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Just like **YOU**

Changing perceptions
about disabilities



Puppy **POWER** 6

Surgery for 19
OCD?

Passion for 23
parasites



On the Cover

W. Thomas Smith, a clinical assistant professor of pharmaceutical outcomes and policy in the College of Pharmacy, lost portions of his arms and legs during a bout with bacterial meningitis in 2000. Nearly one-fifth of Americans live with some form of disability, but misperceptions about these folks and their lives still abound.

This month, the POST explores how Smith and other HSC leaders are working to change this. Photo by Sarah Kiewel.

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A center gets its wings

In March, UF celebrated the grand opening of the UF Center for Psychiatry and Addiction Medicine in Vero Beach with a butterfly release and a public open house. The center, a collaborative effort between the UF College of Medicine and the Robert F. and Eleonora W. McCabe Foundation and its partners, is a community-based treatment center and teaching facility staffed by UF clinicians and fellows. "There is an overwhelming need for psychiatric services in the state of Florida, where recent reports rank us 49th out of 50 states," said Mark S. Gold, M.D., the Dizney distinguished professor and chair of the department of psychiatry at the UF College of Medicine. "This lack of access to care was brought to our attention by Ellie and Bob McCabe, and through their initiative, the University of Florida has begun to attract and will continue to recruit nationally recognized psychiatry and addiction leaders to benefit the people of the Treasure Coast." The center includes faculty specializing in adult psychiatry, child and adolescent psychiatry, psychology, psychopharmacology and psychotherapy. It also will serve as a primary site for the training of addiction medicine physicians, child and adolescent psychiatrists and other mental health professionals. The McCabes (left) have focused their foundation's philanthropic efforts on mental health care in Indian River County since 2001. Area philanthropists joined the effort by contributing an additional \$2.3 million over the next four years to support the Vero Beach-based center. — Karen Dooley 

Post it

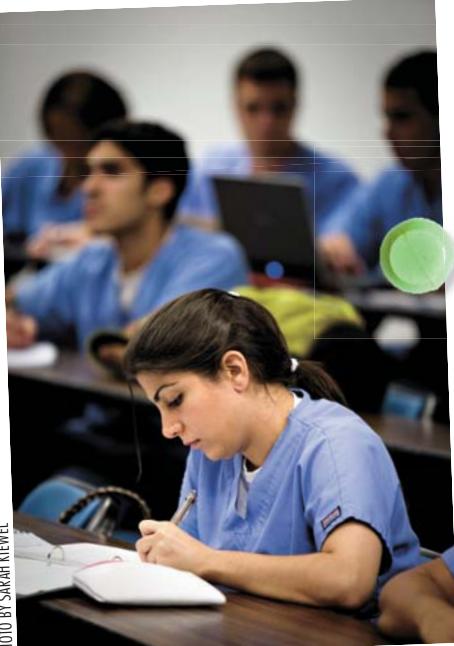


PHOTO BY SARAH KIEWEL

STAMP OF APPROVAL

The College of Dentistry received official word in February that its predoctoral dental education program had been granted the accreditation status of "approval without reporting requirements" by the Commission on Dental Accreditation. Approval without reporting requirements indicates that the program achieves or exceeds the basic requirements for accreditation. The next site visit for the predoctoral program will occur in 2015. "There are so many people in our college who played a role in helping us achieve this success and I can't thank you all enough for the sincere dedication and professionalism you showed during this process" said Dean Teresa Dolan.

RECRUITING THE CLASS OF 2027

It's never too early to steer students to a career in dentistry. The UF College of Dentistry got a jump start for the Class of 2027 when 38 second-graders from a local school visited the college for some hands-on fun. Organized by the college's D.M.D. Class of 2011 and spearheaded by David Cardman, the event included a range of experiences for the "recruits," plus pizza for lunch and some face time with The Mighty Molar. The children even got some hands-on experience with dental anatomy, dental radiographs and composite restorations. Old ivorine teeth, pre-prepped to mimic how cavities look, were mounted in stone cups. The children got to be the dentists and fill the "cavities."



VICTORY ON WHEELS

The University Rehabilitation Association participated in the Health Student Science Organization wheelchair basketball tournament held Jan. 27 at Santa Fe College. The URA team, "The Masters of Rehab," faced off against the pre-physical therapy team in the final round and won the tournament. UF students and faculty from the occupational therapy, physical therapy, rehabilitation counseling and health science departments participated in the event. Proceeds from the tournament went to the Independent Living Institute and the Sidney Lanier School physical education department to benefit children with disabilities.

RUN (OR SWING) FOR A CAUSE

Want to raise money for two worthy causes that benefit patients at Shands at UF? On April 25, the Climb for Cancer Foundation is holding a Tri-Distance Run at the Tioga Town Center, with proceeds benefiting the UF Shands Cancer Center. The event begins at 9 a.m. and will feature 5K, 10K and 15K runs and other activities, including a climbing wall from the Gainesville Rock Gym. For more information and to register, visit www.cfcrun.com. ... On May 8-9, the Ronald McDonald House of Gainesville is holding its annual Pro-Am Golf Tournament and Auction. Hosted by Amanda Butler, coach of the UF women's basketball team, the tournament begins at 11 a.m. on May 8 and at 9 a.m. on May 9 at the Haile Plantation Golf and Country Club. Teams will include four amateur golfers and one professional. A reception and auction will be held at the UF Touchdown Terrace Club. Tickets for this event are \$35 for one or \$50 for two. Proceeds will benefit Gainesville's Ronald McDonald House, which houses and supports families whose children are being treated in Gainesville, as well as the RMH Family Room located next to the Pediatric Intensive Care Unit at Shands at UF. For more information, call 352-374-4404 or visit www.rmhgainesville.org. **P**



The match

Medical students discover where they will complete residencies during ceremony

By April Frawley Birdwell

The letter, sealed in an envelope, contained the only words Asma Eisa wanted to see: UF College of Medicine-Jacksonville, pediatrics.

"My husband is an intern there," Eisa said. "That is the only place I wanted to go. I am happy. Three years, guaranteed."

On March 19, Eisa and 118 of her classmates in the College of Medicine Class of 2009 learned where they will complete their residency training during the college's annual Match Day ceremony. The National Resident Matching Program matches prospective residents to residencies using a mathematical algorithm that compiles students' and institutions' top choices. The decision is pivotal for medical students and determines not only where they will complete their residencies but what specialties they will enter.

Among UF's current crop of fourth-year medical students, pediatrics was the top choice for residencies, with 17 students entering this field.

"I just really like the kids and I thought it would be something I would be comfortable doing," Eisa said. "You try to eliminate everything else."

Other top choices for UF medical students included internal medicine and emergency medicine, among others. One UF medical student matched into vascular surgery, a specialty that students rarely enter straight from medical school, said Patrick Duff, M.D., the college's dean of student affairs and registration and a professor of obstetrics and gynecology.

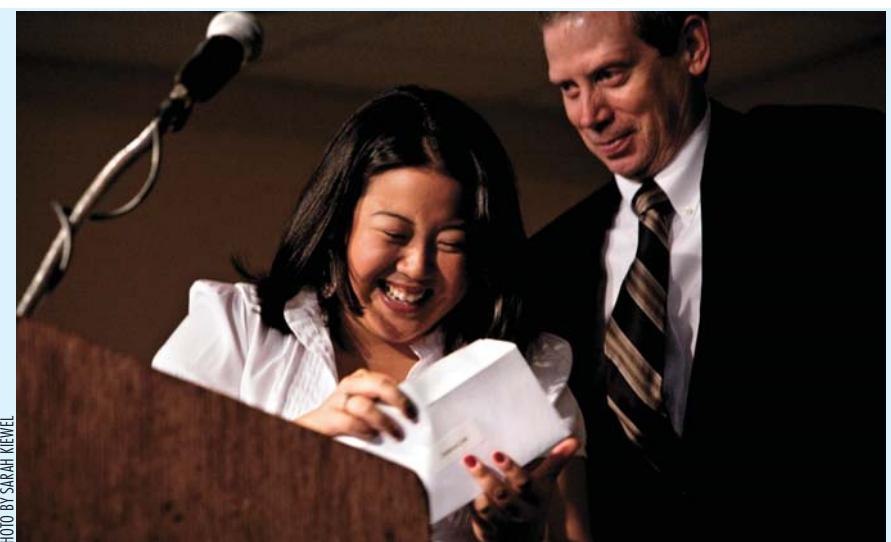


PHOTO BY SARAH KIEWEL
On Match Day, medical student Jessica Liao, shown with Dr. Patrick Duff, learned she was headed to the University of California-Los Angeles Medical Center for her internal medicine residency.

Thirty-three medical students will remain in Florida for their residencies, including 20 at UF. Overall, UF will receive 130 new residents in Gainesville beginning in July and 72 new residents at the regional campus in Jacksonville.

"We bring a great number of physicians to the state," said Michael L. Good, M.D., interim dean of the College of Medicine. "Although a lot of our students leave Florida, many more are coming into the state to do their residencies."

Stacy Baker is one of the UF students leaving Florida for her residency. But she's also entering family medicine, a field where more doctors are needed. Thirteen UF medical students are entering family medicine this year.

"It's the only thing I felt truly happy in," said Baker, who matched at the Spartanburg Regional Healthcare System in South Carolina. "Everything else felt like a job. When I went in family medicine, I felt like I was in my element and I felt excited about it every day. It just completed me, basically." **P**

The human touch

Students, faculty recognized for humanistic approach to medicine

Two medical students were inducted into the Chapman Society this year. Other inductees include faculty members Maureen Novak and Michelle Rossi; residents Erin Cannington, Michael Connor, Sean Kiley, Siva Suryadevara, Miguel Tepedino, and Klark Turpen; and medical students Casey Beal, Michael Dell Black, W. Kevin Conley, Katherine Corbyons, Lindsey Evans, Brie Folkner, Sherita Lynn Holmes, Chanley Howell Dudley, Grace Hsu, Christyn Magill, Lindsay Malloch, Ryan Nall, Mark Wilson Newman, Deirdre Pachman, Kavita Rajasekhar, Jeff Sellman, Illicia Shugarman and Irving Zamora.

PHOTO BY SARAH KIEWEL

By Jessica Brandi

Each year the UF College of Medicine recognizes that medicine is about more than science by singling out individuals who exemplify humanism in the practice of medicine. The Leonard Tow Humanism in Medicine Award, sponsored by the Arnold P. Gold Foundation, was presented to one graduating medical student and one faculty member at the seventh annual Chapman Chapter of the Gold Humanism Honor Society banquet on March 3.

Kavita Rajasekhar, this year's student recipient, said she was honored to be nominated and selected by her peers. She said her time here has given her a new appreciation for the term humanism.

Rajasekhar hopes to specialize in preventive medicine, focusing on environmental health and ecologically sustainable medicine. She believes in not only treating patients, but also looking at the community they live in and how they relate to it.

"I don't think we can isolate just the individual," she said. "In some ways, when

you're talking to a patient, you're just dealing with that one person. But you have to take into account that they have family and so much else that connects to their person."

In addition to her medical studies, Rajasekhar said she is proud of her involvement in the Animal Activists of Alachua, helping spread awareness about things like vegetarianism and the use of animals in the entertainment industry.

