Chorion Villus Sampling
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The development of early trimester detection of chromosome abnormalities has brought a great deal of attention to the Genetics and Fetal Medicine group at Jefferson and to its chief researcher, Laird G. Jackson, M.D.

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Jefferson Scene

Class Notes
Chorion Villus Sampling

A highly skilled group of perinatologists, clinical geneticists, biochemists and researchers, genetic counselors and technicians has quietly developed a resource that is of extreme value to the Jefferson medical community.

by Laird G. Jackson, M.D.

Prenatal diagnosis of severe congenital disease with selective termination of affected pregnancies is an accepted part of the contemporary practice of clinical genetics. Since the successful tissue culture and cytogenetic study of amniotic fluid cells, by Steele and Breg in 1964, mid-trimester amniocentesis has been the standard approach for prenatal diagnosis. Historically, however, attempts at first trimester fetal diagnosis were made in parallel with the early development of mid-trimester amniocentesis. Beginning in Scandinavia, transvaginal-transcervical biopsy of the chorion by direct endoscopic vision was attempted as early as 1968. Chorion was obtained in pre-abortion patients at eight to 20 weeks gestation, using a 5mm endocerviscope, but tissue culture and chromosome analysis were only partially successful. Culture failures were due to infection developing in the culture from apparently contaminated samples. In addition, two early patients had symptomatic infection. These two difficulties, failure of consistent chromosome analysis and the threat of infection, did not plague the

Dr. Jackson is Director of the Division of Medical Genetics and Professor in the Departments of Medicine, Pediatrics and Obstetrics and Gynecology at Jefferson.
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development of the amniocentesis approach in mid-trimester as they did the earlier chorion sampling method and so amniocentesis became the procedure of choice.

Our own involvement with prenatal diagnostic amniocentesis began in 1970 when Leon A. Peris, M.D. '55, Clinical Associate Professor of Obstetrics and Gynecology, Marie Barr, Genetic Counseling Coordinator and I started the service at Jefferson. High risk patients with known chromosomal rearrangements, previous children with chromosomal defects and mothers of advanced age (initially 39 and above) were included in our early program. In 1972 we began our successful Tay-Sachs Prevention Program and added Eugene E. Grebner, Ph.D., Research Assistant Professor of Medicine, to our team. The availability of prenatal diagnosis was an important part of that program's success. A year or so later F. Susan Cowchock, M.D. '68, Associate Professor of Obstetrics and Gynecology, joined us and added the Alpha-fetoprotein serum screening and amniotic-fluid assays to our program where again the amniocentesis and prenatal diagnosis was a key to the utilization of this technology. As this prenatal diagnostic program became more widespread in its application it also became evident that the decision on the part of a pregnant woman to terminate a pregnancy in the mid-trimester is a very difficult one.

Unlike many other abortions, these procedures occur in couples where the pregnancy is wanted and frequently one which has long been planned. Genetic units such as ours have therefore developed an increasing awareness of the psychological complications of such terminations. Because of this, we and others have worked at methods to reduce the waiting time between the performance of the amniocentesis and the delivery of a diagnostic result. For example, our Tay-Sachs unit has developed a rapid 24 hour method to replace the old four to six week method of delivering fetal diagnostic results in this disease. Still, we are not able to shorten the waiting time for an amniocentesis much below the 16 gestational weeks currently used.

Therefore we all have looked for a different method of sampling the fetus or embryo. Interestingly there had not been a real continuation of activity with transvaginal placent sampling through the 1970s. In 1975, a group of Chinese investigators reported a simple 'blind' transvaginal aspiration technique to obtain prenatal placental tissue for sexing pregnancies. Two U.S. groups attempted to confirm this work but in a majority of male tissue specimens confirmed at abortion, aspirates gave female karyotypes. Thus this group felt that the endocervical aspiration approach obtained primarily maternal cells and in 1980 concluded that the method was not useful.

The recent development of DNA methods for prenatal diagnosis opened the possibility of numerous additional diagnoses if milligram amounts of tissue could be obtained safely and reliably. This made first-trimester tissue sampling appear even more attractive as an alternative. With this in mind I watched the literature with a considerable amount of interest in late 1982. Through contacts I had heard that some laboratories in the European area were beginning to test systems to look at samples of the placenta for DNA fragments that would yield diagnoses for the hemoglobin disorders. My discussions were primarily with molecular biologists and none of them were aware of the methods used to obtain these samples or to verify that they indeed reflected the fetal status.

However, the information I gathered showed that the methods of analysis were successful with the placental samples obtained. Therefore when I first saw a report from the University College Hospital in London in the December 25, 1982 issue of Lancet on their early trial of chorion villus sampling (CVS) I immediately contacted people in London and in Paris who had some contact with the London group. It was my good fortune to talk to Bernadette Modell, M.D. of the University College Hospital group and arrange a visit. Ronald J. Wapner, M.D. '72, Associate Professor of Obstetrics and Gynecology, Director of our Fetal Medicine program and our collaborator since the later 1970s, and I visited Dr. Modell and Mr. Humphrey Ward in March 1983. We were able to observe Mr. Ward perform chorion sampling on patients about to undergo an abortion and to get an idea of the procedure. We were somewhat dismayed at their poor quality ultrasound equipment and the lack of better facilities for their program. Nevertheless we were encouraged at their success under these conditions and felt that we should be able to do as well. At that visit we learned that an Italian colleague working with them in 1982 had returned to Milan to pursue a similar program. They had begun to apply the method to chromosomal diagnoses.

This markedly heightened our interest in the procedure but I had to travel on to Milan without Ron Wapner as he had commitments back in Philadelphia. To my great surprise and delight I spent just over 24 hours in the laboratory at Milan and observed the remarkable completion of five prenatal cytogenetic diagnoses within the time of my visit. This was an astounding experience and I was convinced that both the obstetrical procedure and the laboratory methods could be duplicated by ourselves and in fact contained no scientific or medical problems to their development as a widely available genetics service. I returned full of enthusiasm for this new method.
An official scientific presentation was made at the annual Teratology meeting, the first actual program presentation of chorionic villus sampling by any United States group.

Once back in the lab, our entire group found my reports exciting but it was hard for them to believe that this system was as workable as I claimed. Ron’s own experience in London of course did not parallel what I had seen in Milan and the rest of the clinical and laboratory people simply echoed my own surprise and amazement of a few days earlier. Nevertheless our expert crew dug into the job at hand and within a month we were prepared to initiate our own trials. After assuring ourselves of support from appropriate institutional mechanisms, we began trials with patients who were undergoing a voluntary termination of pregnancy for non-genetic reasons. After intense work on over 30 cases, we convinced ourselves in early June that we had the beginnings of a workable system. We therefore presented our early results at the June 1983 meeting of the Fetal Therapy Group in Aspen, thereby becoming the first group in this country to show the feasibility of this method. Later in June we made an official scientific presentation at the annual Teratology Meeting in Atlantic City which is the first actual program presentation of chorionic villus sampling by any United States group. We proceeded carefully with our studies, continuing to refine our work to pre-termination patients on through the summer. In August 1983, the Michael Reese group in Chicago announced their first trial with a continuing pregnancy. We were still convinced that our conservative approach of building experience with the pre-termination patients was correct and we performed our first sampling in a continuing pregnancy in September. In order to share our excitement with you let me briefly explain this revolutionary technique and the place we think it has achieved thus far in its development.

The sampling procedure in CVS has evolved as a fairly simple and straightforward procedure, but one that must be performed with skill and care. At six weeks gestational age the amniotic sac does not yet fill the uterine cavity, and the chorionic villi uniformly cover the embryo. After seven weeks the chorion begins to differentiate into the chorion frondosum, which will become the placental site, and the chorionic villi from which the villi begin to degenerate. It is the chorion frondosum that has the most mitotically active villi and is the area to be sampled. In our experience sampling should not be attempted prior to the eighth week or until clear identification of the fetal cardiac activity has been made. The initial step in sampling is a detailed ultrasound study of the pregnant uterus. The gestational sac size and fetal crown-rump length are measured and recorded. The area of placental formation is then identified. Identifying the cord insertion and the yolk sac assists in confirming the placental location and the position of the uterus and the cervix should also be identified on the initial scan. If the uterus is severely anteverted, filling of the bladder is useful in helping to place the uterus in a better position for insertion of the sampling catheter.

After the initial scan, the patient is placed in the lithotomy position and the vaginal area is aseptically prepared with povidone-iodine. The anterior lip of the cervix is grasped with a long clamp. This may induce mild cramping and is usually the only part of the procedure to produce discomfort. The uterine position is again visualized and the sampling catheter, a 1.5mm plastic tube with a 1mm soft/bendable wire stylet, is curved to conform to the shape needed to reach the sampling site. The catheter is then slowly inserted under ultrasound guidance. Slight traction may be applied to the cervix to straighten the cervical canal. The catheter is easily seen on ultrasound as it passes through the cervix and is directed to the sampling site in the chorion as close to the cord insertion as is practical. The stylet is then removed without disturbing the catheter position. A 20ml syringe containing 5ml nutrient medium is
attached, suction is applied via the syringe, and the syringe and catheter are withdrawn. Inspection of the media in the syringe reveals villi as small branched tissue pieces at the bottom surface of the plastic syringe. The contents are then carefully and aseptically expressed into a sterile 60mm petri dish for confirmation inspection. Their microscopic appearance is quite typical and identification is simple. A single good aspiration yields from 10-25mg of wet tissue weight. This amount is adequate for several aliquots of tissue to use in cytogenetic, biochemical or DNA restriction enzyme studies.

We learned our cytogenetic procedures from Simoni in Milan and they represent modifications of older techniques. The villous sample in the sterile 60mm petri dish is examined with an inverted microscope. The villi have a distinct anatomy of blunt branched tissue with a mesenchymal core containing capillary vessels. These are covered with an outer single syncitial cell layer (syncitiotrophoblast) and a proliferative cell layer (cytotrophoblast) just beneath this covering. In actively proliferating samples, the surface is punctuated by several small 'budding' areas comprised of the syncitial covering and actively mitotic cytotrophoblast cells within the 'bud.' In contrast, decidual tissue is rather structureless with a sheetlike or membranous appearance and may simply be discarded. Villi are transferred to a clean petri dish containing balanced salt solution and washed by gentle swishing in the BSS. The villi are ready for transfer to 35mm petri dishes for tissue culture, incubation or further cytogenetic processing.

For direct preparation of chromosomes the villi are transferred into a dish with colcemide and incubated at room temperature for one hour. The medium is then replaced with a hypotonic solution for ten minutes. This hypotonic is then removed carefully and replaced with methanolic acid fixative for a further ten minutes followed by addition of 60% acetic acid. The villi are observed under the inverted microscope and cells are seen detaching from them to float freely in the fixative solution. After five minutes the fixative containing the cells is deposited on clean slides on a warmer at 40°C. Staining is then done by standard banding methods. For biochemical studies, extracts of chorionic villi may be prepared by the methods used to prepare fibroblast or cultured amniotic fluid cell extracts. DNA may similarly be prepared from villi by standard methods for restriction enzyme fragment analysis. Approximately 2-5mg of wet tissue are obtained from each average sized villus and about 5μg of DNA may be obtained per mg of tissue weight. These amounts provide generous tissue samples for standard assays.

Experience in the obstetrical technique was gained by using volunteer patients about to undergo first-trimester abortion. Over a period of four months, 60 such patients were sampled immediately prior to abortion by suction curettage. No uterine bleeding was noted immediately and no patient morbidity followed the procedure. Discomfort appeared to be no greater than that experienced by amnioncentesis patients. Laboratory analyses of chromosomes were performed from these samples as well as from post-abortion samples of chorionic villi obtained from the same consenting patients. On the average, 15 to 25 analyzable metaphases were obtained from direct chromosome preparations of the aspirate. Portions of the samples were selectively cleaned, rinsed and frozen for enzymatic assay as described above. Numerous enzymes of the lysosomal group were assayed and the results conformed to expected values from experience with cultured amniotic fluid derived fibroblasts.

Following this experience, the procedure was offered to patients who were at high risk for fetal abnormalities or at moderate risk but with a high personal motivation for avoiding...
If chorionic villus sampling is to become a standard fetal diagnostic approach, a number of questions raised by the current experience must be answered.

both mid-trimester amniocentesis and a delayed abortion decision. To date, chorionic villus sampling has been attempted on 670 such patients. Of the total, there have been four sampling failures. All occurred within the first 60 patients sampled and no failures have occurred in the 664 subsequent patients. Of the 670 diagnostic samplings, 53 have resulted in diagnoses that led the patient to terminate the pregnancy. Thus 617 continuing pregnancies are observed. In these, 11 patients have suffered pregnancy loss by spontaneous abortion. To date, 300 pregnancies have been delivered without complications or malformations. Five hundred pregnancies are beyond the 28th week and none have reported any later difficulties. All patients have been followed with ultrasound assessment of the uterus and placenta one week post-sampling and at 16 weeks of gestation.

If chorionic villus sampling is to become a standard fetal diagnostic approach, a number of questions raised by the current experience must be answered. In our opinion, the most important of these are: 1. Does the chorion and its villi truly represent the fetal genetic condition? 2. Are the current laboratory methods (particularly cytogenetic) accurately and adequately applicable to chorionic tissue for fetal diagnosis?, and 3. Is the procedure of early chorionic villus sampling safe for the patient, her continuing pregnancy, and her fetus?

Our own experience in answering the first two questions is somewhat more complex and detailed than is appropriate here. Suffice it to say that our experience to date has been that all diagnoses have been accurate when compared to the outcome at delivery or termination of affected pregnancies. Although anticipated difficulties with cytogenetic interpretation have arisen, the methods to resolve those that have been learned in our long experience with prenatal diagnosis have been up to the task. The laboratory methods for biochemical and DNA molecular diagnoses represent a truly significant advance over current methodologies utilizing amniotic fluid cells. The cytogenetic methods are impressively rapid most of the time but leave room for considerable improvement in ease of performance for repetitive and reliable studies. The detail available from most studies is not yet equivalent to that which may be accomplished with the best amniocentesis studies unless longer tissue culture incubations are utilized.

The safety of chorionic villus sampling will be clearly established only with the accumulation of a large number of carefully observed pregnancies followed to term. There are at least 4200 patient procedures for diagnostic purposes, with over 1000 followed to term with no congenital anomalies caused by the procedure. These cases are followed by an international registry for CVD established and maintained by us since June 1983. Fetal loss after CVS from 49 contributors has occurred in 4.1% of diagnostic samplings with the majority of the pregnancies being beyond the 16-20 week gestational period. This rate seems small but the difficulty in comparison is that most published figures on spontaneous abortion rates are based on established pregnancies not confirmed by ultrasound assessment at the eighth to ten week gestational age. Evidence is beginning to indicate that spontaneous abortion is infrequent when the pregnancy has a normal crown-rump length, no gestational sac abnormalities and fetal cardiac activity at the eight to ten week period. In our own experience, only seven of 536 control pregnancies confirmed by such ultrasound criteria were lost through the 24th week; revealing a spontaneous abortion rate of 1.3%. This rate compares favorably with our fetal loss experience subsequent to CVS. In several of our losses there is no apparent relation to the CVS procedure, but continued observation or the conduct of a carefully controlled trial will be necessary to resolve the question of safety. The question of risk...
The laboratory methods for biochemical and DNA molecular diagnoses represent a truly significant advance over current methodologies utilizing amniotic fluid cells.

to the newborn remains similarly unanswered. Carefully newborn evaluation and at least one year developmental follow-up of the children resulting from sampled pregnancies will be required to evaluate this aspect of procedural risk.

Assuming the above questions are satisfactorily answered, the availability of first-trimester fetal diagnosis offers real advantages to the patient and her family. The waiting period for fetal diagnosis pre- and post-procedure are significantly reduced so the couple is allowed 'privacy' for the procedure and subsequent decisions, as the pregnancy is not yet obvious to others. Thus there is the potential for considerably reduced social, emotional and psychological stress. This approach permits earlier and safer termination of the pregnancy should that become the patient’s choice.

Our excitement has focussed on the development of this technique in conjunction with newer fetal genetic diagnostic tests to produce a powerful method to manage reproductive dilemmas for the prospective mother. In doing so several technological 'feats' have been accomplished. The team has used this approach in seven twin pregnancies including two in which critical metabolic disease questions were at stake. In one a Muslim mother was refused the privilege of abortion (and therefore of any hope for children since she could not risk her potential child’s future health with no test of normalcy) if this could not be done before 12 weeks gestation. We were her only hope so we proved she would carry unaffected twins before the first trimester had elapsed and she went on to have her first normal children. In some of these procedures, Dr. Grebner's laboratory has analyzed multiple single villi to carefully document the normal fetal state and guard against cellular mosaicism. Similarly Ms. Barr and Margaret F. Sherwood, Cytogenetic Laboratory Supervisor, and their chromosome crew have carefully studied familial markers to make certain that two individual twin fetuses have been studied. As a further challenge, the team successfully performed CVS in the world’s only case of a triplet pregnancy last July. The three infants were successfully delivered at Jefferson in late 1984. The first diagnosis of a metabolic disease (Tay-Sachs) using this technique was performed by Dr.s Wapner and Grebner and Ms. Barr in 1983. This was the first in what is now the largest series of first-trimester Tay-Sachs diagnoses of any working group. Numerous other first diagnoses have now been completed in conjunction with collaborators. As a demonstration of the marriage of CVS and DNA, we were recently able to confirm the absence of hemophilia in a male fetus at risk at the 12th week by collaboration with the Oxford group using a new flanking DNA probe for the hemophilia gene.

