Our Mission

We are a Department of Medicine, characterized by a collegial, interprofessional, and interinstitutional cooperation, working to achieve our goals of excellence in health education, research and clinical care which embraces the continuum from the basic science laboratory to the individual patient to the health care system.

Our Goals

To facilitate the provision of the highest possible quality of care of the medical diseases of adults, giving appropriate consideration to costs and utilities.

To take responsibility for the quality of the education programs offered by McMaster University for physicians in training and practice in the disciplines of general internal medicine and the medical subspecialties and to provide many of the planners and teachers for this broad undertaking. To be involved as appropriate in the education programs offered by McMaster University for non-physician scientists working in health-related fields and non-physician health professionals.

To develop and critically evaluate new knowledge across a wide range of disciplines from basic science to the clinical disciplines of general internal medicine and its subspecialties, to the health care system itself. The Department of Medicine will set priorities for its research endeavours, based upon excellence, societal relevance, the availability of collaborative links, the opportunity for national and international significance, and additional criteria as judged appropriate.
I am delighted to offer my congratulations to the faculty and staff of the Department of Medicine for their exceptional achievements in research, education and clinical care during 2015-2016. I deeply appreciate the unwavering commitment that everyone in the Department continues to demonstrate year after year. Your hard work and dedication is a key contributor to McMaster’s success on the world stage.

The Department’s steadfast and innovative approach to improving health has a global impact; our groundbreaking discoveries regularly make headlines at home and abroad, our experts are frequently asked by the media to comment on the world’s most pressing health issues, and members of our faculty regularly provide guidance and advice to leading health organizations. In addition, the Department’s impressive work is routinely published and cited in medicine’s most prestigious journals. Remarkably, five faculty members were named as scientists whose work is among the most referenced by other researchers worldwide, in Thomson Reuter’s annual publication The World’s Most Influential Scientific Minds.

This prominence serves to further solidify and enhance the University’s longstanding reputation of excellence. As our largest single department, the Department of Medicine is a key contributor to McMaster’s global rankings. In several international rankings, McMaster places among the top 50 universities globally for medicine and health. In addition, researchers in the Faculty of Health Sciences, and its academic hospital partners, oversee $267 million in research funding a year, placing McMaster among the top four universities in Canada for biomedical and health research. McMaster also retained its Maclean’s University Ranking as Canada’s sixth best medical/doctoral university among 15 Canadian schools, for the eighth year in a row. While such rankings are simply a snapshot in time, it is tremendously gratifying that McMaster continues to stand among the best universities in the world.

As you read through the pages of this report, you will see why the Department is able to attract millions of dollars in research grants and support from federal and provincial governments, industry and charitable organizations, as well as major funding from private donors. You will no doubt be impressed with the significant role the Department plays in ensuring the continued success of McMaster as a world-class institution.

Once again, congratulations to all members of the Department on your exceptional accomplishments over the past academic year. I wish you much success in the future.

Patrick Deane, BA (Hons), MA, PhD
President and Vice-Chancellor
McMaster University
I am very pleased to congratulate all of the faculty and staff of McMaster’s Department of Medicine for your outstanding achievements in the 2015-2016 academic year.

As we know, the Department has grown to more than 600 faculty members – including 250 full-time members, 38 professors emeriti, 31 joint and associate members, 309 part-time faculty and 10 clinical scholars – who are working alongside more than 400 support and research staff across 17 divisions. The Department’s innovative approach to research, teaching and clinical care is second to none and has produced phenomenal success from any perspective.

In terms of research, faculty members continue to make headlines locally, nationally and around the world with their important work that is having a direct impact on patient health. To note just a few key findings this year:

- Two studies led by Drs. Elena Verdu and Paul Moayyedi showed that transplantation of fecal matter may be a useful tool in the fight against ulcerative colitis, and Dr. Verdu found that bacteria in the gut may contribute to the body’s response to gluten, an important finding that could lead to new treatments for celiac disease;

- Research led by Dr. Sonia Anand suggested the risk of developing Type 2 diabetes for South Asians – a group long known to suffer from substantially higher rates of both diabetes and heart disease – begins immediately at birth;

- Research led by Dr. Salim Yusuf found many people in the world who need essential heart medicine do not get it, even in wealthy countries. He suggested a radical shift is required in how such medicines are provided and how preventive care is organized in health care systems.

Over the last year, members of the Department have also been recognized with a number of major awards. This included Dr. Yusuf being named a Distinguished University Professor, McMaster’s highest honour for excellence in teaching, learning and research. As well, Dr. Anand received the 2016 Canadian Women’s Heart Health Advocacy Award for her outstanding commitment to raising awareness of, and reducing, women’s risk of heart disease.

Furthering the Department’s research excellence, faculty members hold eight Canada Research Chairs and 34 endowed chairs and professorships. These positions are prestigious, but they also allow our scientists to investigate critically important areas of medicine and to recruit and develop the next generation of pioneering researchers. They also serve to attract and retain some of the brightest minds on the planet, ensuring our students a world-class education.

In my previous role as chair of the Department since 2002, I had a front row seat to countless triumphs and some of the most significant medical discoveries in the world. I miss working so closely with the many talented faculty and staff of the Department of Medicine, but I welcome the opportunity to open the next chapters of the Faculty of Health Sciences and Michael G. DeGroote School of Medicine as its dean and vice-president.

Congratulations again on another wonderful year for the Department of Medicine.

On behalf of the Faculty of Health Sciences, I want to thank you for your dedication to excellence in all areas of medicine, and your tireless efforts to improve the health of patients worldwide.

I wish you all the best and continued success in the coming years.

Dr. Paul O’Byrne
Dean and Vice-President
Faculty of Health Sciences
Dean of the Michael G. DeGroote School of Medicine

“I had a front row seat to countless triumphs and some of the most significant medical discoveries in the world.”
— Dr. Paul O’Byrne
If there is one theme that encapsulates the academic year of 2015-16 for the Department of Medicine, it is momentum. The single largest department at McMaster, and the largest in the Faculty of Health Sciences, continues to navigate a tremendous path of success thanks to years of devoted predecessors, including the most recent former Chair and newly appointed Dean Paul O’Byrne. Stepping into the brief role of Acting Chair has been my privilege.

People are the cornerstone of the Department’s tremendous path of success, and the passion for lifelong learning brought by existing and new team members is at the heart of our continued success. We appointed a staggering 22 new geographic full-time faculty members to the Department, which now has a total of 638 members, of which 250 are full-time faculty, 309 are part-time faculty, 38 professor emeriti, 10 clinical scholars, and 31 joint and associate members.

Excellence in care and passing along that passion through lifelong learning and scholarly achievement is the single biggest driver of all our people. Despite facing the perfect storm of challenges in coming years, the Department, working with the framework of two hospital systems, Hamilton Health Sciences (HHS) and St. Joseph’s Healthcare (SJH), is anticipating difficulties and proactively developing innovative solutions. The efforts of the Chiefs of Medicine in these two hospital systems, Dr. Barry Lamb at HHS and Dr. Alistair Ingram at SJH, have resulted in advanced infrastructure, quality of care improvements, and three of Canada’s best clinical teaching units at Hamilton General Hospital, Juravinski Hospital and St. Joseph’s Hospital.

A perfect example of this is the first of its kind, The Boris Clinic at McMaster University Medical Centre, now fully open more than a year ago. It was a great personal accomplishment to guide the launch of Canada’s first ambulatory clinical teaching unit. At any one time there are 16 specialists plus 30 to 30 residents treating the 40,000 patients who visit the ambulatory environment annually. Patients are having a variety of illnesses treated efficiently and effectively, and learners are integrated with subspecialties and exposed to a new approach that will advance their lifelong care-giving.

In fact, the Department provides almost one-third of all educational activities in the Faculty of Health Sciences, which offers stimulating and coveted educational roles overseen by Associate Chair, Education, Dr. Ameen Patel. It’s yet another reason why we continue to attract so many high-quality, young clinician educators to the Faculty of Health Sciences. McMaster educators also recognize the importance of quality regional education, and the Department is proud to support strong learning environments on the distributive campuses in Kitchener, Waterloo and Niagara.

