This Perfect Building
TRENT SEMANS CENTER FOR HEALTH EDUCATION IS DEDICATED
Each spring I deliver my annual State of the School address. In my remarks in March, I discussed the highlights of the past year and the challenges before us. Along with other research-intensive medical schools across the country, we are in an era of tremendous change. It seemed fitting that I gave my talk in the new Mary Duke Biddle Trent Semans Center for Health Education – a spectacular building that makes a strong statement about our aspirations for the future.

In my address I announced that the Board of Trustees recently approved the creation of a new Department of Neurology. The current Division of Neurology, within the Department of Medicine, will become independent in July. Interim Division Chief Joel Morgenlander, MD, will serve as interim chair until I appoint a permanent chair. Neurology is the third new department established over the past four years, joining Dermatology and Orthopaedic Surgery. Elevating these units to department status puts our organizational structure in better alignment with other medical schools and affirms the national reputation each has earned.

I announced in January that Benjamin Alman, MD, chair of Orthopaedics at the University of Toronto and a senior scientist in their Developmental and Stem Cell Biology Program, will join us in July as the first permanent chair of the Department of Orthopaedic Surgery. In addition to Dr. Alman’s arrival and our search for a Department of Neurology chair, we have begun processes to identify new chairs for the Departments of Surgery, Radiology, and Pediatrics. Strong leadership is particularly important as we navigate the uncertainties of the next few years. Academic medicine must adapt to a very different environment as health care reform plays out, and as sequestration further limits federal funding for biomedical research. I feel extremely fortunate to be working through these challenges with an outstanding group of department chairs, vice deans, and other institutional leaders.

As always, there is a lot going on in the School of Medicine. In this issue, you will read about the opening of the Trent Semans Center; an alumni council visit to the Duke-National University of Singapore Graduate Medical School; our commemoration of the fiftieth anniversary of admission of African-American students to Duke; and exciting initiatives in genetics research and global health. You will learn about the accomplishments and contributions of the 2013 distinguished Medical Alumni Association Award recipients. I hope that these articles will help you feel connected, and will inspire you to visit at reunion time.

With warm wishes,

Nancy C. Andrews, MD, PhD
Dean, Duke University School of Medicine
Vice Chancellor, Academic Affairs
Professor, Pediatrics
Professor, Pharmacology and Cancer Biology
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Sex Ed at Duke—a Tradition

Many great memories came back when I read “Med Students Teach Sex Ed to High Schoolers” (Spring 2012 issue) about the successful HEY-Durham program founded in 1999. Thirty years earlier in 1969, a previous generation of Duke med students developed and taught a very similar program of sex education in the Durham junior high schools for years, at the request of the public school administration due to an “unprecedented number of pregnancies in young teens.” With the strong support of the legendary department chairs Roy T. Parker (OB-GYN) and Samuel L. Katz (Pediatrics), The Committee on Sex Education...enthusiastically accepted the challenge and dedicated themselves to writing curricula, training themselves, and then teaching in the schools and soon in an expanding scope of settings as excitement about their program grew. The members became more multidisciplinary as new students joined the Committee.

I was co-chair of the original committee and am still amazed at what these Duke students accomplished, mostly on their own time. Several would later become national leaders in the field of adolescent medicine, a new specialty forming during those years. A journal article was published about the program in 1972 and is now available online:


Congratulations to all those involved with HEY-Durham. One gift of teaching is that you learn far more than you teach. May their memories be great ones too.

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IN BRIEF

AAMC Lauds Duke-NUS for Team-Based Learning

The Association of American Medical Colleges (AAMC) has recognized The Duke-National University of Singapore Graduate Medical School (Duke-NUS) for its success with team-based learning. In a case study titled “Readiness for Reform,” the AAMC calls Duke-NUS “a pioneer in medical education” for being one of the first schools of medicine to successfully apply team-based learning throughout the basic science curriculum. All courses taken by first-year medical students at Duke-NUS are taught in the collaborative, cooperative learning method similar to that used by American business schools.

Students review supplemental material prior to attending class. In class they take an individual readiness assessment to gauge their knowledge of the material, followed by the same test taken in teams. In-class activities focus on assuring understanding, applying principles, and solving problems within student teams facilitated by faculty. Students are required to demonstrate self-directed learning.

The AAMC reports that in less time, Duke-NUS students achieved comparable scores to U.S. medical students on standardized tests of basic science knowledge. Duke-NUS students performed significantly higher than the U.S. students at the end of their second (clinical) year. Duke University School of Medicine is also involved with TeamLead type activities. A portion of the first-year basic science instruction uses aspects of team-based learning.

“We are still experimenting with the mix and style of the process,” said Edward G. Buckley, E’72, MD’77, HS’77-’81, vice dean for medical education at Duke. “The faculty feel that we should offer a variety of approaches as opposed to a single strategy. We will continue to work with Singapore to develop the best educational program going forward.”

Alumni Council Members Visit Singapore

Several members of the Duke Medical Alumni Council visited Duke-National University of Singapore Graduate Medical School (Duke-NUS) last year to observe classes, meet administrators, and encourage the school to form an alumni association.

“Not only would an alumni organization help to keep Duke-NUS alumni connected to each other and their school, but it would help to spread the Duke brand even more in Asia,” said Dale Shaw, T’69, MD’73, HS’73-’77.

Also making the trip were council members Nicholas Leonardy, T’81, MD’85, and Lucy Freedy, MD’56.

Shaw said that alumni organizations are unique to America, but several universities in England recently have organized them.

Duke-NUS opened in 2007 and has graduated six classes to date.

“The students at Duke-NUS are very proud of the Duke name on their diplomas.”

- Dale Shaw
A FIRST: All Female Chief Residents in General Surgery

Glance at the roster of the Department of Surgery’s 2012-2013 general surgery chief residents, and you might notice something unusual. They’re all women that make up this year’s general surgery chief resident contingent. That’s a first for Duke Surgery, which had its first female general surgery chief resident in 1988. Historically, surgery has been largely a male domain, although a 2011 study published in the Journal of the American College of Surgeons found that gap shrinking. The study reported that 40 percent of graduates entering general surgery residencies in 2005-2006, the last year of the study, were women – a 25 percent increase from the 32 percent reported in the first year of the study, 2000-2001.

Theodore Pappas, MD, interim chair of the Department of Surgery, said the gender makeup of this year’s general surgery chief residents roster was not the result of any deliberate effort by the program. "We just pick the best people," Pappas said. "I do think a lot of women have found out that this is a great place to learn and train."

Duke Joins Rwandan Health Effort

The Duke University schools of medicine and nursing are among 13 U.S. schools partnering with Rwanda’s Ministry of Health to build a high-quality, sustainable health system in Rwanda. The seven-year Rwanda Human Resources for Health (HRH) Program was announced by former U.S. President Bill Clinton in July 2012.

The Rwanda HRH Program will address the country’s severe shortage of health care workers by sending faculty from U.S. educational institutions to train future health professionals. By dramatically increasing the number, quality, and skill level of Rwandan clinicians and health sciences educators, the program aims to build the infrastructure and workforce needed to create a sustainable health care system.

Each participating school has committed to send full-time faculty members to Rwanda for up to one year to help improve teaching, research, curriculum development, and mentorship.

Dean Andrews Named to National Academies Council

Dean Nancy Andrews, MD, PhD, has been elected to serve on the Council of the Institute of Medicine of the National Academies.

Andrews was one of six new members elected to the council, the governing body of the Institute of Medicine. The IOM, the health arm of the National Academies, is an independent nonprofit organization that works outside of government to provide unbiased and authoritative advice to decision-makers and the public. Her term began January 1, 2013, and will run for three years.

Andrews has been a member of the Institute of Medicine since 2006, the year before she was named dean of the medical school at Duke.
Newman is 2013 President of Medical Alumni Association

Kurt D. Newman, MD’78 was elected president of the Duke Medical Alumni Association during the Medical Alumni Council meeting in October.

Newman has served on the Alumni Council since 2002. He will give the keynote address at Clinical Science Day, Friday, October 17, during Medical Alumni Weekend.

A pediatric surgeon, Newman was appointed president and CEO of Children’s National Medical Center in Washington, D.C., in September. He has spent his entire career at Children’s National, serving as senior vice president for the Joseph E. Robert, Jr. Center for Surgical Care. He also is a professor of surgery and pediatrics at George Washington University.

Newman is a member of the Board of Commissioners of the Joint Commission and a past member of the Board of Governors of the American Pediatric Surgery Association. He also has served as chairman of the Surgery Section of the American Academy of Pediatrics.

He received a bachelor of arts degree in 1973 from the University of North Carolina at Chapel Hill, where he was a Morehead Scholar. He trained at Brigham and Women’s Hospital in Boston, Mass., and the Children’s National Medical Center in Washington, D.C., where he served as a fellow in pediatric surgery.

Newman is the recipient of the first Sauber Family Award in 2002. He was named one of Washington’s top surgeons by Washington Consumers’ Checkbook in 1998 and a top doctor in Washington by Washingtonian Magazine. He served as chair of the American Academy of Pediatrics for the Surgery Section from 2007 to 09.

He lives in Bethesda, Md., with his wife Alison and two sons, Jackson and Robert.
Faces of Change: School of Medicine Commemorates the Legacy of African Americans at Duke

In 1963, the first five black undergraduates enrolled at Duke. At that time, the university had no black faculty, administrators, or trustees. Across campus at Duke University School of Medicine, another barrier was being broken. Delano Meriwether, MD’67, became the first black student to attend the medical school.

On April 19, the School of Medicine, alumni, students, faculty, leadership and community members will come together to celebrate the 50-year legacy of African Americans at Duke University School of Medicine. The event, “Faces of Change,” will be held at the Durham Convention Center.

The event is sponsored by Duke University School of Medicine, Duke Medical Alumni Association, Duke Medicine Office of the Chancellor, the Duke Medical Minority Alumni Association, and the Department of Medicine Minority Recruitment and Retention Committee.

For more information about the Faces of Change event, contact Brenda Rimmer at 919-385-3177 or brenda.rimmer@duke.edu or visit medalumni.duke.edu/events/faces-change.


To learn more about the university’s year-long commemoration of the 50th anniversary of the first black students to matriculate at Duke, visit spotlight.duke.edu/50years.

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Alumni Association Launches New Website

The Duke Medical Alumni Association has upgraded its website for the first time in six years. The new site (medalumni.duke.edu) was created to give a more user-friendly and streamlined experience to visitors.

Among the new features is homepage visibility of the log-in box for the popular medical alumni database, where alumni can look up classmates and friends. The log-in is located in the lower right corner of every page. Alumni can use their existing log-ins to access the database. If you can’t remember your log-in information, or need to register, just click the “Forgot your user ID or password?” link inside the log-in box.

You’ll also see it’s easier and quicker to connect with us via Youtube, Twitter, and Facebook with easy-to-find icons.

We encourage you to explore the site and email us feedback at dukemed@mc.duke.edu.
Investment in Discovery Science Pays Off 20:1 — Early stage research yields NIH grant

In 2008, Raphael Valdivia, PhD, associate professor of molecular genetics and microbiology, received a $75,000 grant from the Chancellor’s Pilot Funding Program, which enabled him to map the function of genes in the pathogen Chlamydia, which is the leading cause of infectious blindness in the developing world. That was no small feat since the pathogen isn’t easily manipulated with the usual molecular genetic tools; he couldn’t engineer it to have mutations in specific genes. Instead, Valdivia used chemicals to induce natural DNA variation in chlamydia, then used genome sequencing to pinpoint the location of the mutations that caused the biggest problems.