The development of this technique has brought a great deal of attention to the Genetics and Fetal Medicine group at Jefferson. I suspect that this will continue with our information showing the safety of the technique that has been developed by our own experience here. The message in this experience is fairly simple. The Jefferson Genetics and Fetal Medicine Unit has quietly developed a resource that is of extreme value to the Jefferson Medical Community. It is a group of perinatologists, clinical geneticists, biochemists and researchers, genetic counselors and technicians of many sorts who are highly skilled and expert in their work. They have learned to perform extremely high quality work and to deliver a high quality of medical service to the regional community. They represent a Jefferson resource that is ahead of all others in this region and on a parallel with any group in the United States. It is a team of which Jefferson can and should be justly proud. They have not looked for or received a great deal of recognition in the past and are new to the spotlight now focussed on them. They richly deserve this recognition and it is my pleasure to see that it has come their way.
bodine center

Beneath the New Hospital, at 11th and Sansom Streets, the Bodine Center for Radiation Therapy is under construction with a completion date set for Fall, 1986. Named for Jefferson's late President and Board Chairman, William W. Bodine, Jr., the Center promises to be one of the most advanced radiation therapy facilities in the world. "The realization of this and future projects will provide further demonstrable evidence that, drawing upon the tradition of excellence, Jefferson shall continue to position itself on the leading edge of innovative patient care concepts," stated a news bulletin from the office of Michael J. Bradley, Executive Director of TJUH.

It is appropriate and fitting that the new center be named for Mr. Bodine, "whose life-long advocacy of science, industry, education and the arts in Philadelphia was typical of his spirited commitment to creative public service. This commitment, nourished by family tradition, and shaped by broad experience, enabled Bill Bodine to help build Jefferson Medical College into a nationally recognized academic health center."

Response to the question, "why do we need a new radiation therapy facility," comes from Carl M. Mansfield, M.D., Professor and Chairman of the Department of Radiation Therapy and Nuclear Medicine. According to Dr. Mansfield, the present facilities are housed in different buildings on different levels, with temporary equipment, no waiting areas and too few examining rooms. The Center meets the need to consolidate and modernize the facility, which is designed around state of the art equipment.

One of the innovations included in the new center is an interoperative therapy area which will allow surgeons to use radiation at the time of surgery. After the tumor is eradicated, the surgeon will be able to close the incision without ever taking the patient out of the sterile environment. The two advantages of administering radiation during surgery are: 1) radiation can be applied to a tumor where it might normally be inaccessible externally and 2) a higher dose can be used without harming healthy tissue. The beam can even be shaped to target selected areas.

Another capability, unique in the Delaware Valley, is the Hyperthermia Treatment Area. Hyperthermia occurs when the temperature of a tumor is elevated, so oxygen flows readily to it. This produces a more effective radiation treatment.

The main floor of the Center, at the site of the former parking lot on Sansom Street, will be used for initial patient examinations, patient follow-up clinics and multidisciplinary clinics. A Day Hospital facilitates patients on a combined treatment program of chemotherapy and radiation therapy.

The first underground level will house the professional staff, allowing physicians to go between the clinics and treatment levels. This floor will also contain biology labs for both tissue culture studies and animal holding areas. (animals will be housed elsewhere)

The second underground floor, or basement, contains all of the patient treatment and patient planning functions. Because of the underground nature of the facility, skylights will provide natural light into parts of each floor.

The total cost of the project will be approximately $22.8 million, which includes all financing and other costs. Of this, some $18 million comes from tax exempt variable rate bonds issued by the Pennsylvania Higher Education Facilities Authority. The remaining $5 million will come from gifts and equity.

An interesting note, Dr. Mansfield observed, is that had the Radiation Therapy Center been built as part of the New Hospital in 1978, it more than likely would have needed updating by now. Radiation Therapy and Nuclear Medicine are everchanging areas and new advances are being made all the time.

ms program

The Multiple Sclerosis Comprehensive Clinical Center at Thomas Jefferson University Hospital opened in November. Patients who suspect, or who have been diagnosed as having multiple sclerosis, are evaluated in this diagnostic and therapeutic center housed in Suite 8141 New Hospital.

Co-Directors of the Center are Robert L. Knobler, M.D./Ph.D., who directed a similar operation at Scripps Clinic and Research Foundation in La Jolla, California, before he was persuaded to come to Jefferson, and Fred. D. Lublin, M.D. '72. Both men were familiar with each other's work prior to joining forces, and knew each other by reputation. Dr. Lublin is Associate Professor of Neurology and Biochemistry, Dr. Knobler, Assistant Professor of Neurology; they have been involved with multiple sclerosis for most of their professional careers.

Multiple Sclerosis (MS) is baffling to physicians because it can affect many parts of the central nervous system and may manifest itself
There is presently no known cause or cure for Multiple Sclerosis, but there can be periods of remission in which symptoms sometimes disappear for long spans of time. The term “multiple sclerosis” refers to the occurrence of scarring in multiple separate areas of the nervous system. Dr. Lublin says that although there are tests which are helpful in spotting areas of scarring, there is no single way of establishing diagnosis definitively at the present time. Instead, a collection of helpful data, based on the patient’s history and neurological examination, can be obtained. This is then supported by laboratory data which is also helpful in establishing the diagnosis or increasing the index of suspicion,” he said, “but this doesn’t really prove anything.”

Between 250,000 and 500,000 people in the United States are afflicted with MS; women are affected almost twice as frequently as men. “It’s a neurological disorder with many symptoms that can be treated,” says Knobler, “as in problems of spasticity, (stiffening of limbs, difficulty in walking), bladder control and sexual function, for which counseling and treatment are provided at the Center.

Additionally, treatments are used to deal with what is thought to be the underlying basis of the disease in which the immune system is directing an attack against those parts of the nervous system containing myelin, the insulating material surrounding nerve fibers. In this demyelinating disease, the attack can affect any part of the nervous system containing this material, explaining the wide variety of symptoms which may occur.

Dr. Lublin cites new, experimental agents used in treatment. “We’ll take this information and experience we develop in the laboratory by treating animal models, and then apply that to develop therapeutic trials,” he said. “There are laboratory studies underway at TJUH at the present time, with plans to extend these to clinical testing.”

While people are referred by their own physicians or by the Delaware Valley Chapter of the MS Society or the National MS Society, with whom the facility has direct contact, Drs. Lublin and Knobler never make assumptions. “We do a full evaluation,” Dr. Lublin said. “We don’t assume anything when someone comes into the Center with symptoms that seem to indicate MS. We obtain a complete history, perform an examination and formulate an opinion, and request studies appropriate to prove or disprove that opinion. Since we’ve started, we’ve seen a number of people who did not have MS but who thought they did. If we assumed that everyone coming to the Center had MS, we could miss establishing the correct diagnosis of their problem and potential therapeutic intervention.

“There are quite a few potentially useful therapies on the horizon which we are looking forward to testing,” continued Lublin. “A major reason for forming this comprehensive clinical center was to establish a roster of individuals with MS with whom we are familiar. We know their history and can estimate, as well as can be predicted, the frequency of future attacks. We can then utilize that background information to determine the effectiveness of therapy in lowering the frequency of attacks in therapeutic clinical trials.” He notes that MS patients are often very willing to participate in such trials since there is presently no known cure for this disease.

The Center is supported by the Department of Neurology. In addition to the two co-directors, it is staffed by fellows and residents on a rotating basis. Future plans include finding support for hiring a full time nurse-clinician and a social worker who will be liaisons between patients, other members of the team and their home and work environments.

The major goal, as verbalized by both physicians, is to enhance their ability and the ability of other neurologists to provide comprehensive care for MS patients and to be a resource for the community. The Center will provide comprehensive care for MS patients so they may have a place where all their physical and psychological needs are addressed. There are other aspects of their lives that are affected such as economics if the patient is a breadwinner and child care if the patient is a homemaker. The disease affects the family structure; practical management is essential.

Another goal is to have information maintained in computerized form to aid in rapid data analysis, updating information on the patients and determining what therapies lead to the best responses in each patient.

A third goal is to test potential
therapeutic agents in animal models of MS for possible effectiveness in humans. "Before I came here," said Dr. Knobler, "I was coordinating a clinical trial of alpha interferon in the treatment of MS. Because some beneficial results occurred, I was interested in improving those results. A problem arises in that a more potent form of interferon, termed gamma interferon, also stimulates the immune system. Is it safe to give to people with MS? Could it activate the disease? We approach this problem by testing it on our animal models to determine the effect it has on immunologically mediated myelin destruction in the animal model."

Drs. Lublin and Knobler want the Center to treat patients, maintain a source of patients for research, basic immunological studies and therapeutic trials, and be an education resource for the medical community at large.

senior associate dean

Continuing changes and additions to the Dean's staff, Joseph S. Gonnella, M.D., has announced the appointment of Robert S. Blacklow, M.D., as Senior Associate Dean at Jefferson Medical College. This follows the appointment of Carla E. Goepp, M.D., as Associate Dean of Student Affairs and Director of the Office of Counseling and Career Placement, and Joseph P. Rodgers, M.D. '57, as Associate Dean of Affiliations and Residency Program Coordinator.

Dr. Blacklow comes to Jefferson from Chicago, where he was associated with Rush Medical College from 1978 to 1984. He most recently served as Associate Chairman in the Department of Internal Medicine. He was also Vice President for Medical Affairs at Rush-Presbyterian-St. Luke's Medical Center and Dean of Rush Medical College.

Prior to his Chicago experience, Dr. Blacklow's career was centered in Boston. Following his 1959 graduation from Harvard Medical School (cum laude) he spent his post graduate training years at Peter Bent Brigham Hospital in Boston, at the National Institutes of Health in Bethesda, Maryland, and at St. Mary's Medical School in London. Dr. Blacklow had served as Physician in General Medicine at the Boston Hospital for Women, Senior Associate Physician at the Peter Bent Brigham Hospital and Associate Professor of Medicine at Peter Bent Brigham, Harvard Medical School and Associate Dean of the Faculty of Medicine for Academic Programs, Harvard Medical School, during his almost 20 years in Boston.

One of the challenges the new Senior Associate Dean sees in his position is enabling the individual interaction between patient and physician, inherent in the practice of medicine, to flourish "in the milieu of a very large medical school." He wants to foster personal growth among the students and faculty members, and welcomes the opportunity to share with them his perspective on the direction medicine is going in the future.

"Students at Jefferson have a chance to experience Medical Center tertiary care referral medicine as well as excellent community medicine," said Dr. Blacklow in his College Hall office. "They receive a broad perspective of the way medicine works; a built-in view of medicine. Jefferson is known as a school which produces well-rounded, clinically competent graduates. Thanks go to the thousands of alumni who have provided excellent role models."

The Senior Associate Dean feels that the DRGs, now affecting only Medicaid patients, but soon to be pervasive throughout the field of medicine, will hamper students' learning, and cites in-patient cataract surgery among the disappearing species. Where once a student could follow a patient from the time of admittance the day before the operation, through the preparation and operation, and the following recuperation period, he or she now misses this chance because the patient is brought in the day of surgery and often sent home the same day. He fears this will happen with other kinds of operations, precluding opportunities to develop further ambulatory learning experiences.

Dr. Blacklow looks forward to the pleasures as well as the problems of his new office, and to working with the faculty and staff—"especially Dean Gonnella."

Dr. Blacklow is Editor and a contributing author to Signs and Symptoms, a major medical text recently published by Lippincott in a sixth edition. Professional memberships include the New York Academy of Sciences, the American Federation for Clinical Research, the American Society of Internal Medicine and the American Association for the Advancement of Sciences, among many others. He is a John Harvard Scholar, a Harvard College Scholar, a member of Phi Beta Kappa, Alpha Omega Alpha and Sigma Xi, and is certified a Diplomate, American Board of Internal Medicine. He has served on the Board of Directors of the Mid-America Chapter of the American Red Cross, the Chicago Area Health Careers Opportunity Program, the National Fund for Medical Education and the Massachusetts Health Research Institute, and has published many distinguished papers.

Dr. Blacklow's family includes his wife, Winifred Young Blacklow, and three sons. In February they moved to temporary quarters in Philadelphia, prior to selecting a house in the immediate area.

alumnus honored

Samuel L. Stover, M.D. '59, Chairman of the Rehabilitation Medicine Department of the University of Alabama at Birmingham School of Medicine has been named the first holder of the Robert B. Kyle Professorship in Rehabilitation Medicine. Dr. Stover, who is Medical Director of Spain Rehabilitation Center, was appointed to the endowed chair at the May 3 meeting of the Board of Trustees.

The Kyle Professorship, established by the Board in 1974, is named for the late Robert B. Kyle of Gladsden, a descendant of one of the pioneer settlers and developers of the city. A bequest by Kyle's wife, the late Mrs. Ruth P. Kyle, who had a long-time interest in rehabilitation medicine, funded the chair.
Dr. Stover joined the School of Medicine in 1969. He was appointed Chairman of the Department of Rehabilitation Medicine in 1976. In addition to serving as Medical Director of Spain Rehabilitation Center, he has served as the Project Director of Spinal Cord Injury Center, Project Director of the Rehabilitation Research and Training Center and as consultant to the Department of Pediatrics.

He is a member of the American Academy of Pediatrics, the American Academy of Physical Medicine and Rehabilitation, the American Congress Rehabilitation Medicine and the Association of Academic Physiatrists, and has served as an officer and committee member in most of these organizations. In addition he has served as President of the American Spinal Injury Association, as member of the Board of Directors of the Occupational Rehabilitation Center Committee, as a Director of the American Spinal Injury Foundation, as Chairman of the National Association of Spinal Cord Injury Care Systems and as surveyor of the Commission on Accreditation of Rehabilitation Facilities.

**imaging equipment**

Thomas Jefferson University Hospital has received approval for the purchase of magnetic resonance imaging (MRI) equipment and an advanced computerized tomography (CT) scanner. MRI equipment, which uses magnetic computer reconstruction to produce images, aids primarily in the diagnosis of cancers and neurological disorders. It allows physicians to examine the body's internal organs and cells without the use of ionization radiation. Jefferson is one of only two centers in the country to have this advanced model of CT scanner. It has the highest number of detectors now available to pass information it receives from the body into a computer for evaluation.

According to Michael J. Bradley, Executive Hospital Director and Vice President for Health Services, the Systems Agency also has approved plans for renovations to accommodate the scanner and for the relocation of the Division of Ultrasound to new quarters. The purchase of this equipment and facilities improvements represent a capital investment by Jefferson of $6.2 million, all of which will be financed by internal sources. Jack Edeiken, M.D., is Professor and Chairman of the Department of Radiology, which acquired the MRI equipment and CT scanner. Barry B. Goldberg, M.D., is Director of the Division of Ultrasound and Radiologic Imaging.

**radial keratotomy**

Frederic B. Kremer, M.D. '76, is Director of the Refractive Surgery Center at the Pepper Pavilion, 19th and Lombard Streets, Philadelphia. Since 1980, he has been giving courses on radial keratotomy, inviting ophthalmologists to share information and learn from the results of his studies. The January session was held at the Hershey Hotel in Philadelphia.

Radial keratotomy is the reshaping of the cornea through four, six, eight, 12 or 16 incisions extending from the pupil. Currently, 55% of Dr. Kremer’s patients are male and 44% female; the mean age is 31, and the range from 18 to 62. A growing number of patients are undergoing the surgery for cosmetic purposes in addition to those who have it for occupational or recreational needs. In cases of extreme myopia, the procedure is keratomileusis, whereby the corneal cap is removed, reshaped and put back into the original position.

Dr. Kremer attributes the success of the operation partially to his statistically derived computer program which increases the accuracy of the operation. In combination with the surgical technique and other instrumentation, the incidence of perforation and other potential complications, including repeat surgery, is minimized. He has developed an ultrasonic pachometer which gives consistent measurements taken anywhere on the cornea and, also, a blade with exact graduation which precludes overcorrection. “Diamond blades are standard now,” he said.

Corneal incisions were started with the Germans in the 1800s. In the 1950s, the Japanese (Sato) tried placing the incisions in the back of the cornea, resulting in loss of endothelial cells. Anterior radial keratotomy was developed by S.N. Fyodorov of the Soviet Union to modify corneal curvature and thereby reduce refractive error in myopes. Dr. Kremer met with Dr. Fyodorov and observed surgery and five-year post-operative patients when he traveled to the Soviet Union in 1980.

Dr. Kremer has co-authored many papers on the subject including one in a 1982 issue of Ophthalmic Surgery, “Radial Keratotomy: Evaluation of Safety and Efficacy,” and one in Ophthalmology in 1982 entitled “Quantitative Trauma Following Radial Keratotomy in Rabbits.”

