

JUNE 2010 VOL.11 No.10

DEAN'S MESSAGE: What's On My Mind

hat's on my mind this month is finding new ways to promote the excellence and accomplishments of our terrific faculty members. To that end, in February I established the Faculty Excellence Recognition and Awards Committee (FERAC), and appointed Curt Civin, MD, associate dean for research, and director for the Center for Stem Cell Biology & Regenerative Medicine, as committee chair.

The purpose of the FERAC is to identify our most distinguished faculty members and propose them for membership in prestigious societies, such as the National Academy of Science and the Institute of Medicine, or for special distinguished awards, such as the Lasker Award, Association of American Medical Colleges awards, and others. Nominating faculty for their well-earned honors was identified as one of the strategies in the School of Medicine's Strategic Plan Research Roadmap. FERAC will focus on very high level awards, while the departments will continue to focus on mid-level or junior faculty and departmental subspecialty nominations.

I believe it is important to find ways to recognize excellence in our faculty and ensure they are nominated for the awards and honors they deserve. In academic medicine, recognition by one's peers is one of the most meaningful acknowledgements a faculty member can receive. In addition, awards are valuable support for promotion and tenure. Recognition of our faculty for their outstanding contributions in teaching, research, clinical care, community service and administration enhances the School of Medicine.

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The FERAC has already held its first meeting, at which I gave the committee its charge. Because the nomination process is time

consuming, a Website, which will include a database of the relevant, available major national and international faculty awards, is being developed to post awards. We will keep you posted on the progress of the FERAC. In the meantime, I encourage all faculty to help us identify awards for which they and their colleagues may qualify.

In the relentless pursuit of excellence, I am

Sincerely yours,

E. Albert Reece, MD, PhD, MBA

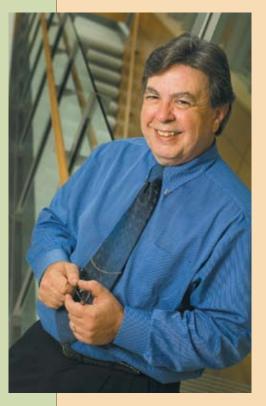
Acting President, University of Maryland, Baltimore John Z. and Akiko K. Bowers Distinguished Professor and

Dean, School of Medicine

Following is a list of committee members:

University of Maryland School of Medicine Faculty Excellence Recognition and Awards Committee (FERAC)	
Chair	Department or Program
Curt Civin	Associate Dean, Research; Department of Pediatrics
Members	
Claudia Baquet, MD, MPH	Associate Dean, Policy and Planning; Department of Medicine
Brian Berman, MD	Center for Integrative Medicine; Department of Family & Community Medicine
Maureen Black, PhD	Department of Pediatrics
Frank Calia, MD, MACP	Vice Dean, Clinical Affairs; Department of Medicine
Kevin Cullen, MD	Program in Oncology; Department of Medicine
Robert Gallo, MD	Institute of Human Virology; Department of Medicine
Arif Hussain, MD	Department of Medicine
Tony Lehman, MD, MSPH	Department of Psychiatry
Bruce Jarrell, MD, FACS	Executive Vice Dean; Department of Surgery
Jim Kaper, PhD	Department of Microbiology & Immunology
Myron Levine, MD, DTPH	Center for Vaccine Development; Department of Medicine
Claire Fraser-Liggett, PhD	Institute for Genome Sciences; Department of Medicine
Margaret McCarthy, PhD	Department of Physiology
Chris Plowe, MD, MPH	Department of Medicine
Elijah Saunders, MD	Department of Medicine
Tom Scalea, MD	Program in Trauma; Department of Surgery
Michael Shipley, PhD	Program in Neuroscience; Department of Anatomy & Neurobiology
Alan Shuldiner, MD	Program in Human Genetics; Department of Medicine
Lisa Shulman, MD	Department of Neurology
Stefanie Vogel, PhD	Department of Microbiology & Immunology
Staff	
Jeanette Balotin, MA, MPA	Assistant Dean, Programs and Planning
LaRondi Flowers	Executive Administrative Assistant I, Center for Stem Cell Biology & Regenerative Medicine

School of Medicine Mourns the Loss of Beloved Teacher Larry Anderson



Larry D. Anderson, PhD, professor, Department of Anatomy & Neurobiology, died unexpectedly at his home on May 15. He was 62 years old. With his passing, the School of Medicine has lost a most beloved teacher, mentor and friend.

