children’s health:
OUR TOP PRIORITY
Talk isn’t cheap.
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We’re in the business of making products that make kids feel better.
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Johnson & Johnson
Just like you, we care about how your kids feel.
Welcome to the Fall/Winter issue of Robert Wood Johnson Medicine, featuring some of the people and programs responsible for our growing record of excellence.

At RWJMS, we see daily proof that our successes stem, above all, from collaboration. Effective teams work at every level of the school, from multi-investigator research partnerships, to professional mentoring and clinician-patient relationships, to interdisciplinary projects and institutional affiliations; from our student volunteers, who touch so many lives in our community, to our alumni, parents, and friends, whose generosity creates exciting student and faculty opportunities.

In this issue, our cover story, “Children’s Health: Our Top Priority,” portrays the school’s intense commitment to our nation’s children. Under the leadership of Dr. Daniel Notterman, we are raising the bar in every area of children’s health.

We highlight our Camden campus in “Serious Cardiac and Critical Care Starts Here,” a feature on the extraordinary work of Dr. Joseph Parrillo and Dr. R. Phillip Dellinger. Internationally acclaimed for their research, these exceptional practitioners are transforming the areas of cardiovascular and critical care at Cooper Health System into a regional center of excellence.

“Mentoring Programs Flourish at RWJMS” explores a proud legacy that strengthens programs at every level of the medical school — among our faculty, residents, and students.

In “A Meeting of Minds,” we feature the research partnership of Dr. Ann Stock and Dr. Peter Lobel. These extraordinary scientists work together at the Center for Advanced Biotechnology and Medicine to find treatments for rare childhood diseases.

Our alumni profile features Drew Remignanti, MD ’80. An emergency medicine specialist, Dr. Remignanti regularly takes time off from his practice in New Hampshire to work with the Centers for Disease Control in Ghana. There he is part of an international effort to control epidemic diseases, such as polio.

In the past year, the leadership of Ernest Biczak, MD ’77, has inspired several alumni to create much-needed scholarships. With endowments and gifts that reflect their personal ties to RWJMS, these alumni are helping today’s best young minds become the leading physicians of tomorrow.

Dr. William Welsh writes in “The Last Page” of the pharmaceutical research that is emerging from university-industry research partnerships — collaborations that are making a tangible, positive impact on the quality of patients’ lives. Dr. Welsh describes investments in informatics-based technology that are leading to huge payoffs for our school and the state of New Jersey.

We thank you, our readers, for your interest, and we salute the fine examples set by our alumni, faculty, and students in support of our programs and missions.

Sincerely,

Harold L. Paz, MD
Dean
New Jersey just got a new landmark.

For decades, TIAA-CREF has helped thousands of people throughout New Jersey prepare for a more comfortable and rewarding retirement. And today, you’ll find that we’re helping them a lot closer to home.

Introducing our new office in Princeton. It’s centrally located so we can provide a higher degree of personalized service throughout the state. And it’s just the latest in a long list of reasons why so many people choose to make us an integral part of their financial future. We’re proud of that…and equally proud to be in New Jersey.

Let’s start talking about ideas, guidance, and results.
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By Kate O’Neill
Expanded Affiliations Enhance Medical Education, Research, and Patient Care

UMDNJ-Robert Wood Johnson Medical School has a broad and diverse network of affiliated institutions. Its 34 affiliates provide a variety of teaching environments in which future physicians and residents learn their craft. Equally important, the affiliations extend the medical school’s reach by bringing state-of-the-art diagnosis, treatment, and care to patients at institutions throughout the state of New Jersey.

This summer, RWJMS expanded four of its existing affiliation agreements, creating two new university hospital affiliates and two major clinical affiliates. In each case, the change of status augments existing partnerships in undergraduate and graduate medical education and clinical research. Residents of a wide area of central New Jersey now have better access to the highest quality of patient care, the latest clinical trials, medical research studies, and technological advancements.

“These expanded affiliations advance our commitment to excellence in the pursuit of our core missions in education, research, patient care, and community health,” says Harold L. Paz, MD, dean. “These affiliated institutions share those missions, and we look forward to building on our solid foundation of joint programs and growing together in the future to new heights and achievements.”

Both of the new university hospital affiliates were long-time major clinical affiliates of RWJMS, and both have new names to reflect their expanded role in medical education. Jersey Shore Medical Center, a member of Meridian Healthcare, has become Jersey Shore University Medical Center (JSUMC). The Medical Center at Princeton, a member of the Princeton Healthcare System, is now the University Medical Center at Princeton (UMCP). In addition, both Somerset Medical Center (SMC) and Raritan Bay Medical Center (RBMC) were elevated to major clinical affiliate. In an interview with the Courier News, Ronald Nahass, MD ’82, president of the SMC, said, “Most major medical breakthroughs occur at teaching facilities because medical students are asking questions, whether it be surgical techniques, medications, or the discovery of new infections like AIDS or hepatitis. All those occurred at teaching hospitals.”

At the new university affiliates, RWJMS will expand existing partnerships in undergraduate and graduate medical education and in clinical research. In addition, the terms of expanded affiliation extend to other members of Meridian Healthcare and the Princeton Healthcare System.

“Our academic vision was created to achieve our goal to...

Above: Signing the new affiliation agreement between RWJMS and Jersey Shore University Medical Center (JSUMC) are John K. Lloyd, president and CEO, Meridian Healthcare; Jeff Brickman, president, Meridian Hospitals Corporation; Elliot Frank, MD, chair, Department of Medicine, JSUMC; Harold L. Paz, MD, dean, RWJMS; Gordon N. Litwin, chair, Meridian Health Board of Trustees; and Steven G. Littleson, president, JSUMC.
bring the ‘absolute best’ advanced medicine to the entire region via a partnership among all three of our hospitals and physicians — partners who now have an even stronger link to the worldwide medical community,” said John K. Lloyd, president of Meridian Healthcare.

A key partner in the RWJMS Family Practice Residency Program since 1975, SMC will develop additional residency programs both in surgery and in obstetrics, gynecology, and reproductive sciences.

RBMC will collaborate with RWJMS to enhance programs in pediatrics as well as obstetrics, gynecology, and reproductive sciences. As major clinical affiliates, SMC and RBMC will expand their medical, general, and graduate education programs as well as clinical research initiatives.

“It’s a win-win situation for us and for our affiliates,” says Marie C. Trontell, MD ’76, professor of medicine and senior associate dean for education. For the medical school, the expanded affiliations provide new educational opportunities in additional clinical settings, she says. These affiliates, which have shown a serious commitment to education and progress, will gain the heightened prestige that comes with an expanded medical school affiliation.

“We are very proud of our prestigious designation as a University Hospital Affiliate with UMDNJ-Robert Wood Johnson Medical School,” says Barry S. Rabner, president and CEO of UMCP. “This new status and our new name communicate our position as a leading academic institution and a provider of world-class health care services.”

Each hospital chose a special venue for the signing ceremony and announcement of its new status. UMCP presented its new name at a press conference that opened the 50th annual Princeton Hospital Fete, while JSUMC, SMC, and RBMC each held a signing ceremony followed by a luncheon. Dr. Paz spoke at each event, addressing an enthusiastic audience of affiliate presidents, chief executive officers, board chairs, trustees, senior medical staff, special guests, and the media.

— K.O’N.
One of medical science’s most prestigious tributes, the American Surgical Association Foundation’s Flance-Karl Award, was presented to Stephen F. Lowry, MD, professor and chair, Department of Surgery. The prize recognizes surgeons who have performed biomedical research at the basic, translational, and clinical levels, resulting in extraordinary advances in the field of surgery.

Previous winners of the award include Norman Shumway, MD, of Stanford University, the pioneer of heart transplantation; Bernard Fischer, MD, of the University of Pittsburgh, responsible for revising the treatment of breast cancer from radical to conservative surgery; Steven Rosenberg, MD, a National Cancer Institute surgeon and pioneer in the field of adoptive immunotherapy for solid tumors; the team of Jonathan Rhodes, MD, and Stanley Dudrick, MD, of the University of Pennsylvania, who developed the technique for parenteral nutrition; Francis Moore, MD, a Harvard scientist who pioneered the early development of kidney transplantation and the metabolic response to injury; and Judah Folkman, MD, a Harvard investigator who evolved concepts of tumor neovascularation in therapeutic targets, leading to an understanding of tumor angiogenesis.

Dr. Lowry, who is the youngest surgeon to receive the award to date, accepted it at the association’s 123rd annual meeting.

“I couldn’t conceive that I might be a candidate at this stage of my career,” he says. “I feel very honored to be in the same company as such esteemed former winners.”

While the presentation of the Flance-Karl Award doesn’t designate specifics of the work for which it is presented — rather, it is given on behalf of a body of work — it is generally believed that Dr. Lowry was honored primarily for his research in identifying and studying protein mediators that activate the immune system and cause an overreaction of the body to infection. That work and subsequent studies performed by him and colleagues in his laboratory led to development of biologic response modification for severe infection.

“The past two years have yielded exciting results in our being able to progress to translational research, and finally being able to bring our findings to the bedside in clinical studies,” he says.

Initial discoveries by Dr. Lowry and others in the field suggested there are specific molecules of the immune system driving the process of infection toward its most severe manifestations. That knowledge broadened to efforts to alter the activity of the molecules.

“Now we realize we have important parallel pathways that are activated by these processes, and are deactivated by infection,” Dr. Lowry reports. “This is a complex biological problem dictated by various factors — the patient’s genome, other medical conditions a patient may have, and treatment he or she is receiving for those conditions. Therefore, the ultimate answer will not come from a single drug or therapeutic approach.”

Currently, there is drug therapy, approved by the U.S. Food and Drug Administration, produced on the

Dr. Lowry Honored with Top Surgical Award

The 2003 New York magazine list “Best Doctors in New York” includes 18 RWJMS salaried faculty members and many members of the volunteer faculty. The “Best Doctors” list is an excerpt from the eighth edition of Top Doctors: New York Metro Area, published by Castle Connolly.

Salaried faculty on the 2003 list are:

- Joseph Aisner, MD, professor of medicine and chief, division of medical oncology
- Gloria A. Bachmann, MMS ’72, MD, professor of obstetrics, gynecology, and reproductive sciences and associate dean for women’s health
- Thomas Boiko, MD, MS, associate professor of pediatrics and chief, Pediatric Intensive Care Unit

RWJMS Faculty Named among New York A
basis of research performed by Dr. Lowry’s laboratory with animal and human models. Although this suggests that an important pathway for attack has been found, Dr. Lowry warns it is not the only operative mechanism. “The next leap will come from a full understanding of the disease complexity,” he says. “This means we need to know more about the genetics, patient response to infection, and other factors. These are very sick patients, many of them elderly, many receiving treatment for cancer, heart disease, and serious chronic illness. The interaction of all these factors presents a real challenge for the work before us.”

Dr. Lowry’s colleagues in the Department of Surgery toasted his award with a surprise party in his honor. Peter M. Scholz, MD, professor of surgery, and the first to hold the James W. Mackenzie Chair in Surgery, says the recognition of the Flancel-Karl committee was a well-deserved honor. “The recipients of this award have been internationally acclaimed innovators, and Steve Lowry is certainly in that same league,” Dr. Scholz says. “He is recognized worldwide for his work in sepsis and cytokines. His many honors, including the National MERIT Award from the National Institutes of Health, have acknowledged that — and now this most recent honor again underlines his contribution to medical science.” — R.M.R.

Area’s Best Doctors

- Lawrence I. Golbe, MD, professor of neurology
- Michael I. Goldberg, MD, clinical professor of obstetrics, gynecology, and reproductive sciences
- Alice B. Gottlieb, MD, PhD, William H. Conzen Chair in Clinical Pharmacology, professor of medicine, and director, Clinical Research Center
- Alan M. Graham, MD, professor of surgery and chief, division of vascular surgery
- William N. Hait, MD, PhD, professor of medicine and pharmacology, associate dean for oncology programs, and director, The Cancer Institute of New Jersey
- John B. Kostis, MD, John G. Detwiler Professor of Cardiology, professor of medicine and pharmacology, and chair, Department of Medicine
- George H. Lambert, MD, associate professor of pediatrics, chief, division of pediatrics for the Clinical Research Center, and director, Center for Childhood Neurotoxicology and Exposure Assessment
- Martha H. Lansing, MD, associate professor of family medicine
- Joseph P. Leddy, MD, professor and chair, Department of Orthopaedic Surgery
- John L. Nosher, MD, clinical professor and chair, Department of Radiology
- Michael G. Nosko, MD, PhD, associate professor of surgery and chief, division of neurosurgery
- David J. Riley, MD, professor of medicine
- Jacob I. Sage, MD, professor of neurology and chief, division of movement disorders
- David B. Seifer, MD, professor of obstetrics, gynecology, and reproductive sciences and chief, division of reproductive endocrinology and infertility
- Lynne S. Weiss, MD, professor of pediatrics

Total external awards for the medical school achieved a new record in FY 2003 with nearly $122 million in awards. In the clinical departments, overall research funding grew by over 26 percent. The basic research departments increased by more than 11.4 percent, and the major institutes increased their grant funding by 8.3 percent. Other external funding, including grants to the Eric B. Chandler Health Center, totaled more than $4 million. Overall, external awards increased almost 15 percent over FY 2002. “This year’s total awards and accomplishments are exceptional,” says Harold L. Paz, MD, dean. “Our scientists have achieved a momentum that should drive future growth at a similar or even greater rate.”

New Research Awards:

The following new awards and renewals represent the significant new funding and expanded research involving the RWJMS faculty. (A more extensive listing of RWJMS research awards can be found on the Research Office Web site: http://www2.umdnj.edu/orspweb/news/.)

— Continued on Page 9
Governor James E. McGreevey has taken a strong stand on behalf of promoting cancer research, and has joined forces with The Cancer Institute of New Jersey (CINJ) at UMDNJ-Robert Wood Johnson Medical School.

The first Governor’s Conference on Effective Partnering in Cancer Research, conducted in conjunction with CINJ and the New Jersey Commission on Cancer Research, was held April 27–29, and it set priorities for translational research, the process that accelerates the pace of scientific discovery from the laboratory to patient care. The meeting was hosted by the governor and William N. Hait, MD, PhD, professor of medicine and pharmacology, associate dean for oncology programs, and director of CINJ.

“New Jersey has unique resources and strengths that make our state an essential venue for expanding this frontier,” Governor McGreevey said. “With this symposium, we are setting the stage for improved cancer therapy.”

The symposium, which sought ways to increase partnerships among academia, industry, and government in examining and solving obstacles to translational research, included leading members of the pharmaceutical industry, along with nationally renowned cancer experts from the National Cancer Institute, National Institutes of Health, Food and Drug Administration, CINJ, and major universities and cancer centers nationwide.

It was co-chaired by Edmund C. Lattime, PhD, professor of surgery and molecular genetics, microbiology, and immunology, and CINJ associate director of education and training; Ann Marie Hill, executive director of the New Jersey Commission on Cancer Research; and Robert Spiegel, MD, senior vice president, medical affairs, and chief medical officer, Schering-Plough Research Institute.

Pursuing a goal of producing creative ways to improve translational research, the conference included more than 100 invited participants. Defined as the process of applying promising basic science to clinical problems, and then incorporating the solutions within standard medical practice, translational research traditionally has been a difficult challenge for academic medicine. Certainly, potential outcomes related to the unraveling of the human genome have driven interest in advancing translational research. Nevertheless, there remain gaps among the disciplines of basic and clinical studies and patient care that slow the progress of translational efforts, and which leading researchers recognize need to be addressed through collaborative endeavors.

Conference recommendations include providing cross training to basic and clinical investigators for the purpose of fostering concrete partnerships among the entities of academia, industry, and government; increasing the num-

The Neuroscience Undergraduate Summer Research Program and the Summer Clinical Internship Program at RWJMS afford the opportunity to bring the brightest undergraduates to the medical school to experience its clinical and basic science research activities. Students from the most prestigious institutions in the country apply to these highly competitive programs.

Cheryl F. Dreyfus, PhD, professor of neuroscience and cell biology, introduced the Neuroscience Undergraduate Summer Research Program seven years ago. Students are placed in the laboratories of prominent neuroscientists at RWJMS and Rutgers, The State University of New Jersey. The training program is designed to educate these students about the state-of-the-art research performed at both campuses and provide them with exciting research experiences.
Participants are mentored by their individual investigators and by Dr. Dreyfus and her co-directors, Michael P. Matise, PhD, assistant professor of neuroscience and cell biology, and James H. Millonig, PhD, assistant professor of neuroscience and cell biology. Dr. Dreyfus notes, “Every summer, I am thrilled to witness the development of the students in the program. Many of them later enter the MD or MD/PhD programs at the medical school.”

The Summer Clinical Internship Program, directed by Carol A. Terregino, MD ’86, clinical associate professor of medicine and assistant dean for admissions, is in its second year of operation. Students are matched with a clinician in a specialty of their choice. Faculty members from an array of departments participate, and students lead the life of the matched faculty member for two weeks. The program is accompanied by a lunchtime seminar series, led by prominent faculty members.

Dr. Terregino says, “The self-directed learning behaviors and the quality of the presentations make these students highly desirable future applicants to the school. They get the opportunity to see the school in action.” Excellent student feedback confirms the success of these programs.
Research Symposium Fills Auditorium

The latest online edition of Webster’s dictionary contains none of the following words: genomics, proteomics, pharmacogenomics, bioinformatics. Their meaning, however, held considerable interest to the more than 200 participants from UMDNJ schools and affiliates, Rutgers, The State University of New Jersey and other colleges, and representatives of pharmaceutical companies who crammed the east lecture hall at UMDNJ-Robert Wood Johnson Medical School, Piscataway, for a May 9 symposium on the emerging science of informatics.

William J. Welsh, PhD, Norman Edelman Professor in Bioinformatics, professor of pharmacology, RWJMS, and director, UMDNJ Informatics Institute, explains that the half-day seminar was designed to include several hard-hitting lectures, providing an overview of the field. “Our purpose was to bring together key experts in the field of informatics,” Dr. Welsh says. “We were delighted not only by the capacity attendance, but also by the enthusiastic discussion that followed each session. Informatics is an exploding field, and one in which New Jersey has an opportunity to lead. The turnout at our symposium seems to reflect the interest of a broad scientific community, including the pharmaceutical and life sciences industries.”

Informatics was created in response to the vast amount of information generated by genetic research. Genomics, the study of the genome of humans and other species, and proteomics, the study of proteins, their function, and their interaction in cells, have unloaded massive amounts of raw data demanding scientific clarification. The potential of all this information led to the development of pharmacogenomics, popularly known as personalized medicine. The theoretical basis for pharmacogenomics is exciting. Essentially, it is an effort to minimize adverse drug reactions in patients by studying gene mutations that give rise to specific responses to drugs, as well as a person’s propensity toward certain diseases.

The difficulty facing scientists is the somewhat new revelation that most diseases are not the result of one gene mutation, but many. As a result, there is an incalculable amount of raw data produced by laboratories that must be sifted, analyzed, and interpreted. It is at this juncture that computer technology, in the form of bioinfor-
matics, comes to the rescue. The Internet, innovative computing techniques, and digital information are revolutionizing scientific endeavor through advanced information and computational technologies for solving biological problems and for storing and retrieving biological data, including nucleic acid and protein sequences, structures, functions, pathways, and genetic interactions.

RWJMS presenters at the symposium, the first of several on the rapidly developing science of informatics, included Dr. Welsh; Frank Sonnenberg, MD, professor of medicine and associate director for clinical informatics, UMDNJ Informatics Institute; and Honghua Li, PhD, associate professor of molecular genetics, microbiology, and immunology, and member, The Cancer Institute of New Jersey. Introductory remarks were made by Harold L. Paz, MD, dean.

Underscoring the critical importance of informatics research, the Informatics Institute played a leadership role in UMDNJ’s recent five-year, $2.7 million Integrated Advanced Information Management Systems, Operational Phase Grant from the National Library of Medicine.

— R.M.R.

On The CIRCUIT

By Kate O’Neill

Dr. Kenneth S. and Audrey S. Gould Lecture Series in Molecular and Cellular Medicine

E ric R. Kandel, MD, delivered the first lecture in a new series endowed by Dr. Kenneth S. and Audrey S. Gould. The lecture series takes place under the auspices of the Child Health Institute of New Jersey (CHINJ). “The purpose of the series,” says Mrs. Gould, a member of the CHINJ board of directors, “is to promote the cutting edge of research and advance the educational endeavors of the institute.”

Dr. Kandel, the 2000 Nobel laureate in physiology and medicine, is an Investigator, Howard Hughes Medical Institute, and a senior investigator at Columbia University College of Physicians and Surgeons. Robert L. Trelstad, MD, acting director of CHINJ, says, “Dr. Gould commented that he felt no one could have better initiated the series than Dr. Kandel.”

