the Gift of Aging

Lois Howe McClure helps establish the UVM Center on Aging
STOPPING TYPHOID IN ITS TRACKS

With the help of the Vermont community, Beth Kirkpatrick, M.D., is finding a more effective way to counter a global menace.

by edward neuer t

AGING GRACEFULLY

The largest gift ever by the McClure family launches the UVM Center on Aging to help Vermont meet the challenge of an aging population.

by edward neuer t

A NEW ENGLAND JOURNAL

Students work to revitalize The Red Wheelbarrow, the College’s magazine of literature and the arts.

FROM THE DEAN

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The Class of 2012 settles in; a MERIT award for a College faculty member; a marathon with extra meaning, and more.

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ON THE COVER:

Photograph of Lois McClure by Raj Chawla
During a recent drive to an alumni gathering in Stowe, the changes in the color of the foliage was a clear signal that late summer was turning into early fall in Vermont. The seasonal change also signals the start of a new academic year at the College of Medicine. In early August I helped welcome the 149 members of the Class of 2012, a diverse and talented group who are already well into their first year classes in the Foundations level of the Vermont Integrated Curriculum.

This season is a personally notable one for me also, as I mark the end of my first year as dean of the College. A year ago at the reception graciously hosted by President Fogel, I noted how impressed I was with the physical proximity of all the elements that make an academic health center work — our College, the University campus, and our clinical partners at Fletcher Allen. Now, after twelve months in residence in the Given Building, I can truly say that that physical closeness is matched by personal experiences I’ve had and the people I’ve met throughout the past year.

It was a special pleasure for me and my wife, Tracy, to meet so many of you during Reunion this summer. The enthusiasm and pride our alumni feel for the College, and the steadfast interest in and support of all that continues to make our institution great, was inspirational and I am looking forward to all that lies ahead.

I have had many opportunities to connect with people beyond the boundaries of the campus, of course, and I am repeatedly struck by the extent to which our College is engaged with our community here in Burlington, across the Green Mountain State, and in the world beyond its borders. We as an institution exist to serve our community with a commitment to improve the health and wellbeing of all.

That mission and community connection was celebrated this summer with the announcement of the new UVM Center on Aging, established with a generous $5 million gift from local philanthropist Lois Howe McClaire. The Center will be directed by our own Professor William Pendlebury, M.D.’76, and represents the culmination of effort by many for Finance and Administration for the College of Medicine since January 2007. This is the essence of what our close connections can bring forth — the community helping us to do work that will in turn benefit the community for years to come.

"Brian has taken on an increasingly more significant role in managing the strategic financial and human resources of the College, demonstrating leadership and commitment in helping the College achieve its goals," said Dean Morin. "He has earned the respect of University leadership, of our partners at Fletcher Allen, and of the campus and Vermont communities, and I am pleased to have him as a member of my leadership team."

Cote joined UVM in 1986, and was named Director of Finance for the College of Medicine in 2001. He was appointed Assistant Dean for Finance and Administration in 2004, and Associate Dean in 2007 in this new role, Cote will have responsibility for Finance, Human Resources, and Information Systems for the College of Medicine, and will continue as Vice President of University Medical Education Associates (UMEA).
JUST THE FACTS: UVM TEAM WORKS TO EDUCATE VERMONT PRESCRIBERS

It’s no surprise to anyone in the health care community that pharmaceutical companies are spending big money to market drugs to physicians across the country. In Vermont alone, more than $3.1 million was spent on marketing drugs to physicians in 2007, according to a recent report from the Vermont Attorney General’s office. Two programs offered through UVM’s Office of Primary Care aim to educate prescribers, as well as medical students, about drug representatives’ tactics.

Together, the Office of Primary Care and Area Health Education Centers (AHEC) Program operate the Vermont Academic Detailing (AD) Program, one of the first such programs in the country. The term “detailing” refers to one of several strategies used by pharmaceutical companies to influence the prescribing behavior of physicians, nurse practitioners, and physician assistants. The detailing strategy, which is based on theories of social marketing and behavior change, involves person-to-person education and discussion by a pharmaceutical representative “expert.” Pharmaceutical companies spend millions of dollars each year on a sales and detailing workforce. Borrowing the successful format of expert, person-to-person, or small-group education used by pharmaceutical representatives, the academic detailing program focuses on educating prescribers using an evidence-based, unbiased presentation of safe, effective, and well-established treatments, rather than promoting a specific product.

Since 1999, the Vermont AD Program has been helping healthcare providers translate prescribing guidelines into practice. The one-hour, condition-specific (e.g., hypertension, depression, insomnia), case-based interactive sessions are delivered at practices by healthcare providers across the state and region. Tonic representatives’ tactics.

The Program in Wise Prescribing approach centers on the general methods and effectiveness of pharmaceutical marketing. Pinckey is the principal investigator on this grant. The Wise Prescribing educational program will be disseminated nationally in 2009 through a partnership with AHEC.

M.D., associate professor of medicine, Richard Pinckey, M.D., assistant professor of medicine, Amanda Kennedy, Pharm.D., research assistant professor of medicine, and Fletcher Allen Health Care pharmacists Michele Corriveau and Gary Starecheski. The program presents an objective overview of what evidence from studies shows about various drugs used to treat a medical condition, and where appropriate, emphasizes the importance of lifestyle change and non-drug therapies as the building blocks upon which drug therapies may be added. This program is funded by multiple sources, but there are no drug company sponsorships, nor do any of the team members have any ties to the pharmaceutical industry.

Launched in 2007, a second program called the Program in Wise Prescribing is a UVM Office of Primary Care initiative funded by the American Society of Clinical Oncology in Chicago by Professor of Medicine Steven Grunberg, M.D. Chemotherapy-induced nausea and vomiting treatments.

TREATMENT TARGET

IDENTIFY NOVEL TREATMENT TARGET

Research by Associate Professor of Medicine Mercedes Rincon, Ph.D., (pictured at left) and colleagues has opened up a potential new pathway for pharmaceutical development. This new work, recently reported in the journal Science, has connected two key signaling pathways commonly used as therapeutic targets for drug discovery. The group’s findings link glycogen synthase kinase-beta (GSKbeta), a key enzyme known to be involved in metabolism, neurodegeneration and cancer, and p38 mitogen-activated protein kinase (MAPK), which plays a role in inflammatory responses.

Rincon and her team have now discovered a novel mechanism that inactivates GSKbeta. Tina Thornton, Ph.D., a postdoctoral associate in Rincon’s group, has elegantly demonstrated that GSKbeta is also inactivated by phosphorylation mediated by p38 MAPK. With the help of the UVM Proteomics Facility, directed by Dwight Matthews, Ph.D., professor and chair of chemistry, Rincon’s team has identified the amino acid Serine 389 located at the end of C-terminal region to be phosphorylated by p38 MAPK. More importantly, a synthetic peptide— a small protein fragment— of GSKbeta at the C-terminal containing a phosphate in Serine 389 blocks GSKbeta activity. These results are promising for development of novel therapies to block GSKbeta and enhance cell survival.

In the science publication, Rincon’s team also shows that this novel mechanism inactivate GSKbeta through p38 MAPK takes place primarily in the brain and thymus (the gland where T-lymphocytes are generated) to promote cell survival. “We think this mechanism is important for promoting cell survival in thymocytes and, likely, nerve cells,” said Rincon. “Since inhibitors of p38 MAPK are currently in Phase I clinical trials for treatment of rheumatoid arthritis as anti-inflammatory treatments, these drugs should be taken with caution, since they may enhance neuronal or thymocyte death,” added Rincon.

Additional co-authors on the Science paper include postdoctoral associate C. David Wood, Ph.D., and Alexander Aronsham, a lab research technician in the immunobiology division of the Department of Medicine.

RESEARCH MILESTONES

RINCON AND COLLEAGUES IDENTIFY NOVEL TREATMENT TARGET

Promising results from a Phase III clinical trial of casopitant, a novel therapy for one of the most troubling adverse effects of cancer treatment, were presented May 30 at the 44th Annual Meeting of the American Society of Clinical Oncology in Chicago by Professor of Medicine Steven Grunberg, M.D. Chemotherapy-induced nausea and vomiting treatments.

