Hearts at Jefferson
Heart disease is the number one killer of both women and men in the United States. According to the American Heart Association, all cardiovascular diseases together cost roughly $403.1 billion in 2006, including healthcare services, medications and lost productivity. Although fewer people die from cardiovascular diseases, there is an increased incidence in the U.S. population. The growing obesity epidemic in America suggests that, despite our best efforts, this trend will continue. These tremendous costs — both human and economic — mandate that we name cardiac and cardiovascular biology a strategic priority at Jefferson.

The heart doesn’t beat on its own, however. Heart function affects every organ, so our healthcare teams work across disciplinary lines pushing cardiology beyond standard care. Heart attacks can be caused by weakened blood vessels, which can also lead to stroke or pulmonary embolism. So our cardiologists, neurologists and vascular surgeons work together to treat the whole patient. This cooperation represents a new model in the education and training of healthcare providers and in the care and treatment of patients.

In the past, the process of integrating care has been left to the patient, who must organize his or her own visits with — and gather important information from — numerous physicians, labs and specialized care providers. This fragmentation of services slows — or even prevents — diagnosis and often necessitates further physical complications for the patient before the correct diagnosis and treatment are identified. Offering a multidisciplinary approach to the diagnosis, management and treatment of the disease, Jefferson coordinates experts in cardiology, vascular surgery, cardiovascular and interventional radiology, and neurosurgery to collaborate on a comprehensive approach to patient care. This patient-centered approach to clinical care allows for early diagnosis, improved treatment, and better long-term health of our patients.

The benefits of this treatment model go far beyond an improved experience for our patients, however. This collaboration, combined with the ongoing clinical and basic scientific research at Jefferson, offer new and better ways of treating cardiovascular diseases. For example, in the Center for Translational Medicine, physician-scientists are exploring new mechanisms that may allow heart muscle cells to survive ischemic injury, as well as providing new tools to monitor the effects of cancer drugs on the heart.

From heart transplant to heart-assist devices, endovascular procedures to endovascular valve replacement, the heart is in good hands at Jefferson.

Sincerely,

Robert L. Barchi, MD, PhD
President
Thomas Jefferson University

The cardiac and cardiovascular biology programs at Jefferson involve a multidisciplinary approach, collaborating across many departments on campus.
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Pictured on cover: Howard Weitz, MD’78, and Geno Merli, MD’75.
It is a privilege to have the opportunity to serve as interim dean and senior vice president for academic affairs. In this new role, I hope to maintain the momentum that Dean Nasca created in the medical college. His vision of an integrated curriculum that blends education in the basic sciences with early clinical experiences is established at Jefferson. Our attention is now on how to broaden this to encompass working together with other disciplines in order to better integrate patient care.

Medical student education is comprised of many intricate steps that shape and define budding physicians. This process begins as students prepare for medical school and extends through graduate medical education and the lifelong learning that follows. At each stage there are critical facts to be learned. But even more important is the interpersonal learning that helps us to apply this knowledge throughout the doctor/patient relationship. Gradually, our therapeutic expertise emerges as we learn to help our patients with their illnesses and health.

Through the efforts of the Accreditation Council for Graduate Medical Education (ACGME), which Dr. Nasca now leads, residency education has begun to emphasize the general competencies that cut across all areas of medical practice—patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. At Jefferson, we emphasize these same competencies from the start of medical school, knowing that the values and intellectual vigor that support these competencies must be cultivated early before we proceed to the bedside.

The introduction of clinical skills begins in year one to prepare students for that long-awaited day of working with patients. The recent excellent review, which we received from the Liaison Committee on Medical Education (LCME), attests to the impact of our curriculum changes. In the future, our work will continue to focus on refining the third- and fourth-year experience to better prepare our students for residency training. I look forward to the challenges ahead as we continue to explore better ways to educate our students and residents. Through the work of so many bright and dedicated faculty, I am confident that together we will continue the Jefferson tradition of being at the forefront of educating the next generation of medical leaders.

Michael J. Vergare, MD
Interim Dean, Jefferson Medical College
Michael J. Vergare, MD, the Daniel Lieberman Professor and chair of the department of psychiatry and human behavior, will serve as interim dean of Jefferson Medical College. Vergare, who is also chair of psychiatry at Albert Einstein Healthcare Network/Belmont Behavioral Health, will also assume, on an interim basis, the title of senior vice president for academic affairs at the university.

Vergare's many honors include the Presidential Medal of the American Psychiatric Association, the Judicare Medicare Medical Services Award, the Philadelphia Psychiatric Society's Edward Lawlor Award, and the Daniel Blain Award. He has been ranked by “Philadelphia Magazine” as one of the top doctors in the region, and in 2007 he became the first psychiatrist to receive the Bell of Hope Award presented by the Mental Health Association of Southeastern Pennsylvania.

Vergare’s commitment to medical student and residency education is also evident in his numerous professional activities. He is a member of the educational advisory committee of Jefferson Medical College, chair of the graduate medical education committee of Thomas Jefferson University Hospital, and recently completed a term as vice president of the hospital’s medical staff. In addition, he is a member of the Residency Review Committee for Psychiatry for the Accreditation Council for Graduate Medical Education and a member of the Council of Academic Societies of the Association of American Medical Colleges. He is a distinguished fellow of the American Psychiatric Association and a fellow of the American College of Psychiatrists and the College of Physicians in Philadelphia.

Classes Begin in the Dorrance H. Hamilton Building

History was made when the doors of the new Dorrance H. Hamilton Building opened for Jefferson’s future physicians, nurses, pharmacists, and other health professionals in January 2008. In this state-of-the-art facility, students will learn to work as a coordinated team, mirroring real-life, patient-centered care. The 135,000-square-foot education building houses larger classrooms, additional lecture rooms, and the latest technology and most sophisticated teaching tools available, offering more opportunities for team-based practice in simulation settings.
Brain Implant May Detect and Stop Epilepsy Seizures

An implanted neurostimulator being studied at Jefferson may be able to detect and prevent seizures when they start in people with uncontrolled epilepsy.

Jefferson Comprehensive Epilepsy Center researchers are enrolling patients in a study of the Responsive Neurostimulator System (RNS™) to determine if it is effective in stemming seizures. The system contains a computer chip that detects seizures and then delivers electric current to the brain to stop them.

“If it works as well as we hope, this device will be an exciting leap forward in the field,” said Michael Sperling, MD, director of the Jefferson Comprehensive Epilepsy Center and the Baldwin Keyes Professor of Neurology. “This is the first closed-loop system being used in humans designed to stop seizures.”

The RNS™ system is an implantable device that is designed to detect abnormal electrical activity in the brain and delivers small amounts of electrical stimulation in response, according to Ashwini Sharan, MD, assistant professor of neurosurgery. The device is connected to two wires containing electrodes, which are placed within the brain or resting on the brain surface in the area of the seizure. By continuously monitoring brain electrical activity after identifying the “signature” of a seizure’s onset, the device delivers brief electrical stimulations with the intention of suppressing the seizure before any symptoms occur.

As this is a controlled study, all participants will receive the implant but only half of them will have the device activated in the initial phase. The others will have the device activated 16 weeks after surgery once the controlled phase is complete, says Christopher Skidmore, MD, professor of neurology, who is leading the project at Jefferson. Considerations to this procedure involve determining the stimulation parameters that may suppress seizures and detecting them early enough.

Effects of Vitamin C on Non-Hodgkin’s Lymphoma

Researchers from the Jefferson-Myrna Brind Center of Integrative Medicine and Jefferson’s Kimmel Cancer Center (KCC) in conjunction with the National Institutes of Health have received approval for a first-of-its-kind study on the effect high dose vitamin C has for slowing the progression of non-Hodgkin lymphoma.

“This is a very unique study for a set of patients who have really run out of options,” said Daniel Monti, MD, director of the Myrna Brind Center of Integrative Medicine, and primary investigator of the study. “Vitamin C administered intravenously has shown great promise in the laboratory and there has been some anecdotal data...
in cancer patients, but no one has really ever run a detailed study on humans. Vitamin C doesn’t cost much and is very low in toxicity, making it a particularly desirable agent for further study.

Recent research conducted by the NIH collaborators of this study has shown that when given in sufficient amounts intravenously, vitamin C converts to hydrogen peroxide. When applied to certain non-Hodgkin lymphoma cells in the laboratory, the converted hydrogen peroxide kills them while leaving the surrounding healthy cells intact.

