

The Surgery Update

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Chair's Column: The Diversity and Complexity of Surgical Care at London's Teaching Hospitals

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Dr. John D. Denstedt
Richard Ivey Chair/Chief

In past issues of the Surgery Update, my column has focused on topics related to the academic interests and development of the Department of Surgery. In this Chair's Column I will focus on items related to our role in patient care: specifically the diversity and volume of patients we treat and the complexity of surgical care at London's teaching hospitals.

The Department of Surgery has a long tradition of providing high quality patient-centred care to the people of Southwestern Ontario and beyond. Our teaching hospitals – which include London Health Sciences Centre's (LHSC) University Hospital and Victoria Hospital, and St. Joseph's Health Care, London (SJHC) combined with The University of Western Ontario - represent one of the six Academic Health Sciences Centres (AHSC) in Ontario.

The provision of care is a complex process. Providing integrated patient care across different settings is extremely important for the health of our community. Collaboration and communication between surgeons, primary care physicians, and many others is crucial in ensuring people receive the best patient-centred care possible in our surrounding area. This article aims to delve into the complexity of cases we do by looking at the types of surgical cases we perform, and some of the numbers behind them. I hope that after you have read it, you gain a deeper understanding and appreciation for the work and expertise of our surgeons, clinicians, nurses, and other allied health personnel who contribute to the outstanding surgical care in London.

Health care provision can first be subdivided by case type into primary, secondary, tertiary and quaternary care. The distinction between each of these levels is determined by an algorithm, however they can be broadly defined in the following manner: primary care is referred to as the most basic hospital care; secondary care is care provided by a specialist health care professional upon referral from a primary care physician; and quaternary and tertiary care both require highly specialized skills, technology and support services. Normally only one hospital in a region would provide the majority of quaternary care services to residents in a particular area, while tertiary services would also be consolidated at a single site, but may be provided at more than one hospital.

SJHC and LHSC provide all levels of surgical care for the people of London, and frequently for patients throughout the region. For those beyond these boundaries, primary and secondary care is often provided by other hospitals in communities such as Woodstock, St. Thomas, Stratford and Strathroy to name a few. Like other AHSCs, our London hospitals provide the vast majority of the tertiary and quaternary care for the region, and for certain disorders we are a provincial referral centre. Complex surgical cases are increasingly being performed in AHSCs, and where possible

the less complex cases are appropriately being decanted to the community setting.

Surgeons in the City of London provide expertise on an extremely wide range of surgical cases and in fact, London Health Sciences Centre has the widest range of surgical cases (known as Case Mix Groups or CMGs) of any hospital in the Province. Our three teaching hospitals in London, like others in the province, are exceptionally busy. Surgeons at SJHC and LHSC performed a total of 41,641 surgical cases this past year. This number includes patients treated not only by the 85 surgeons in our Department but also by surgeons in other academic Departments at Western including Otolaryngology, Gynaecology, Neurosurgery and Ophthalmology. Of the 41,641 city-wide surgical cases performed annually, approximately 24,548 were performed by Department of Surgery members, which includes members from the Divisions of Cardiac Surgery, General Surgery, Orthopaedic Surgery, Paediatric Surgery, Plastic & Reconstructive Surgery, Thoracic Surgery, Urology and Vascular Surgery. A breakdown of the types of surgical cases and volumes of surgery by Division is provided in the enclosed tables. Paediatric surgery numbers are embedded within their respective divisions. To provide a more detailed perspective on the patients treated at London's hospitals, some examples include: 388 adult and 81 paediatric trauma cases, 1599 joint replacements, 1403 cardiac surgeries, 169 transplants (11 heart, 62 liver, 86 kidney, 10 pancreas/kidney), 3368 cancer surgeries, 1474 lithotripsies for kidney stones, 157 robotic surgeries and 3836 pediatric surgeries annually. These case volumes are amongst the highest in the country.

Surgical cases can be further classified as scheduled or emergency cases. Surgical emergencies of course can occur day or night, 365 days a year, and are attended by on-call surgeons. Annually there are approximately 5,383 emergency surgery cases performed at SJHC, Victoria Hospital and University Hospital. Emergency cases are coded by a provincial classification system depending on how quickly patients must be triaged into the OR.

The coding system goes as follows: a patient is classified as an "A" if they must be transferred to the OR within 0-2 hours of arrival at the hospital and there is an immediate threat to life and limb; they are classified as a "B" if they must be transferred to the OR within 2-8 hours and are still time sensitive; they are classified as "C1" if they are to be transferred within 8-12 hours; and they are classified as a C2 if they are to be transferred to the OR within 12-48 hours of arrival. At SJHC this past year, there were approximately 28 "A" cases, 110 "B" cases, 653 "C1" cases, and 293 "C2" cases. At LHSC, there were 379 "A" cases, 1041 "B" cases, and 2879 "C" cases (for data purposes, C1 and C2 were combined).

Surgical cases can also be divided into inpatient or outpatient cases. This past year, approximately 15,101 surgical patients were treated as inpatients at LHSC, and 9,350 were treated as outpatients. Reflective of its ambulatory focus at St. Joseph's Health Care, approximately 3,452 were treated as inpatients and 13,738 were treated as outpatients.

The average length of stay of a surgical patient at LHSC last year was 7.53 days, an 8.4% decline over the last 5 years, reflecting the trend to minimally invasive interventions with a shorter hospital stay. In addition to this, across the city there were an astounding 453,592 ambulatory visits to surgical clinics.

