

CLASS NOTES

'70s

Although **Graham Johnstone** (MD '70, Orthopaedics Resident '77) loves retirement ("Don't tell all the people who are working"), he has not retired his love of orthopaedics or of teaching. Since 2002, Johnstone has visited several African countries, where he performs orthopaedic surgery and teaches residents from the Pan African Academy of Christian Surgeons. This fall, Johnstone and his wife, Marilyn, are returning to SIM Galmi Hospital in Niger for six weeks, bringing along as many medical supplies as they legally can. "It's always exciting to see all the supply cartons arrive at the airport at the same time, knowing we'll be able to use them. . . . I'm in clinic the day I arrive, and I operate the next day." While he's there, he works 12–14 hour days, five days a week. In addition to his international volunteer work, Johnstone is on the board of Brother's Brother Foundation, a Pittsburgh-based nonprofit that sends medical supplies all over the world. Before retiring in 2014, Johnstone, who was clinical associate professor of orthopaedic surgery at Pitt, had the opportunity to train his second son, **Stephen Johnstone** (Orthopaedic Surgery Resident '15), who's now a fellow at Columbia University.



Stephen and Graham Johnstone

'80s

Paul Worley (MD '80) is a neurologist-cum-basic neuroscientist who studies protein synthesis in excitatory synapses that are involved in learning and memory. A professor of neuroscience and neurology at Johns Hopkins University, Worley researches several brain disorders, including schizophrenia, autism, Parkinson's, binge drinking, drug addiction, and Alzheimer's—all of which are related to alterations in the way information is stored in the brain. Worley published a paper earlier this year in *Neuron* on a gene that is thought to have derived from a virus that integrated into the genomes of primitive organisms eons ago and may be a cause of and target for schizophrenia. His work with patients early in his career remains top of mind in the lab. "It is front and center in our thinking that the work should be translatable [to treatment]," says Worley. "I'm a basic scientist, but I'm a pragmatist, as well."

William Simmons (Pediatric Critical Care Resident '86, Pediatric Anesthesiology Fellow '87) is leading a program to get more young African American men interested in science—an effort that just received national recognition. Simmons is president of the Gateway Medical Society, which earned the National Medical Association Large Society of the Year Award for its "Journey to Medicine" program. This program is geared toward 6th- through 12th-grade boys from Pittsburgh Public Schools who show a particular interest in science and mathematics. Participants are given hands-on learning experiences led by physician, resident, and medical student mentors. The organizers strive to build confidence in the boys' current academics and teach them about future medical occupations. In general, the young men who participate have higher GPAs and better attendance at school. "It is the mentorship that actually makes the difference in our program," says Simmons.

Steven Fisher (Internal Medicine Resident '89), professor of medicine and physiology at the University of Maryland, traces his interest in muscle and the way it adapts under disease conditions back to his residency days. "I saw patients who had suffered from heart disease for long periods and whose cardiovascular systems had adapted before symptoms presented, and I got interested in taking a closer look at what was going on." Today, Fisher primarily studies that question with respect to molecular physiology—in particular, he's interested in how gene expression affects blood flow. In one of his most recent studies, Fisher examined how different signal pathways converge in a disease model to cause muscle relaxation and increase blood flow. He says that sepsis is a particularly interesting disease in this regard; he and colleagues discovered a novel explanation for the massive dilation of the blood vessels, which suggests therapeutic targets.

'90s

An associate professor of psychiatry, anesthesiology, and clinical and translational science at Pitt, medical director of psychiatry at UPMC Pain Medicine at Centre Commons, and director of the geriatric psychiatry fellowship, **Jordan Karp** (MD '98, Geriatric Psychiatry Fellow '03) runs clinical trials for older adults with comorbid depression and chronic pain conditions. "Pain makes depression worse, and depression makes pain worse. They have a shared biology and shared psychology," says Karp. The geriatric population presents differently with depression than do younger populations. "Older adults can have feelings of hopelessness and fear about the future. They worry about falling, becoming dependent upon others, losing functioning. They have a fear of being alone. We need to be age- and culturally sensitive." Karp hopes to find ways to break the cycle of physical deconditioning from inactivity and pain that feeds into low self-esteem and depression by testing novel interventions and studying the shared psychobiology of these linked conditions.