"Previous human studies have been flawed because the vitamin C was given orally versus intravenously," said Monti. "The problem with that is the oral route tightly limits the amount of vitamin C that can get into the bloodstream. When vitamin C is given intravenously you can get up to 70 times more of the vitamin into the blood versus the same dose given orally. It is these high blood levels that are required to get the mechanism of action (vitamin C converting to hydrogen peroxide around the cancer cells) to occur. Although other cancers could be a contender for this intervention, the preliminary data on non-Hodgkin’s lymphoma cells is why we decided to start with this disease."

The study will begin with 20 non-Hodgkin lymphoma patients who have failed standard therapy. Each study participant will be given varied intravenous doses of vitamin C three times a week. The patients will be evaluated and monitored for progression of their disease. The study’s goals are to show diminished progression of the disease in participating patients.

"This study is a unique collaboration of several clinical and research specialists, concluded Monti. "If this study yields positive data, we will do further studies to expand the availability of this intriguing therapy."
Force Honored at World Congress

Thomas Force, MD, recently received the Albrecht Fleckstein Memorial Award for Distinguished Contributions to Basic Research presented at the World Congress on Heart Disease. Force is the James C. Wilson Professor of Medicine, professor of cardiology, and clinical director of the Center for Translational Medicine at Jefferson.

Chung Earns Honor

Esther K. Chung, MD, MPH, associate professor of pediatrics, was recently awarded a two-year fellowship to partner with the Maternity Care Coalition to improve workplace and hospital policies related to breastfeeding. Chung was one of four U.S. physicians selected for the Physician Advocacy Fellowship from the Center on Medicine as a Profession at Columbia University College of Physicians and Surgeons.

McGettigan Named Wyeth Young Investigator

James P. McGettigan, PhD, research assistant professor in the department of microbiology and immunology, is the recipient of the 2007 Wyeth Young Investigator Award in Vaccine Development. The award is presented by the Infectious Disease Society of America and the National Foundation for Infectious Diseases. McGettigan’s work is aimed at creating a novel rabies vaccine; he will receive the $60,000 award over a two-year period.

Patel Joins Staff

Pankaj H. Patel, MD’91, FACS, who specializes in trauma and general surgery, has joined the department of surgery as an assistant professor. He comes to Jefferson after having served as an attending surgeon at York Hospital in York, PA, and Christiana Care Hospital in Newark, DE, and as a clinical assistant professor of surgery at Penn State College of Medicine in Hershey, PA. Board certified in surgery and surgical critical care, Patel is a member of the Society of Critical Care Medicine and the Eastern Association for the Surgery of Trauma and is a fellow of the American College of Surgeons. After having graduated cum laude from Jefferson, Patel completed a residency in general surgery at Thomas Jefferson University Hospital and an internship in general surgery at the Naval Hospital in San Diego, CA.

Rosenwasser Honored

Robert H. Rosenwasser, MD, FACS, FAHA, professor and chair of neurological surgery at Jefferson, received the Hugo Rizzoli Lecture Award from the Walter Reed Army Medical Center’s Department of Neurosurgery for his role in the training, education and direction of military neurosurgeons. Rosenwasser, who is world-renowned for his surgical expertise in the prevention and treatment of life-threatening neurovascular diseases, played a pivotal role in shaping the military approaches in the academic, clinical and research areas of this specialty.

Knudsen Receives KCC Appointment

Erik S. Knudsen, PhD, a professor of cancer biology at Jefferson Medical College, has been named deputy director of research for Jefferson’s Kimmel Cancer Center. Formerly the scientific director of the University of Cincinnati Barrett Cancer Center, Knudsen has done extensive work on tumor formation and progression and the effectiveness of cancer therapies.

Flomberg Named New Deputy Director

Neal Flomberg, MD, interim chair and professor of medical oncology at Jefferson Medical College, has been named deputy director, clinical sciences, at Jefferson’s Kimmel Cancer Center (KCC). Since 1994, Flomberg has been director of the hematologic malignancies and hematopoietic stem cell transplant program at Thomas Jefferson University Hospital and KCC. His research interests center on making transplants safer and more efficient.

Cohen Named New Lab Director

Ira S. Cohen, MD, has been named the director of the Electrocardiography Laboratory at Thomas Jefferson University Hospital and was appointed clinical professor of medicine in the division of cardiology at Jefferson Medical College. He joins the faculty after six years as a staff endocardiographer.

At the December Thomas Jefferson University board of trustees meeting Thomas J. Nasca, MD’75, MACP, was honored for his years of service as dean of the medical college. Pictured are (front row l-r): Charles Kopp, Francis Barchi, Robert Barchi, Dorrance Hamilton, (back row, l-r) Peter Scoles, Anthony Del Rossi, Arthur Feldman, Thomas Nasca, Jean Nasca.
Yeo Co-authors Pancreatic Cancer Guide

Charles J. Yeo, MD, Samuel D. Gross Professor and chair of surgery, has co-authored “Understanding Pancreatic Cancer: A Guide for Patients and Caregivers” to offer patients and caregivers a better understanding of the unique challenges associated with the diagnosis of the disease. Yeo hopes to better equip patients to make informed decisions about many aspects of pancreatic cancer including symptoms, diagnosis, staging, treatment, clinical trials, supportive care, and research. The guide also offers information on pain management, caregiving, coping, financial and legal matters, and end-of-life care. For more information, visit www.lustgarten.org.

Carr Expands Liver Cancer Program

Liver cancer specialist Brian Carr, MD, FRCP, PhD, plans to more closely align the efforts of a host of disciplines, including hepatology, surgery, transplant surgery, and medical oncology with a comprehensive research program in liver cancer. The Jefferson liver cancer program will be the first in the area to offer an array of treatments such as liver resection, radiofrequency, chemotherapy, yttrium 90, and sorafenib, a new targeted therapy that has been shown, along with liver transplants, to help liver cancer patients live longer. Carr, a professor of medical oncology at Jefferson, has helped pioneer the development of a new treatment that entails delivering radioactive microspheres of yttrium 90 directly into the liver’s main artery.

College Earns Diversity Award

Jefferson is one of America’s top colleges and universities that exemplifies diversity according to Minority Access, Inc., a nonprofit organization that works with the U.S. Department of Health and Human Services to increase the pool of minority researchers. Luz Ortiz, assistant dean of JMC’s Office of Diversity and Minority Affairs, and Edward Christian, PhD, associate dean of Diversity and Minority Affairs, accepted the award at the eighth national Role Models Conference.

Career Day

The JMC Career Day, which was held on December 5, 2007, brought together alumni and second-year medical students for an informational session regarding match procedures and guidance on over 20 specialties. JMC Alumni Association President Lorraine C. King, MD, OBG’75, REN’77, welcomed students. Alumni presenting included Elizabeth Louka, MD’99, who spoke about obstetrics and gynecology, Kevin Muzzio, MD’91, who discussed internal medicine, and Ira Strassman, MD’91 (pictured), who talked to students about pediatrics.
Since establishing the Office of Diversity and Minority Affairs, the number of under-represented medical students entering JMC has grown to match the national average of 10 percent.


**Jefferson Establishes Vaccine Center**

Vaccine researchers at Thomas Jefferson University have established the Jefferson Vaccine Center to create an infrastructure for all of the university's research and clinical efforts, while hoping to spur new collaboration and innovation. The new center is headed by Matthias Schnell, PhD, professor of microbiology and immunology, and Laurence Eisenlohr, DVM, PhD, professor of microbiology and immunology, serves as associate director.

**MEDICAL FRONTIERS**

**Webcast to Highlight Pancreatic Cancer Treatment**

Thomas Jefferson University Hospital recently hosted a webcast featuring a mini-Whipple procedure used to treat pancreatic cancer. The webcast, which featured an actual procedure, was augmented by a panel discussion by the Jefferson Pancreatic Cancer and Related Diseases team.

A mini-Whipple procedure is a type of surgery used to treat pancreatic cancer when the tumor is located in the head of the pancreas. The procedure will be performed by internationally known pancreas specialist and chair of surgery, Charles J. Yeo, MD, FACS.

