

# Building on **Strength**

The UF Institute on Aging 12

UF Health Science  
**CENTER**  
*Celebrating 50 Years*

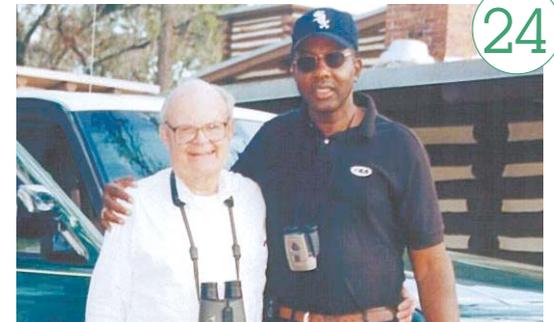
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**ON THE COVER:** The UF Institute on Aging is building a world-class team of researchers for prevention and rehabilitation of aging-related illnesses.

## Center Drive project delayed through September

Unfavorable weather conditions and the unexpected discovery of abandoned underground utilities have delayed the scheduled completion of the Center Drive chilled water project by at least three weeks. Under the revised plan, the work should be completed in late September.

The current single-lane detour using synchronized traffic lights will remain in place until the project is finished. The bus stop and pedestrian walkway will remain in place for the duration of the work. PPD officials apologize for the inconvenience and thank all who have been affected for their patience and understanding.

Please contact Jeff Bair, PPD, with any questions at 392-1405 x408.



## SIGNATURE UF GENETICS INSTITUTE EVENT SLATED

A plant scientist from the University of Arizona, a National Institutes of Health section chief and an expert in epigenetic inheritance from Washington University will be among the featured lecturers at Florida Genetics 2005, a symposium scheduled for Nov. 30 to Dec. 1 at the Reitz Union.

Epigenetics is the focus of this year's symposium, sponsored by the UF Genetics Institute, the Center for Mammalian Genetics, the Plant Molecular and Cellular Biology Program and Health Science Center Libraries.

However, poster abstracts covering any aspect of genetics research from UF researchers are encouraged for submission through Oct. 15.

Vicki L. Chandler, Ph.D., a Regents professor of plant sciences at the University of Arizona, will talk about epigenetic control of gene expression in plants during the opening session on Nov. 30. Also that day, Gary Felsenfeld, Ph.D., chief of the physical chemistry section and the molecular biology lab at the National Institute of Diabetes & Digestive & Kidney Diseases, will discuss the relationship between chromatin — the chemical substance of chromosomes — and gene expression.

The following day, Eric J. Richards, a professor of molecular genetics and plant biology at Washington University, will talk about the role of DNA methylation in cementing inherited epigenetic gene expression states.

UF researchers, postdoctoral associates and students are encouraged to submit abstracts in any area of genetics for the poster sessions. Visit the seminars and events section of the UFGI Web site at [www.ufgi.ufl.edu/](http://www.ufgi.ufl.edu/) to submit an abstract or for more information.

— John Pastor

## PLAY GOLF. FIGHT CANCER. SUPPORT RESEARCH.

Play golf and fight cancer at the second annual Central Florida FPTI Golf Classic set for Monday, Oct. 17 at the Heathrow Country Club in Orlando.

This year's event will benefit the UF Shands Cancer Center, specifically the Florida Proton Therapy Institute, the Southeast's first proton therapy center. Tournament proceeds are earmarked for research programs at the center, which will open in Jacksonville next summer.

For more information, call Larry J. Shertz at (407) 804-0507, e-mail [lshertz@cfl.rr.com](mailto:lshertz@cfl.rr.com), or visit the event's Web site at [informationfairway.com](http://informationfairway.com) (key word: proton).

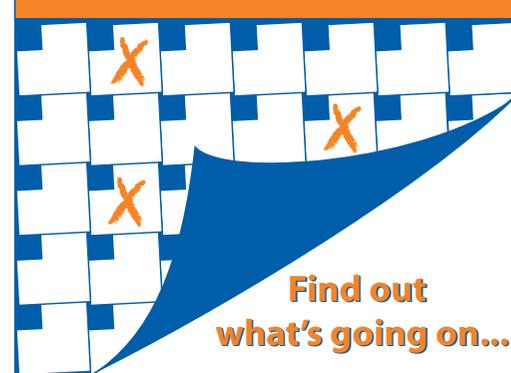
## NEW WEB CALENDAR ANSWERS THE QUESTION, WHASSUP?

On any workday, the Health Science Center has more guest lectures, seminars, grand rounds and research fairs going on than you can shake a laser pointer at.

Many of these events are of interest to folks outside a specific department, college or discipline. (Can you say interdisciplinary?) Flyers, closed-circuit television billboards and assorted electronic calendars help publicize these events, but can be limited by any number of factors.

To enhance visibility and awareness of these myriad educational opportunities, the HSC Office of News & Communications has begun posting an automated, Web-based events calendar on the home pages of the office and the HSC. Users not only can see events scheduled over the next 30 days, they also can post their own academic activities by registering as a "calendar client."

## HSC Calendar of Events



The registration process is quick and easy, allowing clients to enter their event information into a data collection form. Event sponsors can also call the News & Communications office at 273-5810 and have the staff enter the information.

Find the events calendar at [www.news.health.ufl.edu/calendar.asp](http://www.news.health.ufl.edu/calendar.asp).

## UF REPORTS RECORD AMOUNT OF RESEARCH AWARDS, NEARLY \$500 MILLION

Research awards to UF rose 5 percent to a record \$494 million in 2004-05, due in part to a 10.8 percent increase in federal funding and a 16.5 percent increase in foundation awards.

UF's Health Science Center accounted for just more than half of the university's total, with its six colleges receiving a record \$257.1 million, up 9 percent. The Institute of Food and Agricultural Sciences saw its awards increase nearly 17 percent to \$84.4 million. The College of Engineering remained steady at \$63.3 million, as did the College of Liberal Arts and Sciences, at \$47.4 million.

Awards from federal agencies such as the National Institutes of Health and the National Science Foundation, which account for 64 percent of UF's total, rose \$30.9 million between 2003-04 and last fiscal year. Despite a leveling off in the NIH budget, awards from that agency — UF's largest funding source — rose 15 percent to \$130 million. Awards from NSF rose 10 percent to \$46.6 million.

## SUNDAY LIBRARY HOURS CHANGE

The HSC Library will now open at 1 p.m. on Sundays, instead of 10 a.m. This permanent change to Sunday's schedule includes Circulation, Reserves and the Informatics Lab. Other scheduled hours remain the same. The HSC Library's regular service hours are:

Mon – Thu: 7:30 a.m. - midnight

Fri: 7:30 a.m. - 7 p.m.

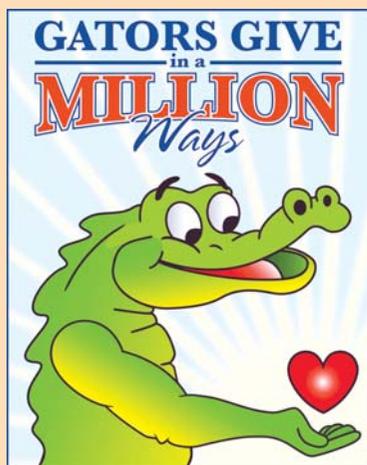
Sat: 8 a.m. - 5 p.m.

Sun: 1 p.m. - midnight

Informatics Lab and Reference Desk service hours may be found on the library's Web site at:

[www.library.health.ufl.edu](http://www.library.health.ufl.edu).

## GATORS GIVE IN A MILLION WAYS



The University of Florida Community Campaign, themed "Gators Give in a Million Ways," kicks off Sept. 26 and runs through Oct. 7 with a goal of reaching the \$1 million mark.

"With a campus community of more than 12,000 faculty and staff, each of us has a wonderful opportunity to join others in helping to fund the critical services extended by the 76 charitable agencies that work every day to improve the lives of all Gainesville residents," said UFCC chair and dentistry Dean Teresa A. Dolan.

Although the university contracts with United Way to serve as the fiscal agent for the campaign, responsible for distributing donations to the 76 participating agencies, only about 30 agencies are members of United Way. The remaining 46 organizations are community health charities and unaffiliated non profit agencies serving the Gainesville area.

The organizations supported by the UFCC may provide low-cost clinical services to the working poor or shelter to abused women and children. They may fund research to ease human suffering from diseases such as diabetes,

cancer or Alzheimer's, or they may extend end-of-life care for Gainesville's elderly and ill. All of them work to improve the quality of life in the Gainesville area.

Last year, nearly 6,000 UF faculty and staff demonstrated UF's commitment to its community by raising \$928,466 during the UF Community Campaign, which was administered by United Way.

Pledge cards will be distributed during the first few days of the campaign. Donation designations for specific agencies made last year will not roll over this year, so be sure to designate on the pledge card which agencies should receive your donation. Payroll deduction is available and convenient.

For more information and to learn how your donation can improve the lives of people in our community, visit [www.ufcc.ufl.edu](http://www.ufcc.ufl.edu).



Each August, UF Senior Vice President for Health Affairs Dr. Douglas Barrett pulls duty in the pediatrics ward at Shands at UF, an activity he says is “a great reminder of what this place is all about.” With him are (from left) Dr. Lakshmi Katakam, senior pediatrics resident; Amanda Hammock, fourth-year Pharm.D. student; Dr. Volha Ihnatsenka, first-year family practice resident; and Dr. Allison Haller, first-year pediatrics resident (with back to camera).

## Expanding research tops Barrett’s to-do list

By Tom Fortner

**O**n the southwest corner of Mowry Road and Gale Lemerand Drive, the angular, six-story structure that goes by the generic-sounding name of “Cancer-Genetics” continues to take form. Begun just over a year ago, the building that will provide an additional 280,000 square feet for health and life sciences research is steadily steaming toward completion next spring.

That kind of full-speed-ahead progress makes Doug Barrett smile. Expanding the Health Science Center’s research programs is at the top of the “to-do list” of the senior vice president for health affairs. New research space at the HSC is fundamental to helping the university climb into the top tier of public research universities. And that’s why, with Cancer-Genetics well in hand, Barrett has duly noted it and moved on.

“We’re already thinking that, A, what a wonderful opportunity the opening of Cancer-Genetics is, and B, now we have to get on to the next ones,” Barrett said recently during a break from his annual monthlong commitment to the pediatrics inpatient service.

The “next ones” include another structure with a generic-sounding title, the Biomedical Sciences Building, slated to house the university’s advanced bioengineering and bioimaging resources, among other things, and a facility that will be home to a universitywide initiative addressing emerging pathogens with the potential to afflict man, animals and plants. Through the sustained work of Barrett and many others, these projects have now been positioned as among the university’s top legislative funding priorities. And like Cancer-Genetics, both these facilities will be thematically oriented — with participation of scientists from across the university — rather than college- or department-oriented.

“The paucity of research space has been one of our overriding concerns,” Barrett said. “It is also true that our teaching spaces were built in the ’60s and they are in need of work as well. But in terms of the order of magnitude of the problem, certainly research space is critical to getting the research enterprise growing at the pace that it needs to be in order to achieve our goals.”

Of course, new buildings alone will not boost UF in the rankings; new and improved research programs and the people who run them will also be necessary.

So Barrett is increasingly turning his attention to the challenge of “expanding the resource base” — in other words, finding the money to pay for the people as well as the buildings.

“We have to be extraordinarily energetic and effective in growing the resource pie for the deans and department chairs to be able to attract established investigators and the teams that come with them to make a quantum leap in the research enterprise,” he said.

Emerging pathogens and specific neurological disorders will be two of the areas requiring this kind of investment.

At the same time, Barrett said, it will be important to provide new funding to existing faculty research teams who are extraordinarily productive to ensure their programs “have what they need to be successful.”

Expanding the resource base for these purposes makes it imperative that Barrett and the UF leadership team do a good job of explaining those needs in Tallahassee and Washington. Barrett was pleased with the way that relatively new team came together last year and, for example, made the case for the state’s obligation to fund basic medical education rather than shift some costs to Medicaid reimbursements earned by the UF physician practice. That outcome will have a substantial benefit to the College of Medicine this year.

Speaking of the team, Barrett was pleased to have a hand in recruiting the last member of President Bernie Machen’s executive team. He led the search committee that brought Janie Fouke to UF from Michigan State University. He described Fouke as an energetic, creative and decisive leader. “Grass won’t grow under her feet,” he said with a laugh. “She makes a decision and then we’re down the road.”

With a background in biomedical engineering and pulmonary physiology, Fouke should also be someone who will communicate well with colleagues at the HSC.