A Michigan native, Dr. Anderson received his PhD from Wayne State University, and came to the School of Medicine in 1976 as an NIH post-doctoral fellow in reproductive endocrinology in the Department of Physiology. Two years later he taught a seminar in anatomy and shortly thereafter accepted a position in the Department of Anatomy, where he taught anatomy and structure & development to freshmen students for over 30 years.

For the last 10 years, Dr. Anderson served as course master for the structure & development course, and, as such, was the first faculty member students met when they entered medical school, becoming not only an educator and mentor, but a friend and father figure, as well.

Dr. Anderson received countless awards and honors, including being named the 2006 University of Maryland, Baltimore Teacher of the Year, chair of the

State Anatomy Board, and a charter member of the Carolyn J. Pass, MD '66 & Richard M. Susel, MD '66 Academy of Educational Excellence.

Dr. Anderson taught anatomy to nearly 4,500 Maryland students—well over half of our living alumni. He leaves behind a legacy of caring—it mattered greatly to him that each and every student be as well-prepared as possible to become a doctor. He once said, "It has been a privilege to be part of their medical education. I feel I want to do more than just teach them. I want to influence their outlook, not only about medicine, but about life."

Survivors include his wife, Shirley, son Brent and his wife Torey, and daughter Sheana, her husband Todd, and their children Raea and Ethan. Mrs. Anderson

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sent the following message from the Anderson family to the School of Medicine community: "In memory of Larry we wish to extend our heartfelt thanks to all who knew our special husband, father and grandfather. He touched many lives."

A gallery dedicated to Dr. Anderson, which includes photos submitted by students, can be found on the School of Medicine Facebook page. A scholarship fund in Dr. Anderson's name has been established to support students. If you would like to contribute to the scholarship, please go to www.fundformedicine.org and click on the "Make a Gift" button on the left hand side.

New Guidelines for Treating Parkinson's Disease

which affects the brain's ability to produce dopamine,

between the brain cells for motor control.

n international team of experts including William J. Weiner, MD, professor and chair, Department of Neurology, has developed new guidelines for treating "non-motor" symptoms of Parkinson's disease, symptoms that often go unrecognized but can seriously impact patients' lives. The new guidelines were published in the March 16, 2010, issue of Neurology®, the medical journal of the American Academy of Neurology (AAN), with Dr. Weiner as senior author.

People with Parkinson's disease often experience tremor, stiffness and slowness of movement—hallmark symptoms that may be the most outward signs of the disorder, a degenerative neurological condition that affects about one million people in the United States

and Canada. However, physicians now recognize that other Parkinson's symptoms

that do not specifically affect movement are very common, such as sleep dysfunction, constipation and sexual problems. These are often unrecognized and may cause just as much pain and discomfort as the more visible motor symptoms.

Dr. Weiner and his colleagues hope the new guidelines provide doctors, patients and their families with impor-

tant information on how to improve the quality of life for those afflicted with Parkinson's disease. The guidelines also point out the scarcity of research into some these overlooked effects of the disease.

"Many people with Parkinson's disease are reluctant to acknowledge or discuss problems with urination, constipation, sex and sleep. Physicians, patients and family members need to be aware that these non-motor symptoms can have a powerful effect on their daily lives and, just as important, there are treatments available that can help them manage some of these symptoms," said Dr. Weiner, who also directs the University of Maryland Parkinson's Disease and Movement Disorders Center.

Dr. Weiner served on an international panel of neurologists that did an extensive review of the best scientific studies to create these guidelines and specific drug recommendations for several non-motor symptoms. For example, for erectile dysfunction, the group suggested doctors consider the drug sildenafil citrate; for constipation, they concluded the drug isosmotic macrogol may improve that condition in people with Parkinson's disease.