Dr. Kremer is Clinical Assistant Professor of Ophthalmology at Jefferson, Wills Eye and University of Pennsylvania Hospitals, and staff ophthalmologist at Graduate Hospital. He is a Diplomate of the American Board of Ophthalmology.

**annual meeting**

One Hundred guests attended the Annual Meeting of the Alumni Association on February 28 at the Palace Hotel on the Parkway. Although it was the night to approve the year's work of each committee and to present the Nominating Committee report, it also was a most convivial and enjoyable evening.

President John J. Dowling, '47, presided. In addition to introducing the speakers for the Agenda, Edward C. Driscoll, Chairman of the Board, Lewis W. Bluemle, President of Thomas Jefferson University, and Joseph S. Gonnella, Dean and Vice President of Jefferson Medical College, he made presentations to the new Honorary Members of the Association. They are Harvey S. Brodovsky, Associate Professor of Medicine; Elliott L. Goodman, Clinical Assistant Professor of Medicine; Arthur R. Owens, Registrar of the College, and Jussi J. Saukkonen, Dean of the College of Graduate Studies. Also, E. Marshall Johnson,
C. Paul Bianchi, Ph.D., Professor and Chairman of the Department of Pharmacology, has been elected to represent the Association for Medical School Pharmacology on the Council of Academic Societies of the Association of American Medical Colleges (AAMC). His term will expire in May, 1987.

Robert L. Brent, M.D., Ph.D., Professor and Chairman of the Department of Pediatrics, and Director of the Stein Research Center, was recently the keynote speaker for the Silver Jubilee of the European Radiation Research Society and 18th annual meeting of the European Society for Radiation Biology in Zurich. His topic was “The Risks of Radiation Exposure to the Human Embryo.”

Jerome M. Cotler, M.D., '52, Professor of Orthopaedic Surgery, has been appointed a Governor in the American College of Surgeons. He also has been elected Chairman of the Advisory Council for Orthopaedic Surgery.

John F. D’Aprix has resigned as Vice President of Thomas Jefferson University to become President of the University City Science Center in West Philadelphia. Mr. D’Aprix came to Jefferson with President Lewis W. Bluemle, Jr., from the Oregon Health Sciences University in 1977. Since that time his accomplishments here have been noteworthy.

Mr. D’Aprix took Jefferson into a leadership role in civic affairs, economic development and improvement of Center City through such organizations as the Greater Philadelphia Chamber of Commerce, Greater Philadelphia First Corporation, Greater Philadelphia Economic Development Coalition and Washington Square West.

He developed the team that launched the 65 Million Decade Fund Drive in 1983. He also assisted with Board Development, recruiting new Trustees and a new system of tracking potential candidates with the help of Frederic L. Ballard, Edward C. Driscoll, Orville H. Bullitt, Jr., Donald E. Meads and Dr. Bluemle.

Loretta P. Finnegan, M.D., has been promoted to Professor in the Department of Pediatrics at JMC.

Trevor A. Fisk has been appointed Associate Executive Director for Marketing at Thomas Jefferson University Hospital. “Thomas Jefferson University has, for 160 years, represented the highest standards in both health care and sensitivity to its patients,” said Mr. Fisk. “In the new climate of hospital marketing, I want to ensure that everyone knows of the quality that Jefferson offers.” Mr. Fisk comes to Jefferson after six years at Cooper Hospital/University Medical Center, where he was Executive Vice President for Marketing and Planning. He received his Bachelor of Science Degree in Economics at the London School of Economics and his Master’s Degree in Management at the Massachusetts Institute of Technology.

John J. Gartland, M.D. 'S44, the James Edwards Professor of Orthopaedic Surgery and Chairman of the Department, has been elected to the Board of Directors of the Council of Medical Specialties. A former President of the American Academy of Orthopaedic Surgery, he has represented his specialty since 1981 and is the first orthopaedic surgeon to be elevated to this position at CMSS.

Willis C. Maddrey, M.D., Magee Professor of Medicine and Chairman of the Department, recently delivered the American College of Nutrition Award Lecture at the 25th annual American College of Nutrition meeting in Boston. The lecture was entitled “Branched Chain Amino Acid Therapy in Liver Disease.”

Matthew D. Rifkin, M.D., has been promoted to Professor in the Department of Radiology at JMC.

T. Burton Smith, Jr., M.D., physician to President Reagan, served a urology residency at Jefferson from 1946 to 1949 after graduating from the University of Southern California School of Medicine and taking an internship at Los Angeles County-University of Southern California Medical Center. Dr. Smith replaces Daniel Ruge, M.D., once a partner with Dr. Loyal Davis, Mrs. Reagan’s stepfather; Dr. Ruge is returning to the Veterans Administration as Chief of the Spinal Cord Injury Service. Dr. Smith operated on then Governor Reagan in 1967, performing a transurethral resection of the prostate gland. “A father of four and grandfather of eight, T. Burton Smith is a hearty, friendly, athletic physician, well liked and respected by his Los Angeles and Santa Monica colleagues,” said the newspaper report.

Bryce Templeton, M.D., has been appointed Professor in the Department of Psychiatry and Human Behavior.

Two Chinese physicians are on the Jefferson campus to observe the measurement techniques and the methods of collecting educational data at the Medical College. Feng Jin, M.D., is Editor-in-Chief of the Chinese Journal of Medical Education; he plans to publish a paper on his experiences here, in hopes that similar programs can be developed in China. Zi-qiang Feng, M.D., Dean of Educational Affairs at Naijing Medical College in Naijing, China, has been selected by the World Health Organization to spend six months in the Center for Research and Medical Education and Health care at Jefferson.
Arabians are the earliest known breed of horse with a recorded history, i.e. the first pedigreed, pure blood horse. They were valuable in times of war, centuries ago, because they were small, and could be housed inside the Egyptian tents and mounted easily in case of attack. Mares were the most valuable to the Bedouin tribes because they were quiet, and would not reveal the hiding places to intruders; they are the most valuable today because they appreciate 20 percent a year, reproduce annually and can be written off in five years. The Wall Street Journal calls Arabians the best tax investment and the second best financial investment in America.

Erly P. Gallo, M.D. ’65 and his wife, Barbara, own 26 “Arabs” which they train, breed and show, and which are housed in an immaculate stable. The Gallos are experts: they breed nationally recognized show horses in Winsted, northwestern Connecticut.

But it wasn’t always so, Dr. Gallo’s early experiences do not reflect expertise. At first they kept two horses in their garage, leaving two new cars out in the snow. Next, they bought a nine-year-old gelding named Prince ($350 including saddle and bridle) only to find out “he” was a 19-year-old-ex-trotter named Rosebud. Complaining that the horse wouldn’t canter, he was told that Standardbreds are trained not to canter.

“Then, in my astuteness,” Dr. Gallo remembers, “I purchased a six-month-old Appaloosa filly. You can’t ride them until they’re about three, I discovered. She was homesick, so I bought a donkey to keep her company and the two of them roamed around the yard.”

The Gallos learned fast. After their garage became crowded, they built a shed, and then a barn and finally a 40-acre horse farm that can house up to 30 horses. Fifty is as many as they would want to handle, even with additional housing space; you see, it’s a working farm, and strictly a family affair with the Gallos.

“Without Barb and the kids,” says Dr. Gallo, “There would be no farm.” His family can attest to that, particularly in the winter months—often
reaching 30 degrees below zero on
their hill—when 75 eight-gallon
buckets of water have to be carried to
the horses, along with 200 pounds of
grain and five bales of hay daily. The
Gallo children, Dawn, 20; Jennifer, 17;
Erly, Jr., 16; and Erika, 12, are all
involved in maintaining the horses.
While the girls ride and show, Erly, Jr.
is the set-up man. They all take great
pride in what they’ve seen happen
around them over the past 12 years.

Admitting that horses are their pre-
occupation, Barbara Gallo explained
what’s happened to the Arabian horse
business since they entered it. A "Bask
mare, when they first heard of Arabians,
sold for $25,000, top dollar. Today, she
would go for $300,000, "if you could
find one," Barbara says. "And it
wouldn’t matter if she had two broken
legs and one eye . . . that’s how
valuable they are for breeding." And
that’s why Arabian horse owners are
adults, not children. This is no hobby.

What makes Arabian horses so
special, ask those of us who perhaps
thought Thoroughbreds were more
valuable? For one thing, Arabs are one
breed of horse, and Thoroughbreds
are another. “You couldn’t have a
Thoroughbred Arab, for instance, be-
cause it would be like saying a Collie
German Shepherd,” explains Barbara,
who knows whereof she speaks since
she and Erly bred Old English Sheep-
dogs for years before turning to horses.
In fact, they were the only Americans
to breed an International Champion.

Small heads, wide foreheads, large
eyes, short muzzles and big nostrils
characterize Arabian horses—typically
a small horse, although some are bred
to be larger.

Poland and Russia and, to a smaller
extent, Spain, have the finest Arabian
horses. Russia was presented with a
premier stallion ("Aswan") by the
Egyptians at the completion of the
Aswan Dam in 1957. The Russians also
had confiscated mares from Poland,
after World War II. "The Poles are
brilliant breeders," says Dr. Gallo.
“They are an extremely inventive,
hard-working people, and their horses
are magnificent.”

A World War II story tells of
General George Patton, a horseman himself, scheming to bring some of the mares to the United States. Once here, they would be kept at the old Kellogg Estate in California. His pleas to the United States Government went unheeded, so he wrote a letter to President Roosevelt in which he reported that the famed Lipizzaner stallions had been stolen from Vienna by the Poles, and he thought it would be good PR to rescue them. The President agreed.

Encircling a small band of the mares with the Lipizzaners, housed in the same facility, he was able to spirit them aboard a vessel headed for the U.S. Only a couple of mares strayed in the process; the Russians captured them, added them to their growing ranks of confiscated mares, and with the gift of "Aswan" 12 years later, started a dynasty.

As people who own boats or planes always want a bigger, better one, so horse owners are always looking upward. "First," says Barbara, "you want an Arab because of the purity of the breed. Then, you want a better-quality Arab; then a pure Polish, Russian or Egyptian Arab; then an imported pure Polish Arab; then an imported Pure Polish National Champion Arab... and then you breed her to the ultimate pure Polish stallion."

Business-wise, the value of the mare exceeds that of the stallion. "There's no chauvenism on this farm," says Erly Gallo. They try to sell a mare for the price they feel her first three foals will bring. And they never sell a horse for more than could be obtained immediately if some catastrophe struck the buyer. They sold one mare for $35,000 who was resold two week later for $50,000 and sold again for $150,000 the next year.

Being breeders of dogs first, they have learned a few genetic tricks, i.e. traits to look for, and now are especially adept at surmising which mare/stallion combinations will produce the best foals. "We've learned that the genes of the foal are about 60-70% mare and 30% stallion—if the mare's no good, the baby won't be, either. A Bedouin's wealth was judged by how many mares..."
he owned.” Dr. Gallo published his genetics theses in ARABIAN magazine, one of several specialized magazines on the market for people, like the Gallos, who live and breathe Arabs.

As good an investment as Arabs are, and as valuable as they are, the prime reason the Gallos spend as much time and effort in raising them and personally caring for them is because of the learning process and the fun that their family has in the involvement. (“You don’t remember the business.”)

Their interest started when Dawn wanted to take riding lessons, and it’s been horses, horses, horses ever since. Dawn has traveled often with their mares, and is the family buyer (approximately six per year). She’s got a better eye than her father, he proudly admits. And, he adds, she was accepted into all four of the top-notch colleges she applied to because in addition to being smart and getting good grades, she has the independence so many freshmen lack. “Dawn may drop out of college,” the admissions officers told the Gallos, “but it won’t be because she’s immature.”

Dawn has taken a year off from Haverford College to pursue her education in training and breeding, so she can open up her own horse farm after she graduates. He major is languages, so she can negotiate in Polish, Russian or Spanish.

Dawn means business, but watching her is pure pleasure. Seeing her in casual clothes, rattling a plastic milk jug filled with stones to make her mare flash their tails and arch their necks, one can imagine how this elegant young woman looks in full equestrian regalia, holding her horse’s head high, as well as her own.

Younger sister Jennifer, who also shows, is the family seller (14-20 horses a year). She, too, has an eagle eye, and has entered into negotiations with far older and more experienced owners, usually coming out on the strong end of the deal. Her father says she has learned the meaning of giving her word and having it stick, and expecting the same from others.

It is Jennifer who selects the outfits she and Dawn will wear in the shows. They have come a long way from buying a horse, saddle and bridle for $350; the last Western saddle they bought cost $5000, and Erly Gallo said it was worth every penny. In their sparkling aquamarine and amethyst Western outfits, the girls stole the show, and displayed their horses to advantage in the bargain. All the money they win in the shows is put into the Trinian Farm account; since the girls and their horses consistently place in the top ten, their contribution is two-fold.

In order to compete in the U.S. National horse show, a rider or horse has to be at least a regional champion. Last October, the Gallos entered open classes at the National Horse Show National Championship, and placed in the top ten in the Pleasure Driving class. In the U.S. Arabian National Championship, with 2000 entries, Jennifer placed in the top ten in the Western Pleasure class. In every regional class they’ve ever performed, they have placed in the top five or better. Trinian Farm always brings home the ribbons.

The name “Trinian Farm” has a history. When Erly and Barbara Gallo were at Jefferson, after meeting at St. Bonaventure College and marrying, their big night out included pizza, beer and a movie. They were particularly delighted by a certain series of English movies which centered around a school for wayward girls, “Saint Trinian School.” So fond were they of these movies, and the recalcitrant young women fetched up in their memories, that they named their dog-breeding business St Trinian’s. Only after they discovered that some of the dog buyers were using their name as a church tax deduction, did they remove the Saint and stayed with Trinian Farm.

There are other memories of Jef-
ferson, where Erly Gallo studied to become a psychiatrist. He respected Abraham E. Rakoff, M.D. ’37, the late Professor of Obstetrics and Gynecology, and particularly admired anatomy Professor Franz Hausberger. At a horse show in Kentucky, Dr. Gallo met movie director Mike Nichols, and they started to discuss Jefferson. “I really liked Dr. Hausberger,” Gallo told his new acquaintance, “He was my favorite professor at Jefferson.” “That’s wonderful,” exclaimed Mike Nichols. “He’s my father!”

It was not long after he became involved in psychiatry that Erly Gallo knew he was in the wrong field. After two years of residency at Jefferson and Friends Hospital, he was depressed and disillusioned. “I wanted to make people better,” he said, “and I realized I couldn’t.” He hadn’t had enough experience in medicine to know that he couldn’t make everyone well in family practice, either, but that’s the field he chose. “I took a second residency, passed my boards in Philadelphia, and have never regretted it,” he said. “I treat people from the day they are born until the day they die. But not obstetrics . . . not enough time.”

Dr. Gallo sees 30 to 35 patients a day, making rounds at the hospital seven days a week, and still goes out on house calls. His patients are all eager to hear how the horses are doing. For ten years he practiced with his father, Francis Gallo, M.D. ’34, but recently has been in solo practice “right down the street from him. It was great,” he said. “We didn’t have an argument in ten years.” But the practice was too large, and he felt guilty leaving his father with the whole burden when he went to horse shows . . . and he did go to horse shows.

“I love it,” he said. “We have two different lives. In the winter we haul and fix and clean; it’s a quiet, rural existence. Then in the summer, it’s Barb and the kids and horse shows. We meet a whole new set of people. It changes your perspective,” he admits. “You meet tremendous people who don’t care who YOU are—they’re only interested in your horse.” It has taken them away from the cocktail parties at

the club, and put them in jeans and old shoes, swatting flies and lugging manure.

They have put together a stock portfolio presentation, a $2.4 million offering that matures in seven years at $7.5 million. Their clients made a 520 percent profit last year. In this all-consuming passion, Barbara does the advertising, makes videos and sets them to music. She runs Trinian Farm like a well-oiled machine.

Part of the well-oiled machine is the fully equipped room attached to the barn, where they have a closed circuit TV for foaling mares, comfortable chairs and a kitchenette. When the mares are foaling, the family moves in. While they live just across the street, they spend most of their waking hours on this side. This is where they sip coffee and make plans and laugh about some of the humorous aspects of farm life. Barbara Gallo recalls the time when Jennifer went to her ballet lessons, having forgotten to change her shoes after mucking the stables. It did not go unnoticed.

They talk about how close their family has become, how every once in a while someone feels left out and they work at making that person feel as though he or she is making a contribution to the overall scheme. It’s back-breaking work, for the most part, and they are fortunate to be able to see great accomplishment for their efforts. Soon Dawn will move out and train and breed horses on her own—a responsibility for which her experience and education have ably prepared her—and the chain of command will change.

For now, the Gallo family enjoys the physical outlet, the monetary rewards, the opportunity to travel, the potential for the future and the friendship of “fabulous” people.

And, importantly, the fun. “The fun part is the bonus,” say the Gallos.
1924

A memorial scholarship fund has been established in recognition of the service of Blackwell Sawyer, M.D. '24, contributed to his community before his death on June 24, 1984. (See p. 35) The Board of Directors of the First National Bank of Toms River started the fund with a check for $5000, and an additional $3500 was presented by friends of Dr. Sawyer. The late general practitioner had practiced in Ocean County for 48 years. His son, Blackwell Sawyer, Jr., M.D. '56, is an orthopaedic surgeon living in Brielle, New Jersey.

