Dr. Lawrence Burr

In the 1930’s, a few surgeons worked around the heart. In 1933 Dr. Shinbein (Shaughnessy Hospital) did the first known heart operation in BC, a pericardectomy.

The ‘40's were more aggressive. In 1944 Crafoord (Stockholm) resected a coarctation of the aorta, and Alfred Blalock at Johns Hopkins did the first Blalock-Taussig operation. Just three years later, in 1947, experienced VGH surgeon Doctor Ross Robertson returned from visiting other surgical units, and in a 4 week period at VGH did a Blalock shunt, a pericardectomy, a patent ductus arteriosus, and a coarctation of aorta, all successfully.

Then, the heart itself was approached. During 1948, Charles Bailey (Philadelphia) and Russell Brock (England) perfected closed mitral commissurotomy. Just one year later, in 1949, Ross Robertson did his first closed mitral commissurotomy at VGH. In Victoria, Doctor Jack Stenstrom was a pioneer surgeon. In 1949 he started doing Blalock, and PDA procedures, then continued with other closed heart operations for many years thereafter.

The 1950’s saw the development of true Open Heart Surgery, or ‘Surgery under Direct Vision’ (Lillehei). In 1953 Gibson in Philadelphia successfully closed an atrial septal defect (ASD) using the heart lung machine, with 28 minutes of cardiopulmonary bypass. Now, progress came quickly. During the 1950’s, Dr. John Evans, using CPB. Dr. Bill Dodds and Dr. Sleath were the first Open Heart procedures in Canada, closing an ASD in October, and a VSD in December.

In July 1957 Dr. Peter Allen returned to Vancouver from the USA with the essential parts for a heart-lung machine. During the summer, the machine was assembled and successfully tested in Dr. Ken Evelyn’s dog lab, with Dr. W.A. (Bill) Dodds providing anaesthesia and recovery skills.

Then, on October 29, 1957 in VGH Heather OR #3, Doctors Peter Allen, Philip Ashmore, W.G. (Bill) Trapp and Ross Robertson did the first Open Heart procedure in BC, by closing an ASD in 9 year old John Evans, using CPB. Dr. Bill Dodds and Dr. Sleath were the anaesthetists, and John Basaraba the perfusionist using the Lillehei-de Wall pump oxygenator. There are many fascinating stories regarding the perturbations and convolutions necessary to implement this pioneering surgical programme!

In 1960, on May 22nd, Doctors Bob Gourlay, Ted Musgrove, and Gerry Coursley made history at St. Paul’s by closing an ASD in OR 14 of the old Hospital. The patient was Elizabeth Laverty aged 12. The H-L machine was developed and run by Dr. Harold Rice, a well regarded researcher at St. Paul’s; Dr. Norman McMillan was the anesthesiologist.

The 1960’s were marked by the development of definitive surgery for acquired heart disease. During 1960 Robert Boetz (New York) anastomosed the internal mammary artery (IMA) to a human coronary artery, and Albert Starr (Portland) completed the first Mitral Valve replacement. 1962 was a good year in Vancouver: Dr. Al Gerein joined the St Paul’s surgery group, and, during the same year, the first artificial heart valve was implanted at VGH. Also, BC’s first artificial permanent pacemaker insertion occurred at VGH.

Progress was now rapid as other milestones were passed.

• 1964: Garrett in the US used a saphenous vein for a bypass graft for the first time, in desperation.

• 1967 Edmonton group did the first coronary artery bypass graft in Canada

• 1967 VGH Heart Surgery moved to Willow Chest - two Open Heart OR’s, a third OR for thoracic and pacemaker operations, a ten bed ICU, and a dedicated Cardiac Laboratory (Evelyn Rapanos)

• 1967 Christian Barnard (S. Africa) First heart transplant. Subsequently this procedure fell into disrepute until 1983 when anti-rejection drugs were improved.

• 1968 Green, Bailey and others popularized widespread use of CABG in the US

• 1968 Coronary Bypass surgery starts at VGH. Dr Bill Trapp would perform many ‘off-pump’ coronary bypass cases in the early 1970’s.

• 1982 Pediatric Heart Surgery moved to Children’s Hospital, headed by Dr.Phil Ashmore.

• 1988 Dec 6 - First heart transplant in BC was done by Dr. Virginia Gudas, at VGH.

• 1991 - On February 21st, the Royal Columbian Hospital unit started with Dr. Robert Hayden as the principal surgeon.

The full history will need to be told in detail, and much of it will be included in the ‘History of Cardiac Surgery in Canada’, to be published next year by Dr. Bernard Goldman of Toronto.

