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MEDICINE

A Publication for Alumni and Friends of the UIC College of Medicine and the University of Illinois Medical Center Volume 11, No. 2 Summer 2007

Inside: 125th Anniversary Invitation | Inside Fink Family Liver Center Opens | 5 Urban Health Program | 20 Telemedicine Extends College Reach | 27 Capital Campaign Kicks Off | 30







AN AUTUMN DAY IN 1882 Marks the date when a small but industrious group of physicians opened the doors to the college of physicians and surgeons, the precursor to the uic college of medicine. To commemorate this most significant date, please mark october 5 on your calendar to join us for our 125th anniversary gala celebration at chicago's union station—a spectacular venue to hold such an illustrious celebration. This date coincides with our annual fall reunion, and all alumni and friends of the college are cordiant inverse.

COLLEGE ARE CORDIALLY INVITED TO ATTEND. IT PROMISES TO BE A BRILLIANT EVENING! THIS GALA WILL INCLUDE AN HISTORIC WALK THROUGH TIME WITH A PHOTO GALLERY AS WE REMINISCE ACCOMPLISHMENTS OF THE COLLEGE, DECADE BY DECADE, FOLLOWED BY A COCKTAIL RECEPTION, DINNER, DANCING AND A CHAMPAGNE TOAST. YOU WILL HAVE A CHANCE TO MINGLE WITH THOSE YOU HAVEN'T SEEN IN YEARS. FOR MORE INFORMATION ABOUT THIS EVENT OR TO REQUEST AN INVITATION, PLEASE CONTACT CONNIE COCHRAN TOOLE AT (312) 996-4470 OR E-MAIL 125MEDGALA@UIC.EDU.

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UIC Medicine

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Community Doctors

Novel Treatment=Normal Life

his rare blood disorder. He found UIC.

Alumni staffing Fox Valley Orthopaedic Institute always put their patients first.

As the university kicks off its \$2.25 billion capital campaign, students

in medicine benefit from the generosity of alumni donors who care.

A patient launched a national search to find the top doctors to treat







throughout Illinois.

A Vision of Courage A patient shares her story about the multidisciplinary care she received at UIC—allowing her to be a healthy and strong mother to her child.

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UIC College of Medicine is to enhance the health of the citizens of Illinois through educating physicians and biomedical scientists, advancing knowledge of health and disease, and providing healthcare in a setting of education and research.

The mission of the

ONLINE

UIC Medicine www.medicine.uic.edu.

ON THE COVER 2007 graduate and new physician Andrea Pappalardo received the Pritchard Scholarship

in her senior year.

HONOR ROLL

The College of Medicine is considering recognizing its donors with a comprehensive honor roll to be published this fall. If you prefer not to be listed, please contact the Office of Advancement at (312) 996-4470 or med-email@uic.edu.

magazine is online now at

OUR MISSION

Anesthesia Preoperative Evaluation Clinic gives surgery patients the best chance possible for positive outcomes.

Brilliant Futures

Strategic Alliances

Emergency care improves dramatically since UIC physicians began staffing Galena-Stauss Hospital's ER.

Telemedicine program will send specialty expertise to small hospitals

Extending Our Reach







Dean's Message

MEDICINE



Dean Flaherty on College Activities

Q Can you tell us about this year's Commencement ceremonies?

A | It is always immensely gratifying to send out a new class of physicians into the world at Commencement and this year was no different. At the college's 125th graduation ceremony in Chicago, 173 students earned degrees during the ceremony at the UIC Pavilion on May 11. Illinois Attorney General Lisa Madigan was our speaker, and UIC Medical Advancement Council member and CEO of Mesirow Financial Jim Tyree received an honorary Doctorate of Humane Letters degree. In Urbana, 20 students graduated May 6 at the Krannert Center. Peoria saw 44 students become doctors on May 5 at the Peoria Civic Center Ballroom. And the Rockford campus held Commencement ceremonies for 45 graduating medical students at the Coronado Performing Arts Center in late April.

Q | Can you tell us a little about the Brilliant Futures capital campaign?

A | As you can see from the cover of this issue, our students do have brilliant futures. Andrea Pappalardo, MD '07, Jewmaull Reed and Rishi Rattan were given some much-appreciated financial assistance from benefactors James Pritchard, MD '58, Marjorie Kaiz Offer and Marshall Matz, MD '64. Their story also introduces the university's capital campaign, Brilliant Futures, which kicked off June 1 at Chicago's Navy Pier. The campaign promises to raise a total of \$2.25 billion for the entire university system, with the Chicago campus raising \$650 million, and the College of Medicine raising at least \$250 million of that. This ambitious campaign will take the entire university to a new level of excellence. It will require a very strong endorsement by our alumni and faculty to achieve this unprecedented level of giving. I am confident we are all up to the task.

Q | Who is the first Nyhus chair of surgery?

A | Lloyd M. Nyhus was feted in May during the investiture ceremony naming Dr. Pier Cristoforo Giulianotti as the first Nyhus professor of surgery. Dr. Nyhus was head of the department from 1967 to 1989 and oversaw the training of more than 300 surgical residents during his tenure. We welcome Dr. Giulianotti, an international pioneer in robotic general surgery, who will lead the division of minimally invasive, general and robotic surgery as its chief. You can read more about him on page 4 and in the upcoming winter issue of this magazine.

Q | What's new at the UIC Cancer Center?

A | We are also delighted to welcome Gary Kruh, MD, PhD, from the Fox Chase Cancer Center in Philadelphia as our new director of the UIC Cancer Center. His research expertise is in molecular mechanisms of cellular resistance to chemotherapeutic agents. In his new role, he plans to establish programmatic research themes, strengthen clinical oncology and integrate the two together. He also envisions linking cancer-related activities on all four of the college's sites.

Q | Can you tell us how the college plans to commemorate its 125th year?

A | Yes. Everyone is invited to attend our 125th Anniversary Gala on Oct. 5. at Chicago's historic Union Station. This black-tie event will coincide with our annual fall reunion. You can read more about it on the inside front cover of this issue.





NIH Funds Clinical Translation of Noninvasive MRI-based Measurement of Intracranial Pressure in Brain Disorders

by Jeanne Galatzer-Levy

new advanced magnetic resonance imaging technique being developed for the diagnosis of neurological problems, such as Chiari malformation, hydrocephalus and brain injury, will be evaluated for clinical use through a \$1.4 million National Institutes of Neurological Disorders and Stroke grant.

The project will determine the clinical efficacy of a noninvasive measurement of intracranial pressure and compliance, which currently requires an invasive procedure, for the diagnosis and treatment of patients with Chiari malformations and hydrocephalus.

The new technique relies on a novel algorithm that determines "intracranial compliance," or the ability of the brain to accommodate increase in volume without a large increase in pressure. Compliance is determined from the change in fluid volume and pressure occurring with each heartbeat as blood and cerebral spinal fluid flow in and out of the cranium.

"We believe that in Chiari malformations, both the severity of symptoms and the likely success of surgery are related to intracranial compliance," says Noam Alperin, PhD, associate professor of medical physics and head of the MRI research laboratory in the department of radiology. "This new method gives us a noninvasive way to study a relatively common and poorly understood neurological problem."

Chiari malformation is a condition where lower parts of the brain, the brain stem and the cerebellum, protrude downward into the spinal column. In the past, it was estimated that the condition occurs in about seven in every 1,000 births, but the increased use of diagnostic imaging has shown that it may be much more common. Chiari malformation can cause a wide range of symptoms, including severe headache, poor balance, dizziness, muscle weakness, numbness and vision problems. In its most severe aspect, Chiari malformation can result in permanent neurological damage, including paralysis. Although medications can relieve pain, surgery is the only treatment currently available, and doctors have not been able to predict who will benefit, says Alperin, who is principal investigator on the project.

One of the goals of the study, he says, is to improve prediction of whether surgical treatment will alleviate symptoms and help develop less-invasive treatments.

The noninvasive measurement may



be useful in a range of neurological disorders, including hydrocephalus, brain injury, hemorrhages, stroke and brain tumors, Alperin says. Swelling, which is a common response to all injury, can be fatal in brain injury, because in the restricted cranial space it increases pressure and reduces blood perfusion, Alperin adds. "This technique will give us a better understanding of an individual's ability to tolerate swelling or any other space-occupying processes."

Alperin's collaborators on the project include Terry Lichtor, MD, PhD, and Roberta Glick, MD, of Rush University and the John H. Stroger, Jr. Hospital of Cook County, and Doris Lin, MD, PhD, and Jon Weingart, MD, of Johns Hopkins University. Noam Alperin, PhD, center, with lab assistants, from left, Novena Rangwala, MS, Nicolas Grunberg, MS, Rong-Wen Tain, MS, and Sang H. Lee, MS.

Advancement Council Member Receives Honorary Degree

by Mark Rosati



The University of Illinois at Chicago presented an honorary Doctorate of Humane Letters degree to Medical Advancement

Council member **Jim Tyree** during 2007 Commencement ceremonies in May.

The university bestows honorary degrees on individuals who have helped expand knowledge and performed exemplary service in ways that are viewed as an extension of its own mission and dedication to teaching, service and research.

Tyree, chairman and CEO of Mesirow Financial, is a corporate and civic leader who has served the city and the state through his commitment to education, civic involvement and philanthropy. Named the 2004 Person of the Year by the Juvenile Diabetes Research Foundation of Illinois, he has been involved with JDRF for more than 12 years. Beginning as a volunteer, his involvement with JDRF grew to include the chapter presidency, multiple chairmanships for the Chance of a Lifetime galas, and membership on the executive committee for JDRF International.

At UIC, Tyree serves on the UIC Medical Advancement Council and on the Board of Managers and Investment Committee for both IllinoisVENTURES and the Illinois Emerging Technology Fund. CampusNews



Eye Surgery Restores Vision in "Hopeless" Cases

by Jeanne Galatzer-Levy

phthalmologists at the medical center performed four cornea replacement surgeries in December and February using a newly redesigned artificial cornea, restoring sight in patients who had exhausted all other options. Dimitri Azar, MD, Thanis Field chair of ophthalmologic research and professor and head of ophthalmology and visual



José de la Cruz, MD, a fellow in cornea and refractive surgery, examines the eyes of L.C. Phillips, a patient who received an artificial cornea transplant in December.

sciences, led the team that performed the operations. He was assisted by José de la Cruz, MD, a fellow in cornea and refractive surgery.

In artificial cornea replacement, called keratoprosthesis, an artificial plastic cornea is anchored to a hole through the donor's cornea, the clear, strong surface area of the eye that allows light in. The artificial cornea is necessary when standard cornea transplants have failed, causing the implanted cornea to become opaque or invaded by blood vessels.

In standard cornea transplants, clear, healthy donor tissue is used to replace the patient's cornea after it has become opaque and can no longer transmit light. The most common causes of damage to the cornea are degenerative diseases and scarring due to infection or trauma.

Although research began in the 1960s, earlier attempts to create an artificial cornea had not been successful.

"In the earlier versions, there were often infections and long-term damage to the corneal scaffolding that holds the keratoprosthesis in place," says Azar. "The newer version, which we have three to five years' experience with in Boston, does not have these problems." Azar says there is a great need for an alternative to cornea transplant. Azar and de la Cruz both worked with Claes Dohlman, MD, at Harvard, who developed the artificial cornea.

"Patients whose corneas are damaged by infection or injuries like chemical burns often have poor outcomes, their cornea transplants either deteriorating or becoming opaque," de la Cruz says. "Many times, their physicians continue to attempt new transplants or give up entirely on restoring their vision, simply because there has been no other option."

L.C. Phillips, 53, of Chicago, one of the first two patients to receive the artificial cornea at UIC, had lost almost all vision in his left eye after an infection two years ago.

"My vision was limited to a sort of blur or shadow, and getting around had gotten complicated," he says.

Phillips had already had two cornea transplants, and both had failed, de la Cruz says.

"Because it was very likely that transplants would continue to fail, the keratoprosthesis was his only hope for restored vision."

"Since the surgery in December, Phillips' vision has been restored to 20/50, and we expect it to continue to improve," says Azar. Phillips wears a special contact lens, which will need to be replaced every few months. He places an antibiotic drop in his eye each day.

"It's a blessing to be able to see again," he says.

In the past, the artificial cornea was used only in cases of severe corneal burns, where corneal transplants were doomed to failure, but Azar says the success of the new keratoprosthesis design will extend its applicability to most patients who suffer from repeated transplant failures. The new keratoprosthesis still is not successful in cases of severe inflammatory corneal disease, which requires strong systemic immunosuppressive treatment to save the eye, he says.

Internationally Renowned Robotic Surgeon Joins UIC

by Sherri McGinnis González



Pier Cristoforo Giulianotti, MD, an international pioneer in robotic general surgery, has been named the Lloyd M. Nyhus professor of surgery and chief of the division of minimally invasive, general and robotic surgery at UIC.

"Dr. Giulianotti's expertise in performing robotic abdominal, thoracic and vascular procedures will ensure that the medical center remains a national leader in minimally invasive surgery," says Enrico Benedetti, MD, Res '93, interim head of surgery and chief of transplantation surgery.

According to Benedetti, Giulianotti has

perfected robotic-assisted surgical techniques for the removal of cancerous tumors of the lung and pancreas that are rarely performed in the United States. He also performs robotic surgeries of the esophagus, colon, stomach and liver.

An experienced surgeon who has performed more than 8,000 traditional surgeries, 1,300 minimally invasive surgeries, and 650 robotic surgical procedures, Giulianotti has trained more than 60 international physicians in robotic surgery.



UIC Named NIH Islet Cell Resource Center

by Sherri McGinnis González

has been named a National Institutes of Health Islet Cell Resource Center and awarded a threeyear, \$3.25 million grant.

One of seven federally funded centers in the United States, UIC will provide researchers across the country with human pancreatic islet cells for transplantation into diabetic patients and provide cells for basic science research.

"We will also conduct research and develop ways to improve cell isolation techniques, cellular viability and functioning, and shipping procedures for islet cells," says José Oberholzer, MD, principal investigator and director of cell and pancreas transplantation at UIC.

Working in collaboration with other islet resource centers, UIC will test and implement standardized methods for assessing islets to determine what factors may predict a successful islet transplant.

Insulin-producing islet cells from cadaveric donor pancreases are isolated and processed in a state-of-the-art, FDAapproved laboratory at the medical center.

The laboratory has provided islet cells for successful transplantation in patients at the medical center and also has shipped islets to institutions in the United States and Europe.



José Oberholzer, MD, is the director of the UIC islet cell laboratory.

Islet cell transplantation allows patients with type-I diabetes to achieve insulin independence, glucose control and freedom from hypoglycemic attacks, according to Oberholzer. Transplantation offers the most promise for achieving a functional cure for diabetes, but it also has limitations.

One shortcoming is the lack of organ donors. There are only 6,000 donor pancreases each year in the United States, and each organ can produce only enough islets to help, at most, one diabetic.

Transplant recipients also must take drugs to suppress their immune system in order to avoid rejection of the islets. "There are 20.8 million diabetic patients in the United States," says Oberholzer, "and most of them could benefit from an islet transplant if an unlimited source of cells was available and if the cells could be protected from rejection by a better means than the current immunosuppression."

Oberholzer and a team of international researchers have formed the Chicago Project, a collaboration of top scientists who are committed to helping diabetics worldwide by developing a cellbased cure for diabetes in the next five years. The Chicago Project aims to develop an unlimited supply of islet cells from donor pancreases and find a way to encapsulate the cells to prevent rejection.

"Becoming an NIH-funded Islet Cell Resource Center will enhance our efforts to find a functional, or cell-based, cure for diabetes," says Oberholzer.

"Clinicians and researchers at other centers will also benefit by having highquality islets procured, processed and distributed by a core facility with the highest standards."

Part of UIC's grant will fund scientific research at Northwestern University to improve the technology for evaluating the quality of islets.

For more information on the Chicago Project, visit www.thechicago protect.org.

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Bobbie and Marvin Fink Family Liver Clinic Opens

by Janny Manasse

The Bobbie and Marvin Fink Family Liver Clinic opened its doors on Feb. 19. This newly renovated 5,000-square-foot facility offers care for patients with liver disease and features seven exam rooms, three procedure beds and an educational conference room. The Fink Family Liver Clinic will accommodate up to 15,000 patient visits annually.

The new liver clinic was made possible by the philanthropy of Marvin Fink. A patient of the liver center, Fink dreamed of a place where patients could receive the very best care in an environment dedicated to the research and advancement of liver medicine.

Located in the Outpatient Care Center, the Bobbie and Marvin Fink Family Liver Clinic offers individualized care management to patients suffering from hepatitis B and C, nonalcoholic fatty liver disease, autoimmune hepatitis, primary biliary cirrhosis, primary sclerosing cholangitis, liver cancer and cirrhosis.



Pictured at the ribbon cutting ceremony are, from left, Chancellor Sylvia Manning, Dean Joseph Flaherty, MD, Michael Gilford, Beth Gilford, Joel Fink, Suzy Fink, Bobbie Fink, David Fink, Thomas Layden, MD, Bernadette Biskup and Scott Cotler, MD.

Info@

Contact the clinic at (312) 996-7598 or visit www.uillinoismedcenter.org/content.cfm/liver_disease.



Most Fertility Clinic Web Sites Do Not Conform to Ad Guidelines

by Sherri McGinnis González

he majority of fertility clinic Web sites do not adhere to their own association's advertising guidelines, according to a study by Tarun Jain, MD, assistant professor of reproductive



Tarun Jain, MD, assistant professor of reproductive endocrinology and infertility, published a study in the January issue of Fertility and Sterility on fertility clinic Web sites. endocrinology and infertility, and senior author of the study published in the January issue of *Fertility and Sterility*.

The study also found that services offered at private clinics and academic clinics were similar, but private clinics were more likely to publish success rates, use comparative marketing and

offer financial incentives.

Many consumers rely on the Internet to gather health information, and "the concern is that vulnerable patients may be misled by information that does not give the whole picture," says Jain.

Advertising guidelines adopted by the Society for Assisted Reproductive Technology and the American Society for Reproductive Medicine seek to improve the accuracy of online information for patients. The guidelines, which are mandatory for membership in SART, require clinics to provide specific information about how in vitro fertilization outcome statistics are reported, mandate that clinics follow Federal Trade Commission guidelines, and warn against the comparison of success rates between clinics.

In the new study, researchers evaluated 289 SART-registered clinics (211 private and 78 academic) with functional Web sites.

They assessed several Web site characteristics, including the publication of success rates, additional data to support success rates, comparison marketing, and the presence of a disclaimer stating that "a comparison of success rates may not be meaningful because patient medical characteristics and treatment approaches may vary from clinic to clinic."

The researchers found that approximately half of the Web sites published success rates, and, of those, the percentage adhering to the advertising guidelines was low in all categories evaluated.

"Despite an attempt to clarify assisted reproduction information on the Internet, there is a great deal of disparity among how clinics publish success rates on their Web sites," says Jain. "Patients need to carefully evaluate the information presented on Web sites, and they need to know what questions to ask when they meet face-to-face with a physician."

Thirty-six percent of private clinics and 22 percent of academic clinics complied with the advertising guidelines by providing specific information about the method used to calculate success rates. Only 44 percent of clinic Web sites that published success rates included the mandatory disclaimer statement.

The researchers also evaluated Web sites for advertising specific services, including donor egg programs, embryo and egg cryopreservation, pre-implantation genetic diagnosis, sex selection, shared-risk financing and 100 percent money-back guarantees.

Private-clinic Web sites were significantly more likely than academic clinics to offer financial incentives, including shared-risk financing, and to use the catch phrase "100 percent Money Back Guarantee."

According to Jain, the ASRM/SART advertising guidelines have not been strictly enforced. However, in some cases, the FTC has audited and penalized fertility practices for misrepresenting the success rates of their in vitro fertilization services.

Jain recommends that infertility patients not rely solely on success rates published on fertility-clinic Web sites.

"Patients should meet with a prospective physician and have their questions answered in person," he says.

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Sky Alliance Serves Community

by Ben Stickan

The alliance between the Chicago Sky, the Women's National Basketball Association expansion team, and UIC is a valuable community resource as they team up to fight cervical cancer.

Physicians from women's health, sports medicine and internal medicine became the official team physicians for the Chicago Sky in 2006.

The Chicago Sky works with UIC to promote messages of health to fans and the Chicago community. In 2007, the Chicago Sky generously agreed to donate up to \$10 per ticket to the I CARE fund, a fund developed to pay for screenings



UIC/Chicago Sky advertisement

and physician services for the uninsured.

Tickets can be purchased through the medical center Web site, and a portion of 2007 ticket sales will be allocated to the I CARE fund.



by Jeanne Galatzer-Levy

he surprising structure and properties of a protein responsible for regulating the transport, storage and use of iron—as it binds its target RNA—are described by researchers from the department of microbiology and immunology in the Dec. 22 issue of *Science*.

Iron is an essential nutrient, and defects in uptake and metabolism that result in either deficiencies or overload of iron cause a variety of diseases and disorders, including heart disease, arthritis and cancer.

The iron-regulating protein, called IRPI, has two structural forms, each with important functions within the cell.

When serving as one of two regulators of cellular iron metabolism through its control of gene expression, the tightly coiled IRP1 opens up to expose sites that bind messenger RNA at sites on the RNA called iron responsive elements, or IREs, that are common in genes involved in iron metabolism.

In its alternate form, IRP1 binds a cluster of iron and sulfur atoms to act as an important metabolic enzyme called aconitase. The assembly and disassembly of the iron/sulfur cluster in the aconitase form appears to be an effective mechanism for regulating IRP1 activity. "We found that when IRP1 releases the iron/sulfur cluster and opens up to bind RNA, it undergoes an extraordinary, unexpected rearrangement," says William Walden, PhD, professor of microbiology and immunology and lead author of the study.

"This is the crucial step in understanding the specialized cellular processes that have evolved to maintain internal iron concentrations at the appropriate safe and useful levels and is important to the future design of therapeutic targets," Walden says.

IRP1 is a very large protein, composed of about 900 amino acids arranged into four major domains.