1926

Philip B. Davis, 1125 Gatehouse Rd., High Point, N.C., is "still living in North Carolina in the summer and Florida in the winter."

1927

Donald P. Ross, 325 Beach Rd., Tequesta, Fl., is grateful to Jefferson for all it has done for him and for his late brother, Thomas W. Ross, M.D. '27.

Eric W. Witt, 606 South G St., Port Angeles, Wa., and his wife Fazel "love this small town after living for more than a half century and practicing family medicine in the Los Angeles area."

1930

Richard B. Nicholls, 901 Hampton Blvd., Norfolk, Va., who had his 80th birthday in October, 1984, is still in active office practice. Dr. Nicholls stopped surgery at the end of 1982 after 50 years. "My health is excellent—thank God! My wife Sylvia joins me in sending our best wishes to all. Sorry I'll not be able to attend our 55th reunion."

1931

Nathan Ralph, 826 Deerfield Ln., Bryn Mawr, Pa., writes, "I have just retired from practice; I'm enjoying myself and am in good health."

1932

Jacob Lichstein, 3870 Latrobe St., Los Angeles, has been selected by the Citizen Ambassador Program of People-to-People International to join a delegation of U.S. gastroenterologists to visit England, the Netherlands, Denmark and Sweden this year. The program was founded by President Eisenhower in 1956 to help further the ideals of People-to-People International dedicated to promoting understanding around the world. Dr. Lichstein is Emeritus Associate Clinical Professor of Medicine at UCLA School of Medicine. He has taught at six university medical schools (including Jefferson) and in 1965 served as President of the Southern California Society of Gastroenterology.

1933

C. Perry Cleaver, 250 Main St., Catawissa, Pa., writes that he "can't see very well, can't hear very well, can't walk very far—but I don't hurt anywhere, and I can eat very well. At our age, that is not too bad!"

Nicholas F. Vincent, 2119 O'Hara Ct., Columbia, S.C., resigned from the psychiatric staff of Eastern State Hospital in Lexington, Kentucky, returning to Columbia after a three and a half year absence. "I may do part time Mental Health Clinic duty."

1934

Joseph T. Freeman, 1530 Locust St., Philadelphia, was selected by the Gerontological Society of America, to give the Society's Eighth Annual endowed Clinical Lectureship in Geriatrics. Dr. Freeman's topic was "A Geriatric Odyssey."

1935

Arthur N. Ericksen, 1836 Salem Rd., Reading, Pa., has been retired for over a year. "Looking forward to our 50th reunion."

S. Sprigg Jacob, 632 Edgewater Dr., Dunedin, Fl., writes: "Since retiring from pediatric practice in September, 1983, we have spent six months in Dunedin and six months in our home in East Lansing, Michigan, catching up on golf and bridge among other things, and enjoying every day!"

1937

Everett J. Gordon, 2916 Ellicott Terr., NW, Washington, D.C., received the Silver Vicennial Medal from Georgetown University for 20 years of service as a Clinical Associate Professor of Orthopaedic Surgery on November 15, 1984, at a Faculty Convocation.

1939

William C. Burry, P.O. Box 240, Mountainhome, Pa., was reelected for a second term as President of the Monroe County Medical Society, 1985. He is in his third year as Medical Advisor for the Pocono Mountain School District, and just completed his seventh year as Medical Executive Committee Physician at Large at Pocono Hospital.

George Evashwick, 204 Roswell, Long Beach, Ca., has been elected to membership in Jefferson's Chapter of Alpha Omega Alpha.

Henry H. Stroud, 708 Ashford Rd., Wilmington, De., has been fully retired since June 30, 1984.

1941

Charles N. Burns, 445 Wyoming Ave., Kingston, Pa., represented Jefferson at the inauguration of Christopher N. Breiseth as fourth President of Wilkes College on April 14. Dr. Burns is the first graduate of the Wilkes Barre College.

Frederick B. Wagner, Jr., 800 Chauncey Rd., Narberth, Pa., was elected...
Robert M. Fales, M.D. '32, doesn’t just remember the good old days . . . he writes about them. And he writes about them with such flair and intelligence that Jeffersonians everywhere would delight in reading his book, Wilmington Yesteryear.

Published in a large, handsome edition by the Lower Cape Fear Historical Society, Wilmington Yesteryear allows everyone to see, in pictures and prose, what Dr. Fales has known all of his 75 years: Wilmington, North Carolina is an interesting, wonderful, special place “to hail from.”

Dr. Fales attended New Hanover High School—one of the fortunate young men to go beyond eighth grade—and was accepted as a “Deacon” into the freshman class at Wake Forest College. He had decided to become a doctor and, since Wake Forest Medical School had only a two-year curriculum, he followed the tradition of North Carolina medical students and headed for Philadelphia for his last two years. Some went to Penn, some to Jefferson; Dr. Fales came to Jefferson. He almost stayed here, too. After spending two years at the Episcopal Hospital and a year in Easton, Maryland (the Eastern Shore reminding him of his southeastern North Carolina home) he liked the area and was more than willing to stay. But Wall Street had fallen and money was scarce, so he headed south and set up an office on the first floor of his mother’s house in Wilmington. There, he hung up his shingle in 1935.

Most of Dr. Fales’ book is a pictorial and chronological account of his Wilmington, and the sights and sounds that have endeared it to its inhabitants.

Cover design of Dr. Fales’ book, in which he describes his early days as a Jefferson student and young physician in North Carolina.
principal purpose is to engage in research and educational projects in the socio-economic aspects of medicine of interest to internists and their patients. Dr. Grandon has been reelected by the AMA’s Board of Trustees as Chairman of the Ad Hoc Committee on Medical Legal Affairs. He served as President of the Pennsylvania Medical Society in 1982.

1946

William S. Carter, Jr., 460 Bancroft Rd., Moylan, Pa. writes that he has retired because of health problems. "Many interests keep me busy. William S. Carter III, M.D. ’76, had a beautiful baby girl, Michelle Ann, on November 12, 1984."

Oscar K. Lanich, Jr., 2131 Easley, Waterloo, la., has retired as of November 30, 1984, from the practice of radiology at Allen Hospital, Santori Hospital, Grundy Center and Waverly Hospital.


1947

Joseph M. Corson, 24 Bloomfield St., Lexington, Ma., writes: "This year Ruth and I celebrated the entrance of our daughter, Gail, into her third year at Jefferson, the first birthday of our first grandchild, and my promotion to Professor of Pathology at Harvard Medical School. Our best wishes to friends among the Jefferson alumni—medical and nursing."

John J. Dowling, Lankenau Medical Building, Philadelphia, is author of a recently published textbook, Musculoskeletal Disease: Staged for Rapid Comprehension. The text is aimed at postgraduate level training for specialists in the disciplines of musculoskeletal disease, family medicine and internal medicine. Dr. Dowling is Clinical Professor of Orthopaedic Surgery at Jefferson and Chief at Lankenau Hospital.

Robert B. Funch, Crockett Ridge Rd., New England, in a small Maine village. I have introduced the full gamut of Radiologic Interventional Procedures as well as Nuclear Medicine and Ultrasound. Only a few Jefferson men encountered, however. Have been a Mainer almost eight years now."

Ross S. Funch, 606 Fields Dr., Lafayette Hill, Pa., is Chief of Anesthesia at Warminster General Hospital after being Chief of Anesthesia at Germantown Hospital for 20 years. Dr. Funch recently underwent bilateral carotid artery surgery at Jefferson. "Received the best of treatment."

Martin M. Mandel, Suite 110-B, Benson Manor, Jenkintown, Pa., Chief of Neurology at Jeanes Hospital, was recently honored at the centennial dinner of the Philadelphia Neurological Society, of which Dr. Mandel is past president.

Charles J. Rodgers, 1434 Keller Ave., Williamsport, Pa., writes, "My eighth child, John C. Rodgers, has been accepted for the Class of 1989."

1948

Eugene P. Hughes, Sr., 113 W. Chestnut Hill Ave., Philadelphia, writes, "After raising eight sons, we are now the proud grandparents of three grandsons and SEVEN granddaughters!"

Henry R. Liss, 1 Wentworth Rd., Summit, N.J. represented Jefferson at the inauguration on March 29 of Robert H. Donaldson as President of Fairleigh Dickinson University. Dr. Liss is the State Vice President of New Jersey for the Jefferson Alumni Association.

Edward Scull, Denset’s Estate, Nevis, West Indies, has retired from the practice of rheumatology and is now a fruit farmer in the West Indies.

Robert B. Wright, 811 Hemlock, Macon, Ga., writes: "You CAN teach an old dog new tricks. I received a Master’s Degree in Public Health from Emory University in August."

1950

Eugene L. Childers, 5 Raleigh Rd., Edison, N.J., reports that his oldest son, Lee, is in real estate; Gil an Assistant District Attorney, Bay, a stock broker and Anne a Clinical Psychology graduate of Georgetown.

Wilbur J. Harley, 241 Flintshire Rd., Winston-Salem, N.C., is "Retired—busy—happy."
Frank E. McElree, Jr., 111 N. Main St., Greenville, Pa., has been appointed Medical Director of Emergency Services at The Greenville Hospital. In his new position, Dr. McElree will provide patient care in the hospital's emergency room, as well as assume responsibility for supervision of emergency physicians, quality assurance of emergency patient care, implementation of policies in emergency medical care delivery and direction of continuing medical education programs for emergency physicians. He is certified in advanced trauma life support, and is a Fellow of the American Academy of Surgeons. He has been past President of the Medical Staff and past Chief of Surgery at The Greenville Hospital, as well as past President of the Mercer County Medical Society.

1951
James B. Cox, 1312 Beacon Hill La., Knoxville, Tenn., retired from practice July 1, 1984.
Ernest F. Doherty, 518 Montauk Ave., New London, Conn., served as medical officer on board the U.S. Coast Guard Barque “Eagle” for the month of July. Ports of call included Quebec, Sidney, Nova Scotia, and Portsmouth, New Hampshire. He and his wife are enjoying their tour at the United States Coast Guard Academy, and now have three grandchildren.

Glenn R. Leonard, P.O. Box 20158, Denver, retired in the summer of 1984 from the practice of anesthesiology.

James C. McLa, 1, 180 Riverbend Dr., Bermuda Run, Advance, N.C., is Head of the Department of Gynecology at Winston-Salem Health Care of R.J. Reynolds Inc. and Assistant Professor at Bowman Gray Medical School. Of his four children, two are lawyers, one a C.P.A., M.B.A. and one a graphic artist.

Francis J. Sweeney, Jr., 931 Cedar Grove Rd., Wynnewood, Pa., has been appointed to the Board of Trustees of Episcopal Hospital, Front Street and Lehigh Avenue.

1952
Jerome M. Cotler, Professor of Orthopaedic Surgery, Curtis Clinic, was elected to the Board of Governors of the American College of Surgeons as a Specialty Society Governor from the American Orthopaedic Association, at the annual meeting of Fellows in October, 1984. Dr. Cotler was also appointed Chairman of the Advisory Council for Orthopaedic Surgery.

Leo C. Partyka, Box 462, Berwick, Pa., attended the Jefferson Rehoboth Symposium last June and also attended graduation activities of the Medical College at the Academy of Music. "Impressed with all the expansion."

Gabriel Tatarian, 676 Mill St., Mooresboro., N.J., presently is serving as President of the American-Armenian Medical and Dental Association of Greater Philadelphia. He continues as Chief and Chairman of the Department of Obstetrics and Gynecology at Rancocas Valley Hospital in nearby Willingboro.

1953
Joseph H. Carter, 816 Hilltop Rd., Erie, Pa., was recently installed as President of the Medical Staff of Hamot Medical Center. Dr. Carter is a member of Hamot's Department of Anesthesiology and serves as Medical Director of the Hamot Sameday Surgical Center. He is a former President of the Erie County Medical Society.

Norman Gladsden, 200 SW 21st Rd., Miami, will retire in 1985 after 30 years of "active private solo practice. I am retiring from general practice and limiting my activities to Hypnotherapy for Medical Problems!"

1954
Robert B. Cahan, 2340 Sutter St., San Francisco, was re-elected to the Board of Directors, San Francisco Independent Practice Association and appointed to the Board of Directors of the American Board of Forensic Psychiatry.

Jack W. Fink, 126 Holly Dr., Lansdale, Pa., is "happy to report our son, David, is now completing his senior year at Jefferson and his twin sister, Julia Ann, having graduated Phi Beta Kappa from the University of Richmond, is now in graduate school at Yale."

Donald L. Minter, 309 Hackett Rd., Goshen, N.Y., is traveling to the People's Republic of China for the Physicians Exchange Program, April and May of 1985.

Richard B. Peoples, 5575 Hilltop Crescent, Oakland, Ca., writes that he was "sorry to have missed the reunion, but probably 'saved face' as far as recognizing old friends is concerned. The picture was great, but oh, my— who's who?"

1955
Robert E. Berry, 502 Audubon Rd., Roanoke, Va., was installed as the President of Roanoke Academy of Medicine, January 7, 1985. He is still Director of Surgical Education at Roanoke Memorial Hospitals and is a Professor of the University of Virginia Medical School.

Rachmel Cherner, Suite 414 Benjamin Fox Pavilion, Jenkintown, Pa., continues his practice of internal medicine with a subspecialty in endocrinology and metabolic diseases at this new address.

1956
Benjamin Bacharach, Associate Dean for Admissions, represented Jefferson at the inauguration on March 18 of Jonathan C. Messerli as President of Muhlenberg College. Dr. Bacharach is a graduate of Muhlenberg.

Hymn R. Kahn, 1149 Westbury Rd., Jenkintown, Pa., is Senior Medical Director of HMO-PA, since August 1, 1984.

1957
Robert M. Allman, 4301 Jones Bridge (USUHS), Bethesda, Md., has been named Chairman of the Department of Radiology at the George Washington University Medical Center in Washington, D.C. Dr. Allman has served as Chief of Radiology at a number of military centers including the Air Force hospital at Wiesbaden, Germany. He is a Fellow of the American College of Radiology and a member of the Society of Chairmen of Academic Radiology Departments, the Association of Radiologists and numerous other organizations.

Martin G. Blechman, 280 Prospect Ave., Hackensack, N.J., Chief of Diabetes at Hackensack Medical Center, was appointed to the Governor's Advisory Commission on Diabetes. The 22-member Commission, recently formed to study and access the medical, social and economic impact of the disease, was charged by Governor Thomas Kean to recommend programs and legislation. Dr. Blechman has been on staff at the Medical Center for 22 years, and is past President of the New Jersey Affiliate, American Diabetes Association.

Gerry T. Coussounis, 527 Gates St., Philadelphia, was recently elected
Wong Lectureship

The Robert T. Wong Lectureship has been established to honor the Hawaiian alumnus, class of 1936, at the John A. Burns School of Medicine of the University of Hawaii. Robert C. Gallo, M.D., Jefferson class of 1963, the Chief of Laboratory of Tumor Cell Biology Experimental Therapeutics of the National Cancer Institute in Bethesda, presented the first lecture in February. His topic “Basic Aspects of HTLV-1 and HTLV-3 and Their Link to Alterations of T-Cell Growth.” This presentation was one of eight in a three day program.

Dr. Wong, an ophthalmologist, is Clinical Professor at the School of Medicine there and has been most active in its development. He was an outspoken advocate of its expansion to a four year school in 1973 and has contributed substantially to its programs.

Among his professional affiliations Dr. Wong is a Fellow of the American College of Surgeons, the American Academy of Ophthalmology, the Pacific Coast Oto-Ophthalmological Society and the Pan Pacific Surgical Association. He has served as Vice President of Hawaii for the Jefferson Alumni Association for many years and is a member of the President’s Club.

The establishment of the lectureship in his honor will permit the attraction of outstanding biomedical scientists to Hawaii for the enrichment of both the Medical School and the practice of medicine in the state.

Heath Surgical Unit

Alfred O. Heath, M.D. ’57, was honored in his native St. Thomas, Virgin Islands, December 21, 1984, when by legislative act the Alfred O. Heath Surgical Unit was dedicated at the St. Thomas Hospital and Community Health Center. Dr. Heath has served the medical community as Medical Director, and at the same time Chief of Surgery, in which capacity he demonstrated extraordinary surgical skill in cardiac and thoracic surgery. Among his most noteworthy surgical accomplishments were open heart surgery on a child and restorative surgery on a man whose arm had been severed. He served as Commissioner of Health until the summer of 1976. In his private practice of medicine he was credited with the achievement of the construction of the Medical Arts Complex, which has developed a major group of comprehensive health practices serving the community at large.

His citation reads, “The people of the Virgin Islands and particularly the Department of Health are proud of this dedicated brilliant native son who serves as an inspiration for the youth of the territory. His legacy will long be remembered by the citizens and visitors to our shores, to whom he unselfishly dedicates his talents and energies.”

