dr. Salvadori has been part of the National Advisory Committee for Immunizations, helping to draft public policy and guidelines for vaccinations. She says one of the most important issues in Canada is the fact that every province has a different vaccine schedule and funding policy.

She is also involved in the Canadian Paediatric Society to advocate for the funding of vaccines for all Canadian children. She is especially proud of the fact that Ontario has one of the best vaccine programs in the country.

“I love taking away barriers so that it’s equitable and that ability to pay doesn’t prevent you from getting a vaccine. It’s remarkable that now we are affecting cancer with the HPV vaccine and polio will be eradicated in my lifetime, I know it.”

And while she feels that she’s made huge gains on this front, she says she is still frustrated with parents who choose not to vaccinate their children. As someone who feels so strongly about the importance of vaccines in protecting children, Dr. Salvadori takes a somewhat unconventional and hardline approach, giving parents real-world and very vivid examples of the risks involved with not vaccinating.

Dr. Salvadori began her career at SickKids in Toronto, and moved to London after serving as the paediatric lead in Walkerton in 2000. She was one of the first health care
“I love taking away barriers so that it’s equitable and that ability to pay doesn’t prevent you from getting a vaccine. It’s remarkable that now we are affecting cancer with the HPV vaccine and we are going to eradicate polio in my lifetime.”

—Dr. Marina Salvadori

workers to take part in the relief efforts. Working on the front lines providing treatment to children during that time had a profound effect on her outlook. “There were hundreds of people coming into the emergency department; everyone was vomiting and scared, and not able to drink the water and I was newly graduated. It was like nothing I’d ever experienced before,” she said.

After the crisis, she played a major role in the follow-up clinic for the next decade and researched the long-term outcomes of the water contamination on human health. This past year, Dr. Salvadori’s work as a paediatrician and a faculty member, and her advocacy work across the province and country, was recognized with a 2017 YMCA Women of Excellence Award. “Our students and residents hold Dr. Salvadori in the highest esteem and see her as the role model of the ideal clinician; compassionate, comprehensive and caring,” said Dr. Michael Rieder, Chair/Chief Paediatrics, and her nominator for the award. “She was the first woman clinician in our Department to achieve the rank of professor and she serves as a model of how to combine clinical excellence, academic curiosity and scholarly rigour.”

Dr. Marina Salvadori
High Stakes for Canada’s Youth

With marijuana legalization looming in Canada, scientists like Steven Laviolette, PhD, fear that the psychiatric disorders associated with the use of the drug haven’t been adequately studied and leave adolescent populations at risk

By Ciara Parson, BA’15

On April 20, 2016, thousands gathered in Yonge-Dundas Square in Toronto, to commemorate the annual pot-centred event, ‘420.’ But it wasn’t just a passion for weed that tokers had to celebrate on this day – breaking from Canada’s historic stance on marijuana policy, the Trudeau Liberal government officially announced its plans to legalize marijuana by July 1, 2018.

While this new approach to marijuana policy and regulation has come as a breath of fresh air to some pro-legalization supporters, many medical professionals and scientists have publicly decried the Liberal government’s intentions to work toward legalization in Canada, as they firmly believe more research on the clinical benefits and risks of marijuana is required before thoughtful policy and framework can be launched.

Adding his voice to the debate around marijuana legalization in Canada is Steven Laviolette, PhD, Anatomy and Cell Biology, a scientist who specializes in neurobiology research and has extensively studied the effects of marijuana usage on the teenage brain. He warns that the current environment of misinformation and lack of research poses a real threat to the adolescent population considering marijuana has the most significant impact on the developing brain.

Through his research at Schulich Medicine & Dentistry, Laviolette is examining how different phytochemicals derived from marijuana are able to produce either clinically beneficial or negative effects. Much of this work has been centred on studying the neurodevelopmental exposure to the psychoactive component of marijuana, called Tetrahydrocannabinol (THC).

Using a model to simulate the adolescent brain, Laviolette and his team have discovered that if you expose the developing brain to THC, this exposure then has the potential to cause long-term problems in adulthood that resemble symptoms commonly observed in psychiatric disorders such as schizophrenia, depression and anxiety.

Aiming to trace the molecular markers of THC that put adolescents at risk of developing these disorders and use the results to find out how, the team hopes these findings can be purposed as biomarkers and help to identify individuals who are at a greater risk of experiencing negative side effects if their brains are exposed to marijuana during specific periods of brain development.

According to Laviolette, marijuana, however, does have redeeming qualities. He says his research on cannabinoid (CBD) oil, which is a non-psychoactive compound of the plant, has shown to counter the negative effects of THC and produce therapeutic results.

“The amazing thing is that within a single plant you have two phytochemicals that are counterbalancing, and acting against each other in terms of their effect on mental health and the molecular and neural pathways they are producing in the brain,” said Laviolette.

He believes that opposite pathways of molecular alternations in the brain may be responsible for producing these therapeutic and anti-schizophrenic effects.

Though THC has shown to be harmful to the development of the adolescent brain, exposure during adulthood isn’t associated with the same list of potential complications and long-term outcomes. This is why many, including Laviolette, are urging the government to raise the minimum age of purchase of marijuana to 21, instead of the proposed legal age of 18.

Being deemed an illegal substance, this classification has served as a hindrance to productive and open conversation around marijuana. In a time where scientists and medical professionals are increasingly having to defend their work and debunk the claims of ‘junk science,’ Laviolette says as a way of setting the facts straight,
greater re-education and public outreach efforts are necessary to combat the extreme voices heard from both pro and con legalization camps.

The proliferation of false claims, like the well touted ‘marijuana isn’t addictive’ myth, are indicative of just how dazed and confused the public really is about the drug and why many argue that the government is rushing legalization in Canada.

“Marijuana absolutely has dependence-producing properties, which are associated with the strains that have the highest levels of THC,” said Laviolette.

Not unlike other illegal street drugs, the potency of marijuana has steadily increased since the 1960s. With users now able to buy strains with around 20 to 30 per cent of THC, this is a drastic increase from the potency of marijuana in the 1960s which sat at just under 10 per cent.

Observing the harm that high THC levels pose on the user, Laviolette is researching which ratios of CBD to THC are most effective and can modulate the risk factors associated with psychiatric disorders in an attempt to find middle ground on this issue.

“Obviously we don’t want to have a product on the market that has the potential to be psychotropic, but yet, we are moving toward legalization without understanding all the risks associated with marijuana and that is a big concern,” said Laviolette.

Highlighting a frustration felt within the scientific community, marijuana research in Canada has historically been expensive and difficult to conduct because of how tightly controlled the product is and the regulatory hurdles researchers must endure to gain access to it.

“It’s a lot easier for us to access heroin than it is to access THC,” he said. “In many ways, we know more about drugs like heroin and nicotine than we do about THC.”

This lack of research and insight into marijuana also reflects the Canadian Medical Association’s (CMA) aversion to recommending and promoting medical marijuana as a safe treatment option. A vocal opponent to legalization, the CMA believes there is insufficient scientific evidence available to support the use of marijuana for clinical purposes and that clinical risks and benefits, along with proper dosage guidelines, haven’t been explored well enough yet.

Laviolette agrees that more marijuana research is needed, but says scientists and the Canadian government must work together to engage the CMA and devise a more cohesive message around marijuana that will garner greater understanding.

Reflecting on how his research fits into this equation of creating awareness within the medical community, Laviolette says he would like to see his research move from ‘bench’ to ‘bedside’ through clinical trials and test which cannabinoid formulations and delivery methods work best on the patient population.

Taking it one step further, Laviolette believes that given the nation’s historic use of marijuana as a therapeutic and the expansive cannabinoids biotechnology sector in place, Canada has the resources and potential to emerge as a leader in medical marijuana research.

