

POST

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TRAUMA ONE

UF/Shands take life-saving care to the next level

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PHOTOS BY USA BALTOZER

UF Health Science
CENTER

Fat vs. Fit

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HURRICANES SPARE CAMPUS...

But take a toll on the home front

The concept of a long weekend, usually savored, took on an ominous meaning when Hurricane Frances blew through Gainesville and the Health Science Center campus over the Labor Day holiday. And since then, Jeanne visited, though at least she waited until after the Gator football game.

Having dodged a bullet by the name of Charley, university officials took Frances seriously and – all in all – emerged relatively unscathed. But the storm took a greater toll on individual staff, faculty and students. Many lost power for several days or had property damaged by water or windblown trees.

“Almost everyone in the Health Science Center has been affected in one way or another,” Douglas Barrett, M.D., senior vice president for health affairs, wrote in an e-mail to the HSC community after the storm passed. “Please know that we appreciate your incredible efforts to deal with this catastrophe, assisting each other, and maintaining your dedication.”

On the HSC campus, Frances hit the McKnight

HSC staff shares storm stories on pages 16–17

Brain Institute hardest, according to Eric Cochran, assistant director for the UF physical plant division. Water penetrated walls and flashing, damaging ceiling tiles and equipment. To make matters worse, water leaked onto the electrical switch that shifts loads to a backup generator, shorting it out. The normal power supply was never interrupted, but the red-colored outlets that supply both regular and emergency power were disabled for about 12 hours.

Ironically, the Brain Institute is one of the few nonclinical buildings equipped with backup power that can be relied on in such situations to protect materials requiring refrigeration.

“It was a freak accident,” said Douglas Anderson, Ph.D., interim director of the Brain Institute. “We won’t know the true extent of the damage until the

researchers pull all of the reagents out of the refrigerators and run assays. So far I’m not getting reports from people saying they had something delicate in a refrigerator or freezer and it was ruined.”

“We made a conscientious effort to reach people and plug in freezers,” Anderson said. “We removed material from disabled freezers and placed it into freezers with live plugs, but when the power is out 12 hours, I expect some losses.”

Elsewhere at the HSC, Frances damaged the Dental Sciences Building, blowing water between wall joints and flashing on the east facade. Water also seeped through exterior walls into the basement.

Cochran estimated the damage from Frances at \$70,000, although waterproofing to prevent future leaks would cost far more.

The 15 to 20 building and grounds crew members who pitched in immediately before, during and after the storm deserve special praise, said Tom Harris, associate vice president for administration.

“Those people put in a heck of a lot of time,” Harris said. “We appreciate that.”

The hurricane’s arrival at the end of a long holiday was fortunate for educational programs. Many students were gone and classes were canceled Sept. 7. Providing clinical services, however, was an expectation.

Jane Schumaker, chief executive officer of the UF Clinics, said her managers prepared all week for Frances and then worked the phones over Labor Day to determine whether clinics could open the next day and to communicate that information to patients. Of more than 40 clinics, only six could not open due to loss of power, debris in parking lots or inaccessibility from fallen trees or water. Only one of those sites was closed Sept. 8. Staff showed up for work Sept. 7, even though many of their own homes were damaged or without power.

Schumaker said Hurricane Charley served as a helpful dry run for Frances, and Frances was a wet run for Jeanne.



Steam escapes from a broken pipe that supplies the McKnight Brain Institute on the morning of Sept. 7. Ken Combs and his crew from the Physical Plant Department repaired it in short order under adverse circumstances.

— Photo by Wayne Cope
LMT Videoconferencing Technician
HSC Teaching Laboratory Resources

“We refined our Charley planning for Frances,” she said. “And if Ivan had come our way, we’d have done better yet. We learned a lot about communication with providers, as well as some important facilities lessons.”

At the Student Health Care Center, a campus-based patient-care service under the auspices of the HSC, staff kept the facility open 24 hours a day for four consecutive days to serve UF students and employees. Staff worked 12-hour shifts, although “there were many who stayed for the duration,” said Toni Ratliff, associate director. Nursing and mental health staff also worked in the two campus-based shelters.

— Tom Fortner

PARKING IS TRICKY ON THE FRIDAY BEFORE HOME FOOTBALL GAMES

Be aware of Friday evening parking restrictions. Before home football games on Oct. 9, Oct. 16 and on Homecoming on Nov. 13, vehicles must be moved from some lots by 6:30 p.m.

If vehicles are not moved, they risk being towed from the following lots:

- ⊗ Drill Field (O'Connell Center — main lot and first floor of garage)
- ⊗ Track Parking Lot
- ⊗ Johnson Hall Lot
- ⊗ Women's Gym Lot
- ⊗ Lot across from the Reitz Union (Engineering Sciences)
- ⊗ West and East Murphree Lot
- ⊗ Commuter Garage on North-South Drive — top level

The areas listed below are reserved for the Motor Home Program. All vehicles must be moved from the following areas by 6:30 p.m. each Friday before the game days listed above. If vehicles are not moved, they risk being towed:

- ⊗ Commuter Lot
- ⊗ Pony Field Lot
- ⊗ Commuter Lot across from Transportation and Parking Services
- ⊗ Orange Decal Lot behind Transportation and Parking Services
- ⊗ All Decal Triangle Lot by Archer Road

The top level and ramp leading to the top level of Garage 5 will be closed by 12:01 a.m. each Friday night before the game days listed above. These spaces are reserved for the University Athletic Association.

Call Transportation and Parking Services at 392-8048 with any questions.



SLEEP (OR TRICK OR TREAT) A LITTLE LONGER

Daylight saving time ends Sunday, Oct. 31. Set your clocks to "Fall Back" one hour, sleep a little longer Saturday night and wake up ready for Halloween on Sunday.

ANIMAL WELFARE WORKSHOP

On Oct. 12–13, the HSC Libraries will host a workshop on Meeting the Information Requirements of the Animal Welfare Act. It will help researchers create successful grant applications by teaching strategies for database searching and reviewing alternatives to animal research.

The registration deadline is Oct. 6 and space is limited. Register at www.library.health.ufl.edu/forms/classreg_AWIC04.htm.

This seminar is cosponsored by these UF organizations:

- * Office of the Senior Vice President, Health Affairs
- * Office of the Vice President for Research
- * Institutional Animal Care and Use Committee
- * Genetics Institute
- * HSC Libraries

MEDICAL FELLOWSHIP DEADLINE

College of Medicine faculty members can explore the world of medical education research while improving their teaching skills through the Master Educators Fellowship, formerly known as Master Educators in Medical Education. The 18-month certificate program includes classroom instruction, hands-on practice and an education research project chosen and developed by each participant. The deadline for application is Oct. 29, and the program begins in January 2005. Contact Kyle Rarey, Ph.D., or Cari Hernandez, M.D., at 392-5998 for information. The program welcomes both Gainesville and Jacksonville faculty.

Submit Post It news to dtrunk@ufl.edu

SUPERIOR ACCOMPLISHMENT AWARDS NOMINATION IS UNDER WAY

Know someone superior?

UF's Superior Accomplishment Awards Program, which recognizes TEAMS and USPS employees who have contributed outstanding service in their fields during the academic year running from of Aug. 1, 2003 to July 31, 2004, is calling for nominations.

Please don't miss this chance to recognize those among us who make the extra effort to contribute. This year's nomination period began Sept. 9 and runs through Oct. 15.

Division-level winners each receive \$200 along with a certificate of appreciation and memento coffee mug. Each division winner then is eligible to be selected for one of six university-level awards of \$1,500 each or one of eight \$500 awards. In addition, each of the six category winners and his or her guest will be invited to attend a UF football game in the President's Box.

For information, nomination criteria and nomination forms, visit www.hr.ufl.edu/recognition/saa.

Nomination packets should be routed through your respective college committee member:

- College of Dentistry — Cheryl O'Quinn
- College of Public Health and Health Professions — Bonnie Pommeroy
- College of Medicine — M. Louise Brophy
- College of Nursing — Joan Hill
- College of Pharmacy — Terry Whisenant
- College of Veterinary Medicine — Ron McKeever
- Office of the Senior Vice President, Health Affairs — Dennis Hines

UF's Superior Accomplishment Awards program was developed to recognize deserving university employees and is coordinated by the Division of Human Resources.

DENTISTRY'S NEW VIEW

Kathy Cannon (from left), Marie Taylor, Dr. Shannon Holliday and Dr. Aaron Carroll enjoy a coffee break on the seventh floor of the dental tower in front of a newly installed window. After nearly a year of construction, workers recently removed scaffolding outside and safety barriers inside the building to reveal windows on the fourth through eleventh floors of the dental tower. The upper-floor windows feature spectacular views of the Health Science Center and university campus, including a clear view of the stadium scoreboard. "Last Saturday, they were showing the game live on the scoreboard TV, and we could've sat here and watched the game if we'd wanted to," laughed Taylor, a research coordinator in the College of Dentistry's department of orthodontics.