**New Hope for Back Pain**

Orthopaedic researchers at Jefferson have found stem cells in the intervertebral discs of the human spine suggesting that such cells might someday be used to help repair degenerating discs and remedy lower back and neck pain. Reporting in the journal *Spine*, a team led by Makarand Risbud, PhD, assistant professor of orthopaedic surgery, and Irving Shapiro, PhD, professor of orthopaedic surgery, have found stem cells in both degenerated adult human discs and in animal discs. The study is built around the observation that these cells, while no longer functioning to repair the damaged disc, could be activated and encouraged to form bone, cartilage or even fat in order to repair the disc without surgical procedures. The work is being supported by the National Institutes of Health.

**Specialists Studying Innovative Surgery**

Sleep disorder and ear, nose and throat specialists at Jefferson are examining an innovative procedure to treat obstructive sleep apnea syndrome. The procedure, Genial Bone Advancement Trephine (GBAT), involves increasing airway space by pulling the tongue away from the back of the airway. The GBAT procedure was introduced as an adjunct to more conventional surgery in which the surgeon goes through the inside of the mouth, avoiding the need to make any external incisions or cosmetic changes.
Getting to the Heart of the Matter

The human heart is a remarkable organ; an elaborate arrangement of chambers, valves and blood vessels that all work together in synchrony. The same can be said of the division of cardiology, cardiac surgery, and translational medicine at Jefferson.
World War II. In 1917 an electrocardiograph outfit was installed in Jefferson Hospital. The following year, “The Electrocardiographic Department” was created and led by Ross V. Patterson, MD 1904. In 1939, the Ross V. Patterson Heart Station was established at Jefferson “for the study and treatment of diseases of the heart and circulation; to study the history and treatment of diseases of circulation; to collect literature pertaining to these subjects; to undertake experimental work...which may throw light upon the causes and cure of diseases of the heart and circulation; and to investigate such problems as may arise during the course of the aforementioned work.” During World War II, the cardiac clinic was founded as an outpatient activity in the Curtis Building. All eyes were on Jefferson when, on May 6, 1953, the first open-heart surgery for closure of an interatrial septal defect was performed by John H. Gibbon Jr., MD’27, under total cardiopulmonary bypass with the use of the heart-lung machine. It was the beginning of a new era in the treatment of cardiac disease. At about this time, cardiology became a separate specialty nationally. But it wasn’t until 1969 that a formal division of cardiology was created by Albert N. Brest, MD, as its director.

Brest facilitated the construction of Jefferson’s first dedicated cardiac care unit, developed the cardiac catheterization laboratories, and recruited Arnold Greenspon, MD, as the director of the electrophysiology service, ushering in the modern period in cardiology.

Cardiology draws upon many disciplines in a quest to answer the most challenging questions in medicine. Today, Jefferson’s comprehensive cardiovascular care program maintains its eminence in the Delaware Valley thanks to the team of medical professionals who built the department from very humble beginnings.

The Early Years

As early as the mid-nineteenth century, Jefferson doctors were pioneering research in heart disease. Jacob Mendes DaCosta, MD 1852, published his research on “irritable heart,” the result of studies performed at the U.S. Army Hospital for Injuries and Diseases of the Nervous System in 1871. “DaCosta’s syndrome” was called “neurocirculatory asthenia” during World War I and “anxiety neurosis” during World War II.
Today, Jefferson doctors continue to make history. **Michael Savage, MD**, director of the Cardiac Catheterization Laboratory, and **David Fischman, MD**, assistant director, are responsible for the first wide-scale clinical research of the coronary artery stent, which was published in the *New England Journal of Medicine*. They continue to be leaders in new technology regarding nonsurgical techniques to treat coronary artery disease. Recently, they have focused on issues relating to enhancing safety for patients requiring
Cardiology is a major player in the division of translational medicine, a division of the department of medicine, founded by department of medicine chair, Arthur Feldman, MD, PhD, whose own research focuses on the genomics of heart failure and finding specific genes associated with different forms of heart failure. “The cardiology program at Jefferson is strengthened by outstanding clinicians who are able to provide the highest level of standard care to their patients, but who can also take advantage of the scientific discoveries in the Center for Translational Medicine to bring the most up-to-date discoveries to the patient arena,” says Feldman.

The Center for Translational Medicine is directed by Walter J. Koch, PhD, W.W. Smith Professor of Medicine. His research involves several areas of cardiac biology with translational goals. First is the testing of GRK2 as a novel biomarker for heart failure diagnostics and prognostics. This enzyme is shown to be involved in the pathogenesis of heart failure and can be measured in white blood cells, whose levels mirror what is found in cardiac cells. A large clinical study is currently underway supported by Ortho-Clinical Diagnostics. Koch, along with David Whellan, MD, MHS, and the division of cardiology to examine levels of GRK2 in 400 patients. Koch also pursues identification of molecules involved in left ventricular hypertrophy and dysfunction in order to identify new targets for potential heart-failure strategies, which through partnership with industry, may result in small molecule drugs or gene-therapy strategies.

Recently, the Force lab discovered that certain cancer chemotherapeutics, that work by inhibiting a class of enzymes known as tyrosine kinases, can cause reversible cardiomyopathy. Force and his colleagues have identified reversible cardiomyopathy in human patients and have shown cell death as the mechanism in animal models. They are now investigating whether part of the cardiac toxicity of these cancer drugs results from the inhibition of resident and circulating stem cells that may hinder the heart’s self-repair efforts.

On the clinical side, Whellan has reorganized clinical research to develop and lead the Mid-Atlantic Research Consortium, a network of 18 clinical research centers in five states, which supports the complex needs of patient-oriented research. The consortium complements the Center for Translational Medicine and engages in all levels of clinical research activity including the use of novel therapies, safety and surveillance of drugs and devices, and research to foster a better understanding of quality-care outcomes.

Such research has changed the approach to patient care. Recently, there has been a decline in cardiovascular disease death rates, but cardiovascular disease continues to claim approximately as many lives as cancer, chronic lower respiratory disease, accidents, and diabetes mellitus combined.

Howard Weitz, MD, and Arnold Greenspon, MD, with residents.

THE TEAM PLAYERS

Center for Translational Medicine

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Thomas Force, MD, is the clinical director of the center. In this position, Force leads the center’s basic molecular biomedical research and its translation into the most efficient and tailored forms of diagnosis and treatment, as well as modes of prevention. “There is so much we don’t yet know about the heart, but we continue to learn more every day,” says Force. “I feel fortunate to be a part of the center and to participate in this kind of progressive research that translates directly to patient care.”

Recently, the Force lab discovered that certain cancer chemotherapeutics, that work by inhibiting a class of enzymes known as tyrosine kinases, can cause reversible cardiomyopathy. Force and his colleagues have identified reversible cardiomyopathy in human patients and have shown cell death as the mechanism in animal models. They are now investigating whether part of the cardiac toxicity of these cancer drugs results from the inhibition of resident and circulating stem cells that may hinder the heart’s self-repair efforts.

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Howard Weitz, MD'78, associate division director, and Geno Merli, MD'75, FACP, chief medical officer of Thomas Jefferson University Hospital, serve as national experts in an effort to decrease the risk of surgery for patients. Their national course, “An Overview of Perioperative Medicine: From Outpatient Preoperative Assessment to Inpatient Postoperative Care,” links Jefferson and the Mayo Clinic and sets the standard in perioperative care.

Arthur Feldman, MD, PhD, and Walter J. Koch, PhD.
Matthew Laine first met Howard Weitz, MD, when his daughter Christine Laine, MD, a Jefferson faculty member, asked her father, who was living in Long Island, to come to Jefferson to have his diagnosis confirmed. Laine was experiencing classic symptoms of heart failure but his local doctors said he had not in fact experienced a heart attack. Dr. Weitz confirmed that diagnosis.

A few years later, he and his wife retired to Chester County. Their new community includes a lake that they walk around every morning, roughly two and a half miles. One morning in July 1998, Laine became particularly winded. After only a mile and a half, he felt he’d better stop. “I called the local doctor, and he told me to call 911,” Laine explains. He was taken to a hospital in Chester County. “I was joking with the medics because I didn’t think I was having a heart attack. I couldn’t believe it.”

After a few days in the local hospital, his daughter insisted on moving him to Jefferson to be treated by Weitz. “Dr. Weitz established confidence in me very quickly. He doesn’t fool around; he knows what he’s doing, and he knew me.” He prescribed therapy and Laine was doing well. “I felt good,” recalls Laine.

