the People behind Clinical Trials
A great university, and a great medical school, is a community of outstanding scholars and students supported by the alumni and friends of the institution. This support has been shown concretely by the tremendous success of the Campaign for the University of Vermont — only the second campaign in UVM history — which this year exceeded its goals for both the University and the College of Medicine. The more than $83 million raised by the campaign at the College will greatly strengthen scholarship and faculty support, and has helped create new 21st Century facilities in which to educate the next generation of physicians and scientists. To everyone who helped the College surpass this important goal, we offer our deep and heartfelt thanks.
$6.8 Million Gift Funds Vermont Medical Student Loans

A generous estate gift from Burlington, Vt., native Elinor Bergeron Tourville Bennett will establish a perpetual no-fee, no-interest loan fund for Vermont students at the College of Medicine.

The Elinor Touville Bennett Charitable Trust will continuously provide annual income to the College of Medicine that will be made available specifically to Vermont residents enrolled as students at the College as loans with a minimum payback period of ten years after the student has completed residency training.

“This loan fund — made possible by the extraordinary generosity and foresight of Elinor Bennett — will impact the education of Vermont medical students in perpetuity,” said Interim Dean John P. Fogarty, M.D., when the gift was publicly announced in May. “This will allow students to more easily manage the burden of educational debt during their earlier years as physicians.” According to the Association of American Medical Colleges, the average 2006 graduate indebtedness at the College of Medicine is $134,306.

“Mrs. Bennett’s gift is truly remarkable,” said Rebecca Brakeley, a third-year UVM medical student from Middlebury. “This loan fund will help alleviate the financial stress medical students typically face after graduation and allow us to continue focusing on providing excellent care to our patients.”

Mrs. Bennett was born in Burlington on May 6, 1930, the daughter of the owners of a Cadillac dealership on North Avenue. A 1938 graduate of Burlington High School, she worked for years as a dental assistant in the Burlington area. In 1966, she married Wilfred Tourville, who passed away in 1996. Then in 1976, she married Thomas Bennett, who died in 1979. Her family had a camp on Appletree Point, which became her main Vermont residence in later years. She retained a strong affinity for Burlington and considered it her home. Mrs. Bennett endured several serious health issues during the 20 years before her death on June 25, 2006. The positive experiences and relationships she developed with the physicians who cared for her during that time inspired her to bequeath most of her estate to the College of Medicine.

College Climbs to 7th for Primary Care in 2008 U.S. News & World Report Graduate School Guide

The University of Vermont College of Medicine ranked seventh for primary care among the nation’s 125 medical schools according to the U.S. News & World Report 2008 “America’s Best Graduate Schools,” which was published in early April. The College moved up from fourteenth last year, and has consistently ranked in the top 15% of all medical schools in primary care.

“We’re proud to be recognized as providing top-quality medical education and training for primary care physicians,” said Interim Dean John P. Fogarty, M.D. “Primary care is an integral part of the health care system in our state and across the nation, and our curriculum provides wonderful opportunities for medical students to understand the critical role of the primary care physician as well as gain experience in a range of clinical settings.”

Each year, U.S. News ranks professional-school programs in business, education, engineering, law, and medicine. These rankings are based on two sets of data: peer ranking data from medical and osteopathic school leadership and residency program directors about program quality; and statistical indicators that measure the quantity of a school’s faculty, students and research activity.

The College of Medicine received nearly 5,000 applications for the 207 students in the Class of 2010 that entered in fall 2006, and has 425 total medical students in its four classes.
Sanders Earns Fulbright Scholarship

Recent graduate Justin Sanders, M.D.’07 has been awarded a Fulbright grant to study in the United Kingdom. A native of Utah, Sanders will be going to University College London in England to conduct research on cultural barriers to the utilization of palliative care services and complete a master’s degree in medical anthropology.

Established in 1946, the Fulbright Program is the largest United States international education exchange program. As a Fulbrighter, Sanders joins the ranks of more than 6,500 of whom have become heads of state, judges, ambassadors, CEOs, journalists and professors and 96 of whom have received Nobel Prizes. He will work to fulfill the principal purpose of the program: to increase mutual understanding between the people of the United States and those of more than 155 countries currently participating in the Fulbright Program. Notable recipients of the Fulbright include the actor John Lithgow, composer Philip Glass, opera singer Renee Fleming and economist Joseph Stiglitz.

“By winning this grant, Justin places himself in a very elite group,” said Abu Rizvi, associate dean of the Honors College, associate professor of economics and Sanders’ advisor during the Fulbright application process. “The United Kingdom is the most challenging country in which to win a Fulbright, and this year’s success rate is barely two percent. Justin will bring with him a passion for inquiry and service to the United Kingdom and bring back an understanding of palliative care in a multicultural context that will enrich his residency experience in the U.S.”

After completing his master’s degree, Sanders plans to serve a family medicine residency and go on to specialize in palliative care.

AWARDS & RECOGNITION

UVM College of Medicine Faculty Among 2007-2008 University Scholars

Three faculty members with appointments in the College of Medicine have been chosen as 2007-2008 University Scholars, including Charles Irvin, Ph.D., professor of medicine and molecular physiology and biophysics; Martin LeWinter, M.D., professor of medicine and molecular physiology and biophysics; and Stephanie McConaughy, Ph.D., research professor of psychiatry and psychology. An awards ceremony and reception was held on May 15 in Memorial Lounge in honor of the new Scholars. The University Scholars program recognizes distinguished UVM faculty members for sustained excellence in research and scholarly activities. The Scholars are selected by a faculty panel based upon nominations submitted by UVM colleagues.

Johnson Receives Academic Medicine Executive Leadership Fellowship

Julia Johnson, M.D., professor of obstetrics and gynecology and vice chair of gynecology at the College of Medicine/ Fitcher Allen Health Care, has been accepted as a member of the 2007-08 class of Fellows in the Hedwig van Ameringen Executive Leadership in Academic Medicine (ELAM) Program for Women. ELAM, a program of the Institute for Women’s Health and Leadership at Drexel University College of Medicine in Philadelphia, is an intensive one-year leadership training program with extensive coaching, networking, and mentoring opportunities. The program’s aim is to expand the national pool of qualified women candidates for leadership in academic medicine. Approximately 45 candidates are chosen each year through a competitive selection process; applications for the 2007-08 class were more than double the number of available spaces.

UVM/Fletcher Allen Pediatrics Chief Wins Prestigious National Mentoring Award

The College of Medicine and Vermont Children’s Hospital at Fletcher Allen Health Care have announced that Chief of Pediatrics Lewis First, M.D., received the Ambulatory Pediatric Association’s 2007 Miller-Sarkin Mentoring Award at the Pediatric Academic Societies’ Annual Meeting in Toronto May 6th. According to the Ambulatory Pediatric Association, the Miller-Sarkin Award recognizes the contributions of an individual who has provided outstanding mentorship to learners or colleagues, both locally and nationally, and serves as a model to others who aspire to mentor others as they mature.

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MATCH DAY 2007

Just after noon on March 15, senior medical students at the College of Medicine had the answer to a burning question that had been looming for weeks. At 11:55 a.m., Associate Dean for Student Affairs G. Scott Hutchison, the father of a neuroblastoma patient, expressed his appreciation for the generosity of physicians and scientists working to identify treatments for children with neuroblastoma. Parent/author Syd Birrell provided closing remarks.

Approximately 650 children, most of whom are less than 5 years of age, are diagnosed each year with neuroblastoma. Hutchison and his wife Margot, along with parents John and Catherine London, have established The Penelope & Sam Fund for Neuroblastoma Research at the VCC. Despite the current treatment of chemotherapy, surgery, autologous bone marrow transplant and radiation, survival remains below 30 percent for aggressive forms of neuroblastoma. Several colleagues at the VCC are currently conducting basic science studies, as well as a Phase 1 clinical trial, to identify new treatments for children with the most aggressive form of the disease.

VCC SYMPOSIUM HIGHLIGHTS NEUROBLASTOMA RESEARCH

The Vermont Cancer Center (VCC) hosted a conference on March 16 titled “Developments in Neuroblastoma Research Symposium” in the College of Medicine’s Medical Education Center. Chaired by pediatric oncologist Giselle Sholler, M.D., assistant professor of pediatrics, the event attracted over 100 attendees, including scientists, physicians, students and family members of neuroblastoma patients. Symposium presenters included investigators from UVM and the Vermont Cancer Center, as well as physician-scientists from University of Pennsylvania/Children’s Hospital of Philadelphia, Brown Medical School, Memorial Sloan-Kettering Cancer Center and the University of California at San Francisco. The symposium also offered insight into the patient family perspective. During the program’s opening remarks, Neil Hutchison, the father of a neuroblastoma patient, expressed his appreciation for the generosity of physicians and scientists working to identify treatments for children with neuroblastoma. Parent-author Syd Birrell provided closing remarks.

