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ARRIVALS
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On the Cover

Deprived of oxygen during birth, Sianna Marie Acevedo was flown from a Tampa hospital to Shands at UF medical center, where neonatologist Michael Weiss, M.D., and his team in the neonatal intensive care unit used a new cooling technique to help stave off brain damage. This month, The POST describes how health professionals and researchers across UF are using new techniques and tools such as this to help improve patient care and save lives.

Photo by April Frawley Birdwell



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Speaker in the house

UP FRONT



PHOTO BY SARAH KIEWEL

After receiving an armful of plaques — a framed stethoscope, a picture of the College of Dentistry’s junior class doing the Gator chomp, a close-up of brain cells — state Rep. Larry Cretul walked from lab to lab inside the McKnight Brain Institute. He listened closely as Kelly Foote, M.D., described deep-brain stimulation. He asked questions when stem cell researcher Brent Reynolds, Ph.D., explained an approach his lab is working on that could stop tumor cells from dividing. Cretul paid attention. Of course, this wasn’t much of a surprise to the UF leaders who organized the event, which honored Cretul for years of support for UF and health science programs in the state Legislature. Over the years, Cretul has helped garner state funding for medical schools, biomedical research and programs such as the College of Nursing’s Archer Family Clinic and the Florida Center for Brain Tumor Research. And those are just a few of the programs he has helped, although Cretul, who has served as Speaker of the Florida House of Representatives since 2008, was quick to point out he hasn’t done it alone. “I wish I was worthy of all this recognition,” he said. “This really is (a group effort). One individual can’t do anything by themselves.”

— April Frawley Birdwell

PHOTO BY SARAH KIEWEL



A LESSON ON DIVERSITY

Becoming a doctor once seemed like a lofty, even unattainable goal to Betty Drees, M.D. She didn't know any women physicians growing up. But after she had children, Drees decided to go to medical school. Now, she is dean of the University of Missouri-Kansas City School of Medicine, a post she has held longer than any other woman dean in the country. Drees recently spoke to a packed room in the Communicore Building as part of the Health Science Center's Diversity Dialogue. Her message? Women have come a long way in the health sciences, but there are still a few more hurdles to clear in the path toward equality. Drees suggested institutions make a commitment to diversity, introduce or maintain family friendly policies, analyze data and institutional culture and work hard to ensure there are female mentors at higher levels to guide younger women entering health professions. "This is not just a women's issue," Drees said. "It makes institutional sense to recruit from a broad pool of talent." — *April Frawley Birdwell*



SUMMER SCHOOL

How did you spend your summer vacation? Do you have memories of the scent of Coppertone and the grit of sand between toes? Not the participants in the 2009 UF College of Dentistry Student Summer Research Program. Instead, they recall things like Gingival RAGE Expression, Host-Parasite Interaction and the Floor-of-Mouth Tumor Model. For 11 incoming D.M.D. students, this summer was about participating in a structured research program under the mentorship of a faculty member. The program provides freshman dental students the opportunity to complete a 10-week research project under the direction of a faculty member and receive three elective hours in the fall. — *Karen Rhodenizer*

WHAT'S THAT SOUND?

James W. Hall III, Ph.D., (left) a clinical professor of audiology in the College of Public Health and Health Professions' department of communicative disorders and an extraordinary professor at the University of Pretoria in South Africa, blows a vuvuzela on the University of Pretoria campus while his colleague De Wet Swanepoel, Ph.D., measures the horn's decibel levels. The vuvuzela, whose loud sound has been compared to an elephant's trumpet or an air horn, is widely popular among fans at South African soccer matches, despite concern that the noisemaker may contribute to noise-induced hearing loss. Hall and Swanepoel's initial findings, which showed vuvuzela output levels above those recommended for safe exposure, will be published in the *South African Medical Journal*. The research is particularly timely considering South Africa will be hosting the 2010 Soccer World Cup, and as many as half a million soccer fans next year. — *Jill Pease*



PHOTO BY SARAH KIEWEL



TOP HOSPITAL

Question: Which hospital did *U.S. News & World Report* recently rank as one of the country's 50 best hospitals for cancer treatment, urology, diabetes and endocrine disorders, geriatrics, gynecology, and ear, nose and throat care, not to mention heart care and heart surgery?

Answer: Yep, it was Shands at UF, which was ranked in seven specialties as part of the publication's annual roundup of America's Best Hospitals. The hospital secured the top ranking in Florida for heart and heart surgery, urology and geriatrics. — *April Frawley Birdwell*

TOBACCO-FREE TOGETHER

HSC, Shands ban tobacco use on campus

By Melanie Fridl Ross

UF and Shands HealthCare are going Tobacco-Free Together. As of Nov. 1, the use of cigarettes or other tobacco products in any of the Health Science Center, Shands HealthCare or UF Physicians buildings and parking lots, or in vehicles in these areas, will not be permitted. UF plans to implement the policy on its main campus in July 2010.

“Going tobacco-free on our health-care campuses is the right thing to do for our patients and visitors — and for each other,” said David S. Guzick, M.D., Ph.D., UF’s senior vice president for health affairs and president of the UF&Shands Health System.

The new rule mainly affects a few designated outdoor smoking and tobacco-use areas and the properties surrounding Health Science Center and Shands HealthCare facilities. Smoking and tobacco use are already prohibited indoors.

“The decision to have tobacco-free campuses systemwide supports our commitment to providing a healthy environment for our patients and to improving health in our communities,” said Tim Goldfarb, chief executive officer of Shands HealthCare.

Tobacco dependence is the nation’s most preventable cause of death and disease, including cancer, heart disease and stroke. Nationally, tobacco use is responsible for nearly one in five deaths or an estimated 440,000 deaths per year, according to the Florida Hospital Association. That’s approximately 1,200 people each day — more than deaths caused by alcohol, cocaine, crack, heroin, homicide, suicide, car crashes, fires and AIDS combined. Currently, one out of every seven adults hospitalized at Shands at UF is treated for cancer or cancer-related illnesses.

Throughout Florida, more than 70 hospitals support the Florida Department of Health’s “Tobacco Free Florida” campaign and have tobacco-free campuses. Shands Jacksonville and the UF Health Science Center-Jacksonville went completely tobacco-free last November.

The Health Science Center and Shands HealthCare are providing information and resources to assist employees, patients and visitors who would like to break the habit. A wide selection of counseling services, self-help materials and medicines are available to help smokers and tobacco-users quit successfully. More information is available at www.tobaccofree.health.ufl.edu. **P**

Health privacy rules to get more **stringent**

This month, the U.S. Department of Health and Human Services is implementing new regulations that require stricter reporting when patients’ health privacy is breached.

Beginning Sept. 23, any individual whose protected health information has been compromised must be notified of the security breach within 60 days after the violation is discovered. If the data includes a Social Security number, the breach must be reported within 45 days, according to the state.

Media organizations also must be notified within 60 days if a privacy breach affects 500 patients or more. This new rule affects all health-care providers and organizations required to adhere to HIPAA regulations. If 500 or more patients are affected, the rule goes a step further, too. Breaches of this size must be reported annually to the Secretary of Health and Human Services within 60

days of the end of the calendar year.

HHS will post on its Web site the names of all providers or agencies that report breaches compromising the protected health information of 500 or more patients. In addition, penalties for these violations will be enforced beginning in October 2010. HHS is also required to report all breaches to Congress.

The new regulations were established to comply with the Health Information Technology for Economic and Clinical Health Act, which was passed earlier this year and requires more preventive measures to ensure that protected health information is not put at risk.

All patient information breaches must be reported to the UF Privacy Office. For more information or to seek help, visit www.privacy.ufl.edu or call 352-273-5094. — *April Frawley Birdwell*



The road to transparency

HSC colleges adopting, developing policies to monitor conflicts of interest

By Laura Mize

In May, UF's College of Medicine adopted its "Policy on Industry Conflicts of Interest/ Industry Academic Relations," which regulates interaction between representatives of companies that make pharmaceuticals and medical devices and the college's faculty, staff, students and residents.

Under the policy, members of the college community are prohibited from accepting gifts from industry representatives and must receive permission to participate in educational opportunities hosted by the companies. The policy requires "the disclosure of outside activities and financial interests" by college employees.

The move is in keeping with a national trend to more closely monitor how students and staff from medical institutions interact with representatives from various industries.

"People are a lot more sensitive to the relationship between physicians and the drug companies and device makers," said Tim Flynn, M.D., the college's interim senior associate dean for clinical affairs.

Sen. Chuck Grassley, a Republican from Iowa, has been pushing for more stringent regulation of conflicts of interest in medical and university settings. In June, he sent letters to 23 medical schools, including UF's College of Medicine, requesting information about their conflict of interest policies and money received from the National Institutes of Health. Grassley also teamed up with Sen. Herb Kohl, of Wisconsin, to sponsor the Physician Payments Sunshine Act. If passed, the bill would require drug and device companies to report payments they make to doctors and practices.

Flynn is also chair of a committee addressing the issue of industry relations policies throughout the Health Science Center, helping other colleges develop policies that will work well together. The College of Dentistry has a policy in place, while other Health Science Center colleges are developing or awaiting approval of their policies.

"The real issue is transparency and having people to be able to an-

swer the public that says ... 'Which of your doctors are giving talks for drug companies or receiving gifts from industry and are you sure that they're insulated from decision making about buying?'" Flynn said.

The College of Medicine's policy was distributed to employees and students by e-mail. Flynn said people are receiving it "very positively"

"Eventually, we're going to have to set up an office of compliance ... to be able to answer these questions."

— Tim Flynn, M.D., College of Medicine interim senior associate dean for clinical affairs

and that he gets many e-mails with questions about specific scenarios.

"Eventually, we're going to have to set up an office of compliance ... to be able to answer these questions," he said.

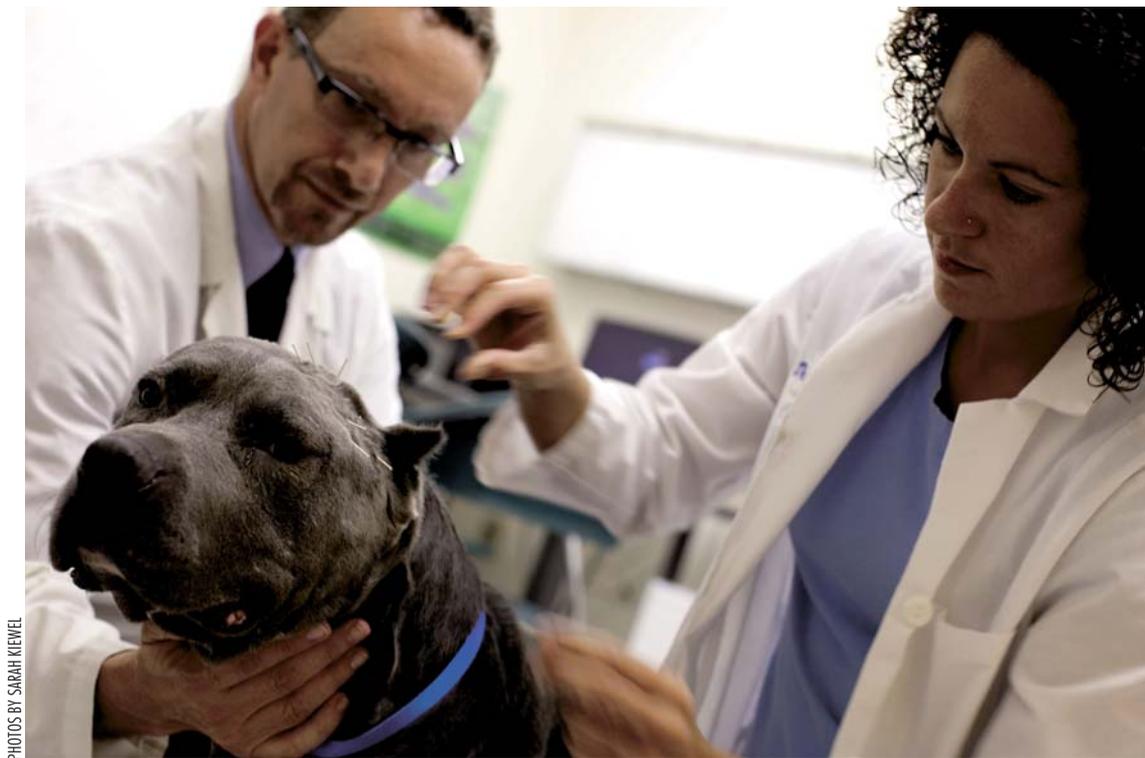
Flynn said the college's policy, and others like it across the nation, are not meant to squash cooperation between medical institutions and pharmaceutical companies.