Caring for patients also helps us teach the next generation of surgeons, nurses and other health personnel. Provision of patient care is integrally related to the academic mission of our teaching hospitals, The University of Western Ontario and Fanshawe College. The training of nurses, allied health personnel, medical students, surgical residents and fellows is only possible with the participation of our surgical patients. In addition to this, many patients also participate in clinical trials, contributing to improving care for others. Patients also actively support fundraising priorities in our hospitals, the Department and at the University for which we are extremely grateful.

Finally, the activity generated by surgical care provided at SJHC and LHSC represents a powerful economic driver for the City of London and its businesses, both in the medical and non medical industries.

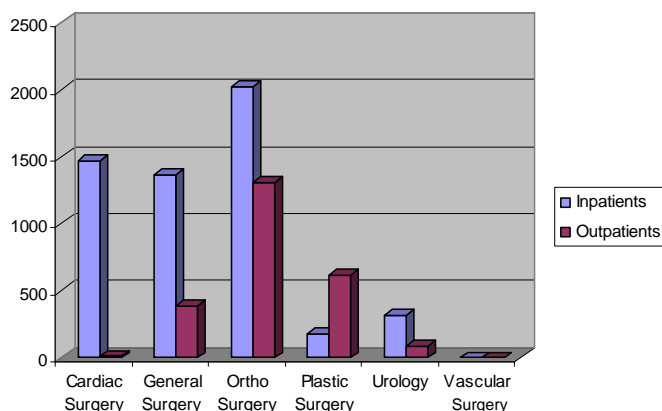
It is important to emphasize that surgeons are only one part of the complex matrix of care provision required to manage the spectrum of surgical cases. We would be unable to provide the care we do without the expertise of many other clinicians in Anesthesia, Pathology, Radiology, Critical Care, Internal Medicine; nurses in the OR, clinics and on the wards; technicians in medical imaging and bioengineering; and so many more.

The Department of Surgery also receives outstanding support from the Robarts Research Institute and Lawson Health Research Institute - and reciprocally surgeons are fundamental contributors to clinical and basic research endeavors. We also have an excellent working relationship with our colleagues in Windsor and others in Southwestern Ontario as they have been instrumental in furthering surgical care and education in that region.

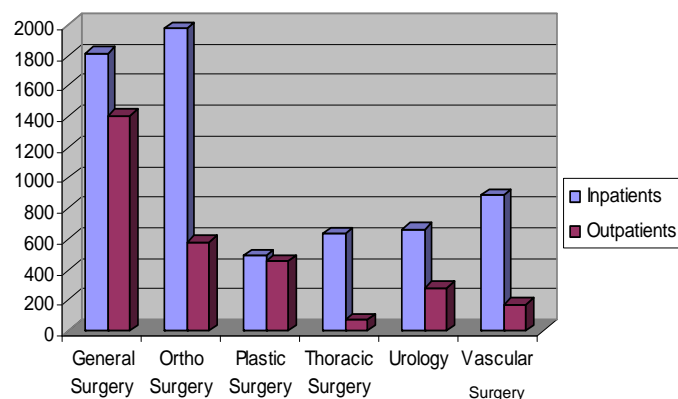
Every surgeon in London is actively engaged in providing clinical care as well as contributing to the academic mission of teaching and research. Our waiting lists both for initial consultation and surgical procedures are longer than we all would wish. In a constrained economic health care environment both patients and surgeons are frustrated by wait times and potential limited access to the latest surgical technology. Nonetheless, we continue to work towards reducing wait times and developing the infrastructure to increase access to new surgical innovations.

The provision of care is a complex process. Providing consistent, integrated patient care across different settings is extremely important for the health of our community. I am hopeful this edition of my column has provided a snapshot into the diversity of patient care provided by the surgeons and others in the Department of Surgery at Western, London Health Sciences Centre and St. Joseph's Health Care, London. I also hope you have gained a deeper understanding and appreciation for the work and expertise of our surgeons, other clinicians, nurses, and other allied health professionals who contribute to the outstanding surgical care in the City of London.

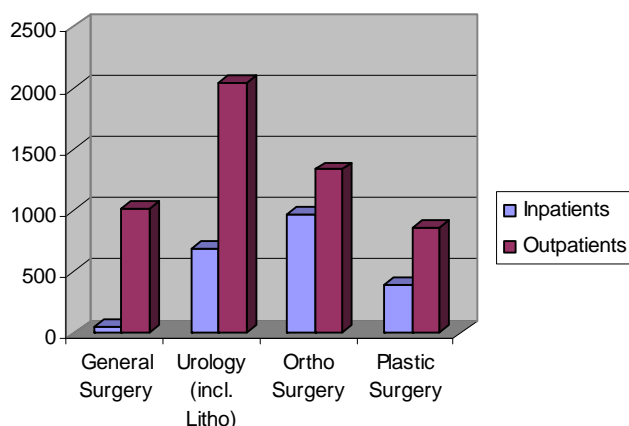
F2009 Surgery Numbers by Division- University Hospital



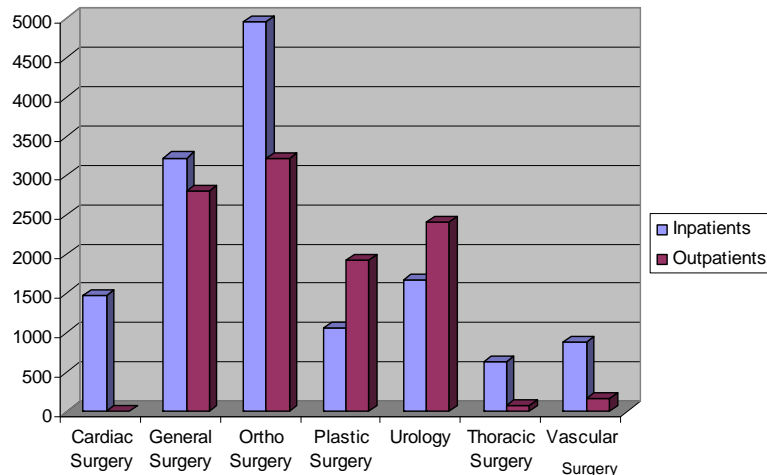
F2009 Surgery Volumes by Division - Victoria Hospital



