School of Medicine University of Maryland School of Medicine Control of Medicine Contr



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DEAN'S MESSAGE: What's On My Mind

Dear Faculty, Staff, Trainees, Students and Friends:

What's on my mind this month is emergency preparedness. It has been seven months since the tragic massacre of 32 people at Virginia Tech. On the morning of April 16th, a mentally

ill student shot and killed two people in a residence hall, then moved to a classroom building filled with students and professors, where he again opened fire. More than two hours passed between the initial shooting and the first campus-wide email notification. A state report later concluded that lives could have been saved if students had been warned immediately after the first shooting.

The Virginia Tech shootings prompted colleges across the country to re-examine and update their emergency response plans, and find better ways to warn faculty, staff and students in the event of an emergency.

Under the leadership of President Ramsay, the University of Maryland, Baltimore has launched UMB Alerts. UMB Alerts will enable the campus to send emergency text messages directly to cellular phones and other wireless devices, such as BlackBerry and other PDAs. In an emergency, the messages will include instructions on where to go, what to do (or what not to do), who to contact and other important information.

UMB Alerts is a voluntary web-based system. When users register, they can opt to have messages sent to up to two e-mail accounts and two wireless devices, including cell phones with SMS/text messaging capabilities. Signing up for UMB Alerts is easy, and only takes a few minutes. Users can test the system by logging on to the service and clicking a button to send a test message.

Official emergency announcements will be sent by the UMB Emergency Management team. UMB Alerts can also be used by the School of Medicine to send non-emergency messages, although we would use this capability only in extraordinary circumstances. Weather-related campus announcements will also be offered through the UMB Alerts.

Students, faculty and staff are expected to be the main users of the service, though anyone can log in and sign up if they so choose. That means alumni, parents, and even nearby community members, can utilize the service. UMB Alerts is a free service, although your wireless carrier may charge you a fee to receive messages on your wireless device. I urge you to register for UMB Alerts as soon as possible by visiting the following website: http://www.alert.umaryland.edu/.

The university has a variety of ways of sharing information about campus emergencies. In the event of an emergency, information will be provided on both the School of Medicine and UMB Websites, and through email and automated phone messages. Fire wardens, security officers and shelter-in-place coordinators will also provide instructions in campus buildings.

One of the many lessons of the Virginia Tech tragedy is that we must expect the unexpected, and be more prepared than ever before to respond quickly and decisively in the event of an emergency. UMB Alerts will help us achieve that goal.

In the relentless pursuit of excellence, I am

Sincerely yours,

E. Albert Reece, MD, PhD, MBA

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Vice President for Medical Affairs, University of Maryland John Z. and Akiko K. Bowers Distinguished Professor and Dean, School of Medicine

Barish and Simard Win Founders Week Awards

Two of this year's four UMB Founders Week Award winners are School of Medicine faculty.

Public Servant of the Year

Robert A. Barish, MD, MBA

The desire to serve is a driving force in the life of Robert Barish, MD, vice dean for Clinical Affairs, and a professor in the Departments of Emergency Medicine and Medicine.

One of his early public service milestones was establishing the emergency medicine program in 1985, when he was chief of emergency medicine at the University of Maryland School of Medicine and director of emergency medical services for the University of Maryland Medical Center. Within a decade, he had



Robert A. Barish, MD, MBA

recruited renowned educators and clinicians and transformed the program into a premier site. In 1995, he became the first emergency physician promoted to full professor at the School of Medicine.

Dr. Barish expanded his public service role in 1986 and joined the Maryland Air National Guard, ultimately becoming a flight surgeon. Today, he is commander of the Maryland Defense Forces, 10th Medical Regiment, a team of all-volunteer health care providers who assisted Hurricane Katrina survivors.

Dr. Barish also has been affiliated with Boy Scouts of America for much of his life and has raised more than \$1 million for city scouts with developmental disabilities.

Research Lecturer of the Year



J. Marc Simard, MD, PhD

J. Marc Simard, MD, PhD

Future stroke patients will be better off, thanks to Marc Simard and his colleagues—the research team at the School of Medicine who discovered a new ion channel.

Using the patch clamp, an exquisitely sensitive method for testing and recording cellular electrical currents, Dr. Simard studies the regulation of ion channels in vascular cells of the brain and spinal cord. Properly functioning blood vessels and capillaries are critically important for the life and death of neurons.

