Pathways to Cure:

Breaking New Ground in Surgery and Cardiology
Dear Colleague,

For the second straight year, U.S. News & World Report has named UMDNJ-Robert Wood Johnson Medical School among the top 50 primary care medical schools in the country and second in the nation for community health programs. We are proud that we have made a positive impact on the medical community and that our peers across the country acknowledge the outstanding programs at the school.

Each issue of Robert Wood Johnson Medicine emphasizes important new educational, research, clinical, and community programs. In this edition, we are pleased to highlight our high-tech, state-of-the-art medical and surgical research and clinical programs. Our physicians, scientists, and health care professionals collaborate with colleagues throughout the scientific community to bring the most up-to-date medical knowledge and innovations to our communities.

We continue to be excited by the growth and expansion currently under way at the medical school. In the most recent National Institutes of Health ranking of research funding, UMDNJ-Robert Wood Johnson Medical School continued to move up the list with a 27 percent increase in funding from 1999 to 2000. This outstanding rate of growth on our three campuses has created the need for an ambitious renovation and construction program that is under way to fill a critical need for academic, research, and clinical space. I hope you have an opportunity to look at the renderings of the six facilities being planned, in “Blueprint for Progress.”

We are proud of our accomplishments in education, research, patient care, and community service. In addition, this issue details many of the school’s educational achievements, collaborative activities, and exciting research, new faculty, and alumni activities.

Sincerely,

Harold L. Paz, MD
Dean
SPRING/SUMMER 2001

FEATURES

Blueprint for Progress: Construction and Renovation Proceed at RWJMS
RWJMS is responding to the huge demand for research, clinical, and classroom space with an extensive, two-phase building program.
By Kate O’Neill

Leading with the Heart
Clinical care combines with research, education, and community outreach in the design of an internationally acclaimed cardiology program.
By Rita M. Rooney

Surgery 2001: Invention Driven by Research
Cutting-edge prominence, reflected by robotics in the OR, is strengthened by gene studies and other research to boost surgical capabilities in the new millennium.
By Rita M. Rooney

The Clinical Research Center: High Standards, High Performance
Located at the crossroads of New Jersey and of the pharmaceutical industry, the Clinical Research Center is surpassing academic, scientific, and economic goals.
By Kate O’Neill

Paying Off the Cold War Mortgage
The Environmental and Occupational Health Sciences Institute (EOHSI) assumes a leadership role in nuclear waste cleanup.
By Rita M. Rooney

On Call: KidsHealth Pediatricians Are Always at Your Fingertips
Whole families ride the Internet to KidsHealth.com, a Web site maintained by the Nemours Foundation’s Center for Children’s Health Media, founded and led by Neil Izenberg, MD ’76.
By Kate O’Neill

Luck, Be a Lady!
In her children’s saga of war, pirates, and elusive medical care, they should look for good fortune, not hardship, says Hang Minh Ngo, mother of three RWJMS students.
By Kate O’Neill

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Dear Dr. Paz:

I appreciate reading the many informative articles on the research projects at the Robert Wood Johnson Medical School. Sincerely, Carlos Hernandez, PhD

President, New Jersey City University

Looks Terrific!

Dear Dr. Paz:

Thank you for forwarding me a copy of your Fall/Winter 2000 newsletter. I appreciate reading the informative articles on the research projects at the Robert Wood Johnson Medical School.

Sincerely,

Henry Brezenoff, PhD
Acting Dean, UMDNJ-Graduate School of Biomedical Sciences

Interviews

Dean Paz Convenes First Meeting of R WJMS Board of Overseers

By Kate O'Neill

The UMDNJ-Robert Wood Johnson Medical School Board of Overseers met for the first time in October 2000. Newly convened in response to the recommendation of a president’s committee that the board of trustees at the Robert Wood Johnson Medical School be reorganized and all schools were expected to participate in strategic planning, our plan was already in place.

Q: Could you tell us about the timing of your decision to convene a Board of Overseers for RWJMS?

Dean Paz: A: At the medical school’s retreat in 1997, we discussed the need to set new goals and re-examine our mission. A year later, the idea for a Board of Overseers was in place. I subsequently had an opportunity to talk it over with Andy Wallace, now dean emeritus of the Dartmouth Medical School, who suggested looking at our Board of Overseers. He was very supportive, and we were impressed with the model it uses. Dr. Stuart Cook, the new president of UMDNJ, was also very enthusiastic about making this move.

So last year, when the university’s strategic imperatives were created and all schools were expected to participate in strategic planning, our plan was already in place.

Q: What combination of qualities did you look for in your Board of Overseers members?

A: We wanted a group that could help us take a fresh look at ourselves, to help us see what works and what doesn’t. We know our board could become our most influential spokespeople, and we sought respected people from the top of the academic and corporate world. One of the specific areas they can help us with is advising us on the best use of information technology as we move in new directions such as distance learning, bioinformatics, and the use of technology in virtually every setting from the classroom to the patient’s bedside.

Members from the pharmaceutical industry are key because of the industry’s geographic concentration in New Jersey and its role at the school in areas such as our Clinical Research Center.

Q: What was the format for the meeting in October?

A: It was a day-and-a-half meeting, held on our New Brunswick campus. Our opening dinner included senior faculty and featured a talk by Bill Hait (professor of medicine and pharmacology and director of The Cancer Institute of New Jersey). The second day consisted of presentations that helped give a sense of the school, including a discussion led by Dr. Stephen Lowery (professor and chair, Department of Surgery). Andy Wallace had suggested we leave plenty of time for input and questions, and we did. Also, at the end of the day, I held an executive session in order to gain as much frank feedback as possible.

Q: Were you surprised by any new ideas from the meeting?

A: I was especially pleased with the directness and candor of the participants. It meant we could take a good look at our present goals and evaluate the future direction of the school. Their evaluations were full of positive responses and suggestions. They were especially helpful on strategic planning, financial issues, program development, and resource allocation. The outcome of the meeting was good for us and for the university as a whole.

Q: Now that the group has worked together, what will be different when it reconvenes in May?

A: Fortunately, we are moving forward with the same group. We only lost Ken Weg, who retired last fall as vice chair of Bristol-Myers Squibb. He is succeeded on the board by Richard Lina, who is president of Bristol-Myers Squibb Worldwide Markets Group. We know we have their enthusiasm—we have been pleased to hear independently from several members since the meeting in October. We had a solid foundation, so they will all be able to speak knowledgeably to specific issues facing our medical school.

Q: What are your goals for the next meeting?

A: We’ll be looking at a number of specific areas such as the Chandler Health Center and our community outreach programs. We’ll also examine the financial challenges facing us as a school and an academic medical center. We need to know where to emphasize growth and where to reduce cost. Overall, we’ll keep focusing on the factors that continue to move us into the top echelon of medical schools.
The year 1969, best remembered for the first moon landing, was “the dark ages for hematology,” says Norman Motolinsky, professor of medicine and pharmacology and director of the Cancer Institute of New Jersey; and Parvin Saidi, MD, professor of medicine, chief of hematology, and director of the Melyn H. Motolinsky Laboratory for Hematology Research. “If we’d known then what we know now, Melyn Motolinsky might still be alive.” But Motolinsky, a promising young New Brunswick lawyer, died that year of acute leukemia. “Mel’s family and friends wanted to establish a living memorial in his name,” adds Dr. Reitman, “and with that goal in mind they created the Melyn H. Motolinsky Research Foundation.”

In its almost 30 years, the Motolinsky Foundation has become an important partner in hematology research at UMDNJ-Robert Wood Johnson Medical School. In 1970, the foundation’s board announced its goal of supporting research activities in the then young division of hematology and oncology. It met this goal with the establishment of the Melyn H. Motolinsky Laboratory for Hematology Research.

The foundation’s second goal was the establishment of an endowment fund to support a fellowship position in hematology and oncology at RWJMS, and each year since 1984, the best senior fellow in these fields has been selected as the Motolinsky Fellow. Additionally, for the past 27 years, the foundation has presented, at its annual reception, the Melyn H. Motolinsky Distinguished Service Award to leaders in medicine. Past recipients have included Harold L. Paz, MD, dean, RWJMS; William N. Hait, MD, PhD, professor of medicine and pharmacology and director, The Cancer Institute of New Jersey; and Parvin Saidi, MD, professor of medicine, chief, division of hematology, and director of the Melyn H. Motolinsky Laboratory for Hematology Research.

Last spring, the foundation’s board took another important step, pledging $1.25 million to endow the Melyn H. and Ab Motolinsky Chair in Hematology in honor of Dr. Motolinsky and his father, the late Judge Abraham Motolinsky. The foundation’s board announced its goal of supporting research activities of the then young division of hematology and oncology. It met this goal with the establishment of the Melyn H. Motolinsky Laboratory for Hematology Research.

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“These are people, for the most part, who are conscientious about their health,” Dr. Carson says. “Most medical settings, however, laboratory tests are not coordinated within a single patient visit. That’s what we do, in most situations and whenever humanly possible.”

He adds that a highly personalized level of care is central to the center’s mission and that the program’s philosophy recognizes the concerns of patients who want every reasonable preventive measure undertaken to ensure their continued good health.

“When we talk of a comprehensive package, we mean that we are sensitive to the individual perspectives of our patients,” he says.

The Center for Executive Health will be marketed to individuals as well as New Jersey companies and will rely on referrals to RWJMS clinicians.

Dr. Carson concludes, “The key word for the center is efficiency — and that’s one to which most executives respond.”

— R.M.E.

Raymond E. Donovan loved to help children. “This will be the first thing various universities learn upon entering the Child Health Institute of New Jersey (CHIJ) at UMDNJ-Robert Wood Johnson Medical School. Joseph P. DeAlessandro has ensured that knowledge with his gift of $500,000 to the Foundation of UMDNJ to endow the Raymond Donovan Atrium at CHIJ.

“We are thrilled that Mr. DeAlessandro has joined us in this important effort that will benefit children everywhere,” says Roger S. Fine, chair, Board of Trustees of the Foundation of UMDNJ, and vice president and general counsel for Johnson & Johnson.

DeAlessandro first heard about plans for CHIJ from his friend Allen Chin, a member of the Board of Trustees of UMDNJ.

DeAlessandro hired the New England architect for genetically based childhood diseases, “so I think it is very meaningful that he recognized the significance of the institute’s mission to help children. CHIJ focuses on finding cures and any recommended treatment,”

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— R.M.E.

In addition to their professional connections, they shared a deep commitment to the community, especially to its youngest members. Like Donovan, DeAlessandro kept children’s needs foremost in his mind when he had the opportunity to give back. “I always marveled at anyone who helped kids,” says DeAlessandro, who also generously contributes to higher education and the arts.

“For those who wish to remember family members, patients, friends, colleagues, or themselves in a very special way, certain areas at CHIJ have been set aside for commemorative naming. To join the Foundation of UMDNJ in support of the Child Health Institute or to receive further information, contact Joanne M. Bentler, director of development, at 732-235-8770.

Robert L. Teichman, MD, Harold L. Par Chair of Developmental Biology and acting director of CHIJ, is pleased that a private citizen has recognized the significance of the institute’s work. “The interdependence of a community and its academic and health care institutions might seem obvious. But mobilizing the community behind its institutions continues to require nurturing and foresight. Mr. DeAlessandro’s gift to CHIJ makes the clearest possible statement of community support for establishing a major center for children’s health in New Jersey.”
shortly before noon on March Day, Euton M. Laing, MD ’90, vice president of the Robert Wood Johnson Medical School Alumni Association, led a champagne toast to the Class of 2001. He was enthusiastically joined by the class, crowded into the Clinical Academic Building Conference Center with friends and family. Precisely at noon, they were among the nation’s 14,515 fourth-year medical students opening their residency match envelopes. They waited at the words that would frame their futures, then jubilation erupted, marked by screams, hugs, laughter, and tears of relief.

With the five words “University of Virginia, Internal Medicine,” Jennifer Fish ’01 learned she had been selected by her first choice. She was among the 57,200 of her RWJMS classmates who got their top match. Another 18.8 percent matched with their second choice, and 9.5 percent matched with their third. Overall, 138 RWJMS students received their residency training in the National Resident Match Program, and 98.6 percent of them matched — a significant match above the national rate of 93 percent.