Casopitant, a novel treatment for chemotherapy-induced nausea and vomiting, achieved a significant reduction in the number of patients experiencing nausea with fewer side effects than the standard dexamethasone (CINV) treatment.

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Can Cholesterol-Lowering Medication Reduce the Risk of Breast Cancer?

Despite major advances in early identification and treatment of breast cancer, it is estimated that more than 282,000 new cases of invasive breast cancer and almost 41,000 breast cancer deaths are expected to occur among women in the United States in 2008. Currently, researchers at the Vermont Cancer Center are examining cancer prevention strategies to help improve these statistics.

Previous research shows that women who have taken statins—a class of cholesterol-lowering drugs—are less likely to develop breast cancer. Professor of Medicine Marie Wood, M.D., who is also director of the High Risk Breast Program at the Vermont Cancer Center, is leading an ongoing research study to determine whether taking the popular medication Lipitor can reduce a woman’s risk of developing breast cancer.

“Any reduction in breast cancer risk is important. Statins are a medication that has been used very widely and is generally safe,” said Wood. “In one study, women who had taken Lipitor for one year had a 32% lower breast cancer risk.”

For four months, more than 40 yellow-shirted students in the College of Medicine’s Class of 2011 trained for the KeyBank Vermont City Marathon (VCM), which took place April 4, 2008. Among the remaining 24 teammates, four of whom ran a half-marathon, participated in the relay. Their efforts were fueled by hundreds of donors, supports Sholler’s research.

With neuroblastoma and focus their research—one that is important—there were many grants and I’m involved in several others. I sometimes liken it to the life of a politician, who has to spend time raising funds to support the projects I’m working on and the people who are working with me.

The Penelope & Sam Fund, established by donors, supports Sholler’s research. Participants will also be asked to complete questionnaires on medical history, diet, and physical activity.

3 QUESTIONS FOR MARK NELSON, PH.D.

Q: How would you broadly describe your research?
A: We have two major areas. One is the urinary bladder. We study what controls the contractility of the bladder, which controls the two functions of the bladder, filling and voiding. We also study what goes wrong in the body to cause incontinence, on the molecular and the in vivo levels. This is a huge medical issue that affects almost 20 million people in this country, with no really decent drugs to treat it. So we have a number of candidates—proteins that have a profound control over bladder function, and probably don’t work properly in urinary bladder disorders. The other project, which can be viewed as different—but which in many ways is similar, involves understanding blood flow control in the brain, which relates to the basic function of how oxygen nutrients are delivered to the neurons in the brain from moment to moment and what goes wrong in such conditions as hypertension and Alzheimer’s disease.

Q: What are the criteria for a MERIT award?
A: Each grant’s competitive renewal involves months of effort to prepare. As a researcher, you often spend 20 percent of your time either writing progress reports or renewal paperwork. The grant process is an important one—it makes people think about and focus their research—but does also consume an enormous amount of time. The value of the award is there in its name—Method to Extend Research in Time. It provides that continuity of funding that will enable me and the other people in my lab to take a broad view of our projects and move them forward without having to spend time writing and competing for grants. It provides more time for the lab and myself to actually do research. I have three NIH grants and I’m involved in several others. I sometimes liken it to the life of a politician, who has to start spending time fundraising right after first taking office. So getting this MERIT frees up a lot of time. It also provides extra continuity in the lab, knowing that I have the funds to support the projects I’m working on and the people who are working with me.

MERIT AWARDS

Several members of the College of Medicine faculty have been honored with MERIT awards over the years. Included among this prestigious group are Paula Fives-Taylor, Ph.D., professor emerita of microbiology and molecular genetics (1994); Stephen Higgins, Ph.D., professor of psychiatry (2003); Kenneth Mann, Ph.D., professor of biochemistry and medicine (1989); and Susan Wallace, Ph.D., professor and chair of microbiology and molecular genetics (1995).
A grant from the Robert Wood Johnson Foundation (RWJF) is funding research at the College to explore how interactive digital games could be designed to improve players’ health behaviors and outcomes. UVM joins eleven other research teams supported in this first round of funding from Health Games Research, an RWJF national program established to strengthen the evidence base related to the development and use of games to achieve desirable health outcomes.

Peter Bingham, M.D., associate professor of neurology and pediatrics, is the RWJF grant recipient. His research project, titled “Breath Biofeedback Video Game for Children with Cystic Fibrosis,” will explore whether a breath biofeedback video game can improve cystic fibrosis (CF) patients’ self-administration of inhaled medications, engagement in respiratory exercises and awareness of their respiratory status. The game uses a breath controller and game software developed by a research team at Champlain College’s Emergent Media Center in collaboration with patients in the target user group. In addition to potentially helping CF patients manage their condition and maintain better health, the game also may be useful for children and adults with asthma and other forms of chronic obstructive pulmonary disease.

“Bingham began exploring the concept of turning CF patient breathing training into a video game several years ago. He approached his colleague Jason Bates, Ph.D., a professor of medicine working in the Vermont Lung Center, for help with the practical aspects of testing the concept. With funding from the Office of Technology Transfer’s UVM Ventures program, the UVM research team can work to bring the concept to a more sophisticated level. “This collaboration plays to some of the key strengths of the UVM College of Medicine and Champlain College,” said Ann DeMarle, director of UVM Ventures. “The combination of disciplines required to tackle this issue presents the perfect opportunity for our students to work with young patients, faculty, and researchers to create media that could positively impact their lives as well as those of other cystic fibrosis patients.”

Health Games Research is headquartered at the University of California, Santa Barbara, and is funded by an $8.25 million grant from RWJF’s Pioneer Portfolio, which supports innovative projects that may lead to breakthroughs in health and health care. The 12 grantees were selected from 112 research organizations that applied for Health Games Research funding during the first funding call, which focused on games that engage players in physical activity and/or games that promote and improve players’ self-care. As UVM and the other eleven grantees conduct their research projects, they will be showcased at the symposium, designed to showcase the scientific and training accomplishments of the Institutional Development Award (IDeA) Program of the National Center of Research Resources (NCRR) at the National Institutes of Health, featured high-level scientific presentations and open discussions and exchange of ideas on science and training. The IDeA program consists of the Center of Biomedical Research Excellence (COBRE) and IDeA Networks of Biomedical Research Excellence (INBRE) programs and focuses on developing scientific centers of excellence and training biomedical scientists in states such as Vermont that are in the minority for federal funding for biomedical research.

UVM currently has three COBRE grants and one INBRE grant.
Frymoyer Scholarship Program Supports New Educational Efforts

The Frymoyer Scholars program entered its sixth year of support for clinician-scholars this year, with scholarship funds allocated to support the work of three members of Vermont's academic health center. The Frymoyer Scholars Program supports clinician teachers—distinguished physicians and nurses who are recognized for their ability to understand and demonstrate humanistic interaction between clinician and patient. The program is an investment in outstanding medical education and promotes teaching that emphasizes the art of patient care. Scholars are selected based on the quality of their project proposal; the strength of the project's contribution to improvement of the relationship between clinician and patient; and evidence of commitment to evidence-based clinical education, commitment to project and support of department/division/program. The program is supported by The John and Nan Frymoyer Fund for Medical Education. Dr. Frymoyer served as dean of the College of Medicine from 1991 to 1999 and also served as CEO of Fletcher Allen from 1995 to 1997. Nan Frymoyer is a former community health nurse and has a strong interest in patient advocacy. She serves on the UVM College of Nursing and Health Sciences advisory board and helped plan and implement the Frymoyer Community Health Resource Center at Fletcher Allen Health Care.

This year's scholarships were awarded to two projects, one to be undertaken by Assistant Professor of Medicine and geriatric specialist Robert Karp, M.D.; the other is a joint effort by Nancy Morris, Ph.D., D.P.R.N., associate professor of nursing, and Peter Igneri, PA-C, M.M.Sc., clinical instructor of family medicine and surgery.

