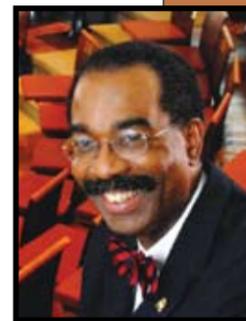




DEAN'S MESSAGE: What's On My Mind



What's on my mind this month is the impact the current economic downturn is having on medical schools throughout the country and the efforts we will make to place the University of Maryland School of Medicine in a position to weather the storm. The adverse financial climate is impacting all of our funding sources, including endowment, state support, research and patient revenues, and thus our response must be comprehensive.

Many medical schools, including ours, are dependent on endowment funds to support operations and to generate income and additional funding from the interest they earn. However, due to the dramatic drop in the stock market, many of those endowments will generate less income.

Harvard University, for example, recently reported that its endowment fund lost 22 percent of its value in the past four months and could lose as much as 30 percent of its value by the end of the fiscal year. Similarly, we also have seen a decline in the market value of our endowments by about 20 percent.

As you know, the University of Maryland School of Medicine and the University of Maryland, Baltimore campus receive annual operating funding from the state of Maryland. The deteriorating economic conditions at the state level have led to funding reductions. The medical school already has sustained two permanent funding reductions this fiscal year. In addition, the University System of Maryland will enact furloughs later this fiscal year in accordance with the governor's plan for all state employees.

"Many medical schools, including ours, are dependent on endowment funds to support operations and to generate income and additional funding from the interest they earn."

Research funding began to decline even before the current economic crisis. While we are hopeful the new administration in Washington will recognize the tremendous return on investment from research, this remains to be seen, and competition for research awards is sure to remain strong. Our faculty has done an outstanding job in terms of the number of grant applications and grant awards, and we have every indication this will continue.

Our medical school also depends on the substantial clinical revenues derived from University Physicians, Inc., our faculty practices. Thanks to our ongoing efforts to improve practice efficiencies and increase clinical volume, our revenue from patient care has shown some resistance to the current decline in other economic sectors. However, the clinical marketplace has seen a "softening" as patients seek to reduce their health care expenditures and avoid time away from work by postponing elective treatments or deferring care.

For these reasons we will implement an 18-month contingency plan to deal with the drop in revenue from our endowments, the state and other sources. We have instituted a freeze on filling vacant faculty and staff positions in the medical school until further notice. Positions funded by grants and contracts are excluded from this freeze. We are counting on existing staff to pitch in to cover the responsibilities of these open positions until the situation improves.

Other steps include not making new, discretionary financial commitments such as renovation projects. Current, budgeted commitments will be honored, but it will be necessary to defer expenses as much as possible. The plan also calls for us to make every effort to restrain spending and to grow revenue through steps such as practice plan enhancement, pursuit of contracts with additional local and regional hospital systems and to accelerate the implementation of our practice-based performance plan, which provides incentives to our most productive physicians. In addition, we will conduct a comprehensive review with the University of Maryland Medical Center to determine if we can achieve savings through reduced duplication and increased efficiency, and we have stepped up efforts to convince local, regional and national leaders to increase funding for biomedical research.

It is evident our national economy is in for some rough times over the next couple of years. At the University of Maryland School of Medicine, we will implement a plan we believe will carry us through the next two years without undue economic consequences. More importantly, it will put us in a very strong position to move forward with our mission and the many programs and initiatives we find critically important.

I am confident these steps will allow us to weather the economic crisis and enable us to provide the highest quality healthcare while maintaining our robust research enterprise and continuing to train the next generation of physicians, scientists and allied healthcare professionals.

In the relentless pursuit of excellence, I am
Sincerely yours,

E. Albert Reece, MD, PhD, MBA
Vice President for Medical Affairs, University of Maryland
John Z. and Akiko K. Bowers Distinguished Professor &
Dean, University of Maryland School of Medicine

"... we will implement an 18-month contingency plan to deal with the drop in revenue from our endowments, the state and other sources."

