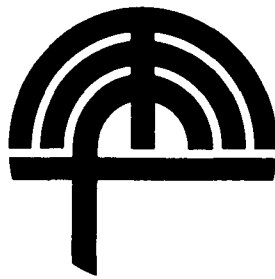


"Sully," the man behind the myth.

Medical Bulletin

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This fall's cover captures the verve and vigor of the very popular Medical School Dean W. Albert Sullivan, Jr. fondly called "Sully" by faculty and students alike. A major presence at the Medical School for many years, Sully's unique and complex personality somehow seems to reflect the essence of the medical school experience itself — intense, expansive, and stimulating in its many facets. For more insight on Sully, read Tom Patterson's warm and humorous article on page 22.

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UMD Celebrates New Medical Building with Medical Symposium

University of Minnesota-Duluth's new medical school building was formally dedicated on September 15.

Representative James Oberstar, congressman from Minnesota's 8th District, was featured speaker at the dedication ceremonies in the medical school courtyard.

Dr. John W. LaBree, dean of the UMD School of Medicine, hosted the dedication, which was preceded by a two-day scientific symposium featuring 12 internationally-recognized experts in the field of medical research.

Dr. LaBree was the guest speaker at the Minnesota Medical Foundation board of trustees quarterly meeting held in conjunction with the dedication on Sept. 14. The subject of his talk was "A First-Hand Look at Medical Education in China." LaBree led a group of American medical personnel to China this summer.

The symposium, "Medical Research: Pathway to Better Health," was held for two days, Sept. 13 and 14, in the Marshall Performing Arts Center and focused upon recent innovations in medical research.

This year's program was the first in an annual series relating advances in medical research to improved patient care.

The cell, its replication, and function was the theme of the symposium this year.

"The cell is the ultimate structure of life. If we can understand what goes on in a cell, we have a better understanding of diseases," explained Dean LaBree.

Internationally-renown experts in genetics and molecular biology discussed how new knowledge obtained through research leads to improved patient care.

They included Dr. Robert Good, president and director of the Sloan-Kettering Institute for Cancer



Dean LaBree spoke on China at the fall MMF Board Meeting, held in conjunction with the UMD Dedication/Symposium.

Research in New York, who discussed how cellular and molecular engineering can be used to correct genetic defects in immunity systems.

Dr. Herbert Boyer, a biochemist from the University of California in San Francisco, discussed the implications of cloning. Boyer's research laboratory recently reported the successful cloning of the genes responsible for the synthesis of human insulin.

The symposium was sponsored by the UMD School of Medicine and the University office of Continuing Education and Extension at UMD.

U Hospitals Open Marrow Transplant Unit: Pioneer New Marrow Therapies

By Paul Schurke
University News Service

Several frontiers in bone marrow transplantation — including its use to prevent rejection of transplanted organs and a new radiation technique that improves its success — were announced by University doctors this fall when they opened the new Bone Marrow Transplant Center here. The event follows designation of University Hospitals as one of six major national transplant centers by the National Institutes of Health and receipt of a three-year NIH grant totaling \$540,000.

Pediatrician John Kersey, director of the center, said the University's bone marrow transplant program will now have its own hospital unit (Station 41) and will be able to expand to include up to 50 patients a year. Since 1974, when the University's marrow transplant team was established, 70 transplants have been performed in space shared with other hospital units. Bone marrow transplantation was pioneered here in 1968 as a treatment for children with immune deficiency disease and was later found useful for treating severe aplastic anemia and leukemia.

Kersey said patients from throughout the Midwest and central states who are prospects for marrow transplants will be referred to the University since the other centers are located on the coasts. Also, he said, the new unit, which includes isolation facilities for each patient and a special team of nurses, will allow the University to accept young adult and middle-aged transplant patients for the first time.

In early work with the technique, the best results were obtained with children, but refinements in the procedure have allowed expansion not only to older patients but also to new diseases, said hematologist Dr. Philip McGlave, the marrow transplant team's newest member, who will head the adult program.

Patients with severe aplastic anemia and leukemia, rare but fatal diseases, have been the primary candidates for this treatment, in which liquid marrow donated from a healthy sibling is transfused into the patient. The common denominator in these conditions and other blood and bone disease for which the procedure is now seen to have potential is dysfunction of bone marrow, the body's factory for blood cells.

Unlike kidney and other transplants, bone marrow transplantation, a three-step procedure, does not involve surgery. First the patient is given chemotherapy and radiation treatment to suppress the body's immune system, thereby reducing the chances for rejection of the transplanted marrow. The marrow, which has many of the characteristics of blood, is drawn from the donor's hip region through a long needle. Finally the marrow is injected into the patient and finds its way to the bone through a sort of "homing" instinct.

Cure rates for severe aplastic anemia and leukemia patients after marrow transplants are encouraging, and recent improvements in the technique may soon make it the treatment of choice for both diseases, researchers say. Between 60 and 85 percent of the patients survive at least one year depending on the disease, the transplantation procedure used, and the center where it is performed. In contrast, before the technique became widely used, only 20 percent of the children who developed severe aplastic anemia, for example, could expect to survive one year.

An obstacle often encountered with the technique, particularly as it is used for aplastic anemia, is rejection. The recipient's immune system may recognize the marrow as foreign and reject it. Or alternately, in a condition known as "graft versus host disease,"

the marrow may recognize and reject the recipient, as foreign.

To suppress the body's immune system and avoid rejection, patients are commonly given total body irradiation, an effective but risky technique whose side effects — brain and lung damage, growth retardation, and nausea — may kill up to 30 percent of the patients undergoing the treatment.

However, transplant team members, Norma Ramsay, a pediatrician, and radiation therapist, Tac Kim, have developed a new preparatory method which shows much less risk of side effects — combining chemical therapy with a new form of radiation treatment.

The technique, called total lymphoid irradiation (TLI), spares other tissue while singling out for irradiation the body's lymph system where most of the cells involved in the body's rejection of transplants are located. The radiation stops at shoulder level and just above the genitals. Of the nine University patients with severe aplastic anemia who were treated with the process, seven have survived an average of one year. The two who died had infections prior to transplantation, said Ramsay.

In a new avenue of marrow transplant research, the technique — when combined with TLI — has shown great potential in organ transplanting, said transplant surgeon David Sutherland. Recognition of the foreign kidney by the recipient's immune system, which stems from the bone marrow, often leads to rejection of the transplanted organ in high-risk patients. Researchers hope to use bone marrow from the kidney donor to build a new immune system that would readily accept a transplanted kidney. In the past six months, it has been used on six patients who had rejected their first kidney transplant within a year, an indication that they might reject a second even more rapidly. It is too

early to know the long-term effects, said Sutherland, but so far none of the six has rejected the newest kidney.

The concept shows wide-ranging implications. If it is found that new immune systems can be "built," transplant surgeons could be less concerned about matching organs and recipients, Kersey said. It also shows the great versatility of marrow transplants, whose use may be

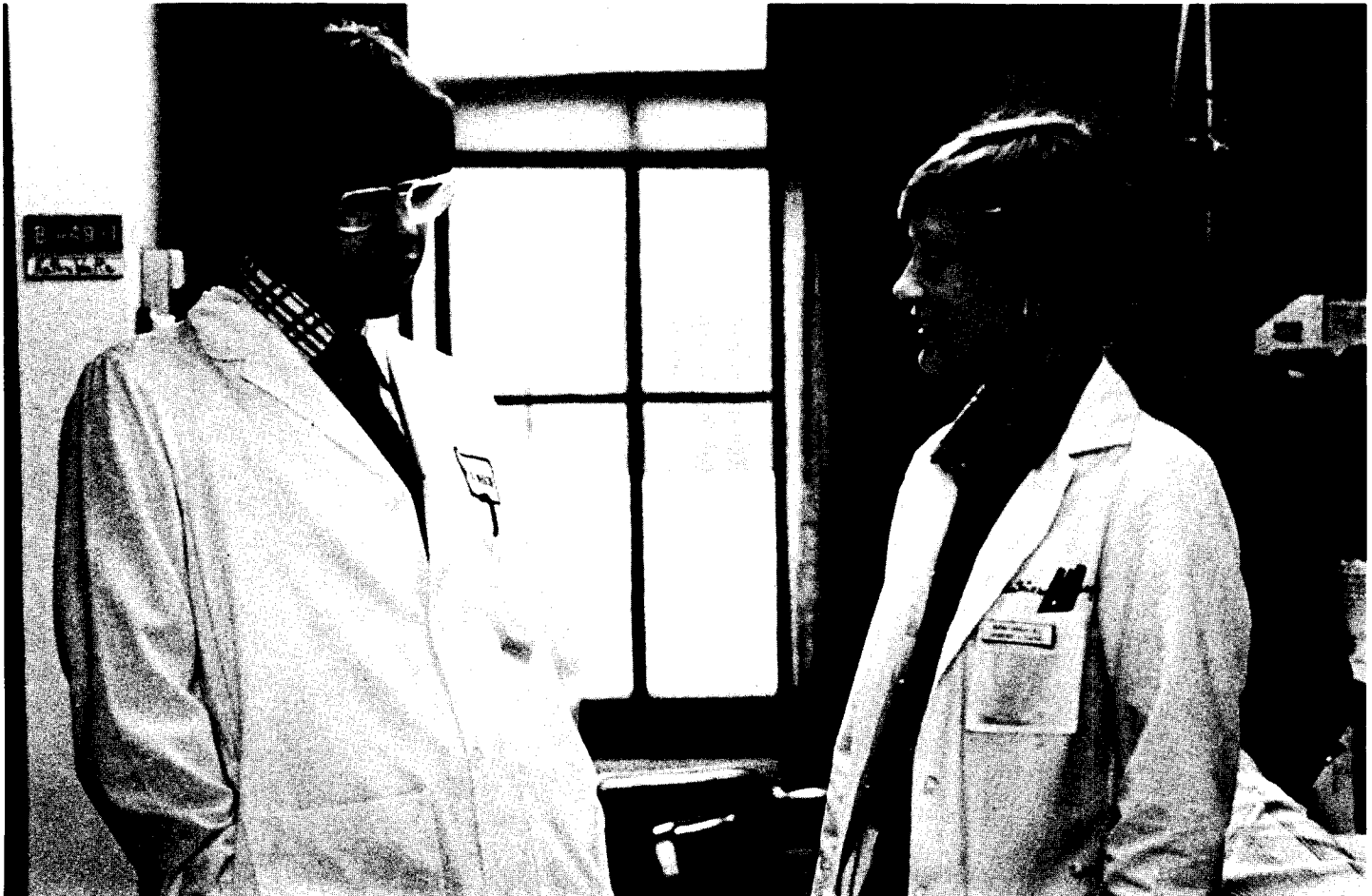
expanded to a great number of diseases, he said.