“We don’t want to have a product on the market that has the potential to be psychotropic, but yet, we are moving toward legalization without understanding all the risks associated with marijuana and that is a big concern.”

—Steven Laviolette
Prescribed Ethics

Altruism is heralded as a central principle of the profession of medicine, but are societal pressures and systemic inequalities changing the construct of this idea? Dr. Wael Haddara says changing language in the Canadian Medical Association’s Code of Ethics seems to suggest so.

By Clara Parsons, BA’15

Any physician will tell you that the road to becoming a medical professional is not easy. With medical schools receiving thousands of applications each year, candidates are carefully examined and reviewed when deciding who to accept into the profession. Achieving a high grade point average is simply not enough to make it into medical schools. Medical students and physicians who are going to perform well in society, because their studies will lead them to a profession that is eventually where they will be practicing medicine, are medical students and physicians who will eventually be physicians, to deal with both the pressures faced in and outside of the hospital doors are necessary. Closing these gaps and making medical education more accessible is, however, not such an ‘open and closed’ solution.

Though Dr. Haddara doesn’t have a definitive answer as to how altruism can be reinvigorated into the field of medicine, he believes that preparing medical students, who will eventually be physicians, to deal with both the pressures faced in and outside of the hospital doors are necessary.

“I have a belief that medical education cannot exist in isolation from societal values,” Dr. Haddara said. “If we want medical students and physicians who are going to perform well in society, because that is eventually where they will be performing, then it’s not just a matter of how well they do in medical school with medical school pressures or routine pressures – it’s about how well they do with societal pressures.”

Content Analysis of Two Codes of Ethics

Using a content analysis approach, Dr. Haddara, and co-investigator Lorelei Lingard, PhD, analyzed the Canadian and Australian Medical Associations’ Code of Ethics to examine the pattern of appearance and disappearance of altruistic statements over time.

Dr. Haddara divided the content of the Code of Ethics into themed categories, such as ‘professional identity,’ ‘personal behaviour,’ ‘financial probity’ and ‘non-altruistic statements,’ with the aim of gaining a better understanding of the historical construction of altruism and what lies at the intersection of medicine and society.

Evaluating the CMA’s Code of Ethics, a greater amount of altruistic content can be found in its earliest versions which stem back to 1868.

Taking into account the effect that systemic societal changes and historical events have had on medicine, Dr. Haddara notes that some of the more ‘heroic’ altruistic content, such as ‘treating patients in times of epidemic regardless of risk to own life,’ disappeared from the Code of Ethics shortly after major events such as the Great Depression and the introduction of Medicare in Canada.

Notably, however, Dr. Haddara says that the 1970 version of the Code of Ethics presents a radical shift from the historical content and introduced non-altruistic ideals.

In the earliest versions of the Code of Ethics physicians were asked to ‘respond to the call of the sick at all times,’ but by 1970, it was amended to say, ‘except in an emergency, [a physician has] the right to refuse to accept a patient’ and includes that they ‘may withdraw from [their] responsibility for the care of any patient provided that [they give] the patient adequate notice of [their] intention.’

With the emergence of universal healthcare and an influx of new patients to treat, these non-altruistic ideals and emergence of self-driven language presented in the 1970 Code of Ethics appear to be tied to the notion of setting realistic expectations for physicians to adhere to in their professional conduct.

This inclusion of more self-driven language continues into the 2004 Code of Ethics, another major revision, where physicians are directed to ‘protect and enhance [their] own health and well-being by identifying those stress factors in [their] professional and personal lives’ and should adjust their practice accordingly.

“We found that many of the altruistic statements were removed very early on from the Code of Ethics. We’re speculating that the changes to the Code of Ethics have nothing to do with medicine, but in fact, have everything to do with societal changes,” said Dr. Haddara. “When you look at the historical framework of the Codes of Ethics that have been very different content-wise, so for example the 1938 and 1970 Codes, they both came in the aftermath of things like the Great Depression, Medicare, the Civil Rights Movement, the Vietnam War, Communism, and so on.”

Dr. Haddara wonders if these progressive changes, along with the new set of pressure and structural inequalities today’s medical students and physicians face has contributed to the idea that altruism is dwindling in medicine.

Income inequality is a factor he says is particularly exploited by the tuition bills medical students are burdened with. Though wealth distribution is not necessarily a new societal issue, the gap between the social classes has been growing in the last few decades. This begs the question, with expanding costs to medical training, is medical school fundamentally inaccessible for those who lack privilege and opportunity?

Gender, race and ethnicity are also added hurdles some must overcome in their journey to medicine. Closing these gaps and making medical education more accessible is, however, not such an ‘open and closed’ solution.

Though Dr. Haddara doesn’t have a definitive answer as to how altruism can be reinvigorated into the field of medicine, he believes that preparing medical students, who will eventually be physicians, to deal with both the pressures faced in and outside of the hospital doors are necessary.

“If we want medical students and physicians who are going to perform well in society, because that is eventually where they will be performing, then it’s not just a matter of how well they do in medical school with medical school pressures or routine pressures – it’s about how well they do with societal pressures.”
A Multi-angled Approach to Research

In Touch with the Mind

Ravi Menon, PhD
A Multi-angled Approach to Research

Researchers are exploring multiple sclerosis from all angles to better understand, diagnose and treat the mysteries of the disease

By Emily Leighton, MA’13

You’re sitting at a table in a plain room.

A researcher sits directly across from you, ready to begin the series of testing activities you’ll be undertaking throughout the next hour.

She starts by reading a list of 16 words. You’re asked to repeat them back in any order. You remember the vegetables easily – celery, spinach and cabbage. You close your eyes, trying to recall the other words.

Celery, spinach, cabbage...

Next, you’re shown a paper with six abstract shapes. It’s only in front of you for 10 seconds. When you’re asked to draw the shapes as you remember them, your hand hovers above the paper.

Was that a triangle or a diamond? The image is hazy and just out of reach; the same way it feels when someone’s name is on the tip of your tongue.
“Cognition is often described as an invisible symptom in multiple sclerosis (MS),” explained Dr. Sarah Morrow. “It’s easy to write off because there isn’t a predictable decline like we see in dementia; it’s more episodic. It also presents differently from dementia – the first signs people notice are usually difficulty processing information or not remembering things unless they are written down.”

Dr. Morrow, an associate professor with Clinical Neurological Sciences and a neurologist at London Health Sciences Centre and St. Joseph’s Health Care London, is studying the cognitive changes associated with MS. She established the first MS cognitive clinic in Canada, based out of the Parkwood Institute at St. Joseph’s.

Looking at cognition from a clinical perspective, Dr. Morrow and her team are working to better understand, assess and treat these lesser-known, debilitating symptoms.

Cognitive testing with MS patients is a big part of their work, both for clinical use and research. Patients undergo a series of testing batteries – collections of tasks and questionnaires – that assess various domains, including processing speed, memory and higher executive functioning.

On the research side, Dr. Morrow is leading several treatment studies to try and improve cognition in MS patients.

MS remains a mystery in many ways, despite decades of research. It is thought to be an autoimmune disease of the central nervous system – the immune system attacks healthy cells in the body – but who gets it and why is not clear.

“Every person with MS is different, the disease is unique, and we still don’t have good predictors of who will get the disease and why, or who will experience cognitive impairment and why,” said Dr. Morrow. “The uncertainty makes it very scary.”

Dr. Morrow is partnering with Robarts Research Institute scientist Ravi Menon,
PhD, Canada Research Chair in Functional Magnetic Resonance Imaging, to answer questions that have arisen from her clinical experience. The duo is looking to better understand why cognitive issues occur and how they present.

“We don’t know if these problems come from the brain’s white matter or grey matter,” explained Menon. “And we want to know why some people have lots of lesions and no cognitive deficits while others have only one lesion but significant problems.”

