Examining Psychiatry

The field grows up but still seeks acceptance in mainstream medicine

Students as Teachers
Ph.D. students engage schoolchildren in science

Family Medicine Boomlet
Nine new graduates start family medicine residencies
The devotion, loyalty, and generosity of Columbia’s medical school alumni are remarkable and, in my experience, unsurpassed among medical schools. That dedication, in aggregate and in individual experiences, contributes immeasurable luster to the College of Physicians & Surgeons name. Other readers of this magazine likewise show an affinity toward the school that makes my responsibilities as cheerleader-in-chief easy to fulfill.

You, the readers, know what makes us great, and this magazine serves to remind you of our school’s historical richness, contemporary achievements, and efforts to define a future built on our past and present successes. As we work to maintain our relationship with you, we seek to build new relationships with readers who would benefit from learning more about where we have been, where we are, and where we are going. To broaden our audience and make our achievements accessible to more colleagues and friends, we have renamed this magazine *Columbia Medicine* and debut a new look with this issue. Both the new name and new look should help readers readily identify who we are, our mission, and our significance within the medical school landscape.

We should not keep our stories and news – including your singular achievements as students, faculty, alumni, and friends – to ourselves. We hope these changes in your magazine will help us spread the word on what makes Columbia medical school so deserving of the devotion, loyalty, and generosity of so many.

With best wishes,

Lee Goldman, M.D., Dean
lgoldman@columbia.edu
Long considered a medical school that graduated specialist physicians, P&S graduated nine students in 2011 who matched to family medicine. Educators and students discuss what might explain this year’s interest among graduates.
(More) Thoughts on Robert Loeb
I’ve followed with concern the adulatory letters and memoirs of students who came under the whip of Professor Robert F. Loeb. I arrived at P&S shortly after his time but Loeb’s methods were carried on by Professor Stanley Bradley, albeit in pale imitation. Doubtless, students learned diagnostic skills from these brilliant men, but learning is attenuated by fear, and teaching is vitiated by brutality. For the students, Loeb and Bradley modeled cruelty and disrespect, and in front of patients no less. Let’s give this style of teaching its deserved description: sadism.
Norbert Hirschhorn ’62
London, England
www.bertzpoet.com

Thoughts on Health Care Reform
When three Carleton College alumni returned to Carleton this year to talk with students, each of us took a different tact. Peter Puchner addressed the types of things the admissions committee would consider in accepting a candidate to the next P&S class. Mark Mellstrom described what it is like to practice primary care in a solo practice in rural Minnesota. I talked about the changing picture that the medical profession faces in Minnesota with the Affordable Care Act beginning to be implemented. We have three major health care systems in the Minneapolis/St. Paul metropolitan area. All of the hospitals in this area are using the automated medical record and they all chose the same vendor, Epic out of Madison, Wis. The system I worked with, and then for, believes the new health care law will be implemented. This will mean, in the opinion of the leaders of our system, that hospitals and providers will be reimbursed for outcomes and not fee for service. This will mean that in 10 years we will close 20 percent of our hospitals because we will not need them.
Robert H. Scott ’61
Minneapolis

Editor’s Note: Read more about the visit to Carleton College in the alumni section.
Faculty Awards

*P&S Distinguished Service Awards* were presented to John Koester, Ph.D., professor emeritus of clinical neuroscience, and Robert B. Mellins, M.D., professor emeritus of pediatrics.

*Charles W. Bohmfalk Awards* were presented to Deepthiman Gowda, M.D., assistant clinical professor of medicine, for pre-clinical teaching, and Rini Banerjee Ratan, M.D., assistant clinical professor of obstetrics & gynecology, for clinical teaching.

*The Leonard Tow Humanism in Medicine Award* presented by the Arnold P. Gold Foundation was given to LeRoy E. Rabbani, M.D., professor of clinical medicine.

*Dr. Harold and Golden Lamport Research Award* in basic sciences was given to Wesley Grueber, Ph.D., assistant professor of physiology & cellular biophysics and neuroscience. Adolfo Ferrando, M.D., Ph.D., assistant professor of pediatrics and pathology, received the *Dr. Harold and Golden Lamport Research Award* in clinical sciences.

*The Distinguished Teacher Award* was given by the Class of 2011 to Michael Devlin, M.D., professor of clinical psychiatry.

Student Awards and Prizes

*AOA* (Alpha Omega Alpha, the national honor society for medicine)

*Dr. Harry S. Altman Award* (outstanding achievement in pediatric ambulatory care)
Rochelle R. Hartley

*Alumni Association Award* (recognition of interest in and devotion to the College of Physicians & Surgeons and its Alumni Association)
Elizabeth R. Inkellis

*AAN Medical Student Prize for Excellence in Neurology*
Erika T. Marulanda
Virginia P. Apgar Award
(excellence in anesthesiology)
Robyn L. Castle

Michael H. Aranow Memorial Prize
(best exemplifying the caring and humane qualities of the practicing physician)
Alev J. Atalay

Herbert J. Bartelstone Award
(exceptional accomplishments in pharmacology)
Robyn L. Castle

Behrens Memorial Prize in Ophthalmology
(outstanding graduate entering ophthalmology)
David Sola-Del Valle

Edward T. Bello, M.D., Listening Award
(to a graduating student who best portrays the art of listening to patients, colleagues and self in practicing the chosen field of medicine)
Megan S. Jessiman and Nathaniel B. Langer

Robert G. Bertsch Prize
(emulating Dr. Bertsch’s ideals of the humane surgeon)
Christine Hsieh

Coakley Memorial Prize
(outstanding achievement in otolaryngology)
Yuna J. Larrabee

Titus Munson Coan Prize
(best essay in biological sciences)
Anne O’Donnell and Suzanne J. Tintle

Titus M. Coan Prize for Excellence in Research
Basic cell & molecular biology – Mari-Liis Visnapuu
Translational biology – Alexander Kushnir

Thomas F. Cock Prize
(excellence in obstetrics & gynecology)
Erin M. George

Rosamond Kane Cummins’52 Award
(graduate entering orthopedics with academic excellence, sensitivity, kindness, devotion to patients, and the fine human qualities that she exemplified)
Stephanie M. Gancarczyk

Dean’s Award for Excellence in Research/Graduate School of Arts and Sciences at Health Sciences
Eleni P. Mimitou and Neal A. Paragas

Endocrine Society’s Medical Student Achievement Award
Carling J. Ursem

Daniel J. Fink, M.D., Memorial Prize
(awarded to the student who best exemplifies Dr. Fink’s enthusiasm for the study and practice of medicine)
Richard M. Atkinson and Craig R. Soderquist

Louis Gibofsky Memorial Prize
(for research work in areas of nephrology, renal immunology, renal physiology, or transplant immunology)
David Sola-Del Valle

Glasgow-Rubin Achievement Award
(presented to women graduating in the top 10 percent of their class)
Alev J. Atalay, Paula C. Brady, Christina Cho, Judith L. Griffin, Sarah M. Hopkins, Elizabeth R. Inkellis, Debra T. Linker, and Nelly C. Parisot

Gold Humanism Honor Society

Dr. Charles E. Hamilton Award
(excellence in pulmonary disease)
Vanessa M. Cervantes and Nicole B. Cyrille

Izard Prize for Research in Cardiology
Christopher R. Kelly

Janeway Prize
(highest achievement and abilities in the graduating class)
Christopher R. Kelly

Jerry Jacobs Prize in Pediatrics
(excellence in the differential diagnosis and treatment of disorders in children)
Erin A. Paul

Albert B. Knapp Scholarship
(awarded at the conclusion of the third year to the medical students with highest scholarship in the first three years)
Elizabeth R. Inkellis and Nathaniel B. Langer

John K. Lattimer Prize in Urology
(outstanding essay in urology)
Matthew J. Pagano

Samuel and Beatrice Leib Memorial Prize in Ophthalmology
(outstanding graduate entering ophthalmology)
Gregory E. Stein
Barbara Liskin Memorial Award in Psychiatry
(exhibiting care, unusual concern, and dedication to helping sick people)
Megan S. Jessiman

Robert F. Loeb Award
(outstanding academic achievement by a student serving in the armed forces of our country)
Christina Cho, Sarah M. Hopkins, and Yehuda E. Paz

F. Lowenfish Prize in Dermatology
(demonstrated successful laboratory collaboration between student and faculty)
Masoud F. Tavazoie

Rear Admiral David Willard Lyon Award
(outstanding academic achievement by a student serving in the armed forces of our country)
Robert L. Cohen

Alfred M. Markowitz Endowment for Scholars
(exemplifies Dr. Markowitz’s dedication to patient care, teaching, and scholarship)
Cornelia L. Griggs

Dr. Cecil G. Marquez BALSO Student Award
(outstanding contribution to the Black and Latino Student Organization and the minority community)
Felicia Rosario

Edith and Denton McKane Memorial Award
(outstanding research in ophthalmology)
Xining He

Medical Society of the State of New York Community Service Award
Elizabeth Blair Reed

Dr. Harold Lee Meirhof Memorial Prize
(outstanding achievement in pathology over the four years in medical school)
Craig R. Soderquist

Drs. William Nastuk, Beatrice Seegal, and Konrad Hsu Award
(demonstrated successful laboratory collaboration between student and faculty)
Austin L. Chiang and Geoffrey N. Konopka

Marie Nercessian Memorial Award
(exhibiting care, unusual concern, and dedication to helping sick people)
Mary T. Gover, Judith L. Griffin, and Ramon Milian

New York Orthopedic Hospital Award
(outstanding performance in research and clinical work)
Comron Saifi

Outstanding Student in Family Medicine Award
(demonstrates academic achievement in the area of family medicine and has shown initiative in community health service and an understanding and commitment to the principles of family medicine)
Daniel H. Neghassi and Elizabeth Blair Reed

Donald M. Palatucci Prize
(awarded to a student in the fall of his/her fourth year who is in the upper one-third of the class, who exemplifies, through activities in art, music and literature, that living and learning go together, and whose interactions with patients reflect kindness, humor, compassion, candor, and zest for life)
Paula C. Brady and James F. Conniff

Joseph Garrison Parker Award
(exemplifying through activities in art, music, literature, and the public interest the fact that living and learning go together)
Lee P. Hingula and Matthew D. Truesdale

Drs. Robert A. Savitt and George H. McCormack Award
(exemplifies Dr. George McCormack’s medical skill, consideration, understanding, and compassion)
Judith L. Griffin and Bryan J. McColgan

Rebecca A. Schwartz Memorial Prize
(achievement in pediatric cardiology)
Danielle E. Arnold

Helen M. Sciarra Prize in Neurology
(outstanding achievement in neurology)
Ellen B. Penny

Aura E. Severinghaus Scholar
(superior academic achievement)
David Sola-Del Valle

Society for Academic Emergency Medicine Award
(excellence in specialty of emergency medicine)
Alex H. Linker

Miriam Berkman Spotnitz Award
(excellence in research of neoplastic disease)
Mark B. Geyer

Leonard Tow Humanism in Medicine Award
(excellence in science and compassion in patient care)
Paula C. Brady

William Brady Watson Prize in Pediatrics
(excellence in pediatrics)
Cristina R. Fernandez

Dr. William Raynor Watson Memorial Award
(outstanding performance in surgery)
Minna K. Lee

Dr. Allen O. Whipple Memorial Prize
(outstanding performance in surgery)
Richard M. Atkinson

Sigmund L. Wilens Prize
(excellence in pathology)
Richard M. Atkinson

“I feel incredible,” Dr. Mukherjee said the day of the announcement. “I was actually in a bookstore when I received the email. It’s life-changing for me, and among the people I need to thank are the patients themselves. That’s one of the things I tried to do in the book is honor their stories and give them a voice.”

The book, now in paperback, has won other awards, including the inaugural PEN/E.O. Wilson Literary Science Writing Award and the PEN America Award. It was a finalist for a National Book Critics Circle award. It was cited by the New York Times, Oprah magazine, and Time magazine as one of the 10 best books of 2010, as one of Amazon.com’s 100 best books of 2010, and one of Time magazine’s “All-TIME 100 Best Nonfiction Books.”

Dr. Mukherjee is not the first person connected to P&S to win a Pulitzer Prize. Two alumni also have won Pulitzers for nonfiction: Robert Coles’54 in 1973 for “Children of Crisis, Vols. II and III” and Robert N. Butler’53 in 1976 for “Why Survive? Being Old In America.”

In an interview with Columbia shortly after release of the book in November 2010, Dr. Mukherjee explained why he chose to call the book a biography, rather than a history, of cancer. “As I was writing and becoming more immersed in this story of cancer, it really felt as if the word history was too generic; it didn’t convey the visceral way that cancer becomes part of our lives, particularly in the late 20th century. So I began to search for another description. When one writes about illness, about the history of disease, we are, in some ways, writing a biography.”

He also discussed writing about early treatments for cancer that, with the benefit of hindsight, were wrong-headed. “With medicine you don’t have the luxury to say, ‘Come back to me in 10 years and I’ll know better how to treat your prostate cancer.’ That’s what makes medicine an amazing profession. You’re always working in uncertainty and you’re trying to provide certainty, in real time.”

Dr. Mukherjee’s own research focuses on leukemia, and he is hopeful about cancer research. “I feel pathologically hopeful! The opposite of hopeful is hopeless. Discoveries have occurred, and discoveries are occurring. History clearly shows a track record of progress. Medicine is caught in this moment of pulling out from a sea of uncertainty these little pieces that are more certain than others. To me there is no discipline we practice as human beings that manages this level of complexity. Not just statistical or scientific complexity, but emotional complexity. That’s what makes it one of the most unbelievably moving professions that exist.”

Columbians mentioned or acknowledged in the book include alumni (Larry Norton’72, Karen Antman’74, William Peters’78, Baruch Blumberg’51, William Halsted’1877, Harold Varmus’66, George Canellos’60, Michael Wigler’78 Ph.D.) and faculty (Jacob Furth, E. Donnall Thomas, James Wolff, Cushman Haagensen, Thomas Hunt Morgan, Hermann Muller, Sol Spiegelman, Barron Lerner, Joshua Lederberg, Ed Gelmann, Corinne Abate-Shen, Michael Shen, and Riccardo Dalla-Favera).
P&S Class of 2015

The White Coat Ceremony for the P&S Class of 2015 took place Aug. 15, 2011. The keynote address was delivered by Jo Ivey Boufford, M.D., president of the New York Academy of Medicine, who discussed health care reform in the United States and how it may steer the course of students’ careers.

After being cloaked in their white coats, the students recited the Hippocratic Oath and stood to acknowledge the support they have received from family and friends.

The Class of 2015 by the numbers:

- 169 students
  - 139 M.D. students
  - 20 M.D./Ph.D. students
  - 10 Columbia-Bassett students
- 85 males
- 84 females
- 34 underrepresented minorities (20%)
- 5 children of alumni
- 4 children of faculty
- 1 sibling of another P&S student (Class of 2014)
- 1 set of sisters (but not twins)
- 6,907 total applications through AMCAS
- 5,926 secondary applications
- 4,087 applications for traditional M.D. program (including 709 from underrepresented minorities)
- 698 applications for Columbia-Bassett track
- 432 applications for the M.D./Ph.D. program
- 1,158 interviews conducted (including 173 underrepresented minorities, 62 for Columbia-Bassett, and 95 for M.D./Ph.D.)
- 3.78 mean GPA
- 35.7 mean composite MCAT score
- 65 colleges represented
- 29 states represented
- 2 foreign countries represented (2 from Canada and 1 from China)

NYP Medical Documentary Series to Air in 2012

FANS OF “HOPKINS 24/7,” “HOPKINS,” AND “BOSTON MED” will see NewYork-Presbyterian Hospital in the starring role of the next medical TV series produced by ABC News. Producers of those award-winning television medical series were at NYP (both Columbia and Weill Cornell campuses) for several months in 2011 filming for a seven-part series scheduled to air in spring or early summer 2012.

The series will look at life inside the medical center and focus on dramatic and inspirational stories of patients and their health care practitioners. Producer of the NYP series is Terry Wrong, who produced other medical documentary series for ABC.

New Health IT Program Graduates First Class

THE FIRST CLASS of students to complete a six-month health IT certificate program, funded by the U.S. Department of Health and Human Services at Columbia and eight other universities, graduated in June 2011. The class of 51 will help physicians move from paper to electronic health records.

Moving from paper to electronic health records is not like ordering a word-processing program, installing it on your computer, and spending a few hours figuring out how it works, says Frances Morrison, M.D., adjunct associate research scientist in biomedical informatics and program director of Columbia’s health IT certificate program. “It’s a bit more complicated.”

Successfully implementing a computerized system requires knowing a little about programming, business practices and data privacy – and a lot about new regulations for doctors with Medicare and Medicaid patients about when to implement, and how to meaningfully use, such systems.

Also needed are the clinical know-how necessary to ease computerized records into the workflow of clinicians and people skills to accommodate a variety of users. “Essentially, we need a whole new work force to act as liaison between clinical users and the systems themselves,” says Dr. Morrison. “We can’t just give clinicians electronic systems and tell them to change their ways.”

Farzad Mostashari, M.D., the federal government’s national coordinator for health information technology, addressed the graduates in June. Information technology will be transformative for health care in America, he told the graduates, and as IT adoption increases across the country, the new work force will help providers become meaningful users of health IT.

Graduates include the manager of a small primary care practice outside Salt Lake City, a registered nurse interested in using data from electronic records to improve patient safety and treatment efficacy, and lawyers interested in the security aspects of health IT.
Students Honored for Scholarship, Excellence, Collaboration

MORE THAN 50 STUDENT AWARDS and prizes were given at commencement this year. A sample of the awards and students who earned them:

Nicole Cyrille’11 received the Dr. Charles E. Hamilton Award for excellence in pulmonary disease. Dr. Cyrille was featured in an article in Dominica News Online, a news organization of the Commonwealth of Dominica, an island nation in the Caribbean. Dr. Cyrille grew up in Roseau, the nation’s capital.

A graduate of Midwestern State University in Texas, Dr. Cyrille also attended Dominica State College and taught chemistry at the Dominica Grammar School. She credits the two fathers in her life – her father and stepfather – for their encouragement but reserves her greatest praise for her mother. “‘Books before boys,’ that was always her words,” she told Dominica News Online. “She always emphasized education and the importance of working hard.”

Dr. Cyrille is an internal medicine intern at NewYork-Presbyterian Hospital/Columbia. She hopes to return to Dominica some day to contribute to her homeland.

An award given to recognize lab collaboration between student and researcher is the Drs. William Nastuk, Beatrice Seegal, and Konrad Hsu Award, which was received this year by Austin L. Chiang’11 and Geoffrey N. Konopka’11.

Dr. Konopka worked as a student with Peter Tang, M.D., a hand surgeon in orthopedic surgery. “I conducted an investigation of acellularized nerve allografts for the use of peripheral nerve regeneration. I was involved in the planning, study design, surgeries, outcome testing, statistical evaluation, writing, and analysis of the project.” Dr. Tang presented the study’s findings at the American Association of Hand Surgery annual meeting and the American Association of Orthopaedic Surgeons annual meeting. A paper on the surgical technique used for the study was published in the Journal of Neuroscience Methods. Dr. Konopka presented the research at the New York Society for Surgery of the Hand’s annual residents and fellows meeting in May and received first prize for the research. Dr. Konopka, who was also inducted into the Gold Humanism Honor Society at commencement, has started an orthopedic surgery residency at the University of Texas.

