MESSAGE FROM THE EXECUTIVE DEAN

DAVID M. STERN, MD

W hen you receive this magazine, UTHSC has graduated another class of rigorously prepared medical students, eager to begin their residencies and delve into clinical practice. The recent reaccreditation of our college (see page 8) for an eight-year term is a testament to the high quality, inclusive medical education we provide. We are pleased to report that many of the new UT physicians will undertake the next stage of their careers in the UTHSC statewide system. Under the auspices of our Graduate Medical Education unit, 68 physicians, 44 percent of our newly matched residents, will train at our partner hospitals in Memphis, Knoxville and Chattanooga. For photos and more Match Day statistics, as well as a list of residency placements, see pages 44 to 48.

The college continues to extend our reach, adding accomplished new faculty to expand our range of clinical services as well as education and research opportunities. We are committed to developing new approaches to address the significant health disparities and pressing health care needs of our community. On page 14, you’ll read about Dr. Matthew Ballo, chair of our new Department of Radiation Oncology, which was formed under the joint cancer initiative with UTHSC, Methodist Le Bonheur Healthcare and the West Cancer Center. Also, beginning on page 19, the feature story on stroke includes a spotlight on Dr. Andrei Alexandrov, who recently joined us to chair the Department of Neurology. Of course, you’ll also find several stories in this issue about our extant clinical and discovery-oriented faculty, who continue to earn significant research awards, publish in prominent industry journals, and share their expertise with colleagues at the start of their health care journeys.

It’s important to note that, during the February meeting of the UT Board of Trustees, President Joe DiPietro told the group that expanding research capacities is a challenging area, and UT needs to build on its relationship as co-manager of Oak Ridge National Laboratory and on corporate partnerships that the UT Health Science Center can develop through its College of Medicine. On pages 8 and 32, you’ll see evidence of our college’s expanding partnerships with Saint Thomas Regional One Health through accreditation of our residency program, as well as with the West Cancer Center and Methodist Le Bonheur Healthcare.

Another partnership development rapidly coming to fruition is the UT-Regional One Physicians faculty practice, which is set to launch in the fall. Earlier this year, the Regional Medical Center at Memphis changed its brand and became Regional One Health. We have been in discussions with Regional One’s leadership for some months about creating a faculty practice aligned with the hospital. In February, the UT board approved designation of UT-Regional One Physicians as a faculty practice plan for the College of Medicine in Memphis, authorizing us to move this joint project forward. At that time, President DiPietro also observed the number of patient billings or clients served by UTHSC has increased dramatically since FY10. With the creation of another solidly founded, hospital-based faculty practice, we anticipate this trend will continue.

Despite all the change under way on our campus, on many levels our college remains constant – most especially in our commitment to educate and train high quality, caring physicians to serve others. We hope you will join us in August for Medicine Alumni Weekend (schedule of events on page 34) and for the Golden Graduate Homecoming in October (see page 36 for details). As our alumni, you are a foundational element of our current and future success.

David Stern

David M. Stern, MD
Executive Dean
College of Medicine

MESSAGE FROM THE CHANCELLOR

STEVE J. SCHWAB, MD

A s I write this letter, the footprint of our institution continues to evolve and expand. On our main campus in Memphis, construction and renovation projects valued at more than $124 million are either under way or in the planning stages. The new Translational Science Research Building is on track for completion in 2015, connecting its researchers via elevated walkways with the scientists in the adjacent Cancer Research Building. Demolition of Goodman Residence Hall is finished. Following closely on its heels are razing of the Beale, Randolph and Feurt buildings. (See photos on page 16, and short demolition videos at www.facebook.com/uthsc, posted on April 4)

Transforming our main campus is a pivotal element in our plan for the future. We are making way for new, state-of-the-art research and educational facilities that will reposition UTHSC as the competition intensifies to recruit top-tier students, researchers and faculty. Revitalizing the Historic Quadrangle as the focal point of our Memphis campus is also on the horizon, with some $68 million earmarked for this effort.

In tandem with the evolution of our headquarters campus, we are pleased to report that much progress is being made at our major location in Nashville. Through our deepening partnership with Saint Thomas Health, our reach and impact in Nashville and Middle Tennessee will increase exponentially. We are laying the foundation for a more vital clinical and educational presence for our College of Medicine in the central area of the state.

Our College of Pharmacy is also extending its presence in Nashville. In the near future, all of our pharmacy students will spend their first year of training in Memphis and choose whether to spend their next three years in Nashville, Knoxville or Memphis. As the needs of our patients rise, statewide and throughout the region, and the demands on our health care practitioners increase, we continually demonstrate our institution’s flexibility, resolve and dedication to bring health care education, training and clinical care wherever it is needed.

In February, during the UT Board of Trustees meeting, the board approved the UTHSC Strategic Plan for 2014-2018 with priorities that include:

• Educating outstanding graduates who meet the needs of the state and its communities.
• Growing the research portfolio of the institution focusing on targeted areas.
• Strengthening areas of clinical prominence while expanding outreach.
• Expanding and strengthening key community and statewide partnerships, among others.

Representatives from across our organization have committed to position UTHSC as a national leader in targeted areas of excellence across the institution’s missions, colleges and campuses by the end of 2018. We are now engaging faculty, staff, students and administrators in identifying and implementing a variety of initiatives designed to address the strategic priorities outlined in the plan.

In other action, the board approved renaming the UTHSC College of Allied Health Sciences as the College of Health Professions, which becomes effective July 1, and approved UTHSC’s acquisition of three neighboring properties in Memphis.

While we all take pride in updated facilities and shiny new buildings, we never lose sight of what truly matters – people like you, who together with our faculty, staff, students and partners, shape and fuel our organization in the service and care of those who need our training, compassion and help. Thank you for all you do to contribute to the consistent, forward movement of our organization. What we are empowered to achieve would not be possible without your generosity and long-term commitment.

Steve J. Schwab, MD
Chancellor
The UT Health Science Center
“In the U.S., our ability to detect amyloid deposits is limited. We’ve made amazing progress, but we need to move faster.”
Jonathan Wall, PhD

Dr. Jonathan Wall is exploring diagnostic and therapeutic agents for amyloid diseases. Dr. Wall has identified α5, a protein that binds to amyloid in the brain and other organs, making the amyloid visible through PET imaging and other techniques.

Looking for Trouble

It is well known that patients with Alzheimer’s and other disorders, such as type 2 diabetes, develop amyloid, a substance composed of sticky protein fibers and sugar molecules that builds up in the brain or other organs in the body. Doctors do not know whether this material causes the diseases, or whether the diseases lead to amyloid formation. However, in less common diseases, such as light chain amyloidosis, a rare but devastating illness caused by the aggregation of antibody-related light chain proteins in organs such as the heart, liver, kidneys and spleen, there is no doubt that amyloid presence in the organs is the cause of the disease. There is an urgent need to image or “see” the sticky substance in order to accurately diagnose and determine the stage of the disease and monitor the therapies used to treat patients. However, in the United States there are no clinically available methods to image amyloid in patients, except in those with Alzheimer’s disease. Many patients travel to Europe for a scan, where the technology is available.

Dr. Jonathan Wall Gets $1,580,808 Grant to Improve How We ‘See’ Amyloid

Work by UTHSC’s Jonathan Wall, PhD, and his team, is making it possible to see amyloid deposits, not just in the brain but other organs of the body. Dr. Wall, professor in the Graduate School of Medicine and director of the Preclinical and Diagnostic Molecular Imaging Laboratory in Knoxville, received a four-year grant totaling $1,580,808 from the National Institute of Diabetes and Digestive and Kidney Diseases, a subsidiary of the National Institutes of Health, to study “Preclinical Diagnostic Imaging of Amyloid.”

With the help of his team, including Shawn Kenney, PhD; Alan Stuckey, BA; OMNI; Tina Richey, MS; Sallie Macy, BA; Craig Wooliver, MTL; Emily Martin, BS; and Angela Williams, MS, Dr. Wall has developed a series of new imaging agents aimed at advancing the diagnosis and treatment of patients with amyloid-related diseases.

“In the U.S., our ability to detect amyloid deposits is limited,” Dr. Wall said. “We’ve made amazing progress, but we need to move faster.”

Jena J. Steinle, PhD, Named Director of Research for Hamilton Eye Institute

Jena J. Steinle, PhD, associate professor in the Departments of Ophthalmology, Anatomy and Neurobiology, and Pharmaceutical Sciences, has been appointed director of research at the UTHSC Hamilton Eye Institute (HEI). Since joining HEI in 2007, Dr. Steinle has been a prolific and successful research scientist. The focus of her research has been on diabetic retinopathy. She has received numerous federal and foundation grants for her work toward developing treatments to prevent, or even reverse, damage caused by diabetic retinopathy.

“Dr. Steinle has a remarkable enthusiasm,” said James C. Fleming, MD, FACS, chair of the Department of Ophthalmology at UTHSC. "She infuses our research group with energy for innovation, creating a vigorous environment for discovery at the Hamilton Eye Institute.”

In her new position, Dr. Steinle directs the Center for Vision Research (CVR), which was established in 1998 as a multidisciplinary research program in vision science. The CVR is charged with recognizing, supporting and expanding the efforts of individual vision researchers, and facilitating collaborations. The CVR has members, including scientists and clinicians, from roughly a dozen institutions in the community, and has received substantial grant funding to further vision research.

Dr. Steinle received her undergraduate degree in biology from the University of Bridgeport in Connecticut, her PhD in neurophysiology from the University of Kansas Medical Center, and did her postdoctoral work in vascular biology at the Texas A&M University System Health Science Center.

Dr. Steinle’s writing has appeared in more than 50 peer-reviewed publications. She has been awarded grants from the Department of Defense, the Juvenile Diabetes Research Foundation, the National Institutes of Health, the Oxnard Foundation, UT Research Foundation and other organizations.

She is a member of the Association for Research in Vision and Ophthalmology; the American Diabetes Association, and Research to Prevent Blindness. Dr. Steinle is a medical scientific reviewer for the National Institutes of Health (ad hoc) retina section and a member of the complications study section of the Juvenile Diabetes Research Foundation.

“I am excited to have this new opportunity to grow vision research, both on campus and throughout the community,” Dr. Steinle said.

Receives $1.38 Million Grant for Diabetic Medication Research

One of the most common side effects of diabetes is retinal damage. While we know that diabetic medications are effective in reducing insulin resistance in humans overall, we do not know their actions in the retina. The National Eye Institute, a subsidiary of the National Institutes of Health, has awarded $1,387,500 to Dr. Jena J. Steinle, who wants to learn more about how diabetic medication affects the retina. Dr. Steinle will use the award to fund her research study titled, “Mechanisms of TNFalpha-Induced Insulin Resistance in Retinal Cells.”

The study aims to investigate the potential pathways in the retina that are activated by commonly used type 2 diabetic medications. Previous work in her laboratory has shown that these drugs can work to decrease inflammatory pathways in the retinal blood vessels, which is protective to the retina. According to Dr. Steinle, "increased understanding of the actions in the retina of these commonly used drugs for type 2 diabetes may help us optimize their effectiveness against diabetic retinopathy, the ocular complication of both type 1 and type 2 diabetes.”
There were also other benefits, including weight loss and increased physical activity. National Institutes of Health, stopped the cardiovascular events. NIDDK continues to fund the study in an observational phase through 2015, on the health of participants. The clinical trial, which enrolled more than 5,000 people nationally, showed that weight loss and increased physical activity improved many cardiovascular risk factors for those with diabetes, including blood pressure, blood sugar and cholesterol. There were also other benefits, including reduced depression, better sleep and improved memory. However, the NIDDK, a division of the National Institutes of Health, stopped the clinical trial in late 2012 when evidence was divided into two groups. One group received intensive lifestyle intervention, including individual supervision, group sessions and diet strategies. The other group received more limited diabetes support and education. Since the intensive intervention aspect of the study is over, participants will come to UTHSC once a year for measurements, blood samples, an EKG, and tests for physical and mental function.