Every year the Royal College of Physicians and Surgeons of Canada (RCPSC) confirms with excellence all of our 16 training programs in the Internal Medicine Residency Training Program and its specialties through the accreditation process. The program has attracted almost 400 applicants in the past year for 21 positions, which included some of the best applicants in the country. Furthermore, the Department is already proactively addressing the RCPSC’s evaluation requirements for Competence by Design and working on ways to proactively accelerate residents individualized learning pace.

Another successful initiative is the Global Health Program, which allows residents to travel to Uganda each year to spend time working in Makerere University in Kampala. For example, our department’s talented educator, Dr. Christian Kraeker, has been called on to help develop the University of Namibia’s first ever postgraduate internal medicine curriculum. Also, the Department’s Dr. Zahira Kahlid and Dr. Azim Gangji have both contributed to the development of an internal medicine program in Guyana, South America. Such an advanced outreach program highlights the Department’s belief that knowledge exchange hinges on bridge building, no matter how far or complex.

At the same time, with an ongoing dedication to scholarly-focused teaching, the Department has published the highest research output among residents in Canada, ensuring cutting edge clinical medicine at home. Drs. Lamb and Ingram together with Dr. Shariq Haider, the postgraduate Internal Medicine Program Director in 2015-16, ensure that excellence in care is intertwined with planting seeds of evidence-based medicine in the doctors of the future. The Department also offers dedicated grants to support resident research — which only serves to underline our commitment to passionate research-mentoring relationships.

Perhaps our most notable forward-moving progress is on the research front. A five-year report reveals that department faculty have been published in an outstanding number of high-impact journals, guided by Dr. Jeff Weitz, the Associate Chair, Research for the Department. Faculty in the Department currently hold 34 endowed chairs or professorships, and 8 Canada Research Chairs. More than 700 high-profile peer-reviewed papers are published annually. Just one remarkable example this past year, Professor Dr. Salim Yusuf — Dr. Akbar Panju

“Our direction is clear and our consistent forward momentum is a testament to both the talent and vibrant energy of a group of people with a single cause: the betterment of patient care and improvement of the health of patients around the world.” — Dr. Akbar Panju
had three studies in one issue of the prestigious *New England Journal of Medicine*, featuring breakthrough findings for the use of heart disease medications to help prevent heart disease on a worldwide scale.

The Department’s research in many important realms is continuously shifting medicine from a laboratory setting to bedside care, but made a few huge strides this past year. In the areas of blood clotting, obesity and irritable bowel syndrome, department faculty published major findings in leading journals that bring us closer to major advances in care for patients with those illnesses.

We foster a culture of open-mindedness and confidence to ask hard questions, and that has resulted in a relentless pursuit of discovering truths in science and health-care. It’s the reason why five Department faculty members — Stuart Connolly, John Eikelboom, Koon Teo, Salim Yusuf and Roman Jaeschke were named as scientists whose work is among the most referenced by other researchers worldwide, in Thomson Reuters’ annual publication *The World’s Most Influential Scientific Minds*.

Given the Department’s collective hard work, it’s a pleasure to acknowledge the large number of faculty who have received awards over the past year, which have been identified in the Faculty Awards and Highlights. Special mentions must go to Dr. Hertzel Gerstein, who was the recipient of the 2016 Jack Hirsh Award, the Department’s highest accolade for academic achievement; Dr. Christian Kraeker, who was recognized as one of the most influential minds in medicine; and Dr. Paul O’Byrne, who was inducted in the Canadian Academy of Health Sciences.

The Department’s quest for medical solutions is recognized and supported by integral research funding. Many grants were awarded to faculty and the total amount of funding represents more than 20 percent of the funding obtained by the Faculty of Health Sciences, in addition to our many industry-sponsored studies, whose budgets are held in our partner hospitals. The total research support received by the Department in 2015-16 was almost $27 Million. It is important to note that this support does not include research revenue in our partner hospitals.

While I only held the Department reins for a short period of time, it was my honour to work closely with so many highly talented minds in science and medicine. Our direction is clear and our consistent forward momentum is a testament to the both the talent and vibrant energy of a group of people with a single cause: the betterment of patient care and improvement of the health of patients around the world.

I look forward to contributing to and celebrating our future successes.

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**INTERNATIONAL INFLUENCE**

**DEPARTMENT OF MEDICINE: INVITED PRESENTATIONS 2015-2016**

Locations where Department of Medicine faculty presented during 2015-16, showing the Department’s international influence.
Dr. Waleed Alhazzani
Received a grant from the Physicians' Services Incorporated Foundation

Dr. Sonia Anand
Received a grant from the Canadian Institutes of Health Research (CIHR)
2016 Canadian Women's Heart Health Advocacy Award

Dr. Donnie Arnold
Appointed as Director of the McMaster Centre for Transfusion Research
Appointed to the John G. Kelton Chair in Translational Research
Received a grant from Bristol-Myers Squibb

Dr. John Bienvenu
Received a grant from the U.S. Office of Naval Research

Dr. Bibi Biman
Faculty of Internal Medicine Academic Teaching Award, 2016

Dr. Peter Belli
The 2015 Hypertension Canada Certificate of Excellence Award
The Laureate Award of the American College of Physicians

Dr. Raj Carmona
Department of Medicine Teaching Award for Excellence in the Undergraduate Medical Program 2015, McMaster University

Dr. Teresa Chan
W. Watson Buchanan Clinician Educator Internal Career Award, Department of Medicine, McMaster University
Victoria College Emerging Leader Award
2015 Academic Medicine Excellence in Reviewing Award
Class of 2016 Teaching Award in the Emergency Medicine Clerkship, Michael G. DeGroote School of Medicine, McMaster University

Dr. David Clark
Journal of Reproductive Immunology-sponsored, Senior Investigator Award Lecture, Oxford University (UK)

Dr. Stephen Collins
Appointed as Director of the Farncombe Family Digestive Health Research Institute

Dr. Stuart Connolly
Margoole National Heart Disorders Prize, University of British Columbia (UBC)
Distinguished Scientist Award from the Heart Rhythm Society

Dr. Mark Cross
Received a grant from the Heart and Stroke Foundation of Canada

Dr. Judah Dendup
Elected to Fellowship in the Canadian Academy of Health Sciences
Appointed to the William J. Walsh Chair in Medicine

Dr. P.J. Devereaux
Received a grant from the Canadian Institutes of Health Research (CIHR)

Dr. James Douketis
Received a grant from the Heart and Stroke Foundation of Canada

Dr. John Eikelboom
Canadian Pacific (CP) Has Heart Cardiovascular Award

Dr. Alison Fox-Robichaud
2016 LEADing Practice Award, The Hamilton Early Warning Score: Improved safety through attention to abnormal vital signs, Accreditation Canada's 5th Annual Quality Conference
2016 LEADing Proactive Initiative Award 2016, Canada Health Infoway and Accreditation Canada, 2016 Peer Leader Symposium: Building Peer Leader Bridges to Advance Clinical Practice

Dr. Azim Gangji
2016 PARO Resident Advocate Award
Leadership Award, Kidney Foundation of Canada

Dr. Hertz Gerstein
2016 Jack Hirsh Award for Outstanding Academic Achievement, Department of Medicine, McMaster University

Dr. Jeff Ginsberg
Reappointed to the David Braley and Nancy Gordon Chair in Thromboembolic Disease

Dr. Juan Guzman
Reappointed to the David Braley and Nancy Gordon Chair in Thromboembolic Disease

Dr. Brian Haynes
Received a grant from the National Board of Medical Examiners

Dr. Cathy Hayward
2016 BSHF MacFarlane Biggs Plenary Lecture, 36th World Congress of the International Society of Hematology

Dr. Andrew Healey
Inaugural Terry Sosnowski CAEP Teacher of the Year award
2016 PARO Excellence in Clinical Teaching Award

Ms. Nancy Heddle
Received a grant from Canadian Blood Services

Dr. Alfonso Iorio
Received a grant from the Hamilton Academic Health Sciences Organization

Dr. Luke Jansson
Received a grant from the Canadian Institutes of Health Research (CIHR)

Dr. Mark Kamath
Nominated to both the Editorial Board, Journal of Long-Term Effects of Medical Implants; and as Associate Editor, Medical & Biological Engineering & Computing

Dr. Martin Kolb
Received grants from the Canadian Institutes of Health Research (CIHR) and RespVert Ltd.

