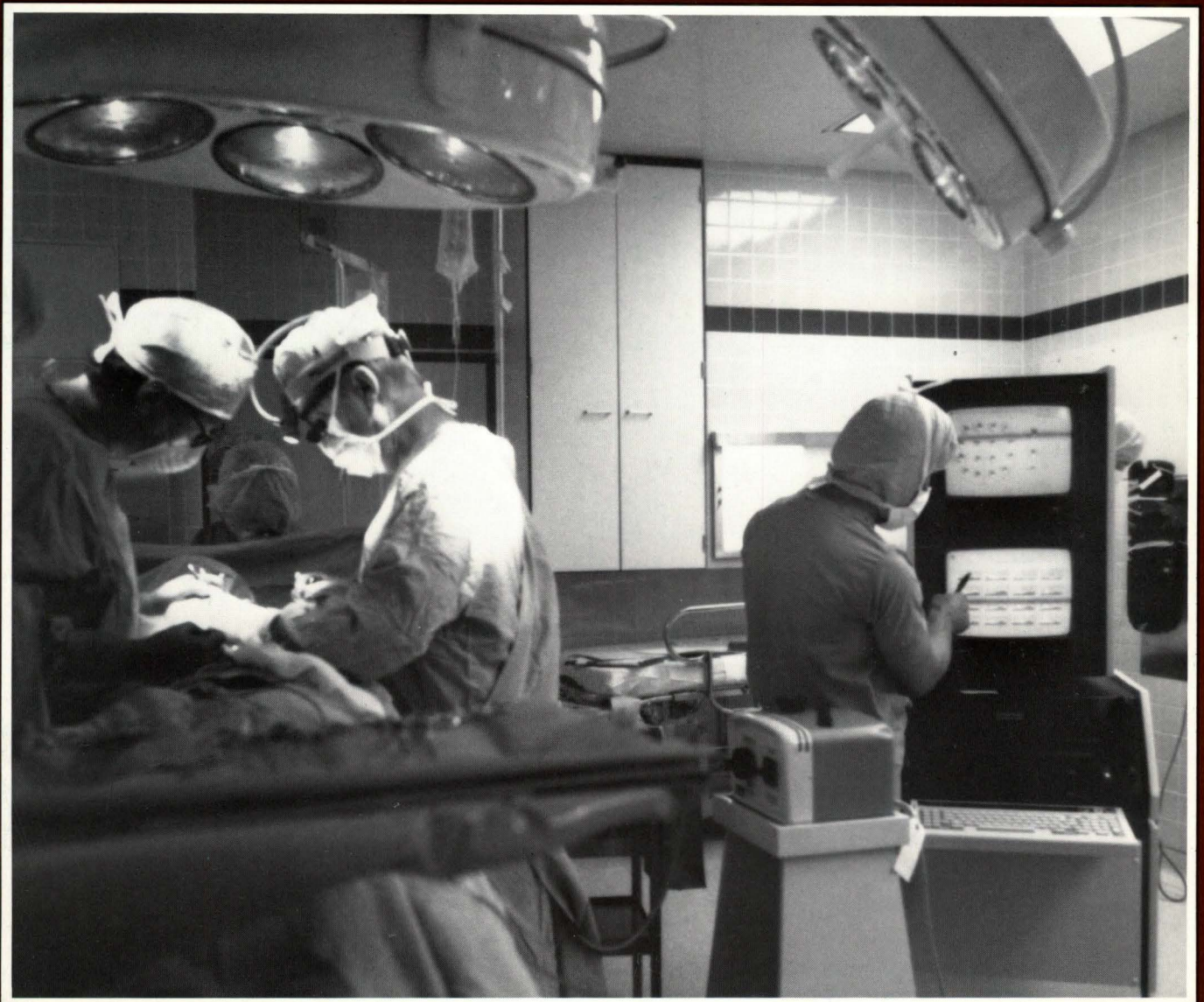


Fall 1985

UNIVERSITY OF MINNESOTA

# *Medical Bulletin*

A Publication of The Minnesota Medical Foundation



## Charitable Gift Annuities

- ... Earn 7½ to 14% interest*
- ... Mostly Tax Free*
- ... Guaranteed for Life*
- ... On Your Investment in the Minnesota Medical Foundation*

If you are over the age of 65, you can earn at least 7½% interest. And the older you are, the more you can earn—up to 14%—guaranteed for life!

As an incentive to encourage support, the federal government and the State of Minnesota has authorized the Minnesota Medical Foundation to issue Charitable Gift Annuities that can increase your spendable income.

In consideration of your gift to the Minnesota Medical Foundation (\$1,000 minimum), we will give you a contract providing a guaranteed income for life. The income will be based on your age. In addition, the following tax advantages are permitted by the federal government and the State of Minnesota:

- Avoidance of capital gains tax if your gift is appreciated stock or real estate.
- 47 to 76% of your income will be free from Federal and State of Minnesota income tax. (This exclusion always applies to Federal Income Taxes. State statutes do vary, however, and you should check yours if you are outside of Minnesota.)
- You can deduct 50 to 60% of your gift (depending on age) on your Federal and State of Minnesota tax return as a charitable contribution.

Recent tax law changes have made the Charitable Gift Annuity a very attractive way to help the Minnesota Medical Foundation support programs at the University of Minnesota Medical Schools. They offer security for you during your lifetime and deferred support that can help the Minnesota Medical Foundation plan for the future.

For a specific example of how a Charitable Gift Annuity (\$1,000 minimum) would work for you, send this coupon to:

LOWELL A. WEBER  
Director of Development  
Box 193, Mayo  
University of Minnesota  
Minneapolis, MN 55455  
Phone: (612) 373-8023

Please let me know the benefits without obligation if I invest \$ \_\_\_\_\_ in a Minnesota Medical Foundation annuity.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Birthdate \_\_\_\_\_  
Month Day Year

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_ I would like information on a program that also provides income for my spouse.

All inquiries are treated as confidential.

MSDH  
2 A16

# Contents

Fall 1985



## Editor's Column

A few issues back, the *Medical Bulletin* featured eight programs and research areas that David Brown, dean of the University of Minnesota Medical School, considered priority areas for the medical school. One of those areas was financial support.

"The high tuition (\$7,000 per year) and total indebtedness of graduates (anticipated to be an average of \$42,000) is creating unacceptable pressures which will markedly hinder access to professional education," wrote Dean Brown in his priority report. "We must work to overcome these obstacles."

In this issue of the *Medical Bulletin*, freelance science writer Karen Thompson presents a more complete picture of the financial "pressures" today's medical students face. As alumni and friends of the medical schools here and in Duluth, you readers should find the article interesting, if not startling. As James Boulger, associate dean at the UMD School of Medicine, is quoted as saying, "Former grads drop their teeth" when told about the debt levels of students today.

On a hopeful note, readers can learn about one student who has received financial help with his medical education. Turn to page 14 for the article on Christopher Williams and the Medtronic Foundation.

What else can you find in this issue? Well, you can meet the new board members of the Minnesota Medical Foundation. You can learn about two new campus-wide research centers approved at the University of Minnesota-Duluth. And, you will be introduced to two local businessmen who have made substantial contributions to medical education and research.

As always, read and enjoy.

**Elaine Cunningham**  
Editor

## Features

<i>Medical students are facing ever-increasing levels of debt when they graduate. Freelance writer Karen Thompson presents the statistics</i>	16
<i>The Minnesota Medical Foundation elects five new members to its board of trustees</i>	20
<i>Two new campus-wide research centers are established on the Duluth campus to benefit the medical school and other UMD colleges</i>	22
<i>Alumnus Dr. Frederick Strobl develops new brain monitor for use during surgery</i>	13
<i>First-year medical student Christopher Williams receives \$10,000 Medtronic Foundation Fellowship</i>	14
<i>William Dietrich and Joseph Bramson make major contributions to the University of Minnesota Medical School</i>	15

## Departments

<i>Update</i>	2
<i>Class Notes</i>	26
<i>In Memoriam</i>	28
<i>Calendar</i>	29

**Publishing Information:** The University of Minnesota *Medical Bulletin* is published quarterly by the Minnesota Medical Foundation in behalf of the University of Minnesota Medical Schools (Minneapolis and Duluth), Minnesota Medical Alumni Society, and the Minnesota Medical Foundation. Statements and opinions published herein are exclusively those of the authors themselves. There is no subscription fee. No advertising is accepted. Publication is made possible by contributions to the Minnesota Medical Foundation.

**Publication Office:** Minnesota Medical Foundation, 535 Diehl Hall, University of Minnesota, Minneapolis, Minnesota 55455. Phone (612) 373-8023.

**Change of Address:** Please enclose old and new address and mail to: The Minnesota Medical Foundation, 535 Diehl Hall, University of Minnesota, Minneapolis, Minnesota 55455.

**Board of Trustees:** Terrance Hanold, President; Paul G. Quie, M.D., Vice President; George D. McClintock, Secretary; and Roger E. Larson, Treasurer; Anthony Bechik, David M. Brown, M.D., Sandra K. Butler, H. Mead Cavert, M.D., John B. Coleman, M.D., Richard A. DeWall, M.D., Frazier Eales, M.D., N.L. Gault Jr., M.D., Bobby I. Griffin, Norman E. Groth, David W. Hamilton, Ph.D., Clayton Kaufman, Kenneth H. Keller, Ph.D., Arnold W. Lindall, M.D., Ph.D., Dwight L. Martin, M.D., Hon. Stephen L. Maxwell, Donald W. McCarthy, Charles F. McGuiggan, Rudolph W. Miller, Donn G. Mosser, M.D., Frederick M. Owens Jr., M.D., Carl R. Pohlrad, James W. Reagan, Jerry E. Robertson, Ph.D., Paul C. Royce, M.D., Raymond W. Scallen, M.D., Marvin Schwan, Edward L. Segal, M.D., Nadine G. Smith, M.D., Vernon D.E. Smith, M.D., James R. Spicola, George T. Tani, M.D., Neal A. Vanselow, M.D., John M. Warder.

**Staff:** Editor, Elaine M. Cunningham, Executive Director, David R. Teslow



Cover: An EEG technician interprets computerized video images of brain activity while a surgical team completes a carotid endarterectomy. The images are generated by the CNS-16 Cerebral Tracer, a computerized 16-channel brain monitor which was developed by Dr. Frederick Strobl, an alumnus of the University of Minnesota Medical School, class of 1975. (See story on page 13.)

## MMF approves more than \$136,000 in grants for research

More than \$136,000 in grants was approved in October by the Board of Trustees of the Minnesota Medical Foundation to be distributed through MMF's small grants program to faculty and students of the University of Minnesota Medical Schools.

Fifteen faculty members and two students received a total of \$67,106 in grants for medical research projects. Another \$66,580 in special grants was also approved by the board for research equipment and salary support.

Faculty members who received MMF research grants were: **Alice Adams**, assistant professor of medicine, microbiology and immunology, \$7,000 to study the latency of herpesvirus; **Susan A. Berry**, instructor of pediatrics, \$6,000 to look at hormonal control; **Jack D. Burton**, hematology/oncology fellow, \$2,500 to investigate chronic

lymphocytic leukemia; **Mary E. Dempsey**, \$5,000 for research into arteriosclerosis and lipid carrier protein pathways; **Gregory A. Filice**, assistant professor of medicine, \$4,000 to study host defense against nocardia asteroides; **Mark A. Green**, assistant professor of radiology, \$5,000 to look at copper radiopharmaceuticals; **Lois Jane Heller**, department of physiology-UMD, \$5,500 to investigate heart function, metabolic control, and interstitial adenosine; **James F. Koerner**, professor of biochemistry, \$5,000 to study neurotransmitters, glutamic acid, and brain slices; **Robert D. Nelson**, assistant professor of surgery, \$1,606 for laboratory diagnosis of fungal (candida) infection; **Claire V. Pomeroy**, medicine fellow, \$2,500 for research of cytomegalovirus, toxoplasma gondii and immunosuppression; **Mikel Prieto**, surgery research fellow, \$5,000 for

urinary pancreatic enzyme monitoring for early diagnosis of pancreas transplant rejection; **Sarah Jane Schwarezenberg**, pediatric fellow, \$5,000 to study alpha-1-antitrypsin, endocrine system and inflammation; **Phyllis K. Sher**, assistant professor of neurology, \$3,000 for research of benzodiazepine receptor, clonazepam, and cell cultures; **C. Gail Summers**, assistant professor of ophthalmology, \$6,000 to look at refractive errors induced by orbital masses; and **Mendel Tuchman**, instructor of pediatrics, \$4,000 for research of pyrimidine base degradation in murine neuroblastoma cells.

The students who received MMF research grants were: **Kathryn I. Pyzdrowski**, Med. IV, \$1,200 to study human endothelial cell surface expression of tissue factor; and **Jeanette Staubus Risdahl**, Med. III, \$1,200 for molecular analysis of x-linked color albinism.

## Former medical school dean Gault has portrait unveiled

Former University of Minnesota Medical School Dean N.L. (Neal) Gault Jr., M.D. was honored at a reception in November for the unveiling of his official portrait.

Dr. Gault served as dean of the medical school from 1972 to 1984, retiring a year ago in September. His portrait was made possible through the contributions of about 100 faculty members and friends. The Minnesota Medical Foundation managed the portrait fund and commissioned the artist. The finished portrait will hang in Diehl Hall along side the portraits of other former medical school deans.

During the unveiling ceremony, Dr. Shelly Chou, professor and head of the department of neurosurgery; Dr. Neal Vanselow, vice president of health sciences; Terry Hanold, president of the Minnesota Medical Foundation; and Dr. David Brown, current medical school dean, all commented on Dr. Gault's out-

standing contributions to the medical school during his 12 years as dean. Currently, Dr. Gault is a professor in the department of medicine.

Dr. Gault's daughter, Elizabeth Gault Harrison, flew in from Kyoto, Japan to take part in the ceremony and had the honor of officially unveiling her father's portrait.



Elizabeth Gault Harrison unveiled the official portrait of her father, former medical school dean Dr. N.L. (Neal) Gault Jr., during a reception to honor this man who served as dean for 12 years.

## UMD med school seeks to prevent damage to the brain



Lester Drewes



Otmar Kloiber

Researchers at the University of Minnesota, Duluth (UMD) School of Medicine, in partnership with the Duluth Clinic Education and Research Foundation, are seeking to discover a way of preventing damage to the brain following strokes, seizures, or metabolic disorders such as Reye's Syndrome.

Lester Drewes, UMD School of Medicine associate professor of biochemistry, and Otmar Kloiber, School of Medicine postdoctoral research associate, have received a \$12,916 grant from the Duluth Clinic Education and Research Foundation to determine if L-carnitine, a small molecule present in all animals and many plants, can help prevent damage to the brain following strokes, seizures, or other pathological events.