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A member of the Navajo Tribe, Dr. Alvord is the first Navajo woman to become a surgeon. She is the author of The Scalpel and the Silver Bear, an autobiography that details her journey from a Navajo reservation to becoming a surgeon and her work to combine Navajo philosophies of healing with western medicine. Her commencement presentation, titled “Healing: Wisdom from the Native American World,” focused on what it means to heal, from a Native American perspective, and how Native American ceremonies and culture provide a powerful vision of how to be a healer.

Among the graduates was Matthew Coates, (middle, right) who became the first graduate of the UVM M.D.-Ph.D. program, the physician-scientist training program that now accepts four students per year. A native of Montpelier, Vt., Coates is the third child of Washington County, Vt., physician John Coates, M.D., to attend the UVM College of Medicine. He and his sister Anne both received UVM medical degrees this year. The ceremony also saw an M.D. degree awarded to Mia Hockett of Burlington, a fourth-generation physician and the first female doctor in her family.

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RESEARCH MILESTONES

UVM to Examine Potential New Parkinson’s Disease Treatment as Part of National Study

UVM will participate in a large-scale national clinical trial to learn if the nutritional supplement creatine can slow the progression of Parkinson’s disease (PD). While creatine is not an approved therapy for PD or any other condition, it is widely thought to improve exercise performance. The trial is the first study in a series of NIH-sponsored clinical trials called NET-PD (NIH Exploratory Trials in Parkinson’s Disease). UVM has been affiliated with the program since 2002.

According to UVM primary investigator Robert Hamill, M.D., professor and chair of neurology, “The team involved in our movement disorder program is very committed to bringing new and novel therapies to citizens of Vermont and upstate New York who have Parkinson’s disease and being part of this NIH consortium is an important step forward in this regard.” In addition to Hamill, the UVM-based project team also includes James Boyd, M.D., assistant professor of neurology and study co-investigator; Shannon Lenox, clinical research coordinator in neurology; and Jeanette Baker, R.N., movement disorder nurse in neurology.

OB/CYN Research Receives March of Dimes Grant to Study Prematurity

Recent research published in the journal Molecular Cell by UVM biochemistry graduate student Ethan Guth and Christopher Franklyn, Ph.D., professor of biochemistry and molecular biology and microbiology and genetics, sheds light on how the accuracy is ensured in genetic events in which cells copy their DNA information into short-lived RNA messages, and then translate those messages into proteins. The focus of the UVM team’s research was transfer RNA (tRNA), a special adaptor molecule that must be matched to each amino acid in the protein manufacturing process. The matching reaction is performed by one of a set of 20 enzymes, each of which is specialized for an individual amino acid and a limited set of specific tRNA adaptors. Following the matching reaction, the tRNA adaptor with its amino acid in its “decodes” the RNA message with the help of a complex molecular machine called the ribosome, using the chemical rules of the universal genetic code. The accuracy of protein synthesis depends on the accuracy of the matching reaction and on the decoding process performed by the ribosome. The paper by Franklyn & Guth addresses the fundamental problem of how the tRNA adaptors are selected by the matching enzymes.

Modelling Intracranial Pressure

Paul Penar, M.D., professor of surgery in the division of neurosurgery, and Wally Lakin, Ph.D., professor of mathematics and statistics, along with Scott Stevens, Ph.D., a UVM graduate and assistant professor at the Behrend College at Penn State Erie, were issued a U.S. patent on February 27, 2007 for a “Whole-Body Mathematical Model for Simulating Intracranial Pressure Dynamics.” Penar and his colleagues began developing their method of mathematically modeling the pressure dynamics of the human body’s intracranial system in the 1990s.
In the dimness of an early 1900s laboratory, an immunologist peering into the lens of a microscope might be looking at a tuberculosis specimen squirming on the slide. Identified as the leading cause of death prior to the development of antibiotics, TB, as well as other outbreaks during the industrialization era including typhoid fever and dysentery, was closely linked to cramped living conditions and poor sanitation and hygiene. The Centers for Disease Control credits public health initiatives and modern miracles such as penicillin, chlorinated water, sewage disposal, and vaccinations, for bringing these diseases under control.

Ralph Budd, M.D., Professor of Medicine and Director of the Center for Biomedical Research excellence in immunology and infectious diseases.

With a new multi-million dollar grant, a UVM group studies infectious agents that impact the health of millions of people worldwide.

photography by MARIO MORGADO
genes simultaneously and zero in on those people. An infectious agent, a water-borne parasite notably responsible for a massive outbreak in Milwaukee, is considered a major threat.

Budd, M.D., and Ralph Lake, N.Y., a world-renowned center with expertise in infectious diseases. The new alliance clinched the deal; in 1999, the group applied for a program project grant in order to really grow; but in NIH terms, they lacked the critical mass required to qualify for these larger grants. Determined to get funding, Budd made a creatively bold move. He initiated approaches with the Trudeau Institute in Saranac Lake, N.Y., among them bioterrorism, antibiotic resistance to microorganisms, and an increase in the incidence of certain autoimmune diseases. Research teams like a new interdisciplinary group led by Ralph Budd, M.D., professor of medicine and director of immunobiology, seek to address these crises and gain a better understanding of several Centers for Disease Control-designated “priority pathogens” and their related immune responses.

In recognition of their well-established expertise in basic immunology and medically significant infectious agents such as bacteria, viruses and parasites, Budd and his colleagues recently received an $11.4 million National Institutes of Health Core Center of Immunobiology (COBRE) award to fund the Vermont Center for Immunobiology and Infectious Diseases at the University of Vermont.

Ten years ago the UVM immunobiology group needed a National Institutes of Health Program Project grant in order to really grow; but in NIH terms, they lacked the critical mass required to qualify for these larger grants. Determined to get funding, Budd made a creatively bold move. He initiated collaborations with the Trudeau Institute in Saranac Lake, N.Y., a world-renowned center with expertise in mouse models of basic immune mechanisms and infectious diseases. The new alliance clinched the deal; in 1999, the group applied for a program project grant and received it on the first try.

In explaining his program’s collaborative approach, Budd says “We’ve done our best to recruit other immunologists here. They haven’t always been in our department, but we’ve always included them in the Immunobiology Program. That’s why it’s a program, not a division or a department.”

Over the past five years, faculty members with immunology expertise were recruited to the departments of medicine, surgery, and obstetrics and gynecology. All immunobiology researchers, regardless of department, were invited to join the weekly lab meeting. The lab meeting, Budd says, is a collaborative and fun exchange. “It works well, because I’m not everyone’s boss; faculty come because they want to.” The more the group met, the more they realized that they could now bring their research to the next level, so they teamed up with clinical and basic science infectious disease specialists and applied for a COBRE award.

“COBRE grants are hard to get,” admits Budd. “But we thought we could be competitive, because we had a very strong theme.” Though the group didn’t succeed on their first try, they garnered strong support from UVM and College of Medicine administrators and their second application was successful.

Led by Budd and co-principle investigator Gary Ward, Ph.D., professor of microbiology and molecular genetics, the COBRE grant funds the research of several junior faculty members chosen for their competitive expertise in immunology and infectious diseases. Each is mentored by two or more senior faculty members. In total, the grant involves faculty from six separate departments and four colleges at UVM and supports technology expansion in two of UVM’s core facilities — proteomics, which allows for high-level protein analysis, and microarray, which allows researchers to look at as many as 15,000 genes simultaneously and zero in on those genes that are critical to the disease process. The research projects concentrate on four infectious agents and the body’s immune response to them.

The COBRE research will focus on how the two types of immune systems that humans possess function during different infections. Though they use different strategies, both systems are critical to combating infection. The innate immune system is the evolutionarily older one, and is the one that responds quicker. It is also the type of immune system found in other life forms, including insects and plants. It functions using a limited number of receptors that recognize a discrete repertoire of foreign material in microorganisms. Budd describes the system as “genetically expensive and wasteful,” but adds that it ensures that the body has a good armament against a wide array of pathogens. It is slower to respond than the innate system, but becomes, over time, more fine-tuned to a specific infection.

