Celebration of Teamwork at Lambeau Field
The school celebrated the work of physician mentors who train SMPH students in the Green Bay area.

On the Cover
Left to right: First-year medical student, Jessica Chung (class president), Bucky Badger and first-year medical student Adam Pfaller pose for a selfie at the Wisconsin Medical Alumni Association-sponsored cookout to welcome the entering class. It was one of many events during the students’ orientation week at the University of Wisconsin School of Medicine and Public Health. Photo by Todd Brown/Media Solutions.

QUARTERLY is published four times a year by the Wisconsin Medical Alumni Association (WMAA) and the University of Wisconsin School of Medicine and Public Health (SMPH).

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QUARTERLY • VOL. 17 • NO. 6 • JULY 2016

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I n this issue of Quarterly, we focus on the incredibly important and exciting theme of “transformation.”

The work our school has done for more than a decade to meld medicine and public health—creating a dual focus on the diagnosis and treatment of health conditions in individual patients alongside disease prevention and health promotion for populations—affects all missions of our University of Wisconsin School of Medicine and Public Health (SMPH). Now our educational enterprise takes center stage in this issue of Quarterly. Our medical school has become one of the nation’s top medical schools and public health schools, and students and alumni are taking pride in the promise of a new year.

As you enjoy this latest Quarterly, we predict you will also be experiencing another type of annual transformation as snow blankets our campus and Madison’s lakes freeze, ushering in the season for skiing, snowboarding and ice fishing. Wherever you are, we hope you enjoy the opportunities of your winter season and consider visiting UW-Madison as we embrace not only the challenges of winter but also the hope and promise of a new year.

Robert N. Golden, MD
Dean, University of Wisconsin School of Medicine and Public Health
Vice Chancellor for Medical Affairs, UW-Madison
Bucky was among many “Badgers” who welcomed 176 new MD students to the University of Wisconsin School of Medicine and Public Health (SMPH). In fall 2015, members of the school’s faculty and Wisconsin Medical Alumni Association (WMAA)—as well as students in upper classes—helped orient the students to their new environment. Events included a WMAA-sponsored cookout, the white coat fitting and ceremony, and classroom sessions.

About 80 percent of the class members hail from Wisconsin. Among the balance, students came from many states and 11 countries, including a small village in Nepal and Kabul, Afghanistan. Half attended college in Wisconsin; others graduated from outstanding schools across the United States. Ten class members hold master of public health degrees, and more than 14 hold other master’s degrees. Nine members of this class served in the U.S. military.

Collectively, these students have provided volunteer service across the United States and in countries around the globe, including Guatemala, Nicaragua, Costa Rica, Honduras and Peru. And a vast majority have been involved in research. As they progress through the next four or more years of medical school, Bucky Badger, SMPH faculty and staff, and WMAA members will continue cheering them along.
As revolutionary changes in health care and public health demand a different kind of physician, the University of Wisconsin School of Medicine and Public Health (SMPH) community has reimagined what medical education needs to be.

But first, a bit of history. In 2005, the school changed its name to include medicine and public health, which better reflects its vision and endeavors. This signaled development of a bold model that unites population health promotion and disease prevention with the diagnosis and treatment of health conditions for individuals.

As the SMPH began crafting its plan to integrate the two disciplines, it created a committee to examine the MD curriculum and integrate public health into the education of all medical students. That group significantly revised the first two years of medical education and made smaller changes to years three and four.

“When our committee reconvened to look harder at the third and fourth years, we realized we were thinking about the curriculum as two halves,” recalls Christine Seibert, MD, associate dean for medical student education and services at the SMPH. “We recognized that separating basic sciences from clinical training was flawed and that we needed to look at the whole.”

The 2x2 medical school curriculum model—two years of basic sciences followed by two years of clinical experiences—was first imagined by the American Medical Association in 1904 and later promoted within the Flexner Report in 1910. Curriculums across the nation have evolved since then, but most still rely on that model.

“We realized that we could choose to do some of this and some of that in our current curriculum—much like you can fix a room in your house with paint and window dressings—but we really needed a bigger renovation. It was time to start moving some walls in the whole curriculum,” explains Shobhina Chheda, MD, MPH, the SMPH’s assistant dean for medical education.

Chheda adds, “A curriculum must reinforce what you want students to carry with them after graduation. We are committed to doing exactly that, especially with the basic sciences.”

By focusing on end results for students, the group began shaping its vision. One of the biggest goals of the new curriculum is the marrying of basic and clinical sciences. “We recognized that separating basic sciences from clinical training was flawed and that we needed to look at the whole.”

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Nationally, expectations are evolving for medical education, with the ultimate goal of better equipping physicians to improve health outcomes and address health equity issues,” says Elizabeth Petty, MD ’86, senior associate dean for academic affairs at the SMPH. “Professional organizations and accrediting bodies are challenging us to be innovative as we develop more meaningful, interdisciplinary ways to integrate basic and clinical sciences, and to create robust, team-based learning that improves health care delivery and public health practices.”

Petty continues, “Given the vast amount of biomedical and public health information and the fact that discoveries are made daily that may impact health, we cannot possibly teach students everything they will need to know in their future practices. Instead, we must focus on teaching them the core knowledge and skills they need for the next steps in their professional development. We also must teach them to...
become self-directed, life-long learners; critical thinkers who can collaboratively solve tough problems; and—most importantly—compassionate, socially responsible physicians who care about the health of diverse individuals and communities.”

This new curriculum will allow the SMPH the flexibility to meet professional expectations and future needs of patients and populations while preparing all students to excel in their residency training, explains Petty.

Given the school’s goals for students, residency deadline pressures and students’ requests to have time to explore career choices earlier in the curriculum, planners felt that the traditional medical school calendar would need to be completely revised. “As a fourth-year medical student, I feel the pressure of the ever-earlier residency application deadlines, particularly related to required letters of recommendation and, in some cases, the need to complete away rotations before the start of the residency application cycle,” says Betsy Huffman. “Earlier exposure to clinical work and the incorporation of basic sciences concepts will allow students to better integrate their learning to improve their clinical reasoning.”

As planners considered the path through medical education, three distinct phases emerged. Phase 1, lasting 18 months, will focus on basic sciences and fully integrate clinical science and public health. Phase 2 will emphasize clinical applications with longitudinal themes of basic sciences and clinical science. Phase 3 will be dedicated to longitudinal themes of basic sciences and clinical science and public health. Phase 1 of the Forward Curriculum. “This is an important and exciting step in our school’s transformation into a fully integrated school of medicine and public health, as health care goes through an era of unprecedented change,” says Robert N. Golden, MD, dean of the SMPH. “Those changes not only affect how doctors work with other health care providers to care for patients and populations, but how we train future generations of physicians.”

He continues, “We recognize that a new curriculum is an immense and complex undertaking for our school and for those who teach our students throughout Wisconsin. To be successful, this requires enormous interdisciplinary effort and thoughtful collective expertise.”

To build this complicated curriculum, more than 200 people have played a role. Sixty working groups and 10 cross-campus groups included clinicians, scientists and other representatives from the SMPH’s statewide campuses, and medical students. “The inherent uncertainties associated with change—move into new delivery models for education—may cause some anxiety, but with all of our support, I am confident that the new model will engage our outstanding learners and set our school apart as a national leader in medical education,” Golden says. “Importantly, it will provide all of the fundamental knowledge and skills that future physicians need to succeed in the complex world and beyond.”

Seibert comments, “The amazing support of our departments, individual faculty, statewide partners and students has contributed to the curriculum’s success.”

“Our MD graduates are wonderful now, but people are very excited about seeing what the next generation of learners—trained with the Forward Curriculum—will be able to do when they graduate from the UW School of Medicine and Public Health.”

“Many opportunities for students to learn how to address problems in acute settings, in the Care Across the Lifecycle block, students will work with a broad spectrum of patients and specialists to explore the continuum of children’s health, women’s health and geriatrics with themes like caregivers and vulnerable populations.

The Chronic and Preventive Care block will co- mingie myriad reasons why people visit outpatient physicians: to stay healthy and manage chronic diseases. It also will focus on behavioral and community health. The Surgical and Procedural Care block will address new physicians’ think about comprehensive patient care surrounding surgical issues and procedures, internal medicine, radiology and other areas include procedural specialties, and this block will integrate common themes related to working with teams and addressing patient safety in these types of settings.

Phase 3 will look different for various groups of students. After students declare their intended specialty, they’ll be given a learning plan that includes specialty recommended basic science and clinical experiences from which they will pick to best fit their specific goals and objectives. Chheda adds, “There’s room for students to make meaningful choices in Phase 3, but there also is a high degree of accountability to meet goals and objectives.”

