Community Service
SCHOOL RECEIVES NATIONAL AWARD

WELCOME CLASS OF 2017 p. 8
NATIVE AMERICAN HEALTH p. 10
MIDDLETON SOCIETY p. 16
JANUARY 2014
Tuesday, January 14  Operation Education

FEBRUARY 2014
Friday, February 28  Winter Event, “A Taste of Wisconsin”

APRIL 2014
Friday, April 25  WMAA Board of Directors Spring Meeting and WMAA Awards Banquet

JUNE 2014
JUNE 5-7 • ALUMNI WEEKEND
Reunions for Classes of 1949, ’54, ’59 and ’64

OCTOBER 2014
OCTOBER 24-25 • HOMECOMING WEEKEND

Friday, October 24  WMAA Board of Directors Fall Meeting
Saturday, October 25  WMAA Homecoming Tailgate Party and Badgers Football Game
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**Fall on Campus (above)**

Reminiscent of a 1970s-era event, pink flamingos adorned Bascom Hill this fall to represent money raised in the campus’ Share the Wonderful campaign.

**On the Cover**

The elegant Spencer Foreman Award honors the school for stellar community service efforts in line with the Wisconsin Idea.
Society and the complex organizations that support the public good rely on visionary and effective leadership to achieve their goals. The University of Wisconsin School of Medicine and Public Health (SMPH) has been blessed with a rich and growing tradition of leaders imbued with a passionate commitment to excellence and the Wisconsin Idea.

At the Middleton Society event (page 16), we recognized one such remarkable leader, Dr. June Dahl. She has led successful efforts at the national level to advance the assessment and management of pain, including the elevation of pain assessment as a “vital sign” for all patients. Dr. Dahl joined a long line of distinguished SMPH leaders who have received our school’s highest honor—the Folkert Belzer Award—as we acknowledged her remarkable ability to catalyze change (page 17).

On page 28, you will read about the incredible generosity of Dr. Bill and Mrs. Judy Busse. A deeply respected former chair of the Department of Medicine, Dr. Busse is the principal investigator for a long-standing, vitally important series of National Institutes of Health-funded asthma studies. The couple has played a huge role in giving back to the school and its missions in a way that will surely inspire others to follow.

We are deeply impressed with faculty member Dr. Erik Brodt, who developed a vision to advance the health of Native Americans and swiftly navigated the complex sea of university requirements to create our new Native American Center for Health Professions. It promotes the development of Native American physicians and other health care professionals (page 10).

Our faculty continue to connect with people and organizations to advance health through research, education and service.

Dr. Avtar Roopra, a creative basic science researcher, has forged a remarkable partnership with the Wisconsin Dual Sports Riders (page 36), a club that works hard to support breast and colon cancer research.

The pipeline of future leaders from the SMPH continues to flow. We are proud that Patrick Brown, a student in our Medical Scientist Training Program, is the chair of the board of the Student National Medical Association (page 26). Additionally, several medical students organized a meeting with U.S. Representative Mark Pocan to advocate for graduate medical education funding. They understand the vital role that a strategically focused physician pipeline will play in advancing the health of our nation.

In late August, we welcomed our new medical students during their orientation and White Coat Ceremony. We are confident that their educational journey will be forged by outstanding teachers and peer leaders. Five such faculty members have begun their second year as student mentors (page 32).

Finally, I wrote this column in Philadelphia, where our school received the Spencer Foreman Award for Outstanding Community Service from the Association of American Medical Colleges (page 4). This award recognizes “exceptional programs that go well beyond the traditional role of academic medicine and reach communities whose needs are not being met through the traditional health delivery system.”

More than anything, this great honor is a wonderful affirmation of the outstanding work of so many of our faculty, staff, students and community partners. It is truly the Wisconsin Idea at its best.

In this season of Thanksgiving, we should reflect upon those who inspire us and lead us forward in our quest to achieve the full destiny and vision of the SMPH.

Robert N. Golden, MD
Dean, University of Wisconsin School of Medicine and Public Health
Vice Chancellor for Medical Affairs, UW-Madison
We are having an exciting fall semester in Madison, and we recently enjoyed having many alumni return for Homecoming Weekend! This reminds all of us how fortunate we are at the University of Wisconsin School of Medicine and Public Health (SMPH).

Another great class has entered our school, including students from all over Wisconsin, the United States and the world. They bring great experiences that they share to make us better.

Similarly, we enjoy hearing from our alumni as they communicate news about their great achievements and journeys and as they reflect on the value of their education at the SMPH. The Wisconsin Medical Alumni Association (WMAA) is active at the SMPH in many meaningful ways. Welcoming alumni back for Homecoming is just one of the ways we reach out.

The association plays an integral role in welcoming our incoming class of medical students. During the students’ orientation week, including the WMAA-sponsored orientation picnic, we introduced several exciting initiatives. For instance, through the generosity of many alumni donors who contributed to the WMAA’s new Stethoscope Program, we were able to give each first-year student a stethoscope.

During the stethoscope ceremony, we encouraged students to write thank-you postcards to anyone they wanted to acknowledge who has supported them to get this far in life. The response was remarkable—they wrote, and the WMAA mailed, more than 400 postcards.

Each member of the entering class also contributed a dollar or more to start growing a class fund, which will eventually become the Class of 2017 scholarship when these students graduate. The WMAA matched the students’ donations. This was a great start for this class, and we will be encouraging all classes to join this effort.

Our students and alumni are involved in many different activities this year. For instance, our fourth-year students have begun residency interviews and are reaching out to alumni through the Alumni Host program. This matches students with alumni for lodging during the students’ residency interviews. It saves the students a significant amount of money and helps them meet alumni who live in the areas they are considering for their future training. We encourage all fourth-year students and alumni to participate. It’s a wonderful way to meet the next generation of physicians!

In addition, our first-year students are enthusiastic about the opportunity to shadow physicians to get clinical exposure through the ongoing Alumni Shadow program. And on Tuesday, January 14, the Operation Education program will offer another chance for alumni to meet with our students and provide career advising.

Recently, the UW-Madison community welcomed a new chancellor, Dr. Rebecca “Becky” Blank. She brings a wealth of experience, exhibits a significant amount of vision and energy, and has great connections in Washington, DC, and throughout the country that can help our world-class institution achieve even greater heights.

These are challenging times as we compete for state and federal funding, including National Institutes of Health grants. However, UW-Madison and the SMPH have proven their abilities time and again. We have great faculty members to lead the way.

Our alumni contribute significantly in our mission to train the next generation of physicians, physician-scientists and other health care professionals to improve the health of people throughout Wisconsin and beyond.

In addition to the student support described above and the programs our students see throughout medical school, the impact of alumni support makes a difference at the SMPH and UW-Madison. For instance, new student scholarships through the Great People Scholarship Program help our students, who face an average indebtedness of approximately $140,000 upon graduation.

Through financial support of research programs, alumni make an impact by creating the infrastructure for new discoveries. Other alumni teach our students throughout our state.

You make us proud. On Wisconsin!

Pat McBride, MD ’80, MPH
President, Wisconsin Medical Alumni Association
Associate Dean for Students, University of Wisconsin School of Medicine and Public Health
At the November 16 Badger football game, SMPH Dean Robert Golden (left) presented the Spencer Foreman Award to UW-Madison Chancellor Rebecca Blank.
Community Service

SCHOOL RECEIVES NATIONAL AWARD FOR OUTREACH

Urban, rural and everything in between: the numerous outreach and community service projects and programs undertaken by the University of Wisconsin School of Medicine and Public Health (SMPH) have earned the school the Spencer Foreman Award for Outstanding Community Service. The national award is one of the highest honors among medical schools.

Robert Golden, MD, dean of the SMPH, received the award from the Association of American Medical Colleges (AAMC) at its annual meeting in Philadelphia in November 2013.

“We are absolutely thrilled and extremely proud to receive this national recognition, but more than that, we are grateful to all of our partners across the state who have made this possible,” exclaims Golden. “It’s wonderful to receive confirmation that our radical vision of becoming the nation’s first-ever school of medicine and public health has pushed forward the Wisconsin Idea in new and dramatic ways. Integrating the two disciplines has helped us develop unique approaches for diagnosing, treating and preventing illness in individuals and populations.”

He adds, “While this award acknowledges what we have accomplished to date, we also view it as a challenge. There are still important unmet needs, and we are now recommitting ourselves to our vision of elevating the health of all the people and communities in our state.”

According to the AAMC—a non-profit organization that represents all 141 accredited medical schools in the United States and 17 in Canada, and nearly 400 major teaching hospitals and health systems—the annual award honors a member institution for its major, long-standing organizational commitments to addressing community needs that are not being met through traditional health delivery systems.

“AAMC is proud to continue the legacy of Dr. Spike Foreman by recognizing medical schools and teaching hospitals that are elevating the health of local and global communities,” says AAMC President and CEO Darrell Kirch, MD. “We congratulate the University of Wisconsin School of Medicine and Public Health for its transformative community partnerships and programs, which have enhanced the health of people in Wisconsin and beyond.”

Elizabeth Petty, MD ’86, senior associate dean for academic affairs at the SMPH, explains, “Our educational programs are fully committed to addressing health disparities in both rural and urban communities throughout Wisconsin. To really attack health disparities and prevent issues upstream, rather than focusing only on diagnosing and treating diseases in the clinic and hospital, it’s important for our students and faculty to not only work with individual patients, but also to work closely with community populations and organizations to figure out how to improve health in ways that will make a lasting impact within those communities.”

For instance, through current fourth-year preceptorships, SMPH students spend six weeks in one of multiple locations throughout the SMHP’s statewide campus. This immerses students in a community-based clinical environment and in a one-on-one relationship with a physician mentor. By working with community members and health systems personnel, they gain an intimate understanding of community health issues and resources, as well as insights into the relationships between clinical care, public health and community health. Developed in 1926, this preceptorship model was the first such U.S. program created in response to national recognition that medical students learn best by applying the science of medicine in community settings. With ongoing curriculum improvement initiatives, the SMPH is committed to providing robust opportunities for students to train with physicians and other health care professionals in diverse communities.

Golden notes, “People in organizations across Wisconsin created the substance that led to this award—including those at our academic campuses in La Crosse, Marshfield...”
and Milwaukee, and community leaders like Sharon Adams of central Milwaukee’s Walnut Way. This award is a confirmation of the efforts of all of our wonderful statewide collaborations.”

Walnut Way Conservation Corporation is a non-profit neighborhood organization founded by community residents in 2000. With its headquarters located in a carefully renovated, formerly infamous drug house, the organization provides a hub for youth, families, elders, homeowners and renters to participate in community development.

At Walnut Way, SMPH faculty and staff engage in population-based health projects such as promoting and providing health education for children and adolescents.

A co-founder and director of programs there, Adams says, “I think the impact of working with medical faculty and medical students has heightened the awareness of what it requires to live a healthy life. I think talking to such authority figures has made residents feel empowered because they are taking some initiative for their own health. The people at the SMPH know how important it is to be in communities.”

This center exemplifies partnerships forged through the school’s TRIUMPH (Training in Urban Medicine and Public Health) Program, which is integrated with clerkships in Milwaukee. TRIUMPH prepares third- and fourth-year medical students to become physician leaders with skills to promote health equity in disadvantaged urban communities.

