UPCOMING RFA MEETING

“The History of the Delaware-Raritan Canal”

Ms. Vicki Chirco
Resource Interpretive Specialist
Delaware and Raritan Canal State Park

Friday, September 23, 2011
12:00 p.m. – 1:30 p.m.
Dean’s Conference Room, Piscataway

Ms. Chirco will present the history of the Delaware-Raritan Canal from its creation in 1834 as a waterway for cargo vessels to the present time. Today it serves both as a water supply system and a venue for recreation. It is entered on the National Register of Historic Places and has over 60 miles of canal and a narrow strip of land on both banks as part of a state park.

All current and retired faculty and staff are welcome to attend. Lunch will be available, and contributions for the lunch may be made at the meeting. Please RSVP to John Lenard (732-572-5023; lenard@umdnj.edu) by Monday, September 19 if you plan to attend and wish to reserve a lunch.

Prior to the talk, a brief business meeting will be held. Nominations and elections for the president, vice-president, secretary, one opening on the Election and Membership Committee and three openings on the Program Committee will be conducted.
The intersections among public health, social justice, environmental quality, water and food security, energy demands, climate change, and global population growth represent major challenges for society----challenges that are upon us now, no longer in the future. In recent years we have focused our research at some of these intersections grappling with topics as diverse as effects of climate change on wildlife, risks and benefits of eating fish, environmental justice, and health and environmental consequences of energy options, the latter culminating in a book, Stakeholders and Scientists (J. Burger ed).1

Pessimists tell us that we have run out of choices. Optimists tell us we don’t need to worry about choices. We don’t have a good name for the middle ground.

It is common today to hear about carbon footprints----how many acres of South American land it takes to feed one of us for a day. But there are other footprints of concern such as space. Different energy sources have different spatial footprints from relatively small in the case of geothermal to huge in the case of solar panel fields, biomass plantations, or hydroelectric dams and reservoirs. We had planned our trip to Iceland in January, before the Fukushima disaster cast a pall on expansion of nuclear energy. By the end of 2010 there was indeed a nuclear energy renaissance brewing with guaranteed loans, approval of new reactor designs, and many applications for new reactor sites (after a 25 year post-Chernobyl hiatus). Yet Iceland and a few other countries were nuclear-free by policy.

As middle-grounders, we chose to go to Iceland, a unique country with a seeming abundance of energy, touted as “renewable” with much of it still untapped. We wanted to see how Iceland selected among its options and particularly learn about ecologic and spatial issues of geothermal electric generation. And we had never been there.

Iceland is 4/5 the size of New York or 5 times the size of New Jersey with only 320,000 people. It is officially part of Europe, and in recent years it has contributed grandly to both Europe’s
financial crisis and its volcanic air pollution. Iceland has a unique secret—it is slowly being pulled apart as the North American and European tectonic plates separate at the rate of about 2 cm per year. Tourists can step from one continent to the other in a second—literally.

**Geothermal Energy**

It is this very instability underlying Iceland that accounts for its abundance of geothermal activity, while the uplifted mountain ranges, though not towering, are cut by river valleys dammed for electricity. Iceland’s capital city, Reykjavik, was built over a thermal field that provided hot water first for laundry and bathing, and later for home heating. All towns we visited in Iceland had a public outdoor swimming pool heated year round by natural hot springs.

But until about 60 years ago Iceland’s geothermal fields were mainly a tourist attraction boasting Europe’s most impressive geysers (paltry compared to Yellowstone) and most extensive hot springs. Hot springs provided water for some domestic use, but electricity was generated mainly by hydroelectric and heating largely relied on coal.

With only 320,000 people Iceland’s domestic energy use is relatively small, although the country is planning for great industrial growth incentivized by cheap (nationally subsidized) electricity. Today Iceland relies mainly on hydroelectric power, with little use of fossil fuel (other than transport), and no nuclear. In the past 50 years, Iceland has begun to tap its underground geothermal fields, building more and more plants to exploit naturally occurring steam to turn turbines and generate electricity. We had found this a very attractive option in southern California, although it has not seemed to alleviate that state’s energy crisis. So it was interesting to see Iceland putting geothermal energy to use on a rather different and growing scale.

