Seventeen-year-old Ben Landry doesn’t know exactly which career path he will take just yet, but after considering the advice of MCH staff at the hospital’s annual Career Day, he may be better educated about future job prospects and his post-secondary education options.

“I’m really interested in psychology and physiotherapy,” said Landry, a secondary 5 student from Centennial Academy visiting the MCH last Wednesday, “but I still haven’t made a decision.”

It was the same scenario for his classmate Alex Patton, who said he came to the event because of an interest in health sciences, and to explore the options.

For many high school students, deciding which career path to pursue can be a daunting one. Will it be sciences or arts? A three-year professional program or university? With so many options to choose from, it can sometimes be difficult to look past the academic requirements to consider what the day-to-day professional experience of a surgeon, a nurse or a pharmacist might look like.

Students were therefore delighted to be briefed on everything from educational requirements to salary expectations by MCH physicians, nurses and allied health professionals. Among the presenters were Johanne Boyer, Respiratory Therapist, Dr. Sherif Emil, Director of Pediatric General Surgery, Jessika Truong, oncology pharmacist, Vincent Ballenas, Nurse Educator, Demetra Kafantaris, hospital administration, Dr. Pia Wintermark, neonatologist and researcher, and finally Dr. Preetha Krishnamoorthy, who spoke to students about being an endocrinologist.

As the day came to end, many students agreed they were leaving with a better understanding of a career in healthcare, which would ultimately help guide their decision about future education plans.

“Have you ever wondered what it would be like to switch roles with one of your colleagues for a day? Find out what it’s like to spend a week in the life of Dr. Emil, or enter the world of nursing by watching our Career Day videos at Youtube.com/thechildrens.”
We might grumble about the state of the Canadian health care system but when we look around the world, particularly toward developing nations, the vast majority of Canadians have little reason to complain. According to the World Health Organization (WHO), nearly nine million children under the age of five die each year. Around 70% of these early childhood deaths are due to conditions that could be prevented or treated with access to simple, affordable interventions such as clean water and safe housing. Another alarming statistic from the WHO shows children in developing countries are ten times more likely to die before the age of five than children in developed countries.

Children represent the future, and ensuring their healthy growth and development to allow them to attain their optimal achievements ought to be a prime concern for all societies. I am pleased to say that many of the health care professionals at the MCH have devoted their time and energy to significantly improving the health of children in developing countries such as Kenya, Uganda, Gabon, Benin, Tanzania, India and numerous others. I would be remiss in not including in this list the major contributions by MCH staff toward the health of Aboriginal and non-Aboriginal children and their families in remote regions of Quebec though the Northern and Native Child Health Program which was established in the 1960s. Sadly, the conditions that many of the children and adolescents in our remote regions face continue to be not unlike those in the developing world. We need to encompass this population within our Global Health Mandate.

A proud tradition continues
The Montreal Children’s Hospital commitment to improving the global health of children has a long history. In 1968, Drs. Donald and Elizabeth Hillman, along with Dr. Alan Ross and members of the faculty of medicine at McGill University, developed an academic support program that led to the establishment of a new medical school in Kenya, affiliated with the University of Nairobi. Over the past 40 years, many of our health care professionals have taken part in a wide range of initiatives with the aim of transferring knowledge through career coaching, guidance and supervision of clinical care, educational training programs, conferences, workshops and seminars.

In this and the next two editions of Chez Nous, we will share with you some of the stories and experiences of MCH health professionals who have recently completed a mission, exchange or other initiatives that have contributed substantively to improving global child health.

We should all be proud of our team’s contributions and I encourage more of you to take part in such initiatives which reflect positively on the MCH’s role as a major international academic hospital.

Chez nous is published by the MCH Public Relations and Communications office.

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Photography: Daniel Héon

To submit story ideas or texts to Chez nous (next deadline: Feb. 18), contact the Public Relations and Communications office at ext. 24307 or send your email to info@thechildren.com.
Dr. Jean-Martin Laberge: training physicians half a world away

When Dr. Jean-Martin Laberge headed off to Kenya in late January on his 9th mission in as many years, he carried an unusual package with him. Relax – it didn’t set off alarms at Pierre Elliott Trudeau Airport. His luggage was stuffed with about 10 lbs. of Chipits. Chipits isn’t a new medication or a state-of-the-art instrument; it’s those delicious little drops of chocolate that make cookies and muffins oh-so-good!