In the Madison area, underserved communities benefit from student-run programs, such as seven free MEDiC clinics. These clinics hold more than 20 sessions each month. They aim to improve the health of patients in need and to educate UW-Madison health professions students.

During MEDiC clinics, students from the MD, Physician Assistant and Physical Therapy Programs, and the UW Schools of Pharmacy and Nursing, form interprofessional teams, encouraging the exchange of information and an appreciation of students’ varied skill sets as they work together with health professionals.

It’s a winning combination: Student volunteers have the opportunity to put their knowledge and skills into practice, faculty have a unique and rewarding teaching experience, and individuals in need receive health care services. Physicians and health professional students work together with community partners to bring the Wisconsin Idea to life and influence people’s lives beyond the classroom. The collaborative nature of MEDiC’s cross-discipline learning model lays a foundation that will continue throughout the students’ careers.

Michael Wauters, a fourth-year SMPH medical student, says, “The MEDiC clinics provide an opportunity for student volunteers to get into communities they otherwise might not see. The students work with people who are facing significant challenges to their health, and the students learn firsthand about some of the social determinants of health.”

Second-year medical student Surbhi Singhal shares, “By getting experience in building strong relationships with communities early in medical school, we can guarantee that our physicians will continue to do this all the way through their career.”

Looking out for another underserved group, the school’s WARM (Wisconsin Academy for Rural Medicine) Program has a goal to increase the number of physicians in rural Wisconsin and improve health in these areas. It is a collaboration among UW-Madison; Marshfield Clinic, Marshfield; Gundersen Lutheran, La Crosse; Aurora Health Care and Bay Care, Green Bay; and rural satellite clinics. Students spend the last two years of medical school at one of these locations. WARM has allowed the SMPH to increase its class size by 25 students per year by admitting to the program those who intend to practice rural medicine.

The TRIUMPH and WARM Programs embody the Wisconsin Idea by supporting advances in knowledge for the common good in collaboration with statewide communities. They also both have been successful.

On every Match Day since 2011, students in the WARM Program have learned their residency locations. For the 33 students who have graduated from WARM in 2011 through 2013, 67 percent have matched into primary care.

Liz Corey (left), a fourth-year SMPH medical student in the TRIUMPH Program, works with Tyler Weber, a UW Population Health Institute fellow, at the Walnut Way Conservation Corporation in Milwaukee.
care residencies and 64 percent have matched to residency programs in Wisconsin. These percentages are much higher than medical students in the SMPH's traditional curriculum, reflecting the commitment of WARM students to meet health care needs in Wisconsin.

In 2011 and 2012, the first TRIUMPH graduates all entered residencies serving urban, underserved populations, and a majority selected primary care careers.

Petty notes that community partnerships, in addition to being very important for training future health care providers, are critical for the SMPH's research mission, which seeks to improve the health of people of Wisconsin and beyond through the discovery process.

"The school allocates funds for community research through a program called the Wisconsin Partnership Program," explains Richard Moss, PhD, senior associate dean for basic research, biotechnology and graduate studies. "Through our investigators' research and observations, we identify problems in our communities, and ultimately, we award grants to address those problems."

The Wisconsin Partnership Program advances public health statewide through research, education and partnerships. Funding comes from the endowment that was created in association with the conversion of Blue Cross & Blue Shield United of Wisconsin to a for-profit corporation. It advances health improvement through community-academic partnerships, training public health practitioners and exploring determinants of health and disease. Its founding principle is that successful research and interventions depend on engaging communities as partners.

This program has provided more than $129 million in grants since 2004 for programs and initiatives that encompass community-academic partnerships. For instance, it provided startup funds to establish the WARM Program.

According to Patrick Remington, MD '81, MPH, associate dean for public health, "The efforts of the Population Health Institute are nationally recognized for engaging communities using novel approaches such as the Wisconsin Population Health Service Fellowship Program, the Healthy Wisconsin Leadership Institute and the Evidence-Based Health Policy Program."

The UW Population Health Institute established the County Health Rankings, a system that assesses health and health care for counties across Wisconsin. Through a substantial grant from the Robert Wood Johnson Foundation, the program expanded to rank all counties across the United States.

"The remarkable aspect of the ranking system is the impact it has had on local communities as they think about health and health care," says Moss.

Residents and health care professionals in Juneau County, Wisconsin, found themselves thinking about just that.

According to Barb Thesis, a health officer for that county, "We received our county health rankings, and we were the unhealthiest county in the state. But, we turned it around. We challenged ourselves, and we are now moving forward. None of this could have happened without the County Health Rankings."

Another SMPH program—supported by the Wisconsin Partnership Program—is the Survey of the Health of Wisconsin (SHOW). The organization's research infrastructure includes an annual statewide survey that examines Wisconsin's health and provides opportunities to support targeted ancillary and community-based studies.

Researchers travel to more than 60 communities to gather data from residents on myriad health conditions, health care access and utilization to provide a complete picture of state residents' health. The program’s novel health data serves as a primary resource for researchers and stakeholders, including public health practitioners and policymakers.

SHOW is used to evaluate interventions, set priorities, plan programs and assess state health plan objectives. Data and biosamples are available to researchers and stakeholders. It is modeled after the Centers for Disease Control and Prevention's National Health and Nutrition Examination Survey, which has provided key information about the nation's health for more than 40 years. Wisconsin is the first state with a health survey of this magnitude and scope.

The school's National Institutes of Health-funded Institute for Clinical and Translational Research has created several unique programs that engage communities and significantly improve the health of the people of Wisconsin and beyond. For example, its Collaborative Center for Health Equity works with rural and urban partners to build mutually respectful collaborations to increase health equity and improve health outcomes.

Noting that many more examples of community-based programs exist at the SMPH, Golden and Petty agree that forming such partnerships is not only a good thing for the school to do, it’s the right thing to do.

Together with colleagues and statewide partners, they cheer, "On Wisconsin!"
Symbolism played a large role in the orientation week activities for the 175 new medical students at the University of Wisconsin School of Medicine and Public Health (SMPH).

Students got fitted for white coats, and each received a gift of a stethoscope sponsored by an SMPH alumni donor (see page 14). Accompanying notes revealed the donors’ names.

New classmates high-fived each other and mingled at the Wisconsin Medical Alumni Association-sponsored new-student cookout.

Twins Molly and Katie Peterson (pictured in foreground above, left to right) shared the excitement of orientation week. From Brookfield, Wisconsin, the pair completed their undergraduate degrees at UW-Madison. They enjoy all that Madison has to offer, including “running on Picnic Point, watching sunsets from the Memorial Union terrace, jumping around at Badger games, and most of all, interacting with
the thoughtful, passionate people we have met here," says Molly.

Katie adds, "The UW School of Medicine and Public Health is a remarkably supportive community that truly cares about the people it serves. When we learned that we both were accepted to our first-choice medical school, the decision to stay together was simple. I wouldn’t be where I am today if it weren’t for my sister’s support, and I’m excited to begin this new chapter of life with her by my side."

Despite their many new experiences, all of the first-year students likely will not forget the day—August 25—when they donned their new coats at the White Coat Ceremony. It is among the most important events in a medical student’s four-year experience. As another symbol, each coat contained a note from a Wisconsin physician who sponsored it.

SMPH Dean Robert Golden, MD, presided over the ceremony, and Richard Page, MD, professor and chair of the Department of Medicine, shared pearls of wisdom through his talk, “White Coat, Black Bag.”

By reading the Student Code of Medical Ethics, the new class members confirmed their responsibilities and commitments before an audience of patients, faculty, community members and fellow students. They concluded the week as the Class of 2017.
Left to right: Erik Brodt, Bret Benally Thompson and Katie Cannon are members of the NACHP Advisory Council.
Native American Health
NEW CENTER SUPPORTS NATIVE STUDENTS AIMING TO ENTER HEALTH PROFESSIONS

Wisconsin boasts the nation’s largest number of Native communities east of the Mississippi River. “Whether they are rural, urban or reservation tribal communities, a tremendous number of very rich and vibrant cultures call Wisconsin home,” says Erik Brodt, MD, assistant professor in the Department of Family Medicine at the University of Wisconsin School of Medicine and Public Health (SMPH). “Because this richness exists here, it seems ideal to develop programs that will further strengthen these ties.”

Although 86,000 Native American people live in Wisconsin, this population is poorly represented in the health professional workforce. The service gap for Native communities is wide. “There is a strong need for Native doctors,” explains Bobby Kagigebi, a fourth-year SMPH medical student who grew up between the Lac Courte Oreilles Band of Ojibwe in Hayward, Wisconsin, and the Ho-Chunk Nation in Wisconsin Dells. “While working at the Ho-Chunk House of Wellness Clinic this summer, I saw firsthand how Native doctors were able to create a cultural connection with their patients that promoted trust and improved their health.”

Of the 48 Native physicians in Wisconsin, including residents and attending and retired physicians, only three are practicing medicine in a tribal community. The remainder practice in communities with low Native population density. It’s no secret that in Wisconsin’s County Health Rankings, six of the bottom 10 counties contain Native communities, and the one with the worst health disparities in the state also has the highest percentage of Native Americans.

“It seems that we will be able to make a significant impact on Wisconsin’s needs if we train local students and work with Wisconsin tribal communities and organizations to develop programming that encourages Native students to become health professionals,” says Brodt, director and founder of the SMPH’s new Native American Center for Health Professions (NACHP).

Through the center, Brodt’s targeted approach is well underway. By mentoring and offering development activities, it supports Native students who are looking to pursue health professions.

Native students have been coming together on campus in less formal ways for some time. In 2011, students earned a charter status as part of the Association of Native American Medical Students (ANAMS), in part due to the leadership of Josh Sayler, a fourth-year SMPH medical student who, at the time, was a member-at-large of the ANAMS national organization. A gathering place for students existed by December 2012 when the UW granted the NACHP its official center status. The formal center is strengthening connections and increasing opportunities for those involved.

For instance, the NACHP regularly sponsors students’ participation in conferences held by the Association of American Indian Physicians (AAIP).

Sayler—now completing an intensive care rotation at Meriter Hospital in Madison as part of an internal medicine subinternship—credits the connections he’s been able to make with other Native

—Continued on next page
medical students to the opportunities like conferences that his mentors have made available.

Similarly, Kagigebi has attended several workshops in Santa Fe, New Mexico, related to incorporating the roles of traditional medicine into western medicine.

“At these workshops, traditional American Indian healers from all across the country present topics, but most speakers come from the West and Southwest,” Kagigebi explains. “They share perspectives on health and disease and how to apply that to western medical school training. These talks have enhanced my worldview and given me a stronger cultural understanding of how health care works in Indian communities and how to approach various subpopulations. The conferences provide great opportunities to network with doctors and medical students from throughout the United States.”

In addition, internships and electives are available for students. Sayler landed a coveted subinternship at the University of Texas, MD Anderson Cancer Center in Houston. His preparation, paired with a NACHP opportunity, allowed him to get gynecologic oncology training as a fourth-year visiting student.