F2009 Surgery Volumes by Division - SJHC



F2009 City-wide Surgery Volumes by Division



Sharing surgical lessons from the Canadian field hospital in Kandahar, Afghanistan

Lessons learned at the Canadian-run military hospital in Kandahar, Afghanistan could help surgeons prepare for civilian disasters, according to Dr. Vivian McAlister, from the Division of General Surgery, who has served two tours at the hospital. He spent two months working at the Kandahar hospital in 2007 as a civilian surgeon before joining the Canadian Forces and doing a second tour at the hospital this past winter.

War surgeons have developed ways to deal with situations where many severely injured patients are brought to hospital at the same time. McAlister says this knowledge would be very use-

ful in Canadian hospitals when dealing with catastrophes such as a bus crash on the 401 or a roof collapse in a school.

Vivian prepared a course in catastrophic surgery which was offered in September at the Canadian Surgery Forum in Victoria, British Columbia, so military surgeons can share these skills with their civilian colleagues.

"Combat surgery has taught us to rapidly transport patients to hospital resuscitating them along the way, to expedite life and limb-saving surgery, but then to send patients to the intensive care until their normal physiological status returns before attempting to complete surgery," says McAlister.

"More patients have been saved using these techniques known as 'damage control resuscitation' than if definitive surgery is done up front."

He says combat surgery also incorporates methods to help patients, friends and staff deal with the stress of these awful situations in order to minimize harmful responses.

An article by McAlister on the history of military surgery in Canada and how the knowledge gained at the field hospital transfers to civilian hospitals was published in the June issue of the *Canadian Journal of Surgery*.



Vivian McAlister (right) teaching gastroscopy to an Afghan doctor



Drs McAlister and Lyster (Danish Army) perform an emergency laparotomy for gun shot abdominal wounds

British, American, German and Dutch doctors line up with Canadian colleagues outside the hospital at Kandahar Airfield. Dr McAlister is second on the right



Surgery welcomes new faculty members

Vascular surgeon **Dr. Jeremy Harris** joined the department of surgery this summer, as the newest member of the vascular team. He recently returned from Arizona after completing an endovascular fellowship at the Arizona Heart Institute.

Dr. Harris is happy to be back in London, where he pursued the majority of his education and training. He completed his undergraduate degree at the

Richard Ivey School of Business, attended medical school at Western, and did both his general surgery residency and a vascular fellowship here as well. He is also currently enrolled in a Masters of Health Research Methodology at MacMaster University, and is interested in pursuing clinical and research endeavors in endovascular approaches to peripheral vascular disease.

Jeremy is married to Teresa and they have 4 children.



Dr. Alp Sener joined the Division of Urology and the Multi-Organ Transplant Program team this summer as an Assistant Professor of Surgery and Microbiology and Immunology. Apart from a general Urology practice with a focus on multi-organ transplantation, his appointment as a Schulich clinician-scientist will enable him to devote considerable time to continuing his research in the fields of T-cell mediated graft rejection and in developing methods of mitigating organ ischemia-reperfusion injury.

Dr. Sener was born in Turkey and moved to Canada at an early age. After growing up in Calgary, he moved

to Texas to complete his undergraduate studies at the University of Texas in Austin. Upon concluding his undergraduate studies, Alp returned to Calgary where he obtained his PhD in renal physiology followed by his MD at the University of Calgary. It was there that he met his wife, Melanie, an ER nurse. Together, they moved to London so Alp could complete his residency training in Urology at Western. Since then, they have been in Baltimore where Alp finished his fellowship in kidney and pancreas transplantation at the University of Maryland Medical Center

Dr. Sener's interests outside of medi-

cine include spending time and traveling with his family as well as architecture and international trade and business. He is also looking forward to rekin-

dling his competitive rowing skills on the Thames River and further developing his golf swing.



Dr. Steven Latosinsky is a General Surgeon at LHSC's Victoria Hospital with an office within the London Regional Cancer Program.

Dr. Latosinsky completed his medical education at the University of Toronto in 1990. He did an internship at the University of British Columbia and completed a general surgery residency at the University of Calgary. He has a surgical oncology fellowship from the Medical College of Virginia and an MSc in Health Services Research from McMaster University. His first appointment in 1999 was at the Winnipeg Health Sciences Centre where he attained the rank of Associate Professor in the Departments of Surgery and Community Health Sciences with the University of Manitoba.

Dr. Latosinsky's areas of clinical interest are colorectal and breast can-

cer, melanoma and sarcoma. His research interests are in health services research as it pertains to cancer including grants and publications in the areas of patterns of care and outcomes in colorectal and breast cancer, patient centered decision making and cancer screening. He was the first recipient of the University of Manitoba's Rudy Falk clinician scientist award. He is a member of the Canadian Association of General Surgeons and American College of Surgeons Evidence Based Reviews in Surgery Group.

Dr. Latosinsky is well acquainted with Southwestern Ontario. He grew up in Sarnia, Ontario and graduated from the University of Western Ontario in Engineering in 1983. He is married to Dr. Elizabeth Saettler who is also joining the Department of Surgery as a surgical oncologist. They

have three children. The family enjoys the beach, they are avid skiers and have extensive expertise in family bike vacations through Europe.

He feels it is a great opportunity to be working in the Department of Surgery at Western with such a close association to the London Regional Cancer Program.

