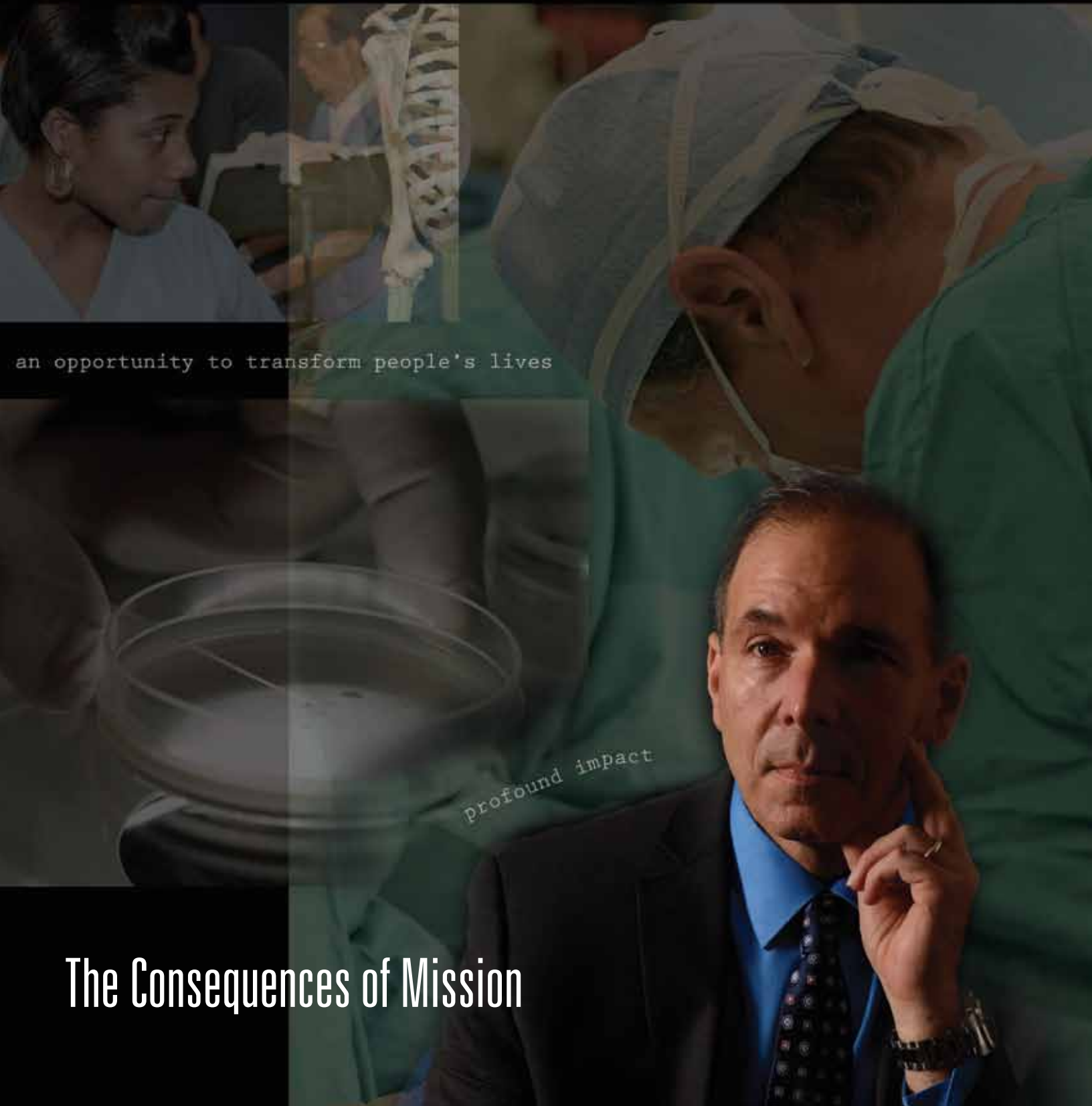




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The Consequences of Mission

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MedicineBulletin

University of Maryland Medical Alumni Association & School of Medicine



features

The Consequences of Mission 8

On all three fronts—education, research and clinical care—philanthropy is playing an increasingly pivotal role in the success of the medical school. As examples, writer Rita Rooney examines three recent outcomes at Maryland, and then visits with Brian DeFilippis, the school's associate dean for development, to learn about the school's most ambitious endeavor.

Cover photo of Dr. Iacono by Mark Teske

Alumna Profile: Kristin Stueber, '69 18

Perspective

The 2014 recipient of the Medical Alumni Association Honor Award & Gold Key is Kristin Stueber, '69. In addition to a distinguished career in Maryland's division of plastic & reconstructive surgery and serving as chair of a similar department at Baystate Medical Center in Springfield, Mass., she has made more than 20 medical missionary trips abroad treating children with injuries and birth defects.



Alumnus Profile: Robert Greenspan, '71 20

Lessons from the Past

While in medical school Robert Greenspan, '71, developed a passion for antique medical books and artifacts and soon began collecting them. Some 40 years later this practicing nephrologist is owner of one of the world's most complete collections and has authored arguably the best documented history of medicine to date.



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Academic medicine matters because it promotes the best health care for patients, rooted in rigorously conducted fundamental and translational research. One of our biggest challenges is, not simply to keep pace, but to stay ahead of the trends in biomedical research because these changes dramatically impact training and medical care. Because the future of medicine will focus less on a vast fund of knowledge and more on excellent analytic and critical thinking skills, we must stay mindful of our multiple missions: training the next-generation of healthcare professionals, as well as emphasizing the importance and impact of research and discovery.

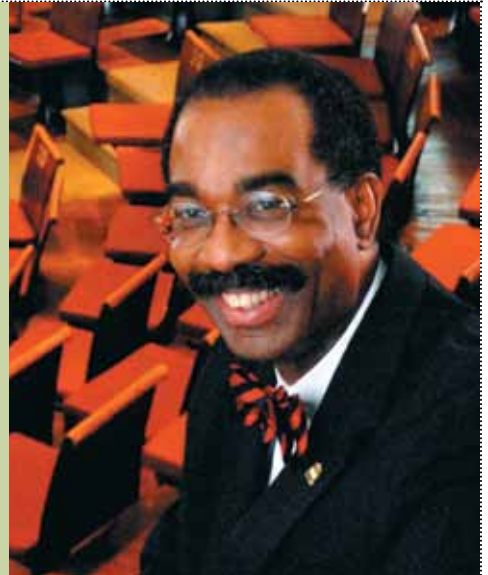
However, to truly transform medicine beyond imagination, we must have the resources available to support all our endeavors: from recruiting the best talent to serve on faculty and other leadership positions within the school, to supporting students and fellows just beginning their career journeys, to honoring our world-class researchers and clinicians with endowments, to funding the continuance of the superior work at our institution. We also have ambitious goals for our future. For example, we want to promote collaborative projects across the medical school that answer some of the most difficult “Big Science” questions in research today, related to brain science, cancer biology, chronic and infectious diseases, and transplantation, among others.

As we all know, challenging times are upon us. Sequestration has deeply affected the biomedical research and healthcare enterprises—the cornerstones of our academic medical institution. The cuts enacted in March 2013 could set back progress in clinical trials of new treatments for patients in dire need of novel therapies and reduce staff needed to give that care. Reduced budgets also threaten to severely diminish the pipeline of young investigators and new research projects required for science to thrive. Now, more than ever, we are turning to private support to further our mission, to ensure our success, and to guarantee that the legacy of academic excellence is carried through to the next generation. Therefore, the theme of this issue is the importance of philanthropy on the continued stability and prosperity of the school, which ultimately and deeply impact the lives of our faculty, students, fellows and patients.

This month, we share a story from one of our grateful patients, who received a life-saving, life-altering, double-lung transplant from two of our world-renowned transplant physicians, **Aldo Iacono, MD**, and **Bartley Griffith, MD**. This patient is now thriving because of the treatment received at Maryland. We also highlight the research of **Barney Stern, MD**, and **J. Marc Simard, MD, PhD**.

Their investigation of glyburide, a drug used to treat diabetes, to reduce brain swelling, neuron loss and death after stroke in animal models, was initiated due to a generous gift from a former patient. This work will continue thanks to support from the Greenebaum family, friends of the school who have championed our research and clinical efforts for many years. The generosity of private donations has made possible the education of one of our current students profiled in this issue, **Jennifer Colgan**, a fourth year planning a career in pediatrics. Finally, I encourage you to read the piece on director of development, **Brian DeFilippis, MS**, who discusses the progress on our current giving campaign, and the specific goals we aim to achieve.

Despite the myriad challenges we faced this year, our school has prevailed thanks, in a large part, to the private philanthropy we have received. I am confident we will continue to thrive for years to come and extend my gratitude for your unwavering support. 🏛️



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

The theme of this issue is the importance of philanthropy on the continued stability and prosperity of the school, which ultimately and deeply impact the lives of our faculty, students, fellows and patients.

EVENTS

NIH Director Keynotes Inaugural Festival of Science

The medical school launched a major initiative in November, Accelerating Innovation and Discovery in Medicine (ACCEL-Med), to increase the pace and scope of clinical and basic sciences research that will dramatically impact and improve human health and well being. It was kicked off with a full-day symposium called The School of Medicine Festival of Science. Francis Collins, MD, PhD, Director of the National Institutes of Health, delivered the inaugural keynote address.

Additional speakers, representing the school's institute for genome sciences, department of pharmacology and department of surgery, reflected a sampling of Maryland's basic, translational and clinical research portfolio.

Collins addressed the current environment for biomedical research, including the need for advancing discovery through technology and translational sciences, the importance of continuous innovation and the



Francis Collins, MD, PhD

economic benefits of medical research. A cornerstone of the ACCEL-Med initiative is an external scientific advisory council consisting of five internationally acclaimed biomedical researchers and physician-scientists who will provide critical advice on Maryland's research, programs and plans, as well as guidance and support for junior faculty presenters.

Members of the first council include Rita Colwell, PhD, former director of the National Science Foundation; Carol Greider, PhD, co-recipient of the 2009 Nobel Prize for Physiology or Medicine; **Philip Needleman, PhD '64**, former president of Searle research & development; Ralph Snyderman, MD, chancellor emeritus at Duke University (who will serve as this year's council chair); and Elias Zerhouni, MD, president of global research & development at Sanofi and former NIH Director.

EVENTS

MAA to Honor Stueber '69 & Knipp '76



Kristen Stueber, '69, has been named recipient of the 2014 Medical Alumni Association (MAA) Honor Award & Gold Key.

Stueber is a former Maryland faculty member in the division of plastic & reconstructive surgery (see profile on page 18) who later served as chief of the department at Baystate Medical Center in Springfield, Mass. She has participated in more than

20 overseas medical missions to improve the lives of children in third-world countries. Her award has been presented since 1948 for outstanding contributions to medicine and distinguished service to mankind.



Harry C. Knipp, '76 is to receive the MAA Distinguished Service Award, presented since 1986 for outstanding service to the MAA and medical school. He is a member of both the University of Maryland School of Medicine Board of Visitors and University of Maryland Baltimore Foundation, having served as president

of the MAA in 1993. Knipp has continued his relationship with the MAA, currently serving as a member of the *Bulletin* Editorial Board. He also organizes his class reunion every five years. The awards are to be presented during the 139th MAA reunion on May 2, 2014.

EVENTS

Davidge Elm Adjusting to Surroundings

One year after its relocation to campus, **Davidge Elm II** is healthy and reported to have grown more than two feet since last October, according to the nursery overseeing its care. Raised as a mere clipping from the original Davidge Elm, the tree now stands over six feet tall, is encircled by daisies and protected by an iron fence. The original Davidge Elm stood beside the historic building from 1812 until 2001 when it was removed due to old age and disease. Clippings were taken to a nursery in North Carolina and about eight years later offered to alumni. One of them, purchased by **Richard L. Taylor, '75**, and wife Kathie, was gifted to campus last year during the building's 200-year anniversary celebration. Officials believe the elm could grow some day to a height of 90 feet.



NIH Renews Funding for Maryland Vaccine Research



Karen L. Kotloff, MD

Maryland's center for vaccine development (CVD) has received a renewed contract to conduct basic research and clinical studies of vaccines, diagnostics, and therapeutics. Support for this work to combat existing and emerging infectious diseases is provided by the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health (NIH).

NIAID has designated the CVD and eight other research centers throughout the United States as vaccine and treatment evaluation units (VTEUs). Under the 10-year contract, each institution has the potential to receive funding estimated to be up to \$135 million annually over a seven-year period. New projects will be awarded during the first seven years.

"Our CVD has long been a partner of the federal government in the clinical evaluation of vaccines. Renewal of our contract is a testimony to our expertise in helping protect people throughout the world against diseases that pose significant public health threats," says principal investigator, **Karen L. Kotloff, MD**, professor of pediatrics and medicine and head of infectious disease and tropical pediatrics.

According to Kotloff, the NIAID expanded its required scope of expertise to qualify as a VTEU for this most recent contract competition. "Future projects are likely to use molecular tools that are now available to design better vaccines and

to unmask signals that lead to immunity, while avoiding side effects," she says. As a result, the CVD team has augmented its multidisciplinary collaboration with colleagues at Maryland's institute for genome sciences and pharmacy school, both located on its Baltimore campus.

The new VTEU contract has more emphasis on international studies, compared with previous contracts.

"This emphasis on global health is a great match for the CVD because our center has a large geographic reach to facilitate clinical studies in several African and Asian countries as well as Santiago, Chile," says SOM dean **E. Albert Reece, MD, PhD, MBA**. "The Center's domestic and international staff include experts in a variety of fields, ranging from molecular biology and immunology, internal medicine and pediatrics, to epidemiology and biostatistics, positioning our school to contribute significantly to the development and testing of novel vaccines and novel vaccine delivery systems."