“The NACHP provided me with the opportunity and a scholarship to participate in the subinternship,” says Sayler. “MD Anderson Cancer Center’s amazing gyn-onc program provided an eye-opening experience to see how a place like that runs. The center cares for patients from literally everywhere across the globe. The breadth of patients’ illnesses, diagnoses and complications, as well as treatments and clinical trials, was striking. A rotation like this is something so few medical students are fortunate enough to be part of, and the NACHP gave me the inroads to attend and succeed. Now that I’m going through the interview process for residency positions, this rotation is one part of my application that reviewers continually mention.”

During the rotation, Sayler worked closely with Amanda Bruegl, MD, currently a clinical fellow in gynecologic oncology at MD Anderson Cancer Center.

“It was a wonderful experience to work with such a powerful American Indian role model and future leader in my chosen field,” he says.

“Coming from Fort Berthold Indian Reservation in North Dakota, American Indian role models in medicine have been few and far between, so to have a mentor like her in obstetrics and gynecology has, perhaps, been one of the best parts of my medical education,” Sayler notes.

Bruegl, a graduate of the UW Hospital and Clinics Obstetrics and Gynecology Residency Program, also is a NACHP Advisory Council member.

“Without NACHP having inroads at MD Anderson Cancer Center via Dr. Bruegl, the subinternship likely would not have happened,” shares Brodt. “That’s
a competitive environment for a medical student to get into, and Josh’s experience will help him significantly as he applies for residencies.”

Sayler’s time at the internationally renowned center exemplifies how NACHP is making an impact. Subinternships like this are part of a broad goal to further develop Native students to give them the best chances of matching into competitive residencies.

Kagigebi, who is in his fourth year of medical training, is preparing for family medicine residencies. Having always liked the idea of caring for children and adults, he thinks he will enjoy seeing a variety of patients, as opposed to specializing in a body part or patient population.

“I’m not sure if I’ll end up working directly for my tribe, but I hope to stay in Wisconsin and have a positive impact on Native American communities in the state,” Kagigebi adds. “I think other Native students feel the same way, while some know they want to go back to their home communities.”

Sayler is specializing in obstetrics and gynecology. The son of a cattle rancher, he thinks it might be nice to return home after his residency and hopes to practice medicine in a community where he can serve Native American patients.

As luck would have it, Sayler completed his third-year obstetrics and gynecology rotation in Green Bay, Wisconsin, with the Oneida reservation literally next door. Working in a fairly small hospital afforded him ample hands-on experience, and his first experience there sealed his desire to serve Native communities.

“During the rotation, I was able to perform deliveries with supervision from the attending physician,” he exclaims. “The first baby I delivered was a son for a young American Indian patient. This made it all the more special for me. I love this specialty, and I want to work with and take care of this population.”

Following in the footsteps of these medical students, the SMPH’s Class of 2017 includes one of the highest numbers of Native Americans in the school’s history.

Reflecting on the significant reach and impact of the center on those with a vested interest, Brodt shares, “That represents the coordinated efforts undertaken by the Native doctors, Native medical students and supportive community at the UW and in the UW School of Medicine and Public Health.”

The NACHP Advisory Council

The Native American Center for Health Professions (NACHP) includes an advisory council of 14 health care providers. Twelve physicians and two physician assistants comprise the group.

“We’ve received incredible support and interest in the council,” says Erik Brodt, MD, NACHP director. “We will undoubtedly continue to grow.”

Members of the NACHP Advisory Council represent a variety of tribal communities. Affiliations include:

- Anishinaabe, White Earth Nation
- Brothertown Indian Nation
- Cheyenne River Sioux Tribe
- Ho-Chunk Nation
- Lac Du Flambeau Tribe of Lake Superior Chippewa Indians
- Menominee Nation
- Northern Cheyenne Nation
- Oneida Tribe of Indians of Wisconsin
- Six-Nations, Mohawk
- Stockbridge-Munsee Band of Mohican Indians
- St. Croix Chippewa Indians of Wisconsin

Native health care professionals who are interested in joining the NACHP Advisory Council are welcome to contact the center at nachp@hs1c.wisc.edu.
A symbolic gift often extends beyond its monetary value. Such is the case with a gifting program introduced this fall by the Wisconsin Medical Alumni Association (WMAA). When the 175 new medical students came to the fitting session for their white coats, each received the gift of a stethoscope, along with a card bearing the donor’s name and class year.

This often-used tool of the medical profession will be a continual reminder that an alumnus or alumnae from the University of Wisconsin School of Medicine and Public Health (SMPH) made an investment on the student’s behalf.

The Stethoscope Program supports the WMAA’s goals by making a meaningful alumni connection with those embarking on their medical training.

“When possible, we partner students who receive the stethoscopes with alumni who share common interests, to aid in the students’ career exploration,” explains Karen Peterson, WMAA executive director. “Ideally, each student and alumnus or alumnae pair will be able to meet independently or through WMAA events.”

For a gift of $150, a donor can sponsor a stethoscope and one year of WMAA-organized events for a first-year medical student. A donation of $500 gifts a stethoscope plus supports one student for all four years of WMAA-sponsored events.

As a pilot program, this year’s stethoscopes were sponsored by a core group of alumni, including WMAA board members, with additional support from the association.

“Going forward each year, as about 175 alumni sponsor a stethoscope—a meaningful tool with lasting value—
it will help new students make an instant connection to others who have benefited from experiences at the SMPH,” she shares. “Alumni are a wonderful resource for our students in many ways.”

She adds that because the cost of sponsoring a $150 stethoscope may fit in younger alumni’s budgets, the association is reaching out to class members who are approaching their five- and 10-year reunions to sponsor a student by purchasing a stethoscope.

As an incentive, each donor who sponsors at the $500 level will have the opportunity to connect with his or her student during Homecoming Weekend, as well as at the annual spring ice cream social and, eventually, the student’s graduation ceremony.

“Now is the time to plan a donation for next fall’s entering medical students,” notes Peterson. “It’s never too early to start thinking about Homecoming!”

Opposite page: Using her new stethoscope, Karen Flores Rosario checks Bucky Badger’s heartbeat. This page, clockwise from upper left: Benjamin Mixis donates to the Class of 2017’s new class fund; Rajitha Kota writes a thank-you note to someone who has made a difference in her life; Dan Jackson, ’03, (left) gives a stethoscope to Karyn Ceece; and Joel Prince (left) meets Steve Merkow, ’80, who sponsored Prince’s stethoscope.
To honor the University of Wisconsin School of Medicine and Public Health’s (SMPH) vital community of supporters, the school and the Wisconsin Medical Alumni Association host the annual Middleton Society event. In September, “An Evening of Appreciation” provided opportunities for students, faculty and donors to mingle at Madison’s iconic Monona Terrace.

SMPH Dean Robert Golden, MD, noted, “The Middleton Society represents our most loyal friends and supporters, and this event is our opportunity to thank you for your commitment to the SMPH and for your generous support of our work.”

Golden added, “Without your support, we would be known as a good school, but with your support, we will continue to be exceptional.”

This support allows the school to retain its most important faculty; recruit the best and brightest individuals from around the world; provide much-needed financial relief for students who are making a significant investment in their education; aid in cutting-edge research; and build facilities that house scientists and their laboratories, where medical breakthroughs take place, he said.

Many students were eager to highlight their work in the school’s Medical Scientist Training Program (MD/PhD), MEDiC (student-run free clinics), Institute for Global Health, Master of Public Health Program and Shapiro Summer Research Program, among others.

“It was an honor to discuss MEDiC with donors, many of whom personally knew Dr. Ted Goodfriend, the program’s founder,” shared second-year medical student Meagan Ladell. “I hope I will be able to contribute as much to the medical profession as the people I met at the Middleton Society event.”

Mario Ademaj, a second-year medical student, noted, “The physicians and their family members are truly remarkable.
Belzer and Bardeen Awards

At the Middleton Society event, SMPH Dean Robert Golden, MD, presented the Folkert Belzer Award to June Dahl, PhD, professor in the school’s Department of Neuroscience.

Golden described the award as recognizing Dahl’s lifetime achievements. It also honors the quality and significance of her academic impact, demonstration of excellence and value to the school. The award is intended to recognize an individual who may be regarded as an “unsung hero” because of contributions extending over a prolonged period, as opposed to a singular academic achievement, he noted.

Dahl spent several years in basic science research before directing her attention to pain management. She was the chair of the Wisconsin Controlled Substances Board and assisted with development of model guidelines for the use of opioid analgesics by the Federation of State Medical Boards. For more than 20 years, she directed a network of state-based organizations aimed at pain relief. She has been involved in many educational and quality improvement efforts to make pain management a national priority. Dahl’s work with the Joint Commission resulted in pain assessment and management becoming part of the standards used to accredit the nation’s health care organizations.

Also at this event, several students received the Charles Bardeen Award, which recognizes fourth-year medical students who embody a combination of characteristics of outstanding physicians. The winners are Jennifer Ciske, Luke Lopas, Parker Hoerz, Lynn Frydrych and Michael Wauters.

I enjoyed learning about their inspiring backgrounds and hearing stories of their journeys in medicine.”

Keynote speaker Paul Sondel, MD, PhD ’75, described efforts to immobilize the immune system to cure pediatric cancer. A world leader in pediatric oncology research at the UW Carbone Cancer Center, he is the Reed and Carolee Walker Professor in Pediatric Oncology at the SMPH (see article on page 22). Sondel also introduced his former patient, Kelly Cotter, who shared the story of her diagnosis and treatment for acute lymphoblastic leukemia 25 years ago (see page 23).

As the evening wrapped, Golden encouraged Middleton Society members to take time to visit SMPH facilities, faculty members and students who benefit from the society’s support.

“This is an exciting time in our school’s history,” he concluded, “We want you to have the best seats in the house as witness to the tremendous progress we are making.”
Lyndsey Runaas has been selected for the Hematology Opportunities for the Next Generation of Research Scientists (HONORS) Award by the American Society of Hematologists (ASH). She is one of 11 residents and 19 medical students selected for the award, which encourages North American medical students and residents who have a demonstrated interest in conducting hematology research but who have not yet entered a training program to pursue a research career. Runaas recently completed a hematology residency in the Department of Medicine at the University of Wisconsin Hospital and Clinics, Madison, and became a clinical instructor at the UW School of Medicine and Public Health (SMPH). Through the award, she will receive a $5,000 stipend to conduct research for three months in the SMPH Department of Medicine. She also will receive $1,000 per year for two years to attend the ASH annual meeting and help it establish a support system through interactions with hematology researchers.

Sixteenth Street Community Health Centers in Milwaukee, Wisconsin, welcomed Brian Hilgeman as a board-certified internal medicine physician this fall. In 2006, as an AmeriCorps member, Hilgeman served the center’s Chronic Care Program team by providing education and support for patients with diabetes. During his medical training, he came back to the center as a participant in the SMPH’s Training in Urban Medicine and Public Health (TRIUMPH) Program and worked with the asthma team to design an approach for treating tobacco dependence.

Teresa Diaz Gendy (’09) is completing her last year of a radiology residency at Loma Linda University in Loma Linda, California. She also participates in a CrossFit team (see photo above), the CDR Redlands, which took second place at the Southern California Regionals. The team qualified for back-to-back CrossFit Games in 2012 and 2013, competing against elite teams from around the world. She and her husband, George Gendy (’07), stay active together, and he cheers her on at competitions. He enjoys volunteering, traveling and playing basketball, soccer and racquetball. An orthopedic surgeon, he practices with Disorders of the Foot and Ankle, in La Jolla, California. They reside in Temecula, California.