Former Dean Donald Wilson Wins Prestigious Medical Education Award

The Association of American Medical Colleges (AAMC) has awarded the Abraham Flexner Award for Distinguished Service to Medical Education to Dean Emeritus Donald E. Wilson, MD, MACP. The Flexner award was established by the AAMC in 1958 to recognize extraordinary individual contributions to medical schools and to the

medical education community as a whole.

"He is an innovator in medical education both at the graduate and undergraduate levels and a true academic leader," said Dean E. Albert Reece, MD, PhD, MBA, of his predecessor.

As the School of Medicine's dean for 15 years, Dr. Wilson was the first African American to hold that title at an accredited non-minority medical school and also was

the medical school's first vice president for Medical Affairs.

As an educator, it may be said that Dr. Wilson regards medical school as a full dress rehearsal for what students will encounter in the real-world of medicine. An advocate of curriculum reform, he generated greater awareness of problem-based learning and championed better integration of basic and clinical education. He was an early adopter of new technology, requiring all first-year medical students to have laptops and instituting informatics as part of the first-year curriculum.

Dr. Wilson's leadership was key to Maryland's emergence as a leading national research institution. In the words of AAMC President Emeritus Jordan J. Cohen, MD, "The school underwent a veritable transformation to become a true educational and research powerhouse." During Dr. Wilson's tenure, research grants quadrupled,

pressing health issues such as AIDS and schizophrenia were tackled and the school's research capacity strengthened with the construction of two biomedical research facilities.

In the policy world, Dr. Wilson served in numerous national and state positions, including chair of the National Advisory Council for Health Care Research and Quality. The

National Institutes of Health appointed him several times to serve on agency committees, including a post on the Advisory Committee to the Director. His expertise in fiscal and political trends impacting medicine is widely sought, and when the state of Maryland Health Care Access and Cost Commission—which he chaired for nine years—merged with the Health Resources Planning Commission to become the Maryland Health Care Commission, legislation was passed specifically naming Dr. Wilson as chair.

... it may be said that Dr. Wilson regards medical school as a full dress rehearsal for what students will encounter in the real-world of medicine.



Donald E. Wilson, MD, MACP

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Within the AAMC, as a member of the Council of Deans and later as its chair, Dr. Wilson helped the council achieve its mission of improving the nation's medical schools. In 2003, Dr. Wilson was chair of the AAMC Executive Council, and today he serves on the Health Care Advisory Panel.

New Federal Awards

(\$100,000 and above)

Name	Amount	Granting Agency	Grant Title
<i>Biochemistry & Molecular Biology</i>			
Martin F. Schneider, PhD	\$389,208	NIAMS	Interdisciplinary Training Program in Muscle Biology
	\$330,000	NIAMS	Activity Dependent Signaling in Adult Skeletal Muscle Fiber Plasticity
Gerald M. Wilson, PhD	\$362,789	NCI	Mechanisms Directing Oncoprotein and Cytokine mRNA Decay
<i>Center for Integrative Medicine</i>			
Brian M. Berman, MD	\$457,089	NCCAM	Cochrane Collaboration CAM Field: Resource for Research
<i>Center for Vaccine Development</i>			
Christopher V. Plowe, MD, MPH	\$131,827	Fogarty International Center	Malaria Research Training in Mali
	\$1,039,899	NIAID	Malaria Vaccine Trials in Mali
<i>Center for Vascular & Inflammatory Diseases</i>			
Dudley K. Strickland, PhD	\$1,623,446	NHLBI	Information Signaling Pathways in the Vasculature
<i>Medicine</i>			
Jeffrey D. Hasday, MD	\$334,125	NHLBI	The Contribution of Heat Shock/Stress Pathways to Acute Lung Injury
Charles D. Howell, MD	\$181,912	NIDDK	Ribavirin Pharmacokinetics, Race and HCV Treatment
<i>Microbiology & Immunology</i>			
Abdu F. Azad, PharmD, PhD, MPH	\$543,076	NIAID	Murine Typhus: Vector Biology and Transmission
Ferenc Livak, MD	\$149,168	NIA	Antibody Affinity Maturation in the Aging Bone Marrow
<i>Otorhinolaryngology-Head & Neck Surgery</i>			
Koji Tamada, MD, PhD	\$337,500	NHLBI	LIGHT Co-Stimulatory Therapy on GVHD and GVL