"We expected that IRP1 would open up the two major domains facing each other along a hinge, rather like a clam shell, to accommodate the RNA binding," Walden says. "What we didn't expect was that that opening up would also involve extensive movement within the domains."

The researchers also found two widely separated contact sites between IRP1 and the iron responsive element, says Karl Volz, PhD, associate professor of microbiology and immunology and principal investigator of the study.

"This is one of the highest affinity

bindings we have ever seen. The effect of binding a single iron responsive element, through interactions at two separate binding sites, essentially eliminates the possibility of nonspecific binding," Volz says.

According to co-author Elizabeth Theil, senior scientist at the Children's Hospital Oakland Research Institute in Oakland, Calif., just as drugs targeted to the three-dimensional protein structure emerged in the last century, "knowing how the iron response element RNA is folded in the IRP1 complex is a gift to drug design targeted to 3-D RNA structure—a developing goal in this century."

The researchers believe the details of the IRP1:IRE interaction also are likely to apply to the other important iron regulatory molecule, IRP2, which they address in their conclusion: "What remains to be determined is the evolutionary origin and selective advantage of such dramatic conformational plasticity and dual functionality as found in IRP1."

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These two figures show the difference in domain positions between the two structural forms of IRP1, the ironregulating protein.

Rasenick Named Distinguished Professor

by Jeanne Galatzer-Levy

Physiology, biophysics and psychiatry professor Mark Rasenick, PhD, was named a UIC distinguished professor in 2007 in recognition of his accomplishments as a scientist and educator and for the impact his service has had on the campus and the international scientific community.

One of the founders of UIC's neuroscience program, Rasenick has served as director of the Biomedical Neuroscience Training Program since 1998. His research over the last 25 years has centered on neural signaling. This work, which has been funded continually by the NIH, aims to discover basic molecular and cellular cues about depression and other mood disorders. Rasenick teaches graduate and professional students and resident physicians. He received two Philip Hawley awards for graduate teaching and a nomination for the medical students' Golden Apple Award.

Outside of UIC, Rasenick works to strengthen science research in developing countries. He founded the InterAmerican Consortium on Basic and Clinical Neuroscience to foster cooperation in neuroscience between Latin America and the United States. The

group has met in Cuba, the Dominican Republic, Buenos Aires and Chile. Rasenick also participated recently in the U.S. State Department Scientific Delegation to Brazil.



Mark Rasenick, PhD



UIC College of Medicine Launches New Patient Safety Curriculum

by Jeanne Galatzer-Levy



has received a threeyear, \$438,000 grant from the U.S. Department of Education to pilot a fouryear curriculum that will adapt training and assessment tools developed in the aviation industry to address patient safety issues. The project will focus on skills such as communication, teamwork, leadership and stress management identified in the aviation industry as keys to reducing errors.

"UIC is in a unique position to take a leadership role in interdisciplinary patient safety research, education and clinical care," says David Mayer, MD, associate professor of anesthesiology and assistant dean for curriculum. "We are one of only nine universities in the country that has all six health science colleges on one campus."

Mayer, along with Marcia Edison, PhD, research assistant professor of medical education, and Anne Gunderson, EdDc, GNP, assistant professor of medical education and director of interprofessional patient safety education and research, are developing the new curriculum.

The first two years of the curriculum will incorporate classes and small-group

workshops. In the third and fourth year of medical school, students will participate in team-based skills courses incorporating activities, games, role-plays and reflective learning.

Professional standardized patients from the UIC Clinical Performance Center will portray physicians, nurses and technicians. They will give students extra experience with different simulated scenarios, including patient encounters, peer-to-peer communication, medical consultations, and surgical and other team-based activities.

The educational program also will evaluate how well the training and assessment tools reflect student performance in team-based simulation scenarios. Program outcomes will give other medical schools a model to design curricular changes for patient safety called for by the Institute of Medicine.

Study Compares LASIK and LASEK Eye Surgery

by Jeanne Galatzer-Levy



A study comparing the safety, effectiveness and reliability of LASIK and LASEK has found no clinically significant differences between the two types of laser eye surgery.

"Although there have been many studies of the safety and efficacy of both types of laser surgery, there has not been a large

study directly comparing the outcomes of the two procedures," says Dimitri Azar, MD, Thanis Field professor and head of ophthalmology and visual sciences.

In the retrospective, case-matched study, eyes that had undergone laser eye surgery were matched for a number of measures, including visual acuity and astigmatism; 122 LASIK-

LASIK | A flap is made in the top corneal layer to permit access to the underlying cornea. It avoids most of the problems of corneal haze, postoperative pain and slow rehabilitation seen in PRK, but complications sometimes are associated with the flap.

treated eyes were matched for all measures with 122 LASEKtreated eyes from a review of the charts of 2,257 eye surgeries performed by Azar. All patients' outcomes included a follow-up of at least six months.

"We found that although there were some differences in the visual and refractive results that favor the LASEK procedure, the differences were not clinically significant," says Azar.

"These results are in line with previous smaller studies that we reviewed comparing the procedures. Both seem safe, effective and predictable for the treatment of low to moderate myopia (nearsightedness)."

Contributors included Faisal Tobaigy, MD, Ramon Ghanem, MD, Rony Sayegh, MD, and Joelle Hallek, BA, of Harvard Medical School. Funding was provided by the New England Corneal Transplant Research Fund, Massachusetts Lions Eye Research Award.

LASEK | The surface corneal layer is treated with alcohol and then peeled back to permit reshaping of the underlying layer. It avoids all flap-related complications associated with LASIK, and has less postoperative pain and faster recovery than PRK.

Dimitri Azar, MD, saw his study published in the December 2006 issue of the American Journal of Ophthalmology.

Campus Rounds | News



Protein That Kills Cells Also Important for Memory

by Diana Yates



David F. Clayton, PhD, left, and Graham R. Huesmann, PhD, MD, have studied how zebra finches learn songs, which could have implications for the treatment of neurodegenerative conditions such as dementia and Alzheimer's disease.



protein known primarily for its role in killing cells also plays a part in memory formation, researchers in Urbana-Champaign report. Their work exploring how zebra finches learn songs could have implications for treatment of neurodegenerative conditions such as dementia and Alzheimer's disease.

When activated, the enzyme caspase-3 triggers a synaptic process essential for memory storage, according to Graham R. Huesmann, PhD '05, MD '07, and David F. Clayton, PhD, professor of cell and developmental biology at the U of I Beckman Institute for Advanced Science and Technology. Their article, which appeared in the Dec. 21 issue of the journal *Neuron*, describes their findings, which provide "the first direct evidence of a change in the availability of activated caspase-3 protein in the brain during the process of memory formation."

Caspase-3 is best known for its role in a biochemical cascade that leads to apoptotic cell death. These new findings demonstrate that the enzyme acts differently under different conditions, and suggest that its regulation in the brain is more complex than previously thought.

Huesmann and Clayton examined the brains of zebra finches after exposing the birds to tape recordings of the songs of other birds. They found an increase in the concentration of activated caspase-3 in postsynaptic sites of the auditory forebrain shortly after the birds were exposed to unfamiliar bird songs. Exposure to familiar songs caused no significant increase in the enzyme.

The researchers demonstrated that the activated form of caspase-3 is short-lived and highly localized, which may explain why the enzyme does not trigger apoptosis.

They also showed that activated caspase-3 is always present in brain cells, but that it usually is bound by an inhibitor, BIRC4. For a short time after the birds are exposed to novel songs, the inhibitor releases the activated caspase-3. The concentration of unbound, activated caspase-3 peaks about 10 minutes after the birds hear the new songs.

Other research has added to the evidence that caspase-3 is essential to memory formation. Caspase-3 inhibitors injected into rat brains interfere with the animals' spatial memory and active avoidance learning.

Caspase-3's dual role as a cell killer and memory builder has long intrigued Huesmann, lead author of the study. "Is it Memory or Is It Death? Caspase-3 and Memory Formation" was his dissertation title. Huesmann has a doctorate in neuroscience and received a medical degree in May.

"Graham had this intuition that growth and memory are really a kind of remodeling," says Clayton. "You can't have growth without death."

Rockford

Retirement Can't Slow Down Rockford Doctor

by Heather Hoffman

ichael Werckle, MD '66, has been a part of the College of Medicine at Rockford almost from its beginnings. Even though he now is retired, he remains an integral part of the college as it begins the next phase of its life.



Werckle began his career with the college in 1977. After completing his residency in internal medicine in Michigan, he became associate director of public health for the state of Illinois. As someone who grew up in Rockford, he was ready to return to his roots. "I wanted my children to grow up with their cousins," he says. "I still had much family in

Michael Werckle, MD Rockford and wanted to be closer to them."

Werckle joined the college as assistant dean and director of medical education. He also worked half-time in the health teaching center. "At the early stages, it was an exciting place to be," he recalls. "Everything was brand new."

In 1980, he left his director and dean positions to open a

private practice, but he continued to teach. In 2001, he returned to the college as the internal medicine clerkship director. In 2003, he became medical director of the Rockford clinic.

Retiring from private practice has given him more time to devote to the college. He still volunteers his time teaching at the hospital, but he now has his focus on something bigger.

"I am going to be involved in fundraising for the college's expansion," he says. "I've been here since the beginning, and it is amazing to see how polished the school is now. I am excited to see the new buildings and the new pharmacy school. There is much to be done at Rockford, and I want to see all that is happening."

Werckle's admiration for the college is what drives his new mission. "First, I believe in the school and what it does for primary care and rural medicine. Second, it has been a catalyst for Rockford. The school and the expansion will help bolster Rockford. I want to do everything I can to see that happen.

"I'm working with the college's executive committee as an advocate for the college as a whole. I think this new role is good for me for the right reasons. I'm very impressed with the school. And I would put our students far above any other in reference to clinical knowledge."



Cord-Blood Stem-Cell Findings Published

by Jim Burwitz



Jasti S. Rao, PhD

Researchers at the College of Medicine at Peoria successfully transplanted human umbilical-cord-blood stem cells into the spinal cords of paralyzed adult male rats. Within two weeks, the injured animals showed recovery of hind-leg locomotor function.

"This animal study will help us understand the molecular

mechanisms involved in myelin basic proteins, FAS, caspase-3, NT3, BDNF, etc., after treatment with stem cells," says Jasti S. Rao, PhD, professor and head of cancer biology and pharmacology, who led the study along with Dzung Dinh, MD, professor

of neurosurgery. Their findings were reported in the March issue of the *Journal of Neurotrauma*. The study eventually may help provide novel therapeutics for spinal-cord-injury patients.

In 2004, the Illinois Hospital Licensing Act was amended

so that state hospitals could begin offering pregnant women the option of donating unused cord blood to research facilities or public banks.

Methodist Medical Center, OSF Saint Francis Medical Center and Proctor Hospital are participating in Peoria's collection and research programs. Combined, the three institutions account for approximately 5,000 infant deliveries each year.

Those numbers are especially promising to Peggy Mankin, health research specialist, who manages local collection efforts and educates potential donors about the benefits of human umbilical-cord-blood stem cells.

"If a pregnant woman has not made a decision to bank her baby's cord blood, she may want to consider donating it for research," says Mankin. "It's an irreplaceable source of stem cells that is being used worldwide in a great variety of medical and research applications."

[FUNDING] National Institutes of Health Illinois Department of Public Health

Chicago

Marc Atkins, PhD, professor of psychology in psychiatry, is editor in chief of Springer Publications' journal *Child Care Youth Forum*.

Ananda Chakrabarty, PhD,



distinguished university professor and professor of microbiology and immunology, received the Padma Shri, a civilian award, from the president of India,

Abdul Kalamin, in March for his science and technology contributions to India. He has been an adviser to India's department of biotechnology for 20 years.

Anke Di, MD, PhD, research assistant professor of pharmacology, has been awarded the Parker B. Francis Fellowship in Pulmonary Research (award amount \$150,000), which supports the development of outstanding investigators who plan careers in pulmonary research.

Robert Gibbons, PhD, professor of biostatistics and psychiatry and director of the Center for Health Statistics, served on an Institute of Medicine's special experts panel that compiled a report calling for FDA reform of the drug-approval process. The *Harvard Health Letter's* annual list of the nation's top 10 health stories of 2006 includes the report.

Philip B. Gorelick, MD, MPH,

professor and head of neurology and rehabilitation and director of the UIC Center for Stroke Research, and Dilip K. Pandey, MD, PhD, associate professor of neurology and director of neuroepidemiology and clinical trials at the center, have been invited to South Korea to assist the South Korean Health Ministry in establishing a 10-year, nationwide program for stroke and cardiovascular disease prevention. Martin Harrow, PhD, professor of psychiatry, received the Joseph Zubin Award for lifetime contributions to the understanding of psychopathology at the annual meeting of the Society for Research in Psychopathology in San Diego in October. The society gives one such national award each year.

Gail Hecht, MD, professor of medicine and chief of digestive disease and nutrition, is vice president of the American Gastroenterology Association and will serve as its president beginning in May 2009. She is the first woman elected president of that organization post-World War II. Hecht also received the College of Medicine Faculty of the Year Award in May.

Asrar Malik, PhD, professor and



head of pharmacology, received the American Thoracic Society 2007 Recognition Award for Scientific Achievement at its annual

meeting in San Francisco in May. The award recognizes his outstanding scientific contributions to the understanding, prevention and treatment of lung disease. It also acknowledges his research of the barrier properties of endothelial and epithelial membranes and how they contribute to the regulations of fluid compartmentalization. The society has 18,000 members.

Claudia Morrissey, MD, MPH,



assistant dean for faculty advancement, was voted president-elect for the American Medical Women's Association, the oldest and largest multispe-

cialty organization for women physicians in the country. Her term will start in 2008.

José Oberholzer, MD, director

of cell transplantation, in December received a 2006 Excellence in Research Award from the National Disease Research Interchange for his contribution to the future of islet cell transplantation for diabetics. His research in islet cell biology and immunology and his skills as a hepatobiliary, pancreatic and transplant surgeon have placed him at the forefront in the field of islet cell transplantation.

Konstantin Slavin, MD,

assistant professor of neurosurgery, was elected president of the Russian American Medical Association at its fourth annual meeting in New York in October 2006. RAMA is a national organization that unites Russianspeaking physicians, represents their professional interests, and provides a forum for scientific, clinical and social interactions. The next conference will be held at UIC in October.

Pamela Wiegartz, PhD, assistant professor of psychiatry, had 10 Simple Solutions to Worry: How to Calm Your Mind, Relax Your Body, and Reclaim Your Life published in December by New Harbinger. Co-written by former psychiatry intern Kevin Gyoerkoe, the self-help book was created for patients looking for effective, cognitive-behavioral strategies for managing their anxiety and worry.

You-Yang Zhao, PhD, assistant professor of pharmacology and a member of the Center for Lung and Vascular Biology, has been selected for the EB 2007 Respiration Section New Investigator Award. This honor, conferred by the American Physiology Society, includes a certificate and a cash prize of \$1,000. Zhao was recognized in April at the Respiration Section banquet during the Experimental Biology 2007 annual meeting in Washington, D.C.

Peoria

Donald L. Frederick, PhD,

clinical assistant professor of pathology, is chair of the Therapeutic Drug Management and Toxicology Division of the American Association for Clinical Chemistry, a national post that he will hold through 2008.

Roger W. Geiss, MD, professor and head of pathology, has been a council member of the Medical School Course Directors Section of the national Association of Pathology Chairs.

E. John Wipfler III, MD, associate clinical professor of emergency medicine, was appointed to the editorial board of the International Tactical Emergency Medicine Society's Journal of Tactical Emergency Medicine and is the author/editor of NMS Emergency Medicine, a textbook published by Lippincott in 2006. He is also the lead author of the textbook Tactical Emergency Medicine, to be published by McGraw-Hill this summer.

Rockford

Errol C. Baptist, MD, received the nomination for the AAMC Humanism in Medicine Award from UIC in 2006 and received the Leonard Tow Humanism in Medicine Award presented by the Arnold P. Gold Foundation in 2006.

Sherry Falsetti, PhD, associate professor of family and community medicine and director of behavioral sciences, contributed a chapter to *Psychological Effects of Catastrophic Disasters: Group Approaches to Treatment*, an award-winning finalist in the Best Books 2006 National Book Awards.

Martin Lipsky, MD, regional dean and professor of family medicine, served as medical editor of the *Concise Medical Encyclopedia*, published by the AMA. The new edition is available now.

Jeffrey J. Galvan, MD,

clinical instructor of obstetrics and gynecology, received the 2006 Excellence in Teaching Award from the Association of Professors of Gynecology and Obstetrics.

C.K. Gunsalus, JD, adjunct

professor of medical humanities and social sciences, was appointed by the Illinois Supreme Court to the Commission on Professionalism and was invited to present on "Ethics, Professionalism and Regulation" at the Second Annual Congress on Qualitative Inquiry. In addition, she currently is involved in a College of Medicine-funded, pilot project with an interdisciplinary collaborative group on the efficacy of novel approaches to improving communication skills of medical students and professionals.

Medical Alumni Council | News

AlumniConnections

Keeping the Fire Ablaze

by Heather Hoffman

Students and alumni mingle at the Student Affairs Holiday Party in December. From left are Vipan Nikore, M1; Melissa Dianovsky, MD '92, BS '88; James Grant, MD '54; and Christine Carqueville, M1.



ith everything the Medical Alumni Council does for students, council member Melissa Dianovsky, MD '92, BS '88, feels she gets just as much out of the experience.

"Being on the council is refreshing for people who have been working in medicine for a while," she says. "Part of my job requires that I deal with insurance and paperwork, but when you work with students you get to see the fire ablaze and the excitement of medicine instead of the things that bog you down. It simply brings back the joy of medicine."

As the newest member of the council, Dianovsky is excited at the many volunteer activities that provide student interaction. "I didn't have much contact with alumni while I was in school. I don't remember alumni being around unless they were staff or faculty."

The Medical Alumni Council is doing its best to change that by taking an active role with students.

"I actually read about the council in *UIC Medicine* magazine," says Dianovsky. "They were looking for new members, and I thought the opportunity sounded interesting, so I volunteered." She is now one of 10 alumni from different graduation years, specialties and geographic locations who make up the Medical Alumni Council.

"In addition to opportunities to interact with students, there is also the interaction of the council members. We all graduated from UIC but are so diverse." The council includes members in academics and private practice, in specialties ranging from psychiatry to surgery. Dianovsky, a pediatrician, knows that diversity is something the council takes seriously.

"One of several missions of the council is to get alumni classes to raise scholarship funds so all students have the opportunity to attend medical school," she says. As the stepmother of a 17-year-old, Dianovsky understands the financial burden of college. "When looking at tuition for undergraduate education, it is outrageous. Coming from a very middle-class family, I remember being able to attend the University of Illinois because it was affordable. We need to keep diversity at UIC. We need students from various backgrounds, because diversity in medicine will benefit all patients. We need to keep education accessible."

Dianovsky sees the initiatives of the council as twofold, advocating for the medical students and keeping alumni connected. The college not only has to keep education within reach financially, but alumni within reach as well. "It's important to have alumni advocates available in a range of specialties," she says. "Students are genuinely interested in your experiences. They want to get a taste of what medicine is like out in the real world.

"I've enjoyed my experiences working with students," says Dianovsky. "I've attended the White Coat Ceremony. Seeing students celebrating the beginning of medical school with their fellow students and family was so much nicer than what we did with our coats when we graduated. We burned them!"

Although her white coat may have met a bitter end, Dianovsky assures that it was no reflection of her time at UIC. "When I left UIC, I felt like I was almost overprepared for my residency. Sure, the facilities are a little older at UIC, but I didn't walk away with thoughts of facilities. I walked away with a great education that prepared me well for my career in medicine. My memories are of meaningful relationships with my classmates, professors and attendings. We were given countless skills, and much was expected from us," she recalls.

Dianovsky's experiences fostered her desire to reconnect with the college, its alumni and students. **"My wonderful experiences and positive relationships are what propelled me to volunteer, and I am just as excited now about being involved with UIC as I was when I was in school."**

Become a More Active Alumnus

 Keep your contact information up to date.
Become a member of the University of Illinois Alumni Association.
Return to the college for special events or

volunteer opportunities. | Provide your yearly support to the Annual Fund.



For more information on Medical Alumni Council volunteer opportunities, please visit www.medicine.uic.edu or contact Elizabeth Skinner at (312) 996-1511 or med-email@uic.edu.

StudentNews

Match-Making Day for Medical Students

by Jeanne Galatzer-Levy

ust before 11 a.m. March 15, Cyrus Press, president of the Chicago medical class of 2007, performed one of the most important tasks of his tenure: leading 161 senior medical students, their friends, families and faculty in a countdown to the moment they would learn their medical futures.

The students who gathered at the Soldier Field Cadillac Club were a fraction of the more than 15,000 graduating medical students in the United States who participated in this year's National Resident Match Program.

On the third Thursday in March every year, senior medical students trust the program's computer algorithm to align their preferences with those of U.S. teaching hospital residency programs.

The match was established in 1952, at the request of medical students, to provide a fair and impartial transition from medical school to residency training.

The event is a tradition bright with smiles, hugs and, in recent years, the buzz of cell phones as news is shared with those who couldn't be there.

The students were called up in groups of 10 and handed the fateful envelopes. Most took them back to share with family and friends before returning to the podium to announce successful matches to first choices and top programs like the University of Michigan, Mayo, Colorado, Johns Hopkins and Case Western.

In other cases the best news was staying in Chicago, wellrepresented by matches to UIC, the University of Chicago, Northwestern and Rush. Obinna Emechebe Kennedy says matching to UIC's sole residency in neurosurgery completes a circle that began when he was a senior pharmacy student.

Invited to observe bypass surgery on a stroke patient, he knew at that moment that this was what he wanted to do.

"I talked to an attending physician in the department, who encouraged me to apply to medical school and see where it would take me," says Kennedy.

"This spring I interviewed with the same attending, Fady Charbel, who is now head of the department."

The College of Medicine has a total of 302 senior medical students on its four campuses.

Of the 161 matched from the Chicago campus, 101—about 63 percent—are staying in Illinois. One in six doctors practicing in Illinois graduated from the College of Medicine.