“The Chancellor’s program allowed us to do key proof-of-concept experiments. Many of these ideas looked feasible on a paper napkin, but we did not know if they would work in practice. The grant allowed us to develop a system for mutagenesis and enabled us to show we could use large-scale whole-genome sequencing to track mutations in bacteria that are traditionally difficult to study,” he says.

In 2012, Valdivia published a paper in the journal Proceedings of the National Academy of Sciences showing that he could conduct genome-wide association studies in bacteria such as chlamydia to show associations between individual mutations and various traits. Now, he has a validated method that he can use to investigate other organisms, including the communities of bacteria that live in the human gut—the microbiome. In 2012, he received a five-year grant totaling $1.5 million from the National Institutes of Health for this work.

Valdivia couldn’t have accomplished this without that initial pilot funding. In total, the 2008 Chancellor’s Pilot Funding Program invested $375,000 in five research projects, which have since led to approximately $7.5 million in external funding for those projects; that is a 20:1 return on the initial investment.

Largely because of that success, in December 2012, Chancellor Dzau announced the creation of the Chancellor’s Discovery Program, which each year will make five awards of $75,000 each to researchers in the Schools of Medicine or Nursing. The awards are intended to fund projects that open new lines of investigation for researchers or enable them to start new collaborations. The awards are competitive; in 2012, 105 faculty applied for five awards. Awards are made by the Chancellor’s Science Advisory Council, made up of faculty from basic and clinical departments in the School of Medicine and the School of Nursing.

For more information about the campaign, please visit dukemedicine.duke.edu.
FINALLY...
WE HAVE A BUILDING

DR. ROBERT LEFKOWITZ, BENT AT THE KNEES FOR a better view as he maneuvered a laryngoscope into the patient’s mouth. The unconscious man on the operating table needed his airway cleared, fast.

“OK, show me the tricks of the trade,” Lefkowitz said as he peered through the instrument’s eyepiece.

So James Friedman, MSV, taught the 2012 Nobel Prize winner in Chemistry a thing or two.

“Your instinct is to bend forward, but it actually works better to lean back a little,” Friedman said. “You’re looking for a flap behind his tongue. When you’re in position, pull straight up toward the ceiling.”

Lefkowitz continued working, with somewhat rusty technique—“I wouldn’t let that man within 10 feet of a patient,” whispered a woman looking on—and then straightened up.

“How’d I do?” he asked.

Friedman checked the monitors. The patient’s chest continued to rise and fall.

“Well, he’s still alive,” he said. “So you must have done something right.”

Duke opens its new Health Education Center

Bob Lefkowitz and Kurt Newman, center, tour the building

BY DAVE HART
AMAZING FACTS

58% of the site has been restored with native, adapted or drought tolerant plants – including 100% of the planted areas.

The Center uses over 29,000 sq ft or .67 of an acre of glass. There are 2200 pieces of glass in more than 300 unique shapes.

100% of the plants are irrigated with captured storm water (using 0 gallons of potable water) thanks to a 100,000 gallon cistern located near Duke Medicine Pavilion.

40% of stormwater run-off will be captured and cleaned by bio-retention gardens.

6 Medallions were carved in Italy to match those on the Davison Building, the original home of Duke University School of Medicine. Limestone for the building came from Portugal.

2600 sq ft outdoor terrace sits adjacent to the student lounge area on the 4th floor.

Ground floor
Great Hall and adjoining atrium

2nd floor
Main pedestrian entry, 150-seat amphitheater, Jo Rae Café, conference room

3rd floor
Configurable teaching labs, small-group rooms, learning studios, dean’s offices

4th floor
Student lounge, meeting spaces, study rooms, computer lab, student affairs office and outdoor terrace

5th floor
Three large high-fidelity simulation labs, a simulation surgical suite, and 12 clinical exam rooms

6th floor
Provides expansion space for future needs
47 miles of data cable are used in the building. This allows students to interact live with medical students at Duke-NUS Graduate Medical School in Singapore.

3 of the water fountains have an attachment for filling water bottles. A counter keeps track of how many plastic bottles will be kept out of the landfill.

1 Duke Blue Devil popcorn machine.

Lighting sensors in all rooms allow for a high degree of lighting control and save operating costs by turning lights off when rooms are unoccupied.

150-seat amphitheater, with a twist to accommodate Duke’s emphasis on team-based learning: each stair-stepped level holds two rows of desks and chairs rather than one. That makes it easier for students working in teams to huddle together on projects.

400-seat Great Hall, which can be split into three smaller rooms or opened up to the lobby outside by means of retractable hinged walls.

Information provided by Duke Medicine Facility Planning, Design & Construction
Duke University School of Medicine’s most famous researcher wasn’t actually doing a rotation in the OR, of course.

He was among the hundreds who turned out on Feb. 8 to celebrate the dedication of the spectacular new Mary Duke Biddle Trent Semans Center for Health Education, and he performed his impromptu intubation on a specialized medical mannequin in one of the center’s most remarkable areas, the suite of fully equipped, high-fidelity simulation labs on its fifth floor.

“Let the record show I saved this man’s life!” Lefkowitz announced, to cheers and laughter.

AN EMBODIMENT OF CHANGE

The Trent Semans Center, which opened on Jan. 2, 2013, is just the second home for medical education at Duke since 1930, when the gloriously Gothic Davison Building was built to house the then-new medical school. Generations of students have listened to lectures, run lab experiments, and conducted research within Davison’s iconic walls.

But both the times and the nature of medical education have changed dramatically in the past 80-plus years. The Trent Semans Center is the embodiment of that change.

Davison’s intricately carved stone walls and crenellated towers at the edge of the medical complex have given way to the new building’s sleek, gleaming glass exterior rising from its heart.

Inside, the chalk-dusted blackboards, cramped labs, and scarred desks that were home to generations of medical students have been replaced by state-of-the-art technology, innovative and flexible learning spaces, wireless...
interconnectivity, fully equipped simulation labs, and spacious areas where students can study, meet, and socialize.

“I’m blown away,” Lefkowitz said. “What a great place! This is going to be an amazing place for students to learn.”

The six-story, 104,000-square-foot building was designed to support Duke’s innovative team-based approach to medical education, and to be readily adaptable to meet future needs as medicine, curriculum, and technology evolve.

The idea, said Colleen Grochowski, PhD, associate dean for curricular affairs, was “to create spaces for ideas we haven’t even had yet.”

That forward-looking perspective positions Duke to remain at the forefront of medical education, research and practice well into the 21st century and beyond.

“Finally, we have a building that, through its prominent location, stunning architecture, and visual connection to Duke University, reflects our commitment to and reverence for our mission of educating future leaders in medicine and science,” said Dean Nancy Andrews. “It is indeed a great day for Duke Medicine.”

THE HEART OF THINGS
That great day was a long time coming. Although many students and alumni have fond memories of Davison, it has been obvious for years that the facilities there had become badly outdated.

But not until trustees of The Duke Endowment took a tour of Davison several years ago did progress become possible. They were “truly shocked” at the antiquated facilities, said Chancellor Victor Dzau, MD.

“How does a world-class university have a medical school like this?” Dzau recalled one Duke Endowment trustee asking. The Endowment responded with a $35 million gift to the School of Medicine, the largest single donation in its history, to fund a new home for the medical school. Almost all the rest of the project’s $53 million budget came from donations from alumni, faculty, students, and other benefactors.

The Trent Semans Center is nestled squarely amid the hospital buildings, clinics, and labs that house Duke’s acclaimed medical center. In a matter of minutes you can walk from the new building to Duke Hospital, Duke Clinic, the Cancer Center, or dozens of other medical center facilities.

“The location of this building—right at the heart of our new hospital pavilion, our cancer center, and our clinical operations—puts medical education where it belongs: at the heart of everything we do,” Dzau said. And in important ways, said Ed Buckley, MD, vice dean for education, where the new building is helped make possible what it is: a true center for health education, in more than name only.

“When we went from ‘Where?’ to ‘There,’ suddenly the building had the capacity of being truly transformative,” Buckley said. “It made so much possible.”

A DROP OF CEMENT
On a shelf in her third-floor Trent Semans Center office, Grochowski has a photograph, taken from a balcony above, showing a group of construction workers guiding a chute from a cement truck toward a small gridded square on the muddy ground. The flow of liquefied cement is just about to reach the lip of the chute.

“That’s the first drop of cement on this site,” Grochowski
Edward Buckley, MD, vice dean for education

Jasmine Weiss, Matthew Michel, Lindsey Michel, Emily Mau

said. “That’s what grew into all of this.”

What grew from that first drop is a marvel of innovative design, high-tech systems, and expert craftsmanship. And, an emotional Navid Pourtaheri, MSIV, told the dedication audience, “this perfect building” is imbued with the spirit of Mary Duke Biddle Trent Semans, the great Duke heiress and benefactor in whose honor it is named.

The two primary principles that guided the planners and architects were flexibility and interconnectivity. The completed building embodies those principles on every floor.

Flexibility is inherent in the endlessly configurable rooms, furnishings on wheels, walls that retract to create larger or smaller spaces, and systems created to be adaptable to future needs.

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Flexibility is inherent in the endlessly configurable rooms, furnishings on wheels, walls that retract to create larger or smaller spaces, and systems created to be adaptable to future needs.

“Space is just space,” Buckley said. “But we’ve designed this building so that the space can be used in innumerable ways. We realize that five years from now, we might be doing things completely differently.”

Interconnectivity is built into the recording systems that allow students to analyze their performance, and in the audio and video links that enable students and faculty in virtually any part of the building to share what they’re doing in real time with students and faculty in any other part of the building—or anywhere in the world.

“Our watchword was ‘From anywhere, to anywhere,’” Buckley said. “Students and faculty can watch themselves and say, ‘OK, this is what happened here,’ and reflect on what they did right and what they did wrong.”

FROM CHALKBOARD TO OR

Nowhere is that ability to monitor and learn from performance more useful than in the three large, high-fidelity simulation labs—an OR, an Intensive Care Unit, and a Procedure Room—and the 12 smaller clinical exam rooms on the fifth floor, where students practice their surgical technique, diagnostic and treatment acumen, patient interaction skills, and other techniques.

All the rooms are recordable, and the three large simulation rooms can be monitored and manipulated from adjacent control rooms. Instructors can control the vital signs and conditions of the mannequins, and can even throw unexpected challenges—a sudden power outage, say—at the students.

“Just a few hours ago we were in here giving this patient a tracheotomy,” Friedman told a group of visitors during the dedication, gesturing toward the mannequin on the operating table. “Everything was fine, and then suddenly, he had a pneumothorax and started crashing. Alarms started going off, and we were running IVs, intubating him, giving chest compressions. It was very realistic, very stressful.”

A second team of students watched all this remotely by video. After the exercise (“We lost him,” Friedman said) the two groups gathered to discuss what had gone wrong, and then they switched places.

“Before, this is a scenario we would have done on a chalkboard,” Friedman said. “This is such a different experience. It’s phenomenal for teaching.”

A second team of students watched all this remotely by video. After the exercise (“We lost him,” Friedman said) the two groups gathered to discuss what had gone wrong, and then they switched places.

“Before, this is a scenario we would have done on a chalkboard,” Friedman said. “This is such a different experience. It’s phenomenal for teaching.”

FLOOR BY FLOOR

Each floor in the Trent Semans Center has its own character.