For problems with excessive daytime sleepiness, the AAN review suggests modafinil may help patients feel more awake; however, the neurologists cautioned that one study showed people taking the drug may have a false sense of alertness, which may be a concern for activities such as driving.

"This review also points to the urgent need for more research into these under-diagnosed, non-motor symptoms. There are a lot of questions about what causes them as well

as the need to find ways to treat them. For example, we found insufficient evidence for treatments for many non-motor symptoms such as urinary incontinence and insomnia, and therefore could not make definitive recommendations," said Dr. Weiner.

The panel suggested research into a wide variety of non-motor symptoms,

including restless leg syndrome, nausea, urinary frequency, sweating, sexual dysfunction (in men and women), obsessive behaviors, decreased motivation and decreased concentration. Most people who have Parkinson's begin to develop symptoms in their late 50s or early 60s, although it can affect younger people. Researchers don't know what causes Parkinson's disease, which affects the brain's ability to produce dopamine, the neurotransmitter involved in the communication between the brain cells for motor control. Physical symptoms include rigidity of the limbs and difficulty initiating movement. Many patients have a tremor in the arms or the legs. There can also be emotional and cognitive symptoms, including depression and dementia.

To see the American Academy of Neurology guidelines or summaries designed for patients and their families, visit www.aan.com. For more information on the University of Maryland Parkinson's Disease and Movement Disorders Center, visit www.umm.edu/parkinsons.

Stimulus Funds Received to Renovate Cancer Center Labs

THE SCHOOL OF MEDICINE

received \$12.3 million in National Institutes of Health (NIH) grants to renovate research laboratories of the University of Maryland Marlene and Stewart Greenebaum Cancer Center and to build core facilitiescentralized areas of technology and expertise—that will provide key support services to cancer researchers. The funds are part of \$1 billion in funding made available by the federal government through the American Recovery and Reinvestment Act for construction or renovation of research facilities.

The NIH's National Center for Research Resources (NCRR) has awarded a \$5 million C06 construction grant to renovate laboratories on the eighth floor of the School of Medicine's Bressler Research Building. Another \$7.3 million G20 Core Renovation, Repair and Improvement grant will be used to consolidate existing core laboratories and build new facilities on the sixth and seventh floors of the Bressler Building.

These new core laboratories will provide "shared services" to cancer researchers and other scientists at the University of Maryland School of Medicine and other professional schools at the University of Maryland, Baltimore (UMB). Many of these support services benefit the cancer center, which is part of the School of Medicine and the University of Maryland

"These NCRR grants will enable us to build new, modern laboratory facilities for our researchers that hopefully will pave the way for major breakthroughs in cancer research. We are continually expanding our research program, and constructing state-of-the-art laboratories is critical to that effort," said Kevin J. Cullen, MD, professor, Department of Medicine, director, Program in Oncology, and director, University of Maryland Marlene and Stewart Greenebaum Cancer Center.

Dean E. Albert Reece, MD, PhD, MBA, said, "Our cancer center has been recognized by the National Cancer Institute for its scientific excellence, and our



faculty members conduct some of the most innovative and promising cancer research in the nation. These new laboratories will not only facilitate this work but also will help us to recruit more top-tier scientists to our cancer center."

The newly renovated space will be used by individual molecular and structural biology researchers and will also house core labs for confocal microscopy, proteomics, flow cytometry, tissue-culturing and tissue-related services such as histology and immunohistochemistry as well as the Genomics Core Facility, which provides cutting-edge genomic support for researchers.

"By consolidating core resources in common space, we will be able to support research in the same way that our clinicians take a multidisciplinary approach to caring for new patients," explained Nicholas Ambulos,

PhD, associate professor, Department of Microbiology & Immunology, and director, Genomics Core Facility.