Karp’s proposal, titled “Improving Basic Medical Student Competencies in Clinical Geriatrics,” focuses on the development of a web-based educational program for attending physicians that provides the necessary information and skills they will need to teaching medical students about geriatrics. Using COMET, the College of Medicine Educational Tools web-based learning system, Karp aims to align each of the program’s eight learning modules with the proficiency required of graduating medical students. Karp will initially design modules for four of the eight required domains, including hospital care for elders, falls, balance, gait disorders, self-care capacity; and health care planning and promotion.

Morris and Igneri were selected for their project proposal titled “Communication and Psychomotor Skills for Minor Office Procedures to Improve Access and Enhance Quality Care.” Their project proposes a nurse practitioner training program that will provide the skills to perform office-based minor clinical procedures. The innovative program will incorporate the use of standardized patients, members of the community who take on the role of patients with specific medical histories. After piloting the program, the two Frymoyer Scholars hope to be able to extend the training to medical students, physician assistants and physicians already in practice.

"Communicating clearly with patients is critical," says Morris. “The Frymoyer Scholarship provides a way to teach nurse practitioner students common office procedures, while paying special attention to communication strategies, such as how to explain the procedure, obtain consent, and teach necessary aftercare to the patient.” Increasingly, there are more technologically advanced simulators available, which colleagues treat like a new gadget or video game system, but a video game cannot give emotional feedback to patient care demands,” says Igneri. “With this project, we hope to marry technology and human touch.”

Participants in the Champlain Valley AHEC MedQuest program live in UVM residence halls, eat on campus, have access to University of Vermont resources, and shadow with and learn from a wide range of health care professionals at Fletcher Allen, Northwestern Medical Center and Porter Medical Center. Representatives from the fields of nursing, dentistry, medicine and other health areas interact with students in lecture-based and job shadowing settings.

Middlebury High School student Amer Avdagic took an advanced biology class his junior year and wanted to get a first-person perspective of the health care field. Emily Cordra of South Burlington is interested in nursing as a career and wanted to find out if she could handle the work the job requires. Nominated by their high schools to participate in the Champlain Valley Area Health Education Center (AHEC) MedQuest Health Careers Exploration Program, Avdagic and Cordra are two of sixteen junior and senior high school students from Addison, Chittenden, Franklin, and Grand Isle Counties who participated in this six-day-long camp this summer, based at the University of Vermont/Fletcher Allen campus, that offered an in-depth exploration of health careers.

Offered during the summer months by the Champlain Valley AHEC in St. Albans, the Southern Vermont AHEC in Springfield and the Northeastern Vermont AHEC in St. Johnsbury, the MedQuest program provides highly motivated Vermont high school students with an opportunity to job shadow with health care professionals, receive training in basic medical skills, CPR and first aid, learn about medical technologies, as well as take part in leadership skills-building activities. UVM medical students help staff the program.

“I’m pretty set on athletic training, but I wanted to learn about the different health care fields,” said Avdagic, who was looking forward to viewing a laparoscopic surgery live via telemedicine at the UVM College of Medicine on Friday morning. Both he and Cordra have friends who took part in past MedQuest camps and recommended the program.

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With the help of the Vermont community, Beth Kirkpatrick, M.D., and her colleagues are finding a more effective way to counter a disease that affects tens of millions of people across the globe every year.

“**It’s Dosing Day!**” Clinical Research Associate Katrin Sadigh says in a stage whisper, as the hands of her wristwatch read 7:30 a.m. on a Wednesday morning in late July. Sadigh, along with Associate Professor Beth Kirkpatrick, M.D., and several other colleagues are clustered at one end of the hallway of the third-floor corridor of the Arnold Wing of the University Health Center in Burlington. There’s a pause of several seconds, and a few anxious glances, and then down the hallway comes the first of this morning’s 15 important guests — volunteers who today will swallow a dose of a new vaccine for typhoid fever that could help better the lives of millions of people half a world away.

“It’s important to keep in mind the 80 percent rule — the fact that more than eight out of ten prospective vaccines never make it past Phase I trials,” says Kirkpatrick, as she stands in the crowded doorway of her lab space in Stafford Hall. Next to her stands a stack of insulated shipping cartons that contain blood samples from Miami Research Associates in Florida, and from the Bloomberg School of Public Health at Johns Hopkins University. Lab personnel are busily pulling blood vials, arranging tests, and logging data. A few steps away, in a small office area, assistants are interviewing prospective participants for the next round of this Phase II vaccine dosing.

All the activity swirling around Kirkpatrick is focused toward one effort: proving the safety and dosing level of an oral typhoid vaccine developed by Emergent Technologies of Rockville, Maryland. If proven, this vaccine could be a vastly more versatile tool to prevent typhoid cases in the developing world, thanks to
its single dose and powdered stored form, that makes it much easier to administer and transport than current vaccines, which are either delivered by injection or multiple doses, or need constant refrigeration before use.

Since coming to UVM in 1999, Kirkpatrick, who has a faculty appointment in both the Department of Medicine and the Department of Microbiology & Molecular Genetics, has built a unit with a reputation for tackling some of the most pressing needs in vaccine research. Through her efforts, last year UVM/Fletcher Allen was chosen as the single participating academic medical center in the nation to collaborate with the Navy Medical Research Center and a Denmark-based company in testing a new vaccine against one of the most common foodborne bacteria, Campylobacter jejuni.

Kirkpatrick has made infectious disease research her focus for years. After receiving her medical degree from Albany Medical College and completing a residency at Rochester, she pursued a fellowship in infectious diseases at Johns Hopkins and certification in Tropical Medicine and Travelers’ Health in Peru.

“My research in infectious disease and vaccines really stems from my interest in global health in general,” she says. That interest earned her a shared 2006 Frymoyer Scholarship at the College that funded work to enhance global health education for medical and nursing students.

Today in Vermont, and throughout the U.S., typhoid is a disease more read about than seen, thanks to improvements in sanitation and antibiotics. The disease is a bacterial illness, caused by Salmonella enterica, that commonly causes severe chills, sweating and pain, along with high fever, diarrhea, and internal bleeding that can lead to death. It was seen in large outbreaks in the U.S. during the Civil War, when 25 percent of soldiers who died of disease succumbed to typhoid. (Typhoid killed both Abraham Lincoln’s son, William, and the president’s famous debate partner, Senator Stephen Douglas.)

In Vermont, as in many other states, mass outbreaks were fairly common in the 19th and early 20th centuries. An outbreak in Windsor in 1894 sickened more than 130 people, killing ten percent of those. Typhoid continued to be a major problem in rapidly-growing U.S. cities in the early 20th century. It was at this time that Mary Mallon, a cook in the New York area, became famous as “Typhoid Mary,” the first healthy carrier of the disease to be identified by public health authorities.

Nowadays, only an isolated case or two of typhoid occurs in Vermont every decade, but in parts of the world where sanitation and drinking water supply are still below standard, Salmonella enterica is a common and devastating visitor. An estimated 22 million people in the developing world had typhoid in the last year, and at least 200,000 died from it; most of them were children.

“Though there are two approved vaccines for combating typhoid, both present problems for delivery. "In the many regions where lack of infrastructure means refrigeration is not possible, getting a vaccine to the people who need it most is a real problem," says Kirkpatrick. “That’s the promise of this vaccine, that it will be highly effective, and much easier to use as a public health tool.”

The development of this new vaccine, as with all others, followed the carefully-mapped pathway set out by the U.S. Food and Drug Administration, which is set up to protect the safety of vaccine trial volunteers at every step. After a small first study confirmed safety in humans, two Phase I trials were conducted by Kirkpatrick in 2003 and 2005. Kirkpatrick’s lab developed a specialty in the complicated analysis of blood samples from volunteers to confirm the presence of anti-typhoid antibodies in their systems after vaccination, and this led naturally to their doing all the immunology for the latest Phase III trial.

For second-year medical student Brian Kilonzo, who worked in the Kirkpatrick lab this summer, typhoid is anything but a disease that happens “elsewhere.” A native of Kenya, Kilonzo grew up with the risk of typhoid as a regular part of daily life. “It’s personal, for me,” he says. “Being a part of helping test this vaccine is very meaningful.” Kilonzo originally met Kirkpatrick and heard about the vaccine trial through the College’s Global Health Group.