And, what about the future – a new unit in Kelowna in the plans of the Kelowna Hospital since 1988!!! Maybe in 2012 ???

Taken in part from an address by Dr. Lawrence Burr to the ’50th Anniversary of Open Heart Surgery Dinner’ held at the Vancouver Lawn Tennis Club on November 10th, 2007.
The Academic Emergency Medicine program at UBC has been approved. The Academic Emergency Medicine program at UBC has been growing rapidly for the last 2½ decades.

Divisions of Emergency Medicine were formed in the Department of Family Practice and the Department of Surgery in 1982. Concurrently, the Canadian College of Family Practice, Emergency Medicine (CCFP-EM) and the Royal College of Physicians and Surgeons (RCPC) Residency Training programs were created. The Division of Emergency Medicine in the Department of Pediatrics established the Pediatric Emergency Medicine Fellowship Program in 1998. All of these postgraduate programs have increased dramatically in size. There are now 15 residents in the Royal College Training Program, 6 residents in the CCFP (EM) Program and 4 fellows in the Pediatric Fellowship Program.

Emergency Medicine has been a compulsory rotation in Phase IV of the Medical School Curriculum for all medical students since 1997. Many students complete electives in Emergency Medicine in addition to their mandatory training. Each year the Emergency Medicine faculty provide over 80,000 hours of teaching while providing clinical care. In the Self-Study report prepared for the upcoming accreditation of the Faculty of Medicine, medical students ranked the Emergency Medicine training very highly. Faculty Members in Emergency Medicine provide significant levels of Continuing Medical Education, including two nationally recognized conferences annually. Researchers in Emergency Medicine at UBC are very productive. In the last seven years, UBC EM principal investigators have been successful in obtaining 124 grants worth $13.1 million. They have collaborated with other researchers to obtain an additional $10.3 million in research funding. In the same time period, faculty members in Emergency Medicine have been the primary or co-author of 226 peer reviewed publications. They have also written 78 book chapters and 9 books. Emergency Medicine faculty members have also presented 309 research abstracts.

Four universities have already created Departments of Emergency Medicine in Canada. Two other Canadian universities (Calgary and Manitoba) have formally announced their intention to create Departments of Emergency Medicine. In the United States, Departments of Emergency Medicine have been created at 69 universities.

In response to the question of whether realigning the Division of Emergency Medicine to a Department would enhance the overall academic value and follow the strategic plan within the Faculty of Medicine, they stated “there was significant and consistent acknowledgement of the potential benefits and support for the proposed Department of Emergency Medicine at UBC amongst all of the individuals interviewed. The committee felt that the very significant contributions of the Emergency Medicine faculty have very significant potential to contribute to the achievement of the strategic goals of the UBC Faculty of Medicine. Furthermore, the proposal for creation of a Department of Emergency Medicine provides support for accomplishing the goals of the UBC TREK 2010 ñ A Global Journey and its pillars of People, Learning, Research, Community and Internationalization.

In particular, contributions in knowledge creation and transmission in Emergency Medicine pertaining to health systems, trauma and conflict, disaster and public health, and the care of vulnerable populations can be generalized to a global context and align well with the vision and strategic goals of the University.”

The External Review Committee further stated that, “they strongly support the Division of Emergency Medicine becoming a full academic Department at UBC as did virtually all of the respondents they interviewed. The Committee took special note of the strong support of the proposal offered by the Heads of the three academic departments most directly affected (Surgery, Family Practice, Pediatrics).”

The External Committee reviewed the inventory of scholarly output produced by Emergency Medicine faculty and felt that the research output of the current Division of Emergency Medicine at UBC was impressive.

They indicated that, “The availability of recurring academic funding from the Ministry of Health in recognition of the research of the academic EM group provides an excellent resource for the establishment of a formal professoriate to facilitate and enhance academic development in the field of EM.”

In summary the External Review Committee recommended: “That the proposal to create a Department of Emergency Medicine be approved.”

In summary, we believe there exists: A Critical mass of faculty to support the academic mission. A sufficient and distinctive body of knowledge. Active undergraduate, post-graduate and continuing professional programs in EM. Research success and national recognition. Broadly based support for the initiative to create a Department of Emergency Medicine at the University of British Columbia.