"Clearly, there's a need to relate to industry. We're a country that's built on innovation and entrepreneurship and that's a good thing," Flynn said. "In no way does this policy seek to destroy that relationship and synergy between the investigators and the innovators here at the University of Florida and the people that can bring things to market and make things happen and improve health."

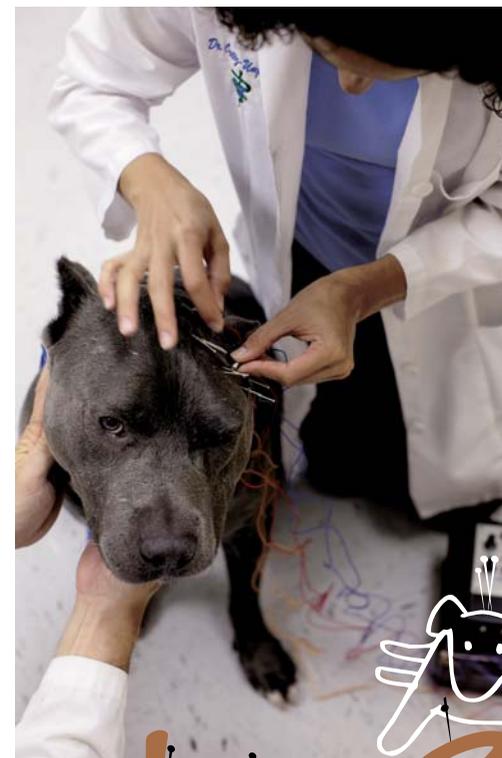
Flynn added that the goal of the policy "is to provide accountability and transparency to assure our patients we have their best interest at heart."

To view information about the bill sponsored by Sens. Grassley and Kohl, visit <http://thomas.loc.gov/> and Search for bill number S301.

To view the policy, visit <http://med.ufl.edu/admin/conflict-of-interest-policy-may09.pdf> 



PHOTOS BY SARAH KIEWEL



Stick a needle in your ... dog?

UF veterinary program uses acupuncture to heal animals

By Alyssa LaRenzie

Sitting on a yellow mat, surrounded by people petting him, Buddah allows several inch-long needles to pierce his skin on the top of his head and side of his face.

It's been a year and a half since the big, dark gray pit bull was attacked and bit on the head by another dog, leaving him with nerve damage, muscle atrophy and paralysis.

Since May 2008, Buddah has visited the UF Small Animal Hospital every month for his acupuncture treatments. In the first month, his facial paralysis subsided. Over the nine months of treatment, Buddah has regrown much of the muscular tissue he lost.

A timid and friendly dog by nature, Buddah has gotten used to his appointments. He doesn't seem to notice the very thin needles being hooked up to a machine that sends electric signals, a measure used to augment the normal acupuncture practice of needles stimulating points on the body. Buddah's head starts to droop.

"Points on the head cause more sedation. He gets really sleepy fast," said Carolina Medina, D.V.M., one of two faculty members in the Acupuncture Program at the College of Veterinary Medicine.

Acupuncture rose in popularity for humans in the 1990s, though the idea of needles in the body for healing purposes still hasn't reached full understanding or acceptance in the Western world. Using the practice on animals may seem a little out of the ordinary, but the ancient Chinese healing technique first recorded more than 2,000 years ago was also performed on animals.

Though the traditional practice is based on the release of energy through

points in the body, Medina explained the inner workings of acupuncture from a more scientific view. For example, if you got a cut, your body sends signals to the brain, which sends painkillers to the wound.

"What acupuncture does is basically speeding up that process and making your brain release more substances than you could on your own," Medina said. "It's kind of like your body's healing itself but faster than you could and stronger than you could."

The UF program, founded about 10 years ago, is headed by Huisheng Xie, Ph.D., a third-generation veterinary acupuncturist, often revered as the best in the U.S. The clinic sees about 20 to 30 animals each week, Medina said. Though mostly dogs, cats and horses receive the treatments, Xie and Medina care for a variety of species.

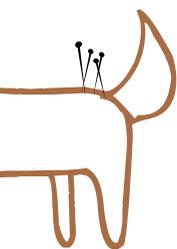
Because of Xie's reputation, people and their animals will often travel to receive services at the UF clinic. One man drove from Michigan with his old dog. Another brought an elephant from the Northeast.

Lynn Sickinger makes the nearly six-hour round trip drive from Ponte Verde Beach, Fla., once every two months with her beloved border collie, Chutney, to see Xie.

When 10-year-old Chutney's high liver enzyme levels started to get out of control, rising into the 2,000s, far above the normal level of 118, she tried everything to help. Sickinger had experienced the benefits of acupuncture herself, so she decided to bring Chutney to a nearby Jacksonville acupuncturist. The blood workup from her regular veterinarian showed the treatment had not helped.

After some research on the Internet, a Colorado man told her she had "the best of the best in Gainesville." She immediately took Chutney to Xie, and the dog's liver enzyme levels dropped for the first time in almost 10 years.

Sickinger said her neighbor's 11-year-old beagle has the same problem and has tried only a Western medicine approach. Though not all cases are the



Saving horses

UF veterinarians treat life-threatening equine condition

By Sarah Carey

Two horses at risk for life-threatening bleeding caused by an uncommon infection of the internal carotid artery were successfully treated recently by UF veterinarians who used new technology to resolve the problem faster and less invasively than traditional surgery would allow.

“The problem both of these horses had involved a disease called guttural pouch mycosis, or a fungal infection in the guttural pouch,” said Herb Maisenbacher, V.M.D., an assistant clinical professor of cardiology at UF’s Veterinary Medical Center. “The infection can eat its way through the tissues in the back of the throat, potentially rupturing the arteries.”

Typical symptoms include bleeding from the nose, Maisenbacher said. UF veterinarians treated the first horse in October 2008, and the second in May.

Lynne Kimball-Davis, of Wellington, Fla., recalled the late October morning when she went to feed her horse, a Dutch warmblood named Upper Class, and discovered him in his stall bleeding from the nose.

“It looked like he had been massacred,” she said.



With the assistance of visiting professor Dr. Jose Zilberschtein, veterinary acupuncturist Dr. Carolina Medina performs acupuncture on Buddah, who receives monthly treatments. The treatments have helped the gray pit bull recover much of the muscular tissue he lost when another dog attacked him last year.

same, she said the differences between the two dogs are “day and night.”

Acupuncture, herbs and other recommendations from Xie have given Chutney a happier quality of life. She runs like a puppy (a common benefit of acupuncture for dogs), her coat has improved and her liver enzyme levels are safely declining.

So when Sickinger heard that the program was on a list of possible budget cuts for the college, she was devastated. She wrote a letter to the dean discussing Xie’s talent and reputation, the benefits of combining Eastern and Western medicine and the forward thinking of UF by including the program in its veterinary education.

Based on the success rate, popularity of the program and uproar from students and faculty, the program wasn’t in jeopardy long, said Jennifer Burroughs, a third-year veterinary student.

Burroughs, who took acupuncture as a two-week summer elective, said she became interested in acupuncture at a local barn where she rode horses. She saw Xie’s acupuncture treatments cure a lame horse.

Without the opportunity at UF, she doubts acupuncture would have crossed her mind. The practice isn’t really discussed in classes, but the elective fills up quickly. Hoping to become an equine veterinarian, Burroughs said she plans to take acupuncture courses to include the method in her own practice.

“This is our only chance to learn this,” she said. “And it helps so many people and animals.”

Buddah, the sleepy pit bull, has made progress in regrowing muscles, a difficult process that sometimes doesn’t yield a result. After his 20-minute session, he arose with a wagging tail, kissed the people who had surrounded him and headed for the door.

Medina takes all her tools and fits them into a case no bigger than a child’s shoebox.

Buddah will be back again next month.

“He’s still receiving treatments so hopefully one day his head will look normal,” Medina said. “But right now it is much better than it was last year.” **P**



Kimball-Davis rushed her horse to Palm Beach Equine Clinic, where veterinarians determined a referral to UF was necessary. Upper Class returned home after about a week at UF, and has made steady progress since then, she said.

Freeman, an equine surgeon, collaborated with Maisenbacher’s cardiology team to treat both cases. In each case, a device known as a vascular plug was inserted to occlude the at-risk artery. Before that, surgeons access the carotid artery through a small incision in the neck and use a contrast agent to find the damaged vessels before blocking them off.

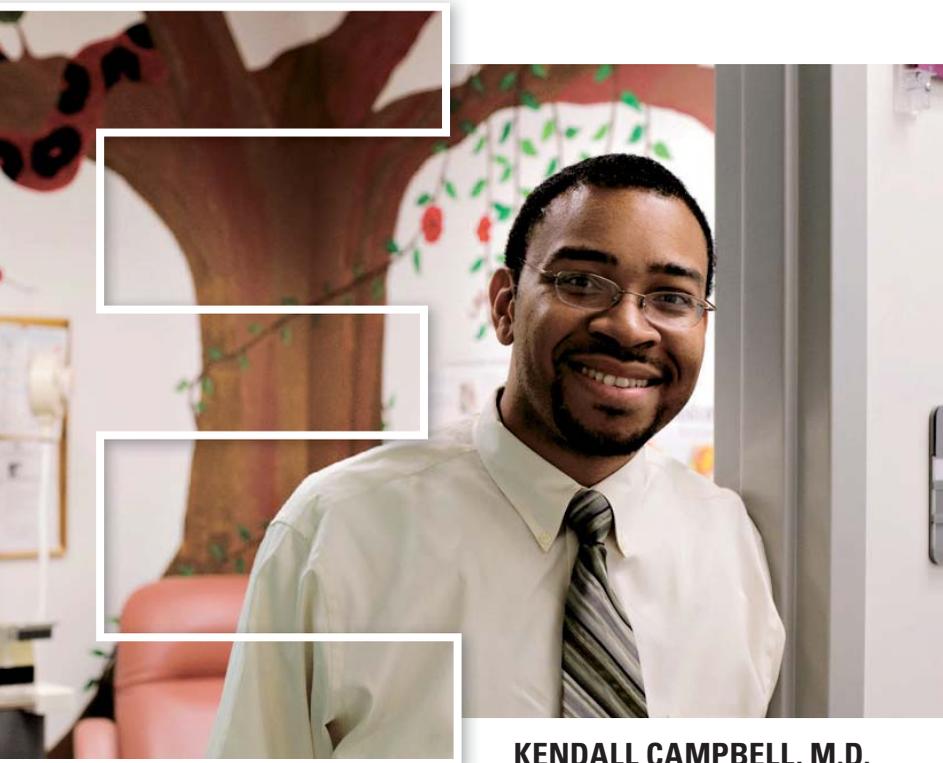
“The affected area is difficult to approach surgically, but it’s been done before,” Maisenbacher said. “What made our approach unique is that we were able to make the procedure go more smoothly by using newer devices to achieve the same result.”

The procedure takes between two and three hours, he added.

“Once the animals wake up from anesthesia, they are almost back to their normal selves,” he said. “The other advantage is that the devices offer the ability to access vessels that by traditional methods are very difficult to get to. Plus, there really is no other medical treatment for this condition.” **P**

Project Eastside

UF clinic launches effort to improve health in East Gainesville



KENDALL CAMPBELL, M.D.

By April Frawley Birdwell

On a Saturday in June, tables strewn with information about affordable insurance, free health checks and prescriptions were scattered throughout the Eastside Community Practice. At one table, a volunteer took the blood pressure of an elderly woman. At another, a young man was checked for diabetes.