Go figure: this exotic treat is not readily available in Kijabe and Dr. Laberge’s host Dr. Dan Poenaru has a sweet tooth.

While Dr. Laberge was apparently looking forward to some delicious chocolate chip cookies he was also looking forward to long days in the operating room during his 10-day mission to the BethanyKids Pediatric Surgery Unit of Kijabe Hospital (www.bethanykids.org). Dr. Laberge worked at the hospital along with his wife, plastic surgeon Dr. Louise Caouette-Laberge, who practices at CHU Ste-Justine. The couple self-financed the trip.

“We are simply giving back,” says Dr. Laberge. “We both like teaching – and our children are grown-ups, our youngest is 23. As well, we like to help others. This mission allows us to teach and help.”

Strikingly, Dr. Laberge says the operating rooms in Kijabe are quite similar to those at the MCH, however, the medical supplies are scarce. Dr. Laberge says the surgery team works with a lot of donated equipment. “In the basement of the hospital, there is a huge warehouse of medical equipment – shelves and shelves and shelves of donations,” says Dr. Laberge. “When I need a particular instrument I go down and sift through the mounds and I can usually find what I need, or at least a viable substitute. You have to be a bit like MacGyver when you work there.”

Despite all this, Dr. Laberge says the OR has a nice working atmosphere. Everyone learns to make do with less, he says.

“The hospital is making a big difference. The staff are helping kids who wouldn’t otherwise get care. They don’t refuse a child if they can’t pay the bill, they simply ask the parents to make a token contribution,” says Dr. Laberge.

Dr. Laberge anticipated that, on the trip, he would assist during complicated surgeries and rare procedures not often seen by their OR team. “Kijabe Hospital is a major training centre for surgeons from across Africa. My goal is to pass on as many surgical approaches and techniques as possible so the local surgeons can continue helping kids once I’ve returned to Canada. It is much more efficient to train physicians in their local hospitals than bring them to Canada for training,” notes Dr. Laberge.

Dr. Laberge says he and his wife plan to continue going on one or two missions per year to various countries. “People (in developing countries) are so poor you can’t resist doing something to help. While some people choose to donate money, my wife and I donate our time and skills. The mission serves to highlight for me how spoiled we are in North America,” he concludes.

To learn more or to make a donation go to: www.bethanykids.org.

MUHC Recognized as One of Montreal’s Top Employers for 2011

For the fourth year in a row, the MUHC has earned one of the coveted spots on the list of Montreal’s Top 15 Employers for 2011. The list was published on February 2 in Le Devoir as well as The Gazette, which included a special feature on the MUHC.
Building character: Dr. Louise Auger

By Leila Nathaniel

Dr. Louise Auger is not your typical pediatrician. Born in Quebec City, she studied medicine at Baylor College of Medicine in Houston, Texas, and earned a doctorate in Biomedical Sciences and Fellowship in Critical Care Medicine. She spent seven years working in Kuwait, leaving due to the Gulf War.

Returning to Canada, she has practiced pediatrics at the Montreal Children’s Hospital for the last twenty years and is an Associate Professor of Paediatrics at McGill University. Her work at the Children’s includes founding the Multicultural Clinic in 1996, which provides care to children born in other countries, such as refugees, immigrants and adoptees.

For the past three years, Dr. Auger has travelled for five weeks to teach and practice medicine in developing countries. In 2007 she worked in Mbarara, Uganda, and in 2008 she went to Hanoi, Vietnam. Her most recent trip, in December 2009, brought her to Kilema, Tanzania, sponsored by an NGO called the Canada Africa Community Health Alliance (CACHA). She was the only pediatrician at that hospital, and enjoyed sharing knowledge with the local doctors.

“Whenever you go to a developing country, you bring information they don’t have, but you also learn a lot too,” Dr. Auger explains. “You need to be creative since they don’t have many resources. We learn to do the best we can with the little we have.” As a result, “the doctors are excellent clinicians. They have amazing skills and can diagnose quickly with few or no tests available.”

While it may have been tough, this was not the worst she had experienced, “The patient load was much greater in Mbarara than Kilema, and it was emotionally more difficult. Kilema has a smaller hospital with fewer patients, and living conditions were better because it’s a very fertile area with less malnutrition.”