Italy and New Zealand were the first countries to effectively exploit geothermal energy. Although there is great heat under the earth (circa 5000°C at the Earth’s core), the usable heat accessible to the surface is very variable around the world. Theoretically, one could tap underground steam almost anywhere by drilling deeply enough, but in Iceland (and a few other places including California), usable steam lies only about 2 km below the surface.

**Geothermal Electric Generation**

In principle, geothermal electric generation seems simple enough-----dig a hole, channel the escaping steam to a turbine which turns a generator and voilá. Unlike California, the geothermal electric plants in Iceland welcomed visitors and even had museums set up to illustrate both the principles and local practices of harnessing geothermal energy. We had arranged to meet with geologists and plant engineers to discuss how geothermal energy was developed and how potential environmental consequences were managed. The first plant we visited in southwestern Iceland was close to the ocean and was operated by a private utility (a rarity we later discovered). An enthusiastic guide explained the structure and operations of the plant and walked us around the museum, pointing out lots of statistics about temperatures and pressures and so forth.

This plant was cooled by seawater which was pumped from the ocean into the jacket of the condenser which allowed the spent steam to be returned to the earth, while the heated seawater flowed back to the ocean. We were assured that the volume and temperature of the latter did not constitute “thermal pollution.” We prided ourselves on understanding the way that the input to
the plant had to separate the steam from the water that it carried, how steam was conditioned and introduced to the turbine, and later how all was condensed. It was fascinating that although the principles remained the same, the practices were different at the other plants that we visited. Different technological solutions were needed to accommodate different geologic structures as well as different distributional needs.

**Geothermal Heat Distribution**

Although we arrived in Iceland with a basic understanding of different energy technologies, we got several surprises. One surprise was that some of the geothermal plants were mainly distributing only hot water, using the electricity they generated mainly internally to run the heat exchangers and circulate the water to rural households, small towns, or cities. The underground steam and water with all its odoriferous gases was used in a counter-current heat-exchanger to heat fresh water to suitable temperatures (about 80°C). The outgoing water was pumped to towns many miles away and then recycled back to the plant.

Surprisingly, although most of the power plants are publicly owned and controlled by the local municipalities served by the resource, there are some private geothermal companies. The plants in one region are interconnected (essentially feeding electricity into a grid). The plants are well spaced and are not competing with one another for steam. We found this concept complex when a somewhat jingoistic plant operator told us that in California, companies try to “steal steam” from one another by drilling laterally. “We don’t have that problem here,” he assured us referring to the public ownership.

We were somewhat surprised to learn that a century ago, the sky over Reykjavik was darkened by air pollution from coal-powered heating, but that once the locally available hot water was tapped for heating homes and buildings throughout the city, the skies cleared. The sky was indeed brilliant blue and hazeless on some days of our trip. We recalled that on visits to various European art museums, almost all of the paintings from the Middle Ages onward showed darkened skies which we believe represented smoke and air pollution (not just artistic license with clouds).

**Clean and Renewable?**

Another surprise was that geothermal energy is not, strictly speaking, carbon neutral. Depending on the underground geology there may be calcium carbonate strata, which release carbon dioxide into the steam flow. This is a problem for some of the Iceland plants. The carbon dioxide is released to the atmosphere along with the various sulfur and nitrogen gases (hydrogen sulfide being the main concern) unless a scrubber is used. This remains a concern of the geothermal industry, and one novel but somewhat scary suggestion is to pump the CO₂ back into the ground.

But the main surprise was that the term “renewable,” which we throw around with abandon, means different things under different circumstances. It’s pretty clear that oil and coal are not renewable----at least on the scale of millions of years. Hydropower renews itself on an annual basis through the water cycle which hasn’t changed much since we learned it in high school science (but this might be modified by climate change). We had thought of geothermal as purely “renewable,” drawing on the unlimited heat at the Earth’s core, but we learned at each of the plants that one can use up the steam accessible to a particular bore hole, over a period of a few
years. And it can take about 30 years before water from the surface percolates down to be heated by the hot rock and turned into steam. One solution is to make many bore holes. Drilling these holes is very expensive and some of them turn up dry. At the last plant we visited, we pinned down that they had 50 bore holes, of which only about a dozen were being tapped at any one time. Instead to avert a steam shortage, part of the energy generated was used to pump water (condensed steam) back down into the aquifer—not exactly at the source, thus speeding up the natural “renewable” process, at some cost. None of the technical people we met with could satisfactorily explain how the pumps could deal with the natural back pressure—pushing water into rock, but they agreed that this pumping required energy. We concluded that geothermal energy is “renewable with maintenance.”