"That's what humanism means to me," she said, "realizing that humans are really just a part of the larger environment."

Maureen Novak M.D., a pediatrician and this year's faculty award recipient, said in her field especially, it is important to always consider a patient's family environment. And that is something she hopes to inspire in students.

"I think we're trying to teach not only the science of medicine, but patient care, and that includes treating the patients and family members with the utmost respect," she said. **P**



PHOTO BY SARAH KIESEL

UNDER THE HOT WHITE LIGHT

How a class in the spotlight helps pharmacy students learn

By Monica Vigo

Students in white coats — palms sweating, hearts racing — sit in class knowing they may be called on to defend their researched prescription-care plan. It is a test of everything they have learned in the first two years of pharmacy school, and they can't continue without passing this course on patient care.

"You can imagine sitting there in the class hoping and praying that your name doesn't get called on," said Paul Doering, M.S., a distinguished service professor in the UF College of Pharmacy. "But the minute it does, it's your turn to have 125 sets of eyes on you."

The class is Pharmacotherapy V and verbal defense — or "verbal assault," as students jokingly call it — is just a portion of what is expected in the class. And the video camera, recording everything, adds even more pressure.

The class started out as an idea sketched out on a cafeteria napkin back in the early 1990s, said Doering. His colleague, Tom Munyer, M.S., a clinical associate professor in the college, wanted to change the way pharmacy courses were taught by placing the responsibility on the students. They would have to come to class prepared and ready to use the information they had been given, Doering said. The video camera would be used as a learning tool for students to later review their progress.

Skeptical at first, Doering agreed to take on the new teaching style but soon found himself in the "worst semester of his teaching career" because of heavy student resistance. It was a huge change from what previous students had endured, and the concept of critiquing their own and others' video recordings did not sit well with the class.

The two professors, however, persevered and ultimately created a class they believe yields highly competent and more successful pharmacists.

"Though the 90s, students were uncomfortable at first," Munyer said. "It appears to be just the right teaching style for today's millennial students because of the active engagement and student-centered learning in a high-tech classroom setting."

This two-semester long course gives students an immersion in patient care through six unique scenarios — each lasting four days — called Main Cases. Other topics covered in the course include self-care, geriatrics and Medicare education. The professors also emphasize pharmacokinetics, the field of pharmacy that applies mathematical principles to describe a drug's journey through the body.

Through role-playing simulations, students participate in pharmacist-physician and pharmacist-patient situations that are designed to imitate what they will experience during their clinical rotations and beyond.

From the information they receive prior to class, during the class interactions and from what they have researched themselves, the students develop their care plan. Preparing in small groups, students are mindful that anyone in the group can be called on to present.

Clinicians who accept students for rotational training internships have seemed very impressed with UF pharmacy students and want them in their pharmacies, Munyer said. He attributes this to the real-life scenarios they research and practice in the pharmacotherapy course.

"They tell us there is no comparison between our students and students from other universities because ours are much more capable and prepared," he said.

Munyer and Doering enjoy hearing from past students, especially after they've had time to realize the course's intentions and apply their new skills.

Kathryn Samai, a graduating senior, is finishing her internship rotations at Memorial Regional Hospital in Hollywood, Fla., and in an e-mail expressed her appreciation to the professors after realizing just how well-prepared she was because of their class.

"UF students just seem to rise above the standard. I have noticed this throughout my rotations and am so proud to be a Gator," Samai wrote. P



The healing paw

Nursing students conduct pet therapy at Shands AGH for honors project

By Jessica Metzger

See Chelsea run. See Chelsea play. See Chelsea visit patients.

Chelsea, a 7-year-old corgi-sheltie mix, is a therapy dog senior nursing students Jessica Reinhold, Charlotte Simmons and Ashley Hoover used in their nursing honors project, Healing Paws.

During the fall 2008 semester, they brought Chelsea to Shands AGH to visit patients and their families on the oncology and cardiac floors, in the lobby and in family rooms.

The purpose of the project was to gather observational data of how patients reacted to the presence of a dog in the hospital and how the animal visibly affected their anxiety levels.

"We wanted something hands-on that would benefit patients," said Reinhold, 23, Chelsea's owner.

They spent two hours at the hospital each week, visiting between 20 and 30 patients, family members and hospital staff, Reinhold said. For some patients, Chelsea would perform tricks, like waving good-bye, sneezing on command or rolling over. With others, she would sit patiently and be petted, sometimes hop — upon invitation — into a patient's hospital bed.

"A dog is a good icebreaker," Reinhold said. "It's something that really takes a patient's mind off illness and gives them something warm and comfortable."

Reinhold recalled one particular visit with an elderly gentleman on the oncology floor who was missing a leg. He was alone in the hospital room and appeared withdrawn.



Ashley Hoover, Jessica Reinhold and Charlotte Simmons (shown from left) took Reinhold's dog, Chelsea, a trained therapy dog, to Shands AGH as part of their honors nursing project.



However, he lit up when Chelsea came into the room, immediately inviting her up into the bed so he could pet her.

"He told us his life story," Reinhold said. "And he looked less stressed."

Hoover, 22, said that for a lot of people, having an animal in the room is relaxing.

"It helps with homesickness and relieves anxiety in a hospital," Hoover said. "It took away the cold hospital setting."

Hoover said one of her best experiences came from visiting a young African-American family.

The father was ill, and he and his wife were visibly stressed. Once Chelsea was brought into the room, the children, ages 2 and 4, immediately began to play with the dog.

"The parents got a little time to themselves," Hoover said. "And the father was very thankful. He was stressed about keeping the kids occupied (while he was sick in the hospital)."

Simmons, 21, said an animal's presence also can help relieve the "white coat syndrome," where many patients associate doctors in white coats with painful procedures or unpleasant treatments.

"They know we're volunteers, here to talk and chat," Simmons said. "These patients need distractions while in a hospital ... and a dog reminds them of home."

Simmons remembered one woman, who sat worriedly at her sick husband's bedside. Chelsea served as a comfortable talking point, and the woman opened up to them about her own animals. Simmons said the woman relaxed and seemed happy and appreciative for the visit.

Hoover, Reinhold and Simmons designed Healing Paws because they wanted to be able to interact with patients as part of their honors project. Because Reinhold had a trained dog, they decided to try dog therapy.

"It was something we just jumped into," Simmons said. "It was very rewarding. You could see the relief on patients' faces — instant gratification."

Simmons said they were not allowed to collect any numerical data for their project, such as reading blood pressure or monitoring heart rates. But, in the end, they felt the project was successful.

"It helped patients' anxiety and relief, things which can often be overlooked in a hospital," Simmons said. "Therapeutic things should be used more, especially by volunteers."

Chelsea was certified as a therapy dog by Therapy Dogs Inc., Reinhold said. Chelsea had to pass basic obedience tests and be observed four separate times interacting with people. She also had to be very calm and well-behaved at all times. Therapy dogs also have to be bathed 24 hours before going into a hospital and have clean teeth and short nails.

Although Chelsea will be leaving with Reinhold when she graduates, Hoover, Reinhold and Simmons hope their project is continued by other nursing students.

"I think it's a great program, really good for patients," Hoover said. "It's rewarding to see. It relieves the scary, cold-needles setting." **P**

The road to discovery

Howard Hughes Medical Institute invests in UF scientist to pursue ‘best ideas’

By John Pastor

Studies of evolution and development are the perfect complement in the lab of Martin Cohn, Ph.D., an associate professor of biology and a member of the UF Genetics Institute.

Through his career, he has followed a path from anthropology to developmental biology to understand the evolution of limbs. Along the way, he studied jawless fish, legless snakes, five-limbed chickens and, most recently, the relationship between limb and genital development in rodents.

Now, he has become the only scientist in Florida to be named a Howard Hughes Medical Institute Early Career Scientist, a distinction shared by only 50 researchers in the United States, and one that places UF in the company of research institutions such as Stanford University, Harvard University and The Johns Hopkins University.

The HHMI Early Career Scientist program is intended to provide support to the nation’s best early career faculty who have reached a critical point in establishing vibrant research programs.

Researchers from U.S. universities and medical schools chosen for the Early Career Scientist Program become HHMI employees, but remain at their home institutions, receiving their salary plus \$1.5 million in laboratory support over six years to pay the costs associated with a high-level research program.

“We saw a tremendous opportunity for HHMI to impact the research community by freeing promising scientists to pursue their best ideas during this early stage of their careers,” said HHMI President Thomas R. Cech.

Cohn became interested in the evolution of limbs while an undergraduate at the University of Texas. He received his master’s degree in biological anthropology at Kent State University and his doctoral degree in developmental biology at University College London. Cohn is currently an associate professor of biology in the College of Liberal Arts and Sciences and of anatomy and cell biology in the College of Medicine.

His findings have led to new levels of understanding of evolutionary processes and shed light on human problems such as birth defects.

“I realized that if I wanted to understand how animal form changes during evolution, such as how the skeleton evolved or how snakes lost their legs, I had to understand development, because that’s when the genetic blueprint for the body is being executed,” Cohn said.

He began by studying chick embryos, a classic scientific model of limb development. At University College London, he discovered that the embryonic master switch for limb formation was a multifunctional protein called fibroblast growth factor. The finding, published in the journal *Cell*, was later proven true for other animals, including people.

After finding the trigger, Cohn set out to find what determines the precise positioning of limbs, such as hands on the ends of arms at the shoulders, and feet on the ends of legs protruding from the trunk.



PHOTO BY SARAH KIEWEL

Martin Cohn, the first scientist in Florida and one of 50 nationally to be named a Howard Hughes Medical Institute Early Career Scientist, receives congratulations from UF Genetics Institute Director Kenneth Berns (right) recently at the UF Cancer and Genetics Research Complex.

His research led him to the Hox family of genes, which direct the formation of body structures in organisms ranging from worms to people. His work showing that Hox9 genes determine where limbs develop along the trunk was published in the journal *Nature* in 1997. He went on to discover the molecular basis for loss of limbs during snake evolution and the role of Hox genes in the origin of jaws.

Since arriving at UF in 2003, Cohn’s group has discovered the evolutionary origin of the genetic program for fin development, shown how this program was modified to form fingers and toes, and identified the molecular basis for the loss of legs during whale evolution. The group also has published widely on the origin of skeletal development.

Along the way, Cohn’s lab noticed striking similarities between the processes that control limb development and those that regulate development of the genitalia. They decided to ask whether the same genes could be involved in development of these distinct appendages.

Understanding how genes respond to the environment is important for identifying the basis of these malformations, Cohn said.

“Dr. Cohn can work with the tools of molecular biology to find out what’s happening at that level and he looks to see if what he is predicting is actually happening in the animal — the only place that has any real meaning,” said Dr. Kenneth Berns, director of the UF Genetics Institute. “His work has been novel and fresh, and I can see why it captured the interest of the Howard Hughes Medical Institute.” **P**



PHOTO BY SARAH KEWEL

Hello, Kentucky

UF racing lab snags big contract

By Laura Mize

Before the horses line up at the gates at Churchill Downs on May 2 to run the Kentucky Derby, veterinarians will take samples of their blood and urine.