An international leader in ultra high-field magnetic resonance imaging (MRI), Menon is looking at two different areas of MS research – early diagnosis and disease prognosis. His research brings together a number of researchers from across Western University and London’s teaching hospitals.

On the diagnosis side, Menon is developing imaging techniques to identify early indicators of MS, including iron deposition, demyelination and cortical lesions.

As part of a longitudinal study, his team is following a group of 50 people with suspected MS, also called clinically isolated syndrome. Using 7T MRI imaging, Menon’s team at the Centre for Functional and Metabolic Mapping uses special MRI pulse sequences to look for the microscopic signatures of the disease.

“One we’ve imaged the patients, we wait to see if the disease progresses or not with traditional clinical signs,” he said. “So we can retrospectively see if our imaging signs worked to predict the disease.”

The other focus of Menon’s work is prognosis. Disease behaviour in MS varies significantly, from a few bad days here and there when symptoms flare up to a more progressive form where patients decline steadily from the outset.

Through a ‘watchful waiting’ longitudinal study with another 50 participants, Menon and his team, in collaboration with Dr. Morrow, are trying to identify imaging and cognitive biomarkers that may predict how the disease will progress.

For now, much like the diagnosis study, Menon relies on comparing the collected images to the type of MS developed over the longer-term.

“We can look backward and predict from our early scans what the course of the disease is going to be,” Menon explained. “If we know this information, we can potentially tailor medications and treatment earlier on.”

Steven Kerfoot, PhD, associate professor of Microbiology and Immunology, is also asking fundamental questions about MS, but his focus is the immune system and the possible triggers of the disease.

He is part of the multi-disciplinary research team exploring the disease and is looking at basic B cell biology – immune cells that are known to produce antibodies, but may also play an important role in directing and controlling immune response.

Kerfoot and his team are specifically trying to understand how B cells contribute to initiating and maintaining the chronic immune response that is responsible for damage to the central nervous system in MS.

“We’re trying to understand autoimmune choices,” he explained. “We look at cells in the spinal cord to see where they came from, which cells they are interacting with, and how they become activated.”

Using ‘realistically complex’ animal models of the disease developed by his lab, Kerfoot is delving deeper into questions about who develops chronic MS and who does not, and why that might be.

With access to the world-class imaging facilities and tools at Robarts, he is comparing disease progression in these animal models to humans, tapping into Menon’s imaging expertise and current studies.

“We want to see if Ravi’s findings translate to predicting which of our animal models will develop chronic disease and which ones will have a simple, monophasic, one attack disease,” said Kerfoot. “If they do, our models become tools to start digging into the immunology to try to understand what’s driving those differences, and the biological decision of immune cells.”

Kerfoot is also partnering with clinical colleagues Dr. Morrow and Dr. Marcelo Kremenchutzky, a neurologist and former director of the London MS Clinic, on several research projects – an example of the inclusive approach to research that advances knowledge of MS across a wide spectrum of fields and specialties.

“These collaborations allow us to take our research further than we could on our own,” said Kerfoot.

Dr. Kremenchutzky agrees. “MS is such a complex condition that if you’re only looking at it from one angle, you’re missing the whole, big picture,” he said. “Our aim is to translate findings in fundamental research to medical practice and provide meaningful outcomes for people living with MS and their families.”

“"We’re trying to understand autoimmune choices. We look at cells in the spinal cord to see where they came from, which cells they are interacting with, and how they become activated." —Steven Kerfoot, PhD

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**1/340 CANADIANS**

Canada has the highest rate of multiple sclerosis (MS) in the world, with an estimated 1 in 340 Canadians living with the disease according to Statistics Canada.

**15-40 YEARS**

MS is most often diagnosed in young adults aged 15 to 40, and it is three times as likely to occur in women as in men.

**NINETY-THREE THOUSAND AND FIVE HUNDRED**

It is estimated that approximately 93,500 Canadians are currently living with MS, according to Statistics Canada’s Canadian Community Health Survey (2010–2011).
In Touch with the Mind
Lisa Saksida, PhD, and Tim Bussey, PhD, are using touchscreens to revolutionize the way cognitive tests are performed
By Jesica Hurst, BA’14

Because we study behaviour, the lab has to be quite big.” Lisa Saksida, PhD, explained as she and her partner Tim Bussey, PhD, walk through their brand new work environment at Schulich Medicine & Dentistry’s Robarts Research Institute. “We need a significant amount of space for the apparatus we use in our tests.”

The lab space itself is nothing out-of-the-ordinary — it’s the equipment she refers to that makes such a statement. Rows and rows of touchscreen chambers take up the majority of the focus, and computers and screens that correspond with said chambers line a room that the husband-and-wife team has unofficially dubbed ‘Mission Control.’

The lab space is not exactly what comes to mind when you think ‘basic science.’ And that is because Bussey and Saksida have spent the past few decades revolutionizing the way cognitive tests are performed on mice and rat models — models of numerous neurodegenerative and psychiatric diseases, such as Alzheimer’s and Huntington’s, that affect hundreds of thousands of patients every day in Canada alone.

It was 1990 — around the time when the couple first met — when Bussey and Saksida first experimented with rat models and touchscreen chambers. They had used other methods before, but nothing had allowed them to study behaviour so effectively.

“We originally liked the touchscreen set-up because it was computer-automated, meaning you didn’t interfere while it was completing the tests, which made for much more accurate recordings,” Bussey said. “The set-up also allowed us to test the same way every time, so our results were consistent and replicable.”

The chambers the team now use have evolved since the 1990s, but the basic concept remains the same. On one end of the toaster oven-sized chamber is an iPad-like touchscreen used for the actual testing, and on the other end is an area for the distribution of a reward, which happens to be strawberry milkshake. Video cameras are also set up inside the chambers so the researchers can track what is happening live on corresponding computers.

“It was about 10 years ago that we extended this touchscreen approach from rat models to mouse models, because there are so many more mouse models of disease,” explained Saksida. “It was at that point when the popularity began to increase rapidly, and now more than 150 labs in North America are using our method.”

Mice placed in the chamber are put through a series of image-focused tests related to memory, learning and behaviour. The tests are easily translated into use with human patients as well, which increases the transfer of knowledge from preclinical studies to the clinic.

Even though Saksida and Bussey come from different education backgrounds, they have both always been interested in the basic, fundamental questions about how the brain works.

Saksida completed her undergraduate education in psychology at Western University before moving into work-related computer modelling and intelligent robotics. She eventually decided to leave the robots aside to focus on computation modelling of the brain, which brought her back to cognitive neuroscience.

Bussey’s path has been even less direct. After completing an undergraduate degree in chemistry, he worked as a professional musician for a number of years before deciding to go back to school to earn a degree in psychology. He put the touring life to rest once he discovered how much he enjoyed his work in biopsychology.

It is these diverse yet compatible skill sets that brought them together to create such a revolutionary technique, which they are using to learn more about cognitive impairment — something that can be just as troublesome for patients as other symptoms, and can occur even earlier.

“In Huntington’s, for example, you immediately think of issues with movement. Because the movement symptoms tend to dominate, the cognitive symptoms of neurodegenerative and psychiatric diseases are often left untreated,” Bussey said. “The earlier we can pick up on these cognitive deficits, the better position we are in for treatment.”

“It’s not even about coming up with new treatments — it’s about being able to pick up impairments at the earliest stage possible,” Saksida added.

Since joining Schulich Medicine & Dentistry in early 2016, the husband-and-wife team has thoroughly enjoyed their time building their new lab and beginning collaborative projects with other researchers at the School. They are looking forward to what they will accomplish in the years to come at their new home.