Junior investigator Beth Kirkpatrick, M.D., associate professor of medicine, is conducting research on the body’s innate immune response to Cryptosporidium parvum, a water-borne parasite notably responsible for a 1993 outbreak in Milwaukee, Wisconsin that infected over 400,000 people. An infectious disease clinician who has an NIH Clinical Scientist Development Award, Kirkpatrick is being mentored by Budd, an expert in innate immunity, and Elizabeth Bonney, M.D., associate professor of obstetrics and gynecology, whose research interests include innate immunity at the maternal-fetal interface. Cryptosporidium parvum is considered a major global problem, yet it is poorly understood. It can trigger massive outbreaks of water-borne disease, and causes persistent and chronic diarrhea in children and immunocompromised individuals.

Innate immunity is also the focus of research by Jonathan Boyson, Ph.D., assistant professor of surgery. Boyson is examining T lymphocytes known as...
Huston, M.D. and Christopher Markus Thali, Ph.D., assistant professor of medicine who currently focuses on infections by this intestinal-based bug. Huston is working toward a greater understanding of the mechanisms involved in the transition between the two infectious stages of Toxoplasma gondii, which infects approximately one-third of the United States’ population and is the leading cause of neurological birth defects, affecting about 5,000 babies each year. An assistant professor of microbiology and molecular genetics, Matrajt’s objective is to elucidate the genetic basis and mechanisms underlying the transition between the two infectious stages of Toxoplasma gondii, a dormant phase and an actively replicating phase. She hopes to define how this parasite interferes with immune response signaling. “We are trying to understand that process so in the future we can develop drugs against the parasite that would help manage the patient,” says Matrajt, whose mentors include Ward, a Toxoplasma gondii expert, and Associate Professor of Medicine Mercedes Rincon, Ph.D., who specializes in the specific type of immune response signaling Matrajt is studying.

“This COBRE is designed to launch these junior faculty and also allow us to immediately begin recruiting an additional three or four new faculty,” says Budd. He also hopes their work will attract other grants, including another training grant, and also plans to apply for another Program Project grant. “My job is to bring all these people together to talk about their overlapping interests and to get their creative juices flowing, get us publishing together and collaborating together,” explains Budd, who hosted a mini-retreat last fall and another larger retreat in April. The spring meeting featured what Budd refers to as “challenge talks” — each group member highlighted his or her area of research and how it overlaps with what others group members are doing. The goal of the ensuing discussion was to create a bridge between fields and then propose experiments. Budd hopes to use money from the COBRE for start-up grants to fund these collaborative experiments, which in turn could develop into Program Project grants.

The next step for Budd, which he describes as a “work in progress,” is to increase discussion and collaboration between basic research scientists and clinicians. Budd straddles those roles himself. Though he spends most of his time in the lab, he has rheumatology clinic hours each Thursday afternoon and serves on call every three months for two weeks at a time. An assistant professor of medicine and director of rheumatology and infectious diseases, and Sheldon Cooper, M.D., professor of medicine and director of rheumatology and clinical immunology, on that effort. Budd himself is a good case study for this type of interaction. “I think about things more molecularly when I’m in the clinic, because of my basic science research work,” he says. Budd started his post-medical school career with an internal medicine residency followed by a clinical rheumatology fellowship. Frustrated by a lack of clinical explanations for infectious and autoimmune diseases and their treatments, Budd switched to lab work and started conducting research.

As the list of future COBRE-related goals gets longer — a seminar series, post-doctoral fellowships and improving UVM’s position in the field of bioterrorism research — the momentum for the Center for Immunology and Infectious Diseases continues to build. In driving this effort, says Budd, he’ll rely on the same approach that is central to a COBRE grant — the spirit of collaboration among a talented group of scientists, postdoctoral fellows, students, and technicians.
At the core of all scientific discovery is data: hard, factual information that can be reliably used to make well-reasoned conclusions — the information that, in the realm of medicine, drives the adoption of new drugs, novel therapies, and improved devices. Much of the data that brings about improvements in health care has its genesis on the laboratory bench; but it’s a long way from a discovery swirling in a beaker to a treatment making a difference in patients’ lives. For that crucial step, there’s the clinical trial, where, every day, the contributions of thousands of people — patients, providers, and administrators — bring forth new data on the safety and efficacy of the latest discoveries in medical science.
ON A THURSDAY IN MID-APRIL, a little before dawn, Leon and Pat Strader begin their day pretty much the way they’ve begun every Thursday since last December, after Leon received his lung cancer diagnosis. They awake at 5 a.m., quickly get washed and dressed, then start up the Camry and begin their long morning’s drive. From their Hannawa Falls home in New York state, about 30 miles east of the St. Lawrence Seaway, they travel northeast along Route 11 in a broad arc over the top of the Adirondack Park. Somewhere along the way, as the morning light settles in, they stop for breakfast at a roadside diner, and then head back out toward the bridge at Swanton, and down the interstate to Burlington. By the time they get to their ultimate destination, Fletcher Allen Health Care, where Leon will receive his chemotherapy at the Hematology/Oncology clinic, they have clocked more than three hours and 170 miles on the road.

As Strader checks in at the counter of the Hem/Onc clinic at the Vermont Cancer Center at UVM/Fletcher Allen, he takes on more than just the role of a patient showing up for weekly chemo. He is also one of the thousands of patients across the country who advance the cause of medical science by helping to test new treatments as participants in a clinical trial.

For Strader, the role of clinical trial study participant began with the suggestion of his oncologist, Professor of Medicine Steven Grunberg, M.D. “I liked his attitude. He explained that there was a new drug being tested which might help me, in addition to the regular chemo,” Strader says. He did not hesitate. “I figured there was no harm in trying, and a possibility it would give the cancer an extra kick. And it would help them learn more. Personally, I do feel sure it did some good.” He gestures with hands made rough by years of work as the superintendent of grounds at Clarkson College. Strader’s feeling is, of course, instinctive. The study he participates in, like most drug studies, is rigidly “double-blinded” to prevent any unintentional bias in the administration of the drug — neither patient nor clinician knows whether they are receiving study medication or the standard of care.

And the three-hour car ride? “I wouldn’t have it any other way,” says Strader. “This is where I feel I’m getting the most up-to-date care, so this is where I’m going to come, ride or no ride.”

Testing newly discovered therapies in humans is a critical step to bringing better care to the wider population. A carefully designed and conducted trial is the safest and quickest way to identify treatments that really work, and to gauge the level of their effectiveness; other observational trials allow medical scientists to address health issues in large groups of people in natural settings. Today, nearly 50,000 clinical trials are in progress across the country, according to the Center for Information & Study on Clinical Research Participation. At the College of Medicine and Fletcher Allen, the work of scientists and health care providers who are engaged in approximately 1200 research projects is supported in full range of ways by the College’s Office of Clinical Trials Research (OCTR).

“We’re here to support the researchers, to help frame the policies around clinical trials, and to work with other entities on campus to help make sure our trials run as smoothly as possible and in full compliance with all the appropriate rules,” says Kimberly Luebbers, who has directed the office for the past two years. Luebbers, who is an R.N., has many years’ clinical experience and originally joined the OCTR in 2003 as manager. The office itself has existed for the past six years, but clinical research at UVM has a decades-long history. For more than forty years, UVM has been the site for one of the 80 General Clinical Research Centers supported by the National Institutes of Health. “We have many, many stakeholders,” says Robert Shapiro, M.D., Ph.D., the OCTR medical director. “We serve the public, to make sure studies run correctly, and that the public understands their value. We help investigators pursue their research ideas. We help the regulatory agencies, in that we make sure things are running in compliance with their rules.”

Perhaps the first clinical trial in medical history took place in the mid-18th century, when James Lind, a surgeon with the British East India Company, tested the effect of citrus fruit consumption on the alleviation of scurvy, the dread disease caused by vitamin C deficiency, that at the time caused the deaths of thousands of sailors on long sea voyages. Though it had been casually noticed that sailors who ate citrus fruit had less of a chance of getting scurvy, that knowledge was not widespread. Lind conducted a very systematic experiment on several groups of sailors, rigidly controlling their diets while onboard ship, and proved the effectiveness of a citrus fruit-laden diet.

Today, medical researchers in the U.S. conduct their research according to the strict guidelines of the Food and Drug Administration and other government agencies. Most trials are organized by the phase system, in which treatments are first tested on a small group for safety and tolerability (Phase I), then in larger Phase II groups where clinical efficacy is determined. Phase III trials involve the largest numbers of participants and are designed to give a much more definitive judgment on efficacy before a treatment is approved for general use.