One of the Class of 2001 will pursue residencies in New Jersey; one-quarter will be in programs at UMDNJ. One of these is Troy Edwards ’01, who will graduate in May with both a PhD, in molecular pharmacology and cellular biology, and a medical degree. He was matched with Robert Wood Johnson Medical School, his top choice. “The research program is particularly strong at The Cancer Institute of New Jersey,” he says, “since the establishment of the Dean and Harry Garlo Center for Prostate Cancer.” Celebrating with his friends, Edwards adds, “Our group snuck together and supported each other for four years. I think it’s more than a coincidence that we all got our top choice!”

“The matching process begins with the first year of medical school,” says David Seiden, PhD, professor of neuroscience and cell biology and associate dean for admissions and students affairs. “Our office provides the database and research to help students decide on their specialty. They rely on us for information about other students with similar strengths who have applied to these programs.” Carmen Orta ’01 agrees. The former inner-city math teacher and tutor and counselor for the Federal Bureau of Investigation will achieve her dream in May when she will receive her medical degree and begin a surgical residency program at RWJMC. “I couldn’t have done it without Student Services,” she says. “You just knock on their door, no appointment necessary. They’re always there for you.”

— K.O.N.
The Class of 2001 Career Choices
UMDNJ-Robert Wood Johnson Medical School, Piscataway & Camden Campuses

Jawar E. Escofar, MD, pro-

Department of Psychiatry Garners Grants

Oral tradition or improved func-
tional interventions to provide these
psychiatry, will explore appro-
priate medical and psychiatric
interventions to provide these
patients with clinically sound treat-
ment or improved func-
tional status.

To date, no controlled tri-
als toward relieving patients with
taneous physical symptoms. In other
ways, to be effective, this has to be
provided as medical treatment.

- R.M.R.

Evan Shereck: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Dennis Neely: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Sohail Pasha: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Kathleen Prendergast: University of
Connecticut, School of Medicine, CT
Hima Prabhakar: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Taryn Weissman: Onco-
logy
James Creeden: St. Barnabas
Medical Center, NJ
Robert McFadden: St. Barnabas
Medical Center, NJ
Robert Shaw: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Troy Edwards: Transitional
Urology
Victor Ferlise: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
He says that label and oth-
erwise, cannot lead to recog-
nition of medical science. In

Terms of specific psychiatric disor-
ers are confro-

Robert McFadden: Thomas Jefferson
University, PA
Evan Weiner: University of
Pennsylvania, PA
Christopher Miller: University of
Pennsylvania, PA
Cara DeGeorge: Mount Sinai Hospital, NY
Taryn Weissman: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Hima Prabhakar: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Sohail Pasha: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
Kathleen Prendergast: University of
Connecticut, School of Medicine, CT
Hima Prabhakar: UMDNJ-Robert
Wood Johnson Medical School, Piscataway, NJ
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logy
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Wood Johnson Medical School, Piscataway, NJ
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nization of medical science. In

Terms of specific psychiatric disor-
ers are confro-

--Continued from page 10

pulmonary disease. In other
ways, to be effective, this has to be
provided as medical treatment.

- R.M.R.
The 15-mile distance between Princeton and New Brunswick hasn’t got shorter. A recent affiliation between The Medical Center at Princeton (MCP) and The Cancer Institute of New Jersey (CINJ) creates a new link in the long-standing “link” between the medical center and UMDNJ—Robert Wood Johnson Medical School. The partnership started in 1972 when MCP became one of the medical school’s first teaching affiliations. Today, as a major clinical affiliate, it is a frequent teaching site for RWJMS students’ clinical rotations and residents starting work in their specialties. In October 2000, The Medical Center at Princeton became the 20th member of the CINJ network of partner and affiliate institutions. All MCP physicians who treat cancer are undergoing the credentialing necessary for eligibility in National Cancer Institute (NCI) protocols. Included in the process are not only MCP’s oncologists, but also in radiology, pathologists, and surgeons.

Along with other medical centers and hospitals in the network, MCP will receive the advantages of membership in CINJ. New Jersey’s only NCI-designated cancer center. A major benefit to member institutions and their patients is access to NCI cancer protocols, which is greatly expanded to the CINJ partners. “People living in the many communities served by The Medical Center will not have to travel far from home to receive advanced comprehensive cancer care,” says William N. Hait, MD, PhD, professor of medicine and pharmacology and director of CINJ. “Together we are meeting the needs of patients and their families.”

Institutional networks help provide a variety of teaching environments,” says Harold L. Paz, MD, dean. “Each affiliate offers a different setting where patients can interact with our patients. Our expanded residency program always have residents from other institutions. The chief of service, and the educational and training rotations expand in turn.

When the MCP Oncology Department decided to expand, their physicians researched affiliations with major cancer centers, hoping for access to current NCI protocols. Princeton oncologist Peter Y. Tsai, MD, says the department carefully weighed the strengths of each potential collaborator, then decided to seek membership in the CINJ network. “CINJ is close by, and it’s a great place with a great future.” But he says the deciding factor was MCP’s teaching partnership with RWJMS. “Many of our physicians teach RWJMS students and residents, hold faculty appointments at the medical school, and are on staff at Robert Wood Johnson University Hospital. It is for a perfect collaboration.”

Surgeon oncologist Darius Desai, MD, came to the Princeton Medical Group from Ohio State University’s Arthur James Cancer Hospital. He is eager to see NCI protocols can be the route to better, more effective treatment.” — K.O.Y.

Robert Wood Johnson Medical School—members serve on the governing boards of partner institutions and become part of the CINJ network. 

Takara Shuzo Company Endows a Chair in Bioinformatics: $2M Gift Ensures RWJMS Role in the Genomics Revolution

Art Director Wins on RWJMS Publica

Three Awards for Work

Takara Shuzo Company Endows a Chair in Bioinformatics: $2M Gift Ensures RWJMS Role in the Genomics Revolution

For Robert Wood Johnson Medicine and Art Director Barbara Walsh, 2000 was a banner year. The Art Directors Club of New Jersey awarded Walsh a certificate of excellence in art direction and graphic design for each of last year’s issues. She received a third certificate for the 1999 Robert Wood Johnson Medical School Annual Report. Since stepping into his current position five years ago, Harold L. Paz, MD, dean, has supported the magazine’s growth into a full-blown publication that features faculty achievements and state-of-the-art programs at the medical school, says Ms. Walsh, whose foremost goal for Robert Wood Johnson Medicine is to convey the excellence of the medical school to a wide readership. Her work is editorial design, and she has a knack for complementing text with creative, high-quality imagery. She seeks outside artists whose work is thought-provoking work graphically portrays the RWJMS mission. “The cover should set our school apart,” she says. “It needs to say, ‘This is a forward-looking, research-based medical school that hasn’t sacrificed patient care or community service on the road to excellence.’”

Now an independent graphic designer, Walsh was a designer for New Jersey Monthly, Parade, and Good Housekeeping before

Takara Shuzo Company of Kyoto, Japan, the company is a worldwide leader in several fields, including genetic engineering. The grant qualifies the university for a dollar-for-dollar match through the New Jersey Higher Education Incentive Funding Act.

This extraordinary gift stems from an equally extraordinary 40-year friendship. In 1960, two young doctoral students in the field of biochemistry were collaborating on their first paper. After completing their work in Japan at the University of Osaka, both came to the United States to teach and do research. Although their careers took them in different directions, they stayed in touch, sharing information within their fast-moving field. Last year, the two friends, Masayuki Inouye, PhD, professor and chair, Department of Biochemistry at RWJMS, and Ikunoshin Kato, PhD, vice president of the Takara Shuzo Company, came to the RWJMS campus. A formal meeting took place in the rotunda of the Medical School.

“Bioinformatics research is essential for our medical school’s growth as a major force in basic research,” he adds. The field of bioinformatics, at the interface of mathematics, computer science, molecular biology, and genetics, promises to transform the way the world understands and treats disease. “Endowments are unusual in Japan, where there are no tax advantages for corporate giving,” says Dr. Inouye. “However, they do appreciate the great importance of bioinformatics in the future of medical research and are willing to help establish a strong center for academic bioinformatics in the department.” He adds that he hopes more companies and private donors will follow the lead of Takara Shuzo.

— K.O.Y.
In medical schools nationwide, faculty members feel pressured to do research, get published, and maintain a base clinical practice. It has become a challenge to devote time to teaching, especially in a climate where the importance of clinical teaching will be left to John B. Kostis, MD, professor and chair, Department of Medicine, and Nayan K. Kothari, MD, professor and chair, Department of Pediatrics, the establishment of internships, and exceeding required clinical competencies. “Panelist Michael Ford, MD, Royal College of Physicians (RCP), Edinburgh, UK, added that “doing things repetitively without correction improves confidence, not competence.”

One hundred people attended the symposium, which was sponsored by the Department of Medicine, RWJMS, and the Clinical Competency Center at St. Peter’s University Hospital. Invited participants included faculty from all UMDNJ sites, all RWJMS affiliates, and the New Brunswick Affiliated Hospitals. Chief residents were invited, but the symposium was open to any resident interested in teaching.

“One goal was to teach as many teachers as possible,” says Dr. Kothari. “By any measure, it was a great success.”

The next symposium, scheduled for September, will examine clinical competencies in basic care, focusing on the standards of the American Council on Graduate Medical Education.

— K.O.N.

Dr. Carver Steps into a New Post:
Former Pediatrics Chair Named Associate Dean for Faculty Affairs

In Dr. Carver’s new office, there will be no tiny chairs. After 45 years of focusing on children, David H. Carver, MD, professor of pediatrics, has been appointed associate dean for faculty affairs. He replaces Raymond Reiner, MD, professor and chairman of the Department of Psychiatry and Behavioral Sciences, who stepped down to devote more time to research. Until recently, Dr. Carver served as chair of the Department of Pediatrics, a post he had held since 1985. During the search for his successor, Stephen W. Karney, MD, MPH, professor of pediatrics and senior associate dean for clinical affairs, will serve as acting chair.

As associate dean for faculty affairs, Dr. Carver will have responsibilities that include working with the school-wide Committee on Appointments and Promotions and other faculty committees. He wishes to enhance a program for new faculty development, with emphasis on research and teaching, that began during his time as director of the division of infectious diseases.

In addition, he will collaborate with Dr. Rosen and other senior administrators and staff to develop an orientation program and create an orientation handbook for new faculty.

Dr. Carver is a member of the search committee for the director of the Child Health Institute of New Jersey (CHINJ), where research will study the molecular basis of disease. He previous served on the Planning Committee of the New York City’s Sloan Children’s Hospital at Robert Wood Johnson University Hospital. In 1953, Dr. Carver graduated from Duke University School of Medicine. That same spring, a half-century revolution in medical research began as the public learned of Jonas Salk’s polio vaccine. Dr. Carver’s career paralleled that medical revolution, beginning with his early research and leading to his current commitment to the CHINJ. He worked with two Nobel laureates whose research on the cause of viruses in tissue cultures had led to Dr. Salk’s discovery: Frederick C. Robbins, MD, at Western Reserve Medical School, and John F. Enders, PHD, at Harvard Medical School.

After completing a medical internship at the Johns Hopkins School of Medicine, Dr. Carver did a fellowship at Western Reserve while on active duty with the U.S. Public Health Service Epidemic Intelligence Service. He completed his residency and served as resident in pediatrics at Boston Children’s Hospital prior to his fellowship with Dr. Enders. During that training, he began teaching as director of the infectious diseases division in the Department of Pediatrics at Albert Einstein College of Medicine. At Johns Hopkins, he was a Senior Research Associate, and served as director of the division of infectious diseases in the Department of Pediatrics. For the following decade, he served as professor and chair of the Department of Pediatrics at the University of Toronto School of Medicine and as physician-in-chief at the Hospital for Sick Children, in Toronto.
Distinguished Alumni Award: Young Epidemiologist

Elizabeth Talbot, MD ‘92, to Receive UMDNJ

Melinda W. Davis
Appointed VP for Development

RWJMS Nominee Arnold J. Levine, PhD, to Receive UMDNJ Honors

In 1998 Dr. Talbot traveled widely in the third world, aging the African people. “She’s fantastic: she has one lead- ing perspective on her work. “After a grueling or overwhelming day, they remind that all you can do is all you can do. Incrementally, our successes seem to be mea- sured in the small things we are entrusted to do: being polite, with the secretary, smiling when you leave a patient’s bedside, and spending time with loved ones.” — K.O.N.

Talbot has served on the front lines since college. She has worked as a medical student in the rural Philippines and has traveled widely in the third world to study, teach, do research, and treat patients. In 1998 Dr. Talbot started a two-year tour in Botswana with the Epidemic Intelligence Service of the U.S. Centers for Disease Control (CDC). Last fall she returned to the small sub-Saharan nation, as director of TB research at the CDC’s HIV field site. This time she is joined by her infant son, Christoph, and her husband, Stephen Courance. On the first tour, she had devel- oped a deep sense of community with her colleagues and neigh- bors. She had also gained a valu- able understanding of the clinical and cultural understandings of the interlocked epidemics rav- aging the African people.

