

University of Minnesota

Medical Bulletin



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**Community and University:
Making Life Lead-Safe**

Spring 1995



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ON THE COVER:

Mary Jordan, RN, PNP, examines Community-University Health Care Center/Variety Children's Clinic patient Krisanne. The clinic, along with the Phillips Neighborhood Lead Collaborative, is participating in a study of the impact of parent education on blood lead levels in children.

Photo by Tim Rummelhoff.

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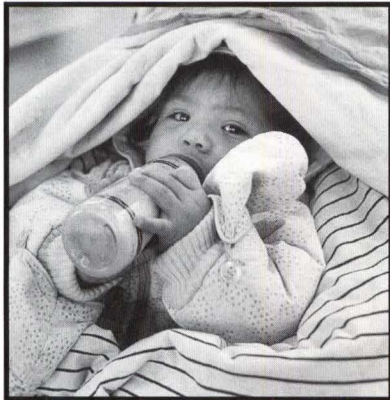
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Amber and Abigail (right) and Krisanne (below) visit the clinic.



Community & University: Making life lead-safe

Phillips Neighborhood Lead Collaborative works to educate the community about risks of lead.

by Jodi Ohlsen Read
Photos by Tim Rummelhoff

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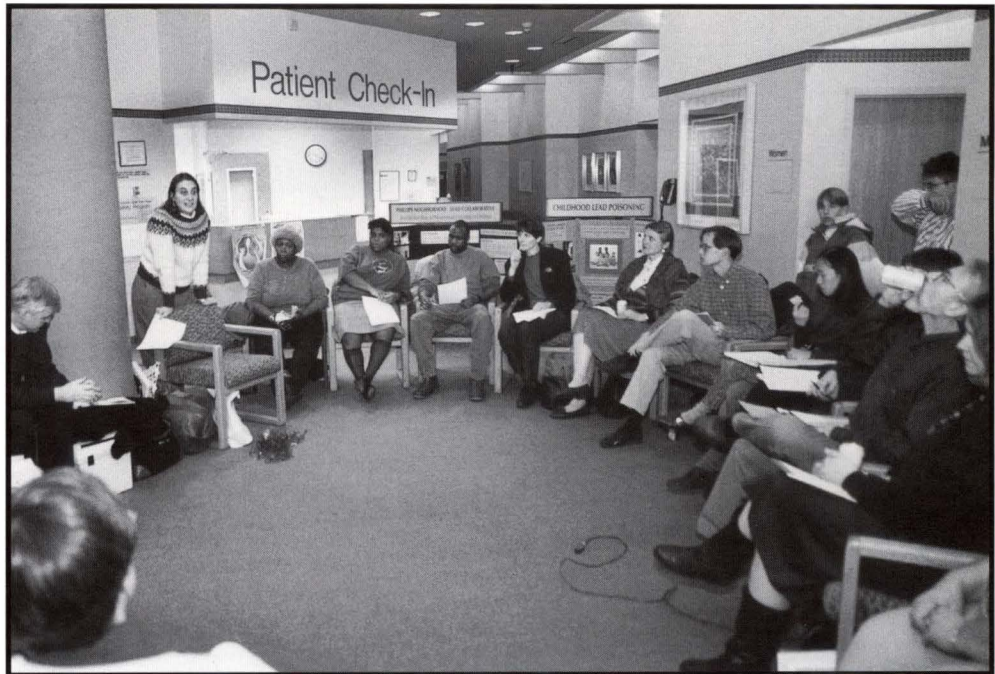
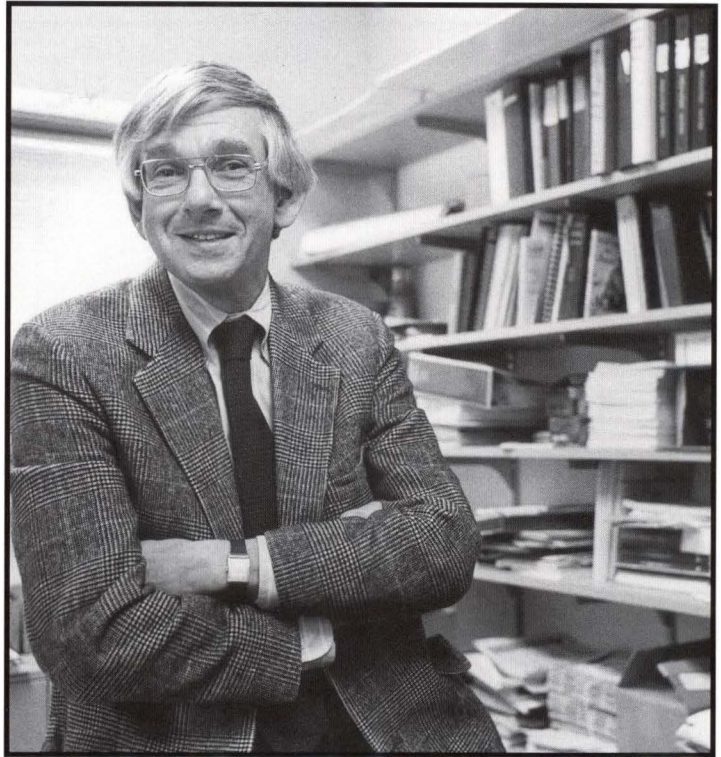
hat makes up a community? The people — people who live in the area and people who work there. In an ideal world, these groups work together to make their community healthy and whole. In the Phillips neighborhood of Minneapolis, this is more than a lofty ambition, it's an ongoing project.

When residents of the Phillips neighborhood became worried about environmental hazards their children were exposed to, they looked to the community for solutions. They brought their concerns to the Community-University Health Care Center/Variety Children's Clinic (CUHCC/VCC) believing that as part of the community and the University, the clinic (see sidebar) should help deal with the problems.

The neighborhood, a diverse group of nearly 18,000 people and the largest of Minneapolis's 84 neighborhoods, has a long history of activism. The citizens' participation organization has existed for over 30 years so the people have a sophisticated mechanism for bringing issues forward. Susan Gust, co-founder of the Phillips Neighborhood Lead Collaborative, approached Dr. Amos Deinard, associate professor of pediatrics and director of CUHCC/VCC, with the neighborhood's concerns. "When I originally went to Amos, I more or less demanded that the clinic help evaluate our community," says Gust.

That initial meeting in 1991 was memorable for Deinard, also. "When Susan and two other neighborhood activists first came to see me, their argument was that the clinic was not doing enough for the neighborhood," says Deinard. "I said 'We're taking care of hundreds of people. Is that not sufficient?' The clinic has been in the neighborhood since 1966 and before that lots of folks were falling through the cracks and not getting comprehensive, routine health care. But the point they were making was that the clinic should be used for addressing health care needs other than the immediate needs. So I told them that we would figure out a way to at least consider the issues."

As a member of the community and the University, Deinard began to explore possible approaches. After he met with Fred Smith from the Center for Urban and Regional Affairs, local advocacy group leaders, the mayor, and legislative representatives, responsibility for the next step was turned over to the neighborhood. "Being a good scientist, Amos told us over and over that we couldn't set up a study to prove what we already believed," says Gust. "He told me



Above: Dr. Amos Deinard. Below: Susan Gust facilitates a Phillips Neighborhood Lead Collaborative meeting.

Lead Facts

According to the Minnesota Department of Health, lead is a part of everyday life. It is found in the air, soil, household dust, some paint, and on some foods.

What is lead poisoning?

Lead poisoning occurs when too much lead builds up in the body. Lead enters the body when inhaled as fumes or dust, paint chips, or in water. Small amounts of lead over time or one large dose of lead may be more than the body can eliminate and it builds up.

Effects of lead

Extreme levels of lead can cause convulsions, brain damage, and even death. High levels of lead can cause learning, behavior, and health problems in young children and even low levels may impact learning and behavior. Lead can also cause high blood pressure, kidney damage, and damage to reproductive organs in adults. Often there are no symptoms until the health problems are serious.

Treatment

There are treatments used to lower the blood level. Contact your physician for more information.

Common sources of lead

■ Lead-based paint

Cracking, chipped paint, especially in older homes, is a common source of lead for young children.

■ Leaded dust

Household dust can contain small pieces of lead from tracked-in soil or paint chips.

■ Soil

Lead can be found in soil next to buildings with chipped paint or next to older remodeled homes. It can also be found in soil near heavy traffic areas.

■ Food

Soil residue on fresh vegetables and fruits may contain lead.

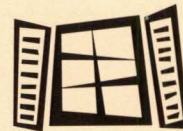


■ Water

If your home or water system has lead or copper pipes with lead solder, lead levels in your water may be high.

Preventing lead exposure

- Have children tested for lead between ages 9 months to 6 years.
- Wash hands frequently, especially children's hands.
- Test pre-1978 houses for lead paint.
- Don't let children chew on anything that may have lead paint on it.

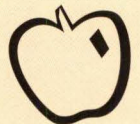


- Clean windows and sills often to get rid of loose paint and dust.

- Do not use a household vacuum to clean up paint chips or

leaded dust — it will spread the dust into the air.

- Keep home as dust-free as possible — wet mop floors, wipe furniture and windowsills.
- If exposed to lead at work, remove clothes at work if possible and shower as soon as possible.
- Don't let children play in or eat soil next to house or street.
- Take off shoes to avoid tracking soil and dust into the home.
- A well-balanced diet, particularly foods high in calcium, vitamin C, and iron, is also important to help the body absorb less lead and excrete more lead.



For more information about lead, please call the Minnesota Department of Health, Lead Program, 612-627-5498. ■

When residents of the Phillips neighborhood became worried about environmental hazards their children were exposed to, they looked to the community for solutions.

to come back with something specific that could be researched in detail.” Deinard agreed to use whatever resources he had available through the clinic, through the hospital, and through the University but first, the neighborhood had to identify a particular problem.

Tackling lead exposure

Lead was the issue they decided to tackle. The Phillips community is particularly at risk for lead exposure due to the age of the homes and the high-traffic location, bordered by several major thoroughfares. About 90 percent of the homes were built before lead-based paint was banned from residential use. The older homes may also have lead water pipes, which are another source of exposure. In addition, the soil outside the homes and in the playgrounds contains lead from various sources such as air pollution, automobile exhaust, and paint chips from home exteriors. As a result, most of the children are at risk for lead poisoning or more technically, for an elevated blood lead level.

An elevated blood lead level can affect a child’s intellectual development and may also cause other significant health problems (see sidebar). Poor nutrition and lack of primary health care can add to the risks of lead burden.

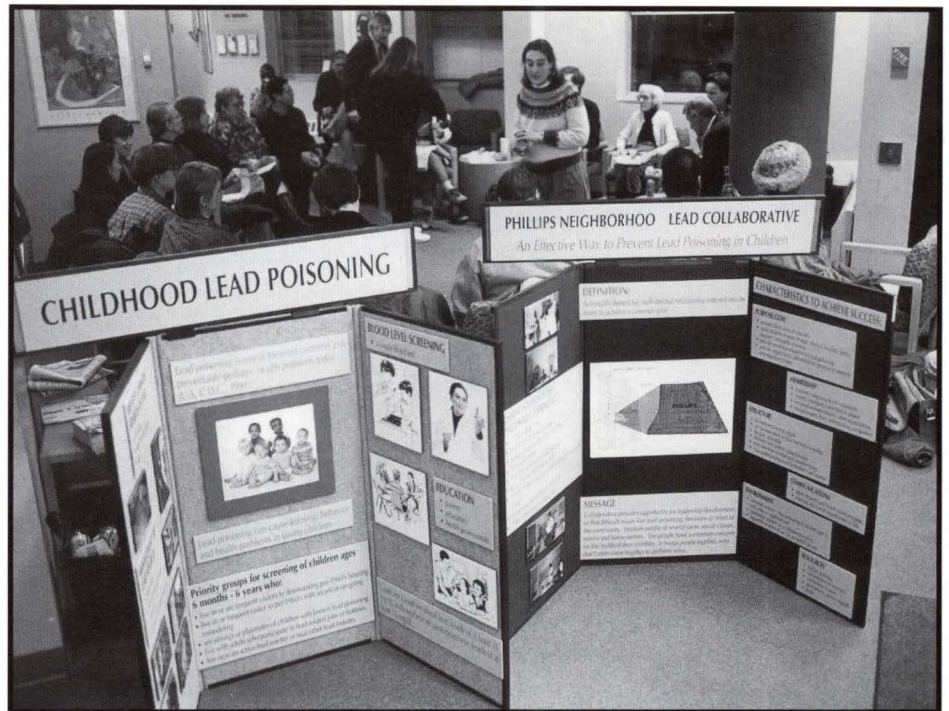
“We suspected that 50 percent of the kids had some level of lead poisoning,” says Gust. “But Amos kept reminding us that we had to prove what we suspected. We knew that if we could figure out how to deal with the lead issue, we could use the same model to deal with other environmental health issues or even come up with an environmental health delivery model.” Deinard saw similar possibilities.

Shortly before Gust came back with her specific request to address the lead issue, Deinard had attended a conference on lead abatement and had been mulling over a lead education project of his own. He had already identified Elsa Shapiro, M.D., assistant professor in the Department of Neurology and director of the Division of Pediatric Neuropsychology, as a potential collaborator in a lead project. The timing was ideal.

Although the issue had been chosen, the approach still had to be determined. It was clear that abatement wasn’t a viable option for this group. Since so many of the homes were older, the total cost of removing or covering the sources of lead would be unmanageable. “The cost is about \$15,000 per house,” says Deinard. “I figured there simply isn’t enough money in the till to abate every home in the Phillips neighborhood, let alone in the rest of the city. We had to look at it from a different perspective.” Education was the most obvious approach.