For the Chicago campus, the most popular specialties were internal medicine, with 36 placements; emergency medicine with 16; anesthesiology with 13; and ob/gyn with 10.

Ob/gyn's popularity reflects a growing nationwide trend, according to the residency matching program, which reports that interest in those residencies has risen in the past few years.

UIC placed eight students in medical pediatrics, a difficult specialty that requires board certification in both medicine and pediatrics and one that had no UIC placements recently.

As the final envelope was handed over, along with \$525 cash-a traditional prize for the last student collected from students as they arrived at the party-some of the wide smiles dissolved to tears as the tension of the day was released and the students, their families and the faculty who had seen them through the long years of medical school finally relaxed.



Obinna Emechebe Kennedy, left, and classmate Obi Ekwenna get the news: Kennedy got **UIC's solo** neurosurgery slot and Ekwenna will head to the University of Miami in urology.



ABOUT STUDENT ACTIVITIES Please contact the Office of Student Affairs. **College of Medicine** West, Room 112, at (312) 996-2450. or online at

www.uic.edu/

depts/mcam/osa/.

For more information on matches, please visit

www.uic.edu/depts/mcam/osa/.

ResearchForums

College of Medicine Student Medical Research Forum Winners

MD Category First Place: Amy Bellmeyer Second Place: Esther Ro Third Place: Joannie Yeh

MD/PhD, PhD Category First Place: Fadi T. Khasawneh Second Place: K. Jessica Gierut Third Place: Vladislava Juric

First Place: Mona Stoicescu Second Place: Yoona Rhee Third Place: Betsy McGee

Midwest Student Biomedical Research Forum Winners

Medical Student Oral Presentation Category First Place: Amy Bellmeyer

Graduate Student Poster Presentation Category First Place: K. Jessica Gierut Second Place: Fadi T. Khasawneh





Students Jennilee Tuazon, Judy Liu, Jenny Yeh and Esther Kim were among those faculty, staff and students who enjoyed the 2007 Winter Ball in February. The annual event was held at the **Chicago Cultural Center and raised funds for the** medical center's Children and Adolescent Center.

BrilliantFutures

[BRILLIANT STUDENTS] The face of medicine at UIC— Rishi Rattan, Andrea Pappalardo and Jewmaull Reed

THE STORIES OF THREE MEDICAL STUDENTS-

Andrea Pappalardo, Jewmaull Reed and Rishi Rattan– illustrate the caliber of the future physicians who attend UIC, and the impact scholarships have on their lives.

ANDREA PAPPALARDO is leading a course in medical Spanish for the nine UIC medical students and residents gathered around a conference room table in the pediatrics wing of the University of Illinois Medical Center. As the students read phrases from class worksheets, Pappalardo picks up on key terms and drills the class with questions.

"Sangre. Que es sangre?" she asks. "Blood," the students reply.

"Sangre goes through what in your body?" Pappalardo presses them, then recites: "Vasos (vessels), venas (veins) y arterias (arteries)."

Pappalardo and fellow fourth-year medical student Jaime Moreno taught the course on Monday nights for two months this past winter. Pappalardo recruited two other students to teach the class's second weekly session. The all-volunteer effort reflects the commitment to providing healthcare for underserved patient populations and making medicine a means of improving society that's typical of many UIC medical students.

That commitment is becoming harder to maintain as the cost of medical education rapidly rises, making scholarship assistance crucial for students like Pappalardo and her peers.

"We want to increase funding for scholarships so we can recruit students who have the desirable physician qualities of compassion, humanism and altruism," says Kathleen Kashima, PhD, senior associate dean of students.

"If we have the ability to recruit students who as physicians would provide patient care in Illinois and in underserved areas, we would be true to the college's mission to produce an outstanding and diverse group of physicians for society."

College of Medicine tuition and fees are \$27,264 for first- through fourth-year Illinois residents, and \$55,318 for out-of-state students. Summer enrollment (required for second- and third-year students) costs are \$13,772 and \$13,824, respectively (\$23,261 and \$23,313 for out-of-state students). The college's financial aid office estimates that the total cost of tuition and fees for four years of medical school at UIC is \$136,652 for in-state students and \$267,846 for out-of-state students. This does not include books, supplies, and room and board, which average an additional \$17,050 per year for all students.

At UIC and other medical schools, students rely on loans to cover most of these costs. During the four-year period from 2003 to 2007, UIC medical students took on an average of \$166,000 in student loan debt while receiving an average of \$14,500 in scholarships. By comparison, the average indebtedness for 2006 graduates of public medical schools was \$119,000, and private school graduates' average debt totaled \$149,000, according to the Association of American Medical Colleges.

Despite these financial burdens, more students than ever want to attend medical school at UIC. As of mid-March the college had received 7,132 applications for the 300 available seats in the class of 2011—a 23 percent increase on the 5,788 applicants for 2010. By comparison, the percentage of students applying to medical school nationwide has risen by 9 percent, according to Kashima.

"Having this large number of candidates enhances our ability to admit a talented and diverse pool of students," Kashima says.

COMMUNICATING IS KEY

Growing up in Chicago and the western suburbs, Pappalardo, who received her degree in May, was inspired by the doctors who cared for her younger brother, who has disabilities caused by a neuromuscular disease. "They were so wonderful with him, making him feel comfortable in a situation that's inherently uncomfortable," she says.

In addition to her interest in medicine, she also developed her passion for Spanish when she enrolled in a middle school that required classes in the language. While studying biology and Spanish at Washington University in St. Louis—where she graduated magna cum laude—she traveled to Nicaragua on a medical mission, and in the summer she worked as a language interpreter at a pediatrician's office. **"WE WANT TO** increase funding for scholarships so we can recruit students who have the desirable physician qualities of compassion, humanism and altruism."



Kathleen Kashima, PhD, senior associate dean of students

She taught and coordinated a medical Spanish class for her fellow students during her first two years at UIC (her clerkships prevented her from continuing it in her third year), and this year initiated the class for residents.

"There are tons of Spanish-speaking patients, and when people insist on speaking English to patients who don't, it just doesn't work," she says. "If you don't have patient communication, you don't have the patient's trust, you don't feel comfortable with the patient, and errors occur. It's just humane to be able to communicate with your patient."

Pappalardo also has coordinated interpreters at a free clinic for uninsured patients staffed by UIC doctors, where she now volunteers one night a month, and she's been active in La Rama, a national Latino medical student organization.

She just began a residency in internal medicine and pedi-

"THE GIFT OF A scholarship is huge. Any help is a great help."



James Pritchard, MD, and Andrea Pappalardo, MD

Chicago Average **Tuition and Fees**

\$27,264 at UIC

\$37,744 at Loyola University Chicago Stritch School of Medicine

\$40,814 at Northwestern University Feinberg School of Medicine

\$41,215 at University of Chicago Pritzker School of Medicine

*Financial aid office data



desire to provide long-term care to patients with chronic childhood conditions such as her brother. "With the improvements in medicine, we're seeing patients with cystic fibrosis or congenital heart disease who are living into

atrics at the University of Chicago. Her

their 30s, and the internal medicine internist doesn't know how to take care of them," she says. "With the dual specialty, I might think of things that other doctors don't."

This year, Pappalardo received the Pritchard Scholarship, a \$5,000 award established by pathologist James C. Pritchard, MD '58, Res '63. "The gift of a scholarship is huge," she says, noting that she has reached

the limit on her government loans. "Any help is a great help."

An emeritus clinical associate professor of pathology at UIC, Pritchard has seen the escalation of medical school costs firsthand. "I realized how much it costs today even at a public university to get the quality medical education that UIC provides," he says. "I thought one thing I could do to show my appreciation was to establish a scholarship."

Pritchard, who also owned his own pathology practice in Chicago's western suburbs, recalls that when he attended medical school, tuition was a few hundred dollars a year. "You could graduate without debt. That's virtually impossible today," he says. "That's why scholarships are so helpful."

EXPLORING THE HUMAN BODY

Jewmaull Reed sees his medical studies as an extension of a family lineage that stretches from his psychologist mother to a great-grandmother who was a folk healer. "Ever since I can remember, I wanted to be a doctor," says Reed, a second-year medical student and native of St. Martin, the Caribbean island.

"The body is the last frontier," he continues. "When you get

into medical school, you realize the body is miraculous, and there's still so many things about it doctors don't understand. It's a great thing to explore."

Reed came to UIC with a strong interest in research that he first developed as a student at North Carolina State University, where he double-majored in biochemistry and chemistry. He worked on a study of the effects of dopamine in aggressive behavior of the blue-headed wrasse, a tropical fish that can change its gender. The project put his training as a scuba diver to good use, as he spent the summer before his senior year in St. Croix, one of the U.S. Virgin Islands, floating above a coral reef writing observations about the fish on a waterproof tablet.

After graduation, he worked at Mt. Sinai Medical Center in Miami, Fla., monitoring regulatory compliance in a \$30 million, nationwide, multisite NIH study of the effects of

chelation therapy, a controversial and unproven alternative treatment for coronary disease.

Reed worked under the hospital's head of cardiology on the study and wants to combine clinical work and research in his own medical career. He also hopes to operate his own clinics, including one back home in St. Martin.

"Healthcare in the Caribbean is not up to par," he explains. "They need trained physicians, and I

"WHEN YOU GET into medical school, you realize the body is miraculous."



Marjorie Kaiz Offer and Jewmaull Reed

know I could do some good there, not only being a physician, but also by helping to change the infrastructure of how the healthcare system is run."

Reed is attending UIC on a partial scholarship created by Marjorie Kaiz Offer and her brother Gerald H. Kaiz in the memory of their parents, Seymour P. Kaiz, MD '35, and Ruth E. Kaiz. "I'm very grateful for it," says Reed. "It means that the time I have to spend paying back my loans and not putting myself in a position that would help other people will be lessened. It gives me a jump-start on my life."

"The thread through my father's life was his devotion to medicine and the community through medicine," says Offer, a research assistant in the department of psychiatry and behavioral science at Northwestern University Medical Center. "We thought the finest way we could honor him was to help people like him so they would have the same opportunities to give back to their communities. It's such a long road in medical education, and maybe for some people it can make a smoother road, so life is not quite as stressful."

REVITALIZING STUDENT STUDY SPACES



Support for medical students takes many forms other than scholarships. One of them is providing a supportive physical environment conducive for their studies. With this goal in mind, the College of Medicine recently renovated the **Sigmund Edelstone Student Center** to provide a revitalized space for students to study and socialize.

In addition to new paint and carpeting, the center has new, ergonomically comfortable furniture, including chairs and carrels for individual and small group studying and a new sofa ir the television lounge. The renovation also expanded the size of the center to accommodate all the students' lockers.

In addition to renovating the center, the college plans to create more student learning and study spaces when it renovates the first and second floors of the College of Medicine to group student support services and educational spaces to facilitate student access.

"While Edelstone has some nice features, there's insufficient space for our students to study 24-7 on campus," says Kathy Kashima, PhD. "We admit these amazing students who want to come here because we provide an excellent medical education, and they should have enough comfortable places to study. It's a needed, positive change."

MEDICAL ACTIVISM

While Pappalardo devotes her days to her clinical rotations and Reed spends most of his time in class or the library, second-year student Rishi Rattan juggles his medical studies and activism. He volunteers once a month at a free clinic on Chicago's North Side that treats Indian immigrants, organizes demonstrations and workshops protesting healthcare cuts and disparities, lobbies elected officials about healthcare issues, and speaks to high school and college students about sexually transmitted disease prevention.

"When I stopped studying so much, my grades improved," Rattan says. "I know if I want to use the position of physician advocate for good, I have to be a physician first, but I think it's doable if you're discriminating with your time."

A native of Chicago's near western suburbs, Rattan first saw the multifaceted role doctors can perform when he spent the summer before his senior year in high school volunteering at Mt. Sinai Hospital in Chicago, where his father, Pradeep Rattan, is a psychiatrist. "I saw doctors being able to provide so much more than medical care, like support, guidance and counseling, and patients putting so much trust into the doctors," he remembers.

Like Pappalardo, Rattan graduated from Washington University, cum laude, where he majored in women and gender studies while satisfying his premed requirements with a minor in biomedical physics. In addition to deferring some of the cost of his education, the scholarships he's received to attend UIC have helped him travel to conferences and political gatherings, where he's made presentations, met with healthcare leaders, and lobbied for legislation.

"I like the aspects of medicine that deal with social factors," he says. "It's challenging, because sometimes

the problems seem so dire, but sometimes what patients need the most is someone who cares and can advocate for them. It's more than providing medications and ordering tests."

Attending these events has greatly influenced Rattan's goal to work abroad as a physician-advocate after completing his medical education. "If it weren't for the financial freedom this generosity offered, I wouldn't be headed down this path. I'm very grateful for that," he says.

Rattan has received a scholarship funded by Marshall I. Matz, MD '64, Res '69, and his wife, Janice. Matz is a clinical associate professor of neurological surgery at UIC and a neurosurgeon at Saints Mary and Elizabeth Medical Center in Chicago.

"We wanted to support someone who was both a good student and showed an interest in other areas related to medical care," Matz says. Rattan has earned a number of awards this year, including the UIC-wide Eugertha Bates Memorial Award for Selfless Commitment, the Chancellor's Student Service Award for Volunteer Service, the C. Abbas Hyderi Award for Outstanding Leadership and the Student Service Award for Outstanding Service.

"I would hope those who receive the scholarship would continue not only the practice of medicine but other things that go with the practice of medicine, such as caring for the poor, the disenfranchised, both in the third world and in this country."

"Without UIC, who knows what I would have done," adds Matz, noting that tuition was \$150 a quarter when he attended medical school. "Establishing this scholarship seems like such an obvious thing to do. I don't know why everybody doesn't do it."

"SOMETIMES WHAT





Marshall I. Matz, MD, and Rishi Rattan



THE CAMPAIGN FOR THE UNIVERSITY OF ILLINOIS AT CHICAGO

WAYS TO GIVE

With the start of the capital campaign, Brilliant Futures, the college is seeking funds to bolster scholarship support for its students. To learn more about how you can help, please contact the Office of Advancement at (312) 996-4470 or med-email@uic.edu.

For more information visit www.brilliantfutures.uic.edu.

Oncology/Hematology

by Carmen Marti

Novel Treatment = Normal Life

Steve Lamstein was able to visit with David Peace, MD, left, and Ron Hoffman, MD, right, in the College of Medicine Research Building during one of his quarterly checkups last January.

STEVE LAMSTEIN WAS LOOKING FOR THE BEST.

In 1995, the now 63-year-old New York real estate investor had been diagnosed with polycythemia vera, a bone marrow disorder that causes an abnormal increase in red blood cells. For almost 10 years he visited New York physician Harriet Gilbert for phlebotomies every four to five days.

Then Lamstein started needing fewer of these procedures, which he originally thought meant he was improving. "But that was not the case," he says. Instead, Lamstein had developed myelofibrosis, a fairly uncommon condition that affects the body's ability to make red blood cells. The body tries to adapt by making cells in other organs, such as the spleen or liver. In 5 to 20 percent of cases, this leads to acute myelogenous leukemia.

When Lamsteiri's case seemed to be going that way, he launched a national search to find the best treatment he could. He found the University of Illinois at Chicago.

Lamstein's other physician in New York, Gail J. Roboz, MD, had recommended he try to see Ronald Hoffman, MD, Eileen Heidrick professor of oncology at UIC and an expert in leukemia. When Lamstein reviewed Hoffman's track record, "It was clear he was one of the leaders in the field." And there was the fact that Lamstein had once heard Hoffman speak in New York. He had been "quite impressed," he says. "That made it very easy to choose UIC."

So, on May 10, 2006, Lamstein came to Chicago expecting to have a stem cell transplant. Between conditioning the body for treatment, performing the actual procedure and getting through the beginning stages of recovery, he would need to stay three to six months. And because of his poor health, he came with a support group—one of his daughters, his sister and his best friend, who also happens to be a doctor.

Their initial meeting with Hoffman lasted two-and-a-half hours, with Hoffman addressing every question they had. "And we had prepared a lot," Lamstein says. "But Dr. Hoffman and his colleagues had thought it all out in a way that makes you feel like they've been through it personally. There was nothing left to chance. They were extraordinarily responsive and thorough."

During the discussion, Hoffman introduced Lamstein to David Peace, MD, chief of hematology and director of the transplantation program. As they discussed Lamstein's case, it became apparent that his underlying health conditions—age, heart and lung problems, diabetes, sarcoidosis, shingles and other complications—were too serious to do a conventional stem cell transplant with high-intensity therapy. Instead, a novel treatment using bone marrow transplantation after attenuated "conditioning" was recommended.

This approach, pioneered by the physician-researchers at UIC and a team in Italy, uses nonablative, or reducedintensity, transplantation conditioning to make room for new blood-producing cells to be introduced into the system. It's much less stressful on the body and therefore more suited for patients with complex conditions.

And, when performed at UIC, it's also highly successful. UIC's team has been performing one regimen; the Italians another. According to Peace, "The combined efforts have been dramatic. Of the 21 patients treated, 18 showed good survival results," he says. "That's 92 percent. It's quite an advance, and, because of that, we offered it to Steve."

Though Lamstein initially experienced a reaction to the procedure that made him cough for hours, he wanted it to continue despite his doctors' hesitation. "My complications made it challenging," he says, "but the group was with me the whole time. They listened to me and considered my opinion. Hoffman and Peace are individually terrific, and then they had this team that made it even better. They know how to handle emergencies, and emergencies kept coming up in my case. Drs. Peace and Hoffman both saw me often through my 42-day stay at the medical center. From the nurses to the floor staff to the doctors, everyone was very, very available."

That's a good thing, since Lamstein was "really fogged out for a while," as he says. He was placed in intensive care, and "people were holding their breath." But his friends and family—Lamstein has four children—and the doctors got him through.

"I was so glad to have my family," he says. "I couldn't do anything. I can't overemphasize how important it is to have an advocate."

After 42 days in the hospital, Lamstein moved to an apartment in the city with easy access to his physicians and their follow-up treatment. "The transplant takes a lot of time and it's very involved," Peace says. "We totally rebuild the immune system, and we worry that the donor cells will attack tissue in the patient. The procedure takes place over many months, with follow-up two times a week after the hospital stay."

Despite the initial complications, Lamstein left Chicago on Sept. 15, earlier than planned. Peace says, "He tolerated the transplantation well, though his blood counts were slow to recover. That's not uncommon; it can take a long time for patients to rebuild the bone marrow and for normal blood production to take over."

After a few months out, Lamstein regained functional status. Today he says, "I'm awfully good." After losing 50 pounds during the process, he has regained weight, can drive and has achieved complete independence. "I can get around," he says. "I'm almost fully back, and everyone is noticing the progress."

Now, in addition to his care in New York, Lamstein returns to Chicago for quarterly checkups, and he has personal cell phone numbers if he needs to call. "I can't emphasize enough how comforting it is to know I can call Drs. Hoffman and Peace. They're watching all the time—it's incredible. They are in regular contact with my doctor in New York and me. I've been very impressed, and it's hard to impress me."

[GLOSSARY]

Myelofibrosis is a rare disease of the bone marrow in which collagen builds up fibrous scar tissue inside the marrow cavity.

[INFORMATION]

To learn more about this treatment, please contact David Peace at (312) 413-9280 or dpeace@uic.edu.



Bone marrow aspirate with polycythemia vera, showing marked erythroid hyperplasia

Bone Marrow Transplant

Bone marrow transplants are used to replace a patient's damaged bone marrow with healthy marrow obtained from a donor. Healthy bone marrow helps fight infections, prevents bleeding and carries oxygen to tissues.

■ Before the transplant, a surgical procedure is used to harvest stem cells from the donor's bone marrow and involves between 100 and 200 needle punctures to remove 500 to 1,000 cubic centimeters (1 to 2 pints) of marrow. The marrow is processed to remove all blood and bone fragments.

Prior to the transplant, the patient undergoes a course of high-dose anti-cancer medications or radiation treatment to help avoid rejection.

Then the patient receives the harvested stem cells through an intravenous line in a procedure similar to a blood transfusion, which takes between one and five hours to complete.

Once in the body, the cells form and mature to restore the patient's blood cells. Feature

Urban Health

AQuiet

THE URBAN HEALTH PROGRAM has been addressing the needs of the underserved for nearly 30 years.

On Mondays and Wednesdays, Javette Orgain, MD '81, MPH '05, BS '72, is right where she wants to be. The associate professor of clinical family medicine and assistant dean of UIC's Urban Health Program spends two days at Mile Square Health Center at South Shore, a federally qualified community health center where she practices medicine for those in need.

"I have come full circle," Orgain says. "I'm living my dream of serving the underserved in an urban environment."

Orgain got where she is through the College of Medicine's Urban Health Program, a state-mandated effort to encourage minority students to enter the medical profession and serve in underrepresented communities. Every African-American, Hispanic American, mainland Puerto Rican and Native American who enters the College of Medicine is automatically enrolled in the Urban Health Program, which provides orientation, application and enrollment assistance, individualized counseling, academic support and mentoring.

"The Urban Health Program offers a wonderful, nurturing environment," Orgain says. "There's support, there's a cushion. UHP made a lot of difference for me as a student."

The idea for a minority pipeline in Illinois began in the Civil Rights era, when, in 1967, the Medical Opportunities Program was established by UIC faculty and

Above, graduating eighthgrade students at Chicago's Daniel Hale Williams Preparatory School of Medicine listen to Javette Orgain, MD '81, who serves on the school's advisory council. The school is an academic partner

with UIC, and

students are part

pipeline program.

of an urban health

UICMedicine

20

Summer 2007

Chicago's Public

"For nearly 30 years—years when there was a lot more talk than Health Commissioner | action about racial and ethnic disparities in health—the Urban Health Program has taken the lead and succeeded in recruiting, retaining and graduating bright young men and women of color into medical careers, challenging them to serve in communities of greatest need," says Chicago Department of Public Health Commissioner



administrators. Along with prominent African-American Chicagoans concerned about healthcare in minority populations, this group later approached the Illinois Board of Higher Education for more funding to be used to "recruit, retain and graduate minorities," says Lillye Hart, MEd, director of UHP at UIC.