Dr. Julian Marsden - Head, Division of Emergency Medicine, Department of Family Medicine (Email: marsden@telus.net)
Dr. Ran Goldman - Head, Division of Emergency Medicine, Department of Paediatics (Email: rgoldman@cw.bc.ca)
Dr. Roy Purssell - Head, Division of Emergency Medicine, Department of Surgery (Email: roy.purssell@vch.ca)

(This proposal was approved at the full faculty meeting on November 27 and now awaits Senate approval before implementation. Editor)
The Division would like to congratulate all their graduates for 2007 – Drs Ryan Cain, Matt Dickson, and Shabir Mia. Dr. Cain has returned to his home town to join the practice of the sole otolaryngologist in Cranbrook. Dr. Dickson has gone to Cincinnati to do a fellowship in pediatric otolaryngology, and Dr. Mia has gone to Saskatoon. Drs Raymond Ng, Brad Mechor, and Osama Marglani have all completed their fellowships in otology, sinonasal disease/rhinology, and pediatric otolaryngology respectively.

Dr. Paul Moxham completed his thesis “Oncostatin-M enhances osteoinduction in a rabbit critical calvarial defect model” for the American Laryngological, Rhinological, and Otological Society (Triological Society) and was given honorable mention for basic science research. We would like to congratulate Dr. Moxham on this achievement as there has not been someone appointed from Western Canada for almost two decades.

Dr. Patricia Lee has been Director of Undergraduate Education in our division for two years and has been very industrious in updating teaching materials which was in need of attention especially in light of the expansion of the medical school which involves faculty in various parts of the Province taking a role in teaching.

Dr. Blokmanis has stepped down from Director of CME – Otolaryngology and his diligent efforts in organizing clinic days during his tenure have been appreciated by members of the BCOS.

Dr. Douglas Kibblewhite has volunteered to step into this position. Dr. Chee Thong won the “Best Resident Teacher” award (which he has won several times in the previous years) for his commitment to teaching residents temporal bone drilling. This laboratory was relocated once again in the move to the new Diamond Centre under Dr. Thong’s careful direction.

Dr. Murray Morrison has retired from the faculty of otolaryngology but will continue to have a parttime clinical practice in the Diamond Centre until a new laryngologist can be recruited.

In February 2008, a team of Otolaryngologists, Anesthesiologists, Operating Room Nurses, ICU Nurses and Biomedical Engineers will travel to Uganda to continue work with the Uganda Hearing Health Care Program. This program began in 2000 when Dr. Irwin Stewart, Professor Emeritus saw there was a need in Uganda to assist those with hearing impairment and now carried forth by Dr. Brian Westerberg. The program to date has supplied local Otolaryngologists with novel equipment, including operating room microscopes, mastoid drills and ear instruments. Prior to this program, mastoid surgery was performed using overhead lights and ‘hammer and gauge’. In addition, the program has worked to improve the medical treatment available to patients with ear disorders through improving medical management of treatable conditions to improving access to hearing aids. Other aspects of the program have included improvement in access to clean water as well as setting up libraries in schools. The program continues to expand in its scope as well in the size of the team of volunteers.

We have had two clinic days with visiting lecturers from afar including Mr. Matthew Yung, Ipswich, Dr. Lauren Holinger, Chicago, Dr. John Rutka, Toronto, and Dr. Craig Murakami, Seattle.

At this year’s Chung Research Day on November 2, 2007, our resident, Dr. Paul Mick, won second prize for best student/resident presentation. Dr. Brian Westerberg is co-author of this paper. We would like to congratulate Paul for his endeavours.

The Rotary Hearing annual Bike-a-thon was held on July 2007 with riders biking from Vancouver to Mission. Participants from otolaryngology to include Murray Morrison, Don Mintz, Brian Westerberg, Yotis Tsaparas, and Erik Brown. Funds raised from this event are widely distributed to various hearing related projects and this year will be used to support a resident to travel to Uganda with the group mentioned above.

The Members of the Division of Vascular Surgery remain busy. In 2007 we built on the foundations for 2006. We put into practice the advanced endoluminal vascular techniques that were acquired over the past couple of years. Drs. Chen, Hsiang, and Gagnon developed a most successful skills upgrade program for the nurses.

Collaboration is the word at St. Paul’s. Drs. Reid, McDonald and Sidhu have developed an endovascular program that is based on a highly successful collaboration between vascular surgery and interventional radiology. Dr. Reid is actively involved with his work at Trauma Services at VGH.

Spearheaded by Drs. Sidhu, Chen and Taylor, our Division remains committed to all aspects of surgical education. As Chair of the Undergraduate Program at UBC and Chair of the Specialty Committee for Vascular Surgery for the Royal College, Dr. Taylor brings his skills to the local and national scene. After a very favorable Royal College accreditation, Dr. Chen completed his term as Director of the Post Graduate Training Program. He continues to serve as a Royal College examiner. Jerry’s organizational skills have successfully revitalized the educational component of the Canadian Society for Vascular Surgery Annual General Meeting. Dr. Sidhu has succeeded Dr. Chen as Chair of the Post Graduate Program.