Speaking on “Molecular Biology of Memory: A Dialogue Between Genes and Synapses,” Dr. Kandel described his laboratory’s pioneering work on explicit and implicit memory storage. Each form of memory has a short-term phase lasting minutes and a long-term phase lasting days or longer, he explained. In each case, long-term memory requires gene expression and the synthesis of new proteins. He presented new information suggesting that prions have a major role in normal brain functions, including long-term memory.

“The Child Health Institute, now well under construction, will be forever indebted to the Goulds for their generosity in spirit and support,” says Dr. Trelstad.

The Hadley L. Conn, Jr., MD, Memorial Lecture in Medical Education

O n April 14, New Jersey Commissioner of Health and Senior Services Clifton R. Lacy, MD ’79, delivered the third annual Hadley L. Conn, Jr., MD, Lecture. Taking as his theme “Education and Communication in Medicine and Public Health in the 21st Century,” Dr. Lacy discussed existing and emerging issues as well as traditional and novel approaches.

With Dr. Lacy’s presentation, the Department of Medicine has fulfilled a request from the late Dr. Conn, a longtime chair of that department. Dr. Conn specified that the first three lecturers in this series be Parvin Saidi, MD, professor of medicine, chief, division of hematology, and director, Melvin H. Motolinsky Laboratory for Hematology; John B. Kostis, MD, John G. Detwiler Professor of Cardiology, professor of medicine and pharmacology, and chair, Department of Medicine; and Dr. Lacy, who at the time was associate professor of medicine and chief, division of cardiovascular diseases and hypertension.

“As a student, resident, fellow, and faculty member, Dr. Lacy has been with our school for more than 20 years,” says Dr. Kostis. “We are very happy he came back for this occasion and look forward to his return after his term as commissioner.”
RWJMS Honors Class of 2003 at Convocation

On the eve of Commencement, UMDNJ-Robert Wood Johnson Medical School honors its own graduates at Convocation. This year, for the first time, the ceremony took place in the State Theater, a perfectly restored landmark in the heart of New Brunswick. Joined by faculty, families, and friends, the Class of 2003 celebrated a particularly successful journey through medical school.

“I have watched you transform from premeds to physicians, and you have done so with maturity, grace, and style,” said Harold L. Paz, MD, dean. Dr. Paz praised the graduates’ extensive achievements in academics, independent research, and volunteerism. He commented on the record number of dual-degree graduates, and he added that the class had also made exceptional residency matches. He concluded: “You have made us all proud — your families, friends, and professors.”

The evening’s special guests included two longtime friends of RWJMS: Steven A. Schroeder, MD, president emeritus of the Robert Wood Johnson Foundation and Distinguished Professor of Health and Health Care at the University of California at San Francisco; and Clifton R. Lacy, MD ’79, New Jersey commissioner of health and senior services. Both would be honored the following day at the UMDNJ Commencement. (See profiles, page 14.)

Keynote speaker Risa Lavizzo-Mourey, MD, president and chief executive officer of the Robert Wood Johnson Foundation, singled out the qualities of perseverance and pride in her hero, Eleanor Roosevelt. Dr. Lavizzo-Mourey’s comments throughout were warm and direct, said one audience member, adding, “I felt she was speaking directly to me.”

Dr. Paz presented an engraved commemorative plate to Dr. Lavizzo-Mourey; Dr. Lacy and Dr. Schroeder received similar gifts, engraved with the honors they would receive at Commencement.

George F. Heinrich, MD, vice chair and interim president, Foundation of UMDNJ, presented the foundation’s Teaching Awards to Vijay K. Rajput, MD, assistant professor of medicine, Camden campus, and Daniel M. Shindler, MD, associate professor of medicine, Piscataway campus. Several members of the Class of 2003 were honored that evening: chosen by their classmates to speak were Preeti Jain, from the Piscataway campus, and Patrick Hsu from the Camden campus. Patrick Hsu also received the 2003
Alumni Award, as did Jennifer Sherr from the Piscataway campus. The Bruce Fisher, MD, Award for Humanism went to Brian Gable, and Erin D. Carney received the Stanley S. Bergen, Jr., MD, Medal of Excellence.

In the evening’s climactic moment, the class was formally introduced to the audience by David Seiden, PhD, professor of neuroscience and cell biology and associate dean for admissions and student affairs, and Paul R. Mehne, PhD, associate professor of family medicine and associate dean for academic and student affairs, Camden campus.

Individually, the students crossed the stage and received their academic hoods. Alumni Association officers greeting them at the far end were Francine E. Sinofsky, MD ’81, reunion co-chair, and Eduardo Fernandez, MD ’89, immediate past president, who presented to each new graduate a mug bearing the association’s emblem.

Closing Convocation, but opening the next door, were Susan Rosenthal, MMS ’75, MD, clinical associate professor of pediatrics and assistant dean for student affairs, and James B. Alexander, MD, associate professor of surgery, Camden campus, who led the Class of 2003 in reciting the Hippocratic Oath.

— K.O’N.

NIH FUNDING: — Continued

$220,000 in matching funds. The National Institute of General Medical Sciences (NIGMS) awarded $1.5 million to Federico Sesti, PhD, assistant professor of physiology and biophysics, for a five-year study of “The role of KVS and MPS subunits in basic neuronal function.” The NCI has increased to $1,360,625 its five-year competitive award to T.J. Thomas, PhD, associate professor of medicine, for “Novel oligonucleotide delivery vehicles in gene therapy.” James Q. Zheng, PhD, associate professor of neuroscience and cell biology, received $1.2 million from NINDS for a competitive renewal of his research project titled “Mechanisms of growth cone turning in diffusible gradients.”

Other Government and Foundation Funding:

Huizhou Fan, PhD, assistant professor of physiology and biophysics, received $99,000 from the New Jersey Commission on Cancer Research (NJCCR) for a study, “Regulation of TGF-alpha release in cancer.” Nancy L. Fiedler, PhD, associate professor of environmental and community medicine, has been awarded a three-year, $1,519,951 grant from the U.S. Department...
of the Army: “The effects of diesel exhaust and stress on the acute phase response and symptoms in the chemically intolerant.” David H. Gorski, MD, PhD, assistant professor of surgery, received a $466,500 Idea Award from the Department of Defense Breast Cancer Research Program for his study titled “Inhibition of breast cancer-induced angiogenesis by a diverged homeobox gene.” In addition, Dr. Gorski was awarded $99,000 from the NJCCR to study “Regulation of breast cancer angiogenesis by a homeobox gene.” Shawna V. Hudson, PhD, assistant professor of family medicine and director of community research, The Cancer Institute of New Jersey (CINJ), received $100,000 from the NJCCR to study “Addressing cancer disparities in a family practice setting.” The Robert Wood Johnson Foundation awarded $100,000 to Robert C. Lacy, MD, associate professor of family medicine, for “Multicultural health care: A mosaic for the new millennium,” the fourth RWJMS Conference on Culturally Competent Care. Stuart G. Lutzker, MD, PhD, assistant professor of medicine, received $100,000 from the NJCCR to study “Addressing health care policy and research, and minority and multicultural health. Moreover, in 2002, during Dr. Lacy’s first year in office, he received top marks for developing and implementing New Jersey’s plan of preparedness for and response to the health-related aspects of terrorism.

After earning his medical degree at RWJMS, Dr. Lacy continued his training in the school’s internal medicine residency program, where he served as chief resident, and completed a fellowship in cardiovascular diseases before joining the faculty. When he accepted Governor James E. McGreevey’s nomination, Dr. Lacy was serving as associate professor of medicine, chief of the division of cardiovascular diseases and hypertension, and director of the RWJMS Center for Disease Management and Clinical Outcomes. In addition, he was senior vice president for medical affairs and chief of staff at Robert Wood Johnson University Hospital (RWJUH) and was a visiting professor in the Department of Pharmacy Practice and Administration at Rutgers University College of Pharmacy.

Dr. Lacy is a nationally recognized researcher, educator, and clinician. He has served on national, regional, and local clinical and scientific committees and advisory boards, including those of the National Institutes of Health, the American College of Cardiology, the American Heart Association, and the Association of State and Territorial Health Officers.

As Dr. Lacy reflects: “I have a long history with, and strong ties to, Robert Wood Johnson Medical School. I am a lifelong New Jerseyan, and RWJMS has been my professional home throughout my medical career. It is a great privilege to be able to give back to the state, through service to the health and well-being of its people in my role as commissioner of health and senior services, and a great honor to be selected the UMDNJ Distinguished Alumnus.”

— K.O’N.
Steven A. Schroeder, MD

Last year, Steven A. Schroeder, MD, returned to his native California to rejoin the faculty at the University of California at San Francisco (UCSF), where he holds a dual appointment as Distinguished Professor of Health and Health Care and director of the Smoking Cessation Leadership Center. Previously, he served 12 years as president of the Robert Wood Johnson Foundation (RWJF), where he is now president emeritus.

As the foundation’s president and chief executive officer, Dr. Schroeder succeeded Richard C. Reynolds, MD, former dean of RWJMS, and immediately forged strong links with UMDNJ-Robert Wood Johnson Medical School. A former member of the faculties of Harvard Medical School, George Washington School of Medicine, and UCSF, Dr. Schroeder accepted an appointment as clinical professor of medicine at RWJMS. In more than a decade of service to the foundation and the medical school, he says, he saw “a strong school growing stronger,” and he was particularly pleased when his son, David Schroeder, MD ’97, chose to attend RWJMS.

“Throughout his career at the Robert Wood Johnson Foundation, Dr. Schroeder was a good friend and strong supporter of the missions of the medical school,” says Harold L. Paz, MD, dean. “We were delighted that David chose to come here for his medical education, and look forward to frequent homecoming visits from both father and son.”

In May, Dr. Schroeder returned to New Jersey to receive an honorary doctorate of humane letters from UMDNJ and found that his ties to RWJMS gave the visit special significance. In addition, as an honored guest at Convocation, he was delighted to learn that Risa Lavizzo-Mourey, MD, his successor at RWJF, would deliver the keynote speech.

Trained as a general internist at Harvard Medical School, Dr. Schroeder has led his field in tackling critical health care issues such as public health, disease prevention, and health policy. Public health epidemiology emerged as a priority for Dr. Schroeder during his two years with the Epidemic Intelligence Service of the Communicable Diseases Center (now the Centers for Disease Control), and in a fellowship at the Harvard Center for Community Health and Medical Care.

He would later found the division of general internal medicine at UCSF, where he was also founding medical director of a university-sponsored health maintenance organization.

Dr. Schroeder chairs the International Advisory Committee of the Faculty of Medicine at Ben-Gurion University in Israel. He serves on the editorial board of the New England Journal of Medicine and the Board of Overseers of Harvard University, and he is president-elect of the Harvard Medical School Alumni Association.

Although his career has taken him back to the Pacific coast, Dr. Schroeder retains meaningful affiliations in New Jersey, where, as a member of the board of directors of Save Ellis Island!, he manages to keep one toe anchored in the Atlantic.

— K.O’N.
**Match Day Success Brings Schoolwide Joy**

Jubilation and success earmarked Match Day 2003. A few minutes before noon, students were presented with Alumni Association champagne glasses. After a welcome from Euton M. Laing, MD ‘90, association president, everyone joined in a bubbly toast to the Class of 2003.

The 98.1 percent residency match was “the best we’ve ever had,” says David Seiden, PhD, professor of neuroscience and cell biology and associate dean for admissions and student affairs. Moreover, the class matched with many of the nation’s most competitive residency programs.

“The high success of this residency match makes us as proud of these students as we are grateful to their teachers and advisers,” says Harold L. Paz, MD, dean.

Paul R. Mehne, PhD, associate professor of family medicine and associate dean for academic and student affairs, Camden campus, is pleased that 29 percent of the Camden class chose New Jersey residencies. “In the past, many of our best students have left the state,” he says. “It’s good to know that they are finding and matching with excellent programs that will keep them close by.” — K.O’N.

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### EMERGENCY MEDICINE

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Kayur Ablani</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
</tr>
<tr>
<td>Lateise Maye</td>
<td>Newark Beth Israel, NJ</td>
</tr>
<tr>
<td>Leila Mujic</td>
<td>Newark Beth Israel, NJ</td>
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<tr>
<td>Schubert Perotte</td>
<td>Newark Beth Israel, NJ</td>
</tr>
<tr>
<td>Mark Reiter</td>
<td>University of North Carolina Hospital, NC</td>
</tr>
<tr>
<td>Christopher Tedeschi</td>
<td>New York Presbyterian Hospital-New York Cornell, NY</td>
</tr>
<tr>
<td>Joseph Underwood</td>
<td>New York Presbyterian Hospital-New York Cornell, NY</td>
</tr>
<tr>
<td>Matthew Warner</td>
<td>Temple University, PA</td>
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### ANESTHESIOLOGY

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<tr>
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<tbody>
<tr>
<td>Joseph Cardinale</td>
<td>New York University Downtown Hospital, NY; St. Vincent’s Hospital, NY</td>
</tr>
<tr>
<td>John Cho</td>
<td>Jersey Shore Medical Center, NJ; St. Luke’s-Roosevelt, NY</td>
</tr>
<tr>
<td>Tracey Enlow</td>
<td>Jersey Shore Medical Center, NJ; UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
</tr>
<tr>
<td>Ilya Manevich</td>
<td>St. Barnabas Medical Center, NJ; UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
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<tr>
<td>Christina Miller</td>
<td>Duke University Medical Center, NC</td>
</tr>
<tr>
<td>Amit Shah</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Camden, NJ; Mt. Sinai Hospital, NY</td>
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<tr>
<td>Matthew Sir</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Camden, NJ; Mt. Sinai Hospital, NY</td>
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<tr>
<td>Nicholas Sizoo</td>
<td>University of Pennsylvania Health System/Presbyterian, PA</td>
</tr>
<tr>
<td>Jerome You</td>
<td>Jersey Shore Medical Center, NJ; Mt. Sinai Hospital, NY</td>
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### FAMILY PRACTICE

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<thead>
<tr>
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<tbody>
<tr>
<td>Nara Atta-Assamoud</td>
<td>Medical Center of Columbus, GA</td>
</tr>
<tr>
<td>Jaime Blank</td>
<td>New York Presbyterian Hospital-Columbia Pennsylvania, PA</td>
</tr>
<tr>
<td>David Boguslavsky</td>
<td>Somerset Medical Center, NJ</td>
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<tr>
<td>Lauren Carnuth</td>
<td>Hunterdon Medical Center, NJ</td>
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<tr>
<td>Timothy Hsu</td>
<td>University of Colorado School of Medicine-Denver, CO</td>
</tr>
<tr>
<td>Anand Kapur</td>
<td>Fairview Hospital, OH</td>
</tr>
<tr>
<td>Keran Spaulding</td>
<td>Florida Hospital-Orlando, FL</td>
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<tr>
<td>Dianna Taylor</td>
<td>University of Massachusetts Medical School, Queen Street Family Health Center, MA</td>
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### DERMATOLOGY

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<tr>
<td>Kimberly Ekdornst</td>
<td>Pennsylvania Hospital, PA; St. Luke’s-Roosevelt, NY</td>
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<tr>
<td>Frank Victor</td>
<td>Pennsylvania Hospital, PA; New York University School of Medicine, NY</td>
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### INTERNAL MEDICINE

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<tr>
<td>George Brownie</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
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<tr>
<td>Jiyon Jane Choi</td>
<td>Thomas Jefferson University, PA</td>
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<tr>
<td>Susan Coutinho McAlistier</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Camden, NJ</td>
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<tr>
<td>Islam Elsayyoun</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
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<tr>
<td>Brian Gabler</td>
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<td>Kathryn Getzewich</td>
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<tr>
<td>Daniel Grimes</td>
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<tr>
<td>Rachel Kellerman</td>
<td>Mt. Sinai Hospital, NY</td>
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<tr>
<td>Victor Ko</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
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### INTERNAL MEDICINE-PRELIMINARY

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<tr>
<td>Claire-Dina Cakonis</td>
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<td>Rebeca Lintner</td>
<td>New York University School of Medicine, NY</td>
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<tr>
<td>Michelle Weishahn</td>
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### INTERNAL MEDICINE-PRIMARY CARE

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<tr>
<td>Wendy Bennett</td>
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<td>Ami Shah</td>
<td>Boston University Medical Center, MA</td>
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### NEUROLOGY

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<tr>
<td>Andrew Goldfine</td>
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<td>Maryann Finney</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
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<td>Jennifer Reeder</td>
<td>University Health Center of Pittsburgh, PA</td>
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<tr>
<td>Gregory Selzter</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Camden, NJ</td>
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<td>Samir Shaif</td>
<td>Einstein/Montefiore Medical Center, NY</td>
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<tr>
<td>Sophie Starr</td>
<td>Hospital of the University of Pennsylvania, PA</td>
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<td>Fausan Tsai</td>
<td>University of Southern California, CA</td>
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<td>Kaveeta Vaidhiji</td>
<td>University of Chicago-Bellevue, IL</td>
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<td>Shona Velmukhannani</td>
<td>Georgetown University Hospital, DC</td>
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<td>Darren Weissman</td>
<td>St. Vincent’s Hospital, NY</td>
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<td>Winfried Wiseman</td>
<td>UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ</td>
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<td>Julie Yang</td>
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### MEDICINE

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<tbody>
<tr>
<td>Mark Reiter</td>
<td>University of North Carolina Hospital, NC</td>
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**THE CLASS OF 2003 CAREER CHOICES**

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<td>Ami Shah</td>
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<tr>
<td>Andrew Goldfine</td>
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</table>
OB/GYN
Irina Burd: Thomas Jefferson University, PA
Emily Kirschner: Pennsylvania Hospital, PA
Jennifer Kulp: Johns Hopkins Hospital, MD
Sabari Nand: Mt. Sinai Hospital, NY
Ushma Patel: UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ

ANTON LACAP:
Diseases, NY
Roberto Calderon: University of Pennsylvania, PA

PHILIP ADOLFSEN:
Chhaya Batra: Baylor College of Medicine-Houston, TX
Aisha Barber: Children’s Hospital of Philadelphia, PA
Chuyi Barua: St. Christopher’s Hospital for Children, Philadelphia, PA
Ara Festekjian: Children’s Hospital of Philadelphia, PA
Ruchi Gupta: Jackson Memorial Hospital, FL
James Lee: New York Presbyterian Hospital-New York, Cornell, NY
Aimee Nussbaum: Einstein/Montefiore Medical Center, NY
Christina Querfeld: Children’s Hospital of Philadelphia, PA
Andrea Ramirez: Baylor College of Medicine-Houston, TX
Jennifer Sher: Yale-New Haven Hospital, CT
Iris Streimish: New England Medical Center, MA

PEDIATRICS-PRIMARY
Vikram Bhise: Maimonides Medical Center, NY
Freidi Jain: Mt. Sinai Hospital, NY
Rodney Canete: Mt. Sinai Hospital, NY
Aaron Meng: Good Samaritan Regional Medical Center, AZ
Jeffrey Nachber: Long Island Jewish, NY
Wanda Norris: Wayne State University/Detroit Medical Center, MI

PEDIATRICS/PSYCHIATRY/CHILD PSYCHIATRY

OTOLARYNGOLOGY
Jason Lichtenberger: UM/Fletcher Allen, VT; University of Vermont, VT

PHYSICAL MEDICINE & REHABILITATION
Grant Cooper: Atlantic Health System, NJ; New York Presbyterian Hospital-Columbia Presbyterian, NY
Kevin Hsu: Christiana Care, DE
UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ
Hector Lopez: Mountainside Hospital, NJ; Montefiore Medical Center-Northwestern University, IL
Danielle Perret: St. Barnabas Medical Center, NJ; Mt. Sinai Hospital, NY
Vishwa Raj: Abington Memorial Hospital, PA; Baylor College of Medicine-Houston, TX
Matthew Wiederholt: UMDNJ-Robert Wood Johnson Medical School-Camden, NJ; Baylor College of Medicine-Houston, TX

PLASTIC SURGERY
Patrick Hsu: Baylor College of Medicine-Houston, TX

RADIATION-ONCOLOGY
Gregory Russo: St. Vincent’s Hospital, NY; Thomas Jefferson University, PA

RADIOLOGY-DIAGNOSTIC
Stephanie Beals: Jersey Shore Medical Center, NJ; University of Illinois College of Medicine, IL
Richard Bonsall: Spartanburg Regional Health, SC; Medical University of South Carolina, SC
Charles Bowkley: Santa Barbara Cottage Hospital, CA; Rhode Island Hospital/Brown University, RI
Anthony Burgess: Lehigh Valley Hospital, PA; UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ

PSYCHIATRY
Derrick Chue: University of Hawaii Affiliated Psychiatry Residency, HI
Gregory Fernandez: Wentworth Medical Center, NY
Jaime Gerlach: Baylor College of Medicine-Houston, TX
Karen Groff: Hospital of the University of Pennsylvania, PA
Daniel Jones: Hartford Hospital, CT

Surgical Residency
Javier Alcindor: Pediatric Surgery, PA
Jayantha de Silva: Neurosurgery, PA
Bridgette Mahaffy: Plastic Surgery, PA

ORTHOPAEDIC SURGERY
Stephen Aft: Yale-New Haven Hospital, CT
Rocco Baxi: Hospital of the University of Pennsylvania, PA
Roberto Calderon: University of Arizona Affiliated Hospitals, AZ
Monet France: Hospital for Joint Diseases, NY
Anton Lapac: Walter Reed Medical Center, DC

PARTNERSHIP
UMDNJ-Robert Wood Johnson Medical School-Camden, NJ; Thomas Jefferson University, PA
John Sanic: Atlantic Health System, NJ; St. Barnabas Medical Center, NJ
Nehal Shah: St. Vincent/Worchester, MA; Einstein/Montefiore Medical Center, NY
Adina Sommer: Jersey Shore Regional Medical Center, NJ; Stony Brook Teaching Hospitals, NY
Surya Vaidyanathan: Albert Einstein Medical Center, PA

SURGERY
Janetten Akiona: University of Chicago Hospital, IL
Sonja Alvare: UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ
Melissa Freese: Staten Island University Hospital, NY
Melissa Hayward: UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ
Joe Huang: Einstein/Montefiore Medical Center, NY
Romne Joseph: Brookdale Hospital Medical Center, NY
Alessandro Koleska: Albert Einstein Medical Center, PA
Matthew Levy: Thomas Jefferson University, PA
Jineth Patel: Allegheny General Hospital, PA
Long Tran: University of Texas Southwestern Medical School-Dallas, TX
Yuhan Victoria Wu: UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ

UROLOGY
Daniel Caruso: University of Miami-Jackson Memorial, FL
Thomas Muller: UMDNJ-Robert Wood Johnson Medical School-Piscataway, NJ
Jason Rothman: Temple University Hospital, PA

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**INDUSTRY FUNDING:**

— Continued

Alice B. Gottlieb, MD, PhD, William H. Conzen Chair in Clinical Pharmacology, professor of medicine, and director, Clinical Research Center, received $136,875 from Xoma LLC to study the transition from subcutaneous efalizumab therapy to approved systemic and/or phototherapy psoriasis treatments.