Name	Amount	Granting Agency	Grant Title
<i>Pediatrics</i>			
Maureen M. Black, PhD	\$605,928	NICHHD	Challenge in Schools: Adolescent Overweight Prevention
Ricardo D. Lagrange, PhD	\$153,631	NIMH	Coping Styles as Predictors of Medication Adherence in Inner-City Adolescents Infected with HIV
James P. Nataro, MD, PhD	\$809,524	NIAID	Live Attenuated Bacterial Vaccines against Plague
Pinaki Panigrahi, MBBS, PhD	\$447,019	NICHHD	Prevention of Neonatal Infection in the Indian Community
<i>Pharmacology & Experimental Therapeutics</i>			
Edson X. Albuquerque, MD, PhD	\$328,500	NINDS	Nicotinic Receptors: Role in Hippocampal Synaptic Function
	\$813,922	NINDS	Age & Sex Effects on Nerve Agent Damage to the Brain and Antidotal Therapies
<i>Physiology</i>			
Bradley E. Alger, PhD	\$291,060	NIDA	Endocannabinoids and GABA-ergic Control of Plasticity
Thomas A. Blanpied, PhD	\$315,563	NIMH	Internal Dynamics of the Postsynaptic Density
Richard M. Lovering, PhD	\$130,057	NIAMS	The Role of Intermediate Filaments in Skeletal Muscle Injury
<i>Program in Oncology</i>			
Stuart S. Martin, PhD	\$282,150	NCI	Stabilized Microtubule Protrusions in Detached Mammary Epithelial Cells
<i>Psychiatry</i>			
Seth S. Himelhoch, MD, MPH	\$154,592	NIMH	Developing Telephone CBT for HIV-Related Depression
<i>Radiation Oncology</i>			
Alan E. Tomkinson, PhD	\$290,671	NIEHS	Roles of LIG3 and XRCC1 Genes in Genome Stability
<i>Surgery</i>			
Bartley P. Griffith, MD	\$762,284	NHLBI	Development of an Artificial Pump-Lung for Respiratory Failure

New Non-Federal Awards

(\$100,000 and above)

Name	Amount	Granting Agency	Grant Title
<i>Anatomy & Neurobiology</i>			
E. David Litwack, PhD	\$115,000	TEDCO	Regulation of Neuronal Differentiation by Nuclear Factor One Transcription Factors
<i>Biochemistry & Molecular Biology</i>			
Richard L. Eckert, PhD	\$328,165	TEDCO	Epidermis-Derived Multipotent Cells for Cell Therapy
<i>Center for Vascular & Inflammatory Diseases</i>			
Steven Zhan, PhD	\$115,000	TEDCO	The Role of Cortactin in Differentiation of Human Embryonic Stem Cells
<i>Medicine</i>			
Stephen S. Gottlieb, MD	\$147,433	Johnson & Johnson	IMPACT 12980; A Randomized, Multicenter Study to Evaluate the Pharmacokinetics, Pharmacodynamics & Safety of Rivaroxaban in Subjects w/ Acute (Open-Label, Active-Controlled) or Chronic (Double-Blind, Placebo-Controlled) Congestive Heart Failure
<i>Pathology</i>			
Robert H. Christenson, PhD	\$127,000	Inverness Medical Innovations	Core Lab for IMAGINE Study
Richard Y. Zhao, PhD	\$193,940	Abbott Molecular, Inc.	Emergence of HIV-1 Non-B Subtypes and Its Impact on Emergence of Drug Resistance, Viral Load Measurement and Response to Therapies
<i>Pediatrics</i>			
Ina Stephens, MD	\$118,255	GlaxoSmithKline	Phase III, Multicenter Study to Assess the Safety & Immunogenicity of GSK Biologicals MenACWY-TT Vaccine Coadministered with PedvaxHIB