Dr. Chiang’s collaboration with Christine Rohde, M.D., of the division of plastic surgery resulted in a paper published in Plastic and Reconstructive Surgery, the field’s leading journal, and an abstract in the Journal of the American College of Surgeons. “My involvement in our primary research project involved collecting JP exudate drain samples, pain assessment scales, and tabulating narcotic pain medication use to measure and understand the effect of pulsed electromagnetic fields on pain reduction in breast reduction patients.” Dr. Chiang’s presentation of preliminary results at the 2009 Department of Surgery residents’ research competition earned him first prize in the clinical research category. Dr. Chiang also helped Dr. Rohde study referral patterns of breast surgeons for post-mastectomy patients for breast reconstruction. “We conducted an extensive chart review that ultimately showed that age and diabetes status were the two main factors affecting breast surgeons’ decisions for referring post-mastectomy patients for breast reconstruction.” Dr. Chiang has started an internal medicine internship at NewYork-Presbyterian/Columbia.

David Sola-Del Valle’11 won several awards at commencement (see Pages 3, 4, and 5). At a pre-commencement ceremony, he dedicated his honors to his mother, who raised him in Caguas and Gurabo, two small towns near San Juan, Puerto Rico: “I know we all say this about our moms, but my mom really is the most amazing woman I know. It would be safe to say I wouldn’t even have come close to achieving everything I’ve achieved if it hadn’t been for her encouragement and support.” (See Dr. Sola-Del Valle’s full dedication to his mother in a P&S online article.) Dr. Sola-Del Valle has started an internship at Massachusetts General Hospital, to be followed by an ophthalmology residency at Massachusetts Eye and Ear Infirmary.

See the P&S online article for background information on Drs. Hamilton, Nastuk, Seegal, and Hsu.
NEWS IN BRIEF

Cecilia Fix and Haley Masterson, both members of the Class of 2014, received 2011 Steve Miller Fellowships in Medical Education awards. Ms. Fix will compare health care systems in New York City and the Dominican Republic, mentored by Delphine Taylor ’97. Ms. Fix will explore how migration between the two systems might inform health care decisions and expectations of Dominican immigrants. Mentored by Janis Cutler, M.D., Ms. Masterson will study how student perceptions of mentally ill populations are affected by their major clinical year psychiatric rotation. She will administer pre- and post-rotation surveys to seek an objective measurement of how psychiatric rotations may foster the growth of humanistic physicians and how rotations might be improved. The Steve Miller Fellowships are given through an endowed fund created by donors wanting to memorialize the late Dr. Miller, director of pediatric emergency medicine, by furthering his work and his dedication to the practice of humanism in medicine.

Rafael Lantigua, M.D., and Dennis Mitchell, D.D.S., M.P.H., were appointed Aug. 1, 2011, as medical center special advisers for community health affairs. They will counsel the four medical center deans on community health issues and facilitate new collaborative initiatives with community and academic stakeholders. They will work closely with the Office of Government & Community Affairs and provide a faculty voice in medical center efforts to engage community health organizations and optimize academic and community partnerships. “Their understanding of the community will help align CUMC and other resources so that, collectively, we can improve healthcare services in northern Manhattan,” said Lee Goldman, executive vice president and dean, in announcing their appointments.

Louis U. Bigliani, M.D., the Frank E. Stinchfield Professor of Orthopedic Surgery and chair of orthopedic surgery, was named president and chairman of the board of ColumbiaDoctors, the multi-specialty faculty practice organization at P&S. ColumbiaDoctors is comprised of more than 1,200 physicians. Dr. Bigliani assumed his leadership roles July 1, 2011.

Michael E. Goldberg, M.D., the David Mahoney Professor of Brain and Behavior in neuroscience, neurology, psychiatry, and ophthalmology and director of the Mahoney Center, was elected to the National Academy of Sciences in May 2011. Dr. Goldberg is known for his groundbreaking contributions to understanding brain mechanisms of cognition, including the basis of visual attention, the perception of space, and the generation of movement. The Academy elects distinguished scholars engaged in scientific and engineering research and who are dedicated to the furtherance of science and technology.

Two P&S researchers were among seven Columbia faculty inducted into the American Academy of Arts and Sciences in April 2011: Maxwell E. Gottesman, M.D., Ph.D., the Charles H. Revson Professor of Biochemistry & Molecular Biophysics and of Microbiology & Immunology and director of the Institute of Cancer Research, and Rodney J. Rothstein, Ph.D., professor of genetics & development. Dr. Rothstein was selected for elucidating the essential biological processes underlying the recognition and repair of DNA damage. He also studies a special type of cell division seen in adult stem cells that is also present in yeast. Dr. Gottesman was selected for his studies of transcription termination in E. coli bacteria. He has shown than translation and transcription are coupled by the NusG protein and that failure to terminate transcription leads to chromosome breaks. Since its founding in 1780, the Academy has elected leading “thinkers and doers” from each generation, including George Washington, Benjamin Franklin, Albert Einstein, and Winston Churchill. Current membership includes more than 250 Nobel laureates and more than 60 Pulitzer Prize winners.

Two NewYork-Presbyterian Hospital executives have succeeded Herbert Pardes, M.D., who has served as president and CEO since 2000. The hospital’s Board of Trustees appointed Steven J. Corwin, M.D., as CEO and Robert E. Kelly, M.D., as president. They assumed their new positions Sept. 6, 2011. Dr. Pardes has assumed the role of executive vice chairman of the Board of Trustees. Before being named to his new role as CEO, Dr. Corwin had served as the hospital’s executive vice president and chief operating officer since 2005. He joined the hospital’s management team in 1991. Dr. Kelly had served as group senior vice president, chief operating officer and chief medical officer, responsible for all divisions of the NYP/Columbia campus, since 2007. He joined the hospital administration in 1995.

The New York State Department of Health announced in May 2011 that Morgan Stanley Children’s Hospital at CUMC is a designated Inherited Metabolic Disease Specialty Center, one of only nine in the state. Within 48 hours of birth, all babies are screened for 40 inborn errors of metabolism. “One in every 3,000 babies is born with an inborn error of metabolism. Our goal is to help these children and their parents have the opportunity to build healthy lives, improve their quality of life, and minimize the burden of their disease,” says Wendy Chung, M.D., Ph.D., director of clinical genetics at Morgan Stanley Children’s Hospital and the Herbert Irving Assistant Professor of Pediatrics at P&S.
Columbia and nine other institutions have received renewals of Clinical and Translational Science Awards. Columbia’s CTSA renewal for the Irving Institute for Clinical and Translational Research totals $38.9 million for five years. Others receiving renewals are UCSF, University of Pittsburgh, Mayo Clinic, University of Pennsylvania, Oregon Health & Science University, Rockefeller University, University of Rochester, and UC Davis. Renewals were made in recognition of the successes made during the first five years of the CTSA program, which is administered by the NIH’s National Center for Research Resources. “These institutes were the pioneers in this program and are to be commended for the work they have done in bridging the traditional divides between laboratory research and medical practice,” said NCRR director Barbara Alving, M.D. “They were tasked with transforming the way their institutions coordinate research to make it more proactive and effective in producing real-world results, and in the process, they have served as innovative models nationwide.”

Six Columbia scientists rank among the world’s top Parkinson disease researchers. Two are among the top 20 most cited researchers of the last decade, four in the top 50 since 1985, according to an independent analysis published in June 2011 in the Journal of Parkinson’s Disease. Serge Przedborski, M.D., Ph.D., the Page and William Black Professor of Neurology and of Pathology & Cell Biology and co-director of the Center for Motor Neuron Biology and Disease, ranked No. 6 in number of citations. Stanley Fahn, M.D., the H. Houston Merritt Professor of Neurology, chief of the Division of Movement Disorders, and one of the world’s preeminent clinical researchers in Parkinson disease, ranked No. 12 in citations. Drs. Przedborski and Fahn also ranked among the top 20 scientists with the greatest scientific impact on the field since 1985 and among the top 20 with the greatest impact on researchers outside the field. Others cited among the top 50 Parkinson researchers were Lucien Côté, M.D., professor emeritus of neurology; Vernice Jackson-Lewis, Ph.D., research scientist in pathology & cell biology; Karen Marder, M.D., the Sally Kerlin Professor of Neurology and Psychiatry and chief of the Division of Aging & Dementia; and Richard Mayeux, M.D., the Gertrude H. Sergievsky Professor of Neurology, Psychiatry and Epidemiology (in the Gertrude H. Sergievsky Center and in the Taub Institute on Alzheimer’s Disease and the Aging Brain) and chair of the Department of Neurology.

New York Magazine in June 2011 selected 126 physicians at Columbia University Medical Center to be among its Best Doctors of 2011, its 14th annual best doctors compilation. The print version of the magazine contained an abbreviated list of the designees, but the entire list of 1,144 doctors in 63 specialties is available in the magazine’s online edition. The magazine featured a series of first-person stories written by doctors, including one by Michael Vitale ’95, the Ana Lucia Associate Professor of Clinical Pediatrics and Orthopedic Surgery and chief of pediatric spine and scoliosis surgery at Morgan Stanley Children’s Hospital.

At the April 2011 annual medical education conference of the Student National Medical Association, Sabra Lewsey ’12 was elected to the position of pre-medical board member, a voting member of the national Board of Directors, and chairperson of the Minority Association of Premedical Students Committee. At P&S, Ms. Lewsey served as president of BALSO, co-president of the Student National Medical Association and Latino/a Medical Student Association local chapters, co-president of Students Interested in Neurology/Neurosurgery, performance director of the Multicultural Show, Student Success Network lecturer, Summer Medical & Dental Education Program TA/RA, member of Bard Hall Players, summer research intern, and senior clinician in CoSMO, the student-run free clinic. SNMA, founded in 1964, is the nation’s oldest and largest independent, student-run organization focused on the needs and concerns of medical students of color. With chapters across the nation, SNMA membership includes more than 7,000 medical students, pre-medical students, and physicians.

The new Alexandra and Steven Cohen Pediatric Emergency Department at Morgan Stanley Children’s Hospital opened June 23, 2011, expanding access to emergency pediatric care for families in the region. The new department was made possible through a $50 million gift from the Steven A. and Alexandra M. Cohen Foundation. The 25,000-square-foot emergency department more than quadruples the department’s previous space and creates a family-friendly environment with the latest technology to care for young patients. One of only three Level 1 pediatric trauma centers in New York state, the facility is equipped to care for 60,000 children annually. The new department aims to improve the flow of patients and reduce wait times. A special fast track area will speed treatment and improve the flow of patients and reduce wait times. A special fast track area will speed treatment for less-urgent conditions. The department has its own onsite radiology capability and a dedicated laboratory and pharmacy, eliminating the need for patient transport to other hospital departments. The new space has 26 private treatment rooms, four triage rooms, two trauma rooms, and a nine-bay asthma treatment area.
Not Sci-Fi: Humans and Machines Working Together in Rehab Medicine

By Dan Harvey

Stroke rehabilitation expert Joel Stein, M.D., sees the future, and it is robotics.

But the prescient Dr. Stein is not pointing to a sci-fi scenario where cyborgs push therapists out of the post-stroke treatment continuum. Rather, this pioneering physician believes robotics, in conjunction with human therapists, can potentially help patients recover abilities rather than just compensate for their losses.

The idea that patients can recover lost abilities after a stroke is relatively new for rehabilitation physicians. “In the old days, it was understood that the brain could repair some of the damage, but the belief was that there was nothing we could do to enhance this process,” Dr. Stein says. “Over the last 15 years, it’s become clear that the adult brain is ‘plastic’ and can reorganize itself to a much greater degree than we previously believed.

“It’s a very exciting concept for us in rehabilitation. Now that we understand that it matters what we do, the question is: What are the best activities to optimize outcome?”

One possibility is robotics. When Dr. Stein was first approached about using robotic devices to aid stroke recovery, he thought, why use a machine if we have therapists who can do the same thing? Dr. Stein calls himself a skeptic but realizes that rehabilitation physicians need to be creative to come up with better solutions.

Since arriving from Harvard three years ago as chair of the Department of Rehabilitation and Regenerative Medicine and physiatrist-in-chief at NewYork-Presbyterian, Dr. Stein has started an active program at Columbia investigating several different devices.

These aren’t the metallic men from the 1951 movie, “The Day the Earth Stood Still,” or Rosie the household robot from “The Jetsons.” And they’re nothing like the bionic implants imagined by the 1970s TV show, “The Six Million Dollar Man.”

Instead, the devices can resemble normal elbow or knee braces, albeit with wires, flashing lights, and electronics attached. A neurorobotic system made by Myomo wraps around the elbow, picks up the electrical activity generated by a patient’s own muscles as he or she attempts to move the forearm, and provides assistance to complete the motion. In a similar fashion, a bionic leg made by Tibion assists during walking or stair-climbing.

Regaining the fine control needed for typing, using a cell phone, or playing the piano presents an even bigger challenge for stroke survivors...
Clinical advances

and, until recently, was left unaddressed by robotics. Dr. Stein is now studying a device called Amadeo, made by Tyromotion as one of the few robotic systems designed for finger and hand movements. Patients sit in front of a console that resembles a sound-mixing board and strap each finger individually to motorized levers. As the patient uses the fingers to play specially designed computer games, the levers assist patient-initiated movements like pinching or grasping.

The idea with all these devices is that repeated practice – even at home – eventually molds new circuits in the brain that take over when the device is removed.

While patients see meaningful improvements from robotic therapy, research has demonstrated that improvements are not as substantial as desired and far from recapturing pre-stroke capabilities. But Dr. Stein expects new computer algorithms and designs will soon improve the effectiveness of robotic training. “Ultimately, robotic therapy may be most effective when combined with other emerging forms of post-stroke treatment, such as non-invasive brain stimulation.

Although robotics are not suitable for all patients (individuals with the most severe effects of stroke, for example, do not seem to respond as well as those with more intermediate symptoms), Dr. Stein sees robotics ultimately becoming a standard of post-care. “We are supplying the evidence to back that up by engaging in research that we hope will demonstrate the viability of wearable devices that allow patients to receive care beyond the clinical setting. They can continue their care at home. That kind of advancement should not only benefit the patients, but also the medical professionals who treat them.”

Individuals interested in learning more can contact Lauri Bishop at lb2413@columbia.edu or 212-305-6095.

Spotting Pancreatic Cancer Earlier

By Dan Harvey

THE GRIM STATISTICS OF PANCREATIC CANCER have scarcely budged for decades.

Despite accounting for only 3 percent of cancer cases, pancreatic cancer is the fourth leading cause of cancer death in the United States due to a survival rate that has hovered around 6 percent since the 1970s.

For researchers at Columbia’s Muzzi Mirza Pancreatic Cancer Prevention & Genetics Program, the status quo is unacceptable, and they are dedicated to improving survival.

One of the most promising ideas to improve survival is early detection, says gastroenterologist Harold Frucht, M.D, director of the program and associate professor of clinical medicine-digestive and liver disease. “By the time a patient is diagnosed with pancreatic cancer, most tumors are advanced,” says Dr. Frucht. “What makes us optimistic that early detection can work is the improvement in survival we see when tumors are very small.”

One Japanese study even found 100 percent survival after surgery for pancreatic cancer if the tumor was less than 1 centimeter in diameter.

Finding those tumors is not easy. The pancreas is buried deep within the abdomen, which means testing can be both invasive and expensive. “Many people still believe that the disease can’t be detected early because it is so difficult to image lesions that small,” Dr. Frucht says.

For the past four years, though, the Mirza program and a select group of other academic centers in the country have helped to perfect detection techniques using endoscopic ultrasound. The technique can detect masses smaller than possible with a CT scan, and if a suspicious mass is found, ultrasound helps physicians guide a fine needle into the mass for biopsy.

The center also was one of the first screening programs to use MRI, a non-invasive test that may be able to detect cancers and pre-cancerous lesions of the pancreas.

Screening focuses on high-risk individuals, specifically those who have a family history or a syndrome that is known to increase the risk of pancreatic cancer. A medical history and physical are followed by analysis of family history by a genetic counselor to determine presence of an inheritance pattern and whether genetic testing is warranted.

“Then using all the information obtained, we decide whether early screening is reasonable, which imaging tests are more appropriate, and how often the individual should be examined,” says Dr. Frucht. “Someone at moderate risk will undergo MRI or ultrasound. A high-risk individual undergoes both tests.”

In a paper published last year, Dr. Frucht and colleagues reported that their screening protocol identified two people with malignant pancreas tumors and five with tumors outside the pancreas, including two ovarian cancers, out of 51 patients tested. “We’ve demonstrated that early detection is indeed possible.”

But does early detection improve outcomes?

“That’s a hard question to answer right now,” says Dr. Frucht. “Different researchers have different opinions. We believe if screening can detect a cancer earlier than possible before, the prognosis is not as bad. But bottom line, there is not enough worldwide experience to have a definitive answer yet.”

Dr. Frucht believes even better methods of early detection of pancreatic cancer are possible with biomarkers. The program collaborates with researchers at the Mayo Clinic who have developed an experimental test for colon cancer. “The idea is that we can detect tumors from mutations in cancer cells that are shed into the colon and the stool,” Dr. Frucht explains. “We’re applying this concept to pancreas cancer, looking at stool samples from people who have cancer or pre-cancerous lesions and trying to detect mutations. Preliminary data reveal good sensitivity.”

Since today’s image-based screening is only suitable for high-risk individuals – who account for 3 percent to 16 percent of all pancreatic cancer cases – biomarker screening could help physicians make a bigger dent in the disease’s mortality. “As long as biomarker screening is inexpensive, it could be used as a general-population screening tool,” Dr. Frucht says.

More information about the Muzzi Mirza Pancreatic Cancer Prevention & Genetics Program is available by calling 212-305-9337.
What’s Behind the Success of the ‘Cutting Cure’?

By studying bariatric surgery patients, Judith Korner hopes to learn more about the effect of the surgery on diabetes

By Susan Conova

A CURIOUS THING HAPPENED after weight loss surgery took off in the 1980s.

Because weight loss is a proven way to treat diabetes, surgeons expected to see gradual improvements in their diabetic patients’ glucose control and insulin sensitivity as excess pounds were shed. Instead, the disease often appeared to disappear completely within days of gastric bypass surgery, even before patients had lost much weight.

Decades of such observations have now convinced many that the best treatment for diabetes is bariatric surgery, particularly gastric bypass. Many weight loss centers now call the procedure by a new name – metabolic surgery – to emphasize the procedure’s effect on diabetes.

Why are these procedures so effective?

“Anytime you’re manipulating the gut, you’re really manipulating the whole body,” says Judith Korner, M.D., Ph.D., director of the Weight Control Center at Columbia and associate professor of medicine. The gut produces hormones that affect hunger, insulin production, and insulin sensitivity, plus the gut sends messages to the brain via neuronal connections. “In surgery, the GI tract is just the part you’re cutting, but those cuts have far wider effects.”

Exactly which changes caused by the surgical procedure lead to amelioration of diabetes is still unknown, but research by Dr. Korner and her colleagues in Columbia’s Center for Metabolic and Weight Loss Surgery is starting to identify potential candidates.

“If we can figure out how these surgeries work, we may be able to come up with better medical therapies,” says Dr. Korner. “Not all patients want surgery, and not all patients can have surgery.”