**PUBLISHED RESEARCH:**

Following is a representative sampling of RWJMS research published in recent months. For an expanded listing of published research, visit the RWJMS Research Office Web site: http://www2.umdnj.edu/orspweb/news/.


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**STUDENT CLINICIAN CEREMONY Focuses on Humanism**

Three years ago, The Arnold P. Gold Foundation piloted the Student Clinician Ceremony (SCC) at RWJMS. The event fosters humanism in medicine, the core mission of The Gold Foundation. SCC is also designed to defuse the anxiety of beginning clinicians by providing information and support for those entering the patient-centered phase of medical education.

In their clinical rotations, students begin to develop a “medical identity,” said keynoter Steven J. Levin, MD, associate professor of family medicine, adding, “Your medical personality will determine your style of interacting with patients and colleagues, your attitudes about the health care system, your choice of specialty, and your sense of obligation to the community.”

Rising fourth-year students coordinate the event, building it on their own recent experience as beginning clinicians. This year’s co-chairs, Kathleen Bickel ’04 and Edward MacPhee ’04, added “The Patient Experience,” a talk by Ms. Bickel’s aunt, Patricia Petrik. Ms. Petrik, who suffers from several serious chronic illnesses, made the ceremony even more meaningful with her upbeat but straightforward remarks, says Susan Rosenthal, MMS ’75, MD, clinical associate professor of pediatrics and assistant dean for student affairs.

An annual SCC highlight is the awarding of The Arnold P. Gold Foundation Humanism and Excellence in Teaching Awards. They are (front row) Young Mi Lee, MD, Thomas Blom, MD ’02, Laura Kim, MD; (second row) John Cascone, MD, Antoinette Ham, MD ’01, Agustin Rubio, MD.

Six residents received The Arnold P. Gold Foundation’s 2003 Humanism and Excellence in Teaching Awards. They are (front row) Young Mi Lee, MD, Thomas Blom, MD ’02, Laura Kim, MD; (second row) John Cascone, MD, Antoinette Ham, MD ’01, Agustin Rubio, MD.

Students through the clinical years are marking the end of their first year by preparing for the first ceremony by Dr. Rosenthal to help students through the clinical years to a successful residency match.

In closing, Dr. Ham led the Class of 2005 in reciting the Student Clinician’s Oath. Created for the first ceremony by Danielle Ludwin, MD ’02, and Carrie Rubenstein, MD ’02, the oath sets goals and standards especially geared to student clinicians.

— K.O’N.
The White Coat Ceremony: The Class of 2007 Takes the First Step

On August 8, at the tenth annual White Coat Ceremony, the members of the Class of 2007 celebrated their first rite of passage together. Initiated at RWJMS as a pilot project of The Arnold P. Gold Foundation, the ceremony focuses on the importance of balancing compassion and science in the art of medicine. The Daniel and Bernard Kessler Foundation, a long-term partner in the event, sponsored this year’s ceremony.

Along with the traditional white coat, each member of the new class received a pin contributed by the Gold Foundation. In addition, the Robert Wood Johnson Foundation provided each student with a copy of On Doctoring, an anthology co-edited by Richard Reynolds, MD, former dean, and John Stone, MD.

The keynote speaker was cardiologist Kenneth I. Shine, MD, founding director of the RAND Center for Domestic and International Health Security in Arlington, Virginia. A former dean and provost for medical sciences at the University of California at Los Angeles School of Medicine, Dr. Shine also is a past president of the Institute of Medicine (IOM), a non-governmental, nonprofit component of the National Academy of Sciences.

In his keynote address, Dr. Shine drew on personal experience to illustrate his belief in the physician-patient relationship. “The highest honor you can receive,” he added, “is to be remembered as someone’s doctor.”

Harold L. Paz, MD, dean, presided over the ceremony. Other speakers included Stuart D. Cook, MD, president, UMDNJ; David Seiden, PhD, professor of neuroscience and cell biology and associate dean for admissions and student affairs; Eric Smith, president of the Daniel and Bernard Kessler Foundation; Seth Heckman ’06, coordinator of the White Coat Ceremony; and Sheldon Rossman, co-chair, the Association of Families and Friends.

The Class of 2007 Enters with an Impressive Record

“The Class of 2007 is an exceptionally talented, wonderfully diverse group,” says Harold L. Paz, MD, dean. It was selected from an applicant pool that was 21.4 percent larger than the previous year’s — significantly higher than the 5 percent national increase in applications. Incoming students’ GPA scores averaged 3.63, the highest in school history.

For the first time, women constitute more than half — 54 percent — of the students in the incoming class. “This class represents the excellence of the people and programs of our school,” adds Dr. Paz, “and we are honored to have them here.”

— K.O’N.

Published Research: — Continued from Page 18


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Robert Wood Johnson • MEDICINE 19
Medical Humanities Program Makes a Strong Start

Matthew Wosnitzer ’05 believes that the humanities are critical to the medical arts. As a second-year medical student, he framed his belief as a question: “Would RWJMS support a humanities elective directed at making students and physicians more aware of their patients’ emotional needs?”

Last fall, Matthew explored the concept with Carol A. Terregino, MD ’86, clinical associate professor of medicine and assistant dean for admissions. Through Dr. Terregino, he discovered an empathetic and enthusiastic mentor: David H. Carver, MD, professor of pediatrics and associate dean for faculty affairs, who introduced him to the first medical humanities program.

Impressed by the program’s thought-provoking discussions, the Curriculum Committee recently approved a medical humanities elective, soon to be added to the RWJMS curriculum.

“The arts can and should play a lifelong role in the practice of medicine,” says Dr. Carver. “Art makes physicians’ lives more interesting and helps them find renewal.”

A series of connections led to the program’s April 15 debut. In late winter, Matthew learned from Susan Rosenthal, MMS ’75, MD, clinical associate professor of pediatrics and assistant dean for student affairs, that The Arnold P. Gold Foundation was seeking a forum in which to introduce Life with Sam, Poems. Once Matthew and Dr. Carver discovered the book, they knew they had found the perfect spark to ignite a humanities program.

Sam, who died from leukemia in 1986, was the son of writer Elizabeth Hutner. During his illness, Ms. Hutner wrote the poems collected in Life with Sam. Later, The Gold Foundation published the collection, lovingly illustrated with photographs taken by Ms. Hutner.

Hutner revealed much about his family’s emotional ordeal. He noted several instances in which a lack of consideration by Sam’s physicians deepened the family’s suffering. But, above all, he focused on Sam.

Shortly after the first event, the medical humanities program presented a showing and discussion of the 1971 film The Hospital, a black comedy about medical mismanagement and malpractice. Matthew then began his clinical rotations and passed the club baton to Tilak Sundaresan ’06, a fellow medical humanities enthusiast.

“Studying and discussing the humanities is a very good way to convey the humanitar­ian aspects of medicine,” says Dr. Carver. “Students come to us full of idealism, and this project is one way to help them keep that idealism.”

— K. O’N.
Students at RWJMS have a dedicated corps of family and friends who smooth the ride through medical school. Every spring, the Association of Families and Friends (AFF) hosts a brunch in the Great Hall, on the Piscataway campus, providing a one-of-a-kind study break. This year’s AFF co-chairs, Sheldon Rossman and Daniel Phillips, were especially pleased with the parent turnout for the event.

Among the New Jersey families attending this year’s brunch were Dr. and Mrs. Jerrold Grossman, parents of Matthew Grossman ’04. The Grossmans, who donated two pilot classrooms last year, took the opportunity to visit them after the brunch.

The Alumni Association supports the brunch and helps provide an alumni speaker. This year’s speaker was Susan Rosenthal, MMS ’75, MD, clinical associate professor of pediatrics and assistant dean for student affairs. Dr. Rosenthal, who recently completed the book Survival Guide to Obtaining a Residency, spoke about the residency match process. Residency counseling for third- and fourth-year students narrows their choice by clarifying specific requirements for different programs and fields of study.

The brunch is one of several AFF projects. In August, the association underwrites the buffet that follows the White Coat Ceremony. During Orientation, it hosts a picnic for first-year students, an opportunity for them to relax and meet people and for the AFF to identify new members of its steering committee. T-shirts and other AFF paraphernalia first appear at the picnic and are available for purchase throughout the year. All funds raised by these sales, as well as by annual solicitation, benefit students directly, says Mr. Rossman, adding, “Students call us the Ping Pong Ball Organization, because we keep the table in the Student Lounge in shape and replace the worn-out equipment.” But students on both campuses can be grateful to AFF for other special touches that keep their lounges hospitable, right down to the grand piano, which is upgraded, tuned, and maintained thanks to association supporters.

The AFF’s right arm is the Office of Student Affairs. “Our mentor is Dr. Seiden,” says Mr. Rossman (referring to David Seiden, PhD, professor of neuroscience and cell biology and associate dean for admissions and student affairs), “and Stephanie Meister [administrator for student affairs] is our point person, the real heart of the association.” The office maintains and disburses monies from several funds that have been created by AFF fund raising and supplemented by one anonymous gift. The first is an interest-free bridge loan fund that helps students whose tuition payment is late. The office also maintains an emergency fund for students in dire need of money to cover unforeseen circumstances. In addition, through its general funds, the association helps support students who travel to medical conferences and events.

“In a lot of little ways,” Mr. Rossman says, “it’s just a good feeling to be able to help.”

— K.O’N.
Building on excellence

with more than 30 years as a leading teaching hospital…

A medical staff of healers and teachers who train the physicians of tomorrow.
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But we don’t stop there. Our academic credentials and clinical expertise are matched only by our personalized, one-on-one approach. That’s one more way we’re Redefining Care.
Letters

Continuing to Educate, Research, and Improve Health Care

Dear Dr. Paz:

Thank you for providing me with a copy of your latest edition of Robert Wood Johnson Medicine. I appreciate your efforts to keep me informed. The Robert Wood Johnson Medical School continues to educate, research, and improve health care.

With best wishes,
Joseph F. Vitale
Senator, 19th District, New Jersey Senate

Leadership Perspective

Dear Dr. Paz:

Just wanted to send a note congratulating you on another terrific issue of Robert Wood Johnson Medicine magazine. The feature story on “Women in Science” was excellent — truly a leadership perspective on the strengths and challenges these women face. The cover design was compelling. It is a wonderful image piece reflecting style and vision — keep them coming!

All the best,
Leslie Taylor
Managing Partner, Special Events, MATRIX

Extraordinary Efforts

Dear Dr. Paz:

Thank you for sharing with me a copy of the Spring/Summer edition of Robert Wood Johnson Medicine magazine. I look forward to reading it as soon as my schedule allows. I am especially interested in reading the article on “Women in Science: Breaking New Ground” and how the extraordinary efforts of the eight female scientists will lead to innumerable contributions in the field of medical discovery.

Once again, thank you for the magazine. You are to be commended for highlighting the important role women play in medical research. As always, you have my best.

Sincerely,
Regena L. Thomas
Secretary of State, State of New Jersey

Drop Us A Line! • Please send letters to:
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UMDNJ-Robert Wood Johnson Medical School
125 Paterson Street • Suite 1400 • New Brunswick, NJ 08901
Tel: 732-235-6310 • Fax: 732-233-9333
Email: ribners@umdnj.edu

Appointments through August 21, 2003

Robert Wood Johnson Medicine

Dear Dr. Paz:

Extraordinary Efforts

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Sincerely,
Regena L. Thomas
Secretary of State, State of New Jersey
## Faculty

### Appointments through August 21, 2003

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<th>Department of Neurology</th>
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<tr>
<td>M. Maral Mouradian, MD</td>
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<tr>
<td>Professor</td>
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<td>MD, American University of Beirut, Lebanon, 1982</td>
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<tr>
<th>Department of Obstetrics, Gynecology, and Reproductive Sciences</th>
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<tr>
<td>Elizabeth K. Chotet, MD</td>
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<tr>
<td>Assistant Professor</td>
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<td>MD, University of Rochester School of Medicine and Dentistry, 1996</td>
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<tr>
<td>Jeffrey R. Bechler, MD</td>
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<tr>
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<td>MD, New York Medical College, 1987</td>
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<td>Yong Ke, MD, PhD</td>
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<tr>
<td>Assistant Professor</td>
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<td>MD, University of Nigeria, 1988</td>
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<tr>
<td>Kelly A. Bradley-Dodds, MD</td>
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<tr>
<td>Assistant Professor</td>
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<tr>
<td>Lori Lebowitz, MS</td>
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<tr>
<td>Adjunct Instructor</td>
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<td>MS, City University of New York–Queens College, 1973</td>
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<td>M. Kathleen Philbin, PhD</td>
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<tr>
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<td>MD, Minsk State Medical Institute, Belarus, 1975</td>
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<td>Lucy S. Brevetti, MD</td>
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<tr>
<td>Vladimir A. Bondarenko, PhD</td>
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<td>Anupama Gupta, MD</td>
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<tr>
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<tr>
<td>Anna Petrova, MD, PhD</td>
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<td>Richard H. Siderits, MD</td>
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<td>Mark S. Butler, MD</td>
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<td>Stephen S. Cook, MD</td>
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<td>MD, Columbia University College of Physicians and Surgeons, 1968</td>
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<td>Charles J. Gatt, MD</td>
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<td>Azam S. Hussain, MD</td>
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<tr>
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<td>Stuart E. Levine, MD</td>
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<td>Donald R. Polakoff, MD</td>
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<td>Lorraine M. Lazar, MD</td>
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<td>MD, Mount Sinai School of Medicine, 1993</td>
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<td>Steven R. Leff, MD</td>
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<td>Hao Liu, PhD</td>
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<td>Instructor</td>
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<td>PhD, Rutgers University and University of Medicine and Dentistry of New Jersey, 2001</td>
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<td>Sharon Lohmann, MD</td>
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<td>Instructor</td>
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<td>Deborah W. Mark, MD</td>
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<td>Assistant Professor</td>
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<td>MD, Medical College of Pennsylvania, 1997</td>
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The dedication of the Norman Edelman Professorship in Bioinformatics took place on April 29, and featured a seminar presented by the first recipient of the professorship, William J. Welsh, PhD, professor of pharmacology and director, UMDNJ Informatics Institute.

Given anonymously, the chair honors Norman Edelman, MD, who served as dean of UMDNJ-Robert Wood Johnson Medical School from 1988 to 1995. As dean, he was highly respected for his visionary leadership.

A researcher and clinician specializing in pulmonary and critical care medicine, Dr. Edelman helped establish the Center for Advanced Biotechnology and Medicine. He also raised the national stature of the medical school by enhancing residency programs and recruiting some of the nation’s top scientists.

Dr. Edelman joined RWJMS in 1972, and he served as chief of the division of pulmonary and critical care medicine, Department of Medicine. In 1977, he was named associate dean of research, later serving as acting chair, then vice chair, Department of Medicine. Dr. Edelman currently serves as vice president of the Health Sciences Center, dean of the School of Medicine, and professor of medicine and physiology and biophysics at the State University of New York, Stony Brook.

Formerly a distinguished professor of chemistry and biochemistry at the University of Missouri, St. Louis, Dr. Welsh heads UMDNJ’s initiative to become a center of excellence in bioinformatics.

The recipient of numerous honors, Dr. Welsh received the 1998 St. Louis Award, presented by the St. Louis Section of the American Chemical Society, for his research achievements in computer-aided chemistry and drug discovery. He was co-recipient of the 2001 University of Missouri–St. Louis Chancellor’s Research and Creativity Award and was named Entrepreneur of the Year by the University of Missouri system. He serves on the editorial board of several scientific journals and as adviser and consultant for a number of pharmaceutical companies and business incubators. In 1999, Dr. Welsh founded GenChemiCs, a company specializing in the development and application of advanced computational and informatics tools aimed at the discovery of novel molecules for medicinal applications.

In congratulating both Dr. Edelman and Dr. Welsh on the occasion of the dedication, Harold L. Paz, MD, dean, called Dr. Edelman a friend and colleague.

“We recognize Dr. Edelman for his outstanding contributions to the Department of Medicine, the medical school, and the university,” the dean said. “I am delighted we have been able to immortalize his legacy by naming a professorship for him. Robert Wood Johnson Medical School is fortunate to count Dr. Edelman among its ranks of former deans — and I am proud to follow in his footsteps.”

Dr. Paz added that Dr. Welsh is a respected educator, researcher, and leader in the field of informatics.

“I cannot imagine a more outstanding choice for this distinction,” he concluded.

— R.M.R.
Joseph P. Leddy, MD, professor of orthopaedic surgery, has been appointed chair of the recently established Department of Orthopaedic Surgery. Dr. Leddy joined the RWJMS Department of Surgery in 1973 and served for six years as chief of its division of orthopaedic surgery before accepting his new position.

The creation of the Department of Orthopaedic Surgery was an important step for the medical school, says Harold L. Paz, MD, dean. “In the past three decades, the field of orthopaedics has grown enormously,” he adds, “and the division expanded to keep pace with that growth.”

A graduate of Jefferson Medical School, Dr. Leddy completed an internship and general surgery residency at New York Hospital/Cornell Medical Center. In addition, supported by a grant from the National Institutes of Health (NIH), he completed a fellowship in hand surgery with Joseph H. Boyes, MD, at the University of Southern California Medical Center.

As chair of the Department of Orthopaedic Surgery, Dr. Leddy leads a fellowship-trained 12-person, full-time faculty, with experts in almost every orthopaedic sub-specialty. One of his hopes for the department is the future addition of an orthopaedic oncologist.

Numerous factors have driven the transformation of orthopaedic surgery and increased the need for more orthopaedic specialists, says Dr. Leddy. First, the technological revolution has created materials that are both more durable and more biocompatible. Second, the perfection of new surgical techniques — microsurgery, minimally invasive surgery, and arthroplasty — has increased the demand for expert orthopaedic subspecialists. Third, says Dr. Leddy, sports medicine has evolved into a large sub-specialty that is today’s most popular choice for graduates of the RWJMS orthopaedic surgery residency program.

Dr. Leddy is extremely proud of the department’s top-quality residency program. It helps hone faculty skills, he says, while training a constant stream of new orthopaedic specialists, several of whom have gone on to join the RWJMS Department of Orthopaedics.

In the future, Dr. Leddy hopes to see the department grow in several areas, including its residency program. Working with residents and fellows ranks high for him, he says adding, “It’s always fun, and I’ve been doing it for a long time.”