The ground floor is dominated by the Great Hall, a 400-seat room that can be split into three smaller rooms or opened up to the lobby outside by means of retractable hinged walls.

The second floor is home to a café and a 150-seat amphitheater, with a twist to
accommodate Duke’s emphasis on team-based learning: each stair-stepped level holds two rows of desks and chairs rather than one. That makes it easier for students working in teams to huddle together on projects.

Teaching labs, learning studios, and administrative offices are located on the third floor. The next floor up, the fourth, is the home of student affairs, a spacious lounge, meeting spaces and quiet study rooms, computer lab, and a gorgeous outdoor terrace.

“The student lounge is spacious and bright,” Buckley said. “We’ve gone from a little hole in the wall on the top of Davison to this beautiful view of campus, light and open—and, oh, by the way, an outdoor balcony patio. If that patio isn’t packed as soon as spring gets here and the weather warms up, I’ll be shocked.”

The sixth floor provides expansion space for whatever purposes may arise in the future.

Flexible conference rooms, meeting rooms and classrooms are found throughout the building, as are small clusters of comfortable chairs and small tables. Virtually all the south-facing rooms from the second floor on up boast stunning views of Duke Chapel.

“It’s unlike anything we had before,” said Jessica Amenta, an MD-Ph.D. student who was greeting visitors in the fourth-floor lounge during the dedication. “I have a fondness for Davison; I learned there, after all. But if we were able to learn as well as we did in that building, the Duke students who learn here are going to be extraordinary.”

A HOME FOR THE HIDDEN CURRICULUM

Among the most important of the Trent Semans Center’s features is its function as a nucleus for a medical curriculum that is geographically decentralized: students at various stages are spread out among classrooms and labs, research buildings, clinics and hospitals.

To some extent, the new building won’t change that aspect of medical education. But what it will do—what it is already doing—is give all those students, plus nursing students, Physician Assistant (PA) students, Doctor of Physical Therapy (DPT students), faculty, alumni and everyone else in health education a centralized, welcoming, and well-equipped place to gather, to study, practice skills, share ideas and socialize.

“We actually have a front door now,” said Grochowski said. “We have an address. We’re not scattered all over campus.”

And because of that, the new space provides an environment in which all sorts of meaningful exchanges can take place.

“This place is a home for the official curriculum,” Buckley said, “but it’s also a center for the hidden curriculum: facilitating interactions among students, and between students and faculty, that is really the heart of what the Duke medical experience is.”

It’s clear that the Trent Semans Center already is living up to its planners’ vision; since the day it opened it has been alive with students, faculty, staff, and visitors.

“Our dream is that this place is just rocking full all the time,” Grochowski said. “And it’s happening! I’ve never seen so many different levels of students in the same place at the same time. To see the vision we had for this building become reality, and to see it so embraced and so used by the students... it just fills my heart with joy. It really is a dream come true.”

It’s a dream Duke wants to share with the world.

“The message this building sends is, ‘We care,’” Duke University President Richard Brodhead told the dedication audience. “A university’s great gift to the world is sending into it the best-trained people that can possibly be given, and this building represents our commitment to send the very best health care workers possible.

“What a happy day this is, and what a lucky university we are to have this building.”
Come back to Duke! for Medical Alumni Weekend 2013

Thursday, October 17 - Sunday, October 20

You’ll see a transformed campus—with the new Trent Semans Center for Health Education, the one-year-old Duke Cancer Center, and the Duke Medicine Pavilion, scheduled to open this summer.

• Celebrate with the Medical Alumni Association Award winners at the Thursday night reception and dinner.

• Attend Clinical Science Day, CME credit approval pending, Friday afternoon, and hear talks by Duke physician faculty, with a keynote address by pediatric surgeon Kurt Newman, MD’78, president and CEO of Children’s National Medical Center

• Join Nobel laureate Robert Lefkowitz, MD, and Dean Nancy Andrews for the Dean’s Brunch Saturday morning

• Class Dinners and Dessert After Party Saturday night

And be sure to leave time to see a re-energized Bull City—the new Durham as described in the New York Times, “36 Hours in Durham”

travel.nytimes.com/2013/01/20/travel/36-hours-in-durham-nc.html

For a complete schedule and more information, please visit medalumni.duke.edu.
COME BACK TO DUKE

Join Nobel laureate Robert Lefkowitz, MD, and Dean Nancy Andrews for the Dean’s Brunch Saturday morning.
IT WAS A GOOD DAY FOR NICO KATSANIS, PHD. His lab had pinpointed the genetic mutation that was making a tiny child sick. They couldn’t offer a tailored treatment. Not yet. But they could tell the doctor that the genetic mutation predisposed the child to malignant hyperthermia—a “nasty business,” as Katsanis describes it, in which the body’s metabolism suddenly goes haywire in response to anesthesia. When she heard the news, the child’s mother told the doctor her child was scheduled for elective surgery in a month. Now they could take precautions. Catastrophe averted.
“That made my days for a couple of weeks,” says Katsanis, the Jean and George W. Brumley Jr. Professor of Developmental Biology.

Katsanis is what he calls a “hybrid scientist.” He’s a human geneticist and a cell biologist, so he loves his tools—genome sequences and tiny, transparent zebra fish, his animal of choice for modeling human genes. But he uses those tools in service of his passion—helping children who suffer from devastating genetic diseases.

“I love discovery. But when you’ve got something that you can share with a family, and they can do something about it, it just blows me out of the water,” Katsanis says.

Soon after arriving at Duke in 2009, Katsanis founded a collective of more than a dozen Duke scientists and doctors called the Duke Task Force for Neonatal Genomics. Funded by the School of Medicine and the National Institutes of Health, the group uses advanced genomic tools and biological modeling to give some children who have genetic disorders the chance of having early diagnoses and, eventually, faster treatment.

The task force focuses on children with certain structural and metabolic defects that can be modeled in zebra fish, which have analogues to most human genes. When testing leads the team to suspect that a particular genetic variant is causing a baby’s problem, they can insert a mutated human copy of the gene into zebra fish, then literally see the effect, within days or weeks. They can model many metabolic abnormalities, as well as structural abnormalities in the heart, kidneys, and many other organs, except for lungs (zebra fish don’t have any).

"THIS IS NEW. THIS IS HARD. WE VIEW THE FAMILIES AS OUR PARTNERS ON THIS, NOT AS OUR SUBJECTS."
- Nico Katsanis

Michael Cotten, MD, MHS, associate professor of pediatrics, has seen genetic disorders edge out prematurity as the most common cause of death in the Neonatal Intensive Care Unit (NICU). Many of the babies he takes care of have lots of complications, and many of them die. Cotten wants to understand why. But often, the com-
Commercially available genetic tests let him down. “We’d send off the latest test, a karyotype or a microarray, and you’d get either no positive results, or uncertainty,” he says. When Cotten met Katsanis at a national pediatric research meeting, Katsanis talked to him about using more extensive genetic testing to find rare variants, then validating those results by modeling the defects in zebra fish. The idea made sense to Cotten. He was one of the first clinicians to join the task force.

Amy Murtha, MD, associate professor of maternal fetal medicine, was not far behind. Murtha takes care of pregnant moms. “When you speak to a family that has just had an ultrasound and just got the news that their baby has something wrong, it’s absolutely devastating,” Murtha says. “Every single family wants more information and wants to understand how and why this can happen. I saw the task force as an opportunity to provide information and potential treatment alternatives for those babies.” If an ultrasound or placenta testing finds a problem with a pregnancy, families who are interested can consider enrolling in the task force’s research study, so genetic samples can be collected from cord blood at the time of delivery.

Clinicians refer families to the study, and then both parents must consent to enrolling. “This is new. This is hard. We view the families as our partners on this, not as our subjects,” Katsanis says. Forty-five families are now enrolled in the study, with another 89 in the process of enrolling.

The clinicians say that one reason they are willing to go on this journey with Katsanis is his commitment to the families. He likes to meet the families if they are willing, and some have toured his lab. Earlier in his career, Katsanis focused on finding the genetic variants behind one disease—Bardet-Biedl syndrome, which causes many problems, including vision loss, learning difficulties, and obesity in the trunk of the body. Though Katsanis has now scaled up his efforts to encompass hundreds of human genetic diseases, he still keeps in touch with many of his patients with Bardet-Biedl syndrome. Every few years, he hosts a group of them for dinner at his home.

“MAKE NO MISTAKE: I GOT INTO THIS TO HELP BRING GENETICS TO THE FOREFRONT OF CLINICAL PRACTICE; TO MAKE A DIFFERENCE.”

- Nico Katsanis
“WHEN YOU SPEAK TO A FAMILY THAT HAS JUST HAD AN ULTRASOUND AND JUST GOT THE NEWS THAT THEIR BABY HAS SOMETHING WRONG, IT’S ABSOLUTELY DEVASTATING.”

- Amy Murtha

THE ROOTS OF HIS PASSION

Katsanis’ empathy has its roots in his own family. When he was 12, his cousin, who had suffered all her life with behavioral problems, died at age 17 from a rare genetic disorder, San Filippo Syndrome. For her, the diagnosis came too little, too late. Katsanis had seen the grief and anxiety the condition caused his aunt and uncle’s family. Looking back, he realizes that’s what motivated him when he first started thinking about a career. At first, in his teens, he thought he would become a doctor. Then he decided he could touch more people by studying genetics. “Make no mistake: I got into this to help bring genetics to the forefront of clinical practice; to make a difference,” he says.

Once a family enrolls in the study, the scientists analyze the child’s and both parents’ entire exomes—the part of the genome that actually codes for proteins. The scientists comb the results and the scientific literature to find suspect mutations. When the evidence points to a particular variant, they make a zebra fish model of it. Using only exome sequencing and other computer-based genetic sequencing analysis, the scientists can diagnose the genetic variant causing the child’s problem about 30 percent of the time. When they add in biological modeling tools, such as the zebra fish, that percentage more than doubles.

Katsanis makes it clear that this is still an experimental endeavor. The team does have failures, which means the exome sequencing points to a particular genetic variant as a possible cause, but the zebra fish modeling doesn’t confirm it. Sometimes a relevant genetic variant cannot be identified at all. But they are making progress. When the effort first began, it took a year to model the first gene in zebra fish; in the last two years, the team has successfully modeled more than 250 human genetic disorders. “There are still boulders and pitfalls along the way, but the road in front is very clear now, and we’re moving,” Katsanis says.

Though this process right now doesn’t lead to life-changing treatments, that is the ultimate goal. Whether achieving that will take one year, five years, ten years, or more, is unknown. For now, the fact that many families find a name for their children’s problems and can get some idea of what to expect is a huge step forward. “My goodness, some of these families bounce from specialist to specialist to specialist,” Katsanis says. Identifying causative genetic variants can at least stop that. It can also relieve some of the worry about whether their other children will develop the same problems. “If we can show that a mutation happened de novo—neither parent carried it—then much of the parental guilt is removed.”

“Nico has the energy and enthusiasm to push this really complicated, controversial work forward,” Murtha says. “I feel strongly that here at Duke we are well equipped to move this agenda forward in a safe way for our patients. The reality is that genetic testing will become part of our medical lives. At some point, genetic testing, rather than just your symptoms, will dictate the other tests and treatments you get.”
Thomas R. Kinney, T’66, MD’70, HS’70-'71

A national and international leader in the diagnosis and care of children with sickle cell disease, Thomas Kinney has had an impact on the care of countless patients suffering from the often painful, inherited blood disorder.