Even in Iceland, tapping their abundant, quasi-renewable energy is not without controversy. Iceland’s economy fared poorly a few years ago, and the federal government is trying to expand electric production to attract industries—-with some success. A relatively new Iceland Alcoa plant is one of the largest aluminum production facilities in the world. Despite the recent economic crisis in the country, there was much public outcry against both the expenditure and the environmental and aesthetic costs of building a huge dam followed by a huge factory. ALCOA responded by funding a major tree-planting initiative. We didn’t hear if all is forgiven.

Even as a microcosm of successful reliance on more or less clean and renewable energy, more than sufficient for its populace, Iceland faces familiar controversies. The people we spoke with at the plants were all part of the “industry”, either public or private, but each shed some light on controversial issues. And each left us with the impression that Iceland and Icelanders have above average concern over the quality of life (and above average interest in bringing in tourists to share it). The plants all emphasized steps they were taking to protect their immediate environment.

**Whale Watching and “Harvesting”**

On a separate note, another Iceland environmental controversy we saw first hand was between the Whale Watching tourist industry and the Whale “Harvest” Industry. Iceland is one of only three countries (with Norway and Japan) to continue to kill whales commercially (Japan contends that the 2000 whales it kills annually are for “research”). In Iceland whale watching tourism is a growing source of revenue and live whales are its resource. Iceland whale meat is mainly exported to Japan or sold in restaurants, where it is advertised as “traditional Iceland food,” along side Puffin breast and Guillemot eggs. One whale scientist assured us that very few Icelandic people eat whale meat, and that it is not a tradition at all. He added accusingly that gullible tourists account for as much as 40% of the whale take. We made sure not to order whale meat at traditional restaurants—-savoring the local fresh fish instead.

At the same time that researchers and public health professionals are making the case to reduce exposures to pesticides in the US, use of pesticides and human exposures are increasing in developing countries around the world. I began to work in Thailand four years ago to develop a collaborative project with Dr. Wattasit Siriwong from the College of Public Health Sciences at Chulalongkorn University in Bangkok. Just 45 minutes outside of Bangkok, farmers live along a canal system built at the turn of the last century by King Rama V. The King’s goal was to provide a system of irrigation klongs (Thai for canal) to insure farming would continue close to Bangkok. These canals and the farms they support have changed little since that time with one exception, the exponential increase in use of pesticides to improve rice and vegetable production. In the past organochlorines such as DDT were used and although these have been banned, they are still available in local farm supply stores. Currently, organophosphates and pyrethroids are in wide use with farmers applying them largely without the use of protective equipment. Because of the climate, families live in open houses alongside the fields they farm. Children play in the fields and pesticides and the equipment used to spray pesticides are often stored next to the areas where the family eats and children play. We are working in collaboration with Rutgers, Chulalongkorn University and a community group from Rangsit, Thailand to understand the health effects of pesticide exposure, to lower usage of pesticides, and to promote safe use of pesticides when they are needed.

The Neurobehavioral Health Effects of Pesticide Exposures

The National Institutes of Health Fogarty International Center supports research capacity building in developing countries. Through this mechanism, Dr. Mark Robson, dean of agricultural and urban programs, Rutgers University, developed an International Training and Research in Environmental and Occupational Health Center with Chulalongkorn University to train graduate students in the ecologic and human health risks of pesticide use, analytic techniques to detect pesticides in the environment, and to educate farmers about safe farming practices. Our grant, through the Fogarty Brain Disorders in the Developing World mechanism, is funded by the National Institutes of Environmental Health Sciences and focuses on the neurobehavioral health effects of pesticide exposures in 6 to 8 year old children. Even though we know that the developing organism is uniquely susceptible to neurotoxicants such as pesticides, few studies have evaluated how pesticides affect the motor and cognitive abilities of children. Moreover, public health scientists in Thailand have not been trained to evaluate human health effects of neurotoxicant exposures.