Kyla Lee, MD ’98, who serves as a preceptor for SMPH medical students in her practice at Gunderson Health System in La Crosse, Wisconsin, believes the new curriculum’s integrated clinical blocks will allow students to gain more powerful clerkship experiences in communities statewide. Medical and public health faculty appreciate Lee’s interactive teaching sessions that focus on building skills and on cooperative group work, and these are the types of activities that can expand in the new curriculum.

“The new curriculum’s integrated model will help students learn medical facts and concepts in the context of a wider, more relational view of medicine and public health. I feel a collaborative learning through deeper and longer relationships with patients in the context of real-world health system experiences,” says Lee, who has been actively engaged in the SMPH curriculum transformation process. “I credit the SMPH statewide campus with bringing diversity to training. “Each campus brings new challenges and different populations, and this allows students to pursue special interests, such as practicing in urban or rural settings. The collaborative statewide effort allows for best practices, successful programs and novel mentoring ideas to be shared and improved in building the new curriculum,” Lee says.

First-year students who enter the SMPH in fall 2016 will be the first to experience Phase 1 of the Forward Curriculum. “This is an important and exciting step in our school’s transformation into a fully integrated school of medicine and public health, as health care goes through an era of unprecedented change,” says Robert N. Golden, MD, dean of the SMPH. “Those changes not only affect how doctors work with other health care providers to care for patients and populations, but how we train future generations of physicians.”

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Seibert notes that all along the way, she and Chheda have been humbled and awed by the number of people who’ve stepped up to the plate, mostly as volunteers. “It’s fun to see people—ranging from emeritus faculty members to those who’ve been here for only a short time— all fired up about the curriculum redesign,” exclaims Chheda. “A department chair serves on a design team. Some new residents are participating, and students are engaged at every level.”

Huffman shares, “The various work groups have regarded student input very highly at every stage of the process. Students from each year are serving on the Curriculum Transformation Steering Committee, and many are serving on subcommittees. Our school’s faculty does a wonderful job recognizing that students are the heart of medical education and are integral to the transformation process.”

Seibert comments, “The amazing support of our departments, individual faculty, statewide partners and students has contributed to the curriculum’s success.”

“Our MD graduates are wonderful now, but people are very excited about seeing what the next generation of learners—trained with the Forward Curriculum—will be able to do when they graduate from the UW School of Medicine and Public Health,” she concludes.

Keeping the Best from the Past

A lot is changing with the new curriculum. A new academic calendar. New kinds of teachers. New goals for students to acquire better skill sets. But there are a few commitments to which the University of Wisconsin School of Medicine and Public Health (SMPH) is adhering loyally.

Students will have experiences in the clinic from Day 1 of medical school.

Getting students into the surrounding communities to learn how to work with patients has been the SMPH’s longstanding commitment. New to the Forward Curriculum, however, is an added focus on the “systems” piece of health care delivery, enhancing students’ abilities to work in complex systems. Compared to those who trained in the old curriculum, students will better be able to explore how physicians work in teams with nurses, medical assistants, pharmacists and other health care professionals.

The SMPH remains deeply committed to continuing its public health integration.

The new curriculum was spurred by the transformational plan established shortly after the SMPH became a school of medicine and public health. The new curriculum will reinforce the school’s ability to integrate foundational basic sciences and clinical experiences with public health across all phases.

The school will spend even more time building a community.

“Nobody wants me to be his or her doctor based solely on content I learned in medical school or residency, because those were too long ago,” says Shobhna Chheda, MD, MPH, assistant dean for medical education at the SMPH. “To be the best doctor I can be, I need to continuously learn and use new information.” She concludes, “It’s one thing to learn material, but it’s entirely different to learn how to continually integrate new information into the way you practice. The SMPH is doubling down by having students train under a mentor so they can continuously improve how they learn and care for patients in medical school and after graduation.”
STARTING ON FRIDAY, OCTOBER 16, 2015, ALUMNI AND GUESTS BEGAN FLOCKING TO MADISON SPORTING THEIR FINEST BADGER APPAREL—INCLUDING SOME VINTAGE CHOICES FROM THEIR DAYS ON CAMPUS. THAT AFTERNOON, THE WISCONSIN MEDICAL ALUMNI ASSOCIATION (WMAA) BOARD OF DIRECTORS HELD ONE OF ITS TWO ANNUAL MEETINGS. SEVERAL ALUMNI ALSO TOURED THE HEALTH SCIENCES LEARNING CENTER (HSLC) AND THE ANATOMY SUITE AT THE MEDICAL SCIENCES CENTER. ED BERSU, PhD ’76, KAREN KRAVENHOF, PhD ’92, AND DAVE MCCARTHY, MD ’92, JENNIFER KANREK, MD ’70, SARAH HENKE, MD ’70, AND LISA SHIN, MD ’70, LYN SUTRAK, MD ’80, ANN BUDZAK-GARZA, MD ’86, KATHRYN BUDZAK, MD ’89, ARON BUDDA.


NEARLY 200 GUESTS ATTENDED THE WMAA EVENT, AND NEARLY A QUARTER OF THEM WERE ABLE TO MEET THE FIRST-YEAR MEDICAL STUDENT FOR WHOM THEY SPONSORED A STETHOSCOPE. NOW IN ITS THIRD YEAR, THE WMAA STETHOSCOPE PROGRAM HAS BEEN VERY SUCCESSFUL, NOTES KAREN PETERSON, THE ASSOCIATION’S EXECUTIVE DIRECTOR.

THE ALUMNI ASSOCIATION ALSO HOSTED A SPIRITED TAILGATE BRUNCH ON SATURDAY. MORE THAN 400 ALUMNI, STUDENTS, FAMILY AND FRIENDS REMINISCED AS THEY DINED BEFORE THEY HEADED TO CAMP RANDALL STADIUM.

SPIRITS CONTINUED TO SOAR AS THE WISCONSIN BADGERS BESTED THE PURDUE BOILERMAKERS IN FOOTBALL.

THE CLASS OF 1980 CHOSE SATURDAY EVENING FOR ITS REUNION DINNER AT THE NEWLY RENOVATED EDGewater HOTEL.

WMAA PRESIDENT STEVE MERKOW, MD ’80, SHARES THAT THE CLASS’S 35-YEAR REUNION WAS SPETACULAR IN MANY WAYS. HE SAYS HE ENJOYED RECONNECTING WITH CLASSMATES AND APPRECIATED THE EFFORT PEOPLE TOOK TO TRAVEL TO MADISON, INCLUDING SOME WHO CAME FROM THE EAST AND WEST COASTS (SEE PAGE 3).

STEVE DAMIANI, DO (PG ’90), TRAVELED FROM CALIFORNIA TO ATTEND THE HOMECOMING FESTIVITIES. HE THANKED THE WMAA STAFF FOR PULLING TOGETHER SO MANY OPPORTUNITIES FOR ALUMNI TO CONNECT.


U-Rah-Rah! Wisconsin!

Homecoming
Class Reunions

CLASS OF 1970

CLASS OF 1980
Front row (left to right): Peter Rothke, Steve Schappter, Jeff Winston, Dave Riehen, Earl Amundson, Lori Neuman, Julie Jagemann. Back row: Pat McBride, John Herman, Chris Peterson, John Drawbert, Paul Cuskey, Bruce Wilson, Tom Matin, Steve Merkow.

CLASS OF 1990
CLASS OF 1995

CLASS OF 2000

CLASS OF 2005
Front row (left to right): Elizabeth Woods, Catherine Grove, Mike Woods, Megan Kehoe, Kimberly Amat. Back row: Doug Salm, Eric Dvorak, Brian Amat, Dumpi Kothari, Chad Erickson, Chris Dillon, Tim Enright.

CLASS OF 2010
JERRY HALVERSON, MD ‘99

I am the medical director at Rogers Memorial Hospital Oconomowoc, a private, not-for-profit psychiatric health system with campuses throughout Wisconsin, as well as in Tennessee, Florida and other states. I care for patients at the residential and partial-hospital levels of care. My programs are for adults who have primary mood disorders and complexly comorbid anxiety, disruptive behavior disorders, as well as personality and addictive disorders. Through voluntary appointments at the University of Wisconsin School of Medicine and Public Health and Medical College of Wisconsin (MCW), I teach psychiatric residents.

I care for patients who are very ill at the beginning of their treatment. Many have had multiple hospitalizations, attempted suicide and harmed themselves. It is immensely gratifying to see them improve their coping ability and be able to re-enter school and work. This is a great time to be a psychiatrist. Recognition of the prominence of psychiatric disorders and the demand for psychiatrists has never been higher. The future holds great promise for discoveries related to the primary issues underlying psychiatric disorders, as well as effective screening and treatment/prevention.