PHOTO BY LINDY BROUILLEY

CHAIN REACTION

College of Pharmacy event supports the corner drugstore

By Linda Homewood

The corner drugstore, commonly thought of as an American icon of the past, struggles to survive today with increasing market competition in pharmaceutical sales. The College of Pharmacy hopes to help preserve the future of independent ownership with the creation of the Institute for Pharmacy Entrepreneurs.

A three-day workshop designed by business and financial experts, under the guidance of Earlene Lipowski, R.Ph., Ph.D., an associate professor in the College of Pharmacy, uses a combined approach of educating and networking to facilitate independent pharmacy ownership. The workshop, offered for the first time this August at the college, was designed with two curriculum tracks. One track benefits pharmacists who are current business owners and the other track targets recent graduates and pharmacists working for others who may be interested in becoming independent pharmacy owners.

Theresa Wells-Tolle, president of the Florida Pharmacy Association, worked with business leaders and College of Pharmacy educators for the past year to devise a quality program that provides business education to pharmacists and students.

As an independent owner of Bay Street Pharmacy in Sebastian, Fla., Wells-Tolle identifies a major issue that community pharmacy owners face.

“What happens to their business as they approach retirement? They want to know how their business can go on as the neighborhood drugstore without being bought out by national drugstores,” Wells-Tolle said.

The National Community Pharmacy Association reports that between 1991 and 2001, the number of all retail pharmacies remained relatively unchanged, with about 55,000 drugstores in the United States. During that period, however, the number of privately owned stores decreased 32 percent. Chain outlets accounted for about 12 percent of the shift in market share,



PHOTO BY LINDA HOMEWOOD

Pharmacists from the southeastern United States interested in independent ownership, attend UF College of Pharmacy's Institute for Pharmacy Entrepreneurs weekend workshop.

while the remaining 20 percent of the market was taken by mass merchants and supermarkets adding pharmacy departments to their stores.

Workshop presenter Robert H. Buchanan, J.D., from PCE Stratus Valuations, notes that when a large mass-merchant store like Wal-Mart appears, it usually displaces more than one small drugstore in the area. However, Buchanan points to an industry trend, new since 2001, in which independent pharmacies are beginning to make a comeback and regain their share of the market.

“As a patient-care service, there is a demand for the community pharmacy with its personalized service,” Buchanan said. “They aren’t as easily replaced as the local hardware store and this creates

exposed to many career opportunities in clinical experiences and in internships for retail pharmacies, but they typically don’t learn about their own business opportunities, she said.

Designed to meet the needs of working pharmacists, the workshop was planned as a weekend event. The curriculum, offering continuing education credit, teaches pharmacists how to implement a business and financial plan, make “build vs. buy” decisions, prepare a succession plan, and develop exit strategies.

With its first-time offering, Institute organizers hoped to attract at least 50 participants who could be split into the two curriculum tracks. The response was so favorable that registration was closed after 86 pharmacists from Florida, Georgia and Alabama signed up, Lipowski said.

Dinner and evening social activities were included in the weekend so that pharmacists could begin to develop networking relationships and collaborations for possible future business ventures, crucial to the succession plan of independent ownership.

“One of the long-term goals of the institute is to facilitate interaction between the two groups — buyers and sellers — to see if this might be a way to help them connect for business opportunities and exchanges,” Wells-Tolle said. **P**

The three-day workshop designed by business and financial experts uses a combined approach of educating and networking to facilitate independent pharmacy ownership.

a great opportunity to keep independent pharmacies alive in the community.”

Wells-Tolle sees education about the business side of the pharmaceutical industry as the key to exploiting this new opportunity. Students are

UF MEDICAL, DENTAL STUDENTS RAISE THE BAR WITH HIGH TEST SCORES

UF medical and dental students are doing their part to help boost the Health Science Center's national recognition, posting impressive scores on recent required exams.

For the second year in a row, College of Medicine students earned the school's highest-ever scores on the United States Medical Licensing Examination Step 1.

The class of 2006 scores averaged 231, up four points from last year. The national average, though not yet compiled, is expected to be about 217. UF also boasted a pass rate of 100 percent, and 25 percent of the class had scores in the top 10 percent of national scores.

"It's incredible, I'm almost speechless," said Robert Watson, M.D., College of Medicine senior associate dean for educational affairs. "I can only conclude that it's a combination of good students, good faculty, good teaching, good curriculum."

All U.S. medical students are required to take the Step 1 exam at the end of their second year of medical school, Watson said. It's the first of three USMLE exams students must pass to become licensed physicians. Last year's UF average score was 227.

College of Dentistry 2004 doctor of dental medicine graduates achieved the highest first-time pass rate since 1998 on the Florida Dental Licensure Exam this summer. With 65 of 70 UF candidates who

took the exam passing, the graduates accomplished a "first attempt" pass rate of 92 percent, the highest since 1997, when 97 percent of UF grads passed.

The achievement of the class of 2004 on the exam exceeded the college's goal of an 85 percent "first attempt" pass rate for UF graduates and surpassed the unofficial statewide passing average for the June exam, estimated to be 78 percent.

Associated Professor Carol Stewart, D.D.S., the college's licensure board liaison, credits the 5.5 percent improvement over the pass rate of the college's 2003 pass rate to "enhanced preparation and a better understanding of performance expectations" attributed to the college's innovative "mock board" course.

The Senior Mock Board Course is a class all D.M.D. students must pass before graduating. The course uses identical criteria to test students under the same pressures they would experience during the actual board exam. By the time graduates take the real board exam, many may have already taken two "mock boards" in preparation.

"They know exactly what they need to do at every step of the examination," said Associate Dean for Education Robert Primosch, D.D.S., of the students. "I think that gives them an advantage."

— Tom Nordlie and Lindy Brounley



College of Medicine student Jennifer Rehm, class of 2006, studies in the HSC library.

HSC STUDENTS PARTNER TO PREVENT SUBSTANCE ABUSE

A staggering number of American teenagers have experimented with drugs or alcohol — all before graduating from high school.

According to the U.S. Department of Health and Human Services, 70 percent of adolescents have smoked cigarettes, 81 percent have drunk alcohol, 47 percent have used marijuana and 24 percent have tried other illegal drugs.

The good news is that substance abuse education helps prevent teenage drug abuse, especially if the person offering the education is someone to whom teens can relate.

That's the idea behind the Partners in Prevention of Substance Abuse, or PIPSA, initiative, sponsored by UF's North Florida Area Health Education Centers Program.

Each fall semester since 1998, PIPSA involves 500 to 600 students from the Health Science Center colleges of Dentistry, Public Health and Health Professions, Medicine, Nursing, Pharmacy and Veterinary Medicine in substance abuse education and outreach. Professional students participate in group lectures about substance abuse diagnosis and management, addiction, adolescent development and classroom management.

Armed with persuasive strategies and sobering statistics, the students team up Oct. 23–31 to take the PIPSA message into middle-school classrooms during National Red Ribbon Week for a Drug-Free America. This year, more than 75,000 adolescents in the community will hear the PIPSA message.

The message is more than "Just Say No." It's about thinking through and making healthy choices, even in the face of intense peer pressure, that will last a lifetime.

Venita Sposetti, D.M.D., assistant dean for Admissions and Financial Aid and an associate professor of Prosthodontics, helped found PIPSA.

"For our first semester dental students, PIPSA provides an 'Aha!' moment," Sposetti said. "This is their first experience in the role of being a health care provider. They discover that just by virtue of being dental students they have something to say and these kids will listen. So the PIPSA program is an important part of our students' professional development."

MANNEQUIN MEDICINE IN THE E. R.

His pulse races. His breathing slows. His temperature skyrockets. Welcome to mannequin medicine.

Fourth-year medical students have swapped a day in lecture for an interactive encounter with an adult male mannequin that mimics a variety of scenarios patients might display in department of emergency medicine's new Human Patient Simulator laboratory. The students interact with the mannequin, which responds like a living patient would to trauma or treatment.

The department of emergency medicine developed its new simulator lab over the past few months with a system purchased from Medical Education Technologies Inc. The technology was developed and patented by UF.

The mannequin not only mimics symptoms but also responds directly to treatment administered by trainees, including oxygen, intravenous drugs and defibrillation. A control room technician runs the mannequin through its computer-programmed scenarios. When a student conducts a physical exam, queries the "patient" or administers medication, the technician programs the mannequin to respond to the treatment and acts as its voice. The student gauges what happens to the "patient" by watching changes in its vital signs.

"The simulator lab makes the experience as close to the real thing as possible," said Ken Marx, business manager for emergency medicine. "The more the student has to do, to recreate the clinical experience as realistically as possible, the better. So when they go into the clinic for real, it is not as big a leap."

Medical residents also train on the simulator. Students are sometimes videotaped as they interact with the mannequin and can review the tapes as a kind of medical instant replay.

Marx said the department also wants to research the educational effectiveness of the simulator to continue to improve and standardize student-patient scenarios.

BIKERS BEWARE

Motorcycle noise may cause hearing loss

By Jill Pease

When the band Steppenwolf sang of heavy metal thunder in “Born to be Wild,” their classic ode to the freewheeling biker lifestyle, they equated rocking out to the new electric music of their time with the ear-pounding experience of riding a motorcycle.