“This is a complicated system, and with good reason,” says Luebbers. “The OCTR is here to help researchers and study participants come together within this safe framework.” For researchers, that means helping them plan the protocol — the document that describes the objectives, methods, and procedures of a study. One of the services the OCTR provides is to liaison with UVM’s Institutional Review Board (IRB). IRBs have become fixtures on campuses across the nation in the past 30 years. The IRB is a committee of local researchers and lay people, appointed by the university’s provost, who volunteer to review all studies in order to ensure that the welfare and rights of human study participants are thoroughly protected. For researchers it works with, the OCTR facilitates IRB approval and helps turn a plan on a piece of paper...
Lois Diggs’s journey to the clinic involves just a short drive, but it is part of a long effort to fight the colon cancer she was diagnosed with five years ago. Fighting cancer is something this Lieutenant Colonel does in her typically quiet, committed way. A veteran of 30 years’ service with the U.S. Air Force, Diggs, who lives with her family in Jericho, Vt., has been a member of the Vermont Air National guard for the past three years, where she is a detachment commander.

“I wanted to do whatever I could to fight this cancer,” says Diggs. “So this trial seemed like the right thing to do. If I can get one more thing to help me, well, then I’m going to try it.” If she was not now battling cancer, Diggs would probably be fighting a different fight. “Oh, I’d almost certainly be in Iraq, or have been there,” she says. Her son Sean is serving in the army in the Iraqi city of Ramadi.

“It’s been a pleasure and an honor getting to know Lois,” says Fingar, clinical research coordinator on the study Diggs is enrolled in. Fingar and his fellow research coordinators play a vital role in turning the protocol into a working study. Coordinators help put together the consent document and much of the paperwork needed for IRB approval. Once the study is open, they work on patient recruiting, a task that sometimes literally puts them in the “hot seat.”

“That’s our term for the particular work station in the clinic that the physicians can visit or call with any research questions they have,” Fingar explains. “Six research coordinators rotate this duty. This set-up allows the doctors to quickly locate assistance to get a patient enrolled in a trial. The person in the hot seat can locate any required study related information or forms. Typically we need to check the patient’s eligibility, gather information to help advise the physician about potential studies, or to actually allow the patient to be consented for a study.” If the person in the hot seat is not able to provide all that is needed, the hot seat person tracks down the colleague who manages the relevant study. “The physicians have found this system helpful for getting patients enrolled,” says Fingar. “After all, with more than 80 open trials in the Hem/Onc area alone, the physicians just can’t possibly keep all the details about eligibility in their minds. So it’s really helpful that they can just come around the corner or call the hot seat and see a coordinator.”

Fingar, who has been a coordinator for two years, finds the position “very busy, but also very satisfying. Coordinating the collection of data is a big thing. You have to get a lot of things right at a lot of different times.”

Two other clinical trial study participants are examples of the age range of people who take part in trials. Emma Baker, from Wallingford, Vt., is just 5 years old, and she absolutely hates having her blood drawn, but her visits every three months help study whether two medications in combination will help combat pseudomomas, a bacterial infection of the lungs that can be life-threatening for children who, like Emma, have cystic fibrosis.

“I was told Emma was a good subject for this study, because she hadn’t tested positive for pseudomomas yet,” says Carol Baker, Emma’s mother. When Emma’s doctor (Assistant Professor of Pediatrics Thomas Lahiri, M.D.) told us about the trial I said ‘sure, we want to do whatever will help the research.’”

Study participant William Patten is, at 68, old enough to have several grandchildren around Emma’s age. The need to be there for those grand-kids is part of what led him into a clinical trial. After years of intense pain, Patten had knee replacement surgery two years ago. He volunteered to be part of a trial that is testing a new type of replacement joint that will hopefully give recipients more lateral movement. A few years ago, Patten could barely walk. Now, he’s regained his range of movement and actively supervises getting his young grandchil-dren off to school each weekday in his Vergennes, Vt. home.

Patten does not know whether he received the new kind of replacement, or just the standard ver-sion. His study is a relatively small one — just 50 participants in all. He returns to the clinic every two years now for a morning of testing, and a long questionnaire administered by Kathy Ferland. “We ask him many questions to determine his quality of life, in addition to the physical data,” says Ferland, who has been a research nurse in the OCTR for more than three years that followed seven years spent as a nurse in the General Clinical Research Center. “My research experience is very broad, and I really feel very connected in this position, a part of everything that’s going on in a particular study. That’s very satisfying. And this study points out the broad nature of what we study. It isn’t just drugs, it’s also devices, and new techniques.”

Back in the Hem/Onc clinic, as the Thursday afternoon light slants through the windows, Leon and Pat Strader begin to gather their belongings and walk out to the parking garage to find their Camry and begin the long drive home. But first they say a warm goodbye to Laurie Chassereau. “I just can’t say enough about these people,” Leon says. “They really do take things to heart.”
In his nearly three decades at the College of Medicine, Professor of Surgery Frank Ittleman, M.D., has treated thousands of patients, and written many words that describe his experiences, personal and professional, across the years. Every season for the past several years, his essays have appeared as the “Let’s Close” column in UVM Surgery, the quarterly newsletter of the Department of Surgery. Ittleman has used his column to explore a range of topics — from a deeply personal reminiscence of his recently deceased physician-father-in-law, to comments on the eternal rivalries of baseball. Most often, he delves into a small but telling facet of the doctor’s life, as in the two recent essays featured here.

Deep inside, I always knew that I would be a doctor. Knowing connotes a certain degree of pre-determination while wanting or needing speaks to a void that demands to be filled. As a young boy growing up on Long Island, I doubt that I wanted for much of anything.

In our youth, my friends and I were guided into manhood in ever so subtle ways. Jokingly, the choices were simple. Be a doctor, a lawyer or an Indian chief. Medicine, for me, seemed to be a settled issue, while the law was the domain of several of my friends whose fathers had already made inroads into their psyches. As for Indian chiefs, the job market for this profession did not seem to be particularly promising on the north shore of Long Island, circa 1960.

My father was an old-fashioned general practitioner. Old fashioned by today’s standards, but probably very much up-to-date 50 years ago. When he left our home to make house calls, which he did every day, he would be carrying a large, worn leather bag in his left hand which made him list ever so slightly to the port side. It had pockets and compartments galore that held the secrets of his trade. There was the standard issue sphygmomanometer and...
My mother was told once that talking to her husband was like talking to a priest, only better.
really “brightens up” the venue. If I prod a bit, I might get a tip on how to repair the two-inch hole in the sheetrock of our family room that bore the brunt of my fifteen-year-old son’s pursuit of Henry Aaron’s home run record. Ultimately, we conclude with words about layers. The coats and coats of paint that hide the defects and imperfections of age and seal in the memories that have accumulated over decades. It has been said that the age and quality of a great tree’s life, the insults that it has had to bear over time, can be determined by the concentric rings of its trunk; I dare say that the life of an old hospital room, hallway or surgical suite can be defined, metaphorically speaking, by the number of coats of paint that cover its walls.

...the life of an old hospital room... can be defined, metaphorically speaking, by the number of coats of paint that cover its walls.

The Baird stairwell is now painted beige. Not a particularly inviting color, but nowhere is it written that stairwells need to be hospitable. I was descending that stairwell twenty-five years ago when I was greeted with music wafting up from the landing below. The singer was a patient of mine who still goes by one name (I am not certain if it is his first or last) and with guitar in hand, he was attempting his best Dylan imitation with a rendition of “Hey Mr. Tambourine Man.” His shirt was off, exposing his fresh incision, his hair was in a ponytail and his IV pole was precariously balanced on a step. His audience was a bevy of student nurses who obviously were enjoying the impromptu concert. I retreated from where I came with a smile and a nod, a moment of pleasure after a long day. I believe the walls were light green then.

The Smith stairwell is a bit darker now and far less traveled than before. The walls are an off-white or beige, but the chips indicate that coats of paint lie beneath. The railings are solid oak, smooth and secure to the touch. A hidden, but appreciated find amidst the plastic and steel of institutional construction. It was 30 years ago when I was walking up that stairwell late at night from floor to floor putting my patients to bed. I was the chief resident on the cardiothoracic service and a few stairs ahead of me was the medical student on call. I had already weathered over three years of residency and I was well versed in the hierarchal chasm that existed between a senior resident and a junior student. As he neared the landing, the student turned and said, “I am going to turn in now, but wake me if anything really interesting comes in.” Needless to say, I was taken aback by this sudden reversal in the order of things. Too stunned to enunciate the appropriate rejoinder, my feeble reply of acquiescence was lost in the stairwell. As mad as I was then at this inordinately disrespectful request, I am now just as proud of this student’s accomplishments as a Professor of Cardiothoracic surgery.