“We have received such a warm welcome from all of Western, and we have had a lot of fun in the last year and a half getting things started,” Saksida said. “We are really excited to be here and to be able to collaborate with other like-minded individuals who enjoy the mysteries of science, just like we do.”
GLOBAL LEADERS IN OPTIMIZING LIFE-LONG HEALTH
The 2017 Alumni of Distinction recipients have each dedicated their lives to discovery, innovative care, and community service – a commitment that continues to change the lives of people in Canada and around the world.

By Jesca Hurst, BA’14

Dr. Robert Bourne, MD’71
Dr. Cecil Rorabeck, MD’68, DSc’09
Community Service Award

Drs. Robert Bourne and Cecil Rorabeck have been described by many as visionaries. Among the leading experts on hip and knee replacement around the world, their combined dedication to helping others has led them to organize and take part in numerous Operation Walk-Canada medical missions to Guatemala and Ecuador, where they provided hip and knee replacements to patients who otherwise could not afford such treatments.

“Like most people who get involved in community service activities, such work is done to make the world a better place,” Dr. Bourne said. “Almost always, the work is not of a single individual, but usually the result of a team effort, which is absolutely true in this case.”

Drs. Bourne and Rorabeck both arrived at Western University in the 1960s – a time when Medicare was first established, the Canadian flag was introduced, and the African-American Civil Rights Movement was at its peak. They received medical training from professors and role models they both deemed ‘the greats,’ and ultimately decided to work at the University after graduating because of the solid connections they established.

Members of the Order of Canada, Drs. Bourne and Rorabeck have advice for how to find success in medicine.

“Always follow your instincts in terms of what you want to do in your life, and identify good role models who can help guide your path in the right direction,” Dr. Rorabeck said. “It is also important to think about professionalism, communication and leadership. Leadership in medicine is going to be increasingly important, and we need strong leaders coming out of our medical schools.”

Dr. Bourne added that it is crucial to be curious, think big, and recognize that it is always much better to give than to receive.

Dr. Margaret Chan, BA’73, MD’77, DSc’99
Dean’s Distinguished Lecturer

Reflecting on her years in medical school while at Western, Dr. Chan says that her years at the University helped her to appreciate the values of diversity, inclusiveness and integrity. “These are the principles I have lived by ever since,” she said.

After completing her BA at Brescia University College, Dr. Chan went on to pursue her medical degree, graduating in the late 1970s. Following graduation she returned to Hong Kong to head the health department there – just in time to have to deal with an outbreak of the avian influenza. Her tenure in that role also found her managing the SARS crisis. In 2006, she became the chief of the United Nation’s World Health Organization, carrying the title of Director-General.

Dr. Chan served two terms in the role, championing improvements in maternal care, HIV and AIDS care, malaria, and managing many international viruses including H1N1, a worldwide pandemic.

As the Director-General, Dr. Chan was faced with making tough decisions and believes that being a successful medical leader is the result of valuing teamwork and partnership, being accountable to measurable results and accountable for your promises. Her advice to young medical graduates is to uphold the ethical standards of their profession and remember service to people.
**Dr. Zain Kassam, MD’08**  
*Young Alumni Award*

When Dr. Zain Kassam was choosing which medical school to attend, he decided on Schulich Medicine & Dentistry because of the ‘Goldilocks phenomenon’ – it wasn’t too big, and it wasn’t too small. It was just right.

“Western University was the home of world-class thought leaders, but everyone is approachable,” Dr. Kassam said. “It appealed to me as it seemed to beautifully balance all of the things I envisioned were necessary to build a strong foundation in medicine.”

Dr. Kassam is a research affiliate at Massachusetts Institute of Technology and the Chief Medical Officer at OpenBiome – the world’s first public international stool bank to provide safe access to fecal microbiota transplantation (FMT). In his short career, the gastroenterologist and public health innovator has already treated more than 25,000 *Clostridium difficile* patients at 850 hospitals in the United States and around the world.

Dr. Kassam credits his time at Schulich Medicine & Dentistry with giving him the knowledge and courage to follow the road less travelled.

“Medicine sometimes gets trapped in dogma and embraces the conventional escalator to clinical impact, but sometimes a new, bold path pops up serendipitously and a few brave optimists take the elevator and change the way we think about medicine,” he said. “Don’t be afraid to be a pioneer, don’t be afraid to follow your passion, don’t be afraid to take the elevator.”

**Dr. Peter Leung, PhD’79**  
*Excellence in Basic Science Research Award*

Dr. Peter Leung first became interested in research when he was a fourth-year biology student at the University of British Columbia. Upon realizing how excited he was by the intriguing interaction of the endocrine control of the brain-pituitary-gonadal axis, he completed an MSc in thyroid endocrinology before coming to Schulich Medicine & Dentistry to complete a PhD.

To the soundtrack of The Beatles and Elton John, Dr. Leung truly embraced the hard work and learning that came with attending Western University in the 1970s.

“I definitely would not have been what I am today without spending the four years of my higher education at Western,” he said. “The scientific research and academic training there was, and still is, world-class. Without any doubt, the academic ambience truly helped to define my career goal as a reproductive scientist and launch my development as an independent researcher.”

Dr. Leung’s research program has focused on the hormonal determinants of women’s reproductive health and disease. He was the first to clone and characterize the gene encoding the human gonadotropin releasing hormone receptor, and was among the first to propose that two isoforms of the hormone in humans play an important role in pituitary gonadotropin secretion and other reproductive tissues including ovaries, ovarian cancer and placentae. He has written more than 350 papers, 340 abstracts, five books and 20 chapters.

“The occasion of this recognition reminds me of what great educational experience I received at Western, and the impact it has had on my career.”

**Dr. Paul Romanson, DDS’72**  
*Alumni of Distinction – Dentistry*

“In order to become a leader in dentistry, I believe one must simply become involved,” Dr. Paul Romanson said. “This could be as simple as putting your name forward to fill a committee position, but one small decision will build upon another, and that is when you will have the opportunity to choose a direction to continue in as your passion dictates.”

Dr. Romanson has been considered a leader since he began teaching the art
and science of dentistry in 1981. His commitment to education has been evident through his work as an adjunct clinical professor at Schulich Medicine & Dentistry, and a leader in the London & District Dental Society, the Ontario Dental Society, and the Dental Outreach Community Service program.

The years Dr. Romanson spent in dental school were exciting and happy times. He enjoyed being on the science student council and the orientation committee, and spending time with so many like-minded individuals who became life-long friends. He can still recall them listening to bands like the Guess Who and The Beatles, and watching Star Trek and Hockey Night in Canada when they had downtime.

Dr. Romanson explained he views this distinction as one of the highest honours he could receive from his alma mater. “I am totally humbled by this kind of recognition from my peers, particularly because I personally know many of the exceptional people who have been past recipients,” he said. “It is a privilege to join their ranks and share in this honour with them.”

David Spence, BA’65, MD’70
Professional Achievement Award

Dr. David Spence has been committed to learning, teaching and innovating at Schulich Medicine & Dentistry since the first day of his undergraduate degree in 1962. “Having been at the School for more than 50 years, my blood runs purple and white,” he said. “It means a lot to me to be recognized by the University that has been my home for most of my life.”

Dr. Spence has dedicated his career to stroke prevention. His major research accomplishments include identifying high-risk asymptomatic carotid stenosis, vitamin therapy for stroke prevention, and the development of atherosclerosis imaging for risk stratification, genetic research and management of patients. He also influenced the Task Force for the Stroke Strategy for Ontario to include stroke prevention in the plan, which led to the development of 40 stroke prevention clinics in the province.

The clinician-researcher has also led and participated in more than 50 clinical trials, authored or co-authored more than 500 peer-reviewed publications, and given more than 600 lectures to thousands of physicians in 39 countries around the world.

On advice to give future physicians, Dr. Spence noted a quote of Canadian physician Sir William Osler. “It is the obligation and the joy of the physician to be a perpetual student.”