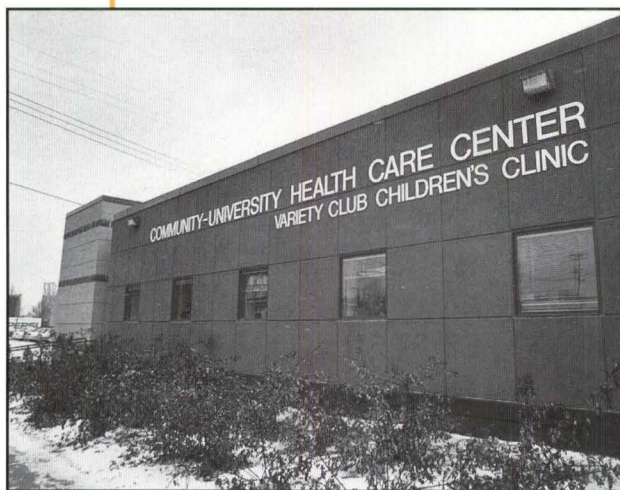
Education as a tool

If the homes couldn’t be made lead free, then the next option was to help the residents be lead safe. This would involve educating people about what lead is, what it does, and how to minimize exposure to lead. The Phillips Neighborhood Lead Collaborative was formed and began the process of securing federal funds, through the University, and planning the



The Community-University Health Care Center and Variety Children's Clinic

The clinic was established in the Phillips neighborhood of South Minneapolis in 1966, in response to the legislature's and South Minneapolis's request that the University become more involved in the community. At that time, the clinic was designed to principally serve the Phillips neighborhood but today it also serves the Powderhorn and Longfellow communities and people from other parts of Hennepin, Ramsey, Anoka, and Dakota counties.



In 1991, the clinic was able to open a new building on Bloomington Avenue and East Franklin Avenue with the help of funding from the University of Minnesota Hospital and Clinic and Variety Children's Association. The clinic now offers medical, dental, and mental health service for adults and children.

Services include primary preventive health care, treatment for illness and injury, women's health services, preventive and restorative dental care, counseling, psychological and psychiatric consultation, and special programming.

The operating budget for the clinic depends upon patient fees and grants from the City of Minneapolis, Hennepin County Community Health and Community Services Department, Minnesota Departments of Human Service and Corrections, and the United Way of Minneapolis. Funds specifically designated for the lead education program are handled through the Variety Children's Association, an affiliate of the Minnesota Medical Foundation. For more information about the lead education program fund, please contact the Variety Children's Association, 391 East River Road, Minneapolis, Minnesota 55455, 612-624-6900. ■

details of the project.

Deinard obtained a grant from the Centers for Disease Control to study the effect of education on limiting lead burden. The project is designed to evaluate the effectiveness of intensive and repeated educational interventions for mothers as the primary way to prevent elevated blood lead levels in their children. It is also designed to be culturally sensitive to different backgrounds and relies heavily on peer teachers from the community. The total funding is \$1,032,939 over three years. He has also applied for a substantial grant from the Maternal and Child Health Bureau for approximately \$1 million over five years.

Although Deinard obtained the grant funds for the project, he is quick to point out that the University's role is that of a participant — not the leader. "This is a neighborhood project," says Deinard. "Not simply a University activity." In addition to residents and University staff, members of the Collaborative include Valspar, Honeywell, legislative representatives, and other community business leaders. "This time, the community came up with the idea and invited the professionals in," says Gust.

The University study will also draw other investigators into the community. It involves researchers from various areas, including pediatric neurology, pediatric epidemiology, and the Minnesota Extension Service. Among the collaborators are Shapiro; Leslie Robison, professor, Division of Pediatric Epidemiology/Clinical Research; Peter Hannan, statistician in the Division of Epidemiology, School of Public Health; Becky Yust, assistant professor, Department of Design, Housing, and Apparel; and Dianne Corrin, extension educator. Each participant plays a different role, covering another aspect of the project.

The University members and other Collaborative members are working together toward the same goal. According to Deinard, the main concept is to use people from a culture to identify what the cul-

The project is designed to be culturally sensitive to different backgrounds and relies heavily on peer teachers from the community.

ture knows about lead and the best way to get information to those people. Because the neighborhood is so diverse, materials need to be developed for eight groups, including Hmong, Laotians, Cambodians, Vietnamese, Blacks, Hispanics, American Indians, and Whites. Focus groups have already shown that each culture will require materials specifically tailored for its needs. For example, information for Hmong will be presented in audio or video format instead of written brochures, and the nutritional aspect of preventing lead poisoning appears to be of greater concern to the Hispanic community. Once the best methods of communicating are determined, the next step is to develop the materials, teach the information, and train others to teach it.

The Collaborative plans to hire residents, through the University, to act as peer teachers. As Deinard explains, "This project will provide training and jobs for a small number of residents who will be assisted in securing permanent jobs related to their training. In this way the community will be able to sustain and expand the educational program, perhaps with consultation by, but not the direction of, University researchers."

To determine the effectiveness of education on limiting lead burden, Deinard and clinic staff will be selecting people at random who are either pregnant or who have a child who is not yet of crawling age and enroll them in the study. At this point, Deinard predicts that they will enroll about 537 people.

The participants will then be assigned to a control group or an intensive education group. The control group will gather its knowledge about lead from the sources generally available — doctor's office, television, word of mouth, etc. The intensive education group will receive specifically targeted information. In both groups, researchers will follow each child through his or her third birthday to see whether those whose parents received intensive education have lower blood lead levels than the control group.

"This is probably one of the first studies to make a real effort to address the cultural issues, recognizing that not every group is going to benefit from reading a flyer about lead," says Deinard. If the project is successful, it may be used as a model for similar environmental health and health care problems.

Collaboration benefits many

Both Deinard and Gust see the benefits of such a program. "If what we're doing with the Collaborative is successful," says Deinard, "it could be reproducible in any town that wants to make the effort. If education works, the literature can be transported to other communities and the model can be used for any other kind of problem."

Gust sees other immediate, local applications. "We want to revitalize our community in ways that can be duplicated. We believe that the collaborative model could be used to solve other problems. If this style of education works, we could begin resolving other health care issues."

Not only is the project a way for the University to participate in the community, it is also an opportunity for the neighborhood to feel like a part of the University. Says Gust, "This Collaborative is about teaching good leadership and good use of power. We're raising up the natural leaders of the community." ■



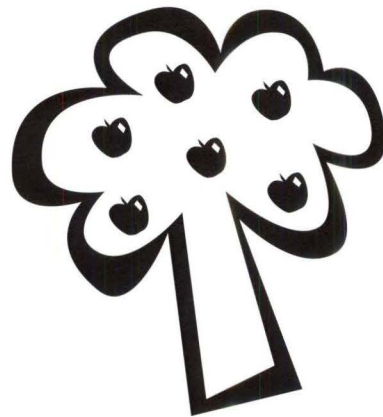
The Community-University Health Care Center/Variety Children's Clinic serves the diverse Phillips neighborhood and surrounding areas.



Toward a Cancer-Free Future



Dr. Les Robison, new holder of CCRF's Cancer Center chair, is conducting studies that will impact current and future cancer patients. by Jane Gfrerer



Childhood and cancer. Two words no one wants to hear together. However, each year some 7,000 American children, their families and doctors must face the awful fact. But, there is some good news for them.

Not too long ago, the big question asked by families of childhood cancer patients was, "How long does she have to live?" Fortunately, modern diagnostic tools, sophisticated surgical techniques, and improved therapies have become so successful that the question is becoming, "What happens to the child after the treatment is over?"

To help fund such studies, the University of Minnesota Cancer Center has awarded an endowed chair — established by the Children's Cancer Research Fund (CCRF) — to Leslie L. Robison, Ph.D., professor and director, Division of Pediatric Epidemiology and Clinical Research in the Department of Pediatrics.

Over the years, CCRF's support of Robison's studies has helped him lay the groundwork needed to procure larger, national grants. Recently, he won a 5-year, NIH-supported, multi-center study of 20,000 childhood cancer survivors. The timing of this study is important, for it addresses the issues of a population that is steadily increasing.

"In the U.S., we know that at least 70 percent, or close to 5,000, of the children diagnosed each year with cancer will be cured," says Robison. "If you look back, 1970 was the year when impressive improvements in the survival rate of childhood cancers began to occur. Now this first big wave of survivors is entering adulthood. These survivors are in their 20s and 30s, and we need to know what health issues they will be facing."

The study — conducted in collaboration with Mark Nesbit, Jr., M.D., professor, pediatric hematology/oncology, Joseph P. Neglia, M.D., M.P.H., associate professor, pediatric hematology/oncology/BMT, and Ann Mertens, Ph.D., assistant professor, pediatric epidemiology and clinical research — will address a number of questions, says Robison: "Is there a

higher rate of mortality for these individuals? What is the occurrence of second malignancies? What are the cardiac and pulmonary complications?"

One of the serious effects of childhood cancer that is already known is the possibility of cardiac damage. "Treatment of the most common childhood cancers includes radiation and/or chemotherapy," says Robison. "Children treated with either of these have been exposed at a very critical time in their life when they are growing and developing. They have been exposed to some very toxic agents, which are responsible for the cure of their cancer.

"There are certain types of chemotherapy that affect the heart muscle; maximum dose levels have been set to prevent acute toxicity, to prevent the child from having cardiac abnormalities while he or she receives treatment. But data shows now that some children who receive even low doses can have very serious cardiac abnormalities 10 to 15 years later. Some show effects even 30 years later when the individual is involved in strenuous athletics; some women have had heart failure during labor and delivery."

Radiation treatment is also suspected in creating long-term problems. According to Robison, "If the child receives radiation and the heart is in or near the radiation field, the potential exists for serious consequences. There are data on children who were treated with radiation who now have almost a 30-fold excess of cardiovascular disease, specifically myocardial infarctions."

Looking even further than the life of the patient, Robison's study will examine potential effects on the children of childhood cancer survivors. "What about the issue of fertility of these survivors?" Robison asks. "We are very interested in the fertility of these individuals, as well as the health status of their offspring," he says. "While the limited data currently available suggests that offspring do not appear to have higher rates of cancer, no one knows at this point about the long-term consequences for them.

"We are also interested in looking at the genetics of childhood cancer to learn whether members of survivors' families have developed cancer. We know that there are genetic components to various childhood cancers, but hope to learn whether or not those factors might influence the risk of developing a second malignancy." The study will pose questions about the estimated 12,000 offspring, as well as a group of 10,000 siblings, of these childhood cancer survivors.

Results through collaboration

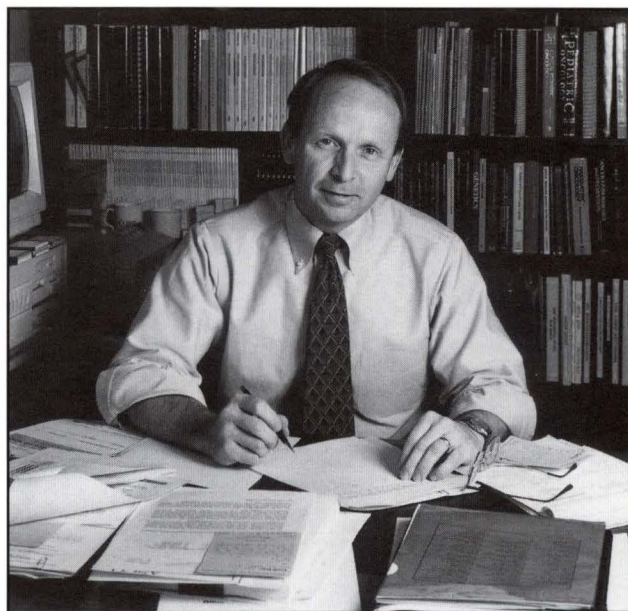
Researchers, both clinicians and epidemiologists, must overcome some big hurdles when studying childhood cancer. For one thing, cancer in children is rare. "For that reason, a single center generally doesn't see enough cases of a certain type of cancer to run its own treatment studies," says Robison. "You need relatively large sample sizes." In order to get them, treatment centers must collaborate with others.

The University is a member of the Children's Cancer Group (CCG), a cooperative clinical trial group of 32 treatment centers which treats roughly half of the children in the United States who are diagnosed with cancer. Each center has affiliates. Some of the University's affiliates include Children's Health Care-Minneapolis, Children's Health Care-St. Paul, the Manitoba Cancer Foundation, the Dakota Clinic, and the Gunderson Clinic.

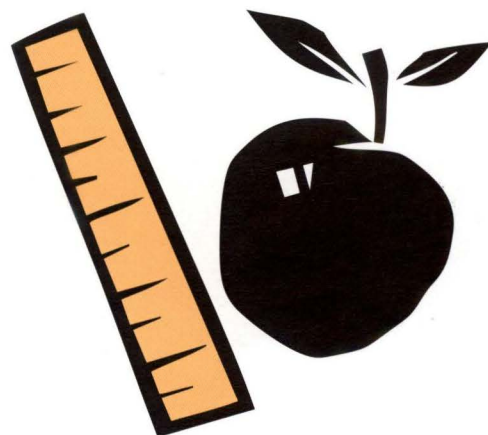
How does a cooperative clinical trial group help an individual child's treatment?

"In a very short period of time the researchers in CCG can treat enough children on the same treatment regimen or protocol, compare treatments, get an answer more quickly, and move on to better treatments," says Robison.

Another group, the Pediatric Oncology Group (POG), accounts for the other half of



Dr. Les Robison



children in this country who are diagnosed with cancer. Incidentally, this group's centers and affiliates are located in the southern United States.; the CCG group is situated mostly in northern states. They also compete with each other for NIH grants.

Childhood leukemia and the environment

Robison and others in CCG saw an opportunity in the organization of the CCG and the POG. "We realized that one of the reasons most people had not been doing research in

the etiology of childhood cancer is that no one saw enough cases to conduct sufficiently large studies," he says. "So we used the cooperative group as a mechanism to identify large numbers of newly diagnosed patients." As a result, Robison — who chairs the CCG Epidemiology Committee — and collaborators within the CCG now have upwards of 14 grants funded by the National Cancer Institute (NCI), with a large number of the studies being conducted at the University of Minnesota.