First, a caveat about metabolic surgery, Dr. Korner says. Gastric bypass does not work for everyone. Patients who experience diabetes “remission” usually do not return to a completely non-diabetic state, although they greatly improve. And diabetes can come back years after surgery.

Another mistaken assumption many make about gastric bypass is that the surgery itself is responsible for remission, since metabolic improvements are seen before any appreciable weight loss occurs. “But that study has never been done,” Dr. Korner says. “No one has done a head-to-head comparison between surgical patients and patients on diets that match the diets of surgical patients. Studies from 20 years ago show that very low calorie diets can also curtail diabetes, but people seem to have forgotten them.” A particular advantage with surgery, however, is that people are better able to maintain lower caloric intake over the long term.

One of Dr. Korner’s studies at Columbia seeks to determine whether surgery is better than a restricted diet. The NIH-funded study will compare gastric bypass patients with volunteers who consume a diet of 500 calories a day for two to three weeks. (During the study, participants live at Columbia’s Irving Institute for Translational and Clinical Research and are closely monitored.)

With five, small 100 calories meals a day, the pancreas of a person with diabetes may be able to secrete enough insulin to keep glucose levels normal, Dr. Korner says. That may be one reason why surgical patients, who typically consume 500 calories a day after surgery, can come off their insulin and medications.

If the diet participants do as well as the surgical patients, “we’ll know that the effect of the surgery is really due to the diet,” says Dr. Korner. “If the bypass surgery has something else going on, the surgical patients will have better results.”

Dr. Korner suspects gastric bypass may have an edge over diet because of a change in hormone levels seen after surgery. Immediately after gastric bypass, Dr. Korner and others have documented an increase in the amount of GLP-1 released from the gut after a meal. GLP-1 helps the pancreas make more insulin, suppresses hunger, and over time may rejuvenate cells in the pancreas that make insulin.

Other Columbia research published this past spring also reveals that other factors besides gut hormones may be at play. A study led by Blandine Laferriere, M.D., associate professor of medicine, discovered a sharp decrease in the amount of amino acids circulating in the blood after surgery, which may improve glucose control and insulin sensitivity.

“This is a new and exciting area of research,” Dr. Korner says, and it reveals just how much remains to be learned about the effects of bariatric surgery on the body. “I think by studying gastric bypass surgery we’re learning a lot about how we can better treat diabetes. If it’s true that surgery treats diabetes independently of diet, then there must be something we can find and produce in a pill.”

Anyone interested in participating in the surgery vs. diet trial can call 212-342-0281.
The human face of psychiatry has many forms, but the schizophrenia patient may best exemplify the hope—and the frustrations—of a field of medicine that needs and wants to be in the mainstream of health care, not marginalized as it was a century ago.

Prevailing views of mental illness have been turned on their heads over the past century, but the question remains: Is psychiatry part of mainstream medicine or on the banks?

The integration of psychiatry into mainstream medicine is a key goal of today’s psychiatrists. That’s easier said than done, though, considering the many challenges that include the continuing stigma of mental illness, the public persona of psychiatrists as pill-pushers, news media stories that focus on the extremes of mental problems, and the elusiveness of causes of problems that have such severe impact on families and society.

Schizophrenia, perhaps more than other mental illnesses, touches upon all of these challenges but also reflects the hopes psychiatry pins on research. The work of psychiatrist-researcher Anissa Abi-Dargham, M.D., chief of the Division of Translational Imaging, shows how brain imaging, basic neuroscience research, and translational research—moving findings from the clinic to the laboratory to the clinic again—are fueling advances in psychiatry.

Dr. Abi-Dargham uses sophisticated imaging tools to peer inside the brains of people with schizophrenia to try to understand how their brain circuits and neurotransmitters go awry. In 1996, she made a novel discovery: She identified the striatum, a subcortical region, as the site where schizophrenia’s neural dopaminergic pathways are significantly overactive, leading to excess stimulation of one of the dopaminergic receptors in that brain region, the D2 receptor.

This work inspired the laboratory of Eric Kandel, M.D., University Professor, Kavli Professor of Brain Science, and 2000 co-recipient of the Nobel Prize, to genetically engineer a mouse with excess D2 receptors in its

Psychiatry Makes Progress on Understanding Disease but Does Not Give Up on Identifying the Still Unknown

A Life Examined

By Robin Eisner and Bonita Eaton Enochs | Illustrations by Keith Negley
because human behavior, thoughts, and emotions are a part of every illness a patient faces.

...today psychiatry is the glue of all of medicine because human behavior, thoughts, and emotions are a part of every illness a patient faces.

Before psychiatry is truly accepted as part of mainstream medicine, though, modern psychiatrists have to overturn prejudice that psychiatry is different from any other medical specialty, say cardiology. Why can’t helping a person survive emotional problems be just as valued as helping a person survive a heart attack? Psychiatry today still gets criticized because it does not know the causes of all conditions it treats, but Jeffrey Lieberman, M.D., the Lawrence C. Kolb Professor and chair of psychiatry at P&S and the Lieber Chair of Schizophrenia Research, likes to point out that “we don’t know the etiology of all medical conditions, such as cancer. And, pneumonia can be bacterial, viral, fungal, or aspirational. Not knowing the cause does not prevent physicians from appropriately treating these diseases.”

An important effort to try to link causality and diagnosis in psychiatry is the work of Michael First, M.D., professor of clinical psychiatry and a leading expert on psychiatric diagnosis and assessment. Dr. First is working with Thomas Insel, M.D., director of the National Institute of Mental Health, to develop a new way to diagnose psychiatric brain dysfunction by looking at neurocircuitry patterns, genes, and behavior across psychiatric diseases that share similar symptoms and may have similar causes. A person with depression may have anxiety, for example, and a person with anxiety might be depressed. Both might share similar brain patterns and genes, with subtle differences that distinguish the two. Schizophrenia and bipolar disorder share some genetic roots, suggesting psychiatric diseases are not discrete conditions.

This diagnostic effort based on neurocircuitry, genes, and behavior is built on two decades of research at the molecular, imaging, and behavioral levels that has ushered psychiatry into the scientific era. “Within my lifetime as a psychiatrist I have seen the acceleration of knowledge about the relationship of brain dysfunction with mental illness,” says Dr. Lieberman, who was a psychiatry resident in the 1970s. “We can now take a behavior or an emotion and see the neuronal pathway in the brain and the cellular processes in synapses and gene expression profiles that correlate with the mental activity.” While chairs of psychiatry departments in the 1970s and earlier might have been Freudians, today’s chairs, in the mold of Dr. Lieberman, pursue basic and clinical research. Dr. Lieberman’s focus is on the neurobiology, pharmacology, and treatment of schizophrenia.
In the early 19th century, psychiatry was part of neurology (Sigmund Freud, in fact, trained as a neurologist), but psychiatry’s development paralleled the rise in neurology’s fortunes after neurologists began analyzing individual neurons to explain functions of the nervous system and were able to use postmortem and microscopic technique to correlate neurologic syndromes and neuropathologic changes. That left psychiatry to focus on disorders affecting mental function and behavior for which causes were unknown. Psychiatric patients at that time were treated by so-called alienists (because the patients were thought to be estranged, or “alienated,” from their normal faculties) in asylums, which initially were believed to be humanistic places to protect the afflicted but were located in rural areas, perhaps to protect the public from the patients.

An early proponent of a medical basis for mental illness was Benjamin Rush, a Philadelphia physician (and Declaration of Independence signatory), who published a treatise in 1812 then wrote to former President John Adams about his beliefs: “I have endeavored to bring [diseases of the mind] down to the level of all other diseases of the human body, and to show that the mind and body are moved by the same causes and subject to the same laws.”

In the late 19th century, Freud and others developed theories of the unconscious to explain the causes of mental illness. “But there was no scientific basis for their theories,” Dr. Lieberman says. As a result, little scientific progress in psychiatric research was made for about 50 years.

“The idea was beginning that these disorders were not due to moral weakness but likely caused by something in the brain,” says Dr. Lieberman. By the 1960s and 1970s, drugs, such as lithium for bipolar disorder, amitriptyline for depression, and chlorpromazine for psychosis, became available, furthering the idea that brain chemistry disruptions were responsible for psychiatric illness. “With the advent of psychopharmacology, psychiatry was changed,” says Dr. Kandel, “and that change brought it back into the mainstream of academic medicine.”

Even as Freudian ideas were waning and biological psychiatry was rising, psychiatrists still had difficulty reliably diagnosing patients. “Two psychiatrists would often come up with completely different diagnoses of the same patient,” says Dr. First. To attempt to make psychiatric diagnosis more scientific and to eliminate Freudian dogma, Robert Spitzer, M.D., now professor emeritus of psychiatry, developed a new diagnostic system for psychiatry in the third edition of the DSM, the Diagnostic and Statistical Manual of Mental Disorders. Released in 1980, DSM-III removed Freudian terminologies and listed symptoms and criteria for diagnosis that psychiatrists had agreed on.

“DSM-III didn’t presume knowledge of the cause of mental illness, but it allowed psychiatrists to agree on lists of symptoms to make a diagnosis,” says Dr. First. “It was hoped the listing of symptoms would lead to a better understanding of the causes of mental illness, which to this day it has not, although DSM has helped with clinical trials of similar patient populations that have improved treatments for patients.” DSM-5, currently in development, is scheduled for publication in 2013.

Regardless of the causes of debilitating conditions, patients need to be helped with treatments based on the best available evidence from clinical research. But in looking to the future, Harold Pincus, M.D., professor of psychiatry and vice chair of strategic initiatives, asks: “Should we focus on research that pays dividends in the future or on the needs of current patients? Should we focus on the borders of normal behavior and moderate mental illness or on severe mental illness? Psychiatry has to have a balanced portfolio to try to answer all of these questions.”

As the nation’s largest recipient of NIH grant money, the Department of Psychiatry and the New York State Psychiatric Institute are leaders in all aspects of psychiatric treatment and research. The institute’s 22 centers, 23 divisions, and numerous clinics span child psychiatry, eating disorders, policy and ethics, substance abuse, anxiety, schizophrenia, and cognitive neuroscience.

Besides performing extensive research at the biological level, Columbia psychiatry faculty study the effectiveness
of a wide range of treatments – medications, brain stimulation, psychotherapeutic approaches, and combinations of all of these – to help patients.

Although medical specialists tend to line up along departmental lines and have discrete responsibilities – with psychiatrists being the specialists who treat mental illness – psychiatry to some extent is part of every encounter with a patient, says Dr. Bernstein. “My vision of optimal patient care would be to have psychiatrists working in close proximity to their other medical colleagues so that they could provide consultations either in a ‘curbside’ fashion, directly with the patient and the other physician in the room or by seeing the patient separately. Conversely, most patients suffering from chronic psychiatric illnesses need similar ready access to their medical physicians. The segregation of psychiatric care from general medical care has prevented all patients from receiving integrated treatment, has restricted access to psychiatric services, and contributed to the stigmatization of patients suffering from any type of psychiatric disorder.”

Two Columbia programs, one old and one new, integrate physical and psychiatric medicine by helping hospitalized patients who have psychiatric needs. The Consultation-Liaison Psychiatry Service, led for many years by Donald S. Kornfeld, M.D., and currently directed by Philip R. Muskin, M.D., professor of clinical psychiatry, is the more mature program, having been around Columbia for more than 50 years. Staffed by 11 psychiatrists, a psychologist, an advanced practice nurse, several fellows in psychosomatic medicine, psychiatry residents, a neurology resident, and third- and fourth-year medical students, the service provides psychiatric care to inpatients in Milstein and women on the obstetrical service in the Sloane Hospital for Women, housed in Children’s Hospital of New York. Approximately 2,000 patients receive consultations annually (for depression, delirium, evaluation of a patient’s capacity to make medical decisions, and other psychiatric conditions). The service also tallies about 2,000 consultations with potential organ donors or transplant recipients.

The new kid on the hospital team is the Barbara Jonas Psychiatric Hospitalist, embedded in the consultation-liaison program but also part of NYP’s team of Department of Medicine hospitalists, physicians who specialize solely in the care of hospitalized patients. Philanthropists Donald and Barbara Jonas gave money to support the psychiatric hospitalist in honor of the lifelong mental health commitment of Herbert Pardes, the recently retired hospital president and CEO. The three-year pilot program is intended to reduce the overall length of hospital stay by intervening sooner when psychiatric consults are needed. Just a year into the program, the delay in requests for a consultation has already been impacted: The mean delay before a consultation request in the traditional consultation-liaison model is six days, but for patients on the hospitalist service, which has its own psychiatrist, the mean delay is zero days, reflecting more integrated use of psychiatric expertise.

**Though times have changed,** the stigma of mental illness remains, among the public, patients, and even medical professionals. Perhaps, Dr. Lieberman says, the stigma is a holdover from the times when patients with mental illness were shut away and shunned, leading people to be fearful of psychiatric illness. Adds Dr. Bernstein: “Mental illness affects behavior, emotion, and thought, the very characteristics that make us uniquely human.”

“Pretty much every family is affected in some way by someone suffering from a mental health issue, but it is still a big scary secret,” adds Dr. Lieberman. Doctors from other disciplines marginalized psychiatry first because it lacked a scientific foundation, then because “they couldn’t fix the problem with their hands.”

Psychiatric illness is an enormous economic burden on the health care system when the many hidden costs are included. Psychiatric disease represents 5 percent of direct costs, but leading indirect costs are lost productivity, absenteeism, and criminal justice system expen-
As with choosing other medical specialties, medical students choose psychiatry because of exposure to patients during clerkships and supportive relationships with specialists they admire, Dr. Oquendo says. While communication is a vital skill for all physicians, medical students who become psychiatrists may choose psychiatry because communicating with patients, addressing their emotions, and understanding thought processes is such a vital part of treatment.

Psychiatry has been a popular choice among P&S graduates for at least the past two decades. Most years, about twice as many P&S graduates choose psychiatry residencies compared with choices by medical school graduates elsewhere, says Janis Cutler, M.D., professor of clinical psychiatry and director of undergraduate psychiatry education at P&S.

“As physicians have less and less time with patients, we pride ourselves in psychiatry that we talk about thoughts and emotions with our patients, their lives, and how illness affects them,” Dr. Bernstein says. “We may have multiple biological research and evidence-based methods, but treatment comes down to the judgment of the physician and his or her relationship with the patient. Although we discuss feelings and behavior with our patients, we are just like physicians in any other medical specialty who help their patients live with a chronic condition, such as asthma, arthritis, diabetes, or heart disease. In our case, we help our patients live meaningful lives with mental illness.”

Even as psychiatry is welcomed as a full-fledged member of the medical profession – buoyed by science- and evidence-based therapy, coordination in diagnosing mental illness, and a recognition that help most often comes in the form of some combination of pharmaceutical and traditional psychotherapeutic therapy – frustration remains in not being able to consistently help people suffering from mental disorders that have such a disruptive impact on themselves, their families, and society. Psychiatrists are asked to help the most challenging patients in the health care system – the psychotic, depressed, addicted, and demented – so they will continue to seek to understand and treat what is unknown, and perhaps unknowable. 

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**Translational research aimed at understanding the causes of mental illnesses and developing novel treatments is a long-term proposition.**

Although research in neuroscience and psychiatry is moving quickly, Dr. Pincus cautions against promising too much. Translational research aimed at understanding the causes of mental illnesses and developing novel treatments is a long-term proposition. “We still always have to focus on taking care of patients today,” he says. And training tomorrow’s psychiatrists.

“At Columbia, we want to train our clinicians how to treat patients with medical therapy in a variety of settings and to conduct or read about the science of psychiatry critically over their careers, as the field is changing,” says Maria Oquendo’84, professor of clinical psychiatry, vice chair for education, and residency director.

Residents receive their training in a variety of settings: hospitals; outpatient programs, both for individuals and groups; community advocacy groups; research clinics; and the criminal justice system. “I had broad exposure to pharmacology, psychotherapy, and neuroscience,” says Jonathan Amiel’07, who recently completed his chief residency in psychiatry and is now assistant professor of clinical psychiatry and assistant dean for curricular affairs at P&S.

Although research in neuroscience and psychiatry is moving quickly, Dr. Pincus cautions against promising too much. Translational research aimed at understanding the causes of mental illnesses and developing novel treatments is a long-term proposition.
Students Matching to Family Medicine: Blip or Sign of Change?

Over the past 10 years, the number of P&S graduates seeking family medicine residencies each year remained virtually unchanged—one or two annually, with the notable exception of four in 2002. In 2003 and 2004, in fact, no P&S student chose family medicine for training.

P&S traditionally has been viewed as a school for specialists, not generalists. Columbia and NewYork-Presbyterian Hospital’s family medicine residency started in 1996, late when compared with programs at Duke (1972), Johns Hopkins (1973), and Georgetown (1977).

Faculty members were startled, then, to see that in 2011, an unprecedented nine members of the P&S graduating class matched to family medicine residencies, two of them at NYP/Columbia and seven to programs elsewhere in New York, Wisconsin, Idaho, Washington state, and Massachusetts.

The numbers at P&S mirror a national trend: The number of U.S. medical school graduates who matched to family medicine rose by 11 percent in 2011, according to the Association of American Medical Colleges. But that still pales next to the P&S hike, which is an increase of more than 400 percent over the typical year.

What’s behind this explosion of interest in family medicine? Is it a blip, a one-year anomaly, or does it represent a shift in the status of family medicine at P&S?

At least one newly minted family medicine resident thinks the increase is due to a unique attribute of the Class of 2011. “I think everyone is hoping that this will be a trend, but I’m not so sure that it will be,” says Nicholas Yagoda’11, now in his first year of residency at the Greater Lawrence Family Health Center in Massachusetts. “There seemed to be some coincidence or mix of factors that brought

By Gina Shaw • Illustrations by James Steinberg
Oriented

family

A lot of like-minded people who were very concerned with some of the more social aspects of primary care and the use of primary care as leverage for health care reform. In alternate lives, a lot of us could have been social workers. For four years, we all wondered what it was that brought so many people to Columbia at the same time who were so interested in medicine and social policy.”

A National Trend
The Class of 2011 may have been absorbing a growing national conversation about access to health care. “With the passage of the new health care law, we’re hoping to expand access to care to many more people, and that means there will be a need for family physicians to see people who are newly insured,” says Richard Younge, M.D., assistant professor of clinical medicine and the new director of the Center for Family and Community Medicine at P&S. “Students are seeing the need for primary care, and family medicine is one way of approaching that. There was also an increase in students matching to internal medicine from this class as well.”

Primary care physicians – doctors board-certified in pediatrics, internal medicine, or family medicine – are the first point of contact for an individual and the health care system; they manage continuing care of a variety of acute and chronic conditions, not limited to any one type of disease or organ system, and also provide health promotion and disease prevention. Internal medicine focuses on adults and has a significant inpatient care element; the specialty of pediatrics includes elements of both inpatient and outpatient care of children. Family medicine differs from internal medicine and pediatrics by providing full-spectrum patient care from infancy through adulthood. While they may generally focus more on outpatient care, family medicine practitioners also deliver babies, perform surgery, and provide mental health care and preventive medicine services. Focus also includes an eye on the ways family members influence each other’s health. All family medicine practitioners provide primary care, but not all primary care physicians are family medicine practitioners.