The family looks forward to warm winters and living closer to relatives, old and new friends in Southwestern Ontario..



Dr. Neil Merritt was born and raised in Grimsby, Ontario. He completed an undergraduate degree at Queen's University followed by medical school at McMaster in Hamilton. He then pursued further training in adult general surgery at Queen's. This was followed by one additional year in pediatric trauma and critical care as well as two years of pediatric general and thoracic surgery.

His current area of interest is in pediatric

trauma. Specifically he is interested in pediatric focused abdominal sonography for trauma and avoidance of radiation risk associated with more conventional forms of imaging in children.

His wife, Laura, is an emergency room physician at the LHSC. They currently have two children, who provide a constant source of inspiration. They are both thrilled to be back in the area in which they grew up.



Dr. Rajni Patel receives prestigious CREATE grant from the Government of Canada

Dr. Ranji Patel was recently awarded one of the Canadian government's new Collaborative Research and Training Experience (CREATE) Program grants.

Dr. Patel, a Distinguished University Professor in Western's Department of Electrical and Computer Engineering with a cross appointment in the Department of Surgery, and Director of Engineering at CSTAR, received \$1.65 million in support for his Com-

puter-Assisted Medical Intervention (CAMI) program.

The CAMI program will train graduate students and post-docs for the next generation of engineers and scientists who have the interdisciplinary expertise needed to contribute to Canadian industry in the rapidly advancing field of medical devices and technologies. The CREATE funding will allow even better training opportunities as

there is no program like this anywhere else in Canada.

Launched by the Natural Sciences and Engineering Research Council of Canada (NSERC) in May 2008, CREATE gives science and engineering graduates the enhanced skills set they need for careers in industry, government or academia.

Dr. Robert Litchfield wins the CIHR-CMAJ Top Canadian Achievement Award in Health Research

The Canadian Institutes of Health Research (CIHR) and the Canadian Medical Association Journal (CMAJ) honoured eight outstanding Canadian individuals and teams with the first ever CIHR-CMAJ Top Canadian Achievements in Health Research Awards, which recognize and celebrate Canadian health re-

search and innovation excellence.

The winners were selected by a peer-review panel of Canadian and international experts, who looked for the discoveries and innovations that had the biggest impact on the health of people in this country and around the world.

Dr. Bob Litchfield, from the Division of Orthopaedic Surgery was one of eight winners for a ground-breaking study of patients with arthritic knees, proving that knee surgery provided no extra value over physiotherapy and patient education.

New Lawson Intranet site offers helpful resources for researchers

Have you ever wondered what types of services the Lawson Health Research Institute offers in terms providing information on grant development, funding opportunities, research training, and other services? And more importantly, who to contact for assistance in each of these areas?

Lawson's recently launched intranet site offers information in each of these areas, as well as downloadable forms and templates. The site also provides contact information for Lawson staff able to assist you with various research related activities.

The new web address is:

<http://www.lawsonresearch.com/v1.0/website/intra/home.htm>

It can also be accessed through a link from the LHSC intranet site.

Rorabeck Bourne Clinic opens its doors at University Hospital

The new state-of-the-art Rorabeck Bourne Joint Replacement Clinic opened in June at University Hospital with the support of orthopaedic surgeons Dr. Robert Bourne and Dr. Cecil Rorabeck.

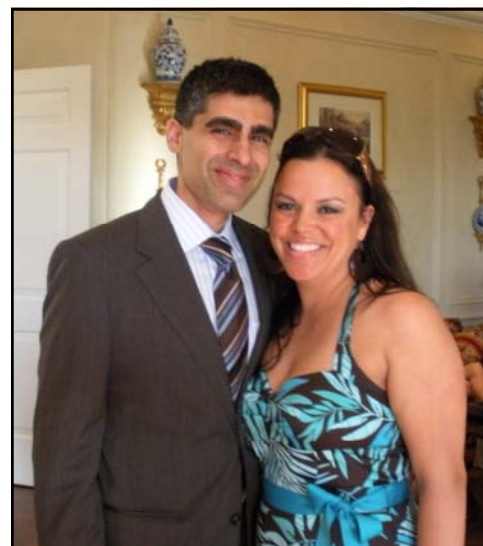
Approximately 1,300 joint replacements are performed at LHSC each year. To meet the ever growing need for orthopaedic care, the new clinic houses five new exam rooms, an additional procedure room, state-of-the-art equipment and computer systems and a new waiting room with furniture that eases patient comfort.

Dr Rorabeck is one of the world's leading experts on hip and knee replacement surgery. He is also a past-President of the Canadian Orthopaedic Research Society and served as President of the Canadian Orthopaedic Foundation from 1994 to 1998. Appointed as Robarts Council Chair in May 2009, his commitment to advancing research and improving human health continues to benefit Robarts and the London community.

Dr. Bourne has over 200 peer-reviewed publications and is a past President of the Canadian Orthopaedic Association (2005-06) and the Hip Society (1998-99), and will be President of the Knee Society in 2011. Dr. Bourne is actively involved with both clinical and basic science research. His primary interests are clinical trials, musculoskeletal imaging, wear studies, retrieval analyses and analysis of large data sets (i.e. Canadian Joint Replacement Registry).



Dr. Abdullah Ali, Dr. Ben Isserlin, Dr. Ken Leslie, Dr. John Sostaric, and Dr. Jeff Shum, all from General Surgery



Dr. Dave Nagpal and Dr. Kirsty Boyd



Dr. Ken Faber, Dr. Scott Wotherspoon, Dr. Ajay Manjoo, Dr. Gladys Chan and Dr. Matt Snider, all from Orthopaedic Surgery

The Department of Surgery Resident Celebration Dinner was held on June 26th at the London Hunt and Country Club. All residents were successful in passing their Royal College exams.