In terms of his overall assessment of where the HSC is in its quest to be uttered in the same breath as health centers at Michigan, North Carolina, Alabama and Washington, Barrett said much work remains to be done.

“There are some examples of early progress, and some examples where we have an extraordinarily long way to go,” he said. “But we’re headed in the right direction.” **P**

# Preserving history

Oral historian Sam Proctor leaves a wealth of stories behind

By Nina Stoyan-Rosenzweig

**S**amuel Proctor, Ph.D., who passed away July 10 at the age of 86, perhaps did more than any other individual to preserve the history of UF.

In following this pursuit, the university's historian worked to restore historic buildings, served on numerous committees and, most importantly for the Health Science Center, developed a program of identifying the founding faculty and administrators and interviewing them.

A warm, congenial person, Proctor conducted his interviews to not only capture events through eyes of the founding deans and faculty members, but also to provide a wealth of detail about their families, their origins, their lives and about Gainesville in those early years. Because of his work, the HSC's collection contains transcriptions of irreplaceable oral histories from more than 50 people, many of whom are no longer alive.

These interviews, transcribed through the Samuel Proctor Oral History Project, also are a pleasure to read; they offer a window on the past, capturing the early years of the HSC. But they also show something of the character of Samuel Proctor, historian, UF historian and founder of the campuswide, indeed the statewide, oral history program.

His interviews were long and complete.

At the conclusion of a notable three-hour session with Hugh "Smiley" Hill, M.D., who passed away in August, Proctor remarked he was "very happy with this interview"—a typical reaction from a man who loved talking to people and who often remarked that the interview was a "wonderful experience" for him. He wanted others to share this pleasure and usually asked the subject whether he also enjoyed the interview. Often it was a wonderful experience for the interviewee as well, as exemplified by Hill's response to Proctor's question. Hill said, "I think it was a very thorough interview. Nobody has taken the time or the trouble to sit down and talk with me for so long. It was refreshing, and I have certainly enjoyed chatting with you."

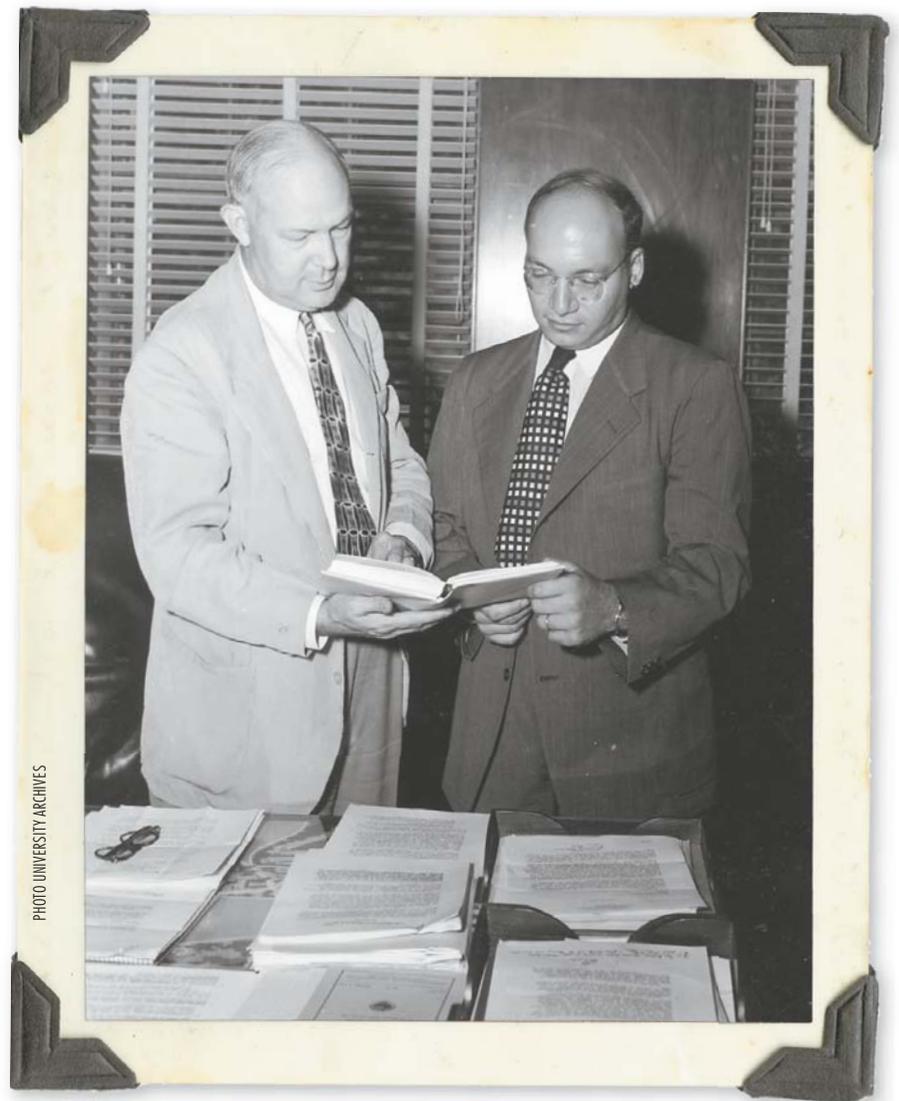
Jerome Modell, M.D., professor emeritus of the College of Medicine's department of anesthesiology, remarked, "Being interviewed by Proctor was like talking to a best friend."

And, Modell added, because Proctor genuinely enjoyed people and talking to them and he put them at ease, he was able to get information that no one else could.

Proctor probably knew more about the history of UF than any other single individual, and was an expert on Seminole and Southern history generally. He also is a man to whom the HSC owes a debt of gratitude because, thanks to him, the upcoming 50th anniversary celebrations of the HSC, the colleges of Medicine and Nursing, and the Library will be much richer.

In his years on the job, Proctor interviewed George T. Harrell, M.D., founding dean of the College of Medicine, Dr. Mark Barrow, member of the first graduating class of the College of Medicine, Dr. Melvin Fried, one of the founding members of the department of biochemistry, and Dr. Samuel Martin, founding chair of the department of medicine and vice president of the HSC, and Martin's wife, Ruth.

The HSC collection also contains interviews with Dorothy Smith, founding dean of the College of Nursing, Perry Foote, dean of the College of Pharmacy, Daryl Mase, founding dean of the College of Public Health and Health Professions, and many others.



Sam Proctor (right) presenting his book on Gov. Napoleon Bonaparte Broward to UF President J. Hillis Miller.

What if Proctor had not taken the time to capture vital health center history? If he had not recognized that the founding of these colleges in the 1950s was a unique historical event and not worked hard to capture the past? Without his energy, initiative and vision, huge portions of the HSC history would have been lost forever.

In saving this history, Proctor also provided an opportunity for many of his friends and colleagues to remember, and even savor, their own lives.

In concluding an interview with Robert Cade M.D., co-creator of Gatorade, Proctor said, "I hope perhaps you remembered a lot of things that you thought you had forgotten," to which Cade replied, "I did, and it was a pleasure talking with you."

Proctor's legacy at the HSC continues with a College of Nursing oral history project run by Ann Smith, and a HSC-wide program.

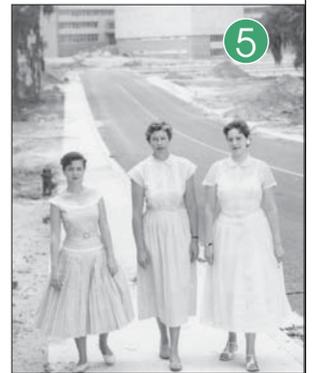
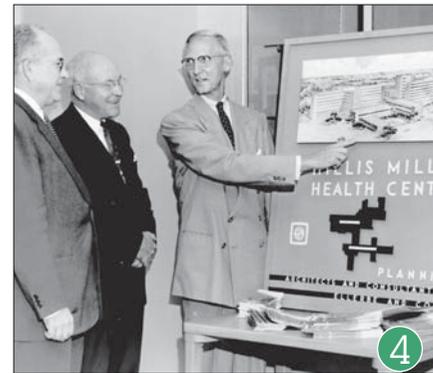
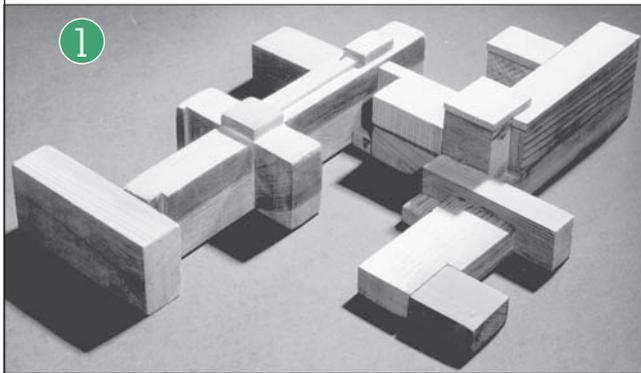
*Nina Stoyan-Rosenzweig is the HSC archivist. She received her undergraduate degree in biology from Brown University, and her master's degree, also in biology, from the University of Pennsylvania. Prior to coming to UF, Ms. Stoyan-Rosenzweig was on the faculty at the Washington State University Writing Center and History Department, where she taught English composition and history, particularly the History of Medicine.*

*For a complete listing of the interviews, go to <http://web.history.ufl.edu/oral/>, click on Visit the Oral History Collections and view the names and some summaries under UF College of Nursing and UF Health Center. **P***

# Some call them visionaries:

Early HSC leaders changed the face of health care in Florida

By April Frawley Birdwell and Tracy Brown



(From left) 1) A set of blocks were a model of the UF Health Science Center. 2) Architect Jefferson Hamilton, College of Medicine Dean George T. Harrell and Provost Russell S. Poor break ground for the Health Science Center in 1954. 3) J. Hillis Miller, UF's fourth president, died before his vision of a UF health center was complete. 4) Harrell discusses the health center with Poor (left) and Wendell Stanley. 5) Nursing Dean Dorothy Smith (center) and colleagues stand near the health center construction site.

They looked like an ordinary set of blocks.

But the wood rectangles George T. Harrell, M.D., took to doctors' offices and television appearances were so important he tried to keep Barbara Walters from taking a commercial break on the Today Show so he could set them up just so.

A model of what the UF Health Science Center would become, the blocks represented a vision conceived when J. Hillis Miller became the university's fourth president in 1947. Government leaders realized the state needed a medical school in the 1940s. But Miller envisioned something bigger: a health center, with schools of nursing, dentistry and other health professions as well.

And somehow, after the state authorized schools of nursing and medicine at UF, the right people came together to help Miller create it. Some, like Russell S. Poor, Ph.D., sought the challenge. Others, like Harrell and Dorothy Smith, the College of Nursing's founding dean, dreamed of revolutionizing their fields.

But each added something to Miller's vision that made the UF HSC one of the most novel health undertakings of its time, UF historians say.

"There's nothing like it," said Nina Stoyan-Rosenzweig, archivist for the HSC. "The people involved were amazingly visionary."

After UF was chosen as the site for state medical and nursing schools, Miller pulled in architect Jefferson Hamilton to start designing. He later chose Poor, director of university relations at the Oak Ridge Institute of Nuclear Studies, to map the new health center's needs.

Poor's field was geology, but newspaper stories from the time tout his reputation in education circles. He was later chosen to be the health center's first provost.

"I know he was very proud of having seen that school come out of the ground," said Poor's son, Robert, of his father. "We often wonder what he would think of it now."

Poor, Hamilton and Harrell, the first College of Medicine dean, worked well together, and met nearly every day while the center was being built, said Mark Barrow, M.D., one of UF's first graduating doctors who has written several articles on health center history.

"It was built over a sinkhole and was more complicated than they thought it would

be," he said. "They worked well together and became extremely close friends."

Harrell was an easy choice to be the first dean. He had an eye for detail and specific ideas about medical training. He and Miller saw eye to eye on many of these ideas, according to an interview Harrell with the Samuel Proctor Oral History Program.

"He had very strong views about medicine and tying it into the community," said Heather Harrell, M.D., his granddaughter and a UF assistant professor of internal medicine. "He was involved in every aspect of planning the medical school."

Harrell lobbied for student study cubicles to reinforce the importance of self-study and believed windows should be a certain height. He also felt medical training should include other disciplines too, particularly humanities.

Like Harrell, Dorothy Smith, M.Ed., believed in the interdisciplinary approach. Smith and Harrell even hoped medical and nursing students could work together, perhaps even take some of the same classes. That idea never came to fruition, Stoyan-Rosenzweig said.

