

CLASS NOTES

'60s

"I can't tell you enough how Pitt made me. They even taught me how to play squash!" says **Jim Liedtke** (MD '64, Internal Medicine Resident '66). After his training, Liedtke served for two years at Wright-Patterson Air Force Base in Ohio, then completed a cardiology fellowship at Harvard before beginning a career in academic medicine. He was on the faculty at Pennsylvania State University at Hershey from 1971 to 1983, then headed cardiology at the University of Wisconsin until his retirement in 1997. "I had some bright young faculty, and it was a big thrill to see them launch their careers," he says. For the past 15 years, Liedtke has focused on wood sculpture—his work, which is influenced by ethnic art, nature, and Renaissance sculpture, has been shown in galleries and juried exhibitions across the country. His next show is at Elmhurst Art Museum (near Chicago) March 1–April 26.

'70s

Diane Sixsmith (MD '73), who was one of only four women in her Pitt med class, never experienced sexism in medical school, or even when she began her career in New York. She did, however, feel like a "second-class-citizen" for practicing emergency medicine—which wasn't even recognized as a specialty in the United States until 1979. "Most physicians talked to you like you were an idiot," she says. Everything changed in the '90s, though—thanks to, of all things, NBC's *ER*. "We were suddenly superstars and had this glamorous job." Sixsmith, clinical assistant professor of medicine at Weill Cornell Medical College and chair of emergency medicine at New York Hospital Queens, now practices in one of the most ethnically diverse areas in the world, where she runs a competitive residency program. That wasn't always the case, either. A generation ago, everyone wanted to work in Manhattan, rather than the outer boroughs; but now, she's flush with applications from young bilingual MDs looking to come home to Queens. Working in a hospital of some 100 languages is especially rewarding for Sixsmith, "a White, English-Irish-German girl from Pittsburgh," she says. "It's a wonderful experience."

'80s

Since **Christopher Harner's** (Orthopaedics Resident '86) residency days, Pitt's Orthopaedics and Sports Medicine program has exploded, he says. And he's not just talking about its current digs, the 35,000-square-foot teaching and research space at the UPMC Sports Performance Complex on the South Side. "**Freddie Fu** (MD '77, Orthopaedics Resident '82) and I run one of the top programs in the country. We have five fellows per year … and we also have a very large number of visiting fellows from around the world." Recently, Harner was named president of the American Orthopaedic Society for Sports Medicine (a position previously held by Fu). And in September, Harner was also appointed head team physician for the Pittsburgh Penguins. Soon after, he was joined by fellow Pitt orthopaedic surgery faculty members **Tanya Hagen** (Internal Medicine Resident '01, Sports Medicine Fellow '02) and **Dharmesh Vyas** (Sports Medicine Fellow '10), associate and assistant team physicians, respectively.

'90s

Sure, **Michael Bentz** (Microvascular Research Fellow '90, Plastic Surgery Resident '92) is excited about his own work. In the clinic, he focuses on plastic and reconstructive surgery for infants and children, and in his research, he studies gynecologic oncology reconstruction and intra- and extrathoracic reconstruction, as well as educational outcomes. But, as chair of plastic surgery at the University of Wisconsin, he feels the most important products of his academic efforts are his residents. He calls it the "multiplier effect." "Each well-trained resident goes out and treats many more people, and writes more papers, and does more research, and educates future generations. The impact of being a surgical educator really multiplies what I can do as an individual."



Bentz (center) and family standing in front of a glacier while on an Alaskan vacation in 2012.



Metro

There are 72 residents and 175 faculty members in the University of Pittsburgh's anesthesiology residency program. As director, **David Metro** (MD '94, Anesthesiology Resident '98) plays matchmaker. The secret to his success: seeing the program through the eyes of the resident and making sure the mentor/mentee relationship is successful and productive, he says. However, there is no law against switching mentors—or even having multiple mentors. "Sometimes, residents start off in one direction and then go in a different direction. And if that relationship isn't working [any more], you have to be willing to change and not see it as a defeat." According to his chair, John Williams, the matchmaker extraordinaire (who meshes 247 personalities) has made Pitt's anesthesiology program one of the country's best.