The renovation on the eighth floor of the Bressler Building is scheduled to begin in November and will be completed in August 2011. The construction on the sixth and seven floors will begin upon completion of the eighth floor renovations and be finished by August

The University of Maryland Marlene and Stewart Greenebaum Cancer Center, which was named a National Cancer Institute-designated center in 2008, has more than 200 physicians and researchers and total research funding of nearly \$55 million. It also offers a full range of treatments for all types of cancer and is listed as one of U.S. News & World Report's top 50 cancer centers.

Intervention Appears Cost-Effective for Preventing Repeated Teenage Births

A computer-assisted, home-based intervention shown to reduce the risk of repeated births among low-income pregnant teenagers appears to do so at a reasonable cost, according to a new study led by Beth Barnet, MD, associate professor, Department of Family & Com-

munity Medicine. The study was published in the April 2010 issue of Archives of Pediatrics & Adolescent Medicine, one of the JAMA/Archives iournals.

After 14 years of steady decline, U.S. teenage birth rates increased in both 2006 and 2007, according to background information in the article. "Both first and subsequent births to U.S. teenagers produce substantial detrimental health, social and economic burdens," Dr. Barnet and her co-authors wrote. "Repeated childbearing during adolescence compounds the risk of academic failure for the teenage mother and increases the public costs associated with child welfare, criminal justice system involvement and long-term poverty."

Rapid subsequent births among teenagers occur more frequently among African American and Hispanic girls and have been difficult to prevent. Dr. Barnet and her colleagues assessed the costs associated with one intervention that, in a previous study, achieved a 45 percent reduction in

repeated births within 24 months among high-risk, low-income, predominately African American teenage mothers.

A total of 235 pregnant teenagers age 18 or younger were recruited at 24 weeks or more of gestation. Sixty-eight of the girls were randomly assigned to usual care. The rest were assigned to one of two home-based interventions conducted by

It is estimated that the hospital will

handle nearly 80,000 emergency depart-

ment visits a year by 2016, compared

with nearly 64,000 visits in 2008.

community outreach workers (87 received quarterly computer-assisted motivational intervention [CAMI] and 80 received the same intervention plus two additional visits by a counselor each quarter). To administer CAMI, trained counselors with laptop computers and customized software guided teens through a motivational interview-

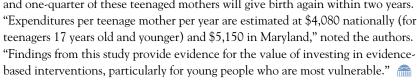
> ing process, an empirically validated method of behavior change.

After 24 months, teenagers receiving either intervention were significantly less likely to have another child. The average cost per teenager was \$2,064, and the estimated cost-effectiveness ratio per prevented repeat birth—the cost divided by the difference in the number of repeated births between the intervention and control groups—was \$21,895 before and \$17,388 after adjustment for related factors. Certain personal characteristics, including age and insurance status before pregnancy, moderated this cost-effectiveness.

"Only a handful of experimentally-evaluated teenage pregnancy prevention interventions have been subject to examination of costs and benefits," Dr. Barnet and her colleagues reported. "Our findings suggest that CAMI is at least as cost-effective as these programs and warrants replication in larger samples for consideration in that group."

Almost one-fifth of girls give birth by age 20, and one-quarter of these teenaged mothers will give birth again within two years.





Shock Trauma Center Breaks Ground

The University of Maryland R Adams Cowley Shock Trauma Center has begun construction of a new \$160 million, nine-floor trauma/critical care building that will significantly expand its ability to conduct patient care and research. The new facility will also boost the capacity of the adult and pediatric emergency departments and provide additional beds for intensive care patients.

The 140,000-square-foot building at the corner of Penn and Lombard streets will house 10 state-of-the-art operating rooms and 64 new and replacement critical care beds. The new addition will be connected to the exist-

ing Shock Trauma Center and the Harry & Jeanette Weinberg Building and will have a second landing pad on the roof for Medevac and Maryland ExpressCare helicopters.

Governor Martin

O'Malley and Congressman C.A. Dutch Ruppersberger joined Dean E. Albert Reece, MD, PhD, MBA, and University of Maryland Medical Center CEO Jeffrey Rivest at a groundbreaking ceremony on May 13. The ceremony also launched a major fundraising campaign led by Senator Francis X. Kelly with Cal Ripken, Jr., serving as the honorary chairman.