Dr. Christian Kraeker
2016 CSM Hui Lee Health Promotion Scholarship
2016 Internal Medicine Juravinski Hospital Faculty Teaching Award, McMaster University
2016 Undergraduate Teaching Award in Internal Medicine, McMaster University
2016 McMaster University Certificate of Merit for Teaching Excellence in Core Internal Medicine Clerkship, McMaster University

Dr. John Krepsinsky
Received grants from the Canadian Institutes of Health Research (CIHR) and the Kidney Foundation of Canada

Dr. Colin Kretz
Kenneth M. Brinkhous Young Investigator Prize in Thrombosis, American Heart Association and the ATVB council

Dr. Rebecca Kruissen
Clinical Preceptor Award

Dr. Patricia Liu
Received a grant from the Canadian Institutes of Health Research (CIHR)

Dr. Lori-Ann Linkins
Department of Medicine Teaching Award for Undergraduate Studies

Dr. Mark Loeb
Received a grant from the Canadian Institutes of Health Research (CIHR)

Dr. Peter Marques
Received a grant from the Canadian Institutes of Health Research (CIHR)

Dr. Sharmir Mehta
Received a grant from the Canadian Institutes of Health Research (CIHR)

Dr. Dominik Mertz
Received a grant from the Physicians' Services Incorporated Foundation
July 2015

August 2015

September 2015

October 2015

November 2015

December 2015

January 2016

February 2016

March 2016

April 2016

May 2016

June 2016
At least three major diseases affecting millions of Canadians will be significantly slowed down thanks to a vanguard year of research by McMaster Department of Medicine faculty. Several major studies showcase positive breakthroughs in future treatments for blood clotting, obesity and irritable bowel syndrome, and there are dozens of other important studies underway.

“McMaster fosters a culture that challenges conventional thinking and supports evidence-based inquiry. The end result is profound bench-to-bedside research outcomes,” says Akbar Panju, Acting Chair of the Department of Medicine. Diverse research domains, multi-disciplinary co-operation, mentorship and state-of-the-art research infrastructure enable faculty to continue to produce staggering track rates of clinical research, he adds. Here are just a few highlights.

Reframing blood clotting as a new disease
While blood thinners are important for prevention of cardiovascular events, they cause bleeding, which in turn leads to subsequent heart problems. “There’s a gap in knowledge of the causal link between bleeding and heart problems globally, and McMaster aims to fill it with the massive INTERBLEED study,” explains Professor Dr. John Eikelboom.

“What we’re doing is getting bleeding on the map as a new disease we need to tackle on its own merits and not just as a complication of therapy. And we’re also trying to understand better why people have such bad outcomes after bleeding.” The hope is that their research findings, available in 2018, will give medicine a better way to treat it.

At the same time, McMaster researchers are examining the effectiveness of existing and new medications to treat bleeding and thrombosis. Eikelboom’s leading a massive trial of 27,395 patients in 32 countries to test rivaroxaban’s impact on bleeding events. Meanwhile Dr. Jeff Weitz, Director of the Thrombosis & Atherosclerosis Research Institute, completed a large multi-centre randomized clinical trial in patients with venous thromboembolism.

“Many patients with venous thrombosis require extended blood thinner therapies and there has been controversy as to how to provide these the most safely,” he explains. Some patients may opt for Aspirin over a medication for a variety of reasons, but the first of its kind research shows anti-coagulant medication—even at half dose—reduces the risk of a health event by 70 percent compared to Aspirin’s 30 percent. “This should finally put to bed the use of Aspirin and ensure patients are getting much more effective, safer treatment,” says Weitz.

A new way to fight obesity
Turns out we can use fat to fight fat. Canada’s Research Chair in metabolism and obesity and department Professor Greg Steinberg and team are leading the charge worldwide in learning more about energy-burning brown adipose fat—a kind of tissue that’s thermogenic or heat-generating (versus white fat which is energy-storing fat).

While adults have very little brown fat, there’s enough over time to greatly impact body weight. The key is to find ways to trigger its activity, especially for people struggling to lose weight, says Steinberg. “If we can figure out how to turn it on, we may be able to treat metabolic diseases such as obesity and diabetes better.” (Existing obesity medications often come with mood-related side effects.) Most recently, Dr. Steinberg’s research group discovered the cause of impaired brown tissue function in people with obesity and type 2 diabetes—reductions in adipose tissue AMP-activated protein (AMPK). This opens up the door to research a new avenue—restoring this metabolic switch—for therapies, he adds.

Getting to the bottom of irritable bowel syndrome
For years Dr. Stephen Collins and his team have been uncovering exciting discoveries related to bacteria in our gut, including links with gut bacteria and depression. Most recently his work has taken on a growing problematic condition called irritable bowel syndrome. “On a global basis, it is by far the most common intestinal disorder people experience. Also, 18 percent of them may have behavioural problems such as depression or anxiety. It’s a condition that’s poorly understood and poor treated.”

Their recently completed study successfully reproduced behavioural pathways for anxiety and intestinal change in mice. “This means we’ve shown that the changes in micro bacterial function are relevant and a possible target for treatment. And we’ve shown an insight into the mechanism: the immunity system is activated to produce these changes.”

Heart attack and stroke prevention change maker
Increasingly anti-cholesterol (statins) and blood pressure-lowering (antihypertensives) medications are being prescribed as a preventive measure to stave heart disease. Now a massive McMaster study of 12,000 patients from 21 countries, called Heart Outcomes Prevention Evaluation (HOPE)-3 trial, provides conclusive evidence they work.

The Department’s Dr. Salim Yusuf and team found statin drugs reduce CVD by 20 percent, and when combined with antihypertensives reduce CVD events by 30 percent, in people with intermediate risk but without clinical heart disease (CVD). “These are incredibly important findings with potential for significant global impact,” said Yusuf. “If just 10 percent of the world’s population at intermediate risk of CVD are impacted, we’re talking about 20 to 30 million people who could be helped by these drugs.” Not only do HOPE-3’s findings finally bring clarity in the management of blood pressure and cholesterol here at home, they could have a major influence on in developing nations, where statins and antihypertensives become less expensive, Yusuf added.

These early stage developments hold huge promise for bench-to-bedside cures for many Canadians suffering from disease. And they also represent the potential there is to change lives worldwide thanks to department faculty who are encouraged to think outside the box, collaborate, rely on innovative laboratory equipment, and, ultimately, put patients first.”

... department faculty who are encouraged to think outside the box, collaborate, rely on innovative laboratory equipment, and, ultimately, put patients first.”

26,853,301 Total research funding dollars obtained this year
EXCELLENCE IN CARE

Thanks to a proactive, collaborative spirit, McMaster clinicians are poised to handle major health care issues at hand.

It’s the perfect storm facing McMaster clinicians over the next year: Medicine is coping with more sick people than ever, and far more challenging cases than in the past. Internal medicine residents, in particular, are reaching the point of overload, explains Dr. Barry Lumb, Physician-in-Chief at HHS. “There’s too many patients with complex health issues for our residents and our staff doctors. We’ve got a combined educational and clinical service problem that’s very real and it’s right in front of us.”

“The problem is also impacting other disciplines. In Hamilton, a tripartite working group representing the Faculty of Health Sciences, St. Joseph’s Hospital and Hamilton Health Sciences has been established and they’re tasked with developing a unified recommendation for how to keep patients moving.”

Meanwhile, there is another issue facing clinician educators: the new Surgeons Competence by Design Royal College of Physician and Surgeons Competence by Design system, which requires a fundamental shift in the way that residents are educated and evaluated.