From its beginnings in the 1970s, under the directorship of **Myron M. Levine, MD**, the CVD has been an international leader in vaccine development, with major contributions against a wide range of infectious diseases including typhoid fever, measles, meningitis,

cholera, dysentery, malaria and influenza.

In addition to Maryland, the newly awarded VTEU sites include: Baylor College of Medicine, Cincinnati Children's Hospital Medical Center, Duke University, Emory University, Group Health Research Institute (Seattle), St. Louis University, University of Iowa, and Vanderbilt University.

The new VTEU contract has more emphasis on international studies, compared with previous contracts.



Transitions



Scott Thompson, PhD, was named chair of the department of physiology. He joined Maryland's faculty in 1998 and has held professorial appointments in the departments of physiology and psychiatry. Thompson received a PhD in neuroscience from Stanford University in 1986, before receiving a NATO fellowship to study at the Biozentrum of the University of Basel, Switzerland, and later at the Brain Research Institute of the University of Zurich. Postdoctoral training was completed in the department of neurology at Columbia University. In 1990, Thompson became an assistant professor at the Brain Research Institute, and in 1993 the University of Zurich awarded him his *habilitation*, a tradition dating back to the Middle Ages and the highest academic qualification a scholar can achieve in several European and Asian countries. Thompson has served as interim chair in the department of physiology since 2011.

Genetic Variation Increases Risk of Kidney Disease Progression in African Americans

New research provides direct evidence that genetic variations in some African Americans with chronic kidney disease contribute to a more rapid decline in kidney function compared with white Americans. The research, led by investigators from Maryland and Johns Hopkins University, may help explain, in part, why even after accounting for differences in socioeconomic background, end-stage kidney disease is twice as prevalent among blacks as whites. Results were recently published online in the *New England Journal of Medicine*.



However, people with two copies of the variant are at a higher risk for kidney disease.

The current research expands on these prior findings and demonstrates the effect of these variants on the progression of established kidney disease and development of end-stage renal disease; analyzes their role in black-versus-white renal disease

disparities; investigates their effect in patients with diabetes and observes the impact of blood pressure control on APOL1-associated disease progression.

According to Parsa, approximately 13 percent of the African-American population has two copies of the risk variants. Fortunately, most of those at risk do not develop kidney disease. The researchers analyzed the role of APOL1 gene variants in two longitudinal studies of patients with kidney disease: the Chronic Renal Insufficiency Cohort (CRIC) and the African-American Study of Kidney Disease and Hypertension (AASK), both sponsored by the National Institute of Diabetes and Digestive and Kidney Diseases, part of the National Institutes of Health. Parsa examined the CRIC study data, while co-lead author and Johns Hopkins epidemiologist W.H. Linda Kao, PhD, MHS, analyzed the AASK data.

An estimated 20 million or more American adults have chronic kidney disease, and over 400,000 people in the United States and 2 million worldwide depend on dialysis to treat kidney failure. The study is available at NEJM.org, by referencing the November 9, 2013 issue.

“What we found is pretty remarkable—that variations in a single gene account for a large part of the racial disparity in kidney disease progression and risk for end-stage kidney disease,” says co-lead author and nephrologist **Afshin Parsa, MD, MPH**, assistant professor of medicine and member of the program in personalized and genomic medicine at Maryland. “If it were possible to reduce the effect of this gene, there could be a very meaningful decrease in progressive kidney and end-stage kidney disease within blacks.”

Previous landmark discoveries revealed that two common variants within a gene called apolipoprotein L1 (APOL1) were strongly associated with non-diabetic end-stage renal disease in blacks. Having only one copy of the variant APOL1 gene variant is associated with a health benefit—protection against African sleeping sickness, a potentially lethal parasitic infection transmitted by the tsetse fly, found only in sub-Saharan Africa.

Physician-scientist **Andrew N. Pollak, MD**, was named chair of the department of orthopaedics. A member of Maryland’s faculty since 1994, Pollak was named professor in 2004 and since 2012 has served as interim chair of the department. In his new role, he will also serve as chief of orthopaedics for the University of Maryland Medical System, coordinating efforts across its 12-member hospitals. Pollak earned his MD from Northwestern University in 1987 and received residency training at the University Hospital of Cleveland/Case Western Reserve University School of Medicine. He performed a research fellowship in musculoskeletal biology at Case Western and a fellowship in orthopaedic traumatology at the University of California Davis Medical Center.



Transitions

Shock Trauma Tower Dedicated



In November the University of Maryland Medical Center (UMMC) dedicated its new Shock Trauma Critical Care Tower, marking the near-completion of 140,000 square feet of new space designed to care for the region's most critically ill and injured patients. Home to the world-renowned R Adams Cowley Shock Trauma Center, the new construction represents much-needed increased capacity. The original trauma space was designed to serve 3,500 patients a year, and has been operating at more than twice that capacity, serving more than 8,000 patients annually the last several years. The new space is nearly fully occupied with patients, with construction having been completed in stages to enable staff to expand into the new areas as soon as work was completed on a given floor or unit.

The new tower, with a public entrance on Lombard Street, houses nine floors of patient care space including 64 new patient rooms and 10 new operating rooms. The new space also enabled expansion of the adult and pediatric emergency departments at UMMC, and new

laboratory and pharmacy space. A new family and visitor lounge designed to serve the special needs of families dealing with the sudden traumatic injury of a loved one has also been added to the space.

On the roof of the new building is an additional helicopter landing pad, increasing to four the center's capacity to accept air medical transport. The new landing pad has been specifically designed to accommodate larger and heavier helicopters such as Marine One in the event of a necessary landing.

U.S. Air Force surgeons, nurses and technicians come to Shock Trauma for training through the center for sustainment of trauma and readiness skills (C-STARS) program. The new tower is to house a technologically advanced simulation facility, where teams can replicate conditions in the hospital and on the battlefield to enhance the skills of both civilian and military health care professionals.

The total project cost was \$160 million. \$35 million is being raised through private philanthropic donations; \$50 million has been provided for the project over the last five years from the State of Maryland, with an additional \$2 million from the federal government. The University of Maryland Medical System is the largest contributor to the project. 🏛️

REGRET

The Medical Alumni Association apologizes to **Brian J. Winter, '72**, for omitting his name from the class of 1972 listing of donors to the 2013 annual fund, published in its last issue.

What will your legacy be?

“This medical school gave me the greatest gift anyone can receive—a wonderful education. Through my legacy gift to the University of Maryland School of Medicine, I can pay it forward to future generations of surgeon-scientists.”

Joseph S. McLaughlin, MD '56



Dr. Joseph McLaughlin—“Dr. Mac”—has been meaningfully involved with the University of Maryland School of Medicine for a half-century, from medical student to chair of the Department of Surgery, and now as an active volunteer. His bequest ensures that the School’s reputation of excellence continues.

Legacy gifts cost nothing upfront. You can customize your gift to suit your income, retirement, and estate-planning needs, giving you the ability to adapt to changing financial situations.

You can designate a specific dollar amount or a percentage of your estate. You can also provide your loved ones with income for life through a charitable trust or charitable annuity with the University of Maryland Baltimore Foundation.

Your gift can be used to build an endowment, support faculty, advance research, or provide scholarships. The Dr. Joseph S. McLaughlin

Professorship will provide a perpetual stream of support for future cardiac and thoracic surgeon-scientists who will combat heart disease and improve treatment. Alternatively, your gift can be unrestricted, supporting the School’s critical needs.

Whatever form your legacy gift takes, you will find it very gratifying to support the School of Medicine.

*PLEASE NOTE: Legacy gifts should be made payable to the University of Maryland Baltimore Foundation, Inc., for the benefit of the University of Maryland School of Medicine.

For more information about bequests, please contact:

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By Rita M. Rooney

The Consequences of Mission

The mission of any institution must be measured by outcomes. At Maryland, a three-pronged program: education, research, and clinical care drives a mission focused on results; outcomes that leave an indelible impact on lives.

Ask Hamish Osborne. A Florida resident and 1986 graduate of the University of Maryland Carey School of Law, Osborne was diagnosed with idiopathic pulmonary fibrosis in late 2011. He flew from his home in Florida to Maryland, was treated by his personal physician and returned home, feeling much better. As time progressed, he was increasingly weak, but as he recalls, “not off a cliff.” He and his wife, Christy, took off for a dream vacation in South Africa.

“By the time we returned, I was on three liters of oxygen, and it wasn’t helping,” he says. “I was admitted to the local hospital, where the staff pulmonologist warned me to get to a major center in the event I needed a lung transplant.”

Osborne came back to Maryland, was hospitalized and treated by his doctor, then released with instructions to stay close. In time he was admitted to Inova Hospital and placed on the transplant waiting list.

Two weeks later, there still was no lung available. His daughter emailed everyone on his rolodex and, as a result, he was referred to Bartley Griffith, MD, Thomas E. and Alice Marie Hales Distinguished Professor in Transplant Surgery. Christy called Griffith who told her that, given the fact that doctors at Inova had approved Osborne for a transplant, and organ availability differs from state to state, he believed Maryland could help.

Osborne recalls. “It was about 5:00 a.m., the next morning when Dr. Iacono walked into my room and assured me Maryland would try to get me the transplant I needed. A few days later, at 6:30 a.m., I got word that a lung had been procured. I was helicoptered to Shock Trauma and in surgery by 8:00 a.m.”

Aldo Iacono, MD, professor of medicine and medical director of transplantation, says, “At the time, Mr. Osborne had endstage lung disease and perhaps days to live.”

Photo by Richard Lippenholz



“My doctors laid out the choices and told me that, either way, my chances for long-term survival were not good. However, they believed I would fare better with a transplant. For me, it was a no-brainer.” HAMISH OSBORNE

How does a person prepare for such a surgical procedure? “By that time, I had come to grips with the possibilities facing me,” Osborne says. “I knew I might die. I also knew the alternative to surgery wasn’t good. I’d be bedridden, unable to do anything for myself. I placed my faith in God and my doctors, and decided on the transplant.”

The surgery went well and Osborne appeared to be recovering. Then, a few weeks later, he suffered shortness of breath.

“We cultured the donor lung and found a fungus infection called mucormycosis,” Griffith says. “In my entire transplant career, I had only seen this a few times. Worldwide data on this infection is that it is almost always lethal. We first treated him with anti-fungal medications, but his condition deteriorated. It was time for a fateful decision.”

Osborne isn’t likely to forget the day he was given an option: Do nothing or agree to a second transplant. This time, it would be a double transplant because the infection in one lung inevitably would extend to the other.

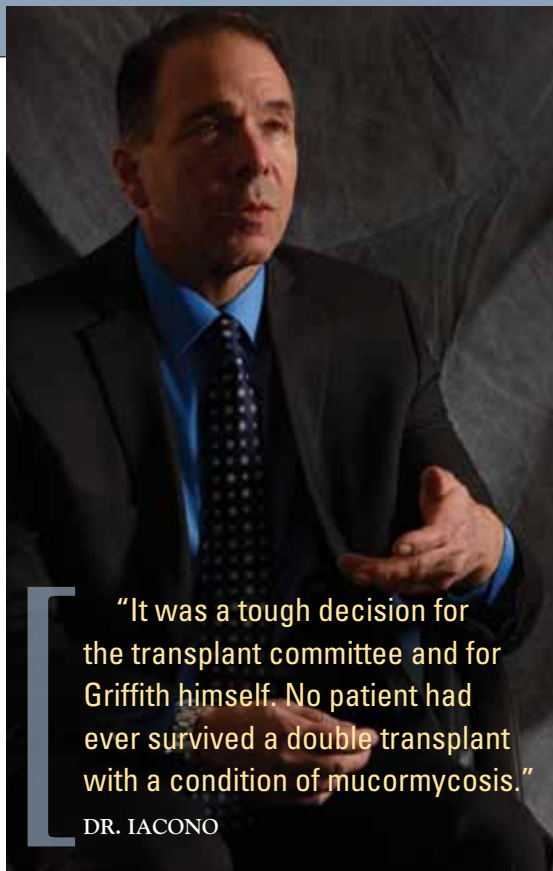
“My doctors laid out the choices and told me that, either way, my chances for long-term survival were not good,” Osborne says. “However, they believed I would fare better with a transplant. For me, it was a no-brainer.”

“It was a tough decision for the transplant committee and for Griffith himself,” Iacono reports. “No patient had ever survived a double transplant with a condition of mucormycosis.”

He recalls Griffith’s reaction was that just because it had never been successful was no reason it could not be. A further argument was that, without the transplant, it was highly unlikely Osborne would live.

It was a long recovery from the second surgery, complicated by a bleeding ulcer and third surgery. Two months later, in April, Osborne was released, a happy and grateful man. By late June, he played nine holes of golf. Today, he plays 18 holes four times a week.

The Osbornes’ gratitude to the medical school is reflected in their gift of an endowed professorship for Iacono, who remains his pulmonologist, and will now have a leadership role in the development of a new end-stage lung care program. This endowed professorship provides



“It was a tough decision for the transplant committee and for Griffith himself. No patient had ever survived a double transplant with a condition of mucormycosis.”

DR. IACONO

Iacono with dedicated time and resources to develop a sophisticated program using innovative, evidence-based techniques to improve outcomes for patients with advanced lung disease.

“It’s just our way of saying thanks,” he says. “We want to help those with end-stage lung disease who don’t have the resources or family support I had.”

Education

Not every mission is reflected in immediate outcomes. The rewards of education are gradual, though the prediction for those rewards are embedded in Maryland’s 200-plus year history. Jennifer Colgan, ’14, is slated for primary care pediatrics, and says her criteria for a residency program include a strong focus

on disease issues that follow children to adulthood, including obesity.

“I also want to be in an environment in which I can care for underserved populations,” she says.

In fact, Colgan’s community service roots go back to high school. She worked with Habitat for Humanity in Gulfport, Mississippi, one year during spring break. For two years, she served as a volunteer with the Esperanza Foundation, tutoring English to second language students.