The old operating rooms on Smith 2 are gone now, having been reconfigured long ago into office space. The open heart room was number seven, if my memory serves me, and the walls were a combination of light green tile and pale green paint. One night, Jim Demeules and I were doing an emergency bypass procedure. I was the faithful Sancho Panza to his Don Quixote. While Jim was wielding his scalpel at imaginary windmills, the doors of the OR suddenly opened and in ran a young woman wearing nothing but a trench coat (open, of course) that would have done Humphrey Bogart proud. She was running, frantically trying to elude her pursuers who were not far behind. She circled the pump and the operating room table and our heads swiveled like owls pursuing a noiseless sound. She exited from whence she came with Dick Pease, anesthesiologist in hot pursuit.

The silence that followed was eerie, as if this surreal moment had never occurred. Jim, with great aplomb, leaned over and whispered, “If I told her once I told her a hundred times not to visit me in the hospital.” The glint in Jim’s eyes was unforgettable. The surgical ICU was adjacent to these operating rooms and the doors that marked the only entrance received a fresh coat of red paint every...
On a recent visit to our medical school I couldn’t help but notice many obvious changes that have taken place, but I was reassured to see that the school’s basic qualities remain the same as they were 50 years ago when I was a medical student. One change is that more than half of the current students are women, compared to the two women out of the 50 members of my class. In addition, today’s medical curriculum has been totally and successfully revamped. No longer are there familiar, distinct courses such as anatomy, biochemistry, and pathology. Instead, today’s medical student learns all those factors relating to the body’s normal and pathological functions as well as their treatments in a series of comprehensive, integrated units. Physical facilities for teaching, studying, and even for having been vastly improved and expanded. You have to see them to appreciate them.

But of course, in spite of these improvements, studying medicine remains a real challenge for today’s students, much as it was when we were learning our profession’s fundamentals. I can’t tell you how impressed I was to meet two current medical students, Jesse Hahn and Justin Stinnett-Donnelly, who took part in the most recent meeting of the Alumni Executive committee of the Medical Alumni Association. If they are as representative of their classmates, the character, intelligence, dedication, and good humor of Jesse and Justin is living proof that the College of Medicine has superb people with whom to work. These students’ sincere enthusiasm for their education at UVM was palpable. It was clear to me that the medical school’s faculty and staff, as always, are doing something right.

By the time you read this, some of you will have returned this month to Burlington on your reunion. Those of you who have done so will probably have rediscovered for yourselves these and other aspects of the school to which we owe so much. One thing of which I am especially proud is the fact that a full 41 percent of our alumni contributed financially to the school in the past year. This is a very high level of participation compared to all other medical schools, and it is a tremendously important factor when major corporate, foundation, and governmental entities decide which medical schools to lend their support to.

I thank all of you who have contributed to the College of Medicine, and I want to encourage every alumnus to give some financial support, no matter the amount, to improve our already stellar record of participation. It is an act of “paying back” that will go far, and I’m certain you will derive genuine satisfaction from it.

Have a wonderful summer!

Marc Nierenberg, M.D. ’60

if you have news to share, please contact your class agent or the alumni office at medalumni.relations@uvm.edu or (802) 656-4104. If your email address has changed, please send it to: medalumni.relations@uvm.edu.

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### President’s Corner

**HALLA**

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Have a wonderful summer!

Marc Nierenberg, M.D. ’60
**1958**

Peter Ames Goodhue
Stamford Gynecology, P.C.
70 Mill River Street
Stamford, CT 06902
(203) 359-3560

**1959**

Jay E. Selcuk
27 Reservoir Road
Bloomfield, NJ 07003
(908) 243-1559
jsealcuk@comcast.net

**1960**

Marvin A. Nierenberg
15 West Street
New York, NY 10014
(212) 747-8534
m.nierenberg@att.net

Melvin H. Walk
Clinton Street
P.O. Box 771
Waverly, PA 18471
(570) 563-2215
melliemar@aol.com

**1961**

Wilfrid L. Fortin
17 Chapman Street
Naushua, NH 03060
(603) 882-8202
wilfyl20@aol.com

**1962**

Ruth Andrea Seeler
2435 North Orchard
Chicago, IL 60614
(773) 472-3350
seeler@uc.edu

**1963**

John J. Murray
P.O. Box 667
Collegeville, PA 19426
(802) 865-3930
jcmurray@aol.com

**1964**

H. Alan Walker
229 Champlain Drive
Plattsburgh, NY 12901
(518) 564-2990
alwalk@aol.com

1966

Robert George Sellig
31 Overlook Drive
Queensbury, NY 12804
(518) 793-7144
rsgill@aol.com

1967

G. Millard Simmons
3165 Grass Marsh Drive
Mount Pleasant, SC 29466
millm@comcast.net

**1968**

David Jay Keller
4 Deer Run
Mendon, VT 05701
(802) 273-2620
dkeller@rrmc.org

**1969**

Timothy John Terrien
14 Deerfield Road
South Burlington, VT 05403
(802) 862-3995

**1970**

Raymond Joseph Anton
1315 General Knox Road
Russell, MA 01017
(413) 588-6569
ray@rayanton.com

1971

Wayne E. Pasanen
112 Ogden Street
North Andover, MA 01845
(978) 682-1938
wpasanen@lowell general.org

**1972**

F. Farrell Collins, Jr.
205 Page Road
Pinehurst, NC 28374
(910) 295-3429

1973

James M. Betts
712 Harbor Road
Alameda, CA 94502
(510) 253-1890
jbetts@mailchimp.co

1974

Donald P. Goldsmith
87 Quechee Road
Stamford Gynecology P.C.
(203) 874-6484

donaldpgoldsmith@comcast.net

1975

Ellen Andrews
195 Midland Road
Pinehurst, NC 28374
(910) 295-6444
diland@mindspring.com

1976

Dan P. Chan
Cardiac Associates of
New Hampshire
Suite 103
246 Pleasant Street
Concord, NH 03301
(603) 224-6070
dpc@aol.com

**DEVELOPMENT NEWS**

**DAVIS LECTURESHIP FUNDED**

Another lectureship in the Department of Surgery has been fully funded, thanks in large part to the generosity of several alumni of the College of Medicine. The John H. Davis Lectureship in Surgery honors a former chair of the department. Dr. Davis was chair of surgery for nearly 20 years before his retirement in 1970. The lectureship has been permanently endowed through the leadership of James Hebert, M.D.’77, Richard Camelli, M.D.’74, and Richard Hubble, M.D.’80. Their donations have been matched by funds from the Department of Surgery. The department thanks the many other donors and continues to seek additional support. The Davis lecture will be presented starting this September.

**Caldwell Family creates endowed scholarship**

A noted alumni from the Class of 1960 and his family have recently created a future endowed scholarship at the College. The Richard G. Caldwell, M.D. Family Endowed Scholarship is a planned bequest that will establish a need-based scholarship in perpetuity at the medical school. Dr. Caldwell’s distinguished career spans more than four decades of service in medicine. He has served as a clinical instructor of surgery at the University of Illinois Research and Education Hospital, and clinical assistant professor of surgery and associate professor of surgery at the University of Chicago. Currently he is director of student surgical education at Lutheran General Hospital in Chicago. Dr. Caldwell has deep roots in the Vermont medical community. He comes from a family of Vermont physicians, two of whom were alumni of the College of Medicine. His father, George Caldwell, and uncle Spencer B. Caldwell graduated from the College of Medicine in 1944 and 1952 respectively. Dr. Caldwell and his wife, Carol, live in Northbrook, Illinois.

**MCKAY TO BE HONORED WITH PEDIATRIC ENDOWMENT**

One of the foremost names in pediatrics in Vermont will be honored with an endowment named in his behalf by colleagues and friends. A June 30 reception at the College of Medicine will showcase progress on the R. James McKay Jr., M.D., Green & Gold Professor. The first McKay professor will be announced at the reception. Dr. McKay came to the University of Vermont in 1950 as the first full-time pediatric faculty member, and became the first chair of the Department of Pediatrics in 1954. In the course of his 35 years as chair, Dr. McKay recruited the core of the department faculty, and taught, mentored, and inspired scores of medical students and pediatric residents, who learned to memorize his acronym GRUSK, which stood for “Gentleness, Respect, Understanding, Sympathy, and Kindness.” Still an active member of the College community, Dr. McKay will celebrate his 90th birthday this October.

**NEWEST CLASS AGENTS**

At the Class of 2007 Dinner this March the two newest class agents for medical alumni were named. Allison Callen and Scott Millay will help keep their fellow class members connected during the next phase of their careers — residency, and beyond.
writes: “I am still in full time private practice of adult and adolescent psychiatry in San Diego. I love my wonderful wife and watching three children grow and mature.” — Sohkan is a fashion editor at Altar, Josh is a screenwriter, and Sam is Princeton class of ’91. “I am still just moonlighting with Steve Lampert.