“Embrace this idea. Do not be overly concerned with money or political pressures on medicine,” he said. “Take the affirmation of your worth from the opportunity to put the gifts you received at birth to good purpose – help people who need help.”

Dr. Shawn Steele, BA’01, DDS’05, JD’13
Young Alumni of Distinction – Dentistry

After Dr. Shawn Steele graduated from Schulich Medicine & Dentistry in 2005, he quickly learned that he wanted to do more with his career than simply be in private practice. A lover of science and the arts, he made the decision to devote his time to education, through learning himself and through teaching others.

“The time I spent at Western were some of the best years of my life, and I look back on them very fondly,” Dr. Steele said. “I knew I wanted to go to Western University early in high school, and I ended up completing my BA, DDS and JD degrees there.”

A community leader and advocate for social justice, Dr. Steele is well known for his desire to increase access to dental care for the most vulnerable in our communities. He is credited with changing a long-standing policy of only treating inpatients, so that patients can continue to be treated as outpatients as well at certain hospital sites. Through his work at St. Joseph’s Health Care London, he created a model of care that provides comprehensive dental care of patients with special needs.

As someone who has already achieved so much in his years as an alumnus, Dr. Steele explained it is all about pushing your limits, making sacrifices when necessary, and doing what makes you happy. “I do what I do because I want to benefit others and myself,” he said. “The chance to be recognized publicly for the work I do is an honour, and one I am very grateful for. Sometimes you wonder if you are making a difference, but receiving recognition in this way really validates what I do.”
Blazing the Windsor Trail

In September 2008, 24 strangers came to Windsor as the first cohort at a brand new Schulich Medicine campus. As the charter class they have blazed a trail for hundreds to follow.

By Jesica Hurst, BA’14

I t feels like so long ago now – it’s honestly a bit of a blur,” Dr. Genevieve Mortera, MD’12, said with a laugh as she attempted to recall her first few weeks of medical school.

It was back in early September 2008 when Dr. Mortera first arrived for orientation week in Windsor, a city just two hours away from her hometown of London, Ontario. Like most other students entering medical school, the future physician was anxious, eager and, most of all, excited.

But unlike most other students entering medical school, Dr. Mortera and her 23 classmates had an added factor to consider: the campus they were studying at was brand new. They were the first cohort of learners to attend medical school at the Schulich School of Medicine & Dentistry – Windsor Campus.

After the Ontario Government identified a need for more medical school spaces, an incredible amount of time and effort was put into developing a satellite campus in Windsor. The decision was greatly supported by both universities, and members of the Windsor community celebrated that there would be a higher concentration of medical professionals in their city.

The first 24 students – the Windsor Campus Charter Class – became the champions of the program. The young medical professionals were welcomed with open arms and celebrated their decision to act as pioneers for the school.

But beyond the welcome celebrations and media attention, Dr. Mortera didn’t fully realize the role she had taken on as a trailblazer.

“I wasn’t really aware of the magnitude of it all at the time. I was just trying my best to live in the moment and take it all in while it was happening,” she explained.

Dr. Craig Campagna, MD’12, had a similar experience, which was heightened even more since he was born and raised in the city.

“When you’re going through medical school, you’re just so focused on becoming a doctor. Of course it was special to be a part of the first class, especially since it was such a big deal for Windsor to get this kind of program, but I never thought about that impact until I was able to look back on the experience,” Dr. Campagna said.

Establishing something new can come with its fair share of ups and downs, and the first few months of the Windsor...
program was no exception to this.
Dr. Campagna recalls the challenge of learning how to work with the webcast from London, and attending classes in the basement of an older building on campus while they awaited the opening of the Dr. Murray O’Neil Medical Education Centre.

Dr. Campagna and his peers were also faced with a University strike within their first few months of study – something that was overcome with the dedication of faculty and staff, and the support of fellow classmates.

These minor blips in the new program’s first year never made Dr. Mortera doubt her decision to attend medical school in Windsor. She saw them as all part of the challenge, and chose to focus on the endless benefits of the program instead.

“I knew there would be challenges within the first few years of the program, but it was never something that would have deterred me from attending,” she said. “I chose to remain focused on all of the incredible things the program offered me, such as more one-to-one time with superiors and a significant amount of hands-on experience with patients.”

Drs. Mortera and Campagna both benefited from the smaller class size as well.

“Our class was very much like a family. When you’re only 24 people, you are always together – you study with the same people, you do projects with the same people, you go out and socialize with the same people. It is very rare that you will find that kind of family mentality anywhere else,” Dr. Campagna said.

It has been five years since the Windsor Campus Charter Class graduated, and the 24 students have since gone on to achieve a tremendous amount of success.
Dr. Mortera has since moved to Halifax, Nova Scotia where she works as a family medicine physician, and Dr. Campagna has joined a family medicine practice in Windsor and does surgical assisting at Windsor Regional Hospital.

While the majority of the Charter Class has kept in touch through personal and professional events such as weddings and conferences, Drs. Campagna and Mortera are looking forward to celebrating their five-year anniversary through a variety of celebrations.

“It’s nice to be able to share memories and revisit a place that was so integral to my career and my life,” Dr. Campagna said. “I had a wonderful time during those four years and certainly owe a lot to the program for preparing me for a wonderful career as a physician.”
Risk Taker
Dr. Gabriele DeLuca, DPhil, MD’06, took more than a few risks as he followed the path less travelled to becoming an award-winning clinician science educator and pursuing his passion
By Jennifer Parraga, BA’93

S pend a few minutes in one of Dr. Gabriele DeLuca’s medical school lectures at Oxford, and you’ll likely hear him bragging to his students about his failures. He believes that by sharing stories about his own education and career path, his students will become more self-reflective and be encouraged by their own failures. If you are failing, he says, then, you are likely bettering yourself.

A self-described risk taker, who admittedly didn’t always do things the easy way, Dr. DeLuca’s unorthodox path to success came with its own unique set of challenges. His life, however, has been marked by tremendous personal growth, as he pursued his passion for research and unexpectedly discovered a place for himself in the clinic laboratory and classroom.

Even in high school, Dr. DeLuca was challenging himself academically. In search of a more demanding academic environment, he decided to leave high school at the end of grade 12 and took a chance that CEGEP in Montreal could be the answer. The risk paid off, and he felt energized and challenged. Part-time jobs as a janitor and church organist gave him extra spending money, as he considered what was next for his education.

He received a full scholarship to McGill University and that’s when, he says, he fell in love with the nervous system.

Medical school brought him back home to London and to Schulich Medicine & Dentistry. Still searching for new challenges, Dr. DeLuca began to look for a summer research opportunity. He recalls the exact Saturday in February, when he emailed dozens of different researchers in Canada and the United Kingdom, inquiring about summer research positions. Although it was getting late, a friend encouraged him to send one more message to Professor Margaret Esiri, a world-renowned neuropathologist at Oxford, about a possible opportunity. By Monday morning, he was sending her references and by Wednesday, he had a position in her lab.

Once again, Dr. DeLuca took a risk and it paid off.

“This was the first time I really experienced the power of research,” he said. “The whole environment was intriguing and stimulating.”

It was all he had hoped for. So much so, he questioned whether or not to return to medical school.

That summer, Dr. DeLuca had the good fortune to meet Dr. George Ebers, who had practised in London and served as a professor in Clinical Neurological Sciences at Schulich Medicine & Dentistry. He is known for founding the Canadian Collaborative Study on Genetic Susceptibility to Multiple Sclerosis. Dr. Ebers, along with Esiri, began to mentor Dr. DeLuca and convinced him to return to his undergraduate medical studies.