Dr. Simard's Founders Week Faculty Research Lecture, "Sweet Life—New Role for Sulfonylurea Receptor 1," which he delivered on October 10, highlighted his research team's discovery of a novel ion channel and its role in stroke and spinal cord injury treatment. The lecture also addressed the channel's relationship to certain diabetes drugs and their unexpected impact on stroke and spinal cord injury in humans and animal models.

Dr. Simard is a professor in the Departments of Neurosurgery, Pathology and Physiology and chief of neurological surgery at the Baltimore Veterans Affairs Medical Center. He has published more than 85 articles in outstanding research journals and is a reviewer for the journals *Neurosurgery, Circulation Research, Cancer* and *The Lancet.*

Perspectives on the Central Nervous System



Janet Reno discusses life with Parkinson's.

he Bicentennial Lecture Series at the Hippodrome Theater concluded September

24 with a presentation on the central nervous system (CNS). Entitled "Perspectives on the Central Nervous System: The Scientists & The Patients" the lecture was moderated once again by television correspondent Dr. Bob Arnot, who caught up with speaker Mark McEwen, a close friend and colleague during his days at CBS.

Mr. McEwen, a former network TV weatherman, headlined the lecture along with former United States Attorney General Janet Reno. Both Mr. McEwen, who suffered a stroke last year, and Ms. Reno, who has Parkinson's disease, spoke of their experiences as patients with CNS disorders. "My message is, if you feel you are having a stroke,

go to the hospital," said Mr. McEwen. "Err on the side of caution. But there is life on the other side. I'm an example of that."

As is Ms. Reno, the first female attorney general, who was diagnosed with Parkinson's just two years after taking office. Rather than hide her condition, she chose to go public, educating the public about the disease, while letting them see that it did not interfere with normal life. "You can live with Parkinson's and enjoy life," she insisted. Ms. Reno also recounted a humorous story of how she once outdistanced her FBI detail while kayaking, a sport she still enjoys.

Scientists are working hard to make living with these diseases easier for patients, and two were happy to share their work at the lecture. William Weiner, MD, professor and chair, Department of Neurology, and primary author of the American Academy of Neurology's new guidelines for diag-

nosing and treating Parkinson's disease, spoke about his department's cutting-edge research into the treatment of Parkinson's and other movement disorders.



(L-R) Dr. Bob Arnot, Mark McEwen, Dean E. Albert Reece, MD, PhD, MBA, Janet Reno, Nancy Wexler, PhD, and William Weiner, MD, pose for a photo.

Speaker Nancy Wexler, PhD, a professor at Columbia University, was part of the team of scientists who discovered the chromosomal test that allows those at risk for Huntington's disease to find out if they will develop this hereditary, untreatable and fatal brain disorder. This work is quite personal to Dr. Wexler, who, at the age of 21, lost her mother to Huntington's and who has a one in two chance of developing the disease herself. "My message is don't take anything for granted," she said. "Don't take your health for granted. Don't take the future for granted. Unless you're responsible about changing your health and your future, it won't happen.

(L-R) William Weiner, MD, Sharon Powell, RN, MPH, Howard Eisenberg, MD, Paul Fishman, MD, PhD, Karen Anderson, MD, Stephen Reich, MD, and Lisa Shulman, MD, at the event.

Health Psychologist Launches Research Career with Support from Women's Health Program

As a new assistant professor in the Department of Epidemiology & Preventive Medicine in 2004, Kate Tracy, PhD, applied for funding from a campus program designed to encourage research in women's health. The Building Interdisciplinary Research Careers in Women's Health (BIRCWH) program gave Dr. Tracy funding to begin a research project investigating cervical cancer screening rates among lesbian women in the United States and among heterosexual women in Mali, Africa. With funding from BIRCWH, Dr. Tracy was able to design a research protocol and apply for additional funding from the National Cancer Institute (NCI) to continue her work after "graduation" from the program this past summer.

"The BIRCWH program was such a valuable resource for me because it provided salary support and start-up funds while I focused on launching my research projects and securing additional grant funding for my work," said Dr. Tracy.

As a health psychologist, Dr. Tracy studies cervical cancer rates in groups of women who do not have access to screenings or who are not able to take advantage of available screenings. "Cervical cancer is a treatable disease if caught early enough by annual testing," she said. "Lesbians in the United States tend not to screen for cervical cancer at the recommended rates as non-lesbian women, which potentially leads to increased cancer rates in that population. And worldwide, cervical cancer is a huge issue in developing countries because they can't afford screening programs similar to those in the United States."