Second-year student Erin Beardsworth also spent this past summer working on the project. The medical students helped hang posters seeking recruits, screened prospective volunteers over the phone, assisted in lab work, and helped run the three “dosing days” when volunteers received the vaccine. Beardsworth, who was a trained phlebotomist before medical school, helped draw blood samples from the volunteers on dosing day. A third current medical student is one of the study participants.

As Dosing Day proceeds, participant David Vuono seems calm and completely at peace with the fact that he’s about to swallow a few thousand inactive typhoid microbes. This is territory he’s covered before.

“I was a volunteer on the Campylobacter study last year,” the 25-year-old photographer and UVM graduate explains in the waiting area. “I survived that one just fine, and I’m sure I will this one too. For me this is a learning experience and a chance to help with something important.” Vuono and his fourteen fellow volunteers in the group have all been extensively briefed on the safety and possible side effects of the vaccine. They all keep a diary in which they log such information as twice-daily temperature readings. They come back to the clinic six times over the following month for evaluation. All trial participants receive a $500 payment.

Ultimately, all the preparation and careful planning comes down to the moment when Vuono and his group unscrew the caps on their liquid doses, and sip down the lemon-lime flavored concoction. If this trial is a success, in a year or so thousands of other people throughout the developing world will also be swallowing the vaccine as a part of a final stage of development, widespread Phase III field trials.

“That will be the ultimate test, but we wouldn’t get there without our volunteers,” says Kirkpatrick. “It’s really a tribute to our relationship with the community that people are willing to do this.”

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The largest single gift ever by the McClure family launches the UVM Center on Aging to help Vermont rise to the challenge of an aging population.

by EDWARD NEUERT

Medical science, take a bow. Your goal was to combat disease and bring long, healthy life to millions of patients, and you’ve succeeded beyond anyone’s wildest dreams. Thanks to penicillin and other discoveries, the servicemen of World War II survived their battles in record numbers, and came home to produce the greatest demographic bulge of offspring ever seen in America. Those resulting Baby Boomers have watched survival rates for heart disease, cancer, stroke, and many other conditions climb higher every year. Millions of people who in earlier days would have died young, from infections, from childbirth complications, from trauma, have instead recovered and lived on.

And now, the challenge: how to take that good news, and keep it good. Breakthroughs and better treatments, declining birthrates, along with many improvements in social science and policy, have led to a steadily rising percentage of older Americans. The change is already happening, and will become increasingly apparent in the next 20 years, particularly in a small state like Vermont, where by 2030 one in four residents will be over age 65. As society ages, it has profound implications for all aspects of life. The “wave” of aging is on the horizon; how we go about positioning ourselves now will determine how well we ride that wave when it reaches us.
Standing in the fragrant gardens of UVM’s Englesby House on a warm July day, just after the formal announcement of her gift to found the new center, Lois Howe McClure speaks to a gathering of supporters of the Center from across the University, and state and non-profit agencies. “The statistics are really scary,” she says. “I really don’t think we’re ready for it.” For one mid-day hour, the honeybees that normally have the garden to themselves this time of year have been displaced by the prestigious group of public figures who have gathered for the announcement event in July. Including (from left) Lt. Gov. Brian Dubie, William Pendlebury, M.D. ’76, Mary Cushman, M.D. ’85, Gov. Jim Douglas, Dean Rick Morin, Lois McClure, Dean Betty Rambur, President Fogel, and Rachel Kahn-Fogel. At right, Fogel extends personal thanks for the McClure gift.

The call for a special effort to produce a white paper on aging issues came in 2006, from the University’s provost and Graduate College. William Pendlebury was charged with forming a working group that would study the problems of an aging Vermont, and suggest actions the University could take to help contribute to solutions. “It was paramount, for me, that this effort be broad-based, and university-wide,” says Pendlebury. Trained as a neurologist, Pendlebury later did a fellowship in neuropathology; today he is a professor of medicine, neurology, and pathology at the College of Medicine, is medical director of the Memory Center at UVM/Fletcher Allen Health Care, and performs research focused on age-related degenerative disease. Currently he is the lead investigator at UVM on a Phase 3 clinical study examining a new approach to treating Alzheimer’s disease using a therapeutic antibody called bapineuzumab, that helps the body’s own immune system to clear Alzheimer’s-inducing plaques from the brain. The white paper working group included mem-

For Lois McClure, the realization of the need for better understanding of aging issues came originally not from statistics, but from a personal experience she had a couple of years before Mac’s 2004 death, when they were on a trip to Philadelphia. They were waiting to board a flight back to Burlington when Mac fainted, she recalls. “He came to fairly promptly, but we were told he could not board until he had been seen at the hospital. This was the start of a very difficult two days.”

McClure was carrying a list of all her husband’s current medications, as well as other pertinent information, but none of that seemed important to the health care providers she encountered at the emergency department. After an inconclusive day, Mac was admitted to the hospital and Lois was told to find herself a room in a local motel.

“The next morning, at 5:00 a.m., I returned to the hospital, but was told I could not go to the patient floor until 8:00 a.m. I insisted they call the patient floor anyway. As it turned out, they were quite anxious for me to come to the floor at once. It had been a bad night, and my husband was eventually moved to a room next to the nurse’s station.”

From her position next to the station, Lois heard that more tests were in store for her husband. She decided to take action. She called the airport and found there was a plane leaving for Burlington in two hours. “Despite significant protest from the staff,” she says, “I helped dress my husband and we left by cab to the airport and, eventually, home. I made a promise to myself and to Mac that we would never find ourselves in this situation again.”

A few weeks after this incident, at a support group meeting for relatives of those who, like Mac McClure, had Alzheimer’s disease, Lois met that day’s featured speaker, Dr. Pendlebury. She told him of her experience, and her realization that many other Americans must be put in such situations every day — conditions that may only get worse as the number of older Americans increases. She contrasted her Philadelphia experience to a time many years earlier when the caregivers at the Vermont hospital where her daughter was a patient encouraged her to spend the night close to the child. Pendlebury listened to her story of an imperfect health care system, and remembered it when, several months later, he was charged to lead a working group on aging-related issues.

With that challenge in mind, one of Vermont’s foremost philanthropists, Lois Howe McClure, has made the largest gift ever by the McClure family to help find ways to meet the challenge. The $5 million McClure gift, coupled with $100,000 in funding from the State of Vermont, has underwritten the establishment of the Center on Aging at the University of Vermont.

McClure had as community leaders, including many years as owners and publishers of of the Burlington Free Press, Vermont’s largest daily newspaper. At this announcement, the assembled dignitaries have made a point of praising both her generosity, and her prescience in foreseeing a demographic shift that could, if ignored now, lead to many problems in the not-too-distant future.

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A RECORD OF SUPPORT

For decades, UVM and Vermont have benefited from the philanthropic spirit of Lois Howe McClure and her late husband, J. Warren “Mac” McClure.

- In 1978, the McClures made a $500,000 challenge grant toward the renovation of Bailey-Howe Library (which is named after Lois’s late father, David Howe).
- In 1987, a $1.5 million gift established the McClure Challenge Grant toward the renovation of the Bailey-Howe Library (which is named after her husband, and realized how much she could contribute to the process of building this report,” says Pendlebury.

The group worked for several months researching, compiling data, and seeking out information and opinions from people across the University and the wider community. Their report paid special attention to producing an assessment of “aging-related research at the University of Vermont and the organizational structure needed to support these endeavors.” It concluded that a new Center on Aging at the University of Vermont was needed to serve as a resource for the efforts in many areas — medicine, nursing, economics, sociology, business, and political science to name a few — that dealt with the rising tide of elders in society.

“This Center will function as a core, a resource facility, to coordinate efforts across the larger organization and bring about connections that need to happen. We’ll help people who are interested in aging health research and education and policy find additional resources that will move their programs forward,” says College of Medicine Dean Frederick Morin.