Dr. Auger compares it to the challenges in Uganda. “There was a fifty-bed hospital for pediatrics,” she says, “but up to 150 patients in those beds! There were up to three children to a bed, and up to six babies on examining tables used as beds. The families were destitute and the illnesses considerably more critical, including severe malnutrition, malaria, AIDS and a host of preventable infectious diseases.”

These weren’t her first visits to developing countries, but Dr. Auger knows these experiences have helped reinforce her personal and professional values. She understands how crucial it is to be conservative in the management of our resources. “We need to be respectful of and preserve what we have, instead of wasting it. I hopefully am able to influence my own children in that respect, and try to do the same in my professional life.”

With that, Dr. Auger says, “I would go back to Africa or any developing country in a heartbeat. I encourage everyone to volunteer in developing countries as it’s a very worthwhile endeavour. It enriches your life, and I feel that it is an experience and a privilege every doctor, resident and student would benefit from.”

Statutory holiday: Monday, Feb. 21

Please note that Monday, Feb. 21 will be a statutory holiday for employees of the MCH, as well as other hospitals of the MUHC. On this date, the hospital will function on a weekend schedule with only essential services maintained. Make sure to advise all patients who are being referred to clinics and diagnostic services without appointments.
Learning about the New MUHC from the inside

The New MUHC project is so big that it is sometimes difficult to digest all the upcoming changes. That is why the Communications team is striving to keep everyone informed. With more knowledge, navigating the changes will be more manageable.

To keep our diverse community informed, we use different communication tools. One of these is the Townhall meeting. Open to all employees, Townhalls are an optimal time for employees to ask questions and get answers. Meetings are held in different locations across the MUHC and at different times during the day to accommodate as many staff as possible. A special series of Townhalls focused on the New MUHC is currently being scheduled for March; dates will be posted on the Intranet. There are also regular M.O.B. (Manager Operational Briefing) meetings. These are devoted to managers so that they are then able to brief their staff. The New MUHC is often on the agenda.

Another strong resource is the Intranet. Chock full of information, the Intranet has a section solely dedicated to the New MUHC. It contains information regarding construction, upcoming events, past presentations, Functional Technical Plans for all three campuses, and Glen Campus floor plans. Also available are short descriptions of the teams working on making the New MUHC a reality. From overseeing construction and design, to the Transition team to help make the move to the new campus seamless, information is available in just a few clicks.

Newsletters are another effective tool. The MUHC publishes two of them: En Bref and Chez Nous. Each newsletter dedicates a section to the New MUHC and readers can find articles dealing with all aspects of the project—these too are posted on the Intranet.

Finally, anyone who has a question about the New MUHC can reach us directly at construction@muhc.mcgill.ca or 514-934-8317. We try our best to respond to everyone in 24 hours.

RESOURCES:

Your New MUHC on the Intranet
www.intranet.muhc.mcgill.ca/construction

Your New MUHC on the Internet
muhc.ca/construction

To reach us
construction@muhc.mcgill.ca
514-934-8317

Nomination deadline: March 4

It’s time to highlight Excellence!

The Awards of Excellence are back and it's our chance to recognize 10 employees who stand out for their commitment to excellence in their work. To get ready for this important event, the Foundation team needs your help.

The nomination period is well under way and nomination forms are available at the following locations: Information Desk (main entrance), Public Relations and Communications (F-372), Administration (F-389), the CPDP office (F-388), the Nursing office (A-403), as well as Rm. FB-6. The nomination forms are also available in all external pavilions, as well as online at thechildren.com. Don’t delay! Completed nomination forms should be sent to Gil Lamy at the MCH Foundation, or to Ginette Manseau (Rm F-389), no later than March 4.

The names of the winners will be announced at the Awards of Excellence Breakfast, which will take place in the Cafeteria on Thursday, May 12. Make sure to mark your calendar for this important date. Our long-time spokesperson Marianna Simeone will once again host the event. The winners will also attend the ABC Ball of Excellence, which will take place on June 2 at Windsor Station.

NEW THIS YEAR!

The Foundation is holding a draw to thank those of you who take the time to prepare and submit nominations. Put the spotlight on a deserving colleague, and get a chance to win a gift basket worth over $100!
Hockey night in Montreal!

Drs. Lucie Lessard, Broula Jamal and Mirko Gilardino along with several patients treated in the cleft lip and palate / craniofacial unit were recent guests of the Montreal Canadians at the Bell Centre. Dr. Jamal made the request so that these young patients could enjoy a fun night out. Thanks go to Marie-France Haineault from Child Life Services for her help in getting the tickets.