Lee Faucher received the 2013 UW Hospital and Clinics Presidential Physician Leadership Award. He was nominated for his commitment to the community, as well as his leadership and commitment to clinical excellence, as shown by the elevation of the clinical care experience by the trauma and burn services team under his leadership.
James Kimmey, Jr., received the 2013 Grantmakers in Health’s Keenan Leadership Award in Health Philanthropy, which honors innovation, achievement, creativity and boldness. Kimmey is the founding president and former CEO of the Missouri Foundation for Health in St. Louis. He began at the foundation in 2001 with no office, staff or funding strategy and built it into the largest health-focused grant maker in the state, awarding $50 million annually. Now retired from the foundation, Kimmey is a professor emeritus and executive-in-residence at St. Louis University’s School of Public Health, also in St. Louis.

EDITOR’S NOTE
The summer 2013 issue incorrectly listed Stanley Phillips III as an MD in his obituary, when in fact he held a DO degree. We regret the error.

Terry Oberley, MD, PhD, professor in the Department of Pathology and Laboratory Medicine at the University of Wisconsin School of Medicine and Public Health (SMPH), passed away on October 15, 2013, at age 67. He is survived by his sons Matt (Kahn) and Alexander.

In 1974, Oberley joined the UW as a pathology intern and went on to complete residency and fellowship programs at UW Hospital and Clinics and the SMPH. In 1977, he was appointed as an assistant professor and progressed to professor in 1991. He also held an appointment at the William S. Middleton Veterans Memorial (VA) Hospital in Madison and, in 2011, received the VA Research Lifetime Achievement Award.

Over the years, he has served as director of electron microscopy and as interim chair and vice chair of the Department of Pathology. Oberley was also a member of the UW Carbone Cancer Center Experimental Therapeutics scientific program.

Oberley was a consummate physician-scientist with an unsurpassed passion for his research on free-radical biology in cancer. Despite suffering from chronic renal failure necessitating dialysis throughout his entire professional life, he rarely missed a day of work. He mentored numerous graduate students and postdoctoral and pathology trainees, many of whom now fill academic positions throughout the country.

Details of Oberley’s career appeared in the winter 2012 Quarterly.

IN MEMORIAM*

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<td>Leroy Misuraca ’45</td>
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<td>George “Toby” Theiler ’53</td>
<td>August 17, 2013</td>
<td>Tomahawk, Wisconsin and Alamo, Texas</td>
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<td>Dale H. Mann ’56</td>
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<td>Leroy A. Krueger ’64</td>
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<td>David M. Huibregtse ’81</td>
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<td>Gene Farley, emeritus professor</td>
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* Now arranged by class year.

HONORING OBERLEY’S PASSING
I did my residency and fellowship at the University of Michigan Kellogg Eye Center in Ann Arbor. I practice in a private glaucoma specialty group, Glaucoma Consultants Northwest, in Seattle. We are associated with Swedish Hospital.

I always thought I would go into primary care. I enjoy working with patients with chronic diseases and the continuity of the patient-doctor relationship. My third-year rotation on ophthalmology changed my mind. I loved the intricacies of the examination and the delicate surgery. Luckily, as a glaucoma specialist, I get the best of both worlds because I treat ophthalmic chronic disease.

I primarily care for patients who have advanced glaucoma and require surgical intervention. This population tends to be elderly, although occasionally we see a “young” patient under age 65. I also perform cataract surgery.

My first trabeculectomy (a glaucoma filtering procedure) case as a practicing physician stands out as memorable. The patient was a sweet French woman in her late 80s who had avoided surgery for more than 30 years by using four drops a day and taking a pressure-lowering pill. Her eye pressure went up suddenly, and her glaucoma doctor was heading out of town for a month. He handed me the chart. She had many risk factors for a poor outcome due to her age, her use of anticoagulants and her eye anatomy. The surgery went well in both eyes, and now she is off all of her medications and is a very happy patient.

Ophthalmology is a specialty that offers a great mix of clinical care and surgery. It also has frequent, exciting innovations to keep you on your toes.
I practice at Eye Clinic of Wisconsin in Wausau. I completed a residency at University of North Carolina at Chapel Hill and a surgical vitreo-retina fellowship at Barnes Retina Institute, which is combined with Washington University in St. Louis, Missouri.

I mostly care for vitreo-retinal diseases, such as age-related macular degeneration, diabetic eye disease, vein occlusions, retinal tears and detachments, epiretinal membranes and macular holes. I spend three days a week in clinic and one day a week in the operating room. During residency, I took care of a farmer who had a nail sticking out of his eye when he presented to the emergency room. After two surgeries, he was able to see 20/20.

Ophthalmology is one of the few medical fields in which your decisions for patients are not disputed by physicians in other fields. Since the exam skills are not taught in medical school, other specialists trust the ophthalmologist’s exam without challenging the assessment and plan. This is true even in residency. During residency, I often spoke directly to the patients’ attending physician without him or her challenging my assessment.

In terms of retina, vitreoretinal surgeons learn most surgical procedures in the ophthalmic field and are often the last line. Thus, most of my patients are complex and challenging, but still can be treated, often with good results.

If you have an interest in a discipline that combines medicine and surgery, then ophthalmology is perfect. This field is diverse and rewarding.

Following my third-year ophthalmology rotation with Burton Kushner, MD, at the University of Wisconsin Hospital and Clinics, I decided to pursue ophthalmology, and specifically, pediatric ophthalmology. This field combines aspects of medicine that I love, including clinic and surgery, serious medical conditions, a twist of silliness during eye exams and the ability to work with patients of all ages.

I completed my ophthalmology residency at St. Louis University in St. Louis, Missouri, and my pediatric ophthalmology and strabismus fellowship at Indiana University in Indianapolis. I am an assistant professor of ophthalmology in that residency program and am involved in medical education. We train two fellows per year and provide education for the ophthalmology residency program (six residents per class), non-ophthalmologic residents and medical students.

Working at a university allows me to handle routine and complicated pediatric ophthalmology and strabismus. Some of the routine conditions are blocked tear ducts, eye misalignments (strabismus) and lazy eye (amblyopia). Examples of the complicated conditions are congenital cataracts and glaucoma, orbital and ocular tumors and retinopathy of prematurity.

One of my most memorable patients was an 11-month-old boy who had congenital glaucoma. By using new technology and a new procedure, we successfully treated both eyes with one surgery. I have watched him change from a cranky child in pain to a delightful, happy 5-year-old child. He has excellent vision in both eyes and no longer needs glasses or eye drops. At this point, I see him leading a completely normal life.

I encourage students to consider entering pediatric ophthalmology if they enjoy interacting with children and adults and being in the operating room and clinic. With no pun intended, ophthalmology is very visual. You identify a problem and fix it. That type of rapid evaluation to treatment can be very rewarding.
An Innovative Career
PAUL SONDEL, MD, PHD ’75
Y

ears of hard work are sandwiched between where Paul Sondel, MD, PhD ’75, is today and his humble beginnings in the medical field—washing test tubes.

This fall, more than 800 former pediatric cancer patients who received care at the American Family Children’s Hospital and University of Wisconsin Carbone Cancer Center (UWCCC) and their family members attended the Kids with Courage survivors’ reunion. They were hopeful as Sondel and others described recent advances in immunotherapy, which can target cancer cells without harming healthy tissue.

Despite Sondel’s extensive background in genetics and tumor immunology, as well as his multifaceted title—the Reed and Carolee Walker Professor in Pediatric Oncology at the UW School of Medicine and Public Health (SMPH), head of the SMPH Division of Pediatric Hematology, Oncology and Bone Marrow Transplantation and member of the UWCCC—he can explain in very simple terms the complex work he and his team do with immunotherapy, so patients and families can easily envision the process.

Simply stated, in the past five years, the team’s research has contributed to dramatic change in the treatment for neuroblastoma, and, in turn, the survival rate for children with this high-risk disease. With other treatments, before immunotherapy was possible, these children faced a 40 percent chance of survival. Immunotherapy treatment has boosted the survival rate to 60 percent.

Sondel’s team discovered that giving monoclonal antibodies that bind to neuroblastoma will attract white blood cells to the tumor and destroy cancer cells that remain after the traditional treatments of surgery, radiation and chemotherapy. The white blood cells are stimulated with activators, including interleukin 2 (IL-2).

These achievements with immunotherapy have attracted national attention. The highly regarded organizations Stand Up to Cancer and the St. Baldrick’s Foundation have named Sondel’s team to join six others in order to form the only pediatric cancer “Dream Team” in North America.

“The other six pediatric oncology research teams are located at the National Cancer Institute and the Universities of Pennsylvania, Baylor, Washington, British Columbia and Toronto,” says Sondel, noting that each has a specific role in finding breakthroughs in childhood cancer treatments.

Sondel’s team—which includes Ken DeSantes, MD; Christian Capitini, MD; Mario Otto, MD, PhD; Peiman Hematti, MD; Alexander Rakhmilevich, MD, PhD; and Jacquelyn Hank, PhD ’78—will receive $340,000 per year over four years to advance the study of immunotherapy.

In the overall care of children with cancer and related disorders, they work closely with the other faculty in his division: Carol Diamond, MD; Diane Puccetti, MD; Margo Hoover-Regan, MD; and Neha Patel, MD.

“This work is critical because research is at a crossroads,” says Sondel. “We have made strides in understanding the biology of cancer, but have not yet revolutionized therapies. The Dream Team collaboration brings together the fields of genomics and immunotherapy to accelerate development of novel cancer therapies that have fewer side effects than current treatments.”

Among other things, the Dream Team grant will help fund the next phase of Sondel’s immunotherapy research. One approach being pursued in the lab uses a genetically engineered antibody, linked to IL-2; the team will inject it directly into tumors. In addition, researchers will add a separate treatment, called “checkpoint blockade,” to try and boost the white blood cells that are already reacting against the cancer.

Sondel’s thirst for understanding tumor immunology and his deep commitment to improving survival rates for patients with childhood cancer hail to his undergraduate, premedical genetics work at UW-Madison.

“When I was a sophomore in 1969 and had a job as a janitor in the dorms, I began knocking on laboratory doors looking for a lab job,” recalls Sondel, a native of Milwaukee, Wisconsin, who loves many things about Madison, including canoeing its lakes and rivers when he can find the time.

“I was really fortunate that Fritz Bach offered me an entry-level job washing test tubes.”

Fritz Bach, MD, who led the world’s first bone marrow transplants when teams at the

Former Patient Joins the Cause

A Madison native who attended UW-Madison for her undergraduate and law degrees, Kelly Cotter is a lawyer and cancer advocate.

In 1988 at age 11, Cotter was diagnosed with acute lymphocytic leukemia and received a bone marrow transplant from her then 8-year-old brother, Adam, at UW Children’s Hospital, now called the American Family Children’s Hospital. The procedure was a success, and today, Cotter and her husband, Bill, live in Chicago and have two young boys, ages 2 and 4.

