According to the old phrase, opportunity comes knocking every now and then. It’s characteristic of a leader to welcome what that caller brings, and encourage future visits. As she looks back on ten years at the helm of the College of Medicine’s Department of Medicine, Polly Parsons, M.D., can chart a lengthy list of both the opportunities that have presented themselves, and those she’s found and invited in. In that time the department has flourished, with many new members, new innovative education initiatives led by faculty, and research across the department’s eleven divisions that continues to make its mark nationally.

That is no small feat considering today’s competitive research climate and the usual tug-and-pull clinician-scientists deal with when balancing careers in both patient care and research. For the Department of Medicine, this success has been built in large part on forging ahead into new territory.

Recruiting and retaining motivated and talented faculty members has led to a robust research program within her department. Despite the increased competition for decreasing research resources, her department’s extramural research support has maintained an annual funding level of approximately $20M per year for the last five years. Over the past decade, faculty have published over 300 manuscripts, reviews, chapters and books. Some travel the world for speaking engagements and to serve on high profile national committees. Parsons’ goal is to foster a department that nurtures new talent, and stays nimble enough to respond to rapid change.

“If you provide the right environment, people will flourish.”

— Polly Parsons, M.D.
Polly Parsons, M.D.

S E L E C T E D  H O N O R S

Selected as the Who’s Who in the American Thoracic Society for October 2006
American Thoracic Society Distinguished Achievement Award: May 2013

The Path to Medicine

Coming to UVM was a sort of journey home for Parsons, though with a long detour in between. She was born in Dorset, Vt., but her father’s career as a geologist kept her family on the move. They settled for a time in California and British Columbia, before they wound up in Bangor, Maine, where Parsons graduated high school. She completed her undergraduate degree in biology at Radcliffe College. Medicine was one of several career options Parsons considered as an undergraduate at Radcliffe; for a time, she thought she would go to law school. She also considered a career as a field researcher in biology, but when she tried to picture living the life of legendary biologist Jane Goodall, it lacked the interaction with people she craved. Combining research and patient care seemed like an option that matched her scientific bent and desire to make a difference in the lives of patients. Volunteer work at a health clinic as an undergraduate sealed her decision.

She went west for medical school in 1975, to the University of Arizona College of Medicine. Although the program there had an outstanding reputation, the decision was in part pragmatic: Her parents were living there at the time. When she attended in the late 1970s the school had a three-year M.D. program, which she finished on time, despite a schedule she describes with a chuckle as “a little intense.”

After graduating from medical school in 1978, she headed to the University of Colorado Medical Center for a residency in internal medicine. She then spent one year as a research fellow at the National Jewish Hospital and Research Center in Denver, followed by three years as a fellow in pulmonary medicine at University of Colorado Health Sciences Center, an institution that is world renowned for its leading-edge research in pulmonary and critical care medicine. UVM Professor of Medicine Charles Irvin, Ph.D., who was on the faculty at the University of Colorado Health Sciences Center when Parsons became a pulmonary fellow there, characterizes it as one of the most competitive programs in the country. In a field notoriously dominated by men, women were anomalies in such programs at that time.

“For her to get that fellowship put her apart from other people,” Irvin says. “She distinguished herself in so many ways during that training.”

Parsons joined the lab of Peter Henson, D.V.M, Ph.D., who had a robust research agenda related to the basic cell biology of acute lung injury. She soon found herself in the thick of what was then a new field: Translational research. Her dual skill set — as a clinician and researcher — put her in a prime position to excel and help shape the field. It also provided leadership opportunities when she was quite young — including running a project and a clinical core for a large NIH grant while still a very junior faculty member. She rose to the challenge. Says Parsons: “As an M.D. scientist, I was able to engage on the clinical side and I had the expertise in basic biology. It was a nice niche for me.”

In 1985, she was invited to join the faculty at the University of Colorado Health Sciences Center. She also became a staff physician at Denver General Hospital (now Denver Health Medical Center), quickly rising through the ranks. By 1991, she was co-director of the Medical Intensive Care Unit (MICU), and took over as director of the MICU in 1993. She served in that role for seven years. Leading the intensive care unit for one of the major trauma centers in the country requires a certain knack for calm in the face of uncertainty, as well as a keen appreciation for colleagues’ abilities. She found a strong team in Denver.

“Atop the hospital came together to make things happen,” Parsons says. “It was a spectacular place to practice clinical medicine.”

On the personal side, she married fellow physician James Jacobson, M.D., in 1987. They welcomed their first child, a son named Alec, in 1990, followed by son Chandler in 1995. There may be shades of a woman bent on “having it all” in her story, but Parsons is quick to point out that her husband — a psychiatrist with an equally busy schedule — did just as much juggling of career and family life. Together, she said, they struck a balance.

Parsons’ research quickly put her on the national stage. She played a key role in the National Institutes of Health-funded ARDS Network, a group focused on Acute Respiratory Distress Syndrome, a mysterious condition affecting mostly critical care patients. Through large, multicenter clinical trials, the network made important discoveries related to improving treatment and reducing mortality. Parsons worked on the pathogenesis committee, serving as chair from 1997 to 2006. Through the ARDS Network she had the opportunity to collaborate with Michael Matthay, M.D., now a professor of medicine and anesthesiology at the University of California at San Francisco, on dozens of studies over the years, including some important publications that identified biomarkers for acute lung injury and acute respiratory distress syndrome.