Transforming Health Care: A Personal Perspective

On February 1, Dr. Arthur Porter addressed the Canadian Club of Montreal. In a message to employees (available on the MUHC Intranet) the following day, Dr. Porter discussed his key messages to the Canadian Club attendees: “…it is important to me that I use the experience I have gained over the last twenty years to distil some thoughts into concrete suggestions to provide potential solutions to the management of health care. Why is this so important?

Now that we know we will have new infrastructure, will we have healthcare-delivery system to justify the enormous capital expense that taxpayers have entrusted to us? After all, the continuum of care extends far beyond the acute-care experience of our patients and there must be mechanisms in place to allow us to move people efficiently and swiftly across it. Yesterday, I proposed that the funding of our hospitals change from the government’s current practice of a historical line-item budget to a fee-for-service methodology that would be aligned with performance incentives and patient satisfaction. Furthermore, I suggested that delivery be open, in other words both the public and private sector could provide services. Such a competitive, publicly-financed, open-delivery model would drive efficiencies and innovation whilst respecting the Canada Health Act. Finally, I suggested that Canadians must become more involved in their illness, and therefore their wellness. Empowerment tools therefore take on more importance. Ultimately, I believe our priority is to assure that patients are always at the heart of our goals.

I invite you to read my speaking notes. Click below on the link to our Web site where they’ve been uploaded.”

muhc.ca/isai/article/transforming-health-care-personal-perspective-honourable-arthur-t-porter-pc-md

Dr. Porter’s speech to the Canadian Club received coverage in The National Post. Visit nationalpost.com/news/Capitalism+touted+health+care+saviour/4213995/story.html#ixzz1CuRZpFb8 to read the article.

Research Institute Annual Report now online

The Research Institute of the McGill University Health Centre at The Montreal Children’s Hospital announces the online publication of its 2009-2010 Annual Report, Child Health Research: a world of hope. Your feedback on this report and on the research section of the MCH website is very welcome. Explore the report at: www.thechildren.com/en/research/

Contact: Alison Burch, ext. 24300
Teddy Bear Clinic helps familiarize patients with hospital setting

The MCH’s Terry Séguin snuggles with Health Minister Bolduc along with Sarah Bazinet at the MCH Foundation Ball

@ Work

MCH Staff @ work

Gail Lamica
Transfusion Services
23 years at the MCH

I am the coordinator of the blood bank and transfusion services at the MCH. I am a hockey mom of two beautiful girls and I am a huge fan of the Montreal Canadians. Go HABS Go!

Laurie Richard
Child Life and School Services
18 years at the MCH

Spending time with family and close friends is important to me, as is being part of the MCH community, which values children and families.

Josée Lamarre
Department of Pediatric Surgery
23 years at the MCH

I really enjoy outdoor sports – in particular, cycling, skating, hiking in the mountains, and both downhill skiing and cross-country skiing.

Laura Beaton
Plastic Surgery
20 years at MCH

I love animals and have an adorable cat named “Pixie”. I am also an avid collector of... many things!! I particularly love children’s literature illustrators, such as Arthur Rackham, for their charm and whimsy.
**How about a bouquet of broccoli for your Valentine!**

We all know that vegetables are good for our health, but did you know that broccoli in particular is extremely effective in reducing the risk of heart diseases? Here's a suggestion to include this vegetable in your Valentine’s Day menu*, by offering it to the one whose heart beats for you!

In fact, all the vegetables in the cruciferous family (broccoli, cabbage, cauliflower, Chinese cabbage, Brussels sprouts, kale, broccoli rabe, etc…) contain excellent properties for preventing diseases. As for broccoli, it is available all year round, is inexpensive, can be preserved and adds color to your food.

When you are buying broccoli, look for firm stalks and a compact head; if the head contains any yellow flowers, this means that it’s not fresh and it will most probably have a bitter taste. You can also eat the stalks, after having peeled them. Make sure that you don’t overcook broccoli, as it will become pasty and unappetizing; overcooking also kills its taste as well as its nutrients.

For a balanced diet that is good for your heart, please visit www.soscuisine.com/heart-healthy

* Visit www.soscuisine.com to find the right measurements for the number of servings you need.