For ten years, Dr. Talbot has been a world leader in cancer research, Arnold J. Levine, PhD, was named president of The Rockefeller University, one of the world’s premier biomedical research institutions, in 1998. Last year, he became Faculty member of the newly convened Board of Overseers of Robert Wood Johnson Medical School. In recognition of his achieve- ment, UMDNJ will confer an honorary degree of Doctor of Humane Letters on Dr. Levine at Commencement. “Dr. Levine has been a wise and generous friend to the school,” says Dr. Levine, “and we are honored that he deepens this affiliation by accepting this honor.”

“Dr. Levine’s work with p53 may turn out to be the single most important discovery in the history of cancer research,” says William N. Hart, MD, PhD, professor of medicine and pharmacology and director of The Cancer Institute of New Jersey (CINJ). In 1993, as direc- tor of the newly founded CINJ, Dr. Hart first met Dr. Levine, a member of the institute’s External Scientific Advisory Board. “I had already admired him as a scientist, and later became a collaborator. He is a man of multiple interests. He is extraordinarily generous with his time and is the ideal collabor- ator on any project,” says Dr. Hart. As chairman of the Depart- ment of Molecular Biology at Princeton University, Dr. Levine helped Dr. Hart recruit Stuart Lenzker, MD, PhD, now an assistant pro- fessor of medici- ne at RWJMS. “In ’93, Dr. Lenzker was one of the most outstanding young people at Yale,” says Dr. Hart. “He joined CINJ when Dr. Levine invited him to come to Princeton for a summer fellow- ship and offered him work and lab space.” Shortly after taking office at The Rockefeller University, Dr. Levine met with the staff of News & Notes, the university’s newsletter. “Everybody in science works very, very hard, and everyone makes important con- tributions,” he said. “You’ve got to be lucky to make a con- tribution that also has a med- ical or clinical impact. In some sense that’s the skill of choosing, and in another sense that’s the lack of being at the right place at the right time. I’ve always felt that I’ve been at the right place at the right time.” — K.O.N.
Changes Under Way at RWJMS-Camden

Dr. Benson to Pursue Research During Sabbatical

O

n January 1, 2001, Gordon D. Benson, MD, professor of medi-

tine, stepped down as associ-

ate dean, RWJMS-Camden, to pursue research on liver disease. Free from administrative responsibilities, Dr. Benson looked forward to uninterrupted time to focus on his research into the mechanisms of injury in primary biliary cirrhosis, which is classified as an autoimmune disease. He will spend six months with an immunology group at the University of California at Davis, where he will receive a faculty appointment.

Dr. Benson joined the RWJMS faculty in 1976 as a professor of medicine. Five years later he moved to the Camden campus, where he became associate dean in 1987 and developed a strong new clinical program for stu-

dents and faculty. “We believe the Camden program has an enormous benefit,” says Dr. Benson, “because students complete their clinical work at a sin-

gle site.”

He is proud also of his adminis-

tration’s role in supporting student-initiated community outreach programs. Students did an excellent job establish-

ing programs in the local schools and organizing a clinic the truly indigent can receive care. As administrators, we smoothed the way and helped organize faculty support to make the clinic an educational success. In 1993, alumni showed their appreciation for Dr. Benson’s leadership by electing him an honorary member of the Alumni Association. Dr. Paz says Dr. Benson was well respected by colleagues both within and outside the medical school, adding, “We will miss him and wish him continuing success.” — K.O’N.

Dr. Mehne Takes on a New Role at RWJMS-Camden

Paul R. Mehne, PhD, asso-

ciate professor of family medicine and associate dean for academic and student affairs at RWJMS-Camden, has taken charge of new responsibilities following Dr. Benson’s depa-

reach, planning, and the physi-

cal campus. In addition, he is chairing the medical school’s two-year self-study for reaccreditation by the Liaison Committee on Medical Education (LCME) of the Association of American Medical Colleges. Dr. Mehne’s education includes interdisciplinary doc-

Dr. Mehne’s responsibilities include overseeing research, community out-

reach, planning, and the physical campus. In addition, he is chairing the medical school’s two-year self-study for reaccreditation by the Liaison Committee on Medical Education (LCME) of the Association of American Medical Colleges. Dr. Mehne’s education includes interdisciplinary doctoral programs in environmental science and instructional design at Syracuse University and The State University of New York, College of Environmental Science. His career began at East Carolina University, with what he describes as “the exciting opportunity to build a medical school from the ground up.” He later served as associate dean for student and house staff affairs at the University of Pennsylvania School of Medicine. Dr. Mehne joined the RWJMS-Piscataway 1992 as assistant dean for curriculum, two years later he was appoint-

B

ernard D. Goldberg, MD, professor and chair of the Department of Environmental and Community Medicine, has accepted a position as dean of the Grad-

uate School of Public Health, University of Pittsburgh. He will commence his new responsibilities in June, following a three-

year sabbatical and visiting professorship in Malaysia. Dr. Goldberg served as chair of the Department of Environment-

mental and Community Medicine from 1995 to February of this year. He was appointed director of the Environmental and Occupational Health Sciences Institute (EOHSI), a joint pro-

gram of UMDNJ-Robert Wood Johnson Medical School and Rutgers University, in 1986. In addition, he was the first prin-

cipal investigator of the Con-

sorship of Risk Evaluation and Stakeholder Participation (CRESIP) and served as acting dean of the UMDNJ-School of Public Health from 1998 to 1999, the first year of its formation. “EOHSI is the largest academ-

ic environmental health pro-

gram in the United States and is especially regarded for the breadth of its program and out-

put,” reports Harold L. Paz, dean. “The medical school is indebted to Dr. Goldberg for his out-

standing leadership, which played such a significant role in the institute’s stature on the national scene.” Prior to his faculty position at RWJMS, Dr. Goldberg was assistant administrator for re-

search and development at the U.S. Environmental Protection Agency. He has served as chair of the NIH Toxicology Study Section and EPA’s Clean Air Scientific Advisory Committee. Dr. Goldberg is the author of more than 200 articles and book chap-

Steven J. Shiff, MD, Awarded Unilever Chair

A newly endowed chair at the UMDNJ-Robert Wood Johnson Medical School will research dietary methods to prevent chronic dis-

ease. Steven J. Shiff, MD, associ-

ate professor of medicine, has been appointed to the Unilever Chair for the Study of Diet and Nutrition in the Prevention of Chronic Disease. The endow-

ment also established the Unilever Center, a division of The Cancer Institute of New Jersey (CINJ), where the chair is located.

Endowed by a $1.25 million gift from Unilever, the center will also educate the public on the latest research linking diet, health, and disease prevention. Unilever’s gift reflects the com-

pany’s commitment to research applicable to products that can improve health, not just sustain it. The endowment for the chair is the vision of Ed Votkamp, PhD, Unilever’s senior vice presi-

dent for research and development.

“The Unilever Chair is one of ten new chairs and professorships we have established in the past five years,” says Harold L. Paz, MD, dean, “providing critical re-

sources to expand our basic and clinical research pro-

grams. I am grateful to Unilever for the confidence shown by its generosity. Its tremendous support has provided us with the resources to recruit Dr. Stephen Shiff, a major force in nutrition.”

Current evidence indicates that diet may play a role in the development of many common cancers, including those of the breast, colon, and lung. Dr. Shiff is widely published both on this topic and on the cancer prevention mechanisms of diet and aspirin-like drugs. “Through Dr. Shiff’s research, we hope to dis-

cover definitive new avenues of cancer prevention that can be used by the people of New Jersey and beyond to maintain their health, particularly those at high risk for the development of cancer,” says William N. Hirt, MD, PhD, professor of medicine and pharmacol-

ogy and direc-

tor, CINJ.

“This faculty has always been interested in basic research into complementary and alternative medicine,” says Dr. Shiff. He cites a pion-

ering research of naturally occur-

ring estrogens, conducted by Dr. Hirt, Michael A. Gallo, PhD, professor of environmen-

tal and community medicine and senior associate dean for research, and Robert D. Paola, MD, associate professor of medicine.

Dr. Shiff served on the faculty at The Rockefeller University in New York, first as clinical school-

ar and assistant professor, then as associate professor of clinical investiga-

tion. While holding the Unilever Chair, he will continue as an adjunct faculty member at The Rockefeller University, a position he car-

ried for years at the Joan and Sanford I. Weill Medical College of Cornell University. Throughout his career in research and educa-

tion, he held clinical appoint-

ments at New York Hospital–Cornell Medical Center, and Rockefeller University Hospital. He is now a member of the medical staff at Robert Wood Johnson University Hospital.

Dr. Shiff graduated summa cum laude from the University of Pennsylvania and is a mem-

ber of Phi Beta Kappa. He received his medical degree from the University of Pennsylvania School of Medicine, where he was elected to Alpha Omega Alpha. He did his internship and residency at The New York Hospital before completing two consecutive fellowships: first at the Well College of Medicine, in microbiology, then at Harvard Medical School/Massachusetts General Hospital, in gastroen-

terology. — K.O’N.
High Voltage

David A. Harrington, MD, 14, of Edwardsville, IL, who received his MD, is among the first clinical assistant professor of surgery, have been elected to membership in the American Association of Hip and Knee Surgeons. Dr. Potokoff lectured on state-of-the-art knee-replacement surgery at the annual “Hip, Knee, and Shoulder Symposium” at Park City, Utah. Robert L. Hendren, DO, professor of psychiatry and chief of pediatric psychiatry, was an invited speaker at the “International Symposium of Child and Adolescent Psychiatry,” sponsored by the King Fahad National Guard Hospital in Riyadh, Saudi Arabia.

Barbara A. S. Strauss, MD, professor of pediatrics and chief of pediatric neurosurgery, was appointed to the editorial board of the Journal of the American Academy of Child and Adolescent Psychiatry. The journal, “Whiz Kids,” a television program carried by the Hispanic network Telemanos that aired on WNUJ in New York. J effrey C. Mendel, MPH, professor of psychiatry and University Professor, received a $50,000 grant from the Robert Wood Johnson Foundation, as part of a larger project to completely overhaul the Drug Abuse Research Program. The program is an outgrowth of a weight control program run by Richard S. Strauss, MD, assistant professor of pediatrics and director, Pediatric Weight Control Program at RMS/UMMS.

Publicizing Kudos

Joseph I. Byrom, MD, MPH, adjunct professor of environmental and community medicine, is among those being honored by the American Medical Association (AMA) at its annual meeting. Dr. Byrom is an assistant professor of pediatrics at the University of Maryland School of Medicine, Baltimore.

Department of Obstetrics and Gynecology

Natalie C. Freeman, MD, MPH, adjunct professor of environmental and community medicine, co-authored Children’s Environmental Health: Reducing Risks in a Dangerous World. John K. Sellers, MD, professor and chief, Department of Pediatrics, Medicine, has been named chief medical editor of Internal Medicine World Report, a publication distributed to 110,000 physicians. Stephen J. Lowry, MD, professor and chair, Department of Surgery, co-edited Surgery: Basic Science and Clinical Evidence. The comprehensive new text for surgical residents, practitioners, and medical students includes a CD-ROM and was named “The Outstand- ing New Medical Textbook for 2001” by the Association of American Publishers. Dr. Lowry served as associate editor of another new major textbook, Surgical Research, published this spring by Academic Press.

Frank F. Murphy, MPH, assistant professor of medicine and acting chief, division of dermatology, was appointed to the editorial board of the Journal of the American Academy of Dermatology. The journal (87:6-711) published “DNA Polymerase II Integration through Chromatin” by Danny J. Dankberg, PhD, professor of biochemistry and Howard Hughes Investigator, Thomas Jenuwein, PhD, clinical professor and chair, Department of Physical Medicine and Rehabilitation, has accepted an appointment as president of the American Academy of Physical Medicine and Rehabilitation. Robert L. Twedt, MD, professor of pathology and laboratory medicine, was also appointed to a review by the National Institutes of Health grants of development in the field of pediatric nephrology.