That summer, Dr. DeLuca had the good fortune to meet Dr. George Ebers, who had practised in London and served as a professor in Clinical Neurological Sciences at Schulich Medicine & Dentistry. He is known for founding the Canadian Collaborative Study on Genetic Susceptibility to Multiple Sclerosis. Dr. Ebers, along with Esiri, began to mentor Dr. DeLuca and convinced him to return to his undergraduate medical studies.

Shortly after his return, Dr. DeLuca applied for a PhD position at Oxford and began applying for every scholarship he could find to support his training. With the support of Dr. Jim Silcox, Dr. DeLuca received the permission to leave medical school for three years to pursue his doctorate, which was funded by a prestigious full scholarship from Oxford – with the promise to return and complete his studies.

The three years were nothing short of outstanding for Dr. DeLuca. The collegiate systems made him look at things differently and he admits to maturing really quickly. He brought this new sense of himself back to Schulich Medicine and embraced his final two years of medical school.

“I loved my two clinical years,” he said. “I was exposed to amazing faculty who were invested in me and the hospital system offered fantastic clinical exposure. I had matured so significantly during my three years away that I truly began to understand the value of the people around me and appreciate the application of my knowledge to make a difference for patient care.”

Looking ahead to his residency, Dr. DeLuca once again decided to take the path least taken. With encouragement from Dr. Ebers, he applied to positions in the United States, including the Mayo Clinic.

It was another late evening when Dr. DeLuca found himself going out on a limb and speaking to the neurology program director at the Mayo Clinic. At the time, he hadn’t completed the American board examinations required for entry into U.S. training programs. After a whirlwind series of interviews, he accepted a position with Mayo and began his residency.

Once again, he found himself in an inspiring environment where he encountered top-notch, internationally renowned faculty, enabling him to soar in the neurology program, and winning several awards including the Woltman Award and the Robert J. Filberg Award.

“Research drives me. I have a passion to solve the riddles of this disease and I am motivated to discover a cure — that’s the long game. The ultimate hope is to rid people of the disease — and if we can’t cure it, then perhaps we can stop it in its tracks and provide a greater quality of life for people living with MS.”
—Dr. Gabriele DeLuca
He returned to Oxford in 2010, on a clinician-scientist fellowship award, where he set up his research program focused on the neuropathology of multiple sclerosis (MS) and neurodegenerative diseases. His research has made several discoveries about how genes influence clinical outcomes and pathological phenotypes in MS. He has also identified information about the landscape of MS pathology, which has provided important clues about why people may get MS.

“Research drives me,” he said. “I have a passion to solve the riddles of this disease and I am motivated to discover a cure – that’s the long game. The ultimate hope is to rid people of the disease – and if we can’t cure it, then perhaps we can stop it in its tracks and provide a greater quality of life for people living with MS.”

While waiting to be registered as a consultant neurologist in the U.K. – an unforgiving process that included an application with more than a thousand pages of supporting documentation – Dr. DeLuca was looking for a way to keep his clinical knowledge fresh.

He began teaching, and was inspired. “I’m so thankful I began teaching,” he said. “It’s somewhat of a selfish outlet, as the students inspire me more than I could ever wish to inspire them.”

Today, Dr. DeLuca is an Associate Professor in clinical neurosciences and Director of Clinical Neurosciences Undergraduate Education at Oxford Medical School. He is also a principal investigator supervising an expanding group of award-winning graduate trainees and a consultant neurologist with subspecialty expertise providing the highest quality patient care.

As a clinician science educator, he hopes to inspire the next generation of physicians and neurologists to make a bigger impact than he could ever dream of.

His stories are just the first step to getting them there.
Role Model in the Making

Mentorship helped Dr. Kristen Dupuis discover the dental profession and is inspiring her to be a role model for others

By Emily Leighton, MA’13

Joy. Relief. Sadness. A sense of responsibility. Mixed emotions accompanied Dr. Kristen Dupuis, DDS’14, across Western’s Alumni Hall stage in 2014 to receive her lilac hood.

“It was an emotional day for me,” she explained. “Graduation not only meant ‘thank goodness my hard work has paid off,’ but even more so, it made me feel worthy of the ‘big shoes’ my little brother had been placing me in for years.”

Having helped raise her now 17-year-old brother, Jordan, the determination to be a good role model for him served as motivation throughout four years of dental training. For Dr. Dupuis, graduating from dental school was validation of her hard work and effort.

“When I moved away to attend dental school, it was one of the hardest things I’ve done,” she said quietly. “I worried about leaving my family, but tried my best to be there for them. And of course, they were with me, cheering me on and helping me in any way they could.”

Dr. Dupuis is immensely proud of her younger brother, who aspires to be her business partner one day.

Growing up in North Bay, Ontario, Dr. Dupuis didn’t always have dentistry in her sights. “My path in education was anything but straightforward,” she said.

Initially she wanted to pursue nursing, and began her postsecondary studies in a college program. Realizing a career in nursing wasn’t for her, Dr. Dupuis returned to high school for a year to obtain the necessary prerequisites for university.

She completed an undergraduate degree in biology at Nipissing University in North Bay. During her studies, she worked in the genetics and molecular biology lab looking at fruit fly populations.

Research interested her, but she wanted to explore other career options that offered variety and flexibility. As part of this search, she shadowed fellow Schulich Medicine & Dentistry alumna Dr. Karen Morris, DDS’93, at her private practice in North Bay.

“I found I really enjoyed the environment,” said Dr. Dupuis. “And working with Dr. Morris, a dentist, a business owner, a woman and a mother, really gave me insight into what my own future could look like.”

At Schulich Dentistry, Dr. Dupuis found a second family. “My classmates kept me going,” she said. “At the stressful times when I was getting little to no sleep, it was their friendly faces in class and the clinic that made a big difference.”

She also remembers faculty members giving extra time to students, providing observership opportunities in their private clinics and including students in advanced procedures and surgeries. “Professors would go an extra mile to offer us opportunities to learn beyond the standard clinical practice,” she said. “I got to know them better and gain that extra experience – it was an important part of my education.”

The 31-year-old is now practising on Canada’s west coast as a generalist at dental practices in Vancouver and White Rock. She also recently started working at a Chilliwack practice part-time, joining former Schulich Dentistry classmate Dr. Igor Nazirov, DDS’14.

She is currently focused on enhancing her clinical skills, but does see a role for oral health advocacy in her future. “Our responsibilities as dentists should involve more than just treating our patient’s teeth,” she said. “There’s a bigger picture. I see the need for more patient education and awareness when it comes to the link between oral health and systemic health.”

With her partner pursuing specialty dental training at the University of British Columbia, Dr. Dupuis says the future is still up in the air, but being closer to family is a priority. She expects the two will settle in Alberta or Ontario.

For now, she is expanding her own skill set under the guidance of her boss in White Rock, Dr. Alisa Lange – another female mentor in the field.

“She cares about the well-being of her patients and that comes out in her practice style,” said Dr. Dupuis. “It’s been a great experience learning from her so far.”

With mentorship framing her own experiences, Dr. Dupuis advises dentistry students and new graduates to seek out role models who exemplify professional values like compassion, integrity and knowledge.

“Finding a good mentor can make all the difference,” she said. “When we graduate from dental school, we don’t know it all. We get into the real world and realize the field changes so quickly and there’s always going to be something new to learn.”

And while Dr. Dupuis remains humble as a young professional with her career ahead of her, she is already a role model to those closest to her.
Making Connections

For graduates connecting with alumni from our many programs is just one of the perks of being part of the Schulich Medicine & Dentistry family. We were pleased, this year, to host several events where our alumni had a chance to engage with each other while connecting back with the School.

Homecoming Weekend

More than 300 alumni and their families came back to campus for Homecoming. They participated in lectures and lunch during the day and transitioned into an evening celebration at the Golden Alumni Reception, Dentistry Reception and Dean’s Gala. During the Gala, the Alumni of Distinction Award recipients were honoured and guests enjoyed an evening of fine dining and dancing.