Several years later, Laine experienced another attack. “I was at the Kimmel Center, I felt like I had swallowed a rock that had gotten stuck in my gullet. I had an appointment with Dr. Weitz the next day. I was given a stress test, which I couldn’t do. Then I underwent an angiogram, and had [triple] by-pass surgery around...” he stumbles before his 14-year-old grandson reminds him “…that was 2003.” Laine jokes, “They’ve done a good job with my heart, now all I need is someone to fix my memory.”

An avid skier, Laine stopped skiing for only one year following the by-pass surgery (which was done in November). He joined a family ski trip to Utah the following winter.

Laine now sees Weitz every four to six months. It was during one of these visits when a routine echocardiogram showed an aneurysm. Again, he sought his care at Jefferson. Thanks to vascular surgeon Paul DiMuzio, MD, FACS, Laine now has stents in his abdominal aorta and left and right iliacs.

“Everything’s going well. [Dr. Weitz] gives me the same advice, which I’m not following, to lose weight.” The retired engineer does continue to exercise, though he did have to give up skiing just this past season at age 75 because of back problems. He continues walking, follows a drug regimen, and keeps his blood pressure in a healthy range.

“It’s a 50-mile trip to Jefferson, but I’ll keep coming. I’m very satisfied with the treatment I’ve received at Jefferson. Dr. Weitz in particular...I owe him a lot...my life!”
Director of the Coronary Care Unit, Matthew DeCaro, MD, has worked to improve Jefferson’s approach to the critically ill patient. For the patient with acute coronary syndrome or myocardial infarction, the speed with which the patient is attended to can have a major impact on the outcome. Innovative multidisciplinary approaches decrease the time from onset of cardiac symptoms to cardiac catheterization or coronary artery revascularization.
Advanced Heart Failure and Cardiac Transplant Center

For the patient with advanced heart failure, Paul Mather, MD, director of the Advanced Heart Failure and Cardiac Transplant Center at the Jefferson Heart Institute, leads the region’s fastest growing heart transplant program. Doctors in the center have a combined experience of more than 1,100 heart transplants and 35 years in end-stage heart failure and cardiac transplantation. Recently, cardiac surgeons, Scott Silvestry, MD, and Linda Bogar, MD, CTS’04, implanted a Jarvik 2000® Heart Assist System into a 55-year-old man suffering from chronic heart failure to save his life. The advanced heart failure and cardiac transplant team became the first in the state to implant the new device.

In a little more than four hours, the device helped the man’s heart resume normal blood flow. Rather than take over for the biological heart, the Jarvik 2000® Heart Assist System augments the weakened heart’s blood output to help to restore a normal flow throughout the body. The device is the smallest and simplest left ventricular-assist apparatus available and fits directly inside the heart’s left chamber. “The Jarvik 2000® Heart Assist System is the next generation of assist devices—a smaller, more durable pump that is implanted into the left heart ventricle itself,” explains Silvestry, surgical director of the heart transplant program. “This smaller assist device was implanted without the use of the heart-lung machine through an incision in the left chest. It enables us to provide a less invasive option for use in BTT indication—bridge to transplant—to help patients to become stronger and in better physical condition for a new heart.”

James T. Diehl’s, MD, director of the division of cardiac and thoracic surgery, approach focuses on valve repair rather than replacement. He also works with surgical repair of acute thoracic aorta dissections.

New and exciting things are happening in electrophysiology as well. The patient with chronic atrial fibrillation, an abnormality of the heart beat that affects as many as two million patients and puts the patient at risk for stroke and limited physical activity, is being treated using catheter-based technology. Led by Greenspon and Daniel Frisch, MD, the team has amplified the availability of several treatments—particularly atrial fibrillation ablation (also called pulmonary vein isolation). “With this procedure, we attempt to locate areas of abnormal electrical activity and then eliminate that activity by cauterizing the tissue,” explains Frisch. “The goal of the procedure is to cure this rhythm disorder, and in most cases we can significantly reduce symptoms.”

Just as the heart is inextricably linked to other organs by arteries and veins, the treatment of heart disease crosses divisions and departments at Jefferson. The division of cardiology collaborates closely with cardiovascular surgery, endocrinology, neurosurgery, especially the division of cerebrovascular surgery and interventional neuroradiology, and pharmacology.
The Center for Vascular Diseases

Because heart attacks and pulmonary embolism can be caused by untreated vascular disease, cardiology also works with the vascular disease group. Vascular diseases include any condition that affects the circulatory system and ranges from diseases of the arteries, veins and lymph vessels to blood disorders.

The Center for Vascular Diseases represents a new model in the care and treatment of patients, as well as the education and training of healthcare providers. In fact, it is the first center of its kind in the country. The center coordinates experts in cardiology, vascular surgery, cardiovascular and interventional radiology, and neurosurgery to collaborate on a comprehensive and fully effective approach to patient care. It offers a multidisciplinary approach to diagnosis, management and treatment of vascular diseases.

The collaboration across disciplines, combined with the ongoing clinical and basic scientific research, creates an opportunity for patients to access multidisciplinary problem-solving by some of the best minds in their fields, along with the newest treatments available to achieve the greatest possible outcomes. This revolutionary approach to patient care allows for early diagnosis, improved treatment, and the better long-term health of patients.
After seven years leading Jefferson Medical College, Thomas J. Nasca, MD'75, MACP, stepped down from the dean’s post in December to become CEO and executive director of the Accreditation Council for Graduate Medical Education headquartered in Chicago. His legacy began in 1992 when he returned to Jefferson to direct the residency program in the department of medicine. He served as associate dean for graduate medical education before being appointed dean of the medical college in 2001. During his tenure, he challenged students to be “virtuous physicians” and sustain a commitment to improve medical education in developing countries. The 101 Fund, which has been renamed the Dr. Thomas J. Nasca 101 Fund by JMC’s Alumni Association, touched our hearts and reminded physicians about the value of medical education. What could be a more compelling tribute to Dean Nasca than to hear from those who knew him? We are happy to share these reflections with our readers.

Thank you, Dr. Nasca.

— Christina Mitchell, MD
PGY-3, Internal Medicine
"Serving with Tom Nasca on the Council of Deans was a true pleasure. No matter how thorny the problem or how contentious the issue, his wisdom always shone through and his warmth always disarmed any tension. While my colleagues and I were often prone to engage in debating academic fine points, he always clearly focused on the central importance of medical education and the well-being of our learners. It was wonderful to see all these qualities recognized in his selection to be the next leader of the ACGME. No one understands better than Tom the complexities involved in the making of a good doctor, making him the perfect choice. For me, now also having moved from the life of a dean to my new position at the Association of American Medical Colleges, it is enormously reassuring to know that a key partner organization will now be led by one of our most trusted colleagues in academic medicine. The fact that he also is a good friend and a wonderful person makes it all the better!"

Darrell G. Kirch, MD
President and CEO
Association of American Medical Colleges

“In December of 1993, I was a senior internal medicine resident. It was 6:30 pm, and we were once again waiting for our new program director to finish interviewing a residency applicant. Even when this interview was complete, we knew we would still need to discuss all of the candidates we met that day. It would be another long night at the office.

“When Tom Nasca became our program director earlier that year, we were promised he was dedicated. When he volunteered to personally interview each of the hundreds of applicants we would see between November and January, it seemed inconceivable. None of us actually thought he could complete this task. We were incorrect, and these late nights were a necessary by-product of his decision.

“More memorable, these late nights became critical lessons for us—lessons about dedication and personal sacrifice. They were a demonstration of the commitment to excellence and altruism that are central to professionalism. We had often heard these platitudes, but this was one of the finest examples we could have ever witnessed.

“Dr. Nasca’s mentorship and guidance has been fundamental in many physicians’ decisions to pursue academic medical careers. However, I believe the lessons he provided by example were even more important. He has motivated many students, residents and colleagues with similar examples of dedication. Moreover, in doing so, he has exemplified what a role model for young physicians should be. It is exciting that he will now have the opportunity to impact so many physicians-in-training as he begins his new role.”