Working at the Center for Vaccine Development's field office in Mali, Dr. Tracy did a pilot

project researching methods to offer economically feasible ways for Malian women to self-screen for cervical cancer. "We recruited volunteers for a pilot study, taught them how to swab themselves and are now evaluating the acceptability and efficacy of self-sampling," she said. "Mali is a very patriarchal society and the women are very private about cleanliness and hygiene. We wanted to know if they would be receptive to this inexpensive way to screen for cervical cancer in an effort to reduce the incidence of the disease in that country. News of the study spread quickly through word-of-mouth and generated more volunteers than we actually needed, but we saw everyone who showed up. We saw 223 women in two and a half days."

As a BIRWCH scholar, Dr. Tracy also began a pilot project investigating screening rates among lesbian women. With new grant funding from the NCI, she is about to begin a behavioral internet survey of lesbians in the United States to find out why some of them do not get adequately screened for cervical cancer. "Is it that they cannot

afford the test, or that they don't think they are at risk or that their healthcare provider isn't recommending the test for them?" she questioned. "Cervical cancer is clearly tied to sexually transmitted diseases, and many women don't understand that you can have female to female transmission of the virus that causes cervical cancer. This population has some unique issues and at the very least likely needs



Lisa M. Shulman, MD

customized programs and educational materials to raise their awareness of the importance of screening for cervical cancer."

. . . . cervical cancer is a huge issue in developing countries because they can't afford screening programs similar to those in the United States.



Established in 2000 by the National Institutes of Health to promote the career development of independent researchers working on women's health issues, the BIRCWH program at UMB recently received renewed funding for five additional years. It has mentored nine scholars from the School of Medicine and one from the Dental School over the past five years, and is screening applicants for the next five.

For more information on the program, contact Pat Langenberg in the Department of Epidemiology & Preventive Medicine at 6-3251.

Researchers Test Benefits of Exercise for Parkinson's Patients

esearchers from the University of Maryland School of Medicine have launched a study to see if exercising several times a week will help people with Parkinson's disease improve their walking and balance. A \$750,000 grant from the Michael J. Fox Foundation funds this multi-year project.

"Our main goal is to see if these exercises improve the mobility of Parkinson's patients," said Lisa M. Shulman, MD, principal investigator and associate professor, Department of Neurology. Dr. Shulman is also co-director of the Parkinson's Disease and Movement Disorders Center at the University of Maryland Medical Center.

She added, "Parkinson's patients tell us that when the disease begins to affect their ability to walk, their entire life is affected. They have trouble with daily activities such as dressing, house-keeping, shopping and getting around their community. That's why we are so interested in studying if exercise can help these patients improve their gait and balance, because it is so fundamental to their daily lives."

The project will enroll about 70 participants to compare the potential benefits

of three types of exercise. The first group will walk on the treadmill at a comfortable pace, but with increasing duration as the training progresses. Researchers want to see if the repetitive gait training is sufficient to improve mobility. Participants in the second group will receive treadmill training with aerobic conditioning: trainers will safely and gradually increase the incline and speed of the treadmill in an attempt to improve the participants' cardiovascular and aerobic conditioning. The third group will be using weights and stretching exercises to improve their muscle strength and range of motion. Participants will train three times a week for three months.

"Parkinson's patients often ask their doctors if they should exercise and, if so, what kind of exercise they should do," said Dr. Shulman. "However, there haven't been any rigorous studies focusing on the effect of exercise in Parkinson's disease. We are excited about this study because, at the end of our research, we hope finally to have some definitive answers for our patients."

Researchers will use several timed tests of gait to measure progress. All participants will also be evaluated with special pedometers to see if there are any increases or decreases in their daily activity over the course of the study. As part of the research, the participants' heart rates, oxygen use and blood pressure will be measured, monitored and compared after the study's completion. Investigators will also evaluate muscle strength before and after the exercise program.

The Parkinson's project builds on previous studies of treadmill training for stroke patients. This research, also conducted at the University of Maryland School of Medicine and the Baltimore VA Medical Center, examined whether the consistent, repetitive motion of walking could help the brain to "rewire" itself, developing new connections to compensate for the damaged ones, a concept known as brain plasticity.

"We have shown that regular exercise on a treadmill can improve stroke patients' walking ability even years after they've had a stroke," said study co-investigator Richard Macko, MD, professor, Department of Neurology, and director of the Maryland Exercise and Robotics Center of Excellence at the Baltimore VA Medical Center. "Now we are interested to see if this same concept will work for other neurological conditions such as Parkinson's disease."