During our two year collaboration, we are training public health graduate students in questionnaire methods and behavioral testing to improve their ability to conduct health effects research. At the same time, we are testing 50 rural Thai children during the growing season when pesticide exposure is expected to be high and during the hot season when pesticide use is relatively lower. The same children are being tested every six months during an 18 month
period. We are using a combination of questionnaires, in home interviews, and computer tests to evaluate each child’s ability to maintain their attention, learn and remember new information, and motor coordination. We are also evaluating their home environments to determine the learning resources available to the child and to evaluate their level of pesticide exposure. Each child’s exposure is documented through analysis of hand wipes, water samples, and a suite of urinary metabolites associated with organophosphates and pyrethroids. We are also asking about behaviors associated with attention deficit hyperactivity disorder, a child behavioral problem gaining growing recognition in Thailand. Graduate students from Chulalongkorn University perform all of the testing and will be publishing the results of the study with us. All samples are collected and analyzed by Thai scientists to promote their capacity for performing human studies and to assist the Ministry of Public Health in meeting international laboratory standards. We will be working with the Rangsit community board to provide feedback about the results of our study and to help them find ways to protect themselves, their children, and to reduce pesticide use.

THE RWJMS OFFICE OF GLOBAL HEALTH

Ms. Rachel Werner Lichtenberg
Administrative Assistant, Office of Global Health

The Office of Global Health (OGH) at Robert Wood Johnson Medical School, under the direction of Javier Escobar MD, MSc, associate dean for global health, and with the support and encouragement of Peter S. Amenta, MD, PhD, dean, has contributed to the development of a global health focus in the medical education for RWJMS students. The OGH, which has grown significantly since its founding in 2008, has a wide variety of activities that cover many aspects of medical education including:

- The summer program for MSI students
- The Global Health Elective for MSIII and MSIV students
- The Independent Project that is required for all RWJMS students
- The Annual Global Health Fair
- The Global Health Travel Stipends for RWJMS students

Prior to their admittance to RWJMS, prospective students contact the office to talk with Dr. Escobar about how to best implement global health studies into their curriculum. The office has become a center for students and faculty to work together to bring awareness to global health matters. In fact, this past academic year, the office advised close to 100 medical students about options for global health travels and special projects related to global health.

The OGH works with medical students to help tailor the best program for each student. Many students travel during the summer between their MS I and MS II year on rotations abroad. Typically, students will pick a program that helps them with their Medical Spanish or other languages of interest. Especially in New Jersey it is vitally important to have at least a rudimentary knowledge of Spanish to interact with their patients and provide the best health care possible for each patient. In fact, many students take Medical Spanish and Medical Mandarin classes now being offered at RWJMS prior to their trips abroad.
Students in their MS III and MS IV years also choose to travel abroad through programs offered by the OGH – through the Global Health Elective. This newer elective has seen tremendous interest from the medical students and 14 students completed the elective in academic year 2010-2011. Additionally, students can choose to complete their Independent Project (now a requirement for all RWJMS students) through the Office of Global Health. Students complete 160 hours of scholarly activity - in this case, relating to global health - and provide a scholarly project as their final deliverable. Upwards of 15 students recently completed this requirement with the office, and it is anticipated that this number will double in the following year due to growing interest from the medical students.

The annual Global Health Fair (this year to be held on December 1, 2011), showcases a poster session with scholarly deliverables or travelogues from students who participated in Global Health rotations. Faculty and students from the other seven UMDNJ schools will also participate in this event. The office helps to fund RWJMS students with modest stipends each year through the generous support of funding groups that include: the Association of Families and Friends, The Center for Health Families and Cultural Diversity, the Merrill Fund and the RN Divgi Fund among others. RWJMS students are asked to present their posters at the Global Health Fair as a requirement for receiving this travel stipend. The Global Health Fair motivates other students, in particular the MS I class, to pursue their own global health experiences whether it be during the MS I summer or as an MS III or MS IV student.

The office also helps fund student groups offering Global Health events throughout the year. This previous year, the OGH helped sponsor events for both the American Medical Student Association (AMSA) and the International Health Interest Group (IHIG).