Havoc

Michael Burnhill, MD, professor of family medicine, was awarded the 2001 Investigators and Johnson Award for Sex Therapy Research. Daniel Wartenberg, PhD, professor of environmental and community medicine, was elected a fellow of the American College of Physicians. Sabine L. Whalen, MD, professor of surgery, has accepted a position as chief of pediatric surgery at WAMU. In the position he will also serve as chief of pediatric surgery at St. Barnabas Medical Center in Livingston, NJ.
Blueprint for Progress:  
CONSTRUCTION AND RENOVATION PROCEED AT RWJMS

The blueprint for expansion and renovation at UMDNJ-Robert Wood Johnson Medical School responds to today’s voracious demands for research space. In the first phase of a two-phase construction plan, the medical school is constructing two new buildings in Piscataway. Phase 2 will bring new research and clinical space to The Cancer Institute of New Jersey, space for the researchers at the Child Health Institute of New Jersey, and added space for the Environmental and Occupational Health Sciences Institute. Finally, construction of a new home for the Cardiovascular Institute of New Jersey will be crucial to its mission of improved service and outcomes.

The Stage II Research Building, left, a second building of its type on campus, will provide expansion space for several basic science departments, and serve as staging space for Child Health Institute of New Jersey investigators.

- Located in Piscataway
- 20,000 square feet
- Cost of project: $7 million
- Slated to open in August 2001

The Child Health Institute of New Jersey, below, will be a comprehensive biomedical research center that will seek to identify causes and treatments for devastating illnesses of children through biomedical research in genomics/proteomics, developmental biology, and neurodevelopment. The building will house a 25,000-square-foot transgenic vivarium facility for the New Brunswick campus.

- Located in New Brunswick
- 121,500 square feet
- Estimated cost of project: $50.9 million
- Funds raised: $16 million

The Cancer Institute of New Jersey (CI NJ), above, is dedicated to the prevention, detection, measurement, and care of patients with cancer. CI NJ is one of only sixty National Cancer Institute-designated centers in the country. The new addition will house major research and clinical programs, including the Dean and Betty Gaie Prostate Cancer Center and the Center for Women’s Reproductive Cancers. The planned facility would expand the current 80,000-square-foot building.

- Located in New Brunswick
- 121,500 square feet
- Estimated cost of project: $50.9 million
- Fundraising under way

The Environmental and Occupational Health Sciences Institute, below, sponsors research, educational, and service programs in a setting that fosters interaction among experts in environmental health, toxicology, occupational health, exposure assessment, public policy, and health education. The planned facility would expand the current 75,000-square-foot building.

- Located in Piscataway
- 15,000 square feet
- Estimated cost of project: $5 million
- Fundraising under way

The Robert Wood Johnson Research Building, above, will bring investigators together from across basic science departments to focus on collaborative research and will house a 15,000-square-foot transgenic vivarium facility.

- Located in Piscataway
- 90,000 square feet
- Cost of project: $35.9 million
- Slated to open in August 2002

The Cardiovascular Institute of New Jersey, above, focuses on the molecular biology of heart failure, cardiovascular clinical trials, cardiovascular pharmacology, cardiovascular biotechnology, and cardiovascular health promotion and clinical outcomes.

- Located in New Brunswick
- Planning under way
Our mission is to maintain a prominent international reputation in the areas of clinical service, research, education, and community outreach,” reports John B. Kostis, MD, professor and chair, Department of Medicine. Dr. Kostis, who has been principal investigator of numerous national and international research studies and developed the Myocardial Infarction Data Acquisition System (MIDAS), a statewide MI database, says the medical school’s clinicians are in the forefront of diagnostic and therapeutic progress.

In interventional cardiology, for example, Abel E. Moreyra, MD, professor of medicine, has pioneered new advances in New Jersey, from complex angioplasty and stent procedures to techniques that determine blood flow across blockages using Doppler and pressure signals.

“Symbolically, the heart is positioned at the center of our lives, vulnerable to attack yet with endurance that weathers time and abuse. While the annals of medicine don’t include even one case of a broken heart, the phrase is indicative of the metaphoric proximity between the organ and life itself. That connection is emphasized at UMDNJ-Robert Wood Johnson Medical School, where a four-pronged integrated program in cardiovascular diseases and hypertension continues to break new ground.

De. Moreyra; Jai B. Agarwal, MD, associate professor; and Kenneth Khaw, MD, assistant professor, are invasive and interventional cardiologists who participate in clinical trials of pharmacotherapy, used in conjunction with angioplasty, in the treatment of coronary artery disease and myocardial infarction.

“We’re active participants in national studies to determine not only which are the most effective drugs, but also which combination of drugs and mechanical interventions, such as angioplasty, works best,” Dr. Moreyra says.

Considerable interventional cardiology effort is focused on patients who suffer restenosis following a stent procedure, as well as those who are not candidates for either angioplasty or coronary bypass.
Robert Wood Johnson says. “We are optimistic that late development of blood vessels in the heart muscle, using laser energy to make new channels (PTMR). The procedure is introduced at RWJMS, it is shown that this imaging enhancement that can eliminate the need for some invasive procedures.

Meir Shinnar, MD, associate professor of medicine, reports that this imaging enhancement provides three-dimensional pictures of every part of the heart — including valves, muscle, tissue, and blood vessels.

“What is most exciting is that we actually got new types of information,” Dr. Shinnar says. “We now have the ability to do tissue discrimination and plaque characterization. We’re getting some extremely useful detail.”

He explains that traditionally it was believed that the thicker the plaque, the more likely a patient was to suffer a heart attack. However, it has been shown that it is the composition of the plaque that determines the likelihood of a rupture and subsequent myocardial infarction.

“Traditional imaging techniques don’t tell us anything about the composition of the plaque,” Dr. Shinnar says. “It isn’t determined by echocardiography or catheterization, but we are beginning to be able to study it with MRI. Admittedly, there is more to learn, but the prospects are encouraging.”

In addition, Dr. Shinnar is involved in research projects leading to expanded clinical use of cardiac MRI, including new ways of acquiring and analyzing data. These advances in imaging techniques provide invaluable assistance to cardiologists Alan Tammann, MD, associate professor, and Sebastian Palmar, MD, associate professor, who bring their special expertise to the management of complex clinical conditions in their leadership of the cardiac inpatient and coronary care units.

Echocardiography studies at RWJMS currently include the use of older echocardiography and technologies that advance the practice of medicine,” he says. “Our division has participated in the development of well over one hundred drugs and devices and in the invention, testing, and refinement of procedures that have afforded patients better diagnostic and treatment options worldwide.

He adds, “We provide a full spectrum of cardiac services to the people of New Jersey — from our screening and prevention initiatives to the most complex tertiary and quaternary heart failure and cardiovascular transplantation programs.

The heart failure and transplantation cardiologists, Tarik Ramahi, MD, associate professor, and Robert Hilfert, MD, associate professor, work with a highly trained multidisciplinary team of specialists in cardiac surgery, immunology, infectious diseases, psychiatry, and social services to bring the most advanced therapeutic options to patients with end-stage heart failure.

The medical school was the first in the state to offer cardiac MRI, a diagnostic boon to clinicians that can aid them in making crucial treatment decisions. The new cardiac electrophysiology arrhythmia mapping technology is particularly advantageous in performing ablation procedures on those patients who previously were ineligible for the technique.

Dr. Preminger and Archana Pandi, MD, assistant professor, also are involved in the implantation of defibrillators to reduce the incidence of sudden death in patients awaiting cardiac transplantation. In addition, research is ongoing to identify populations of patients in whom defibrillation is more effective than drug therapy.

The division also is known for its expertise in epidemiology and related medical disciplines, and article contributions from leading echocardiographers around the world.

“We have had many exciting interactions,” Dr. Schindler reports. “For instance, a doctor in England reported seeing something on an echo he had never seen before. His observations were picked up by someone in Australia who had the same experience.

“We discovered that the phenomenon was related to the newer prosthetic valves never reported in the past.”

Community service is another cardiology priority, emphasized by the medical school’s role as adviser to the Governor’s Office and the New Jersey State Department of Health and Senior Services, as well as by participation in national and state health organizations. Dr. Lacy’s monthly radio broadcast, Heart of the Matter, is heard throughout the state and serves the mission of community health education.

With its four-pronged mission that encompasses national and international preeminence in clinical care, research, education, and community outreach, the cardiology division of RWJMS continues to expand the definition of leadership.
In 1846, science celebrated the first “painless” surgery, performed with ether. Between that event and the evolution of modern medicine lie almost two centuries and the progression of surgery from more to less.

To be sure, the contrast separating early progress from that in the new millennium is evident in the increase of minimally invasive techniques. That contrast, however, is rooted in subtleties beyond procedural innovation. Today, the torch is carried by surgical centers with collective insights that coax technology to the limits of discovery compounded by both basic and clinical research. It is research that expands the margins of surgical success by conducting clinical trials examining patient outcomes and the impact of pharmacological intervention. And at the UMDNJ-Robert Wood Johnson Medical School, it is research that drives minimally invasive milestones taking place in the operating room — from complex pediatric and adult abdominal procedures to pioneer vascular and thoracic surgery, kidney removal for benign disease, and robotic techniques.

In 2000, Surgery Department research at RWJMS was awarded more than $2.3 million in funding, almost $1.7 million of which comprised 13 National Institutes of Health (NIH) grants.

Stephen F. Lowry, MD, professor and chair, Department of Surgery, reports it was the opportunity for both expanded research and clinical program development that brought him and his team of investigators to RWJMS from Weill Medical College of Cornell University. An internationally recognized surgical genitourinary surgeon, he became chair of the Department of Surgery at UMDNJ-Robert Wood Johnson Medical School in 1999.

It was the opportunity for both expanded research and clinical program development that brought him and his team of investigators to RWJMS from Weill Medical College of Cornell University. An internationally recognized surgical genitourinary surgeon, he became chair of the Department of Surgery at UMDNJ-Robert Wood Johnson Medical School in 1999.

Robert Wood Johnson University Hospital
We continue to recruit the department’s newly funded young researchers and those with prestigious NIH grants,” Dr. Lowry reports. “We continue to recruit bright stars of the future, investigators whose work already shows promise of bringing added stature to the medical school.”

The Next Generation

Among these young research luminaries, Siobhan Corbett, MD, assistant professor of surgery, division of surgical sciences, is the recipient of a five-year NIH grant plus funding from the American Heart Association and the Foundation of UMDNJ. Board certified in general surgery, Dr. Corbett says she became interested in surgical research while a resident at RWJMS.

“My area of focus is cell biology and the process of wound contraction,” she reports. “We know that contraction is responsible for 95 percent of wound closure, with only 15 percent the result of new tissue development. While our studies primarily are concerned with surgical wounds, there are other implications for this research. The end purpose is to understand the process so that it can be modified to promote healing or prevent scarring.”

Ramsey A. Foty, PhD, assistant professor of surgery, division of surgical sciences, is funded by the New Jersey State Commission on Cancer Research, the U.S. Department of Defense, and the American Foundation for Urological Disease. His basic research investigates characteristics of tumors that cause them to escape the prostate and infiltrate the blood.

Dr. Foty, whose work has been published in Cancer Research reports, “This research is important because, while there is no available treatment once the tumor has spread to the bloodstream, the slow-growing nature of prostate cancer makes us question how long invasive treatment can extend the time — perhaps by 15 or 20 years — until the tumor gets into the blood.”

In the division of vascular surgery, Gary B. Nackman, MD, assistant professor of surgery and director of vascular research, is engaged in extensive clinical studies to determine how different surgical interventions affect postoperative function.

“Traditionally, we have measured outcomes by standards that are not necessarily patient related,” Dr. Nackman explains. “We evaluated the success of a procedure by how well or how long a graft remained open. But a more critical question is whether or not the patient’s function has been improved.”

Surgeons now are prospectively and postoperatively and presented to the Society of University Surgeons demonstrate that, following procedures involving lower extremities, patients were identified whose functional health had not significantly improved, although the surgery had been successful in keeping grafts open and saving the limbs. This research has resulted in the development of a baseline for traditional interventional techniques and standards with which to judge less invasive procedures. Other research extends to aortic aneurysms, which Dr. Nackman calls “understudied phenomena.”

The recipient of a Foundation of UMDNJ grant, Dr. Nackman also holds a prestigious five-year career development award from the NIH. In addition, he participates, along with Drs. Lowry and Scholz, in an NIH-funded training grant held by the New Jersey Center for Biomaterials. The grant is earmarked for clinician scientists interested in basic and applied research in biomaterials.

Based on the dollar amount of recent grants, an NIH favorite is the kind of translational bench-to-bedside research that begins with an explicit disease process, proceeds to defining underlying mechanisms in specific patients, and then goes back to the lab for solutions. It has become a priority as well in the division of surgical oncology, where Edmund C. Latrine, PhD, professor of surgery, molecular genetics and microbiology, and associate director of The Cancer Institute of New Jersey, explains the mind-set of a surgical team bent on discovery.