In her senior year at Loyola University Maryland, she spent 10 days on an immersion service trip to Tijuana and Mexicali where she did everything from cement mixing to bee farming. Prior to the excursion, she helped plan a campus-wide fund-raising auction.

Her penchant for service did not end in medical school. “It’s more difficult to find time now,” she admits. “Medical school is my highest priority. However, if you’re really passionate about something, you find the time.”

Colgan immediately became involved in the University of Maryland Community Connections, an in-depth service project designed in collaboration with Parks and People to provide a nutrition curriculum at SEED School of Maryland. Another activity for which she found time is the One Love Foundation, an organization directed to awareness of domestic violence. She went to high school with someone who lost her life to such violence, and it has since become an issue important to her.

Pediatrics was not a difficult decision for Colgan, but she

Dr. Iacono can be contacted at aiacono@medicine.umaryland.edu and Dr. Griffith at bgriffith@smail.umaryland.edu

admits that, at first, she was interested in everything until her enthusiasm for working with youngsters finally won her commitment.

“Earning a child’s trust, developing a relationship that helps a sick child, what could be more rewarding than that?”

Colgan, who has always been at the head of her classes academically and attends Maryland on a merit scholarship, has served on the admissions committee reviewing potential candidates for the freshman class.

The scholarship that benefits Colgan and others helps the school attract the best and brightest and also allows the student to pursue a specialty without the burden of excessive debt.

“Maryland gets some really excellent applicants,” she says. “What I look for is that extra dimension that separates them from the rest. The real key, I think, is compassion and how well this person will relate to a patient.”

She adds that she believes the scarcity of primary care physicians in the future will make doctor-patient relationships critical, and that compassion will be more important than ever.

Donna Parker, ’86, associate professor of medicine, and associate dean for student affairs, describes Colgan as one of those likely to honor the school, surely an “outcome” of which to be proud.

“Jennifer can always be counted on to serve both the school and the patients of Baltimore,” Parker says. “She is able to develop good relationships with the most challenging patients. Her record of volunteer and service activities underlines the best in the medical profession. She has a wide range of interests and is strong academically”

It seems Colgan thinks as highly of the school. “I am so grateful for the influence of Maryland in my life,” she says. “The faculty and training have been incredible. When I interviewed here for my residency recently, I realized how much I admire the program.”

Research

While laboratory discoveries can be slow to mature beyond promise, some backed by extraordinarily skilled investigation, receive early encouragement. So it is with the collaborative work of J. Marc Simard, MD, PhD, professor of neurosurgery, and Barney J. Stern, MD, professor and interim chair,

department of neurology. From lab to clinical applications, the pair have advanced the treatment of a most devastating form of stroke.

Stern explains that when a large part of the brain is deprived of its blood flow, it will swell. “Unlike a swollen ankle that swells into air, the brain is surrounded by skull and has no place to expand. Then healthy brain is pushed aside causing further brain distortion. If the swelling is severe enough, the person will die. This is called the malignant MCA (middle cerebral artery) syndrome.”

Various medications have been used to decrease swelling, none of which have been effective. Over the last 10 years, surgeons have performed decompressive craniotomies for stroke and brain trauma, removing part of the skull and allowing the brain to expand. While the surgery can be life-saving, patients often become wheelchair bound or confined to nursing homes. The procedure, which is performed at Maryland, is the only current therapy for the malignant MCA syndrome. However, a promising alternative, discovered by Simard, may change the implications of stroke in the near future.

Twelve years ago, Simard discovered a new ion channel. Channels generally have a significant impact on human health. Just a few years ago, a scientist was awarded the Nobel Prize for discovering the water channel, important for normal cell functioning. The ion channel discovered by Simard is a protein that gets inserted into the cell membrane, and allows ions such as sodium to go through the channel and across the membrane to provide more sodium when needed by cells.

“We discovered the channel in cells that were being isolated using a method we developed from the brains of rats,” Simard says. “Our intuition was to question if it was injurious in situations such as stroke and trauma.”

He explains that, once they understood the function of the channel, they were able to work their way backward to understanding in what conditions it might be present. After that, they explored the molecular constituents of the channel. That’s when they discovered that the part of the channel that determines whether it opens or closes is the same regulatory part used in pancreatic cells to control the release of insulin.

“That’s the connection!” Simard exclaims. “Nature designed



“Maryland gets some really excellent applicants. What I look for is that extra dimension that separates them from the rest. The real key, I think, is compassion...”

JENNIFER COLGAN, '14

Studio photos by Mark Teske

two different channels for ions that work in different ways. Therefore, a diabetes drug available for about 20 years could now be applied to these conditions of stroke and trauma.”

There was one downside to the discovery. The drug is available only in pill form. Stern points out that critically ill patients cannot always swallow a pill safely. So Simard quickly went to work on development of an intravenous preparation of the drug glibenclamide. Results showed immediate and promising results in studies with rats.

A \$40,000 gift from a patient of Stern helped fund an independent replication study necessary for pre-clinical trials to go forward with the pioneering work of the Stern-Simard team.

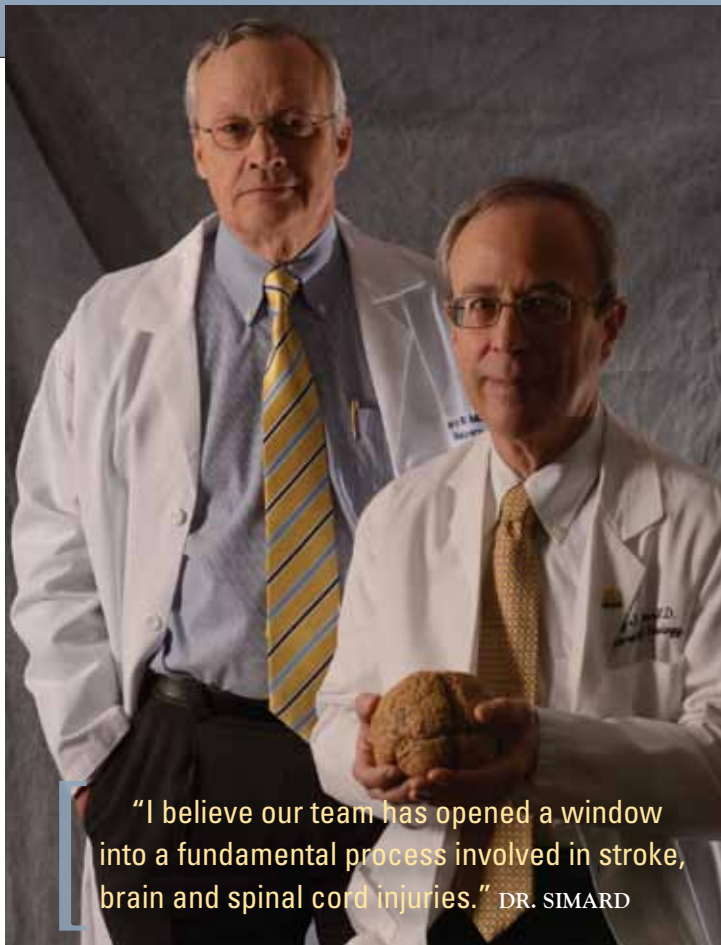
The team then conducted a pilot study of 10 patients at high risk for malignant MCA syndrome. Funded by Remedy Pharmaceuticals Inc., which holds the patent for the intravenous medication, it more than met expectations.

The key criterion for the study was that participants had to have MRI evidence of a stroke 82 cubic centimeters or greater in size. In other words, patients had to demonstrate high risk for the malignant MCA syndrome.

“Based on historical controls, we would have expected that six to eight patients would die or need decompressive surgery,” Stern says. “What occurred is that only two patients required surgery, one of whom died. When we looked at MRI scans of survivors, we saw that the anticipated swelling and shifting of brain did not occur.”

These exciting results have led to a larger study among 12 major centers across the country currently recruiting patients. At Maryland and some other centers, the trial is already underway. Funded by Remedy Pharmaceuticals at a cost of more than \$6 million, the GAMES trial, (Glibenclamide advantage in malignant edema and stroke) is planning to enroll 50 patients. Stern adds they hope to secure funding for a larger, more definitive study in the near future.

Simard concludes, “I believe our team has opened a



“I believe our team has opened a window into a fundamental process involved in stroke, brain and spinal cord injuries.” DR. SIMARD

J. Marc Simard, MD, PhD, and
Barney J. Stern, MD

window into a fundamental process involved in stroke, brain and spinal cord injuries. A relatively short time ago, we had no idea this molecule existed, and now we already have a drug that is potentially pivotal in treating strokes.”

Transforming Medicine

Inherent in the word “transformation” is an implication for the future. The stories of exceptional talent in education, research and clinical care featured here affirm Maryland’s current leadership in the school’s three missions. But to reach the pinnacle of the future, today’s achievements depend on the continued support of faculty, alumni, patients and the larger com-

munity of all those concerned about health.

In the midst of a \$500 million campaign, Brian DeFilippis, associate dean for development, reports, “We have a remarkable opportunity for alumni, patients, and friends, to do something that will have a profound impact on our institution now and in the future. It is an opportunity to transform people’s lives.”

DeFilippis suggests readers consider just a few of the outstanding programs and capabilities at the school today. Genome sequencing of newborns with severe medical problems can be performed in 48 hours after birth, providing information that can be used to better treat the infants. Maryland is one of only two hospitals in the country with this capability.

Faculty members are making milestones in microbiology research affecting transplantation immunology to improve post-graft tolerance of organs. Pioneering research is being done in exploring the chest cavity microbiome to determine if it can be used effectively in transplantation.

In education, a new program, foundations in research and critical thinking, requires students to engage in a series of lectures and discussions aimed at understanding and utilizing research in clinical practice and also participate in a research project at the completion of the first year. Students are using their own genome to study drug interactions. The result of such programs in which graduates can consider themselves physician scientists is well ahead of the crowd in preparing

Dr. Stern can be contacted at bstern@som.umaryland.edu and Dr. Simard at msimard@smail.umaryland.edu

tomorrow's doctors for the brave new world of health care.

He adds that not all gifts constitute a major endowment, but all contribute to the lives affected. A gift of \$25,000 would fund 160 students to complete the genome project, and provide genome testing for donors as well.

A reminder, he says, is that gifts of all amounts help support the Carolyn Pass and Richard Susel Academy of Educational Excellence through outright and planned giving. The academy, which historically has rewarded outstanding teachers, has expanded this year to honor novel teaching techniques, innovative curricular additions, and new software expertise employed by faculty.

The need, however, for endowed professorships and scholarships trumps other priorities, DeFilippis reports. "There is a misconception that a state institution doesn't need private philanthropy," he says. "The fact is we need



Photo by Richard Lippentholz

it now more than ever. In the current environment of reduced government funding, private philanthropy is not something that will fill in the gap. It is the sustenance that will allow us to go forward."

One of the most recent endowed professorships was awarded to Aldo Iacono, MD, making him the Hamish S. and Christine C. Osborne Endowed Professor in Advanced Pulmonary Care. As recorded in this feature Osborne survived a lung transplant, then a double lung transplant while suffering from a life-threatening infection. The professorship will help support Iacono's leadership in the development of a future center for end-stage lung care.

"We all are familiar with the shortage of federal dollars for research," DeFilippis says. "There are a reduced number of grants, and junior faculty members are those getting squeezed. Yet so often, they are the ones with new and novel

10-Story Health Sciences Facility III to Open in 2018

In September, Maryland dean E. Albert Reece, MD, PhD, MBA, joined University of Maryland, Baltimore (UMB) president Jay A. Perman, MD, in breaking ground for a 10-story, 428,000-square-foot, \$305.4 million research facility that will enable the school to retain its position as one of the leading biomedical research institutions in the world. It will be the largest building on UMB's campus.

The facility will provide both laboratory space and new technology for the school to continue advancing scientific discovery and breakthroughs in addressing the most critical disease categories. Maryland governor Martin O'Malley, Maryland lieutenant governor Anthony Brown, Baltimore mayor Stephanie Rawlings-Blake and several other dignitaries participated in the ceremony.

The medical school is committed to fund \$65 million of the total cost; the rest will come from State appropriations. The building, scheduled to open in January 2018, is the medical school's first new research building since the 2003 opening of Health Sciences Facility II, a \$78 million, 101,000-square-foot facility at the corner of Penn and Lombard streets. The first Health Sciences Facility opened in 1995, and is adjacent to the second building.

Health Sciences Facility III will be located on West Baltimore Street on the site of the old dental school building and directly across the street from the Bressler Research Laboratory. It will include landscaped outdoor space and a plaza for academic and social exchange among scientists, scholars and the University community.



Artist rendering of the Health Sciences Facility III

ideas—ideas that take years to develop. Many discoveries begin in basic laboratories and need the opportunity to develop over time."

He concludes by saying he hopes the school can convey to both an internal and external audience the existing need for support to give faculty the resources needed to translate proof of concept conclusions into the kind of life-saving programs that have characterized Maryland since its inception more than 200 years ago. 🏛️

Jennifer Colgan can be contacted at jennifer.colgan@som.umaryland.edu and Brian DeFilippis at bdefilippis@som.umaryland.edu

A Species of Rape?

Few figures loom larger in the history of Baltimore medicine than that of Howard Kelly, a New Jersey native who earned his MD from the University of Pennsylvania in 1882. Kelly became the founder of obstetrics and gynecology at Johns Hopkins when that institution's hospital opened in 1889 and again at its medical school when it began offering classes four years later. His record of publication and innovation—e.g., the eponymous Kelly Clamp—grew to be as extensive as that of any of his contemporary physicians, and he maintained a large private practice in Baltimore up until his death in January of 1943. He was also identified as a supporter of women's suffrage, and in 1901, Kelly paid for the casting of a large bronze medallion depicting Susan B. Anthony that went on prominent display at Bryn Mawr College. Yet Kelly throughout his long career remained an evangelical Christian who was not afraid to express his religious faith—some called it zeal—publicly and among colleagues. He was once parodied by H. L. Mencken for reading “two or three chapters in his Greek Old Testament before he...pulled out a pint of tonsils and eyeballs...pronounced a benediction and...raided a gambling house.” In accord with many evangelical activists during the early 20th century, Kelly was a strict prohibitionist as well as an opponent of birth control; he and his wife would raise nine children.