The Center will also work to create a subtle but important cultural shift. In general, the University’s working group concluded, society has bred an attitude toward aging that is more negative than positive — aging as something to be feared rather than embraced. Education is the key to this change, says group member Deborah Worthley, the director of UVM Continuing Education’s Osher Lifelong Learning Institute. “Society often views older people as a burden,” Worthley says. “We need to change that sense of what aging is all about, and the potential contributions seniors can make to the community. That attitude needs to be shifted, and clearly education is one of the ways to do that.”

The Center will also focus on workforce issues. Twenty-five years from now, when Vermont is predicted to rank seventh in the nation in percentage of population over 65, with one out of every four people in that age bracket, then significant changes in workforce policy and economics are inevitable. “This shift has major implications,” said Gov. Douglas, “not only for the number of people available to work in the state, but also for our ability to pay for entitlement programs.” Pendlebury continues. “I think there’s going to have to be a focus on people staying in the workforce longer, and creating the climate in which people do not feel compelled to retire,” he says. “There are going to have to be tough discussions about what ‘retirement age’ is, and when entitlement programs kick in. The fact is, more seniors are going to be a part of the workforce, because we’re going to need the people to do the work that needs to be done, and we’re going to need the workers to support those who are in retirement and receiving the benefits of entitlement programs.” This shift will undoubtedly be seen in coming years in the health care workforce, for instance, as more physicians and nurses are encouraged to remain practicing through restructured jobs and scheduling. The Center on Aging will work to make the connections that will help those changes come about.

The Center on Aging is, of course, a newborn, and the first actions it will take will be to reach out to stakeholders throughout the community — at the University, at state agencies, and at non-profit agencies — to bring together people with similar goals. Building an external scientific advisory committee is another important step, says Pendlebury. “We’d like to find three to five people who are viewed as national experts in gerontology to advise the center on how it views itself and how it approached its work.” Pendlebury will also meet with similar Centers in other states over the next months to view how it views itself and how it approached its work. Looking over the work she has done so far on the issue, and the work that will now take place following her gift, Lois McClure is firmly convinced of the importance of aging issues. “I’m glad to be able to support this,” she says. “This is not only something we have to pay attention to, we have to pay attention to it now.”

AN AGING VERMONT

A comparison of real and projected data from the U.S. Census Bureau shows the marked change in Vermont’s population by the year 2030. By the third decade of this century the percentage of people over 65 will nearly double.

Percentage of Vermont Population by Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2000</th>
<th>2030 (projected)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-19</td>
<td>27.3</td>
<td>29.0</td>
</tr>
<tr>
<td>20-39</td>
<td>20.0</td>
<td>19.6</td>
</tr>
<tr>
<td>40-64</td>
<td>25.4</td>
<td>24.5</td>
</tr>
<tr>
<td>65+</td>
<td>12.7</td>
<td>14.2</td>
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</tbody>
</table>

[Percentage of Vermont Population by Age Group]
FOR THE PAST DECADE, The Red Wheelbarrow has been the College’s student-run journal of literature and art. The publication takes its name from a sixteen-word poem published in 1923 by America’s greatest physician-poet, William Carlos Williams. Williams led both a life as a leading poet of his generation and as a general practitioner who delivered more than 2000 babies in the course of his 40-year practice in Rutherford, N.J.

The red wheelbarrow of Williams’ poem came from a detail he noticed looking out the window while sitting at the bedside of a patient. Second-year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake Scott sought to rejuvenate the journal, which had not been published in 2000 — a year medical student Jake 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Mrs. L was a seventy-five-year-old woman who had been admitted three times in the past six months. One hospital stay alone had lasted eight weeks. She had renal disease and severe congestive heart failure. Pain was a constant problem associated with her rheumatologic condition and bowel dysfunction. Mrs. L lived on a small farm in southern Vermont with her husband of fifty-six years, a grandson, five horses, and nine dogs. Her two sons and daughter lived within a short distance.

“‘The most important thing to me is to go home,’” she said many times. “‘I know my life is short and you all have done as much as possible. Spring is when I plant my garden and the horses will be frisky in their pasture. Didn’t I tell you we had nine dogs? How can they get along without me?’”

“‘We still haven’t been able to control your heart failure and the fluid on your lungs. You may end up coming back to the hospital.’”

“A garden and my family are part of my life.”

Mrs. L was discharged home and died peacefully five days later. I am sure there will be a garden this year.

— Allan Ramsay, M.D.
In the process we will be richer.

We can help — and ni leadership — I have the privilege of hearing directly from students how our financial burden.

The opportunities are endless but not without cost. During my tenure, you will become accustomed to my asking all of you to generously give back to this school which made our professional lives possible.

Hearing how our primary care! — and a steadily growing reputation for research. We were not allowed in at first and spent a few years in Cuba before coming to the U.S. After attending medical school he practiced surgery for many years in Connecticut. Bill Sohn was practicing at the time of the Class of 1951’s last Reunion — he passed away this past March. His daughter resides in Burlington, Vt. Francis Conklin has given up her annual Caribbean trips to spend time with her beautiful granddaughter.

Mordo MacDonald lives at Appleton Point in Burlington and has had three hip replacements on the same hip in addition to shoulder replacement. This football veteran is still gardening though and gets around. He says he’s very proud of his son, who teaches acting in Boston, Montreal and Toronto. Ed Jenkins is doing well. He had the pleasure of attending a family practice course in June in Burlington, although it was hotter than Burlington in than and there were tornado warnings!

Ed Eser writes that he has practiced his entire career in Sweden, where he also played in an orchestra in Stockholm. He was sorry to miss the orchestra in Stockholm.

26 VERMONT MEDICINE F A L L 2 0 0 8 27
M.D. CLASS NOTES

1955

Marshall C. London
103 Summit Street
Burlington, VT 05401
(802) 846-4927
mlondon20@ufl.edu

1956

Ira H. Gesner
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Douglas M. Black
1958

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Gainesville, FL 32605
1306 Northwest 31st Street

1957

Larry Coletti
34 Gulliver Circle
Norwich, CT 06350
(860) 877-1550
lcoletti@wwbh.org

1959

Jay E. Selcow
27 Reservoir Road
Bloomfield, CT 06002
(860) 241-4559
jeselcow@comcast.net

1960

Marvin A. Nierenberg
15 West 9th Street
New York, NY 10024
(212) 874-6484
m.nierenberg@att.net

Melvin H. Wolf
Clinton Street
P.O. Box 772
Waverly, PA 18472
(570) 859-2415
melliemar@aol.com

1961

Wilfred L. Fortin
17 Chapman Street
Nashua, NH 03060
(603) 882-6202
wilfy100@aol.com

George Reservitz
is enjoying semi-retirement. He has started a free health clinic at Mt. Auburn Hospital in Cambridge, Mass.

1962

Ruth Andrea Seeler
2431 North Orchard
Chicago, IL 60614
(773) 472-3432
n.wohnert@icloud.com

1963

John J. Murray
P.O. Box 607
Colchester, VT 05446
(802) 865-9390
jackjmurray@aol.com

H. Alan Walker
249 Champlain Drive
Plattsburg, NY 12901
(518) 563-2215
melliemar@aol.com

Arnold Kerzner writes: “Not retired yet, but we have moved from the ‘burbs’ to Lowell, Mass., to become urban pioneers. We’ve been welcomed to...”

Arnold Kerzner
1958

Ruth Andrea Seeler
2431 North Orchard
Chicago, IL 60614
(773) 472-3432
n.wohnert@icloud.com

GLOBAL LEARNING

One way the College of Medicine Fund helps foster medical students’ learning experience is by funding student travel learning. Three times a year, through a competitive grant application process, funding is awarded to a limited number of applicants. This past Spring the first round of grants were awarded and students traveled this summer to such places as Bangladesh, Tanzania, Tokyo, Japan, Ethiopia, and Colorado to experience and learn about global health issues and expand their clinical knowledge base in a diverse and unique way. Students, as part of their grants, are required to present on their experiences to their peers upon their return. Later this fall students, faculty and staff will have the chance to hear from the first round of grantees.