“We know the Look AHEAD intervention lowered blood sugar, we know it lowered cholesterol, we know it lowered blood pressure, and all of these changes may ultimately reduce heart disease.”

Karen C. Johnson, MD, MPH

During the clinical trial, participants were divided into two groups. One group received intensive lifestyle intervention, including individual supervision, group sessions and diet strategies. The other group received more limited diabetes support and education. Since the intensive intervention aspect of the study is over, participants will come to UTHSC once a year for measurements, blood samples, an EKG, and tests for physical and mental function.

“We’re assessing physical function and cognition in the observational phase, because we believe that weight loss and physical activity may improve your physical function and may improve your cognitive ability.” Dr. Johnson said. The UTHSC study includes slightly more than 300 people. “The data from the trial period does appear like the intervention group may have reduced total mortality, but it’s not statistically significant yet, so we’re continuing to follow the individuals for that as well.”

Dr. Johnson and co-investigator, Helmut Steinberg, MD, professor of endocrinology at UTHSC, hope to extend this observational phase through 2020. “We know the Look AHEAD intervention lowered blood sugar, we know it lowered cholesterol, we know it lowered blood pressure, and all of these changes may ultimately reduce heart disease,” Dr. Johnson said. “That’s why we think if we follow the Look AHEAD participants long enough, we may begin to see some legacy effects.”

“Among his many duties, Dr. VanderWalde will be responsible for aligning processes in our various UTHSC colleges related to pharmaceutical industry. He has published extensively in the field of cancer, as well as in research ethics. Dr. VanderWalde also joins the Department of Medicine, Division of Hematology/Oncology, and holds the positions of Director of Research with the West Clinic and Medical Director at ACORN Research LLC. “Among his many duties, Dr. VanderWalde will be responsible for aligning processes in our various UTHSC colleges related to pharmaceutical studies, recruiting staff to support strategic research initiatives, plus organizing and utilizing the infrastructure to support UTHSC clinical research,” said Dr. Pfeffer. “We anticipate he will raise awareness with external sponsors about the clinical trial capabilities at UTHSC, explore affiliation opportunities with our health care partners, and facilitate drug development and translation from UT scientists to pharmaceutical partners and biotech start-up companies.”

David Stern, MD, executive dean of the College of Medicine, and Lawrence Pfeffer, PhD, interim vice chancellor for Research, have announced Ari VanderWalde, MD, MPH, MBioeth, as the new associate vice chancellor of Research – Clinical Trials. Dr. VanderWalde assumed his new responsibilities in January, reporting to the UTHSC vice chancellor for Research and the chief of Hematology/Oncology. The position was created to support, augment and expand clinical trials at UTHSC, which has been engaged in federally funded clinical trials for more than 60 years. Clinical trials are scientific studies in which new treatments – drugs, diagnostic procedures, therapies or preventive measures – are tested in patients to determine if they are safe and effective. After obtaining an undergraduate degree at Harvard University, Dr. VanderWalde completed medical school at the University of Pennsylvania, where he also earned a master’s in Bioethics, while simultaneously obtaining a master’s of Public Health from Harvard School of Public Health. An internship and residency in internal medicine at UCLA followed. Next, he completed a fellowship in hematology/oncology from City of Hope Cancer Center/Harbor-UCLA in Los Angeles. Most recently, Dr. VanderWalde worked for the biopharmaceutical company Amgen, where he served as a Medical Director in Global Development as well as the U.S. Medical Lead for a pipeline product.

Ari VanderWalde, MD, MPH, MBioeth, as the new associate vice chancellor of Research – Clinical Trials

“We anticipate he will raise awareness with external sponsors about the clinical trial capabilities at UTHSC, explore affiliation opportunities with our health care partners, and facilitate drug development and translation from UT scientists to pharmaceutical partners and biotech start-up companies.”

Lawrence Pfeffer, PhD, interim vice chancellor for Research
Learning How to Fight a Killer
Searching for New Therapies for Triple-Negative Breast Cancer

Breast cancer is a leading cause of cancer-related deaths in women worldwide, and those diagnosed with triple-negative breast cancer (TNBC), an aggressive breast cancer subtype, have a lower survival rate than other breast cancer patients. The higher death rate is partially due to a lack of effective targeted therapy. Chemotherapy is the only available systemic treatment for TNBC. However, many TNBC patients rapidly develop resistance to the treatments. They also develop aggressive metastasis, which is responsible for the majority of the deaths caused by the cancer. Zhihui Wu, MD, PhD, is exploring other options that could lead to a breakthrough in treatment.

The American Cancer Society has awarded $720,000 to Dr. Zhihui Wu to continue his studies of treatment options for triple-negative breast cancer.

Role of Genotoxic NF-κB Activation in Breast Cancer Metastasis."

Previous studies conducted by Dr. Wu and his research team have indicated that the activation of a transcription factor or protein known as NF-κB by chemotherapeutic drugs may promote cancer therapy resistance and metastasis. His team is working to determine the factors responsible for that resistance. The research team is also exploring therapeutic regimens to effectively restore sensitivity of the breast cancer cells to chemotherapies and reduce secondary tumors.

“I am truly honored and grateful to receive this Research Scholar Award from the American Cancer Society,” said Dr. Wu. “This grant support allows us to further extend our exploration of novel molecular mechanisms involved in therapeutic resistance in breast cancer patients. We expect our study will translate into effective therapeutic regimens for treating breast cancer in the future.”

Dr. Nikki Zite Recommends Reproductive Rights Changes in New England Journal of Medicine

The New England Journal of Medicine published a perspectives piece in its Jan. 9 issue co-authored by Nikki Zite, MD, associate professor and residency program director in Obstetrics and Gynecology at the UT Graduate School of Medicine (UTGSM) in Knoxville. Dr. Zite’s topic was research on women’s access to sterilization based on current Medicaid policy and whether that policy is still relevant.

Current policy, established in the 1970s, prohibits persons younger than 21 years old from being sterilized as well as those who are medically incompetent or institutionalized. The focus of the perspectives piece was related to the mandatory 30-day waiting period from the date of written informed consent that is required. In addition, a signed copy of the consent form must be available or verified at the time of the procedure. The only exception is if the patient is undergoing emergency abdominal surgery or a premature delivery. Then the 30-day waiting period may be waived if there is 72 hours between signed consent and the procedure.

The Medicaid policy was originally written at a reading level too difficult for most patients to understand. Beyond concerns about the consent form, the waiting period and the need for the completed form to be transferred to the delivery unit pose logistic barriers for women who wish to undergo tubal ligation immediately after giving birth.

The authors of the perspectives piece recommend that the Medicaid policy and consent forms concerning sterilization should be thoughtfully modified. James Neutens, PhD, dean of the UTGSM, noted, “This is a great contribution to the diversity and inclusion efforts being made in health care today.”

UTHSC College of Medicine Reaccredited

The Liaison Committee on Medical Education (LCME) has reaccredited the University of Tennessee College of Medicine for the maximum eight-year term. The college received the official letter detailing this decision on March 11, 2014.

The LCME accredits all allopathic medical schools in the United States and Canada. Accreditation signifies that national standards for structure, function and performance are met by a medical school’s education program. Only LCME-accredited institutions may receive federal grants for medical education and participate in federal loan programs. U.S. medical students must be enrolled in, or graduated from, an LCME-accredited program before they can take national board exams (U.S. Medical Licensing Exam) or enter board exams (U.S. Medical Licensing Exam) or enter LCME-accredited programs.

The survey team’s extensive report was reviewed by the LCME at its February meeting.

Of the approximately 135 standards, the College of Medicine was only judged to be noncompliant with five standards, with four others noted as in compliance, but in need of monitoring. This is slightly better than the average number of citations schools have received in the past three years. The school must submit an update on areas of citation by April 2015, but there will not be a second site visit — something many schools are experiencing two years after the initial visit.

The partnership between UT and Saint Thomas Health creates expanded capabilities to meet patient needs. For example, the Family Medicine Residency Program allows the clinic to have more medical providers on staff. With four full-time faculty, 24 residents, nurse practitioners, physician assistants, and 18 exam rooms, the clinic can provide more care to more patients.

“The newly accredited residency program, we can move forward with our vision to provide better health care to communities in Rutherford County,” said Christopher Dunlap, MD, director of the Family Medicine Residency Program at the Saint Louise Clinic.

The partnership between UT and Saint Thomas Health created expanded opportunities in federal loan programs. U.S. medical education and participating schools may receive federal grants for scholarships, assistantships, and stipends for students who are enrolled in, or graduated from, LCME-accredited programs.

Saint Thomas Health and UT Residency Program Accredited

Saint Thomas Health’s Saint Louise Clinic in Murfreesboro and the University of Tennessee College of Medicine recently announced their partnership to bring a Family Medicine Residency program to Middle Tennessee. The program has now been accredited by the Accreditation Council for Graduate Medical Education and will begin training physicians in 2015.

To ensure the proper space for physician training and patient care, the Saint Louise Clinic relocated to a larger facility. The clinic, now called the University of Tennessee Family Medicine Center and Saint Louise Clinic, allows Saint Thomas Health to better serve the Rutherford population, as well as host the UT Family Medicine Program.

The American Cancer Society has awarded $720,000 to Dr. Zhihui Wu to continue his studies of treatment options for triple-negative breast cancer.

The partnership between UT and Saint Thomas Health creates expanded opportunities to better serve the Rutherford population, as well as host the UT Family Medicine Program.

The LCME-accredited program before they can take national board exams (U.S. Medical Licensing Exam) or enter LCME-accredited programs.

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Assistant Professor Ying Kong Receives Grant

Ying Kong, PhD, an assistant professor in the Department of Microbiology, Immunology and Biochemistry at the UTHSC College of Medicine, received a grant totaling $187,343 from the National Heart, Lung, and Blood Institute, a subsidiary of the National Institutes of Health, to explore the pathogenesis or the origin and development of extrapulmonary TB. Known as an R21 grant, the award encourages new exploratory and developmental research projects by providing support for the early stages of project development.

Dr. Kong’s study is titled “Non-Invasive Fluorescent Imaging Mycobacterium Tuberculosis Extrapulmonary Infection.”

Although most M. tuberculosis infections, known as pulmonary TB, are in the lungs, five to 10 percent of TB patients can develop the disease in organs other than their lungs, or extrapulmonary TB. Dr. Kong is exploring the pathogenesis or the origin and development of the latter. Extrapulmonary sites of infection can involve almost any organ, such as lymph nodes, bones and joints, eyes, intestines, lymphs, or the urinary and reproductive systems, skin and stomach. This condition is difficult to diagnose because the clinical presentation is physical, tissue samples for the confirmation of diagnosis can sometimes be difficult to procure, and the conventional diagnostic methods have a poor yield, often resulting in delayed diagnosis. Better understanding of the disease’s pathogenesis is urgently required to control it.

“With the grant, we will evaluate two imaging compounds for in vivo imaging of M. tuberculosis infection in rodents,” said Dr. Kong. “The compound with higher sensitivity for detecting bacteria will be selected to study the aspects of bacterial invasion and dissemination from the initial pulmonary infection site to other organs in rodents. The success of this study will help to unravel the intricacies of extrapulmonary TB and to screen for anti-TB therapies and vaccines in live animals.”