In October, prior to this dedication, Dr. Heath was feted at the Fifth Annual Homecoming Dinner-Dance of the College of the Virgin Islands, where his long list of attributes and community involvements were listed. He plays the classical violin as well as the “fiddle,” and sings tenor in the community and church choirs. Married to Geraldine Cheatham, Dr. Heath is the father of Alfred, Anita and Judy. He is the cousin of Cora L. Christian, M.D. ’71.

He is a Diplomate, American Board of Surgery; Fellow, American College of Surgeons; Fellow, International College of Angiology; and Member, American Academy of General Practice, among many other affiliations.

Chief of the newly formed Family Practice Division of the Department of Medicine at Memorial Hospital in Roxborough. Dr. Cousounis has been practicing in the Roxborough area for 25 years. He is certified by the American Board of Family Practice and is a Fellow in the American Academy of Family Practice.

William T. Lampe II, 1399 Clover La., York, Pa., sends his running notes: “Member, York Road Runners. Raced personal best in November, 1984—five miles in 34 minutes, one mile in five minutes, 30 seconds.”

Raymond G. Tronzo, 2889 10th Ave. N, Lake Worth, Fl., has been appointed to the clinical teaching staff at the University of Miami Medical School. His book, Surgery of the Hip Joint, Volume I, has been published by Springer-Verlag. In February, his total hip system, called the BioBond prosthesis, was approved for clinical investigation by the F.D.A. Having moved into larger quarters, Dr. Tronzo now devotes much of his time to joint replacement surgery utilizing the technique of bone ingrowth, a system which he pioneered while at the University of Pennsylvania as Associate Professor of Orthopaedic Surgery.

1958

Richard E. Eschbach, 130 Station Hospital, Psychiatry Department, APO, N.Y., is enjoying Heidelberg and his position in the United States Forces Europe. He and his wife, Lillian, spent Thanksgiving in Venice. Dr. Eschbach is “Looking forward to our next reunion. We really owe a lot to Jefferson,” he wrote his classmate, Peter Amadio, Jr., “I’m really proud to say I’m from there.”

Mrs. Lois Fogel, who attended the February Alumni Dinner in Fort Lauderdale, reported that her late husband, Norman A. Fogel, M.D., had been honored by his fellow dermatologists with a podium in the University of Miami School Library. His North Miami colleagues also established a fund for the Dermatological Society, which provides for guest speakers at state meetings. This honorarium will have its sixth speaker in May, “and is a lovely tribute to Dr. Fogel,” said his widow.

Jay A. Kern, 600 N. Edgemere Dr., W. Allenhurst, N.J., has been elected Director of the Department of Medicine at Monmouth Medical Center. Dr. Kern is also Vice President of the medical staff.
1959

Trevor D. Glenn, 5072 N. Van Ness, Fresno, Ca., has been named a full professor at the University of California at San Francisco in psychiatry.

Henry A. Greenwald, 4516 Coventry Rd., Harrisburg, Pa., is President of the Polyclinic Medical/Dental Center staff. He is an Associate in the Department of Family Medicine.

William A. Steinbach, Miller Rd., Waverly, Pa., has been elected 1985 President of the Eastern Pennsylvania Chapter of the American College of Surgeons. Dr. Steinbach is Director of Surgery at Community Medical Center and serves on the Board of Councilors of the American Academy of Orthopaedic Surgeons. He is Past President of the Pennsylvania Orthopaedic Society, and a member of the American Medical Association and the Pennsylvania and Lackawanna County Medical Societies. He and his wife, Barbara, live in Waverly with their five children.

Samuel L. Stover, Box 435, Rt. 1, Helena, AL, Chairman of the Rehabilitation Medicine Department at the University of Alabama Medical School (Birmingham), has been named the first holder of the Robert B. Kyle Professorship in Rehabilitation Medicine. Dr. Stover, who is Medical Director of Spain Rehabilitation Center, was appointed to the endowed chair at the May 3 meeting of the Board of Trustees. (See p.10)

1960

Milton L. Friedman, 203 Marco Rd., Elkins Park, Pa., has been reelected for the fourth two-year term as President of the Rittenhouse Astronomical Society in Philadelphia. Last spring, Dr. Friedman coordinated a telescope fair at the Franklin Institute with many astronomy societies participating. Dr. Friedman is the science correspondent for the Montgomery Newspapers which circulate in the Philadelphia suburbs. On September 7, 1984, he attended a special White House news briefing on "America's Future in Space.

David Green, 1030 N. Elmwood Ave., Oak Park, Ill., writes: "We spent a wonderful six months in Australia this past year. Tiby did research for the Art Gallery of New South Wales and I had a senior fellowship from the Fogarty International Center. We hope to attend the 25th reunion festivities."

Marvin E. Lautt, P.O. Box 7095, Vallejo, Ca., is in the private practice of psychiatry.

Joseph T. Pintomi, 3101 Cottman Ave., Philadelphia, has been reelected Chairman of the Department of Family Practice at Nazareth Hospital.

Seymour Shlomchik, 1013 Walsh La., Narberth, Pa., writes that his son, Mark, is in his fourth year of an MD/PhD Program at the University of Pennsylvania. His son, Warren, is entering the University of Pennsylvania Medical School, Class of 1989.

1961

William T. Anderson, 40 Harlan School Rd., Somerville, N.J., was recertified in family practice this year. "Jefferson's Professor of Microbiology, Robert Mandle, administered the examination—old home style! I was reelected to the Executive Committee of the Medical Staff of Somerset Medical Center. I also am serving on the search committee for our new Director of Psychiatry."

1962

Michael J. Prendergast, 924 Colonial Ave., York, Pa., a urologist, who heads the Executive Committee of York Hospital's Medical Staff, has been elected Vice-Chairman of the Governing Council of the Pennsylvania Medical Society Hospital Medical Staff section. Dr. Prendergast will help chair the bi-annual state Society meetings and join the Pennsylvania delegation in meeting with the American Medical Association in June and December to discuss problems pertinent to hospitals. He is Chief of the Urology Division at York Hospital.

William E. Staas, Jr., 323 Mimosa Dr., Cherry Hill, N.J., President and Medical Director of Magee Rehabilitation Hospital, has been elected Fifth Vice President of the American Congress of Physical Medicine and Rehabilitation. He serves as Professor at Jefferson.

1963

Phillip Z. Aronow, 434 Loucroft Rd., Haddonfield, N.J., is President of the Medical Staff of the Garden State Division of the West Jersey Health System. Dr. Aronow is Chairman of the Department of Surgery of the Garden State Medical Staff and holds a teaching appointment as Director of Surgical Education at Cooper Medical Center, Camden. He is a Fellow of the American College of Surgeons and is certified by the American Board of Surgeons.

1965

Elmer C. Bigley, Jr., 4921 Kingston Dr., Annandale, Va., is married with three children. He is past Chief of Staff and present member of the Board of Trustees at National Hospital for Orthopaedics and Rehabilitation. Dr. Bigley is President of the Northern Virginia Academy of Surgeons, and past Secretary of the Alexandria Medical Society.

James L. Conrad, 1511 N. Ridge Rd., Perkasie, Pa., continues "to practice in Bucks County and enjoys serving as teaching preceptor in Jeff's Depart- ment of Family Medicine. Looking forward to meeting with many of my classmates this coming June at our 20th reunion."

Edward R. Corcoran, Jr., 700 Starkey Rd., Largo, Fl., writes: "I'm still in forensic pathology in the St. Petersburg area and enjoying the Florida sunshine. I never expected to be doing this kind of work when I was a student at Jeff. The medical examiner's lecture on head trauma made me sick. Hope to see you all in June."

Harvey Slater, 1363 Shady Ave., Pittsburgh, is Chief of Surgery and Director of the Burn/Trauma Center at West Penn Hospital. His daughter is a sophomore at Barnard College in New York, and his twin sons are freshmen in high school.

Donald H. Smith, 90 Sutton Pl., Easton, Pa., is a Delegate to the Pennsylvania Medical Society, House President of the Medical Staff of Easton Hospital, Chairman of the Rotary Student Exchange Program, Member of the Ad Hoc Committee and Public Relations Chairman of the Nutrition Support Society of the Pennsylvania Medical Society at Easton Hospital.

William B. Wood, 80 Oakwood Dr., Mankato, Mn., writes: "Family life is busy—we have six children (all boys except five—hal!). My practice of anesthesia continues to grow despite conditions to the contrary elsewhere. Our group is providing anesthesia and Pain Clinic services for eight hospitals in South Central Minnesota. Weike these "North Woods," with good winter cross country skiing and summer fishing. I
Jefferson
Revisited

by Albert H. Wilkinson, Jr.,
M.D. '52

Dr. Wilkinson with third-year medical students

My first visit to Philadelphia and Jefferson Medical College was in the fall of 1947, while on vacation with my parents to see family in rural Pennsylvania. There I had an interview with Dr. Joseph Crider, then Dean of Admissions. Since I had never been in the northeastern United States nor lived in a large city, I can, even now, recall the feeling of being overwhelmed by the bigness of everything—the city with its many large buildings, the traffic, and Jefferson—it seemed colossal. But once in the presence of Dr. Crider I was made to feel at ease by the gentle attitude and southern accent of that Mississippian. I left that interview and tour of Jefferson with a determined feeling that this was where I wanted to come to medical school. I had been interviewed at two other medical schools by deans and faculty members, but here there was something different. That difference could not be precisely defined, but it was there. It was perhaps derived from the blend of a long history and proud heritage at one of the foremost institutions for medical education in America. Little did I realize at the time how profound and far reaching that spirit of Jefferson can be!

It was just a year later that I arrived to begin those four years at "Old Jeff." During Dr. George Bennett's introductory lecture at the Daniel Baugh Institute of Anatomy, we were introduced to the challenge of the first year of medical school, and also, wonderfully articulated, the responsibility and pride that goes with being a Jefferson physician. And for the vast majority of Jefferson graduates, that feeling of pride and gratitude for those truly outstanding medical school years, never leaves us.

In March of 1982 and again in January, 1985, it has been my good fortune and honor to return to Jefferson to serve as Visiting Professor of Pediatric Surgery. While I had returned for class reunions and occasionally for other brief visits while attending meetings at Children's Hospital of Philadelphia, such occasions did not provide for more than a glimpse into the real posture and attitudes of present day Jefferson.

The growth into a true downtown campus and the physical changes at Jeff are not only spectacular, but almost unbelievable. Since graduating in 1952 I have been associated with several medical schools during training. I
subsequently have been affiliated with and/or have visited and revisited many others. While all have enjoyed growth and improvement in their institutional facilities, none is quite as impressive as that at Jefferson. The New Hospital, the Scott Library, Jefferson Alumni Hall, the student high rise housing buildings and the Wills Eye Hospital, are all conveniently near and around the well integrated and modernized older college buildings and hospital with which we are all so familiar.

But these physical additions at Jefferson, while truly spectacular, tell only a part of the story of a revisit to the Medical College. Upon entering Alumni Hall one sees on the left a booth filled with pamphlets about activities and organizations for students at Jeff. There is membership in the “Commons” which, among other things, provides facilities that include basketball courts, a swimming pool, sauna and racquetball court. There is an organization for golfers, special study groups, art exhibitions and many other activities. Upon viewing all of this, I felt nostalgia as I recalled the occasional evening and mostly weekend walks to the Arch Street YMCA gym for a workout and a swim. How things have changed!

But have they really? As the foregoing pictures, physical Jefferson has undergone much change. The real joy of a revisit to Jefferson, however, has come from the opportunities to meet with groups of students as well as many members of the faculty and administration. The students are a most impressive group—neatly groomed, knowledgeable, interested and articulate. The faculty whom I have had the privilege of meeting are skilled clinicians as well as educators—inspired and dedicated. It seems that throughout all areas of Jefferson, from Dean Joseph Gonnella, to the faculty, students and housestaff a spirit of successful dedication to teach medicine prevails today as it did in 1948. It is their attitude that creates the Jefferson spirit which can endow each student with not only a fine medical education, but also with an intense dedication to the institution from which he came. That is Jefferson Revisited.

still teach a bit as Medical Director of a Paramedical Training Program at our State University. Best regards to all.”

1966

Robert H. Kirschner, 6822 S. Euclid Ave., Chicago, writes: “In March 1985 I will be traveling to Argentina with several other forensic scientists to help establish a program for the identification of the skeletal remains of persons kidnapped and murdered by the previous regime—victims known as The Disappeared.”

Arthur J. Schatz, 1100 NE 163 St., North Miami Beach, has been re-elected Chairman of the Department of Gynecology at Parkway Regional Medical Center.

Robert G. Timmons, 1815 South Ave. D. Fortales, N.M., is a Clinical Associate in Community/Emergency Medicine at the University of New Mexico School of Medicine.

1967

Daniel C. Harrer, 645 Overhill Rd., Ardmore, Pa., is opening a new office for the practice of obstetrics and gynecology in Devon.

George H. Hughes, 4680 Fox Hollow Rd., Eugene, Or., writes: “This is the first year of mid-life crisis—looking for physical immortality. I participated in my first triathlon, finishing 97 out of 285 entrants, and my first marathon (NYC) finishing in the top 50% of 14,000 finishers.”

Stanton I. Moldovan, 8838 Sandringham, Houston, reports a new baby boy, Andrew.

1968

Stephen L. Hershey, 1500 Shallcross Ave., Wilmington, De., was elected President of the Board of Trustees of DIMER (Delaware Institute Medical Education and Research) in December, 1984.

Jacquelyn J. Wilson, 536 Brotherton Rd., Escondido, Ca., is pursuing her studies of energy medicines: homeopathy, acupuncture, electrodiagnosis and electrotherapies, here and abroad. “Very interesting.”

1969

Richard L. Allman, 327 Rock Rd., Villanova, Pa., has been appointed Program Director, Residency in Internal Medicine, at The Bryn Mawr Hospital. Dr. Allman was formerly Assistant Chief of Medicine and Chief of Rheumatology at Allentown Hospital and Allentown and Sacred Heart Hospital Center. He and his wife, Suzanne, live in Villanova with their two children, Michelle and Steven.

Walter J. Finnegan, 141 SW 96 Terr., Plantation, Fl, writes that he has one year of law school left. Sarah, age three and a half, is “swimming and learning Spanish. Peg is lean and tanned.” Dr. Finnegan took a leave of absence from his orthopaedic surgery practice to enter law school at Nova University last year.

Leonard M. Glassman, 2801 New Mexico Ave., Washington, D.C. has been named Chief of the Department of Radiology at Columbia Hospital for Women.

1970

Joseph A. Breslin, Jr., 1280 Wheatland Ave., Lancaster, Pa., was recently elected President of the Vanderbilt Urological Society in Nashville, Tennessee, and inducted as Fellow of the American College of Surgeons at the meeting in San Francisco. “Looking forward to seeing old faces at our 15th reunion.”

Richard H. Charney, 511 Danielle Dr., Hatboro, Pa., is serving as Chairman of the Department of Surgery at Warminster General Hospital from January, 1985 until December, 1986.

Sarah Sundborg Long, 1200 Rose Glen Rd., Gladwyne, Pa., Chief of Pediatric Infectious Diseases at St. Christopher’s Hospital for Children in Philadelphia, and Associate Professor of Pediatrics at Temple University School of Medicine, has received recent appointments to the editorial board of the journal Pediatrics, to active membership in the Scientific Program Committee of the American Board of Pediatrics and to the Pediatrics Test Committee of the National Board of Medical Examiners. Dr. Long is married to William Barstow Long, M.D., who did his medical residency and fellowship training at Jefferson. He is currently a gastroenterologist on the staff of the University of Pennsylvania. The Longs have three children: Stephen (12), Suzanne (10) and Caroline (8).

John T. Martzolf, 1909 Chestnut, Grand Forks, N.D., announces the birth of “our daughter, Kathryn Jean, on July 9, 1984.”
Harry S. Polsky, 601 Country Club Dr., Blue Bell, Pa., received certification in November, 1983, by the American Board of Surgery in general vascular surgery "as part of the first group of surgeons to do so. In March, 1984, we celebrated the Bar Mitzvah of our son, Scott."

Charles E. Quagliari, 2000 Pheasant La., Reno, writes, "My wife and I are looking forward to the 15th reunion. My brother, Frank, a Georgetown graduate, recently joined our group."

Charles R. Schleifer, 67 Overhill Rd., Bala Cynwyd, Pa., now has three sons, Marc, David and Daniel. His wife Martha teaches musicology at Temple University.

Judith Parker Schwartz, 7017 Falling Spring Rd., Ft. Worth, Tx., presented a paper on developmental delay and parental compliance at the recent International Conference on Pediatric Social Work in Miami. She is now in her third year as physician in the high-risk infant follow-up program at the Child Study Center in Fort Worth. She and her family are now "Horned Frogs," as husband, Burton W. Schwartz, M.D. ’67, has joined the staff at Texas Christian University as a physician in the Student Health Center.

Aris M. Sophocles, Jr., 2331 Forest St., Denver, writes: "We recently moved from Breckenridge to Denver so I could teach family medicine and complete my altitude-related illness research. I’m now practicing both in Denver and in Breckenridge, and just completed a text book entitled, The Cost-Effective Management of Infectious Disease. Best regards to the class of 1970."