Dr. Sidhu seems to succeed at everything he does. In 2007, Ravi was awarded the Canadian Association of Medical Education Certificate of Merit, the UBC Department of Surgery, New Investigator Award, and the Committee on Trauma of the American College of Surgeons Regional Award (Supervisor). Way to go Ravi!! During all of this he found time to setup and supervise a series of very popular surgical skills wet labs for the residents.

Dr. Salvian continues his yeoman duties in ably representing the Division at the SSPS.

This Fall Drs. Keith Baxter and Dhafer Kamal both passed their Royal College certification exams in Vascular Surgery. Dr. Hao Wu has completed the first year of his vascular fellowship program. We welcomed Dr. Marlene Grenon to her first year of vascular fellowship training. Marlene is a certified cardiac surgeon who remains actively involved in research with MIT, Harvard and NASA.

This year we welcomed a new member to the fold. Dr. Joel Gagnon returned following his endovascular surgery fellowship in Europe and Australia, to join the group at VGH. Welcome, et Bienvenue Joel! We also greeted three junior members, Sachin Sidhu born in March, Lucas Olivier Gray Gagnon born in May, Jackson Keith Baxter born in July.

We wish Dr. Peter Fry all the best as he relocates his practice to the Fraser Valley. All the best, Peter, we’ll miss you.

Lynn Doyle, MD, FRCSC, Acting Head, UBC Division of Vascular Surgery
With vital grant funding from the BC Academic Health Council in the amount of $86,600 in support of the proposal in support of student and surgical resident research entitled, "Swinging Open the OR Doors to Educational Opportunity", the Office of Pediatric Surgical Evaluation and Innovation has provided exciting clinical research opportunities to a number of medical students, undergraduate students, and one high school student over the last year. These experiences have produced strong research projects conducted, which not only have had a positive impact in patient care, but have also cultivated new enthusiasm within our academic mandate in Pediatric Surgery.

2007 Summer Student Projects Accepted Oral and Poster Presentations at WSPR

We are very pleased to report that OPSEI had five summer students' scholarly projects present their work at the Western Society of Pediatric Research in Carmel, California which was held on January 31, 2007. The five accepted projects were:

Use and Misuse of Child Restraint Seats in Manitoba
**Student:** Mr. John Blair  **Supervisor:** Dr. Kishore Mulpuri

*The Role of Fine-Needle Aspiration Cytology in the Pre-operative Diagnosis of a Pediatric Thyroid Nodule*

**Student:** Mr. Justin K. Lee  **Supervisor:** Dr. Geoffrey Blair

*Distribution and Expression of Transgene GFP in Fetal Cells following In Vivo Fetal Gene Therapy in Mice*

**Student:** Mr. Patrick Yang  **Supervisor:** Dr. Erik Skarsgard

*Intra- and Inter-observer Agreement in the Radiographic Diagnosis of Femoral Head Osteonecrosis following Slipped Capital Femoral Epiphysis*

**Student:** Mr. Ravi Ghag  **Supervisor:** Dr. Kishore Mulpuri

*A Roadmap to Global Health Education: A Student-Led Learning Initiative*

**Student:** Ms. Courtney Collins  **Supervisors:** Dr. Geoffrey Blair and Mr. Damian Duffy

Through their hard work and conscientious scholarly activity, OPSEI is pleased to report that our students have been honoured with several awards through the Child and Family Research Institute, the UBC Faculty of Medicine and internationally at the Western Society of Pediatric Research in Carmel, California.

Ms. Courtney Collins, UBC Albert B. and Mary Steiner Travel Award

Mr. Ravi Ghag, UBC Albert B. and Mary Steiner Travel Award

Mr. Ravi Ghag, Claude K. Lardinois MD Oral Presentation Award, Western Society of Pediatric Research

Ms. Melanie Finkbeiner: Third Prize, Child and Family Research Institute Summer Student Research Day

Mr. Patrick Yang, Second Prize, Child and Family Research Institute Summer Student Research Day Award

Mr. Patrick Yang, First Prize, 3rd Annual MUS Medical Student Research Forum

Mr. Patrick Yang, UBC Albert B. and Mary Steiner Award Travel Award

Mr. Patrick Yang, Best Basic Sciences Poster, Western Society of Pediatric Research Call for Abstracts

Holding the UBC Pediatric Surgery Banner high at the Western Society of Pediatric Research: Mr. Patrick Yang, Mr. Damian Duffy, Ms. Angie Perdios, Mr. Ravi Ghag, Mr. Justin Lee, Mr. John Blair, Dr. Erik Skarsgard, and Dr. Geoffrey Blair.