One of these grants supports a large study of childhood lymphocytic leukemia, one of the most common cancers in children, says Robison. "Before that study, we had conducted smaller studies of less common cancers. In this study for acute lymphocytic leukemia, we proposed to look at 2,000 newly diagnosed children with the disease, and characterized them clinically as well as biologically. Then we looked at environmental and genetic risk factors within the group."

In addition, Robison and his colleague Michael Steinbuch, Ph.D., assistant professor, pediatric epidemiology and clinical research, set up a study to look at acute myeloid leukemia, which is quite rare in children. "There are only about 350 children diagnosed in the country each year with this kind of leukemia," says Robison. "Acute myeloid leukemia is much more common in adults, whereas lymphocytic leukemia is more common in children."

This study, as well as the study on lymphocytic leukemia, was designed to follow up on previous research by Robison which showed some very strong associations with environmental factors such as pesticides, solvents, and drug exposures during pregnancy.

Not too long ago, a number of stories began appearing in national magazines such as the *New Yorker* and *Time* claiming a connection between electromagnetic fields and cancer. Congress, says Robison, "put a great deal of pressure on the NCI to conduct a large, detailed study of electromagnetic fields and childhood leukemia. Since we had just been funded to do this large study in the United States, NCI approached us and we entered into a collaboration with them." At NCI's request, Robison agreed to include in the leukemia study an examination of electromagnetic fields, radon, and gamma radiation.

Since the study would involve some intense examination of the home environment, Robison and colleagues reasoned that, if funding could be obtained, why not include a component to look at pesticide residues in the home as well? A grant was submitted and received NCI support to do just that. Collecting pesticide residues proved to be an exacting task.

"Basically, we set up a protocol to collect household dust samples, and within the dust, pesticide residues which adhere to dust particles. The dust had to be collected in a rather precise way to be sure that the residues didn't disassociate from it," says Robison. Other

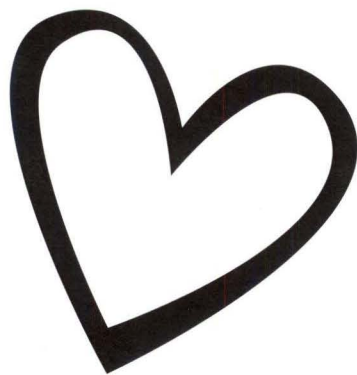
Making the Dream Come True

Everyone involved with the Children's Cancer Research Fund (CCRF) shares a dream — a dream of a world where there are no children with cancer. CCRF is families, volunteers, and physicians, all working toward the prevention and cure of childhood cancer.

CCRF has provided financial support for studies in the Pediatric Oncology Division of the University of Minnesota Medical School for more than 35 years. Originally, CCRF concentrated its efforts on leukemia research, but now supports training and research studies on all types of childhood cancer.

CCRF is working to improve the life expectancy of children with cancer and to assist patients and their families in the process of recovery. The fund is operated entirely from personal and corporate contributions and special events, and is managed by the Minnesota Medical Foundation.

As part of the University of Minnesota Cancer Center campaign, CCRF pledged to raise \$3 million to endow two chairs in pediatric oncology. The first of these chairs has been funded, and Dr. Les Robison has been named as holder of the chair. His major research efforts are directed toward the cause of cancer in children and the study of childhood cancer survivors. ■



samples collected included heavy metals and polycyclicaromatic hydrocarbons — byproducts from combustion.

Though there is great pressure from Congress and its constituents to complete the study, Robison estimates that results won't be ready until later this year. However, he says, "This study is going to answer many questions that have been posed relating to the etiology of childhood lymphocytic leukemia."

State of the art — not just hardware

Mention the phrase "state of the art" and most people will think of laser beams, ultra-fast computer chips, and multi-million dollar diagnostic machines. But in epidemiology this means gathering coherent and analyzable information from large groups of people. In those terms, Robison agrees that epidemiology research in Minnesota is "state of the art."

"From the standpoint of methodology, we have one of the best departments of epidemiology in the country," he says. "First of all, the faculty is extremely large and very diverse, consisting of people with a spectrum of research interests. The faculty in the Division of Epidemiology and the Department of Pediatrics is just an incredible resource. And their expertise covers the full range from data collection to statistical analysis of that data.

"For example, Dr. Cheryl Perry is a professor in the School of Public Health, and is the epidemiologist in charge of the group that deals with behavioral epidemiology. In the childhood cancer survivor study, there will be about 6,000 to 7,000 who will be between the ages of 12 and 18. We want to collect information from those teenagers.

"To collect information from teenagers you have to determine the best way to approach them. How do you get them to participate? What kinds of questions will you be able to ask them; which ones aren't you going to be able to ask them to get them to answer truthfully? How will you make sure that the questionnaire you use is structured so that they understand it, to make sure that they complete it? Are they going to look at it and say, 'This looks too long, it's too hard.' How do you phrase questions for teenagers? You need to know exactly the best way to approach a teenager to actually get the desired information and know what you're getting. They are an entirely different group of children.

"Dr. Perry is a world expert on adolescents and health behaviors. She does research on how to prevent teenagers from starting to smoke, or to get them to stop smoking, how to exercise, how to have a healthy diet. That is her whole area of research. She goes into schools and develops programs to get children to change their behaviors to a more healthy approach. Dr. Perry has been invaluable in helping us put together the teenage component of the study."

While the cancer research collaborations in pediatric cancer have been fruitful, Robison feels the program has grown so that the time is right to offer epidemiological expertise to other clinicians in the Department of Pediatrics. "There is a lot of clinical research going on that could potentially benefit from a collaboration with epidemiology," says Robison. "And now is a good time to bridge to other clinicians and foster new collaborations."

He sees a number of research opportunities in childhood lead exposure, obesity, environmental health effects, genetics, and childhood disease. "Cancer research will still be a major part of our work, but in the Division of Pediatric Epidemiology and Clinical Research we plan to broaden and expand outside of that interest," he says.

And, let's hope the day will come soon when the question everyone asks is, "What was cancer?" ■

Jane Gfrerer is associate editor for the Department of Pediatrics.



"This study is going to answer many questions that have been posed relating to the etiology of childhood lymphocytic leukemia."



Facing *A* Bright Future: MMF's Fifty-Sixth Annual Meeting

Provost William Brody looks at the future of academic health centers.
by Jean Murray

"Academic health centers are facing extraordinary challenges. During these times, however, we have extraordinary opportunity. Everyone in the U.S. is looking to the University of Minnesota for the road to success. I think we will lead the nation in developing the Minnesota model for the academic health center of the future."

Dr. William Brody, new provost for the University of Minnesota Academic Health Center, was the featured speaker at the Minnesota Medical Foundation's 56th Annual Meeting, held October 25.

Brody shared his perspective on the important issues facing all academic health centers around the country, including the University of Minnesota, and discussed the elements of change that are necessary to allow the centers to survive and prosper.

"We are in the discovery and technology transfer business," said Brody.

Every year we graduate hundreds of students whom we have educated in the process of scientific inquiry and clinical practice, and these graduates... transfer the knowledge they have learned into actual practice.

“Our mission brings together research, education, and patient care in a way that is not replicated outside the academic health center. We engage in scientific inquiry in order to discover new knowledge. We educate students by placing them in this environment of scientific inquiry. In other words, our education takes place around discovery. We need patients and laboratories to conduct the research, and this works best through centers of excellence which provide close coupling of patient care with basic science.

“Every year we graduate hundreds of students whom we have educated in the process of scientific inquiry and clinical practice, and these graduates move to locations around town, around the state, and around the world to transfer the knowledge they have learned into actual practice.

“There are six things that we must do to help assure our success:

■ First, the current system in which research and education are subsidized heavily by clinical practice revenues cannot be sustained. We therefore must either reduce these activities, find more efficient ways of delivering them, and/or find sources of revenue that will specifically support the educational and research missions of academic health centers.

■ Second, we need to develop a new model for education of health professionals. As more and more health care is delivered outside the setting of the hospital, we need to find efficient and effective ways to educate and conduct research in this new setting. We need a new paradigm to replace the Flexner report for science-based education of health professionals. This will require a partnership with the community to a much greater extent than ever before.

■ Third, despite the fact that hospitals will assume a shrinking role in the care of patients, the hospital still remains critical to our educational and research mission and we need to find a way to assure sufficient patient flow to be successful. This is becoming increasingly difficult because patients are becoming locked into specific managed care systems that do not allow referrals outside the system.

■ Fourth, we need to change the mix of health professionals that we train. We will probably train fewer specialist physicians and increase our emphasis on primary care. Although Minnesota leads the nation in the number of graduates that enter primary care, we probably will give more emphasis to this in the future.

■ Fifth, we need to recognize that our mission as a land-grant university requires that we support health practitioners and the medical products and services industry throughout the state and to improve the quality and reduce the costs of health care.

■ Sixth, we must focus our efforts to assure the excellence of each of the programs we develop. There are many aspects of health care delivery that are probably done much better outside the university setting. However, we have historically been known for having the best and the brightest — for both patient care as well as for research — and in this era of shrinking resources, we must focus on excellence as never before.

“All of the above are necessary things for us to do. However, they are unfortunately not sufficient, as we are not completely in control of our own destiny.

“There remains the fundamental question: How do we fit in to a health care delivery system that is highly market driven? This is a fundamental dilemma. ISNs



David and Beth Patten receive a Presidents Club certificate from Dr. William Brody.

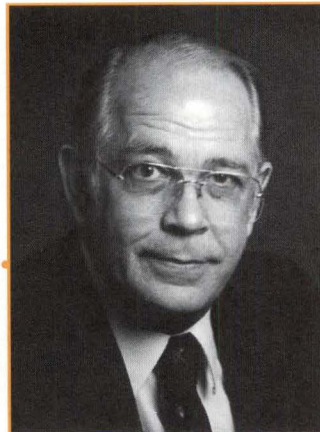
(integrated service networks) are strictly competitive entities that behave like commercial, for-profit businesses. I believe, in the final analysis, that the University of Minnesota Academic Health Center should and must remain a public resource, open to all citizens of the state of Minnesota, and supportive to the region and the nation as well. Merging into a corporate ISN conflicts severely with our mission.

“In addition, there are indirect effects from having a successful academic health center located in Minnesota as evidenced by the large number of high-tech medical companies that have their roots in technology or faculty at the

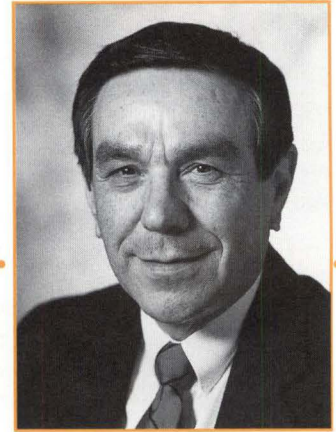
Facing a Bright Future



Sally A. Anderson



John H. Brown, M.D.



Herbert B. Dorr

University. A successful company that originates from the AHC will generate more revenue in one year than the state put into the Twin Cities Medical School for the past 20 years!

“Health reform is a critically important issue and no one, including those of us at the University, wants to see it fail. At the same time, we must be cautious that in our zeal to reduce the costs of health care we take very short-sighted approaches that could conceivably destroy one of the true treasures of our health system: the academic health center. While everyone would like to pay bargain

“Some within the competitive world of ISNs would have us forgo our mission of discovery and education of fertile minds for the future in order to provide the immediate kinds of health workers that they need today. If we get trapped into that kind of short-term thinking, there are two downsides: we will fail to train health care professionals with the background to adapt to future discoveries. Consider this: within 10 years of finishing medical school, less than about 50 percent of the practical training of a physician is applicable — and the pace of discovery is going to keep accelerating. In addition, we would have to sacrifice our research agenda to function the way the ISNs would prefer us to function.

“When people say the U.S. has the best health care system in the world, what they really mean is that we have the best academic health centers in the world.”



Sajad Mir receives his Distinguished Teaching Award from Dr. Robert Howe and David Teslow, MMF president.

basement prices for health care, no one of us is willing to go back 30 years and give up open heart surgery, kidney transplantation, and cardiac pacemakers, just to give three examples of medical advances that have been developed by the University of Minnesota.

Recognition and awards

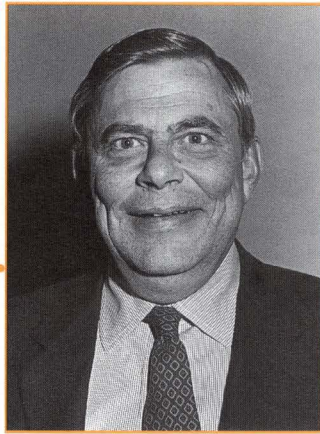
The Annual Dinner Meeting program also included annual highlights by MMF chair Bobby I. Griffin, academic awards presentations, donor and volunteer recognition, and introduction of new MMF board members and special guests.

Distinguished Teaching Awards were announced for Drs. Arlen Severson, George Trachte, and Paul Severson of the UMD School of Medicine, and for Drs. Tanya Repka, Stephen Katz, John Reinartz, and Sajad Mir of the Twin Cities Medical School. Dr. Regan Fulton was recognized as recipient of the J. Jacob Kaplan Research Award.

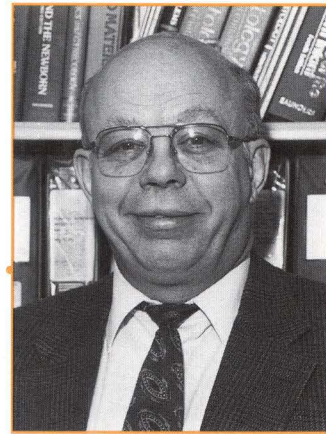
Five individuals were confirmed as new members of the MMF board of trustees. The board is made up of faculty of the University of Minnesota Medical Schools, leaders in the medical community, and representatives of



Paula M. Kelly, M.D.