Mary Jo Fink, M.D., assistant professor of clinical medicine and a family medicine specialist, says the Class of 2011 may represent the leading edge of a new type of medical student. “At graduation this year, our speaker [Haile Debas, M.D, director of the UC Global Health Institute at the University of California-San Francisco], talked about the ‘millennium generation’ as globally connected young people, individuals with a deep conscience and sense of other people,” Dr. Fink recalls. “I notice this strong service orientation with the students I come in contact with. Many of them are interested in family medicine as an avenue to explore ways to be connected to the greater world. So what people are bringing with them to medical school today may be a little different than in the past.”

Even if the yearning toward family medicine already lay within the hearts of many of the Class of 2011, Dr. Yagoda acknowledges that family medicine’s increasing visibility at Columbia in recent years may have helped push some students in that direction.

Even after the family medicine residency started at NYP/Columbia in 1996, students did not have much interaction with family medicine faculty. “That really began to change a couple of years ago,” says Dr. Younge. “We began to take a major role in teaching in all four years of the curriculum. Today, about half the practices where students go in the third year for primary care training are family medicine.

“During the first year, students spend a few weeks working in different clinical settings, and we have a number of family physicians who have students working with them during that time. A few students come to Farrell Family Practice, where we have our residency program; others work with Dr. [James] Spears at the Actors’ Fund. As we’ve grown as a center, we’ve been able to be involved in medical student teaching much earlier on, and much more extensively, than in the past.”
That modeling shows students that family medicine is a viable career path. “It’s all in how the students interact with family physicians clinically,” says James Spears, M.D., assistant professor of clinical medicine, who runs the Al Hirschfeld Free Clinic for entertainment industry professionals and supervises the Columbia-Harlem Homeless Medical Project, or CHHMP.

“That’s how they get the exposure, that’s how they see how family medicine really works. If they have no exposure to family medicine in their first two years, they are unlikely to think of it as something that they might want to do.”

A Drive to Serve

Student-run free clinics, such as CHHMP, Columbia Student Medical Outreach (CoSMO), and the Columbia University Harm Reduction Outreach Network (CUHRON), provide primary care to underserved populations and offer students exposure that may play a role in the growth of interest in family medicine.

“All of these programs start from the sense of wanting to serve, wanting to get outside the walls of the institution,” says Matthew Spitzer, M.D., assistant professor of clinical medicine and director of predoctoral education at the Center for Family and Community Medicine. “(He also serves as president of the board of directors for Médecins Sans Frontières/Doctors Without Borders USA and is active in the organization’s field missions.) “What they find out there is rich and stimulating, and it goes along with what family medicine does: a broader understanding of the patient and a deeper, more nuanced focus on what they need.”

CoSMO and CHHMP seemed to be a common factor among Class of 2011 students who chose primary care. (CUHRON was launched in 2010.) “All the students that I know of who chose either family medicine or primary care/internal medicine tracks worked in either CoSMO or CHHMP,” observes Dr. Fink. “I think that’s a factor we need to study.”

CHHMP played a role when Danny Neghassi’11 was deciding what he wanted in his medical career, but he also was influenced by a first-year clerkship at a Harlem clinic. “I still remember one family who came back three times, a mom with three sons. One of the kids potentially had a learning disability, another had suicidal thoughts, and there was poor diet throughout the family,” says Dr. Neghassi, now a first-year resident at NYP/Columbia. “I got to know them well over time, and we were able to get below the surface with them a bit and work through some of their problems, focusing on prevention and the intersection between lifestyle and mental and physical health.”

His commitment was reinforced at CHHMP. “I saw a few families, one with two boys, the mother was pregnant and had a history of depression, living in a family shelter. They found us through the church and it was a coordinated effort between our psychiatrist, the medical students, and the church’s minister to get the family plugged into the services they needed. Providing health care in a low-resource setting, relying on history and physical to make a diagnosis, and trying to understand where the patient is coming from and how best to help them with what they need – that’s what I want to do.”

A Whole-Patient Focus

Crissaris Sarnelli’11, who also has begun a residency at NYP/Columbia, didn’t know that family medicine existed when she came to Columbia, or at least what to call it. “At some point, I think I was always interested in family medicine,” she says. “I like that you’re looking at the patient as a whole person, taking into account their psychosocial background. I was always interested in how patients thought and felt about their health and in their ability and motivation to change habits.”

Initially, she found herself drawn to pediatrics then to obstetrics, but neither seemed like a perfect fit. “In both cases, I liked the primary care aspect, seeing patients in clinic instead of inside a hospital. But I didn’t like any of the more super-specialized aspects of what I was doing.”

Then Dr. Sarnelli spoke with Dr. Fink, one of her mentors. “It came home for me, talking to her, that what I really wanted to do as a doctor – have a relationship with my patients and continuity of care, meet people where they are, and help them get to where they want to be in their health – was best addressed by family medicine training.”

Giving Family Medicine a Voice

Dr. Younge has some ideas for giving family medicine a stronger voice. “Family medicine is by nature, clinically, a longitudinal experience. I’d like to see students get involved in taking care of patients in a more longitudinal way from the beginning, like they’re doing at the Columbia-Bassett Program and with the Brown Scholars [a special four-year track for students interested in primary care],” he says.

“If we could do that here, with students coming to do their first clinical experience and physical diagnosis with our faculty at Farrell, and their primary care clerkship here, seeing patients longitudinally over more than five weeks, I think that would be important.”

He also would like to see the new curriculum leveraged to advance family medicine. “We hope to offer students opportunities to do their scholarly projects in service learning, through programs like CoSMO, CUHRON, and CHHMP, for example, research initiatives to understand the impact of these programs.”

“I like that you’re looking at the patient as a whole person, taking into account their psychosocial background.” —Crissaris Sarnelli’11
Above: Mothers’ Class, c.1919 (Visiting Nurse Service of NY Records)

Below: Original medical staff, Base Hospital No. 2, Étretat, France, 1917
Donations of the Paper Kind

Elizabeth Lominska Johnson, great-granddaughter of George Huntington, P&S 1871, on behalf of the Lominska Family. Correspondence, photographs, biographical materials, and books of George Huntington, his parents, children, and other family members (1 cubic foot). In 1872, Huntington published an article, “On Chorea,” that led to Huntington’s disease being named for him. Of particular interest in the papers are several drawings by Huntington, a talented amateur artist and caricaturist. In one, Huntington is surrounded by five of his children who are busily distracting him as he vainly tries to read. The papers were preserved and organized by Huntington’s granddaughter, Jean Ketcham Lominska, who died in 2010 at age 96. In her memory, the papers will be known as the Jean Ketcham Lominska Collection of George Huntington Family Papers.

Robert Fortuine, M.D., son of Stanley Fortuine, P&S 1916. His father’s student notebooks, 1912-1916 (.66 cubic feet)

Ken Browne, executor of the estate of Albert Grokoest’43D. Additions, 1945-1990, to the Grokoest papers (.5 cubic feet)

Jill Beres, widow of Paul Beres’52. Souvenir brochure titled “Banquet Tendered to Dr. Jacob Fuhs on the Occasion of the 75th Anniversary of his Birth and the 50th Anniversary of his Graduation in Medicine...Unity Club, Brooklyn, N.Y., Dec. 17, 1924.” Included are five pages of signatures of attendees.

Edgar M. Housepian’53, professor emeritus of clinical neurological surgery. Papers, 1957-2007, documenting his career as a neurosurgeon, medical educator, and leader of medical aid to Armenia after its devastating 1988 earthquake (13 cubic feet)

Anneliese L. Sitarz’54, professor emeritus of clinical pediatrics. Additions to her papers, 1957-2008. Largely correspondence from patients and their families in Dr. Sitarz’s practice of pediatric oncology (.66 cubic feet)

Lawrence J. Cohn’61. “Exodus: Presented to Charles A. Ragan Jr. by his House Staff in the Year of Our Lord Nineteen Hundred and Sixty Eight of Columbia at Bellevue One Hundred Forty-Fourth.” A photo album of faculty and residents at the 1st Medical (Columbia) Division of Bellevue Hospital presented to Ragan, who was director of the division. This was Columbia’s last year at Bellevue; in 1969 all Columbia activities were transferred to Harlem Hospital. (1 vol.)


Estate of A. Bernard Ackerman’62. Papers of Dr. Ackerman, a noted dermatopathologist. Included are transcripts of and notes on trials he was involved in as an expert witness, especially the Jean Harris “Scarsdale Diet Doctor” murder case, 1980-81.

James F. Burris’74. Papers, 1980s-1990s, documenting his work conducting clinical drug trials (4 cubic feet)


Allen I. Hyman, M.D., professor emeritus of anesthesiology. Leonard J. Corning. “Local Anaesthesia in General Medicine and Surgery, Being the Practical Application of the Author’s Recent Discoveries” (New York: D. Appleton, 1886). This copy of the first textbook of local anesthesia was a gift to the Lena and Louis Collection in the History of Anesthesiology, established by Dr. Hyman in 1982.


Babies Hospital Alumni Association. Records, 1928-2008 (16 cubic feet). Correspondence, minutes, reports, photographs, and memorabilia

Wheeler Library, Eye Institute. Board of Trustees minutes, New York Ophthalmic and Aural Institute, 1869-1896 (2 vols.)

Matthew J. Winkler. Student notebook, 1895-1896, of Merton J. Coates, pharmacy 1896 (1 vol.)

Robert Fortuine, M.D., nephew of F. Esther Fortuine, Nursing 1916. Diaries, photographs, a sketchbook, letters, postcards, programs, newspaper clippings, medals, and other papers and memorabilia of Florence Esther Fortuine (1886-1960), a 1916 graduate of the Presbyterian Hospital Training School for Nurses. The bulk of the material documents her service with Base Hospital No. 2 (Presbyterian Hospital) stationed at Étretat, France, during World War I (.33 cubic feet).


Irving Kittay, College of Dental Medicine 1941. Dental instruments, mid-20th century (4 items)

Dorothy E. Reilly, Nursing 1942. Papers, c.1958-c.1990, including lecture notes, teaching materials, speeches, presentations, and other materials relating to her career as a nursing faculty member at both Columbia and Wayne State universities (2 cubic feet). Donated by Milbank Library, Teachers College.

New York Academy of Medicine. 23 volumes of nursing texts, 1888-1929

Clarence E. Pearson. Papers of the President’s Committee on Health Education, 1969-1978 (1.75 cubic feet). Minutes, correspondence, reports, and other documents gathered by Pearson while serving as associate director of the Committee, which was established to evaluate health education in the United States. Donated by Milbank Library, Teachers College.

Visiting Nurse Service of New York. Records, 1889-2007 (128 cubic feet). Correspondence, board and committee minutes, directors’ records, photographs, promotional materials, film, recordings, and artifacts documenting the history of the VNSNY from its founding by Lillian Wald as the Henry Street Settlement Visiting Nurse Service. A deposit by the VNSNY.
Grad Students Go from Bench to Blackboard

While research and scholarship are the defining features of graduate student education, science communication is increasingly seen as a fundamental tool of a successful scientist. Two community service opportunities in particular have drawn graduate students away from the bench and into New York City classrooms to augment their communication skills by teaching to an eager crowd: Columbia University Neuroscience Outreach, or CUNO, and the Afterschool Science, Technology, Engineering, and Mathematics, or STEM, Mentoring Program sponsored by the New York Academy of Sciences.

Kelley Remole’11 Ph.D. was a doctoral student when she founded CUNO in 2006 to place graduate student scientists in classrooms throughout New York City. CUNO has grown from three volunteers who visited one school to 34 CUNO volunteers who visited 16 schools in the 2010-2011 school year under current CUNO president Cate Jensen (doctoral candidate in the Department of Neuroscience). In that year alone, CUNO volunteers contributed to the education of nearly 1,000 New York City school students, who interacted with scientists, learned about the brain through hands-on lessons, and often touched a preserved human brain. Ms. Jensen explains the motivation behind the visits: “Neuroscience is a multidisciplinary field with broad public interest, so it is a handy tool for engaging even young children in science. Our goal at CUNO is not to...
Graduate Students Awards, Fellowships, Honors, 2010-2011

(student name in bold; mentor noted by parentheses)

**Dean’s Award for Excellence in Research:**

- **Eleni P. Mimitou,** “DNA end Resection in *Saccharomyces cerevisiae*: Mechanism and Implications” (Lorraine Symington);
- **Neal A. Paragas,** “NTBI Pathways in the Kidney: NGAL Scavenges Iron to Defend the Urinary System from Infection” (Jonathan Barasch)

**Titus M. Coan Prize for Excellence in Research in Basic Cell & Molecular Biology:**

- **Mari-Liis Visnapuu,** “Real Time Visualization of Nucleosome Dynamics in a High-throughput Single Molecule Assay” (Eric Greene)

**Titus M. Coan Prize for Excellence in Research in Translational Biology:**

- **Alexander Kushnir,** “Phosphorylation of the Ryanodine Receptor in the Cardiac Response to Acute Stress and Heart Failure” (Andrew Marks)

**Integrated Program in Cellular, Molecular and Biomedical Studies:**

- **Jayson Bastien,** NIH-NIGMS Fellowship, “The Study of Phosphatidic Acid and Phospholipase D in Membrane Trafficking” (Gil Di Paolo);
- **Paul Harvilla,** NSF Graduate Research Fellowship Honorable Mention, “Protein Dynamics of Thermophilic and Mesophilic Orotidine 5′-monophosphate Decarboxylase using Nuclear Magnetic Resonance Spectroscopy” (Arthur Palmer);
- **Tessa Hirschfeld-Stoler,** NSF Graduate Research Fellowship Honorable Mention, “Intercellular Propagation of Tau Aggregates: A Role in Tau Pathology Spread in the Brain” (Carol Troy);
- **Colleen Lau,** NSF Graduate Research Fellowship Honorable Mention, “*In vivo* Visualization of Hematopoietic Stem Cell Activity within the Mouse Bone Marrow” (Boris Reizis)

**Genetics and Development:**

- **Daniel Concepcion,** NIH-NICHD Fellowship, “The Role of TBX6 in the Determination of Left-Right Asymmetry in Mice” (Charles Zuker);
- **Ryan Lessard,** NSF Graduate Research Fellowship Award, “The Processing of Temperature Information in the Drosophila Brain” (Ginny Papaiannou);
- **Tulsi Patel,** NSF Graduate Research Fellowship Award, “Molecular Mechanisms of Cell Fate Reprogramming” (Oliver Hobert)

**Microbiology, Immunology and Infection:**

- **Sarah Deng,** NSF Graduate Research Fellowship Honorable Mention, “The Role of Exo1 in the Conversion and Repair of Camptothecin-Induced DNA Lesions” (Lorraine Symington);
- **Kanako Lewis,** Richard C. Parker Graduate Student Award (Boris Reizis)

**Neurobiology and Behavior:**

- **Scott Bolkan,** NSF Graduate Research Fellowship Honorable Mention, “Functional Circuitry of Motor Cortex Organization” (Richard C. Parker)
Putting graduate students in classrooms gives grade school, middle school, and high school students a chance to meet and learn from scientists

Graduate students gain confidence in their teaching ability while the impact on the kids they mentored is immeasurable. Imagine for a second what it must be like to have a real live scientist bring a human brain into your classroom or help you extract DNA from your cheek cells. The kids were so excited they forgot their preconceptions of science as being boring or hard.

Richard Robinson, Ph.D., associate dean for graduate affairs, was involved in the initial planning of the NYAS STEM program and continues to work with the academy to improve the program and advocate for Columbia’s STEM mentors. He encourages graduate students to learn about and participate in these kinds of programs. “These programs not only provide an opportunity for our students to gain valuable experience and insight into the teaching of science, but also emphasize the importance of scientists giving back to their communities,” he says.

Columbia reinforced its commitment to science outreach by hiring Dr. Remole as director of neuroscience outreach for the future Jerome L. Greene Science Center on the Manhattanville campus. Dr. Remole is planning the public education spaces in the center and designing programs to augment outreach activities on campus.

These science outreach programs plus other efforts at the medical center, such as the Mott Hall Science Mentoring Program, benefit the volunteers and mentors by supplying organizational structure, pedagogy training, and curriculum ideas while also allowing graduate students to move beyond supplied lesson plans. This flexibility for creativity fosters a sense of ownership of the materials and encourages scientists to continue their educational efforts. For the school students taught by graduate students, lessons supplement their science education and provide them with the rare opportunity to meet and learn from scientists. It is our hope that the continued support of the Columbia administration and the increased exposure of these programs across campus will allow more members of the community to help us enhance science education throughout New York City.

Kelley Remole, who received her Ph.D. from Columbia in 2011, is director of neuroscience outreach and can be reached at ker40@columbia.edu. Heather McKellar, who received her Ph.D. from Columbia in 2011, is program assistant at the NYU Neuroscience Institute; she can be reached at heather.mckellar@nyumc.org.

of Spatial Working Memory in the Mouse”; Rebecca Brachman, NSF Graduate Research Fellowship Honorable Mention, “Novel Optogenetic Manipulation of Hippocampal-dependent Contextual Fear Conditioning Memory”; Anita Burgos, NSF Graduate Research Fellowship Award, “Characterizing the Serotonergic Brain Regions and Neuronal Pathways Implicated in Zebrafish Aggression”; Gist Croft, Brunie Prize in Neural Stem Cell Research (Christopher Henderson); Burcin Ikiz, Brunie Prize in Neural Stem Cell Research (Serge Przedborski); Matthew Lovett-Barron, NSF Graduate Research Fellowship Honorable Mention, “Inhibitory Control of Neuronal Output Mode in Hippocampal Pyramidal Neurons” (Attila Losonczy); Timothy Machado, NSF Graduate Research Fellowship Award, “Dissecting Spinal Motor Circuits by Fast Optical Imaging of Identified Interneurons” (Thomas Jessell);

Benjamin Matthews, Kavli Graduate Thesis Award, “Dendrite Self-Avoidance is Controlled by Dscam and Counterbalanced Attractive Guidance Signaling in Drosophila” (Wesley Grueber); Derek Oakley, NIH-NIA Fellowship, “Modifiers of Age of Onset in ALS Studies Using Patient IPS-Derived Motor Neurons” (Christopher Henderson); Krista Spiller, NSF Graduate Research Fellowship Award, “Role of PHD3 in Developmental Motor Neuron Death” (Christopher Henderson); Martin Vignovich, NSF Graduate Research Fellowship Honorable Mention, “Drosophila Courtship Behavior: A Model for Sensory Integration and Decision Making”; Yixing Xu, Dean’s Day Steiner Award for Research, “The Oculomotor System Does Not Use Visual Gain Fields to Calculate Saccade Target Positions”

Nutritional and Metabolic Biology: Dianne Dapito, NIH-NIDDK Fellowship, “The Contribution of Activated Hepatic Stellate Cells to Hepatocarcinogenesis” (Robert Schwabe); Elizabeth Millings, NSF Graduate Research Fellowship Award, “Investigating Variations in Gene Expression Between the Fed and Fasted States in Liver-specific Knockouts of FoxO1”

Pathobiology and Molecular Medicine: Kimberly Robinson, NIH-NINDS Fellowship, “Phospholipase D1 in Alzheimer’s Precursor Protein Trafficking and Processing” (Gil Di Paolo)

Pharmacology and Molecular Signaling: Douglas Barrows, NSF Graduate Research Fellowship Honorable Mention, “Novel Regulation of PTEN Mediated by PH Domain Driven Interactions” (Ramon Parsons); Mi Wang, Brian F. Hoffman Award for Excellence in Graduate Studies in Pharmacology
1937
Ephraim P. Engleman turned 100 March 24, 2011. California Gov. Jerry Brown issued a proclamation celebrating his birthday, and he was featured in newspaper and online articles and TV interviews, including one with Robert Bazell of NBC News, which aired on the network’s evening newscast on July 26, 2011. He and his wife, Jean, recently celebrated 70 years of marriage. He has been at UCSF since 1948 and continues to see patients at the Rosalind Russell Medical Research Center for Arthritis, which he directs. Links to articles and videos about his birthday can be found at P&S online’s class notes.