This year's event was held on the same day as the Robert Zhong Department of Surgery Research Day.

This year's dinner was attended by graduating residents, spouses, program directors, faculty and research day presenters.



Dr. Darrin Payne and Dr. Ray Guo from Cardiac Surgery



Dr. Mrinal Dhar and Dr. Gerry Brock from Urology



Dr. Rodney McGory and Dr. Richard Inculet from Thoracic Surgery

Congratulations to the class of 2009!



Photo (Left to right): Matt Snider, Gladys Chan, Scott Wotherspoon, Kirsty Boyd, Abdullah Ali, Mrinal Dhar, John Sostaric, Scott Hamilton, Darrin Payne, Ben Isserlin, Damian Micomonaco, and Jeff Shum

Absent: Kyle Cowan, Paul Karanicolas, Ajay Manjoo, Rodney McGory, Petar Erdeljan, Jeremy Harris

Canadian first in the treatment of lung cancer

Thoracic surgeon Dr. Richard Malthaner and oncologist Dr. Edward Yu recently removed a small wedge from a patient's lung and then applied a mesh containing brachytherapy seeds to where the lung was resected. Brachytherapy seeds look like metallic grains of rice and are designed to be placed directly into a tumour. They contain radioactive material which kills nearby cancer cells over a period of time. The seeds used in this operation are normally used to treat prostate, breast and skin cancers. This new treatment was done as part of a clinical trial at Lawson Health Research Institute.

The current standard is to perform a lobectomy or the removal of a much larger section of lung. But with lobectomies, patients suffer serious side effects like fatigue and shortness of breath which can affect their quality of life.

By removing a smaller wedge and adding brachytherapy, the trial's researchers anticipate patients will be cured of their cancer and have a better quality of life after treatment. It is also a demonstration of how disciplines who normally refer to one another can collaborate to offer a patient one treatment using both modalities of surgery and radiation therapy.

After receiving approvals to do the clinical trial and re-searching the procedure using CSTAR's surgical training facilities, Drs. Malthaner and Yu sought funding for the seeds. The manufacturer Oncura Brachytherapy agreed to donate the seeds, not only for this operation but for all procedures done at LHSC as part of this clinical trial.

Research Day showcases research in regenerative medicine from Wake Forest University, and highlights growing departmental surgical expertise

The Robert Zhong Department of Surgery Research Day was held on Friday, June 26 at St. Joseph's Health Care, London. This year's keynote speaker was Dr. Anthony Atala, a Professor and Chair of Urology, and Director of Regenerative Medicine, Wake Forest University School of Medicine. Dr. Atala's talk was titled "Regenerative Medicine - New Approaches to Health Care." He gave the audience a glimpse into his ground-breaking work on tissue engineering and regenerative medicine.

In addition to his research and clinical practice, Dr. Atala has received numerous awards and honours, including the US Congress funded Christopher Columbus Foundation Award, bestowed on a living American who is currently working on a discovery that will significantly affect society, and the Gold Cystoscope Award for contributions to his field. Dr. Atala was named by *Scientific American* as a Medical Treatments Leader of the Year for his contributions to the fields of cell, tissue and organ regeneration, and by *Esquire* Magazine as one of the "Best and Brightest," a celebration of Americans committed to positive change. In 2006, he was named by *Fast Company* magazine as one of 50 people who "will change how we work and live over the next 10 years."

To start the day, a special presentation was made by Emily Claydon, a medical student from Schulich titled "The Life and Career of John Wishart (1850-1926), Western's First Professor of Surgery."

Presentations were also made by department members:

Dr. Tina Mele, from General Surgery spoke about her study "The Role of HIF-1alpha in Sepsis."

Dr. Ray Guo, from Cardiac Surgery spoke about his study "Effects of Pulsatile versus Non-Pulsatile Flow During Cardiopulmonary Bypass on Sublingual Mucosal Microcirculation."



Dr. Graham King, Chair of the Research Committee, Dr. John Denstedt, Chair/Chief, Department of Surgery, and keynote speaker Dr. Anthony Atala, Professor and Chair of Urology, and Director of Regenerative Medicine, Wake Forest University School of Medicine

Damir Matic Appointed to AO North America

Dr. Damir Matic was recently appointed to AO North America, the North American branch of the AO Foundation, the largest surgical education trauma association in the world.

He was elected to the craniomaxillofacial education board to direct CME education events throughout North America for the next 7 years for craniofacial surgery. Two plastic surgeons sit on this board which is made up of established, well known and well published US surgeons. He is the only Canadian on the board.

Dr. Christopher Schlachta, from General Surgery gave a talk about minimally invasive surgery, titled "Toward Scarless Surgery."

Marge Lovell, a Clinical Trials Nurse from Vascular Surgery gave a talk titled "Peripheral Arterial Disease: Lack of Awareness in Canada."

Residents from the department also gave talks about their award winning papers:

Dr. Trustin Domes, a resident from Urology presented his study "Prospective Analysis of Intracavernosal Injection Use in Post-Prostatectomy Patients."

Dr. Marlis Sabo from Orthopaedic Surgery spoke about her study "Effect of Coronal Shear Fractures of the Distal Humerus on Elbow Kinematics and Stability."

Dr. David Bottoni, from General Surgery spoke about his study "Development and Validation of a Novel Instrument for the Quantification of Pulmonary Tissue Mechanics."

Dr. Dave Nagpal, from Cardiac Surgery spoke about his research study "Concurrent Prophylactic Left Atrial Appendage Exclusion: Early Results from a Randomized Controlled Trial Pilot Study."

