BIOLOGICAL BUBBLE WRAP
New insights on protecting children at the genetic level

THE FIX
A RICH PAST
In this issue of Tulane Medicine, we are reminded of the prestigious past of Tulane University School of Medicine. Profiled is the Department of Surgery, a founding department of the school and one that boasts connections to numerous innovations and some of the most famous names in surgery.

Although Tulane School of Medicine owes much to its history and tradition, I am excited to be part of a community that is looking toward the future. This spirit of innovation is defining our new vision of what the medical school can look like. You will read in this issue about the groundbreaking work of Dr. Stacy Drury and her research on health outcomes for children (see page 8). Her work will change how we look at stress and environmental conditions for children.

“We cannot look to our future without reflecting on our past.”

Our faculty and staff have been working diligently on a strategic planning process that asks tough questions and identifies opportunities. Through extensive collaboration, research and hard work, we are developing a plan for the future of the medical school that will help us navigate the changing world of academic medicine and an uncertain future in health care. You can keep updated on exciting developments at tulane.edu/som/strategic-planning. I hope to share our finalized plan in the next issue of Tulane Medicine.

The university is also looking to the future as we welcome our new president, Michael A. Fitts, currently dean and Bernard G. Segal Professor of Law at the University of Pennsylvania (see page 2). Fitts will begin his term on July 1, when current President Scott Cowen steps down after 16 years of service.

I look forward to welcoming President-elect Fitts to Tulane, and I am excited about working with him on the future of Tulane School of Medicine.

L. Lee Hamm, MD
Senior Vice President of Tulane University
Dean of the School of Medicine
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Michael A. Fitts, dean and Bernard G. Segal Professor of Law at the University of Pennsylvania, has been named the 15th president of Tulane University. Fitts will begin his term on July 1, when current President Scott Cowen retires after 16 years of service.

A native of Philadelphia, Fitts earned a bachelor of arts from Harvard University in 1975. Inspired by the film *To Kill a Mockingbird* and its heroic protagonist, attorney Atticus Finch, Fitts enrolled in law school at Yale University. He became an editor of the *Yale Law Journal* and earned his juris doctor in 1979. Fitts began teaching at Penn in 1985 after serving as a clerk for civil rights advocate Judge Leon Higginbotham and as an attorney in the U.S. Justice Department’s Office of Legal Counsel. He was named law dean at Penn in 2000.

Under Fitts’ deanship, Penn Law has become a national leader in cross-disciplinary legal education, with 35 degree and certificate programs offered in partnership with other divisions of Penn, including its business and medical schools. He also increased the law school’s endowment by more than 250 percent, grew the number of law faculty by 40 percent and doubled all forms of student financial aid. Further, he created partnerships with institutions from Bangalore to Beijing and expanded public service opportunities for students and graduates.

Although he has spent his career in law, medicine is not unfamiliar territory for Fitts. He comes from a line of physicians. His grandfather was an internist in Jackson, Tenn., who trained at the Mayo Clinic, and his father, Dr. William T. Fitts Jr., was a master of trauma surgery and a visionary in trauma care. Dr. Fitts served as chairman of the Department of Surgery at the University of Pennsylvania School of Medicine from 1972-75. The American Association for the Surgery of Trauma established an annual lectureship in his father’s name and the Hospital of the University of Pennsylvania built the William T. Fitts Jr. Surgical Education Center in Dr. Fitts’ honor.

“I was brought up by a physician whose vision and accomplishments in the field of trauma surgery inspired me with a deep appreciation for the enormous good medicine does in the lives of individual patients, and for the health of our society,” says Fitts. “Because of my background, I understand how vitally important it is to support the mission of an academic medical center, and I look forward to working with Dean Hamm to ensure that Tulane School of Medicine thrives in a changing healthcare environment.”

**NFL AND TULANE UNIVERSITY TEAM UP ON NEW PROGRAM**

Tulane University School of Medicine has partnered with the NFL Players Association to provide medical services for The Trust, a new support program for former players, with an emphasis on overall health and successful transition from professional football.

The Trust’s staff counsels players through a wellness plan across six pillars: Brain and Body Health, Career Transition and Development, Education and Entrepreneurship, Financial Literacy, and Personal Interaction. The School of Medicine, including the Tulane Institute of Sports Medicine, along with the Cleveland Clinic and the University of North Carolina, have been tapped to provide medical evaluations and care as part of The Trust’s Brain and Body program.

“We are excited about the opportunity to help take care of former players who have given so much in their athletic careers,” says Dr. Gregory Stewart, executive director of The Trust program at Tulane University. “We’ll be a resource for full head-to-toe medical evaluations and ongoing support from a team committed to helping them develop and maintain a healthy brain and body.”

“Together with our partners, our staff and former player leadership, we can begin to address the important issues that face NFL players when they transition out of professional football,” says Bahati Van Pelt, The Trust executive director.
Students from Tulane University School of Medicine are the first to participate in a pilot rotation program designed to provide third- and fourth-year medical students a lens into the pharmaceutical industry at the Indianapolis headquarters of Eli Lilly and Co.

The rotation assignments cut across different aspects of the pharmaceutical company’s business—from drug discovery and development to bioethics and patient safety.

“Students participating in the program will get hands-on knowledge of the many roles physicians play in the pharmaceutical industry,” says Dr. Marc J. Kahn, senior associate dean for admissions and student affairs. “The partnership between L3ly and Tulane matches L3ly’s commitment to medical education with Tulane’s passion for providing exciting educational experiences for our students.”

Tulane has the country’s largest combined MD/MPH program, a successful MD/MBA program and a program in medical innovation. Combined with L3ly’s reputation as a leader in the pharmaceutical industry, that makes the partnership a natural one, Kahn said.

“We’re excited to kick off the Medical Student Rotation Program,” says Yolanda Johnson-Moton, director of external relations for L3ly’s U.S. Medical Division. “The students selected for this program distinguished themselves, both academically and during the interview process.”

The program is intensive and exposes the future practitioners to various scientific and medical phases of the drug development process, along with a holistic view of the company.

“Students have a unique vantage point and opportunity to work alongside some of the most talented healthcare professionals in the industry, including physicians, and understand their important roles in our organization,” Johnson-Moton says.

The Medical Student Rotation Program is a four-week experiential learning program with a student-centric curriculum and structured mentorship in various aspects of pharmaceutical development. It includes independent projects, industry-led workshops, exposure to many facets of drug discovery and development, and networking opportunities with L3ly medical leaders.

FAT STEM CELLS BOOST BREAST CANCER TUMORS

Tulane University researchers have found that fat stem cells obtained from obese women lead to greater cancer cell growth than fat cells from non-obese women. The findings are from a new study focusing on the impact of fat stem cells from different parts of the body on the growth of breast cancer tumor cells.

The Tulane team obtained adipose (fat) stem cell samples from women who had undergone liposuction. They collected cells from different parts of the donors’ bodies—some from the abdomen and others from a non-abdominal region—and from both obese and non-obese women.

Researchers cultivated the cell lines together with breast cancer cells and then injected them into mice. The mice were also given estrogen pellet implants. When they analyzed tumors from the samples, researchers found greater cancer cell growth in mice with fat cells from obese women than from non-obese women, and even greater growth from the abdominal fat cells of obese women. When fat stem cells are exposed to estrogen, signals boost the production of the hormone leptin, in turn stimulating tumor growth, say the researchers.