1947
James F. Holland, Distinguished Professor of Neoplastic Diseases at Mount Sinai School of Medicine in New York, was featured in an interview published in April 2011 by the ASCO Post, a publication produced in collaboration with the American Society of Clinical Oncology. The interview, “A Conversation with James F. Holland, MD, Reflections on cancer research, prevention, cure, and the common house mouse,” is available online at www.ascopost.com/articles/april-15-2011/a-conversation-with-james-f-holland-md.aspx

1961
John A. Talbott has assumed the role of moderator at a discussion forum on Paris by Mouth – http://parisbymouth.com – a collaborative website of 12 food bloggers in Paris. His bio explains his passion for Paris and food: “John Talbott was surely born in France of a chef father and food critic mother but spirited away to a forced childhood in America where he learned to cook, write, and eat. At 18, he returned for a summer and has been in love with France and Paris ever since. He began reviewing restaurants and privately compiling a list of favorites 25 years ago. Since 2004, he has been involved with web activities at eGullet, Chow, and now John Talbott’s Paris. He eats out every day he is in France and tries to drag his incredibly understanding wife, Colette, children, and grandchildren as well as friends along with him.” Paris by Mouth is edited by established food writers and strives to change the way people find and appreciate delicious things in Paris. John’s own web site is http://johntalbottparis.typepad.com.

1962
Sherman Bull received Stamford Hospital’s Physician Recognition Award in June 2011. Sherman, an attending surgeon at Stamford, was nominated by fellow physicians and hospital personnel. The Physician Recognition Award is given quarterly to the physician who has shown an ongoing commitment to the hospital’s philosophy of patient-focused care, has been a role model to other staff members, and has demonstrated an ongoing commitment to living Stamford Hospital’s daily values: teamwork, integrity, compassion, respect, and accountability. “We are very fortunate to have a physician of Dr. Bull’s character and caliber on staff here,” said Dr. Lance Bruck, chairman of the Physician Engagement Committee. “He is always going above and beyond what is required, and his care for his patients is admired and emulated by his colleagues.”

John N. Sheagren received the 2010 Outstanding Undergraduate Medical Educator Core Faculty Award, voted by Michigan State University’s College of Human Medicine medical students. John received the award at the fourth annual Excellence in Clinical Teaching dinner last September. John is professor of medicine at Michigan State University and special assistant to the president of Grand Rapids Medical Education Partners.

1963
Jacob “Jack” Lindy, a psychiatrist in Cincinnati, last year published a book, “A Body of Memories,”
dedicated to his children and grandchildren. Jack describes the book as “a collection of stories about learning to become and being a doctor.”

1968
Kent Saltonstall, associate clinical professor of orthopedic surgery emeritus at the University of Washington in Seattle, spent a week in May 2011 as an orthopedic surgery consultant at London Hospital on Christmas Island in the central Pacific Ocean. He was sponsored by Pacific Islands Medical Aid, a charitable organization. A report on his week on Christmas Island can be found at P&S online at http://juno.cumc.columbia.edu/psjournal/features.

Lucy Rockefeller Waletzky was the honoree at the Audubon Environmental Leadership Award Dinner in Greenwich, Conn., in May 2011. She received the Audubon Connecticut Environmental Leadership Award for her work to promote conservation. As a board member of the National Audubon Society she worked to create, fund, and develop a program for both the national and New York state Audubon societies to stop the use of pesticides on home lawns and improve habitats for birds. She also initiated the Audubon At Home program. She co-founded the Medical Illness Counseling Center in Chevy Chase, Md., where she practiced for 20 years. In addition to her environmental, health, and conservation expertise, Lucy added 84 acres to the Rockefeller State Park Preserve. She has received multiple awards, including the Governor’s Parks and Preservation award in 2004, and two awards in 2006, the State Council of Parks Commission Chair Award and Friends of Westchester County Parks Best Friend Award.

1969
See Alumni in Print to read about a rhinoplasty book written by Rollin Daniel. Rollin, whose Newport Beach, Calif., practice is one of the few practices in the United States devoted exclusively to rhinoplasty surgery, says the book has “an interesting tie to my days at P&S where I hid out in the Webster plastic surgery library.” Rollin has performed more than 4,500 rhinoplasties during his career.

1970
William A. Tansey III, a cardiologist with the Summit Medical Group in New Jersey, was honored by the American Heart Association with the 2011 Victor Parsonnet, M.D., Visionary Award. The award was given in May at the association’s “Affair of the Heart” Ball, which recognizes and celebrates excellence in research, health care, treatment, and community involvement in cardiovascular diseases and stroke. Bill is board-certified in internal medicine and cardiovascular disease. In addition to holding many posts in state, local, and regional American Heart Association chapters, Bill is a founding member of the New Jersey Department of Health and Senior Services Cardiovascular Health Advisory Panel and chair of the Liberty Science Center board in Jersey City, N.J., where his expertise and guidance were integral in development of the Liberty Science Center Cardiac Classroom. The classroom allows students to witness heart surgery and ask questions of the medical staff during the procedure. Bill has received many honors and awards, including the distinguished Ellis Island Medal of Honor for Americans who have maintained the richness of their heritage. The Consumer Research Council of America lists him in “America’s Top Cardiologists,” and he is listed among Best Doctors in America in regional and national magazines. When he is not busy with patients, Bill supports the arts in New Jersey, including the Paper Mill Playhouse, where he has served on the Board of Trustees.

1971
Judith S. Palfrey was appointed executive director of the Let’s Move! childhood obesity initiative in September. Judy has been a longtime supporter of the Let’s Move! campaign and spoke at the campaign’s launch in February 2010 when she was president of the American Academy of Pediatrics. “…We are eager to welcome Judy Palfrey to the White House where I know that she will take the Let’s Move! program to new heights,” said First Lady Michelle Obama in announcing the appointment. “Judy has worked with families one-on-one and partnered with communities on health promotion initiatives. She is a leading researcher and respected voice in the field. Her tremendous experience and insight in pediatrics and community health will make her a strong leader for Let’s Move! and make a real difference in the lives of our nation’s children.”

Martha G. Welch was one of 11 Alumni Medalists announced at Columbia University’s 2011 com-

Martha Welch’71 speaking to Erica Zolberg, a free-lance producer who created a video about the alumni medalists for the October gala dinner held in their honor.
mencement. The medals are given to acknowledge work done on behalf of a graduate’s alma mater. Martha has served on the P&S Student-Alumni Relations Committee and the Executive Committee of the P&S Alumni Board of Directors and was president of the P&S Alumni Association from 2001 to 2002. In 1997, after 25 years of practicing child and family psychiatry, Martha joined the P&S faculty, where she has appointments in psychiatry, pathology & cell biology, and pediatrics. In 2006, she established the BrainGut Initiative, where her research programs investigate the mechanisms that underlie maternal nurture. Others in her family with P&S connections: a sister, Elizabeth A. Welch’76, and brother-in-law, Stephen E. Glinick’76, both dermatologists, and her son, Thomas Bramwell Welch-Horan’08, an instructor in pediatrics at P&S.

1973

During a symposium on peripheral nerve surgery, David T.W. Chiu received the Millesi Award for his work on venous conduits, which facilitate peripheral nerve regeneration. He also recently discovered that, under certain circumstances, spinal cord pathways may also regenerate. David is on the faculty of NYU.

See Alumni in Print to read about a book co-edited by Richard Saunders. Rick has practiced pediatric ophthalmology since 1978 at the Medical University of South Carolina in Charleston, where he is the N. Edgar Miles Professor of Ophthalmology and also professor of pediatrics. In addition to his new pediatric ophthalmology textbook, he assisted in editing his wife’s recent book, “A Travel Guide to World War II Sites in Italy: Museums, Monuments, and Battlegrounds.” Rick’s photos of WWII monuments in Italy may be seen at www.travelguidepress.com.

1975 Kenneth Heisler was recently elected president of the Barnstable District Medical Society, the chapter of the Massachusetts Medical Society embracing Cape Cod, Martha’s Vineyard, and Nantucket. Ken is a board-certified general surgeon in private practice in Falmouth, Mass. He has been a member of the surgery department of Falmouth Hospital since 1980, where he has served as both chief of staff and trustee. He is also chairman of the board of ProMutual Group, a major provider of professional liability insurance to doctors and hospitals across the United States. Ken is scoutmaster of Boy Scout Troop 40 in Falmouth.

David P. Roye Jr. delivered the 2010-2011 Dean’s Distinguished Lecture in the Clinical Sciences at Columbia in June 2011. Title of his lecture was “Innovative Techniques in Cerebral Palsy Research, Education, and Treatment: Establishing a Model of Multidisciplinary Transitional Care.” David has been at Columbia for 31 years, building Columbia’s Division of Pediatric Orthopedic Surgery into a nationally and internationally respected presence in the field. He is director of the division, the St. Giles Foundation Professor of Clinical Pediatric Orthopedic Surgery, executive medical director of the Columbia Cerebral Palsy Center, and president of the Class of 1975. He has completed fellowships at the American Academy of Orthopaedic Surgeons, the Pediatric Orthopaedic Society of North America, the Scoliosis Research Society, the International Society for Quality of Life Research, the American Academy for Cerebral Palsy and Developmental Medicine, and the European Pediatric Orthopaedic Society. He has been honored many times for humanitarian efforts and contributions to the field of pediatric orthopedics. He participates annually in overseas medical delivery and has taught and conducted surgery in Kenya, Romania, and China. For the past 13 years he has served as chief medical officer of the Children of China Pediatric Foundation, which sends medical teams to China to provide on-site medical training for physicians and nurses and perform surgeries in orphanages to correct disfiguring birth defects and disabilities. He also is founder and CEO of the International Healthcare Leadership program, which designs and implements educational programs for healthcare leaders in China.

1976

See Alumni in Print to read about a new book co-edited by Kenneth H. Cohn, who also has an MBA. Ken is CEO of HealthcareCollaboration, which works with physicians and hospital leaders to improve clinical and financial performance. Ken is a clinically active, board-certified general surgeon who has mentored physicians in leadership development since 1999. He has written or edited three other books and 50 peer-reviewed articles.

1977

Richard P. Cambria was elected president of the Society for Vascular Surgery for 2011-2012 during the group’s June 2011 annual meeting in Chicago. Richard is chief of the...
Division of Vascular and Endovascular Surgery and co-director of the Thoracic Aortic Center at Massachusetts General Hospital in Boston. He also is associate editor of the “Rutherford Textbook of Vascular Surgery” and co-editor-in-chief of the “Atlas of Vascular Surgery.” He is an assistant editor for the Journal of Vascular Surgery and a past president of the New England Society for Vascular Surgery.

1978
Andrew M. Kaunitz was honored by the University of Florida with the Louis S. Russo Award for Outstanding Professionalism in Medicine, presented to the faculty member who exemplifies the highest standard of medical professionalism, substantiated by a commitment to personal behavior that reflects the core values of the consummate physician (altruism, excellence, ethics, and respect for others). Andrew was one of three finalists for the award, which was presented at the resident graduation ceremony in June 2011. His name will be engraved on a plaque located in the Learning Resource Center. Andrew is tenured professor and associate chairman of obstetrics and gynecology at the University of Florida College of Medicine-Jacksonville, where he has been a faculty member since 1984.

1980
Jonathan T. Deland, chief of the foot and ankle service at the Hospital for Special Surgery in New York City, has been named to the hospital’s board of trustees. He was one of five new trustees announced in June 2011. Jonathan initiated creation of the Foot and Ankle Center at the hospital and is associate professor of surgery at Weill Cornell Medical College. He joined the hospital in 1991 from Brigham and Women’s Hospital in Boston.

See Alumni in Print to read about a menopause guide written by Julia Schlam Edelman. Julia, who has a private practice in Massachusetts, is a board-certified gynecologist, a certified menopause clinician, and a Fellow of the American College of Obstetricians and Gynecologists. In 2010, she received the North American Menopause Society’s Menopause Practitioner of the Year award, which recognizes one clinician in North America for outstanding contributions to patient care. Julia became interested in women’s health and gynecology while still at P&S. After residency at Brigham and Women's Hospital, she was a clinical instructor at Harvard Medical School and later a staff obstetrician and gynecologist at Mount Auburn Hospital, a Harvard teaching hospital, before starting a private gynecology practice in 1987.

1981
Frederic L. Sax, a cardiologist by training, has spent almost 20 years in the biopharmaceutical industry, including AstraZeneca and Merck. In May 2011 he was named head of integrated clinical services and senior vice president at Quintiles. The new position required Rick and his family to relocate from Wilmington, Del., to Durham, N.C.

Michael Sisti is the subject of a P&S Department of Neurological Surgery online profile, “The Making of a Neurosurgeon: Dr. Michael Sisti.” The article features photos of Michael throughout his life. He has been at P&S for 33 years (“except for one year at the NIH to do research.”) “But if you really want to roll back the clock, I started here when I was 17 in 1972 in Dr. Lovelace’s lab. I work with the best people in the world. I have a job that I love – that I am good at. I get to help people with incredibly complex problems and make a major difference in their lives. I am where I am supposed to be.” The profile can be seen online at www.columbianeuurosurgery.org/2011/08/the-making-of-a-neurosurgeon-dr-michael-sisti/

1983
Robert Klapper is an orthopedic surgeon in Hollywood. In addition to attending sports outings with renowned patients, he has a radio show, “Weekend Warrior,” on ESPN in Los Angeles. “Each week we have a different guest and many callers seeking advice on their injuries. Our guests thus far have included patients of mine like Dustin Hoffman, Tony Danza, William Shatner, and others. It has been a great hobby of mine to combine art and medicine. The radio business has been one extension of that. The other is marble sculpting.” He gave a lecture in September at the J. Paul Getty Museum in Los Angeles. The title was “Michelangelo’s Sculptures: How he Manipulated Anatomy.” In a summary of the lecture, the museum describes the physician’s regular travels to Italy to work on the stone Michelangelo used to carve “David” and “The Pietà.” “It’s been great fun practicing orthopedic surgery here in Hollywood,” he writes. He is chief of orthopedic surgery at Cedars-Sinai Medical Group.

1985
Harry (Henry) Lodge has co-authored the “Younger Next Year” book series and has now taken his expertise to PBS. The books, which have sold more than a million copies in 16 languages, have been hailed for illuminating the new science of aging and maintaining that everyone – no matter how old – can take control of his or her biology and reverse the process of aging. The PBS special, “Younger Next Year: the New Science of Aging,” premiered on many local stations in June 2011. During the one-hour program, Harry explained the biological impact of motion, and emotion, on the body and the brain; other factors that affect aging, such as eating properly and reducing stress; and new research on the brain...
that suggests people can become stronger, healthier, and function more effectively as they grow older.

1988
Sharon Malone and her husband, U.S. Attorney General Eric Holder, were keynote speakers in May 2011 at the celebration of the 57th anniversary of the Brown v. Board of Education Supreme Court decision that ruled unconstitutional the practice of “separate but equal” public schools. Sharon’s sister, Vivian, was one of the first two African-American students to attend the University of Alabama in 1963 and later became the first black graduate of the university. “The appointment of Eric Holder as the first African-American to serve as the U.S. attorney general and the civil rights activism of Dr. Malone’s family leading to the integration of the University of Alabama are part of a contemporary historic continuum that began with the case,” said Cheryl Brown Henderson, president of the Brown Foundation and daughter of Oliver Brown, the namesake of the landmark case. The Topeka newspaper reported that Sharon expressed delight in speaking as the sister of Vivian Malone Jones, who was 12 when the Brown decision was handed down. Vivian Jones died in 2005. Sharon graduated cum laude from Harvard University and worked as a systems engineer with IBM before entering P&S. She is now a physician with an OB/GYN group in Washington, D.C.

1995
Michael Vitale, one of 126 Columbia physicians chosen for New York Magazine’s 2011 best doctors listing, was featured in the magazine issue as part of a series of first-person stories written by doctors. Michael, chief of pediatric spine and scoliosis surgery at Morgan Stanley Children’s Hospital and the Ana Lucia Associate Professor of Clinical Pediatrics and Orthopedic Surgery at P&S, describes surgery on a teen-age patient with scoliosis and a serious cardiac condition. Part of the surgery, he explains, involved using genetically engineered bone protein placed inside a sponge that, when laid next to the patient’s spinal cord, would serve as a type of bone graft. “Once he’s healed,” he writes of his young patient, “he could play football if he wanted.” The article is available online at http://nymag.com/health/bestdoctors/2011/scoliosis/.

2001
Orthopedic surgeon M. Stanton Ward joined University of Mississippi Health Care in April 2011 as associate professor. He has both M.D. and Ph.D. degrees from Columbia. His practice focuses on adult decompressive and reconstructive spine surgery for degenerative and traumatic conditions as well as deformity, with an emphasis on minimally invasive approaches. He is the first surgeon in Mississippi to become a member of the Society for Minimally Invasive Spine Surgery. Stan was previously in private practice at Pinnacle Orthopedics in Marietta, Ga. He completed an orthopedic surgery residency in New York at St. Luke’s-Roosevelt and a spine surgery fellowship at Baylor College of Medicine/Texas Medical Center. He also completed additional training in minimally invasive spine surgery at the Northeast Institute for Minimally Invasive Spine Surgery. Stan’s wife, Kimberley Morine Ward’01, joined the University of Mississippi faculty as a dermatologist in September.

2003
James Mok, an orthopedic surgeon and major in the U.S. Army, was deployed to Iraq for six months as part of Operation New Dawn. On his way to Iraq he encountered another P&S graduate, Captain Angela Penn’04, a general surgeon. Both were deployed with the 86th Combat Support Hospital. The photo was taken in Kuwait, en route to Iraq.

2004
See news of Angela Penn in a Class of 2003 note.
Mastering Rhinoplasty: A Comprehensive Atlas of Surgical Techniques (2nd ed.)
Rollin Daniel’69
Springer, 2010

Dr. Daniel’s book emphasizes routine cases but also covers for the already proficient surgeon the latest breakthroughs in the management of difficult cases, such as saddle nose, skin sleeve problems, and dorsal grafting, including approaches Dr. Daniel developed exclusively. The text is complemented by color figures, and DVDs with video clips transport the reader into the operating room while Dr. Daniel demonstrates techniques during live surgery. “I am dismayed at how many younger surgeons are electing not to do rhinoplasty surgery due to its perceived complexity,” says Dr. Daniel. “Therefore, I spent the last three years trying to simplify the teaching of this surgery. I have designed an approach that will allow surgeons to expand their comfort zone and eventually master rhinoplasty surgery.”