John Caruso, MD’91
Assistant Dean, Academic Affairs/
Graduate Medical Education and Affiliations

“We have been asked to give a personal reflection on what Dean Tom Nasca has meant to us over the past six years. From a professional point of view, Tom Nasca has been a role model, a mentor for both of us, a man of integrity and an individual who sets standards for education at the highest level of excellence. But he has had a vision, a vision that is now coming to fruition, that of leading and supporting a new generation of teachers in medicine. This support has been so important for those of us who have the drive and passion to teach and need to have the respect, support and time to effectively do so. The title ‘Professor’ requires that one has something to profess; Dean Nasca indeed defines the title. Dean Nasca has effectively translated and, fostered in our time, what Sir William Osler started over a century ago—a model of education and teaching that makes it central to the profession of medicine itself.

“But this vision and leadership is not the only one, we submit, the most important contribution that Tom and Jean Nasca have made here at Jefferson in specific and in the academic medical community at large. The more important aspect is that described in this anecdote. Soon after our arrival here at Jefferson, we had another arrival, that of our fifth child, Christopher. Several weeks later, we were invited to the Dean’s Annual Holiday party in old McClellan Hall. We both wanted to attend but there was no option for a babysitter. With some trepidation, we decided to bring our two-month-old son with us. From the moment we arrived, both Tom and Jean focused on our newborn son. (As parents of this beautiful boy, we can see why.) In fact, for the better part of the next two hours, Jean gleefully and with great caring carried Christopher about the room allowing us, as harried parents of a newborn (with four others at home), to actually spend a little time together. More important, this demonstrated to us that Tom and Jean cared for us not only as faculty, but as individuals and members of the larger family of medicine. We felt that we had found, after years of search, a home at Jefferson, a home led by the Nasca family. From that evening on, the Berg family has been proud to be part of the Jefferson family led by Tom and Jean Nasca.

“Thank you, Tom and Jean Nasca.”

Kate and Dale

Katherine Worzala, MD, MPH
Assistant Professor, Medicine
Director, Dr. and Mrs. Robert D. Rector Clinical Skills Center
Director, University Simulation and Clinical Skills Program

Dale Berg, MD
Associate Professor, Medicine
Director, Clinical Skills Curriculum

“My memories of Dr. Nasca will revolve around his erudite nephrology lectures of course, but more so his description of the making of a physician. He often teased us students about the number of times that we would hear that particular lecture at Jefferson Medical College, but each time he delivered it, it struck a new chord with me. He perfectly encapsulated the journey of the physician. Despite his prominent position, he related to those of us lowest on the medicine totem pole, describing his own medical school career and aspirations to be the dean of the medical college and how he made them come true. He encouraged us to become more than simply ‘competent’ or even gifted; he inspired us to become ‘masters’ in our respective
fields, as we all knew he was in his own. He warned us that not everyone will become a ‘master,’ but this admonishment propels me to keep asking questions and studying, especially when I’m exhausted. I continue to reflect on Dr. Nasca’s words, as I am sure I will for the rest of my career.

“Thank you, Dr. Nasca.”

Christina Mitchell, MD’05
PGY-3, Internal Medicine

“I have known Dr. Nasca for over 15 years. During that time we worked, sweated, laughed, created, and cried together. There were many, many ‘moments’ of adventure and danger; of joy and laughter; of sadness and reverence; some precious and private, some endearing, and some almost too poignant to share.

“As important as these ‘moments’ are and were to me, they are but fleeting memories. No single ‘moment’ captures the essence of this man.

“So I will forgo the temptation to entertain you, and I will simply leave you with what I will remember and cherish about Tom Nasca — his genuine and gentle kindness. A kindness reflected in everything he did — from a gentle touch on the shoulder of a grieving colleague to his steely resolve to change the medical college curriculum because he believed medical students deserved better than we were giving. Simply put, he cared. And he demonstrated that caring to everyone: from the homeless person living in the streets to department chairpersons facing personal or departmental crises; the maintenance staff, patients, students, secretaries, faculty, security — everyone. In his travels up the academic ladder culminating in his role as the dean, he never wavered from who he was — a leader who tried to build a community where people worked relentlessly towards excellence while caring deeply about and for each other.

“It is illustrative that when he revealed to the Jefferson community that he was leaving, all of us in the dean’s office we were shocked and saddened...but the one who openly wept and appeared most distressed was the dean’s office custodian. Why? Because here was a man, the most powerful in the medical college, who not only appreciated her openly but who genuinely treated her like a colleague and a friend. And it felt genuine to her because it was genuine — to Dr. Nasca we are/were all friends, all colleagues — for him roles may separate our functions but our personhood is primary...who we are transcends what we do.

“Leading with the heart — that is what I will remember most about Tom Nasca, and I thank him for this generosity of spirit."

Timothy Brigham, PhD
Associate Dean,
Organizational Development and Planning

“I had the distinct honor and pleasure of working for Dr. Nasca as his assistant from 2003 until his departure in 2007. During that time, I got to appreciate the dean, not only for his overwhelming loyalty to his alma mater and undying passion to ensure that his students became the most skilled, kind and compassionate physicians they could be but, more important, for how he embodied the true meaning of the term ‘gentleman.’

“When Dr. Nasca told me of his impending departure, feelings of sadness overwhelmed me. And as word got out, I quickly realized that many shared my sentiments. I was inundated with stories of how the dean always had a kind word for those he passed in the halls or on the streets; or how he would stop to assist someone in need. He was not only a boss and a dean, but a compassionate and kind individual who truly cares for those around him.

“I will not soon forget the many laughs and memories that we have shared over these last four years. I will be forever grateful for the opportunity that Dr. Nasca gave to me when I was hired, and I will always be proud to say that I worked for such a wonderful individual.”

Christine McGonigal-Glaser
Supervisor, Office of Faculty Records
In 1907 Jefferson Medical College was the largest private medical school in the nation. With a new teaching hospital and excellent laboratory facilities, its forward-looking students established their own scientific publication, The Jeffersonian.

The Jeffersonian was a monthly journal written, edited and produced from 1899–1916 then later revived by JMC undergraduates. Part newsletter and part nascent medical journal, it provided students with experience in publishing—one of the few means of promoting new scientific studies and clinical discussions. The topics ranged from the antiquated to very modern issues.

Some interesting features graced the pages of The Jeffersonian. The following, excerpted from the 1907 spring edition, is an example of the flare of content and writing style of the students.

**Locals**

Professor Hare is never at a want for an apt remark. At a recent lecture, when his entrance was received with unusual enthusiasm, he said that it reminded him of the gladiator in the Roman amphitheatre, who, preparatory to the bloody combat, greeted the officials with the remark, “Those who are about to die, salute thee.” The comparison was significant in view of the approaching exams.

**Euthanasia**

A recent case in New York City where a woman was being tried for murdering her mother by administering her doses of bichloride of mercury has revived the discussion of the subject of euthanasia.

...Mrs. Binge was dying of cancer, and her suffering was so great that she had repeatedly requested her physicians, nurses and members of her family to end her misery, demanding that euthanasia be practiced in her case as a measure of mercy.

...Mrs. Wallau, unable to bear the sight of her mother’s increasing agonies, finally yielded...and gave her the bichloride of mercury or else left the poison within easy access, thus permitting the woman to commit suicide.

That the practice of euthanasia, or hastening death in cases of extreme suffering, will not receive the countenance of leading physicians and surgeons during the present generation, and that any legislative measure looking to the legalizing of such practice will be overwhelmingly defeated, is quite evident...

As medical science progresses, diseases, which formerly were considered incurable, yield to treatment based on newly acquired knowledge. Suffering, which at one time was without alleviation, is eradicated by newly discovered remedies or new methods of surgery. Thus it is evident how difficult becomes the problem of proper practice of euthanasia....

**An Amusing Anecdote**

Professor Hare is responsible for the following. When ether was first introduced, a certain Jefferson professor was of the opinion that either not enough ether could be given...
to produce anesthesia, or that so much would be required that the patient's life would be threatened. He determined to conduct an experiment before the class in the old college building, and secured a pugnacious and virile billy goat as the victim. After a lengthy and vigorous argument between the goat and a number of students, the animal was placed on the table and duly anesthetized. In a few minutes the goat appeared to be breathing its last. The professor dwelt upon the dangerous use of the new drug, and the class adjourned for the lecture. Hardly had they started down the stairs, which were narrow and precipitous, than the goat, which had come to, appeared in their midst and viciously butted them in all directions.