Throughout med school and his training, **Thomas Nickolas** (MD '98) had an interest in chronic kidney disease and the factors that cause its progression and further complicate it. For the past seven years, the assistant professor of clinical medicine at Columbia has been working with high-resolution peripheral quantitative computed tomography (HRPQCT), a new CT technology, to understand the effects of chronic kidney disease and kidney transplantation on the bones. Patients with chronic kidney disease, including those who have had kidney transplants, have a high risk of developing osteoporosis and, subsequently, fractures. "Ultimately, my goal would be to develop and study treatments that could prevent fracture in these two patient groups," he says.

'00s

After graduating from Pitt med, **Adrian Maung** (MD '00) completed his general surgery residency at Massachusetts General Hospital, then his trauma and critical care fellowship at the University of Maryland, before settling in at Yale University as an assistant professor in the trauma department. He had graduated from MIT with a mechanical engineering degree but decided he'd rather work with people. "Trauma surgery is a neat field," he says. "What is most rewarding about it is that you can see someone who is potentially very sick, think on your feet, make a diagnosis, and intervene, and many times you see improvement right away."

Having trained with Pitt's Bob Arnold, **Elizabeth Weinstein** (MD '02, Internal Medicine Resident '05, Chief

Resident '06, Hospice & Palliative Medicine Fellow '07) started her career thinking that everyone in cancer medicine appreciated how pain management and other services provided by palliative care specialists can improve quality of life. When she left Pitt, she learned that's not the case. But now, as medical director of supportive oncology at Case Western Reserve University's Seidman Cancer Center, she's spreading the gospel. "I've only been here a year and a half, and [palliative care training] is already a requirement for internal medicine residents."

"The brain is like an egg yolk inside of an egg shell," says **Summer Ott** (Neuropsychology Fellow '07). And when a concussion occurs, that delicate organ experiences drastic chemical and metabolic changes. To protect athletes from these damaging effects, Ott, along with a multidisciplinary team of athletic trainers, brain injury specialists, and physical medicine and rehabilitation specialists, helped pass Texas Senate Bill 2038, which established return-to-play guidelines. Their goal is to educate players, athletic trainers, coaches, and parents about how to manage concussion and spot the warning signs of its delayed effects. Through community-outreach programs in Texas schools, she hopes to raise awareness and help players understand the risks of returning to their sport too soon.

—Katie Martin and Elaine Vitone

MARK ALTER

THE STORY BEHIND THE STORY



Alter

At first blush, it may not seem like history and science have much in common. While the former is fixated on the past, the latter is focused on the breakthroughs of the future. But Mark Alter (PhD '98, MD '99), who holds an undergraduate degree in history from Colgate University, has found a way to marry the seemingly disparate disciplines.

"They are both hypothesis-driven fields, and I enjoy the research processes with each of them," says Alter. "In fact, there are many similarities between history and my current interest in psychology. In one field, you want to know why people did what they did, and in the other, you want to know why people do what they do."

That desire to go behind the scenes has been a constant for Alter. After completing his studies at the University of Pittsburgh, he went on to Brown University's combined residency program in pediatrics, psychiatry, and child and adolescent psychiatry. From there, he began conducting neuroscience research as a child-psychiatry fellow at Columbia University. And today, he is a faculty member in the Center for Neurobiology and Behavior at the University of Pennsylvania.

Alter's research focuses on the transcriptome, the entire collection of RNA molecules in a given cell. RNA plays an important role in putting genetic instructions into action, and, for reasons that have eluded scientists, that activity happens to a greater degree in some cells than others.

Curious to uncover the backstory of this disparity, Alter got to work.