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**Shrimp and Broccoli Pasta with Turmeric**

Preparation: 15 min; Cooking: 15 min; Total: 30 min

420 Calories/serving; yield 4 servings

- 2 1/2 cups (300 g) broccoli, cut into florets
- 3 tbsp (45 ml) olive oil
- 40 shrimp (220 g), small
- 280 g spaghettini
- 1 onion (200 g), coarsely chopped
- 1/2 dried chili pepper, minced
- 1 tbsp (9 g) turmeric
- 5 tbsp (35 g) pine nuts [optional]
- salt and pepper to taste

**Steps:**

1. Blanch and drain the broccoli, then set aside.
2. Heat the oil in a skillet over medium-high heat. Add the shrimp and cook, stirring occasionally, until the shrimp lose their grey colour and turn pink – 3 to 4 minutes. Set the shrimp aside with the broccoli.
3. Meanwhile, cook the pasta* in large pot of salted boiling water.
4. Add the onion to the skillet then cook over medium-low heat until the onion is translucent. Stir in the chili pepper and turmeric. Cook 1 minute while stirring.
5. Drain the pasta, setting aside about 1/3 cup of cooking water. Pour the pasta into the skillet. Cook 1 minute, then pour in the water and stir to separate the strands of pasta. Transfer the broccoli and shrimp into the skillet. Heat through a couple of minutes, stirring occasionally, until the pasta turns golden-coloured. Sprinkle with the pine nuts (optional), then season with salt and pepper to taste. Serve.
Calling all photographers…

It’s a cold snap!

With all the snow we’ve had so far this season, there have been plenty of opportunities to get out there and snap some beautiful winter shots. Send us your favourite winter photo for a chance to win a $50 gift certificate good at any Alexis Nihon Plaza retailer. Scenery, kids, sports – any and all subjects are welcome as long as it’s clearly “winter”!

Email your photo (jpg format) to info@thechildren.com. All entrants must be received by Friday, March 11, 2011. The winner will be announced in the March 24 edition of Chez Nous.

Good luck!

Events

The Montreal Children’s Hospital Celebrates Black Heritage 2011

Organized by the Sociocultural Consultation and Interpretation Services committee (SCIS) of the MCH, this year’s events highlight the rich cultural history of Montreal’s Black Communities through public talks, music, dance, art and culinary treats.

Race and Well-Being
Thursday, Feb. 17, Noon to 1:00 p.m.
C-417 (videoconference to RVH and MGH)

Dr. Wanda Thomas Bernard, Associate Professor, Director of School of Social Work, Dalhousie University, Halifax, Nova Scotia

Host: Seeta Ramdass, Director of Public Relations and Corporate Communications, St. Mary’s Hospital Center

→ Kiosques: Ghana Canada Association, Maison d’Afrique, Mama Africa, Dix milles villages, Montreal Teen Festival, African cuisine from Réseau international des familles pour le développement durable and music by Xlim.

11:00 a.m. to 2:00 p.m., 2B Waiting Area

Info: ext. 22529 or 23005

Nursing Research Committee on the hunt for dinosaurs

Dinosaurs of the clinical or administrative kind, that is! The Nursing Research Committee wants to hear about archaic nursing practices – either clinical or administrative. If you’ve ever asked yourself: “Why do we do this? Everyone knows it doesn’t work,” or “Does anyone know of a different way of doing this?” then submit your question to the Nursing Dinosaur Contest. The Nursing Research Committee will try to answer your question, and you could also win a prize.

Submit your question by March 31, 2011 to dinosaurcontest@muhc.mcgill.ca or by fax to Joanne Creager at 514-934-8286.

Memorial Service

A memorial service is being organized to remember the children who have died recently at the MCH. We shall also be commemorating children who have died of SIDS. All staff members are warmly invited to attend this service, which will be held on Tuesday, February 15 at 2 p.m. in the Amphitheatre (D-182).
Coughing, wheezing and difficulty breathing are hallmarks of an asthma attack. According to Dr. Francisco Noya, Head of the Asthma Department at The Montreal Children’s Hospital (MCH) of the McGill University Health Centre (MUHC), asthma attacks account for six percent of emergency department visits.

The key to preventing these attacks and hospital visits is the regular use of “controller” asthma medication, usually in the form of inhaled corticosteroids. New research findings, conducted at the MCH, show that a unique written treatment action plan goes a long way to keeping these children out of the emergency department.