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**Dr Nancy Van Laeken Appointed as Associate Head of UBC Department of Surgery**

On November 27, Dr. Garth Warnock announced the appointment of Dr. Nancy Van Laeken as Associate Head of the Department. This new position was created as a result of the recent departmental review and its terms of reference include coverage of the Chair in his absence, membership or chairing of key committees in the department such as search and selection, appointment and promotion, reviews, and finance. She will assist the Head in the development of strategic plans for the department and will meet regularly with the Head as a member of his “cabinet”. We congratulate Dr. Van Laeken in accepting this new role and responsibility, and wish her well in her expanded role in the department.

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**MISSED GRAND ROUNDS?**

Did you know that videos of the Departmental Grand Rounds are now available in their entirety online through a link on the Departmental Home Page? Just open [www.surgery.ubc.ca](http://www.surgery.ubc.ca) and follow your nose!
Call for Abstracts

DATE: MAY 9 – 10, 2008
LOCATION: PAETZOLD CENTRE
VANCOUVER GENERAL HOSPITAL
VANCOUVER, BC

ASSESSING OUTCOMES AND IMPACTS IN INTERNATIONAL SURGICAL INITIATIVES
INCLUDING
PRECONFERENCE - INSTRUCTOR WORKSHOPS
POSTCONFERENCE - TELEHEALTH WORKSHOP

HOSTED BY
BRANCH FOR INTERNATIONAL SURGERY, UBC
CANADIAN NETWORK FOR INTERNATIONAL SURGERY

IN COLLABORATION WITH
OFFICE OF INTERNATIONAL SURGERY, U OF T

The Branch for International Surgery (University of British Columbia), the Canadian Network for International Surgery, and the Office of International Surgery (University of Toronto) are pleased to announce the 8th Annual Bethune Round Table on International Surgery. This conference will appeal to surgeons from all countries who are interested in surgery for human development, particularly in cooperation between low-income and high-income countries, to address the global burden of surgical disease. Trainees, injury control researchers, experts in development and medical education and members of both governmental and non-governmental organizations focused on health care will also find the meeting informative and stimulating.

The theme will be “Assessing Outcomes and Impacts in International Surgical Initiatives”. Abstracts are sought for podium and poster presentation on the theme in the following categories: clinical care, education, innovation, influencing national health systems. There will also be, as in other years, a limited session for abstracts which are outside the theme but of significant importance.

Abstracts should be in Word Format and include title of abstract, authors, institution, country of origin, purpose, methods, results, conclusions and significance. They should not exceed 250 words in length. Abstracts will be selected on scientific quality, originality and objective demonstration of outcomes and impact. We seek participation from a wide variety of countries, from both low and high income areas.

Travel scholarships are available for participants working full-time in low-income countries whose abstracts are selected. We regret that we are not able to offer such scholarships to those working in OECD countries.

Because of visa requirements, please note that all participants coming from outside Canada must include, with the abstract, their full name and title, gender, date of birth, contact address (details) and country from which they will be applying for a visa. Abstracts without this accompanying information will not be considered.

Abstract Deadline: January 31, 2008
Scholarships offered: February 2008

Send abstracts and accompanying information to: international.surgery@ubc.ca

We look forward to hearing from you.

Endocrine Surgical Oncology Course

October 27, 2007, Waterfront Hotel, Vancouver, BC

On October 27, 2007, the Surgical Oncology Network of the BC Cancer Agency, in conjunction with the Department of Surgery, UBC very successfully presented a course to review Endocrine Surgical Oncology. Dr. Sam Bugis and Dr. Nadine Caron chaired the sessions. Dr. Rona Cheifetz and the staff from the Surgical Oncology Network provided invaluable organizational support. Dr. Orlo Clark, Professor of Surgery, UCSF and Dr. Richard Nason, Chair of Surgery, University of Manitoba were the invited guest lecturers. Dr. Clark spoke on indications for thyroid surgery and Dr. Nason addressed surgical management of lymph nodes in patients with thyroid cancer. Local speakers from General Surgery, Otolaryngology, Radiation Oncology, Medical Oncology, Endocrinology and Pathology covered the broad range of topics in the field of endocrine surgery.

Over 60 surgeons attended the conference. They enjoyed lectures and 2 interesting, lively and educational panel discussions on problem cases in parathyroid and thyroid surgery. The day was completed by a wine and cheese reception as well as a fascinating discussion from Dr. Clark titled “Endocrinology and Art”, a subject he and his wife are researching for a book they are writing.
Research Awards

Congratulations to the following Emergency Department members for their RESEARCH Awards!

Jeff Brubacher (VGH) and Garth Hunte (St.Paul’s) were awarded $115,484.13 from the Canadian Patient Safety Institute plus “in kind” support from VCH and Provincial health care for “Reporting and response to patient safety events in urban and rural emergency departments in BC”.