David S. Patten



Theodore R. Thompson, M.D.

the corporate community. The board is charged with the overall guidance of MMF in accomplishing its mission of supporting research and education at the University of Minnesota Medical Schools in the Twin Cities and Duluth.

New board members include: **Sally A. Anderson, C.F.A.**, Minneapolis, senior vice president of Kopp Investment Advisors of Edina.

Herbert B. Dorr, Minneapolis, self-employed as president of a management consulting and venture capital firm.

Paula M. Kelly, M.D., Mendota Heights, University of Minnesota Medical School Class of '75, pediatrician, St. Paul.

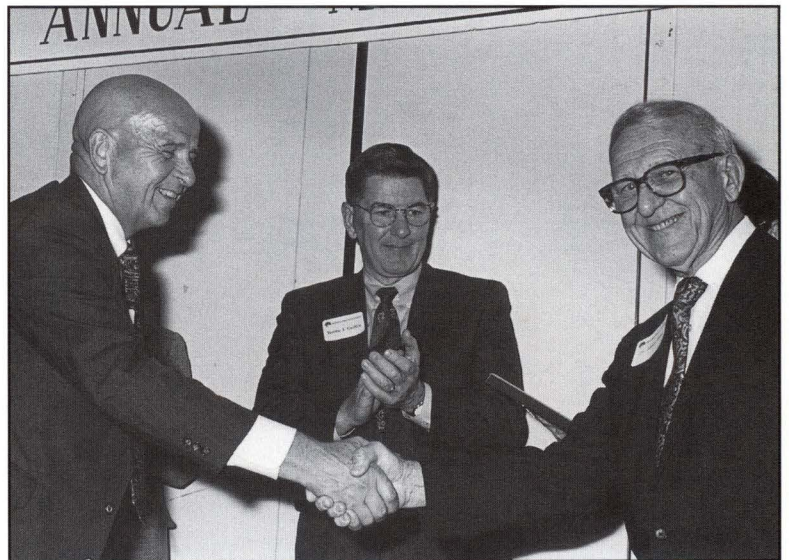
David S. Patten, Edina, managing director and regional vice president, Merrill Lynch & Co. of Minneapolis.

Theodore R. Thompson, M.D., New Brighton, professor of pediatrics, University of Minnesota Medical School.

Joining the MMF board during the year was **John H. Brown, M.D.**, Edina, physician specializing in medical oncology at Oncologic Consultants P.A. in Minneapolis.

A number of MMF board members have concluded their terms in office, and were recognized at the Annual Meeting for their generous commitment of time and resources. Board members who retired during the past year include John B. Coleman, M.D., Beth H. Erickson, Phyllis B. France, Ronald J. DeSellier, Lowell C. Anderson, and Dennis M. Mathisen.

Newly elected MMF officers were recognized. Officers are Paul T. Birkeland, chair; Barbara Forster, vice chair; Judith Shank, M.D., secretary; and Peter A. Heegaard, treasurer. ■



Above, supporters of MMF are recognized at the Annual Meeting. Below, Dr. Henry Bauer, right, with David Teslow and MMF chair Bobby Griffin.

New lectureship established

Dr. Reuben Berman, medical director of the Berman Center for Clinical Research in Minneapolis, has announced the inauguration of a new lectureship funded by a grant to the Berman Center from Alfred and Lotte Bongartz, a German Jewish couple who escaped from Germany in the early 1940s. The couple, now deceased, had no children and lost all close relatives in the Holocaust.

The first lecture, to be held April 3, 1995, will be titled "Light from the Yellow Star: Reflections on the Holocaust" and will be given by pediatrics professor **Dr. Robert Fisch**. Fisch, born and raised in Hungary, was also a victim of Nazi persecution of Jews and other minorities. After the war he completed medical studies at the University of Budapest. In 1957, he came to the United States and in 1958 began a residency in pediatrics at the University of Minnesota, where he has been ever since.

Fisch is known throughout the world for his work with the children's disease phenylketonuria (PKU). He is also an artist and will illustrate his lecture with paintings relating to the Holocaust. Last year the Frederick R. Weisman Art Museum at the University of Minnesota held an exhibit of Fisch's works, and published a book called *Light from the Yellow Star, A Lesson of Love from the Holocaust*. Proceeds from the book are used to develop a study program about the Holocaust for school children.

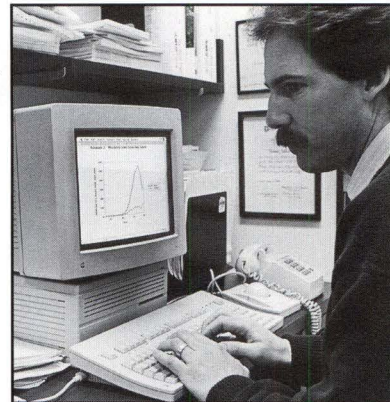
The lectureship, titled "The Alfred and Lotte Bongartz Memorial Lectureship," is part of a symposium organized by Dr. Leonard Wilson and the History of Medicine Department at the University of Minnesota Medical School. The lectureship is available to any medical group in Minnesota, and suggestions are invited for future talks. The public is invited to all lectures. For more information, call the Minnesota Medical Foundation at 612-625-1440 or 1-800-922-1MME. ■

Link found between cancers

There may be a link between breast cancer and prostate cancer, say University researchers. A study published in the December 21 issue of the *Journal of the National Cancer Institute* shows that women with a father or brother with prostate cancer were more likely to develop breast cancer than women with no family history of prostate cancer. Women with both breast cancer and prostate cancer in their family histories are at the greatest risk of developing breast cancer. Even with no breast cancer in their families, those women whose brothers or fathers had

prostate cancer have a 19 percent greater chance of developing breast cancer. These results are from a study of more than 30,000 Iowa women between the ages of 55 and 69 who provided information about their family cancer histories.

Dr. Thomas Sellers, associate director of epidemiology at the School of Public Health and the study's author, noted that it is possible that the clustering of the cancers could be due to environmental influences. If a woman has a family history of breast or prostate cancer, he suggests she examine ways to lower the risk such as changing diet, losing weight, or getting regular mammograms. ■



Dr. Thomas Sellers

Lincoln's ataxia carried on chromosome

The gene for Lincoln's disease (spinocerebellar ataxia type 5) has been found to be carried on a specific chromosome, according to **Dr. Laura Ranum**, assistant professor of neurology and principal investigator of a recent study.



Dr. Laura Ranum

For the study, published in the November *Nature Genetics*, more than 170 living descendants of President Abraham Lincoln's aunt and uncle were examined. Of those examined, 56 had symptoms of the disease (stumbling, uncoordinated gait, and slurred speech) and a mutation on a portion of the 11th chromosome.

Once the specific gene is located, investigators will strive to develop a reliable blood screening test to help with early diagnosis. Also participating in the study were **Dr. Lawrence Schut** and University researchers **Drs. Harry Orr** (holder of the MMF Stone Professorship in Heart Disease), **Dennis Livingston**, and **Julie Lundgren**. ■

University of Minnesota

Medical Bulletin

Readers' Survey

Please help us serve you better
through the Medical Bulletin!

cine and pathology, has received the 1994 John Elliot Memorial Award from the American Association of Blood Banks, which recognizes his outstanding accomplishments as editor of *Transfusion*.

Medicinal Chemistry

Dr. Yusuf Abul-Hajj, professor of medicinal chemistry, has been named a senior editor of the *Journal of Medicinal Chemistry*.

Medicine

Dr. Thomas H. Hostetter, professor of medicine, Division of Nephrology, was elected councillor by the American Society of Nephrology at the annual meeting in October.

Dr. Mark E. Rosenberg, associate professor of medicine, Division of Nephrology, received an Established Investigatorship award from the American Heart Association.

Dr. Gregory M. Vercellotti, professor of medicine, Division of Hematology, has been chosen to serve as a member of the Hematology Study Section, Division of Research Grants, National Institutes of Health. He has also accepted an invitation to serve a four-year term on the hematology study section, division of research grants, of the National Institutes of Health.

Dr. Paul Pentel, associate professor of medicine, along with **Dr. Dorothy Hatsukami**, associate professor of psychiatry, has been awarded a multimillion dollar grant from the National Institute on Drug Abuse to fund a center for developing medications for drug abuse. Other investigators are **Dr. Sheila Specker**, assistant professor of psychiatry, and **Ross Crosby**, research associate.

Dr. Joseph Bloomer, professor of medicine and director of the division of gastroenterology, hepatology, and nutrition, has been elected to serve on the Council of the American Association for Liver Diseases and to become president of the organization in 1999.

Dr. Neal Gault, professor of medicine, has been named a Veterans Planning Medical Advisory Consultant for the American Legion.

Neurology

As part of the Alzheimer Research Program, the Alzheimer Clinic is conducting two clinical trials in Alzheimer patients — one for patients with agitation and one using prednisone as a treatment for the putative autoimmune processes in Alzheimer's disease.

Dr. Kenneth F. Swaiman, professor and director of pediatric neurology, is interim head of the Neurology Department.

Neurosurgery

NIH has funded a large multi-institutional study of percutaneous lumbar discectomy vs. conventional open discectomy to be based at the University of Minnesota. **Dr. Stephen J. Haines**, professor of neurosurgery, is the principal investigator.

Dr. Robert E. Maxwell, professor of neurosurgery, gave the Wilder Penfield Memorial Lecture in Japan. This is an honor conferred to a specialist in epilepsy once every four years.

Dr. Stephen J. Haines, professor of neurosurgery,

Departmental Updates, continued

became president-elect of the Congress of Neurological Surgeons.

Dr. Roberto C. Heros, professor and head of neurosurgery and holder of the Lyle A. French Chair in Neurosurgery, was elected as a director of the American Association of Neurological Surgeons.

Obstetrics & Gynecology

Dr. June LaValleur has been appointed to several committees: the National Planning Committee for Continuing Education in Maternal Nutrition; the University's Committee on Equal Employment Opportunities for Women; and the Consensus Panel for "The Redefinition of Oral Contraception" program.

The department's Reproductive Health Laboratory is proud to announce that it has received full accreditation from the College of American Pathologists for its Andrology and Embryology Laboratory. **Dr. Hugh Hensleigh** serves as director of this laboratory.

Gynecologic Oncology Fellow **Dr. Dwight Chen** was awarded a \$10,000 clinical oncology fellowship grant from the American Cancer Society.

Dr. Takashi Okagaki was elected as a board member of the Fulbright Association for International Education.

Ophthalmology

Dr. Jonathan Wirtschafter, professor of ophthalmology, is a 1994 Senior Honor Award recipient of the American Academy of Ophthalmology. Senior honor awards recognize individuals who have made a significant contribution to ophthalmology through presentations at the academy's annual meeting.

Dr. Terri L. Young, assistant professor of pediatric ophthalmology, strabismus, and adult motility disorders, joined the department in November.

Dr. Rene Pelletier was named president of the Minnesota Academy of Ophthalmology. **Dr. Paul Wicklund** will be the president-elect and **Dr. Edward Holland** will serve as treasurer.

Orthopaedic Surgery

Dr. Stephen P. England, assistant professor of orthopaedic surgery, has been named a 1995-96 Health Services Research Institute Fellow by the Association of American Medical Colleges.

Pediatrics

Dr. Robert Blum, professor and head, general pediatrics and adolescent health, has been elected to the Society for Adolescent Medicine and the American Pediatric Society. He has been elected to serve on the Advisory Board for the Public Broadcasting System Series on Adolescence. He has also been chosen to serve on the

National Commission on Adolescent Sexuality for the Sex Information and Education Council of the U.S. (SIECUS) in Washington, D.C.

Dr. Edward L. Kaplan became a full member of the Minnesota Academy of Medicine. He also received a special honorary diploma from the Novosibirsk School of Medicine. Kaplan was appointed chair of the Special World Health Organization (WHO) Committee on Primary Prevention of Rheumatic Fever, and chair of the World Health Organization Consultation of Directors of WHO Collaborating Centres on Streptococci. In addition, he is serving on the WHO Scientific Working Group on Monitoring and Management of Bacterial Resistance to Antimicrobial Agents. He has also been named a member of the University of Minnesota Senate Faculty Judiciary Committee.

Dr. S. Michael Mauer, professor and co-director, Division of Pediatric Nephrology, was elected to the American Pediatric Society.

Dr. Alfred Michael, Regents' Professor of Pediatrics and Laboratory Medicine/Pathology, has been elected a Fellow of the American Association for the Advancement of Science.

Dr. James Moller, professor and holder of the Paul F. and Faith S. Dwan Chair in Pediatric Cardiology, has been elected a Fellow of the European Society of Cardiology, an organization of 650 cardiologists and cardiac surgeons from more than 50 countries. Moller was also made president-elect of the InterAmerican Heart Foundation and has been appointed to the United States Medical Licensing Examination (USMLE) Step 2 Test Material Development Committee for Pediatrics.

Dr. Martin Tristani-Firouzi, fellow, Division of Pediatric Cardiology, won the Outstanding Presentation by a Fellow or Resident award at the Northwestern Pediatric Society meeting for his paper, "Kawasaki Syndrome: T-cell Expansion and Humoral Immune Suppression in the Acute Stage."

Dr. Paul G. Quie was invited to give the plenary session of the Western Society for Pediatric Research in Carmel, California, in February.

Dr. Gary Remafedi, assistant professor, general pediatrics and adolescent health, was elected a member of the board for the Great Lakes Chapter of the Society for Adolescent Medicine. He was also asked to serve on the grants review panel for the Adolescent HIV/AIDS Research Initiative, for NIAID and Maternal and Child Health Bureau. He was also invited to give the Twigg Memorial Lectureship at Rochester General Hospital, Rochester, New York.

Dr. Sarah Jane Schwarzenberg's paper, "Colonic Stricture in Cystic Fibrosis" was selected by the executive committee of the Northwestern Pediatric Society as the best paper given by a pediatrician in an academic practice.