“So we’re up against an inadequate number of residents to take care of patients and a complete change in model of the education we’ve got.” — Dr. Alistair Ingram

Good thing that McMaster can call on pioneers in innovative care models to tackle a solution. After all the clinician educators developed a first-of-its-kind — The Boris Clinic at McMaster University Centre — now fully open more than a year. Offering a truly nimble, effective ambulatory treatment environment that includes a diabetes clinic, a general internal medicine rapid assessment clinic (GIMRAC), a medical daycare and a subspecialties clinic. At any one time, there are 14 specialists plus 20 to 30 residents, to treat the 40,000 patients who visit annually.

“We want to provide specialized care in areas where we have an academic focus so that patients have access to cutting edge care in fields we excel.” — Dr. Alistair Ingram

The Boris Clinic’s innovative care and teaching model was recently reviewed in the Canadian Journal of Internal Medicine, says Dr. Akbar Panju, Associate Chair, Clinical; Medical Director of the Boris Clinic; and Acting Chair, Department of Medicine. Satisfaction rates are quite high. “Our patients find the clinic very efficient. They come for one problem and can get all complications investigated at the same time. And our learners are discovering how to manage patients in ambulatory care environment with the support of specialists. It’s a win-win new model providing efficient evidence-based care under one roof.”

Panju, who had taken on the role of Acting Chair in the Department of Medicine, is confident the Department’s staff can effectively manage all the future challenges it’s up against. After all, it has eight Canada Research Chairs, 34 Endowed Chairs and more than 100 faculty who have received awards, including four Order of Canada awards, over the past five years. “We’ve also been nominated and/or awarded the PARO Residency Program Excellence Award four times,” he adds.

At the West 5th Campus the Community-based Internal Medicine Rapid Access Clinic (C-IMRAC) continues to provide a welcome direct urgent access route from primary care to General Internal Medicine and an inter-professional team, says Dr. Alistair Ingram, Chief of Medicine, St. Joseph’s Healthcare. And to cope with a very large number of Alternate Level of Care (ALC) patients admitted to the hospital, often with long stays, St. Joseph’s Healthcare Hamilton employed two physician assistants, and developed an ALC team to reduce admissions from ER. “It’s has successfully helped hundreds of patients,” he adds.

Keeping in line with providing better access to care, St. Joseph’s also started a specialist neuromuscular clinic and a pulmonary hypertension clinic. “We want to provide specialized care in areas where we have an academic focus so that patients have access to cutting edge care in fields we excel,” says Dr. Ingram. In order to ensure a continuation of care post-hospital, they’ve assigned Nurse Practitioners to identify cardiology and respiratory patients to promptly follow up with outside the hospital says Dr. Ingram. “It represents our focus on post-hospital care to help reduce hospital readmissions.” It also represents McMaster’s dedicated focus to overcoming many hurdles to ensure the best care possible for Canadians.

“We want to provide specialized care in areas where we have an academic focus so that patients have access to cutting edge care in fields we excel.”

— Dr. Alistair Ingram

“So we’re up against an inadequate number of residents to take care of patients and a complete change in model of the education we’ve got.”

— Dr. Barry Lumb

“The sweet spot is figuring out how to educate residents and do better by patient care. It’s the holy grail.”

— Dr. Barry Lumb
At McMaster, learning doesn’t start or end after its three-year Core Residency Program in Medicine. A passion for learning is sparked, and the hope is that it will burn hotly among future graduates so long as they practice medicine. In that vein, residents are given all the skills and experience they need to apply the philosophy McMaster has become famous around the world for, evidence-based medicine in everything they do.

The idea of using the best available evidence in making decisions about managing patients revolutionizes the quality of care that’s provided, explains Dr. Shariq Haider, the outgoing Director of the Internal Medicine Residency Program. “To be a leader in cutting edge clinical medicine you need to engage in research. You need to learn the skills in engaging in, interpreting and applying research. Residents get the building blocks they need here.”

Indeed, that’s why McMaster’s program is so proudly scholarly-focused. “We have published, in this program, the highest research output among all internal medicine residents in Canada,” says Haider. To name a few recent resident grants: Eric Wong received the Specialized Geriatric Service Quality Improvement grant, and Dr. Adam Nazzetti and Dr. Derek Chu were granted the Regional Medical Associates grant. Last year, Dr. Hassan Mir was given the prestigious Royal College’s 2015 Kristin Sivertz Resident Leadership Award.

“We have published, in this program, the highest research output among all internal medicine residents in Canada.”
— Dr. Shariq Haider

Excellence in care and passing along that passion through lifelong learning and scholarly achievement is the single biggest driver of all our people.”
— Dr. Akbar Panju

The medical rotation on the clinical teaching unit at St. Catharines General, and recruited four people into leadership roles who strongly support the role of medical education. That means there will be more opportunities to make education a part of what we do every day.” Spoken like a true McMaster supporter of lifelong learning at heart.

Dr. Jill Rudkowski, Internal Medicine Clerkship Director, says she’s particularly excited about the growth in personnel, in particular the appointment of a new site director for the distributive campuses in Kitchener. “It represents the growth in these regional campuses and the fact that we’ll bring new energy to table. For example, on our Niagara campus, we consolidated general internal medicine CTU in Canada at The Boris Clinic. “The Boris allows us to teach residents how to manage practice in an ambulatory setting for complex medical patients with the goal of ensuring a continuity of care from specialist to family doctor,” says Dr. Mohamed Panju, Assistant Professor of Medicine. Now, the clinical educators at McMaster intend to ‘innovate’ on that environment to incorporate the new Royal College of Physicians and Surgeons of Canada’s evaluation requirements for Competence by Design. “We’re working on this in phases and McMaster has been one of the early adopters, using the CTU as a launching pad for Competence by Design,” says Dr. Haider.

No doubt they will be successful, especially given the Department’s near perfect accreditation from the Royal College. “The fact that the College has no issues whatsoever really speaks to the strength of the administration and the structure the program has,” adds Haider.

McMaster educators also recognize the importance of quality regional education, which is why it can boast of its strong learning environments on its distributive campuses in Kitchener, Waterloo and Niagara. “We’re the only program in Ontario that has three training spots for the Canadian Resident Matching Service in Kitchener. This is a higher level of commitment and we’re raising the stakes,” says Dr. Haider. The long-term goal is to help ensure physician manpower needs are filled in these areas.

The fact that we have dedicated grants to support residents speaks to the commitment we make in terms of resources.”
— Dr. Shariq Haider
Among Namibia’s many health challenges is a lack of internal medicine doctors. Because of human resource issues, medical school graduates often travel to Southern Africa or Europe for training. “The danger is that they have to go away to train and don’t return to practice where it’s so desperately needed,” says Assistant Professor Dr. Christian Kraeker.

That’s why he’s been called on to help develop the University of Namibia’s first ever post-graduate internal medicine curriculum. “Our goal is to help get in place a fully functional didactic, lecture- and bedside-based teaching model in place over the next few years.”

Residents won’t have to leave their country in order to learn. They’ll be well-equipped to apply their knowledge at home.

While McMaster Department of Medicine educators have been assisting in Namibia for the past 6 years, the partnership was formalized this past year when Dean, Dr. Paul O’Byrne; and Chair, Dr. Akbar Panju travelled to Namibia and met with government and university officials.

Professor Dr. Ally Prebtani, who founded the Global Health Program in Internal Medicine 13 years ago reflects that “The goal of our global outreach program has always been to empower local health care providers and build international knowledge sharing,” says Dr. Prebtani.

What once began as an exchange of learning in Uganda, when McMaster Medicine residents would travel to Uganda for one month at a time to gain experience in global health while also sharing their knowledge, is now a solid best practice model of international outreach. “It’s wonderful to see how after 13 years of bridge building, we’re in a position to assist other countries in need,” says Dr. Prebtani.