“The quality and extent of cancer research in the department can be traced to the number of surgeons doing lab work side by side with researchers focused on a promising area,” Dr. Latrine reports. “We’re exceptionally proud of the department’s newly funded young researchers and those with prestigious NIH grants,” reports Stephen F. Lowry, MD, professor and chair, Department of Surgery. “We continue to recruit bright stars of the future, investigators whose work already shows promise of bringing added stature to the medical school.”

Laboratory-based investigations,” he says. “We’re developing treatments for tumors and gene therapy in a way that can best be approached by the combined intellects of clinicians and basic scientists.”

Our point is well made — no fewer than 14 major NIH grants fund the department’s oncology research. Two NIH grants, held by Dr. Latrine, each support every...
Mackenzie, MD, professor of surgery and chief, division
pioneered video-assisted procedures.
which has been found to significantly reduce recuperative time for patients undergoing lung surgery, and James W. Randall D. McKinnon, PhD, associate professor, funded by the NIH since 1988, Peter M. Scholz, MD, professor of surgery, division of cardiothoracic surgery, and surgical director of cardiac surgery.

The late 1980s. Driven by technology and patients' growing interest in their own health care, advances in surgical capabilities now occur with rapidity that would have been inconceivable even 50 years ago. At the heart of discovery is the groundbreaking realization that less surgery is better surgery.

Here at the medical school, we are undertaking a concerted effort to become a leading center for minimally invasive procedures,” Dr. Lowry reports. “This is cutting-edge technology that will encompass virtually every surgical discipline.”

Among the newest applications is distance surgical technology, or robotics (see page 37). RWJMS is one of about a dozen centers nationally to set up an internal review board (IRB) prior to inevitable 2001 approval by the Federal Drug Administration (FDA). While the technology will be used in general surgery, its value in cardiac surgery is especially dramatic. It employs a robotic device with arms that manipulate instruments through one-inch chest incisions, while the surgeon sits at a console controlling the procedure. The primary advantages are technical precision and the absence of tremor that could adversely affect the surgery. Mark Anderson, MD, associate professor of surgery, division of cardiothoracic surgery, and surgical director of cardipulmonary transplantation, explains that the medical school will be one of only a few New Jersey centers undertaking a concerted effort to become a leading center for minimally invasive procedures.

The difference to kidney donors is that the operation is a much more minor procedure involving less recuperative follow-up than previously. Donors now can return to work within two to four weeks, contrasted to three to four weeks when we used the more invasive surgical technique,” Dr. Laskow says.

One of the most valuable implications of the change is its impact in increasing the pool of available donors who may now view the procedure with less apprehension than previously. In addition to Dr. Laskow’s work, the method for obtaining donor kidneys using laparoscopic techniques is being used by Andrew Borawski, MD ’80, and John Sutyak, MD, both associate professors of surgery.

Donors using laparoscopic techniques is being used by Andrew Borawski, MD ’80, and John Sutyak, MD, both associate professors of surgery.
endovascular peripheral technology, including balloons and advanced angioplasty as well as treatment from remote sites. Even more minimally invasive treatment for abdominal aortic aneurysms, approved only recently by the FDA, is being performed regularly at the medical school.

“Prior to FDA approval, we had an IRB consent for compassionate use,” Dr. Graham reports. “Once the devices were approved, our OR was already specially equipped and we were set to make this state-of-the-art surgical procedure available to our large aneurysm population.”

While video-assisted thoracic surgery (VATS) has only recently been making headlines across the country, it has already become a commonly performed procedure at RWJMS. John Langenfeld, MD, assistant professor of surgery, says it has led to significant improvement in patient comfort and reduced recuperative time compared to conventional thoracotomy. Advanced thoracic surgeries, such as lobectomy and esophageal myotomy, now are performed as minimally invasive procedures as well.

“We also use the minimally invasive muscle-sparing technique for complex oncologic disease,” Dr. Langenfeld says. “It allows for precise surgical excision.”

The medical school launched New Jersey’s first program for laparoscopic pediatric procedures, led by Mitchell R. Price, MD, assistant professor of surgery, who employs minimally invasive techniques for spleenectomy, anti-reflux surgery, and other procedures. Laparoscopic contralateral hernia exploration in children is especially advantageous, because it is often necessary to create an additional large incision to check for the possibility of a second hernia.

Thomas V. Whalen, MD, professor and chief of pediatric surgery, reports that the recent appointment of Randy Burd, MD, PhD, will add significant new strength to research in shock and sepsis among the pediatric population. In the final analysis, RWJMS is well positioned to take surgical technology to the highest level of performance and patient satisfaction. The medical school is distinguished by landmark surgical achievements. Paralleling these advances is growing renown, ignited by world-class clinical and biomedical research, which will continue to drive discovery in the future.

**Robotics in the OR**

While the medical community is buzzing with the latest surgical breakthrough — a robot no less — Andrew Boyarsky, MD ’80, associate professor of surgery, refers to it as just the next step, one that might have been anticipated, in making surgery safer and more precise.

Dr. Boyarsky, who performed the first robotic gall-bladder procedure at Robert Wood Johnson University Hospital in February and several more since then, says it is this kind of absolute assurance with which he answers patient questions.

“I would not have performed the first one, much less subsequent procedures, if I couldn’t provide patients with confidence that the technology takes surgical progress to the next level by increasing safety,” he says. “We also use the da Vinci robot in use at RWJMS, has mechanical wrists, which the surgeon controls from a remote three-dimensional console.

The da Vinci robot in use at RWJMS, has mechanical wrists, which the surgeon controls from a remote three-dimensional console some distance from the patient. Andrew Boyarsky, MD ’80, associate professor of surgery, says,”

“It is the arm of the robot that controls the instruments — but it is the surgeon’s fingers that control the operation.”

He adds that the three-dimensional field allows working from different angles, and that it’s possible to advance, rotate, tilt, and withdraw minimally invasive instruments.

“As we become more comfortable in doing this procedure, I feel sure it will be applied to almost everything, from spleen to kidney, adrenal glands, and more,” he adds.

“In the meantime, I have to admit it may take a while to become accustomed to going into OR without scrubbing or wearing gloves.”
The Clinical Research Center:

High Standards, High Performance

By Kate O’Neill

The Clinical Research Center (CRC) is located at the hub of the UMDNJ-Robert Wood Johnson Medical School. This places it at the crossroads of New Jersey and at the center of the pharmaceutical industry. With these ideal coordinates, the CRC is an important showcase for the school’s achievements in research.

In recent years, the CRC has become a remarkable focus for clinical research while surpassing its academic, scientific, and economic goals. Since 1999, its research program has more than doubled, and patient visits have increased from 259 to 450. In the same period, grants have risen from $1.5 million to $3.5 million. Today, the CRC is involved in more than 50 clinical trials. Most concern dermatology and immunology, but trials are also under way in endocrinology, infectious disease, nephrology, surgery, and psychiatry.

Three physicians, two full-time and one part-time, a six-person nursing staff, full-time administrator, recruiter, and clerical staff all keep the unit humming.

Four years ago, Alice B. Gottlieb, MD, PhD, professor of medicine and professor of molecular genetics and microbiology, stepped down as chief of the division of dermatology to accept the William H. Conzen Chair in Clinical Pharmacology and directorship of the CRC. (See accompanying faculty profile.) The CRC sits atop the Acute Care Building of Robert Wood Johnson University Hospital, near the atrium connecting the hospital’s main facility with the RWJMS Medical Education Building.

“Alice Gottlieb has grown the CRC so fast that we may soon have to find new space for it,” says Michael A. Gallo, PhD, professor of environmental and community medicine and senior associate dean for research. Looking ahead, Dr. Gallo sees the CRC’s well-respected work as a springboard to establishing additional, specialty CRCs: a second unit, dedicated to pediatrics, and then a third, based at The Cancer Institute of New Jersey.

“The Clinical Research Center has featured prominently in the development of new treatments for male and female sexual dysfunction,” says Raymond Rosen, PhD, professor of psychiatry and director of the Sexual Pharmacology Research Unit. “The facilities and resources of the...
Robert Wood Johnson Medical School’s Clinical Research Center supervises Phase I through IV clinical trials, from pre-approval by the Food and Drug Administration to post-marketing approval by the Food and Drug Administration of the Food and Drug Administration. Dr. Gottlieb is both a practicing dermatologist and a dedicated research scientist. She specialized in dermatology, she says, because the skin is the body’s largest, most accessible organ, making it ideal for research. She is also board certified in dermatology and internal medicine and holds a PhD in immunology.

A summum cum laude graduate of Brandeis University, Dr. Gottlieb simultaneously earned a medical degree from Cornell Medical School and a doctorate in physical therapy at The Rockefeller University, where she taught while working in the CRC. This has led to a successful career in academic clinical research and a tenure-track position at UMDNJ. By 1993, she was chief of dermatology at New York’s Hospital for Special Surgery and residencies in dermatology and internal medicine at New York Hospital.

Dr. Gottlieb knew that her training at The Rockefeller University, University of Pennsylvania, and a fellowship at New York’s Hospital for Special Surgery and residencies in dermatology and internal medicine at New York Hospital will provide her with the tools she needs to succeed in her future career as a clinical research scientist. She subsequently did a rheumatology fellowship at the National Institutes of Health and a postgraduate fellowship at the CRC to do clinical trials and work on drug development. Now, as a newly appointed assistant medical director of the CRC, she supervises a clinical research center that is highly credible in the pharmaceutical industry.

“Boston, New York, and Philadelphia all have clinical centers,” adds Dr. Ford. “If the CRC keeps growing, it could help UMDNJ become equally well known. It has an excellent team. It’s located in the center of a state with a population of more than eight million people! We’re in the heartland of the pharmaceutical industry. RWJM could easily be New Jersey’s first Center for Excellence for clinical research.”

Dr. Gottlieb’s goals for the CRC include making it a magnet for students and residents who might be future clinical researchers. To this end, she hopes to establish a doctoral program in clinical research. The center is already proving successful in the preparation of serious investigators, and most students and fellows who have worked in the CRC have had abstracts or papers published, she says. Dr. Gottlieb is justly proud of Umesh Chaudhari, MD ’96, assistant professor of medicine and assistant medical director of the Clinical Research Center. During the third year of his residency, Dr. Chaudhari discovered the CRC. A year later, he received a postgraduate fellowship at the CRC to do clinical trials and work on drug development. Now, as a newly appointed assistant medical director of the CRC, he supervises a clinical research center that is highly credible in the pharmaceutical industry.

“Ideally, he says, the school would require a course in clinical research, so that every student would discover the CRC. “At a minimum, students who plan to teach and do research should spend time here. In reality, many students haven’t decided what they want to do after graduation, and their crammed schedules make it difficult to fit in hard-core research.” He hopes that by expanding the breadth of its specialties, the CRC can attract more students to its required research project. “That way they would start their careers already involved in the research in their field.”

Personally, Dr. Chaudhari is dedicated to continuing research at the medical school but realizes his field is competitive. “My future at the CRC depends on how much new research I can recruit.”

Building Corporate Relationships

The CRC sustains a delicate balance between the precision of academic inquiry and the practical needs of its corporate sponsors. It hosts independent faculty research and conducts Phase I through IV drug research for pharmaceutical and biotechnology companies. Its success as a site for clinical trials partially stems from its history of corporate support. In 1983, a grant from Merck created the unit as a satellite of the Center for Advanced Biotechnology and Medicine. Two years later, Schering endowed the William H. Conzen Chair in Clinical Pharmacology, ensuring continuing support for the position of CRC director. Each year, Merck gives $100,000, renewable annually.

The CRC has developed a specialty niche in biotechnical clinical research. It has initiated major clinical research contracts for RWJM with pharmaceutical companies including Bristol-Myers Squibb, Hoffman-La Roche, Verseon, Xenux, and Bayer. Biotechnical research sponsors with master clinical trial agreements include Bionet and IBC Pharmaceuticals.

“In that our medical school is in the center of America’s pharmaceutical heartland, it is gratifying to see the phenomenal growth of the CRC under Dr. Gottlieb’s leadership,” says Harold L. Pax, MD, dean. “There is tremendous opportunity for us to work with our colleagues at the other UMDNJ schools and to create a statewide center of excellence. Given all we have accomplished in such a short amount of time, we must now move the CRC to General Clinical Research Center (GCRC) status. This will provide critical federal funds to support the huge overhead costs of independent research by faculty.”