Howard Kelly's concern for the perceived morality of young women—specifically, evidence of their virginity until marriage—was shown at a professional meeting in October of 1897. He was addressing the Gynecological and Obstetrical Society of Baltimore on the topic, “Preservation of the Hymen,” when, after historical asides that included a reference to the ancient medical writer Celsus, he charged as follows:



Howard Kelly, MD

It has remained for our day and generation, at a time when a study of the diseases of women has become a fashion, for practitioners of medicine to ruthlessly disregard all moral considerations and make digital examinations of young women with pelvic pains at the menstrual period, or those presenting any abnormality in the menstrual flow or complaining of a leucorrhoea...I know not how else to characterize this cacoethes examinandi, this reckless habit of investigating the sexual organs of young women, than as a species of rape.

Much of Kelly's presentation at the meeting was concerned with the sort of surgical detail for which he was becoming famous, including use of a new and smaller speculum that he had developed, and with his cautioning of fellow physicians that they be as conservative as possible in treatment of the young women for whom they were given such intimate responsibility. Yet in the same paper he would also assert, without detailed evidence, that:

I know, for example, of a large institution in our city entrusted with the education of young women from all parts of the country. In numerous instances young girls with purely functional dysmenorrhoea are taken to a physician, who examines them, inserts specula, and institutes treatments where, as I have had occasion to verify, there is actually no discoverable local disorder whatever.

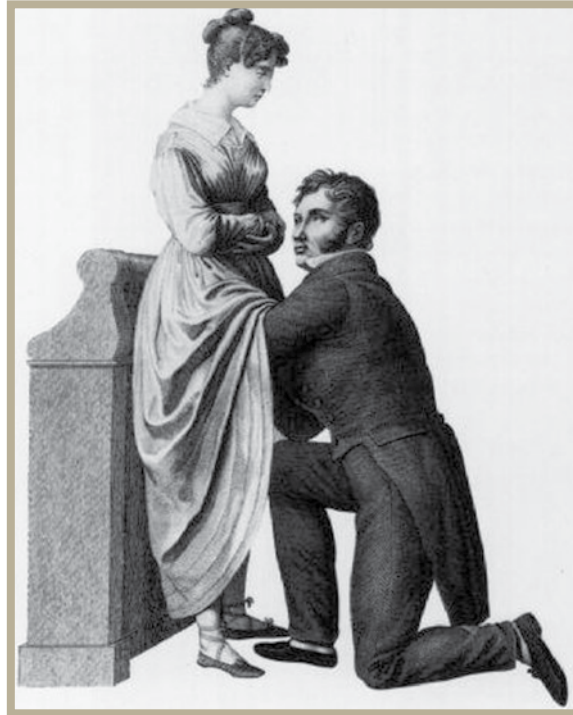
Was Kelly referring here to the Women's Medical College of Baltimore, which had opened in 1882 and would operate until 1910? His words are not specific, although he does go on to critique “the female physician” for doing “a complete investigation in every case...to insert her finger into the vagina; she generally ends by putting in a speculum, too, and tampons, and so begins a never ending course of ‘treatments.’”

Was Kelly implying that no woman could or should be trusted with the role of gynecologist? In notes to the meeting as they were published in January of 1898, some objections were raised to his accusations. Dr. W. E. Mosley went on record to say that “I am hardly willing to believe that the average physician is performing this form of rape that Dr. Kelly speaks of.” A physician identified simply as “Dr. Gibbons” maintained even more strongly: “If there is a sin in the making of these examinations it must be with the specialists, for I do not believe that the general practitioner as a rule makes these examinations.” Following other critical comments—some in support, some against—Kelly would finally aver:

I will insist, too, that while men are amongst the offenders, women are the chief ones, and they seem to think because they are women that they can do anything they please with women. I insist upon the moral obligation we are under to retain the only prima facie evidence of virginity, the hymen.

Kelly thereby connected his moral concern, or crusade, for the sanctity of young women prior to marriage with his growing professional standing to argue, in effect, against women becoming specialists in his field. He does not go so far as to argue against female physicians in general; yet his (possible) attack on the Women’s Medical College makes it seem likely that he was directing his fire against any woman who might be given the opportunity to commit a similar crime against a female patient. And why? *Magnumestcrimen* as Kelly gives it in Latin.

During the course of their discussion, one of the young but up-and-coming physicians present—J. Whitridge Williams, himself a Maryland graduate (1888)—may have attempted to diffuse the situation with a humorous reference to a Parisian physician from the era of Louis XIV. According to Williams, one could read in the textbook of that doctor, Pierre Dionis, as follows:



Drawing of a physician examining a woman’s abdomen, with “compromise” procedure, in which the physician is kneeling before the woman but cannot see her genitalia, 1822, by Jacques-Pierre Maugrier.

[Dionis] had read in Anatomies that there was a hymen... he had searched all over Paris in all sorts of women for one, and, never finding one, he had concluded that the statement in the Anatomies was a mistake.

With or without use of such acultural stereotype against French virtue, Williams could hardly have come out strongly against Kelly at the time: the latter was his boss. Williams would shortly become chief of obstetrics at Hopkins, and in 1911 he was made the Dean—ergo, Kelly’s boss; but at the meeting in 1897, a joke at the expense of French women may have been as far as his argument could go.

Howard Kelly’s reputation as a physician and surgeon was already strong. This may have been due to his being, as Mencken would later

(in 1956) write, “simply an extraordinarily skillful and successful virtuoso of technic, comparable to a champion golfer or a buck-and-wing dancer;” yet at the conclusion of the 19th century, he was in a position to influence medical education as well as technique. The suppression of women’s medical colleges that picked up steam after publication of Abraham Flexner’s 1910 *Report* on medical education cannot be laid at only his examination table, yet his voice in such a venue as a professional meeting of gynecologists in one of America’s leading medical cities would have carried much weight. Support for the idea that a woman might one day be able to act responsibly—and morally—as a gynecologist would have to wait. 🏛️



Author Wayne Millan has been working behind the scenes of Maryland’s historical CPC for the past decade. A teacher and historian, he recently entered the world of on-line learning by teaching an intensive class in Classical Latin through the George Washington University.

Appointments

❖ **Vasken Dilsizian, MD**, professor, department of diagnostic radiology & nuclear medicine, was elected to serve on the board of directors of the American Society of Nuclear Cardiology, as an at-large member, beginning January 2014.



Vasken Dilsizian, MD

❖ **Thomas Scalea, MD, FACS**, the Honorable Francis X. Kelly Distinguished Professor of Trauma Surgery and director, program in trauma, was elected president elect of the American Association of the Surgery of Trauma at its annual meeting in San Francisco last September.



Thomas Scalea, MD, FACS

Awards & Honors

❖ **Carissa Baker-Smith, MD**, assistant professor, department of pediatrics, received the Torchbearer Award by the National Coalition of 100 Black Women for her exceptional accomplishments in the area of pediatric cardiology. This award is presented annually to persons who have distinguished themselves by carrying the "Torch" in the areas of health, education, economic development, cultural arts, or social and political



Carissa Baker-Smith, MD

action. Baker-Smith was recognized at the Annual Torchbearer Awards Breakfast at Morgan State University last September.

❖ **Niharika Khanna, MBBS, MD, DGO**, associate professor, department of family and community medicine, visited the White House last September as a nominee for the "Champions of Change for Public Health and Prevention" award. Khanna received the recognition for her role in promoting advanced primary care practice and public health in Maryland.



Niharika Khanna, MBBS, MD, DGO

Grants & Contracts*

❖ **France Carrier, PhD**, associate professor, department of radiation oncology, and **David Weber, PhD**, professor, department of biochemistry & molecular biology, have been awarded a five year, \$1,592,565 National Institutes of Health (NIH) MPI RO1 award for "Rational Targeting of Protein Translation for Cancer Treatment."



France Carrier, PhD

❖ **Michelle Giglio, PhD**, assistant professor, department of medicine and institute for genome sciences, received a three-year, \$921,000 grant from the National Institute of General Medical Sciences at the NIH for her work entitled "Expansion and Integration of the IGS Annotation Engine."



Michelle Giglio, PhD

❖ **Karen Kotloff, MD**, professor, department of pediatrics and center for vaccine development, has received a 10-year contract from the National Institutes of Allergy and Infectious Disease designating the University of Maryland and eight other research centers throughout the U.S. as vaccine treatment and evaluation units. The contract provides up to \$135 million annually to conduct clinical trials and studies of vaccines, diagnostics and therapeutics to combat existing and emerging infectious diseases of public health importance.

❖ **Myron Levine, MD, DTPH**, the Grollman Distinguished Professor of Medicine and director of the center for vaccine development, has been awarded a two-year, \$997,960 grant from the National Aeronautics and Space Administration for his research project



Myron Levine, MD, DTPH

"Incorporation of Novel Attenuating Mutations Identified in Microgravity Conditions Into the Construction of a Live Bacterial Vaccine Against Enteric Fever Caused by *Salmonella Enterica serovar Paratyphi B*."

❖ **David Loane, PhD**, assistant professor, department of anesthesiology and center for shock trauma and anesthesiology research, was awarded a four-year, \$1,358,687 NIH RO1 research grant from the National Institute of Neurological Disorders and Stroke for his research on "Microglial Activation Phenotypes and Mechanisms of Repair In the Aged TBI Brain."

❖ **Emmanuel Mongodin, PhD**, assistant professor, department of microbiology & immunology and institute for genome sciences, received a five-year \$3,474,076 award from the U.S. Food and Drug Administration and the NIH for "Exploring Tobacco Microbial Constituents and the Oral Microbiome of Tobacco Users." **Claire**



Emmanuel Mongodin, PhD

Fraser, PhD, professor, departments of medicine, microbiology & immunology and director, institute for genome sciences, is co-investigator on this study.



Steven Prior, PhD

❖ **Steven Prior, PhD**, assistant professor, department of medicine, received a four-year, \$1,035,992 VA Merit Review Award for "Exercise Training, Circulating Angiogenic Cells and Vascular Function in Older Veterans With Impaired Glucose Tolerance."



Jacques Ravel, PhD

❖ **Jacques Ravel, PhD**, professor, department of microbiology & immunology, and associate director of genomics at the institute for genome sciences, received a four-year, \$947,148 grant from the National Institute of General Medical Sciences at NIH for his

research entitled "Modeling Diversity and Stability of Vaginal Microbial Communities," conducted in collaboration with the University of Florida. Ravel also received a five-year, \$2,698,000 RO1 grant from the National Institute for Nursing Research at NIH to study "Influence of Modifiable Factors on the Vaginal Microbiota and Preterm Birth." The grant was awarded in partnership with **Mary Regan, PhD, RN**, assistant professor, University of Maryland School of Nursing. In addition, he received a five-year, \$2,650,000 RO1 grant from the National Institute for Nursing Research at NIH to study "Revealing the Role of the Cervico-Vaginal Microbiome in Spontaneous Pre-term Birth." The grant was awarded in partnership with Michal Elovitz, MD, Professor, University of Pennsylvania.



Michael Shipley, PhD

❖ **Michael Shipley, PhD**, chairman and the Donald E. Wilson Distinguished Professor, department of anatomy & neurobiology, and also director of the program in neuroscience, received a five-year, \$1,630,940 NIH RO1 grant from the

National Institute on Deafness and Other Communication Disorders for his work on "Olfactory Glomeruli: Cellular and Network Mechanisms."

❖ **Scott Thompson, PhD**, professor and chair, department of physiology, received a five-year, \$1,177,808 training grant renewal from the National Institute of General Medical Sciences for the "Training Program in Integrative Membrane

Biology." The training grant was awarded with six pre-doctoral training slots.




Scott Thompson, PhD

❖ **Zhiyong Zhao, PhD**, assistant professor, department of obstetrics, gynecology & reproductive sciences, received a five-year, \$1.5 million NIH RO1 grant from the Eunice Kennedy Shriver National Institute of Child Health and Human Development for his research on "Protein Modifications and Unfolded Protein Response in Diabetic Embryopathy." 



Zhiyong Zhao, PhD


*Grants & Contracts of \$1 million and above



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[ALUMNA PROFILE]

PERSPECTIVE

Kristin Stueber, '69

NEPAL 2013: Sushmita, a recent college graduate, views her future with a kind of optimism her parents dared not anticipate 20 years ago. At that time, young Sushmita was suffering from serious facial burns demanding reconstruction and tissue transplantation that went beyond medical capabilities in her country.

Enter **Kristin Stueber, '69**, a plastic surgeon volunteering with Resurge (renamed Interplast), an international plastic surgery service organization.

It didn't take long for Stueber to recognize that the child, then five, needed the resources of a major medical institution, such as Baystate Medical Center, Springfield, Massachusetts, where she practiced. She assumed responsibility for getting clearances to bring the youngster to the U.S., as well as commitment from Baystate for total financial responsibility for her care. Sushmita and her father traveled to Springfield where Stueber further engaged the help of friends who took father and child into their home for the duration of their three-month stay. Stueber performed the extensive surgery required, and while minor evidence of malformation is present still, Sushmita now can breathe through her nose, which hadn't been possible in those early years. Most important, she leads an active life with friends, and has a future that might have evaded her had not fate and a caring surgeon entered her life almost 20 years ago.