Smith also dreamed of a new form of nursing education—a school where knowledge-based clinical excellence was the norm. She challenged established practices and her ideas laid the groundwork for advanced nursing practice and the shift in nursing research to clinical effectiveness and outcomes.

"This quiet, unassuming woman demonstrated great courage and the ability to change the outdated traditions of professional nursing," said Gloria Weber Calhoun, D.S.N., A.P.R.N., a graduate of the College of Nursing's first class and a clinical associate professor of nursing at Vanderbilt University. "Our unspoken curriculum encouraged the attitudes and values of personal power, especially for women. Dean Smith demonstrated this through her behaviors and ability to think outside the box."

Miller died in 1953, three years before the colleges of Medicine and Nursing opened. But the leaders he chose carried out the vision he first espoused in 1947.

"We shall not be content to sit on our laurels," Miller wrote in the foreword to the 1953 Medical Center Study, which outlined the needs of the HSC. "We believe we have the incentive and the ability to follow through to a conspicuous and successful goal." **P**

HEALTH SCIENCE CENTER

50  
1956  
2006  
YEARS  
UNIVERSITY OF FLORIDA

vision ■ innovation ■ continuity

# What would you put in a time capsule?

By Nina Stoyan-Rosenzweig

Thanks to the enthusiastic and thoughtful suggestions from students, faculty and staff, people opening a Health Science Center time capsule 50 years from now may know something about our addictions — well, at least our love of coffee — as well as our concerns with HIPAA regulations, our growing reliance on cell phones (does that constitute an addiction?), how we work with patients and many other details about how we live.

What do you think should be included in the new capsule? Some suggestions are published below. There is still time to recommend items of today that

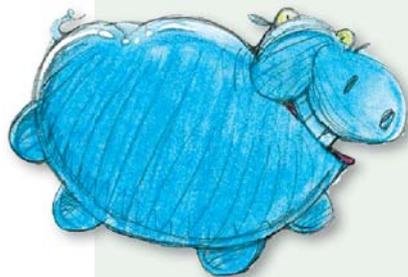
will become relics of tomorrow. The items put in this capsule will certainly reflect more about our daily life than perhaps the contents of the original capsule, which was planted in the Medical Science Building cornerstone in 1955. This cornerstone, originally outside the building, is now in a generator room in the ARB, a sign in itself of how much the Health Center has changed and grown during the past 50 years.

If you are curious about the contents of this original capsule, be sure to attend the Nov. 4 Faculty and Staff Appreciation Day, with the deans of the

colleges of Nursing and Medicine, the director of the HSC Libraries and the senior vice president for health affairs (and perhaps Elvis) for the unveiling the original capsule contents. This event will mark the beginning of a year of 50th anniversary celebrations that include burying the new capsule on March 31, 2006.

Once the Time Capsule Committee makes its final selections, items will be sent to a time capsule company for packaging and the new capsule will be placed in an area of designated green space or at least an area that will not change as UF continues to expand.

## A sampling of your suggestions so far:



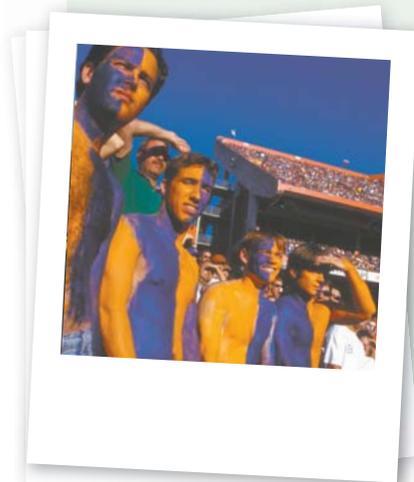
... Perhaps a stuffed hippo from our Privacy Office collection, which reflects HIPAA legislative protections that will have vanished with advancing years.

Susan A. Blair, Privacy Officer, Office of Sr. Vice President for Health Affairs



... Include a cellular phone, or a BlackBerry. I don't know a single person that leaves the house without one of these communication devices. Just think of how much the mobile phone has changed in the past 20 years, let alone 50! Could you imagine trying to get a hold of a doctor or patient w/o the convenience of a cell phone?

Elizabeth Victor  
Program Assistant, Office for Research Support, College of Nursing



... I was thinking a parking pass because I think parking at UF is a big issue. A copy of the recent UF survey and also a copy of The Alligator. Another thought would be footage of the fans at a Gator game — something with sound of course! I know I'm always amazed at how loud it gets in the stands of the Swamp!

Kathleen Couture, Office of Graduate Education, COM Office of the Dean

... A UF Parking Ticket  
:-) "Tedeschi, Juli B."



... A coffee cup from the Java Hut along with a small menu and prices.

Venita J. Sposetti, D.M.D.  
Assistant Dean for Admissions and Financial Aid, College of Dentistry

... Clothing: scrubs, sneakers, slippers, lab coat. Miscellaneous: prescription pad, cards used by residents to record lab tests, various preprinted order sheets, drug company giveaways: pens (the drugs listed on the pens will be long out of date), notepads, sticky pads, etc.

George Caranasos, M.D.

...A tile or something representative of the Arts in Medicine program, something from Wendy's, perhaps the nutritional info (we all eat there too much), an orange ribbon (so that we can continue to keep the memory of Caroline Cody alive along with her dreams to help the underserved), something from equal access or the mission trips.

Thanks,  
Karen Bodnar

**Wendy's U.S. NUTRITION INFORMATION**

*Percent Daily Values are based on a diet of other people's secrets.*

Item	Calories	Total Fat	Total Crap	Sodium	Sugar	Cholesterol	Protein	Trans Fat	Crash	Stress	Depression	Insomnia	Procrastination							
<b>Garden of Eatin'™ Salads and Fresh Fruit</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>Mandarin Chicken Salad</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>Spicy Mac Salad</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>Chicken Big Salad</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>Wendy's Super Salad</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>Homestyle Chicken, Turkey, or Beef Salad</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>Lighter Salad Dressings</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>French Fries</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
<b>Beverages and Frosty™</b>	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100

Please submit suggestions for time capsule contents online at the time capsule page via the 50th anniversary Web site: <http://50years.health.ufl.edu>.

# New UF center at heart of care for congenital cardiac conditions

By Melanie Fridl Ross

**U**F surgeons and pediatric cardiologists have joined forces to establish the UF Children's Heart Center, a move officials say will improve care for both children and adults born with complex cardiac conditions.

The center will provide coordinated care to patients with congenital heart disease at UF — from diagnosis to treatments that incorporate medical and surgical management and follow-up.

With more than \$3 million in funding from Shands at UF, the UF College of Medicine and Children's Medical Services, the center represents a major new investment in pediatric cardiology and congenital heart surgery programs and unites the expertise of specialists in pediatric cardiology, invasive electrophysiology, cardiac imaging and interventional procedures, heart transplantation, congenital heart surgery, nursing and more.

Cardiac surgeon Mark Bleiweis, M.D., director of the Children's Heart Institute at the Children's Hospital of Orange County in California, will head the center. His appointment takes effect Sept. 15.

"Our center will be able to provide care for the entire spectrum of congenital heart disease, from the smallest premature newborn to the adult with congenital heart disease, which would include complete repair of very complex heart problems to heart transplantation if necessary," Bleiweis said.

Approximately 225,000 babies are born in Florida every year. Of those, about 1 of every 150 newborns has some form of congenital heart disease, including structural problems of the heart and its vessels, and heart rhythm abnormalities.

"The approach to care provided through this center will enable even the most complex patient to be cared for by UF physicians," said Barry Byrne, M.D., Ph.D., professor and associate chairman of pediatrics and a pediatric cardiologist whose research focuses on developing genetic therapies for cardiovascular disease.

Terry Flotte, M.D., chairman of pediatrics on the Gainesville campus, said the center represents "a modern model," and called Bleiweis "a very gifted surgeon and somebody who has a very positive approach to this integration of care between the different disciplines."

"We're extremely enthusiastic about his ability to make this program successful," Flotte said.

Bleiweis also will serve as an associate professor of surgery and pediatrics at UF's College of Medicine. While in California, he introduced new programs such as the comprehensive treatment for hypoplastic

left heart syndrome and completed complex cardiac repairs in very small babies, including a premature neonate weighing less than 3 pounds.

As more children with congenital heart disease survive longer, pediatric cardiologists are increasingly overseeing their care well into adulthood. In fact, in the United States, there are now more adults than children living with congenital heart disease. In addition, these physicians also are caring for adults with previously untreated congenital heart diseases. These patients have their own unique set of problems.

"We do have a large population of adults with congenital heart disease," Byrne said. "For the most part, those patients are cared for by pediatric cardiologists. It's an emerging specialty within pediatric cardiology."

The center will seek to recruit additional faculty and personnel, including a Shands Children's Hospital pediatric cardiac anesthesiologist, an additional cardiac surgeon, a congenital heart surgery nurse practitioner and a research coordinator. In addition, six intermediate-care pediatric beds in the pediatric intensive care unit on the 10th floor of Shands at UF will be upgraded to pediatric intensive care unit beds. The intermediate care beds will revert back to a fourth-floor unit, where they were previously located. Hospital officials also anticipate dedicating an operating room and a cardiac perfusion team to pediatric cardiac cases.

The UF College of Medicine faculty in Jacksonville has for a number of years teamed with Wolfson Children's Hospital to provide advanced pediatric cardiology care and cardiac surgery to patients in the region and will work with the center to offer a seamless set of services.

"UF and Wolfson Children's Hospital have worked together traditionally in many ways and are helping to coordinate the care of these patients," Flotte said.

"They do have a joint cardiac catheterization conference and use a lot of teleconferencing and telemedicine technology to make the relationship work."

The center will draw patients from the primary referral areas of south Georgia, the Panhandle east to Jacksonville, the Space Coast south to Melbourne and West Palm Beach, and the Gulf Coast south to Ocala.

Many cardiac services are provided by UF physicians in Gainesville and Jacksonville, but each locale also has its areas of emphasis. In Gainesville, for example, faculty have special expertise in heart transplantation and cardiac magnetic resonance



Cardiac surgeon Mark Bleiweis, former director of the Children's Heart Institute at the Children's Hospital of Orange County in California, has been chosen to head the UF Children's Heart Center, which will provide care to children and adults with congenital heart disease.

imaging, while those in Jacksonville are particularly noted for pediatric cardiac electrophysiology. Both campuses have strong programs in echocardiography and catheter-based interventional procedures. Patient care also will be bolstered by a range of clinical and basic science research programs, particularly efforts focused on the study of cardiomyopathies.

UF physicians, for example, can review echocardiograms sent to them by community physicians around the state, and if they are normal, patients who otherwise would have had to travel to be seen can save the trip, said Thomas Chiu, M.D., a professor and chairman of the department of pediatrics on the Jacksonville campus.

With the recent addition of a new surgeon to the Jacksonville campus, Chiu added, officials also hope to double the number of open-heart surgeries performed annually.

William Cance, M.D., a professor and chairman of the department of surgery in Gainesville, called the development of a multidisciplinary center of excellence with a team of physicians from multiple specialties "a critical step to provide the best care to children with heart disease."

Flotte said, "As much as we're excited about the growth in patient volume and high-tech developments associated with this new center, the bottom line is we're very confident this will let us give better care to our patients, to kids who are born with congenital heart disease in the region." **P**

## Shands at UF medical center joins list of top hospitals in *U.S. News & World Report*

By Lance M. Skelly

Shands at UF once again has joined the prestigious ranks of America's top medical institutions in the 16th annual *U.S. News & World Report* guide to "America's Top Hospitals."

Included among the nation's 50 top academic medical centers, Shands at UF was recognized in nine clinical specialty areas in this year's comprehensive report for excellence.

Just 176 hospitals (out of 6,007 hospitals nationwide) scored high enough this year to rank in even a single specialty, and the hospitals in this list fit a certain mold. These are often referral centers because their physicians see sicker patients and perform higher volumes of complex procedures. They follow, develop and often propose advanced treatment guidelines and conduct research that migrates from labs and computer databases to the bedside.

"Being recognized among some of America's top hospitals is always an outstanding achievement and everyone associated with Shands at the University of Florida takes great pride in this recognition," said Timothy Goldfarb, Shands HealthCare CEO. "More than anything, however, these rankings reinforce the message to our community that some of the very best medical research and care — from bench to bedside — can be found right here at Shands and the UF Health Science Center."

According to the news magazine, the finalists considered for ranking are part of an elite group. To be eligible, hospitals had to either belong to the Council of Teaching Hospitals, be affiliated with a medical school or have at least nine of the 17 technology services listed.