Dr. Bruce A. Bunnell, director of the Tulane Center for Stem Cell Research and Regenerative Medicine and lead author on the study, says, “This study demonstrates that the site of origin and body mass index alter the characteristics of human fat stem cells and their role in cancer progression.”

“Targeting the signaling pathway that activates leptin production could lead to new methods for breast cancer treatment in obese patients, according to Bunnell.”

“This study demonstrates that the site of origin and body mass index alter the characteristics of human fat stem cells and their role in cancer progression.”

–DR. BRUCE A. BUNNELL
Tulane University researchers are participating in an international five-year study testing whether low doses of aspirin can help older people live well for longer by delaying the onset of illnesses. The ASPREE, or ASPirin in Reducing Events in the Elderly study, is funded by the National Institute on Aging, one of the National Institutes of Health. About 19,000 people in both the United States and Australia will take part in the study. In the United States, approximately 2,500 people will be enrolled at 35-40 sites.

Leading the Tulane study center are Dr. William Robinson III, principal investigator of the Minority-Based Community Clinical Oncology Program, and co-principal investigator Dr. Eboni Price-Haywood, associate professor of clinical medicine in the section of General Internal Medicine and Geriatrics.

Earlier studies have shown that low doses of aspirin reduce the risk of stroke and heart attack in middle-aged people and may prevent some forms of cancer and cognitive decline (i.e., thinking problems, such as memory loss and dementia). However, it remains unclear if the overall benefits of aspirin in older people are greater than the risks, such as bleeding.

The Tulane center is seeking to enroll African American and Hispanic men and women 65 years old and up, and members of other ethnicities 70 years old and up. Participants will take either a low-dose aspirin tablet or placebo tablet for a period of five years. All participants will receive annual check-ups tracking key measurements of their health and well-being.

“The ASPREE trial will be a major step forward in the study of cancer prevention, as well as an opportunity for New Orleanians to take charge of their health by pursuing wellness, instead of just enduring illness.”

–DR. WILLIAM ROBINSON III

Dr. Judith Fabian (M ’70) is funding an endowed chair position within the Department of Anesthesiology.

When Dr. Judith Fabian (M ’70) attended Tulane University, female medical students were the minority. Nationally, only 7 percent of medical students were female. Tulane made the move to diversify the student population and Fabian was one of nine women to enter the School of Medicine—the largest class of females at the time.

Now she has been inspired to give back to Tulane University School of Medicine by including the medical school in her will. Fabian is funding an endowed chair position within the Department of Anesthesiology.

Fabian was motivated to make a significant gift to Tulane after reflecting on her time at medical school. Although female medical students were a minority, she was always treated equally. In fact, she says that the school supported her when times were tough and tuition money was hard to come by.

“Tulane gave me an opportunity, and I’ve achieved what I have because of Tulane,” says Fabian.

After finishing her residency, Fabian spent her career as an academic anesthesiologist. She was director of cardiac anesthesiology at the Medical College of Virginia and later was chair of the Department of Anesthesiology at the University of New Mexico. Because of her interest in the needs of academic anesthesiology departments, she met with Dr. Frank Rosinia, chair of the Department of Anesthesiology, to see if her gift could make an impact within the department. Fabian was excited by what she learned and thought an endowed chair would aid Rosinia in his plans for the department’s future.

“Dr. Rosinia has an inspiring vision for the department,” says Fabian. “He has a young and vibrant faculty thriving under his leadership.”

The School of Medicine made a big difference in Fabian’s past, and she is happy to be part of its future.
TODAY’S IDEAS, TOMORROW’S INNOVATIONS

there’s a steady pipeline of new medical devices in development at the School of Medicine thanks to renewed collaboration with Tulane’s Biomedical Engineering program and the Office of Technology Transfer. The joint program helps students and residents transform ideas from concepts to a patent-protected prototype.

“My idea would still be a sketch in my notebook if it weren’t for Tulane,” says surgery resident Eric Simms, who invented a novel device that enables surgeons to change instruments quickly, saving precious time during critical procedures. He’s worked closely with Dr. James Korndorffer to develop a prototype termed the Hydra Minimally Invasive Surgical System.

HERE ARE SOME OF THE DEVICES IN THE WORKS:

> HYDRA MINIMALLY INVASIVE SURGICAL SYSTEM: A laparoscopic device with interchangeable instruments inside a long sheath. The system involves rapidly deployable instruments for minimally invasive procedures that can be tailored to the type of surgery, the instruments needed for the procedure and the surgeon’s preferences. The project was developed using more than $11,000 in state grants. Simms is working to get more funding to create a testable prototype.

> BLUETOOTH ENABLED, ARTIFICIAL COLON: Third-year medical student Utsav Goel has developed a model for a device that could help an estimated 75,000 people per year who undergo total colectomy or ileostomy procedures and must rely on external colostomy bags. The implant would be Bluetooth enabled and controlled via a smartphone. “Right now we have been able to print and model the actual design,” Goel says. “We’re raising money to print a working prototype.”

> EZ-VIEW ENDOTRACHEAL TUBE: Korndorffer and Dr. Jaime Palomino are helping biomedical engineering graduates Seth Vignes, Chris Cover and Nick Chedid, who developed a new endotracheal tube as a class project. It’s a clear laryngeal mask airway that provides patients with continuous unobstructed ventilation while giving physicians continuous visualization of the throat during tracheostomy surgery. Current devices on the market partially obstruct a patient’s breathing tube.

PATHOLOGIST GETS $2.6M IN NIH GRANTS FOR HEPATITIS C RESEARCH

he National Institute of Allergy and Infectious Diseases awarded Tulane University Pathology professor Dr. Srikanta Dash two grants totaling $2.6 million to study why some patients respond and others develop resistance to standard treatments for chronic hepatitis C, the most common cause of end-stage liver disease.

Dash received a $1.4 million, four-year grant to explore the mechanisms behind a gene, interleukin-28B, that plays a critical role in whether a patient with hepatitis C (HCV) responds to antiviral treatment. The second award is a $1.2 million National Cancer Institute grant to study how chronic HCV patients develop resistance to standard interferon therapies.
High blood-sugar levels, such as those linked with Type 2 diabetes, make beta amyloid protein, associated with Alzheimer’s disease, dramatically more toxic to cells lining blood vessels in the brain, according to a Tulane University study published in the Journal of Alzheimer's Disease.

“Previously, it was believed that Alzheimer’s disease was due to the accumulation of ‘tangles’ in neurons in the brain from overproduction and reduced removal of beta amyloid protein,” says senior investigator Dr. David Busija, regents professor and chair of pharmacology at Tulane University School of Medicine. “While neuronal involvement is a major factor in Alzheimer’s development, recent evidence indicates damaged cerebral blood vessels compromised by high blood sugar play a role. Even though the links among Type 2 diabetes, brain blood vessels and Alzheimer’s progression are unclear, hyperglycemia appears to play a role.”

ABOUT THE STUDY

Drs. Cristina Carvalho and Paula Moreira from the University of Coimbra in Portugal were co-investigators in the study.

Researchers studied cell cultures from the lining of cerebral blood vessels, one from normal rats and another from mice with chronic diabetes. They exposed the cells to beta amyloid and glucose and later measured their viability. Cells exposed to high glucose or beta amyloid alone showed no changes in viability. However, when exposed to hyperglycemic conditions and beta amyloid, viability decreased by 40 percent. The cells from diabetic mice were more susceptible to damage and death from beta amyloid protein—even at normal glucose levels.