Researchers believe that an elevated level of fatty acids may be one cause of damage to the brain following strokes or seizures. It may be possible to moderate those levels of free fatty acids by giving or using carnitine. Carnitine serves as a transport molecule, shuttling fatty acids into the mitochondria where it is metabolized, preventing damage.

The questions are: Does carnitine enter the brain? If it does, in what form? Is the amount that enters the brain sufficient to prevent damage?

Drewes and Kloiber, with funding from the Duluth Clinic, will seek to

answer these questions. In the next year, they will measure the uptake of carnitine from the blood to the brain. The measurements are necessary, Kloiber explained to determine if carnitine or any of its esters are, in fact, able to reach the brain. Once the researchers are able to ascertain if carnitine does enter the brain, and in what form, they will need to determine if the rate is sufficient.

"Once we find the transportation kinetics, we'll be able to determine how much of that substance it is possible to get into the brain in what time," Kloiber said.

Experiments at the Max-Planck Institute in Cologne, Germany have already proven that it is possible to reanimate parts of the brain after damage, Kloiber said. In Spain, research has shown that rats receiving toxic doses of ammonia, which occurs in Reye's Syndrome, suffered no damage if they received carnitine in advance.

Drewes, who joined the faculty at the UMD School of Medicine in 1976, received his doctorate in biochemistry from the University of Minnesota. He has spent the past 14 years studying the metabolic functions of the brain.

Kloiber came to the UMD School of Medicine from Germany this August as a postdoctoral research associate.

## University Hospitals acquire HMO

The University of Minnesota Hospitals and Clinics received approval in August from the Board of Regents to acquire a substantial interest in Primary Care Network Management Inc. (PCN), a Minneapolis based management company that is developing a health maintenance organization in Minnesota.

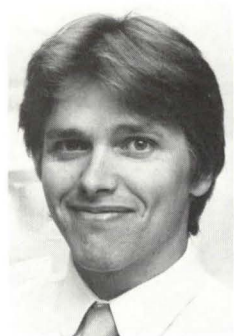
Primary Care Network was founded by a group of physicians who envisioned a prepaid health plan for people throughout Minnesota. At present, 1,200 physicians have joined the network. In mid-June, PCN granted the option to purchase considerable interest in its company to Whitehead Associates Inc., who in turn, offered an interest to University Hospitals. The hospitals' Board of Governors endorsed the plan in early August. Jack Whitehead, founder of Technicon and the Whitehead Institute for Biomedical Research Associates, is the chief executive officer of Whitehead Associates.

Under the acquisition agreement with University Hospitals, physician members of PCN will continue to have the flexibility to refer their patients to the University Hospitals or other regional centers.

"This is one of many efforts by University of Minnesota Hospitals and Clinics to maintain its referral base," said Hospital Director C. Edward Schwartz. "We are pursuing other provider arrangements as well."

University of Minnesota Clinical Associates Inc., a newly formed organization that represents university physicians, strongly backs the affiliation with PCN and views it as a way to ensure the continuation of a solid partnership with their physician colleagues throughout the state, Schwartz said.

## Trachte receives \$196,931 grant



George Trachte

George Trachte, University of Minnesota, Duluth (UMD) School of Medicine assistant professor of pharmacology, has received a three-year, \$196,931 grant from the National Institutes of Health's Heart, Lung, and Blood Institute.

With the grant, Trachte will examine the effects of the hormones Angiotensin II and Angiotensin III on nerves.

Angiotensins play a role in high blood pressure because high levels of the hormone in the blood tend to constrict blood vessels. Constricted blood vessels lead to high blood pressure.

The hormones can constrict blood vessels directly, or indirectly, by their affect on nerves, Trachte explained. While it is known that, in the blood, angiotensins raise blood pressure, their affect on nerves is less well documented.

On nerves, Angiotensin II and III seem to have two different effects. Angiotensin II increases nerve activity, causing the blood vessels to constrict. Angiotensin III has a milder effect on nerves and may possibly inhibit blood vessel constriction.

Not everyone with a high angiotensin blood level suffers from high blood pressure, Trachte said. This may imply that the balance between the two hormones has a lot to do with whether the hormones have a hypertensive effect or not.

"This is an old problem that has been around about 10 years,"

Trachte explained. "Do Angiotensin II and Angiotensin III do the same thing? We're starting now to get a glimmer of an answer. In recent experiments, they do appear to have different functions."

Prostaglandins are important little fats in the body that cause fever, sensitize nerve endings to pain, etc., Trachte said. Angiotensins produce the prostaglandins and the prostaglandins then inhibit nerve activity.

"We see, therefore, a direct effect of angiotensins on nerves, plus an indirect effect producing prostaglandin which inhibits nerve ac-

tivity. The ultimate effect of angiotensins is the result of a combination of these two. With Angiotensin III, the prostaglandin effect predominates. With Angiotensin II, the direct effect predominates," he said.

Knowing the ratio between the two hormones in the blood may ultimately lead to better treatments for high blood pressure, he pointed out.

Trachte joined the faculty at the UMD School of Medicine in 1982. He holds a doctorate in physiology from Thomas Jefferson University.

## MMF announces award winners

The Minnesota Medical Foundation seeks to encourage and recognize high achievement among both faculty and students of the University of Minnesota Medical Schools. Through its honors and awards programs, MMF confers numerous awards and cash prizes for outstanding teaching performance, scholastic achievements, leadership, community service and research contributions. In recent months, MMF announced the following award winners:

### Distinguished Teaching Awards

Each year, the Minnesota Medical Foundation presents \$1,000 cash awards to medical school faculty who have been selected by a student poll for their outstanding teaching performances. This year, the Distinguished Teaching Awards went to **Richard A. King**, selected by first-year students; **Michael Belzer**, chosen by second-year students; and **Walter C. Hildebrandt**, selected by third and fourth year students.

### J. Jacob Kaplan Research Award

The J. Jacob Kaplan Award is the largest award sponsored by MMF. This year, the \$1,500 award was presented to **Rei-Kwen Chiou** for his outstanding accomplishment in immunology and cancer research. Established by an endowment from the late Dr. J. Jacob Kaplan, a 1939

alumnus of the medical school, the Kaplan award rotates annually among three medical fields: gastroenterology, cardiology, and immunology in the diagnosis and treatment of cancer.



Walter C. Hildebrandt, winner of a Distinguished Teaching Award



Rei-Kwen Chiou, winner of the J. Jacob Kaplan award.

## Chickenpox vaccine found safe

A chickenpox vaccine tested in 191 Twin Cities children appears safe and provides protective antibodies, according to a joint study by the University of Minnesota and the Park Nicollet Medical Center.

Because the study has been underway for only 15 months, researchers emphasize it is too soon to say if the vaccine will provide long-term protection.

"Our trial indicates that the vaccine is safe and well-tolerated in normal toddlers," Dr. Henry Balfour, professor of pediatrics, laboratory medicine and pathology at the University of Minnesota Medical School, reported at the annual meeting of the Central Society for Clinical Research held in November.

Caused by the varicella zoster virus, chickenpox affects almost 98 percent of American children, making it the most common childhood illness. The bothersome rash, often accompanied by high fever, usually heals in about two weeks. Although rare, complications do occur and can be life-threatening in children who are immunosuppressed.

"There is a tremendous need to find a safe, effective vaccine that would become part of the child's regular immunization program that currently includes vaccines against measles, mumps and rubella (German measles)," said Dr. Balfour.

In the just-completed study, researchers found that only 12 of the 191 children developed a rash in response to the vaccine, and only nine developed a fever. Eight children had a heat rash-like reaction without any blisters. Of four cases who had blisters, vaccine strain virus was recovered from only one. The average age of the children was 17 months.

The vaccine was determined to be immunogenic, meaning that it triggered an immune response in all children. This was confirmed by testing the bloodstream for antibodies. It is not known if that antibody response is durable enough to en-

sure long-term protection.

To prove the vaccine's protective value, scientists will need to follow for several years vaccinated children and a control group of children who receive no vaccine to see which group has a higher incidence of chickenpox.

"We are proceeding on the assumption that the chickenpox vaccine will someday be part of routine well-baby care," Dr. Balfour said. "But before it becomes standard immunization for all children, we must find the best way to use it."

The Minnesota research group included Dr. Balfour, Dr. Don Amren, a Park Nicollet Clinics pediatrician, and Carmen Suarez, a University of Minnesota research nurse.

The next phase of the program is to learn if it is possible to give chickenpox vaccine and measles, mumps and rubella (MMR) vaccine at the same time. Healthy children from the Twin Cities area between the ages of 12 and 24 months are eligible to participate in this study if they have not had chickenpox or a recent MMR vaccine. The research is being done in conjunction with the Hennepin County Community Health Department Clinics.

## New U of M hospital nearing completion

Construction on the new University of Minnesota Hospitals facility is nearing completion. Patients and staff are expected to move in late March 1986.

Painting, tiling, electrical wiring and other interior finishing work was done this summer and fall. Paving of the emergency and front entrance drives was completed as well. As of September 1, floors four and five were complete.

In addition, new sidewalks and parking meters were installed next to the hospital on River Road. Trees and shrubs were also planted on the building's north side.

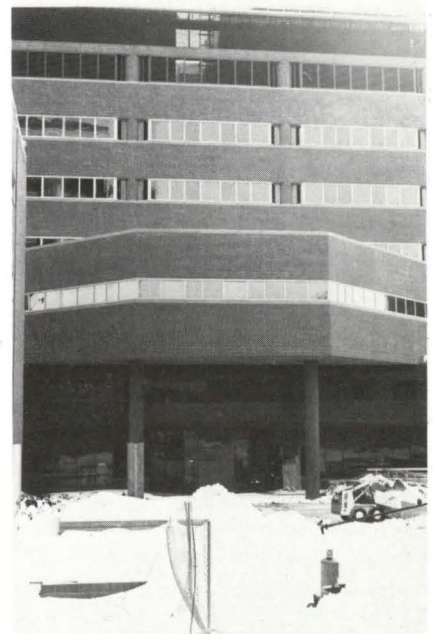
## U of M doctors warn public about contact lenses

Physicians from the University of Minnesota's department of ophthalmology held a press conference in November to warn the public about the unusual number of vision-threatening infections in people wearing extended-wear soft contact lenses.

University doctors wanted to alert and advise consumers on the dangers and proper care of extended-wear contact lenses, which have grown in popularity in recent years.

Since July, more than a dozen patients with either corneal ulcers or corneal scarring caused by the lenses have been referred to university specialists. On the average, only two patients with such problems are seen at the university annually.

"I'm worried that we may be seeing only the tip of the iceberg," said Dr. Donald Doughman, professor and head of the university's ophthalmology department.



The new University of Minnesota Hospitals (Unit J) is nearing completion. Patients and staff are expected to move in March.

---

---

## MMF adds two to staff

David W. Johnson and Dana Lindsay have joined the development staff of the Minnesota Medical Foundation, according to Lowell Weber, director of development.

Johnson has been named director of the corporation and foundation support program at MMF with responsibility for working with corporations and foundations to raise money for the education and research programs at the University of Minnesota Medical Schools in the Twin Cities and Duluth.

He comes to MMF from Hamline University in St. Paul where he was on the development staff since 1980. Most recently, he served as Hamline's associate director of development and before that he was director of annual giving. While at Hamline, Johnson doubled unrestricted alumni annual giving in two years and doubled it again during the next three years. He also tripled major gift club memberships and increased constituent participation in phonathons by 100 percent.

His other professional experience includes positions as instructor, assistant professor, associate professor, and chairman of the department of history at Pacific Lutheran University; assistant history instructor at the University of Kansas; history instructor at Kansas Wesleyan University, and writer for the National Endowment for the Humanities and the Fund for the Improvement of Post-Secondary Education.

Johnson holds a bachelor's degree from Hamline University, a master's degree from Stanford University and his doctorate from the University of Kansas.

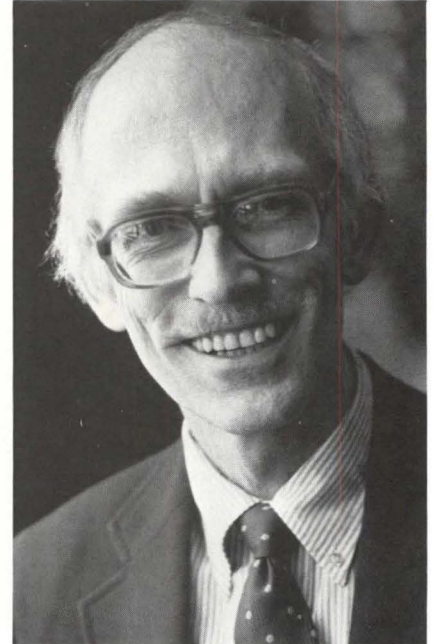
Lindsay joins MMF's staff in the newly created position of development officer for the department of medicine. Her main responsibilities will be to coordinate the fund raising activities of the department of medicine and to assist faculty in submitting grant proposals to corporations and foundations.

Since 1978, Lindsay has been the development officer for the Blake



Dana Lindsay

Schools in Minneapolis. She was responsible for planning and managing the entire development program there which included the capital campaign, public relations, annual giving, alumni relations, planned giving, foundations relations, special project fundraising and coordination of volunteers. Her parents and alumni annual giving programs at Blake received national recognition in 1983 and 84 for major increases in contributions. She also planned and conducted an \$8 million capital campaign with cam-



David W. Johnson

campaign expenses taking only one percent of the \$8.3 million raised.

Prior to joining the Blake Schools, Lindsay served as admissions coordinator at Breck School in Minneapolis. She holds a bachelors degree from Barnard College.

Lindsay is a member of the board of directors of the Ripley Foundation and the Theatre de la Jeune Lune. She also serves on the executive committee of the Minnesota Independent School Fund and the development committee of the United Arts Fund.

---

## Robertson to head clinical research center

Dr. R. Paul Robertson has been named head of the University of Minnesota Medical School's Clinical Research Center, effective July 1986. He will replace acting director John Bantle.

Dr. Robertson has been a professor of medicine at the University of Colorado for the past two years. Before that, he spent 15 years at the University of Washington in Seattle,

most recently as a professor of medicine and pharmacology.

A widely published expert in diabetes, insulin secretion, and prostaglandins, Dr. Robertson received his medical degree from Creighton Medical School in Omaha. He serves as editor for a number of medical journals including the *Western Journal of Medicine*. He also sits on the editorial board of *Diabetes*.



---

## U of M Lab part of strep research

The World Health Organization (WHO), health arm of the United Nations, recently chose the University of Minnesota's department of pediatrics as the site for one of two collaborating streptococcus laboratories in the world.