Name	Amount	Granting Agency	Grant Title
<i>Pharmacology & Experimental Therapeutics</i>			
Laure Aurelian, PhD	\$311,837	TEDCO	Stem Cell Transplantation is Associated with HSV-Induced Severe Skin Eruptions
Paul J. Yarowsky, PhD	\$115,000	TEDCO	Targeted Therapy for Neurodegenerative Diseases with Magnetically Labeled Stem Cells
<i>Program in Oncology</i>			
Martin J. Edelman, MD	\$110,863	Endocyte Incorporated	0733 GCC: Protocol EC-FV-03: A Phase II Study of EC145 in Patients with Progressive Adenocarcinoma of the Lung
Stuart S. Martin, PhD	\$115,000	TEDCO	Novel Therapies to Destroy Circulating Breast Tumor Stem Cells
<i>Psychiatry</i>			
William T. Carpenter, MD	\$100,000	NARSAD	2008 Narsad Distinguished Investigator Award
<i>Shock/Trauma</i>			
Grant V. Bochicchio, MD, MPH	\$158,725	Johnson & Johnson	A Prospective, Randomized, Double-Blind, Double-Dummy, Multicenter Study to Assess the Safety & Efficacy of Doripenem Compared with Imipenem in the Treatment of Subjects with Ventilator-Associated Pneumonia
<i>Surgery</i>			
Matthew Cooper, MD	\$114,910	Astellas Pharmaceuticals	A Phase 2, Randomized, Open-Label, Parallel Group, Multi-Center Study to Assess the Safety & Efficacy of Alefacept in De Novo Kidney Transplant Recipients
Zhongjun Wu, PhD	\$257,150	Levitronix, LLC	Integrated Maglev Pump-Oxygenator for Respiratory Support

Can Forgiveness Affect Health?

It's possible that forgiving those who've wronged us, or feeling you've been forgiven if you've wronged another person, is beneficial for more than just our emotional health, according to Lydia Temoshok, PhD. Dr. Temoshok, professor, Department of Medicine, is studying how forgiveness affects the human body.

"Forgiveness matters in terms of health," said Dr. Temoshok, also director of the Behavioral Medicine Program at the Institute of Human Virology.

Hers is a controversial assertion, she admitted, but Dr. Temoshok has devoted her research to discovering more about it. Her field is psychoneuroimmunology, which examines the connections between psychological processes and the nervous and immune systems. She is exploring the idea that biological, psychological and behavioral factors all interact to influence the progression of diseases such as cancer and HIV/AIDS. So far, her results suggest she's on the right track.

Dr. Temoshok and her co-investigator, Rebecca Wald, PhD, assistant professor, Department of Medicine, had to lay some groundwork before beginning their studies of how forgiveness affects the wellness of patients living with HIV/AIDS. The team had to start at the beginning, explained Dr. Temoshok.

"There are skeptics of our research who believe that forgiveness is a fuzzy, spiritual concept that can't possibly be measured reliably and validly," she said. "We had to ensure our scientific methods would stand up to scrutiny."

Dr. Temoshok spent years developing an assessment model for forgiveness, a means of measuring whether patients have been forgiving, and whether they feel others have or have not forgiven them for past action. Her assessment model allows her to identify those patients who struggle with issues of forgiveness, and to determine what affect that has on their body and their illness.

Her findings seem to show patients who have not been forgiven, or who have not forgiven, are more likely to struggle with depression, anger and stress. They also report having a poorer quality of life. Dr. Temoshok and her team found that people with HIV who have issues with forgiveness are more likely to exhibit negative health behaviors. Those patients are less likely to adhere strictly to their prescribed HIV medication regimens and practice safer sex guidelines to prevent transmission. These behaviors, which seem to be related to forgiveness, have negative consequences not only for the patients, but for public health as well.

HIV/AIDS patients are particularly interesting subjects for such research, Dr. Temoshok explained, because of the nature of their disease. "There is such an intense fear and stigma still connected with HIV and AIDS," she said. "Many of these patients have strong feelings of shame or betrayal relating to how they were infected. For these patients, issues of transgression and forgiveness are typically experienced on many levels and in multiple relationships and contexts. They struggle with contradictions such as forgiving others while feeling they themselves are not worthy of such forgive-

ness. We've found that the psychoneuroimmunological effects of this struggle with forgiveness are quite complicated."

