

THE MAGAZINE OF TULANE UNIVERSITY SCHOOL OF MEDICINE | FALL 2010

# TULANE | MEDICINE



CIRCLE OF LIFE

LAST ONE OUT

THE RIGHT PLACE  
TO FIGHT  
KIDNEY DISEASE



## **F**ive years ago, the winds and waters of Hurricane Katrina struck the city of New Orleans.

As the levees failed and the floodwaters rose, hundreds of people lost their lives and many dreams were lost forever. The future of New Orleans, like the floodwaters that filled the city, was unclear and murky.

But in the face of adversity, the people of New Orleans found the courage and took advantage of the opportunity to build a stronger city. Most inspiring is the dedication of the Tulane physicians, researchers, nurses, students and staff who came back not only to rebuild their lives, but to provide medical education and the healthcare services so desperately needed by the people of New Orleans. In an article beginning on page 8, you will discover some of the lessons learned in the aftermath of the storm.

**Welcome to the Class of 2014** In August, Tulane University School of Medicine welcomed the class of 2014 at its annual White Coat Ceremony. A record 10,038 applications were received for 188 seats. Please join me in welcoming our new medical students to Tulane and New Orleans.

**New Chair of Pharmacology** I am pleased to announce that, following a national search, Dr. David Busija has accepted the position of Chairperson of the Department of Pharmacology at Tulane University School of Medicine. Dr. Busija received his PhD from the University of Kansas and was a post-doctoral fellow at the University of Iowa Cardiovascular Center. Dr. Busija is currently Professor of Physiology and Pharmacology at Wake Forest University (WFU) Health Sciences Center and Professor of the WFU Institute for Regenerative Medicine. His research is supported by four grants from the National Heart, Lung and Blood Institute and he has published more than 270 original articles, reviews and book chapters. Dr. Busija will begin his appointment on January 1, 2011.

### **Tulane School of Medicine Named Finalist for Spencer Forman Award**

Once again we are a finalist for the 2010 Spencer Forman Award for Outstanding Community Service that is awarded by the Association of American Medical Colleges (AAMC). The Spencer Forman award recognizes member institutions that go well beyond the traditional role of academic medicine to reach communities whose needs are not met through the existing health care delivery system. The winner of the Spencer Forman Award will be announced at the annual AAMC meeting in November 2010.

*Ben*

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### ON THE COVER

*The illustration conveys the central role of an altruistic kidney donor, Tamara Greer, in leading to transplants for three patients in a "domino" surgical procedure that represented a state first.*

**ALMOST ONE IN EVERY  
FOUR PROSPECTIVE  
MEDICAL STUDENTS IN  
THE U.S. THIS YEAR APPLIED  
TO TULANE.**



Top: Crystal Le of Kenner, La., one of the 188 incoming first-year medical students at the Tulane School of Medicine, receives her white coat from Dr. Earnest J. Sneed, assistant dean of student affairs. Le received her undergraduate degree from Tulane University.

Bottom: Varun Shetty of East Hills, N.Y., Carol Shih of New Orleans and Shoichi Shimamoto of Thousand Oaks, Calif., members of the class of 2014, inspect their new stethoscopes, a gift from the Tulane Medical Alumni Association.

## **NEW CLASS BREAKS RECORDS**

**A**n unprecedented 188 new students at Tulane University School of Medicine received their first white coats on August 2. They were selected from among 10,038 students applying to attend, an increase from last year's record of 9,431 applications. According to statistics from the Association of American Medical Colleges, almost one in every four prospective medical students in the U.S. this year applied to Tulane.

More than 90 colleges and universities are represented in this year's class, including 23 Tulane graduates.

It's a diverse class in experience and background. Its members include:

- the lead singer in a funk band
- a steel-drum player
- an artist who makes sculpture out of trash
- a stunt performer in the movie industry
- a Marine Corps pilot of the F/A-18
- a hangglider who piloted over the Swiss Alps
- a paddler of dragon boats
- a deputy prosecuting attorney
- a production intern with ABC News Nightline
- a member of the U.S. Women's Handball Team

One first-year medical student, Robbie diBenedetto, is the sixth generation of his family to attend Tulane. His lineage includes four Tulane medical school graduates: his great-great-grandfather Dr. Henry William Roeling Jr. (1910), Henry's brother Dr. George Roeling (1908), Robbie's great-grandfather Dr. William Henry Roeling ('24) and Dr. William's sister Dr. Jeanne Roeling ('29).

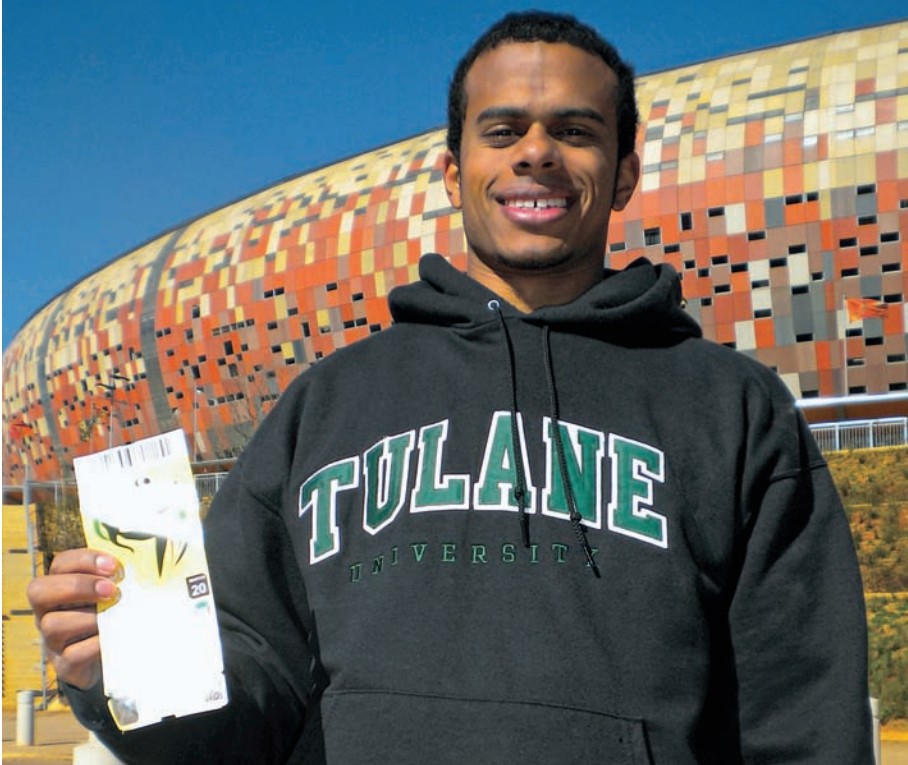
Dr. Marc Kahn, senior associate dean of admissions and student affairs, told the students, their friends and their families that "this event recognizes the compassion that is essential to becoming a good physician. Wearing a white coat does not assert privilege. Rather, it implies responsibility. When the first-year students put on the white coats, they have a huge responsibility to uphold the honor and tradition of the medical profession."

Dr. Earnest J. Sneed, assistant dean of student affairs, placed a coat on the shoulders of each student. Each also received a badge embroidered with the seal of the medical school to be worn on the coat, a pin from the Arnold P. Gold Foundation for Humanism in Medicine and their first stethoscopes, a gift to each from the Tulane Medical Alumni Association.

Featured speaker Dr. Eugene Berry, president of the Tulane Medical Alumni Association and a 1964 alumnus, told the students that, since the medical profession is undergoing many changes, they can make creative use of the opportunity.

"You are in the enviable position to be entering medicine at a time when you may be able to help restructure and improve the way we care for our patients," he said.





Senior medical student Jabar Whittier attends a World Cup soccer match while on an international medical rotation in Johannesburg, South Africa.

## SOCCER & SUTURES IN SOUTH AFRICA

For Tulane medical student and World Cup soccer fan Jabar Whittier, heading to South Africa this summer for an international medical rotation was a dream assignment. A senior medical student, Whittier spent two months at the world-renowned Chris Hani Baragwanath Hospital in Johannesburg, South Africa, attending World Cup matches in his spare time.

Through an arrangement with the University of Witwatersrand health sciences school, he studied trauma surgery and cardiology.

Whittier, who graduated from Tulane as a neuroscience major in 2007 and was a high school Urban Scholar, says he was elated to return to Africa. He and his family lived in Harare, Zimbabwe, until he was seven years old.

He rooted for Bafana Bafana, the South African soccer team, and the other African teams including Ghana, the last-standing African team, as well as the USA and Brazil. But, as memorable as the World

Cup was, Whittier will never forget his intense experiences at the hospital.

“One of my most memorable experiences happened on my first day just after lunchtime,” Whittier said. A 14-year-old boy was brought to the hospital by ambulance after falling off the roof of a train and striking an electrical line. The trauma team evaluated and stabilized the boy, who had a fractured skull, deep lacerations on his head, severe burns on his arms and legs and a broken fibula.

“Staring at the patient’s exposed skull as I sutured his deep lacerations was somewhat unnerving, but I am grateful to have been given that opportunity to learn, practice and improve on my suturing skills on a particularly grave injury,” Whittier said.

After graduation from medical school, Whittier hopes to pursue a career in cardiology.

“I plan to continue traveling by working in hospitals and clinics throughout the world and hopefully at times it will coincide with exciting events as it did this time.”

## STUDENTS SHINE

**JESSIE KITTLE (T2) AND JOHN MOUSTOUKAS (T4, MD/MBA)**

have been named New Orleans Albert Schweitzer Fellows for 2010-11. They were selected based on project proposals that addressed unmet healthcare needs in New Orleans. Kittle will develop an education and outreach program designed to help individuals reduce the risks associated with intravenous drug use at a local syringe access program, which is the only legal syringe access program in the state. Moustoukas will administer a program at an area charter school that will combine musical training and creative expression with stress and anger management.

**BILL TEETER (T3)** was elected to serve as chair of the Southern Organization of Student Representatives, a group within the Association of American Medical Colleges.

**DOROTHY CONTIGUGLIO (T3)** received the 2010 Community Champions for Children student award from the New Orleans Children’s Health Project for her work with obesity prevention and outreach.

## ALUMNI HEAD IS ACE VOLUNTEER

**T**he Hurricane Katrina experience “taught me what is most important in life,” said Cynthia Hayes. That’s why Hayes spent Aug. 27, two days before the fifth anniversary of Hurricane Katrina, putting siding on a Habitat for Humanity house on Frenchmen Street, as part of Tulane’s Wave of Green service day.

The director of alumni relations for the School of Medicine, Hayes lost her Lakeview home in Katrina’s aftermath. She and her family ended up in Dallas, before they put their lives back together and returned to New Orleans, thanks to the generous support of friends and family.