The laboratory, to be housed in the university's division of pediatrics infectious diseases, will be headed by Dr. Edward Kaplan, a pediatrics professor who has worked extensively with WHO on streptococcus research. Primary functions of the laboratory, which will be an international reference center on streptococcal diseases, will be to collect and disseminate information on these diseases, standardize the methodology for diagnosis and treatment, train professional and technical personnel from laboratories around the world in various aspects of streptococcal diseases and participate in WHO research on streptococcal disease and resulting conditions.

Streptococcal sore throat and impetigo (a type of scabby skin infection) are among the most common infections of children all over the world. Associated streptococcal diseases such as rheumatic fever and glomerulonephritis (a type of kidney disease) are also an important health problem, yet the precise nature of the link is unknown.

Rheumatic fever and rheumatic heart disease are a leading cause of cardiovascular disease in the world's developing countries, which contain over two-thirds of the world's population. Rheumatic heart disease is responsible for approximately half of all cardiovascular disease occurring in those countries and is the leading cause of cardiac-related deaths during the first three or four decades of life.

"Although the incidence of streptococcal diseases has decreased dramatically in the United States and Europe within the past 20 or 30 years, these infections are rampant in the world's developing coun-

tries," Dr. Kaplan explained. "Unfortunately, those are countries that are least able to combat these diseases, since their resources for diagnosis and therapy are often quite limited. We will be working here, collecting bacterial specimens from around the world and training people from other countries to not only improve the streptococcal control program, but also to encourage basic and applied research into the cause, diagnosis and therapy of these diseases."

The University of Minnesota is unique in that it has had a streptococcus laboratory since the 1950s, when pediatrics professor Dr. Lewis Wannamaker established it in the department of pediatrics. The university's expertise in streptococcus research was one reason WHO chose it as one of the world's two collaborating streptococcus laboratories, Dr. Kaplan said. The other is in Prague, Czechoslovakia.

## Health care inflation lowest in 20 years

Health care costs increased only 9.1 percent in 1984, according to a recent report by the Health and Human Services Department. Health care spending in 1984 came to \$387.4 billion, compared to \$355.1 billion in 1983.

This represents the first time in 20 years that the health care inflation rate has fallen below 10 percent. The report stated that the average rate of inflation from 1970 to 1983 was 12.7 percent, with the peak coming in 1982 at 13.9 percent.

In a statement accompanying the report, the administration credits the decrease in inflation to the cost restrictions imposed on Medicare and Medicaid and to the increased competition in health care among private industry. Together, Medicare and Medicaid paid 27 percent of the nation's health care expenses. The major administrative change in Medicare/Medicaid policy is a pre-determination of how much Medi-

care will reimburse for a particular medical condition. Critics argue that changes such as these have forced hospitals into discharging patients before they are ready and have put extra financial pressures on the poor and elderly.

The Health and Human Services Department report also attributed the decrease in health care inflation to the overall reduction in inflation throughout the nation.

## Boue selected for \$70,000 scholarship

Daniel R. Boue, a graduate student in pathobiology at the University of Minnesota, has been selected as one of the first five medical research students in the country to receive a \$70,000 medical research scholarship from Lutheran Brotherhood.

For the next five years, Boue will receive \$14,000 per year in scholarship funds toward his pursuit of the M.D. and Ph.D. degrees.

Lutheran students who have completed at least one year of work in an approved medical school and who are pursuing both Ph.D. and M.D. degrees are eligible for the scholarship. Boue was nominated by the University of Minnesota Medical School.

A cum laude graduate of Carleton College, Boue holds a bachelor's degree in biology. After his undergraduate studies, he studied public health and the history of medicine at the University of Minnesota for one year. Currently, his research concerns biochemistry and immunologic function of B cells.

Lutheran Brotherhood is one of the first life and health insurance organizations in the nation to establish a medical research scholarship program through the Life and Health Insurance Medical Research Fund of the American Council of Life Insurance and the Health Insurance Association of America. The fund was established as a private and voluntary effort to help fill the void left by reduced government spending on biomedical research.

## Med student parents learn about medical school

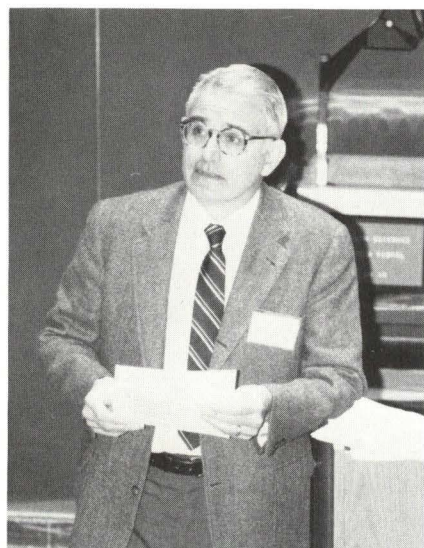


More than 250 parents of first-year medical students attended a day-long program to learn more about the University of Minnesota Medical School and the medical profession.

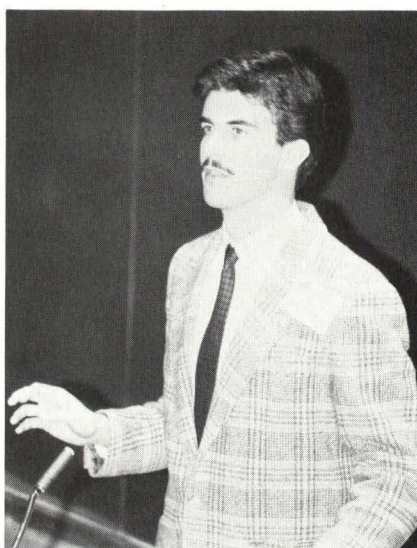
More than 250 parents of first-year medical students turned out for Parent's Day on November 9 to learn more about the University of Minnesota Medical School and the medical profession.

Sponsored by the Minnesota Medical Foundation and the Parent's Committee, the Parents' Day program featured medical school faculty and students to talk about and answer any questions parents might have about the school and the curriculum. Parents also had the opportunity to tour the medical school complex.

Speakers included Mark Bowers, a fourth-year student and president of the Medical Student Council; David R. Teslow, executive director of the Minnesota Medical Foundation; Jean Conroy, president of the Parent's Committee; Dr. David M. Brown, dean of the medical school; Dr. W.A. Sullivan, associate dean-student affairs; Dr. Robert J. McCollister, associate dean-curriculum affairs; Stanley A. Woolner, first-year medical student; Helene Horwitz, director of programs and financial aid for the Minnesota Medical Foundation; and Dr. Pearl Rosenberg, assistant dean-student affairs.



Associate dean of curriculum affairs Dr. Robert J. McCollister explained the medical school curriculum to the parents of first-year medical students.



Stanley A. Woolner, a first-year medical student, described his impressions of school to the 250 parents who turned out for Parent's Day, sponsored by the Minnesota Medical Foundation.

## U of M physicians featured on WCCO Radio

Physicians from the University of Minnesota Medical School are being featured on a one-hour, talk/call-in radio show called *The Doctors*.

Aired on WCCO AM Radio from 5 to 6 p.m. on Sundays, *The Doctors* presents university doctors to discuss contemporary health issues and then to answer call-in questions from listeners. The show began on September 29 and features physicians from the University of Minnesota three Sundays a month and doctors from the Mayo Clinic on the remaining Sundays.

---

## Longer survival for women with breast cancer reported

A combination of hormone treatment and chemical therapy has been shown to increase the length of survival by post-menopausal women suffering from advanced breast cancer, especially those with cancers rich in estrogen receptors, according to a study by University of Minnesota researchers published in a November issue of the *New England Journal of Medicine*.

The researchers also reported that breast cancer is not a single disease but subsets of disease requiring specific consideration in the treatment, said principal researcher Dr. David Kiang, associate professor of medicine at the University of Minnesota.

The study began in 1975 with 112 women who had widespread, advanced breast cancer. Their cases were followed closely for up to 10 years. Researchers used a combination of high-dose estrogen hormone therapy and chemotherapy on patients whose cancers were rich with estrogen receptors. These patients experienced an 85.7 percent improvement in the disease. Forty-eight percent of the patients experienced a complete disappearance of the disease.

The average duration of survival for the test group was seven years, and seven of the 21 women in the estrogen receptor-rich group are still alive, compared with the two and one half year survival rate that is common for women treated with standard therapy. For patients whose cancer lacked estrogen receptors, combination therapy did not alter the known poor survival rate.

"What we did was devise a series of what we call biological markers, or special tests, to help in understanding the nature of the breast cancer so as to select the most effective treatment in a more rational way," Dr. Kiang said. "In this particular case, estrogen receptors were the biological markers that helped us predict whether the can-

cer would regress during hormone therapy."

Dr. Kiang also said that because breast cancer is not a single disease, subgroups of breast cancer need to be treated differently. "Hormone therapy and chemotherapy each have different actions," he explained. "In combination, they may increase the killing effect on cancer cells, but it is important to treat breast cancer according to the special subgroups that are known."

Dr. B.J. Kennedy, Masonic professor of oncology and university professor of medicine; Juliette Gay breast cancer research nurse; and Anne Goldman, a biostatistician, conducted the research with Dr. Kiang. The Breast Cancer Research Team at the university's Masonic Cancer Center is continuing its research with combinations of chemotherapy, hormonal therapy, radiation and surgery.

## Dr. Najarian to co-chair World Med '86

Dr. John S. Najarian, professor and head of the department of surgery at the University of Minnesota Medical School, will serve as co-chair of World Med '86, an international convention of health care professionals and manufacturers planned for May 1986 at the St. Paul Civic Center.

It is anticipated that World Med '86 will be the largest international health care assembly ever held in North America. More than 100 seminars, lectures, surgical sessions and tours, including ones to the University of Minnesota Medical School and The Mayo Clinic, are being planned.

In addition to Dr. Najarian, Dr. W. Eugene Mayberry, chairman of the Mayo Clinic Board of Governors, will serve as chair of the event. An endocrinologist, Dr. Mayberry holds a masters degree in medicine from the University of Minnesota Medical School.

World Med '86 is being sponsored by the Minnesota Trade Office and the Medical Alley Association of Minnesota.

## RPAP receives University Grant Award

The Rural Physician Associate Program (RPAP) was recently named a University Grant Award recipient by the Tandy Corporation (Radio Shack). The award includes the donation of computer equipment to RPAP and the opportunity to participate in The Council on Microelectronics Technology, an association of Tandy Corporation and select universities and educators engaged in new and innovative uses of technology.

The Rural Physician Associate Program was established in 1970 to promote the redistribution of physicians to the non-metropolitan areas of Minnesota. This year, 24 third-year undergraduate medical students will participate in the program. Each student spends between nine and 12 months living in a rural community, working with the local physicians, and gaining firsthand experience in the practice of rural primary care medicine.

During 1985, RPAP is adding a new feature to its educational program by placing computer terminals in each of its teaching sites. The terminals, leased from Radio Shack, will be used to link each rural clinic to the American Medical Association's Medical Information Network and, via electronic mail, to the University of Minnesota Hospitals. The network will enable RPAP students and physician/tutors to have access to a wide range of information from computer databases developed by the AMA, and to receive information generated from within the university. The University Hospitals will utilize this network to strengthen their ties with physicians in rural communities and to improve their responsiveness to referring physicians. The University Grant Award and other project support from Tandy Corporation's Education Division will assist RPAP in the implementation of this network.

The RPAP Network has also received financial support from the Minnesota Medical Foundation, The University of Minnesota Hospitals, and the University of Minnesota Medical School.

---

## Former UMD student returns to teach anatomy



Dr. Paul Severson, a alumnus of the UMD School of Medicine, has returned to UMD to volunteer his time teaching anatomy.

Dr. Paul Severson, a member of the third entering class at the University of Minnesota, Duluth (UMD) School of Medicine, returned to UMD in November — not as a student, but as a teacher.

Dr. Severson, who was a member of the medical school's 1974 entering class, is now a general, thoracic, and vascular surgeon in Crosby, Minnesota. He returned to campus to volunteer two days of his time to

teach anatomy to this year's first-year medical students.

Dr. Severson is the first former UMD medical student to return as a teacher in anatomy, says Dr. John Leppi, head of UMD's biomedical anatomy department.

Many former students have returned to help the school in clinical sciences over the years. In fact, this year alone, 41 former students serve as preceptors for the school, working one-on-one with students several times during the year in communities throughout Minnesota, Wisconsin, and North Dakota.

"This has been exciting to me to see the freshness and eagerness on these students' faces and to share a few clinical correlations," Dr. Severson said of his experience. "I hope to do this on a regular basis."

Dr. Severson, who recently completed his residency at the Hennepin County Medical Center in Minneapolis, began private practice last December. He serves the Brainerd Lakes Region, including hospitals in Brainerd, Crosby, and Aitkin.

---

## Phi Kappa Phi Fellowship awarded to med student

Wendy Shapiro, a first-year student at the University of Minnesota Medical School, was one of 50 recent college graduates across the nation selected to receive a \$6,000 fellowship for graduate study from the Honor Society of Phi Kappa Phi.

Shapiro was selected for the honor from a field of 172 of the nation's outstanding 1985 college graduates. She received her undergraduate degree from the University of Minnesota and chose to use her fellowship to study medicine here.

Phi Kappa Phi is a national scholastic honor society with chapters at 240 colleges and universities throughout the nation. Since 1932, its fellowship program has honored more than 750 scholars with awards.

---

## U of M gets grant for blindness research

Research to Prevent Blindness (RPB) has granted \$25,000 to the University of Minnesota's department of ophthalmology to support research into the causes, treatment and prevention of blinding diseases.

"The significance of these grants cannot be overstated," said Dr. Donald J. Doughman, chairman of ophthalmology at the University of Minnesota. "They provide scientific freedom and their impact is felt at every level of our research program. We've received \$203,000 from RPB over the past 26 years and this year's award is 25 percent greater than last year's. This type of support is especially welcome now during these times of federal budget cuts."

RPB support has helped the university perform over 800 successful cornea transplants since 1972. Recent research has led to a refined technique of ensuring sterility, thus reducing the complexity and expense of the corneal preservation system. This system has been proven safe and effective for short- and long-term storage of donor corneas prior to transplantation.

RPB is the world's leading voluntary organization supporting vision research. It has given more than \$46.7 million to promote research of the eye and its many diseases. Grants are made annually to more than 50 ophthalmology departments nationwide to assure the continued progress and vitality of eye research.

---

---

## U of M receives health grants to aid refugees

Federal grants to improve and coordinate mental health services for Minnesota's refugee population have been awarded to the State Department of Human Services (DHS) and the University of Minnesota.

