ANNUAL REPORT

DIVISION OF GERIATRIC MEDICINE

JEWISH GENERAL HOSPITAL

January 1 – December 31, 2015

Ruby Friedman, M.D.
Site Director

José A. Morais, MD, FRCPC
Director
McGill Division of Geriatric Medicine

July 2016
Annual Report  
Division of Geriatric Medicine  
Department of Medicine - Jewish General Hospital  
January 1 - December 31, 2015

SUMMARY

We continue to fulfill the mandate of 1) delivering high-quality care to our elderly patients, 2) providing excellent teaching milieu to medical students and residents, 3) performing relevant clinical research on aging by our division members and 4) innovating in services to the elderly population. We are particular proud of the achievements in reducing waiting time to access our outpatient services and the success so far of the Elderly Friendly Hospital implementation program at the JGH (Approche adaptée pour personnes âgées, APA).

The Division of Geriatric Medicine continues to respond to the increasing demands for clinical services. The Division of Geriatrics has agreed to care for 22 patients who require relocation to a LTC facility on a dedicated ward. This should improve the care required for these patients. Patients are identified on every medical/surgical unit for transfer to this ward. Access to the acute wards from the ED should be improved. The Division’s areas of clinical activities include the Geriatric’s Ward 6NW, the outpatient Geriatric Assessment Unit, Memory Clinic, Senior Oncology Clinic, the Geriatric Consultation Services in the Emergency Room, and in the hospital. To improve the efficiency of the Division’s many activities, we have assigned a physician coordinator for each of them. Thus for the 6NW Ward, the Medical Director will remain Dr. Ruby Friedman; for consultation services, Dr. Paul Heilpern; for out-patient clinics, Dr. Susan Gold; for Memory Clinic, Dr. Susan Vaitekunas and Dr. Howard Chertkow (Neurology); for Geriatric Oncology Clinic, Dr. Doreen Wan-Chow-Wah & Dr. Johanne Monette. Dr Yin has assumed the responsibility of the Undergraduate Geriatrics Clerkship program at McGill. There have been major changes in the administration and teaching of this clerkship. Dr Yin provides an important link to the Department of Family Medicine.

The Division continues to be jointly run by Dr. Ruby Friedman, JGH Site Director, and by Dr. José A. Morais, Director, McGill Division of Geriatric Medicine.

The implementation in 2015 of Bill 10 and Bill 20 will result in major changes across the healthcare system. Division members sit on several committees in the hospital and at McGill that are dealing with these issues. With regards to Bill 10 and the realignment of healthcare institutions, the Division of Geriatrics is well positioned. Division members already have cross-appointments to several of the institutions in the newly formed Centre intégré universitaire de santé et de services sociaux (CIUSSS) du Centre-Ouest-de-l’Île-de-Montréal (Maimonides Hospital, Jewish Eldercare, CSSS Cavendish). The implications of Bill 20 are not known at this time.

1. Research and publications:

Dr Elise Levinoff’s research on the prevalence and management of hospitalized patients with delirium continues to progress.
Research in neurobiology and dementia, health services, frailty, pharmacoepidemiology, long-term care, and education continue to represent the existing strengths of the Division with programs that cross hospital, department and university lines and in some cases integrate bench-to-bedside-to-population. Oncology and older persons, as well as empowering primary care to manage elderly patient with chronic diseases are emerging interests. There is increasing collaboration with colleagues from Quebec, Canada and internationally. Members of the Division lead major research programs with funding from the Canadian Institutes on Health Research (CIHR) and the Fonds de la recherche du Québec – Santé (FRQS). The list of publications and grants for our Divisions members are included in Section II.

2. Teaching and learning (undergraduate and graduate):

Number of degrees awarded; particular initiatives and achievements and innovations related to teaching programs; initiatives with respect to graduate supervision; and extraordinary student success stories should be included.