Psychiatry always has been a good fit for me, but I did not realize that in medical school. After earning my medical degree, I completed a rotating internship and one year of anesthesiology residency at Mayo Clinic; I then completed a psychiatric residency at MCW and earned a subspecialty certification in psychosomatic medicine. As the 164th president of the Wisconsin Medical Society, I have been able to highlight psychiatric issues in the state, I am among a handful of psychiatrists to have held that role. I also have served in leadership roles at the Dane County Medical Society, Madison and Dane County Board of Health, Wisconsin Psychiatric Association and American Psychiatric Association, for which I am the delegate to the American Medical Association House of Delegates.

“On Call” Three psychiatrists tell Quarterly what they’ve been up to

MARK HANSEN, MD ‘78

My practice at the Mayo Clinic in Rochester, Minnesota, focuses on sleep medicine. Previously, I practiced psychiatry in many settings. I also have been the director of a psychiatry residency training program and the chair of the adult psychiatry division at our institution.

Over my nearly 35 years of practice, I have had many memorable patient cases. Among these are a narcoleptic patient, once institutionalized, who awakened from decades of slumber when her condition was finally diagnosed; an emaciated, catatonic man, who, similarly, arose from his bed and began chatting—as well as eating everything in sight—once he was treated; and many patients who wage quiet, heroic battles against the illnesses that affect them. I chose to specialize in psychiatry because I was fascinated by the breadth and complexity of human behavior and because the field seemed to combine the art and science of medicine in ways that were humane and meaningful.

Following graduation from the UW School of Medicine and Public Health, I completed my residency training at the Mayo Graduate School of Medicine in Rochester.

I am a member of local and state medical societies, as well as a fellow of the American Academy of Sleep Medicine and the American Psychiatric Association.

For medical students who are considering psychiatry, I recommend that they reflect carefully on their goals. This is an extraordinarily interesting occupation, and it often is very personally rewarding. However, the limits of our knowledge require us to be comfortable with ambiguity, and the dismantling of our mental health “system” will challenge those who enter this profession in coming years.

CARISSA GUNDERSON, MD ‘09 (PG ‘14)

As a clinical assistant professor in child and adolescent psychiatry at the University of Iowa Hospitals and Clinics in Iowa City, I primarily work with outpatients from ages 3 through 21. I see a variety of psychiatric disorders, including autism spectrum, mood, anxiety, disruptive behavior and psychotic disorders. I collaborate with psychologists and educational specialists to provide in-depth assessments. I also dedicate some time to intensive inpatient care.

I recall treating a young boy who had severe obsessive-compulsive disorder that was affecting all areas of his life. He had been removed from classmates and taught individually, and he spent most of his time performing rigid routines. His former mental health providers were considering intensive inpatient treatment. I started the boy on medication and introduced him to a psychologist who worked with him and his family. A year later, the boy has successfully re-integrated into the classroom, is thriving academically and making friends, and he no longer performs repetitive routines. Having a role in his success is incredibly gratifying.

In medical school, I enjoyed my third-year psychiatry rotation. The next year, I worked with the psychiatry consult liaison service under Dr. Burr Eichelman. I completed my general psychiatry residency and child psychiatry fellowship at UW Hospital and Clinics. There, I was greatly impressed by Dr. Peggy Scallon, who was adept at identifying and communicating methods to help families adjust their parenting in healthy ways. Dr. Hanna Stevens and I started and co-direct a child and adolescent psychiatry interest group, for which we received the Klingenstein Third-Generation Foundation grant. We will be part of the foundation’s Medical Student National Conference in 2016.

I find my field personally fulfilling and intellectually fascinating. I enjoy improving the lives of children and their families, and I am grateful to UW-Madison for my education and training experiences.
CLASS NOTES

compiled by Andrea Larson

We want to hear from you!
med.wisc.edu/shareyournews

CLASS OF 1998

Kyla R. Lee was appointed director of the Traditional Medical Students Program at Gunderson Health System in La Crosse, Wisconsin. She has directed Gunderson’s Internal Medicine Clerkship since 2002 and directs the Acting-Internship Experiences at her site. Lee is a staff physician and preceptor at an internal medicine clinic and the cardiacl stress lab, and an inpatient attending physician on the palliative care team. In her new role, she will provide oversight for Gunderson clerkship site directors who oversee traditional-track student experiences. She will facilitate connections among clerkship site directors for Gunderson and the UW School of Medicine and Public Health.

CLASS OF 2006

Michael Stadler was among five physicians chosen by the American Board of Medical Specialties Research and Education Foundation to participate in its 2015-2016 Visiting Scholars Program. The one-year, part-time program facilitates research projects designed to improve patient care and exposes scholars to the fields of professional assessment and education, health policy and quality improvement. Stadler is an assistant professor of ophthalmology and communication sciences at the Medical College of Wisconsin. His study will evaluate the use of care pathways to decrease redemissions of high-risk otolaryngology surgical patients.

CLASS OF 1986

David Cassidy was promoted in 2012 to Colonel in the U.S. Army Reserve shortly before accepting a position as medical director of the Grafenwoehr Army Health Clinic in Bavaria, Germany. During a deployment to Camp Zama, Japan, he was a guest instructor at the Nilson University Medical School Department of Medical English. In 2015, he received the Commander’s Award for Civilian Service by providing the leadership that led Grafenwoehr Clinic to its initial recognition as a Level 3 National Committee for Quality Assurance patient-centered medical home.

CLASS OF 1978

Robert Blink, who resides in San Francisco, was appointed to the California Occupational Safety and Health Standards Board. He has been an occupational medicine physician at Vista Oaksi Occupational Medicine since 2010 and chief executive officer and medical director at the Worksite Partners Medical Group since 1988. He was vice president and medical director at Workcare from 2004 to 2009, and he served as medical director and emergency physician at several locations before that.

CLASS OF 1976

Bill Charboneau received the Lawrence A. Mack, MD, Lifetime Achievement Award from the Society of Radiologists in Ultrasound. This award is given annually to an individual who has made outstanding and sustained scientific contributions to ultrasound. Charboneau is an emeritus professor of radiology at Mayo Clinic in Rochester, Minnesota.

CLASS OF 1967

William Gee was elected the 2015-2016 president of the American Urological Association. He is a clinical professor of surgery (urology), voluntary faculty, at the University of Kentucky College of Medicine in Lexington and an emeritus urologist at Commonwealth Urology, Lexington, Kentucky.

CLASS OF 1964

Ernie Pellegrino (who passed away after he submitted this information) painted a larger-than-life image of Bucky Badger on the garage door of his Vilas County, Wisconsin, cottage on Lake Manitowish as a lasting memory for his family, as he had stage 4 metastatic prostate cancer. Pellegrino is a retired orthopedic surgeon. He and his wife, Barbara, have three children, Mark, age 48, Ellen, 46, and Todd, 44. Pellegrino enjoyed singing with men and mied groups, painting in watercolor and acrylics, and writing. He authored the book A Doctor’s Path: Lessons I’ve Learned on My Journey through Practicing Medicine. He also was a prolific writer of letters to the editor of local and national publications.

LETTER TO THE EDITOR

In regard to the Alumni Profile about Carol Rumack, MD ’69, and Barry Rumack, MD ’68, in Quarterly, volume 17, number 3, Robert Lederer, MD ’67, wrote: “A story [the Rumacks] did not share involves their incredible generosity. Their children went to a local camp, and Barry got involved first as a camp doc and later as the board chair. While serving as a camp doctor, Barry noticed the rustic cabin we called a “health center.” He and Carol built a modern, new Rumack Health Center (pictured above) for the camp, which also serves as living quarters for the nurses who are at the camp all summer. It was a wonderful gift and has completely changed the health care experience at Geneva Glen Camp in Indian Hills, Colorado.”

IN MEMORIAM

William B. Hayden, MD ’49
Fresno, California
January 7, 2015

John A. Arkins, MD ’52
Phoenix, Arizona
July 31, 2015

Benton C. Taylor, MD (PG ’54)
Madison, Wisconsin
August 18, 2015

Note: Taylor’s family chose to direct memorial gifts to a Great People Scholarship at the UW School of Medicine and Public Health.

Philip A. Hoffman, MD ’57
Madison, Wisconsin
August 12, 2015

Emrie Pellegrino, MD ’64
Madison, Wisconsin
November 25, 2015

George A. Dahl, MD ’78
Madison, Wisconsin
August 22, 2015

Sandra A. Herabbage, MD ’89
Liverpool, Wisconsin
September 2, 2015

Andrew J. Brooke, MD ’94
Mequon, Wisconsin
September 25, 2015

Emeritus Faculty Member
Namullah Shafidi, MD
Bomba Springs, Florida
November 30, 2015

POST-GRADUATE

John Scott (PG ’84) and his wife, Candy, have been running to help raise funds and awareness for worthwhile causes since 2001, when they helped start the Bridge the Gap to Health Race in their hometown of Quincy, Illinois. In January 2016, they will travel to Myanmar with the Fellowship of Associates of Medical Evangelism’s (FAME) medical team. There, they will participate in the Yoma Yangon International Marathon at an indoor stadium (half marathon and 5K, respectively) to raise awareness of FAME. The medical team will conduct medical camps and community health training, hold a pastor training summit, and meet with and encourage Christians in Myanmar.
A

nold Lanehart “Bud” Brown, Jr., MD, dean of the University of Wisconsin Medical School (now the UW School of Medicine and Public Health, or SMPH) from 1978 to 1991, died on October 20, 2015, at his home in Rochester, Minnesota. He was 89.