This written action plan, a one-page document designed for use in the emergency room, doubles as a prescription for the pharmacy and as an instruction sheet for the patient. It outlines symptoms, tips on how to keep asthma under control, and provides a written record for the pharmacist, physician and patient.

“We undertook this study to see if we could improve outcomes for asthmatic children,” says Dr. Noya.

The study showed that physicians using the Action Plan were more likely to suggest long-term prescriptions; further, more patients took their medications longer (for 28 days versus 15 days) and consequently the asthma was better controlled.

“This study may have sparked a positive change in the prescribing habits of emergency room physicians,” says Dr. Noya.

“A lot of our business in the emergency department is treating children under five who come in with asthma attacks. We need to streamline and optimize our approach. The action plan is a move in the right direction.”

The Action Plan for Asthma Attacks is available in the “asthma corner” of the Emergency Department. It is also available on line at http://www.thechildren.com/en/departments/index.aspx?myDep=A&ID=37

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**New asthma action plan may be a breath of fresh air**

By Christine Zeindler

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**Take a moment to meditate**

Jocelyne Albert continues to offer weekly meditation sessions on Tuesdays from 11:00 to 11:30 a.m. in the Chapel. Feel free to drop by any Tuesday to experience the benefits that meditation can bring to your well-being.

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**In Focus**

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**Employees’ Valentine’s Coffee Break**

To mark Valentine’s Day, the Quality of Life at Work Committee and the MCH Foundation invite you for a coffee and muffin in the Cafeteria and to meet a few colleagues while you’re at it.

Date: Monday, February 14
Time: 2 p.m. to 4 p.m.
Where: MCH Cafeteria

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**CONTINUING EDUCATION**

Looking for info on CME activities at the MCH? Visit thechildren.com and click on < Continuing Health Education > for details on upcoming events.
“My happiness has nothing to do with how much I earn,” says Hughes Gauthier, one of the MCH’s 78 housekeepers. “A bigger paycheque wouldn’t make me any happier than I currently am. Unfortunately, a lot of people haven’t yet learned this life lesson and they keep chasing the money.”

For 23 years, Mr. Gauthier has been happily working the evening shift from 3:15 to 11:25 p.m. keeping the hospital spic and span. For the last 15 of those years, he has been working in the ER. When he first joined the MCH, the only opening on the maintenance team was in the evening, which seemed inconvenient, but now, he rather likes the unconventional shift. His hours do put a bit of a crimp in his socializing, but the avowed bachelor says he catches up with friends and family on weekends. Besides, he says, over the years, the team in the ER has become his extended family.

“For sure, working in the ER, you don’t work alone. I work with everyone: the patients, nurses, doctors, security, child life educators, orderlies, you name it,” he says. “The ER is like a small family.”

Mr. Gauthier says he has never held a job that has made him feel as useful as his job as a maintenance worker. He points out that his work impacts the morale of the team. At the end of his shift he can look back on the work he’s done and know he has made a big difference.

Mr. Gauthier could have chosen a different path. He completed a bachelor of history and a teaching degree. But when he started job hunting, there were no openings for history teachers. “I would have ended up being the class room police officer, not something I would have enjoyed,” he admits, figuring he would have probably ended up as a high school substitute teacher for several years.

Besides, working the evening shift does have its benefits. Mr. Gauthier points out that he never has to wait in line at the bank and he could sleep in every day if he wanted to. But he rarely lolls around in bed. In fact, he gets up every day at 8:00 a.m. and heads off to his job as the director of Importations Privées Bièropholie, a not-for-profit organization that imports 300 to 400 different types of beer per year from microbreweries around the world.

He scoffed when asked to name his favourite beer, saying it would be like trying to choose the best wine. It all depends on the type of beer: there are 400 different types of beers from around the world from Scotch ales to barley wine and stouts and prices can range from $4 to $25.

“A good beer is not meant to be guzzled while watching the game -you are meant to enjoy it, savour it, just like a good wine,” says Mr. Gauthier, who would rather savour a Thomas Hardy from England, or Mikkeller Stateside IPA from Denmark than any of the commercial beers readily available in local bars and supermarkets. In fact, if he were offered a Budweiser, he says he’d opt for a glass of water instead.

When pressed to name the beer he might enjoy after completing his evening shift in the ER, Mr. Gauthier, finally copped to being fond of Trois Pistoles, a beer made in Chambly. For a man who knows the best the world has to offer, that’s worth taking note!

To learn more go to www.bieropholie.com