Legislation was passed in 1978 for an Urban Health Program to train the underserved to serve the underserved. "It was born out of an era when things went from the way they were to the way they should be," Hart says. "For the past 25 years there has been a grant to take care of minority students." Today money allocated for UIC from the state is directed by the dean of the College of Medicine to support the program.

UHP extends to each of the University of Illinois campuses, and it includes all the health science colleges: Applied Health Sciences, Dentistry, Medicine, Nursing, Pharmacy, the School of Public Health and the Graduate College. They each develop specific programs aimed at increasing the numbers of biomedical and healthcare professionals prepared to work in urban communities. And, they provide the support systems essential to the retention of students through graduation. In addition to the associate and assistant deans, each college has a UHP director who monitors the academic progress of the students and provides a series of activities, programs and seminars that prepare them for their future academic and professional roles.

And that's not all. The Urban Health Program encompasses a vast recruiting component targeting children as young as kindergarten. "Education starts the day you are born," says Hart. "A lot depends on what you learn and when you learn it. We try to get to the minds of kids who don't have access to the

knowledge others get."

Terry Mason, MD '78, Res '82. "Were it not for programs like UHP, I would not have

become a physician and not be in the position I am today."

Of the 300 students admitted to the College of Medicine each year, 24 percent are underrepresented. "We make a significant recruitment effort in our pipeline programs," says Orgain, who was appointed assistant dean of UHP in 2006. "But digging deep hasn't gotten easier. Secondary education is suffering in Chicago in regard to black and Latino students. We must truly beat the bushes to recruit youth who are eager to undertake the challenge of a rigorous medical education."

And once they're admitted, they have to be supported. The Urban Health Program provides a variety of resources to students in the College of Medicine. For example, it pays for tutoring services and supports the Academic Center for Excellence, a multifaceted academic resource offering individualized counseling, learning and study assessments, and workshops to improve skills. But even with efforts such as UHP, disparities in access and delivery of healthcare remain in communities of color. "There are still not enough people trained to provide that care," says Orgain.

Orgain graduated from UIC in 1981 and went on to a residency in family medicine at St. Joseph Hospital in Chicago. From there she worked for a Rush Anchor HMO until she came back to UIC in 1991. "I came back clearly to work as a mentor to students," she says. "As a student who graduated from the program, I knew there was a need for mentors and advocates."

To a large extent, UIC as an institution has been an advocate for minorities. Black Issues in Higher Education has ranked UIC either third or fourth over the past 15 years, making it one of the top 100 institutions to grant the most professional degrees in medicine to minorities. It graduates more minority students than

any other U.S. medical school, except Howard and Meharry. In all, between 1975 and 2004, 3,921 students earned degrees through the UHP program, with 1,607 degrees in medicine.

"Lack of service to the underserved is a national moral dilemma, a social justice issue," Orgain says. "But there's been heightened sensitivity to disparities in health in the last decade and national attention, legislation and funding to address the situation."

Still, Orgain says, "There are funding issues. At the federal level, there's always a need to lobby for more grants for medical education, and with each change in administration, the direction changes. We lost a federal grant two years ago, but with the support of the dean, we found money internally."

To generate more money for UHP,

Orgain says fundraising efforts for scholarships and special programs have begun. She's hoping to get more alumni involved, not just with funding, but to serve as role models and resources for students. "Networking

has always been one of the greatest benefits of UHP," she says. "I felt it as a student. I'd like to increase those opportunities for our students now. We want to ensure we meet all the needs of the students."

So far, the program seems to be doing that. According to Orgain, a recent survey showed, "The students are committed to the mission of UHP and feel the experience has been rewarding."

Hart says that's in part because the program helps students look at life through a different lens. "It's a quiet jewel," she says.

on the Urban Health Program. please contact www.uic.edu /depts/uhealth/.

Info



Lillye Hart, MEd, director of the **Urban Health** Program

Feature

Community Doctors

Putting Patients First

Above,

Head of practice Rodney Rieger, MD, in the institute's operating room

Standing from left are

Craig Torosian, MD, Thomas Atkins, MD, Timothy Petsche, MD, Telly Psaradellis, MD, and Craig Popp, MD. Seated from left are Jeffrey Grosskopf, MD, Rodney Rieger, MD, and David Morawski, MD.



"Always First"— that's the motto of Fox Valley Orthopaedic Institute's team of doctors. A simple phrase, but one that encompasses everything the growing practice does. **"Our motto has two meanings,"** says Rodney Rieger, MD, Res '80, BS '71, head of practice. "Not only do we always strive to put the patient first, but we also want to be the first with the latest advances."

Focusing on their patients has helped them become a community-centered institute. The practice's 13 members each see as many as 30 patients a day from the Fox Valley area, which includes Algonquin, Batavia, Oswego, St. Charles, Elgin and Geneva.

"The doctors live in the community and send their children to schools in the community," says Mary O'Brien, CEO of the institute. "It makes a difference that they live here. It strengthens that connection."

Their dedication to community spirit is something the patients recognize. "I've run into Dr. Grosskopf around town, and he always remembers me," says Tom Collins of Aurora. Collins was referred to Jeffrey Grosskopf, MD '81, Res '86, by a friend who had knee surgery at the institute. "Over the years, I've been to see Dr. Grosskopf many times. I've had both my shoulders and knees done." Collins was so satisfied by his experience that when his son, a soccer goalie, needed surgery for a torn rotator cuff, he immediately thought of Grosskopf. "Go see Doc,' I told him."

The doctors credit their experience at UIC for their commu-



Area Firsts Arthroscopic surgery Musculoskeletal institute Fellowship-trained surgeons Endoscopic carpal tunnel release (with Mayo Clinic)

Founders:

Eugene Wittenstrom, MD, Res '68 Merle Denker, MD, Res '72

Rodney Rieger, MD, Res '80, BS '71 Head of practice Thomas Atkins, MD, Res '00 General orthopaedic; hand and elbow surgery Jeffrey Grosskopf, MD '81, Res '86 General orthopaedic; sports medicine; arthroscopic surgery Vishal Mehta, MD '00 Sports medicine; shoulder and knee arthroscopy; cartilage restoration David Morawski, MD '86, BS '82, Res '88 Total joint replacement; general orthopaedic surgery Timothy Petsche, MD, Res '98 Sports medicine; arthroscopy Craig Popp, MD, Res '97 Orthopaedic spine surgery Telly Psaradellis, MD '99 Trauma; general orthopaedics Craig Torosian, MD, BS '84 Hand and microsurgery; elbow and shoulder surgery

nity-based approach. "UIC exposed us to a lot of different people," says Craig Popp, MD, Res '97. "As you went to different hospitals, you saw a large spread of demographics. It was a wide range of people to work with, which helps today, because our practice sees a variety of patients."

The doctors also see patients at Delnor Hospital in Geneva and St. Joseph's Hospital in Elgin. "Many of our staff take leadership positions when they can," says Rieger, who began working in the practice in 1980 and has served as chairman of surgery at Delnor and chief of staff at St. Joseph's. In addition, the institute's athletic trainers work at area high schools and colleges, and practice members serve as team physicians for the Kane County Cougars minor league baseball team. "We are accessible to the people that live around here," says Rieger.

Their kinship with the community keeps patients like Tom Collins satisfied.

"I had a wonderful, very personal experience at the institute," Collins says. "They take a lot of time with you. Grosskopf made sure to go through all of my options so that surgery was my last resort. He was helpful through every aspect, including surgery, the followthrough and rehab therapy."

The practice strives to be a leader in implementing new techniques and devising innovative solutions for their patients. "UIC kept our eyes to the future. We recognize the need to stay aware of new advances, applications and utilizations in surgery," says Rieger. The institute is pioneering some of the latest diagnosis and treatment options in orthopaedics, and they are using the newest technology to streamline their processes.

To provide faster diagnosis, treatment, follow-up and billing, they have moved to a paperless office. The institute uses digital X-rays, DEXA scanners and electronic records. "We take the 'one-site' approach," explains O'Brien. "It's one package, one coordinator. From diagnosis to treatment to billing, everything is done digitally to ensure that things run quickly and smoothly."

Even though the doctors have created their own successful private practice, they still keep close ties to their alma mater, which is why the staff includes so many UIC graduates.

Today, the institute, which was founded in 1973 by alumni Eugene Wittenstrom, MD, Res '68, and Merle Denker, MD, Res '72, employs over 220 people, including physical, rehabilitation and occupational therapists; physician assistants; athletic trainers; and outreach and support staff.

The simple office beginnings in St. Charles are now a distant memory, and the institute is housed in two state-of-theart buildings in Geneva: one a surgical center with four surgical suites, an open MRI, a physical therapy lab and an inhouse anesthesiology and pain management center; the other, a brand-new patient center with state-of-the-art exam rooms, an adult and children's physical therapy and rehabilitation center, an MRI and conference rooms. Another satellite office in Elgin provides additional space for diagnosis, care and physical therapy.

Throughout the years, the practice has not only grown in size, but also in scope. It covers all subspecialties except oncology. These include trauma; sports; pediatrics; total joint, hand, foot and ankle; and sports medicine. The doctors know it is important for their practice to stay up to date on medical advances, so they remain in contact with UIC.

Rieger serves as a clinical assistant professor, giving lectures in Chicago on biomechanics. Staying in touch with the college is what has kept the practice growing with UIC alumni. "Some of our doctors were at UIC at the same time as one another, so they knew who might make a good addition to the practice," says Rieger. "We have a wide range of alumni, with Dr. Mehta being our newest addition."

Popp believes that UIC gave him a strong foundation for what he does at the institute. "I remember the great professors: Riad Barmada, T.L. Huang, Edward Abraham. Each one had expertise in a different area," he says. "Also, the residency program provided a fundamental grounding in various areas that covered a complete range of orthopaedic problems. Today, many schools divide areas into fellowships, but UIC has avoided that to give residents the widest range of experience and expertise."

From patient care to advanced treatments, the Fox Valley Orthopaedic Institute doctors have carried their experiences at UIC into their work and have developed one of the leading orthopaedic practices in the Chicago area.

information, visit www.fvortho.com.

For more

Info@

Feature

Patient **Nathaniel Perez** plays in a toy car while speaking to anesthesiologist **Barbara Jericho, MD.**

creating the Anesthesia Preoperative Evaluation Clinic in 2001, anesthesiologist Barbara Jericho, MD, has given patients "the best chances possible for their surgical outcomes," says Ronald F. Albrecht, MD, professor and head of anesthesiology. "It's all about improving patient care." Her work has made an important difference in improving the efficiency and outcomes of UIC's surgery service.

Albrecht brought Jericho to UIC in 2001 to set up the clinic. "When I arrived here, there was no real system in place," says Jericho, who is the founding medical director of the clinic. Patients often waited several hours to be seen in the anesthesia preoperative clinic, and critical medical information regarding the patients' medical conditions was not available on the day of surgery. This led to delays in getting the data and postponements in the operating room. There were also many cancellations on the day of surgery because patients were not medically optimized prior to surgery.

"Before the creation of APEC, more than 20 percent of surgeries were cancelled on the day of surgery," says Albrecht. "Since the creation of the clinic, same-day cancellations are down to 2 or 3 percent for patients seen in APEC."

With APEC, Jericho developed a system that identifies,

APEC has improved patient care and operating-room efficiency, and it has reduced costs to the hospital.

evaluates and optimizes high-risk surgical patients to reduce morbidity and mortality rates related to surgery and anesthesia. The clinic also increases the quality and efficiency of perioperative care while decreasing the cost. Her clinic educates patients about anesthesia and postoperative pain management, which in turn reduces their anxiety and facilitates their recovery.

Calm Environment

Part of the clinic's services includes giving patients information about their procedure in a relaxed environment prior to the day of their surgery. The patients can review the information and call their surgeon and/or APEC with further questions.

"It's important how a patient is approached," says Jericho. "Empathy is a big part of our approach. We have techniques in particular for making children as comfortable as possible. On the day of surgery, we spend time with children so they can get familiar with us so the separation from their parents isn't as difficult. We even use a little toy car so that children can drive

The Road to Anesthesiology

Barbara Jericho was born in Chicago and later moved to Morton Grove. She attended the University of Illinois at Urbana-Champaign for undergraduate studies where she majored in biology.

While an undergraduate she did research studying the albumin evolution in 12 taxa of the genus Triturus using microcomplement fixation. "We tried to show how two different salamanders of the same genus were related," says Jericho.

Jericho enjoyed research so much that after her second year of medical school at Rush Medical College in Chicago she received an NIH fellowship doing research on tissue cultures in the Biological Response Modifiers Program at the NIH in Maryland. This involved the examination of the regulation of immunoglobulin gene expression at the molecular level. She returned to Rush where she set up the tissue culture lab for the study of Parkinson's disease before returning to finish medical school.

After an internship in internal medicine at Evanston Hospital, she began an anesthesia residency at Northwestern. "I enjoyed the acute nature of the critical care in the operating room," says Jericho. For an anesthesiologist the care is immediate, such as placing an epidural for a woman in labor and relieving her discomfort. I can make a difference at that moment."

After her three-year anesthesiology residency at Northwestern and a fellowship in pain management, Jericho worked for six years in private practice. "There is a tremendous reward in relieving pain in cancer patients, as well as treating chronic pain, which is so debilitating for the patient," says Jericho. "Giving these patients a better quality of life is very satisfying.

"Anesthesiologists are experts in the areas of pharmacology and physiology that relate to supporting the patient physiologically and eliminating the feeling of pain," says Jericho. "We may start with oral, intravenous or intramuscular medications when administering anesthesia. Depending on the surgery we may use intravenous or inhalational agents, that is, gas. Some anesthetics involve spinals or epidurals. Nerve blocks, another type of anesthetic, involve sodium channels in the nerve cells."

When working in the operating room, Jericho administers anesthesia for gallbladder operations, appendectomies, abdominal surgery, kidney transplants, orthopaedic surgeries, gynecological procedures, eye surgeries, ENT surgeries, and labor and delivery.

Besides her clinical work, Jericho also is committed to educating those in the anesthesia residency program at UIC. She developed the syllabus for the APEC resident rotation in 2001 and also developed a resident education curriculum in APEC in 2002, which includes X-ray readings, ECG readings, transfusion medicine lectures and internal medicine preoperative lectures. Jericho developed and still teaches the ECG course to residents and medical students.

Because of her commitment to the quality of education, she has initiated a three-year education research project to ascertain if the educational program she created has improved residents' knowledge. The data currently is being analyzed.



The Anesthesia Preoperative Evaluation Clinic can be reached at (312) 996-7487.

themselves to the operating room."

Four-year-old Nathaniel Perez has had to have several procedures done at the medical center. His father, Aurelio, says that the contact he and his wife, Annette, have had with staff before going into the OR makes the experience a little less stressful for everyone.

"He actually parallel parked that little car," Perez quips. "Nathaniel plays with the car and the coloring books before going into surgery, and it keeps his mind off of the procedure."

When APEC opened, it was on the first floor of the hospital, while the anesthesiology department, surgicenter and operating rooms were on the third floor. Jericho pushed to get them all on the same floor. "It was difficult when they were on separate floors," adds Albrecht. "Dr. Jericho was the prime mover in putting APEC on the third floor. She made it happen." The continuum of pre-op, surgery and post-op now all takes place together in a cohesive and contiguous system. "When patients come in for their preoperative evaluation, the attending anesthesiologist is only steps away," says Jericho. "The attending anesthesiologist can discuss relevant medical issues with the anesthesia resident in APEC prior to surgery. Abnormal laboratory results and medical conditions that need to be addressed or optimized prior to surgery will be communicated with the surgical service. Patients can obtain answers to their questions about their perioperative care.

"Any abnormal results are communicated to the anesthesiologist and the patient's surgeon," says Jericho. "And, based on these results, the patient may need further evaluation prior to surgery. When the patient is medically optimized, he or she proceeds with the scheduled surgery." On the day of surgery, the patient meets the anesthesia team, and the anesthesia preoperative evaluation is complete, unless there have been changes in the patient's medical condition since being seen in APEC.

"The goal of teamwork is to take care of the patient and bring them through surgery and anesthesia as safely as possible. This also means allaying anxiety before surgery and managing pain after surgery," Jericho says.

Upon Entering APEC

Patients are seen in APEC from one day to weeks before surgery to be "optimized medically" prior to surgery.

- Surgeon orders necessary preoperative tests.
- Anesthesiologist takes medical history and physical.
- Laboratory tests are evaluated.
- Patient is educated about surgery.

by Carla Beecher-Möehn

Strategic Aliance

Two New Programs Bring Services to Galena Area

Staffing Galena-Stauss Hospital are, from left, Gannon Dudlar, MD, Brian Macaulay, MD, Heather Prendergast, MD, Elizabeth Orsay, MD, Scott Yilk, MD, and Ralph Losey, MD.

Seventy-one-year-old William Beyer of Galena was

sweating when he woke up last Labor Day weekend. His jaw hurt, and he had a few other aches and pains. He took a couple of aspirin. His daughter Amanda, a nurse, stopped by, listened to her father's complaints and told him that he was probably having a heart attack. She drove him the few miles to Galena-Stauss Hospital where he was diagnosed and treated by UIC emergency physician Elizabeth M. Orsay, MD, associate professor of emergency medicine.

"They took very good care of me," says Beyer, who's lived in the area all his life. "I feel fine now and am glad Dr. Orsay helped me when I needed it most."

"At first glance, you think it's a sleepy little hospital—ankle sprains, sore throats, those types of problems," adds Ralph Losey, MD, of the 25-bed critical access hospital in Jo Daviess County. Losey is one of six UIC physicians who regularly staffs the hospital. "But when some big, big case comes rolling through the door, like a stroke or a farm accident, you realize that you are all by yourself, there is no specialty back-up, and it's all on you. At UIC, if you get into trouble, you have countless specialists that can come downstairs to help. Here, help is either a two-hour ambulance ride or a helicopter flight away to the nearest tertiary-care facility."

In 2006, physicians from UIC's emergency department

began rotating 72-hour shifts to staff Galena-Stauss's ER. "This is a strategic alliance that creates an academic model of healthcare delivery for rural hospitals throughout Illinois," says Joseph Flaherty, MD, dean.

"The affiliation has been very good for the people of Galena and the area," adds hospital CEO Jeff Hill. "The UIC staff's training, expertise and knowledge have restored the community's trust and faith in our community hospital that had eroded over the years because we simply did not have adequate emergency coverage. Because of our small size, it was difficult to attract first-rate physicians to staff our ER. We are in the process of building a new facility that will only add to that confidence when it opens later this year. We're planning to turn Galena-Stauss into a true regional medical center."

The hospital has been a part of this picturesque town of 3,500 people since 1962. The hospital, which has only five family medicine physicians and no specialists to serve the area's 22,000 residents, sits in the northwest corner of the state, close to the Mississippi River Valley.

"Our physicians have been involved in the education and training of emergency services to the Galena EMS paramedics and staff. We present a lecture monthly to the all-volunteer emergency personnel," says Orsay. They also provide regular in-services and presentations to the hospital's nursing staff.

Telemedicine

Extending Our Reach

The college and medical center also have plans to launch at Galena-Stauss Hospital a pilot program for telemedicine throughout the state.

"When we're at Galena, we are practicing in a very rural health setting with tiny rural hospitals that serve small populations. So as cases come up in Galena, we sometimes wish we had a specialist to consult. We also realize that with the telemedicine, Web-based technology available today, we could provide



From Galena, Elizabeth Orsay, MD, consults with head of neurology Philip Gorelick, MD, MPH, on the Chicago campus using telemedicine technology.

high-level service," says Orsay.

UIC certainly wouldn't be the first to do this. Many states across the nation already provide telemedicine service to rural areas.

Gary Strange, MD, professor and head of the emergency department, along with Orsay are both graduates of the University of Kentucky's medical school, which has been using telemedicine in the mostly rural state for the last 12 years, serving 70 sites in all.

"Our goal in Illinois is to start with Galena-Stauss and possibly work with administrators and leaders at Rochelle Community Hospital and Kewanee Hospital," says Strange.

"Once the program is up and running, we can offer a whole array of consultative services available at UIC," Strange adds, particularly adult and child psychiatry and neurology service in stroke. "If we can provide stroke services on site with our specialists, it may be possible for patients to stay at their local hospitals with consultative backup from us."

How Telemedicine Works

If a patient were to arrive in a community hospital emergency room with a diagnosis of stroke, the ER doctor and patient would use the telemedicine technology to contact a neurologist on call at UIC. The neurologist would go through a detailed neurological and physical exam with the doctor and patient in front of the camera. The consulting physician can ask the patient questions directly and can see and hear the patient's responses. Based on the history and physical exam, both physicians can determine the treatment course.

Similarly, a telemedicine psychiatry program throughout the state would not only serve many people in need, but it could save money for those youngsters seen through the Illinois Department of Child and Family Services.

"The bottom line with psychiatry is that, tragically, few mental health services are available statewide, particularly in rural areas," says Orsay. "And many times those patients have the fewest resources to get to larger centers for mental-health care services.

"For instance, some DCFS wards of the state who need child or adolescent care must drive five or six hours to Chicago to receive care. If they could get those services by going to the local community hospital and turning on a camera and computer to connect to our psychiatry department, that care could be received so much more efficiently and conveniently. We could save the state an incredible amount of money.

"The same concept could work with inmates needing our services. Every time a prisoner is brought to UIC for an appointment, it costs the state about \$800 for staffing, security and a private room. A telemedicine program would allow us to provide our services far more efficiently and reasonably than bringing these patients here," says Orsay.

A goal of telemedicine is to offer true tertiary care. UIC's physicians would not compete with rural physicians or specialists, but simply would be trying to fill a healthcare need at community hospitals and state institutions.

"We have the technology, we have the expertise, and we are excited by the next steps to fund this extremely promising Webbased program," says Strange.

Galena-Stauss Hospital 215 Summit St. Galena, IL 61036 (815) 7777-1340 info@galenahealth.org



Telemedicine Access

Elizabeth M. Orsay, MD, associate professor of emergency medicine, who led the affiliation through its first year. All physicians who staff the department also work at UIC. "We are fully aware that a bridge needs to be built between critical-access hospitals like Galena-Stauss and the state's flagship medical center." Illinois has 54 hospitals considered critical access with 25 beds or less.

quite limited health resources," says

"Our mission is to provide excellent care to all the people of Illinois no matter where they reside," adds Joseph Flaherty, MD, dean. "By partnering with public and private centers across the state, we can use telemedicine to bring our specialty expertise to small hospitals and the people they serve."