Her experiences sparked her dedication to local, regional and national cancer advocacy. She served as director of legislative affairs for Children’s Oncology Group/CureSearch, where she was effective in raising national awareness and lobbying for directed childhood cancer research funding. As a member of the National Cancer Institute Director’s Consumer Liaison Group, Cotter worked to engage advocates to accelerate research progress. She is currently an advocate on the Stand Up to Cancer and St. Baldrick’s Pediatric Cancer Dream Team.

Cotter helped organize the first Kids with Courage reunion for American Family Children’s Hospital, which was held in 1993. She has been integrally involved in all four subsequent reunions for patients who have been treated for childhood cancer.
UW and University of Minnesota performed simultaneous transplants in 1968, became Sondel's mentor and inspired him to pursue this path. It wasn't long before Sondel began assisting in experiments and creating his own experiments, thanks to encouragement from Bach and Miriam Segal, a graduate student.

"Fritz had a knack for mentoring people and moving projects forward," Sondel reflects. "He knew how to focus ideas and thoughts. Fritz's leadership energized me and others to do original work."

In 1969, Sondel got a job as an orderly in a Milwaukee hospital, where he gained experience in a clinical setting. He decided to focus on a career as a physician and started wondering what specialty he would enjoy.

"I learned so much about different approaches to patients. Some physicians were like a whirlwind and did not spend much time with patients. Others would sit down and talk with patients until their questions were answered. This was my first exposure to the challenge and importance of listening to and communicating with patients and their families," he says.

Upon earning his bachelor's degree a year early in 1971, Sondel entered a UW-Madison graduate degree program and continued working in Bach's lab. He entered medical school at Harvard in 1972.

This serious student also was becoming serious in his relationship with Sherie Katz, a young woman he met a few years earlier. After his first semester of medical school, they got engaged. Through a quick but opportune decision over Sondel's winter break in Madison, they shared the news with their parents and got married four days later.

Back at Harvard with a new wife, Sondel quickly realized that, in addition to gaining the broad background required of medicine, he wanted to maintain his focus on the innovative immunogenetics work he had been doing. He thus took time off from medical school, returned to UW-Madison and earned a doctorate degree in genetics.

Sondel then moved back to Harvard and finished medical school in 1977. He and his wife were expecting their first child, and the happy news helped clarify Sondel's next career decision.

"We chose to have me do my internship and residency, focusing on childhood cancer and immunology, in the Midwest near family," says Sondel, who is grateful for his wife, four grown children, son- and daughter-in-law, and grandchildren.

In 1978, Sondel returned to Madison for a residency in pediatrics at UW Hospital and Clinics and was able to continue part-time research. He received a big break when the head of Harvard's cancer center, Tom Frei, MD, became a visiting professor at the UW in 1979. Aware of Sondel's work at Harvard, Frei urged Paul Carbone, MD, head of the UWCCC that now bears his name, to offer Sondel a faculty position and his own laboratory, starting in 1980. Madison and the UW have been Sondel's home ever since.

"I've had 33 incredible years as a UW faculty member; I have enjoyed the atmosphere of academic freedom, support and cooperation here at UW, along with the chance to work with really outstanding colleagues, students and postdoctoral trainees. I've also had the privilege of helping families of children with cancer," Sondel reminisces. "Those inspirational families have a great deal of courage and love."

Their courage served as the impetus for Sondel and his colleagues to create the Kids with Courage reunion. For the first such event in 1993, Sondel and his team joined forces with former patient Kelly Cotter (see page 23) and supermodel Cindy Crawford. Crawford has been a long-time supporter of pediatric oncology at the American Family Children's Hospital. This relationship began because Crawford and her family spent a significant amount of time at that hospital when her brother, Jeff, underwent treatment for cancer. He died at age 4 in 1975.

Kids with Courage is held every five years and has grown over time. This year's fifth reunion—honoring 20 years of cancer survivors—is among the most satisfying gatherings for Sondel and his colleagues who were able to highlight the last decade's advances in immunology and other research findings that have translated into clinical benefits for patients.

Sondel notes that progress in translational cancer research requires teamwork, ideas, hard work and patience—despite the urgent need to be able to implement better treatments for children who need them now.

"Our work is about persistence—sticking with it to see improvements come steadily, but in small increments; it's not about immediate breakthroughs," he shares.

At the 2013 Kids with Courage event, Cindy Crawford poses with a stylish event participant.
As a second-year medical student at the University of Wisconsin School of Medicine and Public Health (SMPH), Matthew Kutz is looking into residencies, but not only on his own behalf. He realizes that he and his contemporaries may have a much harder time securing residency spots when they graduate compared to their predecessors.

The cause lies in significant funding cuts to the federal graduate medical education program. And a huge concern, he says, is the impact this will have on patients’ future abilities to access health care providers.

“As medical students, we learn about determinants of public health. We’re inspired to enact change, but we have limited ways in which to do that,” he says. “A strong option is to join forces with established organizations, spend the time to learn about your subject matter and the political reality, and involve people who can make a difference.”

To that end, Kutz and Ryan Denu are co-presidents of the SMPH section of the American Medical Association, Medical Student Section (AMA-MSS). The SMPH chapter is taking a grassroots approach to reach local and national goals while building lifelong skills in advocacy.

“Our chapter is incredibly involved at the national level, with most of our members involved in at least one board position,” says Kutz, noting that SMPH students attend national meetings, and some have participated in specialized legislative process training.

The SMPH chapter joined a national campaign, “Save GME,” that was started by the AMA-MSS. Ryan organized a time for several first- and second-year SMPH students to meet with U.S. Representative Mark Pocan about GME funding.

Says Kutz, “It was a good experience for us because not only did we get to interact with Representative Pocan and advocate for something we believe in, he also continued to educate us on legislative policy. You can go in there with ideas, but unless you understand the complicated political system, you can’t effect change.”

He concludes that the SMPH section’s goal is to provide opportunities for members to learn about the legislative process and policies, as well as how to present a case to legislators.
PATRICK BROWN:
Taking Time to Lead and Mentor
When Patrick Brown, a University of Wisconsin School of Medicine and Public Health (SMPH) MD/PhD student, decided to pursue a medicine and research career, his mother was worried about his choice to attend the University of Illinois—listed among the nation’s top “party schools”—for his undergraduate degree.

“I had a major resolve to prove my mother wrong,” recalls Brown, a Chicago native. “She was concerned that I might go off and start partying. While I wanted to have fun, I also was focused on my goal of becoming a physician, and I knew what I needed to do to achieve it.”

After completing his bachelor’s degree in molecular and cellular biology, Brown entered the SMPH’s Medical Scientist Training Program (MSTP), in which students complete two years of medical school, then pursue a doctorate degree before returning for their final two years of medical training. He chose the SMPH for its breadth of scientific discovery, strength of the medical and graduate programs, and the passion of the people he met. He chose the MSTP to gain knowledge in both medicine and research to help bridge his perceived chasm between medicine and basic science.

Brown is nearly finished with his PhD in cell and molecular biology with a research focus on stem cells and cartilage regeneration. Throughout his training, Brown has helped minorities and under-represented students deal with the challenges of the path into medicine. He encourages them not to lose faith in their dreams.

“A lot of my undergraduate courses at Illinois were ‘weed-out’ courses, and a lot of students did not make it,” he shares. “For instance, my freshman core biology classes began with 600 enrolled students, but that dropped to 350 by the end of my junior year. It became my goal to help as many of my friends as possible who took these courses after me.”

Brown discussed assignments with other students and shared supportive ideas in study groups when it felt like the challenges were unbearable. He also received valuable advice from professors and other mentors, who exposed him to the world of research and the work required for a PhD. One such mentor, Jenny Bloom, EdD, encouraged him to apply for the National Institutes of Health’s (NIH) Undergraduate Scholarship Program, a highly selective program through which he was able to conduct research at the NIH after graduation.

“When I graduated with my degree in molecular and cellular biology, I felt well prepared for medical school,” he says.

In Brown’s second year at the SMPH, he was one of four student members of the school’s Admissions Committee, which screens applicants and makes decisions about which students to admit.

“That experience gave me the knowledge to communicate with potential applicants about what the admissions committee would be looking for and what students needed to accomplish before applying to medical school. I always try to be the best possible mentor and share the truth about the rigors of the application process.”

Brown also served as the SMPH’s chapter president for the Student National Medical Association (SNMA), the nation’s oldest and largest student-run organization committed to supporting current and future under-represented minority medical students; addressing the needs of underserved communities; and increasing the number of clinically excellent, culturally competent and socially conscious physicians. He helped organize a voter registration drive and grant writing efforts to help nine fellow students attend the SNMA national conference.

Taking his passion to the national stage, Brown now is the chair of the board of directors for the SNMA. A former SNMA national president and SMPH alumna, Travelle Franklin-Ford, MD/PhD ’13, took him under her wing and introduced him to several influential people as he and Franklin-Ford promoted the UW, Brown shares.

“We spend a lot of time trying to recruit talented, under-represented minorities to the SMPH,” he notes. “Many of them have no idea what the UW has to offer, so we spend countless hours describing its benefits and strengths and ‘selling it’ to them.”

Gloria Hawkins, PhD, assistant dean for multicultural affairs at the SMPH, commends Brown for his dedication to helping minority students consider medical careers while keeping up with his studies.

“He is a special young man,” she exclaims. “He’s bright, unassuming and committed to his education. He is focused on becoming a physician and scientist and dedicated to making a difference. Overall, he is an excellent role model.”

Hawkins continues, “I often see Patrick talking to undergraduate and pre-college students who are interested in science or a career in medicine. He has a broad perspective and a genuine focus on diversity. When he makes a commitment, there is action, not just talk.”

As further recognition, Brown was among five graduate students of color who were inducted into the UW-Madison chapter and national Edward A. Bouchet Graduate Honor Society in spring 2013. Named for the nation’s first African-American doctoral degree recipient, who earned a doctorate in physics from Yale University in 1876, the society was established in 2005 by Yale and Howard Universities to promote diversity and excellence in doctoral education and among professors.

Brown plans to finish his final year of medical school in 2016, but he remains concerned about future minority medical students and how they will make an impact in research and service to patients.

“I put very little weight into my own success,” he says. “What I care about is the generation behind me and whether they can succeed. As I succeed, I need to turn around and bring someone else with me.”
The Multiplier Effect in Action
WILLIAM BUSSE, MD ’66, AND JUDITH BUSSE
In summer 2013, William Busse, MD ’66, and Judith Busse donned hard hats, as did Robert Golden, MD, dean, and Mark Wells, assistant dean for facilities, at the University of Wisconsin School of Medicine and Public Health (SMPH). Together, they toured the under-construction second tower of the Wisconsin Institutes for Medical Research (WIMR) to seek out a “naming location” for the donation the Busses have made to support WIMR II.

The couple has contributed to the SMPH over many years for numerous projects, including memorials and scholarships, a conference room for the Morris Institute for Respiratory Research (MIRR) and funding for the Women in Academic Medicine Program in the Department of Medicine. WIMR, however, is special to them because it encourages collaborative research, a philosophy that captures Busse’s vision of how to enhance research effectiveness and accomplish a “multiplier effect” to expand the school’s investigative mission.

Busse’s time at UW-Madison began during his undergraduate years, which were made possible by a Kemper Knapp scholarship. He met and married Judy, earned his medical degree at the SMPH and spent two years in the U.S. Army, where he learned about allergy, immunology and pulmonary medicine at Madigan General Hospital, Tacoma, Washington. The Busses returned to Madison, and he completed an internal medicine residency and allergy and clinical immunology fellowship at UW Hospital and Clinics.