ONE BIG CHECK

The hundreds of alumni gathered for Reunion 2008 in June took away many fond memories of old friendships renewed, and familiar places revisited. They left behind a sizable achievement in philanthropy. All told, the combined reunion gifts from the thirteen classes present was $779,510. Peter Goodhue, M.D., class agent for the 50th Reunion Class of 1958 presented Dean Frederick Morin with a ceremonial check at the Legends & Leaders celebration on Friday night of Reunion.

TRIBUTE

In 2003 about the University of Vermont and its bold vision for the future, Burton Cleaves was impressed. He was further impressed with the response he received from President Fogel. Gifts were sent to support cancer research and care in Vermont and Northern New York.

DEVELOPMENT NEWS

CLEAVES ADDS TO FUND

When he saw a Boston Globe article in the spring of 2003 about the University of Vermont and its bold vision for the future, Burton Cleaves was impressed. He was further impressed with the response he received from President Fogel. Cleaves sent a contribution to the University’s campaign, and since established a number of charitable gift annuities in support of the University’s priorities. His latest was a generous $40,000 addition to the endowed Medical Alumni Association Challenge fund that bears his name.

A CONTINUING TRIBUTE

In 2003, Burnett Rawson, M.D. ’39 established a Diversity Scholarship Fund in honor of his late daughter, the author Deborah Rawson. This summer Dr. Rawson added to the fund with a charitable gift annuity of $25,000.

A 30TH COMMEMORATED

This fall, 30 years of financial support to the Vermont Cancer Center by the Lake Champlain Cancer Research Organization (LCCRO) will be commemorated by the College of Medicine. The third-floor conference room in the Health Science Research Facility will be renamed to honor the organization. Under LCCRO’s founder, the late Walter Rourke, and his successor, Floyd Rourke (who passed away this year), the organization has contributed in excess of $10 million to support cancer research and care in Vermont and Northern New York.
“I have retired twice so far. I am now back at work less at half-time in urgent care. Emilee is involved in EmileeGruppeGallery.com and jerrichosettlers farm.com.”

1968
David Jay Kelter
4 Deer Run
Mendon, VT 05701
(802) 772-4820
djukhel60@comcast.net
Timothy John Terrien
14 Deerfield Road
South Burlington, VT 05403
(802) 862-8995
Todd Gladstone
tmg45@aol.com

1969
Susan Pitan Lowenthal
200 Kennedy Drive
Torrington, CT 06790
(860) 537-8966
susan_w_pitanlowenthal@groton.pfizer.com

1970
Raymond Joseph Anton
1321 General Knox Road
Russell, MA 01072
(413) 588-8659
ray@rayanton.com
John F. Beamis Jr.
24 Loren Road
Winchester, MA 01890
(978) 719-7768
john.beamis@verizon.net

1971
Wayne E. Pasanen
112 Gosford Street
North Andover, MA 01845
(978) 685-3939
wpasanen@lowellgeneral.org

1972
F. Farrell Collins Jr.
205 Page Road
Pinehurst, NC 28374
(910) 295-2429

1973
James M. Betts
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Alameda, CA 94502
(510) 523-3480
jbetts@mail.chi.org
Philip L. Cohen
439 Lakewood Drive
Winter Park, FL 32789
(407) 688-7632
pickles@aol.com

1974
Douglas M. Eddy
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Windham, VT 05081
(802) 434-2542
dhkkaeddy@att.net
Cajsa Schumacher
18 Euclid Avenue
Albany, NY 12203
cajsa@schub@yahoo.com

1977
Mark A. Popovskiy
21 Nauset Road
Sharon, MA 02070
(781) 784-8824
mpopovskiy@haemonetics.com

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

1979
Sarah Ann McCarty
2101 Big Bend Road
Barbourville, WV 25504
(304) 649-1284
mccarty@marshall.edu

1980
Richard Nicholas Hubbell
80 Summit Street
Burlington, VT 05402
(802) 862-1551
rich.hubbell@vtmednet.org

1981
Craig Wendell Cage
2152 Victoria Gardens
Tampa, FL 33609
craiggage@sampabay.rr.com

1982
David and Sally Murdock
murdock@cyberport.net
MG George W. Weightman, MC, USA,
has been appointed Commanding General, US
Army Medical Research and Materiel Command,
Ft. Derrick, MD. He reports, “Joan and I went
over to Germany in

Jeryl Dansky Kershner is a child psychiatrist prac-
ticing in West Palm Beach Fl. She just completed writing a textbook on
child psychiatry for pediat-	ricians. Robert M.
Kershner continues con-
sulting in Palm Beach and
is teaching at Palm Beach
College.

Class of 1973

Class of 1978

Class of 1967

Class of 1968

Class of 1969

Class of 1970

Class of 1971

Class of 1972

Class of 1973
“Greetings to all from sometimes sunny Seattle. Continuing my hospitalist and pulmonary critical care practice at Northwest Hospital. I somehow was selected to be chief of staff. Still haven’t learned to say ‘No.’ Regards to all.” Alan Katz writes: “My oldest daughter, Brittany, will be graduating from Roslyn High School as valedictorian and will be attending Brown in September. She was accepted into a program that will allow her to earn her BS and MD degrees.”

December to welcome back our oldest son from his second tour in Iraq. It was a very special time. When I started Medical School in 1978 that boy was the only child in our whole class! Time flies.”

Mary Horan writes: “Best wishes to everyone, and congratulations to the honorees, Keiji and 25 years, is now a new mom. If anyone knows of a good ophthalmologist who is looking to relocate, please have him or her contact me. Two of my kids (Sean and Cheleza) are undergraduates at the University of Rochester. If any of you have children there too, have them say hello.”

1986 Darrell Edward White 39232 Lincoln Road Bay Village, OH 44140 (440) 892-6811 dwhite@mac.com

1988 H. James Wallace III 416 Martel Lane St. George, UT 54945 (801) 870-8533 james.wallace@vtmednet.org

Lawrence I. Wolk 5714 South Home Street Greenwood Village, CO 80111 (303) 771-1289 larry@correctioncare.com

Roger Virgile writes: “Franklin, Pennsylvania, is a great rural place to live, but recruiting is difficult. If anyone knows of a good ophthalmologist who is looking to relocate, please have him or her contact me. Two of my kids (Sean and Cheleza) are undergraduates at the University of Rochester. If any of you have children there too, have them say hello.”

B.J. Beck writes: “I continue to live and paint in West Newbury, Mass., but started a new job in January as chief medical officer for Beacon Health Strategies, a managed behavioral health organization. I still see outpatients at Mass General and also work at the local hospital unit.”

1992 Mark Elliot Pasanen 1245 Spear Street South Burlington, VT 05403 (802) 865-3281 mark.pasanen@vtmednet.org

Jennifer Woodson writes: “We have enjoyed three years in Italy. I finally went back to work this past year, actually it was ‘volunteering’ in the family practice clinic at the military hospital on-base. July 2008 we moved to the southern coast of England. Come visit!” Rebecca McPherson writes: “Hi to all. I am currently living in Mt. Pleasant/Charleston S.C. area to be closer to my two grandchildren and daughters. I am on faculty at the Medical University of South Carolina practicing neonatology.”

1993 Joanne Taplin Romeyn 32 Patterson Lane Durham, NC 27707 (919) 666-1071itable@yahoo.com

Barbara Ariste writes: “My husband, Ed Yang, and I are pleased to announce the birth of our daughter, Rachel Yuriko Yang, born on May 10, 2008 at 6:55 am. She weighed 6 lbs. 7 oz. and was 19.5 inches long. Our first daughter.”
1995
Allyson Miller Bolduc
25 Autumn Hill Road
South Burlington, VT 05403
(802) 863-4902
allyson.bolduc@vtmednet.org

Lieutenant Cmdr. Leslie Wood, Senior Medical Office, Coast Guard Air Station Sitka (Alaska) has been named the United States Public Health Service Physician's Professional Advisory Committee Clinician of the Year."