Stueber is the Medical Alumni Association's 2014 Honor Award & Gold Key recipient. Established in 1948, the citation recognizes outstanding contributions to medicine and distinguished service to mankind. Asked her reaction to learning of the award, Stueber says, "I was embarrassed. I don't believe my work compares with that of other recipients, many of whom have made important scientific discoveries."

Perhaps such comparison is a matter of perspective. Consider Stueber's career. Following a distinctive decade in Maryland's department of surgery's division of plastic & reconstructive surgery, she became chief of plastic and reconstructive surgery at Baystate. She also served as division chief at Baystate's medical education and research foundation until her retirement in 2008. Her clinical career was punctuated by various research activities and grant support. But her professional life centered on more than the titles and scope of her work in this country.

Twenty-five years ago, Stueber joined other plastic surgeons on a trip to Nepal, the purpose of which was reconnaissance to determine the extent of needs among children with cleft palate and severe burn injuries. A secondary and personal objective for Stueber was the opportunity to hike the Nepalese countryside. It turned out to be a trip that changed her life. In the 25 years since then, she has returned to Nepal many times in addition to travel to Ethiopia, Ecuador, Vietnam, Peru and other countries for the purpose of treating children. In February 2014, she will go to Vietnam. It will be her 25th overseas mission on behalf of youngsters in developing countries.

Asked if the incidence of cleft palate and serious burns is more prevalent in these countries than in the U.S., Stueber reports it is hard to know because there are no

Stueber is the Medical Alumni Association's 2014 Honor Award & Gold Key recipient. "In addition to a distinguished academic career, Dr. Stueber's probono work overseas makes her the ideal candidate."



statistics to verify incidence. However, the absence of doctors, particularly those with surgical skills, is extremely high. In addition, there is no insurance or assistance for those who cannot afford to pay for care.

“Sometimes countries, such as Vietnam, have the infrastructure to support medical care,” she says. “They help getting us through customs and provide assistance that relieves us to focus on the purpose of our trip, the children.” Often, however, she admits that such help is scarce, and volunteer physicians are left to depend primarily on their own resources.

In addition to providing critical surgical services to children, Stueber and her volunteer colleagues provide training to local physicians. The problem in doing so, she says, is that there are so few doctors, and they are so overworked that they barely have time for their own caseloads, much less assume additional training.

“In spite of the conditions under which they often work, however, I’m constantly amazed by the level of sophistication and care these physicians provide their patients,” Stueber says.

One gets the sense that Stueber thoroughly enjoys her foreign volunteer work. On most occasions, she gets to hike through beautiful countryside, still a favorite activity at home or abroad. Beyond that, there is

In addition to providing critical surgical services to children, Stueber and her volunteer colleagues provide training to local physicians. The problem in doing so, she says, is that there are so few doctors, and they are so overworked that they barely have time for their own caseloads, much less assume additional training.

clearly no thought that she is making a sacrifice. In fact, when the suggestion is even implied, she tosses it off as irrelevant.

“There is no difference between a child in Ecuador or Massachusetts,” she says. “A child with a troubling illness deserves whatever help modern medicine can provide.”

Her post-retirement years stateside are a reflection of Kristin Stueber’s lifelong interests. She enjoys rowing, skiing and hiking. But she doesn’t just hike. She has about 50 acres of overgrown farmland attached to her property, and she is making plans to clear it and convert it to hiking trails available to the public. In the meantime, she hopes to engage the help of the local school system and encourage young people to assist in the project that will lead to the availability of a recreational environment for the whole community. In addition, she volunteers her skills at the local Shriners Hospital, caring for children whose families cannot afford the cost of operations necessary to repair serious cleft palate and other surgical needs.

Commenting on the alumni award, Stueber adds, “This is such an important honor. I’m so pleased to receive it because I feel it is probably being given on behalf of doctors who are doing the kind of thing I have enjoyed doing. There are so many who do so much volunteer work in so many ways. I’m very proud I will be accepting this honor on their behalf.”

Protagoras N. Cutchis, ’83, president of the Medical Alumni Association, comments, “In addition to a distinguished academic career, Dr. Stueber’s probono work overseas makes her the ideal candidate.”

Perhaps then, it all comes down to perspective on the importance of work done by doctors who, like Kristin Stueber, give more than asked for by their profession. Then again, the measure of a physician’s stature may be counted in the gratitude of his or her patients. After 25 years, Stueber still receives Christmas cards and occasional notes from Sushmita’s parents. 🏠

[ALUMNUS PROFILE]

Lessons from the Past

Robert Greenspan, '71

SOME MIGHT CONSIDER Robert Greenspan, '71, a collector, and he is that. Some might call him historian, and most certainly he is that as well. A nephrologist with a private practice in northern Virginia, Greenspan has personally collected what may be among the world's most complete assemblage of medical artifacts dating back to 400 BC, and

has written perhaps the best documented history of medicine to date.

It all began when, as a student at Maryland he passed the Old Hickory Bookstore, traveling daily from Baltimore to his parents' home in Silver Spring. He would frequently stop to peruse books and, before long, became focused on the shop's extensive number of books about medicine. He soon made a proud purchase of a used copy of Osler's *Principles and Practice of Medicine* at an antique medical book store in New York.

Asked to name his first collected artifact, he admits he doesn't remember what it was.

"In the beginning, I didn't think of myself as a collector, surely not to the extent that I've become," he says. "I began reading, then purchasing items in the early '70s. I'd go to stores that sold collectibles and, every once in a while, I bought an instrument."

It was when he began correlating the history of medicine with the artifacts, and how they were used that he really became serious. No subject, even those on the periphery of medicine, and that includes quackery, is beyond his study. Nor are pharmacology and dentistry overlooked. He was surprised to learn, for instance, that dentistry did not come into its own until the mid-19th century when Chapin Harris and Horace Hayden, teachers at the University of Maryland School of Medicine, wanted to establish a department of dentistry. The school's administration ruled against it, but the state legislature picked up the proposal, and the Baltimore College of Dental Surgery was chartered as the world's first school of dentistry. Some years later, it evolved into the University of Maryland School of Dentistry.



“Mine is a horizontal collection. I buy the most perfect example I can find of the first used instrument. If I find something better, I buy it and sell the one I own.”

While some enthusiasts may collect 20 stethoscopes or surgery sets, Greenspan's search is restricted to one, and in each case, the best in existence.

"Mine is a horizontal collection," he says. "I buy the most perfect example I can find of the first used instrument. If I find something better, I buy it and sell the one I own."

He is a constant seeker, searching as long as 30 years for some objects. He owns an original Laennec stethoscope, the first produced. He has some of the earliest surgical instruments including trepanning tools used by practitioners 1,000 years ago to drill holes in the heads of those suffering from anything from vertigo to stupidity to evil spirits. The "healers" supposedly were removing stones causing bizarre behavior. That practice is the antecedent of comments claiming a person has "rocks in his head."

Greenspan is the owner of one of only six first-generation ophthalmoscopes. He has early devices used for bleeding and a 16th century amputation saw. George Tiemann, the most famous producer of medical instruments in the 19th century, made a surgical set for display at the 1876 Centennial World's Fair in Philadelphia. He encrusted 50 rubies in it to celebrate his company's 50th anniversary coinciding with the fair. That set is now part of the Greenspan collection, along with two tickets to the fair and a 50-cent piece, the price of admission.

A casual visitor to Greenspan's museum might miss a seemingly insignificant copy of a diploma adorning a wall, but it tells the story of its owner's purpose behind his collection. His isn't the pride of ownership but the adventure of study. For years, he had sought a copy of the signature of Oliver Wendell Holmes, the Harvard anatomist and physiologist whose son with the same name became a US Supreme Court justice. When Greenspan saw an eBay posting of an 1861 Harvard sheepskin diploma, he enlarged it to see if it contained a Holmes signature. It did, and so he purchased it.

"When it arrived, the first thing I noticed was that it also bore the signature of Henry Bigelow, the surgeon who first reported the discovery of anesthesia," he says. It's enthusiasm like this that gives hint to the reason behind Greenspan's pursuit of medical artifacts. It isn't the instruments but the story behind them, and it is those stories that inspired him to write a book that explores medical history from its infancy.

Published in 2006, the 595-page *Medicine: Perspectives in History and Art*, was written, typed, edited and



published by Greenspan, who currently is working on the second edition. It has won three national book awards, and received auspicious reviews from the *Journal of the American Medical Association* and *New England Journal of Medicine*. Possibly what separates it from other books of the genre is impeccable research that personalizes it with quotes from those who lived and made the history it records. When Greenspan talks of leprosy in 1500, it is not through his words but from the ancient writings of one who witnessed it.

Greenspan admits his wife, Bonnie, a nurse whom he met when she worked at Maryland's hospital when he was an intern, does not share his enthusiasm for the artifacts that led to the expansion of their home and conversion of a garage. "The wife of a collector generally has three questions," he explains. "They are: why do you need this? How will you pay for it? And where are you going to put it?"

One of the most poignant stories to emerge from Greenspan's collection is one surrounding the Civil War Battle of Cold Harbor, Virginia. He has a touching copy of a letter from an 18-year-old Union farmer, Merari Bunajah Stevens, who fought beside his father, and who dug a bullet from his father's groin, staying with him until he died the following day. That letter is published in Greenspan's book. A few years after publication, he heard from a California woman researching the history of her Civil War ancestors. She contacted Greenspan to tell him she had the bullet. The young man who tried to save his father's life in battle was her great, great grandfather who carried the bullet home in his pocket. He lived to become a surgeon, and his two sons followed in his professional footsteps. Such is the drama uncovered by a physician whose exploration into medical history began with the purchase of a book in a second-hand store. 🏛️

Retiring Mackowiak Invested as History Scholar

Philip A. Mackowiak, '70, who recently retired as professor of medicine, vice chairman of the department of medicine, and chief of the medical care center of the VA Maryland Health Care System, has received a new title: Carolyn Frenkil and Selvin Passen History of Medicine Scholar. The endowed position was gifted to the Medical Alumni Association (MAA) by **Carolyn Frenkil**, a member of the school's board of visitors (BOV), and **Selvin Passen, '60**.



Carolyn Frenkil, Philip A. Mackowiak, '70, and Selvin Passen, '60

“I'm very proud that Maryland is not only encouraging this sort of scholarship, but rewarding it. And I'm honored and humbled by the appointment.”

“There aren't too many medical schools who can boast of having a scholar in residence,” Mackowiak said. “I'm very proud that Maryland is not only encouraging this sort of scholarship, but rewarding it. And I'm honored and humbled by the appointment.”

While best known for his work on the diagnosis, prognosis and treatment of fever, medical history has always been Mackowiak's passion. Since 1995, he has organized Maryland's Historical

Clinicopathological Conference, examining mysterious illnesses or unusual circumstances surrounding the deaths of famous historical figures and offering modern-day explanations. In addition, his second book *Diagnosing Giants: Solving the Medical Mysteries of Thirteen Patients Who Changed the World*, was released this past September.

Shortly after his investiture ceremony on September 26, Mackowiak formed a committee to help define

the scholar role. It is expected that he'll continue organizing lectures, conferences and symposia, and work with the curriculum committee to ensure that medical history is woven into classroom instruction. In addition, he'll be updating several books published by the MAA and school, and work closely with the university's librarian on matters relating to the historical collection housed in the Theodore E. Woodward Historical Suite of the university library.

Frenkil, widow of **James Frenkil, '37**,

has funded numerous projects around campus and, in addition to serving on the school's BOV, is a member of the Davidge Hall Restoration Committee. Passen is a past alumni president who continues serving on the budget & finance committee as well as the Davidge Hall Committee. The MAA endowment fund bears the Passen name, in gratitude for the support of son **Martin, '90**, and himself. 🏛️

Phonothon Nets \$121K in Pledges

ALUMNI AND STUDENTS raised \$121,725 in pledges during eight nights of calling last fall, as part of the Medical Alumni Association annual fund drive. It was the 36th consecutive year for the event, staged in historic Davidge Hall. This year 126 students participated, calling alumni as far away as Hawaii and Alaska. Callers received 598 pledges after speaking with 1,043 graduates. The annual fund runs through June 30, 2014; so if we missed you there is plenty of time to contribute to this year's effort. Gifts support a wide range of school needs as determined by the MAA Board of Directors, including financial aid for students, Davidge Hall conservation, and the dean's academic fund. 🏛️



Threats to Your Retirement*



This column is prepared by Ken Pittman, a senior vice president and senior wealth planner at PNC Wealth Management. Pittman provides wealth planning services and can be reached at 410.626.2104 or at kenneth.pittman@pnc.com

Thinking about retirement is no longer a future event for many Americans; most recognize the need for careful planning throughout their working years. Several threats to an individual's retirement should be considered, including the use of an inappropriate investment asset allocation, the possibility for a loss of purchasing power and the impact of significant changes in net worth.

Asset allocation is a term used to describe an investment strategy designed to balance risk and return by apportioning classes of assets, such as equity, fixed income and cash, within a portfolio. Selecting an appropriate long-term strategic asset allocation that matches an investor's goals, risk tolerance and investment holding period is vital to managing funds set aside for retirement—being too conservative or too aggressive could prevent an investor from meeting his or her goals within the appropriate time period. Federal Reserve flow of funds data suggest that investors have swarmed to fixed income instruments in recent years in response to the financial uncertainty stemming from the financial crisis. Investors that currently have an overweight allocation to the fixed income asset class may, with prudence, be able to better manage risks through a long-term approach to investing and strategic diversification.

Inflation can be a major threat to an individual's retirement aspirations. Although inflation has recently remained below the long-run average, investors preparing for retirement should be aware of the impact of declining purchasing power. This has particular importance for investors thinking about retirement because inflation chips away at purchasing power over time—the reduction in purchasing power is often difficult to see when it is happening, but it is very real. The consequences of a reduction in purchasing power are magnified when applied specifically to health care spending. Although it is not the most pleasant of topics to think about, it should be recognized that health care spending generally rises with age, and that such spending may make up a larger share of consumption in the retirement years than in a person's younger years.