Corinne Hohl (Team Leader), Sam Sheps, Riyad Abu-Laban, Jeff Brubacher, Garth Hunte, Aslam Anis and Peter Loewen were awarded the Michael Smith Foundation for a “Team Start Up” award for “ Detecting, treating and preventing drug-related morbidity in the ED” study. The multidisciplinary team will receive $75,000 per year for 3 years (total $225,000) to fund this project that will be based in our ED.

William Dick (Team Leader), John R. Mayo, Douglas McKnight, Savvas Nicolaou and James Woo were awarded the Vancouver Coastal Health Research Institute “Team Grant” award for his a study on the “Role of coronary computed tomography angiography (CCTA) for the evaluation of ED patients with chest pain”. The multidisciplinary team will receive approximately $30,000 from VCHRI, plus additional grant-in-kind support from the Department of Radiology, to carry out this project that will be based in our ED.

Steve Reynolds (Team Leader), Neil McLean, Bill Bowie, Patrick Doyle, Diane Roscoe, Lyne Filatruil and Tim Lau won the Vancouver Coastal Health Research Institute “Team Grant” award for his a study on the “Role of coronary computed tomography angiography (CCTA) for the evaluation of ED patients with chest pain”. The multidisciplinary team will study “Incision and Drainage Alone versus Incision and Drainage and Trimethoprim-Sulfamethoxazole/Rifampin for Soft Tissue Abscesses caused by Community Associated Methicillin Resistant staphylococcus aureus” (MRSA study). This project will be based in our Emergency Department.

Neil McLean, was awarded $8,500 from The Foundation for Air Medical Research and Education (FARE) for the study “Evaluation of Cabin Altitude Restrictions in Aeromedical Transport of Patients with Chronic Obstructive Pulmonary Disease”.

W.B. & M.H. Chung Research Day

October 29, 2007

The 13th Annual W.B. & M.H. Chung Lectureship was held on Monday, October 29, 2007 at the Cordula and Günter Paetzold Health Education Centre at VGH. This year’s invited lecturer was Dr. Markus W. Büchler, Professor of Surgery, Division of General Surgery, Chairman Surgical Unit, University of Heidelberg.

The day had participation by faculty, residents and students from the following Divisions in the Department of Surgery: Cardiac Surgery, Emergency Medicine, General Surgery, Neurosurgery, Otolaryngology, Paediatric General Surgery, Plastic Surgery, Thoracic Surgery, and Radiation Oncology.

The morning session started off with presentations chaired by Dr. Garth Warnock and ended with the W.B. & M.H. Chung Lecture by Dr. Büchler entitled “Evidence based pancreatic surgery”.

Video presentations were added to this year’s events and were shown during the last part of the luncheon to an audience of about 50 participants. Presentations were Laparoscopic Distal Pancreatectomy by Dr. Adam Meneghetti; Molecular Surgery by Andrew Ming-Lum from Dr. Mui’s lab; Laparoscopic Liver Resection by Dr. Stephen Chung; and MIS Mitral Valve Repair by Dr. Peter Skarsgard.

The afternoon session was chaired by Dr. Neely Panton and completed the oral presentations for the day. In addition, there were 13 poster presentations this year.

The evening dinner for faculty, residents, students and their spouses was held at the University Golf Club. Following dinner, Dr. Büchler gave an after-dinner talk on “Why is Surgery so Attractive as a Profession”. After the talk, Dr. Büchler presented the following prizes:

- Best Faculty Presentation – Dr. Sam Wiseman
- Best Resident/Student Presentation 1st Prize – Dr. Reza B. Jalili
- Best Resident/Student Presentation 2nd Prize – Dr. Paul T. Mick
- Best Poster Presentation – Mr. Stuart Jones
- Dr. Alice Mui concluded the evening with presentations of the 1st Annual Video Oscars for:
  - Best Spleenplay - Dr. Adam Meneghetti
  - Best Director - Andrew Ming-Lum
  - Best Heartwarming Cinematography - Dr. Peter Skarsgard
  - People’s Choice Award - Dr. Stephen Chung

VGH Surgeon named to Order of Military Merit

Surgeon Commander Ross Brown, Medical Director of the Canadian Forces Trauma Training Centre at Vancouver General Hospital (VGH), was appointed to the Order of Military Merit in Ottawa on Friday, November 9th by her Excellency, The Right Honourable Michaëlle Jean, Governor General of Canada.

Created in 1972, the Order of Military Merit recognizes meritorious service and devotion to duty by regular and reserve Force members of the Canadian Forces.