— K.O’N.
Dr. Reichman Named Senior Associate Dean for Clinical Affairs

Harold L. Paz, MD, dean, has announced the appointment of William E. Reichman, MD, professor of psychiatry, as senior associate dean for clinical affairs.

Dr. Reichman assumes his new post following successful leadership on a number of UMDNJ fronts. He has served as vice chair for clinical programs, Department of Psychiatry, UMDNJ-Robert Wood Johnson Medical School; executive director of operations and medical director, University Behavioral Healthcare; and vice dean, UMDNJ-New Jersey Medical School. He was the principal developer of the division of geriatric psychiatry at RWJMS, a clinical, educational, and research program he helped achieve national prominence.

“Dr. Reichman is an active and effective teacher and clinician,” Dean Paz says. “I join with the Board of Governors at RWJMS in welcoming him as we look forward to his role in helping us confront the clinical challenges that lie ahead.”

A graduate of Trinity College who received his medical degree from the State University of New York School of Medicine, Buffalo, Dr. Reichman completed a residency in general adult psychiatry at the University of California at Los Angeles (UCLA) Neuropsychiatric Institute, and fellowship training in neurobehavior at the UCLA Reed Neurological Research Institute.

He is a nationally respected expert in the field of geriatric mental health and dementia, whose primary focus has been the pharmacological treatment of Alzheimer’s disease, and the presence of negative symptoms and apathy in the disorder. In addition, he is a noted authority on the delivery of mental health care in nursing homes, has lectured throughout the United States, Europe, and Asia, and has received funding from the Robert Wood Johnson Foundation, as well as from pharmaceutical companies, for his investigator-initiated projects. He also is a past president of the American Association for Geriatric Psychiatry, and the Geriatric Mental Health Foundation. In his new role, Dr. Reichman is president of the Robert Wood Johnson University Medical Group (RWJUMG).

“I plan to work with the leadership of the medical school to provide the best possible medical care to the community,” Dr. Reichman says. “That includes exceptional accessibility to treatment, comfortable waiting rooms, and empathic and timely responsiveness from both physicians and support staff. We want to instill a strong consumer focus with in the practice — that’s no more than the community has a right to expect from its medical school.”

“Coming back to RWJMS is a little like coming home,” Dr. Reichman says. “I’m delighted to have a small part in rallying the strengths we have toward a delivery system that is, in every way, supportive of the exceptionally high research and teaching that goes on here at the school.”

— R.M.R.

Researchers Receive NIH MERIT Awards

This summer, the National Institutes of Health (NIH) presented two MERIT Awards to RWJMS faculty members. MERIT (Method to Extend Research in Time) is a mechanism established by the NIH to provide long-term grant support to investigators of proven research competence and productivity.

The MERIT award to Ann M. Stock, PhD, professor of biochemistry and resident member, Center for Advanced Biotechnology and Medicine (CABM), extends her current grant for four to six years beyond its original period. The grant, awarded by the National Institute of General Sciences, funds Dr. Stock’s research on structural and functional characterization of members of a large family of bacterial signal transduction proteins known as response regulators.

Dr. Stock was recently re-appointed to the Howard Hughes Medical Institute, with a promotion to full investigator.

Peter D. Yurchenco, MD, PhD, professor of pathology and laboratory medicine, received his MERIT award from the National Diabetes and Digestive Kidney Diseases Advisory Council. The award, which funds Dr. Yurchenco’s basic biomedical research on the assembly, structure, and functions of basement membranes, will extend his grant for five years beyond its current period.

— K.O’N.
Professionally Speaking

In June, Deborah A. Cory-Slechta, PhD, professor and chair, Department of Environmental and Community Medicine, and director, Environmental and Occupational Health Sciences Institute, was an invited speaker in Brighton, England, at the Second World Congress on Fetal Origins of Adult Disease. Dr. Cory-Slechta presented “Developmental Pesticide Exposure and the Parkinson’s Disease Phenotype.”

On June 23, Michael A. Gallo, PhD, professor of environmental and community medicine, served as the discussion leader on functional genomics at the Gordon Conference, “Toxicogenomics,” held at Bates College, in Lewiston, Maine.

In May, James S. Goydos, MD ‘88, assistant professor of surgery, was an invited member at “Melanoma 2003: Turning Scientific Discoveries into Clinical Targets,” at the National Cancer Institute State of the Science Meeting, in Bethesda, Maryland.

George H. Lambert, MD, associate professor of pediatrics and director, Center for Childhood Neurotoxicology and Exposure Assessment, spoke at a meeting of the National Children’s Study of the National Institute of Environmental Health Sciences, where he presented “Phthalates [Plasticizers] in the NICU Patient.”

David A. Laskow, MD ‘81, associate professor of surgery and chief, division of kidney and pancreas transplantation, participated in the American Transplant Congress in Washington, D.C. He chaired a concurrent session, “Kidney: Monitoring and End Points,” and presented a poster, an exhibit, and two lectures, including “The Different Reasons for Non-donation Among Ethnic Sub-populations.”

On June 9, Paul J. Lioy, PhD, professor of environmental and community medicine, appeared on the morning segment of News 12 New Jersey to discuss the effects of summer ozone.

Stephen F. Lowry, MD, professor and chair, Department of Surgery, presented “Genomic Changes in Response to Endotoxin Administration: A Comparison with Trauma Patients” at a special Glue Grant session at the 26th annual Shock Society Meeting on June 9, in Phoenix.


Nicola C. Partridge, PhD, professor and chair, Department of Physiology and Biophysics, was a plenary speaker at the International Conference on Metabolic Bone Disease in Australia. She also presented “Collagenase Genes and Regulation” and served as a judge for Young Investigator Awards at the conference.

Spotlight on Students

In June, Nataliya Prokopenko ’05 completed a year as a Howard Hughes Medical Institute–NIH Research Scholar. In keeping with her post–medical school plans to work in either oncology research or cancer care, she chose to do her research in the Laboratory of Pathology at the National Cancer Institute, where her mentor was pathologist Mark Raffield, MD. Nataliya investigated mesothelioma, kidney glomerular disease, and oral cancers. Before returning to RWJMS this spring, she spent three weeks studying mantle cell lymphoma with NCI collaborators in Munich.

In June, Deborah A. Cory-Slechta, PhD, professor and chair, Department of Environmental and Community Medicine, and director, Environmental and Occupational Health Sciences Institute, was an invited speaker in Brighton, England, at the Second World Congress on Fetal Origins of Adult Disease. Dr. Cory-Slechta presented “Developmental Pesticide Exposure and the Parkinson’s Disease Phenotype.”

On June 23, Michael A. Gallo, PhD, professor of environmental and community medicine, served as the discussion leader on functional genomics at the Gordon Conference, “Toxicogenomics,” held at Bates College, in Lewiston, Maine.

In May, James S. Goydos, MD ‘88, assistant professor of surgery, was an invited member at “Melanoma 2003: Turning Scientific Discoveries into Clinical Targets,” at the National Cancer Institute State of the Science Meeting, in Bethesda, Maryland.

George H. Lambert, MD, associate professor of pediatrics and director, Center for Childhood Neurotoxicology and Exposure Assessment, spoke at a meeting of the National Children’s Study of the National Institute of Environmental Health Sciences, where he presented “Phthalates [Plasticizers] in the NICU Patient.”

David A. Laskow, MD ‘81, associate professor of surgery and chief, division of kidney and pancreas transplantation, participated in the American Transplant Congress in Washington, D.C. He chaired a concurrent session, “Kidney: Monitoring and End Points,” and presented a poster, an exhibit, and two lectures, including “The Different Reasons for Non-donation Among Ethnic Sub-populations.”

On June 9, Paul J. Lioy, PhD, professor of environmental and community medicine, appeared on the morning segment of News 12 New Jersey to discuss the effects of summer ozone.

Stephen F. Lowry, MD, professor and chair, Department of Surgery, presented “Genomic Changes in Response to Endotoxin Administration: A Comparison with Trauma Patients” at a special Glue Grant session at the 26th annual Shock Society Meeting on June 9, in Phoenix.


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In Memoriam

Jeffrey C. Merrill, MPH, University Professor of Psychiatry, died June 4 at Memorial Sloan-Kettering Cancer Institute. Mr. Merrill, who was awarded the first University Professorship at UMDNJ-Robert Wood Johnson Medical School, was nationally and internationally recognized for his groundbreaking research in health policy issues, particularly in relation to alcohol and substance abuse disorders. A former vice president of the Robert Wood Johnson Foundation and a senior policy analyst for the U.S. Health Services Administration, he came to RWJMS from the University of Pennsylvania Medical School Center for Addictions.

At his death, Mr. Merrill was developing the Pearl Merrill Institute for Children at RWJMS, named for his late mother, to improve services for children at risk of substance abuse.

Points of Pride

Peter S. Amenta, MD, PhD, professor and chair, Department of Pathology and Laboratory Medicine, received the 2002–2003 Kenneth B. Cummings Urology Teaching Award for dedication and excellence in training urology residents. Carolyn E. Bekes, MD, professor of medicine; R. Phillip Dellinger, MD, professor of medicine; and Joseph E. Parrillo, MD, professor of medicine, received the Distinguished Service Award from the Society of Critical Care Medicine. The May issue of Philadelphia magazine featured “Top Hospitals: Where to Get the Best Care.” The article recognized Cooper University Hospital, a principal hospital affiliate of RWJMS, for its outstanding programs in critical care medicine and trauma. Philadelphia cited the leadership of “two internationally renowned intensivists,” Drs. Dellinger and Parrillo.

The Institute for Scientific Information’s recently published list of Highly Cited Researchers includes Ira B. Black, MD, professor and chair, Department of Neurosurgery; and Paul J. Lioy, PhD, professor of environmental and community medicine. Gregory L. Borah, MD, professor of surgery and chief, division of plastic surgery, was appointed to serve on the advisory committee for the American Society of Plastic Surgery. Peter D. Cole, MD, assistant professor of pediatrics and pharmacology, received a $995,000 grant from the Damon Runyon Cancer Research Foundation for his project “Improving the therapeutic index for children with acute lymphoblastic leukemia through studies of folate physiology and antifolate pharmacodynamics.” The clinical investigator award is one of only five made in a national competition.

Siobhan Corbett, MD ’87, assistant professor of surgery, chaired the Program Committee meeting for the Association for Academic Surgery on June 30, in Gainesville, Florida. At the annual meeting of the American Psychiatric Association, Jeffrey B. Dunn, MD, assistant professor of psychiatry, received the Nancy C.A. Roeseke, MD, Certificate of Recognition for Excellence in Medical Student Education.

The Association of Healthcare Executives of New Jersey selected Alice B. Gottlieb, MD, PhD, William H. Conzen Chair in Clinical Pharmacology, professor of medicine, and director, Clinical Research Center, for its 2003 Distinguished Service Award. The annual award honors individuals who have made significant contributions to New Jersey’s health care community. Good Housekeeping has named the New Jersey Pain Institute (NJPI) at Robert Wood Johnson University Hospital (RWJUH) “One of the Nation’s Top 35 Pain Care Centers.” Established in 1989, the NJPI is a joint service of the RWJMS Department of Anesthesiology and RWJUH, a principal hospital affiliate of RWJMS. William R. Grubb, MD, DDS, associate professor of anesthesiology, serves as acting director of the NJPI.

Barton A. Kamen, MD, PhD, professor of pediatrics and pharmacology and chief, pediatric hematology/oncology program, The Cancer Institute of New Jersey, has accepted an invitation from the American Association for Cancer Research to serve on its newly formed Pediatric Oncology Task Force.
Points of Pride

Terri Goss Kinzy, PhD, associate professor of molecular genetics, microbiology, and immunology, was selected as a fellow in the 2003 Hedwig van Ameringen Executive Leadership in Academic Medicine Program at Drexel University.

David S. Kountz, MD, associate professor of medicine and associate dean for postgraduate education, received an Award of Honor at the 2003 annual meeting and dinner of the medical staff of RWJUH.

Jianjie Ma, PhD, University Professor of Physiology and Biophysics, has accepted an invitation from the National Institutes of Health (NIH) to serve in the Molecular, Cellular, and Developmental Study Section.

Stephen J. Moorman, PhD, associate professor of neuroscience and cell biology, won the Association of American Anatomists’ Young Anatomist’s Publication Award. He was honored at the association’s annual meeting for his co-authored manuscript, which appeared in the February 2002 issue of Developmental Dynamics. His research was supported by grants from the NIH and the National Aeronautics and Space Administration (NASA).

At the Gordon Research Conference on “Muscle: Excitation/Contraction Coupling,” held at Colby-Sawyer College, New London, New Hampshire, Zui Pan, PhD, assistant professor of physiology and biophysics, gave an invited talk, “Store-Operated Calcium Channel in Skeletal Muscle Cells,” on a panel led by his colleague, Dr. Ma.

On August 22, the Star-Ledger published a business feature on PTC Therapeutics and Stuart W. Peltz, PhD, professor of molecular genetics, microbiology, and immunology. The successful technology transfer company was co-founded in 2000 by RWJMS, Dr. Peltz, and his mentor, Allan Jacobson, PhD, chair of the Department of Molecular Genetics and Microbiology at the University of Massachusetts Medical School.

Arnold B. Rabson, MD, professor of molecular genetics, microbiology, and immunology, and pathology and laboratory medicine; associate director for basic science, The Cancer Institute of New Jersey; and resident member, Center for Advanced Biotechnology and Medicine (CABM), has been appointed an associate editor of Cancer Research.

Denise V. Rodgers, MD, professor of family medicine and environmental and community medicine and associate dean for community health, recently received two appointments from Governor James E. McGreevey. She will serve on the Governor’s Council on HIV/AIDS and Related Blood-Borne Pathogens and on the Advisory Council of the New Jersey Office on Minority and Multicultural Health.

The American Academy of Physical Medicine and Rehabilitation recently presented its Distinguished Clinician Award to Thomas E. Strax, MD, clinical professor and chair, Department of Physical Medicine and Rehabilitation. The award recognizes physiatrists who have achieved distinction as scholarly teachers and outstanding performers of patient care. Recipients also are selected based on their significant contributions to the academy and to the development of their specialty.

Thresia K. Thomas, PhD, associate professor of environmental and community medicine, has been invited to serve as a reviewer for the NIH Experimental Therapeutics Study Section.
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Or visit somersetmedicalcenter.com to learn the risks and warning signs of carotid artery disease.
Ann M. Stock, PhD, professor of biochemistry; Investigator, Howard Hughes Medical Institute; and resident member, CABM, and Peter Lobel, PhD, professor of pharmacology and resident member, CABM, collaborate on research aimed at treatment of rare childhood diseases.
5 P.M. almost any first Thursday. The meeting comes to order, somewhat unceremoniously, over pizza. There is the customary review of administrative detail, hastily conducted by faculty members impatient for the main event. Then, subtly but with precision-like shift in focus, one of several scientists takes the floor to begin the presentation. What follows is a meticulously articulated chronology of the research project scheduled for discussion. The delivery is restrained, conversational — a colleague chatting with peers about the work being conducted in his or her laboratory. The interest it generates gains momentum until it permeates the room. Questions, suggestions, constructive criticism, and new perspectives all flow freely in an intellectual environment characterized by collaborative interaction.

The Center for Advanced Biotechnology and Medicine (CABM), a joint research effort of UMDNJ-Robert Wood Johnson Medical School and Rutgers, The State University of New Jersey, is a place where the concept of teamwork takes on extraordinary dimensions.

“Our monthly meetings provide exceptional opportunities for collaboration,” says Ann M. Stock, PhD, professor of biochemistry and resident member, CABM. Dr. Stock, recently named a full Investigator, Howard Hughes Medical Institute, is a UMDNJ Master Educator and recipient of the Foundation of UMDNJ’s 2002 Excellence in Teaching Award. She reflects that the informal sessions epitomize the kind of cooperative endeavor that goes on at CABM.

“I think these meetings further everyone’s research,” she says. “It’s very helpful to know what is happening in each other’s labs, and, most important, the presenter gets quality criticism from other faculty. Of course, we all get that from the review process when we submit papers. However, the reviewer is involved in the same field as the author of the paper. Here, we get fresh perspectives from an interdisciplinary group of researchers. That kind of input is hard to come by.”

by rita m. rooney
portraits by john emerson
A meeting of the minds designated by the New Jersey Commission on Science and Technology as one of the state’s advanced technology centers, CABM undertakes groundbreaking molecular biology research, including structural biology, cell and developmental biology, and molecular genetics, all directed toward improving health through a better understanding of fundamental life processes. CABM researchers interact with clinical scientists at RWJMS and many of its institutes, such as The Cancer Institute of New Jersey, to bridge the gap between laboratory discoveries and patient care.

Aaron J. Shatkin, PhD, professor of molecular genetics, microbiology, and immunology and director, CABM, reports, “Molecular medicine is a relatively new field, and the work being done by CABM researchers is making important contributions to this revolution in biomedical advances.”

Dr. Shatkin points to outstanding scientists leading pioneering research initiatives, among whom are two Investigators, Howard Hughes Medical Institute, and two members of the National Cancer Institute Mouse Models of Human Cancer Consortium. Other faculty are leaders of a National Institutes of Health (NIH) Program Project on HIV-AIDS and the NIH-sponsored Northeast Structural Genomics Consortium. In addition, CABM is home to three NIH MERIT awardees and the NIH Biotechnology Training Program. In the past year, CABM studies were published in more than 15 leading international journals.

The collaboration that takes place during the Thursday meetings at CABM has resulted in promising inter-laboratory partnerships, among them the professional pairing of Dr. Stock and Peter Lobel, PhD, professor of pharmacology and resident member, CABM, and the recipient of a Searle Scholar Award.

Dr. Lobel is responsible for extensive studies involving lysosomal storage disorders. Lysosomes are membrane-bound organelles found in all cells. Loss of a single lysosomal enzyme or more can lead to serious neurological disease. Tay-Sachs disease is one example, and there are many other genetic diseases that most likely are rooted in lysosomal enzyme deficiencies. Dr. Lobel discovered that one of them, late infantile neuronal ceroid lipofuscinosis (LINCL), is caused by mutations in a gene encoding a lysosomal protease. Children born with LINCL develop normally until age three or four; then symptoms begin to appear. They have difficulty walking. Speech is impaired. They lose their sight, and become mentally retarded. By the time they die, between the ages of eight and 14, at least a third of their brain function has been lost.

Dr. Lobel’s laboratory found the missing protein at the genomic level that leads to the disease. As a result of this success, genetic counseling now is available to predict parent-carriers who do not have any of the symptoms. Although a basic scientist, Dr. Lobel expanded his work well beyond the cell culture dish. After identifying the gene and determining the function of the corresponding protein, his laboratory developed biochemical and DNA-based assays for pre- and post-natal diagnosis as well as carrier screening.

“Right now, if a couple knows there has been an incidence of the disease in the family, we can offer tests to definitively diagnose it,” Dr. Lobel reports. “At least there is some comfort in knowing what to expect and learning what can be done. Not knowing is much more traumatic for parents.”

Even his progress in discovering a diagnosis hasn’t slowed the investigative zeal of this researcher, who frequently is sought by families who read on the Internet about his work and appeal to him for help.

“Unfortunately, without universal carrier testing, new cases continue to rise,” Dr. Lobel explains. “In an attempt to halt and reverse the disease progression, we are conducting experiments to develop en-
zyme replacement and gene therapy. As proof of principle, we found that when we culture patient cells in dishes and add recombinant enzyme, the enzyme is absorbed and restores the missing function. This is promising, but there are still barriers to be overcome before it will benefit children afflicted with the disease.” RWJMS has received a patent for replacement therapy, and it has been licensed to Genzyme Corporation for ultimate development.

Dr. Lobel’s laboratory also has developed a LINCL mouse model to allow detailed studies of disease pathophysiology and evaluation of potential therapeutic strategies. Meanwhile, definitive diagnosis is being done in labs throughout the United States and Europe.

The success story doesn’t end there. Far from it. Dr. Lobel extended his study of lysosomes and came up with important conclusions about Niemann-Pick type C2 disease, a fatal hereditary illness characterized by an accumulation of low-density lipoprotein-derived cholesterol in lysosomes. During a Thursday evening CABM meeting of his colleagues, he discussed his findings. The rest is collaborative history.

“I was fascinated by his presentation and the opportunity to learn more about these traumatic diseases,” Dr. Stock says. “He talked about wanting to know more about the NP-C2 protein. He felt it would be valuable to know what the protein looked like. Its exact role in the cell was still unknown, although there was evidence that patients accumulate cholesterol in lysosomes. This intrigued me because I saw a possible role for our laboratory.”

Dr. Stock’s research is in structural biology, specifically X-ray crystallography, a technology that can determine the three-dimensional structure of proteins. Her laboratory investigates structure and function in signal transduction systems, the information-processing pathways within cells that couple stimuli to appropriate responses.