Dr. Temoshok and her team have shown in their published research that certain coping styles seem to be particularly harmful. Specifically, the team found ill effects in patients who employ a stronger coping style called "Type C." Type C coping is characterized by decreased awareness and expression of negative feelings and states in both patients and others. These patients tend to give inaccurately rosy reports of themselves as being forgiving, when in fact this is not



Lydia Temoshok, PhD

the case. They tend to suffer physiological consequences of this pent-up and unexpressed resentment, Dr. Temoshok's team has found.

For example, this Type C coping style is associated with higher production of a pro-inflammatory cytokine called IL-6, which can synergize immune activation and viral replication. The research team also has found patients with Type C coping suffer from decreased production of a key anti-HIV chemokine. This leads to higher heart rate reactivity to and slower recovery from an experimental stressor. This physiological evidence seems to indicate that healthy coping, forgiving others and feeling forgiven, could have positive effects on these same immunological factors that are so important to the progression of HIV/AIDS, according to Dr. Temoshok and her team.

Her research suggests that treating such patients needs to include both expensive medical interventions and lower-cost techniques aimed at helping people manage their common underlying needs for spiritual meaning. Dr. Temoshok has found that when patients receive help with issues such as forgiveness and quality of life, it improves their health outcomes as well as those of their loved ones. "It's important to develop interventions aimed at enhancing quality of life, including forgiving and feeling forgiven, and evaluate the extent to which both quality and quantity of life improve," she said.

Dr. Temoshok has addressed a unique community with her findings, since forgiveness is an issue that concerns far more than just scientists. It is a topic of great interest to the spiritual and religious communities as well. "I've found it's crucial for me to reach out to spiritual leaders and followers, to reassure them we are not doing an injustice to a complex concept that has been a cornerstone of the world's major religions for thousands of years," she said. To that end, she has presented at a number of peer-reviewed scientific meetings and published her research in academic books and journals—and, last April, she lectured on her findings at St. Timothy's Episcopal Church in Catonsville, Md.

"The questions posed by the academic and church audiences were quite different," Dr. Temoshok said. "But both audiences appreciated that I was studying forgiveness carefully in meaningful contexts and finding results that confirmed what they believed: Forgiveness lends itself to good health." 



It's possible that forgiving those who've wronged us, or feeling you've been forgiven if you've wronged another person, is beneficial for more than just our emotional health.

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E. Albert Reece, MD, PhD, MBA

Vice President for Medical Affairs, University of Maryland
John Z. and Akiko K. Bowers Distinguished Professor and Dean,
University of Maryland School of Medicine

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Three Faculty Members Awarded Professor Emeritus Appointments

Three educators received professor emeritus appointments from Dean E. Albert Reece, MD, PhD, MBA, at the November 2008 Council Meeting, acknowledging their years of dedication to the school and to their fields of expertise.

Kenneth P. Johnson, MD, professor emeritus, Department of Neurology, served as chair of the Department of Neurology from 1981 to 2001. During Dr. Johnson's tenure, the department grew from eight to 35 faculty members with strong programs in stroke, epilepsy, neuromuscular disease and movement disorders. Dr. Johnson's interest in recovery from neurologic insult and in rehabilitation activities to improve function led to the department assuming responsibility for all rehabilitation activities in the University of Maryland Medical Center, and, subsequently, the establishment of a strong rehabilitation program at Kernan Hospital.

When he first became chair, there were no treatments recognized and approved to alter the course of multiple sclerosis (MS). Dr. Johnson and his colleagues conducted the majority of their studies on various types of interferon as potential MS therapies. This work led to FDA approval of beta interferon as the first drug available for the treatment of MS. During the same time, he became the national director for the Copaxone trial, which also led to FDA approval of a second MS therapy drug, Copaxone. These activities led to the founding of the Maryland Center for Multiple Sclerosis in 1983. This center is a major referral center for MS in the Mid-Atlantic area and continues to care for over one-third of the MS patients in the region.