When Brown became dean of the SMPH, the newly built Clinical Science Center (CSC)—which houses UW Hospital and Clinics—had just been completed on the west end of UW-Madison. An initial priority of his tenure was to ensure the safe and effective transfer of patient care activities from the old University Hospital at 1300 University Avenue to the new facility.

Brown provided exceptional leadership during a period of shifting funding, dramatic evolution of the medical school curriculum and expansion of the basic sciences and clinical science facilities.

SMPH Dean Robert N. Golden, MD, shares, “I did not have the great privilege to meet Dean Brown, but I am grateful for the honor of following in his deep and lasting footsteps. He was an outstanding dean and a deeply revered person.”

Known for his kindness and wry sense of humor, Brown was born in Wooster, Ohio, grew up in Battle Creek, Michigan, and graduated from high school in Elyria, Indiana. The arc of his career took him to some of the nation’s most prestigious medical institutions. He earned his medical degree at the Medical College of Virginia and completed an internship and residency at Rush Presbyterian Hospital in Chicago, following which he accepted a faculty position in pathology at Rush.

In 1959, he joined Mayo Clinic, where he became chair of the Department of Pathology and Anatomy and helped form the Mayo Medical School. There, he was active in cancer research and earned a national reputation, serving on and chairing councils and committees at the National Institutes of Health and National Cancer Institute. Brown moved from Mayo to the SMPH in 1978.

As dean, Brown appointed several influential faculty members and department chairs, including Philip Farrell, MD, PhD (PG ’72), and Paul DeLuca, Jr., PhD. Farrell joined the SMPH Department of Pediatrics faculty in 1977, became that department’s chair eight years later and served as the SMPH dean from 1985 to 2006. DeLuca joined as chair of the Department of Medical Physics, then moved up as the school’s vice dean for research and graduate studies before becoming the UW-Madison provost and vice chancellor for academic affairs from 2009 to 2014. Both hold UW-Madison emeritus positions.

“Bud Brown brought to UW-Madison the influence of an external force, Mayo Clinic—a major player in the U.S. medical environment, known for high-quality clinical services. He worked hard to elevate the status of our medical school and faculty on campus during a challenging era,” says DeLuca.

He adds that Brown also established strong working relationships with UW-Madison Chancellor Irving Shain, PhD, and chairs of numerous medical school and campus departments, and he placed a high priority on building connections throughout the Madison community and beyond.

Farrell and DeLuca note that Brown worked well with the clinical and research programs that had moved into the new hospital, led by UW Hospital and Clinics superintendent (later CEO) Gordon Denzer. Brown also bolstered the departments that remained at the Medical Sciences Center and enhanced that facility.

“Dean Brown shepherded the school through an era of significant growth,” DeLuca recalls.

Farrell describes Brown as an excellent mentor for department chairs and credits him with being a “balanced dean” who exhibited a high level of sensitivity for both clinical and basic science departments. He noted that, whenever possible, Brown encouraged recruitment of physician-scientists who could practice medicine and conduct research.

DeLuca agrees, noting that Brown helped elevate the SMPH academic enterprise from focusing primarily on teaching medical students and residents to contributing robustly to the intellectual knowledge of the university and nation through innovative research.

Deane Mosher, MD, former director of the Medical Scientist Training Program (MSTP)—which grants MD/PhD degrees and a professor in the Department of Biomedical Chemistry, shares, “Dean Brown, in his quiet and understated way, was behind the refounding of our MSTP in 1985. Given the long time between students’ matriculation and graduation with dual degrees, a decade passed before the program hit its stride. If new has grown to the size anticipated at the time of its refounding and is a great testimony to Dean Brown’s vision and support.”

There’s More Online! Visit med.wisc.edu/46951

Every day, we see at least one patient for whom we have no effective antibiotics,” said David Andes, MD, PhD (PG ’96), professor, Department of Medicine, University of Wisconsin School of Medicine and Public Health (SMPH). At the September 2015 Mini Med School, UW-Madison’s premier venue for public education of medical workforce candidates, Andes described antibiotic-related health concerns. Participants convened.

“The is no class of drugs that has had a greater impact on human health than antibiotics,” said Maki, adding that the danger of resistant superbugs looms large.

UW-Madison research transformed how hospital-acquired infections are prevented through lifesaving advances like barrier isolation and chlorhexidine.

Maki described discoveries by the late William Craig, MD (PG ’73), whose theories inform antimicrobial stewardship. Lepak shared how stewardship programs pioneered at UW-Madison extend drug lifespans.

“Limiting inappropriate antibiotic use is critical for fighting Clostridium difficile, which can proliferate in the gut of antibiotic-treated patients, causing debilitating diarrhea.

To recover, you must re-establish diversity of gut bacteria,” noted Safdar, adding that local microbiome transplants can halt the cycle.

Ultimately, the antimicrobial arsenal needs to be restocked. Together with Cameron Currie, PhD—the Iris Baiden Professor of Bacteriology—Andes leads a team that’s identifying chemicals produced during warfare between insects and microbes. They’ve found 30 promising antimicrobials so far and are moving forward quickly.

With good reason. These infectious disease specialists are physician-scholars who know that antibiotic resistance is a matter of life and death, and that solutions require humility, creativity and tenacity.
Teamwork Extends Beyond Football at Lambeau Field

SMPH EVENT HIGHLIGHTS STUDENTS AND PHYSICIAN MENTORS IN THE GREEN BAY AREA

by Kris Whitmoyer

The spectacular Lambeau Field in Green Bay, Wisconsin, hosted a unique team in late November. Like the stadium’s famed home team—the Green Bay Packers—this team’s players and coaches have emotional ties to Titletown and collaborate well in their field. Aiming to bolster health for the state’s residents and particularly for those in rural areas, the players are medical students enrolled in the Wisconsin Academy for Rural Medicine (WARM) at the University of Wisconsin School of Medicine and Public Health (SMPH). Its coaches are physicians who volunteer significant time and energy to mentor SMPH students in the WARM Program and those completing the WARM Program and those completing required third-year clerkships and fourth-year preceptorships.

“We have a very close-knit medical community in Green Bay, and the UW School of Medicine and Public Health is a key partner in our area,” shared Jen Erickson Foster, MD ’04, who—with along with Rolf Lulloff, MD ’67, and the Wisconsin Medical Alumni Association (WMAA)—co-hosted the reception and dinner at Lambeau. The event’s goal was to honor volunteer faculty members and students for their dedication to providing health care in rural areas, which face shortages of primary care and specialty physicians.

Partnering health care organizations in the region include Aurora BayCare Medical Center, Aurora Health Care, BayCare Clinic, Bellin Health Care Systems, Door County Memorial Hospital, Ministry North Shore Medical Clinic, Oneida Community Health Center, Prevea Health, St. Mary’s Hospital, St. Vincent Hospital and ThedaCare Medical Center-Shawano. More distant regional sites are in Sheboygan, Fond du Lac, Berlin and Wild Rose and a new site at Oneida Community Health Center.

Emcee Patrick McBride, MD ’90, MPH—the SMPH director of alumni relations and past president of the WMAA—donned two different Packers’ jerseys so he could “alternate between highlighting offense and defense” and thank the football team. He introduced the SMPH team’s “head coach,” Robert Golden, MD, dean, Robert Turell Professor in Medical Leadership and UW-Madison vice chancellor for medical affairs.

Like all good coaches, Golden cheered on the nearly 100 event participants, including students, alumni, donors, colleagues and friends from various health care organizations.

“Tonight is a chance for us to thank the remarkable teachers, advisors, role models and heroes who make such a difference in the lives of our students, the next generation of doctors,” he said. “These volunteers literally open their doors and hearts to our school’s academic mission. They are inspiring the best and brightest to follow in their footsteps by practicing in rural Wisconsin,” shared Golden. “This is a national example of the best features of academic medicine.”

Golden also shared inspiring student testimonials, anonymously, including:

“Green Bay provided an amazing experience for inpatient internal medicine. Dr. Bhatia, the clerkship director at Aurora BayCare, is one of the best attendings I’ve worked with this year. He not only taught us above and beyond the facts we needed to know, but he went out of his way to teach us about how to be physicians. He treated us as equals and pushed me when he knew I could be pushed.”