Neil O. Thompson, Christian Hospital, Manorom Chainat 17110, Thailand, has decided that he cannot handle both surgical procedures and general practice, so the latter is being terminated for a trial period. He was at home for four months last fall to spend time with his parents, both of whom were recovering from surgery. Dr. Thompson is involved in conflict solving at the hospital; he extends an invitation to other Christian doctors and nurses who might be interested in working in Thailand.

Jon P. Walheim, 16 Donaldson St., Doylestown, Pa., has been elected Chairman of the Department of Medicine at Doylestown Hospital and is "enjoying the practice of general internal medicine. Also expecting our third child in July, 1985."

1971

Lawrence J. Guzzardi, 1554 Crestlyn Dr., York, Pa., Chairman of the Department of Emergency Medicine at York Hospital, is currently serving as Chairman of the Accreditation Committee for the National Commission on Correctional Health Care. The Committee reviews health care standards at jails, juvenile homes and prisons. Presently, only 600 of the 4000 jails and one prison system meet the standards of this committee. Dr. Guzzardi became interested in correctional facility health care while serving his emergency medicine residency at the University of Kentucky Medical Center from 1976-1978.

Ronald A. Hoffman, 445 E. 80th St., New York, is Chief of the Division of Otolaryngology at Beth Israel Medical Center.

Jerome W. Jordan, 201 Franklin Ave., Scranton, was installed as President of the Lackawanna County Medical Society in January. A native of Scranton, Dr. Jordan is an ophthalmologist in association with his two brothers, as Jordan Eye Associates in Scranton. Their father, the late James S. Jordan, M.D. ’30, also an ophthalmologist, died in October, 1980. After graduating from Jefferson, Dr. Jordan served an internship and residency in ophthalmology at Geisinger Medical Center, Danville, from 1971 to 1975. He was Board Certified in his specialty in 1976 and is a member of the American Association of Ophthalmologists and Otolaryngologists. Dr. Jordan, his wife Marlene and their children live at 515 Old Colony Road in Clark’s Summit.

Lowell E. Kobrin, 1900 Woodland Dr., Coos Bay, Or., a practicing obstetrician/gynecologist at North Bend Medical Center in Coos Bay, was one of 27 medical doctors selected from around the United States to complete a comprehensive and intensive training program in Medical Acupuncture at the UCLA School of Medicine. This five-month specialty course, through the Department of Continuing Education in the Health Sciences, was designed to make use of the physicians’ background in science and clinical practice to correlate the principles for integrating classical Chinese medicine into the Western scientific framework. In addition to pursuing his private practice, Dr. Kobrin is active as a Clinical Assistant Professor of Obstetrics and Gynecology at the Oregon Health Sciences University School of Medicine in Portland, and recently completed a year as Chairman of the Department of OB/GYN at Bay Area Hospital, Coos Bay. He and his wife, Judith, and daughters Elissa, ten, and Lara, eight, live "on the beautiful south-central Oregon Coast and cordially invite classmates and friends to visit with them if they are ever in this remote part of our country."

Clifford W. Lynd, Jr., 396 Wire Rd., York, Pa., his wife, Sue, and their two children, Milly and Kim, have moved to this new home recently. Dr. Lynd has a practice of general and vascular surgery, and received his vascular boards last November.

John F. Motley, 2081 Trumbauer Rd., Lansdale, Pa., is "doing some outpatient research with the Institute for Biologic Research and Development, Inc., which covers antihypertensives, antibiotics, etc."

Stuart A. Scherr, 130 S. 9th St., Suite 1550, Philadelphia, has offices at Jefferson and at 532 Devereaux Avenue for his practice of otolaryngology. Dr. Scherr and his wife, Lori, "live in Wynnewood and are doing well."

1972

Bruce L. Gewertz, 5812 S. Harper, Chicago, says, "The final Gewertz was hatched (Alexis Jordan). The only work left is 30 more years of practice!"

Mark Josephs, 540 Washington Rd., Brye, N.H., has two children, Abby, six, and Rachel, three. Dr. Josephs is Board Certified in emergency medicine, and Director of the Emergency Department at Exeter Hospital, Exeter, New Hampshire.

Charles J. Locke, 190 S. Main St., Nachinaw, Il., announces the birth of Rhiannon Christina, nine weeks premature, on election day, 1984.

James W. Redka, 820 Louisa St., Williamsport, Pa., writes: "Our four children had a grand time at Christmas. I had an opportunity to serve for a month in a mission hospital in Haiti this year. Work goes on!"

James R. Roberts, 12047 Cooperwood La., Cincinnati, recently published an 1100 page textbook: Clinical Procedures in Emergency Medicine—W.B. Saunders Co. "I passed my board exam and was made a Diplomate of the American Board of Medical Toxicology in October, 1984, after completing a fellowship in clinical toxicology at Bellevue Hospital in New York City."
Edward R. Russell, 5 Orchard Ln., Wallingford, Pa., was reelected Chief of Surgery at Sacred Heart Medical Center in Chester.

Lawrence R. Schiller, 7701 Mullrany Dr., Dallas, Tx., writes: "This spring I shall be moving my research and clinical base to Baylor University Medical Center in Dallas. I hope to continue my studies of gastrointestinal pathophysiology and pharmacology and to expand my clinical responsibilities at this growing medical center."

1973

Benjamin Gerson, 200 Temple St., Newton, Ma., is on the faculty of Harvard Medical School, doing research in toxicology and Alzheimer's disease. "Wife Barbara and children, Adam and Allison, all doing well in Boston," he writes.

Jerry D. Glenn, 1107 Woodridge Dr., Hummelton, Pa., was appointed Professor in the Department of Surgery and Microbiology at the Milton S. Hershey Medical Center of the Pennsylvania State University College of Medicine. Prior to this appointment, Dr. Glenn served a fellowship in the surgery branch at the National Cancer Institute, National Institutes of Health, in Bethesda, Maryland.

Ivan H. Jacobs, 345 Somerset St., N. Plainfield, N. J., has been elected President-elect of the New Jersey Academy of Ophthalmology and Otolaryngology.

Jay S. Rosen, 1032 Bob White Dr., Cherry Hill, N. J., was recently Board certified in emergency medicine and Inducted as a Fellow of the American Academy of Emergency Physicians. His wife, Shea, B. S. N. '82 Tju College of Allied Health Sciences, is starting a new job in the pulmonary research unit at Children's Hospital of Philadelphia.

1974

Ward C. Becker, 404 Fairview Dr., Kutztown, Pa., is Co-Director of Inpatient and Out-patient Geriatric Medical Services at the Lutheran Home at Topton, Pennsylvania. Dr. Becker has two children, Susan and Matthew.

Bruce C. Berger, 1210 Imperial Rd., Rydal, Pa., writes, "Suzana's sister, Julie Brooke, was born on May 20, 1984. I have been elected a Fellow of the American College of Physicians."

Robert Breckenridge, Jr., 441 W. 70th Terr., Kansas City, Mo., is President of MAWD Laboratories, Inc. in Kansas City. His third daughter, Emily Louise, was born on August 26, 1984.

David A. Brent, 2766 Beechwood Blvd., Pittsburgh, and his wife Nancy, have two children, Rebecca, two and a half, and Daniel, nine months. "I'm still at Western Psychiatric Institute and Clinic in Pittsburgh in child psychiatry."


Tom E. Campbell, 7720 W. Parkside Dr., Boardman, Oh., has been appointed Commissioner for the Ohio Lab Inspection and Certification Program for the College of American Pathologists (CAP). The Vice-Chairman of Pathology and Laboratory Medicine at the Youngstown Hospital Association (YHA), Dr. Campbell also serves on the Community Resource Committee for CAP, which is responsible for the proficiency testing of labs across the country. He is certified in anatomical, clinical and chemical pathology and is Medical Director and President of ClinLab of Boardman, a new satellite laboratory and for-profit corporation in which YHA and its pathologists own shares. Larry H. Klein, M.D., '72, is also in the Pathology Department at YHA, according to Gabriel E. DeCicco, M.D., '36, who sent clippings on Dr. Campbell to the Alumni Office.

William J. Gibbons, 428 Dogwood Dr., Southampton, Pa., has been appointed by Holy Redeemer Hospital's Board of Directors as Director of the Department of Medicine. Dr. Gibbons served his internship at Abington Hospital and joined the medical staff at Holy Redeemer in 1977. He is a member of the American College of Physicians and the American Medical Association.

Lee D. Griffith, 3155 Galloway Dr., San Diego, writes, "The world's oldest resident is still at it! I will be completing my residency in cardiothoracic surgery at the University of California in San Diego in June, 1985, and expect to stay on as a staff physician at that time."

Conrad Lindes, 503 Karen Dr., Berea, Oh., moved to the Cleveland area in February of 1984 to become Vice President, Health Delivery Systems of Health America of Ohio, a $100,000+ member of HMO.

William M. Schulman, 5 Prospect St., Lakewood, N. J., was married to Barbara Kooba of Manasquan, on August 2, 1984; Barbara teaches emotionally disturbed children.

Gary L. Shugar, 1508 Bern St., Reading, Pa., Medical Director and Manager of MDS Laboratories, has been elected Fellow of the College of American Pathologists (CAP). Dr. Shugar completed his residency in pathology at the Milton S. Hershey Medical Center of the Pennsylvania State University in 1981, and is certified in clinical pathology.

Walter B. Worhacz, 5601 N. Dixie Hwy., Fort Lauderdale, Fl., has been elected Chief of the Department of Medicine at North Beach Hospital, and also has been appointed Chief of the Department of Gastroenterology at North Ridge Hospital. Dr. Worhacz is presently a consultant in gastroenterology in Fort Lauderdale.

1975


John E. Hocutt, Jr., 1243 Lakewood Dr., Wilmington, De., has "two beautiful daughters, Beth Lynn and Jill. I recently earned a private pilot's license." Dr. Hocutt has been promoted from Instructor to Clinical Assistant Professor in the Department of Family Medicine at Jefferson, affiliate, Wilmington Medical Center.

Joseph J. Korey, Jr., 202 Opal Ave., Reading, Pa., writes, "Everything in Reading is going well. Karen will be nine and Laura will be eight. My wife, Linda, is going back to school for her Master's Degree; and we both are looking forward to the 10th reunion at the Philadelphia College of Art June 8."

Joel M. Rutenberg, 401 Sabine Ave., Wynnewood, Pa., writes, "Becky and I thank Jefferson nurses and physicians for helping our third child, David, through a rough start in July, 1983. I am enjoying my neurology practice in Delaware County, Pennsylvania.

Arthur C. St. Andre, 2540B S. Arlington Mill Dr., Arlington, Va., for the last few years has been Medical Director of Surgical Intensive Care at the Washington Hospital Center in Washington, D.C.
1976

Carol F. Boerner, 1101 Beacon St., Brookline, Ma., is in solo cataract surgery practice there and is involved in YAG laser research at MIT. She gave a presentation on her work in this area during the meetings in Atlanta last fall of the American Academy of Ophthalmology. Dr. Boerner also taught cataract surgery at meetings in Paris last spring with French colleagues. She has been named the sole investigator for the foldable, silicone lens implant (STARR) for New England.

Barry S. Brenner, 609 Laramie Pl., Philadelphia, was appointed Chairman of the Department of Family Practice at Rolling Hill Hospital in Elkins Park.

Neal Flomenberg, 108 Sagamore Rd., Tuckahoe, N.Y., is one of five researchers recently appointed Assistant Members of the Sloan-Kettering Institute. Dr. Flomenberg, a Norman and Rosita Winston Fellow in Biomedical Research, has been appointed Head of the Effector Lymphocyte Biology Laboratory. He also serves as Associate Director of the Lymphocyte Function Laboratory and Assistant Attending Physician on the Marrow Transplantation and Hematology/Lymphoma Services at Memorial Hospital. Dr. Flomenberg's research concerns the mechanisms by which the immune cells called T-lymphocytes contribute to graft rejection and graft-versus-host disease, the main obstacles to bone marrow transplantation.

Edward H. Garber, Jr., 205 Reynolds Mills Rd., York, Pa., was one of five York Hospital surgeons recently inducted as Fellows in the American College of Surgeons. Dr. Garber is a general surgeon, who served his residency at Polyclinic Medical Center in Harrisburg.

James H. Garvin, Jr., 8 Delaney Place, Tenafly, N.J., passed his pediatric hematol-logy-oncology sub-specialty boards. Dr. Garvin is Assistant Professor of Pediatrics at Columbia University.

Paul B. Gilman, 1600 Powder Mill Ln., Wynnewood, Pa., is opening an office for the practice of internal medicine and hematology in the Fairmount section of Philadelphia. He has joined the staff of Lankenau Hospital in internal medicine and hematology.

Scott M. Goldman, 1420 Locust St., Philadelphia, joined the Department of Surgery at Jefferson in July, 1984, as Instructor of Surgery, 'and I'm practicing cardiac and thoracic surgery at Jefferson as a member of the Division of Cardiothoracic Surgery.'

Philip C. and Judith F. Greem, Potato Valley Rd., Linglestown, Pa., report that Philip, Board Certified in Internal Medicine, is Director of the Medical Center at Harrisburg Hospital.

Thomas S. Kilcheski, 9841 Rimpark Way, San Diego, is an employee of the X-Ray Medical Group of La Mesa. Although he will be discharged from active duty in the Navy, he will remain a member of the consulting staff of the Naval Hospital of San Diego.

Frederic B. Kremer, 516 Conshohocken State Rd., Bala Cynwyd, Pa., Director of the Refractive Surgery Center at the Pepper Pavilion, gives ongoing courses on radial keratotomy (see p. 11).

John O. Punderson, Jr., 724 Cheyenne La., Mendota Heights, Mn., writes, "My wife, Kathie, gave birth to our second child, John III, in September, 1984. Our first child, Lisa, is now three years old. I'm still practicing family medicine in West St. Paul."

Nancy M. Satur, 661 San Mario Dr., Solana Beach, Ca., writes: "We have moved to California, where I am enjoying a hiatus as a full-time mother to David, age two, and Glenn, age ten months. I intend to return to dermatology part-time in the near future."

1977

Cynthia B. Altman, 3901 Conshohocken Rd., Philadelphia, has been awarded the following: Fellow in the American College of Clinical Pharmacology; member of the Editorial Board of Medical Communications; Chairman of the Standing Committee on Medical Education, Philadelphia County Medical Society, member, Philadelphia County Medical Society Board of Directors; Delegate from Philadelphia to the Pennsylvania Medical Society for 1983-86; and member of the Nominating Committee of the Philadelphia County Medical Society. Dr. Altman is currently Director, Worldwide Clinical Research Management, Research and Development Division, Smith Kline & French Laboratories. She has recently published a chapter in the text Experimental and Clinical Toxicokinetics, published in Washington, D.C. by the American Pharmaceutical Association.

John D. Bartges, 430 Parkwynn Dr., Lancaster, Pa., and his wife Hannah, announce the birth of their son, David Andrew, on January 22, 1985. The little boy has three older sisters, Kristin, Lauren and Megan. Dr. Bartges is a urologist.

Warren B. Matthews, 2826 Mt. Carmel Ave., North Hills, Pa., has been appointed Instructor in the Department of Family Medicine at Jefferson, Chestnut Hill Hospital affiliate.

1978

Robert B. Berger, 32 Gordon Way, Princeton, N.J., has been practicing diagnostic radiology at Princeton since July, 1983, with a special interest in nuclear medicine, ultrasound and C.T. Following his fellowship and residency, Dr. Berger was Assistant Clinical Professor of Diagnostic Imaging at Yale. His daughter, Melissa, is three.

Robert P. Boran, Jr., 313 Washington St., Pottsville, Pa., is now in private practice in orthopaedic surgery in Pottsville, "Kitsy and I are very happy living in the coal fields and have just returned from the 39th meeting of the Swiss Association for the study of internal fixation in Davos, Switzerland."

Loretta Bonannii and Thomas S. Metkus, 455 Cheshire Dr., Downingtown, Pa., "are residing in beautiful Chester County. We just had our third child, Stephanie, to join our two sons, Tommy, Jr., and Christopher. Tom is practicing cardiology and I am enjoying pediatrics, both at home and at the office," writes Loretta.

John F. Camp, 29 Shallowbrootk, O'Fallon, Ill., has been decorated with the Air Force Achievement Medal at Scott Air Force Base, Illinois. Dr. Camp, a major, is Chairman of the Department of Anesthesiology and Surgical Director of Critical Care Medicine at the Air Force Medical Center.

Harry L. Chaikin, 353 12th St., Brigantine, N.J., announces that he and his wife, Sara, have a second child, a daughter. Hannah Loren, born on January 4, 1985—"Darn, just missed the 1984 tax deduction! If any fellow classmates are in the Atlantic City area, gambling or otherwise, winners or losers, we'd enjoy hearing from you."

Roger F. Crake, 699 E. 16th St., Berwick, Pa., became a Diplomat, American Board of Surgery, on October 17, 1984. Dr. Crake is in private surgical practice in Berwick, his second son, Stephen, was born January 20, 1984.
Raymond A. Haibach, 4826 Sunnydale Blvd., Erie, Pa., has married Deborah A. Banish, M.D. '81. "We are in separate practices of family medicine in Erie. We are both very happy."