"Any blood disease or any disease of the immune system can potentially be treated by bone marrow transplantation," Kersey said. "There are many diseases that are potentially treatable, and we've seen an astronomical growth in bone marrow transplantation over the years as a result of the extension of the procedure to new diseases."

The bone marrow transplant center began only a few years ago with a \$17,000 start-up grant from the Minnesota Medical Foundation. Today the program supports itself with federal grants and patient fees, the latter being provided primarily by third-party carriers.

But the research must continue, and greater financial support is needed for further development and research.

Dr. Philip McGlave and Dr. Norma Ramsay, directors of the new Marrow Transplant Unit, discuss procedure.



Here's Enough on Skin to Suit Anybody . . .



Dr. Gentry examines a wart on patient at the Dermatology Clinic.

Contrary to popular lay belief, dermatology is not "only skin deep."

"The skin acts as a mirror of what's going on internally," explained Dr. William Gentry, Jr., associate professor of dermatology at the University. "In fact," he added, "skin disorders may relate to underlying internal diseases such as arthritis, lung, and intestinal disease."

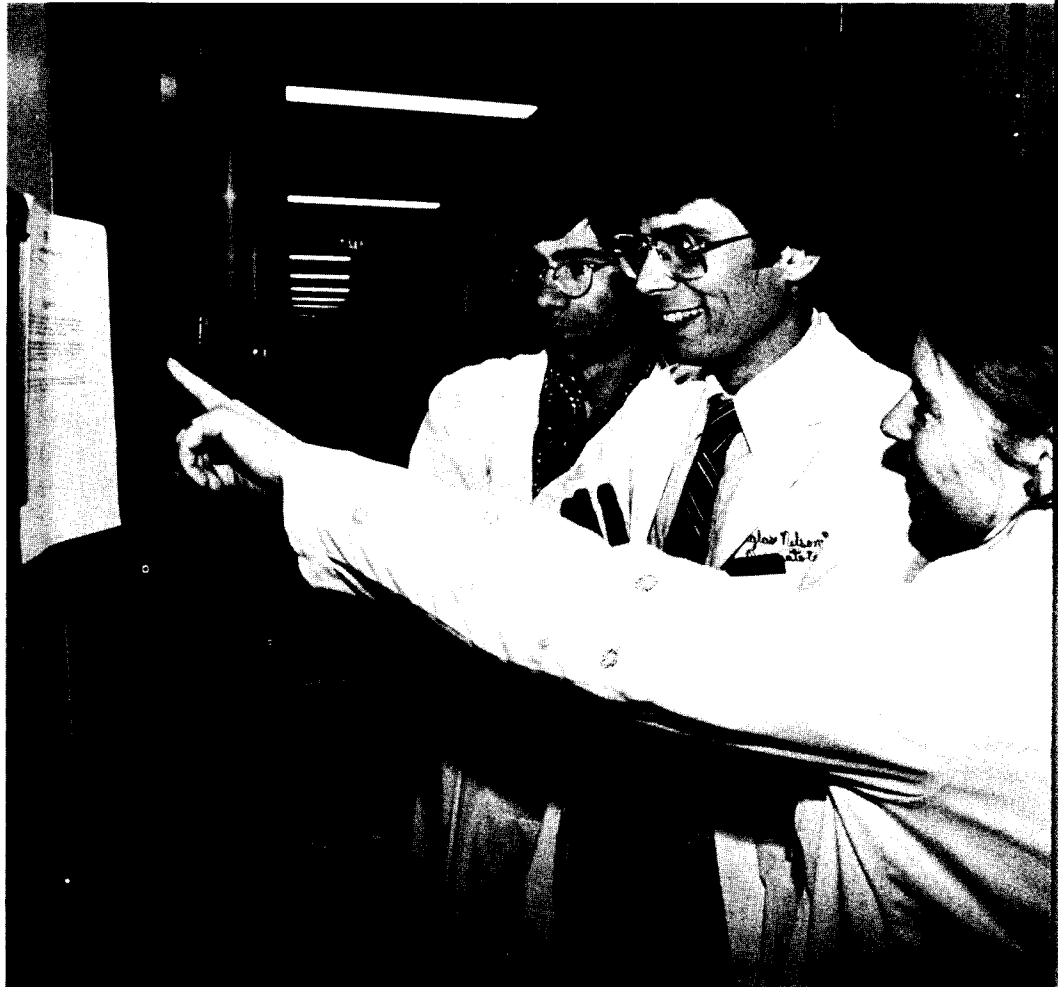
Textbooks on dermatology point out that the skin has been a neglected organ for many years. With few exceptions, until the end of the eighteenth century, physicians were little concerned with the skin, apart from the exanthematic eruptions of acute fevers. Until the end of the eighteenth century, diseases of the skin were considered "external diseases" and fell within the province of the surgeon or the quack.

During the nineteenth century, dermatology was one of many specialties which evolved from general internal medicine.

Now the specialty of dermatology, the science of the skin, embraces every aspect of the biology of skin, normal and abnormal. It is the collection of accumulated wisdom and knowledge of the fundamental biological processes as they involve the skin.

Skin disorders are not only uncomfortable, cosmetically unsightly, and, in some cases, very painful, but they may also be fatal if left untreated or undetected. Severe skin burns and infections that obstruct the normal functioning of the other body processes, extreme drug reactions, venereal disease, and rare skin disease like lupus, melanomas, pemphigus, and mycosis fungoides, may all be fatal to the patient.

Dr. Gentry maintains that there is a lot of negative psychological reaction to skin disease, and therefore patients suffer not only physiologically but emotionally from skin ailments. He



Med students examine patients' charts before Grand Rounds begin at the clinic.



Ultra Violet Light Cabinet

feels it's extremely important for physicians to be sensitive to the hardships that patients suffer from cutaneous disorders and begin diagnosis and treatment right away.

The U of M Dermatology Clinic is part of the U Medical School program in dermatology. The Dermatology Department operates the largest dermatology residency program in the country, with programs in all affiliated city hospitals. Approximately 17 residents are in the program currently and rotate every three months to affiliated programs at teaching hospitals in the Twin Cities. Residents in dermatology spend approximately four years after graduation in residency.

Dr. Gentry came to the University as a dermatology professor with Dr. Robert Goltz, who came here to head the department. Gentry started out in internal medicine after medical school but became interested in dermatology because he "liked the association between diseases of the skin and internal medicine diseases." "It's a specialty that cuts across all age groups

and all specialties," he explained.

He says that dermatology patients are very appreciative of the results. "You see, the disease is there for the patient and doctor to see, unlike other internal diseases," he stated. "That's why the specialty is so appealing; it's both challenging and threatening . . . the patient can tell right away if the treatment is working . . . the results can be very dramatic and very satisfying," he said.

As Gentry explained, dermatology reflects societal ideas about body and self-image; the dermatologist is confronted with the social-psychological aspects of skin and skin diseases as well as the pathology of skin disorders. "You know, there really is such a thing as the heartbreak of psoriasis," he commented. "It's a very unsightly and uncomfortable disease and can become so serious that patients who are hospitalized with it may have 75 per cent of their skin covered with sores. It can affect anyone at any age," he explained.