Finally, a sharp drop in asset prices at the wrong time can be particularly troublesome for those approaching retirement age or to those that have already retired.

Once a person is nearing or has entered retirement, the ability to recover from a negative wealth shock, such as a significant decline in home value or investment prices, is greatly diminished. The recent decline in home prices has weighed heavily on household net worth, and remains a formidable threat for retirement. According to recent Federal Reserve data, a primary residence typically represents almost 30% of a family's assets (the largest single asset). Such a high concentration of a largely illiquid asset can quickly change the path of a retirement plan.

Retirement planning is an ongoing process that includes establishing and funding an investment portfolio designed to help meet cash flow needs, while preserving capital and managing risk. If you are planning for retirement or if you have already retired, you would be well served by seeking guidance from qualified wealth planning and investment management professionals to help you address these threats. 🏠

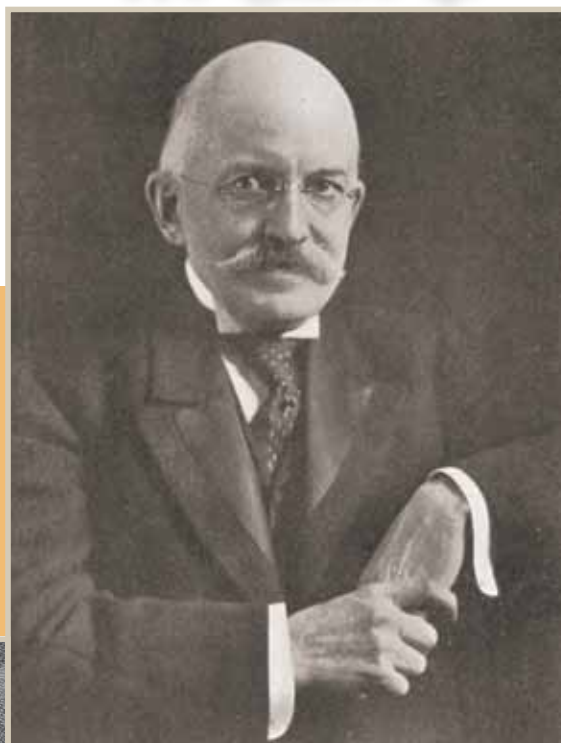
*This column includes excerpts from the PNC Investment & Portfolio Strategy publication entitled "Five Threats to Your Retirement," as written by E. William Stone, CFA®, CMT, Marsella Martino and Michael Zolier, in September 2013.

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110 Years Ago



In 1904, **Dr. Edward N. Brush**, professor of psychiatry at Maryland, was named editor of *American Journal of Insanity* (later known as the *American Journal of Psychiatry*). He served in this capacity until 1931.

20 Years Ago

In 1994, tuition and fees at Maryland reached **\$10,751** for in-state residents and \$20,851 for non-Marylanders. The \$10,751 figure compares with \$3,929 in 1984 and **\$1,070** in 1974.

200 Years Ago

In 1814, during the Battle of North Point during the War of 1812, **Samuel Martin**, class of 1813, charged onto the battlefield riding horseback to rescue Sgt. Alexander MacKenzie. He scooped up the wounded sergeant and carried him to safety. It was during this battle that Major General Robert Ross, commander of the British forces, was mortally wounded.

The death of British Major General Robert Ross at the Battle of North Point



recollections

A look back at America's fifth oldest medical school and its illustrious alumni

White Coats for Class of 2017



Photo by Mark Teske

Medical Family Day was held on November 7, 2013 at the Hippodrome Theater. This special event gives family members of first-year students a glimpse into what medical school is really like for the students. It is capped off by a ceremony welcoming the students to the field of medicine by presenting them with their first white coats.

“The white coat ceremony is a rite of passage. It symbolizes the beginning of your transition into the noble and privileged profession of medicine,” said **E. Albert Reece, MD, PhD, MBA**, vice president and medical school dean. “It is, however, so much more than a mere ritual for the privileged. For, to whom this great honor and privilege is given, your service, compassion and high ethical standards are expected in return.”

Before the coating ceremony, families were educated about the medical school experience. **David Mallott, MD**, associate dean of medical education, presented “What to Expect the First Year of Medical School,” telling families they would not be seeing much of their students in the next few years (unless, of course, there is a meal involved). “Being a med student is a full-time job,” he explained, stressing that students could only do that job well if they had the support and understanding of their families.

The families also had the chance to ask questions of a panel of medical school experts—**Donna Parker, '86**, associate dean for student affairs; **Sandra Dolan, PhD**, director of academic development in the office of medical education; Mindy Atlas, mother of a third-year medi-

cal student; **Paige Luneburg**, vice president of the class of 2014; **George Fantry, MD**, assistant dean for student research and education; and **Neda Frayha, '06**, associate professor of medicine and assistant dean for student affairs.

Frayha, who was chosen by the students to give the faculty presentation, encouraged the students to never lose sight of that joy. “As long as the physician and patient encounter matters, I think the white coat ceremony will be a part of our tradition,” she said. “With all the changes in medicine, all the new technology, physicians are still here, because that encounter matters. When patients are sitting one-on-one with a doctor, they don’t care about any of that other stuff, they just want the doctor to help them get better and feel better. That is the power that you have. Hold on to your passion and your compassion as much as possible as you get older.”

Started at Maryland in 1997, the ceremony formally presents first-year students with their white coats, long the symbol of physicians and scientists, after they have completed their first course in medical school—structure and development (aka anatomy). The coating is done by faculty to welcome their junior colleagues to the profession of medicine.

Students recited an oath acknowledging their acceptance of the obligations of the medical profession. They also added their signatures to the school’s honor registry, a leather-bound book provided by the Medical Alumni Association that is signed by all our medical students in their first year, in which they pledge to maintain integrity throughout their years in medicine. 🏛️

1940s | **1947: George W. Fisher** celebrated his 90th birthday last September and is enjoying retirement in southern California. ♦ **Sidney J. Venable** recently celebrated his 91st birthday, and he and wife Grace marked their 69th anniversary. The couple recently moved to Merion Station, Pa., to be closer to their daughter. **1949: James A. Vaughn Jr.**, of Coral Gables, Fla., married Phyllis Petersen.

1950s | **1951: Nancy B. Geiler** of Cincinnati, at age 87, is enjoying retirement and grandchildren. **1952: Howard N. Weeks** retired after practicing medicine in Hagerstown, Md., for 60 years. **1953: Rafael Longo** of San Juan is sorry he was unable to attend the 60th reunion last May, as he received stents and was recovering at the time. He extends best wishes to classmates and looks forward to the 65th. **1955: Richard F. Leighton** of Savannah, Ga., is serving a three-year term on the board of directors for Hospice Savannah, Inc., where he also sits on the community education and ethics committees. **1956: Stephen Barchet** of Issaquah, Wash., is a medical advisor to MedDev Corporation based in Stanwood and director on the board of Abri Corporation in Bellingham. Barchet is a fellow of the American Institute of Stress. ♦ **Clark L. Osteen** of Savannah, Ga., reports that granddaughter Sally recently began her first year at the Medical College of Georgia. ♦ **Richard L. Plumb** of Houston is enjoying part-time work in a pediatric outpatient clinic at the University of Texas since retiring last year. **1957: Herbert E. Brooks** of Bonifay, Fla., reports that he is alive and well, despite reports to the contrary! ♦ **Leonard M. Zullo** of Wellington, Fla., traveled in June to Southern Africa for his eighth successful big game hunt. **1959: August D. King Jr.**, and wife Netta of Annapolis, Md., celebrated their 55th wedding anniversary September 6, 2013, with their five children and 13 grandchildren. ♦ **William Kraut** of Venice, Fla., reports his family is growing with 14 grandchildren and four great-grandchildren. Sailing and medical mis-

sions keep Kraut busy. ♦ **Jose O. Morales** of San Juan is assistant professor—*ad honorem* in the department of medicine at the University of Puerto Rico School of Medicine. Together with **Carlos E. Girod, '61**, they teach professionalism to seniors rotating through the department.

1960s | **1960: Wilson A. Heefner**, who died on February 16, 2013, was buried in Arlington Cemetery on September 25. ♦ **Emanuel H. Silverstein** of Baltimore is retiring from dermatology after 47 years in private practice. ♦ **Theodore Zanker** of Cheshire, Conn., continues practicing child, adolescent and adult psychiatry in New Haven while advocating for patients and profession as a delegate from the Connecticut State Medical Society to the AMA House of Delegates—the ultimate governing body of the AMA. **1961: Gerald A. Hofkin** of Pikesville, Md., is a surveyor for the Accreditation Association for Ambulatory Health Care in the evaluation of ambulatory surgery centers throughout the country. ♦ **Michael B. A. Oldstone** of La Jolla, Calif., presented the Bertram M. Marx Lectureship at the University of Alabama Birmingham School of Medicine Department of Microbiology & Immunology. He is a member of the National Academy of Science and the Institute of Medicine of the National Academies. ♦ **George E. Urban Jr.**, of Suitland, Md., is doing only office work after selling his practice to Doctors Community Hospital in Lanham. Now the Center for Ear, Nose, and Throat has two young associates who perform all the surgery. He reports that all five children and 15 grandchildren continue to grow with grace, and Urban still enjoys to kayak and ski. **1963: Merrill M. Knopf** of Long Beach, Calif., spends four months a year in Wengen, Switzerland, skiing, hiking, and visiting his daughter, her husband and two grandchildren. Two of his four grandchildren living in California have expressed interest in becoming physicians. **1965: John C. Dumler** of Harrisonburg, Va., is volunteering at the Harrisonburg-Rockingham Free Clinic since

retiring from his dermatology practice in December 2011. ♦ **Charles S. Harrison** of Zanesville, Ohio, works one day each week running a surgical clinic for Muskingum Valley Health Center, following retirement from full-time practice in 2004. ♦ **Sig Sattenspiel** of Freehold, N.J., remains active in the practice of facial plastic and cosmetic surgery. He is past president of the New York Facial Plastic Surgery Society. ♦ **George C. Sjolund Jr.**, of Eugene, Ore., married Dianne Byrne Mitchell, the love from his college days, in 2012. ♦ **Philip J. Whelan**, in retirement, is living in Mechanicsburg, Pa., where he is closer to grandchildren. **1966: Jay Martin Barrash** of Bellaire, Tex., reports his son has started the first grade and plays the cello. ♦ **Dennis H. Gordon** of Salt Lake City sadly reports that wife Mary Jane recently and unexpectedly passed away. ♦ **Stephen F. Gordon** of Savannah, Ga., reports that daughter Penny was recently promoted to full professor at the University of North Carolina Medical School. **1968: John G. Frizzera** of Phoenix, Md., is loving life, wife, three children and 10 grandchildren since retirement in December 2012. **1969: Leon Reinstein** of Baltimore received 2013 Frank H. Krusen, MD, Lifetime Achievement Award from the American Academy of Physical Medicine and Rehabilitation (PM&R). The academy's highest honor recognizes outstanding and unique contributions to the specialty of PM&R in the areas of patient care, research, education, literary contributions, community service and involvement in academy activities. Reinstein has been a member since 1973 and served as president in 1992.

1970s | **1970: Jerome D. Aronowitz** of Boca Raton, Fla., is retired from the practice of ophthalmology. Daughter Ashley recently delivered his second grandchild, and daughter Jessica is practicing orthopaedic surgery following completion of fellowship training in shoulder/elbow surgery at the Mayo Clinic in Rochester, Minn. ♦ **Julian A. Gordon** of Beachwood, Ohio,

is retired from his urologic practice and teaches part time at Case Western Reserve University School of Medicine in Cleveland. ♦ **William D. Hakkarinen** of Cockeysville, Md., happily reports the birth of his fifth grandchild on July 2, 2013. **1971: Daniel L. Cohen** and wife Suzanne of Alexandria, Va., have happily moved into their second home in the country village of Horringer Cum Ickworth in the United Kingdom. ♦ **Peter M. Hartmann** of York, Pa., is vice president of medical affairs at York Hospital. **1972: Stanley A. Morrison** of Baltimore is relieved to report that all five sons are out of college, in jobs, and off the family payroll. ♦ **Joseph S. Shapiro** of Huntington Beach, Calif., reports daughter Sharon is completing her third year of a family medicine residency in Los Angeles. Shapiro is working part-time and helping with five grandsons. ♦ **Thomas V. Whitten** moved to Leesburg, Va., after retiring from Mercy Medical Center as chief of orthopaedic surgery and director of the hospital for special surgery. He has two daughters and five grandchildren. **1973: Charles B. Watson** of Easton, Conn., has reduced work to 60 percent but continues teaching. He reports that youngest daughter Anya was recently married to John Hansen, and they live in Rhode Island. **1974: Edward N. Sherman** of Reisterstown, Md., reports that he has three beautiful grandchildren: Madison, Morgan, and Caleb. **1975: Karl W. Diehn** of Towson, Md., reports that daughter Megan is a nurse practitioner working for GBMC in Texas Station; Son Karl is a chef at the Woodberry Kitchen in Baltimore; daughter **Katie, '13**, is a first-year family resident at Franklin Square Hospital, and son Kevin is involved with a biotech start-up company. ♦ **Patricia Fleming Falcao** of Needham, Mass., is a diplomate of the American Board of Addiction Medicine and served as the Massachusetts chair of educational programming for the state chapter of the American Society of Addiction Medicine. ♦ **Michael E. Weinblatt** of Waban, Mass., the John R. and Eileen K. Riedman Professor of Medicine at Harvard Medical School, was appointed as the inaugural R.