Outside the clinic, smoke curled from a barbecue, drawing a small crowd of people lugging red bags stuffed with health information. Nearby, other volunteers fitted children for safe bicycle helmets and checked the safety of a new mother's car seat.

The event may have seemed like just another health fair to some attendees. But to Kendall Campbell, M.D., medical director of the Eastside Community Practice, having a packed house on a Saturday was a huge step forward in an effort he launched at the clinic more than a year ago.

Located on Waldo Road just north of University Avenue, the Eastside Community Practice sits in an area with the highest rates of cancer deaths, infant mortality and sexually transmitted diseases in Alachua County, according to the 2008 Alachua County Health Report Card. That's why Campbell set out on a mission to improve prevention efforts in the community, recruiting more patients and offering services geared toward taking

care of patients year-round, not just when they're sick.

"What we're essentially trying to do is not be the 'doc in the box,'" Campbell said. "We want to be more proactive and go out in the community."

Because of the unique challenges in the community, the Eastside Community Practice doesn't operate like a typical clinic. It's an interdisciplinary effort — family doctors team with pharmacists, pediatricians, mental health counselors, nurse practitioners, nurses and a social worker to help patients. It has a diverse patient population, too. Some patients have insurance. Some don't. For these folks, the help doesn't end there. The clinic's social worker works with patients who are unemployed to help them find jobs or even training so they can get a better job with insurance.

"It's more of a one-stop shop for people here, to help get them on their feet and not continue in their state of helplessness and hopelessness," Campbell said. "We're saying 'You can do this thing, and I'm going to help you.'"

To reach out to new patients, clinic staff members have performed health screenings at community locations such as Wal-Mart or local churches. Staff members help potential patients figure out if they qualify for programs such as CHOICES, a county program that gives the working uninsured access to needed health services. Campbell has also started a medication voucher program using donations.

In November, the clinic is teaming with the department of urology to raise prostate cancer awareness. And they aren't just sitting back and waiting for the patients to come to them, they're take the message into the community, to ministers and to barbershops. The clinic received a grant from the U.S. Department of Women's Health to help train people in the community how to fight childhood obesity.

Eventually, Campbell said he plans to use a mobile unit for screenings and other health services.

The clinic is also implementing a wellness program to prevent health problems and ensure that patients are following doctors' orders even when they don't have appointments. A big part of this effort is a disease management registry Campbell and his staff have developed.

The registry will allow the clinic to easily keep track of patients who have conditions such as diabetes or asthma and will categorize them based on how they're managing the disease, Campbell said. This will allow clinic staff members to focus on specific patients who need to be followed more closely.

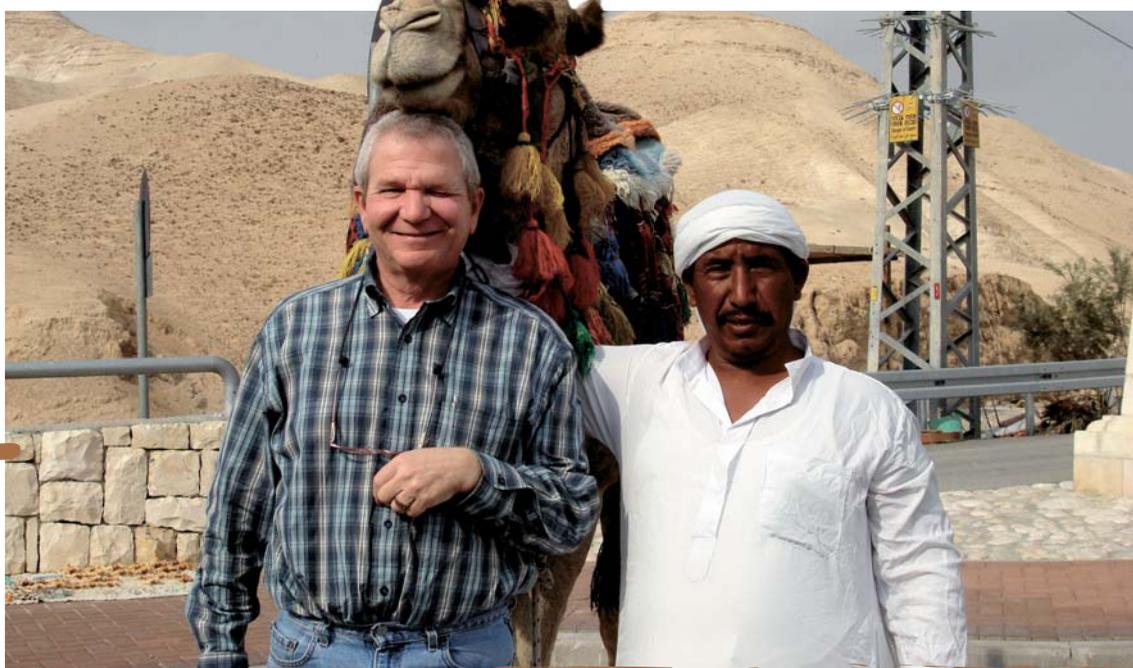
"The thing we have to do first is start the data-gathering process," Campbell said. "How many diabetics are here? How many of our kids have up-to-date immunizations?"

Overall, Campbell's biggest goal is to increase health-care opportunities for people in East Gainesville. He would like to keep the clinic open later so underinsured workers who can't leave their jobs during the day can come to Eastside after hours when they're sick instead of going to a hospital emergency room for primary care. He also hopes to collaborate with physicians in the department of emergency medicine to encourage homeless and uninsured East Gainesville residents to go to the clinic instead of using emergency services as primary care.

Of course, these goals require money, Campbell says. He's working with UF development officers to raise money for the clinic and has hired a grant writer to work on securing grants for the clinic. The clinic also receives funding through the Alachua County Area Health Education Centers. Every dollar or collaboration helps.

"We have a lot of educating to do," Campbell said. "We have a lot of work to do on health care in East Gainesville." 

Off the beaten path



UF professor shares his expertise in Israel

College of Pharmacy professor Leslie Hendeles, recently took a sabbatical to teach in Israel.

By Alyssa LaRenzie

Though Leslie Hendeles, Pharm.D., had visited Israel three times before, this was his first time living there on an extended stay. Almost every evening, he set out from his Jerusalem apartment, walking down a different path with his wife to choose a restaurant for dinner. Far from home, Hendeles had also set out on a different path in his career.

Time off for research or writing is common for professors taking a sabbatical, but Hendeles took time off to teach.

Hendeles, a professor of pharmacy and pediatrics, took a break from a group of about 1,200 Doctor of Pharmacy students at UF to teach the eight students who make up Israel's first Pharm.D. class at the Hebrew University.

Though the Pharm.D. has become the standard to practice pharmacy in the United States, most pharmacists in Israel hold a bachelor's degree in pharmacy. At UF, most students take two years of undergraduate classes before entering a four-year Pharm.D. program. The new program at Hebrew University involves a four-year bachelor's degree followed by a three-year Pharm.D. program that also includes a research project.

The Pharm.D. program was designed to give students the opportunity to be better clinical pharmacists — those who work in hospitals and clinics alongside physicians.

Invited to teach for the full spring semester, Hendeles decided to stay two months so he wouldn't miss too much time from the Asthma Lab at UF. His classes focused on his

specialties: drugs for asthma and allergies.

He taught for the degree program's first class, which included five Jews and three Arabs.

"I was really impressed with how these Arab students and the Jewish students were collaborative and working together and helping each other in the midst of rockets being fired in the Gaza Strip," he said.

Hendeles served as a career role model for the aspiring students, since no one has yet earned a Pharm.D. degree in Israel, said Amnon Hoffman, the head of the clinical pharmacy program at Hebrew University.

During his short visit, Hendeles became a close colleague and a mentor in the new degree endeavor, giving Hoffman a connection to a university that has offered the Pharm.D. degree for more than 30 years.

"It is encouraging for me to know that there is a group of people who can help," Hoffman said.

For Hendeles, teaching didn't stop in the classroom. He took his areas of expertise to Hadassah, the hospital that Hebrew University partners with, teaching the pediatric doctors about improving the delivery of asthma medications to children.

"The chief of pediatrics recognized that the pediatric residents were not getting enough training from the pediatric pulmonologists, and yet they graduate from the program and have to go to clinics where they take care of asthma patients," Hendeles said. "So he saw this as an opportunity to capitalize on me being there."

As Hendeles has done much of his research on inhaled asthma medications, he cued in quickly on a common problem. In the hospital, a less effective medicine was still being used to treat asthma and doctors often didn't give inhaled medications for patients to take home. Because many children didn't have these at home or know when to use them, several children were admitted to the hospital for asthma attacks, which often can be avoided with a few steps.

Based on written instructions for identifying and diagnosing asthma patients used in Gainesville and on the Web, a pediatric health educator wrote similar instructions in Hebrew for the hospital in Jerusalem with the help of Hendeles and the chief of pediatrics.

Though Hadassah has some advanced technologies that Shands doesn't yet have, Hendeles said his experience with the pharmacy at the hospital in Jerusalem gave him a new admiration for how pharmacy is practiced in hospitals in the U.S.

"In the time that I've become a pharmacist, we have come so far," he said. "What I've realized is how much more pharmacists are involved in improving the use of drugs in patients in this country and at this health center and in our state." **P**

[Joining forces]

Two UF communication science departments move forward as one

By Jill Pease

Two UF communication science departments have joined to form the largest academic program of its kind in Florida.

The merger of the department of communication sciences and disorders in the College of Liberal Arts and Sciences with the department of communicative disorders in the College of Public Health and Health Professions was announced in May as part of a series of university cost-cutting measures.

Now, the newly created department of communicative disorders is moving forward with a broad base of academic and clinical research programs.

“We worked closely with the dean of the College of Liberal Arts and Sciences and

the chairs of the respective departments to develop a plan that would eliminate duplication, reduce costs and produce a merged department with a stronger focus on research and Ph.D. education,” said Michael G. Perri, Ph.D., interim dean of the College of Public Health and Health Professions.

The expanded department, located in the College of Public Health and Health Professions, has 45 faculty members. *U.S. News and World Report* ranks the department’s Doctor of Audiology program sixth in the nation and the master’s in speech pathology 12th. The newly merged department offers a Ph.D. program in areas of speech, language and hearing science.

The department also delivers a full range of speech and hearing clinical services and partners with Shands HealthCare for rehabilitation services.

“We couldn’t be more excited to be in the College of Public Health and Health Professions and the Health Science Center, where the flexibility and clinical research focus allows us to maximize growth,” said Christine Sapienza, Ph.D., who was named chair of the newly expanded department after serving as the chair of the department of communication sciences and disorders in the College of Liberal Arts and Sciences since 2005. “We are now next to our colleagues in PHHP and down the road from the College of Medicine, allowing us to optimize the clinical training model that should be going on at a university like UF.” **P**

Students file into the HPNP Complex for the College of Public Health and Health Professions’ student welcome ceremony. The college recently received five-year accreditation as a school of public health by the Council on Education for Public Health.



PHOTO BY SARAH KEWEL

Another **PHHP** milestone

College receives public health accreditation

By Jill Pease

The College of Public Health and Health Professions has been awarded five-year accreditation as a school of public health by the Council on Education for Public Health, an independent agency recognized by the U.S. Department of Education. The college joins only 41 U.S. universities that have received accreditation in public health at the college level.

“Our college has developed a unique educational model that promotes collaboration across public health and health professions disciplines, two areas that have traditionally operated independently of each other,” said Michael G. Perri, Ph.D., interim dean of the college. “By combining the public health focus on populations and prevention with the individual treatment perspective of the health professions, we have created important synergies in education, research and service.”

The collaborative missions of the College of Public Health and Health Professions are critical to the future of UF’s entire health-care enterprise, said David S. Guzik, M.D., Ph.D., senior vice president for health affairs and president of the UF&Shands

Health System.

“Research in the college — epidemiologic, biostatistical, behavioral and health services — is especially pertinent to the national focus on improving health-care access and quality in a cost-effective manner, and the training of health professionals in key areas of need promotes high-quality care at Shands and at other health-care facilities in the state,” Guzik said.