Geriatrics is a mandatory rotation during the 4th year of medical clerkship. Our teaching responsibilities have increased markedly since we have 50% more medical students on rotation. This year, we had 2 residents in the Geriatric Fellowship program and in the Care of the Elderly Program (Family Medicine stream) rotating at the JGH. We also have many Internal Medicine and Family Medicine residents spending a month rotating in the Division. The student evaluations have been very good to excellent and an increasing number of students have expressed interest in geriatric medicine as a career. Those of the Residents are also very positive. These positive evaluations are a testimony to the hard work and dedication of all the teachers in our Division. An annual Prize is given to a Medical Student with a superior performance in the rotation during the Graduation Day in May of each year.

3. Involvement in the community:

Involvement in both the academic field of the unit and involvement in the larger non-academic community by either the unit or individuals (faculty, staff, and students) should be included. Examples are: conferences organized; outreach programs (local, national, and international) related to the academic mission of the unit as well as volunteer activities not directly related to teaching and research.

The Division, once again, had a very successful public lecture, the Goldie Raymer Memorial Lecture on November 2, 2015. The topic was Less medicine, More Health presented by Dr Gilbert Welch. Over 300 people attended and there was widespread coverage in local newspapers and on radio.

The McGill Division of Geriatrics held 5 Grand Rounds that are open to public as well as to physicians of all backgrounds and allied health professionals. Half of these conferences took place at the JGH. Some of our physicians act as consultants at Long Term Care Institutions and Rehabilitation Centers of the CSSS Cavendish and de la Montagne.
4. Partnerships:

At the level of the JGH, we continue working with the Departments of Nursing and Social Services in the implementation of the Approche adaptée à la personne âgée (AAPA). Significant progress in the implementation of the AAPA (Approche adaptée à la personne âgée) throughout the JGH has been made. The goal of this program is to introduce principles of elder care throughout the hospital.

We are pleased to announce the hiring of Isabelle Lamontagne as coordinator of the H.E.L.P. Program (Hospital Elder Life Program). This program, developed at Yale University, utilizes specially trained volunteers to assist the elderly in maintaining cognition, mobility and nutrition. This program has been in over 200 hospitals in the USA for the last 20 years. The program has been shown to reduce the incidence of delirium and to reduce length of stay. The JGH is the first hospital in Quebec and the second in Canada to implement this program. Our gratitude to the JGH Auxiliary for supporting this program.

We continue to collaborate with the Department of Family Medicine, as part of the provincial Plan Alzheimer, to implement a memory clinic in their UMF/GMF. The Division works also in partnership with the Solidage Research Group (Dr. Johanne Monette, co-director) to innovate in the services and care to elderly patients.

At the level of the RUIS McGill, several members of the Division participate in the Subcommittee of Aging and the Center of Excellence in Aging and Chronic Disease to assist in their orientations and to collaborate in projects. At the provincial level, we are also participating in the orientation of the MSSS-Table Nationale of Aging to improve the services and care to elderly patients and the Working group on the Implementation on the provincial Alzheimer Plan.

5. Milestones:

A major development this year has been the introduction of the Approche adaptée à la personne âgée (AAPA). This is a hospital wide program to introduce principles of geriatric care on all units. The main focus of this program is on delirium diagnosis and management, mobility and nutrition. Dr. Ruby Friedman is co-chair along with Judy Bianco (Director of Nursing for Medicine and Geriatrics), Sonia Joly (Nursing), and Maxine Lithwick (Director of Social Services). A large dedicated multidisciplinary team has played a leading role in the introduction of this Program. We have been recognized by the Agence de Montréal to be leaders in the implementation of this Program that could be the most advanced in its introduction onto the clinical wards of any hospital on the island of Montréal.