Since first offering assistance in Uganda, both in knowledge exchange and general internist training curriculum development, McMaster has expanded its efforts there to meet another acute Uganda need, in particular sub-specialty training. The Fellowship Exchange Program which has been offered for many years by the St. Joseph’s Healthcare International outreach Program, now working in partnership with the Department of Medicine, allows Uganda residents to travel to McMaster for subspecialty training in areas such as hematology, endocrinology, cardiology, respirology and geriatric medicine. “Last year we sponsored six Uganda trainees to come here for training in various subspecialties. We’re really seeing tremendous growth in the experience and depth of training we’re providing,” says Dr. Mark Crowther, Chair of Pathology and Molecular Medicine. “It’s really a large commitment by the Department of Medicine and represents our mission to provide care beyond our borders. It’s an investment with huge impact for a less advanced country.”

Dr. Tim O’Shea, Assistant Professor, Division of Infectious Diseases, says, “I think what I’m most excited about is seeing how all our outreach efforts are developing a common focus and coordination across borders, to really learn from each other and develop the capacity for medical education in settings where there is a lot less resources.” He adds that it’s enabling McMaster to develop true expertise in international outreach.

“Uganda really was a pilot in terms of lessons learned in how to establish a medical education program in a foreign country. That’s 13 years of experience we can share in countries like Namibia and Guyana. I believe we can become a true centre of excellence in global outreach.”

Other examples of outreach include Dr. Kraeker’s previous work overseeing the development of an internal medicine curriculum in Namibia, and Dr. Zahira Kahlid’s current work to establish a first year internal medicine program in Guyana, South America.

Back at home, the global health program’s flourishing with a popular postgraduate Global Health curriculum, an annual Global Health Retreat, a fundraiser led by Dr. Prebtani, and the creation of sustainable long-term longitudinal research programs. Furthermore, the same faculty who dedicate so much personal time (and sometimes personal resources) abroad, also do so locally.

“A lot of the experience and research attained in poor health settings can be applied here at home,” adds Dr. Prebtani, who volunteers at a local First Nation community. “I find myself building the same bridges here at home and applying my learnings, especially around cultural sensitivity.” That’s the true benefit of global bridge building completing a full circle.
The mandate of the Associate Chair, Research is to promote and facilitate research within the Department. To meet this mandate, the Associate Chair has focused on the following activities: (1) ensuring the success of junior faculty involved in research activities through advice and mentoring, (2) updating the scoring system that was implemented to quantify research output of faculty for purposes of remuneration and promotion and tenure, (3) ensuring that adequate departmental resources are earmarked for research, and (4) coordinating internal peer review of tri-council grant submissions.

The Associate Chair, Research meets with all new recruits and provides feedback to the Department Chair regarding their research potential. Those selected for faculty appointments in the research stream meet with the Associate Chair on a regular basis for mentorship and advice regarding grant applications, funding and career planning. The Associate Chair also provides advice to department members regarding new funding opportunities and research strategies.

The Associate Chair, Research serves as a member of the Departmental Executive, Research Executive, Promotion and Tenure, Executive Finance, and Alternate Funding Plan Committees. The role of the Associate Chair on these committees is to advise and advocate for research.

The Department of Medicine offers Internal Career Awards for new faculty members. These awards have tenure for up to three years and are granted on a competitive basis. Awards are available for both research and education and are aimed at fostering the next generation of researchers and educators. Funding from this source can be used to offset clinical expenses, thereby increasing protected time for research. The Associate Chair, Research is a member of the committee that reviews and prioritizes the application for Internal Career Awards.

The Department of Medicine continues to be a major contributor to the research productivity of McMaster University. The amount of research funding for 2015-16 was $27 million. The majority of this funding came from peer-reviewed sources with 65% from tri-council and 12% from National Centres of Excellence (see Figure 1). Overall, there was $20.5 million in operating awards and $1.7 million in career awards (see Figure 2). The total amount of research funding has decreased from the previous year.

“Awards are available for both research and education and are aimed at fostering the next generation of researchers and educators.”

— Dr. Jeffrey Weitz
mostly due to an increase in research funding held at our partner hospitals, the change in the way research funding is reported and the competitive nature of the grant review process. The research accomplishments of the department are particularly noteworthy given the increasing emphasis on clinical productivity and the competitive nature of the grant review process.

“Several major studies showcase positive breakthroughs in future treatments for blood clotting, obesity and irritable bowel syndrome, and there are dozens of other important studies underway.”

— Dr. Jeffrey Weitz
Dr. Jill Rudkowski (Clerkship Director, Internal Medicine), Dr. Azim Gangji (Clerkship Director, Medical Subspecialties), Dr. Marco Puglia (Director, Medical Foundations 2), Dr. Nishma Singhal (Director, Medical Foundations 4), Dr. Javier Ganame (Cardiology Planner, Medical Foundations 1), Dr. Helen Neighbour (Respirology Planner, Medical Foundations 1), Dr. Luciana Parlea (Endocrinology Planner, Medical Foundations 2), Dr. Mitchell Levine (Pharmacology Coordinator, Medical Foundations 3) and Dr. Raj Carmona (MSK Planner, Medical Foundations 5).

I would like to extend a huge thank you and appreciation to Dr. Shariq Haider for his tenure as the Core Internal Medicine Program Director. Dr. Haider guided the program through a Royal College accreditation and, during his term, led the introduction of many new education initiatives. Dr. Lori Whitehead is the new Internal Medicine Program Director and brings to the job extensive experience as a Clinician/Educator, past Program Director for Respirology and as the Chair for the Subspecialty Committee in Respirology at the Royal College of Physicians and Surgeons of Canada. Dr. Whitehead will lead the introduction of Competency by Design, the Royal College initiative that focusses on identifying and assessing abilities physicians need to master at each stage of their training. I would also like to extend, on behalf of the Department of Medicine, congratulations to Dr. Parveen Wasi who was appointed the Assistant Dean, Postgraduate Medical Education, effective July 01, 2016. Dr. Wasi served as the Program Director for Internal Medicine from 2000 to 2011, during which time the program expanded from 36 to more than 80 trainees.

The Department of Medicine continued its tradition of high quantity and quality education contributions in the 2015-2016 academic year with over 31,000 total weighted hours of education in the Undergraduate Medical Clerkship Programs. Department members contributed over 1,500 hours of education in the Physician Assistant Program. In Internal Medicine and its subspecialties, department members contributed over 29,000 total weighted hours. There was also significant contributions towards Faculty Development, Continuing Education, Bachelor of Health Sciences (Honours), Undergraduate and Graduate Biochemistry, Health Research Methodology, Masters of Health Science in Health Science Education and the Clinician Investigator Programs.

In addition to accruing impressive direct contact hours for education, department members continue to hold numerous education leadership positions in multiple programs. Leadership positions held by members of the Department of Medicine in the Undergraduate MD Program include: Dr. Sharon Marr (Chair, Program Evaluation),

31,000

Total number of weighted teaching hours that Department of Medicine faculty contributed to the Faculty of Health Sciences in 2015–16 in Undergraduate Medical Education Curriculum

― Dr. Ameen Patel

MB, FRCP(C), FACP, FRCP(E)
Professor, Department of Medicine
Associate Chair, Education

Dr. Ameen Patel (centre) with residents.
The 2015-2016 academic year was a successful one for promotion of department members. Effective July 01, 2015, five department members were promoted to full Professor, one was promoted to Clinical Professor, nine were promoted to Associate Professor with CAWAR and one part-time member was promoted to Associate Clinical Professor.

The recipients of the Department of Medicine Teaching Awards were: Dr. Alison Montgomery (Postgraduate Internal Medicine), Dr. Raj Carmona (Undergraduate MD Program), Dr. Lori-Ann Linkins (Undergraduate MD Program) and Dr. P.J. Devereaux (Graduate Studies).

The winners of the Department of Medicine Career Awards were: Dr. Juan Guzman (AFP Internal Career Research Award), Dr. Jacob Gelberg (AFP Clinical Educator Award), Dr. Jennifer Tsang (E. J. Moran AFP Internal Career Research Award), Dr. Teresa Chan (W. Watson Buchanan AFP Clinician Educator Award) and Dr. Michelle Zeller (Quality and Patient Safety Award).