The training will take place in the Baltimore VA's Geriatric Research, Education and Clinical Center, a gym facility with special equipment for people who may have

some physical limitations. Since Parkinson's patients may already have some gait problems, they will wear a safety harness while walking on the treadmill and will be carefully supervised. The patients will walk for about 30 minutes during each session, but the time will be individualized and adjusted over the course of the training.

The researchers are also interested to see if regular exercise provides emotional benefits as well. The study will evaluate whether the exercise has an effect on depression, apathy and fatigue—emotional symptoms of Parkinson's that may not respond well to traditional medications.

Parkinson's disease affects about one million people in the United States. Most people begin to develop Parkinson's symptoms in their late 50s or early 60s, although it can occur in younger people.

Parkinson's disease affects the brain's ability to produce dopamine, the neurotransmitter involved in the communication between the brain cells for motor control. Symptoms include rigidity of the limbs and difficulty initiating movement. Many patients have a tremor that may involve the arms or the legs. Problems with walking and balance are an increasing cause of disability over time.



Volunteers walk on treadmills as part of the Parkinson's exercise study.



Radiation Oncology Launches

to Advance Scientific Research

adiation oncology specialists at the University of Maryland School of Medicine and the University of Maryland Marlene and Stewart Greenebaum Cancer Center have launched a Program of Excellence to promote technological research they hope will lead to more precise and effective radiation therapies and better outcomes for cancer patients.

Mohan Suntha, MD, professor and vice chair, Department of Radiation Oncology, said, "This is a unique opportunity for our department to be at the forefront of developing new technologies to make radiation therapy more precise and targeted, resulting in more

effective treatments, fewer side effects and higher cure rates for patients. The focus of our research is always on improving patient care."



(L-R) Monhan Suntha, MD, Len Stoler, Roslyn Stoler, William Regine, MD, UMMC President and CEO Jeffrey Rivest, and Dean E. Albert Reece, MD, PhD, MBA, at the launch of the Program of Excellence in Technology Translational

Key to the effort is a new state-of-the-art linear accelerator made by Varian Medical Systems, Inc., which will be used solely for research. This powerful image-guided radiation therapy system delivers high-dose radiation to even the smallest tumors and can target an area as small as a pencil point.

"What's exciting about this new initiative is that not only do we have the most sophisticated technology available—a state-of-the-art linear



The Varian linear accelerator delivers high-dose radiation to even the smallest tumors

accelerator used solely for scientific research—but now we will be able to translate our discoveries directly into patient care faster than ever," said Dr. Suntha, who is also director of the Program of Excellence.

School of Medicine scientists will look at ways to improve sophisticated real-time imaging systems and technology that can target radiation therapy precisely to compensate for a patient's breathing and other physiological processes, while using some techniques developed at the University of Maryland.

William F. Regine, MD, professor and chair, Department of Radiation Oncology, noted that his department's physicists have a history of innovation. "Our medical physicists have developed some of the field's most advanced techniques for improving the effectiveness and safety of radiation treatment. Intensity Modulated Radiation Therapy, Direct Aperture Optimization and Intensity Modulated Arc Therapy were all developed or perfected by University of Maryland physicists," he said.

A Baltimore businessman, Leonard Stoler, and his wife Roslyn have made a significant contribution to the new Program of Excellence. Mr. Stoler is founder and president of the Len Stoler Automotive Group. The Stolers are major supporters of the University of Maryland Marlene and Stewart Greenebaum Cancer Center and donated \$5 million for a state-of-the-art outpatient facility that opened in 2005.

The University of Maryland Department of Radiation Oncology ranks among the top radiation oncology programs in the nation in terms of research funding from the National Institutes of Health. The department has 11 clinical faculty members, 12 medical physicists and 11 radiobiologists.

Study Shows Wide-Spread Screening Increases the Frequency of Celiac Disease Diagnoses

People suffering from celiac disease

routinely wait for years to get an accurate diagnosis because the disorder causes a wide variety of symptoms and there is a lack of awareness of celiac disease among many primary care physicians. But a study by researchers at the Center for Celiac Research at the University of Maryland School of Medicine has found that when primary care physicians offer to test all patients with symptoms

of celiac disease, the diagnostic rate increases 32- to 43-fold. Early diagnosis is important to prevent serious consequences from celiac disease. Results from the multi-center study were recently published in the Am Journal of Gastroenterology.