*Lance Skelly is a public relations coordinator with Shands HealthCare Marketing & Public Relations.*

# UF&Shands

The University Of Florida Health System

## Specialty and rank:

Digestive Disorders: 26

Urology: 26

Geriatrics: 28

Neurology & Neurosurgery: 31

Respiratory Disorders: 34

Kidney Disease: 36

Gynecology: 36

Ear, Nose & Throat: 37

Heart & Heart Surgery: 43



Yeziarski

### September is Pain Awareness Month

Robert Yeziarski, Ph.D., a professor of orthodontics, neuroscience and anesthesiology and director of UF's Comprehensive Center for Pain Research, is also the newly elected president of the Florida Pain Initiative.

He and the initiative now lead a statewide effort to distribute information related to the impact of chronic pain in Florida as one of the goals for September's Pain Awareness Month.

The Florida Pain Initiative, a member of the American Alliance of Cancer Pain Initiatives, is a statewide resource to improve the quality of life for Florida's residents through the promotion of pain relief by education, clinical practice and patient advocacy. In 2003, the Florida Pain Initiative

conducted a groundbreaking Florida pain survey, discovering that Florida residents carry a significantly higher burden of chronic and untreated pain than the national average.

Yeziarski and the group are taking a leadership role in the creation of the Florida Pain Coalition, which currently includes 12 health-care organizations in the state with the goal of creating a voice for pain advocacy through education, awareness and research.

Yeziarski has been instrumental in planning the organization's annual pain awareness program. This endeavor includes the nationally acclaimed Power Over Pain campaign designed to heighten public understanding of the impact of untreated pain, patient rights and responsibilities in pain care, appropriate ways to communicate with health professionals about pain and ways to access pain treatment.

— Lindy McCollum Brounley

# Keeping the **weight** off

Congratulations! You've lost weight and you look terrific. But in actuality, your hard work is just beginning. Many people struggle with sustaining weight loss over the long term. In most weight loss studies, participants gain back 50 percent of the lost weight within 18 months after the completion of treatment. Weight-loss researcher Michael Perri, Ph.D., associate dean for research at the College of Public Health and Health Professions and a professor in the department of clinical and health psychology, spoke to the POST about the challenges of weight loss maintenance.



Supported by a \$2.6 million grant from the National Institutes of Health, Dr. Michael Perri leads a study to examine the effectiveness of a treatment plan designed to help rural women overcome barriers of limited access to health care and cultural differences in order to lose weight and keep it off.

## Q Why is it so hard to keep the weight off?

A It's probably a combination of biology, environment and psychology. After somebody has been in a period of losing weight, their body adjusts to taking in less food and their metabolic rate slows a little bit, making it easier to regain weight if they eat more than their body needs. From an environmental point of view, food is around us all the time. So when somebody's finished the process of losing weight they're just surrounded by lots and lots of temptations. If they experience a lapse in their weight management program, combined with the fact that their bodies are essentially primed to gain weight, they will experience a weight gain that's larger than they anticipated. Then the psychological part comes in. Many folks see the weight gain as evidence that they don't have the ability to sustain weight loss. They kind of give up and abandon any changes that they've made in their habits.

## Q What weight-loss maintenance strategies are effective?

A One interesting series of studies has looked at people who have lost weight and kept it off over the long run. It seems that there are three key elements to their success. One is that they're very vigilant about keeping track of what they eat and most of them weigh themselves regularly. They also stay very active, commonly getting close to the equivalent of an hour a day of walking. The third strategy is how much they eat. Surprisingly, a typical woman reports that she needs to stick with about 1,400 calories a day to sustain her weight loss, less than most people would expect.

We should also look at what we have learned from clinical trials. Generally we find that programs that offer opportunities to get advice and guidance after the initial year of weight loss are more successful than programs that don't offer such services. We've learned that using meal substitutes — products like Slim•Fast — for one or two meals a day can be helpful because people have fewer choices they need to make. Also, it appears that certain medications can be successful for sustaining weight loss. And the final component is social support — getting together with peers who are working on the same problem.

## Q What are some common mistakes people make once they've reached their goal weight?

A The first mistake is thinking that you're done. The programs that promise quick fixes such as losing 30 pounds in 30 days, are recipes for disaster. People need to make long-term changes in their diet and activity. Another mistake people make is thinking that there is a magic bullet or single specific kind of food or approach that is the only way to be successful, such as low carbohydrate or low fat or whatever it might be. The overwhelming amount of evidence that we have now shows that overall changes in energy consumption and expenditure are more important than any dietary component.

## Q What advice would you give someone who has entered a weight-loss management phase?

O During the weight-loss phase, people have a good idea of what they should eat to reduce their weight and typically have lots of reinforcement from others. People come up to you and say, “Oh, I notice you’ve lost weight, you look great.” But when people get into the weight-maintenance phase, it’s unclear how much they should eat and there are probably fewer supports for maintenance only, not weight loss. People rarely come up to you and say, “Hey, you look great, have you stayed at the same weight?” Also, relapses are inevitable given our society’s emphasis on eating, so almost everyone is going to experience some times when they falter in their eating or physical activity routines. Being able to bounce back from these slips and recognizing that it doesn’t have to be the beginning of the end is crucial.

## Q How should the health-care field approach weight control for patients?

O I think we’ve gotten to the point where we recognize that excess weight is more than just an issue of people being unhappy with their appearance. It’s a problem that contributes to many different illnesses and diseases, including five of the 10 leading causes of death in the United States. We also need to acknowledge that obesity is a multifaceted problem that no one sector of professionals can solve by itself. From a public health perspective, it’s going to take the efforts of health-care providers, educators, business leaders, people in the food industry, restaurateurs and others.

When treating people who are already obese or overweight, we often run into health insurance barriers. It’s not uncommon for health insurers to pay for people who are severely obese to get help, but not people who are mildly or moderately obese. So we have the uncomfortable situation of people not being heavy enough to be treated until they get heavier and sicker. Another obstacle is that oftentimes health providers are not aware of the health benefits that can come about with modest weight losses. The typical person who is overweight doesn’t need to lose 40 or 50 pounds to benefit. Weight losses as small as 10 to 15 pounds can be very meaningful in terms of reducing the risks of diabetes, high blood pressure and certain metabolic conditions. **P**



PHOTO BY KOR PHOTOGRAPHY

Clinical and health psychology graduate student Mary Murawski (right), a group leader for the weight loss treatment program in Levy County, provides instruction on how to examine nutritional labels on prepared foods. Shown with her are (from left) participants Jenny McCarthy, Sarah Miller and Patricia Daniels.

# BUILDING ON STRENGTH

The UF Institute on Aging reborn

By Denise Trunk

Pam Duncan, associate director of the UF Institute on Aging, and colleague, Christiaan Leeuwenburgh, chief, division of career development, discuss the details of a grant proposal.

PHOTO BY MICKEY CUTHBERTSON



**T**he problems facing older Americans are problems most everyone will confront eventually.

The bleak version of human aging: Lean muscle mass decreases, fat increases, strength wanes, activity level declines and hope for a vibrant future gradually fades. Disease or injury occurs, health-care bills pile up and the children drag out the rocking chair.

The new UF Institute on Aging's vision of aging: Loss of muscle strength and mass are halted by hormone therapy and healthy diet. The causes of inflammation and cell death are identified and avoided with diet, exercise, applications of nanotechnology and gene therapy. Energy levels stay consistent longer, disease is warded off into old age, physical and mental function remain high. Quality of life is extended.

To make this vision a reality and create a powerhouse for research and rehabilitation of aging-related illnesses in Florida, the Institute on Aging aims to marshal the vast resources of the university's colleges, such as Medicine, Public Health and Health Professions, Nursing, Liberal Arts and Sciences, and Engineering, not to mention the expertise of researchers at UF's Rehabilitation Engineering Research Center on Technology for Successful Aging, the Malcom Randall Veterans Affairs Medical Center's Geriatrics Research, Education and Clinical Center, its Rehabilitation Outcomes Research Center, and its Brain Rehabilitation Research Center, the UF Brooks Center for Rehabilitation Studies, and UF's McKnight Brain Institute.

The need is certainly upon us.

The century may be young, but the rate at which the elderly population — those 65 years old and over — is growing already has greatly exceeded total population growth nationwide. Consider this: The number of elderly Americans increased by a factor of 11, from 3 million in 1900 to 33 million in 1994. In comparison, the total population, as well as the population under 65 years old, only tripled.

Not surprisingly, Florida, with its warm climate and lack of state income tax, has by far the highest proportion of elderly citizens of any state in the nation. Almost 19 percent of its residents, approximately 2.2 million people, are 65 or older, according to U.S. Census Bureau figures.

In addition, of 6.8 million disabled older Americans, approximately 580,000 live in Florida. These people have difficulties with activities such as using the telephone,

going shopping, eating, dressing, toileting or bathing, and they use a large part of the state's health-care resources, accounting for much of its expenditures.

UF has redoubled its efforts to meet the need for aging research that focuses its resources on preventing and rehabilitating illness in the elderly to improve and extend the quality of life.

"We have to be leaders in understanding and solving the problems of an aging America," said Douglas Barrett, M.D., senior vice president for health affairs, of the emphasis on the need for aging research in UF's strategic plan.

The first steps in building a strong, unified program were to create the department of aging and geriatric research in the College of Medicine and bring aboard a leader with a strong clinical background. This effort was led by C. Craig Tisher, M.D., dean of the College of Medicine.

Marco Pahor, M.D., a professor of medicine and former director of the Sticht Center on Aging at Wake Forest University, came to UF in February to head the IOA and chair the new department.

"With our centers, institutes and affiliations, we already have considerable strength in gerontology, rehabilitation and working in social problems associated with the aged," Barrett said. "The addition of Dr. Pahor builds the geriatric research component. He will bring new clinical trials and research programs to UF."

Pahor's mission is clear, to bring UF to the forefront of aging research and rehabilitation, not just for the nation but for the world. He has begun by plotting strong and simple goals for the institute that dovetail with the university's ongoing research efforts, as well as answering the call of the National Institutes of Health's Roadmap for Medical Research— a series of progressive initiatives that seek to transform biomedical research and accelerate its discoveries by funding multidisciplinary efforts.

"Geriatric medicine does not have a target organ like cardiology, that focuses on the heart, or neurology. Or even a disease like cancer, for oncologists," Pahor said. "Our main target is function, trying to maintain people functioning as long as possible and maintaining their quality of life. Or if they become disabled, targeting their rehabilitation of disability. For this reason, the theme on which our entire research effort focuses is



Pahor

prevention, rehabilitation.”

Pahor said the IOA's first research goal is to understand which mechanisms lead to disabilities.

“There are several reasons why people become disabled — they can get a stroke or a hip fracture or a chronic disease that can lead up to a loss in function and capacity to do daily activities,” Pahor said. “Whatever the cause, there is always one characteristic that is always present and that is loss of muscle strength and muscle mass, which is called sarcopenia. So we are looking also at what causes sarcopenia. We are looking at how we can intervene with potential risk factors, both from pharmacological interventions and through therapeutic interventions such as physical exercise. And also, we have a line of research focusing on rehabilitative research to treat it once it has occurred.”

Pahor said the IOA plans to develop this research through to phase three clinical trials.

“We already have in place a rather strong basic science group,” Pahor said. “There is a strong health services research, psychological group, but clinical research or focusing on larger trials or larger epidemiologic studies needs to be developed. That is one of my main goals here, to integrate the other areas toward the clinical research program.”

Other key areas of research include:

- Brain rehabilitation
- Stroke
- Hormone therapy
- Obesity and aging
- Stem cell research and gene therapy



Mulligan

## An exercise in collaboration

Not only is aging not a unidimensional phenomenon, aging-related research is not a solo enterprise. Aging is by definition a phenomenon that involves all aspects of human beings, not just their health care, including social, cultural, health, physical and mental health, family and social context aspects. Participants in these research efforts can be jointly appointed or find their academic home within the new Department of Aging and Geriatric Research.

One is Christiaan Leeuwenburgh, Ph.D., whose research focuses on cell death, calorie restriction and inflammation. He joined the department to further investigate mechanisms of aging and to head up career development for junior faculty in the IOA.

The department's offices and the IOA occupy part of the fifth floor of the 1329 Building, 9,600 square feet dedicated to clinical investigation in the Butler Building and another 1,500 square feet of wet labs on campus.

The IOA's executive board and executive committee also emphasize the multidisciplinary approach comprising members from the various centers, colleges, departments, divisions and institutes.