Pittsburgh is abuzz about the opening of the new Three Rivers Mothers' Milk Bank. As NICU medical director at Magee-Womens Hospital of UPMC and a member of the board of the Three Rivers Mothers' Milk Bank, **Jennifer Kloesz** (Pediatric Resident '98, Neonatal-Perinatal Medicine Fellow '01) is dedicated to helping more premature babies have access to their own mother's milk as well as donor milk. Breast milk is important for preemies, she reminds, because it significantly decreases the risk of necrotizing enterocolitis, shortens the length of hospital stays, and decreases allergies and ear infections. "We are moving toward using donor milk for all of our very low birth weight babies if their mother's milk is not available." Breastfeeding advocacy is a part of life in Kloesz's household. Kloesz is married to **Albert Wolf** (MD '97), CFO of the National Breastfeeding Center in Pittsburgh. The couple met while Kloesz was an intern and Wolf was a Pitt med student.



Sharifi

'00s

Nima Sharifi (MD '01) has devoted more than a decade of research to the field of prostate cancer. He published his most recent findings in *Nature* last June. Sharifi and his research team at Cleveland Clinic found that D4A—a metabolite of a drug for metastatic prostate cancer—could eliminate cancer cells more effectively than the drug, called abiraterone, itself. If D4A is given directly to patients, the study suggests, the metabolite could prolong their lives by blocking androgen production. Sharifi won the American Association for Cancer Research Award for Outstanding Achievement in Cancer Research in 2014. He's

the codirector of Cleveland Clinic's Prostate Cancer Research Center of Excellence and holds its Kendrick Family Endowed Chair for Prostate Cancer Research.

As a freshman at Yale, **Seth Hawkins** (Emergency Medicine Resident '03) figured he'd go into anthropology or archaeology, but after taking a wilderness EMT class, he got hooked on the idea of providing physician-level services in the great outdoors. He's interested in translating formal EMS systems into a wilderness environment—emphasizing a more effective system of prevention and diagnosis, along with the treatment of injuries and medical conditions in the wild. An emergency physician at Blue Ridge HealthCare hospitals, he moonlights as a wilderness medicine educator. In 2007, he founded the nonprofit Appalachian Center for Wilderness Medicine.



Watchmaker

Following stints as a postdoctoral fellow and research associate at Stanford University, **Payal Watchmaker** (PhD '07) joined Achelois Pharmaceuticals as a research scientist in June. At the San Francisco–based company, she'll work with a team of researchers to develop a more effective cancer immunotherapy drug. Watchmaker also hopes to continue her Stanford research in the new position, particularly to build on the findings of her 2013 *Nature Immunology* paper on the role of intestinal dendritic cells in immunity. Although she's been on the West Coast for almost seven years, Watchmaker says she's constantly reminded of Pitt with the abundance of Steelers fans in the Bay Area. *—Kristin Bundy, Lori Ferguson, Brady Langmann, and Susan Wiedel*

JOY RUFF

FROM IRAQ WITH LOVE



Ruff tries on a Kurdish style hat at a market in Iraq.

"When you're in a situation where you're being told to leave, you don't think about what to pack," says Joy Ruff (MD '12). "You just run."

Ruff recently returned from a 10-day trip to Northern Iraq where she and other physicians treated refugees fleeing the Islamic State–controlled areas of Syria. The doctors set up makeshift care facilities in abandoned warehouses and treated upwards of 100 patients a day. In many cases, the refugees they met had to evacuate their homes within minutes, meaning they arrived in Iraq with no possessions—including vital medicines.

Although Ruff is a family practice physician, she says much of what she did in Iraq was triage—administering stitches, checking vitals, and supplying prescriptions. But according to Ruff, the most important thing she did was listen.

"Just sitting down and talking to these people, hearing their stories, hearing their frustration—it was heartbreaking," says Ruff. "Most of the time I felt like what they needed was someone to give them an ear, someone to help them process the grief and trauma."

Ruff's trip was part of a holistic family medical residency program called In His Image, which is based in Tulsa, Okla., at St. John Medical Center. Disaster relief is part of its outreach curriculum.

As the mother of three children—Nathan (7), Zach (5), and Grace (1)—Ruff said it was difficult to hear stories of families being forced out of their homes. She cared for engineers, pharmacists, and bakers—normal people living normal lives until the moment ISIS started firing bullets at them.

She thinks the time she spent in Iraq will make her a better family doctor down the line.

"When you see people suffering on a large scale like that, it keeps you soft and reminds you why you're doing it," says Ruff, who is a fellow at the University of Alabama.

"It gets you away from the bureaucracy and paperwork and other issues we sometimes have to deal with. Just seeing those people and feeling their need, offering your skills and your care and your love.

"That's actually the heart of medicine." *—Jason Bittel*

MAA SAYS—MAKEOVER EDITION



Gabler



Madison

Maybe you saw her at this year's Medical Alumni Association homecoming tailgate. Or perhaps you shook hands at October's health sciences alumni reception in San Diego. Jennifer Gabler has gotten to know many Pitt med alumni through her previous positions in development for the school. As the new executive director of a streamlined medical development and alumni relations team, she plans to give the Medical Alumni Association a facelift. Gabler will be working closely with MAA staff members to reach out to a more diverse pool of alumni and prospective Pitt meders and to further engage alumni with the school.