With his new funding, Dr. Ying Kong will delve deeper into his studies of tuberculosis, primarily focusing on host-pathogen interactions.

Bernd Meibohm’s Findings Published in Nature Medicine Journal

Bernd Meibohm, PhD, FCP, associate dean for Research and Graduate Programs and professor in the Department of Pharmaceutical Sciences, had the findings of his latest research published in the February issue of Nature Medicine, a leading journal for the biomedical sciences.

The article, titled “Spectraminides: a new class of semisynthetic antituberculosis agents that overcome native drug efflux,” discussed significant breakthroughs in tuberculosis research.

Dr. Meibohm’s research is significant not only because of the rapid rise of multi-drug resistant tuberculosis (1.4 million die of the disease every year), but also because the pharmaceutical industry has largely abandoned the development of new antibiotics, leaving drug discovery in this area to academia and nonprofit organizations.

The published research is a collaborative effort of Dr. Meibohm’s research team and investigators Richard Lee, PhD, at St. Jude Children’s Research Hospital, Anne Lamiachi, PhD, at Colorado State University, and Erik Böttger, MD, at the University of Zurich.

The results of collaborative research efforts by Dr. Bernd Meibohm (right), his research team, Dora Madhura, PhD, (center), and Ashit Trivedi, MS, as well as investigators at other institutions, were published in the February issue of Nature Medicine, a leading biomedical sciences journal.

Dr. Bernd Meibohm’s findings on tuberculosis are discussed in the Nature Medicine Journal.

Dr. Kennard Brown Honored for Promoting Diversity in Health Care Education

Kennard Brown, JD, MPA, PhD, FACHE, executive vice chancellor and chief operating officer of the UTHSC, has received the Healthcare Education Award from the Nashville-based Council on Workforce Innovation.

The statewide award, presented at the recent 2014 Healthcare Diversity Forum in Nashville, recognized Dr. Brown’s efforts in promoting diversity in health care education. The regional forum, which drew administrators, clinicians, educators, human resource specialists and business leaders, discussed the financial value of diversity in the health care workforce and discussed resources for advancing quality health care delivery for underrepresented populations.

The Council on Workforce Innovation is part of the National Organization for Workforce Diversity, a private, public and nonprofit coalition to promote workforce diversity initiatives.

Dr. Brown has been with UTHSC for 15 years. He started in the Office of General Counsel, and has directed several UTHSC offices, including Equity and Diversity, Employee Relations and the Center on Health Disparities.

On Jan. 28, (from left) Larry E. Kun, MD, Clinical Director and EVP at St. Jude Children's Research Hospital; Governor Bill Haslam; Jon McCullers, MD, chair of the Department of Pediatrics for UTHSC; and Maureen O’Connor, director of Policy at Le Bonheur Children’s Hospital, met to discuss how funding commitments from the legislature in 2013 have helped to move pediatric research forward.

In 2013, the legislature committed $15 million over five years from the state of Tennessee to support pediatric research at UTHSC, which matches the same financial commitment by St. Jude to support the UT Department of Pediatrics. The funds are helping to recruit physician-scientists to and retain pediatric researchers at the state’s only public, academic health science center — UTHSC.

In addition to talking with Gov. Haslam, Dr. McCullers, Dr. Kun and O’Connor met with the governor’s Chief of Staff Mark Cate, Commissioner of Finance Larry Martin, and had lunch with Lt. Governor Ron Ramsey. They later spent time with House Speaker Beth Harwell, Senate Majority Leader Mark Norris, Tennessee Department of Health Commissioner John McGehee, Senate Finance Chairman Randy McNally, Senate Health Chairman Rusty Crowe and House Health Chairman Bob Ramsey. Dr. McCullers also had the opportunity to update the House Finance, Ways and Means Committee on how the state funds are being used.
The work of Maria Gomes-Solecki, DVM, and US Biologic was recognized in December by U.S. Representative Steve Cohen. Dr. Gomes-Solecki is an assistant professor in the Department of Microbiology, Immunology and Biochemistry at UTHSC. She co-founded US Biologic in 2012 with four Memphis-based entrepreneurs.

A n online auction by UTHSC on March 26, of more than 300 works by internationally known Memphis artist Paul Penczner grossed more than $70,000. The sale, which opened for bidding March 4, and finished with a rapid, rolling auction, drew 158 bidders. Works auctioned are part of a collection of 400 pieces donated to the UTHSC College of Medicine by the artist’s widow, Jolanda Penczner, after his death in 2010 to establish an endowment in his name in the Department of Physiology. Proceeds, minus expenses, will go for cardiovascular research at UTHSC.

"The auction was a huge success," said Zach Pretzer, director of development for the UTHSC College of Medicine. "I congratulate US Biologic and Dr. Gomes-Solecki on their achievement and I look forward to more developments from some of the nation’s most advanced researchers who are based in my district."


Dr. Alvin Crawford Brings Inspiration Home to UTHSC

Dr. Alvin Crawford, MD, FACS, the first African-American student to be admitted to and graduate from the UTHSC College of Medicine, returned to his alma mater as guest speaker at the "Reflect & Remember" lunch session in April. Dr. Crawford took the opportunity to remember Dr. Martin Luther King, Jr. and talk to students about his legacy.

Dr. Crawford, who graduated from UTHSC in 1964, is professor emeritus of Pediatrics and Orthopaedic Surgery at the University of Cincinnati College of Medicine. He is also a graduate of Melrose High School, and took time to visit with the students there and at Frayser High to stress the importance of achieving their dreams.

You can find out more about Dr. Crawford in a video from the Cincinnati USA Regional Chamber: http://bit.ly/1iCbpfF

You can find out more about Dr. Crawford in a video from the Cincinnati USA Regional Chamber: http://bit.ly/1iCbpfF

‘Reflect & Remember’

Mr. Speaker, today I would like to recognize the work of Memphis-based US Biologic in their work to halt the spread of Lyme disease. US Biologic was recently awarded a grant of $1 million from the Global Food and Health Innovation Challenge to expand their research on this important topic, and I am proud to honor the hard work of their dedicated research team, especially Maria Gomes-Solecki.

“I believe that our nation’s true department of defense is made up of doctors and researchers who work hard to find cures and prevention methods for the diseases that threaten the lives and livelihoods of Americans every day. The research of people like Dr. Gomes-Solecki is integral in our mission to make the United States a safer place for the grandchildren of our generation, and I encourage more federal investment in the initiatives of the National Institutes of Health, as well as private funding like that provided through the Global Food and Health Innovation Challenge.

“I congratulate US Biologic and Dr. Gomes-Solecki on their achievement and I look forward to more developments from some of the nation’s most advanced researchers who are based in my district.”


Auction of Works by Artist Paul Penczner Grosses More Than $70,000

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“The auction was a huge success,” said Zach Pretzer, director of development for the UTHSC College of Medicine. “It was a wonderful conclusion to what has been a tremendous gift to the UT College of Medicine by Paul and Jolanda Penczner.”

News

(Left to right) Porshia Mahoro from the College of Nursing, Cosby Arnold from the College of Medicine and Lauren Bode from the College of Pharmacy joined President Joe DiPietro, along with students and staff from all UT campuses and institutes to represent the university at the annual UT Day on the Hill held Feb. 18 on the Legislative Plaza in Nashville. Participants staffed informational displays and met with legislators to spread the word about the UT’s statewide impact on research, education and health care.

UT Day on the Hill
Matthew Ballo, MD: Chair of New Department of Radiation Oncology

Dr. David Stern, MD, executive dean of the College of Medicine, has named Matthew T. Ballo, MD, chair of the newly formed Department of Radiation Oncology. Dr. Ballo, who began his duties at UTHSC in January, has been a professor in the Department of Radiation Oncology at the University of Texas MD Anderson Cancer Center in Houston. He has also served as an adjunct assistant professor of radiation therapy in the Department of Radiation Oncology at the University of Texas MD Anderson Cancer Center School of Health Sciences in Houston.

“The College of Medicine has formed a new Department of Radiation Oncology, and in collaboration under the joint cancer initiative with Methodist Le Bonheur Healthcare, UT and the West Cancer Center, we have recruited Dr. Matt Ballo as the founding chair and chief of Radiation Oncology in the cancer center,” Dr. Stern said. “Dr. Ballo is recognized for his expertise in head and neck radiation oncology, as well as his vision for designing a radiation oncology enterprise of tomorrow. In addition to developing clinical specialization within radiation oncology, he will promote training and research programs in medical physics and radiation oncology, and will be an integral member of the leadership team of the West Cancer Center.”

David Stern, MD, executive dean of the College of Medicine

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Dr. Ballo received his BA in biochemistry in 1991 from Oberlin College in Oberlin, Ohio, and his MD degree from Case Western Reserve University School of Medicine in Cleveland in 1995. He did his clinical internship at Mt. Sinai Medical Center in Cleveland, and his clinical residency at the University of Texas MD Anderson Cancer Center in Houston. Having published 66 peer-reviewed, original research articles, his work also includes about three dozen invited articles, editorials, abstracts and book chapters. He is a member of the editorial review board and guest editor of Breast Diseases: A Yearbook Quarterly. He is a journal reviewer for publications, including the International Journal of Radiation Oncology, Biology, Physics; International Journal of Cancer: Radiation Therapy & Oncology; The Lancet Oncology; and Head & Neck.

Dr. Ballo is a member of numerous professional organizations, including the American Society for Therapeutic Radiology and Oncology; the American College of Radiology and the American Society of Clinical Oncology.

Professor Robert Williams Receives $2.5 Million for Genetics Research

Robert W. Williams, PhD, professor in the Departments of Anatomy and Neurobiology, and Pediatrics and director of the UT Center for Integrative and Translational Genomics, is working to make significant headway on the genetics of diet and aging, thanks to a new grant.

The award, from the National Institute on Aging, a subsidiary of the National Institutes of Health (NIH), totals $2,545,349. It will fund his five-year study entitled, "Translational Systems Genetics of Mitochondria, Metabolism, and Aging."

Dr. Williams and his research team, which includes Karen C. Johnson, MD, MPH, and Khyobeni Mozhui, PhD, both from the UTHSC Department of Preventive Medicine, as well as one of the world’s pre-eminent experts on metabolism, Johan Auwerx, MD, PhD, professor at the Swiss Federal Institute of Technology in Lausanne, are studying the impact of high- and low-fat diets on aging and the role of genetic differences in mitochondrial function as age progresses.

The goal of Dr. Kang and his research team is to improve treatment options. His team includes Linda Myers, MD, professor in the Department of Pediatrics, Arnold Postlethwaite, MD, chief in the Division of Connective Tissue Diseases and Goodman Chair of Rheumatology, and Goodman Chair of Rheumatoid Arthritis, "We hope to develop an effective but safer treatment involving a combination of a synthetic peptide originally developed at UTHSC, as well as a unique form of vitamin D that does not cause elevation of blood calcium levels to toxic range," explained Dr. Kang.

The results of this research may lead to a more effective therapy without the serious side effects that are associated with the currently available treatments.

Professor Andrew Kang Receives $1.65 Million Grant for Rheumatoid Arthritis Research

Andrew Kang, MD, professor in the Division of Connective Tissue Diseases in the College of Medicine, has received a grant totaling $1,650,000 from the National Institute of Arthritis and Musculoskeletal and Skin Diseases, an Institute of the National Institutes of Health. The award will be used to support a project titled “20 (OH) Vit D3, T Cells, and Arthritis,” and will be distributed over a five-year period.

Rheumatoid arthritis is an autoimmune disease of unknown cause that affects approximately one percent of the population worldwide. While there are several treatments available, they are helpful for only a portion of those affected, and are associated with significant side effects.