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The academic year 2015-2016 has been a busy and rewarding year in our training program. It was led off by an extremely competitive successful CARMS match to both our Hamilton and Waterloo regional programs, a true testament to a program that is ranked as one of the top training programs in Canada.

All postgraduate programs at McMaster University went through the Royal College accreditation in 2015, which is an important assessment of a program to deliver the objectives of training. I am proud to follow up on our final report that our Internal Medicine Program received full accreditation, regular survey to follow in six years. This was a real achievement given the complexity of the program with close to 100 residents, and one of the largest training programs at McMaster. We were recognized for our proactive interventions to deal with service education ratio in an environment of increasing patient volumes in our CTU across the city, a commitment to academic excellence in our distributive residency training program in Waterloo, and a commitment to creating an environment of enquiry and scholarship.

Resident success in scholarly activities has been a real strength of our program thanks to the hard work of Drs. Donnie Arnold and Christine Ribic in their roles as Director and Deputy Director of Resident Research. It is quite an accomplishment to have an average of 21 annual peer-reviewed publications from our residents. Our residents were once again recognized at the International Conference in Residency Education 2016 for innovation in medical education through a number of accepted abstracts, but highlighted by Dr. Rocchi Arora PGY3 being awarded the top Resident research paper titled: “Resident Evaluations of Faculty: Resident vs Faculty perspectives”. A further notable scholarly achievement included Dr. Derek Chu receiving the Royal Medical Associates scholarship award for his work “Systematic Review of Antithrombotics in Essential Thrombocytopaenia”.

Our Residency training program has been identified for innovation in medical education. A clear example of this was the development of an Ambulatory CTU based at the new Boris clinic, a concept that was co-developed by myself and Dr. Mohamed Panju. This was to meet increasing healthcare demands. This is the first such multidisciplinary unit of its type in Canada with learners of different levels and integrating family medicine residents to ensure appropriate clinical transition from specialty to primary care. The goal of the ambulatory CTU was to obviate the need for stable complex multisystem patients to be admitted to a hospital by providing access to specialty care, time of care diagnostics and imaging. Metrics are being applied to the ambulatory CTU addressing educational and clinical endpoints. I am pleased to report that in its first year the Ambulatory CTU was voted as one of the top elective experiences by the Family Medicine Residency Training Program, a real testament to its success in creating an interdisciplinary training experience. Dr. Panju and I led a publication of our work on the Ambulatory CTU which was accepted to the Canadian Journal of General Internal Medicine, and presented at the 2016 International Conference in Residency Education. The next challenge for all Residency Training programs is the transition from CANMEDS to a new Royal College educational design termed Competency by Design. This Competency based training program will provide trainee a clear benchmark of their progress by having to meet milestones in training leading to achievable Entrustable Professional Activities (EPA). EPA’s are those activities that a trainee can be entrusted to do without supervision. Similar Competency training programs exist in Europe and the United States driven by societal challenges, through a process of active engagement of all stakeholders.

I would like to welcome Drs. Rebecca Krusselbrink and Abbas Merari as the new Co-Regional Educational Leader for our Waterloo Regional Program. I wish to thank Dr. Nicole Dolyk who is leaving this position and has been instrumental in the success of the program from its development stages. Other new faces to our program have been the appointment of Co-CTU directors for the SJH CTU, Drs. Jason Cheung and John Neary. I wish to thank Dr. Raj Harniah for his dedication over the past nine years and his support of residency education. Dr. Alexandra Papaioannou will be stepping down as Ombudsperson for the program. Her commitment to resident advocacy has been valuable. This also marks my last year as program director for Internal Medicine, which will allow me to direct more of my time to my four young children. It has been a privilege to work with an accomplished group of residents, something I will truly miss. I leave with an appreciation for the many people that have supported me in my role, too many to mention individually but I would be remiss not to thank Jan Taylor who has been an incredible support. I leave a dynamic and accomplished training program, and look forward to supporting and contributing to new developments.

It is quite an accomplishment to have an average of 21 annual peer-reviewed publications from our residents. — Dr. Shariq Haider
The Department of Medicine has exceptional involvement from its faculty in all areas of Undergraduate Medical Education. The Internal Medicine and Medical Subspecialty Selectives Clerkship programs had a successful year in 2015-2016. The Medicine Clerkship Program is mandatory for all McMaster Medical students and consists of a 6-week “core” rotation and a 2-week Medical Subspecialty Selective (MSS) rotation. The Department of Medicine faculty within the Hamilton, Niagara, and Waterloo campuses work in close collaboration to ensure that our program provides excellence in clinical education to our medical students. The dedication, leadership and pursuit of teaching excellence by our faculty and their support staff are the key components to the program’s ongoing success.

CAMPUS UPDATES

Two hundred and five McMaster medical students in the Class of 2016 completed their Internal Medicine and MSS Clerkship rotations at all three campus sites. The Class of 2019 started this Fall with a total of 149 students based in Hamilton and 28 students based at each of the Waterloo and Niagara campuses. Our programs work cooperatively to ensure an equitable and challenging training program at all sites.

An accreditation survey team reviewed the medical school in May 2015 and was delighted to receive full accreditation in October.

The Niagara and Waterloo regional campuses celebrated the graduation of the class of 2016. In Niagara, Dr. Andrea Delruce continues in her second year as Regional Education Leader (REL) for Internal Medicine and has successfully led a number of initiatives with her fantastic team. Dr. Lorraine Jensen has been welcomed into the role of CTU director at the NRC St. Catharina’s Site. Several volunteer leadership positions have been developed to support Internal Medicine education in Niagara. As the lead for faculty development, Dr. Sameerah Siddiqui has been organizing monthly faculty development events. Dr. Diana Ananthan is now the physician representative on the Interprofessional Education Ward committee and is working closely with nursing and allied health leaders to enhance our IPE curriculum. Dr. Sherwin Zandi is the lead physician for international elective learners. Dr. Pooja Raut continues in her leadership role for curriculum development and helps to coordinate a schedule of formal teaching sessions for our students.

At the Waterloo campus, Dr. Mary Jackson continues as the REL for Internal Medicine, contributing a wealth of experience and dedication to ensure the success of the WRC IM program. The CTU at Grand River Hospital opened in July 2015 and has required teamwork and dedication from a number of committed Faculty. One of the strengths has been the “buy in” from nursing, allied health and the hospital administration. There was a collective pride that was palpable with the opening. Dr. Rebecca Krusselbrink in CTU director and there is a talented state of interns that do one-week rotations on the unit.

There are numerous teaching sessions and the feedback so far has been tremendously positive. The Hospitalist service continues to provide a valuable teaching experience and we are grateful to the team for their time and commitment.

Dr. Raf Setrak (NRC) and Val Mueller (WRC) continue to support their Faculty as the Clinical Education Coordinators. We thank them for their ongoing support of the IM and MSS programs. Each of the regional campuses continues to recruit enthusiastic new faculty who contribute to the solid clinical teaching provided in the Medicine rotations. Both campuses have successfully branded their own Clinical Teaching Units reflecting state of the art Internal Medicine teaching and practice starting in July 2015. The three campuses work very closely together in IM and all involved enjoy the opportunities throughout the year for face-to-face meetings at the Annual Awards Dinner and Retreat.

Within the Hamilton campus, the students participate in their core rotations on the Clinical Teaching Units (CTUs) at the Hamilton General Hospital (HGHH), the Juravinski Hospital (JHH) and St. Joseph’s Hospital (SJH). Drs. Christian Kraeker (JHH) and Zara Khalid (SJH) handed off their role as Site Coordinator to Drs. Abraaz Wyne and Daniel Brandt-Vegas. The IM Committee is grateful to Drs. Kraeker and Khalid for their contributions and commitment over their terms. Dr. Juan Guzman continues as HGHH Site Coordinator. The CTUs continue to provide an excellent and innovative teaching environment for the clerks. This is due to the support from the CTU directors: Drs. Marianne Talman, Ameen Patel, and, more recently, Drs. Jason Cheung and John Neary, as well as their administrative assistants. The Chief Medical Residents and Dr. Shariq Hader, Internal Medicine Residency Program Director, are invaluable in their support of the Internal Medicine Clerkship program in Hamilton.