Those samples, along with ones taken from the winner and a few other horses after the race is complete, will make their way to the Florida Racing Laboratory at the UF College of Veterinary Medicine. Here, lab employees will test and analyze them, looking for drugs that may have enhanced the horses' performances and unfairly altered the outcome of the race.

Within three working days of receiving the samples, the lab must submit preliminary results to the Kentucky Horse Racing Commission, the state agency that monitors the approximately 350 horse races that take place in Kentucky each year.

Full results must be turned in "within 10 working days of receipt of the samples," said Richard Sams, Ph.D., the lab's director and a professor in the College of Veterinary Medicine's department of physiological sciences. Officials will not award prize money to the winner of the race until these results are submitted.

The UF racing lab was one of six labs that bid for the job of analyzing the samples taken before and after Kentucky's horse races. It is one of five labs in the nation accredited by ISO 17025

standards—the primary international standard for this kind of testing facility.

The selection process required facilities to conduct proficiency tests to identify drugs present in samples, submit written proposals, participate in interviews and give presentations.

"We had a small group that is affiliated with the racing commission who reviewed all the candidates and University of Florida stood out as the best of the applicants we reviewed," said Lisa Underwood, executive director of the KHRC.

The contract is for one year but could be extended without repeating the bidding process. Sams said the job will require the lab to expand its staff and buy additional instruments.

In a tough economy, this increased revenue also helps the lab to stay open and continue providing services to Floridians, said Glen Hoffsis, D.V.M., M.S., dean of the College of Veterinary Medicine.

"It is quite an accomplishment to successfully obtain the contract from the state of Kentucky," Hoffsis said. "And it's a tribute to the people that operate and lead this laboratory. This has become one of the premier, truly high-quality leading laboratories that does this kind of work in the United States and in the world."

The lab already has tested samples from some races. Underwood said the KHRC was pleased with this work.

The lab also does some sampling work for private individuals and tests samples from horses and greyhounds for Florida's Division of Pari-Mutuel Wagering, a state agency that

Led by Richard A. Sams (left), UF's Florida Racing Laboratory recently won a contract with the Kentucky Horse Racing Commission to test horses for the presence of performance-enhancing drugs.

oversees racing in Florida.

Standards against drug use in racing horses are higher than those for Olympic athletes, according to Sams.

"Only two substances are permitted for administration within a 24-hour period before race time in Florida," Sams said.

Why such stringent regulations? He cited three reasons for the strict rules.

Safety is one. An injured horse receiving drugs before a race to mask pain could be hurt more than helped by the medicine.

"It may injure itself even more," Sams said, "possibly to the extent that there could be a catastrophic injury that not only could have consequences to the horse, but other horses, jockeys."

Another concern is the betting that surrounds horse and greyhound racing.

People placing bets need to believe the races are fair. Racehorse owners also are concerned about fairness for another reason.

"For those horses in the most prestigious races, those horses will become breeding animals," Sams explained. "The owners make very substantial investments in those horses, and a horse owner wants their horse to compete with other horses without any of those horses being treated with drugs."

Sams said there's a saying that "the horses should compete on hay, oats and water."

"Even a drug that you and I might take for relief of a minor ache or pain is prohibited in racing for those three reasons." **P**

Attacking cancer at its roots

By Jennifer Brindise

To truly kill colon cancer and eliminate the risk of recurrence, it is important to kill the “root” of the disease, according to a UF College of Medicine surgeon.

“It’s like a dandelion, if you don’t kill the root it just keeps coming back,” said Emina Huang, M.D., a UF colorectal surgeon, who added that colon and rectal cancers have high recurrence and spread rates, especially if the disease is not found until advanced stages.

Her findings, available online now and to be featured on the cover of the

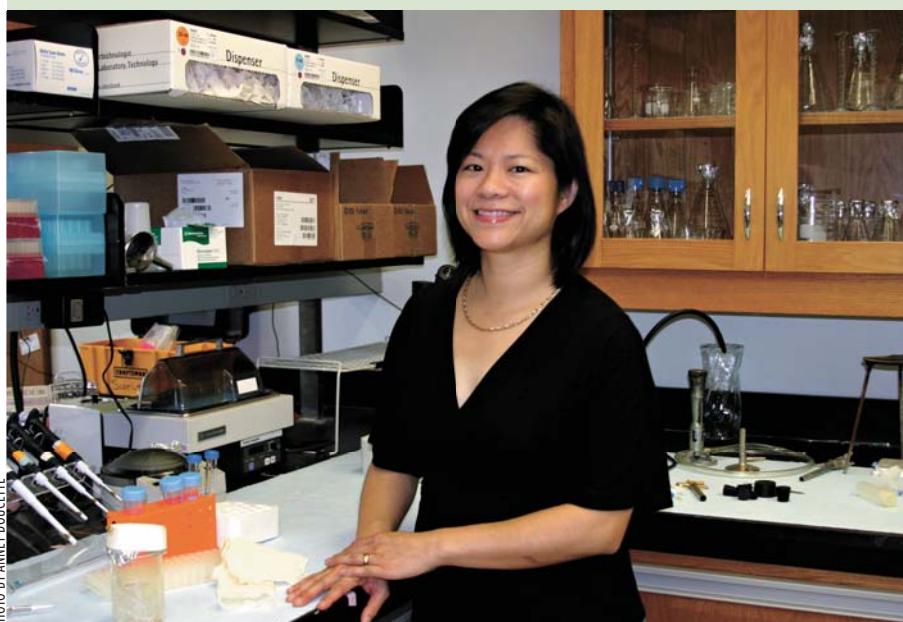


PHOTO BY ANNE DOUCETTE

EMINA HUANG, M.D.

April 15 print version of *Cancer Research*, identify a biomarker for colon cancer stem cells that she believes will help researchers further evaluate the cancers’ origins and progression. The discovery sheds light on the cancer stem cell theory, an idea that has arisen because cancer cells and stem cells share many qualities, including the ability of cancer stem cells to demonstrate self-renewal.

The research determined a protein called aldehyde dehydrogenase 1, or ALDH1, can be used to identify, isolate and track these ultra-resilient cells throughout the development of malignant colon or rectum disease. Previously used markers cannot as precisely track colon cancer stem cells.

“Without a better handle on what cells might be contributing to cancer metastases and recurrence, we won’t have any targets to go after,” said Huang, an associate professor in the UF department of surgery and a member of the Program in Stem Cell Biology and Regenerative Medicine at the UF College of Medicine. “This gives us a potential target.”

According to the American Cancer Society, about 150,000 Americans are diagnosed each year with colorectal cancer, and more than 50,000 die from the disease. In addition to the potential advances in therapeutic strategies, Huang said having a more direct target to explore will benefit progress in the areas of diagnostics and prevention. **P**

Alcohol AND AGE

After a few drink, older adults more impaired than they think

By Czerne M. Reid

Older, active people who have a drink or two might be more impaired afterward than they think, according to a March report from a UF research group in the *Journal of Studies on Alcohol and Drugs*.

Although people 50 or older in the study metabolized alcohol similar to how younger people did, they performed worse on special tests after having moderate amounts of alcohol and did not always realize when they were impaired. Soon after having alcohol, older adults also took on average five seconds longer to complete a test than their counterparts who did not have a drink.

“That doesn’t sound like much, but five seconds is a big difference if you’re in a car and need to apply the brakes,” said lead author Sara Jo Nixon, Ph.D., a psychiatry professor at UF’s McKnight Brain Institute. “It can mean the difference between a wreck, and not-a-wreck.”

More than half of adults older than 55 drink socially, according to a 2008 report from the Substance Abuse and Mental Health Services Administration. But few studies have focused on the short-term effects of social drinking among older adults. Nixon’s group aimed to expand understanding of the effects over time of moderate levels of alcohol consumption in healthy, active older adults.

The study involved 68 nonsmokers — one group aged 50 to 74 and a comparison group aged 25 to 35 — who had at least one drink a month. Within each group, some individuals were given alcohol while others were given a placebo beverage. The groups were matched by gender, body mass index, history of alcohol consumption and other demographic characteristics.

The participants were given tests that give clues about a person’s mental processing related to movement, and about the ability to mentally shift from one problem-solving strategy to another. The researchers also asked participants to rate how intoxicated they felt, and how much they thought the alcohol impaired their performance.

Older adults who had alcohol took longer to complete the tasks than younger adults who had alcohol. The researchers found that even though blood alcohol levels for participants in both groups rose at a similar rate right after drinking and reached the same peak, the older adults did worse on tests. That suggested the performance gap seen after moderate amounts of alcohol was not because of age-related differences in how the body processes the substance, but because of other factors influencing how alcohol affected the individuals. **P**



PHOTO BY SARAH CAREY

A ShandsCair flight made an emergency landing March 5 after a duck slammed into the helicopter's windshield while the flight crew was transporting a patient to Shands at UF. The crew landed safely, and the patient was not harmed.

Fowl play

By Jeff Kelly

The ShandsCair Flight Program team is used to responding to emergencies, but on March 5 they found themselves in the middle of one when a duck struck and shattered the windshield of their helicopter while they were in the air with a trauma patient.

Don Irving, a ShandsCair pilot; Marc Kazmierski, R.N., a flight nurse; and Ryan Fulford, a flight paramedic, were 700 feet in the air traveling 160 mph toward Shands at UF at the time of impact.

"I remember contacting base and telling them we were three minutes from landing," said Irving, who has been flying helicopters for 35 years and has worked with ShandsCair for one year. "Shortly after that, I heard a loud explosion and the windshield was gone. It wasn't like a hole in the windshield; it was gone."

The collision with the duck destroyed the front windshield and knocked several switches off Irving's overhead instrumentation panel. The momentum carried the bird into the aircraft's cargo bay.

"After I got over being startled, I told myself to just fly the aircraft," Irving said.

The duck grazed Irving's head, injuring his face and

ShandsCair pilot lands helicopter safely after duck strike

eye and making a dangerous situation worse. Irving had to land the aircraft with no windscreens, at night and with just one good eye.

Irving and his crew landed safely at the ShandsCair helipad on Southwest 16th Street. The patient was not affected. Ground transport rushed the patient to Shands at UF as soon as the helicopter landed.

"Everybody on board is part of the flight team and they all have a part in flying the aircraft," said Irving. "The guys in the back did everything right. Everyone kept their head on straight and we managed to get through it. I've had a few emergencies in flight before, but nothing like this."

The helicopter, like most other aircraft, has hit birds before, but they have always been glancing blows.

"Don would never say so, but he's a hero, just like Capt. Sully Sullenberger," said David Meurer, UF College of Medicine emergency physician and ShandsCair medical director, referring to the pilot who recently made news for landing in the Hudson River without fatalities.

"This crew did exactly what they were supposed to do," Meurer said. "They had it all together. The human factor saved lives in this case." P

New focus for an old disease

By April Frawley Birdwell

Everyone is at risk.

Although tuberculosis is often perceived as a disease of the past, particularly in the United States, it is still one of the world's top killers. Nearly 2 million people die from the disease across the globe each year, and many HIV deaths are attributable to TB, according to the World Health Organization. This is one of the reasons for World TB Day, held each year on March 24 to commemorate the discovery of the organism that causes the disease and raise awareness about the risks it still poses.