Kenneth Kovalsky, 9 Bristol Ct., Wyomissing Hills, Pa., is in "solo practice in family medicine in this suburb of Reading. I am very busy and having fun."

Rudolph M. Krafft, 8528 Deer Creek Ln., Warren, Oh., is currently employed as Family Practice Physician with Health Maintenance Plan, an HMO in Warren. "Sari (Jefferson Nursing, Class of 1977) is busy with Leslie, two and a half, and Daniel, one month."

Raymond B. Leidich, 2101 Shoreline Dr., Alameda, Ca., is a Diplomate of the American Board of Urology. He is Assistant Chairman of the Urology Department and Urology Residency Program at the Naval Regional Medical Center in Oakand. Dr. Leidich also holds an appointment to the clinical faculty of the Uniformed Services University of the Health Sciences in Bethesda, Maryland, and is an ATLS Instructor at the Academy of Health Sciences, Fort Sam Houston, Texas.

Carol A. Love, 419 Sprague Rd., Narberth, Pa., traveled to the Soviet Union visiting "Hospital #52 in Moscow, Sochi on the Black Sea and beautiful Leningrad."

Alexander C. Mamourian, P.O. Box 850, Hershey, Pa., was appointed Assistant Professor in the Department of Radiology at the Milton S. Hershey Medical Center of the Pennsylvania State University College of Medicine. Prior to this appointment, Dr. Mamourian served a fellowship in Nuclear Magnetic Resonance at the Hospital of the University of Pennsylvania.

Francis A. Marro, 15 N. Turnberry Dr., Dover, Del., announces the first child for he and his wife, Marian. Marissa Nicole was born in July, 1984.

Kenneth C. Rosenberg, 422 Sabine Ave, Wynnewood, Pa., is an Instructor of Medicine and Cardiology at Jefferson. He is married to Franny Lindquist (BSN '78) and they have a two-year-old son, Jeffrey. His office is at 6015 New Hospital.

Harry M. Rosenblum, 770 Anderson Ave., Cliffside Park, N.J., is Board Certified in general surgery and "have one year to go in my cardiothoracic surgery training at Columbia Presbyterian Medical Center in New York."

Alan J. Sears, 3901 Conshohocken Ave, Philadelphia, has been named Chief of Laser Therapy for the Institute of Gastroenterology at Presbyterian-University of Pennsylvania Medical Center. Dr. Sears did his residency training at Mercy Hospital in Pittsburgh, then took advance specialty training in Philadelphia at the Institute of Gastroenterology. About two years ago, he began using lasers to treat gastrointestinal problems that were difficult to treat by other methods.

Jill M. Sumfest, 3951 Eve Ct., Columbus, Ga., writes, "My husband (Jacob Amrani, M.D.) and I recently added a new member to the family on August 29, 1984: Rebecca Miriam. In January 1985, I passed the oral portion of the American Board of Surgery certifying exam."

Fred Teichman, 148 Mountain View Rd., Lewisburg, Pa., writes: "My practice is very challenging and, in December, I became a certified Diplomate of the American Board of Obstetrics and Gynecology."

Douglas B. Yingling, 1212 Turnpike Ave., Clearfield, Pa., is in private practice with his father, Nathaniel D. Yingling, M.D. '47. Dr. Yingling, the younger, received his boards in general surgery in the fall of 1984.

1979

Theodore J. Burduny, 1012 Fair Oaks Ave., S. Pasadena, Ca., has been certified a Diplomate of the American Board of Anesthesiology and promoted to the Associate Staff at Huntington Memorial Hospital in Pasadena. He resides in San Marino.

Larry J. Kachnik, RD #6 Box 351, Indiana, Pa., has been appointed Medical Director of Indiana Hospital. "Racing stable expanded to six," he writes.

1980

Seth S. Adelman, 451 7th St., Brooklyn, N.Y., has begun a two year fellowship at the Institute of Basic Research on Staten Island following completion of his neurology residency at Kings County Hospital where he was Chief Resident his last year.

Mark D. Chilton, 2991 School House Ln., Philadelphia, Chief Resident of Orthopaedics at Jefferson, is expecting his first child in April.

Thomas D. Griffin, 217 E. Highland Ave., Philadelphia, and his wife, Pat, announce the birth of their third child, Maureen Corcoran Griffin, on November 30, 1984. The baby weighed 11 pounds!! Dr. Griffin begins a dermatology residency this July and will ultimately practice dermatology and dermatopathology.

Robert J. Maro, Jr., 15 Heron Ct., Voorhees, N.J. announces the arrival of Robert J. Maro III, born April 24, 1984.

John E. McManigle, Hospital Box 3344, APO NY, writes that he might be able to attend the 5th reunion in June, but that his partner/internist at Lakenheath Air Force Base (20 miles north of Cambridge, England) might have to go on rotation and he'd be alone until a replacement arrives. After graduation, Dr. McManigle served an internal medicine residency at Keesler Air Force Base in Mississippi, staying on a year as Chief Resident. He and his wife Eleanor have traveled wherever their schedules permit (she is a 1980 Jefferson Baccalaureate Nursing graduate) and they invite Jeffersonians coming to England to stay with them or at least meet somewhere for tea or a play in London—the British are rubbing off on me!

Arthur W. Mellen IV, 177 Pearlcraft Rd., Cherry Hill, N.J., writes, "Drew Mellen and his wife, Jennifer, are new parents of Peter Andrew Mellen, born December 9, 1984... and they all reside in Cherry Hill."

Frederick E. Millard, 4619 50th St., San Diego, writes, "Marie and I are fine. I recently became Board Certified in internal medicine. I'm currently in the first year of a hematology/oncology fellowship at the Naval Hospital here in San Diego."

David F. Podrasky, 1477 Revere Rd., Yardley, Pa., is in a two-man obstetrics and gynecology practice in Langhorne. Dr. Podrasky also serves on the Board of Directors of Planned Parenthood of Bucks County. His daughter, Alison, was born on December 3, 1983.

James P. Rupp, 52 North Shore Dr., Seaford, De., is practicing obstetrics and gynecology in Seaford. "My wife, Theresa, and I are expecting our second child in July."

Patrick Sokas, 1553 Alice St., Oakland, Ca., went back to school last year and was awarded a degree in journalism at Columbia. He is currently the medical reporter for the Oakland Tribune. He hopes to make it to the fifth reunion this June. He writes that in looking
through a January issue of Science magazine, he came across an abstract about the replicative segment in the proviral genome of bovine leukemia virus. "I was surprised to note that the principal author of the paper was Joseph G. Sodroski, M.D. '80. Joe is now a researcher in William Haseltine's lab at Harvard's Dana-Farber Cancer Institute. It is delightful to find your one-time lab partner has become a hot-shot researcher, especially when he's also a nice guy." Dr. Sokas is planning to return to the east coast this summer to complete his psychiatric residency. "After a year out of the business, I actually began to miss it."

Randy Westgate, 1026 Woods Ave., Lancaster, Pa., will join Mountville Family Practice Associates in July. He is living in Lancaster with his wife, Meredith, and two sons.

1981

Scott A. Brendan, 1213 Addison Walkway, Philadelphia, and his wife, Susan, proudly announce the birth of their daughter, Dana Lee, on October 11, 1984.

Daniel L. Diehl, 225 Millwood Rd., Lancaster, Pa., entered the practice of family medicine on Willow Street, after spending a month touring Alaska. Dr. Diehl completed three years of residency at Lancaster General Hospital, and served as Medical Director at Willow Valley Manor, a Life Care Retirement Community.

Brad Feldstein, 3101 Grey Friars Terr., Chalfont, Pa., will marry Deborah Sapin in June. Dr. Feldstein completed his residency in pediatrics at the Children's Hospital and is presently in private practice in Bucks County. His wife-to-be has her Master's Degree from Columbia University Graduate School and is employed as a psychiatric social worker in the New Brunswick, New Jersey, area.

Steven P. Frei, 855 Lehigh St., Allentown, Pa., is working full time in the emergency room at Sacred Heart Hospital in Allentown, after completing his family practice residency and achieving board certification. "I am considering pursuing board certification in emergency medicine."

David G. Hershberger, 124 Seminole St., Johnstown, Pa., was recently board certified in family practice, and is currently working toward certification in emergency medicine. "I'm now spending more time with the family, since we're back home in Johnstown."


Eric W. Longenbach, 635 E. Fifth St., Bloomsburg, Pa., writes, "My wife gave birth to our first child, a son weighing nine pounds, 13 ounces. I am in family practice in Millville with Raymond F. Nungesser, M.D. '80."

Eli R. Saleeb, 8120 E. Jefferson Ave., Detroit, has a new son, Eli Reed, born May 17, 1984. Dr. Saleeb is finishing a residency in dermatology at Henry Ford Hospital.

1982

Bruce S. Cohick, 2512 N. Fourth St., Harrisburg, Pa., announces the birth of "our daughter Eileen on 5-1-84."

Michael A. Franchetti, 8321 Wessex Dr., Pennsauken, N.J., and Mrs. Franchetti are expecting their first child in March, 1985.

W. Bryan Gamble, 12-B Lincoln St., South Natick, Ma., will marry Therese C. Currie of Trumbull, Connecticut, in June. Dr. Gamble is presently a surgical resident in Boston.

John C. Gardner, 306 Avenue C, Riverside, Pa., proudly announces the birth of his second daughter, Erin Marie, on February 20, 1985. Actually, his two classmates, Robert W. Armstrong, Jr., and Anthony Billas, Jr., sent the news. "Butch" is presently a third year resident in Family Practice at Geisinger Medical Center in Danville, Pennsylvania, and is looking forward to joining a practice in Tunkhannock, according to the informants.

Ilene B. Lefkowitz, 309 Florence Ave., Jenkintown, Pa., will be finishing his general pediatrics residency at Jefferson in June and will then enter a fellowship in hematology/oncology at the Children's Hospital of Pennsylvania.

Alex V. Levin, 1025 Clinton St., Philadelphia, is finishing his pediatric residency at Children's Hospital of Philadelphia, and will start an ophthalmology residency in 1986 at Wills Eye Hospital.

Brian M. Uniacke, 1300 Virginia Ave., McKeesport, Pa., has started his NHSC time in a small town south of Huntington, West Virginia, as a family practitioner. "Come visit if you can find it!"

1983

Lt. Thomas Carnevale, MC USNR, 3rd CEB BAS, 3rd MAR DIV, FPO San Francisco, writes that classmates "Kevin M. O'Neil, Timothy P. Walsh, and I are all keeping in good shape with the 3rd Marine Division on Okinawa, Japan."

Ellen K. Feldman, #2 Snow's Court NW, Washington, D.C., and Ronald J. Brockman, M.D. '82, announce the arrival of Stephanie Nicole Brockman, born on December 11, 1984, weighing eight pounds 14 ounces.

Michael L. Fettorf, 10 Taylor St., Franklin, Pa., is Chief Resident of the newly opened Slippery Rock Area Family Practice Center. The program at the center offers X-ray services, free monthly blood pressure screenings and a regular schedule of specialty clinics conducted by physicians and surgeons from Franklin Regional Medical Center.

John J. Ruffini, 3931 Newdale Rd., Chevy Chase, Md., is a first year ophthalmology resident at Georgetown University Hospital.

1984

Terry L. Edwards, 2208 Washington Ave., Silver Spring, Md., will be staying at Walter Reed to complete her residency training in anesthesiology.

Henry H. Lindner, Wright Patterson AFB, Dayton, Oh., is presently a Captain in the Air Force and will serve a four-year obligation to the Air Force after he has finished his specialty training.

Robert W. Meikle, Department of Family Medicine, Dwight D. Eisenhower Army Medical Center, Ft. Gordon, Ga., says he is "still partyin."
The Alumni Association of Jefferson Medical College now makes available to our membership a clock of solid butcher block construction. The deep gold coloring of its roman numerals and central silk screened seal of the Medical College stands out against a dark grained walnut finish. The 11" × 11" × 1½" clock weighs three pounds and runs on a size C battery.

A perfect gift for the alumnus' office or den. Delivery is approximately three weeks, and it will be mailed directly to the purchaser's or recipient's home. Checks for $50.00 should be made payable to the Alumni Association of Jefferson Medical College and returned to 1020 Locust Street, Philadelphia, 19107. Delivery charge is included.

NAME OF PURCHASER ______________________________________ CLASS ____________________________
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NAME OF RECIPIENT ______________________________________ CLASS ____________________________
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Haitian Experience

by Judy Passmore McNeal

Vincent and Amy Pisula entertain two Dutch nurses who assisted him during his three trips to Haiti. José Naderman (left) and Marita de Bruijn (second left) plan to return to Hôpital Albert Schweitzer, under medical sponsorship, for a longer period of time.

They lie and sit in the cobblestone courtyard, waiting. Hundreds of them at a time, waiting. They wait to be examined or treated, and they wait for family members to be examined or treated. There's no point in going home, so they bring what food they have, and a pot to cook it in, and they wait. Always patient, never complaining about how long they've been there, they wait their turn to see the doctors in Hôpital Albert Schweitzer whom they trust will know the answers to their maladies.

Almost every malady appears in the inhabitants of Haiti. The diseases are usually serious, usually in advanced stages...diseases most American doctors have never seen except in textbooks. Malaria, tuberculosis, typhoid fever, (surgeons treat at least one typhoid perforation of the ilium per week), meningitis, osteomyelitis are commonplace—always superimposed on severe malnutrition. Sixty-five percent of the children under five years of age weigh less than 50% of their expected weight. All have parasitic infestations.

Vincent P. Pisula, M.D. '53, went to Haiti three times last year to work in Hôpital Albert Schweitzer (HAS) located near Deschappelles in the central jungles of this poverty-stricken island bordering the Dominican Republic on the west, halfway between Cuba and Puerto Rico. American doctors rarely go there, and when they do they are in great demand. Eager to learn, earnest and helpful, the Haitian doctors are nevertheless behind their American and European counterparts in the academic knowledge needed to match their considerable surgical skills. Dr. Pisula would like to teach them: he would like to spend more than three weeks at a time there, and build a rapport with patients and physicians alike. This is not possible, because of commitments he makes to other hospitals in other places, but he does what he can on these tours.

Dr. Pisula terminated his practice of general and thoracic surgery in Hanover, Pennsylvania, in July, 1983, so he could pick up his bag and go where he was needed. "I have been interested in world medicine for many years," he said then. "Time has a way of marching on and I have decided that it is time to make my move."

"While I will miss my patients very much, I am concerned that a great deal of idealism found in medicine in such abundance in the past is largely gone. In addition, run-away costs and defensive medicine are creating enormous problems for all of us as we approach the mid-80s."

He rejoices in "being a doctor again" in the Third World Countries. There, he said, the need is great and the total effort of the doctor goes to relieving the suffering of the sick. Sometimes he hears of a place that needs surgeons through other physicians, sometimes he reads about them in medical journals. He has been to Samoa and India, and has commitments in the Middle East in 1985. Haiti draws him as no other place, however, because of the couple who gave birth to and have breathed life into HAS, Dr. and Mrs. William Larrimer Mellon. "Nobody with any sense of humanity can go and spend time with those people and not be affected for life," says Dr. Pisula, who regards Larry and Gwen Mellon with great affection and respect.

"A lot of wealthy people donate funds to help the starving and sick, but
the Mellons live where they’ve put their money. They stay there and watch it help people with whom they are deeply, deeply involved. Everyone in Haiti knows this man,” says Dr. Pisula. “Dr. Mellon dug latrines with his own hands...up until ten years ago, he rode everywhere on a horse or mule. The Haitian government leaves him completely alone, as does the American government. The Samoan hospital where I worked was completely subsidized by our government; that’s not the way Dr. Mellon wants it.”

The reason Dr. Pisula doesn’t stay for longer periods in Haiti, or live there as Chief of Surgery and Medical Director, became obvious during the interview at the 140-acre farm he has lived on and worked at for 25 years. Coincidentally, it was the same day that two nurses, with whom he had worked all three times he was in Haiti, arrived to visit him and his wife, Amy. Their one-year stay at HAS completed, the nurses were touring part of the United States before returning home to Holland. Dr. Pisula had extended an unconditional invitation, and they had accepted. Their presence was helpful because they could confirm as fact what he had experienced in his intermittent weeks there.

The basic fact is that there are many poor, starving, sick people who need medical care and food, and HAS has provided an oasis for them. A 150-bed hospital, HAS tries to keep 12 physicians (three surgeons, three internists, an anesthesiologist and pediatricians) on the staff of 40. During an American doctor’s infrequent stay, the Dutch nurses agree that he is put literally on 24-hour call. “With us,” said petite, blond Marita de Bruyn, “we work our nine-hour shift and then we are through. The doctors could stop operating at 5:00 a.m. and begin another day two hours later.”

“It’s so relentless,” Dr. Pisula concurs. “All those masses of dying people, starving children, boiling hot sun, clothes dripping wet all the time...the flies, absolutely nothing to do outside the hospital, nowhere to go. In Samoa or India, I could get away, take a book and go to the beach. Maybe if Amy were with me it would be different but again, there’s nothing for her to do. She’s not a nurse, the nearest town is five hours away, and there’s no real way she can make a contribution.” He...
reiterates his unwavering admiration for the people who can and do stay on.