UIC eventually plans to provide a number of specialty consultations to rural physicians, and hopes to begin the program with psychiatry, neurology and dermatology. Telemedicine already is practiced in radiology departments statewide where radiologists review films and CAT scans from distant sites and render professional opinions.

"We know what medical services are needed in these rural areas from a tertiary-care standpoint and from a position of higher-level community-medicine care, but it's simply not feasible to staff **Feature**

The University Of Illinois At Chicago Medical Center

A Vision of Course

holds her son and counts her blessings—grateful to be alive and able to see her son's smiles. She has come a long way since Jordan's birth in July 2002. Ortiz was diagnosed with type 1 diabetes when she was 8, but didn't learn

to control it until her late teens. That's when her younger sister, Amy, also was diagnosed with diabetes. "I had to set an example for my sister," she says.

When she became pregnant at age 23, Ortiz could not imagine that diabetes and pregnancy would threaten her eyesight, her baby's health and her life.

"My doctor (an ob/gyn at another hospital) explained the risks before I got pregnant, but I was young and relatively healthy, so I thought I'd be OK," says Ortiz. She came to the University of Illinois Medical Center six weeks into her pregnancy. "I wanted to be at an academic hospital that had the latest technology and knowledge."

Ortiz came to the obstetrics clinic weekly for close monitoring. Over the course of her pregnancy, she was seen by all five high-risk obstetricians here, but most of her care was provided by Sarah Kilpatrick, MD, PhD, head of obstetrics and gynecology and director of maternal-fetal medicine, and Larry Burd, MD, now retired. "I promised Drs. Kilpatrick and Burd that I would do whatever I could to give my baby a fighting chance."

Kilpatrick, who is also vice dean of the college, recalls, "Lissette had terrible diabetes that was hard to control. When she came to UIC, she already had some kidney damage and eye damage from the diabetes, and then everything progressed so quickly. Ironically, when we lower blood sugar during pregnancy (to help the developing baby and the mother) it can actually make the vision slightly worse."

Ortiz's condition was complicated and severe. Coordination between diverse disciplines was essential to her care. The obstetrics team worked closely with Ortiz's endocrinologist, Irwin Brodsky, MD; nephrologist Jim Lash, MD, associate professor of medicine; and Reunited several years after being a patient at the medical center are Lissette Ortiz, holding her son, Jordan, her cousin, Nick, and Drs. Enrico Benedetti and Sarah Kilpatrick.

"The doctors at UIC build a relationship with you. They take time to explain things and have taught me how to control my diabetes." — Lissette Ortiz

ophthalmologist Herb Becker, MD, who was a fellow at UIC at the time. Later, the transplant team led by Enrico Benedetti, MD, professor of surgery and chief of transplantation, also would have a key role in Ortiz's care.

Trying to Control the Complications

One of the first interventions was putting Ortiz on an insulin pump to better control her blood sugar.

Kilpatrick adds, "It's unusual to have a pregnant patient whose diabetes is bad enough to need an insulin pump, but this medical center has the expertise to deal with cases of Lissette's complexity and severity."

Soon and quickly, though, vision loss became Ortiz's major problem. "When she came to us at six weeks, she could see. By 24 weeks, she could not," says Kilpatrick.

During the pregnancy, Becker and the ophthalmology team performed eight laser surgeries in each eye in an attempt to restore her vision. "I was living in the darkness." Six months into her pregnancy, the team performed a vitrectomy procedure to restore partial vision in one of her eyes.

By seven months, Ortiz was retaining so much fluid that her weight doubled, from 110 lbs. before pregnancy to 220 lbs. "I could barely walk or sit, but kept pushing myself and praying for a healthy baby," she says.

Unfortunately, Ortiz's renal function continued to worsen. She became preeclamptic and was hospitalized.

Concern heightened for the wellbeing of both mother and baby. Kilpatrick explains, "With severe diabetes, in addition to worsening kidney function, there is a risk that the mother will develop hypertension, which can be fatal. And, diabetes can be a peril for the baby because the mother's elevated blood sugar increases the risk of fetal anatomical problems and fetal death."

The obstetrics team gave Ortiz steroid shots for several days to stimulate development of the baby's lungs, then delivered baby Jordan Gracia by Cesarean section on July 9, 2002—two months shy of full term.

"The baby did great," recalls Kilpatrick. "He was small (3 lbs., 11 oz.) because he was born early, but had no significant problems."

Says Kilpatrick, "Lissette had an incredibly complex pregnancy. We were able to manage her symptoms and achieve a good outcome for her baby by working together with her endocrinologist, ophthalmologist and nephrologist."

Complications After Birth

The baby was fine, but Ortiz's troubles weren't over. She lost a lot of blood during the birth; her kidney function continued to deteriorate; she was retaining huge amounts of fluid; and her blood pressure was dangerously high. Plus, despite the eye surgeries, Ortiz was unable to see her baby boy.

Conditions continued to worsen for her. "Six weeks after Jordan was born, I could barely walk because my legs and ankles were so swollen; I had difficulty breathing, and I couldn't see," she recalls. "Some days, I just wanted to sleep to escape it all."

When Jordan was about two months old, her ophthalmologist performed yet another eye surgery. Ortiz vividly recalls a few days later: "We were driving and I could see colors. I was so excited, and I wanted to see my baby. He looked exactly like I had imagined from tracing his face."

Grateful to have her vision back, Ortiz nonetheless still struggled with severe complications from the diabetes. UIC nephrologist Lash continued efforts to slow the decline of kidney function, but the diabetes had progressed too far.

As the months moved forward, her health spiraled downward. Diuretics couldn't relieve the swelling, and excess water was seeping from her skin. She vomited often, and had hypoglycemic seizures. "Everyone was calling me constantly to make sure I was still alive," she says. "The worst part was that I couldn't be the mother I wanted to be for Jordan."

By the time Jordan was 18 months old, Ortiz needed either dialysis or a kidney transplant. Transplant surgeon Benedetti recalls, "Lissette was at end-stage renal failure due to diabetic nephropathy.

"Kidney transplantation is life-saving in diabetics," Benedetti says. "The fiveyear survival rate of a 29-year-old diabetic on dialysis (like Ortiz) is only 35 percent, versus over 90 percent after successful kidney transplantation." UIC performs about 120 kidney transplants annually, including about 90 with living donors.

Ortiz's younger cousin, Nick Ortiz, was a good match. "He was so excited, but I was nervous for him. I was willing to wait for a cadaver donor, but Nick said he wanted to give me my life back. He's my savior."

The transplant went according to plan, and both Ortiz and her cousin came through without complications. Benedetti notes, "Lissette has done well since the transplant, and her current kidney function is perfectly normal. Her cousin truly saved her life."

UIC endocrinologist Betul Hatipoglu, MD, assistant professor of medicine and medical director of the Diabetes, Wellness and Education Program at UIC, now helps Ortiz manage her diabetes. Ortiz says, "The doctors at UIC build a relationship with you. They take time to explain things and have taught me how to control my diabetes. I'm still insulindependent, but I feel great."

Looking at the Future

The future looks bright. Jordan is healthy, active and excited to start kindergarten this fall. Ortiz's sister is expecting her second child and sees Kilpatrick for high-risk prenatal care.

Ortiz says, "It's been a rough, long road, and I can't believe where I am today. I can see and I can run around with my little boy."



With a grandfather who is a die-hard Cubs fan, 18-dayold Jordan dons a ball cap and holds his first baseball.



News and Updates on Charitable Support From Alumni and Friends of the UIC College of Medicine and the University of Illinois Medical Center

Dear Alumni and Friends



As a 1977 graduate of the college and a former orthopaedic resident, I am delighted to have this opportunity to introduce myself to you as one of three campus chairs of the recently launched capital campaign, Brilliant Futures. Along with fellow UIC alumnus Patrick Daly, BArch '72, and UIUC alumnus Lou Friedrich, BS '67, I have been honored with the task of leading this all-important mission to advance our school.

I am someone who strongly believes in the power of philanthropy and the transformational effects of education. The College of Medicine took a chance on me

back in the 1970s—a slightly older alumnus with a degree in engineering—and welcomed me into its community of learning. That acceptance changed my life by allowing me to pursue a very fulfilling career in medicine. I am fortunate to be able to provide for others some of that same opportunity given to me. I've done that through philanthropy.

By participating fully in the Brilliant Futures campaign, the College of Medicine will be able to further its commitment to its students, researchers, clinicians and patients in a number of ways.

In broad terms, the campaign promises to benefit five areas of university life-to advance the creation and dissemination of knowledge, to expand scholarship and fellowships, to enrich our students' experience, to promote healthy societies, and to collaborate with public and private partners to strengthen our Great Cities Commitment to urban issues.

Each of these areas has its own story to tell and its own promise for the future. As we move through this campaign over the next several years, you will hear and read about generous donors who have made a difference in the lives of real people. These donors allowed others to further their education or conduct cutting-edge research, or helped patients in need of a promising new treatment. All this is possible through philanthropy—a noble gesture of good fortune.

Won't you join me and others who have been touched in their lives by the collegeas students, as teachers, as doctors and as alumni-and lend your support to the College of Medicine as it embarks on this far-reaching and ambitious goal of bringing the college to the next level of excellence? What better way to say thank you to the college that gave you your educational start in life by creating a new opportunity for those who need it most.

The simple act of philanthropy can have a meaningful and lasting effect

Sincerely,

rever S. I. win

George S. Irwin, MD '77, Res '82

brilliant Tutures

THE CAMPAIGN FOR THE UNIVERSITY OF ILLINOIS AT CHICAGO

Supporting in the Brilliant Futures campaign will help us invest in knowledge, increase access to education, enhance the student experience, ensure a healthy society and strengthen our commitment to our community. Please contact the Office of Advancement at (312) 996-4470 or med-email@uic.edu, or visit www.brilliantfutures.uic.edu

Christopher Toft Named New Chief Development Officer

by Jeanne Galatzer-Levy

The College of Medicine welcomed Christopher Toft on April 30 when he joined UIC as associate dean for advancement in medi-



cine and vice president of the University of Illinois Foundation. In his role as the chief development officer for medicine, he will be responsible for ensuring the college meets its financial goals in the

recently announced Brilliant Futures campaign.

"We are very pleased and fortunate to have a person of Chris' experience and talent directing our philanthropic efforts at this critical point in our history," says Joseph A. Flaherty, MD, dean.

Toft brings deep and varied experience to his new role. He most recently worked at Loyola University Medical Center where he was an associate vice president for development and director of principal gifts, playing a leadership role in securing major gifts.

Prior to joining Loyola, Toft served as director of external affairs and development at Evanston Northwestern Healthcare and has held development and major gifts positions at Northwestern University, the Field Museum and the Writers' Theatre. "I am looking forward to working closely with Mr. Toft," says John DeNardo, CEO of UIC Healthcare System. "His experience and proven record of accomplishment, along with his highly energetic approach to development, promises an exciting future for the college and medical center."

HONOR ROLL

The College of Medicine is considering recognizing its donors with a comprehensive honor roll to be published this fall. If you prefer not to be listed, please contact the Office of Advancement at (312) 996-4470 or med-email@uic.edu.

Christopher Family Foundation Provides Lead Gift for Chicago Project

by Carla Beecher-Möehn

oday, 18 million people worldwide suffer from diabetes and are awaiting a cure for this devastating disease. People with diabetes wish to live life without insulin shots and the threat of diabetic complications such as blindness, kidney failure, stroke and heart attack.

To help advance diabetes research and care, the Christopher Family Foundation in December provided a significant \$1 million lead gift to the Chicago Project, an international consortium of physician-scientists led by José Oberholzer, MD, who are working together to find a cell-based cure for diabetes.

"After hearing Dr. Oberholzer talk about the project's goal to provide a new treatment option for diabetes for patients, we decided to provide a lead gift," says Doris Christopher, founder and chairman of The Pampered Chef, a company that offers professional-quality kitchen equipment directly to consumers through in-home cooking demonstrations.

By showing its faith in the project, the foundation hopes its gift will attract other support. "We believe in Dr. Oberholzer's research," adds board member and daughter Kelley Christopher Schueler. "We hope other foundations and philanthropists will see our faith in the project and be compelled to support this cause, too."

Like many families today, the Christophers have family members who also have been affected by diabetes. "If a cure isn't found soon, this already-widespread disease will grow even worse—it touches so many lives already," says Schueler. "We know it's a very difficult disease to manage, and we are interested in providing support to help find a cure."

The Chicago Project is comprised of a group of highly qualified research scientists and physicians from university and medical centers in Switzerland, France, Israel, Canada and the United States. The group first met in Chicago in 2004 to plan how they could achieve a functional, or cell-based, treatment for diabetes. The project's two goals are to devise a way to produce an unlimited supply of islet cells from donor pancreases, and a way to encapsulate them to prevent rejection by the body's autoimmune system.

"The Christopher Foundation's gift provides the means to prove that the Chicago Project can achieve its goals more quickly and efficiently than the way traditional single institutional research is conducted," says Oberholzer, director of cell and pancreas transplantation. "Their gift will allow us to continue our work in a number of crucial areas, including preclinical trials, technology for microcapsule



Jay and Doris Christopher

formation, and provisions for islet cell expansion, among other research efforts."

With a background in home economics from the University of Illinois at Urbana-Champaign campus, Doris Christopher started The Pampered Chef in 1980 with the goal of enhancing the quality of family life by providing quality kitchen products. The Pampered Chef has supported charitable organizations that assist with America's hungry and provide education about early detection of breast cancer.

"The Christopher Family Foundation firmly believes in the power of education and family values. This is the first time CFF has given support directly to medical research, but because diabetes is at epidemic proportions, we felt that the work of Chicago Project scientists would touch many, many people," says Christopher.

Because the current transplant ratio of donor organs to recipient is, at best, one-to-one, a major goal of the Chicago Project is to provide an unlimited supply of islets so many more people with diabetes can begin to produce their own insulin.

"Ultimately we'd love to see the Chicago Project's efforts lead to a cure for diabetes. On a short-term basis, we hope our support gives Dr. Oberholzer and his team the ability to raise more funds to help reach the goal of a cure. And while the ultimate goal is a cure, these smaller steps are very important benchmarks along the way. We'll look forward to hearing about the collaborators' achievements in the next few years," says Christopher.

The Pampered Chef[®] Family Resiliency Program In 2000, The Pampered Chef® made a financial commitment to the University of Illinois College of Agricultural, Consumer and Environmental Sciences in Urbana-Champaign to establish The Pampered Chef® Family Resiliency Program. The program consists of a lecture series, faculty research grants and graduate fellowships in the area of strengthening families. In 2006, Doris Christopher and her family celebrated the opening of the Doris Kelley Christopher Hall at the University of Illinois, which houses the program. This world-class family resiliency center is the home of innovative research, education and outreach initiatives that enrich the well-being of children, individuals and families.

For more information on the Chicago Project, visit www.thechicago project.org.

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Alumnus Enhances Student Experience by Naming Clinical Performance Center by Carmen Marti



Allan L. Graham, MD, and his wife, Mary

"What are your priorities?"

is what Allan L. Graham, MD '60, DVM '54, BS '58, asked representatives of the College of Medicine recently. He and his wife, Mary, BS '57, had decided to make a gift.

The Grahams knew that their goal was to support the colleges of Medicine and Veterinary Medicine, both of which Graham had attended in the 1950s. After discussing several options, the Grahams pledged \$1 million to establish the Dr. Allan L. and Mary L. Graham Clinical Performance Center in the College of Medicine, and \$500,000 to establish the Dr. Allan L. and Mary L. Graham Imaging Program in the College of Veterinary Medicine in Urbana.

"This was something I needed to do," Graham says of their gift. "I owe something to medicine—it has been good to me. And I wanted to do something for the College of Veterinary Medicine, too, since I went to both schools."

A farm boy from the tiny town of Ursa (pop. 500), Graham originally had set out to become a veterinarian. He was accepted at UIUC and began the program. But while there, Graham decided to transfer into medicine. The university agreed, but the military draft board did not. Graham was told he could only defer enlistment if he finished vet school. So that's what he did, graduating in 1954. From there Graham served in the Army for two years before enrolling in the College of Medicine.

Today he's grateful for his experience with veterinary medicine, even though he only practiced in the summers between school and while in the military. "Vet school gave me a running start," says Graham, who is a member of Alpha Omega Alpha, the medical honorary society. Still, choosing a specialty was a challenge. "I did a rotating internship so I was exposed to a lot, and I found I was interested in almost everything. But in the end, I liked surgery and the people in it."

As a result, Graham became a cardiovascular and thoracic surgeon. He and Mary moved to Texas in 1968, where he practiced until retirement in 1994. His career suited him because it was difficult. "A surgeon has a certain personality," Graham says, "a strong personality. I like to do the tough stuff."

This has been true both in the operating room and outside it. Graham started running marathons at age 50 and later began competitive cycling. At one time he placed third in the nation in his age group. Now, at age 77, he walks eight miles a day and misses competing.

"Allan liked the challenge of being on a sports team and of being on a surgical team," his wife says. "He faces challenges well."

And their gift to the university will help others meet challenges. Through the Grahams' gift to the College of Veterinary Medicine, students will have access to state-of-the-art imaging equipment. In the College of Medicine, the Graham Clinical Performance Center will be a fully renovated simulation space where students can learn clinical skills with high-tech equipment and simulated patients. One feature will be a SimMAN, an interactive lifelike human model that presents various disease symptoms for students to assess and treat.

"The Grahams' gift will allow the College of Medicine to expand the use of simulation at all levels of training, enriching the curriculum by providing students with opportunities for safe and supervised practice of essential skills," says Rachel Yudkowsky, MD, MHPE '00, director of the center.

Really though, Graham says, funding these initiatives reflects his and his wife's values. "We're from the old school," he explains, "the kind of people who believe in hard work and in giving something back."

Mary concurs. "Allan's experiences at U of I and UIC were very meaningful," she says. "He was part of a small, close-knit group, and he's stayed in touch with people from his class. When they get together, all they talk about is school. It was obviously a big part of their lives."

Says Graham, "Getting from the farm to the U of I was a big step, a dream that has been fulfilled, but I'm still a country boy at heart."

For more information about the Clinical Performance Center, please visit www.uic-cpc.com or call (312) 413-2022.

World Traveler Finds Place to Call Home by Heather Hoffman

Greg Chejfec's 50-year medical career has taken him around the world, but he has finally found a place to leave his legacy. And that place, he has decided, is UIC.

Chejfec was assistant professor of pathology at UIC in the late 1960s and early 1970s; however, his myriad interests in pathology took him around Chicago, over to Italy and eventually to Stockholm, Sweden, before he finally made it back to UIC. It was here that Robert Folberg, MD, Frances B. Geever professor and head of the department of pathology, offered Chejfec a professorship in pathology and the deputy head position in 2001.

"UIC offered me a dreamlike position where I was able to freely put into use the experience I gained at my previous institutions," says Chejfec.

It was with some urging from Folberg that an endowment fund in honor of Chejfec came to life. "Dr. Folberg suggested it, but I was reluctant until I realized that this fund might accomplish a goal which I would never live to see. At the same time, it was a way of expressing my gratitude to Dr. Folberg for his trust and confidence in the mission that I undertook," says Chejfec.

The Greg Chejfec, MD, Endowment Fellowship in Surgical Pathology initially will create a named \$150,000 endowed graduate fellowship and build to a full fellowship of \$500,000 to assist in providing funds to train young pathologists who are



UIC in the years to come," says Folberg.

Cheifec looks forward to what the fund will accomplish. "With this endowment, I hope to accomplish the training of surgical pathologists who will merge classical pathology with the newer disciplines of molecular pathology and cytogenetics," says Chejfec. "I want to see these integrated in the future, since they are currently at their infancy and will be a big part of pathology practice in the future."

"Through the

Wavs to Give

about supporting the Greg Chejfec, MD, Endowment Fellowship in Surgical Pathology, please contact David Eaton at (312) 355-0475 or djeaton@uic.edu.

Colbeth Clinic's "Help a Child, Heal a Family" Features Mariette Hartley by Heather Hoffman

In April, Emmy Award-winning actress Mariette Hartley was the keynote speaker at "Help a Child, Heal a Family," the third annual Colbeth Clinic charity event at UIC. The author of Breaking the Silence, Hartley has had personal experiences with bipolar disorder and depression and is a national spokesperson for the American Foundation for Suicide Prevention.

The Douglas and Margaret Colbeth Clinic at the UIC Institute for Juvenile Research was established in 2002 to provide medical care to children who are challenged with serious brain diseases such as schizophrenia, bipolar disorder, depression and autism. The Colbeths donated \$2.1 million to the psychiatry department for research into the early diagnosis and clinical treatment of mental illness in children.

The yearly charity event raises funds to promote awareness about mental illness and to provide the highest quality patient care, professional training and research.



Doug Colbeth, left, with Mariette Hartley, his wife, Margaret, and their children, Jackie and Brett.

Hartley has appeared on stage and television, and in feature films. She currently has a recurring role on the FX Network's "Dirt" with Courtney Cox and NBC's "Law & Order: SVU."

please call the **Colbeth Clinic at** (312)996-7723.

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Early Opportunities Lead to Scholarship

by Terri Yablonsky Stat

College of Medicine alumnus A.J. Novotny, MD '49, attended medical school after serving in World War II and then served in the Korean War. Grateful for the GI Bill that paid for his medical education and to his alma mater for giving him

the foundation to succeed in life, Novotny and his wife, Marjorie "Midge," have endowed the Dr. and Mrs. A.J. Novotny Award with \$25,000 to support general medical students at the Chicago campus.

"I would not have been able to become a physician were it not for the GI Bill," Novotny says of the financial aid he received from the government to attend medical school. "I was helped a great deal by external sources, and if we can, we would like to be of help," he says.