The study’s findings underscore the need to aggressively control blood sugar levels in diabetic individuals, Busija says.

BOOK CHRONICLES LANDMARK STUDY OF ROMANIAN ORPHANAGES

A new book from Harvard University Press, Romania’s Abandoned Children, chronicles the Bucharest Early Intervention Project, a landmark study of the devastating effects of deprivation on the development of children.

“This study has important implications for the million or so children every year in the U.S. who experience neglect sufficient to involve child protective services,” says Dr. Charles H. Zeanah, one of the principal investigators, a co-author of the book and Sellars-Polchow Chair of Psychiatry at Tulane. Dr. Charles A. Nelson, professor of pediatrics and neuroscience, Harvard Medical School, and Nathan A. Fox, professor of human development and quantitative methodology, University of Maryland, are co-principal investigators of the study and co-authors of the book.

The 12-year study, begun in 2000, followed 136 infants and toddlers who had been abandoned and were in Romanian institutions. Half were randomly assigned to foster care while the others were assigned to “care as usual” or continued institutional care. A third group of children raised by their families also were studied. The researchers periodically assessed the children over the course of the study, measuring many aspects of development including physical, emotional, cognitive, social and language.

The study, as a randomized clinical trial, provides definitive proof of causal links between the interventions, including placing institutionalized children in foster care, and the outcomes. Romania’s Abandoned Children shines new light on numerous effects of adversity on physical and brain development, with more attention to brain functioning related to institutional rearing than has ever been provided before.

“Our results suggest that institutional care is a particularly harmful way to care for children,” Zeanah says. “For children being raised in any kind of adversity, the sooner you can get them into an adequate caregiving environment, the better their chances are for developing normally.”

Dr. Charles H. Zeanah, Sellars-Polchow Chair of Psychiatry at Tulane and one of the principal investigators of the Bucharest Early Intervention Project.
**MEDICAL ALUMNI WRITE A PRESCRIPTION FOR HAPPINESS**

Wouldn’t it be nice for your doctor to write you a prescription for happiness? Tulane University medical alumni Drs. Carrie (M ’89, R ’93) and Alton Barron (M ’89, R ’94) did just that as they presented their cure for creativity to faculty members and students at the medical school on Dec. 5. The presentation was based on their book, *The Creativity Cure: How to Build Happiness With Your Own Two Hands*.

The husband and wife team drew upon the latest psychological research, their combined 40 years of medical practice and personal experience to write the self-help guide.

“We must think differently in order to create an appropriate balance in our lives,” says Carrie Barron, a board-certified psychiatrist/psychoanalyst on the clinical faculty of the Columbia College of Physicians and Surgeons who also has a private practice in New York. Alton Barron is a board-certified orthopaedic surgeon and is president of the New York Society for Surgery of the Hand. He has been a surgeon for the New York Philharmonic Orchestra and Metropolitan Opera for more than a decade.

In their book, *The Creativity Cure: How to Build Happiness With Your Own Two Hands*, Drs. Carrie and Alton Barron present a five-part plan to unleash happiness while alleviating depression and anxiety by tapping into the potential for creativity.

**THE FIVE-PART PRESCRIPTION IS MEANT TO BRING AWARENESS TO DAILY LIFE.**

The Barrons advise that you can find a content and authentic life if you:

1. **INSIGHT**
   - Spend about 10 minutes every day in inner dialog. Taking a break from social media, the computer and television is important for everyone but especially for children.

2. **MOVEMENT**
   - Exercise and physical movement have numerous benefits that have been shown to combat anxiety and depression.

3. **MIND REST**
   - Downtime and leisure are essential. There has to be a time when the mind can roam free.

4. **YOUR OWN TWO HANDS**
   - There is a link between working with our hands and brain exercise. Meaningful hand use such as crafting or even writing a note to a friend can bring inner peace.

5. **MIND SHIFT**
   - A shift in behavior and outlook occurs when you are able to participate in the previous four prescriptions and change the way your mind works.

**MEDICAL ALUMNI WRITE A PRESCRIPTION FOR HAPPINESS**

**TULANE CHILD PSYCHIATRIST HONORED WITH LIFETIME ACHIEVEMENT AWARD**

The American Academy of Child and Adolescent Psychiatry (AACAP) honored Tulane University child psychiatrist Dr. Michael Scheeringa with a lifetime achievement award for his pioneering research on the emotional and behavioral problems of very young children.

Scheeringa, the Remigio Gonzalez, M.D., Professor of Child Psychiatry at Tulane University School of Medicine, accepted the AACAP’s 2013 Irving Philips Award for Prevention, an honor for those who have made significant contributions to the prevention of mental illness in children and adolescents.

“For a long time, conventional wisdom had been that very young children couldn’t get psychiatric disorders, and even if they did there were very few ways to treat them,” Scheeringa says. “Our empirical work on the assessment and treatment of posttraumatic stress in very young children has helped to change that belief.”

Scheeringa’s career has included many firsts in his field. He conducted the first study on the diagnostic validity of post-traumatic stress disorder in preschool children, the first study on the neurobiology associated with PTSD in preschool children and the first longitudinal study of PTSD diagnosis in preschoolers.
BIOLOGICAL
BUBBLE WRAP

If early adversity can harm children at a cellular level well into adulthood, can parents create a biological buffer that shields a child decades later from disease and toxic stress? Tulane researchers are recruiting 500 pregnant women to find out.

BY KEITH BRANNON
Dr. Stacy Drury is holding a saliva DNA collection kit. A DNA stabilization solution is added to the saliva for DNA extraction.
Almost four years ago, psychiatrist Dr. Stacy Drury began working with schools in New Orleans to see from a very different perspective how families were affected by the trauma of post-Katrina recovery. Many lost homes, jobs and loved ones and were living in neighborhoods still broken by the storm.

She wanted to document how common problems endemic to urban areas, worsened by the storm, such as poverty, violence and blight, were affecting children from preschool through early adolescence.

But Drury, a trained geneticist, wasn’t looking for the typical flashpoints for trauma—trouble in school, depression or bad behavior. Instead, she was investigating something more insidious. Could stress at home and disorder in the community seep deep under the skin to alter children’s DNA, potentially stealing time and setting them on a negative health trajectory far into adulthood?

Drury is increasingly convinced it can.

IT’S IN THE TELOMERES
She is a pioneer in provocative new research exploring the biological impacts of early adversity—both at home and within neighborhoods—on children. She is the first scientist to show that extreme stress in infancy can biologically age a child by shortening the tips of chromosomes, known as telomeres. These tips keep chromosomes from shrinking when cells replicate. Shorter telomeres are linked to higher risks for heart disease, cognitive decline, diabetes and mental illness in adulthood.

“Telomeres are clearly a marker of the aging process, but they are increasingly being linked to stress,” says Drury, associate professor of psychiatry and behavioral sciences and director of the Behavioral and Neurodevelopmental Genetics Laboratory at the Tulane University School of Medicine. “What this suggests is that we have a marker in a cell that is tracking the lasting impact of these negative early life experiences.”

How does this happen, and more importantly, can it be prevented? The National Institutes of Health recently awarded Drury $2.4 million to launch a study to find out.

She and Dr. Katherine Theall, a social epidemiologist at the School of Public Health and Tropical Medicine, are recruiting 500 pregnant women to study what happens in the critical first year of life as a child develops an all-important bond with its mother or primary caregiver. Drury’s theory is that this critical relationship, called attachment, sets the tone for how a child biologically responds to stress for the rest of his or her life.