**Future Plans of the Office of Global Health**

As global health awareness constantly expands, so does the office. Dr. Escobar, along with other RWJMS faculty on the Global Health Steering Committee (a global health advisory group consisting of over 24 members including: RWJMS faculty, residents, students, and staff) is working to collaborate with other medical institutions abroad. Collaborations are being developed between RWJMS and medical schools in countries which include: Spain, Peru, Ghana, the Republic of China and Taiwan. For example, Karen Lin, MD, program director, RWJMS – Family Medicine Residency, is collaborating with medical schools in both the Republic of China and Taiwan to send RWJMS students abroad. Students will travel with Dr. Lin during the summer of 2011 to Taiwan for a comprehensive rotation which includes exposure to Medical Mandarin, as well as observing the use of both eastern and western medicine practices in the treatment of patients. Most of these students also attended Dr. Lin’s Medical Mandarin class last year to help train for this experience.

*With so many irons in the fire, does Dr. Escobar have a vision for the future of the Global Health Office at RWJMS? The answer is yes. He would like every medical student to go abroad after their first year, and all internal medicine, psychiatry and family medicine residents to go to other countries for at least one or two months. He wants more students to take the Medical Spanish course offered through his office so they will be more conversant abroad, but also more effective medical practitioners at home. And he is developing a global health curriculum beyond the first and third year electives offered.*
now, as well as working to establish a Master’s degree in this field with UMDNJ’s School of Public Health.

- “Learning the Ropes in Faraway Lands” by Eve Jacobs, UMDNJ Magazine, Fall/Winter 2010

As the community changes and becomes evermore diverse, the Office of Global Health along with a growing dedication from faculty at the medical school (over 15 faculty are noted with strong activity in global health initiatives), RWJMS students are set to raise the bar of demand for medical students everywhere. RWJMS medical students will help build the future of global health awareness in the practice of medicine, one that leaves no patient without an opportunity for the best medical care that can be provided by its doctors.

Please visit http://rwjms.umdnj.edu/global_health/ for more information about the Office of Global Health. Contact escobaja@umdnj.edu if you would like to contribute your time to global health issues at the Office of Global Health.

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RWJMS RFA BUSINESS MEETING – April 29, 2011

Eckhard Kemmann welcomed Bob Shelden, the first RFA President, to the April 29th meeting of the RWJMS Retired Faculty Association (RFA) at the Dean’s Conference Room in Piscataway. Among Bob’s new activities since retiring, he was elected president of the local homeowner's association in Dunedin, Florida.

ZIMMERLI ART MUSEUM TOUR

Eckhard announced that RFA members are invited to attend a guided tour of the Zimmerli Art Museum in New Brunswick on Saturday, September 10, 2011 at 12:15 p.m. Visitors will be given a comprehensive tour of the Zimmerli’s sculpture collections, from ancient Greek and Roman works to modern masterpieces by contemporary artists. Highlights of the tour include sculptures by Ruth Vollmer, Auguste Rodin, George Segal and Alan Saret. The tour price is $10 for adults and $9 for seniors (age 65+) which is payable at the time of the tour. The tour lasts approximately one hour. In order to ensure that enough docents will be on hand, it is desirable that you register for the tour by contacting Paul Manowitz (email: manowitz@umdnj.edu).

Bylaws Amendment; Application for Public Charity Status

The RFA has been incorporated in New Jersey as the “Robert Wood Johnson Retired Faculty Association, A NJ Nonprofit Corporation.” Eckhard has applied to the IRS for non-profit status of the RFA as a public charity.
As a required step toward non-profit status, the following bylaws amendment was presented for the RFA’s consideration:

“Upon the dissolution of the RWJMS Retired Faculty Association, incorporated as the Robert Wood Johnson Retired Faculty Association, NJ Nonprofit Corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by order of the Superior Court of the State of New Jersey in the County of Middlesex exclusively for the purpose of medical education and research, or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.”

Following the meeting, the ballot containing the amendment was sent via email to the dues paying members of the RFA for their consideration. Of the 70 emails sent, 41 replies were received, all approving the amendment.

*Treasurer’s Report; RFA Directory*

John Lenard reported that there is approximately $1,800 in the RFA treasury.

John wrote the following email on February 21, 2011: “…I just got a note from Herb Geller, asking whether we could put out a RFA directory…. John”

Following this meeting, the RFA Executive Committee approved the statement shown in the box below.

**RFA DIRECTORY**

A directory of RFA members is being prepared, including addresses, phone numbers and email addresses, to be sent to members who request it. If you would like any or all of your information deleted from this directory, please let us know before October 1, 2011. If you wish to receive a directory after that date, please let us know. The directory will be sent only to RFA members upon request.