1996
Anne Marie Valente
66 Winchester St., Apt. 503
Brookline, MA 02446
anne.valente@cardio.chboston.org
Patricia Ann King, M.D., Ph.D.
83 South Prospect Street
Burlington, VT 05401
(802) 862-7705
patricia.king@vtmednet.org

Amy Roberts McCaraghlan writes: "Neel and I, along with our dog brothers Jack (g) and Leo (q) welcomed Lucinda, born September 17, 2007. 'Lucy is a beauti- ty!' Mark Vining, Christopher Recklins and big brother Lucas wel- come home Adam Alexander Vining-Recklins in September 2007. Adam was adopted from Vietnam. Mark and Christopher were married June 21, 2008 at their home in Worcester. In attendance were Carolyn Kraser '95, Michelle Dostie '96, Betsy Knauff '96 and Payson Oberg Higgins '96.

1997
Julie Small
30 Bridge St.
South Hamilton, MA 01982
(978) 688-1943
chinook02@hotmail.com

Nasreen Malik writes: "Frank and I had a baby girl in October! Her name is Yasmin. She and her brothers, Simon and Max, are keeping us busy. Hello to everyone!"

1998
Halleh Alkarnia
201 Prairie Street
Glenview, IL 60025
(847) 998-5077
hakbarnia@gmail.com

In June 2008, Air Force Major Stephen Messier graduated from the Neonatology Fellowship at the San Antonio Uniformed Services Health Education Consortium (SAUSHEC) at Wilford Hall Medical Center, Lackland ABF, Texas. He received the Commander's Award for the best fellow-level basic science research performed at SAUSHEC this year for his work comparing the tidal volume delivery and clinical utility between a high frequency percussive ventilator and a high frequency oscillatory ventilator. In September he began a three-year assignment at Kadena AFP, Okinawa, Japan, where he will work as a neonatologist. Previously, he lived in San Antonio with his wife, Leila, and their four children.

1999
Everett Jonathan Lamm
12 Autumn Lane
Stratham, NH 03885
(603) 879-7755
seattleswitch@comcast.net

Deanne Dixon Haag
4233 Pond Road
Shelton, VT 05483
(802) 524-7578

Stephen G. Hassett writes: "EM Urgent Care will celebrate its fifth anniver- sary in September, having seen over 8,000 patients since opening." Jason Cook writes: "I have fin- ished Pediatric Critical Care Fellowship, visited Tony Liu in Los Angeles, but we weren't talking until the NBA finals were over."

2000
Jay Edmund Allan USDH Yorokouka
PSC 475 Box 2177
FFP, APO 96350
jallan@pol.net
Michael Jim Lee
71 Essex Lane
Irving, CA 92620
michaelj_lee88@yahoo.com

Naomi R. Leeds
52 Garden St. Apt. 48
Cambridge, MA 02138
nleeds@partners.org

Kerry Lee Landry
(978) 732-9876
landry005@mc.duke.edu
Mary O’Leary Ready
mary@nchvc.org

Maureen C. Sarle
maureensarle@yahoo.com

Halleh Alkarnia writes: "I am living in Western Massachusetts with Jay and (our two-year-old daughter) I recently played disc-golf with Todd and Julie Holmes and keep in touch with Tara August. Please come visit if you are in the neighborhood."

2001
Jonathan Vinh Mai
15 Meadowlane Lane
Danville, PA 17821
(570) 275-4681
jvma@geisinger.edu

Kerry Lee Landry
(978) 732-9876
landry005@mc.duke.edu
Mary O’Leary Ready
mary@nchvc.org

Roubinian and Erin Arthur are doing great. Nareg works as a hospitalist at UCSF, and is starting a pulmonary and critical care fellowship soon. Erin is practicing primary care in a San Mateo County community health center. They are expecting later this year. Omar Khan, Salwa Khan ‘05 and son Zareef (age 7) are splitting time between Vermont and the mid-Atlantic. He teaches the global health course at UVM and part-ners around Vermont any excuse he gets. Down in Delaware he is a partner in a primary care practice and teaches family medi-cine for U Penn students. Salwa is finishing up pedi-atrie residency at the

2002
Jonathon Vinh Mai
15 Meadowlane Lane
Danville, PA 17821
(570) 275-4681
jvma@geisinger.edu

Maureen C. Sarle
maureensarle@yahoo.com

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is practicing influenza preparedness. He is busy with a new research project on University of Maryland psychiatry at Boulder lizards. Two cats and four (up from enjoying Boulder with his holistic medicine. He’s is now board-certified in University of Arizona and Colorado. He also finished Community Hospital in hotmail.com fabulous5lefebvre@ hsc.utah.edu Emily A. Hannon jilliangeider@hotmail.com richparent@gmail.com julie.alosi@vtmednet.org Julie A. Alosi 2005 2007 2006 2008 2004 University of Maryland Hospital for Children and is busy with a new research project on influenza preparedness. David Leavitt is practicing psychiatry at Boulder Community Hospital in Colorado. He also finished a two-year fellowship in integrative medicine at the University of Arizona and is now board-certified in holistic medicine. He’s enjoying Boulder with his girlfriend Marnie and two cats and four (up from enjoying Boulder with his holistic medicine. He’s is now board-certified in University of Arizona and Colorado. He also finished Community Hospital in hotmail.com fabulous5lefebvre@ hsc.utah.edu Emily A. Hannon jilliangeider@hotmail.com richparent@gmail.com julie.alosi@vtmednet.org Julie A. Alosi 2005 2007 2006 2008 2004 William C. Eward william.eward@uvm.edu Deborah Rabinowitz debbie.rabinowitz@ uvm.edu Allison Collien accollentz@gmail.com Scot. Militay Scot.militay@bhs.org Mark Hunter 21 Lindenwood Drive South Burlington, VT 05403 Mark.hunter@uvm.edu Alyssa Wittenberg 7649 Briarcrest Lane Orange, CA 92869 alyssa.wittenberg@gmail.com Ashley Zucker arzucker@uvm.edu 2209 Albany Street Durham, NC 27705 2006 William C. Eward william.eward@uvm.edu Deborah Rabinowitz debbie.rabinowitz@ uvm.edu Allison Collien accollentz@gmail.com Scot. Militay Scot.militay@bhs.org Mark Hunter 21 Lindenwood Drive South Burlington, VT 05403 Mark.hunter@uvm.edu Alyssa Wittenberg 7649 Briarcrest Lane Orange, CA 92869 alyssa.wittenberg@gmail.com Ashley Zucker arzucker@uvm.edu 2209 Albany Street Durham, NC 27705 2006 William C. Eward william.eward@uvm.edu Deborah Rabinowitz debbie.rabinowitz@ uvm.edu Allison Collien accollentz@gmail.com Scot. Militay Scot.militay@bhs.org Mark Hunter 21 Lindenwood Drive South Burlington, VT 05403 Mark.hunter@uvm.edu Alyssa Wittenberg 7649 Briarcrest Lane Orange, CA 92869 alyssa.wittenberg@gmail.com Ashley Zucker arzucker@uvm.edu 2209 Albany Street Durham, NC 27705 PORTER H. DALE II, M.D., ’47 Dr. Dale passed away at his Montpelier, Vt., home on June 15, 2008 — Father’s Day — surrounded by his family. He was diagnosed with cancer in May of this year. He led a life marked by devotion to his family, his profession, and his community. A fifth-generation Vermonter, he was born on Sept. 27, 1922. He lived his early years in Island Pond, Vt., the oldest of four children. After completing high school he was offered a scholarship to Wesleyan University, which he attended before returning to Vermont to complete both his undergraduate and medical education at the University of Vermont. Following his marriage to Mary Lois Westover in 1951 and the completion of his military service, he established a practice in internal medicine in Montpelier in 1953. He practiced medicine in Central Vermont for 40 years until his retirement in 1991. During those years he served as president of the Vermont Heart Association, president of the Vermont State Medical Society (1971-1973), American College of Physicians Governor for Vermont (1975-1976), and president of the Vermont Board of Physical Therapy Registration (1957-58). Dr. Dale played a pivotal role in establishing the first Coronary Care Unit at Central Vermont Hospital and served as its director from 1960 to 1970. He was also president of the Central Vermont Hospital Medical Staff from 1968 to 1981. Throughout his medical career and until 2006, Dr. Dale served as medical consultant to the Social Security Disability Determination Agency of Vermont. His tenure as a medical consultant to the Social Security Administration was the longest of any physician in the United States. He was deeply involved in his community. In addition to his many activities with community agencies, he was named the Washington County Citizen of the Year for 1994. Dr. Dale had a love of Vermont, including the history of his hometown of Island Pond, and he authored several published works on this subject.