DHS was awarded a one-year renewable grant of \$139,255 by the National Institute of Mental Health (NIMH) following competition for the funding with other states. The University of Minnesota received a \$1.7 million, three-year contract to function as a technical assistance center to the nation's 12 other state refugee mental health programs funded under the Office of Refugee Resettlement-NIMH initiative.

"Minnesota has the eighth largest refugee population in the country," said DHS commissioner Leonard Levine. "With this money, we will be able to make necessary modifications in our mental health system as it pertains to refugees and train staff to meet the unique needs of these new citizens of our state."

The university's center, to be headed by Associate Professor of Pediatrics Dr. Amos Deinard, will be staffed by professionals from several disciplines, including linguistics, social work, psychiatry, public health and anthropology. "We will be doing many things, including developing new, culturally sensitive models of mental health services and training and identifying culturally sensitive models for prevention, diagnosis and treatment of refugee mental health problems," Dr. Deinard said.

Southeast Asian refugees face particularly difficult problems in obtaining mental health services, said Terry Sarazin, director of the DHS Mental Health Program Division. Many of these people suffer the trauma of forced emigration from their homelands, disrupted families and disintegration of cultural ties. They have demonstrated the capacity to survive many hazards and adapt to a different culture, he said.

DHS will convene work groups to recommend methods that will help

refugees obtain needed mental health services throughout Minnesota. The University of Minnesota will also be able to assist other states and agencies that don't have refugee mental health programs.

## Medical students receive MMF scholarships

Providing financial support to medical students at the University of Minnesota has been a tradition at the Minnesota Medical Foundation since 1949 when MMF conferred its first five scholarships. Assisting in this effort are countless individuals and organizations whose contributions establish these scholarship funds.

MMF recently awarded the following scholarships to these medical students:

### Alpha Omega Alpha Scholarship

This scholarship fund was established by the Minneapolis Chapter of Alpha Omega Alpha, an honorary medical society. The \$1,500 award went to **Roger J. Day** for his outstanding achievement while a first-year medical student.

### American Cancer Society Scholarship

These \$1,200 scholarships were established with a grant from the Minnesota Division of the American Cancer Society and given for academic achievement and financial need. Second-year student **David Edwards** received one of the scholarships and third-year student **James L. Comadoll** was renewed for his second American Cancer Society Scholarship.

### Ruth Boynton Scholarship

The Ruth Boynton Scholarships are made possible through a bequest from the late Dr. Ruth Boynton, a long-time director of the University of Minnesota Health Service. This year, the \$500 scholarships, which are awarded on the basis of academic standing and financial

need, went to: **Kristin J. Beard**, **Pamela Jensen**, **Desiree M. Kempke**, **Deborah A. MacNeill**, **Teresa C. McCarthy** and **Karin Northfield**.

### Delia Tenille Hobbs Scholarship

These \$800 scholarships are given to second-year minority medical students and were established by Dr. John Hobbs in memory of his daughter. This year's recipients were **E. Renee Petty** and **Martin J. Tristani**.

### Nicollet Clinic Founders Scholarship

The \$500 Nicollet Clinic Founders Scholarships are awarded to two second-year medical students each year. The scholarships were established by the Nicollet Clinic to honor the pioneer founders of the Minneapolis-based clinic. This year's recipients were **Lisa Lund** and **Joanne Riley**. The scholarships are renewable during the third year of medical school, providing the students retain their high level of academic performance. Last year's recipients **Ann Jefferds** and **Barbara Sigford** had their \$500 scholarships renewed.

### United Way of Willmar Scholarship

A grant from the United Way of Willmar established this \$750 scholarship. **Douglas A. Schow** was chosen to receive this award on the basis of his scholastic achievement, financial need and because he is a native of Willmar, Minnesota.

### Vines Scholarship Program

The Vines Scholarship Program was established in 1984 through a bequest from the estate of Lillian M. Vines in honor of her late husband Harold Thomas Vines. Designed to encourage the matriculation of selected, high-ability students to the University of Minnesota Medical School, each year The Vines Scholarship Program supports two students with \$2,000 scholarships each for four years. **Peggy K. Lorentz** and **Emily K. Bergsland** accepted the 1985 scholarships and entered the freshman class at the University of Minnesota Medical School this fall.

## Medical school faculty receive grants

The medical school faculty are proud of their accomplishments in research. The University of Minnesota Medical School, Minneapolis ranks sixth in the nation in the number of principal investigators (the lead investigators on grants) and thirteenth among all medical schools in the amount of outside funded research expenditures per faculty member. We will be announcing in each issue of the *Medical Bulletin* some of the recipients of new grants.

*David Brown, M.D.*

*Dean, University of Minnesota Medical School*

Department Principal Investigator	Grant Agency Amount	Research Project	Department Principal Investigator	Grant Agency Amount	Research Project
<b>Anatomy</b> Linck, Richard	Miscellaneous Agency \$3,980	Platelet junction role of the cytoskeletal system	<b>Neurosurgery</b> Ebner, Timothy	3M \$3,000	Neurosurgery research
<b>Dermatology</b> Hordinsky, Maria King, Richard Ruth, George	NSF-Div. of Physiology Cellular and Molecular Biology \$21,680	Metabolic activation of steroidal and stilbene estrogens in renal and hepatic tumorigenesis	<b>Orthopaedic Surgery</b> Bradford, David	Spinal Cord Society \$6,231	The role of magnetic imaging in acute spinal cord injury
<b>Laboratory Medicine and Pathology</b> Bach, Fritz	March of Dimes \$45,000	Genomic and phenotypic analyses of HLA and insulin-dependent diabetes Pathogenesis	<b>Otolaryngology</b> Blakley, Brian	National Institute of Neurology \$45,144	Otolith-Optokinetic Interactions
Douglas, Christie	National Heart Lung and Blood Institute \$22,560		<b>Pediatrics</b> Bass, John	Minnesota Heart Association \$19,952	Pulsed doppler estimated of ductus shunts
Jackson, Brooks McCullough, Jeffrey	American Association of Blood Banks \$5,580	Detection of human CMV in the peripheral blood of healthy blood donors by RNA-DNA and DNA-DNA hybridization	Dunnigan, Ann	Minnesota Heart Association \$23,728	Cardiac cellular electropharmacology in cardiomyopathy
<b>Medicine</b> Almquist, Constance Benditt, David	Northern American Society of Pacing & Electrophysiology \$23,500	Fellowship in cardiac pacing and electrophysiology	Seelig, Steven Tan, Joan	National Institute of Health \$26,004	Ontogenesis of hepatic growth hormone responsiveness
Bache, Robert	National Institute of Health \$169,706	Post-ischemic myocardial and coronary vascular function	<b>Radiology</b> Gedgaudas, Eugene	Veterans Administration \$94,315	Scarce medical specialist services
Goldenberg, Faye Cohn, Mariam	Minnesota Heart Association \$17,500	The adrenergic nervous system in heart failure	<b>Surgery</b> Barragy, Thomas Ring, W. Steves	Minnesota Heart Association \$24,000	Ventricular functions cyanotic congenital heart disease
Hebbel, Robert	Minnesota Heart Association \$23,792	Endothelial injury in atherosclerosis	Blatchford, James Ring, W. Steves	Minnesota Heart Association \$23,200	Effects of cardiopulmonary bypass on the neonatal myocardium
Hunninghake, Donald	Ayerst Labs \$102,420	Study of acifran long-term safety study	Condie, Richard	USDOD-Navy \$35,532	Research and development of human promate antibodies for immunotherapy of viral hemorrhagic fever infections
Schubach, William	University of Minnesota Foundation \$11,000	The role of Epstein Barr virus in altering oncogene chromatin structure	Gores, Paul	National Kidney Foundation of the Upper Midwest \$1,500	Tissue grafting
Skubitz, Keith	University of Minnesota Foundation \$11,000	Identification of myeloid differentiation gene products in normal and leukemia cells by use of monoclonal antibodies	Tveter, Kevin Foker, John	Minnesota Heart Association \$20,647	Recovery of energy metabolism and function after cardiac surgery
Taurog, Joel	Arthritis Foundation Minnesota Chapter \$10,000	Molecular genetic analysis of the T cell antigen receptor in ankylosing	<b>Urologic Surgery</b> Chiou, Rei-Kwen	National Kidney Institute of the Upper Midwest \$1,800	Monoclonal antibody directed internal radiation therapy of renal cell carcinoma
			Fralely, Elwin	McDonnell Douglas Corporation \$16,000	Study of erythropoietin production of germ cell tumor lines
			Vessella, Robert Lange, Paul	Abbott Laboratories Fund \$216,900	Imaging and immunobiology of renal cell carcinoma

## Dr. Frederick Strobl develops new brain monitor for use during surgery



Brain damage can occur during any type of surgery performed under general anesthesia. It is most likely to occur during heart, circulatory or brain surgery in which blood flow to the brain is decreased significantly. In fact, two to five percent of heart bypass patients suffer strokes on the operating table.

There are no visible external signs when brain damage is occurring during surgery. And, there is no way of predicting in advance which patients will suffer brain damage during an operation.

As a neurologist, Dr. Frederick T. Strobl, an alumnus of the University of Minnesota Medical School class of 1975, was aware of these and other statistics regarding brain damage during surgery. He was also aware that the current methods of monitoring the brain were ineffective. Running continuous electroencephalograms (EEGs) was awkward and laborious and failed to monitor the brain the majority of the time. Two or four channel EEGs often did not provide reliable information and failed to cover large areas of the brain.

Dr. Strobl, along with Dr. Daniel E. Cohen, a clinical instructor of neurology at the University of Minnesota, developed a solution to the problem by inventing the CNS-16 cerebral tracer. Their monitor provides instant feedback on brain wave activity over 16 channels during surgery. It generates computerized EEG displays which appear continuously on a video screen. These EEGs are automatically compared to baseline data previously recorded for the patient. Should brain problems begin to occur during surgery, signals on the screen and an auditory beep alert physi-

cians so they can take immediate action.

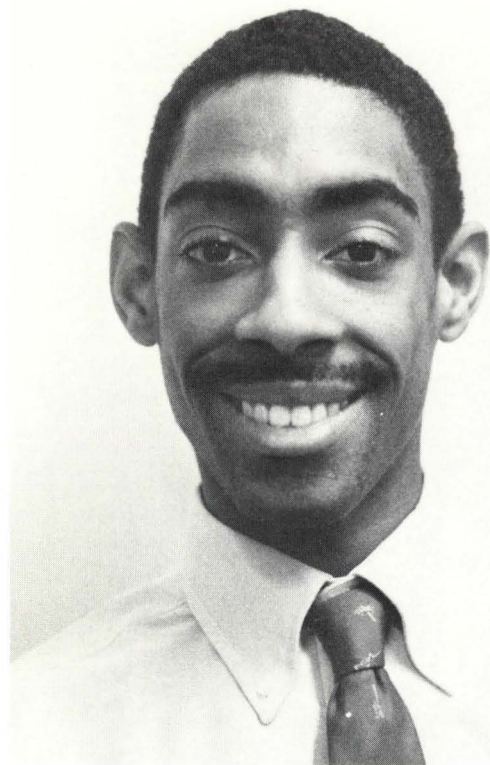
Dr. Strobl brings a background in electrical engineering to his neurology practice, which assisted him in the development of the CNS-16 Cerebral Tracer. He holds a bachelor of science degree in electrical engineering from the University of Minnesota, with minors in computer science and control systems. Before entering medical school, he worked as an engineer at Honeywell Inc. and Northwestern Bell Telephone Company.

Dr. Strobl completed his residency at Hennepin County Medical Center, the University of Minnesota Hospitals, the Mayo Clinic and the National Hospital for Neurological Diseases in London, England. He currently practices at the Minneapolis Clinic of Psychiatry and Neurology.

The U.S. Food and Drug Administration cleared the CNS-16 Cerebral Tracer in December 1984. It is currently in use at the Mayo Clinic, as well as Abbott-Northwestern Hospital, Metropolitan Medical Center and hospitals in North Dakota and Wisconsin.

Dr. Strobl believes his cerebral tracer has many potential applications which he is currently studying. He expects it to be useful in spine and nervous system surgery and in monitoring closed head trauma and postoperative patients. Eventually, it may be used in the analysis and design of new drugs. It may also prove helpful in diagnosing potential strokes and epilepsy.

Currently, Drs. Strobl and Cohen are using their monitor to map brain circuitry. This may lead to the determination of the brain areas responsible for problems such as dyslexia and Alzheimer's disease.



## Christopher Williams receives \$10,000 Medtronic Fellowship

"I really worried about how I was going to afford medical school and about how much debt I was going to accumulate," said Christopher S. Williams, a first-year student at the University of Minnesota Medical School. "The Medtronic Scholarship was a major factor in my decision to come to Minnesota."

To attract him to the University of Minnesota, Williams was selected to receive the \$10,000 Medtronic Fellowship. The Medtronic Foundation, the charitable arm of Medtronic, Inc., established the Medtronic Fellows Program two years ago through the Minnesota Medical Foundation. Williams is the second recipient of the award, which is offered to high-ability Minnesota minority students to encourage their matriculation to the University of Minnesota Medical School.

MMF hopes the Medtronic Foundation gift will provide the leadership to influence other corporations and foundations to increase their support of scholarships. The Medtronic Foundation has committed to providing one more \$10,000 award next year. The University of Minnesota Medical Schools need schol-

arship support to ease the ever-increasing financial burdens incurred by medical students and to gain the competitive edge in recruiting high-ability minority students to the medical profession.

The Medtronic Fellowship provided that edge in recruiting Williams. In addition to Minnesota, he was accepted into medical school at Johns Hopkins and Mayo. He readily admits that Minnesota offered him the best scholarship assistance.

"It's nice," said Williams, "not to have to worry about finances — at least for the first year."

A native of North Minneapolis, Williams graduated from Northwestern University in 1985 with a degree in biochemistry. He does not come from a medical background. His father, until recently, was director of public housing for the city of Minneapolis and his mother teaches social work at Augsburg College.

When Williams began at Northwestern, he said he had a medical career in mind but didn't decide definitely on it until his sophomore year.

"I considered engineering, chemical research and medicine," he explained. "Medicine appealed to me the most because I could work with people as well as with sciences."

Williams believes he will encounter many rewards and challenges as a physician. However, he is concerned about the future of health care.

"What bothers me the most," he said, "is the corporate take-over. Health care is being directed by businessmen looking to make money rather than taking care of people."

The "people aspect" of medicine is what attracts Williams. He hasn't decided on a specialty yet, but is considering pediatrics. One thing he is sure of. "I want to practice in a major city where I'll come into contact with minority patients."