Cmdr. Brown joined the Canadian Forces in 1979 as a naval officer. After completing his surgical residency at UBC Hospital, he was posted to VGH in 1996. He co-founded the Canadian Forces Trauma Training Centre at the hospital, which provides clinical trauma training for CF Physician Assistant students and trauma refresher experience for CF physicians and nurses. Cmdr. Brown participated in three tours of service in recent years, two in Bosnia and one in Afghanistan. In 2005 he was transferred from active duty to the Primary Reserve List and was named to the position of Medical Director, Critical Care, Emergency and Trauma Services for VGH.
A New Focus on Education

Revamping the General Surgery Resident Academic Half-day

I had just finished snuggling down the transition stitch before I realized that my fingertip was actually cold. My first McVay repair, I should have been happier. Instead, I was just hoping for the sensation to return to my index finger. Of course the patient was a little cold but there was no anaesthesiologist in the room to help warm him. Upon closer inspection, the patient was not breathing; in this case that was a good thing.

The hernia surgical skills anatomy lab was held Thursday, November 29, at CESEI. This was the final “hands-on” teaching session of the term for the general surgery academic half-day sessions. In addition to this final session on hernia repair, there was also a recent head and neck surgical skills and anatomy session. And while these sessions were targeted toward residents in years III to VI, the first and second year residents worked on basic surgical skills in a separate laboratory.

This year marked a change of direction for general surgery residency education at UBC. Long-time program director Dr. Eric Webber decided to move on to a new challenge, taking a position in the UBC Postgraduate Department as an Assistant Dean. Dr. Webber leaves a legacy of being first and foremost a resident advocate. It should be no surprise to reveal that the increased involvement of attending staff must also be applauded. Without the involvement of some key surgeons, the sessions could not have been carried out. Of course Dr. Hameed deserves a tremendous amount of credit as this was his vision and he has somehow managed to gain funding for these costly sessions.

The surgical skills labs have been a tremendous boon to the educational benefit of the academic half-day sessions. So far this fall we have had three such laboratory sessions. A pig lab on upper abdominal procedures such as gastrectomies and duodenal patches was very helpful for practicing some procedures that are now rarely performed and thus seldom encountered during residency training. The experience gained in the lab is invaluable to cementing the knowledge foundation gained from the lectures. The more traditional didactic teaching. The attending physicians assigned to the sessions provide expert knowledge and share their experience with the residents. The knowledge that is learned is then taken to the lab to be put into action.

The increased involvement of attending staff must also be applauded. Without the involvement of some key surgeons, the sessions could not have been carried out. Of course Dr. Hameed deserves a tremendous amount of credit as this was his vision and he has somehow managed to gain funding for these costly sessions.

The academic half-day sessions are held every Thursday afternoon, except during the summer months. The effectiveness of these sessions depends on both the involvement of the resident learners and the attending staff physicians assigned as teachers. During my first three years of academic half-day sessions I can honestly say that I got out of them what I put into them. In my case, that was not a lot.

Learner apathy was one of the main reasons that the sessions became stagnant. Presentations were becoming too didactic and predictable, residents and staff were not communicating prior to the sessions, there was pressure from attendings to stay in the OR to assist, etc. The list of issues was lengthy and it was apparent that a change was needed. Enter Dr. Hameed.

Overhauling the academic half-day sessions has been a huge undertaking. In fact, it is still a work in progress. But even in its infancy, this year’s sessions are a huge improvement. I now find myself looking forward to Thursday afternoons whereas before they were often dreaded. The sessions are now designed in modules that incorporate the lecture sessions with readings, case-based presentations in addition to the more traditional didactic teaching. The attending physicians assigned to the sessions provide expert knowledge and share their experience with the residents. The knowledge that is learned is then taken to the lab to be put into action.

Dr. Morad Hameed was appointed as the new program director in the spring of 2007. Dr. Hameed, the soft-spoken trauma surgeon and critical care physician, is well respected for his vast knowledge base and his humble demeanor. His encouragement of resident involvement in all situations, from the trauma bay to the OR, is testament to his dedication in furthering the education of all residents. And with his first real initiative as program director, Dr. Hameed set the tone and direction for his own legacy.

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Overhauling the academic half-day sessions has been a huge undertaking. In fact, it is still a work in progress. But even in its infancy, this year’s sessions are a huge improvement. I now find myself looking forward to Thursday afternoons whereas before they were often dreaded. The sessions are now designed in modules that incorporate the lecture sessions with readings, guest speakers and laboratory sessions surrounding that module’s topic. For instance, over a block of a few sessions we will cover a topic such as hernias. The residents are assigned readings in advance around the topic. Interactive lectures are given focusing on problem solving and case-based presentations in addition to the more traditional didactic teaching. The attending physicians assigned to the sessions provide expert knowledge and share their experience with the residents. The knowledge that is learned is then taken to the lab to be put into action.