"The important thing to remember is until TB is eliminated everywhere, it's not eliminated anywhere," said Michael Lauzardo, M.D., a UF assistant professor of medicine and medical director of the Southeastern National Tuberculosis Center. "It just takes a few bad cases to cause a problem."

The number of people infected with the disease dropped slightly in the United States from 2008 to 2009, but experts say the rate of improvement has slowed in recent years, according to a Centers for

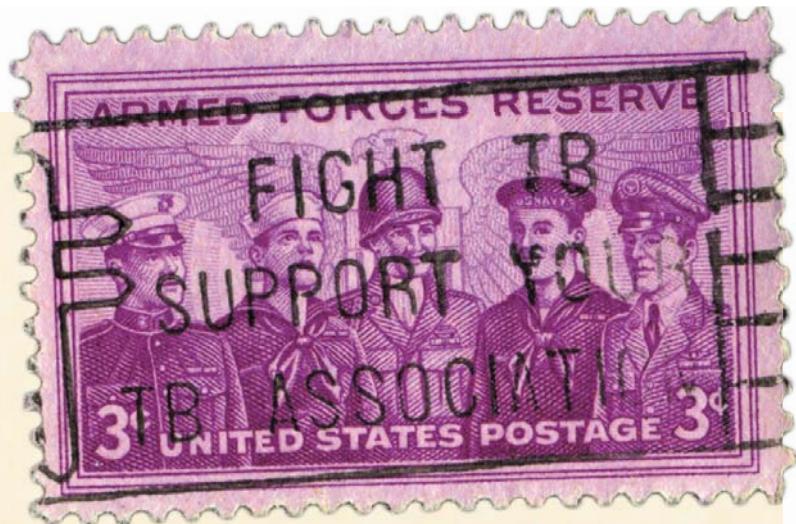
Disease Control and Prevention report released in March. The report also states that Florida is one of only four states with more than 500 cases of TB in 2008.

Drug-resistant strains of tuberculosis are also an emerging threat, said Lauzardo, who also gave a keynote address as part of a World TB Day presentation at the Broward County Health Department.

"As it becomes a major emergency we will start seeing more of those cases in the U.S.," he said.

Housed in the UF College of Medicine, the Southeastern National Tuberculosis Center is funded by the CDC and provides training and medical support to TB programs in Florida, the Southeast and across the country, Lauzardo says. Aside from this, in July the center became its own division within the department of medicine and has begun branching out into research.

For example, the center is collaborating with the



UF Emerging Pathogens Institute and Morocco's national institute of hygiene to look at the reasons why people still die from TB there, even though it's relatively rare and people have access to medical care.

To study the pharmacology of TB drugs, the center also will team with Charles Peloquin, Pharm.D., an expert who was recently recruited to the Emerging Pathogens Institute and the College of Pharmacy.

"A lot of neat stuff is happening," Lauzardo said. "We're really trying to integrate a lot of these pieces. Beyond operational research, we're getting into more basic science and drug development, hopefully trials related to vaccine development, all in partnership with the CDC, the Florida Department of Health and UF." P

Your brain on insulin:

Understanding the connection between diabetes and Alzheimer's



PHOTO BY APRIL FRANLEY BROWNL

GLEN FINNEY, M.D.

By Jessica Metzger

A study recently released by the National Academy of Sciences reports that drugs used to keep diabetes under control, such as insulin, may also shield memory-forming nerve connections from harmful Alzheimer's-related proteins. Glen Finney,

M.D., a behavioral neurologist in UF's department of neurology and co-director of the Memory and Cognitive Disorders Program, elaborated on the connection between diabetes and Alzheimer's disease and the hopes for treating and one day preventing Alzheimer's.

What does it mean when Alzheimer's disease is referred to as "type 3 diabetes" or "brain diabetes"?

We know there is a relationship between Alzheimer's disease and diabetes. People with poorly controlled diabetes are at a greater risk of developing Alzheimer's disease. People who have well-controlled diabetes are at only a moderately increased risk, compared to the general population. The only people who use insulin are those with diabetes, and in fact it would be rather dangerous to be giving people high doses of insulin when they don't have diabetes. What this tells us even more so than we had previously known, is that there is a relationship.

Are people with type 1 diabetes or type 2 more susceptible to Alzheimer's? If not, who is?

I'm not certain the type of diabetes makes a difference. Type 1 is considered a risk factor for Alzheimer's just like type 2. The interesting thing is that both insulin and rosiglitazone, a drug that helps the body better respond to insulin, helped protect neurons *in vitro* from something called amyloid-beta-derived diffusible ligands. Basically, for a long time, there have been theories that the amyloid protein is the bad actor in Alzheimer's disease. While the vast majority of Alzheimer's is age-related, for some families it is an inherited disease because of a mutation in amyloid processing. In addition, Down syndrome patients almost always get Alzheimer's disease. It turns out that the chromosome they have an extra copy of is the same chromosome on which the amyloid precursor gene is coded. To sum it up: Diabetes puts you at risk for Alzheimer's if it's not controlled. Amyloid brains are even worse off in terms of insulin than regular brains. And there is mounting evidence that treatments for diabetes may in certain Alzheimer's patients help.

What could this link mean for research and treatments?

I think it means we need to focus on the metabolic pathway for glucose, the hormones and enzymes that the body uses to store and use glucose as energy, and also how cells regulate glucose as possible treatment targets for Alzheimer's disease. There's already studies underway looking at rosiglitazone ... The one downside is there was a meta-analysis out that suggested for rosiglitazone and the other drugs in that same class, which have shown the most promise for Alzheimer's disease, they also have slightly increased risk of cardiac events, like heart attacks. So it's going to be a risk-benefit trade-off, and the question is going to be are the benefits enough to justify the risks?

How long has it been suspected there was a correlation between insulin deficiencies and Alzheimer's?

We started to suspect things in the early 2000s between diabetes and Alzheimer's. Part of that may be that we've gotten better at keeping patients with diabetes alive longer to see that there are connections. We're closer to, I think, breakthroughs in Alzheimer's disease than any other dementia right now. There are two classes of FDA-approved treatments for Alzheimer's. We still need to do a lot more, but there are things we can do for people.

Are there any steps a person can take to decrease chances of getting Alzheimer's from an insulin deficiency?

There's a couple things we know. Physical exercise is the closest thing you're going to get to a panacea in medicine. Physical exercise will improve your ability to regulate insulin and glucose. Having more lean mass than fat is better for insulin. Whether that will translate to Alzheimer's disease we don't know, but we have a reasonable suspicion. Two is make sure you have regular doctor visits and that they're keeping track that you're not developing diabetes. Also, keep mentally active. Seek new mental challenges, learn new things. We suspect, although we can't prove, the biggest bang for your buck may be to learn something completely new, and outside your comfort level. These are really the best recommendations we have at present for prevention. However, if you think you or someone you know are beginning to have memory problems, have your doctor check it out and if appropriate, be seen by a memory specialist because sometimes it's not Alzheimer's and there are things we can do, especially if it's caught early. **P**

COVER STORY



STORY BY APRIL FRAWLEY BIRDWELL

SMART CAPABLE UNIQUE

PHOTOS BY SARAH KIEWEL

NEARLY ONE-FIFTH OF AMERICANS ARE LIVING WITH DISABILITIES, BUT MISPERCEPTIONS STILL ABOUND. THIS MONTH, THE POST EXPLORES HOW HSC CLINICIANS AND RESEARCHERS ARE WORKING TO CHANGE THIS.

The pharmacist ran six miles that day, about as much as he usually did. Later that night, he went to a party. It was New Year's Eve 1999. The millennium.

As televised revelers donned eyeglasses fashioned from the numbers 2-0-0-0 and partied like, well, 1999, W. Thomas Smith, Pharm.D., J.D., started to feel like he was coming down with the flu. He didn't wait for the ball to drop or for the world's computers to crash because of Y2K. He was home by 9 that night. The next day, feeling worse, he went to the hospital.

Diagnosed with meningococcal meningitis, the deadly, bacterial form of the disease, Smith was immediately quarantined and lost consciousness. For several days, his condition wavered, improving and worsening. He developed a secondary infection and, because of this, lost portions of all four of his limbs.

"All of this happened while I was unconscious," says Smith, now a UF assistant professor in the College of Pharmacy. "I woke up sometime about mid-March of 2000. After 10 weeks in a coma, I was in a different world."

Smith was still the same person: a graduate of the St. Louis College of Pharmacy, a pharmacist at a long-term care facility. But he had entered a world where he would have to find new ways to move from room to room, open doors and even eat. It was a place where he would have to fight with insurance companies about his benefits, where buildings don't always accommodate wheelchairs and where people often see the disability before they see him.

For millions of Americans, this is life. Currently, 62 million have some form of disability that limits their physical or mental function, according to the National Center for Health Statistics. Laws such as the Americans with Disabilities Act have improved life for people with disabilities, yet physical and social barriers still limit their access to health care and education. Basically, the fight for equality rages on.

"We want to make sure we are a society that values the full participation of everyone," said Elena Andresen, Ph.D., a UF professor and chair of epidemiology and biostatistics in the College of Public Health and Health Professions and director of the Florida Office on Disability and Health. "It is not an issue of having sympathy but understanding differences. You are getting to know a person not a disability."

CONTINUED ON page 14



SECOND-YEAR MEDICAL STUDENTS WATCH A SLIDESHOW CALLED A PHOTOMAP THAT SHOWS WHAT IT'S LIKE FOR A PATIENT WITH A DISABILITY TO GET TO AN APPOINTMENT. PHOTOMAPS ARE ONE PART OF A TRAINING MODULE DESIGNED TO TEACH MEDICAL STUDENTS ABOUT PATIENTS WITH DISABILITIES.

A LESSON IN empathy

Huddled around a table, a group of second-year medical students watches a woman's frustration at a radiology clinic play out on the screen in front of them. She went in for a mammogram, her first in 25 years. But the visit didn't go as planned.

The clinic staff wouldn't let her control her own wheelchair during the exam, even though the motorized chair rises and tilts. Aggravated, she vents about the situation.

The story is part of an audio slideshow called a Photomap, a new research methodology that UF College of Public Health and Health Professions researchers developed, in part, to educate health-care providers (and future ones) about the barriers patients with disabilities face.

Researchers Ellen Lopez, Ph.D., M.P.H., and Eva Egensteiner, M.A., C.P.H., worked with four women living with disabilities to create photomaps detailing their experiences obtaining a mammogram or visiting the doctor. The photos, which the women and researchers

took, were paired with each woman's recorded thoughts about her experience.

The women face barriers that seem painfully obvious when looking at their encounters from their perspective but might go unnoticed by someone without a physical limitation — such as doors that don't open automatically. One woman described her technique for opening doors while seated in her wheelchair; she wedges her foot in to keep it from closing. She's broken her foot this way but says it's the only way she can get in without help.

After Melanie Hagen, M.D., a UF physician who co-directs the College of Medicine course, Essentials of Patient Care, viewed the Photomaps, she and course co-director Rebecca Pauly, M.D., teamed with Lopez and Egensteiner to develop a training module for medical students about patients with disabilities. The researchers received a College of Medicine grant for the project. First- and second-year medical students viewed the Photomaps and attended a lecture and panel discussion in March. First-years also began "seeing" patients with disabilities during role-playing sessions at the college's Harrell Professional Development and Assessment Center last month.