To develop a new public health enterprise, the college established departments of epidemiology and biostatistics; environmental and global health; and behavioral science and community health. The college also added two Ph.D. programs, one in epidemiology in conjunction with the UF College of Medicine and the other in biostatistics. The college expanded the Master of Public Health degree and added a distance-learning certificate in public health, and an online M.P.H. degree is in the works. These programs complement the college’s existing academic programs, including three Ph.D. degree programs, two professional doctoral programs, three master’s degrees and a bachelor’s degree in health science. **P**

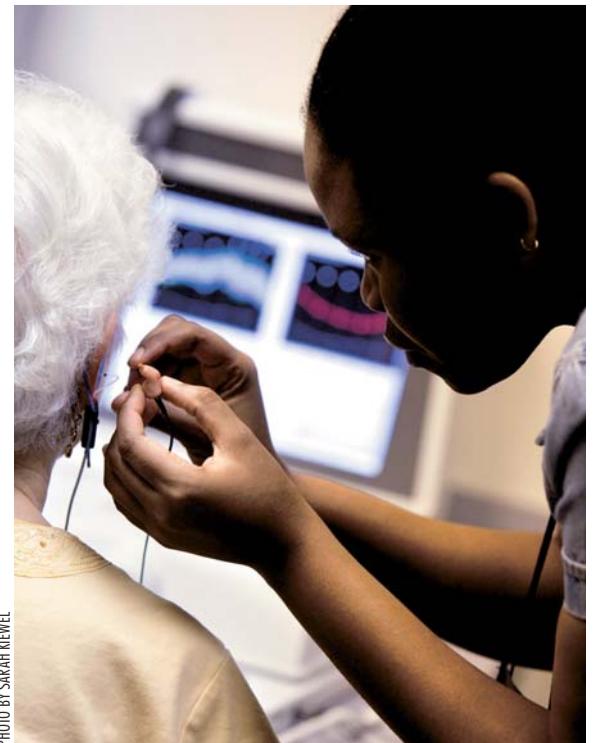


PHOTO BY SARAH KEWEL

Doctor of Audiology program graduate Sinah Seoke fits patient Cindy Normand with a hearing aid. The College of Liberal Arts and Sciences department of communication sciences and disorders and the College of Public Health and Health Professions department of communicative disorders recently joined to form the largest program of its kind in Florida.

Nurse without borders

Globetrotting student part of new Doctor of Nursing Practice program

By Tracy Brown Wright

In a span of seven years, Sara Nowlis has provided nutrition workshops to rural villagers in West Africa as a member of the Peace Corps, worked in an oncology ward of a Jacksonville hospital, served as the tuberculosis case manager in the Anchorage, Alaska, health department and worked with an interdisciplinary health team in Uganda providing care for AIDS patients also suffering from TB.

She also found time to obtain her nursing degree, which was her second bachelor's degree in four years.

Nowlis now finds herself back in Gainesville, site of her alma mater, where she received her bachelor's degree in health science education in 2001. She is a pioneering member of this year's inaugural class of the BSN to DNP program in family nursing.

Nowlis, who joined the Peace Corps immediately after her graduation from UF in 2001 and served for two years, found herself wanting to provide more than just education to people in need.

"There was so much that was lacking in terms of primary care for these people, and I wanted to be in a position where one day I could travel to places like this and help provide this care, which is so desperately needed," Nowlis said.

After the Peace Corps, Nowlis found her way to the University of North Florida's accelerated BSN program in her hometown of Jacksonville. After a short stint in an oncology ward at a local hospital, she felt the itch to move on to something else. And for Nowlis, that meant somewhere not exactly around the corner — like Anchorage.

Even while she enjoyed her experience there, she wanted to return to the humanitarian care that she had provided while in the Peace Corps. She applied for Doctors Without Borders, an international medical humanitarian organization created by doctors to assist both Third World countries and those that have suffered great catastrophe. Within five months, Nowlis found herself in Uganda treating HIV/AIDS patients with a team of health-care professionals.

But Nowlis' journey was far from over. While in Uganda, she decided to apply for the UF DNP program to begin in fall 2009. This involved studying for and taking the GRE overseas, but like her other endeavors, she was up for the challenge.



PHOTO BY APRIL FRAWLEY BROWELL

Sara Nowlis is one of the first 152 students in a new College of Nursing program that allows bachelor's degree-trained nurses to earn the Doctor of Nursing Practice degree. Before coming to UF, Nowlis served in the Peace Corps, worked with tuberculosis patients in Alaska and worked with HIV patients in Uganda.

"I always knew I wanted to advance my education and I wanted to go to the best program in Florida," said Nowlis, who is a full-time student. "UF's nursing program is very well-respected, and I had a great experience at UF as an undergrad."

And it is appropriate that Nowlis is part of the first class of BSN to DNP students, as she has never been afraid to venture down unknown paths or parts of the world.

"It is kind of exciting to be at the start of something new in the nursing profession," Nowlis said.

As for the future, Nowlis is happy to stay in Gainesville for the time being pursuing her degree. But after that, who knows?

Global and humanitarian health care is a passion of hers, and she would like to try another stint with Doctors Without Borders. But eventually, she would like to stay in one place and be settled, perhaps in a private practice.

"This degree will open up a lot of doors for me," Nowlis said. "Even if I do settle somewhere, I know that my heart will lead me to working with underprivileged groups in need of health care here in the United States. It's truly been my calling." **P**

About the BSN to DNP program:

Nowlis is one of the first 152 students in a new UF program that allows people who have bachelor's degrees in nursing to enter directly into study for the Doctor of Nursing Practice degree. UF is one of the first nursing schools in Florida and across the country to have a program like this. The U.S. Health Resources and Services Administration Department of Health and Human Services awarded more than \$900,000 to the college to facilitate transition of its advanced practice nursing education program from the master's to the doctoral level. This strategic move will increase availability of primary health-care providers in underserved areas and help address the critical nursing faculty shortage.

The INNOVATORS

BY CZERNE M. REID

HOW UF IS USING NEW TECHNOLOGY TO HELP PATIENTS AND SAVE LIVES



PHOTO BY SARAH MEWEL

In robotic surgery, surgeons operate the robot from a console a few feet away from the patient. Here, medical resident Dr. Bryant Whiting assists during one of urologist Dr. Sijo Parekattil's surgeries.

Kalipay Acevedo wasn't due to have her baby for another month, when one sleepy Sunday morning recently she felt her stomach drop. No pain. No contractions. She was just gushing blood.

Her husband, Miguel, called the ambulance to their Tampa home. Kalipay passed out on the way to the hospital.

She had had a placental abruption, a condition in which the placenta detaches prematurely from the uterus. The resulting loss of oxygen and glucose to the baby's brain caused a condition called hypoxic-ischemic encephalopathy.

Doctors quickly delivered baby Sianna Marie Acevedo by Caesarean section. But she wasn't breathing. In fact, she didn't breathe for about 14 minutes. Her little heart pumped at just 30 beats a minute — much slower than the 100 to 160 beats a minute considered normal for newborns. She was pale and wasn't moving.

"I broke down. I thought I had lost my child," Miguel Acevedo says.

Within the hour, Sianna was on her way by helicopter to Shands at UF. There, neonatologist Michael Weiss, M.D., and his team in the neonatal intensive care unit have been using a body cooling technique to try to stave off damage to the brains of babies like Sianna.

Weiss and his team started quickly to carry out the procedure, called systemic hypothermia. They placed the baby on a pad attached to a temperature control machine, cooling her body to

about 7 degrees Fahrenheit lower than normal body temperature for 72 hours. EEG electrodes attached to her head allowed monitoring of her brain activity patterns that could give clues about how she will fare after the treatment. A cerebral saturation monitor, connected to the lead on the baby's forehead, gave Weiss an idea of blood flow to the brain. UF is one of the few institutions to use this monitor and one of the few in the state to offer the cooling procedure.

Before 2004, when babies with diagnoses like Sianna's came in, all doctors and nurses could offer was "supportive care" — such as monitoring the baby's blood pressure and glucose levels, checking that the kidneys are working properly and stanching any bleeding.

"There was nothing we did that was geared at minimizing the amount of injury the brain had," Weiss says.

Now, even though the cooling procedure is available, it is not universally used. Weiss is trying to change that by teaching colleagues at other hospitals about the technique.

He and other health professionals and researchers at UF and Shands continuously seek out new ways to help patients, often when there are no alternatives. In so doing they help to make UF and Shands a fertile ground for development and use of new medical technologies, whether it's using brain-saving cooling protocols, developing new vaccines or exploring new applications for robot-assisted surgery.

"I think UF has a lot of highly intelligent investigators who are working to get new therapies to patients," says Johannes Vieweg, M.D., chair of the department of urology, which has a division of robotics and minimally invasive surgery. "We want to be known as a hub for innovative therapies."

New initiatives such as UF's Clinical and Translational Science Institute and the Florida Innovation Hub serve to foster a culture of technology and invention and speed new discoveries to patients.

Weiss has treated 10 babies with the cooling procedure in the two years since he started offering it. Now, he is trying to help even more babies around the state. He is applying for a grant from the CTSI to develop the Florida Neurologic Network, a collaboration among the UF and Shands hospital system and other academic and private hospitals in North Central Florida that aims to improve the hypothermia technique, instruct other doctors on its use and make it more widely available.

"To me that's really exciting to be able to get it out to more people," says Chris Batich, Ph.D., associate director of the CTSI, who works to bring physicians into collaborations with engineers, scientists and other experts who can turn research ideas into technologies that can help even the littlest of patients, like Sianna, and bring them into widespread use.

Whether it's in caring for newborns or helping people struggling with infertility, new technology at UF is giving people hope.

The ROBOT IS IN

Robot-assisted surgery, which came into use in the United States in 2001, has enhanced treatment offerings and outcomes for patients. Robotic surgery allows surgeons to operate through small incisions in the body. That helps reduce recovery time, blood loss, postsurgery pain and scarring compared with so-called "open surgery" in which large incisions are made in the body to remove diseased tissues and organs.

In robotic surgery, the surgeon uses joysticks to operate the robot remotely from a console a few feet away. The surgeon also "drives" the robot using gearshifts and foot pedals, making surgical movements that the robot mimics. The four arms hold small surgical and monitoring instruments. With its many mechanical joints, the computer-driven robot allows easier access to hard-to-reach areas of the body. The machine eliminates hand tremor and excessive movement by refining the surgeon's wrist movements, scaling them down to one-fifth of the normal motion.

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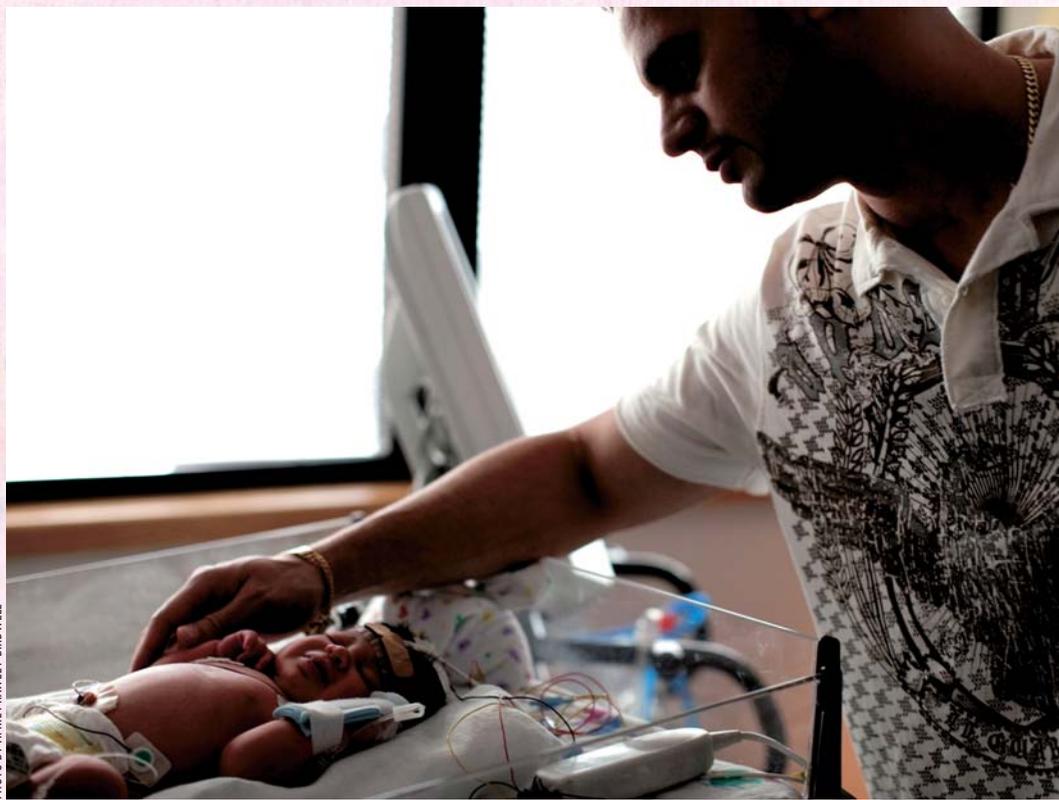


PHOTO BY APRIL FRAWLEY BIRDWELL

Miguel Acevedo spends a few minutes with his daughter, Sianna, in the neonatal intensive care unit at Shands at UF.