Reunion Celebrations

Schulich Medicine & Dentistry alumni love to celebrate and stay connected. The Medicine Class of 2011 (pictured above) had more than 50 attendees at their five-year reunion celebrations which included a cocktail reception, afternoon BBQ, dinner and dancing.

The Medicine Class of 2006 (pictured below) spent the weekend together touring campus, connecting with current students, and reconnecting with faculty from their time at the School.
Niagara-on-the-Lake Wine Tasting
Dr. Michael J. Strong and his wife Wendy toured Two Sisters Vineyards with alumni and learned about the science of wine making while sampling wines. The event brought together alumni from our undergraduate and graduate programs from across the region.

Master of Public Health Alumni and Student Reception
On March 29, current Master of Public Health students and alumni connected during a reception held following the Ontario Public Health Convention in Toronto. They all enjoyed sharing their academic and professional experiences, as well as learning more about the exciting alumni programming that exists for Schulich Medicine & Dentistry alumni.

For information on Homecoming Weekend, upcoming Schulich Medicine & Dentistry alumni programming, class reunions and to submit your reunion photos please contact Nicole Dorssers, Special Events & Alumni Engagement Officer at 519.661.2111 ext. 85146, or nicole.dorssers@schulich.uwo.ca
The annual Ontario Dental Association Spring Meeting on May 5, was a great opportunity for more than 170 Dentistry alumni to reconnect and enjoy time together. Dr. Christy Nicolucci, DDS’07, President, Schulich Dentistry Alumni Society shared words of welcome and invited alumni to become involved in the Schulich Dentistry Alumni Society and the School.

Schulich Dentistry Annual ODA Reception

Winnipeg Dinner

While attending the Canadian Conference on Medical Education, Dr. Bertha Garcia, Vice Dean, Education had the opportunity to enjoy dinner and conversation with alumni from medicine, dentistry and graduate studies programs.
Dr. Tehmina Ahmad’s emotions are still raw when she speaks about the last time she saw Sara*. “She was only 60 lbs and her liver line was visible through her shirt,” Dr. Ahmad said. “She was so sick but her bright personality still shone through.”

Dr. Ahmad met Sara in 2012, when she began volunteering at Safe Space, a support centre for sex workers, allies and women in crisis located in east London. Hearing Sara’s story of the guilt and shame she felt after being treated in hospital following an assault was a defining moment for Dr. Ahmad, inspiring her to apply to medical school.

“Whatever a person’s background, they deserve compassionate care and to be treated with dignity and respect,” said Dr. Ahmad. “Getting to know Sara, I realized this wasn’t always the case, and I knew then that I needed to pursue medicine and make sure that my patients never felt like she did.”

Dr. Ahmad grew up in London. Her parents had settled in the community after fleeing Uganda during Idi Amin’s dictatorship. Although money was tight, education was a priority in the Ahmad family, and Dr. Ahmad and her brother were encouraged to pursue a university degree.

It wasn’t always easy, and there were times during her undergraduate years when Dr. Ahmad worked three jobs. “I’d work in the lab from 8:00 a.m. to 4:00 p.m., then head off to the restaurant and work there until 1:00 a.m. Then on weekends, I’d open up the coffee shop and be there all day,” she said.

Despite this, she feared it would be impossible to save enough money to pay for medical school. She wasn’t deterred however, and moved forward with her application.

Receiving a Schulich Scholarship, which provided her with $25,000 per year throughout her four years of undergraduate medical school studies, removed the financial barrier for Dr. Ahmad. “I’m so grateful for this scholarship, because it made medical education accessible for me,” she said.

In addition to excelling in her medical studies, Dr. Ahmad was very involved with her class locally, proudly serving as Orientation Week Captain. She also held a leadership position on the School’s Student Affairs Committee for three years, helping to revamp peer resources assisting students to find health and wellness guides, and served as a peer confidant for her classmates.

On a provincial level, she served on the executive committee as a Wellness Representative for the Ontario Medical Students Association.

Of all her extracurricular endeavours, however, she’s most proud of working alongside her classmate, Dr. Han Yan, MD’17, on a position paper on transgender health care that was adopted and unanimously supported by the Canadian Federation of Medical Students. The paper highlighted recommendations for medical curricula and the need for more specific materials to better address the needs of this marginalized population.

Dr. Ahmad says that in addition to alleviating the financial burdens of medical school such as tuition, travelling to electives, and preparing for CaRMS, the Scholarship gave her the ability to get involved and expand her horizons. In doing so, the School’s named benefactor was always on her mind.

“I feel as though everything I accomplished during medical school had a little more purpose because I wanted to make Mr. Schulich proud,” she said. “I wanted him to know that his money didn’t go to waste and by investing in me, I will take every opportunity to invest in myself so I can better serve the communities I have come from.”

Dr. Ahmad is just one of more than 125 students in medicine, dentistry and pursuing their graduate training at Schulich Medicine & Dentistry each year who receive a Schulich Scholarship.

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—Dr. Tehmina Ahmad, MD’17

*Name changed to protect the identity of individual
Alex Presello is another recipient. Presello says that the process of applying for the Scholarship stirred up many sensitive memories but represented hope and possibility for him and his family.

“I remember the exact moment when I got the email saying that I was awarded the Scholarship,” he said. “My eyes welled up, I ran upstairs to tell my mom and we stood there in tears hugging. I never imagined receiving support like this.”

The Presello family is no stranger to tragedy. It was a few days before Christmas, nearly 13 years ago, when Presello’s father was critically injured in a near fatal car accident. While being treated in hospital, after the accident, tragically, his father was also diagnosed with a cancer meningioma over his brainstem. Due to partial paralysis and continuing post-traumatic stress disorder, Presello’s father was not able to return to work.

While the incident allowed the Presello family to grow closer and stronger, it created financial hardships. Presello had been seriously considering a career in medicine ever since he stepped into the emergency room that tragic day when his father was injured. And he’s taken the steps to make his dream a reality.

Along the way, Presello says his mother has served as role model.

“My mom is my inspiration,” he said. “Despite everything we were going through, she showed determination and strength, and that motivated me to pursue my dream.”

Presello completed his undergraduate and master’s degrees at the University of Windsor and spent seven years volunteering in the anatomy lab used by medical and nursing students at the University.

He is thrilled to be a member of the Medicine Class of 2020, and feels fortunate to be pursuing his education at the Schulich Medicine & Dentistry – Windsor Campus.

Presello’s first year has been one of adjustments and new opportunities. But he’s found his place and has enjoyed serving on the executive for the Windsor Emergency Medicine Interest Group and getting to know his peers. He’s eager, he says, to continue his studies, take on more leadership roles and begin applying what he’s learning in the classroom to a clinical setting.

Already making an impact, this year Presello’s classmates nominated him for a Peer Learner Award. The award recognizes students who have made significant contributions to improving the quality of academic or extracurricular life and who have provided leadership and contributions to the well-being of other learners at Schulich Medicine.

Presello is embracing his medical school journey with his classmates who he describes as incredible. Always on his mind, however, is the support he received through the Schulich Scholarship.

“This tremendous gift means so much to me and my family. It’s truly a blessing without which it would have been nearly impossible to pursue medicine.”

Although at different stages of their education, Dr. Ahmad and Presello agree that the Schulich Scholarships do so much more than financially support students. Because of the Scholarships, diversity within classes is enriched, the School’s culture is enriched and the collective learning experience is enhanced.

By sharing their stories, Dr. Ahmad and Presello, and their families, hope students who may think medical school is not a possibility will be inspired and will pursue their dreams.

“...tremendous gift means so much to me and my family. It’s truly a blessing without which it would have been nearly impossible to pursue medicine.”