Dr. Johnson's research career has been supported by 30 years of uninterrupted National Institutes of Health (NIH) research funding, with additional support from the National Multiple Sclerosis Society and the Veterans Administration Research Service. In 2000, the American Academy of Neurology and the National Multiple Sclerosis Society in New York awarded Dr. Johnson the Annual Dystel Prize for Outstanding MS Research. Dr. Johnson will continue to be active in the Department of

Neurology teaching residents and fellows and in the MS center leading new research initiatives.

Prasanna Nair, MBBS, MPH, professor emeritus, Department of Pediatrics, has been with the School of Medicine since 1963, serving and excelling as a clinician, administrator, educator, researcher and patient advocate. From 1967 through 1985, she provided care to children through the department's Community Pediatric Center, the first multidisciplinary health center for children in Baltimore. For 10 years she served as the director and was instrumental in developing needed services for low-income families. At the onset of the AIDS epidemic, Dr. Nair founded the SPICE (Special Parent Infant Care and Enrichment) Clinic to care for infants of HIV-positive women. She integrated colleagues from multiple disciplines and took a broad perspective toward the health and well-being of infants who had been exposed to HIV.

In 1987 Dr. Nair obtained a three-year grant from the National Center for Abuse and Neglect to conduct a trial of home visitation among prenatally substance-exposed infants and their families. In 1991, she was awarded an R01 grant from the National Institute on Drug Abuse (NIDA) to conduct an expanded trial on this same topic. A competitive renewal was funded by NIDA through 2004, and in 2005, NIDA renewed this grant for the third time.

Dr. Nair has educated medical students throughout her career. Long before competency-based training became integral to medical education, Dr. Nair developed a curriculum, a tutoring guide and exams to ensure that students gained the required knowledge and skills in pediatrics, and from 1985 to 2000, she served as the director of the Pediatric Clerkship.

In honor of her contributions to the children of Baltimore, she was inducted into the Maryland Women's Hall of Fame in 2007, a distinct honor for women who have made unique and lasting contributions to the state. She is retired now but will continue to teach on an occasional basis.

David J. Silverman, PhD, professor emeritus, Department of Microbiology & Immunology, has dedicated 35 years of teaching, research and committee service to the School of Medicine. He has taught second year medical students since 1973 and was the first course director for the Host Defenses and Infectious Diseases (HDID) course after the reorganization of the medical student curriculum in 1994. He has served as head of the HDID Bacteriology Section from 1994 to the present, has lectured in numerous graduate student courses and was director of the Graduate Program in Molecular Microbiology & Immunology from 1979 to 1991.

Dr. Silverman has rendered outstanding service on many committees including the Curriculum Coordinating Committee, the Advancement Committee, the LCME Self-Study Committee and the search committees for associate deans for Student Affairs and Medical Education. He has served on the Admissions Committee since 2002 and on the Appointments, Promotions & Tenure Committee from 1995 to 1999, where he was chair for two years.

Dr. Silverman's research interest involves the pathogenesis of disease due to bacteria in the genus *Rickettsia*. In particular, Dr. Silverman investigated the interaction of *Rickettsia* and endothelial cells, focusing on oxidant-mediated cell injury, antioxidants and ultrastructure studies. He is particularly skilled in electron microscopy, receiving awards from the American Society of Clinical Pathologists. He was president of the American Society for Rickettsiology from 2003 to 2006 and his research was continuously funded by the NIH from 1980 until shortly before he retired in December 2007. In spite of his retirement, he continues to make important teaching and service contributions. 



(L-R) Dean E. Albert Reece, MD, PhD, MBA, stands with Prasanna Nair, MBBS, MPH, Kenneth Johnson, MD, and David Silverman, PhD, after each of them were newly minted as professor emeritus.

SOMnews

UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE JANUARY 2009 VOL. 10 No. 5

SOMnews is produced by the University of Maryland School of Medicine, Office of Public Affairs
▶ E. Albert Reece, MD, PhD, MBA, Vice President for Medical Affairs, University of Maryland, and
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