



Dr. Robert McMaster,  
VP Research, Vancouver Coastal Health Research Institute  
Executive Director, VCH Research Institute  
Interim Executive Associate Dean, Research, UBC Faculty of Medicine  
6<sup>th</sup> Floor, 2635 Laurel Street  
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[robert.mcmaster@vch.ca](mailto:robert.mcmaster@vch.ca);  
cc: [Faydra.Aldridge@vch.ca](mailto:Faydra.Aldridge@vch.ca)

September 11, 2017

Re: Rejection of the Centre for Menstrual Cycle and Ovulation Research (CEMCOR) as a Vancouver Coastal Health Research Institute Program

Dear Dr. McMaster:

I am writing as a member of CEMCOR Scientific Advisory Committee member and as a researcher in women's health and pharmaceutical policy, to request that VCHRI reverse the rejection of CeMCOR as a Vancouver Coastal Health Research Institute Program.

I have worked for many years on research in women's health. A major concern in this sector is the extent of commercial influence on the research agenda. This has led to lack of attention to certain issues that are not considered high priority from a marketing perspective, to a lowering of diagnostic thresholds for many conditions (a recent example is polycystic ovarian syndrome), and to inadequate attention to treatments that are off-patent or low cost, or to how drug and non-drug alternatives compare. Additionally, there has been a tendency within women's mental health research to focus on a more biological approach, rather than a more holistic approach that considers the influence of discrimination, poverty and violence.

CeMCOR's work is important because of its independence from pharmaceutical and medical device industry funding. This has brought an important focus on research areas that reflect unmet women's health needs, rather than commercial sponsors' priorities. There are very few medical research units in British Columbia that operate without commercial sponsorship, especially in women's health research.

CeMCOR's research is innovative, practical, and scientifically rigorous and needs ongoing support. CeMCOR also provides important practical assistance to patients in the province. Despite its small size and infrastructure of \$50-75,000/year, CeMCOR is very productive in creating innovative and practical science and excellent at sharing of this



new knowledge. CeMCOR's website receives >3,500-7,000 page views/day from >180 countries, indicating a broad international reach.

Some important examples of CeMCOR's leadership in women's health research include the research into the menstrual cycles of adolescents and of premenopausal women. This is an important addition to our understanding of the degree of variability that can be expected among healthy women, with direct implications for medical care. Additionally, the research on incident hip fractures among community-dwelling men and women over the age of 75 has helped to dispel myths that women are necessarily at higher risk than men at all age ranges. CeMCOR's research on adolescent bone mineral density, in relation to use of hormonal contraceptives, has also helped to improve understanding of the full range of expected outcomes of contraceptive use, and to inform choices for clinicians who are providing care for younger adolescent women. These are only a few examples of a strong, innovative research agenda in menstrual cycle and reproductive health.

CeMCOR deserves ongoing VCHRI support to continue to contribute to research excellence in the province and to the breadth of health care options available to BC women. I hope very much that this decision can be reconsidered and look forward to your constructive response to these concerns.

With best regards,

Barbara Mintzes, PhD

Senior Lecturer,  
Faculty of Pharmacy and Charles Perkins Centre,  
University of Sydney

Affiliate Associate Professor,  
School of Population and Public Health  
University of British Columbia



Susan I. Barr, PhD  
Professor Emeritus of Nutrition  
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September 11, 2017

Dr. Robert McMaster,  
VP Research, Vancouver Coastal Health Research Institute  
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[robert.mcmaster@vch.ca](mailto:robert.mcmaster@vch.ca);  
cc: [Faydra.Aldridge@vch.ca](mailto:Faydra.Aldridge@vch.ca)

Dear Dr. McMaster:

Re: Rejection of the Centre for Menstrual Cycle and Ovulation Research (CeMCOR) as a Vancouver Coastal Health Research Institute Program

I am writing as a member of CeMCOR's Scientific Advisory Council to request that VCHRI reverse the rejection of CeMCOR as a Program. As you may be aware, the Scientific Advisory Council includes physicians and scientists from a broad range of disciplines (endocrinology, gynecology, nutrition, epidemiology, sociology and psychology), all of which underpin this key area of women's health. The research conducted by CeMCOR and the public outreach and resources it provides are filling important gaps and need to continue. To be able to keep this service going, CeMCOR needs VCHRI support.

There is solid evidence that CeMCOR, despite its small size and infrastructure of only \$50-75,000/year, is very productive in creating innovative and practical science, and has excelled at sharing this new knowledge. Objective evidence of the effectiveness of CeMCOR's knowledge translation is provided by the fact that its website receives between 3,500 to 7,000 page views per day, from over 180 countries.

It doesn't seem fair that federal (taxpayer) money for research infrastructure support be earned by CeMCOR but allocated instead to other entities given simply because CeMCOR does not meet the VCHRI criterion for having a million dollars in infrastructure money. Specifically, a portion (approximately \$150,000) of what CeMCOR has earned from TriCouncil grants over the last 15 years has gone to VCHRI. Over the same time period CeMCOR has received only \$59,729 in support from VCHRI.