The Dermatology Department provides a major resource for treatment of psoriasis. Severely-affected patients are admitted to the hospital. During their stay, coal-tar ointment is applied to the skin which makes the skin more sensitive to the effects of ultraviolet (uv) light. The patient is exposed daily to the uv light by use of the UV Light Cabinet (lamp) in the Clinic's Light Treatment Center until the lesions are in remission. It usually takes about three weeks of therapy for there to be significant rehabilitation — so that the patient can go back to work or go home without a lot of unsightly sealing and lesions.

Dr. Gentry tells of a new therapy called "Puvapsoralen," a pill that the patient takes to make his skin photosensitive. Then, the patient is exposed to ultraviolet light two times a week at a different wave length than with the coal-tar treatments. Currently, this new treatment combination is under investigation here and nationally to determine its effects on remitting psoriasis. The treatment might be a last-resort therapy for patients who don't respond to coal-tar therapy.

The department also has facilities for testing for contact allergies and photo allergies, i.e., poison ivy, allergic reactions to chemicals and to the sun in conjunction with chemicals.

In addition, the department has an electron microscope which was used by dermatology pioneer Dr. Alvin Zelickson, who was famous for



Dr. Gentry adjusts UV equipment in preparation for treatment.

identifying the electronmicroscopic properties in normal and diseased skin in the 1960s.

In addition to the residency program here at the U, the Dermatology Department also sponsors weekly Grand Rounds, teaching conferences at which patients from the clinic with rare, unusual, or problematic complications are presented by their physicians to others at the conferences. These conferences are part of Continuing Medical Education (CME) training for dermatologists but are also attended by practicing dermatologists from the Twin Cities and the state, residents, medical students, faculty, and other specialists.

Head of Dermatology, Dr. Robert Goltz, joins Dr. Gentry in examining this young patient.



On an average, 30-40 physicians attend these conferences each week, and patients receive the benefit of private attention and consultation at no extra cost.

A lot of CME teaching here at the U involves educating family practice physicians, pediatricians, internal medicine specialists and even veterinarians whose practices all involve treating skin problems.

Dr. Gentry says that about 15 per cent of primary care practice visits involve dermatology problems. One of the conditions which dermatologists see in Minnesota is "swimmer's itch," a rash on the skin caused by parasites which infest the skin upon contact with lake water. Gentry says that some lakes in the state are infested with the parasite, which lives naturally in ducks and shellfish. The parasites in the water burrow into people's skin causing a skin reaction. He reassures people that it's nothing to panic about because the parasite disappears naturally on its own; man is not its natural host so the parasite can't live long in a human body.

When asked about the presence of skin cancer among Minnesotans, Gentry reported that there is a moderate amount of it in Minnesota compared to southern regions and areas of high altitude where skin cancer is more prevalent because of heavy exposure to the sun.

Another common problem

mentioned by Dr. Gentry as existing in Minnesota and across the nation is the scabies epidemic which has become world-wide. The scabies are parasites that infest the skin causing an itching rash. The disease is very communicable and spreads very easily, infesting children, adults, elderly, the rich, the poor . . . the disease knows no bounds. Treatment is relatively simple; medication is applied directly to the skin surface, and this procedure is usually very successful. Unfortunately the disease often goes untreated because its symptoms may mimic other disorders so that its clinical recognition may be delayed. It may spread among family members to neighbors, and across whole communities very rapidly. This epidemic has reached such world-wide proportions that dermatologists and public health officials classify it as "a public health emergency." Unfortunately, health experts have barely scratched the surface in containing this epidemic.

For this reason and because of a general lack of knowledge and understanding about the field of dermatology, Dr. Gentry, Dr. Goltz, and other professors from the Dermatology Department also serve as public educators appearing on TV and radio talk shows, and at CME conferences informing the public and other health care personnel of the scabies problem and other pertinent skin disorders.

Parents Come to Medical School

More than 300 persons attended the annual Parents' Day, Oct. 13, sponsored by the Minnesota Medical Foundation.

Parents of first-year med students came from as far away as Long Beach, California, Farwell, Mississippi, and Miami, Florida and as close by as the twin cities and many of the surrounding suburbs and counties.

Begun in fall, 1976, Parents' Day has become an important tradition at the Medical School. It's the only time that parents and their children can learn together about the Medical School experience and share in each other's observations and concerns. It's a time to relax, talk, reflect, and relate to each other. And it's a good break for students from the rigors of medical classes.

The day consists of a variety of structured and informal activities, including guided tours of the medical and research facilities by faculty and students, talks by the deans and by a current medical student, and a lunch and social hour.

This year's Parents' Day was highlighted with talks by Medical School deans Dr. Gault, Dr. Sullivan, and Dr. McCollister, by faculty professor Dr. David Hamilton, head of Anatomy, by first-year medical student Peggy Naas, and by MMF Director Eivind Hoff. The day concluded with some encouraging words by associate dean Dr. Pearl Rosenberg, who spoke on "The Care and Feeding of Medical Students."

The event is sponsored and financed by a grant from the Minnesota Medical Foundation with the assistance of the Medical Student Council.

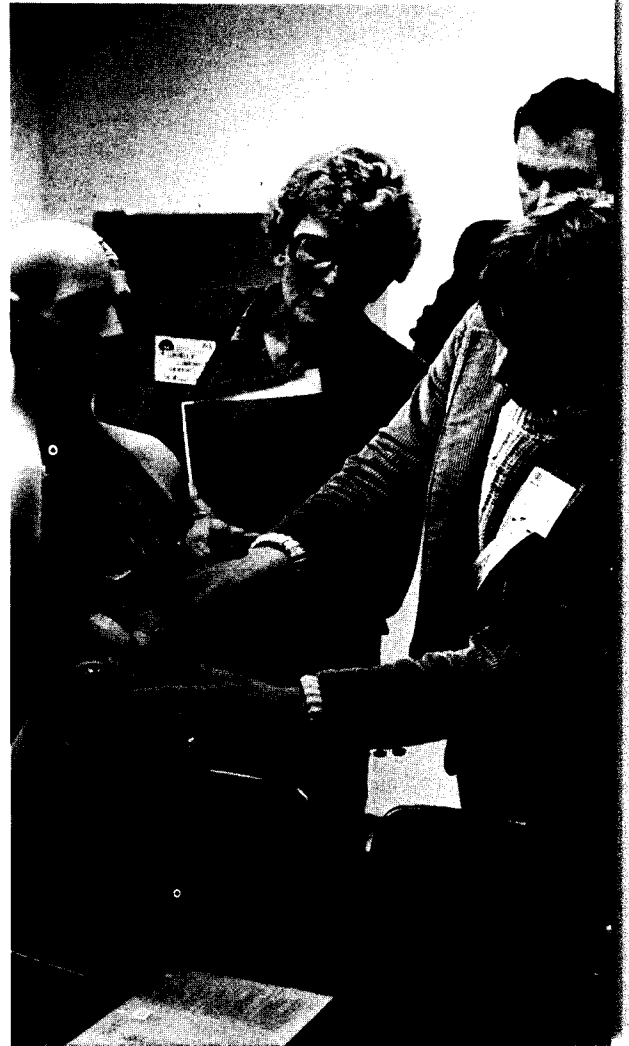


A time to relax and talk.

*Photos by Chip Meyer, free-lance
Minneapolis photographer.*



*Above:
Parents watch as Dr. Morris Smithberg,
Neuroanatomy, discusses the brain.*



*Parents and students examine the model in
the Learning Center in Diehl Hall.*

Editor's Note:

This year's first-year medical students earned a collective grade-point average of 3.48, a record high for entrants to the University of Minnesota Medical School at Minneapolis.

Out of the class of 239 students, 89 are women, nearly 40 percent of the class, representing an increase of 20.9 percent over the year. This marks the largest number of women in a single class in the history of the Medical School.

Some more interesting statistics about this first-year class include: 88 students received their undergraduate degrees here at the U of M; only 25 in the class are non-residents; of the Minnesota residents, about 75 percent of them are from the Twin Cities and suburbs.

This class has already distinguished itself in its academic achievements and in its distributional makeup. Following are some brief interviews with a few first-year students, selected at random. Perhaps, these cameos will provide a glimpse of the diverse backgrounds and interests that motivated these students to enter medical school.



Lorraine Ling

Born and raised in St. Paul, Lorraine, 22, graduated last year from the U with a degree in chemical engineering. Although she worked in the area of artificial organ design and had a bio-medical emphasis in her undergraduate work, Lorraine never really planned on attending medical school while she was an undergraduate.

She feels that her mother, who is a chemical engineer, was a strong influence in inspiring her to pursue a professional career. "From my mother, I learned that a woman can have both a family and a career. I guess you could say she was a good role model," Lorraine said.

Although Lorraine thought about becoming a doctor in high school, she found math and chemistry more exciting.