Editorials

Editorials were also popular features of the publication. This one is of particular interest. Dear Sir:

Owing to the great need for human embryonic material in the Division of Embryology (Department of General Anatomy) for the purposes of teaching and investigation, and appreciating that many of the graduates would be glad to furnish material, which otherwise might be lost or not utilized, I venture to ask The Jeffersonian to inform the graduates of this college living in and in the neighborhood of this city of our needs. We should have a collection of human embryos, carefully preserved and catalogued, the good sections to be cut into serial sections, some in the transverse, some in the sagittal and coronal planes. Valuable collections of this kind exist at Johns Hopkins, Harvard, Columbia, and other institutions...

...In the course of a few years we may hope to have accumulated a collection of embryos that may be extensively used for research as well as teaching...

— Edw. Anthony Spitzka,
Professor of General Anatomy

A more recent edition of The Jeffersonian, printed in 1956, tells the story of how the newsletter was reborn. "In April 1889, a tradition was born at Jefferson. At that time, a group of six students got together and organized a school publication, which they named The Jeffersonian. It was actually a small monthly magazine containing news of the school, students and alumni. It also contained papers on various subjects by members of the faculty. The Jeffersonian flourished for 17 years, but it was discontinued in 1916. We think it fitting, therefore, that on this date that tradition should be born again 40 years later. The first editor, Joseph Laughead (1900) wrote in his opening editorial that "The Jeffersonian is a publication for the students, by the students. It is our hope to continue in that original statement of The Jeffersonian tradition. Thus, we dedicate our paper to two purposes: the publication of news, which will keep the student body informed on our school and its activities, and to convey a sense of pride in the achievements of the school of which we are all a part."

While The Jeffersonian may have remained in print after this edition, there are no records to confirm how long it was published. If you have any information or copies of The Jeffersonian, please contact Michael Angelo, University Archivist, at michael.angelo@jefferson.edu.

At the association’s November meeting, special recognition was given to Thomas J. Nasca, MD’75, MACP, the former Anthony F. and Gertrude M. DePalma Dean of JMC. A Steuban Glass gift was presented to Nasca along with a check for $7,000 that would go to Nasca’s 101 Fund. Edward Jaeger, MD, OPH’64, made a special motion to name the 101 Fund the “Dr. Thomas J. Nasca 101 Fund.” Full approval was made by the executive committee.

Vote for Alumni Trustee

Send in your vote for Alumni Trustee. The ballot is contained in this issue as a postage-paid reply card. Simply fill in, detach and mail.
'44s

William Morton sold his Chester County home of 51 years and in 2006 moved to California with his son. “At my age, not much news beyond gardening, but I have arranged to have my corpse go to the anatomy department at Jefferson to give the first-year students some laughs.”

'46

David Simons attended the Crosby 50th anniversary of the Manhigh II flight, a 1957 balloon flight to study the effects of high-altitude flight on humans in small capsules like those that would be flown in space. There, he was presented with a proclamation for Manhigh II Days on the Cuyuna Range in Crosby, MN. He did five presentations in two days: three on myofascial trigger points (MTrP) to a local medical group and two on the cosmic radiation studies done on the flight and what has become of them. The following week, Simons received the Tufts Orofacial Pain Society’s Distinguished Clinician Award in recognition of his pioneering achievement in myofacial pain.

'48

Charles D. Foster is in good health and enjoys ballroom dancing. He lives in Savannah, GA.

'49

Gerald Marks writes that his son, John, JMC’89, was a participant lecturer in the annual New York Surgical Meeting chaired by a fellow classmate, Scott Boley, JMC’49. Marks was recently active as a keynote speaker at two international meetings, the 14th International Gastrointestinal Cancer Symposium at the University of Virginia and the International Rectal Cancer Conference in Brazil, where he served as honorary president. He and his son work together at Marks Colorectal Surgical Associates, where he continues to perform anorectal surgery and colonoscopies. In addition, Marks runs an annual International Rectal Cancer Consensus Conference as part of his responsibilities as the director of the International Network of Comprehensive Rectal Cancer Centers. He continues to play tennis and golf even though he admits, “All in all, I am a lucky guy, and I can overlook my struggle with tennis and a high handicap on the golf course.”

L. Roy Newman teaches “Introduction to Clinical Medicine” to first-year students at Jefferson. This is his fifth year, and he enjoys it very much. He lives in Rydal, PA.

Arthur E. Orlidge from Shanksville, PA, writes, “A veteran of WWII and the Korean Conflict, I settled down for the life of a ‘community doctor’ in Shanksville in 1953. Insurance companies modified my dreams out of OR, ER and maternity services. Therefore, I became an active member of the Board of Family Practice with special interest in geriatrics and mental health. I served as superintendent of Somerset State Hospital for six years. Our little town is world famous since September 11, 2001.”

'52

John O’Hurley apologizes to his classmates for not making the reunion. He currently resides in Cape Cod.

'54

William J. Albright III continues to work full-time in a family practice at the Pinnacle Health System in Middletown, PA. His son, William, MD’85, has joined him in the practice. His son is a colonel in the PA National Guard and will begin his second tour of duty in Afghanistan at the end of June.

A.G. Scottolini and his wife, Gloria, recently spent two leisurely weeks exploring Etruscan antiquity, and medieval and renaissance cultures in Tuscany. The trip was both an intellectual and gastronomic feast. “Stay clear of the autostrada with the madcap Italian drivers. Speed limits are for tourists.”

'55

Reginald B. Gemmill of Stewartstown, PA, is now a widower after 53 years of marriage. “My children and grandchildren keep me involved in their lives.”

'56

Hilliard Gersten enjoys retirement in Palm Beach Gardens. He has given up flying but enjoys plenty of golf.

Paul G. McDonough received the Lifetime Achievement Award for “fundamental research leading to insights into disease prevention, progression or therapy” from the Medical College of Georgia Research Institute. McDonough, a physician-scientist, was honored for his significant contributions to reproductive endocrinology and reproductive genetics. He was one of the first to establish the genetic basis of gonadal dysgenesis and many other related disorders of puberty and sexual dysfunctions in development. He has been instrumental in Y-chromosome mapping, the first prenatal diagnosis of congenital adrenal hyperplasia (CAH), the first molecular diagnosis of CAH, and screening candidate genes for mutations in a variety of reproductive disorders.

Charles J. Stahl III, alumni trustee, board of trustees for Thomas Jefferson University, was inducted into the Souardton, PA, Area School District Hall of Fame on October 13, 2007, in which he was recognized for his “exceptional leader-
Frederick H. Wilhelm is retired and lives in Kensington, MD, and Rehoboth Beach, DE, with his wife, Alison. He enjoys his grandchildren, traveling, reading, and chess.

Gerald Labriola announces that his ninth book has just been released. Titled "The Strange Death of Napoleon Bonaparte," the book is a mystery/suspense novel.

Jerome Cohen looks forward to seeing everyone at our 50th reunion. "Phyllis and I enjoy our 'lucky' life, which includes family, golf and travel."

Leonard F. Greenberg retired from cardiology practice in 2003, but he continues to be involved in medical education. He is on the Jefferson faculty teaching "Introduction to Clinical Medicine" to first-year students. He also teaches cardiology to the house staff at the Einstein Medical Center.

Gerald MacDonald retired to Clearwater, FL. He volunteers in a county free clinic.

Richard J. Flanigan and his daughter, Kate Flanigan Sawyer, MD, MPH, combined their research and clinical experience into their new book, "Longevity Made Simple." In the book, the father-daughter team reveals the vast and sometimes contradictory health and medical advice on aging.

Joseph E. Palascak continues as professor of medicine at the University of Cincinnati College of Medicine and director of the hemophilia center. He reports that his son, Joseph B. Palascak, MD, did his internal residency and a GI fellowship at Jefferson, completing his training in 2005. He is currently completing an interventional GI fellowship at the University of Cincinnati prior to joining a GI practice in Santa Cruz, CA. His daughter Alexis is a staff attorney in enforcement at the SEC in Washington, DC.

David Subin continues to practice orthopaedic/hand surgery at Sharp Rees Stealy Medical Group in San Diego and at the Palo Alto Foundation in Palo Alto, CA.

Jerome Rudnitzky hopes to retire this July after having worked for 40 years in the pulmonary disease department at Crozer Chester Medical Center in Pennsylvania.

Gerard MacDonald retired to Clearwater, FL. He volunteers in a county free clinic.

