



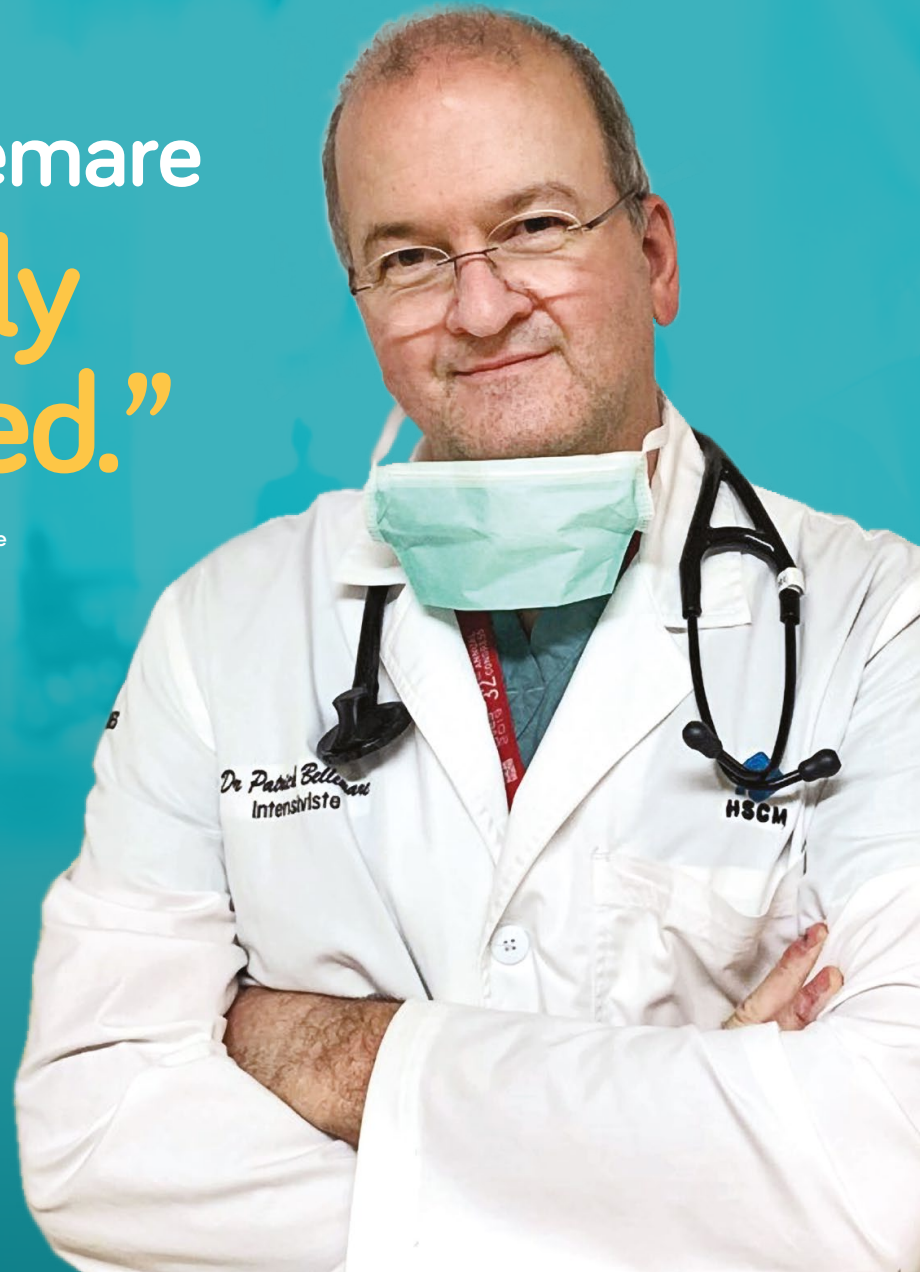
MONTREAL  
SACRÉ-CŒUR  
HOSPITAL  
FOUNDATION

# LIAISON

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## Dr. Patrick Bellemare “I feel deeply transformed.”