Today, parents of all babies born in North Carolina can expect their newborn to be screened for sickle cell disease, but that was not always the case. An advocate for a statewide neonatal screening program, Kinney was instrumental in establishing sickle cell screening for newborns in the state. In the early 1990s, he co-chaired a federal panel convened by the Agency for Health Care Policy and Research to develop guidelines for sickle cell screening programs.

He also was co-director of an NIH Comprehensive Sickle Cell Center for 15 years and served as both co-chair and chair of the NIH-funded Clinical Course of Sickle Cell Disease, a 20-year study to define the natural history of sickle cell disease. Kinney led the first NIH clinical research group that evaluated the toxicity and safety of hydroxyurea treatment for children with sickle cell disease. These studies of hydroxyurea have helped change the quality of life of sickle cell patients.

Recognizing the needs of children with chronic and terminal illnesses, Kinney founded Camp Kaleidoscope in 1979. The free residential camp is for children treated at Duke Children’s Hospital and Health Center who would otherwise be unable to attend camp. Serving more than 1,000 children since its founding, Camp K was one of the first summer camps in the country for children with a wide variety of disabling conditions.

Kinney served as lead physician on the design and construction team of the McGovern-Davison Children’s Health Center, completed in 2000. He has remained dedicated to medical education throughout his career and was vice chairman for education in pediatrics from 1994-1997.
Sally A. Kornbluth, PhD

Described by an award nominator as the “complete academician,” Sally Kornbluth has made significant contributions to Duke University School of Medicine as an administrator, biomedical researcher, and teacher.

Since joining Duke in 1994, Kornbluth has risen through the administrative ranks, all while leading a robust research program. She served as vice chair of the Department of Pharmacology and Cancer Biology from 2004-2006. She was appointed vice dean for basic science in 2006.

Kornbluth’s contributions in biomedical research have been widely recognized both at Duke and beyond. Her research focuses on the signals that tell a cell to start dividing or to self-destruct, both key processes for understanding cancer and degenerative disorders. Specifically, she studies frog eggs to understand apoptosis, the process that leads to cell death. When apoptosis goes awry, cells proliferate unchecked and cancer takes hold. She has published extensively in these areas, studying these problems in a variety of model organisms.

Her work has been shown to have potential beyond the laboratory. For example, Kornbluth recently partnered with associate professor of pharmacology and cancer biology, Neil Spector, MD, to help in his search for therapies for women who become resistant to Tykerb, a breakthrough breast cancer drug he developed. Kornbluth’s work on apoptosis led the two researchers to a new approach. They worked together to find an existing drug that suppresses a protein that helps tumors develop drug resistance, and they now hope this new treatment method will lead to a clinical trial someday soon.

Throughout her career, Kornbluth has placed a high priority on her role as a teacher and mentor and has remained committed to the advancement of her trainees’ careers. The School of Medicine recognized her commitment to education with its Research Mentoring Award for the basic sciences in 2012.
Eddie L. Hoover, MD’69, HS’69-’71

Over the years, Eddie Hoover has seen his fair share of change, from his time growing up and attending schools in the segregated South to his days as a noted cardiothoracic surgeon in New York.

As he shared with the *Journal of the National Medical Association* in 2007, Hoover rarely interacted with physicians, let alone African-American physicians, while growing up in Charlotte, N.C., in the 1940s and 1950s, and he witnessed firsthand the effects of racial segregation. However, he was not deterred from one day becoming a physician himself.

Hoover was the second African American student to enroll in Duke University School of Medicine and in 1969, he says he became the first African American to match at Duke for an internship.

His experience at Duke included serving as president of his third-year class, participating in the Student Government Association during his senior year, being a member of the Engel Society, and receiving the Thomas Jefferson Award and the Duke University Service Award.

Hoover served two years in active duty in the U.S. Navy during the Vietnam War at the Naval Hospital on Guam in the Marianas Islands. He went on to serve as an assistant professor of surgery at Cornell University Medical Center and later as an associate professor of surgery at the State University of New York Downstate Medical Center and chief of surgical services at the Brooklyn Veterans Administration Medical Center from 1980-1987. In 1987, he was named the fourth professor and chairman of the Department of Surgery at Meharry Medical College in Nashville, Tenn.


Hoover is currently the editor-in-chief of the *Journal of the National Medical Association*, the nation's leading medical journal on minority health. He was co-author of the landmark public apology from the American Medical Association (AMA) to the National Medical Association for the AMA's past history of racial inequality toward African American physicians, published in the July 16, 2008, issue of *JAMA*.
Angus M. McBryde Jr., MD’63, HS’67-’71, FACS

An expert in the field of sports medicine and management of athletes with foot and ankle injuries, Angus McBryde has spent his career making his mark on the field of orthopaedic surgery.

Himself an athlete and self-proclaimed lifetime fitness enthusiast, McBryde has held several orthopaedic surgery and sports medicine positions at academic medical centers in addition to practicing privately. Early in his career, he practiced in Charlotte, N.C., initially with the Miller Clinic, and then he started his own practice in 1985. At Duke, he served as a clinical assistant professor in the Division of Orthopaedics (now a full department) from 1971-1991.

In 1991, he became chair of orthopaedic surgery at the University of South Alabama, and then chair of orthopaedic surgery at the Medical University of South Carolina in 1996. In 2000, he joined the University of South Carolina School of Medicine as a professor of orthopaedic surgery and director of sports medicine. After a few years at the American Sports Medicine Institute in Birmingham, Ala., McBryde returned to the University of South Carolina School of Medicine and currently serves as professor of orthopaedic surgery.

Nationally recognized for his expertise in running injuries, McBryde spent time as the U.S. Olympics Sports Medicine Team Physician. He was head physician for track and field during the Summer Olympics in Seoul, Korea, in 1988 and venue physician for track and field at Olympic Stadium during the Summer Olympics in Atlanta, Ga., in 1996.

McBryde also was an orthopaedic sports medicine consultant for the University of Alabama, Auburn University, Troy University, the University of West Alabama, the Toronto Blue Jays Major League Baseball Team, and the NBA’s Golden State Warriors.

He has served as chairman of the North Carolina Governor’s Council on Physical Fitness and Health and as a member and chair of numerous committees for the Southern Medical Association. In 1987, McBryde was president of the North Carolina Orthopaedic Association. He served as president of the Duke Medical Alumni Council from 1989-1990 and also helped fund the Dorothy J. Shaad/Angus M. McBryde Sr. Professorship in Pediatrics at Duke. He has been a Fellow of the American College of Surgeons since 1974.

Education: Davidson College, Duke University
Training: Hospital of the University of Pennsylvania, Duke University Medical Center
Current titles: Professor of orthopaedic surgery, University of South Carolina School of Medicine
Medical Faculty Wives

In 1968, Ethel Wyngaarden Teer came up with the idea of establishing a thrift shop to raise funds for medical school scholarships. So she and 17 other wives of School of Medicine department chairs each gave a $25 gift, officially launching the Medical Faculty Wives group and its flagship fundraiser, the Nearly New Shoppe. In the 45 years since, the group has helped numerous students finance their medical school education.

In its first year, the group was able to donate $5,000 to medical scholarships and subsequently decided to put part of the funds into an endowment each year. In the early years, the thrift shop was run by the faculty wives themselves, and the determined group dedicated countless hours to making the shop run.

Today, the Nearly New Shoppe has three and a half paid staff and 75 to 100 volunteers. The shop reached a milestone in 2012, breaking the $1 million mark in scholarships awarded to Duke medical students in a single year. The scholarship fund balance is now more than $4 million with a market value of nearly $14 million. Each year, the Nearly New Shoppe generates from $750,000 to $1 million for medical student scholarships. The efforts of the staff, volunteers, and the local community to raise these funds have played a role in helping the medical school keep student debt below the national average, particularly at a time when tuition costs are rising and federal funds for scholarships are quickly disappearing.

In addition to supporting student scholarships, the shop, which prides itself in providing quality merchandise at a reasonable cost, also benefits the wider community, serving as a resource for many of Durham’s underserved residents.
Wolfgang K. Joklik, D.Phil.

In more than four decades at Duke, Wolfgang Joklik played a major role in not only ushering the Department of Microbiology and Immunology into the molecular and genomic era but also in advancing the study of viruses.

Born in Vienna, Austria, Joklik immigrated to Australia with his family just prior to World War II. He went on to earn degrees at the University of Sydney and the University of Oxford. His postdoctoral training included working as a research fellow at the University of Copenhagen, where he teamed with Nobel laureate Paul Berg, PhD. Together they discovered the enzyme terminal transferase. He held his first faculty position at the Albert Einstein College of Medicine in the Bronx, N.Y., where he was the first to examine the mechanism of action of interferon—the first cytokine to be recognized in molecular terms—in 1964.

One of the earliest molecular virologists, Joklik came to Duke in 1968. As chair of the Department of Microbiology from 1968-1992, he transformed what once was a small department made up of six faculty members into one with 33 faculty members and ranked among the top three in the nation. Joklik’s years at Duke also included cofounding the Duke Comprehensive Cancer Center, the precursor of the Duke Cancer Institute. He also served on a variety of external review and administrative committees.

Much of his scientific career was devoted to the development and application of molecular virology with a focus on reovirus and vaccinia. His discoveries have become part of standard knowledge on virus diseases, having been incorporated into many textbooks.

A dedicated educator, Joklik was editor of the textbook Zinsser’s Microbiology, the most comprehensive textbook for medical students in microbiology and immunology. Many graduate students who trained in his laboratory are today leading investigators in biomedical research.

In 1982, Joklik founded the American Society for Virology, the first of its kind, and served as the society’s first president. He was editor-in-chief of Virology for 24 years and of Bacteriological Reviews for five years. He served as associate editor of the Journal of Biological Chemistry from 1974-1984.

He was elected to the National Academy of Sciences in 1981 and the Institute of Medicine in 1982. Other honors include serving as the American Society for Microbiology Foundation Lecturer, receiving the Humboldt Prize (Senior U.S. Investigator Award), and the ICN International Prize in Virology. Duke honored Joklik’s contributions to medicine with a named professorship, the Wolfgang Joklik Professorship in Medicine. The Department of Molecular Genetics and Microbiology also named a distinguished lectureship in his honor, and the Duke Medical Alumni Association honored him with a Distinguished Faculty Award in 2005.
1940s
Ben V. Branscomb, MD’47, received an Award of Merit from Asheville School in September 2012. The award, the highest honor the school bestows, honors friends of Asheville School and education in the Southeast for their lifetime accomplishments. Branscomb graduated from the college preparatory boarding and day school in 1941. His 60-year career has included serving as a distinguished professor emeritus at the University of Alabama at Birmingham. He is best known for his pioneering work in pulmonary medicine.

Herman F. Froeb, MD’47, of La Jolla, Calif., is retired but does pro bono work and gives lectures to professional groups. He and his wife Helen celebrated their 60th wedding anniversary in 2012.

Donald S. Littman, T’44, MD’47, celebrated his 90th birthday on June 18, 2012. “I read, therefore I am!” he says. He and his wife Leona, WC’45, live in Red Bank, N.J. They have three children: Eric, James, T’72, and Cindy; seven grandchildren; and “one great-grandchild-to-be.”