M.D.” Lee R. Rome writes: “After my two-year tour of duty with Merck Health Authority and Director of Psychiatry at the Wayne County jail in Detroit, I’m now living the life of a clinical and program consultant. Currently I am consulting at the W.J. Masey Boys’ Training School (Michigan’s main delinquency treatment program), Wayne County Jail and the Michigan Department of Corrections. If any of my classmates are so inclined, I can be reached at my email address (Lrumrott@comcast.net).” — Michael R. Crandell writes: “I am no longer in practice. I am now the medical director of Sanford Health Plan, the insurance division of the State’s largest health system. The hours are better but the weather is just as hard in its own way.”

REUNION ’07

1977
Mark A. Popovsky
32 Nauset Road
Sharon, MA 02067
(781) 764-8824
mpopovsky@haemonetics.com

Frederic E. Shaw writes: “After three years at the Texas Department of Health, I came back to CDC in 2001. I worked in global hepatitis B control for three years and then moved to CDC’s Public Health Law Program, where I did research on the legal aspects of quarantine, immunization, and injuries. In January 2007, I became Editor of CDC’s publication, MMWR: The Morbidity and Mortality Weekly Report. Classmates can find it at www.cdc.gov/mmwr/. I see Rick Wild, Class of ’77, regularly. Rick and his wife live just a few miles up the road. Best regards to classmates and old friends — please visit if you are in Atlanta.”

1978
Paul Mckenna Costello
Essex Pediatrics, Ltd.
89 Main Street
Essex Junction, VT 05452
(802) 879-6556

Nancy Collins is still working half-time doing child and adolescent psychiatry. She is supervising a clinical nurse specialist who has a caseload similar to her. Her son, Dan will be a freshman at Marquette University in Milwaukee; daughter Meredith will be a senior at Marquette and Katie will be a third-year medical student at Loyola Medical College in Chicago.

1979
Sarah Ann McCarty
2108 Big Bend Road
Barbourville, WV 25504
(304) 653-1094
mccarty@marshall.edu

Richard Powell writes: “I hope that classmates are doing well. I’m keeping busy in Brandon, Florida, in a five-doctor pulmonary/critical-care/sleep medicine practice. Thank you for all you have given to the care of the pregnant woman.” — Jim Jarvis writes: “I am still here as director of pediatric rheumatology at the University of Oklahoma. My lab has been a leader in applying systems biology approaches to rheumatic disease in children. I work with and for wonderful people but still miss New England and Vermont especially.”

1980
Richard Nicholas Hubbell
80 Summit Street
Burlington, VT 05401
(802) 866-1551
rich.hubbell@vtmednet.org

1981
Craig Wendell Gage
2452 Victoria Gardens
Tampa, FL 33610
Craiggage@alumni.uwm.edu

Jacques Larochelle writes: “We had a great time at our 25th reunion last June at Bruce and Anne Leavitt’s home. Looking forward to the next one. Very busy as usual with my practice and helping my wife, Carolyn. Three sons in college and three in high school this coming year.”

1982
David Woodyl is completing a busy year in which he served as president of the Society for Obstetric Anesthesia and Perinatology, the major specialty society devoted to the obstetric care of the pregnant woman. “Since 2001 I have been vice chair of clinical affairs in the SUNY-Downstate Medical Center Department of Anesthesiology. I have recently been promoted to the rank of professor with tenure. I am looking forward to our 35th reunion and can’t wait to see our old friends.” — Michael N. Pierce is an intensivist and director of HIV Medicine for a large community-based multispecialty practice in New York. “David M. MacCinni is looking forward to catching up with everyone at the June reunion.”

1983
Diane M. Georgeson
2416 Martel Lane
St. George, UT 84770
(435) 687-8133
dgeorgeson@stnry.com

Lawrence W. Leavitt
5724 South Home Street
Greenwood Village, CO 80111
(303) 772-1289
lawrence.wolk@cigna.com

Michael Narkewicz writes: “We have taken it on new challenges in the past year. Director of pediatric G.I. fellowship and clinical director of pediatric G.I. at the University of Colorado and med staff president at Childrens. More importantly, my two sons continue to grow and explore the world and bring joy to our lives.”

1984
Richard C. Shumway
34 Coventry Ave, Avon, CT 06001
(860) 675-6629
rshumway@stfranciscare.org

1985
Vera D. Imbasciani
1945 North Crescent Drive
Los Angeles, CA 90069
(323) 656-1336
vtimad@pacbell.net

1986
Darrell Edward White
2923 Lincoln Road
Bay Village, OH 44140
(440) 846-4881
darrelwhite872@mac.com

1987
H. James Wallace III
416 Mantle Lane
St. George, UT 84770
(435) 687-8133
james.wallace@vtmednet.org

Michael N. Pierce writes: “We have a third-year medical student, Caroline. Three sons in college and three in high school this coming year.”

CONTINUING MEDICAL EDUCATION

Vermont Summer Pediatric Seminar June 14-17, 2007, The Equinox, Manchester, VT
Advanced Dermatology for The Primary Care Physician September 6-9, 2007, Samoset Resort, Rockport, Maine
Dementia & Geriatric Neurology Conference September 14-16, 2007, StoweFestival Resort, Stowe, VT
Primary Care Sports Medicine September 26-28, 2007, StoweFestival Resort, Stowe, VT

For information contact:
University of Vermont Continuing Medical Education 128 Lakeside Avenue Suite 100 Burlington, VT 05405 (802) 656-2392 http://cme.uvm.edu

College of Medicine alumni receive a special 10% discount on all UVM Continuing Medical Education conferences.

M.D. CLASS NOTES

2007
Barbara Angelita Dill
320 Hazel Court
Norwood, NJ 07648
(201) 767-7778
drdillygyn@earthlink.net

Claudia Goulston writes: “My husband and I have returned after a two-year working sabbatical in New Zealand, China and Canada and we are now embarking on a return to academia at the University of Utah. So many stories to tell…” — Katherine M. “Trina” Hickel’s first book, Dr. Trina’s Precipitans is just out this May.

1990
John Dewey
15 Eagle Street
Cooperstown, NY 13326
jdewey@stnry.com
MaryAnn Montemale LoMonaco writes: “I am busy with private practice in internal medicine. Enjoying live in “paradise” in Naples, Florida. — I welcome any classmates to come and visit. I am married to Robert, and hard to believe, we have a teenage son, Alexander. When did we get old?”

1992
Mark Elliot Pasanen
215 Spear Street
South Burlington, VT 05403
(802) 863-5381
mark.pasanen@vtmednet.org

Jennifer Woodson writes: “We continue to live in Naples, Italy. I am still a stay-at-home doctor and shutter four kids around and am busy learning Italian and exploring this diverse and rich country. Can’t seem to get enough.” — Kirsten Wolff writes: “Well, we are getting ready for another big adventure in our lives. Peter, our son Alen and I are leaving Seattle after my nine years of OB/GYN practice and we are moving abroad our recently purchased sailboat, now in Newport, R.I., to set off on a year or two of cruising! We think
2007 MEDICAL ALUMNI ASSOCIATION AWARDS

At this year’s Medical Reunion, eight physicians will be honored for their service to their community and academic achievement.

A. BRADLEY SOULÉ AWARD
Ruth A. Seeler, M.D. ’62
Dr. Seeler is Professor of Pediatrics at the University of Illinois College of Medicine at Chicago, and a pediatric hematologist/oncologist at the University of Illinois Medical Center. Since her introduction to the UVM College of Medicine as the only woman in the class of 1962, Dr. Seeler’s dedication to the College and its mission has never waned. She has been a long-time class agent, and has served multiple terms on the Alumni Executive Committee, currently as its President-Elect. She has been a generous philanthropic supporter of the College and its students, establishing the first endowed Medical Alumni Association Challenge Scholarship, naming a room in the new Medical Education Center, and becoming a member of the Wilbur Society. In addition to her direct support of the College, Dr. Seeler has led by example as an accomplished physician who has contributed greatly to her local and professional communities. In 1998, she was awarded the MAA Service to Medicine & Community Award for her role in founding Camp Warren Jyrch, one of the first summer camps in the nation for boys with hemophilia.