"The University of Maryland R Adams Cowley Shock Trauma Center serves thousands of patients every year with the most renowned trauma and critical care available," said Governor O'Malley. "This expansion will not only increase the Shock Trauma Center's capacity to serve the people of the region, but it also will create hundreds of jobs during its construction, and after its doors are opened. We're proud to have committed the funding necessary to make this expansion possible, as we continue to deliver results together to move our state forward."

The state has committed \$50 million over five years for expansion of the hospital. There is also a \$2.4 million federal appropriation for state-of-the-art equipment in the new operating rooms, and more federal support is anticipated.

The center currently serves nearly 8,000 patients annually in a 20-year-old building originally designed for 3,500 patients. The new building will enhance capacity to treat patients who need the highest level of trauma, emergency and surgical critical care. A steadily increasing demand for trauma and other emergency services, as well as surgical and critical care, is expected in the coming years. For example, it is estimated that the hospital will handle nearly 80,000 emergency department visits a year by 2016, compared with nearly 64,000 visits in 2008.

The new building—which has a total of nine floors (seven stories plus basement and ground levels)—is scheduled to be completed in 2013, although renovation of adjacent floors in the existing building could continue

into early 2014. Whiting-Turner, a Baltimore-based firm, is the construction manager for the project. It is expected the project will generate about 300 construction jobs and have a significant impact on the local economy. The goal

is to have 25 percent of the work performed by minority

The building was designed by Ballinger, a Philadelphia, Pa.-based architectural firm, in an "environmentally sustainable" way and is expected to meet criteria for LEED (Leadership in Energy and Environmental Design) certification from the U.S. Green Building Council as a "green" building. LEED certification means that a building is constructed to be environmentally responsible by reducing energy consumption and cutting waste, both during construction and when the building is in use. To meet LEED silver or gold standards, the project will incorporate a variety of planning, design and construction strategies that includes everything from high-efficiency lighting fixtures and bicycle racks to sophisticated heat-recovery systems and occupancy-sensing lighting controls.

The entrance to the building will be on Lombard Street, just west of the connection to the Weinberg Building. There will be a reception desk and waiting area for visitors and family members on the first floor. People coming to the expanded adult and pediatric emergency departments will use a separate entrance located in the Weinberg Building.

"The new building also will house a newly created National Trauma and Emergency Medicine Training



Artist rendering of the new Shock Trauma wing

Center," said Thomas M. Scalea, MD, Francis X. Kelly Professor of Trauma Surgery and director, Program in Trauma. "The training center will be a technologicallyadvanced simulation facility where we will be able to replicate conditions in the hospital and on the battlefield to enhance the skills of both civilian and military health care professionals," he added. The training center will have four simulation rooms and be located on the new building's first floor.

The third, fourth, fifth and sixth floors will each have 16 new private rooms grouped into intensive care units, with individual charting alcoves between the rooms that enable nurses to see the patients and carefully monitor their conditions.





Top: As keynote speaker Neal Baer (center) looks on. Dean Reece offers his best wishes to graduating student Matthew Kusher, Bottom: (L-R) Jason Cervenka and Jordan Celeste wait patiently for their turn on stage to receive their doctoral

Farewell to the Class of 2010

The Class of 2010 said goodbye to the School of Medicine and hello to their futures as physicians in a convocation ceremony at the Baltimore Convention Center Hilton on May 21. Hundreds of friends and family gathered to cheer on the graduates as they received their doctoral hoods and finally earned the right to put MD after their names.

Following the presentation of the student and faculty awards, alumni were acknowledged from the stage for the following awards: The Alumni Leadership Award, which went to Dr. Mort Rapoport, '60, Dr. Bernice Sigman, '60, and Dr. Allen Myers, '60; the Distinguished Service Award, which went to Dr. Selvin Passen, '60; and the Honor Award and Gold Key, to Dr. Elijah Saunders, '60, who is a professor in the Department of Medicine.