His studies have demonstrated that transcriptome plasticity, the ability to change the amount of gene activity in a cell, is influenced by such factors as age and pharmacological agents. He hopes his work could ultimately lead to new therapeutic interventions in situations where abnormal gene-activity regulation is causing disease or problems with neurodevelopment, such as autism. *—Dana Yates*

MAA SAYS, "COME HOME"

As the new president of the Medical Alumni Association Executive Board, Brian Klatt (MD '97, Res '02) hopes to mold the MAA into a lean, mean, scholarship-fundraising machine. He's talking big galas, big-name headliners, big bucks.

But to do that, he's going to need the help of his fellow alums. Big time.

"We want to expand our executive board," he says. "We want representation from outside this institution—both locally and nationally." Or even globally, says Pat Carver, executive director of alumni relations for the University of Pittsburgh Health Sciences and newly appointed director of the MAA. "We can Skype them in or set up a phone connection." Klatt adds, "It would be nice if each class had a member sit on our board."

Klatt and Carver explain that in November, school officials restructured the 83-year-old organization to put the resources of the health sciences foundation behind it. The hope is that these resources will help the MAA to build on the successes of Susan Dunmire (MD '85), associate professor of emergency medicine, who directed the organization for the past eight years. She, Klatt, Carver, and others at the MAA are focused on supporting the students. "That's why the MAA is here," says Klatt. "The funds are solely to support the students."



Klatt

To draw alumni, MAA 2.0 will be creating more opportunities to get together—for homecoming, for medical alumni receptions, for new award programs, for the heck of it if you happen to be in Pittsburgh and hankering for a bit of coffee and conversation. The MAA office at M-200 Scaife Hall has long been a hive for students, where they're typically greeted with a smile and a cup of joe. A recent renovation makes it more comfy. "It's beautiful," says Carver. "We've got coffee plumbed in like Starbucks and new sofas. I would really like people to come, both students and alumni," says Carver.

"When you come back into town," says Klatt, "you should say, 'Is there a tailgate for the MAA? Are there going to be people I know at the game?' You should come to town thinking about the medical school. It should be fun. And," he repeats, for the zillionth time, "we should be raising a lot of money for scholarships!"

To volunteer for the board, or suggest others MAA might holler home, contact Klatt at klattbrian@hotmail.com or Carver at cpat@pitt.edu. Visit MAA at www.maa.pitt.edu. *—EV*

THOMAS E. ALLEN

JULY 2, 1919—JAN. 26, 2013

Thomas E. Allen (MD '43) was a fierce supporter and advocate for women's reproductive rights until his death in January at 93. Even before Roe v. Wade, "The Doctor of Choice" was working to establish a clinic at what is now Magee-Womens Hospital of UPMC for women who were looking for a safe place to end their pregnancies. And after abortion was legalized in 1973, Allen helped lead the charge to secure a $50,000 grant to open the Women's Health Services clinic in Pittsburgh.



Allen

Kim Evert, CEO of Planned Parenthood of Western Pennsylvania, remembers Allen as a caring physician who took the time to ensure he met every single one of the patient's needs to the best of his ability. Even after he stopped practicing, Allen remained dedicated to Planned Parenthood. "He worked for us from 2001 all the way until 2011. In his later years he still performed informed consent services for clients in Pennsylvania," she says. "He was just a wonderful person to work with. He really took an interest in [patients and staff] and got to know people individually."

Allen was also a major supporter of art and music in Pittsburgh. He chaired the board of the American Wind Symphony Orchestra for 40 years and was personally responsible for keeping the Three Rivers Piano Competition afloat financially. *—Katie Martin*

JAMES J. CORRIGAN JR.