It wasn’t long before the two colleagues, who have since authored a paper on their findings in the Proceedings of the National Academy of Sciences, joined forces.

Dr. Lobel’s enthusiasm about the potential benefits of collaboration is evident: “It’s wonderful working with Ann because she and I come from different perspectives. We have different insights about what we are doing. When we compare scientific notes, we each seem to learn something new, some opening appears that we might not have come up with individually.”

Dr. Stock agrees. “I am a structural biologist, accustomed to looking at proteins in isolation,” she says. “Peter is more experienced at looking at them in cells. People often talk about scientists arguing one theory or approach over another. But the reality is that, more often, both approaches are needed to complete the equation.”

**As research partners,**
Ann M. Stock, PhD, professor of biochemistry; Investigator, Howard Hughes Medical Institute; and resident member, CABM, and
Peter Lobel, PhD, professor of pharmacology and resident member, CABM, confer.

The problem with which Dr. Lobel was wrestling was whether or not the molecule bound cholesterol and, if it did, how that occurred. What Dr. Stock initially contributed was that the NP-C2 protein did not mimic others and, therefore, did not conform in structure to other cholesterol-bound proteins. As it turned out, this particular protein was difficult to express in the quantity needed for structural analysis. Finally, a post-doctoral fellow in Dr. Stock’s laboratory decided to work with protein from cow’s milk. They were successful in purifying the protein and in obtaining crystals, thereby being able to deter-
mine its exact structure.

“The structure provided insight into how cholesterol binds to NP-C2, and raised the possibility of other cellular partners that might facilitate the process,” Dr. Lobel says.

He adds that to cure the disease, it would be necessary to replace the missing protein in the patient through protein replacement or gene therapy. However, there is potential for improving the patient’s life without absolute cure. If alternative pathways can be found, it may be possible to boost compensatory systems with drug therapy. That’s what the CABM partners are now exploring.

Dr. Stock says the greatest benefit may not be that two people figure out the right approach, but that they can eliminate the wrong approach much faster.

The biggest breakthrough is that the gene has now been identified, and pre-natal testing is available to families once they have an infant diagnosed with NP-C2. Screening can help prevent the disease in future children, and understanding its molecular nature facilitates diagnosis. In the meantime, the research may well benefit science in other critical ways by shedding valuable information on cholesterol studies focused on what goes on inside the cells. The progress achieved by Dr. Lobel and Dr. Stock adds a new dimension in understanding intracellular cholesterol trafficking.

CABM is rich in these kinds of collaboration. Arnold B. Rabson, MD, professor of molecular genetics, microbiology, and immunology, and pathology and laboratory medicine, and resident member, CABM, has a major role in studies that attempt to understand how viruses are replicated in leukemia. His work with an AIDS-related virus that causes cancer has wide implications and includes investigations that question why a high incidence of people in Japan are infected with the virus but, unlike Americans, do not get cancer.

Céline Gélinas, PhD, professor of biochemistry and resident member, CABM, collaborates with Dr. Rabson through her research on the control of gene expression in cancer. It is anticipated that her work may clarify the function of certain proteins in the immune system and in oncogenesis, and may provide a basis for novel approaches to therapeutic intervention.

Another example is the work of Cory Abate-Shen, PhD, professor of medicine and neuroscience and cell biology and resident member, CABM, and Michael M. Shen, PhD, professor of pediatrics and resident member, CABM. The two have learned that a gene discovered in their laboratories, Nkx 3.1, suppresses prostate cancer in mice. By studying mutant mice without the gene as models of human early stage prostate cancer, they are developing new insights into carcinogenesis and, in some contexts, metastasis. Recent implications of their research extend beyond prostate cancer to models of breast and ovarian cancer and of brain disorders. Dr. Meng Xiang, PhD, associate professor of pediatrics and resident member, CABM, and Dr. James H. Millonig, PhD, assistant professor of neuroscience and cell biology and resident member, CABM, collaborate with Dr. Shen, Dr. Abate-Shen, and others to decipher the basis of hearing loss, autism, and other devastating diseases.

Commenting on the collaborative payoff, Dr. Stock says the greatest benefit may not be that two people who get together figure out the right approach, but that they can eliminate the wrong approach much faster.

“When you have that rare opportunity to bounce ideas back and forth, when you can argue constructively, when you can play devil’s advocate with each other, when you find yourself justifying your conclusions to a collaborator—you tend to find the loopholes in your own train of thought,” she says. “That’s what good science is all about.”

The question of just how it comes about is answered by Dr. Lobel, who points to Dr. Shatkin’s leadership.

“He has assembled a group of very curious researchers interested in solving scientific problems,” Dr. Lobel says of CABM’s director. “More than that, he has given us the independence to move ahead, unrestrained by anything other than our own ambition and curiosity. We have the opportunity to collaborate with extraordinary people. I think independence is the key, and it’s unusual.”
Southern New Jersey has a new look, and its name is Cooper. While a longtime dominant force in clinical care and medical education as the clinical campus for UMDNJ-Robert Wood Johnson Medical School, Camden campus, Cooper Health System also has become the leading resource for cardiovascular care and critical care medicine in the region, thanks to a new team of cardiac and critical care specialists.

Housed within the health system are the division of cardiovascular disease and critical care medicine and the Cooper Heart Institute, the cardiac center at Cooper Hospital/University Medical Center. There, leading experts in cardiology and critical care have steadily transformed an already strong educational, clinical, and research enterprise into a more comprehensive system of care for critically ill patients. In fact, Cooper Hospital was recognized as the first critical care center of excellence by Philadelphia magazine in its 2003 annual survey of top hospitals.

Cardiology and critical care medicine leaders at Cooper Health System in Camden are not only advancing cardiovascular and critical care medicine for patients regionally, but also building a center of excellence that achieves national ranking and rivals any in the Philadelphia area.
“We’re the place that South Jersey looks to for care of the most critically ill patients, those who are too sick to be cared for anywhere else,” says Joseph E. Parrillo, MD, professor of medicine, RWJMS, Camden campus; head of the division of cardiovascular disease and critical care medicine; and director, Cooper Heart Institute.

ASSESSING SOUTHERN NEW JERSEY’S CARDIAC NEEDS

Some 3 million people live in South Jersey, where the need for excellence in cardiac and critical care has been growing for a number of years. However, only three of the region’s 25 hospitals have the capability to provide advanced cardiac and critical care for the region’s sickest heart patients. As patient care needs grew, so did the need to strengthen Cooper Health System’s cardiac and critical care program and its referral network for these services.

In November 2001, Cooper Health System appointed Dr. Parrillo to lead this effort. His charge: to enhance cardiovascular and critical care in South Jersey and throughout the Delaware Valley by developing state-of-the-art programs and procedures, offering access to cutting-edge research, establishing well-organized systems of cardiac and critical care, and attracting top-notch physicians.

Formerly chief of the division of cardiovascular disease and critical care medicine at the Rush–Presbyterian–St. Luke’s Medical Center in Chicago and the James B. Herrick Professor of Medicine at Rush University Medical College, Dr. Parrillo brought Rush colleague R. Phillip Dellinger, MD, to serve as professor of medicine and director of the Critical Care Medicine Fellowship Training Program at RWJMS, Camden campus; director of the section of critical care medicine; and medical director of the Medical/Surgical Intensive Care Units. Leading researchers of sepsis, Dr. Parrillo and Dr. Dellinger built one of the best cardiovascular and critical care programs in the nation at Rush.

“Drs. Parrillo and Dellinger are providing exceptional leadership,” says Edward D. Viner, MD, professor of medicine and chief, Department of Medicine, RWJMS, Camden campus. “They are expanding on Cooper’s strength by taking the institution to the next level.”

POSITIONED FOR EXCELLENCE

Since early 2002, Dr. Parrillo has overseen several major changes in the Camden cardiology program at RWJMS, Camden campus: the decision to combine cardiovascular disease and critical care medicine into one division; the expansion of the cardiology fellowship program and introduction of two new sub-specialty fellowships; the debut of leading-edge cardiovascular and critical care technology; the increase in competitive research; and the recruitment of ten additional faculty members to Cooper, five of whom are at the level of full professor.

“Combining the formerly separate divisions of cardiovascular disease and critical care medicine was a logical first step,” states Dr. Parrillo, who initially trained as a critical care specialist. “Much of cardiovascular disease involves very sick cardiac patients, as well as the techniques we use in the intensive care unit to monitor the heart and blood pressure. All these fit into the world of cardiovascular disease and critical care medicine.”

Moreover, the recruitment of top clinicians — including experts in heart failure management, echocardiographic studies, and coronary artery disease — has boosted the division’s cardiology and critical care fellowship programs and its participation in both federally and industry-funded competitive research. In just the last year, the division has expanded the number of positions in its three-year cardiology fellowship from two to three at each level and has introduced two new sub-specialty fellowships: interventional cardiology and electrophysiology.

AIMING FOR BEST PRACTICES

Cooper Heart Institute researchers are also now part of an international study to explore the use of computerized ICU protocols at the bedside using touch-screen laptops. Dr. Dellinger, principal investigator for the study, coordinates a team of clinicians at eight pilot sites in the United States and Europe who believe these computerized protocols will standardize best practices in the ICU. Initial targeted areas of care include cardiovascular care, sedation and pain relief, and weaning from mechanical ventilators. Using a laptop computer at the bedside, clinicians follow a series of decision-making prompts based on the patient’s characteristics. The information is stored for later treatment analysis.

“This endeavor is groundbreaking,” Dr. Dellinger says,
“since there has been little development of such electronic protocols in critical care.”

Dr. Dellinger is also one of three members of the executive steering committee for the international Surviving Sepsis Campaign, a global collaborative effort of infectious disease and critical care experts to improve the diagnosis, survival, and management of patients with sepsis. He serves as one of four co-chairs overseeing the clinical development of international consensus guidelines for sepsis management within this campaign.

“The next steps are to distill the information into a user-friendly format for providers and explore ways to change practitioner behavior in ICUs to reflect such best practices,” he adds.

EXPEDITING CARE FOR SERIOUSLY ILL PATIENTS

Emergency care for critically ill patients further reflects bold new steps. The new Cooper Transfer System (COTS), launched in August 2002, extends the medical center’s ability to reach and serve critically ill patients. COTS is a 24/7 toll-free phone system for transferring critical care patients to Cooper Hospital/University Medical Center from outlying hospitals. A COTS call triggers clinicians to arrange immediate transport of the patient by an ambulance or helicopter. After the patient arrives at Cooper Hospital, a fax on the patient’s status is immediately sent to the patient’s referring physician; other communication follows after 24 and then 72 hours.

More than 40 percent of emergency transfers from community hospitals throughout South Jersey have used COTS.

ADVANCING CLINICAL CARE, RESEARCH, AND REGIONAL RELATIONS

Cutting-edge diagnostic and treatment technology at Cooper Heart Institute is transforming clinical care, both invasive and non-invasive. Treatment includes such therapies as drug-eluting stents and other methods for preventing a re-narrowing of coronary arteries. Cooper is also the only facility in southern New Jersey to use robotic-assisted surgery and bi-ventricular pacing for heart failure patients, a new procedure in which several pacing wires are threaded into the heart ventricles to synchronize the heart and improve its performance.

Dr. Parrillo points out two major efforts on cardiac care techniques being carried out in the Cooper Cardiac Catheterization Laboratory. One study explores facilitated angioplasty, which involves the use of a combination of either angioplasty or a stent as solo therapy, or along with clot-busting medication for patients suffering from a heart attack.

“You can reduce the number of patients who would die from a heart attack from 7 percent to 3 percent, so there’s something to be gained from facilitated therapy,” Dr. Parrillo says.

Another study includes brachytherapy, a procedure that uses radiation therapy to prevent re-stenosis, or re-narrowing of the blood vessel, which occurs in 15 to 20 percent of patients who have had angioplasty. Using a thin catheter to deliver the radiation, brachytherapy treats just the small area of the vessel that has re-narrowed. “This prevents re-stenosis about 70 percent of the time,” Dr. Parrillo says. Cooper is the only institution in southern New Jersey that uses this type of radiation therapy for re-stenosis.

STRIVING FOR STRENGTHENED RELATIONS WITH REGIONAL PROVIDERS

These clinical and research endeavors are as much about sharing as they are about exploration, Dr. Parrillo notes. Cooper Heart Institute sees its role as a partner with community hospitals, and has begun to share clinical resources and advances with area physicians through regular educational presentations.

Dr. Parrillo also offers a monthly conference for non-Cooper nurses in the area,” Dr. Parrillo says, “in part because they receive a good introduction into what is going on here, and to attract nurses to our ICUs and other areas in need of additional nurses.”

Together these efforts strengthen the delivery of care among all providers in South Jersey, Dr. Parrillo notes, adding, “Indeed, they are all part of a process to make Cooper the place to care for seriously ill patients.”
They are called national treasures. The future. Our greatest resource. The best of what this country stands for. They are, of course, our children. At UMDNJ-Robert Wood Johnson Medical School, child health has become a legacy in motion — the objective of clinicians and researchers in the Department of Pediatrics and beyond who are building a finely tuned coalition of talents on behalf of youth.

The collaborative components are led by an expanding pediatrics faculty focused on critical sub-specialties otherwise unavailable in New Jersey — and by an education agenda aimed at training an assemblage of extraordinary pediatricians. They encompass the investigative skills of world-class scientists who will probe the origin of childhood illness in a state-of-the-art research institution. The multi-faceted health compound includes as well a new, technologically superior, and family-friendly children’s acute care hospital, in addition to a rehabilitative care hospital and an outpatient facility.

BY RITA M. ROONEY
PHOTOS BY NAT CLYMER
Daniel A. Notterman, MD, University Professor and chair, Department of Pediatrics, reports, “We’re building a tertiary and quaternary center of care for youngsters with cancer, cardiac disease, and other life-threatening illnesses. Until now, this kind of specialization has not existed in New Jersey.

“RWJMS has the resources to do this,” he adds. “We have the critical mass of patients, plus the medical and research talents needed to train the next generation of subspecialists. Right now, millions of health care tax dollars flow out of New Jersey for the care of our critically ill children in New York and Philadelphia. Thanks to the medical school’s leadership, this trend is about to change.”

He refers to the vision of expansion driven by Harold L. Paz, MD, dean. “New Jersey families have a right to expect the highest level of care for their children,” Dean Paz says. “That can be achieved only through an integrated university program in which faculty clinicians and researchers fuse their intellects toward a shared outcome.”

Specialization Addressed

Among recently appointed faculty sub-specialists are several neonatologists, two emergency department physicians, two gastroenterologists, an endocrinologist, medical geneticist, nephrologist, neurologist, rheumatologist, and four researchers, including the internationally renowned cancer biologist Arnold J. Levine, PhD, professor of pediatrics and biochemistry and member of The Cancer Institute of New Jersey (CINJ).

The shortage of pediatric sub-specialists is a national problem. While both RWJMS and the New Jersey Medical School have excellent training programs for general pediatrics, RWJMS currently offers only one fellowship in a pediatric sub-specialty — neonatology. Dr. Notterman expects to add fellowships in critical care and emergency medicine in the near future, followed by ones in other divisions, including endocrinology, pulmonary medicine, and ambulatory pediatrics.

Commenting on the stature of the medical school’s pediatric residency, Dalya L. Chefitz, MD ’90, clinical associate professor of pediatrics and chief of the residency program, says, “We have a very competitive program that consistently draws outstanding candidates. I can safely say we are considered one of the top programs in the New Jersey–New York–Philadelphia area.”

Will the addition of fellowships in specific disciplines encourage residents to seek medical careers in New Jersey?

“I think it will,” Dr. Chefitz says. “The theory is that if a resident leaves the state for a fellowship, he or she may not return. However, we have an unusually strong record of alumni who choose to stay here. It’s certainly likely New Jersey will gain new talents from those seeking sub-specialty training here. But the availability of pediatric fellowships has an even broader impact on medical education. It will add depth to both medical school and residency programs and will give residents the additional perspectives to be gained by the input of sub-specialty fellows.”

Strong Research Component

Nowhere is the evidence of child focus more prominent than in the division of neonatology, where two newly appointed division co-chiefs, Nazeen Hanna, MD, assistant professor of pediatrics, and Barry I. Weinberger, MD, associate professor of pediatrics, combine outstanding clinical skills with National Institutes of Health (NIH) funding in excess of $300,000 annually to investigate infant lung physiology and placenta problems leading to premature birth.

The leadership of the Departments of Pediatrics and Surgery and the partnership of the Bristol-Myers Squibb Children’s Hospital at Robert Wood Johnson University Hospital (RWJUH) also provide the groundwork for RWJMS’s planned cardiac surgery program.

Dr. Notterman reports that the program, slated to open in 2004, will be staffed by pediatric cardiologists and members of the RWJMS surgery department. A catheterization laboratory, equipped for children and staffed by specially trained personnel, is being built to accommodate the new service at the hospital.

“It’s important to realize the medical school’s commitment to child health is not an isolated effort,” Dr.
Pre-term Labor Studied

Research conducted by Dr. Hanna and Dr. Weinberger is jointly directed to prematurity and the effect of inflammation on infants. While Dr. Hanna's studies focus on placenta function in pre-term deliveries, Dr. Weinberger's interest lies in post-delivery complications, specifically the function of white blood cells in the premature infant. The two, however, speak as a team, with a clearly shared purpose.

Dr. Hanna explains, “There are still many missing factors in determining why certain women undergo pre-term labor, and why having one premature baby increases the likelihood that the mother’s next child will be premature as well.

“We began looking at the micro-environment of the placenta and the possibility that specific hormones were either over- or under-expressed. Recently, we identified a protein, called IL 10, that is under-expressed in cases of pre-term labor. It is our conclusion that a decrease in this protein is associated with inflammation that may trigger pre-term labor.”

The research team is studying genetic backgrounds of mothers who may have a low expression of IL 10. The hope, Dr. Hanna says, is that an intervention can be developed to prevent prematurity. One possibility is that of supplementing the protein, thereby maintaining a high enough level to ensure full-term delivery.

Dr. Weinberger adds that, aside from genetic predisposition, it is believed that differences between infants and adults in the immune function of white blood cells contribute to pre-term labor. Many of the problems incurred by premature infants are caused by inflammation. Therefore, a better understanding of the role of immunity and inflammation may make it possible to tailor interventions prenatally for the mother or for the newborn baby.

“Essentially, this means that our studies extend to the developmental differences that exist in adults, infants, and fetuses,” Dr. Weinberger says. “We study the immune cells from the placenta, white blood cells from adults, and the umbilical cord blood from babies. If we find specific defects or differences, we’ll have a clue that leads us to understanding why some premature infants suffer serious illness, including lung disorders and retinopathy.”

Dr. Hanna says, “Thanks to advances in medical science, we can now keep babies alive, but, many times, they suffer irreversible disabilities. We want to change that.”

“Our research is aimed not at responding to disease after the fact but before it,” Dr. Weinberger adds. “How can we help a baby survive with no long-term illness? That’s the challenge.”

Partners in Care

Undoubtedly, the work of neonatologists is closely related to that of specialists in maternal-fetal medicine. Anthony M. Vintzileos, MD, acting chair, Department of Obstetrics, Gynecology, and Reproductive Sciences, and specialist in maternal-fetal medicine, reports that progress in his field has been revolutionized by the continuing advances in ultrasound. He says the combined capabilities of maternal-fetal medicine and pediatrics, plus the interaction between leading clinicians and researchers in each, will inevitably lead to excellent long-term health outcomes.

“The medical school is about to open New Jersey’s first program in fetal surgery,” Dr. Vintzileos reports. “One condition involves an obstruction in the urethra of the male fetus that causes a blockage of fluid, resulting in severe damage to the lungs and kidneys. The problem can be arrested with laparoscopic surgery.”

He says another condition, called twin-to-twin transfusion syndrome, is of particular concern because of the recent rise in multiple births. It occurs when one twin “steals” blood from the other, and when severe, it is best solved with laser surgery. Without appropriate treatment, this condition most often will cause pregnancy loss as a result of pre-term labor or an in utero fetal death.

Specialized Surgery Key

The true test of any medical school committed to the treatment of children is not determined by the distinction it has gained in a specific discipline. It is in the complex interplay of multiple specialties that come together in the creation of a comprehensive child health initiative. At RWJMS, pediatricians and members of the Department of Surgery bring a broad perspective to the care of sick youngsters.

“That kind of care takes enormous resources in diagnosis and treatment,” says Thomas V. Whalen, MD, professor of surgery. “It needs to be directed in an academic environment, where the sense of inquiry goes beyond asking what should be done to the essential question of why it needs to be done.”

Dr. Whalen is program director of the general surgical residency program, and he explains that in addition to himself, the faculty has two pediatric surgeons who, following their surgical residencies, completed fellowships in pediatric surgery. They are Mitchell R. Price, MD, assistant professor of surgery, and Randall S. Burd, MD, PhD, assistant professor of surgery, who is funded by the NIH for studies designed to identify appropriate diagnosis and triage methods for children suffering trauma. In addition, pediatric spe-
specialists with residencies and fellowships in several key disciplines perform pediatric surgery.