Bioguard

A new tool to fight virulent microbial agents of disease went into

production this year, nine years after Gregory Schultz, Ph.D., director of UF's Institute for Wound Research, performed the first related lab experiments. The NIMBUS gauze is made up of a microbicidal polymer chemically bonded to a bandage, which traps bacteria and prevents them from being transmitted from a wound to other surfaces or to other people. "It looks just like regular gauze, but it kills bacteria on contact," said Chris Batich, Ph.D., a UF professor of materials science and engineering who is a co-developer of the technology. Marketed as Bioguard, the gauze kills 99.9 percent of bacteria such as MRSA and VRE, which are responsible for millions of hospital-acquired infections and hundreds of related deaths each year. Earlier this year the bandage was approved via the FDA's special "De Novo" process, granted to about four applicants a year. By comparison, about 3,000 approvals a year are considered under the standard process for devices "substantially equivalent to those already existing." The bandage is being produced and marketed by Derma Sciences Inc., which has licensed the technology from Quick-Med Technologies Inc., a start-up company with a Gainesville laboratory that has developed and licensed the technology from UF. — *Czerne M. Reid*





PHOTO BY SARAH KUEVEL

Robot-assisted surgery gives surgeons a high-definition view that can be magnified up to 12 times. The robot also allows surgeons to make more precise cuts.

A telescopic binocular lens gives surgeons a sharp, high-definition 3-D live view that is magnified up to 12 times. That allows them to anticipate bleeding earlier and minimize blood loss. They can also cut more carefully in a way that preserves muscles, nerves and other tissues near the surgical area.

“The way to think about robotic surgery is as an extension of a skill set surgeons already have,” says Li-Ming Su, M.D., chief of robotic and minimally invasive urologic surgery in the College of Medicine. “If we can see better, then we can perform better and more precise surgery.”

Robotic surgery is employed in a variety of disciplines, including pediatrics, cardiology and gynecology. But it’s urology where the technology seems to have taken off, sprouting a host of applications. UF’s urology department has five surgeons with advanced fellowship training in robotic surgery.

Sijo Parekattil, M.D., for example, uses the robot for microsurgical treatments — intricate surgery on small body structures — in applications such as testicular sperm extraction, tying off varicose veins within the testicles, vasectomy reversal and treating chronic testicular pain. He has performed more than 100 robotic microsurgical procedures.

Parekattil, director of male infertility and microsurgery in the urology department, is presenting his work later this year at the World Congress of Urology in Munich.

In women, robotic surgery can help correct vaginal prolapse — a condition in which organs such as the bladder, bowels or uterus protrude into the vaginal canal because of the failure of support structures within the pelvis. That can occur as a result of childbirth, pregnancy, aging or other factors. Through five small incisions in the abdomen, Louis Moy, M.D., director of female urology and reconstructive surgery, robotically creates new support for the vagina and pelvic organs with a synthetic mesh anchored to the bony part of the pelvis.

“It’s really no different from open abdominal surgery, just less invasive,” Moy says.

All the better **TO SEE YOU WITH, MY DEAR**

Robots have dramatically improved surgeons’ ability to see what they are doing. Su is taking the technology a step further in order to improve the visibility of hard-to-see tumors deep within the kidneys.

“If you can’t see it, where do you cut?” Su says.

He’s trying to solve that riddle using a technique called augmented virtual reality, which involves creating 3-D images of the kidney from MRI and CT scans, and overlaying them in real time on the surgeon’s robot-eye field of vision.

“It essentially provides a road map of where to cut,” he says.

Now, he is trying to develop collaborations with UF mechanical and bio-engineers to establish a multidisciplinary team to bring the idea to fruition.

To give gastroenterologists a live camera view — rather than an indirect X-ray view — in difficult procedures involving narrowing or large stones in the gallbladder, bile ducts, pancreas, and liver, Peter Draganov, M.D., and Chris Forsmark, M.D., chief of the division of gastroenterology, hepatology and nutrition, collaborated with Boston Scientific during development of a technique called direct visualization cholangioscopy. UF was the first in the nation to have it after its 2006 FDA approval.

Don't **MAKE A HOLE**

While robotic surgery and other minimally invasive surgical techniques aim to make small incisions and leave the smallest scars possible, other techniques aim to leave no scars behind.

When it comes to avoiding scars, a new technology called the NanoKnife is a master. Applied in the treatment of conditions such as liver, lung and kidney disease, it kills lesions in soft tissue without damaging surrounding structures such as blood vessels and nerves. Only about 20 institutions around the world offer this technology, and UF has been given the option to have it too.

NanoKnife surgery involves shocking cells of lesions with electrical currents supplied by tiny electrodes. That causes the cells to open and lose the key components needed for life. Those cells die a natural death and are cleared away and replaced by the body’s healing processes, leaving no scars.

“This technology has much less collateral damage than other techniques that we use, and in addition, it’s faster,” says James Caridi, M.D., chief of the division of vascular and interventional radiology.

Another UF gastroenterologist is researching no-scar surgery through already existing body openings such as the mouth, rectum, vagina or urethra.

This “natural orifice” surgery involves making incisions inside the gastrointestinal or reproductive tract to get to other organs. That goes against traditional medical training and practice.

“Don’t make a hole — that’s what we’ve been taught and that’s what’s in our textbooks, but now that may change,” says Mihir Wagh, M.D., an assistant professor in the department of gastroenterology, hepatology and nutrition.

Unintentional perforations in the GI tract can be dangerous, causing its contents to leak into the chest or abdomen.

But in animal studies, Wagh has intentionally made holes in the stomach and colon to remove the uterus, ovaries and gallbladder, then closed the holes from inside, leaving no external scars. Wagh has presented his work at national and international meetings — in October he will present in Germany.

Many questions — medical and otherwise — surround the technique. Who should perform it — a gastroenterologist? A gynecologist? A surgeon? How would practitioners be trained? And would insurers cover the novel procedures?



PHOTO BY APRIL FRAWLEY BIRDWELL

UF neonatologist Dr. Michael Weiss used a new cooling technique on newborn Sianna Acevedo, who was deprived of oxygen during birth, to help stave off brain damage. The white pad underneath her is used to regulate her temperature.

Various centers around the United States and around the world are studying this type of surgery in humans and animals. Wagh is also investigating whether surgery complications such as unintentional damage or excessive bleeding can be fixed through the same orifice used for the surgery.

“We’re just at the basic infant steps right now,” he says.

While researchers nurture their discoveries to maturity, the Acevedos are looking forward to seeing their daughter take her first steps.

oooooooooooooooo

Kalipay Acevedo had to wait in recovery for three days after her delivery. But as soon as she was discharged from the Tampa hospital where she gave birth, her husband drove her to the NICU at Shands at UF. She wept as she came through the doors.

“I expected tubes to be everywhere and her head to be swollen, and I expected her to be smaller,” she says.

But although Sianna had been connected to a ventilator earlier, now she was breathing on her own. Her skin looked healthy. She was moving and making little purring noises that made her dad, Miguel, laugh out loud.

“This is night and day compared to what she was two days ago,” he says.

In just a few hours, doctors would start warming Sianna up — very slowly, by just over half a degree Fahrenheit per hour. Then they would wait and see what happens in the coming weeks, months and years.

“This is the toughest thing for a family,” Weiss says. “You can’t tell the parents exactly how they’re going to turn out two or three years from now.”

But for the Acevedos, it was enough that the UF and Shands doctor and nurses had tried.

“Just having an option of something that you can do instead of all the negative things — it just gives me that hope,” Kalipay Acevedo says. “I was so thankful that they didn’t give up on her.” **P**

Homework ... on your phone

By Laura Mize

This fall, UF College of Pharmacy students will find more in iTunes than just their favorite musical artists and TV shows. Through iTunes U, a free service offered by Apple to educational institutions, they’ll find video lectures and media files related to their pharmacy courses.

Students will be able to access all that on their iPods or iPhones. The college has implemented a requirement that all new students this fall own an iPod Touch or iPhone. The college still requires students to own a laptop computer.

The iPod Touch and iPhone will allow students to access numerous programs to help them through pharmacy school, says Dean William Riffée, Ph.D., an advocate of learning technologies. In addition to iTunes U, they also can use Epocrates Rx, an iPod/iPhone application that features a searchable database of pharmaceutical drugs sorted into categories based on appearance.

Students will be able to search for all blue pills with an oblong shape, for example.

There’s also Allscripts, a company that’s working with the college to create a database of fictional medical records to help students learn to use electronic medical records.

The devices can be used as classroom clickers, enabling students to provide answers to pop quiz questions and participate in other interactive learning activities while in class.

“There’s a growing body of research that revealed that by using that type of teaching approach you can improve learning outcomes and prolong retention of material,” says Andy Kellenberger, educational media coordinator in the college.

The devices also will help students and the college stay more connected.

“We have a little icon we require them to put on their home screen, which takes them to a news page that’s specifically formatted for the iPod touch (or iPhone),” says Kellenberger. “So instead of having to boot up their laptop and find power and plug it in, they can pull this out of their pocket, hit one button and go to a Web page that has information just for them, right off the cuff.”

But Riffée said the point of all this is not just to have students access nifty programs. It’s to prepare them for jobs in pharmacy, where he sees these kinds of portable devices as the future in pharmacy practice.

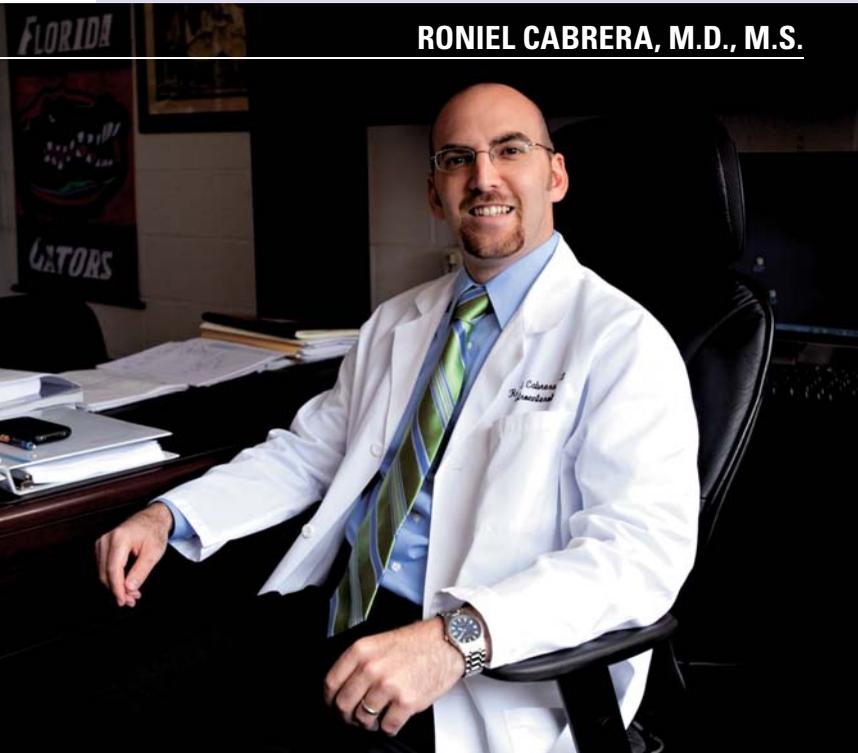
“This is another way our students will be highly skilled when they enter any pharmacy practice setting,” Riffée said.