“Polly was a dynamic and bright force in the network,” says Matthay, who points out that her influence has stretched over the course of two decades. “She was an excellent translational researcher before that term was widely used.”

As she rose through the ranks, she also mentored younger researchers as they navigated their careers. Marc Moss, M.D., now a professor of medicine at the University of Colorado and section head of critical care medicine at the University of Colorado Medical Center, was one such mentee. He completed a pulmonary and critical care fellowship at the University of Colorado when Parsons was a faculty member there. In that role he was 20 plus years ago, and [Parsons] is still an effective and approachable mentor for me,” he says.

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Not only has Parsons served as an important sounding board for scientific questions but, Moss points out, she also helped at a critical juncture in his career, when he was deciding whether to move back to Colorado after eleven years at Emory University. It was a big move for him and his family, and her ability to balance listening with some quiet encouragement helped him to decide to make the move. “She’s a good motivator,” he says. “She’s inspirational in that way.”

Marvin Schwarz, M.D., now the James C. Campbell Professor of Pulmonary Medicine at the University of Colorado Health Sciences Center, and division head for pulmonary sciences and critical care medicine when Parsons was there, says she’s seen an outstanding alum who in many ways helped to pave a path for women in the field by virtue of her career trajectory as a researcher, physician, and academic leader. “We personally brag about Polly as being one of our graduates,” he says.

**Building a Program in Vermont**

When Dr. Charles Irvin came to the UVM College of Medicine in the late 1990s to help build the research program for the Vermont Lung Center, he found himself on the look-out for a new chief for the Division of Pulmonary and Critical Care Medicine. The “ideal person” for the job immediately sprang to mind from his days at the University of Colorado. After a national search, Parsons rose to the top and although Stapleton was ready for Parsons to take over, Parsons’ selection was a sign of the times. “She’s inspirational in that way.”

Parsons was elected secretary-treasurer of the American Thoracic Society. Outgoing ATS president for the 2018–2019 term, she is wrapping up a three-year term on the NIH’s National Heart, Lung and Blood Advisory Council, and this spring served as a key member of the prestigious NIH review panels and national associations. She has been a mentor, says Stapleton. “She’s a great mentor and also a great career insight but she’s also a great career mentor.”

Almost ten years into her tenure, Parsons says she has seen some promising changes when it comes to gender equity. At Radcliffe as an undergrad in the 1970s, she and her classmates had big goals, but it took until now to achieve them. “We were ready, but nobody told the world,” she says. “We had to let the world adapt.”

It has taken decades, but she sees significant changes when it comes to gender equity. “Seeing ‘opportunity’ at every turn in the road is easier when there’s a motivated and capable team with you moving forward,” she says. “I can think of no better person to lead us than her. She’s the only person I’d want running the show.”

**New Challenges, New Opportunities**

In 2005, then department chair Burton Sobel, M.D., stepped aside to concentrate on cardiovascular research, and Parsons was tapped as interim chair. After a year, she added her name as a candidate in the College’s national search. She was appointed E.L. Amidon Professor and Chair of Medicine in 2006. Parsons is part of a relatively small group of women leaders in medicine. According to a recent report from the Association of American Medical Colleges, women held about 15 percent of department chair positions nationwide in 2013–2014, up from 10 percent one decade earlier. For internal medicine chairs, women held just 12 percent of seats nationally.

“Let’s put key pieces in place and be ready.”

**Adaptation & Innovation**

Academic medicine faces some unique pressures at present, Parsons notes, including more of an emphasis on the clinical side of the mission, in large part because of financial challenges facing medical centers nationwide. This means that as chair of a large and diverse department like medicine, she’s often faced with helping physicians continue to deliver excellent patient care while making sure education and research stay at the fore. Parsons says her approach is to adapt programs to fit and have an outstanding team of people ready to make new things happen.

“Things are changing really fast and in a lot of different ways,” she says. “Let’s put key pieces in place and be ready.”

SPARK VT is one such initiative, launched as a pilot in late 2012. Inspired by a program developed at Stanford University, SPARK VT asks faculty members for proposals aimed at translating novel ideas into therapies, diagnostics, or devices that could advance rapidly into clinical care through commercialization or other pathways. A panel of entrepreneurs evaluate the proposals, and winners receive start-up funding and milestone evaluation by the panel. The first year SPARK VT awarded $50,000 seed grants to two Department of Medicine faculty, and then expanded to two more departments in the UVM College of Medicine. Now, it is a University-wide program.

New education initiatives — including a masters of public health and two public health certificate programs — add additional teaching opportunities for faculty, and multidisciplinary simulation-based education projects led by faculty are helping healthcare providers improve how they work together in settings like the intensive care unit. And then there’s the department’s pioneering work in high-value cost-conscious patient care, piloting multidisciplinary clinics and screening programs.

Parsons is stoic as she thinks of the road ahead. For many years she kept notebooks at her desk with the Chinese symbol for “crisis” printed on them — a character that combines those of both “danger” and “opportunity.”

“Seeing ‘opportunity’ at every turn in the road is easier when there’s a motivated and capable team with you moving forward,” she says. “I can think of no better person to lead us than her. She’s the only person I’d want running the show.”

Associate Professor Renee Stapleton, M.D., Ph.D., right, recruited by Dr. Parsons in 2006, considers her a mentor to this day.