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# **CAMPAIGN PROGRESS REPORT**

April 1, 2010 to March 31, 2012

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# ***You have the Power to Heal!***

The JGH Foundation is engaged in the initial phase of its most ambitious Capital Campaign to date, a campaign with a goal of \$250 million. Spearheaded by an all-star dream team of Montreal leaders, this bold initiative will provide the medical, surgical, nursing and allied health professionals of the Jewish General Hospital with facilities, equipment, personnel and research funding—the indispensable ingredients for continued excellence in patient care, research and teaching.

Our theme, *You have the Power to Heal*, expresses the very essence and core of what the JGH and its supporters are all about. It sums up in a few words our common goal of achieving better health and better health care for the people of Montreal and Quebec, now and in the future. It represents the fact that each of us is a stakeholder and plays an important role when it comes to ensuring the continued health and well-being of those we love and, indeed, the entire community. It stands for the power that each one of us has to make a difference and what can be accomplished when our hospital's leaders, medical staff and generous donors come together for a common purpose.

Below are just a few examples of how every dollar donated to the "*You have the Power to Heal*" campaign is making a difference.

# Bringing the best and brightest doctors and researchers to Montreal and Quebec

## 2011-2012



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**Dr. Jean-Francois Boileau**, a surgical oncologist and clinician-researcher specializing in breast cancer, joined the JGH Department of Oncology in 2012. In addition to his surgical expertise, Dr. Boileau's carries out research on the use of neoadjuvant therapy (i.e. the administration of therapeutic agents before a main treatment) as a more efficient way to study the effects of systemic treatments like chemotherapy in people with breast cancer, with the goal of better understanding the complexities of tumour response and delivering treatments that will be increasingly tailored and personalized.



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**Dr. Colin Crist** is the first recipient of the Marjorie and Gerald Bronfman Chair in Skeletal Muscle Stem Cell research and joined the Lady Davis Institute in January 2012. Dr. Crist is an established and emerging world-class researcher who will develop a program in muscle regeneration with a focus on muscle stem-cell biology, to be based at the LDI. Unlocking the potential of adult stem cells to replace dead or damaged cells will open up a world of new possibilities in treating and curing many muscle-wasting diseases, such as muscular dystrophy and myopathy.



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**Dr. Jonathan Afilalo** returned to the JGH Division of Cardiology and the LDI in 2012, after completing a two-year combined advanced imaging Fellowship in Echocardiography and Cardiac Magnetic Resonance Imaging at the Massachusetts General Hospital and the Beth Israel-Deaconess Hospital, Harvard University. Dr. Afilalo conducts research on frailty and clinical outcomes in cardiac surgery and is working with colleagues in Cardiology and Radiology to build an academic cardiac MRI program that will establish the JGH as a centre of excellence in the field.

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**Dr. Salvatore DiMaio** joined the JGH Division of Neurosurgery in 2011, as part of the hospital's efforts to establish comprehensive neurosurgical services. Dr. DiMaio specializes in skull base and endoscopic surgery, and cerebrovascular surgery.

# Bringing the best and brightest doctors and researchers to Montreal and Quebec

## 2010-2011



**Dr. Franck Bladou** is an international expert in robotic surgery, as well as a leader in prostate cancer screening, interstitial brachytherapy and surgical quality assurance. He joined the JGH in July 2010, becoming Chief of Urology, as well as team leader of Urologic Oncology. Dr. Bladou is spearheading the development of a prostate cancer focal treatment program, an innovation not only at the JGH but within Quebec. This new approach will allow clinicians to treat only the affected part of the prostate, rather than the entire gland, and will be complemented by clinical studies to determine the best treatment protocol, along with other therapeutic options, to adapt to the different types of prostate cancer.



**Dr. Nathalie Johnson** is a clinician scientist with clinical training in hematology/oncology and a PhD in pathology. She joined the JGH Division of Hematology in January 2010. Dr. Johnson's research focuses on determining the genetic abnormalities associated with a poor response to chemotherapy in lymphoma, especially in adolescent and young adult patients. She is also responsible for the Clinical Flow Cytometry laboratory in the Department of Diagnostic Medicine.