*Nominations and Elections*

At the RFA meeting to be held on Friday, September 23, there will be nominations and elections for the following RFA positions:

- President two-year term
- Vice-President one-year term
- Secretary one-year term
- Treasurer two-year term
- Election and Membership Committee, one opening, two-year term
- Program Committee, three openings, one one-year term, two two-year terms
The current officers and committee members are shown in the table below:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Length of Tenure</th>
<th>Date of Initial Appt./Election</th>
<th>End of Term</th>
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<tr>
<td>Eckhard Kemmann</td>
<td>President</td>
<td>Two-year</td>
<td>Feb. 19, ‘10</td>
<td>Dec. 31, '11</td>
</tr>
<tr>
<td>Michael Gallo</td>
<td>Vice-President</td>
<td>Two-year</td>
<td>Feb. 19, ‘10</td>
<td>Dec. 31, '11</td>
</tr>
<tr>
<td>Paul Manowitz</td>
<td>Secretary</td>
<td>Two-year</td>
<td>Feb. 19, ‘10</td>
<td>Dec. 31, '11</td>
</tr>
<tr>
<td>John Lenard</td>
<td>Treasurer</td>
<td>One + 1/2 year</td>
<td>April 30, ‘10</td>
<td>Dec. 31, '11</td>
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Election and Membership Committee (two-year term)

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<th>Title</th>
<th>Length of tenure</th>
<th>Date of Initial Election</th>
<th>End of Term</th>
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<tr>
<td>David Riley</td>
<td>Chair</td>
<td>Two-year</td>
<td>Jan. '11</td>
<td>Dec. 31, '12</td>
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<tr>
<td>Michael Gochfeld</td>
<td>Member</td>
<td>One-year</td>
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<td>Dec. 31, '11</td>
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<tr>
<td>Mary Swigard</td>
<td>Member</td>
<td>Two-year</td>
<td>&quot;</td>
<td>Dec. 31, '12</td>
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Program Committee (two-year term)

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<th>Name</th>
<th>Title</th>
<th>Length of tenure</th>
<th>Date of Initial Election</th>
<th>End of Term</th>
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<tr>
<td>Victor Stollar</td>
<td>Chair</td>
<td>Two-year</td>
<td>App. May ‘09</td>
<td>Dec. 31, '11</td>
</tr>
<tr>
<td>Michael Gochfeld</td>
<td>Member</td>
<td>Two-year</td>
<td>Feb. 19, ‘10</td>
<td>&quot;</td>
</tr>
<tr>
<td>Sarah Hitchcock-Degregori</td>
<td>Member</td>
<td>Two-year</td>
<td>Jan. ‘11</td>
<td>Dec. 31, '12</td>
</tr>
<tr>
<td>Nancy Stevenson</td>
<td>Member</td>
<td>Two-year</td>
<td>Feb. 19, ‘10</td>
<td>Dec. 31, '11</td>
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NEWS FROM NEAR

The Governor’s UMDNJ Advisory Committee

By the time this edition of the RFA newsletter has been distributed, the report of the UMDNJ Advisory Committee will have been issued. Among its responsibilities, the Advisory Committee, which was created by Executive Order of Governor Chris Christie, was charged to examine and provide recommendations concerning whether Robert Wood Johnson Medical School and the School of Public Health should be merged with Rutgers University at the New Brunswick-Piscataway campuses. The committee’s report is scheduled for release by September 1, 2011.

Proposed Abolishment of Two RWJMS Basic Science Departments

Peter S. Amenta, MD, PhD, dean, and Terri Kinzy, PhD, interim senior associate dean for research, presented a proposal at a Faculty Forum on July 21, 2011 for the dissolution of two
basic science departments at RWJMS, the Department of Biochemistry and the Department of Physiology and Biophysics. All of the faculty members from these two departments would be transferred to other departments in the medical school. The dissolution of the two departments would reduce the number of basic science departments from five to three. In addition, the proposal includes the redistribution of faculty among the three remaining basic science departments and the Department of Pathology and Laboratory Medicine and the Department of Environmental and Occupational Medicine. The name of at least one of the three remaining basic science departments would be changed.