I strongly urge you to reconsider this issue, and allow this important work to continue.

Sincerely,

A handwritten signature in cursive script that reads "Susan I. Barr".

Susan I Barr, PhD  
Professor Emeritus



a place of mind  
THE UNIVERSITY OF BRITISH COLUMBIA



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Vancouver, August 12, 2017

Dr. Robert McMaster,  
Executive Director, VCH Research Institute  
Interim Executive Associate Dean, Research, UBC Faculty of Medicine  
6<sup>th</sup> Floor, 2635 Laurel Street, Vancouver, BC V5Z 1M9

Dear Dr. McMaster,

**Re: The Centre for Menstrual Cycle and Ovulation Research (CeMCOR) as a VCHRI Program**

I am writing as a VCHRI researcher and a member of the CeMCOR Scientific Advisory Committee. I am Associate Professor in Pathology and Laboratory Medicine and my research program focuses on women. There is solid evidence that CeMCOR, despite its small size and infrastructure of \$50-75,000/year is very productive in creating innovative and practical science and excellent at sharing of this new knowledge. As a researcher and a woman, I request that VCHRI reverse its rejection of CeMCOR as a Program.

I believe CeMCOR meets an important need through its research translation and other endeavours; that is in part why I agreed to serve on its Scientific Advisory Council. Such important work should be allowed to continue for the sake of the women's community.

I have myself benefited from CeMCOR data in collaborative studies. My research program is currently studying reproductive health among women living with HIV and their children exposed to maternal medications during gestation. The CeMCOR expertise is invaluable to our research team. Outside the academic realm, the CeMCOR website (>3,500-7,000 page views/day from >180 countries) is a rare resource that connects researchers with members of the public at large and provides evidence-based information about topics that are deeply important in women's lives, and does so in lay language. The public needs this.

Through its support of CeMCOR, the VCHRI would demonstrate that it values women-centered research, and would, in my opinion, benefit from this decision. CeMCOR's research is at the leading edge (sometimes controversially so) but it is the role of universities and their research institutions to support leading edge research. Denying CeMCOR Program Status hinders this progress and will ultimately limit innovative research that is practical and targeted toward an understudied population.

Sincerely

Hélène Côté, PhD  
Associate Professor  
Department of Pathology and Laboratory Medicine  
University of British Columbia

Leader of the Children and Women: Antiretroviral Therapy and  
Markers of Aging (CARMA) cohort study  
Member of the CeMCOR Scientific Advisory Council

Cc: Dr. Jerilynn Prior

September 11, 2017

Dr. Robert McMaster,  
VP Research, Vancouver Coastal Health Research Institute  
Executive Director, VCH Research Institute  
Interim Executive Associate Dean, Research, UBC Faculty of Medicine  
cc: [Faydra.Aldridge@vch.ca](mailto:Faydra.Aldridge@vch.ca)

**Re: Rejection of the Centre for Menstrual Cycle and Ovulation Research as a VCHRI Program**

Dear Dr. McMaster:

I am writing as a researcher and a member of the CeMCOR Scientific Advisory Council to request that VCHRI reverse the rejection of CeMCOR as a Program within VCHRI. In addition to my CeMCOR Scientific Advisory Council Role, I am a Research Associate at the Centre for Hip Health and Mobility at VCHRI. I have collaborated with Dr. Prior on a number of projects over the last decade, all of which have contributed significantly to our understanding of bone health in women across the lifespan.

From my perspective, CeMCOR is a unique and valuable program that contributes not only innovative, world-leading research on women's health, but also provides an amazing resource for women at all life phases. Personally, I have accessed CeMCOR resources to address my own health concerns and I have directed several friends and colleagues to the excellent website to do the same. I also know first-hand, the quality of CeMCOR's research and the contributions Dr. Prior and other CeMCOR Scientists have made over the last decade. I collaborated with Dr. Prior in recent years to address questions related to the influence of combined hormonal contraception on bone accrual in adolescent girls and young adult women. For this analysis, we used data from the population-based Canadian Multicentre Osteoporosis Study (CaMOS), which Dr. Prior was instrumental in designing, and which continues to provide a wealth of data with which to answer important questions related to women's bone health.

As Dr. Prior thoroughly documented, there is solid evidence that CeMCOR, despite its small size and limited infrastructure of \$50-75,000/year, is very productive in creating innovative and practical science and excellent at sharing and translating this new knowledge. There is also objective evidence of the knowledge translation effectiveness of CeMCOR's website that receives 3,500-7,000 page views/day from more than 180 countries. With VCHRI's support, I have no doubt that these knowledge translation efforts would be more widespread and would garner further attention for CeMCOR and VCHRI.

Thank you for letting me know your response to these concerns.