The IOA's associate directors are Pam Duncan, Ph.D., director of the VA (Aging and) Rehabilitation Outcomes and Research Center; Michael Perri, Ph.D., associate dean for research in the College of Public Health and Health Professions; and Thomas Mulligan, M.D., the Ruth S. Jewett professor of medicine and chairman of the division of geriatrics in the department of medicine. He is also director of the Geriatrics Research, Education and Clinical Center, or GRECC, at the closely affiliated VA Medical Center.

Ann Horgas, an associate professor and associate dean for research in the College of Nursing, serves on the IOA executive committee. She is one of the country's leading nurse researchers on pain and aging and is completing a National Institutes of Health-funded study on methods to assess pain in nursing home residents with dementia.



Horgas

“The College of Nursing is excited about the new Institute on Aging building on the strengths of gerontology and geriatrics across the campus, and the CON faculty is eager to collaborate with the new IOA,” Horgas said.

“Aging is not just about treating one disease and so where UF has the unique ability to really be the pre-eminent place for aging research is by coupling its strengths in geriatric medicine with the basic and clinical sciences and the behavioral and social sciences and to look at the full spectrum of aging,” she added.

Indeed, Gainesville has an impressive cluster of research groups that are devoted to aging. The IOA is in a position to bridge these, said Tom Mulligan.

“The IOA crosses all boundaries. I'm of the opinion that we need to do what we can to break down barriers between divisions, departments and schools so we can best collaborate,” Mulligan said. “I see this as a jigsaw puzzle. If we can put it all together, we can become the pre-eminent center for aging in the nation.”

To address the multifaceted conditions of aging requires a team approach, Pahor agreed.

“Because aspects related to disablement in older people impact on so many different areas, you need a truly interdisciplinary team to address it from a comprehensive plan,” he said. “The IOA is a forum to accomplish this because we want to attract scientists, behavioral, basic, clinical scientists to the same room, addressing the same question from different aspects. This is how the IOA is being framed. This is how our department is framed. Also, this approach is exactly the NIH Roadmap for research from which all new grants and new initiatives are being directed. They are all framed among translations of science among different disciplines.”

## Answering the call

An initial project uniting those affiliated with the IOA is the planned submission of a grant proposal seeking funding for the creation of a Claude D. Pepper Older Americans Independence Center here at UF.

The total amount awarded for the competitive grant would be approximately \$4.2 million in fiscal 2006 and \$3.2 million in fiscal 2007.

There are 10 of these centers nationwide, funded for the purpose of increasing independence in older Americans. Pepper Centers provide support for research, to develop and test clinical interventions, and for core laboratories in the basic sciences. They are what Duncan calls “the gemstones of aging research.”

Pahor was the head of a Pepper Center at Wake Forest and Duncan was the co-director of the University of Kansas Pepper Center.

“The Pepper Center at the University of Kansas was very instrumental at helping us understand recovery after stroke,” Duncan said. “It was really the platform from which we helped design a large walking recovery program for stroke survivors. With that leadership and previous experiences, Pahor and I continue to be very active in Pepper Centers. I sit on the advisory panels for the University of Michigan Pepper as well as the University of Pittsburgh.”

“We need to be at the forefront of understanding how we deal with the psychosocial issues and family issues of aging. So this is an opportunity for us to build world-class programs linking aging and rehabilitation,” she added. “I think that by taking advantage of the opportunity we have and the talents we have, we can provide a platform for researchers to become successful and we can become competitive.”

Michael Perri, the associate dean for research in the College of Public Health and Health Professions, said there are a lot of positives to the increased collaboration that is beginning to occur.

“The ‘be all, end all’ is not the Pepper,” Perri said. “We need to learn more, discover more and share that with other people. That can happen without a Pepper. Hopefully, the collaborations that came together to get out the Pepper will continue regardless. Extending what we are all doing to the people who need it.” 



Perri

# Advance directives

A picture is worth a thousand words

By April Frawley Birdwell

**R**ay Moseley sees the trouble with advance health-care directives every time he speaks to a group of senior citizens: Several in the crowd always know someone who had a living will but whose end-of-life decisions were not honored anyway.

Ambiguity, objections and even fear cause families and physicians to ignore the decisions listed in advance directives more often than most people think, violating a patient's right to refuse treatment, says Moseley, Ph.D, a UF bioethicist. But he and two other researchers have envisioned an idea that could make end-of-life decisions easier to decipher.

Videotaping an advance directive would allow people to express medical decisions to their physicians and families in a way legal documents do not allow – face to face, the researchers explained recently in the *Archives of Gerontology and Geriatrics*.

“Studies have shown that advance directives, in spite of the idea that we should honor an incapacitated person's wishes, just simply don't work very well,” Moseley said. “There's this growing frustration out there that written advance directives aren't working and there don't seem to be any alternatives. We're offering an alternative.”

Moseley said the problem isn't the message of advance directives, which have been used for about 30 years and allow people to plan ahead for their health care should they become seriously ill. Advance planning can keep people from battling about end-of-life decisions in court, like the family of Terri Schiavo, a Florida woman in a persistent vegetative state whose husband and parents fought for years about whether her feeding tube should be removed.

But a written advance directive doesn't always stop the bickering among families, Moseley said. Seeing a relative explain his or her decision in a video could quell some of the discord, the researchers suggest. A videotape could spur discussions at home about death, too.

“None of us like talking about end-of-life issues,” he said. “We are a death-denying culture. But that's only one little part of (the problem). The big part of it is the medium.”

A written advance directive often raises more questions for doctors than the document answers. Physicians don't always know if their patients were coherent when they signed the form or what they meant by certain terms like “terminal.” And many physicians in hospitals are caring for incapacitated patients they've never met before, let alone when they were healthier and still coherent. This confusion about a life-or-death issue can force doctors to make conservative treatment choices, ones that may not coincide with what a patient expressed in an advance directive, Moseley said.

“Some of the most difficult situations — difficult for families, patients and physicians — revolve around advance directives,” said Robert Hatch, M.D., a UF associate professor of medical education who contributed to the report along with another researcher from the University of California at Los Angeles.

Hatch said a doctor with a full hospital schedule probably faces an advance



Pat (left) and Manny Lucoff discuss their living wills with Ray Moseley, a UF bioethicist. Moseley and other researchers think videotaped advance directives could give people more insight into their loved ones' wishes.

directive problem every other month.

Most doctors are uncomfortable relying on a legal document to determine whether a patient lives or dies, said Kenneth Goodman, Ph.D., a University of Miami bioethics professor and director of the Florida Bioethics Network.

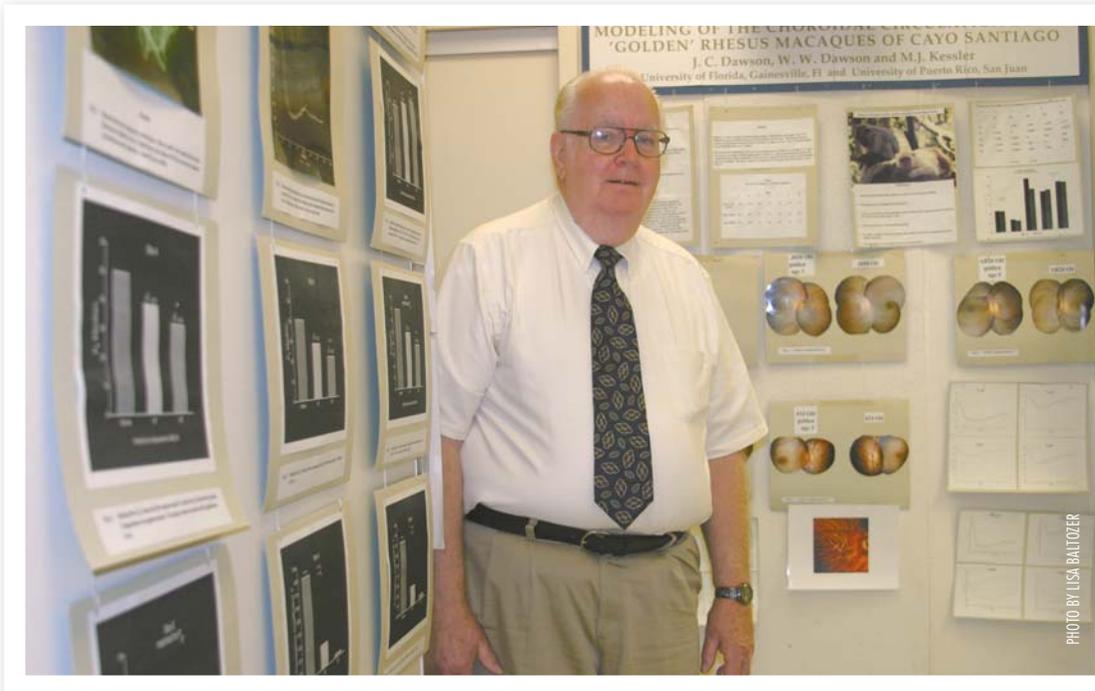
But with technological and medical advances keeping patients alive longer than they did 50 years ago, advance directives are becoming increasingly important, he said.

“Advance directives are a very important way to let your wishes be known,” he said. “(Video) is a very creative way of demonstrating what you want. I think it's a good idea.”

The researchers don't think the written form of advance directives should be scrapped, though. They see video as a supplement. While many states would accept a video, some states require an advance directive be signed to be legally binding. In Florida, an advance directive does not have to be written but must be witnessed to be legal.

Moseley notes that video living wills may not solve every problem. He said he thinks the idea needs to be studied further and people need to learn to accept others' wishes so a patient's rights are never violated. But for most families and doctors, Moseley said video is one step closer toward a conversation and, potentially, one step closer toward acceptance.

“Our goal should be to honor a patient's wishes as best we can, and a video living will would significantly help,” he said. **P**



William W. Dawson (above) and German researchers have pinpointed a genetic link between humans and rhesus monkeys that could unlock clues about age-related macular degeneration.

## Genetic links could unlock clues to leading cause of blindness

By April Frawley Birdwell

Age-related macular degeneration is the leading cause of blindness in older adults, yet researchers are still in the dark about many of the factors that cause this incurable disease.

But new insight from UF and German researchers about a genetic link between rhesus monkeys with macular degeneration and humans could unlock secrets about the earliest stages of the disease, when severe vision loss could still be stopped.

The researchers pinpointed a chromosome region and genetic markers for macular degeneration in humans and rhesus monkeys, findings recently published in the online edition of the journal *Experimental Eye Research*. Linking the disease in monkeys to the disease in humans allows researchers to study how it progresses in the animals, which could lead to better treatments and even a cure.

“Stopping the development of the disease is something the monkeys will help us do that we can’t do with humans,” said William W. Dawson, Ph.D., a UF professor of ophthalmology and physiology and a co-author of the study. “This is a big step forward in dealing with the disease.”

The researchers studied seven genetic sites in the monkeys that correspond to human chromosomes linked to macular disease. One of those areas, the findings confirm, contains genes that predict age-related macular degeneration in humans and rhesus

monkeys. Dawson and other researchers have suspected for years that the disease was very similar in humans and monkeys, but these findings finally establish that. This discovery, he said, will allow researchers to delve deeper into what causes the disease and could be the first step toward repairing the genetic defects linked to it.

According to the National Eye Institute, nearly 2 million Americans have advanced age-related macular degeneration, a disease that develops when a small, light-detecting part of the retina called the macula breaks down. Seven million more Americans have an intermediate form of the disease and millions more are expected to develop it within the next 15 years.

The disease can be controlled, but there is no known way to reverse the vision loss it causes. Knowing more about the earliest predictors of macular degeneration could help doctors treat the disease before extensive vision loss occurs and may even prevent it in some people. The early risks associated with macular degeneration have been difficult for researchers to study in humans, and as a result, doctors know little about this aspect of the disease, Dawson said.

“It’s difficult to follow closely the aging of a human over a specific period of time,” he said. “People wouldn’t tolerate a controlled (living) environment for weeks and years.” 

## Database could improve research at UF Shands Cancer Center

The UF Shands Cancer Center has adopted an innovative new database researchers say will benefit patients and improve the quality of clinical trials conducted there.

The Velos eResearch program has organized findings and patient information from current and past clinical trials into one centralized database researchers and staff members can access at any of the Cancer Center’s three offices.

Velos eResearch also helps researchers and staff members stick to timelines and monitor patients and results more closely, said Robert Marsh, M.D., director of the center’s clinical trials office and a UF professor of hematology and oncology.

“It’s going to allow us to analyze our clinical trials more closely,” Marsh said. “I think it’s going to raise the quality of the work we do.”