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Harold Yocum works part time at the University of Oklahoma School of Health Sciences where he provides clinical guidance for third-year orthopaedic residents in a clinic, which provides more time for bird watching and scouting. He was selected by his high school as the 2007 Outstanding Alumni and the Boy Scouts awarded him the Silver Buffalo for his years of service at the local, regional and national level.

Ronald A. Hoffman received a master's degree in healthcare management from the Harvard School of Public Health. He was appointed director of The Ear Institute at New York Eye and Ear Infirmary.

Theodore Probst is the assistant director of the Memory Clinic at Sarasota Memorial Hospital, FL. He is happy to report that he has a new granddaughter, Lisa Danielle Swers, who was born in September 2007.

Robert C. Snyder is chairman of pathology at Holy Cross Hospital. He bought a new townhouse on Capitol Hill, and he welcomes classmates who are visiting Washington, DC.

Daniel G. Sommer continues to practice radiology full time. He is the chief of staff at one hospital and serves on the board of trustees of another. "I find myself busier than ever but still enjoying it." He lives in Oak View, CA.

Barbara B. Berniker reports from El Cerrito, CA, that her daughter, Abby, is a sophomore at Jefferson.

Marilyn Kershner is still practicing radiology in San Diego, CA. She proudly reports that her youngest son, Michael Kershner, was the effects producer for the recent Dreamworks animated film, "The Bee Movie," which starred Jerry Seinfeld.

The Hulicks moved to Boston to be near their son and his wife. "Our story is simple: we met at Jeff, married, and had another Jeff graduate. Jeff is in our blood," laughs M. Hulick. P. Hulick adds, "Jefferson cultivates a family feel. I don't know how, I don't know why. My father told me about it, and we told our son. If you're in the Jefferson family, it will take care of you. We see a lot of fellow alumni's kids come here. It's because Jefferson is a part of who you are." The Jefferson experience keeps families like the Hulicks coming back, generation after generation. Not surprisingly, there are a reported 368 alumni who have at least one parent who is an alumnus/a.

P. Hulick currently works as a radiation oncologist in Boston. The Hulicks moved to Boston to be near their son and his wife. Previously, he was chair of radiation oncology at Christiana Hospital in Delaware and an assistant professor at Jefferson.

The dormitory [Martin Building] on campus. “We had a curfew,” she recalls. “At the stroke of 1:00 a.m., the house mother would put this big chain on the door, and you could not get in or out after curfew. The dorm had a very stern house mother."

The couple was married the evening before M. Hulick's graduation from nursing school, at the end of P. Hulick's third year of medical school. Their honeymoon began the next day and ended one day later when she started work, and he began his psychiatry rotation at the Coatesville VA hospital.

His father's experiences, while somewhat different, were also a throw back in time. “My parents secretly married the year before my father graduated from med school,” P. Hulick recalls. “They didn't tell anyone because my grandfather would not have permitted it. He was afraid that my father wouldn't finish medical school if he was married.” P. Hulick also remembers his mother telling him how his father would mail his laundry home for her to wash each week.

The Hulicks reminisce that while things have changed for students since his father's time, their time, and now their son's time, they have also remained the same. “It's a struggle for students — studying, financing their education, and generally balancing life,” says P. Hulick. "Our son may have had things a little easier in some ways, but the whole medical school experience really has not changed much. One thing we all agree on is that it was rigorous.” Their son, Peter, is a 2001 JMC graduate, who did his internal medicine residency at the Mayo Clinic Jacksonville and is currently in the practice of adult genetics and doing research work at Harvard. "From an early age our son showed an interest in science. We knew once he decided he wanted to apply to medical school, he would go to Jeff," says P. Hulick.

“Our story is simple: we met at Jeff, married, and had another Jeff graduate. Jeff is in our blood,” laughs M. Hulick. P. Hulick adds, “Jefferson cultivates a family feel. I don’t know how, I don’t know why. My father told me about it, and we told our son. If you’re in the Jefferson family, it will take care of you. We see a lot of fellow alumni’s kids come here. It’s because Jefferson is a part of who you are.” The Jefferson experience keeps families like the Hulicks coming back, generation after generation. Not surprisingly, there are a reported 368 alumni who have at least one parent who is an alumnus/a.

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Edward A. Jaeger, MD, OPH’64, former president of the JMC Alumni Association and JMC faculty member, was presented his portrait at a ceremony held this past winter. Jaeger’s long association with the medical college began when he received his post graduate degree in ophthalmology from Jefferson. Soon after, he served as director of undergraduate education in the department. He has been involved with the JMC Alumni Association in many capacities, such as serving on the publications committee, the nominating committee, and the Alumni Achievement Award committee.

On November 14, 2007, Joseph Seltzer, MD’71, senior associate dean, continuing medical education, and faculty member at Jefferson, was presented his portrait by the Jefferson Medical College of Thomas Jefferson University. John Fenlin, MD’63, director of the Shoulder and Elbow Center at the Rothman Institute and clinical professor of orthopaedic surgery at Jefferson, addressed the gathering. Seltzer is professor of anesthesia and senior dean of continuing education, faculty, and alumni affairs for JMC.

Julie Timins practices diagnostic radiology and nuclear medicine at Christ Hospital in Jersey City, NJ. She chairs the state commission on radiation protection and sits on the board of the National Council on Radiation Protection and Measurements. She lives in Morristown, NJ.

Paul A. Bialas, FACP, has received the Helen S. Wizman Volunteer Teaching Award from the PA chapter of the American College of Physicians. This award recognizes “the most effective and committed internist, who has distinguished him or herself as a member of the voluntary faculty at a teaching hospital or medical school in Pennsylvania.” Daughters, Nichole Bialas Harrison, JMC’02 (psychiatry) and Bridget Bialas Flickinger, JMC’05 (emergency medicine), are both serving chief residents at Strong Memorial Hospital University in Rochester, NY.

William T. Chain Jr. reports he is alive and well and has been practicing general medicine in Narberth, PA, for the last 31 years.

Mark Pascal continues to serve as director of the medical oncology faculty of New Jersey and serves on the clinical practice committee of the American Society of Clinical Oncology. He proudly announces the arrival of his first grandson, Jayden, this past May to his son, Robert, and his wife, Amanda. His daughter, Nisha, and her husband, Peter Hochman, have a child, Brooke, who was born in June 1997.

Richard M. Sostowski was featured in New Jersey Monthly as one of the “Top Doctors in New Jersey.” Sostowski is a psychiatrist who practices in Bernardsville and Millburn. He is a distinguished fellow of the American Psychiatric Association and is board certified in forensic psychiatry.

Marilyn Manco-Johnson was given the Dr. Murray Thelin Researcher of the Year Award from the National Hemophilia Foundation. She is director of the Mountain States Regional Hemophilia and Thrombosis Center at the University of Colorado Health Sciences Center.

Fred H. Miller is president of Medical Associates of Rock Hill in Rock Hill, SC.

Stephen I. Kramer was recently certified by the North Carolina Medical Society Foundation after completing their year-long Leadership College. He sees the Leadership College as “a unique training ground for developing physician leaders for the benefit of our community.” He is associate professor of psychiatry and behavioral medicine at Wake Forest University-Baptist Medical Center, director of Adult Psychiatry Inpatient Services, and director of neuropsychiatry and forensic service.

Alan Midura attended his daughter’s (Emily) white coat ceremony with his father, Peter P. Midura ‘44S. Emily is in her first year at Jefferson. Midura lives in Ithaca, NY.

Richard Greco serves as editor of the newsletter “The Source” and is on the board of the American Association of Ambulatory Surgical Facilities. His son, Dean, will graduate from the University of Georgia. His daughter, Apryl, was married in June 2007 and another son, Blake, will graduate Dickinson Law School in May and was married in August 2006. He lives in Savannah, GA.

David Bozentka was recently appointed chief of orthopaedic surgery at the University of Pennsylvania’s Presbyterian Medical Center in Philadelphia, PA.

Robert O. Atlas is chair of obstetrics and gynecology at Mercy Medical Center in Baltimore, MD. He is assistant professor of obstetrics, gynecology and reproductive sciences at the University of Maryland School of Medicine.

Bladley R. Auffarth continues to practice general surgery in Gainesville, GA. He recently joined the Longstreet Clinic, a multi-specialty group with over 70 physicians.