"Being able to empathize with a patient is, to me, the most important thing in medicine," Hagen says. "That is something I try to improve in my own practice."

For Lopez, the goal of the session was less an overview of disabilities and more a lesson in empathy.

"The goal is not only that they be aware of disability issues, but also that they use their knowledge and power to be advocates. I want these students to realize that they can be the catalysts for positive change," says Lopez, now a research associate at the Center for Alaska Native Health Research. "If they can understand, just a little bit, what it is like to have a disability, it will change their practice."

UNSEEN barriers

When Lopez was at UF, she sent her students on an assignment: traverse downtown Gainesville in wheelchairs. Easier said than done.

Wheels caught on cobblestone streets, buildings were too narrow to roll through and few handicap-accessible bathrooms were found, Lopez says.

"The library was pretty accessible, but not all the buildings and restaurants," she says. "Everyone should have to spend an hour in a wheelchair."

UF nursing students made similar observations while collecting data on accessibility in Gainesville, Jacksonville and Northwest Florida, said Barbara Lutz, Ph.D., a UF College of Nursing assistant professor who studies disability issues.

The ADA, a civil rights act for people with disabilities that was passed in 1990, requires accessibility in public buildings, parking lots and other venues. Although considerable progress has been made, these regulations often are not enforced.

But there are other barriers that could be even more limiting, specifically the attitudes of other people.

"I call them 'attitudinal' barriers," says Lisa Hannold, Ph.D., a researcher at the North Florida/South Georgia

Veterans Health System, who was born with a type of muscular dystrophy called spinal muscular atrophy. "Attitudinal barriers can be much more difficult to break down than physical barriers. You can try to educate. Some people are willing to change. Some are not."

Breaking this barrier is particularly crucial in health care, where the relationship between provider and patient can sometimes mean the difference between life and death. Often, because of misperceptions about life with a disability, health-care providers overlook needs, such as preventive care. For example, Hannold says she had to press her doctor for her first gynecological exam.

"In health care, when someone with an obvious disability comes in for care, our attention goes right to the disability," Lutz says. "We forget this is a person who has a life, we forget they have the same prevention needs everyone has."

Hannold, one of the women who made a Photomap, has always advocated for herself and carefully chooses physicians who treat her like a partner. Smith says his background in health helped him when he was fighting with insurance companies after his illness. But not everyone speaks up.

THE NEED FOR change

One of the photos in Hannold's Photomap shows her cruising up a ramp into her own van. Her van cost nearly \$40,000. As a working researcher, she can afford it. But this is a luxury for many with disabilities.

In short: having a disability costs money, and because of insurance issues, some people encounter limited employment possibilities, despite their capabilities. Often, people must work for larger companies to get insurance. Medicaid helps people get care, but it has income restrictions that prevent people from seeking certain jobs for fear of losing coverage.

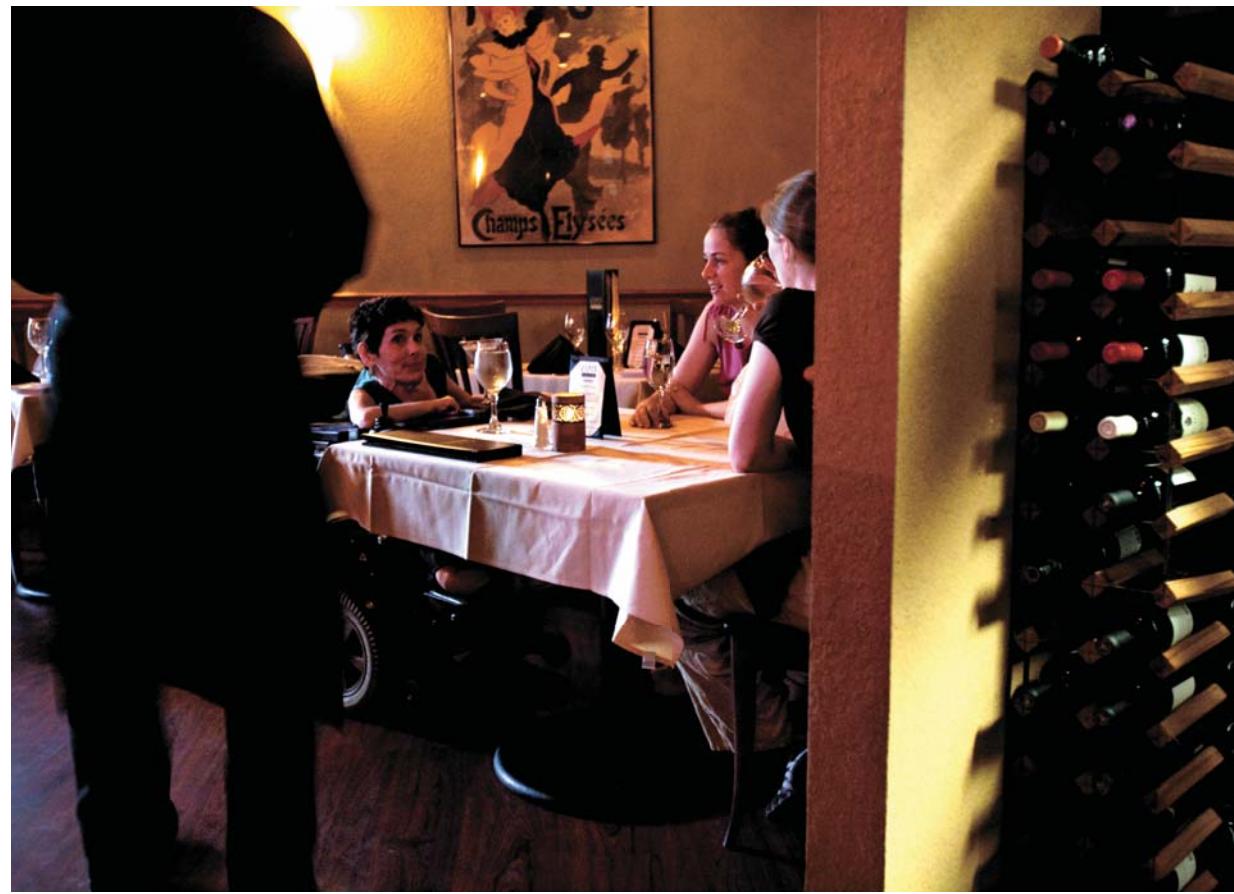
For people with limited incomes or those who cannot work, transportation is a key issue. Most counties have paratransit services, but even these are limited. Because of demand, they often only take people to work or health appointments and don't cross county lines, says Erin DeFries Bouldin, M.P.H., a project manager for the Florida Office on Disability and Health, which is housed at UF. To get to the airport in Orlando, for example, a person would have to contact each county on the way and be approved for transportation eligibility there.

"Even then, vans cannot cross county lines," Bouldin says. "You have to go to the county line and hope the other van is waiting or you have to wait by the side of the road."

The office is teaming with a governor's commission to create a statewide eligibility policy and is gathering data about transportation issues to help state agencies make policy decisions, Andresen says.

"It's sort of a nightmare," Andresen says. "Some rural counties don't have accessible mammography (or other types of) clinics. If they want to go somewhere larger it's a real challenge unless they have someone to take them or their own vehicle."

There also is an issue of educational accessibility for students with disabilities entering health professions.



PHYSICAL DISABILITY HAS NEVER STOPPED VA RESEARCHER LISA HANNOLD FROM LIVING LIFE AS SHE WANTS. HERE, SHE DINES WITH FRIENDS AT O!O TAPAS & TINIS IN GAINESVILLE.

Because of the physical nature of many health fields, students with disabilities either do not choose them or are sometimes turned away, Smith says. While it's clear a person with a physical disability may not be able to be a surgeon, there are other fields he or she could enter.

"There seems to be discrimination, too, in holding some type of job in the health-care arena," Smith says. "A lot of folks' perceptions of people with disabilities are that they aren't educated or capable and that couldn't be farther from the truth. They are just differently capable."

In some ways, it all comes back to changing perceptions and those "attitudinal barriers."

Smith says he feels, in some ways, like he changes attitudes every time he teaches a class. Not by anything he says, but just by who he is: an intelligent, capable academic who, yes, happens to have a physical disability.

"Just by getting in front of these individuals and doing the job I do, it starts to break down those barriers, those walls and perhaps shift their perceptions of people with disabilities," Smith says. "That's why it is so important for people with disabilities to be out there and live their lives the best they can, and people will learn from that." 

SCOTT BLADES

Intelligent design

Instructional designer Scott Blades keeps COP professors sharp

By Jessica Brandi

What do you assign a classroom of 300 students that will really make them care?

This is one of many daily challenges for Scott Blades, instructional designer for the College of Pharmacy. It is his job to help professors answer questions like this and to bridge the gap between time-honored teaching methods and new technologies in the classroom.

For three years, Blades was a typical chalk and chalkboard high school English teacher. He knew almost nothing about computers and didn't even have access to PowerPoint in his classroom.

"When I came here to get my master's, I could e-mail and surf the Internet," he said.

Now he's the one helping professors to demystify new learning technologies, such as podcasts and interactive online classrooms, and use them to their advantage.

He describes his job as giving direction to the educational experience and helping professors capitalize on their strengths. He consults with individual professors on lesson plans and ways to design learning experiences to engage students. He also develops Web sites and instructional videos and evaluates existing educational technology for the college.

"If education is a journey, then instructional design is the road-mapping that goes into making the trip as good as possible," he said in his blog.

Sven Normann, the College of Pharmacy's associate dean for distance, continuing and executive education, says Blades' creativity and meticulous attention to detail have made him an invaluable member of the college's media support team. He said Blades was also essential in developing Elluminate, one of the college's online distance learning programs.

"We kind of pride ourselves that we are at the edge of using technology where it is appropriate and seeing if we can use technology to improve and enhance learning," Normann said. "Having someone with Scott's expertise allows us to have the tools to reach students at a distance as well as the students that are here in Gainesville."