— Dr. Patrick Bellemare, Medical Chief of Intensive Care  
for the CIUSSS du Nord-de-l'Île-de-Montréal



# 45 YEARS

OF COMMITMENT

> In 1976, our Foundation was born from a legacy and a willingness. **Must read!**

## In this issue:

- > The future trio of research stars
- > Family portrait
- > The Gala's favourite teams

## Our Foundation was founded on a legacy and a willingness

# 45 YEARS

OF COMMITMENT

**Our Foundation was created by the Congregation of the Sisters of Providence and was made possible 45 years ago through a significant bequest, also known as a testamentary gift.** This gift was made by Mrs. Sophie-Marie Charlebois Letang, widow of Mr. Anselme Letang. Mr. Letang was the founder and president of Letang Hardware, a businessman whose business in Montreal specialized in the import of hardware products.

It was upon the death of Mrs. Letang's son in 1968 that a trust was created and five organizations received considerable sums of money in equal parts, including our Hospital, then called the Hôpital du Sacré-Cœur de Cartierville. The estate was then estimated at more than \$5 million, a colossal amount for that time. A total of more than \$2 million was donated to our Foundation up to the year 2000 through this estate.

Over the years, several other individuals have made significant bequests of several hundred thousand dollars, including Jacques A. Corbeil, J. Abel Fortin, Gemma Moisan, Jeannine Guillevin Wood and more recently Denis Auger and Monique Meunier Cotellesso. It is thanks to these legacies and many others, more modest albeit just as important, that we can ensure continuity and build over the long term.

## Generosity: An important family heritage!



Mr. Guy Blanchard with his mother, sister Marguerite and brother Bernard. (Photo: Courtesy of the Blanchard family.)

**Our Foundation has had the privilege to witness great acts of generosity throughout its 45 years of existence. Here is another wonderful story we wish to share with you.**

**Following the death of Dr. Guy Blanchard in July 2018 at the age of 86, our Foundation learned that it was the beneficiary in his will of a gift valued at more than \$1 million.**

Dr. Blanchard came from a family of philanthropists known for their generosity. "In my family, giving and caring for others have always been core values. Our mother had to provide for us and raise us alone after our father died. It was difficult for her, but she was able to pass these values on to us and that's what inspired us throughout our lives," explained Dr. Blanchard in an interview a few years ago.

With his brother Bernard and his sister Marguerite, he created the Blanchard family chair for teaching and research in palliative care at the Université de Montréal.

### A special attachment to Sacré-Cœur

Dr. Blanchard and his brother did their fellowship in orthopedics at Sacré-Cœur Hospital. Subsequently, both brothers worked in Moncton and returned to the Beauharnois area. Later, the two brothers decided to specialize in New York and then returned to Montreal to open a clinic for the treatment and prevention of baldness, becoming luminaries in the field. At the same time, they continued their hospital practice. It was while working with end-of-life patients that they made the decision to support the cause of research and teaching in palliative care.

### A time for everything

In an article published on March 29, 2016 by the Faculty of Medicine of the Université de Montréal, Dr. Blanchard said, "In life, there is a time to be a student, a time to work, and a time to give back to the younger generation."

**To learn more about making a bequest in your will, contact:**

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Dr. Patrick Bellemare, Medical Chief of Intensive Care



# Looking back on a challenging year



Dr. Patrick Bellemare was the subject of a report on Radio-Canada in April 2020 in which he generously agreed to use two cameras to show us what was happening at the Sacré-Cœur Hospital since the arrival of the first COVID-19 patients, when no journalists or visitors could access the hospitals. **Thanks to him** we were able to get the first images of the major transformation experienced in the Hospital, which highlighted the dedication of our caring experts, our guardian angels, on the front lines to fight the virus. On February 4th, 2021, Dr. Bellemare gave us access once more to a COVID hot zone during a televised episode of "J.E".