In 1974, Busse joined the SMPH, where he has held several leadership posts. He was the head of the Section of Allergy and Clinical Immunology from 1978 to 2004 and the George R. and Elaine Love Professor and Chair of Medicine from 2005 to 2009.

Now a professor in the Department of Medicine’s Division of Allergy, Pulmonary and Critical Care Medicine, Busse has appreciated and benefited from the school’s support. He is deeply committed to its research mission and wishes to encourage the philosophy of collaborative research across departments and diseases, as characterized by WIMR’s structure. He and Judy have seen the benefit and multiplier effect of collaborative research in his career and are pleased to give back to the school with the hopes of further encouraging research, they say.

“The school has been very good to and for us in many respects. It provided strong support when I was a young faculty member; as well as opportunities for independence for me and others in teaching, patient care and—especially—research. This has allowed us to build programs and is an example of a multiplier effect. This doesn’t happen at every university, but my colleagues and I could not have accomplished what we have without this collaboration,” says Busse. “From my perspective, WIMR embodies this approach. Being able to contribute to WIMR will enable the success of others and the school. It is a heartfelt gift of appreciation.”

As a trainee and young faculty member, Busse was influenced by his mentor, Charles Reed, MD, a leader in the asthma field and director of the SMPH Allergy Program.

“Charlie taught me a lot about research—questions to ask, approaches to follow and the importance of identifying collaborators and working as a team. From seeing his success and the multiplier effect that followed, it became a natural way for me to build a program with others,” Busse recalls.

For example, Reed encouraged Busse to study the relationship between respiratory infections, particularly the common cold virus (rhinovirus), and asthma. This effort was enhanced by working with UW-Madison colleagues in respiratory and molecular virology. Such collaborations remain an integral component of Busse’s National Institutes of Health (NIH)-funded studies.

In turn, Busse has been able to recruit and mentor junior faculty members who have become collaborators and developed independent careers. This multiplier effect is seen in the careers of Robert Lemanske, Jr., MD ’75, James Gern, MD, and Nizar Jarjour, MD. All are now SMPH professors and use the multiplying effect in their successful, diversified research programs at the school.

Before joining the faculty, Lemanske earned his medical degree from the SMPH and completed a pediatric residency at UW Hospital and Clinics. Early in his faculty position, he received specialized training in allergy research through the NIH’s Intergovernmental Personnel Act.

Now a professor in the SMPH Departments of Pediatrics and Medicine; head of the Division of Pediatric Allergy, Immunology and Rheumatology; and director of the Allergy and Immunology Conjoint Program, Lemanske recalls, “When I was in medical school, I met Bill during a one-month allergy and immunology elective and found him to be intellectually stimulating and an outstanding role model. When I joined the faculty in 1983, I was the sole pediatric allergist and immunologist. Bill taught me the importance of individual drive, as well as the value of networking with colleagues to create productive, collegial teams.”

In the early 1990s, Busse recruited Gern, who now is a professor in the SMPH Departments of Pediatrics and Medicine. Busse also recruited Jarjour into the team. Now a professor in the SMPH Department of Medicine; head of the Division of Allergy, Pulmonary and Critical Care Medicine; and assistant director of the NIH-funded UW Institute for Clinical and Translational Research, Jarjour’s role expanded the team’s scope to include pulmonary medicine.

Gern shares, “Bill’s philosophy to build collaborative research projects with basic science and clinical investigators—known as project program grants (PPGs)—provides an excellent venue for junior investigators. By working on Bill’s project that included experts from basic science departments, I have been able to gain a broad perspective by examining questions and solutions from several points of view. I now am leading my own program project grant, the Asthma and Allergic Diseases Cooperative Research Center, and hope this provides opportunities for another generation of young investigators.”

One such 10-year study, known as SCOR (Specialized Center of Research), began in 1991 with a $2 million-per-year NIH grant. It allowed the SMPH to bring together investigators from different backgrounds,
Faculty Score Awards for Patient-Centered Care Projects

Researchers at the University of Wisconsin School of Medicine and Public Health will study patient-centered approaches to follow-up care for breast cancer survivors and improving quality of life for children with Type 1 diabetes thanks to multimillion-dollar awards from the Patient-Centered Outcomes Research Institute (PCORI).

Caprice Greenberg, MD, MPH, will receive $1.97 million over three years to create a patient-centered approach to monitoring cancer recurrence or treatment side effects among breast cancer survivors.

Elizabeth Cox, MD ’06, PhD, will receive $2 million over three years to study whether a 10-minute survey that she created will help families select individually tailored resources to improve diabetes management and quality of life.

Greenberg, an associate professor and director of the Wisconsin Surgical Outcomes Research Program in the Department of Surgery, says follow-up surveillance and care for breast cancer survivors currently is a one-size-fits-all approach.

“"We want to develop a system to follow breast cancer survivors that will consider individual risk factors for a tailored approach for each patient,” she notes.

Greenberg is collaborating with the Alliance for Clinical Trials in Oncology and the Commission on Cancer.

Cox, an associate professor in the Department of Pediatrics, explains that children with Type 1 diabetes and their families face many challenges to controlling diabetes and maintaining good quality of life.

“Our preliminary work suggests that taking good care of diabetes can be easier when health care providers offer resources tailored to each family's needs,” she shares.

Cox is collaborating with the UW Children's Diabetes Center, Medical College of Wisconsin's Pediatric Diabetes Program and Western Wisconsin Chapter of the Juvenile Diabetes Research Foundation.

An independent, non-profit organization, PCORI funds research aimed at providing patients, caregivers and clinicians with evidence-based information to make better-informed health care decisions.

SMPH to Lead Stroke Research in Upper Midwest

People who live in Wisconsin’s urban neighborhoods and Indian reservations should have better access to advances in stroke prevention and treatment thanks to the University of Wisconsin School of Medicine and Public Health’s (SMPH) new role as a Regional Coordinating Stroke Center.

The announcement from the National Institutes of Health (NIH) could mean up to $1.88 million coming to the SMPH over five years. The NIH’s National Institute of Neurological Disorders and Stroke plans to set up about 25 regional coordinating centers for stroke research, so people in Wisconsin and northern Illinois will have access to the latest clinical trials and care.

“We're very proud of this recognition of our leadership in stroke research and treatment,” says principal investigator Robert Dempsey, MD, chair of the SMPH Department of Neurosurgery (top photo). “It means stroke patients who may live far from academic medical centers will benefit from the latest and best practices in diagnosis, treatment and rehabilitation.”

Dempsey’s group will coordinate research at about 26 health organizations in Wisconsin and Illinois, ranging from hospitals and tribal medical centers to four major medical systems with a total of 12.7 million annual outpatient visits.

Azam Ahmed, MD, assistant professor of neurosurgery, is the sub-principal investigator for the project, which also involves faculty from vascular neurology, interventional neuroradiology, neurointensive care, stroke rehabilitation, emergency medicine, pediatric neurology and neuroimaging.

According to Dempsey, NIH reviewers were impressed with the SMPH’s Institute for Clinical and Translational Research and Office of Clinical Trials, as well as the school’s long-standing outreach programs to improve health care among Wisconsin’s underserved communities.
Mapping the Circuitry of Red Blood Cell Production

Scientists in the University of Wisconsin–Madison Blood Research Program are lifting the veil on the genetic gears of erythropoiesis, or red blood cell production. They have shown that a matrix of proteins guide Gata-1, a “master regulator” that turns hundreds of blood production-related genes on and off.

“This discovery shows that the pivotal regulator of erythropoiesis Gata-1, which is involved in human leukemogenesis, uses an ensemble of mediators that we call co-regulators, and the co-regulators used depend on which gene Gata-1 needs to regulate,” says Emery Bresnick, PhD, professor of cell and regenerative biology in the UW School of Medicine and Public Health and director of the UW Blood Research Program.

Although the cells that give rise to red blood cells reside in the bone marrow, these progenitors must go through several carefully regulated cellular divisions in rapid succession before entering the blood stream.

Understanding this process requires knowing what genes are activated and how. In 2009, Bresnick’s lab published studies in Molecular Cell that established the full repertoire of Gata-1 target genes. Learning how Gata-1 accomplishes this task was the next step.

“Rather than using a single vital co-regulator at all of its target genes, Gata-1 uses different combinations of co-regulators at distinct loci,” explains Andrew DeVilbiss, a graduate student in the Cellular and Molecular Pathology Doctoral Program.

DeVilbiss is the lead author on the study published in the Proceedings of the National Academy of Sciences.

“We think the combinations depend upon the unique chromatin environment at those locations,” he says.

Chromatin is crucial in determining whether a gene will be active or inactive, and its many constituents are targeted by regulatory mechanisms that change the activity of genes in the cell.

Mapping the genetic network of erythropoiesis is critical for developing targeted therapies for anemias and leukemias.

Wisconsin Alzheimer’s Institute Lands Grant for Registry

The Wisconsin Alzheimer’s Institute (WAI) recently received a five-year, $4.2 million award from the National Institute on Aging, National Institutes of Health, to support core activities in the Wisconsin Registry for Alzheimer’s Prevention (WRAP). It also earned a “high program relevance” designation for serving a national interest worth protecting.

Part of the University of Wisconsin School of Medicine and Public Health (SMPH), the WAI brings together service providers, community organizations, educational institutions and advocacy groups to improve care for people with dementia and their families. It has 44 affiliated dementia diagnostic clinics statewide that provide medical and social assessments to more than 3,000 new patients annually, and it is involved in numerous research projects.

WRAP is the nation’s largest study of healthy, middle-aged people who may be at risk because they have a parent with the disease. Launched in 2001 and now with more than 1,500 participants in Wisconsin and beyond, WRAP offers researchers a better understanding of the biological, medical and environmental factors that increase the risk for Alzheimer’s disease.

With a growing participant pool and five more years of funding secured, WRAP aims for continued involvement of research volunteers and hopes to someday develop interventions that can protect people against the disease.

“Alzheimer’s disease affects families very deeply, so the dedication of the people of Wisconsin and those from all over the U.S. have made this project a success,” says WAI Director Mark Sager, MD ’87, also a professor in the SMPH Division of Geriatrics within the Department of Medicine.
Is There a Doctor in the ‘House’?

MENTORS CONNECT WITH STUDENTS THROUGH THEIR LEARNING COMMUNITIES

Back row (left to right): Carol Diamond, Laura Zakowski and Christopher Hildebrand. Front row: Jacquelynn Arbuckle and David Rakel.
W hen asked what made a difference in their success, five University of Wisconsin School of Medicine and Public Health’s (SMPH) faculty members—now in their second year as student mentors for the Learning Communities, or “Houses”—reflect upon significant people who shared their time and insights along the way.

Mentors in formal and informal programs make an enormous difference in helping students throughout their quest to become physicians and researchers.

The SMPH’s formal mentoring program has evolved over time. Prior to 2005, Class Mentors were faculty members who virtually went “back to medical school” with a class of entering students and served as that class’s mentor for four years. (See article about Don Schalch, MD, in the spring 2013 Quarterly.)