"In countries where most people are of European ancestry, celiac disease is one of the most common lifelong disorders," said Alessio Fasano, MD, professor, Depart-

ments of Pediatrics, Medicine and Physiology, and director of the Center for Celiac Research. "In the United States, many cases remain undiagnosed because symptoms vary from person to person and because physicians have not been adequately trained in what to look for. However, a diagnosis means that patients can be advised to eat a gluten-free diet in order to stop the progression of celiac disease. If the chronic symptoms continue, patients are at risk of long-term complications such as anemia, infertility, osteoporosis or even cancer."

Celiac disease is a genetic disorder affecting adults and children. People with the disorder are unable to eat foods that contain gluten, which is found in wheat and other grains. Ingestion of gluten in people with celiac disease sets off an autoimmune reaction that causes the destruction of the villi in the small intestine. A previous study by the Center for Celiac Research found that nearly one out of

It is twice as common as Crohn's disease, ulceric colitis and cystic fibrosis combined

every 133 Americans suffers from celiac disease. It is twice as common as Crohn's disease, ulcerative colitis and cystic fibrosis combined.

"The projected number of people in the United Sta<mark>tes</mark> with celiac disease could be as high as three million, yet only a small fraction of these cases has been correctly diagnosed and treated," said Dr. Fasano. "For this reason, we undertook a multi-center, case-finding study using blood testing of adults who were seeking medical attention from their primary care physician. We wanted to know whether an active case-finding strategy could increase the frequency of diagnosis, and we also wanted to know the most common clinical presentations of the condition in primary care settings."

The study was conducted at 25 locations in the United States and Canada from 2002 to 2004. During the 12 months preceding the study, only 15 patients had been diagnosed with celiac disease out of 54,988 individuals seen by the participating practices.

For the study, any individual over the age of 18 seeking care from a physician at a study site was informed of the study and asked to participate. Those who volunteered completed a questionnaire assessing their risk for celiac disease. Those who indicated they had one or more risk factors were then eligible for the study. All at-risk individuals were provided information about celiac disease and were offered free blood testing. In total, 976 people were enrolled in the study.

"Celiac disease was diagnosed in 22 of the 976 enrolled patients," said Dr. Fasano. "In our study, the diagnostic rate increased from 0.05 percent to 2.3 percent. This is a conservative estimate, as more cases could have been detected among the 666 individuals who were eligible for the study but refused the blood

Additionally, patients experiencing intestinal symptoms such as diarrhea, irritable bowel syndrome, constipation and bloating, as well as non-intestinal symptoms such as thyroid diseases, iron deficient anemia and osteoporosis were at higher risk for celiac disease compared with the general population.

"Based on the results of this study, we strongly recommend that all individuals be screened by their primary care physicians for the large variety of clinical manifestations and conditions associated with celiac disease," said Dr. Fasano. "Those with one or more symptoms should have a blood test, and if positive, should be referred for definitive diagnosis by means of an intestinal biopsy. These results have implications that may result in better patient care, a more cost-effective approach to the diagnosis of celiac disease and a greater awareness among health-care professionals and the general public in North America."



Alessio Fasano, MD

What Dowe Do Graduate Program in Life Sciences (GPILS)

The University of Maryland School of Medicine wants the Graduate Program in Life Sciences (GPILS) to be the place where the best and brightest in the scientific world choose to study and teach. GPILS is well on the way to this goal, thanks to a dynamic new integrative curriculum, a thriving research enterprise, the use of the latest technology and innovative approaches to career development.

GPILS established an awards committee this year with the intention of recognizing the talents and contributions of graduate students, post-doctoral scholars and faculty members. Awards were presented on October 3. The winners:

Outstanding PhD Project Award:

Nate Cramer, PhD, Program in Neuroscience

Outstanding Post-doctoral Scholar:

Thomas Stalnaker, PhD, Department of Anatomy & Neurobiology

Outstanding PhD Scholar:

lustin Kerr, *Program in Neuroscienc*o

The Otani Award:

Rebecca Brady, PhD, Program in Molecular Microbiology & Immunology

Teacher of the Year:

*Gerry Barcak, PhD, MS, associate professor, Department of Biochemistry & Molecular Biology

* given nosthumously

Headed by Margaret McCarthy, PhD, assistant dean for Graduate Studies, GPILS offers research training in the biomedical sciences. It has a new Masters of Science in Molecular Medicine program as well as PhD programs in biochemistry, microbiology and immunology, molecular medicine, neuroscience and physical rehabilitation science. The focus of these programs is basic research, but they also emphasize the continuum from bench to bedside. The program's motto is "We make discoveries that matter."