Community involvement became a regular activity, from pulling weeds at New Orleans City Park to adopting needy families during the holiday season.



Tulane staff member Cynthia Hayes, center, is among the painting volunteers at Lusher School in 2006 who helped make sure the school would be ready to open that fall.

“Assisting with rebuilding efforts helps me as a person. The intrinsic reward is something that can’t be matched,” she said.

The Wave of Green service day sent volunteers from the Tulane community to work sites such as City Park and Habitat for Humanity home building projects.

In May, Hayes also received an award from the Tulane student organization the Owl Club for being “mom” to first-year medical students. She was recognized for her smiling face, open door and listening ear, as well as providing breakfast treat bags before big exams.



Dr. Regina Benjamin, U.S. surgeon general, and Dr. Ben Springgate of Tulane lead an examination of how community organizations can respond to people under stress due to the oil catastrophe.

## ‘AMERICA’S DOCTOR’ CALLS ON NEW ORLEANS

**I**t’s hard to talk about how much that water means. It’s part of who we are.”

That was a message from U.S. Surgeon General Dr. Regina Benjamin, who visited New Orleans in July to meet with community leaders about the effects of the Deepwater Horizon oil spill on public health, especially mental health.

An Alabama native who founded a clinic in Bayou La Batre, Ala., Benjamin said that “stressors can impact health over time,” adding that she wanted to discuss the “resiliency and resources we have here.”

Dr. Ben Springgate, executive director of community health innovation and research for the Tulane Office of Community Affairs and Health Policy, organized the meeting. Tulane has partnered with RAND Health and REACH NOLA to provide mental health care in New Orleans after Hurricane Katrina.

Springgate was asked by the U.S. Department of Health and Human

Services to work on the session “because of our program’s track record in building and directing community partnerships for mental health and resilience that provided more than 110,000 mental-health services, worked with more than 80 nongovernmental organizations and trained more than 400 local providers over the last few years.”

Other Tulane participants included Dr. Charles Zeanah, professor and chair of child psychiatry; Dr. John Thompson, clinical professor of psychiatry and neurology; and mobile health providers from the Department of Medicine.

Benjamin, who holds an MBA from the Freeman School of Business, also received an honorary doctor of science degree at Tulane’s spring commencement.

Before she became Surgeon General, Benjamin served the 2,500 residents of Bayou La Batre, many of whom have no health insurance. The clinic was destroyed twice by hurricanes and once by fire; each time, with community support, she rebuilt.





In the wake of the Deepwater Horizon oil spill, Tulane takes to the road with mobile healthcare units to participate in Coastal Care Fair events around Louisiana.

## RAISING HEALTH HORIZONS

**T**ulane University School of Medicine staff were active in the outreach to those affected by the Deepwater Horizon oil spill.

Initiatives included taking part in the Our Home, Louisiana Coalition, an effort by Blue Cross and Blue Shield of Louisiana and other community organizations to provide free health screenings, wellness information and mental health resources to citizens affected by the Gulf oil spill.

The coalition sponsored 12 Coastal Care Fairs with free health screenings, job information, mental health counseling, refreshments and entertainment for kids.

The Tulane Community Health on the Road unit from the School of Medicine offered basic health screenings, blood pressure checks, glucose checks and urgent care exams. In addition, the mobile New Orleans Children's Health Project unit provided behavioral health screenings and counseling.

Tulane staff also participated in an all-day event, hosted by Congressman Anh "Joseph" Cao's office and community partners, to provide services primarily to the city's Vietnamese community, many of whom rely on the fishing industry for their livelihood.

Tulane's Office of Community Affairs and Health Policy coordinated the health services. The School of Medicine provided mobile clinics and volunteers for health screenings and interpretation services.

"We're seeing a lot of husbands and wives come in," said Linda Do, a patient registration assistant at the Tulane Community Health Center, who provided Vietnamese interpretation services and diabetes screening for patients. She and others screened more than 100 people before lunchtime and referred several to the mobile unit for further testing.

Leah Berger, director of community health programs, planning and development for Tulane, said, "While no good can come out of the oil spill, at least we can use our lessons learned from Hurricane Katrina and know the best way to mobilize resources and get them to the people that need them."



At an award ceremony, Dr. Karen DeSalvo of the Tulane Community Health Center accepts the \$50,000 prize from a People to People campaign, presented by NFL star quarterbacks Eli and Peyton Manning.

## COMMUNITY HEALTH CENTER ROCKS THE VOTE

**T**ulane University Community Health Center won the \$50,000 top prize from the People to People Ambassador Program's Remember NOLA campaign.

The social media campaign encouraged people to vote for their favorite New Orleans-based community organization. The Community Health Center received more than 3,100 of the 6,800 votes cast.

The money will help complete the renovation of the 10,000-square-foot Ruth U. Fertel/Tulane Community Health Center, a neighborhood-based medical home that will provide care to patients regardless of insurance status or ability to pay. Preliminary construction has started on the center, which is expected to open in summer 2011.

## THE SHIRTS OFF THEIR BACKS

Tulane Cancer Center faculty and staff donated over 1,000 t-shirts to oil spill cleanup workers, who must change shirts frequently on their dirty jobs. "It's a win-win," said Dr. Roy S. Weiner, associate dean for clinical research and training. "We were able to clean out our closets while helping with the clean-up." The Cancer Center also donated 150 bottles of sunscreen to the workers.

“

HEALTHCARE  
PROFESSIONALS NOW HAVE A  
NEW TREATMENT OPTION FOR  
PATIENTS WITH THE MOST  
ADVANCED STAGE  
OF PROSTATE CANCER  
AND FOR WHOM THERE  
HAVE BEEN FEW OPTIONS.

”

—Dr. Oliver Sartor

## DRUG FOR ADVANCED PROSTATE CANCER RECEIVES FAST-TRACK APPROVAL

A new drug that has been shown to extend life for men fighting advanced prostate cancer has received approval from the U.S. Food & Drug Administration.

In an international Phase III randomized trial, the intravenous drug Jevtana® (cabazitaxel), in combination with prednisone, reduced the risk of death by 30 percent in men with hormone-resistant prostate cancer, compared with standard chemotherapy based on the leading treatment, docetaxel.

“This is truly a significant announcement for the prostate cancer community, addressing an unmet medical need,” said Dr. Oliver Sartor, North American principal investigator for the Phase III trial and Laborde Professor of Cancer Research at Tulane Cancer Center.

“With the approval of Jevtana, healthcare professionals now have a new treatment option for patients with the most advanced stage of prostate cancer and for whom there have been few options.”

The FDA approved the drug quickly. The review was made under a priority program for drugs that offer an advance in treatment or provide a treatment where none exists; generally such a review takes six months. In the case of cabazitaxel, a decision to approve was made in 11 weeks.

Sartor was appointed medical director of the Tulane Cancer Center, effective July 1. He was also recently named the new C.E. and Bernadine Laborde Professor of Cancer Research in the departments of medicine and urology.



Dr. Oliver Sartor, medical director of the Tulane Cancer Center, was North American principal investigator for the Phase III trial of a drug recently approved for advanced prostate cancer.

## UNIVERSITY MEDICAL CENTER BOARD NAMED

**T**he 11 members of the board that will govern the proposed University Medical Center (UMC) have been selected.

The governor nominates four non-permanent, independent board members; Tulane and Xavier appoint one permanent member each; LSU appoints four permanent members and Southern University, Dillard University and Delgado Community College appoint one permanent member on a rotating basis. The seven permanent members have an up-or-down confirmation vote on the governor's slate.

The board includes:

**Darryl Berger (Tulane)** Berger, a native of the city, has been at the forefront of real estate transactions of all types for nearly three decades, including as a leader in the development of the New Orleans riverfront and as a property owner in the French Quarter. He is also a member of the Board of Tulane.

**Alden McDonald (Xavier)** The founder of Liberty Bank & Trust Co., McDonald has developed it into one of the five largest African-American-owned financial institutions in the U.S. He has also chaired the Lindy Boggs Medical Center board and been vice chairman of Charity Hospital.

**Charles C. Teamer Sr. (Dillard)** Having served as vice president of fiscal affairs at Dillard and Clark Atlanta universities, Teamer is a former member of the Board of Supervisors for the University of Louisiana System. He is an emeritus member of the Board of Tulane.

**Elaine Abell (LSU)** An attorney in Lafayette, she is president of the board of Fountain Memorial Funeral Home and Cemetery, a member of the

Iberia Bank board and served on the LSU Board of Supervisors from 1988 to 1994, including one year as chair.

**Dr. Byron Harrell (LSU)** Harrell, who has worked for more than 25 years in health systems management, hospitals, health maintenance organizations and related fields, is president of Baptist Community Ministries, one of the largest private foundations in Louisiana.

**Bobby Yarborough (LSU; UMC board chair)** Co-owner and chief executive officer of Manda Fine Meats, Yarborough chairs the Louisiana Association of Business and Industry and the Louisiana Egg Commission. He also serves on the LSU Board.

**Rod West (LSU)** Executive vice president and chief administrative officer of Entergy Corporation and a member and former chair of the LSU Board, West has been heavily involved in efforts to help New Orleans recover from Hurricane Katrina.

**Tim Barfield (Governor)** Chief development officer at Amedisys, a home healthcare and hospice company, he formerly served as executive counsel to Governor Jindal and as the executive director of the Louisiana Workforce Commission.

**Donald T. "Boysie" Bollinger (Governor)** President and CEO of Bollinger Shipyards, Inc., he has been a member of the Louisiana Board of Regents, the University of Louisiana System Board and the Louisiana Recovery Authority Board.

**Dr. Christopher J. Rich (Governor)** The managing partner of Mid State Orthopaedic and Sports Medicine Center, he is president-elect of the Louisiana Orthopaedic Association and chairs orthopaedics at Huey P. Long Medical Center in Pineville.

**David Voelker (Governor)** President of Frantzen-Voelker-Conway Investments, LLC, Voelker chairs the Louisiana Recovery Authority, is a member of the Teach For America Board of Governors, and was on the Postsecondary Education Review Commission.



Southwest Louisiana Veterans Health Care System

An architect's rendering of the Canal Street entrance to the new VA Medical Center: Summer groundbreaking launched a projected three-year construction timetable.

## VA HOSPITAL ON THE WAY

**G**round was broken June 25 for an \$800 million Veterans Affairs Medical Center complex, replacing the facility damaged by Hurricane Katrina.

The hospital is scheduled to see its first patients near the end of 2013. Its 1.7 million square feet will contain outpatient exam rooms, 20 intervention and surgery rooms, emergency services, 200 hospital rooms, research facilities, rehab areas and mental health services.