The Geriatric Ward 6 NW is a fully renovated 32-bed unit which incorporates the principles of an “elderly friendly hospital”. The great concern in previous years was the increasing length of stay of patients on the Ward. This was mostly attributed to inefficiencies in the Program 68 placement process. This year we have seen a marked improvement in this process, now called PHPE for Programme d’Hébergement pour Évaluation. Dr. Friedman continues to work closely with nursing administration and the director of social service to ensure the functioning of this program.
In response to the increasing request from the community, the hospital and the Emergency Room, the Outpatient Geriatric Clinics have markedly reduced waiting times for patient evaluation. The Outpatient Clinics include the Geriatric Assessment Unit, the Memory Clinic, and the Senior Oncology Clinic. The waiting period for new requests for consultation has been reduced to 2-4 weeks. Furthermore, the Rapid Response Clinic has been established whereby patients who require urgent follow-up from the Emergency Room, or are post-discharge, can be evaluated within days.

In the past year, the Geriatric consultation services in the Emergency Room and for the hospital Wards have been reorganized. For hospital ward consultations, 90% are completed within 48 hours. A similar percentage is achieved for ER consultations but within 24 hours.

6. New hires, promotions, and retirements:

The Division welcomes Dr Olivier Beauchet, Professor at McGill University, Director of the RUIS McGill Centre of Excellence on Aging and Chronic Disease - CEViMaC. Dr Beauchet is an internationally recognized researcher in the evaluation of gait disorders in the elderly. Dr Beauchet will be establishing a Falls and Gait Disorders Evaluation Clinic at the JGH.

7. Honours, awards, and prizes:

LEBLANC, Andrea
2015-2022 - James McGill Professor

8. Fundraising: N/A

SECTION  I - DIVISION STATUS UPDATE

1. Mission and objectives of the Division

The Mission of the Division is to provide comprehensive, compassionate, client-centered care to frail older persons and their caregivers to enhance their health and quality of life.

Our objectives are:

- To provide exemplary geriatrics comprehensive assessment, consultation and direct care to our inpatient and outpatient elderly population
- to provide excellent education and training of students and residents to enhance their capacity to take care of future older persons
- to provide leadership in ongoing research to advance knowledge of aging and aging related diseases and their management

2. A nominative list of academic staff, their academic rank

Dr. José Morais, Director, McGill Div. of Geriatric Medicine, Associate Professor, Active
Dr. Ruby Friedman, Site Director, JGH, Div of Geriatric Medicine, Associate Professor, Active
Dr. Olivier Beauchet, Professor, Active
Dr. Nacera Belkous, Faculty Lecturer, Active
Dr. Susan Gold, Assistant Professor, Active
Dr. Paul Heilpern, Assistant Professor, Active
Dr. Elise Levinoff, Assistant Professor, Active
Dr. Johanne Monette, Assistant Professor, Active
Dr. Sanda Popescu-Crainic, Active
Dr. Susan Vaitekunas, Faculty Lecturer, Active
Dr. Haibin Yin, Faculty Lecturer, Active
Dr. Sylvia Marques, Faculty Lecturer, Leave

**Associate Members**
Dr. Yves Bacher, Active
Dr. François Béland, Active
Dr. Howard Bergman, Active
Dr. Howard Chertkow, Active
Dr. Shek Fung, Active
Dr. Francine Gaba, Active
Dr. Gary Inglis, Active
Dr. Nadine Larente, Active
Dr. Andréa Leblanc, Active
Dr. Ziad Nasreddine, Active
Dr. Hyman Schipper, Active
Dr. Patrice Tremblay, Active
Dr. Isabelle Vedel, Active
Dr. Doreen Wan-Chow-Wah, Active

**SECTION II - GRANTS, PUBLICATIONS, AND SERVICE OUTSIDE OF McgILL**

1. **Grants and awards received**

**BERGMAN, Howard**

Optimisation de la valeur des soins aux patients par une organisation agile du système hospitalier. Institut Lady-Davis de l’HGJ. Beland F (PI). Bergman H (a co-investigator) in 2 themes: Quality of Care; Clinical and management decision processes. FRQS Projet de développement stratégique innovant, $1,400,000 ($350,000/year). 2012-2016