Psychiatry

Dr. Dorothy Hatsukami, associate professor of psychiatry, along with **Dr. Paul Pentel**, associate professor of medicine, has been awarded a multimillion dollar grant from the National Institute on Drug Abuse to fund a center for developing medications for drug abuse. Other investigators are **Sheila Specker**, assistant professor of psychiatry, and **Ross Crosby**, research associate.

Radiology

Dr. William M. Thompson, holder of the Vilhelmina and Eugene Gedgaudas Chair in Radiology, presided as program chair at the Radiological Society of North America meeting, which was held in Chicago in November and attended by over 60,000 people. His committee is responsible for selecting 1,500 scientific presentations from over 4,000 abstracts.

Dr. Gordon Teel and his colleagues won a Magna Cum Laude award for their exhibit on imaging strategies for small-airways disease.

Dr. Harry Griffiths gave his refresher course on Thoracolumbar Spine Trauma. Other members of the department presented scientific papers including **Dr. Haraldur Bjarnason** on "Closure of Biliary Fistulas with the use of Metal Coils," **Dr. Mary Foshager** on "Low Velocity Shunt Flow: A Sign of Transjugular Intrahepatic Portosystemic Shunt Stenosis," and **Dr. Lenore Everson** on "Radiographic Evaluation of Double-Lumen Breast Implant Rupture."

The department had eight scientific exhibits including **Dr. Gwen Nazarian** on "Many uses of the Amplatz Snare" and "Color Doppler Sonography of Upper Extremity and Thoracic Inlet Veins;" **Dr. Lenore Everson** on "MR Artifacts on Images of Silicone Breast Implants;" and **Dr. Mary Foshager** on "Color Duplex US Evaluation of Lower-Extremity Bypass Grafts."

Dr. Harry Griffiths helped organize an international sports medicine meeting at the London Royal Society of Medicine to be held in April.

Dr. Becky Murray Carpenter has been awarded the Faculty Teacher of the Year award from the University of Minnesota Pediatric Residency Program.

Dr. E. Russell Ritenour was visiting professor at the University of Virginia in September as well as guest speaker at the Mid-Atlantic Chapter Meeting of the American Association of Physics and Medicine.

School of Public Health

Dr. John Krlewski, professor and director of the Institute for Health Services Research at the School of Public Health, is a member of Medical Alley's Cost Effectiveness Task Force. In October he was the keynote speaker for the 25th anniversary celebration of the

University of Alabama School of Allied Health.

Dr. Will Manning, professor in the Institute for Health Services Research at the School of Public Health, has been named by the Minnesota Departments of Health and Commerce to the Risk Adjustment Advisory Panel.

Surgery

Dr. Frank B. Cerra was appointed interim chair of the department in late September. **Dr. Edward W. Humphrey**, interim chair from mid-February 1993 to mid-September, was honored at a farewell party September 30.

Dr. John S. Najarian, Regents' Professor of Surgery and holder of the Jay Phillips Chair in Surgery, presented the annual Huddinge Hospital Transplant Lecture in Stockholm, Sweden, December 1. He also was presented with a diploma and the Jubille Medal of the Swedish Society of Medicine.

Dr. Stanley M. Goldberg, clinical professor of surgery, has been named a member of the Royal College of Surgeons of England.

Dr. Douglas R.E. Johnson was honored for giving one of the three best resident or fellow presentations at the 1994 Society of American Gastrointestinal Endoscopic Surgeons scientific meeting. **Dr. Lyle A. French**, professor of neurosurgery emeritus, has been named the 18th Surgical Alumnus of the Year.

The Department of Surgery is sponsoring the Medical Update 1995 in Fort Lauderdale, Florida, March 6-10.

Dr. Craig S. Walvatne was appointed assistant professor in August.

Therapeutic Radiology

Dr. Chang Won Song has been appointed to the National Cancer Institute's Cancer Centers and Research Programs Review Committee for four years.

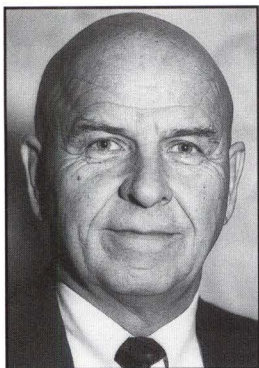
Dr. Seymour Levitt, professor and head of therapeutic radiology/radiation oncology, has been nominated director at large of the National Board of Directors of the American Cancer Society. He also has been reappointed vice chair of the society's research and clinical investigation committee.

UMD School of Medicine

Dr. Ronald Franks, dean of the UMD School of Medicine, was invited by the National Institute of Medicine to participate in a planning meeting on education, recruitment, and retention of health professionals for rural areas. The meeting was held on December 12. ■

MMF president and CEO resigns

David Teslow, president and chief executive officer of the Minnesota Medical Foundation (MMF) at the University of Minnesota, is resigning to assume the foundation's newly created job of vice chair of strategic fund raising and community relations. Teslow will remain in his current position until his successor is named.



David Teslow

"The Minnesota Medical Foundation has grown impressively under David Teslow's leadership," said Paul Birkeland, chair of MMF's board of trustees. "We're delighted that he will remain in place during the search, and we are enthusiastic about the continuing contributions he will make in his new position."

Teslow was MMF's development director from 1973 until 1979 when he became executive director of the Methodist Hospital Foundation. He returned to MMF in 1985 to succeed the late Eivind Hoff as president and chief executive officer.

"I think 10 years is the right amount of time," Teslow said. "I took a hard look at what we had hoped to accomplish and we've met or exceeded all the targets. The foundation has superb financial strength, and this is the appropriate time for new leadership. I'm enthusiastic about the search for my successor, and I look forward to my new responsibilities, which will allow me to focus on two of my favorite activities: personal donor contact and community activities that enhance the awareness and image of the foundation."

Annual gifts to MMF rose from \$4.7 million in fiscal 1985 — the year immediately preceding Teslow's presidency — to \$18 million in fiscal 1994. During the same period, foundation assets rose from \$18 million to more than \$100 million and endowments grew from \$11 million to \$78 million. ■

MMF approves \$282,690 in grants

At its fall quarterly meeting, the Minnesota Medical Foundation board of trustees approved \$282,690 in research and special grants. The amount includes \$104,300 in faculty research grants, \$70,390 in faculty equipment grants, and \$108,000 in student research grants.

FACULTY RESEARCH GRANTS include: **Michael L. Anderson, M.D.**, Lab Medicine and Pathology, \$10,000, The isolated, arterially perfused bull-

frog eye; **Linda M. Boland, Ph.D.**, Physiology, \$10,000, Modulation of potassium channels; **Colin Campbell, Ph.D.**, Pharmacology, \$6,000, Transcription-stimulated homologous recombination in vitro; **Kristine Ensrud, M.D., Ph.D.**, Medicine, \$3,000, The association of steroid use; **Alfred J. Fish, M.D.**, Pediatrics, \$8,000, Epithelial cell integrin receptors; **Walter A. Hall, M.D.**, Neurosurgery, \$4,500, The genetic basis of intracranial arteriovenous malformations and aneurysms; **Christopher N. Honda, Ph.D.**, Cell Biology/Neuroanatomy, \$4,500, Opioid receptors and the spinothalamic system; **Brett K. Levay-Young, Ph.D.**, Surgery, \$5,000, Regulation of wnt-2 transcription in rat fetal lung; **Mark S. Paller, M.D.**, Medicine, \$6,000, Sick cell disease as an example of reperfusion injury; **Sundaran Ramakrishnan, Ph.D.**, Pharmacology, \$5,000, Targeting toxin polypeptides to tumor vasculature; **Daniel P. Romero, Ph.D.**, Pharmacology, \$7,000, Characterization of Telomerase from Paramecium tetraurelia; **Michael J. Schendel, Ph.D.**, Orthopaedic Surgery, \$5,000, Serum markers as indicators of fusion maturity and strength; **Sarah Jane Schwarzenberg, M.D.**, Pediatrics, \$5,300, Regulation of two growth hormone responsive rat serpins; **Harvey L. Sharp, M.D.**, Pediatrics, \$6,000, Bile duct cell function in allogeneic liver immune reactions; **Pamela Jo Shultz, M.D.**, Medicine, \$7,000, Modulation of nitric oxide by hypoxia; **Donald A. Simone, Ph.D.**, Psychiatry, \$6,000, Effects of cold stimuli on rat nervous system; and **Li-Na Wei, Ph.D.**, Pharmacology, \$6,000, Studies of a novel embryonic gene encoding an orphan receptor.

FACULTY EQUIPMENT GRANTS include: **Janet Dubinsky, Ph.D.**, Physiology, \$15,000, Mitochondrial permeability transition pore involvement in glutamate toxicity; **Bruce Lester, Ph.D.**, Lab Medicine and Pathology, \$12,000, Request for matching funds for the purchase of a fluorescence plate reader; **Harry Orr, Ph.D.**, Lab Medicine and Pathology, \$27,000, Equipment to house transgenic mouse models of human diseases; **Jon Pryor, M.D.**, Urologic Surgery, \$8,890, Analysis of epididymal mRNA using differential display PCR; and **Linda Hansen, Ph.D.**, Lab Medicine and Pathology, \$7,500, Control of hepatocyte gene expression by fibronectin domains.

STUDENT GRANTS include: **Mark T. Eginton**, \$1,800, Identification of the biologically significant LPS receptor; **Vincent S. Fan**, \$1,800, Does pyruvate serve as an antioxidant in protecting cells from apoptotic death when cells are plated at low cell density?; **James R. Hebl**, \$1,800, The effects of milrinone on myocardial contractility and coronary flow in the sympathectomized isolated guinea pig heart; **Kathleen A. Kemmer**, \$1,800, Nitric oxide as an antioxidant; **Jacqueline A. Paul**, \$1,800, Leukocyte control of adrenal cell proliferation and differentiation; and **Jose H. Tori**, \$1,800, Molecular studies of mouse BCL-X, a BCL-2 oncogene family member. ■

MMF Grant Recipient: Christopher N. Honda, Ph.D.

A paper cut on your thumb — it hurts! But how did that pain message get to the brain? Christopher Honda, Ph.D., assistant professor of cell biology and neuroanatomy, is studying the individual brain cells that participate in signalling pain.

Honda received a \$4,500 grant from the Minnesota Medical Foundation to investigate the relationship between opioid systems and the shape, form, and functional properties of spinal cord neurons that form part of the pain system. Honda was one of 22 faculty researchers to receive a grant from MMF. In total, the MMF board approved \$282,690 in faculty and student grants this fall (see page 20).

"I'm interested in somatic sensory physiology, which is basically the study of the sense of touch — an important way in which our bodies interact with the environment," says Honda. "And that sensation includes pain."

To understand how pain messages are transmitted, he studies the neurons that transfer information through the central nervous system, including the spinal cord, to the brain. "I study these neurons both functionally and chemically," he explains. "I study the electrical responses of the neurons to certain stimuli. Many people at this university look at the chemical content of these neurons and others look at electrical properties of the cells — I want to look at both at the same time."

Specifically, Honda is investigating what happens in the spinal cord after the sensory neurons pass along their information. He uses electrophysiology techniques to place a small electrode in the spinal cord and test an individual spinothalamic tract neuron to examine its response to stimulus. Next, he injects a dye into the cell so that it can later be located and examined. "We can visualize the location and the structure of the cell with the dye. Then with immunohistochemistry, we can detect where the opioid receptors are and what type of opioid receptors they are," he says.

Opioids are a class of compounds, including morphine. There are receptors on many neurons that are specifically tailored for opioids. "In order for morphine to work, there has to be some way for the brain to recognize it. That means that on certain neurons there must be receptors waiting for something that looks like morphine," says Honda. Some believe that the neurons have receptors waiting for opioids which block the transmitters a sensory neuron uses to communicate to the next cell,

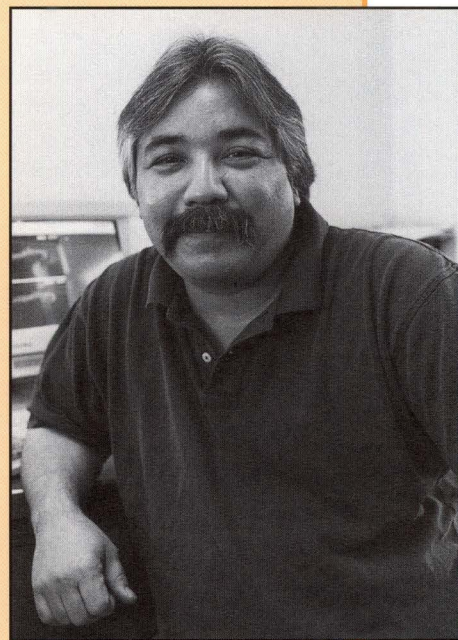
thus blocking the transmission of pain.

"Until recently, we didn't have a very accurate idea of where exactly these receptors are located," he explains. "Now, we have very specific antibodies to these receptors. By correlating the responses of the neurons with the location of the receptors, we hope to find out more about the circuitry in the spinal cord. It's important to figure out where the opioid receptors are located to help us understand the control of pain. In the long run, it might have implications for the treatment of chronic pain."

Honda previously received an MMF grant to help him establish a sophisticated electrophysiological laboratory. "MMF helped me out when I first came to the University. The computerized equipment purchased is used to reconstruct, in three dimensions, the shape of single neurons. "There are only a few systems like this on campus," he says, "We're very fortunate to have one." The current grant was used to adapt the lab for Honda's current

research and to provide funds for a laboratory assistant. "I'm impressed that MMF does so much to further the research of so many investigators in the Medical School," he says.

Honda received his B.S. in animal physiology and his M.S. in physiology from the University of California, Davis, and completed his Ph.D. in neurobiology at the University of North Carolina, Chapel Hill. He was a postdoctoral fellow at Chapel Hill, at the Marine Biomedical Institute, University of Texas Medical Branch, and at the Department of Anatomy and Neurobiology, College of Medicine, University of California, Irvine. In 1989 he came to the University of Minnesota as an assistant professor in the Department of Cell Biology and Neuroanatomy. ■



Christopher Honda, Ph.D.