Sincerely,



Heather Macdonald, PhD  
Research Associate  
Centre for Hip Health and Mobility  
UBC Department of Family Practice

THE UNIVERSITY OF BRITISH COLUMBIA



**a place of mind**

September 12<sup>th</sup> 2017

Dr. Robert McMaster,  
Executive Director, VCH Research Institute  
Interim Executive Associate Dean, Research,  
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6<sup>th</sup> Floor, 2635 Laurel Street,  
Vancouver, BC V5Z 1M9

Re: Rejection of the Centre for Menstrual Cycle and Ovulation Research (CeMCOR) as a Vancouver Coastal Health Research Institute Program

Dear Dr. McMaster,

I am writing as an original member of the CeMCOR Scientific Advisory Council since CeMCOR's inception in 2002, and as a Researcher, to support the request that VCHRI reverse the rejection of CeMCOR as a Program. I believe that CeMCOR, with its unique and inspiring combined academic and community perspective makes an extremely valuable contribution by providing accessible and reliable scientific information to women, practitioners and researchers globally. Despite its small size and infrastructure of \$50-75,000/year, CeMCOR is evidently very productive in creating innovative and practical science and it excels at sharing this new knowledge; there is objective evidence of the knowledge translation effectiveness of CeMCOR's website in that it receives >3,500-7,000 page views/day from >180 countries. There is no doubt that in order to be able to continue providing this valuable service, CeMCOR needs VCHRI support. I do sincerely hope that VCHRI is able to reconsider CeMCOR's request.

Sincerely,

# Paula J. Caplan

August 16, 2017

Dr. Robert McMaster,  
VP Research, Vancouver Coastal Health Research Institute  
Executive Director, VCH Research Institute  
Interim Executive Associate Dean, Research, UBC Faculty of Medicine  
6<sup>th</sup> Floor, 2635 Laurel Street  
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cc: [Faydra.Aldridge@vch.ca](mailto:Faydra.Aldridge@vch.ca)

Dear Dr. McMaster:

## **Re: Repeated Rejections of the Centre for Menstrual Cycle and Ovulation Research as a Vancouver Coastal Health Research Institute Program**

I am writing as a researcher and teacher of critical thinking — and co-author of a textbook about research methodology — about women's health and have written numerous articles and chapters regarding matters of the menstrual cycle, and I am also a clinical psychologist whose work in that capacity has included clinical matters related to the menstrual cycle. I write to request that VCHRI reverse the rejection of CeMCOR as a Program.

From my perspective., the CeMCOR is unique and absolutely essential for creating innovative research and extremely important clinical directions. To be able to keep this service going, CeMCOR needs VCHRI support.

There is solid evidence that CeMCOR, despite its small size and infrastructure of \$50-75,000/year, is very productive in creating innovative and practical science and excellent at sharing of this new knowledge. There is also objective evidence of the knowledge translation effectiveness of CeMCOR >3,500-7,000 page views/day from >180 countries on CeMCOR's website

I am at a loss to know why this women's *health*-focused research should be unsupported, in light of the provision of funding for many *disease*-focused and general or men's health related programs and centres.

I am also at a loss to understand why federal (taxpayer) money from the Treasury to support infrastructure in research must be earned by CeMCOR but is allocated instead to other entities, given that CeMCOR is too poor to meet the VCHRI criteria for having a million dollars in infrastructure money. Specifically, 5-10% (mean \$~150,000) of what CeMCOR has earned from TriCouncil grants over the last 15 years has gone to VCHRI. Over the same time period, CeMCOR has received \$59,729 in support from VCHRI.

I hope to receive a reply reflecting your decision to rethink these matters and take action that is in keeping with VCHRI's position as a leader of important work.

Yours sincerely,

Paula J. Caplan, Ph.D.  
Associate, DuBois Institute, Harvard University



5 June 2017

Dr. Robert McMaster, Associate Dean, Research  
Vancouver Coastal Health Research Institute  
Interim Executive Associate Dean, Research, UBC Faculty of Medicine  
Room 3665, 910 West 10th Avenue  
Vancouver, BC V5Z 1M9

Dear Dr. McMaster:

Re: 2014 and 2016 Rejections of the Centre for Menstrual Cycle and Ovulation Research as a Vancouver Coastal Health Research Institute Program

I am writing as a past president of the Society for Canadian Women in Science and Technology (SCWIST) and as researcher in biophysics to request that VCHRI reverse the rejection of CeMCOR as a Program.

As you and Dr. Meneilly stated, at the 15<sup>th</sup> Anniversary Celebration for CeMCOR, not only has CeMCOR been exemplary in the quality of its research, CeMCOR is also a leader in knowledge translation. Almost weekly, I direct friends to CeMCOR's website to find information about changes in their bodies that they cannot find anywhere else. To insure CeMCOR's continued success, CeMCOR needs VCHRI support.

CeMCOR, despite its small size and infrastructure of \$50-75,000/year is very productive in creating innovative and practical science and excellent at sharing this new knowledge.

I would like to see this productive women's **health**-focused research as supported as the many disease-focused programs and centres under the VCHRI umbrella.

I look forward to your action on this matter.

Sincerely,  
Elana Brief, PhD