Bound by South Rochemblave Street, Canal Street, South Galvez Street and Tulane Avenue, the 30-acre campus in the medical corridor will include a 1,000-space garage.

The hospital is slated to employ 2,200 people, with an average salary of \$95,000.

## INPATIENT REHAB CENTER RANKS HIGH

**T**he Tulane Inpatient Rehabilitation Center, at Tulane-Lakeside Hospital in Metairie, is in the top 10 percent of inpatient rehabilitation facilities nationally.

The center was one of 805 facilities that qualified for the database of Uniform Data System for Medical Rehabilitation in 2009.

"This recognition is the culmination of a team effort and a culture of patient service. The result is not only this recognition but also the best possible outcomes for our patients," said Dr. Bob Lynch, CEO of Tulane Medical Center.

The report was based on 2009 data, drawn from both Medicare and non-Medicare patients.

"I am very excited that the Tulane Rehabilitation Center has been recognized for all of the good things that happen here," said Dr. Gregory Stewart, medical director. "This is a tribute to the hard work done by the nurses, therapists and support staff."







# Last One Out

Hurricane Katrina left behind crisis and opportunity. Tulane medical leaders share hard-won experiences so colleagues across the nation can be prepared.

BY DIANA PINCKLEY

Two days after Hurricane Katrina hit New Orleans, Dr. Lee Hamm, chair of the department of medicine at Tulane, hopped in a canoe with two other physicians and pushed off from Tulane Hospital, paddling through the flooded streets to check on conditions at Charity and University hospitals a few blocks away.

The situation at Tulane, while very serious, was being managed. The hospital's 120 patients and the 60 additional critically ill evacuees from the Superdome were being airlifted out with helicopters arranged by HCA, Tulane Hospital's parent company.

The hospital had no electricity, no elevators, no air conditioning, no running water. Temperatures were well over 100 degrees; sewage was coming in through the toilets. The emergency generators had fallen victim to flooding and fuel shortage.

Non-ambulatory patients were carried on stretchers or mattresses down many flights of stairs from the hospital floors to the parking garage, then loaded into a pickup truck for the drive to the roof. Helicopters were able to land there, after hospital maintenance workers cut down four light fixtures that were in the way.

The process was slow, but it was working. By Wednesday night, all of Tulane's critically ill patients had been evacuated to other HCA hospitals.

It was a different story at Charity and University, each of which had Tulane internal medicine residents on duty. "There was not any clear plan that I knew of to evacuate them," Hamm said.

So he decided to focus on ways he might change that. Early Thursday morning, he managed to get a cell phone call through to his parents in Birmingham, where his wife and son had fled from the storm.

"I told them to call CNN, call Fox, call whoever you can and let them know that these hospitals are not being evacuated," he recalled in an interview a few months after the storm. "My mom said that she didn't know how to do that, but I just told her, 'Figure it out.'"

With the help of extended family, his mom did as he asked. Media picked up the story, and Chinook helicopters started arriving, with the ability to take out 50 or 60 patients at a time.



PHOTO BY TROY SNOW

By Thursday night, all the patients from Tulane and Charity had been evacuated, along with most of the 200 medical staff and assorted family and community members—a total of about 1,200 people from Tulane, plus 76 dogs and cats who had come to the medical center with their families to weather the storm.

That night, Hamm slept under the stars, on the top floor of the parking garage. People from a hotel next door threw extra pillows across the chasm separating the two buildings, offering relief from the hard concrete.

“I had decided early on that I would be one of the last out,” Hamm said. On Friday, he was ready to leave when he looked out of the helicopter he had already boarded and noticed that no physicians remained—only HCA Delta Division head Mel Lagarde and a staffer. “So I got off just in case something arose.”

It did. A Wildlife and Fishery Services boat delivered three people in urgent need of medical attention. “We have these three patients that arrive eight floors below us on the ramp up into the parking lot, which is basically a boat dock,” Hamm recalled.

The remaining team had keys to only one truck to transport three stretcher-bound patients to the makeshift helipad on the roof. But the marine infantryman assigned to guard them had an idea: hotwire another truck. “He later tells me that the unofficial marine motto is ‘If you ain’t cheating, you ain’t trying,’” Hamm said. “Under the circumstances, using anything you can is standard operating procedure.”

With those patients stabilized and evacuated, Hamm and Lagarde flew out on a subsequent helicopter to an HCA hospital across Lake Pontchartrain. After a stopover in Lafayette, Hamm arrived in Birmingham at 2 a.m. Sunday, where his family greeted him with banners and hugs “as if I were returning from war.”

Lagarde calls Hamm a hero. “He showed uncommon valor—real dedication. It was a very difficult situation. We had been there a long time, and we were tired and filthy. It was a horrible place; we felt like we’d been to hell and back. Everybody wanted to go home. But Lee Hamm wanted to stay, until every patient was evacuated.”

All of Tulane’s patients survived; only two Charity patients died. “This was a remarkable achievement—and a lucky one,” Hamm said, adding that those statistics would be admirable for any hospital in any given week.

## FIGURING IT OUT

Since Hurricane Katrina, Tulane physicians, residents and students have spent time figuring out the best way to prepare for a catastrophe—the kind that could affect any medical center anywhere—and effective steps toward recovery.

“

**WE HAVE MANY ‘HEROES’ HERE  
AT TULANE, WHO DID INCREDIBLE JOBS  
UNDER EXTRAORDINARY CIRCUMSTANCES  
DURING AND AFTER HURRICANE KATRINA.**

”

*—Dr. Lee Hamm*

Medical students were moved to Houston; by October 1, Tulane residents were in Alexandria and New Orleans, initially at Lakeside Hospital and one of several free-standing clinics established quickly to meet the medical needs of the community.

Dr. Eboni Price-Haywood, who joined Tulane a few weeks before Hurricane Katrina as associate program director for ambulatory training in internal medicine, worked with Dr. Karen DeSalvo, vice dean for community affairs and healthcare policy, and medicine residents to found clinics at Covenant House, on the uptown Tulane campus, on the ferry landing near Harrah’s casino and in Algiers, among others.

“I came back the second week after Katrina to help stabilize those sites and get them ready for the trainees,” said Price-Haywood. Starting October 1, about 25 or 30 residents were back, representing about a third of the program. The others were scattered across the country.

Meanwhile, Hamm was working with Dr. Jeff Wiese, associate dean for graduate medical education, and others on sustaining the quality of residency training.

The Sunday after his early-morning return to Birmingham, he got on the phone. And he stayed there. “I was on the phone essentially 100 percent of the time during waking hours to try to start organizing things,” Hamm said. “By Thursday, I flew to Houston to find out what the medical school’s plan was. For the next four months, I never slept in the same bed for more than four nights in a row.”

Tulane Hospital reopened on Valentine’s Day of 2006, the first downtown hospital to do so.

## SHARING HARD-WON KNOWLEDGE

In the five years after Katrina, Hamm, Lagarde and Price-Haywood have shared the lessons they learned with colleagues all over the country.

New Orleans’ system of delivering primary care to low-income patients has been reshaped, with about 90 community clinics providing “medical homes” that manage overall medical care for more than 100,000 largely uninsured or underinsured individuals in Orleans, Jefferson, St. Bernard and Plaquemines parishes.





Medical scenes from Hurricane Katrina and its aftermath  
(clockwise from top):

Tulane Medical Center staff worked around the clock—without electricity or running water—to care for some 180 patients before they were evacuated.



The Gravier Street emergency entrance to Charity Hospital was a docking area for rescue boats the day after Katrina.

By October 1, Tulane medicine residents staffed several quickly established community clinics, including one at University Square, uptown near the corner of Broadway Street and Leake Avenue.

Dr. Lee Hamm on the job at Tulane Medical Center post-hurricane.





*Clockwise from top:*

Medical staff used boats to move patients from Charity Hospital to the makeshift helicopter landing pad on the rooftop of a Tulane parking garage.

Like much other essential equipment, fire extinguishers were drowned by the flood; those on the garage roof could see dramatic fires rising from the water all over the city.

The front of the Tulane School of Medicine building, as seen from Tulane Medical Center on Tuesday, August 30, 2005.



"We're unique," said Price-Haywood, who is now assistant professor of medicine and the chief medical officer for Tulane Community Health Centers. "We had a blank slate; we had to start over. It was an opportunity to reorder the way we deliver care at a critical point in our history."

The effort has also become a model for cities nationwide, she added, and it influenced the federal healthcare reform legislation.

Like other urban areas, New Orleans had a significant population of uninsured patients who turned to the emergency room for basic medical services. "You'd see people take several buses across town because there was no affordable care near where they lived."

"Now, neighborhood clinics are within walking distance of patients they serve or on a bus line. Patients can arrange a primary care visit in a week or less rather than wait for several months for an appointment. And, consistent with principles of a medical home, patients see the same primary care team each time."

Price-Haywood points to other lessons: "We were all tested on strength and resilience," she said. "Those who came back and stayed were those who were strong enough to work through it to rebuild the city and make it better than it was before."

## PREPARING FOR THE NEXT ONE

Lagarde and other members of his team spent over a year traveling to every major city, speaking to groups about disaster preparation and recovery. "A lot of national policies adopted by FEMA, the American Hospital Association and HCA itself came as a result of lessons learned from Hurricane Katrina," said Lagarde. "We have addressed communications, how to handle discharges prior to landfall, transport capabilities and many other areas."

At a cost of more than \$15 million, Lagarde said, HCA has completely hardened Tulane Medical Center—with its own water systems, a sealed boiler system ("it's like a submarine") and modified air intakes, as well as completely rewriting policies. "We have also applied a lot of the things we have done here to 60 coastal HCA hospitals in Florida and Texas that may be vulnerable to hurricane strikes."

Students and residents who were involved in medical care after Hurricane Katrina discovered a lot about human nature, too.

"They developed a lot of confidence in themselves, and that runs very deep; they also learned that you can count on those immediately around you," said Hamm, who is now professor of medicine, the Harry B. Greenberg, M.D. Chair of Internal Medicine and executive vice dean of the School of Medicine.

"We have many 'heroes' here at Tulane, who did incredible jobs under extraordinary circumstances during and after Hurricane Katrina," he added, "and many, many of them have not been individually recognized. They deserve enormous thanks and respect."