Gabler's team will work with MAA President Jan Madison (MD '85) and the executive committee to revamp reunions (details to come) and to hold more frequent local events for alumni in the 'Burgh. Expect to gather with former MAA President Brian Klatt (MD '97, Res '02) and President-elect David Metro (MD'94, Res '98) at the upcoming shindigs.

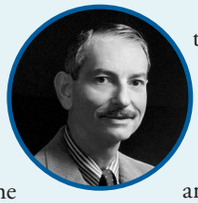
"We want alumni to be able to reach out to their classmates," Gabler says, "to connect them with former faculty members and to have a good time when they do come back to Pittsburgh."

Whereas the development team, which makes more than 600 alumni visits around the country each year, used to go about their work independently from MAA, now the two organizations' efforts will be more closely aligned. They hope to engage young alumni—those hard-to-reach residents in particular—and use their now tripled staff to keep everyone in the loop. "We'll be able to offer more to our alumni," Gabler says. *—Robyn K. Coggins*

MEDICAL ALUMNI ASSOCIATION WWW.MAA.PITT.EDU

KLAUS BRON

FEB. 7, 1929 – JULY 23, 2015



Bron

Klaus Bron, a professor of radiology, had a tradition. The last Friday of every month, he took residents out to lunch at the end of their rotations. While everyone else stayed in their scrubs, Bron would change into a suit and tie when he joined his colleagues and residents to eat and talk politics, religion, and current events.

"You take your time eating with Dr. Bron," says Philip Orons, a DO, professor of radiology at Pitt, and former fellow under Bron. He describes him as a Renaissance man.

Bron, who in addition to his faculty position at the University of Pittsburgh served as the medical director of UPMC Presbyterian's radiology department from 1985-89, died in July.

Bron and his family moved to the United States from Germany in 1936 to escape the Nazi regime; he later earned his undergraduate degree from Columbia University and his MD at NYU. Following internship and residency training at Philadelphia General Hospital, two years stationed in Turkey as a U.S. Air Force captain, and a teaching position at Stanford University, he joined Pitt in 1964. There, Bron helped lead the shift from diagnostic to interventional angiography in the early '80s, which used X-ray imaging and dye to view blocked or narrow blood vessels.

Alongside Thomas Starzl, an MD/PhD and Distinguished Service Professor of Surgery, Bron made significant contributions to Presbyterian's liver transplantation program. In 1985, he collaborated on a study that evaluated the use of angiographic procedures to increase the survival rate of liver transplantation patients.

Like Orons, Carl Fuhrman, an MD and professor of radiology at Pitt, remembers Bron as "a gentleman in the European-type tradition," who drove a Volvo sports car and started each morning with coffee and *The New York Times*. Regarding Bron's medical work, Fuhrman says he was "truly a perfectionist in his angiography career," keeping hundreds of handwritten books on his cases.

That's why Orons, when training with Bron in 1990, was horrified when he mistakenly pulled out a wire during a several-hour-long biliary drainage. Bron simply responded: "Let's get it back in."

"He always expected top level performance from the people who worked for him, and he had the same demands on himself. His first priority was the patient under his care," Fuhrman says. "He was always very respectful, very courteous to people."

—*Brady Langmann*

VERYL MAE RILEY

AUG. 12, 1926 – AUG. 1, 2015



Riley

Although she wouldn't admit it, Veryl Mae Riley (MD '49) was always ahead of her peers. Riley skipped grades in elementary school and continued doing so all the way through her undergraduate studies at Pitt in the 1940s—when she graduated in two and a half years. At the School of Medicine, she earned her degree after three years and was one of only five women in the graduating class of 68 students.

"[Those women] were ahead of their time, without a doubt," says her daughter, Gail Riley-Wright. "[Riley] was just a standout, in her own way—not that she was trying to be anything different."

Riley died in August. She was one of two obstetricians in Warren County, Pa.—an area covering more than 40,000 residents—for 50-plus years.

Riley was known as "the mother of Warren County," making house calls in the middle of winter, delivering thousands of babies, and always answering phone calls when someone needed medical help. After her husband, George—a general practitioner with whom she opened a dual practice—died, she helped care for his patients.