The goal of Dr. Kang and his research team is to improve treatment options. His team includes Linda Myers, MD, professor in the Department of Pediatrics, Arnold Postlethwaite, MD, chief in the Division of Connective Tissue Diseases and Goodman Chair of Excellence in the Department of Medicine, and Andrzej Slominski, MD, PhD, professor in the Department of Pathology at UTHSC.

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The results of this research may lead to a more effective therapy without the serious side effects that are associated with the currently available treatments.
Major construction projects are changing the face of the 103-year-old campus of UTHSC. A $49 million Translational Science Research Building is set for completion in 2015, obsolete buildings are coming down, and multiple construction and renovation projects worth more than $175 million are in the planning stages or under way. The construction reflects efforts by the UTHSC administration to raise the profile of the university and draw top-tier students, faculty and researchers to Memphis. It also illustrates the support and willingness of state officials to help finance improvements to enhance Tennessee’s only public, statewide, academic health system. “It’s about the infrastructure, if you want to attract the best and brightest,” said Kennard Brown, JD, MPA, PhD, FACHE, executive vice chancellor and chief operations officer for UTHSC. “We had to move to that state-of-the-art kind of space.”

Commencing the campus facelift, bulldozers began taking down vacant buildings on campus in March, including the Beale Building, a former city bus barn built in 1925. The Beale Building, a former city bus barn built in 1925 and given to the university decades ago, has been leveled for immediate use as parking space, and later as a possible public-private cutting-edge simulation settings.

More than $68 million has been earmarked for the renovation of buildings in the Historic Quadrangle at the center of campus. The Mooney Memorial Library, focal point of the quadrangle, will be converted to administrative offices, reception areas and meeting space. The Nash Research Building, and the annex that was added in the 1980s, will be renovated for state-of-the-art research space. A third building bordering the quadrangle, the Crowe Building, will be upgraded to house the College of Nursing. The projects, which are in the planning stages and expected to take 18 months to three years to complete, are aimed at “Bringing people back to the quadrangle,” Dr. Brown said.

The Feurt Pharmacy Research Building opened in 2007. The first new building on campus in 17 years, it cost $25.2 million, and houses research laboratories that investigate experimental therapeutics, genetics, and mechanisms related to adult cancer. Since then, the pace of construction at UTHSC has picked up dramatically. In 2011, a new 183,000-square-foot, $67 million building opened to house the College of Pharmacy, which has been ranked in the top 20 pharmacy schools in the nation by U.S. News and World Report for more than a decade. The 135,000-square-foot Translational Science Research Building is going up adjacent to the Cancer Research Building. Nearly a mirror image of the cancer building, the four-story Translational Science Research Building will house investigators from all colleges and departments doing “bench-to-bedside” work, or research as it applies to clinical settings. More than $68 million has been earmarked for the renovation of buildings in the Historic Quadrangle at the center of campus. The Mooney Memorial Library, focal point of the quadrangle, will be converted to administrative offices, reception areas and meeting space. The Nash Research Building, and the annex that was added in the 1980s, will be renovated for state-of-the-art research space. A third building bordering the quadrangle, the Crowe Building, will be upgraded to house the College of Nursing. The projects, which are in the planning stages and expected to take 18 months to three years to complete, are aimed at “Bringing people back to the quadrangle,” Dr. Brown said.

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Two empty housing facilities, the Goodman Family Residence Hall and Randolph Hall, have been torn down or are scheduled to be torn down. Professional students no longer want to live in dormitory-style housing, Dr. Brown noted. The Beale Building, a former city bus barn built in 1925 and given to the university decades ago, has been leveled for immediate use as parking space, and later as a possible public-private residential venture that could attract students.

Renovations of existing buildings include: finishing the fourth floor of the Cancer Research Building for additional lab space, and a Women’s and Infants’ Pavilion to provide top-quality care and facilities for mothers and babies to help combat the area’s high infant mortality rate; acquiring space and erecting a new building to house the College of Medicine; and adding a second building for the College of Dentistry. Reshaping the UTHSC campus is an important step for the future, Dr. Brown said. “It will help us maintain the competitive edge.”

Professor Jonathan Jaggar Receives Grant Supplement for Blood Pressure Research

Jonathan Jaggar, PhD, the Maury W. Bronstein Professor in the Department of Physiology at the UTHSC College of Medicine, has received a grant totaling $95,931 from the National Heart, Lung, and Blood Institute of the National Institutes of Health. The award, which will be distributed over a three-year period, is a supplement to his existing study titled, “Arterial Smooth Muscle Channels.” The supplement will allow Dr. Jaggar and his research team to test the hypothesis that proteins, called anoctamin 1, located within the cell membrane of arterial smooth muscle cells respond to an increase in blood pressure. If research is successful, it may eventually lead to the development of novel therapies and drugs to treat hypertension and brain disorders that result from hypertension.
Central Green to Grow On

On Friday, May 9, leaders from the Memphis business, bioscience, health care and legislative communities gathered for the Dedication of the Central Green at the UT-Baptist Research Park, which is adjacent to the UTHSC main campus. The event celebrated completion of the fourth phase of development of the research park, located in the heart of the Memphis Medical Center. The program included brief remarks from J.R. “Pitt” Hyde, III, chairman of the board, Memphis Bioworks Foundation, UTHSC Chancellor Steve J. Schwab, MD, State Senate Majority Leader Mark Norris, UTHSC Chancellor Steve Schwab, J. R. “Pitt” Hyde, Stephen Reynolds, president and CEO of Baptist Memorial Health Care, and Jason Little, executive vice president and COO of BMHC when this photo was taken, and Steve Biars, president and executive director, Memphis Bioworks Foundation.

Roughly 50 members of the Memphis bioscience, business and health care communities, plus several state legislators and government agency representatives joined the Dedication of the Central Green at the UT-Baptist Research Park. Unveiling the plaque that commemorates Baptist’s $100 million gift of land and buildings from J.R. “Pitt” Hyde, III, chairman of the board, Memphis Bioworks Foundation, UTHSC Chancellor Steve J. Schwab, MD, State Senate Majority Leader Mark Norris, UTHSC Chancellor Steve Schwab, J. R. “Pitt” Hyde, Stephen Reynolds, president and CEO of Baptist Memorial Health Care (BMHC), who was set to retire a month after this event, Baptist’s incoming President and CEO Jason Little, who was executive vice president and COO of BMHC when this photo was taken, and Steve Biars, president and executive director, Memphis Bioworks Foundation.

by Peggy Reisser Winburne

Loosening the Stranglehold of the Stroke Belt

In the Southeast, we are encircled by so many belts, it’s a wonder we can breathe. The Stroke Belt, the Diabetes Belt, the Cancer Belt and others are squeezing the life right out of us. The belts we wear, just by virtue of where we live, make us more likely to have a stroke, suffer from type 2 diabetes or die from cancer.

But the College of Medicine at the University of Tennessee Health Science Center is working to loosen them all.

The effort to un buckle the Stroke Belt, which surrounds 11 states including Tennessee, Arkansas and Mississippi, got a major boost when Andrei Alexandrov, MD, joined UTHSC in March as chair of the Department of Medicine, who is researching in the battle against stroke in the Mid-South.

By promoting teamwork between local neurologists and neurosurgeons; and Guy Reed, MD, professor and chair of Neurosurgery, who is working to improve clinical care by promoting teamwork between local neurologists and neurosurgeons; and

Andrei Alexandrov, MD, joined UTHSC in March as chair of the Department of Neurology and Semmes-Murphy Professor. Dr. Alexandrov was recruited to Memphis to bolster decades of work done to combat stroke in the Mid-South.

He builds on the efforts of physicians including William Pulsinelli, MD, PhD, former chair of Neurology, who for 20 years grew the research, education and clinical aspects of the department; Rick Boop, MD, professor and chair of Neurosurgery, who is working to improve clinical care by promoting teamwork between local neurologists and neurosurgeons; and Guy Reed, MD, professor and chair of the Department of Medicine, who is researching better stroke treatments for the future.

Each brings his own skills, focus and point of view, but they stand together on the front lines in the battle against stroke in the Mid-South.
The Plan

Taking Stroke Care to a Whole New Level

A native of Moscow, Dr. Alexandrov, has set his goals, and is attacking them with the resolve of a general and the warmth of a healer. He aims to set up a citywide stroke service, improve speed and up community access to vascular or stroke neurologists, raise community awareness of the symptoms and signs of stroke, and recruit and train doctors who will make sure the Stroke Belt doesn’t constrict us in the future.

A big job, but he is ready. “It is exciting what we can build here,” he says.

The Man

Dr. Alexandrov says he got “a Russian welcome” on his first day on campus, March 3. It snowed.

Some might say fitting weather for the neurologist, who received his MD degree in 1989 from First Moscow Medical Institute in Russia, and specialized in clinical neurology at the Institute of Neurology, Russian Academy of Medical Sciences in Moscow. He completed his fellowship training in stroke and cerebrovascular ultrasound at the University of Toronto and the University of Texas.

Dr. Alexandrov, 47, came to UTHSC from the University of Alabama at Birmingham (UAB), where he was a professor in the Department of Neurology and director of the Division of Cerebrovascular Diseases. He also served as director of the Comprehensive Stroke Center and the Neurovascular Ultrasound Laboratory, and was medical director of the Stroke Service and the Intermediate Care Stroke Unit at the University of Alabama Hospital in Birmingham.

He says he chose Birmingham because it is in the middle of the Stroke Belt. His colleague, George Howard, PhD, a professor of Epidemiology and Biostatistics at UAB School of Public Health, has spent years there on the National Institutes of Health-funded REGARDS study (Reasons for Geographic and Racial Differences in Stroke) trying to uncover factors for the strong predisposition to stroke that runs in families in this area. Dr. Alexandrov worked on several projects with Dr. Howard to analyze data from REGARDS.

The same geographical area as the Bible Belt, the Stroke Belt surrounds a population that smokes more, eats more fried food, and suffers more frequently from high blood pressure, all of which make residents twice as likely to have a stroke.

In Birmingham, Dr. Alexandrov set up a stroke response system that made UAB Hospital and its Stroke Service available to many emergency rooms in Greater Alabama and surrounding states. This system changed the way acute strokes were treated in Alabama and produced some of the highest treatment rates in the nation. But calls from David Stern, MD, executive dean of the UTHSC College of Medicine, and Tulio Bertorini, MD, then-interim chair of Neurology, presented a bigger challenge and more potential in Memphis.

“The attraction here in Memphis is that there are two prominent hospital systems, Methodist and Baptist, and both systems are actually recognizing stroke as a major burden and are willing to consider working with the university physicians to develop a much more efficient system, which would bring specialists to their campuses,” Dr. Alexandrov says. “My long-term goal is to build a citywide stroke program that would cover not only Methodist and participating institutions, but eventually, Baptist and their participating institutions. University stroke physicians already cover the Regional Medical Center, and we are open to collaboration with everyone who cares for stroke victims in the tri-state area. So that means anywhere the patients come to the closest emergency room, they will end up being seen by a stroke neurologist.”

Discussions are under way to develop such a wide-ranging system.

“It’s an exciting opportunity here to build a really, really cutting-edge citywide stroke program, which is almost impossible in other places in the United States because of competition between institutions.”

The Mantra

“Time is brain,” Dr. Alexandrov says. That’s the reason he feels so strongly about expanding and reviving up the stroke response system to reduce time to treatment, particularly for patients with acute stroke.

“The longer a blood clot sits there, the more brain cells die,” he says. “If you’re having symptoms of stroke, you only have one hour to decide to do something, and that hour will largely determine how you are going to spend the rest of your life.”