AUG. 28, 1935—DEC. 19, 2012



Corrigan

Throughout more than 40 years in academic medicine, pediatric hematologist and oncologist James Corrigan (MD '61) never stopped teaching. After retiring from his post as dean of Tulane University School of Medicine in 2000, where he had overseen significant growth in the school and made strides in modernizing its curriculum, he became vice president of the Tulane University Health Science Center, a position he held until 2002. Corrigan resumed teaching at the University of Arizona at Tucson in 2004. He had been a founding member of the pediatrics faculty early in his career at UA, retiring in 2011. Corrigan died in December at the age of 77.

His love of educating clinicians left its mark on both institutions. Among his many honors were Pitt's Philip S. Hench Award in 1997 and a Special Merit Award for Outstanding Education, bestowed by the University of Arizona a month before he died.

"He was a master teacher who had his heart and soul in pediatrics. He was a role model for the students," says Fayez Ghishan, professor and head of pediatrics at UA. "Many went into pediatrics because of him."

His method of teaching, dubbed "Corrigan Rounds," was a mainstay.

Alan Bedrick, former mentee of Corrigan and current professor and chief of neonatology and developmental biology at UA, recalls his style of patient assessment: "There were usually four or five residents in a room, and we would present a patient's case to Dr. Corrigan, and he'd say, 'Well, I can think of maybe 20 different diagnoses already,' and the rest of us, we couldn't get past maybe three or four of them. He saw a million possibilities. He was just the consummate teacher." *—KM*

BRUCE W. DIXON

NOV. 3, 1938—FEB. 20, 2013

Bruce Dixon (BS '61, MD '65, Internal Medicine Resident '67) couldn't go anywhere without seeing someone he knew, recalls Marc Cherna, Allegheny County Director of Human Services. "If you went with Bruce to walk through the jail, every inmate would say, 'Hey, Doc.' And he'd start lecturing them. 'Does your grandmother know you're in here?'"



Dixon

Dixon, former associate professor in Pitt's School of Medicine and Graduate School of Public Health, former head of Allegheny County's STD clinic and program, and the longest-serving director of the Allegheny County Health Department, died in February while undergoing surgery. He was 74.

Francis Solano (Res '83), clinical professor of medicine at Pitt and president of Community Medicine at UPMC, was chief resident in 1984, the year Dixon ran his last biweekly rounds. He recalls how the beloved recipient of the Distinguished Teaching Award led residents through his analytical process, accurately diagnosing every case presented to him using nothing more than the patient's history and a physical exam.

"He could calculate how bad the valve was diseased based on just feeling a pulse and listening to a heart murmur," says Solano.

For the last two decades, Dixon led all air quality, environmental quality, and human health programs for Allegheny County. He organized nationally lauded programs to address health disparities, among many other public health concerns, and, in his own quiet way, fought these inequities on the ground, as well.

"I'd be out with him for dinner, and he'd get a phone call," says Cherna. "We'd go to someone's house in a distressed neighborhood, someone who was dying of AIDS, and he'd go in with his little black bag and be greeted like family. He took these calls 24/7 and never charged a dime, and nobody ever knew." *—Elaine Vitone*

IN MEMORIAM

'30s

JOSEPH NOVAK
MD '38
JAN. 22, 2013

'40s

EDWARD FALK
MD '43
FEB. 2, 2013

ROBERT LLOYD BELL
MD '47
AUG. 17, 2011

'50s

ALFRED A. PERFETT
MD '55, RES '64
JAN. 9, 2013

JOHN GRANT SHIVELY
MD '59, RES '62, FEL '64
DEC. 7, 2012

'70s

JOEL ALCOFF
MD '76
JAN. 17, 2013

FACULTY

GIBSON PACKER BUCHANAN
FEB. 2, 2013

LEONARD NAPOLITANO
JAN. 7, 2013

GERRY DOUGLAS
AHEAD OF THE PACK

BY SHARON TREGASKIS



COURTESY ARTURO LOPEZ PINEDA

In 2011, Douglas (second from right) launched the inaugural Summer Internship in Global Health Informatics, taking a team of graduate students to Lilongwe, Malawi, where they worked with Baobab Health employees on maternal and child health projects at a local hospital.