As he outlined in an article in *The American Journal of the Medical Sciences* in November 2006, Hamm's personal priority list in a disaster includes security ("We had excellent security. I will never walk by our security guards again without respect for what



## ADVICE FROM THE VOICE OF EXPERIENCE

Dr. Lee Hamm's best advice for other medical institutions who may someday face catastrophe, whether the magnitude is similar or smaller:

- **PREPARE, PREPARE, PREPARE;** do not ignore disaster drills, but also do not think that they encompass what your disaster may require.
- **CONSTANTLY CONSIDER WHAT CAN GO WRONG.** Ask yourself: "What am I relying on that might not work?" You have to realize too that you can't count on many things, particularly early on.
- **BE AS SELF-SUFFICIENT** as possible.
- **REALIZE THAT A LOT OF PEOPLE ARE WILLING TO HELP YOU,** but they're not necessarily the people you might think. "I developed a great lack of confidence in government to do things quickly—at all levels," Hamm said. "But other academic and medical organizations were hugely beneficial."
- **HAVE THE BACKUP PLAN** to the backup plan ready.

they mean."); communication ("We thought that we had everything, including satellite phones; however, nothing worked consistently."); water; fuel ("Who thinks about diesel?"); cooperation; leaders; food; medicines and portable oxygen tanks.

The traumatic time did result in improvement. "We have a better focus on working with the hospital," Hamm said. "We developed better communication and better working relationships among departments and among schools at Tulane. And we now have a lot of financial discipline, which is a good thing in the current economic conditions.

"I think we also began to keep the missions of the medical school—teaching, research and education—in very sharp focus."

Hamm expresses a deep confidence in the ability of people to rise to the demands of a crisis. "I would advise people to believe in themselves a lot, and not to shy away from taking on huge challenges. They have more in them than they may have thought about." 🐼

*Mary Mouton, who interviewed Hamm for an oral history project in the months following Hurricane Katrina, contributed to this story.*

# Circle of Life

ONE GOOD SAMARITAN TRIGGERS KIDNEY



ALTRUISTIC DONOR  
Tamara Greer



RENEE'S FRIEND, DONOR  
Darla Larson



RECIPIENT  
Renee Creduer-Bergeron



RECIPIENT  
Mr. J



# TRANSPLANT CHAIN



MR. J'S WIFE, DONOR  
Mrs. J



RECIPIENT  
Larry Landry

When healthy 23-year-old Tamara Greer decided she wanted to give a kidney to someone she didn't know, she set off a chain reaction that brought new health and new hope to three strangers. Greer's was the initial move in Louisiana's first domino paired-donor kidney transplant surgery, on May 25 and 26 at Tulane Medical Center.

"Tamara was our altruistic donor, someone who comes forward out of the goodness of their heart to donate an organ," explained Dr. Anil Paramesh, assistant professor of surgery at Tulane University School of Medicine.

BY DIANA PINCKLEY



The logistics of domino transplants can be difficult, Paramesh said, but the operations, first done in 2005, dramatically increase the number of kidneys available from living donors.

About 25 percent of transplant candidates who come to Tulane paired with a person willing to donate a kidney are not a match with that person. The reason can be differing blood types or tissue incompatibilities that occur when a patient—due to pregnancy, blood transfusion or a previous transplant—shows an immune response against the putative donor's tissue.

But the would-be donor might match the potential kidney recipient in another incompatible pair. And that's just what happened, three times, in the Tulane domino surgeries.

Greer's kidney went to René Creduer-Bergeron, a mother of two from Baton Rouge. Creduer-Bergeron's friend and co-worker Darla Larson, who was medically eligible to donate a kidney but incompatible with René, donated a kidney to Mr. J., a patient who wished to remain anonymous. Mr. J's wife, who was not a match for her husband, donated a kidney to Larry Landry of Welsh, La., who had been on the transplant waiting list for five years.

Greer's decision was inspired by her Uncle Bo, who needed a kidney transplant but had to wait so long his heart became too weak to withstand the procedure. "If more people were willing to donate, he wouldn't be sick right now," she said.

The Summit, Miss., resident first acted on her altruism by going to the Internet for information. "Mississippi has no altruistic donation program, so I called Tulane. It was the nearest place I could find, and the people there were so lovely, so helpful."

Paramesh's list of incompatible kidney donor/recipient pairs totals more than 40. The entire kidney transplant waiting list at Tulane is about 800; the statewide number is around 1,600.

He pointed out that kidneys from living donors last about 12 to 14 years on average, about twice as long as cadaveric kidneys. Paramesh is also medical director for the Louisiana Organ Procurement Agency (LOPA), the federally designated organ procurement organization for the state.

According to Donate Life America, Louisiana ranks No. 1 in the nation for registered organ donors, with 64 percent of residents obtaining drivers' licenses and state IDs responding in the affirmative when asked if they would like to register as organ-and-tissue donors.

**DOMINOES FALL, CHEERS RISE** "Once we put Tamara's genetics into the mix, the domino surgery would work," Paramesh said. "I called up a bunch of people and said, 'You might be able to get a living donor kidney.'"

One of the people who got a phone call was Larry Landry, 68, who sells airplane parts for crop dusters in Welsh, a southwest Louisiana town about three hours from New Orleans. "I'd been five years on the waiting list," Landry said, "and it was weird the way it happened. I had just come back home from Tulane. I was second in line for a transplant—but the first guy got that kidney. Within an hour, I got the call to come on back, because they had a kidney for me."

In a domino transplant procedure, the process is anonymous. "They can't meet each other beforehand, because you don't want donors/recipients to be biased either for or against each other,"

Paramesh explained.

Because the surgeries need to be carried out more or less at the same time, the logistics became complex. "You have to have patients and their families scattered all over the hospital. Dozens of staff are involved, and everyone knows that mum's the word," Paramesh said.

Getting simultaneous operating room access is also a challenge. There are four transplant surgeons in the unit—Paramesh, Dr. Joseph C. Buell, professor of surgery and director of the Tulane Abdominal Transplant Institute; Dr. Douglas P. Slakey, Robert and Viola Lobrano Chair of Surgery; and Dr. Mary T. Killackey, assistant professor of surgery. Four operations were performed the first day and two

the next; each surgery took two to three hours.

While the final phase is measured in hours, the process of qualifying a donor—particularly an altruistic one—generally takes weeks or months, according to Karýn Hanley, a nurse who is living donor coordinator for the Abdominal Transplant Institute.

"The process for donors is purposely a step-by-step one," Hanley said. "We want to allow them an opportunity to back out if there's something along the way they can't do."

Of the 200 or so phone calls from potential donors Hanley receives in a year, 40 or 50 can be qualified. Some 20 of those 200 calls are from would-be altruistic donors—and Greer is literally one-of-a-kind. "Maybe we have one altruistic donor a year."

The process includes rigorous physical and psychological screenings as well as meeting with a team that includes Hanley, a social worker, a psychiatrist, a surgeon and a nurse-practitioner. The final step is approval by a selection committee made up of transplant surgeons, donor surgeons, nephrologists, transplant nurses, a dietitian, a social worker and a psychologist.

She explains that a separate medical team is assigned to protect the interests of the donor. Paramesh added, "As a donor surgeon, it's my job to make sure that I'm not going to hurt somebody to help that recipient."

The surgery is a laparoscopic procedure. While six weeks is the general post-op recovery time, Hanley said most people begin to

The would-be donor might match the potential kidney recipient in another incompatible pair. And that's just what happened, three times, in the Tulane domino surgeries.



Dr. Anil Paramesh and Tamara Greer

feel like themselves again in about three weeks.

“People also want to know the health risks and how it might affect their lives—what should they be worried about?” Hanley said. “Typically, kidney donors are pretty healthy. They go through a big evaluation where we touch on a lot of different factors. If they develop diabetes or high blood pressure, we urge

them to keep it under control; we also caution them not to gain too much weight.”

**“A HAPPY THING”** Paramesh, who has already begun the process for the next three- or four-pair domino kidney transplants, noted, “I’m happy to be part of a very successful team—and we want to push the boundaries a little further.”

He joined the medical staff at Tulane after completing his general surgery residency at the North Oakland Medical Centers/Wayne State University in Michigan and a multi-organ abdominal transplant fellowship at the Mount Sinai School of Medicine in New York City. “I came eight months after Hurricane Katrina, because I wanted to be part of the rebuilding process,” he said.

During summer vacations from medical school, Paramesh’s father, a pediatrician in India, encouraged his son to see patients with him. “But I wasn’t into medicine,” Paramesh said. “I really liked surgery. The hospital where my dad worked also had a transplant unit, and I got to watch transplants of living donor kidneys there. They recover so well, and it’s such a happy thing to see families coming together that way. It’s a real special bond.”

That bond was on full display 10 days after the surgeries, when the three donors and three recipients met each other—some for the first time—at a reception at Tulane.

“I think we were all kind of nervous at first,” said Greer, the altruistic donor who started the whole process, “but soon it was like we were family who hadn’t seen each other in awhile.”

The young mother of Leighton, age three, also wants to be a role model. “When I was sick he didn’t understand it. But he’ll understand someday and maybe he’ll do the same thing.”

Paramesh reports that all six participants in the domino transplant are doing fine. Landry, who received a kidney, went back to work in two and a half weeks; Greer, who donated one, said she felt okay after 10 days.

“My advice to anybody considering donating is to go for it,” Greer added. “I have nothing negative to say. It’s not affected my emotional or physical life. In fact, it’s the best thing I’ve ever done.”

## BRIGHT FUTURES

**Tulane’s successful track record** stretches back to 1959, when surgeons completed the first New Orleans transplant of a kidney from a live donor. Its specialists perform 120 to 140 kidney transplants annually, including all the pediatric transplants in the state. Over the years, Tulane surgeons have performed over 3,000 life-saving liver, kidney, pancreas and intestinal transplants.

Dr. Joseph Buell, new director of the Tulane Abdominal Transplant Institute, outlined innovative plans for the group’s future.

“I come from a background of surgical oncology as well as transplantation,” said Buell, who has completed fellowships at the National Cancer Institute and the University of Chicago’s Pritzker School of Medicine. He was most recently division chief of transplantation surgery at the University of Louisville School of Medicine.

“We’re sitting in an area where we have a lot of medically underserved individuals at high risk of getting cancer and dying from it,” said Buell, citing high rates of hypertension and diabetes with ensuing renal failure in the African-American population in Louisiana, as well as relatively high rates of liver cancer in African-Americans and Vietnamese. “Our mission is to use kidney, liver and pancreas transplants to save lives.”

The institute is in the process of developing a liver cancer center at Tulane. “We’re starting to do more liver transplants,” Buell said, “and we’re using new, different kinds of treatment to keep tumors under control.” One example: the transplant lab is working with gold nanoparticles that specifically target liver tumors “like military smart-bombs.” If the cancer can be controlled, a transplant is possible.

The program also plans more “living-related” transplants that implant a portion of a healthy liver.

By August, Tulane surgeons had performed 10 pancreatic transplants. Pancreatic islet auto-transplantation is on the horizon for those with pancreatitis or other chronic diseases, Buell said. That process takes essential but dysfunctional islet cells from the patient, treating them in a lab and returning them to the pancreas a couple of hours later, ready to perform their functions effectively.