Assessing care models implemented in primary health care for persons with Alzheimer’s disease and related disorders. Canadian Team for Healthcare Services/System for Improvement in Dementia Care/Canadian Consortium on Neurodegenerative Disease of Aging (CCNA). Bergman H & Vedel I (PI), et al. CIHR, $1,200,000. 2014-2019


Developing a common vision for primary care in Quebec. Law SK (PI), Bergman H, Weinstock DM. CIHR. Health Services and Policy Research, $10,000. 2015-2016

CHERTKOW, Howard

Canadian Consortium on Neurodegeneration in Aging (CCNA). Chertkow, H. (Scientific Director). CIHR (Canadian Institutes of Health Research) and Partners, 34.5 million/5 years. 2014-2019


The impact of beta-amyloid burden on cognition in normal aging. Joubert, S (P.I.), Bocti, C., Chertkow, H., Holcroft, C. CIHR (Canadian Institutes of Health Research) operating grant, $645,866. 2012-17
Anomia in Alzheimer's Disease: Untangling semantic components and delivering therapy with rTMS. Chertkow, H. (P.I.), Soucy,J., Thiel, A. CIHR (Canadian Institutes of Health Research) operating grant, $153,300/year. 2012-15

Virtual reality based spatial memory intervention for patients with Mild Cognitive Impairment. Bohbot,V (P.I.), Bherer, L., Chertkow, H., Gauthier, S., Lerch, J., Rajah, M. CIHR (Canadian Institutes of Health Research) operating grant, $197,225/year. 2012-16

LEBLANC, Andréa
Regulation of prion protein expression, trafficking, and function. Leblanc, A (PI). CIHR, $137,916. 2010-2015


MORAIS, JOSÉ
FRQS Provincial Network Funding Program to the Quebec Network for Research on Aging (RQRV).
PI: Pierette Gaudreau, José A. Morais, Co-applicants: 15 researchers from various Quebec institutions, 04/2012-03/2016, $900,000/yr

PI: Nancy Mayo and Jose A. Morais, 06/2015-07/2016, $50,000

CIHR - Partnerships for Health System Improvement (PHSI). Towards an Elder-Friendly Emergency Department: Partnerships for Better Pain Management following a Fracture

FRQS – RQRV – Faisabilité et contrôle du diabète de type 2 avec la combinaison d’une alimentation contenant des glucides à index glycémique faible et d’un entrainement par intervalles chez la femme âgée diabétique.

FRQS – CMDO – Étude pilote du pancréas artificiel pour patients diabétiques de type 2.
PI : Rabasa-Lhoret R. Co-PI : Carpentier A, Morais JA, 06/2015 – 05/2016, $15,000

CIHR - Measurement of Frailty to Identify High-Risk Elderly Patients Referred for Surgical and Transcatheter Aortic Valve Replacement

SCHIPPER, HYMAN

Mary Katz Claman Foundation: 1) Alzheimer Research Centre IV; 2) JGH Alzheimer Risk Assessment Clinic IV. July 2014-June 2015


2. Scholarly works published in the 2015 calendar year

Beauchet, Olivier


Bergman, Howard
Chertkow, Howard


Levinoff, Elise

Monette, Johanne


Morais, Jose A


Schipper, Hyman M.


Chen-Roetling J, Song W, Schipper HM, Christopher S, Regan CS, Regan RF. Astrocyte over expression of heme oxygenase-1 improves outcome after intracerebral hemorrhage. Stroke 46:00-00, 2015; DOI: 10.1161/STROKEAHA.115.008686.