**Dr. Celia Greenwood**, the latest recipient of the Weekend to End Breast Cancer Distinguished Scientist Award, joined the Centre for Clinical Epidemiology at the Lady Davis Institute as Senior Scientist in 2010. She is a statistician in genetics, genomics and genetic epidemiology. Dr. Greenwood uses a wide range of statistical approaches to improve the ability to understand how the genome, together with environmental factors, influences the risks and progression of disease. Recently, she has been involved in a linkage analysis of mammographic breast density and a genome-wide association study of colorectal cancer.



**Dr. Ivan Topisirovic** was appointed an independent investigator at the Lady Davis Institute in February 2011. His research focuses on networks that coordinate various steps of mRNA metabolism with protein synthesis in normal and malignant cells. Dr. Topisirovic hopes this will contribute to designing new therapeutic strategies to efficiently target aberrations in mRNA metabolism and protein synthesis in cancer.



**Dr. Michael Witcher** joined the Lady Davis Institute as Principal Investigator in the summer of 2010. His research focuses on the fundamental aspects of gene conformation, which could lead to new approaches in cancer treatments.

# Providing the finest facilities, equipment and programs to deliver excellence and meet the changing healthcare needs of Quebecers

## 2011-2012



- The opening of three new state-of-the-art facilities on the 10<sup>th</sup> floor of the Segal Cancer Centre: the expanded **Marlene & Joel King Breast Centre**, equipped with the most advanced imaging technology, which will enable the JGH to welcome over 30% more patients, reduce wait times and meet the needs of the ever-increasing number of patients referred each year for early detection of breast cancer and further investigation of breast conditions; the new **Miriam and Sydney Pinchuk Dermatology/Oncology Centre**, which allows Dermatology-Oncology to address the pressing need for research, prevention and treatment of the most common and fastest growing form of cancer in Canada; and the **Peter Brojde Lung Cancer Centre**, a patient-centred facility which provides lung cancer patients with all of the services they need in a single, dedicated location and has already allowed over 200 patients to benefit from some form of complementary therapy that is integrated into their treatment program to maintain their health and enhance their quality of life.
- The new **Evelyn Wajcer and Lawrence Vatch Pulmonary Hypertension Laboratory** is enabling the Division of Cardiology to provide superior, ultra-specialized assessment, care and lifelong monitoring services that are crucial for the survival and quality of life of patients. It also allows the Division to perform complex hemodynamic studies that enhance our current understanding of the mechanisms of pulmonary hypertension, paving the way for new, more effective treatments and procedures and, ultimately, a cure for a disease that relentlessly kills people, many of them young women.
- The newly expanded and renovated **Endoscopy Centre** is a more functional and patient-friendly facility for performing endoscopic procedures, resulting in improved quality of care and safety for patients. It provides more timely access to a procedure that can save lives and is the cornerstone of colorectal cancer prevention and early detection.
- The new **Pre-Surgical Screening Clinic**, located on the 6<sup>th</sup> floor of Pavilion A, has improved the hospital's surgical pre-admission process, ensuring safe and successful outcomes while making optimal use of valuable operating room time. It has resulted in fewer costly delays and cancellations and increased patient satisfaction.
- A new **Intrabeam**<sup>®</sup> device has enabled the Division of Radiation Oncology to be the first in Canada to offer targeted intra-operative radiation therapy (IORT) to patients being treated for early stage breast cancer. This groundbreaking technique significantly reduces treatment time (one-day, single-radiation exposure, compared to repeated visits during 3 to 6 weeks of conventional external radiotherapy), minimizes exposure to radiation and improves patients' quality of life.
- New ergonomic **dialysis treatment chairs** and a **Patient Lift** for the Division of Nephrology's Hemodialysis Unit in Pavilion H have enhanced the quality of care as well as the comfort of patients with advanced renal failure requiring life-saving dialysis treatments on a regular basis.