In kidney transplants, a “need chain” begun by an altruistic donor like Greer doesn’t have to have an end, said Buell. He added that Tulane researchers are working with drugs developed in the last year that can desensitize a patient and thus reduce the incidence of donor/recipient incompatibility.



# THE RIGHT PLACE TO



# FIGHT KIDNEY DISEASE

## TULANE MEDICAL CENTER IN TOP 50

BY KEITH BRANNON

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KIDNEY DISEASE  
PATIENT GERALD  
D'ARENSBOURG (LEFT),  
IN A PHOTO TAKEN BY  
HIS NEPHROLOGIST,  
DR. ERIC SIMON,  
PROFESSOR OF  
MEDICINE AT TULANE  
UNIVERSITY SCHOOL  
OF MEDICINE. AN  
ACCOMPLISHED  
PHOTOGRAPHER,  
SIMON WILL SOON  
RELEASE A BOOK OF  
HIS PORTRAITS OF HIS  
DIALYSIS PATIENTS.

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**F**ormer medic Gerald D'Arensborg, 49, returned to New Orleans from peacekeeping tours in the Middle East and South Africa only to begin his toughest battle—the one against kidney disease.

D'Arensborg has been on dialysis for 13 years. “I remember it like it was yesterday,” said D'Arensborg, who is also a musician. “They rolled me in the room with all the other dialysis patients and I was the youngest one there.”

D'Arensborg gets dialysis six days a week at home through a small portable machine the size of a desktop PC. He ultimately hopes to get a kidney transplant. “They are trying to set me up with a match,” he said.

For kidney patients like D'Arensborg, there's a bit of good news. In July, *U.S. News & World Report* ranked Tulane Medical Center one of the top 50 hospitals in the nation for the treatment of kidney diseases.

The hospital ranked 42nd in a survey of more than 1,600 facilities based on patient data from 2006-2008. Tulane's score is based on the program's excellent patient survival rate, high patient volume and the advanced treatment technologies offered by the hospital's physicians.

“We have a pretty well-known group of doctors in kidney diseases,” said nephrologist Dr. Lee Hamm, professor of medicine, the Harry B. Greenberg, M.D. Chair of Internal Medicine and executive vice dean of the School of Medicine. “I think it's one of the strongest programs in the school, but I'm biased.”

A former chief of nephrology and hypertension, Hamm is co-director of the Tulane Hypertension and Renal Center of Excellence.



NEW ORLEANS  
IS AMONG THE  
CITIES WITH THE  
HIGHEST RATES  
OF KIDNEY  
DISEASE IN THE  
COUNTRY.

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Tulane has recruited a seasoned team of nephrologists during the last decade. They are complemented by an active transplant division. Tulane's Abdominal Transplant Unit performs more than 130 kidney transplants per year and is one of the top 40 in the country in terms of patient volume, said Dr. Eric Simon, professor of medicine and section chief of nephrology and hypertension and D'Arensbourg's physician.

Simon explains that Tulane's growing reputation for kidney care is due to three additional advantages—a strong team of specialists in complementary fields of physiology, urology, kidney transplant and pediatric nephrology; multiple National Institutes of Health-supported translational research programs; and partnerships with the School of Public Health & Tropical Medicine that provide epidemiological research opportunities.

Tulane is also active in training the next generation of nephrologists, offering six accredited nephrology and hypertension fellowships and another in renal transplant.

### WINNING THE RACE AGAINST KIDNEY DISEASE

Slow and steady is how 52-year-old Tommy Barrett approached the 10K Crescent City Classic this past spring in his quest to get back into shape less than a year after getting a kidney transplant at Tulane Medical Center.

The retired technician, who was part of a crew that helped build the massive fuel tanks that propel the space shuttle into orbit 250 miles above the earth, set out to prove that he could push himself across the finish line after a 12-year battle against kidney disease. "I went very, very slowly. I wouldn't even call it running. It was a slow jog," he said, laughing. "But I was able to make the whole six miles!"

Barrett credits the team at Tulane Medical Center, especially Hamm, for getting him back to fighting form. "Dr. Hamm was definitely a life-saver. He cares about his patients," Barrett says. "He even gave me his personal cell phone number. And when he didn't think I was telling the truth about how I felt, he'd call my wife!"



Tommy Barrett, 52, ran the 10K Crescent City Classic this spring in his quest to get back into shape less than a year after getting a kidney transplant at Tulane Medical Center.

Thanks to Barrett's recommendation, Hamm was recognized by the National Kidney Foundation for outstanding patient care.

Roughly 26 million Americans have chronic kidney disease, according to the National Kidney Foundation. New Orleans has high rates of hypertension, diabetes and obesity—all risk factors that contribute to chronic kidney disease. The disease also has a disproportionate impact on minority populations, especially African Americans.

"New Orleans is among the cities with the highest rates of kidney disease in the country," Hamm said.

Tulane nephrologists typically follow up to 400 patients at any given time in clinics at Tulane Medical Center, University Hospital and the Veteran's Administration. This includes both those on dialysis and those trying to avoid it.

Tommy Barrett is proud of the fact that he was able to stay off dialysis for the duration of his treatment. "(Dr. Hamm) knew that was my biggest fear. I didn't want to have to quit working," he said. Barrett also wanted to stay active enough to keep up with his three young granddaughters.

Nephrology patients, who tend to be in their 50s or 60s, are typically followed in the hypertension clinic for several years before they need either dialysis or a transplant, Hamm said. With the advent of ACE inhibitors to regulate high blood

pressure, doctors are better able to manage the progression to end-stage renal disease, which requires patients to receive dialysis or a kidney transplant.

## BASIC SCIENCE, APPLIED KNOWLEDGE

Although most dialysis patients are older adults, Tulane also specializes in pediatric cases. In Louisiana, for every 700,000 people, one child goes on dialysis. Almost half need dialysis due to abnormal kidney development, said Dr. Samir El-Dahr, chairman of pediatrics at Tulane. He and a team of investigators consisting of Dr. Zubaída Saifudeen, assistant professor of pediatric nephrology, and Dr. Ihor Yosypiv, associate professor of pediatric nephrology, are leading \$3 million, five-year NIH studies looking into genes responsible for kidney development and malformation. “As clinician scientists, we want to know more about what causes these abnormalities. Once we know the genes involved and how they do it, then we may be able to develop a therapy for them,” he said.

So far, researchers have been able to pinpoint about 25 percent of the genes associated with abnormal kidney development. But El-Dahr thinks future advances in stem cell research and epigenetics could lead to therapies that would allow some of the youngest patients to avoid a kidney transplant.

The studies, which are the only NIH-funded kidney development programs in the state, are part of the Tulane

Hypertension and Renal Center of Excellence (THRCE), the university’s biggest research program related to nephrology. The center fosters interdisciplinary research in hypertension and related kidney and cardiovascular diseases, and is a major force in university-wide interdisciplinary research. “We focus on translational research by which basic science discoveries can provide us with a more comprehensive ability to diagnose high blood pressure and associated cardiovascular diseases, including chronic kidney disease caused by diabetes,” said Dr. L. Gabriel Navar, THRCE director.

Last year, the center received more than \$1.5 million in additional funding through the federal stimulus program to underwrite further research and to establish a core facility in phenotyping mice. By understanding the physiology and genetic expression of mice models, researchers hope to understand better how genes play a role in hypertension.

Tulane is also home to another large study that seeks to determine why kidney disease progresses in some but not all people with chronic kidney disease. Dr. Jiang He, epidemiology chair at the School of Public Health, is a principal investigator in the Chronic Renal Insufficiency Cohort Study, a national effort to examine risk factors for kidney and cardiovascular disease. The nine-year study follows approximately 3,600 individuals with chronic kidney disease at 13 sites across the country. More than 400 individuals in the New Orleans area are part of the study, which concludes in 2013. 🇺🇸

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## RESEARCH IN PROGRESS

Supported by two consecutive five-year NIH grants totaling \$22 million, the THRCE initiative funds research projects for junior faculty members, matching these investigators with a mentor team of senior scientists. Among the current participants:

**DR. KATHLEEN HERING-SMITH**, research assistant professor of medicine, who is studying how the kidneys regulate urinary citrate, a chemical that prevents calcium from causing kidney stones.

**DR. MINOLFA PRIETO-CARRASQUERO**, assistant professor of physiology, who is exploring the impact of salt consumption and other factors that affect the kidney’s regulation of the renin-angiotensin system during hypertension.

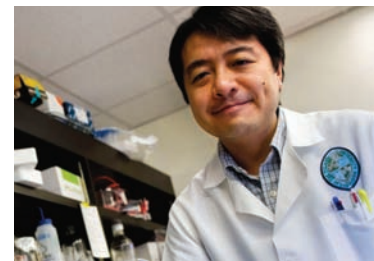
**DR. LYDIA BAZZANO**, assistant professor of epidemiology, who is comparing the long-term effects of low-carb versus low-fat diets on the risk factors for cardiovascular disease in obese adults. These risk factors include blood pressure, body weight and composition, serum lipids, plasma glucose, insulin, adipocytokines (adiponectin, leptin, resistin), and C-reactive protein.

**DR. JING CHEN**, associate professor of medicine and epidemiology, who is looking into the effects of endothelial dysfunction, adipocytokines and inflammation on the risk of chronic kidney disease.

**DR. WALTER LEE MURFEE**, assistant professor of biomedical engineering, who is exploring microvascular structural alterations during hypertension and their relationship to elevated blood pressure.

**DR. HIROYUKI KOBORI**, associate professor of physiology, who is developing a urine test for angiotensinogen, a protein marker that causes blood vessels to constrict. Excessive production of the hormone can lead to kidney disease. The test is useful because angiotensinogen is not an indicator of kidney disease but rather a predictor. “The whole idea is to catch it before it develops because once the progression starts, it’s very difficult to arrest it,” Dr. L. Gabriel Navar said.

**DR. KHALID MATROUGUI**, assistant professor of physiology, and **DR. IHOR YOSYPIV**, the new chief of pediatric nephrology, also carried out research as young investigators, supported by THRCE grants.



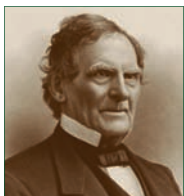
Dr. Hiroyuki Kobori

# 1834 *Society*



**T**he Tulane University School of Medicine expresses its deepest gratitude to the members of the 1834 Society. Named for the year the Medical College of Louisiana opened its doors, the 1834 Society is made up of those individuals who have demonstrated their deep love of Tulane through generous giving. These gifts help provide an exceptional academic experience for medical students by supporting scholarships and allowing the school to provide the latest in technology and facilities. Faculty and scientists are also able to continue and build their teaching and research, thanks to the support of our donors. The following list recognizes all alumni and friends who gave at the 1834 Society level between July 1, 2009 and June 30, 2010.