Riley practiced until she couldn't get out of bed. On her last day of work, she performed three surgical assists and woke up the next morning with a pinched nerve that left her unable to walk. She was 83 then. — *BL*

IN MEMORIAM

'40s

WILLIAM M. REILLY JR.
MD '43
JULY 20, 2015

ALLAN K. BRINEY
MD '45
JUNE 15, 2015

PETER JOHN WARGO
MD '46
AUG. 12, 2015

JOHN USYK
MD '48
AUG. 18, 2015

'50s

ALBERT MEDWID
MD '51
MAY 22, 2015

CHARLES W. MASON JR.
MD '53
JULY 14, 2015

ROBERT CARL BLOCK
MD '58
AUG. 22, 2015

GROVER T. DAVIS III
MD '58
AUG. 28, 2015

'60s

DOUGLAS A. MACDONALD
MD '67, RES '74
AUG. 15, 2015

TED K. ENCKE
RES '69
JULY 27, 2015

'70s

JOCYLINE L. MEDINA
RES '70
JUNE 27, 2015

JOHN B. MARTIN JR.
MD '72
AUG. 20, 2015

RICHARD PAN PURSUES COMMUNITY IMMUNITY

BY SHARON TREGASKIS



LORIE SHELLEY

Pan speaks at a hearing of the California Senate Health Committee for his legislation SB 277, which has toughened vaccination requirements for California schoolchildren.

In the past three years, the Golden State has done an about-face. Back in 2010, California claimed some of the most lax childhood vaccination requirements in the nation; today, it has some of the toughest.

Credit the state's senator from Sacramento, Richard Pan (MD '91). Signed into law by Governor Jerry Brown in July, Pan's SB 277 legislation eliminates California's personal belief and religious exemptions. Beginning in July 2016, only children up-to-date on all state-mandated vaccinations—or those with a note from a physician noting that immunization is not safe for them—will be allowed to enroll in public or private schools. "This is the first time that a state has rolled back all of [its] exemptions," says Pan. "I'm hoping others will follow our lead."

Pan coauthored the bill with state Senator Ben Allen as last winter's measles outbreak—originating at California's Disneyland—turned local vaccination rates into a national story. "Looking at the data, those of us in the public health realm had recognized we were vulnerable," says Pan. "That became a real-life danger as measles spread across the state."

And yet, the legislative move has been far from universally popular. After a series of threats against Pan, capitol security guards began accompanying him to hearings and votes on the bill. Within days of the governor's signature, activists launched recall efforts aimed both at the senator's seat and the legislation itself. (They failed to get enough signatures.)

SB 277 was Pan's second foray into the world of vaccine legislation. As a state assemblyman—the first MD elected to California's Democratic Caucus and the first pediatrician elected to the state's legislature—he authored AB 2109, mandating a health care provider's signature on exemption forms. "That law reduced the personal belief exemption [use] by 20 percent," says the senator. "Once they had to go to the doctor to get the exemption, many just got the vaccination instead."

Pan, who turned 50 this fall, was born two years after the measles vaccine was released. Vaccinations for pertussis and polio—the latter developed, of course, by a team led by Jonas Salk, an MD, during his tenure as director of Pitt's Virus Research Laboratory—were already commonplace. By the time Pan started kindergarten, vaccines were also available for mumps and rubella. When the aspiring physician arrived at Pitt in the 1980s, vaccines were so broadly deployed, faculty couldn't imagine a resurgence of preventable childhood illnesses. In his microbiology course, recalls Pan, the textbook featured photos of a measles rash, but the professor—Julius Youngner, an ScD virologist instrumental in developing the polio vaccines, who's now Distinguished Service Professor Emeritus in Pitt's Department of Microbiology and Molecular Genetics—assured his students that, like polio, measles had been all but eradicated. "We were taught that unless we went on a mission outside the country," Pan says, "we weren't going to see some of these diseases."

And yet in his fourth year of medical school, as a trainee with the U.S. Public Health Service, Pan came face-to-face with measles. It was January 1991, and Philadelphia was in the grips of an epidemic that originated in two religious communities whose members refused both vaccines and medical care. Throughout the course of six months, more than 1,000 people were infected and nine children died.

"It was horrible," says Pan.

To make his case with fellow legislators this summer, Pan used FRED (Framework for Reconstructing Epidemiological Dynamics), a computational modeling tool from Pitt's Graduate School of Public Health that simulates disease outbreaks and allows users to compare the potential severity of an outbreak depending on whether a city has an 80 percent vaccination rate versus a 95 percent vaccination rate. "I'd pull up a colleague's city and say, *Here's what will happen in your city, in your county. Watch the dots*," says Pan.

"It was a great way to illustrate at a very direct level what would happen if we didn't get our immunization rates up." n

A FRIEND INDEED

Got the scoop on a fellow alum who's doing something great? We're all ears at medmag@pitt.edu.