Gilbert Anthony Rannick, MD’49, shot an 86 in golf on his 90th birthday on Oct. 12, 2012. He has shot his age or better every year since he turned 73. Rannick retired as a clinical professor of surgery from East Tennessee State University’s Quillen College of Medicine in 1974 and lives with his wife Elizabeth “Lib” in Johnson City, Tenn. They have six children, 11 grandchildren, and two great-grandsons.

1950s
J. Kompton Jones, MD’46, T’43, HS’50, retired from his practice in 1995. He was expecting his seventh, eighth, and ninth grandchildren this winter. His wife Eunice passed away in 2011, and he says he regrets not being able to see fellow alumni. This year he will “hit the big 90.”

William B. Jones, MD’54, was recently appointed to the Joint Services Detachment of the South Carolina National Guard as a medical officer in the rank of brigadier general. A retired orthopaedic surgeon, he serves as medical director of CWI Insurance Company. He and his wife Ann live in Greenville, S.C. They have three children and a great-grandson.

D. Edmond Miller, MD’56, T’52, HS’61–63, lost his wife Marjorie in 2010. His daughter, Marge, works at Duke in the Department of Humanities, Medical Ethics, and the Trent Collection. His son, Edmond Jr., works with Bull City Books and recently performed an appraisal of Reynolds Price’s books and papers. Miller lives in Durham.

1960s
C. James Dellinger, T’58, MD’61, has retired from part-time work in rural health clinics in Loris, S.C. He and his wife Bertha moved to Asheville, N.C., and are enjoying the mountain life where they grew up. They have a son, Thomas, E’87, and a daughter, Charlene, and two grandchildren.

John Baumann, MD’62, is a full-time volunteer in VISTA (Volunteers in Service to America) as the project manager to raise funds for and build a 7,200 square-foot facility to serve low-income people in the City of Veneta and the surrounding rural area of Lane County, Oregon. The Fern Ridge Service Center will provide a food bank, meals on wheels, sit down hot meals, senior assistance, youth scholarships and more. It will have a telemedicine clinic where mid-level practitioners will provide care. He says he would love to hear from fellow alumni who would like to support this project at johnbmd@gmail.com.

James A. Carter, MD’63, volunteers as a translator for a charity serving Hispanic clients. In his spare time, he enjoys fishing, gardening, attending three book clubs and spending weekends with his wife Janice at their house in Highlands, N.C. They live in Atlanta and have two children, David and Kay.

Mark L. Entman, MD’63, HS’64–68, of Houston, Texas, has cut back on his administrative duties at Baylor College of Medicine but continues his research and mentoring of trainees and young faculty. His NIH grants recently were renewed for five years, but these will likely be his last five years as a principal investigator (PI). At the end of these grants, he will have had 50 consecutive years as a PI. He and his wife Carol, BSN’66, are traveling more and will celebrate 45 years of marriage in March 2013. Their son-in-law, Bernard, is “a great single dad” to two children. His daughter Sue and husband Bernard, are “a great single dad” to two children.

Paul Jones, MD’63, and his wife are now fully retired and enjoying working with international students at the University of Oregon. They enjoy spending time with their four married children and 13 grandchildren. He says they have had an exciting life practicing medicine on four continents, and since 1997, training 100 community health workers in northern Burma/Myanmar. The couple lives in Eugene.

William O. McMillan Jr., T’59, MD’63, HS’66–68, was elected to the Davis Healthcare Community Board in 2011. He and his wife Frances, WC’59, live in Wilmington, N.C. They have two sons, Edward, T’86, MD’90, and William Owen III, T’85, and a grandson, Collin, who will enter Duke in the fall of 2013.

Leonard M. Saputo, MD’65, has written a book called A Return to Healing: Radical Health Care Reform and the Future of Medicine, addressing the challenges facing mainstream medicine and describing the Health Medicine model he practices at the Health Medicine Center in Walnut Creek, Calif. He lives there with his wife Vicki.

John K. Crowe, MD’69, has received the Gold Medal from the American Roentgen Ray Society for distinguished service to radiology. The society, founded in 1900, is the first and oldest radiology society in the United States, and the Gold Medal is its highest honor. Crowe is one of the founding members of Scottsdale Medical Imaging Ltd., a group practice that has been recognized nationally for its contributions to practice, research, and testing. He holds Continued on Page 28.
Good Times in the Hospital: 
A Medical Memoir

Following is an excerpt from a new book by James G. McCully, MD’66, in which he shares an anecdote from his time in medical school.

THE BREAD MOLD LADY

“One of my professors had taught at Duke since before the discovery of penicillin. He told us that when he was a student there was a special ward reserved for the patients with osteomyelitis. These unfortunate souls were sequestered away because their infection was attended by a terrible odor—the drainage from their wounds was a foul business indeed.

“One morning, on rounds of the ‘osteo’ ward, there was a newly admitted patient, a young lady from rural North Carolina. This new patient had an infection in her shin. When the attending doctor pulled back the bedsheets to examine her leg, he was surprised to find that although she had a tract through her leg, it was completely free of drainage and the wound was healing. He asked her how she had been dealing with her infection before coming to the hospital. She told the group of doctors that her grandmother had told her to stuff moldy bread into the hole in her leg. This had helped but had not cured her, so she had come to the hospital to see if they could do more.

“The group of staff and students laughed at her story of stuffing moldy bread into her leg, and proceeded with their medieval therapy of pouring nitric acid into the wound and packing gauze laced with silver and other heavy metals into the tract—the only useful treatment known at the time.

“A few years later, my professor picked up the newspaper and read that a new miracle drug, penicillin, had been discovered. He took this as good news, but when he continued to read about how Alexander Fleming made this discovery, his heart sank. He ended his story with the sort of rhetorical flourish that made him so popular with his students: “I realized that any one of us could have won a Nobel Prize if we had listened to the bread mold lady. Later, at a class reunion, we discussed our great missed opportunity. Then, we stood around in a circle and kicked each other in the butt.”

McCully lives on Amelia Island, Florida, with his wife of more than fifty years, Marion. They have two children and four grandchildren. He is retired after a thirty-year career as a diagnostic radiologist and is an avid saltwater fly fisherman. Good Times in the Hospital is his second book; the first was Beyond the Moon—A Common Sense Guide to Understanding the Tides. Both are available on Amazonbooks and Kindle.
Robert Charles Powell, MD’72, PhD’74, of Winnieka, Ill., was married to Patricia Lucille Forman on Aug. 21, 2012.

George H. Durham II, MD’73, says he “began a period of semi-retirement in the fall of 2009.” His clinic has moved to a new building, where he continues as a part-time pediatrician. For the past 15 years, he has been a co-attending physician at the Down Syndrome Clinic at Primary Children’s Medical Center, where he also serves as an adjunct clinical professor of pediatrics with the University of Utah School of Medicine. He and his wife Christine celebrated their 46th wedding anniversary in December. They have seven grandchildren located in Ohio, Utah, and Washington State with their parents. The Durhams live in Salt Lake City, Utah.

Manfred S. Rothstein, MD’74, presented “Therapeutics in Dermatology: An Historic Perspective” last July at the summer meeting of the North Carolina Dermatology Association, and in September at der Universität in Salzburg, Austria. The talk was based on his exhibit at the American Academy of Dermatology meeting in Washington, D.C., entitled, “Soaps and Salves - Proprietary Dermatologic Advertising.” The exhibit was awarded the Gold Award for Historical Value. He and his wife Sonja, G’75, live in Fayetteville, N.C.

Thomas R. White, T’76, MD’80, has been selected to a group of 20 N.C. physicians and physician assistants to help lead the future of the state’s medical community as part of the North Carolina Medical Society Foundation’s 11th Annual Leadership College. The 2013 scholars will participate in intensive leadership training throughout the year. White currently is the medical director at Cherryville Primary Care. He hopes the leadership college will help him better understand the link between the medical community and politics.

Charles S. Haworth, MD’82, joined FirstHealth of the Carolinas’ neurosurgery and spine program in September 2012. Haworth, who has performed more than 1,000 navigational spine cases, was involved in the development and introduction of the Stryker Spine Navigation Software program, which aids in precise, minimally invasive surgical procedures. He served in the U.S. Navy from 1979 to 1993, and before joining FirstHealth was associated with Duke Neurosurgical Associates of Lumberton and Southeastern Regional Medical Center. He and his wife Christel live in Lumberton, N.C.

Greg K. Kirschner, MD’82, and his wife Carolyn travel to Nigeria regularly for medical missionary work, primarily supporting the efforts of two family medicine residencies and performing surgery on women with vesicovaginal fistulas. Greg is residency director of the family medicine residency program at Advocate Lutheran General Hospital in Park Ridge, Ill., and Carolyn practices gynecologic oncology at NorthShore University HealthSystem in Evanston. The couple lives in the greater Chicago area. Their four children are scattered out in various locations, from Illinois to Tennessee to Cambodia.

Mark S. Komrad, MD’83, has written his first book, You Need Help: A Step-by-Step Plan to Convince a Loved One to Get Counseling, published September 2012 by Hazelden. The book builds on Komrad’s 25-plus years of experience treating depression, anxiety, and major mental illness to illustrate how to approach a loved one who has a potential mental health problem. Former host of the nationally syndicated radio show “Komrad on Call,” Komrad says the most common call-in question involved people asking how to suggest that a sibling, spouse, or friend seek help without seeming to suggest that they are crazy. His book uses real-life examples to illustrate how to do just that. The book includes a forward by former first lady Rosalynn Carter. He lives in Reisterstown, Md.

Joseph F. Howard, T’82, MD’86, is in his 14th year in pediatric practice in Shrewsbury, Mass. He is an instructor in pediatrics at University of Massachusetts Medical School in Worcester. He enjoys general pediatrics and the privilege of working with young families. His wife Betty has re-entered academic medicine after many years of practice and completed a fellowship in geriatrics at UMass. They live in Groton, Mass., with their teenage daughters, Kate and Sarah, and with Betty’s mother, Sherry. They enjoy taking road trips across New England, especially to the beaches in Rhode Island and Maine, visiting family, and on occasion, heading to New York City to take in a show.

David H. Darrow, MD’87, DDS, is co-editor of the textbook Pediatric Otolaryngology, published by the American Academy of Pediatrics in 2012. He was a top ten reviewer for Otolaryngology-Head and Neck Surgery three of the last four years. He is an immediate past chair of the Section on Otolaryngology-Head and Neck Surgery of the American Academy of Pediatrics, and he is co-author of national guidelines for pediatric tonsillectomy and pediatric sinusitis. He lives in Virginia Beach, Va.

Rache M. Simmons, T’84, MD’88, has been appointed to one of two newly created positions of assistant deans for faculty diversity in the Office of Faculty Diversity in Medicine and Science at Weill Cornell Medical College. In her new position, she will direct diversity activities and initiatives. She also will focus on developing and implementing gender and diversity activities and initiatives to enhance the
academic careers of women and increase lesbian, gay, bisexual, and transgender community sensitivities. Her major goals include improving work-life balance through the creation of a childcare facility and developing a uniform parental leave policy for all faculty members. Simmons will continue to serve in her current roles as the Anne K. and Edwin C. Weiskopf Professor of Surgical Oncology and professor of surgery at Weill Cornell and chief of breast surgery and director of the Weill Cornell Breast Center.

David Terris, MD’88, has received the American Academy of Otolaryngology-Head and Neck Surgery Foundation’s Distinguished Service Award. Terris, the Porubsky Distinguished Professor of Otolaryngology at Georgia Health Sciences University’s Medical College of Georgia, is internationally renowned for minimally invasive thyroid and parathyroid surgery. He is a member of the academy’s Endocrine Surgery Committee and is the chair of the Otolaryngology Advisory Council of the American College of Surgeons. He and his wife Martha, H’88, P’12, live in Martinez, Ga., and have two sons, Trevor, T’12, and Garrett.