- The latest generation of **Mobile C-Arm** surgical imaging technology provides advanced image processing capability, power and image resolution which enable surgeons from the Division of General Surgery to perform more complex procedures for more patients and more medical conditions, while reducing the level and frequency of exposure to radiation for patients.
- **Advanced KTP laser surgical equipment** is enabling the Department of Otolaryngology to enhance the treatment of certain conditions of the larynx, such as recurrent respiratory papillomatosis, dysplasia/keratosis, polyps, Reinke's edema, and vascular malformations.
- Ongoing support for innovative programs which cater to the special needs of particular groups of cancer patients and are entirely funded through private donations, such as the **Bell Canada Adolescent and Young Adult (AYA) Oncology Program**, the **Consultation Service for Senior Oncology Patients**, the **Cancer Nutrition-Rehabilitation Program (CNRP)** and the **Louise Granofsky Psychosocial Oncology Program (LG-POP)**.
- Crucial support for the critically acclaimed **Program for Alzheimer's disease and Dementia (PADD)**, which is at the forefront in the early diagnosis, treatment and research on this disease that has the potential to turn into an epidemic of disastrous proportions.
- Ongoing support for the **Goldman Herzl Family Practice Centre's Continual Improvement Fund**, which is used to improve the quality of care through new healthcare programs, staff training and organizational enhancements.
- Ongoing development of the **Edmond J. Safra Stroke Centre and its leading-edge neuroplasticity research program** under Dr. Alexander Thiel, which has led to the development of new treatments for patients in the early stages of a stroke, when the potential for a full recovery is the greatest.
- Ongoing support for the **Lady Davis Institute** and its research into the causes and potential treatments for the most common illnesses affecting us today and in the future, notably the leading-edge clinical work and research being carried out by Dr. Nathalie Johnson (lymphoma), Dr. Celia Greenwood (colorectal cancer), Dr. Ivan Topisirovic (cancer), Dr. Michael Witcher (cancer) and Dr. Andréa LeBlanc (Alzheimer's disease).
- Ongoing support for the Division of Cardiac Surgery's **robotic surgery training program**, enabling a growing number of surgeons and nurses to be trained in the use of the da Vinci surgical robot for mitral valve replacement and other minimally invasive cardiac surgery procedures. A replacement **high-definition camera head** was also purchased for the da Vinci robot, which was acquired in 2007 thanks to the generosity of private donors and has allowed the JGH to offer a minimally invasive option for complex surgical procedures.
- Establishment of the **King Family Fellowship in Thrombosis Medicine**, which provides support for the recruitment and training of fellows in Thrombosis Medicine. The research conducted by these fellows will focus on thrombosis (blood clots) in young adults, persons with lupus anticoagulant / antiphospholipid antibody, or women with pregnancy-related thrombosis.



- A new **Greenlight Laser** has given the Division of Urology the ability to treat patients suffering from an enlargement of the prostate gland with minimally invasive therapy. This results in substantially less bleeding, many fewer side effects and much quicker recovery, compared to traditional transurethral resection of the prostate.
- Development of a **Myeloproliferative Neoplasms Clinic**, based at both the JGH and St. Mary's Hospital, which will allow the Division of Hematology to provide consultation services to patients with diseases of the bone marrow in which excess cells are produced, such as polycythaemia vera, essential thrombocytosis and primary myelofibrosis. This Clinic will continuously improve patient outcomes and quality of life through advanced clinical research.
- Hospital-grade **furniture and television sets** for various nursing lounges, care units and family rooms throughout the hospital have enhanced both staff and patient's comfort and safety.
- The **nCounter Analysis System**, an innovative technology, provides a cost-effective way to easily profile hundreds of gene transcripts, and to copy number variations or miRNAs simultaneously with high sensitivity and precision. It has provided LDI researchers with a valuable tool for basic and translational research, including biomarker discovery and validation.
- With its new **Whole Blood/Optical Lumi-Aggregometer**, the Core Lab can now measure platelet function on patient samples directly in whole blood, eliminating the time and expense of preparing plasma and substantially improving the turn-around time for results.
- **Advanced vital signs monitors**, which automate the process of measuring blood pressure, temperature and oxygen saturation for both routine assessment and continuous monitoring of vital signs, have improved productivity as well as patient safety while affording nurses and doctors with more time to spend with patients.

# Providing the finest facilities, equipment and programs to deliver excellence and meet the changing healthcare needs of Quebecers