NURTURE PROTECTING NATURE
The study’s goal is to see if a responsive and sensitive parental bond can create a “biological buffer” in children that protects against cell damage from stress in the outside world.

“Early parent-child interactions are critical. These relationships influence brain development and the set point for your stress response systems, particularly the cortisol or ‘fight-or-flight’ response,” Drury says. “What if building on that, protecting and strengthening that relationship, could provide a buffer for kids? What if moms or caregivers...
can develop these secure attachment relationships with their children—particularly when they are very young—and create a biological bubble wrap that protects them so that they don’t end up with all of these negative health outcomes down the line?”

The Tulane Infant Development Study, launched late last year, will be the first study to document what happens physiologically and cellularly before and after the development of attachment in infants and their mothers. So far, more than 80 expectant mothers have enrolled. Researchers are working with area clinics, social service agencies and other studies within Tulane to recruit participants during the next five years.

“It’s a huge number of women,” says Drury, adding that the mothers will be partners in the research, providing critical guidance for the study based on their experience.

The team will collect survey information from mothers about various stressors, medical conditions, family environments and support systems during pregnancy. After delivery, they’ll work with the Department of Health and Hospitals to get newborn blood screenings, birth weights and health data. Researchers designed the study to measure how a child reacts to stress at two key development points: four months, when babies are social but haven’t developed a preference for caregivers, and at 12 months when infants have developed this critical attachment relationship with their mothers.

“If you’ve ever played with babies, when they are little they are easy—you can hand them to whomever. But at a certain time point, they start to cling to their mom,” Drury says. “And that attachment relationship develops in most babies somewhere between seven and nine months of age.”

**ABOUT THE STUDY**

To see whether the attachment relationship can biologically protect children from stress, researchers have devised two scenarios to measure infants’ stress-response systems before and after these relationships form. At four months, mothers and babies run through a mother-child interaction called the still face paradigm—a typical stressor for babies. Mom will play and interact with the baby and then researchers ask her to stop and look at the baby with a still face. After a short period of time, they have her interact with the child again and measure how the mother and infant respond together through the interaction.

During this, researchers measure the infant’s heart rate and take saliva and cheek swabs. To get a sense of what is happening biologically during this routine type of stress, they measure cortisol, the “fight-or-flight” hormone, and changes in gene expression. The same stress measurements are taken during another mother-child interaction when the baby is a year old.

In this second scenario, the mom plays with the child and stops to read a magazine. A “stranger” (a trained research assistant) comes in to interact with the child as the mom leaves the room. Later, when the mother comes back, researchers examine what happens when the mother and child are reunited.

“That is the gold standard in measuring this attachment relationship,” Drury says. “We will get a very clear idea of how well that baby is able to use mom as a safe base from which to explore the world at 12 months.” Researchers will cross-reference the data on attachment, stress response and telomere length with other information about the home environment to get a complete picture of the baby’s first year of development.

**A PATH-BREAKING RESEARCH AGENDA**

“What we are hoping to see is that even children who are exposed to lots of different stressors in their environment—prenatally and in the first year of life—if their relationship with their primary caregiver or their mom is secure, then that biological stress or the shortening of telomere lengths and altered regulation of the cortisol ‘fight-or-flight’ response will be buffered or protected,” Drury says. “That would be saying that supporting and helping moms develop a secure attachment relationship, even if there are life stressors, could not only help with the parenting and the growth of that child but biologically protect the child from adversity and the lasting impact of it.”

Ultimately, Drury hopes to secure additional funding grants to extend the study.
to follow participants as they grow older.

“What we really want to show is that not only does this effect happen at 12 months of age, but it lasts and at two years of age and at four years of age these kids that had that secure attachment relationship are doing better health-wise, they are doing better in terms of executive function and they are doing better in school,” she says. “And that becomes another study.”

Dr. Charles Zeanah, the Mary Peters Sellars-Polchow Chair of Psychiatry at Tulane, whose famed Bucharest Early Intervention Project (see page 6) first launched Drury’s research into telomeres, says the project breaks new ground in the field of child development.

“No one has ever examined the cellular and molecular effects of attachment, though there are data indicating that children with secure attachments are buffered from environmental risk factors,” Zeanah says. “Stacy’s pioneering work on telomeres and gene methylation patterns are cutting-edge explorations of possible mechanisms.”

“There has long been recognition that childhood experiences of loss, for example, increase risk for depression in adulthood. What we are learning now is that with increasing numbers of adverse early experiences, the odds of the individual developing a variety of diseases in adulthood also increase—ischemic heart disease, chronic obstructive pulmonary disease, liver disease, etc.,” Zeanah says. “So the question is, how do experiences get under the skin and impact us so profoundly? Stacy is looking at cellular and molecular mechanisms that may illuminate what are now associations.”

NOT JUST MEDICINE, BUT ALSO PUBLIC POLICY

The implications of the research could be far-reaching, explaining how early experiences make some people more prone to leading causes of early death and shedding light on vexing health disparities within disadvantaged populations.

For example, when Drury and Theall studied children in disadvantaged areas within New Orleans, they found those children were three times more likely to have shorter telomeres than those who did not live in those neighborhoods. Family violence was an even stronger predictor of cellular damage. Almost 60 percent of the children in their New Orleans study had experienced one or more major exposures to potentially traumatic events or violence. Drury and Theall found that children who witnessed violence or who had a family member incarcerated had significantly shorter telomeres than children without those experiences.

For Drury, those community associations make the work all the more relevant and urgent. If she can explain the protective science behind attachment, it would provide the scientific data needed to bolster the case for implementing intervention and prevention efforts to support mothers and their young children to develop stronger attachment relationships, and this would ultimately lead to community-level health improvements. The behavioral science is already there as there are evidenced-based therapies proven to strengthen bonds between parents and their young children.

“This is all designed with a goal to gather information that is useful in improving health outcomes in our city,” she says. “If strengthening that relationship for the first six months of life is going to improve health outcomes for decades, that’s an easy sell not only to health officials, but—most importantly—to moms and caregivers.”

THE MEDICINE ANNUAL FUND AT WORK

Leading up to her proposal to the National Institutes of Health, Dr. Stacy Drury was awarded a Pilot Research Grant from the Dean’s Office that is made possible by the School of Medicine Annual Fund. This funding allowed Drury to show that telomere length measured in saliva, cheek swabs and blood were highly correlated, adding support for a non-invasive process of collecting data from children. This data was vital to her NIH grant proposal.

Gifts to the Medicine Annual Fund give the medical school the flexibility to support promising research areas with the greatest need. By its very nature, the field of medicine is constantly changing. Donors who invest in the Medicine Annual Fund make stories like Drury’s possible.
The human brain remembers when pleasure stimulators are activated, encouraging us to repeat the linked activity. Addictive drugs create an intense shortcut to the brain’s reward system, hijacking the brain with an often overwhelming desire to repeat drug use. Renowned addiction specialist Dr. Charles O’Brien has made a career studying how the brain responds to drug addiction and improving medical knowledge of what can be done to retake control.
Following graduation from Tulane University School of Medicine, Dr. Charles O’Brien was drafted to serve in the Vietnam War. As a medical officer in the Navy training program, he discovered that the majority of his patients were not suffering from crippling injuries or post-traumatic stress disorder but from addiction to the powerful drug heroin.