The notion that loud music can damage hearing is common knowledge, but the noise produced by motorcycles poses similar risk to riders, UF experts caution.

In a pilot test of 33 motorcycles, audiologists at the College of Public Health and Health Professions have found nearly half produced sounds above 100 decibels when throttled up — equivalent in intensity to a loud rock concert or a chain saw. The ongoing UF effort is the first scientific study aimed at producing quantifiable data on noise levels for motorcyclists.

The National Institute for Occupational Safety and Health cautions that exposure to noise at 100 decibels is safe for only 15 minutes. Permanent hearing loss can occur with prolonged exposure to any noise measuring 85 decibels or above.

“Almost all of the motorcycles we tested reached action-level noise, which in the workplace would require ear protection,” said Joy Colle, one of the study’s researchers in the department of communicative disorders. “The loudest bike we tested measured 119 decibels with the engine revved, and the recommended exposure time at that level is only 11 seconds.

“Potentially, the vast majority of motorcyclists could be exposed to dangerous levels of noise,” Colle said.

More than 5 million Americans are registered motorcycle owners, according to the U.S. Department of Transportation. Of the 28 million Americans who have some degree of hearing loss, about one-third can attribute their hearing loss to excessive noise exposure.



PHOTO BY USA BAITOZER

Audiology graduate student Andrea Pierce uses a noise dosimeter to measure the loudness of Dano Roller’s motorcycle in downtown Gainesville. In a pilot test of 33 motorcycles, the UF team found that nearly half the bikes produced sounds above 100 decibels when throttled up. Exposure to 100 decibels of noise is considered safe for only 15 minutes before permanent hearing loss can occur.

In addition to sound levels, the UF researchers are noting the make, model, engine size, year manufactured and any modifications to the engine and exhaust systems of each motorcycle. They will then develop an online database to provide motorcyclists with bike-specific data on noise exposure so riders can make informed decisions about hearing protection.

“At this time, if consumers were to try to find a measure of how loud their motorcycle is, they’d find misinformation,” Colle said. “An Internet search for motorcycle noise levels will yield a 20- to 25-decibel range, with the interested motorcyclist coming away with no useful information. That’s not good enough.”

In the UF study, noise levels were tested at riders’ ear levels from stationary motorcycles when idle and throttled up. Further research should include measurement of noise levels when the motorcycles are driven at cruising speeds to account for the effects of wind noise, Colle said.

Although noise-induced hearing loss is

permanent, it is entirely preventable, Colle said. Motorcyclists should limit the amount of exposure they have to high-decibel levels, and although motorcycle helmets don’t provide any significant protection against noise, inexpensive foam earplugs, available at drug stores, can reduce sound levels by 20 decibels to 25 decibels.

Riders should pay attention to the warning signs of noise-induced hearing loss: a ringing sound in the ears immediately after exposure, and hearing voices and other sounds as muffled.

“These new data about the sound levels to which motorcyclists are exposed will help audiologists and others who work in hearing conservation advise their clients about healthy choices when it comes to how long to ride and when to wear hearing protection,” said Ted Madison, president of the National Hearing Conservation Association. “Consumers may also benefit directly if they have better information about the sound levels created by motorcycles when they go to buy or modify their bikes.” **P**

UF RESEARCHERS URGE CAUTION WITH SUNSCREEN-DEET COMBINATIONS

Products combining sunscreen and the bug repellent DEET can be convenient, but in studies in mice UF researchers found the mixtures greatly boost absorption of the chemical through the skin.

“DEET has an unbelievably superb safety record; it’s been used on millions of people and it’s critical that people don’t get the wrong message,” said Edward A. Ross, M.D., an associate professor of medicine and the lead author of a paper published in *Drug Metabolism and Disposition*. “People should continue using DEET because of the very real risks of mosquito-and insect-borne illnesses, such as West Nile encephalitis, but use it in the lowest effective concentration, especially when you use it in combination with other topical lotions or in children.”

Compared with adults, children may absorb more DEET because their skin surface area is proportionally larger relative to their weight, Ross said. DEET, the synthetic chemical N, N-diethyl-m-toluamide, was developed in the 1950s for use by military personnel. Today it is the active ingredient in many consumer products, in concentrations ranging from 7 percent to 100 percent.

UF researchers said their findings call attention to the potential “unappreciated toxicity” of mixtures of chemicals traditionally studied individually and suggest manufacturers should reassess their sunscreen/DEET formulations. In the study, they applied DEET alone and commercial sunscreen

products containing DEET to skin samples taken from hairless mice. They used newer instrumentation that can detect multiple drugs passing through the skin simultaneously and measured the chemical’s penetration. In the presence of the sunscreen, DEET passed through the animals’ skin three times faster, rapidly boosting its concentration, Ross said. The researchers also used



VIDEO STILL BY DAN ESCHENFELDER

Eva Egensteiner applies insect repellent containing DEET to her 3-year-old son Julian McCoy.

“microemulsion” products designed to slow absorption but found they were only minimally effective at best.

“The products we tested were not the magic answer to the problem,” Ross said. “Overall, this is a case where a little bit is good and less is better, not more. The technology is so simple and pharmaceutical companies already test skin absorption. This is a call for companies to test these common topical compounds together instead of individually. These can be complex interactions.”

The American Academy of Pediatrics advises that DEET should not be used in a product that combines the repellent with a sunscreen, as sunscreens must be repeatedly applied because they wash off, and repeated applications may “increase the potential toxic effects of DEET,” which is not water-soluble and can last up to eight hours.

The academy recommends using the lowest concentration of DEET possible and says DEET should not be applied more than once a day. In addition, the group does not recommend using DEET on children under 2 months and suggests applying it to older children’s clothing, not their skin.

The complications of DEET overexposure physicians are most concerned about in children are subtle, mild, temporary and reversible behavioral effects, such as headache or confusion, Ross said.

— Melanie Ross

ALPHA-1 GENE THERAPY SAFELY TESTED IN FIRST THREE PATIENTS DURING UF CLINICAL TRIAL

A gene therapy to combat one of the most common hereditary disorders, alpha-1 antitrypsin deficiency, appears safe in the first three patients to participate in a landmark clinical trial, UF researchers have found.

“It is very reassuring to have data from human patients that suggests that they are not producing antibodies to fight the therapeutic gene product,” said Terence Flotte, M.D., a pediatrician, geneticist and microbiologist with UF’s College of Medicine and a member of the Powell Gene Therapy Center and the UF Genetics Institute.

Flotte, who presented the findings in September at the international Parvovirus Workshop in St. Petersburg, said the trial represents the first time gene therapy has ever been tested in people with alpha-1 antitrypsin deficiency, a disorder that can cause liver and lung disease in children and adults.

About 100,000 Americans have alpha-1 antitrypsin deficiency, according to the Miami-based nonprofit Alpha-1 Foundation. The trial is funded by a \$1.4 million National Institutes of Health grant, but the Alpha-1 Foundation played a key role in helping to build the infrastructure to support the research, Flotte said.

The experimental strategy used in the UF study relies on a molecular vehicle known as the adeno-associated virus, or AAV, which already exists without symptoms in many people. The main purpose of the phase 1 study is to test the

safety of the therapy, a crucial step that must take place before determining the therapy’s effectiveness and the best dose to treat patients.

“We don’t show that we are at a final treatment dose, but we are defining the limits of the dose we can work with and can begin to see the effects,” said Flotte, who works closely with Mark Brantly, M.D., a UF professor of medicine and of molecular genetics and microbiology. “There was some immune response to the AAV capsid, the outer protein shell of the virus, but that was expected and shouldn’t affect the gene transfer.”

In this phase of the trial, physicians inject three consecutive doses of 1.1 milliliters of the virus containing the gene for alpha-1 antitrypsin into each patient’s upper arm. The procedure takes less than 30 minutes. Since the trial started in late March, three patients have been injected with the gene therapy agent. In all, 12 patients will receive the therapy.

“Without the Alpha-1 Foundation, this work could never have begun so quickly,” Flotte said. “There are millions of dollars of basic costs that had to be met before we could do a phase 1 trial. The gene therapy facility at UF had to be upgraded with the personnel, supplies, equipment and environmental monitoring necessary to produce the reagent and meet Food and Drug Administration certification.”

— John Pastor

FAT AND FIT TRUMPS LEAN AND LAZY

Lack of physical fitness poses weighty problem for heart health

By Melanie Fridl Ross

Women who are fat yet fit appear less likely to suffer a heart attack or die than those who are slender but slothful, UF researchers reported in the *Journal of the American Medical Association*.

The study suggests body weight may not be as crucial as regularly pounding the pavement with a brisk walk, staking out a spot at the gym or simply doing household chores. But don't view the news as a reason to soothe a snack attack with fatty favorites or to pile on a second hefty portion at mealtime — it's best to aim for trim and in shape, says cardiologist Timothy R. Wessel, M.D., an investigator at UF's Health Science Center and the report's lead author.