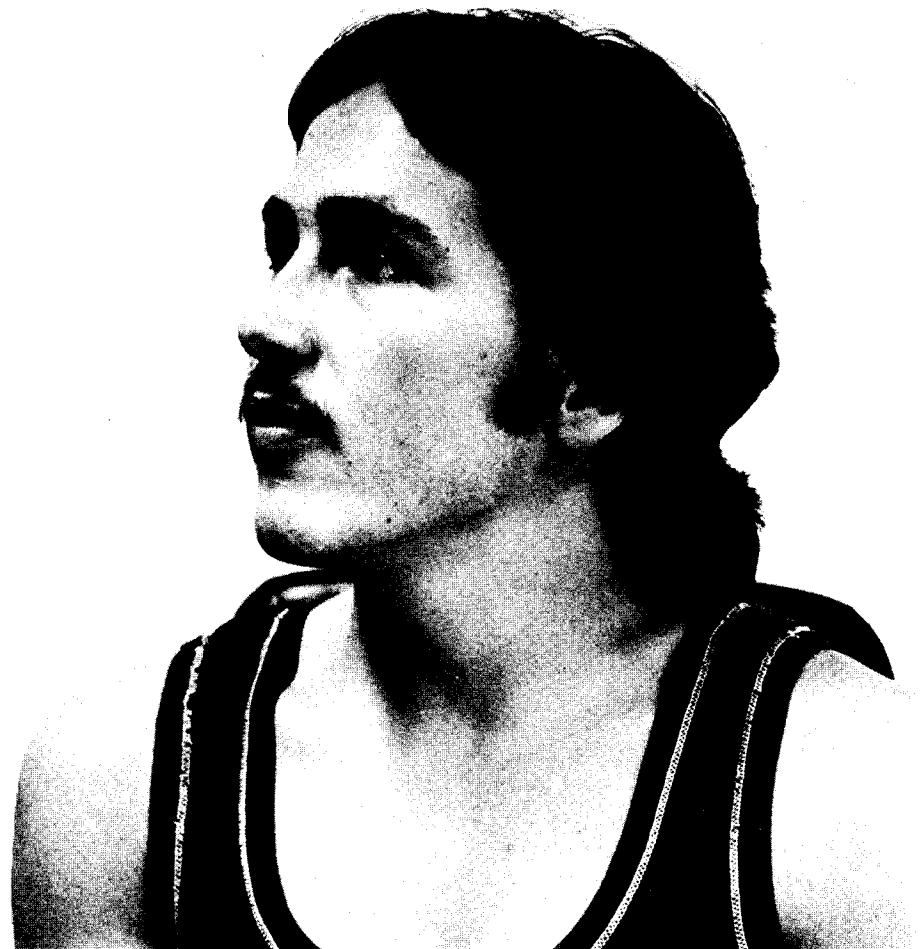
Unlike many of her fellow students,

Lorraine never spent her summers working in the medical or hospital fields but rather preferred to devote her time to traveling and learning new languages. She traveled to Europe and lived as an exchange student in Italy. She also visited Taiwan and studied Chinese. During her undergraduate years at the U, she was an orientation leader and a resident advisor in the dorms. She said that her experience working with people during her summers led her to realize gradually that she preferred to work in a profession that allowed her greater contact with people. The field of medicine provides her with the intellectual stimulation and scientific challenges, as well as the human contact that she prefers.

"You don't get the same kind of contact with people in a lab as you do in medicine," she explained.

Freshmen in Medical School

Lorraine's brother, Lewis Lang, is a fourth-year medical student here at the University. Coincidentally, Lorraine's brother met first-year student Jeff Weitzel in Denmark this past summer. Fellow classmates, Lorraine and Jeff struck up a friendship in class and discovered coincidentally during a casual conversation that they both shared a mutual friend — Lorraine's brother.



Jeff Weitzel

As with Lorraine, Jeff Weitzel, 22, graduated last year from the University, but received a bachelor's degree in microbiology. And unlike Lorraine, Jeff has always wanted to work in medicine, as far back as the sixth grade.

Jeff claims that his mother, an R.N. in staff education the past 22 years at Abbott-Northwestern Hospitals, introduced him to medicine when she took him for a visit to the diagnostic lab at Abbott Hospital. He was working on a sixth grade science project on blood and circulatory systems, and his mother felt that it would be very helpful if she

could introduce him to the medical technologist who could assist him with his project.

From then on, Jeff became entranced with medicine and aspired to become a medical technologist. He worked in the lab himself and later went on to major in microbiology in college. During his last two years in college, Jeff worked at Abbott-Northwestern Hospitals as a computer operator in the Lab and then for his last year as a pathologist's assistant, helping pathologists at autopsies.

"I was testing the water, so to speak, to see if I could stomach medicine," he explained. "And I learned that I could and that I was fascinated with it! That experience was one of the major deciding factors in my choosing medicine, rather than attending graduate school in microbiology research."

Jeff explained that his longtime friend, the chief medical technologist at the hospital encouraged him to become a doctor. "She felt that medicine was better suited to my abilities rather than medical technology."

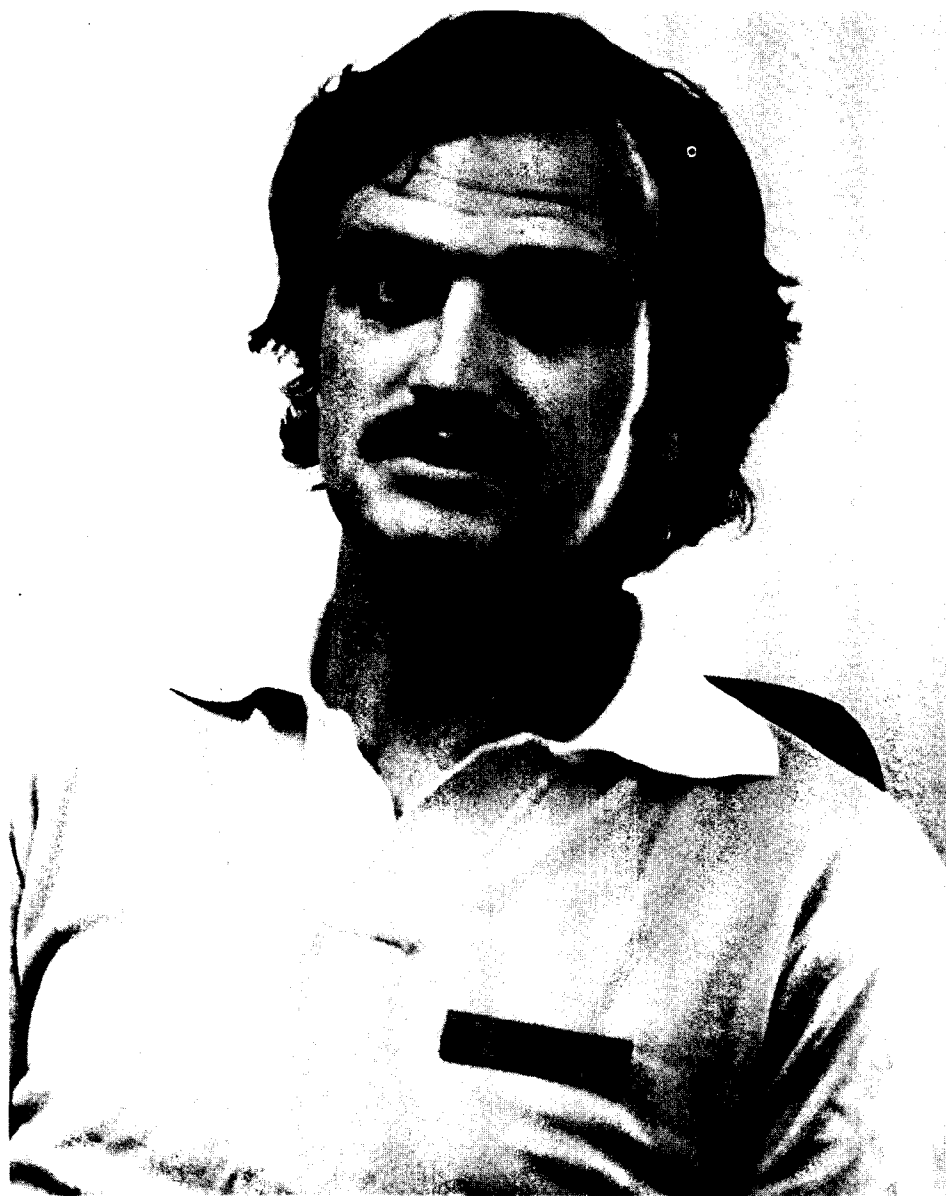
Jeff is very grateful to his mother who first showed him how to use a microscope and the chief medical technologist at the hospital for their encouragement and support. "It's a good thing that they took such an interest in me," he said.

He also spent a day with his family doctor, family practice physician Dr. Sherman B. Child ('52), who often encourages students to go into medicine by inviting them to spend one day with him in his clinic observing his practice.

"That was another very positive experience that also reinforced my decision to go to medical school."

Besides being interested in medicine, Jeff is by no means one-dimensional. He, like Lorraine, loves to travel and spent a month living with a family in France and the rest of the time traveling around Europe for the past two summers. He also enjoys photography, tennis and gymnastics.