Pediatric Ophthalmology: Current Thought and A Practical Guide
Richard Saunders’73
Springer, 2009

Written by renowned experts with many years of experience and perspective, Dr. Saunders’ book provides a comprehensive overview of pediatric ophthalmology and has practical application to the daily practice of medical and surgical pediatric ophthalmology. Techniques learned over many years are illustrated and explained, and tables and charts will likely get constant use in offices and operating rooms. Each chapter starts with “core messages” and ends with “take home pearls.” This practical guide promotes understanding and updates and guides both the novice and the expert in procedures that will improve the flow of the examination and treatment outcome, whether by pediatric ophthalmologist or general ophthalmologist who cares for children.

Getting It Done: Experienced Healthcare Leaders Reveal Field-Tested Strategies for Clinical and Financial Success
Kenneth H. Cohn’72
Health Administration Press, 2011

Dr. Cohn and co-editor Steven A. Fellows bring together authors from more than 16 U.S. health care organizations who fought the status quo and improved care for their communities. With chapter headings that include “Collaborative Approaches to ED Call Coverage,” “Launching an Innovation Revolution,” “Rural Health,” and “Slaying Sepsis,” the editors and authors illustrate the adage, “nothing is more valuable than experience,” and share hard-earned lessons in removing roadblocks to clinical and financial excellence. Each chapter describes a real-life dilemma – accelerated physician adoption of electronic health records, transformation of the culture of the OR, or cost cutting through strategic supply cost management – then distills the lessons learned and provides step-by-step guidance.

Menopause Matters: Your Guide to a Long and Healthy Life
Julia Schlam Edelman’80
Johns Hopkins University Press, 2010

Dr. Edelman’s comprehensive guide to women’s health after age 35 addresses much more than menopause. It includes tips on improving sleep, sex, mental health, and nutrition and preventing cancer, heart disease, and osteoporosis. Chapters address how to achieve a healthy weight and how to get more out of each visit to your doctor. The discussion of menopause includes a chapter describing the pros and cons of taking hormones and other prescription medications and an evaluation of alternative approaches, based on solid medical evidence. The book is targeted to the general reader, but current peer-reviewed references, a comprehensive index, and evidence-based coverage of current research studies add to its value to patient and health-care professional alike.
Josh Bazell: Is There a Hit Man in the House?

By Peter Wortsman

Doctors are committed to saving lives. Contract killers are committed to taking them. Psychiatry resident-author Josh Bazell’06 ingeniously conflates the two professions in Dr. Peter Brown (alias “The Bearclaw”), the hit man turned MD protagonist of his bestselling novel, “Beat the Reaper.” The paradox makes for an alternately harrowing, hell-raising, and hilarious read. Dr. Bazell’s debut book earned him a sizable advance and was optioned as a future film vehicle for Leonardo DiCaprio. He has since put his day job, a residency in psychiatry at UCSF, on temporary hold to work on a sequel.

His rise to instant literary stardom surprised no one more than it did Dr. Bazell himself, a shy guy with a wry sense of humor, a keen sense of observation, and a weakness for classic gumshoe fiction. His experience parallels that of another P&S graduate turned bestselling author, Robin Cook’66, whose first novel, “Coma,” immediately put him on the map and inspired the hit movie of the same name.

P&S cornered Dr. Bazell over bagels and lox in a New York coffee shop to talk about his morphing from the guy doing the listening to the guy doing the talking.

Contrary to his karate-chopping, pill-popping, expletive-spewing, high octane protagonist, Josh Bazell proves to be a pleasant and reflective breakfast partner, who weighs his words carefully. “People are constantly disappointed to meet me,” he says with a deadpan expression, so that his interlocutor can’t tell if he’s serious or kidding, pausing before adding, “I’m not the character I created.”

The latter’s dark novella about dual identities, “Dr. Jekyll and Mr. Hyde,” later proved a seminal influence on the creation of Bazell’s somewhat schizoid MD alter ego.

The pen and the stethoscope have engaged in a tug of war for his attention from early on. His first mentor, and the greatest influence in his life, his maternal grandfather, the late Dr. Stanley Tanz, to whom the book is dedicated, practiced orthopedic surgery until he had a stroke. He gave up surgery but continued to work as a doctor. “He often urged me to go into medicine as an honorable and fascinating profession,” his grandson recalls. “In high school I worked in a lab at Cornell doing research, with an eye on medical school.”

But literature got in the way. As an undergraduate at Brown University, he majored in English and creative writing. Accepted by several medical schools – he didn’t apply to Columbia – he decided to defer the study of medicine after college and spent several years as a screenwriter in Hollywood to hone his craft and make some money. Yet his conscience kept nagging him. “Time went by and suddenly I realized I better actually do it.” He retook the MCATs and re-applied to medical schools, this time including his first choice, P&S, and finally matriculated “at 31, the age at which I felt if I didn’t, I would never be able to do it.”

Now it was literature’s turn to take the back seat. His protagonist’s take on medical students is decidedly comic noir: “My medical students. Two cups of human misery in short white coats. One is male and the other one female, and they both have names.” But his own experience, Dr. Bazell insists, was equal parts thrilling and challenging.

Among the most memorable moments was his turn leaping into an ambulance, and then a plane, accompanying the guy carrying a human heart for a transplant. A rotation at the New York City chief medical examiner’s office in his fourth year proved an eye-opener and a well-spring of future material for his writing.

“It was extremely gratifying. It’s a slightly different situation than in medicine, in that what you’re working for is not life-saving, but justice.” Among the “novelistic” items he encountered was a body in a steamer trunk discovered by a woman renting a new apartment and a suicide note found in the pocket of a man who died in a Staten Island...
Ferry crash. “Was he on his way to kill himself? Or had he decided not to do it? Or did he frequently carry such a note around with him? The question was, obviously, never resolved.” As a medical examiner, “as with medicine in general, you get very personal insights into people, more personal insights than you get with your friends even. It’s very touching and very humbling.

“I went to medical school at a relatively older age than most students,” he points out, “so that I was conscious about just how weird and fascinating the stuff I was studying really was.”

His subsequent experience as an intern in the ER proved equally thrilling. “In the ER you’re seeing people on the worst day of their life. It’s important to appreciate that complexity.”

Mentors on the P&S faculty included then dean of students Dr. Linda Lewis, who mixed plenty of wit along with wisdom and medical knowhow, and the late Dr. Steve Miller, who died in a 2004 plane crash. “Steve’s turf was the pediatric emergency room but he was also very much involved in the quality of student life, theories of learning, and very interested in the arts.” At P&S, Bazell also worked in the lab of Dr. Scott Small, professor of neurology, aiding him in his research on Alzheimer’s.

For a literary-minded young man in medical school, the basic science component of the curriculum was sometimes daunting, he admits. (It now or never. I was concerned that once I started internship and residency I’d have no time to write.”

In life, as in literature, tight fixes have served him as a motivating factor. Cornered in a fish tank with a killer shark snapping at his heels, and in a walk-in freezer awaiting his chilly demise, his protagonist Dr. Brown finds a way out. Torn between the call of two callings, Dr. Bazell channeled the pressure, using every spare moment to write his way out of a bind. As to the subject of the novel, it had been kicking around in his mind for some time. “Like everybody who writes, I do a fair amount of composing in the head. I carry it around a while. But this was particularly true through, finding solutions to problems that could have been resolved more easily. When you come to think of it, it’s sort of a metaphor for medical school and medical training in general. You do something inefficiently that someone else can do efficiently so that you can learn to do it efficiently.”

His prose, however, is anything but inefficient. Razor sharp is more apt. A consummate stylist and master of plot, Dr. Bazell believes that “if somebody goes to the trouble of buying your book, you owe it to him or her to provide a page-turning sense of timing.”

Given the distinctly “noir” nature of “Beat the Reaper,” the interviewer could not help but inquire if the author thought that writers tend to write more about the things they really love or the things they really hate.

“Interesting.” Dr. Bazell paused to reflect before replying. “I would say, my goal is to be at one or the other extreme at all times. I know that both of them are obviously in this book, and in my next book as well. There’s no room in my own literary life for the center. How often do you get to write a book, that you wouldn’t want to make it as interesting and emotional as you can?”

Dr. Bazell believes that “books have a far more pervasive influence in American life than people think. Literature ideally taps our dreams and nightmares, plays with our fears.” Like Robin Cook’s “Coma,” Josh Bazell’s “Beat the Reaper” leaves us a bit leery about hospitals and figures in white coats bearing scalpels, but having undergone catharsis, vaccinated with attenuated terror, the reader is ready to confront whatever problems lie ahead. “Literature,” he says, “should show us the hidden soul of public experience.”

“People are disappointed to meet me [because] I’m not the character I created.”

Alumni Lend an Ear: Student Stethoscope Donation Program a Thumping Success
By Peter Wortsman

René Laennec, the inventor of the stethoscope in 1816, never suspected how long a run that simple instrument would have. Almost 200 years later, in the heyday of high-tech medicine, the stethoscope is still a vital low-tech tool. It’s hard to imagine a doctor without a stethoscope dangling round his or her neck or near at hand.

So in 2007, when outgoing alumni relations director Kathy Couchells and incoming alumni relations director Elizabeth Williams wanted to find something meaningful to give new students, stethoscopes immediately came to mind. They floated the idea among alumni, and lo and behold, the checks started pouring in, $140 for each piece of equipment, along with a business card with a personalized message written on the back. Some alumni have donated several; one gave 10.

Suchita Shah’12 still recalls the thrill of opening the box with the stethoscope and the business card of the donor. And though she initially fumbled with the device – “That first week of medical school, honestly, I had no idea how to use the thing, I actually put it in backward and couldn’t hear a sound” – the message was loud and clear: “To me, it was like: Welcome, you’re one of us now!”

Obstetric anesthesiologist Richard N. Wissler’83, a member of the faculty at the University of Rochester Medical School, who has contributed three stethoscopes, feels much the same way. “Each time I put in a business card and write a little something on the back, like: ‘Welcome to the P&S family. If I can ever help you, please don’t hesitate to get in touch,’ it’s my small way of saying thank you to my medical school and reaching out to a current student.”

“It’s the first tool you learn how to use in medicine,” says Michael McDowell’13, who keeps his curled up in his white coat pocket. “The stethoscope is still a quick way to access the interior compartments of the body. It still provides the physician with extremely useful, and cheap, information. I think alumni like to give it – and I can assure you, students like to receive it! – because of the symbolism of that idea of passing on the skills by passing on the equipment. While every alumnus cannot come and be a teacher for a current medical student, with the gift of a stethoscope he or she can at least facilitate the acquisition of those skills from day one.”

Yvonne Thornton’73, a respected specialist in high-risk obstetrics and currently a preceptor at Westchester Medical Center, gets all choked up when she talks about the stethoscopes she contributed. The author of the best-selling memoir, “The Ditchdigger’s Daughters,” subsequently adapted into a TV movie, and a recent sequel, “Something to Prove: A Daughter’s Journey to Fulfill a Father’s Legacy,” Dr. Thornton was the first African-American woman to be board-certified in high-risk obstetrics and to be accepted into the New York Obstetrical Society. “My father called it a scripperscrap. For him it was a symbol of being a physician, which is what he wanted all his daughters to become. He once had me paged at Roosevelt Hospital, where I was a resident at the time, just to hear my name on the loudspeaker and to see me wearing one around my neck. ‘Here you are with a scripperscrap hanging round your neck and the richest person in the world will come and ask for your help.’”

To rich and poor, and all those in the middle, the stethoscope remains a symbol of the healing profession.

Another enthusiastic donor, Susan Carlson’72, who, along with her husband, Robert Carlson’72, spent the greater part of her career providing primary care to Native Americans in remote rural corners of southeast Alaska, wanted to do whatever she could “to emphasize to new medical students the importance of physical examination. Modern technology is great and it’s helpful, but you still need to develop those basic clinical skills.” A stethoscope and the ability to do a physical and take a history was pretty much all she and her husband had at their disposal in the field for their first 20 years. “Back then, all stethoscopes were just plain black or gray,” she recalls. “So one day a patient of mine, a Native American lady very skilled at beadwork, gave me a beaded sheath. It’s really beautiful!”

Another donor, Kelly Kogut’91, a pediatric surgeon in Las Vegas, “loved what has now become a P&S tradition” of alumni reaching out to new students. “It’s really nice to give something I know they will need and really appreciate, as I did.” For her, the stethoscope still represents the thrilling transition from the classroom to hands-on clinical experience. “The first time I put it on, wow! it really hurt my ears.” To Dr. Kogut, it’s a powerful link between students and alums. “It doesn’t really cost me much to give, but I know it’s meaningful. A couple of times I’ve gotten some nice letters from students. It’s really moving to hear from them.”

For more information on stethoscope donation, contact Alumni Relations Director Elizabeth Williams at 212-305-1472 or ej75@columbia.edu.
International health has been a long-standing P&S tradition, at least as far back as the legendary parasitologist Dr. Harold Brown, who sent his students out into the field to get their feet wet. Such experiences changed the lives of alumni like international health leader Jack Bryant’53, former director of the Columbia School of Public Health (now the Mailman School of Public Health), and the late Nobel laureate Baruch Blumberg’51, discoverer of the hepatitis B virus and the vaccine to prevent it. Both Drs. Bryant and Blumberg got their first taste of elsewhere trying to elucidate tropical medical mysteries in Suriname. Ever greater numbers of today’s P&S students are eager to follow suit.

David Martin’13, Michael Healy’13, and Eileen Shu’13 share a passion for international health and out-of-the-box solutions. All three hope to pursue that passion in fulfillment of the new curriculum’s scholarly project requirement. In their fourth year, members of the Class of 2013 are expected to devote four months to research to develop a scholarly project in one of six areas: basic science, clinical research, community health, narrative and social medicine, medical education, and global health. Some 15 percent to 20 percent of the class has expressed a desire to pursue an international project. The only hindrance is the availability of funding to pay for it.

According to Joseph Haddad Jr., M.D., special assistant to the dean for international affiliations, the estimated cost per student, including air fare and living expenses, is $2,500. “We don’t want this opportunity to be reserved for the privileged few,” says Dr. Haddad. “Given the considerable debt many students already carry, it’s hard for them to envision shouldering this additional expense. We’re hoping that alumni will step in and lend their support to make it possible for interested students to extend their medical horizon abroad.”

Ask David Martin’13, a Harvard graduate and former president of the student-run International Health Organization at P&S, why he decided to pursue the global health option and his eyes light up. “Once you’re exposed to being outside your comfort zone and being somewhere else, you’re going to be more sensitive and more aware of yourself and the way you deal with patients, and that, inevitably, will make you a better doctor.”

Born in Mexico and the first in his family to attend college, let alone medical school, David knows that feeling, “I came here as an immigrant myself, but when I see the struggles of patients for the opportunity to be here, that is sort of humbling.” After college, he was employed by the Clinton Foundation to monitor the effectiveness of the foundation’s HIV prevention program in the Dominican Republic. In the summer between his second and third years at P&S, with the support of the Clinton Foundation, he took the skills he had learned to Nairobi, Kenya, to explore “how to better use mobile technology to disseminate information for mothers regarding HIV status of infants. My work has been tied to studying management, business principles, and sustainability.” Should the funding be available, David plans to return to Nairobi and document his work for his international scholarly project.

For Michael Healy’13, a native of Southern California, the global bug bit during his undergraduate years at the University of Notre Dame, where he majored in biology, studied Arabic to fulfill his language requirement, and took courses in anthropology. A linguistic sojourn in Cairo, Egypt, and a medical anthropological project that took him to Quito, Ecuador, clinched his passion for things international. Then at P&S, in the summer between his first and second years, a program run by Columbia’s Earth Institute enabled him to travel to southwestern Uganda to apply ethnographic methods to assess the effectiveness of AIDS education at the local level. His respondents, adolescent village girls, recommended the creation of an adolescent center where they could get vocational training and also discuss health issues, like safe sex practices, in a non-threatening environment. “The whole point of this program is to be sustainable,” Mr. Healy says. He hopes to find the funding to return, help create the center, and document the experience as his scholarly project. “I came to P&S with the idea that we’re going to train and become topnotch physicians,” he adds, “but we’re also here to become leaders in medicine empowered to effect change locally and in the world, and that’s what I want to do.”

California native Eileen Shu’13, a graduate of UCLA, knew she wanted to be a physician ever since she shadowed a pediatrician in high school. In college she participated in a research project for which she interviewed patients in the ER. Majoring in biology and Spanish, she also spent time in Chile, where she shadowed a doctor and worked in a clinic. At P&S, in the summer between her first and second years, she went to Nairobi to help collect and assess computer data on health care delivery systems for the Kenyan Ministry of Health. She hopes to parlay this experience into a formal scholarly project. The experience “deepened my empathy and reinforced my commitment to medicine … and to helping change the course of people’s lives. I couldn’t have even dreamed of having such a rich experience without the support I’ve received.”

For information on opportunities to support student international scholarly projects, contact Anke Nolting, anl1@columbia.edu or 212-305-3498.
**“Re-Graduation” Ceremony**

STEVEN W. NICHOLAS, M.D., professor of clinical pediatrics and associate dean for admissions, presided over a new alumni reunion weekend ritual, a “re-graduation” ceremony, in which the 50th anniversary class and all other MDs in attendance were invited to reaffirm the Hippocratic Oath. Dr. Nicholas reported the school’s astounding 53 percent yield of accepted students this year; he credits this success to the culture of P&S as a student-centered place.

The keynote speaker, P. Roy Vagelos’54, retired chair and CEO of Merck & Co., and chair of the defining the Future capital campaign, titled his remarks “A Lifetime of Learning.” He delivered a convincing argument against the fallacy of retirement. First inspired to study science by the Merck chemists who patronized his parents’ luncheonette in Rahway, N.J., he has had a lifelong love affair with science, especially “the kind of chemistry that cures people.” After graduating from medical school he intended to become a cardiologist. But 12 years at the NIH turned him into a committed research scientist. He went on to Washington University in St. Louis, where, as founding director of the Division of Biology and Biomedical Sciences, he revolutionized biomedical education. He went on to revolutionize pharmaceutical research at Merck, first as head of research, then as chairman and CEO, learning all the while. “When they asked me to run the company, of course I knew nothing about finance, but I knew more about the drugs than anyone else,” he said. During the decade of his watch, Merck achieved astounding success. At age 65, company policy obliged him to retire, “but, honestly, I couldn’t stop,” he avowed. “I don’t play golf and I get seasick. What I loved was drug discovery.” So he helped found a biotech start-up in California and joined Regeneron, a biotech firm based in Westchester, N.Y., as chairman. In 2004 he took on a formidable new challenge as chair of the medical center’s capital campaign, which, under his tireless leadership, has already surpassed its goal of raising $1 billion. Meanwhile, Dr. Vagelos felt a responsibility to help others pursue the educational opportunities he had. Among other kindnesses, he and his wife, Diana, endowed a college scholarship fund at Rahway High School. “I have been learning from, and been inspired by, students my whole life.”

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**A Lifetime of Learning**

DONALD O. QUEST’70, president of the P&S Alumni Association, officiated as master of ceremonies at the Alumni Day Program. Dr. Quest called for a moment of silence in honor of the late Andrew G. Frantz’55 who had presided over Alumni Day for as long as anyone could remember.