"Our study accepts the fact that obesity is a cardiovascular risk factor," Wessel said. "It is and has been shown to be so in multiple studies. But what this study suggests is that simply modifying weight without modifying your physical fitness level is not addressing a perhaps more important risk condition for cardiovascular events; that is, poor physical fitness."

The researchers say their results clearly emphasize the need to assess an individual's activity level as a routine part of the medical exam. A 12-item questionnaire used in the study to assess the women's perceived level of fitness is a powerful tool that easily could be adopted by physicians to identify patients prone to future problems, said Carl J. Pepine, M.D., chief of cardiovascular medicine at the College of Medicine and the paper's senior author.

The UF study is important because it shows that a patient's own perceived physical activity level alone appears to predict heart disease risk, even after accounting for weight, traditional cardiovascular risk factors and body measurements, such as body mass index, waist circumference or waist-to-hip ratio, Pepine said.

"There's no doubt that increasing levels of obesity are associated with many potential medical problems over time, not the least of which are cardiovascular disease,

diabetes and hypertension. The latter conditions can lead to serious heart disease," Pepine said. "But it seems from this research that at least women may be able to negate some of the adverse effects of obesity and being overweight by increasing their levels of fitness."

UF researchers studied about 900 middle-aged women who were enrolled in the National Heart, Lung and Blood Institute-sponsored Women's Ischemia Syndrome Evaluation, or WISE. WISE seeks to define the prevalence, extent, severity and complexity of heart disease in women and also aims to find ways to better predict it.

All the women had symptoms suggestive of reduced blood flow to the heart. About 41 percent of study participants were obese, defined as a body mass index greater than or equal to 30; all told, three-quarters were overweight.

The women completed a questionnaire that assessed measures of fitness, including whether they participated in light sports, could climb a flight of stairs, carry groceries up stairs or run a short distance.

The UF researchers found that lower fitness levels were associated with a higher-than-expected rate of heart attack, stroke, hospitalization and death during follow-up. Overall, about half the study participants developed heart-related adverse events. Of those, about 28 percent of the women classified as obese yet fit experienced heart problems, just slightly more than the 24 percent of women who were lean and fit. In contrast, a startling 43 percent of those who were lean but unfit developed events, comparable to the 42 percent of those who were obese and unfit who also fared poorly.

"The suggestion is that it's actually better to be in shape even if you are obese. If you were out of shape, being thin did not offer protection," Wessel said.

P



Yolanda Hendley,
college of medicine,
class of 2007

PHOTOS BY LINDY BROUNLEY

ARTFUL PROSTHETICS GIVE PATIENTS A FRESH FACE FOR LIFE

Dr. Glenn Turner (left) and anaplastologist Robert Mann display a range of prostheses parts they have constructed for patients — mimicking eye color, skin color and tone, hair color and congruity to existing features.

By Lindy McCollum-Brounley

As any artist familiar with working with live models understands, it's not always easy for a person to pose unmoving for minutes on end. Yet model Robert Seaman is riveted to his chair, watching with such intensity he almost seems to hold his breath as the artist before him applies confident brush strokes to the unusual canvas balanced on his fingertips.

Robert Mann's brush stills for a moment as he pauses to gaze into Seaman's face. Then he resumes his brushwork — delicate, liquid-blue strokes on a porcelain-white canvas.

Mann is an anaplastologist, a medical artist who specializes in the preparation and fitting of prosthetic devices, at the College of Dentistry. His canvas on this day is a remarkably lifelike rendering of Seaman's sky-blue eye. Even tiny red blood vessels have been represented in the white of the prosthetic eye, making the object appear so real that most people would never guess otherwise once it is placed in the empty right eye socket of Seaman's smiling face.

Seaman is one of about 80 patients a year who benefit from the artistry and surgical expertise of dentistry's Maxillofacial Prosthetic Services, a division of the college's department of prosthodontics directed by Associate Professor of Prosthodontics Glenn Turner, D.M.D.

Turner oversees the division's efforts in creating lifelike prostheses for patients missing eyes, noses, ears, cheeks, chins — even fingers — because of cancer surgery, traumatic injury or congenital birth defects. He's one of a handful of maxillofacial prosthetic specialists nationwide who work to restore the one aspect

of personal identity most of us take for granted — our facial features.

As part of an interdisciplinary surgical team, Turner helps prepare patient tissues to support prostheses. This preparation can include sculpting and smoothing remaining tissues, implanting metal rods onto which the prostheses clip or even implanting magnets to grip those embedded within the prostheses.

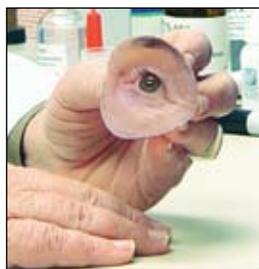
The techniques used to support and fabricate the prostheses have to be innovative, Turner said, to give patients with varying degrees of disfigurement realistic-looking artificial features.

Gunshot wounds, for instance, have very ragged edges that are difficult to match with the edges of a prosthesis. Cancer surgery survivors may have entire sections of bone and tissue removed, leaving sinus cavities exposed or very little bone structure in place to support a prosthesis.

"One thing that every maxillofacial prosthetic patient has in common is that not all tissue is present and the anatomy of remaining tissue varies widely," Turner said.

Each prosthesis has to be a completely custom job, but Turner and his team don't stop at fabricating and fitting prostheses — they also monitor healing, disease recurrence and teach patients how to properly care for and clean their wounds and their prostheses.

"We are not changing any of the laws of physics, but we are having to apply them in unique ways to construct prostheses that work for patients," Turner said. "What we really do is make fancy bandages." **P**



TAKING TRAUMA CARE TO THE NEXT LEVEL



PHOTOS BY LISA BALDWIN

Dr. Lawrence Lottenberg in the new 24-bed trauma unit.

By Tom Nordlie

In many ways, North Central Florida is an ideal place, blessed with warm weather and natural beauty.

But even the most idyllic place does not spare residents and visitors from high-speed car accidents and other tragedies. The result is trauma — injury caused by external force — widely cited as the leading killer of Americans ages 1 to 44.

For years, people in North Central Florida who suffered grave injuries were flown by helicopter to trauma centers in Jacksonville or Orlando, the distance increasing the chances their lives would slip away before hospital treatment could begin.

That's about to change.

After a yearlong effort by UF's Health Science Center and Shands at UF, the state granted Shands provisional Level 1 trauma center status in Oct. 1, for both adult

and pediatric cases. Formal designation is contingent on a favorable review of the center's performance by the state Department of Health, and could happen as early as July 2005.

"Clearly the communities of Gainesville and the surrounding areas have felt they've needed a Level 1 trauma center for some time," said Douglas Barrett, M.D., UF senior vice president for health affairs. "So we've had a sense of obligation that this is something we need to do."

For years, the emergency department of Shands at UF has provided excellent trauma care to many patients, but the most serious cases had to be transported to the nearest centers, which kept trauma-only facilities and treatment teams ready around the clock.

Florida's trauma centers handle everything from broken bones to worst-of-the-worst gunshot and burn

cases. Currently, there are six Level 1 trauma centers and 14 Level 2 centers in the state, but none are located in Trauma Service Area Region 4, an 11-county chunk of North Central Florida that includes Alachua County.

Reaching those centers consumed valuable time, something critically injured patients cannot afford, said Shands HealthCare Chief Executive Officer Timothy Goldfarb, M.H.A.

Since January, the trauma facilities at Shands at UF have been steadily developed and improved, said Lawrence Lottenberg, M.D., director of trauma surgery for UF's College of Medicine. Provisional status is granted only when a trauma program delivers care that meets Level 1 requirements, a goal Shands at UF reached this summer.

"We've upgraded our process through the emergency department, through the intensive care unit and through the operating room, and we are taking care of patients just as any Level 1 trauma center in the country," said Lottenberg, who has spent the past year directing the UF/Shands effort to bring their combined facilities, personnel, equipment and protocols into compliance with Level 1 requirements.

"I can't say enough about the huge commitment, both from Shands and the College of Medicine, for this effort," he said. "We intend to show everybody that the outcomes in this region will be far superior, now that we are providing Level 1 care."

Trauma patients now receive:

- Rapid and expedited care in the emergency department;
- Operating rooms staffed around the clock by multidisciplinary teams of physicians and nurses with trauma certifications;
- Bedside surgical procedures in the intensive care unit;
- Lab results available within minutes and blood available prior to the patient's arrival;
- A new 24-bed trauma unit, the destination for all trauma patients except those going to an intensive care or intermediate care unit.

Beginning Oct. 1, severely injured people in the 11-county area who meet specific criteria to be classified as "trauma alert" patients will be transported directly to Shands at UF, Lottenberg said. Upon arrival, each trauma alert patient will be met by a team of physicians, nurses and ancillary personnel that includes an emergency medicine physician and an attending trauma surgeon. The team will immediately work to stabilize the patient, take blood samples and order tests.

When fully operational, the Shands at UF trauma center will add about 1,600 additional patients per year

to the existing load of more than 40,000 emergency cases seen annually by the Shands at UF emergency department, said David Vukich, M.D., a UF professor and chairman of emergency medicine.