The Internal Medicine and MSS Clerkships at all campuses continue to provide a framework for educational innovation. Both committees have been fortunate to engage students from all campuses who provide ongoing ideas and feedback so that the programs continue to make meaningful changes and stay accountable to the students in their educational mission.”

— Dr. Jill Rudkowski

MEDICAL SUBSPECIALTY SELECTIVES

Dr. Azim Gangji, the MSS Clerkship Director, has continued to work with the MSS Clerkship Coordinators committee and
of the MSS team, would like to acknowledge the contributions of Dr. Peter Kraus (Critical Care Medicine), Robert Spaziani (Cardiology), Lisa Brown (Cardiology), Dr. Marco Puglia (Gastroenterology) for their exemplary educational contributions.

AWARDS
The Medicine Clerkship Program has been privileged to offer a number of awards to students and faculty since 2011. One medical student from each of the five training sites has been chosen to receive the Dr. Paul O’Byrne Award for Outstanding Clinical and Academic Achievement. The Medicine Selective Subspecialty Program awards one student from each campus. The Dr. Alan Neville Award for Outstanding Clinical Performance. Dr. O’Byrne’s and Dr. Neville’s dedication, enthusiasm and passion for medical education and its learners has inspired and supported many students to specialize in this field and has helped to strengthen our Medicine Clerkship Program. We are grateful to the 

The MSS team would like to acknowledge the contributions of the Medical Subspecialty faculty, residents and fellows across all campuses for dedicating their time and knowledge in educating our future physicians.

The MSS committee would like to acknowledge and thank Dr. George Zimakas for his outstanding leadership and contributions as the outgoing NRC REL. In addition, the committee would like to acknowledge outgoing co-ordinators, Dr. Tricia Wto (Geriatrics) and Dr. Marco Puglia (Gastroenterology) for their exemplary educational contributions.

PROGRAM UPDATES
The Internal Medicine and MSS Clerkship Programs have been collecting data on the clinical clerkship experiences, rotation specifics, and professional competencies since 2008. The data collected has been invaluable, as all medical school campuses must ensure that the patient clinical experiences are comparable between teaching sites and meet the program’s learning objectives. Data collected continues to show that the students have comparable clinical experiences across all rotation sites in all three campuses. The Internal Medicine and MSS programs continue to make improvements and changes in the rotations based on valuable feedback from the students. Starting in 2016, the Internal Medicine and MSS Clerkships began working closely with the Medical Student VP, Academic to ensure that students receive transparent information about how their feedback is used by the program and how the information we receive from them is translated into tangible changes for incoming rotations.

The Internal Medicine Clerkship Committees, with representation from Faculty within the regional and Hamilton campuses from the core and MSS programs, second and third year classes, IM residents, and administrative staff, continue to be an integral part of our program. The committees hosted their combined annual retreat and faculty development session in October 2015. This meeting serves both as an annual review of the core and MSS programs and a chance for the committee members to enhance their professional skills. It brings together student representatives, faculty, and administrators from all three campuses and allows the programs to reflect and establish new directions for the upcoming year.

In January 2016 the MSS Clerkship program at the Hamilton campus added a Neurology rotation in collaboration with Dr. Barbara Connolly. In April 2017, a Dermatology rotation will be initiated led by Dr. Rosiene Lanzini.

TEACHING EXCELLENCE AWARDS
Hamilton Campus
Internal Medicine
HG – Dr. Marianne Talman
HG – Dr. Christian Kraeker
SJJ – Dr. John Neary
MSS – Dr. Marco Puglia
Waterloo Regional Campus
Internal Medicine
Dr. Marcel Parent
MSS – Dr. Dwight Stewart
Niagara Regional Campus
Internal Medicine
Dr. Nagy Gallab
MSS – Dr. Abdulgani Abonowara

In recognition of residents providing excellent education to clerks and acting as role models. The inaugural recipient of this award was Dr. Benjamin Tam in Critical Care. Dr. Tam was recognized for providing exemplary teaching, supervision and demonstrating professionalism in practice.

Dr. Paul O’Byrne Award for Academic Achievement
For the Class of 2016 “Dr. Paul O’Byrne Award for Academic Achievement” during the Internal Medicine core clerkship rotation was awarded to the following students:

Hamilton Campus - Sites
HG – Vera Ivanenko
JH – Courtney Coschi
SJJ – Hugh Traquair
Waterloo Regional Campus
Cameron Nishi
Niagara Regional Campus
David Page

205 Medical students in the Class of 2016 completed their clerkship rotations at all three campus sites
During 2015-16 the Department of Medicine saw a transition in leadership as Dr. Paul O’Byrne was promoted to Dean and Vice-President, FHS and Dr. Akbar Panju was appointed as our new Acting Chair of Medicine. The transition was seamless and the 2015-16 academic year proved to be extremely successful. As Director of Administration for the Department of Medicine, I have the privilege of working with many exceptional faculty and staff. In fact, there was a dramatic increase of new faculty recruits during this year which has led to an increase in the number of staff to provide support. These dedicated and talented individuals span across all hospital sites including Hamilton Health Sciences (McMaster University Medical Centre, Juravinski Hospital and Cancer Centre, and the Hamilton General Hospital) and St. Joseph’s Healthcare, Hamilton. The department continued to maintain a healthy financial position in 2015-16 and was able to continue to support important educational initiatives.

Discussions began regarding the Royal College mandated Competence by Design which will roll out for Medicine in 2018. Faculty development also remained a key priority as we identify talented faculty to be mentored for leadership positions within the department. Our Council of Medicine held another leadership retreat in January 2016 at the Pillar & Post, Niagara-on-the-Lake. This retreat focused on professionalism in the workplace and all attendees took away an important message regarding this issue. These retreats enable our division directors and the department’s other leadership to liaise in a non-working environment and hopefully learn important leadership and management information along the way.

The university continues to be committed to developing its management and leadership positions within the department. Our Council of Medicine held another leadership retreat in January 2016 at the Pillar & Post, Niagara-on-the-Lake. This retreat focused on professionalism in the workplace and all attendees took away an important message regarding this issue. These retreats enable our division directors and the department’s other leadership to liaise in a non-working environment and hopefully learn important leadership and management information along the way.

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The department continues to re-align administrative services during the past year. Changes were implemented for cost saving measures and to better streamline organizational structure to better serve our faculty, students and staff. Our dedicated team of site Business Managers continue to effectively manage issues as they emerge at the hospital sites. The team consists of Gail Laforme (Juravinski Hospital), Zrinka Granic (St. Joseph’s Healthcare) and Leslie Steinberg (McMaster University Medical Centre). This team is “hands on” and liaises closely with hospital personnel to ensure a fruitful university-hospital relationship. They are invaluable and a direct link to new faculty recruits as they get settled in their new surroundings. They also serve as our liaison with our administrative support in all geographic locations.

Equally important to the administrative team are Lorrie Reurink (Human Resources Manager), Lisa Goer (Finance Manager) and Graeme Matheson (A&P Budget Manager). Graeme continues to work closely with the AFP Executive and Finance Management Committees, including Dr. Ameen Patel (Associate Chair, Education) and Dr. Jeff Weitz (Associate Chair, Research) with regard to the AFP academic merit process.

The university continues to make essential and necessary changes to its finance, human resources and student services systems. To manage these changes effectively, it is imperative to have effective communication to keep faculty, students and staff informed of proposed changes implemented by the university. The Department of Medicine’s leadership and management teams are committed to support the university’s initiatives and to advocate the merits of change to our faculty, students and staff.
During my nine years as Physician-in-Chief at Hamilton Health Sciences, it has been my privilege to work on a daily basis with Dr. Paul O’Byrne as Chair of Medicine. As will likely be mentioned many times in this year’s reports, Dr. O’Byrne has been absolutely committed to the clinical, educational and research mission of the Department. In the clinical domain, Paul has always emphasized and supported the need for an outstanding clinical service in order for the department to reach its educational and research goals. His support has been unwavering and instrumental in my role as Physician-in-Chief.