Jeff has always lived in Minneapolis.



Tim Schoenfelder

Like the other students described above, Tim, 29, has traveled extensively and has worked in numerous capacities abroad.

He received a B.A. in biology from Macalester College in 1972, and an M.S. in entomology from U of M St. Paul School of Agriculture. He has conducted research in biological control of forest insects as an undergraduate. While he was a graduate student, Tim studied tropical ecology in Costa Rica. Later he traveled to Morocco under the aegis of the Smithsonian Peace Corps and served as an instructor of lab entomology for an agricultural institute there.

After 13 months he transferred to West Africa (Togo) where he worked as a high school biology teacher in the Bush. He was asked to teach a course in nutrition, human anatomy and physiology there. This course combined with the fact that he was

living in a part of the world afflicted with all kinds of diseases, served to spark his interest in and study of medicine. He observed a lot of diseases in West Africa and even treated himself for malaria after diagnosing his own symptoms.

Besides learning a great deal about disease in Third World countries, he became fluent in French and decided that rural medicine abroad appealed to him.

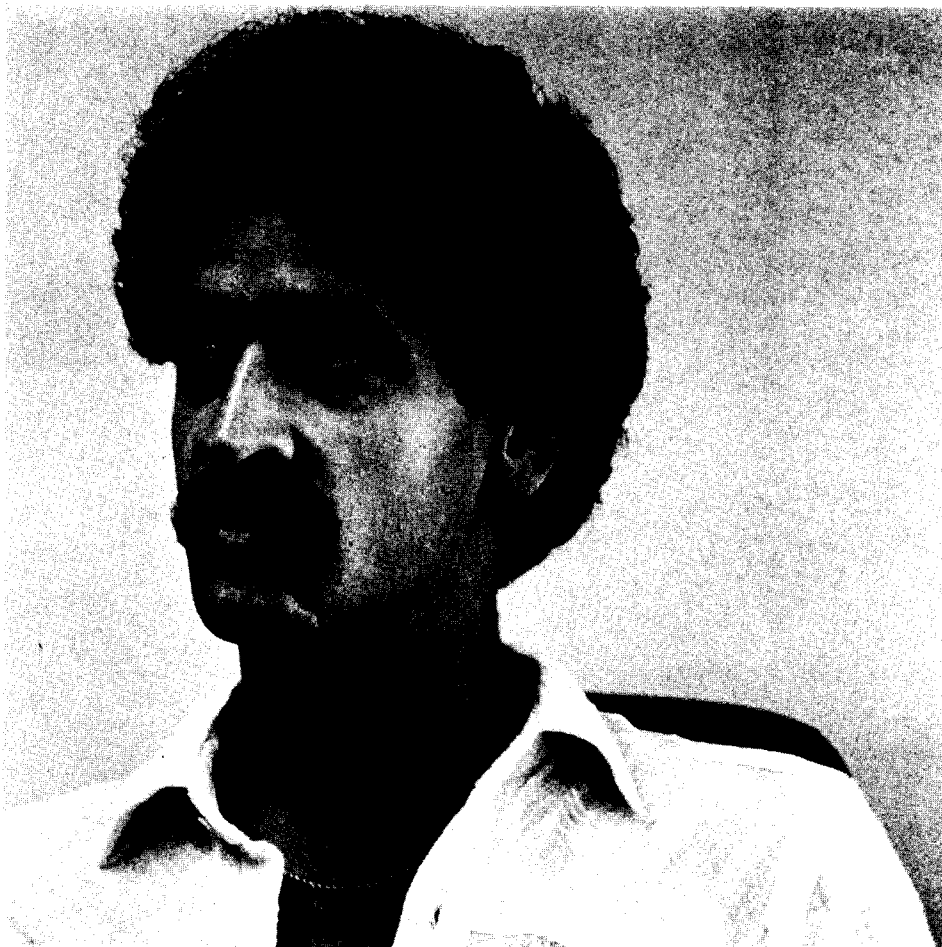
Two of Tim's brothers, both alumni of the Medical School, Patrick, '78, and Kevin, '79, are now practicing physicians themselves, and they also influenced Tim's decision to return to Minnesota and attend medical school here. Patrick is a radiologist at Mayo Clinic and Kevin is an orthopedic surgeon at University Hospitals in San Francisco.

Upon returning a year ago, Tim took some medical courses and then applied

and was accepted to medical school.

Tim would like to work as a rural physician and hopes to develop a rural physician's program whereby doctors could rotate services among Third World countries.

His outside interests include developing foreign language skills in French and Spanish, playing the piano and guitar, raising honey bees, fishing, canoeing and backpacking, and other outdoor activities.



Brent Benjamin

Another language enthusiast, Brent Benjamin of St. Paul, 23, graduated from the U of M in 1978 with a bachelor's degree in Spanish.

Always interested in law and politics, Brent lived in Chile in 1973 as part of the American Field Service program; he was an exchange student for a year during high school.

Throughout his undergraduate years, he considered going to medical school. After graduating, he worked for a year as a brakeman for the Burlington Northern Railroad and eventually decided that he would attend medical

school.

He says that family illness as well as a strong interest in working with people motivated him to become a physician.

In addition, he worked in St. Paul Ramsey Hospital as an orderly and research assistant during his college years.

His other interests include sports, dancing and music.

Brent has expressed an interest in surgery, cardiology or neurology.

Newsbriefs



Ronald McDonald™ House Opens

The Ronald McDonald House grand opening was October 20-21. This 8-bedroom home is located close to the University of Minnesota Hospitals, and will serve as a "home away from home" for out-of-town families with children being treated for cancer. The philosophy of the Ronald McDonald House is that of a "home" for parents while their children undergo diagnostic tests, treatment of cancer, and bone marrow transplantation. The parents will be able to function in a near normal manner during this episode in their lives. In this home setting they may share in conversations with other parents in a congenial home atmosphere. They can do their "own thing" with food preparation.

The Ronald McDonald House is a project of the Children's Oncology Service of the Upper Midwest, Inc. (COSUM), a Twin Cities group of doc-

tors, parents of patients, and all other interested persons. The non-profit group has used contributions from individuals, corporations, foundations, businesses, and civic and community service groups to purchase and renovate the house. The leading contributor to the house is the McDonald's Restaurant Association, through their in-store promotion during the last several years.

Arrangements for families to use this facility can be made by calling the Ronald McDonald House, (612) 379-1278. Cost to the family will be \$5.00/night. All linens and dishes are furnished. Off-street parking is available for house guests. The House is managed by a young couple who receive the use of a 2 bedroom apartment in lieu of a salary.

House tours are available on a scheduled basis. If interested, please write: Ronald McDonald House, 621 Oak Street S.E., Mpls., MN 55414.

Quie Named Chief of Staff

Dr. Paul Quie, professor of pediatrics, laboratory medicine and pathology, and microbiology, has been elected chief of staff at University of Minnesota Hospitals and clinics.

Quie is a member of the board of trustees of the Minnesota Medical Foundation. He is an American Legion Heart Research Professor. Dr. Quie succeeds Dr. Paul Winchell, professor of medicine.

Vet Med Dean is Spink Lecturer

"Animals, Aging and the Aged," was the theme of this year's Wesley W. Spink Lectures on Comparative Medicine, presented this fall at the University of Minnesota.

Dr. Leo K. Bustad, dean of the College of Veterinary Medicine at Washington State University, spoke at the Duluth, St. Paul, and twin cities' campuses.

Bustad is a vocal advocate of the importance of companion animals to the mental and physical well-being of people.

"Our present social structure," he said, "encourages us to separate old people, for example, from animals at a time when they may be the only source of unconditional love, adoration and unqualified acceptance."

His college and other groups in Pullman, Wash., have formed a People-Pet Council to educate children, utilize pets in therapy programs, and promote companionship with pets.

While director of the Comparative Oncology Laboratory at the University of California at Davis, Bustad was involved in the 1973 discovery of a virus which causes lymphosarcoma in

Gibbon apes.

Dr. Wesley Spink, a Duluth native and graduate of Harvard Medical School, was a member of the University of Minnesota Medical School faculty from 1937 to 1973, retiring as Regents' Professor of Medicine and Comparative Medicine. His close association for many years with the University's College of Veterinary Medicine culminated in the 1956 publication of "The Nature of Brucellosis."

His latest book, "Infectious Diseases," was published this year by the University of Minnesota Press.

The biennial lectures, inaugurated in honor of Spink in 1971, are published by University Press. They are presented by internationally-famous experts in comparative medicine and deal with comparing various species of animals with human beings in the area of health and disease.

Lassman Honored by Local Organization

Dr. Frank Lassman, professor in the department of otolaryngology, communication disorders, and physical medicine and rehabilitation, was honored recently by the Minnesota Speech-Language and Hearing Association for distinguished contributions in scholarship and professional leadership.