William F. Dietrich



Joseph H. Bramson

## Donors make major contributions to medical school

Two Minnesota businessmen have recently made major contributions to medical research at the University of Minnesota Medical School through the Minnesota Medical Foundation.

William F. Dietrich, former head of the Green Giant Company, has committed \$750,000 to MMF for an endowed chair in basic sciences at the medical school. Joseph H. Bramson, former owner of the Minneapolis-based Levine Furniture, has created an endowment fund to support new initiatives in cancer research at the University of Minnesota.

Dietrich's donation will be matched with funds from the Permanent University Fund to create a \$1.5 million chair for research in fundamental molecular and cell biology. The establishment of this chair reflects Dietrich's long-time interest in science and the evolution of life.

Basically a self-educated man, Dietrich, 84, was born and raised in Minneapolis. He entered Central High School at age 12 and after graduating at 16, enrolled at the University of Minnesota in business. His stay there, however, only amounted to a few months. At age 17, Dietrich accepted a position as an accountant with the Minnesota Valley Canning Company in Le Sueur. That company, owned and operated by the Cosgrove family, was the predecessor of Green Giant. Dietrich worked hard and rose through the company ranks. In 1950, he became the first non-family member to serve as president and chief executive officer.

Dietrich retired from Green Giant in 1959. Four years later, he and a group of friends began a small business venture capital investment firm called Community Investments Enterprises. Starting with initial capital of \$350,000, CIE developed net assets of more than \$12 million over the next 20 years. CIE was instrumental in funding a number of now successful high-tech companies, including Medtronics, Inc.

Although now a resident of Florida, Dietrich still expresses great loyalty to Minnesota. Throughout his career, he was always willing and interested in supporting young colleagues. His donation to the University of Minnesota, he feels, is just one more investment in the training of young business people.

An initial gift of \$25,000 established the Joseph H. Bramson Endowment in cancer research. Bramson will continue to make contributions to the fund through his lifetime. In his will, he has made provisions for additional gifts in cash and real estate.

Bramson is the last of his family to carry the Bramson name. His father, brother and uncle all died of cancer. Bramson believes that uncovering the causes and cures for cancer lie in new research initiatives. His endowment fund will support that with special emphasis upon the fundamental basis for the altered biochemistry and behavior of cancer cells.

Born in Des Moines, Iowa, Bramson attended the University of Chicago, depending on scholarships and the money he earned from playing the violin to finance his educa-

tion. After graduating, he did post-graduate work in stock market procedures. He was working on Michigan Street when the market collapsed in 1929.

Bramson came to Minneapolis to work with Levine Furniture Company. It was the start of a more than 40-year career in the furniture business. He bought the company after the Levine brothers died. However, Bramson kept the Levine name. The original business was located along the banks of the Mississippi River where the shops of Riverplace now stand. Shortly after Bramson bought Levine Furniture, the original building was sold and he was forced to relocate.

He eventually bought a building located across from the Rock Island railroad tracks. Although the area has undergone a lot of development, Bramson's building still stands and is now across from the Hubert H. Humphrey Metrodome.

In explaining his substantial contribution to the University of Minnesota Medical School, Bramson said, "I feel medical research is the only answer to cancer and since my money came from the state of Minnesota, I feel I owe it to make my contribution here."

The Minnesota Medical Foundation is extremely grateful to William Dietrich, Joseph Bramson and other contributors to the University of Minnesota Medical Schools. Without this kind of generosity, exciting research and quality education at Minnesota would be severely restricted.

## Financing a medical education: Will students be able to overcome increasing debt levels?

"Ten years ago, anybody — no matter how poor they were — could afford to go to medical school if they really wanted to," said Dr. Pearl Rosenberg, assistant dean of the University of Minnesota Medical School. "We could help them find financing. They might be in debt when they graduated, but it would be payable. We can't promise that today."

A combination of rising education costs, tight funding, and uncertainty has made paying for a medical school education today much more difficult than it was five years ago. The total indebtedness of enrolled medical students increased 90 percent nationally between 1978 and 1982 (62 percent after adjusting for inflation), according to the Association of American Medical Colleges.

"Financing medical school today is like taking out a 20 to 30 year mortgage on a home," said Dr. Rosenberg. "Add the Midwestern dictum: 'If you can't pay for it, you don't get it,' and borrowing money for medical school becomes scary. It goes against the grain."

When Dr. Rosenberg asked third-year medical students what debt they thought they'd have when they graduated, their answers ranged from \$25,000 to \$50,000. The actual statistics agree. A survey of 1984 University of Minnesota health sciences graduates from Minneapolis and Duluth revealed average debt levels of \$44,177 and \$38,273, respectively. In 1985, more than half (59.8 percent) of the graduates from the University of Minnesota Medical School owed between \$25,000 and \$50,000.

These graduates expect to be paid up when they are between 45 and 60 years old, according to Dr. Rosenberg.

Most medical students consider themselves financially independent said Dr. Rosenberg. For example, one student comes from a family farm. "She (the student) says there is just no way she could expect any



*"Financing medical school today is like taking out a 20 to 30 year mortgage on a home." — Pearl Rosenberg, assistant dean, University of Minnesota Medical School.*

help from her parents," Dr. Rosenberg explained, "even though they would do anything they could for her. They are barely keeping their heads above water and every year they worry about losing the farm. She is not about to ask them for help, so she is doing what she can on her own."

Medical school graduates of the 1980s and 1990s will encounter conditions quite different from those encountered by individuals who entered medical practice in the '60s and '70s. Federal funding has been cut. New forms of health care delivery and financial organization make the future uncertain.

Costs have skyrocketed, particularly tuition costs. Between 1981 and 1985, first-year annual medical school tuition nearly doubled, going from \$3,970 to \$7,680.

Another problem is that as costs rose, many school loan programs were cut. According to Terry Smith, assistant director of financial aid programs at the University of Min-

nesota, the federal government "has managed to maintain some of these programs, but most are staying at the same level of funding, even as costs have risen."

New allocations for several financial aid programs decreased between 1980 and 1985. For instance, the Health Profession Student Loan program went from \$26 million to zero, and Exceptional Financial Need, a scholarship program, declined from \$18 million to \$7 million.

"The University used to have more leeway in channeling funds from one health profession area to another. That flexibility isn't really there anymore," said Smith.

Helene Horwitz, director of programs and student aid for the Minnesota Medical Foundation, agrees. The Minnesota Medical Foundation raises and disburses private funds for medical education and research at the University of Minnesota Medical Schools. Out of the private funds it raises, MMF operates its own student aid program, offering scholarships, grants-in-aid, and long and short term loans. Although cooperative, MMF's student aid program is operated independently of the University of Minnesota's office of financial aid. As Horwitz explained, "The University used to be able to meet the student budget; MMF could then provide funds for extra expenses such as child care and car repair. We can't do that anymore. Our money is now used to meet students' basic needs."

Another major difference in financing today's medical school education, according to Horwitz, is that students used to be able to rely exclusively on low interest loan programs which charged no interest while they were in school. "Now they have to borrow under a variety of programs, several of which charge interest while they're in school," Horwitz explained.

The students then find themselves in a double bind: If they post-



*"The University used to have more leeway in channeling funds from one health profession area to another. That flexibility isn't really there anymore." - Terry Smith, assistant director of financial aid programs, University of Minnesota.*

pone the interest payments, the payments compound regularly and increase the students' indebtedness significantly. If they make the interest payments while in school, they have to borrow additional money to pay the interest.

"Five years ago," Horwitz said, "if you took out a \$5,000 Guaranteed Student Loan (GSL), you got a check for the full \$5,000 and that check could generally handle your expenses for the year. You could graduate with nothing but GSL loans at seven to nine percent interest, and defer payment throughout your school career and part of your professional training. Then, with the GSL's moderate terms, it might cost \$36,000 to repay \$25,000 borrowed under the program."

Because of rising costs and tighter funding, students are being forced to turn to more expensive loan programs. Under some programs, market-rate-based interest begins to accrue the day the check is printed.

One such program, the Health Education Assistance Loan (HEAL), also compounds interest every six months. "If a student took out a \$10,000 HEAL loan for each of four years of medical school," Horwitz explained, "that student could reasonably expect to pay between \$68,000 and \$110,000 to borrow

that \$40,000, depending on the rate of interest and how long he/she deferred payment. If payments and interest were deferred through a three-year residency, and then set up on a ten-year repayment plan, it could likely cost the student \$86,000 for the \$40,000 loan. During the first year of practice, monthly payments could run \$720 per month."

Students now typically use a complex mixture of loans, with varying interest rates and repayment terms, to finance their medical education. An accumulation of loans totalling about \$40,000 is not an unusual debt level for graduating medical students. For a new physician starting out with an annual salary of \$35,000, what would it mean to repay \$40,000 in loans? Horwitz offered to estimate. "After subtracting \$12,250 for taxes," she explained, "take-home pay would be about \$22,750 or \$1,895 per month. At an average rate of ten percent interest, with a ten-year repayment schedule, you'd be paying out \$533 per month for that \$40,000 worth of loans. If your take-home pay is \$1,895 per month and the loan payment is \$533 per month, what do you have left? Not very much."



*"If a student took out a \$10,000 HEAL loan for each of four years of medical school, that student could reasonably expect to pay between \$68,000 and \$110,000 to borrow that \$40,000." — Helene Horwitz (right), director of programs and student aid, Minnesota Medical Foundation.*

Mark Bowers is a fourth year medical student and president of the University's Medical Student Council. He, like many other students, has 14 loans from six sources totalling \$50,000. Bowers has so far avoided expensive HEAL loans, but still expects to pay out \$650 per month during his first year of practice. He will then be paid up when he is 42-years-old. He considers himself lucky in that he paid for most of his first year of medical school with funds saved from the prior year and a half of work.

James Boulger, associate dean for administration and student affairs at the University of Minnesota-Duluth (UMD) School of Medicine, says former grads have trouble believing today's high costs. "When I tell former grads that tuition this year is \$7,000, they just about drop their teeth. Some bemoan their own payments of \$300 to \$400 a month. That's chicken feed compared to what today's poor students will be paying."

Perceptions and anxiety color the funding of a medical school education today in ways poorly understood and often disagreed upon. For example, there is at least the perception of a surplus of physicians. In 1980, the Graduate Medical Edu-



*Mark Bowers, a fourth-year medical student, and his wife Ann have taken out 14 loans from six sources totalling \$50,000 to finance his medical school education.*

cation National Advisory Committee predicted a nationwide surplus of 70,000 physicians by 1990.

UMD's Boulger disagrees. "Where is the doctor glut?" he asks. "There sure doesn't seem to be one up here. Last week I asked a room full of students who'd been out on field visits how many of them had visited clinics which were trying to find a physician. I'll bet 49 percent of them raised their hands."

Concern about debt level and earning power may influence a student's choice about the location of practice, type of practice, and medical specialty. To what extent this is true, however, experts disagree. Some studies indicate that debt is not a reliable predictor of specialty choice among medical school students. Other studies show otherwise, including one 1985 survey done by Dr. Boulger and Frederic Hafferty, associate professor of behavioral sciences at UMD.

Their questionnaire was answered by 97 percent of the 99 first and second year medical school students at UMD. According to the authors, students began medical school with definite ideas about what specialty they wanted, what type of practice, and what location. But, because of the debts they ex-

pected to incur, many changed their minds.

Family practice was the specialty most often dropped. The higher the debt, the more likely students were to change their specialty from generalist to specialist, their location preference from smaller communities to larger ones, and their type of practice from solo to partnership and larger group practices.

Half the students thought that changes in the organization and financing of health care would affect their choice of specialty. The advent of DRGs, other government regulations, decreased autonomy, a physician "glut", competition for patients, and inadequate financial rewards would play an important role for nearly two thirds of the students in their choice of practice location, and for 72 percent in their choice of practice arrangements.

"What's new about this situation," said Dr. Boulger, "is that students today are afraid that, in light of an uncertain future, loss of autonomy, and lower salaries, they won't be able to handle their financial obligations."

Dr. Pearl Rosenberg agrees, and adds that for financial reasons, students have begun to pursue medical specialties they may not be best

sued for.

"I had one young man come in last year," she said, "who wanted to be a pediatrician. He was kind and caring; he would have made a perfect pediatrician. A few months later he mentioned he was going into radiology. I asked him why. He said, 'I can't afford to be pediatrician. I sat down with my budget and figured out that if I wanted to go into pediatrics and pay off my loans, I really couldn't afford to have a home and family.'"

When asked whether he saw any student trend toward choosing a specialty based on what would make the most money, medical student Bowers replied, "I certainly think so, I certainly do. A lot of people I know liked low paying specialties such as pediatrics or psychiatry, and they changed their minds essentially on the basis of pay. There's no doubt about it."

Did money affect Bowers' choice of specialty? "No, I decided on obstetrics/gynecology about half way through and I don't think money had anything to do with that decision."

Medical school administrators across the country are beginning to look into various ways of increasing scholarship dollars and easing debt management. One debt management program being considered by the Association of American Medical Colleges (AAMC) would coordinate several federal loan programs, and add a new loan program. This would allow students the opportunity to apply once a year for all their loans and to pay back loans to just one lender with one monthly check. A consolidation option would also enable students to extend payments up to 20 or 25 years on a graduated payment schedule.

Horwitz thinks the program is very likely to succeed, especially since, "it was developed on the initiative of the AAMC and it's something they've wanted to do. I don't see any reason why it shouldn't succeed." If adopted, the AAMC program would take effect in the fall of 1986.