The Lambeau event particularly showcased the WARM Program, created in 2004 through funding from the SMPH’s Wisconsin Partnership Program. The four-year WARM Program falls within the school’s MD curriculum. Working directly with role models, students in their clinical years receive specialized training to practice in rural settings, which calls upon unique skills. WARM admits 26 students per year who intend to establish future medical practices in rural areas, ultimately to help improve the health of Wisconsin’s small towns and agricultural communities. Each student is assigned to one of three regional hubs—Green Bay, Madison or La Crosse—and also trains in the surrounding rural communities.

Since the first WARM students graduated in 2011, a total of 76 have graduated; 105 are now in the program. “WARM’s success has far exceeded our expectation in terms of graduates pursuing practice in rural Wisconsin. Much of it has to do with what they learn from mentors—beyond medicine—in terms of the joys and importance of being a community leader,” noted Golden. “Its graduates are the kind of doctors I would want for my family.”

He credited SMPH colleagues Byron Crouse, MD, associate dean for rural and community health and director of WARM, and Elizabeth Petry, MD ’68, senior associate dean for academic affairs and professor of pediatrics, for their diligence in fostering WARM’s success.

Golden also recognized Richard Ludgin, MD, and Paul Summerside, MD, who helped develop and implement the curriculum for SMPH students at Aurora BayCare. That system increased its number of WARM students from five to six and will expand to eight in 2016 due to demand.

Event guests enjoyed a WARM-related video that was filmed in Howards Grove, Wisconsin’s “Stars” of the video—including Catherine Best, MD ’88, a family medicine physician at the Aurora Sheboygan Clinic, Howards Grove, and James Rindl and Philip Mercier, third- and fourth-year WARM students, respectively—drew applause. In the video, Rindl said, “The School of Medicine and Public Health, by having these types of small communities that are willing to have students, is really staying true to its name and focusing on improving the health of every individual in the state, not just individuals close to the school.”

And Best noted, “Everyone knows there is a primary care shortage. We need to get as many physicians as possible into primary care, ideally in rural communities.” Golden introduced another “star player,” fourth-year SMPH student Hope Villiard—who grew up primarily in Bruce, Wisconsin, a rural County town of 700. Following her lifelong dream to become a doctor, she completed her undergraduate degree at UW-Madison and has spent two years in the WARM Program in Green Bay.

“I am continually reminded how wonderful it is to be a student in this program, and I look forward to giving back in the future as an alumnus,” shared Villiard, who said she also feels fortunate to have received financial support for her medical education through the Great People Scholarship and WMAA Scholarship. “I’ll never forget when Dr. Crouse called about my acceptance into WARM,” she said. “My third and fourth years in Green Bay have been incredibly rewarding.”

Of the Green Bay site, which has no medical residents, she noted, “Every one of my mentors was excited to teach and made me feel like an integral part of the team. I got one-on-one time with physicians, and I got a first-hand view in each rotation of what life as a physician looks like in a community setting.”

Villiard described how WARM students do eight-week primary care rotations in which they live, work and complete a community project in surrounding towns, including Sturgeon Bay, Howards Grove, Two Rivers and Manitowoc. While the WARM students would like to remain in Wisconsin for their residency and practice as a rural general surgeon in the state.

Thanking all participants, Golden noted, “Without you, we could not do the important work of improving the health of Wisconsin’s citizens.”

There’s More Online! Visit med.wisc.edu/187
Celebrated Champion of Public Health: DEAN G. SIENKO, MD ’83

Mark Twain may have been describing Dean G. Sienko, MD ’83, when he wrote, “Many people have no idea that his work would impact so many people.”

Sienko, who graduated from the University of Wisconsin-Madison in 1982, had no idea that his work would impact so many people. As an alumnus of the EIS Program who was highly respected in CDC circles—went a long way toward my acceptance,” reflects Sienko. He adds, “The Two Rivers investigation demonstrated to Dr. Davis my potential to serve as a medical epidemiologist. I suspect that he mentioned my work in the letter as an example of my enthusiasm and potential to be a successful EIS officer.”

Sienko completed a transitional internship at Chicago’s Cook County Hospital and entered the CDC’s BS and Preventive Medicine Residency in Atlanta, Georgia. He became a medical epidemiologist at the CDC and later at the Michigan Department of Public Health. His career also included service as the medical director and medical examiner at the Ingham County (Michigan) Health Department for 23 years and as the county health officer for five years.

As the county medical examiner, Sienko participated in virtually every sort of death investigation—homicides, suicides, accidents and sudden deaths—other than a mass casualty. In the wings, the military was ready to recruit Sienko, who had joined the Wisconsin Army National Guard during his third year of medical school.

“I went to the ROTC building to take my oath of office,” he says. “I sensed that afterward, Davis asked if I was interested in preventive medicine. I said, ‘I would love to be a flight surgeon. Saddam Hussein invaded Kuwait, and I was proud to serve. I was the senior U.S. medical commander—the first time the position was given to a reservist,’” recalls Sienko, who was promoted to brigadier general before serving as the command surgeon in Kuwait and Iraq in 2003; he was further promoted to major general in 2008.

“I had an energetic military career, but my family is most important to me,” Sienko says. He notes that his daughter, Carly, also has a connection to UW-Madison, where she played in the UW Marching Band at the 2011 Rose Bowl Parade during her senior year. Her brother, Peter, is a field artillery officer in the U.S. Army.

All children have followed in their father’s military footsteps. Carly is a lieutenant in the U.S. Navy; Peter, a field artillery officer in the U.S. Army, graduated from West Point in 2015; and Michael is a sophomore at the University of Michigan.

“Let your legacy leave behind is really in your children,” Sienko concludes.
McPherson Honored
WITH DISTINGUISHED ALUMNI AWARD

Aline McPherson, MD ’51, received the Wisconsin Alumni Association’s (WAA) Distinguished Alumni Award in fall 2015. The highest honor bestowed by the WAA, the award honors the most prestigious University of Wisconsin-Madison alumni for professional achievements, contributions to society and support of the university.

Since earning her undergraduate degree from UW-Madison in 1948 and medical degree from the UW School of Medicine and Public Health (SMPH) in 1951, McPherson has become one of the foremost retinal specialists in the world. In 1962, she moved to Houston, Texas, to begin practice as the world’s first full-time woman vitreoretinal specialist and established herself as a pioneer in the field.

Also in 1962, she founded Baylor College of Medicine’s retina service in conjunction with a private retina practice. She promoted her leadership, it has funded more than 1,000 grants and helped launch the careers of many major vision researchers in the United States and abroad.

Her vision, inspiration and support were critical in the establishment of the McPherson Eye Research Institute at the University of Wisconsin-Madison. She serves on the institute’s advisory board and has seen it gain international prominence.

McPherson has made many other impressive contributions to UW-Madison. For instance, she served for 12 years on the UW Foundation board of directors, was the founding president of the UW Ophthalmology Alumni Association and has established endowed chairs and lectureships.

A bronze bust and portrait of McPherson grace the SMPH. The school also named a state-of-the-art building in her honor.

"When I talk to medical students, it is critical to do something special by sharing her pearls of wisdom during her visit,” said McPherson, who continues to work nearly full-time, noted that her SMPH mentors, particularly William Middleton, MD, made a big impression on her in regard to discipline, fairness and truth. She described Middleton’s brown derby, which remains a symbol of the former SMPH dean who went on to lead the Veterans Administration in Washington, D.C.

“When Dean Middleton asked a student a question, and that student did not know the answer, he would toss the hat to the student, who would have to sign and wear it. When the class was finished, almost everybody’s signature was on it,” McPherson recalled.

Reflecting on another of his lessons, she said, “You have to make sure each patient goes away feeling like you’ve really done something for him or her. Learning to really listen to the patient is key because you want your patient to walk out of your office feeling that he or she has seen a caring doctor.”

According to first-year medical student Meagan Ladell, who participated in the 10th-annual UW School of Medicine and Public Health's (SMPH) induction ceremony each received a "Humanism in Medicine" pin and pledged to uphold the ideals of the society in their future medical practices.

Gold Humanism Honor Society
RECOGNIZES HUMANISM, COMPASSION, INTEGRITY, RESPECT AND SERVICE

The Arnold P. Gold Foundation established the Gold Humanism Honor Society (GHHS) to recognize rising fourth-year medical students who demonstrate exemplary attitudes and behaviors characteristic of the most humanistic physicians. The University of Wisconsin School of Medicine and Public Health (SMPH) inducted the following individuals in August 2015.