Diabetes Institute for Immunology and Transplantation established

The Diabetes Institute for Immunology and Transplantation, an institute devoted to the prevention and cure of diabetes through the disciplines of immunology and transplantation, has been established at the University of Minnesota Medical School. "Transplantation for curing diabetes began at the University more than 20 years ago, but its full potential has yet to be realized," states **Dr. David E. R. Sutherland**, professor of surgery and the institute's director.

The Diabetes Institute will focus on the immune events that lead to diabetes, but are preventable, and on islet transplantation for a cure once diabetes is present. "We wish to bring our dream of curing or preventing this disease to fruition and create an institute that can function on the highest possible level, making it a real flagship program for the University," says Sutherland.

Fund raising has begun, and one of the first gifts toward what will most likely be a multi-million dollar effort was an anonymous donation of \$1 million. Gary Bartlett, director of development, reports that this generous contribution will allow the Diabetes Institute to immediately pursue some of its goals, including recruiting an endocrinologist focusing on immunology and transplantation. This position will complement the strong diabetology group that already exists at the University.

Recruitment of volunteers to assist in creating the Diabetes Institute has begun. "The efforts of these individuals will be crucial in helping to build a multi-disciplinary program which will, literally, touch the lives of thousands," says Bartlett. ■

New MMF Staff

Gary Bartlett has been named director of development for the newly established Diabetes Institute for Immunology and Transplantation. He was formerly a development officer for the Minnesota Medical Foundation, working with the School of Public Health, and development director for the College of St. Catherine. ■



Scholarship winners recognized

Through its scholarship and awards programs, the Minnesota Medical Foundation recognizes outstanding achievement and assists medical students faced with high debt levels. The following scholarships were presented this past fall by MMF:

Alpha Omega Alpha Scholarships

Carla Goerish
Amy Hergott
Robert Skeate
Established by the Minneapolis Chapter of Alpha Omega Alpha, an honorary medical society.

American Cancer Society Scholarships

Jennifer Fisher
Robert Sweet
Provided by annual grants from the American Cancer Society.

Dr. A.B. Baker Memorial Scholarship

Cynthia Wetmore
Established in memory of Dr. Baker, a leading educator in the field of neurology.

Ruth Boynton, M.D., Memorial Scholarships

Lori Bubash
Connie Wolf
Honor Dr. Ruth Boynton, former director of the University of Minnesota Health Service.

Dr. Richard A. and Mari Carlson Scholarship

Susan Potts Sloan
Established by Dr. Richard A. Carlson, an alumnus of the Medical School, Class of 1972, and his wife, Mari.

Dr. H. Mead and June S. Cavert Scholarship

Stuart Bloom
Established in recognition of Dr. Cavert's many years of service to the Medical School and the University.

Centennial Scholarships

Pam Chawla
Andrew Van Bergen
Jim Yurcek
Funds contributed by anonymous donors in support of medical students.

Class of 1942 Scholarship

Jodi Regan
Established by the Class of 1942 as a permanent commemoration of their 50th reunion.

Class of 1943, March, Scholarship

Suzanne Leaf
Established by the Class of 1943 (March) as a permanent commemoration of their 50th reunion.

Class of 1943, December, Scholarship

Kristine Kolewe
Established by the Class of 1943 (December) as a permanent commemoration of their 50th reunion.

Class of 1944 Scholarships

Kirk Granlund
 Marcie Jagoe
Established by the Class of 1944 as a permanent commemoration of their 50th reunion.

Dr. Robert W. Cranston Scholarship

Michelle LeClaire
Established to recognize Dr. Cranston's appreciation for the medical education he received at the University of Minnesota, from which he graduated in 1927.

H.E. "Tiny" & V.C. Drill Scholarships

Kathleen Adelgais
 Hamid Djalilian
 Bryan Nelson
 Michelle O'Brien
 Mitchell Palmer
 Sabrina Walski
Established by bequest of Dr. Drill, past president of the Minnesota Medical Foundation, 1958-60, and an alumnus of the Medical School, Class of 1929.

Eunice L. Dwan Scholarship

Mark Sprenkle
Established by a gift from the Eunice L. Dwan 1991 Irrevocable Trust.

Dan Gall Human Spirit Scholarship

Molly Flannagan
Established in memory of Dr. Gall, an alumnus of the Medical School, Class of 1989.



Ruth Boynton, M.D., Memorial Scholarships. From left, Dr. Dick Carlson, chair of MMF's Student Aid and Development committees, Lori Bubash, Connie Wolf, and David Teslow, MMF president.



Dr. Richard A. and Mary Carlson Scholarship. Dick Carlson and Susan Potts Sloan.



Dr. H. Mead and June S. Cavert Scholarship. From left, Dick Carlson, Stuart Bloom, and David Teslow.

Sarah J. Gault Scholarship

Elizabeth Anderson
Established by Dr. Neal Gault in memory of his wife, Sarah, Class of 1950.

Harry B. Hall, M.D. Scholarship

Jeffrey Lipke
Established by Dr. Harry B. Hall, an alumnus of the Medical School, Class of 1935, and his wife, Betty.

William H. Knobloch Scholarships

Kirk Aadalen
 Bradley Berry
 Thomas Frederickson
 Kimberly Haycraft
 Bobbie Schauer
 Susan Sickler
 Lora Truckenbrod
 Duane Westberg
Established by William H. Knobloch, M.D., and his wife, Donna K. Irlbeck.

James Lillehei, M.D. Scholarship

John Dvorak
Established by the Aspen Medical Group of St. Paul to honor the professional contributions of their colleague.

Medical Alley Scholarship

Kevin Engel
Recognizes an individual who has demonstrated interest and outstanding competence in the biomedical field.

Metropolitan-Mount Sinai Scholarship

Peter Melchert
Established by the medical staff of the former Metropolitan-Mount Sinai Hospital in recognition and remembrance of its contributions.

Dr. Harry W. and Delores M. Mixer Scholarship

Lorinda Soma
Established by Dr. Harry Mixer, an alumnus of the Medical School, Class of 1944, and his wife, Delores.

Lester & Lois Netz Scholarships

Rebecca Eder
 Carol Hagen
 David Macomber
 Paul McHale
 Clinton Muench
 Christine Olson
 Jessica Rongitsch
 Brandon Stroh
 Benjamin Tsoi
 Created through the generosity of Dr. Lester Netz, an alumnus of the Medical School, Class of 1926, and his wife, Lois.

Nicolette Norton Memorial Scholarship

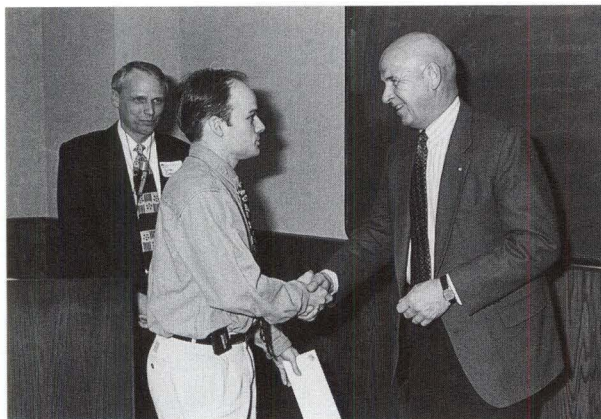
Kim Straub
 Established by Thomas Grossman and the Metropolitan Corporation in memory of Nicolette Norton.

Park Nicollet Medical Foundation's Nicollet Clinic Founders Scholarships

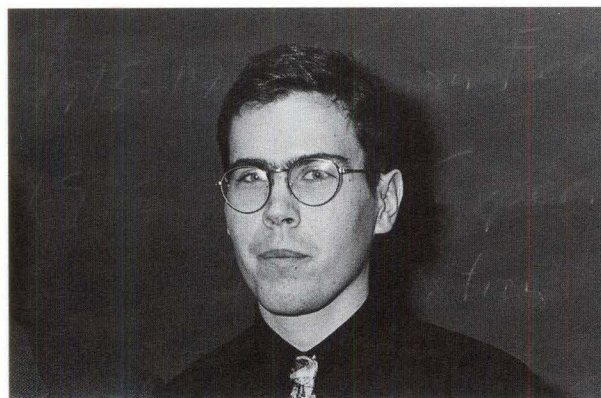
Christine DeLisle
 Christopher Leville
 Rita Schumann
 Cynthia Tai
 Established by the Park Nicollet Medical Center for second- and third-year medical students.

Phi Delta Epsilon Jewish Medical Fraternity Scholarship

Deborah White
 Made possible by a grant from the fraternity.



Eunice L. Dwan Scholarship. From left, Dick Carlson, Mark Sprenkle, and David Teslow.



Medical Alley Scholarship. Kevin Engel.



Linda Shriro Schenck, M.D., Women Medical Student Scholarships. From left, Dr. Carlos Schenck, Kelly Goeb, Margret Lenarz, Sue Nielson, and Lorinda Parks.

Dr. Albert E. Ritt Scholarships

Steve Feick
 Mark Labenski
 Ann Sudoh
 Kathryn Tweedy
 Made possible by the generosity of Dr. Ritt, an alumnus of the Medical School, Class of 1932.

Jean Covert Sauer & Carolyn Patrice Sauer Scholarships

Beth Judge
 Elaine Ong
 Established by Dr. Jean Sauer, an alumnus of the Medical School, Class of 1956, to honor Dr. Carolyn P. Sauer, her daughter.

Linda Shriro Schenck, M.D., Women Medical Student Scholarships

Stacia Anderson
 Susan Georgeson
 Kelly Goeb
 Margret Lenarz
 Claudia Luscher
 Connie Lutkevich
 Sue Nielsen
 Lorinda Parks
 Julie Robertson
 Pearl Yu
 Established by Dr. Carlos Schenck in memory of his wife, Dr. Linda Shriro Schenck, Class of 1977.

Dr. Vernon D.E. Smith Scholarships

James Jorgenson
 Sarah Lundeen
 Given in memory of Dr. Smith, a St. Paul surgeon and a founder of the Minnesota Medical Foundation.

Luigi Taddeini Scholarship

Anne Lippin
 Established in memory of Dr. Taddeini, who served as chairman and president of Ramsey Clinic in St. Paul.

George H. & Lillian K. Williams Scholarships

Ravi Agarwal
 James Rooney
 Established by bequest of George and Lillian Williams. ■



UNDER OUR UMBRELLA

Bob Allison Ataxia Research Center



Bob Allison
Ataxia
Research Center

The Second Annual "Ataxia Attack" Golf Tournament will be held July 21 at the Willow Creek Golf Course in Rochester, Minnesota. Donna and Jerry Christensen will serve as chairpersons and their children, Brian and Jessica, will be honorary chairpersons. A dinner and dance will follow the golf tournament. In 1994, \$12,500 was raised from the event.

The Third Annual Bob Allison Golf Tournament will be played Labor Day weekend at the Breezy Point Golf Course near Brainerd, Minnesota. Over the last two years, \$36,000 has been donated to the Bob Allison Ataxia Research Center from this tournament. The Denny Anderson, Botany 500 Golf Tournament will be held at Brackett's Crossing Country Club in Lakeville, Minnesota, on July 25.

For more information on these events, please call Marsha Magill at 612-625-8672 or 1-800-922-1MME. ■



Children's Cancer Research Fund

The 14th Annual Dawn of a Dream Benefit, starring country singer Clint Black, raised more than \$900,000 for CCRF. Approximately 1,800 fans enjoyed the two-hour performance at the Minneapolis Convention Center on January 14.

Prior to his performance at the Convention Center, Black visited the University of Minnesota Hospital's Pediatric Oncology Unit which specializes in bone marrow transplantation for children with cancer. Later, he donated personal belongings such as his trademark black hat, favorite jacket, and Gibson guitar, raising \$14,100 during the live auction. Black also pledged \$25,000 personally to support the work of CCRF.

Established by Diana and Norm Hageboeck in memory of their daughter Katie, who died of leukemia in 1979, the Dawn of a Dream benefit has raised more than \$8 million to aid children's cancer research at the University. For more information, call 612-625-9126 or 1-800-922-1MME. ■

Diabetes Institute for Immunology and Transplantation

The Diabetes Institute for Immunology and Transplantation, an institute devoted to the prevention and cure of diabetes through the disciplines of immunolo-

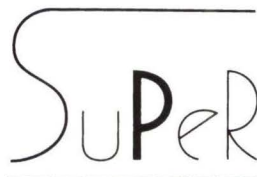
gy and transplantation, has been established at the University of Minnesota Medical School. It will focus on the immune events that lead to diabetes, but are preventable, and on islet transplantation for cure once diabetes is present.

For more information, see page 22 or call 612-625-9126 or 1-800-922-1MME. ■

International Hearing Foundation



The Meniere's and Tinnitus Support Groups were started in 1986 by the late Marlys Soderberg. Past featured speakers have included physicians, dieticians, and physical therapists. The groups meet the first Saturday of each month from 10:00 a.m.-noon and literature on the diseases is available. Interpreters are provided for those who are hearing impaired. For more information call Rosie or Judy at the International Hearing Foundation, 612-339-2120. ■



SUPER

More than 200 people attended the first annual SUPER (Supporters United for Parkinson's Education and Research) Dream Benefit, held Sept 18. The benefit featured a special performance of *Forever Plaid* at the Hey City Stage in Minneapolis.

During the past two years, SUPER has raised more than \$100,000 to support Parkinson's disease research. The funds support equipment, supplies, and staffing needs at the University's Department of Neurosurgery. For more information about SUPER, call 612-624-6666 or 1-800-922-1MME. ■

University Children's Foundation



The UCF board held its quarterly meeting on November 30. Four individuals were elected for their first full three-year term: Ray Christensen (who had been filling an unexpired term), Ingrid Hoyt, Jim Zechman, and Shirley Horn. Several members were reelected for a second term: Sidney Kaplan, Beth Patten, Kathleen Ridder, Lynn Headrick, Donald McCormick, M.D., Paul Quie, M.D., and Don Warner. Board officers elected are: Dean Edstrom (chair), Alfred Michael, M.D. (president), Gordy Johnson (vice chair), Paul Quie (vice president),

Alfie Fish, M.D. (secretary), and Fred Friswold (treasurer).