Even a TIA (Transient Ischemic Attack) or mini- or warning stroke needs immediate attention. “A person who has this, a weakness in one side of the face, slurred speech, inability to talk, a weak arm or leg – even briefly – these people are at high risk of developing a stroke within the first two days,” he says. Currently, such patients may not seek care if symptoms pass, or may have to wait a week or two to be seen by a physician because of the limited number of stroke neurologists locally.

“We want these patients to come to the emergency room, whatever emergency room, and they will be seen by a stroke specialist, and that’s what we will be opening here, a kind of fast-track access for these patients to the specialists.”

Methodist University Hospital, a core teaching hospital for UTHSC, now takes the majority of stroke patients from the community in its comprehensive Stroke Center and Neurovascular Center. Dr. Alexandrov serves as medical director of the center and a member of the stroke response team. A fast-access walk-in clinic for TIA patients will be located there, too.

Continued

From Moscow to Memphis

You might say that caring for the brain is a family affair for UTHSC’s new chair of the Department of Neurology.

“Both of my parents are neurologists,” says Andrei Alexandrov, MD. “But they never influenced me.” His wife, Anne Alexandrov, also is a professor in the College of Nursing at UTHSC and a stroke specialist.

Dr. Alexandrov says he initially wanted to be a physicist. That is, until the math skills of a high school classmate, who is now at Princeton University, intimidated him.

“I thought, ‘I like science, so what is the more manageable thing for me,’ and it turns out medicine was equally exciting, but did not require the high math skills,” he says.

Neurology, however, was not in the picture early on. “In medical school, I wanted to be anybody else but a neurologist,” he says. “My teacher during my rotation of neurology just completely won me over.”
“Time is brain.”

Andrei V. Alexandrov, MD

The Methods
Increasing the number of stroke neurologists and access to them across the city will mean that more stroke victims will have a better chance to receive the only effective therapy approved by the FDA to reverse neurological damage from stroke – a clot-busting medicine called tissue plasminogen activator (tPA). At least 85 percent of strokes are caused by clots within a blood vessel that supplies oxygen to the brain. This medicine must be given by intravenous injection within four and a half hours after onset of stroke symptoms to dissolve such clots. The earlier it is given, the better the chances of limiting lasting damage to the brain.

Most emergency rooms now carry tPA. But less than half of all patients arrive at the hospital early enough to benefit from any treatment, and less than 5 percent get tPA in time. That’s because of the time it takes to transport patients and evaluate them to determine if the drug is an appropriate treatment.

At Methodist University Hospital, where the high-volume stroke team works closely with the Memphis Fire Department and Emergency Medical Services, the average time to treatment is at more than two hours from symptom onset. This is not unusual in Memphis or in the nation, Dr. Alexandrov says, but there is room for improvement.

“It is clear to us that acute stroke management in the U.S. needs to be restructured to allow rapid screening and treatment of stroke patients with tPA therapy,” he says. “Based on past data, we estimate if we can treat a patient within one hour of symptom onset, the patient would have over a four times greater likelihood of complete recovery, compared to later treatment.”

It’s a hypothesis he intends to test in Memphis. To do that, he hopes to:

• Bolster the stroke team by recruiting more vascular stroke specialists to Memphis and “growing” them through fellowship and residency programs.
• Establish a telemedicine system linking the flagship Stroke Centers with emergency rooms in the region to eliminate travel time, expand diagnostic access and speed treatment.
• Equip a specialized ambulance for pre-hospital stroke treatment. This mobile unit would have all the diagnostic tools and stroke medicine competence needed for therapeutic decisions at the site. A stroke specialist could go to the patient and be able to assess, diagnose and begin treatment, instead of waiting until the patient arrives at the hospital.
• Better educate the public about the signs, symptoms and treatment of strokes and TIsAs.
• Encourage development of all aspects of academic neurology and stroke research.

Dr. Alexandrov is mindful of the good work that has been done in Memphis and the systems already in place here to combat stroke. “We just need to take it to the next level.”

Next ... A Firm Foundation
A Firm Foundation
Twenty Years of Progress in Stroke Research, Education and Care

William Pulsinelli, MD, PhD, was drawn to Memphis and the University of Tennessee Health Science Center in the early 1990s because he felt he could make a difference here. "The fact that this part of the country had an incidence of stroke higher than virtually anywhere else. That is one of the reasons I decided to leave New York and come to Memphis," says Dr. Pulsinelli. He left Cornell Medical College/New York Hospital in 1992 to become chair of the Department of Neurology and Semmes–Murphey Professor at UTHSC. "The opportunity to study stroke here was extraordinary."

In the 20 years he held that position, Pulsinelli made his mark, successfully working to improve stroke medicine in Memphis and modernizing the way the UTHSC College of Medicine trains those who practice it. He stepped down as chair in 2012, but continues to lend his expertise to ongoing efforts to grow and strengthen academic and clinical aspects of neurology and stroke care in the region. "The plan was when I turned 70, which I did almost two years ago, I would step down as chair, and so I did, and that I would retire shortly thereafter, which I am slowly doing," Pulsinelli says. "I am delighted that Dr. Andrei Alexandrov has joined the program, and I’m hoping he has success in further developing stroke care here.”

Dr. Pulsinelli came to Memphis from one of the top neurology programs in the country: He left Cornell/New York Hospital in the third year of a five-year, $7 million grant from the National Institute of Neurological Disorders and Stroke for basic and clinical stroke research, and set out to bolster the academic aspects of the department at UTHSC through recruiting faculty and boosting research. "We went from having virtually no research grants when I arrived, to when I finished up two years ago, $3 million roughly is in the bank," Pulsinelli says. As early as 1997, he worked closely with the administration at Baptist to develop standardized orders for the use of tissue plasminogen activator, an FDA-approved medication that if given within three to four hours of a stroke may improve chances of recovery. "The medication only became available in 1996, so very quickly, within a year or so, we had things set up to be providing it to the population of Memphis," he says.

The efforts paid off when Methodist University Hospital, a core teaching hospital of UTHSC, was certified as a Stroke Center by The Joint Commission. "Stroke care here now is probably cutting edge," he says. "When friends of mine ask me ‘where do I go if I have a stroke? I tell them to go to Methodist.”

Improving Medical Education
But cutting-edge stroke care is only as good as the doctors who administer it, and they are only as good as the training they receive. Dr. Pulsinelli has led the drive to improve that training, too. Chair of the basic science curriculum revision committee, Dr. Pulsinelli instituted a “flipped classroom” concept in neurology training. "As we became involved with curriculum revision and became aware of some new teaching strategies, I didn’t wait for a decision to come down from the top to make a change in the clinical neuroscience course," he says. In a flipped classroom, instead of the traditional teaching model with a professor lecturing, prerecorded lectures are available online for students to view. Class time is spent with the professor guiding students in discussions and problem-solving exercises in various case scenarios. "The students seem to enjoy it, and the faculty members love it, once they’ve done it," he says. "It’s a tremendous amount of work to get it going, but it probably is a more effective way of teaching.”

Dr. Pulsinelli believes the citizens of Memphis will benefit from the emphasis David Stern, MD, executive dean of the College of Medicine, is placing on combating stroke in partnership with area hospitals. "They’re making it possible to provide the resources, I hope, for Dr. Alexandrov to be successful in continuing to develop stroke care,” he says.

Next ... A United Front

(Above) Human brain model used to teach students about the blood supply to the brain
“With that program up and running, we’re now not just taking care of people at one hospital, but taking care of people in the whole city.”

Rick Boop, MD

A major step in loosening the bind of the Stroke Belt involves tightening the bonds between the Departments of Neurology and Neurosurgery at UTHSC. Rick Boop, MD, professor and chair of Neurosurgery at UTHSC, is front and center in helping to accomplish this. A pediatric neurosurgeon, Boop doesn’t see a lot of strokes in his clinical practice at Le Bonheur Children’s Hospital, but as a department chair, he oversees program development for neurosurgery in the city and works with physicians who do see them.

Dr. Boop was a member of the search committee that brought Dr. Andrei Alexandrov to Memphis to head the Department of Neurology and helm the efforts to move the already strong local stroke treatment program into national prominence.

“I think the citizens of Memphis are enjoying better care for hemorrhages in the brain, aneurysms and strokes than they’ve ever had before,” Dr. Boop says. “We’re hoping the level of neurocritical care will continue to get better and better.”

Our spot at the buckle of the Stroke Belt means our stroke program is one of the largest in the nation. “And with the new Neurology chair search under way, we thought this program is so much at the forefront in the nation, it was important to bring someone in as a chairman who could help continue to build that program and take it one step further,” Dr. Boop says. “That’s how Dr. Alexandrov became a top choice.”

The framework on which Dr. Alexandrov will build a citywide stroke response team, Dr. Boop says, has been laid by neurologists and neurosurgeons working together in Memphis. Physicians of the Semmes-Murphey Neurologic & Spine Institute, one of the largest groups of neurosurgeons and neurologists in the country, historically have provided oversight of the residency and fellowship training in neurosurgery locally.

Adam Arthur, MD, a neurosurgeon with Semmes-Murphey and an associate professor at UTHSC, has spent the better part of a decade building a citywide vascular-endovascular program of neurosurgeons, neurologists and interventional neuroradiologists offering state-of-the-art surgical and interventional care to patients at various hospitals in town.

A United Front

Departments of Neurology and Neurosurgery Battle Stroke Together

“With that program up and running, we’re now not just taking care of people at one hospital, but taking care of people in the whole city,” Dr. Boop says. “It’s raising the bar so that everyone in the city, no matter which hospital they end up going to, even people in the region if they get transferred to one of the hospitals in the city, can enjoy the same quality of care in all the different hospital systems.”

Neurology, a branch of internal medicine, treats disorders of the nervous system, brain, spinal cord, nerves and muscles. Neurosurgeons perform surgical treatment on the brain or nervous system. Dr. Alexandrov’s plans to build a citywide system of stroke or vascular neurologists who work with the established vascular-endovascular program will further boost stroke critical care in the region.

“The program is there, but we’re hoping Dr. Alexandrov will take it to a national level of prominence,” Dr. Boop says. “Dr. Arthur is a neurosurgeon and Dr. Alexandrov is a neurologist, so for people who might need surgery, hopefully, Dr. Alexandrov would call Dr. Arthur. We’re hoping there will be synergy here.”

Dr. Boop is confident that Dr. Alexandrov, a national leader in stroke and neurocritical care, is the right person at the right time to take this relationship to new levels. “He’s coming here and he’s bringing to us new research protocols; he’s bringing to us new technologies we’ve not had in this city before; he’s bringing to us new teaching and training paradigms for medical students, as well as residents and fellows, he’s recruiting good, quality people to come to Memphis and help build this program,” Dr. Boop says. “It will certainly raise the level of care for people who have strokes.”
Guy Reed, MD, traces his quest to find a better way to treat strokes back to his days in training.

“What motivated me was to watch a patient come in with symptoms of a stroke, and then watch him progressively deteriorate and die because there wasn’t anything we could do for him,” says Dr. Reed, a cardiologist and chair of the Department of Medicine at UTHSC. “I just realized we didn’t understand what was going on, we didn’t understand what was causing it, and we didn’t have a safe way of approaching the problem because the current therapies we had were too risky and had their own problems. We needed a way to improve care.”

Dr. Reed began more than a decade ago to actively research a safer, more effective therapy for dissolving blood clots, which are the cause of most strokes. Currently, tissue plasminogen activator is the only proven treatment for dissolving blood clots. It is effective on the right patients, but must be given within a certain window of time from onset of symptoms, and can cause major bleeding. “Over time, the benefit of tPA declines and the toxicities rise, so it’s a competing risk-benefit ratio,” he says.