Medical Students
Elizabeth Abbs  
Kathryn Berndtson  
Sarah Brown  
Olga Diz  
Sara Drury  
Sean Fligel  
Matthew Gevelinger  
Paul Gill  
Katharine Greenfield  
Emily Haas  
Elizabeth Huffman  
Alano Jilani  
Evan Joyce  
Megan Ladel

GHHS Faculty Inductees
Charles Affier, MD ’12, resident, Department of Surgery, Section of General Surgery  
Claudia Reardon, MD ’06, assistant professor, Department of Psychiatry

Leonard Tow Humanism in Medicine Award
Laura Zakowski, MD ’90, associate professor, Department of Medicine, and Alpha Omega Alpha councilor for the SMPH

DeLuca Lauded
FOR VISION TO SUPPORT WIMR

Inside the gleaming Wisconsin Institutes for Medical Research (WIMR), visitors will see a new honorary plaque featuring a smiling Paul DeLuca, Jr., PhD. In person, he smiles as he describes the success of the complex he shepherded since its inception.

On behalf of the University of Wisconsin School of Medicine and Public Health (SMPH) and Oscar Rennebohm Foundation, the plaque lauds DeLuca for establishing WIMR and "nurturing a partnership with the Foundation that helped make the institutes a reality." Rennebohm Foundation Director Steve Skolaski organized the installation.

The Oscar Rennebohm Foundation and GE Healthcare-Milwaukee each provided $15 million to support construction of the first WIMR tower. Additional private gifts and state and federal funding have supported construction of the two WIMR towers.

UW-Madison Emeritus Professor DeLuca was the SMPH vice dean for research and graduate studies before serving as UW-Madison provost and vice chancellor for academic affairs from 2009 to 2014.

"Paul’s vision has helped accelerate the translation of research discoveries to clinical care and has engaged researchers from across the SMPH and UW-Madison—" says Richard Moss, PhD, the SMPH senior associate dean for basic research, biotechnology and graduate studies.
**STUDYING EARLY PREDICTORS OF PREGNANCY COMPLICATIONS**

Researchers at the University of Wisconsin School of Medicine and Public Health (SMPH) received a four-year, $4 million grant to study and develop imaging techniques to identify pregnancy problems at a very early stage. The National Institute of Child Health and Human Development awarded the grant to Dinesh Shah, MD, professor, Department of Obstetrics and Gynecology (OB/GYN), and Oliver Wieben, PhD, associate professor, Department of Radiology, who are the principal investigator (PI) and co-PI, respectively.

Anna Huttenlocher, left, and Ned Kalin, right, received the Anna-Monika Prize from the European College of Medical Sciences. Huttenlocher is a SMPH faculty member, and Kalin is a SMPH Department of Psychiatry, earned his medical degree at Thomas Jefferson Medical College. He directs the Health Emotions Research Institute. Additionally, Kalin recently received the Anna-Monika Prize from the European College of Neuropsychopharmacology for his major scientific contributions to the understanding of neurobiological mechanisms of depression. Huttenlocher also directs the SMPH Medical Scientist Training Program, which combines medical education and PhD-level research training. Kalin’s pre-clinical and clinical investigations focus on how brain activity, environmental factors and genetics contribute to fear, anxiety and depression in children. His work has been particularly valuable in uncovering the biology of childhood anxiety, a contributing factor to developing adolescent and adulthood depression, substance abuse and anxiety disorders.

**HUTTENLOCHER, KALIN ELECTED TO NATIONAL ACADEMY OF MEDICINE**

Unije Allen (left) and Antone Washington (right) received the Anna-Monika Prize from the European College of Medical Sciences. Huttenlocher also directs the SMPH Medical Scientist Training Program, which combines medical education and PhD-level research training. Kalin’s pre-clinical and clinical investigations focus on how brain activity, environmental factors and genetics contribute to fear, anxiety and depression in children. His work has been particularly valuable in uncovering the biology of childhood anxiety, a contributing factor to developing adolescent and adulthood depression, substance abuse and anxiety disorders.

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Kalin, the Hedberg professor and chair of the Department of Psychiatry, earned his medical degree at Thomas Jefferson Medical College. He directs the Health Emotions Research Institute. Additionally, Kalin recently received the Anna-Monika Prize from the European College of Neuropsychopharmacology for his major scientific contributions to the understanding of neurobiological mechanisms of depression.

**SEKING IMPROVED STROKE OUTCOMES**

A team of researchers in the University of Wisconsin School of Medicine and Public Health’s (SMPH) Departments of Medical Physics and Radiology led by Guang-Hong Chen, PhD, received a Quantum Grant from the National Institute of Biomedical Imaging and Bioengineering. The $3 million grant will support researchers’ efforts to drastically reduce the treatment time for ischemic stroke.

By combining the diagnostic and therapeutic phases of treatment, the researchers hope to decrease patients’ time to treatment and improve outcomes. Currently, diagnostic imaging occurs in the computed tomography (CT) or magnetic resonance imaging suite, while treatment is carried out via angiography. Stroke victims lose up to 2 million neurons per minute until blood flow to the brain is restored.

**ARBUCKLE NAMED DIRECTOR OF NATIVE AMERICAN CENTER**

Jackie Lynn Arbuckle, MD ’96 (left photo), clinical associate professor in the University of Wisconsin School of Medicine and Public Health (SMPH) Department of Surgery, has been selected to serve as the new director of the school’s Native American Center for Health Professions (NACHP). Arbuckle, a general surgeon who practices at multiple UW Health locations, is a native of Spooner, Wisconsin, and grew up on the St. Croix reservation. She earned her medical degree from the SMPH and completed her internship and residency in surgery at the Lahey Clinic in Massachusetts.

“ar are delighted to have Dr. Arbuckle fill this vitally important leadership role,” says Robert N. Golden, MD, dean of the SMPH. “Our Native American Health Center is a highly valued program, and Dr. Arbuckle’s leadership, experience and leadership skills will help accelerate the center’s progress.”

The NACHP aims to recruit more Native students and faculty and improve their experience on campus; establish strong Native health educational opportunities; and grow the Native health academic programs. The school recently added an elective for fourth-year students at the Oneida Community Health Center. The NACHP recently developed an advisory council that consists of tribal leadership from five of Wisconsin’s tribal communities: Oneida Tribe of Indians of Wisconsin, Menominee Nation, Ho Chunk Nation, Stockbridge-Munsee Band of Mohican Indians and Lac du Flambeau Band of Lake Superior Chippewa Indians.

In 2012, Arbuckle received a UW-Madison Outstanding Woman of Color Award, in part for her successful efforts to diversify the general surgery faculty and surgery residency program at the SMPH. That year, she also received the Outstanding Educator Award from UW System.

Christine Altmann, MD (right photo), is the NACHP assistant director. She grew up on the White Earth Indian Reservation in northwest Minnesota and is a descendant of the White Earth Tribe of Ojibwe. She earned her medical degree and completed her residency at the University of Minnesota. She is a clinical assistant professor in the SMPH Department of Family Medicine and Community Health.
Celebrating a Bond Between Clans

J.P. CULLEN GIFT WILL PROMOTE BRAIN-REPAIR RESEARCH

by Susan Lampert Smith

The Health Sciences Learning Center recently hosted a gathering of two “families” of different types of builders. Clan Cullen—headed by J.P. Cullen, chairman emeritus of the Janesville, Wisconsin, construction company—celebrated his 90th birthday by presenting a $250,000 check from the J.P. Cullen Foundation to the Department of Neurological Surgery at the University of Wisconsin School of Medicine and Public Health (SMPH). The gift will support research related to helping the brain recover from illness and injury.

J.P. Cullen and Sons has built or renovated many of UW-Madison’s most iconic buildings, including Camp Randall Stadium, Bascom Hall, the Education Building and the old University Hospital, now called the Medical Sciences Center. The Department of Neurosurgical Surgery has built an international reputation for surgical skill, research, teaching and international outreach under the leadership of Robert Dempsey, MD, noted SMPH Dean Robert N. Golden, MD.

"By providing this gift, the Cullen foundation is really providing the gift of life, not only to patients at UW Health, but to patients around the world who will benefit from leaders who have trained here, and discoveries that are made here," Golden shared.

The gift symbolizes a decade-long bond between two remarkable Irishmen: J.P. Cullen and Dempsey.

Mark Cullen, company chairman and J.P. Cullen’s son, said the elder Cullen and Dempsey met 10 years ago, when J.P. Cullen began seeing double and feeling dizzy. A longtime friend of the Cullens, the late UW Regent George Steil, Sr., suggested that Cullen consult with Dempsey. Mark Cullen said subsequent medical imaging showed that his father had a large brain tumor, which Dempsey removed during a long, successful surgery.

"Dr. Dempsey really took my father under his wing and treated him with the respect that is due to a World War II combat veteran," Mark Cullen said.

After that, their friendship grew, with the Cullens inviting Dempsey and his wife, Diane, to watch Badger football games with them at Camp Randall Stadium.

In 20 years, Dempsey has expanded the Department of Neurological Surgery to include 30 neurosurgeons and to pursue research efforts in brain tumors, stroke, trauma, spinal disorders, pain and central nervous system disorders. The department also coordinates the National Institutes of Health’s Stroke Network research in the upper midwest.