**Dr. Patrick Bellemare is an intensive care physician specializing in pneumology at the Sacré-Cœur Hospital and has been practicing for nearly 25 years. He is accustomed to seven-day work weeks and it's not unusual for him to spend close to 100 hours a week at the hospital. However, the arrival of the pandemic and the designation of Sacré-Cœur to receive confirmed cases of COVID-19 placed even greater physical and mental demands on him. Since March 2020, Dr. Bellemare's days have been filled with uncertainties, fears and challenges. It took resilience to get through, especially during the first wave when his team was trying to tame the beast. And it's not over yet.**

## Q: How do you feel after the trying year you've had?

A: All things considered, I'm alive and relatively healthy. I've been tested for COVID-19 several times, so I'm used to it. I actually test myself now. That can give you an idea. It has been physically and mentally very, very trying. Because I have a family as well. My mom is undergoing chemo treatments. I'm part of a group of caregivers. I had to juggle that with putting people with COVID on respirators. It was very, very complicated.

## Q: What has stayed with you from the first wave?

A: A mix of very good and very bad memories. The panic and shock that hit the general population and the medical community as well. When the pandemic hit Quebec, we had the advantage of having an idea of what was happening overseas. We could see how quickly the infection was spreading. The health network and our hospitals had to get organized quickly to think about how to deal with this enemy, taking inspiration from past pandemics and what we knew about viruses that are related to the coronavirus.

## Q: What have been the major challenges for your teams?

A: In terms of infrastructure, we were the least adapted environment in Quebec to deal with the first wave of the pandemic, I think, or one of the least adapted environments, and then we very quickly became the team that did the work most efficiently. Everything had to be rethought: The architectural infrastructure, the ventilation, the simplest bedside procedures, which are more difficult to carry out when you're wearing personal protective equipment. There's also an element of humanity to be kept in mind while everyone is terrified.

Also, for caregivers in a university hospital like ours, we were expected to always know what to do while we were in an unprecedented crisis and were learning in real time.

## Q: How do you prepare for such a pandemic?

A: There was a sense that we would be overwhelmed and that the global supply chain of all medical supplies would be stretched to the limit. We had to think about modern ways of doing things as well as using old strategies and old molecules in case we ran out of supplies. Sometimes we see innovation come from using old drugs but with a different philosophy.

## Q: What is the contribution of the Sacré-Cœur Research Centre, of which you are an associate researcher, in the fight against this virus?

A: There are many jurisdictions in the world where there was immense pressure for the use of hydroxychloroquine (intended for malaria) or colchicine (treatment of gouty arthritis) or antivirals used with other formulations that were being considered in the management of COVID patients. People with vast expertise in research, such as my colleagues Dr. Francis Bernard and Dr. Alex Cavayas, have gotten us involved with groups from around the world to demonstrate that these molecules are either effective or not, and to very quickly focus our care protocols on what works. And that's what we do every day in an intensive care environment.

## Q: What has your experience and research taught you about COVID-19?

A: Looking at the characteristics of our first 70 cases, there are certain phenomena specific to COVID-19 that need to be addressed differently from the regular flu. There are certain circumstances where what we would do for the flu, where the patient is mechanically ventilated, is not appropriate for a COVID case. To come to that conclusion, the two groups needed to be properly described and compared. That's where the expertise of our researchers comes into play. For example, we realized that COVID results in far more thrombosis and that we need to treat that completely differently.

## Q: What else have you learned from the first wave?

A: Unlike the first wave, today we know what we're dealing with. We know how to guard ourselves, how to protect ourselves, while we're treating people who are infected with COVID. We're very aware that there is a high potential for community transmission and if that guard is lowered in the slightest, we see that the infection can be easily spread.

## Q: Is there a light in all the darkness of this pandemic?

A: I remember one Sunday when there were 7 or 8 of us in the hot zone. We had procedures to do. We came up with the idea of using tablets so that we could have patients communicate with their families and we put on some music to listen to while working. Everything suddenly became very relaxed, very serene. This is going to sound silly, but we felt like we were learning how to master the beast, like we were learning how to do it properly to help people get through it. You can't imagine the gratification of seeing someone who was previously on a respirator with multiple organ dysfunctions and a few months later back on their feet and seeing that person intact in every way with no lingering side effects. That he or she will be going back to work. The image that COVID has been given is that it's a disease that leaves permanent side effects on everyone. I'm not sure that's the right image though.