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William V. Harrer III is president of the Citrus County Medical Society, chief elect of Seven Rivers Hospital, Secretary/Treasurer of Citrus Memorial Hospital, and the Citrus County delegate to the Florida Medical Society. He lives in Inverness, FL.

Joan Ringham Cohen and her husband, Benjamin Cohen, MD, practice cardiology in Los Angeles. Their oldest son, Ian Duke, will graduate from high school this year.

Chris Brian is a partner at Panorama Orthopedics and Spine Center. He served in the U.S. Army for nine years, and has been home in Colorado for the past four. He and his wife, Missy, recently celebrated their 20th anniversary. They have three children: Robbie (14), Caleigh (10), and Will (5). The family had a great visit to Philadelphia last summer.

Walt Greenhalgh is currently stationed at the U.S. Naval Hospital in Rota, Spain, with his family (Heidi, Mark, and Andrew). Commander Greenhalgh, a family physician and flight surgeon, is the hospital’s senior medical executive and chief of the medical staff. He looks forward to hearing from classmates and others who are considering traveling to Spain. He can be reached by e-mail at walter.greenhalgh@med.navy.mil.

William L. Joyner was recently certified by the North Carolina Medical Society Foundation after completing their yearlong Leadership College. He practices family medicine and lives in Hampstead, NC.

Mark Kostic has left the Navy after 13 years and is now the associate medical director of the Wisconsin Poison Center and an emergency physician with the Medical College of Wisconsin. He and wife, Elinor, have two daughters: Emily (10) and Sara (7).

Nicholas P. Lo Presti is in private practice in dermatology in Haddon Heights, NJ. He is happily married to Joanne, and they have two children: Ellie (4) and Andrew (2).

Justin B. Nast is currently a flight surgeon at Davis-Monthan AFB in Tucson, AZ.

Jonathan S. Harris has an internal medicine practice in the Bronx, NY. He enjoys spending time with his two children: Rachel (6) and Max (3).

Seema Rathi Bonney married William Bonney, a pediatric cardiologist, in September 2007. They honeymooned in Tahiti and are enjoying their new home in Manhattan, NY. Rathi Bonney did her residency at New York University and is currently an attending physician in NY.

Philip Perlstein married Erica Liverant on July 1, 2007, in Bensalem PA. They currently reside in Cherry Hill, NJ. Wedding guests from Jefferson included Sam Weiner ’01, Ryan Neff ’01, Jen (Butler) Olimpo ’01, Ed White ’01, Nieta (Green) Shapiro ’01, Dayna Levin ’01, Dave Rappaport ’01, Becky (Thomas) Creskoff ’00, Doyle Lim ’01, Shari Rozen ’02, and the proud father of the groom, Michael Perlstein ’75.

Melissa Burkhart and her husband, Eli Zeserson, JMC’03, proudly announce the birth of their son, Declan Kenneth Zeserson, on July 27, 2007.

Jake Rofman writes, “My wife and I welcomed the birth of our first child, Zoe Rofman, in June 2007.”

Jefferson Medical College
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In Memoriam

John F. Shaffer ’40 died September 9, 2007. After being discharged from the U.S. Army at the rank of major, he practiced otolaryngology at Bryn Mawr Hospital, Newtown Square, and the Riddle Memorial Hospital. He is survived by his wife, Betty, two sons, and two daughters.

Edward D. Knerr Jr. ’44J, whose obituary appeared in the fall 2007 issue of the JMC Alumni Bulletin, is survived by his wife, Elaine, and three sons, and two daughters. We apologize for this omission.

Robert M. Kerr ’44S died September 18, 2007. He practiced medicine for 40 years in the same home as his father, the late Percival M. Kerr, MD. In 2004, he retired to St. Petersburg, FL. He was a member of the medical staff of the Wilkes-Barre General Hospital, serving as president in 1975. He is survived by his wife, Anne, three sons, and a daughter.

Howard G. Schaub Jr. ’46 died September 23, 2007. He is survived by his wife, Frances, a 1947 diploma nurse.

Joseph M. Hopen ’49 died February 20, 2007. He practiced ophthalmology in Hollywood, FL, for 50 years. His many accomplishments include groundbreaking research in the use of the drug Trypsin for treatment of the eye. He is survived by his wife, Selma, and three sons. Son Gary is MD’77.

Herbert C. Mansmann Jr. ’51 died September 4, 2007. He served in the Army during WWII, where he was injured in the Battle of the Bulge. He became the director of the division of allergy and immunology at Jefferson Medical College. He was also the medical director of the Children’s Heart Hospital for five years. He is survived by his wife, MaryAnn, a son, and two daughters.

We apologize for this omission.

JMC Annual Fund Phonathon A Success

This fall, alumni and students volunteered their time during the JMC Annual Fund Phonathon hosted by The Jefferson Foundation. The phonathon was initiated to help raise financial assistance and awareness to the college’s alumni giving campaign. Proceeds from the fund go directly toward unrestricted giving, which supports student financial aid, technological advancements, facilities enhancements, and day-to-day operations. Phonathon JMC Alumni Association members, including Lorraine C. King, MD, OBG’75, OBG’77, president of the Alumni Association, joined over 20 fellow alumni and students for two nights of telephone solicitations. Special thanks to the many generous community groups and businesses that provided refreshments and prizes for the volunteers.

Phonathon Sponsors

- 13th Street Pizza
- Adventure Aquarium
- Breakfast and Lunch
- Bistro St. Tropez
- Camden Riversharks Baseball Club
- Caribou Café
- Club Quarters
- Crowne Plaza Philadelphia Center City
- D’Angelo’s Ristorante Italiano & Lounge
- Davio’s Northern Italian Steakhouse
- Ettore Spa & Salon
- Fork Restaurant
- Four Corners Management, LLC
- Holiday Inn Express – Midtown
- Joe Coffee Bar
- Lambert Restaurant Consulting
- Lantern Theater Company
- Las Vegas Lounge
- Lucky Strike Philadelphia
- Maggiano’s Little Italy
- Max Weiner Jewelers
- N.Y.P.D. Pizza
- Palace at the Ben
- Philadelphia 76ers
- Philadelphia Eagles
- Please Touch Museum
- Prince Music Theater
- Raw Sushi and Sake Lounge
- Robbins Diamonds
- Shinju Sushi
- Spasso Italian Grill
- The Academy of Natural Sciences
- The Phillies
- Thomas Jefferson University Activities Office

M. Dean Kinsey, MD, was among the volunteers.
Heart Rate

In 1918, the hospital established a separate department known as “The Electrocardiographic Department,” which was under the charge of Ross V. Patterson, MD'1904.

The Division of Cardiology was formally established in 1964.

On May 6, 1953, the first open-heart surgery in the world for closure of an interarterial septal defect was performed at Jefferson by John H. Gibbon Jr., MD'27. The mortality rate for intracardiac surgery dropped from 50 percent in 1955, to 20 percent in 1956, and to 10 percent in 1957. Repairs of congenital heart defects are currently estimated to have 4-6 percent mortality rates.

Nineteen of 44 current faculty members in cardiology are JMC alumni.

There are roughly 19 types of cardiovascular disease including aneurysms, angina, arrhythmia, atherosclerosis, cardiomyopathy, cerebrovascular disease, congenital heart disease, congestive heart failure, myocarditis, valve disease, coronary artery disease, dilated cardiomyopathy, diastolic dysfunction, endocarditis, hypertension, hypertrophic cardiomyopathy, mitral valve prolapse, heart attack, and venous thromboembolism.

More than 500,000 women die in the United States each year due to cardiovascular disease, their number one killer.

Cardiovascular disease is the third leading cause of death for children under the age of 15.

Nearly five million Americans are living with heart failure, and 550,000 new cases are diagnosed each year.

According to the American Heart Association, expenses resulting from cardiovascular diseases are projected to cost $448.5 billion in 2008, including healthcare services, medications and lost productivity.

The Division of Cardiology had 36,202 patient visits in 2007.
An Opportunity

Thomas Jefferson University was chosen as one of three institutions out of 87 applicants that can receive $500,000 in grant support from the prestigious Kresge Foundation if they can raise $2.6 million by April 1, 2008.

Your support will help Jefferson build a stronger organization that will continue to grow and revitalize the science and practice of medicine. To make a gift, please contact Fritz Ruccius at 215-955-8733.