The number of trauma cases admitted already has doubled, from 50 per month in January to 100 per month in August, and will increase to reach the center's full capacity of 130 or 140 patients per month in October, Lottenberg said.

UF's department of emergency medicine, an academic unit in the College of Medicine, is responsible for much of the staffing in the Shands emergency department, said David Seaberg, M.D., a UF professor and associate chairman of emergency medicine. The project has presented several unique challenges.

First and foremost, the Shands emergency department physical plant was renovated to add nine new beds, Seaberg said. The nursing staff was increased and trained for trauma, and patient management protocols were developed in conjunction with the department of surgery's division of trauma, burns and emergency surgery.

"We've made tremendous inroads in the emergency department," Lottenberg said. "The average time of a patient who needs to go immediately to the operating room when they come here is 15 minutes. That is the benchmark time of any Level 1 trauma center, not only in the state but in the country. The average time for arriving patients to reach the intensive care unit or the trauma unit is 30 minutes."

The UF emergency medicine department already helps operate the Level 1 trauma center at Shands Jacksonville, and some coordination will be needed between the two centers, Vukich said. For communities located between Gainesville and Jacksonville where the centers' service areas overlap, a system will be developed to quickly determine which patients should go to which center.

Similarly, protocols will be devised to track the patient-care activities at the Gainesville and Jacksonville centers in real time, making it possible to send some

patients to the less busy of the two facilities when circumstances warrant.

Several other College of Medicine academic units are heavily involved in the Level 1 project, notably the departments of anesthesiology, medicine, neurosurgery, pediatrics, orthopaedics and rehabilitation, radiology and surgery.

Pediatric trauma care will be overseen by attending physicians with the department of surgery's division of pediatric surgery, said division chief Max Langham Jr., M.D., a UF professor of surgery.

Because current treatment protocols for pediatric trauma emphasize nonsurgical options when possible, the division's attending physicians will first assess which young patients require surgery.

"Our focus is to return the child to health as rapidly as possible with as little additional trauma as possible," Langham said.

Though the Level 1 project has required time, planning and allocation of resources, the departments expect to benefit from it, said William Cance, M.D., a UF professor and chairman of surgery. Cance, who arrived at UF in January 2003, has made development of the Level 1 trauma center a cornerstone of his leadership duties and was instrumental in recruiting Lottenberg.

"Trauma centers raise the pulse of the institution, which helps patients throughout the institution," Cance said. "Everyone moves more quickly on everything. It has a ripple effect. Even getting a CT scan is faster."

Care for nontrauma patients will improve as well, Cance said, because the entire hospital system will be transformed. Myriad routine tasks will have been analyzed and adjusted for maximum efficiency, then incorporated into specific protocols.

One of the department's biggest contributions was expanding its division of burn surgery to include trauma and emergency surgery in July 2003, said division chief David Mazingo, M.D., a professor of surgery and director of the Shands Burn Center.

As for trauma research, UF is well-prepared, with several College of Medicine units already engaged in relevant work, Mazingo said. The department of surgery has a surgical metabolism laboratory funded for basic science studies of burns and trauma, under the direction of Lyle Moldawer,

Ph.D., a professor of surgery and an international authority on the effects of trauma on the immune system; the department already is part of a

TRAUMA STATISTICS

Statistics just released indicate that in the United States in 2001:

- 157,000 people died from injuries, averaging 18 deaths per hour.
- Injury accounted for about one in every three emergency department visits.
- 29.7 million people were treated for nonfatal injuries in hospital emergency departments.
- Injury accounted for \$117 billion in health-care costs.
- Motor vehicle accidents were the leading cause of injury-related death, accounting for 33,400 occupant fatalities.
- Unintentional falls were the leading cause of nonfatal injuries treated in hospital emergency departments, accounting for more than 7.8 million cases treated.

Source: "Surveillance for Fatal and Nonfatal Injuries" — United States, 2001, <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5307a1.htm>

multi-institution study of the immunology of burns and major trauma.

The center also will present new possibilities for resident education, said Peter Gearen, M.D., a UF associate professor and chairman of orthopaedics and rehabilitation. For orthopaedic residents, it's especially important to learn about the patient management protocols used in cases where multiple injuries are involved.

"Residents will get in the flow of managing them in that way," he said. "And they are learning with each additional case that comes through."

Despite the increased volume of trauma patients, clinical departments may find that the Level 1 center actually makes their work easier, said William Friedman, M.D., a UF professor and chairman of neurosurgery, because they will be part of a highly organized system.

But the bottom line is that Level 1 care will result in better patient outcomes.

"I'm glad the day has finally come when we're able to do it," Friedman said. "Dozens of studies show that patients do a lot better if they're taken to a Level 1 center, due to requirements for 24-hour staffing by neurosurgery and general surgery and immediate availability of other specialties and written protocols to organize the care."

"So it's the kind of care we want for ourselves, our families, our friends." P

UF SURGICAL TEAM PREPARED TO TREAT RARE TUMOR



PHOTO BY TOM NORDLIE

Dr. David Pincus chats with Tricia Worthington. Pincus was part of a surgical team that operated on her 2-year-old son Nicholas for hypothalamic hamartoma.

By Tom Nordlie

Thanks to a globe-trotting Australian neurosurgeon, UF now is one of two U.S. institutions offering an innovative surgical procedure to treat hypothalamic hamartoma, a rare brain tumor that causes seizures, rage attacks and learning disabilities.

Jeffrey Rosenfeld, M.D., a professor and director of neurosurgery at the Alfred Hospital and Monash University in Melbourne, developed the procedure and has traveled to numerous countries to share it. In August, he demonstrated the procedure to UF physicians in the College of Medicine's pediatric epilepsy program, completing three successful operations along the way.

"It completes our being at the forefront of epilepsy surgery, and we're already one of the most complete epilepsy surgery centers in the nation," said Paul Carney, M.D., division chief of pediatric neurology.

Hypothalamic hamartoma strikes one child in every 1 million to 2 million, Rosenfeld said. The condition occurs when a mass of nerve cells presses against the hypothalamus, a brain structure that controls emotion and many basic survival functions. The cells fire electrical impulses that cause repeated seizures and epilepsy.

"Because the kids have multiple seizures, their brain development slows down," Rosenfeld said. "They also develop severe behavioral problems — aggression, temper tantrums, rage attacks."

Because hypothalamic hamartoma was discovered only 20 years ago, treatments are in their infancy. The seizures are resistant to medication, Rosenfeld said, and the standard surgical approach, working from below the tumor through a maze of crucial blood vessels, sometimes results in poor outcomes.

Rosenfeld's answer was to take a longer route

downward through the skull, giving better access to the tumor with less risk. To date he has performed 52 operations and achieved what could be called miracle cures.

"If you can operate when the kids are young they can start learning again," he said. "Talking improves, behavior improves, aggression stops. It's like they're a new kid."

Just two days after his operation, 7-year-old Nathan Veatch showed only one outward sign of the surgery — a sutured incision a few inches long near the top of his head.

Nathan's mother, Sheila Veatch, is a Florida native who moved with her husband to Nairobi, Kenya, where they teach school. They adopted Nathan at age 6 months and soon noticed he suffered fits of rage and uttered a strange, unnerving laugh — another common symptom. Eventually he was diagnosed with hypothalamic hamartoma.

"I learned about hypothalamic hamartoma from the Internet, e-mailed several doctors and only one responded," she said.

That doctor was Carney. Seeking ways to help Nathan and two other children whose parents had sought him out via the Internet, Carney spoke to David Pincus, M.D., Ph.D., a UF assistant professor of neurosurgery, who was aware of Rosenfeld's new approach. Pincus worked with department of neurosurgery Chairman William Friedman, M.D., to invite Rosenfeld to UF and, soon after, the Veatches bought plane tickets.

None of the three youngsters treated in Gainesville has experienced seizures since the surgery, although it will take months to know the full extent of their recovery, Rosenfeld said.

UF's Comprehensive Pediatric Epilepsy Program includes specialized pediatric epileptologist consultations, drug trials, an inpatient monitoring unit and a complete epilepsy surgery program, Pincus said.

"We're pleased to be only the second place in the U.S. to offer this surgery," Pincus said. "We hope to be doing the procedure here in the future and become a center for treatment of this condition." **P**

TO LEARN MORE ABOUT HYPOTHALAMIC HAMARTOMA AND TREATMENT OPTIONS VISIT WWW.HHUGS.COM, AN ONLINE COMMUNITY FOR FAMILIES TOUCHED BY THE DISEASE.

RELIEF AND REUNION

Dog injured in hurricane returned to owner

Thanks to UF veterinarians, a German shepherd named Lady that was badly injured during Hurricane Charley is getting a second wind.

Lady's story has special meaning to many who weathered the recent storms.

A team of UF veterinary pathologists, technicians and students responded to a request from the Office of the Governor to aid in the animal relief efforts and joined forces with a disaster response vehicle dispatched by FEMA to provide shelter and treatment facilities.