Grace Emerson Terrell, MD’89, HS’89-’90, was presented with a Presidential Recognition for Exceptional Continued on Page 30.

Proof of Heaven?

Eben Alexander III, MD’80, HS’81,’87 has written a popular though controversial book. In February 2013, Proof of Heaven: A Neurosurgeon’s Journey into the Afterlife, was in its 15th week in the number-one spot on the New York Times paperback non-fiction bestseller list. In the book, Alexander, a neurosurgeon, describes an intense experience he had while in a coma for six days battling bacterial meningitis. His experience led him to conclude that consciousness exists independent of the brain and the body. Alexander and his book have been featured in the New York Times, on ABC News, and on the cover of the last print edition of Newsweek.

On the morning of November 10, 2008, Alexander was struck with a severe headache and back pain. At the hospital, he had seizures and soon lapsed into a coma. He was treated with antibiotics, but by his sixth day in a coma with no response, his doctors began talking about discontinuing the medication. They told his family that he had a 2 or 3 percent chance of recovery, and that even if he did emerge from the coma, he would likely need permanent nursing home care. But then, Alexander suddenly woke up. “I think to this day, my doctors would tell you there’s really no medical explanation,” Alexander says. “They would consider it very much a miraculous recovery.”

“I was similarly shocked when I came back—I remembered this profound spiritual odyssey,” Alexander says. He recalled traveling through three realms of consciousness, including the highest realm, which he calls “the core.” “The core is the realm outside of the dimensions of space and time with that all-loving, divine, all-powerful, all-knowing creative source of all,” he says.

He describes the experience as being “hyper-real.” “Those memories are as sharp right now as they were four years ago,” he says. He contrasts that with his vague recollection of the “ICU psychosis” he experienced as his brain adjusted to consciousness again, which included hallucinations of being chased by ninjas.

“The book is obviously a way to get my story out there in a widespread way. But my real preference is to talk with people.”

- Eben Alexander

“Proof of Heaven?” has been put on hold while he navigates a heavy speaking schedule. “The book is obviously a way to get my story out there in a widespread way. But my real preference is to talk with people,” Alexander says. “I love going around and giving presentations and getting feedback from people. It’s all about opening people’s minds to a richer understanding of what consciousness is.”

– by Angela Spivey

Continued on Page 30.
Physician Leadership and Innovation award by the North Carolina Medical Society for her leadership, vision, inspiration, and service. Terrell, a general internist in private practice at Cornerstone Internal Medicine in Westchester in High Point, N.C., has served as president and CEO of Cornerstone Health Care since 2000. A leader in statewide efforts to build a more integrated health care system and eliminate waste and inefficiency, she serves on many boards and committees and has garnered a long list of honors. She co-authored the book, MD 2.0: Physician Leadership for the Information Century. She and her husband, Dr. Rusty Jacobs, live in Durham, N.C., has served as president of the North Carolina Medical Society for her leadership, vision, inspiration, and service. Terrell, a general internist in private practice at Cornerstone Internal Medicine in Westchester in High Point, N.C., has served as president and CEO of Cornerstone Health Care since 2000. A leader in statewide efforts to build a more integrated health care system and eliminate waste and inefficiency, she serves on many boards and committees and has garnered a long list of honors. She co-authored the book, MD 2.0: Physician Leadership for the Information Century. She and her husband, Dr. Rusty Jacobs, live in Durham.

1990s
Mininder S. Kocher, MD’93, was promoted to professor of orthopaedic surgery at Harvard Medical School. Kocher is the associate director of the Division of Sports Medicine at Boston Children’s Hospital and have a daughter and her husband John live in Dover, Mass.

Jill Levy, MD’93, reviews new studies as a member of Kaiser Colorado’s Institutional Review Board, and also serves on the Patient Safety Committee of the Colorado Permanente Medical Group’s East Medical Office in Denver. Her husband, Dr. Daniel Savin, is a professor of psychiatry at the University of Colorado Medical School. They have two daughters: Leah, 12, who studies vocal music at the Denver School of the Arts; and Aliza, 7, who is in 2nd grade at the Denver Jewish Day School and loves to dance. The family lives in Denver.

Karen Anderson, MD’94, PhD’93, has been appointed to the scientific advisory board for Provista Diagnostics, an oncology-based diagnostic tests and clinical laboratory services provider. The newly formed board, which includes physicians and medical researchers, will provide critical strategic input on scientific, clinical, product development, and commercialization matters. Anderson is an associate professor at the Virginia G. Piper Center for Personalized Diagnostics at the Biodesign Institute at Arizona State University. She has a joint appointment with the Mayo Clinic Arizona as a medical oncologist with a specialization in breast cancer.

Eric Haura, MD’94, HS’00, was honored by Uniting Against Lung Cancer with an award for his leadership in the field of lung cancer research at the “Strolling Supper with Blues and News” gala in New York City in November. The event raises awareness and critical funds for lung cancer research through Uniting Against Lung Cancer’s Scientific Program. Haura, a researcher and physician with the H. Lee Moffitt Cancer Center and Research Institute and a member of Uniting Against Lung Cancer’s medical committee since 2008, was honored at the event for his contributions to advancement in the field of lung cancer and for guiding the foundation’s scientific program. The event was hosted by NBC’s Brian Williams.

Claire Coggins, MD’97, recently became an independent contractor, after having spent 10 years specializing in musculoskeletal radiology, both in academic and private practice settings. In her current position, she provides subspecialty care for orthopaedic surgery groups in Delaware. She and her husband, Daniel Leung, MD, an interventional radiologist, met while they were both training at the University of Pennsylvania. They have a son, Kieran, and a daughter, Lily Claire, and live in Wilmington, Del.

Stewart S. Worrell, MD’99, married Suzanne Kim from Wilmington, Del., in June 2012, the same month he finished training in radiology at Boston’s Massachusetts General Hospital. He started private practice in Savannah, Ga., in August at South Coast Medical Group.

2000s
Marco L. Davila, MD’04, PhD’04, has received a stipend and award to conduct research on the development of targeted therapies for the treatment of B-cell lymphoma and B-cell leukemia. The award, from the American Society of Hematology and the Harold Amos Medical Faculty Development Program of the Robert Wood Johnson Foundation, provides four years of support and is designed to help increase the number of underrepresented minority scholars in the field of hematology. Davila has developed genetically engineered T-cells that are modified to more readily recognize and kill leukemia cells. His ultimate goal is to evaluate an optimized T-cell therapy developed from this project in a clinical trial, with the hope of creating new therapeutic options for patients. He and his wife Rebecca Palacio live in New York City.

Gordon Lam, MD’01, HS’04, works at NorthEast Rheumatology at Carolinas Medical Center in Concord, N.C., His son Luke Henley Juhn Ho Lam was born on October 14, 2011. He joined older brother Grant, age 5.

Helen “Eleni” Boussios, T’99, MD’05, HS’05-09, is practicing general internal medicine and pediatrics for Piedmont Health Services, Inc., at the Moncure Community Health Center in Moncure, N.C. She and her husband, Marc “Rusty” Jacobs, live in Durham. Their son, David Alexander, was born June 4, 2011.

Kermit L. Jones, MD’05, L’05, has been appointed to the 2012-2013 class of White House Fellows. The White House Fellows Program was created in 1964 by President Lyndon B. Johnson to give promising American leaders first-hand, high-level experience with the workings of the federal government and to increase their sense of participation in national affairs. Fellows take part in an education program and participate in service projects throughout the year in Washington, D.C. Jones recently completed a master of public administration degree with a regional specialization in South Asia at Columbia University’s School of International and Public Affairs.

Richard Chad Mather, MD’05, has been selected to a group of 20 N.C. physicians and physician assistants to help lead the future of the state’s medical community as part of the North Carolina Medical Society Foundation’s 11th Annual Leadership College. The 2013 scholars will participate in intensive leadership training throughout the year. Mather currently is a physician in the Department of Orthopaedics at Duke. As a part of the leadership college, he looks forward to enhancing his skills to be an effective physician and patient advocate and finding ways to help mobilize his colleagues and patients to effective advocacy.

Eric Dziuban, MD’07, and his wife Keri welcomed their son, Ezra Leon, in October 2012 in Atlanta. The Dziubans had just returned from living in Swaziland for the last 2 years and gave their son the Swazi name “Sizanokuhle,” meaning, “we are bringing something wonderful.”
Building a Better Game

When Ken Mask, MD’88, has his radiologist’s coat on, he makes weekly rounds to health clinics in several small south-central Louisiana towns.

After he takes that coat off, though, Mask unwinds by spending time with his children, 7-year old Joshua and 9-year-old Alexandra, at their home in Lafayette.

Father and son were playing Joshua’s favorite game, Tic Tac Toe, one day last year when Joshua asked Mask an impossible question.

“He wanted to include his sister,” Mask recalled. “He said, ‘Why can’t we play with three people?’”

Well, Mask said, you just can’t. Tic Tac Toe has only two sides, Xs and Os, so only two people can play at a time.

For most of us, that would have been the end of it. Let ’sis play the winner.

But Mask didn’t let it rest there.

“It got me thinking,” he said. “Why couldn’t you make a Tic Tac Toe game that could be played by three people? So I started working on it.”

Late last year, Mask unveiled the result: Tic Tac Mo (as in “more Tic Tac Toe”), an app available for Apple and Android phones and tablets that offers an expanded and updated version of the classic pencil-and-paper game.

Tic Tac Mo is deceptive in its simplicity. Mask didn’t try to reinvent the wheel; he just made it a little bigger. He turned the classic three-by-three grid into a three-by-five one, and he added a new symbol, Y, to join the traditional X and O.

That’s it. The bigger grid fits better on a rectangular screen and increases the game’s complexity, and the Y symbol allows three players to compete. Human players can play against each other or against the computer, which is beatable but tough: “You can think you’re winning, and then it’s like, ‘Hey, wait a minute,’” Mask said.

You still only need to fill in three squares in a row to win, but Mask’s simple changes make the game vastly more complex and strategic. With three players, the game tends to generate fickle webs of allegiance as each player seeks to gain advantage over the other two.

“It allows two players to team up against the other one, but those combinations keep shifting,” Mask said. “The dynamics of teaming up can make for some interesting games. It can get a little personal.”

Mask wrote the code himself, with a little help from a friend, David Sullivan as well as the Google Play and Apple’s app designer’s kits. It sells for 99 cents, and reviews have been largely positive.

“One reviewer said it was ‘a great time-waster,’” Mask said. “That’s fine with me. That’s what Tic Tac Toe is: a game to play while you wait for your food to come.”

Although he may continue to dabble in developing apps, Mask says he has no plans to give up his day job.

He began working in Louisiana in 1997, at Louisiana State University Medical Center first as a fellow, then as a clinical assistant professor of radiology in New Orleans. His wife was pregnant with Joshua in August of 2005 when Hurricane Katrina struck, destroying the family’s home and driving them back to North Carolina for three years. Mask accepted an offer to return to Louisiana in 2008 to join a radiology practice based in Lafayette. From there, he covers a regular circuit of clinics, offices, and hospitals from New Orleans to Lake Charles.