With or without the AAMC program, medical school administrators



*“When I tell former grads that tuition this year is \$7,000, they just about drop their teeth. Some bemoan their own payments of \$300-400 a month. That’s chicken feed compared to what today’s poor students will be paying.” — James Boulger, associate dean for administration and student affairs, UMD School of Medicine.*

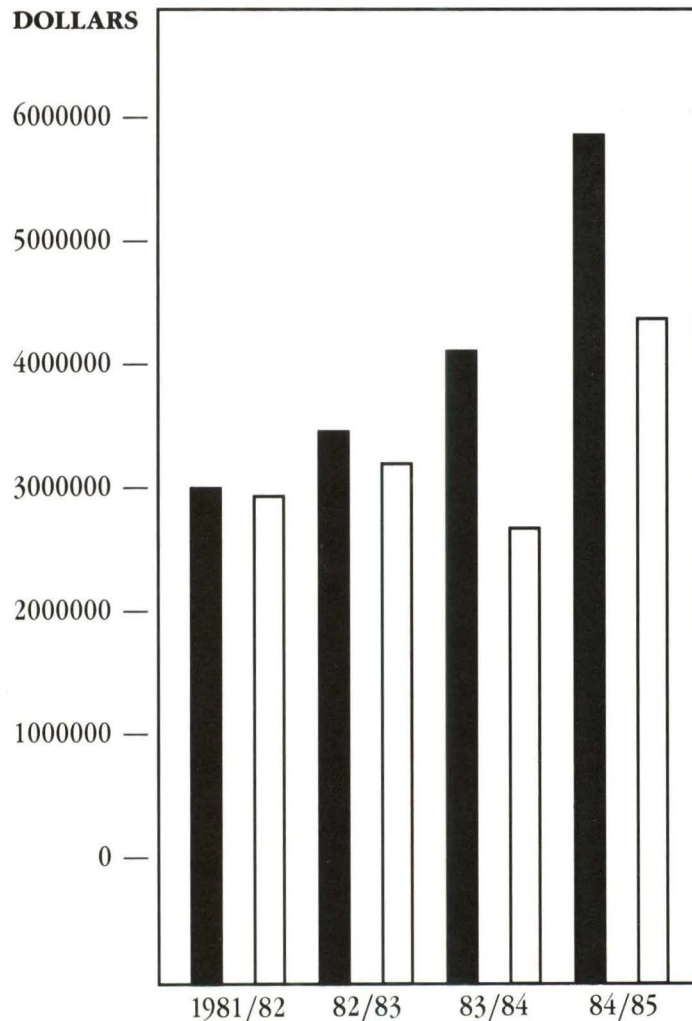
are aware that ways to increase scholarship money and ease the debt levels of medical students must be found. According to Dr. Rosenberg, higher tuition costs and decreased funding sources are having a serious impact on minority access to medical school. It is a trend medical school administrators view with concern.

“What we may cut out,” Dr. Rosenberg emphasized, “is the highly dedicated student from a minority or poor family. What we may get more of now is the student from a wealthy family who can now get into medical school because there is less competition.”

Dr. Boulger puts it more bluntly: “The rich get richer and the poor might not be doctors.”

*Written by Karen Thompson, president of Science Communications, a Twin Cities firm which promotes scientific and medical products and services.*

**TABLE IV  
COMPARISON OF STUDENT FINANCIAL NEED  
VERSUS AVAILABLE FINANCIAL AID**



**Black:** Amount of Need

**White:** Amount of Aid Available to those with need

## MMF elects five new members

Five new board members were elected to four-year terms on the board of trustees of the Minnesota Medical Foundation during the organization's 47th Annual Dinner Meeting held in October. Two members were reelected to four-year terms on the board.

MMF's board of trustees is comprised of faculty of the University of Minnesota Medical Schools, leaders in the medical community and representatives of the corporate community. The board is charged with the overall guidance of MMF in accomplishing its missions of raising and disbursing funds for medical education and research at the University of Minnesota Medical Schools in the Twin Cities and Duluth.

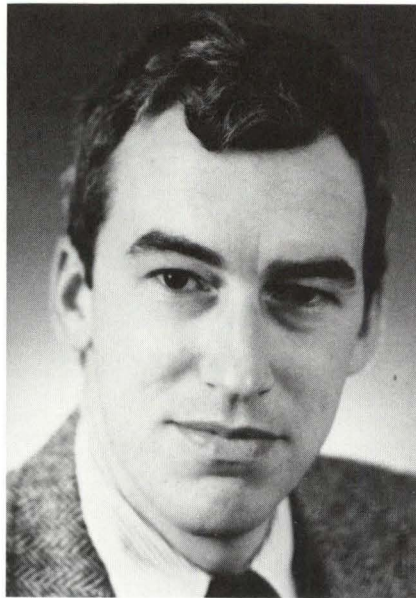
Newly elected to the 38-member board were: Sandra K. Butler, Dr. Frazier Eales, Dr. Neal L. Gault Jr., Dr. Nadine G. Smith, and John M. Warder.



Sandra K. Butler

Butler is program officer and a trustee of the Patrick and Aimee Butler Family Foundation. Extremely active in the community, she also serves on the boards of several other organizations including the Minneapolis Society of Fine Arts, College of St. Catherine, Minnesota Private College Fund, University of Minnesota Foundation, Minnesota Women's Fund, and The Ruth Mott Fund. In addition, she sits on the corporate board of the U.S. Sugar Corporation in Clewiston, Florida.

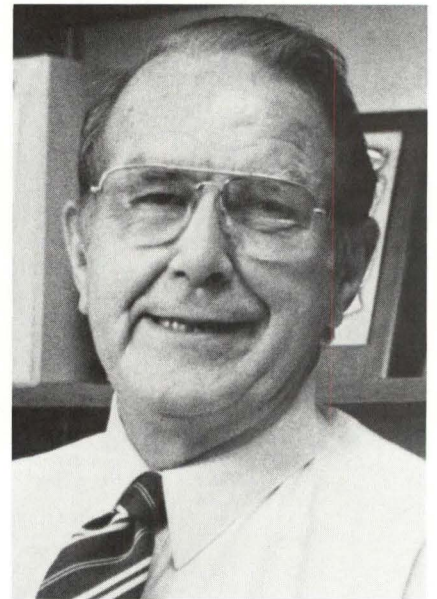
A graduate of the College of St. Catherine, Butler holds a bachelor's degree in speech and drama and a master's degree in library science.



Dr. Frazier Eales

Dr. Eales is a thoracic and cardiovascular surgeon with the Minnesota Thoracic Group in Minneapolis. He is a 1976 graduate of the University of Minnesota Medical School and took his residency and

fellowship training in surgery at the university. Board certified by the American Board of General Surgery, Dr. Eales is a member of numerous professional societies including the American Medical Association, American College of Surgeons, Hennepin County Medical Society, Minnesota Medical Association, Minnesota Surgical Residents Society, Minneapolis Surgical Society and the Twin Cities Thoracic Society. His research interests lie in pulmonary physiology and respiratory distress syndrome.



Dr. N.L. (Neal) Gault Jr.

Currently a professor of medicine at the University of Minnesota Medical School, Dr. Gault spent 12 years as dean of the medical school. He retired from that position in 1984. He is a 1950 graduate of the University of Minnesota Medical School and has spent most of his academic career here. He was, however, an associate dean of the Uni-

---

---

## o its board of trustees

versity of Hawaii School of Medicine and served as chief medical advisor for the Seoul National University College of Medicine.

Dr. Gault has received several awards and honors including the Supreme Award from the Japan Medical Association, the citation for Meritorious Service from the American Legion and most recently the Shottwell Award from Metropolitan Medical Center. He also is a member of numerous professional societies.



Dr. Nadine G. Smith

Dr. Smith has a private practice in Minneapolis and is also an assistant clinical professor of dermatology at the University of Minnesota. She also received her medical training at the University, receiving a masters in surgery in 1951 and the M.D. degree in 1952. She is a member of the American Academy of Dermatologists, American Medical Association, Minnesota Medical As-

sociation and the Hennepin County Medical Society. Dr. Smith also serves on the board of the University of Minnesota Medical Alumni Society.



John M. Warder

Warder is vice president of urban development for First Bank Minneapolis. Prior to this position, he served as chairman of First Bank Plymouth from 1982 to 1983, president of First Plymouth National Bank from 1969 to 1982, and vice president of Litho Supply Depot from 1960 to 1968. Warder's community activities include volunteer work with the Plymouth Avenue Development Corporation, Minnesota United Negro Fund, National Medical Fellowships, Inc., Macalester College, Minneapolis Foundation, Minnesota Black Documentary Film Project, and the Minnesota News Council.



Robert H. Tucker waved goodbye to the audience at MMF's Annual Dinner Meeting. Tucker is retiring from MMF's board after eight years of service.

Warder received his bachelor's degree from the University of Kansas. He has done postgraduate work at the Minneapolis College of Law (now William Mitchell College of Law).

Approved for re-election to MMF's board of trustees were **Norman E. Groth**, vice president of the International Division of Beatrice Food Service and Ingredients, Inc. and **Jerry E. Robertson**, executive vice president of the Life Sciences Sector of the 3M Company.

During the Annual Meeting, MMF also paid tribute to **Robert H. Tucker**, who retired from the board of trustees after two consecutive four-year terms. A lawyer, Tucker is a retired general counsel for 3M Company.

# UMD establishes a first with two campus-wide research centers

The University of Minnesota Duluth (UMD) School of Medicine gained greater maturity with the recent addition of two campus-wide research centers.

The Chemical Toxicology Research Center and the Statistical Center received the go-ahead from UMD administrators in July. The two centers represent significant growth, not only for the medical school, but for the entire UMD campus, according to Patricia Merrier, assistant vice chancellor for academic affairs.

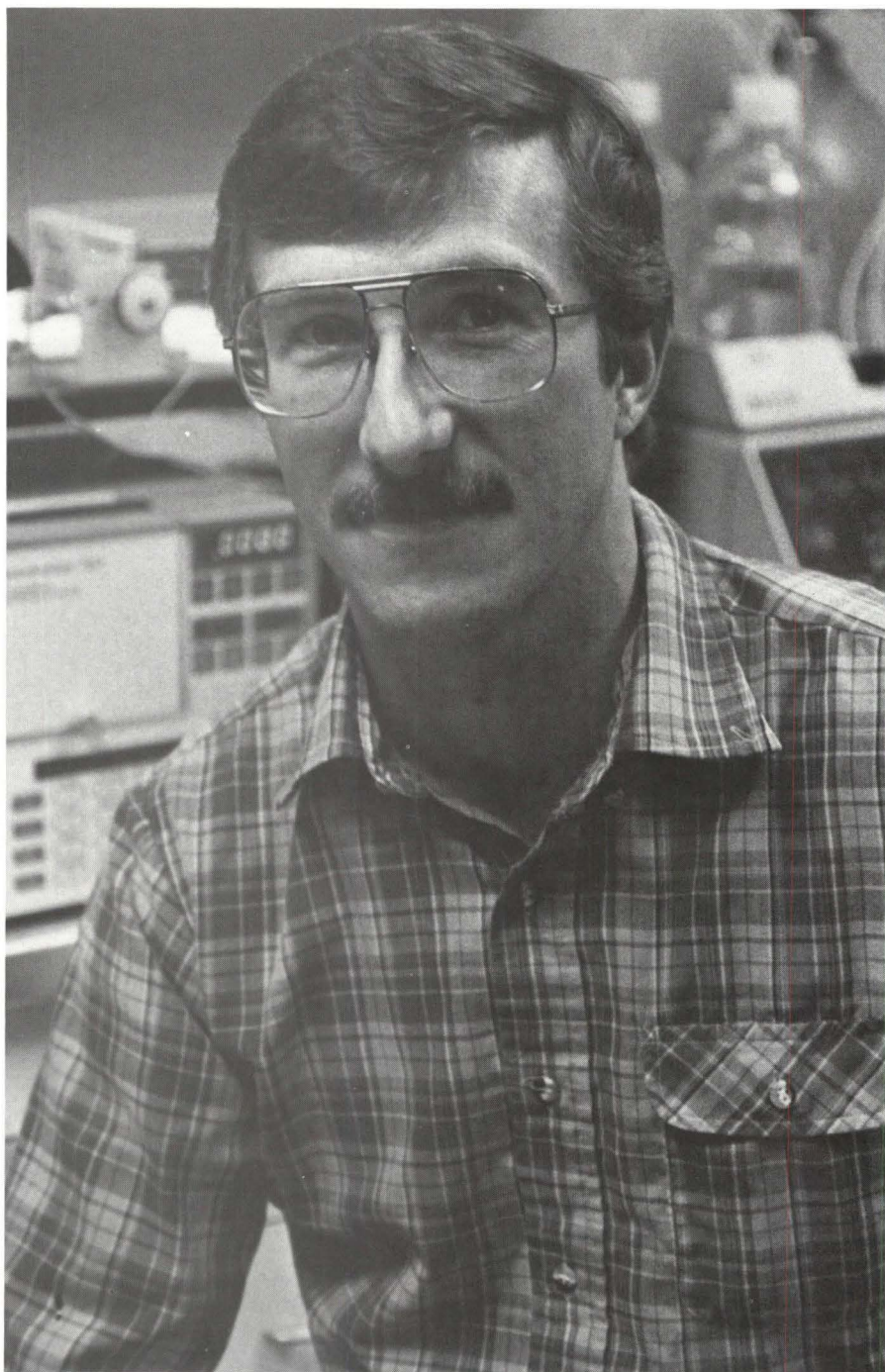
Unlike previous research centers, these new centers cut across not only departmental lines but across whole colleges within the UMD system. This gives a multidisciplinary dimension to the research centers which was not possible in the past.

Kendall B. Wallace, UMD School of Medicine assistant professor of pharmacology was named director of the new Chemical Toxicology Research Center. He has been a proponent for the establishment of a chemical toxicology research center at UMD for the past two years.

"The practice of toxicology is not tailored to any single academic department or college, but rather, draws from a collection of diverse scientific proficiencies," Wallace pointed out. "Accordingly, chemical toxicology is not only uniquely suited for, but also reliant on, interdisciplinary collaboration and coordination."

The Chemical Toxicology Research Center will not be another poison control center, he added. That function rests elsewhere. Instead, what he envisions for the Center is that it will become a major facility for toxicological research.

Wallace sees two primary roles for the Center. One is to pull to-



Kendall B. Wallace was named director of UMD's new Chemical Toxicology Research Center which will draw together experts in neuroscience, biochemical science, chemistry and pharmacology.



gether experts in the various areas of toxicology, whether from within UMD or from without. The other is to provide an environment conducive to the stimulation of academic excellence in both toxicological research and training.

He also feels the Center will attract increased research funding to UMD and the supporting community.

"The establishment of a well-respected toxicology center on campus will improve the national visibility of Duluth and provide new dimensions to UMD as a whole," he said. "Indirect benefits of a successful center may be the attraction of highly-qualified professionals or possibly new business to the region."

Initial start-up funding for the Center is being shared by the deans of the School of Medicine and the College of Science and Engineering.