The team traveled from Bartow to Wauchula in central Florida, treating a variety of animals brought to the makeshift veterinary clinic.

The UF team treated one injured German shepherd whose owner could not be located and

determined it was likely the dog had been hit by a car.

After team leader Jennifer Maners, D.V.M., a second-year pathology resident, made an impassioned plea to the college's surgery service to provide additional care to the animal, the female dog, nicknamed Charley, was brought to Gainesville for major surgery.

Maners admits she became attached to the quiet, gentle creature in part because her own German shepherd passed away last year but added that it was a team effort that ensured Charley's survival.

"This dog would have been euthanized had Dr. Jason Wheeler of our surgery service not been willing to donate his time to perform the needed operations on the dog's hind legs," Maners said.

Meanwhile, employees of the company that operated the FEMA truck had photographed all the animals brought to the facility and distributed the images to various shelters and Web sites to help pet owners locate their displaced animals.

On Aug. 27, less than a week after the dog's arrival at UF, Maners received a call from a woman claiming to be the dog's owner.

In tears, the woman told Maners she had gone from shelter to shelter and finally seen a photograph of the dog she knew instantly was hers.

"They asked if I knew of any characteristics that were unique," said Bridget McVay, a cafeteria worker who is a lifelong resident of Wauchula.

"I told them her left fang tooth was chipped off and they said, 'Well, this is definitely your dog.'"

McVay said the dog, whose real name is Lady, had gotten out during the storm.

Wheeler said Lady's surgery, which was paid for privately by individuals wanting to help, requires two



PHOTO BY SARAH CAREY

Bridget McVay and her dog, Lady, visit at the Veterinary Medical Teaching Hospital Sept. 1, more than two weeks after being separated during Hurricane Charley.



PHOTO BY SARAH CAREY

Dr. Jennifer Maners, who arranged for Lady to be brought to Gainesville for life-saving medical treatment, poses with the dog prior to its departure from an animal-relief site in Wauchula.

months of postoperative care.

"She came through the procedure really well," said Wheeler.

In September, McVay visited her beloved pet and the people who saved the animal.

"Jennifer Maners is my sweetheart," she said. "I just can't believe all that everyone has done. They let me drive Lady around and I got her some of her favorite treats. I missed her so much."

— Sarah Carey

SHANDS AT UF OFFERS PROCEDURE FOR 'CARPAL TUNNEL' OF THE FOOT

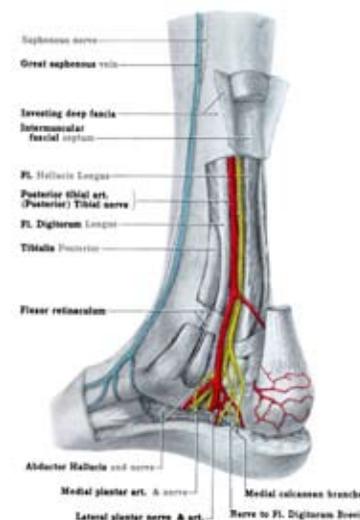
A relatively simple but seldom-performed procedure to treat diabetic neuropathy of the feet is now being performed by surgeons at Shands at UF.

Tibial nerve decompression surgery treats "carpal tunnel of the foot," which occurs when high blood sugar levels associated with diabetes cause nerves to swell or degenerate, making them vulnerable to pressure when they pass through the ankle or the foot. This neuropathy may cause severe pain and burning in the feet. The feet may eventually become numb, making it difficult or impossible for a person with this condition to sense other injuries.

The tibial nerve travels down the leg and through the interior of the ankle. During an outpatient procedure, a surgeon makes a small incision at the ankle, then cuts the ligaments surrounding the tibial nerve to make more room for it, relieving the pain.

"It's like doing a carpal tunnel operation on the foot," said H. Hollis Caffee, M.D., College of Medicine professor and chief of the division of plastic and reconstructive surgery. "The surgery we do for diabetic neuropathy is a relatively simple operation. However, most physicians and very few surgeons know about it. Consequently, few patients ever get treated because of this lack of knowledge."

— Lance Skelly, Shands at UF



Sole Sisters

HSC staffers step up the fight against breast cancer

By Adrianna C. Rodriguez

For four Health Science Center women, stomping out breast cancer starts one step at a time, with a bit of wit and fancy footwear to boot.

Through a recent fund-raising project dubbed “Sole Sisters,” they joined others in the Gainesville community in an effort to gain a toehold on the deadly disease, the second-leading cause of death among American women.

The project, created by local photographer Randy Batista, raised \$55,000 to benefit the mammography fund of the Alachua County Organization for Rural Needs Inc., known as the ACORN Clinic. It culminated April 16 in a photography exhibit and auction featuring community leaders sporting shoes with an artistic flair.

ACORN Clinic is a not-for-profit organization located in Brooker. More than 100 health professionals volunteer their expertise at the clinic to extend \$1.5 million in low-cost health and dental care services to the uninsured, working poor of North Central Florida.

“I was honored that I was asked to serve as a ‘sister,’” said dentistry Dean Teresa A. Dolan, D.D.S., M.P.H., a 12-year member of the ACORN Clinic board of directors.

Dolan was photographed wearing “Gum Shoes,” pink platform sandals with dental floss straps and pearly white teeth at the toes created by local artist Dixie Biggs.

Other Health Science Center community members who participated in the Sole Sisters project included radiation oncologist Cherylle Hayes, M.D., radiologist Linda Lanier, M.D., and Tina Mullen, director of Shands at UF’s Arts in Medicine Program.

Hayes posed for the portrait “On the Fringe.” The abundant hair featured in the image was meant by artist Mary Park-Smith to represent the hair that cancer patients lose during chemotherapy treatment. Mullen, whose mother died of breast cancer 15 years ago, designed the shoes she sported in her portrait, titled “Bunny Slippers and Sweet Memories.” “Penny Loafers,” created by Lanier and modeled by Dawn Burgess, a mental health counselor at Community Behavioral Services, consisted of two hollowed-out loaves of rosemary bread accented with bright copper pennies on the shoe-tongues.

ACORN had been funding free mammograms using \$20,000 raised through Batista’s first project



RANDY BATISTA © 2003

TERESA A. DOLAN



PHOTOS BY RANDY BATISTA © 2003

DAWN BURGESS

for the clinic, “Chairwomen.” For that campaign, local women leaders were photographed posing with their favorite chairs. The fund provides mammograms, diagnostic tests and ultrasound tests for uninsured women ages 30 to 50. Recently, however, the fund ran out of money, and the clinic had to begin paying for the mammograms out of its operating budget.

“It was perfect timing,” said ACORN Director Candace King of the infusion of support from the Sole Sisters proceeds.

Thanks to all the “sole” sisters and brothers who contributed to the project, the ACORN mammography fund will continue to help combat breast cancer, King said. And it couldn’t have happened at a better time — October is National Breast Cancer Awareness Month. **P**



TINA MULLEN



CHERYLLE HAYES

FOR MORE INFORMATION ABOUT THE SOLE SISTERS PROJECT AND THE ACORN CLINIC MAMMOGRAPHY FUND, VISIT WWW.SOLE SISTERS.ORG OR WWW.ACORNCLINIC.ORG.

RIDING THE STORM(S) OUT

Winds whip the UF family

Storms Jeanne, Ivan, Frances and Charley all left their mark on the HSC family. How did your neighbors make it through and what did they learn in the process? POST readers share their perspectives and experiences of spending time with Florida's rough visitors.

ICE, ICE, BABY

We received a call from friends living near Hawthorne: no power for three days — where could they get ice? Latest news report: No Alachua County ice giveaways scheduled; ice couldn't be had for love or money. The situation was desperate!

Mark said, "Help is on the way!" I live in Gatorwood Apartments (20 buildings; 12 units each). Mark grabbed new trash bags and headed out. Knocking at each door, he explained his friends needed ice, "Buddy, can you spare a tray?" Three-and-a-half buildings later, my freezer was so full we needed a bungee cord to close it!

— **Elaine V. Cronheim**

Coordinator
Administrative Services
Department of Pediatrics

ALL CREATURES BIG AND SMALL

My kitty, Chikitica, (otherwise known as my associate) and I were fortunate and fared well through the hurricanes. We moved from Oregon less than 24 hours before Charley. I spent my second night in Gainesville at the Southwest Recreational Center, but my kitty was taken in her airline carrier to the designated Alachua County animal shelter. For Frances, we were able to stay together at the Kanapaha Middle School shelter. There, the Humane Society and DART (Disaster Animal Rescue Team) staff provided crates, litter, litter boxes, cleaning supplies, food and their knowledge so that we could be together and know our dear companions were safe, too. I spent my shelter time (three nights and four days) helping out and caring for 24 cats, two hamsters, one Guinea pig, one tortoise and a handful of baby squirrels. A nearby science classroom housed a large number of rambunctious dogs. Meanwhile, the Red Cross and community volunteers ably cared for 200 humans.

