
WOMEN IN MEDICINE

In Conjunction with McGill Feminism in Medicine

Women in Medicine: Dr. Louise Pilote

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ABSTRACT

Always driven by a desire to understand, Dr. Louise Pilote (MDCM, MPH, PhD, FRCPC) can accurately be described as a lifelong learner. As the former Director of the Division of General Internal Medicine at McGill University, this clinician scientist is a Professor of Medicine at McGill and holds a James McGill chair. Her research interests include cardiovascular disease, specifically in women, as well as health service outcomes. Pilote's most recent endeavor focuses on the impact of gender on health outcomes on a globalized scale. Now a mother of five, Pilote shares her experience with integrating professional and personal life. She also discusses the intersection of medicine and feminism, while providing advice for the next wave of clinician researchers.



KEYWORDS

Internal medicine, feminism, gender equality

Dr. Louise Pilote, MDCM, MPH, PhD, FRCPC

For many physicians, the pathway towards medicine is marked by a familial role model or an early childhood aspiration. Coming from a sizeable family with seventy first cousins - none of whom were doctors - Dr. Louise Pilote (MDCM, MPH, PhD, FRCPC) jokes that she actually decided to become a physician after a year and a half of medical school. Believe it or not, the catalyst for Pilote's medical career can be traced back to a serendipitous bus stop encounter with two medical students in Sherbrooke. Always interested in both science and people, at the time Pilote was a keen CEGEP student who was applying broadly to journalism, physical education, nursing, and medicine. While on the bus,

she sparked up a conversation with the two medical students, and in doing so, was encouraged to enter the field she would grow to greatly impact. There is no denying that Pilote's career has been motivated by an intrinsic pursuit of knowledge - with a Masters of Public Health from Harvard, PhD in epidemiology from Berkeley, and post-doctoral fellowships in cardiology, health services research, and clinical epidemiology - all following her internal medicine residency at McGill. More recently, Pilote has gained recognition for her pioneering research on the impact of gender roles in disease, with the globalized research project GOING-FWD (Gender Outcomes INternational Group: to Further Well-being Development). If Pilote's academic and professional career were not impressive enough, now might be the time to mention that this clinician researcher has five children.

As medical students gain exposure and progress through their formative clerkship rotations, it is common to envision various futures. After a summer dissection program during her medical education at McGill, Pilote thought she was destined to become a surgeon. Following this, she discovered her love of the thought process inherent to internal medicine and was set to be an internist. Subsequently during her pediatrics rotation, Pilote's love for children and thinking amalgamated so perfectly, that she eventually ranked this specialty as her first choice. At the time, there was a two-week period between medical students submitting their rankings for residencies and programs releasing their respective rankings of students. It was during this period that Pilote was able to reflect and realize that although she loved pediatrics, a career treating sick children would be too emotionally difficult for her. She made the decision to call the program director of pediatrics and ask him to rank her last, in the hopes of beginning a residency in her second choice: internal medicine. According to the celebrated internist Pilote, she has never regretted her decision.

During her residency in internal medicine, Pilote sought out research exploring the intersection of medicine and society. In doing so, she readily admits that she would read the abstract, skip the methods section, and go straight to the discussion. Pilote, always

motivated by a desire to understand, felt she could not truly appreciate the study design and statistical methods of these papers. And thus, she sought out the opportunity to expand her knowledge base and began her Masters of Public Health at Harvard. It was here, during her formative education in epidemiology, that Pilote's interest in global health took fruition. This interest was solidified following her masters, where Pilote spent a year in Ethiopia during Mengistu's dictatorship with a nine o'clock curfew. There, she taught the fundamentals of public health and epidemiology to local doctors, and worked together to develop action plans. Wanting to further develop her own capacity to conduct research, Pilote's next step was the Robert Wood Johnson Clinical Scholars Program - a post-doctoral fellowship in clinical epidemiology at Stanford. Here, her broad research endeavors included investigating the prevalence of tuberculosis infection in the homeless of San Francisco and comparing cardiology outcomes between Canada and the United States. Now a bona fide researcher in the making, Pilote chose to extend her stay in California and completed a PhD in epidemiology at Berkeley.