“These naval officers and marines were returning from Vietnam with severe withdrawals from heroin, and there was nothing to treat them with,” says O’Brien. As a result, in 1971 he started one of the first methadone clinics, located in Philadelphia, to aid these veterans.

In trying to understand and treat addiction, O’Brien (A&S ’61, M ’64, G ’64, G ’66, F ’68) found his life’s work.

NEW ORLEANS + TULANE
A native of New Orleans, O’Brien was “bitten by the research bug” in high school. He received a bachelor of science degree from Tulane University and then went on to Tulane University School of Medicine to obtain his masters, medical degree and PhD. He jokes that he is “saturated with Tulane degrees.”

It was during his time at the School of Medicine that O’Brien became fascinated with the brain. “I wanted to learn everything I could about the brain,” he says. It was this interest that persuaded him to pursue a specialty in neurology and psychiatry.

O’Brien didn’t learn much about addiction during his formal medical training. The common view of addiction at the time was that it could be overcome through willpower, spirituality or talk therapy. O’Brien challenged this notion and explored the biology of addiction—how it was connected to the brain.

UNANSWERED QUESTIONS
O’Brien began a research program at the University of Pennsylvania to learn more about the origin of addiction. With National Institutes of Health support, he studied how the brain reacts to the influence of various substances including alcohol, opioids and cocaine.

What O’Brien found was that to understand addiction, he had to consider addiction a physical ailment where the goal is preventing relapse.

Among most addicts, relapse is the biggest hurdle. Even decades of abstinence from some drugs is not enough to break the attraction.

The study of addiction from the perspective of preventing relapse has been the foundation of O’Brien’s research agenda throughout his career. His understanding of how the brain works led him to feel passionately about the use of evidence-based treatments and medication to treat addiction. He focused on developing evidence-based diagnostic tools that scientists, drug developers and physicians use to measure the effectiveness of treatments.

“It’s important to treat the brain in addition to the sociological problem,” says O’Brien. That’s why he says expensive rehabilitation centers or group therapies are not a cure-all.

“Unfortunately you end up charging people a lot of money for things that just don’t work.”

DISCOVERING TREATMENTS
Widely regarded as an innovative scholar, O’Brien has conducted countless research projects, dozens of clinical trials and published over 600 papers. His work has increased our understanding of the clinical aspects of addiction and the neurobiology of relapse. Because of O’Brien’s work and his pre-eminence, the University of Pennsylvania named The Charles O’Brien Center for Addiction Treatment in his honor.

O’Brien’s major achievements include finding that naltrexone, originally developed to treat heroin addiction, was effective in treating alcoholism. In the 1980s, O’Brien and his research team discovered that alcohol provokes the release of endogenous opioids that produce endorphins and stimulate a feeling of reward.

Approved by the FDA, naltrexone has now become one of the most popular—if not the most widely used—medications to treat alcohol dependency.

In addition to naltrexone, O’Brien’s research resulted in new medications, behavioral treatments and instruments for measuring the severity of addictive disorders. Many of his discoveries are now commonly used for the treatment of addictive disorders and considered the standard of care.
But if you ask O’Brien what he is most proud of, he doesn’t speak about the time President George W. Bush visited his program in Pennsylvania or when he received the Legion of Honor medal from the French government, but will refer to the course in addiction that he established at the University of Pennsylvania Perelman School of Medicine. “Every medical student at the University of Pennsylvania has to pass a course on addiction,” says O’Brien. “I am helping produce doctors who understand the problem. If you understand how to treat addiction early, there is a better chance to stop it.”

A LIFE’S WORK
O’Brien, who is currently conducting trials on a new medication to treat cocaine addiction, will celebrate his 50th reunion from the School of Medicine in May.

His innate curiosity and continued love of research have taken him from Tulane to Harvard, to the University of London, to the University of Pennsylvania and throughout the world as an admired researcher and dedicated physician.

O’Brien hopes that his work will give hope to the many suffering from addiction.

THE MAKING OF A DOCTOR
This is not Dr. Charles O’Brien’s first time to be featured in a Tulane magazine. O’Brien was the focus of Tulanian’s November 1967 feature: “The Making of a Doctor: Photographic Essay.”

As chief resident in neurology, O’Brien was pictured prescribing treatment for ward patients at Charity Hospital, performing a delicate spinal test on a young patient, delivering a special lecture and discussing research with noted psychiatrist Dr. Robert Heath. O’Brien was even photographed with his wife Barbara and their three young sons as they sailed Lake Pontchartrain.

The photographic essay shows the very beginning of O’Brien’s storied career as a clinician, researcher and teacher.

HONORS AND AWARDS

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<td>William C. Menninger Memorial Award for Distinguished Contributions to the Science of Mental Health</td>
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<td>2014</td>
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When Hurricane Katrina wiped out the historical records of the Tulane Department of Surgery, a Tulane surgeon and history buff took it upon himself to reconstruct the department’s past. With the assistance of a resident, he has written a book chronicling the department’s rich history, from heralded surgeons and innovations to the triumphs and tribulations after the storm.

Dr. Douglas Slakey is a self-confessed history buff. He even majored in history as an undergraduate at the University of California, Berkeley.

“It’s been an interest of mine for a long time,” says Slakey, chairman of the Department of Surgery at Tulane University School of Medicine. “Now it’s a hobby.”

His fascination led him to dig deep into the history of Tulane’s 179-year old surgery department and compile his findings in the recent book *Innovation and Perseverance: A History of The Tulane University Department of Surgery*. The 113-page book chronicles the development of the surgery department, from the pioneering advancements of its surgeons to the devastation of Hurricane Katrina.

Slakey began writing the book as a way of sorting through the aftermath of Katrina, which destroyed many of the historical records of Tulane Surgery.
“When the medical school reopened, there was not even a record of the past chairs of the Department of Surgery, a travesty for a department with such a distinguished history,” he writes in the book’s preface.

“I started poking around the files, and lo and behold, there was nothing,” Slakey says. “I thought, ‘We’ve got to try to reconstruct some things.’”

Initially, he worked with Christopher Harter, director of library and reference services at the Amistad Research Center based at Tilton Memorial Hall on Tulane’s uptown campus. He also gleaned details from History of Medicine in New Orleans by Dr. Rudolph Matas, one of the surgery department’s renowned chairs, and History of Tulane University Medical Center by medical historian John Duffy.

He brought Dr. Matthew Zelhart, a third-year resident at Tulane, on board the project to interview some of Tulane Medical School's surgeons and medical students.
School’s long-time surgeons, such as Dr. Bernard Jaffe, Dr. Norman McSwain and Dr. Gustavo Colon. Zelhart's fascination with history made him a natural addition, Slakey says. “He’s enthusiastic, intellectual and curious,” Slakey says. “I gave him a list of people to contact and interview, and he really embraced the idea.”

The book’s organization is surprising, placing more recent history at the beginning before delving into the deeper past. The first part of the book focuses on Hurricane Katrina and its impact on the surgery department, and the second part on the larger historical context that includes highlights from each department chair’s term.

The book offers fascinating insights into history at the intersection of medicine, New Orleans and Tulane. Matas, for example, was one of the first surgeons to perform upper and lower extremity amputations using a regional nerve block. With the start of World War I, he oversaw the formation of a base hospital in France outfitted by the New Orleans chapter of the Red Cross and staffed by Tulane professors and students.