For me, these hurricanes were such the opportunity to meet wonderful people, and be busy with my kitty and many other wonderful creatures, all thanks to the sensitivity of the community of Gainesville to whom we owe our gratitude.

— **Maria Mercedes Panqueva**

Doctoral Student
Rehabilitation Science
Communicative Disorders



Hurricane Frances redecorated our master bedroom and patio, giving it a more open look and feeling. The midnight event was loud and scary, but no one was hurt.

— **Venita J. Sposetti, D.M.D.**

Assistant Dean for Admissions and Financial Aid



Cosmo the cat evacuated to the home of Yankee the dog during Hurricane Frances. They are pictured here discussing strategies to keep their humans entertained during the storm.

— **Michelle Woodbury**

Rehabilitation Science Doctoral Student
College of Public Health and Health Professions



People in line for gasoline at 2 a.m., at the Texaco in Micanopy, County Road 234 and I-75. Those same gasoline customers in line for the bathroom. You know something's up when there's a line for the bathroom at 2 a.m.!

— **Wayne Cope**

LMT Videoconferencing Technician,
HSC Teaching Laboratory Resources



A tree top broke off and impaled our garage during the height of Hurricane Frances on Sept. 6.

— **Chris Sistrom, M.D., M.P.H.**
Assistant Professor
Department of Radiology



Our neighborhood flooded. View of my front yard from the street looking at my mailbox.

— **Janet Haire**
Office Manager
Department of Rehabilitation
Counseling



Before Frances (top) and after Frances (right). These are photos of our dining room. We had extensive damage in a few other rooms but feel grateful that we can continue living in our house.

— **Yvonne Brinson**
Project Director
Women's
Health Initiative
Department of
Medicine



HURRICANE REVEALS COUNTY'S VULNERABILITIES

A few trips by my family around Gainesville after Hurricane Frances passed through revealed our region's two greatest vulnerabilities. The first risk is that the trees that we prize for beauty and shelter from the sun can also be missiles that puncture our homes or cleavers that topple onto roofs with startling devastation. Water oaks and several other species with especially shallow roots were among the most frequently blown over. The second risk comes from flooding in areas improperly zoned for residential housing, which should have been designated solely as water recharge zones.

— **George Papadi**
Senior Biological Scientist
Veterinary Medicine
Department of Pathobiology

FREIGHT TRAIN COMETH

Sunday, Sept. 5: It sounded nothing like the slow-moving train that regularly passes by on its tracks across the lake from my house. This was much louder and moving much faster — more like a locomotive come loose from its rails. Louder and louder this sound grew, filled with limbs cracking and popping, large objects hitting the ground with a thud. Then within a minute, it faded as quickly as it came at a little past midnight. I thought I saw light outside but when I looked out the window the sky went dark. Then, like someone switched on the lights, the sky got bright, the ground lit up and I could see my car in the drive. It was distant lightning reflected in the low, heavy cloud cover.

When I walked outside in the morning light I realized the runaway locomotive I thought I'd heard had actually been a tornado — a powerful storm that ripped through my neighborhood, picked up huge oak trees to the right and left of me, but left my house untouched.

— **Carolyn Whitford**
Systems Programmer
Department of Physiological Sciences

DIAPER DUTY IN THE DARK

We lost power for 12 hours. A trifling amount to be sure compared to those still without power, but long enough to make you realize how much you take it for granted. Changing the baby at 4 a.m. by candlelight was an interesting experience that I'll not soon forget.

— **Chris Morris**
Department of Radiation Oncology
College of Veterinary Medicine

DISTINCTIONS

DENTISTRY

SAMUEL B. LOW, D.D.S., associate dean of faculty practice, continuing education and allied health, and professor of periodontics at the College of Dentistry recently was installed as president of the Florida Dental Association. Low, who was sworn in during the association's annual meeting, the Florida National Dental Congress, is the first academician in the association's history to serve as president. With a membership of about 7,000 Florida-licensed dentists, the Florida Dental Association represents nearly 80 percent of all licensed dentists in the state.



MEDICINE

The College of Medicine's Office for Program and Faculty Development has named **CARIDAD HERNANDEZ**, M.D., a UF clinical assistant professor of medicine, its associate director for faculty development. Hernandez, who currently is completing a general medicine/faculty development fellowship at the University of North Carolina, will oversee several initiatives for the office, including two teaching improvement programs, the Master Educator Fellowship and Residents as Educators.



WAYNE GOODMAN, M.D., chairman of the department of psychiatry, has been reappointed chairman of the Food and Drug Administration's Psychopharmacologic Drugs Advisory Committee. He will serve a two-year term. The committee provides independent expert scientific advice to the FDA. In September, the committee recommended that antidepressants should carry the government's strongest warning about the potential for the medications to spur suicidal thoughts in children and adolescents.



DAVID SEABERG, M.D., associate chairman of emergency medicine and chief of emergency services for Shands at UF (left), and **JAY SCHAUBEN**, Pharm.D., director of the Florida Poison Information Center, Jacksonville, were deployed to Port Charlotte

after Hurricane Charley as part of a Disaster Medical Assistance Team under the Federal Emergency Management Agency.

Psychologist **JAMES R. RODRIGUE**, Ph.D., has been appointed to the National Kidney Foundation's National Donor Family Council. Rodrigue, a professor in the departments of clinical and health psychology, surgery and pediatrics at the College of Public Health and Health Professions and the College of Medicine, also has been named the Region 3 representative to the United Network for Organ Sharing's Ethics Committee. For the past 15 years, Rodrigue has served as director of psychological services for the solid organ and bone marrow transplant programs and the live kidney and liver donor programs at Shands at UF medical center. He also directs UF's Center for Behavioral Health Research in Organ Transplantation and Donation, which examines ways to enrich the lives of transplant patients and to increase organ and tissue donation.

The Florida Heart Research Institute has named UF cardiologist **DANIEL PAULY**, M.D., Ph.D., the Stop Heart Disease Researcher of the Year. Pauly was lauded for improving the understanding and treatment of coronary artery disease and congestive heart failure through the study of gene therapy and cell signaling mechanisms. He received \$25,000, to be applied to future research efforts.

Cardiologist **DAVID SHEPS**, M.D., has been named president-elect of the Academy of Behavioral Medicine Research. He will serve a one-year term before assuming the presidency in June 2005. Sheps is a professor of medicine at the College of Medicine and the Malcom Randall Veterans Affairs Medical Center. The academy strives to foster research efforts in the field of behavioral medicine.

LUCIA NOTTERPEK, Ph.D., is the winner of the American Society for Neurochemistry's 2004 Jordi Folch-Pi Memorial Award, given annually to an outstanding young investigator who has demonstrated a high level of research competence and originality while significantly advancing knowledge of neurochemistry. Notterpek seeks to understand how misexpression of a certain gene leads to hereditary degeneration of myelin, a fatty material that often surrounds nerve fibers. An assistant professor of neuroscience at the McKnight Brain Institute, her research efforts receive support from the National Institutes of Health and the National Muscular Dystrophy Association.



Gov. Jeb Bush has awarded grants totaling almost \$2.9 million to seven College of Medicine faculty members as part of the James and Esther King Biomedical Research Program. The recipients were **VEENA ANTONY**, M.D., **HIMANGSHU BOSE**, Ph.D., **JAMES DEMPSEY**, Ph.D., **IAN ELDER**, Ph.D., **RICHARD MELKER**, M.D., Ph.D., **DANIEL PAULY**, M.D., Ph.D., and **SERGUEI JARIKOV**, Ph.D. The research program supports

Florida investigations involving basic and clinical research of diseases caused by tobacco. It was named in honor of Senate President Jim King's late parents, both of whom died of cancer.

NURSING

College of Nursing Associate Professor **JENNIFER ELDER**, Ph.D., R.N., recently was named chairwoman of the college's department of environmental health care and systems. Elder, who has been with the college since 1990, is a nationally known autism expert who has focused her career on parental and dietary interventions for children with autism. She is a co-founder of Arbor House in Gainesville, a shelter for pregnant homeless women, and is a fellow of the American Academy of Nursing. She replaces Karolyn Godbey, Ph.D., R.N., who retired after a 30-year career with the college.



Gov. Jeb Bush recently reappointed **ANDREA GREGG**, D.S.N., R.N., College of Nursing associate professor and Jacksonville campus director, to a new term on the Florida Center for Nursing Board of Directors. Gregg currently serves as chairwoman of the board of directors, a position she assumed this summer, and was one of four nursing leaders reappointed by Bush for a second term on the board. The Florida Center for Nursing is an organization that addresses strategies on dealing with the state's critical nursing shortage.



ANN HORGAS, Ph.D., R.N., assumed the role of the College of Nursing's associate dean for research this summer. Horgas, an associate professor who has been at UF since 2000, is one of the country's leading nurse researchers on pain and aging and is currently conducting an NIH-funded study on methods to assess pain in nursing home residents with dementia. Horgas is a fellow of the Gerontological Society of America and has been awarded the Nightingale Award for Excellence in Nursing Research. She replaces Dr. Carolyn Yucha, who took a position as dean of the School of Nursing at the University of Nevada Las Vegas.