Kellenberger added, “We don’t want our students just to go to a pharmacy practice setting and be told ‘These are the tools you’re going to use,’” he said. “We want them to know when they arrive that these are the advantages of these tools, these are some potential limitations and to be involved in guiding the development of technology to support the pharmacy profession.”



The rise of liver cancer

RONIEL CABRERA, M.D., M.S.



By Czerne M. Reid

Treating liver cancer can be tricky because physicians have to watch out for underlying liver disease at the same time. Hepatologist Roniel Cabrera, M.D., M.S., an assistant professor of gastroenterology, hepatology and nutrition, is part of a unique multidisciplinary initiative at UF in which physicians of various specialties meet to discuss the appropriate course of treatment for such patients. He talks with *The POST* about rising liver cancer rates and UF's unique multidisciplinary liver cancer clinic.

How many people does liver cancer affect?

Liver cancer is a major global health problem. It is the fifth most common cancer in the world and the third leading cause of cancer-related deaths. There are more than 600,000 new cases a year worldwide, and nearly the same number of related deaths, despite new therapies. That tells us we have a long way to go to influence the natural history of this disease.

Liver cancer rates are rising while other cancers are declining — why?

Liver cancer is the most rapidly rising cancer and this is directly attributable to the epidemic of chronic hepatitis C-related cirrhosis. About 4 million people in the United States are infected with chronic hepatitis C — up to half of those are undiagnosed and untreated. Most got infected 20 or 30 years ago while using intravenous drugs, but it takes that long for the virus to cause cirrhosis. Eighty to 90 percent of patients with liver cancer also have cirrhosis, which is the main risk factor. Other risk factors are hepatitis B infection and alcoholic cirrhosis. However, in the U.S. the rates of hepatitis B and alcohol-related liver cancer have remained unchanged for decades. Given the epidemics of obesity and diabetes in the United States, it is very likely that the metabolic syndrome, including nonalcoholic steatohepatitis, or NASH — in which fat accumulation in the liver causes inflammation and cirrhosis over time — will be a major emerging risk factor for liver cancer. In fact, both obesity and diabetes have been shown to be independent risk factors for chronic liver disease and liver cancer.

Can people reduce their risk for liver cancer?

Yes, and the first step is to recognize the risk factors for chronic liver disease including exposure to viral hepatitis B or C via unprotected sex with multiple sex partners, sharing needles, blood transfusions — particularly before 1990 — obesity, diabetes, and family history of liver disease or liver cancer. Individuals with those risk factors should have bloodwork done to check if they have viral hepatitis or other conditions that cause chronic liver disease. Treatment can decrease the risk of developing cirrhosis and liver cancer in up to half of all cases of hepatitis C. Checking for cirrhosis — by physical exam, bloodwork and/or an imaging study — is also important. People with cirrhosis have a 3 percent to 5 percent chance a year of developing liver cancer and should be monitored with an imaging study every six months.

Tell me about treatment for liver cancer.

Treatment can be overwhelming for patients, since most who have liver cancer also have underlying cirrhosis and the conditions are very complex to manage. Both must be considered during treatment. By the time most patients present with liver cancer they are at advanced stages — beyond eligibility for curative treatment such as liver transplantation or resection. Treatment options are then limited and mostly palliative. That might include embolizations — which block blood flow to tumors, but which have the potential to worsen the cirrhosis. In 2008 the FDA approved the first pill shown to improve survival in advanced liver cancer. While this is a major step forward, treatment with the pill — called sorafenib — improved survival by three months compared with placebo, so we need to do better.

What are some innovations in liver cancer treatment at UF?

One of the unique things we've done at Shands at UF is create a one-stop shop, liver cancer clinic to streamline patients' diagnosis and individualize their treatment plan according to the extent of the tumor and the severity of the cirrhosis. Physicians from multiple disciplines — hepatobiliary surgeons, radiologists, hepatologists, pathologists and oncologists — sit together in one room to come up with a personalized plan. That prevents patients from having to visit each doctor individually, which could take months and delay treatment. We have been doing this clinic for over two years and have presented our experience with this clinic at the 2008 annual American Society of Clinical Oncology gastrointestinal cancer meeting. **P**

Gaining (in)sight

Vision researchers make unexpected discovery in blindness trial

By John Pastor

Scientists have discovered that even in adults born with extremely impaired sight, the brain can rewire itself to recognize sections of the retina that have been restored by gene therapy.

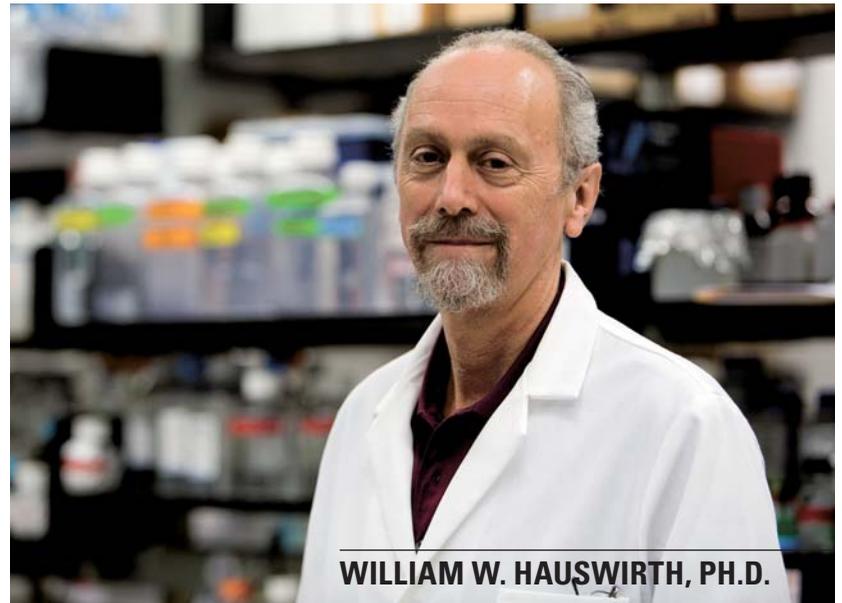
The discovery of the brain's surprising adaptability comes a year after three blind volunteers received doses of corrective genes to selected areas of their retinas at Shands at UF.

Now, more than a year later, researchers say tiny portions of the patients' retinas that have received gene therapy have kept their restored function, as much as 1,000-fold increases for day vision and 63,000-fold for night vision.

But in an unexpected finding, scientists writing in *The New England Journal of Medicine* Aug. 13 say the treated parts of the retinas may have acquired enough image-processing strength to rival the retina's normal center for visual perception, called the fovea, for the brain's attention.

The discovery suggests that even in adults with mature visual circuitry, the brain can find new ways to process optical information, say researchers with the UF Powell Gene Therapy Center and the Scheie Eye Institute at the University of Pennsylvania.

"When one patient came back for her 12-month visit, she said she could read the digital clock in her parents' car with her treated eye — something she was never able to do before," said William W. Hauswirth, Ph.D., a professor in the ophthalmology department at the UF College of Medicine. "That prompted us to measure where her gaze was fixed while looking at a variety of dim targets. This showed that she now has two preferred centers of vision rather than one, depending on the brightness of the object."



WILLIAM W. HAUSWIRTH, PH.D.

The new region is more sensitive to light, but it is not as precise as the fovea for making bright images sharp.

The patients have a rare, incurable form of blindness called Leber congenital amaurosis type 2, the most common cause of blindness in infants and children. In the type 2 form, photoreceptor cells cannot respond to light because a gene called RPE65 does not properly produce a protein necessary for healthy vision. **P**

One cell leads to another

UF scientists program blood stem cells to become vision cells

By John Pastor

UF researchers were able to program bone marrow stem cells to repair damaged retinas in mice, suggesting a potential treatment for one of the most common causes of vision loss in older people.

The success in repairing a damaged layer of retinal cells in mice implies that blood stem cells taken from bone marrow can be programmed to restore a variety of cells and tissues, including ones involved in cardiovascular disorders such as atherosclerosis and coronary artery disease.

"To our knowledge, this is the first report using targeted gene manipulation to specifically program an adult stem cell to become a new cell type," said Maria B. Grant, M.D., a professor of pharmacology and therapeutics at UF's College of Medicine. "Although we used genes, we also suggest you can do the same thing with drugs — but ultimately you would not give the drugs to the patient, you would give the drugs to their cells. Take the cells out, activate certain chemical pathways, and put the cells back into the patient."

In a paper slated to appear in the September issue of the journal *Molecular Therapy*, scientists describe how they used a virus carrying a gene that gently pushed cultured adult stem cells from mice toward a fate as retinal cells. Only after the stem cells were reintroduced into the mice did they completely transform into the desired type of vision cells, apparently taking environmental cues from the damaged retinas.

After studying the cell-transformation process, scientists were able to bypass the gene manipulation step entirely and instead use chemical compounds that



MARIA B. GRANT, M.D.

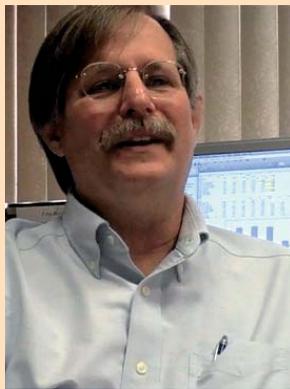
mirrored environmental conditions in the body, thus pointing the stem cells toward their ultimate identities as vision cells.

"This work applies to 85 percent of patients who have age-related macular degeneration," Grant said. "There are no therapies for this devastating disease." **P**

Spotlight on research

New hope for rare disease

UF researchers have safely given new, functional genes to patients with a hereditary defect that can lead to fatal lung and liver diseases. Three patients were able to produce trace amounts of the protective form of a protein called alpha-1 antitrypsin for up to one



MARK L. BRANTLY, M.D.

year, said College of Medicine researcher Mark L. Brantly, M.D., first author of the study. This could be a potential step toward a gene therapy for about 100,000 Americans with alpha-1 antitrypsin deficiency, a condition that leaves patients vulnerable to infection and life-threatening lung disease. The results of the clinical trial were reported in August in the online early edition of the *Proceedings of the National Academy of Sciences*.

Leukemia's genetic links

A multicenter team of childhood cancer researchers has discovered two genetic variations linked to an increased risk for acute lymphoblastic leukemia, or ALL, the most common childhood cancer in the United States. Because these genetic glitches point to a specific subtype of the disease, identifying them in children who already have leukemia could improve treatment, says UF epidemiologist Meenakshi Devidas, Ph.D., a co-author on the study published recently in *Nature Genetics*. Children with this specific subtype of ALL, known as B-hyperdiploid, tend to respond well to chemotherapy. Led by St. Jude Children's Research Hospital scientist Mary Relling, the research resulted from a genomewide association study to check for genetic variations linked to the common cancer.



MEENAKSHI DEVIDAS, PH.D.

Exergame away the pain?

New UF study to examine effect of health games on exercise, chronic pain



PHOTO BY SARAH KIEWEL

A new study combines physical activity with interactive video games to examine pain levels of women with knee osteoarthritis. Peggy Smith, recruitment coordinator for the Aging and Rehabilitation Research Center at UF, tries out the bike as Rida Laeeq, student volunteer research assistant, watches.

By Jill Pease

If exercise is fun, could it distract you from the pain of aching joints?