Dr. Alton Ochsner Sr. had an equally distinguished career at Tulane, lasting from 1927–56. Exemplifying his innovative career, he began pursuing the link between smoking and lung cancer after observing nine cases of carcinoma of the lung in a six-month period.

Slakey believes telling Tulane’s story is important. “People tend not to celebrate the success that we’ve had over the years, and one of the things I wanted to do was highlight the fact that we have had great success,” he says.

Zelhart agrees. “It was important to record the history of such an intriguing program. So much innovation and so many key figures in the world of surgery have come through Tulane, and it would be terrible not to preserve their legacy to inspire future generations.”

The book features dozens of photographs, including several...
depicting the floodwaters and subsequent evacuations following Katrina. It is also sprinkled with colorful vignettes, including this one about Tulane surgeon Dr. Ambrose Storck: “He was known for his immense surgical ability and for being the most eligible bachelor in New Orleans, often seen driving down Canal Street in his Packard car and wearing fine white linen suits.”

And there’s this one about McSwain and Jaffe, who on the Saturday night before Mardi Gras boarded their float in the Endymion parade before the test results of a particular patient came in.

“With the parade route being so loud, they would never be able to hear the test results over the phone. The residents decided to find cardboard posters and write the results in large print so that they could be read from McSwain and Jaffe’s parade float. After seeing the results on the parade route, they called orders in by phone to the residents, and the patient did marvelously.”

The authors devote the first 22 pages of the book to Katrina, which forced the temporary closure of University Hospital and the Tulane School of Medicine. It was during this difficult period that Slakey was named head of the surgery department, and it was under his leadership that it came back to life. As Slakey tells it, that was exemplary of the determined and innovative spirit at Tulane’s Department of Surgery.

“It was a challenging time,” Slakey says. “But on the other hand, it really showed you the best in people.”
What is a fitting tribute? When Dr. William Waring lost his wife, Dr. Nell Pape Waring in 2012, he searched for a way to memorialize the woman to whom he was devoted for over 60 years.

BY KIRBY MESSINGER  PHOTOGRAPH BY SALLY ASHER
HE STARTED BY PLANTING A PAIR OF OAK TREES

Dr. William Waring planted a pair of oak trees in one of their favorite places, Audubon Park, with the prospect that over the years the trees’ branches will entwine and the two would become one. Locals call them the “kissing trees.”

Wanting to do more, Waring established the Dr. Nell Pape Waring Endowed Scholarship Fund to benefit future physicians at Tulane University School of Medicine. The gift celebrates the couple’s lifelong love.

“It was love at first sight,” he says with a smile. Nell Pape graduated from Tulane University School of Medicine in 1951, one of the few female medical students at the time.

Attending a mostly male medical school might have been tough, but Nell Pape accepted the challenge with her usual spunk. She completed medical school and accepted a residency position at Johns Hopkins Hospital in Baltimore, Md.

It was during her residency that she met William Waring. He still remembers the exact date: July 1, 1951. Right away he knew there was something different about her and he was smitten.

Waring, the chief of residents at Johns Hopkins, noticed Nell Pape visiting the hospital cafeteria at the same time he did everyday. He suspected it might be more than a coincidence. He asked her out for a picnic, and she said yes. They were married the following year.

A dedicated wife and mother, Nell Pape left her residency to raise her sons. The pluck that got Nell Pape through medical school helped her rear five sons and create a life that took her family to Japan, Florida and eventually back to her hometown of New Orleans.

TULANE BECAME HOME

After a 22-year hiatus from medicine, she entered the residency program at Charity Hospital, where she specialized in allergy and immunology. Although many years older than her fellow residents at Charity Hospital, she excelled in the fast-paced, demanding environment.

“She had so much courage,” says William Waring. “I know she was probably scared, but she pulled herself together because she loved what she was doing.”

Tulane became home to the entire Waring family. William Waring spent a long and successful career in the Tulane Department of Pediatrics as a prominent figure in the treatment of children’s pulmonary disease. Nell Pape was board certified in allergy and immunology and pediatrics and built a respected 30-year practice in New Orleans. Three of their five sons are also Tulane graduates.

“We just had a wonderful life together,” reminisces Waring, as he admires a photo. When asked why he created a scholarship fund, his answer is simple: because of Tulane, he met his wife.

“In a sense, Tulane gave me my wife. Without the excellent medical education she received, she wouldn’t have been accepted to Johns Hopkins,” says Waring. “And if she hadn’t travelled to Baltimore, I don’t know if we ever would have met.”

DR. NELL PAPE WARING ENDOWED SCHOLARSHIP

Medicine brought the Warings together. Now the Dr. Nell Pape Waring Endowed Scholarship will allow students to get their medical education without the burden of a large loan debt. Over time, the Waring legacy will continue to grow and its reach expand: from the “kissing trees” in Audubon Park that memorialize Nell Pape Waring to the Dr. Nell Pape Waring Endowed Scholarship. For William Waring, that’s as it should be; a fitting tribute to life of expansive possibility and helping others.
Paying it Forward  Dr. Tom Beck (’67) and his wife Marilyn remember when he was a young medical student and she was a New Orleans public school teacher, and how grateful they were for his scholarship assistance to Tulane University School of Medicine.

Now, Tom and Marilyn are paying it forward by establishing a scholarship to Tulane medical students. “I was lucky enough to have financial assistance three of the four years I attended Tulane University School of Medicine,” Tom says. “I was able to get through medical school with very little debt.”

Although Marilyn worked as a teacher while Tom was in medical school, they needed additional financial support. The scholarship Tom received allowed him to focus on his medical career.

As medical school tuition across the country continues to increase, the Becks recognize the financial burden many students now face when they enter medical school.

“It’s not uncommon for students to have over $200,000 in debt when they graduate from medical school,” Tom says. “This debt can be a barrier for many students, especially for those that are married and have families.”

Tom practiced medicine in the areas of hematology and oncology in Boise, Idaho, serving for 20 years as executive medical director at St. Luke’s Mountain States Tumor Institute.

Tom and Marilyn decided to create an endowed scholarship to Tulane School of Medicine. Their gift established the Dr. Thomas McNeil and Marilyn B. Beck Scholarship. The Becks hope their scholarship will support students with similar backgrounds to their own. Because they have committed to a planned gift, their scholarship endowment will continue to grow and make an even bigger impact on medical students.

“Tulane was a wonderful experience, and we loved our time in New Orleans. We feel a very strong allegiance with the school,” Tom says. “We just wanted to give back where we can.”

Dr. J. Dudley Talbot (’38) was honored by the National March of Dimes in November 2013. The March of Dimes celebrated their 75th anniversary as Dr. Talbot celebrated his 75th anniversary in medicine, having delivered over 6,000 babies. He is celebrating his 100th birthday!

Dr. George Theodore Schneider (A&S ’41) serves on the boards of the Navy League of the U.S., Greater New Orleans YMCA, World Trade Center of New Orleans and the Military Order of Foreign Wars.

Charles Mizell, mayor of Bogalusa, La., honored Dr. Gerald S. Berenson (A&S ’43, R ’51) with the key to the city.

Bogalusa is home to Berenson’s research project, the Bogalusa Heart Study. At the grand opening of the study’s new offices, Mizell talked about what the heart study means to the people of Bogalusa, especially the participants who have remained committed to it for 40 years.