SPENCER W. BURNEY, M.D., ’62 Dr. Burney died at Community Hospice House in Merrimack, N.H. on April 13, 2008. He was 82. Dr. Burney grew up in Charlestown, N.H. attending 11 years of school there and graduating from Springfield VT High School in 1943. He spent 15 years in the United States Navy as a Hospitall Corpman. Dr. Burney did pre-medical studies at the University of New Hampshire before graduating from the College of Medicine in 1962. He was board certified in anatoucal and clinical pathology in 1967 and became chief of laboratory services at the Veteran’s Administration Outpatient Clinic in Boston. He served there for 20 years. He then served as a physician at the armed Forces Entrance Station in Boston for several years. In 1971 he was commissioned as a Reserve Officer in the United States Army and retired at age 65 in 1992 as a Colonel.

MELVIN A. GOLDEN, M.D., ’64 Dr. Golden died November 13, 2007, at Metro-West Medical Center in Framingham, Mass. A graduate of Boston University with a bachelor’s degree in biology, he simultaneously earned a bachelor’s degree in Jewish education at Hebrew College before earning his medical degree at UVM. He completed his residency in radiology at the Ichilov Hospital in Tel Aviv, Israel, then settled in Lubbock, Texas, and began the private practice in radiology. Eventually, he retired and restored his career working for the federal government as a radiologist, primarily at veterans hospitals around the United States, and had served as recently as the spring of 2007 at the VA Hospital in West Roxbury.

JOHN H. ELLIOTT, M.D., ’72 Dr. Elliott, of Lyndon, Vt. died July 9, 2008, at Northeastern Vermont Regional Hospital as a result of injuries sustained in a July 7 accident. He was born in St. Johnsbury, Jan. 16, 1946, the son of Herbert and June (Hall) Elliott. After attending St. Johnsbury elementary and middle schools, Dr. Elliott graduated from Lyndon Institute in 1964, Tufts University in 1968, and the UVM College of Medicine in 1972. Following a rotating internship at Robert Packer Hospital in Sayre, Penn., Dr. Elliott worked one year in the emergency room at Putnam Memorial Hospital in Bennington. There he met his future wife, Martha Romlein. He then joined friends and colleague Dr. Lloyd ‘Tim’ Thompson at The Doctor’s Office on Main Street in Lyndonville. They went on to establish Corner Medical. Commenting on Dr. Elliott’s life, the St. Johnsbury Caledonian-Record editorial page noted that: “Elliott truly enjoyed giving more than receiving. With Elliott, working to help a patient late at night or on a Sunday afternoon, or working to help Lyndon Institute raise money for a new program, or working to beautify the Lyndon Corner covered bridge was what he did and who he was. His was a lifetime of generosity and giving of more anyone asked.”

An obituary for Professor of Physiology and Biophysics Emeritus William Halpern, Ph.D. ’59 will appear in the next issue.
For the hundreds of graduates who returned to campus June 6-8 for Reunion 2008, the unusually warm temperatures of early June made the memories of snowy mornings rushing to class and clinic seem even a little farther in the past. The members of the dozen classes represented at Reunion dove into the festivities with gusto, picnicking on the lawn with friends and family [7,11] meeting today's students, [4] and getting reacquainted with old friends [5,6,9].

Many alumni took advantage of the tours run by students and staff to get an inside look at their new, improved medical campus, including the Student Assessment Center, wherein lives Kramer, the College’s simulated patient [3]. The Class of 1988 celebrated their twentieth reunion in a special way, by performing a group community service project at the King Street Youth Center in Burlington [2]. That project was spearheaded by class agents Jim Wallace and Larry Walk. Dean Frederick Motin and his wife, Tracy, welcomed members of the Ira Allen and Wilbur societies at a special reception at Englesby House on Saturday the 7th [1]. Two nights before, the Morins hosted a dinner for the recipients of the Medical Alumni Association 2008 Awards [10 – not shown, Omar Khan, M.D.’03]. One of the awardees, Keiji Fukuda, M.D.’83, gave a brown bag luncheon presentation on careers in public health for current medical students on the Friday of Reunion [8].
Members of the new Class of 2012 take part in a team-building exercise during their Orientation Week.

photograph by Raj Chawla

AUGUST 7, 2008
1:20 PM

Though he last walked across the UVM Campus Green in the early 19th Century, Ira Allen is to this day an unforgettable presence at the university he helped found, and is memorialized by a statue, a chapel, and a growing society of generous individuals.

Originally from Cornwall, Connecticut, Ira Allen was actively interested in the affairs of Vermont, where he received large grants of land and was a member of the Green Mountain Boys, commanded by his brother Ethan. A prominent figure in the development of the state constitution, Ira Allen was also elected a member of the Governor’s Council and first treasurer of the Republic of Vermont. In addition, Allen was the author of the Vermont Bill of Rights and Declaration of Independence.

Allen also had great interest in establishing a university in Burlington, Vermont. In 1789 he pledged £4,000 and donated land for such a purpose. He became one of the university’s trustees in 1791.

Allen’s memory was long neglected until James B. Wilbur donated funds to erect a statue of Ira Allen that now stands on the Campus Green. Wilbur also provided the funds to build the Ira Allen Chapel, erected in 1927 in honor of the founder of the University of Vermont.

The commitment to excellence in education at the University of Vermont and its College of Medicine is a tradition made possible by alumni, parents, and friends who share the vision of its founder. Since 1964, that vision has been recognized for donors by annual membership in the Ira Allen Society. Today, the Medical Ira Allen Society has nearly 700 members who make generous leadership contributions each year.

Help strengthen this cornerstone of individual support to the College by joining the Medical Ira Allen Society today.

Contact us at:

MEDICAL DEVELOPMENT AND ALUMNI RELATIONS OFFICE
(802) 656-4014 MEDICAL.GIVING@UVM.EDU www.med.uvm.edu/giving
It started out as an unremarkable Sunday afternoon in April for Olivia Sierra, a sophomore English major from Massachusetts who works on weekends with the Chatty Cats, UVM’s student phonathon callers. But that was about to change.

“It was my first day making calls from the College of Medicine list,” she says. “Pretty typical. I’d gotten a few hundred dollar gifts and a few smaller ones.”

But her last call of the day was anything but typical. “I called Dr. Sullivan, and we kind of hit it off right away,” Olivia says. “I never really even got to the part where I make the case for a gift. He was really fun to talk with. He asked me to think about becoming a physician’s assistant.”

Dr. Sullivan is Thomas J. Sullivan, M.D.’66 of Etna, New Hampshire, who recently retired as a radiologist and faculty member at Dartmouth-Hitchcock Medical Center. Olivia didn’t know it, but Dr. Sullivan was about to make her the most successful telephone fundraiser in Chatty Cats history.

“He indicated he was willing to make a substantial gift, and I thought he was thinking about maybe $1,000 or $2,500 or even $5,000.” Dr. Sullivan prefers not to disclose the actual amount of his gift, but it was substantial and unprecedented for the student callers.

“Oh my gosh. It was pretty crazy,” Olivia says about the excitement in the workroom. “I was so surprised.”

Dr. Sullivan says his gift was motivated by his wish to give something back to Vermont and to UVM, and perhaps to motivate others to do the same. “I’ve always felt this kinship with Vermont and with UVM,” he says. “I did my undergraduate work there then entered the medical school and even came back and did some postdoctoral work, so I’ve spent a lot of time in Burlington. It didn’t cost me a penny to go there, what with scholarships and all, so I thought it would be a nice thing to do while I’m still alive, to give something back to the College of Medicine.”

Dr. Sullivan put no restrictions on his gift, other than it be used to advance the College of Medicine’s top priorities.