New Med Alum Officers

New officers of the Medical Alumni Society were elected at the Annual Meeting this summer. They include: Dr. John Mulvahill, president; Dr. James Brown, vice president; and Dr. Konald Prem, secretary-treasurer. Dr. Mulvahill

is a psychiatrist in private practice in Minneapolis, and Dr. Brown is an ophthalmologist in St. Paul. Dr. Prem is head of the U of M Department of Ophthalmology-Gynecology.

McBride Elected Officer of Heart Assoc.

Dr. John McBride, assistant professor of medicine, has been named secretary of the board of directors of the American Heart Association, Minnesota Affiliate, Inc. He has been a volunteer for the association for eight years, serving as chairman of the community programs committee and as a member of the executive committee.

Hinsvark Named Dean of Nursing

Inez Hinsvark was appointed acting dean of the University's School of Nursing after the death this summer of former dean Irene Ramey. Hinsvark has been associate dean since last February.

Ramey, who had been nursing dean since 1975, died of cancer at University Hospitals on June 28.

Researchers Win \$275,000 Grant

Researchers at the University of Minnesota have been awarded more than \$275,000 by the American Cancer Society.

The two-year grants are divided among four researchers, with the largest going to James W. Bodley, professor of biochemistry in the University's Medical School. Bodley received \$112,352 to conduct research on amino acids.

Others named in the grant awards are Warren L. Rottman, assistant professor of genetics and cell biology, \$75,000; Joseph R. Lakowicz, tox-

icologist at the Gray Freshwater Biological Institute, \$37,974; and Charles F. Moldow, associate professor of medicine, \$50,000, two-time winner of the Distinguished Teaching Award.

Moldow's grant is an institutional research grant to provide "seed" money for promising new ideas, especially by junior investigators or new faculty members. Bodley, Rottman, and Lakowicz received grants for further research and clinical investigation.

Goetz Honored by Diabetes Association

Dr. Frederick Goetz, director of the Clinical Research Center at the University of Minnesota Hospitals, received the Upjohn Award for Education in Diabetes for 1978-79.

Goetz, professor of medicine, received the award at the annual meeting of the American Diabetes Association.



Alumnotes

Med. Alum Reception in D.C.

The Minnesota Medical Foundation along with medical alumnus Dr. Marvin Korengold ('50) sponsored a medical alumni reception, Nov. 5, in Washington, D.C. at the Hilton Hotel.

The reception was held in conjunction with the annual meeting of the American Association of Medical Colleges (AAMC).

Dean N. L. Gault and Dean John W. LaBree were guests along with 30 friends and medical alumni at the reception.

A clinical professor of medicine at the University of Minnesota, Fuller has written the book, "Physician or Magician," in collaboration with his son Frank, a graduate of the University.



Bussman

John W. Bussman, '47, a pediatric cardiologist in Portland, Oregon, reports that he is chairman of the National Professional Standards Review Council, editor of two books on peer review, and a member of the National Council on Health Technology Assessment. He is also vice president of the American Heart Association and was recently elected to membership to the Institute of Medicine of the National Academy of Science.

He has three sons and three daughters.

1950s

Edwin O. Wicks '50, wrote the following report on the recent '50 M.D. Class Reunion in Minneapolis:

The 30th '49MB/'50 MD Class Reunion the evening of May 18 opened with a reception, conversation, reintroductions and cocktails in the scenic outlook lounge of the Minnesota Alumni Club

class for the Minnesota Medical Foundation. It was revealed that despite being at the height of earning capacity only 5 to 7 percent of the class was making contributions for enrichment of the Medical School's programs and relief of student financial distress, the same percentage that attends reunions.

Saturday, May 19, the group reconvened on campus at the Health Sciences Center for the CME presentation "New Horizons in Minnesota Medicine" and was joined by Jim Doyle, presently of Rochester, but in process of moving to Arizona City. During the lunch break of the enlightening seminar the group picture was taken and at the close of the day, tentative plans were laid for a better attendance at the 35th reunion in 1984 at which time attention will be paid to big brotherism.

high atop the IDS building in downtown Minneapolis. Prominent faculty members, physicians from throughout the area, and spouses joined in the conviviality, with Dean Neal Gault greeting each person present.

The class dinner was in the Orion Room with Lillian Wong of San Francisco as presiding officer, Bob Lundblad of Yakima vice-chair, and Ed Wicks from Kansas City as secretary-treasurer. Milly Wicks, Range native, also attended. During table-talk the names of at least half the class were mentioned along with anecdotes from med school days, stories about favored faculty were recalled, and updates provided for a dozen classmates. In serious vein, known deceased were listed. Also discussed was the relatively dismal support by the

(From left) Jim Doyle, Bob Lundblad, Lillian Wong, and Ed Wicks attend their Class of '50 Reunion in Minneapolis.



1940s

Harry A. Wilmer, '40, is a professor of psychiatry at the University of Texas Health Sciences Center, in San Antonio. He is also the director of the Therapeutic Community for Schizophrenics at the Veterans Administration Hospital.

His specialty involves him in performing psychoanalysis and dream analysis.

He also pursues an active interest in film and television. He was director of the International Film Festival Biennial Symposia held in Switzerland, Mexico, Great Britain, and Canada.

Besides his interest in film and television, Dr. Wilmer also spends his spare time painting, and writing plays and books.

Benjamin F. Fuller, '45, of St. Paul is author of a new book in which he describes the present crisis in patient care and prescribes possible solutions.

George R. Petterson, '51, Rochester, was serving as Director of Public Health for Olmsted County, when he was among the first of Gov. Quie's appointments as Commissioner of Public Health.

Mitchell J. Rosenholtz, '56, writes, "Here's a brief annual report. 1978 was a consolidating year as I became virtually fully-involved as a faculty pathologist at the University of Missouri-Columbia Medical Center. Can report a delightful visit in July while on vacation in the South with Dr. James R. ("Jim") Dawson, my former pathology mentor, now retired in Jackson, Miss. He's as charming and energetic as ever.

"Only other report is my selection as state treasurer of Common Cause.

"Hope to drop by next summer — my AAMC days have now officially ended-damn!"

1960s

Wendell G. Geary, '60, a physician in general practice, has spent most of his career practicing in Indonesia. He left Jakarta on an 18-month home leave and is returning to Minnesota with his wife and his two sons who will be attending Bethel College. They traveled through Israel, Greece, England and Florida before arriving here at the end of the summer.



Vandersteen

Paul R. Vandersteen, '62, was appointed Chief of the Division of Dermatology at the University of North Dakota School of Medicine.

Marshall J. Zamansky, '66, was recently appointed to the Department of Surgery at Worcester Hahnemann Hospital in Massachusetts. A specialist in eye, ear, nose and throat diseases, he was a resident in general surgery at the Bellevue Hospital Center and in ear, nose and throat diseases at the Mt. Sinai School of Medicine, both in New York City. He served in the U.S. Army Medical Corps in Southeast Asia, is a fellow of the American Academy of Facial, Plastic, and Reconstructive Surgery and is certified by the American Academy of Ophthalmology and Otolaryngology.

Ross S. Olson, '67, writes that he is the only missionary doctor at Evangel in Hong Kong (out of a medical staff of about 13 full-time and part-time physicians). He says that he has been accepted back into the Pediatric Training Program at the University of Minnesota, beginning in July 1980 and he plans to complete this training during a two-year furlough. He explained that it

was hospital practice to discourage the appointment of missionaries to specialist positions at Evangel, and that it is still hoped that all leadership will be assumed by local people by 1985. But full-time specialists needed in several areas have not yet been recruited despite an extensive search. Therefore he hopes that he might be recruited as the pediatrician in the fall of 1982.

He also reports he is thankful that his family did not need to move this summer. The lease on their apartment was finally renewed although the rent jumped from U.S. \$500 to \$900 per month. The unbelievable cost of housing missionaries in Hong Kong is forcing reconsideration of a number of options by the mission, he says.

Richard E. Latchaw, '68, is performing neuroradiology and otolarungologic radiology at the University of Minnesota, where he was recently promoted to associate professor and became head of the Postgraduate Education and Resident Training for the Radiology Department.

His recent work has been primarily in computerized tomography and in embolization of spinal cord, facial and cranial Neoplasms and arteriovenous malformations.

1970s

George E. Miller, '71, completed a fellowship in retina and vitreous surgery at Wills Eye Hospital, Philadelphia, and is returning to practice in Virginia, Minnesota.

Kathryn Green, '71, has been appointed director of neurology at St. Paul Children's Hospital.

She directs the hospital's outpatient neurology clinic, the electroencephalographic laboratory, and is responsible for inpatient neurology services.

She is an assistant professor in neurology at the University of Minnesota and serves on advisory committees of the St. Paul Rehabilitation Center and Homeward Bound, a 24-hour home for developmentally-disabled children.

J. Michael Coleman, '73, has been appointed to the medical staff of St. Paul Children's Hospital as associate director of newborn medicine. He shares the responsibility for the medical care of infants in the Neonatal Intensive Care Unit and is presently involved in research in neonatal respiratory control.