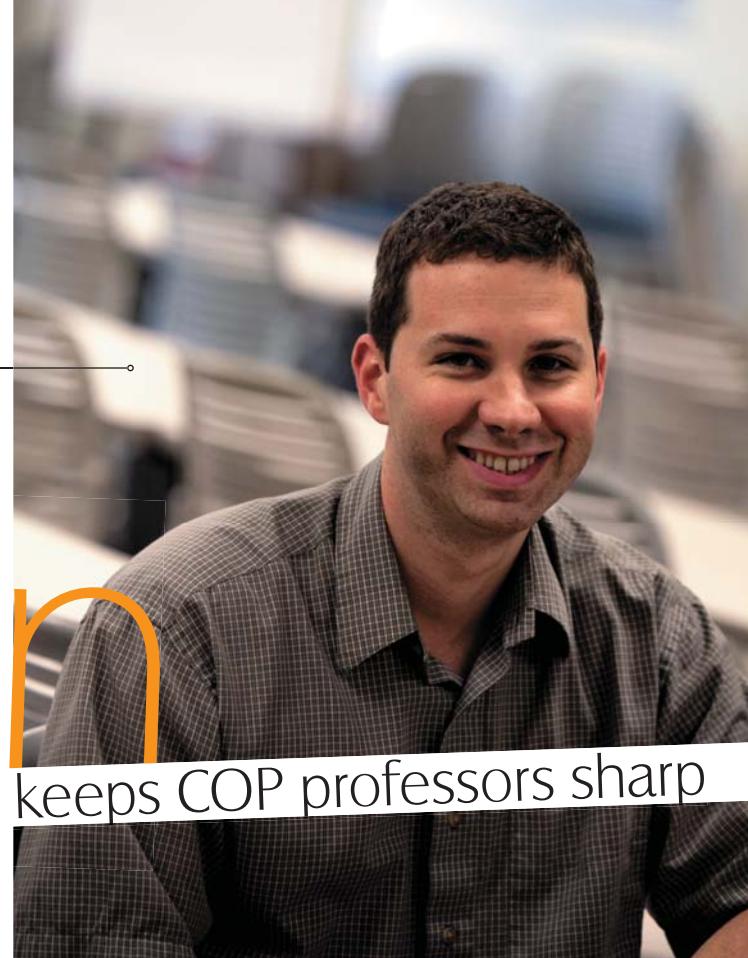


PHOTO BY SARAH KIEVEL

Blades left high school teaching to pursue a master's degree in hopes of becoming a better, more efficient teacher. It was a big transition, he said, because he cared about his students, and teaching had always been in his blood.

"I come from a teaching family," he said. "I was at a family reunion one time, and I realized we could pretty much open up our own school."

Earning his master's degree in curriculum and instruction from UF and learning new technological skills inspired Blades to pursue challenges outside of traditional classroom instruction. Prior to joining the college's media support team in 2005, he was an employee of Mastery Learning Network, where he worked with professors from around the country to design, develop and teach online courses. He has also worked as an instructional designer for the medical company Regeneration Technologies Inc.

Part of his current job is giving professors alternatives to traditional graded tests and papers, which can be impractical in large lecture classes. He helps them design creative, ungraded activities that students will respond to and learn from. He always finds an innovative way to engage the learner in his tutorials, Normann said.

"I think having that experience, especially with older kids at the high school level, helps him relate to the needs of a lot of our students," he said.

One of his current projects is a Web site called "24 Active Learning Ideas" for the College of Pharmacy. Each article will include an idea for an interactive game or practice activity to give students in lieu of graded assignments. They will also include real examples and scenarios from professors in the college. As the site's name suggests, there will be 24 articles in all — a running department joke and a tribute to the TV show.

"I'm a huge fan of '24,'" he said. "So is the dean."

Despite all his success, Blades continues take every opportunity to learn new skills. Last semester he completed UF's Information Technology Certification training, one of many certificate and training opportunities offered to all UF faculty and staff. He said he will continue to take advantage of the resources UF provides and help to improve learning outcomes throughout the College of Pharmacy.

"Pharmacy is at the forefront of educational technology and video-based learning," he said. "It's an exciting place to work." **P**



Risky business

Partner's behavior better predicts STD risk

By April Frawley Birdwell

Risky behaviors such as not using condoms or having sex with multiple people put young adults at risk for contracting sexually transmitted diseases, but perhaps not as much as the characteristics of their sexual partners, UF researchers say.

The findings, reported in the April issue of *Sexually Transmitted Diseases*, could help health-care providers better screen patients for STD risks, said Stephanie A.S. Staras, Ph.D., a UF assistant professor of epidemiology and health policy research in the UF College of Medicine.

"If you are choosing high-risk partners, you are much more likely to have an STD, even when we account for your condom-use patterns," said Staras, the lead author of the study.

The study examined the sexual activities, partner characteristics and STD diagnoses of 412 subjects between the ages of 15 and 24. Among the subjects whose partners were categorized as high-risk, half were diagnosed with an STD. About 40 percent of the young adults whose own behaviors were labeled as high-risk were diagnosed with an STD.

Health-care providers often ask patients about their sexual behaviors, but inquiring only about a person's own behaviors may cause some patients to slip through the cracks, Staras said. Some subjects in the study reported low-risk behaviors but were having sex with very high-risk partners.

Adding a few simple questions about partner characteristics to STD screenings could help providers catch more patients who need to be tested and educated about condom use and protective measures, Staras said.

UF researchers measured several characteristics to gauge how risky partners were, including whether the partner has a problem with marijuana or alcohol, was at least five years older or younger, had been in jail, had sex with other people in the past year or had an STD in the past year.

The researchers then created a composite, totaling the number of negative partner characteristics for each individual's risky behaviors. Considering all of the partner characteristics together was the strongest predictor for STDs. Young adults whose partners had five risk characteristics were three times more likely to have an STD than those whose partners had no more than two characteristics.

Also, subjects whose partners were five years older or younger than them were more than twice as likely to be diagnosed with an STD than those whose partners were around the same age, the researchers found. **P**



STEPHANIE A.S. STARAS, PH.D.



CAPRICE KNAPP, PH.D.

Hospice hope

Program could help expand palliative care for children

By April Frawley Birdwell

Less than 11 percent of children with life-threatening illnesses receive hospice care in the last year of life, in part because insurance requirements make it difficult for families to obtain care, according to a new UF study. But a pilot program in Florida that has redefined when children can receive palliative care could help change this, UF researchers say.

"One barrier has been the way the reimbursement system works," said Caprice Knapp, Ph.D., an assistant research professor of epidemiology and health policy research in the College of Medicine and the lead author of three studies recently published on pediatric palliative care in Florida.

"Traditionally, for hospice reimbursement, if your child has a terminal illness, you can access hospice care but a physician must certify that the child is within the last six months of life."

"Even though hospice services are beneficial and families who end up using them are happy with them, parents might perceive this as giving up hope due to the six-month rule."

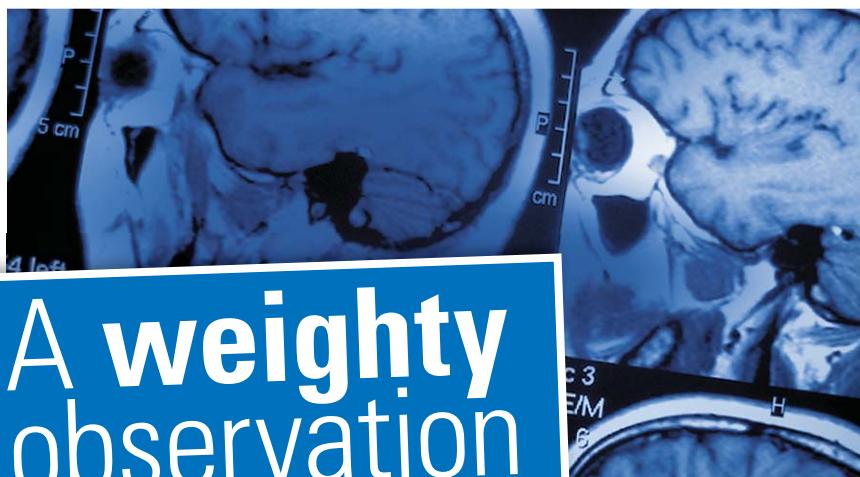
Florida was one of four states selected to receive \$3.2 million to develop a new model for pediatric palliative care and was the first to implement its program in 2005. Called "Partners in Care: Together for Kids," this program allows children on Medicaid or the State Children's Health Insurance Program to receive palliative care from the time they are diagnosed with a life-threatening condition, regardless of prognosis.

"Care for children at the end of life costs a lot of money," Knapp said. "But if we move them into this new model of care, we might be able to save money and improve their quality of life."

Prior to the program, between 7 percent and 11 percent of children who died in Florida received hospice services at the end of life, according to a study the researchers published in March in the *Journal of Palliative Medicine*. In contrast, about 30 percent of adults with cancer receive hospice care at the end of life, Knapp said.

Between 2005 and 2008, enrollment in the program, which is available in six cities across Florida, increased from 80 patients to 468.

Although the word "hospice" tends to trigger thoughts of older patients in their last days of life, palliative care actually ranges from managing a patient's symptoms to offering psychological services to patients and their families. **P**



A weighty observation

Experimental Parkinson's treatment may trigger unwanted weight loss

By John Pastor

A growth factor used in clinical experiments to rescue dying brain cells in Parkinson's patients may cause unwanted weight loss if delivered to specific areas of the brain, according to UF researchers in the March online edition of *Molecular Therapy*.

The discovery is a cautionary warning for experimental treatments to treat Parkinson's disease that use GDNF, short for glial line-derived neurotrophic growth factor.

In addition, the finding broadens understanding of the brain's role in the regulation of metabolism and body weight, suggesting that gene therapy techniques in the brain potentially could control obesity.

"People shouldn't interpret our result to mean this is a terrible side effect that precludes ability to do GDNF gene therapy for Parkinson's disease, but it does show that it is extremely important to place the therapy in the correct brain region," said Ron Mandel, a professor of neuroscience at UF's McKnight Brain Institute and the Powell Gene Therapy Center. "The good news for Parkinson's patients is that the finding doesn't discredit the current target."

Parkinson's disease affects between 500,000 and 1.5 million Americans, causing patients to gradually develop movement problems, including tremors and stiffness. Current treatments only address symptoms and do not slow the disease's progression, which is caused by degeneration and death of nerve cells that produce dopamine, a substance necessary for communication between cells that coordinate movement.

GDNF rescues the dopamine-producing cells in cell cultures and animal models of Parkinson's disease.

In the current study, UF scientists compared weight loss in obese rats when two distinct brain targets received therapy using an adeno-associated virus to deliver the GDNF gene.

When GDNF flooded a bundle of nerves known as the nigrostriatal tract, a potential target for Parkinson therapy, the obese rats lost a great deal of weight — about 80 grams. But when the GDNF protein was overexpressed in a different therapeutic target, the hypothalamus, weight loss was only about half as much. In both locations, there was a steady decrease in body weight throughout the experiment that could only partially be explained by food intake.

"For people who study metabolism in the brain, this sheds some new light on the playing field," Mandel said. "But it shows the playing field is more complicated than anyone dreamed." **P**



RON MANDEL, PH.D.



CATHERINE PRICE, PH.D.

Post-op PROBLEMS?

Study to examine Parkinson's patients' risk of cognitive problems after surgery

By Jill Pease

A UF neuropsychologist has received a grant from the National Parkinson's Foundation to determine if patients with Parkinson's disease are at increased risk of developing cognitive problems after surgery.

Additional support was provided by the I. Heerman Foundation Inc., an organization founded by the late Joachim S. "Nik" Gravenstein, M.D., a UF professor emeritus in the department of anesthesiology.

Previous research has shown that 40 percent of all older adults experience the memory and thinking problems associated with postoperative cognitive dysfunction immediately after surgery, and 14 percent of patients continue to have cognitive problems three months later. Researchers aren't sure what causes postoperative cognitive dysfunction, but some experts believe the risk increases with age, and people with less education or intellectual stimulation may be more vulnerable.