Among them, Petr O. Ruzicka, MD, associate professor of surgery, has been performing pediatric neurosurgery exclusively for 17 years. He agrees with Dr. Whalen’s assessment of the importance of an academic clinical setting supported by the latest technology. He points out, for instance, that, thanks to the availability of pediatric interventional neuroradiology and other services at RWJUH, he performs the most complex pediatric neurological operations at the hospital, including those for spinal cord and brain tumors. He also specializes in intra-cranial facial surgery.

“This is a condition in which there is a premature closure of sutures in the infant’s skull necessitating total reconstruction of the skull,” Dr. Ruzicka says. “We usually perform the procedure when the baby is about three or four months old.”

Dr. Ruzicka, who performs between 200 and 250 pediatric neurosurgical operations a year, is known as one of the leading experts in the tri-state area in correcting tethered spinal cord, a serious condition in which the spinal cord is invaded by scar tissue and needs to be freed to avoid further loss of neurological function.

Explaining that it is a dream of his to train new pediatric neurosurgeons, Dr. Ruzicka adds that RWJMS now offers rotations in his discipline, and that there are both residents and medical students doing full-time rotations.

“My vision would be eventually to spearhead a division of surgical specialization for children, so that one day the medical school will have a full complement of all these specialized surgical skills,” he says.

**A Tertiary, Academic Environment**

In the meantime, RWJMS faculty members are responsible for a broad range of pediatric surgery not performed elsewhere in the area.

“Whether or not a specific procedure is performed at other hospitals is not always as important as the environment in which it is performed,” Dr. Whalen says. “At RWJUH, the child is cared for in a tertiary pediatric environment, with a pediatric anesthesiologist, and registered child life therapist who is integral in making the child as comfortable as possible.”

He adds that trauma care in children is handled by pediatric surgeons who direct the critical care of the child from diagnosis to treatment, coordinating the possible involve-
ment of other specialists, even when surgery is not indicated.

“Surgery for a hernia is not the same in children and adults — at least it shouldn’t be,” he says. “Children need to be treated differently because they react differently. It is important for a surgeon to understand the pathophysiology of how a child reacts to injury. And that can only be done by specially trained surgeons, in a true children’s hospital and academic setting.”

Joseph G. Barone, MD ’87, associate professor of surgery, is a pediatric urologist who treats children requiring reconstruction of the urinary tract.

“All of these procedures are performed on children born with congenital anomalies, such as spina bifida, hydronephrosis, and bladder extrophy,” Dr. Barone says. “To correct a dysfunctional urinary tract, sometimes we have to create a new bladder, using segments from the intestinal tract, such as the small bowel or stomach.”

Dr. Barone also removes childhood tumors of the kidney, bladder, prostate, and vagina. In one recent procedure, performed on an 18-month-old baby girl, he and Dr. Price used a special resectoscope to resect a vaginal tumor endoscopically.

“After that, a pediatric oncologist, Dr. Peter Cole, used chemotherapy to treat the tumor, and we were able to save the child’s vagina,” Dr. Barone says.

A Life Saved

Six months ago, a 15-month-old boy was transferred from another hospital to RWJUH with a bean lodged in his trachea. The child was near death, with extremely low oxygenation. Diana N. Traquina, MD, clinical associate professor of surgery, was called, along with a pediatric otolaryngologist.

“We took the child to the operating room immediately, removed the bean from the trachea, and resuscitated him,” Dr. Traquina says. “In a word, the child’s life was saved.”

Dr. Traquina, whose practice is restricted to the care of children, performs approximately 400 surgeries a year. She says a common problem in her practice involves children with breathing problems, ranging from nasal congestion to aspirated foreign bodies. She reports that when a food particle is lodged in the trachea, completely obstructing the airway, a child needs immediate attention or will die. Often, however, the particle goes farther down in the trachea, below the main windpipe, and needs to be removed to avoid pneumonia or collapse of a lung.

“These kinds of procedures should be done in a tertiary environment,” she says. “And they should be performed by a physician familiar with the pediatric airway. They require a highly skilled pediatric intensive care team, including pediatric anesthesiologists.”

One of a few fellowship-trained dedicated otolaryngologists in the state, Dr. Traquina describes herself and her colleagues as surgeons who think like pediatricians.

“Ours is a mind-set that is focused on children,” she says. “We are surgeons but we think of children in the same way pediatricians do.”

Critical Care of the Young

Clinical leadership in the care of critically ill and injured children demands commanding success in a minimum of three of four counterpart disciplines — trauma, cancer research and care, neurosurgery, and cardiac care.

“We already lead in three, and are about to add the fourth component,” reports Thomas Bojko, MD, MS, associate professor and vice chair, Department of Pediatrics, and chief of pediatric critical care.

“Youngsters receive exceptional emergency care at RWJUH through a Level 1 trauma center with a ‘commitment to pediatrics’ — the highest verification available in New Jersey,” he says. “Additionally, CINJ provides research and clinical care for children that are not duplicated elsewhere. The faculty already has added pediatric neurosurgery, and the cardiac surgery program will be on board soon.”

The critical care of youngsters is a broad discipline that seems to attract young pediatricians. Among 12 graduates of the 2003 residency program, for instance, two residents chose to serve a fellowship in the field. Dr. Bojko says that RWJMS has targeted a fellowship in pediatric critical care for 2004, and that it represents a continuum in the plan to create a Department of Pediatrics focused on the education of sub-specialists and the care of major illness in children.

“The cardiac surgical program will dovetail into our fellowship, and the fellowship in turn will feed into research,” he says, adding that “active collaboration within the department is commonplace.”

“Because the pathways are similar, my interest in neurological critical care is relative to the work Dr. Notterman is doing in cancer research,” he says, adding that Michael J. Kelly, MD, assistant professor of pediatrics, has developed a clinical database that contributes to department research. Taking the advantages of tracking diseases a step further, RWJMS has been selected by the National Association of Children’s Hospitals as one of 20 test sites for a national database, which will assist Dr. Kelly in his outcomes research.

“The needs of children with critical life issues are boundless and demand the kind of attention being orchestrated by RWJMS,” Dr. Bojko says. “We have a world-class nephrology program, a program for youngsters who need life support, and programs that care for children suffering from the effects of cancer medications. As the rate of cancer cures increases, so do complications affecting the heart, lung, and kidneys. We treat a large number of children who need cardiac and pulmonary support — and to my knowledge, ours is the only center offering pediatric renal replacement therapy.”
Meanwhile, youngsters requiring hospitalization are cared for in a child-friendly environment in which state-of-the-art technological primacy is integrated with pleasant surroundings. Children are greeted first by a life-size giraffe and other animal sculptures in the lobby of the new Bristol-Myers Squibb Children’s Hospital at RWJUH. Parents benefit from the research library and the help of an on-site librarian who directs them to literature explaining medical conditions, how to care for sick children, and much more. For those whose hospital stays are lengthy, there is a schoolroom where they can be helped to keep up their studies. Younger children especially like the fish tanks that populate each room. There are jukeboxes, Nintendo games, and computers for every child. The nurse-to-patient ratio generally is one-to-one in the pediatric intensive care unit.

“Kids love it here,” says Ajay Mirani, MD, a third-year pediatric resident. “We get them well enough to go home — and sometimes, they don’t want to leave.”

One innovative service at the hospital is a medically advanced pediatric critical care transport vehicle for the approximately 400 children annually transferred from community hospitals.

Referring to the vehicle as an intensive care unit on wheels, Dr. Bojko says it is equipped with everything necessary to provide the highest level of care while in transit.

The ten-ton vehicle is much larger than a conventional ambulance, enabling it to accommodate a wider range of equipment, and giving the medical team better access to patients and more room in which to work.

“The transport team includes specially trained emergency medical technicians, a nurse practitioner certified in pediatric critical care, a transport-certified nurse, a respiratory therapist, and a pediatrician,” Dr. Bojko says.

Complementing the role of the acute care hospital are plans for construction of a 60-bed facility for treatment of children requiring inpatient rehabilitative care. The result of a medical school affiliation with Children’s Specialized Hospital, the new building will replace the existing inpatient facility in Mountainside.

Frank V. Castello, MD, associate professor of pediatrics and medical director of Children’s Specialized Hospital, says the physical proximity of the hospital to the RWJMS child health compound in New Brunswick will enhance management of children with complex medical conditions, requiring inpatient rehabilitation.

“The complexity of care needed to maintain stabilization of children suffering from severe injuries or chronic medical conditions is significant,” Dr. Castello says. “Having the resources of diagnostic evaluation and consultation from the medical...
school faculty will be a tremendous advantage to families.”

**Studies Advance Care**

Research, perhaps the architect of the child health initiative, flourishes within the Department of Pediatrics as well as in collaborative efforts throughout the developing child-centered complex. Michael M. Shen, PhD, professor of pediatrics and resident member, Center for Advanced Biotechnology and Medicine, is a molecular biologist whose basic science has broad potential implications in the diagnosis and treatment of childhood diseases.

Peter D. Cole, MD, assistant professor of pediatrics and member of CINJ, received the 2003 Damon Runyon-Lilly Clinical Investigator Award from the Damon Runyon Cancer Research Foundation. The $1 million grant will fund Dr. Cole’s research to increase the cure rate while decreasing the toxicity of chemotherapy in children with acute lymphoblastic leukemia, the most common childhood cancer. His studies, along with those of his CINJ mentor, Barton A. Kamen, MD, PhD, professor of pediatrics and pharmacology, chief, division of pediatric hematology/oncology, and an American Cancer Society Clinical Research Professor, focus on interactions among patients, their disease, and trial therapies, and are aimed at improving the effects of treatment.

At the RWJMS Sudden Infant Death Syndrome (SIDS) Center of New Jersey, Thomas Hegyi, MD, professor of pediatrics and medical director of the center, works with Barbara M. Ostfeld, PhD, professor of pediatrics and the center’s program director, in a widespread initiative aimed at public education and risk reduction of SIDS.

Dr. Ostfeld explains that services to families include bereavement and peer support. A database provides epidemiology studies and identification of risk factors. “An important part of the program is our participation in the Back to Sleep campaign conducted by the NIH, American Academy of Pediatrics, and other organizations,” Dr. Ostfeld says.

Studies show that placing an infant on his or her back while sleeping reduces the risk of SIDS. A safe environment also includes avoidance of loose or heavy bedding or quilts, as well as eliminating smoke exposure to the baby or fetus.

“She points out that SIDS is a diagnosis for infants who die from an unknown cause. Therefore, it is critical not only to reduce the number of babies who die from SIDS, but also to find the actual cause of death, thereby chipping away at the number of deaths attributed to SIDS. One cause of infant mortality is a metabolic disorder called medium chain acyl-CoA dehydrogenase deficiency (MCADD). It is a rare genetic disorder that remains life threatening throughout life, but one that can be easily treated if identified at birth. With a grant from the New Jersey Office of Mental Retardation and Developmental Disabilities, Dr. Hegyi and Dr. Ostfeld created a statewide MCADD education program, and MCADD is now included in the mandated newborn screening of every infant born in the state of New Jersey.

**Autism Investigated**

Important research probing the causes and treatment of autism is being explored by pediatric faculty members and scientists from the Environmental and Occupational Health Sciences Institute, a partnership of RWJMS and Rutgers, The State University of New Jersey. George H. Lambert, MD, associate professor of pediatrics, is the director of the Center for Childhood Neurotoxicology and Exposure Assessment, which studies whether environmental chemicals can alter how autism is expressed.

The work, which is in its early stages, promises rewarding results and is funded by a $5 million grant from the
Dr. Notterman says that clinical research, such as that performed by Dr. Ostfeld, Dr. Lambert, and others, best enunciates the department's plans to provide the children of New Jersey with health services currently not available in the state. He concludes, “The expansion of clinical sub-specialties, development of fellowships, department research, and the outstanding translational science performed by the Child Health Institute — all of it is being done in concert toward one aim, improving child health.”

For information regarding the autism study, or interest in participation in the study, please call Dr. Lambert at 732-445-0174.

The UMDNJ-Robert Wood Johnson Medical School tradition of prioritizing child health is underlined by the establishment of the Child Health Institute of New Jersey (CHINJ), a comprehensive biomedical research center dedicated to conducting studies in prevention, treatment, and cure of environmental, genetic, and cellular childhood diseases. The $72 million, 150,000-square-foot facility will include space for the pediatric multi-specialty practice, along with research laboratories and academic offices.

Robert L. Trelstad, MD, acting director of CHINJ, says the institute has a number of scientists on board and is recruiting others who, through integration with RWJMS researchers, clinical faculty, and the resources of Robert Wood Johnson University Hospital (RWJUH), will provide an environment of collaborative research and treatment.

Dr. Trelstad, former chair of the Department of Pathology and Laboratory Medicine, has been a student of developmental biology since his undergraduate days. This background understandably led to an interest in child health issues. In 1995, with funding from Johnson & Johnson, Dr. Trelstad was one of a group at the medical school who authored a child health initiative. The National Institutes of Health funded the dream with a $2 million grant, which became the impetus for additional funding from the State of New Jersey and from the private and corporate sectors. A total of $40 million was raised within five years.

“There were many of us who believed in the talents of RWJMS researchers, both in New Brunswick and Piscataway, to pursue basic science at the molecular level in attacking childhood asthma, diabetes, cancer, autism, coronary defects, cleft palate, and more,” Dr. Trelstad says. He adds that the kind of world-class research in genomics/proteomics, neurodevelopment, and bench-to-bedside studies being programmed at the institute will go forward from several directions, all pursued from a collaborative mind-set.

When the facility opens in early 2005, CHINJ scientists will focus on the molecular and genetic mechanisms that direct development, subsequent growth, and function. Faculty and students will investigate disorders that occur during the process of development, study genes that may contribute to disease, and direct efforts toward identifying causes and possible cures of mental retardation and other neurological disorders.

In addition to improving child health through the study of genetic and environmental factors, the ultimate objectives of CHINJ are to determine how disordered development leads to adult diseases and to use knowledge of developmental biology to regrow tissue after injury. Goals include expansion of scientific programs into an international center and development of partnerships with pharmaceutical and biotechnology industries.

CHINJ will be linked by footbridges and ramps to RWJMS and other institutions constituting the New Brunswick medical complex, including The Cancer Institute of New Jersey and the Bristol-Myers Squibb Children’s Hospital of Robert Wood Johnson University Hospital. The new rehabilitative care hospital, Children’s Specialized Hospital, will become part of the compound as well.

Approximately 40 research laboratories and support facilities will accommodate the work of senior researchers who will direct teams of faculty, visiting scientists, post-doctoral fellows, graduate students, and technicians as they collaborate to prevent and treat conditions that range from cystic fibrosis to neonatal AIDS and other threats to normal childhood and adolescence.
We are proud to announce that we are now a Major Clinical Affiliate of UMDNJ-Robert Wood Johnson Medical School.

Our enhanced affiliation with UMDNJ-Robert Wood Johnson Medical School means we’re ready for new challenges in maternal/fetal medicine, pediatrics and internal medicine.

From preventive medicine to diagnosis and treatment, we offer a wide breadth of services for patients of all ages. At Raritan Bay, we treat the whole person throughout the continuum of life.
Proof that the apple never falls far from the tree — three generations of mentors in the Department of Molecular Genetics, Microbiology, and Immunology: Professor Stuart W. Peltz, PhD (left), who mentored Associate Professor Terri Goss Kinzy, PhD, who, in turn, is the faculty mentor of Assistant Professor Paul R. Copeland, PhD.
Before Odysseus sailed off to Troy, he assigned his old friend Mentor to look after his house and serve as counselor to his son. Mentor failed in both assignments, but fortunately, his good name prevailed. Two millennia later, “mentoring” suggests every positive attribute of a seasoned, dedicated counselor.

“Mentoring is the bedrock of medical education,” says Marie C. Trontell, MD ’76, professor of medicine and senior associate dean for education. UMDNJ-Robert Wood Johnson Medical School offers many mentoring programs, official and unofficial, required and spontaneous. Like strata of bedrock, they reveal much about the history and character of the school.

Some RWJMS mentoring programs are traditional, such as the mentoring of students by residents. The Faculty Mentoring Program and the Peer Mentoring Program are more recent additions to the school. Still others, including the mentoring projects of the Homeless and Indigent Population Health Outreach Project (HIPHOP), are student-generated initiatives, unique to RWJMS.

By Kate O’Neill

Photo by John Emerson
In 2001, RWJMS introduced a formal Faculty Mentoring Program, the brainchild of David H. Carver, MD, professor of pediatrics and associate dean for faculty affairs. Before accepting the faculty affairs appointment in 2001, Dr. Carver had served 13 years as chair of the Department of Pediatrics, topping a 45-year career in the field. In his new position, his missions include schoolwide faculty development, with an emphasis on enhancing mentoring skills in both teaching and research.

Dr. Carver says he is convinced of the importance of a faculty mentoring program. “I had exciting teachers as well as wonderful mentors and role models. I want our junior faculty to have the same experience.”

Before Dr. Carver took office, several schoolwide surveys indicated that a lack of mentoring was one of the junior faculty’s leading concerns. In his new position, Dr. Carver quickly established a well-constructed mentoring program, and his latest survey indicates remarkable success. Two years ago, 15 percent of the junior faculty reported that they had a mentor. This year, the number exceeds 75 percent. Now Dr. Carver is receiving requests from other schools for information on the young and successful RWJMS Faculty Mentoring Program.

The program’s strong start is due in large part to the mentoring skills of the RWJMS senior faculty, says Dr. Carver. This spring, when the UMDNJ Master Educators Guild chose mentoring as the topic for its annual symposium, RWJMS Master Educators were invited to provide the model for the program. The guild also chose Dr. Carver and the RWJMS Master Educators to lead four of the symposium’s five discussion panels.

To honor the finest faculty mentors, Dr. Carver proposed two awards; the medical school promptly initiated both. One, for research mentoring, is named for an original member of the RWJMS faculty, the late R. Walter Schlesinger, MD, distinguished emeritus professor of molecular genetics, microbiology, and immunology. The other, in clinical mentoring, honors former dean Norman H. Edelman, MD, also one of the earliest faculty members at RWJMS.

**MENTORING FLOWS BOTH WAYS**

Nicola C. Partridge, PhD, professor and chair, Department of Physiology and Biophysics, finds that the benefits of the mentoring program far outweigh any extra responsibilities. Not only does the program advance the teaching and research strengths of junior faculty, but the younger faculty’s fresh perspective and new techniques tend to balance a mentor’s greater experience.

“An institution’s growth depends on its ability to listen to and learn from the ideas of young people,” says Stephen F. Lowry, MD, professor and chair, Department of Surgery. “One of the benefits of a strong mentoring program is that it promotes recruitment,” he adds. “If a potential faculty member is serious about academics and wants to advance in the field, he or she will look for a school with a strong mentoring program.”

Terri Goss Kinzy, PhD, associate professor of molecular genetics, microbiology, and immunology, enjoys the interactive, one-on-one relationship that comes with mentoring. A winner of the national Compact for Faculty Diversity Mentor of the Year award, Dr. Kinzy says, “Mentoring benefits everyone and is necessary at every level: research, academic, and clinical. Moreover, in research, a successfully mentored grad student or post-doc makes the mentor look good.”

When a school expects its faculty to be busy and productive, both clinically and academically, a formal program keeps mentoring on everyone’s front burner. At RWJMS, the Faculty Mentoring Program requires that in their letter of offer, department chairs introduce new recruits to their assigned mentor or mentors. The letter also states the specific area, such as teaching or research, for which the mentor will be responsible. “Finding a mentor shouldn’t be left to luck,” says David S. Kountz, MD, associate professor of medicine and associate dean for postgraduate education.

Yuh-Hwa Wang, PhD, assistant professor of biochemistry, joined the faculty five years ago. Without a formal mentor, she often felt intrusive when she asked senior faculty for help. Now, with a mentor’s commitment and responsibilities clearly defined, she sees the benefits of mentoring flowing both ways.

For some departments, structured mentoring is new. Others are building on the foundation of existing systems. Since becoming department chair in 1987, Masayori Inouye, PhD, professor and chair, Department of Biochemistry, has met regularly with his junior faculty to help them develop the skills of a seasoned researcher.