The keynote speaker was Neal Baer, MD, EdM, AM, a pediatrician who is probably better known for his work as executive producer of Law & Order: Special Victims Unit (SVU). Prior to joining SVU, he was an executive producer on the NBC hit drama ER, which garnered him several Emmy Awards nominations, five as a producer and two as a writer. During that same time,

he completed an internship and a residency in pediatrics at Children's Hospital, Los Angeles.

Dr. Baer, who graduated magna cum laude with a BA in political science from Colorado College, spent a year at the American Film Institute as a directing fellow in 1988. He holds a master's degree from Harvard Graduate School of Education and a master's degree in sociology from Harvard Graduate School of Arts and Sciences, where he focused on family policy. He attended Harvard Medical School from 1991 to 1996. He received the Jerry L. Pettis Memorial Scholarship from the American Medical Association as the most outstanding medical student who has contributed to promoting a better understanding of medicine in the media.

Dr. Baer's latest endeavor is a project entitled "The House is Small but the Welcome is Big," a documentary which shares the stories of HIV in Africa from the perspectives of mothers and children. The team provided fifteen mothers living with HIV, and later, fifteen AIDS orphans, with cameras and taught them basic photography skills in order for them to document their daily lives. The project began in Cape Town, South Africa, and continued in 2007 in Maputo, Mozambique, where the number of AIDS orphans has reached 440,000.

Office of Student Affairs Welcomes Neda Frayha, MD '06

The Office of Student Affairs (OSA) welcomes Neda Frayha, MD! Dr. Frayha will fill the position left by Gina Perez, MD, assistant professor, Department of Psychiatry, and assistant dean for Student Affairs, who is leaving the School of Medicine to pursue a career opportunity in Pennsylvania.

evenly between the OSA and the Department of Medicine, effective July 1. In her and write MSPE's (Medical Student Performance Evaluations) and letters of recommendation. The other fifty percent of her time will be spent in the Department of



Medicine's Division of General Internal Medicine as an associate director of the Residency Program. She also will see patients in clinic one day per week, and attend on the inpatient medicine wards six weeks

that I have finished residency training. I am beyond excited to work with Dr. Parker and her team in the OSA, and I look forward to working with the students during such rich,

located to the right after passing through the double doors from Howard Hall. All phone

Dr. Frayha is a Class of 2006 graduate of the University cine at the University of Maryland Medical Center. She then stayed on an extra year as a chief resident in the Department of Medicine.

'Call for Photos!

Have one of your photos published! The editors of SOMnews invite you to submit your favorite campus-related photographs for inclusion in a new feature we're launching in the September issue. Subsequent calls-for-photos will feature landscapes, vacation shots, portraits, etc.

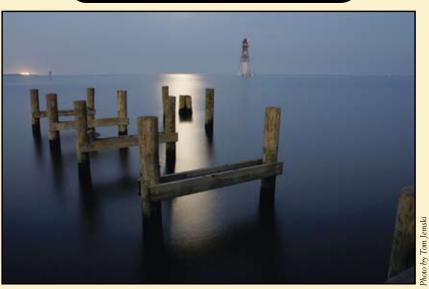


The photos submitted will appear on the School of Medicine Website. Twelve of the best (voted online by you and your peers) will appear in a print spread in SOMnews. We reserve the right to edit for content and quality. Please show off your talent by sharing your photos with us!

To participate, submit your photograph(s) to photos@som.umaryland.edu by June 30, 2010. You must be the photographer for the photos you submit. By submitting it, you acknowledge our right to use your photo in SOMnews and on the School of Medicine Website. Please put "SOMnews photo submission" in the subject line of your email. In the email, include all details about the photo, including your name, the names of any people in the photo, and a brief description of where and when it was taken. Also, please tell us what you like best about the photo. Photos must be at least 720x960 pixels (which rules out most cell phone shots).

Hurry and send us your submissions today!

PHOTO OF THE MONTH



Harvest Moon... Craighill Light, Chesapeake Bay