“It ends up being used in only five percent or less of the patients who have ischemic stroke,” Dr. Reed says. “So the challenge really has been to find a way to treat patients in a way that doesn’t enhance their risk of a side effect that might cause its own disability or its own mortality.”

Dr. Reed, who has been at UTHSC for six years, is the principal investigator in research funded with a total of roughly $7 million from the National Institutes of Health that has developed a monoclonal antibody called stromab that’s shown to rapidly and safely dissolve blood clots and prevent ischemic brain injury, hemorrhage and disability when compared with tPA or controls. Dr. Reed and his seven-member team seek to develop stromab as the first approved, new class of clot-dissolving agents since tPA was introduced decades ago.

They are producing stromab for Phase I trials targeted for January 2015 to test on key biomarkers in humans, and Phase II trials as a therapeutic for stroke patients late next year.

“I think more needs to be done in getting patients to recognize the onset of stroke, getting them to understand what the symptoms might be, getting people to hospitals and treated earlier,” Dr. Reed says. “But the key would be to make a treatment that’s safer that you could give to a larger group of patients over a longer period of time after a stroke.”

The original research that led to stromab was designed to identify what regulates clot dissolution in the body, Dr. Reed says. The team identified a molecule as the agent, and then made an antibody that inhibited that molecule, and the blood clots dissolved. They thought this might have utility in humans, and studied it progressively in mice, ferrets, rabbits and so on. “It looks very promising,” he says, adding it could be useful beyond stroke for other problems caused by thrombs or blood clots.

“It’s the only research on this molecule in the country,” Dr. Reed says. “There are many other different approaches to stroke going on, but I hope for all of us at least one of them is effective.”

Dr. Reed sees research as a responsibility of any medical university in the battle against disease.

“As an academic health center, we really have a primary mission of educating people to learn the best current knowledge of how to diagnose and treat disease and improve health,” he says. “But we also have an obligation to advance the field, so that in 2020, we’re not still treating people the same way with the same therapies we’re using in 2014.”

And he hopes those who will be administering those therapies keep something in mind.

“It’s important that we keep as a central part of our mission research and efforts to discover new ways and better ways to treat and prevent disease, and that medical students and residents and fellows think about that pathway as a potential career to accomplish their goals of making the community healthier in addition to their practice of medicine,” Dr. Reed says. “You can do both.”
“Our goal is a College of Medicine, not just in, but for Memphis.”

David Stern, MD

The Big Picture

An Engaged College of Medicine Means a Healthier Community

David Stern, MD, executive dean of the College of Medicine at UTHSC, has his eye on making the community a healthier place to live.

David Stern, MD, executive dean of the College of Medicine, has his sights set on the major health problems plaguing the region. The Stroke Belt is not the only target — diabetes, lung cancer, renal disease, health disparities, obesity — all are in his crosshairs. And as his doctors at the College of Medicine take them down, they build the community up.

“The College of Medicine is dedicated to providing outstanding training to the next generation of physicians, and to being an active force in improving the overall health of our community,” says Dr. Stern. “That means we focus on developing and providing cutting-edge care when people are sick, and offering services and solutions that help keep them well.”

While the dean prefers to stay in the background, he is assembling a world-class team to help him achieve his vision. Dr. Stern says his goal is to bring added value to the community by recruiting specialists to the College of Medicine, like Dr. Alexandrov, who bring new skills and approaches to the excellent education, clinical care and research at UTHSC.

“We are trying to increase the health and wellness of Memphis,” Dr. Stern says. “Dr. Alexandrov is charged with developing a citywide comprehensive Neurology Department that embraces the whole community and multiple health systems. He will be working closely with his colleagues in Neurosurgery to develop seamless coordination of care for patients with neurological disorders. His experience in translational and clinical research will invigorate stroke care throughout the city.”

Dr. Stern’s plans also include setting up Centers of Excellence to target these major health concerns; caring for vulnerable populations; and embedding the College of Medicine in the community with public service work and the best possible clinical care performed by UTHSC doctors at our partner teaching hospitals.

“Our goal is a College of Medicine, not just in, but for Memphis.”
Karen Kaufman-Codjoe MD, MPH

Hometown: Memphis, Tenn.

Family: Three Children (Ellis Codjoe, Seattle, Wash.; John Codjoe, DDS Hyannis, Mass.; Ama Codjoe, New York, N.Y.) and four grandchildren

Education: Undergraduate Degree: BA 1973 – Macalester College, St. Paul, Minn.; MD 1978 – University of Tennessee Health Science Center; Pediatric Residency 1979-1982 – Brackenridge Hospital, Austin, Texas, 1979-1983; MPH 1990 – Ohio State University, Columbus, Ohio

Specialty: Board Certified – Pediatrics; Board Eligible – Preventive Medicine

What is your favorite UT memory as a student?
“Being noted as a trailblazer for being Black and female and then working extremely hard to accomplish the goal of becoming a physician. Meeting fellow students and faculty that went on to become lifelong friends was very special. It was a memorable experience training at the hospital where I was born (John Gaston).”

Why did you select UT COM?
“After living in Minnesota for college, I wanted to come back home for affordable medical school training and to be close to family. The warmer weather was a big plus.”

What are some highlights of your professional career?
“Director of Ambulatory Pediatrics, St. Elizabeth Health Center, Youngstown, Ohio, 1983-1997; Assistant Professor of Pediatrics, Northeastern Ohio Universities College of Medicine, 1986-1997; Clinical Assistant Professor of Pediatrics, Ohio University College of Osteopathic Medicine, 1986-1997; Youngstown Board of Health, 1989-1994; Miles V. Lynk Medical Society, Secretary, 1989-2002; Volunteer State Medical Association – President, 2005-2007”

What UT volunteer positions have you held?
“Alumni Council 2012-present”

Why did you get involved?
“I lived outside of the state for a lot of my career. When I moved back to Tennessee, I was impressed with all the changes at UTCOM and welcomed the opportunity to serve on the Alumni Council and get an up-close look at the medical school that provided me with an excellent foundation for my career in medicine.”

What is your advice to other UT Alumni about getting involved?
“Most of us entered medical school with the vision of helping others. Getting involved with UTCOM affords an opportunity to do that by working with the students, bringing community needs to the table, and as a community leader staying informed about resources available at the university that is training the next generation of doctors. Doctors with experience have a lot to offer the medical school in the way of real-world experience. The more diverse this experience pool is the greater are the benefits for all.”
Thursday, August 14

9:00 a.m. – 10:30 a.m. Executive Committee Meeting
UTHSC Campus

11:30 – 4:00 p.m. Alumni Council Meeting
Center for Cancer Research – UTHSC Campus

6:30 p.m. – 9:00 p.m. Outstanding Alumni Awards Dinner
Venetian Ballroom – Peabody Hotel
COST: $50/PERSON

Friday, August 15

7:15 a.m. CME Registration and Continental Breakfast
Freeman Auditorium – Hamilton Eye Institute

8:00 a.m. – 12:00 p.m. Plenary Sessions – FREE EVENT!
Freeman Auditorium – Hamilton Eye Institute

8:30 a.m. – 9:30 a.m. Continental Breakfast for Spouses and Those Not Attending CE Program – FREE EVENT!
Jackson Room – Peabody Hotel

11:00 a.m. Keynote Address: Update on Diabetes Management in the Community
Freeman Auditorium – Hamilton Eye Institute
Irl B. Hirsch, MD
Professor of Medicine
The Diabetes Treatment and Teaching Chair
The University of Washington School of Medicine
FREE EVENT!

12:30 p.m. – 1:30 p.m. UT Health Science Center Walking Tour
Advance reservations requested.
Minimum of 25 people required.
FREE EVENT!

3:00 p.m. – 4:30 p.m. College of Medicine White Coat Ceremony
Mississippi Boulevard Christian Church

6:00 p.m. – 7:00 p.m. Networking Reception for Alumni & Students
Hernando DeSoto Room & Club Bar – Peabody Hotel
FREE EVENT!

7:00 p.m. – 9:00 p.m. Class Reunion Dinners

Saturday, August 16

7:00 p.m. – 9:00 p.m. Class Reunion Dinners

Note: Room locations are subject to change.

2014 Outstanding Alumnus Award Recipients

Jack B. Alperin, MD, FACP ’57
Jesse J. Cannon, Jr., MD ’76
James D. Link, MD ’61
Dana V. Wallace, MD ’72

For more details, visit the 2014 Medicine Alumni Weekend website at www.uthscalumni.com/2014MedicineWeekend. Registration opens Tuesday, June 17!

Keynote Address by Irl Hirsch, MD

Dr. Irl Hirsch is a professor of medicine and holds the Diabetes Treatment and Teaching Chair at the University of Washington School of Medicine in Seattle. He went to medical school at the University of Missouri in Columbia, Mo., trained in internal medicine at the University of Miami in Miami, Fla., and Mount Sinai Hospital in Miami Beach. Dr. Hirsch completed a research fellowship at Washington University in St. Louis.

Dr. Hirsch has been interested in new technologies for the treatment of diabetes, particularly those involved in the use of insulin therapy. He has been involved in numerous major clinical research trials, including the DCCT, ACCORD, STAR-1, JDRF Sensor Trial, SEARCH, ORIGIN, ADAG and many more. He has authored more than 140 papers including a review of insulin in the New England Journal of Medicine, more than 50 editorials, three commentaries in “Journal of the American Medical Association,” numerous book chapters and four books both for patients and physicians. Dr. Hirsch is the past editor-in-chief of DOC News and Clinical Diabetes and the former chair of the Professional Practice Committee for the American Diabetes Association. He has served as a member of the Endocrine Section of the American Board of Internal Medicine.
Would you like to find a way to give back to the College of Medicine? Did you receive scholarship support while attending UTHSC and would like to now offer support for future students? Would you like to honor a past mentor or professor? Do you want to see the UTHSC College of Medicine reach new heights in educating medical students, conducting research, and caring for patients in Tennessee and beyond?

If you answered yes to any of these questions, please consider making a gift today. Donations from alumni, residents, past trainees and fellows, former and current parents, community advocates, corporations and foundations, and friends new and old of the College of Medicine are one of the key drivers in making the college exceptional.

There are countless areas at the UTHSC College of Medicine that can benefit from your support, including student scholarships, research, departmental-based support, or funding entirely new initiatives. There are so many ways to contribute, too — one-time gifts or multiple-year pledges, IRA designations, simple bequests, and more.

Please contact Zach M. Pretzer, CFRE, Director of Development for the College of Medicine, at (901) 448-4975 or via email at zpretzer@uthsc.edu to learn more about how to donate to the College of Medicine.

The College of Medicine Needs Your Support!

CHAIR – $2,000,000 or more

Provides substantial salary support for a College of Medicine faculty member and their related research, library, and travel expenses. The dean, or the appropriate academic officer, determines specific criteria with approval of the Chancellor.

PROFESSORSHIP – $1,500,000 or more

Provides a salary supplement and/or related research, library, and travel expenses. The dean or the appropriate academic officer determines specific criteria with approval of the Chancellor.

DISTINGUISHED VISITING PROFESSORSHIP – $100,000 or more

Provides honorarium and travel expenses for a visiting professor, plus event expenses for addressing several audiences (students, faculty and community professionals).

RESEARCH AND DEVELOPMENT FUND – $100,000 or more

Supports research in the field designated by the donor.

LABORATORY – $75,000 or more

Provides naming rights for an available laboratory space.

LECTURESHIP – $60,000 or more

Provides honorarium and travel expenses for a lecture by a noted scholar.