Merging all of the information from each of the Cancer Center’s three offices, which previously used different databases, into one comprehensive system allows employees to access information more efficiently.

Streamlining information also should increase the level of patient care in clinical trials because staff members are able to access the most up-to-date information about each of their patients no matter where they work in the Cancer Center.

Currently, there are 125 clinical trials open to patient enrollment. The Velos eResearch database manages 400 trial protocols and the files of 6,000 patients from current and past trials.

Velos, a Fremont, Calif.-based company that has been building software for the health-care industry since 1996, maintains the information on a secure server that complies with federal health privacy laws.

— April Frawley Birdwell

## UF researcher gets \$11 million to study genes, blood pressure drugs

A University of Florida scientist has been awarded an \$11.1 million, five-year grant to lead a large group of genetic researchers in an effort to help people with high blood pressure.

Researchers at medical centers at UF, the Mayo Clinic College of Medicine in Minnesota, Emory University in Atlanta and the University of Texas at Houston will study 800 patients to find ways to tailor drug prescriptions to people’s unique genetic make-ups, according to Julie Johnson, Pharm.D., director of the UF Center for Pharmacogenomics and the study’s principal investigator.

The award is part of the Pharmacogenetics Research Network initiative, a nationwide collaboration of scientists supported by the National Institutes of Health to study how an individual’s genes affect the way he or she responds to medicines.

“It’s often trial and error when a patient is treated for high blood pressure,” said Johnson, a professor at UF’s colleges of Pharmacy and Medicine and an executive committee member of the UF Genetics Institute. “There are more than 40 drugs to treat hypertension, but any given one will work in only about 50 percent of the individuals. That means it takes longer to get people the medicine that’s right for them, and during the process they wind up taking more drugs than they need to.”

— John Pastor

## DISTINCTIONS

### DENTISTRY

**ANA P. DECASTRO**, a dental senior, was selected by the American Association of Women Dentists to receive the 2005 Colgate Research Award. The \$500 award “salutes and encourages students to excel” in dental research, and it is presented to junior or senior dental students who have shown “academic distinction and demonstration of excellence in research.”



**TERESA A. DOLAN**, D.D.S., M.P.H., was one of two women dentists honored with the American Association of Women Dentists' 2005 Lucy Hobbs Taylor Award. Dolan was tapped by the association to receive the award because of her excellence as a role model for all women dentists and for representing the spirit and ideals of the award, which celebrates Lucy Hobbs Taylor. In 1886, Hobbs Taylor was the first woman to earn a Doctor of Dental Surgery degree. Dolan will receive the award during the October American Dental Association Annual Meeting in Philadelphia.



**NICHOLAS GRIMAUDD**, D.M.D., Ph.D., an associate professor and director of oral health maintenance, treatment planning and operative dentistry, received the Florida Dental Association's UFCD Dental Educator of the Year award during the Florida National Dental Congress held in Orlando.



**MARCIO GUELMANN**, D.D.S., an associate professor of pediatric dentistry, has been appointed chair of pediatric dentistry after an exemplary year serving as interim chair. As chair, Guelmann is charged with developing pediatric faculty through encouraging board certifications and fostering faculty academic and research collaborations, emphasizing interdisciplinary collaborations with Shands at UF, the College of Medicine and the Craniofacial Center. He will also work with faculty and the college's Curriculum Committee to review and revise pediatric dentistry curriculum for the D.M.D. Program, and will facilitate the development of a combined pediatric dentistry certificate and public health master's degree program.



### ROBERT H. SELWITZ, D.D.S.,

M.P.H., has received joint appointment as clinical professor of public health services and research with the UF College of Dentistry and dental director for the Duval County Health Department. Selwitz' responsibilities will be to administer the DCHD dental program with an annual budget of more than \$2.1 million, and to participate in interdisciplinary public health research and clinical instruction of the college's dental public health residents and D.M.D. students. Selwitz comes to UF from the National Institute of Dental and Craniofacial Research, where he served as chief of the population research and health promotion branch and director of the agency's residency program in dental public health. He is board-certified in public health dentistry and earned his dental degree from University of Detroit Mercy and his master's in public health from the University of Michigan.



### LIBRARY

**MICHELE TENANT**, Ph.D., M.L.I.S., the HSC Libraries' Bioinformatics Librarian for the UF Genetics Institute and the HSC Libraries, has been asked by the director of the National Library of Medicine to serve on the planning panel for “NLM Support for Genomic Science of the 21st Century,” which will help create the NLM's 2006-2016 long range plan. Tennant has also been named to the editorial board of the *Journal of the Medical Library Association* and she will specialize in papers related to bioinformatics, genomics, genetics and molecular sciences. Additionally, at the recent Special Libraries Association's annual conference, Tennant was presented with the Distinguished Member Award, which is the highest award bestowed by the SLA's Biomedical and Life Sciences Division.



### PAMELA SHERWILL,

M.L.I.S., the liaison librarian to the College of Nursing, and Beth Layton, M.L.S., M.B.A., the HSC Libraries' deputy director, produced an interactive tutorial on the Cumulative Index to Nursing and Allied Health Literature database that was honored by acceptance to the Association of College and Research Libraries' peer-reviewed instructional materials Web site. Their tutorial was the first of its kind to address the CINAHL database, and it has received acclaim in the fields of nursing and allied health.



### MEDICINE

**SCOTT TEITELBAUM**, a clinical professor in the psychiatry department at UF's McKnight Brain Institute and director of adolescent addiction at Florida Recovery Center, spoke to entertainment industry writers and news reporters about the effects of cocaine on teenagers during a media conference at ABC Television Network in New York recently.

The National Youth Anti-Drug Media Campaign of the White House Office of National Drug Control Policy selected Teitelbaum to appear on a panel with Llewellyn Wells, a TV and film producer whose credits include “West Wing,” and Tom Harrigan, chief of enforcement operations for the Drug Enforcement Administration.

### NURSING

**ANN HORGAS**, Ph.D., R.N., the associate dean for research, has been elected a fellow in the American Academy of Nursing.

The academy awards fellowships to individuals who have made outstanding contributions to effective nursing through practice, research, creative development, scholarly work, the influence of public policy or a combination of these. Fellows also must show the potential to continue making significant contributions to the field of nursing.

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 a National Institutes of Health-funded study on methods to assess pain in nursing home residents with dementia.



**MONIQUE WHITE**, a third-year student, was awarded the National Black Nurses Association's Dr. Lauranne Sams Scholarship by the Gainesville chapter of the NBNA.

White was one of four students nationwide to be awarded with the scholarship at the national association's 33rd Annual Conference in July.

The Dr. Lauranne Sams Scholarship, named for the founder and first president of the NBNA, is awarded to a student nurse who represents the leadership, commitment to service and scholarship of Dr. Sams.

The NBNA provides annual scholarships for student nurses to grow and better contribute their talents to the health care of their communities.



**MEREDETH ROWE, Ph.D., R.N.**, an associate professor, has been named a fellow of the Gerontological Society of America.



Rowe currently is the principal investigator of a National Institutes of Health-funded study to develop a night alert prompting system designed to prevent dementia patients from nighttime wandering, which can cause injury or death.

Fellowship within the Gerontological Society of America represents the highest class of membership and acknowledges the superior contributions made to the field of gerontology.

Rowe has written numerous publications on topics such as dementia, care after coronary artery surgery, chronic illness, and the impact of the caregiver on patients with dementia. Rowe also is a fellow of the Hartford Institute of Gerontological Research.

**DOUG RIED, Ph.D.**, a professor of pharmacy health care administration and assistant dean for curricular affairs and accreditation has been appointed to a three-year term as associate editor of the *Journal of the American Pharmacists Association*.



JAPhA is a peer-reviewed forum for original research, review, experience and opinion articles that link science with contemporary pharmacy practice to improve patient care. The American Pharmacists Association is a leader in providing timely, high-quality information and education for health-care professionals, and is an advocate for improved health through the provision of comprehensive pharmaceutical care.

**GREG WELDER**, a new pharmacy student, begins his academic career this fall with the American Heart Association/American Stroke Association Student Scholarship in Cardiovascular Disease and Stroke. Welder began his work this summer, under Issam Zineh, Ph.D., an assistant professor of pharmacy practice, studying the anti-inflammatory effects of the cholesterol-lowering drug Lipitor. The \$2,000 scholarship gives students an early opportunity to work in the laboratory to stimulate careers in research.



**LAURA WILLIAMS**,

a graduate student in the department of clinical and health psychology, is one of 10 students nationally to be named to the Student Advisory Board of the Society of Pediatric Psychology. Board members represent the interests of students in society programming, structure and training, and they encourage student participation.



## VETERINARY MEDICINE

**JOSEPH A. DIPIETRO,**

D.V.M., dean of the College of Veterinary Medicine, is one of a select group of scholars who have been selected to participate in the 2005 Food Systems Leadership Institute.

The institute emphasizes advancing and strengthening the food system by developing strong and effective leaders prepared to bring cultural change to food system organizations, with a special focus on the country's land grant universities.

DiPietro, who is president of the American Association of Veterinary Medical Colleges, also was recently appointed to the board of directors of the National Commission on Veterinary Economic Issues.

The NCVEI's mission is to improve the economic base of the veterinary profession, ensuring that the delivery of veterinary care and service meets the needs of society. The commission develops and implements strategies to ensure the future relevance, direction, responsiveness, capacity and economic health of the veterinary profession.



**JULIE LEVY, D.V.M., Ph.D.**, an associate professor of small animal medicine, was named the 2005 Outstanding Woman Veterinarian of the Year by the Association for Women Veterinarians.

Levy co-founded Operation Catnip, which works to reduce the feral cat population, and is a well-known advocate for homeless and feral cats.



## PHARMACY

**VERONIKA BUTTERWECK,**

Ph.D., an assistant professor of pharmaceuticals, has been elected to the U.S. Pharmacopeia Dietary Supplements Botanicals Expert Committee. She will be involved in setting USP standards for dietary supplements and herbals during the next five years.



**CARRIE HASKELL-**

**LUEVANO, Ph.D.**, an associate professor of medicinal chemistry, has been elected to the Council of the American Peptide Society. She will serve a six-year term, which serves as a board of directors for members from more than 30 countries.



**JULIE JOHNSON, Pharm.**

D., a professor and chair of the department of pharmacy practice, has accepted an appointment to the editorial staff of the journal *Clinical Pharmacology and Therapeutics*. CPT is one of the most widely read and respected journals in the pharmacy profession. Her responsibilities will include reviewing scientific articles, commissioning special reviews for the journal and acting as a primary advocate for the journal among scientific and professional colleagues.



## PUBLIC HEALTH AND HEALTH PROFESSIONS

**HARRISON JONES,**

a rehabilitation science doctoral student with a concentration in communication and swallowing science, was awarded the Larry Director Graduate Student Scholarship from the Florida Association of Speech-Language Pathologists and Audiologists. He also received a Graduate Student Scholarship from the UF Women's Club.



**KIMBERLY MILLER,**

a graduate student in the department of clinical and health psychology, was awarded a two-year National Research Service Award from the National Institutes of Health to support her research on emotion in Parkinson's disease. She is also the recipient of the Manfred Meier Neuropsychology Scholarship, given by the American Psychological Foundation.



Know someone who has earned a distinction? Please let us know. E-mail [dtrunk@ufl.edu](mailto:dtrunk@ufl.edu)

# HSC recognizes its most dedicated staffers

On June 2, HSC employees were recognized for their long-term commitment and dedication to the University of Florida with mementos of the university. The five-, 10- and 15-year recipients received a service pin, as did the 20- and 25-year recipients, who were also given a Gator hat and a paperweight. The 30-year recipients received the same gifts as the 20- and 25-years recipients plus a \$100 check, and the 35-year employees received the same mementos and a \$150 check.