He plans to donate a portion of the proceeds from sales of Tic Tac Mo to the Duke Medical Alumni Association. So far, it’s a pretty humble sum; the game has attracted some attention—a YouTube video helped—but it would be a stretch to say it’s been jumping off the virtual shelves.

“It’s not Angry Birds,” he said “But we’re not in it for that anyway. It’s a labor of love. It started with a six-year-old who just wanted his sister to be able to play Tic Tac Toe with us. Then it just evolved.”

– by Dave Hart
Writing for Hit TV Show is no Royal Pain for Drayer

Using Christmas lights to fashion a pacemaker isn’t something they grade on the MCATs. But for TV hotshot doctor Hank Lawson of the USA Network hit series *Royal Pains*, if the right medical tool isn’t handy, he’s diving in with both hands and a bendy straw.

Luckily for Jeffrey A. Drayer, MD’98, a writer and medical consultant on the popular show, the public adores the handsome Dr. Lawson and his likeable posse who run a concierge medical practice in the haughty Hamptons of New York. The light-hearted drama has been renewed for its fifth and sixth seasons, guaranteeing Drayer, who also maintains a part-time dermatology practice in the Los Angeles area, the ability to do what he loves best: write.

“The truth is, I know more about medicine now than I ever did because I’m constantly learning about new cases,” he says. “You get to think about medicine creatively. It’s a lot of fun.”

While in medical school at Duke, Drayer was a popular humor essayist for the monthly medical student newspaper, *Shifting Dullness*. He was particularly fond of former Duke cardiologist Michael Higginbotham, MD, HS’81-’82, whom he calls “one of the funniest guys I’ve ever known,” and of former surgery resident Antonio Perez-Tamayo, MD, HS’92-’99, PhD’95, who “was the most fascinating guy and knew more about everything.”

Drayer’s Duke essays were turned into the humor book, *The Cost-Effective Use of Leeches, and Other Musings from a Medical School Survivor*. That success inspired his move to Los Angeles, where he taught himself screenwriting, parlaying his talent for storytelling into a paying gig. Prior to starting with *Royal Pains* five years ago, he contributed to the pilot episode of the NBC medical drama, *Mercy*, that aired for one season in 2009-2010.

The popularity of *Royal Pains* has never been in doubt. The show often appears on TV critics’ Top 10 lists. It stars actors Mark Feuerstein as the young-but-measured MacGyver-like Dr. Lawson; Henry Winkler as his father; and others.

Scripts are written in Los Angeles and the show is shot on location in New York, where a second consulting physician makes sure mock medical procedures look correct and nothing medically impossible works into the scene.

The definition of impossible on most television medical shows, though, is looser than a hospital gown, as doctors pull miracles out of their white coat pockets as often as Dr. House reaches for vicodin.

Drayer explains his writing philosophy this way: “If there’s even a .0001 percent chance something could actually work, we’ll use it. You can’t, for instance, have a guy’s leg just fall off while he’s walking down the street.”

Believability does matter, he says. “It’s inevitable that the doc in New York will call me up and say, ‘That’s crazy!’ My answer is always that it’s crazy but possible.”

He gets to work with the actors whenever they’re in Los Angeles, and that means subjecting himself to sundry minor, non-invasive medical procedures—like nasogastric intubation—to instruct the actors on proper technique. No enemas allowed, though.

“Sometimes I get calls at 3 a.m. from actors asking if they’re pronouncing a word correctly,” Drayer says. “They take it seriously and work hard to make things look right.”

He also gets pulled aside at parties from “all sorts of creative types—producers, writers, actors—taking me into bathrooms and showing me all sorts of moles in inappropriate places,” Drayer quips. “There are a lot of hypochondriacs in Hollywood who are so busy they don’t have time to see a doctor, so they come to me.”

Being head writer for his own show is his dream. He is floating to networks the concept of a show about a doctor who works in the infirmary at the U.S. Capitol and treats everyone from the President to visiting dignitaries. This show, he says, is more serious in nature than *Royal Pains*.

Drayer and his wife have a 4-year-old son and live in Beverly Hills.

– by Jim Rogalski
1970
Robert A. Wilson, MD, HS’74–’77, is “almost” retired, limiting his reconstructive and hand surgery and ENT practice to 8-10 hours per week for the past 10 years. He served as chairman of the board of Greenville Tech and as chair and board member at Bob Jones University, as well as with many charities and other groups. Wilson, who was born at Duke Hospital in 1946, lives with his wife Teresa in Greenville, S.C., where he enjoys gardening, exercise, collecting Renaissance and mannerist Old Master paintings, and playing baseball with the couple’s two sons, Robert, 18, and Jay, 15.

Russel E. Kaufman, MD, HS’78, was named Life Sciences CEO of the Year by the Philadelphia Business Journal. Kaufman is president and CEO of The Wistar Institute, an independent non-profit biomedical research center and the first National Cancer Institute-designated Cancer Center in Philadelphia. Since joining Wistar in 2002, he has boosted its scientific enterprise and raised its international profile by recruiting top scientists, developing new biomedical research centers and expanding programs and facilities. During his tenure, Wistar laboratories have developed candidate technologies including vaccines for HPV and HIB, gene inhibitors, and a prototype screening test for very early detection and diagnosis of lung cancer. He and his wife Jane live in Philadelphia and have two children, Jonathan and Emily.

1980s
Frank S. Pancotto MD, HS’75–’81, is a clinical assistant professor of medicine at Wake Forest University School of Medicine and an assistant professor of medicine at Edward Via College of Osteopathic Medicine. In September 2012 he completed his fifth half-marathon at Disneyland Resort and plans to run another in 2013. He and his wife Marilyn have two grandchildren, Reese and Grayson, and live in Concord, N.C.

1990s
Merle Myerson, MD, HS’93–’96, recently was named a Luminary of Heart by the American Heart Association in recognition of her contribution to the prevention of cardiovascular disease. Myerson is founder and director of the Center for Cardiovascular Disease Prevention at St. Luke’s Roosevelt Hospitals in New York City. The American Heart Association honored her during the 10th anniversary of its “Go Red For Women” Campaign, which increases awareness of heart disease and inspires women to take charge of their heart health. She lives in Thornwood, N.Y.

John Whyte, MD, HS’93–’96, recently published the book, AARP New American Diet: Lose Weight, Longer. The book draws on the NIH/AARP Diet and Health Study, the largest survey ever conducted of American diet and lifestyle, and offers three practical weight-loss plans and dozens of recipes. Whyte is the chief medical expert and vice president of health and medical education at the Discovery Channel, where he develops, designs, and delivers educational programming for medical and lay audiences. He lives in Washington, D.C.

2000s
Adam M. Bressler, MD, HS’98–’02, was named a “Top Doc” by Atlanta Magazine in both 2011 and 2012. He has extensive clinical research experience and has published multiple research papers on infectious diseases and microbiology. He and his wife Suzanne, PA, live in Atlanta with their children Sophia, 11, Asher, 9, and Sydney, 6.
OBITUARIES

Full obituaries can be found on the Medical Alumni Association web site at medalamni.duke.edu. Please click on the magazine cover, then click on obituaries.

Frank C. Bone, T’40, MD’43, HS’44–50, of Orlando, Fla., died July 25, 2012, from complications of a stroke. He was 93. Dr. Bone moved to Orlando in 1950 and opened one of the city’s first practices dedicated to gastroenterology. He served as chief of medicine, president of the medical staff, and chief of gastroenterology for what is now Orlando Health. He helped found the Florida Gastroenterology Society, later becoming the group’s president. He retired from his practice in 1999 but stayed with Orlando Health as the system’s ethicist, a position created for him.

Richard W. Borden, MD’53, of Newport, N.C., died on December 20, 2012, at Carolina East Medical Center in New Bern. He was 87. For more than 30 years, Dr. Borden served as a family physician, first in his hometown of Goldsboro, then in Morehead City. He was a founding trustee of North Carolina Outward Bound School. In 2004, he and 99 other veterans of World War II were invited to France by the French government to participate in the 60th anniversary of D-Day. Just days before his death, the U.S. Army awarded him the Bronze Star and Medical Combat Badge for his service in the Normandy invasion.

John W. Caffey Jr., T’49, MD’53, died January 12, 2013, in Gainesville, Fla. He was 85. Dr. Caffey practiced anesthesiology at a number of hospitals in Jacksonville, Fla., mainly at Baptist Medical Center for more than 30 years, followed by several more years at the Jacksonville Surgery Center.

Wilmer J. Coggins Jr., MD’51, of Tuscaloosa, Ala., died September 9, 2012, at Hospice of West Alabama. He was 87. Dr. Coggins served in World War II as a second lieutenant and commander of a medical collecting company in Hakodate, near Sapporo, Japan. Early in their careers, he and his wife Deborah Reed Coggins, MD’51, went into private practice, first in Boca Grande and then in his hometown of Madison. Dr. Coggins was director of the General Medical Clinic and later director of the University Health Service at the University of Florida College of Medicine. In 1980, he became dean of the College of Community Health Sciences and associate dean of the Tuscaloosa Program at the University of Alabama School of Medicine. He retired from the deanship in 1991.

Blair P. Coleman, MD’51, of Wichita Falls, Texas, died September 4, 2012. He was 89. Dr. Coleman completed two years of active duty in the Pacific Theater of World War II, where his ship took part in the invasion of Okinawa. He practiced internal medicine and cardiology in Wichita Falls for 38 years before closing his medical office in 1993. He continued to serve as a member of the EKG-interpreting team of cardiologists at both Wichita General and United Regional hospitals for another decade. Dr. Coleman was a member of several associations, including the American Medical Association, the American Society of Internal Medicine, and the Bockus International Gastroenterological Society.

Elizabeth Conrad, WC’40, MD, HS’45–46, of Winston-Salem, N.C., died January 1, 2013. She was 92. Dr. Conrad was one of the first three female physicians in North Carolina and was a pediatrician for many years in Winston-Salem.

Alpheus M. Covington, MD’50, of Rockingham, N.C., died October 13, 2012. He was 93. During World War II, Dr. Covington served for four years in the Infantry and U.S. Air Force. He served as chief of the surgical staff at Richmond Memorial Hospital for many years and retired in 2004. He was a member of the Southern Medical Association, Southeastern Surgical Congress, and the International College of Surgeons. He was active throughout his life with the Duke Medical Alumni Association, serving as its president in 1974. He was a charter member of the Davison Club and the Iron Dukes.

Robert W. Curry, BS’44 (medicine), MD’44, of Gainesville, Fla., died April 2, 2012. He was 92. Dr. Curry was the first radiologist at Orange Memorial Hospital, now Orlando Regional Medical Center (ORMC). His career started in a one room X-ray and fluoroscopy unit without air conditioning. The practice evolved into the Medical Center Radiology Group in 1968 and now includes 33 radiologists and more than 100 employees. Dr. Curry also founded the original Orange Memorial School of Radiology Technology and was its first instructor. He served as ORMС chief of staff, president of the Orange County Medical Society, and Diplomat of the American Board of Radiology.

Stanley C. Fell, MD, HS’53–54, died January 7, 2013, at his home in Montego Bay, Jamaica. He was 87. Dr. Fell served as chief of the Department of Thoracic Surgery at Montefiore Hospital Medical Center and professor of thoracic surgery at Albert Einstein College of Medicine in New York. He was a member of the N.Y. Surgical Society, the N.Y. Society for Thoracic Surgery, the N.Y. Society for Cardiovascular Surgery, the Society of Thoracic Surgeons, and the North American Chapter of the International Cardiovascular Society.