Novotny, who is from Chicago, completed his general surgery and orthopaedic surgery training at UIC, while Midge received a degree in speech therapy from the Urbana campus.



and his wife, Midge

"It was such a lovely experience that I was reluctant to leave." He spent the remainder of his career in Peoria.

Novotny, one of the original faculty members at the College of Medicine at Peoria, recalls teaching classes with other

> faculty at Bradley University, before the college building was erected. "There were frequent conversations among faculty members about whether we were teaching in a 'real' medical school," he recalls of the early days. He was the only member from his practice teaching medical students, but it was something he found immensely rewarding.

> Novotny, who concentrated on hip replacements, was based at Methodist Medical Center in Peoria. For some years, he was chief of orthopaedics at the College of Medicine at Peoria.

> When he retired from clinical practice in the mid-1990s, Novotny did a great deal

of administrative and governance work in medicine. Today, he swims regularly, plays golf and loves to read.

First Lecture Held to Honor Robert Costa

"I spent eight or 10 years on the Chicago campus," he says.

by Carla Beecher-Möehn

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A lectureship was created last fall in memory of the late Robert Costa, PhD, a faculty member of the department of biochemistry and molecular genetics and a pioneer in the study of liver gene expression and cancer. Jack Kaplan, PhD, Benjamin Goldberg professor and head of biochemistry and molecular genetics, started the fund with family, friends and co-workers of Costa, who died in September.

"The yearly lecture will be a wonderful reminder of a true scholar, scientist and friend who died much too young," says Kaplan.



Robert Costa in his lab

Darnell. "Rob was an absolutely key person in moving us from the demonstration that liver-specific transcription occurred to identifying the transcription factors responsible for specificity. Soon after he left, we gave up the liver project because, among other reasons, I knew it would be continued in good hands, and it certainly was."

The one-day symposium was sponsored by the department of biochemistry and molecular genetics as a celebration of Costa's scientific accomplishments.

The first of these lectures was presented in March by James Darnell, PhD, of Rockefeller University, Costa's postdoctoral mentor and a renowned cancer biology researcher.

"Our laboratory during the mid-to-late 1980s was a veritable ferment of activity with success both in studying liver-specific gene expression and interferon-induced gene expression," says



O ADD TO THE

Robert Costa Lectureship in Biochemistry and Molecular Genetics, please contact Patricia Wager at (312) 413-9763 or pwager@uic.edu.

Cless Fund Furthers Retina Research by Lee Scheier

Gerhard Cless, co-founder of Zebra Technologies, pledged \$500,000 through the Cless Family Foundation to support retinal research over the next three years to help UIC develop the best retina center in the Midwest. In addition to past support for retina research and equipment, the Cless Family Foundation established the Gerhard Cless Endowed Lectureship to provide annual presentations at the Frontiers in Vision Science Symposium.

Cless, who nearly lost his sight in his right eye in 1995 from a macular hole in his retina, went through a series of operations that saved his eyesight. "Since I almost lost my eyesight, I have great empathy for those in my situation," says Cless. "If I can do anything to prevent a person from losing his or her eyesight, it is very satisfying."

While a hole in the macula can happen at any time, aging baby boomers are at risk regarding macular degeneration because the aging macula, the most sensitive part of the retina, slowly degenerates and gradually can cause blindness. "Part of the UIC retina researchers' work addresses this challenge, and it's rewarding for me to be part of that," Cless says.

Cless has been invited to visit the labs, talk to and interact with the researchers, and see the work they are doing. "A

few years ago our funds were used to purchase a confocal microscope that allows doctors to examine the cornea in minute detail," says Cless. "It really warms your heart to see your gift helping people."

Cless sees another important value to his gift. "This money is less restricted than government funds—it's more like seed money—so the researchers can follow their ideas and develop them. We hope that in the future, larger government grants will be given to continue the research," he adds.

Dimitri Azar, MD, Thanis Field pro-

Gerhard Cless

fessor and head of ophthalmology and visual sciences, says that Cless' generosity and support has helped UIC immensely in growing its research program. "His support will allow us to bring three of the best researchers in the world to UIC; as well, it funds research, clinical work and new equipment. This gift brings our retinal service to the next level, making it the best in the Midwest, the driver and leader in the field."

Lectureship Honors Architect of Neurosurgery

program back on

track, built a major

vascular program,

and recruited pre-

eminent faculty.

Ausman is recog-

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a lectureship in

The Dr. James I.

Ausman Endowed

Lecture in Neuro-

surgery will honor

Ausman's remark-

able contributions

his name.

by Heather Hoffman

James I. Ausman, MD, PhD, often is referred to as the "architect of the renaissance of the Neuropsychiatric Institute." As the head of neurosurgery for 10 years, he rebuilt the program after many tumultuous years. He got the residency



James I. Ausman, MD, PhD, in 1997

to neurology and neurosurgery by bringing experts to provide residents, medical students and faculty with the latest advances in the field. Ausman came to UIC as professor and head in August 1991 after serving as director of the Henry Ford Neurosurgical Institute and chairman of the department of neurosurgery at Henry Ford Hospital. Ausman oversaw the renovation and restoration of the Neuropsychiatric Institute at UIC and transformed it into new offices, labs, research areas and classrooms. The institute has been a leader in the field since the 1980s.

"Dr. Ausman was a leader and visionary who led this enterprise tirelessly to regain its place," says Fady T. Charbel, MD, head of the department. "He surpassed that and brought it to its glory today.

"This fund will allow us to rename the former operating room suite on the seventh floor, which Dr. Ausman transformed into a state-of-the-art amphitheater where trainees can watch surgeries being performed in the hospital," says Charbel. "It's quite an experience to sit in the same chairs that have been there since the 1940s and watch live surgery through high-tech monitors."

The first Ausman lecture will be given by Gerard Debrun, MD, a pioneer in endovascular treatment of brain aneurysms who is considered the father of endovascular neurosurgery. James I. Ausman, M MD, Johns Hopkins University School of Medicine MA, Physiology, SUNY Buffalo

PhD, Pharmacology, George Washington University

Neurosurgery Residency, University of Minnesota



Ways to Give

on supporting the Dr. James I. Ausman Endowed Lecture in Neurosurgery, please contact Kathy Wohlhuter at (312) 996-4417 or kwohlhut@uic.edu. Karl H.

MD, will be

Siedentop,

remembered as a

mentor and friend

to otolaryngology

who died Oct. 17,

his side in all his

endeavors, planned

a generous estate-

2006, and his wife,

Christel, who was by

residents. Siedentop,

devoted teacher,

Dedication to Patients Spurs Otolaryngology Gift

by Terri Yablonsky Stat



Karl H. Siedentop, MD, and his wife, Christel

gift endowment to ENT research at UIC.

Siedentop was an attending surgeon and clinical professor in otolaryngology here since 1958 and specialized in ear surgeries, deafness treatments and dizziness evaluation.

He and his wife both were raised in Germany during World War II. "He made something out of his life in this new country. He believed that if you have the will and the desire, you can do anything," Christel says.

His colleagues agree. "In addition to being an outstanding

Best Gift Has Widespread Impact by Heather Hoffman

UIC's impact on William Best, MD '47, Res '51, MS '51, BS '45, was so strong that when the time came to give back, he wanted to help the college as much as possible—so he spread his gift among five areas of the college. The generosity of Best and his wife, Ruth, will benefit the Leukemia Research Fund, the Center for Cardiovascular Research, the College of Medicine Annual Fund, the Class of 1947 Scholarship and the Chicago Project.

"Ruth and I decided it was time to give a little more appreciation for all the College of Medicine did for me," says Best. "I've had a lot of contact with UIC through the years, and I've always had good experiences and met wonderful people. It's a first-class institution."

Each gift is made more personal by a special dedication. The gift to hematology-oncology honors Louis R. Limarzi, MD, the first chief of hematology and a mentor to Best. The gift to the department of medicine is for Ford Hick, MD, an outstanding clinician and a strong influence of Best's decision to study internal medicine. The donation to the College of Medicine Annual Fund is in remembrance of Alexander "Mack" Schmidt, MD, former dean, who recruited Best to become associate dean in physician and medical educator, Dr. Karl Siedentop was a true gentleman," says J. Regan Thomas, MD, head of otolaryngology. "He was always dedicated to his patients and truly dedicated to resident education. We miss him dearly and genuinely appreciate his contributions through the decades to the department and young physicians' education.

"Ultimately, this gift will provide funding for resident research," Thomas continues. "An important part of otolaryngology training and the education process is the opportunity to engage in medical research, and that always requires funding. Dr. Siedentop's gift reminds us of his lifelong commitment and interest in otolaryngology medical research. This generous gift will be of great use and combines both resident educational opportunities with resident research possibilities."

"My husband's life should remind us that with devotion, dedication and effort, it is possible for any immigrant to fulfill the dream of a new life in a new country," Christel says.

Siedentop also was an avid scouter with the Northwest Suburban Council Boy Scouts of America. His involvement began in the early 1970s as a scoutmaster when his own son was a scout. Siedentop later became certified as a trainer for adult leaders. He received numerous awards bestowed by national scouting leaders for his many years of service.



1972, a position he held until 1981. In memory of all his colleagues who have since passed on, the Bests have given to the Class of 1947 Scholarship Fund.

Finally, the Bests gave the largest sum to the Chicago Project in honor of Ruth's maternal grandmother and uncle and Bill's paternal grandmother, all who had their lives shortened by diabetes. "We gave to Dr. Oberholzer's project because his exciting research has the potential to significantly improve the lives of countless patients with this disease," says Best.

The Best gift is the first to take advantage of the tax-free IRA charitable rollover. This allows individuals to make outright gifts of \$100,000 or less directly from their IRA and exclude the amount of their gifts from gross income. The new law makes it easier for people like the Bests to turn good intentions into reality.

The Bests with their two daughters and their families are, from left,

Robert Mulch, BS '73; Laura Williams; Patricia Williams, BSN '77, MS '80; Kurt Williams, MD '78, Res '81; Ruth Best; Barbara Mulch, MD '77; Luke Mulch, BS '05; William Best, MD '47, Res '51, MS '51, BS '45; Matt Mulch, BS '06; and Rebecca Williams.

Gift Will Perpetuate Humanitarian Spirit

by Lee Scheier

Scott Piper, MD, his wife, Gillette,

and friends recently have endowed the Derek Piper Memorial International Fund for Emergency Medicine with a gift of \$100,000. The gift will honor the life and work of their son, Derek, who died suddenly in January 2006, only 13 days after being diagnosed with a glioblastoma.

Derek was an extremely active person, according to his father. "He was climbing mountains in Peru when he experienced a blinding headache and had trouble walking. He came back to Miami where he was diagnosed. We had Christmas together before he died."

In Derek's memory, the Pipers are adding to the memorial fund in their son's name. "Our family is now committed to make the endowment stronger and more permanent by increasing the value of it substantially," says Dr. Piper. "The endowment is a commitment from Derek's family and friends that his name, his wish and his dream live on."

When the fund reaches \$200,000, it will bequeath a \$10,000-a-year award to an emergency medicine resident for training internationally and will give an annual scholarship and stipend to an emergency medicine resident to treat people and learn more about medicine in the third world.

Derek was a fourth-generation medical doctor in the Piper family, following in the footsteps of his great-grandfather, William Scott Piper, MD, an ENT specialist who served in World War I, his grandfather, William Scott Piper Jr., MD, a World War II flight surgeon in Burma, and his father, William Scott Piper III, MD, an orthopaedic surgeon who served in Vietnam.

Derek received a bachelor's degree and an MD from Tulane University. "He was very interested and passionate about tropical medicine and treating those in remote and rural areas," says his father. "Between his second and third year of medical school, we sailed around the world together and lent our medical skills to rural villagers across the Pacific."

Derek finished the five-year residency program at UIC in internal and emergency medicine in 2004 and was double board-certified in those areas. He balanced his professional life with his passion for mountain climbing and marathon running. He traveled to Africa and did volunteer medical work in Kenya, Zanzibar, Tanzania and Madagascar. While there, he satisfied his passion for mountain climbing by scaling Mount Kilimanjaro.

After his residency, he was working in New Orleans when Hurricane Katrina hit, forcing him out of the city. "What impressed Derek about his travels in the third world was the happiness and contentedness of the people he met there," his father adds. "The fabric of rural life, the villagers' lack of inter-



est in material things, and the strong social unit of tribal life contributed to a community where there was no crime and hardly any malcontents."

Derek was troubled, however, by the fact that the safety of these rural villagers was threatened by disease and that there were inadequate medical services available. "Derek was concerned about the lack of medical care in the third world, and he was determined to make a difference."

Derek's teacher and mentor at UIC during his training was Timothy Erickson, MD, director of emergency medicine. "We already had a small fund to get a resident to an underserved area," says Erickson, "and Derek had participated in it. Before he died, he mentioned that he wanted to see it perpetuated."

Erickson remembers Derek as somebody who touched and affected many lives by the exemplary way he lived his own. "He was a wonderful humanitarian," he says, "and he was a superb emergency room doctor: quick on his feet, with great common sense and great people skills. He liked the ER because he could serve an inner-city, underserved, and often poverty-stricken population."

Erickson says that the residents chosen by the Piper fund are in keeping with Derek's humanitarian beliefs. "Todd Templemen was the first chosen and just got back from Zambia where he offered healthcare to an indigent population, including the treatment of leprosy. Jonathan Babbit went to Borneo in the spring where he worked in a remote and primitive region of Indonesia.

"Both medical relief expeditions would have made Derek very proud," adds Erickson. "Thanks to the generous and gracious gift from the Piper family, this humanitarian scholarship outreach program will live on and touch peoples' lives all over the world in Derek's memory."

Derek's mother and father hope to see their gift and the endowment used to send other residents to these areas that meant so much to their son, "so the spirit of his work will carry on." Derek Piper, MD on a snowcovered mountain in Bolivia

niser, climbing Mount Kilimanjaro



Ways to Give

For information on supporting the Derek Piper Memorial International Fund for Emergency Medicine, please contact Patricia Wager at (312) 413-9763 or pwager@uic.edu.

Family Fund Lends Support to Chicago Project

by Lee Scheier

The Efroymson Family Fund has given

a second gift of \$100,000 to the college to support the Chicago Project, an international effort to develop a functional cure for diabetes. The fund, which gave its first gift in 2005, is part of the Central Indiana Community Foundation that inspires, supports and practices philanthropy, leadership and service in the community.

The Chicago Project is



based at UIC under the leadership of José Oberholzer, MD, director of cell and pancreas transplantation and associate professor of surgery. "The Efroymsons are a wonderful family of devoted humanitarians," says Oberholzer. "When I presented my work to them, they immediately wanted to support our research."

Elissa Efroymson first learned of Oberholzer's work from Howard Nochumson, executive director of Washington Square Health Foundation. They then met with Oberholzer. "Dr. Oberholzer was so passionate about his work. We discussed the project, and we decided to try to help him with the research," she says.

Efroymson says that it was the compelling and innovative nature of the project and the importance of the research that easily swayed her family to make a gift. "This was something in the area of diabetes research that was new and different and could really give a lot of people hope," she says.

Oberholzer already has transplanted islet cells in 10 patients with advanced diabetes, and they all now are living completely insulin-free lives.

At UIC, healthy pancreatic islets from donors are isolated a few hours before transplant. Oberholzer injects about a half million cells into the patient's liver, where they lodge and begin functioning like a miniature pancreas, producing and releasing insulin.

Patients, however, must be on immunosuppressant drugs to prevent the immune system from attacking the islets. "The gift from the Efroymson family allows us to test the microencapsulation of the islets in a preclinical trial," says Oberholzer. "This procedure will shield the cells from the immune system and allow patients to live without the need to take immunosuppressant medications. These funds will help us make our laboratory research useful to patients."

Efroymson also was impressed by the innovative research model that defines the project. The Chicago Project is a scientific alliance of top scientists who work cooperatively to solve the various pieces of the research and clinical aspects that will lead to a functional cure for diabetes.

Fifteen highly qualified

research scientists from Switzerland, France, Israel, Italy, Canada and the United States are working toward this end. "A key factor in our excitement about this research is that these great scientists are working together," says Efroymson. "More researchers should work together and help each other. Look what can be accomplished."

Efroymson grew up in Indiana, where the family's philanthropy in Indianapolis goes back to the 1870s. Her great-grandfather, Gustave, helped create the Indianapolis Foundation, and her mother, Lori, continues that tradition through her service on the CICF board.

Efroymson moved to Chicago to attend Loyola University where she met her husband, Adnaan Hamid, MD, a psychiatrist, who graduated medical school at UIC in 1996. They currently live in Wicker Park.

"I worry about my children," says Efroymson, the mother of Jaydra, 3, and Lincoln, an infant. "The prevalence of diabetes has become so much worse in the United States. This research not only helps the diabetic, it helps families that care for and about them. Everybody knows someone who is affected."

Last November, Efroymson met two of the women who have had the islet transplant and are now functionally cured of diabetes. "That made me feel fantastic to see them and hear their stories," says Efroymson. Both women no longer take insulin and are healthy.

"After hearing about the amazing changes in their lives, we wanted to do more to help, and we hope this will inspire others to do what they can because this kind of research is ongoing. The bottom line is that people's lives are changed by the Chicago Project and we want that to continue."

Elissa Efroymson, her husband, Adnaan Hamid, MD, BA '96, with their two children, Jaydra and Lincoln

Info@

For more information on the Chicago Project, visit www.thechicago project.org. For more information about giving to the Chicago Project, please contact Patricia Wager at (312) 413-9763 or pwager@uic.edu.

Tiptoe Through the Tulips Ball

by Carla Beecher-Möehn

Face the Future Foundation, formerly called the Craniofacial Center Advisory Board, sponsored its third gala, "Tiptoe Through the Tulips Ball," in April at the Four Seasons Hotel to raise funds for the center and its patients.

"We have a new name and a new logo, but our commitment to the Craniofacial Center remains the same," says Laurie Bay, president. "Our mission is to support and assist patients who have craniofacial and maxillofacial issues to help them lead fuller, more productive lives."

"The success of this yearly gala is critical to the success of the Craniofacial Center. This year it raised more than \$130,000," says the center's medical director, David Reisberg, DDS. The proceeds support patient care services otherwise not reimbursable by insurance. More than half of the center's patients receive public aid.

According to Reisberg, critical team services such as audiology and psychology are not paid for by the state's public aid system. "We depend on the foundation's endowment to supply these all-important services to our patients," he says.

"In addition to our yearly gala, foundation members have personally contributed funds to this endowment," adds Bay, who has been a member of the foundation since it was founded in 2006.

The foundation has thought of other creative ways to raise



funds, including a luncheon it hosted featuring Her Royal Highness Princess Katherine of Yugoslavia. The luncheon was held at The Fortnightly Club in Chicago last year. Another event was sponsored by Chicago antique

dealer Daniel's Antiques that raised \$5,000 for the center.

"This revenue directly supports the team members at the Craniofacial Center who provide these vital services to our patients. We're extremely grateful," says Reisberg.

"Face the Future Foundation wants to help these patients put their best face forward by providing funds to give them access to the healthcare services that will enrich and fulfill their lives," says Bay.

The Craniofacial Center is the Midwest's premier cleft/craniofacial care facility and offers the services of 32 medical, dental and allied health specialists in a single location. Elizabeth Najda, Cynthia Vacin, Candice Rosen, Sarah Taich, Laurie Bay and Andrea Biel-Cohen. Taich and Bay co-chaired the event.



Ways to Give

For information about helping the Craniofacial Center provide services to its patients, please contact the Office of Advancement at (312) 996-4470 or med-email@uic.edu

Eye Research Benefactor Inspired Many

by Janice Rosenberg

A passion for promoting eye research

led Velma Roberts Becker to leave a generous gift to UIC's department of ophthalmology and visual science.

"We are enthusiastically embracing a project of understanding the barriers encountered in performing total eye transplantation," says Dimitri Azar, MD, professor and head of the department of ophthalmology and visual science. "The gift will be the nucleus that will enable a consortium of researchers to proceed with basic experiments leading toward this goal, and this will be Velma Roberts Becker's legacy."

Becker, who died in 2005, was legally blind. She never allowed her infirmity to prevent her from participating fully in life or from always learning as much as she could wherever she went, says her nephew Kevin Roberts.

"She was quite a lady," Roberts says. "She continually put money aside for the future, and that meant being able to donate to a cause that she felt very strongly about."

Becker, the youngest of seven children, was born in 1926 on a farm in southern Illinois. Becker's mother and stepmother encouraged her in her studies by reading her homework to her. In 1948 Becker received a BS in education from Southern Illinois University, and in 1966 a Master of Education from the University of Illinois.

Throughout her career working for the state of Illinois, Becker concentrated on educating people about issues for the visually impaired and teaching people with vision problems how to function in everyday life. This included teaching Braille and showing blind people how to set up their homes as practical living spaces.

Becker married her husband, William, in 1962. The two traveled numerous times to visit his family in Germany. After her husband died, Becker continued to visit his sisters on her own.

When Becker moved to a retirement village later in her life, she continued to teach. She helped a sighted person who worked at the facility learn to read. Until the very end of her life, she continued to be self-sufficient.

"My aunt was an inspiration to many people," Roberts says. "She lived in a manner to learn, see things in her mind and remember the important lessons of life."



Ophthalmology benefactor Velma Roberts Becker

Hispanic Center of Excellence by Heather Hoffman

As the Hispanic population in Chicago grows, so does the demand for qualified physicians who understand their needs. For the past 15 years, the Hispanic Center of Excellence

Jorge Cavero, MD, is a member of the UIC Medical Advancement Council and a strong supporter of the Hispanic Center of Excellence at UIC.



at UIC has made it its mission to recruit and support worthy Hispanic medical students. Since 2000, the College of Medicine has gone from 30 Hispanic students to 51 in its entering class.

Founded in 1991 the HCOE assists the college in recruiting and training Hispanic medical students. The center strives to

increase the admissions of Latino students; provide research opportunities on Latino health-related issues; expose students to Latino health needs; enhance Latino student performance; develop curricular initiatives that address cultural competence issues in medical care; and increase the number of Latino faculty in the college.