Michael A. Gallo, PhD, professor of environmental and community medicine and senior associate dean for research. Her ability to attract outside research to our center is evidenced by grants totaling $3.5 million. Meanwhile, she has also re-engaged the division of dermatology, established the units of dermatosurgery and cosmetic dermatology, and set up the school’s first basic research laboratory in dermatology. Beginning with her research at The Rockefeller University, Dr. Gottlieb’s discoveries about the pathophysiology of psoriasis have led to a new understanding of that disease. She was among the first to demonstrate that psoriasis is a T-cell-mediated immune disorder, a finding that has revolutionized treatment. Her work, published in Nature and Medicine and noted in the Lancet, has shown that a T cell-specific immunosuppressant could be a potential therapy.

In ongoing research on immunobiology, Dr. Gottlieb’s goal is to “interface the immune system reaction responsible for the attack on the skin without affecting the functioning of the rest of the immune system — an exceedingly difficult balancing act,” said Andrew Pollack of the New York Times in a recent article on Dr. Gottlieb’s work. She serves on the National Pсорiasis Foundation Medical Board and the Board of Directors of the Women’s Dermatologic Society. She is also a member of the editorial boards of the Journal of Cutaneous Medicine and Surgery, the Journal of the American Academy of Dermatology, and the Journal of the European Academy of Dermatology and Venereology.

She received the Johnson & Johnson Corporate Office of Science and Technology Award for 1997-98 and served in the Hoffman-La Roche Executive Development Program. In addition to appearing in the New York Times business feature column cited here, she has been designated one of the “Best Doctors” in New York by New York magazine and received equivalent recognition from New Jersey Monthly.

Professionally, Dr. Gottlieb has accomplished wonders while raising two sons. Perhaps the ultimate wonder about Alice Gottlieb’s world is not just her capacity for clinical research, but her ability to find time to accomplish and give so much.
Vision for a Specialty CRC in Pediatrics

Each year, UMDNJ-Robert Wood Johnson Medical School faculty, primarily from pediatrics, conduct studies involving children. Participating children have conditions ranging from childhood obesity to scoliosis, cystic fibrosis, asthma, and AIDs. Some of these studies are conducted in the current Clinical Research Center (CRC). “But children are different from adults, and they have different requirements,” says George H. Lambert, MD, associate professor of pediatrics and director, division of pediatric pharmacology and toxicology. “To create a truly kid-friendly environment requires everything from a different setting and technology to a medical staff trained in pediatric pharmacology.”

Dr. Lambert believes the time is ripe to create a pediatric CRC at RWJMS. Pharmaceutical companies have developed a keen interest in pediatric clinical trials, and the Food and Drug Administration has announced patent extensions for companies that research the specific effects of a drug when it is used in children. “The FDA is creating a very strong financial incentive for needed, appropriate research,” he says, “and the companies have responded favorably.”

“Only 15 percent of drugs administered to children have been adequately studied to allow the FDA to label these drugs for use in children,” explains Dr. Lambert. Pediatric clinical studies at various developmental stages are necessary because of the way drugs affect children. They absorb and metabolize drugs much differently from adults and have greater inter-individual differences.

Dr. Lambert reports that the pharmaceutical industry would prefer to conduct pediatric clinical trials in a space designed for children’s needs. “Now it’s time for academic facilities to step up to the plate and create kid-friendly research centers that ensure the pediatric trials take place in a safe and protective environment, with a staff who understand children, their disease states, and the unique, age-specific ways they handle drugs.”

Sustaining Excellence

“The CRC is extremely useful to the school,” says John B. Kostis, MD, professor and chair, Department of Medicine. “First, it is our only site that focuses on teaching clinical research. Second, it is the only site available for certain types of trials, especially those requiring the subjects to sleep overnight. And third, it is dedicated to attracting new research studies to be carried out by our faculty.”

In name, the Clinical Research Center is dedicated to only one-quarter of the RWJMS mission. In fact, its impact extends throughout the entire hospital and the medical school. To the volunteer investigator, the CRC must be more than an academic exercise,” says Dr. Ford. It is the only site available for certain types of trials, especially those requiring the subjects to sleep overnight. And third, it is dedicated to attracting new research studies to be carried out by our faculty.”

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Every detail of documentation must be credible, easily retrievable, and absolutely transparent.” A unit that offers this level of research in an academic setting, he says, attracts corporate interest. That the CRC is attached to both the hospital and the medical school can be an additional incentive to a pharmaceutical company seeking a site to study a new drug that has not previously been studied in people. The hospital also offers security to the subjects involved in such trials. In addition, clinics at the medical school can be a good source of subjects for academic studies from a diverse range of medical specialties.

While the center’s 16-bed inpatient unit and the 4-bed outpatient unit are often full, additional work takes place in a “virtual CRC.” The staff is available to conduct off-site studies using the same high level of scientific inquiry that is standard within the CRC. Clinical research, with pre-approval by the FDA and the Institutional Review Board, can occur in nursing homes, as well as varied practice settings. Of great interest to corporate sponsors is the CRC’s streamlined procedure for paperwork. Its bolstered Master Clinical Trial Agreement creates a blanket contract with specific, approved companies. Once the legal aspects are settled, medical school researchers who want to do research with that company can bypass initial red tape by appending their contract to the original, blanket agreement.

The CRC staff works hard to remain competitive with other academic centers, for-profit clinical research units, and consortia of private physicians. Visibility is important, so the staff convenes a quarterly advisory board meeting for potential trial sponsors and academic customers. “Each major pharmaceutical has visited in the past year,” reports Dr. Rosen. “All were highly impressed with our facilities.”

“From a corporate point of view, clinical research must be more than an academic exercise,” says Dr. Ford. “Pharmaceutical companies want prompt results, but regulatory pressure from the Food and Drug Administration makes corporations extremely demanding about every phase of drug development. If blood is to be taken during research, this has to be decided prospectively with the volunteers’ informed consent, then the researcher must record precisely what was done with it. Every detail of documentation must be credible, easily retrievable, and absolutely transparent.”

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Powers has been a faculty member at Harvard, CRESP during the past five years can as well as to the collaborative work environmental experts, now at RWJMS, have been able to apply our success in solving other environmental problems to those inherent to nuclear cleanup.

He adds that the effectiveness of CRESP during the past five years can be credited in large part to the direction provided by nationally renowned environmental experts, now at RWJMS, as well as to the collaborative work performed by faculty members at Rutgers University.

Among project leaders at the medical school, he cites Charles W. Powers, PhD, professor of environmental and community medicine, CRESP II executive director, and its chief investigator for CRESP, defines community integration as providing timely information to affected communities, engaging their participation on citizen advisory committees, and ultimately getting community leaders to help set research agendas.

“In terms of external funding, RWJMS has the original five-year grant was the largest received by the Robert Wood Johnson Medical School,” reports Harold L. Paz, MD, dean. “It represents national recognition for our wide range of experience in basic laboratory science, public policy, mathematical modeling, economics, ecology, and occupational health.”

CRESP was founded on a premise of responsibility to all stakeholders, among them communities and citizen groups as well as the DOE and Environmental Protection Agency (EPA). Bernard D. Goldstein, MD, former director of EOHSI and founding principal investigator for CRESP, defines community integration as providing timely information to affected communities, engaging their participation on citizen advisory committees, and ultimately getting community leaders to help set research agendas.

“In terms of external funding, RWJMS has the largest environmental occupational health program in the country,” Dr. Goldstein says. “And we have experience. New Jersey lights up on just about every environmental map except those for the DOE. We have been able to apply our success in solving other environmental problems to those inherent to nuclear cleanup.”

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Among project leaders at the medical school, he cites Charles W. Powers, PhD, professor of environmental and community medicine, CRESP II executive director, and its principal investigator. The architect of CRESP, Dr. Powers has been a faculty member at Harvard, Yale, Princeton, and Tufts universities. He is widely acclaimed for creating many organizations that resolve environmental and health risks, for which he is the recipient of the Ram Dobbs Environmental Achievement Award.

Another laudatory on the CRESP team is Arthur C. Upton, MD, professor of environmental and community medicine. Formerly director of the National Cancer Institute, Dr. Upton is an ex officio member of the Board of Directors of the International Consortium for Research on the Health Effects of Radiation and a member of the National Council on Radiation Protection and Measurements Science Committee on Policy Analysis and Decision Making.

Barry Friedlander, MPH, professor of environmental and community medicine and deputy executive director of CRESP, has considerable expertise in program planning, monitoring and evaluation of sites, and related health surveillance. He is coordinating academic efforts at several universities to improve the quality and scope of research and protect the health and environment of stakeholders at DOE sites.

Commenting on the scope of the problem undertaken by CRESP, Dr. Powers says, “We have been focusing considerable efforts on one of the largest sites, the Savannah River project in Aiken, South Carolina, which is 316 square miles in area. The government has been spending $1.2 million a year at that site for eight years and will continue to do so for many years ahead. If we were to combine the total landmass designated by the DOE for cleanup, it would equal the size of Delaware and Rhode Island.”

According to Dr. Powers, the real complexity involved is related to time, and this is not a one-dimensional waste problem. “Normally, you can incinerate waste or put it into some other chemical context,” he says. “Radioisotopes, however, have to decay at their own pace — and that can take from six years to hundreds of thousands of years. So the big problem comes in figuring out how to keep these materials from producing human and ecological risk in the meantime.”

Therein lies the DOE charge to CRESP during its first five years of research. The organization was primarily involved in risk assessment and in helping regulations and the DOE use existing law to reframe issues.

“Our agenda for the next five years is to take what we have learned, determine what is needed in terms of resources and remediation, and then get the job done,” Dr. Powers says. “In other words, we have to figure out a way to keep the hazard at bay until it is no longer a hazard. We call that stewardship.”

Dr. Goldstein adds that the awarding of this enormous undertaking to a university-based program represents a breakthrough in government policy. “Academia has always had the ability to direct such efforts.”

“However, the theory was that academicians don’t have the ability to fail fast, which is what happens in industry. What we have been able to demonstrate is a management structure that develops a strategy and, if necessary, can move on quickly to new ideas. The result, for the most part, has been the introduction of some highly cost-effective approaches.”

Dr. Powers agrees, adding, “The government has always tapped good scientists to attack these problems. What we have been able to provide is independence and integration in a team of professionals capable of putting all the components together.”

(Editor’s note: Dr. Goldstein recently accepted a position as dean of the University of Pittsburgh Graduate School of Public Health. Replacing him and serving as principal investigator of CRESP’s RWJMS component is Paul Levy, PhD, professor of environmental and community medicine.)
**Alumni Association Board of Trustees**

**Introduces New Officers**

The Robert Wood Johnson Medical School Alumni Association Board of Trustees has elected the following officers to serve a two-year term, from January 1, 2001, to December 31, 2002:

- **President**
  - Eduardo Fernandez, MD ’89
- **Vice President/President-elect**
  - Euton M. Laing, MD ’90
- **Secretary-Treasurer**
  - Steven Krawet, MD ’89
- **Chair, Membership Committee**
  - Ernest S. Bizack, MD ’77
- **Chair, Reunion Committee**
  - Francine E. Smolicky, MD ’81

The Board of Trustees is composed of alumni from each graduating class. If you are interested in joining the board as a class delegate or helping with any Alumni Association activity, contact Roberta Wilson, coordinator, alumni affairs, at 732-235-6310 or email: rbwilson@umdnj.edu.

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**Student Interests Come First for New Alumni Board**

**Students are increasingly aware of our programs,** says the RWJMS Alumni Association’s new president, Eduardo Fernandez, MD ’89. “They’re asking us for a lot of help, so this is an ideal time to build alumni participation.”

“We don’t expect alumni to get involved in every activity, but we also know that once you’re involved, it’s easy to stay involved,” says Dr. Fernandez. In addition to leading the Board of Trustees, he volunteers for Career Night and the association’s A Day in the Life program. “Alumni take pride in the school as they meet students through the programs and learn more about what’s going on there.”

A graduate of Lehigh University and RWJMS-Camden, Dr. Fernandez first served the Alumni Association Board of Trustees as a class delegate, then as vice president. As a board member he has taken special interest in supporting and expanding the opportunities for students and alumni to meet informally.

Dr. Fernandez has a private practice in hematology/oncology in Mount Laurel and works at Cooper Health System, the core teaching hospital for RWJMS-Camden. He contributes an hour each way to attend Alumni Association board meetings. Clearly serious about volunteering for the school, he says, “It’s not a problem. We meet on my day off.”