College of Nursing Clinical Assistant Professor **GLORIA MCWHIRTER**, M.S.N., R.N., was named the 2004-05 chair of UF's University Minority Mentor Council, which governs the University Minority Mentor Program. The program links



minority students with professional mentors, both UF faculty members and a student peer mentor. In her role with the College of Nursing, McWhirter devotes full-time effort to the recruitment, mentoring and retention of students from minority groups or disadvantaged backgrounds. The UMMP is aimed at improving the retention rate for African-American and Hispanic students by personalizing their experiences in their first year of college and providing a supportive and nurturing experience for the personal and intellectual development of these students as they transition into college life.

PUBLIC HEALTH & HEALTH PROFESSIONS

ADRIENNE AIKEN, a clinical and health psychology doctoral student at the College of Public Health and Health Professions, received a research supplement for underrepresented minorities from the National Institute on Aging. Aiken studies cognitive aging in minority populations.



VONETTA DOTSON, a clinical and health psychology doctoral student at the College of Public Health and Health Professions, received a minority dissertation grant from the National Institute on Aging. Dotson studies the combined effect of aging and depression in older adults and whether it leads to greater cognitive decline.

Parent Child Interaction Therapy, developed by **SHEILA EYBERG**, Ph.D., a professor in the Public Health and Health Professions' clinical and health psychology department, was one of three therapies named by the Ewing Marion Kauffman Foundation and the National Call to Action as a best practice for helping children heal after abuse.

VETERINARY MEDICINE



ELEANOR GREEN, D.V.M., a professor and chairwoman of the College of Veterinary Medicine's department of large animal clinical sciences, has received the College of Agriculture and Life Sciences' 2004 Award of Distinction. The award is given for outstanding contributions to UF, IFAS and Florida's food, agricultural and life sciences, as well as to natural resources industries. Green also serves as chief of staff of UF's Alec P. and Louise H. Courtelis Equine Teaching Hospital.

UF JACKSONVILLE PEDIATRICS DEPARTMENT LAUNCHES NEW CHILD PROTECTION DIVISION

By Tom Nordlie

Adding a new dimension to its efforts to protect Florida's children, the department of pediatrics at UF's College of Medicine Jacksonville has established one of the nation's first divisions devoted to fighting child abuse.

Launched in July, the division of child protection and forensic pediatrics will pursue research, clinical services and training programs designed to reduce the incidence of maltreatment and provide expert evaluation of suspected cases, said Randell Alexander, M.D., a professor of pediatrics and chief of the new division.

"Having an academic division gives us the chance to process cases and think about how we can slow down and turn the tide of child abuse," said Alexander, who arrived at UF Aug. 1 from Morehouse School of Medicine in Atlanta. "Agencies can't take a larger view to stem child abuse, but we can."

That larger view will involve geographic expansion, Alexander said, with help from division colleagues Andrew Barrett, Ph.D., the department's director of telemedicine, and Jay Whitworth, M.D., a professor of pediatrics who cofounded the statewide Child Protection Team system in the mid-1970s. The system uses interdisciplinary groups of health-care professionals to evaluate injuries that may have been caused by child abuse.

One of the division's initial goals is to add more Florida cities to the pediatrics department's existing telemedicine consult service, he said. Using video technology, physicians can evaluate cases by examining injuries and interviewing children, parents and health-care providers in 22 cities, without leaving the College of Medicine Jacksonville campus.

Alexander will continue to serve as director of a similar telemedicine service for the state of Georgia and hopes to begin offering UF consults to hospitals in Georgia and Alabama, he said.

"We're trying to think regionally," said Alexander,

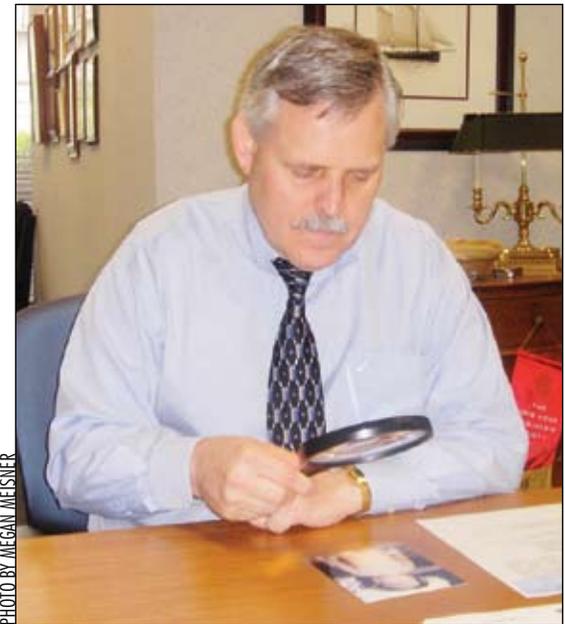


PHOTO BY MEGAN MESNER

Dr. Randell Alexander, chief of the new child protection division of the College of Medicine Jacksonville, examines a case photo.

who is one of the world's leading experts on shaken baby syndrome and Munchausen-by-proxy syndrome.

Upon arrival at UF, Alexander also was appointed statewide medical director of the Child Protection Team system. He succeeds Whitworth, who served in the position for more than 30 years and who will receive the Award for Outstanding Service to Maltreated Children from the American Academy of Pediatrics Oct. 9 at its national conference in San Francisco.

"Jay has made a great success of it and I want to build on his work," Alexander said.

Because Alexander and Whitworth are internationally recognized experts, their presence in the division can help draw notoriety and funding, said Thomas Chiu, M.D., a professor and associate chairman of pediatrics at the Jacksonville campus.

"I don't think the opportunity exists very often to have two top people together," Chiu said. "I want to really challenge them to move the progress of child protection and forensic pediatrics to the next level."

EXPERTS SCREEN PATIENTS FOR SIGNS OF EARLY DEMENTIA

Geriatrics expert George Wilson, M.D., an associate professor and associate chairman of community health and family medicine at UF's College of Medicine Jacksonville, has received a three-year grant for \$75,000 from Pfizer to investigate whether elderly patients entering long-term care have early dementia or minimal cognitive impairment that has not been recognized by their families and health-care providers.



Wilson believes the structured environment typical of long-term care facilities could mask loss of memory and other signs of cognitive impairment. Using two simple cognitive testing formats, Wilson and his team will screen all patients admitted to long-term care at River Garden in Jacksonville. Those patients exhibiting signs of cognitive impairment will be examined further. The study also will compare the screening results to the perceptions of health-care providers at the facility — a disparity could indicate the need for greater assessment during the admissions process.



PHOTO COURTESY OF NORMA COOPER

Generations of caring: Alice Poe, D.S.N., C.N.M., College of Nursing assistant professor and nurse midwifery track coordinator, looks on as a new mother bonds with her child. Poe, a certified nurse midwife, delivered both the mother and her child.

College of Nursing wins grant extension to reduce health disparities

By Tracy Brown Wright

The U.S. Department of Health and Human Services has awarded a 2-year continuance to an \$831,000 grant awarded to the College of Nursing in 2001 to expand its nurse midwifery track. The goal is to increase health care for underserved populations.

These funds, provided by the department's Bureau of Health Professions' Division of Nursing, will significantly increase the nurse-midwifery workforce by recruiting students from disadvantaged backgrounds, medically underserved areas and underrepresented populations. A cooperative degree with Florida State University will also be implemented to increase access to midwifery education for individuals in the Florida Panhandle and southern Georgia.

As part of the grant, UF educator/recruiter Norma Cooper, M.S.N., R.N., visits culturally diverse and medically underserved areas to encourage students of all ages and cultures to consider nurse-midwifery as a career. Her audiences range from children in kindergarten to new graduates of nursing programs at colleges with large enrollments of underrepresented populations.

The cooperative degree program with FSU was modeled on a similar program with the University of South Florida. It offered UF's core nurse midwifery classes via distance education technology to students on the USF campus who otherwise could not access the midwifery track. This agreement ended in June because USF has decided to begin its own nurse

midwifery track.

The College of Nursing will transmit nurse midwifery classes to the FSU School of Nursing's Tallahassee campus and its Panama City site. The students will take core graduate nursing classes at the FSU School of Nursing and attend the UF nurse midwifery classes via distance education technology.

Clinical experiences are usually arranged in the student's home city with the cooperation of UF midwifery faculty who make on-site visits before, during and after their clinical rotations. The cooperative degree program with FSU will begin offering teledistance classes in January.

"The grant awarded by the Department of Health and Human Services has allowed us to continue our work in recruiting individuals from culturally diverse, underserved and underrepresented groups," said Alice Poe, D.S.N., C.N.M., an assistant professor and coordinator of the UF nurse midwifery track.

"Every county in Florida has a shortage of health professionals who care for underserved groups, and nurse midwives are fully prepared to provide primary health care, in addition to women's health care for pregnant and nonpregnant women," she said. "By recruiting and mentoring students who may otherwise not have access to nurse midwifery education, we can be a resource for those who can help to fill those health disparity gaps in underserved rural and urban communities."

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