**PAUL TULANE CIRCLE****\$1,000,000 and up**

The university is named in honor of benefactor Paul Tulane, a wealthy merchant who donated more than \$1 million in land, cash and securities

“for the promotion and encouragement of intellectual, moral and industrial education.”

**THOMAS HUNT CIRCLE****\$500,000 to \$999,999**

A founder and the first dean of the Medical College of Louisiana, Dr. Thomas Hunt is the individual who recognized that “a close relationship with Charity Hospital

could provide ample clinical facilities and subjects for dissection — essential to the medical school’s success.”

**WARREN STONE CIRCLE****\$100,000 to \$499,999**

Dr. Warren Stone joined Dr. Hunt in the founding of the Medical College of Louisiana. The first commencement was April 5, 1836,

where 11 students graduated.

**JOHN H. HARRISON CIRCLE****\$10,000 to \$99,999**

John H. Harrison was the third doctor who assisted in founding the Medical College of Louisiana. He succeeded Dr. Hunt as dean of the college when

Hunt became president of the university. In 1834, all three founders were under the age of 26.

**TOBIAS G. RICHARDSON CIRCLE****\$5,000 to \$9,999**

Dr. Tobias Richardson is credited with assisting Hunt, who at that time was president of the university, in reopening

the Medical College after the Civil War. In 1877, Richardson led a move to increase the time to earn a medical degree to three years and to lengthen the school year.

**LINDA H. COLEMAN CIRCLE****\$2,500 to \$4,999**

In 1917, Dr. Linda Coleman achieved dual “firsts”: the first female graduate from Tulane School of Medicine and

the first woman to graduate medical school in Louisiana.

**RUDOLPH MATAS CIRCLE****\$1,500 to \$2,499**

Universally recognized as the “father of vascular surgery,”

Dr. Rudolph Matas graduated from the Medical College in 1880.

In the twilight of his long and illustrious career, Matas said of the Tulane Medical Department: “I have a feeling of affection and reverence for it, almost like that of a son for his mother, for it was the mother that opened the door of everything for me in medicine.”

**WARREN STONE CIRCLE****\$100,000 to \$499,000**

The Family of Jack R. Aron

Mrs. Catherine H. Edwards,  
*Newcomb* '72 and  
Mr. David F. Edwards,  
*BA* '71 & *L* '72

Dr. Selwyn Oskowitz

Mrs. Bertie Deming Smith

**JOHN H. HARRISON CIRCLE****\$10,000 to \$99,999**

Dr. and Mrs. A. Richard Adrouny,  
*MD* '78

Dr. Salpi Adrouny, *Newcomb* '67  
& *MD* '76

Dr. and Mrs. Ivan S. Altman,  
*MD* '49

The Family of Dr. Akira Arimura,  
*Residency* '61

Mrs. Anne M. Atzeff, *Newcomb* '96  
and Dr. Kristopher N. Atzeff,  
*MD* '97

Dr. and Mrs. Robert O. Begtrup,  
*MD* '66, *Residency* '70  
& *Fellowship* '71

\*Dr. N. A. Bologna, *MD* '44

Dr. Usha R. Bourgeois and  
Dr. Warren Bourgeois, *BS* '78,  
*MD* '82 & *Residency* '87

Ms. Nancy J. Bovee and  
Dr. Joel S. Saal, *MD* '80

Dr. Gwynn Akin Bowers,  
*PhD* '65

Dr. James R. Burnett, *MD* '79

Dr. John T. Burr, Jr

Dr. Curtis Webb Caine, Sr, *BS* '42,  
*MD* '44 & *Residency* '47

Mrs. Marsha L. DeBakey

Dr. Phillip J. Fagan, Jr, *MD* '69

Dr. Deborah A. Fein, *MD* '89  
and Dr. Doug A. Fein

Dr. Sarah Frates, *MS* '71 & *PhD* '72  
and Dr. Ralph Frates, *MD* '69

Dr. and Mrs. Ronald French,  
*MD* '63 & *Residency* '70

Dr. Thomas A. Graves, *BS* '58  
& *MD* '61

Ms. Adrea D. Heebe, *Newcomb* '76  
& *L* '79

Dr. and Mrs. John P. Hess III,  
*MD* '74 & *Residency* '78

\*Mr. Robert C. Hills, *BS* '32  
Mr. Daniel F. Housholder

Dr. Louise A. Box-Hutchinson,  
*Residency '56 and*  
Dr. Robert H. Hutchinson

Dr. and Mrs. Kenneth L. Janson,  
*MD '69, Residency '73 & '77*

Dr. Ulla Ule, *Newcomb '70,*  
*MD '73, Residency '76, Fellowship*  
*'81 & MBA '91 and*  
Dr. James D. Knoepp, *MD '71,*  
*Internship '72 & Residency '80*

Dr. Rouzbeh K. Kordestani,  
*MD/MPH '94*

Mrs. Sherry Marcus Leventhal,  
*L '77 and Mr. Alan M. Leventhal*

Dr. Mary Lupo, *Newcomb '76,*  
*MD '80 & Residency '84*

Dr. Howard I. Maibach, *BA '50*  
*& MD '55*

Dr. and Mrs. William G. Odom,  
*BS '48, MD '51 & Residency '56*

Mrs. Margaret P. Sullivan-Pace,  
*Newcomb '75 & L '88 and*  
Dr. Paul D. Pace, *MD '74*

Ms. Frances Petrocelli and  
Dr. Charles B. Wilson, *BS '51,*  
*MD '54, Residency '60*  
*& PhD '96*

\*Dr. Hubert L. Prevost, *MD '46*

Mr. Edmund E. Redd, *MBA '98*

Mrs. Maria Garcia Roach

Dr. Benjamin P. Sachs

Dr. Roger M. Sachs,  
*Internship '69*

Dr. Howard M. Sheridan,  
*MD '69*

\*Dr. Scott C. Searfoss

\*Dr. Gene L. Usdin, *BS '43,*  
*MD '46, Residency '51*

Mr. William H. West

Dr. J. Richard Williams, Jr.,  
*MD & MS '65*

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*BS '77 & MD '81*

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Dr. Carolyn M. Clawson, *MD '57*

Dr. James R. Doty, *MD '81*

Mrs. Darla Rushing Durham

Dr. N. Robert Elson, *BS '74*  
*& MD '79*

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*MD '80*

Dr. and Mrs. Steven J. Eskind,  
*MD '77*

Dr. David Farhadi, *MD/MHA '92 &*  
*Residency '96*

Dr. Harold L. Flatt, *MD '56*

Dr. Karen Gordon Francis, *MD '81*  
*& Residency '84 and*  
Dr. David Francis

Mrs. Marian M. Gutowski, *BS '80*  
and Dr. W. Mark Gutowski,  
*MD '82*

Dr. L. Lee Hamm

Mr. Ford T. Hardy, Jr., *L '76*

Dr. and Mrs. Monte E. Ikemire,  
*MD '73*

\*Dr. Margaret Strange Klapper,  
*Newcomb '35 & MD '39*

Dr. Cheryl Leone, *Newcomb '66*  
*& MD '69 and Dr. Philip G.*  
*Leone, Jr., BA '64 & MD '68*

Dr. Gordon P. Marshall, *MD '87*

Ms. Elsie Brupbacher Martinez,  
*Newcomb '48*

\*Mr. John L. Martinez, *BS '43*

Dr. and Mrs. John F. Moffett,  
*BS '58, MD '61 & Residency '67*

Dr. and Mrs. Gary C. Morchower,  
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Dr. Lester N. Ploss, *MD '52*

\*Dr. J. William Rosenthal, *BS '42*  
*& MD '45*

Dr. Charles W. Rossner, *MD '67,*  
*Internship '68 & Residency '74*

Dr. Emily Rostlund, *MD '09 and*  
Mr. Olof Rostlund

Dr. Carl B. Rountree, *BA '67,*  
*MD '70, Internship '71*  
*& Residency '74*

\*Dr. Owen Royce, Jr., *MD '35*

Dr. G.J. Walker Smith, *BA '61*  
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Dr. Robert J. Card, *MD '74*

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\*Dr. Jonathan Y. C. Ching,  
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Dr. and Mrs. Alfred J. Colfry,  
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Dr. Domenick Enzo Cover, *BS '77*  
*& MD '81*

\*Dr. Fernand J. Dastugue, Jr., *BS '41,*  
*MD '44 & Residency '50*

\*Dr. Thomas M. Doody,  
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Dr. John L. Dupre, *BS '75*  
*& MD '79*

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Dr. and Mrs. Zelig H. Lieberman,  
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Dr. and Mrs. Dexter Louie, *MD '69*  
*& Residency '76*

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Dr. Verre Simpson Picard,  
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*& MSW '89 and*  
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*& Internship '70*

Dr. Patti Jayne Ross, *MD '72*

Dr. Louise H. Saik, *PhD '81 and*  
Mr. Clifton J. Saik

Dr. and Mrs. Richard M. Saroyan,  
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Dr. A. Kent Seale, *MD '66*

Dr. John G. Simmons, *MD '73*  
*& Residency '77*

Dr. and Mrs. William P. Stallworth,  
*MD '59*

Dr. and Mrs. Szabolcs Szentpetery

Dr. Michael A. Teague, *MD '70*  
*& Residency '74*

Mrs. Teresa S. Trainor

\*Dr. Stephen J. Uman, *MD '69*  
*& Internship '70*

Mr. Adam S. Weiner

Ambassador and  
Mrs. John G. Weinmann,  
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*'81, MD '85 & Residency '89*

Dr. Thomas M. Beck, *MD '67*

Dr. Colleen P. Begley, *MD/MPH '00*

Dr. and Mrs. Herbert S. Bell,  
*MD '53*

Dr. Kenneth J. Bennett, *MD '65,*  
*Internship '66, Residency '67*

The Honorable Janet G. Berry, *L '80*  
and Dr. David P. Berry, *MD '75*  
*& Residency '81*

Dr. Joseph O. Billig, *BS '87*

Dr. Lisa D. Blankenship, *MD '97*

Dr. Karen R. Borman, *MD '78*

Dr. Patrick C. Breaux, *MD '66,*  
*Internship '67, Fellowship*  
*& Residency '73*