FACULTY DEVELOPMENT FUND – $50,000 or more

Supports College of Medicine faculty in developing their careers through study, research, travel and professional activities.

SCHOLARSHIP – $25,000 or more

Creates an endowed scholarship fund for the College of Medicine that will benefit current or entering students in need and/or to reward outstanding academic performance.

MINIMUM ENDOWMENT – $25,000 or more

Any of these opportunities may be provided in one payment or be built to this level over a five-year period. All endowment gifts may include naming rights as well.
On July 1, 2013, the UT Health Science Center Office of Development and Alumni Affairs unveiled a new donor recognition society. Named the 1911 Society in honor of the year that our campus was started, this new recognition opportunity acknowledges donors who make annual, recurring gifts that serve as the renewable basis of private support each year.

"Members of the 1911 Society are the leaders of our past, present and future," said Bethany Goolsby, associate vice chancellor for Development at UTHSC. "The ongoing, annual support of our alumni and friends provides funding necessary for administrators, faculty and students to succeed in all areas of health care training, education and community service."

All donors whose gifts to the UT Health Science Center totaled between $100 and $10,000 during the period July 1, 2012 through June 30, 2013 were granted charter membership in one of the six 1911 Society giving levels. Charter membership will also be extended to all individuals who give at 1911 Society membership levels between July 1, 2013 and June 30, 2014. Membership level is based on total contributions across six different levels of private support.

To be named in one of the 1911 Society recognition levels, donors can direct gifts to any college, program or fund at the UT Health Science Center. "That is the unique aspect of this level of recognition," said Goolsby. "We want to proudly identify individuals who are supporting the Health Science Center with their financial resources each year." Members will be listed in a 1911 Society Roll of Honor to be published in various newsletters, magazines and other publications throughout the year.

As members of the 1911 Society, donors are recognized as vital partners of the UT Health Science Center community. Depending on membership level, various benefits are available to all members along with the most obvious benefit — the satisfaction of knowing that your support has provided meaningful resources for UT Health Science Center faculty, students and staff.

Your loyalty matters to us ... and to you. And to our students, faculty and staff as well. For more information on how to make a gift and become a member of the 1911 Society, please contact the UTHSC Office of Development and Alumni Affairs at (901) 448-5516.

**1911 Society Benefits**

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<th>Level</th>
<th>$100 - $249</th>
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**1911 Society Decal**

1911 and 1921 members are identified as Charter Members.

**Recognition in annual Roll of Honor**

Collegiate and campus publications.

**Communication from UTHSC Students**

Email, letter and/or postcard contacts.

**Communication from UTHSC Dean**

New year correspondence, update after board meetings.

**Special Invitations to Campus Events**

Note on rosters, note on nametags, recognized from the podium when possible.

**1911 Society Lapel Pin**

**Annual VIP Communication from the Chancellor**

**Special Recognition at Events**

Note on rosters, note on nametags, recognized from the podium when possible.

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**Sneak Peek**

The 2014 program will feature 40 tours, beginning at only $714!
Faculty Positions Available in Memphis and Nashville

Visit: www.uthsc.edu/nursing/jobs

Contact: Laura Beth Homonnay
Email: lbhomonnay@uthsc.edu
Office: (901) 448-6135 or (800) 733-2498

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Isle of Palms, S.C.

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Chattanooga, Tenn.

DAVID H. TURNER, M.D.
Germantown, Tenn. (deceased)

RALPH HAMILTON, M.D.
Germantown, Tenn.

JOHN SASH, M.D.
Memphis, Tenn.

Honorary
JOE E. JOHNSON, Esq.
JAMES HUNL, M.D.

Chancellor of Health Science Center
Steve J. Schwad, M.D.

Executive Dean for the College Of Medicine
David M. Starn, M.D.

Special Assistant to the Chancellor
Harold “Pat” Wall, M.D.

College of Medicine
James J. Neutens, PhD
Dean, College of Medicine

David C. Soderg, MD, CPE, FACEP
Dean, College of Medicine

Chattanooga

Interim Foundation President & Executive Director
UT Alumni Association
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Iris Phillips

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Michelle Nasw, MIA

Ferndale Taggart

Associate Director of Alumni Programs
Monica Everitt

Senior Director of Annual Giving & Advancement Services
Jada Williams

Associate Vice Chancellor for Development
Bethany Goodby Blankenship, JD

Director of Development
Zach Pretzer
en Lothstein, PhD, considers himself lucky. He’s been a researcher at UTHSC for 25 years, and was fortunate enough to have had the same research assistant for 15 of those years. “That’s highly unusual,” said Dr. Lothstein, an associate professor of Pathology and Pharmaceutical Sciences. “As often happens in laboratories, we hire someone as a lab assistant, and they will, more often than not, stick around for a year or two years, and then move on to a PhD program or med school. We could hardly fault them for doing that, but it’s a problem in continuity of research.”

That’s why Dr. Lothstein has developed a new graduate program at UTHSC designed to train qualified students to assume the technical staff positions of senior laboratory assistant and laboratory manager in biomedical research labs in the academic, government and private sectors. The Master of Science in Laboratory Research and Management Program will begin in the fall of 2014. The intensive three-semester program on the UTHSC campus will be administered through the Department of Pathology in the College of Medicine, working in tandem with the College of Graduate Health Sciences. It will offer theoretical and practical laboratory experience, and also train students in the managerial and administrative skills required of a senior research assistant or lab manager in basic and translational biomedical research laboratories.

“We want to do with this program is provide training in an academic environment, so that when these individuals come out with a master’s degree, they can step into a lab and become almost fully functional within a very short period of time,” he said. “We want to train individuals whose goal is to stay in this position for a length of time, eventually leading to a managerial position, which can pay very nicely.”

A UT Professor Offers a New Solution to an Old Problem

Entry-level research lab assistants make from about $26,000 to $43,000 annually, according to figures provided by Dr. Lothstein. Salaries rise with education and experience to between $37,000 and $63,000, he said. Lab managers can make roughly $63,000 to about $110,000.

The U.S. Department of Labor’s Bureau of Labor Statistics predicts 14 percent growth for the laboratory assistant job classification over the next eight years, from an estimated 82,000 jobs to an estimated 91,000 by 2020. This growth is anticipated despite cutbacks in federal funding for research.

“We need to start training good support staff,” Dr. Lothstein said. This is important to some extent because of government funding cuts, which take principal investigators out of the labs in search of funding. “Without good technical staff, the work doesn’t get done. If the work doesn’t get done, the grant money doesn’t come in.”

Dr. Lothstein said it’s important that the biotech community in Memphis be aware of this new program. “They have a vested interest,” he said. “This is where their technical staff will be coming from, which will improve the nature of research in town.”

The program will provide not only qualified graduates to fill research jobs, but also interns who can help staff labs while they are still learning. “This program is providing a skilled labor force that is needed both for the academic sector in this town and for the biotech sector,” he said. “I want both to get fully involved and invested in this.”
On Friday, March 21, 2014, 154 UTHSC College of Medicine students gathered with family and friends at the Pink Palace Museum in Memphis to celebrate Match Day. Dr. David Stern, dean of the College of Medicine addressed the crowd stating, “Congratulations to all of you. I am excited for the future as you are the people that will change the face of medicine.”

At noon, the class of 2014 simultaneously opened the envelopes containing their match information, and cheers erupted. The UTHSC Alumni Office was on hand with an oversized map that allowed the students to pin their residency location.

Forty-four percent of the class matched within the UT system. Fifty percent of the class matched into a primary care specialty.
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<tr>
<th>Name</th>
<th>Institution</th>
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<td>Audrey Kathleen Christianson</td>
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<td>James Davis</td>
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<td>UPMC Medicine, Pa.</td>
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<td>Delayed Residency</td>
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<td>Retina Richer Jaqua</td>
<td>Indiana University Hospital, Mo.</td>
<td>Surgery-Preliminary</td>
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<td>John Brian Jepson</td>
<td>UTHSC College of Medicine, Memphis</td>
<td>Pediatrics</td>
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<td>Kristin Lee Jepson</td>
<td>Cincinnati Children's Hospital, Mo.</td>
<td>Pediatrics</td>
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<td>Heather Elaine Jepson</td>
<td>University of Cincinnati Medical Center, Ohio</td>
<td>Obstetrics-Gynecology</td>
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<td>Patricia William Jepson</td>
<td>UTHSC College of Medicine, Memphis</td>
<td>Surgery-Preliminary</td>
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<td>Leah Ann John</td>
<td>UTHSC College of Medicine, Memphis</td>
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<td>Benjamin Allen Jepson</td>
<td>Christ Community Health Services, Tenn.</td>
<td>Family Medicine</td>
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<td>Mark Taylor Jones</td>
<td>UTHSC College of Medicine, Chattanooga</td>
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<td>Eugene Chau Kung</td>
<td>Everepa St. Joseph Hospital, Cdt.</td>
<td>Surgery-Preliminary</td>
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<td>Shiela Khaner</td>
<td>University of California, Irvine Medical Center, Calif.</td>
<td>Pediatrics</td>
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<td>Dhana Chitraa Keng</td>
<td>University of Nevada Affiliated Hospitals, Las Vegas</td>
<td>Internal Medicine</td>
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<td>Zachary Paul Knotts</td>
<td>Delaware Medical School, Delaware</td>
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<td>Michael Nyarko Otten</td>
<td>St. Louis University School of Medicine, Mo.</td>
<td>Emergency Medicine</td>
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<td>Christopher Michael Knight</td>
<td>UTHSC College of Medicine, Memphis/Jackson</td>
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<td>Tyler Harrison Kommer</td>
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<td>General Surgery</td>
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<td>Nancy Rau</td>
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<td>Lauren Kyle Lazer</td>
<td>University of Texas Southwestern Medical School, Dallas</td>
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<td>Jacob Richard Lepard</td>
<td>University of Alabama Medical Center, Birmingham</td>
<td>Neurosurgical Surgery</td>
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<td>Bryanna Schunem更能</td>
<td>University of Alabama Medical Center, Birmingham</td>
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<td>Jordan I. Lewis</td>
<td>Mayo School of Graduate Medical Education, Fla.</td>
<td>Radiology-Diagnostic</td>
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<td>Weir Li</td>
<td>UTHSC College of Medicine, Memphis</td>
<td>Medcine-Preliminary General Hospital</td>
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<td>Andrew Harrison LICHTER</td>
<td>UTHSC College of Medicine, Chattanooga</td>
<td>Study-Preliminary Radiology-Diagnostic</td>
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<td>Krista Lee LCDY</td>
<td>University of New Mexico School of Medicine, Mo.</td>
<td>Internal Medicine</td>
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<td>Benjamin James Maddox</td>
<td>St. Thomas Midtown Hospital, Tenn.</td>
<td>Internal Medicine</td>
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<td>Samuel Ray Maurer</td>
<td>Baptist Health Sys. Ala.</td>
<td>Transitional Year</td>
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<td>Steven James Masour</td>
<td>UTHSC Graduate School of Medicine, Knoxville</td>
<td>Anesthesiology</td>
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<td>Patrick David McFARLAND</td>
<td>UTHSC Graduate School of Medicine, Knoxville</td>
<td>Anesthesiology</td>
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<td>Jocelyn Elizabeth McKEIN</td>
<td>Oregon Clinic Foundation, La.</td>
<td>Anesthesiology</td>
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<td>Marissa Menico</td>
<td>UTHSC College of Medicine, Chattanooga</td>
<td>Surgery-Preliminary</td>
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<td>Meredith Mertz</td>
<td>University of Missouri, Kansas City Programs</td>
<td>Surgery-Preliminary</td>
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<td>Robert Hines Mitchell</td>
<td>University of Utah Affiliated Hospitals</td>
<td>Internal Medicine</td>
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<td>Claire Murphy</td>
<td>UTHSC College of Medicine, Chattanooga</td>
<td>Radiology-Diagnostic</td>
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<td>Daniel Salis Murrell</td>
<td>University of Illinois College of Medicine, Chicago</td>
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<td>Zachary Paul Knotts</td>
<td>Birth Israel Dovvos Medical Center, Mass.</td>
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<td>St. Louis University School of Medicine, Mo.</td>
<td>Emergency Medicine</td>
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</table>
Kathleen Kern explains the results of her study, “Opioid Misuse Behaviors in Adolescents and Young Adults in a Hematology Oncology Institution,” to Gerald Presbury, MD. She is an M2 whose undergraduate work was at Vanderbilt University. Her study retrospectively analyzed a new assessment tool, the Screener for Opioid Aberrant Behavior (SOABR), to examine correlates of aberrant opioid behavior (AOB) in a group of adolescent oncology and hematology patients who received chronic opioid therapy. The conclusion was that adolescent and young adult cancer patients may experience AOB despite having an ultimate source of pain. Therefore, a screening tool such as SOABR would be beneficial to prescribing physicians and multidisciplinary teams.