Claude B. Goswick, T’51, MD’55, of Bryan, Texas, died October 5, 2012. He was 83. Dr. Goswick’s career included serving in the U.S. Air Force. In 1973, he took a position at the Texas A&M Student Health Center in College Station, Texas. Within the year, he became the director of Student Health and held that position until he retired in 1988. After retirement, he became co-owner in G&S Studies, a pharmaceutical research firm in College Station. Since 2000, he had been a consultant to the Texas Rehabilitation Commission.

Francis W. Hare Jr., MD’44, of Madison, Ind., died January 21, 2013, at his home. He was 95. Drafted into the U.S. Army during World War II, Dr. Hare served as a captain in the Army Medical Corps from 1945–1947. In 1952, he joined the Madison Clinic and the staff of King’s Daughter’s Hospital to practice internal medicine. With the help of King’s Daughter’s Hospital staff, he started a department to provide electro-, echo-, and exercise cardiology, the Intensive Care Unit, and the practice of cardioversion.

M. Wayne Heine, MD’58, died July 24, 2012, from pancreatic cancer. He was 79. Dr. Heine spent two years of service in the U.S. Army at Fort Benning, Ga., during the Vietnam War. He held academic positions at the state universities of Florida and Arizona. He was the founding chair of the Department of Obstetrics and Gynecology at Texas Tech University in Lubbock and opened three other campuses that served as referral sites for the entire West Texas region. Later he served as chair of the
Department of Obstetrics and Gynecology at the University of Arizona, where he completed his career.

David M. Hendricks, MD, HS’99-'00, died November 23, 2012, at Carteret General Hospital in Morehead City, N.C. He was 61. Dr. Hendricks was an anesthesiologist with Wayne County Anesthesia Associates for 12 years. He served as chairman of the Department of Anesthesiology at Wayne Memorial Hospital and was a member of the American Board of Anesthesiology. He was board certified in preventive medicine and underwater and hyperbaric medicine.

Robert L. Hill, MD, a professor emeritus and former chairman of the biochemistry department at Duke, died November 29, 2012, at Duke University Hospital. He was 84. Dr. Hill was instrumental in building the reputation and ranks of the Department of Biochemistry, serving as chairman from 1969-1993. He was a faculty member at the University of Utah for several years before joining the Duke faculty in 1961 as an associate professor. He was appointed professor of biochemistry in 1965 and James B. Duke Professor of Biochemistry in 1974. His accomplishments have been widely acknowledged by the scientific community, including election to the National Academy of Sciences, the Institute of Medicine, and the American Academy of Arts and Sciences.

Thomas E. Jordan, MD, HS’84-'89, of Abingdon, Md., died suddenly on January 19, 2013. He was 54. Dr. Jordan practiced with Drs. Gehris, Jordan, Day and Associates, LLC, in Bel Air, Md. He served as chief of surgery at Harford Memorial Hospital, president and treasurer of the Harford County Medical Society, member of the Medical Executive Committee of the Upper Chesapeake Health System, executive board member of Upper Chesapeake Health System, and member of the Upper Chesapeake Health Foundation.

Victor J. Keranen, MD’64, died February 14, 2013, in Fayetteville, N.C., after a five-year battle with lymphoma. He was 80. Dr. Keranen’s career before becoming a surgeon included working as a deckhand on an oil tanker for the Merchant Marines and as a petty officer second class in the U.S. Navy. In 1970, he established a neurosurgical practice in Fayetteville. In his 28-year career as a neurosurgeon, he recruited many neurosurgeons to Fayetteville and was instrumental in bringing the first brain scanner to the city.

George W. Kernodle, MD’44, HS’45-'47, of Elon, N.C., died February 1, 2013, at his son’s home in Burlington. He was 92. Dr. Kernodle served as a captain in the U.S. Air Force from 1953-1955 and was stationed at Elmendorf Air Force Base in Anchorage, Alaska. He entered solo pediatric practice in 1947. He was certified by the American Board of Pediatrics and is believed to be the first board-certified specialist physician in Alamance County. He served as chairman of pediatrics for Alamance County Hospital. He was a member of the Alamance-Caswell County Medical Society, the N.C. Medical Society, the N.C. Pediatric Society, the Southern Medical Society, and the American Academy of Pediatrics.
OBITUARIES

Peregrina C. LaBay, MD, a former Duke faculty member, died August 2, 2012, at the Hock Family Pavilion of Duke Hospice in Durham. She was 90. Born in Apalit, Pampanga, Philippines, Dr. LaBay was a faculty member at Far Eastern University Medical School in Manila. She also started a clinic in Apalit, providing free medical care to the local community. She immigrated to the United States in 1960 and was later appointed an assistant professor and then associate professor of anatomy at Duke University School of Medicine. In 1970, she was appointed assistant professor of genitourinary surgery and anatomy at Washington University Medical School and Barnes Hospital in St. Louis, Mo., where she remained until retirement.

Verne C. Lanier Jr., MD, HS’73-’76, of Durham, died on January 24, 2013. He was 73. Dr. Lanier served on active duty for two years in the U.S. Navy with the general surgery staff at the National Naval Medical Center in Bethesda, Md., and as a lieutenant commander in the U.S. Navy Reserve. He practiced plastic surgery for 37 years. His career included serving as an associate consulting professor of plastic surgery at Duke University Medical Center, clinical assistant professor of plastic surgery at UNC-Chapel Hill School of Medicine, and chief of plastic surgery for Durham Regional Hospital.

Paul A. Mabe Jr., MD’53, of North Augusta, S.C., died October 7, 2012. He was 85. Dr. Mabe served in the U.S. Army in Europe from 1945-1946. A 57-year resident of Reidsville, N.C., and Rockingham County, Dr. Mabe practiced medicine in Reidsville from 1959 until his retirement in 1996. He was twice president of the medical staff of Annie Penn Hospital and chief of medicine, medical director of Annie Penn Home Health Service, and medical examiner for Rockingham and Caswell counties. He also served as a clinical preceptor for several schools, including Duke University School of Medicine.

Rudy K. Meiselman, MD’53, of Longboat Key, Fla., died December 27, 2012. He was 86. Dr. Meiselman served in the U.S. Army from 1944-1946. He practiced medicine in Providence, R.I., for 30 years, specializing in urology. He was a surgeon on the staff of Rhode Island Hospital and chief of urology at Miriam Hospital until his retirement in 1986. He was director and honorary director of Planned Parenthood of Rhode Island and clinical assistant professor at Brown University.

Charles V. Peery II, MD’68, of Charleston, S.C., died October 6, 2012. He was 71. When he first moved to Charleston, Dr. Peery went into practice with Dr. James Wilson, and together they were the first OB-GYNs at North Trident Hospital. Dr. Peery remained in practice at Trident until a stroke forced him to give up surgical work in 2000. After his stroke, he retrained in hyperbaric medicine, with a special focus on the potential benefits of hyperbaric oxygen in the treatment of traumatic brain injury. He continued his practice until worsening health forced his reluctant retirement from medicine in 2009.

James K. Roche, MD, PhD, HS’73-’77, of Charlottesville, Va., died February 9, 2013, from complications of cardiac amyloidosis at his home. He was 69. Dr. Roche spent time on the faculty at Duke. In 1987, he became an associate professor of medicine at the University of Virginia. In addition to his work as a researcher and physician, he was actively involved in his community, volunteering for Habitat for Humanity, the local free clinic, and his church. He also helped create the Community Partnership for Improved Long-Term Care, a Legal Aid Justice Center committee that advocates for improved quality of nursing home care.

William S. Smith Jr., MD’61, HS’61-’62, of Greensboro, N.C., died December 3, 2012. He was 77. Dr. Smith served as a captain in the U.S. Army Medical Corps before joining a private practice in Greensboro, where he practiced from 1967-2002.

Stephen B. Thacker, MD, HS’79, of Atlanta, Ga., died February 15, 2013, from complications of Creutzfeldt-Jakob disease, a degenerative neurological illness that causes rapid deterioration of the brain. He was 65. Dr. Thacker, a Centers for Disease Control and Prevention (CDC) official, was credited with helping to identify Legionnaires’ disease for the first time in 1976. The CDC recently named two awards for Dr. Thacker, one in recognition of promoters of social justice and the other for those who seek to mentor others.

Daniel Martin Thomas, MD, HS’47-’48, of Clinton, Tenn., died November 25, 2012. He was 94. His military service included being stationed at Gallinger Hospital in Washington, D.C., assigned to the destroyer USS Gregory, and assigned to the destroyer USS Okanagan during the Korean War. He practiced medicine for more than 50 years in East Tennessee, initially as a pedestrian and later as general practitioner. He assisted in the establishment of Oak Ridge Hospital, serving as chief of staff for many years.

Frank B. Thompson, MD’59, of Pasadena, Calif., died September 18, 2012. He was 78. Dr. Thompson was a renowned ophthalmologist who helped to pioneer a range of medical techniques, including scleral reinforcement surgery.

Frederick C. Vogell, MD’47, died February 8, 2013, at his home in The Villages in Lady Lake, Fla. He was 88. Dr. Vogell served two years as a captain with the 15th Infantry Regiment during the Korean War. He then began an obstetrical and gynecological practice in Caribou, Maine, where he remained for 10 years. He moved to Springfield, Vt., maintaining a practice there until he retired in 1992. He served as both chairperson and vice chairperson of the Vermont Section of the American College of Obstetrics and Gynecology.

Joseph W. Whatley, MD’59, of Topsail Beach, N.C., died October 6, 2012, at New Hanover Regional Medical Center, under the care of Lower Cape Fear Hospice. He was 86. In addition to private practice, Dr. Whatley served on the medical staff at Duke University Medical Center and N.C. Memorial Hospital in Chapel Hill. He also served on the staff at New Hanover Regional Medical Center during the 1960s and 1970s, teaching allergy clinics once a month.
An Unbreakable Bond was Forged at Duke

As a medical student and resident at Duke in the 1970s, **R. Sanders “Sandy” Williams, MD’74, HS'77-'80**, took to heart the “fierce commitment to patients that is the hallmark of being a Duke Doctor.” He learned how visionary and thoughtful leaders positively shape an organization, and applied that insight to lead Duke University School of Medicine as its dean from 2001 to 2007.

His respect for Duke and its ability to perform exceptional science, mold exceptional doctors, and provide exceptional care for patients forged an unbreakable bond with the institution.

“Without any question, I learned at Duke what grade A+ quality should be, in medicine, science, and leadership,” he said.

Today Williams is a cardiologist and president of The J. David Gladstone Institutes, a nonprofit biomedical research organization based in San Francisco. He and his wife, Jennifer, met at Duke when she was a student in the Physician Assistant Program, and they were married in Duke Chapel. The couple is giving back to Duke with a flexible gift annuity that pays them income throughout their lifetimes, with the balance going to Duke after they pass. They have designated the Davison Club as the recipient.

Gifts to the Davison Club provide critical, unrestricted support for medical education at Duke for scholarships, curriculum enhancements, new technologies and innovative research. They give Dean Nancy C. Andrews, the ability to maintain excellence at the forefront of 21st Century medical education and research.

To learn more, please contact:
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Duke Professor of Medicine Goes to Stockholm

James B. Duke Professor of Medicine Robert Lefkowitz, MD, receives the 2012 Nobel Prize in Chemistry from King Carl XVI Gustaf, king of Sweden.

Duke University School of Medicine is ranked 8th nationally for 2012 by U.S. News & World Report.