

Pirogowicz, Theresa

From: Pritzker, Dr. Kenneth
Sent: May 19, 2007 4:48 PM
To: Mapa, Joseph - President and CEO of MSH; Stationwala, Altaf
Subject: Breast cancer Diagnostics in Newfoundland, Mount Sinai Hospital

Joe, Altaf,

All week there have been news stories about Newfoundland's problem and that reference testing was done at Mount Sinai Hospital.

The impression given was that Mount Sinai's services were routine and perhaps trivial, but that's far from the case.

Briefly, we were asked on short notice 18 months ago to take on this task. Immediately we recognized its importance and sensitivity.

Before starting we checked our protocols (which are quite complex) to ensure that no one anywhere could question our techniques and controls.

The work took three months including the December holiday period necessitating technical overtime and as well as many hours of Professional time.

Great credit is due to Brendan Mullen, Frances O'Malley, Maria Mendes and our technology staff.

Throughout, I have had conversations and been asked for advice by senior people on all sides of this unfortunate problem including Don Cooke, The Head of pathology in St Johns' , George Tilley, the Head of Eastern Health, and Ches Crosbie, the lawyer representing the patients.

In all this, MSH and PLM have distinguished themselves as a National Resource. This recognition of MSH service quality and willingness to step up beyond ourselves to help solve problems is singular amongst lab departments in Canada.

Its an external recognition that took decades to develop and should be precious for MSH to maintain.

I should mention that two weeks ago , Reinhold Vieth's good work with Vitamin D also was front page. All this is much better than Charles Smith and HSC.

There are lessons here. Lab quality is not instantly recognizable yet it can involve entire sets of disease with beneficial or otherwise consequences.

I'm sure you can appreciate why I have been such a fierce promoter of quality. Within a few weeks, we have seen the consequences dramatically.

The future will bring place labs even more in the spotlight.

This concern for patient safety is the major reason why we have been so resistant to financial pressures to cut corners.

The reviews that have been done this month may not have picked up on this distinguishing feature of PLM. We make it look easy . Its not. It has required the daily and concerted attention of all of our staff.

On a very positive note, this week we took a major step forward to being part of a small but distinguished international group that will improve the scoring or quantitation of the same type of breast markers that are under discussion in Newfoundland.

We think that assessment of these markers can be improved and that we, together with our colleagues abroad, know how to do it .

Success in this project will have immediate major worldwide beneficial impact for diagnosis and therapy of breast cancer .

Think about it. How many other departments, labs or any other type in Canada could make this statement with evidence?

Its certainly gratifying to me and the most meaningful review of our work.

Ken.

Kenneth P. H. Pritzker M.D. FRCPC

Pathologist-in-Chief
Director, Pathology and Laboratory Medicine
Mount Sinai Hospital
600 University Avenue
Toronto, Canada, M5G 1X5

Phone (1)(416) 586 4453
Fax (1) (416) 586 8589

E-mail: kpritzker@mtsinai.on.ca