Applications to GPILS increased by 85 percent between 2006 and 2007. More importantly, the quality of applicants increased, with the mean GRE

scores of incoming students increasing nearly 77 points in one year. "We clearly communicate our belief that our students' and post-docs' skills, novel ideas and potential are the currency we run on and value," said GPILS program manager Tom McHugh. He adds that the improving talent pool among students also serves to attract high-quality faculty to the school seeking to mentor them.

Another attraction for students

is the variety of ways in which they can pursue their learning. "We've really tried to raise the bar for graduate education," McHugh said. "Our students get all of their course materials, their PowerPoint presentations, their lecture notes and their pre-lecture required readings online. They just have to log in to a Website and it's all there

scanned and neatly organized for them. We also post an MP3 in case they want to place it on their iPod and listen later. And again, that's really been great for recruitment. Students are getting used to having all these resources at undergraduate institutions, but we're kind of at the forefront in carrying that technology over to PhD programs."

Students also have greater access to faculty these days. "They're no longer limited to one department or faculty member," McHugh explained. "And faculty have access to more students as well. In addition to meeting them in the core course, we offer professor rounds. Much like grand rounds at the medical center, our faculty do professor rounds, where they give a 30-minute talk about who they are and what their research is. Students also read faculty Websites, see faculty in classes and attend special lectures. And they do rotations, so before they chose a mentor—during the first year and a half to two years into their time here—they're not committed to a lab, they're doing rotations and experiencing different labs to find their niche."

Not that GPILS wants their students to be pigeon-holed. "Students who come here receive an education that enables them to do so much beyond the typical path of academia," said McHugh. "There are so many opportunities out there for them in biotechnology, scientific journals and even venture capitalism. To empower them to realize their degree is much more powerful than they had initially thought, we offer an alternate careers in science seminar where we attempt to bring in students who have varied research interests. It's been very well attended."

To learn more about GPILS, visit www.lifesciences.umaryland.edu/.

{MINI-MED SCHOOL}

2007 Class Sets Attendance Record



Students gather around Larry Anderson, PhD, and the human bones on display.

Nearly 200 students graduated from the School of Medicine's bicentennial Mini-Med School on October 3. A total of 230 people attended Mini-Med classes over the five consecutive Wednesday nights on which they were held. This year, diplomas were awarded by former dean Donald E. Wilson, MD, MACP, who launched Mini-Med School seven years ago. At the 2006 Mini-Med School graduation, 150 participants graduated. This year's 200 graduates are proof that the program is growing and more popular than ever.

As always, Mini-Med School earned kudos from its students. "This is my fourth year, and I absolutely love it," said Ilene Miller, who attended with friend Danna Poster. "I'll be back again next year." That praise was echoed by many of the other participants, who are already counting the days until the eighth annual Mini-Med School.

For some of the graduates, Mini-Med School is a family affair.

Rosia and Darrell Frazier attended every session with their three children, Devon, DeveReaux and Darrea. The Fraziers left with information that will help them care for the health of their family now and for many years to come. Reaching the children in the Mini-Med class was an important step on the road to lifelong good health and preventive medicine.

Offered as a public service by the School of Medicine, Mini-Med School is a series of tuition-free classes designed to help Baltimore-area residents improve their health and well being and learn about advances in medicine and medical technology. The 2007 program began on September 5 and was conducted by top physicians and researchers from the School of Medicine.

This year's topics included "200 Years of History at Maryland: A Historical Perspective" by Mickey Foxwell, MD;



The Frazier family proudly shows off the diplomas Dean Emeritus Donald E. Wilson, MD, presented to them.

anatomy by Larry Anderson, PhD; medication problems in older individuals by Nicole Brandt, PharmD, from the School of Pharmacy; multiple sclerosis by Walter Royal, MD; heart disease in women by Myung Park, MD; cancer of the female reproductive system by Neil Rosenshein, MD; palliative care and end of life issues by Doug Ross, MD, PhD; fibromyalgia by Ray Flores, MD; and organ donation and transplantation by Benjamin Philosophe, MD.

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For more information, please contact
Andrew Fulton at 6.1032 or anfulton@som.umaryland.edu