AWARD FOR DISTINGUISHED ACADEMIC ACHIEVEMENT
Mark Popovsky, M.D. ’77
Dr. Popovsky is a pathologist in the Boston area who has focused his career on improving transfusion medicine and blood banking. He is a leading expert on the transfusion reaction known as TRALI (transfusion-associated acute lung injury), the most common life-threatening complication of transfusion therapy. He is former CEO and Chief Medical Officer of the American Red Cross, New England Region, and has also served as Director of Transfusion & Intravenous Services of the Mayo Clinic. In recognition of his contributions to medicine and blood banking, he was awarded the 2005 Elmer DeGowen Lectureship at the University of Iowa. Dr. Popovsky sits on the editorial boards of several journals of transfusion medicine, and has published extensively in that field. Dr. Popovsky is an Associate Clinical Professor of Pathology at Harvard Medical School and an Adjunct Clinical Professor of Pathology at Boston University School of Medicine, as well as Medical Director and Vice President of Haemotronics Corporation.

Aryeh Shander, M.D. ’77
Dr. Shander is an anesthesiologist in Englewood, NJ, and an expert in the field of “bloodless” medicine and surgery— the practice of minimizing patient blood loss during medical procedures in an effort to eliminate or reduce the likelihood of the patient needing a blood transfusion. Dr. Shander is Executive Medical Director of the New Jersey Institute for the Advancement of Bloodless Medicine and Surgery, which is recognized as one of the nation’s leading providers of bloodless surgical services. For his pioneering work in this area, Time magazine featured Dr. Shander as one of their “Heroes of Medicine” in 1997. He has lectured extensively, nationally and internationally, on topics related to blood conservation and surgical blood management, and has written numerous articles and book chapters on these subjects. Dr. Shander is the Chief of the departments of Anesthesiology, Critical Care Medicine, and Pain Management and Hyperbaric Medicine at Englewood Hospital and Medical Center, and Clinical Professor of Anesthesiology and Medicine at Mt. Sinai School of Medicine.

AWARD FOR SERVICE TO MEDICINE AND COMMUNITY
John F. Dick II, M.D. ’67
Dr. Dick is a physician with certifications in internal and critical care medicine. Following in the tradition of his physician father and grandfather, Dr. Dick practices in his hometown of Brandon, VT, and for the last 35 years has been an integral member of the Rutland-area medical community. At Rutland Regional Medical Center he has served on numerous committees and held positions including Chair of Medicine, Director of the Intensive Care Unit, and member of the board of directors. In 2006, in recognition of his contributions to the health and well-being of the community, RRMC honored Dr. Dick with their “Physician of the Year” Perkins Community Health Award. Dr. Dick served for two decades as a consultant to the former Brandon Training School for the Mentally Retarded, and he is currently in his 21st year as the Medical Director of Haven Health Care Center nursing home of Rutland. He continues to be a Clinical Instructor of the UVM College of Medicine, a role in which he utilizes house calls to educate students on the proper care of patients.

George W. Weightman, M.D. ’82
Dr. Weightman is certified in family medicine. He achieved the rank of Major General in the U.S. Army, and has earned numerous honors for his lifetime of service to country and medicine, including the Distinguished Service Medal; Legion of Merit; Bronze Star Medal; Meritorious Service Medal; Expert Field Medical Badge, and membership in the Order of Military Merit. He most recently served as Commanding General of the North Atlantic Regional Medical Command, where he oversaw the largest region in the U.S. Army Medical System, encompassing over 35 medical treatment facilities in a 21-state area. In 1989 he became the 82nd Airborne Division surgeon and served with them during Operations Just Cause and Desert Shield/Storm, and more recently oversaw medical care in a combat zone. As Commanding General of the 3rd Medical Command (Forward) and as Coalition Forces Land Component Command Surgeon for Operation Iraqi Freedom. Dr. Weightman’s military service has also included tours in Panama, Saudi Arabia, and Kuwait.

RECENT ALUMNI AWARD
L. Lucy Boulangier, M.D.’92
Dr. Boulangier is trained in internal medicine, infectious diseases, and epidemiology, and practices in Santa Fe, N.M. She was inspired to become involved in renewable-energy issues after serving as a clinician on a Navajo reservation, where she observed negative health effects in the population attributable to the local history of uranium mining and contamination. Dr. Boulangier and her husband, physician Dr. John D. Fogarty, are both board members of Physicians for Social Responsibility, and are co-directors of New Energy Economy, a renewable/clean energy advocacy organization. Dr. Boulangier has also served as a member of Governor Bill Richardson’s New Mexico Climate Change Advisory Group.

Matthew A. Conway, M.D. ’93
Dr. Conway is a general surgeon in Rutland, VT. As a Major in the U.S. Army Medical Reserve and a member of the 92nd Forward Surgical Team he has twice in recent years been called away from home and practice to serve to Afghanistan in 2002, where he earned a Combat Medic Badge, and to Baghdad in 2003-2004, where he earned an Army Commendation Medal. Closer to home, Dr. Conway is a member of the board of directors of the New England Division of the American Cancer Society, member of the board of directors of Rutland Regional Medical Center; has served as Vermont state chair/liason to the American College of Surgeons Commission on Cancer; and is a member of the Barstow Elementary and Rutland Northeast Supervisory Union school boards.

David M. Holmes, M.D. ’92
Dr. Holmes is a family physician in Buffalo, NY. He played a major role in establishing Good Neighbors Health Center; a clinic in inner-city Buffalo that provides free medical care to an underprivileged population. He currently serves as the organization’s medical director. Dr. Holmes has won awards for student mentoring and humanism in medicine from SUNY Buffalo School of Medicine, where he is a Clinical Assistant Professor of Family Medicine and Director of Family Medicine Clerkship and Electives. In June 2007 he will receive the Family Physician of the Year award from the New York State Chapter of the American Academy of Family Physicians.

Of you all often and hope to catch up with some of you while the East coast this summer.”

1993
Joanne Tiplin Roomey
22 Patterson Lane
Durham, CT 06422
(860) 349-6941

1994
Holiday Kane Rayfield
PO Box 194
Waitsfield, VT 05673
(802) 496-5677
rayfieldeld@yahoo.com

1995
Allison Bolduc Millard
235 Autumn Hill Road
South Burlington, VT 05403
(802) 846-9402
allison.bolduc@vtmednet.org

Brian Levine’s handbook, Aesthetic use in the Emergency Department was published in November by the Emergency Medicine Residents Association and is distributed to all emergency residents nationwide.

1996
Anne Marie Valente
66 Winchester St., Apt. 503
Brookline, MA 02446
anvalente@cardio.chboston.org

Patricia Ann King, M.D., Ph.D.
83 South Prospect Street
Burlington, VT 05401
(802) 862-7705
patriciaking@vtmednet.org

Cassandra Garcia and Vu Tran are doing well in

M.D. CLASS NOTES
999

1999
Evettn Jotham Lamm 11 Autumn Lane Stratham, NH 03885 (603) 293-7555 selkamm@comcast.net Deanne Dixon Haag 4215 Pond Road Sheldon, VT 05483 (802) 524-7528

2000
Jay Emmod Allard UHN Yokosuka PSC 475 Box 1275 FPO, AP 96503 jeallard@pol.net Michael Jim Lee 71 Essex Street Irvine, CA 92612 michael_j.lee88@yahoo.com

2001
Monica Fiorenza married Greg McCormick (Class of ’81) in June of 2001. Monica is enjoying pediatrics at Timer Lane Pediatrics in S. Burling- ton. Greg has joined Dr. Tom Carin and is staying busy with ophthalmology, corneal and refractive surgery. “We love being back in Vermont!” Christine Waas depp writes: “After four years in S. Korea I eagerly head to Denver, Colorado to start my pediatrics G.I. fellowship at Denver Childrens. After traveling much of Asia we look for- ward to being near family and friends in the U.S.”

2002
Ladan Farhoodoan 1481 Regatta Road Carlisbad, CA 92020 (858) 203-2068 lfarhoodoan@yahoo.com

Joel W. Keenan Greenwich Hospital Five Perynyde Road Greenwich, CT 06830 joelkeenan@hotmail.com John Louise Monaco Suite 6-F, 5E 4858 Warwick Blvd. Kansas City, MO 64112 (816) 733-2410 jmonaco@mac.com

2003
Omar Khan 33 Clearwater Circle Shelburne, VT 05482 (802) 985-1215 omar.khan@vtmednet.org Scott Goodrich 33 Mountain View Blvd. South Burlington, VT 05403 (802) 864-7787 scottgoodrich@uvm.edu

2004
Jillian S. Geider Jillian.geider@ vtmednet.org Emily A. Hannon emily.hannon@ hsc.utah.edu Steven D. Lefebvre fibonaci@uvm.edu

2005
Julie A. Alosi julie.alosi@vtmednet.org Richard J. Parent rich.parent@gmail.com

2006
William C. Eward william.eward@uvm.edu Deborah Rabinowitz debra.rabinowitz@ uvm.edu

THE SURGEON WRITER continued from page 18

year. Recently, I turned to face Patrick 2 and they, too, were nowhere to be found. The new ambulatory care center is showered in glass and full of sunlight. At night, it brightens like a lightbulb. When you drive up to the front entrance, you might, in a moment of fantasy, expect your bags to be checked for a midnight flight to Paris. In fact, the walls are all painted an institutional beige and, if you look closely, you can tell that they are adorned with just one coat. In some hallways, another is already needed. The doors and scraps are multiplying and my friends are spackling, sanding and painting. The walls have little or no memory. Absent are the bumps and ripples and coats and coats of paint that lock in the collective images of an institution. They lack the patina, the variegated burnish that only comes with the passage of time and the dust-ridden work of the hospital painters. Like the Velveteen Rabbit, only when your fur is rubbed off, can you know that you are really loved.