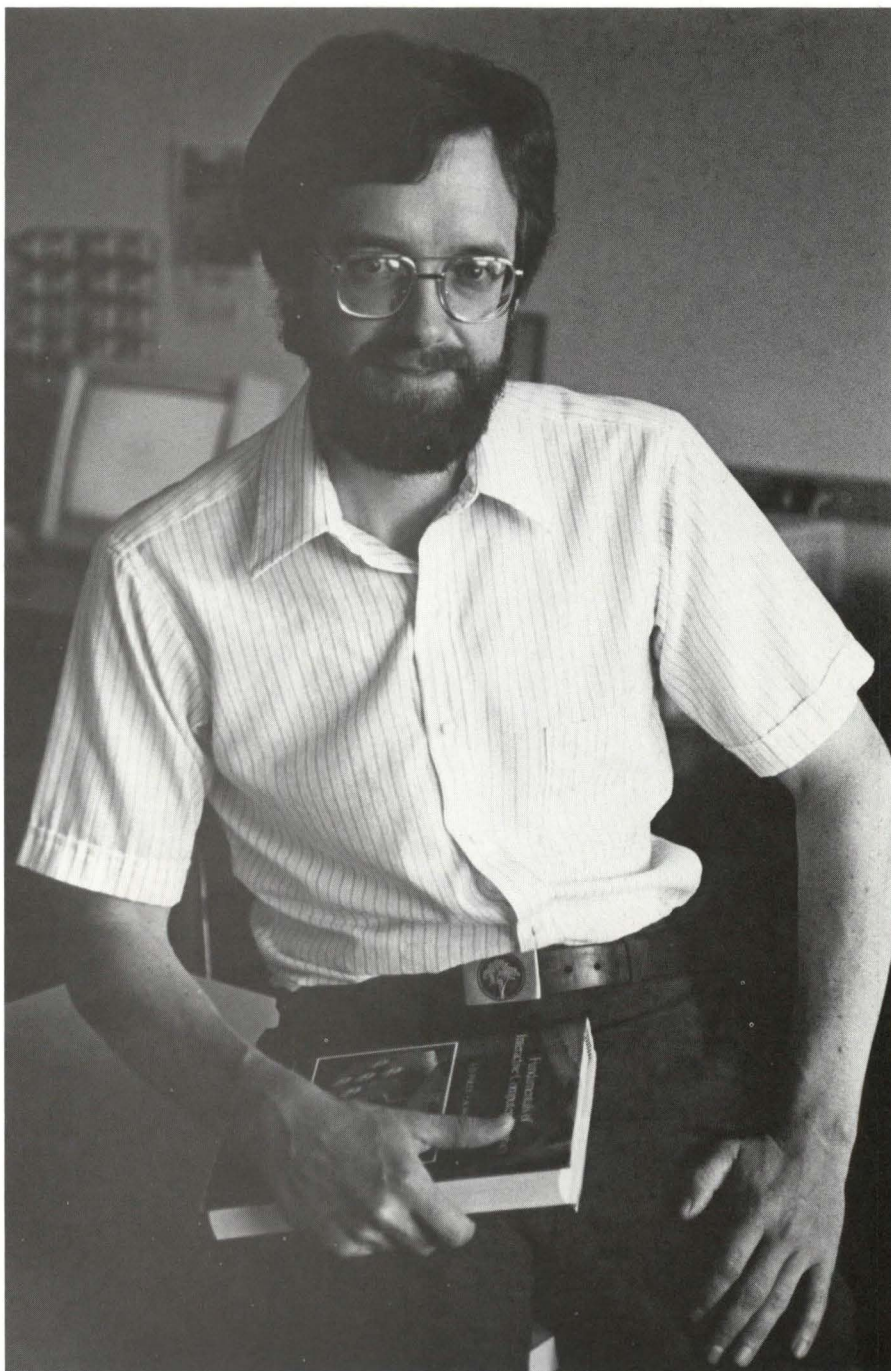
"By pooling our resources and the interest of several departments, the whole will be greater than the sum of the parts," explained Dr. Paul Royce, dean of the UMD School of Medicine.

While Dr. Royce credits Wallace with being the driving force behind the establishment of the new Center, Wallace is quick to point out that it was Dean Royce who provided the spark that helped make it happen.

"Whenever you are behind something, you can only push so far. Then you need someone from above to pull," Wallace said. Royce provided that "pull" when he lent his support to the center concept.

Two other UMD faculty members were also instrumental in the development of the Chemical Toxicology Research Center. They were Robert Carlson, College of Science and Engineering professor of chemistry, and Lester Drewes, School of Medicine associate professor of biochemistry. They will serve as the Center's associate directors.

"While on sabbatical leave," Drewes explained, "I thought about what there was about UMD and the region that would make a unique, attractive, and strong academic program. What center of excellence



Ronald Regal, UMD associate professor of mathematical sciences, will head the new campus-wide Statistical Center.

could we develop?

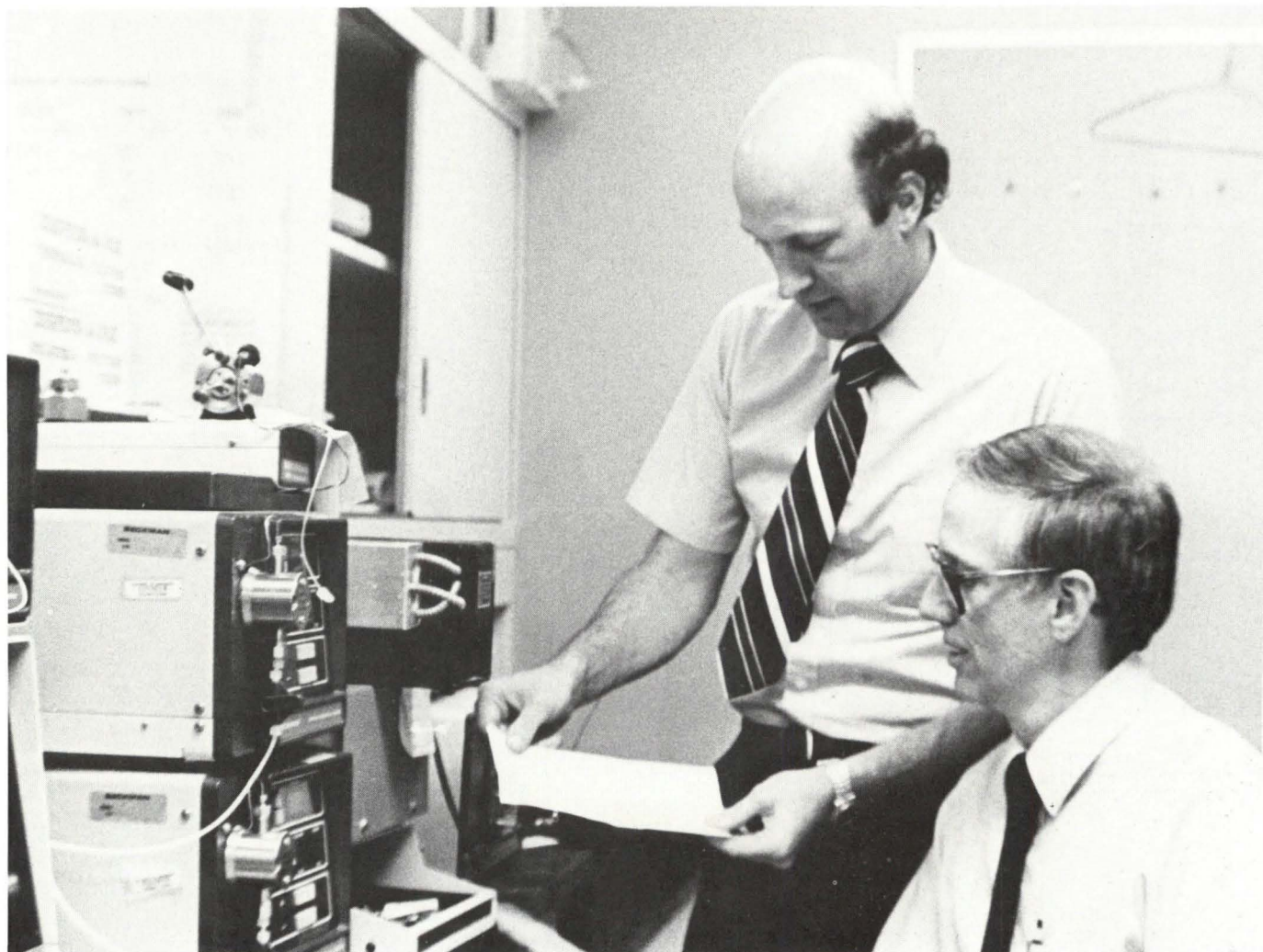
"One thing that we had going here was expertise in neuroscience, biochemical science, chemistry, and pharmacology, as well as a keen interest in the community for environmental quality. The thread that connects all these is chemical toxicology."

Intriguing to all three men is the possibility of future collaborative

ventures with such groups as the Environmental Protection Agency's (EPA) Environmental Research Lab in Duluth as well as the Natural Resources Research Institute.

"We each have our niche," Drewes pointed out, "but we may have more in common than apart."

Carlson believes it is the Center's interdisciplinary character that will give it strength.



Lester Drewes, associate professor of biochemistry at UMD's School of Medicine, and Robert Carlson, professor of chemistry, will serve as associate directors of the Chemical Toxicology Research Center.

"With the Chemical Toxicology Research Center, we have the opportunity to have a high-quality program from many disciplines," he said. "We'll have the resources of many departments. Resources that will allow us to do things we couldn't do in any one department."

He also stressed that the primary mission of the Center will be research. But in that research, the Center will involve as many students as possible. "So, there is also an educational component to the Center," he added.

The other campus-wide research center, the Statistical Center, will be headed by Director Ronald Regal, UMD associate professor of mathematical sciences.

"The Statistical Center will provide visibility and cohesiveness for the discipline of statistics, as well as facilitate statistical consulting within UMD and the community," Regal explained.

The first purpose involves services for the statistical community.

Presently, little communication exists within the statistical community at UMD and in Duluth, according to Regal. The statistical community in Duluth includes statisticians at EPA's Duluth Environmental Research Lab and at St. Luke's Hospital. The Statistical Center will help identify others with statistical interests in this geographic area and also help in attracting other statistically-oriented people to Duluth.

"It will aid in the whole technological draw to Duluth," Regal emphasized.

To facilitate statistical consulting, the Statistical Center will provide a mechanism for matching statistical needs with the statistical expertise best suited to meet those needs.

The two new research centers will be mutually beneficial, Drewes stressed. "I see our position strengthened by the Statistical Center," he said. "We, and people like us, will need their expertise."

"The establishment of both centers will add new dimension to the quality education available at UMD," Wallace concluded.

*Written by Carole Jaworski, Science Editor, UMD News Service*

# Class Notes

'29 Dr. Joseph Rude of Juneau, Alaska was honored by a proclamation from the Alaska Legislature on his 90th birthday in April.

'38 Dr. Milan V. Novak, who was president of his medical school class in 1938, is still active in his profession at age 78. He spent most of his career at the University of Illinois, serving as head of the department of microbiology and dean of the graduate school. He "retired" to Arizona in 1969, but joined the faculty of the University of Arizona College of Medicine in 1970. Since then, he has been a lecturer in internal medicine, coordinator of Research on Human Subjects and chairman of the Institutional Review Board. This latter committee approves and monitors all projects which utilize human subjects in research. At a time when heart transplants and artificial heart implants were extremely controversial, this committee granted Dr. Jack Copeland permission to use the Jarvik 7 artificial heart as an interim "bridge" — the first such approval in the world of transplant activity. Dr. Novak plans to continue to serve as semi-retired faculty at the University of Arizona. He and his wife Dorothy celebrated their 50th wedding anniversary in 1984.

'40 Dr. Bernhoff Skogmo of Mitchell, South Dakota retired in December 1983. He is enjoying retirement with lots of golfing and fishing.

'42 Dr. John G. Davidson has just returned from Afghanistan and Pakistan, where he spent three months taking care of the Afghanistan Freedom Fighters and the Afghanistan refugees. He also spent some time lecturing on orthopedics at the Afghan Medical School.

'43 Dr. Roberta G. Rice, of the Veterans Administration Medical Center in Huntington, West Virginia, received The National Commander's Award

from the Disabled American Veterans for her outstanding service to America's disabled veterans.

'46 Dr. Richard G. Norby is practicing internal medicine at Venice, Florida.

Dr. Loren E. Nelson, a clinical associate professor of colon and rectal surgery at the University of Minnesota, was recently awarded a plaque for outstanding and meritorious contributions as a member of the Minnesota Board of Medical Examiners from 1971 to 1984. Dr. Nelson is a past president of the Ramsey County Medical Society and the St. Paul Clinical Club. He has three sons who also practice medicine.

Dr. Alvin L. Schultz was named chairman elect of the Board of Governors of the American College of Physicians in October. The American College of Physicians is an organization of specialists in internal medicine and numbers 63,000 members.

Dr. Bernard P. Strouth of Boise, Idaho has been named Family Physician of the Year by the Idaho Academy of Family Physicians. After graduating from medical school, Dr. Strouth spent two years as a battalion surgeon with the United States Army's 10th Mountain Division in Colorado and Wyoming. He then served as a surgical assistant in Dubuque, Iowa, moving to Council, Idaho in 1949. In 1958, he moved to Boise and joined the staff of St. Luke's and St. Alphonsus Regional Medical Centers. He has held many positions in the medical community there, including serving as former chief of staff of St. Alphonsus. Dr. Strouth represented the Idaho Family Practice Society at the World Conference on Family Medicine in Melbourne, Australia in 1972.

'55 Dr. James R. Schuft has discontinued private practice in International Falls, Minnesota, and is now a radiologist at the Veterans Administration Medical Center in Hot Springs, South Dakota.

'56 Dr. Mitchell Rosenholtz is working on the 30-year Reunion of the Class of 1956. He asks all members of the class to return the questionnaire.

'60 Dr. Wendell Geary, medical missionary, continues his work at Bethesda Hospital in Serukam, Indonesia. He has been at this hospital since 1974 when there were only three main buildings: a clinic and surgery and in-patient units which were connected by covered sidewalks. There were fifty employees then, ranging from doctors to janitors. Today, the hospital complex has grown to include a chapel, nursing student dormitories, overnight cottages, a motel, laundry room, kitchen, and a second in-patient unit. In addition, there are 170 hospital employees working each day.

'61 Dr. Joseph Westermeyer, president of the Minnesota Psychiatric Society, will serve as a member of the task force on standards for alcohol and drug abuse services for the Joint Commission on Accreditation of Hospitals for 1985-86. He has also been elected a member of the Governing Council, Psychiatric Services Section of the American Hospital Association. In addition, he is a consultant to the Mental Health Division, World Health Organization.

'62 Dr. Waldemar G. Johanson Jr. has been named chairman of the department of medicine at the University of Texas Medical Branch in Galveston, Texas.

'65 Dr. Wally A. Rogers, an associate pathologist, has left the University of Missouri in Columbia, to return to private practice in Rutland, Vermont. Dr. Rogers completed his pathology residency in Rutland in 1972.

'68 Dr. Grant Miller has been named assistant dean for student affairs and associate professor of psychiatry and behavioral sciences at the Univer-

sity of Nevada School of Medicine in Reno.