Dr. Stephanie Power from Plastic Surgery gave a talk about her study "Definition and Treatment of the Lateral Bulge Deformity following Primary Cleft Lip Repair using Real-Time High Resolution Ultrasound."

Senior researchers from the Department closed the day with presentations in the area of orthopaedic surgery and urology.

Dr. Jim Johnson, Director of the Bioengineering Lab at the Hand and Upper Limb Centre gave a talk titled "Intra-operative Biomechanics to Optimize Joint Replacement Surgery."

Dr. Gerry Brock from the division of Urology gave a presentation about his study "The Surgeon-Scientist's Role in Management of Erectile Dysfunction following Prostate Cancer Therapy and Peyronie's Disease."

The Resident Research Best Paper Award was handed out at the Resident Celebration Dinner later in the evening. **Dr. Stephanie Power** from Plastic Surgery and **Dr. Marlis Sabo** from Orthopaedic Surgery tied for first place.

Inaugural Ken Harris Bursary Awarded to 4th Year Medical Student

Members of the Division of Vascular Surgery created and funded a bursary award valued at \$1,000 to honour Dr. Ken Harris, who departed this year to take on the role of Director of Education with the Royal College of Physicians and Surgeons of Canada. The award was created to pay tribute to Dr. Harris's interest and leadership in education and will be awarded each year to a graduating medical student who demonstrates excellence in vascular surgery.

This year's inaugural recipient was Dr. Virginia Gunn from the class of 2009. An observership in vascular surgery during her second year was what sparked her interest in general surgery, and she now at UBC for her general surgery training.

Dr. Neil McKenzie Receives Annual Achievement Award from the Canadian Cardiovascular Society

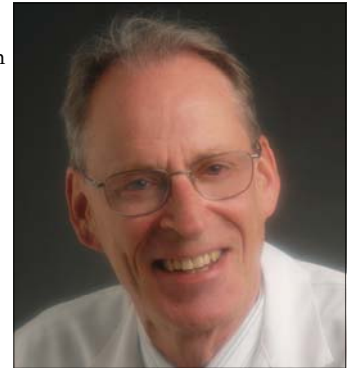
Dr. Neil McKenzie has won the Annual Achievement Award of the Canadian Cardiovascular Society created in recognition of Canadians who have made outstanding contributions in their career within the cardiovascular field. The award will be presented to him at the Canadian Cardiovascular Congress in Edmonton in late October.

Dr. McKenzie received his medical degree at the University of Aberdeen in 1968. After internship, he was a British Heart Foundation research fellow for two years and worked in Sweden where he published papers on platelet function in vitro and in vivo; this work led to a Ph.D. from the University of Aberdeen in 1973. Dr. McKenzie subsequently undertook General Surgery training in Aberdeen and immigrated to Canada in July 1974 to complete training in Cardiovascular and Thoracic Surgery at the newly opened University Hospital. He was appointed as an Assistant Professor in the Department of Surgery at the University of Western Ontario in January 1977, as well as a consultant surgeon in Cardiovascular and Thoracic Surgery at the University Hospital. He rapidly progressed through the academic ranks and was promoted to Associate Professor in 1980 and Professor and Chair of Cardiac Surgery at the University of Western Ontario in 1986. He led the Division of Cardiac Surgery at Western with distinction for the next 11 years.

In 1979-80 an initial supply of Cyclosporine A became available to researchers at the Papworth Hospital in Cambridge, Stanford University and The University of Western Ontario. Dr. McKenzie initiated studies on the use of Cyclosporine A in canine heterotopic and or-

thotopic heart transplantation, and published the results of his observations in the transplant literature. In early 1981 he established the first successful clinical heart transplant program in Canada at University Hospital, with the collaboration of Drs. Bill Kostuk and Cal Stiller. Dr. McKenzie has since performed over 250 clinical heart transplantations and is one of the most experienced transplant surgeons in Canada. In 1984 he also established the first successful program of heart-lung transplantation in Canada.

In addition to his clinical and scientific contributions to the development of thoracic organ transplantation in Canada and internationally, Dr. McKenzie has made very major contributions as a surgical educator. He has trained over 45 cardiac surgical residents and transplant fellows, many of whom have risen to positions of pre-eminence and clinical leadership in Canada and internationally. He was the Program Director of the Cardiac Surgery Residency Training Program from 1991 to 2002 and continues as an inspiring role model and mentor for a new generation of cardiac surgical trainees. In October 2008 he was honoured as the presenter of the Bigelow lecture at the Canadian Cardiovascular Congress.



Dr. Peter Cadieux Selected as the Miriam Burnett Research Chair in Urological Sciences

Dr. Peter Cadieux, a scientist at Lawson has been selected the inaugural Miriam Burnett Research Chair in Urological Sciences, the first of its kind in Canada.

Cadieux's research background includes work on prostate cancer, probiotics, device-related urinary tract infections, bacterial biofilms and kidney stone disease. As Chair, he plans to focus his research on two major areas: bacterial biofilms in urology and the role of microbes in bladder cancer development, prevention and treatment.

"Both areas will have a solid probiotic component to them as well", adds Cadieux. "Numerous studies have already demonstrated the ability of probiotic organisms to inhibit pathogenic biofilms and prevent bladder tumour recurrence, and we plan to identify specific mechanisms involved in these health benefits."