At the fall 2015 celebration of Clan Cullen’s gift to further support these efforts, Dempsey described a “family we call neurosurgery.” The department was built by hard work, dedication to goals and hiring excellent people, he noted, and its neurosurgeons are “worldwide leaders who give people hope for difficult, often impossible problems.”

That concern for patients extends far beyond the operating room, to places like Green Lake, Wisconsin, where UW Health sponsors an annual camp for stroke survivors and their caregivers, Dempsey shared.

Spending time with patients and seeing the tremendous burden stroke puts on the entire family “shows me that we have to do better,” Dempsey said.

This drive for improvement runs through all the department’s sub-specialties, he added.

“IT’s the future we look for,” he concluded. “We do not just stop at disease. We protect the developing brain and repair the ones that have been injured. We’re thinking of the next generation, our children, the sixth generation of the Cullens—and we want them to be healthy for a long time.”

Dempsey also gave a gift “from one Irishman to another.” He presented J.P. Cullen with an Irish walking cap embroidered with the Department of Neurosurgical Surgery logo, thus making the head of Clan Cullen an honorary member of the “neurosurgery family.”

Rounding out the Cullens’ visit to the SMPH, Dempsey guided a tour of the neurosurgery research laboratories and Neurological Intensive Care Unit, where survival statistics are double the national average.

Opposite page: J.P. Cullen (left) dons an Irish walking cap that was a gift from Robert Dempsey, MD (right). Above (left to right): Front row: Carol Cullen, J.P. Cullen, Haley Cullen, Joyce Liau, Joanne Cullen-Schultz. Middle row: Mary Cullen, Sarah Schimek, Betty Ryan Douglas, David Cullen, Mark Cullen. Back row: Richard Cullen, George Cullen, Sean Cullen, Daniel Cullen, Kris Schultz.
Matching Fund Campaigns

FOSTER SUCCESS FOR FACULTY MEMBERS AND STUDENTS

A time when private support of medical education is more important than ever, two major matching gift programs are helping tremendously. University of Wisconsin School of Medicine and Public Health (SMPH) Dean Robert Golden, MD, notes that several of the school’s departments and faculty members have received a major boost from private donors whose money was doubled through John and Tashia Morgridge’s historic matching gift to UW-Madison.

The Morgridges’ donation of $100 million in matching funds is the largest individual gift in UW-Madison’s history. It aims to attract an equal amount of support for endowed chairs and professorships throughout the university. The couple has made numerous other significant gifts to UW-Madison—their alma mater.

“This funding is critically important for our ongoing recruitment and retention of top leaders in numerous areas. We are very grateful to our alumni, friends and faculty who contributed to this game-changing program, and we will be forever grateful for John and Tashia’s partnership in building this legacy,” exclaims Golden.

The SMPH exceeded its goal by raising more than $17 million. Together with the Morgridge match, this created $35 million more than $17 million. Together with the Morgridge match, this created $35 million.

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John and Tashia’s partnership in building this game-changing gift that was committed by mid-June 2015.”

He adds, “Our school was given the goal of attracting $15 million in new gifts. The university achieved its $100 million goal in about seven months, and John and Tashia then lifted the cap, pledging to match every gift that was committed by mid-June 2015.”

The SMPH is celebrating the gifts received through the Morgridge match as it pursues the opportunities created by the Nicholas gift. An example of a Morgridge match at the SMPH is the substantial donation by Susan F. Behrens, MD ’75, FACS, and her husband, David Look, who funded a professorship for Carla M. Pugh, MD, PhD, FACS.

Now the Susan Behrens Professor of Surgery Education, Pugh also is the vice chair of education and patient safety in the SMPH Department of Surgery and the clinical director of the UW Health Clinical Simulation Program. She earned her medical degree and completed a surgery residency at Howard University, an acute care surgery fellowship at the University of Michigan and a doctorate of education at Stanford University. Her many honors include the Presidential Early Career Award for Scientists and Engineers.

A prolific researcher and inventor, Pugh is training the next generation of doctors and surgeons using a new synthetic model that brings together engineering and medicine. Behrens earned her bachelor’s degree at UW-Madison and her MD from the SMPH. She completed her surgery residency at Gundersen Health System in La Crosse, Wisconsin, and a fellowship in colon and rectal surgery at Ferguson Clinic in Grand Rapids, Michigan. Now retired, she practiced general surgery in the Beloit Health System, in Beloit, Wisconsin. Look earned his bachelor’s degree in marine biology and an MBA at the University of Oregon.

Breaking through the gender stereotypes of her field, Behrens has experienced many firsts. For instance, she was the first woman to complete a surgery residency in Wisconsin and to practice surgery in the state, the first woman to serve as the president of the Federation of State Medical Boards of the United States, and the first woman to chair the Wisconsin Medical Examining Board.

She credits mentors for inspiring her to enter surgery, a “man’s field” at the time, and notes, “It is meaningful to me that the first person to hold this professorship is a woman who is blazing trails in surgical education.”

Golden shares, “We are so grateful to Dr. Susan Behrens and David Look for their generous gift, which inspires all of us at the SMPH to fulfill our school’s missions in innovative ways.”

For more information, please contact Jill Watson, UW Foundation, at (608) 262-4632 or j.watson@uwfoundation.org.

SMPH Units that Received Morgridge Match Chairs and Professorships

DEPARTMENTS
- Emergency Medicine
- Medical Genetics
- Neurological Surgery
- Obstetrics and Gynecology
- Ophthalmology and Visual Sciences
- Pediatrics
- Surgery

INSTITUTES AND CENTERS
- Carbone Cancer Center
- McGinnis Eye Research Institute
- Wisconsin Alzheimer’s Institute

SECTIONS
- Allergy, Pulmonary and Critical Care Medicine
- Cardiovascular Medicine
- General Surgery
- Hematology and Medical Oncology
- Infectious Disease
- Otolaryngology-Head and Neck Surgery
- Pediatric Surgery
- Plastic and Reconstructive Surgery

GIVING BACK

MISTRETTA RECEIVES BELZER AWARD

At the fall 2015 Middleton Society dinner, University of Wisconsin School of Medicine and Public Health’s (SMPH) leaders thanked the school’s most loyal supporters for their role in sharing gifts during these challenging economic times. Dean Robert N. Golden, MD, explains, “Our university and school have been hit with repeated, substantial cuts to our state budget, which for the SMPH has shrank to the point where state support accounts for only about 10 percent of our expenditures.”

He adds, “But this also has been a remarkably exciting and productive year for the school, and our future has never been brighter as we continue to advance in all of the missions at your UW School of Medicine and Public Health.”

Guest speakers were Carla M. Pugh, MD, PhD, FACS, the Susan Behrens Professor of Surgery Education, vice chair of education and patient safety in the SMPH Department of Surgery, and clinical director of the UW Health Clinical Simulation Program; and Susan F. Behrens, MD ’75, FACS, a retired surgeon from Beloit, Wisconsin.

Pugh’s talk highlighted her innovative work that inspired Behrens and her husband, David Look, to create Pugh’s professorship through the Morgridge match (see opposite page).

Also that evening, Golden bestowed the school’s highest award, the annual Belzer Award, on Charles Mistretta, PhD (photo at right), professor, Departments of Radiology and Medical Physics. The award honors distinguished faculty members for lifetime achievement of contributions to the SMPH and beyond. It is named for Folkert Belzer, MD, the former chair of the SMPH Department of Surgery.

Mistretta earned his doctorate in high-energy physics from Harvard. In 1971, he joined the SMPH and has made seminal discoveries that transformed the practice of medicine. His studies of dual energy X-ray imaging led to the development of a real-time digital image processor, which set the stage for creation of digital subtraction angiography. His technology, applied worldwide, ranks second among inventions in UW-Madison’s history in terms of patent royalties brought to campus. Mistretta turned his attention to magnetic resonance angiography in the 1980s.

Mistretta has mentored more than 55 graduate students and postdoctoral fellows. Among his many honors, he has been designated as “one of the 50 medical physicists with the most impact on the field in the last 50 years” by the International Congress of Medical Physics.
Researchers Tackle Blinding Eye Disease

Researchers at the Wisconsin Eye Research Institute (WERI) at the University of Wisconsin School of Medicine and Public Health (SMPH) have used a custom stem cell model of a rare but blinding eye disease to test whether a commonly used drug might offer hope for treatment.

In 2012, the researchers for the first time took skin cells from patients with Best disease and used induced pluripotent stem cells (iPSC) technology to turn them into retinal cells that mimicked the disease. This second study showed the next steps in the research. David Gamm, MD, PhD (PG ‘02, ’03) (photo at left), associate professor in the SMPH Department of Ophthalmology and Visual Sciences and head of the lab that worked on the study, says there is no cure for Best disease, but the new study showed that customized stem cells can help patients by testing the effects of drugs. Gamm is the Emmett A. Humble Distinguished Director and the Sandra Lemke Trout Chair in Eye Research of the MERI.