Bruce and Joan M. Mickey Distinguished Chair in Rheumatology at the Brigham and Women's Hospital. He was also recently inducted as a fellow into the Royal College of Physicians during a ceremony in London. **1977: Marc Bresler** of Encino, Calif., received the outstanding physician award from the Southern California Permanente Medical Group for his 33 years of service to Kaiser as a primary care physician, attending faculty in the family medicine residency program and hospitalist. ♦ **David E. Bright** and wife Avril of Boulder, Colo., report that son Steven is an emergency medicine resident at the University of Washington in Seattle. **1979: Arthur E. Bakal** of Piedmont, Calif., reports that son David started medical school at UCLA. Another son, Michael, is at the school of public health at UC Berkeley after working as a high school teacher. Bakal works in the internal medicine department at Kaiser in Oakland. ♦ **Max D. Koenigsberg** retired as a Chicago EMS medical director after 25 years but continues working in the ER. ♦ **Bruce R. McCurdy** of Ellicott City, Md., reports that his daughter will marry in March to an Anne Arundel County police officer. McCurdy is hoping the union means fewer traffic citations for him. ♦ **Louis F. Ortenzio** of Bridgeport, WVa., is an ordained pastor, serving as director of ministry for a homeless shelter and ministry leader of a recovery program. This follows 25 years practicing family medicine where he developed an addiction to prescription pain medications and had his license revoked. Ortenzio reports that for the past 10 years he is in a very good place in life.

1980s ♦ **1980: Anne Dunlavy Lane** of Baltimore reports that daughter Eileen will be attending the Johns Hopkins School of Public Health in August. ♦ **Robert Y. Maggin** of Rockville, Md., reports that son Ben will soon be working in Washginton, D.C., after his recent marriage and graduation from University of Penn Law School. ♦ **Robert L. Schiff** of Aiea, Hawaii, reports daughter Teresa will graduate in May from the medical school at the University of Hawaii, while daughter Briana will cross

the stage at Brandeis University. **1981: Howard T. Jacobs** of Baltimore reports that son **Mitchell, '12**, is in year two of an internal medicine residency at Maryland. **1982: Christopher Aland** of Newtown, Pa., recently joined the sports medicine department of the Rothman Institute. He has been the team physician for more than 20 years in Bucks County. Aland's daughter Kristen graduates in May from New York Medical College and is planning an OB/GYN residency, hopefully at Maryland. ♦ **Wayne L. Barber** of Owings Mills, Md., reports that his ophthalmology practice recently began offering femtosecond laser-assisted cataract surgery to patients, allowing for more precise incisions and providing for a safer removal of the cataract and connection of astigmatism. ♦ **Robert M. Cooper** and wife **Moshay, '80**, of Baltimore report son **Gedaliah, '10** is an ER medicine attending in Detroit where he raises his five sons. The Coopers remain busy with children and grandchildren and of course work to pay for it all! **1983: M. Steve Sniadach Jr.**, and wife Jessica of Englewood, Colo., celebrated their first wedding anniversary in Norway and Iceland. **1984: Carole B. Miller** of Baltimore reports that she is keeping busy as cancer center director at St. Agnes Hospital, and she's looking forward to seeing classmates at the spring Reunion. ♦ **Dale R. Meyer** and wife **Joy, '89**, of Voorheesville, N.Y., hope their respective classmates had good years in 2013. They look forward to their milestone reunions in spring. ♦ **Mitchell H. Weiss** of Knoxville, Tenn., is chief of staff at Parkwest Medical Center. He has had the pleasure of working with cardiovascular surgeon **Robert Helsel, '69**, and wishes him well in retirement. Weiss is looking forward to reunion weekend in May. **1985: Earlene Jordan** of Bethesda, Md., is co-president of Pediatric Associates of Montgomery County. **1988: Gregg Wolff** of Cumberland, Md., has retired as a captain in the U.S. Navy after 21 years of dedicated service including one year in Kuwait in 2005. He continues in private practice, having served his community for more than 20 years.

1990s **1992: Virginia Powell** of Roanoke, Va., is section chief of pediatric critical care at Carilion Roanoke Memorial Hospital. ♦ **Kevin Dooley** of Gansevoort, N.Y., is back in the States working on a two-year study grant providing in-home care for the frequently hospitalized patient population in the Albany region. This follows a year working in Abu Dhabi. Dooley adds that his children are all fine, scattered across the country. **1996: Joy Collins** and partner Julie of Philadelphia welcomed daughter Mia on May 20, 2013. She joins big sisters Dori, age 15, and Vivien, age two. ♦ **Teresa M. Cox** and husband Alan Bradshaw are living in Gaithersburg, Md. Cox is chief of anatomic pathology at Walter Reed National Military Medical Center in Bethesda, following completion of a molecular and genetic pathology fellowship at Washington University in St. Louis. **1997: Daniel Farber**, after seven years at Maryland as an attending orthopaedic foot and ankle surgeon, is heading north to build the education program and help expand the clinical foot and ankle practice at Penn. ♦ **Brian Newcomb** of Port Matilda, Pa., is leading his 7th medical mission to Nicaragua in March. He adds

that providers are always welcome and are encouraged to bring spouses and children. If interested, you can contact him through the alumni office. **1999: Stephen T. Woods** of Columbus, Ohio, is a partner at OrthoNeuro, a multi-specialty group, and enjoys his new administrative role as chief medical officer at the Ohio Bureau of Workers' Compensation. In July 2013, Woods added a sports medicine sub-specialty board certification to his current certificates in physical medicine and rehabilitation and sub-specialty in pain medicine. He and wife Heather are proud parents of Evan Oliver, born February 9, 2013.

2000s **2000: Joseph M. Herman** and wife Amy of Perry Hall, Md., announce the birth of Matthew, their second, on August 22, 2013. ♦ **Allison P. Niemi** of Bennington, Vt., is chair of the department of family medicine at Southwestern Vermont Medical Center and medical director for Bennington Project Independence Adult Day Center. **2001: Suneel N. Nagda**, wife Jennifer, six-year-old daughter Maya and three year-old son Ethan recently moved to Bala Cynwyd, Pa. Nagda is assistant professor of radiation oncology at the University of

Pennsylvania. **2002: Matthew Smith** of Midlothian, Va., is enjoying life as an attending at the Richmond VA Medical Center. ♦ **Elissa C. Thompson** reports that she and her family are enjoying life in Austin. **2003: Mohammed Manasawala** of Conshohocken, Pa., reports that he recently became partner at Radiology Group of Abington. He adds that his daughter recently turned two years old. **2004: Willis and Christine Wu** of Timonium, Md., welcomed James Michael on June 28, 2013. He joins siblings Wesley, age two and Evelyn, age 4. **2005: ♦ Kimberly Kessler O'Rourke** and husband Brendan are enjoying life in Towson, Md., with one-year-old son Nicholas. ♦ **Brian J. Loeffler** of Charlotte, N.C., specializes in upper extremity surgery with Ortho Carolina. He and wife Jennifer are expecting their third child, to join sons Grant and Ford. ♦ **Jennifer Roth Maynard** of Ponte Vedra Beach, Fla., is assistant professor of family medicine at Mayo Clinic Florida. ♦ **Regina F. Wong** and husband Dr. Hai Truong of Lodi, Calif., celebrated last year with their first baby and new house. **2006: Daniela Morato King** of Pittsburgh reports that husband Jon King is a surgical oncology fellow at the

Our Medical Alumni Association

Mission: The Medical Alumni Association of the University of Maryland, Inc., in continuous operation since 1875, is an independent charitable organization dedicated to supporting the University of Maryland School of Medicine and Davidge Hall.

Board Structure: The MAA is governed by a board consisting of five officers and nine board members. Each year more than 100 alumni participate on its seven standing committees and special anniversary class reunion committees.

Membership: Annual dues are \$85. Dues are complimentary the first four years after graduation and can be extended until the graduate has completed training. Dues are waived for members reaching their 50th graduation anniversary or have turned 70 years of age. Revenues support salaries for two full-time and five part-time employees, as well as general office expenses to maintain the alumni data base, produce the quarterly *Bulletin* magazine, stage social events for alumni and students, administer a revolving student loan fund, and oversee conservation of Davidge Hall and maintain its museum.


Annual Fund: The association administers the annual fund on behalf of the medical school. Gift revenues support student loans and scholarships, lectureships, professorships, capital projects—including Davidge Hall conservation—plus direct support to departments for special projects and support to the dean.

The Morton M. Krieger, MD, Medical Alumni Center is located on the second floor of Davidge Hall, 522 W. Lombard Street, Baltimore, MD, 21201-1636, telephone 410.706.7454, fax 410.706.3658, website www.medicalalumni.org, and email maa@medalumni.umaryland.edu

University of Pittsburgh after completing general surgical residency training at UCLA. He joins her at Pittsburgh where she is assistant professor of EM. Both are glad to be closer to home with daughter Izzy, age one, despite the likelihood of her becoming a Steelers fan. **2007: Joshua Holyoak** of Columbia, Mo., is working in Moberly after finally completing residency training. He reports child number four is on the way. **Elisa Knutsen** is an assistant professor of orthopaedic surgery at George Washington University after completion of a hand surgery fellowship at Washington

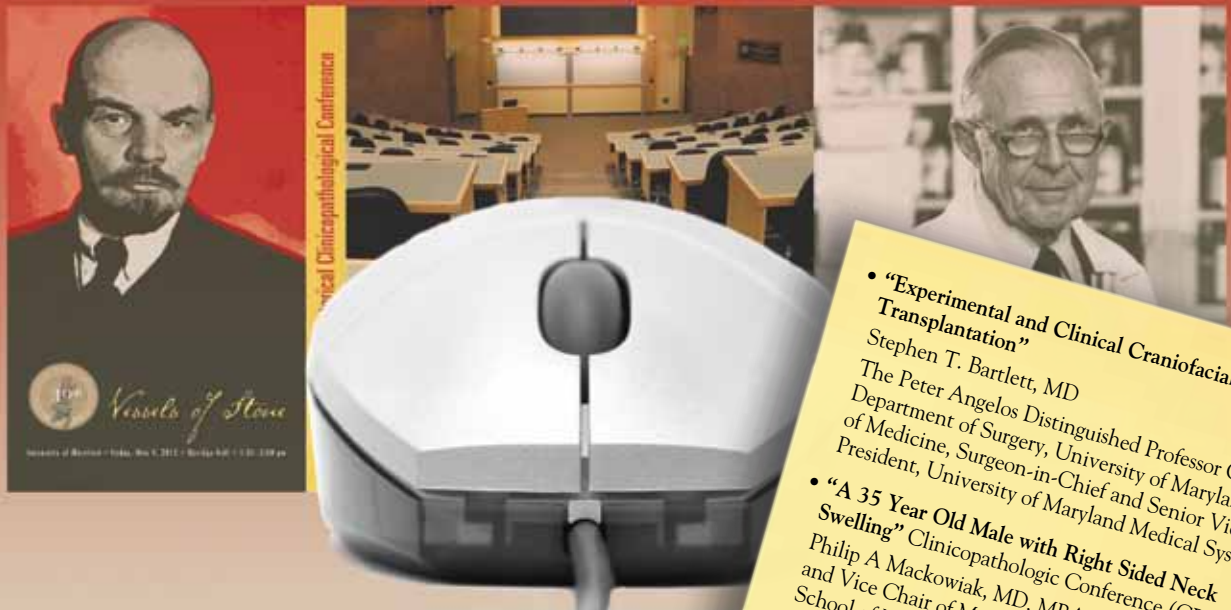
University in St. Louis. **Bradley Kramer** and wife **Amanda**, '07, announce the birth of Joshua Robert on July 10, 2013. He joins brother Jonathan. **2008: Jodi Krumrine Bond** of Halethorpe, Md., reports the birth of daughter Charlotte Danielle on April 13, 2013. Bond is a forensic psychiatrist at Springfield Hospital Center in Sykesville. **George Kochman** and **Elizabeth Lechner** were married last August in Edgewater, Md. Kochman is practicing emergency medicine at the University of Pittsburgh Medical Center (UPMC)-St. Margaret, while Lechner is a pulmonary critical care fellow at UPMC.

2010s **2010: Sumair "Syed" Akhtar** of New Haven, Conn., is chief resident at Yale University. **2011: Evan Harrison** and **Jason Brill**, '10, of San Diego were married May 25, 2013.

Faculty **Michael L. Fisher, MD**, of Denver, was honored to have **Gary Plotnick**, '66 as visiting professor to present the William Nelson Lecture. 

On-line Classroom Lectures for Alumni

Dues-paying members of the Medical Alumni Association are invited to view **On-line Classroom Lectures**. These include many of the first- and second-year presentations available to students as taught from Taylor Lecture Hall in the Bressler Laboratory, as well as recordings of grand rounds. In addition, the MAA Annual Historical Clinicopathological Conferences and a few historical lectures by Theodore E. Woodward, '38 are available for viewing. Enrich your education by visiting the MAA website and registering today: www.medicalalumni.org.



Recent additions to the offerings 

- **"Experimental and Clinical Craniofacial Transplantation"**
Stephen T. Bartlett, MD
The Peter Angelos Distinguished Professor Chairman, Department of Surgery, University of Maryland School of Medicine, Surgeon-in-Chief and Senior Vice President, University of Maryland Medical System
- **"A 35 Year Old Male with Right Sided Neck Swelling"** Clinicopathologic Conference (CPC)
Philip A Mackowiak, MD, MBA, Professor of Medicine and Vice Chair of Medicine, University of Maryland School of Medicine, Chief of the Medical Care Clinical Center, VA Maryland Health Care System
- **"Aging, Sarcopenia and the Loss of Functional Independence"**
Andrew P. Goldberg, MD, Professor of Medicine & Head of Division of Gerontology and Geriatric Medicine, University of Maryland School of Medicine

Joseph S. Ardinger, '44

OB-GYN

Ellicott City, Md.