The Department of Surgery also had an existing mentoring system, which has been enhanced by the Faculty Mentoring Program, says Dr. Lowry. Shortly after becoming chair, he led a department self-study and found that “we were not taking good care of our junior faculty.” Now, besides having direct access to assigned mentors, each junior faculty member meets regularly with his or her division chief to review the younger teacher’s outline for career development. In addition, Dr. Lowry meets annually with every member of the junior faculty to discuss any frustrations. Together they review progress, decide what further resources are needed, and determine where to focus academic energies.
Building Toward Tenure

Once someone is appointed to our faculty, they should get all the guidance they need along the way,” says Emanuel DiCicco-Bloom, MD, associate professor of neuroscience and cell biology. “Everyone needs to make these first connections to teaching and research based on the experience gained by others,” he says.

“It takes as much time to become a good teacher as it does to become a good researcher,” says Dr. Inouye. Well before the introduction of the current mentoring program, Dr. Inouye recruited William A. Zehring, PhD, associate professor of biochemistry, to serve as full-time mentor and curriculum coordinator for all 15 members of the biochemistry faculty. One of Dr. Zehring’s responsibilities is to help junior faculty build a comprehensive teaching portfolio, a leading criterion for promotion at the school. “Teachers need to document their accomplishments with the same care that a researcher records procedure in a scientific trial,” says Dr. Zehring.

Mentors also provide wider entree in their field, so that junior faculty can begin building their professional standing. To advance, researchers should make presentations before professional associations, read proposals, and serve on review committees. At the same time, they should build a record of peer-reviewed publication in respected journals. Mentors help provide these opportunities.

A mentor can also guide less-experienced researchers through the grant process, says Stuart W. Peltz, PhD, professor of molecular genetics, microbiology, and immunology. Dr. Peltz, who won the first Schlesinger Award for Mentoring in Research, adds that good research mentors help their protégés avoid a number of mistakes that eager but inexperienced grant applicants often make. For instance, says Dr. Peltz, a grant from the National Institutes of Health is an important first step for young researchers, since it forms the foundation for future funding. “This means learning how to write the clearest possible proposal, requesting the right amount of dollars, and selecting timely research topics.”

THE Peer Mentoring Program

In 1997, Daniel Goldstein, MD ‘01, and Thomas McPartland, MD ‘01, initiated the Peer Mentoring Program. Successful from the outset, it replaced the less structured, more unpredictable Big Sibling program.

The Office of Student Affairs annually selects the peer mentors from a growing, highly competitive applicant pool. Faculty adviser Geoffrey H. Young, PhD, assistant professor of psychiatry and assistant dean for student affairs, says, “I’ve always been interested in the relationship between mentoring and leadership, so the focus of this program is enhancement of the mentors’ leadership skills.”

Initially the program’s backbone was
its 12 to 15 student volunteers. Now that the program has taken hold, 30 trained mentors work in pairs with teams of first-year students, starting on the first day of Orientation. Each year, Dr. Young tries to build a diverse group of peer mentors with a wide range of skills. In a pre-Orientation, off-campus retreat, the peer mentors practice self-evaluation and team-building, determining how they can independently hone their mentoring skills.

An important purpose of the program is to provide a familiar face at the medical school. First-year students who know and trust their mentors from the start are more likely to go to them with questions about the community and the school, says Mark Fisher, MPH, MD ’02.

Dr. Fisher was a peer mentor in the early years of the program. He enjoyed mentoring so much that he served as the program’s co-coordinator while he earned a degree at the UMDNJ- School of Public Health. “Medical school is a tough transition, and students definitely need help and encouragement,” he says. “First-year students may have read about the Student Wellness Center in their orientation packet, but when a mentor talks about mental health issues in a real context, students tend to listen. Also, mentors can answer questions like ‘Do I really need to do everything?’ ‘Which books are the most important?’ and ‘Where should I go if I ever find time to socialize?’”

Peer mentors host a barbecue during Orientation Week and later hold both an ice cream social and a faculty-student mixer. Throughout the year, they stay in touch informally, sending encouraging messages, scheduling study breaks during the first-year students’ exams, and stuffing first-year students’ mailboxes with candy and snacks during exams.

Dr. Fisher feels the program is improving steadily. “When students have benefited from the program, they want to apply to be mentors. This builds a stronger group every year.”

**COMMUNITY Outreach**

**HIPHOP may not have a very mentoring** in its name, but “it is a tremendous mentoring program,” says Bernadette M. West, PhD, assistant professor of environmental and community medicine and assistant dean of UMDNJ-School of Public Health, Stratford campus. Dr. West, who served until this summer as the program’s faculty adviser, says middle school and high school students are not the only ones to benefit from HIPHOP programs; the classes also teach the medical students firsthand lessons about issues in the community, an important lesson to future physicians.

She cites the example of SHARRP (the Student Health Awareness Risk Reduction Project). SHARRP volunteers prepare for their mission with intense study and practice. Then they visit the New Brunswick public schools to educate students in grades five through eight about a variety of health and wellness issues, helping them develop skills that will allow them to make educated decisions about their health.

As in the Peer Mentoring Program, SHARRP students work in pairs, meeting ten times with the same group of 15 students. The continuity enhances the opportunities for a mentoring relationship, says Dr. West, as the volunteers develop trust and wonderful bonds with the younger students. “The children still go to their ‘real’ teachers for the facts,” she adds, “but they count on their mentors to help them understand the social relevance of issues.”

On the RWJMS Camden campus, the student-directed Urban Health Initiatives program involves medical students in mentoring as part of the after-school Peacemakers program. Once a month, medical students visit the program, split up into male and female groups, and talk with the schoolchildren about specialized topics selected the month before. This year these included sexually transmitted diseases, drugs, personal hygiene, and sex. Like their peers in New Brunswick, the medical students find that their age and special status help them establish a trusted mentoring relationship with the children.

“From the top down, we all mentor each other,” says Susan Rosenthal, MMS ’75, MD, clinical associate professor of pediatrics and assistant dean for student affairs. “No matter who you are, the theory is that there’s always someone more experienced who can help you — and can help you understand what medicine is all about.”
Dear Alumni and Friends:

Alumni Reunion Weekend 2003 was a great success! I would like to thank all alumni who attended our celebration. Alumni were pleased and proud to return to RWJMS to personally observe its tremendous growth, greet old friends, meet new colleagues, and converse with faculty members and students. It is never too early to talk to your classmates about Alumni Reunion 2005.

The Alumni Association is delighted to announce the allocation of $210,000 for scholarships and loans for RWJMS students for the 2003–04 academic year. We are extremely proud of the establishment of a $100,000 endowed scholarship, to be known as the RWJMS Alumni Association Scholarship Fund, with an initial contribution of $25,000. The association also supports two Hippocrates Scholarships at $20,000 per year for entering students with a record of academic excellence.

We would like to extend a special thank-you to our generous alumni who have endowed scholarships to ensure the future of academic excellence at RJWMS. We are extremely proud of their commitment and dedication and want to encourage other alumni to follow their example.

We also would like to thank you all for your generous contributions to the Alumni Association Annual Fund in the past, and to invite you to join us again this year to help support our medical students. Annual Fund contributions can now be made on-line. Please see our Web site at http://rwjms.umdnj.edu/alumni for details.

The Alumni Association supports the Homeless and Indigent Population Health Outreach Project (HIPHOP) 5K Fun Run, Student/Alumni “Happy Hours,” Careers in Medicine Lunch Program, and our annual Career Night. We hope that New Jersey, New York, and Philadelphia alumni will join us again for Career Night on Tuesday evening, January 13, 2004, at 6:30 p.m. in the Great Hall in Piscataway.

RWJMS has hosted several successful alumni receptions in New York City, Philadelphia, Los Angeles, San Francisco, and Washington, D.C. If you are interested in getting involved in planning a reception in your area, please let us know.

I thank you for your support, and I look forward to seeing you at alumni events throughout the year.

Sincerely,

Euton M. Laing, MD ’90
President, RWJMS Alumni Association
A n elegant New York premiere took place this spring, without celebrities, red carpets, or borrowed jewels. The occasion was the first-ever New York City reception for alumni, faculty, parents, students, and other good friends of UMDNJ-Robert Wood Johnson Medical School. Held at the New York Academy of Sciences, the reception was a “very classy affair,” says Cheryl F. Dreyfus, PhD, professor of neuroscience and cell biology, and mother of Deborah Dreyfus ’06.

The location and the occasion drew more than 150 guests, who explored the Academy of Sciences’ magnificent rooms, then congregated in the courtyard to enjoy the perfect spring evening. The reception was one of the medical school’s periodic out-of-town events and was “one of our most interesting and enjoyable ever,” says Harold L. Paz, MD, dean. “It was good to see so many familiar faces and meet alumni and friends of the school who rarely get to visit us in person.”

The reception gave the dean an opportunity to update his audience about the medical school: new construction, the strength and diversity of the student body, and the faculty’s growing achievements in the classroom and in research. But as always, he most enjoyed speaking one-on-one with alumni, meeting parents, and fielding questions about the school.

“I enjoyed hearing from the dean and discussing the great things he and his team are doing for the school,” says Neal T. Collins, MD ’83. Dr. Collins, a past president of the Alumni Association, brought two guests: his brother, Gary Collins, MD ’95, and Diane Martire, MD ’83, a Pfizer colleague. He was also pleased to spend time with longtime friends Kerry and James Brody, MD ’83, and began planning for more catch-up time during Alumni Reunion Weekend.

The number and variety of guests guaranteed interesting conversations and outcomes. Miriam Labbok, MMS ’73, MD, MPH, and Nicola C. Partridge, PhD, professor and chair, Department of Physiology and Biophysics, found that they share a network of friends and professional interests. In a conversation with Dr. Paz, Dr. Labbok discussed her hope of finding an RWJMS student to work in one of her UNICEF internships. After hearing the talk by Daniel Caruso, MD, MBA ’03, about the need for scholarships, she was inspired to endow a scholarship for a dual degree in medicine and public health.

At the reception, Jonathan Bravman ’06, who plans to specialize in sports medicine,
met Donald J. Rose, MD ’80, associate professor of orthopaedic surgery at New York University School of Medicine and director of the Harkness Center for Dance Injuries. Their conversation led to Jonathan’s current yearlong research internship with Laith M. Jazrawi, MD, clinical assistant professor of orthopaedic surgery at New York University School of Medicine.

Suhayl Dhib-Jalbut, MD, professor and chair, Department of Neurology, a leading investigator in the field of multiple sclerosis, was among the faculty who attracted foundation and pharmaceutical industry representatives to the reception. Barr Laboratories, Berlex, Dataspope, and Wyeth all sent people to hear about the medical school, talk with the researchers, and learn more about their work.

“The event reminded me that the school is impressive,” says Dr. Dreyfus, “the faculty supportive and gifted, and the first-year class not just intelligent, but especially caring and compassionate.”

— K.O’N.

Below: Guests gather in courtyard at the New York Academy of Sciences.
During his presentation, “The Endocrine Pancreas: A Unifying Hypothesis,” F. Charles Brunicardi, MD ‘80, also told an audience of faculty, residents, and students that he held fond memories of his days at UMDNJ-Robert Wood Johnson Medical School.

Recipient of the 2001 Distinguished Alumni Award, Dr. Brunicardi was the visiting professor at the Surgical Grand Rounds Conference on June 25, and while applauding the medical school as having provided a strong foundation for his own career, he pointed to the leadership of Stephen F. Lowry, MD, professor and chair, Department of Surgery.

“I was pleased to see Dr. Lowry assume the chairmanship of surgery at my alma mater,” he says. “He is a true academic surgeon, responsible for tremendous science, and a man I have looked to as a role model.”

Dr. Brunicardi, who is the DeBakey/Bard Professor and chair, Michael E. DeBakey Department of Surgery, Baylor College of Medicine, addressed his audience from a position of 20 years’ experience in the field of the endocrine pancreas.

He summarized scientific observations of the organ’s anatomy and physiology into a unifying hypothesis, drawing on data developed by surgical fellows using human and rat isolated perfused pancreas models.

His research interests include islet physiology and transplantation, hormonal regulation of blood sugar levels, breast cancer, pancreatic cancer, and minimally invasive surgery. After receiving his medical degree, he served a residency in general surgery at the State University of New York (SUNY) Health Science Center, Brooklyn. He also served a three-year research fellowship in pancreatic physiology, work for which he received national and international awards.

He has been acting director of trauma, director of the islet transplantation program, and associate professor of surgery at the University of California at Los Angeles (UCLA), where he directed a statewide National Institutes of Health (NIH)-funded program for transplanting human islets of the cells in the pancreas that produce insulin. At Baylor, he developed an NIH-funded program in molecular physiology of the endocrine pancreas.

The recipient of more than 70 awards and honors, Dr.
Brunicardi received the Outstanding Teacher Award at UCLA School of Medicine for three consecutive years, as well as the Gene Guinn Outstanding Faculty Award at Baylor. He is a member of the Blue Key Honor Society at Johns Hopkins University, and the Royal College of Surgeons Traveling Fellowship.

A talented musician and guitarist who spent a year performing in Europe, he says he still performs but these days it is mostly for family. It’s apparent that music holds a special place in his life but obvious as well that it is the subject of surgery about which he is most enthusiastic.

“When I talk to first-year medical students in a lecture I call ‘dream hour,’ I ask them what disease they would most like to cure,” he says. “The answers that inevitably come back cover the range of life-threatening and severe chronic illness, and then I encourage them to pursue their dream.”

— R.M.R.
The scene was a mission hospital in Ghana, summer of 2002. Dr. Remignanti, an emergency medicine specialist at Catholic Medical Center, Manchester, New Hampshire, was serving his second three-month stint in a third-world country as part of a U.S. Centers for Disease Control and Prevention (CDC) program. The effort, Stop Transmission of Polio (STOP), is conducted through the World Health Organization (WHO), with a goal of eradicating the disease in developing nations by the year 2005.

“If the attending physician told me the girl had died and they were waiting for her family to collect her, I would not have been surprised,” Dr. Remignanti recalls. “I’ve never seen such life-threatening malnutrition.”

There is a slight pause, seemingly punctuated by painful memory, before he adds, “It was the prominence of her facial bones that was most unnerving.”

The child was not a polio victim. In fact, Dr. Remignanti didn’t see any polio cases while in the country. In 2000, when he traveled to Pakistan as part of the WHO initiative, that country had 199 cases compared to only one in Ghana. His role in Ghana last year was no less critical, however. He became part of a highly developed strategy to avoid the import of cases from other places and maintain the holding pattern that had kept the disease in Ghana to a bare minimum since 1998. WHO’s two-pronged plan includes repetitive vaccinations through national immunization days, plus surveillance of...
acute flaccid paralysis (AFP), symptoms that parallel those of polio. Health care workers are trained not so much to diagnose polio, but to report any condition that looks like polio — in other words, AFP.

“There are at least a dozen conditions that mimic the early stages of polio,” Dr. Remignanti reports. “Experience indicates there is a minimum incidence of one case of AFP for every 100,000 children under 15. So if a country isn’t finding many cases of AFP, it means its surveillance program is deficient. As for actual polio, stool testing provides a system sensitive enough to pick up the polio virus and pinpoint its location to facilitate further vaccinations.”

Meanwhile, the nonexistence of polio cases was in no way matched by the absence of disease, or scarcity of physicians and medical essentials, to which Dr. Remignanti was exposed in Ghana.

He encountered the child suffering from meningitis during a hospital visit to investigate three cases of AFP. The girl had been initially reported as having AFP, but the attending physician established that the cause of her paralysis was in fact due to a coma resulting from pneumococcal meningitis. Doctors originally administered intravenous therapy of penicillin and chloramphenicol, and later IV rocephin, a drug used rarely because, as it was explained to Dr. Remignanti, it is costly to the family.

“Chloramphenicol, on the other hand, cannot be used in the United States because of its remote likelihood of causing aplastic anemia,” Dr. Remignanti reports. “However, it is used quite freely in the developing world and has proved both effective and relatively inexpensive. Its popularity may also reflect the fact that there are fewer malpractice attorneys in these countries.”

Notwithstanding her appearance as she lay in the hospital bed, the little girl’s progress gave her doctors hope. Her fever had broken and, occasionally, she took fluids by mouth. But there was still her malnutrition — a risk staggering in its implications. Weeks later, when Dr. Remignanti returned to the hospital, he inquired and learned she had been discharged. Good news, though tempered by the question of what lay ahead for her, and whether she would live to grow to maturity.

“What did I learn here, at the bedside of this child? Only that children need to eat regularly. The girl’s mother was almost as malnourished as her daughter, so the problem wasn’t simple neglect.”

While in Ghana, Dr. Remignanti observed several recurring themes in the patient registers at clinics. He says the biggest health problem is malaria, amounting to about six cases in every ten diagnoses. One of the lecturers at the CDC explained that a sleeping infant is bitten by two malaria-carrying mosquitoes every night, resulting in malaria re-infection more than 700 times a year.

“Seeing the extent of the problem, I can’t help wondering if we’ll have a malaria vaccine in my lifetime,” Dr. Remignanti says. “It’s a long shot, since science has been working on it since before I was born.”

Another recurring health risk is snakebite, a diagnosis that outnumbers dog bites in Ghana. That may not be as bad as it sounds, since many of the dogs carry rabies and human rabies has a 100 percent mortality rate. Clinics in the country post signs offering free snakebite antivenin and dog-bite rabies vaccination. When Dr. Remignanti asked what kind of snakes inhabit the country, he was told python, viper, black cobra, and green snakes. Wanting to assure himself the last didn’t refer to the green mamba, he inquired further. No, he was told emphatically. The viper and cobra will kill, but the green snake is harmless. It’s often found curled up on a sleeping baby, napping on the grass. The mother just “shushes” it away.

“Hearing that prompted me to question both the mother’s and the snake’s choice of a good place for a nap,” Dr. Remignanti says.

It’s clear, talking to the man, that he thoroughly enjoyed the medical experiences gained in both Pakistan and Ghana. Is he considering going again? Absolutely, he says, adding that the one drawback is the separation from his wife, Darby. Apparently, the CDC frowns on spouses traveling to the targeted countries, citing problems that arise if a spouse becomes ill, possibly resulting in the need for both to return home. Another hurdle that must always be considered is that Dr. Remignanti is a member of a medical practice, and his partners have to fill in for him in the emergency department during his absences.

Nevertheless, his wife and his partners are wholeheartedly supportive of his work overseas. As a result, he has settled on a two-year break after each of his summer tours.

Asked to explain the source of the magnet that draws and holds him bound to such work, he concludes, “I remember being in medical school when smallpox was eradicated. That was such a momentous medical victory. I wished at the time that I could have been part of it. Now, to realize that I might be of help in the effort to finally rid the world of polio is pretty exciting too — almost like a medical student’s dream come true.”  

62 Robert Wood Johnson MEDICINE
Endowed Scholarships:
Using Your Past to Secure the Future

Endowed scholarships to the Robert Wood Johnson Medical School are a wonderful way for you to use your past to help assure a steady stream of quality physicians in the future.

That’s why the Foundation’s campaign to raise money for endowed scholarships has been a huge success thus far and is still growing. To date, $775,000 has been raised throughout the University, $200,000 of it coming from individual RWJMS alumni as well as the Robert Wood Johnson Medical School Alumni Association.

An endowed scholarship for a minimum of $25,000, which can be named as you desire, becomes a permanent tribute to the person whose name it bears.

We thank the following for their generous contributions to this campaign:

Paul A. Bergh, MD ’83
Paul A. Bergh, MD and Catherine Bergh Scholarship Fund

Ernie Biczak, MD ’77
Ernest S. Biczak, MD ’77 Scholarship Fund

Miriam Labbok, MMS ’73, MD, MPH
The Labbok Scholarship Fund

Fred J. Brotherton Charitable Foundation
Fred J. Brotherton Charitable Foundation Scholarship Fund

Robert Wood Johnson Alumni Association
RWJMS Alumni Association Scholarship

For more information about how you can give back something of lasting value with your gift of an endowed scholarship, contact Peggy Harris, director of development of the Foundation of UMDNJ, at (732) 743-3203 or via e-mail at harrispe@umdnj.edu.
Alumni Endowments Ensure Scholarships

Through generous endowments, alumni are helping to ensure the future of academic excellence at UMDNJ-Robert Wood Johnson Medical School.

A decade ago, Ronald R. Neal, MD ’74, was the first RWJMS graduate to endow a scholarship at the medical school, when his $25,000 gift established the Wanita Ferree Neal Scholarship in memory of his mother.

In the past year, the Alumni Association made a leadership gift, endowing a new scholarship. Recently, several individual alumni have endowed additional scholarships, inspired by the leadership and commitment of Ernest Biczak, MD ’77, chair, Development Committee, Alumni Association.

“We all can be extremely proud of this dedicated group of alumni, who honor us by endowing scholarships for the next generation of physicians,” says Harold L. Paz, MD, dean. “Through their generous gifts, our alumni are helping us guarantee education to the best of the best at Robert Wood Johnson Medical School.”