## Dentistry

### 5 Years

Patricia Chesborough  
Paula Colvin  
Stacey Goodman  
Kathleen Leigh  
Ligia Ortega  
Federico Perez  
Mindy Register  
Pauline Roberts-Coleman  
Julie Thompson

### 10 Years

Elizabeth Apple  
Karen Barfield  
Amy Corbitt  
Grace Gulecas  
Joanne Kwiatkowski  
Jan Large  
Carmelit Lucarelli  
Marti Parsells  
Irene Sweeney  
Jerri Wainer

### 15 Years

Ronda Anderson  
Cynthia Bachus  
Opal Fullmore  
Jennifer Gollwitzer  
Linda Kubitz  
Patricia Matthews

### 20 Years

Beverly Mays  
Lee Mintz  
Carolyn Peragine  
Mitchell Salisbury

### 25 Years

Jacqueline Hopkins

Gloria Pagington  
Jerilynn Stillwell  
Ken Tomlinson

### 30 Years

Joan Ridgell

## Medicine

### 5 Years

Mabelissa Acevedo  
Jon Akers  
Dawn Allen  
Stephanie Anderson  
Rosemary Asare  
Daniel Ashton  
Melissa Bass  
Christine Baxley  
Tina Bradshaw  
Barbara Breeze  
Gary Brown  
Curtis Browne  
Barbara Bryant  
Robin Byrd  
Amy Cheatwood  
Jenika Christmas  
Amado Diaz Jr.  
Renee Dubault  
Sabrina DuBois  
Linda Ebbeling  
Lawrence Ebersole  
Arthur Flowers  
Elaine Francis  
Wanda Frazier  
Barbara Frentzen  
Kimberly Frost-Pineda  
Fengqin Gao  
Margarita Garlin  
Deborah Godwin  
Virginia Graham

Timothy Grzywa  
Diane Hammon  
Lisa Harvey  
Ethel Holder  
James Horne  
Barbara Howe  
Kelly Johnson  
Kim Jordan  
Tammy Kegley  
Lynn Kennedy  
Dianna Kish  
Irina Korytov  
Donna Krause  
Karen Lanzetta  
Rachel Lepanto  
Wei Li  
Amanda Lowe  
Twana Manning  
Kimberly Manucy  
Brenda Martin  
Kim McElroy  
Julia Messick  
Craig Meyers  
Felecia Milton  
Donna Ohern  
Lawrence Oshins  
Karen Perrin  
Glenn Philipsberg  
Teresa Polbos  
Christy Popp  
Edith Sampson  
Marlene Sarmiento  
Joseph Schentrup  
Cynthia Schuhmacher  
Elizabeth Shadden  
Shanna Silcox  
Jamie Sims  
Renee Smith  
Sandra Smith  
Scott Streibich

Susan Tanner  
Kathy Taylor  
Natalie Thomas  
Paul Tran  
Gregory Tyler  
Geri Underhill  
Heiman Wang  
Martha Wester  
Marylou Wilder  
Isabelle Williams  
Susan Wright  
Rhonda Yates  
Melanie Zawoy  
Meilan Zheng

### 10 Years

Marilyn Barnes  
Nordice Burnham  
Karen Byer  
Peggy Cissna  
Valerie Cloud  
Peggy Comerford  
Roberta Cook  
Catherine Cooper  
Mary Courts  
Nancy Dinwiddie  
Lorraine Duncan  
Susan Fitzwilliam  
Robert Gibson  
Janet Gilbert  
Mary Hancock  
Sally Harvin  
Benjamin Hawkins  
Sharon Hennessy  
Leonard Herring  
Susan Link  
Julie Ludlow  
Michael Matheny  
Debra McKeown  
Annie McPherson

Victor Mercado  
Linda Miller  
Teresa Mixson  
Claudette Nelson  
Jane-Ann Norton  
Connie Philebaum  
Wilhelm Schwab  
Melinda Sheffield  
Marguerite Smith  
Douglas Spinney  
Stephanie Stevens  
Diane Strong  
Cynthia Tannahill  
Jeffrey Thinschmidt  
Mary Thomas  
Maryellen Toombs  
Arthur Watson  
Donna Wegener

### 15 Years

Judith Allen  
Patrick Anthony  
Cynthia Batie  
Mary Blundell  
Alice Boyette  
Elizabeth Bruce  
Vince Chiodo  
Linda Curry  
Donna Davis  
Dorothy Davis  
Barbara Debarr  
Margaret Dermott  
Bridget Desue  
Jana Dew  
Laura Dickinson  
Margaret Dukes  
Mary Eckert  
Pamela Feaster  
Nigel Flinchum  
Candace Fossum



PHOTO BY J.R. HERMSDORFER/BNIS

20-year employees (back row, from left): Alex Trapp, Shirlene Harver, Cynthia Karle, Carolyn Peragine, Beverly Mays, Lee Mintz, Lisa Vannocker, Tim Vinson, Sharon Milton-Simmons, Barbara West, Robert Lockwood, Judy Harrell, Chuck Poulton, Mitchell Salisbury, Shirley Rushing, Dan Arrington.  
(Front row, from left): Drucilla Tulip-Valerio, Ann Case, Pat Siter, Jessie Runge, Lettie Herman, Judith Adams, Sally Kimberly, Cassandra Jackson, Ron Dearing.



PHOTO BY J.R. HERMSDORFER/BNIS

25-year employees, (back row, from left): Vicki Durrance, Griffen Sundeen, Fred Grant, William Richardson, Lynn Raynor, Donna Desmond-Kuhn, Faye Brown, Frances Edwards.  
(Front row, from left): Jerilynn Stillwell, Lisa Booher, Mary Opel, Jacqueline Hopkins, Virginia Simmons, Debbie Hodge, Debra Couch.

Nancy Hargrove  
Laurie Hartnett  
Shirley Hatch  
Mary Hoffman  
Jessie Hoffner  
Mary Hoyt  
Erin Jackson  
Donna Johnson  
Songa Jones  
Kendra Kuck  
Inez Lucas  
Lesley Myers  
Mary Newman  
Glennice Peters  
David Pittman  
Glenda Railey  
Rhoda Reed  
Lori Robinson  
Vicki Sabatella  
Hazel Shaw  
Ronald Smith  
Robbie Stringfellow  
Sherri Swilley  
Wendy Walters  
Rebecca Wichman  
Naomi Williams  
Charlotte Wood

**20 Years**  
Judith Adams  
Sandra Clark  
Ronald Dearinger  
Kirsten Faircloth  
Shirley Filer  
Linda Galloway  
Judith Harrell  
Shirlene Harvey  
Mary Heflin  
Lettie Herman  
Cynthia Karle  
Salli Kimberly

Margo Kramer  
Patricia McKey  
Sharon Milton-Simmons  
Deana Nance  
Winston Poulton  
Shirley Rushing  
Imogene Seeger  
Patricia Siter  
Beverly Watson  
Barbara West

**25 Years**  
Faye Brown  
Donna Desmond-Kuhn  
Vicki Durrance  
Fred Grant  
Deborah Hodge  
Valerie Holmes  
Georgia Johnson  
Mary Opel  
Lynn Raynor

**30 Years**  
Ruth Klockowski  
Jerilyn Stoner  
Deborah Wetherington

**35 Years**  
Kathryn Smith

**Nursing**  
**5 Years**  
Kenneth Foote

**15 Years**  
Cornelia Frazier

**35 Years**  
Dorothy Joseph

**Pharmacy**  
**5 Years**  
Susan Griffith

**10 Years**  
Laura Faux  
Deborah Kemp  
Janet True

**15 Years**  
Samuel Algee  
Yun-Ju He

**20 Years**  
Gladys Kallman  
Tim Vinson

**30 Years**  
Terry Whisenant

**Public Health and Health Professions**  
**5 Years**  
Chiara Carmolli-Anderson  
Kevin Hanson  
Vera Hemphill  
Mary Porumbescu  
Holiday Rogers  
Robin Shenk  
Wendy Thornton

**10 Years**  
Sarah Hayden  
Tonia Lambert

**15 Years**  
Diane Johns

**20 Years**  
Jessie Runge

**30 Years**  
Vikki Carter

**Veterinary Medicine**  
**5 Years**

Honore Busch  
Elizabeth Farmer  
Karen Hickok  
Tanya Holland  
Lisa Holtzendorf  
Delena McTeer  
Brandee Moody  
Lila Pittman  
Julie Poncier  
Susan Starke  
Lashand Williams  
Mary Wood  
Brandy Woodley

**10 Years**  
Alice Bliss-Dodd  
Gary Geiger  
Lottye Manns  
Gertrude Nichols  
Abby Rabe  
Karen Scott  
Theresa Torres

**15 Years**  
Judy Chastain  
Sharon Hewett  
Elise Lee  
Danielle Mauragis  
Mary Ring  
Brenda Sigmon

**20 Years**  
Jay Gilbreath  
Sandra King  
Brett Rice  
Anthony Ross  
Ana Zometa

**25 Years**  
Debra Couch  
Frances Edwards  
Kathleen McCartin  
Virginia Simmons

**30 Years**  
Annie Hahn

30-year employees, (back row, from left): Mae O'Neal, Bennie Crawford, Terry Whisenant, Vicki Carter, Jerilyn Stoner, Joan Ridgell, William Privet.  
(Front row, from left): Mae Richardson, Cathy Owen, Ruth Klockowski, Debbie Wetherington, Annie Hahn, Charlotte Eberle.



PHOTO BY J.R. HERMSDORFER/BNIS

## DISTINCTIONS

### Animal Care Services

**15 Years**  
Angie Boykin  
Joanne Gordon  
Leonard McDonald

**20 Years**  
Alex Trapp

### Physical Plant Division

**5 Years**  
Kenneth Berry  
Ayesha Britt  
Donald Blair  
Steven Craig  
Tamiru Gebremariam  
James Gibson  
Gary Morrison

**10 Years**  
Rodney Rucker  
Donald Wood

**15 Years**  
Leslie Becker  
David Crabtree  
Ira Cruce  
Leo Gengler  
Ike Smith III  
Luis Vazquez  
Allen Wade

**20 Years**  
Jeffrey Fletcher  
Clifford Pegler  
Jimmy Singletary Jr.

**25 Years**  
Gerald Hoyt  
Earnestine Murphy  
William Richardson  
Mary Smith  
Dorothy Strong

**30 Years**  
Sarah Bradley  
Bennie Crawford  
Adell Davis  
William Privett  
Mae Richardson  
Joann Ryles  
Lewis R. Scott  
James Taylor

**35 Years**  
Ulysses Ellis Jr.

### Student Health Care Center

**5 Years**  
Tavis Glassman  
Ursula Hicks  
Mary Homza  
Anthony Kelly  
Rhonda Larson  
Joy Lawton  
Bonnie Olson  
Candice Rogers  
Mary Thorkildson  
Rebecca Yale

**10 Years**  
Phillip Arnold  
Barbara Cribbs  
Vivienne Crooks  
Glynda Harris  
Melanie Harrison  
Pamela Taylor

**15 Years**  
Beree Darby  
Chari Martin  
Rankin Van Arnam

**20 Years**  
Drucilla Tulip-Valerio

**25 Years**  
Victoria Sustana

**30 Years**  
Charlotte Eberle  
Cathy Owen

### Senior Vice President, Health Affairs

**5 Years**  
Richard Deason  
Jessica Hacker  
Debbie Ann Hawkins  
Marilyn King  
Amy Osborne  
Kimberley Smith

**10 Years**  
Vicki Crafton-Zinn  
Dennis Hogue Jr.  
Edra Ijames  
Rita Jacques

**15 Years**  
Donald David  
William Peel  
Dorothy Smith

**20 Years**  
Daniel Arrington  
George Barnett  
Ann Case  
Cassandra Jackson  
Robert Lockwood  
Lisa Vannocker  
Katharyn Ward

**25 Years**  
Lisa Booher  
William Silk  
Griffen Sundeen

**30 Years**  
Mae O'Neal



Dorothy Joseph, a senior accountant with the College of Nursing, Ulysses Ellis Jr., of the Physical Plant Division and Kathryn Smith, of the College of Medicine, were recognized for 35 years of service.

## GRANTS

### College of Nursing autism researcher receives more than \$1 million in funding from NIH

By Tracy Brown



Elder

A UF autism researcher whose program focuses on the in-home training of fathers to better communicate and play with their autistic children recently received more than \$1 million in funding from the National Institutes of Health.

Jennifer Elder, Ph.D., R.N., F.A.A.N., an associate professor and department chairwoman in the UF College of Nursing, will lead a four-year study that will further expand training of fathers to learn effective communication techniques to better connect with their autistic children.

Autism is a developmental disability that typically appears during the first three years of life and is characterized by problems interacting and communicating with others.

Elder's previous study found that teaching fathers how to talk to and play with their autistic children in a home setting improved communication,

increased the number of intelligible words the youngsters spoke by more than 50 percent and helped dads get more involved in their care.

Elder and her research team plan to continue their research with a larger group of fathers and fine tune the interventions used based on their experiences in this study. They also plan to show fathers how to train their spouses in the techniques, and then evaluate the effectiveness of that approach. The team will note the effects of father training on parental stress and family cohesion.

In addition, the team is developing a Web site to broadcast training "booster" sessions via the Internet to a subset of participating fathers. Fathers will be able to view these training sessions and hear comments on how to improve upon their play sessions with their children.