That's a question UF researchers hope to answer with a new study that will examine pain levels of women with knee osteoarthritis as they participate in "exergaming" — physical activity that combines interactive video games.

The study is supported by a \$113,000 grant from the National Institute on Aging to UF's Claude D. Pepper Older Americans Independence Center.

"Arthritis is one of the leading causes of pain," said lead investigator Bridgett Rahim-Williams, Ph.D., M.P.H., M.A., a research assistant professor in the College of Public Health and Health Professions' department of behavioral science and community health. "Physical activities, such as walking, swimming and cycling, have been shown to have significant benefits, including reducing pain and improving quality of life for persons with arthritis. We hope to learn from this study the impact of pain on physical activity and if participants who enjoy the exercise will report less pain."

The most common type of arthritis, osteoarthritis, is caused when joint cartilage wears down. The Arthritis Foundation estimates that 27 million Americans have osteoarthritis, with knee and hip joints most frequently affected by the disease.

During the study, the women will ride a stationary bike that is connected to a popular car racing video game. Riders control the car on the screen with their pedaling as they compete against other virtual cars. Participants will cycle for 15 minutes with and without the game and will be asked to rate their pain levels at five-minute intervals.

"If women find a physical activity that is fun, perhaps they will do it even in the face of pain, and when people are more physically active their health outcomes improve," Rahim-Williams said.

Researchers are seeking African-American and Caucasian women who are between the ages of 50 and 70 and have a diagnosis of knee osteoarthritis to participate in PPAAS: the Pain, Physical Activity, Aging and Arthritis Study. The one-time visit will last up to two hours and participants will receive a \$50 gift card as compensation. For more information, please call 352-273-6091. **P**

PHOTO BY SARAH KEWEL

Rebuilding RESEARCH

Grant fuels years of progress in College of Dentistry

By Laura Mize

Shannon Wallet, Ph.D., joined the College of Dentistry faculty in 2007, thanks to a grant focused on improving research efforts at dental schools from the National Institute for Dental and Craniofacial Research.

She came to UF without her own funding or experience running a lab.

Now she holds three grants that pay her salary, outfit her lab and fund her research.

“They (the NIDCR) were concerned that the infrastructure for research in U.S. dental schools was starting to erode a bit, and numbers supported them,” said Robert Burne, Ph.D., chair and a professor of oral biology.

A report evaluating the college’s research efforts revealed some positives and one main negative: low funding to clinical departments.

Burne said the report called for “a plan to strengthen our basic sciences, where appropriate, and then to enhance the pool of researchers who could conduct translational and clinical research.”

“Translational research” can easily be applied to clinical practice, offering new solutions for providers and patients. Burne said it was lacking at the college before the NIDCR grant.

“I think people were really frustrated because they’re doing very basic science ... but it was really hard to find the clinicians to collaborate with,” he said.

The college submitted a plan to the NIDCR to fix these problems. It called for hiring new research faculty to focus on working with clinicians and for providing research training for some of the college’s faculty.

UF’s plan won a \$2 million grant, as did plans from five other institutions. The college and the division of sponsored research matched the NIDCR funds, and Douglas Barrett, M.D., then senior vice president for health affairs, promised the college 12,000 square feet of additional space.

Enter Wallet and six other new faculty members: Seunghee Cha, D.D.S., Ph.D., an

assistant professor of oral and maxillofacial surgery and oral diagnostic services and oral biology; Ozlem Yilmaz, D.D.S., an assistant professor of periodontology; Lakshymma Kesavalu, B.V.Sc., M.Sc., an associate professor of periodontology; David Culp, Ph.D., a professor of oral biology; Scott Grieshaber, Ph.D., an assistant professor of oral biology; and Lorena Baccaglini, D.D.S., Ph.D., an assistant professor of community dentistry and behavioral science.

The college recruited some existing faculty members for research training. Burne said there is more cooperation now between research and clinical departments and between the college and people working in other areas on campus.

“If five years ago you said, ‘What does Florida do?’ most people would have said, ‘They’re really good at oral infectious diseases and host response, and they do some pain work,’” Burne said. “Now it’s expanded to oral and systemic health connections.”

More faculty members are receiving grants, too. In fiscal year 2007, UF’s College of Dentistry received \$6.6 million from the NIDCR and was ranked ninth among U.S. dental schools for money received from the institution. In fiscal year 2008, the NIDCR gave the college \$8.1 million, moving it to the No. 4 spot.

The money from the NIDCR is paying off for about 45 kids in Tallahassee, too.

Wallet is working with other faculty members, including principal investigator Luciana Shaddox, D.D.S., Ph.D., to determine why the children have aggressive periodontitis.

The disease causes swelling in the mouth, severe bad breath and bone and tooth loss. Cases of aggressive periodontitis in children are rare.

The researchers want to understand why so many children in such a small area have the disease — which is caused by an inflammatory response — and how to best treat it. The work is a perfect example of the translational research the college has been promoting, Burne said.

Shaddox runs the clinical team. Wallet and her employees test blood and tissue samples to determine which bacteria cause the patients’ extreme inflammatory responses. Meanwhile, the patients take antibiotics and receive deep cleanings every three to six months. For those who follow the plan, the results are exciting.

“We have been able to save a lot of teeth from extraction just by keeping this regimen strictly, so we’re very happy with the results,” Shaddox said. 

College of Dentistry researcher Shannon Wallet (left) obtained funding for her research from a \$2 million grant the college received to bolster translational science. Dr. Luciana Shaddox’s team (below) works with Wallet to uncover why a population of children in Tallahassee has aggressive periodontitis.



Fighting for Children

Professor's work bridges academic medicine, public health and child advocacy



By Betty Poole

Read almost any *Florida Times-Union* newspaper from the past 15 years and chances are you'll spot the name of UF pediatrician Jeff Goldhagen, M.D., M.P.H. — as a news source, newsmaker or letter writer. To him, it's just another way of helping children.

As an associate professor and chief of the division of community pediatrics at the UF College of Medicine-Jacksonville, Goldhagen develops and oversees programs that enhance the health of all children in the community, particularly those with special needs. His team of 15 UF faculty members cares for children and their families at clinics,

hospitals and in communities across Jacksonville. Through its integration with the Duval County Health Department and other community partners, the division serves patients, trains residents, conducts research and works to develop systems of care to reach the most marginalized children and families.

Like all UF physicians, Goldhagen excels at multitasking. You might find him on his BlackBerry discussing funding for mental health programs while a colleague from the United Kingdom rings his desk line. Meanwhile, he writes on his laptop, acknowledging a pediatric medical resident who has arrived for one-on-one training. Papers stacked around his desk represent projects aimed at improving children's health.

Goldhagen is particularly proud of the academic-public health partnership between UF and the DCHD, which has received national recognition and generated millions of dollars in contracts and grants on behalf of children's health. DCHD's pediatric network, staffed in part by UF clinicians, is the largest in Florida.

"We are contributing to the future definition of community pediatrics here in Jacksonville," Goldhagen said. "We've created a model where the general practitioner of the past has morphed into the community pediatrician of the future who will focus on marginalized communities of children by addressing their specialized health-care needs as well as social and environmental determinants."

A huge challenge facing pediatricians is improving the standards of children's health and well-being in the U.S., which consistently ranks lowest of all developed nations, especially in the South, Goldhagen said.

"We mistreat children more than any other developed country physically, economically and educationally, as a matter of public policy," he said, citing the aftermath of Hurricane Katrina as an example of child suffering resulting from unmet health needs, separation from families and disruption of school and child care.

Goldhagen has worked worldwide to advocate for children's rights and equity. In the past year he has traveled from Canada to the West Bank to train child health professionals on these issues. Most recently, he coordinated an international videoconference on the effects of global climate change on children's health.

After earning his medical and Master of Public Health degrees, Goldhagen practiced medicine in underserved communities — ranging from poor neighborhoods in Minneapolis to refugee camps in Thailand. He helped develop child health programs in Ethiopia, Guatemala, Romania and the Dominican Republic from the mid-1980s to the early 1990s, when he said the children's rights movement took hold.

In 2006, Goldhagen and a handful of colleagues founded the Society for Equity in Child Health, a U.S.-based organization to advance the principles and practices of children's rights, social justice and equity. In December, he spent a week in Turkey training child health professionals from countries such as Greece, Iraq, Azerbaijan, Serbia and Bulgaria, then traveled to the West Bank to explore opportunities to introduce the training into Israel and Palestine.

In a recent letter to the editor of the *Times-Union*, Goldhagen urged health-care professionals to be informed and use the tools of advocacy and public policy to effect change in Gaza, where the impact of war on children is deplorable, he writes.

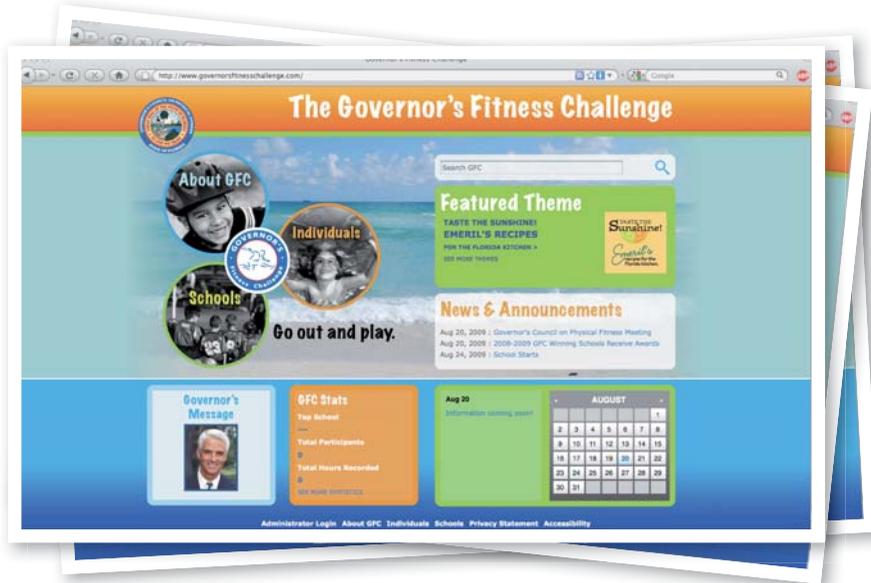
"We hope that at some point we can use children's rights to bridge a group of professionals who have not worked together ... for children's health and well-being," he said.

He may be a doctor and an advocate, but Goldhagen says the role that has taught him the most about children is actually "dad."

"I learned that they are who they are at birth," said the father of four daughters and one son. "Just point them in the right direction and get out of their way." **P**

Fitness 2.0

UF developed Web site to help improve physical fitness in kids



By April Frawley Birdwell

Surrounded by Gov. Charlie Crist and star athletes such as former Tampa Bay Buccaneer Derrick Brooks and tennis star Jennifer Capriati, state leaders on Aug. 20 unveiled a UF-developed Web site aimed at increasing physical activity in children.

UF informatics specialists teamed with the state Department of Health, Crist and other agencies to expand and improve the Web site for the Governor's Fitness Challenge, an eight-week program that allows children and schools to earn awards and recognition for their progress and involvement in physical activities.

The interactive site made its debut at the Governor's Council on Physical Fitness meeting in Tampa.

Complete with online tools, statistics and even healthy recipes from star chef Emeril Lagasse, the new and improved Governor's Fitness Challenge Web site should allow more children than ever to participate in the program, says Narayan Raum, assistant informatics manager for the UF Clinical and Translational Research Informatics Program in the College of Medicine department of epidemiology and health policy research.

"To actually be involved in a project that could potentially help a lot of kids get even just an extra 10 minutes of exercise a day is very exciting," said Raum, whose team developed the site. "With the overall positive impact this could have on many children, there is nothing to lose here. Even if 10 kids get healthier because they were involved, it makes it worthwhile."

Prior to the new site, students and schools had to send forms and written charts of activity to the state in order to participate. Now, children and teachers can log in to the Web site, where they can track their time and even view live statistics.

The program starts Sept. 1 for elementary schools and Nov. 18 for middle schools. Although the challenge is school-based, homeschooled children and students in schools that do not participate can take part in the program, too.