In addition to being named The Miriam Burnett Research Chair in Urological Sciences, Cadieux has already received a great deal of recognition for his past academic achievements. He was awarded a Post Doctoral Fellowship from the American Urological Association Founda-

tion in 2006 to work on developing a probiotic for the treatment and prevention of kidney stone disease. He was the first Canadian to ever receive this Fellowship and was awarded a Graduate Scholar Award at its conclusion. During his PhD studies, he was awarded a Canadian Institutes of Health Research (CIHR) Canada Graduate Scholarship as well as the John Charles Polanyi Prize in Physiology and Medicine, presented to him by the King and Queen of Sweden.



Dr. Gregor Reid appointed research chair in Human Microbiology and Probiotics at Lawson

Probiotics research pioneer Gregor Reid, who is cross-appointed to the Department of Surgery, will hold the first research chair in Human Microbiology and Probiotics at Lawson Health Research Institute thanks to a \$7-million donation from international yogurt maker Danone Group. The support – the largest private research investment for St. Joseph's Health Care Foundation – establishes a new research chair in Human Microbiology and Probiotics at Lawson.

Reid has been studying probiotics for more than 25 years and has become a leading advocate for the role of so-called good bacteria in human health. As the inaugural chair, Dr. Reid will lead a team of scientists to develop and test various probiotic and prebiotic-based formulations in vitro and in human studies for the purpose of enhancing the health of people around the world; and collaborate with local, north American and international researchers and industry personal to assist in the translation of research findings into product development that supports human health.

In addition to being appointed to the new chair, Reid was also recently elected to the *Fellowship in the Canadian Academy of Health Sciences*.



Surgery wins three Dean's Awards of Excellence

Faculty members from the Department of Surgery received three Dean's Awards of Excellence at the awards ceremony held at the Great Hall on May 20th. The Dean's Award of Excellence Team Award went to the Joint Replacement Institute (Adult Reconstruction Unit); the Schulich Undergraduate Award of Excellence in Education – Educator went to Dr. Kirk Lawlor, Director of the Surgery Clerkship Program; and the Schulich Graduate/Postgraduate Award of Excellence in Education – Educator was awarded to Dr. Ken Faber, Program Director for the Division of Orthopaedic Surgery.

The 2009 Dean's Award of Excellence Team Award was given to recognize the achievements of the Joint Replacement Institute (Adult Reconstruction Unit). This multi-disciplinary group is comprised of Surgeons, PhDs, Nurses, and Research Assistants working to treat patients with degenerative joint disease, arthritis of the hip or knee, or those requiring joint replacement.

The Program has an outstanding reputation from an education perspective and over half of the group's consultants have been Royal College Examiners. Numerous residents have rotated through the adult reconstructive program since its inception. In addition they have trained over 70 fellows from around the world, typically training between 4 and 5 fellows per year. The group has also hosted countless surgical training courses for surgeons from around the world.

In addition to this, the program has an excellent track record in research, and they are leaders in the development of prospective randomized clinical trials relating to hip and knee surgery.

Half the consultants in the group are members of the Hip & Knee Society, a premier research group dedicated to their areas of expertise. Surgeons and researchers have also maintained an extensive database, tracking years of progress over the past 15 years, giving them one of the best pools of data in the world. They are also one of only a handful of labs with advanced orthopaedic imaging capabilities.

The Dean's Award of Excellence Team Award is based on excellence in academic endeavour, with particular emphasis on exceptional performance in research, education, administration, innovation, and/or public service. The winning team was selected from nominations put forward by department chairs and peer groups and is recognition of the tremendous amount of time and energy devoted to making Western and Schulich a stimulating and rewarding place to work.



The Joint Replacement Team poses with Dean Carol Herbert

The 2009 Schulich Undergraduate Award of Excellence in Education – Educator went to Dr. Kirk Lawlor, Director of the Surgery Clerkship Program. Dr. Lawlor has been involved with undergraduate education for some time. In 2005 he took up the post of Director of the Surgery Clerkship and has made a number of innovative changes while carrying on a busy vascular surgery practice.

Dr. Lawlor designed and introduced a simulation based Introduction to Surgery course, now held at CSTAR each year for all clinical clerks. The course introduces every clinical clerk at Western to such skills as Foley catheter placement, basic suturing skills, and endotracheal intubation. It has proven to be extremely popular with the students. The Surgical Clerkship at Western is widely considered to be the best in Canada; this status in many ways due to the efforts of Dr. Lawlor.



Dr. Lawlor poses with Dean Carol Herbert

Dr. Lawlor has also been acknowledged for his superior teaching abilities with many other awards and recognitions. He received the Schulich Surgery Clerkship Faculty Teaching Award in 2003-04, 2004-05, 2005-06, 2006-07, and 2007-08. He is also a member of the Canadian Undergraduate Surgical Education Committee and the Canadian Society for Vascular Surgery Education Committee.

The Dean's Award of Excellence for Undergraduate Education is based on demonstrated excellence as a teacher; commitment to education; involvement in curriculum design and changes; innovative approaches to teaching; and mentoring.

The 2009 Schulich Graduate/Postgraduate Award of Excellence in Education – Educator was awarded to Dr. Ken Faber, Program Director, Division of Orthopaedic Surgery.

Dr. Faber exemplifies all the important attributes of an outstanding surgical educator. His contributions to surgical education have been considerable as both a teacher and as an administrator. He began his administrative service in surgical education as the Surgery Clerkship Coordinator at St. Joseph's Health Care, London and did an outstanding job. He continues to participate in the Department of Surgery Undergraduate Education Committee as the representative for Orthopaedic Surgery and is heavily engaged in seminar teaching involving both residents and medical students. For several years, Dr. Faber was identified as one of the best teachers in the Department of Surgery during the Surgery Clerkship based on formal evaluations. Many students identified his patience, demeanour and genuine interest in medical education as being exemplary.