For more information, please call Mark Desmond, 612-625-1148 or 1-800-922-1MME. ■

U CAN University of Minnesota Cancer Center

The Cancer Center is raising funds for 20 areas of research, patient care, and education. Gena Janetka, a patient, shared her story in a direct mail campaign that reached new donors, telling about the Cancer Center's ground-breaking research. The campaign was helped by Minnesota Twins ballplayer Chip Hale, who long ago "signed on" with the Cancer Center to help raise visibility and funds.

Volunteer Beverly Smith, Ph.D., a candidate in microbiology, wrote to more than 100 of her friends and colleagues asking them to donate to the Cancer Center. She is creating Beverly's Dozen, a group that aims to raise \$1,000 per person. Fourteen of Beverly's friends have already committed to raise a total of \$14,000.

For more information or to join the Cancer Center fund-raising team, call Barbara Zimmerman, associate director of development, at 612-625-3650 or 1-800-922-1MME. ■

Variety Children's Association

Variety Children's Association (VCA) recently hosted several special events, including Breakfast with Santa on December 20 at the University-Variety Hospital for Children. VCA will host an afternoon at Knotts Camp Snoopy, Mall of America, for patients and their parents and siblings the first Wednesday of every month. The event includes ride passes and a party.

On January 5, 14 glider/rocker chairs were delivered to the Children's Special Care Unit of the hospital so each patient room will have a rocker.

In 1995, VCA will be implementing a number of new volunteer programs, including a volunteer greeter for the Children's Center. For more information about Variety Children's Association, call 612-624-6900 or 1-800-922-1MME. ■

Vision Foundation

Due to the generosity of William Holcomb, each of the examining lanes in the Children's Eye Clinic now has the most sophisticated equipment available to hold a child's visual interest. The system includes a barking dog, a rabbit drummer, and a monitor that instantly shows a chil-

dren's movie, all at the touch of the examiner's foot on a specially designed pedal. This leaves the examiner's hands free to use other equipment to assess the alignment of the eyes. For more information about the Vision Foundation, call 612-625-8992 or 1-800-922-1MME. ■



WOMEN'S
HEALTH
FUND

Women's Health Fund

The Department of Obstetrics and Gynecology faculty and the Women's Health Fund Board held a joint retreat in early November. The retreat focused on the vision for the future of women's health at the University and how the board and faculty can work together to achieve that vision.

Planning is underway for the 1995 Women's Day Cabaret, a benefit for the Women's Health Fund, to be held Sunday, May 14. For more information about the Women's Health Fund, please call 612-626-2612 or 1-800-922-1MME. ■

School of Public Health

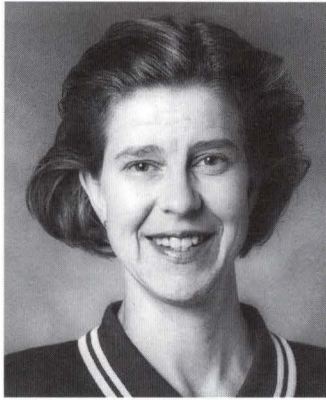
Art Buchwald, nationally known commentator, correspondent, and columnist, will be the featured speaker at the School of Public Health 50th Anniversary banquet on Thursday, April 27. The event will be held in the Grand Ballroom of the Park Inn International in Minneapolis. Tickets are available from the Dean's Office at the School of Public Health, 612-624-5439.

The banquet is one of the events being held in connection with the School's 50th Anniversary. On April 27-28, an educational symposium will be held at the Park Inn with the theme "A 20/20 Vision for Public Health: A view of public health for the next 25 years." Among the speakers will be Dr. William Foege, former head of the Center for Disease Control; and former deans Lee Stauffer and Dr. Stephen Joseph. Dr. Foege will receive the School's 50th Anniversary Award. The registration fee for the symposium is \$130 which includes the evening banquet. Continuing education credits will be available.

Alumni reunions, the annual meeting of the Minnesota Public Health Association, and the annual meeting of the School of Public Health Alumni Society will be held in connection with the anniversary event. For more information about the School of Public Health, call 612-624-6669. ■

President's Report

I had hoped to announce in this issue that a new dean of the Twin Cities Medical School had been named. Unfortunately, the search is taking longer than anticipated. We promise to update you immediately.



Reunion committees are hard at work. From my perspective, I see an energetic group of alumni volunteers working to present the most fun-filled reunions yet for their classmates. I hope you plan to attend.

One of our most ambitious projects each year is the New Horizons In Minnesota Medicine seminar, which is part of the Reunion Weekend. Six Medical Schools faculty or alumni are invited to present updates on the innovative and dynamic research taking place at our alma mater and by our alumni. The seminar is one opportunity for each of you to connect with your Medical School. Please look over the information in this issue and watch for the brochure with registration materials. We are putting extra effort into planning this year's seminar and want to share the results with you on Saturday, June 3.

We have also begun helping renovate the Adytum (student lounge). Some new equipment is being purchased and we are looking at purchasing additional computers for student use. The Adytum is a valuable and important student resource which helps foster community among medical students.

What have you been doing lately? News of your professional activities and any professional recognition that you have received is important to include in our class news section of the Bulletin. The most interesting part of any educational institution is its people; we think that you, the alumni of the Medical Schools, have news that classmates and others would enjoy reading. Take a moment to complete the form requesting information and send it to the editor. Why not stop and do it right now?

Thank you to all who have responded generously to the Alumni Annual Fund and to your Reunion Class Gifts. We hope to recognize those classes who have made the greatest impact this year. If you haven't made your gift, it is not too late.

Cordially,

Dorothy J. Horns MD

Dorothy J. Horns, M.D., '76
President
Medical Alumni Society



The 5th Annual MMF Golf Classic

Monday, August 28, 1995
North Oaks Country Club,
North Oaks, Minnesota

Double Shotgun Start
(morning and afternoon starts)

Scramble Format

Entry Fee \$200 (\$60 tax-deductible)

For more information or to register
call 612-625-1440 or 1-800-922-1663.



The MMF Golf Classic, now in its fifth year, has quickly become one of the Twin Cities' premier golf events. This scramble format tournament provides a challenging but enjoyable round of golf for players of all skill levels.

Last year's event raised over \$40,000 for medical research and scholarships at the University of Minnesota Medical Schools (Minneapolis and Duluth). The past four tournaments have raised a total of more than \$140,000, with this year's tournament promising to be the most successful yet.

Golfers may sign up as a foursome or as individuals. Interested parties are encouraged to call for more information soon. Space is limited and the past few Classics have all been sellouts. ■



Medical Alumni Reunion Weekend '95

June 1-3, 1995

University of Minnesota / Radisson Hotel Metrodome U of M

SCHEDULE OF EVENTS

All Reunion '95 activities are held at the Radisson Hotel Metrodome U of M, unless otherwise noted.

The Medical Alumni Society invites all alumni of the Medical Schools to join in the festivities of Reunion Weekend '95. While special activities are held for those celebrating class reunions, there are plenty of opportunities for camaraderie with fellow alumni and friends.

(Classes celebrating special reunions: 1935, 1940, 1945, 1950, 1955, 1960, 1965, 1970, 1975, and 1985)

THURSDAY

Reunion Headquarters

Noon - 5 p.m., Regents Room, second floor

Alumni are encouraged to check in at Reunion Headquarters upon their arrival. Refreshments available.

Welcome Reception

5 p.m. - 7 p.m. (Special Honorees, Class of 1945)

This reception provides alumni with their first opportunity to see one another. Refreshments provided. No registration required.

FRIDAY

Reunion Headquarters

8 a.m. - 5 p.m.

Half-Century Club Reunion

10:30 a.m. - 1 p.m., Luncheon and Program

This program is intended for 1945 graduates and before.

All alumni are welcome to attend, however.

(Class of 1945, honored guests)

Campus/Hospital Tours

1 p.m.

View the University Campus and Hospital

(bus and walking - approximately 1 hour)

Medical School Graduation

2:30-4:30 p.m. Northrop Auditorium

Class of 1945 introduced. All alumni are welcome.

Medical School Department Tours

3:30 p.m.

Selected departments and programs will provide short tours of their facilities. Will begin at Reunion Headquarters.

Deans Reception and Dinner or Individual Class Functions

5:30 p.m. reception 6:45 p.m. dinner

Campus Club, Coffman Memorial Union

Meet the deans and other Medical School staff while dining at the Campus Club's Buffet and enjoying a great view of Minneapolis and the river.

SATURDAY

Reunion Headquarters

8 a.m. - 5 p.m.

New Horizons In Minnesota Medicine (CME)

8 a.m. - 8:45 a.m. Registration & Coffee

8:45 a.m. - noon Program

Lunch at noon.

The program highlights Medical School faculty as well as alumni. This broad based CME will provide something for all physicians. The value of the CME will be three Category I credits. An informal luncheon buffet immediately follows the program. A full listing of presenters will be available soon.

Campus/Hospital Tours

1 p.m.

View the University Campus and Hospital

(bus and walking - approximately 1 hour)

Medical School Class Reunion Dinner & Programs

5 p.m. Reception & Registration

6 p.m. Dinner and Programs

The MAS presents the prestigious Diehl Award as part of the festivities. Individual classes have programs following the dinner. This is the cornerstone event of the weekend and should not be missed. Class photos are taken and reunion memories books are given out. ■

Alumni Profile

Dr. Eugene S. Strout believes family practice is the wave of the future, and strongly encourages medical students to enter the primary practices.

Although he is a pathologist, he has established the Eugene S. Strout Endowed Scholarship in Family Practice to provide financial assistance to medical students planning a career in family practice.

"It's a way to give something back to the University for the education I received there," Strout says. He believes it's very important for alumni of the Medical School to help medical students, especially in these days of extremely high tuition.

"Nowdays students have to be really motivated and idealistic to go into medicine," he says, "what with the high costs and concerns about the health care delivery system. They need as much help as they can get."

A member of the Medical School Class of 1964, Strout's path to medical practice was unusual. Immediately after high school he entered the Navy where he served as a hospital corpsman for 10 years. The interest in medicine he developed in the Navy led him back to the University of Minnesota, where he entered the combined pre-med program which would grant him a B.A. and later an M.D. The years in school were busy ones, as Strout and his wife, Shirley, had a family of three boys.

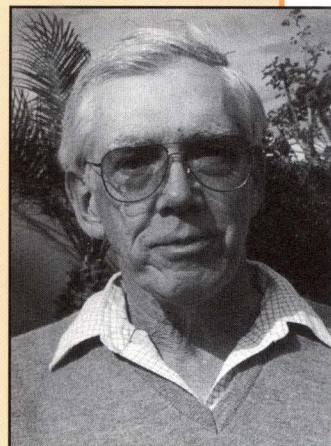
Following medical school Strout re-entered the

Navy and served an internship at Camp Pendleton, California. He spent a year in Guam and more than two years in submarine service based in New London, Connecticut, which included several 60-day underwater tours. He completed a pathology residency while still in the Navy, and was chief of laboratory services at Long Beach Naval Hospital for two years.

In the early 1970s Strout set up a private practice in Tustin, California, and also became a faculty member at the University of California, Irvine. A daughter joined the family, as the Strouts adopted California as their permanent residence. Strout specialized in dermatologic pathology, combining consulting with one-on-one residency teaching. Currently, Strout is partly retired but continues to consult at UC

Irvine. The Strouts reside in Huntington Beach.

Amateur landscaping, golf, creative writing (specializing in adventure stories) and travel with his daughter fill Strout's spare time. He visited Minnesota for his 30 year Medical School Alumni Reunion this past June, and was pleased to be able to meet medical student Janalynn Fish, the first recipient of the Eugene S. Strout, M.D. Endowed Scholarship in Family Practice. ■



Dr. Eugene S. Strout

Diehl Award nominations due

Nominations for the Harold S. Diehl Award should be received by April 7. Given in honor of the University of Minnesota Medical School's fifth dean, Harold Sheely Diehl, M.D., the award is presented to an individual who has made outstanding professional contributions throughout his or her career. The Diehl Award has been presented to 68 people since its inception in 1962.

Qualifications for nomination are: 1) Preferably a graduate of the University of Minnesota Medical School; 2) Not currently engaged in an academic capacity; 3) Outstanding contributions to the Medical School, the University, the alumni, and the community; and

4) Relatively long experience in the field of medical service or a related field.

The award will be presented at the Medical Alumni Society's Annual Reunion Weekend, June 1-3. Nominations should include supporting documents and references to assist the committee in its deliberations. Nominations should be sent to: Dorothy J. Horns, M.D., Chairperson, Harold S. Diehl Award Committee, Box 193 UMHC, 420 Delaware St. S.E., University of Minnesota, Minneapolis, MN 55455. Questions may be referred to the Medical Alumni Society at the Minnesota Medical Foundation, 612-625-8676 or 1-800-922-1MME. ■

CLASS NOTES

1947

Dr. John E. Verby, Jr., Bloomington, Minnesota, received the Carleton College Distinguished Achievement Award in recognition of his leadership in medical education, particularly through promotion of family medicine and improvement of rural health care. He is the original director of the University of Minnesota's Rural Physicians Associate Program which introduces third-year medical students to rural family practice.

1952

Dr. Mildred Hanson, Minneapolis, was presented the American Medical Women's Association Regional Reproductive Health Award on November 3 for her contributions to reproductive health care. The award, which consists of a commemorative plaque and a check for \$1,000, was given at the annual meeting in Orlando, Florida.

1953

Dr. Robert J. White, Cleveland, Ohio, was recently appointed to the Pontifical Academy of Sciences (PAS) which met in Plenary Session at the Vatican in Rome October 23-30. The PAS organization is limited to 80 members from many fields of research, including physics, chemistry, astronomy, and biology. The membership is international with one third being Nobel Prize Laureates. White is the only physician/scientist from this country to

have been appointed to the PAS.