The surgical skills labs have been a tremendous boon to the educational benefit of the academic half-day sessions. So far this fall we have had three such laboratory sessions. A pig lab on upper abdominal procedures such as gastrectomies and duodenal patches was very helpful for practicing some procedures that are now rarely performed and thus seldom encountered during residency training. The experience gained in the lab is invaluable to cementing the knowledge foundation gained from the lectures.

There have also been two “fresh” frozen cadaver labs, one on hernias and one on head and neck. The inguinal anatomy is often difficult to appreciate in the OR as the focus is on patient care and in formalin preserved cadavers the anatomy is often obscured. Additionally, the tissue quality of fresh cadavers allow for the practice of surgical techniques. I had seen one McVay repair previously and only a handful of Bassini repairs during my first three years of residency. Although these repairs have been supplanted by the Lichtenstein repair in most cases, there are still situations that call for knowledge of these repairs, namely in emergencies and on exams.

The increased involvement of attending staff must also be applauded. Without the involvement of some key surgeons, the sessions could not have been carried out. Of course Dr. Hameed deserves a tremendous amount of credit as this was his vision and he has somehow managed to gain funding for these costly sessions. Also present at the weekly lectures is Dr. Scott Bloom of Richmond who provides a great amount of input to each session. The organization of the lab sessions seems to have fallen on the shoulders of Dr. Meneghetti as well as the other VGH MIS surgeons, Dr. Panton and Dr. Nagy. Also deserving of recognition are the staff of the other local hospitals such as St. Paul’s and the many suburban community hospitals in the Greater Vancouver area. Part of the strength of the new sessions is due to the involvement of attending surgeons with such diverse backgrounds.

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The sessions have also required more dedication from the learners but, as I have said above, you get out of it what you put into it. With the revamped general surgery academic half-day sessions, the investment is definitely worth the reward.
The Surgical Times

Editorial Comments

We present the Fall/Winter edition of the Times as a result of your answers to the call for newsworthy submissions from members of the department. For these items your editors thank you!

Noteworthy is our lead article from Dr Lawrence Burr which celebrates the fiftieth anniversary of cardiac surgery in BC. Many of the readers will remember some of the milestones and a few will remember them all....congratulations to those involved and may the future be as exciting as the past!

By the time this issue hits your desk or computer screen the formation of the Department of Emergency Medicine will be a reality. We should remember that in the early 80's, Dr AD Forward took in this orphan group which had no academic home. With some pride we now say godspeed to this newest department in our faculty as it strikes out on its own confidently and appropriately. Never will the ER completely sever its connection to the surgical enterprise and one can only hope that we will continue to work closely together as equals in the academic community which is UBC.

We commend all the news in this issue to your close attention and remind you again that this is YOUR newsletter and that the editors count on your regular submissions. We still look forward to developing supplements on International Surgery, Surgical Research, and Surgical Skills Teaching with guest editors in the months and years ahead.

Enjoy the holidays, and all the best in 2008!

The Editors

NEW WEBPAGE FEATURES

COLORECTAL SURGERY SECTION

Dr Carl Brown has recently developed a webpage for the colorectal group at St Paul's Hospital. Content of the page is currently being uploaded along with appropriate links and those interested are urged to visit http://www.colorectalsurgeryphc.org

Anne at home with the residents. Anne Finneran - A Rose between Thorns! Anne receives her Gift. Marian MacFarlane, Natalie & Sam Wiseman.

Anne Finneran Retires

On November 29 a popular member of the UBC team at St Paul’s Hospital was honoured at a reception and dinner with the members of the Division of General Surgery and this year’s resident group. Anne Finneran has worked in the UBC surgical department for many years and has distinguished herself in each of her roles. For the last twelve years she has graced us with her expertise, equanimity, and unflappable competence as she has tackled everything from orientation of medical students to running international courses as the executive assistant of the St Paul’s department in affairs academic. Nothing was too menial or too tough for Anne to take on, and she has done it all with grace and good humour. She was especially dedicated to the students and residents and often was called on to rearrange a scheduled teaching session or call schedule at the last moment. The faculty has learned to count on her for sage advice in CV updating, grant and paper preparation, and planning and execution of courses and seminars. She never let us down! Needless to say her diminutive shoes will be difficult to fill, however we reluctantly send her off with Carl to begin a new chapter in their Vancouver Island waterfront home. Many many thanks to you Anne for a job well done and a long and happy retirement are well deserved.