Guests no longer comment on the mounds of boxes, crammed with medical equipment, in Gerry Douglas' (PhD '09) front room. Soon after the Pitt assistant professor of bioinformatics and his wife, Thuy Bui, an MD and associate professor of medicine and medical director for Pitt's Program for Health Care to Underserved Populations, first called their Highland Park residence home, friends and family dubbed the side of the great room across from the fireplace "the warehouse."

Between a rarely played upright piano and an oft-ignored treadmill, Douglas has assembled all of the trappings of a mail-order depot: a digital scale (accurate to one one-hundredth of a pound), a collection of battered luggage from which he's removed every extraneous accoutrement, and, always, more boxes. Throughout the winter, he repacked 3,000 pounds of equipment destined for Baobab Health, a nongovernmental organization he founded with Bui in 2000 to provide data collection and management tools to the Malawian Ministry of Health.

"He's a packing machine, with skills ordinary humans don't possess," says Mary Herbert, clinic director for the Program for Health Care to Underserved Populations. "He's flat-out gifted at packing a crate to go overseas. He will get it within an ounce of the maximum allowed."

Back when he was flying more and using cargo less, he says, he knew the Pittsburgh airport check-in agents by name. They developed a routine. "They would weigh the first, and it would be 50.0 pounds; then the second, and it would be 50.0," he says. The agent would ask if the others were the same, and take him at his word. "On occasions when the airport scale showed more than 50 pounds," he says, "I'd smile and say, 'Better get that scale checked.'"

Douglas deploys the same meticulous attention to detail in all he does, whether designing a touchscreen-based electronic medical record for Baobab or managing the spreadsheet of guest arrivals and departures at the couple's home in the landlocked republic in southeastern Africa. "It's not just for myself and my family when we're there, but to facilitate experiential learning opportunities for Pitt medical students, residents, and faculty," he says. "The house is always full."

In Malawi, intermittent power, low literacy rates, a shortage of health care providers, and high patient volume have traditionally hampered data collection to inform patient care and national policy. Working within those constraints, Douglas designed a touch-screen electronic medical record system that has enrolled 1.6 million patients at 25 sites, where it's used to track lab and radiological results, as well as HIV treatment.

More recently, as director of Pitt's nascent Center for Health Informatics for the Underserved, Douglas has begun mining a decade's experience of process improvement through his work with Baobab. He wants to enhance access to health care for poor Americans. "I want to create a high-level approach to thinking about the lessons we've learned in Malawi and how we can distill its essence into a set of principles," he says. "What is the 'implementation science' of working in informatics in a low-resource setting?"

After myriad dinner table conversations with Bui, Herbert, and their colleagues, Douglas proposed a pilot project at the Birmingham Free Clinic, on Pittsburgh's South Side. "Why can't we apply the successes we've had in developing countries," he muses, "if [clinics in rural and other underserved areas] in the U.S. are experiencing the same problems?"

The vast majority of Birmingham Clinic patients are homeless and afflicted with a constellation of chronic diseases, including diabetes, hypertension, and asthma, says Herbert. "Most are on multiple medications. And our pharmacists hand-label and hand-dispense them," says Herbert. "We move 5,000 prescriptions every year with 10 regular pharmacists. How can we make that process more efficient to improve safety and handle more patients?"

Douglas proposed an elegant little labeling machine he'd successfully adapted for Baobab, complete with bar codes. "Sometimes we work with people who want to create and design things, and you get the sense that they don't really care or understand what you do," says Lauren Jonkman (PharmD '06, MPH '12), who works with students at the Birmingham Free Clinic. "With Gerry, it's really clear that he wants it to be something we'll use, that will actually solve problems."

Jonkman's observation drives to the core of bioinformatics, says Douglas. "It's not about computers, technology—it's about understanding people's problems and building technology to support them. We're trying to make people's jobs easier by helping them do things faster, with fewer mistakes." ■