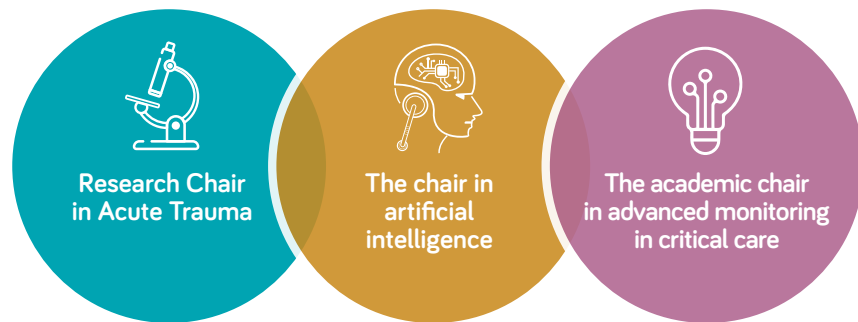
## Q: Would you say you are the same person today?

A: No, clearly not. I feel deeply transformed. I shared with you a slice of my personal life with my mom who is sick. A sick mom needs to hug her children. Mine is particularly warm and I've inherited that from here. I'm the father of four children that I can't hug right now. We've been forced to cool down socially and the pandemic has transformed all of our interactions and all of mine. I don't know what resuming our activities will look like once everyone is vaccinated. I feel like we're going to stay transformed for a long time.



# Sacré-Cœur could have its star trio in research!

Critical care involves several specialties and is a nerve centre at Sacré-Cœur Hospital where the most vulnerable patients, whose health status is most unstable or at risk, converge. What could be more natural than for the Foundation to support the work and creation of these chairs, which are so important for the development of medicine? We really need this star trio, which can lead to important advances in care and treatment.



Research Chair  
in Acute Trauma

The chair in  
artificial  
intelligence

The academic chair  
in advanced monitoring  
in critical care



## The Caroline Durand Foundation Research Chair in Acute Trauma at the Université de Montréal (UdeM)

This Chair was established in February 2017. It is the beginning of a journey that has led to the development of innovative therapeutic approaches that improve the short-, medium- and long-term recovery potential of severe trauma. The work of this chair in acute trauma has inspired two major promising projects: **The creation of a research chair in artificial intelligence and an academic chair in advanced monitoring in critical care.** These three star players could very well become a trio of research stars and shine on the international scene.



## The chair in artificial intelligence

Traumatology will be the first sector targeted by this new chair, with other key sectors gradually being integrated into the activities. Thanks to the use of artificial intelligence, it will be possible to offer individualized care according to the particularities of each patient admitted to the trauma program, one of Sacré-Cœur's major specialties. More concretely, all the data collected throughout the patient's care, that is, from arrival by ambulance to the end of rehabilitation follow-up outside of our hospital services, will be integrated into a shared database to enable algorithms specific to artificial intelligence to make predictions about the patient's life and care trajectory.



## The academic chair in advanced monitoring in critical care

This chair will provide an abundance of quality data that will enrich the work of the artificial intelligence chair team. It will help to maintain the vitality of critical care, welcome international doctoral students and promote original projects. It will promote innovation and the influence of critical care at Sacré-Cœur, a leader in acute care in Quebec.

**Sacré-Cœur's critical care teams have developed extraordinary skills and expertise; we have no doubt that these three chairs will be a great success! Here are a few of them:**

- **Critical care** is a clinical and academic hub.
- **14 specialists in critical care**, a discipline in which they have acquired super-specialized training.
- **The team's high profile in several sectors:** complex mechanical ventilation, advanced neuro-monitoring for neurological injuries, specific support for spinal cord injuries and organ donor maintenance medicine, etc.
- Tertiary and quaternary **trauma reference centre** for a pool of 2 million people.
- **Centre of expertise and reference** within our CIUSSS.
- Sacré-Cœur has **three teaching units** for critical care medicine and offers **160 internships** for resident students.
- A very active critical care research team has been involved in the publication of **120 manuscripts** over the last three years.