The proposal was based, in part, on the recommendations of two tasks force reports. The Internal Laboratory Research Task Force recommended dissolution of one department, the Department of Molecular Genetics, Microbiology and Immunology. The External Laboratory Research Task Force recommended reducing the number of basic science departments by one or two departments by dissolution of the Department of Physiology and Biophysics and/or the merging of the Department of Biochemistry and the Department of Molecular Genetics, Microbiology and Immunology. The three basic science departments proposed by Dean Amenta and Dr. Kinzy is lower than the national average number of basic science departments in U.S. medical schools, which varied between 5.5 and 6.0 departments from 1980 to 2004 [S.A. Bunton, Recent Trends in Basic Science Department Reorganizations, AAMC Analysis in Brief, 6 (1), 2006].

Several reasons have been given for the proposed dissolution of the two basic science departments. The first- and second-year medical school curriculum is no longer organized according to traditional disciplinary boundaries, but rather organized using an integrated systems-based approach. Therefore, the present organization of basic science departments by discipline no longer corresponds to the organization of the curriculum. Furthermore, the research tools used in the basic sciences do not distinguish one basic science department from another. The research methodologies employed in each basic science department often combine or integrate those from various disciplines. The grouping of faculty by research interests into three departments rather than five departments is thought to promote more productive interactions.

The proposal for the dissolution of the two basic science departments has been presented to the Executive Council and will be presented to the faculty this fall followed by an electronic ballot to the faculty. Following that, the dean and president may present the proposal to the Board of Trustees for its approval.

Cooper Medical School of Rowan University

Cooper Medical School of Rowan University in Camden, a four-year medical school, has received preliminary approval from the Liaison Committee on Medical Education to recruit students for its entering class in the fall of 2012. Starting this fall, RWJMS will no longer train first- and second-year students for transfer to the Cooper University Hospital for the final two clinical years. The RWJMS program at the Camden Regional Campus will be phased out at the end of the 2012-2013 academic year.
NEWS FROM AFAR

[Editor’s Notes: Dr. Bob Pinals will be speaking at the December 8, 2011 meeting of the Retired Faculty Association on his investigations of illnesses of famous people.]

**Bob Pinals** (formerly of the Department of Medicine): “Greetings from Faraway Massachusetts. About 2 years after retiring from my position of Vice Chairman of Medicine, Ella (my wife for the last 58 years) and I moved to Bedford, a western suburb of Boston next to Lexington and Concord. We had lived in the Boston area for 10 years during and after my training and 2 of our children and 7 of our 9 grandchildren are nearby. I still return to RWJMS about every 2 months to teach rheumatology fellows and residents. To stay in touch with Medicine, I have joined the medical staff at Massachusetts General Hospital; I do some teaching there and go to conferences twice a week.

“My retirement hobby (I call it a senile obsession) has been investigating the illnesses of famous people, not current celebrities, but those who are long gone. This all started in 1997, when our Humanism and Professionalism (H & P) program for medical residents (and later fellows) was initiated. Various topics were presented at Morning Report monthly. In one short session early on there was some time remaining and I presented a historic case (after all it was Morning Report). The audience was asked to make a diagnosis and also to name the patient, who was identified only as an admiral. The correct answer emerged only after considerable prompting, including a reminder that the day was a holiday celebrating him (Christopher Columbus). There was an enthusiastic response and I was asked to do it again. It was entertaining, which is more than can be said for a lecture on professionalism at 8 AM. However, we soon abandoned the lecture format and used more interactive techniques like skits, written and acted out by resident teams. Over the next decade I presented about 70 historic cases, including presidents, generals, sports figures, actors, scientists, composers, and authors. Frequently, the case could be linked to the H & P topic (e.g., Jackie Robinson and racial bias in medicine). Aside from entertainment the cases conveyed some information about medical practice in past times and diseases which are seldom encountered now, such as typhoid, diphtheria and lead poisoning. Nine of these case reports have been published in medical journals, one is in press and 4 more in preparation.”