Dr. Quest called John C. Brust’62, professor of clinical neurology and director of the Harlem Hospital Neurology Service, to the podium to serve as 2011 Honorary Alumni Day Chairman. In that capacity, Dr. Brust saluted Davida T. Coady’65, recipient of the 2011 Virginia Kneeland Frantz’22 Distinguished Women in Medicine Award, noting that the Class of 1962 dedicated its yearbook to the late Dr. Virginia Frantz.

Dr. Coady has spent the better part of her professional life developing health programs for disadvantaged populations in the Third World and in her own backyard of Berkeley, Calif. She was one of the founders of the Venice, Calif., Family Clinic, the largest free clinic in the country, and later served as the first woman field epidemiologist with the World Health Organization’s Smallpox Eradication Program. After two decades – the 1980s and 1990s – spent developing grassroots health programs for refugees and people in areas of conflict in Central America, she returned to Berkeley and founded Options Recovery Services, an alcohol and drug outpatient treatment center for the recently incarcerated and the indigent. More recently, together with her husband, Thomas Gorham, she co-founded the Addiction Professional Association of California to train inmates serving life sentences to be certified alcohol and drug counselors in state prisons.

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**Lunch with a Sweet Touch**

A LUNCH CATERED by the staff of the Donald F. Tapley Faculty Club in the nostalgic environs of the old Bard Hall Dining Room was capped off by the Platonic ideal of cheesecake. The divine dessert, vanilla cheesecake topped with strawberry caviar and reduced strawberry crisp sprinkled with an ethereal white chocolate snow, was alchemically concocted by anesthesiologist-master dessert chef Thomas Lo’08. Alumni Association president Donald O. Quest’70 awarded Dr. Lo a special citation of appreciation. This is the fifth year he has created special desserts for the Alumni Day luncheon. Currently a resident in anesthesiology, in his spare time Dr. Lo runs a dessert catering company, An-aesthetic Cuisine.

Alumni Association president Donald O. Quest’70 with anesthesiologist-pastry chef Thomas Lo’08
“THE SUBJECT BEFORE US IS VAST. We hope, at a minimum, to delve into some of the key issues,” acknowledged master of ceremonies Ron Cohen ’81, president, CEO, and director of Accorda Therapeutics, in his introductory remarks to the Dean’s Day program, devoted this year to “Healthcare, The Great Debate.” Health care currently costs the U.S. economy 17 percent of its GDP, twice the cost of care in other developed countries, Dr. Cohen pointed out, but the United States has no better outcomes. The overflow crowd of alumni in Bard Hall was all ears as alumni panelists representing various perspectives on the issue locked hearts and horns, so to speak.

First to speak was Eve Slater’71, associate professor of clinical medicine at P&S and former U.S. Assistant Secretary for Health. “I think medical care and our medical system is overly criticized,” she said. “My concern has to do with innovation and with preserving a culture of innovation in America.”

Next up: the dynamic duo of Richard Cruess’55, professor of surgery and former dean of the Faculty of Medicine at McGill University, and his wife, Sylvia Cruess’55, former director of professional services at Royal Victoria Hospital in Montreal. “We’re bringing you information from what we call the laboratory to the north,” Dr. Sylvia Cruess began. “Health care in Canada now costs 11 percent of the GDP but covers the entire population.” In addition, “Canadian life expectancy tops that of the States, and infant mortality is lower, key indicators of an effective system.” Acknowledging the need to ration health care, Dr. Richard Cruess argued from a physician’s point of view that “the American system poses huge moral dilemmas to practicing physicians that they shouldn’t have to face.” Also acknowledging certain problems with the current Canadian system, he concluded, “We prefer the defects in our system to the defects in yours.”

Jane M. Orient’74, clinical lecturer in medicine at the University of Arizona College of Medicine who frequently speaks and writes about health care reform, voiced her strong opposition to the Affordable Care Act passed by Congress a year ago. “Doctors are at risk of becoming functionaries for apparatchiks,” she said. “Physicians are not just box checkers. A lot of people talking about health care reform are bureaucrats,” she pointed out, urging physicians to get involved.

Peter W. Carmel’70 MSD, president of the American Medical Association (speaking then as president-elect), weighed in in favor of the Affordable Care Act, which the AMA supported, calling it “the most patient-friendly legislation this country has passed in 46 years.” He added: “It is a huge step toward achieving universal coverage for all Americans. Let’s not look at it as the final act in health care reform. It has to be the first step. Those of us who think politics is a dirty way to practice medicine will suffer from that opinion.”

Marc Grodman’77, chairman of the board, president, and CEO of Bio-Reference Laboratories, argued that “health care reform is above all a political process […] achieved in broad strokes. The broad stroke of the Affordable Care Act was about coverage.”

“We are the closest thing to the Canadian medical system that the U.S. government currently funds,” declared Col. Jonathan Newmark’78, deputy joint program executive officer, medical systems, and U.S. Department of Defense consultant to the Surgeon General, Chemical Casualty Care. He was referring to the military health care system that covers some 9.5 million Americans and which he described only half in jest as “single-payer insurance for conservative Americans.” Among its pluses, he pointed out, are low administrative rates, “since no money changes hands,” an electronic health record already in effect, and the fact that “our patients adore the system.”

Col. Newmark suggested that lessons learned from the military system could be applicable to the civilian sector. Notably, the military system offers “availability and accessibility at low cost … an expectation that patients follow instructions … and the fact that the military has its own medical school whose students graduate with zero debt. There are problems. I don’t think it’s the panacea,” he concluded, “but I think it deserves consideration. If we ever get to a single-payer system, it’s going to look like ours.”

Panelists responded to Dr. Cohen’s challenge: “If you were made the czar of American health care, pick one thing you would do.”

“The greatest fault of the American medical system is moral,” Dr. Carmel responded. “Every physician has to think about limited resources and equitable distribution of those resources. Our current health care system is inequitable and unjust.” He urged an immediate check on “redundant testing and redundant scanning.”

Dr. Grodman recommended reducing the age of Medicare coverage. Dr. Orient: “Why should we trust the government?”

To which Dr. Richard Cruess responded: “We trust government. Canada is a different cat. The government is regarded as a possible solution to social problems.”

The panel reached a general consensus that physicians need to play a more active role in the political process. “Change will happen on the political level,” said Dr. Grodman. “One way we can help is to be a part of the political process.”

“The word doctor means teacher,” said Dr. Sylvia Cruess. “We need to teach our patients so that we can both get what we want.”

“Very few physicians are presently at the table,” said Col. Newmark. “And when you’re at the table you’re listened to because you’re the one representing the patient.”

“There is no choice for us, as physicians, but to become activists,” Dr. Cohen concluded. “There is no choice but to become educated about these issues … and for us as physicians to become one of the dominant voices in the debate.”
aluMni aSSociation

president Donald O. Quest’70 swapped his white coat for a tux and his stethoscope for a trombone as a member of the P&S Alumni Jazz Quintet, which provided entertainment during cocktail hour at the 152nd annual gala reception and dinner dance at the spacious Pier 60 at Chelsea Piers. The other M.D. boys in the band were James C.M. Brust’01 on alto sax, John C.M. Brust’62 on sax, Dr. R. Linsy Farris on bass, and Deepak Saluja’01 on drums. Maybe it was the passion fruit and rum cocktails that helped everyone get into the groove, but the joint was really jumping.

The evening’s master of ceremonies, Kenneth A. Forde’59, the Jose A. Ferrer Professor Emeritus of Clinical Surgery at P&S and Trustee of Columbia University, greeted the soon-to-be graduates: “This evening is for you!” He reminded them that P&S also stands for “professionalism and service.”

Program highlights included brief remarks by Alfonso H. Janoski’61, speaking on behalf of the 50th anniversary class, and Elizabeth Inkellis’11, speaking for the graduating class. As chairman of the Honors and Awards Committee, Dr. Forde read citations and conferred medals upon the evening’s honorees.

Phillip K. Peterson’70, professor of medicine at the University of Minnesota, received the 2011 Gold Medal for Outstanding Achievements in Medicine for his research on the insidious effects of opiates and other substances of abuse on cells of the immune system.

James R. Patterson’68, clinical professor of medicine at Oregon Health and Sciences University in Portland, was saluted with the 2011 Gold Medal for Outstanding Achievements in Clinical Medicine in recognition of his work in pulmonary and critical care.

John H. Merey’65, an ophthalmologist and inspirational regional P&S alumni director for the Palm Beach area, received the 2011 Gold Medal for Meritorious Service to the College of Physicians and Surgeons and its Alumni Association.

Elizabeth Inkellis’11 was awarded the 2011 Gold Medal to a Graduate in Recognition of Interest in and Devotion to the College of Physicians and Surgeons and its Alumni Association.

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Gala on the Hudson

ALUMNI ASSOCIATION president Donald O. Quest’70 swapped his white coat for a tux and his stethoscope for a trombone as a member of the P&S Alumni Jazz Quintet, which provided entertainment during cocktail hour at the 152nd annual gala reception and dinner dance at the spacious Pier 60 at Chelsea Piers. The other M.D. boys in the band were James C.M. Brust’01 on alto sax, John C.M. Brust’62 on sax, Dr. R. Linsy Farris on bass, and Deepak Saluja’01 on drums. Maybe it was the passion fruit and rum cocktails that helped everyone get into the groove, but the joint was really jumping.

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Reaffirming the Hippocratic Oath

DR. VAGELOS RECITED THE FIRST LINE of the Hippocratic Oath in Classical Greek, then led members of the 50th anniversary class and all other physicians in attendance who wished to participate in a recitation of a modern English version of the oath composed by another distinguished P&S alumnus, the late Louis Lasagna’47, former academic dean of the School of Medicine at Tufts University.
FACULTY
Harold M. Dick, M.D.
Harold M. Dick, who chaired the Department of Orthopedic Surgery from 1984 to 1998, died May 9, 2011. He was the Stinchfield Professor Emeritus of Orthopedic Surgery and had been on the P&S faculty since 1969. As chair, Dr. Dick enhanced and expanded the teaching, research, and clinical care programs and established the Orthopaedic Research Laboratory, the Trauma Training Center, the Microsurgery Training Center, the Sports Medicine Center, and the Anne Youle Stein Center for Orthopaedic Research.

He worked to strengthen orthopedic surgery locally and at the national level, serving as president of the American Orthopaedic Society, the American Orthopaedic Association, and the American Board of Orthopaedic Surgery.

OTHER FACULTY DEATHS

Harold D. Barker, M.D., professor emeritus of clinical surgery, died March 9, 2011.


Robert E. Barrett, M.D., Ph.D., clinical professor of neurology, died June 25, 2011.

Edward T. Bowe, M.D., professor emeritus of clinical obstetrics & gynecology, died March 26, 2011. See Alumni In Memoriam (Class of 1961) for more information.

Arnold M. Cooper, M.D., lecturer in psychiatry and member of the faculty in Columbia’s Center for Psychoanalytic Training and Research, died June 9, 2011. See Alumni In Memoriam (Class of 1956 PSY) for more information.

Robert H. De Bellis, M.D., associate clinical professor of medicine and a 1958 graduate of P&S, died May 15, 2011. See Alumni In Memoriam (Class of 1958) for more information.

Bernard F. Erlanger, Ph.D., professor emeritus of microbiology & immunology, died Sept. 8, 2011. He received his Ph.D. from Columbia in 1951.

Lawrence Deutsch, M.D., lecturer in psychiatry, died Jan. 30, 2011.

Harry W. Fritts Jr., M.D., a former faculty member who worked with Drs. André Cournand and Dickinson Richards in the pulmonary function laboratory at Bellevue Hospital, died April 22, 2011. Dr. Fritts succeeded Dr. Cournand as lab director specializing in cardiopulmonary physiology and he was named the Dickinson W. Richards chair of medicine.

Alexander Glassman, M.D., professor of clinical psychiatry and retired chief of clinical psychopharmacology in the clinical therapeutics division, died July 19, 2011.


Nabil Husami, M.D., associate clinical professor of obstetrics & gynecology, died April 12, 2010.

Richard Jaffe, M.D., associate professor of clinical obstetrics & gynecology, died April 12, 2010.

Terry L. Koch, a member of the anesthesiology faculty until 2007, died June 21, 2011. See Alumni In Memoriam (Class of 1993) for more information.

Donald Mandell, Ph.D., research scientist at the New York State Psychiatric Institute, died March 12, 2011.

Maurice M. Rapport, Ph.D., professor emeritus of biochemistry and a longtime member of the New York State Psychiatric Institute, where he was former chief of the neuroscience division, died Aug. 18, 2011.

Peter Dunsmore Stevens, M.D., associate professor of clinical medicine-digestive and liver diseases and director of endoscopy, died Aug. 13, 2011. See Alumni In Memoriam (Class of 1987) for more information.

Alberta B. Szalita, M.D., a retired faculty member in psychiatry, died Nov. 10, 2010.

ALUMNI
1936
Julius Wolfram of Dallas died March 16, 2011, at age 98. After medical training he entered the Army and ultimately became chief of medicine at the 5th Ferrying Command at Love Field in Dallas. When he was discharged from World War II service as a major, he remained in Dallas and practiced internal medicine and cardiology for more than 60 years. He also taught as clinical professor of medicine at Southwestem Medical School. After his family and medicine, his greatest loves were classical music, opera, nature, and ornithology. He was an avid tennis player and enjoyed golf and hiking. In retirement he traveled with his wife to China, Japan, Israel, Egypt, and widely through Europe. He served in World War II as a surgeon in the 95th Evacuation Hospital in North Africa, Italy, France, and Germany and took part in three D-Day landings. He was honored for his service and valor with the European Theater Ribbon, the Meritorious Service Unit Plaque, and the American Defense Service Medal. Dr. Friedenberg participated in the development of a film, “Wounded in Action,” about the role of orthopedic surgeons in World War II, produced by the American Academy of Orthopedic Surgeons. In later years he was an avid scuba diver and filmed underwater life. He was also the author of several books on medical history, including “The Doctor in Colonial America,” “Medicine Under Sail,” Hospital at War,” “Surgery Over the Centuries,” and “Magic, Rhea, his wife of 68 years; his sons, Michael, Steven, and Richard; and eight grandchildren.

1939
Zachary B. Friedenberg, a retired orthopedic surgeon, died Jan. 27, 2011. Dr. Friedenberg had been a member of the faculty in the Department of Orthopedics at the University of Pennsylvania and served as chief of orthopedic surgery at Presbyterian Medical Center and Chester County Hospital. In the course of his professional career he pursued pioneering research in the electrical healing of bone fractures by direct current stimulation. He served in World War II as a surgeon in the 95th Evacuation Hospital in North Africa, Italy, France, and Germany and took part in three D-Day landings. He was honored for his service and valor with the European Theater Ribbon, the Meritorious Service Unit Plaque, and the American Defense Service Medal. Dr. Friedenberg participated in the development of a film, “Wounded in Action,” about the role of orthopedic surgeons in World War II, produced by the American Academy of Orthopedic Surgeons. In later years he was an avid scuba diver and filmed underwater life. He was also the author of several books on medical history, including “The Doctor in Colonial America,” “Medicine Under Sail,” Hospital at War,” “Surgery Over the Centuries,” and “Magic,
Miracles and Medicine.” He is survived by his wife, Ruth, a daughter, a son, and two grandchildren.

1942
J. David Hammond died March 22, 2010. For more than two decades he was director of the Ithaca College Student Health Center, which was named in his honor. Dr. Hammond was a past president of the New York State College Health Association. He had previously pursued a private practice in anesthesiology. Dr. Hammond was a loyal alumnus and supporter of P&S. He is survived by his wife, Dorothea, a daughter, two sons, and three grandchildren.

Ethan A.H. Sims, a retired academic endocrinologist with a special interest in obesity and diabetics, died Nov. 9, 2010. Following a residency at Yale, Dr. Sims served in the U.S. Naval Reserve. He subsequently joined the Department of Medicine faculty at the University of Vermont, where he founded an endocrine-metabolic unit with a program of clinical care. Among the highlights of his research was an inter-university collaborative study of obesity in men. Following his retirement he focused on creating and refining a computer program for database management and diagnosis with a specific application to the syndrome of insulin resistance. Of his career in medicine, Dr. Sims once wrote, “It has been a privilege to live in this era of rapid expansion of knowledge of the miracles of life on this orb and to have the opportunity to share in the healing art.” He was preceded in death by his wife, Dorothea, and is survived by a daughter and two sons, one of whom, Nathaniel Sims’79 is a cardiac surgical anesthesiologist, and three grandchildren.

1944
Arthur Phillips, a retired cardiologist, died April 24, 2011. He was 92. A former clinical professor in the Department of Internal Medicine at the University of Pittsburgh, Dr. Phillips pursued a private practice for more than 30 years. He established the first coronary care unit at Weirton General Hospital in Weirton, W.Va., where he was chairman of the Department of Medicine. Following his retirement from private practice, he was appointed clinical professor of medicine at Brown University, where he subsequently earned the Irving A. Beck Memorial Award in 1998 for his dedication to patient care and scholarship. Dr. Phillips served in the U.S. Army Medical Corps. Following his retirement to Florida, he helped out for many years at the Volunteers in Medicine Clinic in Stuart. Survivors include his wife, Doris, a daughter, two sons, five grandchildren, and one great-granddaughter.

1945
Forbes Delany, a retired radiologist, died March 3, 2011. Dr. Delany served as a Navy surgeon attached to the Marine Corps, for which he supervised a medical center in Tsingtao, China, during World War II. After the war he joined the staff of Greenwich Hospital in Connecticut, working in the new radiology facility at a time when the hospital had a single X-ray machine. In 1967 he became the youngest physician to be named chief of the hospital’s medical staff. Subsequently he became director of radiology and nuclear medicine, a position he held until his retirement. In 1959 he was one of the co-founders of the Greenwich Radiology Group. In 1975 he returned to medical school to become board-certified in nuclear medicine. In 1977 he performed the first CAT scan at Greenwich Hospital. Following his second “retirement,” he served with the Greenwich Board of Health and was the physician of record for the Town of Greenwich until 2007. Dr. Delany is survived by his wife, Mary, six children, and 12 grandchildren.

Samuel Dvoskin, a retired internist and impassioned botanist, died May 4, 2011. He was 94. Barely surviving a rat bite as a young boy, he became interested in medicine. As a young man he conducted research toward a Ph.D. in the laboratory of the renowned endocrinologist Philip E. Smith and taught anatomy at P&S before enrolling as a medical student on the urging of dean of students Aura Severinghaus. Affiliated for many years with the Pack Medical Group, his patients rich and poor included former presidents of the Philippines and the Dominican Republic and Eva Peron. While caring for his private patients, he always made time to tend to the indigent at no charge at the Presbyterian Clinic. He subsequently worked for the New York State Department of Health, during which he investigated the death of Andy Warhol. Outside of medicine his great passion was botany. Following his retirement, he volunteered for many years as a docent at the New York Botanical Gardens, where he gave tours. He served from 1951 to 1953 as chief of the medical service of the U.S. Army Hospital at Fort McClellan in Alabama. Preceded in death by his wife, Leila, he is survived by a sister. Devoted to his medical alma mater, to which he left a generous bequest to endow the Leila Dvoskin Scholarship Fund in memory of his wife, he once put his feelings this way: “Here was a poor boy born with nothing, who ended up studying medicine at one of America’s finest schools. I’ll never forget the privilege P&S gave me. Maybe I would’ve made a good shoe salesman, but I would never have satisfied my mind. What a wonderful profession medicine is. You can not only learn the secrets of life, but also help people in the process.”