Vice President/President-elect Euton M. Laing, MD ’90, says, “The new board has a good geographic spread. That should help us reach out to more alumni.”

As a medical student, Dr. Laing volunteered for the service-focused Student National Medical Association, the oldest and largest medical student organization dedicated to people of color and underrepresented communities. He has helped with Career Night since his days as a chief resident at Somerset Medical Center. “It’s good to be going back to the school by helping the students,” he says.

He serves as assistant director of the Family Practice Residency Program at JFK Medical Center, Edison, and as president of the Middlesex County chapter of the New Jersey Academy of Family Physicians. Dr. Laing volunteers at his four children’s schools and serves as assistant pastor of his church, the New Creation of the Apostolic Faith in Somerset. He also participates in Caribbean Medical Missions, helping with health care in third world countries.

Secretary-Treasurer Steven Krawet, MD ’89, is a gastroenterologist in solo practice in East Brunswick. Annually, he gives the esophagogastroduodenoscopy in the first-year RWJMS course “Introduction to Medicine.”

Dr. Krawet believes in working for the Alumni Association because its Annual Fund supports student loans and scholarships. Classmate Nancy Serrie, MD ’89, invited him to a board meeting two years ago. While encouraging other alumni to become active and join the board, he also hopes the association sets an example for students who will, in turn, catch the spirit and become active alumni themselves.

Dr. Krawet says his all-doctor band, Alter Egos, which has performed at several RWJMS events, is “taking a new shape.” (Stay tuned!) Membership Chair Geza Kiss, MD ’95, assistant professor of anesthesiology, was 35 years old when he left a career as a chiropractor to attend medical school. In his fourth year, he received the Alumni Award, and after graduating he became a class delegate to the alumni board. “The Alumni Association is in an ideal position to support students,” he says. “We’re a down-to-earth group. If students have a question or a problem, they can speak to us informally and get advice without ‘putting it on the record.’”

“As graduates, it’s our turn to give financial and moral support to the students,” adds Dr. Kiss. His first goal is to help his class set a record for reunion participation. “I love to keep in touch with old friends,” he says, “and I plan on phoning every classmate within a 500-mile radius to get them back for Reunion Weekend.”

**Fund raiser extraordinary** Ernest S. Bizack, MD ’77, chairs the Development Committee. A former emergency physician, he serves as senior vice president of physician operations at St. Barnabas Health Care System in Livingston. He also makes time for one of his favorite hobbies: raising friends and alumni donors. Additionally, he throws himself into Phonathons, where his infectious enthusiasm motivates students to become successful callers.

“Enjoy the work, and even have some fun doing it,” he told The Foundation of UMDNJ’s Outlook earlier this year, but “it is a role I take quite seriously. I want to make sure we are the ones who will keep dreams alive for the next generation of future doctors.”

He looks forward to the day when the fund can give every observant student the opportunity to make a difference in both health care and life itself.

Former association president Francis E. Sinofsky, MD ’81, clinical associate professor of obstetrics and gynecology, chairs the Reunion Committee. She is a partner in the OR&GYN Group of East Brunswick.

Dr. Sinofsky has been organizing RWJMS reunion weekends since 1983. She keeps the number of attendees growing by responding to alumni preferences, such as the Continuing Medical Education (CME) program for the many alumni who like to combine business with pleasure. This year there will be campus tours by faculty or staff. “People who haven’t been here for two years will be amazed to see the new construction at the school,” she says.

“Saturday night dinner dance is always everyone’s favorite event. The Hilton is an elegant setting, and we make sure to provide a great dinner and a great dance band,” she adds. “But no matter what we do, the alumni take the evening as a chance to catch up and have fun.”

Dr. Sinofsky hopes alumni will make a record number of nominations for the association’s Distinguished Alumni Award and Honorary Alumni Memberships. Now they can make nominations on the Alumni Association’s Web site. “As alumni we focus on the people at the school and the great foundation they gave us. We all realize they got us where we are today.”

— K. O’N.
Alumni Host Happy Hour in New Territory

Nova Terra was the latest of several innovative new restaurants to open in New Brunswick. With its airy West Indies atmosphere, Caribbean menu, and location on Albany Street near the medical school, it was an ideal venue for the first Alumni/Student Happy Hour. The success of the late-January party was evident in the lively, informal conversations. For several hours, 60 Robert Wood Johnson Medical School guests seemed transported from New Brunswick to the New World getway suggested by the restaurant’s name. For more than a year the Board of Trustees of the Alumni Association had hoped to sponsor a casual get-together for students and alumni. The event would supplement the association’s existing student programs, such as A Day in the Life and Career Night. A “Happy Hour” seemed to fit the bill. The challenge became finding a date, place, and time that suited student schedules as well as physicians’ calendars.

Then, late last fall, Nova Terra hosted a “sneak preview” dinner — a party for more than 100 of the best friends of the Child Health Institute of New Jersey. Alumni Association Secretary-Treasurer Steven Krawet, MD ’89, attended the party, and the Nova Terra Happy Hour crystallized. “To launch the new event, we wanted a place that would appeal to alumni as well as students,” he says. “Nova Terra was perfect: hip and upscale, with good food.”

While many students enjoyed informally meeting with alumni, Jennifer Sherr ’03, student director of FRHOP, the RWJMS student outreach program, spent the time catching up with many of her third-year friends who are off doing rotations this year. “The idea of coming to Nova Terra really attracted people,” she says.

Harold L. Paz, MD, dean, spent the evening informally meeting with alumni, faculty, and students. “The evening was thoroughly enjoyable,” he says. “Everyone who attended was delighted to have an opportunity to relax and enjoy each other’s company.”

Dr. Krawet credits Daniel Caruso ’03, a member of the Alumni/Student Liaison Committee, with creating the Student/Alumni Happy Hour. “In the long term,” says Caruso, “we’re not just enhancing current student life, we’re growing future alumni who will want to make a difference to the students and to the school.”

— K.O’N.

Calendar:

Graduation Banquet
Class of 2001 (Piscataway)
May 21

Awards Dinner Dance
Class of 2001 RWJMS-Camden
May 21

RWJMS Convocation
May 22

UMDNJ Commencement
May 23

Student Clinician’s Ceremony
June 23

Alumni Association Breakfast
Class of 2001 Orientation
August 7

White Coat Ceremony
Class of 2001
August 10

Dean’s Golf Outing
Cranbury Golf Club
October 9

Mini Medical School
October 4–November 1

Alumni Reunion Weekend
October 19–21

Continuing Medical Education
3rd Annual Conference on Culturally Competent Care
Improving the Health of Our Emerging Minorities:
A Personal & Collective Responsibility
June 14, 2001

Annual Update on Urology Conference 2001:
Diagnosis, Treatment, and Management Strategies
June 23, 2001

Overcoming Barriers to Successful Pain Management
September 29, 2001

For more information about these or future conferences, contact the Center for Continuing Education at 732-237-7450.
Robert Wood Johnson University Medical School

ALUMNI NEWS

You’ve (Always) Got Mail! Email Forwarding Is Available to RWJMS Alumni

Neither snow nor sleet nor a change of ISPs shall stay your email from its appointed rounds.

Thanks to email forwarding, a new service from UMDNJ Academic Computing Services, many alumni from the Classes of 1996–2001 use their umdnj.edu address to forward email to an ISP (Internet Service Provider) of their choosing. With umdnj.edu as their central email forwarding address, they have uninterrupted access to their email no matter how many times they change ISPs.

Many people switch their home ISPs, from America Online to Microsoft Network or AT&T/WorldNet, for instance. Often new jobs bring new email addresses. Changing ISPs or addresses is easy. Email forwarding can make it equally easy to post the new address to everyone in one’s address book. Alumni who choose UMDNJ’s email forwarding option obtain a new email address or ISP to which their email will be forwarded. Any time they change their ISP or preferred email address, they notify Academic Computing Services, using the designated Web form, and their email continues uninterrupted.

A forgotten PIN (Personal Identification Number) is quickly retrieved by answering several simple questions.

In addition to convenience, there are other advantages to using RWJMS email forwarding. There is a certain status to using a dot-edu address, even if one’s home or office ISP is a dot-com. In addition, email forwarding makes it much easier to stay in touch with classmates and the Alumni Office, and vice versa.

Email forwarding was first offered to members of the Class of 2000. Many graduating students took advantage of the opportunity. Their response encouraged the university to include alumni from the Classes of 1996 to 2001.

“We look forward to extending this service to alumni in classes prior to 1996,” says Roberta Ribner, coordinator of alumni affairs. “We’ll be in touch with them soon about the details of setting up their own email-forwarding accounts.”
— K.O’N.

Call

KidsHealth Pediatricians Are Always at Your Fingertips

“The work I do is one part Benjamin Spock, one part Steven Spielberg — only the medium we use is the Internet,” says Neil Izenberg, MD ’76, associate professor of pediatrics at Thomas Jefferson Medical School and chief executive and founder of the Nemours Foundation’s Center for Children’s Health Media.

Recruited by the Nemours Foundation in 1992, Dr. Izenberg founded the center and developed it into a major producer of multimedia health resources for families.

With his lighthearted reference to Dr. Spock, Dr. Izenberg highlights the role of a new health care consumer: the family. Starting in the 1940s, Dr. Spock’s dog-eared Baby and Child Care would guide several generations of parents through the child-rearing years. Today, the Center for Children’s Health Media, along with its parent organization, the Nemours Foundation, takes a new millenium approach. Its goal is multimedia education of whole families — not just parents — to help them make informed decisions about a child’s physical and emotional health.

The center produces a comprehensive library of health-related media, used by parents, children, teens, and clinicians. Videos, print publications, and educational board games are available for distribution by hospitals, private physicians, and corporations. Dr. Izenberg has written or co-written much of the material. His award-winning educational videos for parents as well as children include How to Talk to Your Doctor, Your Child’s Anesthesia, and Late Breaking News, in which Muppet-like characters use humor to explain broken bones, casts, and cast care. The center has just published a new multi-volume encyclopedia for Scribner’s, Human Diseases and Conditions — the first of its kind directed toward text

BY KATE O’NEILL

— Robert Wood Johnson University Medical School

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By Kate O’Neill

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— Robert Wood Johnson University Medical School
A great report card

Dr. Izenberg invites and receives comments from kids and parents visiting the site. And he reads every one. He also uses response panels that critique the information and presentation on each site. “We’re not there to sell a product, this is not advertising in disguise,” he says. “It’s consumer-oriented, professionally presented information that must be usable by family members of all ages.”

The KidsHealth sites have received recognition ranging from user comments to national awards. The site elicited a 12-exclamation-point salute from an eight-year-old visitor. “Thank you for telling me what a help humans are!!!!!!!”

A young teen with scoliosis wrote, “I started to feel better knowing I’m not the only one with this problem. I don’t feel alone anymore.” At the other end of the family order, Nernm® Jean Amour Polly, author of Internet Kids and Family Yellow Pages, called KidsHealth.org “the best health site on the Net for and about kids.”

Hard work earns a great report card

Robert WoodJohnson — the first of its kind in the nation. “We’re excited about the outcome of Dr. Izenberg’s work,” says Dr. Izenberg. Last fall a new sibling, TeenHealth.org, joined the KidsHealth family. Dr. Izenberg also served as founding editor of KidsHealth at the American Medical Association, which for three years was part of the AMA Web site. “Health is one of the most popular topics on the Internet,” he says. “To many of us, the Web still seems amazing, but the generation of kids and their parents take it for granted. Parents arrive at appointments with sheaves of downloaded information.”

The award-winning KidsHealth site contains over a thousand original articles. It averages 1.5 million daily hits and 140,000 page views. “Because the Web is a consumer’s finger-tips 24 hours a day, seven days a week, it’s ideally suited to our mission,” says Dr. Izenberg. “Where else can a family find interactive, up-to-date, medically reviewed information?”

The pages illustrated with sound-filled animations about the body’s inner workings are irresistible to children — and perhaps for many parents as well. Adults looking for in-depth, up-to-the-minute information can go to “News Parents Can Use.” This page takes important pediatric research from medical journals and translates it into clear abstracts for the lay reader.

A great report card

Looking for a Specialist?

Our Physician Referral Service can help you:

• Contact one of our specialists and ensure that a physician returns your call within 90 minutes
• Look up physician insurance plan participation
• Schedule an appointment
• Help you with a specific referral
• Provide you with office location(s) and hours
• Give you contact information, registration information, and suggestions on parking

Contents:

• Profiles and contact information for each primary care and specialist physician
• Information on a physician’s academic background and advanced training
• Maps to help your patients find us

Referral coordinators can be reached toll free at 1-877-UMG-DOCS (1-877-864-3627) and are available Monday through Friday from 8:00 am to 6:00 pm.