**Dr. Richard E. Latchaw**, of Pittsburgh, Pennsylvania was recently named a Fellow of the American College of Radiology. Dr. Latchaw is presently associated with the Presbyterian University Hospital, the Children's Hospital of Pittsburgh, the Magee Women's Hospital, Western Psychiatric Institute and Clinic and the Veterans Administration Hospital in Pittsburgh.



Dr. Richard L. Stennes, class of 1969, was inaugurated as the 15th president of the American College of Emergency Physicians.

**'69** **Dr. Richard L. Stennes** was inaugurated recently as the 15th president of the American College of Emergency Physicians. In this capacity, he will serve as chief spokesperson for the college, which is the third largest medical specialty society in the United States with more than 11,200 members. Its primary goal is to improve the quality of emergency medical care by providing continuing education for its members. Dr. Stennes is currently president of two San Diego-based emergency medicine organizations: Associated Emergency Physicians Medical Group, a professional corporation; and Emergency Management Systems, Inc., a comprehensive physician service company. In addition, he serves as consultant to Med Plus Corporation, which provides marketing services and programs to hospital emergency departments. Dr. Stennes founded this organization in 1983 and the program has now been implemented in more than 40 hospitals in California, Washington, Florida and New England.

**'73** **Dr. Richard F. Johnson** operates the Industrial Medical Center in Largo, Florida, where over 1,000 patients are seen each month.

**Dr. Robert Bowman**, medical director of the American Red Cross Blood Center, St. Paul Region, has been appointed to the 11 member Minnesota Health Commissioner's Task Force on AIDS. The purpose of the task force is to examine the problems associated with AIDS and the transmission of the virus that causes AIDS—Human T - Lymphotropic Virus Type III (HTLV-III). The task force will then make recommendations to the Commissioner on prevention and control of the disease and on patient care.

**'76** **Dr. John P. Hubert Jr.** is one of three authors of the book *An Atlas of the Surgical Techniques of Oliver H. Beahrs*, written as a teaching aid for medical students and residents. Dr. Hubert is a practicing cardiac, thoracic, and peripheral vascular surgeon at the Theda Clark Regional Medical Center in Neenah, Wisconsin. He began his medical training at UMD School of Medicine in 1972.



Dr. John Hubert (seated), Class of 1976, autographed a copy of his best-selling book *An Atlas of the Surgical Techniques of Oliver H. Beahrs*. Looking on, from left, were: UMD School of Medicine Dean Paul Royce; Dr. Hubert's former mentor Dr. Robert Campaigne; and Dr. Hubert's former teacher Lois Jane Heller, UMD School of Medicine associate professor of physiology.

**'77** **Dr. Kathleen Bohanon** has begun a neonatology fellowship at Wilford Hall Medical Center, U.S. Air Force in San Antonio, Texas.

**Dr. John C. Ring** has been appointed to the medical staff of St. Paul Children's Hospital as a hospital-based physician. A pediatric cardiologist and pediatric critical care specialist, Dr. Ring will direct the children's cardiac catheterization laboratory and serve as an associate director of the Pediatric Intensive Care Center.

**Dr. W. Scott Harkonen** is the author of a book entitled *Traveling Well - A Comprehensive Guide to Your Health Abroad*. "Prevention is the key to healthy travel," writes Dr. Harkonen, who is an immunologist and internist practicing in San Francisco.

**'78** **Dr. John B. Gross Jr.** has been appointed senior associate consultant in the division of gastroenterology and internal medicine at the Mayo Graduate School of Medicine. Since August 1984, he has been a Mayo Foundation Scholar at the University of Berne in Switzerland.

**'80** **Dr. William T. Simonet** has completed graduate training in orthopedic surgery at the Mayo Graduate School of Medicine. He will begin a private practice with Orthopedic Associates, Limited in Rochester, Minnesota.

**'82** **Dr. Diane L. Sorenson** has completed graduate training in internal medicine at the Mayo Graduate School of Medicine.

**'85** **Dr. Ben Agar, Dr. John Axelson, Dr. Andrew Bruggdorf, Dr. Patrick Courneya and Dr. Elizabeth Siitari** have begun their first year of a three-year residency in family practice in the Methodist-University Family Practice Program at the Creekside Family Practice Clinic in St. Louis Park, Minnesota.



## *In Memoriam*

**Dr. Arden L. Abraham** Class of 1928, died in May, after a long illness. He received his fellowship in radiology at the University of Minnesota and remained on the teaching staff here for one year. He also practiced medicine in Gibbon, Minnesota before going to Duluth in 1938. There, he served as chief of the radiology department at St. Luke's Hospital for many years. He was an honorary member of the medical staffs of St. Luke's, St. Mary's, and the former Miller Hospitals. He was a life member of the Minnesota State Medical Association, American Medical Association and the University of Minnesota Alumni Association. He was an honorary member of the American College of Radiology, the Rocky Mountain Radiological Society, the Radiological Society of North America, and past president and life member of the Minnesota Radiological Society. Dr. Abraham is survived by his wife Verona, two sons, two daughters and four grandchildren.

**Dr. Theodore M. Berman Sr.**, Class of 1930, died of pneumonia on October 20 in St. Paul. He was 78. He had been a radiologist in Miami, Florida for more than 40 years. He is survived by his brothers William and Dr. Reuben Berman, a 1932 graduate of the University of Minnesota.

**Dr. Russell J. Eilers**, Class of 1952, died on November 12 at the age of 60. He had served as medical director of Bio-Science Labs in Van Nuys, California. He is survived by his father Walter.

**Dr. Fred A. Ellis**, Class of 1937, died in April of multiple myeloma at the age of 75. Dr. Ellis was a former regional medical director for the Federal Aviation Administration and held a commercial pilot's license. During World War II, he served in North Africa and Italy as a flight surgeon and Lieutenant Colonel in the Army Air Corps. In the mid-fifties, Dr. Ellis was on active duty in Germany, retiring from the Air Force Reserve in 1970. He was

active in the Aerospace Medical Association and was very well known in aviation medicine. Dr. Ellis is survived by his wife Helen, a son, a daughter, and one grandson.

**Dr. Joseph L. Garten**, Class of 1931, died in November at the age of 78. He had practiced ophthalmology in Minneapolis for over 50 years. Dr. Garten is survived by his wife Julia, a son Alan, daughter Adele Dingfelder, and one granddaughter.

**Dr. Ivy B. Heinz**, Class of 1940, died in November at the age of 70. Dr. Heinz had practiced medicine in Shakopee for many years. Survivors include sons Larry, Mark and Rick and five grandchildren.

**Dr. Richard C. Horns Sr.**, Class of 1943, died on August 15. Dr. Horns had had a private practice in ophthalmology for forty years in Minneapolis. In 1981, his daughter Dorothy joined him and will now continue the practice. In addition to his practice, Dr. Horns taught muscle surgery at the University of Minnesota where he was a professor of ophthalmology. He also served on the staffs of Abbott-Northwestern, Methodist, Mt. Sinai and Fairview hospitals. At one time, he was a surgeon for Burlington Northern and a missionary ophthalmologist in Nepal and Honduras. Dr. Horns is survived by his wife Dorothy, son Dr. Richard C. Horns Jr.; daughters Mary Corrado, Dr. Dorothy J. Horns, and Gloria Horns; and three grandchildren.

**Dr. Chester W. (Bud) Johnson Jr.**, Class of 1950, died of cancer on November 27 in Loma Linda, California at age 64. He served as a captain in the United States Air Force in Europe and was awarded the Distinguished Flying Cross and two Oak Leaf Clusters. Dr. Johnson is survived by eight children.

**Dr. Robert J. Knip**, Class of 1960, died on December 7. Dr. Knip practiced medicine in Ortonville, Minnesota from 1961 until the time of

his death. He is survived by his wife Mardonna; sons Matthew, Daniel and Joel; and daughters Jeanette and Allyson.

**Dr. Henry J. Krawczyk**, Class of 1945, died in October in Long Beach, California at age 67. Dr. Krawczyk was a radiologist and had lived in Minneapolis and Fargo, North Dakota before moving to California. He is survived by his wife Vivian, son Richard and daughters Jo-Ann, Cecily and Kathy.

**Dr. Virgil J.P. Lundquist**, Class of 1943, died in September after an illness. He had had a surgical practice in Minneapolis, which he shared with his son Kipton. Dr. Lundquist was a chief supporter of the Medical Students' Adytum when it was established, and of its recent remodeling in 1979. He is survived by his wife Irma, son Dr. Kipton and daughters Karen, Dr. Karna, and Kada.

**Dr. Berton D. Mitchell**, Class of 1939, died on October 5 at the age of 72. He had practiced medicine for more than forty years. He was a member of the Minneapolis Academy of Medicine, the American Board of Surgery, Minnesota Surgical Society, Minneapolis, Surgical Society and St. Mary's Hospital staff. Dr. Mitchell is survived by his wife Karen, daughters Leslie Ann and Margaret Jean Luther, son Berton Lee, and four grandchildren.

**Dr. Raymond L. Page**, Class of 1926, died on October 30. Before his retirement, he was a general practitioner of medicine in St. Paul. Dr. Page is survived by his wife Allison, sons Arthur and Robert, and five grandchildren.

**Dr. Philemon C. Roy Sr.**, Class of 1935, died on August 18 at the age of 77. A general practitioner, Dr. Roy had interned at Minneapolis General Hospital before beginning a private practice in St. Paul in 1937. He remained there until his retirement in 1975. Dr. Roy is sur-

# Calendar

vived by his wife Sally West, daughters Barbara Hansen and Alice Krane, son Dr. Philemon Roy Jr., and many grandchildren.

**Dr. Richard P. Virnig**, Class of 1941, died September 11 at his home in Wells, Minnesota. He was 70. He is survived by his wife Gertrude; sons Bruce and Rick; daughters Susan, Janet and Anne; sister, Genelle Simoni and three grandchildren.

**Dr. Carl Ragnar Wall**, Class of 1927, died in October at age 87. He had a private practice in the Twin Cities for many years before his retirement. Dr. Wall received the Harold S. Diehl Award from the University of Minnesota in 1981. He was preceded in death by his wife Julia and is survived by daughters Laverne and Charlotte, son Robert, 12 grandchildren and six great-grandchildren.

Prominent urological micro-surgeon, **Dr. Julius H. Winer**, Class of 1935, died September 9 in Superior, Wisconsin. A native of Eveleth, Minnesota, Dr. Winer spent four years in the Army as chief of urology at Halloran General Hospital in New York before beginning his private practice in Beverly Hills, California. Dr. Winer was a pioneer in the field of male infertility and andrology. He taught the subject at UCLA where he was an associate professor. He also served as visiting lecturer to the Institute of Urology in London, England and as a consultant to the Harvard Medical School. He was active in most Los Angeles and California medical societies, as well as the American Board of Urology, the American College of Surgeons and the International College of Surgeons. Dr. Winer is survived by his wife Naomi and daughters Sharon, Deborah and Miriam.

**Dr. Philip H. Woutat**, Class of 1930, died August 22 in Grand Forks, North Dakota. He was 79. He served as president of the North Dakota Medical Society in 1954, and sat on the Medical Center Ad-

Feb. 12

Congestive Heart Failure — Half day — Radisson University Hotel, Minneapolis, CME (612) 373-8012

Feb. 20-21

Current Concepts in Perinatal Medicine Primary Care Physicians — CME St. Paul Ramsey Medical Center — 640 Jackson Street, St. Paul (612) 221-3992

Feb. 26-27

Drug Therapy Symposium VII — Radisson Hotel, St. Paul — CME (612) 373-8012

March 5-8

Fourth Annual Critical Care Conference Physicians/Nurses — CME St. Paul Ramsey Medical Center — 640 Jackson Street, St. Paul (612) 221-3992

March 21-22

Seventh Annual Update Occupational Medicine — Physicians Nurses, Industrial Health Specialists — CME St. Paul Ramsey Medical Center — 640 Jackson Street, St. Paul (612) 221-3992

March 25

Hypertension Symposium — 2-690 Moos Health Science Toser, University of Minnesota, Minneapolis CME (612) 373-8012

April 2-4

Pulmonary Function Testing Workshop — Physicians, Nurses, Industrial Hygienists CME St. Paul Ramsey Medical Center — 640 Jackson Street, St. Paul (612) 221-3992

April 4-5

Eye Enucleation — 2-155 Jackson Hall, University of Minnesota, Minneapolis CME (612) 373-8012

April 10-11

Gynecology Update — Primary Care Physicians & Ob/Gyns — CME St. Paul Ramsey Medical Center — 640 Jackson Street, St. Paul (612) 221-3992

April 11-12

Colon and Rectal Disease in Primary Care — Holiday Inn Downtown, Minneapolis CME (612) 373-8012

visory Council from 1956 to 1970. Dr. Woutat, a radiologist, was an assistant professor of medicine at the University of North Dakota and served as special lecturer in radiological anatomy. He also headed the x-ray departments at the Grand Forks Clinic, and at the former Deaconess and St. Michael's hospitals there. He was instrumental in establishing the x-ray training program in Grand Forks more than 30 years ago. He was elected board chairman of the Agassiz Health Planning Agency in 1973. In 1981, the North Dakota Medical Association recognized Dr. Woutat for his 50 years of service in the medical community.

Dr. Woutat is survived by his wife, three sons and seven grandchildren.

The Minnesota Medical Foundation was also notified of the death of former medical school faculty member **Dr. John L. McKelvey**. He died on October 1 at the age of 84. Dr. McKelvey was professor and head of the department of obstetrics and gynecology at the University of Minnesota Medical School from 1938 to 1967. He is survived by his wife Ruth and sons Robert, Hubert and John. The obstetrics and gynecology department is establishing the J. L. McKelvey lectureship fund in his memory.



**Minnesota Medical Foundation**  
535 Diehl Hall, University of Minnesota  
Minneapolis, Minn. 55455  
Phone: (612) 373-8023

Nonprofit Org.  
U.S. Postage  
**PAID**  
Minneapolis, Minn.  
Permit No. 155

Address correction requested

*The staff of the Minnesota Medical Foundation extends its thanks to all of you who so generously helped us in the past year. And, we wish you the very best in the new year. Happy 1986!*



*David Teslow, executive director  
Lowell Weber, director of development  
Helene Horwitz, director of programs  
Sandra Weston, director of finance*

*Sue Andersen  
Deborah Awonuga  
Kathryn Broderick  
Elaine Cunningham  
Dorothy Edgington  
Eivind Hoff  
Gracie Holman  
David Johnson*

*Dana Lindsay  
Doreen Loomans  
Mary Ellen Mattson  
Janet Miller  
Arnette Nelson  
Joan Scully  
Martha Smith*