Roger C. Toffle, '74, is chairman of the Obstetrics/Gynecology Department at the Naval Regl. Center in Naples, New York. He published an article entitled, "Management of Repeat Cesarean Sections," in the Journal of Reproductive Medicine.

W. Benton Boone, '74, is national chairman of the Ophthalmology section of the National Medical Association. His area of concentration is immuno-ophthalmology uveitis.

In Memoriam



Ramey

Irene G. Ramey, dean of the School of Nursing at the University of Minnesota, died of cancer June 28 at University of Minnesota Hospitals. The 58-year-old dean had been hospitalized about a week.

Dr. Ramey had been dean of nursing since 1975, and before that had been dean of the College of Nursing at Texas Woman's University in Denton, Texas.

A Texas native, Dr. Ramey received a bachelor of science degree in nursing and a master's degree in hospital nursing service administration from Teacher's College at Columbia University in 1958, and a Ph.D. degree from New York University in 1968.

Before becoming dean at Texas Woman's University she was professor and chairman of medical-surgical nursing at the University of Pittsburgh school

of nursing, and director of nursing service at Presbyterian-University Hospital in Pittsburgh.

"The University of Minnesota and its School of Nursing have lost a courageous woman and a distinguished educator in nursing education," said University President C. Peter Magrath.

"Irene Ramey's legacy will be reflected in the new nursing and pharmacy building now under construction, in the visions she brought to the changing needs of nursing care education in Minnesota, and in her decency of spirit and human kindness," he said.

"There is no doubt that Dean Ramey's tenure at Minnesota has resulted in improved educational programs in nursing," said Lyle A. French, vice president for health sciences. "Her impact

will not soon be forgotten."

Dr. Ramey was an elected member of Sigma Theta Tau, Pi Lambda Theta, and Kappa Delta Pi, and a fellow in the American Academy of Nursing.

Theodore H. (Ted) Rowell, a former trustee of the Minnesota Medical Foundation, died this fall of coronary problems at the age of 74.

Rowell was a 1928 graduate of the University of Minnesota's Department of Pharmacology and has been a life-long supporter and friend of the University and of the Minnesota Medical Foundation. He served on the MMF Board from 1962 to 1966, and as a donor, underwrote numerous student aid programs at the foundation, one of which has been designated the Ted Rowell Memorial Loan Fund.

He and his father, Joseph, a commercial fisherman, founded the Rowell Pharmaceutical Company in 1935. They developed a method for processing the livers of burbot fish into potent vitamin products. The company has developed into a major specialty pharmaceutical company which manufactures drugs for gastroenterology, colon rectal surgery, psychiatry, and dermatology purposes.

Led by Ted Rowell Sr. the company has always been a strong supporter of medical education and research, with the goal of trying to contribute 5 percent of its gross sales to medical and pharmaceutical research.

The company has not only distinguished itself through its generous support of research and medical education but also as a pharmaceutical

manufacturer. It was the largest supplier in the world of natural quinidine sulphate, used in medicines to regulate heart beats, and it developed an oral dosage form for para-amino salicylate for the treatment of tuberculosis.

Ted Rowell Sr. was recognized for his many contributions and outstanding service to the University and to the medical community when he was awarded the Outstanding Achievement Award in 1959 by the University of Minnesota.

When he retired in 1966, his son Ted Rowell, Jr. took over the company and has pledged to carry on the fine traditions established by his father.

Philip Gotlieb, '22, died in May of a myocardial infarction in Coral Gables, Florida.

He was 87 and was formerly a physician in private practice.

Olga Hansen Litzenberg, '16, died Aug. 5 in Fair Oaks Nursing Home. An internist and member of the Nicollet Clinic from its founding in 1921 until 1970, she was also a faculty member of the U of M Medical School.

She was former chief of staff of Eitel Hospital and former consultant in cardiology at Glen Lake Sanitarium. In 1973 she was awarded the Harold S. Diehl Award.

She was the widow of Dr. Jennings C. Litzenberg, a well-known obstetrician/gynecologist who preceded her in death in 1948.

Born in South Dakota, she was the daughter of pioneers who settled in Dakota Territory after they immigrated here from Denmark.

She was 89 at her death.

Leo G. Rigler, 83, a pioneer of modern radiology and former head of the University's Radiology Department, died Oct. 25 of heart failure in Los Angeles.

Described by his peers as a "giant in medicine," he was instrumental in the early development of radiology.

"Dr. Rigler was more responsible than any other single person for promoting and developing the area of radiology as a major specialty," said Dr. Eugene Gedgaudas, head of the U's Radiology Department.

"He developed a highly-academically oriented radiology program here at the U that produced the largest number of academic radiologists and chairmen of radiology departments than any other program in the

country," said Gedgaudas.

A 1920 graduate of the U of M Medical School, Rigler was born and raised in Minneapolis. He did post-graduate training in radiology here at the University and in Stockholm and Vienna.

He served as head of the University's Radiology Department from 1927 to 1957. Later he served as executive director of Cedar Sinai Hospital in Los Angeles.

In 1963, Rigler became professor in residence at the University of California at Los Angeles, where he was founding director of the Leo G. Rigler Center for Radiological Research.

Memorial gifts may be sent to the Radiology Fund of the Minnesota Medical Foundation, University of Minnesota.

Donald W. Cowan, '31, retired head of the Boynton Student Health Service at the University of Minnesota, died June 25 of a heart attack on the golf course. He was 72.

He was a specialist in preventive medicine, allergy, and public health.

Born in Rochester, Minnesota, he received both an M.D. degree and Master of Science degree in physiology from the University of Minnesota in 1931.

In 1937, he became a physician with the Student Health Service at the University and an instructor in preventive medicine and public health in the medical school. He became an associate professor and the first assistant director of the Health Service in 1946, and on Dr. Ruth E. Boynton's retirement in 1961, he was promoted to full professor and appointed Health Service Director.

His health service administration was marked by expansions in services and in facilities. His efforts encompassed the entire gamut of college health roles from clinician through researcher and teacher to administrator, builder and organizational leader.

As part of an international health service exchange he traveled to Ireland and England, where he became one of only three Americans ever invited to become a member in the British Student Health Association.

He held numerous memberships in many prestigious organizations and published several reports and articles.

Jacob J. Ahlfs, '22, died this past May. He was formerly a physician in general practice in the Dakotas and Minnesota and retired at the age of 70 because he was suffering from degenerative arthritis.

His grandson, R. Craig Christianson, also an alumnus of the University Med School ('72) is a psychiatrist in Delano, Minnesota.

Paul M. Vickers, '36, died this summer. He was a proctologist in private practice in Oklahoma City, Oklahoma.

James H. McGranahan, '24, died July 25 in Long Beach, California. He was 82.

He was a physician in family practice in Long Beach, and had served as a medical officer in the U.S. Army in World War I, in the U.S. Marines in World War II and in Korea. He retired from military service in 1957 and went into private practice.

Robert Perry Richardson, '35, died July 21. He was 79.

He was formerly chief of surgery at Selfridge Air Force Base in Mount Clemens, Michigan, and was resident surgeon at Wyandotte General Hospital, Wyandotte, Mich., and at Annapolis Hospital, in Wayne, Michigan.

He practiced in Wayne, Michigan for 20 years.

Rigler



'Sully'

By Tom Patterson

The popular term for the formal biographical sketch of an academican is "curriculum vitae." W. Albert Sullivan, M. D., doesn't seem to have one.

"Sully" doesn't stand much on ceremony. If I called this little biographical sketch of him a "curriculum vitae," he probably wouldn't even read it. (Which, come to think of it, isn't such a bad idea. If he doesn't read it, he won't be tempted to edit it and needle me about grammatical errors).

Editing is just one of many interests and talents of Dr. Sullivan. He served as volunteer editor of the University of Minnesota *Medical Bulletin* for eight or ten years. (One tends to guess at such figures without a curriculum vitae for handy reference. Sully would probably remind me that while his failure to provide me with a "C.V." makes my job more difficult, it is my failure to research back issues of the magazine that results in inaccurate data being printed in the magazine. Okay, so it was 10½ years, from November, 1958, through June, 1969).

W. Albert Sullivan, Jr., was born and brought up in a small town in Tennessee. He can milk a cow and hitch up a team of horses. For a while, when he was in grade school, he rode a horse to school. His father was a surgeon who was lost in the Bermuda Triangle when the ship he was on vanished without a trace. Sully doesn't subscribe to theories of supernatural involvement in the Bermuda Triangle and states simply, "The ship must have blown up and sunk."

Young Sully was graduated from the University of the South in Sewanee, Tenn. He had wanted to go to medical school right after finishing his undergraduate training, but the U. S. Navy had expressed an interest in putting him aboard a destroyer in the Atlantic. He already had the ticket for

the trip to the point of embarkation when he received orders to report to Tulane Medical School instead. Over the years he has told thousands of medical students that he can only appreciate philosophically what they went through in applying for medical school. He can't rely on his own experience to empathize with them because he was *ordered* to go to medical school by his government. It is only one of many jokes for which he is remembered warmly by thousands of University of Minnesota medical alumni.