"In addition to answering important questions related to autism," Elder said, "interventions and procedural methods in our proposed work may have wider applications and prove critical in developing future research with a variety of challenging childhood disorders."

# Medical students get dose of ethics, behavior training

By April Frawley Birdwell



UF medical students learn more than anatomy facts and science in class. Learning to be professional is an important aspect of medical education too, and college leaders emphasize this from orientation to graduation.

**A**dam Brank learned things any budding doctor needs to know when he was a UF medical student — human anatomy, the effects different drugs have on the body and the physiology of blood vessels.

He learned something that wasn't taught in textbooks, too. He learned how to be a professional and the importance of treating people with respect, qualities medical educators say are just as important as the thousands of facts students grapple with each year.

Through the years, the idea of teaching professionalism in medical schools has become increasingly important. The trend is a hot topic at national conferences, and the Accreditation Council for Graduate Medical Education now lists professionalism as one of six key competencies medical residents should possess.

At UF, College of Medicine leaders have taken an even stronger stance on medical professionalism, naming it the top competency in the college and stressing it from day one of medical school.

"The symbolism we try to convey is you gain a certain power (as a doctor), but with that power and authority comes a tremendous obligation," said Patrick Duff, M.D., associate dean for student affairs. "You have an obligation to put the patient's welfare above your own self-interest. You have a higher standard."

Faculty members describe professionalism as a certain attitude, qualities like being honest, humble, quietly competent, committed to learning and respectful of patients, peers, staff members and faculty.

Professionalism is emphasized at UF in classes and even in special ceremonies. Second-year medical students are presented with their first white coats during a

ceremony highlighting the symbolism of the white coat and what being a physician means.

"Our school (leaders), as well as others, always say there is a hidden curriculum," said Kyle Rarey, Ph.D., associate dean for program evaluation and development. "And the hidden curriculum is professionalism."

Learning professionalism isn't like learning anatomy though. No course deals solely with the concept, but it's a running theme, and administrators try to instill the importance of appropriate behavior in students before they even step foot on campus.

New students write a class code of ethics that each student signs, and medical students are also encouraged to work together as a team.

While first- and second-year medical students most commonly are disciplined because of academic problems, third- and fourth-year medical students, residents and fellows are more often cited for a lack of professional behavior. Only a few members of each class run into problems like these, though, Duff said.

There may be no Professionalism 101 course, but appropriate behavior is

key in classes like Essentials of Patient Care. One-fifth of a student's grade in this class is based on professionalism, said Rebecca Pauly, M.D., division chief of the internal medicine department and one of the professors who teaches the class.

"Professionalism, to me, is something that's a quality in a person, but it can be cultivated," she said.

Students actually learn best from the professors they observe, which makes it crucial for faculty members to be good role models, Pauly said. They also learn from their own progress, watching tapes of their interactions with standardized patients, who are trained to work with students. These patients rate their perceptions of students too.

Brank, now an internal medicine intern, still thinks about the speech of a professor, whose wife was seriously ill, that defines for him the importance of teamwork in medicine.

"He said there is no place for mean-spirited competition between each other. One day it is going to be one of our classmates taking care of one of our loved ones," he said.

Students also grade each other on their professional behavior, observations administrators later use to nominate students for the Chapman Society, a humanism honors society that recognizes caring qualities.

Brank, a member of the Chapman Society, now sees how important being caring and professional is every day in the patients he treats.

"If they know you are doing the best you can to help them," he said, "they return that by being kind and gracious to you." **P**

# New grant allows researchers to study bladder cancer's genetic profile

By Patricia Bates McGhee



PHOTOS BY PATRICIA BATES MCGHEE

Dr. Charles Rosser (left) and Steve Goodison (right) have received a \$447,719 grant from the James and Esther King Biomedical Research Program to study smoking's effects on bladder cancer.

**T**wo UF HSC Jacksonville researchers are looking for clues about smoking's effects on bladder cancer, thanks to a James and Esther King Biomedical Research Program grant awarded them by the Florida Department of Health.

Charles Rosser, M.D., an assistant professor of urology in the department of surgery, and Steve Goodison, Ph.D., an associate professor and director of research in the department of pathology, are among 16 recipients selected for the 2005 statewide awards. They will receive \$446,719 over three years for their research.

"The grant is looking at diseases that could be tobacco-related, so from a urologic oncologist's standpoint the most frequent tobacco-related disease I see is bladder cancer," Rosser said.

Indeed, in the United States smoking is the No. 1 cause for bladder cancer and bladder cancer is the third leading tobacco-related disease — after lung cancer and heart disease.

Bladder cancer is a predominately male disease, with women accounting for only 20 percent of diagnosed cases, according to Rosser, who said that may not hold true for smoking-related cases.

"It's also probably a little more prevalent in Caucasians than in African Americans, and we don't really know why," he said.

"The general public knows how smoking can affect the lungs and the heart but probably knows little about its effects on the bladder," he added. "But the same toxins produced by smoking that hurt the lung and the heart get into the bloodstream, are excreted into the urine and then sit in the bladder, sometimes for extended periods of time."

Goodison says men are probably more prone to have obstructive voiding systems. "This means they cannot empty their bladder completely, so these toxins are there," he explained, "and they're bathing the lining of the bladder."

Cells are normally shed from the wall of the bladder into the urine as part of the

natural turnover of the tissue.

"DNA is still in the cells, so we're going to look at the DNA in those shed cells present in the non-invasively obtained urine and see if there are any genetic abnormalities or changes," Rosser said.

Then the researchers will conduct genetic tests and correlate it back to the patient's clinical status.

"We will correlate all the clinical information — including history of smoking — with what we get from the urine sample," Goodison said. "The long-term clinical outcome of the patients is another piece of the puzzle that will also be correlated with the genetic profile."

The study might also identify a genetic predisposition to the disease, perhaps related to a less-sufficient clearance of the toxins.

According to Goodison, urine samples are obtained non-invasively and offer a very accessible sample for molecular biology analysis.

"This means that bladder biomarkers could really help clinically because you could easily screen both asymptomatic people and people with bladder cancer to look for recurrence," he said. "It's an area where you can really do some good and in a tangible timeframe."

What Rosser and Goodison hope to find is a genetic profile associated with the onset of bladder cancer or a genetic predisposition to the disease that can be used for screening, followed by earlier detection and intervention.

Similar studies have been done, with the largest collecting 40 samples, said Goodison.

"Other studies may come out in the meantime, but ours will be the biggest to date if it goes to plan," he said. "If we understand the genetics of the tumor, we can gain valuable insight into tumor biology and start to understand the molecular basis of tumor progression. This, in turn, could open up other avenues of basic research." **P**

# Iris Campbell

Calm amid the student services storm

By Tracy Brown

“Outside of work, my family, especially my grandchildren, are my pride and joy!”



Iris Campbell (seated), a program assistant for the colleges of Public Health and Health Professions, Nursing, and Pharmacy, assists new students in the HPNP's Student Service Center.

**A**mid the madness of student registration and scheduling appointments, dealing with pressures of three different colleges and handling aggressive parents who want to ensure their child receives the best advisement, you will find a very compassionate woman by the name of Iris Campbell.

Campbell, program assistant for the colleges of Public Health and Health Professions, Nursing and Pharmacy in the Student Services Center of the complex housing the three colleges, usually arrives in the early morning to make all of her necessary preparations, but when 8 a.m. actually hits, there is never a dull moment. Her day is filled with addressing student questions, making appointments, reserving classrooms for speakers or events, serving as the liaison between students and faculty, and handling a slew of other activities that come her way.

Before beginning as the program assistant in the HPNP Complex in November 2002, Campbell worked in the UF dean of students' office.

"I earned a great deal of insight on how to better assist students to suit their specific needs," Campbell said. "The university offers a lot of places for students to retreat to in order to deal with personal issues."

In the beginning, Campbell was forced to battle this demanding position alone, but those days have passed. Now, some of her load is shared with fellow program assistant Tina Pruitt.

In this position, Campbell has been faced with many extraordinary incidents where students have shared not only academic issues but also personal concerns.

"Students come to me, sometimes, just to talk about things going on in their life. It is not always related to school," she said.

Some of her most memorable moments are when she has had to deal with irate parents.

"Some parents call the office and demand to speak with their child's adviser, because they feel their child may have received some ill-advisement on an academic issue. I have learned to look over their anger because I know they only want what's best for their children."

Campbell was born in Fort Gullick, Panama Canal Zone. Her parents are from San Sebastian, Puerto Rico, but they raised Campbell in the United States. Her mother, father and sisters currently all live in Florida, and Campbell takes pride in her family's closeness.

From childhood to her adult life, Campbell has been immersed in military life. Her father served in the Army for 30 years, and her husband served in the U.S. Marine Corps. Her only son is currently in the Air Force. He has served in England for five years but is expected to return to the United States next summer. Her eldest daughter is a graduate from the UF Fisher School of Accounting and is now a certified public accountant. Her youngest daughter is a current student at UF and also served in the Army Reserve.

"Outside of work, my family, especially my grandchildren, are my pride and joy!" she said.

For Campbell, the most exciting moments at work are those when she can share in students' and faculty members' happiness and satisfaction; for example, when students tell her that they have been accepted to their program or when she is able to resolve a problem for faculty members so they can continue with more pressing assignments.

Campbell always enjoys going the extra mile to help out a student or faculty member. "It really makes me feel like I have contributed in making a difference," she said. **P**



Dr. Hugh “Smiley” Hill (left) was a mentor to many young medical professionals during his 42 years at UF, including Dr. Robert Brown (right).

## Legendary medical school dean dies

By April Frawley Birdwell

**D**r. Hugh M. “Smiley” Hill, M.D., knew just what to do when a worried medical student confided that his wife was pregnant, again, and money was tight.

“He said, ‘When it’s due, I’ll deliver it,’” Dr. Robert Brown, a former student, recalled of the conversation he had with the former associate dean of student and alumni affairs two decades ago. “He said, ‘Hey Bob, I’ll take care of it, just keep coming, keep studying.’”

Dr. Hill, considered a legend among College of Medicine alumni and a champion of students during his 42 years at UF, died July 31 in his Gainesville home. He was 81.

To many alumni, the name Dr. Smiley Hill is synonymous with UF’s College of Medicine. He spoke to students at orientation and except for the inaugural 1960 graduating class he placed the ceremonial hood on every graduating doctor at UF until he retired in 2001.

Students honored him with the Outstanding Clinical Teacher award 12 times and with the prestigious Hippocratic Award four times, even though no professor was originally supposed to win the award more than once.

“There is a rare person who is irreplaceable, and Smiley leads my list,” said Robert Watson, M.D., senior associate dean for educational affairs, at Dr. Hill’s packed memorial service Aug. 3. “He was a treasure no other medical school has had the good fortune to share. There was, and will always be, only one Smiley Hill.”

But he almost never became a doctor, let alone a teacher of doctors. The young Hill wanted to be a wrestler, but a college injury sidelined him and World War II led him into a career he never imagined.

Trained to be a surgical technician, he treated troops wounded in the Battle of the Bulge and earned the Soldier’s Medal of Heroism for saving an injured soldier from drowning. His war experiences also sparked a lifelong love of medicine.

After graduating from Davidson College, where he earned the nickname Smiley, he entered medical school at Johns Hopkins University. He came to UF as an obstetrics and gynecology professor in 1959.

To Brown, Dr. Hill will always be the man who saved his life, who encouraged him and helped him find financial aid to keep his family afloat while he studied. Brown called Dr. Hill every Thanksgiving to thank him and gave his fourth child, the one Dr. Hill delivered, the middle name Hugh.

“If it wasn’t for Dr. Hugh Hill, I would still be in Dixie, Ga.,” Brown said. “I would not be a doctor. He didn’t care if you were black, brown, polka-dot ... if you were a student he was there for you.”

Dr. Hill is survived by his wife, Ann Lazonby Hill, of Gainesville; and daughter, Grace, of Washington, D.C. 

# THE POST 09•05

#### Published by

UF Health Science Center  
Office of News & Communications

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The POST is the monthly internal newsletter for the University of Florida Health Science Center, the most comprehensive academic health center in the Southeast, with campuses in Gainesville and Jacksonville and affiliations throughout Florida. Articles feature news of interest for and about HSC faculty, staff and students. Content may be reprinted with appropriate credit. Ideas for stories are welcome. The deadline for submitting items to be considered for each month’s issue is the 15th of the previous month. Submit to the editor at [dtrunk@ufl.edu](mailto:dtrunk@ufl.edu) or deliver to the Office of News & Communications in the Communicore Building, Room C3-025.

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