BY Kate O’NEILL
Dr. Biczak volunteers regularly in the trenches of RWJMS Phonathons and, deservedly, is known by fellow alumni as their “fund raiser extraordinaire.” No matter what the fund raising venue, he demonstrates the same warmth with which he welcomes alumni into his home, for “nice food, nice wine, and good conversation. We don’t get to philanthropy until after the brandy,” he says.

For years, Dr. Biczak has asked alumni how far they can stretch for the school. Now, with the endowed scholarships, he has raised the bar. “I don’t know what’s right, but $25,000 seemed like a good starting point. It’s reachable for many people,” he says. “By giving $5,000 a year — more like $3,600
The Paul A. Bergh, MD ’83, and Catherine M. Bergh Scholarship

Paul A. Bergh, MD ’83, and his wife, Catherine, endowed a named scholarship, because they share Dr. Biczak’s dedication to RWJMS and its students. However, the original inspiration for their gift goes two decades further back. A reproductive endocrinologist in private practice, Dr. Bergh recalls physicians and residents who were generous and compassionate to him and his young family during the “tough years” of two residencies — in obstetrics and gynecology and in radiology. Later, during a fellowship in reproductive medicine, he found the same generosity. Dr. and Mrs. Bergh speak gratefully of dinners in his mentors’ homes and of a fellow UMDNJ graduate’s loan of a vacation cabin in the Berkshires.

“Endowing a scholarship to encourage and support other students during their medical education is a way of saying thank you to all of those physicians who mentored me in my post-graduate years. It also recognizes the role RWJMS has played in helping me to realize my personal success,” says Dr. Bergh, adding, “We hope to grow our scholarship fund over the years and assist more students.”

The RWJMS Alumni Association Scholarship

This spring, the board of the Alumni Association approved a $100,000 pledge to endow a new scholarship fund at RWJMS. Aimed at recruiting excellent undergraduates to the medical school, the scholarship will be valued at approximately $5,000 annually. Provided they maintain a record of strong academic performance, Alumni Association Scholars will retain the scholarship throughout their four years at RWJMS.

The association created the fund in June, contributing the first of four $25,000 annual gifts. “The RWJMS Alumni Association Scholarship provides a generous stipend and great prestige to an incoming medical student,” says Euton M. Laing, MD ’90, president. “We know this support will make the difference, as tomorrow’s outstanding pre-meds decide which medical school offers the greatest opportunities.”
The Labbok Scholarship Fund

A passion for public health marks the career of Miriam Labbok, MMS ’73, MD, MPH. Since entering medical school, her commitment to maternal and child health has helped build healthier communities worldwide.

Early in her career, as a representative of the U.S. Agency for International Development, Dr. Labbok helped launch a major birth control campaign for women in Morocco. She later taught population dynamics at the Johns Hopkins School of Hygiene and Public Health and developed church-run health outreach programs in rural Kenya. While on the faculty at Georgetown University School of Medicine, she developed and carried out clinical testing of the Lactational Amenorrhea Method for introductory family planning, based on the physiology of lactational infertility. She currently serves as senior adviser for infant and child feeding and care at UNICEF.

Dr. Labbok’s work takes her across the world. But fortunately, she was home this spring and could attend the first-ever RWJMS reception in New York City. For Dr. Labbok, a highlight of the event was a talk by Daniel Caruso, MD, MBA ’03, in which he described the school’s dual-degree programs. Dr. Caruso emphasized his gratitude to RWJMS, which pays full tuition for four MD/MBA candidates while they are in the 15-month portion of their business studies.

During the reception, Dr. Labbok also learned about the medical school’s new campaign to create a cluster of alumni-endowed scholarships. Conversations with faculty and fellow alumni planted the first seeds that would come to create a scholarship to reflect her professional vision.

Within a few weeks, Dr. Labbok had endowed the Labbok Scholarship Fund, which will benefit a student pursuing an MD/MPH degree at the Robert Wood Johnson Medical School and the UMDNJ School of Public Health. Although a leaning toward international maternal/child health is not a condition of the scholarship, Dr. Labbok asked that the school give preference to a student with this interest, particularly in breast feeding as a major preventive health intervention. She will grow the fund through annual payments of $2,000. Half will go directly to the scholarship holder; the other half will build the endowment toward the $25,000 mark, or beyond. Additional donors to the fund are, of course, welcome.

Dr. Labbok says she never thought of herself as someone with the means to endow a dedicated scholarship. Now, she admits, she is “rather excited” about the outcome.

— Continued on page 68

The Nagendran Scholarship for International Medical Studies

Cherishing “incredibly positive memories of Robert Wood Johnson Medical School,” Sukumar Nagendran, MD ’94, has established a scholarship that highlights the value of international studies. Already a generous donor, Dr. Nagendran received a call from Dr. Biczak last fall and realized he could create both a scholarship and a legacy. The criteria of the Nagendran Scholarship combine its founder’s experience as a young medical student in war ravaged Sri Lanka with his observations as a medical student, resident, fellow, and physician in leading American hospitals.

Mentioning the RWJMS faculty members who most inspired him, Dr. Nagendran says they not only had a very good bedside manner, but also were excellent clinical teachers. “My medical education was exceptional,” he says, “largely due to my access to professors.”

— Continued on page 68
The Nagendran Scholarship for International Medical Studies — continued from page 67

O

e of these mentors, Edward B. Viner, MD, professor and chief of medicine at Cooper Health System, recalls Dr. Nagendran well as an “excellent student, eager to spread his wings.”

“It is truly wonderful,” adds Dr. Viner, “that while Dr. Nagendran went on to complete superb post-graduate training at Mayo, he is honoring his start in medicine here.”

Dr. Nagendran’s scholarship will be split between the Piscataway and Camden campuses, supporting five to ten students annually for a rotation or season of study abroad. Lilia Reyes ’04, Kishor Gandhi ’04, and Lee Kubersky ’04, all from the RWJMS Camden campus, were recently selected as 2004 Nagendran Scholars. They will study in Colombia, Tibet, and Australia, respectively. The 2004 Nagendran Scholars from the Piscataway/New Brunswick campus will be announced this fall.

Dr. Nagendran is delighted with the plans of the first Nagendran Scholars. Their goals represent his hope that through immersion in a medical experience outside the United States, students will gain a new perspective on their profession. “Here, we are too quick to send the patient away for a battery of tests,” he says. “Elsewhere, physicians without access to medical technology effectively use their ear, stethoscope, and experience to make a diagnosis. A term abroad will not only help medical students develop a better appreciation of what we have; they also will learn to use fundamental clinical skills and enhance the humanistic touch.”

To sustain the scholarship, Dr. Nagendran has committed $10,000 annually for the rest of his life. “Then, with a $150,000 gift from my estate, I will contribute from the afterlife,” he says, beaming a smile all the way from Phoenix.

An internist and diabetologist, Dr. Nagendran practiced for four years before joining Pfizer, where he serves as a director of the diabetes and endocrinology group. “I miss my patients,” he says, “but I am very happy here among some of the top minds in medicine and research and would like students to be aware of the many career choices open to physicians within the pharmaceutical industry.”

— continued from page 67

N I N E T E E N
S E V E N T Y - F I V E

Manuel Porto was appointed co-chair of the Department of Obstetrics and Gynecology for the University of California Irvine School of Medicine. He has been a professor and director of the division of maternal fetal medicine there since 1991.

N I N E T E E N
S E V E N T Y - E I G H T

Alan Schwartzstein was elected vice chairman of the University of Colorado Health Sciences Center and director of education at Colorado Permanente Medical Group. He is married to Dianne Glenn, MD, and they have three daughters: Danielle (9), Hannah (7), and Aliyah (5).
EIGHTY-SIX

Faith Barash reports: “After nine years in private practice, I gave up OB, quit my practice, and got an MPH from Johns Hopkins. I then took a faculty position at Johns Hopkins in the division of gynecologic specialists. In June, I was married, and my husband and I will be moving to the People’s Republic of China for three years. My husband will continue his work in international business development, and I will be doing consulting work for Johns Hopkins in China.”

Joseph Costabile was inaugurated as president of the Camden County Medical Society in May 2003.

Elizabeth Ann Garreau has a private practice, Women’s Health Associates, PC. She also practices OB/GYN at Fairfax Hospital in Fairfax, Va.

Eli Hammer writes: “Now proud to be the father of five daughters, ages 12, 10, 6, 17 months, and 2 months.”

EIGHTY-SEVEN

Patricia (Spiegel) Vitale reports: “We recently moved to Salt Lake City, Utah, after having lived in Riyadh, Saudi Arabia, for seven years. Pat worked as a dermatologist/dermatopathologist. Our family: Jazz (9) and triplets, Alexandria, Sophia, Ryan (7), are happy to live in the mountains outside of Salt Lake City. I continue to read skin pathology, and Al, my husband, is the staff retina surgeon at the Moran Eye Center, part of the University of Utah.”

EIGHTY-EIGHT

Martin Portillo, his wife, Astrid, daughter, Sonia, and son, Estevan, live in Montgomery County, Md. He worked with the mid-Atlantic Permanente Medical Group of Kaiser Permanente for 11 years after completing his residency and is currently medical director for the Gaithersburg Medical Center and the Shady Grove Medical Center, a multispecialty center. He sends a “warm hello to all my classmates.”

EIGHTY-NINE

Sandra Voremberg writes: “My husband, Mark Lowenthal, and I, and our threeyear-old son, Ian, welcome the birth of Haley born on November 13, 2002. I opened a solo practice in pediatrics in Millburn.”

NINETY

Euton Laing writes: “I am in private family practice in Somerset since December 2001. I have four daughters: Zaadia (14), Kayla (10), Tatiana (9), and Shandria (7). I am very active with my church and also am current president of Caribbean Medical Missions, a non-profit group that delivers health care to Jamaica.”

NINETY-ONE

Judith Braun and her husband announce the birth of their third child, Alexandra, in April 2003.

NINETY-TWO

John Capo is an assistant professor of orthopaedics and chief of the division of hand and microvascular surgery at UMDNJ-New Jersey Medical School.

NINETY-THREE

Shobana Sood writes: “I am on faculty at the University of Pennsylvania, doing dermatologic surgery, specifically laser and cosmetic procedures. Married to a fellow dermatologist, Edward Chan, MD, and have a three-year-old son.”

NINETY-FOUR

Heidi Eigenrauch Karpen reports: “I have received two NIH grants and one USOA grant for research on hedgehog development. Welcomed our son, Matthew, into the world on August 12, 2002, joining our three-year-old daughter, Emily. My husband, Saul Karpen, is director of the Liver Center/Liver Transplant Program at Texas Children’s Hospital.”

Richard Leone is an attending cardiothoracic surgeon at Basset Hospital and assistant clinical professor of surgery at Columbia University.

Ida Miguelino practices pediatrics in the Watchung office of Summit Medical Group. She lives in Warren with her husband, Patrick Aanstoots, and two sons, Zachary and Kyle.

Laura Powell was married to Dan Barber in May 2003.

NINETY-FIVE

Lynn Babcock Cimpello was appointed fellow director of pediatric emergency medicine at Golisano Children’s Hospital, University of Rochester School of Medicine and Dentistry.

Gary Collins is director of the Assisted Outpatient Treatment Program at Bellevue. He is board certified in psychiatry and forensic psychiatry.

Andrew Parker writes: “You may remember me by my ‘maiden name,’ Peskenik. I am practicing as an otolaryngologist in Norwalk, Conn. I entered practice two years ago after completion of a residency in ENT at New York Eye and Ear Infirmary in Manhattan. I have a wonderful wife, Melissa, and two beautiful children: Ethan (2½) and Daphne (2 months).”

Jamie Reedy and her husband, Steven Andreassen, are delighted to announce the birth of their daughter, Karena Rebekka Andreassen, on March 29, 2003.

James Sullivan completed his emergency medicine residency at the University of Massachusetts Hospital in June 2002 and recently passed the written and oral examinations for board certification in emergency medicine.
NINETEEN NINETY-SIX


Samuel Ejadi completed his fellowship in medical oncology at Beth Israel Deaconess Medical Center in Boston and is now on the faculty at Memorial Sloan-Kettering Cancer Center.

Robin and Chris Ferrante write: “Chris started working as an orthopedic surgeon at Orthopedic Associates of the Greater Lehigh Valley. He completed a hip and knee joint fellowship at the University of Pennsylvania. Robyn works as a pediatrician for Somerset Pediatrics.”

Deborah Horowitz writes: “I recently left Maple Avenue Pediatrics in Fair Lawn after three years and started a part-time job at Pediatriccarts in Butler. I live with my two young boys, Daniel and Eric. Life is busy, but good.”

NINETEEN NINETY-SEVEN

Richard Brody is assistant residency director of the Mid-Hudson Family Health/NYCOM Residency Program in Kingston, N.Y., and medical director of the Family Practice Center of New Windsor in New Windsor, N.Y.

Tricia Gilbert completed a fellowship in pulmonary and critical care medicine and joined a practice in East Brunswick.

Ravi Goel is in private practice at Comprehensive Ophthalmology in Cherry Hill. He has a faculty appointment as an instructor at Wills Eye Hospital.

David Lambert has been deployed with the Marines and has been in Iraq since the start of the war. He is currently working as a doctor for the 1st Marine Expeditionary Force, based out of Camp Pendleton Marine Corps Base in San Diego. He writes: “It’s been an incredible experience having taken part in Operation Iraqi Freedom.” He plans to start his residency in emergency medicine at Cooper next year.

Arun Rao completed his residency in internal medicine at RWJMS and did a fellowship in geriatric medicine at the University of Michigan Medical School. He has joined the faculty at Cornell University’s Weill College of Medicine in New York.

NINETEEN NINETY-EIGHT

Jody Kroon writes: “Married David Kroon ’98 in September 1999. On May 6, 2002, we welcomed our beautiful son, Ethan, into the world. We returned to Hunterdon County in July after Dave completed his residency in otolaryngology at Eastern Virginia Medical School in Norfolk, Va. I completed a year as chief resident at the Children’s Hospital of the Kings Daughters in 2001 and joined a pediatric practice in July.”

Leondel Toledo writes: “I have been a locum tenens pediatrician for two years. Since graduating and completing my residency at St. Christopher’s Hospital for Children, I have worked at Temple Children’s Hospital and on a Navajo reservation.”

NINETEEN NINETY-NINE

Yasmin Amin completed her residency program at Brigham & Women’s Hospital (Harvard Medical School) and started a fellowship in regional anesthesia.

Thomas Lardner writes: “Hello to the classes of 1998 and 1999. I completed a residency in family practice at Somerset Medical Center in 2002 and started a sports medicine fellowship at Wright State University/Kettering Hospital in Kettering, Ohio, in July. Best wishes to all my former classmates.”

Anthony Rimicci completed his residency in internal medicine at Georgetown University Hospital in June and joined a practice in northern Virginia.

Kenneth Sable was named director of the division of medical informatics in the Department of Emergency Medicine at Maimonides Medical Center in Brooklyn, N.Y.

TWO THOUSAND

Nicole Radich completed her pediatric residency at Walter Reed Army Medical Center in June 2003 and started a fellowship in neonatology at National Naval Medical Center in Bethesda, Md.

TWO THOUSAND ONE

David Goldstein completed the U.S. Navy’s flight surgeon course. He will be serving with Carrier Air Wing 11 as a flight surgeon aboard the aircraft carrier USS Nimitz, currently supporting Operation Iraqi Freedom.

GRADUATE PROGRAM IN PUBLIC HEALTH ALUMNI NEWS:

Gerlinda Gallegos Somerville is a public health analyst with the Centers for Disease Control and Prevention. She is one of twenty women selected to participate in the National Hispana Leadership Institute 2003 fellowship program.
drug discovery. This financially imposed restriction on the spectrum of research activity necessarily limits the potential for new product discovery. The formula for success in drug discovery is to focus on a single disease; understand its molecular pathology; identify a key rate-limiting “target” receptor in the causation or progression of the disease; elucidate the receptor’s structure at the molecular level; and, by various means, design a chemical that can block, inactivate, or down-regulate its action in a highly selective way. This process is time-consuming and would benefit immensely from shared knowledge among multi-disciplinary teams of researchers drawn from academia and industry. By so doing, companies would leverage all the available knowledge in critical fields such as biology, bioengineering, chemistry, simulation, predictive modeling, and informatics — and at discount prices.

Pharmaceutical companies must begin to look more to the immense research capacity of publicly funded medical universities as an efficient and cost-effective means to maintain their product pipelines and to expand their research and drug discovery programs. Various legislative acts have created an environment conducive to joint ventures between industry and universities. Pharmaceutical companies need talented researchers for early-stage drug discovery research, and these people flourish in academic laboratories. With appropriately structured agreements in place, universities can be viewed as providing pharmaceutical companies with subsidized research programs. Basic research conducted in academic labs provides important seeds from which innovative new health care advances ultimately grow, to the benefit of all. Through the formation of university-industry partnerships, the results of basic biomedical research can be translated into lead drug candidates for the next generation of therapeutic and diagnostic agents.

I maintain that UMDNJ-Robert Wood Johnson Medical School is ideally positioned to aggressively pursue university-industry partnerships. We presently support a broad range of research programs engaged in the discovery and characterization of potential therapeutic targets for drug discovery. We are located strategically in the veritable heartland of the world’s major pharmaceutical companies and countless biotechnology companies. We possess a substantial pool of experienced senior investigators and talented PhD and post-doctoral students with expertise in diverse medically important therapeutic areas, including infectious diseases, virology, oncology, cardiovascular diseases, genetic diseases, neuroscience, endocrinology, cell-cycle regulation, and signal transduction. We can model and design novel drug candidates using modern computer-assisted approaches, test candidate compounds in animal model systems, monitor toxicological profiles, and conduct clinical trials. University-industry partnerships are a proven and productive way to convert the fruits of basic academic research into patentable and valuable intellectual property that can be licensed by the partner company. Furthermore, university-industry partnerships would foster incubators to jump-start high-risk, high-payoff projects, spawn entrepreneurial thinking, and create local academic centers of excellence for training and recruiting students in high-demand fields. By driving down the cost of drug discovery, university-industry partnerships also would help to solve our deepening national crisis over the affordability of drugs.

Within this decade, as the genomics wave advances, the number of potential molecular therapeutic targets will multiply. Successful organizations, whether they are a pharmaceutical company or a research-oriented institution like RWJMS, will be those that adopt a more systematic, computationally advanced approach to drug discovery supported by an informatics-based infrastructure. This affords tremendous opportunities for the new generation of scientists and executives in the biopharmaceutical sector. Realizing that opportunity, however, will require changes in both the philosophy and the processes of research and graduate education. Those institutions that understand this biological and medical informatics imperative and are willing to adopt new technologies and mind-sets to help bring it to fruition will become the new leaders. They also will make a fundamental, tangible, positive impact on human health and quality of life. It is my belief that RWJMS will recognize that wise investments made today in informatics-based technologies will yield huge payoffs tomorrow for our school and the State of New Jersey.

— William J. Welsh, PhD
Norman Edelman Professor in Bioinformatics
Professor of Pharmacology
Director, UMDNJ Informatics Institute

Robert Wood Johnsonakes MEDICINE 71
Pharmaceutical and biotechnology companies are attempting to increase the productivity of their research organizations on a massive scale in order to deliver new, safer, and more effective drugs and medical diagnostic agents. Their hope is to decrease spiraling time and costs, from finding a receptor in the body involved in the cause or progression of a disease that can be affected by a drug (therapeutic concept validation) to new drug approval (marketing of the drug).

During the past decade, the average cost to market a drug has skyrocketed from $200 million to $800 million, while the average time required for drug development and approval has nearly doubled from eight to 15 years. Moreover, the failure rate of candidate drugs in the pipeline remains high, at 90 percent. This continuing escalation in the time, expense, and risk involved in biopharmaceutical research and development (R&D) is occurring in the wake of increasing global competition and shareholder demands for short-term returns. Pharmaceutical companies face additional challenges with the climate of mergers and acquisitions, fierce competition with the growing number of generic drug companies, and rising complaints — especially among senior citizens — about the cost and unavailability of drugs.

Somewhat paradoxically, the number of new molecular entities (drug formulations containing an active substance not previously approved by the U.S. Food and Drug Administration for marketing in the United States) has declined steadily from a peak of 53 in 1996 to 17 in 2002. This decline has occurred against the backdrop of steady increases in R&D investments. R&D spending by U.S. pharmaceutical companies has more than doubled in five years, to $32 billion in 2002. This figure exceeds the entire $24 billion operating budget of the National Institutes of Health for 2002. The message is clear: pharmaceutical research productivity is falling while pharmaceutical research spending is rising.

While technologies for the identification of novel pharmaceutical compounds have become more sophisticated and powerful, they also have become more expensive. Consequently, pharmaceutical companies are unable to support research programs in all therapeutic areas and must make strategic decisions about where to commit resources and which experimental systems within those areas offer the greatest promise for

Continued on Page 71
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