The HCOE carries on this mission with a staff of four, led by Jorge Girotti, PhD, associate dean and director of the center, and a generous benefactor, Jorge Cavero, MD. Cavero, an internist in private practice, is not an alumnus of UIC, but has become an advocate of the college. Intrigued by the number of qualified physicians UIC graduates who continue to work in the Chicago area, he decided to take a closer look at the school.

"I looked at other medical schools across the state, and UIC was ahead of the curve in its Hispanic enrollment," Cavero says. "I went to Dr. Girotti to see what could be done to promote the enrollment of Hispanic students. I wanted to set up a scholarship fund and make sure no Hispanic students were



Gathered at Carnivale: (first row) Rep. Edward Acevedo; Carolyn Lopez, MD, co-bureau chief of Cook County Bureau of Health Services; and Jorge A. Cavero, MD, co-president of Illinois Hispanic Physician Association. Second row: Sen. Antonio Munoz; Linda Rae Murray, MD; and Sen. Miguel Del Valle. Third row: Luis R. Munoz, MD, co-president of Illinois Hispanic Physician Association; Dean Joseph Flaherty, MD; and Sen. Martin Sandoval.

dropping out for financial reasons."

To achieve this goal, Cavero pledged \$100,000 to the HCOE and joined the Medical Advancement Council. "As a member of the Presidents Council and the Advancement Council, I knew I could work across campus at the administration level to raise awareness of this population and its needs. The Hispanic population is exploding in Chicago, and UIC is the preferred hospital for them. We need to have a bridge between the hospital, the college, the school and the community." Despite state and federal funding cuts, the HCOE has made important strides.

Cavero wants to expand the center's goals beyond medical student recruitment. "We need to use the center as a recruitment tool for Hispanic residents in all of our subspecialties and retain them as teaching faculty." He's also pushing the longitudinal primary care program. "We need attendees to show Hispanic students what it is like to work in the Hispanic community, so they can work there when they graduate."

Illinois Legislative Latino Caucus Supports Hispanic Center of Excellence

Guests of the Hispanic Center of Excellence symposium in November mingled and dined at Carnivale in the West Loop.

In September, Hispanic Business magazine ranked UIC one of the 10 top U.S. medical schools.



The Illinois Hispanic Physician Association hosted a symposium on the role of the UIC College of Medicine

Hispanic Center of Excellence in training future Latino physicians.

The MacNeal Foundation sponsored the event at Chicago's Carnivale restaurant in November, which featured keynote speaker Fernando Mendoza, MD, chief of general pediatrics at

Stanford University. Mendoza spoke about the value of the

center to the Latino community and the need for continued support, citing the recent loss of funding due to cuts in federal funding.

Dean Joseph Flaherty, MD, also spoke to the group of 100 physicians, alumni and members of the Illinois Legislative Latino Caucus about rising enrollment of Latino students at UIC. Flaherty said that in the last two years, the UIC College of Medicine has had the largest number of entering Latino students in the country.

A reception after the symposium included an awards ceremony during which Luis R. Munoz, MD, and Jorge Cavero, MD, honored members of the Illinois Legislative Latino Caucus for their support of state funding for the center.

nfo@

For more information on the Hispanic Center of Excellence, please visit www.hcoe. medicine.uic.edu or call (312) 996-4493.

ClassNotes

1942

Albert Sherwood Baker, MD, celebrated his 90th birthday on Dec. I. A celebration was held in his honor in Mt. Morris. He is retired after 36 years of private practice.

1943

Irwin Marcus, MD, BS '41, of New Orleans, is a clinical professor emeritus at Louisiana State University Medical School and founding chairman of Tulane University Medical School's child and adolescent department. In October 2006, he was honored by the Family Service of Greater New Orleans as one of 10 Outstanding Persons of New Orleans. He was also named a Distinguished Life Fellow by the American Psychiatric Association and the American Psychoanalytic Association.

1945

Richard Zalar, MD '45, FACP, devotes his efforts toward Alzheimer's disease and other dementia illnesses. To learn more about him and his book, *Day is Ending*, please visit our web site at www.medicine.uic.edu.

1947

William Strecker, MD, BS '45, of Montague, Mich., and his wife, Mary Eleanor, celebrated their 6oth wedding anniversary in June 2006. Now retired, Strecker practiced medicine in Terre Haute, Ind., for over 50 years.

1956

Nicholas Kefalides, MD, MS '56, BS '54, of Merion Station, Pa., joined the scientific advisory board of SensiGen, LLC, a biotechnology company focused on developing advanced gene-based molecular diagnostics.

Wesley Ryd, MD, and wife Lois are enjoying retirement in Batavia. He volunteers at Tri Cities Health Partnership Free Clinic in St. Charles and does yearly medical mission trips to Ecuador. During the summer they volunteer at Silver Birch Ranch in Wisconsin, where he stays active driving a ski boat, belaying at the climbing wall and occasionally removing fish hooks from young fishermen! They both had a wonderful time at the reunion last fall. He can be contacted at docryd@holmstad.com.

1959

Robert A. Flinn, MD, Res '69, of East Peoria, was presented the Constituent Leadership Award by the University of Illinois Alumni Association on March 15. Since 1997, Flinn has been instrumental in the growth of the Peoria Medical Alumni Council, serving as its president for two years. He created or expanded several initiatives, including the Student Mentoring Program and the M3 Educational Enhancement Award. Flinn is a retired clinical professor from the College of Medicine at Peoria.

1960

Stuart Levin, MD, BS '58, of Chicago, was appointed in September 2006 to chief medical officer of Prospect Medical Holdings Inc., a medical care management company. In this role, he helps develop medical programs for seniors and design physician education curriculum.

196[.]



Dean Joseph Flaherty, MD, met with **Charlie Daisy**, **MD**, **BS '59**, and his wife, Donna, at their home in Naples, Fla., in March. Flaherty thanked them for making a commitment to the Charles Daisy Endowed Lectureship in Medical Economics in Family Medicine.

Raymond M. Handler, MD,

BS '59, currently is practicing dermatology and does not plan to retire in the near future. He is a past president of the Chicago and Illinois Dermatological societies and has been honored as Practitioner of the Year. He and his wife live in Northbrook.

Maurice Pickard, MD, BS

'59, of Chicago, interned at the old R&E before completing his residency at UCSF. After serving in the Army for two years, he opened a private internal medicine practice in Chicago and retired in May 2005 as chief of staff at Lake Forest Hospital. Since then, he completed a fellowship at the University of Chicago in clinical medical ethics, which he is involved with at Highland Park and Lake Forest hospitals. He is a host on ReachMD XM Radio 233, discussing medical ethical

problems. He and his wife, Sheila, have three children and 10 grandchildren.

Ronald Stefani Sr., MD, Res

'61, of Elmhurst, retired from private practice in 2006. His interest is in microsurgery of the ear. Stefani has been married for 50 years, has a son and a daughter, and enjoys his grandchildren, golf, travel and fishing. He can be reached at r.stefani@comcast.net.

1962

Arthur T. Altman, MD, Res '68, of Northbrook, currently is retired. He is a member of the Noah Worcester Dermatological Society and the Chicago Dermatological Society. He enjoys taking adult-education courses through the Osher Lifelong Learning Institute and regularly volunteers at the Chicago Botanic Garden. He has a special interest in growing and caring for bonsai trees.

1964

Virgil Short, MD, retired after 35 years as an internist in Bloomington-Normal. In his retirement, he plans to spend time with his wife of 31 years, Patricia, and his son, Tom, a Marine. He has an interest in Civil War battlegrounds and digital photography.

1966

Terry Strom, MD, Res '68, of Brookline, Mass., is the director of the division of immunology at Beth Israel Deaconess Medical Center and scientific director of the transplant center. He was awarded the 2006 Homer W. Smith Award from the American Society of Nephrology at the organization's annual meeting. The award is given to an individual who has made outstanding contributions that fundamentally affect the science of nephrology.

1967



Dean Joseph Flaherty, MD, visited with **Gene Tardy, MD**, **Res '67**, and his wife, Marty, at their winter home in Naples, Fla. Flaherty thanked them for the M. Eugene Tardy, MD, Lectureship in Facial Plastic Surgery and the Humanities.

1969

Geoffrey Simmons, MD, BS '65, of Eugene, Ore., had his eighth book, *Billions of Missing Links*, published in February. His seventh book, *What Darwin Didn't Know*, is currently in its fifth printing.

1971

K.M. Tan, MD, BS '67, of Oakland, Calif., is president, medical director and co-founder of Kaiser Permanente School of Allied Health Sciences in Richmond, Calif. To honor his efforts for founding the school, Tan received the Sidney Garfield Exceptional Contribution Award from the Permanente Medical Group Inc., a 6,000-plus physician group in Northern California.



Alumnus Thomas Cornwell, MD '86, was featured on the cover of the March issue of UIC Alumni magazine. This is an excerpt from that story written by Kevin McKeough.





Paul Chiang, MD '89

HouseCalls

While house calls are a relic of the past for the vast majority of physicians, they are the sole focus of Thomas Cornwell, MD '86. He's been providing home healthcare to patients since 1993, and last December completed his 20,000th house call.

His practice, HomeCare Physicians, currently provides care for about 800 homebound patients in a two-county suburban area west of Chicago. Most of them are elderly and physically infirm—the average age of his patients is 80—and many are incapacitated mentally due to conditions such as Alzheimer's disease and stroke. Cornwell also treats younger patients who have neuromuscular disorders, such as muscular dystrophy and multiple sclerosis.

Cornwell and his partner, Paul Chiang, MD '89, see their practice as a form of ministry. In fact, Cornwell comes from a long line of Lutheran ministers and originally planned on following in their footsteps. However, as an undergraduate student at St. Olaf College in Minnesota, he discovered he didn't possess the necessary aptitude for writing and public speaking and, at an adviser's suggestion, pursued medicine instead. A native of suburban Palatine, Cornwell then attended UIC's College of Medicine, where he received the William J. Grove Outstanding Medical Graduate Award for academic achievement and leadership.

He praises the college's medical faculty for their dedication to teaching and hands-on interaction with patients, both of which were central to his education. "You get a great clinical experience at UIC," says Cornwell. "As a student, I was given the chance to have a lot of hands-on clinical experience with patients—things like drawing blood, starting IVs, taking histories and performing physicals—at an early stage in my career."

After completing a residency and working for a clinic, Cornwell was recruited to begin a home-care program in 1993. When the program ran into financial difficulties, Cornwell partnered with Winfield-based Central DuPage Health, his previous employer, to establish HomeCare Physicians, and began caring for patients in 1997.

When Chiang is caring for his patients, he likes to look at the photos that decorate their rooms, which often show them as children, newlyweds, parents and grandparents. "It reminds me of the humanity of medicine-that this individual is not just another dementia patient or another renal-failure patient," Chiang says. "They are human beings with all the feelings you and I have."

That personal connection is part of what led Chiang to join HomeCare Physicians in 2000. He recently completed his 10,000th house call. "I wanted to find a practice where I can spend time with my patients, where I can use my ministry skills and where my personality would be a good fit," he says. His work also allows Chiang-who has a master's degree in bioethics-to pursue his interest in ethical issues in medicine. "I'm dealing with end-of-life instancesautonomy issues, feeding-tube issues," he explains.

While he acknowledges that responding to his patients' needs under such difficult medical and emotional conditions can be draining, Chiang is gratified by their appreciation of his care. "This work is emotionally rewarding, intellectually rewarding and professionally rewarding," he says. "I am very blessed. I can't be more thankful."

Both doctors take great fulfillment in seeing the positive outcome of their work. "The greater the challenges, the greater the difficulty, the greater the difference you can make," Cornwell says.

1972

Michael Ainslie, MD, Res '75, a pediatric endocrinologist for the past 30 years in Minneapolis, Minn., at the Park Nicollet Medical Center, is chairman of the board of the Minnesota Medical Association and a member of the American Medical Association. He is married to Kathryn Talley and has three grown children. He can be reached at michaelainslie@earthlink.net.

1973

Edward B. Lack, MD, Res '73, BS '65, of Chicago, is a partner at MetropolitanMD. His practice integrates nutrition and fitness into its liposculpture services. Lack is president-elect of the Cosmetic Surgery Association.

1975

Fred A. Simon Jr., MD, of Goshen, Ind., practices obstetrics and gynecology. Following his retirement as a colonel in the U.S. Army, he moved to Goshen and has been in practice there for 15 years. He has completed medical missionary trips throughout the world,

including stints in Ecuador, Peru, the Dominican Republic and Jordan. He and his wife, Patricia, are parents of four children.

1977

Stephen N. Keith, MD, of Ellicott City, Md., has been appointed president and chief operating officer of Panacea Pharmaceuticals Inc. He is responsible for directing the company's therapeutic product development efforts as well as launching new cancer diagnostic laboratory services.

1979

Delphine Wojcik Eichorst,

MD, BS '75, of Golden, Colo., currently is practicing neonatology in Denver. Her son is applying to medical school this year-life is coming full circle (almost). She can be reached at deichorst@comcast.net.

Thomas C. Reese, MD, of Mount Prospect, is a staff physician at Resurrection Health Care's urgent care and occupational health office. As a missionary worker, Reese has traveled to Mexico to assist a free medical clinic and help

build houses and churches in low-income areas. Reese currently is studying Spanish so he can do medical mission work in Latin America after retirement.

Gregory A. Shove, MD, BS

'75, retired after a 20-year career as a rheumatologist in Racine, Wis., where he lives with his wife, Sandra, and their daughter, Andrea. Shove was elected president of the Wisconsin Rheumatological Association in April 2006. He serves on the Wisconsin Medical Society Political Action Committee Board and

recently joined the adjunct faculty of Capella University, a for-profit online university where he teaches two undergraduate biology courses.

1981

Kenneth W. Mihelich, MD, MS '84, of Belvidere, is a general surgeon/trauma surgeon in Rockford. He has been on staff at OSF St. Anthony Medical Center since 1988 and is an associate professor in surgery at the College of Medicine at Rockford. He and his wife, Nancy, have two children. Laura, 18, and Lisa, 15. Mihelich's nonmedical interests include computers, photography, music and travel. He would be happy to hear from classmates and can be reached at kwm2208@gmail.com.

1983

Steven I. Rabin, MD, of

St. Charles, is a board-certified orthopedic surgeon and chairman of the department of orthopedic surgery at Dreyer Medical Clinic in Aurora. In addition to serving as president of the Illinois Association of Orthopedic Surgeons, he is also a member of the American Academy of Orthopedic Surgeons and Orthopedic Trauma Association.

Arvind Shukla, MD, Res '83, of Willowbrook, is now the associate professor of neonatology at Rush Children's Hospital. Following his fellowship, he went to Calgary, Alberta, Canada, for eight years; he then spent seven years at Christ Hospital in Chicago as the clinical director of neonatology, and five years at UIC, moving last January to Rush Hospital. He and his wife, Panna, have two daughters—Urmy and Shenna. He can be reached at shukla42@yahoo.com.

1984



Peter M. Kerwin, MD, FACC, of Wheaton, is a cardiologist and has been a member of the Midwest Heart Specialists group in the western suburbs of Chicago for 17 years. He also is the medical director of the Cardiac Catheterization Lab at Advocate Good Samaritan Hospital in Downers Grove. Kerwin is an FAA Senior Aviation Medical Examiner as well as a power plane and glider pilot.

Kenneth L. Piest, MD, BS

'78, of San Antonio, Texas, has overseen a San Antoniobased medical practice, specializing in ophthalmic plastic and reconstructive surgery, for the past 17 years. He was profiled in the *Chicago Tribune* in August 2006 after being diagnosed with leukemia. His sister, Kerry, has launched a search for bone marrow donors.

Michael Thomas, MD, of

Cincinnati, Ohio, is a professor and director of reproductive endocrinology and fertility at the University of Cincinnati. In addition, he also maintains a private practice. He and his wife, Megan Kessler, MD, also an ob/gyn, are the proud parents of 4-year-old Langston and 8-year-old Maya. Thomas is looking forward to his 25th class reunion in 2009 and plans to be involved on the reunion committee. He can be reached at mthomas867@aol.com.

1985

Joseph Mishell, MD,

Res '90, now practices in Highland Park with Drs. Neil Aaronson, MD '63, Res '67, and Alan Freint, MD '80, Res '84. He and his wife, Amy, have three children: Sari, Zev and Noa. He can be reached at ajmishell@comcast.net.

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John J. Dreyzehner, MD, BS '85, of Abingdon, Va., is a preventive and occupational medicine specialist and director of the Cumberland Plateau Health District in Lebanon, Va. Along with co-chairing the Southwest Virginia ASAP Coalition, he is a member of the board of directors for CareSpark and vice chair of OneCare, a Virginia-based organization that links human and health services resources.

1990

Philip E. Siefken, MD, of Greenville, joined the medical staff of Greenville Regional Hospital in 2006. At Indiana University, he served as director of the Pediatric Residency Continuity Clinic, associate clinical professor of pediatrics and assistant clinical professor of internal medicine for the School of Medicine.

1993

Larry Jennings, MD, Res '04, BS '89, of Hinsdale, is the newly appointed director of molecular pathology and associate director of histocompatibility and the immunogenetics laboratory at Children's Memorial Hospital.

1995

David L. Walner, MD, Res '95, BS '85, of Highland Park, has been in practice with Suburban Ear, Nose & Throat in Niles since 1997. He is an assistant professor at Rush University Medical Center. Walner spoke at the Midwinter Symposium on "Practical Challenges in Otolaryngology" in Colorado this past February. He and his wife, Alison, have four children, and he can be reached at dwalner@comcast.net.

1997

Rajeev H. Mehta, MD, Res '97, of Burr Ridge, continues to work at VA on Wednesdays and is a partner in ENT Surgical Consultants in Joliet. He is married to Tejal, and they have two boys: Devan, 2, and Dilan, 5 months. He can be reached at his office phone at (815) 725-1191.

1998

Samantha Sattler, MD, is living in St. Charles County, close to St. Louis, where she works in a group practice with four family practice physicians. Sattler spent five years in private practice in rural southern Illinois before making the move to St. Charles and is extremely pleased with her decision and the great practice opportunity.

2002

Sharon Harris-Ingram, MD, of Chicago Heights, joined the Order of Saint Francis Medical Group's ob/gyn division last July. She completed her residency at Mercy Hospital in Chicago.

Joshua Langford, MD, of

New York, is finishing the last year of his orthopaedic residency at Mt. Sinai Hospital. He will be going to Tampa, Fla., for a one-year fellowship in orthopaedic traumatology. He and his wife, Laura, and daughter, Lily, welcomed Sidney Elizabeth to the family last August.

Robert Vickrey, MD, of Peru, was elected to the Wisconsin Medical Society Board of Directors. He is completing a forensic psychiatry resi-



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dency at the University of Wisconsin Hospitals and Clinics in Madison.

2003

Samuel Castillo, MD, of Phoenix, Ariz., met his wife, Laura, during his internal medicine residency at Mayo Clinic. They married in July 2005 and had their first child, Lucia, in April 2006. He is completing a gastroenterology fellowship at Carl T. Hayden VA Medical Center.

2005

Darlene Duncan, MD, of Rochester, Minn., will be one of four chief residents in 2008-09 at the Mayo Graduate School of Medicine internal medicine residency program.

Karyn Leniek, MD, of Chapel Hill, N.C., finished a transitional residency program at Christiana Care in Delaware after surviving Hurricane Katrina. She is completing a preventive medicine/ public health residency at the University of North Carolina at Chapel Hill.

2006

Todd Lanser, MD, of Rockford, welcomed the arrival of his daughter, Gillian Avery, last September.



are curious about what you've been up to. Please fill them in by sending your latest news and accomplishments to med-email@uic.edu, and we'll be sure to include it in the next issue of *UIC Medicine*.

InMemoriam

Faculty



JOSEPH SHERIDAN BEGANDO, MS '47,

PHD '51, of St. Charles, first chancellor of the University of Illinois Medical Center at Chicago, died May 2.

During his long tenure as chancellor of the medical center campus, Begando presided over a period of rapid growth in the health sciences, including a doubling of the number of students on the Chicago campus and the development of regional schools of medicine in Rockford,

Peoria and Urbana-Champaign.

Begando oversaw the addition of advanced-degree and other new academic programs, and an expansion of the physical campus in Chicago, with construction of a new hospital, new colleges of Dentistry and Nursing, a library of health sciences—one of the largest and most comprehensive of its kind—and student facilities, such as residences, a union and a recreational center.

Begando played a key role in establishing the School of Public Health and in fostering its early development in the 1970s. Following his retirement as chancellor, Begando was named professor of health resource management in the School of Public Health and continued to teach there on a part-time basis through 1995.

"We are grateful to Dr. Begando for the vision and commitment he contributed to creating the first school of public health in the state of Illinois," says Sylvia Furner, interim dean of the School of Public Health.

Begando was named acting vice president in 1960 and vice president and chief executive officer of the medical center at Chicago in 1961. In 1966, Begando's title was changed to chancellor when the university reorganized. He served in that role until 1982, when the medical center and Circle campuses were merged to create UIC.

Begando graduated from Kansas State Teachers College in 1942 and served as an officer in the U.S. Coast Guard during World War II. He taught marketing and business organization at the University of Illinois while earning a master's degree in business and a doctorate in economics.

After earning his doctorate, Begando taught at Urbana and at the University of Kansas. In 1953 he was named assistant dean of the College of Pharmacy. In 1958, he became assistant to the president of the university before moving back to the medical center two years later.

"It was a pleasure and a privilege to associate with Joseph Begando," says Bernard Baum, professor emeritus of health policy administration in the

School of Public Health. "His being awarded the Golden Apple Award for excellence in teaching by the students in his management course attests to both his competence and human understanding. That recognition was richly deserved."

Begando received many other awards, including the Operation ABLE (ability based on long experience) Claude D. Pepper Distinguished Service Award and the Meritorious Achievement Award of Pittsburgh State University.

The Joseph S. Begando Lecture in Medical Humanities, an annual lecture at UIC, was established at the time of his retirement to honor his many contributions to the campus.

Begando is survived by his wife, Virginia, three children, four grandchildren, two great-grandchildren and a sister.