1960

Dr. Fred E. Mecklenburg assumed the chairmanship of the ob/gyn department at Fairfax Hospital in Falls Church, Virginia, after 13 years with Kaiser-Permanente (Mid-Atlantic region). This full-time position includes direction of the ob/gyn residency rotation from George Washington University School of Medicine, where he held an appointment of clinical professor of ob/gyn.

1965

Dr. John M. Barry, Portland, Oregon, received the 1994 Medical Research Foundation of Oregon Discovery Award for contributions to the field of renal transplantation. For the past 18 years, he has guided the Oregon Health Sciences University renal transplantation program.

1966

Dr. Robert D. Christensen, Shakopee, Minnesota, received the Distinguished Service Award, the highest award given by the Minnesota Medical Association (MMA). He was honored for his years of leadership and service in the MMA and for his outstanding contributions to medicine. Christensen is a general surgeon, regional director of Park Nicollet Medical Center, and associate professor in the Department of Surgery at the University of Minnesota Medical School.

1969

Dr. B. Robert Spence was appointed to the staff of Urologic Physicians, P.A., a Minneapolis medical specialty group that provides urologic care for adults and children.

1973

Dr. Marvin Heuer, St. Paul, has been an active family practitioner in all areas from obstetrics to gerontology. He is involved in clinical research and teaching residents. He is a consultant in pharmaceutical research and informational drug development and is a small business owner and operator, and an active teacher and mentor.

1974

Dr. David Hilfiker has written a book, *Not All of Us Are Saints*, describing his work with the poor in inner-city Washington. Hilfiker is a physician at Community of Hope Health Services, a church-sponsored clinic in Washington, D.C.

1977

Dr. Bruce A. Orkin, Washington, D.C., has been appointed chair of the medical advisory board of the United Ostomy Association.

1987

Dr. Phillip Kibort was appointed medical director of ambulatory services for Children's Health Care Minneapolis, St. Paul, and West (Minnetonka) campuses. He is also medical director for medical services at Children's - St. Paul, with

responsibility for inpatient medical/surgical units.

1981

Dr. Michael Curlston, Santa Rosa, California, was named to the editorial board of *Alternative Therapies in Health and Medicine*, a new peer-reviewed medical journal.

1986

Dr. Jeffrey M. Wempe, has relocated to Ball Memorial Hospital in Muncie, Indiana, to continue practicing anesthesia following completion of his four-year commitment to the United States Air Force as a staff anesthesiologist at Kirtland Air Force Base in Albuquerque, New Mexico.

1988

Major George D. Patrin, M.D., is a staff pediatrician at Landstuhl Regional Medical Center in Germany. While an Active Duty Army Pediatrician, he has been instrumental in beginning investigation of lead poisoning, its screening and treatment in Germany. He is also active in community programs involving behavior and learning disorders.

1991

Drs. Darren K. and Kristin Shover are living in Minot, North Dakota, where Kristin is practicing pediatrics at Medical Arts Clinic while Darren is serving as an internist with the United States Air Force at Minot Air Force Base. ■

IN MEMORIAM

LEONARD A. BOROWICZ, M.D., Class of 1939, died in November at age 78. Born in Florian, Minnesota, a largely Polish town, Dr. Borowicz learned to speak and write Polish. In the late 1930s, he opened a practice in northeast Minneapolis. After studying cancer surgery in New York, he returned to his practice until retiring in 1980. He sponsored many emigrant families from Poland and nearly 40 percent of his patients were Polish people. He is survived by his wife, Marion, two daughters, a son, four step-sons and one step-daughter. Memorials are preferred to the Minnesota Medical Foundation or the University of Minnesota Alumni Association.

JOHN JOSEPH DWYER, M.D., Class of 1950, formerly of Duluth, died October 13 at the age of 72 in Sun City West, Arizona.

ROBERT E. ENGBRETSON, M.D., Class of 1980, died in October at the age of 40. Dr. Engbretson graduated from Edina High School with honors in 1972 and graduated summa cum laude from the University of Minnesota. He completed his residency at Hennepin County Medical Center and served as a physician with the Columbia Park Medical Group at Brooklyn Park Clinic. He is survived by his wife, Georgia, and a son.

JOHN A. HAUGEN, M.D., Class of 1930, died December 11 at age 88. Dr. Haugen was an assistant clinical professor at the University of Minnesota Medical School for more than 30 years and had a longtime obstetrics and gynecology practice in Minneapolis. He completed his internship and residency in internal medicine at Detroit Receiving Hospital and returned to Minneapolis for six years of general practice. In 1938, he completed an obstetrics and gynecology residency in Chicago. During World War II, he was a lieutenant commander with the Medical Corps of the Naval Reserve. Dr. Haugen was affiliated with Abbott and Northwestern Hospitals for more than 40 years and was chief of staff at Abbott when it merged with Northwestern in the 1970s. He is survived by his wife, Phebe, a son, and three daughters.

GERALD L. HEIDEMAN, M.D., Class of 1974, died October 10 at age 46. Dr. Heideman graduated from the College of St. Thomas in 1970 and completed his medical residency at St. Mary's Hospital in Minneapolis. He was a family practice physician at the Faribault Clinic. He is survived by his wife, Mary, two sons, and a daughter.

CLAUDE R. HITCHCOCK, M.D., Class of 1945, died October 30 at age 77. Dr. Hitchcock was a retired chief of surgery at Hennepin County Medical Center. He was also a pioneer in kidney transplants, artificial kidney

treatment, and breast cancer surgery. He performed Minnesota's first human kidney transplant in 1963 and his artificial kidney treatment program became the Regional Kidney Dialysis Program. He founded the Minneapolis Medical Foundation whose assets were sold and the proceeds used to establish endowments for the Minneapolis Medical Research Foundation. He also directed the Minneapolis phase of the National Surgical Adjuvant Breast Project.

Born in Minneapolis, he graduated from the University of Minnesota before joining the U.S. Army Medical Corps in 1945. After World War II, he returned to the University Medical School and earned a Ph.D. in surgery under Dr. Owen Wangenstein. He was director of the University of Minnesota Cancer Detection Center in 1952 and joined the Hennepin County Medical Center in 1955 as its first full-time chief of surgery. More than 100 surgeons who trained under him formed the Hitchcock Surgical Society. Dr. Hitchcock is survived by a daughter and a son.

HELEN KELLEY, M.D., Class of 1959, died November 30 at age 76. Dr. Kelly originally worked as a teacher and principal. With her family's encouragement she later decided to attend medical school. During her training, she was the first woman intern at the old Anchor Hospital in St. Paul. She taught at the University of Minnesota helping shape the family practice training before opening a family practice clinic in Cottage Grove.

CLARK SHATTUCK, M.D., Class of 1958, died in October at age 60. Dr. Shattuck completed his residency training in obstetrics and gynecology at the University of Minnesota. He was formerly chief of staff for the University Hospital and founding physician for Mercy and University Hospitals.

CLARENCE E. WATZ, M.D., Class of 1931, died October 14 at age 86. Born in Minneapolis, Dr. Watz practiced medicine in Jordan, Minnesota, during the Depression, often accepting fruit and vegetables as payment. He began a practice in St. Paul, where he worked until his retirement in 1976. He was also a surgeon at Midway Hospital in St. Paul. He is survived by one son.

CAROL DETTMAN WOLCOTT, M.D., Class of 1967, died September 12. After graduating from medical school, she continued training at the University of Utah where she was a pioneer in research linking nuclear fallout from atom bomb testing to thyroid disease and cancer. Dr. Wolcott later joined the faculty of the University of Wisconsin as physician in charge of training pediatric nurse practitioners and served as a University Health Center physician for 21 years. ■

THANKS FOR ASKING



Gary G. Hargroves

Q ♦ I have been reading and hearing about Charitable Lead Trusts.
♦ What are they and how do they work?

Charitable Lead Trusts (CLT) recently made front-page news because Jacqueline Kennedy Onassis used this as a way to reduce estate taxes, give more to her family, and support charitable interests.

A CLT is the opposite of a Charitable Trust, where a person makes a gift into a trust, receives an income for life, and then whatever is left goes to charity.

With a CLT, a person makes a gift, a charity receives an income for a period of years, then the CLT assets — including any appreciation — pass to family members or other individuals.

What does this accomplish?

First and foremost, estate tax savings! It is possible to eliminate 100 percent of estate taxes, but usually this is not practical. However, it is reasonable for a significant percentage of estate taxes to be eliminated. The greater the number of years of payment and the higher the payment to charity, the greater the estate tax deduction.

For example, a gift of \$200,000 into a CLT paying a charity 7 percent for 20 years would create a \$150,000 charitable deduction. Assuming an estate tax of 50 percent, that would be a \$75,000 estate tax savings. Since \$50,000 would be subject to estate taxes, there would be a \$25,000 tax liability, compared to \$100,000 had the CLT not been used.

If the trust earned 10 percent, after 20 years, family members would receive \$340,000.

I would be pleased to visit with you or send you more information about the CLT. Please phone me at 612-625-5463 or 1-800-922-1663, or return the reply below.

Dear Gary,

_____ Please send me information on the Charitable Lead Trust

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City _____ State _____ Zip _____

RETURN TO: Gary G. Hargroves, Minnesota Medical Foundation, Box 193 UMHC, Minneapolis, MN 55455-0392

MB-SP95

THANKS FOR GIVING

Belva Rasmussen

by Jean Murray

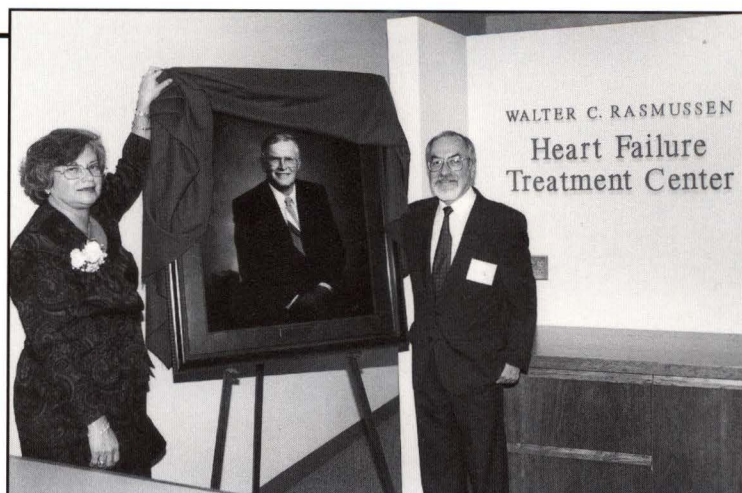
Much can be done to relieve symptoms in patients with heart failure and even to prevent the disease in those at risk. On November 9, 1994, the Walter C. Rasmussen Heart Failure Treatment Center at the University of Minnesota was dedicated, thanks to the efforts of Belva Rasmussen, Walter Rasmussen's wife. The center combines state-of-the-art research with patient care dedicated to preventing the progression of heart disease and prolonging the lives of patients with heart failure.

Walter Rasmussen, who died of heart failure in 1991, was a successful businessman who was known for his generosity and his involvement in the community. His care by Dr. Jay Cohn, head of the Cardiovascular Division at the University of Minnesota Medical School, allowed him to continue an active lifestyle for several years despite the advanced state of his heart disease when he first came to the University. Belva Rasmussen's appreciation for his medical treatment and her desire to encourage earlier identification of this cardiac problem led the Walter C. Rasmussen Foundation and Northeast State Bank to establish this treatment center to honor Walter's memory.

Walter Rasmussen developed the Northeast State Bank in Minneapolis, founded the Guaranty State Bank in Robbinsdale, and later opened branches of the Northeast State Bank in Columbia Heights and Coon Rapids. He made the banks a part of the Northeast community by introducing Saturday banking hours and turning the parking lots into parks for community events.

He was also active in other community affairs, serving on the board of the Minnesota Orchestra, on the Fridley Housing and Development Board, and as a founder of the Anoka County Economic Development Partnership.

Belva Rasmussen was born in Aruba, Dutch Caribbean. Her parents were Dutch and Spanish, and she grew up speaking Papiamentu, the language of the island of Aruba. Strong advocates of education, her parents sent Belva and her three brothers to college in the United States. "Although most women in Aruba at that time did not go to college or have careers, my parents believed in



Belva Rasmussen and Dr. Jay Cohn unveil a portrait of Walter Rasmussen at the opening of the Center.

giving us all equal opportunities for education," she says.

The daughter of a prominent Aruba banker, Belva met Walter during one of his Caribbean vacation trips. Their shared interest in finance and community involvement resulted in a partnership that culminated in Belva succeeding her husband as Chairman of the Board and CEO of the Northeast State Bank.

Belva and Walter — who came from Pelican Rapids, Minnesota — both learned early the importance of community and helping those around them, and incorporated this "small town" philosophy into their bank's mission. "Through the years we've come to know most of the leaders of our community," says Belva, "and we've been able to help when there is a need."

Belva Rasmussen currently serves on the boards of the Minnesota Orchestra, the Anoka Hennepin Technical College Foundation, the Anoka County/United Way Steering Committee, the University of Minnesota's Women's Health Fund, and the Anoka County Capital Fund. The Anoka County Capital Fund was established to aid small start-up companies in the Anoka area and to get businesses to move into the area. The Northeast State Bank has been a strong supporter of this effort.

The importance of helping others was instrumental in the establishment of the Walter C. Rasmussen Heart Failure Treatment Center. "I felt there was such a need to do something about heart failure — a need for education and preventive care," says Belva Rasmussen. "We are proud to contribute to that effort." The Walter C. Rasmussen Memorial Fund is managed by the Minnesota Medical Foundation. The University of Minnesota Medical School and the Foundation are deeply grateful to Belva Rasmussen for establishing this lasting tribute to Walter Rasmussen. ■

Minnesota Medical Foundation

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