## 2010-2011



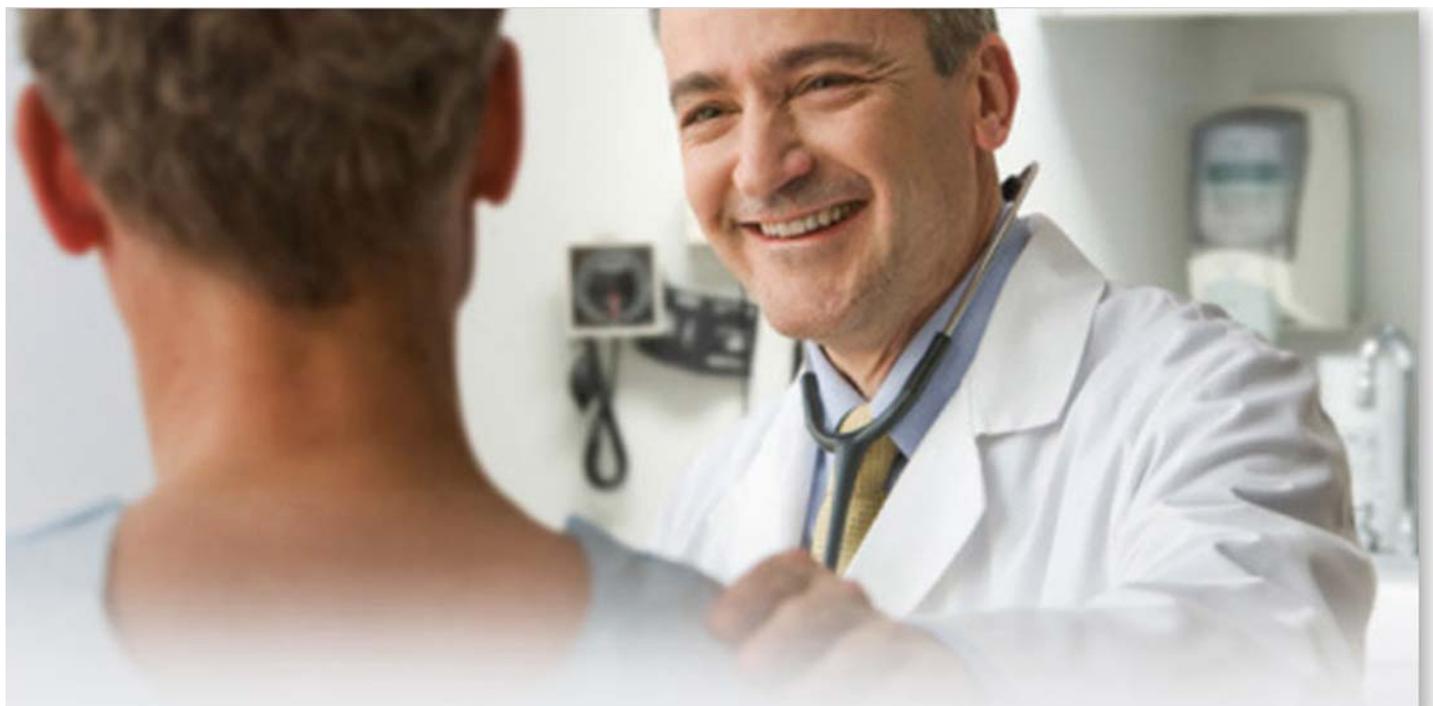
- The **Cons Family Geriatric Unit** is the first of its kind in Quebec, with unique features that include separate nursing stations for patients who are elderly and frail and for those with cognitive impairment, an enhanced rehabilitation room, a sensory stimulation room and an inclusive, family-oriented environment. It has significantly improved the quality of life and care for one of the most vulnerable and fastest growing segments of the population.
- **Consolidation of all obstetric-gynecologic services in modern, expanded facilities in Pavilion H** has allowed for improved coordination of care and more comprehensive long-term management of patients, as well as making life much easier for patients. The Department of Obstetrics and Gynecology has a unique role in being a Centre of Excellence and the primary access point to health care for thousands of women, and this initiative is enabling it to expand its contribution to the hospital and the community in a marked way.
- Since as many as 30 per cent of Montrealers lack a family doctor, the extensive renovations that created a home for the **Herzl CRIU Walk-in Centre** are among the outstanding achievements resulting from donor support. This new Centre allows the entire community to take advantage of faster and easier access to family doctors 365 days a year without an appointment or a prior telephone call. They come to the Centre for medical problems that require prompt attention, but may not be serious enough for a visit to the Emergency Department.
- **Specialized equipment and instruments for minimally invasive spinal surgery** have enabled JGH neurosurgeons to precisely target specific areas of the spine, while disturbing as few of the tissues and muscles as possible. This results in less postoperative pain, reduced blood loss, minimal scarring, quicker recovery time and a speedier return to normal functioning for the growing number of people who suffer from spinal injuries and back problems.
- **New endoscopic ultrasound (EUS) equipment** has enabled the Division of Gastroenterology to provide state-of-the-art diagnosis, staging and treatment of various gastrointestinal pathologies—including colorectal cancer which is the second most common cause of death from malignancy in Canada—with increased precision and efficiency. EUS is the single most important new technological development in gastroenterology since the introduction of the fiberoptic endoscope.
- **Two new digital mammography units** have given the King Breast Centre the ability to provide enhanced and safer early detection of breast cancer for the growing number of women and men who are referred there each year. The King Breast Centre has been designated by the Government of Quebec as a Breast Referral and Investigation Centre (CRID), one of five such centres in Montreal. It plays a key role in the Quebec Breast Cancer Screening Program (PQDCS).