—Alex Presello
As medical students, we’re told that physicians can make change happen, and that their signature means something,” said Rachelle Beanlands. “As second-year medical students, we don’t really know what that means yet, but as future physicians we can use our voice and position now for positive change.”

Beanlands is a member of the Medicine Class of 2020, and with her classmates Lily Robinson and Kyla Vanderzwet, advocates for equality for all in the delivery of health care. Together, they are working on a project focusing on the LGBTQ community in London and the inequities of the delivery of health care to that community.

“We want to eliminate refusal of care and discrimination, help facilitate culturally competent care, and build awareness for physicians of resources that exist which will enable them to provide the best care for the LGBTQ community in London,” said Robinson.

It’s a lofty goal, but one the trio is confident will be realized.

That confidence stems from strong track records of community experience working with social services agencies, including Mission Services, Big Brothers and Big Sisters, from promoting LGBTQ anti-bullying strategies with high school students, and from volunteering in their local communities to promote sports and wellness.

The idea for the project came during their Social Medicine course, which is new to the undergraduate medical school curriculum. The course concentrates on the social, cultural and economic impact of medical phenomena and covers social medicine, service learning, medical ethics, epidemiology and population health.

As part of the course, students are asked to identify a demographic of interest and a challenge facing that demographic.

The group is working closely with Liane Powell, a public health nurse from the Middlesex-London Health Unit, who is active in the LGBTQ community and who has whole-heartedly endorsed the project.

Through focus groups and open forums, they will gather feedback on individuals’ experiences with health care and the changes they want to see and feel are needed during care. They will also speak with physicians to gain their perspectives and learn more about the resources that are in the community and the access or lack of access to the resources. They expect to be working on the project during the next three years.

While these future physicians became engaged with the project through a course, they believe that the School fosters a culture of advocacy by providing numerous opportunities for students to become involved in the community.

“The School has built a culture where it is understood that you need to strive to understand different perspectives and cultures, get involved and advocate for the most vulnerable of our populations,” said Vanderzwet.
That’s how Dr. Matt Harper, DDS’17, first became aware of the DOCSKids Program, a community outreach program aimed at providing preventative oral health care education to children in the London community. It’s supported entirely through student volunteers from Schulich Dentistry and Dr. Harper was quick to respond to a call for volunteers in his first year.

For the past four years, he volunteered with the Program, serving on its executive and presenting at least 12 sessions a year teaching young children and their families in the London community about good oral health.

So inspired by the impact the DOCSKids Program was making, Dr. Harper looked for additional outreach opportunities. During the summer of 2016, he travelled to Honduras with a group of paediatric dentists, nurses, and occupational and physiotherapists to provide care, education and training to community members.

Dr. Harper was struck by the conditions of some of the more isolated villages they visited. While he says they did provide treatment, the working conditions were poor and there was no electricity or running water.

“It was a humbling experience,” he said. “But I realized that I have a role to play in making change, improving access to care and education and advocating for my patients.”

Dr. Harper understands it’s easy for dentistry students to stay within the bubble of the University and focus only on their studies, but he believes that to truly live up to the values of the School and the profession of dentistry, you have to reach out to your patients and advocate for them.

Nancy Wu has made reaching out to those in need a major aspect of her life. She considers herself an advocate for the dignity of human beings who experience marginalization.

The third-year BMSc student channels her energies into a number of organizations, but she says her work with homeless people in Toronto and with Partners In Health Canada best illustrate her advocacy position and how she’s challenged herself to step up and make a difference.

Wu recalls walking down the streets of Toronto feeling afraid to make eye contact with homeless people. Frustrated with her failings to make a simple and honest connection with another human being, she found an opportunity to make amends and make a difference. She began volunteering at a community centre teaching art to people experiencing homelessness.

“I love art,” she said. “It’s one way to express yourself and feel like you have humanity, and I want to share that love to help people reclaim their sense of self.”

With an interest in social determinants of health, she has taken on leadership roles with Partners In Health Canada, a non-profit organization committed to global health equity. Wu is working to raise awareness about neglected health systems around the world. She has also organized campus events, such as global health case competitions, and this summer is an intern engaging students from across Canada.

Wu admits that it’s easy to get cynical about the state of things in the world right now, but believes that education and activism are antidotes to that cynicism. Through her work, she wants to instill some hope in her peers and encourage them to take action.

Anthony Li shares Wu’s commitment to action and has hundreds of hours of volunteer work to his credit. He has been recognized for his contributions with a Lieutenant Governor’s Award.

Now Li is pursuing a joint BMSc/HBA degree and is following his passion for youth advocacy, taking a leadership role with Plan International Canada’s Youth Advisory Council. A child rights
organization, Plan International works with communities in many countries to alleviate child poverty so that children can realize their full potential.

Li is one of 10 organizers from across Canada serving on the Council who advocate for improving the lives of children and youth around the world.

This year, the Council became involved with Girls Belong Here, an initiative providing girls in Canada the opportunity to hold traditionally male positions of power. The project saw young women from across the country exchange positions with federal ministers in parliament for a day. Taking place on International Women’s Day, the project garnered national media attention and exploded on social media.

On the heels of the project, Li was chosen to attend the 61st Commission on the Status of Women at the United Nations with Plan International, and his participation has further solidified his commitment to his advocacy work.

Ramina Adam, a PhD trainee in neuroscience, says she’s an advocate for women having equal opportunity to do what they love, to get the support they need, to not be discriminated against early on in their academic careers, and to feel confident pursuing their passion for science and research.

An avid reader of feminist literature for some time, Adam began noticing that the longer she progressed with her own academic career the fewer female professors she had, the fewer women were in the lab, and how women were spoken about differently – especially as it related to their intellectual abilities.

"When I started in my lab, it was male dominated. Fortunately, I was able to find a group of women to network and socialize with," said Adam.

Adam learned about and joined Western University’s Graduate Women in Neuroscience group. She serves as the graduate liaison for the University’s Undergraduate Women in Science group.

In 2016, she helped to organize the Young Women in STEM conference on campus, engaging more than 50 undergraduate students from science, engineering and math in poster sessions, workshops and guest speaker presentations. The conference also featured a graduate student expo, with trainees hosting booths and demonstrating experiments, as well as an industry expo.

"I wanted to bring smart women together to talk about research and how to improve the research environment so we could inspire more young women to pursue their interests," she said.

Adam and her group are now planning two more conferences for 2018 for current undergraduate students.

She believes that she is in the perfect position and place to make a difference.

"As students in science, medicine and dentistry, we receive unique training. We can understand research and then effectively communicate and apply what we have learned to bring about positive change," said Adam.

Through her experiences at the conference, Adam has become increasingly more comfortable speaking out about the lack of gender diversity in science and more inspired as an advocate.

Adam strives to be a role model for young women in science – whether that means achieving her goals in the lab or being an activist.

"I try to be the archetype of the female scientist, so when other young women see me, they can see themselves.”
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SATURDAY, OCTOBER 21

FEATURED EVENTS

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Golden Alumni Reception
Dentistry Alumni Cocktail Party
The Dean’s Homecoming Lunch

The Dean’s Distinguished Lecture featuring
Dr. Margaret Chan, BA’73, MD’77, DSc’99

Pseudoscience Expert Panel Discussion featuring
Drs. Jennifer Gunter, Resident Alumna, Marina Salvadori,
Mark Speechley, BA’79, MA’82, PhD’87, and Saverio Stranges

Historic Walking Tour

schulich.uwo.ca/homecoming
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Auditorium A, University Hospital,
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Hear from leading physicians and researchers
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Dr. V. Wee Yong, the 2017 J. Allyn Taylor
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Panel Moderator: André Picard, health
reporter and columnist, The Globe and Mail

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