"All of the prior studies have examined the presence of postoperative cognitive change in healthy adults, but at-risk populations, such as individuals with Parkinson's disease, have not been included in these investigations despite the fact that they also often seek surgeries, such as knee replacement, to reduce pain and improve quality of life," said Catherine Price, Ph.D., lead investigator and an assistant professor in the College of Public Health and Health Professions' department of clinical and health psychology.

Although Parkinson's disease is predominantly a movement disorder, it can also cause cognitive impairment. The disease can disrupt neural pathways that influence motor function, as well as cognition and behavior, and it can damage white matter, the tissue through which messages travel across the brain.

In the study, researchers will compare the cognitive changes in patients with Parkinson's having hip or knee replacement surgery at UF's Orthopaedics and Sports Medicine Institute to patients with Parkinson's disease who do not have this surgery. The participants will receive psychological testing for memory, language, processing speed and visual-spatial perception abilities, along with MRI scans to track anatomical changes in the brain.

"We have observed over the years that Parkinson's disease patients who undergo surgery seem to be vulnerable to cognitive and mood worsening," said Michael Okun, M.D., co-director of the UF Movement Disorders Center and the study's co-principal investigator along with Hubert Fernandez, M.D. "Once we understand this problem, we aim to develop better techniques to decrease morbidity for the Parkinson's disease patient who must undergo anesthesia and/or surgery." **P**



Neurosurgeons implant a deep brain stimulation device in a patient to treat a movement disorder. The stimulation alters brain activity without damaging tissue, combating symptoms of disorders such as Parkinson's disease.

BREAKTHROUGH FOR OCD

Doctors gearing to use deep brain stimulation to treat disabling OCD

By John Pastor

After nearly a decade of research, UF clinical scientists will soon be able to help patients with disabling obsessive-compulsive disorder by using a therapy known as deep brain stimulation, or DBS.

Researchers at UF and three other medical research centers have closely studied the experimental therapy in a combined total of 26 patients for more than eight years. As a result, the U.S. Food and Drug Administration recently granted a "humanitarian use device" exemption to Minneapolis-based medical technology developer Medtronic Inc. for the first psychiatric use for DBS.

"It's a select therapy for a very select group of patients with medically resistant OCD symptoms," said Michael Okun, M.D., an associate professor of neurology and a co-director of the Movement Disorders Center at UF's McKnight Brain Institute.

Doctors use a surgically implanted medical device, similar to a pacemaker, to deliver electrical pulses to targeted areas of the brain. The electrical stimulation modulates nerve signals to relieve psychiatric symptoms. DBS has been a therapy for movement-related problems associated with Parkinson's and other diseases since 2002.

"This treatment needs to be done with strict research and ethical oversight at centers that have Institutional Review Boards and an interdisciplinary medical team for pre- and postoperative care," said Okun, who also serves as the national medical director of the National Parkinson Foundation.

Obsessive-compulsive disorder occurs when patients' obsessive thoughts compel them to repeat behaviors, such as handwashing. About one in 50

adults in the United States is affected by OCD, but DBS treatment is appropriate for only a small number of them.

In extreme cases OCD can prevent people from having healthy relationships or keeping jobs.

"This is an alternative for patients for whom medications have not been adequate to control the disorder," said Herbert Ward, M.D., a psychiatrist with the DBS program at the UF College of Medicine.

"People with this problem have intrusive, out-of-character thoughts and they engage in rituals or compulsions to lower their anxiety," Ward said. "Medications are effective for a significant number of them to have a reasonable quality of life, but the patients who receive no benefits from medication can be consumed by obsessional thinking and rituals."

The FDA's humanitarian-use exemption is intended to treat or diagnose no more than 4,000 people in the United States every year.

"The surgery needs to be done under rigorous, controlled conditions, after a person has had a thorough psychiatric evaluation and their history shows they are refractory to medications and therapy," Ward said. "The team approach is the correct way to make a decision, because it requires the understanding of neurologists, neurosurgeons, psychiatrists, and neuropsychologists."

During the research, clinical scientists with

Catholic University of Leuven in Belgium, Butler Hospital of Brown University in Providence, Cleveland Clinic and UF studied DBS therapy in 26 patients with severe, treatment-resistant OCD. About two-thirds of the patients had symptom reductions and functional improvement.

"That over half of patients showed improvement is really significant, considering these patients have unsuccessfully tried so many other treatments," said Nikki Ricciuti, R.N., a specialist with the UF department of psychiatry who worked with the research patients at UF. "That's what makes this so important — it will save the quality of people's lives."

It will be important to track results of the therapy once it enters more widespread use, according to Wayne Goodman, M.D., the director of the division of adult translational research and treatment development of the National Institute of Mental Health. Goodman, a former chair of UF's department of psychiatry, wrote the original research grant and contributed to the DBS-OCD research before he joined the NIMH in 2007.

"This is not an endpoint, but it is progress," Goodman said. "I'm glad to see another treatment is available for these severely ill patients, but I'm also hoping that the process will reveal a lot more about the brain circuitry of OCD that may lead to other, less invasive treatments." **P**

New targets for DBS

Doctors may be able to tailor a specialized form of brain surgery to more closely match the needs of Parkinson patients, according to results from the first large-scale effort to compare the two current target areas of deep brain stimulation surgery. Called the COMPARE Trial, the NIH-funded study evaluated 45 patients for mood and cognitive

changes related to DBS. Investigators with the Movement Disorders Center at UF's McKnight Brain Institute found that DBS in either brain target effectively treated motor symptoms such as tremors, stiffness and slowness. However, DBS produced unique effects on mood and mental sharpness depending on the target, a finding that may affect selection of patients with pre-existing memory, cognitive or mood disabilities.



By Kandra Albury

Continued climate change will disproportionately impact the health of children around the world, says a UF College of Medicine-Jacksonville pediatrician.

Jeffrey Goldhagen, M.D., a UF College of Medicine-Jacksonville associate professor of pediatrics and division chief of community pediatrics, said children's health may be jeopardized if the trend of climate change continues on its current path.

"Compared to adults, children are more susceptible to the adverse effects of environmental degradation because they are still developing," Goldhagen said. "They are disproportionately affected, and this can lead to a prolonged impact throughout their entire lives."

To help increase awareness and address solutions, Goldhagen is helping bring together leaders and activists from around the globe to talk about climate change and its impact on children's health. An international teleconference was held on the subject April 1 at Shands Jacksonville.

Participants included representatives from the U.S., United Kingdom, Canada, Australia, Argentina, Turkey and several other European and Middle Eastern countries. UF hosted the teleconference with participation from members of the Royal College of Pediatrics in England.

Climate change could affect children's health in several ways, Goldhagen said prior to the conference. Some of the foreseeable effects could include:

- An increased incidence of skin cancer because of ozone depletion, and development of this cancer at earlier ages because children are particularly susceptible to damaging UV rays.
- More areas and people affected by tropical-region viral illnesses such as malaria and dengue fever.
- More malnutrition as desertification of farmland forces migration to cities, leaving low-income countries with reduced availability to food and resources.

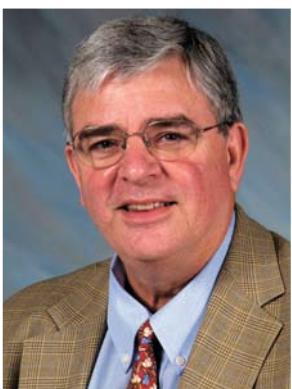
Goldhagen said his primary goal for the conference was to educate pediatricians, child advocates and key stakeholders on climate change and how it affects children.

"We also want to give children a lead role in the process of creating public policy to curtail global warming," he said. **P**

Global warming WORRIES

UF physician says climate change directly affects children's health

UF faculty develop e-learning module



ANDREW M. KAUNITZ, M.D.



GUY I. BENRUBI, M.D.

Two UF College of Medicine-Jacksonville faculty, Guy I. Benrubi, M.D., senior associate dean for clinical affairs and chair of the department of obstetrics and gynecology, and Andrew M. Kaunitz, M.D., a professor and associate chair of obstetrics and gynecology, were part of a collaborative team that developed an interactive online e-learning module for the Association of Professors of Gynecology and Obstetrics. The in-depth online module, Contraception: Patient Counseling and Management, contains a monograph, case studies, PowerPoint slides and audio podcasts, and is available to APGO members at <http://www.apgo.org/elearn/modules>. The Association of Professors of Gynecology and Obstetrics is a professional association of 1,500 individual members and 190 institutional member departments in the U.S. and Canada. Its mission is to promote excellence in women's health care by providing resources and support to women's health-care educators. — Betty Poole **P**

Two lives, forever linked

By Kandra Albury

Saturday, Jan. 24 meant a lot to Phillip "P.J." Caruso II, 20, and Cynthia Robbins, 45, as they stepped out on the red carpet during the 2009 Night for Heroes. The annual fundraising event provided them an opportunity to honor the nurses, physicians and flight crew at Shands Jacksonville's Level I Trauma Center.

A little over a year ago, Caruso and Robbins were in separate, near-fatal car accidents that left them both fighting for their lives. Their accidents occurred one day apart.



The treatment

Carlos Arce, M.D., a UF College of Medicine-Jacksonville associate professor of neurological surgery, and Eric Frykberg, M.D., a UF professor of surgery and division chief of general surgery, treated both patients when they arrived at Shands Jacksonville.

"Cynthia Robbins had evidence of brain-stem herniation on her head CT scan, which normally leads to death; it was truly a miracle not only that she survived but did so with brain function fully intact," Frykberg said. "The level of severity of P.J. Caruso's brain injury was also suggestive of a poor outcome, so it was equally surprising that he survived and did so with basically normal function."

Arce said patients with severe head injuries are prone to problems related to their initial trauma, including paralysis, seizures, diminished cognitive function, vegetative states and brain death.

Both patients required prompt and constant care to have the best possible outcome.

"They are examples of how important it is to have a trauma center

Her story

Robbins was driving home in a late-night rainstorm Feb. 23, 2008 when she lost control of her van. She was ejected from her vehicle when it crashed into a median and overturned. When St. Johns County Fire Rescue arrived on the scene, the inclement weather prevented Robbins from being airlifted, so she was taken via ambulance to Shands Jacksonville's Trauma Center.

Once there, UF physicians determined Robbins needed immediate care for a severe brain injury, a fractured spine, multiple facial fractures and serious injuries to her left foot. Robbins was rushed to the operating room, where she was stabilized by a team of UF surgeons and Shands nurses.

Robbins spent the next two-and-a-half weeks in an induced coma to prevent brain swelling. She opened her eyes for the first time 18 days later and gave her nurses and family a thumbs up. She was discharged two weeks later, but continued her recovery through physical therapy sessions at home.

His story

On Feb. 24, Caruso was driving alone when he fainted. His vehicle crossed into the opposite lane and drove off the road. The vehicle hit a utility pole, passed through a fence and crashed into two trees before stopping.

St. Johns County Fire Rescue found his SUV overturned and wrapped around a palm tree. Caruso was trapped inside and unresponsive.

After being flown to Shands Jacksonville, he was treated for a traumatic brain injury, a broken nose and a deep cut on his head.