Polina Varavva Zmijewski explains her study, titled, “Cells that Become Metastatic.” Her study retrospectively analyzed a diagnostic group of adolescent oncology and hematology patients who received chronic opioid therapy. The conclusion was that adolescent and young adult cancer patients may experience AOB despite having an ultimate source of pain.

M2 Scott Martin discusses his study, “Tetraspanin CD2 Regulates Cell Contraction and Acts in Angiogenesis via RhoA in Human Aortic Smooth Muscle Cells” with Vicki Park, PhD. The study was made possible by a grant from the American Heart Association.

M2 Mercy Kibe explains, “Identification of a Small Cohort of Genes Expressed in Primary Uveal Melanoma Cells that Become Metastatic.” Uveal melanoma, the most common primary intraocular tumor in adults, metastasizes to the liver in 50 percent of patients who develop it, but the mechanisms that govern this remain unclear. In this study, target-specific PCR arrays were used to identify genes that might drive metastases and target them for further therapy.

For more information, go to alphanew.org.
A Profile of the 2013 College of Medicine Entering Class

Number of Applications ........................................... 1628
Number of Applicants Interviewed ............................... 501
New Enrollees ......................................................... 165
Male ........................................................................ 93
Female ..................................................................... 72
Average Age ......................................................... 23
Age Range ........................................................... 20-32
Underrepresented Minority ......................................... 12.7%
Colleges Attended .................................................. 67

Academic Credentials
3.52 Science GPA
3.60 Overall GPA

Average MCAT*
Verbal Reasoning ................................................. 10
Physical Sciences .................................................. 10
Writing Sample ..................................................... 0
Biological Sciences ............................................... 10

Tuition & Fees (2013-14)
Residents .............................................................. $31,432
Nonresidents ......................................................... $62,292

Undergraduate Schools Attended by New Enrollees
Astbury University
Auburn University
Austin Peay State University
Belmont University
Birmingham Southern College
Bowdoin College
Bryan College
Carleton College
Carnegie Mellon University
Carson-Newman College
Christian Brothers University
Clayton State University
Clemson University
College of the Ozarks
Colorado College
Colorado State University
Cornell University
Dartmouth College
DePauw University
Duke University
East Tennessee State University
Emory University
Furman University
Grove City College
Harvard University
Indiana University Bloomington
John Hopkins University
Lee University
Lipscomb University
Marshall University
Maryville College
Middle Tennessee State University
Middlebury College
Mississippi State University
Princeton University
Rhodes College
Saint Louis University
Sanford University
Southern Adventist University
Stanford University
Tennessee State University
United States Military Academy
Tennessee Tech University
The University of Memphis
The University of the South
Tulane University
UNC at Chapel Hill
Union University
UT Chattanooga
UT Knoxville
UT Martin
University of Alabama
University of California Berkeley
University of Chicago
University of Miami
University of Mississippi
University of Notre Dame
University of Pennsylvania
University of Virginia
Vanderbilt University
Wake Forest University
Warren Wilson College
Washington-Lee University
Washington University Saint Louis
Wheaton College
Yale University

*All took the MCAT. 100% had baccalaureate degrees.

John Jennings, MD, Becomes President of American Congress of Obstetricians and Gynecologists

John C. Jennings, MD, of League City, Texas, became the 65th president of the American Congress of Obstetricians and Gynecologists (ACOG), based in Washington, D.C. Dr. Jennings completed his medical degree and his residency at the University of Tennessee in Memphis. He is currently professor of obstetrics and gynecology at the Texas Tech University Health Sciences Center at the Permian Basin.

The ACOG is the nation’s leading group of physicians providing health care for women. As a private, voluntary, nonprofit organization of more than 58,000 members, the ACOG strongly advocates for quality health care for women, maintains the highest standards of clinical practice and continuing education of its members, promotes patient education, and increases awareness among its members and the public of the changing issues facing women’s health care.

John Little, MD, proudly wore the University of Tennessee orange and represented the medical college well by racing impressively in the 2014 Boston Marathon. He is an avid runner who called the marathon “the experience of a lifetime.” Dr. Little graduated from the College of Medicine in 1992 and is director of the Pediatric Cochlear Implant Program at Children’s Hospital in Knoxville. He is also a member of the college’s Alumni Council.

John Little, MD, Proudly Wore the University of Tennessee Orange and Represented the Medical College Well by Racing Impressively in the 2014 Boston Marathon. He is an Avid Runner Who Called the Marathon “the Experience of a Lifetime.” Dr. Little Graduated From the College of Medicine in 1992 and is Director of the Pediatric Cochlear Implant Program at Children’s Hospital in Knoxville. He is Also a Member of the College’s Alumni Council.
In Memoriam

1943
W. Byron Inmon, MD, age 94, of Madison, Miss., died Jan. 8, 2014. Dr. Inmon was especially gifted in gynecological surgery, and his work is cited in texts and other publications. He was a founder member of the Society of Gynecological Surgeons.

1945
William Matthews Featherston, MD, age 91, of Elk City, Okla., died Dec. 1, 2013. Dr. Featherston established his practice in Elk City in 1949, and also provided several clinics in the Tehuacan, Mexico, area. He has been inducted in the Western Oklahoma Hall of Fame.

1946
Melton Price Meek, MD, age 91, of Lawton, Okla., died April 16, 2014. Dr. Meek was a member of Phi Chi Medical Fraternity, an alumnus of the Seymour A. Mynderse Fraternity, a Diplomat of the American Board of Pediatrics, a Fellow of the American Academy of Pediatrics, a member of the American Medical Association, a past president of the Comanche-Cotton and Tillman Counties Medical Society, a past Chief of Staff of Comanche County Memorial Hospital, a member of the University of Oklahoma Orthopedic Society, and a past president of the Lawton Philharmonic Society.

1947
Hoyt C. Harris, MD, age 93, of McMinnville, Tenn., died Oct. 23, 2013. In his spare time, Dr. Harris earned a low degree in the mid-1960s from LaSalle University of Chicago. His memoir, "A Steep Climb," was published in 2010. The book, in addition to relating a long, eventful life of highs and lows, recounts growing up on a rural farm and how plowing many acres behind a very stubborn mule made him adamantly aspire to one day get off the farm and become a physician.

1952
Coulter S. Young, MD, age 89, of Manchester, Tenn., died March 25, 2014. Dr. Young was a Fellow of the American Academy of Family Physicians, a Diplomat of the American Board of Pediatrics, a Fellow of the American Academy of Pediatrics, a member of the American Medical Association, and a member of the American Medical Association, and the Tennessee Medical Association. He was instrumental in establishing the Coffee County Medical Society.

1953
Jim F. Sharp, MD, age 66, of Louisville, Ky., died Nov. 8, 2013. Dr. Sharp started his career as a Navy flight surgeon and met his future wife Janet when he was stationed in Okinawa, Japan.

1954
John Hamilton Edmonson, MD, age 82, of Rochester, Minn., died Nov. 23, 2013. Dr. Edmonson worked at the Mayo Clinic Dept. of Medical Oncology until his retirement in 2001. At Mayo, he became a Mayo Medical School Professor of Oncology. Over his career, he was awarded an abundance of research grants, and authored approximately 200 scientific papers, abstracts and book chapters. He belonged to many regional and national oncology research groups, and was on the editorial board for the Surgical Oncology Journal.

1956
Frederick Duke Lansford, MD, age 87, of Chattanooga, Tenn., died Oct. 14, 2013. Dr. Lansford obtained additional training at Erlanger Hospital where he later taught as an associate clinical professor in Family Medicine. He was board certified by the American Academy of Family Physicians and was a member of the active staff of East Ridge Hospital, Erlanger Hospital, Parkridge Hospital and Memorial Hospital.

Fletcher Howard Goode, MD, age 83, of Memphis, Tenn., died Nov. 17, 2013. Along with his practice, he was an associate professor of Ophthalmology at UTHSC and was on the staff at St. Jude Children’s Research Hospital. UT Medical School recognized Fletcher with a Distinguished Alumnus Award in 1996.

Emmett Bell, Jr., MD, age 90, of Memphis, Tenn., died Nov. 20, 2013. Dr. Bell held many leadership positions at Le Bonheur Children’s Hospital, including chief of medicine, chief of staff, chair of the Credentialing Committee, member of the Medical Ethics Committee, and consultant for the Division of Cardiology. Dr. Bell also served on the University of Tennessee faculty.

1957
Richard Grossman, MD, age 81, of Thousand Oaks, Calif., died March 13, 2014. Dr. Grossman was a renowned plastic and reconstructive surgeon who pioneered the comprehensive care of burn patients. In the late 1960s, Dr. Grossman persuaded administrators at Sherman Oaks Hospital in California to set aside two beds for burn patients. By 1978, the ward was the nation’s largest private burn treatment center. On the facility’s 25th anniversary, it was named the Grossman Burn Center at Sherman Oaks Hospital in honor of the surgeon who pioneered its cutting-edge care. One of Grossman’s more celebrated patients was comedian Richard Pryor, who spent six weeks at the center in 1980 after suffering third-degree burns over 50 percent of his body in a fire at his home.

1958
Sidney Ely Daffin, MD, age 91, of Panama City, Fla., died Dec. 6, 2013. Dr. Daffin opened his practice in Family Medicine in 1950. Of the next 25 years, he dedicated himself to serving his patients and the community. After closing his practice downtown, he worked in the General Medical Clinic at Tyndall Air Force Base for 10 years. He finalized his medical career as director of Washington County Public Health.

Francis Jones, MD, age 91, of Knoxville, Tenn., died Oct. 14, 2013. Dr. Jones was the first pathologist and director of Clinical Laboratories of the UT Hospital in Knoxville when it opened and the inaugural chair to the Department of Pathology at the Graduate School of Medicine when it was formed in 1969.

Groundbreaking research, first-class education, superior clinical care, and dedicated public service — UTHSC is making news 24/7, and the world is helping us tell our story. For a look at what the local, national and international media are saying about UTHSC, go to news.uthsc.edu/in-the-media.
SAVE THE DATE

August 14 - 17, 2014
2014 Medicine Alumni Weekend

Oct 15 - 17, 2014
Memphis, Tennessee
Golden Graduate Homecoming
Honoring the Class of 1964
(plus all previous Golden Graduates invited)
Details to be mailed soon!

Oct 24, 2014
Knoxville, Tennessee
College of Medicine Alumni Reception
See page 36