John R. Poffenberger, a retired internist, died Feb. 21, 2011. He is survived by his wife, Margaret, two daughters, a son, and five grandchildren.

1946
Frank X. Hasselbacher, a retired psychiatrist and former member of the clinical faculty in the Department of Psychiatry at Yale, died April 6, 2011. He was 92. Born in Nuremberg, Germany, he immigrated with his family to the United States in 1924. Dr. Hasselbacher served as a captain in the U.S. Army. Following medical school, he earned an M.S. in health administration at Columbia and worked for the state mental hospital systems of Pennsylvania and Connecticut, later serving as director of state mental health services of Pennsylvania. In 1967 he opened a private practice in psychiatry in Camp Hill, Pa. Preceded in death by his wife, Gloria, he is survived by a daughter, three sons, seven grandchildren, and four great-grandchildren.

1947
Christoph A. Guarino, a retired orthopedic surgeon and past president of the Cerebral Palsy Foundation, died Dec. 14, 2010. Dr. Guarino served in the U.S. Navy, Army, and National Guard. For 32 years he pursued a private orthopedic practice in Tucson, Ariz., where he was chief of surgery at
Tucon Medical Center and director of the Crippled Children’s Clinic. He also served as president of the Pima County Medical Society and the Arizona chapter of the Western Orthopedic Association. In addition, Dr. Guarino volunteered at St. Elizabeth of Hungary Clinic and the Tucson Medical Center Hospice. Survivors include his wife, Gloria, two daughters, three sons, and seven grandchildren.

1948
Robert A. Shimm, a retired general internist and emeritus professor of medicine at Albert Einstein College of Medicine, where he was a founding faculty member, died Dec. 29, 2010. Following his official retirement he served as an attending physician at Schervier Nursing Care Center and as medical coordinator at the New York State Department of Health, Office of Professional Medical Conduct, where he evaluated and triaged complaints submitted by the public of medical misconduct. He had been affiliated with Montefiore Hospital. Dr. Shimm served in the U.S. Air Force. He is survived by his wife, Patricia, a daughter, two sons, and four grandchildren.

1949
Martha M. MacGuffie, a pioneering plastic surgeon and later in life a humanitarian who devoted herself heart and soul to the cause of AIDS orphans in Africa, died March 7, 2011. She was the first woman to train in plastic and reconstructive surgery under the legendary Jerome Webster (who had publicly stated he would never train a woman) and the first woman surgeon to serve on the staff of a major suburban hospital, Nyack Hospital in Nyack, N.Y. There she established the first burn unit and officiated for more than three decades as chief of plastic surgery. Along the way, she also invented the water bed as a therapeutic aid to burn patients. Those accomplishments would surely have been enough to ensure her place in medical history. But tragedy further tested her mettle. Two of her young sons, both suffering from a rare blood disorder, contracted AIDS, a disease unknown at the time, through blood transfusions. Another son, distraught at the loss of his brothers, took to alcohol and drugs and disappeared. Shattered as a mother, Dr. MacGuffie turned personal tragedy into a humanitarian cause. In 1988, she co-founded (with Dr. Renee M. Brilliant, the pediatric hematologist who had treated her sons) the Society for Hospital and Resource Exchange, better known by the acronym SHARE. A non-profit emergency aid organization, SHARE brings vital U.S. medical technology and manpower to the bush of western Kenya and other hard-hit places, tending to the needs of AIDS orphans and anyone else in need of medical assistance. The king-pin of the organization’s manpower was Dr. MacGuffie’s tireless woman-power. For many years she herself traveled to Africa several times a year to oversee humanitarian missions and to provide much of the frontline care herself. Among other honors, she received the Harper’s Bazaar Super Woman of the Year Award, the Humanitarian Warrior-Woman of the Year Award of the Martin Luther King Foundation, Rotary International’s “Service Above Self” Award, Lions Club International’s Humanitarian Award (Mother Teresa was a previous recipient), and the Virginia Kneeland Frantz’22 Distinguished Women in Medicine Award at P&S.

1949 PSY
Irving B. Harrison, a retired psychiatrist based in Los Angeles, died Feb. 14, 2011. He is survived by his wife, Carol.

1950
Retired internist John P. Jahn died Dec. 23, 2010. In addition to having a private practice, Dr. Jahn had been a physician on the Student Health Service of the University of California and was affiliated with Alta Bates Community and Herrick Memorial hospitals in Berkeley, Calif., and Merritt Hospital in Oakland. Survivors include his wife, Ana, two daughters, a son, and three grandchildren.

1951
Baruch S. Blumberg, who won a Nobel Prize for his discovery of the hepatitis B virus and development of a vaccine to cure it, then went on to reinvent himself yet again, at age 78, as founding director of NASA’s Astrobiology Institute, died of a heart attack shortly after delivering the keynote address at a NASA conference on April 5, 2011. He was 85. Dr. Blumberg and his eclectic team of researchers at the Philadelphia-based Fox Chase Cancer Center (a private cancer care and research facility that profited handsomely from its investment in the vaccine patent) did not originally have hepatitis on their minds. They were, Dr. Blumberg insists, merely pursuing a compelling line of scientific questioning with “the faith that if you study basic problems you’ll find clinical applications.” Intellectual ringleader of a hand-picked band of brilliant scientific adventurers (clinicians, basic scientists, immunologists, epidemiologists, statisticians, and computer scientists), Dr. Blumberg took them hundreds of thousands of miles afield, from Philadelphia to the Australian outback and throughout much of Southeast Asia, testing serum samples in a portable laboratory. Ultimately they stumbled on the resolution of a medical puzzle that had eluded generations of immunologists and virologists. Rejecting academic categories, the maverick thinker once observed: “The virologists say I’m not really a virologist. The geneticists say I’m not really a geneticist. Actually, I think of myself as a clinical researcher.” It was in conjunction with the...
a parasitology class taught at PCr& by the legendary Dr. Harold Brown that Dr. Blumberg got his first taste of fieldwork that would mark him for life, studying a native population afflicted with filariasis (elephantiasis), among countless other ailments, in a remote corner of Suriname. Following a stint as head of the Geographic Medicine and Genetics Section at the National Institutes of Health, Dr. Blumberg moved to Philadelphia, where he was named professor of human genetics at the University of Pennsylvania (later adding the title professor of anthropology) and senior member of the Fox Chase Cancer Center, an institution with which he maintained a lifelong affiliation. There, in the course of studying blood sera from transfused individuals in search of inherited immunological variations, he hit upon a major lead. “In 1966,” he wrote in “Immunology: The Making of a Modern Science,” “we identified an antigen-antibody system. The antiserum was found in the blood of a hemophilia patient from New York and the antigen in an Australian aborigine. By 1967 we had evidence that the antigen was on the surface of one of the hypothesized hepatitis viruses and that the antibody had developed in the transfused patient as a consequence of exposure to the virus. Later, it was concluded that ‘Australia antigen’ identified HBV [Hepatitis B Virus] was characterized by blood-borne transmission.” He and his teammates went on to develop a vaccine prepared from the purified blood of carriers of the disease, the first vaccine ever made from human blood. Marketed by Merck & Co., and subsequently reproduced by recombinant method, the vaccine is now used in some 40 countries and has saved millions of lives. In 1999, as founding director of the NASA Astrobiology Institute at NASA Ames Research Center, in Moffett Field, Calif., Dr. Blumberg set out on a new adventure, in which he was still engaged at the time of his death, to study the origins of life on Earth and the search for life elsewhere in the universe. A former Master of Balliol College at Oxford, in 2005 he was named president of the American Philosophical Society, founded by Benjamin Franklin and the oldest learned society in America. Among other encomia received in the course of his career from institutions around the world, Dr. Blumberg was awarded the 1979 P&S Alumni Association Gold Medal for Outstanding Achievements in Medical Research. He is survived by his wife, Jean, two daughters, two sons, and eight grandchildren.

1953 Daniel W. Benninghoff, a retired pathology, died of pancreatic cancer July 13, 2011, at age 86. He served in the U.S. Army during World War II, much of the time as a technician with a general hospital on Iwo Jima, earning a Bronze Star. Dr. Benninghoff taught for a few years on the pathology faculty at PCr&S before moving to Greenwich, Conn., where he was named director of pathology at Greenwich Hospital, a position he held for close to three decades. In Greenwich he joined the Board of Directors of the American Red Cross and for many years chaired the Medical Advisory Committee of the Greenwich Health Association. He also served as president of the Connecticut Society of Pathologists. Dr. Benninghoff is survived by his wife, Jeanne, a daughter, three sons, and eight grandchildren.

1956 PSY Arnold M. Cooper died June 9, 2011, of lung cancer at age 88. He practiced psychiatry and psychoanalysis for almost six decades and was a former faculty member in psychiatry at PCr&S and in English at Columbia College. When he accepted a Sigourney Trust Award in 2009, he described what he called his “political writings” as an attempt to push psychoanalysis toward “robust research and a scholarly base.” In 2005, “The Quiet Revolution in American Psychoanalysis” was published as a selection of more than 150 papers he wrote. He also was the co-author, with Ethel Person’67 PSY, of a clinical guide and reference book on psychoanalysis that is considered an essential text. He served as vice president of the International Psychoanalytic Association and president of the American Psychoanalytic Association. He is survived by his wife, Ellen, two daughters, a son, a step-son, a step-daughter, and 10 grandchildren.

1957 Stephen L. Post, a professor of psychiatry at Saint Louis University’s medical school, died April 6, 2011. He was 83. Dr. Post also taught and practiced at the St. Louis Psychoanalytic Institute and served as the first medical director of care and counseling of St. Louis. He is survived by his wife, Jeanne, two daughters, a son, a step-son, a step-daughter, and 10 grandchildren.

1958 Robert H. De Bellis, an internist/oncologist affiliated for more than 50 years with Columbia, died May 14, 2011. Dr. De Bellis was a member of the clinical faculty in the Department of Medicine at PCr&S. Survivors include his wife, Frances, a daughter, and a son. He was a loyal alumnus and a generous supporter of PCr&S.

1958 Robert J. Blahut, a retired radiologist, died Feb. 9, 2009. After serving in the U.S. Air Force, he had a private radiology practice in San Mateo, Calif., and maintained an affiliation with Peninsula Hospital. He is survived by his wife, Virginia.
1959
Arnold J. Schwartz, a radiologist, died of leukemia March 8, 2011, at age 77. A former president of the Stamford Medical Association, Dr. Schwartz was a founding partner of Stamford Radiological Associates in Stamford, Conn. He was preceded in death by his wife, Myna, and is survived by his partner, Rhea Stein, two sons, and four grandchildren.

1961
Edward T. Rowe, professor emeritus of clinical OB/GYN at P&S, died March 26, 2011, following a lengthy struggle with cancer. A former professional jazz musician and U.S. Army veteran of the Korean War, Dr. Rowe subsequently switched tracks to medicine, training in obstetrics & gynecology at Sloane Hospital for Women at Columbia-Presbyterian. He was actively involved with perinatal research and treatment innovations, including fetal monitoring and blood sampling, and the development of RHO (D) immunoglobulin to fight Rh disease. He took great joy in teaching and mentoring medical students and residents and was an early and staunch advocate of midwives as colleagues in every aspect of OB/GYN practice. He earned a reputation as a perinatologist of the first rank over his 40-year practice, performing high-risk obstetrics and gynecology until his retirement in 2001. He maintained his passion for music, playing oboe in orchestras and chamber music ensembles from New York City to Bennington, Vt. He is survived by his wife, Carol Sue, three daughters, and three sons.

Joseph L. Glass, a retired internist (hematology/oncology), died April 25, 2011. He had been affiliated with Mount Sinai and Lenox Hill hospitals. He is survived by his wife, Barbara “Bobbie,” a daughter, and three sons.

1962
Peter A. Cassileth, former professor of medicine in the division of hematology-oncology at the University of Pennsylvania, died of leukemia June 6, 2011, at age 73. He served as a captain in the U.S. Army, stationed at Ireland Army Hospital at Fort Knox, Ky. At UPenn he founded and served as director of the bone marrow transplant unit. In 1992 Dr. Cassileth moved to the University of Miami, where he was named professor of medicine and chief of the hematology-oncology division and developed the bone marrow transplant unit at Jackson Memorial Hospital. Author of more than 140 peer-reviewed articles, Dr. Cassileth also chaired the hematology certification examination and was a member of the executive committee of the American Board of Internal Medicine. He is survived by his wife, Judith, two daughters, a son, three stepsons, and 10 grandchildren.

1964
Jack C. Childers Jr., a retired orthopedist, died of cardiac arrest April 29, 2011. He was 72. A member of the orthopedics faculty at Johns Hopkins, he had been affiliated with St. Joseph Hospital in Towson, Md. He is survived by his wife, Sally, a daughter, and three sons.

1968
Charles I. Heller, a radiologist who was instrumental in introducing ultrasound to the Bridgeport Hospital in Bridgeport, Conn., died April 15, 2011. Dr. Heller served as lieutenant commander in the U.S. Public Health Service and was a clinical associate at the National Cancer Institute. A cyclist, photographer, and classical music buff in his free time, Dr. Heller also loved to travel and to walk the streets of New York City. Survivors include his wife, Sue Ann, two daughters, and three grandchildren.

1969
Michael B. Bunim, an internist affiliated for many years with Kaiser Permanente, died Aug. 5, 2011, following a long illness in the wake of heart surgery during which he contracted a brain injury. Dr. Bunim had been affiliated with Mount Zion Hospital and Medical Center in San Francisco. He taught on the clinical faculty in the Department of Medicine at UCSF and served on the California Medical Quality Review Board. Outside of medicine he loved music, playing for a time in a rock ‘n’ roll band. Survivors include his wife Cindy, a daughter, and a son.

Richard A. Maun, a retired orthopedic surgeon, died Dec. 23, 2010. Dr. Maun served as battalion surgeon for the Marines Battalion 2/4 in Okinawa then as commanding officer of the Second Collection and Clearing Platoon stationed in the Philippines, Vietnam, Hong Kong, and Japan. Entering private practice in Whittier, Calif., he taught on the faculty in the Department of Orthopedic Surgery at the University of Southern California and served as chief of surgery, medical staff president, and chief of staff of the Presbyterian Intercommunity Hospital. He was a past president of the Whittier Academy of Medicine. He is survived by his wife, Julie, and two sons.

H. Douglas Wilson died June 2, 2011. An internist, he served in the U.S. Navy, stationed in Florida at Pensacola Naval Hospital. He is survived by his wife, Susan, and a son.

1987
Peter D. Stevens, associate professor of clinical medicine-digestive and liver diseases at P&S and director of endoscopy at CUMC, died Aug. 13, 2011. He was 49. A former chief of interventional endoscopy at NewYork-Presbyterian-Hospital/Columbia, he was highly respected in his field. Dr. Stevens helped develop minimally invasive techniques for the treatment of pancreatic cancer and biliary disease. A former president of the New York Society for Gastrointestinal Endoscopy, he was the first gastroenterologist in New York to perform natural orifice transluminal endoscopic surgery. He is survived by his wife, Amy Stevens’89, a daughter, and a son.

1991
David W. Kennedy, a hematologist on the faculty of the University of Washington in Seattle, died May 22, 2011.

1993
Terry L. Koch, an anesthesiologist and former physician at CUMC, died in an accident in Mexico June 21, 2011. Dr. Koch specialized in clinical problem solving of anesthesiological issues in the treatment of critically ill patients in the OR and the ICU. In her free time, she was a world traveler, relishing journeys with her husband, Dr. Allen Fienberg, a researcher at Rockefeller University, and two daughters, who survive her.

Correction
In the Spring 2011 issue, deceased alumnus Peter J. Cohen ’60 was mistakenly listed as Paul J. Cohen. The PDF version of the issue online – at www.cumc.columbia.edu/news/journal – shows the correct information.
P&S and the Arts

P&S For the Arts, the newest activity club under the auspices of the P&S Club, started in January 2011. Currently, the club has more than 100 members, making it one of the largest P&S clubs.

As an arts appreciation club, P&S For the Arts creates opportunities for students to attend monthly group outings to experience the wealth of arts available in New York City, including fine art, dance, music, and theater. The strong association between medicine and the arts has a lengthy and prodigious history at P&S.

In February, the club got half-priced tickets to see Daniel Radcliffe (of the famed “Harry Potter” films) in composer-lyricist Frank Loesser’s “How to Succeed in Business Without Really Trying” on Broadway. In March, members were treated to a private after-hours tour of MOMA’s “Abstract Expressionism” exhibition, and they also made a trip to see the immersive play, “Sleep No More,” at the McKittrick Hotel.

In April, the club invited the assistant director of MOMA’s Alzheimer’s Project for a talk at CUMC, which had more than 40 students in attendance. In addition, members went to hear Bagemusic in Brooklyn. At the end of May, members attended a performance by New York City Ballet at Lincoln Center and had a private tour onstage and backstage at the David H. Koch Theater, hosted by principal dancer Jared Angle. The ballet company performed a tribute to Broadway, including George Balanchine’s classic “Slaughter on Tenth Avenue” (music by Richard Rodgers, from the 1936 musical “On Your Toes”), a new piece, “For the Love of Duke,” choreographed by Susan Stroman (of “The Producers” fame) and, last but by no means least, “West Side Story Suite,” a collection of the major dances from the famed show choreographed by Jerome Robbins.

Club activities are open to all CUMC students, faculty, and P&S alumni. To join the club’s email list for monthly events, contact the club founder and president, Jonathan Mayer, at jem2227@columbia.edu.

We look forward to exciting new ventures into the cultural capital of the world.
Samuel Dvoskin, M.D. ’45 said...

“Including a bequest in my will for a scholarship fund was a natural way to show my appreciation for the extraordinary training I received at P&S. Because I was the beneficiary of a generous scholarship, I established a scholarship fund at P&S in honor of my late wife, Leila. My bequest will ensure that a fund will continue to provide financial help to worthy students long after I’m gone. You’ve got to give back some of what you’ve been privileged to get, or else how do you hope to keep it going?”

There are many ways to leave a legacy to the College of Physicians and Surgeons with a charitable bequest one of the most popular because it is the easiest and allows you to retain full use of your gift property throughout your lifetime.

Your bequest gift can help make a difference in a variety of ways. For example, a bequest gift to P&S can provide scholarships for deserving students, support a program or department of your choice or support an endowed fund.

To leave a lasting legacy to P&S:
1. Determine the specific dollar amount or percentage of your estate you would like to give and the area you wish to support
2. See your attorney or modify your will
3. Inform us of your intent so we can acknowledge your generosity and make sure your intentions are understood. We would also like to include you as a member of The 1754 Society.

For additional information contact Laura Tenenbaum in the Planned Giving office by calling 212.342.2108 or by email at givingwell@columbia.edu
I took my state examinations, got my license to practice medicine. I felt if I ever lost out in business I could go back and practice medicine. And I always proudly pointed to my license hanging above my desk. The only thing I ever got out of my medical career was my M.D. license plates, which gave me the right to park my car anyplace in New York City.

—Armand Hammer’21, American industrialist and chairman and CEO of Occidental Petroleum Company, at 1977 press conference announcing his gift to help pay for the Hammer Health Sciences Center