ARTHUR BODDIE, **MD**, of Riverside, former professor and vice chairman of surgery, died Oct. 22, 2006. He joined the department of surgery at UIC in 1990 as an assistant professor and was promoted to professor three years later and vice chairman in 1997. A third-generation physician, he was the author of more than 100 published articles and held two patents for medical devices. He served as the president of the Chicago Surgical Society and was on the staff at Michael Reese Hospital and a consultant at the West Side VA Medical Center.

CHARLES GRAY, **MD**, of Rockford, died July 15, 2006. He was a retired clinical associate professor of medicine at UIC College of Medicine at Rockford from 1971 to 2006. After receiving an MD in 1942 from the University of Iowa, he completed a residency in internal medicine there in 1958. He was on the staff of Rockford Memorial Hospital from 1959 to 1987, during which time he helped establish the Pulmonary Function Lab.

AKIRA OMACHI, **PHD**, died May 6. He was for many years a faculty member at the College of Medicine in the department of physiology and biophysics, where he served as professor and, for a time, as acting head of the department. Omachi was named professor emeritus in 1990 and continued active investigation for several years before full retirement. He received his PhD at the University of Minnesota and was a long-time resident of Wilmette. He is survived by his wife, Chiyoko, nee Maeda, and his two children, Teresa and Robert.

GEORGE PAP, **MD**, of Rockford, died July 28, 2006. He was a clinical assistant professor of surgery from 1971 to 2000.

TAKESHI "KEN" SHIBUYA, MD, PHD, of Rockford, died Aug. 13, 2006. He was a professor of pharmacology in the department of biomedical sciences from 1981 to 2006.



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Alumni

1932

Charles R. Bloom, **MD**, of River Forest, died Dec. 12, 2006. He was retired from private practice, in which his son had joined him in 1978.

1937

Seymour R. Salberg, MD, of Ann Arbor, Mich., died Oct. 15, 2006. A retired physician, he was chief of staff at West Side VA Hospital and medical director for the Portes Cancer Prevention Center.

1938

Louis Olsman, MD, MS '37, of Carlsbad, Calif., died Nov. 24, 2006. He was retired from his surgery and gastroenterology practice.

1941

Frank C. Henry, MD, of Seattle, Wash., died Sept. 3, 2006. He was a noted surgeon who initiated innovative programs at Children's and Swedish hospitals. He worked with the Institute for Applied Physiology and Medicine to develop hyberbaric and Doppler techniques.

H.T. Merrell, MD, BS '40, of Tuscaloosa, Ala., died Feb. 24. He had a private practice in Marion for 27 years before moving to Alabama. He was a very active community member in Marion and an emeritus member of the board of the Marion Cultural and Civic Center.

1942

Daniel M. Clark, MD, BS '39, of Rockton, died July 31, 2006. He created Medical Associates in Beloit.

1944

Joseph Gulyash, **MD**, of Sevierville, Tenn., died Oct. 9, 2006. He had a distinguished career in private practice serving as an ophthalmologist.

Ralph Samuelson, MD, AB '41, of Savoy, died Nov. 27, 2006. He practiced medicine at Christie Clinic for 40 years.

Franz Strauch, MD, of Canton, died Dec. 10, 2006. A member of the American Medical Society's Prolotherapy Society, he was retired from general practice.

1946

Norman Frank, MD, BS '45, of Sarasota, Fla., died Sept. 4, 2006. He practiced medicine for over 40 years and was chairman of the Council of Medical Specialties.

Robert B. Schlesinger, MD, BS '44, of Bloomington, died Feb. 28. He was the retired medical director for Mutual Trust Life Insurance.

1947

Francis Jeffords, **MD**, **BS** '**45**, of Mundelein, died March 8. He had been in private practice since 1965. Every year since 1987, he served for two weeks at an Indian reservation hospital, providing healthcare to the needy.

1948

Dewitt Dwight Shannon, **MD**, of Manhattan, Kan., died Oct. 7, 2006. Following graduation, he practiced medicine in Riverdale, N.D., and Alliance, Neb., retiring in 2003.

1949

David W. Murrell, MD, of Hilton Head Island, S.C., died Sept. 29, 2006. Before he retired, he had a private practice in general medicine in Moline for more than 30 years.

Augusto Ortiz, MD, of Tucson, Ariz., died Dec. 16, 2006. In addition to a private practice, he opened neighborhood health centers to help poor farmers. His mobile health center UA Mobile Health Program still is going strong today.

1950

John Klabacha, **MD**, **BS** '**48**, of Palos Park, died in January.

1951

Vernon Zeller Hutchings, MD, BS '49, of Lincolnshire, died Jan. 19. He practiced surgery at Highland Park and Lake Forest hospitals for 35 years. He was an attending surgeon at Hines VA Hospital and clinical associate professor of surgery at UIC. He was a member of the American Board of Surgery, the AMA, the American College of Surgeons and the Chicago Surgical Society.

1952

David J. Richter, MD, of Tucson, Ariz., died Sept. 3, 2006. He enjoyed a 35-year career as a specialist in internal medicine.

Darrell E. Statzer, MD, BS '50, of Mount Zion, died Dec. 14, 2006. He was a retired ob/gyn who established the first methadone clinic in the country for treating pregnant heroin addicts. He served as department chair of ob/gyn at Wayne State University, director of the Family Residency Program at Southern Illinois University and director of Planned Parenthood of Detroit.

1953

Phillip Avalon, MD, BS '51, of Cathlamet, Wash., died Oct. 8, 2006. He practiced medicine in his community for 40 years.

Marvin E. Gold, MD, BS '51, of Valparaiso, Ind., died Nov. 3, 2006. An Air Force veteran, he specialized in orthopaedics.

Robert E. Nyquist, MD, BS '51, of Fort Myers Beach, Fla., died Jan. 7. He was a retired psychiatrist who practiced in Hinsdale for 45 years. Nyquist was known for going out of his way to inspire others, and his motto had always been: "Get an education." **Robert D. Smith, MD, BS '53**, of Colon, Mich., died Nov. 7, 2006. He practiced medicine in his community for 50 years. He was the first president of the newly organized Colon Chamber of Commerce and a member of the Colon Board of Education, and helped to develop the Colon Rescue Squad.

1954

William C. Hays, MD, BS '52, of Palm Desert, Calif., died Sept. 27, 2006. He practiced internal medicine and cardiology for over 20 years and was an active volunteer with the American Heart Association during his retirement.

Theodore Tenczar, MD, of Des Plaines, died Dec. 22, 2006. He was retired from practice at Holy Family and Resurrection hospitals.

1955

Ralph Casciaro, MD, Res '60, BS '53, of Fontana, Wis., died March 24. After practicing for 35 years in Chicago's northwest suburbs, he retired in 1997. He was an attending at Hines VA for 22 years and had served as president of the Chicago Laryngologic and Otologic Society.

1957

Richard F. Harvey, MD, BS '55, of Wheaton, died Feb. I. He practiced physical medicine and rehabilitation at Rockford Memorial Hospital, Loyola University Medical Center and Rush University Medical Center.

1958

James M. Sanderson, MD, BS '56, of Cadillac, Mich., died Nov. 22, 2006. He was a retired internist who served his community for 33 years. An avid outdoorsman, he enjoyed fishing and flying his airplane.

1964

Roger Berlin, **MD**, of Kansas City, Mo., died Sept. 16, 2006. He was a psychiatrist in private practice.

1965

Andrew V. Charles, MD, of San Francisco, died Nov. 27, 2006. He was a psychiatrist.

1966

Alan D. Harris, MD, of San Diego, died Jan. 17. He was a retired pediatrician.

1971

Laura C. Cunningham, MD, of Kettering, Ohio, died Sept. 21, 2006. She had served her Ohio community for 35 years as a pediatric physician who took a special interest in treating children with birth defects and autism.



Cardiologist, Entrepreneur Advocates Technology Transfer

Michael R. Bristow, MD '70, PhD '71, has never

been one to take the conventional route. The accomplished cardiologist and entrepreneur has always been one step ahead, seeking greater truths, eager to blend science and business to make a difference in people's lives.

Bristow has been a forerunner in developing new approaches for the treatment of heart failure. His career has focused on developing novel drug therapy for heart failure, and his current work targets gene variants that play a role in cardiovascular disease. Along the way, he's created several highly successful biotechnology companies and commercialized his research to benefit others.

"If you want your discoveries to turn into something useful, you have to start your own company to commercialize your intellectual property," says Bristow. "I tried through every conceivable process in the 1980s to get big pharmaceutical companies to pick up on my research, and it's like pulling teeth. It's a lot easier to go do it on your own."

All this entrepreneurial spirit is rooted in Bristow's early days growing up on a farm in McLean. "4-H and Future Farmers of America are designed to create business models around agriculture," he says. "Whether you're showing cattle at fairs, or planting crops in competition for the highest yield, a farm background teaches you how to develop your assets. By the time I was 10 years old, I was buying and selling cattle. It's no different than buying and selling biotech companies. It becomes part of your psyche and point of view."

With dual appointments as professor of medicine and cardiology at the University of Colorado Health Sciences Center and co-director and founder of the University of Colorado Cardiovascular Institute, Bristow splits his time between academia and business.

A 1966 graduate of University of Illinois Urbana-Champaign with a degree in veterinary science, he worked as a part-time research assistant in the department of physiology. "It was my first exposure to organized research," Bristow says. "I did gastroenterology research and performed a lot of dog surgery that dealt with the circulatory system; through that I became interested in the heart and circulation.

"Even in my academic training years

I was doing things differently," Bristow says. He was one of the first students to attend UIC's new combined MD/PhD program. "I applied and got in and chose pharmacology, specifically cardiovascular pharmacology. It seemed like the logical thing to do."

Bristow fast-tracked the six- to sevenyear program and completed it in five years. "I worked in the lab every free second I was allowed to," he says. "A lot of my medical school courses overlapped with graduate school requirements. As long as your thesis was on track, you could finish in a reasonable amount of time."

Some early mentors helped shape his career. In college, he'd heard about leaders in pharmacology at the college like Theodore R. Sherrod, MD, PhD, professor of pharmacology. "I did several rotations in his lab," Bristow says. Ultimately, he selected for his thesis adviser Richard D. Green, PhD, a new assistant professor, whose lab did work on adrenergic receptors, the foundation for Bristow's future work.

"The UIC College of Medicine allowed me to have a tailored individual track," Bristow says. "As long as I got my work done and did well I was allowed to do things a little differently. They were quite flexible as long as you delivered the goods."

Bristow's first foray into business was the creation of a contract research company at Stanford University in 1982 with two colleagues. "It taught me the ropes of how to start a biotechnology company," he says. The company was ultimately sold, and with some of the proceeds and intellectual property he and colleagues started Myogen, Inc.

By now, he'd moved on to the University of Colorado Health Sciences Center. Myogen served as a vehicle to commercialize his research and to raise money for the University of Colorado Cardiovascular Institute, which Bristow founded. "I started Myogen with new intellectual property both in terms of how to use certain cardiovascular drugs more effectively as well as to develop novel therapies and diagnostics targeted to basic molecular discoveries made by our laboratory and our collaborators in the early 1990s.

"At Myogen we were very successful at identifying and licensing-in drugs in late-stage development that we could subject to novel developmental strategies," he says. "As time went on we continued to identify additional opportunities." Some of these opportunities were leveraged around his intellectual property that already had gone through the early phases of clinical trials. "At one point, we had identified and secured the licensing path for five cardiovascular drugs for latestage development, but we didn't have the financial ability to develop all of them. We ended up developing three of them, and the other two were used by collaborators to start other companies."

Myogen was sold in November 2006 to Gilead, one of the largest biotechnology companies in the world. "My lab still has a relationship with Gilead," says Bristow. The \$2.5 billion sale of Myogen to Gilead made it the largest sale of any cardiovascular biotechnology company to date.

Bristow's next biotechnology venture, ARCA Discovery, was a spinoff from Myogen, to finish the development of one of the drugs that Myogen didn't have the resources or specialty expertise to complete. ARCA's mission is to develop cardiovascular drugs to pharmacogenetic targets. "When drugs are targeted to cardiovascular gene variants, the clinical response is much greater than in the general population," Bristow explains. In other words, if certain drugs are delivered to the right patients, they will respond better than others.

"This is the wave of the future," Bristow says. So far there are no other cardiovascular drugs targeted to pharmacogenetic variants. The lead compound ARCA is working on is a pharmacologically unique beta-blocker, bucindolol, for use in patients with chronic heart failure who have a certain genetic profile.

Bucindolol is through Phase 3 clinical trials, and Bristow suspects it'll take about a year to move through the FDA review process. "Drugs targeted to cardiovascular gene variants such as bucindolol will improve precision of therapy with beta-blockers," Bristow says. **"More importantly, it's the beginning of an era of where pharmacogenetic targeting will be used to improve the therapeutic index of many drugs.** We want to usher in this era, and become the leader of pharmacogenetic drug development in the cardiovascular space."

Bristow believes that scientists naturally gravitate to entrepreneurial activities, and that all serious scientists should be engaged in commercialization of their discoveries. "Once you are an independent scientist, you basically become a small businessman," Bristow says. "You run the business of your laboratory. Nobody gives you money to do research. You go out and earn it and bring it in and package your ideas and try to market them and get funded in turn. This is basically the same process as starting and developing a biotechnology company, albeit on a smaller scale."

Apparently, it is the same process as a farm boy assembling a show herd or a prize-winning plot of crops.

Gift to Pharmacology

Michael R. Bristow, MD '70, PhD '71, has given \$52,000 to the University of Illinois Foundation for discretionary use by the UIC College of Medicine department of pharmacology. Bristow's gift will be used in two ways. Asrar Malik, MD, professor and head of pharmacology, will set up the Bristow Post-Fellow Research Award to be given every year for the best postdoctoral fellow research in pharmacology. The \$1,000 award will be given at the annual department retreat held in the fall. Faculty judges will determine the recipient. Malik also has established the annual Bristow Lecture in Cardiology given by outstanding nationally or internationally recognized investigators. The first visiting Bristow Professor Annual Lecture was given in March by Stefanie Dimmeler, PhD, department of molecular cardiology, University of Frankfurt.



It's hard to know where to look first when you enter the Chicago home of Jerome Landy, MD '50, PhD, and his wife, Gayle. On the east wall of their high-rise is a floor-to-ceiling view of Lake Michigan; the west wall and entrance are devoted entirely to displaying contemporary art glass.

"I started collecting in 1992 while we were attending a wedding in New York City," says Landy, a retired surgeon and president of Germfree, a manufacturer of biological safety equipment for mobile and fixed laboratories. "I was walking down Madison Avenue when French cameo glass caught my eye, and I've been collecting ever since."

While trying to comprehend the vastness of their collection, Gayle Landy somewhat surprisingly adds, "I'm a minimalist. I like things clean and organized and in their place." Their home is a perfect blending of his penchant for collecting and her aversion to clutter.

The modern and open space allows guests to view the collection in groupings displayed along the walls throughout their home. Works by contemporary artists Harvey Littleton, Dale Chihuly, Joel Philip Myers, Marvin Lipofsky, William Morris and others are featured in their living room and entryway. Side rooms house antique pieces from the turn of the century by Steuben, Tiffany, Gabriel Argy-Rousseau, Emile Gallé and more. Add to this their Southwest and Beatrice Wood pottery and Inuit pieces and the collection becomes a mini-museum of sorts.

"It's hard to pick a favorite," says Landy. "Each piece is unique and has a story all its own."

Jerome and Gayle Landy at their Lalique cactus table

- 1 | Toots Zynsky
- 2 Emile Gallé
- 3 | Marcel Goupy
- 4 | Steuben

Veet the Class 2007









PEORIA

ROCKFORD

CHICAGO

RANDALL SUTTER

Assisting at the births of two of your grandchildren is not a typical part of medical school. But, then again, Randall Sutter, MD '07, hasn't followed a "typical" path to becoming a doctor. He spent nearly 30 years at work in trucking and commercial photography plus service as a volunteer EMT before turning to pediatric medicine.

Before he could begin medical school, Sutter had to complete a bachelor's degree. Many at his age would have been discouraged. He persevered with cell and molecular biology.

"Medical school was tough the first year with classes in Champaign, and my wife, daughters and grandchildren in Peoria," he says.

The Peoria medical campus offered much more than convenience. Sutter says, "It's a small medical school, so the students intermingle at all levels of experience. I was in with an amazing group of students and feel privileged to have worked with them."

Interaction with faculty also is paramount in Peoria. "You work with attendings one-on-one, and people really get to know you. I never felt like just another white coat in the crowd."

Sutter matched in a combined internal medicine-pediatrics program at OSF St. Francis Medical Center in Peoria.

TAMIKA ALEXANDER

Tamika Alexander, MD '07, never thought about medical school until her senior year at Duke University. A sociology major, she volunteered with Duke's rural health coalition. "I was impressed by their passion to provide free healthcare to people who couldn't afford it," she says. Inspired to become a doctor, Alexander spent another four years earning a second degree in biology.

With about 50 students per class, Rockford's close-knit medical community felt "like family" to Alexander. "Physicians invite students to their homes for dinner," she says. "Many of the local physicians volunteer as teachers and preceptors—they have a passion for the school." As president of the University Medical Student Council for two years, Alexander reinforced that collegial spirit within the diverse student body.

A feeling of community guides patient care, too. "I see the same patients again and again, and learn about their families and issues," says Alexander. "Healthcare is more than medical care. It's also social and psychological support."

After residency at UIC, Alexander will apply her own passion to help people by practicing ob/gyn in underserved areas of Illinois.

JAIME MORENO

Jaime Moreno, MD '07, grew up near the Chicago campus in the Pilsen neighborhood—one of the city's largest Latino communities. Like many of his neighbors, Moreno's family couldn't afford insurance.

In Mexico, though, his close relatives are doctors. "We visit them often. It's like I have two lives," he says. Becoming a doctor is his way of helping a community in need.

Just 20 miles apart, the Chicago medical campus is very different from Northwestern University, his undergrad school. "UIC is one of the most diverse schools in the nation," says Moreno. "There's so much opportunity here for people like me, who wouldn't have opportunity otherwise."

Diversity enriched his medical education. "Rotating through urban and suburban hospitals, we work with patients from different economic, social and ethnic backgrounds, and with a wide range of medical needs."

After residency at Advocate Christ Medical Center, Moreno looks forward to a career in emergency medicine. "Emergency care offers excitement and variety, plus serving underserved populations who come to the ER because they can't afford regular care."

CHAMPAIGN-URBANA

JESSIE KINDSCHI Dorais

As a biology undergrad at Brigham-Young University, Jessie Kindschi Dorais' main interest was helping her cross-country team win two NCAA Division 1 championships. Senior year, she was team captain, but kept the idea of medical school "in the back of my mind."

A native North Dakotan, Dorais, MD '07, got married right before starting medical school at the University of North Dakota. When her husband, Andy, entered Illinois at Champaign-Urbana, Dorais transferred here.

The move fit her well. Dorais enjoys the direct contact between medical students and attendings. She learns much from her peers. "My classmates have amazing backgrounds, and many have dual degrees," she says. She volunteers monthly in the HERMES clinic, established by a classmate to provide free health services. And, she mentors third-year students as a teaching assistant and president of the ob/gyn interest group.

Residency will take Dorais to the University of Utah's program in Salt Lake City. From there, she may pursue a maternal-fetal medicine fellowship or go into general ob/gyn care. She views ob/gyn as "a great mix of primary care and surgery."

Events



An Evening at UIC

K.M. Tan, MD, center, was honored April 21 during "An Evening at UIC" for creating the K.M. Tan Traveling Fellowship in Medicine and underwriting a student oasis on the east side of campus. With him are 2007 recipient Sruti Nadimpalli, left, and Chancellor Sylvia Manning.



Assistant dean and Alumni Council member Javette Orgain, MD, lit the flame at the Jan. 20th Flames vs. University of Detroit Titans game at the Pavilion The Titans took the Flames 66-54. Game proceeds benefited the I Care fund for patient services.



Office of Advancement (M/C 792) 302 Westside Research Office Building 1747 W. Roosevelt Rd., Ste. 302 Chicago, Illinois 60608-1203



Banking on Your Health

The UIC Medical Advancement Council and Private Bank hosted a January presentation on heart disease, diabetes and obesity. From left are council member Bruno Pasquinelli, John DeNardo, CEO of UIC Healthcare System, Ralph Mandell, president of Private Bank, and Patrick Daly, CEO of The Daly Group.



Lasky Foundation

The Susan F. Lasky Cancer Foundation provided supplies and a display case for artwork by pediatric patients, families and staff. Pictured are Maria Lewis, art therapy intern; Darlene Gold, executive director of the foundation; Staci Levy, foundation board member; Mary Lou Schmidt, MD, pediatric oncologist; and Pam Lasky, foundation board member.



A Silver Lining Foundation gave a \$10,000 check to the medical center's Buy A Mom A Mammogram™ Program to support free mammograms for qualifying women. From left are Virginia Delaney, radiographer; Mireya Dondalski, MD, radiologist; Sandra A. Goldberg, PhD, foundation founder and chairman; John DeNardo, MS, MPH, CEO of UIC Healthcare System; Nancy Brown, MD, radiologist; Brenda Owens, radiographer; and Joseph Abraham, MD, radiologist.



Naples Brunch

Steve Belcher, DDS '70, and his wife, Sherry, hosted 40 alumni and friends in February who gathered at the Olde Cypress Country Club in Naples, Fla., to hear José Oberholzer, MD, talk about the Chicago Project's work to develop a cell-based cure for diabetes. Also pictured are Dean Joseph Flaherty, MD, Chancellor Sylvia Manning, PhD, José Oberholzer, MD, and Sid Micek, UI Foundation president.



Challenge of the Deans

Joseph Flaherty, MD, and LeAnne Trapp, M1, participated in the annual Challenge of the Deans, a friendly competition between deans to raise awareness of UIC's basketball program. The two won with the most free throws. With them are James Schmidt, director of athletics, and Sparky the Dragon.



New York-area alumni reconnected at a reception in Manhattan in March at the home of Medical Alumni Council Chairman Milton Kramer and his wife, Fradie. From left are Milton Kramer, MD '54; Martha Crowner, MD '82; Enrico Benedetti, MD, Res '93, professor and interim head of surgery; and Jerald Zimmerman, MD '82.

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