Jewish Children’s Regional Service (JCRS), the oldest existing Jewish children’s social services organization in America, honored Dr. Hyman C. Tolmas (A&S ’43) and his family at their annual gala in March in New Orleans. The JCRS has provided a financial safety net to vulnerable Jewish youth through 150 years.

Dr. Asaichi S. Hieshima (A&S ’49) celebrated his 94th birthday in October.

Dr. Leonard J. Rofles (A&S ’48) is 90-years-old and is still active at the Hospice of Acadiana in Lafayette, La.

Dr. Henry S. Carter (A&S ’50) retired from internal medicine in June 2013 after 56 years of primary care practice in DeRidder, La.

Dr. Jack Sherman (A&S ’50) was recently honored by the National Cancer Center. He has served in the organization for more than 35 years and is the president emeritus. Sherman, a retired pediatrician and clinical geneticist, has been dedicated to cancer research. He is a founding fellow of the American College of Medical Genetics.
Dr. Ira D. Rothfeld (A&S ’53) is the assistant clinical professor in the Department of Otolaryngology—Head and Neck Surgery at Mt. Sinai Medical School in New York. He is the past president and member of the board of directors for the Society of Honorary Police Surgeons of the City of New York. He is still engaged in private practice in Manhattan and Queens.

Dr. Richard A.D. Morton had a wonderful time at his 55th reunion and is looking forward to the next one.

Dr. Robert H. Brumfield Jr. (A&S ’55, R ’62) is still working one and a half days a week at 80-years-old.

Dr. Frederick C. Atkinson (A&S ’55) practices family medicine in Dallas with the Texas Health Physicians Group, the provider group of Texas Health Resources. He and his wife of 55 years, Shirley, have two sons who live in the Dallas area and one daughter who lives in Los Angeles. They have seven grandchildren.

Dr. Edmond A. Lamperez (A&S ’55) is enjoying retirement in New Iberia, La., along with his grandchildren, golf and travel.

Dr. Joseph F. Lupo (A&S ’55, I ’59, R ’64, F ’65) is retired and now does part-time work at a community mental health center. He enjoys reading, walking, swimming, seeing movies and traveling.

Dr. Alan S. Rapperport is almost ready for retirement since his surgery. He had surgery performed twice for aortic dissections, but he is still swimming.

Dr. Marshall A. Burns (R ’63, R ’62, F ’65) is still teaching electrocardiogram like Drs. George Burch and John Phillips did all over Phoenix, Ariz.

Dr. Richard J. Grayson Jr. is now in charge of ENT at the VA Joint Ambulatory Care Center in Pensacola, Fla.

Dr. Roger L. Spark (I ’64) and his wife enjoyed meeting many of Dr. Spark’s classmates at his 50th reunion. They are a group of great men and women. He would like to thank Ron and Don for organizing a great event.

Dr. Charles P. O’Brien (A&S ’61, G ’64, G ’66, F ’68) received the College of Physicians Mental Health Research Award. O’Brien has also been chosen as the recipient of the Tulane Medical Alumni Association’s Lifetime Achievement Award. It was presented during his 50th reunion awards brunch in May 2014.

Dr. Francis J. Selman Jr. (A&S ’61, I ’66, R ’67, F ’68) is entering his sixth year of retirement from urology practice. He is now the medical director of the Bethesda Free Health Clinic in Ocean Springs, Miss.

Dr. Barry S. Verkauf (I ’66) practices in Tampa, Fla., and was one of the first subspecialty boarded reproductive endocrinologists and infertility specialists in the southeastern United States. He is the founder of the Reproductive Medicine Group in Tampa and is currently professor of reproductive endocrinology and infertility in the Department of Obstetrics and Gynecology at the University of South Florida College of Medicine in Tampa.

Dr. Patrick C. Breaux (I ’67, R ’73, F ’73) is the section head of non-invasive cardiology at Ochsner Health & Vascular Center in New Orleans.

Dr. Warren L. Wheeler is one of 30 members named as visionary by the American Academy of Hospice and Palliative Medicine. He was honored at the annual meeting in March 2014.

Dr. Hugh G. Barnett (A&S ’64, I ’69, F ’70, R ’76) recently retired from the Semmes-Murphy Neurosurgical Clinic in Tennessee after 46 years of neurosurgical practice. He now lives in New Orleans.

Dr. Margaret Waisman has been practicing dermatology for the past 41 years.

Dr. Jerry L. Goddard is a visiting professor at the American University of the Caribbean in St. Maarten.

Dr. Charles R. Anderson is currently retired from diagnostic radiology and is living in Marietta, Ga.

Northwest Texas Healthcare System recently hosted a special ceremony to dedicate the Dr. Rolf W. Habersang (I ’71, PHTM ’73, R ’73) Center for Pediatric Intensive Care. Habersang has provided the Amarillo community and region with pediatric intensive care and research since 1978. He came to Amarillo as the regional chair of the Department of Pediatrics of Texas Tech School of Medicine. Habersang proceeded to build a strong pediatric department and developed the pediatric residency program. Several years later he left Texas Tech to develop a private practice, Healthcare Professional Associates. He became a champion for special needs children, developing a practice designed to help children with special needs and their families.

Dr. Rise Delmar Ochsner (R ’73) moved back to New Orleans and is screening children in New Orleans Charter Schools for visual problems.

Dr. Harrison C. Putman III (I ’76, R ’80) received the Larry O. Schoenrock Distinguished Service Award at the annual fall meeting of the American Academy of Facial Plastic and Reconstrucrive Surgery held in New Orleans in October 2013. He resides and practices in Peoria, Ill.

Dr. Thomas E. Weed and his wife Margaret moved back to New Orleans after 23 years away. He is the chief of surgery at Chabert Medical Center in Houma, La.

After graduating from Tulane University School of Medicine, Dr. Timothy D. Brewerton completed a psychiatric internship and
residency at the University of California at San Francisco and then worked for the U.S. Public Health Service at Hawaii State Hospital. He went on to complete a clinical research-psychopharmacology fellowship at the National Institute of Mental Health in Bethesda, Md. Later he completed a child and adolescent psychiatry fellowship at the Medical University of South Carolina (MUSC). Brewerton is currently the executive medical director of the Hearth Center for Healing and clinical professor of psychiatry and behavioral sciences at MUSC in Charleston, where he also has a private practice.

Dr. Shirley B. Scott continues to practice medicine with patients across the US and Canada. Scott specializes in gastrointestinal infections, Lyme disease and co-infections. She feels that Santa Fe remains a remarkable place to live and work.

Dr. Patrice T. Gaspard (NC ’76) has been practicing pediatrics at Kaiser Permanente in Atlanta for 16 years.

Dr. Mary P. Lupo (NC ’76, R ’84) has been named “Mentor of the Year” by the Women’s Dermatologic Society, the largest group of women dermatologists in the world.

Dr. Elma I. LeDoux (R ’84, F ’87) was the recipient of the President’s Award for Excellence in professional and graduate teaching. The award and medallion were presented by President Cowen during Tulane Commencement in May 2013.

Dr. Warren R. Bourgeois III’s (E ’78, R ’87) son, Jason, graduated from Tulane School of Law in May 2013 and passed the bar exam the following October. His daughter, Camille, has been accepted to the School of Medicine’s Class of 2018. He is keeping it in the family!

Dr. Henry (Hank) G. Chambers was honored to be the 37th Annual Guy Caldwell Visiting Professor in Orthopaedic Surgery at Tulane University School of Medicine this past August. He met with the residents and medical students and gave lectures on cerebral palsy and gait analysis. He saw a patient in front of the 6th floor lecture room, just slightly changed from when his class was the first to occupy those halls.