**Ginny Mehlenbeck** (formerly of the Department of Psychiatry): “My husband Carl and I have spent much of our retirement traveling in the U.S., especially visiting my family in Michigan or our son John, his wife, and our two grandchildren as often as possible. Last year we had to reprogram our car to go south instead of north! John and family moved from RI to VA when his wife Robyn became the director of the George Mason University Center for Psychological Studies in Fairfax. Both graduated from William & Mary in Williamsburg, so traveling in VA has been a bit of a homecoming for all of us. Our other big retirement adventure has been coping with all the home renovations we have had to do. Fortunately, being retired allows us to plan a trip somewhere when we have had enough! Besides traveling and writing checks for renovations, we finally have enough time to indulge our passion for studying archaeology and astronomy, reading, doing crossword and other word puzzles, attending concerts and lectures, walking, spending more time with family, friends, and our cat Juliette, and sleeping in past 5:30 am! I send my warmest wishes to all of you and hope you are enjoying your retirement.”
In Memoriam

Stephen F. Lowry, MD

It is with profound sadness that I share with you the passing of Stephen F. Lowry, MD, MBA, chair, Department of Surgery and senior associate dean for education. Dr. Lowry epitomized the academic physician scientist. His research accomplishments were rivaled only by his ability to develop and mentor other physicians and scientists. As an academic leader, he has set a benchmark that others admire within our organization, nationally and worldwide.

Dr. Lowry joined UMDNJ- Robert Wood Johnson Medical School as chair in 1997 and was instrumental in creating the division of surgical sciences, which focuses on core research issues of inflammation and developmental biology. He was named senior associate dean in 2006, where he led the implementation of a new medical education curriculum. In 2007, he was the first faculty member to be named to the Harvey Professorship in Innovative Teaching.

Dr. Lowry was held in the highest regard by his peers. He was known as one of the world’s experts on inflammation and how inflammation disorders are responsible for much of the disease that we face today.

A detailed article on Dr. Lowry’s career may be found on page 49 in the Winter 2004 issue of RWJ Medicine magazine at: http://rwjms.umdnj.edu/about_rwjms/about/archive/documents/RWJMdW04_fin.pdf

Please join me in expressing our most sincere condolences to Dr. Lowry’s wife, Suzette, and his entire family. I will personally miss his passion and commitment to excellence in all the missions of our school. He will be deeply missed by the entire school community.

-Peter S. Amenta, MD, PhD, Dean
In Memoriam

Gregory L. Williams, JD/MBA

Gregory L. Williams began his career at RWJMS in 2004 as Manager of Facilities. He was responsible for overseeing the day-to-day operations of all the RWJMS buildings on the New Brunswick Campus. He received his undergraduate from NYU and a JD/MBA from Rutgers University. Greg brought a deep knowledge to his position and was a great problem-solver.

Prior to Greg coming on board to the medical school, he worked at Siemens Utility Company in Iselin (a subsidiary of Con Edison in New York) and then took employment at Rutgers University.

Greg had a passion for New York City, culture, jazz, basketball, and classic cars! He had a place in his heart for children and he supported their interests and their abilities to achieve an education that would enhance their opportunities to explore, learn, and live life ‘large’!

Greg is survived by his beloved Susan Williams, brother, mother, step-mother, and many children in his life who called him ‘Uncle Greg.’

I had the privilege of working with Greg as a colleague who not only shared his knowledge in an understated way but was always a team player. This made for his many accomplishments and he gained the respect of anyone who came in contact with him.

Greg was the ultimate gentleman, colleague, and friend. I, along with all who knew him, will miss him very much.

Diane Ganz
CAB/Administration

This newsletter was edited by Eckhard Kemmann, Michael Gallo, John Lenard, and Paul Manowitz.
Retired Faculty Association

The following members have paid their RWJMS RFA 2011 dues:

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Retired Faculty Association

If you have not already done so, please send in your 2011 dues. Dues are collected for the calendar year. Please cut along the dotted line and return this portion with your payment.

RWJMS Retired Faculty Association 2011 Dues

Benefits of RFA Membership:
- Defining, advocating for and publicizing the benefits of retired faculty at RWJMS,
- Fostering ongoing engagement and participation of retired faculty in RWJMS activities,
- Promoting continuing interaction among retirees,
- Providing information and options for faculty considering retirement, and
- Interacting with other academic retired faculty associations (e.g., Rutgers Retired Faculty Association).

Please Print:

Name: __________________________________________
Address: ________________________________________
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Phone: __________________________________________
E-mail address: __________________________________

Please enclose a check in the amount of $15 made payable to “RWJMS Retired Faculty Association” and mail it to John Lenard, PhD, at the following address:

John Lenard, PhD
444 Harrison Ave.
Highland Park, NJ 08904

Thank you. September 2011