Led by project manager Erik Henrikson, UF's Clinical and Translational Research Informatics Program software engineering specialists began developing the site in January.

For more information and to view the site, visit www.governorsfitnesschallenge.com. **P**



PHOTO BY SARAH KIEWEL

The GIFT that SAVES

State launches new online organ donor registry

By April Frawley Birdwell

A year ago, Kris DenBesten knew little about organ donation and transplants. He knew they happened, but it just wasn't something he thought about. Ever.

That changed Dec. 24 when his then 9-year-old daughter, Gracyn, was rushed to the emergency room at a hospital near their Orlando home. A virus was attacking her heart. By Dec. 27, she was flown to Shands at UF, where UF surgeons would implant a Berlin Heart, a biventricular assist device, in her to keep her going until she could undergo a heart transplant.

On April 15, Gracyn got a new heart.

"She is a healthy 10-year-old that loves to sing and run around with her friends. We are so thankful," said DenBesten who shared his story in the Shands at UF Atrium during an event geared to encourage Shands employees to register to be organ donors. "She's a miracle. If there is anything she can do to promote (donation), she wants to do it. We want to do it."

The Shands event took place just a few days after the state officially launched the Joshua Abbott Organ and Tissue Donor Registry, Florida's new online donor registry, in Tallahassee.

The new site, which is linked to the Department of Motor Vehicles, now allows potential donors to register online, state their wishes and access facts about donation, said Kathleen Giery, a spokeswoman for Donate Life Florida, which runs the state registry.

For Karen Deeter, the launch of the new registry was another bittersweet victory for her son, Joshua Abbott, a 30-year-old Gainesville man who died in November 2006 after a lifelong battle with cystic fibrosis.

By speaking to the Florida Legislature, Abbott had helped change a law that prohibited Medicaid from paying for adult lung transplants. After his own double lung transplant in 2005, he planned to continue his advocacy work for organ donation and transplantation, but died almost a year later after complications. His healthy organs were donated to other patients.

Abbott had grown close to state Rep. Larry Cretul and Sen. Steve Oelrich, who led passage of the registry bill. Cretul asked that the registry be named for Abbott.

"He told one of his doctors that speaking with legislators would be his legacy," Deeter said. "My husband and I decided to take up his cause since he is no longer here." **P**

COLLEGE OF DENTISTRY

LUISA F. ECHETO, D.D.S., M.S., a clinical assistant professor of prosthodontics, recently received the Florida Dental Association's Dental Educator Award. Echeto was nominated by UF student members based on her "outstanding contributions to the quality of dental education." Echeto serves as the college's Predoctoral Prosthodontics Program director.



Luisa F. Echeto

COLLEGE OF MEDICINE

ANTHONY A. BAVRY, M.D., M.P.H., an assistant professor of medicine, has been named the Stop Heart Disease Researcher of the Year by the Florida Heart Research Institute. Board-certified in internal medicine, cardiovascular medicine and interventional cardiology, Bavry has already authored numerous peer-reviewed articles, written seven book chapters and edited his own textbook, *Acute Coronary Syndromes in Clinical Practice*, and is currently editing two more.



Anthony A. Bavry

JUAN CENDAN, M.D., an associate professor of surgery, was appointed the college's assistant dean for simulation and medical education. Cendan has been a member of the UF College of Medicine since 2001. He also serves as the clerkship director for the department of surgery and the medical director for the Harrell Professional Development and Assessment Center, a facility that allows medical students to practice their skills during sessions with patient-actors.



Juan Cendan

SARA JO NIXON, Ph.D., a professor of psychiatry, has been elected president of the Research Society on Alcoholism. Nixon is director of the Biobehavioral Core at UF's Clinical and Translational Science Institute, as well as chief of addiction research in the department of psychiatry. She is known for her work researching substance abuse and its effects. She will serve as president of the Research Society on Alcoholism for a one-year term. The society is an international organization based in Austin, Texas, that has more than 1,600 members.



Sara Jo Nixon

BRENT REYNOLDS, Ph.D., an associate professor of neurosurgery, recently received the Atena Onlus Association research award from the Catholic University in Rome and the university's teaching hospital, the Gemelli



Brent Reynolds



Manuel Arreola



Robert Pelaia

MANUEL ARREOLA, Ph.D., an assistant professor of radiology in the College of Medicine, and **ROBERT PELAIA**, J.D., senior university counsel for health affairs in Jacksonville, recently completed the university's 2008-09 Next Level Leadership program. The UF-centered leadership program includes a series of events over nine months for 15 emerging leaders. "We talked about change management," Pelaia said. "We talked about diversity issues. We explored and discussed numerous leadership competencies. We had the opportunity to meet with several leaders who are very high up in the university administration."

University Polyclinic. Reynolds was honored for work that began while he was a graduate student at the University of Calgary, where he helped discover that mice continue to produce brain cells throughout their lives. The finding drastically changed scientists' perception of the brain and its ability to repair itself.

COLLEGE OF PHARMACY

TWO RESEARCHERS in the college have received 2009 Opportunity Funds Awards from the UF Division of Sponsored Research. **HENDRIK LUESCH, PH.D.**, an assistant professor of medicinal chemistry, received \$86,000 for his research, "In vivo target identification and antitumor efficacy of novel anticancer agents." **SIHONG SONG, PH.D.**, an associate professor of pharmaceuticals, received \$80,000 for his research, "Alpha 1 antitrypsin for treatment of lupus."



Hendrik Luesch



Sihong Song

EFE ODIA, a second-year doctoral student in pharmaceutical outcomes and policy, has been awarded a Health Science Student Fellowship from the Epilepsy Foundation for her research proposal, "Cost and quality of care in epilepsy: An episode of care approach." This fellowship provided \$3,000 to support the project.



Efe Odia

PUBLIC HEALTH AND HEALTH PROFESSIONS

RUSSELL M. BAUER, Ph.D., professor and chair of the department of clinical and health psychology, was elected president of the International Neuropsychological Society, the largest scientific organization in the field. Bauer is the fourth UF faculty member to be elected to the presidency of INS in its 42-year history. Paul Satz, Ph.D., Kenneth Heilman, M.D., and Leslie Gonzalez-Rothi, Ph.D., previously held the office. Bauer is board-certified by the American Board of Clinical Neuropsychology and is past president of the Clinical Neuropsychology Division of the American Psychological Association.



Russell M. Bauer

PATRICIA B. KRICOS, Ph.D., a professor of communicative disorders, was elected president-elect of the American Academy of Audiology, the world's largest professional audiology organization. Her duties include board liaison oversight of the government affairs, coding and reimbursement, and finance committees, as well as the practice policy advising council. Kricos' one-year term as the academy's president begins in July 2010.



Patricia B. Kricos

WHITNEY WALKER, a student in the master's in health administration program, received a Foster G. McGaw Graduate Student Scholarship from the American College of Healthcare Executives. Walker received \$5,000 to help offset tuition costs, student loans and other expenses.



Whitney Walker

COLLEGE OF VETERINARY MEDICINE

COLIN BURROWS, B.Vet. Med., Ph.D., chair of the department of small animal clinical sciences, has been named an honorary fellow of the Royal College of Veterinary Surgeons. Burrows, who also serves as chief of staff of UF's small animal hospital, is a board-certified veterinary internist, specializing in the study of canine and feline gastrointestinal, hepatic and pancreatic disease. His research focuses on canine gastrointestinal motility in health and disease, and on the relationship between diet and gastrointestinal disease.



Colin Burrows

MICHAEL SCHAEER, D.V.M., a professor of small animal medicine, will soon assume a new administrative role as special assistant to the dean. Schaeer, a member of UF's veterinary faculty since 1979, has served as associate chief of staff of UF's Small Animal Hospital and as chief of small animal medicine. In his new post, Schaeer will work with the Office for Students and Instruction to help advise and orient veterinary students. He will also work with the Office of Development and Alumni Affairs and will remain involved in programs for interns and residents.



Michael Schaeer



PHOTO BY SARAH KEWEL

The Doctors Dang

UF recruits two all-star siblings with roots in Saigon

By Elizabeth Connor

Nam Dang, M.D., Ph.D., newly named professor and deputy chief of UF's division of hematology and oncology, has decades of professional awards and accomplishments. But the one he wants to tell you about is the unexpected standing ovation he received as valedictorian of Highland Park High School in Dallas.

"We were complete outsiders to Highland Park and my focus while at HPHS had been academic, not necessarily social. The standing ovation meant to me that my family and I were accepted by the close-knit HP community, with its very high respect for education and academic achievement. We were no longer outsiders."

Nam arrived as a freshman at Highland Park High School in 1977 with virtually no English, after almost two years of nomadic life in California refugee camps. He and his family had left Saigon in the belly of a C-130, just days before the fall of the city in April 1975.

But Nam's arc from immigrant to academic all-star was just the beginning — and in the Dang family, not even unique. After high school, Nam and his brother Long, younger by 11 months, blazed a trail in stunning lockstep: magna cum laude at Harvard College, Ph.D. in immunology at Harvard University, M.D. at Harvard Medical School.

Nam is one of nine new hematology and oncology faculty members arriving at UF this

summer, a staggering influx of intellectual talent that also includes Long, an associate professor in hematology and oncology. Their appointments follow decades of separate professional lives — Nam most recently at M.D. Anderson Cancer Center and the Nevada Cancer Institute, Long at Johns Hopkins University and the University of Michigan. Both are delighted that UF has both broadened their professional opportunities while drawing more closely their personal ties.

"In this country, it is not that common that families are together, but in Vietnam, it is," Nam explained.

Nam and Long are in adjoining offices. Among the unopened boxes and yet-to-be-hung coat hooks are clinic notes and other evidence the brothers already are consulting each other about their respective patients — Nam in lymphoma and Long in gastrointestinal cancers.

Their research paths have branched off in separate directions. For virtually all of his research career, Nam has focused on the role of

CD26, a significant player in T-cell lymphoma and other cancers, and key in the body's ability to regulate the immune system, complete signaling pathways and carry out the routine death and disposal of cells.

"I'm thinking about getting a vanity plate that says, 'CD26,'" Nam quipped.

Long's interest is in the development of the vasculature of tumors, a field broadly known as angiogenesis. He remembers a mentor at Harvard, the late Judah Folkman, M.D., and was attracted to UF by the opportunity to work with hematology and oncology department division chief Carmen Allegra, M.D. UF's growing emphasis on translational research also is a draw, Long says.

"Under Dr. Allegra's guidance, this is a good opportunity to interface between the preclinical and the clinical," he said.

Allegra emphasizes the individual accomplishments of the brothers, noting they are each "outstanding translational scientists as well as outstanding care providers."

For the Dang brothers, however, the line does not have to be so sharply drawn. When asked to identify what drew him to UF, Long slides into the first-person plural, comfortably speaking for both himself and his brother.

"We're thankful to be able to translate from bench-to-bedside and bedside-to-bench, and thankful to have the opportunity to care for our patients," he said. **P**

SEE YA!



PHOTO BY SARAH KIEWEL

During a recent visit to Shands at UF, heart transplant recipient Alexzander Wood visited with pediatric and neonatal respiratory therapist Timothy Bantle. The pair became buddies in 2006 during Wood's stay at the hospital. Wood was the first patient to receive the Berlin Heart, a biventricular assist device that kept him alive while he waited for a new heart. Bantle describes Wood as "the little brother I never had."



PHOTO BY SARAH KIEWEL

UF trauma medical director Dr. Lawrence Lottenberg helps fourth-year medical student Robert Weir find the correct location to insert a chest tube on the department of surgery's new simulator, TraumaMan. TraumaMan, which consists of synthetic human tissue, enables students to practice a wide variety of advanced surgical procedures.



PHOTO BY SARAH KIEWEL

On July 29, kindergarteners through eighth-graders enrolled in Gainesville's O2B Kids summer camp were invited by the department of urology to operate the the da Vinci robotic surgery system in the Shands at UF Atrium. Dr. Sijo Parekattil, who has performed more than 100 surgeries using the robot, explains the system to the children.

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