Dr. Charles W. Brice, Jr., *MD '50*

Dr. L. Maximilian Bujar, *MD '67,*  
*MS '68 & Internship '68*

Dr. Wade W. Burnside, Jr., *BS '51*  
*& MD '54*

Dr. Arthur A. Caire IV, *MD '70*

Dr. Martin D. Claiborne III,  
*MD '75 & Residency '79*

Dr. and Mrs. John R. Clifford,  
*MD '66 & Internship '67*

- Dr. Carmel J. Cohen, *MD* '58  
Mrs. Deborah C. Conery,  
*Newcomb* '49  
Mrs. Jane Corcoran, *MS* '70 and  
Dr. Robert J. Corcoran,  
*MD* & *MS* '70  
Dr. Karen J. Cove, *MD* '68  
Mrs. Shirley Louise Dastuge  
Mr. Leonard A. Davis, *L* '84  
Dr. Diane J. Deveines, *MD* '76  
Mr. Victor A. Dubuclet III, *L* '74  
Dr. Melody Carter-Ellis,  
*Newcomb* '77 & *MD* '81  
and Mr. Curtis Ellis  
Ms. Linda Elson  
Dr. Hayden O. Evans, *MD* '70  
Dr. Robert J. Fieldman, *MD* '81  
Dr. Paul T. Finger, *BS* '78 & *MD* '82  
Dr. Brian G. Firth  
Dr. Frank J. Fischer III, *MD* '96  
& *Residency* '00  
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Dr. Leo G. Horan, *BS* '47,  
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& *Residency* '57  
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*MD* '60  
Dr. Harry C. Frye, Jr, *MD* '51  
Mr. and Mrs. Michael J. Gallagher,  
*BS* '74  
Dr. White E. Gibson III, *MD* '60,  
*Fellowship* '67 & *Residency* '69  
Mrs. Gail Hahn Gold, *Newcomb* '80  
and Dr. Robert S. Gold, *BS* '78  
& *MD* '82  
Mrs. Terry A. Goldfarb, *ME* '76 and  
Dr. Paul M. Goldfarb, *MD* '78  
Ms. Rebecca Goodwin and  
Dr. Michael W. McDonald,  
*MD* '74  
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& *MD* '74  
Dr. and Mrs. Kurt Grozinger  
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& *Residency* '84  
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Dr. and Mrs. Roger E. Kelley,  
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Dr. Ronald H. Killen, *MD* '79  
Dr. W. Howard Kisner, Jr, *BS* '61  
& *MD* '65  
Dr. Elliot H. Klorfein, *BA* '51  
& *MD* '55  
Dr. Sam S. Krengel, *BS* '83  
& *Residency* '94  
Dr. Nan V. Heard, *Newcomb* '75,  
*MD* '85 & *Residency* '87 and  
Dr. Paul A. Krogstad, *MD* '84  
& *Residency* '87  
Dr. Saul F. Landry, Jr, *BS* '47  
& *MD* '50  
Ms. Louise Lepie, *MA* '74 and  
Dr. Joel S. Cohen, *MD* '73  
& *Internship* '74  
Dr. and Mrs. David S. Light, *BS* '42  
& *MD* '44  
Dr. Vicki W. Light, *MD* '83 and  
Dr. Andrew I. Light, *MD* '83  
Dr. Mary B. Lobrano, *MD* '94  
and Mr. Jerry Lobrano, *BA* '90  
& *L* '93  
Dr. Ann L. Lovitt, *MD* '73  
Dr. Penelope K. Manasco, *MD* '84  
& *Residency* '86  
Dr. Willard Lee Marmelzat, *BS* '41  
& *MD* '44  
Dr. William Y. McDaniel, Sr,  
*MD* '52 & *Residency* '57  
Dr. James T. McIlwain, *BS* '58,  
*MD/MS* '61  
Dr. Gwenesta B. Melton, *MD* '79  
and Dr. Kenneth Melton,  
*MD* '78  
Dr. Caren F. Mikesch, *MD* '99  
Dr. Frank J. Morgan, Jr, *MD* '47  
Mrs. Jane H. Morgan, *Newcomb* '58  
and Dr. Cecil Morgan, *BA* '54  
& *MD* '59  
Dr. James B. Moss, Jr, *BS* '47,  
*MD* '51 & *Residency* '55  
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Mrs. Elizabeth S. Nalty  
Dr. and Mrs. Howard A. Nelson,  
*MD* '62 & *Fellowship* '69  
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Dr. and Mrs. Thomas E. Niesen,  
*BS* '75 & *MD* '79  
Dr. and Mrs. Benjamin Okel,  
*BS* '51 & *MD* '55  
Dr. Andrew Orestano, *BS* '49  
& *MD* '55  
Mrs. Lynn P. Perez, *MBA* '84  
Dr. and Mrs. Charles Pinkoson,  
*MD* '45, *Internship* '46  
& *Residency* '51  
Dr. Mahlon P. Poche, Jr, *MD* '91  
& *Residency* '92  
Mr. Richard H. Polchow, *BA* '72  
& *MBA* '74  
Mr. and Mrs. M. Cleland  
Powell III, *BA* '70  
Dr. and Mrs. Ronald Quinton,  
*MD* '76  
Dr. Louis E. Ridgway III,  
*MD* '84  
Dr. Mildred R. Ridgway,  
*Newcomb* '92 & *MD* '98  
Ms. Arlene M. Rockefeller and  
Mr. Rudy F. Riedl, Jr  
Dr. Leonard J. Rolfes, *BS* '48  
& *MD* '51  
Dr. and Mrs. Michael J. Rooney,  
*MD* '77 & *Residency* '81  
Dr. Natasha Sands, *MD* '98  
and Dr. Kenneth C. Sands,  
*MD* '96  
Dr. and Mrs. Allen E. Saxon,  
*MD* '75  
Dr. John C. Scharfenberg, *MD* '63  
& *Residency* '71  
Dr. James H. Scheu, *MD* '76  
Ms. Anagha Sen  
Dr. I. William Shiraki, *MD* '60  
Dr. and Mrs. John M. Snodsmith,  
*MD* '70  
Dr. and Mrs. Charles M. Stedman,  
*MD* '76  
Mrs. Louanne W. Stephens, *MA* '68  
and Dr. Michael K. Stephens,  
*MD* '67  
Dr. Roger C. Suttle, Jr, *MD* '63  
& *Internship* '64  
Dr. Palmer J. Texada, *BS* '56,  
*MD* '59 & *Residency* '65  
Dr. and Mrs. Henry K. Threefoot,  
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Dr. Sam A. Threefoot, *BS* '43,  
*MD* '45 & *Fellowship* '50  
Dr. Mitsuo Tottori, *MD* '55,  
*Internship* '56, *Residency* '60  
& *Internship* '61  
Dr. James W. Vildibill, Jr, *MD* '48,  
*Internship* '49 & *Residency* '53  
Mrs. Margaret R. Vizzi  
Dr. David W. Wall, *BS* '54, *MD* '55,  
*Residency* '57 & *Fellowship* '64  
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Dr. and Mrs. Ted Chau-po Wei,  
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*MD* '58, *Fellowship* '61  
& *Residency* '62  
Dr. and Mrs. C. Mark Whitehead,  
*MD* '66  
Dr. Cornelius G. Whitley, *BS* '49  
& *MD* '53  
Dr. Albert H. Wilkinson III,  
*MD* '84  
Mrs. Carolyn H. Winder, *MPH* '92  
and Dr. Carey E. Winder, *BS* '85,  
*MD* '89 & *Residency* '94  
Dr. Paul R. Winder, *BS* '53 &  
*MD* '56  
Dr. Daniel K. Winstead  
Dr. Jean Ying-Chang, *MD* '92  
Mrs. Lina A. Young, *BS* '86 and  
Mr. Ellis Young  
Dr. Stanley Ziomek, *MD* '81  
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*Newcomb* '72 & *MSW* '74  
and Dr. Michael Zoller, *MD* '72  
Dr. and Mrs. David S. Zorub,  
*BA* '66 & *MD/MS* '70

\*Denotes deceased donor

#### IF YOU WOULD LIKE TO JOIN THE 1834 SOCIETY OR HAVE ADDITIONAL QUESTIONS, PLEASE CONTACT:

Julie LeFebvre  
Director of the Tulane Fund, School of Medicine  
Office: 504-247-1834  
Email: jlefebvr@tulane.edu



## 60 ROCKS!

The Class of 1960 met on the Medical Center campus on October 9 for the group's 50th reunion. It is an accomplished and entertaining cohort of physicians! Here we profile the two winners of the Tulane Medical Alumni Association Lifetime Achievement Awards.

### Dr. Alfred W. Brann Jr. Pediatrics, Atlanta

Dr. Brann is professor of Pediatrics and Gynecology/Obstetrics at the Emory University School of Medicine, with specialties in neonatal/perinatal medicine and child neurology; professor of Global Health at the Rollins School of Public Health at Emory University; and director, World Health Organization Collaborating Center in Reproductive Health in Atlanta, a post he has held since 1981. With a mission in both domestic and international health in the broad areas of reproductive health and prenatal care, the center focuses specifically on reducing preterm births and preventing developmental disabilities.

After completing a pathology internship and pediatric residency at Vanderbilt University and child neurology residency at the University of Virginia and Massachusetts General Hospital, Brann was a senior surgeon in the U.S. Public Health Service, Laboratory of Perinatal Physiology, National Institute



of Neurological and Communicative Disorders and Stroke, where his research influenced the understanding and treatment of fetal and neonatal hypoxic-ischemic encephalopathy. He also co-authored the first *Guidelines for Perinatal Care*, a joint AAP-ACOG publication, now in its sixth edition.

Brann directed the Divisions of Neonatal/Perinatal Medicine at the University of Mississippi Medical Center in Jackson, developing a rural regional neonatal referral network, and at Emory University School of Medicine in Atlanta, developing a statewide regional perinatal health care delivery system in Georgia. He has also served as the Hobbs-Recknagel Professor and Chair of Pediatrics at the University of Oklahoma Health Sciences Center, and as director of the Children's Hospital of Oklahoma and its statewide healthcare referral network for children.

Brann was honored with an endowed chair in 2008: The Alfred W. Brann Jr. Chair in Reproductive Health and Perinatal Care, designated for the WHO Collaborating Center in Reproductive Health.

### Dr. Raoul Rodriguez Orthopaedics, New Orleans



Dr. Rodriguez chairs the orthopaedics department at Tulane University, a position he has held since 2004. Rodriguez has practiced general orthopaedics in the New Orleans area, since 1965, first in a solo practice and since 1978 as a professor and part of the Tulane University Faculty Medical Group.

For the last 15 years, he has restricted his practice to foot and ankle surgery. He has been board-certified in orthopaedic surgery since 1968, a member of the American Academy of Orthopaedic Surgeons since 1970 and the American Orthopaedic Association since 1982.

After completing an internship and residency in orthopaedic surgery at the University of Michigan, Rodriguez returned to New Orleans and was invited by Dr. Jack Wickstrom to join the orthopaedic department at Tulane. He started as an instructor, was promoted to assistant and later associate professor by 1971.