Dr. Akbar Panju has assumed the interim chair role and continues to be equally supportive. The search for our new chair is underway. This individual will take over one of the very best academic Departments of Medicine in the country.

The relationship between Hamilton Health Sciences, the Faculty and St. Joseph’s Hospital continues to be extremely collaborative and collegial. Dr. Alistair Ingram has fully supported the spirit of cooperation established by the previous Chiefs at St. Joseph’s Hospital.

I would like to specifically thank Dr. Martha Fulford as Chief of Medicine for the MUMC site, and Dr. Khalid Azam as Chief of Medicine for the Hamilton General Site. I would also like to welcome Dr. Lori Whitehead as the incoming Program Director for the Internal Medicine Residency Program.

Every hospital in Ontario continues to experience extreme fiscal constraints and at the same time deal with an increasingly aging and complex population of patients. If there is anything in health care that is consistent, it is the constant need for change. Very recently, the Patients First Act, 2016 was passed by the provincial government. This legislation will have far reaching implications for the provision of care in our province. The specific implications for the Department of Medicine will evolve over the next year.

At the same time, the Royal College of Physicians and Surgeons have committed to the deployment of Competency by Design as the fundamental principal of our resident education programs. CBD will dramatically change the face of our residency programs, but almost certainly also profoundly impact the day to day clinical activities of our Faculty and the structure of our inpatient care. In this regard, it has become clear that the longstanding tradition of resident night time clinical activity will no longer sustain the care needs of our patients. This issue is effecting all academic teaching centres. In Hamilton, a tripartite working group representing the Faculty of Health Sciences, St. Joseph’s Hospital and Hamilton Health Sciences has been established. Dr. Mark Walton will chair this committee which will carefully examine the role of residents in the clinical service model and make recommendations that will profoundly influence our daytime and night time care model. As the process moves forward, the work-life balance of our Faculty must be carefully monitored and protected.

As inpatient resources continue to be constrained, the importance of high quality and efficient ambulatory care increases. The Boris Clinic has continued to evolve over the last year under the leadership of Drs. Akbar Panju and Martha Fulford. The educational component of the clinic is gaining popularity and is supervised by Dr. Mohamed Panju. Hamilton Health Sciences is about to embark on a comprehensive review of all ambulatory services provided at our multiple sites. As this evolves, our relationship with ambulatory services at St. Joseph’s Hospital will also need to be considered. The goal will be to redesign and redevelop our ambulatory services to be as efficient as possible while still providing a seamless link between our inpatient services and our primary care colleagues.

Our Family Medicine colleagues, St. Joseph’s Hospital and Hamilton Health Sciences have come together to form a community care liaison group. The goal of this initiative is to redefine and enhance the relationship between our primary care colleagues and our inpatient and ambulatory services. Over the years, there has been an increasing gap between primary care and the hospital sector to the detriment of effective transition between the inpatient and outpatient care models. This group is just beginning it’s work and is currently focusing on a number of areas of potential enhanced communication and access to ambulatory services.

Hamilton Health Sciences has recently completed its initial submission to the LHIN and the Ministry of Health to define our long-term directions in clinical service and the role of each of our sites. The “Our Healthy Future” initiative will be further modified and refined over the next year with a second submission to the LHIN and Ministry of Health in mid 2017. The potential implication for all the sites of Hamilton Health Sciences is profound and will require careful consultation with our other health care partners.

I would like to formally welcome the following new Faculty members: Dr. Vinai Bhagirath, Hematology; Dr. Luciana Catanese, Neurology; Dr. Neeraj Narula, Gastroenterology; Dr. Samir Raza, Gastroenterology.

Our new recruits have an amazing array of talent which will continue to build the profile of the Department in all domains. As I approach my tenth year in the Chief role, I remain extremely grateful of the support of all of our members. I look forward to another challenging year.
The Department of Medicine at St. Joseph’s Healthcare Hamilton (SJHH) continues to develop its academic mission and institute new clinical initiatives to deal with the very large demand for General Internal Medicine (GIM) and subspecialty clinical services. SJHH is the busiest GIM site in the city.

The Community Internal Medicine rapid Access Clinic (CIMRAC) opened in early 2015, staffed by GIM specialists from SJHH and is growing steadily. The General Internal Medicine Rapid Assessment Clinic (CIMRAC), located adjacent to the Emergency Department at the Charlton Campus, sees several thousand patients per year and continues to grow.

The average daily inpatient census for the GIM Service now sits at approximately 160 patients. This remarkably busy clinical service is very ably led by Dr. Jenny Lagassie. SJHH continues to be challenged by very large numbers of Alternate Level of Care (ALC) patients admitted to the hospital, often with long stays due to a lack of bed capacity in other programs or community facilities. To help cope with this workload, two Physician Assistants are employed in GIM, partly funded by the GIM physicians. An ACL team charged with engaging community resources to help minimize admissions from the ER for essentially “social” reasons has been established and has successfully helped several hundred patients and their families access care in the community.

Three other services (Nephrology, Respirology and Gastroenterology) also provide MRP care for patients and, together with GIM, these physicians manage the care of approximately 220 inpatients on a daily basis. New in-patient Cardiology and Respirology services, supported by a Nurse Practitioner, are designed to enhance patient flow through engagement with ever-increasing volumes and complexity. SJHH is currently fully seized by the Clinical Transformation project, termed “Dovetale” which will see the hospital information system, in-patient and out-patient, migrate to the EPIC platform in December 2017. A new Chief Medical Information Officer, Dr. Chris Hayes, joined SJHH late 2016 to lead this effort from the clinical standpoint, and SJHH physicians in all areas of Medicine have stepped forward to help with the “build” and to become “super users”. Physicians at SJHH look forward to this change with excitement but not without trepidation, and many groups are already planning enhanced physician presence in December 2017. Close communication with the University and the Inpatient Medicine Training Program will also be critical to success.

Recruitment within the Department of Medicine continues apace. Dr. Sumiti Nayar joined Neurology, and Dr. Seychelle Yohanna will join nephrology shortly with a focus on transplant. In cardiology Dr. David Conen came from Switzerland and Dr. Douglas Wright will join in January. Both are tasked with supporting the revitalized service and helping realize the vision of excellent Cardiology out-patient care. The hospital has approved redevelopment of Cardiology diagnostics on Level 6 in the Martha Wing to support this activity. In neurology Dr. Chitham Vegappan will open his practice at the West 5th site early in 2017 as we continue to rebuild the service. Dr. Nathan Hambly joined Respirology in early 2016 and leads the Pulmonary Hypertension program; we look forward to further Respirology recruitment in 2017 to support both Rehabilitation and the Lung Diagnostic Assessment Program. Further recruitment in 2017 is also anticipated in Hematology, GIM and Gastroenterology.

Many SJHH Medicine physicians continue to be Academic leaders and SJHH is highly ranked as a research Hospital, largely thanks to their activities. Highlights in 2016 include Hematologist Dr. Mark Crowther’s two senior authored papers in the NEJM. Dr. Deborah Siegal, who will join hematology here in 2017, was first author on one of these papers. Despite the chaotic environment in CIHR during 2016, many SJHH researchers did very well in the first operating grant competition under the new format. In fact, Dr. Joan Krepinsky in Hematology received two 5-year operating grants from that competition.

In administration SJHH physicians assumed two of the three most important roles to the University Department of Medicine in 2016. Dr. Lori Whitehead became the Internal Medicine Residency Program Director and Dr. Paul O’Byrne was chosen as Dean of the Faculty of Health Sciences. Here at SJHH Dr. Jason Cheung and Dr. John Neary took on the CTU Director role jointly.

I would like to thank SJHH Medicine physicians for continuing to provide exemplary clinical care in a resource-tight environment with ever-increasing volumes and complexity. I would also like to thank our Chief of Staff, Tom Stewart, for his recognition and support of this work.