“We are incredibly grateful for the efforts of those faculty members, many of whom moved into the next model and still help guide and inspire students today,” says Chris Stillwell, director, Office of Student Services.

The school’s 2004 move to the Health Sciences Learning Center and creation of five student Learning Communities influenced the mentoring program’s evolution to a new model, the Academic Career and Advising Program (ACAP). Then, 20 faculty members served as mentors, with four for each House.

A year ago, the ACAP again evolved to become the House Mentor Program. Now, five physicians each dedicate 20 percent of their time as mentors. Each is assigned to one House of about 150 students.

“Mentors are appointed for one year, but we hope they will continue to oversee their respective Houses for several years. That way, they will be connected with students at each stage of the four years, simultaneously,” says Stillwell, adding that students have shared positive feedback.

“The Houses offer students many optional activities and resources, which help them connect with fellow students, faculty members and others who can provide guidance. It also exemplifies how they will interact in their careers,” he says.

Stillwell adds, “Much of medical education falls in the realm of developing a student’s professional identity, which happens best through role modeling. We chose our House mentors for their ability to act as catalysts in helping students make inroads with others who share common interests.”

These five mentors come from diverse backgrounds, have significant experience in their fields, maintain active clinical practices and have devoted much energy to training medical students, residents and fellows. They aim to help students follow their dreams.

**McPherson House**

**JACQUELYNN ARBUCKLE, MD ’95**
Clinical associate professor,
SMPH Department of Surgery

“Growing up on the St. Croix reservation in northern Wisconsin gave me a strong connection to my home community, but also made moving on to college and medical school challenging. Through my experiences, I am able to understand some of the difficulty students from economically and racially diverse backgrounds may face.”

**Bardeen House**

**CAROL DIAMOND, MD**
Associate professor,
SMPH Department of Pediatrics

“As a pediatrician, mother and spouse, I am not afraid to disclose my own experience. I think this helps forge the trust needed in a student-mentor relationship. Also, having spent some of my career outside the academic arena is helpful for students, as I have a somewhat different perspective from other university faculty. Students also are interested in learning about the professional and personal balancing act we all perform.”

**Middleton House**

**CHRISTOPHER HILDEBRAND, MD**
Chief, medical service, associate chief of staff for education, William S. Middleton Memorial Veterans Hospital; clinical associate professor, SMPH Department of Medicine

“Reflecting on my ongoing journey in medicine, I am indebted to those physicians and others who have challenged me to refine my skill set, goals and aspirations. These individuals are key players in my own career and personal satisfaction. Having such a formal role in the lives of scores of medical students is a most noble opportunity. I am able to be fair, honest and uninhibited in giving frank and sometimes sensitive feedback necessary for the trainee’s growth and success.”

**Gundersen House**

**DAVID RAKEL, MD**
Associate professor, SMPH Department of Family Medicine; director, UW Health Integrative Medicine Program

“Being a small-town doctor gave me insight into how our lives are inter-related with our symptoms. The recognition of this strong mind-body connection encouraged me to want to learn more about how this important ingredient can be better recognized within medical delivery and education. Mentoring requires experience, humility and self-reflection to understand one’s own beliefs and biases. Just like we teach the importance of sitting without judgment in helping our patients find health, a mentor will place him or herself in the student’s chair to perceive through that person’s lenses to understand how to best guide him or her toward success.”

**Bamforth House**

**LAURA ZAKOWSKI, MD ’90**
Associate professor,
SMPH Department of Medicine

“Through my roles as the Patient, Doctor and Society course director and other teaching and leadership activities, I have gained a deep understanding of the numerous challenges medical students face. I can help students become accustomed to a new level of course intensity in the first year, transition from a pass-fail to a graded curriculum in the second year, move from classroom to patient care in the third year, and pursue a residency in the fourth year. While these are common challenges to the class as a whole, each student faces his or her own concerns that I help explore and turn into opportunities.”

By Kris Whitman
AKHTER NAMED NEW CHIEF OF CARDIOThoracic SURGERY

Shahab A. Akhter, MD, has been appointed chief of the Division of Cardiothoracic Surgery in the University of Wisconsin School of Medicine and Public Health’s (SMPH) Department of Surgery. He started the new role in September.

Akhter came to the SMPH from the University of Chicago, where he was an associate professor of surgery, surgical director of the Heart Rhythm Center at the University of Chicago Medical Center and director of cardiovascular translational research in the Section of Cardiac and Thoracic Surgery at the university’s Pritzker School of Medicine. “Dr. Akhter is not just an exceptional surgeon and scholar, but a dynamic leader who is committed to providing the highest level of innovative, patient-centered care,” says K. Craig Kent, MD, chair of the SMPH Department of Surgery. “We are excited about the breadth of knowledge he brings to the division and his vision for furthering our reputation as a leader in the field of cardiothoracic surgery.”

Akhter’s clinical expertise includes high-risk and complex cardiac surgery, surgical treatment of heart failure, including cardiac transplantation and ventricular assist device implantation, mitral valve repair and minimally invasive surgery for the treatment of atrial fibrillation. A nationally recognized surgeon-scientist, Akhter leads a basic science research program that focuses on the pathophysiology of heart failure, with an emphasis on the discovery of translational therapies to treat heart failure and complex heart disease. His clinical research aims to improve outcomes in mechanical circulatory support for advanced heart failure and optimize the surgical treatment of atrial fibrillation.

Akhter earned his medical degree from the University of Chicago Pritzker School of Medicine. He completed his residency training at Duke University Medical Center, Durham, North Carolina, and his fellowship in cardiothoracic surgery at the University of Michigan, Ann Arbor.

UW HEALTH AND VETERANS AFFAIRS PARTNER FOR VETERANS’ HEALTH

UW Health Integrative Medicine will collaborate with the Veterans Health Administration (VA), the largest medical system in the country, on a national push to improve how doctors care for patients who are veterans.

The Integrative Medicine Program has contracted with the Pacific Institute for Research and Evaluation to create an education program titled “Whole Health: Changing the Conversation.” The Integrative Medicine Program will work with VA clinicians throughout the country to shift care from focusing on diseases toward excellence in health and resiliency.

The William S. Middleton Memorial Veterans Hospital is one of four pilot sites in the U.S. where curriculum will be taught. The VA selected UW for its reputation in research and expertise in integrative medicine. “The Veterans Health Administration’s top goal is to provide veterans with personalized, proactive, patient-driven health care,” says Alan Bridges, MD, chief of staff of the VA Hospital and a professor in the University of Wisconsin School of Medicine and Public Health (SMPH) Department of Medicine. “We are very excited about the opportunity to partner with the university to create culture change and develop an environment that focuses on physical and emotional health.”

David Rakel, MD, director of UW Health Integrative Medicine and an associate professor in the SMPH Department of Family Medicine, calls the effort “an investment in health.” “Doctor-patient relationships are centered on disease, but integrative medicine practitioners say that focusing more on overall health will help reduce the need for expensive ‘rescue’ from conditions that are not easily fixed,” Rakel explains.

“This project should widen the lines of communication between physicians and veterans to help us understand how to best mobilize resources to achieve the veterans’ health goals.”

Brajesh Mittal MD

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DEMETS ELECTED TO INSTITUTE OF MEDICINE

David DeMets, PhD, the Wisconsin Alumni Research Foundation Max Halperin Professor of Biostatistics and Medical Informatics at the University of Wisconsin School of Medicine and Public Health (SMPH), has been elected to the prestigious Institute of Medicine (IOM).

DeMets, who has helped guide the design and analysis of hundreds of clinical trials during his career, is one of only a few biostatistics experts chosen for the IOM.

“It's such an honor to be nominated, much less elected, into this select group,” says DeMets. “The IOM is a fairly influential body. The reports they generate are always taken seriously and get a lot of attention, especially by Congress and the executive branch, as well as other federal and scientific agencies.”

The IOM is contracted by sponsors to investigate issues and develop reports of findings and recommendations. DeMets will serve on IOM panels or review the reports they generate.

“I was stunned to be elected to the IOM,” recalls DeMets. “First, it's not typical that biostatisticians get nominated or elected. I only know of a handful with this IOM honor at present. Second, this isn't an honorary position. Members are expected to serve the IOM on various panels working on important issues brought to them.”

Election to the IOM is the last step in a rigorous process that takes several months and multiple rounds of selection.

DeMets has produced more than 200 peer-reviewed publications and authored four textbooks on the design and analysis of clinical trials.

He earned his PhD in biostatistics from the University of Minnesota in 1970, worked at the National Institutes of Health for 12 years and joined the SMPH faculty in 1982.

Neurologist’s YouTube Video Wins National Contest

A 10-minute YouTube video explaining the basics of the human nervous system has won neurologist Matthew Jensen, MD ’12, a trip to the innovative Khan Academy to learn techniques for teaching pre-health students.

“I'm excited to have hands-on training in the creation of video lessons and quiz questions in the Khan Academy style to improve my teaching skills,” says Jensen, an assistant professor in the University of Wisconsin School of Medicine and Public Health (SMPH) Department of Neurology.

Jensen is one of 15 winners of a video competition that is providing free, online resources to help students prepare for the revised Medical College Admissions Test (MCAT). The revised test will be administered for the first time in 2015, but it is closing in on premedical students around the nation. Preparation materials soon will be ready from traditional publishers, and so will resources from more tech-savvy media.

The contest is a collaboration among the Khan Academy, Robert Wood Johnson Foundation and Association of American Medical Colleges.

Contest winners received an all-expense-paid, week-long training program facilitated by the Khan Academy to create educational tutorials on concepts that will be tested by the new MCAT 2015 exam. The academy is a nonprofit organization that works to make high-quality education available to everyone through its growing library of free, online educational content.

Trainees are producing a new collection of tutorials; the first were available this fall through the Khan Academy’s online learning library and the Association of American Medical College’s (AAMC) MedEdPORTAL iCollaborative, a free, searchable, online repository of instructional materials for teaching pre-health curricula.
DUAL-SPORT MOTORCYCLISTS SUPPORT CANCER RESEARCH

by Kris Whitman

When people think of grassroots efforts to raise money for a cause, they may not envision the type of effort involved in hosting and riding in a dual-sport motorcycle event. But the nearly 200 participants who gather for the annual Ride for Research—as well as the faculty and staff in the laboratory of Avtar Roopra, PhD, at the University of Wisconsin School of Medicine and Public Health (SMPH)—have redefined grassroots to include mud, gravel and forested trails.

Dual-sport participants ride street-legal bikes and choose their challenge level from paved or unpaved roads, two-track and single-track trails through the woods and steep terrain ranging from mud to sand and rocks.

John Newton, a lifelong cycle rider who works at the UW-Madison Biotron, is the driving force behind the two-day, 250-mile Ride for Research and its sponsor, the Wisconsin Dual Sport Riders. While the event is not for the faint of heart, the benefits include intense camaraderie, he says, adding that riders get mud on their teeth because they’re smiling.

Newton proudly notes that, starting with the first annual Ride for Research in 2005, the club has devoted its proceeds to breast and colon cancer research at the UW Carbone Cancer Center (UWCCC). The cumulative total exceeds $100,000.

“We support the Carbone Cancer Center because it helps people from the entire Great Lakes region. Our event brings together riders from all over, but primarily from six nearby states, and they all benefit from this research,” says Newton, adding that cancer has touched the lives of nearly all participants.