For a free copy of the 2001-2002 Referring Physicians Guide, please provide us with your name, organization, and mailing address.

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Robert Wood Johnson University Medical Group
Alte: Referring Physicians Guide Administrator
123 Pennsylvania Street, Suite 710
New Brunswick, N.J. 08901
Fax: (732) 235-5453
E-Mail: jwile@umdnj.edu

Toll-free... 1-877-UMG-DOCS
https://www.umdnj.edu/1-877-864-3627
Their mother’s unflinchingly positive outlook left no doubt in their minds: their lives are filled with good fortune. Now they want to share it with others.

All the Trans graduated from Paramus (N.J.) High School and Rutgers University. Diem Quynh Tran, the eldest, has become a retail pharmacist; her three siblings are all at Robert Wood Johnson Medical School. Ngoc Quynh Tran, MD ’99, is a resident in the OB/GYN residency program. Minh Chau Tran will graduate in June 2001 with an MD/MPH degree. Bao Chau Tran is a member of the class of 2004.

Initially, says Ngoc Quynh, she was on track to do pediatrics, but she changed her mind. She found that “most of pediatrics is dealing with parents, and it’s so sad when anything bad happens to a child.” Obstetrics, she finds, combines her love of surgery with a generally happy time in people’s lives. Her new dream is to teach OB/GYN in a hospital setting. She would also like to be in private practice with her brother Minh Chau, who plans on a residency in anesthesiology and a career focused on pain management. In July, Ngoc Quynh will marry James Hoppe, MD ’97, in a ceremony that will blend Vietnamese and American traditions.

“We are so lucky to be at RWJMS,” says Minh Chau, whose love of the school should be familiar to alumni who hear from him during Phonathons. Roberta Ribner, coordinator of alumni affairs, says, “Minh Chau is a Phonathon genius! He is absolutely one of our top fund raisers because, in his quiet way, he conveys so much enthusiasm for the medical school and the alumni loan and scholarship programs.”

Bao Chau Tran is the youngest of the children, donned his white coat last September. At the White Coat Ceremony, he heard a familiar theme in the welcoming words of David Seiden, PhD, professor of neuroscience and cell biology and associate dean for admissions and student affairs. Dr. Seiden said there is always a need for people with a medical education because, “in many cases, you not only earn the privilege, you were given the privilege by good fortune.”

“The Trans’ story could be told as one of extreme hardship. But at all times, Mrs. Ngo kept telling the children how lucky they were. Their mother’s unflinchingly positive outlook left no doubt in their minds: their lives are filled with good fortune. Now they want to share it with others.”

By Kate O’Neill
The Alumni
Association Honor Roll
of Donors

2000 Annual Fund Total: $167,173

Contributions to the Annual Fund, the primary fund raising campaign of the Robert Wood Johnson Medical School Alumni Association, have increased dramatically in the past year. In 2000, alumni made contributions totaling $167,173, an increase of 17.6 percent over the total for the 1999 Annual Fund.

Over the last 18 years, the Alumni Association proudly reports, it has awarded more than $1 million in student scholarships and loans. For the upcoming 2001–2002 academic year, the Board of Trustees has committed $110,000 in scholarships and low-interest loans, including a new $20,000-per-academic year scholarship for an incoming student.

It was especially rewarding this year to have the opportunity to participate in supporting the Richard Harvey Professorship in Innovative Teaching, and the fund raising campaign for this new professorship in honor of Dr. Harvey yielded $163,500 from our alumni.

Dean’s Academy
($5,000 or more)
Ernest S. Buzac, MD ’77
Robert Wood Johnson Medical School Alumni Association

University Club
($2,000 to $4,999)
Paul A. Beighl, MD ’81
Joseph H. Kahan, MD ’79, & Nancy Nickberg Kahan, MD ’79
Robert C. Mackow, MD ’79
Thomas J. Nordstrom, MD ’78
Edward P. Rashi, MD ’82
The Wayen Charitable Foundation
Patrick F. Zaccour, MD ’73

Cedarside Club
($1,000 to $1,999)
Neal F. Collins, MD ’81
David E. Constent, MD ’77
Thomas R. Easell, MD ’86
Richard W. Hartman, MD ’78, & Diana L. Lendleburg, MD ’72
Mary J. Kolodinsky, MD ’84
Karyn J. Israel, MD ’84
Terrance H. Jones, MD ’76
Daniel Y. Kao, MD ’80
Se Duc Kim, MD ’81
Eaton M. Laing, MD ’90
Bernd Lenz, MD ’85
Marc E. Lieberman, MD ’81
Bruce J. Quinn, MD ’93
Stephen C. Rubin, MD ’74
Donald J. Rose, MD ’90
Nancy Serra, MD ’88
Francisco E. Smolicky, MD ’81
Luis Villa, MD ’88
Robert R. Wall, MD ’77
Steven J. Zuckerman, MD ’81

Founders Club
($500 to $999)
Sofia H. Anthony, MD ’77
Dorel Armstrong, MD ’74
Glora A. Badmann, MD ’72
Andrew Balossi, MD ’74
Barbara A. Banetz, MD ’87
Mark A. Bloomberg, MD ’74
William P. Brootherton, MD ’76
Jeffrey N. Bruce, MD ’83
F. Charles Broome, MD ’80
Debra A. Caprani, MD ’85
Jay A. Cohen, MD ’75
Joseph F. Costabile, MD ’86
Kevin Davey, MD ’85
Jennifer Delikat, MD ’81
Nicholas J. Dudas, MD ’86
Frederick J. Duffy, Jr., MD ’48
Robert Fink, MD ’74
Stephen M. Folten, MD ’76
Eduardo E. Fernandez, MD ’89
Robert R. Ford, MD ’83
Robert S. Freid, MD ’83
Doreid R. Grusman, MD ’85
Jay A. Groves, MD ’74
Bernd F. Heaton, MD ’75
Carolee Hoestrom, MD ’91
Elisabeth A. Hosmer, MD ’80
Saleem Hussain, MD ’90
Leonard A. Jakubitis, MD ’94
Michael A. Kavanagh, MD ’79
Greggory J. Kaufman, MD ’86
Alfred S. Kases, MD ’76
David Kirschenbaum, MD ’86
Predina P. Kline, MD ’78
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Darrell R. Kurnik, MD ’72
Jose C. Labor, MD ’73
Robert A. Lattimer, MD ’73
Katherine T. Levol, MD ’84
Hank Lobos, MD ’81
Barbara A. Martens, MD ’82
Lloyd A. McPherson, MD ’82
David C. Minton, MD ’88
John C. Morgenstern, MD ’74
Peter J. Pappas, MD ’87
Anne S. Pepper, MD ’89
Mark A. Rimawi, MD ’74
Linda R. Ross, MD ’74
Michael A. Rosenbarg, MD ’87
Robert C. Rothberg, MD ’89
Stephen M. Schmidt, MD ’82
Michael S. Sofman, MD ’81
Orysa N. Tresnakowski, MD ’90
James W. Turner, MD ’81
Nayalina A. Turner, MD ’91
William M. Ussery, MD ’81
Mary A. Vagianos, MD ’81
William A. Wainwright, MD ’74
Joseph Wu, MD ’83
Nancy E. Weissbach, MD ’82
David A. Wold, MD ’75
Mary C. Yankowsky, MD ’94
Joseph C. Yarm, MD ’86
Scott R. Zage, MD ’82
Kaneh J. Zemek, MD ’84
Greggory Zollner, MD ’81
& Paula Grasso Zollner, MD ’80
Patrons Club
($250 to $499)
Lawrence A. Adler, MD ’78
Hjalte T. Anderson, MD ’77
Constance Andenkord, MD ’87
Gary J. Balady, MD ’79
Frank E. Barber, MD ’77
Scott F. Brown, MD ’72
Stephen M. Bloomfield, MD ’90
Catherine M. Boshart, MD ’92
Mamie S. Bowers, MD ’85
Claude A. Brachfeld, MD ’82

Robert Wood Johnson Medical School Alumni Association

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Jersey Shore Medical Center • Medical Center of Ocean County
Riverview Medical Center

TWIPLA Med/ev 01/fin/fcr pdf 5/9/01 5:49 PM Page 54
Dear RWJMS Alumni Association: 

I am currently a third-year medical student doing my clinical years at the Camden campus. This letter is to thank you for choosing me as a recipient of one of the Alumni Association’s Low-income scholarship. I am very much appreciate the support and acknowledgment—every little bit helps! I also wanted to mention that I participated in numerous Phonathon drives during my first two years. In addition, I worked closely with Roberta Ribner to help organize the First Alumni Association: This was a tremendous success, and I want to thank the Alumni Association for working hard to support and encourage medical students. I think that the Alumni Association and RWJMS medical students have established a really wonderful working relationship to strengthen and support each other’s efforts. I hope that this will continue.

Sincerely, 
Carrie B. Rabenstein 
Class of 2002

Robert Wood Johnson Medical School
Christopher Derivaux
grows up to do cardiac surgery. He writes: “Not only am I still cracking jokes but my wife, Ruth, still puts up with them!”

Christopher Derivaux
completed his surgical training at the University of Michigan and is currently doing a cardiothoracic fellowship at New York University. In 1999, and backpacking through Scandinavia and Europe. He is the proud father of a seven-month-old boy.

Christopher Derivaux
In Memoriam:
Christopher Derivaux, 29, a 3rd-year resident in the Department of Thoracic Surgery at the University of Pennsylvania, died in April 2000.

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Health services research is an important, yet misunderstood, component of medical research. Both the current and past presidents have urged Congress to appropriate significant increases in the budget for the National Institutes of Health (NIH). However, despite its growing importance, the health services research community will see little of this money.

A principal reason for the dissonance between the need for such research and the amount of funds devoted to it is the fact that so few, even in the medical community, understand what is meant by the notion of health services research. Even among the NIH institutes, there is often great disagreement about what is involved in this discipline and its value. Often, staff members argue that it is simply an extension of clinical effectiveness research or believe that, since it lacks the exactitude of controlled trials or basic science, it has little utility in the scientific community.

What do we mean by the term health services research? The fact is that it encompasses a wide range of studies. Briefly, health services research can be summarized as:

1. Effectiveness research, which involves moving from the security of the laboratory or controlled setting into real-world situations. Although this presents real methodological questions, it also permits us to validate and replicate findings in situations other than under the most optimum of conditions.

2. Infrastructure research, which examines the impact of the organization, delivery, and financing of services on a given intervention or on a mode of practice. For example, it allows us to look at how changes such as managed care or cuts in Medicare funding affect the outcomes of medical-care delivery.

3. Epidemiological research, which assesses how the access to and outcomes of treatment may be different, based upon such variables as race or ethnicity, socioeconomic status, and age. As the health system continues to undergo dramatic changes, these issues become increasingly important.

4. Cost research, which addresses such questions as how much a service or series of services cost, whether they are cost-effective and cost beneficial, and what an illness like substance abuse is costing the nation.

In an environment where we search for greater understanding of the genetic and bio-physiological markers of diseases and their treatments, one might ask why we should worry about such issues as costs or access. Should we not find the cures for such problems as cancer, AIDS, heart disease, and schizophrenia before we worry about how to organize, finance, and deliver them? While such arguments may seem spurious to many...

Continued on page 43

Jeffrey C. Merrill

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**Health Services Research: What Is It and Why Is It So Critical an Adjunct to Biomedical Research?**

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**Schedule of Events**

- **Friday, October 19:**
  - Cocktail Reception
  - Clinical Academic Building, New Brunswick
  - Invited speaker: Congressman Rush Holt
  - 12th Congressional District, New Jersey

- **Saturday, October 20:**
  - Morning Continuing Medical Education Conference
  - "Breakthroughs in Medicine: New Discoveries and Applications to Clinical Care at RWJMS" Clinical Academic Building, New Brunswick
  - Afternoon Tours
  - Piscataway and New Brunswick campuses
  - Gala Dinner Dance
  - Honoring the Following Anniversary Classes:
    - 25th: 1975, 1976
    - 15th: 1985, 1986
    - 10th: 1990, 1991
  - Brunswick Hilton, East Brunswick

- **Sunday, October 21:**
  - Alumni Brunch
  - Brunswick Hilton

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**For More Information Contact:**

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Email: ribnerrs@umdnj.edu
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