During his two weeks in the surgical intensive care unit, he struggled with a high fever and suffered a collapsed lung. It was 13 days before he opened his eyes. He spoke for the first time three days before being discharged to Brooks Rehabilitation Hospital March 29. Miraculously, he remembered all of his friends and family. Caruso was able to walk out of Brooks on his own three-and-a-half weeks later.

dedicated to the care of patients with these types of injuries," Arce said.

Robbins returned to her job as an administrative assistant three months after her accident but recently took time off to spend with her twin daughters and son. Bouncing back hasn't been easy, she said.

"There are things that I can remember prior to the accident, but the accident itself I can't remember," she said. "However, I can recall how wonderful everyone was at Shands, along with my therapist."

Caruso is on his way to a full recovery. He's back in school at Florida Community College at Jacksonville. Since his accident, he has decided to become an occupational therapist to support other patients and families on their journey to recovery.

Amy Barrow, Caruso's mother, said she and the Robbins family kept in close contact throughout the treatment and recovery process.

"We would talk and provide each other with updates on our loved ones," Barrow said. "I'm not certain what kind of contact we will maintain going forward, but we will be forever linked through our experiences." **P**

DISTINCTIONS

DENTISTRY

ROBERT BURNE, Ph.D., a professor and chair of oral biology, is the recipient of the 2009 Research in Dental Caries Award from the International Association for Dental Research. The award was presented during the IADR General Session & Exhibition April 1 in Miami. Burne received the honor in recognition for his work in oral microbiology, applying molecular biology and molecular genetic techniques to the study of oral pathogens, particularly regarding the physiology and pathogenesis of *Streptococcus mutans*.



Robert Burne

held this March in Phoenix. Participants in the symposium included the director of the National Cancer Institute, John Niederhuber, M.D. An assistant professor of surgery, Grobmyer also was one of 26 surgeons elected into the Southern Surgical Association during the organization's annual meeting held in December.

STEVEN HOCHWALD, M.D.,

chief of surgical oncology and an associate professor of surgery, is now the Florida state chair of the American College of Surgeons' Commission on Cancer, a consortium of professional organizations dedicated to improving survival and quality of life for cancer patients. In this role Hochwald will work as part of a network of 64 state chairs who guide liaison physicians from cancer programs throughout the country to work together to assess patterns of care, outcomes, quality of care and community-based cancer control projects.



Steven Hochwald

JACKSONVILLE

ANDREW KAUNITZ, M.D., a professor and associate chair of obstetrics and gynecology, has been appointed as editor-in-chief of *Journal Watch Women's Health*. Kaunitz has served as deputy editor of the journal since 2000 and has been a contributing author since 1996.



Andrew Kaunitz

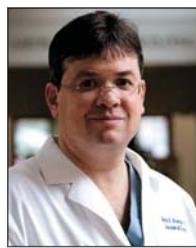
JOSEPH J. TEPAS III, M.D., a professor and chief of the division of pediatric surgery, received the 2009 Philip O. Lichtblau Award in March. This award is given annually to a children's surgeon who has contributed significantly either regionally or statewide to the Children's Medical Services program. The award was created in honor of the late Dr. Philip O. Lichtblau, an orthopedic surgeon, who served as a CMS medical director for many years.



Joseph J. Tepas III

COLLEGE OF MEDICINE

STEPHEN GROBMYER, M.D., chief of the Breast, Melanoma, Sarcoma and Endocrine Surgical Service, chaired an international cancer nanotechnology symposium at the Society for Surgical Oncology's annual meeting,



Stephen Grobmyer

PUBLIC HEALTH AND HEALTH PROFESSIONS

ANDREA BEHRMAN, Ph.D.,

an associate professor in the department of physical therapy, has been elected a Catherine Worthingham Fellow by the American Physical Therapy Association. The fellowship honors people whose work has resulted in significant advances in the science, education and practice of the physical therapy profession. She will be recognized at the association's annual conference in June in Baltimore.



Andrea Behrman



Distinguished departments

The Diabetic Retinopathy Clinical Research Network recognized the **UF College of Medicine-Jacksonville's department of ophthalmology** as being the top site in its network for 2008. The Diabetic Retinopathy Clinical Research Network Quality Award was presented at a network meeting Feb. 8 in Tampa. The network is funded by the National Eye Institute and is dedicated to facilitating multicenter clinical research of diabetic retinopathy, diabetic macular edema and associated conditions. ... The **UF Shands Eastside Community Practice**, a full-service medical practice that serves east Gainesville, received the Eastside Business of the Year award from the East Gainesville Development Corp. The award was presented to **Desiree Hayes**, executive director of the practice at the EGDC's annual meeting and business awards March 12. Shown here are **Kendall Campbell, M.D.**, medical director of the practice and an assistant dean in the Office of Minority Affairs, with fourth-year medical student Mark Newman at the clinic.

COLLEGE OF VETERINARY MEDICINE

DAVID FREEMAN, M.V.B.,

Ph.D., an equine surgeon and professor, has been named interim chair of the college's department of large animal clinical sciences. Freeman has been a member of UF's veterinary faculty since February 2004. His research interests include the pathophysiology and treatment of diseases that cause colic in horses, with a special focus on diseases that reduce blood flow to the small and large intestines.



David Freeman

Commitment to a cure

The American Diabetes Association added a little African flavor to its sixth annual Cure Ball. Themed "Moroccan Nights," the event was held March 14 at the Omni Jacksonville Hotel in Jacksonville. Aside from the dining and dancing, the new Cure, Care and Commitment Awards were presented at the ball. UF Diabetes Center for Excellence researchers **Desmond Schatz, M.D.**, **Mark Atkinson, Ph.D.** and **Michael Haller, M.D.**, received the 2009 Cure Award for their commitment to research in the field of type 1 diabetes. Proceeds from the event went to support the more than 100,000 children and adults in North Florida who have type 1 and type 2 diabetes, as well as Camp JDA, a camp for children ages 6 to 12 with type 1 diabetes, and Diabetes Exposed, a community diabetes program.



PARASITES AND A POSITIVE ATTITUDE

Inside the mind of Ellis Greiner

By Sarah Carey

It's not a fluke that Ellis Greiner, Ph.D., decided to pursue his career in veterinary parasitology, 29 years of which have been spent at the UF College of Veterinary Medicine.

After his very first undergraduate class in the subject at Montana State University, Greiner, a professor of parasitology, became fascinated with malaria, parasitic worms and insects as disease carriers in animals and in humans. Subsequently, Greiner became a zoology major and was exposed to what he calls "the wildlife side of things." His first research on parasites involved removing worms from the lungs of pronghorns.

He never looked back.

"I said, 'I'm going to be a parasitologist,'" Greiner recalled. "I tell people, parasites are the most highly evolved form of life on earth. To back that up, you can look at all the endangered and threatened species and you won't find any parasites on them. Parasites will still be in charge when I give it up, simply because they are able to evolve and change to get around medications and the immune system."

He has worked with reptiles, birds, livestock and aquatic animals, but most recently Greiner's focus has turned to the parasites of sea turtles and marine mammals. Earlier in his career at UF, he worked extensively with bluetongue, a viral disease affecting sheep and cattle, and with a devastating neurological disease that affects horses, known as equine protozoal myeloencephalitis, or EPM, caused by a parasite known as *Sarcocystis neurona*.

Greiner's work on bluetongue, which is transmitted by biting midges, spans 15 years and was conducted in collaboration with Paul Gibbs, Ph.D., a professor of infectious diseases at the college.

"We had a program which covered Central

America south of Mexico and throughout the Caribbean, so we were able to look at the whole region," Greiner recalls. "We were able to find that the entire region had bluetongue.

"We found different serotypes; as one virus would make the loop, another one or two (viruses) would circulate in the next year. It was very eye-opening."

He worked closely on EPM with researchers Tim Cutler, John Dame, Siobhan Ellison and Rob MacKay in the 1990s.

Sometimes, tracking down the origin of a particular parasite involves examining photographs of specimens sent from zoological collections all over the world. Occasionally Greiner has traveled to zoos or other facilities where an infected animal is known to have lived.

When he's not puzzling through parasitic life cycles, Greiner has his finger on the pulse of college and university activities. He's passionate about his work on the UF Faculty Senate's steering committee and has just completed the first of a three-year term. He also just finished his second consecutive term as a UF senator for the CVM.

"You get to see and interact with people on the UF campus who are really in charge," he said. "I'm one of the outspoken ones."

Although Greiner is closing in on retirement — he plans to work a few more years — he makes no bones about his beliefs. Those who know him know he never has.

"I'm a firm believer in shared governance, and doing my damnedest to make it be a part of our



ELLIS GREINER, PH.D.

college," Greiner said. "I tell people, if you want to be a part of things and give directions, you need to volunteer on committees and put some time into making this institution what you want it to be."

In addition to his Faculty Senate work, Greiner chairs the CVM's academic advancement committee and has recently served on the UF student conduct code committee as well as the Institute of Food and Agricultural Sciences' review council for faculty development leave requests.

Greiner is a regular at alumni functions, seldom misses a faculty assembly and participated actively with CVM students and others as an avid cyclist and a member of TeamVetMed.

Despite not being a veterinarian, Greiner said he has always felt accepted at the college, partly because he was on board from the start.

"The only class I did not teach was the charter class," he said.

He is adamant about wanting the CVM and UF to survive the current economic stresses these institutions are currently experiencing. Greiner remains positive that "good things are happening" and urges people to remember this and "not give up the ship."

"We have lived through other economic crises and we will overcome this one," he said, adding that a positive attitude and mutual respect for others' contributions is essential to keep the ship sailing.

"If you are not willing to contribute to making UF and the college a great place and to respect the contributions of others, you will be part of the problem and not the solution." **P**



SEE YA!



Dr. C. Craig Tisher (left) and College of Medicine alumnus Dr. Jason Rosenberg unveil the historical marker at Wilmot Gardens on March 20. To learn more about Wilmot Gardens visit www.med.ufl.edu/wilmot.



Fourth-year medical student David Smith, here with College of Medicine Interim Dean Michael Good, recently displayed photographs he took during an international health trip to Nicaragua in the HSC Founders' Gallery. To view his photos, visit smithartandphotography.com.



In April, 65 second-year medical students chatted with 50 different UF physicians about specialties available to them during the third-annual "specialty speed dating" event.

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UF Health Science Center
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**Senior Vice President,
Health Affairs**

Douglas J. Barrett, M.D.

**Interim Director,
News & Communications**

Melanie Fridl Ross

Editor

April Frawley Birdwell
afrawley@ufl.edu

Senior Editors

Melanie Fridl Ross, John Pastor

Designer

Mickey Cuthbertson

Staff Writers

Kandra Albury, April Frawley Birdwell, Jennifer Brindise, Tracy Brown Wright, Sarah Carey, Karen Dooley, Linda Homewood, John Pastor, Jill Pease, Czerne M. Reid, Karen Rhodenizer, Melanie Fridl Ross, Priscilla Santos, Christine Velasquez

Contributing Writers

Jessica Brandi, Jeff Kelly, Jessica Metzger, Laura Mize, Monica Vigo

Photo Editor

Sarah Kiewel

Support Staff

Cassandra Mack, Beth Powers, Kim Smith

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