3. Academic and community engagement service outside of McGill by individual members of the unit

Conferences

Bergman, Howard
International Academic Presentations

Cardiovascular disease in the context of Chronic Disease management: The evolving role of Family Medicine and the relationship with specialty care. 2015 International Cardiovascular
Frontiers. Shenzhen, China (July 17-19, 2015)

Resident Curriculum in Family Medicine at McGill University. 4th National Conference of Primary Health Care. Shenzhen, China (July 31, 2015)

Le défi de l’utilisation de la fragilité comme outil clinique en onco-gériatrie. 11èmes Journées Nationales Toulouse SoFOG (Société Francophone D’Onco-Gériatrie). Toulouse, France (Octobre 7, 8 & 9, 2015)

**National Academic Presentations**

The Management of Older Persons with Dementia: The Challenge of Coordinated Models of Care between Primary and Specialty Care. The 1st Annual Dr. Peter McCracken Memorial Lecture in Geriatric Medicine. Alberta (May 5, 2015)

Frailty. Geriatric Senior Core & Resident teaching. Alberta (May 5, 2015)


**Chertkow, Howard**

Formal Presentations, Rounds, Lectures and Invited Talks


“Memory and Dementia assessment - how family physicians and specialists can best work together” Family Medicine Grand Rounds. April 28, 2015.


“Will biomarkers be a game changer in Alzheimer Disease?” University of Toronto City-Wide Neurology Grand Rounds. Toronto: October 23, 2015.

Public Lectures:


LeBlanc, Andrea
Identification of early therapeutic targets against neurodegeneration in Alzheimer Disease. Medical Sciences Seminar Series, Northern Ontario School of Medicine, Sudbury, Ontario. January 22, 2015

A common pathway linking neuronal inflammation to Caspase-6-mediated axonal degeneration in the neurons of Alzheimer disease. 12th International Conference on Alzheimer’s & Parkinson’s Disease. Nice, France, March 18, 2015

CIMA-Q (Consortium sur l’identification précoce de la maladie Alzheimer au Québec). Réunion annuelle AFIRMAQ, April 20, 2015, CRCHUM, Montreal


Morais, José
Keynote Speaker

Invited Speaker
Vlh IIAPC Congress. Healthy aging: a rocky road from population data to personalized medicine. Morais JA and Gaudreau P. Hyatt Regency Montreal, August 21, 2015


Committee Work

Bergman, Howard
2010-present Co-honorary President, Société francophone d’oncogériatrie

Chertkow, Howard
2014 Scientific Director, Canadian Consortium on Neurodegeneration in Aging (CCNA)
A considerable effort in the next five years will go into my coming position as Scientific Director of the Canadian Consortium for Neurodegeneration in Aging (CCNA). This is an administrative position, but the CCNA is being established as a 34.5 million dollar five year grant via CIHR. I submitted the LOI in May 2013, which was approved, and the full grant was approved in March 2014. As PI of the CCNA application, I am Scientific Director of CCNA and the administrative centre has been established at McGill at the Lady Davis Institute. There are 40 co-applicants from across Canada, and 340 researchers (the entire Canadian neurodegenerative diseases research community!) involved in this application.

2012 Executive member (elected), ISTAART (Alzheimer's Association International Society to Advance Alzheimer's Research and Treatment, a professional society for individuals interested in Alzheimer's and dementia science).

2011 Member of the Executive committee (representing CIHR and Canada), Alzheimer’s Disease NeuroImaging Initiative (ADNI).

LeBlanc, Andréa
Committees
2013-2016 Co-Director of CIMA-Q (Consortium pour l’identification précoce de la maladie Alzheimer au Québec)
2013-2016 Theme leader for CIMA-Q (Consortium pour l’identification précoce de la maladie Alzheimer au Québec) Molecular mechanisms of disease and Biomarkers section
2013-2016 Co-Director, Cognition axe, Réseau Québécois de la Recherche sur le Vieillissement

Morais, José A
Associate Director, Quebec Network for Research in Aging – FRQS
President of the Canadian Geriatrics Society
Member of the Organizing Committee of the 35th ASM of the Canadian Geriatrics Society.
Montreal

Reviewer
American Journal Clinical Nutrition
Journal of Nutrition Health and Aging
Member of the Editorial Board of the Canadian Journal of Geriatrics
Member of the Scientific Committee of the Annales de Gérontologie (France)
Submitted by:

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