“What’s Left” column, UVM Surgery Newsletter, Spring 2006

Professor of Surgery Frank Irleman, M.D.
RAYMOND C. DENSEMORE, M.D. ’39
Dr. Densmore died in Copley Hospital in Morrisville, Vt., on Nov. 27, 2006, at the age of 92. He was born in Burlington on June 14, 1914. After grammar school, he attended Burlington High School, graduating in 1931. He received his bachelor of science degree at the University of Vermont where he became a member of Delta Psi, in 1936, and his medical degree cum laude in 1939. His internship was spent at Stanford Blake Memorial Hospital in New York, N.Y., after which he opened a practice in 1941 in Hardwick. On June 2, 1941, he married Sarah Peck of Hardwick, and on Aug. 18, joined the Army Medical Corps with the 36th Division, serving in Naples, Foggia, Rome, Arno, the Northern Appennines and Southern France. He was later assigned to hospitals in Italy, France and North Africa. He received the EAME ribbon with four battle stars, the bronze arrowhead, the victory ribbon and the combat medic badge. He returned to Hardwick on Feb. 6, 1946 and for the next 35 years made house calls throughout the area, visiting nearly every home in the nearby towns on his way to the clinic. In those years he was a regional medical examiner for the state of Vermont.

AVERY P. KING, M.D. ’42
Dr. King, a native of St. Alburn, Vt., died Jan. 4, 2007, at his home in Roswell, Georgia. He was born May 28, 1919, the son of James Samuel King, M.D., and Harriet C. (Hill) King. He married Mary Agnes Burke of Winowski, in 1942. A veteran of World War II, Dr. King served in the U.S. Army from 1942 to 1946, including the Monte Cassino and Anzio Battles. He worked in the emergency room of a forward surgical field hospital, one of the first MASH units. In 1946, Dr. King retired from the military as a lieutenant colonel and opened his urology practice in Oak Ridge, Tenn. Because of his surgical skills and wartime experience, Dr. King was often the surgeon of last resort for serious injuries in the Oak Ridge Hospital emergency room. When he retired in 1969, he had served on the boards of patients and had performed an estimated 10,000 surgical procedures over his career. An aviator his entire adult life, Dr. King was a commercial instrument multi-engine pilot with some 3,000 hours of flight time. He would use his small, private airplane to fly to the more remote parts of East Tennessee to provide medical services to those in need.

JOSEPH CABANZO, M.D. ’43
Dr. Cabanzo passed away at his Florida home on January 4, 2007. He was the son of Jose N. Cabanzo and Amelia Laborde, who came to this country from Santander, Spain, a city where his paternal grandfather built the famed Banco De Santander. Born in 1914, Dr. Cabanzo was a member of the faculty of the Department of Biochemistry for the past 31 years and was posthumously made an emeritus professor of biochemistry. According to his family, Dr. Cabanzo would often be seen driving around town in his convertible, listening to his favorite artist, Bruce Springsteen. Dr. Cabanzo spent many hours researching and developing a new therapy to prevent inappropriate deposition of connective tissue.

BENJAMIN H. MAECK JR., M.D. ’54
Dr. Maeck was born in Shreveport, La., on June 6, 1914, the son of Benjamin Harris and Hannah Edgerton Tracy Maeck. He died peacefully in his San Francisco home with his family on January 22, 2007. Dr. Maeck was a graduate of Northwood School, Lake Placid, and Dartmouth College, before earning his medical degree at the University of Vermont. He earned his medical degree at the College of Medicine at the University of Texas Health Science Center in Tyler, where he cared for patients and taught medical students and residents. Dr. Maeck retired from the university in 2000.

JOSEPH P. BATLAK, PH.D.
Dr. Batlak died on May 10, 2007 at his home in Underhill, Vt. Dr. Batlak was raised in Upland, Calif. and received his postdoctoral fellowship in Biochemistry at the University of Nevada, Las Vegas in 1979. After his postdoctoral fellowship, he moved to the University of Texas at Austin to work with Nobel Laureate Erwin Neher. He published numerous articles on the molecular basis of membrane electrophysics and pioneered some of the most innovative technologies for measuring and analyzing data from single channel recordings in both muscle and nerve. He was an emeritus professor of molecular physiology and biophysics, and had been a member of the faculty since 1986. He was a senior member of the class of 2007 at commencement. Dr. Patlak believed that every student was special and dedicated the best, and he was known for his informal classroom style. He led the charge in bringing the Internet to the College of Medicine. As his friend and colleague, Professor and Chair of Molecular Physiology and Biophysics David Warshaw, Ph.D. recalls, “Over the last several years, Joe taught us how to embrace and manage a fatal disease such as Amyotrophic Lateral Sclerosis. Although the outcome of this disease was certain, Joe constantly informed us of its progression. He described its toll from a scientific viewpoint, as only a physiologist could, while infusing his light-hearted persona.” Dr. Patlak is survived by his wife, Elke Pinn, M.D. ’89, and their son, Joseph and David.
May 2, 2007
12:45 p.m.

Medical students in the hallway of the Student Assessment Center prepare for their next session with standardized patients in the center’s examining rooms.

Photograph by Mario Morgado

Profiles in Giving

When Bellows Falls native Patricia A. Fenn, M.D.’65 arrived to study for her undergraduate degree at UVM in the mid-1950s, the path to earning an M.D. was anything but easy. As she recalled years later, she had wrestled with the question of whether the struggle to gain one of the few seats available to a female medical student was really worth the extreme effort. Finally, a good friend spelled it all out for her: “Pat,” she said, “You know you don’t really have a choice. You have to be a doctor. You just have to do this.”

Dr. Fenn publicly recounted that exchange more than 40 years later, when she was the recipient of the A. Bradley Soule Award, the highest alumni honor bestowed by the College of Medicine’s alumni association. By then, the thousands of patients she had helped over the course of four decades’ practice in rheumatology could also attest to Dr. Fenn’s deep personal qualities as a healer.

When she passed away this winter, Dr. Fenn left behind a substantial estate bequest to the College. Her undesignated bequest will allow the College the freedom to support the most pressing needs — the things that must be done. It was a gift, and a way of giving, that was so typical of this generous, caring physician.

Medical Development and Alumni Relations Office
(802)656-4014 medical.giving@uvm.edu www.med.uvm.edu/giving
For decades, David M. Babbott, M.D., served as a role model for students and residents he taught as a faculty member at the College of Medicine, before retiring in 1993. Dr. Babbott was known throughout the medical community for his deep commitment to listening to and connecting with each patient as an individual, and for his desire to teach that kind of approach to every student and resident with whom he came in contact.

In 2003, Meredith Babbott established the David M. Babbott Caring and Seeing Award to honor the career of her husband, through a generous gift that was matched by the Medical Alumni Association. Since then, every spring, a fourth-year student who, during their clinical education, has demonstrated a deep commitment to seeing the patient as a whole human being receives scholarship support from the Babbott fund.

Cristine Maloney is this year’s Caring and Seeing award winner. A native of Bristol, Vermont, Cristine showed her affinity for people throughout her clinical rotations. As one of her faculty evaluators wrote, Cristine “understands the importance of staying connected with both patients and colleagues through sensitive and empathetic interaction.”

Your gift to the College of Medicine can, as the Babbotts’ has, shape medical careers in positive ways for years to come. Donors have two new options for creating a named scholarship at the College — either a currently-funded or an endowed scholarship that leverages matching dollars provided by the Medical Alumni Association.

For more information on scholarship support, contact:
UNIVERSITY OF VERMONT COLLEGE OF MEDICINE
MEDICAL DEVELOPMENT AND ALUMNI RELATIONS OFFICE
(802) 656-4014  MEDICAL.GIVING@UVM.EDU
WWW.MED.UVM.EDU/GIVING