Initially, Pilote's research focused on health service outcomes, specifically the safety and efficacy of cardiac procedures and drugs. Roughly two decades ago, Pilote started wondering whether these types of outcomes differed for men and women. Around the same time, research began to emerge demonstrating differences, such as women receiving less cardiac care, and Pilote questioned - why? This served as the foundation for many of Pilote's research endeavors, which highlight women and vascular disease throughout the lifespan. Across Canada, there was a call for proposal to form a team of researchers focused on sex and gender, which Pilote gladly answered. One thing led to another, and the project GENESIS-PRAXY (GENdEr and Sex determinantS of cardiovascular disease: From bench to beyond - PRemature Acute Coronary SYndrome) emerged. The term gender became very political, and Pilote recounts that of all the research she had done in her life, this is what she became known for. For her, it was like the community at large was telling her this research was important, and that it needed to be understood. In terms

of sex and gender differences, Pilote feels the balance has been pushed towards precision medicine - with a harsh focus on genetic and biological factors. In her opinion, by integrating gender-related factors - like roles, relations, and institutionalized gender - the pendulum shifts to incorporate BOTH biology and society in understanding disease. A true epidemiologist at heart, Pilote further sought to understand the impact of society itself on disease and disease outcome. This led to globalizing the research, with GOING-FWD. This personalized medicine project is funded by the Canadian Institutes of Health and Research (CIHR) as well as GENDER-NET, and includes a network of five countries (Austria, Canada, Cyprus, Spain, and Sweden). In essence, the aim of the research is to understand the impact of sex and gender on health outcomes, within a host of non-communicable diseases. In doing so, the goal is to personalize medicine and improve patient outcomes by tailoring disease prevention, presentation, severity, and even response to intervention, based on sex and gender.

Being raised with four brothers, Pilote says she always knew she wanted to have a big family. In her early thirties, she and her husband decided to start a family. Now with five children, the obvious question ensues: how does a professional woman balance life with a big family? There's no magic answer, but Pilote emphasizes, "you find a way of making it work." Whether it was nursing in the shower or presenting at a conference with her newborn snugly secured to her chest, Pilote certainly made it work. She also stresses the importance having a supportive partner, and having help at home if needed. For Pilote, "if you don't have a well-organized situation at home, as a mother, you worry all day - if it's well organized, you leave in the morning [for work] with peace of mind and you can be present during the day." Pilote's children range in age from 16-23 years old, and it is obvious when she speaks of them that she is a very proud mother.

When asked her position on the intersection of feminism and science, Pilote replied, "as a feminist, I want to be a woman who does good science - that's my way of living my feminism." And there is no doubt that Pi-

lote lives her feminism through research, as emphasized by her involvement in everything from women's cardiovascular health, to GENESIS-PRAXY, to GOING-FWD. In terms of women's career paths and development, Pilote acknowledges there are inherent structural issues, but also stresses the importance of identifying limitations as external versus self-imposed. She elaborates, "no one has said to me you cannot do this because you're a woman, but I have told myself I cannot do this because I'm a woman." As the former Director of the Division of General Internal Medicine at McGill University and a tenured James McGill Professor of Medicine since 2008, Pilote has certainly held powerful positions. However, she recognizes she may not have sought certain leadership positions because of her "traditional" roles and priorities. She proposes a paradigm shift: it is time to change leadership models - why should just one person sit at the helm? Pilote advises that leadership structures must change to incorporate women and their many roles, to promote research and career advancement.

With such a diverse background, it comes as no surprise that Pilote aims to inspire the next wave of clinician researchers to keep their minds open to discovery and creativity. She cautions not to rigidly pick one focus, as you never know which research endeavor will take off. As evidenced by Pilote's own research career, the community at large often serves to reinforce what is important, relevant, and needed. For future physicians, Pilote counsels to "always remember that society gave you such a privileged opportunity to help, always keep that in mind". This statement is currently echoed by Pilote's own dedication to her field, as she selflessly works at the frontline of the COVID-19 pandemic.