"Artificial intelligence requires an abundance of quality data and this is a major objective of the project of the academic chair in advanced monitoring. The context of the pandemic is a flagrant example of the relevance of linking artificial intelligence to human judgment for quickly resolving research and clinical issues, in connection with a resource pool that is not unlimited."

— Dr. Louis De Beaumont, clinical neuropsychologist, full-time researcher and holder of the Caroline Durand Foundation Research Chair in Acute Trauma at UdeM.



## DID YOU KNOW ?

A research chair is an entity that is financially supported by a specific fund that contains the amounts needed to remunerate a chairholder and to conduct research and training activities for young scientists. **The creation of a chair marks a long-term commitment to invest time and money in the advancement of a sector of excellence.**

Our Foundation provides financial support to several projects of the 17 existing research chairs linked to the CIUSSS NÎM\* Research Centre. Many researchers are also active physicians who have their practices at Sacré-Cœur. The work of a research chair translates into:

- Scientific progress at a very high level
- Improving research training
- The significant increase in innovation and knowledge transfer
- Increased international exposure
- An outstanding contribution to the improvement of treatment and patient care

TOGETHER, WE CAN DO MORE!

## \$60,000 donation from Dymedso: 4 new devices for the treatment of lung infections

Thanks to Dymedso, a **Montreal-based medical technology company** and one of its partners, Les entreprises Bold Capital, Sacré-Cœur Hospital has four state-of-the-art devices using acoustic waves for the treatment of respiratory diseases and lung infections, including those related to COVID-19.

Commonly referred to as “frequencer” in Quebec healthcare institutions, a total of 24 such devices have been delivered to 12 hospitals in the province. “Clinical advances show that non-intrusive treatments, such as the acoustic wave treatment used by the frequencer, increase the medical success rate and significantly reduce the risk of complications for patients,” explained Dr. Simon Phaneuf, emergency physician and medical director at Dymedso.



With the increasing number of hospitalizations related to COVID-19, the use of these devices will be an integral part of an effective and safe treatment that could help save lives. Entirely developed in Quebec, the technology uses **acoustic waves to clear the airways and promote bronchial drainage**, acting on both the lungs and the airways where mucus accumulates. The device allows preventive and targeted treatment of the most affected areas of the lungs, thus reducing the risk of complications.



## 2020 Gala des Émilie: A tribute to our healthcare heroes

During the Gala des Émilie on **Saturday, December 5**, the Foundation took the opportunity to highlight the exceptional work of its healthcare heroes: the caring experts at Sacré-Cœur and Albert-Prévost. The CIUSSS NÎM’s senior management had initially identified **17 teams** made up of numerous individuals who have distinguished themselves through their inventiveness, resilience, dedication and work behind the scenes. **“Several sectors, from laundry to intensive care, were involved in the fight against the virus. What a great demonstration of solidarity!”** said Penelope McQuade, spokesperson for the Foundation, who hosted the virtual evening. While we would have liked to highlight the efforts and dedication of everyone in the battle against COVID-19, the work of four teams from Sacré-Cœur Hospital that was highlighted in particular.

Discover these 2020 *Coups de Cœur* through their tribute videos on [fondationhscm.org](http://fondationhscm.org).

## Organize your own fundraiser for the Hospital!

This year, would you like to organize an activity and encourage your friends and family to make a donation? For example, you could collect donations on your birthday as gifts!

For more information, contact Tania Trottier-Pérusse at 514-338-2303, ext. 3269



Thank you for  
your support.

### MAKE A DONATION:

- ♥ **Online:** [fondationhscm.org](http://fondationhscm.org)
- ♥ **By Cheque**
- ♥ **By Phone**

Your generosity helps us *transform lives*

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