November 18, 2013

South Baltimore General Hospital was the site of Dr. Ardinger's internship, and he received residency training at St. Agnes Hospital. He served in the U.S. Naval Reserve until 1958, departing with the rank of lieutenant. In 1952, Ardinger joined the staff at St. Agnes where he later became secretary and treasurer, and for several years headed the obstetrics teaching program at the hospital's nursing school. He practiced for more than 50 years, delivering more than 4,000 babies. An avid sports fan, he enjoyed following the Colts, Ravens, Orioles, and Maryland Terrapins. Ardinger was a second-degree black belt in judo and competed in the Senior Olympics and Maryland State Games in tennis and track and field. He was preceded in death by wife Carolyn and son Ronald. Survivors include two sons and three granddaughters. Ardinger's marriage to Irma ended in divorce.

Joseph Fischer, '46

Psychiatry & Psychoanalysis

Boynton Beach, Fla.

September 11, 2013

Dr. Fischer served as a captain in the U.S. Army with service in Japan. He interned at Maryland following completion of his medical education and received residency training at Kings County-Brooklyn State Hospital. He was a fellow of the American Geriatrics Society and was certified in psychoanalysis. Fischer practiced psychiatry in New York City, retiring at age 60. Survivors include wife Celia, one son, and three grandchildren.

Abraham A. Goetz, '46

Internal Medicine & Cardiology

Redwood City, Calif.

November 16, 2013

Brooklyn Jewish Hospital was the site of Dr. Goetz's internship, and through his military service he relocated to the west

coast where he received residency training at Mount Zion Hospital in San Francisco. Fellowship training later occurred at the University of California and Oregon Health Science Center. Goetz practiced internal medicine and cardiology in the state for more than 50 years, first in San Francisco and then in the south bay as a member of Sunnyvale Medical Group. In the early 1980s, he founded one of the first executive health programs in the area which later became part of El Camino Hospital where he served as founding chief of the medical staff. Goetz later worked out of the Menlo Clinic and held an appointment at Stanford Hospital. He enjoyed tennis, skiing and travel. Goetz was preceded in death by wife Natalie and is survived by one son, one daughter and two grandchildren.

Parker S. Dorman, '47

Urology

Gaithersburg, Md.

September 24, 2013

Dr. Dorman interned at Ancker Hospital in St. Paul, Minn., and was a surgical resident for one year at the Central Dispensary and Emergency Hospital in Washington, D.C., before serving two years active duty with the U.S. Navy Medical Corps during the Korean War. Residency training resumed at Penn Graduate School of Medicine and St. Vincent's Hospital in Erie, Pa. Dorman entered the private practice of urology in Washington, D.C., in 1955, also serving as clinical associate professor of urology at Georgetown University. Appointments included chairman of the department of urology at Washington Hospital and chair of the section of urology at Suburban Hospital. From 1981 to 1982, he served as president of the American Urological Association Mid-Atlantic Section. Dorman retired in 1987 after 40 years of practice. Survivors include wife Janet, two sons, three daughters, 11 grandchildren and two great-grandchildren. He was preceded in death by one daughter and brother **Hamilton P. Dorman, '43D.**

E. Anne D. Mattern, '47

Surgery

Rockville, Md.

November 15, 2013

Upon graduation, Dr. Mattern received training at Garfield Memorial Hospital in Washington, D.C., and was chief surgical resident at Union Memorial Hospital from 1951-52. She practiced surgery for a short time in Montgomery County and later provided consultations for children in the Montgomery County Public School System and the Maryland Department of Social Services. Mattern enjoyed playing all sports and performed all the gardening and yard work for her three-acre property. She was a loyal captain for her medical school class, organizing reunions and volunteering during the annual phonathon in Davidge Hall. She was preceded in death by husband **Carl, '47**, and is survived by six children including **Carola J. Nesbitt, '86**, 11 grandchildren and four great-grandchildren.

Howard F. Raskin, '49

Gastroenterology

Pikesville, Md.

September 17, 2013

Mercy Medical Center was the site of Dr. Raskin's internship and internal medicine training, followed by two-years as a U.S. Public Health fellow in cancer and in 1956 was appointed assistant professor of medicine. Raskin returned to Maryland in 1963 as an associate professor and established the gastroenterology laboratory and headed the division of gastroenterology at the hospital. In 1973, he was appointed head of the division of gastroenterology at Maryland General Hospital where he remained until 2001. He enjoyed collecting fire memorabilia, gardening, folk music and Civil War history. Raskin was preceded in death by two sons and is survived by one son, one daughter, and two grandchildren.

Paul H. Gislason, '52

Orthopaedic Surgery

North Oaks, Minn.

September 10, 2012

During World War II, Dr. Gislason served as an ensign on the USS LST in the Pacific

in memoriam

Theater. Upon medical school graduation he trained at the Minneapolis VA Hospital before founding the Orthopaedic and Fracture Clinic in Mankato in 1957. His clinic became the largest orthopaedic specialty practice in the Midwest. Gislason retired in 1991 but continued consulting. In retirement he spent winter months living in Rio Verde, Ariz., and summers in North Oaks. He enjoyed golf, skiing, boating and travel. Gislason was a member of the John Beale Davidge Alliance 1807 Circle, Maryland's society for major donors. Survivors include wife Marian, two children, four grandchildren and two great-grandchildren.

Bryan P. Warren Jr., '52

Psychiatry
Saint Marys, Ga.
June 8, 2013

Dr. Warren followed his father, **Bryan P. Warren Sr., '24** to Maryland. After graduation he served a rotating internship and received residency training in psychiatry at Upstate Medical Center in Syracuse, N.Y. This was followed by a fellowship in child psychiatry at Children's Medical Center in Boston, and Warren also received certification in geriatric and addiction psychiatry. He practiced for 54 years in Yorktown Heights, N.Y., and Owensboro, Ky. In 2006, he received the exemplary psychiatrist award from the National Alliance for Mental Illness where he served as executive director. Warren and first wife Jane raised four children and had seven grandchildren who survive him. He is also survived by wife Ellen.

John W. Heisse Jr., '53

Otolaryngology
Shelburne, Vt.
October 3, 2013

Mercy Hospital in Baltimore was the site of Dr. Heisse's internship and residency training in otolaryngology and anesthesia. He practiced otolaryngology in Burlington beginning in 1956 and served on the faculty at the University of Vermont College of Medicine. In addition to otolaryngology, Heisse's expertise included allergy, anesthesia and hypnosis, and he taught classes,

seminars and workshops on subjects including forensics and criminology. Heisse was a long-time supporter of Champlain College where he also taught classes, and in 2012 was recipient of an honorary doctorate in public service from the institution. He was an 1807 Circle member of the John Beale Davidge Alliance, Maryland's society for major donors. Preceded in death by wife Sandy, Heisse is survived by two children and one grandson.

Henry R. Trapnell, '54

General Practice
Federalsburg, Md.
November 17, 2013

Upon graduation, Dr. Trapnell entered the U.S. Navy and was stationed in Pensacola, Fla., where he received flight training and flew helicopters and two- and four-engine airplanes. He later transferred to Seattle Naval Air, serving as a flight surgeon. Upon discharge from the Navy, Trapnell relocated in Federalsburg where he practiced general medicine for 41 years. In addition to medical organizations, he was a member of the Rotary Club, American Legion, VFW, Federalsburg Historical Society and the board of the Caroline County Department of Social Services. Survivors include wife Marilyn, six children including **Bruce C., '84**, and many grandchildren. He was preceded in death by wife Leola.

Richard F. Schillaci, '61

Internal Medicine and Pulmonology
September 25, 2013

Between internship and residency training at the St. Albans Naval Hospital in New York, Dr. Schillaci received training in deep sea diving and at nuclear power submarine schools. From 1971 to 1972, he received fellowship training at the San Diego Naval Hospital. From 1963 to 1987, Schillaci served as an undersea medical officer. This was followed by three years as an internist at the naval hospital in Oakland, before moving into the pulmonary division where for 13 years he served as head. From 1987 until retirement in 1989, Schillaci was in private practice. He was preceded in death by wife Patricia and is survived by two daughters and one grandchild.

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Joseph S. Weinstock, '65

Psychiatry
Baltimore
October 11, 2013

Upon completion of training, Dr. Weinstock was an attending at Sinai Hospital in Baltimore and served as an instructor at Maryland. Survivors include two children and three grandchildren.

James W. Carty, '66

Internal Medicine
Williamsburg, Va.
August 24, 2013

Upon graduation, Dr. Carty interned at Union Memorial Hospital. He split residency training in internal medicine between Union and the University of North Carolina Chapel Hill where he also completed a fellowship in nephrology. This was followed by a tour of duty with the U.S. Navy where he served in Vietnam on the hospital ship USS Sanctuary and one year at the Portsmouth Naval Hospital. After military service, Carty joined an internal medicine practice which eventually became known as the Norfolk Diagnostic Clinic. After serving as president of the group, he was elected to the board of Frederick Brick Works in Frederick, Md., in 1988 and the following year became its president. He retired to Williamsburg, Va. Survivors include wife Jane, two children and four grandchildren.

Franklin L. Johnson, '66

Allergy & Immunology
Hebron, Md.
September 17, 2013

After graduation, Dr. Johnson was a captain in the U.S. Air Force and served as a flight surgeon in Vietnam from 1966 to 1968. This was followed by fellowship training in pediatric allergy & immunology at Virginia Commonwealth University. Johnson settled in Salisbury where he worked for 40 years in private practice. He enjoyed model ship

in memoriam

building, and he was a member of the Elm Society of Maryland's John Beale Davidge Alliance, the school's society for major donors. Survivors include wife Bridget, one son, two daughters and four grandchildren.

Beresford M. Swan, '66
Internal Medicine
S Hampton, Bermuda
October 6, 2013

Dr. Swan served two years in the U.S. Air Force before attending college, and became Maryland's first black foreign medical student. Upon medical school graduation, he received training in internal medicine followed by fellowships in cardiology and nephrology. Swan returned to Bermuda in 1970 and began his association with the King Edward VII Memorial Hospital. He is credited with starting the island's first chronic peritoneal dialysis and transplant program which now bears his name. From 1971 to 1990, he directed the ECG and EEG laboratory, and appointments also included chairman of the department of medicine from 1972 to 1976, and director of dialysis from 1976 to 2001. In December 2004, Swan was recognized as an Officer of the British Empire by Queen Elizabeth II. He enjoyed sailing. Survivors include wife Lucille, two sons and two daughters.

Anne S. Jacques, '69
Pediatrics
Dunwoody, Ga.
December 23, 2012

Dr. Jacques received training at Emory University and joined its faculty upon completion of her pediatrics residency. She practiced with Children's Healthcare of Atlanta at Hughes Spalding Hospital and Grady Memorial Hospital. For six years Jacques served on the board for the Georgia chapter of the American Academy of Pediatrics. Upon retirement from Emory after 41 years of service, the school announced creation of the Anne Jacques Excellence in Primary Care Award, given annually to an Emory pediatric resident that most closely represents the primary care qualities and attributes embodied by Jacques. Survivors include husband William and two children.

Stanton C. Kessler, '69
Pathology
Chattanooga, Tenn.
November 15, 2011

Upon completion of training, Dr. Kessler enjoyed a career in anatomic and clinical as well as forensic pathology. He served on the staffs at Harvard Medical School, Boston University and Beth Israel Hospital in Massachusetts. Appointments included chief of staff, office of chief medical examiner for the Commonwealth of Massachusetts, assistant medical examiner for the State of Tennessee, and professor of pathology at the University of South Carolina. Survivors include wife Katherine, two sons and one daughter.

Harry S. Stevens, '74
Urology
Baltimore
November 13, 2013

Prior to medical school, Dr. Stevens served in the U.S. Army as a 1st Lt. Infantry, stationed for one year in Vietnam. Maryland was the site of both internship and residency training. After medical school Stevens practiced urology in Baltimore until retirement in 2009. For a number of years Stevens was a volunteer caller during the Medical Alumni Association phonathon in Davidge Hall. He is survived by wife Katie.

Ronald J. Spector, '75
Dermatology
Kensington, Calif.
October 11, 2013

Dr. Spector received residency training in dermatology at State University of New York at Buffalo after interning at Maryland General Hospital. He practiced dermatology in California. He was preceded in death by companion George Allen.

Yvette Best, '89
Baltimore
November 3, 2013

Faculty

Raymond T. Jones, PhD
Westminster, Md.
November 29, 2013

Dr. Jones was a member of the faculty in the department of pathology from 1974 until retirement in 2008. Recipient of the department's first PhD in 1974, Jones' thesis involved sub-cellular alterations of the human pancreas following shock and ischemia, and his studies with the pancreas progressed on to human pancreatic and lung cancers. He served as pathology course director until 1994 and taught graduate-student courses. Beginning in 1991, Jones was a member of the admissions committee and also sat on 13 other committees and subcommittees. He is survived by wife Joyce. 🏠



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Medical Alumni Association 139th Reunion

Featuring Classes Ending in "4" and "9"

Friday, May 2, 2014

8:30-10:30 am	Open House & Check-in
8:30-9:30 am	Continental Breakfast
9:00-9:45 am	Hospital Tour
10:00-11:00 am	School of Medicine Update, Dr. E. Albert Reece, Dean
11:30 am-1:00 pm	Harry & Vivian Kramer Awards Luncheon & Business Meeting
1:30-3:30 pm	Afternoon Check-in
1:30-3:00 pm	21st Historical Clinicopathological Conference
3:30-5:00 pm	School of Medicine Tour
Evening	Class Parties, classes ending in "4" and "9"

Saturday, May 3, 2014

8:30 am-1:30 pm	Open House & Check-In
8:30-9:30 am	Continental Breakfast
9:30-10:30 am	Campus Walking Tour
10:45-11:45 am	Restoring Davidge Hall: An Update
11:30 am-2:00 pm	Complimentary Picnic, Davidge Hall
12:15-1:15 pm	Lecture: Historic Green Mount Cemetary
1:30-4:00 pm	Excursion to Fort McHenry
Evening	School of Medicine Gala