Dr. Paul T. Finger (A&S ’78) is the recipient of the 2014 Tulane Medical Alumni Association’s Outstanding Alumnus Award. He will receive the award at the dean’s reception on the Tulane School of Medicine campus during reunion weekend on Friday, May 30.

Dr. Michael K. Puyau is employed as acute care surgeon at Woman’s Hospital in Baton Rouge, La. He is participating as a surgical preceptor in the Tulane School of Medicine’s LEAD program in Baton Rouge.

Dr. Marlon J. Doucet is the tactical medical director of the Metro EMS Special Tactics Advanced Response Team in Little Rock, Ark. He is SWAT qualified and completed the FBI Swat School Sworn Law Enforcement Program. He is the associate medical director and trauma communications system staff and faculty member of the VA Medical Center and Baptist Health Systems in Little Rock. He can be heard weekly on KARN Arkansas News Radio Network as Dr. MD, who discusses timely medical topics and living a healthy life.

Dr. William C. Warner Jr. is happy to share that in the last 12 months Tulane medical school graduates have been in leadership positions nationally in orthopaedics. This past year three of the five regional orthopaedic society presidents were Tulane alumni. Warner serves as the president of the Clinical Orthopaedic Society along with Dr. Fred Flandry (A&S ’77, M ’81, R ’86) of the Southern Orthopaedic Society and Dr. Ellen Rainey (NC ’82, M ’86, R ’87, R ’91) of the Western Orthopaedic Society.

After graduation, Dr. Erich W. Bruhn went to residency in California. After residency he was in the Air Force and assigned to Korea. Since then he has been in Winchester, Va., working as a surgeon to support his hobby as a Civil War surgeon re-enactor.

Dr. J. Thomas Cross (A&S ’83, PHTM ’88) has been married to his wife Robyn for 29 years. They have three daughters: Nicole, Lauren and Lindsey. Following medical school he specialized in medicine-pediatrics and then did an adult and pediatric infectious disease fellowship in Arkansas. He taught at LSU-Shreveport for eight years and then moved to Colorado Springs for 11 years, where he worked for MedStudy and performed internal medicine and pediatrics board reviews. In January 2013, he started his own continuing medical education company and offers primary care continuing medical education courses.
After graduation from Tulane School of Medicine, Dr. Joan Dugg-Bailey did an internal medicine residency at Good Samaritan Medical Center in Phoenix, Ariz., and an endocrinology fellowship at UCLA. She has been in private practice since 1993 in Phoenix and has three daughters.

After 15 years of teaching family medicine at the University of Utah, Dr. Christopher A. Gay began a private practice five years ago. He is married to Lori, and they have two children in college.

For the past 10 years, Dr. Daniel A. Kahn (A&S ’84, R ’89) has been in private practice in anesthesia and interventional pain management in southern Oregon. His wife Karen has a geriatric practice in regional nursing homes. They have three children: Raquel, Savannah and Grant.

After 13 years in the Navy, Dr. Etienne A. Mejia (A&S ’84) completed his orthopaedic surgery residency and a fellowship in orthopaedic sports medicine. He settled in Appleton, Wis., with his wife Winnie. They have two sons.

Dr. E. Wesley Ely Jr. (A&S ’85, PHTM ’89) is a professor of medicine and critical care at Vanderbilt University Medical Center in Nashville, Tenn. He was recently interviewed by CBS regarding his research, and was also profiled in The Wall Street Journal. His research studies the brain function of survivors of critical care. Ely is gaining recognition globally and his team continues to grow as they gain more breakthroughs.

Dr. Karen B. DeSalvo (PHTM ’92, R ’94, R ’96) was recently named one of Governing Magazine’s nine public officials of the year. DeSalvo was the health commissioner of New Orleans from 2011-13. DeSalvo was named National Coordinator for Health Information Technology in the U.S. Department of Health and Human Services effective January 2014.

Dr. Elizabeth Muddiman Cefalu (PHTM ’95) is practicing internal medicine and pediatrics in Sarasota, Fla., where she lives with her husband and two children.

Dr. Robert E. Walters Jr. was named vice president of clinical affairs for Virginia Health Services in Newport News, Va.

After receiving his medical degree at Tulane, Dr. Bradley F. Schwack (G ’00) completed his residency in general surgery from New York University Bellevue Medical Center in New York City. He also completed his fellowship in laparoscopic surgery at Norton Healthcare in Louisville, N.Y. He is employed at Northern Westchester Hospital and resides in New York City.

Dr. Emily Brown Rostlund is in her third year of pathology residency and welcomed her second daughter, Sylvia, in August 2013.

Download the Tulane Medicine app to explore videos and material related to each issue.
Then & Now

DR. DAVID LIGHT, A&S ’42, M ’44 & DR. KATY E. FRENCH-BLOOM, M ’03

Dr. David Light is a retired ophthalmologist living in Delray Beach, Fla. Dr. Katy E. French-Bloom is an anesthesiologist and assistant professor at the University of Texas MD Anderson Cancer Center in the Department of Anesthesia and Perioperative Medicine. Graduating nearly 60 years apart, they share a passion for and dedication to the future of the Tulane University School of Medicine. Both Drs. Light and French-Bloom are members of the 1834 Society and are supporters of the Medicine Annual Fund.

Why did you choose Tulane?

*Dr. David Light:* One of my main thoughts about attending Tulane was how good the football team was. The campus was something like you saw in a Hollywood movie. The atmosphere was just like heaven.

*Dr. Katy French-Bloom:* I decided to attend Tulane University Medical School due to many factors, but the overwhelming reason was that I had visited the school many times and fell in love with the city, the people and all the individual students that make Tulane such an incredible place.

What is one memory that you will always cherish from your days at Tulane?

*DL:* I will never forget what it felt like the first time I walked into the cadaver lab. I had no idea that I would feel the way I did. I’ll also never forget my roommate, Buddy Torn, who left medical school to join the U.S. Air Force. He was shot down over Romania.

*KFB:* Attending a concert put on by the Medical School Jazz Band. A couple of my good friends were members. I love jazz, was in a famous jazz city, and I remember thinking, ‘This is awesome!’ It really does not get much better.

“Why is giving back to the School of Medicine so important to you?”

*DL:* With everything you accomplish, you owe a great measure to your university and medical school. It’s not only something you owe, but I have always felt these institutions become a part of who you are. You think about what Tulane did for you and it will always be a big part of your life. We should be very thankful and grateful and we will never be able to give back enough. Never.

*KFB:* Giving back is critical. Without the support of alumni, the school would not be the amazing place it is today. To my fellow alumni, I would say, give back to Tulane any amount you are able, no matter how small, as you truly make a difference. And, giving back really feels good, knowing you are a part of something bigger than yourself.

Dr. David S. Light passed away on March 29, 2014. His expertise and caring bedside manner fostered a devoted host of patients.

1834 SOCIETY

Membership in the 1834 Society signals the deep commitment our alumni have to the tradition of excellence at the school of medicine. The society commemorates the year Tulane University School of Medicine was founded as the Medical College of Louisiana. The 1834 Society helps the next generation of Tulane doctors by offering scholarships to excellent students, working to improve the technology and facilities of the school of medicine, and supporting the renowned teaching and path-breaking research efforts of the faculty.
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