Best disease is an inherited type of macular degeneration that causes slow loss of central vision. It often is diagnosed in childhood while vision is still good, so there is ample time to intervene if an effective treatment to slow the disease can be identified.

“This research showed that the drug valproic acid was able to improve certain functions of retinal cells affected by Best disease,” Gamm says about the study, which was led by Rachna Singh, PhD, an SMPH postdoctoral associate at the time.

Anti-Cancer Drugs Enhance Effectiveness of Radiation

Giving cancer cells a double hit with radiation and molecular targeting drugs could lead to better patient outcomes and possibly lower radiation doses, according to two studies by University of Wisconsin Carbone Cancer Center (UWCCC) scientists.

During treatment, radiation is directed at tumors with the goal of lethally damaging the dividing cancer cells. Some cancer cells survive, however, and nearby healthy cells can be affected, leading to unwanted side effects.

“The goal is to identify new molecular targeting drugs that increase the effectiveness of radiation and thereby decrease the radiation required,” says Paul Harari, MD, professor in the UW School of Medicine and Public Health Department of Human Oncology and senior author. “These studies bring cutting-edge molecular inhibitors to the forefront, with the hope they can be used in combination with radiation to benefit cancer patients.”

Shy-Min Huang, PhD ’97, and Harari lab colleagues examined a promising new drug that promotes activity of the anti-growth protein p53, which normally signals damaged cells to stop growing but is blocked in many cancer types. In a second paper, they focused on a drug that targets two crucial proteins of the epidermal growth factor receptor family that are overactive in poor-prognosis head and neck cancers.

“Radiation is putting on the gas, and inhibitor drugs are removing the brakes. They synergize nicely,” says lead author Lauryn Werner.

Both studies were published as featured articles in the September 2015 issue of Molecular Cancer Therapeutics.

Biomarkers Could Improve Breast Cancer Treatment

Wei Xu, PhD (photo at right), and other researchers at the University of Wisconsin School of Medicine and Public Health (SMPH) have identified how some breast cancers develop resistance to chemotherapy drugs that typically are successful at killing cancerous cells during initial treatment.

“When anti-cancer drugs, even those that have been in use for a while, we don’t know how the drug resistance is caused,” says Xu, professor of oncology and head of the lab. “For anti-cancer drugs, even if it is the target, there is no cure for Best disease.”

In 2012, the researchers identified a new CARMA1 target, a protein called MED12. In breast cancer cell lines, the ability of MED12 to be chemically modified by CARMA1 determines whether cells will be sensitive or resistant to a common breast cancer chemotherapy treatment, they found.

“This chemical modification of MED12 can sensitize the cells to antimetabolite drugs, including one commonly used in breast cancer, Fluorouracil (5-FU),” Xu notes. “If MED12 cannot be modified by CARMA1, or if MED12 is not expressed, then the cancer cells are resistant to 5-FU and survive treatment.”

Charles Heidenberger, PhD, a former McArdle Laboratory faculty member, first synthesized 5-FU in 1956.

This research identifies the potential of using the expression of MED12 and its ability to be modified by CARMA1 as a biomarker before and during treatment to help researchers determine whether to continue a treatment or change course. A Department of Defense Era of Hope Award funded the research.

New Technique Helps Explore Rhythm Of Genes

Researchers who developed a new statistical approach, called iOscope, to identify and characterize the rhythm of genes across the entire genome using single-cell RNA sequencing. Kendziorski is a professor in the University of Wisconsin School of Medicine and Public Health’s (SMPH) Department of Biostatistics and Medical Informatics.

To study these cycles using traditional technologies, researchers must synchronize a whole population of cells so they are at the same state. Unfortunately, exact synchronization isn’t possible for many cell types and conditions. However, new RNA sequencing technology allows scientists to probe the genome-wide expression of a single cell. When the cell is harvested for sequencing, it is destroyed in the process so it can’t be sequenced again to uncover an oscillating gene pattern. But with that single-cell information, researchers were able to “reorder” unsynchronized cells and uncover a pattern of expression.

The project melded the statistical strengths of Kendziorski’s lab with the cell biology expertise from the lab of James Thomson, PhD, stem cell pioneer at UW-Madison and director of regenerative biology at the Morgridge Institute for Research. Thomson also is a John D. MacArthur Professor at the SMPH.

“After looking at average gene expression for more than a decade, the ability to see genome-wide gene expression in individual cells is particularly exciting. Unfortunately, we have only a snapshot, and that’s the tricky part. We want to study oscillatory gene expression, but we don’t have time-course data,” explains Kendziorski.

“We developed a statistical method that would allow us to look at oscillatory genes and reconstruct one cycle of their oscillation that doesn’t involve time-course experiments or synchronization.”

The study was published in Nature Methods.
The basic sciences provide essential foundations for virtually all missions of our academic medical center at the University of Wisconsin School of Medicine and Public Health (SMPH). Research in biomedical, population, and social sciences generates fundamental knowledge that leads to greater understanding of biological processes and social systems, and it establishes a framework for understanding the determinants of health and disease in individuals and populations.

In the past decade, advances in technology and research methodologies have given rise to exciting opportunities for pursuing basic and applied research problems in new and different ways. Advances in genome editing, imaging, and genomics are driving entirely new areas of inquiry. Many of these approaches require cross-disciplinary, statistical or computational capabilities that are strengths of our school and campus. Leveraging our strengths—while building strategically in areas like human genetics and precision medicine—is essential if we are to lead in priority areas such as healthy aging, neurodegenerative diseases, cancer and metabolic diseases.

Regrettably, in the years since the doubling of the National Institutes of Health (NIH) budget was completed in 2003, federal support for research has not kept pace with inflation, and grant funds have been reallocated by NIH institutes to support researchers. It also placed a greater emphasis on “team science” as a means for increasing research funding and speeding the pace of discovery.

Our school has a rich history of achievements in research, including notable contributions to the understanding of complex systems ranging from molecules to cells and organs, as well as from individuals to communities and populations. Most often, these achievements have relied on the vision and efforts of a single faculty member leading a small, focused research group of trainees and staff. Today’s reality is that research problems are increasingly challenging due to the discovery of greater than expected complexity of biological systems and compelling evidence that these systems are influenced by environmental and social factors. In the face of such challenges, the search for new understanding often can be accelerated by multi-investigator teams whose members bring different perspectives and approaches to a problem. Assembling teams that can apply cross-disciplinary expertise to a research problem can also enhance competitiveness for extramural funding.

We are committed to developing new processes and administrative platforms to promote research success and collaborative science. There is pressing need to continually assess our resources and engage in planning to ensure that we pursue promising, innovative research and support our researchers in these endeavors. One strategy—which is being initiated as a result of the recent schoolwide planning process—is to involve faculty members in an implementation committee charged to advise Dean Robert N. Golden, MD, and the Office of Basic Research, Biotechnology and Graduate Studies on issues related to the basic research enterprise.

Our remarkable faculty, staff and research trainees share a passion for discovery, a commitment to innovation and collaboration, and a dedication to research training. Thus, the future promises high-impact discoveries in fundamental research areas such as organismal development and aging, cancer biology, metabolism, neurobiology and tissue regeneration—with downstream benefits to science, medicine and public health!

Richard L. Moss, PhD
Renebohm Research Professor in Cell and Regenerative Biology
Senior Associate Dean for Basic Research, Biotechnology and Graduate Studies

SUBJECT: FACTS AND FIGURES
Each year, the University of Wisconsin School of Medicine and Public Health (SMPH) admits more than 300 students to its health professions programs. Learn some fun facts about the new students by checking out an infographic at med.wisc.edu/47103.

SUBJECT: VOCAL CORD BREAKTHROUGH
Nathan Welham, PhD, associate professor of surgery, and his colleagues from UW-Madison have become the 3rd in the world to grow functional vocal cord tissue in the laboratory, a major step toward restoring a voice to people who have lost their vocal cords to cancer surgery or injuries. How did they do it? Watch this video to see a demonstration: med.wisc.edu/47135.

SUBJECT: RURAL MEDICINE
The Wisconsin Academy for Rural Medicine (WARM) seeks to increase the number of physicians practicing in the state’s rural communities. WARM’s success is due in part to the partners in the SMPH statewide campus who provide valuable training to medical students. Learn more by watching a video at med.wisc.edu/warm.

SUBJECT: E-NEWSLETTER
You can stay up to date on the latest happenings at the SMPH by signing up for the monthly SMPH e-newsletter. The newsletter contains the latest education news, research advances and more. Subscribe at med.wisc.edu/enews.
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