The Ride for Research, as well as the club’s annual autumn ride that benefits charities in northern Wisconsin’s Forest County, take place in that county’s town of Wabeno. Having spent his childhood summers and weekends in the region, Newton loves the woodlands there, he says.
Following the 2009 race, Newton and his wife, Sue, were searching for ways to energize the riders and boost donations for the next year’s race.

“Sue saw a news story about some interesting breast cancer research being conducted by Matt Wagoner, a graduate student who worked in Avtar Roopra’s neurology lab,” explains Newton, of Fall River, Wisconsin.

Specifically, the UWCCC researchers identified a change in a gene that normally suppresses tumor growth by producing a specific protein, known as RE1 silencing transcription factor (REST).

“Sue thought we should send the article to the riders, but I thought it would be more inspiring if the researchers would talk directly with our club. I sent Matt an e-mail that said if he would do that, we would donate half of the ride proceeds to that laboratory,” reflects Newton, explaining that the other half benefits colon cancer research.

“Matt came to our Christmas party, and the following spring, he and Avtar spent the ride weekend in Wabeno and gave a presentation,” he says.

This spurred an ongoing relationship rich with good humor and ample laughter. Roopra invites Newton and others to the laboratory throughout the year, and members of the laboratory attend the ride.

“Being from Britain, I learned about America by watching TV shows like Starsky and Hutch and The Dukes of Hazzard. Wabeno is a lot like the small towns in those shows, and the people are incredibly friendly,” exclaims Roopra, an associate professor in the SMPH Department of Neuroscience.

While his basic science laboratory primarily studies epilepsy, he notes that he and Wagoner were stymied to find that a molecule Roopra has studied since the mid-1990s plays a major role in breast cancer.

“This finding spawned several collaborations around the U.S., but we had no funding for breast cancer research, partly because government grants have diminished significantly in the struggling economy,” says Roopra.

“The bikers are the sole funding source for this line of our research,” he states. “It’s a lifeline in the leanest of times.”

Newton saw a huge change in the ride’s annual donations after the researchers became personally involved with the donors.

“We went from raising about $6,000 in the early years to raising almost $20,000 this year, with the same number of riders,” he notes. “Guys tell me it means a tremendous amount to them to hear about glimmers of hope in the effort to beat breast cancer.”

Recognizing that club members work extremely hard to raise the money—such as clearing trails using chain saws in the cold, damp weeks before the ride, Roopra says his laboratory staff plan what experiments will use the “bikers’ money” and spend it as efficiently as possible.

“A couple of years ago, using their funds, we were able to come up with a gene signature—based around REST—that could help predict breast cancer prognosis,” says Roopra. “This year, we were able to take those findings and make inroads toward figuring out why these genes are so aggressive.”

He continues, “As a testament to this dedication, we have published the club’s name as the funding source for three papers in world-renowned journals, and we have presented those papers to the club.”

Roopra’s laboratory will move from the Medical Sciences Center to the Wisconsin Institutes for Medical Research in early 2014. However, the inspiration the researchers feel from their biker buddies, and vice versa, will not change.

Newton shares, “Having them involved has been so much fun. The best part is the positive feedback from riders. A guy said to me, ‘You’re doing a great thing. When I got cancer 20 years ago, Paul Carbone was my doctor. I would not be here if it were not for him.’”

Roopra concludes, “Seeing the riders in Wabeno and sharing our findings is inspirational. Their energy and enthusiasm drive us to make a difference. After all, who would want to let down 200 guys on motorbikes?”
Students, Faculty Join Gold Humanism Honor Society

At the White Coat Ceremony in August 2013, the University of Wisconsin School of Medicine and Public Health (SMPH) inducted the following fourth-year medical students into the Gold Humanism Honor Society (GHHS):

- Meredith Bourne
- Marielle Brenner
- Elizabeth Corey
- Benjamin Eppinger
- Parker Hoerz
- Elizabeth Jahns
- Karlo Kovacic
- Bonnie Kwok
- Jillian Landeck
- Eleni Moraites
- Erin Peck
- Jennifer Perkins
- Eric Phillipi
- Bret Valentine
- Jasmine Wiley
- Kathryn Zavala

Also, the following faculty members and resident, respectively, were chosen by the SMPH Class of 2014 and inducted into the society:

- James Bigham, MD ’08, MPH ’12
- Cynthia Haq, MD ’87
- Ari Reichstein, MD

The GHHS is a national organization that recognizes those who have demonstrated exemplary attitudes and behaviors characteristic of the most humanistic physicians.

McIntosh Named Assistant Dean for Students

Gwen McIntosh, MD ’96, MPH, recently became the assistant dean for students at the University of Wisconsin School of Medicine and Public Health (SMPH). She will serve as the primary contact in the Student Services Office for student issues.

Pat McBride, MD ’80, MPH, remains the associate dean for students. He also is becoming the director of alumni relations. In this role, he will work closely with the Wisconsin Medical Alumni Association to raise funds for the school and scholarships. In addition, he will work with the SMPH Office of Multicultural Affairs, Admissions Department and regional campuses to provide increased services to students at those campuses.

McIntosh is an associate professor in the SMPH Department of Pediatrics. She has been involved in medical student education at the school for more than 13 years. She served for almost 10 years as the director of the Pediatric Clerkship Program. More recently, she has been the director of clinical curriculum with oversight of the third- and fourth-year medical student clerkships and courses.

In her new role, McIntosh will work closely with the members of the Student Services team to meet the needs of students across all four years of their medical school training.
At a reception before the Middleton Society event, society members who participate in the Great People Scholarship Program (GPSP) met students who have received their gifts. Contributions to this program support students throughout their four years of medical school. This fall, 25 SMPH medical students received Great People Scholarships, which help offset the enormous cost of a medical education. To date, the program has raised and endowed $1.7 million to support SMPH medical students.

“Helping reduce student indebtedness upon graduation is a top priority for the WMAA,” shares Karen Peterson, executive director of the Wisconsin Medical Alumni Association.

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COMMUNICATION: LESSONS FROM THE COCKPIT

The University of Wisconsin School of Medicine and Public Health (SMPH) partners with the UW Center for Quality and Productivity Improvement (CQPI) on system design and development for patient care and quality improvement. The center is part of the UW College of Engineering.

CQPI faculty members have written two journal articles that address communication and related factors that contribute to quality health care.

In the May 2013 issue of the *International Journal of Medical Informatics*, Peter Hoonakker, PhD, Pascale Carayon, PhD, and others state that “communication in health care is one of the most important factors associated with quality of care and patients’ safety, especially in Intensive Care Units.”

Douglas A. Weigmann, PhD, collaborated in a 2010 study titled, “Is the ‘Sterile Cockpit’ Concept Applicable to Cardiovascular Surgery Critical Intervals or Critical Events? The Impact of Protocol-Driven Communication during Cardiopulmonary Bypass,” as reported in *The Journal of Thoracic and Cardiovascular Surgery*.

The researchers concluded that “effective communication can be structured around critical events rather than defined intervals analogous to the sterile cockpit, with reduction in communication breakdowns.”

Peter Pronovost, MD, PhD, of Johns Hopkins University, Baltimore, Maryland, is a specialist in patient safety, medical care quality and medical error reduction. He recently commented on a non-medical disaster.

“When you hear that a crash was the result of ‘pilot error,’ almost always the subsequent investigation shows the same thing—the pilots did not know each other and had never flown together before. Each one had different presumptions about who knew what and who was doing what. Almost always, prompt communication in the cockpit could have prevented the crash,” he wrote.

Pronovost extended his theory to medical teams: He thought it unwise for surgeons, anesthesiologists and nurses who did not know one another to be involved together in complex surgeries. If specialists know and are comfortable communicating with one another, then at the first hint of trouble, an issue can be promptly addressed, and a delay in management can be avoided. If specialists do not communicate well, then problems may not be properly articulated or rapidly solved. An example would be a nurse who is intimidated by a surgeon whom he or she meets for the first time or a surgeon who incorrectly presumes that the stand-in anesthesiologist is doing something that the usual anesthesiologist does.

How we communicate with colleagues, as viewed by patients, is a valid measure of the quality of care given in the medical setting. A *New England Journal of Medicine* article, “The Patient Experience and Health Outcomes,” explores patient satisfaction as a measure of quality of care. The authors note that survey questions linked to observed communication between staff members had a high degree of correlation with overall patient satisfaction. They conclude that “both in theory and available evidence, [questionnaire] measures are robust, distinctive indicators of health care quality.”

These discussions came to mind when I heard about the crash landing of Asiana Flight 214 at San Francisco Airport in July 2013. Sadly, three people died, and many passengers were severely injured.

A television news report described how the plane struck short of the runway, its tail section broke off, and a fire threatened passengers’ lives. The National Transportation Safety Board reported that, “the plane was flying too low and at too slow a speed.” We eventually learned that three pilots were in the cockpit in that transoceanic flight, and none of the three had ever flown together.

The lesson from Flight 214 is that medical professionals should create teams of people—physicians, nurses, anesthesiologists, technicians and others—who know one another, can anticipate what can happen next and communicate well. We should not place teams who are strangers or who are not “team players” in operating rooms or intensive care units. High-volume surgeons already know this because they invariably have “favorite” scrub nurses and anesthesiologists. To do otherwise is to put patients at unnecessary risk.

Christopher Larson, MD ’75  
Quarterly Editorial Board Chair
SOCIAL MEDIA
The University of Wisconsin School of Medicine and Public Health (SMPH) was ranked among the top social media-friendly schools of public health by MPHprogramsList.com, a public health education web site. The site ranked the SMPH number 12 of 50 schools. The SMPH has an active presence on Twitter (twitter.com/uwsmph), Facebook (facebook.com/uwsmph) and YouTube (youtube.com/uwmedicine), as well as other social media sites. Learn more at med.wisc.edu/41738.

PUBLIC HEALTH ADVOCACY
Speaking of social media, second-year medical students have been learning how to use Twitter and blogs as advocacy tools for public health issues such as gun violence, medical marijuana and dental care. See how the students used social media at med.wisc.edu/uwsmphic.

UW-MADISON CHANCELLOR’S BLOG
UW-Madison Chancellor Rebecca Blank, PhD, who began her new role in July 2013, recently toured Gundersen Health Systems as part of a visit to La Crosse and Eau Claire, Wisconsin. While there, she met some SMPH students from the Wisconsin Academy for Rural Medicine (WARM) Program and SMPH faculty members from the Western Academic Campus. Following the visit, she wrote about how the SMPH’s partnership with Gundersen exemplifies the positive impact UW-Madison has on the entire state. Read her blog at med.wisc.edu/blankblog.

EBLING EXHIBIT
Ebling Library is not only a great place to study, it’s a place to see great art. The library’s latest exhibit, “Bump on a Line,” is a photographic journey of one man’s wait for a double-lung transplant. Learn the story behind the exhibit by watching a video at uwhealth.org/42021.
We Want to
Hear From You

Please send us information about your honors, appointments, career advancements, publications, volunteer work and other activities of interest. We’ll include your news in the Alumni Notebook section of the Quarterly as space allows. Please include names, dates and locations. Photographs are encouraged.

Have you moved? Please send us your new address.

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