From 1971-78, he organized the orthopaedic departments at Methodist Hospital in New Orleans and East Jefferson General Hospital in Metairie. He was president of the medical staff at East Jefferson General Hospital in 1973 and served as president of the Jefferson Parish Medical Society in 1974.

He served as president of the Tulane Caldwell Orthopaedic Alumni Society in 1975; received the J. Elmer Nix Ethics Award from the Clinical Orthopaedic Society in 2000 and was awarded the Galvez Cup by the Hispanic Heritage Foundation of New Orleans in 2008.

Rodriguez married Mari Vallhonrat in Havana, Cuba on September 23, 1960. Among their five children are two orthopaedists—sons Ricardo and Ramon.

### SEND NEWS !

Tulane Medicine seeks news and notes about alumni of the medical school, as well as faculty members and "alumni" of the Tulane Residency programs. Please send your news to [mednotes@tulane.edu](mailto:mednotes@tulane.edu).



## FACULTY HONORS



**Dr. Ramesh Ayyala**, professor of ophthalmology, received the 2010 Parker J. Palmer Courage to Teach Award from the Accreditation Council for Graduate Medical Education. It is awarded to the 10 most outstanding

program directors. Ayyala is director of the glaucoma service and director of the residency program and the glaucoma/anterior segment fellowship program.



**Dr. Kevin Krane**, professor of medicine and vice-dean for academic affairs, was presented with the Career Educator Award during the Spring 2010 Southern Group of Educational Affairs meeting. The award from

this division of the Association of American Medical Colleges recognized his significant lifetime achievements in medical education.



**Dr. Marilyn Li**, director of the Hayward Genetics Center's molecular and cytogenetic labs and associate professor of pediatrics, received the 2010 Luminex-American College of Medical Genetics Foundation

Award for promoting safe and effective genetics testing and services. The award comes with a \$100,000 grant to support her project. "Dr. Li has brought state-of-the-art molecular diagnostics to Tulane and our region. Her genetic expertise is singular and unique in the Gulf South," said Dr. Hans Andersson, director of the Hayward Genetics Center. "This national award recognizes her innovative application of microarray genomic

analysis to cancer diagnostics, which is developing a database to allow clinicians to personalize therapies for individuals with cancer."



**Dr. Miguel Melgar**, associate professor of neurosurgery, is part of a "Multiuniversity Project for the Research, Teaching and Promotion of Microsurgery and Cerebral Revascularization" that involves Tulane

and five European medical schools. The group sponsored a workshop on basic techniques in Vienna in September.



**Dr. Alina Oltenau**, head of the section of community pediatrics and global health, and the medical director of the New Orleans Children's Health Program, is the recipient of a 2010 American Academy of Pediatrics Local Heroes Award, which

recognizes pediatricians who epitomize the "community pediatrician" as demonstrated by the work they do in their local communities.



**Dr. Felix "Buddy" Savoie**, Lee C. Schlesinger Professor of Orthopaedics, was elected president of the Arthroscopy Association of North America. The organization of surgeons is dedicated to advancing arthroscopic

surgical knowledge throughout the world to improve on the diagnosis and treatment of diseases and injuries of the musculo-skeletal system. He is chief of the division of sports medicine at the Tulane University School of Medicine.

**'45 Dr. Sam Threefoot** (A&S '43) has published *The Quest* (XLibris). The novel follows the path of an elderly widower who, having mourned the loss of his wife for two years, decides to seek a companion. The settings of his adventures include a singles bar, the zoo, a museum, a high school class reunion, Mardi Gras, a ballgame, a Caribbean cruise and a tour of New Orleans.

**'62 Dr. H. Kent Beasley** is a clinical professor of mechanical engineering at the University of Texas. He teaches clinical cardiology to graduate engineering students in the developing field of cardiology engineering and continues his private practice in preventive and noninvasive cardiology in Austin, Texas.

**'64 Dr. Charles P. O'Brien** (A&S '61, G '66) received the 2010 College on Problems of Drug Dependence Mentorship Award, which recognizes a person who is especially influential in the development of careers of young addiction-research scientists. O'Brien is the Kenneth Appel Professor at the University of Pennsylvania/VA Medical Center, vice chair of psychiatry at the University of Pennsylvania, vice director of the Institute of Neurological Science and director of

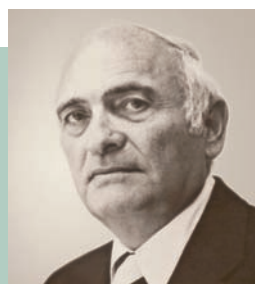
the Center for Studies in Addiction. He is past chief of psychiatry at the Philadelphia VA Medical Center. O'Brien has published over 500 publications on the nature of addiction disorders and on treatments for those disorders. He also received the Gold Medal Research Award from the Society of Biological Psychiatry this year. The College on Problems of Drug Dependence is the largest and oldest organization for the scientific study of drug dependence and addiction.

**'71 Dr. Randolph Howes** lectured at the Johns Hopkins Biennial Surgery Meeting on "Anti-Aging and Oxygen Radical Mythology," at Kansas University Medical Complex on "The Fall of the Free-Radical Theory" and at Creighton University Medical School on "Antioxidant Vitamins A, C and E and Oxygen Free-Radical Mythology." He has placed more than 3,000 pages of his referenced free e-books online at [www.iwillfindthecure.org](http://www.iwillfindthecure.org). His latest book, *Antioxidant Vitamins A, C & E in the 21st Century: Death in Small Doses*, will be published by Trafford. The compilation spans more than three

decades and 181 scientific studies (with more than eight million human participants), which Howes says show either no effect or harmful effects of these common antioxidant vitamins.

## IN MEMORIAM

**D**r. Lesley I. Lukash (44, A&S '42), who served as president of the Tulane Medical Alumni Association in 1977-78, died on August 16, 2007 in Manhasset, N.Y. He was 86. Dr. Lukash helped identify the corpse of Josef Mengele, the Nazi doctor; performed 5,000 autopsies himself; and oversaw as many as 50,000 more in over four decades as the medical examiner of Nassau County, NY. Among his survivors are two physician-children who are also graduates of Tulane University School of Medicine: Dr. Frederick Lukash ('73, A&S '69), a plastic surgeon, and Dr. Barbara Lukash ('76), a dermatologist. Both live in the New York metropolitan area.



## ALUM HEADS ONCOLOGY SOCIETY

**D**r. George W. Sledge Jr ('77), a pioneer in the development of novel therapies for breast cancer, is the new president of the American Society of Clinical Oncology (ASCO).

"Being elected to serve as ASCO president is an honor and a privilege," Sledge said. "I look forward to working with my colleagues on the Board of Directors to support all types of cancer research and address the challenges of the modern-day practice of oncology. ASCO institutes real change by uniting all members of the oncology community with the common goal of improving cancer care and prevention and ensuring that all patients with cancer receive the highest quality care."

Sledge is the Ballve-Lantero Professor of Oncology and Professor of Pathology and Laboratory Medicine at the Indiana University Melvin and Bren Simon Cancer Center. He joined Indiana University in 1983, after completing his residency at St. Louis University and his fellowship at the University of Texas, San Antonio. His research interests include molecular and tumor biology, growth factors and anti-angiogenic therapy related to breast cancer.



Photo courtesy of Indiana University

**'78 Dr. Edward "Ned" Hallowell** taught a course called "Unwrapping the Gifts: A Strength-Based Approach to ADHD Across the Lifespan" this summer at the Cape Cod Institute.

**'82 Dr. Shelly P. Baumann** has been inducted as a Fellow in the American Society of Radiologists. She is a staff radiologist at Radiology Associates of Tampa and a clinical associate professor in the Department of Radiology at the University of South Florida.

**'90 Dr. Dana H. Smetherman** has been inducted as a Fellow in the American Society of Radiologists. She is associate chair for clinical affairs and section head of breast imaging at Ochsner Health System in New Orleans.

**Dr. Donnelly Wilkes** is a retired Navy medical officer and recipient of the Navy Commendation Medal with Combat Valor. Now in private practice in Conejo Valley, CA, he served two tours in Iraq and was featured in a Pulitzer Prize-winning photograph taken by the Associated Press.

**'03 Dr. Camil Sader (R, General Surgery)**, an established general and laparoscopic surgeon in the Boca Raton, FL, area, is married to **Dr. Tatiana Lee-Chee (R, Ophthalmology, '02)**, who has a booming ophthalmology and refractive surgery practice in the same area. The duo have developed an iPhone app called Dr. Rounds Plus. The app helps physicians with their daily rounds. "It's been quite an asset for us personally," Sader said, "as it initially was a project that we wanted to adapt for personal use only. But since it was so good, many physician colleagues requested to use it too—therefore the public distribution." Details of the app can be found on the website [www.drrounds.com](http://www.drrounds.com).

**'05 Dr. Bill Brunner (R, Surgery)** has returned from a 9 ½ month deployment to Djibouti, Africa, as the Senior Medical Officer and General Surgeon for Expeditionary Medical Facility—Djibouti in support of the Combined Joint Task Force—Horn of Africa. He assisted a local Djiboutian surgeon at Peltier General Hospital in Djibouti City with 118 surgical cases covering a wide variety of general surgery, laparoscopy, urology and trauma. He has returned to Naval Hospital Camp Pendleton and resumed his position as department head for general surgery. He was inducted as a Fellow in the American College of Surgeons (in absentia) at the Annual Clinical Congress in October 2009.

## In Memoriam

- '40 Dr. Jack M. Simmons Jr.
- '44 Dr. N. A. Bologna  
Dr. Morton B. Morgan  
Dr. William J. Tally
- '45 Dr. Jack Frankel
- '46 Dr. Erle W. Harris Jr.  
Dr. Warren H. Higginbotham  
Dr. W. Lyall Howell Jr.
- '47 Dr. Richard Choon B. Ko
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- '82 Dr. Chris T. Davies
- '86 Dr. Kelvin P. McDaniel
- '03 Dr. Manish Jain

### CONTINUING MEDICAL EDUCATION

**T**ulane University School of Medicine's Center for Continuing Education has announced its schedule of fall courses, all of which are held in the New Orleans area. For more information and online registration, please visit [tulane.edu/cce](http://tulane.edu/cce) or call 504-988-5466.

#### ■ OCTOBER 23

New & Evolving Paradigms  
in Hematology & Cancer Care:  
What the Internist Needs to Know

#### ■ NOVEMBER 5-6

Future Directions for Neurology  
in the New Healthcare System

#### ■ NOVEMBER 6

Fetal Cardiac Echo  
Symposium

#### ■ DECEMBER 3-4

Brain and Behavior

The group has also scheduled the Third Symposium on Thyroid & Parathyroid Diseases for March 19-20, 2011, in New Orleans.



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