- **Advanced gastroscopy equipment** for the Division of General Surgery is contributing to the ongoing development of a Centre of Excellence in Minimally Invasive Surgery (MIS) at the JGH. The use of MIS techniques, such as laparoscopy, robot-assisted surgery, and endovascular and endoscopic surgery, results in significantly shorter hospital stays, a decreased risk of complications, quicker recovery time and a speedier return to normal functioning. By lessening the impact and stress of surgery, MIS also provides the means to operate on patients, such as the elderly, for whom traditional open surgery carries high risk factors.
- Upgrading the Department of Radiology with the latest in **fluoroscopy equipment and digital technology** for improved diagnostic imaging at the Carol & Leonard Berall Digital Imaging Centre.
- Additional **RapidArc** software licenses and modules allow the Division of Radiation Oncology to deliver radiation in steady, non-stop rotations of an arc around the patient, resulting in greater treatment speed and precision with less exposure to radiation. Newly developed computer codes also allow the best course of radiation treatment to be determined within minutes, rather than days. This technology upgrade not only helps to cure considerably more cancer patients, but reduces side effects.
- Creation of the **Martin J. Black Endowment Fund for Fellowships in Head and Neck Oncology**—the first of its kind in Quebec—which provides a permanent means of supporting the recruitment and training of skilled head and neck oncology surgeons, not only at the JGH but across Quebec.
- Establishment of the **Marjorie and Gerald Bronfman McGill Chair in Muscle Stem Cell Research** has enabled McGill University and the JGH to jointly recruit and support Dr. Colin Crist, an established and emerging world-class researcher, to develop a program in muscle regeneration with a focus on muscle stem cell biology, to be based at the Lady Davis Institute. Unlocking the potential of adult stem cells to replace dead or damaged cells will open up a world of new possibilities to treat and cure many muscle-wasting diseases, such as myopathy and muscular dystrophy.
- Development and ongoing support of a **robotic surgery training program** for the Division of Cardiac Surgery has enabled JGH surgeons and nurses to be trained in the use of the da Vinci surgical robot for mitral valve replacement and other minimally invasive cardiac surgery procedures. The new **database tracking program** represents a breakthrough tool with which to assess and compare outcomes of various cardiac procedures across the province, paving the way for the development of greater expertise and more successful treatments.
- A new **high-speed automated registration system** has enhanced patient flow, improved the quality of care and patients' experience, increased efficiency and decreased waiting times in the Division of Endocrinology—one of the busiest services in the JGH, with over 30,000 patients per year. It has also created a virtually paperless environment.

These achievements are wonderful examples of how the JGH Foundation can partner with committed donors to build on government funding to improve access and provide the best care for all Quebecers. Thousands of patients and their loved ones have already benefited from these major advances, and many more stand to benefit in the years to come, as we continue our work of empowering the JGH staff to be the best they can be.

However, challenges are posed by a difficult economy, by the need to keep pace with rapidly evolving medical technology and new developments in the field of medicine, and by a growing demand for enhanced services stemming from the rising prevalence of chronic and age-related diseases. This will require renewed effort by all those who care about the JGH, their own health and the well-being of their families and our entire community. Our current [Vital Initiatives](#) are part of our plan to build the hospital of the future with the very best people, equipment, facilities and programs to meet the changing and ever-increasing healthcare needs of Quebecers and overcome the challenges facing our healthcare system as a whole.

You have the power to make a difference. You have the power to ensure that the JGH and its staff have the facilities, equipment and programs they need to deliver excellence. You have the power to help us achieve better health and better healthcare for all, now and in the future. **You** have the power to heal!



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