Recently, Dr. Faber made the transition to the realm of postgraduate education and is currently the Program Director in the Division of Orthopaedic Surgery. He has made a very substantial commitment to mentoring undergraduate students, residents and fellows. His organizational skills, role modeling and dedication to postgraduate education are now greatly benefiting the Division of Orthopaedic Surgery and he has done an outstanding job in this capacity.

The Dean's Award of Excellence for Postgraduate Education is based on demonstrated excellence as a teacher; commitment to education; involvement in curriculum design and changes; innovative approaches to teaching; and leadership.



Dr. Ken Faber poses with Dean Carol Herbert

Heartfelt thanks to Richard Ivey

Mr. Richard Ivey has given \$100,000 to enhance the Richard Ivey Chair of Surgery currently held by Dr. John Denstedt. Mr. Ivey's additional gift in support of Dr. Denstedt's work comes at a critical time as it helps rebuild the capital of the endowment fund for the Richard Ivey Chair of Surgery to ensure ongoing support while the market recovers.

Our sincere thanks go out to Mr. Ivey and his family for their support towards not only the Department of Surgery, but the various other areas of the university and hospital that their generosity has touched.

Dr. Cecil Rorabeck Receives Honorary Degree

Dr. Cecil Rorabeck, one of the world's leading experts on hip and knee replacement surgery, received an honorary degree at Western's 294th Convocation on October 23rd. Dr. Rorabeck is a professor and former chair of orthopaedic surgery and has served as president of the Canadian Orthopaedic Research Society, the Canadian Orthopaedic Foundation and the Canadian Orthopaedic Association. He currently serves as Council Chair for the Robarts Research Institute.

Congratulations to the following faculty members who were promoted this past year

Dr. Darren Drosdoweck was promoted to Associate Professor & granting of a Continuing Appointment, Provost Stream

Dr. Leslie Scott was promoted to Associate Professor & granting of a Continuing Appointment, Provost Stream

Dr. Doug Quan was promoted to Associate Professor & granting of a Continuing Appointment, Provost Stream

Dr. Chris Scilley was promoted to Associate Professor & granting of a Continuing Appointment, Provost Stream

Dr. Patrick Colquhoun was promoted to Associate Professor & granting of a Continuing Appointment, Provost Stream

Dr. Damir Matic was promoted to Associate Professor & granting of a Continuing Appointment, Senate Stream

Surgery Grand Rounds features cardiac surgeon from world-renowned Cleveland Clinic

Dr. Bruce Lytle brought over 30 years of experience as a cardiac surgeon to the Department of Surgery Grand Rounds on September 9th for a keynote address about the future of cardiac surgery. Dr. Lytle, Chairman of the Heart and Vascular Institute at the world-renowned Cleveland Clinic, said to understand where the field is headed surgeons must first delve into the past.

In the late fifties and early sixties, ground-breaking procedures and technologies such as cardiopulmonary bypass, coronary angiography, valve prosthetics, and coronary bypass surgery were developed. These developments came from academic medical centres which were focused on research and development. Everything changed in 1967 when the first heart transplant was transformed. Dr Lytle described it as a “bombshell that took the world by storm.”

Although it made headlines around the world, the first heart transplant ended up having no impact on public health. The advent of coronary bypass surgery in 1967 was the event that actually ended up having a profound impact on the health of the public as Dr. Lytle described it as “the most important development in medicine.”

As coronary bypass surgery took off, it instigated a series of randomized clinical trials, which had never been done before. The trials were undertaken to evaluate the effectiveness of bypass surgery and to determine whether the procedure would improve and prolong patients’ lives. When the results showed it did, it engendered a new way of looking at diseases and had enormous implications.

Dr. Lytle highlighted the fact that along with the development of coronary bypass surgery, the Medicare Act in the U.S. in 1965 helped further revolutionize the face of medical care and the development of hospitals in America. Coronary bypass surgery was in demand and hospitals were being paid to do it. It was at this time that Cardiac Surgery and Cardiology were solidified as actual specialties in medicine. The advent of this transformation also led to the growth of the medical device industry.

Since then, the “industrial era of cardiac surgery” has continued to develop and has become more specialized over time.

Based on the arrival of coronary bypass surgery and the dawn of Medicare in the U.S., this revolution has had an enormous economic impact, fueling the growth of hospitals and departments of surgery throughout the world. It also created the divergence of cardiac, thoracic and vascular surgery. According to Dr. Lytle, although it revolutionized healthcare, it eventually also led to a decrease in research and development by surgeons at some centres.

To keep up with the rapid speed of change in healthcare today and in the future, Dr. Lytle believes going forward, surgeons need to do more creative thinking. And even more importantly, surgeons and other physicians need to collaborate even more than they do now, particularly with colleagues in medical imaging.

“Imaging is and will be critical for advancements in *all* less invasive surgery,” says Dr. Lytle.

Dr. Lytle believes open cardiac surgery will never be a thing of the past, but believes the number of surgeons performing it will decrease. He feels that as time goes by, general cardiac surgery will become much less common, and cardiac surgeons will become more specialized.

“It’s an exciting time to be a cardiac surgeon. Our future will depend on how we develop ourselves through research, and how we learn to use multiple technologies as they become more complex.”

W. Bruce Lytle, M.D is a cardiothoracic surgeon who has earned international recognition for his innovations in cardiac reoperations, aortic surgery, coronary artery bypass grafting and valve surgery. He has been instrumental in developing and refining surgical techniques in all these areas. He oversees the study and treatment of all aspects of cardiovascular disease carried out by the physicians in the Departments of Cardiovascular Medicine, Thoracic and Cardiovascular Surgery, and Vascular Surgery. He is also an active surgeon and is board-certified by the American Board of Surgery and the American Board of Thoracic Surgery.

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