Sullivan first came to the University of Minnesota Medical School in 1946, between his junior and senior years of medical school at Tulane, to work on a research project with Dr. Owen Wangenstein. He continued to study surgery at the University of Minnesota over much of the next 10 years, with time out for about 18 months at an American hospital in Paris and two years in a MASH unit during the Korean War. He says that the popular TV show "MASH," for "Mobile Army Surgical Hospital," takes a few liberties in describing the way things were, but then adds, "it isn't so far off, at that."

Sullivan received his M.S. degree in surgery from the University of Minnesota in 1956 and joined the department of surgery the same year. He has known most of the University of Minnesota's medical students since 1947.

He became assistant dean of student affairs in October, 1968, and was promoted to associate dean in 1973. In the dean's cadre he has also been in charge of admissions, in which capacity he organized the preparation of materials for review by the admissions committee and personally interviewed thousands of hopeful applicants to the medical school. Sully developed a reputation for tough, if not tricky, interviews. He insists only those who

tried to fake their way through an interview would ever complain about his questions and he says that stories that he once asked a candidate to open a window that had been nailed shut, and that he once hid under his desk and waited for a candidate, are simply untrue.

Sully told the *Minnesota Daily*, "Some people can't be honest with themselves because they are so impressed with their strengths or weaknesses. I don't think anyone ever knows at first who they are in life. It's difficult to find out and nobody can tell you how." Sullivan has a way of finding at least part of the real person. If a candidate says he's an opera buff, Sullivan will talk about opera. If the candidate professes to be fluent in a foreign language, Sullivan can find out firsthand in 15 languages he has studied. Although he is most fluent in Spanish, Italian and German (other than English, but more about that in a moment) he has a solid working knowledge of the other 12. He is simply not easy to bluff, and the people he gets along with best are the ones who don't try to bluff.

Sully isn't interviewing students anymore because of a policy change which excludes the deans from the interviewing process. He still goes out of his way to get to know students and always knows most of the students by name.

Now about English. I have already mentioned his propensity for editing and add only that his knowledge of English is quite complete. However, there lingers in his speech some few hints of an early life in the South. His secretary has typed letters referring to a "tar" factory and a deputy "auditor," only to find out when he reads the letters that he had said tire factory and deputy editor.

Sully gets a lot of letters from alumni and has run into graduates of the



Medical School everywhere he has travelled. A favorite example of his is the time two alums walked up to him in front of the Cathedral of Notre Dame in Paris. There now have been several graduates of the medical school whose parents he knew as medical students.

He still performs surgery regularly, although rarely more than two days a week. Without my asking, he offers that "parotidectomy is my favorite operation; it's a nice precise little procedure." He also teaches students on clerkships in surgery and gives a number of lectures to first-year medical students, tying anatomy courses to surgery. He is a past winner of the Minnesota Medical Foundation's Distinguished Teaching Award, which is voted by students.

While on the subject of surgery, I can't miss telling that he was once operated on at the same time he was performing surgery. A dropped scalpel stuck in his foot, severing an artery and a nerve. He was operating on a man who had lost his arm in a farm accident and couldn't be interrupted. So, another surgery team came in and stitched up his foot while he continued working. He still has no sensation between the second and third toes on his right foot.

Sully recently underwent another medical procedure himself, but this time under more carefully-controlled circumstances. He had become quite weakened by an obstruction at the bifurcation of the abdominal aorta. He is feeling fine after a balloon angioplasty.

When hopefuls ask him what to do to prepare for medical school, Sullivan never stops with a list of the academic requirements. He says there is nothing more boring than an academic drudge, and urges students to read widely, travel, serve people, learn as much as they can about as many things as they can.

Some of the ways he practices what he preaches have already been noted. There are others. He has travelled widely and is "an undying train lover" who is sure they will come back. He rides the trains in Europe and knows many of the schedules by heart. He holds out hope for the U. S. train system but hasn't travelled by rail in this country for many years. He also bakes bread almost every week and freely boasts that his bread rivals that made in any bakery in Paris. He also makes noodles, but leaves most of the rest of the cooking to his wife, Therese, who is a gourmet cook. Therese teaches cooking through continuing education programs to medical residents' wives and senior citizens. They plant a vegetable garden at their St. Paul home every summer, and he says, "We just ran out of potatoes in March."

On the professional side, he has recently been elected to a two-year term as national chairman of student affairs deans of the Association of American Medical Colleges. He is also active in the American Medical Association and serves on the accrediting teams of five other medical schools.

A great interest you could list as either professional or hobby is the Minnesota and British medical school exchange program which he arranged with British surgeon J. Alexander-Williams in 1961. Contributions from surgery patients were first used to finance the limited exchange program. A few years ago the Minnesota Medical Foundation began annual support of the program. "Participants on both sides have been ecstatic," Sullivan says, "and three of the Minnesota students met their wives while overseas."

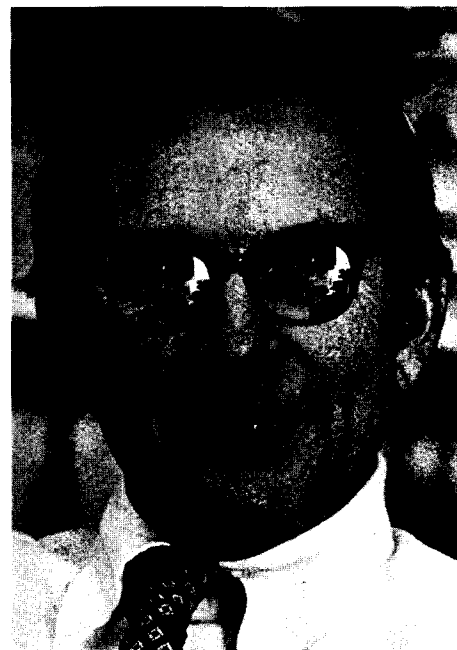
Dr. Sullivan also builds electronics kits. He has built a clock radio and an electronic thermometer and is currently

building a color TV.

Despite his extensive outside interests, he says, "The fundamental purpose of a medical school is the selection and education of medical students, and I believe that education is the most important thing with which an administrator can be involved." His student affairs office speaks to that belief. He and his associates have spared no energy in providing support to medical students in their academic pursuits and in their personal problems as well.

Sully also likes to tell stories and recount life's hard-learned lessons. I'd like to end this article by quoting a favorite of his, The Five Basic Absolute Truths of All Time:

1. $E = MC^2$
2. There is no cure for the common cold.
3. There are more horses asses in the world than there are horses.
4. Excrement flows downhill.
5. If you are treed by a bear, enjoy the view.



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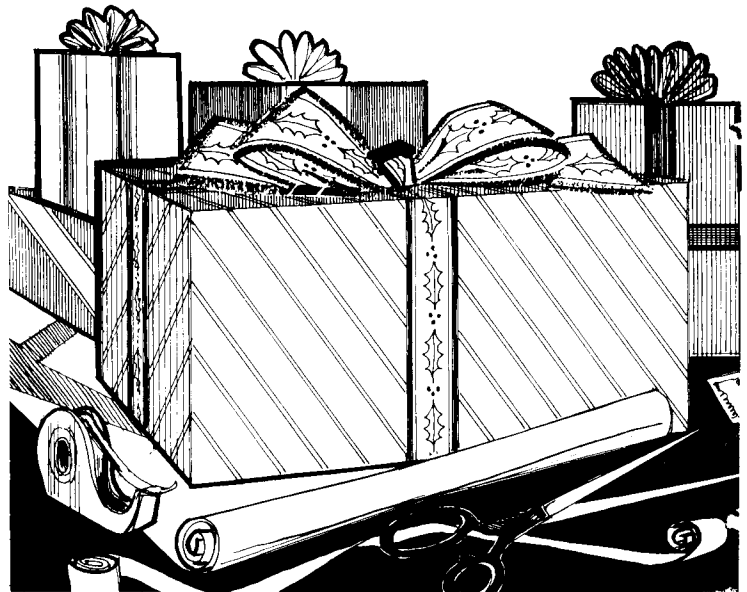
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It's a great cause. In the fiscal year ended June 30, 1979, the Minnesota Medical Foundation spent nearly \$3 million in support of the University of Minnesota Medical Schools in Minneapolis and Duluth. Program expenditures included 279 long-term low-interest educational loans to medical students, 442 short-term no-interest emergency loans, 23 grants to exceptionally needy medical students, 46 competitive research grants and 24 awards for excellence in teaching, research and student performance.

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MMF doesn't charge overhead. The Minnesota Medical Foundation pays its operating expenses with earnings on short-term investment of funds awaiting disbursement. No costs are assessed on contributions. A \$100 gift provides \$100 in program support.

There is an MMF business envelope enclosed in this magazine. Please use it to send your check today. Thank you.

For the Foundation,
Reuben Berman, M.D. '32
President



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Dr. & Mrs. W. Albert Sullivan, Jr.

Fall on campus.