Dr. Pisula is proud of the skills he learned at Jefferson and has honed over the years, and happy that he can put these skills to good use outside the confines of a regular practice. He says he has seen almost everything in the way of ills on his visits to Haiti.

Malnutrition is the primary source of complaint, of which children are the primary victims. But they are afflicted with other ailments, too. One young boy came to the hospital with an appendix that had ruptured about eight days before, his stomach distended with infection. According to Dr. Pisula, in 95 percent of the cases the appendix has ruptured because most children have stomach aches, all children cry, and therefore they are not brought to the hospital until they are practically moribund. Somehow the boy survived the peritonitis which was superimposed on the malaria, typhoid and the malnutrition.

In one 24-hour operating rotation, Dr. Pisula came across two cases of imperforate anus in newborns. Infants were also victims of tetanus of the newborn (lockjaw of the naval) — before HAS, because custom called for the smearing of animal dung on the torn umbilical cord to ward off evil spirits. A "maternity kit," presently available for pregnant women at one of the dispensaries established through the Public Health Program, includes a string, razor blade and a piece of clean white gauze — along with these is the admonition to use nothing else. Incidence of dysentery, contracted from polluted water, has been virtually reduced by the construction of wells dug by Dr. Mellon and his group. The Mennonite Church, closely aligned with HAS, has done much of the physical work.

Most Haitians don't live long enough to have advanced cases of cancer, but there was one instance where a secondary sight had been labeled primary by a Haitian doctor; after a biopsy in Port-au-Prince, the tumor was diagnosed as colloid adenocarcinoma. Dr. Pisula wrote in his diary: "I asked the doctor where the primary was, and he seemed quite puzzled. I think he took my suggestion quite lightly that adenocarcinoma of the skin is terribly rare and only occurs in connection with sweat and oil glands of the skin. I informed him that he would probably find the primary tumor in the C.I. tract. Operative findings on excision of skin metastasis revealed a huge (six inches in diameter) tumor of the upper one-third of the stomach with direct and solid extension into the left lobe of the liver, pancreas and all primary and secondary lymphatics. I had a VERY hard time dissuading the doctor from taking out the liver, stomach, pancreas and Lord knows what else! We finally settled on a small (bypass) gastro-enterostomy."

In another entry of his first trip to HAS, Dr. Pisula writes: "Back to the wards to see more patients (trapped lung). Three to five hundred patients lying on the floors, benches, steps, courtyards, waiting to be seen — an absolutely and utterly indescribable sight. I feel quite certain that no one could fail to be moved by these scenes. Many infants appear less than two pounds. Almost all the children are naked, mostly breastfeeding. All quiet and orderly. All very patient. I ask myself what they are waiting for: they cannot possibly be seen within the next two months, by stateside methods."

Besides the starving babies, flies, and general depression of the people there, Dr. Pisula is concerned that although the state religion is Roman Catholic, most natives practice voodoo. Children and adults come to the hospital for treatment and, although they won't admit it, have sought help from a voodoo "doctor" first. One two-year-old child had a cross burned deeply into his forehead; some children's wrists have been burned in symmetrical strips; women with gynecological problems are stuffed and coated with foul-smelling leaves and herbs and dung. Human sacrifice may still exist. Voodoo isn't something that can be completely stopped — it's been in the culture there too long — but since HAS was built, more people are relying on the Mellons.

Dr. Mellon is a direct descendent of Andrew Mellon and the multi-million dollar dynasty of Pittsburgh. In 1947, at the age of 37, he read an article in LIFE magazine about Albert Schweitzer and his work with the natives in Lamborene, Africa. He went to Africa, met the man, and was so impressed that he became a doctor himself. On June 26, 1956, his 46th birthday, the Mellons opened Hôpital Albert Schweitzer, and they have been there ever since. They feed, treat and generally support the islanders who have come to love and trust them in return.

According to Dr. Pisula, Marita de Bruyn and her colleague, José Nademan, are as good as any nurses he has ever worked with, and better than most. They went to Haiti unsponsored, and admit they won't do it again because it's such a drain on their personal resources. They wanted to be involved in tropical medicine and didn't want to wait the two years it would have taken to find a sponsor. They agreed that next time they will go sponsored and for two years instead of one. "There's so much to be done," says Marita. José adds that most of the Haitians who become nurses want to come to the United States to work, not stay there. Consequently, the need for volunteer staff people is critical.

The physician and nurses agreed there were weaknesses at HAS: not enough trained personnel to treat the caseload, and Haitian nurses who seem, if not apathetic, then at least so unemotional that they appear to be. They see death constantly, and have accepted it as part of life. Another concern is the lack of privacy both in the wards and the examining rooms.

There is no sense of emergency there...time means nothing. "Here," Dr. Pisula said, "a certain kind of illness or accident requires immediate surgery." There is no "immediately" at Hôpital Albert Schweitzer in Deschappelles, Haiti. What there is at HAS is a firm commitment by two people to give their strength, resources and lives to the cause of providing medical care and support to an incredibly poor population of black people. Dr. Pisula, Marita, José and others like them, have helped them carry out their program and fulfill their dream.

"No one should go to Haiti," says Dr. Pisula, "without expecting hardship, depression and disappointment. But the gratitude of these wretchedly poor people for the least bit of help that I can offer them, more than compensates. I return home a bit tired, but personally and professionally rejuvenated."
Obituaries

Reynold S. Griffith, 1918
Died February 10, 1985 at the age of 90. Dr. Griffith, who joined the Jefferson faculty in 1921, retired as Clinical Assistant Professor in the Department of Medicine. He contributed extensively to The Encyclopedia of Medicine. Dr. Griffith served his alma mater as class agent for Alumni Annual Giving. He is survived by his second wife, Johanna, and a daughter.

R. Guy Bashore, 1919
Died November 24, 1984 at the age of 92. Dr. Bashore was a general practitioner who was residing in West Chester, Pennsylvania, at the time of his death.

Joseph H. Carroll, 1922
Died September 21, 1984 at the age of 85. Dr. Carroll, who had been residing in Delray Beach, Florida, following his 1975 retirement, was Chief of Obstetrics, and Gynecology at St. Francis Medical Center in Pittsburgh. He also served as a staff member at Mercy Hospital and Chief Consultant at the Rosalia Foundling and Maternity Hospital. A Fellow of the American College of Surgeons and the American College of Obstetricians and Gynecologists. Dr. Carroll was agent for his class of 1922 for Annual Giving. A physician son and daughter survive him.

Blackwell Sawyer, 1924
Died June 24, 1984 at the age of 85. Dr. Sawyer was a general practitioner in Ocean County, New Jersey, with a special interest in obstetrics. He was a pioneer in promoting natural childbirth and was named "Outstanding Country Doctor of the United States" in 1958. Dr. Sawyer won national attention with use of a new procedure for reducing pain in childbirth by removal of the mother's fear of labor. He was a founder of Community Memorial Hospital in Toms River where he served as President of the Medical Staff and a member of the Board of Trustees.

Dr. Sawyer also served as President of the Ocean County Medical Society. Surviving are his wife, Zaida, a son Blackwell Sawyer '56 and a daughter.

Edward B. LeWinn, 1929
Died January 16, 1985 at the age of 80. Dr. LeWinn, a resident of Upper Black Eddy, Pennsylvania, was a specialist in internal medicine and Director of the Institutes for the Achievement of Human Potential. Certified by the American Board of Internal Medicine, he was a Fellow of the American College of Physicians and President of the World Organization for Human Potential. Dr. LeWinn was the author of a number of books and a frequent contributor to professional journals. Surviving are his wife, Pearl, and two daughters.

Thomas F. McHugh, 1930
Died October 8, 1984. Dr. McHugh was a general practitioner in Scranton, Pennsylvania. His wife, Mary, survives him.

Murray Elkins, 1933
Died October 29, 1984 at the age of 76. Dr. Elkins, a general practitioner in Howard Beach, New York, retired to Ft. Lauderdale in 1974. While there he continued his practice and served as Medical Director of the Hospice of Broward County. He is survived by his wife, Lee, a son Robert W. Elkins '65 and a daughter.

Charles H. Bloom, 1934
Died November 17, 1984. Dr. Bloom was a general practitioner in Altoona, Pennsylvania.

John A. Luders, 1935
Died January 17, 1985 at the age of 75. Dr. Luders was a former Chief of Obstetrics and Gynecology at Germantown and Jeanes Hospitals in Philadelphia. He was a Fellow of the American College of Obstetricians and Gynecologists. Surviving are his wife, Gertrude, a son and a daughter.

John P. Kennedy, 1915
Died December 27, 1984 at the age of 93. Dr. Kennedy was founder and senior partner of the Carolina Surgical Clinic in Charlotte, North Carolina, and served as Chief of Staff of the Presbyterian Hospital. He was a past President of the Mecklenburg County Medical Society and the North Carolina Surgical Club. For many years he served as Chairman of the Board of Erskine College. Surviving are his wife, a son and a daughter.

William H. Hauck, 1917
Died December 27, 1984. Dr. Hauck was a general practitioner in Irvington, New Jersey.

Albert R. Bellerue, 1918
Died September 23, 1983. Dr. Bellerue, a general practitioner, was residing in Torrance, California, at the time of his death.
Asher Randell, 1935
Died February 2, 1985 at the age of 74. Dr. Randell was a general practitioner in Youngstown, Ohio. He served as President of the Mahoning County Medical Society in 1963 and was a charter member of the American Academy of Family Physicians. He is survived by a daughter and a son David J. Randell '70.

Seth D. Revere, 1935
Died October 6, 1984. Dr. Revere was an internist with the Chickasha Clinic in Chickasha, Oklahoma, until his retirement in 1974. He served as Chairman of the Board and Chief of the Medical Staff there and was Chief of the Department at Grady Memorial Hospital. His wife, Jane, survives him.

Saul Supowitz, 1936
Died August 7, 1984 at the age of 73. A general practitioner Dr. Supowitz resided in Galveston, Texas.

William P. Robinson, 1937
Died January 4, 1985 at the age of 72. Dr. Robinson, an ophthalmologist, was a founding member of Nazareth Hospital in Philadelphia, and served there twice as Chief of Medical Staff. He also was head of the Department of Ophthalmology and served on the staffs of Wills Eye and Holy Redeemer Hospitals. Dr. Robinson was a Fellow of the American College of Surgeons and was a Diplomate of the American Board of Ophthalmology. Surviving are his wife, Catherine, seven sons, two of whom are physicians, and two daughters.

Frederick W. Pobirs, 1938
Died May 21, 1984. Dr. Pobirs was an internist associated with Midway Hospital in Los Angeles. He is survived by his wife Grace, and daughter.

Daniel J. Rednor, 1938
Died August 13, 1984. Dr. Rednor was Chief of Staff at Veterans Administration Hospital, Manhattan, New York, and a founder of the Albert Einstein Medical College in the city. His wife, Lucille, and their children, survive him.

Lucian L. Rinaldi, 1938
Died October 26, 1984 at the age of 71. Dr. Rinaldi was an ophthalmologist in Scranton, Pennsylvania.

Joseph F. Zielinski, 1938
Died June 30, 1984 at the age of 72. Dr. Zielinski was a certified radiologist in Hyannis, Massachusetts.

Simon C. Weiner, 1939
Died December 19, 1984 at the age of 70. Dr. Weiner was a general practitioner in the Washington, D.C. area before retiring to Florida in 1976. He had served as a Medical Commander in World War II, earning a Victory Medal for his participation in the New Guinea and Luzon Campaigns. He had been on the faculty at George Washington Medical School. His wife, Sylvia, and two daughters survive him.

John H. Rentschler, 1942
Died April 13, 1984 at the age of 67. Dr. Rentschler was a surgeon in Ashatabula, Ohio. In the two years he spent in the Army during the Second World War, he received two Campaign stars, a unit citation, Croix de Guerre and Victory Medal.

Leonard C. Feldstein, 1947
Died December 27, 1984 at the age of 62. Dr. Feldstein was a psychoanalyst who resided in Redding, Connecticut. Following his Jefferson graduation he attended Columbia University where he received a doctor of philosophy degree in 1957. A Professor at Fordham University he also taught at Columbia, Albert Einstein College of Medicine and the Mannes College of Music. Surviving are his wife, Rebecca, and two children.

Charles H. Loomis, 1948
Died December 24, 1984 at the age of 62. Dr. Loomis practiced family medicine in the Harrisburg area. He was senior partner in the Locust Lane Medical Center. Surviving him are his wife, Mary, and two sons.

Raymond M. Wargovich, 1954
Died December 16, 1984 at the age of 61. Dr. Wargovich retired in 1983 after 28 years in family practice in McKeesport. He was Honorary Staff Member of the Department of Family Medicine at McKeesport Hospital. He was a former plant physician for U.S. Steel Corporation and past Medical Director of United Societies U.S.A., along with active membership in many church and civic associations. He is survived by his wife, Virginia, a daughter, and four sons, three of whom are Jefferson graduates: Raymond, '80, Thomas, '82, and James, 84.

William J. Flaharty, 1956
Died December 30, 1984. Dr. Flaharty was an allergist with a practice in Southfield, Michigan. He is survived by his wife, Joan, and son.

Aaron Finkelman, D.D.S., Faculty
Died February 21, 1985. Dr. Finkelman was Honorary Clinical Professor of Otolaryngology (oral surgeon), having been a part of Jefferson for over 40 years. In 1964, he became Associate in Clinical Surgery, serving as Head of the Division of Oral Surgery in the Department of Surgery. He established a residency program in oral surgery and contributed significantly to the literature in the treatment of hemophilias during oral surgery procedures. He is survived by his wife, Ethel.

Norman T. Felberg, Ph.D., Faculty
Died January 19, 1985, at the age of 41. Dr. Felberg was Research Associate Professor of Ophthalmology and Biochemistry, and Chief of the Department of Molecular Biology at Wills Eye Hospital. He received his doctorate at Hahnemann, after completing his work at the Papanicolaou Cancer Research Institute in Miami. He is survived by his wife, Joyce, and four children.
Francis J. Braceland, class of 1930, the 1967 recipient of Jefferson's Achievement Award and first alumnus to serve on the Board of Trustees, died on February 23, 1985 while vacationing in Florida. Former Psychiatrist-in-Chief at the Institute of Living in Hartford, Connecticut, he was an internationally known leader in his specialty. He served as Chief at the Institute from 1951 to 1965 and continued there as Senior Consultant and Planning Director until last year.

A native of Philadelphia, Dr. Braceland served as Clinical Director of Mental and Nervous Diseases at Pennsylvania Hospital and as Professor of Psychiatry at Woman's Medical College (now the Medical College of Pennsylvania). In 1941 Dr. Braceland became Professor of Psychiatry and Dean of the School of Medicine at Loyola University, a position he held for only one year. He then joined the medical staff of the United States Navy and served as a consulting psychiatrist to the Surgeon General and as a physician to President Franklin D. Roosevelt. After the war he was a special witness at the Nuremberg Trials where he testified that Rudolph Hess was not feigning insanity which spared Hess' life. He was a Rear Admiral in the United States Naval Reserve.

Dr. Braceland served as Chief of Psychiatry at the Mayo Clinic in the mid-40s and as Clinical Professor at Yale University from 1951 to 1968. He lectured at Harvard during the '60s.

A former President of the American Psychiatric Association, the Association for Research in Nervous and Mental Diseases and the American Board of Psychiatry and Neurology, Dr. Braceland was the author of three books and more than 300 papers and reports for professional journals. He edited the American Journal of Psychiatry.

He was named a Knight of St. Gregory the Great by Pope Paul XII, and in 1962 was the recipient of the Laetare Medal, Notre Dame University's highest honor. Dr. Braceland was awarded seven Honorary degrees including one from Jefferson in 1965.

He was buried at Arlington National Cemetery with full military honors. Surviving are his wife, Hope, a son and daughter.
Reunions 1985
All Activities June 4, 5, 6, 8

55th Reunion 1930
Dinner
Jefferson Alumni Hall June 5

50th Reunion 1935
Black Tie Dinner
Four Seasons Hotel One Logan Square June 5
Luncheon Union League of Philadelphia June 6

45th Reunion 1940
Dinner
Union League of Philadelphia June 5

40th Reunion 1945
Dinner
The Academy of Natural Sciences 19th and the Parkway June 5

35th Reunion 1950
Dinner
The Palace Hotel 18th and the Parkway June 5

30th Reunion 1955
Dinner
Carpenters' Hall 320 Chestnut Street June 5

25th Reunion 1960
Black Tie Dinner Dance
The Franklin Institute 20th and the Parkway June 5

20th Reunion 1965
Black Tie Dinner Dance
The College of Physicians of Philadelphia 19 South 22nd Street June 5

15th Reunion 1970
Dinner
Four Seasons Hotel One Logan Square June 5

10th Reunion 1975
Dinner
The Philadelphia College of Art Broad and Pine Streets June 8

5th Reunion 1980
Cocktails and Buffet
Jefferson Alumni Hall June 8